



# Inpatient Quality Reporting Program

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## Support Contractor

### Inpatient Psychiatric Facilities Quality Reporting (IPFQR) Program *Public Reporting Preview Reports* Questions and Answers

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**2:00 p.m. ET**

- Question 1:** Will we be notified when the preview reports are ready?
- Answer 1:** Yes, you will be notified via ListServe when the preview reports are available (December 31, 2014 through January 29, 2015).
- Question 2:** Does the notice of participation need to be completed each year? Or just with initial sign-up?
- Answer 2:** The NOP is valid and rolls over to the next year unless there is a withdrawal from participation.
- Question 3:** Where do we find the quick reference document from slide 11?
- Answer 3:** It is located on the *Quality Reporting Center* website under the Resources/Tools > IPF tab at [www.qualityreportingcenter.com/resources/tools/ipf](http://www.qualityreportingcenter.com/resources/tools/ipf) and on *QualityNet* under the Inpatient Psychiatric Facilities > Resources tab at [www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228772864255](http://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228772864255).
- Question 4:** Can anyone view the data on the *Hospital Compare* website?
- Answer 4:** Yes.

# Inpatient Quality Reporting Program

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## Support Contractor

- Question 5:** I was surprised to see in the November 2014 IPF presentation that HBIPS-6 measure was so successful. The way I understood HBIPS- 6 was an all or nothing measure... Meaning if one part of the care plan was not present you failed all of it. We failed because the indication was not present for ALL medications. Did I read the measure correctly? And if HBIPS-6 fails, you automatically fail Measure 7.
- Answer 5:** You are correct. If you respond with a value #3 to any of the CCP data elements, the case fails because this indicates the medical record does not contain a CCP with the information required by that data element. So if the case fails HBIPS-6, then it will also fail HBIPS-7 because it answers to the same data elements.
- Question 6:** What does FSN stand for?
- Answer 6:** It stands for Facility, State and National. If you have any difficulty running this report, please contact the support contractor at 844-472-4477.
- Question 7:** Is SUB-1 data included in this report?
- Answer 7:** Not at this time.
- Question 8:** Is the website medicare.data.gov or data.medicare.gov?
- Answer 8:** The website is <https://data.medicare.gov/>.
- Question 9:** Can our security administrators also enter the quarterly data?
- Answer 9:** For the IPFQR Program, the security administrator can enter the IPF data annually via the *QualityNet Secure Portal*. Please contact us at 844-472-4477 if you have further questions.
- Question 10:** What is the next annual data submission date?
- Answer 10:** The data for the IPFQR Program are submitted annually July 1 through August 15.
- Question 11:** Will there be email notification when the IPFQR preview report is available, like what we receive for the IP Quality Reporting Program?
- Answer 11:** Yes, you will be notified via ListServe when the report is available; the preview period is December 31, 2014 through January 29, 2015.

# Inpatient Quality Reporting Program

---

## Support Contractor

- Question 12:** Is there a plan to publicly report HBIPS-1 data? If so, when?
- Answer 12:** No, that is a Joint Commission Measure; CMS did not adopt into the IPFQR Program and has no plans to do so in the future.
- Question 13:** So [there is] one IPFQR *Hospital Compare* preview report available per year?
- Answer 13:** Yes, the preview reports are displayed annually.
- Question 14:** Will *Hospital Compare* Preview Reports be available at regular quarterly intervals on *QualityNet* for the IPFQR Program?
- Answer 14:** The preview data for IPF is refreshed annually and will only be available for 30 days; this is December 31 through January 29, 2015, for the latest data refresh.
- Question 15:** When do we submit 2014 data?
- Answer 15:** Data for 2014 will be submitted via the secure portal July 1 through August 15, 2015.
- Question 16:** Why is the webinar for TOB use measures in February when abstraction starts January 1, 2015?
- Answer 16:** An educational webinar on the TOB measures was provided October 29, 2014.
- Question 17:** We will report IPF SUB at some point for 2014. Will this be done similar to how we are reporting HBIPS in the summer, and will it be yearly? Will education for this be forthcoming?
- Answer 17:** Yes, reporting for SUB-1 will be similar to the HBIPS measures and will be reported July 1 through August 15 annually. Education regarding the measures submission has been provided recently, and the presentations will be available on [QualityNet.org](http://QualityNet.org) and [QualityReportingCenter.com](http://QualityReportingCenter.com).
- Question 18:** What are the dates for the preview period?
- Answer 18:** The dates for the preview period are December 31, 2014 through January 29, 2015, via the *QualityNet Secure Portal* for participating hospitals. Data displayed will be Q2 2013 through Q4 2013 (April 1, 2013 through December 31, 2013).
- Question 19:** Can the data be changed during the Preview Period?

# Inpatient Quality Reporting Program

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## Support Contractor

**Answer 19:** No, once the data submission period ends, you may not change your data.

**Question 20:** Is SUB-1 data included in this report?

**Answer 20:** No.

**Question 21:** How can we tell from *QualityNet* if we have the file exchange and search role assigned to a user?

**Answer 21:** You will be able to run the Facility, State and National report.

**Question 22:** Will the FSN report be available at the same time frame as the Preview report?

**Answer 22:** The FSN report is available at any time 30 days after the submission period.

**Question 23:** When will comparative data for follow-up after hospitalization be available?

**Answer 23:** Once the data run is complete, there will be a ListServe Announcement.

**Question 24:** When will comparative data be available for SUB-1?

**Answer 24:** The comparative data will be available after the submission period ends in 2015.

**Question 25:** Do you have to be a security administrator to access the preview report?

**Answer 25:** You need the appropriate roles; if you are an SA, you have the run report role.

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