

#	Chapter/ Appendix	Section	Page(s)	Step(s)/ Table	IRF QRP Measure Calculations and Reporting User's Manual V3.0	IRF QRP Measure Calculations and Reporting User's Manual V3.1	Description of Change
1	n/a	n/a	n/a	n/a	Version 3.0	Version 3.1	Updated version number throughout document.
2	n/a	n/a	n/a	n/a	IRF QRP Measure Calculations and Reporting User's Manual, V3.0 – October 1, 2018	IRF QRP Measure Calculations and Reporting User's Manual, V3.1 – October 1, 2019	Updated version number and effective date on the footer throughout document.
3	Multiple	Multiple	Multiple	n/a	CASPER	iQIES	Changed CASPER to iQIES to reflect change in data submission system throughout document.
4	Multiple	Multiple	Multiple	n/a	IRF Functional Outcome Measure: Change in Self-Care Score for Medical Rehabilitation Patients (NQF #2633) (CMS ID: I009.02)	IRF Functional Outcome Measure: Change in Self-Care Score for Medical Rehabilitation Patients (NQF #2633) (CMS ID: I009.03)	Updated CMS ID to reflect change in measure specifications.
5	Multiple	Multiple	Multiple	n/a	IRF Functional Outcome Measure: Change in Mobility Score for Medical Rehabilitation Patients (NQF #2634) (CMS ID: I010.02)	IRF Functional Outcome Measure: Change in Mobility Score for Medical Rehabilitation Patients (NQF #2634) (CMS ID: I010.03)	Updated CMS ID to reflect change in measure specifications.
6	Multiple	Multiple	Multiple	n/a	IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients (NQF #2635) (CMS ID: I011.02)	IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients (NQF #2635) (CMS ID: I011.03)	Updated CMS ID to reflect change in measure specifications.
7	Multiple	Multiple	Multiple	n/a	IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients (NQF #2636) (CMS ID: I012.02)	IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients (NQF #2636) (CMS ID: I012.03)	Updated CMS ID to reflect change in measure specifications.

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8	1	1.1	2	n/a	The chapter concludes with the transition from IRF-PAI v1.5 to IRF-PAI v2.0. Data collection for IRF-PAI v2.0 begins on October 1, 2018 and will impact certain quality measure specifications.	The chapter concludes with the transition from IRF-PAI v2.0 to IRF-PAI v3.0. Data collection for IRF-PAI v3.0 begins on October 1, 2019 and will impact certain quality measure specifications.	Updated IRF-PAI version number.
9	1	1.2	2	n/a	Target period: The span of time that defines the measure reporting period (e.g., a calendar year for the quality measure Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) [NQF#0678]).	Target period: The span of time that defines the measure reporting period (e.g., a calendar year for the quality measure IRF Functional Outcome Measure: Change in Self-Care Score for Medical Rehabilitation Patients [NQF#2633]).	Updated text due to removal of measure from IRF QRP.
10	1	1.3	2	n/a	<ul style="list-style-type: none"> Influenza Season: The influenza season begins on July 1 of a given year and ends on June 30 of the subsequent year (e.g., July 1, 2017 through June 30, 2018 for the 2017-2018 influenza season). Influenza Vaccination Season: The influenza vaccination season begins on October 1 of a given year and ends on March 31 of the subsequent year (e.g., October 1, 2017 through March 31, 2018 for the 2017-2018 influenza vaccination season). 	[no text]	Definitions removed due to removal of related measure from IRF QRP.
11	1	1.3	3	1-1	Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine	[no text]	Row of table removed due to removal of measure from IRF QRP.

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12	2	n/a	5	n/a	<p>National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset <i>Methicillin-Resistant Staphylococcus aureus</i> (MRSA) Bacteremia Outcome Measure (NQF #1716) (CMS ID: I014.01)</p> <ul style="list-style-type: none"> This measure calculates the total number of observed hospital-onset unique blood source MRSA LabID events among all inpatients in the facility, from the total number of expected hospital-onset unique blood source MRSA LabID events, determined through the facility's number of inpatient days, bed size, affiliation with medical school, and community-onset MRSA bloodstream infection admission prevalence rate. This measure is risk-adjusted. CDC NHSN: MRSA 	[no text]	Text removed due to removal of measure from IRF QRP.
13	3	n/a	5	n/a	<p>All-Cause Unplanned Readmission Measure for 30 Days Post Discharge from Inpatient Rehabilitation Facilities (NQF #2502) (CMS ID: I007.01)¹</p> <ul style="list-style-type: none"> This measure estimates the risk-standardized rate of unplanned, all-cause readmissions for patients (Medicare fee-for-service beneficiaries) discharged from an Inpatient Rehabilitation Facility (IRF) who were readmitted to a short-stay acute-care hospital or Long-Term Care Hospital (LTCH), within 30 days of an IRF discharge. Medicare Claims-Based: All-Cause Unplanned Readmission  	[no text]	Text removed due to removal of measure from IRF QRP.

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14	3	n/a	5	n/a	Discharge to Community-Post Acute Care (PAC) Inpatient Rehabilitation Facility (IRF) Quality Reporting Program (QRP) (CMS ID: I019.01)	Discharge to Community-Post Acute Care (PAC) Inpatient Rehabilitation Facility (IRF) Quality Reporting Program (QRP) (NQF #3479) (CMS ID: I019.01)	Added NQF ID due to measure endorsement.
15	4	4.1	9	n/a	i. Drug Regimen Review Conducted with Follow-Up for Identified Issues – PAC IRF QRP (CMS ID: I021.01), Table 7-10	i. Drug Regimen Review Conducted with Follow-Up for Identified Issues – PAC IRF QRP (CMS ID: I021.01), Table 7-9	Table number updated.
16	4	4.2	9	n/a	Section 4.2: Quality Measure: Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay) (NQF #0680) (CMS ID: I002.01)	[no text]	Entire section deleted due to removal of measure from IRF QRP.
17	4	4.1	9	4-1	For information regarding the transition from IRF-PAI v1.5 to IRF-PAI v2.0, see Section 5.3 "Measure Calculations During the Transition from IRF-PAI v1.5 to IRF-PAI v2.0"	For information regarding the transition from IRF-PAI v2.0 to IRF-PAI v3.0, see Section 5.3 "Measure Calculations During the Transition from IRF-PAI v2.0 to IRF-PAI v3.0"	Updated text to reflect new IRF-PAI version number.
18	4	4.1	9	4-1	Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay) (NQF #0680) (CMS ID: I002.01)	[no text]	Row removed due to removal of measure from IRF QRP.
19	5	n/a	10	n/a	Section 5.3 of this chapter addresses the transition from IRF-PAI v1.5 to IRF-PAI v2.0. Data collection for IRF-PAI v2.0 begins on October 1, 2018 and will impact certain quality measure specifications.	Section 5.3 of this chapter addresses the transition from IRF-PAI v2.0 to IRF-PAI v3.0. Data collection for IRF-PAI v3.0 begins on October 1, 2019 and will impact certain quality measure specifications.	Updated text to reflect new IRF-PAI version.
20	5	5.1	11	n/a	Below are the specifications for the CASPER Review and Correct Reports for the quality measures presented in Chapter 4, Sections 4.1 and 4.2:	Below are the specifications for the iQIES Review and Correct Reports for the quality measures presented in Chapter 4, Section 4.1:	Edited text to reflect removal of section and change from CASPER to iQIES.

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21	5	5.1	12	5	5. The illustration of reporting timeline for the CASPER Review and Correct Reports for the following quality measure is provided in Table 5-5 for the quarterly rates and Table 5-6 for the cumulative rates: <ul style="list-style-type: none"> a. Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay) (NQF #0680) (CMS ID: I002.01) 	[no text]	Removed text to reflect removal of measure from IRF QRP.
22	5	5.1	12	n/a	Table 5-1 defines the discharge dates included for each calendar year quarter and influenza season quarter. Note that the influenza season starts on July 1st which means Quarter 1 begins on July 1st as opposed to January 1st. Table 5-2 displays whether the quality measure was considered new or existing for CASPER reporting in the user-requested year. For new measures, data is accumulated until 4 quarters have been collected and then rolling quarters occur for subsequent years. For existing measures, data is displayed based on rolling quarters. The Patient Influenza Vaccine measure has a separate table since it is the exceptions to this rule.	Table 5-1 defines the discharge dates included for each calendar year quarter. Table 5-2 displays whether the quality measure was considered new or existing for iQIES reporting in the user-requested year. For new measures, data is accumulated until 4 quarters have been collected and then rolling quarters occur for subsequent years. For existing measures, data is displayed based on rolling quarters.	Removed text to reflect removal of measure from IRF QRP.
23	5	5.1	12	5-1	Table 5-1: Discharge Dates for Each Quarter Defined by Calendar Year and Influenza Season	Table 5-1: Discharge Dates for Each Quarter Defined by Calendar Year	Removed text and updated table to reflect removal of measure from IRF QRP.
24	5	5.1	13	5-2	[no text]	2020	New 2020 measure type column added.

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25	5	5.1	13	n/a	Example of quarterly rates included in the iQIES Review and Correct Reports for an existing measure: If the requested calendar year quarter end date is Quarter 1, 2019 (end date of March 31st), the four quarters of data that will be provided in this request will include the following: Q2 2018 (April through June), Q3 2018 (July – September), Q4 2018 (October – December), and Q1 2019 (January – March).	Example of quarterly rates included in the iQIES Review and Correct Reports for an existing measure: If the requested calendar year quarter end date is Quarter 1, 2020 (end date of March 31st), the four quarters of data that will be provided in this request will include the following: Q2 2019 (April – June), Q3 2019 (July – September), Q4 2019 (October – December), and Q1 2020 (January – March).	Updated dates.
26	5	5.1	16	5-5	Table 5-5: CASPER Review and Correct Reports: Patient Influenza Vaccine Quarterly Rates Included in Each Requested Quarter End Date	[no text]	Removed table to reflect removal of measure from IRF QRP.
27	5	5.1	16	5-6	Table 5-6: CASPER Review and Correct Reports: Patient Influenza Vaccine Data Included in the Cumulative Rate for Each Requested Quarter End Date	[no text]	Removed table to reflect removal of measure from IRF QRP.
28	5	5.2	16	5-8	Table 5-8: CASPER QM Reports: Patient Influenza Vaccine Data Included in the Cumulative Rate for Each Requested Report End Date	[no text]	Removed table to reflect removal of measure from IRF QRP.
29	5	5.2	16	n/a	Below are the specifications for the CASPER QM Reports for measures presented in Chapter 4, Section 4.1 and 4.2	Below are the specifications for the iQIES QM Reports for measures presented in Chapter 4, Section 4.1	Edited text to reflect removal of measure from IRF QRP and change from CASPER to iQIES.
30	5	5.2	16	2	2. The illustration of reporting timeline for the monthly CASPER QM Reports is provided in Table 5-7 the following measures:	2. The illustration of reporting timeline for the monthly iQIES QM Reports is provided in Table 5-5 for the following measures:	Updated table reference and edited text to reflect change from CASPER to iQIES.

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31	5	5.2	16	3	<p>3. The illustration of the reporting timeline for the monthly CASPER QM Reports is provided in Table 5-8 for the following measure:</p> <p>a. Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay) (NQF #0680) (CMS ID: I002.01)</p>	[no text]	Removed text to reflect removal of measure from IRF QRP.
32	6	6.1; 6.2; 6.5; 6.6	Multiple	n/a	[no text]	<p>National Average Calculation</p> <p>To calculate the <u>patient stay-level</u> (i.e. prevalence) national average, refer to Step 2 under the CASPER QM Report Measure Calculations for this measure.</p>	Added instructions towards the end of each measure specification on how to calculate the national average for clarification.

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33	6	6.3; 6.4; 6.7; 6.8; 6.9	Multiple	n/a	[no text]	<p><u>National Average Calculation</u></p> <p>Use the following steps to calculate the <u>patient stay-level</u> (i.e. prevalence) national average:</p> <ol style="list-style-type: none"> 1. Determine the total number of patient stays in the nation after the exclusion criteria, if applicable. This is the denominator for the national average. 2. Identify patient stays in the denominator of the national average that are included in the numerator for this measure. This is the numerator for the national average. 3. Divide the numerator (Step 2) by the denominator (Step 1) then multiply by 100 and round the percent value to one decimal place to obtain the national average. <ol style="list-style-type: none"> a. If the digit in the second decimal place is 5 or greater, add 1 to the first decimal place, otherwise leave the first decimal place unchanged. b. Drop all of the digits following the first decimal place. 	Added instructions towards the end of each measure specification on how to calculate the national average for clarification.
34	6	6.1.A	24	n/a	Data collection for the measure Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: I001.02) will stop on September 30, 2018 and data collection for the replacement measure, Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: I022.01), will begin on October 1, 2018.	Data collection for the measure Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: I001.02) stopped on September 30, 2018 and data collection for the replacement measure, Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: I022.01), began on October 1, 2018.	Updated text.
35	6	6.5	39	3.1	3.1.5 Patients discharged directly to another IRF: Another Inpatient Rehabilitation Facility (Item 44D = [62]).	[no text]	Exclusion criteria updated.

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36	6	6.5	41	5.1	<p>5.1 Divide the facility-level observed change in self-care score (step 1) by the facility-level average expected change in self-care score (step 3) to create an observed to expected ratio.</p> <p>5.2 Multiply each IRF's ratio by the national average change in self-care score. This is the risk-adjusted average change in self-care score.</p>	<p>5. Calculate the risk-adjusted average change in self-care score (steps 5.1 through 5.2).</p> <p>5.1 Calculate the difference between the facility-level average observed change in self-care score (step 1) and the facility-level average expected change in self-care score (step 4) to create an observed minus expected difference (difference value).</p> <ul style="list-style-type: none"> • A value that is 0 indicates the observed score and expected score are equal. • A value that is greater than 0 indicates that the observed change in score is higher (better) than the expected score. • A value that is less than 0 indicates that the observed change in score is lower (worse) than the expected score. <p>5.2 Add each IRF's difference value (step 5.1) to the national average change in self-care score. This is the risk-adjusted average change in self-care score.</p>	Updated measure score calculation steps.

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37	6	6.6	43	1	<p>1. Calculate the admission Mobility score (steps 1.1 through 1.2) using the admission Mobility items and valid codes, identified below:</p> <p>The Mobility assessment items used for admission Mobility score calculations are:</p> <ul style="list-style-type: none"> • GG0170A1. Roll left and right • GG0170B1. Sit to lying • GG0170C1. Lying to sitting on side of bed • GG0170D1. Sit to stand • GG0170E1. Chair/bed-to-chair transfer • GG0170F1. Toilet transfer • GG0170G1. Car transfer • GG0170I1. Walk 10 feet • GG0170J1. Walk 50 feet with two turns • GG0170K1. Walk 150 feet • GG0170L1. Walking 10 feet on uneven surfaces • GG0170M1. 1 step (curb) • GG0170N1. 4 steps • GG0170O1. 12 steps. • GG0170P1. Picking up object 	<p>1. Calculate the admission Mobility score (steps 1.3 through 1.4) using the admission Mobility items and valid codes, identified below. Please note there are different items used if the patient does not walk at both admission and discharge (step 1.1) than for the remaining patients (step 1.2):</p> <p>1.1 For patients who have codes 07, 09, 10, or 88 for the Walk 10 feet item at both admission (GG0170I1, Walk 10 feet) and discharge (GG0170I3, Walk 10 feet), the following Mobility admission items are used for admission Mobility score calculations:</p> <ul style="list-style-type: none"> • GG0170A1. Roll left and right • GG0170B1. Sit to lying • GG0170C1. Lying to sitting on side of bed • GG0170D1. Sit to stand • GG0170E1. Chair/bed-to-chair transfer • GG0170F1. Toilet transfer • GG0170G1. Car transfer • GG0170R1. Wheel 50 feet with two turns* • GG0170S1. Wheel 150 feet* • GG0170M1. 1 step (curb) • GG0170N1. 4 steps • GG0170O1. 12 steps • GG0170P1. Picking up object <p><i>*Please count the score for this item twice; 15 items are used to calculate a patient's score (scores range from 15 – 90).</i></p> <p>1.2 For the remaining patients, please use the following Mobility admission items for admission Mobility score calculations:</p>	Updated with new wheelchair items.

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38	6	6.6	45	2	<p>4. Calculate the discharge Mobility score (steps 2.1 through 2.2) using the discharge Mobility items and valid codes, identified below:</p> <p>The Mobility assessment items used for discharge Mobility score calculations are:</p> <ul style="list-style-type: none"> • GG0170A3. Roll left and right • GG0170B3. Sit to lying • GG0170C3. Lying to sitting on side of bed • GG0170D3. Sit to stand • GG0170E3. Chair/bed-to-chair transfer • GG0170F3. Toilet transfer • GG0170G3. Car transfer • GG0170I3. Walk 10 feet • GG0170J3. Walk 50 feet with two turns • GG0170K3. Walk 150 feet • GG0170L3. Walking 10 feet on uneven surfaces • GG0170M3. 1 step (curb) • GG0170N3. 4 steps • GG0170O3. 12 steps • GG0170P3. Picking up object 	<p>1. Calculate the discharge Mobility score (steps 2.3 through 2.4) using the discharge Mobility items and valid codes, identified below. Please note there are different items used if the patient does not walk at both admission and discharge (step 2.1) than for the remaining patients (step 2.2):</p> <p>2.1 For patients who have codes 07, 09, 10, or 88 for the Walk 10 feet item at both admission (GG0170I1, Walk 10 feet) and discharge (GG0170I3, Walk 10 feet), the following Mobility assessment items are used for discharge Mobility score calculations:</p> <ul style="list-style-type: none"> • GG0170A3. Roll left and right • GG0170B3. Sit to lying • GG0170C3. Lying to sitting on side of bed • GG0170D3. Sit to stand • GG0170E3. Chair/bed-to-chair transfer • GG0170F3. Toilet transfer • GG0170G3. Car transfer • GG0170R3. Wheel 50 feet with two turns* • GG0170S3. Wheel 150 feet* • GG0170M3. 1 step (curb) • GG0170N3. 4 steps • GG0170O3. 12 steps • GG0170P3. Picking up object <p><i>*Please count the score for this item twice; 15 items are used to calculate a patient's score (scores range from 15 – 90).</i></p> <p>2.2 For the remaining patients, please use the following Mobility assessment items for discharge Mobility score calculations:</p>	Updated with new wheelchair items.
39	6	6.6	47	3.1	3.1.5 Patients discharged directly to another IRF: Another Inpatient Rehabilitation Facility (Item 44D = [62]).	[no text]	Exclusion criteria updated.

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40	6	6.6	49	5	<p>5. Calculate the risk-adjusted average change in mobility score (steps 5.1 through 5.2).</p> <p>5.1 Divide the facility-level average observed change in mobility score (step 1) by the facility-level average expected change in mobility score (step 3) to create an observed to expected ratio.</p> <p>5.2 Multiply each IRF's ratio by the national average change in mobility score. This is the risk-adjusted average change in mobility score.</p>	<p>5. Calculate the risk-adjusted average change in mobility score (steps 5.1 through 5.2).</p> <p>5.1 Calculate the difference between the facility-level average observed change in mobility score (step 1) and the facility-level average expected change in mobility score (step 4) to create an observed minus expected difference (difference value).</p> <ul style="list-style-type: none"> • A value that is 0 indicates the observed score and expected score are equal. • A value that is greater than 0 indicates that the observed change in score is higher (better) than the expected score. • A value that is less than 0 indicates that the observed change in score is lower (worse) than the expected score. <p>5.2 Add each IRF's difference value (step 5.1) to the national average change in mobility score. This is the risk-adjusted average change in mobility score.</p>	Updated measure score calculation steps.
41	6	6.7	50	2	2.1.5 Patient discharged directly to another IRF: Another Inpatient Rehabilitation Facility (Item 44D = [62]).	[no text]	Updated exclusion criteria.

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42	6	6.8	54	1	<p>1. Calculate the observed discharge Mobility score (steps 1.1 through 1.2) using the discharge Mobility items and valid codes, identified below:</p> <p>The Mobility assessment items used for discharge Mobility score calculations are:</p> <ul style="list-style-type: none"> • GG0170A3. Roll left and right • GG0170B3. Sit to lying • GG0170C3. Lying to sitting on side of bed • GG0170D3. Sit to stand • GG0170E3. Chair/bed-to-chair transfer • GG0170F3. Toilet transfer • GG0170G3. Car transfer • GG0170I3. Walk 10 feet • GG0170J3. Walk 50 feet with two turns • GG0170K3. Walk 150 feet • GG0170L3. Walking 10 feet on uneven surfaces • GG0170M3. 1 step (curb) • GG0170N3. 4 steps • GG0170O3. 12 steps • GG0170P3. Picking up object • Valid codes and code definitions for the coding of the discharge Mobility items are: • 06 – Independent • 05 – Setup or clean-up assistance • 04 – Supervision or touching assistance • 03 – Partial/moderate assistance • 02 – Substantial/maximal assistance • 01 – Dependent • 07 – Patient refused • 09 – Not applicable • 10 – Not attempted due to environmental limitations 	<p>1. Calculate the observed discharge Mobility score (steps 1.1 through 1.4) using the discharge Mobility items and valid codes, identified below. Please note there are different items used if the patient does not walk at both admission and discharge (step 1.1) than for the remaining patients (step 2.2):</p> <p>1.1 For patients who code 07, 09, 10, or 88 for the Walk 10 feet item at both admission (GG0170I1, Walk 10 feet) and discharge (GG0170I3, Walk 10 feet), the following Mobility assessment items are used for discharge Mobility score calculations:</p> <ul style="list-style-type: none"> • GG0170A3. Roll left and right • GG0170B3. Sit to lying • GG0170C3. Lying to sitting on side of bed • GG0170D3. Sit to stand • GG0170E3. Chair/bed-to-chair transfer • GG0170F3. Toilet transfer • GG0170G3. Car transfer • GG0170R3. Wheel 50 feet with two turns* • GG0170S3. Wheel 150 feet* • GG0170M3. 1 step (curb) • GG0170N3. 4 steps • GG0170O3. 12 steps • GG0170P3. Picking up object <p><i>*Please count the score for this item twice; 15 items are used to calculate a patient's score (scores range from 15 – 90).</i></p> <p>1.2 For remaining patients, please use the following Mobility assessment items for discharge Mobility score calculations:</p> <ul style="list-style-type: none"> • GG0170A3. Roll left and right • GG0170B3. Sit to lying • GG0170C3. Lying to sitting on side of bed • GG0170D3. Sit to stand • GG0170E3. Chair/bed-to-chair transfer • GG0170F3. Toilet transfer 	Updated with new wheelchair items.

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					<ul style="list-style-type: none"> • 88 – Not attempted due to medical condition or safety concerns • ^ – Skip pattern • - – Not assessed/no information <p>1.1 To obtain the score, use the following procedure</p> <ul style="list-style-type: none"> • If code is between 01 and 06, then use code as the score. • If code is 07, 09, 10, or 88, then recode to 01 and use this code as the score. <p>If the mobility item is skipped (^), dashed (-), or missing, recode to 01 and use this code as the score</p> <p>1.2 Sum the scores of the discharge mobility items to create a discharge mobility score for each patient stay. Scores can range from 15 – 90, with a higher score indicating greater independence.</p>	<ul style="list-style-type: none"> • GG0170G3. Car transfer • GG0170I3. Walk 10 feet • GG0170J3. Walk 50 feet with two turns • GG0170K3. Walk 150 feet • GG0170L3. Walking 10 feet on uneven surfaces • GG0170M3. 1 step (curb) • GG0170N3. 4 steps • GG0170O3. 12 steps • GG0170P3. Picking up object <p>Valid codes and code definitions for the coding of the discharge Mobility items are:</p> <ul style="list-style-type: none"> • 06 – Independent • 05 – Setup or clean-up assistance • 04 – Supervision or touching assistance • 03 – Partial/moderate assistance • 02 – Substantial/maximal assistance • 01 – Dependent • 07 – Patient refused • 09 – Not applicable • 10 – Not attempted due to environmental limitations • 88 – Not attempted due to medical condition or safety concerns • ^ – Skip pattern • - – Not assessed/no information <p>1.3 To obtain the score, use the following procedure</p> <ul style="list-style-type: none"> • If code is between 01 and 06, then use code as the score. • If code is 07, 09, 10, or 88, then recode to 01 and use this code as the score. • If the mobility item is skipped (^), dashed (-), or missing, recode to 01 and use this code as the score. 	

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						Sum the scores of the discharge mobility items to create a discharge mobility score for each patient stay. Scores can range from 15 – 90, with a higher score indicating greater independence.	
43	6	6.8	56	2	2.1.5. Patient discharged directly to another IRF: Another Inpatient Rehabilitation Facility (Item 44D = [62]).	[no text]	Updated exclusion criteria
44	7	n/a	Multiple	7-2 to 7-9	[Footnotes with IRF-PAI version 2.0 link]	[Footnotes with IRF-PAI version 3.0 link]	Updated footnotes to reflect change in IRF-PAI version.
45	7	n/a	Multiple	7-5 to 7-8	<p>Patient had an incomplete stay:</p> <ul style="list-style-type: none"> Length of stay is less than 3 days; i.e., Item 40 (Discharge Date) – Item 12 (Admission Date) is less than three days; Discharged against medical advice (Item 41 = [1]); Died while in IRF (Item 44C = [0]); Discharge destination (Item 44D) indicates the patient had a medical emergency (Item 44D = [02, 63, 65, 66]); Discharged directly to another IRF (Item 44D = [62]). 	<p>Patient had an incomplete stay:</p> <ul style="list-style-type: none"> Length of stay is less than 3 days; i.e., Item 40 (Discharge Date) – Item 12 (Admission Date) is less than 3 days; Discharged against medical advice (Item 41 = [1]); Died while in IRF (Item 44C = [0]); Discharge destination (Item 44D) indicates the patient had a medical emergency (Item 44D = [02, 63, 65, 66]); 	Updated exclusion criteria
46	7	n/a	Multiple	7-6 and 7-8	Functional assessment items included in this measure on the admission and discharge assessments are GG0170A1, GG0170B1, GG0170C1, GG0170D1, GG0170E1, GG0170F1, GG0170G1, GG0170I1, GG0170J1, GG0170K1, GG0170L1, GG0170M1, GG0170N1, GG0170O1, GG0170P1, GG0170A3, GG0170B3, GG0170C3, GG0170D3, GG0170E3, GG0170F3, GG0170G3, GG0170I3, GG0170J3, GG0170K3, GG0170L3, GG0170M3, GG0170N3, GG0170O3, and GG0170P3.	Functional assessment items included in this measure on the admission and discharge assessments are GG0170A1, GG0170B1, GG0170C1, GG0170D1, GG0170E1, GG0170F1, GG0170G1, GG0170I1, GG0170J1, GG0170K1, GG0170L1, GG0170M1, GG0170N1, GG0170O1, GG0170P1, GG0170R1, GG0170S1, GG0170A3, GG0170B3, GG0170C3, GG0170D3, GG0170E3, GG0170F3, GG0170G3, GG0170I3, GG0170J3, GG0170K3, GG0170L3, GG0170M3, GG0170N3, GG0170O3, GG0170P3, GG0170R3, and GG0170S3.	Updated footnotes with new items included for measure calculation.

#	Chapter/ Appendix	Section	Page(s)	Step(s)/ Table	IRF QRP Measure Calculations and Reporting User's Manual V3.0	IRF QRP Measure Calculations and Reporting User's Manual V3.1	Description of Change
47	7	n/a	Multiple	7-5 and 7-7	<p><i>Data for each covariate are derived from the admission assessment included in the target patient stay-level records.</i></p> <ol style="list-style-type: none"> 1. Age group 2. Admission self-care score – continuous 3. Admission self-care score – squared 4. Primary diagnosis group 5. Interaction between admission self-care and primary diagnosis group 6. Prior acute or IRF primary diagnosis – surgical 7. Prior functioning: self-care 8. Prior functioning: indoor ambulation 9. Prior mobility/device aids 10. Stage 2 pressure ulcer 11. Stage 3, 4, or unstageable pressure ulcer/injury 12. Cognitive function 13. Communication impairment 14. Bladder incontinence 15. Bowel incontinence 16. Swallowing ability 17. Comorbidities 	<p><i>Data for each covariate are derived from the admission assessment included in the target patient stay-level records.</i></p> <ol style="list-style-type: none"> 1. Age group 2. Admission self-care score – continuous 3. Admission self-care score – squared 4. Primary diagnosis group 5. Interaction between admission self-care and primary diagnosis group 6. Prior acute or IRF primary diagnosis – surgical 7. Prior functioning: self-care 8. Prior functioning: indoor ambulation 9. Prior mobility/device aids 10. Stage 2 pressure ulcer 11. Stage 3, 4, or unstageable pressure ulcer/injury 12. Cognitive function 13. Communication impairment 14. Bladder incontinence 15. Bowel incontinence 16. Swallowing ability 17. Low BMI 18. Comorbidities 	Added new BMI covariate

#	Chapter/ Appendix	Section	Page(s)	Step(s)/ Table	IRF QRP Measure Calculations and Reporting User's Manual V3.0	IRF QRP Measure Calculations and Reporting User's Manual V3.1	Description of Change
48	7	n/a	Multiple	7-6 and 7-8	<p>Data for each covariate are derived from the admission assessment included in the target patient stay-level records.</p> <ol style="list-style-type: none"> Age group Admission mobility score – continuous Admission mobility score – squared Primary diagnosis group Interaction between admission mobility and primary diagnosis group; Prior acute or IRF primary diagnosis – surgical Prior functioning: indoor ambulation Prior functioning: stair negotiation Prior functioning: cognition Prior mobility/device aids Stage 2 pressure ulcer Stage 3, 4, or unstageable pressure ulcer/injury Cognitive function Communication impairment Bladder incontinence Bowel incontinence Swallowing ability Total parenteral nutrition History of falls Comorbidities 	<p>Data for each covariate are derived from the admission assessment included in the target patient stay-level records.</p> <ol style="list-style-type: none"> Age group Admission mobility score – continuous Admission mobility score – squared Primary diagnosis group Interaction between admission mobility and primary diagnosis group; Prior acute or IRF primary diagnosis – surgical Prior functioning: indoor ambulation Prior functioning: stair negotiation Prior functioning: cognition Prior mobility/device aids Stage 2 pressure ulcer Stage 3, 4, or unstageable pressure ulcer/injury Cognitive function Communication impairment Bladder incontinence Bowel incontinence Swallowing ability Total parenteral nutrition History of falls Low BMI Comorbidities 	Added new BMI covariate
49	7	n/a	71	7-6	⁶⁶ All fifteen mobility items must = [06] on admission assessment for this exclusion to apply.	⁶⁶ The fifteen mobility items listed for this exclusion must = [06] on admission assessment for this exclusion to apply.	Updated footnote.
50	7	n/a	77	7-9	Table 7-9: Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay)	[no text]	Table removed due to removal of measure from IRF QRP.

#	Chapter/ Appendix	Section	Page(s)	Step(s)/ Table	IRF QRP Measure Calculations and Reporting User's Manual V3.0	IRF QRP Measure Calculations and Reporting User's Manual V3.1	Description of Change
51	7	n/a	77	7-9a	Table 7-9a: Percent of Residents or Patients Who Received the Seasonal Influenza Vaccine (Short Stay) (NQF #0680a) (CMS ID: I003.01)	[no text]	Table removed due to removal of measure from IRF QRP.
52	7	n/a	77	7-9b	Table 7-9b: Percent of Residents Who Were Offered and Declined the Seasonal Influenza Vaccine (Short Stay) (NQF #0680b) (CMS ID: I004.01)	[no text]	Table removed due to removal of measure from IRF QRP.
53	7	n/a	77	7-9c	Table 7-9a: Percent of Residents or Patients Who Did Not Receive, Due to Medical Contraindication, the Seasonal Influenza Vaccine (Short Stay) (NQF #0680c) (CMS ID: I005.01)	[no text]	Table removed due to removal of measure from IRF QRP.
54	7	n/a	77	7-9	Table 7-10: Drug Regimen Review Conducted with Follow-Up for Identified Issues – PAC IRF QRP (CMS ID: I021.01)	Table 7-9: Drug Regimen Review Conducted with Follow-Up for Identified Issues – PAC IRF QRP (CMS ID: I021.01)	Table number updated
55	Appendix	A.1	85-111	A-5	[covariates from Table A-5 in Appendix A, Section A.1]	[additional covariates added (Low BMI and condition groups) and coding updated]	Updated risk adjustment covariates for calculation of Change in Self-Care, Change in Mobility, Discharge Self-Care, and Discharge Mobility measures (NQF #2633, NQF #2634, NQF #2635, NQF #2636)

#	Chapter/ Appendix	Section	Page(s)	Step(s)/ Table	IRF QRP Measure Calculations and Reporting User's Manual V3.0	IRF QRP Measure Calculations and Reporting User's Manual V3.1	Description of Change
56	Appendix	A.1	111	A-5	**When calculating the admission self-care and mobility score risk adjusters, first recode each function item so that a code of 07, 09, or 88 is recoded to 01. Use this code as the score. If the mobility item is dash (-), skipped (^), or missing, recode to 01 and use this code as the score. If code is between 01 and 06, then use code as the score. The self-care – continuous covariate will have a range of scores from 7 to 42, and the mobility – continuous covariate will have a range of 15 to 90 after recoding.	**When calculating the admission self-care and mobility score risk adjusters, first recode each function item so that a code of 07, 09, 10, or 88 is recoded to 01. Use this code as the score. If the mobility item is dash (-), skipped (^), or missing, recode to 01 and use this code as the score. If code is between 01 and 06, then use code as the score. The self-care – continuous covariate will have a range of scores from 7 to 42, and the mobility – continuous covariate will have a range of 15 to 90 after recoding.	Updated table note to include new coding option for function items.