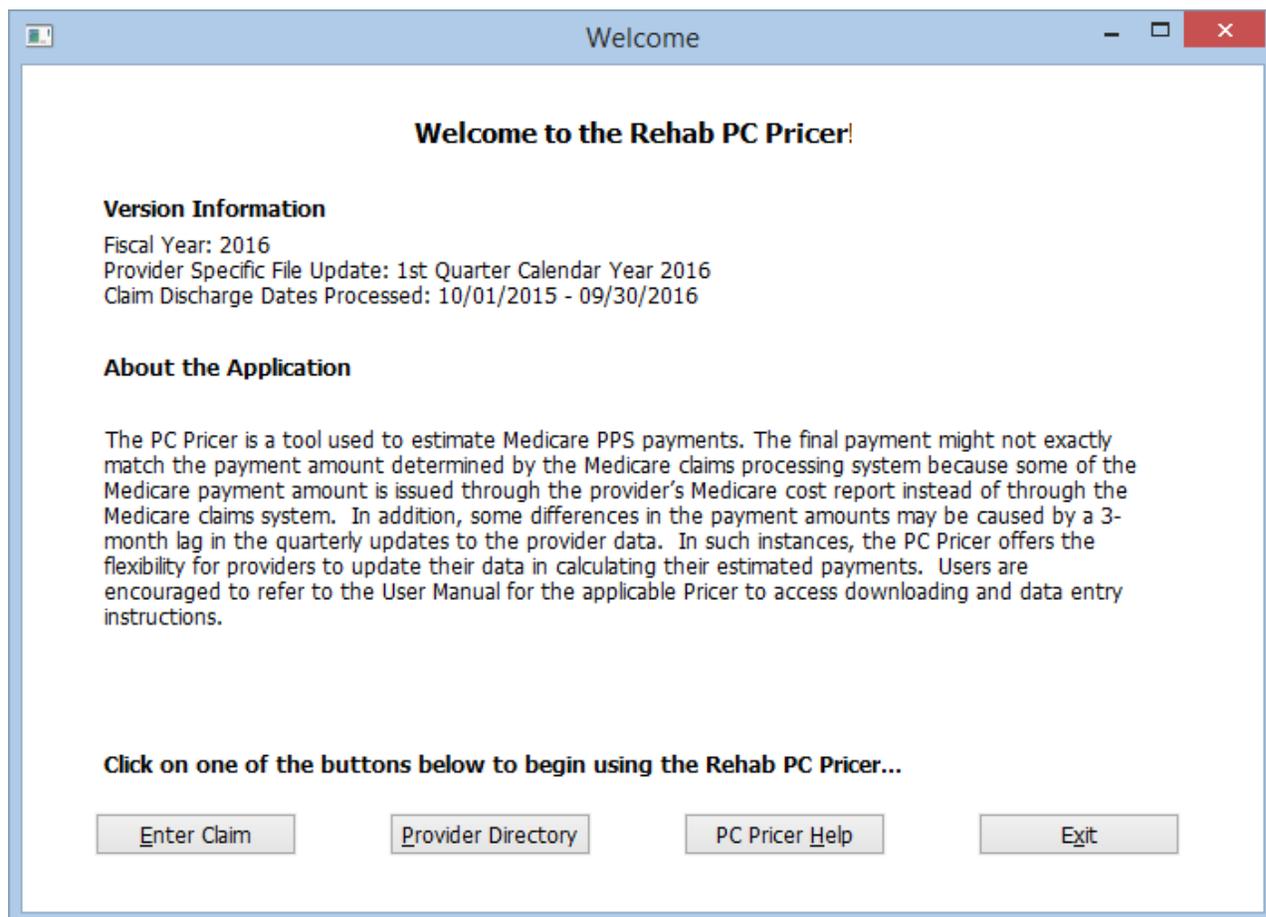


Data Entry and Calculation Steps for the Inpatient Rehabilitation Facility PPS PC Pricer

When you run the pricer executable, the 'Welcome' screen will appear.

Hit 'Enter Claim' to go to the Claim Entry screen.



Enter the values on the Claim Entry screen as noted below.

The screenshot shows a software window titled "Claim Entry" with a standard Windows-style title bar. The main content area is titled "IRF Prospective Payment Claim" and contains the following text: "Enter all claim information requested below. Press Submit Claim when complete to calculate the prospective payment." Below this is a large rectangular form containing the following data:

Provider Number: 050006	Patient ID: 111 - 22 - 3333
Admit Date: 01/01/2016	Patient Status: 00
Discharge Date: 01/06/2016	Spec Pmt Ind: 0
Covered Charges: \$10,000.00	Covered Days: 005
CMG: D0101	LTR Days: 00
Req Threshold: N	Req Penalty: N

At the bottom of the window, there are five buttons: "Submit Claim", "Clear Screen", "Provider Directory", "PC Pricer Help", and "Exit".

BILL PROVIDER NUMBER = Inpatient Rehabilitation Facilities are in the OSCAR range of xx3025 – xx3099, or xxTxxx, or xxRxxx.

Note: The National Provider Number (NPI) on the claim (if submitted by the hospital) is not entered in this field. You should receive both the OSCAR number and the NPI number on the claim. In rare circumstances, however, a hospital may only submit their NPI number without their OSCAR number. Should this occur, you will have to contact the billing hospital to obtain their OSCAR number as the PC Pricer software cannot process using the NPI.

PATIENT ID NUMBER = The ID number can be any number you assign.

BILL CMG = Enter the CMG from the claim here. (FL 44 of the UB-04).

The CMG is a 5-digit code, beginning with A, B, C, or D. It is located in the HIPPS/HCPCS field (FL 44 of the UB 04) on the claim, specifically on the Revenue Code 0024 line. Note that the IRF completes an assessment of the patient and this code comes from the PAI (patient assessment instrument) the provider uses.

PATIENT STATUS = Enter the patient status code from the claim here (FL 17 of the UB 04).

Note that there is a transfer policy under IRF PPS. The Pricer will pay a per diem payment if the length of stay on the claim is less than the average length of stay for the CMG and the PS Code equals 02, 03, 61, 62, 63, or 64.

SPEC PAYMENT IND 0,1 = IHS/CHS should enter '0'.

0 = default

1 = Claim has Condition Code 66 entered

COVERED DAYS = Enter the number of covered days on the claim.

LTR DAYS = N/A for IHS/CHS. Lifetime Reserve (LTR) Days are Medicare days and are ONLY applicable for Medicare beneficiaries.

REQUIRED THRESHOLD Y/N = Default is 'N'. Entering 'Y' will show you what the outlier threshold is for this provider, but will not price the claim. IHS/CHS should enter 'N'.

REQUIRED PENALTY Y/N = N/A for IHS/CHS. For Medicare purposes, this 25% penalty is applied when an IRF claim has a date in FL 45 which is equaled to or greater than 28 days prior to the discharge date.

BILL ADMIT DATE MM/DD/YY = Enter the admission date on the claim ((the ADMIT date in FL 12)).

BILL DISCHARGE DATE MM/DD/YY = Enter the discharge date on the claim (the THROUGH date in FL 6).

BILL CHARGES = Enter the total covered charges from the claim.

At this point, hit 'Submit Claim' and the results screen will come up next.

PPS Payment Results

IRF Prospective Payment Results

Provider : 050006

Patient ID : 111-22-3333	CBSA : 05	Penalty Applied : NO
Pat Status : 00	Wage Index : 01.3215	Fac Spec Amt : \$0.00
CMG : D0101	Priced CMG : D0101	Tch Penalty Amt : \$0.00
Payment Ind : 0	Rel Wgt CMG : 0.65890	Fed Penalty Amt : \$0.00
Admit Date : 20160101	ALOS CMG : 09	Out Penalty Amt : \$0.00
Disch Date : 20160106	LIP Pct : 0.02780	LIP Penalty Amt : \$0.00
FY Beg Date : 20151001	LIP Power : 0.31770	Teaching Amt : \$0.00
Len of Stay : 5	Fed Rate Pct : 1.00000	Fed Adj Amt : \$14,392.83
Cov Days : 5	Fac Rate Pct : 0.00000	Out Adj Amt : \$0.00
LTR Days : 0	Bud Neut Adj : 15478.00	LIP Adj Amt : \$400.12
Reg Days : 5	Nat Lab Pct : 0.71000	Fac Adj Amt : \$0.00
Charges Amt : \$10,000.00	Non Lab Pct : 0.29000	Grand Tot Amt : \$14,792.95

CMG Desc: Stroke with Motor >51.05.,without comorbidities

COM Desc: TIER 3 D

RC: 00 PAID NORMAL CMG PAYMENT WITHOUT OUTLIER

At this point, follow the options at the bottom of the screen.

