

Eli's Rehab Report

Inpatient Insights: Learn More About Proposed Changes for IRFs

Get on-the-ground insight on IRF-PAI and quality reporting changes.

Medicare's 2015 proposed rule for inpatient rehabilitation facilities is looking to create a new therapy information section on the IRF-PAI that tracks therapy minutes for individual, group, and co-treatments.

"This requirement will be similar to the current SNF requirement, and will allow for consistent definitions of the types of therapy provided by IRFs," notes **Julie Bantle, MA, OTR/L**, executive director of inpatient rehab at **St. John's Mercy Rehabilitation Center** in St. Louis, MO. "Eventually, we will see requirements in terms of the type of therapy provided, particularly limiting the amount of group therapy provided in the IRF setting," Bantle predicts.

Definitions: Group therapy (as proposed by CMS) would be 2-6 patients under the direction of a rehab therapist (or supervised therapy assistant), with patients doing either the same or different activities. Co-treatment would be more than one rehab therapist (or supervised therapy assistant) from different therapy disciplines working with a single patient simultaneously.

"This change would create an additional burden on facilities to provide this information and may require facilities to develop systems to input this information into the IRF-PAI," Bantle says.

Plus: CMS has proposed to add more quality measures for 2015: Staphylococcus aureus and Clostridium difficile.

Although an infection control nurse would be the primary person in charge of this quality measure, "therapists would play a role in helping prevent the spread of these types of infections in their facilities, primarily through hand hygiene and other infection prevention measures," Bantle pointed out.