



An Introduction to the IPFQR Program, Part 2

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Purpose

This presentation will complete the overview of the IPFQR Program, started in the *IPFQR Program, Part 1* webinar, and highlights these topics:

- Role of Public Reporting
- Impact of not meeting program requirements
- Communication channels of the IPFQR Program

Learning Objectives

Participants will be able to understand the different aspects of the IPFQR Program.

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IPFQR Program Public Reporting

Public Reporting

- The CMS public reporting websites present performance data in a consistent, unified manner to ensure that information about inpatient psychiatric facilities (IPF) care is available.
- Data from participating IPFs and claims-based measures (CBMs) calculated by the Centers for Medicare & Medicaid Services (CMS) publicly appear on the [Medicare Care Compare](#) and [Provider Data Catalog](#) websites.
- CMS guarantees IPFs the opportunity to preview the data before publicly reporting the data. IPFs can preview the data during a 30-day preview period via the *Hospital Quality Reporting (HQR) Secure Portal*.

Public Reporting

CMS hosted the [Using Public Reporting Websites to Access IPFQR Program Data](#) webinar on January 31, 2023. It describes the way you can access publicly reported facility-, state-, and national-level IPFQR Program data.

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What Happens When IPFQR Program Requirements Are Not Met?

Extraordinary Circumstances Exceptions (ECE) Policy

- When an IPF experiences an extraordinary circumstance beyond the IPF's control, CMS offers a process for IPFs to request exceptions to the reporting of required quality data.
- Such circumstances may include, but are not limited to, natural disasters (such as a severe hurricane or flood) or systemic problems with CMS data-collections systems that directly affected the ability of the IPF to submit data.
- IPFs must submit a CMS Quality Program Extraordinary Circumstances Exceptions (ECE) Request Form with **all** required fields **within 90 calendar days** of the extraordinary circumstance. Submission instructions are on the form.
- Refer to the QualityNet [Extraordinary Circumstances Exceptions \(ECE\) Policy](#) webpage for additional details.

Annual Payment Update (APU) Reconsideration

A reconsideration process is available for IPFs that did not meet IPFQR Program requirements and are, therefore, not eligible to receive the full APU.

- CMS typically sends notification letters in September to facilities that did not meet one or more of the program requirements.
- Reconsideration requests for decisions are due to CMS 30 days from the date of receipt of the APU decision letter.
- Notifications of APU reconsideration decisions are typically sent to facilities that file a reconsideration approximately 90 days following the submission of the reconsideration request.
- Additional information regarding the reconsideration process is available on the QualityNet [IPFQR Program APU Reconsideration](#) web page.

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IPFQR Program Communications

IPFQR Program Contacts

- To receive important CMS communications, your IPF's contact information must be current.
- Facilities are responsible for updating their contact information. To notify us of any staff changes, CMS encourages IPFs to use the *HQR Secure Portal* to submit the [Hospital Contact Change Form](#).
- You may submit the form via secure fax or email anytime an update is needed.
 - Secure Fax Number: (877) 789-4443
 - Email: QRFormsSubmission@hsag.com

IPFQR Program Listserve

- Notices generated on the Listserve provide timely information on quality initiatives. QualityNet users are urged to register for these email notifications for information on enhancements, new releases, timelines, process/policy modifications, and application/initiative alerts
- These CMS Hospital Quality Reporting program notification and discussion lists are for the IPFQR Program. They are available [on QualityNet](#):
 - **Notification**
 - CART Notify: CMS Chart Abstraction and Reporting Tool (CART)
 - IPFQR Notify: Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program
 - QNet Notify: QualityNet Notifications
 - **Discussion**
 - IQR Imp Discuss: Hospital Inpatient Quality Reporting (IQR) and Improvement Discussion

Contact Information and Resources

The **Contact Information and Resources** section of the IPFQR Program Guide includes information about several resources, including links to the CMS and *Federal Register* websites.

Contact Information and Resources

Centers for Medicare & Medicaid Services

www.CMS.gov

CMS is the Department of Health and Human Services agency responsible for administering Medicare, Medicaid, the State Children's Health Insurance Program, and several other health-related programs.

Federal Register

www.federalregister.gov

The *Federal Register* is the official publication for rules, proposed rules, and notices of federal agencies and organizations, as well as executive orders and other presidential documents. Refer to Appendix B of this document for links to past final rules pertinent to the IPFQR Program.

Inpatient VIQR Outreach and Education Support Contractor

Inpatient Value, Incentives, and Quality Reporting Outreach and Education Support Contractor

- Phone Numbers: (844) 472-4477 or (866) 800-8765 (8 a.m.– 8 p.m. ET, Monday–Friday)
- Email: IPFQualityReporting@hsag.com
- Live Chat: QualityReportingCenter.com > *Inpatient* > [Talk to Us](#)

BEST PRACTICE: Ensure that all correspondence includes the name and CCN of your IPF.

CCSQ Support Center

For technical issues, you may reach the CCSQ Support Center in the following ways.

- Toll-Free Telephone: (866) 288-8912
Hours of Operation: 8:00 a.m.–8:00 p.m. Eastern Time
- Email: QNetSupport@cms.hhs.gov

IPFQR Program

Questions and Answers

The CMS Quality Question and Answer Tool ([Q&A Tool](#)) is a knowledge database, which allows users to search knowledge articles for answers to question by keywords or phrases, and if not found in the search results, submit a new question.

Other Resources

Other Resources

Centers for Disease Control and Prevention (CDC)

The CDC is one of the major operating components of the Department of Health and Human Services. It aims to protect America from health, safety, and security threats, both foreign and in the U.S.

The Joint Commission (TJC)

TJC is a not-for-profit organization that accredits and certifies over 22,000 health care organizations and programs in the United States. It is the nation's oldest and largest standards-setting and accrediting body in health care.

National Institute on Alcohol Abuse and Alcoholism (NIAAA)

NIAAA is one of the 27 institutes and centers that comprise the National Institutes of Health (NIH). NIAAA supports and conducts research on the impact of alcohol use on human health and well-being. It is the largest funder of alcohol research in the world. The NIAAA has published a list of validated screening tools that may be used by facilities in conducting their alcohol screening for the SUB measures (<http://www.niaaa.nih.gov/>).

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Helpful Resources

Acronyms

APU	annual payment update	HQR	Hospital Quality Reporting
CART	CMS Abstraction & Reporting Tool	IPF	inpatient psychiatric facility
CBM	claims-based measure	IPFQR	Inpatient Psychiatric Facility Quality Reporting
CCN	CMS Certification Numbers	IQR	Inpatient Quality Reporting
CDC	Centers for Disease Control and Prevention	NIAAA	National Institute on Alcohol Abuse and Alcoholism
CMS	Centers for Medicare & Medicaid Services	NIH	National Institutes of Health
DACA	Data Reporting and Acknowledgement	NOP	Notice of Participation
ECE	Extraordinary Circumstances Exception	Q&A	question and answer
ET	Eastern Time	TJC	The Joint Commission
HARP	HCQIS Access Roles and Profile	VIQR	Value, Incentives, and Quality Reporting
HCQIS	Healthcare Quality Information Systems		

Helpful Resources

**IPFQR Program Webpages
(Click the Icons)**



Helpful Resources

Stay up to date...



...and get answers to your questions.



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Thank You!

Disclaimer

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