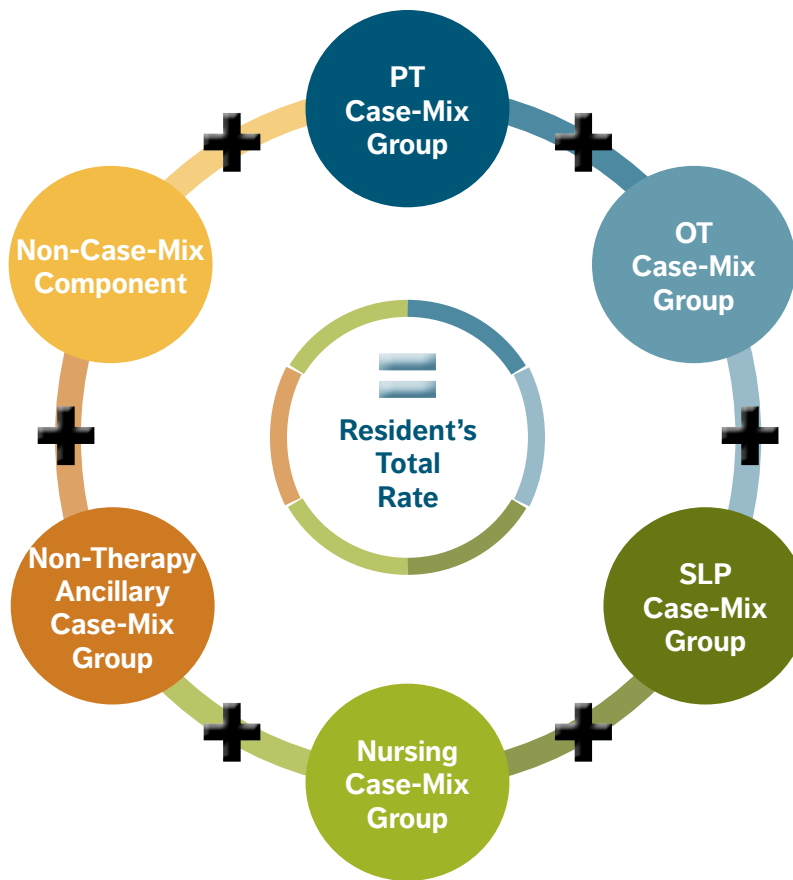


Patient-Driven Payment Model (PDPM): At-a-Glance

PDPM establishes a rate on the 5-Day PPS assessment for the entire stay by combining five different case-mix components (PT, OT, SLP, Nursing, and Non-Therapy Ancillary) with the non-case-mix component. The rate may be changed during the Medicare Part A stay by completing the optional Interim Payment Assessment (IPA).

Use the following at-a-glance tools to identify the case-mix group for each component and improve your understanding of the Patient-Driven Payment Model.



PDPM HIPPS Billing Code	
1 st Character	PT and OT case-mix group
2 nd Character	SLP case-mix group
3 rd Character	Nursing case-mix group
4 th Character	Non-therapy ancillary case-mix group
5 th Character	Assessment indicator code (0 = Interim payment assessment, 1 = 5-Day PPS assessment)

NOTE: This document reflects CMS changes in the FY 2024 SNF PPS Final Rule.

Patient-Driven Payment Model (PDPM): At-a-Glance

PT Component and OT Component*

Clinical Category	GG Function Score	PT and OT Case-Mix Group	PT CMI	OT CMI
Major Joint Replacement or Spinal Surgery	0-5	TA	1.45	1.41
	6-9	TB	1.61	1.54
	10-23	TC	1.78	1.60
	24	TD	1.81	1.45
Other Orthopedic	0-5	TE	1.34	1.33
	6-9	TF	1.52	1.51
	10-23	TG	1.58	1.55
	24	TH	1.10	1.09
Medical Management	0-5	TI	1.07	1.12
	6-9	TJ	1.34	1.37
	10-23	TK	1.44	1.46
	24	TL	1.03	1.05
Non-Orthopedic Surgery and Acute Neurologic	0-5	TM	1.20	1.23
	6-9	TN	1.40	1.42
	10-23	TO	1.47	1.47
	24	TP	1.02	1.03

Scoring Response for Section GG Items		Score
05, 06	Setup or clean-up assistance, independent	4
04	Supervision or touching assistance	3
03	Partial/moderate assistance	2
02	Substantial/maximal assistance	1
01, 07, 09, 10, 88, [-]	Dependent, refused, not attempted, resident does not walk**	0

Section GG items (column 1 on the 5-Day and OBRA Admission or column 5 on the IPA or other OBRA assessments)		Score
GG0130A	Self-care: Eating	0-4
GG0130B	Self-care: Oral hygiene	0-4
GG0130C	Self-care: Toileting hygiene	0-4
GG0170B	Mobility: Sit to lying	0-4 (avg. of 2 bed mobility items)
GG0170C	Mobility: Lying to sitting on side of bed	
GG0170D	Mobility: Sit to stand	0-4 (avg. of 3 transfer items)
GG0170E	Mobility: Chair/bed-to-chair transfer	
GG0170F	Mobility: Toilet transfer	
GG0170J	Mobility: Walk 50 feet with 2 turns	0-4 (avg. of 2 walking items)
GG0170K	Mobility: Walk 150 feet	

* **PT Component and OT Component:**
PT and OT components will always result in the same case-mix group; however, the PT and OT case-mix indices/payment levels differ.

**
If a resident is coded as not attempted (07, 09, 10, or 88) for **GG0170I (Walk 10 feet)**, then walking items for GG0170J (Walk 50 feet with 2 turns) and GG0170K (Walk 150 feet) will be scored as zero points.

NOTE: This document reflects CMS changes in the FY 2024 SNF PPS Final Rule.

Patient-Driven Payment Model (PDPM): At-a-Glance

SLP Component

Presence of Acute Neurologic Condition, SLP-Related Comorbidity*, or Cognitive Impairment**	Presence of: Swallowing Disorder (K0100A-D) OR Mechanically Altered Diet (K0520C3)	SLP Case-Mix Group	SLP CMI
None	Neither	SA	0.64
	Either	SB	1.72
	Both	SC	2.52
Any one	Neither	SD	1.38
	Either	SE	2.21
	Both	SF	2.82
Any two	Neither	SG	1.93
	Either	SH	2.70
	Both	SI	3.34
All three	Neither	SJ	2.83
	Either	SK	3.50
	Both	SL	3.98

*** SLP-Related Comorbidities:**
Aphasia (I4300); CVA, TIA, or Stroke (I4500); Hemiplegia or Hemiparesis (I4900); TBI (I5500); Tracheostomy (O0110E1b); Invasive Mechanical Ventilator or Respirator (O0110F1b); Laryngeal Cancer, Apraxia, Dysphagia, ALS, Oral Cancers, Speech and Language Deficits (I8000)

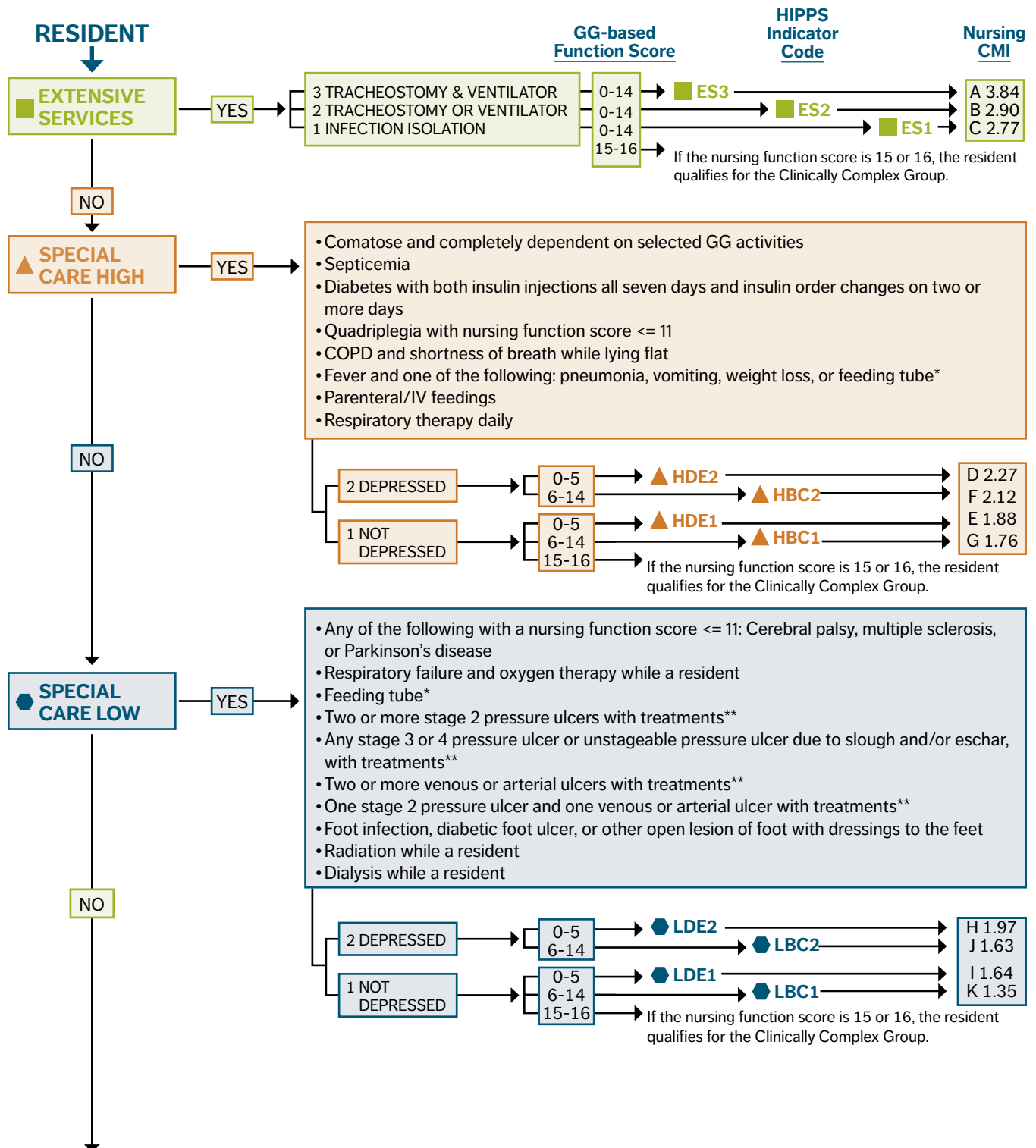
**** Cognitive Impairment:**
The PDPM cognitive level is based on the Brief Interview for Mental Status (BIMS) or the PDPM staff assessment for mental status. See the CMS PDPM Calculation worksheet in chapter 6 of the RAI User's Manual.

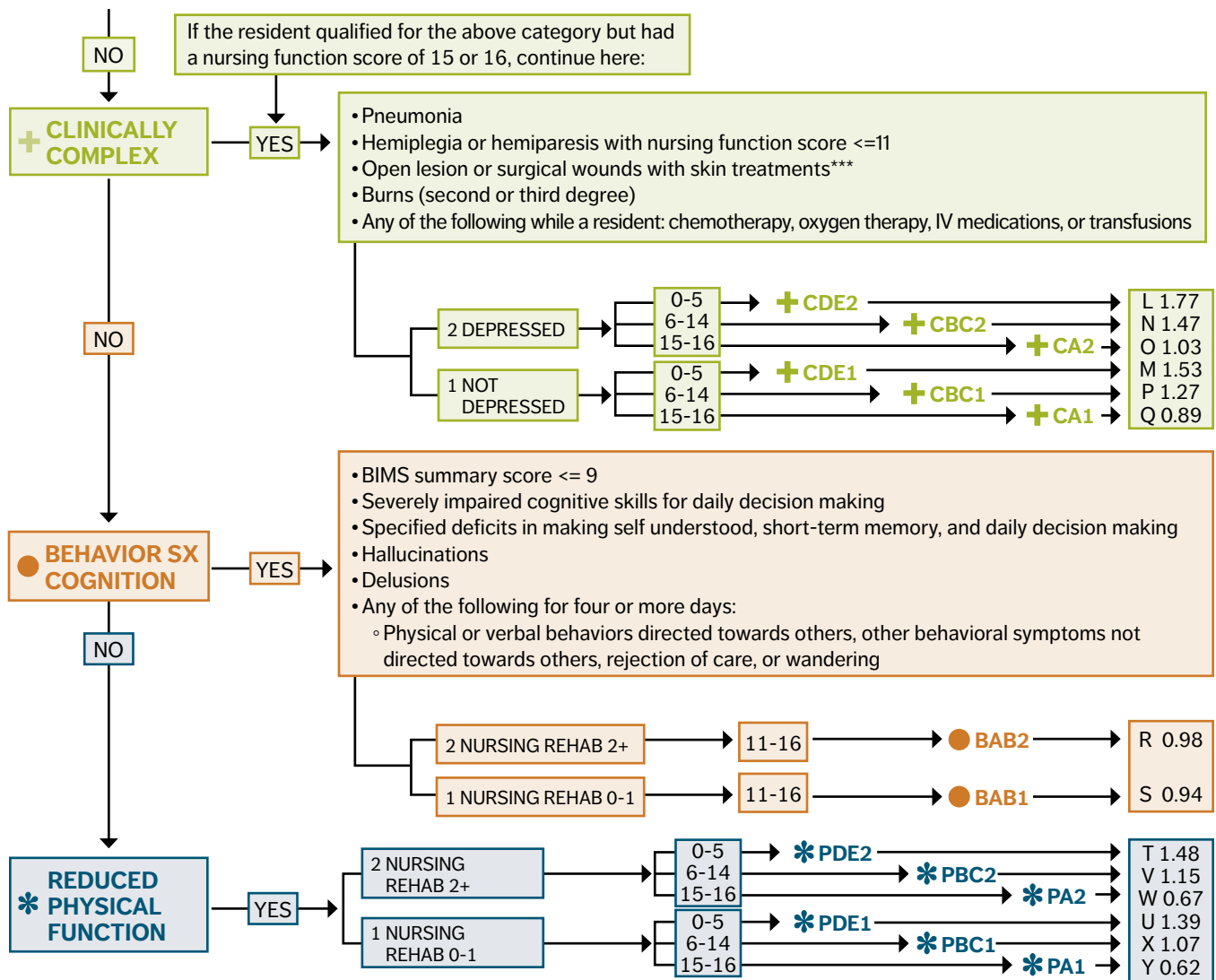
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Patient-Driven Payment Model (PDPM): At-a-Glance

Nursing Component*

NOTE: This document reflects CMS changes in the FY 2024 SNF PPS Final Rule.





Scoring Response for Section GG Items		Score
05, 06	Setup or clean-up assistance, independent	4
04	Supervision or touching assistance	3
03	Partial/moderate assistance	2
02	Substantial/maximal assistance	1
01, 07, 09, 10, 88, [-]	Dependent, refused, not attempted	0

Section GG items (column 1 on the 5-Day and OBRA Admission or column 5 on the IPA and other OBRA assessments)		Score
GG0130A	Self-care: Eating	0-4
GG0130C	Self-care: Toileting hygiene	0-4
GG0170B	Mobility: Sit to lying	0-4 (avg. of 2 bed mobility items)
GG0170C	Mobility: Lying to sitting on side of bed	
GG0170D	Mobility: Sit to stand	0-4 (avg. of 3 transfer items)
GG0170E	Mobility: Chair/bed-to-chair transfer	
GG0170F	Mobility: Toilet transfer	

Depression End-Split
The D0160 Total Severity Score is greater than or equal to 10 but not 99, or the D0600 Total Severity Score is greater than or equal to 10.

*** Tube feeding classification requirements:**
(1) K0710A3 is 51% or more of total calories
OR
(2) K0710A3 is 26% to 50% of total calories and K0710B3 is 501 cc or more per day fluid enteral intake in the last 7 days.

**** Two of the following selected skin treatments:**
M1200A, B Pressure relieving chair and/or bed
M1200C Turning/repositioning program
M1200D Nutrition or hydration intervention
M1200E Pressure ulcer/injury care
M1200G Application of nonsurgical dressings (not to feet)
M1200H Application of ointments/medications (not to feet)

***** Any of the following selected skin treatments:**
M1200F Surgical wound care
M1200G Application of nonsurgical dressing (other than to feet)
M1200H Application of ointments/medications (other than to feet)

*** Nursing Component:**
See the CMS PDPM calculation worksheet in chapter 6 of the RAI User's Manual for inclusion criteria for each nursing classification.

Patient-Driven Payment Model (PDPM): At-a-Glance

Non-Therapy Ancillary (NTA) Component

Condition/Extensive Service	Source	Points
HIV/AIDS	SNF Claim	8
Parenteral IV Feeding: Level High	MDS Item K0520A3, K0710A2	7
Special Treatments/Programs: Intravenous Medication Post-admit Code	MDS Item O0110H1b	5
Special Treatments/Programs: Invasive Mechanical Ventilator or Respirator Post-admit Code	MDS Item O0110F1b	4
Parenteral IV Feeding: Level Low	MDS Item K0520A3, K0710A2, K0710B2	3
Lung Transplant Status	MDS Item I8000	3
Special Treatments/Programs: Transfusion Post-admit Code	MDS Item O0110I1b	2
Major Organ Transplant Status, Except Lung	MDS Item I8000	2
Active Diagnoses: Multiple Sclerosis Code	MDS Item I5200	2
Opportunistic Infections	MDS Item I8000	2
Active Diagnoses: Asthma COPD Chronic Lung Disease Code	MDS Item I6200	2
Bone/Joint/Muscle Infections/Necrosis—Except Aseptic Necrosis of Bone	MDS Item I8000	2
Chronic Myeloid Leukemia	MDS Item I8000	2
Wound Infection Code	MDS Item I2500	2
Active Diagnoses: Diabetes Mellitus (DM) Code	MDS Item I2900	2
Endocarditis	MDS Item I8000	1
Immune Disorders	MDS Item I8000	1
End-Stage Liver Disease	MDS Item I8000	1
Narcolepsy and Cataplexy	MDS Item I8000	1
Cystic Fibrosis	MDS Item I8000	1
Special Treatments/Programs: Tracheostomy Care Post-admit Code	MDS Item O0110E1b	1
Active Diagnoses: Multi-Drug Resistant Organism (MDRO) Code	MDS Item I1700	1
Special Treatments/Programs: Isolation Post-admit Code	MDS Item O0110M1b	1
Specified Hereditary Metabolic/Immune Disorders	MDS Item I8000	1
Morbid Obesity	MDS Item I8000	1
Special Treatments/Programs: Radiation Post-admit Code	MDS Item O0110B1b	1
Highest Stage of Unhealed Pressure Ulcer—Stage 4	MDS Item M0300D1	1
Psoriatic Arthropathy and Systemic Sclerosis	MDS Item I8000	1

Continued

High level:** K0710A2 = 3. 51% or more (while a resident) *Low level:** K0710A2 = 2. 26–50% (while a resident) AND K0710B2 = 2. 501cc/day or more (while a resident)

Patient-Driven Payment Model (PDPM): At-a-Glance

Non-Therapy Ancillary (NTA) Component (Continued)

Condition/Extensive Service	Source	Points
Chronic Pancreatitis	MDS Item I8000	1
Proliferative Diabetic Retinopathy and Vitreous Hemorrhage	MDS Item I8000	1
Other Foot Skin Problems: Foot Infection Code, Diabetic Foot Ulcer Code, Other Open Lesion on Foot Code	M1040A, M1040B, M1040C	1
Complications of Specified Implanted Device or Graft	MDS Item I8000	1
Bladder and Bowel Appliances: Intermittent Catheterization	MDS Item H0100D	1
Inflammatory Bowel Disease	MDS Item I1300	1
Aseptic Necrosis of Bone	MDS Item I8000	1
Special Treatments/Programs: Suctioning Post-admit Code	MDS Item O0110D1b	1
Cardio-Respiratory Failure and Shock	MDS Item I8000	1
Myelodysplastic Syndromes and Myelofibrosis	MDS Item I8000	1
Systemic Lupus Erythematosus, Other Connective Tissue Disorders, and Inflammatory Spondylopathies	MDS Item I8000	1
Diabetic Retinopathy—Except Proliferative Diabetic Retinopathy and Vitreous Hemorrhage	MDS Item I8000	1
Nutritional Approaches While a Resident: Feeding Tube	MDS Item K0520B3	1
Severe Skin Burn or Condition	MDS Item I8000	1
Intractable Epilepsy	MDS Item I8000	1
Active Diagnoses: Malnutrition Code	MDS Item I5600	1
Disorders of Immunity—Except: RxCC97: Immune Disorders	MDS Item I8000	1
Cirrhosis of Liver	MDS Item I8000	1
Bladder and Bowel Appliances: Ostomy	MDS Item H0100C	1
Respiratory Arrest	MDS Item I8000	1
Pulmonary Fibrosis and Other Chronic Lung Disorders	MDS Item I8000	1

NTA Score Range	NTA Case-Mix Group	NTA CMI
12+	NA	3.06
9–11	NB	2.39
6–8	NC	1.74
3–5	ND	1.26
1–2	NE	0.91
0	NF	0.68

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