

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

This section of the manual includes two tables that will allow providers to easily identify what items on the IRF-PAI are voluntary and what items are mandatory. Table 1 specifically identifies what **non-quality reporting** IRF-PAI items are voluntary and what items are mandatory. Table 2 illustrates what **quality reporting** IRF-PAI items are voluntary and what items are mandatory. We have italicized the voluntary items on both tables to assist providers in being able to differentiate between the IRF-PAI items more easily.

For questions or concerns regarding the **non-quality** related IRF-PAI items please contact:
IRFCoverage@cms.hhs.gov

For questions or concerns regarding the **quality** related IRF-PAI items please contact:
IRF.Questions@cms.hhs.gov

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

Table 1. Non-Quality Reporting Items on the IRF-PAI

Note: *Non-Quality voluntary IRF-PAI items are italicized*

IRF-PAI Item	Mandatory or Voluntary	Rationale for Mandatory Status
1A. Facility Name	Mandatory	Required for Payment
1B. Facility Medicare Provider Number	Mandatory	Required for Payment
2. Patient Medicare Number	Mandatory	Required for Payment
3. Patient Medicaid Number	Mandatory	Required for Payment
4. Patient First Name	Mandatory	Required for Payment
5A. Patient Last Name	Mandatory	Required for Payment
6. Birth Date	Mandatory	Required for Payment
7. Social Security Number	Mandatory	Required for Payment
8. Gender	Mandatory	Required for Payment
9. Race/Ethnicity	Mandatory	Required for Payment
10. Marital Status	Mandatory	Required for Payment
11. Zip Code of Patient's Pre-Hospital Residence	Mandatory	Required for Payment
12. Admission Date	Mandatory	Required for Payment
13. Assessment Reference Date	Mandatory	Required for Payment
14. Admission Class	Mandatory	Required for Payment
15A. Admit From	Mandatory	Required for Payment
16A. Pre-Hospital Living Setting	Mandatory	Required for Payment
17. Pre-Hospital Living With	Mandatory	Required for Payment
18. DELETED	DELETED	DELETED
19. DELETED	DELETED	DELETED

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

IRF-PAI Item	Mandatory or Voluntary	Rationale for Mandatory Status
20. Payment Source	Mandatory	Required for Payment
21. Impairment Group	Mandatory	Required for Payment
22. Etiologic Diagnosis	Mandatory	Required for Payment
23. Date of Onset of Impairment	Mandatory	Required for Payment
24. Comorbid Conditions	Mandatory	Required for Payment
25. DELETED	DELETED	DELETED
26. DELETED	DELETED	DELETED
25A. Height on Admission	Mandatory	Required for Payment. Also required in order to calculate the New or Worsened Pressure Ulcer quality measure.
26A. Weight on Admission	Mandatory	Required for Payment. Also required in order to calculate the New or Worsened Pressure Ulcer quality measure.
27. <i>Swallowing Status</i>	<i>Voluntary</i>	
28. DELETED	DELETED	DELETED
29. Bladder Level of Assistance (Admission and Discharge)	Mandatory	Required for Payment
30. Bladder Frequency of Accidents (Admission and Discharge)	Mandatory	Required for Payment
31. Bowel Level of Assistance (Admission and Discharge)	Mandatory	Required for Payment
32. Bowel Frequency of Accidents (Admission and Discharge)	Mandatory	Required for Payment
33. Tub Transfer (Admission and Discharge)	Mandatory	Required for Payment
34. Shower Transfer (Admission and Discharge)	Mandatory	Required for Payment

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

IRF-PAI Item	Mandatory or Voluntary	Rationale for Mandatory Status
35. Distance Walked (Admission and Discharge)	Mandatory	Required for Payment
36. Distance Traveled in Wheelchair (Admission and Discharge)	Mandatory	Required for Payment
37. Walk (Admission and Discharge)	Mandatory	Required for Payment
38. Wheelchair (Admission and Discharge)	Mandatory	Required for Payment
39. Self-Care, Sphincter Control, Transfers, Locomotion, Communication, Social Cognition (Admission and Discharge)	Mandatory	Required for Payment
<i>39. Self-Care, Sphincter Control, Transfers, Locomotion, Communication, Social Cognition (Goals)</i>	<i>Voluntary</i>	
40. Discharge Date	Mandatory	Required for Payment
41. Patient Discharged Against Medical Advice	Mandatory	Required for Payment
42. Program Interruption(s)	Mandatory	Required for Payment
43. Program Interruption Dates	Mandatory	Required for Payment
44C. Was the Patient Discharged Alive	Mandatory	Required for Payment
44D. Patient's Discharge Destination/Living Setting	Mandatory	Required for Payment
45. Discharge to Living With	Mandatory	Required for Payment
46. Diagnosis for Interruption or Death	Mandatory	Required for Payment

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

IRF-PAI Item	Mandatory or Voluntary	Rationale for Mandatory Status
47. Complications During Rehabilitation Stay	Mandatory	Required for Payment

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

Table 2. Quality Reporting Items on the IRF-PAI -Admission Items

Note: *Quality voluntary IRF-PAI items are italicized*

IRF-PAI Item (Admission)	Mandatory or Voluntary ¹	Rationale for Mandatory Status
25A. Height on admission (in inches)	Mandatory	Required in order to risk adjust the New or Worsened Pressure Ulcer quality measure.
26A. Weight on admission (in pounds)	Mandatory	Required in order to risk adjust the New or Worsened Pressure Ulcer quality measure.
M0210. Unhealed Pressure Ulcer(s) - Admission Does this patient have one or more unhealed pressure ulcer(s) at Stage 1 or higher at Admission ?	Mandatory	Required in order to validate the New or Worsened Pressure Ulcer quality measure.
<i>M0300A1. Number of Stage 1 pressure ulcers</i>	<i>Voluntary</i>	
M0300B1. Number of Stage 2 pressure ulcers	Mandatory	Required in order to validate the New or Worsened Pressure Ulcer quality measure.
M0300C1. Number of Stage 3 pressure ulcers	Mandatory	Required in order to validate the New or Worsened Pressure Ulcer quality measure.
M0300D1. Number of Stage 4 Pressure Ulcers	Mandatory	Required in order to validate the New or Worsened Pressure Ulcer quality measure.
<i>M0300E1. Number of unstageable pressure ulcers due to non-removable dressing/device</i>	<i>Voluntary</i>	
<i>M0300F1. Number of unstagable pressure ulcers due to slough and/or eschar</i>	<i>Voluntary</i>	

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

<i>M0300G1. Number of unstageable pressure ulcers with suspected Deep Tissue Injury (DTI) in evolution</i>	<i>Voluntary</i>	
I0900A. Peripheral Vascular Disease (PVD)	Mandatory	Required in order to risk adjust the New or Worsened Pressure Ulcer quality measure.
I0900B. Peripheral Arterial Disease (PAD)	Mandatory	Required in order to risk adjust the New or Worsened Pressure Ulcer quality measure.
I2900A. Diabetes Mellitus (DM)	Mandatory	Required in order to risk adjust the New or Worsened Pressure Ulcer quality measure.
<i>I2900B. Diabetic Retinopathy</i>	<i>Voluntary</i>	
<i>I2900C. Diabetic Nephropathy</i>	<i>Voluntary</i>	
<i>I2900D. Diabetes Neuropathy</i>	<i>Voluntary</i>	
M0210. Unhealed Pressure Ulcer(s) - Discharge Does this patient have one or more unhealed pressure ulcer(s) at Stage 1 or higher on Discharge?	Mandatory	Required in order to calculate the New or Worsened Pressure Ulcer quality measure.

¹ If the facility does not wish to submit information for a voluntary item, a value of an equal sign "=" can be submitted

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

IRF-PAI Item	Mandatory or Voluntary	Rationale for Mandatory Status
M0210. Unhealed Pressure Ulcer(s) - Discharge Does this patient have one or more unhealed pressure ulcer(s) at Stage 1 or higher on Discharge?	Mandatory	Required in order to calculate the New or Worsened Pressure Ulcer quality measure.
<i>M0300A1. Enter total number of pressure ulcers currently at Stage 1.</i>	Voluntary	
<i>M0300A2. Of these Stage 1 pressure ulcers present at discharge, enter number that were: (a) present on admission as a Stage 1 and (b) remained at Stage 1 at discharge.</i>	Voluntary	
<i>M0300A3. Of these Stage 1 pressure ulcers, enter the number that were not present on admission. (i.e. – New stage 1 pressure ulcers that have developed during the IRF stay)</i>	Voluntary	
M0300B1. Enter total number of pressure ulcers currently at Stage 2.	Mandatory	Required in order to validate the New or Worsened Pressure Ulcer quality measure.
<i>M0300B2. Of these Stage 2 pressure ulcers present at discharge, enter the number that were: (a) present on admission, and (b) remained at Stage 2 at discharge.</i>	Voluntary	

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

IRF-PAI Item	Mandatory or Voluntary	Rationale for Mandatory Status
<i>M0300B3. Of these Stage 2 pressure ulcers present at discharge, enter the number that were: (a) present on admission as an unstageable pressure ulcer due to the presence of a non-removable device and (b) when it became stageable, the pressure ulcer was staged as a Stage 2, and (c) it remained at Stage 2 at the time of discharge.</i>	<i>Voluntary</i>	
M0300B4. Of <u>these</u> Stage 2 pressure ulcers present at discharge, enter the number that were: (a) not present on admission; or (b) were at a lesser stage at admission and worsened to a Stage 2 during the IRF stay	Mandatory	Required in order to calculate the New or Worsened Pressure Ulcer quality measure.
M0300C1. Enter total number of pressure ulcers currently at Stage 3.	Mandatory	Required in order to validate the New or Worsened Pressure Ulcer quality measure.
<i>M0300C2. Of these Stage 3 pressure ulcers present at discharge, enter the number that were: (a) present on admission, and (b) remained at Stage 3 at discharge.</i>	<i>Voluntary</i>	

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

IRF-PAI Item	Mandatory or Voluntary	Rationale for Mandatory Status
<i>M0300C3. Of these Stage 3 pressure ulcers present at discharge, enter the number that were: (a) present on admission as an unstageable pressure ulcer, and (b) when it became stageable, it was staged as a Stage 3; and (c) it remained at Stage 3 at the time of discharge.</i>	<i>Voluntary</i>	
M0300C4. Of these Stage 3 pressure ulcers present at discharge, enter the number that were: (a) not present on admission; or (b) were at a lesser stage at admission and worsened to a Stage 3 during the IRF stay; or (c) were unstageable due to a non-removable device at admission, initially became stageable at a lesser stage, but then progressed to a Stage 3 by the time of discharge.	Mandatory	Required in order to calculate the New or Worsened Pressure Ulcer quality measure.
M0300D1. Enter total number of pressure ulcers currently at Stage 4 .	Mandatory	Required in order to validate the New or Worsened Pressure Ulcer quality measure.
<i>M0300D2. Of these Stage 4 pressure ulcers present at discharge, enter number that were: (a) present on admission at Stage 4, and (b) remained at Stage 4 at discharge.</i>	<i>Voluntary</i>	

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

IRF-PAI Item	Mandatory or Voluntary	Rationale for Mandatory Status
<i>M0300D3. Of these Stage 4 pressure ulcers present at discharge, enter the number that were: (a) present on admission as an unstageable pressure ulcer, and (b) when it became stageable, it was staged as a Stage 4, and (c) it remained at Stage 4 at the time of discharge.</i>	<i>Voluntary</i>	
<i>M0300D4. Of these Stage 4 pressure ulcers present at discharge, enter the number that were: (a) not present on admission; or (b) were at a lesser stage at admission and worsened to a Stage 4 by discharge; or (c) were unstageable on admission, initially became stageable at a lesser stage, and then progressed to a Stage 4 by the time of discharge.</i>	Mandatory	Required in order to calculate the New or Worsened Pressure Ulcer quality measure.
<i>M0300E1. Enter total number of pressure ulcers currently Unstageable due to a Non-removable dressing or device.</i>	<i>Voluntary</i>	

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

IRF-PAI Item	Mandatory or Voluntary	Rationale for Mandatory Status
<i>M0300E2. Of <u>these</u> Unstageable pressure ulcers due to a non-removable dressing or device present at discharge, enter number that were: (a) present on admission as an unstageable pressure ulcer due to non-removable dressing or device; and (b) remained unstageable due to non-removable dressing or device until discharge.</i>	<i>Voluntary</i>	
<i>M0300E3. Of <u>these</u> Unstageable pressure ulcers due to non-removable dressing or device present at discharge, enter number that were (a) present on admission as a stageable pressure ulcer and became unstageable due to non-removable dressing or device during the IRF stay; and (b) remained unstageable due to a non-removable dressing or device until discharge.</i>	<i>Voluntary</i>	
<i>M0300F1. Enter total number of pressure ulcers currently Unstageable due to a Slough and/or Eschar</i>	<i>Voluntary</i>	

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

IRF-PAI Item	Mandatory or Voluntary	Rationale for Mandatory Status
<i>M0300F2. Of <u>these</u> Unstageable pressure ulcers due to slough and/or eschar present at discharge, enter number that were: (a) present on admission as an unstageable pressure ulcer due to slough and/or eschar; and (b) remained unstageable due to slough and/or eschar until discharge.</i>	<i>Voluntary</i>	
<i>M0300F3. Of <u>these</u> Unstageable pressure ulcers due to slough or eschar present at discharge, enter number that were: (a) present on admission as a stageable pressure ulcer; and became unstageable due to slough and/or eschar during the IRF stay; and (b) remained unstageable due to slough and/or eschar until discharge.</i>	<i>Voluntary</i>	
<i>M0300G1. Enter total number of unstageable pressure ulcers with Suspected Deep Tissue Injury (DTI) in evolution.</i>	<i>Voluntary</i>	

SECTION 9: VOLUNTARY/MANDATORY IRF-PAI ITEMS

IRF-PAI Item	Mandatory or Voluntary	Rationale for Mandatory Status
<i>M0300G2. Of these unstageable pressure ulcers with suspected DTI present at discharge, enter number that were:</i> (a) present on admission as an unstageable pressure ulcer due to a suspected deep tissue injury ; and (b) remained unstageable due to a suspected DTI until discharge.	<i>Voluntary</i>	
<i>M0900A-D. Indicate the number of pressure ulcers that were: (a) present on Admission; and (b) have completely closed (resurfaced with epithelium) upon Discharge. If there are no healed pressure ulcers noted at a given stage, enter 0.</i>	<i>Voluntary</i>	
O0250A. Did the patient receive the influenza vaccine in this facility for this year's influenza vaccination season?	Mandatory	Required in order to calculate the Patient Influenza Vaccination quality measure.
O0250B. Date influenza vaccine received	Mandatory	Required in order to validate the Patient Influenza Vaccination quality measure.
O0250C. If influenza vaccine not received, state reason: 1- 9	Mandatory	Required in order to calculate the Patient Influenza Vaccination quality measure.