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FY 2019 IPF PPS Final Rule and APU Determination

Questions and Answers

Speakers

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Question 1: The Fiscal Year (FY) 2019 Inpatient Psychiatric Facility Prospective Payment System Final Rule (IPF PPS) finalized the removal of several measures (listed on slide 12) for FY 2020 and subsequent years' payment determination. What is the reporting Calendar Year (CY) associated with FY 2020 payment determination? When are these changes effective? When is the last data collection period and last data submission period for these measures?

CY 2018 discharges are associated with the FY 2020 annual payment updated determination.

The last data collection period for the measures finalized for removal in the FY 2019 IPS PPS Final Rule was CY 2017 (except for the Influenza Vaccination Coverage Among Healthcare Personnel measure, which was collected between October 1, 2017, and March 31, 2018). The data submission period for these measures ended on August 15, 2018 (except for the Influenza Vaccination Coverage Among Healthcare Personnel measure, which was last submitted by May 15, 2018).

The Centers for Medicare & Medicaid Services (CMS) will not require the submission of data for measures removed from the Inpatient Psychiatric Facility Quality Reporting Program. Inpatient psychiatric facilities will not be able to submit any data for the measures CMS finalized for removal in the FY 2019 IPS PPS Final Rule for CY 2018 discharges (i.e., discharges beginning January 1, 2018) during the CY 2019 data submission period.

Question 2: Can you speak to how the Centers for Medicare & Medicaid Services (CMS) will handle facilities that cease to screen for Alcohol Use Screening (SUB-1) and Tobacco Use Screening (TOB-1) now that those measures have been dropped from the Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program, resulting in zero cases eligible for Alcohol Use Brief Intervention Provided or Offered (SUB-2); Tobacco Use Treatment Provided or Offered at Discharge (TOB-3)?



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CMS believes inpatient psychiatric facilities (IPFs) will still need to continue to screen for alcohol use through a standardized assessment instrument consistent with their internal procedures in order to report the denominators for SUB-2; Alcohol Use Brief Intervention Treatment (SUB-2a); Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge (SUB-3); and Alcohol and Other Drug Use Disorder Treatment at Discharge (SUB-3a) measures. However, due to the removal of the SUB-1 measure, facilities will no longer be required to abstract and report SUB-1 data to CMS as part of the IPFQR Program. The same is true for tobacco use; IPFs will need to continue to provide tobacco use screening to ensure they are able to identify the number of patients 18 years of age and older who are current tobacco users and to collect and report TOB-2; Tobacco Use Treatment (TOB-2a); Tobacco Use Treatment Provided or Offered at Discharge (TOB-3); and Tobacco Use Treatment at Discharge (TOB-3a). However, IPFs do not need to abstract and report TOB-1 data to CMS for the IPFQR Program.

Question 3: Could you provide a list of the probable future measure considerations?

Measures that the Centers for Medicare & Medicaid Services (CMS) will consider for the Inpatient Psychiatric Facility Quality Reporting Program are included in the "List of Measures Under Consideration," which is published annually by December 1. For more information, please visit this CMS website: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityMeasures/Pre-Rule-Making.html.

Question 4: If Alcohol Use Screening (SUB-1) and Tobacco Use Screening (TOB-1) measures are removed, hospitals will still need to assess for intervention (for Alcohol Use Brief Intervention Provided or Offered [SUB-2] and Tobacco Use Treatment Provided or Offered [TOB-2]). What was the rationale to remove the screening measures?

> Refer to the Fiscal Year 2019 Inpatient Psychiatric Facility Prospective Payment System Final Rule, published on August



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6, 2018, in the *Federal Register* at https://www.federalregister.gov/documents/2018/08/06/2018-16518/medicare-program-fy-2019-inpatient-psychiatricfacilities-prospective-payment-system-and-quality. Inpatient Psychiatric Facility Quality Reporting Program (83 FR 38576) updates are located on pages 38589–38608 of the *Federal Register*. SUB-1 measure updates are on pages 38595–38596, and the TOB–1 measure updates are on pages 38600–38602.

Question 5: Influenza Immunization (IMM-2) was finalized for removal from the Hospital Inpatient Quality Reporting (IQR) Program. Will the measure still be part of the Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program in Fiscal Year (FY) 2020, which is Calendar Year (CY) 2018 (covering 1Q 2018 and 4Q 2018). Will it follow the Hospital IQR Program and be removed in FY 2021 for CY 2019 (i.e., 1Q 2019)?

> The IMM-2 measure was removed from the Hospital IQR Program. The measure was not removed from the IPFQR Program. Inpatient psychiatric facilities continue to be required to report IMM-2 measure data for the reporting period between October 1, 2018 and March 31, 2019 to the Centers for Medicare & Medicaid Services in CY 2019, and subsequent years.

Question 6: Why were the Screening for Metabolic Disorders and the Transition Record with Specified Elements Received by Discharged Patients measures not listed on the 2020 payment slide?

> The Transition Record with Specified Elements Received by Discharged Patients, Timely Transmission of Transition Record, and Screening for Metabolic Disorders measures were listed in the Fiscal Year 2020 Payment Determination and Subsequent Years Measure Set displayed on slide 22 of the *FY* 2019 IPF PPS Final Rule and APU Determination presentation.



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Question 7: Will we continue to collect 11 elements of data on the Transition Record with Specified Elements Received by Discharged Patients measure?

> Yes. The Transition Record with Specified Elements Received by Discharged Patients and Timely Transmission of Transition Record measures, as currently specified, remain requirements for the Inpatient Psychiatric Facility Quality Reporting Program for Calendar Year 2019 discharges for submission to the Centers for Medicare & Medicaid Services in August 2019 for Fiscal Year 2020 annual payment update determination and subsequent years.