

# Welcome!

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# Troubleshooting Audio


**Audio from computer  
speakers breaking up?  
Audio suddenly stop?**

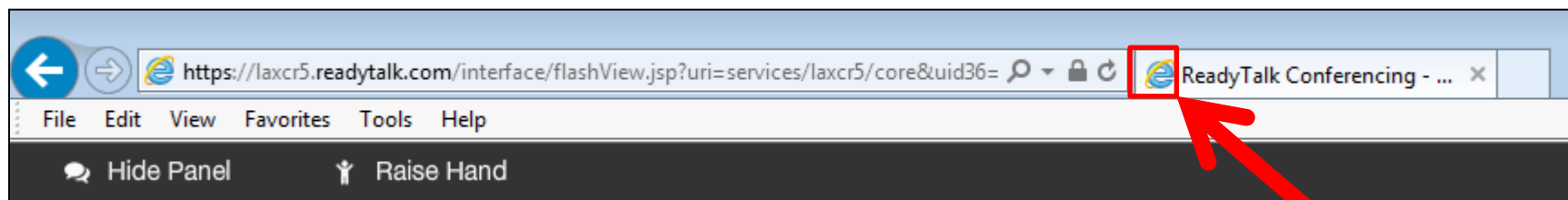
**Click Refresh**

**– or –**

**Click F5**



 **F5 Key**  
Top Row of Keyboard

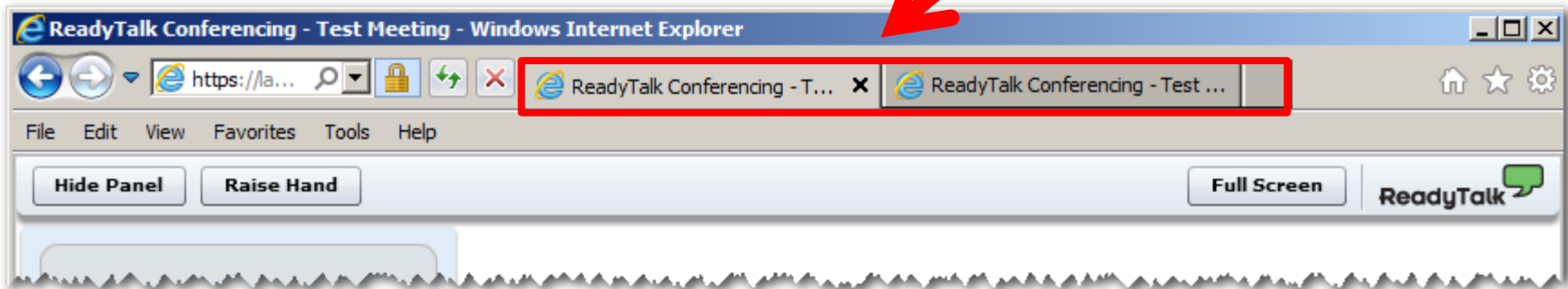


**Location of Buttons**

**Refresh**

# Troubleshooting Echo

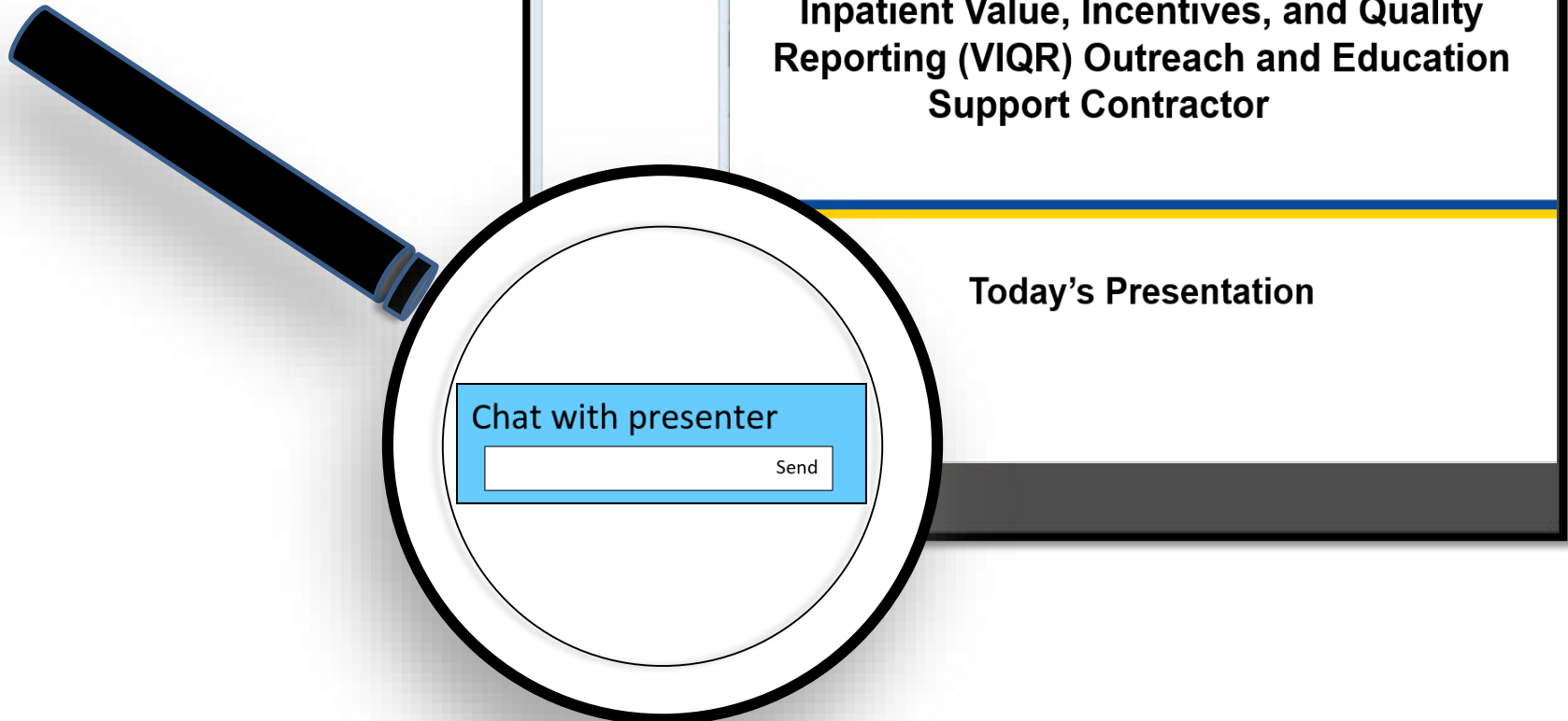
- Hear a bad echo on the call?
- Echo is caused by multiple browsers/tabs open to a single event (multiple audio feeds).
- Close all but one browser/tab and the echo will clear.



Example of Two Browsers/Tabs Open in Same Event

# Submitting Questions

Type questions in the “Chat with presenter” section, located in the bottom-left corner of your screen.



# Webinar Chat Questions

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## Chat Tool

- Submit questions pertinent to today's topic.
- Any unanswered questions will be responded to and published in the *QualityNet* Questions and Answers (Q&A) Tool at a later date.



# **Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program FY 2020 Data Review**

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**Inpatient Value, Incentives, and Quality Reporting (VIQR)**

**Outreach and Education Support Contractor**

**October 31, 2019**

# Purpose

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This presentation provides a review of the Fiscal Year (FY) 2020 IPFQR Program measure and non-measure data results.

# Objectives

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At the end of this presentation, participants will understand the FY 2020 measure and non-measure data results for the IPFQR Program.

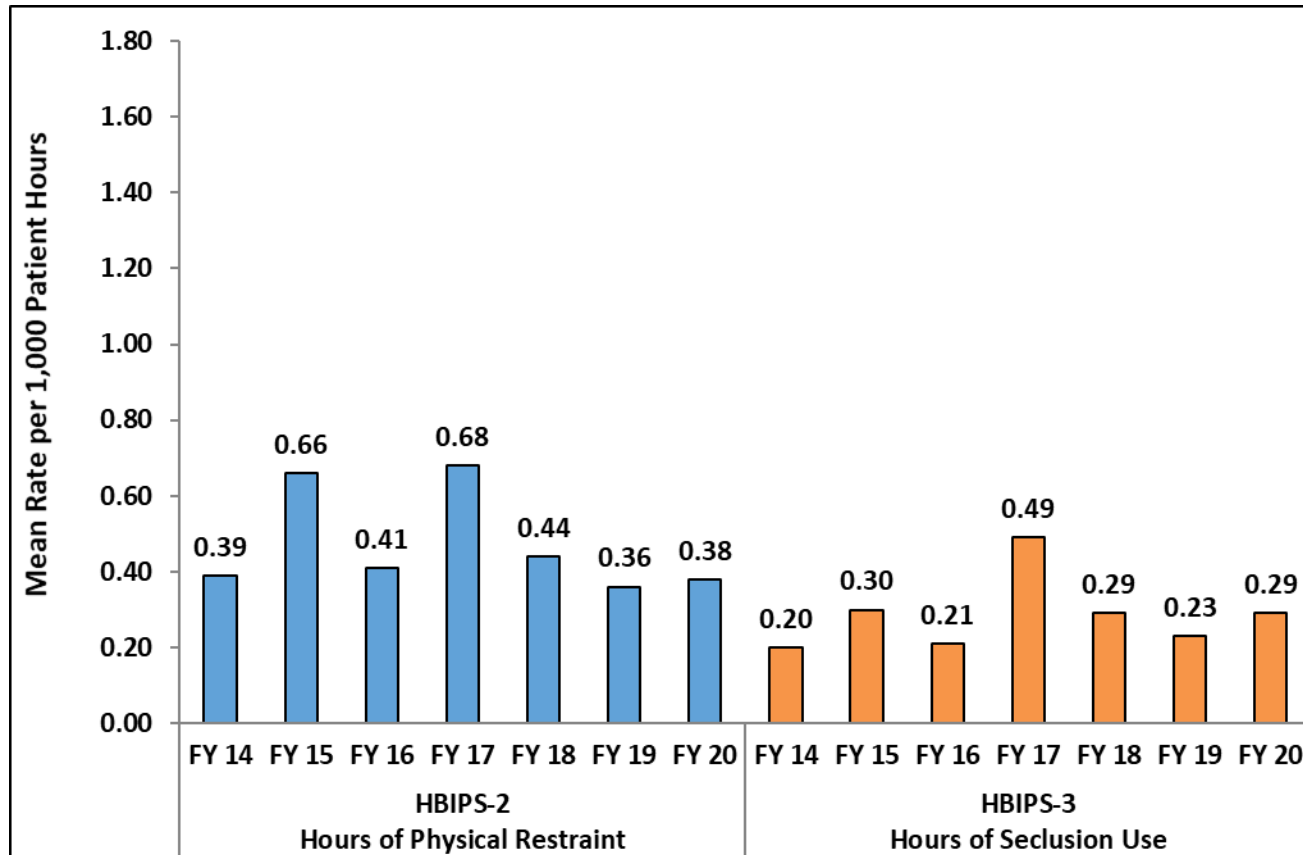


IPFQR Program FY 2020 Data Review

## **FY 2020 Measure and Non-Measure Results**

# HBIPS-2 and HBIPS-3

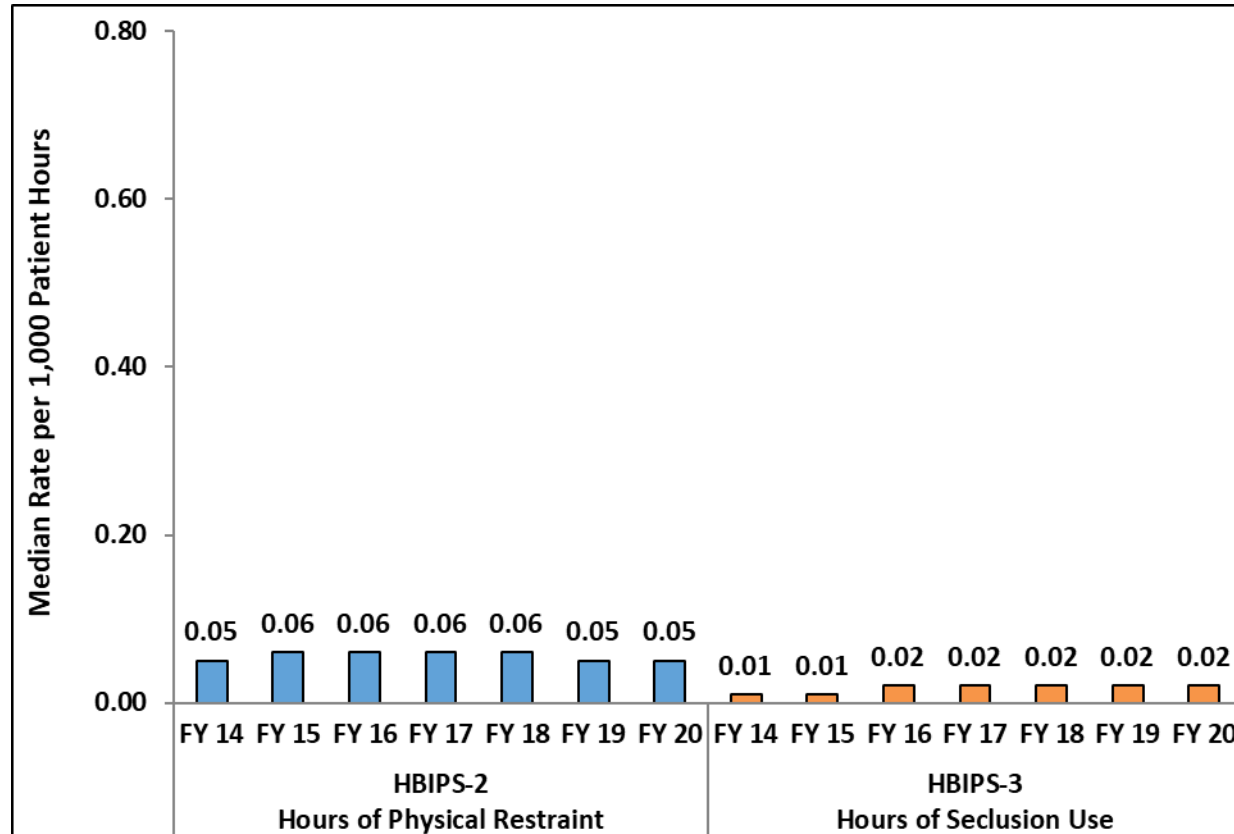
## Measure Results: Mean Values



**NOTE:** Lower rates for the HBIPS-2 and HBIPS-3 measures indicate better performance.

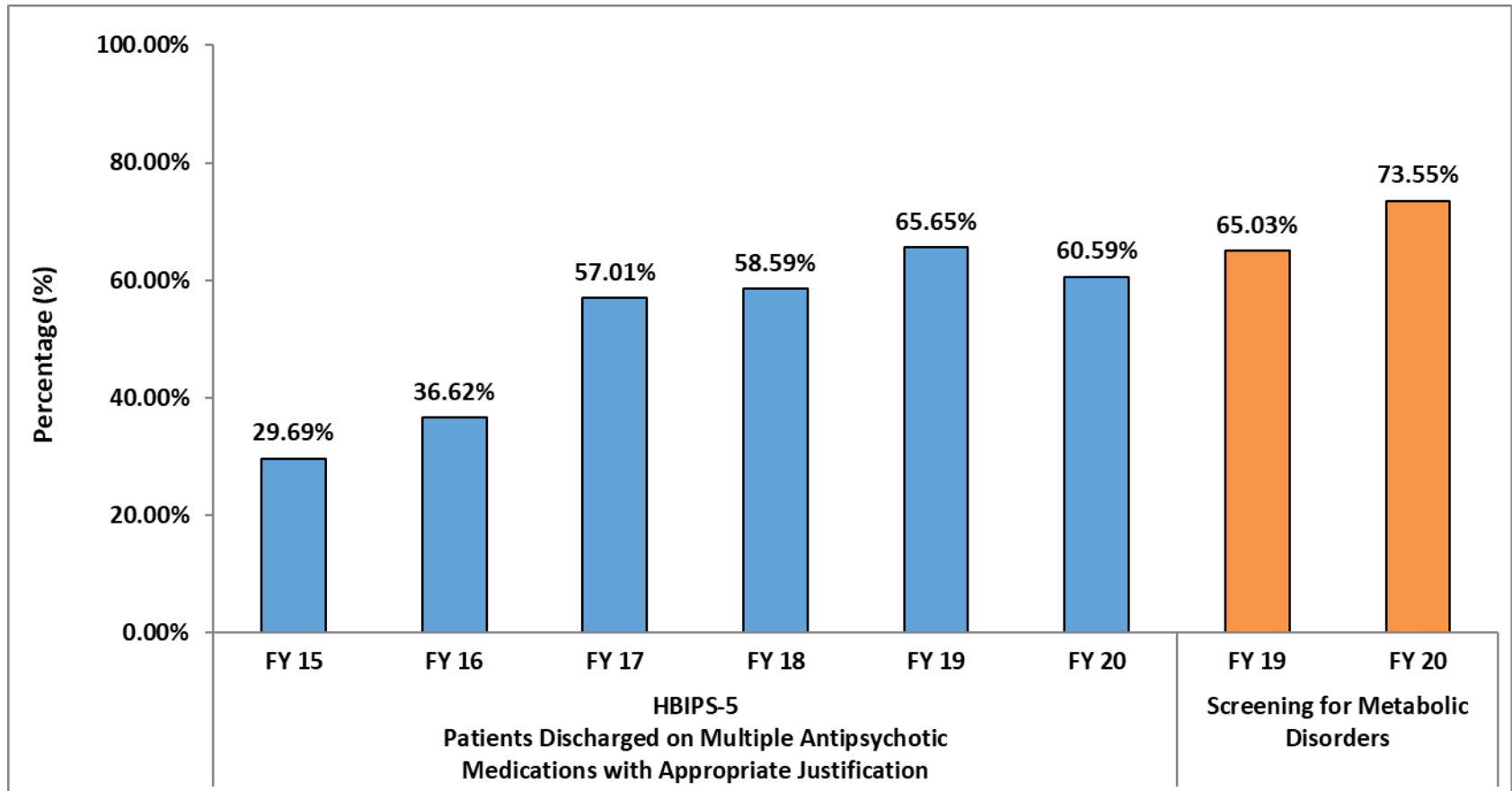
# HBIPS-2 and HBIPS-3

## Measure Results: Median Values



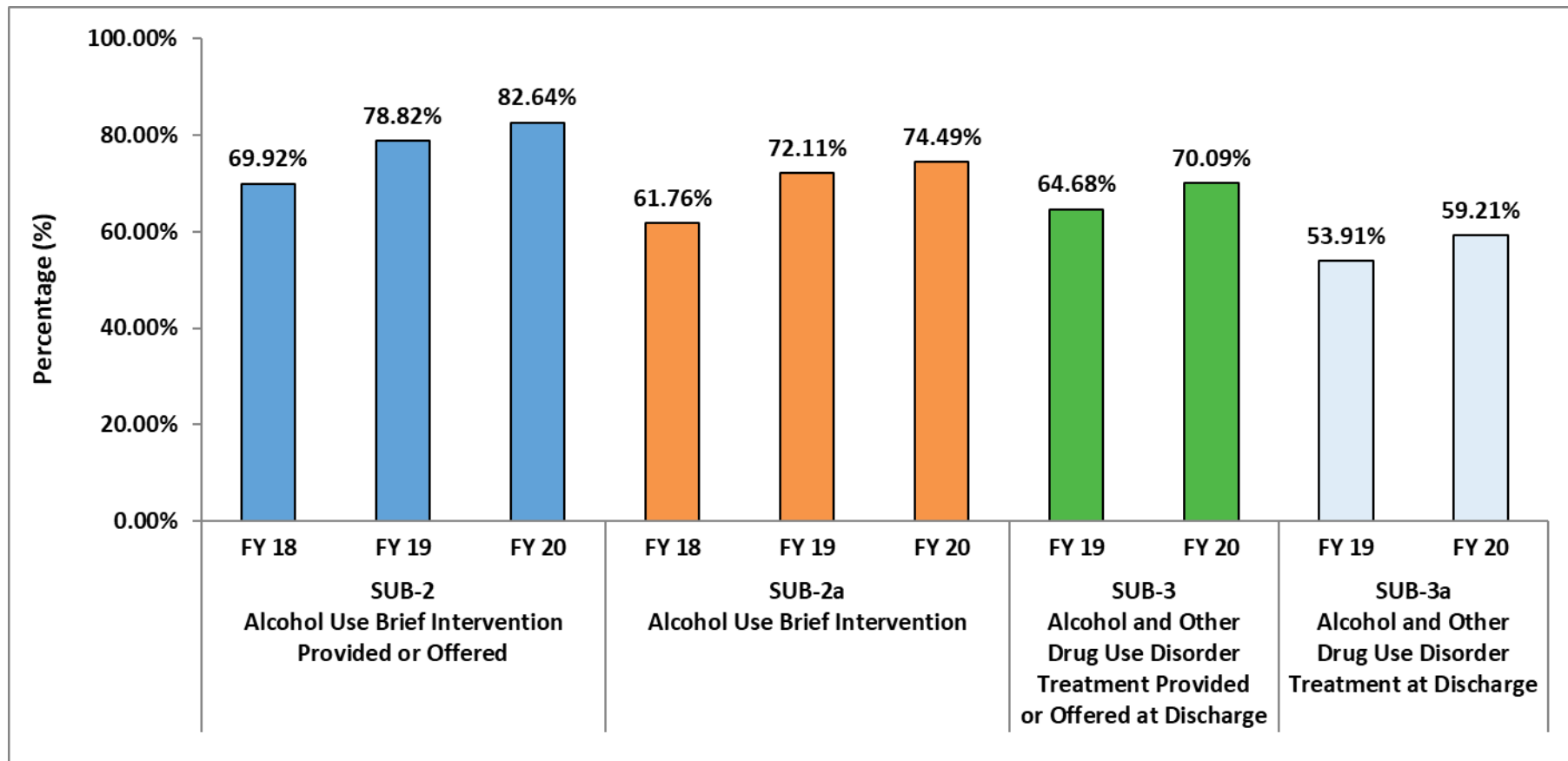
**NOTE:** Lower rates for the HBIPS-2 and HBIPS-3 measures indicate better performance.

# HBIPS-5 and Screening for Metabolic Disorder Measure Results



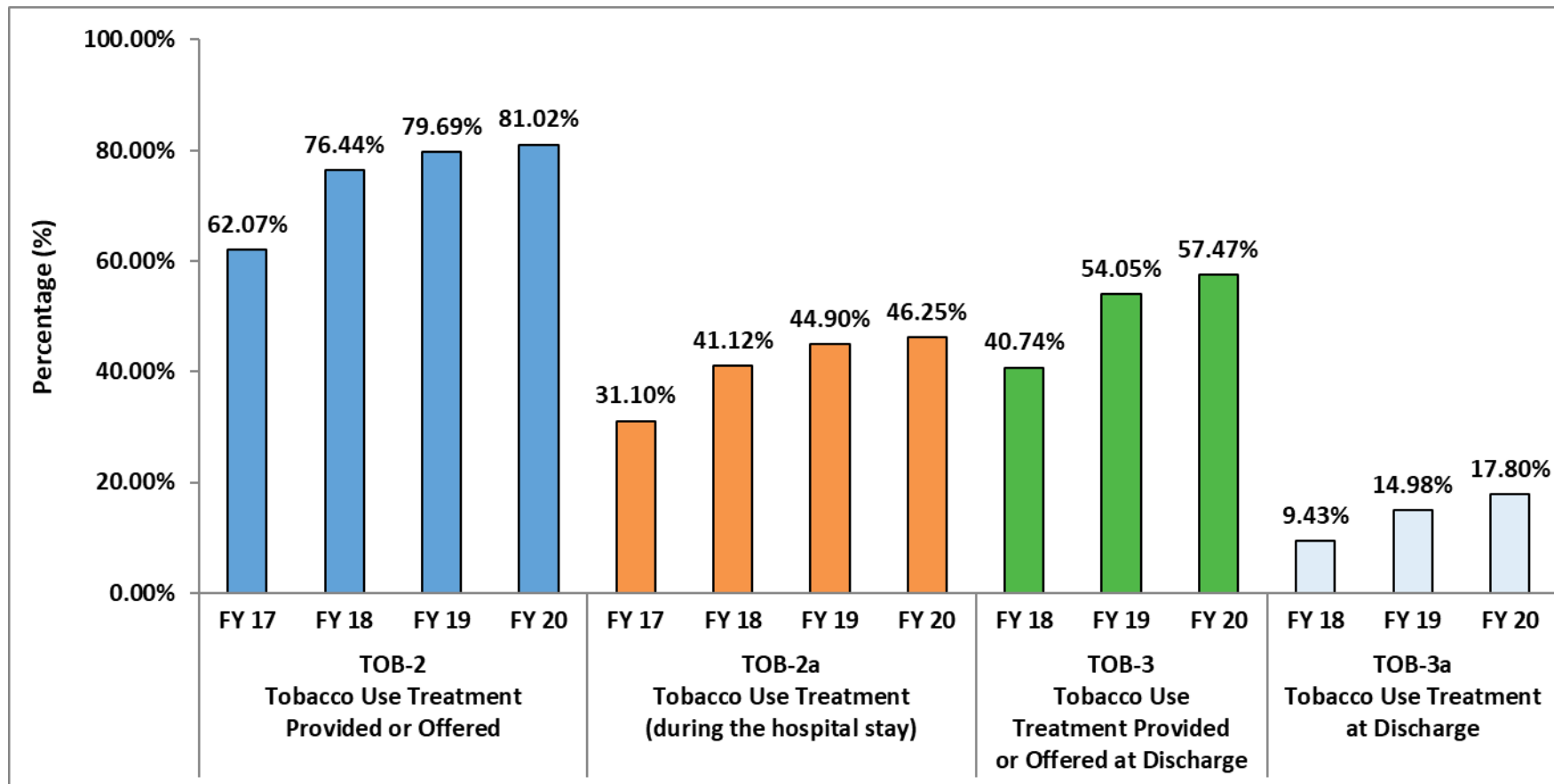
**NOTE:** Higher rates for the HBIPS-5 and the Screening for Metabolic Disorders measures indicate better performance.

# SUB-2/-2a, SUB-3/-3a Measure Results



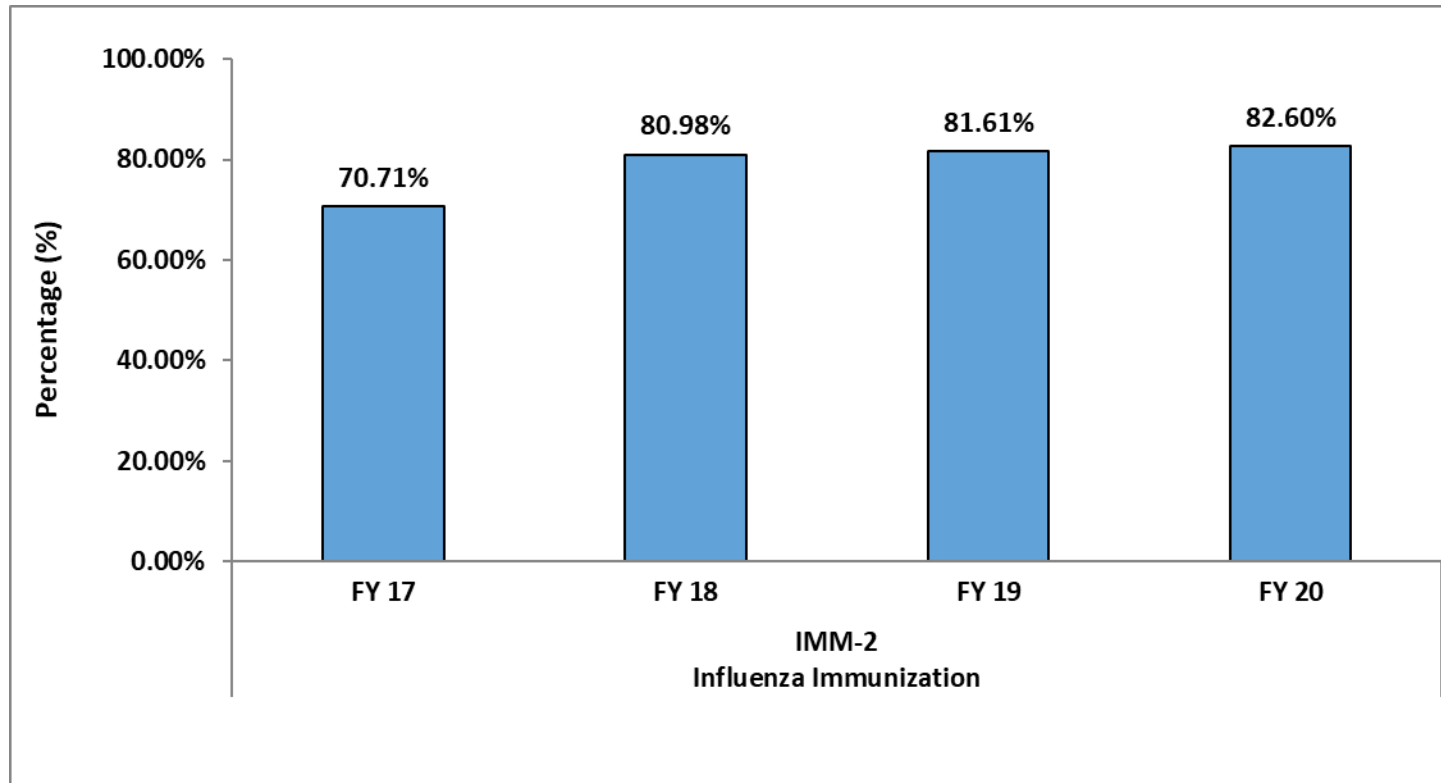
**NOTE:** Higher rates for the SUB-2/-2a and SUB-3/-3a measures indicate better performance.

# TOB-2/-2a, TOB-3/-3a Measure Results



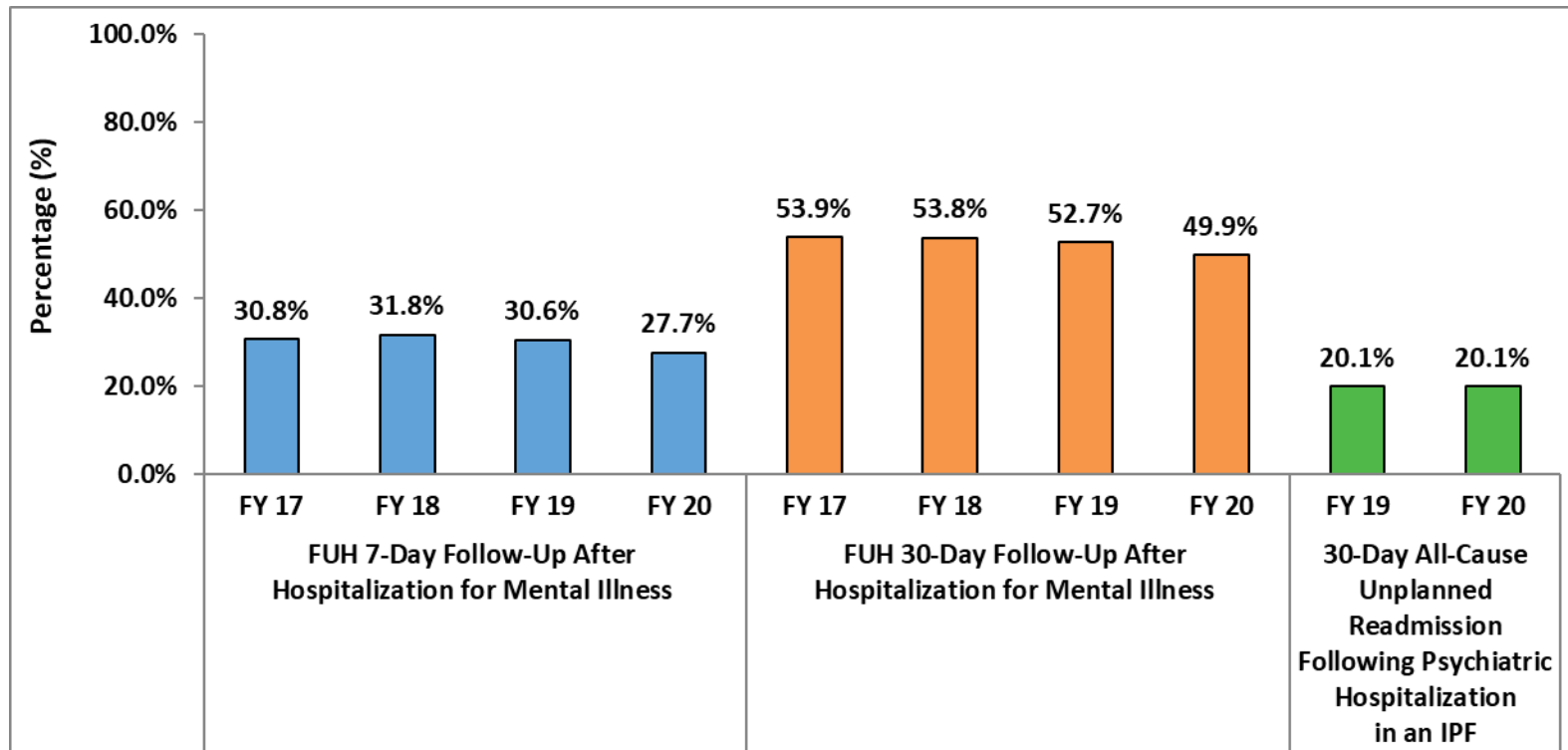
**NOTE:** Higher rates for the TOB-2/-2a and TOB-3/-3a measures indicate better performance.

# IMM-2 Measure Results



**NOTE:** Higher rates for the IMM-2 measure indicates better performance.

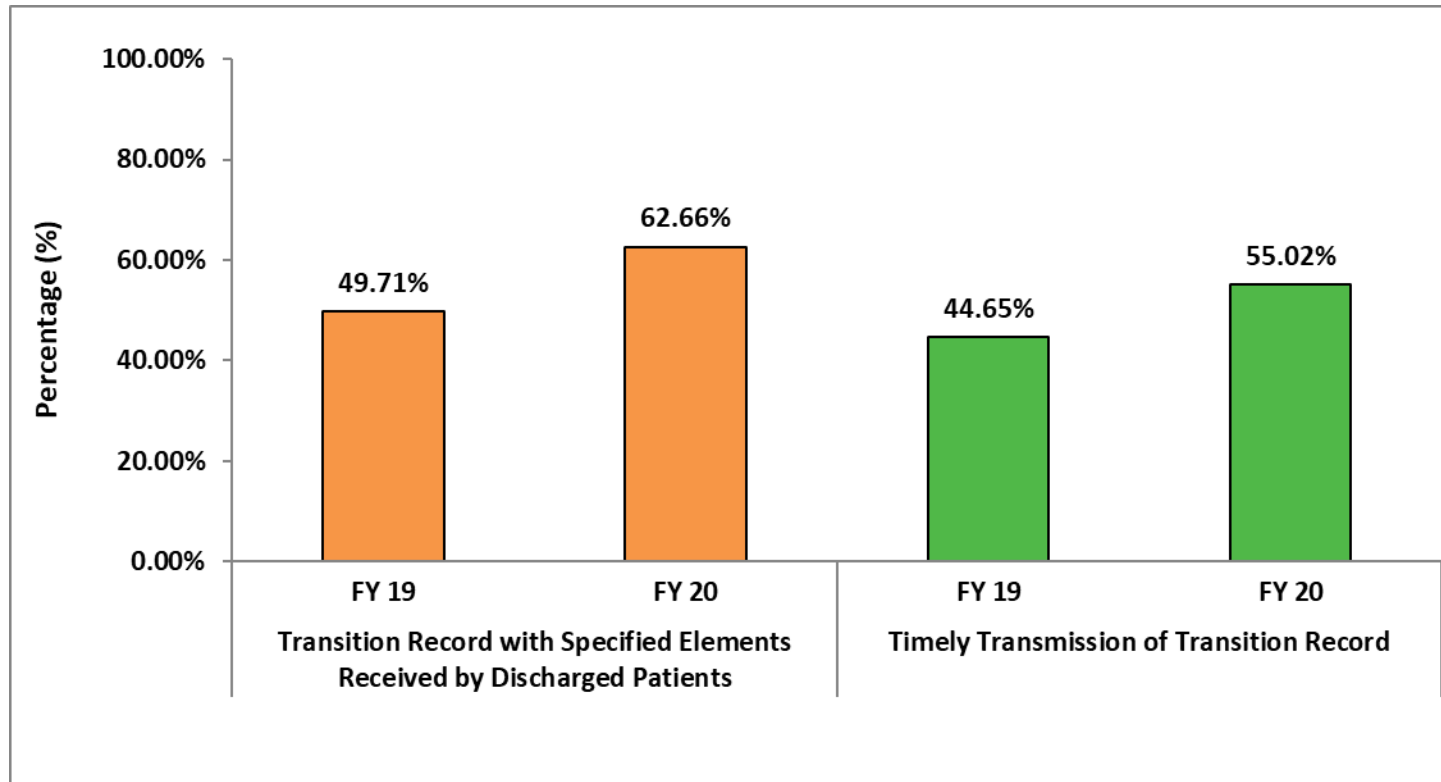
# FUH Measure and IPF Readmission Claims-Based Measure Results



**NOTE:** Lower percentages for the IPF Readmission measure indicate better performance. Higher percentages for the FUH measure indicate better performance.



# Transition Record Measures Results



**NOTE:** Higher rates for the Transition Record measures indicate better performance.

# Transition Record Measures

During the CY 2019 data submission period, the Inpatient VIQR Outreach and Education Support Contractor received several questions pertaining to the following topics:

- Criteria to Identify Questionable Data
- Reason for IPF Admission Element

# Transition Record Measures

## Criteria to Identify Questionable Data

- The intent of the [Criteria to Identify Questionable FY 2020 Measure and Non-Measure Data for the IPFQR Program](#) document was to bring potentially inaccurate data submissions to IPFs' attention.
- A criterion for the Transition Record measures was a Timely Transmission of Transition Record numerator value greater than the Transition Record with Specified Elements Received by Discharged Patients numerator value.
- In order to meet the numerator of the Timely Transmission of Transition Record measure, the numerator of the Transition Record with Specified Elements measure must also be met. This means that the complete transition record must be discussed with and provided to the patient and/or caregiver and sent to the next provider, in order for the Transition Record with Specified Elements measure to be met.
- This information is clarified for discharges beginning in Calendar Year (CY) 2019 on pages 10 and 25 of the [IPFQR Program Manual, Version 4.1](#) and pages 7–8 of the optional [Data Collection Paper Tool for Compliance with the Transition Record with Specified Elements Received by Discharged Patients and Timely Transmission of Transition Record Measures](#).

# Transition Record Measures

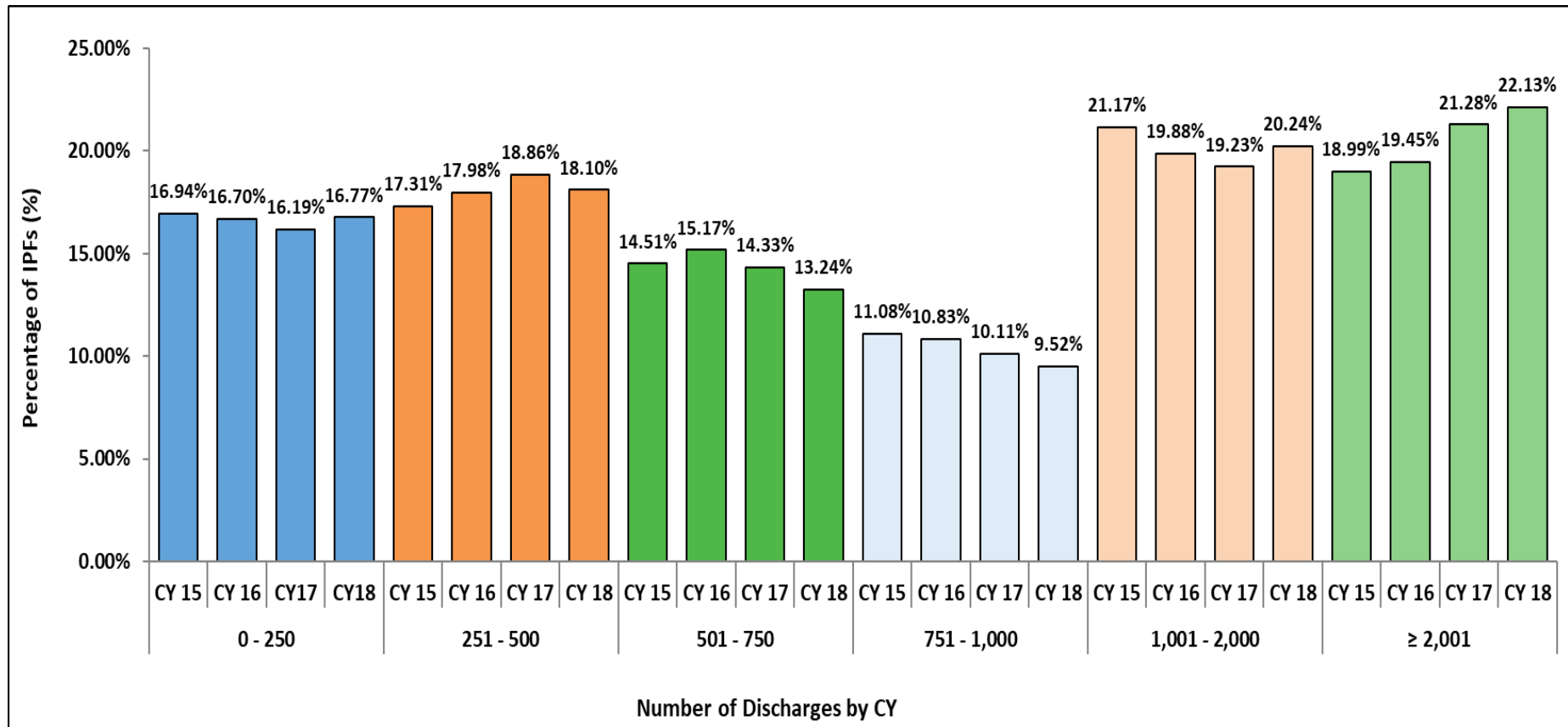
## Reason for IPF Admission Element

- Documentation for the Reason for IPF Admission element should be a summary of the patient's behavior as well as the events and circumstances that lead to the patient's hospitalization. A listing of symptoms is not sufficient, because a symptom can manifest in many different ways.
- Documentation must describe how and why the patient's symptoms led to the IPF admission.
- Include the link between how the patient's thoughts / feelings / symptoms led to their IPF admission; this is the precipitating event that is needed to meet the element.
  - Did the patient choose to seek help on their own because of the symptoms described?
  - Did the patient express those thoughts leading someone to take action and get the patient to treatment?

# CY 2018 Non-Measure Data

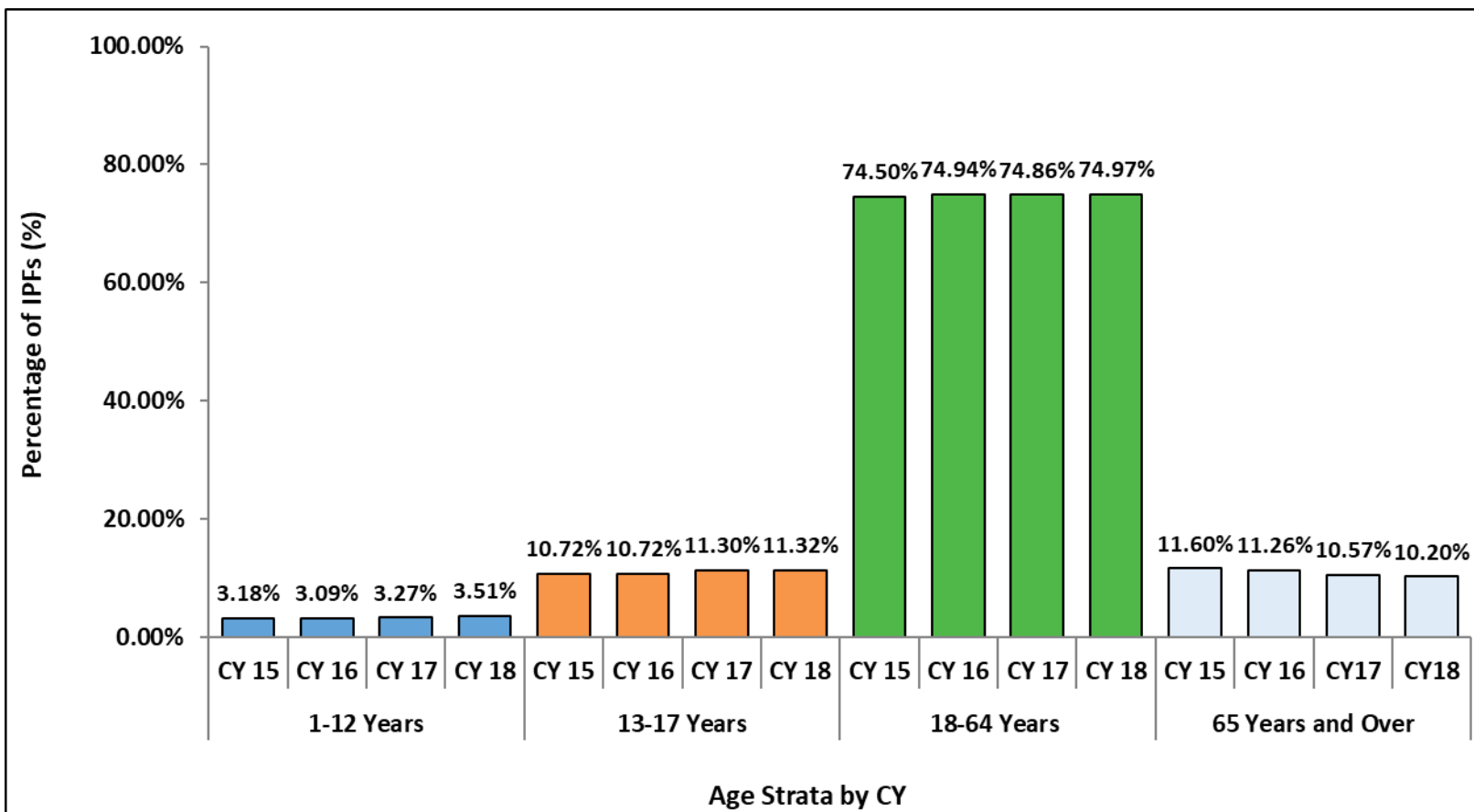
- Non-measure data that IPFs collected in CY 2018 and reported this year will be presented here for informational purposes only.
- The non-measure data will not appear in the *Hospital Compare* Preview Report nor be publically reported.
- CMS will use this information to assess measure submissions for accuracy and to contribute to the development of new measures.

# CY 2015–2018 Distribution of Total Discharges from IPFs

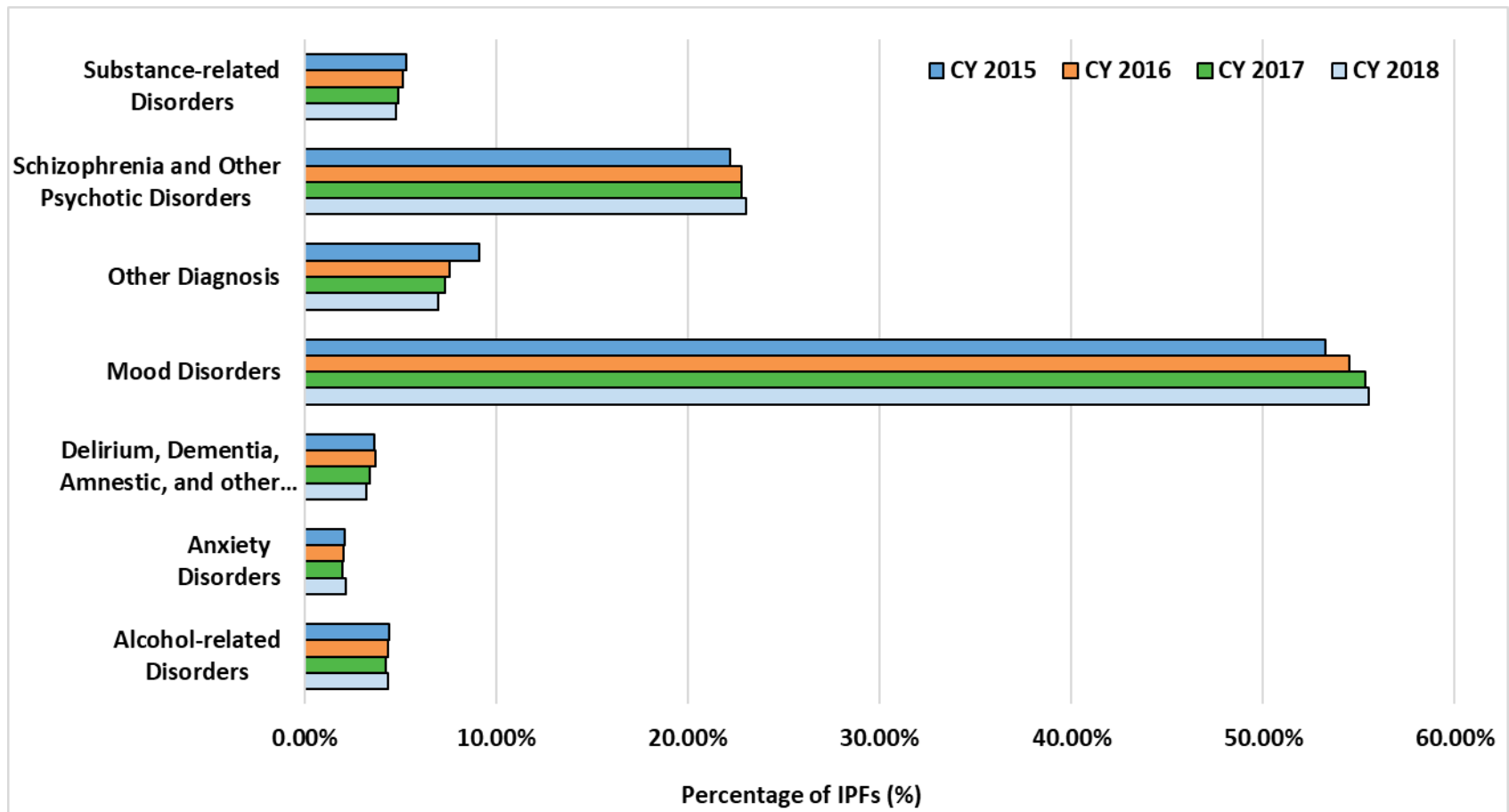


# CY 2015–2018

## Total Discharges by Age Group



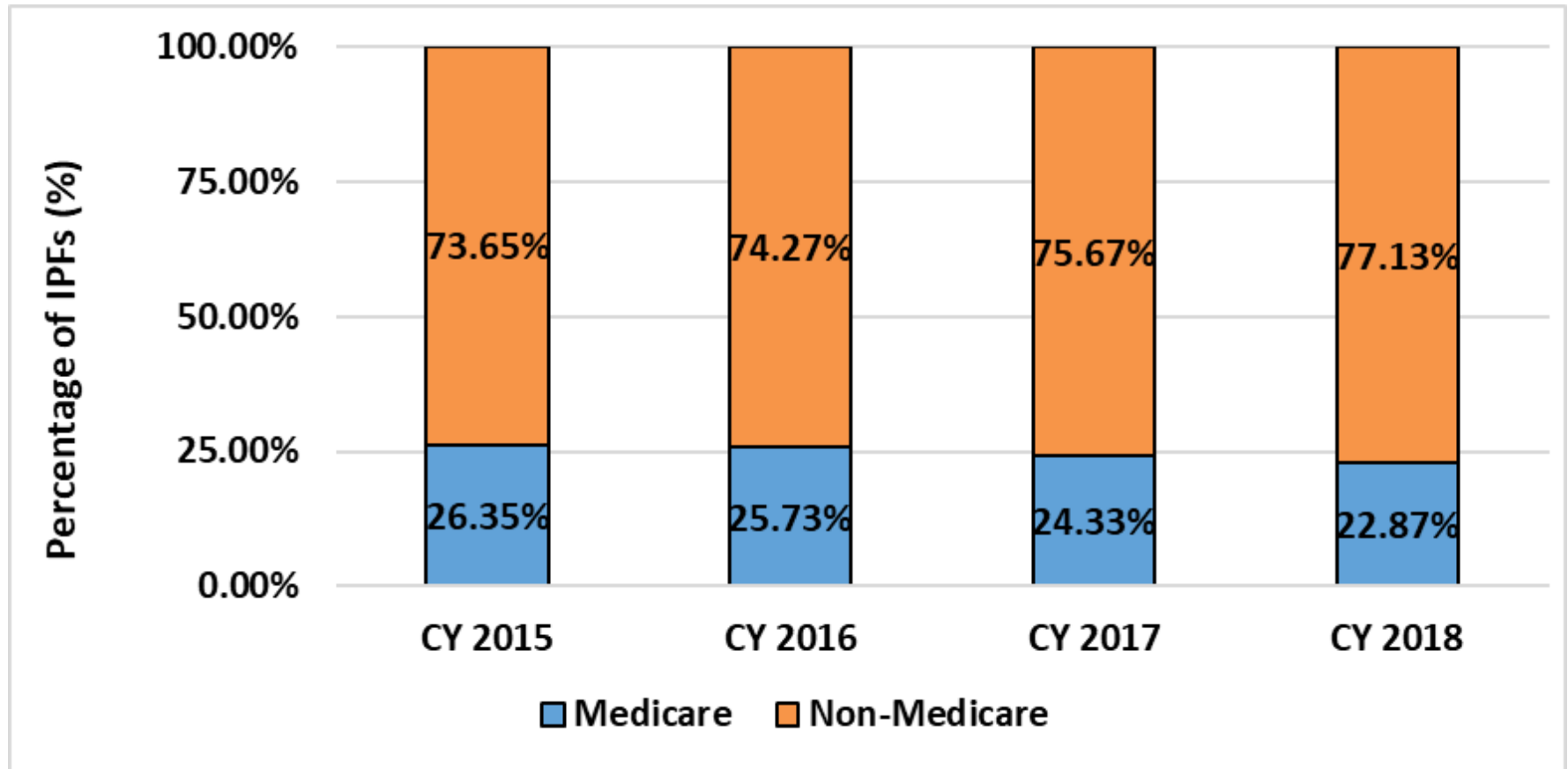
# CY 2015–2018 Total Discharges by Diagnostic Group





# CY 2015–2018

## Total Discharges by Payer



IPFQR Program FY 2020 Data Review

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## **Helpful Resources**

# Future Webinar Topics



## **IPFQR Program ISRs for CBMs Review**

Review steps to access and use IPF-Specific Reports (ISRs) and supporting documents for the claims-based measures (CBMs) in the IPFQR Program.

## **IPFQR Program Manual Version 5.1 and Updated Paper Tools Review**

Review updates to the latest version of the manual and various optional paper tools.



**Future webinar titles, dates, and times will be communicated via the IPFQR Program Listserve.**

# Helpful Resources

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



# Helpful Resources

Stay up to date...



...and get answers to your questions.



# Acronyms

<b>CBM</b>	claims-based measure	<b>IPF</b>	inpatient psychiatric facility
<b>CMS</b>	Centers for Medicare & Medicaid Services	<b>IPFQR</b>	Inpatient Psychiatric Facility Quality Reporting
<b>CY</b>	Calendar Year	<b>ISRs</b>	IPF-Specific Reports
<b>FUH</b>	Follow-Up After Hospitalization for Mental Illness	<b>Q&amp;A</b>	questions and answers
<b>FY</b>	Fiscal Year	<b>SUB</b>	Substance Use
<b>HBIPS</b>	Hospital-Based Inpatient Psychiatric Services	<b>TOB</b>	Tobacco Use
<b>IMM-2</b>	Influenza Immunization	<b>VIQR</b>	Value, Incentives, and Quality Reporting

IPFQR Program FY 2020 Data Review

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**Thank You**

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