

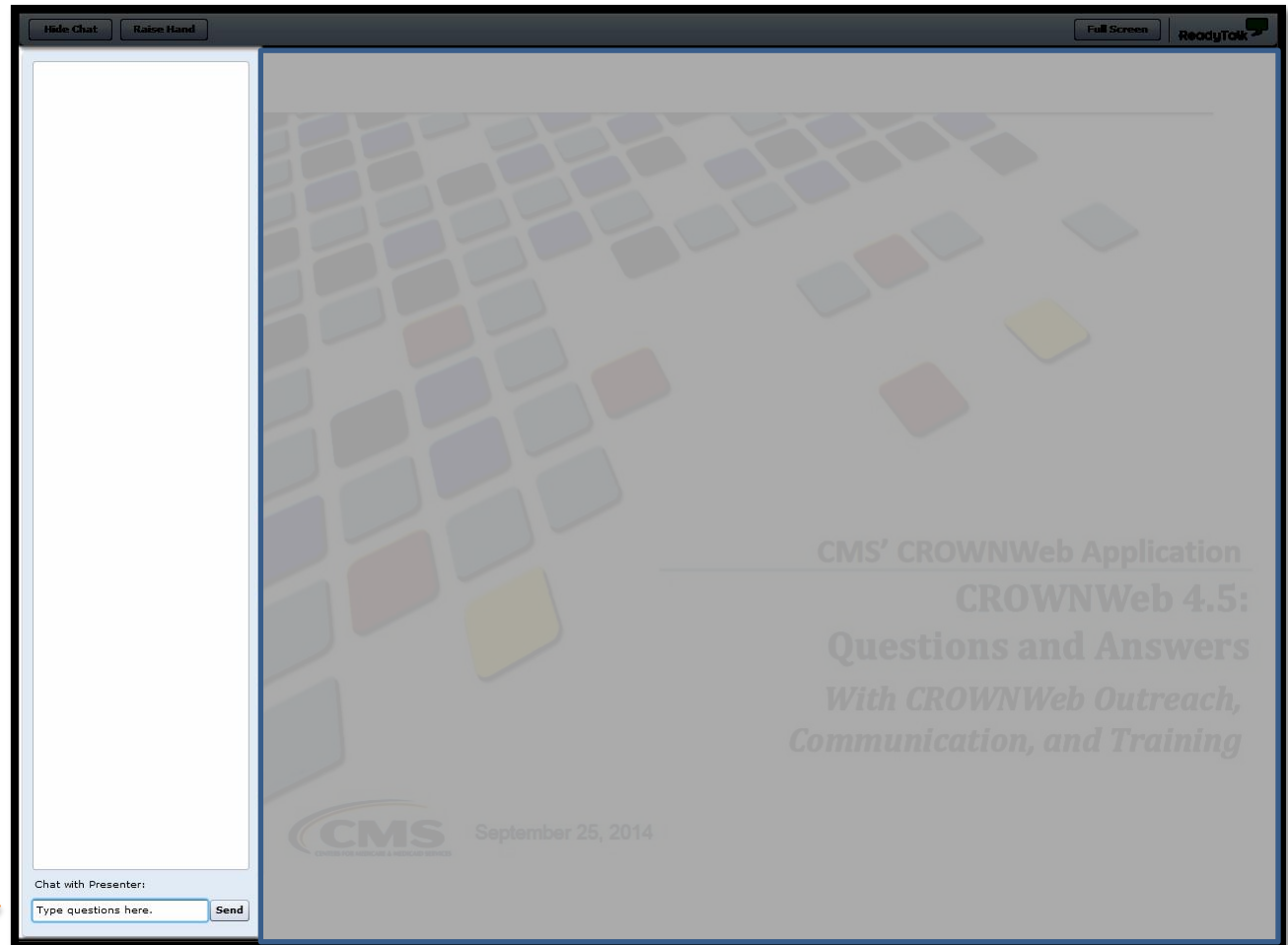
IPFQR Program: Non-Measure Data Collection and Structural Measures

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Submitting Questions

Type questions in the “Chat with Presenter” section, located in the bottom-left corner of your screen.



The screenshot shows a web application interface. On the left, there is a vertical chat window titled "Chat with Presenter" with a text input field containing "Type questions here." and a "Send" button. The main area displays a presentation slide with a grid background. The slide text includes "CMS' CROWNWeb Application", "CROWNWeb 4.5: Questions and Answers With CROWNWeb Outreach, Communication, and Training", and "September 25, 2014". The CMS logo is visible in the bottom left of the slide. The top of the window has buttons for "Hide Chat", "Raise Hand", "Full Screen", and "ReadyTalk".



Non-Measure Data Collection and Structural Measures

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Acronyms

- **CMS** Centers for Medicare & Medicaid Services
- **eCQMs** Electronically-Specified Clinical Quality Measures
- **EHR** Electronic Health Record
- **FR** Final Rule
- **FY** Fiscal Year
- **HHS** Health and Human Services
- **HISP** Health Information Service Provider
- **IPF** Inpatient Psychiatric Facility
- **IPFQR** Inpatient Psychiatric Facility Quality Reporting
- **ONC HIT** The Office of the National Coordinator for Health Information Technology
- **Q** Quarter

Purpose

The purpose of this presentation is to summarize the non-measure data collection and structural measure requirements for the IPFQR Program.

Learning Objectives

At the conclusion of this presentation, attendees will understand the non-measure data collection and structural measure requirements for the upcoming data submission period.

Agenda

- Non-Measure Data Collection
- Structural Measures
 - Assessment of Patient Experience of Care
 - Use of an Electronic Health Record
- Helpful Resources

IPFQR Program

**NON-MEASURE DATA
COLLECTION**

Non-Measure Data

What is it?

Non-measure data is used to report total discharges by category, such as:

- Diagnostic category
- Payer

Why is it being collected?

Non-measure data is being collected to improve CMS' ability to:

- Interpret measure results
- Assess the relevance and impact of potential future measures

Non-Measure Data

Total Discharges Annually

Diagnostic Categories	Total Discharges Annually
Anxiety disorders (651)	
Delirium, dementia, and amnesic and other cognitive disorders (653)	
Mood disorders (657)	
Schizophrenia and other psychotic disorders (659)	
Alcohol-related disorders (660)	
Substance-related disorders (661)	
Other diagnosis – Not included in one of the above categories	

Payer	Total Discharges Annually
Medicare	
Non-Medicare	

IPFQR Program

STRUCTURAL MEASURES

Assessment of Patient Experience of Care

What is it?

This structural measure:

- Asks whether IPFs routinely assess patient experience of care using a standardized collection protocol and structured instrument
- Is based on IPF activities as of December 31 of the reporting period
- Requires simple attestation

Assessment of Patient Experience of Care

Why is it being collected?

This data is being collected to:

- Provide information in a currently unaddressed priority area of the HHS National Quality Strategy, Patient and Family Engagement and Experience of Care (79 FR 45964)
- Help in the development of a standardized survey of patient assessment of care that CMS intends to develop as a successor to this measure (79 FR 45964)

Assessment of Patient Experience of Care

IPFs are required to respond to the following question:

- *Did your facility routinely assess patient experience of care using a standardized collection protocol and a structured instrument?*

If “Yes,” then the following will appear:

- *Please indicate the name of the survey that your facility administers.*

Type in the survey name and click “Submit” to complete the requirement.

If “No,” then:

- Click “Submit” to complete the requirement.

Assessment of Patient Experience of Care

CMS.gov QualityNet

Home ▾ Quality Programs ▾ My Data ▾ My Scores ▾ My Reports ▾ My Tools ▾ »

Quality Programs > Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR > Manage Measures > View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start Web-Based Measures 05/21/2015 12:47 PT

Inpatient Psychiatric Facilities Web-Based Measures/DACA

Provider CCN Submission Period With Respect to Reporting Period 01/01/2014 - 12/31/2014

Web-Based Measures | PY 2016 * Required Field

For Inpatient Psychiatric Facility Quality Reporting participating providers, responses for all measure questions are required in order to fulfill the Annual Payment Update (APU) requirement. If no data for measures, please enter zero. Do not leave any entry fields blank.

Assessment of Patient Experience of Care

* Did your facility routinely assess patient experience of care using a standardized collection protocol and a structured instrument?
 Yes No

* Please indicate the name of the survey that your facility administers:
Survey Name

Assessment of Patient Experience of Care

Inpatient Psychiatric Facilities Web-Based Measures/DACA



Provider CCN Submission Period With Respect to Reporting Period 01/01/2014 - 12/31/2014

Web-Based Measures | PY 2016

Provider ID	HBIPS-2	HBIPS-3	HBIPS-4/HBIPS-5	HBIPS-6	HBIPS-7	SUB-1	Assessment of Patient Experience of Care	Use of an Electronic Health Record	DACA
<input type="text"/>	Completed	Completed	Completed	Completed	Incomplete	Completed	Completed	Completed	Incomplete

Payment Year Selection

Use of Electronic Health Record

What is it?

This structural measure:

- Assesses the degree to which IPFs use EHR systems for services and to support health information exchange at times of transitions in care
- Is based on IPF activities as of December 31 of the reporting period
- Requires simple attestation

Use of Electronic Health Record

Why is it being collected?

This data is being collected to provide:

- Important information about a component of healthcare service delivery shown to be associated with the delivery of quality care (79 FR 45965)
- Useful information to consumers and others for use in choosing among different facilities (79 FR 45965)

Use of Electronic Health Record

Benefits of certified EHR use by IPFs include:

- Helping providers improve internal care delivery practices
- Supporting the exchange of important information across care partners and during transitions of care
- Enabling the reporting of eCQMs

Use of Electronic Health Record

IPFs are required to attest to one of three statements:

- The facility most commonly used paper documents or other forms of information exchange (for example, email) not involving the transfer of health information using EHR technology at times of transitions in care.*
- The facility most commonly exchanged health information using non-certified EHR technology (that is, not certified under the ONC HIT Certification Program) at times of transitions in care.*
- The facility most commonly exchanged health information using certified EHR technology (certified under the ONC HIT Certification Program) at times of transitions in care.*

Use of Electronic Health Record

After selecting an attestation, an IPF must then respond to the following question:

Did the transfers of health information at times of transitions in care include the exchange of interoperable health information with a health information service provider (HISP)?

Yes

No

Use of Electronic Health Record

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Quality Programs > Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR > Manage Measures > View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start | **Web-Based Measures** 05/21/2015 12:47 PT

Inpatient Psychiatric Facilities Web-Based Measures/DACA

Provider CCN Submission Period With Respect to Reporting Period
01/01/2014 - 12/31/2014

Web-Based Measures | PY 2016 * Required Field

For Inpatient Psychiatric Facility Quality Reporting participating providers, responses for all measure questions are required in order to fulfill the Annual Payment Update (APU) requirement. If no data for measures, please enter zero. Do not leave any entry fields blank.

Use of an Electronic Health Record

* Please select which of the following statements best describes your facility's highest level typical use of an EHR System (excluding the billing system) during the reporting period:

- The facility most commonly used paper documents or other forms of information exchange (for example, email) not involving the transfer of health information using EHR technology at times of transitions in care
- The facility most commonly exchanged health information using non-certified EHR technology (that is, not certified under the ONC HIT Certification Program) at times of transitions in care.
- The facility most commonly exchanged health information using certified EHR technology (certified under the ONC HIT certification Program) at times of transitions in care.

* Did the transfers of health information at times of transitions in care include the exchange of interoperable health information with a health information service provider (HISP)?

- Yes
- No

Use of Electronic Health Record

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Quality Programs > Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR > Manage Measures > View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start | **Structural/Web-Based Measures** 05/21/2015 12:06:46 PT

Inpatient Psychiatric Facilities Web-Based Measures/DACA Print

Provider CCN Submission Period With Respect to Reporting Period 01/01/2014 - 12/31/2014

Web-Based Measures | PY 2016

Provider ID	HBIPS-2	HBIPS-3	HBIPS-4/HBIPS-5	HBIPS-6	HBIPS-7	SUB-1	Assessment of Patient Experience of Care	Use of an Electronic Health Record	DACA
<input type="text"/>	Completed	Completed	Completed	Completed	Incomplete	Completed	Completed	Completed	Incomplete

IPFQR Program

HELPFUL RESOURCES

Links

- ONC Certification Program:
healthit.gov/policy-researchers-implementers/about-onc-hit-certification-program
- Interoperability information from ONC:
healthit.gov/policy-researchers-implementers/interoperability-portfolio

Save the Dates

Upcoming IPFQR Program educational webinars:

- **July 16, 2015** *Data Reporting and Submission Review*
- **August 20, 2015** *SUB-1 Measure*
- **September 17, 2015** *FY 2016 IPF PPS Final Rule*

IPFQR Program General Resources



Q & A Tool

<https://cms-ip.custhelp.com>



Email Support

IPFQualityReporting@area-m.hcqis.org



Phone Support

866.800.8765



Inpatient Live Chat

www.qualityreportingcenter.com/inpatient



Monthly Web Conferences

www.QualityReportingCenter.com



Secure Fax

877.789.4443



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www.QualityNet.org



Website

www.QualityReportingCenter.com

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