CMS IRF Vendor Call
Submitted Questions and Answers
April 23, 2020

Vendor	Question	Answer
Matt Solfest, Epic	When reviewing the IRF-PAI 4.0 data specifications (V5.00.0)<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/DataSpecs>, the following are a dozen cases I was hoping for clarification: - For R2, Patient Medicare number: 1. In last year's specifications it stated that after 1/1/2020 only the MBI format of the Medicare number would be allowed. In the current version it includes both edit -1130 (allowing MBI and Medicare number format) and edit 1131 (seems to be copied from 1130) are included. 2. Will non-MBI formatted Medicare numbers allowed in IRF-PAI 4.0? - For "SPEC_VRSN_CD", Specification version code: 3. Historically the acceptable value has matched the specification version (ex 4.00 for 4.00.0), but there was not any values added for V5.00.0. 4. Should IRF-PAI 4.0 use the specification version of 4.00 or will 5.00 be added for this version? - For C0300B_2, BIMS – Temporal Orientation – Month: 5. There are no acceptable values listed, will this field accept the same values as C0300B_1? - For D0150, Patient Mood Interview (PHQ-2 to 9):	1. We will remove edit -1130 and will update edit -1131 as follows: Incorrect Medicare Beneficiary Identifier (MBI): This item must conform to the format defined below: The MBI shall be eleven characters in length. The first character must be numeric, excluding zero (0). The second, fifth, eighth and ninth characters must be alphabetic, excluding the following letters: S, L, O, I, B, and Z. The fourth, seventh, tenth and eleventh characters must be numeric. The third and sixth characters must be alphabetic (excluding S, L, O, I, B, and Z) or numeric. 2. Non-MBI formatted Medicare numbers will not be allowed in IRF PAI-4.0, Spec Version Code 5.00. 3. We will add Item Value '5.00' in Item ID 'SPEC_VRSN_CD' and Item Value '4.0' in Item ID 'ITM_SET_VERSN_CD'. 4. IRF PAI 4.0 use the specification version 5.00. Yes, we will add SPEC_VRSN_CD '5.00' for the IRF-PAI 4.0. 5. Yes, we will update Item ID C0300B_2 to display the same acceptable values as item C0300B_1.

6. The data specifications specify that D0150C-D0150I presence (both admission and discharge), should be ^ (Blank skip pattern) if D0150A2 and D0150B2 are less than 2. But it doesn't specify what the frequency scores (D0150C2-D0150I2) should be when the associated presence score is ^ (Blank skip pattern). 7. Should D0150C2 through D0150I2 be marked as ^ (blank skip pattern) if D0150A2 and D0150B2 are less than 2? - For D0160, Total Severity Score: 8. The paper form<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/Downloads/Final-IRFQRP-Items-Mockup-Eff1012020.pdf#page=5> specifies the score must be between 02 and 27. Also if you score less than 2 for both D0150A2 and D0150B2, the paper form specifies that the PHQ interview ends. In the case where neither D0150A2 or D0150B2 are 2 or 3, thus the total score would be less than 2, should D0160 be marked as -? - For D0160, Total Severity Score: 9. The specifications state D0160 must equal the sum of the values and "Format Integer Items to nearest integer". Should D0160 always round down to an integer, always round up to an integer, or use the standard rounding (round up if >=.5, round down otherwise)? - For GG0170R2, Func Mobil (Dschg Goal) – Wheel 50 feet w/2 turns, and GG0170S2, Func Mobil (Dshg Goal) – Wheel 150 feet: 10. ^ (Blank skip pattern) was removed as an acceptable item value, despite the item edits referencing these fields being equal to ^ (blank skip pattern).	6. (a) We will add level (e) to edits -5095, -5155, -5096, -5097, -5098, -5099, -5100, -5101, -5102, -5103, -5104, -5105, -5106, and -5107 For Example: (e) If D0150I1_2 = [^], then D0150I2_2 must equal [^] (b) Also, we will add response value ^ (Skip Pattern) for Items D0150A2_1, D0150A2_2, D0150B2_1 and D0150B2_2 as these are blank if the corresponding response in Column 1 is equal [9] 7. If D0150A2 and D0150B2 are less than 2 then PHQ Interview will end and no need to answer any Items from D0150C through D0150I. 8. If neither of D0150A2 or D0150B2 are 2 or 3 then interview will end and no need to answer any items from D0150C through D0150I. In this case Symptom Frequency is blank for 3 or more items so the item D0160 Score should be 99. 9. Yes, you must use the standard rounding if .5 or greater then round up and if less than .5 round down 10. This was an oversight in the data specs, we will add ^ (Skip Pattern) value to Items GG0170R2 and GG0170S2.

Will blank skip pattern be re-added for these fields? - For N0415Z1, High-Risk Drug (is taking): None of the above 11. For None of the above (N0415Z1) the data specifications state the following: § None of the Above should be set to 1 (Checked) if all drugs (N0415A1 through N0415J1) are set to 0 (Not checked) § None of the Above should be set to – (Not assessed) if all drugs (N0415A1 through N0415J1) are set to – (Not assessed). § None of the Above should be set to 0 (Not checked) if at least one drug (N0415A1 through N0415J1) is not equal to 0 (Not checked). If some drugs (N0415A1 through N0415J1) are 0 (not checked), and others are – (not assessed), should None of the Above be set to 0 (Not checked)? - For O0110A1, O0110C1, O0110D1, O0110G1, O0110H1, O0110J1, and O0110O1 12. For the Special Treatments, Procedures, and Programs with subtypes (for example O0110A1 Chemotherapy, with the subtypes O0110A2 IV and O0110A3 Oral and O0110A10 Other) the data specifications state the following: § The Treatment/Procedure/Program should be set to 0 (Not Checked) if all Treatment/Procedure/Program subtypes are set to 0 (Not checked) § The Treatment/Procedure/Program should be set to - (Not assessed) if all Treatment/Procedure/Program subtypes are set to - (Not assessed) § The Treatment/Procedure/Program should be set to 1	11. N0415Z1 determines what should happen with N0415A-N0415J: If None of the above (N0415Z1) is set to 1 (Checked) then N0415A-J column 1 must all be set to 0 (Not Checked). If None of the above (N0415Z1) is not checked then at least one item N0415A1-N0415J1 must be set to 1 (Checked). 12. Yes, if O0110A1 = 1, then at least one active item from O0110A2 through O0110A10 must not equal [0] so based on this the response can be for O0110A2 can be [1], O0110A3 can be [0] and O0110A10 can be [-]

(Checked) if at least one Treatment/Procedure/Program subtype is not equal to 0 (Not checked) If some Treatments/Procedures/Programs subtypes (For example O0110A2 and O0110A3) are 0 (not checked), and others (For example O0110A10) are – (not assessed), should the Treatment/Procedure/Program (for example O0110A1) be set to 1 (Checked)? - For O0110F1a, Therapies: Invasive Mechanical Ventilator (Admis): 13. O0110F1a has the XML Tag LF, should this be O0110F1a or should the XML tag actually be LF? - For O0110I1c, Other: Transfusions (Admission): 14. O0110I1c has the XML Tag O0110J1a, despite there already being an item with this tag (item O0110J1a). Should the XML Tag be O0110I1c? - For O0110Z1, Other: None of the above 15. For None of the above (O0110Z1) the data specifications state the following: § None of the Above should be set to 1 (Checked) if all Treatments/Procedures/Programs (O0110A1 through O0110O1) are set to 0 (Not checked) § None of the Above should be set to – (Not assessed) if all Treatments/Procedures/Programs (O0110A1 through O0110O1) are set to – (Not assessed). § None of the Above should be set to 0 (Not checked) if at least one Treatments/Procedures/Programs (O0110A1 through O0110O1) is not equal to 0 (Not checked).	13. Agree, XML tag should be O0110F1a. We will modify the XML tag to O0110F1a for the Item ID: O0110F1a 14. Agree, XML Tag should be O0110I1c. We will modify XML tag to O0110I1c for Item ID: O0110I1c. 15. If O0110Z1 is checked [1], then the only option for O0110A1, O0110B1, O0110C1, O0110D1, O0110E1, O0110F1, O0110G1, O0110H1, O0110I1, O0110J1, O0110O1 is unchecked [0] and if O0110Z1 is unchecked or equal [0] then at least one item: O0110A1, O0110B1, O0110C1, O0110D1, O0110E1, O0110F1, O0110G1, O0110H1, O0110I1, O0110J1, O0110O1 must not be unchecked [0].

	If some Treatments/Procedures/Programs (O0110A1 through O0110O1) are 0 (not checked), and others are – (not assessed), should None of the Above be set to 0 (Not checked)?	
Tammy L. Schneider, Uniform Data System for Medical Rehabilitation	1. In the Control Section, it doesn't appear that the ITM_SET_VRSN-CD or the SPEC_VRSN_CD are updated. We are assuming that ITM_SET_VRSN_CD has an allowable value of 4.0 as of 10/1/20 and that SPEC-VRSN_CD has an allowable value of 5.00 as of 10/1/20 but those values are not noted in the draft version of the specifications. 2. In Section A, there are several fields where there appears to be a lack of logic noted or where the logic noted doesn't include some of the items. For example: (a) A1005 edits only include values in A1005A-E. What if A1005X is checked? Since the patient is unable to respond it would seem as if A1005A-E would then be skipped? The logic states that if A1005 is left blank that one item A1005 B-E must be checked but what if A1005 is left unchecked because the patient couldn't respond (and thus A1005X is checked)? A1010 does include the A1010X/patient does not respond response in the logic so it seems inconsistent with A1005 in not including it. (b) A1250 edits also only include A1250A-C and do not include A10250X. Patient Unable to Respond in the logic. 3. In section D, For D0160_1, it is noted that the result must be formatted to the nearest integer. Are we assuming "normal" rounding here or can you please clarify any rules for what "formatting to the nearest integer" might mean for this calculation? 4. The caret (^) was removed from the list of allowed values for GG0170R2 and GG0170S2, but the IRF-PAI indicates it can be skipped, and Edit -5065 states "If GG0170Q1=[0], then items GG0170R1, GG0170R2, G0170RR1, GG0170S1, GG0170S2, and GG0170SS1 must be equal to [^]." We are assuming this was just an oversight in the specification and not a change in logic.	1. We will add Item Value '5.00' in Item ID 'SPEC_VRSN_CD' and Item Value '4.0' in Item ID 'ITM_SET_VERSN_CD' in the data specifications. 2. X does not function as none of the above, but can be selected in combination with other responses in A1005, A1010 and A1250. 3. Yes, you must format to the normal rounding if .5 or greater round up and if less than .5 round down. 4. This was an oversight in the data specs, we will add ^ (Skip Pattern) value to Items GG0170R2 and GG0170S2.

	5. In the Data Element Library, for IRF-PAI field C1310A, it's noted that it is a skip pattern trigger but in the data specifications, there is no skip pattern logic. Due to the nature of the question, we are assuming this is incorrectly stated in the Data Element library but can you please confirm?
	
	6. In further review, we noticed one other thing in the specifications that do not make sense. D0160_1 and D0160_2 list only a dash as an acceptable value. With this, we have two questions:
	
	(a) This should allow a whole number based on the logic, is this just an oversight that a whole 2 digit number would be an acceptable value?
	
	(b) How would the dash be an acceptable value in this field? It isn't noted in the logic for D0160 or the preceding values that determine the calculated value that should be in these fields.
		5. The skip trigger being marked on C1310A was made in error. The Data Element Library will be updated.
		
		6. (a) Item D0160 will allow only the whole number between 02 and 27 or 99 as explained in below logic. The Valid Response Values will be updated in a future errata to include:
		02 Minimum Total Severity Score
		27 Maximum Total Severity Score
		99 Patient was unable to complete the interview
		
		(b) Dash (-) will not be allowed in item D0160. As mentioned above, Severity Score should be between 02 and 27 or 99 as explained in below logic.
		    a) If the following items D0150A2_1, D0150B2_1, D0150C2_1, D0150D2_1, D0150E2_1, D0150F2_1, D0150G2_1, D0150H2_1, D0150I2_1 equal [0,1,2,3], then D0160_1 must equal the sum of these items.
		    b) If one of the following items: D0150A2_1, D0150B2_1, D0150C2_1, D0150D2_1, D0150E2_1, D0150F2_1, D0150G2_1, D0150H2_1, D0150I2_1 = [^,-], then D0160_1 must equal the sum of the remaining items times 9/8(1.125).
		    c) If two of the following items: D0150A2_1, D0150B2_1, D0150C2_1, D0150D2_1, D0150E2_1, D0150F2_1, D0150G2_1, D0150H2_1, D0150I2_1 = [^,-], then D0160 must equal the sum of the remaining items times 9/7(1.286).
		    d) If three or more items between D0150A2_1, D0150B2_1, D0150C2_1, D0150D2_1, D0150E2_1, D0150F2_1, D0150G2_1, D0150H2_1 and D0150I2_1 = [^,-], then D0160_1 must equal [99].