Independent Hospital Pricing Authority

Australian National Subacute and Non-Acute Patient Classification Version 5.0

Classification Manual

December 2021



Australian National Subacute and Non-Acute Patient Classification Version 5.0 – Classification Manual – December 2021

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Acronyms and abbreviations

Acronym / abbreviation	Description	
ABF	Activity based funding	
ABF APC DRS	Activity Based Funding Admitted Patient Care - Data Request Specification	
ABF PCC DRS	Activity Based Funding Palliative Phase of Care - Data Request Specification	
ADL	Activity of daily living	
AHRSI	Australian Health Services Research Institute – University of Wollongong	
AIHW	Australian Institute of Health and Welfare	
AN-SNAP	Australian National Subacute and Non-Acute Patient Classification	
APC	Admitted Patient Care data collection	
AR-DRG	Australian Refined Diagnosis Related Group	
AROC	Australasian Rehabilitation Outcomes Centre	
ASNAHC NBEDS	Admitted Subacute and Non-Acute Hospital Care National Best Endeavours Data Set	
CHSD	Centre for Health Services Development	
DRS	Data request specification	
FIM^TM	Functional Independence Measure ¹	
FRIC	Frailty Related Index of Comorbidities	
GEM	Geriatric evaluation and management care type	
HoNOS	Health of the Nation Outcome Scale	
ICD-10-AM	The International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification	
IHPA	Independent Hospital Pricing Authority	
LoS	Length of stay	
MMT	Major multiple trauma	
NHCDC	National Hospital Cost Data Collection	
PCOC	Palliative Care Outcomes Collaboration	
RUG-ADL	Resource Utilisation Groups - Activities of Daily Living	
$WFIM^TM$	Weighted Functional Independence Measure	

¹ FIM™ is a trademark of the Uniform Data System for Medical Rehabilitation, a division of UB Foundation Activities Incorporated. The Australasian Rehabilitation Outcomes Centre (AROC) holds the territory license for the use of the FIM™ instrument in Australia.

1. Introduction

1.1 Context

Under the National Health Reform Agreement 2011, the Independent Hospital Pricing Authority (IHPA) is responsible for determining the activity based funding (ABF) system for public hospital subacute and non-acute care services. The classification system used for admitted subacute and non-acute care ABF in Australia is the Australian National Subacute and Non-Acute Patient Classification (AN-SNAP).

In addition to its use for ABF, the AN-SNAP classification is used for clinical management and other purposes such as benchmarking, epidemiological studies, safety and quality monitoring, and research to understand practice and cost variation. It was first developed in 1997 and has been refined four times since then.

The most recent version, AN-SNAP Version 5.0 (V5), was released in December 2021. IHPA developed AN-SNAP V5 as part of its regular reviews of all ABF classifications to ensure that they reflect contemporary clinical practice and terminology; and provide the best possible statistical explanation of care costs.



AN SNAP V5 is a modest refinement of AN-SNAP Version 4.0 (V4). **Appendix A - Summary of changes** provides a summary comparison of AN-SNAP V5 to AN-SNAP V4. Some key differences are also highlighted throughout this manual in boxes like this.

1.2 Purpose of this manual

This manual has been developed to support the consistent use of AN-SNAP V5. To do this, the manual includes the following:

- definitions of key AN-SNAP V5 terms and related concepts
- AN-SNAP V5 business rules to ensure the consistent application of the AN-SNAP V5 classification in potentially ambiguous circumstances
- AN-SNAP V5 practice guidance to ensure consistent application of the clinical assessment tools and other measures where these are being used as a variable in the classification
- information about the classification logic which underpins the grouping software (SNAP5Grouper) available through IHPA.

This manual is intended to complement the <u>Development of the Australian National Subacute</u> <u>and Non-Acute Patient Classification Version 5.0 - Final Report</u>² (AN-SNAP V5 Final Report), which provides details about the development of AN-SNAP V5 and is available on the IHPA website.

² Independent Hospital Pricing Authority (2021) <u>Development of the Australian National Subacute and Non-Acute Patient Classification Version 5.0 - Final Report.</u>

1.3 Definitions

Subacute care is defined as:

...specialised multidisciplinary care in which the primary need for care is optimisation of the patient's functioning and quality of life. A person's functioning may relate to their whole body or a body part, the whole person, or the whole person in a social context, and to impairment of a body function or structure, activity limitation and/or participation restriction.³

This focus on a) multidisciplinary care, and b) optimising function is what characterises subacute and non-acute care; and gives rise to the need for an approach to subacute care classification that is not based primarily around patient diagnoses and procedures.

A common understanding of key terms is fundamental to ensuring the consistent application of AN-SNAP V5. **Appendix B - Definitions** provides definitions for key AN-SNAP V5 terms and concepts.

1.3.1 Metadata Online Data Registry

The Australian Institute of Health and Welfare's Metadata Online Data Registry (METeOR) is Australia's repository for national metadata standards for health statistics and information. Where ever possible, AN-SNAP V5 terms are defined using METeOR standards. Where applicable, METeOR references (and other sources) are provides at <u>Appendix B - Definitions</u>.

In addition, IHPA maintains two Data Request Specifications, which provide information about the data elements required to group admitted subacute and non-acute patient episodes or phases of care to an AN-SNAP class:

- Activity Based Funding Admitted Patient Care Data Request Specification
- Activity Based Funding Palliative Phase of Care Data Request Specifications.

³ Australian Institute of Health and Welfare (2013). <u>Development of nationally consistent subacute and non-acute admitted patient care data definitions and guidelines</u>. Cat no HSE 135. Canberra, AIHW.

2. Overview of AN-SNAP V5

2.1 Five care types

Australian National Subacute and Non-Acute Patient Classification (AN-SNAP) Version 5.0 (V5) only applies to episodes of admitted patient hospital care (same-day and overnight). It does not classify non-admitted care (because Independent Hospital Pricing Authority does not use AN-SNAP to price non-admitted subacute care⁴).

AN-SNAP V5 continues to classify admitted subacute and non-acute care into five care types:

- rehabilitation care
- palliative care
- geriatric evaluation and management (GEM)
- · psychogeriatric care, and
- non-acute care (sometimes referred to as maintenance care).

Each of these care types is as defined in METeOR (see Appendix B - Definitions).

Figure 1 summarises the AN-SNAP V5 classification structure and end-classes. A complete table of all the AN-SNAP V5 classification admitted end classes including the grouping variables and thresholds is at **Appendix C - End classes**.

⁴ At the time of publication non-admitted sub-acute activity is priced through the <u>Tier 2 Non-Admitted Services Classification</u>, which is currently being reviewed as part of the development of a new non-admitted care classification.

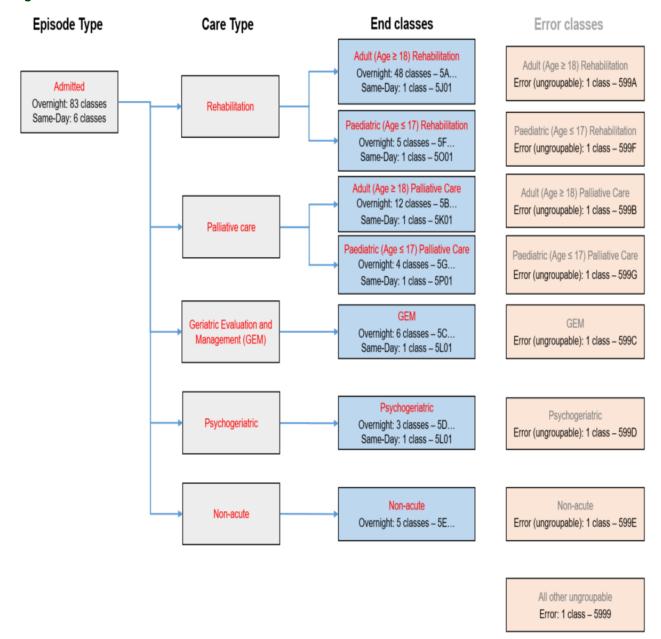


Figure 1. AN-SNAP V5 Classification Structure

2.2 Valid end classes

AN-SNAP V5 has 89 valid end classes for admitted care:

- 83 overnight classes across the five care types
- six same-day classes one for each of adult rehabilitation, paediatric rehabilitation, adult palliative care, paediatric palliative care, GEM, and psychogeriatric care.

2.3 Error end classes

AN-SNAP V5 has eight ungroupable error classes:

- five adult care type ungroupable error classes
- two paediatric ungroupable error classes (paediatric rehabilitation and paediatric palliative care)
- one other ungroupable error class applicable when a care type (or episode type) cannot be established due to missing data.

Under AN-SNAP V5, an episode of care (or phase of palliative care) should only group to one of the five adult or two paediatric error classes as a 'decision of last resort', that is, if information about a variable <u>specifically</u> required for grouping that particular episode (or phase) is not available in the dataset (see 5.3.1).

Business rule # 5.0.1 - Applying the 5999 error class

A care type error class is used in preference to the general error class of 5999 wherever possible. That is, if a record has a valid care type code then that care type error class is used if required.

Business rule # 5.0.2 - Deciding between a paediatric or adult error classes

If a rehabilitation or palliative care episode record does not have a valid date of birth then:

- the episode record is assumed to be an adult record; and therefore
- the adult error class is used (i.e. 599A for rehabilitation care or 599B for palliative care).

2.4 Summary of the classification variables

Like all ABF classification systems, AN-SNAP sorts patient episodes of care into related groups (called classes). This is done using variables, which can be categorical (describing a 'quality' or 'characteristic' of something) or numeric (describing a measurable quantity as a number). The variables are applied to the groups in a particular order to progressively break the groups down into meaningful sets, with each step in this process called a 'split'. If a numeric variable is used to split a group, it does this using set numbers as upper and/or lower thresholds for the group.

Noting that AN-SNAP V5 only classifies admitted episodes (both overnight and same-day) the first step is to split admitted episodes into smaller groups using a categorical variable: care type (rehabilitation, palliative care, GEM, psychogeriatric care and non-acute care). These groups of care type episodes are then further split several times using a mix of categorical and numeric variables as listed in Table 1 and further described at section 4.

Table 1. AN-SNAP V5 variables

Care type	Splitting variables
Rehabilitation	Functional Independence Measure (FIM TM) Motor score (weighted) Rehabilitation Impairment Type Group FIM TM Cognition score Age
Palliative care	Palliative care phase (stage of illness) Resource Utilisation Groups – Activities of Daily Living (RUG-ADL) total score Age
GEM	Frailty Related Index of Comorbidities (FRIC) score FIM TM Motor score
Psychogeriatric	Length of stay (Long term care > 91 days & shorter term care ≤ 91 days) Health of the Nation Outcome Scale (HoNOS) 65+ total score
Non-acute	Length of stay (Long term care > 91 days & shorter term care ≤ 91 days) Age Frailty Related Index of Comorbidities (FRIC) score

3. The AN-SNAP V5 classes

3.1 Adult rehabilitation classes

The admitted adult rehabilitation branch of Australian National Subacute and Non-Acute Patient Classification (AN-SNAP) Version 5.0 (V5) consists of one same-day class and 48 overnight classes as shown in Figure 2. See Appendix C - End classes for a full list of AN-SNAP V5 rehabilitation classes.

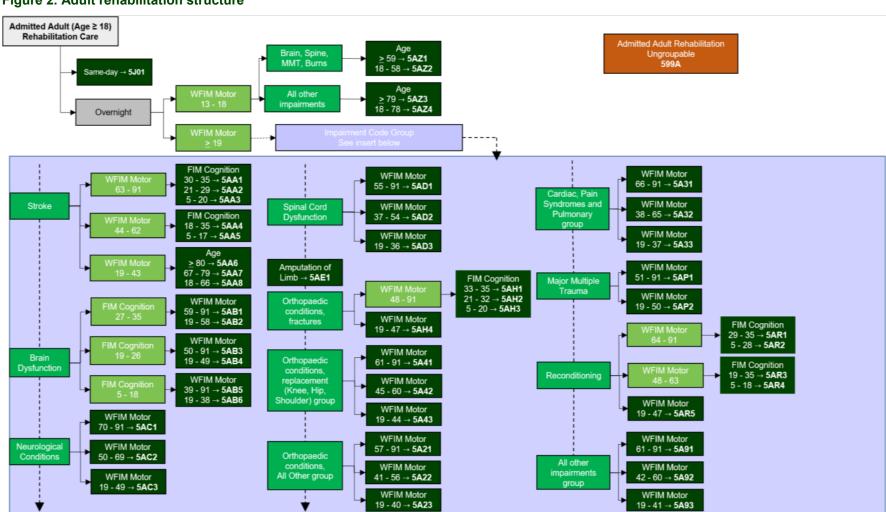


Figure 2. Adult rehabilitation structure

3.1.1 Same-day class

AN-SNAP V5 groups all adult same-day rehabilitation episodes into one class (Table 2).

Table 2. Adult rehabilitation - Same-day class

End-class	End-class Description and thresholds		
Rehabilitation	Rehabilitation care		
5J01 Adult same-day rehabilitation			

3.1.2 Overnight higher complexity (WFIM™ Motor score 13 - 18) classes

AN-SNAP V5 uses a WFIM[™] Motor score as the first split in the Admitted adult rehabilitation overnight branch. This first split separates out the very high resource intensive episodes regardless of the impairment type.

Two groups are created: a low functioning (higher complexity) group with WFIMTM Motor scores of 13 to 18; and a higher functioning (lower complexity) group with WFIMTM Motor scores greater than or equal to 19.

Business rule # 5.0.3 - Applying the WFIM™ Motor score threshold for the overnight higher complexity episode split

When calculating a WFIMTM Motor score for the purposes of the first split for overnight rehabilitation episodes, scores of 18 with any following decimals are rounded down to 18, and therefore grouped along the low FIMTM branch.

For example, a weighted FIM Motor score of 18.9 is rounded down to 18 and must be classed into 5AZ1, 5AZ2, 5AZ3, or 5AZ4 (or 599A).

The next split in the admitted adult rehabilitation overnight higher complexity branch uses groups derived from the patient's primary impairment for rehabilitation episode, as defined according to the Australasian Rehabilitation Outcomes Centre (AROC) code set⁵ (see section 4.3).

The reference table for the derived groups for episodes of adult rehabilitation with a weighted FIMTM of 13 to 18 is at <u>Appendix D - Adult rehabilitation impairment groups (Weighted FIMTM Motor Score 13-18)</u>.

AN-SNAP V5 has four higher complexity (low WFIMTM Motor score 13 - 18) classes, as detailed in Table 3.

⁵ The AROC impairment code set classifies the primary reason for a patient undergoing a rehabilitation episode of care. See Australian Institute of Health and Welfare, <u>Metadata Online Data Registry (METeOR) identifier 498498</u>; Australasian Rehabilitation Outcomes Centre (2013) <u>AROC Impairment Coding Guidelines.</u>

Table 3. Adult rehabilitation - higher complexity classes (low WFIM™ Motor score 13 - 18)

End-class	Description and thresholds			
Rehabilitation care				
Low WFIM™ – Brain, spine, major multiple trauma, burns				
5AZ1	WFIM Motor score 13-18	Brain, Spine, MMT, Burns	Age >= 59	
5AZ2	WFIM Motor score 13-18	Brain, Spine, MMT, Burns	Age 18 - 58	
Low WFIM [™] – All other impairment types				
5AZ3	WFIM Motor score 13-18	All other impairments	Age >= 79	
5AZ4	WFIM Motor score 13-18	All other impairments	Age 18 - 78	



In AN-SNAP V5, in the low weighted FIMTM branch, burns impairment type episodes are grouped with brain, spine and major multiple trauma episodes rather than All other impairments as they were in AN-SNAP V4.

3.1.3 Overnight lower complexity (WFIM™ Motor score ≥ 19) classes

The lower complexity admitted adult rehabilitation overnight episodes (with a WFIM[™] Motor score ≥ 19) are then split according to impairment types groups as described below.

The reference table for the groups for adult rehabilitation episodes with a weighted FIM[™] of 19 or more is at Appendix E - Adult rehabilitation impairment groups (Weighted FIMTM Motor Score ≥ 19.

Stroke impairment

There are eight 'Stroke impairment' classes in AN-SNAP V5 as set out in Table 4.

Table 4. Adult rehabilitation - Stroke impairment classes

End-class	Description and thresholds				
Rehabilitation	Rehabilitation care				
Stroke					
5AA1	5AA1 Stroke WFIM Motor 63 - 91 FIM Cognition 30 - 35				
5AA2	Stroke	WFIM Motor 63 - 91	FIM Cognition 21 - 29		
5AA3	Stroke	WFIM Motor 63 - 91	FIM Cognition 5 - 20		
5AA4	Stroke	WFIM Motor 44 - 62	FIM Cognition 18 - 35		
5AA5	Stroke	WFIM Motor 44 - 62	FIM Cognition 5 - 17		
5AA6	Stroke	WFIM Motor 19 - 43	Age >= 80		
5AA7	Stroke	WFIM Motor 19 - 43	Age 67 - 79		
5AA8	Stroke	WFIM Motor 19 - 43	Age 18 - 66		

Brain dysfunction

There are six 'Brain dysfunction' classes in AN-SNAP V5 as set out in Table 5.

Table 5. Adult rehabilitation - Brain dysfunction classes

End-class	Description and thresholds			
Rehabilitation care				
Brain dysfunction				
5AB1	Brain dysfunction	FIM Cognition 27 - 35	WFIM Motor 59 - 91	
5AB2	Brain dysfunction	FIM Cognition 27 - 35	WFIM Motor 19 - 58	
5AB3	Brain dysfunction	FIM Cognition 19 - 26	WFIM Motor 50 - 91	
5AB4	Brain dysfunction	FIM Cognition 19 - 26	WFIM Motor 19 - 49	
5AB5	Brain dysfunction	FIM Cognition 5 - 18	WFIM Motor 39 - 91	
5AB6	Brain dysfunction	FIM Cognition 5 - 18	WFIM Motor 19 - 38	



AN-SNAP V5 switches the order that the FIMTM sub-scale scores (WFIMTM Motor and FIMTM Cognition) are applied as splitting variables for the brain dysfunction impairment type. That is, in V5, brain dysfunction episodes are first grouped by FIMTM Cognition scores and then by WFIMTM Motor scores.

Neurological conditions

There are three 'Neurological condition' classes in AN-SNAP V5 as set out in Table 6.

Table 6. Adult rehabilitation - Neurological condition classes

End-class	Description and thresholds			
Rehabilitation care				
Neurological conditions				
5AC1	Neurological conditions	WFIM Motor 70 - 91		
5AC2	Neurological conditions	WFIM Motor 50 - 69		
5AC3	Neurological conditions	WFIM Motor 19 - 49		

Spinal cord dysfunction

There are three 'Spinal cord dysfunction' classes in AN-SNAP V5 as set out in Table 7.

Table 7. Adult rehabilitation - Spinal cord dysfunction classes

End-class	Description and thresholds	
Rehabilitation care		
Spinal cord dysfunction		
5AD1	Spinal cord dysfunction	WFIM Motor 55 - 91
5AD2	Spinal cord dysfunction	WFIM Motor 37 - 54
5AD3	Spinal cord dysfunction	WFIM Motor 19 - 36



In AN-SNAP V5, age is no longer used as a splitting variable for spinal cord dysfunction episodes.

Amputation of limb

There is one 'Amputation of limb' class in AN-SNAP V5 as set out in Table 8.

Table 8. Adult rehabilitation - Amputation of limb class

End-class	Description and thresholds		
Rehabilitation care			
Amputation of limb	Amputation of limb		
5AE1	Amputation of limb		



In AN-SNAP V5, the amputation of limb episodes are no longer split using age and $WFIM^{TM}$.

Orthopaedic conditions, fractures

There are four 'Orthopaedic conditions, fractures' classes in AN-SNAP V5 as set out in Table 9.

Table 9. Adult rehabilitation - Orthopaedic conditions, fractures classes

End-class	Description and thresholds		
Rehabilitation	Rehabilitation Care		
Orthopaedic	conditions, fractures		
5AH1	Orthopaedic conditions, fractures	WFIM Motor 48 - 91	FIM Cognition 33 - 35
5AH2	Orthopaedic conditions, fractures	WFIM Motor 48 - 91	FIM Cognition 21 - 32
5AH3	Orthopaedic conditions, fractures	WFIM Motor 48 - 91	FIM Cognition 5 - 20
5AH4	Orthopaedic conditions, fractures	weighted FIM Motor 19 - 47	

Orthopaedic conditions, replacements (knee, hip, shoulder) group

There are three new 'Orthopaedic conditions, replacements (knee, hip, shoulder)' classes in AN-SNAP V5 as set out in Table 10.



AN-SNAP V5 introduces a new impairment type group to provide three classes to classify knee, hip and shoulder replacement activity.

Table 10. Adult rehabilitation - Orthopaedic conditions, replacement (knee, hip, shoulder) classes

End-class	Description and thresholds		
Rehabilitation	Rehabilitation care		
Orthopaedic	conditions, replacement (knee, hip, shoulder)		
5A41	Orthopaedic conditions, replacement (knee, hip, shoulder)	WFIM Motor 61 - 91	
5A42	Orthopaedic conditions, replacement (knee, hip, shoulder)	WFIM Motor 45 - 60	
5A43	Orthopaedic conditions, replacement (knee, hip, shoulder)	WFIM Motor 19 - 44	

The new 'Orthopaedic conditions, replacement (knee, hip, shoulder)' impairment type group removes knee, hip and shoulder joint replacement activity from its AN-SNAP V4 grouping in

'Orthopaedic conditions, all others' using AROC codes⁶ to define two impairment types as set out in Table 11.

Table 11. AROC codes for orthopaedic conditions, replacement and orthopaedic conditions, all others

AN-SNAP V5 impairment type group	AROC impairment group	AROC impairment group code	AROC impairment group code description
Orthopaedic conditions, replacement (knee, hip,	Post orthopaedic surgery	8.211	Unilateral hip replacement
shoulder)		8.212	Bilateral hip replacement
		8.221	Unilateral knee replacement
		8.222	Bilateral knee replacement
		8.231	Knee and hip replacement same side
		8.232	Knee and hip replacement different sides
		8.24	Shoulder replacement or repair
Orthopaedic conditions, all others	Post orthopaedic surgery	8.25	Post spinal surgery
	Surgery	8.26	Other orthopaedic surgery
	Soft tissue injury	8.3	Soft tissue injury

Note: Any trailing numbers attached at the end of AROC code have been removed to form a valid AROC class. For instance, an AROC code of 8.2219 was converted to 8.221 to be categorised as a valid AROC code.

Orthopaedic conditions, all other

There are three 'Orthopaedic conditions, all other' classes as set out in Table 12.

Table 12. Adult rehabilitation - Orthopaedic conditions, all other group classes

End-class	Description and thresholds		
Rehabilitation	Rehabilitation care		
Orthopaedic conditions, all other group			
5A21	Orthopaedic conditions, all other	WFIM Motor 57 - 91	
5A22	Orthopaedic conditions, all other	WFIM Motor 41 - 56	
5A23	Orthopaedic conditions, all other	WFIM Motor 19 - 40	

⁶ Australasian Rehabilitation Outcomes Centre (2013) AROC Impairment Coding Guidelines

Cardiac, pain syndromes, and pulmonary

There are three 'Cardiac, pain syndromes, and pulmonary' classes in AN-SNAP V5 as set out in Table 13.

Table 13. Adult rehabilitation - Cardiac, pain syndromes, and pulmonary group classes

End-class	Description and thresholds		
Rehabilitatio	Rehabilitation care		
Cardiac, pair	Cardiac, pain syndromes, and pulmonary		
5A31	Cardiac, pain syndromes, and pulmonary	WFIM Motor 66 - 91	
5A32	Cardiac, pain syndromes, and pulmonary	WFIM Motor 38 - 65	
5A33	Cardiac, pain syndromes, and pulmonary	WFIM Motor 19 - 37	

Major multiple trauma

There are two 'Major multiple trauma' classes in AN-SNAP V5 as set out in Table 13.

Table 14. Adult rehabilitation - Major multiple trauma classes

End-class	Description and thresholds	
Rehabilitation care		
Major multiple trauma		
5AP1	Major multiple trauma	WFIM Motor 51 - 91
5AP2	Major multiple trauma	WFIM Motor 19 - 50



AN-SNAP V5 splits major multiple trauma impairment episodes into a lower and higher functioning class using a weighted FIM^TM Motor Score.

Reconditioning

There are five 'Reconditioning' classes in AN-SNAP V5 as set out in Table 15.

Table 15. Adult rehabilitation - Reconditioning classes

End-class	Description and thresholds		
Rehabilitation care	Rehabilitation care		
Reconditioning			
5AR1	Reconditioning	WFIM Motor 64 - 91	FIM Cognition 29 - 35
5AR2	Reconditioning	WFIM Motor 64 - 91	FIM Cognition 5 - 28
5AR3	Reconditioning	WFIM Motor 48 - 63	FIM Cognition 19 - 35
5AR4	Reconditioning	WFIM Motor 48 - 63	FIM Cognition 5 - 18
5AR5	Reconditioning	WFIM Motor 19 - 47	

All other impairments group

There are three 'All other impairments' classes in AN-SNAP V5 as set out in Table 16.

Table 16. Adult Rehabilitation - All other impairments group classes

End-class	Description and thresholds	
Rehabilitation care		
All other impairment types		
5A91	All other impairments	WFIM Motor 61 - 91
5A92	All other impairments	WFIM Motor 42 - 60
5A93	All other impairments	WFIM Motor 19 - 41

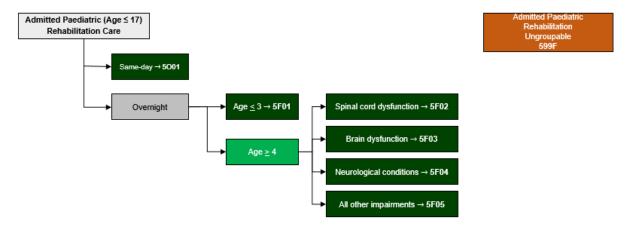
3.2 Paediatric rehabilitation classes

The AN-SNAP V5 admitted paediatric rehabilitation structure is at Figure 3.



There are no changes to the admitted paediatric rehabilitation structure for AN-SNAP V5.7

Figure 3. Paediatric rehabilitation structure



3.2.1 Same-day class

There is one AN-SNAP V5 same-day admitted paediatric rehabilitation class Table 17.

Table 17. Paediatric rehabilitation care - Same-day class

End-class	Description and thresholds	
Rehabilitation care		
Paediatric rehabilitation		
5001	Paediatric same-day rehabilitation	

⁷ The AN-SNAP V4 Final Report and Classification Manual reference an Age Type variable however this variable was never implemented in the Admitted Subacute and Non-acute Hospital Care National Best Endeavours Data Set (primarily due to the small number of relevant patient episodes) and it is not used in AN-SNAP V5.

3.2.2 Overnight classes

There are five overnight 'Paediatric rehabilitation' classes in AN-SNAP V5 as set out in Table 18.

Table 18. Paediatric rehabilitation care - Overnight classes

End class	Description and thresholds
Rehabilitation care	
Paediatric rehabilita	ition
5F01	Rehabilitation, Age <= 3
5F02	Rehabilitation, Age >= 4, Spinal cord dysfunction
5F03	Rehabilitation, Age >= 4, Brain dysfunction
5F04	Rehabilitation, Age >= 4, Neurological conditions
5F05	Rehabilitation, Age >= 4, All other impairments

The final split in the admitted paediatric rehabilitation overnight branch uses groups derived from the patient's primary impairment for rehabilitation episode, as defined according to the Australasian Rehabilitation Outcomes Centre (AROC) code set⁸ (see section 4.3).

The reference table for the derived groups for episodes of paediatric rehabilitation is at **Appendix F - Paediatric rehabilitation impairment groups.**

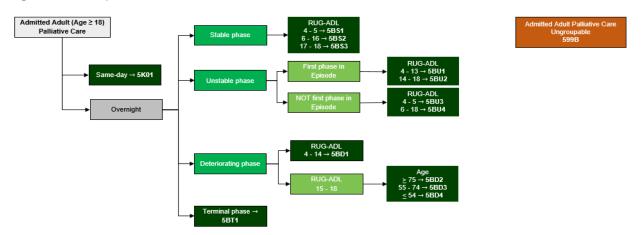
⁸ The AROC impairment code set classifies the primary reason for a patient undergoing a rehabilitation episode of care. See Australian Institute of Health and Welfare, <u>Metadata Online Data Registry (METeOR) identifier 498498</u>; Australasian Rehabilitation Outcomes Centre (2013) <u>AROC Impairment Coding Guidelines.</u>

3.3 Adult palliative care classes

The admitted adult palliative care branch of AN-SNAP V5 is shown in Figure 4: one same-day class and twelve overnight classes.

There are no changes to the admitted adult palliative care structure for AN-SNAP V5.

Figure 4. Adult palliative care structure



3.3.1 Same-day class

There is one AN-SNAP V5 same-day admitted adult palliative care class (Table 19).

Table 19. Adult Palliative care - Same-day class

End-class	-class Description and thresholds	
Palliative care		
5K01	Adult same-day palliative care	

Business rule # 5.0.4 - Determining a same-day palliative care episode

The length of stay for same-day palliative care episodes is determined using the episode start and end date and episode leave days, <u>not</u> the phase start and end date.

3.3.2 Overnight classes

There are twelve AN-SNAP V5 overnight admitted classes for adult palliative care as set out in Table 20.

Table 20. Adult palliative care - Overnight classes

End-class	Description and thresholds			
Palliative care				
Adult palliative care				
5BS1	Stable phase	RUG-ADL 4-5		
5BS2	Stable phase	RUG-ADL 6-16		
5BS3	Stable phase	RUG-ADL 17-18		
5BU1	Unstable phase	First Phase in Episode	RUG-ADL 4-13	
5BU2	Unstable phase	First Phase in Episode	RUG-ADL 14-18	
5UB3	Unstable phase	Not first Phase in Episode	RUG-ADL 4-5	
5UB4	Unstable phase	Not first Phase in Episode	RUG-ADL 6-18	
5BD1	Deteriorating phase	RUG-ADL 4-14		
5BD2	Deteriorating phase	RUG-ADL 15-18	Age >= 75	
5BD3	Deteriorating phase	RUG-ADL 15-18	Age 55-74	
5BD4	Deteriorating phase	RUG-ADL 15-18	Age <= 54	
5BT1	Terminal phase			



A new Resource Utilisation Group-Activities of Daily Living (RUG-ADL) assessment is required each time a patient's palliative care phase changes.⁹

⁹ This requirement is consistent with the Palliative Care Outcomes Collaboration (PCOC) <u>Assessment and Response Protocol</u> and <u>Clinical Manual</u>.

Business rule # 5.0.5 - Determining a palliative care 'First Phase in Episode'

Where there are multiple palliative phases beginning and ending on an episode start day, and only one of those multiple phases is unstable then it is assumed to be the 'First Phase in Episode'.

Where there are multiple phases beginning and ending on an episode start day and more than one of those phases is unstable then the unstable one with the highest RUG-ADL score (greatest dependency) is assumed to be the 'First Phase in Episode'. If there are multiple unstable phases with the same RUG-ADL score either is determined to be the First Phase in Episode and the other is determined to be Not First Phase in Episode.

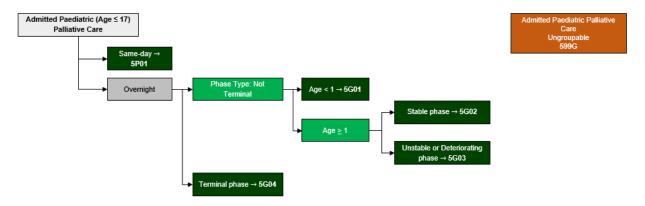
3.4 Paediatric palliative care classes

The AN-SNAP V5 admitted paediatric palliative care structure is shown in Figure 5.



There are no changes to the admitted paediatric palliative care structure for AN-SNAP V5.¹⁰

Figure 5. Paediatric palliative care structure



3.4.1 Same-day class

There is one AN-SNAP V5 same-day admitted paediatric palliative care class (Table 21).

Table 21. Paediatric palliative care - Same-day class

End-class	Description and thresholds	
Palliative care		
Paediatric palliative care		
5P01	Paediatric same-day palliative care	

¹⁰ The AN-SNAP V4 Final Report and Classification Manual reference an Age Type variable however this variable was never implemented in the Admitted Subacute and Non-acute Hospital Care National Best Endeavours Data Set (primarily due to the small number of relevant patient episodes) and it is not used in AN-SNAP V5.

3.4.2 Overnight classes

There are four AN-SNAP V5 overnight admitted classes for paediatric palliative care as set out in Table 22.

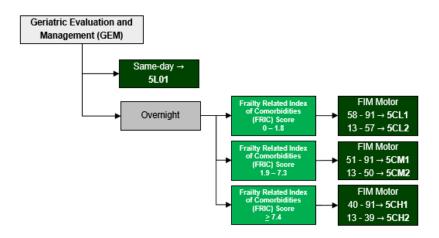
Table 22. Paediatric palliative care classes

End-class	Description and thresholds		
Palliative care			
Paediatric palliative care			
5G01	Phase type: not terminal	Age < 1 year	
5G02	Phase type: not terminal	Age ≥ 1 year	Stable phase
5G03	Phase type: not terminal	Age ≥ 1 year	Unstable or Deteriorating phase
5G04	Terminal phase		

3.5 Geriatric evaluation and management classes

The admitted geriatric evaluation and management (GEM) branch of AN-SNAP V5 consists of one same-day class and six overnight classes (Figure 6).

Figure 6. Geriatric evaluation and management structure



Admitted Geriatric Evaluation and Management (GEM) Ungroupable 599C

AN-SNAP V5 recognises frailty as a contributor to GEM care costs by introducing the Frailty Related Index of Comorbidities (FRIC) as a new splitting variable in the GEM branch – see section 4.7



AN-SNAP V5 no longer uses dementia and/or delirium diagnoses as binary variables in the GEM structure, but these are significant contributors to a patient's FRIC score - see section 4.7 and **Appendix G - Frailty Related Index of Comorbidities diagnoses scores**.

3.5.1 Same-day class

There is one AN-SNAP V5 same-day class for admitted GEM care (Table 23).

Table 23. Geriatric evaluation and management - Same-day class

End-class	Description and thresholds		
Geriatric evaluation	Geriatric evaluation and management		
5L01	Same-day GEM		

3.5.2 Overnight classes

The six AN-SNAP V5 overnight classes for admitted GEM care are as set out in Table 24.

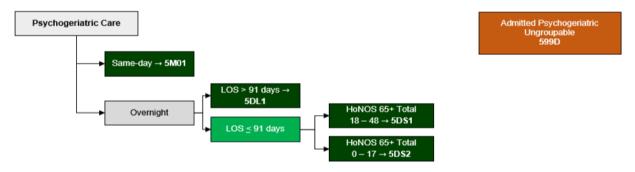
Table 24. Geriatric evaluation and management - Overnight classes

End-class	Description and thresholds		
Geriatric evaluation and management			
5CL1	Frailty Related Index of Comorbidities (FRIC) Score 0 - 1.8	FIM Motor (unweighted) 58 - 91	
5CL2	Frailty Related Index of Comorbidities (FRIC) Score 0 - 1.8	FIM Motor (unweighted) 13 - 57	
5CM1	Frailty Related Index of Comorbidities (FRIC) Score 1.9 - 7.3	FIM Motor (unweighted) 51 - 91	
5CM2	Frailty Related Index of Comorbidities (FRIC) Score 1.9 - 7.3	FIM Motor (unweighted) 13 - 50	
5CH1	Frailty Related Index of Comorbidities (FRIC) Score >= 7.4	FIM Motor (unweighted) 40 - 91	
5CH2	Frailty Related Index of Comorbidities (FRIC) Score >= 7.4	FIM Motor (unweighted) 13 - 39	

3.6 Psychogeriatric classes

The admitted psychogeriatric branch of AN-SNAP V5 consists of one same-day class and three overnight classes (Figure 7).

Figure 7. Psychogeriatric structure



In AN-SNAP V5 a HoNOS 65+ total score replaces the previous use of HoNOS 65+ (Overactive Behaviour, Activities of Daily Living and total score) to split the shorter stay episodes with a length of stay less than or equal to 91 days.

3.6.1 Same-day class

AN-SNAP V5 has one admitted same-day class for psychogeriatric care (Table 25).

Table 25. Psychogeriatric care - Same-day class

End-class	Description and thresholds	
Psychogeriatric care		
5M01	Same-day psychogeriatric care	

3.6.2 Overnight classes

There are three AN-SNAP V5 overnight classes for admitted psychogeriatric care are as set out in Table 26.

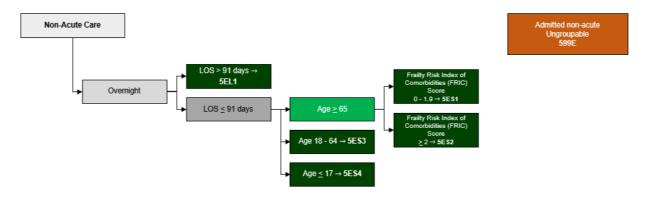
Table 26. Psychogeriatric care - Overnight classes

End class	Description and thresholds		
Psychogeriatric care			
5DL1	Long term care (Length of Stay - LoS > 91 days)		
5DS1	LoS ≤ 91 days HoNOS 65+ Total 18 - 48		
5DS2	LoS ≤ 91 days	HoNOS 65+ Total 0 - 17	

3.7 Non-acute care classes

The AN-SNAP V5 admitted non-acute branch consists of five overnight classes as shown in Figure 8.

Figure 8. Non-acute structure



AN-SNAP V5 introduces a new structure to recognise frailty as a contributor to non-acute care costs. Shorter term episodes (≤ 91 days) continue to use age as the first splitting variable but the RUG-ADL is replaced with the Frailty Related Index of Comorbidities (FRIC) as the secondary split (for the older 65 years of age group only) - see section 4.7

3.7.1 Same-day class

There is no same-day class for non-acute care episodes.

3.7.2 Overnight classes

The five AN-SNAP V5 overnight classes for admitted non-acute care are as set out in Table 27.

Table 27. Non-acute care - Overnight classes

End-class	Description and thresholds		
Non-acute Non-acute			
5EL1	Long-term care (Length of Stay - LoS > 91 days)		
5ES1	Shorter term care LoS ≤ 91 days	Age ≥ 65 years	Frailty Related Index of Comorbidities (FRIC) Score 0 - 1.9
5ES2	Shorter term care LoS ≤ 91 days	Age ≥ 65 years	Frailty Related Index of Comorbidities (FRIC) Score >= 2
5ES3	Shorter term care LoS ≤ 91 days	Age = 18 - 64 years	
5ES4	Shorter term care LoS ≤ 91 days	Age ≤ 17 years	

3.8 Class naming convention

AN-SNAP V5 keeps the same four-character alphanumeric class labelling system, which was established for AN-SNAP V4.

Table 28 summarises the features of the system with further details at <u>Appendix J – Four character end-class labelling system</u>.

Notably, AN-SNAP V5 continues to presents end-classes (in tree diagrams, tables) so that the classes are sequenced according to the severity of functional impairment. For example, bigger fourth character numbers generally indicate more functionally impaired (complex) episodes (according to the last splitting variable).

Table 28. AN-SNAP V5 class naming convention summary

Character position	Character type	Item	
1	Numeric	AN-SNAP version number	
2	Alphabetic	Alphabetic character referring to a combination of:	
		whether the care is adult or paediatric care	
		 the care type (Rehabilitation, palliative care, geriatric evaluation and management, psychogeriatric, and non-acute) 	
		the treatment setting (admitted overnight, admitted same-day, non-admitted)	
	Numeric	Numeric character to indicate error class because the grouping variable is missing.	
3	Alphanumeric	c Alphanumeric code set referring to:	
		low function (weighted Functional Independence Measure - FIM TM)	
		impairment type (single impairment or impairment group)	
		palliative care phase	
		length of stay	
		other characteristics for non-admitted care	
4	Numeric	Numeric character applied to classes sequentially after the first split.	
	Alphanumeric Alphanumeric character to indicate error class because:		
		episode is ungroupable	
		there is an error with episode type or care type.	

4. The AN-SNAP V5 variables

Australian National Subacute and Non-Acute Patient Classification (AN-SNAP) Version 5.0 (V5) uses a mix of categorical and numeric variables to classify episodes of subacute care (or phases in the case of palliative care). This chapter introduces the key variables; and establishes expectations (practice guidance) to ensure they are determined consistently when they are being used for AN-SNAP V5.

Note that this is not intended to be an exhaustive reference about all aspects of the clinical assessment score variables. Readers should note references for sources of further information about these tools.

4.1 Care types

An admitted care type is the overall nature of a clinical service provided to an admitted patient during an episode of care.¹¹

AN-SNAP V5 classifies encounters of five admitted care types: rehabilitation care, palliative care, geriatric evaluation and management (GEM) care, psychogeriatric care, and non-acute care (also known as maintenance care).

Practice guidance

Only one type of care can be assigned at a time. In cases when a patient is receiving multiple types of care, the care type that best describes the primary clinical purpose or treatment goal should be assigned.

Subacute care types are assigned by the clinician responsible for the management of the care, based on clinical judgements as to the primary clinical purpose of the care to be provided the specialised expertise of the clinician who will be responsible for the management of the care. At the time subacute care type assignment, a multidisciplinary management plan may not be in place but the intention to prepare one should be known to the clinician assigning the care type.

The clinician responsible for the management of care may not necessarily be located in the same facility as the patient. In these circumstances, a clinician at the patient's location may also have a role in the care of the patient; the expertise of this clinician does not affect the assignment of care type. 12

4.2 Functional Independence Measure

Functional impairment is a prominent cost driver for rehabilitation care; and all AN-SNAP classification versions have used the Functional Independence Measure (FIM™) instrument as the measure of patient function for the rehabilitation and GEM care types.

¹¹ Australian Institute of Health and Welfare, Metadata Online Data Registry (METeOR) identifier 711010

¹² See Australian Institute of Health and Welfare, <u>Metadata Online Data Registry (METeOR) identifier 711010</u> Data element attributes - collection and usage attributes - Guide for use.

The FIMTM instrument is a basic indicator of severity of disability. It consists of 18 items divided into two major groups: Motor (items 1 - 13) and Cognitive (items 14 - 18).

Table 29. FIM™ items and subscales - Motor and cognition

Number	Item	Subscale
1	Eating	
2	Grooming	
3	Bathing	
4	Dressing upper body	
5	Dressing lower body	
6	Toileting	
7	Bladder management	Motor
8	Bowel management	
9	Transfer bed/chair/wheelchair	
10	Transfer toilet	
11	Transfer bath/shower	
12	Locomotion	
13	Stairs	
14	Comprehension	
15	Expression	
16	Social interaction	Cognition
17	Problem solving	1
18	Memory	1

Each FIMTM item is assessed using a seven point scale ranging from '1' for total assistance required to '7' for complete independence.

Table 30. FIM™ item scores

Score	Description
1	Total assistance
2	Maximal assistance
3	Moderate assistance
4	Minimal assistance
5	Supervision or setup
6	Modified independence
7	Complete independence

4.2.1 FIM Motor weights

AN-SNAP V5 continues the process established in AN-SNAP Version 4.0 (V4) to apply a weighting to each of the 13 FIM Motor assessment items depending on the relative impact of each item's score on the cost for caring for different types of rehabilitation patients.

With a much greater volume and coverage of data available to develop AN-SNAP V5, the Independent Hospital Pricing Authority has been able to update all the weightings (and introduce a weighting for the 'Major multiple trauma' impairment type which was effectively unweighted in

AN-SNAP V4) to make further improvements in how well the classification explains variation in costs.

The updated impairment-specific FIMTM item weights for admitted adult rehabilitation overnight classes are detailed at <u>Appendix H - Impairment-specific FIMTM Motor item weights.</u>

Table 42. Impairment group-specific FIM™ item weights for admitted adult rehabilitation overnight classes

Truncated AROC impairment code	Impairment group	FIM 1 Eating	FIM 2 Grooming	FIM 3 Bathing	FIM 4 Dressing upper body	FIM 5 Dressing lower body	FIM 6 Toileting
1	Stroke	0.967	0.994	1.107	0.864	0.972	1.076
2	Brain dysfunction	1.244	1.106	1.063	0.742	0.748	0.996
3	Neurological conditions	1.047	1.039	1.125	0.81	0.983	1.083
4	Spinal cord dysfunction	1.12	0.828	1.441	0.502	1.244	1.332
5	Amputation of limb	0.406	0.479	1.260	0.854	0.938	1.254
6	Arthritis	1.185	1.159	1.204	0.657	0.821	1.082
7	Pain syndromes	0.956	1.050	1.125	0.499	0.684	1.034
8.1	Orthopaedic - fractures	0.798	0.881	1.090	0.463	0.933	1.249
8.2	Orthopaedic Post Surgery	1.035	1.107	1.134	0.436	0.704	1.144
8.3	Orthopaedic Soft Tissue Injury	1.035	1.107	1.134	0.436	0.704	1.144
9	Cardiac	0.956	1.050	1.125	0.499	0.684	1.034
10	Pulmonary	0.956	1.050	1.125	0.499	0.684	1.034
11	Burns	1.185	1.159	1.204	0.657	0.821	1.082
12	Congenital deformities	1.185	1.159	1.204	0.657	0.821	1.082
13	Other disabling impairments	1.185	1.159	1.204	0.657	0.821	1.082
14	Major multiple trauma	1.174	1.097	1.08	0.588	0.682	1.044
15	Developmental disabilities	1.185	1.159	1.204	0.657	0.821	1.082
16	Reconditioning restorative	0.809	0.894	1.121	0.563	0.857	1.145

Table 43. Impairment group-specific FIM™ item weights for admitted adult rehabilitation overnight classes (continued)

Truncated AROC impairment code	Impairment group	FIM 7 Bladder mgmt	FIM 8 Bowel management	FIM 9 Transfer bed / chair / wheelchair	FIM 10 Transfer toilet	FIM 11 Transfer bath / shower	FIM 12 Loco- motion	FIM 13 Stairs*
1	Stroke	0.856	0.890	1.127	1.087	1.103	0.957	1.000
2	Brain dysfunction	0.899	1.075	1.061	1.057	1.073	0.937	1.000
3	Neurological conditions	0.839	0.892	1.172	1.071	1.067	0.872	1.000
4	Spinal cord dysfunction	1.003	1.051	1.229	0.979	1.071	0.199	1.000
5	Amputation of limb	0.699	0.890	1.455	1.391	1.409	0.964	1.000
6	Arthritis	0.926	0.980	1.164	1.061	1.072	0.689	1.000
7	Pain syndromes	0.991	0.967	1.354	1.265	1.274	0.801	1.000
8.1	Orthopaedic - fractures	0.873	0.979	1.462	1.221	1.260	0.790	1.000
8.2	Orthopaedic Post surgery	0.948	1.068	1.357	1.199	1.238	0.631	1.000
8.3	Orthopaedic Soft tissue injury	0.948	1.068	1.357	1.199	1.238	0.631	1.000
9	Cardiac	0.991	0.967	1.354	1.265	1.274	0.801	1.000
10	Pulmonary	0.991	0.967	1.354	1.265	1.274	0.801	1.000
11	Burns	0.926	0.980	1.164	1.061	1.072	0.689	1.000
12	Congenital deformities	0.926	0.980	1.164	1.061	1.072	0.689	1.000
13	Other disabling impairments	0.926	0.980	1.164	1.061	1.072	0.689	1.000
14	Major multiple trauma	1.039	1.184	1.106	1.09	1.088	0.829	1.000
15	Developmental disabilities	0.926	0.980	1.164	1.061	1.072	0.689	1.000
16	Reconditioning restorative	0.838	0.886	1.385	1.292	1.297	0.913	1.000

Notes: FIM13 (Stairs) unweighted in AN-SNAP V5 due to the majority of episodes across various impairments groups having a FIM13 (stairs) score of 1 (for example, 94.74% of episodes within Amputation of limb have a FIM13 (stairs) score of 1).

Weighted FIM[™] Motor Groups

AN-SNAP V5 retains the same groups established in AN-SNAP V4 to ensure adequate episodes for the FIMTM Motor weight calculation. Impairments that are grouped together in the classification adopted the same FIMTM Motor weights. The impairment types are outlined in Table 3 and are categorised within the following groupings:

Group 1	Arthritis, burns, congenital deformities, other disabling impairments and developmental disabilities	
Group 2	Pain syndromes, cardiac and pulmonary	
Group 3	Orthopaedic fractures, post-surgery and soft tissue injury	

All other impairment types were treated independently due to a sufficient volume of episodes used to determine the FIM Motor weights.

Group 1 captures the impairment groups with low episode volume to obtain a meaningful set of FIMTM Motor weights. Group 2 was developed after a clinical subgroup recommendation of combining Pain, Cardiac and Pulmonary impairment types into a single class in AN-SNAP V4. This recommendation was supported by subsequent statistical analysis. Group 3 captures all the orthopaedic impairment types due to the clinical similarity of treatment and conditions.

A weighted FIMTM Motor score is calculated by multiplying each FIMTM item score by the corresponding weight for the impairment group of the record.

The FIM weightings do not impact the clinical FIMTM assessment - clinicians should collect and use FIMTM according to the established protocols. The weighted FIMTM Motor score is calculated automatically in the software that groups episodes to the respective classes, so there is no impact on day-to-day clinical practice.

4.2.2 Practice guidance

Patient function is assessed using the FIM™ instrument at the start of a rehabilitation episode of care and at the end of a rehabilitation episode of care. The timing of the FIM™ admission scoring is important because clinically, a person's functional capacity changes upon commencement of a program of rehabilitation.

Admission assessment is collected within 72 hours of the start of a rehabilitation episode. Admission data should be collected over 24 hours as close to admission to the rehabilitation ward as possible. The FIM™ assessment is undertaken by direct observation and the score should reflect the actual performance observed.

Discharge assessment is collected within 72 hours prior to the end of a rehabilitation episode (noting that a discharge FIM assessment is not used for classification but is considered good practice to track those changes which are a key outcome measure of rehabilitation episodes)¹³

All clinicians undertaking assessments need to be trained in the use of the FIM™ instrument, and must sit a credentialing exam every two years to ensure consistent and accurate data.

¹³ A discharge FIM score is noted as a mandatory data collection item in the <u>Australian Rehabilitation Outcomes Centre Inpatient</u> <u>Data Dictionary V4 (June 2019)</u>

AROC holds the territory licence for the use of the FIM™ (and WeeFIM®) instruments in Australia, and is the national certification and training centre for these tools.

4.3 Rehabilitation impairment types (Australasian Rehabilitation Outcomes Centre)

The Australasian Rehabilitation Outcomes Centre (AROC) Impairment codes are used to classify rehabilitation episodes into like clinical groups. The Australian codes are based on the Uniform Data System for Medical Rehabilitation (UDSMR) codes.

The AROC impairment codes used for AN-SNAP V5 are available provided at <u>Appendix I - Australasian Rehabilitation Outcomes Centre Impairment Codes – Version 4.0 dataset (July 2012)</u>.

4.3.1 Practice guidance

The AROC impairment code should reflect the primary reason for the current episode of rehabilitation care and be selected according to the AROC impairment coding guidelines.¹⁴

4.4 Health of the Nation Outcome Scale 65+

The Health of the Nation Outcome Scale 65+ (HoNOS 65+) is a 12-item clinician-rated measure designed by the Royal College of Psychiatrists comprising twelve simple scales measuring behaviour, impairment, symptoms and social functioning for older consumers aged 65 years and older 15 as summarised in Table 31.

Table 31. Health of the Nation Outcome Scale 65+ items

Number	Item	
1	Behavioural disturbance	
2	Non-accidental self-injury	
3	Problem drinking or drug use	
4	Cognitive problems	
5	Problems related to physical illness or disability	
6	Problems associated with hallucinations or delusions	
7	Problems with depressed mood	
8	Other mental and behavioural problems	
9	Problems with relationships	
10	Problems with activities of daily living	
11	Problems with living conditions	
12	Problems with occupation and activities	

Each item is rated on a five-point item of severity (zero to four) as set out in Table 32.

¹⁴ Australasian Rehabilitation Outcomes Centre (2013) AROC Impairment Coding Guidelines.

¹⁵ See Royal College of Psychiatrists at https://www.rcpsych.ac.uk/events/in-house-training/health-of-nation-outcomes-scales

Table 32. HoNOS 65+ scores

Score	Description	
0	No problem with the period rated	
1	Minor problem requiring no formal action	
2	Mild problem. Should be recorded in a care plan or other case record.	
3	Problem of moderate severity	
4	Severe to very severe problem	

4.5 Palliative care phase of illness

The palliative care phase identifies a clinically meaningful period in a patient's condition. The palliative care phase is determined by a holistic clinical assessment which considers the needs of the patients and their family and carers.

An episode of admitted patient palliative care may comprise a single phase or multiple phases, depending on changes in the patient's condition. Phases are not sequential and a patient may move back and forth between phases within the one episode of admitted patient palliative care.

The palliative care phases are stable, unstable, deteriorating, terminal and bereavement.

The bereavement phase, however, is not used in AN-SNAP V5. In previous versions of AN-SNAP, the bereavement phase formed its own class. In practice, the use of this class was problematic when reconciling AN-SNAP and other information systems where an AN-SNAP episode remains open for days or weeks after the death of a patient. The AN-SNAP V4 clinical committee agreed that bereavement support services need to be recognised but that they are better addressed through other mechanisms such as pricing for episodes where a patient dies rather than through the classification itself. On this basis, the bereavement class was removed from AN-SNAP V4, and this remains so for AN-SNAP V5.

4.5.1 Practice guidance

The palliative care phase start date is to be recorded at the commencement of the episode of admitted patient palliative care and at the commencement of every subsequent palliative care phase thereafter in the same admitted patient episode.

The palliative care phase end date is to be recorded at the completion of the palliative care phase and at the completion of every subsequent phase thereafter in the same admitted patient palliative care episode.

Protocols for palliative care phase of care should be consistently applied. When patients are assessed routinely, clinicians will identify a change in patient's needs or a change in the family or carer needs impacting on the patient's care. This may trigger a phase change. Further information about how to assign a palliative care phase is available on the Palliative Care
Outcomes Collaboration (PCOC) website (including a structured phase algorithm to help guide healthcare professionals to determine the correct phase).

¹⁶ Green J, Gordon R, Blanchard M, Kobel C and Eager K. (2015), Development of AN-SNAP Version 4: Final Report, Centre for Health Service Development, University of Wollongong.

4.6 Resource Utilisation Group - Activities of Daily Living

The Resource Utilisation Group - Activities of Daily Living (RUG-ADL)¹⁷ is a four-item scale that measures the motor function of a patient for four activities of daily living:

- bed mobility
- toileting
- transfers
- eating.

The scoring scale for bed mobility, toileting and transfers is as per Table 33.

Table 33. RUG-ADL scoring for bed mobility, toileting and transfers

Score	Description	
1	Independent or supervision only	
3	Limited physical assistance	
4	Other than two person physical assist	
5	Two or more person physical assist	

^{*}Note a score of 2 is not valid for bed mobility, toileting or transfers.

The scoring scale for eating is set out in Table 34.

Table 34. RUG-ADL scoring for eating

Score	Description
1	Independent or supervision only
2	Limited assistance
3	Extensive assistance / total dependence / tube fed

AN-SNAP V5 uses the sum of all four items, collected at the beginning of the episode of care (or phase of care in the case of palliative care), to group the encounter. The total RUG-ADL score will be a value between 4 (person is independent) and 18 (person required full assistance of two people).

4.7 The Frailty Related Index of Comorbidities

Frailty is a decline in multiple physiological systems that makes a person more vulnerable to poor outcomes from minor stressor events. 18

To recognise that frailty is a cost driver for sub-acute care AN-SNAP V5 introduces a new derived variable, the Frailty Related Index of Comorbidities (FRIC). This new variable is only used to classify episodes of GEM and non-acute care.

¹⁷ Fries B, Schneider, D et al. (1994) Refining a casemix measure for nursing homes. Resource Utilisation Groups (RUG-III). Medical Care, 32, 668 - 685.

¹⁸ Adapted from Clegg A, Young J, Iliffe S, Rikkert M, Rockwood, K. (2013) Frailty in elderly people, Lancet; 381: 752-62.

The FRIC is not a clinical measure of frailty. Rather, it is a statistically useful score that allows the classification to better explain costs for GEM and non-acute care than AN-SNAP V4.

The FRIC score is derived from the primary and additional patient diagnosis codes that have been assigned for that episode of care. A total score is summed from the individual diagnosis scores calculated according to the table at Appendix G - Frailty Related Index of Comorbidities diagnoses scores.

Further information about the FRIC, how it has been developed to be fit for activity based funding purposes, and the reasons for its adoption in AN-SNAP V5 are available in the <u>Australian</u> National Subacute and Non-Acute Patient Classification Version 5.0 - Final Report¹⁹.

¹⁹ Independent Hospital Pricing Authority (2021) Development of the Australian National Subacute and Non-Acute Patient Classification Version 5.0 - Final Report.

5. Grouping episodes using AN-SNAP V5

The Australian National Subacute and Non-Acute Patient Classification (AN-SNAP) Version 5.0 (V5) classification is designed to group subacute and non-acute episodes and palliative care phases in admitted overnight and admitted same-day settings. The Independent Hospital Pricing Authority (IHPA) has developed software, known as the SNAP5Grouper, to group records in a data file according to the AN-SNAP V5 classification.²⁰ This section outlines how the classification is applied for the data grouping process.

The SNAP5Grouper software (in both application and command line interface formats) and associated user manual is available on the IHPA website.

5.1 Overview of the grouping process

The process for grouping records using AN-SNAP V5 is summarised at Figure 9. Further detail about the grouping process and logic is available in the AN-SNAP V5 logic flow²¹ on the **IHPA** website.

²⁰ To be released at https://www.ihpa.gov.au/what-we-do/subacute-and-non-acute-care when available

²¹ Independent Hospital Pricing Authority (February 2022 expected release) Australian National Subacute and Non Acute Patient Classification Version 5.0 Classification logic flow

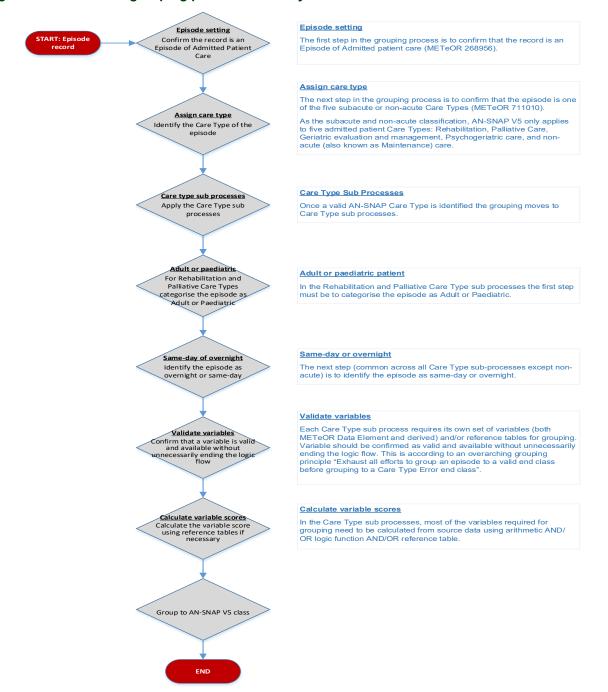


Figure 9. AN-SNAP V5 grouping process summary

5.2 Unit of counting

AN-SNAP groups using two counting units:

- rehabilitation, geriatric evaluation and management, psychogeriatric and non-acute care encounters are grouped at episode level
- palliative care encounters are grouped at palliative care phase level.

5.3 Principles for grouping

The following principles apply for the AN-SNAP grouping process (and are reflected in the grouper software code).

5.3.1 Grouping principle #1

An episode or phase should only be grouped to an error class on the basis of a missing variable if, and only if, that variable is required to group that particular episode or phase.

For example, an adult overnight rehabilitation episode with higher weighted FIM^{TM} (\geq 19) for an orthopaedic conditions, fracture with a missing FIM^{TM} cognition item should only group to 599A if the weighted FIM is 48 - 91. If the Weighted FIM^{TM} is 19 - 47 then the episode can, and should be grouped to its proper 5AH4 class despite the missing FIM cognition score.

5.3.2 Grouping principle #2

Where a number with a decimal requires rounding to determine whether it satisfies a variable threshold, standard decimal rounding conventions apply except for the WFIMTM Motor score threshold for the overnight higher complexity episode split as specified in **Business rule # 5.0.3**.

Appendix A - Summary of changes

Table 35. Comparing Australian National Subacute and Non-Acute Patient Classification Version 4.0 and Version 5.0

Feature	Summary of AN-SNAP V5 changes from AN-SNAP V4
Overarching branches	
Two overarching branches	No change
Admitted patient episodes (both overnight and same-day) and non-admitted episodes (outpatients and community) ²²	
Care types	
Five care types	No change
Rehabilitation, palliative care, geriatric evaluation and management (GEM), psychogeriatric, non-acute	
Rehabilitation care type	
Four variables	No change
Impairment type, Functional Impairment Measure TM (FIM TM) Motor score – weighted (WFIM TM), FIM TM Cognition score, age	
Within care type splits	New impairment type group created: Joint replacement activity removed from the Orthopaedic conditions, all others group to create a new group – Orthopaedic conditions, replacement (knee, hip, shoulder)
	Revised the set of WFIM TM Motor impairment-specific weights
	Change the splitting variables, the order of splitting variables, or the composition of groups, for seven impairment types
	Change the thresholds used for splitting variables (WFIM TM Motor score thresholds; FIM TM Cognition thresholds; Age thresholds)

²² The non-admitted branch of AN-SNAP V4 is not used by the Independent Hospital Pricing Authority for activity based funding and was out of the scope of the project - no changes have been made.

Feature	Summary of AN-SNAP V5 changes from AN-SNAP V4					
Palliative care type						
Three variables Palliative care phase, Resource Utilisation Groups – Activities of Daily Living (RUG-ADL) total score, age	No changes proposed					
Within care type splits	No changes proposed					
GEM care type						
Two variables FIM [™] Motor score, dementia and/or delirium flag (ICD-10-AM diagnosis)	Frailty Related Index of Comorbidities (FRIC) introduced calculated using ICD-10-AM codes as proxy markers of frailty (including dementia and delirium codes) Dementia and/or delirium flag (ICD-10-AM diagnosis) removed					
Within care type splits	Change the order of splitting variables - Frailty Related Index of Comorbidities (FRIC) to be applied first followed by the FIM TM Motor score Change the thresholds used for splitting variable (FIM TM Motor score thresholds)					
Psychogeriatric care type						
Two variables Length of stay - Long term care > 91 days, Health of the Nation Outcome Scale 65+ (HoNOS 65+) - Overactive Behaviour, Activities of Daily Living and Total Score	HoNOS 65+ (Overactive Behaviour, Activities of Daily Living and total score) replaced with HoNOS 65+ total score only					
Within care type splits	Within care split changes as a result of adopting HoNOS 65+ total score in place of HoNOS 65+ sub scores					
Non-acute care type						
Three variables Length of stay – Long-term care > 91 days, Age, RUG-ADL	RUG-ADL removed Frailty Related Index of Comorbidities (FRIC) introduced (for Age group ≥ 65 years only) calculated using ICD-10-AM codes as proxy markers of frailty					
Within care type splits	Change the thresholds used for splitting variable - Age thresholds splitting the Short Term Care group (length of stay ≤ 91 days)					

Appendix B - Definitions

This Appendix provides the definitions of variables and other concepts that underpin AN-SNAP V5.

Metadata Online Data Registry (METeOR) references are correct as at the time of publication. Readers should always consider any *Superseded* related metadata relationships when cross-referencing with METeOR identifiers.

Table 36. AN-SNAP V5 definitions

Term	Definition	Metadata Online Data Registry (METeOR) reference(s)	Other source(s)
Admission	The process whereby the hospital accepts responsibility for the patient's care and/or treatment. Admission follows a clinical decision based upon specified criteria that a patient requires same-day or overnight care or treatment. An admission may be formal or statistical.	METeOR identifier 327206	NA
	Formal admission:		
	The administrative process by which a hospital records the commencement of treatment and/or care and/or accommodation of a patient.		
	Statistical admission:		
	The administrative process by which a hospital records the commencement of a new episode of care, with a new care type, for a patient within one hospital stay		
Age	For the purposes of AN-SNAP V5, age is defined at the age of a person on the first day of a subacute or non-acute episode.	METeOR identifier 303794	NA
Care type The overall nature of a clinical service provided to an admitted patient during an episode of care (admitted care).		METeOR identifier 713748 METeOR identifier 711010	NA
Episode of admitted patient care between a formal or statistical admission and a formal or statistical subacute or non-acute care The period of admitted patient care between a formal or statistical admission and a formal or statistical separation, characterised by only one of the four subacute care types or the non-acute (maintenance) care type.		METeOR identifier 268956	NA
Episode start - admitted subacute or non-acute care	An episode of subacute care begins on the day that the medical record is documented with evidence that the person meets the criteria for the subacute or non-acute care types. This may be the same as the date the person was admitted to hospital or a date during the hospital stay.	METeOR identifier 713748 METeOR identifier 711010 METeOR identifier 268956 METeOR identifier 327206	NA

Term	Definition	Metadata Online Data Registry (METeOR) reference(s)	Other source(s)
Episode end - admitted subacute care	An episode of subacute care ends when either: The principal clinical purpose of the care changes and the patient no longer meets the criteria for classification to that care type or The patient is formerly separated from the hospital.	METeOR identifier 713748 METeOR identifier 711010 METeOR identifier 268956 METeOR identifier 327268	NA
Episode Length of Stay (LoS)	For the purposes of AN-SNAP V5 the length of stay of an admitted episode is the length of stay of the episode, excluding leave days, measured in days.	METeOR identifier 269422	NA
Functional Independence Measure (FIM TM) Motor score (weighted)	An AN-SNAP V5 classification variable derived by applying a weighting (see Appendix H - Impairment-specific FIMTM Motor item weights) to each of the thirteen Functional Independence Measure items of the Motor Subscale and then summing all the weighted scores.	METeOR identifier 717982 METeOR identifier 495857	Appendix H - Impairment- specific FIMTM motor item weights
Geriatric evaluation and management	Geriatric evaluation and management is care in which the primary clinical purpose or treatment goal is improvement in the functioning of a patient with multidimensional needs associated with medical conditions related to ageing, such as tendency to fall, incontinence, reduced mobility and cognitive impairment. The patient may also have complex psychosocial problems. Geriatric evaluation and management is always: • delivered under the management of or informed by a clinician with specialised expertise in geriatric evaluation and management, and • evidenced by an individualised multidisciplinary management plan, which is documented in the patient's medical record that covers the physical, psychological, emotional and social needs of the patient and includes negotiated goals within indicative time frames and formal assessment of functional ability. Geriatric evaluation and management excludes care which meets the definition of mental health care.	MeTeOR identifier 711010	NA

Term	Definition	Metadata Online Data Registry (METeOR) reference(s)	Other source(s)
Maintenance care	See Non-acute care.	NA	NA
Multidisciplinary care	For the purposes of assignment to an AN-SNAP class, 'multidisciplinary care' is defined as services provided jointly by a team that consists of more than one professional discipline. This team generally includes allied health, nursing and medical practitioners.	N/A	NA
	If an episode of subacute care doesn't meet this definition then is single discipline care and should not be classified using AN-SNAP.		
Multidisciplinary management plan	A multidisciplinary management plan comprises a series of documented and agreed initiatives or treatments (specifying program goals, actions and timeframes) which has been established through multidisciplinary consultation and consultation with the patient and/or carers.	METeOR identifier 711010, Collection and usage attributes, Guide for use.	NA
Non-acute care	Non-acute care (sometimes known as Maintenance care) is care in which the primary clinical purpose or treatment goal is support for a patient with impairment, activity limitation or participation restriction due to a health condition. Following assessment or treatment the patient does not require further complex assessment or stabilisation. Patients with a care type of maintenance care often require care over an indefinite period.	METeOR identifier 711010	NA
	Maintenance care excludes care which meets the definition of mental health care.		
Palliative care	Palliative care is care in which the primary clinical purpose or treatment goal is optimisation of the quality of life of a patient with an active and advanced life-limiting illness. The patient will have complex physical, psychosocial and/or spiritual needs.	METeOR identifier 711010	NA
	Palliative care is always:		
	delivered under the management of or informed by a clinician with specialised expertise in palliative care, and		
	 evidenced by an individualised multidisciplinary assessment and management plan, which is documented in the patient's medical record, that covers the physical, psychological, emotional, social and spiritual needs of the patient and negotiated goals. 		
	Palliative care excludes care which meets the definition of mental health care.		

Term	Definition	Metadata Online Data Registry (METeOR) reference(s)	Other source(s)
Palliative care phase	The palliative care phase describes a clinically meaningful period of the patient's illness within an episode. The palliative care phase is determined by a holistic clinical assessment which considers the needs of the patient and their family and carers. There are five phases in the palliative care phase assessment: 1. Stable 2. Unstable 3. Deteriorating 4. Terminal 5. Bereaved (post death support) The fifth phase 'bereaved' is not used in AN-SNAP V5.	METEOR identifier 681549 METEOR identifier 681029	Palliative Care Outcomes Collaboration (PCOC) (Nov 2012) PCOC Version 3.0 Dataset Data Dictionary and Technical Guidelines Document Version 1.2.0
Palliative care phase end date	The date on which an admitted patient completes a palliative care phase.	METeOR identifier 681040	
Palliative care phase start date	The date on which an admitted patient commences a palliative care phase. The commencement date is the date on which an admitted palliative care patient commences a new palliative care phase type. Subsequent phase start dates are equal to the previous phase end date.	METeOR identifier 681043	
Psychogeriatric care	Psychogeriatric care is care in which the primary clinical purpose or treatment goal is improvement in the functional status, behaviour and/or quality of life for an older patient with significant psychiatric or behavioural disturbance, caused by mental illness, an age-related organic brain impairment or a physical condition.	METeOR identifier 711010	NA
	Psychogeriatric care is always:		
	 delivered under the management of or informed by a clinician with specialised expertise in psychogeriatric care, and 		
	 evidenced by an individualised multidisciplinary management plan, which is documented in the patient's medical record, that covers the physical, psychological, emotional and social needs of the patient and includes negotiated goals within indicative time frames and formal assessment of functional ability. 		
	Psychogeriatric care is not applicable if the primary focus of care is acute symptom control.		
	Psychogeriatric care excludes care which meets the definition of mental health care.		

Term	Definition	Metadata Online Data Registry (METeOR) reference(s)	Other source(s)
Rehabilitation care	Rehabilitation care is care in which the primary clinical purpose or treatment goal is improvement in the functioning of a patient with an impairment, activity limitation or participation restriction due to a health condition. The patient will be capable of actively participating. Rehabilitation care is always:	METeOR identifier 711010	NA
	delivered under the management of or informed by a clinician with specialised expertise in rehabilitation, and		
	 evidenced by an individualised multidisciplinary management plan, which is documented in the patient's medical record, that includes negotiated goals within specified time frames and formal assessment of functional ability. 		
	Rehabilitation care excludes care which meets the definition of mental health care.		
Rehabilitation impairment type group	An AN-SNAP V5 classification variable derived by applying one of three mapping reference tables to the Australasian Rehabilitation Outcomes Centre (AROC) code set describing the primary type of patient impairment in a rehabilitation episode (see Appendix E - Adult rehabilitation impairment groups (Weighted FIM™ Motor Score ≥ 19), or Appendix F - Paediatric rehabilitation impairment groups according to the episode characteristics).	METEOR identifier 498498	Appendix D - Adult rehabilitation impairment groups (Weighted FIMTM Motor Score 13-18) Appendix E - Adult rehabilitation impairment groups (Weighted FIM™ Motor Score ≥ 19) Appendix F - Paediatric rehabilitation impairment groups Australasian Rehabilitation Outcomes Centre (2013) AROC Impairment Coding Guidelines
Same-day admitted care	The care provided to a same-day patient who is admitted and separated from the hospital on the same date.	METeOR identifier 373961	NA

Term	Definition	Metadata Online Data Registry (METeOR) reference(s)	Other source(s)
Separation	The process by which an episode of care for an admitted patient ceases. A separation may be formal or statistical. Formal separation: The administrative process by which a hospital records the cessation of treatment and/or care and/or accommodation of a patient. Statistical separation: The administrative process by which a hospital records the cessation of an episode of care for a patient within the one hospital stay.	METeOR identifier 327268	NA
Subacute care	Subacute care is specialised multidisciplinary care in which the primary need for care is optimisation of the patient's functioning and quality of life. A person's functioning may relate to their whole body or a body part, the whole person, or the whole person in a social context, and to impairment of a body function or structure, activity limitation and/or participation restriction. Subacute care comprises the defined care types of rehabilitation, palliative care, geriatric evaluation and management and psychogeriatric care.	METeOR identifier 711010 - Data Element Attributes - Collection and usage attributes - Guide for use	NA

Appendix C - End classes

Table 37 provides a complete list of the valid (non-error) AN-SNAP V5 classification end classes along with the splitting variables and thresholds. Further information about end-classes such as average cost and length of stay is available in the AN-SNAP V5 Final Report.

Table 37: Complete list of AN-SNAP V5 end-classes

AN- SNAP V5 end class	Description and thresholds					
Rehabilitati	ion care					
Low WFIM	– Brain, spine, major m	nultiple trauma	(MMT), burns			
5AZ1	Weighted FIM Motor s	score 13-18	Brain, spine, MMT, bu	ırns	Age >= 59	
5AZ2	Weighted FIM Motor s	score 13-18	Brain, spine, MMT, bu	ırns	Age 18 - 58	
Low WFIM	– All other impairment	types				
5AZ3	Weighted FIM Motor s	score 13-18	All other impairments	A	Age >= 79	
5AZ4	Weighted FIM Motor s	score 13-18	All other impairments	A	Age 18 - 78	
Stroke						
5AA1	Stroke	Weighted FII	M Motor 63 - 91	FIM	Cognition 30 - 35	
5AA2	Stroke	Weighted FII	M Motor 63 - 91	FIM	Cognition 21 - 29	
5AA3	Stroke	Weighted FII	M Motor 63 - 91	FIM	Cognition 5 - 20	
5AA4	Stroke	Weighted FII	M Motor 44 - 62	FIM	Cognition 18 - 35	
5AA5	Stroke	Weighted FII	M Motor 44 - 62	FIM	Cognition 5 - 17	
5AA6	Stroke	Weighted FII	M Motor 19 - 43	Age	>= 80	
5AA7	Stroke	Weighted FII	M Motor 19 - 43	Age	67 - 79	
5AA8	Stroke	Weighted FII	M Motor 19 - 43	Age	18 - 66	
Brain dysfu	Brain dysfunction					
5AB1	Brain dysfunction	FIM Cognitio	n 27 - 35	Weig	ghted FIM Motor 59 - 91	
5AB2	Brain dysfunction	FIM Cognition 27 - 35			ghted FIM Motor 19 - 58	
5AB3	Brain dysfunction	FIM Cognition 19 - 26			phted FIM Motor 50 - 91	
5AB4	Brain dysfunction	FIM Cognition 19 - 26			ghted FIM Motor 19 - 49	
5AB5	Brain dysfunction	FIM Cognitio	n 5 - 18	Weig	phted FIM Motor 39 - 91	

AN- SNAP V5 end class	Description and thresholds					
5AB6	Brain dysfunction	FIM C	Cognitio	n 5 - 18	Weighted FI	M Motor 19 - 38
Neurologic	al conditions					
5AC1	Neurological condition	าร	Weighte	ed FIM Motor 70 - 91		
5AC2	Neurological condition	ns	Weighte	ed FIM Motor 50 - 69		
5AC3	Neurological condition	ns	Weighte	ed FIM Motor 19 - 49		
Spinal cord	d dysfunction					
5AD1	Spinal cord dysfunction	on	Weighte	ed FIM Motor 55 - 91		
5AD2	Spinal cord dysfunction	on	Weighte	ed FIM Motor 37 - 54		
5AD3	Spinal cord dysfunction	on	Weighte	ed FIM Motor 19 - 36		
Amputation	n of limb					
5AE1	Amputation of limb					
Orthopaed	ic conditions, fractures					
5AH1	Orthopaedic condition	ns, fract	tures	Weighted FIM Motor 48 - 91 FIM Cogniti		FIM Cognition 33 - 35
5AH2	Orthopaedic condition	ıs, fract	tures	Weighted FIM Motor	Weighted FIM Motor 48 - 91 FIM Co	
5AH3	Orthopaedic condition	ıs, fract	tures	Weighted FIM Motor 48 - 91 FIM Cognition 5		FIM Cognition 5 - 20
5AH4	Orthopaedic condition	s, fract	tures	Weighted FIM Motor 19 - 47		
Orthopaed	ic conditions, replaceme	ent (kne	ee, hip,	shoulder)		
5A41	Orthopaedic condition replacement (knee, hi		ulder)	Weighted FIM Motor (61 - 91	
5A42	Orthopaedic conditions, replacement (knee, hip, shoulder)		ulder)	Weighted FIM Motor	4 5 - 60	
5A43	Orthopaedic conditions, replacement (knee, hip, shoulder)		Weighted FIM Motor 19 - 44 oulder)			
Orthopaedic conditions, all other group						
5A21	Orthopaedic conditions, all other		ther	Weighted FIM Motor	 57 - 91	
5A22	Orthopaedic condition	ıs, all o	ther	Weighted FIM Motor	41 - 56	
5A23	Orthopaedic condition	ıs, all o	ther	Weighted FIM Motor	19 - 40	

AN- SNAP V5 end class	Description and thresholds				
Cardiac, pa	ain syndromes, and pulmona	ry			
5A31	Cardiac, pain syndromes, a pulmonary	and	Weighted FIM Motor	66 - 91	
5A32	Cardiac, pain syndromes, a pulmonary	and	Weighted FIM Motor	38 - 65	
5A33	Cardiac, pain syndromes, a pulmonary	and	Weighted FIM Motor	19 - 37	
Major multi	ple trauma				
5AP1	Major multiple trauma		Weighted FIM Motor	51 - 91	
5AP2	Major multiple trauma		Weighted FIM Motor	19 - 50	
Recondition	ning				
5AR1	Reconditioning	Weighte	ed FIM Motor 64 - 91	FIM Cognition 29 - 35	
5AR2	Reconditioning	Weighte	ed FIM Motor 64 - 91	FIM Cognition 5 - 28	
5AR3	Reconditioning	Weighte	ed FIM Motor 48 - 63	FIM Cognition 19 - 35	
5AR4	Reconditioning	Weighte	ed FIM Motor 48 - 63	FIM Cognition 5 - 18	
5AR5	Reconditioning	Weighte	ed FIM Motor 19 - 47		
All other im	npairment types group				
5A91	All other impairments		Weighted FIM Motor	61 - 91	
5A92	All other impairments		Weighted FIM Motor	42 - 60	
5A93	All other impairments		Weighted FIM Motor	19 - 41	
Same day	rehabilitation				
5J01	1 Adult same-day rehabilitation				
Paediatric	Paediatric rehabilitation				
5F01	Rehabilitation		Age <= 3		
5F02	Rehabilitation		Age >= 4	Spinal cord dysfunction	
5F03	Rehabilitation		Age >= 4	Brain dysfunction	
5F04	Rehabilitation		Age >= 4	Neurological conditions	
5F05	Rehabilitation		Age >= 4	All other impairments	
5001	Paediatric same-day rehabilitation				

AN- SNAP V5 end class	Description and thresholds				
Palliative c	are				
Adult pallia	tive care				
5BS1	Stable phase	RUG-AD	L 4-5		
5BS2	Stable phase	RUG-AD	L 6-16		
5BS3	Stable phase	RUG-AD	L 17-18		
5BU1	Unstable phase	First Pha	se in Episode	RUG-ADL 4-13	
5BU2	Unstable phase	First Pha	se in Episode	RUG-ADL 14-18	
5UB3	Unstable phase	Not first Phase in Episode RUG-ADL 4-5			
5UB4	Unstable phase	Not first F	Phase in Episode	RUG-ADL 6-18	
5BD1	Deteriorating phase	RUG-AD	L 4-14		
5BD2	Deteriorating phase	RUG-AD	L 15-18	Age >= 75	
5BD3	Deteriorating phase	RUG-AD	L 15-18	Age 55-74	
5BD4	Deteriorating phase	RUG-AD	L 15-18	Age <= 54	
5BT1	Terminal phase				
5K01	Adult same-day pallia	tive care			
Paediatric	Paediatric Palliative care				
5G01	Phase Type: Not Terminal Age < 1 year				
5G02	Phase Type: Not Terminal		Age >= 1 year	Stable phase	
5G03	Phase Type: Not Terminal Age >= 1 year Unstable or Deteriorating phase			Unstable or Deteriorating phase	
5G04	Terminal phase				
5P01	Paediatric same-day palliative care				

AN- SNAP V5 end class	Description and thresholds				
Geriatric ev	/aluation and management (GEM)				
5CL1	Frailty Related Index of Comorbidities (FRIC)	Score	0 - 1.8	FIM Motor 58 - 91	
5CL2	Frailty Related Index of Comorbidities (FRIC)	Score	0 - 1.8	FIM Motor 13 - 57	
5CM1	Frailty Related Index of Comorbidities (FRIC)	Score	1.9 - 7.3	FIM Motor 51 - 91	
5CM2	Frailty Related Index of Comorbidities (FRIC)	Score	1.9 - 7.3	FIM Motor 13 - 50	
5CH1	Frailty Related Index of Comorbidities (FRIC)	Score	>= 7.4	FIM Motor 40 - 91	
5CH2	FRIC Score >= 7.4			FIM Motor 13 - 39	
5L01	Same-Day GEM				
Psychogeri	atric care				
5DL1	Long term care (LOS > 91)				
5DS1	LOS =< 91		HoNOS 6	65+ Total 18 - 48	
5DS2	LOS =< 91		HoNOS 6	65+ Total 0 - 17	
5M01	Same-day psychogeriatric care				
Non-acute	care				
5EL1	Long-term care (LOS > 91)				
5ES1	Shorter term care LOS =< 91 Age >= 65			FRIC Score 0 - 1.9	
5ES2	Shorter term care LOS =< 91 Age >= 65		>= 65	FRIC Score >= 2	
5ES3	Shorter term care LOS =< 91 Age = 18-64				
5ES4	Shorter term care LOS =< 91	Age =	=< 17		

Appendix D - Adult rehabilitation impairment groups (Weighted FIM™ Motor Score 13-18)

There are two Australasian Rehabilitation Outcomes Centre (AROC) impairment group reference tables used in classifying admitted adult rehabilitation overnight episodes as set out in Figure 10. This appendix is the reference table for episodes with weighted FIMTM Motor Score 13-18.

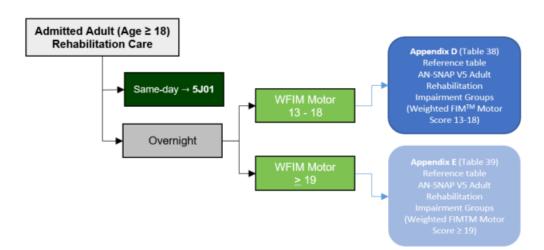


Figure 10. Adult rehabilitation impairment groups - Reference table overview

To determine the AN-SNAP V5 Adult rehabilitation impairment groups, the AROC impairment code should be truncated to get the impairment integer for impairments other than Orthopaedic (e.g. 3.9 truncates to 3). For Orthopaedic impairments the impairment code should be truncated to one decimal place (e.g. 8.231 truncates to 8.2).

The table below maps the truncated AROC Impairment Code and group name to the AN-SNAP V5 Adult Impairment Group for episodes with weighted FIM™ Motor Score 13-18.

Table 38. Reference table - AN-SNAP V5 Adult rehabilitation impairment groups (Weighted FIM™ Motor Score 13-18)

Truncated AROC impairment code	AROC impairment code group name	AN-SNAP V5 Adult Impairment Group (Weighted FIM Motor Score 13-18)
1	Stroke	All other impairments
2	Brain dysfunction	Brain dysfunction
3	Neurological	All other impairments
4	Spinal cord dysfunction	Spinal cord dysfunction
5	Amputation of limb	All other impairments
6	Arthritis	All other impairments
7	Pain syndromes	All other impairments
8.1	Orthopaedic: Fractures	All other impairments
8.2	Orthopaedic: Post surgery	All other impairments
8.3	Orthopaedic: Soft tissue injury	All other impairments
9	Cardiac disorders	All other impairments
10	Pulmonary disorders	All other impairments
11	Burns	Burns
12	Congenital deformities	All other impairments
13	Other disabling impairments	All other impairments
14	Major multiple trauma	Major multiple trauma
15	Developmental disability	All other impairments
16	Reconditioning/restorative	All other impairments

Appendix E - Adult rehabilitation impairment groups (Weighted FIM™ Motor Score ≥ 19)

There are two Australasian Rehabilitation Outcomes Centre (AROC) impairment group reference tables used in classifying admitted adult rehabilitation overnight episodes as set out in Figure 11. This appendix is the reference table for episodes with weighted FIMTM Motor Score equal to or greater than 19.

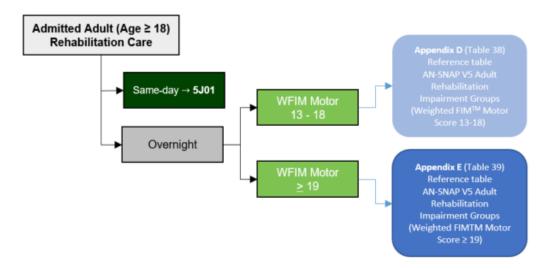


Figure 11. Adult rehabilitation impairment groups - Reference table overview

To determine the AN-SNAP V5 Adult rehabilitation impairment groups, the AROC impairment code should be truncated to get the impairment integer for impairments other than Orthopaedic (e.g. 3.9 truncates to 3). For Orthopaedic impairments the impairment code should be truncated to one decimal place (e.g. 8.231 truncates to 8.2).

The table below maps the truncated AROC Impairment Code and group name to the AN-SNAP V5 Adult Impairment Group for episodes with weighted FIM™ Motor Score equal to or greater than 19.

Table 39. Reference table - AN-SNAP V5 Adult rehabilitation impairment groups (Weighted FIM™ Motor Score ≥ 19)

Truncated AROC impairment code	AROC impairment code group name	AN-SNAP V5 Adult impairment group (Weighted FIM™ Motor Score ≥ 19)
1	Stroke	Stroke
2	Brain dysfunction	Brain dysfunction
3	Neurological	Neurological
4	Spinal cord dysfunction	Spinal cord dysfunction
5	Amputation of limb	Amputation of limb
6	Arthritis	All other impairments
7	Pain syndromes	Cardiac, pain syndromes, pulmonary
8.1	Orthopaedic: Fractures	Orthopaedic: Fractures
8.211	Orthopaedic: Post Surgery - Unilateral hip replacement	Orthopaedic: Replacements (knee, hip, shoulder)
8.212	Orthopaedic: Post Surgery - Bilateral hip replacement	Orthopaedic: Replacements (knee, hip, shoulder)
8.221	Orthopaedic: Post Surgery - Unilateral knee replacement	Orthopaedic: Replacements (knee, hip, shoulder)
8.222	Orthopaedic: Post Surgery - Bilateral knee replacement	Orthopaedic: Replacements (knee, hip, shoulder)
8.231	Orthopaedic: Post Surgery - Knee and hip replacement same side	Orthopaedic: Replacements (knee, hip, shoulder)
8.232	Orthopaedic: Post Surgery - Knee and hip replacement different sides	Orthopaedic: Replacements (knee, hip, shoulder)
8.24	Orthopaedic: Post Surgery - Shoulder replacement or repair	Orthopaedic: Replacements (knee, hip, shoulder)
8.25	Orthopaedic: Post Surgery - Post spinal surgery	Orthopaedic: All other
8.26	Orthopaedic: Post Surgery - Other orthopaedic surgery	Orthopaedic: All other

Truncated AROC impairment code	AROC impairment code group name	AN-SNAP V5 Adult impairment group (Weighted FIM™ Motor Score ≥ 19)
8.3	Orthopaedic: Soft tissue injury	Orthopaedic: All other
9	Cardiac disorders	Cardiac, pain syndromes, pulmonary
10	Pulmonary disorders	Cardiac, pain syndromes, pulmonary
11	Burns	All other impairments
12	Congenital deformities	All other impairments
13	Other disabling impairments	All other impairments
14	Major multiple trauma	Major multiple trauma
15	Developmental disability	All other impairments
16	Reconditioning/restorative	Reconditioning

Appendix F - Paediatric rehabilitation impairment groups

Table 40. Reference table - AN-SNAP V5 Paediatric rehabilitation impairment groups²³

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric impairment group ²³
1.11 Stroke – Haemorrhagic: Left Body Involvement (Right Brain) 1.12 Stroke – Haemorrhagic: Right Body Involvement (Left Brain) 1.13 Stroke – Haemorrhagic: Bilateral Involvement 1.14 Stroke – haemorrhagic: No Paresis 1.19 Stroke – Haemorrhagic: Other Stroke	USE this group for cases with the diagnosis of cerebral ischemia due to vascular thrombosis, embolism, or haemorrhage. Ischaemic strokes that then have a haemorrhagic event should be classified as Stroke – Ischaemic. Do NOT use this group for: 1. cases of brain dysfunction secondary to non-vascular causes such as trauma, inflammation, tumour or degenerative changes. 2. cases of subarachnoid haemorrhage. These should be classified to Brain Dysfunction (2.11)	 Intracerebral haemorrhage Other and unspecified intracranial haemorrhage 	Brain
1.21 Stroke – Ischaemic: Left Body Involvement (Right Brain) 1.22 Stroke – Ischaemic: Right Body Involvement (Left Brain)	USE this group for cases with the diagnosis of cerebral ischemia due to vascular thrombosis, embolism, or haemorrhage. Ischaemic strokes that then have a	 Occlusion and stenosis of precerebral arteries, with cerebral infarction Occlusion of cerebral arteries, with cerebral infarction 	Brain

²³ The AN-SNAP V5 Paediatric Rehabilitation Impairment Groups are identical to the AN-SNAP V4 Paediatric Rehabilitation Impairment Groups

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric impairment group ²³
1.23 Stroke – Ischaemic: Bilateral Involvement 1.24 Stroke – Ischaemic: No Paresis 1.29 Stroke – Ischaemic: Other Stroke	haemorrhagic event should be classified as Stroke – Ischaemic. • Do NOT use this group for: 1. cases of brain dysfunction secondary to non-vascular causes such as trauma, inflammation, tumour or degenerative changes. 2. cases of subarachnoid haemorrhage. These should be classified to Brain Dysfunction (2.11)		
2.11 Non-Traumatic Brain Dysfunction: subarachnoid haemorrhage 2.12 Non-Traumatic Brain Dysfunction: Anoxic brain damage 2.13 Non-Traumatic Brain Dysfunction: Other	USE this group of cases with such aetiologies as neoplasm including metastases, encephalitis, inflammation, anoxia, metabolic toxicity, or degenerative processes. Do NOT use this group for cases with hemorrhagic stroke (other than subarachnoid haemorrhage) - These should be classified to Stroke – Haemorrhagic (1.1*).	 Non-traumatic spontaneous/ berry aneurysm Anoxic brain damage (Anoxic/ hypoxic encephalopathy) Encephalitis Meningitis Neoplasm/tumour of brain or meninges – malignant or benign (includes secondary tumours) Neoplasm/tumour of cranial nerves Intracranial abscess Hydrocephalus Acute demyelinating encephalomyelitis (ADEM) Anti-NMDAR encephalitis Chronic Fatigue Syndrome Toxic encephalopathy 	Brain
2.21 Traumatic Brain Dysfunction: open injury	USE this group for cases with motor and/or cognitive disorder secondary to brain trauma.	 Skull fracture Cerebral laceration and contusion, with open intracranial wound Subarachnoid, subdural, extradural, and other unspecified haemorrhage following injury Other and unspecified intracranial haemorrhage following injury 	Brain
2.22 Traumatic Brain Dysfunction: closed injury	USE this group for cases with motor and/or cognitive	Linear skull fractureConcussion	Brain

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric impairment
	disorder secondary to brain trauma. • DEFINITION: A closed head injury is defined as an injury where the meninges remain intact (includes a linear fracture of the skull)	Cerebral laceration and contusion Subarachnoid, subdural, extradural and other unspecified haemorrhage following injury Other and unspecified intracranial haemorrhage following injury	group ²³
3.1 Neurologic Conditions: Multiple Sclerosis		Multiple Sclerosis	Brain
3.2 Neurologic Conditions: Parkinsonism		Parkinsonism	Brain
3.3 Neurologic Conditions: Polyneuropathy		Hereditary and idiopathic peripheral neuropathy Peripheral neuropathy, inflammatory, toxic, traumatic, or other Brachial plexus or lumbosacral plexus injury	Neuro
3.4 Neurologic Conditions: Guillain-Barré Syndrome		Acute inflammatory polyneuritis	Brain
3.5 Neurologic Conditions: Cerebral Palsy	Do NOT use this code for cases with Cerebral Palsy with Selective Dorsal Rhizotomy (if deficits include new weakness) - These should be classified to Non Traumatic Spinal Cord Dysfunction (4.111-4.13).	Cerebral Palsy Cerebral palsy with orthopaedic surgical intervention or fracture Cerebral palsy with neurosurgical intervention, excludes SDR Cerebral palsy with Intrathecal Baclofen pump Rehabilitation following other procedure in person with Cerebral palsy	Neuro
3.8 Neurologic Conditions: Neuromuscular Disorders		 Post poliomyelitis/ post polio syndrome Motor neurone disease Myasthenia gravis Muscular dystrophies and other myopathies 	Neuro
3.9 Neurologic Conditions: Other Neurologic disorders		Other extrapyramidal disease and abnormal movement disorders	Neuro

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric
			impairment group ²³
4.111 Non Traumatic Spinal Cord Dysfunction: Paraplegia, Incomplete 4.112 Non Traumatic Spinal Cord Dysfunction: Paraplegia, Complete 4.1211 Non Traumatic Spinal Cord Dysfunction: Quadriplegia, Incomplete, C1-4 4.1212 Non Traumatic Spinal Cord Dysfunction: Quadriplegia, Incomplete, C5-8 4.1221 Non Traumatic Spinal Cord Dysfunction: Quadriplegia, Complete, C1-4 4.1222 Non Traumatic Spinal Cord Dysfunction: Quadriplegia, Complete, C1-8 4.13 Non Traumatic Spinal Cord Dysfunction: Other	USE this group for cases with quadriplegia/paresis and paraplegia/paresis of non-traumatic (i.e., medical or post-operative) origin. Do NOT use this group for post spinal surgery, unless the surgery has resulted in dysfunction of the spinal cord/ caudaequina. A detailed coding guideline for patients with spinal cord injury, disease and damage is contained in the appendix to assist in the coding of patients. It is suggested that this be reviewed when considering patients with these conditions to ensure the most accurate code relevant for patient is used.	 Spinocerebellar disease Disorders of the autonomic nervous system Following procedure in person with Rett Syndrome Other demyelinating diseases of the central nervous system Congenital anomalies of nervous system, other than those classified to 12.9 Tuberculosis/ infective processes involving the vertebral column Neoplasm/ tumour of spinal column or spinal meninges, malignant or benign (includes secondary tumours) Neoplasm of other parts of nervous system, of unspecified nature Transverse myelitis Intraspinal or paraspinal abscess Dissection of aorta Aortic aneurysm, ruptured Spontaneous haematoma Spontylosis with myelopathy Spinal infarction Related to congenital heart disease Intervertebral disc disorder with myelopathy Spinal stenosis in cervical region (if deficits include weakness) Spinal stenosis, other than cervical (if deficit includes weakness) Late effects of spinal cord injury Pathological fracture associated with spinal cord dysfunction 	Spinal cord injury or disease

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric impairment group ²³
4.211 Traumatic Spinal Cord Dysfunction: Paraplegia, Incomplete 4.212 Traumatic Spinal Cord Dysfunction: Paraplegia, Complete 4.2211 Traumatic Spinal Cord Dysfunction: Quadriplegia, Incomplete, C1-4 4.2212 Traumatic Spinal Cord Dysfunction: Quadriplegia, Incomplete, C5-8 4.2221 Traumatic Spinal Cord Dysfunction: Quadriplegia, Complete, C1-4 4.2222 Traumatic Spinal Cord Dysfunction: Quadriplegia, Complete, C1-4 4.2223 Traumatic Spinal Cord Dysfunction: Quadriplegia, Complete, C5-8 4.23 Traumatic Spinal Cord Dysfunction: Other	USE this group for cases with quadriplegia/paresis and paraplegia/paresis secondary to trauma (accident/injury). Do NOT use this group for post spinal surgery, unless the surgery has resulted in dysfunction of the spinal cord/ caudaequina. A detailed coding guideline for patients with spinal cord injury, disease and damage is contained in the appendix to assist in the coding of patients. It is suggested that this be reviewed when considering patients with these conditions to ensure the most accurate code relevant for patient is used.	An unavoidable/recognised surgical complication resulting in spinal cord dysfunction following surgery for the above conditions An unavoidable/recognised surgical complication resulting in spinal cord dysfunction following surgery for a congenital condition (eg spina bifida, cerebral palsy) Cerebral Palsy with Selective Dorsal Rhizotomy (if deficits include new weakness) Fracture of vertebral column with spinal cord injury Spinal cord injury without evidence of spinal bone injury Spinal cord dysfunction resulting from surgical misadventure	Spinal cord injury or disease
5.11 Non Traumatic Amputation Of Limb: Single Upper Amputation Above the Elbow 5.12 Non Traumatic Amputation Of Limb: Single Upper Amputation Below the Elbow 5.13 Non Traumatic Amputation Of Limb: Single Lower Amputation Above the Knee (includes through the knee)	USE this group for cases in which the major deficit is partial or complete absence of a limb not resulting from a trauma.	Neoplasm of bones or cartilage and other soft tissue of limb Secondary neoplasm of bone Diabetes with neurologic manifestations or diabetes with peripheral circulatory disorders Hereditary and idiopathic peripheral neuropathy	Other

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric impairment group ²³
5.14 Non Traumatic Amputation Of Limb: Single Lower Amputation Below the Knee 5.15 Non Traumatic Amputation Of Limb: Double Lower Amputation Above the Knee (includes through the knee) 5.16 Non Traumatic Amputation Of Limb: Double Lower Amputation Above/Below the Knee 5.17 Non Traumatic Amputation Of Limb: Double Lower Amputation Below the Knee 5.18 Non Traumatic Amputation Of Limb: Partial Foot Amputation (includes single/double) 5.19 Non Traumatic Amputation Of Limb: Other Amputation		 Inflammatory and toxic neuropathy Atherosclerosis of the extremities Peripheral vascular disease, unspecified Arterial embolism and thrombosis, extremities Buerger's disease Acquired deformity or injury affecting limbs Aneurysm of extremities Amputation stump complication/ revision Haemangioma Vasculitis (eg scleroderma, SLE), DIC (eg meningococcus) Connective tissue disorders Gangrene Infective processes (eg osteomyelitis/cellulitis) Burns with amputation Congenital limb loss (developmental therapy in a child) Congenital limb loss (with conversion amputation) Congenital limb loss (when prosthesis required) 	
5.21 Traumatic Amputation Of Limb: Single Upper Amputation Above the Elbow 5.22 Traumatic Amputation Of Limb: Single Upper Amputation Below the Elbow 5.23 Traumatic Amputation Of Limb: Single Lower Amputation Above the Knee (includes through the knee) 5.24 Traumatic Amputation Of Limb: Single Lower Amputation Below the Knee 5.25 Traumatic Amputation Of Limb:	USE this group for cases in which the major deficit is partial or complete absence of a limb resulting from a trauma.	Traumatic amputation (complete) (partial)	Other

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric impairment group ²³
Double Lower Amputation Above the Knee (includes through the knee) 5.26 Traumatic Amputation Of Limb: Double Lower Amputation Above/Below the Knee 5.27 Traumatic Amputation Of Limb: Double Lower Amputation Below the Knee 5.28 Traumatic Amputation Of Limb: Partial Foot Amputation (includes single/double) 5.29 Traumatic Amputation Of Limb: Other Amputation			
6.1 Arthritis: Rheumatoid arthritis	USE this group for cases in which the major disorder is rheumatoid arthritis Do NOT use for cases entering rehabilitation immediately after joint replacement, even if the procedure was performed secondary to arthritis. These should be classified to Post Orthopaedic Surgery (8.211 – 8.26)	 Rheumatoid arthritis Juvenile chronic polyarthritis Chronic post-rheumatic arthropathy 	Other
6.2 Arthritis: Osteoarthritis	USE this group for cases in which the major disorder is osteoarthritis arthritis Do NOT use for cases entering rehabilitation immediately after joint replacement, even if the procedure was performed secondary to arthritis. These should be classified to Post Orthopaedic Surgery (8.211 – 8.26)	Osteoarthritis and allied disorders	Other
6.9 Arthritis: Other	USE this group for cases in which the major disorder is arthritis of another aetiology Do NOT use for cases entering rehabilitation immediately after joint replacement, even if the procedure was performed secondary to arthritis. These should be classified to Post Orthopaedic Surgery (8.211 – 8.26)	 Psoriatic arthropathy Scleroderma Systemic lupus erythematosus Systemic sclerosis Dermatomyositis Polymyositis Pyogenic arthritis Other and unspecified arthropathies Fibromyalgia Ankylosing spondylitis 	Other

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric impairment group ²³
7.1 Pain Syndromes: Neck Pain 7.2 Pain Syndromes: Back Pain 7.3 Pain Syndromes: Extremity Pain 7.4 Pain Syndromes: Headache (includes migraine) 7.5 Pain Syndromes: Multi-site pain 7.9 Pain Syndromes: Other Pain (includes abdominal/chest wall)	USE this group for cases in which the primary purpose for this rehabilitation episode is pain management. Do NOT use this group if pain management is only one component of the patient's rehabilitation program. These should be classified to the group representing the primary impairment.	Various aetiologies	
8.111 Orthopaedic Fracture: Hip, unilateral	USE this group for cases in which the major disorder is post-fracture of bone or post-arthroplasty (joint replacement). USE when joint replacement (arthroplasty or hemiarthroplasty) is part of the fracture treatment	includes #NOF	Other
8.112 Orthopaedic Fracture: Hip, bilateral	USE this group for cases in which the major disorder is post-fracture of bone or post-arthroplasty (joint replacement). USE when joint replacement (arthroplasty or hemiarthroplasty) is part of the fracture treatment	includes #NOF	Other
8.12 Orthopaedic Fracture: shaft of femur	USE this group for cases in which the major disorder is post-fracture of bone or post-arthroplasty (joint replacement). USE when joint replacement (arthroplasty or hemiarthroplasty) is part of the fracture treatment	excludes femur involving knee joint	Other
8.13 Orthopaedic Fracture: pelvis	USE this group for cases in which the major disorder is post-fracture of bone or post-arthroplasty (joint replacement). USE when joint replacement (arthroplasty or hemiarthroplasty) is part of the fracture treatment		Other

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric
			impairment group ²³
8.141 Orthopaedic Fracture: knee	USE this group for cases in which the major disorder is post-fracture of bone or post-arthroplasty (joint replacement). USE when joint replacement (arthroplasty or hemiarthroplasty) is part of the fracture treatment	includes patella, femur involving knee joint, tibia or fibula involving knee joint	Other
8.142 Orthopaedic Fracture: lower leg, ankle, foot	USE this group for cases in which the major disorder is post-fracture of bone or post-arthroplasty (joint replacement). USE when joint replacement (arthroplasty or hemiarthroplasty) is part of the fracture treatment		Other
8.15 Orthopaedic Fracture: upper limb	USE this group for cases in which the major disorder is post-fracture of bone or post-arthroplasty (joint replacement). USE when joint replacement (arthroplasty or hemiarthroplasty) is part of the fracture treatment	includes hand, fingers, wrist, forearm, arm, shoulder	Other
8.16 Fracture of spine	USE this group for cases in which the major disorder is post-fracture of bone or post-arthroplasty (joint replacement). USE when joint replacement (arthroplasty or hemiarthroplasty) is part of the fracture treatment	excludes where the major disorder is pain	Other
8.17 Orthopaedic Fracture: multiple sites	USE this group for cases in which the major disorder is post-fracture of bone or post-arthroplasty (joint replacement). USE when joint replacement (arthroplasty or hemiarthroplasty) is part of the fracture treatment	multiple bones of same lower limb, both lower limbs, lower with upper limb, lower limb with rib or sternum. Excludes with brain injury (classify to 14.2) or with spinal cord injury (classify to 14.3)	Other
8.19 Orthopaedic Fracture: Other	USE this group for cases in which the major disorder is post-fracture of bone or post-arthroplasty (joint replacement). USE when joint replacement (arthroplasty or hemiarthroplasty) is part of the fracture treatment	 includes jaw, face, rib, orbit or sites not elsewhere classified - excludes fracture associated with cerebral palsy (classify to 3.5) or spinal cord impairment (classify to 4.*) 	Other
	USE this group for cases where the orthopaedic	Psoriatic arthropathy	Other

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric impairment group ²³
8.211 Post Orthopaedic Surgery: Unilateral hip replacement 8.212 Post Orthopaedic Surgery: Bilateral hip replacement 8.221 Post Orthopaedic Surgery: Unilateral knee replacement 8.222 Post Orthopaedic Surgery: Bilateral knee replacement 8.231 Post Orthopaedic Surgery: Knee and hip replacement same side 8.232 Post Orthopaedic Surgery: Knee and hip replacement different sides 8.24 Post Orthopaedic Surgery: Shoulder replacement or repair	surgery involved the revision or repair of previous orthopaedic surgery. • Do NOT use this group when orthopaedic surgery is part of acute fracture management. These should be classified to 8.111 – 8.19.	 Pyogenic arthritis Rheumatoid arthritis Juvenile chronic polyarthritis Chronic post-rheumatic arthropathy Osteoarthritis and allied disorder Other and unspecified arthropathies Ankylosing spondylitis Mechanical complication of internal orthopedic device, implant and graft Infection and inflammatory reaction due to internal orthopedic device, implant and graft Other complications due to internal orthopedic or prosthetic device, implant and graft Neoplasm of bone and articular cartilage Secondary neoplasm of bone 	
8.25 Post Orthopaedic Surgery: spinal	USE this group for cases where the orthopaedic surgery involved the revision or repair of previous orthopaedic surgery. Do NOT use this group when orthopaedic surgery is part of acute fracture management. These should be classified to 8.111 – 8.19.	Includes nerve root injury (laminectomy, spinal fusion, discectomy) Includes spinal deformity surgery. Excludes spinal surgery associated with cerebral palsy (classify as Neuro) or spinal cord impairment (classify as Spinal) Excludes spinal cord, caudaequina/major nerve root dysfunction (classify to 4)	Other
8.26 Post Orthopaedic Surgery: Other	 USE this group for cases where the orthopaedic surgery involved the revision or repair of previous orthopaedic surgery. Do NOT use this group when orthopaedic surgery is part of acute fracture management. These should be classified to 8.111 – 8.19. 	Other and unspecified disorders of joint Pathologic fracture requiring surgical intervention. Excludes pathologic fracture in context of spinal cord dysfunction or cerebral palsy Osteotomy Bone Lengthening	Other
8.3 Soft Tissue Injury	USE this group for cases where there has been significant soft tissue injuries requiring	Severe sprains, ligament tears, rotator cuff tears Rhabdomyolysis	Other

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric impairment group ²³
	rehabilitation but no fracture. • DO NOT use this group for cases where there is a fracture in addition to soft tissue injuries. These should be classified to 8.111 – 8.19.	Severe crush injuries Falls resulting in severe soft tissue injury but no fractures	
9.1 Cardiac disorders: following recent onset of new cardiac impairment	USE for cases in which the purpose of this rehabilitation episode is to address poor activity tolerance secondary to cardiac insufficiency or general deconditioning due to cardiac disorder.	 Acute myocardial infarction Cardiac myopathy Post cardiac surgery 	Other
9.2 Cardiac disorders: Chronic cardiac insufficiency	USE for cases in which the purpose of this rehabilitation episode is to address poor activity tolerance secondary to cardiac insufficiency or general deconditioning due to cardiac disorder.	 Coronary atherosclerosis Ischemic heart disease Heart failure Congenital heart disease Cardiac myopath 	Other
9.3 Cardiac disorders: Heart or heart/lung transplant	USE for cases in which the purpose of this rehabilitation episode is to address poor activity tolerance secondary to cardiac insufficiency or general deconditioning due to cardiac disorder.		Other
10.1 Pulmonary Disorders: Chronic Obstructive Pulmonary Disease	USE for cases in which the purpose of this rehabilitation episode is to address poor activity tolerance secondary to pulmonary insufficiency.	Chronic obstructive pulmonary disease	Other
10.2 Pulmonary Disorders: Lung Transplant	USE for cases in which the purpose of this rehabilitation episode is to address poor activity tolerance secondary to pulmonary insufficiency.		Other
10.9 Pulmonary Disorders: Other Pulmonary Disorders	USE for cases in which the purpose of this rehabilitation episode is to address poor activity tolerance secondary to pulmonary insufficiency.	 Chronic bronchitis Post pneumonia Emphysema Asthma Bronchiectasis Pulmonary insufficiency following trauma, surgery 	Other

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric impairment group ²³
11 Burns	USE for cases in which the purpose of this rehabilitation episode is to address burns to major areas of skin and/or underlying tissue.		Other
12.1 Congenital deformities: Spina Bifida	USE for cases in which the purpose of this rehabilitation episode is to address Spina Bifida.	Spina Bifida	Spinal cord injury or disease
12.9 Congenital deformities: Other	USE for cases in which the purpose of this rehabilitation episode is to address an anomaly or deformity of the musculoskeletal system that has been present since birth. DO NOT use this group for other congenital anomalies of nervous system. These	ArthrogryposisOsteochondrodysplasiasOsteogenesis imperfecta	Other
13.1 Other disabling impairments: Lymphoedema	should be classified to 3.9 USE for cases in which the major disorder is lymphoedema.		Other
13.3 Other disabling impairments: Conversion Disorder	USE for cases in which the major disorder is conversion disorder.		Brain
13.9 Other disabling impairments: Other	 USE for cases that cannot be classified into any other impairment group. This group should be rarely used. 		Other
14.1 Major Multiple Trauma: Brain + Spinal Cord Injury (spinal cord/ caudaequina/ spinal nerve root (major plexus or multiple roots))	USE for trauma cases with complex management due to involvement of multiple systems or sites, where specialised rehabilitation is required for each of the impairments. Do NOT use for multiple fractures. These should be classified to Fracture of Multiple Sites (8.17).		Spinal cord injury or disease
14.2 Major Multiple Trauma: Brain + Multiple Fracture/Amputation	USE for trauma cases with complex management due to involvement of multiple systems or sites, where specialised rehabilitation is required for each of the impairments.		Brain
	Do NOT use for multiple fractures. These should be classified to Fracture of Multiple Sites (8.17).		

AROC impairment code	When to use this group and/or definitions	Aetiologic diagnosis	AN-SNAP V5 Paediatric impairment group ²³
14.3 Major Multiple Trauma: Spinal Cord (spinal cord/ caudaequina/ spinal nerve root (major plexus or multiple roots)) + Multiple Fracture/Amputation	USE for trauma cases with complex management due to involvement of multiple systems or sites, where specialised rehabilitation is required for each of the impairments. Do NOT use for multiple fractures. These should be classified to Fracture of Multiple Sites (8.17).		Spinal cord injury or disease
14.9 Major Multiple Trauma: Other Multiple Trauma	USE for trauma cases with complex management due to involvement of multiple systems or sites, where specialised rehabilitation is required for each of the impairments. Do NOT use for multiple fractures. These should be classified to Fracture of Multiple Sites (8.17).		Other
15.1 Developmental Disability	 USE for patients who have significant intellectual disabilities/ mental retardation. Do NOT use for cases of cerebral palsy. These should be classified to Cerebral Palsy (3.5) 		Other
16.1 Reconditioning/ restorative: following surgery 16.2 Reconditioning/ restorative: following medical illness	USE for cases with generalized deconditioning not attributable to any of the other Impairment Groups (eg. where deconditioning is due to a cardiac disorder classify as 9.2; where deconditioning is due to pulmonary insufficiency classify as 10.2).	 Muscular wasting and disuse atrophy, not elsewhere classified Unspecified disorder of muscle, ligament and fascia Other malaise and fatigue, excluding Chronic Fatigue Syndrome 	Other
16.3 Reconditioning/ restorative: Cancer rehabilitation	USE for cases with generalized deconditioning as a result of cancer or treatment for cancer. Excludes brain tumours which are classified as Brain.		Other

Appendix G - Frailty Related Index of Comorbidities diagnoses scores

Table 41. Reference Table - Frailty Related Index of Comorbidities (FRIC) scores (International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (ICD-10-AM) Eleventh Edition diagnoses)

ICD-10- AM Eleventh Edition Code	Description	FRIC Score
A04.0	Enteropathogenic Escherichia coli infection	1.1
A04.1	Enterotoxigenic Escherichia coli infection	1.1
A04.2	Enteroinvasive Escherichia coli infection	1.1
A04.3	Enterohaemorrhagic Escherichia coli infection	1.1
A04.4	Other intestinal Escherichia coli infection	1.1
A04.5	Campylobacter enteritis	1.1
A04.6	Enteritis due to Yersinia enterocolitica	1.1
A04.7	Enterocolitis due to Clostridium difficile	1.1
A04.8	Other specified bacterial intestinal infection	1.1
A04.9	Bacterial intestinal infection, unspecified	1.1
A09.0	Other gastroenteritis and colitis of infectious origin	1.1
A09.9	Gastroenteritis and colitis of unspecified origin	1.1
A41.0	Sepsis due to Staphylococcus aureus	1.6
A41.1	Sepsis due to other specified staphylococcus	1.6
A41.2	Sepsis due to unspecified staphylococcus	1.6
A41.3	Sepsis due to Haemophilus influenzae	1.6
A41.4	Sepsis due to anaerobes	1.6
A41.50	Sepsis due to unspecified Gram-negative organisms	1.6
A41.51	Sepsis due to Escherichia coli [E. Coli]	1.6
A41.52	Sepsis due to Pseudomonas	1.6
A41.58	Sepsis due to other Gram-negative organisms	1.6
A41.8	Other specified sepsis	1.6
A41.9	Sepsis, unspecified	1.6
D64.0	Hereditary sideroblastic anaemia	0.4
D64.1	Secondary sideroblastic anaemia due to disease	0.4
D64.2	Secondary sideroblastic anaemia due to drugs and toxins	0.4
D64.3	Other sideroblastic anaemias	0.4
D64.4	Congenital dyserythropoietic anaemia	0.4
D64.8	Other specified anaemias	0.4
D64.9	Anaemia, unspecified	0.4

ICD-10-		
AM Eleventh Edition Code	Description	FRIC Score
E05.0	Thyrotoxicosis with diffuse goitre	0.9
E05.1	Thyrotoxicosis with toxic single thyroid nodule	0.9
E05.2	Thyrotoxicosis with toxic multinodular goitre	0.9
E05.3	Thyrotoxicosis from ectopic thyroid tissue	0.9
E05.4	Thyrotoxicosis factitia	0.9
E05.5	Thyroid crisis or storm	0.9
E05.8	Other thyrotoxicosis	0.9
E05.9	Thyrotoxicosis, unspecified	0.9
E16.0	Drug-induced hypoglycaemia without coma	1.4
E16.1	Other hypoglycaemia	1.4
E16.3	Increased secretion of glucagon	1.4
E16.4	Abnormal secretion of gastrin	1.4
E16.8	Other specified disorders of pancreatic internal secretion	1.4
E16.9	Disorder of pancreatic internal secretion, unspecified	1.4
E53.0	Riboflavin deficiency	1.9
E53.1	Pyridoxine deficiency	1.9
E53.8	Deficiency of other specified B group vitamins	1.9
E53.9	Vitamin B deficiency, unspecified	1.9
E55.0	Rickets, active	1
E86	Volume depletion	2.3
F00.0	Dementia in Alzheimer's disease with early onset (G30.0+)	7.1
F00.1	Dementia in Alzheimer's disease with late onset (G30.1+)	7.1
F00.2	Dementia in Alzheimer's disease, atypical or mixed type (G30.8+)	7.1
F00.9	Dementia in Alzheimer's disease, unspecified (G30.9+)	7.1
F01.0	Vascular dementia of acute onset	2
F01.1	Multi-infarct dementia	2
F01.2	Subcortical vascular dementia	2
F01.3	Mixed cortical and subcortical vascular dementia	2
F01.8	Other vascular dementia	2
F01.9	Vascular dementia, unspecified	2
F03	Unspecified dementia	2.1
F05.0	Delirium not superimposed on dementia, so described	3.2
F05.1	Delirium superimposed on dementia	3.2
F05.8	Other delirium	3.2
F05.9	Delirium, unspecified	3.2
F10.0	Mental and behavioural disorders due to use of alcohol, acute intoxication	0.7
F10.1	Mental and behavioural disorders due to use of alcohol, harmful use	0.7
F10.2	Mental and behavioural disorders due to use of alcohol, dependence syndrome	0.7
F10.3	Mental and behavioural disorders due to use of alcohol, withdrawal state	0.7
F10.4	Mental and behavioural disorders due to use of alcohol, withdrawal state with delirium	0.7
F10.5	Mental and behavioural disorders due to use of alcohol, psychotic disorder	0.7

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F10.6	Mental and behavioural disorders due to use of alcohol, amnesic syndrome	0.7
F10.7	Mental and behavioural disorders due to use of alcohol, residual and late-onset psychotic disorder	0.7
F10.8	Mental and behavioural disorders due to use of alcohol, other mental and behavioural disorders	0.7
F32.00	Mild depressive episode, not specified as arising in the postnatal period	0.5
F32.01	Mild depressive episode, arising in the postnatal period	0.5
F32.10	Moderate depressive episode, not specified as arising in the postnatal period	0.5
F32.11	Moderate depressive episode, arising in the postnatal period	0.5
F32.20	Severe depressive episode without psychotic symptoms, not specified as arising in the postnatal period	0.5
F32.21	Severe depressive episode without psychotic symptoms, arising in the postnatal period	0.5
F32.30	Severe depressive episode with psychotic symptoms, not specified as arising in the postnatal period	0.5
F32.31	Severe depressive episode with psychotic symptoms, arising in the postnatal period	0.5
F32.80	Other depressive episodes, not specified as arising in the postnatal period	0.5
F32.81	Other depressive episodes, arising in the postnatal period	0.5
F32.90	Depressive episode, unspecified, not specified as arising in the postnatal period	0.5
F32.91	Depressive episode, unspecified, arising in the postnatal period	0.5
G20	Parkinson's disease	1.8
G30.0	Alzheimer's disease with early onset	4
G30.1	Alzheimer's disease with late onset	4
G30.8	Other Alzheimer's disease	4
G30.9	Alzheimer's disease, unspecified	4
G31.0	Circumscribed brain atrophy	1.2
G31.1	Senile degeneration of brain, not elsewhere classified	1.2
G31.2	Degeneration of nervous system due to alcohol	1.2
G31.3	Lewy body disease	1.2
G31.8	Other specified degenerative diseases of nervous system	1.2
G31.9	Degenerative disease of nervous system, unspecified	1.2
G40.00	Localisation-related (focal)(partial) idiopathic epilepsy and epileptic syndromes with seizures of localised onset, without mention of intractable epilepsy	1.5
G40.01	Localisation-related (focal)(partial) idiopathic epilepsy and epileptic syndromes with seizures of localised onset, with intractable epilepsy	1.5
G40.10	Localisation-related (focal)(partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, without mention of intractable epilepsy	1.5
G40.11	Localisation-related (focal)(partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, with intractable epilepsy	1.5
G40.20	Localisation-related (focal)(partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, without mention of intractable epilepsy	1.5
G40.21	Localisation-related (focal)(partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, with intractable epilepsy	1.5
G40.30	Generalised idiopathic epilepsy and epileptic syndromes, without mention of intractable epilepsy	1.5

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G40.31	Generalised idiopathic epilepsy and epileptic syndromes, with intractable epilepsy	1.5
G40.40	Other generalised epilepsy and epileptic syndromes, without mention of intractable epilepsy	1.5
G40.41	Other generalised epilepsy and epileptic syndromes, with intractable epilepsy	1.5
G40.50	Special epileptic syndromes, without mention of intractable epilepsy	1.5
G40.51	Special epileptic syndromes, with intractable epilepsy	1.5
G40.60	Grand mal seizures, unspecified (with or without petit mal), without mention of intractable epilepsy	1.5
G40.61	Grand mal seizures, unspecified (with or without petit mal), with intractable epilepsy	1.5
G40.70	Petit mal, unspecified, without grand mal seizures, without mention of intractable epilepsy	1.5
G40.71	Petit mal, unspecified, without grand mal seizures, with intractable epilepsy	1.5
G40.80	Other epilepsy, without mention of intractable epilepsy	1.5
G40.81	Other epilepsy, with intractable epilepsy	1.5
G40.90	Epilepsy, unspecified, without mention of intractable epilepsy	1.5
G40.91	Epilepsy, unspecified, with intractable epilepsy	1.5
G45.0	Vertebro-basilar artery syndrome	1.2
G45.1	Carotid artery syndrome (hemispheric)	1.2
G45.2	Multiple and bilateral precerebral artery syndromes	1.2
G45.3	Amaurosis fugax	1.2
G45.4	Transient global amnesia	1.2
G45.8	Other transient cerebral ischaemic attacks and related syndromes	1.2
G45.9	Transient cerebral ischaemic attack, unspecified	1.2
G81.0	Flaccid hemiplegia	4.4
G81.1	Spastic hemiplegia	4.4
G81.9	Hemiplegia, unspecified	4.4
H54.0	Blindness, binocular	1.9
H54.1	Severe visual impairment, binocular	1.9
H54.2	Moderate visual impairment, binocular	1.9
H54.4	Blindness, monocular	1.9
H54.5	Severe visual impairment, monocular	1.9
H54.6	Moderate visual impairment, monocular	1.9
H91.0	Ototoxic hearing loss	0.9
H91.1	Presbycusis	0.9
H91.2	Sudden idiopathic hearing loss	0.9
H91.3	Deaf mutism, not elsewhere classified	0.9
H91.8	Other specified hearing loss	0.9
H91.9	Hearing loss, unspecified	0.9
163.0	Cerebral infarction due to thrombosis of precerebral arteries	0.8
l63.1	Cerebral infarction due to embolism of precerebral arteries	0.8
163.2	Cerebral infarction due to unspecified occlusion or stenosis of precerebral arteries	0.8
163.3	Cerebral infarction due to thrombosis of cerebral arteries	0.8
163.4	Cerebral infarction due to embolism of cerebral arteries	0.8

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163.5	Cerebral infarction due to unspecified occlusion or stenosis of cerebral arteries	0.8
163.6	Cerebral infarction due to cerebral venous thrombosis, nonpyogenic	0.8
163.8	Other cerebral infarction	0.8
163.9	Cerebral infarction, unspecified	0.8
167.0	Dissection of cerebral arteries, nonruptured	2.6
167.1	Cerebral aneurysm, nonruptured	2.6
167.2	Cerebral atherosclerosis	2.6
167.3	Progressive vascular leukoencephalopathy	2.6
167.4	Hypertensive encephalopathy	2.6
167.5	Moyamoya disease	2.6
167.6	Nonpyogenic thrombosis of intracranial venous system	2.6
167.7	Cerebral arteritis, not elsewhere classified	2.6
167.8	Other specified cerebrovascular diseases	2.6
195.0	Idiopathic hypotension	1.6
195.10	Orthostatic hypotension, unspecified	1.6
195.11	Primary orthostatic hypotension	1.6
195.12	Neurogenic orthostatic hypotension	1.6
195.19	Other specified orthostatic hypotension	1.6
195.2	Hypotension due to drugs	1.6
195.8	Other hypotension	1.6
195.9	Hypotension, unspecified	1.6
J18.0	Bronchopneumonia, unspecified	1.1
J18.1	Lobar pneumonia, unspecified	1.1
J18.2	Hypostatic pneumonia, unspecified	1.1
J18.8	Other pneumonia, organism unspecified	1.1
J18.9	Pneumonia, unspecified	1.1
J22	Unspecified acute lower respiratory infection	0.7
J69.0	Pneumonitis due to food and vomit	1
J69.1	Pneumonitis due to oils and essences	1
J69.8	Pneumonitis due to other solids and liquids	1
J96.00	Acute respiratory failure, type I	1.5
J96.01	Acute respiratory failure, type II	1.5
J96.09	Acute respiratory failure, type unspecified	1.5
J96.10	Chronic respiratory failure, type I	1.5
J96.11	Chronic respiratory failure, type II	1.5
J96.19	Chronic respiratory failure, type unspecified	1.5
J96.90	Respiratory failure unspecified, type I	1.5
J96.91	Respiratory failure unspecified, type II	1.5
J96.99	Respiratory failure unspecified, type unspecified	1.5
K26.0	Duodenal ulcer, acute with haemorrhage	1.6
K26.1	Duodenal ulcer, acute with perforation	1.6
K26.2	Duodenal ulcer, acute with both haemorrhage and perforation	1.6

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K26.3	Duodenal ulcer, acute without haemorrhage or perforation	1.6
K26.4	Duodenal ulcer, chronic or unspecified with haemorrhage	1.6
K26.5	Duodenal ulcer, chronic or unspecified with perforation	1.6
K26.6	Duodenal ulcer, chronic or unspecified with both haemorrhage and perforation	1.6
K26.7	Duodenal ulcer, chronic without haemorrhage or perforation	1.6
K52.0	Gastroenteritis and colitis due to radiation	0.3
K52.1	Toxic gastroenteritis and colitis	0.3
K52.2	Allergic and dietetic gastroenteritis and colitis	0.3
K52.3	Indeterminate colitis	0.3
K52.8	Other specified noninfective gastroenteritis and colitis	0.3
K52.9	Noninfective gastroenteritis and colitis, unspecified	0.3
K59.2	Neurogenic bowel, not elsewhere classified	1.8
K59.3	Megacolon, not elsewhere classified	1.8
K59.8	Other specified functional intestinal disorders	1.8
K92.0	Haematemesis	0.8
K92.1	Melaena	0.8
K92.2	Gastrointestinal haemorrhage, unspecified	0.8
K92.8	Other specified diseases of digestive system	0.8
L03.01	Cellulitis of finger	2
L03.02	Cellulitis of toe	2
L03.12	Cellulitis of upper limb	2
L03.13	Cellulitis of lower limb	2
L03.14	Cellulitis of foot	2
L03.2	Cellulitis of face	2
L03.3	Cellulitis of trunk	2
L03.8	Cellulitis of other sites	2
L08.0	Pyoderma	0.4
L89.00	Pressure injury, stage I, site not elsewhere classified	1.7
L89.01	Pressure injury, stage I, head	1.7
L89.02	Pressure injury, stage I, upper extremity	1.7
L89.03	Pressure injury, stage I, upper back	1.7
L89.04	Pressure injury, stage I, lower back	1.7
L89.05	Pressure injury, stage I, ischium	1.7
L89.06	Pressure injury, stage I, trochanter	1.7
L89.07	Pressure injury, stage I, heel	1.7
L89.08	Pressure injury, stage I, toe	1.7
L89.09	Pressure injury, stage I, other site of lower extremity (excluding heel and toe)	1.7
L89.10	Pressure injury, stage II, site not elsewhere classified	1.7
L89.11	Pressure injury, stage II, head	1.7
L89.12	Pressure injury, stage II, upper extremity	1.7
L89.13	Pressure injury, stage II, upper back	1.7
L89.14	Pressure injury, stage II, lower back	1.7

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Code		
L89.15	Pressure injury, stage II, ischium	1.7
L89.16	Pressure injury, stage II, trochanter	1.7
L89.17	Pressure injury, stage II, heel	1.7
L89.18	Pressure injury, stage II, toe	1.7
L89.19	Pressure injury, stage II, other site of lower extremity (excluding heel and toe)	1.7
L89.20	Pressure injury, stage III, site not elsewhere classified	1.7
L89.21	Pressure injury, stage III, head	1.7
L89.22	Pressure injury, stage III, upper extremity	1.7
L89.23	Pressure injury, stage III, upper back	1.7
L89.24	Pressure injury, stage III, lower back	1.7
L89.25	Pressure injury, stage III, ischium	1.7
L89.26	Pressure injury, stage III, trochanter	1.7
L89.27	Pressure injury, stage III, heel	1.7
L89.28	Pressure injury, stage III, toe	1.7
L89.29	Pressure injury, stage III, other site of lower extremity (excluding heel and toe)	1.7
L89.30	Pressure injury, stage IV, site not elsewhere classified	1.7
L89.31	Pressure injury, stage IV, head	1.7
L89.32	Pressure injury, stage IV, upper extremity	1.7
L89.33	Pressure injury, stage IV, upper back	1.7
L89.34	Pressure injury, stage IV, lower back	1.7
L89.35	Pressure injury, stage IV, ischium	1.7
L89.36	Pressure injury, stage IV, trochanter	1.7
L89.37	Pressure injury, stage IV, heel	1.7
L89.38	Pressure injury, stage IV, toe	1.7
L89.39	Pressure injury, stage IV, other site of lower extremity (excluding heel and toe)	1.7
L89.40	Pressure injury, unstageable, so stated, site not elsewhere classified	1.7
L89.41	Pressure injury, unstageable, so stated, head	1.7
L89.42	Pressure injury, unstageable, so stated, upper extremity	1.7
L89.43	Pressure injury, unstageable, so stated, upper back	1.7
L89.44	Pressure injury, unstageable, so stated, lower back	1.7
L89.45	Pressure injury, unstageable, so stated, ischium	1.7
L89.46	Pressure injury, unstageable, so stated, trochanter	1.7
L89.47	Pressure injury, unstageable, so stated, heel	1.7
L89.48	Pressure injury, unstageable, so stated, toe	1.7
L89.49	Pressure injury, unstageable, so stated, other site of lower extremity (excluding heel and toe)	1.7
L89.50	Suspected deep tissue injury, depth unknown, so stated, site not elsewhere classified	1.7
L89.51	Suspected deep tissue injury, depth unknown, so stated, head	1.7
L89.52	Suspected deep tissue injury, depth unknown, so stated, upper extremity	1.7
L89.53	Suspected deep tissue injury, depth unknown, so stated, upper back	1.7
L89.54	Suspected deep tissue injury, depth unknown, so stated, lower back	1.7

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Code		
L89.55	Suspected deep tissue injury, depth unknown, so stated, ischium	1.7
L89.56	Suspected deep tissue injury, depth unknown, so stated, trochanter	1.7
L89.57	Suspected deep tissue injury, depth unknown, so stated, heel	1.7
L89.58	Suspected deep tissue injury, depth unknown, so stated, toe	1.7
L89.59	Suspected deep tissue injury, depth unknown, so stated, other site of lower extremity (excluding heel and toe)	1.7
L89.90	Pressure injury, unspecified stage, site not elsewhere classified	1.7
L89.91	Pressure injury, unspecified stage, head	1.7
L89.92	Pressure injury, unspecified stage, upper extremity	1.7
L89.93	Pressure injury, unspecified stage, upper back	1.7
L89.94	Pressure injury, unspecified stage, lower back	1.7
L89.95	Pressure injury, unspecified stage, ischium	1.7
L89.96	Pressure injury, unspecified stage, trochanter	1.7
L89.97	Pressure injury, unspecified stage, heel	1.7
L89.98	Pressure injury, unspecified stage, toe	1.7
L89.99	Pressure injury, unspecified stage, other site of lower extremity (excluding heel and toe)	1.7
L97.0	Ulcer of foot	1.6
L97.8	Ulcer of lower limb, other sites	1.6
L97.9	Ulcer of lower limb, unspecified	1.6
M15.0	Primary generalised (osteo)arthrosis	0.4
M15.1	Heberden's nodes (with arthropathy)	0.4
M15.2	Bouchard's nodes (with arthropathy)	0.4
M15.3	Secondary multiple arthrosis	0.4
M15.4	Erosive (osteo)arthrosis	0.4
M15.8	Other polyarthrosis	0.4
M19.01	Primary arthrosis of other joints, shoulder region	1.5
M19.02	Primary arthrosis of other joints, upper arm	1.5
M19.03	Primary arthrosis of other joints, forearm	1.5
M19.04	Primary arthrosis of other joints, hand	1.5
M19.07	Primary arthrosis of other joints, ankle and foot	1.5
M19.08	Primary arthrosis of other joints, other site	1.5
M19.11	Post traumatic arthrosis of other joints, shoulder region	1.5
M19.12	Post traumatic arthrosis of other joints, upper arm	1.5
M19.13	Post traumatic arthrosis of other joints, forearm	1.5
M19.14	Post traumatic arthrosis of other joints, hand	1.5
M19.17	Post traumatic arthrosis of other joints, ankle and foot	1.5
M19.18	Post traumatic arthrosis of other joints, other site	1.5
M19.21	Other secondary arthrosis, shoulder region	1.5
M19.22	Other secondary arthrosis, upper arm	1.5
M19.23	Other secondary arthrosis, forearm	1.5
M19.24	Other secondary arthrosis, hand	1.5

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Code		
M19.27	Other secondary arthrosis, ankle and foot	1.5
M19.28	Other secondary arthrosis, other site	1.5
M19.81	Other specified arthrosis, shoulder region	1.5
M19.82	Other specified arthrosis, upper arm	1.5
M19.83	Other specified arthrosis, forearm	1.5
M19.84	Other specified arthrosis, hand	1.5
M19.87	Other specified arthrosis, ankle and foot	1.5
M19.88	Other specified arthrosis, other site	1.5
M25.00	Haemarthrosis, multiple sites	2.3
M25.01	Haemarthrosis, shoulder region	2.3
M25.02	Haemarthrosis, upper arm	2.3
M25.03	Haemarthrosis, forearm	2.3
M25.04	Haemarthrosis, hand	2.3
M25.05	Haemarthrosis, pelvic region and thigh	2.3
M25.06	Haemarthrosis, lower leg	2.3
M25.07	Haemarthrosis, ankle and foot	2.3
M25.08	Haemarthrosis, other site	2.3
M25.10	Fistula of joint, multiple sites	2.3
M25.11	Fistula of joint, shoulder region	2.3
M25.12	Fistula of joint, upper arm	2.3
M25.13	Fistula of joint, forearm	2.3
M25.14	Fistula of joint, hand	2.3
M25.15	Fistula of joint, pelvic region and thigh	2.3
M25.16	Fistula of joint, lower leg	2.3
M25.17	Fistula of joint, ankle and foot	2.3
M25.18	Fistula of joint, other site	2.3
M25.20	Flail joint, multiple sites	2.3
M25.21	Flail joint, shoulder region	2.3
M25.22	Flail joint, upper arm	2.3
M25.23	Flail joint, forearm	2.3
M25.24	Flail joint, hand	2.3
M25.25	Flail joint, pelvic region and thigh	2.3
M25.27	Flail joint, ankle and foot	2.3
M25.28	Flail joint, other site	2.3
M25.30	Other instability of joint, multiple sites	2.3
M25.31	Other instability of joint, shoulder region	2.3
M25.32	Other instability of joint, upper arm	2.3
M25.33	Other instability of joint, forearm	2.3
M25.34	Other instability of joint, hand	2.3
M25.35	Other instability of joint, pelvic region and thigh	2.3
M25.37	Other instability of joint, ankle and foot	2.3
M25.38	Other instability of joint, other site	2.3

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M41.16	Juvenile idiopathic scoliosis, lumbar region	0.9
M41.17	Juvenile idiopathic scoliosis, lumbosacral region	0.9
M41.18	Juvenile idiopathic scoliosis, sacral and sacrococcygeal region	0.9
M41.20	Other idiopathic scoliosis, multiple sites in spine	0.9
M41.21	Other idiopathic scoliosis, occipito-atlanto-axial region	0.9
M41.22	Other idiopathic scoliosis, cervical region	0.9
M41.23	Other idiopathic scoliosis, cervicothoracic region	0.9
M41.24	Other idiopathic scoliosis, thoracic region	0.9
M41.25	Other idiopathic scoliosis, thoracolumbar region	0.9
M41.26	Other idiopathic scoliosis, lumbar region	0.9
M41.27	Other idiopathic scoliosis, lumbosacral region	0.9
M41.28	Other idiopathic scoliosis, sacral and sacrococcygeal region	0.9
M41.30	Thoracogenic scoliosis, multiple sites in spine	0.9
M41.31	Thoracogenic scoliosis, occipito-atlanto-axial region	0.9
M41.32	Thoracogenic scoliosis, cervical region	0.9
M41.33	Thoracogenic scoliosis, cervicothoracic region	0.9
M41.34	Thoracogenic scoliosis, thoracic region	0.9
M41.35	Thoracogenic scoliosis, thoracolumbar region	0.9
M41.36	Thoracogenic scoliosis, lumbar region	0.9
M41.37	Thoracogenic scoliosis, lumbosacral region	0.9
M41.38	Thoracogenic scoliosis, sacral and sacrococcygeal region	0.9
M41.40	Neuromuscular scoliosis, multiple sites in spine	0.9
M41.41	Neuromuscular scoliosis, occipito-atlanto-axial region	0.9
M41.42	Neuromuscular scoliosis, cervical region	0.9
M41.43	Neuromuscular scoliosis, cervicothoracic region	0.9
M41.44	Neuromuscular scoliosis, thoracic region	0.9
M41.45	Neuromuscular scoliosis, thoracolumbar region	0.9
M41.46	Neuromuscular scoliosis, lumbar region	0.9
M41.47	Neuromuscular scoliosis, lumbosacral region	0.9
M41.48	Neuromuscular scoliosis, sacral and sacrococcygeal region	0.9
M41.50	Other secondary scoliosis, multiple sites in spine	0.9
M41.51	Other secondary scoliosis, occipito-atlanto-axial region	0.9
M41.52	Other secondary scoliosis, cervical region	0.9
M41.53	Other secondary scoliosis, cervicothoracic region	0.9
M41.54	Other secondary scoliosis, thoracic region	0.9
M41.55	Other secondary scoliosis, thoracolumbar region	0.9
M41.56	Other secondary scoliosis, lumbar region	0.9
M41.57	Other secondary scoliosis, lumbosacral region	0.9
M41.58	Other secondary scoliosis, sacral and sacrococcygeal region	0.9
M41.80	Other forms of scoliosis, multiple sites in spine	0.9
M41.81	Other forms of scoliosis, occipito-atlanto-axial region	0.9
M41.82	Other forms of scoliosis, cervical region	0.9

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M41.83	Other forms of scoliosis, cervicothoracic region	0.9
M41.84	Other forms of scoliosis, thoracic region	0.9
M41.85	Other forms of scoliosis, thoracolumbar region	0.9
M41.86	Other forms of scoliosis, lumbar region	0.9
M41.87	Other forms of scoliosis, lumbosacral region	0.9
M41.88	Other forms of scoliosis, sacral and sacrococcygeal region	0.9
M41.89	Other forms of scoliosis, site unspecified	0.9
M41.90	Unspecified scoliosis, multiple sites in spine	0.9
M41.91	Unspecified scoliosis, occipito-atlanto-axial region	0.9
M41.92	Unspecified scoliosis, cervical region	0.9
M41.93	Unspecified scoliosis, cervicothoracic region	0.9
M41.94	Unspecified scoliosis, thoracic region	0.9
M41.95	Unspecified scoliosis, thoracolumbar region	0.9
M41.96	Unspecified scoliosis, lumbar region	0.9
M41.97	Unspecified scoliosis, lumbosacral region	0.9
M41.98	Unspecified scoliosis, sacral and sacrococcygeal region	0.9
M48.00	Spinal stenosis, multiple sites in spine	0.5
M48.01	Spinal stenosis, occipito-atlanto-axial region	0.5
M48.02	Spinal stenosis, cervical region	0.5
M48.03	Spinal stenosis, cervicothoracic region	0.5
M48.04	Spinal stenosis, thoracic region	0.5
M48.05	Spinal stenosis, thoracolumbar region	0.5
M48.06	Spinal stenosis, lumbar region	0.5
M48.07	Spinal stenosis, lumbosacral region	0.5
M48.08	Spinal stenosis, sacral and sacrococcygeal region	0.5
M48.10	Ankylosing hyperostosis [Forestier], multiple sites in spine	0.5
M48.11	Ankylosing hyperostosis [Forestier], occipito-atlanto-axial region	0.5
M48.12	Ankylosing hyperostosis [Forestier], cervical region	0.5
M48.13	Ankylosing hyperostosis [Forestier], cervicothoracic region	0.5
M48.14	Ankylosing hyperostosis [Forestier], thoracic region	0.5
M48.15	Ankylosing hyperostosis [Forestier], thoracolumbar region	0.5
M48.16	Ankylosing hyperostosis [Forestier], lumbar region	0.5
M48.17	Ankylosing hyperostosis [Forestier], lumbosacral region	0.5
M48.18	Ankylosing hyperostosis [Forestier], sacral and sacrococcygeal region	0.5
M48.20	Kissing spine, multiple sites in spine	0.5
M48.21	Kissing spine, occipito-atlanto-axial region	0.5
M48.22	Kissing spine, cervical region	0.5
M48.23	Kissing spine, cervicothoracic region	0.5
M48.24	Kissing spine, thoracic region	0.5
M48.25	Kissing spine, thoracolumbar region	0.5
M48.26	Kissing spine, lumbar region	0.5
M48.27	Kissing spine, lumbosacral region	0.5

ICD-10-		
AM Eleventh Edition Code	Description	FRIC Score
M48.28	Kissing spine, sacral and sacrococcygeal region	0.5
M48.30	Traumatic spondylopathy, multiple sites in spine	0.5
M48.31	Traumatic spondylopathy, occipito-atlanto-axial region	0.5
M48.32	Traumatic spondylopathy, cervical region	0.5
M48.33	Traumatic spondylopathy, cervicothoracic region	0.5
M48.34	Traumatic spondylopathy, thoracic region	0.5
M48.35	Traumatic spondylopathy, thoracolumbar region	0.5
M48.36	Traumatic spondylopathy, lumbar region	0.5
M48.37	Traumatic spondylopathy, lumbosacral region	0.5
M48.38	Traumatic spondylopathy, sacral and sacrococcygeal region	0.5
M48.40	Fatigue fracture of vertebra, multiple sites in spine	0.5
M48.41	Fatigue fracture of vertebra, occipito-atlanto-axial region	0.5
M48.42	Fatigue fracture of vertebra, cervical region	0.5
M48.43	Fatigue fracture of vertebra, cervicothoracic region	0.5
M48.44	Fatigue fracture of vertebra, thoracic region	0.5
M48.45	Fatigue fracture of vertebra, thoracolumbar region	0.5
M48.46	Fatigue fracture of vertebra, lumbar region	0.5
M48.47	Fatigue fracture of vertebra, lumbosacral region	0.5
M48.48	Fatigue fracture of vertebra, sacral and sacrococcygeal region	0.5
M48.50	Collapsed vertebra, not elsewhere classified, multiple sites in spine	0.5
M48.51	Collapsed vertebra, not elsewhere classified, occipito-atlanto-axial region	0.5
M48.52	Collapsed vertebra, not elsewhere classified, cervical region	0.5
M48.53	Collapsed vertebra, not elsewhere classified, cervicothoracic region	0.5
M48.54	Collapsed vertebra, not elsewhere classified, thoracic region	0.5
M48.55	Collapsed vertebra, not elsewhere classified, thoracolumbar region	0.5
M48.56	Collapsed vertebra, not elsewhere classified, lumbar region	0.5
M48.57	Collapsed vertebra, not elsewhere classified, lumbosacral region	0.5
M48.58	Collapsed vertebra, not elsewhere classified, sacral and sacrococcygeal region	0.5
M48.80	Other specified spondylopathies, multiple sites in spine	0.5
M48.81	Other specified spondylopathies, occipito-atlanto-axial region	0.5
M48.82	Other specified spondylopathies, cervical region	0.5
M48.83	Other specified spondylopathies, cervicothoracic region	0.5
M48.84	Other specified spondylopathies, thoracic region	0.5
M48.85	Other specified spondylopathies, thoracolumbar region	0.5
M48.86	Other specified spondylopathies, lumbar region	0.5
M48.87	Other specified spondylopathies, lumbosacral region	0.5
M48.88	Other specified spondylopathies, sacral and sacrococcygeal region	0.5
M48.90	Unspecified spondylopathy, multiple sites in spine	0.5
M48.91	Unspecified spondylopathy, occipito-atlanto-axial region	0.5
M48.92	Unspecified spondylopathy, cervical region	0.5
M48.93	Unspecified spondylopathy, cervicothoracic region	0.5
M48.94	Unspecified spondylopathy, thoracic region	0.5

ICD-10-		
AM Eleventh Edition	Description	FRIC Score
Code		
M48.95	Unspecified spondylopathy, thoracolumbar region	0.5
M48.96	Unspecified spondylopathy, lumbar region	0.5
M48.97	Unspecified spondylopathy, lumbosacral region	0.5
M48.98	Unspecified spondylopathy, sacral and sacrococcygeal region	0.5
M79.20	Neuralgia and neuritis, unspecified, multiple sites	1.1
M79.21	Neuralgia and neuritis, unspecified, shoulder region	1.1
M79.22	Neuralgia and neuritis, unspecified, upper arm	1.1
M79.23	Neuralgia and neuritis, unspecified, forearm	1.1
M79.24	Neuralgia and neuritis, unspecified, hand	1.1
M79.25	Neuralgia and neuritis, unspecified, pelvic region and thigh	1.1
M79.26	Neuralgia and neuritis, unspecified, lower leg	1.1
M79.27	Neuralgia and neuritis, unspecified, ankle and foot	1.1
M79.28	Neuralgia and neuritis, unspecified, other site	1.1
M79.40	Hypertrophy of (infrapatellar) fat pad, multiple sites	1.1
M79.41	Hypertrophy of (infrapatellar) fat pad, shoulder region	1.1
M79.42	Hypertrophy of (infrapatellar) fat pad, upper arm	1.1
M79.43	Hypertrophy of (infrapatellar) fat pad, forearm	1.1
M79.44	Hypertrophy of (infrapatellar) fat pad, hand	1.1
M79.45	Hypertrophy of (infrapatellar) fat pad, pelvic region and thigh	1.1
M79.46	Hypertrophy of (infrapatellar) fat pad, lower leg	1.1
M79.47	Hypertrophy of (infrapatellar) fat pad, ankle and foot	1.1
M79.48	Hypertrophy of (infrapatellar) fat pad, other site	1.1
M79.50	Residual foreign body in soft tissue, multiple sites	1.1
M79.51	Residual foreign body in soft tissue, shoulder region	1.1
M79.52	Residual foreign body in soft tissue, upper arm	1.1
M79.53	Residual foreign body in soft tissue, forearm	1.1
M79.54	Residual foreign body in soft tissue, hand	1.1
M79.55	Residual foreign body in soft tissue, pelvic region and thigh	1.1
M79.56	Residual foreign body in soft tissue, lower leg	1.1
M79.57	Residual foreign body in soft tissue, ankle and foot	1.1
M79.58	Residual foreign body in soft tissue, other site	1.1
M79.70	Fibromyalgia, multiple sites	1.1
M79.71	Fibromyalgia, shoulder region	1.1
M79.72	Fibromyalgia, upper arm	1.1
M79.73	Fibromyalgia, forearm	1.1
M79.74	Fibromyalgia, hand	1.1
M79.75	Fibromyalgia, pelvic region and thigh	1.1
M79.76	Fibromyalgia, lower leg	1.1
M79.77	Fibromyalgia, ankle and foot	1.1
M79.78	Fibromyalgia, other	1.1
M79.80	Other specified soft tissue disorders, multiple sites	1.1
M79.81	Other specified soft tissue disorders, shoulder region	1.1

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Edition Code		
M79.82	Other specified soft tissue disorders, upper arm	1.1
M79.83	Other specified soft tissue disorders, forearm	1.1
M79.84	Other specified soft tissue disorders, hand	1.1
M79.85	Other specified soft tissue disorders, pelvic region and thigh	1.1
M79.87	Other specified soft tissue disorders, ankle and foot	1.1
M79.88	Other specified soft tissue disorders, other site	1.1
M80.00	Postmenopausal osteoporosis with pathological fracture, multiple sites	0.8
M80.01	Postmenopausal osteoporosis with pathological fracture, shoulder region	0.8
M80.02	Postmenopausal osteoporosis with pathological fracture, upper arm	0.8
M80.03	Postmenopausal osteoporosis with pathological fracture, forearm	0.8
M80.04	Postmenopausal osteoporosis with pathological fracture, hand	0.8
M80.05	Postmenopausal osteoporosis with pathological fracture, pelvic region and thigh	0.8
M80.06	Postmenopausal osteoporosis with pathological fracture, lower leg	0.8
M80.07	Postmenopausal osteoporosis with pathological fracture, ankle and foot	0.8
M80.08	Postmenopausal osteoporosis with pathological fracture, other site	0.8
M80.10	Postoophorectomy osteoporosis with pathological fracture, multiple sites	0.8
M80.11	Postoophorectomy osteoporosis with pathological fracture, shoulder region	0.8
M80.12	Postoophorectomy osteoporosis with pathological fracture, upper arm	0.8
M80.13	Postoophorectomy osteoporosis with pathological fracture, forearm	0.8
M80.14	Postoophorectomy osteoporosis with pathological fracture, hand	0.8
M80.15	Postoophorectomy osteoporosis with pathological fracture, pelvic region and thigh	0.8
M80.16	Postoophorectomy osteoporosis with pathological fracture, lower leg	0.8
M80.17	Postoophorectomy osteoporosis with pathological fracture, ankle and foot	0.8
M80.18	Postoophorectomy osteoporosis with pathological fracture, other site	0.8
M80.20	Osteoporosis of disuse with pathological fracture, multiple sites	0.8
M80.21	Osteoporosis of disuse with pathological fracture, shoulder region	0.8
M80.22	Osteoporosis of disuse with pathological fracture, upper arm	0.8
M80.23	Osteoporosis of disuse with pathological fracture, forearm	0.8
M80.24	Osteoporosis of disuse with pathological fracture, hand	0.8
M80.25	Osteoporosis of disuse with pathological fracture, pelvic region and thigh	0.8
M80.26	Osteoporosis of disuse with pathological fracture, lower leg	0.8
M80.27	Osteoporosis of disuse with pathological fracture, ankle and foot	0.8
M80.28	Osteoporosis of disuse with pathological fracture, other site	0.8
M80.30	Postprocedural malabsorption osteoporosis with pathological fracture, multiple sites	0.8
M80.31	Postprocedural malabsorption osteoporosis with pathological fracture, shoulder region	0.8
M80.32	Postprocedural malabsorption osteoporosis with pathological fracture, upper arm	0.8
M80.33	Postprocedural malabsorption osteoporosis with pathological fracture, forearm	0.8
M80.34	Postprocedural malabsorption osteoporosis with pathological fracture, hand	0.8
M80.35	Postprocedural malabsorption osteoporosis with pathological fracture, pelvic region and thigh	0.8
M80.36	Postprocedural malabsorption osteoporosis with pathological fracture, lower leg	0.8

ICD-10-		
AM Eleventh Edition Code	Description	FRIC Score
M80.37	Postprocedural malabsorption osteoporosis with pathological fracture, ankle and foot	0.8
M80.38	Postprocedural malabsorption osteoporosis with pathological fracture, other site	0.8
M80.40	Drug-induced osteoporosis with pathological fracture, multiple sites	0.8
M80.41	Drug-induced osteoporosis with pathological fracture, shoulder region	0.8
M80.42	Drug-induced osteoporosis with pathological fracture, upper arm	0.8
M80.43	Drug-induced osteoporosis with pathological fracture, forearm	0.8
M80.44	Drug-induced osteoporosis with pathological fracture, hand	0.8
M80.45	Drug-induced osteoporosis with pathological fracture, pelvic region and thigh	0.8
M80.46	Drug-induced osteoporosis with pathological fracture, lower leg	0.8
M80.47	Drug-induced osteoporosis with pathological fracture, ankle and foot	0.8
M80.48	Drug-induced osteoporosis with pathological fracture, other site	0.8
M80.50	Idiopathic osteoporosis with pathological fracture, multiple sites	0.8
M80.51	Idiopathic osteoporosis with pathological fracture, shoulder region	0.8
M80.52	Idiopathic osteoporosis with pathological fracture, upper arm	0.8
M80.53	Idiopathic osteoporosis with pathological fracture, forearm	0.8
M80.54	Idiopathic osteoporosis with pathological fracture, hand	0.8
M80.55	Idiopathic osteoporosis with pathological fracture, pelvic region and thigh	0.8
M80.56	Idiopathic osteoporosis with pathological fracture, lower leg	0.8
M80.57	Idiopathic osteoporosis with pathological fracture, ankle and foot	0.8
M80.58	Idiopathic osteoporosis with pathological fracture, other site	0.8
M80.80	Other osteoporosis with pathological fracture, multiple sites	0.8
M80.81	Other osteoporosis with pathological fracture, shoulder region	0.8
M80.82	Other osteoporosis with pathological fracture, upper arm	0.8
M80.83	Other osteoporosis with pathological fracture, forearm	0.8
M80.84	Other osteoporosis with pathological fracture, hand	0.8
M80.85	Other osteoporosis with pathological fracture, pelvic region and thigh	0.8
M80.86	Other osteoporosis with pathological fracture, lower leg	0.8
M80.87	Other osteoporosis with pathological fracture, ankle and foot	0.8
M80.88	Other osteoporosis with pathological fracture, other site	0.8
M80.89	Other osteoporosis with pathological fracture, site unspecified	0.8
M80.90	Unspecified osteoporosis with pathological fracture, multiple sites	0.8
M80.91	Unspecified osteoporosis with pathological fracture, shoulder region	0.8
M80.92	Unspecified osteoporosis with pathological fracture, upper arm	0.8
M80.93	Unspecified osteoporosis with pathological fracture, forearm	0.8
M80.94	Unspecified osteoporosis with pathological fracture, hand	0.8
M80.95	Unspecified osteoporosis with pathological fracture, pelvic region and thigh	0.8
M80.96	Unspecified osteoporosis with pathological fracture, lower leg	0.8
M80.97	Unspecified osteoporosis with pathological fracture, ankle and foot	0.8
M80.98	Unspecified osteoporosis with pathological fracture, other site	0.8
M81.00	Postmenopausal osteoporosis, multiple sites	1.4
M81.01	Postmenopausal osteoporosis, shoulder region	1.4
M81.02	Postmenopausal osteoporosis, upper arm	1.4

ICD-10-		
AM Eleventh Edition Code	Description	FRIC Score
M81.03	Postmenopausal osteoporosis, forearm	1.4
M81.04	Postmenopausal osteoporosis, hand	1.4
M81.05	Postmenopausal osteoporosis, pelvic region and thigh	1.4
M81.06	Postmenopausal osteoporosis, lower leg	1.4
M81.07	Postmenopausal osteoporosis, ankle and foot	1.4
M81.08	Postmenopausal osteoporosis, other site	1.4
M81.09	Postmenopausal osteoporosis, site unspecified	1.4
M81.10	Postoophorectomy osteoporosis, multiple sites	1.4
M81.11	Postoophorectomy osteoporosis, shoulder region	1.4
M81.12	Postoophorectomy osteoporosis, upper arm	1.4
M81.13	Postoophorectomy osteoporosis, forearm	1.4
M81.14	Postoophorectomy osteoporosis, hand	1.4
M81.15	Postoophorectomy osteoporosis, pelvic region and thigh	1.4
M81.16	Postoophorectomy osteoporosis, lower leg	1.4
M81.17	Postoophorectomy osteoporosis, ankle and foot	1.4
M81.18	Postoophorectomy osteoporosis, other site	1.4
M81.20	Osteoporosis of disuse, multiple sites	1.4
M81.21	Osteoporosis of disuse, shoulder region	1.4
M81.22	Osteoporosis of disuse, upper arm	1.4
M81.23	Osteoporosis of disuse, forearm	1.4
M81.24	Osteoporosis of disuse, hand	1.4
M81.25	Osteoporosis of disuse, pelvic region and thigh	1.4
M81.26	Osteoporosis of disuse, lower leg	1.4
M81.27	Osteoporosis of disuse, ankle and foot	1.4
M81.28	Osteoporosis of disuse, other site	1.4
M81.29	Osteoporosis of disuse, site unspecified	1.4
M81.30	Postprocedural malabsorption osteoporosis, multiple sites	1.4
M81.31	Postprocedural malabsorption osteoporosis, shoulder region	1.4
M81.32	Postprocedural malabsorption osteoporosis, upper arm	1.4
M81.33	Postprocedural malabsorption osteoporosis, forearm	1.4
M81.34	Postprocedural malabsorption osteoporosis, hand	1.4
M81.35	Postprocedural malabsorption osteoporosis, pelvic region and thigh	1.4
M81.36	Postprocedural malabsorption osteoporosis, lower leg	1.4
M81.37	Postprocedural malabsorption osteoporosis, ankle and foot	1.4
M81.38	Postprocedural malabsorption osteoporosis, other site	1.4
M81.39	Postprocedural malabsorption osteoporosis, site unspecified	1.4
M81.40	Drug-induced osteoporosis, multiple sites	1.4
M81.41	Drug-induced osteoporosis, shoulder region	1.4
M81.42	Drug-induced osteoporosis, upper arm	1.4
M81.43	Drug-induced osteoporosis, forearm	1.4
M81.44	Drug-induced osteoporosis, hand	1.4
M81.45	Drug-induced osteoporosis, pelvic region and thigh	1.4

ICD-10-		
AM	Description	FRIC
Eleventh Edition	Description	Score
Code		
M81.46	Drug-induced osteoporosis, lower leg	1.4
M81.47	Drug-induced osteoporosis, ankle and foot	1.4
M81.48	Drug-induced osteoporosis, other site	1.4
M81.50	Idiopathic osteoporosis, multiple sites	1.4
M81.51	Idiopathic osteoporosis, shoulder region	1.4
M81.52	Idiopathic osteoporosis, upper arm	1.4
M81.53	Idiopathic osteoporosis, forearm	1.4
M81.54	Idiopathic osteoporosis, hand	1.4
M81.55	Idiopathic osteoporosis, pelvic region and thigh	1.4
M81.56	Idiopathic osteoporosis, lower leg	1.4
M81.57	Idiopathic osteoporosis, ankle and foot	1.4
M81.58	Idiopathic osteoporosis, other site	1.4
M81.60	Localised osteoporosis [Lequesne], multiple sites	1.4
M81.61	Localised osteoporosis [Lequesne], shoulder region	1.4
M81.62	Localised osteoporosis [Lequesne], upper arm	1.4
M81.63	Localised osteoporosis [Lequesne], forearm	1.4
M81.64	Localised osteoporosis [Lequesne], hand	1.4
M81.65	Localised osteoporosis [Lequesne], pelvic region and thigh	1.4
M81.66	Localised osteoporosis [Lequesne], lower leg	1.4
M81.67	Localised osteoporosis [Lequesne], ankle and foot	1.4
M81.68	Localised osteoporosis [Lequesne], other site	1.4
M81.80	Other osteoporosis, multiple sites	1.4
M81.81	Other osteoporosis, shoulder region	1.4
M81.82	Other osteoporosis, upper arm	1.4
M81.83	Other osteoporosis, forearm	1.4
M81.84	Other osteoporosis, hand	1.4
M81.85	Other osteoporosis, pelvic region and thigh	1.4
M81.86	Other osteoporosis, lower leg	1.4
M81.87	Other osteoporosis, ankle and foot	1.4
M81.88	Other osteoporosis, other site	1.4
M81.90	Unspecified osteoporosis, multiple sites	1.4
M81.91	Unspecified osteoporosis, shoulder region	1.4
M81.92	Unspecified osteoporosis, upper arm	1.4
M81.93	Unspecified osteoporosis, forearm	1.4
M81.94	Unspecified osteoporosis, hand	1.4
M81.95	Unspecified osteoporosis, pelvic region and thigh	1.4
M81.96	Unspecified osteoporosis, lower leg	1.4
M81.97	Unspecified osteoporosis, ankle and foot	1.4
M81.98	Unspecified osteoporosis, other site	1.4
N17.0	Acute kidney failure with tubular necrosis	1.8
N17.1	Acute kidney failure with acute cortical necrosis	1.8
N17.1	Acute kidney failure with acute conteal necrosis Acute kidney failure with medullary necrosis	1.8
1311.2	Thouse mariey relief of the modellary fictions	1.0

ICD-10-		
Eleventh Edition Code	Description	FRIC Score
N17.8	Other acute kidney failure	1.8
N17.9	Acute kidney failure, unspecified	1.8
N18.4	Chronic kidney disease, stage 4	1.4
N18.5	Chronic kidney disease, stage 5	1.4
N18.9	Chronic kidney disease, unspecified	1.4
N20.0	Calculus of kidney	0.7
N20.1	Calculus of ureter	0.7
N20.2	Calculus of kidney with calculus of ureter	0.7
N20.9	Urinary calculus, unspecified	0.7
N28.0	Ischaemia and infarction of kidney	1.3
N28.8	Other specified disorders of kidney and ureter	1.3
N39.0	Urinary tract infection, site not specified	3.2
N39.1	Persistent proteinuria, unspecified	3.2
N39.2	Orthostatic proteinuria, unspecified	3.2
N39.3	Stress incontinence	3.2
N39.4	Other specified urinary incontinence	3.2
N39.81	Loin pain/haematuria syndrome	3.2
N39.88	Other specified disorders of urinary system	3.2
R00.3	Pulseless electrical activity, not elsewhere classified	0.7
R02	Gangrene, not elsewhere classified	1
R32	Unspecified urinary incontinence	1.2
R40.2	Coma	2.5
R56.0	Febrile convulsions	2.6
R56.8	Other and unspecified convulsions	2.6
S01.0	Open wound of scalp	1.1
S01.1	Open wound of eyelid and periocular area	1.1
S01.20	Open wound of nose, part unspecified	1.1
S01.21	Open wound of nose, external skin	1.1
S01.22	Open wound of nares (nostril)	1.1
S01.23	Open wound of nasal septum	1.1
S01.29	Open wound of other and multiple parts of nose	1.1
S01.30	Open wound of external ear, part unspecified	1.1
S01.31	Open wound of auricle	1.1
S01.33	Open wound of tragus	1.1
S01.34	Open wound of external auditory meatus	
S01.35	Open wound of eustachian tube	
S01.36	Open wound of ossicles	
S01.37	Open wound of ear drum	
S01.38	Open wound of inner ear	1.1
S01.39	Open wound of other and multiple parts of ear and auditory structures	1.1
S01.41	Open wound of cheek	1.1
S01.42	Open wound of maxillary region	1.1

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AM		FRIC
Eleventh Edition	Description	Score
Code		
S01.43	Open wound of mandibular region	1.1
S01.49	Open wound of other and multiple sites of cheek and temporomandibular area	1.1
S01.50	Open wound of mouth, part unspecified	1.1
S01.51	Open wound of lip	1.1
S01.52	Open wound of buccal mucosa	1.1
S01.53	Open wound of gum (alveolar process)	1.1
S01.54	Open wound of tongue and floor of mouth	1.1
S01.55	Open wound of palate	1.1
S01.59	Open wound of other and multiple parts of lip and oral cavity	1.1
S01.7	Multiple open wounds of head	1.1
S01.81	Open wound (of any part of head) communicating with a fracture	1.1
S01.82	Open wound (of any part of head) communicating with a dislocation	1.1
S01.83	Open wound (of any part of head) communicating with an intracranial injury	1.1
S01.88	Open wound of other parts of head	1.1
S01.9	Open wound of head, part unspecified	1.1
S06.01	Loss of consciousness of unspecified duration	2.4
S06.02	Loss of consciousness of brief duration [less than 30 minutes]	2.4
S06.03	Loss of consciousness of moderate duration [30 minutes to 24 hours]	2.4
S06.04	Loss of consciousness of prolonged duration [more than 24 hours] with return to pre- existing conscious level	2.4
S06.05	Loss of consciousness of prolonged duration [more than 24 hours] without return to pre-existing conscious level	2.4
S06.1	Traumatic cerebral oedema	2.4
S06.20	Diffuse cerebral and cerebellar brain injury, unspecified	2.4
S06.21	Diffuse cerebral contusions	2.4
S06.22	Diffuse cerebellar contusions	2.4
S06.23	Multiple intracerebral and cerebellar haematomas	2.4
S06.28	Other diffuse cerebral and cerebellar injury	2.4
S06.30	Focal cerebral and cerebellar injury, unspecified	2.4
S06.31	Focal cerebral contusion	2.4
S06.32	Focal cerebellar contusion	2.4
S06.33	Focal cerebral haematoma	2.4
S06.34	Focal cerebellar haematoma	2.4
S06.38	Other focal cerebral and cerebellar injury	2.4
S06.4	Epidural haemorrhage	2.4
S06.5	Traumatic subdural haemorrhage	2.4
S06.6	Traumatic subarachnoid haemorrhage	2.4
S06.8	Other intracranial injuries	2.4
S06.9	Intracranial injury, unspecified	2.4
S09.0	Injury of blood vessels of head, not elsewhere classified	1.2
S09.1	Injury of muscle and tendon of head	1.2
S09.2	Traumatic rupture of ear drum	1.2

ICD-10-		
AM Eleventh	Description	FRIC
Edition Code		Score
S09.7	Multiple injuries of head	1.2
S09.8	Other specified injuries of head	1.2
S09.9	Unspecified injury of head	1.2
S22.00	Fracture of thoracic vertebra, level unspecified	1.8
S22.01	Fracture of thoracic vertebra, T1 and T2 level	1.8
S22.02	Fracture of thoracic vertebra, T3 and T4 level	1.8
S22.03	Fracture of thoracic vertebra, T5 and T6 level	1.8
S22.04	Fracture of thoracic vertebra, T7 and T8 level	1.8
S22.05	Fracture of thoracic vertebra, T9 and T10 level	1.8
S22.06	Fracture of thoracic vertebra, T11 and T12 level	1.8
S22.1	Multiple fractures of thoracic spine	1.8
S22.2	Fracture of sternum	1.8
S22.31	Fracture of first rib	1.8
S22.32	Fracture of one rib, other than first rib	1.8
S22.40	Multiple rib fractures, unspecified	1.8
S22.41	Multiple rib fractures, involving first rib	1.8
S22.42	Multiple rib fractures, involving two ribs	1.8
S22.43	Multiple rib fractures, involving three ribs	1.8
S22.44	Multiple rib fractures involving four or more ribs	1.8
S22.5	Flail chest	1.8
S22.8	Fracture of other parts of bony thorax	1.8
S22.9	Fracture of bony thorax, part unspecified	1.8
S32.00	Fracture of lumbar vertebra, level unspecified	1.4
S32.01	Fracture of lumbar vertebra, L1 level	1.4
S32.02	Fracture of lumbar vertebra, L2 level	1.4
S32.03	Fracture of lumbar vertebra, L3 level	1.4
S32.04	Fracture of lumbar vertebra, L4 level	1.4
S32.05	Fracture of lumbar vertebra, L5 level	1.4
S32.1	Fracture of sacrum	1.4
S32.2	Fracture of coccyx	1.4
S32.3	Fracture of ilium	1.4
S32.4	Fracture of acetabulum	1.4
S32.5	Fracture of pubis	1.4
S32.7	Multiple fractures of lumbar spine with pelvis	1.4
S32.81	Fracture of ischium	1.4
S32.82	Fracture of lumbosacral spine, part unspecified	
S32.83	Fracture of pelvis, part unspecified	
S32.89	Other and multiple pelvic fractures	
S42.00	Fracture of clavicle, part unspecified	2.3
S42.01	Fracture of sternal end of clavicle	2.3
S42.02	Fracture of shaft of clavicle	2.3
S42.03	Fracture of acromial end of clavicle	2.3

ICD-10-		
AM Eleventh Edition Code	Description	FRIC Score
S42.09	Multiple fractures of clavicle	2.3
S42.10	Fracture of scapula, part unspecified	2.3
S42.11	Fracture of body of scapula	2.3
S42.12	Fracture of acromial process	2.3
S42.13	Fracture of coracoid process	2.3
S42.14	Fracture of glenoid cavity and neck of scapula	2.3
S42.19	Multiple fractures of scapula	2.3
S42.20	Fracture of upper end of humerus, part unspecified	2.3
S42.21	Fracture of head of humerus	2.3
S42.22	Fracture of surgical neck of humerus	2.3
S42.23	Fracture of anatomical neck of humerus	2.3
S42.24	Fracture of greater tuberosity of humerus	2.3
S42.29	Fracture of other and multiple parts of upper end of humerus	2.3
S42.3	Fracture of shaft of humerus	2.3
S42.40	Fracture of lower end of humerus, part unspecified	2.3
S42.41	Supracondylar fracture of humerus	2.3
S42.42	Fracture of lateral condyle of humerus	2.3
S42.43	Fracture of medial condyle of humerus	2.3
S42.44	Fracture of condyle(s) of humerus, unspecified	2.3
S42.45	T-shaped fracture of distal humerus	2.3
S42.49	Other and multiple fractures of lower end of humerus	2.3
S42.7	Multiple fractures of clavicle, scapula and humerus	2.3
S42.8	Fracture of other parts of shoulder and upper arm	2.3
S42.9	Fracture of shoulder girdle, part unspecified	2.3
S51.0	Open wound of elbow	0.5
S51.7	Multiple open wounds of forearm	0.5
S51.81	Open wound (of any part of forearm) communicating with a fracture	0.5
S51.82	Open wound (of any part of forearm) communicating with a dislocation	0.5
S51.88	Open wound of other parts of forearm	0.5
S51.9	Open wound of forearm, part unspecified	0.5
S72.00	Fracture of neck of femur, part unspecified	1.4
S72.01	Fracture of intracapsular section of femur	1.4
S72.02	Fracture of upper epiphysis (separation) of femur	1.4
S72.03	Fracture of subcapital section of femur	1.4
S72.04	Fracture of midcervical section of femur	1.4
S72.05	Fracture of base of neck of femur	1.4
S72.08	Fracture of other parts of neck of femur	1.4
S72.10	Fracture of trochanteric section of femur, unspecified	1.4
S72.11	Fracture of intertrochanteric section of femur	1.4
S72.2	Subtrochanteric fracture	1.4
S72.3	Fracture of shaft of femur	1.4
S72.40	Fracture of lower end of femur, part unspecified	1.4

ICD-10- AM Eleventh Edition Code	Description	FRIC Score
S72.41	Fracture of femoral condyle	1.4
S72.42	Fracture of lower epiphysis (separation) of femur	1.4
S72.43	Supracondylar fracture of femur	1.4
S72.44	Intercondylar fracture of femur	1.4
S72.7	Multiple fractures of femur	1.4
S72.8	Fractures of other parts of femur	1.4
S72.9	Fracture of femur, part unspecified	1.4
T83.0	Mechanical complication of urinary (indwelling) catheter	2.4
T83.1	Mechanical complication of other urinary devices and implants	2.4
T83.2	Mechanical complication of graft of urinary organ	2.4
T83.3	Mechanical complication of intrauterine device	2.4
T83.4	Mechanical complication of other prosthetic devices, implants and grafts in genital tract	2.4
T83.5	Infection and inflammatory reaction due to prosthetic device, implant and graft in urinary system	2.4
T83.6	Infection and inflammatory reaction due to prosthetic device, implant and graft in genital tract	2.4
T83.81	Haemorrhage and haematoma following insertion of genitourinary prosthetic devices, implants and grafts	2.4
T83.82	Embolism and thrombosis following insertion of genitourinary prosthetic devices, implants and grafts	2.4
T83.83	Pain following insertion of genitourinary prosthetic devices, implants and grafts	2.4
T83.84	Stenosis following insertion of genitourinary prosthetic devices, implants and grafts	2.4
T83.85	Erosion of genitourinary mesh and other prosthetic materials	2.4
T83.89	Other specified complications of genitourinary devices, implants and grafts	2.4
T83.9	Unspecified complication of genitourinary prosthetic device, implant and graft	2.4
Z06.51	Resistance to penicillin	0.8

A number of diagnosis codes have been excluded from consideration in the Frailty Related Index of Comorbidities (FRIC) model based on the guiding principles used during the development of the Australian National Subacute and Non-acute Patient classification (and consistent with the approach used for the Episode Clinical Complexity (ECC) Model in the Australian Refined Diagnosis Related Group Version 10.0).

Some diagnosis codes are excluded unconditionally - for further details see the AN-SNAP V5 Final Report.

Four diagnosis codes are excluded conditionally depending on other diagnoses assigned in the episode. Conditional exclusions have been identified for particular aetiology (dagger) and manifestation (asterisk) pairs of codes in scope for the FRIC. In these cases, the aetiology code is excluded from being assigned a FRIC score whenever the manifestation code is present as per Table 2: Conditional Exclusion Table.

<u>'</u>						
Conditional Exclusion Table.						
Excluded aetiology codes		Conditional Manif	estation Codes			
G30.0	Alzheimer's disease with early onset	F00.0	Early dementia in Alzheimer's dis			
G30.1 Alzheimer's disease with late onset		F00.1	Late dementia in Alzheimer's dis			
G30.8 Other Alzheimer's disease		F00.2	Alzheimer's dementia atypic / mixed			
G30.9	Alzheimer's disease unspecified	F00.9	Alzheimer's dementia unsp			

Appendix H - Impairmentspecific FIMTM Motor item weights

Table 42. Impairment group-specific FIM™ item weights for admitted adult rehabilitation overnight classes

Truncated AROC impairment code	Impairment Group	FIM 1 Eating	FIM 2 Grooming	FIM 3 Bathing	FIM 4 Dressing upper body	FIM 5 Dressing lower body	FIM 6 Toileting
1	Stroke	0.967	0.994	1.107	0.864	0.972	1.076
2	Brain dysfunction	1.244	1.106	1.063	0.742	0.748	0.996
3	Neurological conditions	1.047	1.039	1.125	0.81	0.983	1.083
4	Spinal cord dysfunction	1.12	0.828	1.441	0.502	1.244	1.332
5	Amputation of limb	0.406	0.479	1.260	0.854	0.938	1.254
6	Arthritis	1.185	1.159	1.204	0.657	0.821	1.082
7	Pain syndromes	0.956	1.050	1.125	0.499	0.684	1.034
8.1	Orthopaedic - fractures	0.798	0.881	1.090	0.463	0.933	1.249
8.2	Orthopaedic post surgery	1.035	1.107	1.134	0.436	0.704	1.144
8.3	Orthopaedic soft tissue injury	1.035	1.107	1.134	0.436	0.704	1.144
9	Cardiac	0.956	1.050	1.125	0.499	0.684	1.034
10	Pulmonary	0.956	1.050	1.125	0.499	0.684	1.034
11	Burns	1.185	1.159	1.204	0.657	0.821	1.082
12	Congenital deformities	1.185	1.159	1.204	0.657	0.821	1.082
13	Other disabling impairments	1.185	1.159	1.204	0.657	0.821	1.082
14	Major multiple trauma	1.174	1.097	1.08	0.588	0.682	1.044
15	Developmental disabilities	1.185	1.159	1.204	0.657	0.821	1.082
16	Reconditioning restorative	0.809	0.894	1.121	0.563	0.857	1.145

Table 43. Impairment group-specific FIM™ item weights for admitted adult rehabilitation overnight classes (continued)

Truncated AROC impairment code	Impairment Group	FIM 7 Bladder mgmt	FIM 8 Bowel management	FIM 9 Transfer bed / chair / wheelchair	FIM 10 Transfer toilet	FIM 11 Transfer bath / shower	FIM 12 Loco- motion	FIM 13 Stairs*
1	Stroke	0.856	0.890	1.127	1.087	1.103	0.957	1.000
2	Brain dysfunction	0.899	1.075	1.061	1.057	1.073	0.937	1.000
3	Neurological conditions	0.839	0.892	1.172	1.071	1.067	0.872	1.000
4	Spinal cord dysfunction	1.003	1.051	1.229	0.979	1.071	0.199	1.000
5	Amputation of limb	0.699	0.890	1.455	1.391	1.409	0.964	1.000
6	Arthritis	0.926	0.980	1.164	1.061	1.072	0.689	1.000
7	Pain syndromes	0.991	0.967	1.354	1.265	1.274	0.801	1.000
8.1	Orthopaedic - fractures	0.873	0.979	1.462	1.221	1.260	0.790	1.000
8.2	Orthopaedic post surgery	0.948	1.068	1.357	1.199	1.238	0.631	1.000
8.3	Orthopaedic soft tissue injury	0.948	1.068	1.357	1.199	1.238	0.631	1.000
9	Cardiac	0.991	0.967	1.354	1.265	1.274	0.801	1.000
10	Pulmonary	0.991	0.967	1.354	1.265	1.274	0.801	1.000
11	Burns	0.926	0.980	1.164	1.061	1.072	0.689	1.000
12	Congenital deformities	0.926	0.980	1.164	1.061	1.072	0.689	1.000
13	Other disabling impairments	0.926	0.980	1.164	1.061	1.072	0.689	1.000
14	Major multiple trauma	1.039	1.184	1.106	1.09	1.088	0.829	1.000
15	Developmental disabilities	0.926	0.980	1.164	1.061	1.072	0.689	1.000
16	Reconditioning restorative	0.838	0.886	1.385	1.292	1.297	0.913	1.000

Notes: FIM13 (Stairs) unweighted in AN-SNAP V5 due to the majority of episodes across various impairments groups having a FIM13 (stairs) score of 1 (for example, 94.74% of episodes within Amputation of limb have a FIM13 (stairs) score of 1).

Weighted FIM[™] Motor Groups

AN-SNAP V5 retains the same groups established in AN-SNAP V4 to ensure adequate episodes for the FIMTM Motor weight calculation. Impairments that are grouped together in the classification adopted the same FIMTM Motor weights. The impairment types are outlined in Table 3 and are categorised within the following groupings:

Group 1	Arthritis, burns, congenital deformities, other disabling impairments and developmental disabilities	
Group 2	Pain syndromes, cardiac and pulmonary	
Group 3	Orthopaedic fractures, post-surgery and soft tissue injury	

All other impairment types were treated independently due to a sufficient volume of episodes used to determine the FIM Motor weights.

Group 1 captures the impairment groups with low episode volume to obtain a meaningful set of FIMTM Motor weights. Group 2 was developed after a clinical subgroup recommendation of combining 'Pain, cardiac and pulmonary' impairment types into a single class in AN-SNAP V4. This recommendation was supported by subsequent statistical analysis. Group 3 captures all the orthopaedic impairment types due to the clinical similarity of treatment and conditions.

Appendix I - Australasian Rehabilitation Outcomes Centre Impairment Codes – Version 4.0 dataset (July 2012)

Table 44. Australasian Rehabilitation Outcomes Centre Impairment Codes - Version 4.0 dataset (July 2012) 24

Stroke	Amputation of limb	Cardiac
<u>Haemorrhagic</u>	Not resulting from trauma	9.1 Following recent onset of new
1.11 Left body involvement	5.11 Single upper above elbow	cardiac
1.12 Right body involvement	5.12 Single upper below elbow	impairment
1.13 Bilateral involvement	5.13 Single lower above knee	9.2 Chronic cardiac insufficiency
1.14 No paresis	(includes	9.3 Heart and heart/lung transplant
1.19 Other Stroke	through knee)	
I <u>schaemic</u>	5.14 Single lower below knee	
1.21 Left body involvement (right brain)	5.15 Double lower above knee (includes	Pulmonary 10.1 Chronic obstructive pulmonary
1.22 Right body involvement (left	through knee)	disease
brain)	5.16 Double lower above/below	10.2 Lung transplant
1.23 Bilateral involvement	knee	10.9 Other pulmonary
1.24 No paresis	5.17 Double lower below knee	
1.29 Other stroke	5.18 Partial foot (single or double)	
	5.19 Other amputation not from trauma	
Brain dysfunction	Resulting from trauma	Burns
Non-traumatic	5.21 Single upper above elbow	11 Burns
2.11 Sub-arachnoid haemorrhage	5.22 Single upper below elbow	
2.12 Anoxic brain damage	5.23 Single lower above knee	
2.13 Other non-traumatic brain	(includes	
dysfunction	through knee)	Congenital deformities
Traumatic	5.24 Single lower below knee	12.1 Spina bifida
2.21 Open injury	5.25 Double lower above knee	12.9 Other congenital deformity
2.22 Closed injury	(includes	-2.0 Garar Gerigerman Gereining
	through knee)	Other disabling impairments
	5.26 Double lower above/below	13.1 Lymphoedema
	knee	13.3 Conversion disorder
	5.27 Double lower below knee	13.9 Other disabling impairments
	5.28 Partial foot (single or double)	that cannot be classified into a
	5.29 Other amputation from trauma	specific group

²⁴ See Australasian Rehabilitation Outcomes Centre at https://www.uow.edu.au/ahsri/aroc/

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Neurological conditions	Arthritis	Major multiple trauma
3.1 Multiple Sclerosis	6.1 Rheumatoid arthritis	14.1 Brain + spinal cord injury
3.2 Parkinsonism	6.2 Osteoarthritis	14.2 Brain + multiple
3.3 Polyneuropathy	6.9 Other arthritis	fracture/amputation
3.4 Guillian-Barre		14.3 Spinal cord + multi fracture/amputation
3.5 Cerebral palsy		14.9 Other multiple trauma
3.8 Neuromuscular disorders		14.3 Other multiple tradina
3.9 Other neurological conditions		
Spinal cord dysfunction	Pain syndromes	Development disabilities
Non traumatic spinal cord	7.1 Neck pain	15.1 Developmental disabilities
dysfunction	7.2 Back Pain	(excludes cerebral palsy)
4.111 Paraplegia, incomplete	7.3 Extremity pain	
4.112 Paraplegia, complete	7.4 Headache (includes migraine)	
4.1211 Quadriplegia, incomplete C1-4	7.5 Multi-site pain	
4.1212 Quadriplegia, incomplete	7.9 Other pain (includes abdo/chest	
C5-8	wall)	
4.1221 Quadriplegia, complete C1-4		
4.1222 Quadriplegia, complete C5-8		
4.13 Other non-traumatic spinal cord		
dysfunction		
Traumatic spinal cord dysfunction		Reconditioning / restorative
4.211 Paraplegia, incomplete		16.1 Re-conditioning following
4.212 Paraplegia, complete		surgery
4.2211 Quadriplegia, incomplete		16.2 Reconditioning following medical illness
C1-4		16.3 Cancer rehabilitation
4.2212 Quadriplegia, incomplete		10.0 Carloor Toriabilitation
C5-8		
4.2221 Quadriplegia, complete C1-4		
4.2222 Quadriplegia, complete C5-8		
4.23 Other traumatic spinal cord dysfunction		
dysidriction	Outhonoodio conditions	
	Orthopaedic conditions Fractures (includes dislocation)	
	8.111 Fracture of hip, unilateral (incl.	
	#NOF)	
	8.112 Fracture of hip, bilateral (incl. #NOF)	
	8.12 Fracture of shaft of femur	
	8.13 Fracture of pelvis	
	8.141 Fracture of knee	
	8.142 Fracture of lower leg, ankle, foot	
	8.15 Fracture of upper limb	
	8.16 Fracture of spine	
	8.17 Fracture of multiple sites	
	8.19 Other orthopaedic fracture	
	Post Orthopaedic Surgery	
	8.211 Unilateral hip replacement	
	8.212 Bilateral hip replacement	
	8.221 Unilateral knee replacement	
	8.222 Bilateral knee replacement	
	8.231 Knee and hip replacement, same side	
	8.232 Knee and hip replacement,	
	diff sides	

8.24 Shoulder replacement	
8.25 Post spinal surgery	
8.26 Other orthopaedic surgery	
Soft tissue injury	
8.3 Soft tissue injury	

Appendix J - Four character end-class labelling system

Item	Information coded	Codes Char 1	Codes Char 2	Codes Char 3	Codes Char 4	Description
Character 1						
AN-SNAP Version	on	5				Version number

Character 2				
Care type and treatment		Α		Adult rehabilitation
setting – overnight classes		В		Adult palliative care
		С		Adult geriatric evaluation and management
		D		Adult psychogeriatric care
		E		Adult non-acute care
		F		Paediatric rehabilitation
		G		Paediatric palliative care
Care type and treatment setting – same-day classes		J		Adult rehabilitation
		K		Adult palliative care
		L		Adult geriatric evaluation and management
		М		Adult psychogeriatric care
		0		Paediatric rehabilitation
		Р		Paediatric palliative care
Error class		9		Grouping variable missing

Item	Information coded	Codes Char 1	Codes Char 2	Codes Char 3	Codes Char 4	Description
Character 3	Character 3					
Adult Low function				Z		Weighted FIM™ Motor 13 - 18
rehabilitation classes	Single			Α	-	Stroke
	impairment*			В	-	Brain dysfunction
				С		Neurological conditions
				D		Spinal cord dysfunction
				E		Amputation of limb
				Н		Orthopaedic conditions – Fracture
				Р		Major multiple trauma
				R		Reconditioning
	Impairment			2		Orthopaedic conditions – All other group
	Group			3		Cardiac, pain syndromes and pulmonary group
				4		Orthopaedic conditions – Replacement (hip, knee, shoulder) group
				9		All other impairments
Adult palliative				S		Stable phase
care classes	care classes care phase			U		Unstable phase
				D		Deteriorating phase
				Т		Terminal phase
Paediatric classes	NA			0		NA
Admitted GEM	Frailty			L	-	FRIC ≥ 7.4 (Low functioning)
classes	Related Comorbidity			М	-	FRIC 1.9 -7.3 (Mid functioning)
	Index (FRIC)			Н	-	FRIC 0 – 1.8 (High functioning)
Admitted Length of				L		LoS ≥ 92 days
psychogeriatric and non-acute classes	stay (LoS)			S		LoS ≤ 91 days
Same-day classes	NA			0		NA
Error classes	Ungroupable			9		Grouping variable missing

Item	Information coded	Codes Char 1	Codes Char 2	Codes Char 3	Codes Char 4	Description
Character 4						
Sub-group num	ber				1, 2, 3	Sequential numbering of classes after the first split
Error classes					А	Admitted adult rehabilitation – ungroupable
					В	Admitted adult palliative care – ungroupable
					С	Admitted geriatric evaluation and management – ungroupable
					D	Admitted psychogeriatric care – ungroupable
					E	Admitted non-acute care – ungroupable
					F	Admitted paediatric rehabilitation – ungroupable
					G	Admitted paediatric palliative care - ungroupable
					9	All other ungroupable – occurs when there is an error with Episode Type or Care Type

AN-SNAP V5 error classes

Adult error classes

Care type	Class
Rehabilitation	599A
Palliative care	599B
GEM	599C
Psychogeriatric	599D
Non-acute	599E

Paediatric error classes

Care type	Class
Rehabilitation - paediatric	599F
Palliative care - paediatric	599G

All other ungroupable

Class	Description
5999	Occurs when there is an error with episode type or care type

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