Thursday, September 26, 2013 1:00 - 2:30 p.m. ET

Welcome		Ja	ck Williams, DQSAS
Director, Div	ision of Quality S	Systems for Asses	ssments and Surveys

- Welcome to the CMS IRF-PAI Software Developer / Vendor call. The purpose of this call is to provide information to IRF-PAI Software Developers and Vendors who are creating or have created software for IRF-PAI providers.
- If you do not have the agenda for this call, it may be found at https://www.qtso.com under the Vendors link on the left navigation bar. The IRF-PAI link is located in the navigation bar at the top of the page.

CMG Grouper Specification Updates - October 2014 Bob Godbout, Stepwise Systems

- The number of comorbidity codes (item 24) used by the grouper will increase from 10 codes to 25 codes.
- The comorbidity codes used by the grouper will be ICD-10s rather than ICD-9s. The
 corresponding "List of Tier Comorbidities" in the documentation and the comorbidity lookup
 table in the CMG logic and software will be completely revised. The new ICD-10
 comorbidity code list will be announced and revised through rulemaking notice and
 comment.
- The impairment codes (21A or 21D) will be checked against a list of the valid values and the record will be rejected if either 21A or 21D are invalid.
- The CMG test data will need to be greatly revised because of the change in the number of comorbidity codes (item 24) and the use of ICD-10s as those codes.

Data Submission Specification Updates - October 2014 ... Bob Godbout, Stepwise Systems

Data Specifications Web Site:

http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/Software.html

Specs Overview Document:

IRF data specs overview (v1.11.0) 7-22-2013.pdf

- An Errata to the Data Specs Was Recently Posted:
 - Add new item calculated by the ASAP QIES system (not submitted): Facility CCN Number from QIES records.
 - Correct ZIP file name: "PRF" to "PDF"
 - Correct version notes for ethnicity (Items 9A through 9F) to new indicate new value added is [-] rather than [^].
 - Correct length of item 44C to 1 (was given as 2) and correct start/end to 1257 1257 (was given as 1257 1258). Add filler for fixed format position 1258.
 - Correct reference in the version notes for SPEC_VRSN_CD to "1.11" rather than to "1.10". Bob read this wrong.
- Item Change Report:

IRF-PAI Item change report (v1.11.0) 08-05-2013.pdf

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Summary of Item Changes (not exhaustive):

Item	Action	
Many items	Prior value of [space] replaced by [^] for about	
	50 items. Avoids empty XML values if XML	
	values are trimmed.	
ITM_SET_VRSN_CD	Added new value of 1.2	
SPEC_VRSN_CD	Added new value of 1.11	
SFTWR_VNDR_ID	Added edit -1007 (item cannot be blank)	
15	Deleted	
15A	New Item "Admitted From" –with a different	
	set of values from prior item 15	
16	Deleted	
16A	New Item "Pre-Hospital Living Setting" –with a	
	different set of values from prior item 16	
21A	Added set of valid values for Admission	
	Impairment Code that must be used. <i>Use of</i>	
	the valid values is retroactive and applied	
	to assessments with discharges before	
	10/1/2014.	
21B	Added set of valid values for Admission	
	Impairment Code that must be used. Use of	
	the valid values is retroactive and applied	
	to assessments with discharges before 10/1/2014.	
24A – 24J	Revised comorbidity codes to use ICD-10	
24K – 24Y	New items – comorbidity codes using ICD-10	
25	Deleted	
25A	New Item "Height"	
26	Deleted	
26A	New Item "Weight"	
28A	Deleted	
28D	Deleted	
43A – 43F	Completely revised edits for "Interruption	
	Dates"	
44A	Deleted	
44B	Deleted	
44C	New Item "Patient Discharged Alive	
44D	New Item "Discharge to Living Setting"	
48AA through 50D	Delete prior Quality Items	
M0201_1 through M0900D	New Quality Items	
I0900A through I2900D	New Quality Items	
O0250A-C	New Quality Items	
Several Items	New edits used and prior edits deleted	

• Edit Change Report:

IRF-PAI Edit change report (v1.11.0) 08-05-2013.pdf

This report documents a wording change on one edit (-1044) and lists all new edits (-1100 through -1118 and -5006 through -5043).

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Other Info:

- IRF-PAI Item list by item (v1.11.0) 08-05-2013.pdf
- IRF-PAI Undup edits by ID (v1.11.0) 08-05-2013.pdf
- Data Specs HTML Files [v1.11.0] 08-05-2013.zip
 Detailed specs in HTML format.
- IRF-PAI Data Dictionary [v1.11.0] 08-19-2013.zip
 MS Access database used to generate the data specs reports.
- CSV files (item master and value master tables from the data dictionary).
- Please continue monitoring the CMS data specifications web page for additional updates.

ASAP System Enhancements - October 2013 Jean Eby, Telligen

New system edits:

New submission timing edits -915, -916, -917

- Retroactive when implemented, applies to all records regardless of discharge date
- Implemented at the downtime on September 21, 2014
- If error is issued, record shall be rejected and no other editing performed
- 1. Edit -915
 - Rejects MDS 3.0 records submitted more than 24 months after a facility's closed date
 - The 24 months is calculated using: submission date facility closed date < 731 days.
 731 = (365 X 2) +1
 - Applied prior to the duplicate record check
- 2. Edit -916
 - Rejects MDS 3.0 records submitted with a discharge date after the facility's closed date
 - Applied immediately after edit -915
- 3. Edit -917
 - Rejects MDS 3.0 records submitted with a discharge date more than 36 months prior to the submission date
 - The 36 months shall be calculated using this formula: discharge date is more than 1096 days prior to the submission date. 1096 = (365 X 3) + 1
 - Applied immediately after edit -916

Storage of the new calculated CCN number.

As part of file processing, the ASAP system shall populate the C_CCN_NUM field associated to each assessment record with the provider's CCN from the QIES database. This step shall be in addition to the CCN comparison that is done with edit -1015. This applies to all records submitted after the deployment of the October 2014 release which is September 21, 2014.

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Validation Utility Tool (VUT)......John Jackson, GDIT

- Current IRF-PAI VUT version is still 1.0.0. It has not been revised since August 2012.
- Users can expect the revised VUT to be released prior to 10/1/2014, probably in August.
- The VUT will be versioned to incorporate the new specs, while still supporting assessments prior to 10/1/2014 (e.g., corrections). Items, item values, and edits are versioned.
- Note that the VUT does not support EVERY edit in the specs, as there are a few things ASAP System can do that the VUT can't do, e.g., lookup the facility ID (-1001) or determine if the user is an authorized submitter (-1071).
- Occasionally, we add custom edits, if it makes sense. For FAC_ID, instead of the lookup, the VUT can confirm that the FAC_ID does not exceed the maximum length of 16. We give custom edits a starting letter of "V" to distinguish them from data specification edits.
- Reminder: The VUT does not recalculate the CMG.

Discussion of Submitted Q & A'sLori Grocholski, CMS

- Q1. With the change to the Discharge Living Setting on the new version of the IRF-PAI form going in effect on 10/1/2014, will CMS be releasing an update to how a patient record's Special CMG is calculated for FY 2014? The current calculation relies on the value of the Discharge Living Setting field.
- A1. The Discharge to Living Setting item is not used in the standard CMG, so there is no issue.
- Q2. When will the new CMG Grouper 2.70 be available for download so that vendors may start incorporating it into their software products?
- A2. The CMG Grouper version 2.70 is for use beginning on 10/1/2014. CMS expects to post a preliminary version of the CMG 2.70 for vendors after the IRF-PPS proposed rule for FY2015 is published in April or May of 2014. We expect to post the final version of CMG 2.70 after the IRF-PPS final rule for 2015 is published in August of 2014.
- Q3. When will the new VUT software be available for testing the new data submission file specifications?
- A3. CMS expects the VUT to be available in mid-August 2014.

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Open Q and A SessionLori Grocholski, CMS

Q1: Question number two above, was my question, but what I had asked about was the special CMG calculation, which would be an early transfer or a 5105. This calculation does depend on Discharge Living Setting.

How will the calculation be affected by changes to Discharge Living Setting fields going into effect October 1, 2014?

A1: Bob Godbout confirmed the caller is referring to the special CMG codes, RIC 50 and 51. Those calculations have always been handled outside of the IRF-PAI assessment grouper and data specifications. They are handled at the MAC level within the Pricer, taking into account the actual days of coverage at the claim level.

If you are calculating in-house within your software, you will need to change your software. QIES doesn't have that information for you and we have never supported it within QIES.

Jack Williams asked the call participant to resend the question in clarified form to the technical mailbox (IRFTECHissues@cms.hhs.gov) and we will forward it along to the appropriate party.

Conclusion Jack Williams, DQSAS

Please remember to check the QTSO website at https://www.qtso.com under the Vendor link in the left navigation bar and the IRF-PAI link in the navigation bar at the top of the page for further information or updates to information presented today. If you have questions, please send them to the IRF technical mailbox at IRFTECHissues@cms.hhs.gov.

Thank you for your participation and attendance today.