Clarification of I5100 Quadriplegia Coding

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Quadriplegia is defined as paralysis of all four limbs. It is a severe or complete loss of motor function in all four limbs. If a resident has meaningful coordinated use of their wrist, elbow and hand, such that they are able perform activities like eating and operating a joystick. This does not meet the criteria for coding quadriplegia on the MDS, as the resident has the functional ability to perform tasks. While the resident may meet some of the various definitions of quadriplegia in the industry, this example does not meet the intention of the diagnosis for MDS coding purposes and therefore should not be coded on the MDS. If the resident has some level of gross motor movement of the arm, but not to point of being able to perform tasks, then quadriplegia can be coded on the MDS.

For MDS coding purposes the quadriplegia must be the result of a spinal cord injury. Functional quadriplegia is not coded on the MDS. Functional quadriplegia refers to complete immobility due to severe physical disability or frailty. Conditions such as cerebral palsy, stroke, contractures, brain disease, advanced dementia, etc. can also cause functional paralysis that may extend to all limbs hence, the diagnosis functional quadriplegia. For individuals with these types of severe physical disabilities, where there is minimal ability for purposeful movement, their primary physician-documented diagnosis should be coded on the MDS and not the resulting paralysis or paresis from that condition.

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