



# Inpatient Psychiatric Facility Quality Reporting Program

## Support Contractor

### Non-Measure Data and Structural Measures

#### Presentation Questions and Answers

**Moderator:**

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- Question 1:** What is the time period of the data collection for non-measure data?
- Answer 1:** Calendar year 2015.
- Question 2:** Is the non-measure data collected by the facility or by CMS?
- Answer 2:** The non-measure data is collected and submitted by the IPF.
- Question 3:** In regards to patient experience, what tool is required? Can it be one created by an individual facility or corporation?
- Answer 3:** A specific tool has not been recommended by CMS. It can be created by the facility.
- Question 4:** Are we supposed to enter the non-measure diagnosis measure numbers for this submission year (July 1 to Aug 15)?
- Answer 4:** No, the non-measure diagnosis data for calendar year 2015 will be entered during next year's submission period (July 1–August 15, 2016) and impact the 2017 payment determination.
- Question 5:** If an HCAHPS survey is being used by the rest of the hospital but not by the IPF section, would we answer "Y" or "N" to the question?
- Answer 5:** A survey would need to be administered for the IPF. If the HCAHPS survey is not used in the IPF unit, answer "No."

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- Question 6:** Is the patient experience "survey" mandatory?
- Answer 6:** No, it is not mandatory for IPFs to provide a survey to patients; however, IPFs are required to report if one is used to assess patient experience of care during the upcoming data submission period (July 1–August 15, 2015).
- Question 7:** Does the use of an EHR affect the rate from Medicare?
- Answer 7:** No, this is just an assessment of whether you use an EHR and to what extent. If you answer the question, you will receive credit for completing this measure.
- Question 8:** Can you give some examples of types of structured Patient Experience of Care assessments? Is there a list of acceptable surveys?
- Answer 8:** There is no list of acceptable surveys, but some facilities have adapted the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey for use in the IPF setting. Information about the HCAHPS survey can be found at this link:  
<http://www.hcahpsonline.org/home.aspx>.
- Question 9:** Does an internally-developed patient survey meet the criteria of being a "Structured instrument?" Does our internal process for distributing and collecting these surveys meet the "standardized collection protocol" criteria?
- Answer 9:** An internally-developed patient survey is acceptable. The intent is to use a standardized survey instrument (with common metrics across all surveys) and a standardized data collection methodology (distributed widely). A standardized survey and data collection protocol produces data that allow objective and meaningful comparisons on topics that are important to patients and consumers.
- Question 10:** Are the structural measures for FY 2016 up and ready for data on QNet under IPF?
- Answer 10:** No, submission of non-measure data is required beginning with FY 2017. The data for 2015 will be entered beginning July 1, 2016.
- Question 11:** For now the Assessment of Patient Experience is still voluntary, correct?
- Answer 11:** IPFs are required to attest as to whether or not one is used. If yes, then the IPF must provide the name of the survey. By answering the question, the IPF will receive credit for completing this measure.
- Question 12:** So these non-measures will be ones that we have to query our internal data to get?

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- Answer 12:** Yes, the IPF facility or unit will perform an internal query based on the diagnostic categories to determine the aggregate population counts for Medicare and non-Medicare discharges.
- Question 13:** When do the structural measures and non-measure data have to be submitted?
- Answer 13:** The structural measure information must be submitted during the upcoming data submission period, July 1 through August 15, 2015. The non-measure data will be submitted next year (July 1, 2016–August 15, 2016).
- Question 14:** I understood that the Assessment of Patient Experience of Care needed to begin to be collected January 1, 2016. Is this accurate, as the webinar is implying that this should already be in place?
- Answer 14:** To meet the Assessment of Patient Experience of Care requirement, an IPF must attest to whether or not the facility provided such an assessment as of December 31, 2014. The structural measure information must be submitted during the upcoming data submission period July 1 through August 15, 2015.
- Question 15:** What is your fiscal year?
- Answer 15:** The fiscal year begins October 1 and ends September 30 of the following year.
- Question 16:** "Survey name" is not the same as survey author–will this matter? Will a blank copy of the survey instrument be required to be submitted?
- Answer 16:** The Assessment of Patient Experience of Care does not require the name of the survey author, only the name of the survey used as of December 31, 2014. It is not necessary to submit a copy of the survey instrument.
- Question 17:** Is a "transition in care" defined here only as discharge to another level of care, or internal transitions such as shift change, or something else?
- Answer 17:** For the structural measure on the use of an EHR, the measure applies to internal transfers across units when the level of care changes (transitions in care), as well as external discharges/transfers.
- Question 18:** What is the three digit number in the categories on slide 10?
- Answer 18:** The three digit number represents the categories developed for the Clinical Classifications Software (CCS) under the Healthcare Cost and Utilization Project (H-CUP) by the Agency for Healthcare Research and Quality. A list of individual codes for each clinical category can be found here: <http://www.hcup-us.ahrq.gov/toolssoftware/ccs/AppendixASingleDX.txt>.

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- Question 19:** If we do not use a commercial patient experience tool but our own custom survey, how do we enter the name?
- Answer 19:** Providers will enter the name by typing it into the designated field. This will not be a drop-down but rather a free text field which can simply contain the name of your facility's survey.
- Question 20:** So the first time this data needs to be submitted isn't until 2016 for the time period of 2015?
- Answer 20:** The structural measures will be submitted this year during the July 1–August 15, 2015 data submission period. The non-measure data will be submitted next year during the July 1–August 15, 2016 data submission period.
- Question 21:** Does the annual discharge volume include "all" our psychiatric population, or just those cases we abstract and submit data for?
- Answer 21:** The annual discharge volume will reflect the entire psychiatric patient population for the IPF.
- Question 22:** Can you define HISP?
- Answer 22:** HISP is an acronym for Health Information Services Provider. A Health Information Services Provider (HISP) manages security and transport for health information exchange among health care entities or individuals using the Direct standard for transport.
- Question 23:** For the EHR use at transition measure – if the follow-up care is given most often by a provider in our system with access to the ONC certified EHR, is it correct to choose the third selection and “Yes” for the follow-up question?
- Answer 23:** Choose the third value (c) for the first question because your facility uses an EHR system to support health information exchange at times of transitions in care. However, the second question is specifically about the use of a HISP. A Health Information Services Provider (HISP) manages security and transport for health information exchange among health care entities or individuals using the Direct standard for transport.
- Question 24:** Do you have time set for the next Webinars?
- Answer 24:** We advise you to sign up for the IPF ListServ as webinar dates and times are subject to change. The next webinar is currently scheduled to occur on Wednesday, July 15 at 1 pm ET.
- Question 25:** What is the submission period for the reporting period 1/1/2014–12/31/2014, please?

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**Answer 25:** The data submission period for data collected during the 2014 calendar year is July 1–August 15, 2015.

**Question 26:** My facility would like to know if the EHR transition in care using certified technology is specific to the Psych portion of our hospital or is [it] for the entire hospital.

**Answer 26:** Reporting on the Use of EHR measure for the IPFQR program should reflect the status of the IPF or IPF unit as of December 31, 2014.

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