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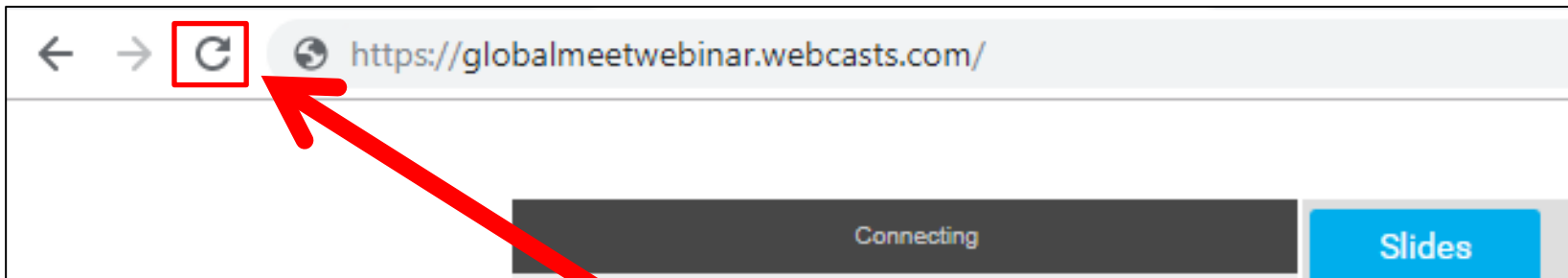
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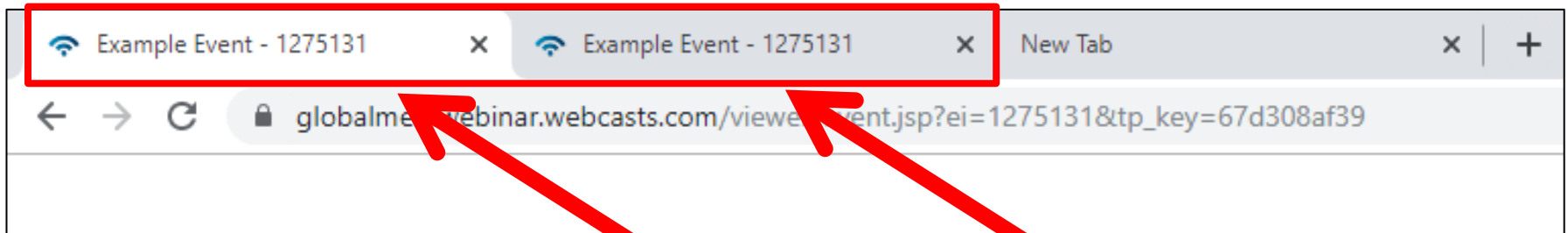
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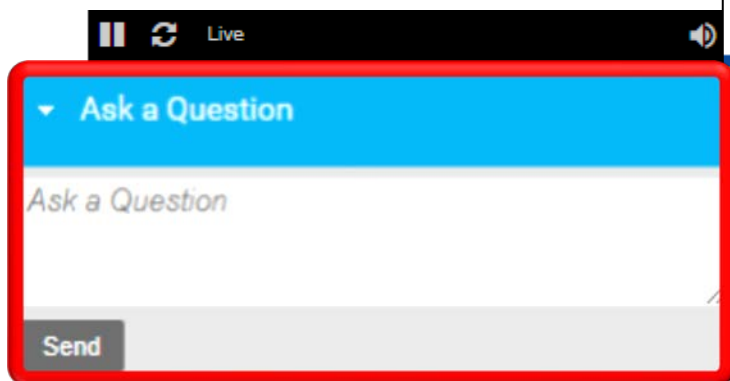
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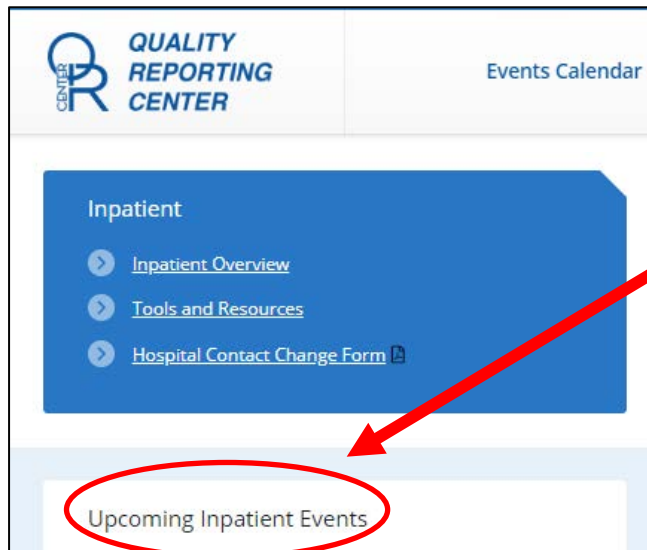
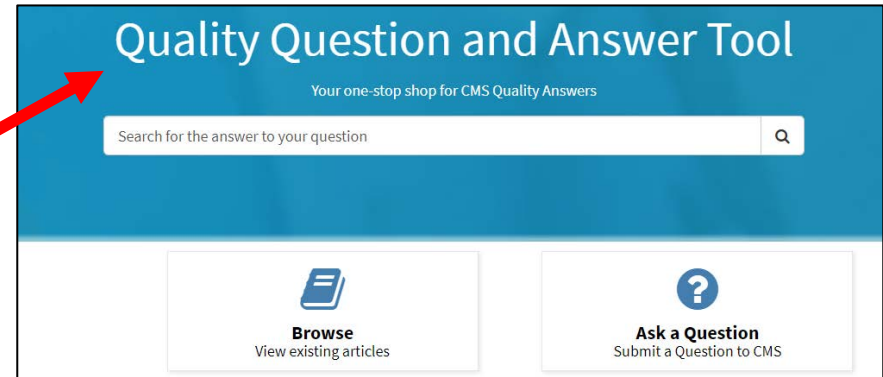
Today's Presentation



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Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program: FY 2022 IPF PPS Proposed Rule

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May 27, 2021

Purpose

This presentation will summarize the proposed updates to the IPFQR Program, as outlined in the Fiscal Year (FY) 2022 Inpatient Psychiatric Facility Prospective Payment System (IPF PPS) Proposed Rule.

Objectives

Attendees will be able to:

- Interpret the FY 2022 IPF PPS Proposed Rule, as it pertains to the IPFQR Program.
- Describe the proposed changes to the IPFQR Program.

IPFQR Program: FY 2022 IPF PPS Proposed Rule

Overview

Functions of the Proposed Rule

Publication of the FY 2022 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 potential program changes.

Summary of Proposed Changes

Measures to be Added

CMS proposes to adopt two new measures into the IPFQR Program:

1. COVID-19 Vaccination Coverage Among Health Care Personnel (HCP) for the FY 2023 payment determination and subsequent years
2. Follow-Up After Psychiatric Hospitalization (FAPH) for the FY 2024 payment determination and subsequent years

Summary of Proposed Changes

Measures to be Removed

CMS proposes to remove the following measures from the IPFQR Program:

1. Alcohol Use Brief Intervention Provided or Offered and Alcohol Use Brief Intervention (SUB-2/2a)
2. Tobacco Use Brief Intervention Provided or Offered and Tobacco Use Brief Intervention (TOB-2/2a)
3. Timely Transmission of Transition Record (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)
4. Follow-Up After Hospitalization for Mental Illness (FUH), National Quality Forum (NQF) #0576



Summary of Proposed Changes

CMS proposes changes to the following:

- Procedural requirements of the IPFQR Program, pertaining to the *QualityNet* System Administrator role in the Hospital Quality Reporting (HQR) system
- Data submission requirements by adopting patient-level reporting for certain chart-abstracted measures beginning with FY 2024 payment determination and subsequent years

Summary of Proposed Changes

CMS requests public comment on the following topics:

- Elements of a potential data validation pilot
- Closing the Health Equity Gap in CMS Quality Programs
- Current measure set
- Possible new measures or new measure topics

IPFQR Program Areas Without Proposed Changes

In this proposed rule, CMS is not proposing any changes to its previously finalized:

- Public Display and Review Requirements
 - Reporting Requirements for the FY 2022 Payment Determination and Subsequent Years
 - Quality Measure Sampling Requirements
 - Non-Measure Data Collection
 - Data Accuracy and Completeness Acknowledgement (DACA) Requirements
- Reconsideration and Appeals Procedures
- Extraordinary Circumstances Exceptions (ECE) Policy

IPFQR Program: FY 2022 IPF PPS Proposed Rule

COVID-19 Vaccination Coverage Among Health Care Personnel (HCP)

COVID-19 Vaccination Coverage Among HCP

Background

Vaccination is a critical part of the nation's strategy to effectively counter the spread of COVID-19 and ultimately help restore societal functioning.

CMS believes it is important to require IPFs to report HCP vaccination in their facilities to assess whether they are taking steps to protect health care workers and to help sustain their ability to continue serving their communities throughout the public health emergency and beyond.

COVID-19 Vaccination Coverage Among HCP Background

- This is a process measure developed by the Centers for Disease Control and Prevention (CDC) to assess the proportion of an IPF's health care workforce that has been vaccinated against COVID-19.
- Vaccination coverage for the purposes of this measure is defined as the estimated percentage of HCP eligible to work at the IPF for at least 1 day who received a completed vaccination course.

COVID-19 Vaccination Coverage Among HCP Denominator Statement

The number of HCP eligible to work in the IPF for at least 1 day during the reporting period, excluding persons with contraindications to COVID-19 vaccination that are described by the CDC.

COVID-19 Vaccination Coverage Among HCP

Numerator Statement

The numerator is the cumulative number of HCP eligible to work in the health care facility for at least 1 day during the reporting period and who received a completed vaccination course against COVID-19 since the vaccine was first available or on a repeated interval if revaccination on a regular basis is needed.

COVID-19 Vaccination Coverage Among HCP Reporting Requirements and Resources

- If finalized, IPFs would report COVID-19 vaccination data to the CDC National Healthcare Safety Network (NHSN) web-based surveillance system.
- Data would be reported at least one week each month beginning in October 2021 for the fourth quarter of 2021 (October 1, 2021 through December 31, 2021) reporting period, affecting FY 2023 payment determination.
- Reporting would continue for each quarter in subsequent years.
- The current specifications for this measure are available at <https://www.cdc.gov/nhsn/nqf/index.html>.

IPFQR Program: FY 2022 IPF PPS Proposed Rule

Follow-Up After Psychiatric Hospitalization (FAPH)

Follow-Up After Psychiatric Hospitalization Background

The Follow-Up After Psychiatric Hospitalization (FAPH) measure:

- Is an expanded and enhanced version of the Follow-Up After Hospitalization for Mental Illness (FUH), NQF #0576 measure.
- Addresses the percentage of Medicare fee-for-service (FFS) beneficiaries who were discharged from an IPF with a principal diagnosis of select mental illness or substance use disorders (SUDs) for which the patient received a follow-up visit for treatment of mental illness or SUD.

Follow-Up After Psychiatric Hospitalization Background

- FAPH uses Medicare FFS claims to calculate two rates for this measure:
 - 1) The percentage of discharges for which the patient received follow-up within 7 days of discharge
 - 2) The percentage of discharges for which the patient received follow-up within 30 days of discharge.
- Specifically, the measure links Medicare FFS claims submitted by IPFs and subsequent outpatient providers for Medicare FFS IPF discharges.
- If adopted the FAPH measure would replace the FUH measure and IPFs would not be required to collect or report data for this claims-based measure.

Follow-Up After Psychiatric Hospitalization Denominator Statement

The number of discharges paid under the IPF PPS during the performance period for Medicare FFS patients with a principal diagnosis of mental illness or SUD.

Follow-Up After Psychiatric Hospitalization Numerator Statement

- The first rate that would be reported for this measure includes discharges from a psychiatric facility that are followed by an outpatient visit for treatment of mental illness or SUD within 7 days.
- The second rate reported for this measure would include discharges from a psychiatric facility that are followed by an outpatient visit for treatment of mental illness or SUD within 30 days.
- Includes all provider types for the follow-up visit if it is billed with a diagnosis of mental illness or SUD.

Note: For information about the proposed FAPH measure, click here:

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityMeasures/Downloads/Measures-under-Consideration-List-for-2018.pdf>



IPFQR Program: FY 2022 IPF PPS Proposed Rule

Measures Proposed for Removal

Follow-Up After Hospitalization for Mental Illness (FUH)

If CMS finalizes adoption of the Follow-Up After Psychiatric Hospitalization (FAPH) measure, then the Follow-Up After Hospitalization for Mental Illness (FUH) measure will be removed from the IPFQR Program under measure removal Factor 3.

Factor 3 applies when a “measure can be replaced by a more broadly applicable measure (across settings or populations) or a measure that is more proximal in time to desired patient outcomes for the particular topics.”

Alcohol Use Brief Intervention Provided or Offered and Alcohol Use Brief Intervention (SUB-2/2a)

- CMS proposes to remove the SUB-2 measure and the subset measure SUB-2a from the IPFQR Program beginning with the FY 2024 payment determination under measure removal Factor 8: “The costs associated with a measure outweigh the benefit of its continued use in the program.”
- Based on data received for the FY 2019 and FY 2020 payment determination, CMS believes that most IPFs routinely offer brief alcohol use interventions and that IPFs will continue to offer these interventions to patients, regardless of whether the SUB-2/2a measure is in the IPFQR Program measure set, because it has become an embedded part of their clinical workflows.
- The Alcohol & Other Drug Use Disorder Treatment Provided or Offered at Discharge (SUB-3) and the Alcohol & Other Drug Use Disorder Treatment at Discharge (SUB-3a) measures remain in the program.

Tobacco Use Brief Intervention Provided or Offered and Tobacco Use Brief Intervention (TOB-2/2a)

- CMS proposes to remove the TOB-2 measure and the subset measure TOB-2a from the IPFQR Program beginning with the FY 2024 payment determination under measure removal Factor 8: “The costs associated with a measure outweigh the benefit of its continued use in the program.”
- Based on data received for the FY 2019 and FY 2020 payment determination, CMS believes that most IPFs routinely offer alcohol use brief interventions and that IPFs will continue to offer these interventions to patients, regardless of whether the TOB-2/2a measure is in the IPFQR Program measure set, because it has become an embedded part of their clinical workflows.
- The Tobacco Use Treatment Provided or Offered at Discharge (TOB-3) and the Tobacco Use Treatment at Discharge (TOB-3a) measures remain in the program.

Timely Transmission of Transition Record (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)

- CMS proposes to remove the Timely Transmission of Transition Record measure beginning with the FY 2024 payment determination under measure removal Factor 8: “The costs associated with a measure outweigh the benefit of its continued use in the program.”
- The updated Conditions of Participation (CoPs) adopted on May 1, 2020, overlap with requirements of the Timely Transmission of Transition Care measure, thereby increasing costs of the measure while decreasing its benefit.
 - Per the updated CoPs, psychiatric hospitals that have electronic health record (EHR) systems with the technical capacity to generate information for electronic patient event notifications are required to send electronic patient event notifications of a patient’s admission, discharge, and/or transfer to another health care facility or to another community provider at the time of a patient's discharge or transfer.

IPFQR Program: FY 2022 IPF PPS Proposed Rule

Procedural and Data Submission Requirements

Summary of Proposed Changes

CMS proposes the following:

- Update reference to the *QualityNet* System Administrator to *QualityNet* Security Official and to no longer require an active account to qualify for payment.
- Adopt patient-level reporting for chart-abstracted measures.

The proposed timeline is:

- Voluntary reporting of patient-level data would be available for the summer 2022 data submission period.
- Mandatory patient-level data reporting would occur for the summer 2023 data submission period and subsequent years.

IPFQR Program Measure Set for the FY 2023 Payment Determination and Subsequent Years

NQF #	Measure ID	Measure
0640	HBIPS-2	Hours of Physical Restraint Use
0641	HBIPS-3	Hours of Seclusion Use
0560	HBIPS-5	Patients Discharged on Multiple Antipsychotic Medications with Appropriate Justification
0576	FUH	Follow-Up After Hospitalization for Mental Illness
N/A	SUB-2 and SUB-2a	Alcohol Use Brief Intervention Provided or Offered and SUB-2a Alcohol Use Brief Intervention
N/A	SUB-3 and SUB-3a	Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge and SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge
N/A	TOB-2 and TOB-2a	Tobacco Use Treatment Provided or Offered and TOB-2a Tobacco Use Treatment
N/A	TOB-3 and TOB-3a	Tobacco Use Treatment Provided or Offered at Discharge and Tobacco Use Treatment at Discharge
1659	IMM-2	Influenza Immunization
N/A	N/A	Transition Record with Specified Elements Received by Discharged Patients (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)
N/A	N/A	Timely Transmission of Transition Record (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)
N/A	N/A	Screening for Metabolic Disorders
2860	N/A	Thirty-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an Inpatient Psychiatric Facility
3205	MedCont	Medication Continuation Following Inpatient Psychiatric Discharge
TBD	COVID HCP	COVID-19 Healthcare Personnel (HCP) Vaccination Measure

IPFQR Program Measure Set for the FY 2024 Payment Determination and Subsequent Years

NQF #	Measure ID	Measure
0640	HBIPS-2	Hours of Physical Restraint Use
0641	HBIPS-3	Hours of Seclusion Use
0560	HBIPS-5	Patients Discharged on Multiple Antipsychotic Medications with Appropriate Justification
N/A	FAPH	Follow-Up After Psychiatric Hospitalization
N/A	SUB-3 and SUB-3a	Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge and SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge
N/A	TOB-3 and TOB-3a	Tobacco Use Treatment Provided or Offered at Discharge and Tobacco Use Treatment at Discharge
1659	IMM-2	Influenza Immunization
N/A	N/A	Transition Record with Specified Elements Received by Discharged Patients (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)
N/A	N/A	Screening for Metabolic Disorders
2860	N/A	Thirty-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an Inpatient Psychiatric Facility
3205	MedCont	Medication Continuation Following Inpatient Psychiatric Discharge
TBD	COVID HCP	COVID-19 Healthcare Personnel (HCP) Vaccination Measure

IPFQR Program: Reporting Periods vs. Fiscal Years January 1, 2020 – December 31, 2023

Calendar Year and Fiscal Year

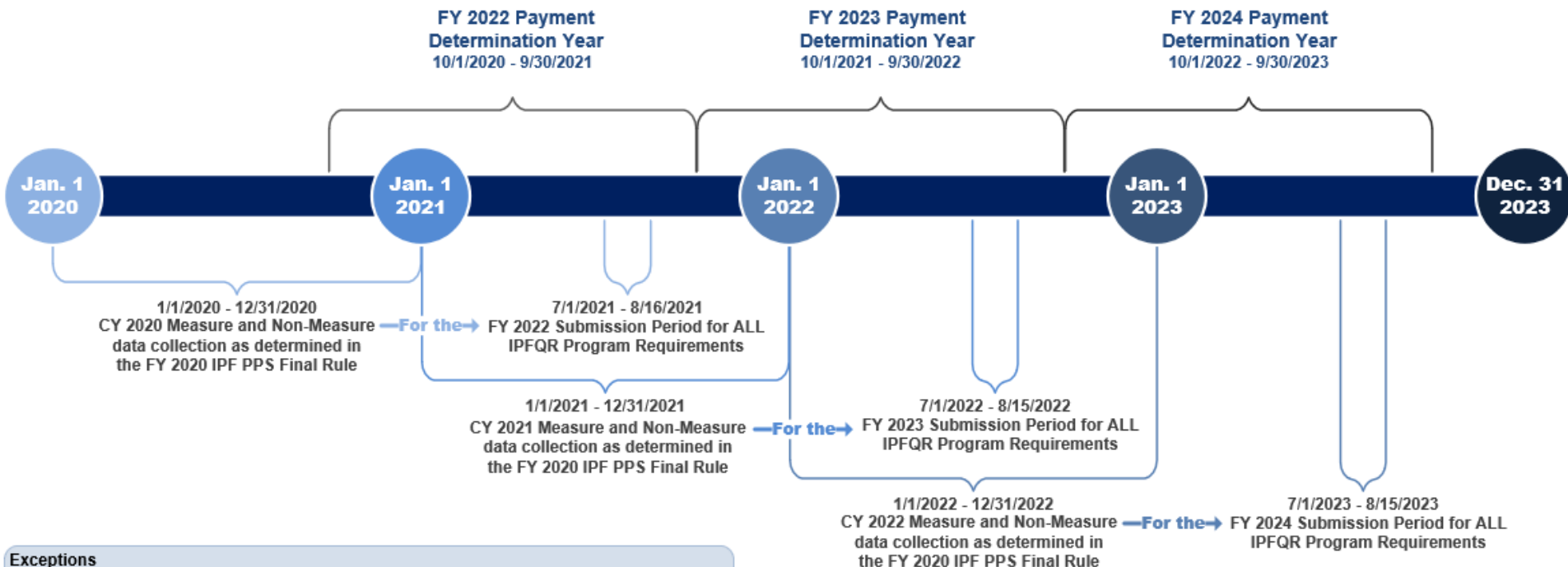
The Centers for Medicare & Medicaid Services (CMS) uses quality data **collected** by IPFs **during a reporting period** to make payment decisions for a future year.

- Reporting Period = Calendar Year (CY)
- Fiscal Year (FY) = Payment Year
- Annual Payment Update (APU) = the annual percentage increase that CMS applies to Medicare reimbursement for eligible IPFs

IPF Data → CMS APU Decisions

Submission of CY data is connected to payment in a future FY, as illustrated below.

- IPFs collect data for CY 2020 discharges.
- IPFs submit data to CMS in 2021.
- CMS makes preliminary FY 2022 APU decisions.
- CMS provides IPFs with an opportunity to request reconsiderations of FY 2022 APU decisions.
- CMS makes final FY 2022 APU decisions.



Exceptions

- Data used for claims-based measures (CBMs) 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, 2020–March 31, 2021 and submit the data in 2021 to impact the FY 2022 payment determination.

IPFQR Program: FY 2022 IPF PPS Proposed Rule

Request for Public Comment

Potential Data Validation Pilot

CMS is requesting comments regarding potentially adopting a data validation policy for the IPFQR Program.

Closing the Health Equity Gap in CMS Quality Programs

CMS aims to address the inequities in health care outcomes that persists in the U.S., including among Medicare patients.

- “We request information on expanding several related CMS programs to make reporting of health disparities based on social risk factors and race and ethnicity more comprehensive and actionable for hospitals, providers, and patients...[as] part of an ongoing effort across CMS to evaluate appropriate initiatives to reduce health disparities.”
- “We are committed to achieving equity in health care outcomes for our beneficiaries by supporting providers in quality improvement activities to reduce health inequities, enabling them to make more informed decisions, and promoting provider accountability for health care disparities.”



Closing the Health Equity Gap in CMS Quality Programs

The Request for Information (RFI) in this proposed rule addresses the CMS Disparity Methods initiative, which CMS is considering implementing in the IPFQR Program.

Specifically, CMS is “seeking public comment on the potential stratification of quality measures in the IPFQR Program across two social risk factors: dual eligibility and race/ethnicity.”

CMS is also seeking comment on potential creation of a Facility Equity Score to summarize facility performance.

- Across multiple social risk factors
- Across the two disparity methods
- Potentially for multiple measures



Request for Public Comment: Possible New Measures or New Measure Topics

Potential future adoption of:

- Patient Experience of Care Data Collection Instrument
- Patient Reported Functional Outcomes Measure
- Measures for Electronic Data Reporting

Proposed Rule Available for Review and Comments

The FY 2022 IPF PPS Proposed Rule (86 FR 19480) is available to view and download from the *Federal Register*:
<https://www.federalregister.gov/documents/2021/04/13/2021-07433/medicare-program-fy-2022-inpatient-psychiatric-facilities-prospective-payment-system-and-quality>

CMS will accept comments on the proposed rule and the request for information until June 7, 2021.

Proposed Rule Available for Review and Comments

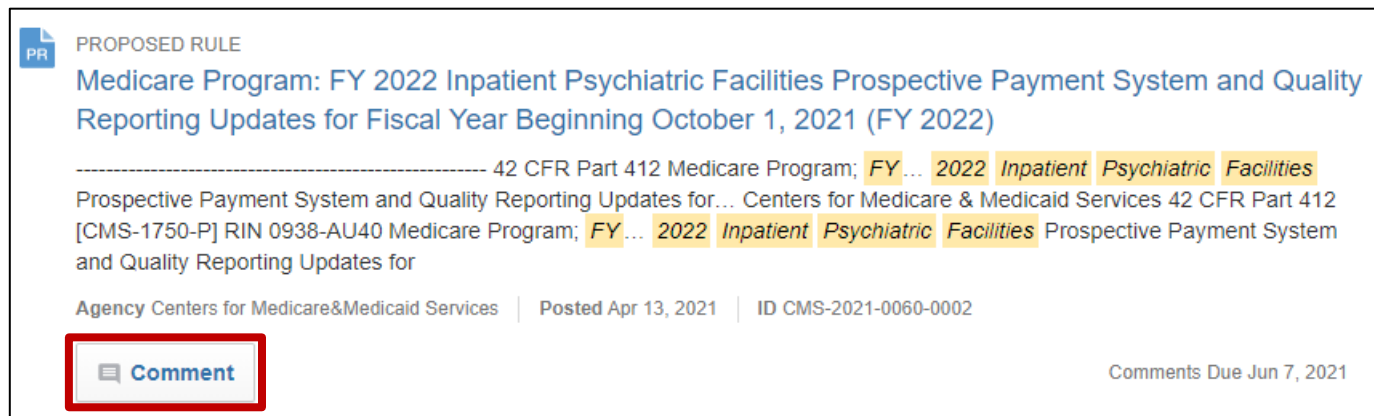
Submit a comment electronically by either:

- 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 2022 Inpatient Psychiatric Facilities,” and then clicking on the **Comment** button below the rule.



PROPOSED RULE

Medicare Program: FY 2022 Inpatient Psychiatric Facilities Prospective Payment System and Quality Reporting Updates for Fiscal Year Beginning October 1, 2021 (FY 2022)

----- 42 CFR Part 412 Medicare Program; FY... 2022 Inpatient Psychiatric Facilities
Prospective Payment System and Quality Reporting Updates for... Centers for Medicare & Medicaid Services 42 CFR Part 412
[CMS-1750-P] RIN 0938-AU40 Medicare Program; FY... 2022 Inpatient Psychiatric Facilities Prospective Payment System
and Quality Reporting Updates for

Agency Centers for Medicare&Medicaid Services | Posted Apr 13, 2021 | ID CMS-2021-0060-0002

Comment

Comments Due Jun 7, 2021

Refer to the *Federal Register* for information on other methods to submit comments.

IPFQR Program: FY 2022 IPF PPS Proposed Rule

Helpful Resources

Acronyms

APU	Annual Payment Update	HCP	Health Care Personnel
CDC	Centers for Disease Control and Prevention	HQR	Hospital Quality Reporting
CMS	Centers for Medicare & Medicaid Services	IMM	Influenza Immunization
CoPs	Conditions of Participation	IPF	inpatient psychiatric facility
CY	Calendar Year	IPFQR	Inpatient Psychiatric Facility Quality Reporting
DACA	Data Accuracy and Completeness Acknowledgement	NHSN	National Healthcare Safety Network
ECE	Extraordinary Circumstances Exceptions	NQF	National Quality Forum
EHR	Electronic Health Record	PPS	prospective payment system
FAPH	Follow-Up After Psychiatric Hospitalization	RFI	Request for Information
FFS	fee-for-service	SUB	Substance Use Measure
FUH	Follow-Up After Hospitalization for Mental Illness	SUDs	Substance Use Disorders
FY	Fiscal Year	TOB	Tobacco Treatment Measures
HBIPS	Hospital-Based Inpatient Psychiatric Services	VIQR	Value, Incentives, and Quality Reporting



Future Webinar Topics



Keys to Successful Fiscal Year 2022 Data Submission
Review FY 2022 IPFQR Program requirements, keys to successful data submission, and how to verify data accuracy.

An Introduction to the IPFQR Program

Review program guidelines, requirements, and timelines.



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.



IPFQR Program: FY 2022 IPF PPS Proposed Rule

Thank You

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