





# AQ-IQ IRF-PRO Lab

## Session 1



# Disclosures

Financial – CEO of AQ Consulting, LLC and AQ-IQ, LLC

Nonfinancial – No relevant nonfinancial relationships exist

# Disclaimer

The information contained in this presentation is provided to assist the attendee in understanding the reimbursement process. It is intended to assist healthcare providers in accurately obtaining reimbursement for health care services. It is not intended to increase or maximize reimbursement inappropriately by any payer. It is strongly recommended that attendees consult their payer organizations regarding local reimbursement policies. The information contained in the presentation is provided for information purposes only and represents no statement, promise or guarantee concerning levels of reimbursement, payment or charge. The material is designed to provide accurate information on the subject matter covered and is for guidance and reference purposes only. Although prepared for use by professionals, the presentation information should not be utilized as a substitute for professional services in specific situations. If legal advice is required, the services of a professional should be sought.

RIC/CMG		RIC/CMG VALUATION FY 2021										
		National Average Standardized Payment Rate (\$16,460)					RIC ROUNDBYRS A					
		YR 1 - R		YR 1 - G			YR 1 - D		YR 1 - F			
RIC/CMG	CMG Description (Numerator, Average)	RW	PMT -1	AVG LOS	RW	PMT -1	AVG LOS	RW	PMT -1	AVG LOS	RW	PMT -1
0101	Stroke M >=65.00 and M <75.00	1.0114	\$ 17,995.29	10	0.8810	\$ 14,861.63	10	0.8152	\$ 13,791.58	10	0.7830	\$ 13,199.29
0102	Stroke M >=65.00 and M <75.00	1.3174	\$ 23,298.05	13	1.1282	\$ 18,263.23	13	0.9851	\$ 17,616.21	12	0.9001	\$ 16,457.69
0103	Stroke M >=65.00 and M <75.00	1.0885	\$ 18,299.43	10	1.4401	\$ 24,274.33	16	1.3363	\$ 23,524.87	15	1.2789	\$ 21,657.14
0104	Stroke M >=65.00 and M <75.00	2.4820	\$ 41,851.78	23	3.1225	\$ 35,778.55	23	1.9609	\$ 33,199.58	21	1.8551	\$ 29,696.24
0105	Stroke M >=65.00 and M <75.00	1.8025	\$ 28,081.74	20	2.4255	\$ 41,193.36	24	2.2026	\$ 28,141.76	23	2.1550	\$ 31,773.56
0106	Stroke M >=65.00 and M <75.00	1.1890	\$ 19,375.87	10	0.9399	\$ 15,842.93	14	0.8443	\$ 14,231.52	10	0.7891	\$ 13,773.56
0106	Traumatic brain injury M >=75.00	1.4440	\$ 24,340.66	12	1.1807	\$ 19,801.88	14	1.0606	\$ 17,871.47	12		
0201	Traumatic brain injury M >=75.00	1.7411	\$ 29,347.98	16	1.4235	\$ 23,994.52	16	1.2787	\$ 21,563.77			
0301	Traumatic brain injury M >=75.00	2.1669	\$ 36,525.27	20	1.7718	\$ 29,865.46	19	1.5915	\$ 26,881.46			
0302	Traumatic brain injury M >=75.00	2.7309	\$ 46,133.19	32	2.2377	\$ 37,718.57	24	2.0101	\$ 31,401.11			
0303	Traumatic brain injury M >=75.00	1.2793	\$ 20,670.91	11	0.9941	\$ 16,756.55	11	0.9165	\$ 15,756.55			
0304	Traumatic brain injury M >=75.00	1.5711	\$ 26,482.46	14	1.2737	\$ 21,469.49	14	1.1705	\$ 20,709.34			
0305	Traumatic brain injury M >=75.00	1.5711	\$ 26,482.46	16	1.5247	\$ 25,709.34						
0306	Non-traumatic brain injury M >=75.00	1.0008	\$ 31,782.76	16	1.7105	\$ 28,832.19						
0307	Non-traumatic brain injury M >=75.00	2.1101	\$ 35,567.85	19	1.8085	\$ 31,401.11						
0308	Non-traumatic brain injury M >=75.00	2.3049	\$ 38,851.39	21	1.6085	\$ 31,401.11						
0309	Non-traumatic brain injury M >=75.00	1.3684	\$ 23,065.75	12	1.1012	\$ 16,110.11						
0401	Traumatic spinal cord injury M >=47.50 and M <75.00	1.7807	\$ 30,015.48	16	1.5110	\$ 25,709.34						
0402	Traumatic spinal cord injury M >=47.50 and M <75.00	2.1371	\$ 36,022.96	20	1.8110	\$ 31,401.11						
0403	Traumatic spinal cord injury M >=47.50 and M <75.00	1.4185	\$ 20,933.44	29	3.0706	\$ 41,193.36						
0404	Traumatic spinal cord injury M >=47.50 and M <75.00	1.4185	\$ 20,933.44	29	3.0706	\$ 41,193.36						

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 CENTER FOR MEDICARE & MEDICAID SERVICES

**INPATIENT REHABILITATION FACILITY - PATIENT ASSESSMENT INSTRUMENT**

ICD-9-CM No. 99334-99342

1. Facility Information  
 A. Facility Name \_\_\_\_\_

2. Impairment Group\* \_\_\_\_\_

3. Date of admission \_\_\_\_\_

4. Date of discharge \_\_\_\_\_

5. Date of assessment \_\_\_\_\_

6. Reason for admission to rehabilitation facility \_\_\_\_\_

7. Primary diagnosis \_\_\_\_\_

8. Secondary diagnosis \_\_\_\_\_

9. Impairment Group\* \_\_\_\_\_

10. Admission code according to Appendix A \_\_\_\_\_

11. Discharge code according to Appendix A \_\_\_\_\_

12. ICD-9-CM code for the principal diagnosis \_\_\_\_\_

13. ICD-9-CM code for the secondary diagnosis \_\_\_\_\_

14. ICD-9-CM code for the third diagnosis \_\_\_\_\_

15. ICD-9-CM code for the fourth diagnosis \_\_\_\_\_

16. ICD-9-CM code for the fifth diagnosis \_\_\_\_\_

17. ICD-9-CM code for the sixth diagnosis \_\_\_\_\_

18. ICD-9-CM code for the seventh diagnosis \_\_\_\_\_

19. ICD-9-CM code for the eighth diagnosis \_\_\_\_\_

20. Payment Source (02 - Medicare Fee For Service; 51 - Medicare-Medicare Advantage; 99 - Not Listed)  
 A. Primary Source \_\_\_\_\_  
 B. Secondary Source \_\_\_\_\_

21. Impairment Group\* \_\_\_\_\_

22. ICD-9-CM code for the principal diagnosis \_\_\_\_\_

23. ICD-9-CM code for the secondary diagnosis \_\_\_\_\_

24. ICD-9-CM code for the third diagnosis \_\_\_\_\_

25. ICD-9-CM code for the fourth diagnosis \_\_\_\_\_

26. ICD-9-CM code for the fifth diagnosis \_\_\_\_\_

27. ICD-9-CM code for the sixth diagnosis \_\_\_\_\_

28. ICD-9-CM code for the seventh diagnosis \_\_\_\_\_

29. ICD-9-CM code for the eighth diagnosis \_\_\_\_\_

30. ICD-9-CM code for the ninth diagnosis \_\_\_\_\_

31. ICD-9-CM code for the tenth diagnosis \_\_\_\_\_

32. ICD-9-CM code for the eleventh diagnosis \_\_\_\_\_

33. ICD-9-CM code for the twelfth diagnosis \_\_\_\_\_

34. ICD-9-CM code for the thirteenth diagnosis \_\_\_\_\_

35. ICD-9-CM code for the fourteenth diagnosis \_\_\_\_\_

36. ICD-9-CM code for the fifteenth diagnosis \_\_\_\_\_

37. ICD-9-CM code for the sixteenth diagnosis \_\_\_\_\_

38. ICD-9-CM code for the seventeenth diagnosis \_\_\_\_\_

39. ICD-9-CM code for the eighteenth diagnosis \_\_\_\_\_

40. ICD-9-CM code for the nineteenth diagnosis \_\_\_\_\_

41. ICD-9-CM code for the twentieth diagnosis \_\_\_\_\_

42. ICD-9-CM code for the twenty-first diagnosis \_\_\_\_\_

43. ICD-9-CM code for the twenty-second diagnosis \_\_\_\_\_

44. ICD-9-CM code for the twenty-third diagnosis \_\_\_\_\_

45. ICD-9-CM code for the twenty-fourth diagnosis \_\_\_\_\_

46. ICD-9-CM code for the twenty-fifth diagnosis \_\_\_\_\_

47. ICD-9-CM code for the twenty-sixth diagnosis \_\_\_\_\_

48. ICD-9-CM code for the twenty-seventh diagnosis \_\_\_\_\_

49. ICD-9-CM code for the twenty-eighth diagnosis \_\_\_\_\_

50. ICD-9-CM code for the twenty-ninth diagnosis \_\_\_\_\_

51. ICD-9-CM code for the thirtieth diagnosis \_\_\_\_\_

52. ICD-9-CM code for the thirty-first diagnosis \_\_\_\_\_

53. ICD-9-CM code for the thirty-second diagnosis \_\_\_\_\_

54. ICD-9-CM code for the thirty-third diagnosis \_\_\_\_\_

55. ICD-9-CM code for the thirty-fourth diagnosis \_\_\_\_\_

56. ICD-9-CM code for the thirty-fifth diagnosis \_\_\_\_\_

57. ICD-9-CM code for the thirty-sixth diagnosis \_\_\_\_\_

58. ICD-9-CM code for the thirty-seventh diagnosis \_\_\_\_\_

59. ICD-9-CM code for the thirty-eighth diagnosis \_\_\_\_\_

60. ICD-9-CM code for the thirty-ninth diagnosis \_\_\_\_\_

61. ICD-9-CM code for the fortieth diagnosis \_\_\_\_\_

62. ICD-9-CM code for the forty-first diagnosis \_\_\_\_\_

63. ICD-9-CM code for the forty-second diagnosis \_\_\_\_\_

64. ICD-9-CM code for the forty-third diagnosis \_\_\_\_\_

65. ICD-9-CM code for the forty-fourth diagnosis \_\_\_\_\_

66. ICD-9-CM code for the forty-fifth diagnosis \_\_\_\_\_

67. ICD-9-CM code for the forty-sixth diagnosis \_\_\_\_\_

68. ICD-9-CM code for the forty-seventh diagnosis \_\_\_\_\_

69. ICD-9-CM code for the forty-eighth diagnosis \_\_\_\_\_

70. ICD-9-CM code for the forty-ninth diagnosis \_\_\_\_\_

71. ICD-9-CM code for the fiftieth diagnosis \_\_\_\_\_

72. ICD-9-CM code for the fifty-first diagnosis \_\_\_\_\_

73. ICD-9-CM code for the fifty-second diagnosis \_\_\_\_\_

74. ICD-9-CM code for the fifty-third diagnosis \_\_\_\_\_

75. ICD-9-CM code for the fifty-fourth diagnosis \_\_\_\_\_

76. ICD-9-CM code for the fifty-fifth diagnosis \_\_\_\_\_

77. ICD-9-CM code for the fifty-sixth diagnosis \_\_\_\_\_

78. ICD-9-CM code for the fifty-seventh diagnosis \_\_\_\_\_

79. ICD-9-CM code for the fifty-eighth diagnosis \_\_\_\_\_

80. ICD-9-CM code for the fifty-ninth diagnosis \_\_\_\_\_

81. ICD-9-CM code for the sixtieth diagnosis \_\_\_\_\_

82. ICD-9-CM code for the sixty-first diagnosis \_\_\_\_\_

83. ICD-9-CM code for the sixty-second diagnosis \_\_\_\_\_

84. ICD-9-CM code for the sixty-third diagnosis \_\_\_\_\_

85. ICD-9-CM code for the sixty-fourth diagnosis \_\_\_\_\_

86. ICD-9-CM code for the sixty-fifth diagnosis \_\_\_\_\_

87. ICD-9-CM code for the sixty-sixth diagnosis \_\_\_\_\_

88. ICD-9-CM code for the sixty-seventh diagnosis \_\_\_\_\_

89. ICD-9-CM code for the sixty-eighth diagnosis \_\_\_\_\_

90. ICD-9-CM code for the sixty-ninth diagnosis \_\_\_\_\_

91. ICD-9-CM code for the seventieth diagnosis \_\_\_\_\_

92. ICD-9-CM code for the seventy-first diagnosis \_\_\_\_\_

93. ICD-9-CM code for the seventy-second diagnosis \_\_\_\_\_

94. ICD-9-CM code for the seventy-third diagnosis \_\_\_\_\_

95. ICD-9-CM code for the seventy-fourth diagnosis \_\_\_\_\_

96. ICD-9-CM code for the seventy-fifth diagnosis \_\_\_\_\_

97. ICD-9-CM code for the seventy-sixth diagnosis \_\_\_\_\_

98. ICD-9-CM code for the seventy-seventh diagnosis \_\_\_\_\_

99. ICD-9-CM code for the seventy-eighth diagnosis \_\_\_\_\_

100. ICD-9-CM code for the seventy-ninth diagnosis \_\_\_\_\_

101. ICD-9-CM code for the eightieth diagnosis \_\_\_\_\_

102. ICD-9-CM code for the eighty-first diagnosis \_\_\_\_\_

103. ICD-9-CM code for the eighty-second diagnosis \_\_\_\_\_

104. ICD-9-CM code for the eighty-third diagnosis \_\_\_\_\_

105. ICD-9-CM code for the eighty-fourth diagnosis \_\_\_\_\_

106. ICD-9-CM code for the eighty-fifth diagnosis \_\_\_\_\_

107. ICD-9-CM code for the eighty-sixth diagnosis \_\_\_\_\_

108. ICD-9-CM code for the eighty-seventh diagnosis \_\_\_\_\_

109. ICD-9-CM code for the eighty-eighth diagnosis \_\_\_\_\_

110. ICD-9-CM code for the eighty-ninth diagnosis \_\_\_\_\_

111. ICD-9-CM code for the ninetieth diagnosis \_\_\_\_\_

112. ICD-9-CM code for the ninety-first diagnosis \_\_\_\_\_

113. ICD-9-CM code for the ninety-second diagnosis \_\_\_\_\_

114. ICD-9-CM code for the ninety-third diagnosis \_\_\_\_\_

115. ICD-9-CM code for the ninety-fourth diagnosis \_\_\_\_\_

116. ICD-9-CM code for the ninety-fifth diagnosis \_\_\_\_\_

117. ICD-9-CM code for the ninety-sixth diagnosis \_\_\_\_\_

118. ICD-9-CM code for the ninety-seventh diagnosis \_\_\_\_\_

119. ICD-9-CM code for the ninety-eighth diagnosis \_\_\_\_\_

120. ICD-9-CM code for the ninety-ninth diagnosis \_\_\_\_\_

121. ICD-9-CM code for the one hundredth diagnosis \_\_\_\_\_

**S22.049A or B Unspecified fracture open or closed T4, initial encounter**

**S22.059A or B Unspecified fracture open or closed T5-T6, initial encounter**

**S24.103A Unspecified cord** Identify specific type of spinal

**WITH**

**S22.089A or B Unspecified fracture T11 - T12 open or closed, initial encounter**

Brown-Sequard syndrome) and specific type of fracture (wedge, stable burst, unstable burst) with spinal level and associated deficits supporting central cord damage

# Class 1

## Roundtable Discussion – Getting to Know You



# Today's Agenda

- Background and Structure of Class
- Introductions
- Instructor Expectations
- Content access and Class/Instructor Connection
- Getting to know you – Polling
- Student Introductions
- IRF Processes
- Staff Functions
- Identified best practices and opportunities

RIC/CMG VALUATION FY 2021

ICD-10	CMG Description	YR 18		YR 19		YR 20		YR 21	
		RW	PMY '1	RW	PMY '1	RW	PMY '1	RW	PMY '1
S12.01	Skull fracture open or closed M<=1.50	1.0711	\$ 17,085.28	1.0711	\$ 14,863.82	1.0711	\$ 13,781.25	1.0711	\$ 12,700.00
S12.02	Skull fracture open or closed M<=1.50 and M<=1.50	2.0880	\$ 22,208.09	2.0880	\$ 19,085.28	2.0880	\$ 17,700.00	2.0880	\$ 16,400.00
S12.03	Skull fracture open or closed M<=1.50 and M<=1.50 and M<=1.50	3.1049	\$ 26,330.89	3.1049	\$ 22,208.09	3.1049	\$ 20,825.00	3.1049	\$ 19,450.00
S12.04	Skull fracture open or closed M<=1.50 and M<=1.50 and M<=1.50 and M<=1.50	4.1218	\$ 30,453.69	4.1218	\$ 26,330.89	4.1218	\$ 24,950.00	4.1218	\$ 23,575.00
S12.05	Skull fracture open or closed M<=1.50 and M<=1.50 and M<=1.50 and M<=1.50 and M<=1.50	5.1387	\$ 34,576.49	5.1387	\$ 30,453.69	5.1387	\$ 29,050.00	5.1387	\$ 27,675.00

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTER FOR MEDICARE & MEDICAID SERVICES

**INPATIENT REHABILITATION FACILITY - PATIENT ASSESSMENT INSTRUMENT**

Identification Information

1. Facility Information  
A. Facility Name

20. Payment Source  
A. Medicare Part A - Primary Source  
B. Secondary Source  
C. Medicare Part B - Primary Source  
D. Medicare Part C - Primary Source  
E. Medicare Part D - Primary Source  
F. Medicare Part A - Secondary Source  
G. Medicare Part B - Secondary Source  
H. Medicare Part C - Secondary Source  
I. Medicare Part D - Secondary Source  
J. Other (Specify)

S22.049A or B Unspecified fracture open or closed T4, initial encounter		
S22.059A or B Unspecified fracture open or closed T5-T6, initial encounter		
S24.103A Unspecified cord injury T7-T10, initial encounter	Identify specific type of spinal cord injury (concussion and edema, complete or incomplete lesion, anterior cord syndrome, Brown-Sequard syndrome) and	
<b>WITH ONE OF THE FOLLOWING:</b>		
S22.069A or B Unspecified fracture T7 - T8 open or closed, initial encounter	specific type of fracture (wedge, stable burst, unstable burst) with spinal level and associated deficits supporting central cord damage	
S22.079A or B Unspecified fracture T9 - T10 open or closed, initial encounter		
S24.104A Unspecified cord injury T11-T12, initial encounter		

WITH S22.089A or B Unspecified fracture T11 - T12 open or closed, initial encounter	Brown-Sequard syndrome) and specific type of fracture (wedge, stable burst, unstable burst) with spinal level and associated deficits supporting central cord damage
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**Spinal cord injuries** - In order to report spine injuries in the IRF setting, the following information is needed to place the patient into the correct spinal level. Following identification of the cause and associated deficits, the following information helps to support the severity of illness, diagnosis and associated deficits of the patient. Providing the ASIA level allows for a more accurate coding of the patient's overall condition to support the IRF group for the patient.



You get out  
what you put  
in!



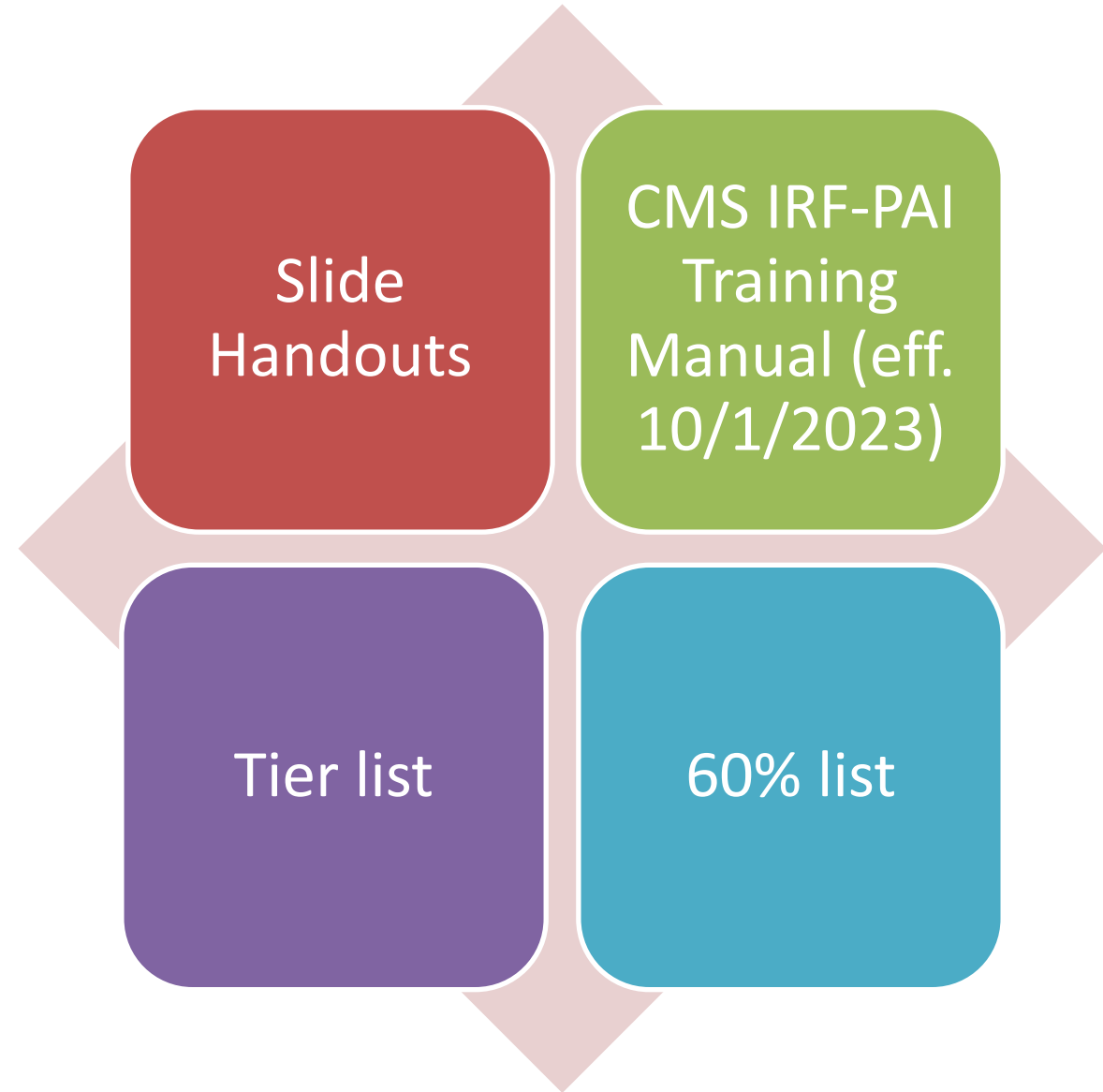
# Breakout



# Course Notes

- Access the IRF PRO LAB HUB will be provided after the first class.
  - *You MUST access and complete each missed class AND test by 14 days following the live event to get CEU credit.*
  - *After Credit is received, recorded content will be available for replay without CEU credit until 1/16/2025.*
- Closed Group for Students

# Resources





# CMS IRF-PAI Training Manual – Appendix A

- <https://www.cms.gov/medicare/quality/inpatient-rehabilitation-facility/irf-pai-and-irf-qrp-manual>
- <https://www.cms.gov/medicare/quality/inpatient-rehabilitation-facility/irf-pai-and-irf-qrp-manual>
- Go to the bottom of the page under the downloads section and select CMS-IRF-PAI-Manual-Version-4.0-Effective October 1, 2022 (Zip)
- Primarily Using Appendix A

CMS IRF-PAI Manual Appendix A

**STROKE (01)**

The STROKE Impairment Group includes cases with the diagnosis of cerebral ischemia due to vascular thrombosis, embolism, or hemorrhage.

**NOTE:** Do NOT use for cases with brain dysfunction secondary to non-vascular causes such as trauma, inflammation, tumor, or degenerative changes. These should be coded under BRAIN DYSFUNCTION (02) instead.

01.1 Left Body (Right Brain)  
 01.2 Right Body (Left Brain)  
 01.3 Bilateral  
 01.4 No Paresis  
 01.9 Other Stroke

UDSMR <sup>SM</sup> Impairment Group	UDSMR <sup>SM</sup> Impairment Group Code (Item 21)	RIC	ICD-10-CM Code (Item 22)	Etiologic Diagnosis
STROKE	01.1 – 01.9	Stroke (01)	160.00–160.9	Nontraumatic subarachnoid hemorrhage, including ruptured cerebral aneurysm
			161.0–161.9	Nontraumatic intracerebral hemorrhage
			162.00–162.9	Other and unspecified Nontraumatic intracranial hemorrhage
			163.00, 163.011–163.019, 163.02, 163.031–163.039, 163.09–163.10, 163.111–163.119, 163.12, 163.131–163.139, 163.19–163.20, 163.211–163.219, 163.22, 163.231–163.239, 163.29	Occlusion and stenosis of precerebral arteries, with cerebral infarction
			163.30, 163.311–163.349, 163.39, 163.40, 163.411–163.449, 163.49–163.50, 163.511–163.549, 163.59, 163.6, 163.8–163.9	Occlusion and stenosis of cerebral arteries, with cerebral infarction
167.99	Other cerebrovascular disease			

IRF-PAI Version 3.0, Effective October 1, 2019 Page A-6

# CMS IRF DATA FILES

- **Lists to Download:**

- IGC 3\_ICD-10-CM\_FY2024
  - A list of IGCs that are compliant and non-compliant (and the diagnosis codes that make them non-compliant when used as etiologic)

impairment group codes that meet presumptive compliance criteria do not have

Impairment Group Code	Age Must be 85+	BMI Must be 50+		
1.1				
1.2				
1.3				
1.4				
3.1				
3.2				
5.3				
5.5				
5.6				
5.7				
8.51	yes	yes		
8.52				
8.61	yes	yes		
8.62				
8.71	yes	yes		
8.72				

Impairment group code: Stroke - 0001.9 Other Stroke  
 Etiological Diagnosis Code (Item 22) Matches Any Code Listed

		169.933		
		169.934		

# CMS IRF DATA FILES

- **Lists to Download:**
- Presumptive Compliance-3\_FY 2024 ICD-10 Update\_final
  - Contains the list of diagnoses (ICD-10-CM codes) that are used for determining presumptive compliance with the IRF 60 percent rule, effective for discharges beginning on or after October 1, 2023

Presumptive Compliance - 3	
The following ICD-10-CM codes will be used in performing the presumptive methodology for an IRI effective for IRF discharges occurring on or after October 1, 2019 .	
Code	Code Title
A02.21	Salmonella meningitis
A06.6	Amebic brain abscess
A17.0	Tuberculous meningitis
A17.1	Meningeal tuberculoma
A17.81	Tuberculoma of brain and spinal cord
A17.82	Tuberculous meningoencephalitis
A17.83	Tuberculous neuritis
A27.81	Aseptic meningitis in leptospirosis



# CMS IRF DATA FILES

- **Lists to Download:**
- Tiered Comorbidities - file contains the list of diagnoses (ICD-10-CM codes) that are used to determine placement in tiers for IRF discharges, effective October 1, 2023. It contains the ICD-10-CM codes and any RICs that are excluded from the tiers. (Updated to reflect ICD-10-CM coding changes for October 1, 2023)

Code	Choice	Code Title	Tier	RIC Exclusion
J38.01	--	Paralysis of vocal cords and larynx, unilateral	1	15
J38.02	--	Paralysis of vocal cords and larynx, bilateral	1	15
J38.4	--	Edema of larynx	1	15
Z43.0	--	Encounter for attention to tracheostomy	1 --	
Z93.0	--	Tracheostomy status	1 --	
Z99.2	--	Dependence on renal dialysis	1 --	
A04.71	--	Enterocolitis due to clostridium difficile, recurrent	2 --	
A04.72	--	Enterocolitis due to clostridium difficile, not specified as recurrent	2 --	
A04.8	--	Other specified bacterial intestinal infections	2 --	
B96.5	--	Pseudomonas (aeruginosa) (mallei) (pseudomallei) as the cause of	2 --	
I69.091	--	Dysphagia following nontraumatic subarachnoid hemorrhage	2	1
I69.191	--	Dysphagia following nontraumatic intracerebral hemorrhage	2	1
I69.291	--	Dysphagia following other nontraumatic intracranial hemorrhage	2	1
I69.391	--	Dysphagia following cerebral infarction	2	1
I69.891	--	Dysphagia following other cerebrovascular disease	2	1
I69.991	--	Dysphagia following unspecified cerebrovascular disease	2	1
K91.2	--	Postsurgical malabsorption, not elsewhere classified	2 --	
R13.0	--	Aphagia	2	1
R13.10	--	Dysphagia, unspecified	2	1
R13.11	--	Dysphagia, oral phase	2	1
R13.12	--	Dysphagia, oropharyngeal phase	2	1

**Physical Book  
Recommended  
without, use  
ICD-10-CM  
FY2024  
(Download)**

## 2024 release of ICD-10-CM

October 1, 2023 release of ICD-10-CM

The FY2024 ICD-10-CM codes are to be used from October 1, 2023 through September 30, 2024.

**Note:** This replaces the FY 2023 – April 1, release. These files listed below represent the ICD-10-CM FY2024 October 1, 2023 release. The October 1, 2023 FY2024 ICD-10-CM is available in both PDF (Adobe) and XML file formats. Most files are provided in compressed zip format for ease in downloading. These files have been created by the National Center for Health Statistics (NCHS), under authorization by the World Health Organization. Any questions regarding typographical or other errors noted on this release may be reported to [nchsicd10cm@cdc.gov](mailto:nchsicd10cm@cdc.gov).

- [ICD-10-CM FY2024 Guidelines](#)
- [ICD-10-CM FY2024 Full PDF](#)
- [ICD-10-CM FY2024 XML](#)
- [ICD-10-CM FY2024 Addenda PDF](#)
- [ICD-10-CM FY2024 List of codes and Descriptions](#)
- [ICD-10-CM FY2024 Order Files](#)
- [ICD-10-CM FY2024 Conversion table](#)
- [ICD-10-CM FY2024 Present on Admission \(POA\) Exempt Codes](#)
- [ICD-10-CM FY2024 Errata](#)

- <https://www.cdc.gov/nchs/icd/comprehensive-listing-of-icd-10-cm-files.htm>



# ICD-10-CM FY2024 (Download)

- [https://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Publications/ICD10CM/2024/](https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Publications/ICD10CM/2024/)



https://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Publications/ICD10CM/2024/

Settings Amazon Web Servic... Box | Login EeS Employer eServices Official UB-04 Data... YourHealthFile : You... RMail Web App Free Dynamic DNS.

ftp.cdc.gov - /pub/Health\_Statistics/NCHS/Publications/ICD10CM/2024/

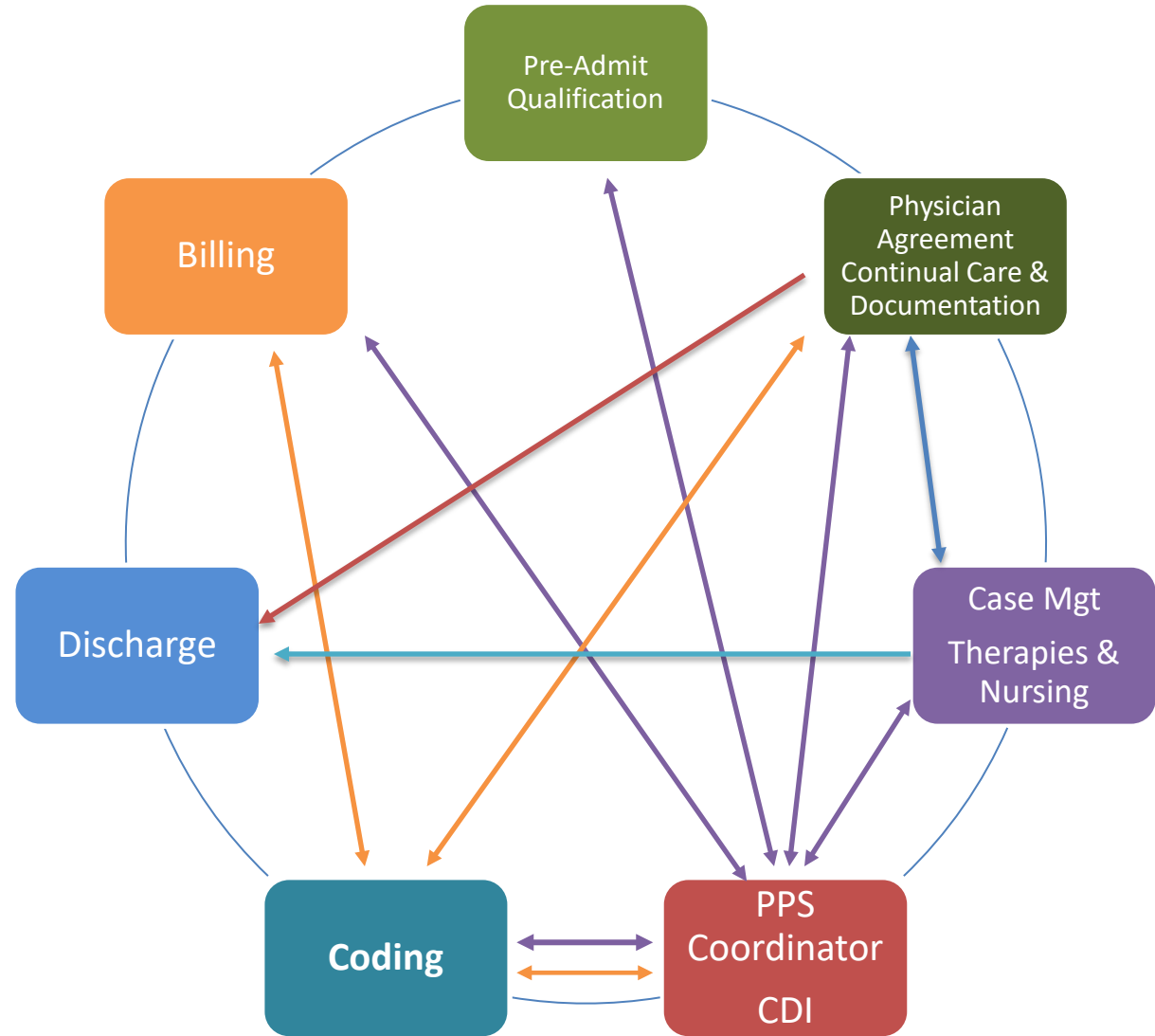
[\[To Parent Directory\]](#)

7/26/2023	1:11 PM	126646	<a href="#">Errata FY24.pdf</a>
9/21/2023	3:18 PM	145701	<a href="#">ICD-10-CM-Conversion-Table-FY2024-Effective-10-01-2023-Final (updated 9-21-2023).xlsx</a>
7/26/2023	1:09 PM	841765	<a href="#">ICD-10-CM-Guidelines-October 1 FY2024FINALv.2.pdf</a> ←
7/5/2023	10:51 AM	912058	<a href="#">icd10cm-addendum-2024.zip</a>
7/5/2023	10:51 AM	2470341	<a href="#">icd10cm-CodesDescriptions-2024.zip</a>
7/5/2023	10:52 AM	22705055	<a href="#">icd10cm-Table and Index-2024.zip</a> ←
7/26/2023	1:11 PM	1672652	<a href="#">POAexemptCodesFY24.zip</a>

# Important Terminology (Incomplete List)

- Dx - Diagnosis
- PDx – Principal Diagnosis
- Etiologic Diagnosis
- MCC-Major Complication/Comorbidity
- CC-Complication/Comorbidity
- AHA Coding Clinic
- QHP – Qualified Healthcare Professional
- UB-04 – Claim form
- IRF-PAI – Inpatient Rehabilitation Facility Patient Assessment Instrument

# Coding's Role in the *IRF* Revenue Cycle



# Completing the IRF-PAI

- IGC Selection (Admission and Discharge)
- Etiologic Diagnosis
- Comorbidities and Complications
- Interruption of Death Diagnoses
- Discharge disposition
- GG Scores – Functional level
- Quality information (pressure ulcers, swallowing function and certain other diagnoses)

Identification Information	Medical Information
<p>1. Facility Information</p> <p>A. Facility Name _____</p> <p>_____</p> <p>_____</p> <p>B. Facility Medicare Provider Number _____</p> <p>2. Patient Medicare Number _____</p> <p>3. Patient Medicaid Number _____</p> <p>4. Patient First Name _____</p> <p>5A. Patient Last Name _____</p> <p>5B. Patient Identification Number _____</p> <p>6. Birth Date _____ / _____ / _____ MM / DD / YYYY</p> <p>7. Social Security Number _____</p> <p>8. Gender (1 - Male; 2 - Female) _____</p> <p>10. Marital Status _____ (1 - Never Married; 2 - Married; 3 - Widowed; 4 - Separated; 5 - Divorced)</p> <p>11. Zip Code of Patient's Pre-Hospital Residence _____</p> <p>12. Admission Date _____ / _____ / _____ MM / DD / YYYY</p> <p>13. Assessment Reference Date _____ / _____ / _____ MM / DD / YYYY</p> <p>14. Admission Class _____ (1 - Initial Rehab; 2 - Evaluation; 3 - Readmission; 4 - Unplanned Discharge; 5 - Continuing Rehabilitation)</p> <p>15A. Admit From _____ (01 - Home (private home/apt., board/care, assisted living, group home, transitional living, other residential care arrangements); 02 - Short-term General Hospital; 03 - Skilled Nursing Facility (SNF); 04 - Intermediate care; 06 - Home under care of organized home health service organization; 50 - Hospice (home); 51 - Hospice (medical facility); 61 - Swing bed; 62 - Another Inpatient Rehabilitation Facility; 63 - Long-Term Care Hospital (LTCH); 64 - Medicaid Nursing Facility; 65 - Inpatient Psychiatric Facility; 66 - Critical Access Hospital (CAH); 99 - Not Listed)</p> <p>16A. Pre-hospital Living Setting _____ Use codes from 15A. Admit From</p> <p>17. Pre-hospital Living With _____ (Code only if item 16A is 01 - Home; Code using 01 - Alone; 02 - Family/Relatives; 03 - Friends; 04 - Attendant; 05 - Other)</p>	<p>21. Impairment Group* _____ Admission _____ Discharge _____</p> <p>Condition requiring admission to rehabilitation; code according to Appendix A.</p> <p>22. Etiologic Diagnosis _____ A. _____ (Use ICD codes to indicate the etiologic problem B. _____ that led to the condition for which the patient is C. _____ receiving rehabilitation)</p> <p>23. Date of Onset of Impairment _____ / _____ / _____ MM / DD / YYYY</p> <p>24. Comorbid Conditions _____ Use ICD codes to enter comorbid medical conditions</p> <p>A. _____ J. _____ S. _____ B. _____ K. _____ T. _____ C. _____ L. _____ U. _____ D. _____ M. _____ V. _____ E. _____ N. _____ W. _____ F. _____ O. _____ X. _____ G. _____ P. _____ Y. _____ H. _____ Q. _____ I. _____ R. _____</p> <p>24A. Are there any arthritis conditions recorded in items #21, #22, or #24 that meet all of the regulatory requirements for IRF classification (in 42 CFR 412.29(b)(2)(x), (xi), and (xii))? _____ (0 - No; 1 - Yes)</p> <p>Height and Weight _____ (While measuring if the number is X.1-X.4 round down, X.5 or greater round up)</p> <p>25A. Height on admission (in inches) _____</p> <p>26A. Weight on admission (in pounds) _____ Measure weight consistently, according to standard facility practice (e.g., in a.m. after voiding, with shoes off, etc.)</p>

\* The impairment codes incorporated or referenced herein are the property of U B Foundation Activities, Inc. ©1993, 2001 U B Foundation Activities, Inc

# UB-04: (Medicare Claim)

Session topics may change at the Instructor's discretion

Field 6 – Admit-Discharge Dates

Field 17: Discharge Status

Fields 18-28 Condition Codes

Fields 31-36 Occurrence Codes/Dates

Fields 39-40 Value Codes and Amounts

Fields 42- 44 Line Item 0024 - CMG

Field 66 Principal Dx

# Polling Question

## What is your position/title?

- PPS Coordinator
- Coder
- Admission Liaison
- Clinical Documentation Improvement
- Department Manager (Nursing, Therapy)
- Physician
- Other

# Polling Question

## What is your primary credential/degree?

- Nurse
- Physical Therapist
- Occupational Therapist
- Speech Therapist
- Coder
- CDI
- Physician or Non-Physician Practitioner
- Other

# Polling Question

## How long have you been in healthcare?

- 20+ years
- 10-19 years
- 5-9 years
- 1-5 years
- Less than a year



# Polling Question

**How long have you been in your current position?**

- **20+ years**
- **10-19 years**
- **5-9 years**
- **1-5 years**
- **Less than a year**

# Polling Question

**How many providers/physicians  
do you serve?**

- 1
- 2-5
- 6-11
- 12 or more

# Polling Question

**Are you in a teaching facility?**

- Yes
- No

# Polling Question

## Software Used for IRF-PAI creation?

- eRehabData
- UDS
- IRVEN

# Polling Question

## **EHR?**

- **Epic**
- **Cerner**
- **Meditech**
- **CPSI**
- **Other**



# Breakout



# What's Yours Like?



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# Common Ineffective Processes

- Incorrect diagnoses
- Lack of consistency between ICD-10-CM and GG/Quality
- Lack of consistency in discharge disposition between the IRF-PAI and UB-04
- Silo Effect - Lack of communication between relevant staff
- Lack of understanding IRF-PAI ICD-10-CM coding rules



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