

CMS IRF-PAI Software Developer/Vendor Call Minutes

April 23, 2020

3:00 – 4:00 p.m. ET

Conference Line: 1-877-267-1577

Conference code: 999 562 641

Welcome..... Kimberlie Jasmin, CMS

- Welcome and thank you for joining the CMS IRF-PAI Software Developer/Vendor Call. The purpose of this call is to provide information to software developers and vendors who are creating or have created software for Inpatient Rehabilitation Facility (IRF) providers. On this call, we will discuss the changes to the IRF-PAI data specifications effective October 1, 2020, the Validation Utility Tool (VUT) and the “Top 5” Error messages.
- If time allows we will have an open Q & A session at the end of this call.
- If you do not have the agenda for this call, it may be found at <https://qtso.cms.gov> and click on the Inpatient Rehabilitation Facility (IRF-PAI) Vendors link under the “I’m a Vendor” tab in the middle of the page.
- I will now turn the call over to Jagruti Patel to discuss the IRF-PAI data specification update.

Data Specification Update Jagruti Patel, Ventera

- Today I will be talking about a new set of IRF Draft Data Specifications, version 5.00.0 that will go into effect on October 1, 2020 and this DRAFT version supports Version 4.0 of the IRF-PAI.
- So, what’s new in this version?
Well, we have added new Section A – Administrative Information and Section D – Mood in both Admission and Discharge assessment of IRF-PAI to accommodate new items. Also added new Section B – Hearing, Speech and Vision, Section C – Cognitive Patterns, Section K – Swallowing/Nutritional Status and Section O – Special Treatments, Procedures, and Programs in the Discharge assessment of IRF-PAI to accommodate new items.
- Also, we have new item set additions in Section B, C, J, N and O
 - In Section B, we have added new items B0200, B1000 and B1300 to assess Hearing, Vision and Speech. Please note that Item sets B0200 and B1000 are added only in the admission assessment of IRF-PAI.
 - In the Discharge assessment of Section C Cognitive Patterns, we have added new BIMS (Brief Interview for Mental Status) items C0100 to C0500 to conduct brief interview for Mental status. And item sets C1310 to Code Mental Status Change is added under both admission and discharge assessment of the IRF-PAI.
 - In both Admission and Discharge assessment, we have added item sets J0510, J0520, J0530 to assess Health Conditions of patient, item sets N0415 to assess High Risk Drug Use & Indication and item sets O0110 to assess Special Treatments Procedures and Programs

- Note that Item N0415 contains two columns, where column 2 is dependent on the response in column 1. So, if the item in column 1 is not checked then corresponding item in column 2 should not be checked. Also, this item has option 'None of the above'. When 'None of the above' option is selected then all the items from N0415A thru N0415J in both column 1 and column 2 must not be checked.
- I would also like to go over on one of the newly added item, where we have option 'Patient unable to respond'. For ex, A1005X. This option does not work as a 'None of the above' option, rather 'Patient unable to respond' response can be checked in combination with the other possible responses within the item.
- Now I am going to talk about, some of the items that have gone away. We have deleted item K0110 and have replaced with new item K0520 to assess Swallowing/Nutritional Status. Deleted item O0100N – Total Parenteral Nutrition as it is replaced with item K0520A – Parenteral/IV feeding.
- Now let's talk about edits that were added for the new items, edits that were deleted as some of the items are gone as well as we have updated existing edits to map new items and un-map deleted items. I would like to bring your attention to few important edits.
 - Added new edit -5156 for a free-form text items (11, 1A, 4, 5A, A1110A, FAC_ADDR_1, FAC_ADDR_2, FAC_CITY, FAC_CNTCT, FAC_DOC_CD, FAC_EXTEN, FAC_PHONE, SBMTD_CMG_TXT, SBMTD_CMG_VRSN_TXT, SFTWR_PROD_NAME, SFTWR_PROD_VRSN_CD, SFTWR_VNDR_EMAIL_ADR) to make sure the length for the text submitted must not exceed the maximum length specified for that item.
 - Added new edits -5153 (admission) and -5154 (discharge) to explain how to calculate Total Severity Score in item D0160.
 - Also, we have mapped around 160 newly added items to existing edit -5004 to display APU warning Payment reduction error message and edit -1010 to display Invalid Data Value error message.
 - We have Deleted edit -1107 as Items 9A-9F are retired as of October 1, 2020. And updated edits -1031 and -1010 to un-map items 9A-9F, O0100N, and K0110A-C as those items are retired as of October 1, 2020.
- Please note that along with the data spec, there is a data spec change document identifying few changes to the DRAFT data specifications and they are:
 - For Item D0160: Added Minimum Total Severity Score (02), Maximum Total Severity Score (27) and Patient was unable to complete the interview (99) as a valid response values.
 - Also, for Items A2121 and A2123 – Added Skip Pattern [^] value as a valid response value.
- As always, check the Item Change and Edit Change Reports in the data specifications package to view the list of new items, updated items and retired items.

IRF CMG Grouper Susanne Seagrave, CMS

- On April 8, 2020, CMS posted a new version of the inpatient rehabilitation facility Grouper, version 4.01, effective for Inpatient Rehabilitation Facility patient discharges occurring on or after April 1, 2020. This new version of the Grouper software adds the new ICD-10-CM diagnosis code U07.1 for COVID-19 to Tier 3 for determining inpatient rehabilitation facility payments.
- The new Grouper version 4.01 should not be retroactive to October 1, 2019. IRF-PAI discharges prior to April 1, 2020 cannot be amended to add the new COVID-19 diagnosis code.
- Effective October 1, 2020, the IRF CMG Grouper will transition to a Java version. Additional information will be announced at a later time.

Validation Utility Tool (VUT) Update Chris Grose, CMS

- The iQIES team is working on the IRF Validation Utility Tool (VUT) that will support the changes to the IRF-PAI technical specifications that will be effective October 1, 2020. The VUT can be used by vendors and developers to validate that the software they build generates xml assessment records that can be uploaded to and accepted by iQIES. The VUT will no longer be a file download accessible directly on the QTSO website. With this new release, users will access the VUT via a direct link to the iQIES VUT at <https://iQIES.cms.gov/vut> and follow the [instructions to upload their XML assessment\(s\) zip file](#) for validation. An iQIES login is not required to access the iQIES VUT however, users with an iQIES login can also access the VUT using the link available in the banner at the bottom of the webpages within iQIES. The link will also be posted on the QTSO webpage when the IRF VUT is available.
- Following upload of the test submission XML file, users will have the option to download a validation report of their submission results. Because the VUT does not interface with iQIES, there will be some system edits related to actual data submission that are not supported in the VUT and therefore, will not be included in the validation report.
- Please note that only test data should be submitted to the iQIES VUT. PHI/PII should not be included in the xml assessment or zip file.

IRF User Tool Update Chris Grose, CMS

- There are no changes to the IRF User Tool except that the new data specs version will be incorporated into the user tool.

Top 5 Error Messages Kimberlie Jasmin, CMS

Top 5 IRF FATAL Error Messages in iQIES Production since 01/01/2020			
Error_Code	Error_Count	Severity	Error_Desc
-907	4,755	Fatal	Duplicate Assessment: The submitted record is a duplicate of a previously accepted record. Action: Determine why this record was submitted multiple times. DO NOT resubmit this record as it is already in the database.
-1037	1,890	Fatal	Incorrect Medicare Number or Medicare Beneficiary Identifier (MBI): The MBI or Medicare Number format is invalid. Action: Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.
-3573	792	Fatal	Inconsistent Dates: The dates listed are inconsistent.



			Action: Make appropriate corrections to the record and resubmit. Refer to the current data specifications to identify the acceptable values for this item.
-3745	403	Fatal	No Match Found: This modification/inactivation record does not match a previously accepted record in the System. One or more of the items submitted for this record did not match the corresponding items of an existing record in the database. Action: Make appropriate corrections to the record and resubmit. Refer to the current data specifications to identify the acceptable values for this item.
-1025	190	Fatal	Inconsistent A0055: The Correction Number submitted in A0055 is not incremented by one (1) from the previously submitted Correction Number for this record. Action: Make appropriate corrections to the record and resubmit. Refer to the current data specifications to identify the acceptable values for this item.

FHIR ConnectathonLorraine Wickiser, CMS

- The [Data Element Library](#) (DEL) is the centralized resources for CMS patient assessment data elements and their related health IT standards. It can be used by IT developers, researchers, providers, and other stakeholders who use PAC and HCBS assessments.
- Sponsored by CMS, in collaboration with ONC, MITRE is leading the [PACIO Project](#), a collaboration with industry stakeholders to advance key data exchange during transitions of care using FHIR. They have also developed a pilot application for the DEL- the “Pseudo DEL”, which allows IT developers to access the most current patient assessment content using a FHIR API. This work will be shared at the HL7 May [Connectathon](#) and the PACIO is looking for IT developers to test the work. The meeting is being held virtually this year and the cost is much less than in usual in-person meetings.
- I will provide presentation slides from our most recent PACIO Monthly meeting which provide a summary of activities. Currently, we are examining the exchange of functional and cognitive status data between eLTSS/HCBS and PAC settings, as well as participating in a Care Coordination Track with the Gravity Project. More information can be found on the links in the slide deck and [here](#). We also have a weekly meeting for the nuts and bolts of the work if you would like to participate. Please contact info@pacioproject.org if you are interested in attending either meeting.
- The PACIO is open to everyone and includes IT developers, clinicians, federal representatives, and others from across the healthcare industry- please feel free to share!

Discussion of Submitted Q & A’s..... Kimberlie Jasmin, CMS

- There were several questions submitted to the CMS mailbox that I would like to address on this call. Please review the attached Q&A’s.

Open Q and A Session Kimberlie Jasmin, CMS

Q: Will the CMG effective October 1 be released early for vendors to begin testing?

A: We do not have any information at this time. CMS will provide information about the CMG Grouper effective October 1, 2020 as soon as it becomes available.

Q: Will the CMG have a new DLL?

A: We do not have any information at this time. CMS will provide information about the CMG Grouper effective October 1, 2020 as soon as it becomes available.

Q: Would you please clarify what should be entered for items D0150C2 through D150I2 if D0150A2 and D0150B2 are less than 2?

A: If D0150A2 and D0150B2 are less than 2, then the response value ^ (skip pattern) is a valid response for items D0150C2 through D0150I2.

Closing Comments Kimberlie Jasmin, CMS

- If you think of questions later, please send them to our CMS mailbox at iQIES@cms.hhs.gov. Please note important resources listed at the bottom of the agenda. The meeting minutes from this call will be posted on the QTSO Vendor Page on the following week. Thanks to our speakers today and thank you for calling in to stay updated on the future changes to the IRF Quality Reporting Program.



Important Resources

QTSO.com

<https://qtso.cms.gov>

<https://qtso.cms.gov/vendor.html>

<https://qtso.cms.gov/vendors/inpatient-rehabilitation-facility-irf-pai-vendors>

CMS.gov – IRF Quality Reporting Program

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting>

CMS.gov - IRF Software Information

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/Software>

CMS.gov – IRF Prospective Payment System (PPS)

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS>

CMS.gov – IRF PPS Federal Regulations

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/IRF-Rules-and-Related-Files>

CMS.gov - IRF Contact Information

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/Contact>

Email - IRF Technical Issues

iQIES@cms.hhs.gov

Listserv

<http://www.cms.gov/OpenDoorForums>

<https://www.cms.gov/About-CMS/Agency-Information/Aboutwebsite/EmailUpdates>

<https://qtso.cms.gov/news-and-updates/subscribe-new-cms-iqies-listserv>