



Flu Shot Reminder

As a respected source of health care information, patients trust their doctors' recommendations. If you have Medicare patients who haven't yet received their flu shot, help protect them by recommending an annual influenza and a one time pneumococcal vaccination. Medicare provides coverage for flu and pneumococcal vaccines and their administration. – And don't forget to immunize yourself and your staff. **Protect yourself, your patients, and your family and friends.** Get Your Flu Shot. Remember - Influenza vaccination is a covered Part B benefit. Note that influenza vaccine is NOT a Part D covered drug. For more information about Medicare's coverage of adult immunizations and educational resources, go to <http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/SE0667.pdf> on the CMS website: .

MLN Matters Number: MM5325

Related Change Request (CR) #: CR5325

Related CR Release Date: December 22, 2006

Effective Date: October 1, 2005

Related CR Transmittal #: R1137CP

Implementation Date: January 22, 2007

Note: This article was updated on November 6, 2012, to reflect current Web addresses. All other information remains unchanged.

Inpatient Rehabilitation Facility (IRF) Teaching Adjustment

Provider Types Affected

Providers submitting claims to Medicare Fiscal Intermediaries (FIs) for IRF services provided to Medicare beneficiaries.

Impact on Providers

This article is based on Change Request (CR) 5325 which provides clarification of the IRF teaching adjustment for other types of Medicare providers (including long-term care hospitals (LTCHs)) that have been training residents and are currently converting to IRFs.

Background

Beginning October 1, 2005, the Centers for Medicare & Medicaid Services (CMS) implemented an adjustment for teaching facilities that operate an Inpatient Rehabilitation Facility (IRF) in order to compensate them for the higher costs incurred in providing care to Medicare beneficiaries. CMS implemented the

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teaching adjustment based on the ratio of residents and interns to the average daily census, raised to some power as described in the final rule.

The details of the adjustment are included as an attachment to the official instructions (CR4099) issued to your FI. That instruction and the revised portions of Chapter 3 of *the Medicare Claims Processing Manual* may be viewed by going to <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R693CP.pdf> on the CMS website. The *MLN Matters* article corresponding to CR 4099 can be found at <http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/MM4099.pdf> on the CMS website.

For Medicare providers (including LTCHs) that have been training residents and are currently converting to IRFs, the provider's fiscal intermediary (FI) will:

- Determine a Full-Time Equivalent (FTE) resident cap (for purposes of the IRF teaching status adjustment) that is:
 - Applicable beginning with the new IRF's payments under the IRF Prospective Payment System (PPS), and
 - Based on the FTE count of residents during the predecessor facility's cost reporting period ending on or before November 15, 2004.

Similar to the existing CMS policy for IRFs, if the predecessor facility did not begin training residents until after November 15, 2004, then the facility would initially receive an FTE cap of "0."

Once established, the FTE resident cap for the teaching status adjustment for the new IRF will be subject to the same rules and adjustments as any IRF's FTE resident cap.

CR5325 instructs your FI to:

- Identify all Medicare providers that are converting to IRFs for cost reporting periods beginning on and after October 1, 2006;
- Determine an FTE resident cap for purposes of the IRF teaching adjustment based upon the FTE count of residents during the predecessor facility's cost reporting period ending on or before November 15, 2004;
- Assign an FTE cap of zero if the predecessor facility did not begin training residents until after November 15, 2004; and

Make adjustments to the cap in accordance with the policies that are being applied in the IPF PPS and IPPS.

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Additional Information

For more information, you may also visit the IRF PPS website at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/index.html> on the CMS website

For complete details, please see the official instruction issued to your intermediary regarding this change. That instruction may be viewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R1137CP.pdf> on the CMS website.

If you have any questions, please contact your intermediary at their toll-free number, which may be found on the CMS website at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

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