

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Medicare & Medicaid Services



**News Flash – Vaccinate Early to Protect Against the Flu.** The Centers for Disease Control and Prevention (CDC) recommends a yearly flu vaccination as the first and most important step in protecting against flu viruses. Remind your patients that annual vaccination is recommended for optimal protection. Medicare pays for the flu vaccine and its administration for seniors and other Medicare beneficiaries with no co-pay or deductible. Take advantage of each office visit and start protecting your patients as soon as your 2011-2012 seasonal flu vaccine arrives. And, don't forget to immunize yourself and your staff.

**Get the Flu Vaccination -- Not the Flu.** Remember – Influenza vaccine plus its administration are covered Part B benefits. Note that influenza vaccine is NOT a Part D covered drug. For information about Medicare's coverage of the influenza vaccine and its administration, as well as related educational resources for health care professionals and their staff, please visit <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/index.html> on the Centers for Medicare & Medicaid Services (CMS) website.

MLN Matters® Number: MM7510 **Revised**

Related Change Request (CR) #: 7510

Related CR Release Date: September 13, 2011

Effective Date: October 1, 2011

Related CR Transmittal #: R2301CP

Implementation Date: October 3, 2011

## **Inpatient Rehabilitation Facility (IRF) Annual Update: Prospective Payment System (PPS) Pricer Changes for Fiscal Year (FY) 2012**

**Note:** This article was updated on August 8, 2012, to reflect current Web addresses. Previously, it was revised on September 14, 2011, to reflect the revised CR7510. The CR was revised to correct the fixed loss amount from \$10,660 to \$10,713. Also, the CR transmittal number, release date, and the Web address for accessing the CR were changed. All other information remains the same.

### **Provider Types Affected**

This article is for Inpatient Rehabilitation Facilities (IRFs) submitting claims to Medicare contractors (Fiscal Intermediaries (FIs) and/or Part A/B Medicare Administrative Contractors (A/B MACs)) for services provided to Medicare beneficiaries.

#### **Disclaimer**

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## Provider Action Needed

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This article is based on Change Request (CR) 7510 which provides updated rates used to correctly pay Inpatient Rehabilitation Facility Prospective Payment System (IRF PPS) claims for Fiscal Year (FY) 2012. Be sure your billing staff is aware of these changes.

## Key Points of CR7510

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The FY 2012 IRF PPS Update Notice published on July 29, 2011, sets forth the prospective payment rates applicable for IRFs for FY 2011. A new IRF PRICER software package will be released prior to October 1, 2011, that will contain the updated rates that are effective for claims with discharges that fall within October 1, 2011, through September 30, 2012.

### PRICER Updates: For IRF PPS FY 2011 (October 1, 2011 – September 30, 2012)

- The standard Federal rate is \$14,076;
- The fixed loss amount is \$10,713;
- The labor-related share is 0.70199;
- The non-labor related share is 0.29801;
- Urban national average Cost-to-Charge Ratio (CCR) is 0.520;
- Rural national average CCR is 0.669;
- The Low Income Patient (LIP) Adjustment is 0.4613;
- The Teaching Adjustment is 0.6876; and
- The Rural Adjustment is 1.184.

## Additional Information

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If you have questions, please contact your Medicare MAC or FI at their toll-free number which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website. The official instruction (CR7510) issued to your Medicare MAC and/or FI is available at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R2301CP.pdf> on the CMS website.

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