Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

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

IPFQR Program: Patient-Level Reporting
Presentation Transcript

Speakers

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Judy Wade: Hello, everyone. Welcome to the webinar titled *IPFQR Program: Patient-Level Reporting*. My name is Judy Wade, and I am a Project Coordinator for the VIQR Support Contract. I am one of the speakers for today's event. I am joined today by Evette Robinson, and she is the IPFQR Program Lead for the VIQR Support Contractor.

The purpose of this presentation is to provide IPFs and their vendors with keys to successful patient-level data submission and offer guidance to verify data accuracy.

By the end of this presentation, attendees will be able to successfully submit data by avoiding common submission errors in the Hospital Quality Reporting System, as well as locate and access helpful IPFQR Program resources.

If you have questions pertinent to the webinar topic, please send an email to WebinarQuestions@hsag.com. Write "IPF PLR" in the subject line. If your question pertains to a specific slide, include the slide number in the body of the email.

First, let's answer the question, "What is patient-level reporting?"

For the purposes of the IPFQR Program, the term "patient-level reporting" is used to describe data that are abstracted from patients' medical records into discrete XML files and then uploaded into the *Hospital Quality Reporting Secure Portal.* CMS also collects facility-level data from IPFs in XML files pertaining to annual discharges. Throughout this webinar, we will use patient-level reporting, or PLR, to broadly address XML files that will be uploaded into the *HQR Secure Portal* during the voluntary period.

As stated in the Fiscal Year 2022 IPF PPS Final Rule, reporting will be on a voluntary basis during the summer 2022 data submission period. Mandatory patient-level data reporting starts with the summer 2023 data submission period and includes subsequent years. CMS is finalizing an XML file layout designed to enable reporting of the facility-level denominator values for the HBIPS-2 and HBIPS-3 measure.

More details about this and other improvements to the IPFQR Program's PLR process will be addressed in an upcoming addendum to the *Specification Manual for National Inpatient Psychiatric Facility Quality Measures* [IPF Specifications Manual] and in future webinars.

Now that we have some background about patient-level reporting, let's dive into how to upload XML files.

First, as a reminder, you must access and log in to the Hospital Quality Reporting, or HQR, System, which is the only CMS-approved method for IPFQR Program data and DACA submission. CMS highly recommends that all IPFs ensure at least two people with knowledge of the data can verify the accuracy of the data entered in the HQR System, even if data entry is done by a vendor. Refer to slides 14–18 in the *IPFQR Program: Keys to Successful FY 2023 Reporting* webinar for instructions on how to log in to the *HQR Secure Portal*.

Before we dive into how to upload the XML files, we want to make sure that everyone is aware that there are two separate environments in which XML files can be uploaded. The Test environment is designed to ensure that all data are accurate before uploading into the production environment. Specifically, you can upload XML files into the Test environment to validate vendor authorizations, verify whether the XML file layout is correct, review reasons why a file or files were rejected, and review measure set counts. For these reasons, we recommend uploading XML files into the Test environment first to ensure that they are being processed as expected. Once you are ready to upload clean, actual XML data files for submission to CMS, then you will do so in the Production environment. The data from these files will be used to calculate the measure numerator, denominator, and rate values. Note: Only data submitted into the Production environment will be submitted to CMS. Later in this presentation, we will cover the reports that can be generated based on XML files uploaded into these two environments.

To upload XML files, the first step is to log into the *HQR Secure Portal*. Next, hover your mouse on the left side of the screen to expand the menu options. Then, click on Data Submissions.

The first image on this slide shows what appears on the next screen if you only have access to upload data for the IPFQR Program. If you have access to upload data for more than one Quality Reporting Program, you will see multiple tabs at the top of the screen.

Next, click the Chart Abstracted tab, not the Web-based Measures tab.

We recommend uploading files into the Test environment first to ensure file accuracy and completeness. Click on Test to upload an XML file into the Test environment.

Click the blue Select Files button to upload the XML files or drag and drop the files into the highlighted area.

If you have access to more than one Quality Reporting Program, then you will have the option to select the program for which you will upload XML files. Be sure you choose IPF Quality Reporting for Program Designation when uploading chart-abstracted files. Note: In order for a vendor to upload XML files on behalf of an IPF, the vendor must be authorized by the IPF to upload files, and the specific individual from the vendor must have the appropriate permission in the HQR System to upload files.

After you upload the XML file, the screen will update to show a table like the one displayed on this slide. The most significant information you may notice include the Batch ID and the status. The Batch ID can come in handy when reviewing specific uploads in the Submission Detail Report. In the Status columns, you find out if the XML file was uploaded successfully or whether it was rejected. If the file was rejected, then refer to the instructions that we will review in the next section of this presentation to learn how you can run reports to find out why the XML files were rejected.

When you are ready to upload XML files into the Production environment, click the Change Selection link and select Production from the dropdown menu under Select a Submission Type. Then, click the blue Display Results button.

At this time, I will turn the presentation over to Evette to talk about how to access and run reports for the XML files.

Evette Robinson: Thank you, Judy! IPFs and vendors can access three different types of reports relevant to the XML file upload process. First, we will talk about how to access the Submission Detail Report, which you can use to review information about each XML file uploaded, including the measure set, patient ID, Batch ID, patient admit/discharge/event dates, upload date, action code, file name, file status, whether it is a test case, and edit messages. The Potential Duplicate Report will help you to determine if the reports pertain to two different episodes of care or if the duplicates are due to incorrect entry of a patient identifier. The third report, Case Status Summary, allows you to review measure set counts, including the number of unique cases submitted, accepted, and rejected.

From the left menu of the HQR home page, click on Data Results, then Chart Abstracted. The image on the left of this slide is what will display for most IPFs. The image on the right will appear for those providers that participate in the IPFQR Program, as well as other Quality Reporting Programs, such as IQR and OQR. Regardless of which options appear on your screen, you will select Chart Abstracted to access the reports.

In the File Accuracy tab, select IPFQR under Program. If your provider participates in more than one Quality Reporting Program, then you may see other programs in the dropdown.

Next, under Report, select Submission Detail.

Under Fiscal Year, select 2023. The next few dropdowns are optional. For example, under File Status, you can select Accepted or Rejected.

You may review a report based on files submitted in the Test or the Production environment. If you took note of a particular Batch ID that you would like to pull into the report, you can enter it into the Batch ID field before clicking the Export CSV button.

After you click the Export CSV button, the file will download to your computer at a location determined by your browser settings. Click on the file to open it. This slide displays all the columns of information in a sample Submission Detail Report in which all XML files were uploaded into the Test environment.

On this slide, the columns of the same information shown on the previous slide are split to make the information easier to read. Most of the information provided in the file is quite self-explanatory. For more information about the text in the Message column of this report, go to the Quality IPF Edits Documents web page, using the link on this slide.

To access the Potential Duplicate Report, return to the File Accuracy tab and select Potential Duplicate from the Report dropdown. Then select 2023 for the Fiscal Year.

After you click the blue Export CSV button, a CSV file will download to your computer. The image on this slide displays the type of information available for review in this report. On the next slide, you will see the information split into two images so that you can view the sample information in each column more clearly.

Here is the same information from the previous slide displayed in two images. As you can see in this instance, there are cases in which the first names of the patients and their patient ID are different.

The IPF is responsible for reviewing the data to determine whether potential duplicates pertain to two different episodes of care, and is thereby valid, or if the duplicates are due to incorrect entry of a patient identifier. Refer to the information about patient identifiers on page 107 of the IPF Specifications Manual, version 1.0a, for more details.

To view the Case Status Summary Report, go to the File Accuracy tab, select Case Status Summary from the Report dropdown, and select 2023 for the Fiscal Year.

The Case Status Summary Report displays the provider's CCN, name, number of unique cases submitted, accepted, and rejected for each measure set submitted for the IPF. Refer to the footnotes in the report for more information.

Here are a few key takeaways about the reports. The Submission Detail and Potential Duplicate Reports can be run based on XML files uploaded into either the Test or the Production environment. You can leverage the Submission Detail and Potential Duplicate Reports after uploading XML files into the Test environment, before uploading into the Production environment, to ensure that all issues with the file layout and content are resolved before the data are submitted to CMS for calculations and public reporting. The Case Status Summary Report, like the other reports, can be populated by data submitted via XMLs uploaded into the Test or the Production environment.

Now, let's review some of the commonly asked questions CMS has received about patient-level reporting.

The first question is: Can IPFs still submit data using the Simple Data Entry tool during the voluntary patient-level reporting period, or are IPFs expected to submit some data using XML files? CMS strongly encourages submission of all aggregate data in the *HQR Secure Portal.* After submitting all aggregate measure and non-measure data, IPFs may voluntarily submit patient-level measure data to test processes for and gain experience in submitting patient-level data prior to the mandatory fiscal year 2024 data submission period. IPFs may choose to submit voluntary patient-level data for as few as one measure or for all the required measures. Please note that IPFs must report denominators of HBIPS-2 and HBIPS-3 in aggregate in the *HQR Secure Portal,* even if they submit patient-level numerator data for the HBIPS-2 and/or HBIPS-3 measures.

I am a vendor and my client is a participating IPF that wants to submit all measure and non-measure data via XML files during the voluntary period. Is this allowed? IPFs can submit all measure and non-measure data to the *HQR Secure Portal* using XML files, except for the denominator value for the HBIPS-2 and HBIPS-3 measures. It is important to remember that, in order to calculate the HBIPS-2 and HBIPS-3 measure rates, the aggregate denominator value must be entered in the Simple Data Entry, or SDE, tool. Also, to access the Data Accuracy and Completeness Acknowledgement, or DACA, form in the *HQR Secure Portal*, all aggregate measure and non-measure data must first be entered and saved in the Simple Data Entry tool.

The XML files that I uploaded into the *HQR Secure Portal* are getting rejected, but, when I run the Submission Detail Report, it is blank. What is causing the files to be rejected? The HQR System does not associate alpha-numeric CCNs with the eligibility status of participating IPFs. Therefore, IPFs and their vendors must ensure that the <provider-id> tag in all XML files uploaded into the *HQR Secure Portal* are only numeric six-digit CCNs. To do this, convert the IPF unit CCN to the following numeric CCNs in the XML files: For IPFs in acute care hospitals, replace the letter "S" in the third position with "0." For IPFs at critical access hospitals, replace the letter "M" in the third position with the number "1." IPFs at Long-Term Care Hospitals have the letters "SA" in the third and fourth positions of their CCN. Replace those letters with the numbers "20." Finally, the CCN for free-standing IPFs are already numeric, so no changes are needed.

Who should I contact if I have trouble uploading XML files and/or running reports in the *HQR Secure Portal*? Contact the CCSQ Service Center by phone at (866) 288-8912 or email at CCSQServiceNow@cms.hhs.gov. Be sure to include the following information in the email: the IPF's CCN and the IPF's name. Be sure to specify that the issue pertains to IPF patient-level reporting.

Is there a validation process for the IPFQR Program now that IPFs are reporting patient-level data?

Not at this time. As stated in the Fiscal Year 2022 IPF PPS Final Rule, CMS aims to adopt a data validation policy for the IPFQR Program in the future. On page 42661, CMS stated: "We believe that it would be appropriate to develop such a policy incrementally through adoption of a data validation pilot prior to national implementation of data validation within the IPFQR Program."

What about CART? How does that relate to the information in this presentation? A separate educational webinar will be available soon with details about how to access and use the CMS Abstraction & Reporting Tool, known as CART, for patient-level reporting of IPFQR Program data. An email notification will be sent to subscribers of the IPFQR Program Listserve as soon as more information is available. Be sure to subscribe to the IPFQR Program Listserve, if you have not already done so, by clicking on the Listserve sign-up link on this slide.

Next, I would like to share some information on what to expect for the future of patient-level reporting.

Starting with the summer 2023 data submission period, IPFs will be able to report their facility-level denominator value for the Hospital-Based Inpatient Psychiatric Services, or HBIPS, -2 and HBIPS-3 measures. Details about a new IPF facility-level XML file layout will be provided in a future addendum to the IPF Specifications Manual.

Many of you have asked whether the data submission period will be expanded beyond the current six-week window; if reporting frequency will increase to be semi-annual or quarterly, rather than annual; and the role of validation in the reporting of patient-level data. There are no answers to those questions at this time, but we encourage you to become involved in the rule-making process for the IPFQR Program by sharing your suggestions with CMS for consideration in future proposed rules.

In the next several slides, Judy will review helpful resources pertaining to today's webinar and the IPFQR Program in general.

Judy Wade: Thanks, Evette!

CMS has provided an IPFQR Program Patient-Level Reporting Fiscal Year 2023 Data Submission and Verification Checklist, which can be downloaded from the QualityNet and Quality Reporting Center websites.

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

This slide lists a few of the upcoming webinar topics. CMS will send email notifications about these events to the IPFQR Program Listserve.

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, program 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 so, 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 Find an Answer function in the QualityNet Q&A Tool to find information about program requirements and measures. If not found, submit your inquiries to us via the tool. We also welcome your recommendations for future webinar topics via the Q&A tool, which you can access by selecting the Q&A Tool icon. You can click on the Email Support icon to send an email to us with questions regarding eligibility or the 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 via secure fax at (877) 789-4443.

If you have any questions pertinent to the webinar topic, please send an email to WebinarQuestions@hsag.com. Write "IPF PLR" in the subject line. If your question pertains to a specific slide, include the slide number in the body of the email.

This concludes the content portion of today's webinar titled, *IPFQR Program: Patient-Level Reporting*. We thank you for your time and attention. Have a great day!