Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program: Accessing Data in Your Facility, State, and National (FSN) Report

November 2023



#### IPFQR Program FSN Report Overview

The IPFQR Program FSN Report provides information about the data that are submitted to the Centers for Medicare & Medicaid Services (CMS). The **facility rate** is specific to the facility accessing the report. The **state and national rates** are calculated approximately 30 days following the end of the submission period. This information is provided to allow an individual facility to compare its facility-specific rates with state and national averages for each measure.

#### **Running and Viewing Your IPF's FSN Report**

- 1. In your Internet browser, navigate to <u>https://hqr.cms.gov/hqrng/login</u>.
- **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 <u>Setting Up Your HARP Account for Hospital</u> <u>Quality Reporting</u> 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.

SMS to +1 XXX-XXX- XXXX			
Don't have access to a device? Use another method.			

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

Two-factor authentication				
Code sent via SMS to +1 XXX-XXX-7595				
Enter code				
123456				
C Resend code				
Next Cancel				

6. Once logged in, you will see the HQR landing page.



7. From the Dashboard, on the left-hand side of the screen, select **Program Reporting**.



8. Under Program Reporting, click on Performance Reports.



A new page will display as depicted in the image below.

	Performance Reports	
2	This is where you can check your Quality Measure and other calculated metrics. Facility, State, and National level calculations are available for the IQR, OQR and PCHQR Programs; Baseline Measure and Percentage Payment Summary calculations are available for the HVBP Program. Access is dependent upon pe	t, ASCQR, IPFQR, ermissions.
Ê	Program Period Even	port CSV
	Select Program	

9. On the Performance Reports page, select **IPFQR** in the **Program** dropdown. Select the applicable year in the **Fiscal Year** dropdown.

To review the report for data of a specific calendar year, select the fiscal year that is two years after the reporting period. For example, to view the CY 2022 chart abstracted and COVID-19 Vaccination Coverage Among Healthcare Personnel (COVID HCP) measure data, open the FY 2024 FSN report.

Program	Fiscal Year	Export CSV
IPFQR	€ 2023 €	Export Cov

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).

Provider(s)	
Search Provider(s)	\$
Select All Providers	
Search by Provider Name or ID	
ABCD MED CTR (CCN-010000)	<b>^</b>
EFGH MED CTR (CCN-010001)	

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

Program	Fiscal Year	Export CSV
IPFQR \$	2023	

11. A window will appear prompting you to save the CSV file to a location on your computer.

12. Once saved to your computer, open the file to review the data.

The cumulative values for the chart-abstracted measures and non-measure data are found in row 2.

To locate the COVID HCP measure data, scroll to columns BL, BM, and BN to review the numerator, denominator, and rate values.

- The facility level COVID HCP measure data are found in row 2.
- The state level COVID HCP measure data are found in row 6
- The national level COVID HCP measure data are found in row 10.

#### Interpreting Your IPF's Measure Data in the FSN Report

The table below interprets IPFQR Program data in the FSN report. Note, COVID HCP measure data will only display in the FSN report after data files from the CDC's NHSN system are uploaded into the CMS *HQR Secure Portal*. If no data are submitted, then the field will be blank.

Column Name	Description
Туре	Displays whether data are at the facility, state, or national level
Payment Fiscal Year	Displays the fiscal year represented in the report
State	Displays the state where the IPF is located in the rows that display facility-level and state- level data. (NATION appears in the rows that show national-level data)
Provider ID	Displays the numeric, 6-digit CCN for the main hospital
Total Annual Discharges	Displays the number of discharges from the IPF during the reporting period.
age_children_1-12_years	Displays the number of children aged 1–12 discharged from the IPF during the reporting period.
age_adolescents_13-17_years	Displays the number of adolescents aged 13– 17 discharged from the IPF during the reporting period.
age_adults_18-64_years	Displays the number of adults aged 18–64 discharged from the IPF during the reporting period.
age_adults_65 years and over	Displays the number of adults aged 65 and older discharged from the IPF during the reporting period.
diagnostic_anxiety_disorders_651	Displays the number of patients with a primary diagnosis of anxiety disorders discharged from the IPF during the reporting period.
diagnostic_cognitive_disorders_653	Displays the number of patients with a primary diagnosis of cognitive disorders discharged from the IPF during the reporting period.
diagnostic_mood_disorders_657	Displays the number of patients with a primary diagnosis of mood disorders discharged from the IPF during the reporting period.

Column Name	Description
diagnostic psychotic disorders 659	Displays the number of patients with a
	primary diagnosis of psychotic disorders
	discharged from the IPF during the reporting
	period.
diagnostic alcohol-	Displays the number of patients with a
related disorders 660	primary diagnosis of alcohol-related
	disorders discharged from the IPF during the
	reporting period.
diagnostic_substance-	Displays the number of patients with a
related_disorders_659	primary diagnosis of substance-related
	disorders discharged from the IPF during the
	reporting period.
all_other_diagnosis	Displays the number of patients with a
	primary diagnosis other than the six
	previously listed who were discharged from
	the IPF during the reporting period.
payer_medicare	Displays the Medicare patients discharged
	from the IPF during the reporting period.
payer_non-medicare	Displays the non-Medicare patients discharged
	from IPF during the reporting period.
HBIPS-2_numerator	Displays the HBIPS-2 numerator value for
	the reporting period.
HBIPS-2_denominator	Displays the HBIPS-2 denominator value for
LIDIDS 2 meter non 1000 metions house	Dignlaws the UDIDE 2 rate new 1000 noticent
HBIPS-2_rate_per_1000_patient_nours	burg for the reporting period
HPIPS 2 numerator	Displays the HPIPS 3 numerator value for
	the reporting period
HBIPS-3 denominator	Displays the HBIPS-3 denominator value for
	the reporting period
HBIPS-3 rate per 1000 patient hours	Displays the HBIPS-3 rate per 1000 patient
	hours for the reporting period.
HBIPS-5 numerator	Displays the HBIPS-5 numerator value for
-	the reporting period.
HBIPS-5 denominator	Displays the HBIPS-5 denominator value for
_	the reporting period.
HBIPS-5 rate per 1000 patient hours	Displays the HBIPS-5 rate per 1000 patient
	hours
screening_numerator	Displays the Screening for Metabolic
	Disorders measure numerator value for the
	reporting period.
screening_denominator	Displays the Screening for Metabolic
	Disorders measure denominator value for the
	reporting period.

Column Name	Description
screening percentage	Displays the Screening for Metabolic
	Disorders measure rate for the reporting
	period.
transition_record_numerator	Displays the Transition Record with
	Specified Elements Received by Discharged
	Patients measure numerator value for the
	reporting period.
transition_record_denominator	Displays the Transition Record with
	Specified Elements Received by Discharged
	Patients measure denominator value for the
	reporting period.
transition_record_percentage	Displays the Transition Record with
	Specified Elements Received by Discharged
	Patients measure rate for the reporting
	period.
sub-2_numerator	Displays the SUB-2 numerator value for the
	reporting period.
sub-2_denominator	Displays the SUB-2 denominator value for
	the reporting period.
sub-2_percentage	Displays the SUB-2 measure rate for the
	reporting period.
sub-2a_numerator	Displays the SUB-2a numerator value for the
	reporting period.
sub-2a_denominator	Displays the SUB-2a denominator value for
	the reporting period.
sub-3_percentage	Displays the SUB-3 measure rate for the
	reporting period.
sub-3_numerator	Displays the SUB-3 numerator value for the
	reporting period.
sub-3_denominator	Displays the SUB-3 denominator value for
	the reporting period.
sub-3a_percentage	Displays the SUB-3a measure rate for the
1.0	reporting period.
sub-3a_numerator	Displays the SUB-3a numerator value for the
	reporting period.
sub-3a_denominator	Displays the SUB-3a denominator value for
1.2	the reporting period.
sub-3a_percentage	Displays the SUB-3a percentage of patients
	screened for the reporting period.
tob-2_numerator	Displays the IOB-2 numerator value for the
	reporting period.
too-2_denominator	Displays the 10B-2 denominator value for
	Discharge the TOD 2
tob-2_percentage	Displays the IOB-2 measure rate for the
	reporting period.

Column Name	Description
tob-2a_numerator	Displays the TOB-2a numerator value for the
	reporting period.
tob-2a_denominator	Displays the TOB-2a denominator value for
	the reporting period.
tob-2a_percentage	Displays the TOB-2a measure rate for the
	reporting period.
tob-3_numerator	Displays the Tob-3 numerator value for the
	reporting period.
tob-3_denominator	Displays the TOB-3 denominator value for
	the reporting period.
tob-3_percentage	Displays the TOB-3 measure rate for the
	reporting period
tob-3a_numerator	Displays the TOB-3a numerator value for the
	reporting period.
tob-3a_denominator	Displays the TOB-3a measure denominator
	value for the reporting period.
tob-3a_percentage	Displays the TOB-3a measure rate for the
	reporting period.
imm-2_numerator	Displays the IMM-2 numerator value for the
	reporting period.
imm-2_denominator	Displays the IMM-2 denominator value for
· -	the reporting period.
1mm-2_percentage	Displays the IMM-2 measure rate for the
	reporting period.
numerator	Displays the numerator value for the COVID
1	HCP measure
denominator	Displays the denominator value for the
	Discharge the schedule for the COVID
rate_ratio_percentage	Displays the calculated rate for the COVID
last NILEN undets data	Displays the last data CMS received a
last_INHSN_update_date	Displays the last date CNIS received a
avality ano anom	Dignlays the quality program dignlayed in
quanty_program	the report (IDEOD Program displayed in
management act	Displays COVID101/CP as the massive set
measure_set	Displays COVID19HCP as the measure set
	displayed in the report
	Displayed in the report
liteasure	relevant to the six previous columns of data
	displayed in report
quarter	Displayed in report
quarter	report
organization	Displays the organization's CMS
organization	Certification Number