

**INPATIENT REHABILITATION FACILITY
QUALITY REPORTING PROGRAM (IRF QRP)
QUESTIONS AND ANSWERS**

Current as of October 2018



#	Question Category	Question	Answer
1.	Inpatient Rehabilitation Facility (IRF) Quality Reporting Program (QRP) Overview and Data Submission Requirements and Deadlines	What are the current requirements of the IRF QRP?	<p>The Centers for Medicare & Medicaid Services' (CMS's) IRF QRP requires that IRFs submit quality measure data to CMS. IRFs must meet or exceed two separate data completeness thresholds: one threshold, set at 95 percent, for completion of quality measures data collected using the IRF-Patient Assessment Instrument (PAI) submitted through the Quality Improvement and Evaluation Systems (QIES), and a second threshold, set at 100 percent, for quality measures data collected and submitted using the Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN). Failure to submit the required quality data may result in a 2 percentage point reduction in the IRF's annual increase factor (AIF).</p> <p>The IRF QRP is described on the following website: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/</p> <p>The data submission deadlines are provided on the following webpage: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Data-Submission-Deadlines.html</p>
2.	IRF QRP Requirements	How are data collected and submitted for the IRF QRP? Are there other IRF QRP requirements beyond collecting and submitting the required patient assessment data?	<p>The IRF-PAI is the assessment instrument IRF providers use to collect patient assessment data for quality measure calculation and payment determination in accordance with the IRF QRP. Completion of the IRF-PAI is required for each Medicare Part A fee-for-service and Medicare Part C patient discharged from an IRF. The IRF-PAI is available to view on the following webpage: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-PAI-and-IRF-QRP-Manual.html. Section 4 of the IRF-PAI Manual can be found on the same webpage and provides ongoing guidance to providers in completing the Quality Indicator sections of the IRF-PAI.</p> <p>The measures included in the IRF QRP are provided on the IRF Quality Reporting Measures Information website: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Program-Measures-Information-.html.</p> <p>Data for the IRF QRP measures are collected and submitted through three methods:</p> <ul style="list-style-type: none"> • Inpatient Rehabilitation Facility – Patient Assessment Instrument (IRF-PAI) • Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN) • Medicare Fee-For-Service Claims <p>For detailed quality measure specifications, please refer to the IRF Quality Measures User's Manual, which can be downloaded from the following site: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Program-Measures-Information-.html.</p>

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#	Question Category	Question	Answer
3.	Rehabilitation units Participating in the IRF QRP	<p>My IRF is in Maryland. Is our facility included in the IRF QRP?</p> <p>Do we need to report health care–acquired infection data under the IRF QRP?</p>	<p>To determine whether a rehabilitation unit/hospital is included in the IRF QRP, the provider must determine whether it is being paid under Medicare’s IRF Prospective Payment System (PPS). If any of the following are true for a freestanding IRF or IRF unit, the IRF is paid under the IRF PPS and is subject to the requirements of the IRF QRP:</p> <ul style="list-style-type: none"> • The Medicare provider number ends in 3025–3099 • The Medicare provider number has a “T” in the 3rd position • The Medicare provider number has an “R” in the 3rd position <p>If any of the above criteria are true for the IRF, the IRF must comply with IRF QRP. Failure to submit the required quality data will result in a 2 percentage point reduction in the IRF’s annual payment update.</p> <p>For more information about the IRF QRP, please visit http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/index.html</p> <p>Please check with your state about any state-specific requirements related to submission of quality data, including health care–acquired infection data.</p>
4.	IRF QRP Information Resources	What resources are available to remain informed about the IRF QRP?	<p>Several resources are available to help you stay informed about the IRF QRP:</p> <ol style="list-style-type: none"> 1) IRF QRP and IRF PPS websites: <ol style="list-style-type: none"> a) IRF QRP website: http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/index.html b) The “Spotlights and Announcements” page of the IRF QRP website: http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/Spotlights-Announcements.html c) IRF PPS website: http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/Spotlight.html 2) Proposed and final rules. These are published in the Federal Register and are typically released each year in April and August. Proposed and final rules are posted on both of these webpages: <ol style="list-style-type: none"> a) https://www.federalregister.gov/ b) http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/List-of-IRF-Federal-Regulations.html; 3) To receive mailing list notices and announcements about the IRF QRP, sign up at the following link: https://public.govdelivery.com/accounts/USCMS/subscriber/new 4) Notices about CMS Open Door Forums and other webinars related to the IRF QRP are announced on the following webpages: <ol style="list-style-type: none"> a) https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/Spotlights-Announcements.html

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		<p>b) https://www.cms.gov/Outreach-and-Education/Outreach/OpenDoorForums/ODFSpecialODF.html</p> <p>5) There are several help desks that IRF staff may contact to get answers for specific IRF QRP questions. The list of help desks and the type of help each help desk provides is given in the answer to Question 5 below.</p> <p>6) Professional and industry associations often share this information in newsletters, in emails, and at conferences.</p>	
5.	IRF QRP Help Desks	<p>Where can I find contact information for the various IRF QRP help desks?</p>	<p>There are several help desks that IRF QRP users may contact to obtain answers to specific IRF QRP questions. The help desks are listed below for your convenience.</p> <p>Please note that the CMS IRF QRP and Public Reporting Help Desk email systems are not secured to receive protected health information or patient-level data with direct identifiers. When sending emails to these email addresses, submitting patient-level data or protected health information may be a violation of your facilities' policies and procedures, as well as a violation of federal regulations (Health Insurance Portability and Accountability Act of 1996 [HIPAA]). Do <i>not</i> submit patient-identifiable information (e.g., date of birth, social security number, and health insurance claim number) to these addresses. If you are not sure whether the information you are submitting is identifiable, please contact your institution's privacy officer.</p> <p>Here is a list of the IRF QRP and other IRF help desks. If you are unsure which Help Desk to use, email your question to the IRF Quality Reporting Program (QRP) Help Desk and it will be directed to the appropriate help desk:</p> <p>IRF Quality Reporting Program (QRP) Email: IRF.questions@cms.hhs.gov</p> <p>Examples of issues this help desk can help you with include the following:</p> <ul style="list-style-type: none"> • IRF QRP requirements • Data submission timelines • IRF-PAI Quality Indicator items (Section B: Communication, Section C: Brief Interview for Mental Status, Section GG: Functional Status, Section H: Bladder and Bowel Continence, Section J: Falls, Section K: Swallowing, Section M: Pressure Ulcer Coding) • IRF-PAI quality measures • Claims-based quality measures (All-Cause Unplanned Readmission Measure for 30 Days Post-Discharge, Potentially Preventable Readmissions–Within Stay; Potentially Preventable Readmissions Post-Discharge; Discharge to Community; Medicare Spending per Beneficiary) • IRF QRP provider training materials • General IRF quality reporting questions <p>CDC/NHSN Email: NHSN@cdc.gov</p>

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			<p>Examples of issues this help desk can help you with:</p> <ul style="list-style-type: none"> • CDC quality measures: Catheter-Associated Urinary Tract Infection (CAUTI), Clostridium difficile Infection (CDI), and Influenza Vaccination Coverage Among Healthcare Personnel • NHSN enrollment, reporting, and data analysis <p>Data Submission and Data Validation Email: help@qtso.com Phone: 1-800-339-9313</p> <p>Examples of issues this help desk can help you with:</p> <ul style="list-style-type: none"> • Accessing QIES (username and password) • Data/record submissions • Case-mix group (CMG) Grouper classification • Submission/validation reports • Accessing Certification And Survey Provider Enhanced Reports (CASPER) • Inpatient Rehabilitation Validation and Entry System (JIRVEN) <p>IRF Public Reporting Help Desk Email: IRFPRquestions@cms.hhs.gov</p> <p>Examples of issues this help desk can resource can help you with:</p> <ul style="list-style-type: none"> • IRF Compare website • IRF data available on Data.Medicare.gov <p>IRF-PAI Clinical Items Email: help@qtso.com Phone: 1-800-339-9313</p> <p>Examples of issues this help desk can help you with:</p> <ul style="list-style-type: none"> • Identification information • Payer information • Medical information • Function modifiers and Functional Independence Measure (FIM™)instrument • Discharge information <p>IRF Medicare Policy Email: IRFcoverage@cms.hhs.gov</p> <p>Examples of issues this help desk can help you with:</p> <ul style="list-style-type: none"> • IRF Medicare reimbursement • Claims/billing • Eligibility and coverage requirements • Therapy information reporting • IRF-PAI requirements (for non-quality sections) <p>IRF Vendor Issues Email: IRFTechIssues@cms.hhs.gov</p>

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			<p>Examples of issues this help desk can help you with:</p> <ul style="list-style-type: none"> • IRF-PAI data technical specifications • Validation Utility Tool (VUT) (vendor tool to ensure software meets CMS requirements and will pass Assessment Submission and Processing (ASAP) edits) • Technical questions that are related to IRF-PAI data specifications <p>IRF QRP Reconsiderations Email: IRFQRPreconsiderations@cms.hhs.gov</p> <p>Examples of issues this help desk can help you with:</p> <ul style="list-style-type: none"> • Submitting requests for compliance determination reconsideration. IRFs must submit their request by the deadline included in the noncompliance notification letter distributed electronically using QIES and posted on the IRF QRP Reconsiderations webpage. • Submitting requests for exception or extension due to natural disaster or other extraordinary circumstances.
6.	Updates in the Fiscal Year (FY) 2018 IRF PPS Final Rule	What updates were made to the IRF QRP through the FY 2019 IRF PPS final rule?	<p>The FY 2019 IRF PPS Final rule included several updates to the IRF QRP. The IRF QRP updates include the following:</p> <ul style="list-style-type: none"> • The rule finalized the removal of Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay) (NQF #0680) measure from the IRF QRP beginning with the FY 2021 IRF QRP. IRFs will no longer be required to submit data on this measure for the purposes of the IRF QRP beginning with patients discharged on or after October 1, 2018. Instructions for coding these items on the IRF-PAI can be found in the answer to Question 8. • The rule also finalized the removal of the NHSN Facility-wide Inpatient Hospital-onset Methicillin resistant Staphylococcus aureus (MRSA) Bacteremia Outcome Measure (NQF #1716) measure from the IRF QRP, beginning with the FY 2020 IRF QRP. IRFs will no longer be required to submit data on this measure for the purposes of the IRF QRP beginning with October 1, 2018, admissions and discharges. <p>For more information, please see the FY 2019 IRF PPS Final Rule (83 FR 38576) at https://www.gpo.gov/fdsys/pkg/FR-2018-08-06/pdf/2018-16517.pdf</p>
7.	IRF-PAI Versions	When do we start using IRF-PAI versions 2.0 and 3.0?	<p>Version 2.0 of the IRF-PAI is to be completed for any patient discharged on or after October 1, 2018. Version 3.0 of the IRF-PAI is to be completed for any patient discharged on or after October 1, 2019.</p> <p>For more information, please see links below to the IRF-PAI version 2.0, IRF-PAI version 3.0, and a change table listing differences between both versions of the IRF-PAI:</p> <p>IRF-PAI Version 2.0: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/Downloads/Final-IRF-PAI-Version-20-Effective-October-1-2018.pdf</p>

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			<p>IRF-PAI Version 3.0: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/Downloads/Final-IRF-PAI-Version-30-Effective-October-1-2019-FY2020.pdf</p> <p>Change Table: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/Downloads/Final-IRF-PAI-Version-30-Change-Table.pdf</p>
8.	Flu Measure Removal	Given the removal of the Patient Flu Vaccination measure from the IRF QRP, what should providers code for the influenza data elements in the IRF-PAI?	These data elements will be removed from the IRF-PAI version 3.0, effective October 1, 2019. Beginning with October 1, 2018, discharges, IRFs should enter any of the valid codes or a dash (–) for O0250A, O0250B, and O0250C until the IRF-PAI version 3.0 is released. If you cannot enter a dash, please enter one of the other valid codes.
9.	IRF QRP Data Submission Deadlines	What are the data submission deadlines for the IRF QRP?	<p>Data submission deadlines for the IRF QRP quality measures can be found at http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Data-Submission-Deadlines.html.</p> <p>IRF-PAI data are submitted to CMS based on deadlines established for the IRF PPS. If corrections to the Quality Indicator data need to be made, data must be submitted for the IRF QRP before the IRF QRP submission deadlines.</p>
10.	IRF QRP Data Submission Deadlines—Definition of “Quarter”	Does the definition of “quarter” for the quarterly IRF-PAI data submission deadlines for the IRF QRP include patients admitted during that quarter, discharged during that quarter, or both?	For the IRF-PAI, the quarterly data submission deadlines apply to patients with a discharge date that occurs within that quarter, irrespective of admission date. For example, if a patient was admitted on March 30 (Quarter 1: January 1—March 31) and discharged on April 16 (Quarter 2: April 1—June 30), then the 2nd quarter data submission deadline (November 15) would apply for that patient’s IRF-PAI record.
11.	IRF QRP Assessment-Based Measures and Compliance Determination	Which items on the IRF-PAI are considered for compliance determination?	<p>The IRF QRP Table for Reporting Assessment-Based Measures for the FY 2020 IRF QRP Annual Payment Update (APU), available for download on the IRF Quality Reporting Measures Information page at https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Program-Measures-Information-.html, indicates the IRF-PAI data elements that are used in determining the APU minimum submission threshold for the FY 2020 IRF QRP determination. Please note that this replaces the Technical Specifications for Reporting Assessment-Based Measures document. CMS intends to update this document for each program year.</p> <p>All IRF-PAI data elements should be accurately coded to reflect the patient’s status and be submitted to CMS. It is the IRF’s responsibility to ensure the completeness of the IRF-PAI data. By signing the IRF-PAI upon completion (Z0400A), IRF staff are certifying that the information entered is complete to the best of their knowledge and accurately reflects the patients’ status.</p> <p>Data submitted for risk adjustment items are used to adjust the quality measure outcome scores based on patient characteristics. By not capturing data that are used for risk adjustment, a patient’s complexity cannot be accounted for in the quality measure outcome scores. This results in the risk-adjusted quality measure outcome scores reported on your CASPER Quality Measure reports and on IRF Compare website not reflecting the IRF’s unique patient complexities and may show up in performance rates, i.e., poorer scores.</p>

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			<p>For detailed measure specifications, please refer to the IRF Quality Measures User’s Manual, which can be downloaded from https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-QualityReporting-Program-Measures-Information-.html.</p>
12.	IRF-PAI Training Manual: Quality Indicators Sections	Where can I find the IRF-PAI Training Manual for the IRF QRP?	<p>Instructions for completing the items included in the quality indicators section of the IRF-PAI can be found in Section 4 of the IRF-PAI Training Manual. The current version of Section 4 , the Quality Indicators section, of the IRF-PAI Training Manual is available in the Download section of the IRF-PAI and Manual page: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-PAI-and-IRF-QRP-Manual.html.</p>
13.	Training Resources	Where can I find IRF QRP training materials?	<p>Information about the IRF QRP, including Special Open Door Forum Presentations, provider training materials, and other resources, is available on the IRF QRP Training website: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Training.html .</p> <p>For videos of past provider training sessions and webinars, please refer to the CMS YouTube channel. Click the link below and search for “IRF”: https://www.youtube.com/user/CMSHHGov</p> <p>Please see the link below for a web-based Section GG training module: https://www.cms.gov/medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/gg-training/</p> <p>Please see the link below for training materials from the Section N webinar: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Training.html </p> <p>Please see the link below for training materials from the Section M webinar on: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Training.html Also available is a presentation regarding the Improving Medicare Post-Acute Care Transformation (IMPACT) Act and Assessment Data Element Standardization and Interoperability: https://www.youtube.com/watch?v=1SljSQFgHs0&feature=youtu.be </p>
14.	Public Reporting	When will quality measure data be available on the IRF Compare website?	<p>The IRF Compare website was launched in December 2016 and can be found at https://www.medicare.gov/inpatientrehabilitationfacilitycompare/.</p> <p>This tool takes reported data and puts it into a format that can be used more readily by the public to get a snapshot of the quality of care each facility provides. Providers may also download data under “Additional Information” by selecting “Download the Database.”</p> <p>The following quality measures are currently reported on the IRF Compare website:</p> <p>IRF-PAI QUALITY MEASURES</p>

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			<ul style="list-style-type: none"> • <i>Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678)</i> • <i>Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay) (NQF #0680)</i> • <i>Application of Percent of Long-Term Care Hospital (LTCH) Patients with an Admission and Discharge Functional Assessment and a Care Plan that Addresses Function (NQF #2631)</i> • <i>Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay) (NQF #0674)</i> <p>CDC NHSN MEASURES</p> <ul style="list-style-type: none"> • <i>National Healthcare Safety Network (NHSN) Catheter-Associated Urinary Tract Infection (CAUTI) Outcome Measure (NQF #0138)</i> • <i>National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Outcome Measure (NQF #1716)</i> • <i>National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset Clostridium difficile Infection (CDI) Outcome Measure (NQF #1717)</i> • <i>Influenza Vaccination Coverage Among Healthcare Personnel (NQF #0431)</i> <p>MEDICARE FEE-FOR-SERVICE CLAIMS-BASED MEASURES</p> <ul style="list-style-type: none"> • <i>Medicare Spending per Beneficiary (MSPB) – Post-Acute Care (PAC) Inpatient Rehabilitation Facility Quality Reporting Program</i> • <i>Discharge to Community–Post-Acute Care (PAC) Inpatient Rehabilitation Facility Quality Reporting Program</i> • <i>Potentially Preventable 30-Day Post-Discharge Readmission Measure for Inpatient Rehabilitation Facility Quality Reporting Program*</i> • <i>Potentially Preventable Within Stay Readmission Measure for Inpatient Rehabilitation Facilities*</i> <p>Facilities will have a 30-day preview period before public display of the measures. Additional information about the provider preview report content and delivery is available on the IRF QRP Public Reporting website, https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Public-Reporting.html.</p> <p>*CMS has postponed the public display of these measures.</p>
15.	Public Reporting	My facility’s demographic data are incorrect on IRF Compare. How do I correct them?	The demographic data displayed on the Provider Preview Reports and on IRF Compare are generated from information stored in the Automated Survey Processing Environment (ASPEN) system.

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			<p>If inaccurate demographic data are included on your Preview Report or on IRF Compare, facilities need to contact their Medicare Administrative Contractor for assistance. When requesting updates to your demographic data, it is important to carefully review all information before submitting and specify that you want your data within the ASPEN system updated, instead of referring to your data on the Compare site.</p> <p>Please note that updates to IRF Provider demographic information do not happen in real time and can take up to 6 months to appear on IRF Compare.</p> <p>Additional information can be found here: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/Downloads/How-to-Update-IRF-Demographic-Data-1-4-18-Final.pdf.</p>
16.	Three-Day Assessment	What is the definition of a 3-day assessment?	<p>The 3-day assessment period is 3 calendar days. The 3-day assessment period for the IRF-PAI admission assessment includes the first day of admission and the following 2 days, ending at 23:59 or 11:59 p.m.. The discharge assessment period encompasses the day of discharge and the 2 calendar days before the day of discharge.</p>
17.	Incomplete Stay	How do I complete the IRF Quality Indicators Sections if a patient has an unplanned discharge?	<p>If the patient meets the criteria for an incomplete stay, code the IRF-PAI Quality Indicators Sections to the best of your abilities.</p> <p>Patients who meet the criteria for incomplete stays are:</p> <ul style="list-style-type: none"> • Patients who are unexpectedly discharged to an acute care setting, such as Short-stay acute hospital, critical access hospital, inpatient psychiatric facility, or Long-term Care Hospital; • Patients who die; • Patients who leave an IRF against medical advice; and • Patients with a length of stay less than 3 days. <p>If the patient meets the criteria for an incomplete stay and the patient’s IRF stay was 3 or more days, complete the discharge IRF-PAI Quality Indicator items using the discharge assessment guidance provided below.</p> <p>Discharge Assessment:</p> <p>Section GG—Functional Abilities and Goals</p> <p>GG0130—Self-Care and GG0170—Mobility: Discharge Self-Care and Mobility Performance</p> <p>For the IRF-PAI v2.0, effective October 1, 2018, there is a skip pattern for GG0130 or GG0170 discharge data, and no data are entered for a patient with an incomplete stay. The system would insert the caret (^) as part of the skip pattern specifications.</p> <p>Section J—Health Conditions</p> <p>Code based on chart review.</p>

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			<p>Section M–Skin Conditions</p> <p>Code to the best of your abilities. If there is no information available, enter a dash.</p> <p>Section N–Medications</p> <p>Code to the best of your abilities. If there is no information available, enter a dash.</p> <p>Section O–Special Treatments, Procedures, and Programs</p> <p>Code with a dash. If you cannot enter a dash, please enter one of the other valid codes.</p>
18.	Incomplete Stay	What if the patient is discharged before we complete the admission assessment?	<p>If the patient’s IRF stay is less than 3 days, complete the admission and discharge IRF-PAI Quality Indicator items to the best of your abilities using the guidance (admission assessment and discharge assessment) provided below.</p> <p>Admission Assessment:</p> <p>Section B–Hearing, Speech, and Vision</p> <p>Code to the best of your abilities. If you do not have any information, enter a dash.</p> <p>Section C–Cognitive Patterns</p> <p>Code to the best of your abilities.</p> <p>If, during the patient’s stay, the patient was rarely or never understood because of a medical condition, code section C as follows:</p> <ol style="list-style-type: none"> 1) Code C0100–Should Brief Interview for Mental Status (C0200-C0500) Be Conducted? as 0, No. 2) Skip to C0900–Staff Assessment for Mental Status–Memory/Recall Abilities. 3) Complete item C0900 by checking all that the patient was normally able to recall. <p>If the Brief Interview for Mental Status (BIMS) should have been attempted but was not, code Section C as follows:</p> <ol style="list-style-type: none"> 1) Indicate that the BIMS should have been conducted by coding C0100 as 1, Yes. 2) Enter dashes for each of the BIMS items (C0200, C0300ABC, C0400ABC). 3) Enter a dash for item C0500–BIMS Summary Score. 4) Code C0600 as 1, Yes. 5) Complete C0900 Staff Assessment for Mental Status. <p>Section GG–Functional Abilities and Goals</p> <p>GG0100–Prior Functioning: Everyday Activities</p> <p>Code if information is known. Otherwise, enter code 8, Unknown.</p> <p>GG0110–Prior Device use (use check boxes)</p> <p>If you do not have information about prior device use, check Z, None of the above.</p>

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		GG0130–Self-Care and GG0170–Mobility: Admission Self-Care and Mobility Performance	Code to the best of your abilities. If you are unable to assess the patient because of medical issues, enter code 88, Not assessed due to medical condition or safety issues.
		GG0130–Self-Care and GG0170–Mobility: Self-Care and Mobility Discharge Goals	A minimum of one self-care or mobility goal must be coded per patient stay on the IRF-PAI. Code at least one discharge goal to the best of your abilities using the predicted plan of care for the patient.
		Section H–Bladder and Bowel	
			Code to the best of your abilities. If there is no information available, enter a dash.
		Section I–Active Diagnoses	
			Check all that apply.
		Section J–Health Conditions	
			Code to the best of your abilities. If there is no information available, enter a dash.
		Section K–Swallowing/Nutritional Status	
			Code to the best of your abilities. If there is no information available, enter a dash.
		Section M–Skin Conditions	
			Code to the best of your abilities. If there is no information available, enter a dash.
		Section N–Medications	
			Code to the best of your abilities. If there is no information available, enter a dash.
		Section O–Special Treatments, Procedures, and Programs	
			Code with a dash. If you cannot enter a dash, please enter one of the other valid codes.
		Discharge Assessment:	
		Section GG–Functional Abilities and Goals	
		GG0130–Self-Care and GG0170–Mobility: Discharge Self-Care and Mobility Performance	For the IRF-PAI v2.0, effective October 1, 2018, there is a skip pattern for GG0130 or GG0170 discharge data, and data cannot be entered for a patient with an incomplete stay. The system would insert the caret (^) as part of the skip pattern specifications.
		Section J–Health Conditions	
			Code based on chart review.

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#	Question Category	Question	Answer
			<p>Section M–Skin Conditions</p> <p>Code to the best of your abilities. If there is no information available, enter a dash.</p> <p>Section N–Medications</p> <p>Code to the best of your abilities. If there is no information available, enter a dash.</p> <p>Section O–Special Treatments, Procedures and Programs</p> <p>Code with a dash. If you cannot enter a dash, please enter one of the other valid codes.</p>
19.	IRF Experience of Care Survey	Where can I find more information about the survey?	<p>While CMS is not including this survey in the IRF QRP at this time, CMS is providing this survey and accompanying materials for public use. CMS is not able to provide assistance to facilities on the use of this survey, answer technical questions about the use of this survey, or provide analysis support. Facilities and vendors should not send survey data to CMS; survey data submitted to CMS will be deleted.</p> <p>You can find more information on the IRF Experience of Care survey here: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Patient-Experience-of-Care-.html.</p>