

# From MDS Coding to Five-Star Outcomes: Strategies for Quality and Compliance

Thursday, April 9, 2026

9:00a - 4:00p

**Presidential Oaks**

(200 Pleasant Street, Concord)

## Audience:

- Experienced MDS Coordinators
- Administrators
- Directors of Nursing
- Clinical Reimbursement Specialists
- Other clinical leadership involved in MDS oversight and quality improvement.

## Format:

In-person workshop combining didactic education with interactive case discussion and peer collaboration.

**6.0 CEUs  
available**

The Minimum Data Set (MDS) influences far more than reimbursement. Coding accuracy and documentation integrity directly impact publicly reported quality measures, Five-Star ratings, regulatory compliance, and organizational reputation.

With recent updates to the Nursing Home Five-Star Quality Rating System, providers must ensure that clinical documentation, interdisciplinary communication, and MDS coding practices are aligned with regulatory expectations and quality improvement goals.

This workshop will explore key MDS coding areas that significantly influence quality measures and Five-Star ratings. Participants will review regulatory updates, discuss documentation and coding best practices, and apply learning through interactive case scenarios designed to strengthen clinical understanding and interdisciplinary collaboration.

### Key Topics

#### **Regulatory and Industry Updates**

Overview of recent changes impacting the Nursing Home Five-Star Quality Rating System and current regulatory priorities affecting skilled nursing facilities.

#### **Understanding Quality Measures**

Discussion of how quality measures are calculated, how MDS coding influences outcomes, and how facilities can interpret quality measure reports to guide improvement efforts.

#### **High-Impact MDS Coding Areas**

Review of selected MDS coding areas that significantly influence quality measures and Five-Star ratings, including clinical documentation considerations and common coding challenges.

#### **Documentation and Quality Outcomes**

Exploration of the relationship between interdisciplinary documentation, accurate MDS completion, and publicly reported quality outcomes.

#### **Interactive Case Application**

Participants will engage in case-based scenarios to apply coding principles, evaluate documentation, and discuss best practices with peers.

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## **Participant Engagement**

This session includes interactive discussion and case studies that allow participants to:

- Apply coding concepts to real-world scenarios
- Evaluate documentation supporting MDS coding decisions
- Share experiences and strategies with peers
- Identify opportunities to strengthen facility quality improvement processes

## **How Participants Should Prepare for the Session**

To maximize the value of this interactive workshop, participants are encouraged to bring examples of current facility quality data and reports used to monitor performance.

Recommended materials include:

- Most recent Quality Measure (QM) reports or CASPER reports
- Five-Star Quality Rating preview or facility rating reports, if available
- Examples of internal quality dashboards or QAPI monitoring tools used by the facility

These materials will allow participants to follow along during discussions on how quality measures are calculated, practice interpreting facility data, and identify potential opportunities for improvement.

Participants are also encouraged to reflect on current processes within their organizations related to MDS completion, interdisciplinary documentation, and quality measure monitoring in order to fully engage in group discussion and case-based learning activities.

## **Learning Objectives**

At the conclusion of this program, participants will be able to:

- Describe recent updates to the Nursing Home Five-Star Quality Rating System and their implications for skilled nursing facilities
- Explain the relationship between MDS coding, publicly reported quality measures, and Five-Star ratings
- Identify best practices for coding high-impact clinical areas that influence quality outcomes
- Interpret quality measure data and apply findings to facility quality improvement efforts
- Strengthen interdisciplinary collaboration to support accurate documentation and MDS completion

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Robin Sweeney is a highly experienced nurse with over 15 years of expertise dedicated to clinical reimbursement and quality oversight. Currently serving as a Clinical Reimbursement Associate for Celtic Consulting, Robin brings a deep-rooted strength in education, sharing her knowledge to empower peers and colleagues. Her strategic approach, coupled with an excellent reputation for resolving complex challenges and driving operational enhancements, makes her an invaluable asset in the long-term care field.

Robin is RAC and QAPI certified and an active member of AAPACN, reflecting her commitment to professional excellence. She is well-versed in all aspects of clinical reimbursement and quality, blending her technical acumen with a warm, approachable demeanor that resonates with clients and colleagues alike. An engaging and effective presenter, Robin excels in delivering impactful insights that inspire confidence and drive improvement.



**Robin Sweeney, RN,  
RAC-CT, RAC-CTA, QCP**

**Celtic Consulting**

**Register now at [www.nhhca.org](http://www.nhhca.org)**

**Or <https://nhhca.weblinkconnect.com/atlas/events-v4/register/8066>**

**NHHCA Members: \$100.00 / County-based: \$125 / Non-members \$150.00**

Check-in begins at 8:30a

Program: 9:00a - 4:00p

Coffee, snacks, and lunch will be provided



**NEW HAMPSHIRE  
HEALTH CARE ASSOCIATION**

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