

**Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program
Fiscal Year (FY) 2025 Data Verification & Administrative Requirements Checklist
for Data Due 8/15/2024**

Task	✓
STEP 1: Run reports	<input type="checkbox"/>
A. Log in to the Hospital Quality Reporting (HQR) Secure Portal .	<input type="checkbox"/>
B. Hover your mouse on the left side of the screen to expand the menu. Select Data Results . Then, click Chart Abstracted to access the following reports: <ul style="list-style-type: none"> Submission Detail - Review information about each XML file uploaded, including the measure set, patient ID, batch ID, patient admit/discharge/event date, upload date, action code, file name, file status, if a test case, and edit messages. Potential Duplicate - Identify potential duplicates to determine if records pertain to two different episodes of care or if duplicates are due to incorrect entry of a patient identifier. Case Status Summary - Review measure set counts, including the number of unique cases submitted, accepted, and rejected. 	<input type="checkbox"/>
C. In the File Accuracy tab, under Program, select IPFQR . If your provider participates in another Quality Reporting Program, you may see other programs in the drop-down.	<input type="checkbox"/>
D. Under Report select a report.	<input type="checkbox"/>
E. For each report, select the appropriate parameter values. (For example, select 2025 for the Fiscal Year parameter.) Select any other applicable parameter value, as necessary.	<input type="checkbox"/>
F. Click the blue Export CSV button. The file will download to your computer at a location determined by your browser settings. Click on the file to open it.	<input type="checkbox"/>
G. To access another report, return to the STEP D and select a different report. When you have finished reviewing the File Accuracy reports, proceed to STEP H .	<input type="checkbox"/>
H. To review the aggregate, facility-level non-measure data, denominator values for the Hospital-Based Inpatient Psychiatric Services (HBIPS)-2 and HBIPS-3 measures, and zero-patient attestations, hover over the left side to expand the menu. Select Data Submissions .	<input type="checkbox"/>
I. Click the Chart Abstracted tab. Then, click the Data Form button.	<input type="checkbox"/>
J. Under the Select the Data Form sub-header, select IPFQR Launch Data Form .	<input type="checkbox"/>
K. Data were submitted if a checkmark and the word "Submitted" appear next to the name. Verify the submitted data by clicking the row to expand the information.	<input type="checkbox"/>
L. To review or edit the facility-level data or the zero-patient attestation, click the Edit or Start button to access the attestation. Review/revise the data and select Submit to save changes, if necessary. Otherwise, select Cancel .	<input type="checkbox"/>
STEP 2: Confirm FY 2025 Data Accuracy and Completeness Acknowledgement (DACA) submission.	<input type="checkbox"/>
A. Access the DACA form by logging in to the HQR Secure Portal .	<input type="checkbox"/>
B. Hover over the left side to expand the menu. Click Administration and DACA to view the DACA.	<input type="checkbox"/>
If data changed, you must re-sign/submit the DACA to acknowledge that changes are accurate.	
STEP 3: Check IPFQR Program Notice of Participation (NOP) status.	<input type="checkbox"/>
Review the NOP in the HQR system under Administration to ensure status says "Participating."	
An active Security Official (SO) is not a requirement, but an active SO is needed to ensure access to the HQR Secure Portal to meet requirements. Contact the CCSQ Service Center at (866) 288-8912 to reactivate an SO.	
<ul style="list-style-type: none"> For guidance on IPFQR Program requirements and data verification processes, refer to the FY 2025 IPFQR Program Guide on the QualityNet IPFQR Program Resources web page. For other assistance, contact the IPFQR Program Support Contractor via the QualityNet Q&A Tool, IPFQualityReporting@hsag.com email, (866) 800-8765, or (844) 472-4477. 	