

**INPATIENT REHABILITATION FACILITY (IRF)  
QUALITY REPORTING PROGRAM (QRP)  
PROVIDER TRAINING**

*Participant Questions from Provider Training*

**IRF QRP: Achieving a Full AIF**

*On May 19, 2021*

**Current as of June 2021**



## Acronym List

Acronym	Definition
AIF	Annual Increase Factor
APU	Annual Payment Update
CDC	Centers for Disease Control and Prevention
CMS	Centers for Medicare & Medicaid Services
FY	Fiscal Year
IRF	Inpatient Rehabilitation Facility
IRF-PAI	Inpatient Rehabilitation Facility-Patient Assessment Instrument
iQIES	Internet Quality Improvement and Evaluation System
NHSN	National Healthcare Safety Network
QM	Quality Measure
QRP	Quality Reporting Program
QTSO	QIES Technical Support Office
SPADES	Standardized Patient Assessment Data Elements

#	Question	Response
1	Can you provide more information on what data are required to be reported for the Inpatient Rehabilitation Facility (IRF) Quality Reporting Program (QRP)?	<p>For information on the quality data IRFs are required to report for the IRF QRP, please visit the IRF Quality Reporting Measures Information web page on the IRF QRP website: <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Program-Measures-Information-">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Program-Measures-Information-</a>.</p> <p>In the Downloads section at the bottom of this page is a document titled, “FY 2022 IRF QRP APU Table for Reporting Assessment Based Measures and SPADEs Finalized 508,” which provides an overview of data elements used for reporting assessment-based quality measures (QMs) and Standardized Patient Assessment Data Elements (SPADEs) affecting Fiscal Year (FY) 2022 Annual Payment Updates (APUs).</p>
2	Our facility did not receive a letter of noncompliance. Does that mean we are compliant with the IRF QRP?	IRFs should be looking for the letter in the Internet Quality Improvement and Evaluation System (iQIES) in June or July. Compliant IRFs will not receive a letter. Checking the Provider Threshold Report regularly will provide some details about compliance throughout the year.
3	What percentage of Inpatient Rehabilitation Facility-Patient Assessment Instrument (IRF-PAI) submissions are required this year to avoid the Annual Increase Factor (AIF) reduction?	IRFs must meet or exceed two separate data completeness thresholds. There is a 95-percent threshold for completion of required QM and SPADEs data collected using the IRF-PAI and submitted using iQIES. There is a 100-percent threshold for measures data collected and submitted using the Centers for Disease Control and Prevention’s (CDC) National Healthcare Safety Network (NHSN). If you fail to meet submission requirements this year (2021), your AIF will be reduced by 2 percentage points for FY 2023.
4	How can I identify which assessments have error messages?	<p>Go to iQIES to run the Assessments with Error Number XXXX reports. Error messages 5004 and/or 5061 relate to items that may result in not meeting the required AIF minimum submission threshold. You should also run any Final Validation Reports to confirm that your assessments have been successfully submitted. That is where you will see if there are any errors in the submission.</p> <p>Training and resources for accessing reports can be found on the iQIES YouTube channel: <a href="https://qtso.cms.gov/training-materials/iqies-training-videos">https://qtso.cms.gov/training-materials/iqies-training-videos</a>.</p> <p>Section 5 of the <i>IRF-PAI Submission User’s Guide</i> available here: <a href="https://qtso.cms.gov/providers/inpatient-rehabilitation-facility-irf-pai-providers/reference-manuals">https://qtso.cms.gov/providers/inpatient-rehabilitation-facility-irf-pai-providers/reference-manuals</a>. This page contains information about error messages.</p>

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5	I don't understand why we are not compliant. The Review and Correct Report shows we are at 100 percent.	Review and Correct Reports provide data by measure and by quarter (both at the facility and resident levels) of the provider's QM results for four rolling quarters. It also identifies the open/closed status of each quarter's data correction period as of the report run date. Of note, the QM calculations are performed weekly and on the first day of each quarter, so you can get a pretty accurate picture if you pull the report weekly or at a minimum monthly. Remember that the Review and Correct Report is not an AIF report. It was developed to allow providers to review their QM data to identify if any corrections or changes that may be necessary prior to the quarter's data submission deadline (which is 4.5 months after the end of the quarter). It also gives the providers an opportunity to see their data calculated in a similar manner to the Provider Preview Reports.
6	How do I correct errors in my IRF-PAI/assessment data?	For assistance with IRF-PAI data submission and correcting errors, please contact the iQIES help desk at <a href="mailto:iQIES@cms.hhs.gov">iQIES@cms.hhs.gov</a> .  Please note: Corrections to the IRF-PAI records must be submitted prior to the final submission deadline as outlined on the IRF Quality Reporting Data Submission Deadlines web page: <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Data-Submission-Deadlines">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Data-Submission-Deadlines</a> .
7	How do I verify my NHSN data for the IRF QRP?	The best method to verify your current NHSN data submission is by running the Centers for Medicare & Medicaid Services (CMS) reports found in the Analysis – Reports section of NHSN. Detailed guidance on how to run and interpret CMS reports and all other NHSN reports, as well as a checklist used to ensure complete reporting into NHSN, can be found at the NHSN website: <a href="https://www.cdc.gov/nhsn/cms/irf.html">https://www.cdc.gov/nhsn/cms/irf.html</a> .  More information regarding the location and interpretation of these reports can also be found on the CDC Web site: <a href="https://www.cdc.gov/nhsn/ps-analysis-resources/reference-guides.html">https://www.cdc.gov/nhsn/ps-analysis-resources/reference-guides.html</a> .  If you have additional questions regarding these reports within NHSN, please contact the NHSN Help Desk at <a href="mailto:NHSN@cdc.gov">NHSN@cdc.gov</a> .
8	When is the IRF QRP Preview Report available to iQIES users? Quarterly?	The IRF QRP Provider Preview Reports are issued quarterly at specific times and allow for 30-day preview periods.
9	What happens if you need to make a modification to an IRF-PAI, but the submission deadline has passed?	IRF-PAI data can be modified beyond the final submission deadlines (available: <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Data-Submission-Deadlines">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Data-Submission-Deadlines</a> ), but the corrected data will only be reflected in the QM facility- and patient-level reports. Corrections will not be reflected in the Review and Correct and Provider Preview Reports or on Care Compare.

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10	Is there a late submission penalty in payment for IRF-PAI's submitted after 27 days?	No, the late submission penalty was removed in the FY 2018 final rule: <a href="https://www.federalregister.gov/documents/2017/08/03/2017-16291/medicare-program-inpatient-rehabilitation-facility-prospective-payment-system-for-federal-fiscal">https://www.federalregister.gov/documents/2017/08/03/2017-16291/medicare-program-inpatient-rehabilitation-facility-prospective-payment-system-for-federal-fiscal</a> .
11	Is the 27-day deadline being added back as a requirement? The 25-day deadline was removed from the regulations in 2019 for submission of IRF-PAI after day of discharge.	The 27-day deadline refers to late transmission of the IRF-PAI (see Chapter 2, Overview to the item-by-item Guide to the Inpatient Rehabilitation Facility-Patient Assessment Instrument, pages 2–4 of the <i>IRF-PAI Manual Version 3.0</i> , April 2019 [effective Oct. 2019]) found at <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-PAI-and-IRF-PAI-Manual">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-PAI-and-IRF-PAI-Manual</a> . The 25-percent payment penalty for late transmission was removed in the FY 2018 rule: <a href="https://www.federalregister.gov/documents/2017/08/03/2017-16291/medicare-program-inpatient-rehabilitation-facility-prospective-payment-system-for-federal-fiscal">https://www.federalregister.gov/documents/2017/08/03/2017-16291/medicare-program-inpatient-rehabilitation-facility-prospective-payment-system-for-federal-fiscal</a> .
12	When will the yearly flu data be updated in the iQIES reports?	Please contact the iQIES Help Desk: call 1-800-339-9313 or email at <a href="mailto:iQIES@cms.hhs.gov">iQIES@cms.hhs.gov</a> .
13	What happens if an IRF-PAI is submitted/accepted late?	There is no penalty associated with late transmission of the IRF-PAI. However, according to Chapter 2, pages 2-4 in the <i>IRF-PAI User's Manual</i> , the IRF-PAI is to be transmitted no later than 27 days after a patient is discharged.
14	If data on the Review and Correct file was incorrect, how do you correct it? Through each patient IRF-PAI? In other words, we would have to retract the IRF-PAI, change the data, and then resubmit the IRF-PAI with the corrected data?	You would modify the incorrect data on the IRF-PAI in question and resubmit with the correct data. For further assistance, please contact the iQIES Help Desk at (800) 339-9313 or <a href="mailto:iQIES@cms.hhs.gov">iQIES@cms.hhs.gov</a> .
15	Can you clarify the difference between the IRF-PAI submission and the discharge assessment submission? For example, does the full IRF-PAI need to be submitted 27 calendar days from the day of discharge or by the quarterly submission deadline?	The 27-day transmission deadline refers only to when CMS considers the IRF-PAI to be late. The IRF QRP quarterly submission deadline is related to IRF QRP requirements for reporting of assessment-based data. We recommend you review the <i>IRF-PAI Manual Version 3.0</i> April 2019 [effective Oct. 2019], Chapter 2, Overview to the item-by-item Guide for completion and submission information to ensure you are meeting these requirements. The manual is available here: <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-PAI-and-IRF-PAI-Manual">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-PAI-and-IRF-PAI-Manual</a> , and the submission deadlines information available here: <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Data-Submission-Deadlines">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Data-Submission-Deadlines</a> .
16	If the IRF is not compliant in the NHSN/CDC measure, will this notification be in the iQIES site or is this site only for IRF-PAI measures?	Please contact the NHSN Help Desk by email at <a href="mailto:NHSN@cdc.gov">NHSN@cdc.gov</a> regarding data reporting compliance.

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17	Where can we find a list of the IRF-PAI submission message number definitions? Example: 1031 warning.	We recommend Section 5 of the IRF-PAI Submission User's Guide, found on the QIES Technical Support Office (QTSO) website at <a href="https://qtso.cms.gov/system/files/qtso/Users_Sec5_4.pdf">https://qtso.cms.gov/system/files/qtso/Users_Sec5_4.pdf</a> .
18	I heard in the presentation that if the IRF-PAI is submitted past Day 27 from the discharge date it is considered late. I thought this requirement of data transmission by Day 27 had been lifted. Is that not the case?	The IRF-PAI is considered late if transmitted more than 27 days after discharge; however, the late transmission penalty was removed in the FY 2018 final rule: <a href="https://www.federalregister.gov/documents/2017/08/03/2017-16291/medicare-program-inpatient-rehabilitation-facility-prospective-payment-system-for-federal-fiscal">https://www.federalregister.gov/documents/2017/08/03/2017-16291/medicare-program-inpatient-rehabilitation-facility-prospective-payment-system-for-federal-fiscal</a> . The IRF-PAI Manual (Oct. 2019) on pages 2–4 provides information regarding late transmission of the IRF-PAI.
19	When are iQIES reports updated with the NHSN data? And who do we contact with questions about iQIES reports?	Please contact the NHSN Help Desk by email at <a href="mailto:NHSN@cdc.gov">NHSN@cdc.gov</a> regarding data reporting compliance for NHSN, and the iQIES Help Desk regarding questions related to iQIES reports phone: (800) 339-9313 or <a href="mailto:iQIES@cms.hhs.gov">iQIES@cms.hhs.gov</a> .
20	If an IRF is noncompliant, how do they find out who the noncompliance letter will be sent to?	The facility will receive the noncompliance letter through the U.S. Postal Service and an electronic copy will be placed in the noncompliance notification folder in iQIES.