



Inpatient Psychiatric Facility Quality Reporting (PCHQR) Program

Support Contractor

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program: Review of IPF-Specific Reports (ISRs) for Claims-Based Measures (CBMs)

Presentation Transcript

Speaker

Jason Smoot, MPP

Measure Maintenance and Implementation Lead

Behavioral Health Measures: Development, Re-evaluation, and Maintenance Contractor

Moderator

Evette Robinson, MPH

Program Lead, IPFQR Program

Inpatient Value, Incentives, and Quality Reporting (VIQR)

Outreach and Education Support Contractor

November 7, 2019

2 p.m. ET

DISCLAIMER: This transcript was current at the time of publication and/or upload onto the *Quality Reporting Center* and *QualityNet* websites. Medicare policy changes frequently. Any links to Medicare online source documents are for reference use only. In the case that Medicare policy, requirements, or guidance related to this transcript change following the date of posting, this transcript will not necessarily reflect those changes; given that it will remain as an archived copy, it will not be updated.

This transcript was prepared as a service to the public and is not intended to grant rights or impose obligations. Any references or links to statutes, regulations, and/or other policy materials included in the presentation are provided as summary information. No material contained therein is intended to take the place of either written laws or regulations. In the event of any conflict between the information provided by the transcript and any information included in any Medicare rules and/or regulations, the rules and regulations shall govern. The specific statutes, regulations, and other interpretive materials should be reviewed independently for a full and accurate statement of their contents.

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Support Contractor

Evette Robinson: Before we proceed with today's webinar, I would like to cover a few housekeeping items specific to the IPFQR Program's webinar events. As a reminder, we do not recognize the raised-hand feature in the chat tool during webinars. Instead, you can submit any questions pertinent to the webinar topic to us via the chat tool. Any unanswered questions will be responded to and published in the *QualityNet* Questions and Answers (Q&A) tool at a later date. Any questions received that are not related to the topic of the webinar will not be answered in the chat tool. 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. 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 [Quality Reporting Center.com](#) in your web browser and, on the bottom left of the screen, you will see a list of Upcoming Events. Click on the link for this event, and there you will find the presentation slides available for download.

Welcome to today's presentation titled, *Inpatient Psychiatric Facility Quality Reporting Program: Review of IPF-Specific Reports (ISRs) for Claims-Based Measures (CBMs)*. My name is Evette Robinson. I am the IPFQR Program Lead for the VIQR Support Contractor and I will be the moderator for today's event.

I would like to take a moment to introduce our guest speaker, Jason Smoot, who is the Measure Maintenance and Implementation Lead for the Behavioral Health Measures: Development, Re-evaluation, and Maintenance Contract between CMS and Mathematica. He has been with Mathematica for over five years, where he leads measure maintenance activities for the claims-based measures and, most recently, supported creation of the ISR templates and user guides. He has worked extensively with quality measures throughout the measure lifecycle in his time at Mathematica. He received his master's degree in public policy from the University of Michigan. At this time, I will turn the presentation over to our speaker, Jason Smoot. Jason, the floor is yours.

Jason Smoot: Thank you, Evette. As with fiscal year (FY) 2019, CMS will again be providing facilities with reports for their IPFQR Program CBMs prior to public reporting for FY 2020. IPF-specific reports, or ISRs, are confidential

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Support Contractor

and allow facilities to preview their results before the results are made public. ISRs provide additional information to facilities, which is not available to the public, to help inform quality improvement activities.

Both the Follow-Up after Hospitalization for Mental Illness, or FUH, measure and the 30-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an IPF, or IPF Readmission, measure were publicly reported last year. FUH was added to the program in August 2013, and it was first publicly reported in December 2016. FY 2020 public reporting will use version 3.0 of the measure, which has a performance period of July 1, 2017 through June 30, 2018. The performance period for both measures represent the span of time in which a discharge must occur to be included in the measure. IPF Readmission was added to the program in August 2016, and it was first publicly reported in February 2019. FY 2020 public reporting will use version 2.0 of the measure, which has a performance period of July 1, 2016 through July 30, 2018.

The purpose of today's webinar is to provide the IPF community with ways to access and use ISRs and supporting documents for the FUH measure and the IPF Readmission measure.

At the end of this webinar, attendees will understand how to access their ISRs and supporting documents, as well as how to interpret FUH and IPF Readmission ISRs.

Let's begin by reviewing how to access the ISRs and supporting documents.

First, you will select Secure File Transfer in the drop down on the *QualityNet Secure Portal* Login page and click the Let's Go button.

Next, you will log into the *QualityNet Secure Portal* as normal.

On the next screen, you will click on the link for Secure File Transfer at the top of the page.

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Support Contractor

You will then need to download your facility's ISR from the AutoRoute_inbox folder. You will select the IPFQR ISR zip file and select Download.

For both claims-based measures, the ISR User Guides, which I will discuss in the coming sections of this presentation, can be found on *QualityNet* along with mock ISRs. The mock ISRs are ISRs with fictitious data for the facility-level data and real data for all state- and national-level data fields.

In the next several slides, we'll take a look at the IPF-Specific Report for the FUH measure.

FUH assesses the percentage of IPF hospitalizations for treatment of select mental health disorders that were followed by an outpatient mental health care encounter. Two rates are reported: the percentage of discharges for which the patient received follow-up within 7 days of discharge and the percentage of discharges for which the patient received follow-up within 30 days of discharge.

Your FUH ISR will be an Excel workbook with five worksheets, and I will go over each of these. The information in Worksheet 2, Publicly Reported, is the only information that will be publicly reported.

The summary worksheet provides general information on the measure, links to resources, and information on your facility. Before reviewing the report, please check that the name of your IPF and CMS Certification Number, or CCN, are accurate, and be sure to contact the *QualityNet* Help Desk if you notice any discrepancies.

This worksheet contains information that will be publicly available on *Hospital Compare* in January 2020. The data you see on this slide are fictitious. If your facility has a denominator of ten or fewer, your results will not be publicly reported. You will see your facility's denominator, as well as your facility's 7- and 30-day rates. You will also see the 7- and 30-day rates across your state and nationwide. Please refer to the ISR user guide for more information on this worksheet and those that follow.

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Support Contractor

This worksheet provides the nationwide distribution of facility-level 7- and 30-day IPF FUH rates. The final column provides your facility's percentile by each of the two rates. In this example, the facility's 7-day rate is as good as or better than 61 percent of the facility's in the nation with at least 11 denominator cases.

This worksheet provides information on the types of patients by diagnosis discharged from your facility and facilities nationwide. In this example, row 7 tells us that this facility had 47 patients discharged with mood disorders during the measurement period, which accounted for 55.3 percent of hospitalizations at this facility during that time. We also see the 7- and thirty-day rates for this facility only including those patients discharged with mood disorders. The national-level information is in the bottom half of the table.

This worksheet provides information on all discharges eligible for inclusion in the measure from your facility during the measurement period. Please contact the *QualityNet* Help Desk if you identify any rows with provider IDs in the second column that are not for your facility.

Now, let's take a look at the ISR for the IPF Readmission measure in more detail.

The IPF Readmission measure estimates an all-cause, unplanned, 30-day, risk-standardized readmission rate for adult Medicare fee-for-service patients with a principal discharge diagnosis of a psychiatric disorder or dementia/Alzheimer's disease.

Your IPF Readmission ISR will be an Excel workbook with 11 worksheets, and I will go over each of these. The information in Worksheet 2, Publicly Reported, is the only information that will be publicly reported.

The summary worksheet provides general information on the measure, links to resources, and information on your facility. As with the FUH ISR, please check that the name of your IPF and CCN are accurate and be sure to contact the *QualityNet* Help Desk if you notice any discrepancies.

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Support Contractor

This worksheet contains information that will be publicly available on *Hospital Compare* in January 2020. You will see your facility's comparative performance category, which will be worse than, no different from, or better than the national rate. If your facility has fewer than 25 cases eligible for the measure, you will see N/A in row 6 and your results will not be publicly reported. If the national observed unplanned readmission rate is within the range of the lower and upper limits of the 95 percent interval estimate, then your facility will be categorized as no different than the national rate.

Facility rates for each IPF are estimated from the results of a hierarchical logistic regression model that accounts for the mix of cases represented in the index admissions for each IPF during the measurement period. A Standardized Risk Ratio, or SRR, for each IPF is calculated as the predicted number of readmissions for a specific IPF divided by the number expected for any IPF with a similar case mix. The SRR is then used to calculate the Risk-Standardized Readmission Rate, or RSRR, by multiplying the SRR by the national readmission rate.

The RSRR and corresponding 95 percent interval estimate is calculated for each IPF. Measure performance is categorized as better than the national rate, no different than the national rate, worse than the national rate, or number of cases too small. Performance is based on the overlap of the IPF's 95 percent interval estimate with the observed national readmission rate. This figure shows the results of the three example facilities. Facility A has a 95 percent interval estimate that is better than the national rate of 20.1. Facility B has an interval estimate that runs over the national rate and thus is no different than the national rate. Facility C has an interval estimate that is worse than the national rate.

This worksheet provides the number of facilities in each performance category at the state and national level, including the number of those that had too few cases.

This worksheet shows how your RSRR was calculated. In this example, the total number of unplanned readmissions, 204, would be divided by the number of index admissions, 728, to arrive at the observed unplanned

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Support Contractor

readmission rate, 28.0 percent. This number would then be divided by your SRR, 1.18 here, to arrive at your RSRR. Because the national rate of 20.1 percent falls below the lower limit of this fictitious facility's 95 percent interval estimate, this facility performed worse than the national rate.

This worksheet provides the distribution of facility-level observed and risk-standardized readmission rates nationwide. Rows 7 and 9 show your facility's percentile rank for the observed and risk-standardized readmission rates. Because lower rates are better, in this example the facility's observed unplanned readmission rate is equivalent to or worse than 93 percent of facilities nationwide. The facility's RSRR is equivalent to or worse than 89 percent of facilities nationwide.

This worksheet provides information on the types of patients by diagnosis discharged from your facility and facilities nationwide. In this example, which uses fictitious data, we see that this facility had 56 patients discharged with developmental disorders during the measurement period, which accounted for 7.7 percent of hospitalizations at this facility during that time. We also see that 12.5 percent of these individuals were readmitted within 30 days and that 5.4 percent were readmitted with the same principal diagnosis. The national-level information is in the bottom half of the table.

This worksheet shows what type of facility patients were readmitted to, both at your facility and nationwide. You will see the total number of 30-day unplanned readmissions, the count and percent of unplanned readmissions that returned to the discharging facility, and the count and percent of unplanned readmissions that occurred at another facility. Rows 16 through 18 show whether individuals were readmitted to another IPF or an acute care hospital.

This worksheet shows how many patients were readmitted more than once during the measurement period. You will see the number of eligible index admissions and readmissions and the number of beneficiaries with an eligible index admission or readmission. In this example, there are fewer beneficiaries than eligible index admissions or readmissions because beneficiaries can have multiple eligible index admissions during the measurement period. The counts and percentages of beneficiaries with only one readmission during the

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Support Contractor

measurement period are provided in Rows 12 and 13. The counts and percentages of beneficiaries with two or more readmissions are provided in Rows 14 and 15.

This worksheet shows the top ten CCS principal discharge diagnoses for readmissions following discharges from your facility and facilities nationwide. In the example, the facility had a higher percentage of readmissions related to schizo-affective disorder than facilities nationwide. When considered with the information from Worksheet 6: Distribution of Rates, this could be because the facility treats a higher percentage of patients with schizo-affective disorder than are treated by IPFs nationwide.

This worksheet compares facility-level risk factor prevalence to national risk factor prevalence. Patient risk factor categories include gender, age, principal discharge diagnosis of the index admission, comorbidities, and other psychiatric-specific risk factors. In this example, the facility has a higher percentage of index admissions for patients between the ages of 18 and 34 than the national measure population. The facility does not have any qualifying index admissions for patients with principal discharge diagnoses of developmental disorders or dementia during the measurement period, which is indicated by NQ in the facility discharges column.

This worksheet provides information on all discharges eligible for inclusion in the measure from your facility during the measurement period. The figure on this slide does not include every column in this table—the remaining columns are on the next slide.

Here we see the remaining columns from the discharge-level data table, which includes information on the readmission, if there was one, for each case or row.

On this slide you can see a list of the acronyms that were referenced during the presentation.

This concludes my portion of today's webinar. I will now turn the presentation back over to Evette.

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Support Contractor

Evette Robinson

Thank you, Jason, for today's presentation. You provided a great review of the ISRs for the IPFQR Program claims-based measures. In the next several slides, I will review helpful resources pertaining to this topic as well as the IPFQR Program in general.

The specifications for both the FUH and IPF Readmission measures are on the *QualityNet* webpages referenced on this slide, as is the quick reference guide, which includes information on the confidential review period and contact information. These tools can also be accessed from the *Quality Reporting Center* IPFQR Program [Resources and Tools](#) webpage.

This slide lists a few upcoming webinar topics. We use the IPFQR Program Listserve to notify subscribers of future webinar information. In a few moments, I will provide more information about how you can subscribe to the IPFQR Program Listserve to receive email notifications about upcoming webinar events and other information about the IPFQR Program.

CMS recommends that IPFs refer to the updated IPFQR Program manual for information pertaining to the IPFQR Program. The manual is located on the *QualityNet* and *Quality Reporting Center* websites, which can be accessed by clicking on the icons on this slide. The IPFQR Program Manual contains information about program requirements, measures, and various tools pertinent to the IPFQR program.

We encourage you to keep us up to date with points of contact at your facility by sending the completed Contact Change Form to us whenever there are staff changes relevant to the IPFQR Program or other quality reporting programs. We also recommend that you sign up for the IPFQR Program Listserve, if you have not already, by clicking on the Listserve Registration icon on this slide. Once enrolled in the IPFQR Program Listserve, you will receive communications pertaining to IPFQR Program webinars, program updates, and other announcements. Information about upcoming webinars can be viewed by clicking on the Upcoming Webinars icon. We encourage everyone to leverage the search tool in the *QualityNet* Q&A tool to find information about program requirements and measures OR, if not found, submit your inquiries to us via the tool. We also welcome your recommendations for

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Support Contractor

future webinar topics via the Q&A tool, which you can access by selecting the Q&A Tool icon on this slide. You can click on the Email Support icon to send an email to us at IPFQualityReporting@hcqis.org with questions regarding eligibility, such as next steps for a newly-eligible provider, or to notify us that an IPF is closed or will be closing. You can also contact the VIQR Support Contract team via phone at (866) 800-8765 or secure fax at (877) 789-4443.

This concludes the content portion of today's webinar titled, *IPFQR Program: Review of IPF-Specific Reports (ISRs) for Claims-Based Measures (CBMs)*. Thank you for your time and attention. Have a great day!