

## Interim Payment Assessment

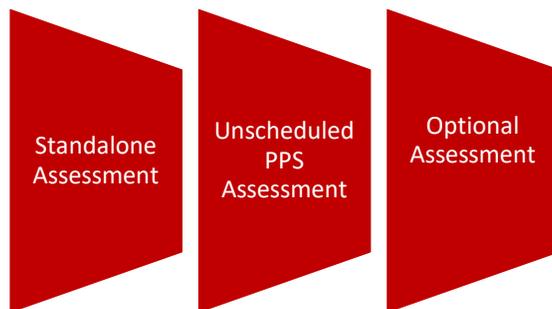
*There are situations when a Skilled Nursing provider may complete an assessment after the 5-day assessment. This assessment is an unscheduled assessment and when deemed appropriate by the provider, may be completed to capture changes in the resident's status and condition.*

The optional Interim Payment Assessment (IPA) may be used any time between the 5-Day Assessment and the Part A discharge assessment.

Providers can choose to complete an IPA assessment to capture changes in resident characteristics. These changes in resident characteristics would be such that it actually affects the PDPM calculation in one or more of the five case-mix adjusted payment categories: Physical Therapy (PT), Occupational Therapy (OT), Speech-Language Pathology (SLP), Nursing, or the Non-Therapy Ancillaries (NTA).

Ensure coding accuracy of the 5-day assessment. This will capture the NTA higher payment by three times for the first three days of the resident's Part A stay.

Residents skilled under the traditional Medicare Part A benefit under RUG-IV and will continued to be skilled on October 1, 2019 will **require** an IPA Assessment to transition the resident from RUG-IV to PDPM. This (transitional) IPA ARD can be set any date of 10/1/19-10/7/19. Section GG will need to be completed on this (transitional) IPA Assessment and the look-back period is the IPA ARD and two days prior.



ARD (item A2300) may be set for any day of the SNF PPS stay, beyond the ARD of the 5-Day assessment.	May be used to reclassify the resident into a new PDPM classification and would also change the associated payment rate.	Must be completed (item Z0500B) within 14 days after the ARD (ARD + 14 days).	Authorizes payment for remainder of the PPS stay, beginning on the ARD.	Must be submitted electronically and accepted into the QIES ASAP system within 14 days after completion (item Z0500B) (completion + 14 days).
The ARD for an IPA may not precede that of the 5-Day assessment.	The ARD is determined by the provider.	May not be combined with any other assessments (PPS or OBRA).	Assessment period for Section GG is the last 3 days (the ARD and two days prior).	For Section GG on the IPA, providers will use the same 6-point scale and activity not attempted codes to complete the column "Interim Performance," which will capture the interim functional performance of the resident.
The IPA changes payment beginning on the IPA ARD and continues until the end of the Medicare Part A stay or until another IPA is completed.	The IPA does not affect the variable per diem schedule.	Not synonymous with a Significant Change in Status Assessment.	No limit on how many IPAs can be completed during the resident's stay.	