

## Criteria to Identify Questionable Fiscal Year (FY) 2027 Measure and Non-Measure Data for the Inpatient Psychiatric Facility (IPF) Quality Reporting Program



The following criteria are provided to help IPFs identify measure data that may have been entered in error, may be invalid, or may exceed normal parameters by the August 17, 2026, deadline for FY 2027 payment determination. If you find that your data meet one or more of the criteria listed below, CMS strongly recommends that you recheck the data for accuracy.



The criteria for identifying questionable **HBIPS-2** and **HBIPS-3** measure data include denominator values that are:

- Different from one another (not equal to the number of psychiatric inpatient days).
- Less than the Total Annual Discharges reported for the IPF.
- Accidentally multiplied by 24, resulting in a value that represents patient-hours instead of patient-days.
- Significantly different from previous submissions.
- Mistakenly reported as the number of days in a calendar year.
- More than 365 times the total number of beds at the IPF.

Note: An HBIPS-2 measure rate that equals or exceeds six (6) hours per 1,000 patient hours of care should be checked for accuracy. Likewise, an HBIPS-3 measure rate that equals or exceeds five (5) hours per 1,000 patient hours of care should be checked for accuracy.



The criteria for identifying questionable **SUB-2/-2a**, **SUB-3/-3a**, **TOB-3/-3a**, **IMM-2**, **Transition Record with Specified Elements Received by Discharged Patients**, and **Screening for Metabolic Disorders** measure data are:

- The denominator is greater than the Total Annual Discharges.
- The numerator exceeds the denominator.



In the **SUB-2** measure, is the subset measure denominator greater than the primary measure denominator? For example, check if the SUB-2a denominator is greater than the SUB-2 denominator.



In the **SUB-3** and **TOB-3** measures, is the subset measure numerator greater than the primary measure numerator? For example, check if the:

- SUB-3a numerator is greater than the SUB-3 numerator.
- TOB-3a numerator is greater than the TOB-3 numerator.



Criteria for identifying questionable **non-measure data**:

- Age Strata is greater than the Total Annual Discharges.
- Diagnostic category is greater than the Total Annual Discharges.
- Payer category is greater than the Total Annual Discharges.

If you have questions regarding the criteria described above as it pertains to your facility's data in the Hospital Quality Reporting System, email [IPFQualityReporting@hsag.com](mailto:IPFQualityReporting@hsag.com) with "Measure Accuracy Question" in the subject line.