

# Inpatient Rehabilitation Facilities Quality Reporting Program Provider Training



**INPATIENT  
REHABILITATION  
FACILITIES**

**POST-ACUTE CARE  
PROGRAM**

## **Section O:** **Special Treatments, Procedures, and Programs**

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# Today's Presenter



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# Section O: Objectives

- Illustrate a working knowledge of Section O: Special Treatments, Procedures, and Programs.
- Interpret the coding options for the new item (O0100) and when they would be applied.
- Articulate the intent of Section O.
- Apply coding instructions in order to accurately code practice scenarios.

# Section O: New Items

New:

- **00100**, Special Treatments, Procedures, and Programs.
  - Assessed on Admission.

Existing:

- **00250**, Influenza Vaccine.
  - Assessed by Discharge.



# Section O: Intent

Identify any special treatments, procedures, and programs that the patient received during the stay, including:

- Total Parenteral Nutrition (TPN).
- Influenza Vaccination Status.

# 00100

## Special Treatments, Procedures, and Programs

# 00100 Item Rationale

Total Parenteral Nutrition (TPN) can affect the patient's ability to perform self-care and mobility activities.

# 00100 Steps for Assessment

Review the patient's medical record to determine whether the patient received total parenteral nutrition at the time of admission.



# O0100 Coding Instructions

- Complete only at the time of admission.
- **Check O0100N, Total Parenteral Nutrition (TPN),** if the patient receives parenteral/intravenous (IV) feeding.

<input type="checkbox"/>	<b>N. Total Parenteral Nutrition</b>
<b>O0100. Special Treatments, Procedures, and Programs</b>	
↓ Check if treatment applies at admission	
<input type="checkbox"/>	<b>N. Total Parenteral Nutrition</b>

# O0100 Coding Scenario

- Mrs. C had a stroke following bowel surgery, and has been unable to eat or ingest adequate nutrients since her bowel surgery.
- Mrs. C receives TPN using a peripherally inserted central catheter (PICC line) that infuses her nutrients, 24 hours daily.

**How would you code O0100?**

**What is your rationale?**

# O0100 Coding Scenario

**Coding:** Check box for **N, Total Parenteral Nutrition**.

**Rationale:** Mrs. C's treatment plan includes TPN.

<input checked="" type="checkbox"/>	<b>N. Total Parenteral Nutrition</b>
O0100. Special Treatments, Procedures, and Programs	
↓ Check if treatment applies at admission	
<input checked="" type="checkbox"/>	<b>N. Total Parenteral Nutrition</b>

# 00250

## Influenza Vaccine

# O0250, Influenza Vaccine

**O0250. Influenza Vaccine - Refer to current version of IRF-PAI Training Manual for current influenza vaccination season and reporting period.**

Enter Code

☐

**A. Did the patient receive the influenza vaccine *in this facility* for this year's influenza vaccination season?**

0. **No** → Skip to O0250C. If influenza vaccine not received, state reason
1. **Yes** → Continue to O0250B. Date influenza vaccine received

**B. Date influenza vaccine received** → Complete date and skip to Z0400A. Signature of Persons Completing the Assessment

M	M	D	D	Y	Y	Y	Y

Enter Code

☐

**C. If influenza vaccine not received, state reason:**

1. **Patient not in this facility** during this year's influenza vaccination season
2. **Received outside of this facility**
3. **Not eligible** - medical contraindication
4. **Offered and declined**
5. **Not offered**
6. **Inability to obtain influenza vaccine** due to a declared shortage
9. **None of the above**

# 00250 Item Rationale

- CDC continues to recommend annual influenza vaccinations for all persons aged 6 months and older.
- When infected with influenza, older adults and persons with underlying health problems are:
  - At increased risk for complications.
  - More likely than the general population to require hospitalization.

# 00250 Item Rationale (cont.)

- An institutional influenza A outbreak can result in:
  - Up to 60% of the population becoming ill.
  - 25% of those affected developing complications severe enough to result in hospitalization or death.
- Influenza-associated mortality results from:
  - Pneumonia.
  - Subsequent events exacerbated by influenza.

# Influenza Vaccination Season

- **Influenza Season** is July 1, 2016 – June 30, 2017.
- **Influenza Vaccination Season (IVS)** is October 1, 2016 (or when vaccine becomes available) – March 31, 2017.

# Influenza Vaccination Season (cont.)

- IRFs are encouraged to document when a patient has been vaccinated outside the IVS.
  - Vaccine is usually available in September and generally does not expire until late spring.
- For the quality measure, only the records of patients in the IRF one or more days during the IVS are included in the calculation.

# 00250 Steps for Assessment

- Review the patient's medical record to determine if the patient received an influenza vaccine in the IRF for this year's IVS.
- If influenza vaccine not received in the IRF, ask the patient if he or she received it outside of the facility for this year's IVS.
- Review (when available) the patient's medical record from previous setting(s).

# O0250 Steps for Assessment (cont.)

- If the patient's influenza vaccination status is still unknown, proceed to the next step.
- Ask a responsible party/legal guardian and/or primary care physician if patient is unable to answer.
- If vaccination status cannot be determined, proceed to coding O0250A. In order to determine whether or not to administer the vaccination, IRFs should refer to their facilities policy on vaccine administration, as well as the standards of clinical practice.



# O0250 Coding

Documents three aspects of the administration of the vaccine:

- **O0250A:** Whether a vaccine for the current influenza season was administered **in the facility**.
- **O0250B:** Date the patient received the vaccine if administered in the facility.
- **O0250C:** Reason the patient did not receive the vaccine.

# O0250A Coding Instructions

- **Code 0, No**, if the patient did not receive the influenza vaccine in this facility (IRF) during this year's IVS.
- **Code 1, Yes**, if the patient received the influenza vaccine in this facility (IRF) during this year's IVS.

<b>O0250. Influenza Vaccine - Refer to current reporting period.</b>	
Enter Code	<b>A. Did the patient receive the influenza vaccine during the current influenza vaccination season?</b>
<input type="checkbox"/>	<b>0. No</b> → Skip to O0250C. If influenza vaccine not received, state reason
	<b>1. Yes</b> → Continue to O0250B. Date influenza vaccine received

**A. Did the patient**

**0. No** → Skip

**1. Yes** → Cor

# 00250B Coding Instructions

- Enter the date that the vaccine was received in your IRF. Do not leave any boxes blank.
- Use a zero to complete any single digit values.
- If the date is unknown or the information is not available, a single dash “-” needs to be entered in the first box.

**B. Date influenza vaccine received → Complete date and**

1	1	0	5	2	0	1	6
M	M	D	D	Y	Y	Y	Y

00250. Influenza Vaccine - Refer to current reporting period.

**B. Date influenza vaccine received → Complete date and skip to Z0400A. Signature of Persons Completing the Assessment**

M	M	D	D	Y	Y	Y	Y

# 00250C Coding Instructions

- Code a reason the vaccine was not administered in the facility.
- **Code 9, None of the above**, if the reason is unknown or none of the reasons listed.

**00250. Influenza Vaccine - Refer to current version of IRF-PAI reporting period.**

Enter Code ☐

**C. If influenza vaccine not received, state reason:**

1. Patient not in this facility during this year's influenza season
2. Received outside of this facility
3. Not eligible - medical contraindication
4. Offered and declined
5. Not offered
6. Inability to obtain influenza vaccine due to a declared shortage
9. None of the above

**C. If influenza vaccine not received, state reason:**

1. Patient not in this facility during this year's influenza season
2. Received outside of this facility
3. Not eligible - medical contraindication
4. Offered and declined
5. Not offered
6. Inability to obtain influenza vaccine due to a declared shortage
9. None of the above

# 00250 Coding Tips

- Information about current influenza season can be obtained by accessing the CDC Seasonal Influenza Web site: <http://www.cdc.gov/flu>.
- Facilities should follow current Advisory Committee on Immunization Practices (ACIP) recommendations to inform standards of practice and applicable patients.



# 00250 Coding Scenario (1)

Mrs. J received the influenza vaccine in this IRF during this year's IVS, on October 2, 2016.

**How would you code 00250?**

**What is your rationale?**

# 00250 Coding Scenario (1)

## Coding:

- O0250A would be coded **1, Yes.**
- O0250B would be coded **10-02-2016.**
- O0250C would be skipped.

**Rationale:** Mrs. J received the vaccine in the facility on October 2, 2016, during this year's IVS.

# O0250 Coding Scenario (2)

- Ms. A received the influenza vaccine in the IRF on February 5, 2016, during this year's IVS.
- This patient was transferred to an acute-care facility on February 10 because of a medical emergency.
- The patient was then readmitted to the same IRF on February 20. The patient did not receive the influenza vaccination during the second IRF stay because she had already received it during the previous IRF stay.
- The patient was discharged home on March 1, 2016.

**How would you code O0250 for Ms. A's first and second IRF stay?**

**What is your rationale?**



# 00250 Coding Scenario (2)

## Coding:

### February 5 to February 10 stay IRF-PAI:

- O0250A would be coded **1, Yes.**
- O0250B would be coded **02-05-2016.**
- O0250C would be skipped.

### February 20 to March 1 stay IRF-PAI:

- O0250A would be coded **1, Yes.**
- O0250B would be coded **02-05-2016.**
- O0250C would be skipped.

**Rationale:** Ms. A received the vaccine in the facility on February 5, 2016, during this year's IVS. This date is reported on both assessments.

# O0250 Coding Scenario (3)

- Mr. N was offered the influenza vaccine during his IRF hospitalization beginning in February 2016.
- Mr. N refused the influenza vaccine, asserting that whenever he has received it in the past it always gave him the flu.
- Despite the staff providing education that the influenza vaccine does not cause the flu, Mr. N still refused to take it.

**How would you code O0250?**

**What is your rationale?**

# O0250 Coding Scenario (3)

## Coding:

- O0250A would be coded **0, No.**
- O0250B would be skipped.
- O0250C would be coded **4, Offered and declined.**

**Rationale:** Mr. N did not receive the influenza vaccine. Despite the staff providing education that the influenza vaccine does not cause the flu, Mr. N still refused to take it.

# Section O: Summary

- TPN is collected on admission.
- Influenza Vaccine assessed by discharge.
- No changes to the Influenza Vaccine section; good time to review for any opportunities to improve your process.
- All three parts (A, B, and C) in O0250 need to be addressed to be compliant.

# Section O: Action Plan

Review your current process and identify any opportunities for improvement:

- Do you provide education to staff prior to each flu season?
- Do you have appropriate patient education materials available and ready for when the IVS begins?
- Ensure staff bias does not impact your success.
- Do you have a process in which the vaccine information is clearly communicated to the next level of care and the PCP office?
- Are you maximizing your EMR to help track your data?



# Questions?