



## Interim Payment Assessment (IPA) – At a Glance

The Patient-Driven Payment Model (PDPM) takes effect on October 1, 2019 and represents a significantly different approach to reimbursement for care in Skilled Nursing Facilities (SNFs). One of the advertised benefits of the PDPM process is that the number of required assessments has been greatly reduced to just two – the Admission and the Discharge assessments.

However, CMS also created a new **optional** assessment, which is to be used if a resident's status changes considerably. This is called an Interim Payment Assessment (IPA) and it is a somewhat shortened assessment process that looks at enough resident characteristics, conditions, and needs to determine if it would result in a new PDPM classification and, therefore, a new per-diem payment.

The decision to conduct an IPA needs to be an ongoing consideration throughout the stay to ensure that a facility's reimbursement fairly represents the services that they are providing to each unique resident. The conclusion needs to be the result of a collaborative process. In order to adequately capture all of the intricacies that reflect the unique complexity of each resident, all staff need to be aware of areas that they observe and how they may impact MDS measures.

For example, if a resident develops an infection and needs certain new services such as IV medications, this may result in a change in the Non-Therapy Ancillary (NTA) component of PDPM. The new services should be captured and reported in order to receive sufficient reimbursement for the changes. Another example of when an IPA may be considered is for a resident who has made significant increases in function as they recover and receive rehabilitation. The resulting change in Section GG scores for Self-Care and Mobility may result in a different case-mix classification in PT, OT and/or Nursing.

Minimally, CMS will receive every skilled resident's Admission and Discharge MDS assessments. If those two assessments reflect a profoundly different resident in terms of status, condition or need for services, it may be an indication that an IPA assessment may have been warranted at some point in the skilled stay.

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