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Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education Support Contractor (SC)

Today’s Presentation
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• The Q&A tool is the best way to send us questions unrelated to the current webinar topic.
• Direct link: https://cms-ip.custhelp.com/app/homeipf/p/831
• Look for published Q&As in the searchable tool.
Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program: FY 2020 IPF PPS Proposed Rule

May 2, 2019
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Centers for Medicare & Medicaid Services (CMS)

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Program Specialist
IPFQR Program, Center for Clinical Standards and Quality, CMS
Purpose

This presentation will summarize the proposed updates to the IPFQR Program, as outlined in the Fiscal Year (FY) 2020 Inpatient Psychiatric Facility Prospective Payment System (IPF PPS) Proposed Rule.
Objectives

At the end of this presentation, attendees will be able to:

- Interpret the FY 2020 IPF PPS Proposed Rule, as it pertains to the IPFQR Program.
- Describe the proposed change to the IPFQR Program.
Overview

IPFQR Program: FY 2020 IPF PPS Proposed Rule
Functions of the Proposed Rule

Publication of the Fiscal Year (FY) 2020 IPF PPS Proposed Rule enables CMS to:

- Inform IPFQR Program participants about intended modifications to the program.
- Solicit public comment on proposed changes.
- Provide ample time for IPFs to prepare for changes that are likely to be confirmed in the final rule.
Summary of Proposed Changes

CMS proposes the following:

- Adoption of the Medication Continuation Following Inpatient Psychiatric Discharge measure - National Quality Forum (NQF) #3205
- Request for public comment
  - Current measure set
  - Possible new measures or new measure topics
In this proposed rule, CMS is not proposing any changes to its previously finalized:

- Public Display and Review Requirements
- Form, Manner, and Timing of Quality Data Submission
- Reconsideration and Appeals Procedures
- Extraordinary Circumstances Exceptions (ECE) Policy
Medication Continuation Following Inpatient Psychiatric Discharge (NQF #3205)
Proposed Measure: Background

Medication Continuation Following Inpatient Psychiatric Discharge measure (NQF #3205):

• Addresses the percentage of Medicare FFS beneficiaries aged 18 years and older who were discharged from an IPF to home or home health care with a principal diagnosis of MDD, schizophrenia, or bipolar disorder who had filled at least one evidence-based medication within two days prior to discharge through 30 days post discharge.

• Uses Medicare fee-for-service (FFS) claims to calculate rates over a 24 month performance period.
Proposed Measure: Background (Cont.)

Medication Continuation Following Inpatient Psychiatric Discharge measure (NQF #3205):

• Supports the CMS Meaningful Measure Area “promote effective prevention and treatment of chronic disease,” which includes the meaningful measure area of “prevention, treatment, and management of mental health.”

• Complements the portfolio of facility-level measures in the IPFQR Program that assess the transition from the inpatient to the outpatient setting:
  o Follow-Up After Hospitalization for Mental Illness
  o Thirty-day All Cause Unplanned Readmission Following Psychiatric Hospitalization in an IPF
  o Transition Record with Specified Elements Received by Discharged Patients
  o Timely Transmission of Transition Record
CMS believes medication continuation is important for patients discharged from the inpatient psychiatric setting with MDD, schizophrenia, or bipolar disorder because of significant negative outcomes associated with non-adherence to medication regimens. These negative outcomes include:

- Relapse and readmission
- Decreased quality of life
- Increased healthcare costs
- Use of emergency psychiatric services
- Arrest
- Crime victimization
- Increased substance use
- Suicide
Proposed Measure: Denominator Statement

The number of patients aged 18 years and older who were discharged from an IPF to home or home health care with a principal diagnosis of MDD, schizophrenia, or bipolar disorder.
Proposed Measure: Denominator Inclusions and Exclusions

Denominator

• Includes discharges for patients:
  o Admitted to IPF with MDD, schizophrenia, or bipolar disorder
  o Admitted when 18 years of age or older
  o Enrolled in Medicare Part A, B, and D
  o Alive at discharge and during follow-up period
  o Discharged to home or home health

• Excludes discharges for patients who:
  o Received electroconvulsive therapy or transcranial magnetic stimulation
  o Were pregnant during inpatient stay
  o Had secondary diagnosis of delirium
  o Had principal diagnosis of schizophrenia with secondary diagnosis of dementia
Proposed Measure: Numerator Statement

The number of patients with a principal diagnosis of MDD, schizophrenia, or bipolar disorder who were dispensed at least one evidence-based outpatient medication within two days prior to discharge through 30 days post discharge.
Proposed Measure: Reporting Requirements

- There are no reporting requirements for IPFs.
- CMS will calculate and report the measure rates based on Medicare FFS Parts A, B, and D claims; therefore, IPFs are not required to collect or report data for this measure.
- The measure will be reported as a combined facility-level rate across all three conditions. The measurement period is two years in order to maximize the number of facilities with the minimum of 75 discharges necessary for reliable facility-level scores.
Proposed Measure: Resources

Reference materials with full measure specifications for the Medication Continuation Following Inpatient Psychiatric Discharge measure are available at https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HospitalQualityInits/Downloads/Version_1-0_Inpatient_Psychiatric_Facility_Medication_Continuation_Public.zip
Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program: FY 2020 IPF PPS Proposed Rule

Request for Public Comment
Request for Public Comment
Current Measure Set

CMS seeks public comments on:

• Possible new measures or new measure topics.
• The current IPFQR Program measure set.
Potential future adoption of:

• Measurement of patient experience of care
  o Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey

• Future measure topics
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<tr>
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<th>Measure ID</th>
<th>Measure</th>
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<td>HBIPS-2</td>
<td>Hours of Physical Restraint Use</td>
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<td>0641</td>
<td>HBIPS-3</td>
<td>Hours of Seclusion Use</td>
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<td>0560</td>
<td>HBIPS-5</td>
<td>Patients Discharged on Multiple Antipsychotic Medications with Appropriate Justification</td>
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<tr>
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<td>N/A</td>
<td>Screening for Metabolic Disorders</td>
</tr>
<tr>
<td>2860</td>
<td>N/A</td>
<td>Thirty-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an Inpatient Psychiatric Facility</td>
</tr>
</tbody>
</table>
IPFQR Program: Reporting Periods vs. Fiscal Years
January 1, 2018 – December 31, 2019

Calendar Year and Fiscal Year
The Centers for Medicare and Medicaid Services (CMS) uses quality data collected by IPFs during a reporting period to make payment decisions for a future year.
- Reporting Period = Calendar Year (CY)
- Fiscal Year (FY) = Payment Determination Year
- Annual payment update (APU) = the annual percentage increase CMS applies to Medicare reimbursement for eligible IPFs

IPF Data → CMS Annual Payment Update (APU) Decisions
Submission of CY data is connected to payment in a future FY, as illustrated below.
- IPFs collect data for CY 2018 discharges.
- IPFs submit data to CMS in 2019.
- CMS makes preliminary FY 2020 APU decisions.
- CMS provides IPFs with an opportunity to request reconsiderations of FY 2020 APU decisions.
- CMS makes final FY 2020 APU decisions.

Data Collection Timeline:

- July 1, 2019 - August 15, 2019: FY 2020 submission period for all IPFQR Program requirements
- January 1, 2019 to December 31, 2019: CY 2019 measure and non-measure data collection
- July 1, 2020 - August 15, 2020: FY 2021 submission period for all IPFQR Program requirements
- January 1, 2020 to December 31, 2020: CY 2020 measure and non-measure data collection
- January 1, 2021 - December 31, 2021: CY 2021 measure and non-measure data collection

Exceptions:
- Data used for claims-based measures (CBM) are not usually from a single calendar year.
- Data for the IMM-2 measure are collected from October 1 through March 31 of the previous fiscal year. For example, IPFs will collect IMM-2 data from October 1, 2018-March 31, 2019 and submit the data in 2019 to impact the FY 2020 payment determination.

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Proposed Rule Available for Review and Comments


- Clicking on the green button at the top of the proposed rule posted in the Federal Register

**SUBMIT A FORMAL COMMENT**

**OR**

- Clicking on http://www.regulations.gov, searching for “FY 2020 IPF PPS,” and clicking on the Comment Now! button next to the rule

![Comment Now!](https://www.regulations.gov)
Helpful Resources
Helpful Resources

IPFQR Program Webpages (Click the Icons)

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## Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
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<tbody>
<tr>
<td>APU</td>
<td>annual payment update</td>
</tr>
<tr>
<td>CBM</td>
<td>claims-based measure</td>
</tr>
<tr>
<td>CMS</td>
<td>Centers for Medicare &amp; Medicaid Services</td>
</tr>
<tr>
<td>CY</td>
<td>calendar year</td>
</tr>
<tr>
<td>ECE</td>
<td>Extraordinary Circumstances Exception</td>
</tr>
<tr>
<td>FY</td>
<td>fiscal year</td>
</tr>
<tr>
<td>FFS</td>
<td>Fee-For-Service</td>
</tr>
<tr>
<td>FUH</td>
<td>Follow-Up After Hospitalization for Mental Illness</td>
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<tr>
<td>IPF</td>
<td>Inpatient Psychiatric Facility</td>
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<tr>
<td>IPFQR</td>
<td>Inpatient Psychiatric Facility Quality Reporting</td>
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<tr>
<td>MDD</td>
<td>Major Depressive Disorder</td>
</tr>
<tr>
<td>NQF</td>
<td>National Quality Forum</td>
</tr>
<tr>
<td>PPS</td>
<td>prospective payment system</td>
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<td>Q&amp;A</td>
<td>questions and answers</td>
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<td>SC</td>
<td>support contractor</td>
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<tr>
<td>SUB</td>
<td>Substance Use</td>
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<td>TOB</td>
<td>Tobacco Use</td>
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<tr>
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