

IPF Specifications Manual, Version 1.2, and Updated Resources Review Presentation Transcript

Speaker

Evette Robinson, MPH, CPHQ Program Lead, IPFQR Program Inpatient VIQR Outreach and Education Support Contractor

June 23, 2023

DISCLAIMER: This transcript was current at the time of publication and/or upload onto the Quality Reporting Center and QualityNet websites. Medicare policy changes frequently. Any links to Medicare online source documents are for reference use only. In the case that Medicare policy, requirements, or guidance related to this transcript change following the date of posting, this transcript will not necessarily reflect those changes; given that it will remain as an archived copy, it will not be updated.

This transcript was prepared as a service to the public and is not intended to grant rights or impose obligations. Any references or links to statutes, regulations, and/or other policy materials included in the presentation are provided as summary information. No material contained therein is intended to take the place of either written laws or regulations. In the event of any conflict between the information provided by the transcript and any information included in any Medicare rules and/or regulations, the rules and regulations shall govern. The specific statutes, regulations, and other interpretive materials should be reviewed independently for a full and accurate statement of their contents.

Evette Robinson:Welcome to the webinar titled, IPF Specifications Manual, Version 1.2,
and Updated Resources Review. My name is Evette Robinson, and I am
the IPFQR Program Lead for the Inpatient Values, Incentives, and Quality
Reporting, or VIQR, Support Contractor.

The purpose of today's presentation is to provide an overview of the recently published *Specifications Manual for National Inpatient Psychiatric Facility Quality Measures*, also known as the IPF Specifications Manual, Version 1.2, as well as updated optional resources.

By the end of this presentation, attendees will be able to leverage the IPF Specifications Manual, Version 1.2, and other resources to meet all data reporting requirements for the fiscal year 2026 payment determination year.

Let's begin with a general overview of the IPF Specifications Manual.

The IPF Specifications Manual, Version 1.2, is intended for use as a reference to facilitate successful collection and submission of patient-level and facility-level data to CMS for the IPFQR Program. The effective date for the IPF Specifications Manual, Version 1.2, is January 1, 2024. The reporting period is calendar year 2024 discharges for all measure and nonmeasure data, except the IMM-2 measure (which is collected from October 1, 2024, through March 31, 2025) and quarterly reporting of the COVID-19 Vaccination Coverage Among Health Care Personnel, or COVID HCP, measure. This means that IPFs and vendors will reference this version of the manual to find details pertinent to the IPFQR Program measure and non-measure data that will be reported to CMS during the summer of 2025 data submission period, impacting the fiscal year 2026 annual payment update, or APU. The IPF Specifications Manual, Version 1.2, is comprised of one main document and two Extensible Markup Language, or XML, file layouts relevant to patient-level and facility-level reporting of IPFQR Program data.

The IPF Specifications Manual and the associated Release Notes document are available in a downloadable format.

They are searchable by keywords to help readers access pertinent information easily. The manual can be downloaded from the QualityNet website by clicking on the first link on this slide. There is also a link on the Quality Reporting Center website that will lead to the same webpage on QualityNet.

The QualityNet Inpatient Psychiatric Facility Specifications Manuals web page includes a ZIP folder of the complete manual and the release notes, as well as links to the manual by section, as displayed in the images on this slide.

The Release Notes document outlines the information that was added, changed, and removed in Version 1.2 compared to the previous version. The Release Notes document is available for download in the Complete Manual table pictured in the image on the left side of this slide.

Now, let's review key updates to the IPF Specifications Manual, Version 1.2.

The first notable change that I want to describe is found in the Introduction of the manual. You will notice that the sub-bullets in the fourth paragraph of the Introduction were updated to include more comprehensive information regarding the CMS Certification Numbers, or CCNs, that are eligible to participate in the IPFQR Program. There are several categories of entities that can be eligible to participate in the IPFQR Program, based on their assigned CCN. All psychiatric hospitals that have a CCN in which the last four digits are between 4000 and 4499 are eligible for the IPFQR Program. The remaining bullets address the specific CCNs of psychiatric units at various hospitals that are also eligible for the IPFQR Program: a psychiatric unit at an acute care hospital, or ACH, that has "S" in the third position of the CCN; a unit at a critical access hospital, or CAH, with the letter "M" in the third position of the CCN; a unit at a Long-Term Care Hospital, or LTCH, that has "SA", "SB", or "SC" in the third and fourth positions of the CCN; a unit at an inpatient rehabilitation facility, or IRF, with "SD" in the third and fourth positions of the CCN; and children hospitals with "SE" in the third and

fourth positions of the CCN. These are all eligible to participate in the IPFQR Program. This means that they are subject to the requirements of the IPFQR Program and, if the requirements are not met, then the facility will be subject to a 2-percentage point reduction to the annual payment update. This change was made to align with CMS guidance about provider types that bill the Inpatient Psychiatric Facility Prospective Payment System in the CMS State Operations Manual. If you are interested in learning more about the CCNs that are eligible to participate in the IPFQR Program, you can review the information provided on pages 409 through 411 in the CMS State Operations Manual. You can access by clicking the link on this slide.

In Section 1 of the IPF Specifications Manual, Version 1.2, a few of the changes include removing the *IPF Global Sampling* data element and changing the first bullet in the Exclusion Guidelines for Abstraction for the *Blood Glucose*, *Blood Pressure*, *Body Mass Index*, and *Lipid Panel* data elements to "non-quantitative assessment of glucose test (for example, normal, abnormal, etc.) a range of values, or greater than or less than a value." This is based on changes from the measure steward of the Screening for Metabolic Disorders measure. Another change is the addition of details about the *Physician 1* and *Physician 2* data elements, which are optional for internal use.

In Section 4 of the IPF Specifications Manual, Version 1.2, the second sentence in the third paragraph under Sampling was changed to provide a more general example: "For example, during the reporting period, an IPF may have 100 patients who were discharged during the measurement period."

In Section 5, Data Transmission, you will notice changes in the Guidelines for Submission of IPF Clinical Data, including guidance regarding the use of numeric CCNs in the XML file layout as well as clarification regarding the specifications for the *Sex* data element for the IPFQR Program measures, effective January 1, 2024.

This slide highlights guidance regarding the use of numeric CCNs in the XML file layout. You will notice that these, and all changes, in this

version of the IPF Specifications Manual are highlighted in yellow to indicate new or changed information. The list of IPFQR-eligible CCNs was updated per information in the CMS State Operations Manual. All information in the *HQR Secure Portal* pertaining to the IPFQR Program for an IPF unit that is part of a main hospital is associated with the sixdigit numeric CCN of the main hospital because the *HQR Secure Portal* is not coded to recognize the IPFQR Program Notice of Participation, data, and DACA for alpha-numeric CCNs currently. Therefore, it is critical that the CCNs in XML files uploaded to the *HQR Secure Portal* are six-digit numbers.

This slide displays the information regarding updates to the *Sex* data element for the IPFQR Program measures. This update was made per changes to the definition of the *Sex* data element found in The Joint Commission's specifications manual and will go into effect January 1, 2024, to ensure that these specifications are applied to a full calendar year of measure data for the IPFQR Program.

Updates were also made in the IPF Clinical Data XML File Layout to align with those described in the manual. Note that the purpose of the IPF Clinical Data XML File is to submit patient-level data.

Also, in Section 5, Data Transmission, you will see changes in the Guidelines for Submission of Facility-Level Data sub-section about the use of numeric CCNs in the XML file layout. This is identical to the update described on slide 14 for the IPF Clinical Data file layout, and it aligns with the list of provider types that are eligible to participate in the IPFQR Program, per the CMS State Operations Manual.

Updates were also made in the IPF Facility Level XML File Layout to align with those described in the manual. Note that the purpose of the IPF Facility Level XML file is to submit aggregate data, including the nonmeasure data and data elements pertinent to the denominator value for the Hospital-Based Inpatient Psychiatric Services, or HBIPS,-2 and HBIPS-3.

In Section 6, CMS Outcome Measures (Claims Based), the hyperlink in the first bullet under Claims-Based Measure Information was updated to the correct page. No changes were made in Sections 2, 3 or appendices.

Next, I will highlight some key updates to recently published resources for the IPFQR Program.

The *IPFQR Program: Understanding Reporting Periods vs. Fiscal Years* document describes the differences between calendar and fiscal years, outlines how submission of calendar year data impacts payment in a future fiscal year, and highlights timeline differences for the claims-based, IMM-2, and COVID HCP measures. The document is available for download from the QualityNet IPFQR Program Resources and Quality Reporting Center IPFQR Program Resources and Tools web pages.

Here is an image of the *IPFQR Program: Understanding Reporting Periods vs. Fiscal Years* document. As you can see from the description in the top left of the image, as well as from the timeline illustrated in the middle of the document, IPFQR Program reporting for any calendar year affects the IPF's Medicare reimbursement during a future year. This future year is known as the fiscal year or the payment year. For example, IPFQR Program data submissions related to 2022 discharges will submit data in the summer of 2023, affecting the IPF's Medicare reimbursement between October 1, 2023, and September 30, 2024. The time frame between October 1, 2023, and September 30, 2024, is known as fiscal year 2024.

The Inpatient Psychiatric Facility Quality Reporting Program: Vendor Management resource guide summarizes the steps IPFs should follow to manage vendor access and permissions in the Hospital Quality Reporting Secure Portal. Key updates to this resource include information about granting vendor permissions to upload XML files for chart-abstracted measures and measure set definitions pertinent to vendor access for chartabstracted measures.

This slide displays the cover page for this resource, available on QualityNet's Resources and Quality Reporting Center's Resources and Tools pages by clicking the links on this slide.

A new resource that is available for download is the *Inpatient Psychiatric Facility Quality Reporting Program: Accessing and Using Your Provider Participation Report (PPR)* document. This guide describes how to run, view, and interpret an IPF PPR from the *HQR Secure Portal*.

It includes a table at the end that contains details about data found in each column of the comma separated value, or CSV, PPR files. As with the other resources described in this portion of the presentation, the *IPFQR Program: Accessing and Using Your Provider Participation Report* guide can be downloaded by clicking the links of this slide.

Here is a short video demonstrating how to access and interpret the IPFQR Program Provider Participation Report.

The first step to access the IPFQR Program reports is to log in to the *HQR Secure Portal*. This may involve completing a two-factor authentication via text, email, or phone call.

Once you have logged in to the HQR System, you will go to the left-side of the screen where a menu will appear. Click on Program Reporting. Then, you will want to select Reporting Requirements to access the IPFQR Provider Participation Report.

Click on IPFQR under Program. Then, under Fiscal Year, select the fiscal year of the data you wish to review. In this instance, we are going to take a look at fiscal year 2024 data. As of the time of this video, data related to the COVID-19 measures have been submitted. However, data that are due in the summer of 2023 have not been submitted as of the recording of this video.

So, click on Export CSV and then Save the File to a designated folder on your desktop. When you open the IPFQR PPR, you will see the fiscal year reporting quarters for the selected fiscal year; Provider ID, which is the six-digit CCN for a free-standing IPF or of the main hospital if your IPF is a unit that is part of an acute care, critical access, Long-Term Care, inpatient rehabilitation, cancer or children's hospital. This is followed by the provider name, state, and city.

This report also includes information regarding whether this IPF has an active Security Official, when the IPF's Notice of Participation was signed, and if the IPF's NOP status was Withdrawn or Not Participating. Then, that date will populate in this column.

This report also shows the effective date for the six-digit CCN, as well as the status of the Data Accuracy and Correctness Acknowledgement, or DACA, form. This video was recorded prior to the summer submission period for fiscal year 2024 payment determination. That is why you will see Not Submitted and zeroes appearing for most of these columns to the right of the Medicare Accept Date.

The remainder of the report no longer displays the detailed measure data found in previous versions of the PPR. You will see information about the submission of COVID-19 Vaccination Coverage Among Healthcare Personnel measure because those data were due prior to the start of the summer 2023 submission period. Once the summer submission period begins, this report will display the submission status and number of cases accepted into the *HQR Secure Portal* for measure and non-measure data.

Refer to the last two pages of the *IPFQR Program: Accessing and Using Your Provider Participation Report* reference guide for more details about how to interpret these data in this report.

CMS recently approved revision of the *Inpatient Psychiatric Facility Quality Reporting Program: Accessing Data in Your Facility, State, and National (FSN) Report* document, which describes how to access, download, and interpret the IPF FSN Report from the *HQR Secure Portal*.

The previous version focused on how to locate data for the COVID HCP measure. This version contains a table that includes a description for every column of data found in the CSV IPF FSN Report file. We invite you to download this document from the QualityNet IPFQR Program Resources and Quality Reporting Center IPFQR Program Resources and Tools web pages using the links on this slide.

Here is a short video demonstrating how to access and interpret the IPFQR Program Facility, State, and National Report.

In order to access any reports for the IPFQR Program, you will need to log in to the *HQR Secure Portal*.

Hover over on the left side of the screen, and this menu will appear. You will click on Program Reporting. Then, select Performance Reports. Then, a window will appear, giving you the option to select the IPFQR Program. It will be the only option if your facility only participates in the IPFQR Program, but, if your facility also participates other quality reporting programs, then they will also appear in that drop-down menu.

Like the previous example, we are going to look at fiscal year 2024 data. Click on Export CSV and save the CSV to the designated folder on your desktop at your work station.

The IPFQR FSN Report includes multiple rows for each type of data including facility-, state-, and national-level data. Along the top of the report, you will notice columns for each measure and non-measure data point. Blank fields indicate that data have not yet been submitted. Since this video was recorded prior to the summer 2023 submission period, you will see the COVID-19 Vaccination Coverage Among Healthcare Personnel measure data for all four quarters of calendar year 2022. While the remaining measure and non-measure data fields are blank.

The measure and non-measure data fields will begin to populate as data are accepted in the *HQR Secure Portal* during the summer submission period, scheduled to begin on July 1.

Refer to the last few pages of the IPFQR Program: Accessing Data in Your Facility, State, and National Report reference guide for more details about how to interpret the data in this report.

Let's round out the remainder of this webinar with a review of additional helpful resources.

This is a list of the acronyms that were referenced during this presentation.

CMS recommends that IPFs refer to the latest versions of IPFQR Program resources to stay up to date on program requirements.

Various documents, including the IPF Specifications Manual, IPFQR Program Guide, and optional paper tools are available for download from the QualityNet and Quality Reporting Center websites, which can be accessed by clicking on the icons on this slide. The IPFQR Program Guide is a great place to start, as it highlights the keys to successfully participate in the IPFQR Program.

Has there been any turnover at your facility within the last several months? If so, then we want to hear from you! You can let us know about any changes to points of contact at your facility by clicking the Contact Change Form link on this slide and sending the information to us by following the instructions on the form. If you would you like to receive email communications about future IPFQR Program webinars, program updates, resources, and other announcements, then we invite you to sign up for the IPFQR Program Listserve by clicking on the Listserve Registration icon on this slide. Also available on this slide is a link to Upcoming Events, which is another way to find information about upcoming webinars for the IPFQR Program. When you have a general question about the IPFQR Program or need clarification about any of the program measures or requirements, be sure to leverage the Find an Answer function in the QualityNet Q&A Tool. If you do not see a published article in the Q&A tool related to your question, then you can submit your inquiry to us via the Q&A tool, which you can access by selecting the Q&A Tool icon. The best way to reach us when you have questions about IPFQR Program eligibility, such as the next steps for a newly eligible provider or notification that an IPF is closed or will be closing, is via email. Just click on the Email Support icon to send an email to us regarding eligibility updates. Finally, you can also contact the VIQR support contract team via phone at (866) 800-8765 or secure fax at (877) 789-4443.

This concludes the webinar titled, *IPF Specifications Manual*, *Version 1.2, and Updated Resources Review*. After the event, you will have the opportunity to complete a survey. We ask that you complete the survey as we value your feedback regarding what works and any areas for improvement in future presentations. Thank you for your time and attention.