



# Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

## Support Contractor

### IPFQR Program Manual, Version 3.1 and Updated Paper Tools Review

#### Presentation Transcript

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**Louisa Heath:** Good afternoon and welcome to today's presentation, *IPFQR Program Manual, Version 3.1 and Updated Paper Tools Review*. My name is Louisa Heath. I am a project manager for the Value, Incentives, and Quality Reporting, or VIQR, Support Contractor. I work primarily in the Inpatient Psychiatric Facility Quality Reporting Program. I am delighted to introduce you to our speaker for today's presentation, Evette Robinson. Evette is the project lead for the IPFQR Program. She has more than 15 years of cross-functional experience in the healthcare industry, ranging from biomedical and clinical research to strategic planning and revenue cycle management consulting for a variety of healthcare providers. Evette earned a Master of Public Health degree in health management and policy from Emory University. Before we proceed with today's webinar, I would like to cover a few more housekeeping items. As many of you know, the slides for this presentation were posted to the Quality Reporting (Center) website prior to the event. If you did not receive the slides beforehand, please go to the [qualityreportingcenter.com](http://qualityreportingcenter.com) website. On the right-side of the screen, you will see a list of upcoming events. Click on the link for this event, scroll down to the bottom of the page, and there you'll find the presentation slides available for download.

Please note that we do not recognize the raised-hand feature in the chat tool during webinars. Instead, you may submit any questions that are related to the topic of this webinar to us via the chat tool. Questions that we cannot respond to during the webinar will be reviewed and documented in the Q&A transcript, which will be available on the *QualityNet* and *Quality Reporting Center* websites at a later date. If you have a question that is not related to the content of this webinar, we recommend that you go the *QualityNet* Q&A tool, which you can access using the link on the slide.

This slide displays a list of the acronyms that will be referenced during the presentation.

This presentation will review updates to the content of the IPFQR Program Manual and the various optional paper tools that we have

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recently published. The aim is to equip IPFs with the tools needed to meet IPFQR Program requirements.

By the end of this presentation, attendees will be able to interpret and use the IPFQR Program Manual and optional paper tools in order to meet the program requirements. And now, I will turn the presentation over to our speaker, Evette Robinson.

**Evette Robinson:** Thank you, Louisa. In the first part of today's presentation, I will talk about the recently published IPFQR Program Manual. To level set our understanding of the manual, I will provide an overview of the document, followed by a review of the key updates found in the recently published version.

The IPFQR Program Manual is intended for use as a reference to encourage successful provider participation in the IPFQR Program. It is available in a downloadable format and it is searchable by keywords to help providers access pertinent information easily. The manual can be downloaded from the *QualityNet* and *Quality Reporting Center* websites by clicking the links on this slide. As previously stated, the aim of today's presentation is to review the changes that are reflected in the Release Notes related to Version 3.1 of the program manual. Earlier this year, on February 16, 2017, we presented a webinar in which we described the content and flow of the manual sections and appendices in great detail. We advise you to refer to the earlier webinar as a general reference for the overall content of the IPFQR Program Manual.

This slide displays the table of contents for the manual. In addition to searching by keywords, you can also simply select the section or appendix of your choice to directly access and learn more about the program requirements and resources. In the next few slides, we will highlight the major changes in Sections 2 and 8 of the manual.

The first set of changes I will describe are located in Section 2: Measure Details. CMS revised the introductory portion of this section of the manual to provide clarification to IPFQR Program stakeholders about measure

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stewardship and specifications. This clarification begins by explaining that the manual is not intended to provide direction for reporting to The Joint Commission, the National Committee for Quality Assurance, nor the National Healthcare Safety Network. A table was added that lists the specification resources for the IPFQR Program measures. Also included in the introductory portion of Section 2 are links to the specific location of the Release Notes document that was published in association with the latest version of the IPFQR Program Manual.

CMS believes it is important to be transparent in identifying factors taken into consideration in the evaluation of measures or the IPFQR Program. In the fiscal year 2018, IPFS LTCH final rule, CMS aligned the IPFQR Program criteria with the Hospital IQR Program, regarding measure removal factors, criteria for determining when a measure is topped out, and measure retention factors. CMS will take into account these removal and retention factors when considering the benefits and drawbacks of removing measures on a case-by-case basis, but note that these factors do not necessarily preclude the use of other considerations in making such determinations. All factors considered in a proposal to remove a measure would be described in rulemaking. Please refer to the manual for more details about the measure retention and removal criteria.

The Submission Information portion of Section 2 contains updated images pertaining to the submission of data into the Web-Based Data Collection Tool. The image of the measure summary screen on the Web-Based Data Collection Tool landing page now includes the SUB-3/-3a measure. In addition, CMS provided clarification as it pertains to guidance on the optional global sampling methodology to align with the direction that CMS communicated via email to the IPFQR program ListServe on July 10, 2017. You may review that email communication by clicking on the link on this slide. We will revisit this guidance later in the presentation when we review recent updates to the non-measures data collection tool.

Section 8 of the manual includes updated images pertaining to public reporting of IPFQR Program data; specifically, the manual now includes an updated screenshot indicating where you can access the IPFQR

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Program measure data landing page. Be sure to monitor your email as the release of this data will be announced via the IPFQR Program ListServe as well as on the *QualityNet* web site.

The manual also contains a screenshot of the IPFQR Program landing page on the *Hospital Compare* website, which now includes descriptions of the TOB-3 measure and the subset TOB-3a.

In the next part of this presentation, I will review the optional paper tools that were created to help IPFs successfully collect and abstract measure data for the IPFQR Program.

Various optional paper tools have been developed for IPFs to use as a mechanism to aid in the collection of measure data to report to CMS. Changes to paper tools relevant to the summer of 2018 and 2019 data submission periods will be addressed in the following slides. Note that the paper tools reviewed in the archived February 16, 2017 webinar, titled *IPFQR Program Manual and Paper Tools Review*, remain unchanged, with the exception of the non-measure data collection paper tool, which we will address in the following slide. You can access the archived presentation by clicking on the first link on the slide. We recommend that you monitor your email for ListServe announcements, as well as check the *QualityNet* and *Quality Reporting Center* websites referenced on this slide for the most recent updates to paper tools.

CMS updated the second page of the non-measure data collection tool for discharges in Quarter 1 through Quarter 4 of 2017 with two changes. The first change, as indicated by the images on this slide, pertains to links you can use to access coding crosswalks to define the diagnostic categories for discharges during calendar year 2017. Note that there is a crosswalk to address discharges between January 1, 2017, and September 30, 2017, and a separate crosswalk for discharges between October 1, 2017, and December 31, 2017.

The second change you will find in the non-measure data collection tool is guidance on how to apply the global sampling methodology to specific

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measures described in Section 2: Measure Details of the IPFQR Program Manual. This content is based on the July 10, 2017 email distributed to the IPFQR Program ListServe titled *Global Sampling in the Payment Year 2018 IPFQR Web-Based Data Collection Tool*.

The non-measure data collection tool for discharges Quarter 1 through Quarter 4 2018 includes links on page 2 for you to access coding crosswalks to define the diagnostic categories for discharges from January 1, 2018, through December 31, 2018.

The optional event tracking log for the HBIPS-2 and HBIPS-3 measures has been updated to capture discharges between January 1, 2018, and December 31, 2018. The measure developer did not make any updates to the measure specifications for this reporting period. For detailed guidance on how to use the HBIPS-2 and HBIPS-3 event tracking log, refer to the archived February 16, 2017 webinar titled *IPFQR Program Manual and Paper Tools Review*.

The HBIPS-5 paper tool has been updated to cover an entire calendar year. The measure developer did not make any updates to the measure specifications for this reporting period. The updated version should be used for discharges between January 1, 2018, and December 31, 2018.

The data collection paper tool for the transition record measures includes updates for data collection in calendar year 2018. On page 2 of the document, the definitions of the elements Principal Diagnosis at Discharge and Current Medication List were updated to align with text already captured in the IPFQR Program Manual. The date changes and text updates are highlighted in the image on this slide.

The image on slide 26 shows the updated format of page 6 in the paper tool for the transition record measures in which the final review of all specified elements required for the transition record prior to transmission portion is separated from the checklist of the 11 specific elements portion of the tool.

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CMS updated the paper tool for the Substance Use measures for data collected in calendar year 2018 and includes revisions to two data elements to align with changes made to the Substance Use measure specifications by The Joint Commission. The first update is the addition of the phrase “(by end of Day 1)” at the end of each allowable value for the Alcohol Use Status data element.

The second update to this paper tool pertains to the SUB-3 data element Referral for Addictions Treatment, in which allowable value 5 has been updated to state: “The referral for addictions treatment was not offered at any time prior to discharge or unable to determine from the medical record documentation.” There are no updates to the paper tool with respect to the SUB-2/-2a measure. As a reminder, this version should be used for discharges between January 1 and December 31, 2018.

CMS updated the optional Tobacco Use measures paper tool to address a change in the TOB-1 specification to align with changes made to the Tobacco Use measure specifications by The Joint Commission. Specifically, during the first two quarters of 2018, allowable values 4, 5, and 6 for the Tobacco Use Status data element were revised to include the phrase “(by the end of Day 1).”

The Tobacco Use optional paper tool was updated to address removal of the data element ICD-10 CM Principal or Other Diagnosis Codes from two data elements during the latter half of 2018. As a result of this change, measure abstractors will not proceed to the Tobacco Use Status data elements depending on the allowable value selected for the Tobacco Use Treatment Practical Counseling and Referral for Outpatient Tobacco Cessation Counseling data elements. For example, if allowable value 1 or 2 is selected for the data element Tobacco Use Treatment Practical Counseling, as it pertains to the TOB-2 measure, then the abstractor will proceed to the next question which addresses the Tobacco Use Status data element. Additional examples of how this change impacts the subset measure TOB-2a, as well as the TOB-3 and TOB-3a measures, are listed on this slide. The highlighted text in the image on this slide indicates where this change occurs specifically as it relates to the TOB-2 measure in

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the optional paper tool. It is important to ensure that you select the correct tool for the quarters of data to be collected.

CMS updated the paper tool for the Screening for Metabolic Disorders measure to reflect the calendar year 2018 data collection period of January 1, 2018, through December 31, 2018. This tool, like the others, is downloadable and is displayed here to help you identify the correct tool.

CMS created these optional paper tools to assist IPFs with the collection of the measure data that are required for the IPFQR Program. The tools are designed to collect patient-specific, or patient-level, data. However, once abstracted, the data will need to be compiled and reported to CMS annually in aggregate into the *QualityNet Secure Portal*. All of the optional paper tools are downloadable, should any IPF choose to use them. The tools have been updated; therefore, please ensure that the correct tool is being used for the data collection period to avoid data errors. At this time, I will turn the presentation back over to Louisa Heath.

**Louisa Heath:**

Thank you, Evette. In the next few slides, we will review several helpful resources.

As a reminder, here are the links to the updated resources that we have reviewed during today's presentation.

Listed on this slide are several links that you can access pertaining to the current final rule, as well as the various measures that are part of the IPFQR Program.

You can click on a title of the table on this slide to access the IPFQR Program Resources page on the *QualityNet* website. Additional active links on this slide are available for you to send us your questions about the IPFQR Program. We encourage you to use the Q&A Tool, in particular because it provides the best means by which we can track questions and answers and also deliver our responses directly to your email inbox.

Additionally, this is a great way for you let us know what types of questions and topics you would like for us to discuss in future webinars. We recommend that you sign up for the IPFQR Program ListServe, so that



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you can receive communications that we send out pertaining to webinars, program updates, and other announcements. You can sign up to be added to the ListServes on the *QualityNet* ListServe registration page. We encourage you to utilize available resources found on the *QualityNet* website in the IPFQR dropdown menu to ensure appropriate knowledge of the program requirements and deadlines.

On this slide, we have an upcoming educational webinar event that is planned for the month of January 2018. Again, please monitor your emails to ensure that you receive the information regarding these webinars via the IPFQR Program ListServe at a later date. This concludes the webinar for today titled *IPFQR Program Manual, Version 3.1 and Updated Paper Tools Review*. We would like to thank you for your time and attention.