

# Inpatient Rehabilitation Facility (IRF) Provider Preliminary Review Report Guide

The IRF Provider Preliminary Review Report gives each IRF an opportunity to view their quality measure-specific data in a facility-specific report. This guide provides an explanation of terms used in the IRF Provider Preliminary Review Report and informs users about how to access their facility-specific report.

The IRF Provider Preliminary Review Report allows users to review their data prior to public display of the data contained on the report, to be posted in accordance with Section 3004 of the Affordable Care Act, Pub. L. 111-148. Stat.124-119. 23 March 2010, available on the [U.S. Government Publishing Office website](#) (2.41MB-pdf).

The IRF Provider Preliminary Review Report will be available in March 2015 within the Certification and Survey Provider Enhanced Reporting (CASPER) application.

## Sample IRF Provider Preliminary Review Report

IRF Provider Preliminary Review Report

Review of Quality Measure data for time period 01/01/2014 to 06/30/2014

State: XX

Provider Name: ABC Provider

CCN: 123456

Street Address: 123 Address

City: Anytown

ZIP Code: XXXXX

Phone: 111-222-3333

Quality Measures	NQF Measure Number	Numerator/ Reported Infections	Denominator/ Device Days	Reported %	National Average	Expected Rate
Percent of Patients with Pressure Ulcers That Are New or Worsened (Short Stay)	0678	.	.	**	*	N/A
Catheter Associated Urinary Tract Infection (CAUTI)	0138	0	0	N/A	*	*

### Notes:

- Period (.) indicates data in the Numerator or Denominator field is Missing or has been excluded.
- Double asterisk (\*\*) in the reported percent (%) column indicates that the data could not be computed because of missing or excluded information.
- Asterisk (\*) indicates pending data.
- Expected Rate pertains to the CAUTI measure only.
- N/A indicates that the value is not applicable.
- The Quality Measure data is not Risk Adjusted for Percent of Patients with Pressure Ulcers that are New or Worsened.
- To review your submitted HAI rates, visit the CDC NHSN website:  
<http://www.cdc.gov/nhsn/inpatient-rehab/index.html>.

## Explanation of Provider Preliminary Review Report Fields

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### NQF Measure Number

The National Quality Forum (NQF) identification number associated with the Quality Measure.

### Pressure Ulcer Percentage Measure Calculation

- Numerator:** The number of patients for whom the discharge assessment indicates one or more new or worsened Stage 2 - 4 pressure ulcers.
- Denominator:** The number of patients with a qualifying assessment with target dates between 1/01/2014 and 6/30/2014 inclusive.
- Reported Percent (%):** Reported percent (%) is equal to the numerator divided by the denominator multiplied by one hundred (100). This percentage is not risk adjusted.

### CAUTI Measure Calculation

- Reported Infections:** The number of observed infections for quality reporting.
- Device Days:** The number of urinary catheter days reported for quality reporting.
- Reported Percent (%):** Displays on the report as N/A (not applicable), because CAUTI data is a rate, not a percentage. These data are reported for the time period 1/01/2014 to 6/30/2014.

### National Average

The National Average is derived by summing the numerators for all cases in the nation divided by the sum of the denominators in the nation.

### Expected Rate

The number of expected infections, in the context of statistical prediction, is calculated using rates from a standard population during a baseline time period. These rates will be provided in future reports.

## Frequently Asked Questions (FAQs)

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### When and how can I get my report?

The Provider Preliminary Review Report will be available in March 2015. The report is accessed using the CASPER Reporting Application. Please reference 'Accessing the Provider Preliminary Review Report' on the following page in this document for additional information.

### Who do I contact to ask questions about my report?

Please contact the HCIS Quality Reporting Review Report Help Desk for additional information and assistance as needed at [help@hcareis.com](mailto:help@hcareis.com).

### Where can I get additional information?

Updated IRF-PAI Training Manual (2.70MB .zip): [IRF-PAI Training Manual](#)

Quality Reporting Requirements: [IRF Quality Reporting Measures Information](#)

Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN) Website: [CDC NHSN](#)

# Accessing the Provider Preliminary Review Report

The Provider Preliminary Review Report can be accessed using the CASPER Reporting Application. Requesting access to the CMS system is performed two steps. Details are provided on the Quality Improvement Evaluation System (QIES) [Technical Support Office website](#).

Once successfully registered, access the CMS IRF-PAI Care System Welcome page and select the “CASPER Reporting” link.

## CMS IRF-PAI System – “CASPER Reporting” Link



### Welcome to the CMS IRF-PAI System!

Reminder: The IRF-PAI System may be down for maintenance the third Sunday of each month. If you experience any problems submitting or retrieving reports, please try again on Monday.

Reminder: Due to high submission volume, please allow at least 24 hours for your Final Validation Report. If you received an Initial Validation Report, do not submit the same file again as it is in the queue to be processed. Thank you for your cooperation.

Reminder: When an existing IRF receives a new Medicare provider number, the IRF must discontinue submitting data under the old provider number.

#### [IRF User Registration](#)



#### [IRF-PAI Submissions](#)

IRF-PAI Submissions User's Guide

**[CASPER Reporting](#)** Select this link to access the Final Validation and Provider reports.

CASPER Reporting User's Manual:

#### [QIES User Maintenance Application](#)

[QIES User Maintenance Application User's Guide](#)

[Home](#) | [Accessibility Policy](#) | [Privacy Policy](#) | [Help](#)

The “CASPER Reporting” link connects you to the QIES National System Login page for CASPER Reporting.

After logging in, the CASPER Topics (Home) page displays, as shown on the following page.

## Welcome to CASPER Screen – [Folders] button

**CASPER Topics** Logout Folders MyLibrary Reports Queue Options Maint Home

**Topics**

- Home Page
- Merge PDF Feature
- IE Active X Plug-in
- ZIP Feature
- Java JRC
- PSR/Jasper Report Viewer & Unzip Utility

**Home Page**

# Welcome to CASPER

**Use the buttons in the toolbar above as follows:**

- Logout** - End current session and exit the CASPER Application
- Folders** - View your folders and the documents in them
- Reports** - Select report categories and request reports
- Queue** - List the reports that have been requested but not yet completed
- Options** - Customize the report format, number of links displayed per page and report display size
- Maint** - Perform maintenance such as creating, renaming and/or deleting folders
- Home** - Return to this page

Select the **[Folders]** button from the CASPER toolbar to access the CASPER Folders page and view the folders that are available to you.

## CASPER Folders Screen

**CASPER Folders** Logout Folders MyLibrary Reports Queue Options Maint Home

**Folders**

My Inbox

- \* IA XXXXXX

\* IA XXXXXX

Info Click Link to View Report Date Requested Select

Public Reporting Preview	03/16/2007 11:06:13	<input type="checkbox"/>
Public Reporting Preview	11/20/2006 15:14:31	<input type="checkbox"/>

Pages [1]

This Folder is Read-Only

SelectAll Print PSRs Zip MergePDFs

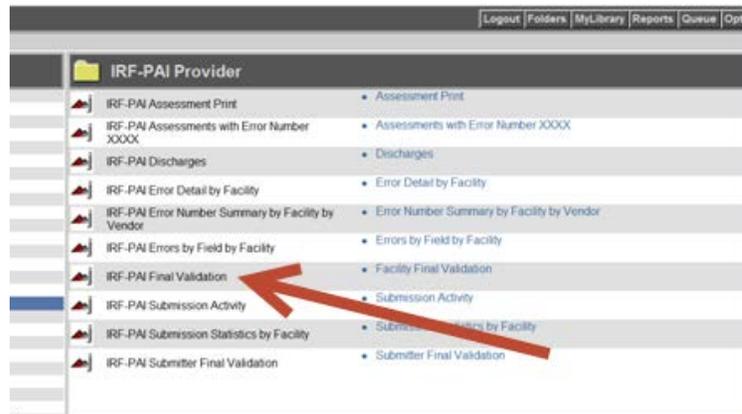
The report will be placed in the My Inbox pane (left side) and will be titled, "Provider\_Review\_2014..."

**Note:** As reports or other documents are delivered, the list of items in the folder on the CASPER Folders page may expand to multiple pages. You may need to scroll through the pages to locate the Provider Preliminary Review Report.

# How to Recreate the Numerator and Denominator of NQF # 0678 within the Provider Preliminary Review Report

1. In CASPER, select the “IRF-PAI Final Validation” for time frame 1/1/2014 - 6/30/2014:

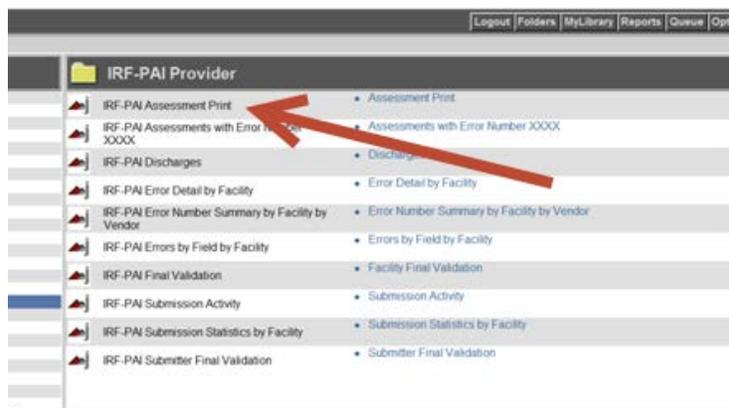
## IRF-PAI Final Validation Link



(The instructions to run the Final Validation Report are included in Appendix A of the IRF-PAI Submission User's Guide, on pages A-6 through A-13).

2. Run the “IRF-PAI Assessment Print” report for all Assessment Ids.

## IRF-PAI Assessment Print



3. From that list of printed assessments, remove any that were submitted after the submission deadline for the quarter of the assessment. Next, remove all of the assessments that do not have an “accepted” status.
4. To get the Numerator and Denominator, check each assessment against these Inclusion/Exclusion measure criteria:

# Denominator, Numerator, Exclusions

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## Denominator:

The number of patients with:

An IRF-PAI assessment with a discharge date between of 1/1/2014 and 6/30/2014 inclusive. Submission date of the assessment must be on or before 11/15/2014.

## Numerator:

The number of patients for whom the discharge assessment indicates one or more new or worsened Stage 2-4 pressure ulcers:

Stage 2 (49A)>0 OR

Stage 3 (49B)>0 OR

Stage 4 (49C)>0

## Exclusions:

Patients are excluded from the measure if the latest assessment does not have a usable response for 49A, 49B, or 49C identified below.

1. Examine each qualifying IRF-PAI assessment. For each assessment do the following:
  - 1.1. The response to 49A (Stage 2) is usable if 49A=[0,1,2,3,4,5,6,7,8,9,^].
  - 1.2. The response to 49B (Stage 3) is usable if 49B=[0,1,2,3,4,5,6,7,8,9,^].
  - 1.3. The response to 49C (Stage 4) is usable if 49C=[0,1,2,3,4,5,6,7,8,9,^].
  - 1.4. If **none** of the three items 49A, 49B or 49C is usable, the assessment is **not** usable and is discarded and the patient is excluded from the numerator and the denominator.
2. If all the assessments that are eligible are discarded and no usable assessments remain, the patient is excluded from the numerator and the denominator.
3. The assessments must have been accepted into QIES on or before the corresponding submission deadline date.