Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program:
Accessing and Using Your Provider Participation Report (PPR)

November 2023

PPR Overview

The IPFQR Program PPR summarizes a provider's data submission. IPFQR-eligible providers use PPRs to monitor their data submissions to make sure all annual payment update (APU) requirements are met. However, data submission does not guarantee that the provider will receive the full APU. The PPR updates after the system has successfully processed the data.

Healthcare systems, inpatient psychiatric facilities (IPFs), vendors, and Quality Innovation Network-Quality Improvement Organizations may request authorization to view PPRs for affiliated IPFs. The PPR can assist them with monitoring and supporting their providers' attempts to meet APU data submission requirements.

Running and Viewing Your IPF's PPR

1. In your Internet browser, navigate to https://hqr.cms.gov/hqrng/login.

2. The Hospital Quality Reporting (HQR) log in page will open. Enter your Health Care Quality Information Systems Access Roles and Profile (HARP) user ID and password.

   To view the Terms & Conditions for accessing the HQR system, click the hyperlink below the Password field.

3. Click the **Log in** button.

    If you do not have a HARP account, then click on the Sign-up button and follow instructions to create one. Refer to the Setting Up Your HARP Account for Hospital Quality Reporting webinar for additional guidance.

    Log in

    Enter your HARP user ID and password

    User ID

    UserID123

    Password

    ••••••••••••

    Having trouble logging in?

    By logging in, you agree to the Terms & Conditions.

    [Log in]   [Sign up]

4. Select a device to verify your account. Then, click **Next**.

    Two-factor authentication

    Choose an authentication method

    SMS to +1 XXX-XXX- XXXX ▲▼

    Don't have access to a device? Use another method.

    [Next]   Cancel

5. Continue the two-factor authentication by entering your security code.
    Click on **Continue**.

Two-factor authentication

Code sent via SMS to +1 XXX-XXX-7595

Enter code

123456

↻ Resend code   ⇄ Change method

Next   **Cancel**

6. Once logged in, you will see the HQR landing page.
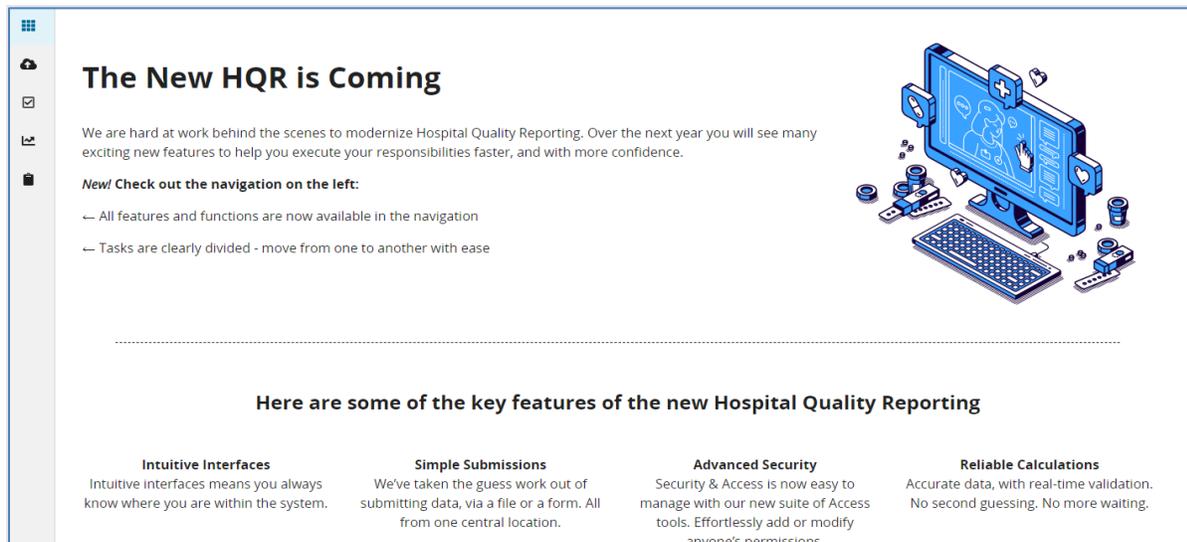
The New HQR is Coming

We are hard at work behind the scenes to modernize Hospital Quality Reporting. Over the next year you will see many exciting new features to help you execute your responsibilities faster, and with more confidence.

New! **Check out the navigation on the left:**

← All features and functions are now available in the navigation

← Tasks are clearly divided - move from one to another with ease

Here are some of the key features of the new Hospital Quality Reporting

Intuitive Interfaces	Simple Submissions	Advanced Security	Reliable Calculations
Intuitive interfaces means you always know where you are within the system.	We've taken the guess work out of submitting data, via a file or a form. All from one central location.	Security & Access is now easy to manage with our new suite of Access tools. Effortlessly add or modify anyone's permissions.	Accurate data, with real-time validation. No second guessing. No more waiting.

Accessing and Using Your PPR

7. From the Dashboard, on the left-hand side of the screen, select **Program Reporting**.
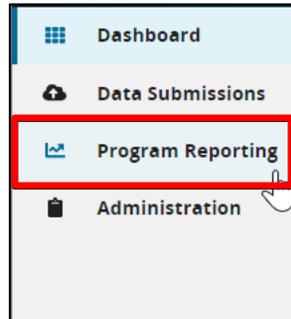
8. Under Program Reporting, click on **Reporting Requirements.**
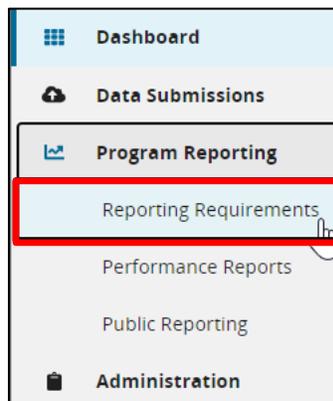
9. On the Reporting Requirements page, select **IPFQR** in the **Program** dropdown. Select the applicable year in the **Fiscal Year** dropdown.

Note: HQR users who have authorization to access multiple providers, select the provider in the **Provider(s)** dropdown or use the search bar to find specific providers by name or CMS Certification Number (CCN).

10. Then, click on **Export CSV**. The CSV Excel spreadsheet is located at the bottom left-hand corner of the screen.

> **Helpful Tips:**
>
> 1. Check the [HQR Systems Known Issues](#) document on QualityNet for any issues affecting the PPR.
>
> 2. Allow ample time before the deadline to review your data. You may need this time to correct the data. IPFs can update/correct their submitted data until the CMS submission deadline. Immediately after that deadline, the CMS Clinical Data Warehouse locks. Any updates made after the submission deadline are not reflected in the data CMS uses for APU determination and public reporting.

Interpreting Your IPF's PPR

The table below interprets data in the IPFQR Program Provider Participation Report.

Notes:

- If no data have been submitted and/or accepted, then the field will display Not Submitted, unless otherwise noted.

- N/A will display when data are not applicable for the reporting quarter.

- Data submission status is only displayed in the Q1 row for the following measure and non-measure data:

PPR Abbreviation	Measure(s) and Common Abbreviation
hbips-evt	Numerator data for the Hospital-Based Inpatient Psychiatric Services (HBIPS)-2 and HBIPS-3
sub	Substance Use Measures (SUB-2, -2a, -3, -3a)
tob	Tobacco Treatment Measures (TOB-3, -3a)
imm	Influenza Immunization (IMM-2)
smd	Screening for Metabolic Disorders (SMD)
tr	Transition Record with Specified Element Received by Discharged Patient (TR-1)
facility-level-data	Non-measure data (NMD) and the denominator for the HBIPS-2 and HBIPS-3 measures

- The COVID-19 Vaccination Coverage Among Health Care Personnel (COVID HCP) measure data will only display in the covid19 column of the PPR after data files from the Center for Disease Control and Prevention's (CDC's) National Healthcare Safety Network (NHSN) system are uploaded into the CMS *HQR Secure Portal*. Each quarter of COVID HCP measure data that CMS received from the CDC displays in the relevant quarter row.

Column Name	Description
fiscal_year	Displays the fiscal year represented in the report
quarter	Displays the quarter of data represented in the row of data
provider_id	Displays the numeric, 6-digit CCN for the main hospital
provider_name	Displays the name of the IPF
state	Displays the state in which the IPF is located
city	Displays the city in which the IPF is located
active_security_official	Displays Yes if the provider has at least one active Security Official.
nop_start_date	Displays the date, mm/dd/yyyy, that the Notice of Participation (NOP) was signed.

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Column Name	Description
nop_end_date	Displays the date, mm/dd/yyyy, that the NOP status changed to Withdrawn or Not Participating.
medicare_accept_date	Displays the effective date, mm/dd/yyyy, for the main hospital's CCN.
daca_completed	Displays Submitted once signed. If not signed during the submission period, it will display Not Submitted. During the non-submission period and in the Q2–Q4 rows, it will display N/A.
covid19_submission	Displays the submission status of the COVID HCP measure as Submitted or Not Submitted.
covid19_last_NHSN_file	Last date CMS received a COVID HCP measure data file from the CDC.
hbips-evt_submission_status	Displays the submission status of the numerator values for the HBIPS-2 and HBIPS-3 measures as Submitted or Not Submitted. During the non-submission period and in the Q2–Q4 rows, it will display N/A.
sub_total_cases	Displays the number of cases for the SUB measure set accepted into the *HQR Secure Portal* in the Q1 row. During the non-submission period and in the Q2–Q4 rows, it will display N/A.
tob_total_cases	Displays the number of cases for the TOB measure set accepted into the *HQR Secure Portal* in the Q1 row. During the non-submission period and in the Q2–Q4 rows, it will display N/A.
imm_total_cases	Displays the number of cases for the IMM-2 measure accepted into the *HQR Secure Portal* in the Q1 row. During the non-submission period and in the Q2–Q4 rows, it will display N/A.
smd_total_cases	Displays the number of cases for the SMD measure accepted into the *HQR Secure Portal* in the Q1 row. During the non-submission period and in the Q2–Q4 rows, it will display N/A.
tr_total_cases	Displays the number of cases for the TR-1 measure accepted into the *HQR Secure Portal* in the Q1 row. During the non-submission period and in the Q2–Q4 rows, it will display N/A.
facility-level-data_submission_status	Displays the submission status of non-measure data and the HBIPS-2 and HBIPS-3 denominator value as Submitted or Not Submitted into the *HQR Secure Portal* in the Q1 row. During the non-submission period and in the Q2–Q4 rows, it will display N/A.