

IRF and LTCH Virtual Training Program – Part 1

Case Study

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Objective

- Apply knowledge acquired during the Inpatient Rehabilitation Facility (IRF) and Long-Term Care Hospital (LTCH) Virtual Training Program – Part 1 to accurately code an integrated clinical case study using select data elements.

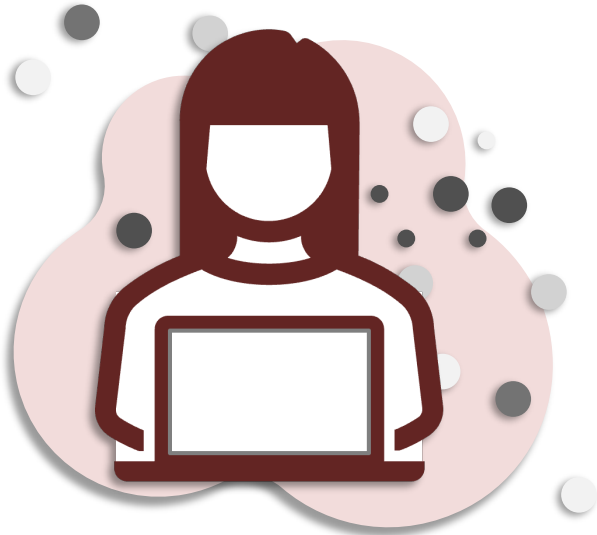


Framework for the Case Study Activity – Part 1

- The Case Study activity will be completed independently by participants. This presentation provides instructions on completing this activity.
- The documents for Part 1 of the Case Study activity include the following:
 - Case Study Narrative.
 - A document providing the clinical data for coding the patient scenario.
 - Case Study Coding Response Sheet.
 - A blank template to record your coding responses.



Framework for the Case Study Activity – Part 2



- The Case Study will be discussed, and the correct coding responses and rationale will be reviewed during the live virtual Coding Workshop, part of the IRF and LTCH Virtual Training Program – Part 2, to be held in June 2022.

Case Study Scenario

- The patient, Mr. P., is a 68-year-old African American/Filipino male admitted to an acute care hospital on April 10, 2022, after a fall.
- His acute care admission diagnoses included:
 - Fall without injury.
 - Embolic cerebral infarction.
 - Dysphagia.
 - Right-sided weakness.
- Mr. P. was transferred to a Post-Acute Care (PAC) facility on April 15, 2022, for anticoagulation, nutritional and chronic pain management, and ongoing physical and occupational therapy.



Case Study Instructions

1. Download (you can also print) the following documents provided for this activity:
 - IRF and LTCH Virtual Training Program – Part 1 Case Study Narrative.
 - IRF and LTCH Virtual Training Program – Part 1 Case Study Coding Response Sheet.
2. Read the Case Study Narrative.
3. Code the subset of admission and discharge items identified for Mr. P. and provide your answers on the Case Study Coding Response Sheet.
4. Bring your completed case study materials to the live virtual Coding Workshop in June 2022.



Admission Assessment Items to Code



- **A1005.** Ethnicity.
- **A1010.** Race.
- **A1110.** Language.
- **A1250.** Transportation.
- **B0200.** Hearing.
- **B1000.** Vision.
- **B1300.** Health Literacy.
- **J0510.** Pain Effect on Sleep.
- **J0520.** Pain Interference with Therapy Activities.
- **J0530.** Pain Interference with Day-to-Day Activities.
- **K0520.** Nutritional Approaches.
- **N0415.** High-Risk Drug Classes: Use and Indication.
- **O0110.** Special Treatments, Procedures, and Programs.

Discharge Assessment Items to Code



- **A1250.** Transportation.
- **A2121.** Provision of Current Reconciled Medication List to Subsequent Provider at Discharge.
- **A2122.** Route of Current Reconciled Medication List Transmission to Subsequent Provider.
- **A2123.** Provision of Current Reconciled Medication List to Patient at Discharge.
- **A2124.** Route of Current Reconciled Medication List Transmission to Patient.
- **B1300.** Health Literacy.
- **J0510.** Pain Effect on Sleep.
- **J0520.** Pain Interference with Therapy Activities.
- **J0530.** Pain Interference with Day-to-Day Activities.
- **K0520.** Nutritional Approaches.
- **N0415.** High-Risk Drug Classes: Use and Indication.
- **O0110.** Special Treatments, Procedures, and Programs.

Resources for Coding the Case Study

- In addition to the Case Study Narrative, use the information in the relevant presentations from the IRF and LTCH Virtual Training Program – Part 1 as resources when coding the Case Study.



Case Study Debrief



- An in-depth discussion of the correct coding and rationale for this subset of admission and discharge items will be provided during the live virtual Coding Workshop, part of the IRF and LTCH Virtual Training Program – Part 2, to be held in June 2022.

Submitting Questions

- If you have questions about the Case Study, please submit them to PACTraining@Econometricalnc.com by June 3, 2022.

