Final Change Tables for IRF-PAI Version 1.5 and Version 2.0

Table 1. Final IRF-PAI Version 1.5 Change Table – Effective October 1, 2017 (Changes from Version 1.4 to 1.5)

No.	Item(s) Affected	Item/Text Affected	IRF-PAI v.1.4	Final IRF-PAI Version 1.5	Rationale for Change/Comments
1.	**Admission Discharge**	**N/A**	**Version 1.4**	**Version 1.5**	Updated version number
2.	**Admission Discharge**	**N/A**	**N/A**	**Admission** and **Discharge** headings	Added Admission and Discharge heading on each page of the Admission and discharge assessments, respectively, for clarity
3.	**Admission Discharge**	**Footer**	**IRF-PAI Version 1.4 Effective October 1, 2016**	**Final IRF-PAI Version 1.5 Effective October 1, 2017**	Updated
4.	**Admission Discharge**	**Quality Indicators Section Headings and Titles**	**White and gray font and header background**	**Black and bold font and header background**	Updated background and font in headers to increase contrast between text and background
5.	**Admission Discharge**	**27**	**Swallowing Status** 3 - Regular Food: solids and liquids swallowed safely without supervision or modified food consistency 2 - Modified Food Consistency/Supervision: subject requires modified food consistency and/or needs supervision for safety 1 - Tube/Parenteral Feeding: tube/parenteral feeding used wholly or partially as a means of sustenance	**DELETED**	This voluntary item is no longer needed, because there is a swallowing item in Section K

Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0)

No.	Item(s) Affected	Item / Text Affected	Final IRF-PAI Version 1.5	Final IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
1.	**Admission Discharge**	**N/A**	**Version 1.5**	**Version 2.0**	Updated version number
2.	**Admission Discharge**	**Footer**	**Final IRF-PAI Version 1.5 - Effective October 1, 2017**	**Final IRF-PAI Version 2.0 - Effective October 1, 2018**	Updated
3.	**Admission Discharge**	**N/A**	**N/A**	Punctuation and style revisions applicable throughout the instrument	Punctuation and style revisions to be consistent with Minimum Data Set and LTCH CARE Data Set
4.	**Admission**	**BB0800**	**BB0800. Understanding Verbal Content** (3-day assessment period) **Understanding Verbal Content** (with hearing aid or device, if used and excluding language barriers) 4. **Understands:** Clear comprehension without cues or repetitions 3. **Usually Understands:** Understands most conversations, but misses some part/intent of message. Requires cues at times to understand 2. **Sometimes Understands:** Understands only basic conversations or simple, direct phrases. Frequently requires cues to understand 1. **Rarely/Never Understands**	**BB0800. Understanding Verbal and Non-Verbal Content** (3-day assessment period) **Understanding Verbal and Non-Verbal Content** (with hearing aid or device, if used, and excluding language barriers) 4. **Understands:** Clear comprehension without cues or repetitions 3. **Usually Understands:** Understands most conversations, but misses some part/intent of message. Requires cues at times to understand 2. **Sometimes Understands:** Understands only basic conversations or simple, direct phrases. Frequently requires cues to understand 1. **Rarely/Never Understands**	Added clarification that Non-Verbal Content can also be considered when coding this item Added comma for clarification

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
5.	**Admission**	**C0200**	**C0200. Repetition of Three Words** **Ask patient:** *"I am going to say three words for you to remember. Please repeat the words after I have said all three. The words are:* ***sock, blue, and bed****. Now tell me the three words."* **Number of words repeated by patient after first attempt:** 3. **Three** 2. **Two** 1. **One** 0. **None** After the patient's first attempt, say *"I will repeat each of the three words with a cue and ask you about them later: sock, something to wear; blue, a color; bed, a piece of furniture*." You may repeat the words up to two more times.	**C0200. Repetition of Three Words** **Ask patient:** *"I am going to say three words for you to remember. Please repeat the words after I have said all three. The words are:* ***sock, blue, and bed****. Now tell me the three words."* **Number of words repeated after first attempt** 3. **Three** 2. **Two** 1. **One** 0. **None** After the patient's first attempt, repeat the words using cues ("*sock, something to wear; blue, a color; bed, a piece of furniture*"). You may repeat the words up to two more times.	Instructions and response option wording were modified to align with wording in Minimum Data Set and LTCH CARE Data Set Response content and codes are consistent with Minimum Data Set and LTCH CARE Data Set

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
6.	**Admission**	**C0300** **C0300A** **C0300B** **C0300C**	**C0300. Temporal Orientation: Year, Month, Day** **A. Ask patient:** *"Please tell me what year it is right now."* Patient's answer is: 3. **Correct** 2. **Missed by 1 year** 1. **Missed by 2 to 5 years** 0. **Missed by more than 5 years or no answer** **B. Ask patient:** *"What month are we in right now?"* Patient's answer is: 2. **Accurate within 5 days** 1. **Missed by 6 days to 1 month** 0. **Missed by more than 1 month or no answer** **C. Ask patient:** *"What day of the week is today?"* Patient's answer is: 1. **Correct** 0. **Incorrect or no answer**	**C0300. Temporal Orientation (orientation to year, month, and day)** Ask patient: *"Please tell me what year it is right now."* **A. Able to report correct year** 3. **Correct** 2. **Missed by 1 year** 1. **Missed by 2-5 years** 0. **Missed by > 5 years** or no answer Ask patient: *"What month are we in right now?"* **B. Able to report correct month** 2. **Accurate within 5 days** 1. **Missed by 6 days to 1 month** 0. **Missed by > 1 month** or no answer Ask patient: *"What day of the week is today?"* **C. Able to report correct day of the week** 1. **Correct** 0. **Incorrect** or no answer	Instructions and response option wording were modified to align with wording in Minimum Data Set and LTCH CARE Data Set Response content and codes are consistent with Minimum Data Set and LTCH CARE Data Set

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
7.	**Admission**	**C0400** **C0400A** **C0400B** **C0400C**	**C0400. Recall** **Ask patient**: "*Let's go back to the first question. What were those three words that I asked you to repeat*?" If unable to remember a word, give cue (i.e., something to wear; a color; a piece of furniture) for that word. **A. Recalls "sock?"** 2. **Yes,** no cue required 1. **Yes,** after cueing ("something to wear") 0. **No,** could not recall **B. Recalls "blue?"** 2. **Yes**, no cue required 1. **Yes**, after cueing ("a color") 0. **No**, could not recall **C. Recalls "bed?"** 2. **Yes,** no cue required 1. **Yes,** after cueing ("a piece of furniture") 0. **No,** could not recall	**C0400. Recall** Ask patient: "*Let's go back to an earlier question. What were those three words that I asked you to repeat?"* If unable to remember a word, give cue (something to wear; a color; a piece of furniture) for that word. **A. Able to recall "sock"** 2. **Yes, no cue required** 1. **Yes, after cueing** ("something to wear") 0. **No** - could not recall **B. Able to recall "blue"** 2. **Yes, no cue required** 1. **Yes, after cueing** ("a color") 0. **No** - could not recall **C. Able to recall "bed"** 2. **Yes, no cue required** 1. **Yes, after cueing** ("a piece of furniture") 0. **No -** could not recall	Instructions and response option wording were modified to align with wording in Minimum Data Set and LTCH CARE Data Set Response content and codes are consistent with Minimum Data Set and LTCH CARE Data Set
8.	**Admission**	**C0900**	**C0900. Memory/Recall Ability**	**C0900. Memory/Recall Ability (3-day assessment period)**	Added for clarification

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
9.	**Admission**	**GG0110 GG0110A GG0110B GG0110C GG0110D GG0110E GG0110Z**	**GG0110. Prior Device Use.** Indicate devices and aids used by the patient prior to the current illness, exacerbation, or injury. **Check all that apply** **A. Manual wheelchair** **B. Motorized wheelchair or scooter** **C. Mechanical lift** **D. Walker** **E. Orthotics/Prosthetics.** **Z. None of the above**	**GG0110. Prior Device Use.** Indicate devices and aids used by the patient prior to the current illness, exacerbation, or injury. **Check all that apply** **A. Manual wheelchair** **B. Motorized wheelchair and/or scooter** **C. Mechanical lift** **D. Walker** **E. Orthotics/Prosthetics** **Z. None of the above**	Added "and/" for clarification
10.	**Admission**	**GG0130 Discharge goal coding**	**Code the patient's usual performance at admission for each activity using the 6-point scale. If activity was not attempted at admission, code the reason. Code the patient's discharge goal(s) using the 6-point scale. Do not use codes 07, 09, or 88 to code discharge goal(s).**	**Code the patient's usual performance at admission for each activity using the 6-point scale. If activity was not attempted at admission, code the reason. Code the patient's discharge goal(s) using the 6-point scale. Use of codes 07, 09, 10, or 88 is permissible to code discharge goal(s).**	Added instructions indicating that the activity not attempted codes may be used to code goal items
11.	**Discharge**	**GG0130 Coding instructions**	**Code the patient's usual performance at discharge for each activity using the 6-point scale. If activity was not attempted at discharge, code the reason.**	**Code the patient's usual performance at discharge for each activity using the 6-point scale. If activity was not attempted at discharge, code the reason. If the patient has an incomplete stay, skip discharge GG0130 items.**	Added skip pattern for patients with incomplete stays
12.	**Admission Discharge**	**GG0130 Coding options**	**From 6-point scale** **05. Setup or clean-up assistance –** Helper SETS UP or CLEANS UP; patient completes activity. Helper assists only prior to or following the activity.	**From 6-point scale** **05. Setup or clean-up assistance –** Helper sets up or cleans up; patient completes activity. Helper assists only prior to or following the activity.	Removed capitalization for stylistic consistency within the instrument

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
13.	**Admission Discharge**	**GG0130 Coding options**	**From 6-point scale** **04. Supervision or touching assistance** - Helper provides VERBAL CUES or TOUCHING/STEADYING assistance as patient completes activity. Assistance may be provided throughout the activity or intermittently.	**From 6-point scale** 04. **Supervision or touching assistance** - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as patient completes activity. Assistance may be provided throughout the activity or intermittently.	Added "contact guard" and changed "or" to "and/or" for clarification Removed capitalization
14.	**Admission Discharge**	**GG0130 Coding options**	**If activity was not attempted, code the reason:** 07. **Patient refused** 09. **Not applicable** 88. Not attempted due to **medical condition or safety concerns**	**If activity was not attempted, code the reason:** 07. **Patient refused** 09. **Not applicable** – Not attempted and the patient did not perform this activity prior to the current illness, exacerbation, or injury. 10. **Not attempted due to environmental limitations** (e.g., lack of equipment, weather constraints) 88. **Not attempted due to medical condition or safety concerns**	Added definition of 09 for clarification Added new code to allow reporting of environmental limitations
15.	**Admission Discharge**	**GG0130A**	**A. Eating:** The ability to use suitable utensils to bring food to the mouth and swallow food once the meal is presented on a table/tray. Includes modified food consistency.	**A. Eating:** The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.	Revised wording of the item definition for clarification

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
16.	**Admission Discharge**	**GG0130B**	**B. Oral hygiene:** The ability to use suitable items to clean teeth. [Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.]	**B. Oral hygiene:** The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to insert and remove dentures into and from the mouth, and manage denture soaking and rinsing with use of equipment.	Revised wording of the item definition for clarification
17.	**Admission Discharge**	**GG0130C**	**C. Toileting hygiene:** The ability to maintain perineal hygiene, adjust clothes before and after using the toilet, commode, bedpan or urinal. If managing an ostomy, include wiping the opening but not managing equipment.	**C. Toileting hygiene:** The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.	Revised wording of the item definition for clarification
18.	**Admission Discharge**	**GG0130E**	**E. Shower/bathe self:** The ability to bathe self in shower or tub, including washing, rinsing, and drying self. Does not include transferring in/out of tub/shower.	**E. Shower/bathe self:** The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower.	Revised wording of the item definition for clarification
19.	**Admission Discharge**	**GG0130F**	**F. Upper body dressing:** The ability to put on and remove shirt or pajama top; includes buttoning, if applicable.	**F. Upper body dressing:** The ability to dress and undress above the waist; including fasteners, if applicable.	Revised wording of the item definition for clarification
20.	**Admission Discharge**	**GG0130H**	**H. Putting on/taking off footwear:** The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility.	**H. Putting on/taking off footwear:** The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.	Revised wording of the item definition for clarification

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
21.	**Admission**	**GG0170 Discharge goal coding**	**Code the patient's usual performance at admission for each activity using the 6-point scale. If activity was not attempted at admission, code the reason. Code the patient's discharge goal(s) using the 6-point scale. Do not use codes 07, 09, or 88 to code discharge goal(s).**	**Code the patient's usual performance at admission for each activity using the 6-point scale. If activity was not attempted at admission, code the reason. Code the patient's discharge goal(s) using the 6-point scale. Use of codes 07, 09, 10, or 88 is permissible to code discharge goal(s).**	Added instructions indicating that the activity not attempted codes may be used to code goal items
22.	**Discharge**	**GG0170 Coding instructions**	**Code the patient's usual performance at discharge for each activity using the 6-point scale. If activity was not attempted at discharge, code the reason.**	**Code the patient's usual performance at discharge for each activity using the 6-point scale. If activity was not attempted at discharge, code the reason. If the patient has an incomplete stay, skip discharge GG0170 items.**	Added skip pattern for patients with incomplete stays
23.	**Admission Discharge**	**GG0170 Coding options**	**From 6-point scale** **05. Setup or clean-up assistance –** Helper SETS UP or CLEANS UP; patient completes activity. Helper assists only prior to or following the activity.	**From 6-point scale** **05. Setup or clean-up assistance –** Helper sets up or cleans up; patient completes activity. Helper assists only prior to or following the activity.	Removed capitalization
24.	**Admission Discharge**	**GG0170 Coding options**	**From 6-point scale** **04. Supervision or touching assistance** - Helper provides VERBAL CUES or TOUCHING/STEADYING assistance as patient completes activity. Assistance may be provided throughout the activity or intermittently.	**From 6-point scale** 04. **Supervision or touching assistance** - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as patient completes activity. Assistance may be provided throughout the activity or intermittently.	Added "contact guard" and changed "or" to "and/or" for clarification Removed capitalization

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
25.	**Admission Discharge**	**GG0170 Coding options**	**If activity was not attempted, code the reason:** 07. **Patient refused** 09. **Not applicable** 88. Not attempted due to **medical condition or safety concerns**	**If activity was not attempted, code the reason:** 07. **Patient refused** 09. **Not applicable** – Not attempted and the patient did not perform this activity prior to the current illness, exacerbation, or injury. 10. **Not attempted due to environmental limitations** (e.g., lack of equipment, weather constraints) 88. **Not attempted due to** **medical condition or safety concerns**	Added definition of 09 for clarification. Added new code to allow reporting of environmental limitations
26.	**Admission Discharge**	**GG0170A**	**A. Roll left and right:** The ability to roll from lying on back to left and right side, and return to lying on back.	**A. Roll left and right:** The ability to roll from lying on back to left and right side, and return to lying on back on the bed.	Added “on the bed” for clarification
27.	**Admission Discharge**	**GG0170C**	**C. Lying to sitting on side of bed:** The ability to safely move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.	**C. Lying to sitting on side of bed:** The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.	Removed “safely.” The coding instructions refer to safe performance, which applies to all self-care and mobility items
28.	**Admission Discharge**	**GG0170D**	**D. Sit to stand:** The ability to safely come to a standing position from sitting in a chair or on the side of the bed.	**D. Sit to stand:** The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.	Removed “safely.” The coding instructions refer to safe performance, which applies to all self-care and mobility items. Added “wheelchair” for clarification

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
29.	**Admission Discharge**	**GG0170E**	**E. Chair/bed-to-chair transfer:** The ability to safely transfer to and from a bed to a chair (or wheelchair).	**E. Chair/bed-to-chair transfer:** The ability to transfer to and from a bed to a chair (or wheelchair).	Removed "safely." The coding instructions refer to safe performance, which applies to all self-care and mobility items
30.	**Admission Discharge**	**GG0170F**	**F. Toilet transfer:** The ability to safely get on and off a toilet or commode.	**F. Toilet transfer:** The ability to get on and off a toilet or commode.	Removed "safely." The coding instructions refer to safe performance, which applies to all self-care and mobility items
31.	**Admission**	**GG0170H1**	**H1. Does the patient walk?** 0. **No,** and walking goal **is not** clinically indicated → *Skip to GG0170Q1. Does the patient use a wheelchair/scooter?* 1. **No,** and walking goal **is** clinically indicated → *Code the patient's discharge goal(s) for items GG0170I, J, K, L, M, N, O, and P. For admission performance, skip to GG0170Q1. Does the patient use a wheelchair/scooter?* 2. **Yes** → *Continue to GG0170I. Walk 10 feet*	**Item deleted**	The skip pattern is associated with the item GG0170I. Walk 10 feet
32.	**Discharge**	**GG0170H3**	**H3. Does the patient walk?** 0. **No** → *Skip to GG0170Q3. Does the patient use wheelchair/scooter?* 2. **Yes** → *Continue to GG0170I. Walk 10 feet*	**Item deleted**	The skip pattern is associated with the item GG0170I. Walk 10 feet

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
33.	**Admission**	**GG0170I**	**I. Walk 10 feet:** Once standing, the ability to walk at least 10 feet in a room, corridor or similar space.	**I. Walk 10 feet:** Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. *If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170M, 1 step (curb)*	Added skip pattern that was previously associated with GG0170H1
34.	**Discharge**	**GG0170I**	**I. Walk 10 feet:** Once standing, the ability to walk at least 10 feet in a room, corridor or similar space.	**I. Walk 10 feet:** Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. *If discharge performance is coded 07, 09, 10, or 88 → Skip to GG0170M, 1 step (curb)*	Added skip pattern that was previously associated with GG0170H3
35.	**Admission Discharge**	**GG0170L**	**L. Walking 10 feet on uneven surfaces:** The ability to walk 10 feet on uneven or sloping surfaces, such as grass or gravel.	**L. Walking 10 feet on uneven surfaces:** The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.	Revised wording of the item definition for clarification
36.	**Admission**	**GG0170M**	**M. 1 step (curb):** The ability to step over a curb or up and down one step.	**M. 1 step (curb):** The ability to go up and down a curb and/or up and down one step *If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object*	Added skip pattern and revised item definition for clarification
37.	**Discharge**	**GG0170M**	**M. 1 step (curb):** The ability to step over a curb or up and down one step.	**M. 1 step (curb):** The ability to go up and down a curb and/or up and down one step *If discharge performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object*	Added skip pattern and revised item definition for clarification
38.	**Admission**	**GG0170N**	**N. 4 steps:** The ability to go up and down four steps with or without a rail.	**N. 4 steps:** The ability to go up and down four steps with or without a rail. *If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object*	Added skip pattern

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
39.	**Discharge**	**GG0170N**	**N. 4 steps:** The ability to go up and down four steps with or without a rail.	**N. 4 steps:** The ability to go up and down four steps with or without a rail. *If discharge performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object*	Added skip pattern
40.	**Admission**	**GG0170Q1**	**Q1. Does the patient use a wheelchair/scooter?** 0. **No** → *Skip to H0350. Bladder Continence* 1. **Yes** → *Continue to GG0170R. Wheel 50 feet with two turns*	**Q1. Does the patient use a wheelchair and/or scooter?** 0. **No** → *Skip to H0350, Bladder Continence* 1. **Yes** → *Continue to GG0170R, Wheel 50 feet with two turns*	Added for clarification
41.	**Discharge**	**GG0170Q3**	**Q3. Does the patient use a wheelchair/scooter?** 0. **No** → *Skip to J1800. Any Falls Since Admission* 1. **Yes** → *Continue to GG0170R. Wheel 50 feet with two turns*	**Q3. Does the patient use a wheelchair and/or scooter?** 0. **No** → *Skip to J1800, Any Falls Since Admission* 1. **Yes** → *Continue to GG0170R, Wheel 50 feet with two turns*	Added for clarification
42.	**Admission**	**GG0170RR1**	**RR1. Indicate the type of wheelchair/scooter used.** 1. **Manual** 2. **Motorized**	**RR1. Indicate the type of wheelchair or scooter used.** 1. **Manual** 2. **Motorized**	Added for clarification
43.	**Discharge**	**GG0170RR3**	**RR3. Indicate the type of wheelchair/scooter used.** **1. Manual** **2. Motorized**	**RR3. Indicate the type of wheelchair or scooter used.** **1. Manual** **2. Motorized**	Added for clarification
44.	**Admission**	**GG0170SS1**	**SS1. Indicate the type of wheelchair/scooter used.** 1. **Manual** 2. **Motorized**	**SS1. Indicate the type of wheelchair or scooter used.** 1. **Manual** 2. **Motorized**	Added for clarification

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
45.	**Discharge**	**GG0170SS3**	**SS3. Indicate the type of wheelchair/scooter used.** 1. **Manual** 2. **Motorized**	**SS3. Indicate the type of wheelchair or scooter used.** 1. **Manual** 2. **Motorized**	Added for clarification
46.	**Discharge**	**J1800**	**J1800. Any Falls Since Admission** Has the patient had any falls since admission? 0. **No** → *Skip to M0210. Unhealed Pressure Ulcer(s)* 1. **Yes** → *Continue to J1900. Number of Falls Since Admission*	**J1800. Any Falls Since Admission** Has the patient had any falls since admission? 0. **No** → *Skip to M0210, Unhealed Pressure Ulcers/Injuries* 1. **Yes** → *Continue to J1900, Number of Falls Since Admission*	Updated skip pattern to reflect updated terminology for M0210
47.	**Admission Discharge**	**Section M heading**	**Report based on highest stage of existing ulcer(s) at its worst; do not "reverse" stage**	**Report based on highest stage of existing ulcers/injuries at their worst; do not "reverse" stage**	Added the term "injury" to be inclusive of updated terminology supported by the National Pressure Ulcer Advisory Panel (NPUAP) Item wording aligns with Minimum Data Set and LTCH CARE Data Set

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
48.	**Admission**	**M0210**	**M0210. Unhealed Pressure Ulcer(s) Does this patient have one or more unhealed pressure ulcer(s) at Stage 1 or higher?** 0. **No** → *Skip to O0100. Special Treatments, Procedures, and Programs* 1. **Yes** → *Continue to M0300. Current Number of Unhealed Pressure Ulcers at Each Stage*	**M0210. Unhealed Pressure Ulcers/Injuries Does this patient have one or more unhealed pressure ulcers/injuries?** 0. **No** → *Skip to N2001, Drug Regimen Review* 1. **Yes** → *Continue to M0300, Current Number of Unhealed Pressure Ulcers/Injuries at Each Stage*	Deleted text to clarify Added the term "injury" to be inclusive of updated terminology supported by NPUAP Modified skip pattern to be consistent with addition of new Section N Item wording aligns with Minimum Data Set and LTCH CARE Data Set
49.	**Discharge**	**M0210**	**M0210. Unhealed Pressure Ulcer(s) Does this patient have one or more unhealed pressure ulcer(s) at Stage 1 or higher?** 0. **No** → *Skip to O0100. Special Treatments, Procedures, and Programs* 1. **Yes** → *Continue to M0300. Current Number of Unhealed Pressure Ulcers at Each Stage*	**M0210. Unhealed Pressure Ulcers/Injuries Does this patient have one or more unhealed pressure ulcers/injuries?** 0. **No** → *Skip to N2005, Medication Intervention* 1. **Yes** → *Continue to M0300. Current Number of Unhealed Pressure Ulcers/Injuries at Each Stage*	Deleted text to clarify Added the term "injuries" to be inclusive of updated terminology supported by NPUAP Modified skip pattern to be consistent with addition of new Section N Item wording aligns with Minimum Data Set and LTCH CARE Data Set

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
50.	**Admission Discharge**	**M0300**	**M0300. Current Number of Unhealed Pressure Ulcers at Each Stage**	**M0300. Current Number of Unhealed Pressure Ulcers/Injuries at Each Stage**	Added the term "injuries" to be inclusive of updated terminology supported by NPUAP Item wording aligns with Minimum Data Set and LTCH CARE Data Set
51.	**Admission Discharge**	**M0300A**	**Number of Stage 1 pressure ulcers**	1. **Number of Stage 1 pressure** injuries	Added the number one to be consistent with other items in the section Replaced the term "ulcers" with "injuries" as the term "injuries" indicates intact skin which better aligns with criteria for Stage 1 Item wording aligns with Minimum Data Set and LTCH CARE Data Set
52.	**Discharge**	**M0300D1**	**D1. Number of Stage 4 pressure ulcers** *If 0 → Skip to M0300E. Unstageable - Non-removable dressing*	**D1. Number of Stage 4 pressure ulcers** *If 0 → Skip to M0300E, Unstageable - Non-removable dressing/device*	Added for clarification

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
53.	**Admission**	**M0300E** **M0300E1**	**E. Unstageable - Non-removable dressing:** Known but not stageable due to non-removable dressing/device **1. Number of unstageable pressure ulcers due to non-removable dressing/device**	**E. Unstageable - Non-removable dressing/device:** Known but not stageable due to non-removable dressing/device **1. Number of unstageable pressure ulcers/injuries due to non-removable dressing/device**	Added the word "device" for clarification Added the term "injuries" to be inclusive of updated terminology supported by NPUAP Item wording aligns with Minimum Data Set and LTCH CARE Data Set
54.	**Discharge**	**M0300E** **M0300E1** **M0300E2**	**E. Unstageable - Non-removable dressing:** Known but not stageable due to non-removable dressing/device **1. Number of unstageable pressure ulcers due to non-removable dressing/device** → *If 0 Skip to M0300F. Unstageable, Slough and/or eschar.* **2. Number of <u>these</u> unstageable pressure ulcers that were present upon admission** - enter how many were noted at the time of admission	**E. Unstageable - Non-removable dressing/device:** Known but not stageable due to non-removable dressing/device **1. Number of unstageable pressure ulcers/injuries due to non-removable dressing/device** *If 0 → Skip to M0300F, Unstageable, Slough and/or eschar* **2. Number of <u>these</u> unstageable pressure ulcers/injuries that were present upon admission** - enter how many were noted at the time of admission	Added the word "device" for clarification Added the term "injuries" to be inclusive of updated terminology supported by NPUAP Item wording aligns with Minimum Data Set and LTCH CARE Data Set

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
55.	**Admission**	**M0300G** **M0300G1**	**G. Unstageable - Deep tissue injury:** Suspected deep tissue injury in evolution. **1. Number of unstageable pressure ulcers with suspected deep tissue injury in evolution**	**G. Unstageable - Deep tissue injury** **1. Number of unstageable pressure** injuries presenting as deep tissue injury	Removed the term "suspected deep tissues injury in evolution" and added language to be consistent with updated NPUAP terminology Item wording aligns with Minimum Data Set and LTCH CARE Data Set
56.	**Discharge**	**M0300G** **M0300G1** **M0300G2**	**G. Unstageable - Deep tissue injury:** Suspected deep tissue injury in evolution. 1. **Number of unstageable pressure ulcers with suspected deep tissue injury in evolution** *If 0 → Skip to M0800. Worsening in Pressure Ulcers Status Since Admission* 2. **Number of <u>these</u> unstageable pressure ulcers that were present upon admission** - enter how many were noted at the time of admission.	**G. Unstageable - Deep tissue injury** 1. **Number of unstageable** pressure injuries presenting as deep tissue injury *If 0 → Skip to N2005, Medication Intervention* 2. **Number of <u>these</u> unstageable pressure injuries that were present upon admission** - enter how many were noted at the time of admission.	Removed the term "suspected deep tissue injury in evolution" and replace with "deep tissue injury" to be consistent with updated NPUAP terminology Item wording aligns with Minimum Data Set and LTCH CARE Data Set

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
57.	**Discharge**	**M0800** **M0800A** **M0800B** **M0800C** **M0800D** **M0800E** **M0800F**	**M0800. Worsening in Pressure Ulcer Status Since Admission** Indicate the number of current pressure ulcers that were **not present or were at a lesser stage** on admission. If no current pressure ulcer at a given stage, enter 0. **A. Stage 2** **B. Stage 3** **C. Stage 4** **D. Unstageable - Non-removable dressing** **E. Unstageable - Slough and/or eschar** **F. Unstageable - Deep tissue injury**	**Items deleted**	Deleted to reduce provider burden Alignment with Minimum Data Set and LTCH CARE Data Set
58.	**Discharge**	**M0900** **M0900A** **M0900B** **M0900C** **M0900D**	**M0900. Healed Pressure Ulcer(s)** Indicate the number of pressure ulcers that were: (a) present on **Admission; and** (b) have completely closed (resurfaced with epithelium) upon **Discharge**. If there are no healed pressure ulcers noted at a given stage, enter 0. **A. Stage 1** **B. Stage 2** **C. Stage 3** **D. Stage 4**	**Items deleted**	Deleted to reduce provider burden

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Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
59.	**Admission Discharge**	**Section N**	**N/A – new section**	**Section N. Medications**	New section added on admission and discharge to accommodate Drug Regimen Review quality measure items N2001, N2003, and N2005
60.	**Admission**	**N2001**	**New Item**	**N2001. Drug Regimen Review** **Did a complete drug regimen review identify potential clinically significant medication issues?** 0. **No - No issues found during review** → *Skip to O0100, Special Treatments, Procedures, and Programs* 1. **Yes - Issues found during review** → *Continue to N2003, Medication Follow-up* 9. **NA - Patient is not taking any medications** → *Skip to O0100, Special Treatments, Procedures, and Programs*	New item added to collect data for drug regimen review quality measure Alignment with Minimum Data Set and LTCH CARE Data Set
61.	**Admission**	**N2003**	**New Item**	**N2003. Medication Follow-up** **Did the facility contact a physician (or physician-designee) by midnight of the next calendar day and complete prescribed/recommended actions in response to the identified potential clinically significant medication issues?** 0. **No** 1. **Yes**	New item added to collect data for drug regimen review quality measure Alignment with Minimum Data Set and LTCH CARE Data Set

Table 2. Final IRF-PAI Version 2.0 Change Table – Effective October 1, 2018 (Changes from Version 1.5 to 2.0) (continued)

No.	Item(s) Affected	Item / Text Affected	Proposed IRF-PAI Version 1.5	Proposed IRF-PAI Version 2.0 (Note: Proposed modifications to existing items are presented in BLUE font)	Rationale for Change/Comments
62.	**Discharge**	**N2005**	**New Item**	**N2005. Medication Intervention** **Did the facility contact and complete physician (or physician-designee) prescribed/ recommended actions by midnight of the next calendar day each time potential clinically significant medication issues were identified since the admission?** 0**. No** 1. **Yes** 9**. NA - There were no potential clinically significant medication issues identified since admission or patient is not taking any medications.**	New item added to collect data for drug regimen review quality measure Aligns with Minimum Data Set and LTCH CARE Data Set