

## PROPRIETARY STATEMENT

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# **PDPM Interim Payment Assessment Policy**

### I. Policy Statement and Purpose

It is the policy of this company to monitor for changes in the resident's condition to ensure development and revision of the plan of care and accurate payment under the Patient Driven Payment Model (PDPM). When appropriate, residents will be reclassified from the initial 5-day classification using the Interim Payment Assessment (IPA).

### II. Procedure

- 1) The Interim Payment Assessment is an optional assessment comprised of the IPA Item Set.
- 2) An IPA may be completed at the discretion of the IDT for a resident to address significant changes in clinical status and care needs and report a change in the resident's PDPM classification. Changes that may support completion of the IPA include, but are not limited to:
  - a. Change in PT and OT Case-Mix Classification Group
    - Ex. Major Joint Replacement or Spinal Surgery to Medical Management
  - b. Change in SLP Case-Mix Classification Group
    - i. New or clarified SLP-related comorbidity
    - ii. Cognitive impairment AEB BIMS <=12
    - iii. Addition of mechanically altered diet
    - iv. Swallowing disorder as defined at K0100
  - c. Change in Nursing Classification
    - i. Tracheostomy and/or ventilator
    - ii. Isolation (as defined by RAI Manual)
    - iii. Respiratory Therapy
    - iv. Certain diagnoses
    - v. Wounds
    - vi. Behavioral symptoms
    - vii. Addition of Restorative Nursing Programs
  - d. Change in NTA Classification
    - i. Parenteral/IV feeding
    - ii. IV medications
    - iii. Certain diagnoses
    - iv. Transfusion
    - v. Tracheostomy
    - vi. Wounds
    - vii. Intermittent catheterization
    - viii. Ostomy
  - e. Functional Changes
    - i. Significant change in Total Function Score
- 3) The Assessment Reference Date (ARD) for the IPA is to be the date the facility chooses to complete the assessment relative to the triggering event that caused the IDT to choose to complete the IPA. Payment based on the IPA will begin the same day as the ARD and continue until the end of the Part A stay or until another IPA is completed.
- 4) An IPA reclassifies the resident for payment. The variable per diem adjustment schedule continues rather than being reset on the bases of completing the IPA.





#### **PPS Assessment Schedule Under PDPM**

Medicare MDS Assessment Schedule Type	Assessment Reference Date	Applicable Standard Medicare Payment Days	
5-day Scheduled PPS Assessment	Days 1-8	All covered Part A days until Part A discharge (unless an IPA is completed)	
Interim Payment Assessment (IPA)	Equal to the date the facility chooses to complete the assessment relative to the triggering event	ARD of the assessment through Part A discharge (unless another IPA assessment is completed)	
PPS Discharge Assessment	PPS Discharge: Equal to the End Date of the Most Recent Medicare Stay (A2400C) or End Date	N/A	

#### Resources:

Long-Term Care Resident Facility Assessment Instrument 3.0 User's Manual Version 1.16 Published October 2018.

Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities (SNF) Final Rule for FY 2019, SNF Value-Based Purchasing Program, and SNF Quality Reporting Program. A rule by the Centers for Medicare & Medicaid Services on 8/8/2018.

APPROVALS	Printed Name	Signature	Date	
Executive Leadership				
Chief Compliance Officer				
General Counsel				
REVIEW and REVISIONS				
Version #: Date:				
Summary of changes:				
Version #: Date:				
Summary of changes:				