

# CODING THE CMS PATIENT DATA SYSTEM

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## CODING FORMS

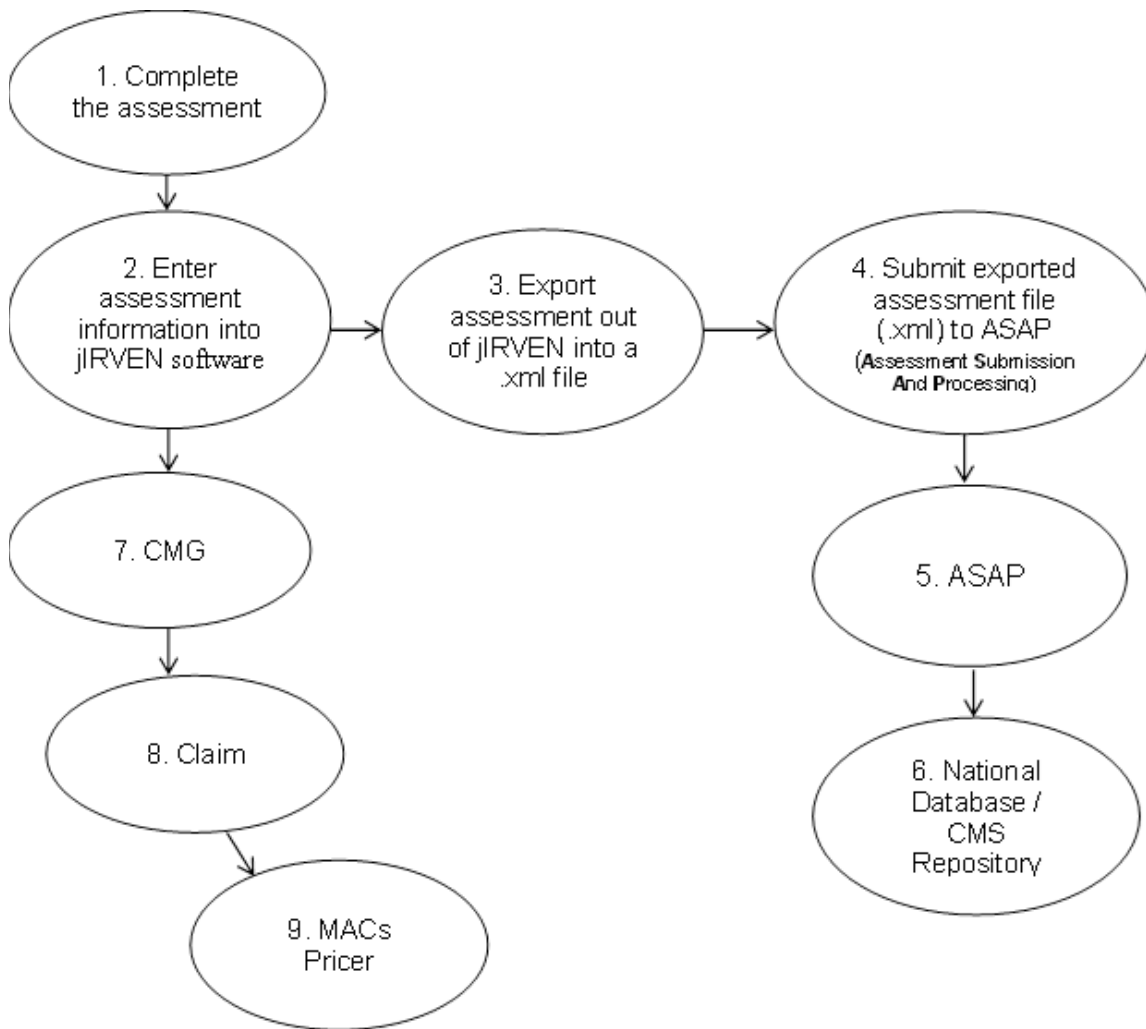
The input software for payment, jIRVEN, uses the IRF-PAI instrument on a question by question basis. Therefore, it is critical to complete the questions on the IRF-PAI carefully and accurately. All questions must be answered, except those that are specifically identified as voluntary (see Section 9 of this manual for reference). As shown in the jIRVEN data flow diagram on the next page, patient data are collected within the facility and entered into the software. These data are used for payment purposes and quality reporting. In addition, the data will be used to develop an analytical database for monitoring and assessing implementation of the IRF prospective payment system.

## CMS PATIENT DATA SYSTEM FLOW

jIRVEN software is a computer program available to all IRFs and can be downloaded free of charge from the CMS website: <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/Software.html>. The diagram on the next page illustrates the role of jIRVEN software in the flow of data within an IRF.

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## CMS PATIENT DATA SYSTEM FLOW



The above diagram depicts the following steps:

1. Complete the assessment.
2. Enter assessment information into the jIRVEN software.
3. Export the assessment out of jIRVEN into a .xml file.
4. Submit the exported assessment file from step 3 to the Assessment Submission And Processing system (ASAP).
- 5 and 6. Once accepted by ASAP, the data will reside in the National Database/CMS Repository.

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7. After entering in the (discharge) assessment information into the jIRVEN software (step 2), you can obtain the CMG value.
8. The IRF submits a Medicare claim.
9. The MAC processes the claim through it's software system that includes pricing programming called the "Pricer" software. The Pricer software uses the CMG number, along with other specific claim data elements and provider-specific data to adjust the IRF's prospective payment.