

An Introduction to the IPFQR Program, Part 2 Presentation Transcript

Speakers

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March 2, 2023 2:00 p.m. Eastern Time

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Evette Robinson: Welcome to today's presentation titled An Introduction to the IPFOR Program, Part 2. My name is Evette Robinson, I am the IPFQR Program Lead for the Inpatient Value, Incentives, and Quality Reporting, or VIQR, Support Contractor. Before I introduce today's speaker, I will review a few housekeeping items. First, the slides for this presentation were posted to the Quality Reporting Center website prior to the event. If you did not receive the slides beforehand, please go to QualityReportingCenter.com in your web browser. On the bottom left of the screen, you will see a list of Upcoming Events. Click on the link for this event. There you will find the presentation slides available for download. This webinar is being recorded, and the transcript, slides, and a recording of today's presentation will be posted to QualityNet at a later date. Secondly, as indicated by the title of this presentation, this is the second part of a webinar series about the IPFQR Program. We encourage you to review Part 1 of this webinar series if you have not already done so.

> Finally, we ask that you submit any questions, pertinent to the webinar topic, in the Q&A section. To do so, click on the question mark in a thought bubble on the right side of the screen. Any unanswered questions will be responded to and considered for publication in the QualityNet Question and Answer Tool at a later date. Questions received that are not related to the topic of the webinar will not be answered in the Q&A feature. Instead, we recommend that you go to the QualityNet Q&A Tool to search for posted question-and-answer pairs, as well as submit any new questions to us that are not already addressed in the Q&A tool or in a previously published summary of questions and answers. It is my pleasure to introduce our speaker for today's event, Judy Wade. Judy is a Project Coordinator for the VIQR Support Contractor, who works closely with me on the IPFQR Program, developing tools, educational presentations, website content review, and research. She holds a Bachelor's degree in English Literature from the University of South Florida. Judy has extensive experience in medical writing, editing, and research. Without further ado, I will turn the presentation over to our speaker, Judy Wade.

Judy Wade:The purpose of today's webinar is to complete the overview of the
Inpatient Psychiatric Facility Quality Reporting Program that started in
Part 1 of this webinar series. Specifically, this webinar will describe
the role of public reporting, impact of not meeting program requirements,
and the various communication channels pertinent to the IPFQR Program.

By the end of this presentation, attendees will be able to understand the different aspects of the IPFQR Program.

In this portion of the presentation, I will describe the origins of the IPFQR Program, as well as eligibility requirements for participation in the program. Let's continue this review with a brief look at what happens to the submitted data from a public reporting standpoint.

The CMS public reporting websites present performance data in a consistent, unified manner to ensure the availability of information about the care delivered in the nation's IPFs. Data submitted by participating IPFs, as well as the CBMs calculated by CMS, are publicly reported on the Medicare Care Compare and Provider Data Catalog websites. IPFs are guaranteed the opportunity to preview their data in advance of CMS publicly reporting the measure data during a 30-day preview period via the *HQR Secure Portal*.

The Centers for Medicare & Medicaid Services hosted a webinar titled *Using Public Reporting Websites to Access IPFQR Data*, describing how to access publicly reported data for the IPFQR Program. Please refer to that webinar for more information and guidance regarding facility-, state-, and national-level data reporting.

Next, let's take a look at what happens when one or more IPFQR Program requirements are not met.

CMS offers a process for IPFs to request exceptions to the reporting of required quality data when an IPF experiences an extraordinary circumstance beyond the IPF's control.

Such circumstances may include, but are not limited to, natural disasters, such as a severe hurricane or flooding, or systemic problems with CMS data-collections systems that directly affect 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 completed within 90 calendar days of the extraordinary circumstance. Submission instructions are on the form. Refer to the QualityNet Extraordinary Circumstances Exceptions (ECE) Policy web page for additional details.

A reconsideration process is available for IPFs notified that they did not meet the IPFQR Program requirements and are, therefore, not eligible to receive the full annual payment update. 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 process is available on the QualityNet IPFQR Program APU Reconsideration web page.

The means by which CMS and IPFs communicate is a critical component of success in the IPFQR Program.

It is important to keep your IPF's contact information current, so you do not miss important CMS communications. Facilities are responsible for updating their staff contacts. CMS encourages IPFs to help us maintain up-to-date contact records in the *HQR Secure Portal* by submitting the complete Hospital Contact Change Form to notify us of staff changes. You may submit the form via secure fax or email anytime an update is needed.

Notices generated on the Listserve are used to disseminate timely information related to quality initiatives.

QualityNet users are urged to register for these email notifications to receive information on enhancements and new releases, timelines, process/policy modifications, and alerts about applications and initiatives. The following CMS Hospital Quality Reporting program notification and discussion lists are relevant to the IPFQR Program and available for signup here on QualityNet. The notification Listserves include CART Notify: CMS Chart Abstraction and Reporting Tool (CART); IPFQR Notify: Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program; and QNet Notify: QualityNet Notifications. The discussion Listserve, called IQR Imp Discuss: Hospital Inpatient Quality Reporting (IQR) and Improvement Discussion, is a form for discussion of topics pertaining to the [Hospital] IQR and IPFQR Programs.

The Contact Information and Resources section of the IPFQR Program Guide includes a plethora of resources, including links to the Centers for Medicare & Medicaid Services and *Federal Register* websites.

The Contact Information and Resources section includes information and resources, as depicted in the images on this slide. Note that the CCSQ Support Center, formerly known as the QualityNet Help Desk, changed the email address last summer to <u>QNETSupport@cms.hhs.gov</u>.

The CMS Quality Question & Answer Tool, or the Q&A Tool, is a knowledge database, which allows users to search knowledge articles for answers to question by keywords or phrases. If not found in the search results, users can submit a new question.

Please refer to this slide for additional resources, including the Centers for Disease Control and Prevention, The Joint Commission, and the National Institute on Alcohol Abuse and Alcoholism.

Now, we will review some helpful resources.

This slide displays a list of the acronyms that we referenced during this presentation.

CMS recommends that IPFs refer to the latest versions of IPFQR Program resources to stay up to date on program requirements. Various documents, including the IPF specifications manual, IPFQR Program Guide, and optional paper tools, are available for download from the QualityNet and Quality Reporting Center websites. These can be accessed by clicking on the icons on this slide. The IPFQR Program Guide is a great place to start, as it highlights the keys to successfully participate in the IPFQR Program.

Has there been any turnover at your facility within the last several months? If so, we want to hear from you! As mentioned earlier in the presentation, you can let us know about any changes to points of contact at your facility by clicking the Contact Change Form link on this slide and sending the information to us by following the instructions on the form. Would you like to receive email communications about future IPFQR Program webinars, program updates, resources, and other announcements? Then, we invite you to sign up for the IPFQR Program Listserve by clicking on the Listserve Registration icon on this slide. Another way to find information about upcoming webinars is to click on the Upcoming Webinars icon on this slide.

When you have a general question about the IPFQR Program or need clarification about any of the program measures, be sure to leverage the Find an Answer function in the QualityNet Q&A Tool. If you do not see a published article in the Q&A tool related to your question, then you can submit your inquiry to us via the Q&A tool, which you can access by selecting the Q&A Tool icon. The best way to reach us when you have questions about IPFQR Program eligibility, such as the next steps for a newly eligible provider or to notify us that an IPF is closed or will be closing, is via email. Just click on the Email Support icon to send an email to us regarding eligibility updates. Finally, you can also contact the VIQR Support Contract team via phone at 866-800-8765 or via secure fax at 877-789-4443.

This concludes the content portion of today's webinar titled, An Introduction to the IPFQR Program, Part 2.

After this presentation, you will have the opportunity to complete a survey. We ask that you complete the survey, as we value your feedback regarding what works well as well as any areas for improvement in future presentations. Thank you for your time and attention.