



IPFQR Program: FY 2024 Review of IPF-Specific Reports for Claims-Based Measures

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November 9, 2023

Introduction

The Centers for Medicare & Medicaid Services (CMS) will provide facilities with Inpatient Psychiatric Facility (IPF)-Specific Reports (ISRs) for their claims-based measures (CBMs) for the IPFQR Program before public reporting for fiscal year (FY) 2024.

- ISRs are confidential and enable facilities to preview results before the results are made public.
- ISRs provide additional information to facilities that is not available to the public to help inform their quality improvement activities.

IPFQR Program FY 2024 CBMs

Follow-Up After Psychiatric Hospitalization (FAPH)

- Added to the IPFQR Program in the FY 2022 IPF PPS Final Rule to replace Follow-Up After Hospitalization for Mental Illness (FUH) and first publicly reported in January 2023
- FY 2024 public reporting performance period: July 1, 2021–June 30, 2022

30-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an Inpatient Psychiatric Facility (IPF Readmission)

- Added to the IPFQR Program in the FY 2017 IPPS/LTCH PPS Final Rule and first publicly reported in February 2019
- FY 2024 public reporting performance period: July 1, 2020–June 30, 2022

Medication Continuation Following Psychiatric Discharge (MedCont)

- Added to the IPFQR Program in the FY 2020 IPF PPS Final Rule and first publicly reported in January 2021
- FY 2024 public reporting performance period: July 1, 2020–June 30, 2022

FY 2024 Updates

- Reporting on the IPF Readmission measure now includes stratification by dual eligibility status.
- FAPH replaced the FUH measure.

Purpose

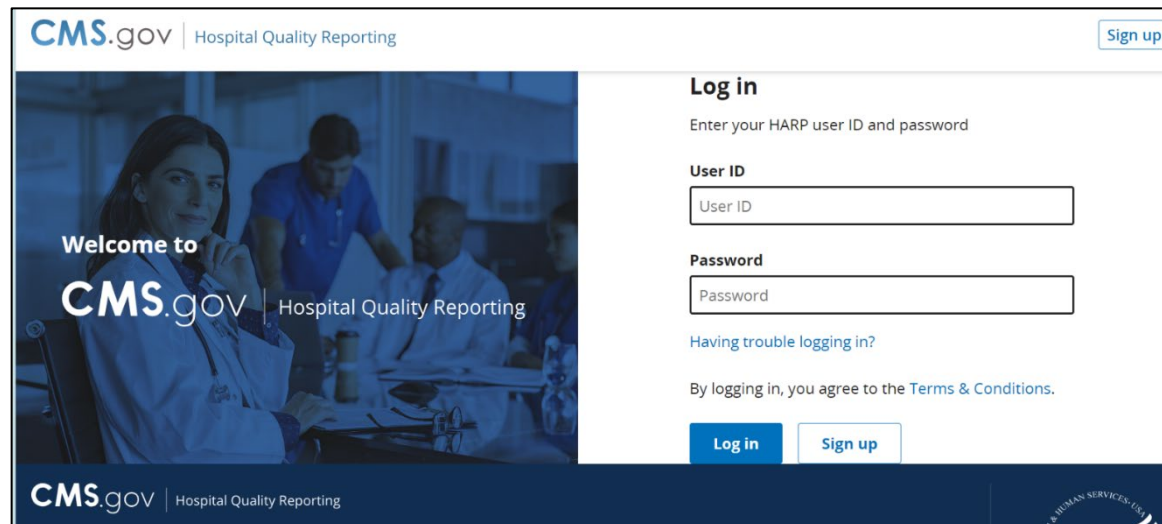
This presentation provides the IPF community with information on accessing and using FY 2024 ISRs and supporting documents for the FAPH, IPF Readmission, and MedCont measures.

IPFQR Program:
Review of FY 2024 ISRs for Claims-Based Measures

Accessing Your ISR and Supporting Documents

Accessing Your ISR

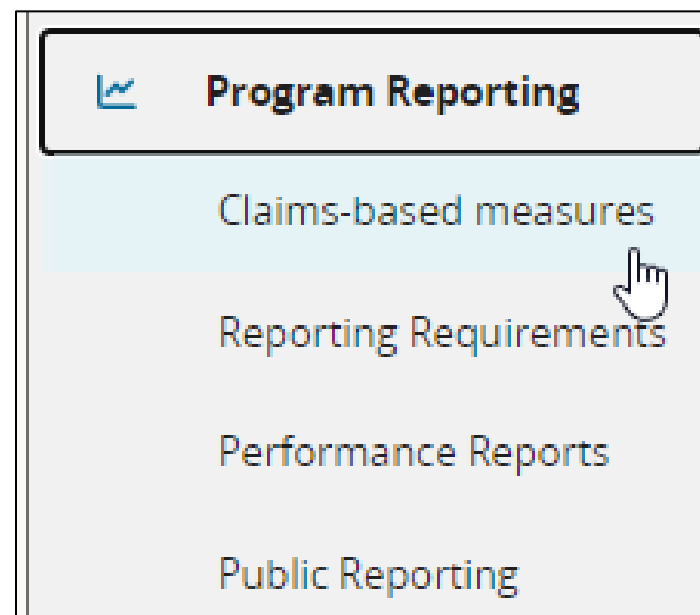
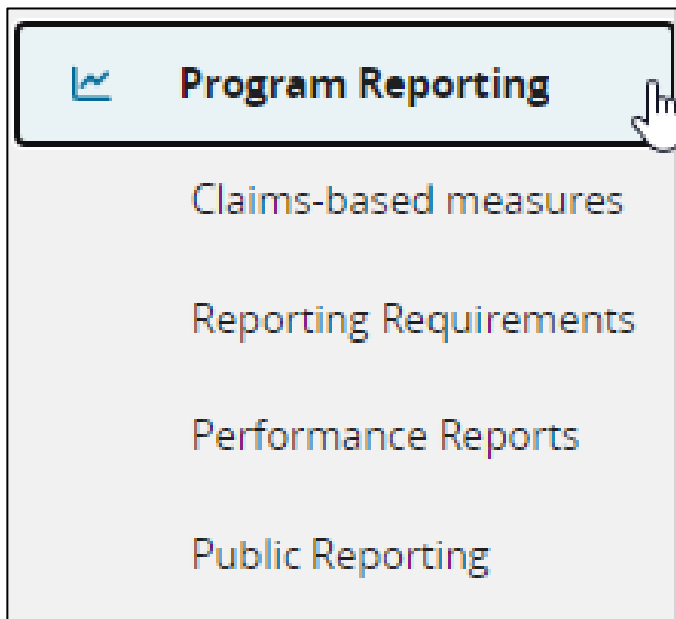
- Logging into the Hospital Quality Reporting (HQR) system requires users to have a Health Care Quality Improvement System (HCQIS) Access Roles and Profile (HARP) account.
- If you currently have a HARP account, visit the [HQR login page](#) and log in using your HARP user ID and password. If you do not have a HARP account, you may [register for a HARP ID](#).



The screenshot shows the CMS.gov Hospital Quality Reporting login page. The page features a blue header with the CMS.gov logo and the text "Hospital Quality Reporting" on the left, and a "Sign up" button on the right. Below the header is a large image of a healthcare professional in a white coat. Overlaid on the image is the text "Welcome to CMS.gov Hospital Quality Reporting". To the right of the image is a "Log in" section with the heading "Log in" and the instruction "Enter your HARP user ID and password". Below this are two input fields: "User ID" and "Password". Under the "Password" field is a link "Having trouble logging in?". At the bottom of the login section is the text "By logging in, you agree to the Terms & Conditions." and two buttons: "Log in" and "Sign up". The footer of the page includes the CMS.gov logo and "Hospital Quality Reporting" on the left, and the "U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES" logo on the right.

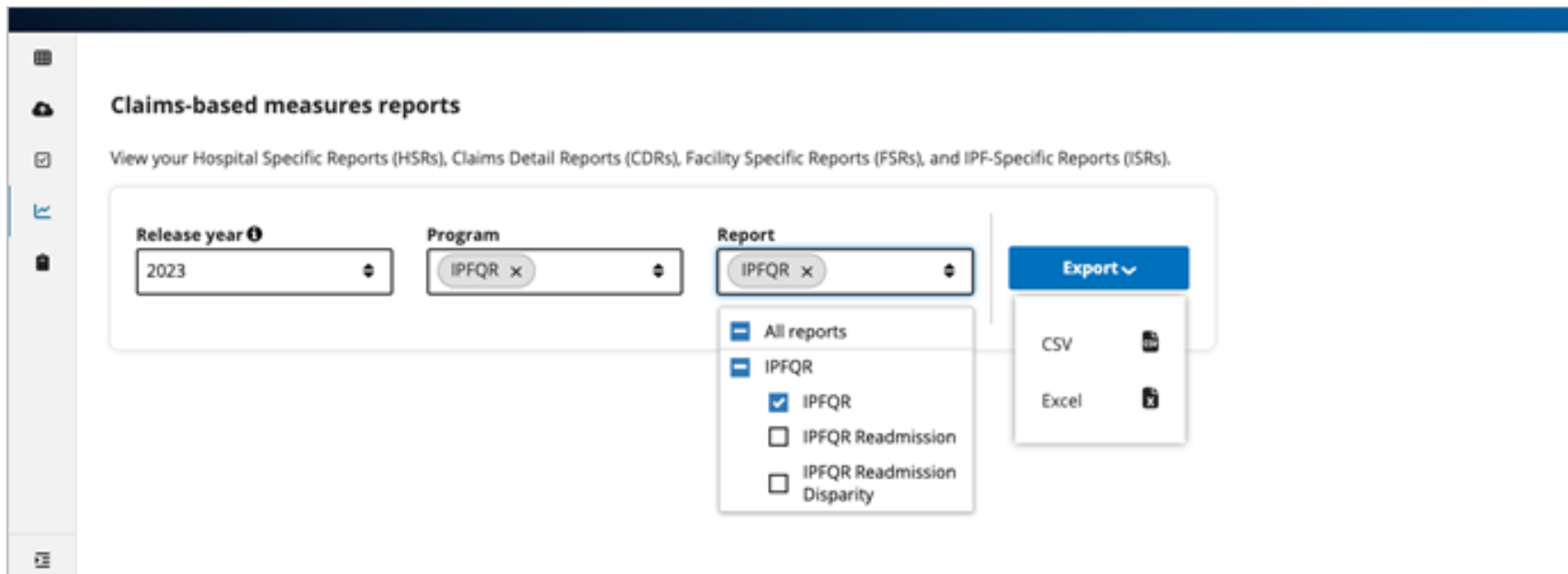
Accessing Your ISR

- To locate your ISR, select **Program Reporting** on the left-hand menu.
- Then, select **Claims-based Measures**.



Accessing Your ISR

- To view the FY 2024 ISRs, select 2023 as the release year, followed by IPFQR in the **Program** drop-down menu.
- Under **Report**, you can view a list of files available for download.



Accessing the ISR User Guide and Mock ISR

ISR user guides and mock ISRs for the FAPH, IPF Readmission, and MedCont measures are located on [QualityNet](#).

- QualityNet > Inpatient Psychiatric Facilities > [Public Reporting](#)
- <https://qualitynet.cms.gov/ipf/public-reporting>

IPFQR Program:
Review of FY 2024 ISRs for Claims-Based Measures

Interpreting the FAPH ISR

Overview of FAPH Measure

- The FAPH measure assesses the percentage of IPF hospitalizations for treatment of select mental health or substance use disorders (SUDs) that were followed by an outpatient mental health care or SUD encounter.
- Two rates are reported:
 - The percentage of discharges for which the patient received follow-up within 7 days of discharge
 - The percentage of discharges for which the patient received follow-up within 30 days of discharge

Overview of FAPH ISR

Your FAPH ISR contains five worksheets:

1. Summary
2. Publicly Reported
3. Distribution of Rates
4. Patient Characteristics
5. Discharge-Level Data

Worksheet 1: Summary

- The summary worksheet provides general information on the measure, links to resources, and information on your facility.
- Before reviewing the report, check that the name of your facility and CMS certification number (CCN) are accurate.
 - Contact the CCSQ Service Center if you notice any discrepancies.
 - Phone: (866) 288-8912
 - TRS: 711
 - Email: QnetSupport@cms.hhs.gov

Worksheet 2: Publicly Reported Performance Information

This worksheet contains information that will be publicly available in the Provider Data Catalog in January 2024.

TABLE 1. YOUR FACILITY'S PERFORMANCE ON THE FAPH MEASURE	
FAPH Performance Information	--
Your Facility's Denominator (Measure Population)	579
Your Facility's Rate	--
Your Facility's 7-Day Follow-Up Rate	58.2%
Your Facility's 30-Day Follow-Up Rate	80.3%
State Rate	--
State 7-Day Follow-Up Rate	45.2%
State 30-Day Follow-Up Rate	71.1%
National Rate	--
National 7-Day Follow-Up Rate	35.9%
National 30-Day Follow-Up Rate	59.4%

For more information on this worksheet, see pages 5-6 of the FAPH measure's *2023 User Guide for the IPF-Specific Report*.

Worksheet 3: Distribution of Rates

This worksheet provides the nationwide distribution of 7- and 30-day IPF FAPH rates at the facility level.

FAPH Rate Type	# IPFs	Minimum	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Maximum	Percentile
Nationwide Distribution of FAPH-7-Day Rates	1,403	2.44%	19.05%	26.92%	34.62%	43.79%	53.70%	100.00%	--
Your facility's FAPH-7-Day Rate Percentile	--	--	--	--	--	--	--	--	95th
Nationwide Distribution of FAPH-30-Day Rates	1,403	9.09%	40.58%	51.27%	60.87%	70.00%	77.38%	100.00%	--
Your facility's FAPH-30-Day Rate Percentile	--	--	--	--	--	--	--	--	94th

For more information on this worksheet, see page 7 of the FAPH measure's *2023 User Guide for the IPF-Specific Report*.

Worksheet 4: Patient Characteristics

This worksheet provides information on the types of patients discharged from your facility and facilities nationwide, by diagnosis.

TABLE 3. CCS PRINCIPAL DIAGNOSES AT DISCHARGE				
Discharge Diagnoses of the IPF Hospitalizations (CCS)	Facility Count	Percent of All IPF Hospitalizations	7-Day Follow-Up Rate	30-Day Follow-Up Rate
CCS PRINCIPAL DIAGNOSES AT DISCHARGE FROM YOUR FACILITY	--	--	--	--
CCS 657 Mood disorders	307	53.0%	65.5%	87.9%
CCS 659 Schizophrenia and other psychotic disorders	112	19.3%	50.0%	72.3%
CCS 660 Alcohol-related disorders	83	14.3%	50.6%	72.3%
CCS 661 Substance-related disorders	29	5.0%	48.3%	62.1%
CCS 651 Anxiety disorders	24	4.1%	58.3%	79.2%
CCS 653 Delirium dementia and amnestic and other cognitive disorders	15	2.6%	33.3%	66.7%
CCS 650 Adjustment disorders	5	0.9%	60.0%	80.0%
CCS 670 Miscellaneous disorders	3	0.5%	33.3%	66.7%
CCS 658 Personality disorders	1	0.2%	100.0%	100.0%
CCS 652 Attention-deficit, conduct, and disruptive behavior disorders	NQ	NQ	NQ	NQ
CCS 655 Disorders usually diagnosed in infancy, childhood, or adolescence	NQ	NQ	NQ	NQ
CCS 656 Impulse control disorders, NEC	NQ	NQ	NQ	NQ
CCS PRINCIPAL DIAGNOSES AT DISCHARGE NATIONWIDE	--	--	--	--
CCS 657 Mood disorders	52,387	43.2%	41.5%	66.4%
CCS 659 Schizophrenia and other psychotic disorders	48,083	39.6%	30.5%	53.0%
CCS 653 Delirium dementia and amnestic and other cognitive disorders	8,562	7.1%	33.2%	58.0%
CCS 660 Alcohol-related disorders	4,560	3.8%	32.6%	53.1%
CCS 661 Substance-related disorders	2,716	2.2%	27.7%	46.4%
CCS 651 Anxiety disorders	1,909	1.6%	44.3%	68.9%
CCS 650 Adjustment disorders	1,361	1.1%	33.7%	57.1%
CCS 658 Personality disorders	586	0.5%	42.7%	65.0%
CCS 656 Impulse control disorders, NEC	379	0.3%	35.6%	61.7%
CCS 670 Miscellaneous disorders	252	0.2%	54.4%	78.6%
CCS 655 Disorders usually diagnosed in infancy, childhood, or adolescence	247	0.2%	39.3%	70.9%
CCS 662 Suicide and intentional self-inflicted injury	200	0.2%	35.0%	67.5%

For more information on this worksheet, see page 8 of the FAPH measure's 2023 *User Guide for the IPF-Specific Report.*

Worksheet 5: Discharge-Level Data

This worksheet provides information on all discharges eligible for inclusion in the measure from your facility during the measurement period.

TABLE 4. YOUR FACILITY'S DISCHARGE-LEVEL INFORMATION FOR THE FAPH MEASURE

ID Number	Provider ID	HICNO	MBI [a]	Medical Record Number	Beneficiary DOE	Admission Date of IPF Hospitalization	Discharge Date of IPF Hospitalization	Principal Discharge Diagnosis of IPF Hospitalization	Principal Discharge CCS of IPF Hospitalization	7-Day Follow-Up	30-Day Follow-Up
1	999999	999999999A	9AA9AA9AA99	99999A	99/99/9999	99/99/9999	99/99/9999	F332	Mood disorders (657)	Yes	Yes
2	999999	999999999A	9AA9AA9AA99	99999A	99/99/9999	99/99/9999	99/99/9999	F332	Mood disorders (657)	Yes	Yes
3	999999	999999999A	9AA9AA9AA99	99999A	99/99/9999	99/99/9999	99/99/9999	F202	Schizophrenia and other psychotic disorders (659)	Yes	Yes
4	999999	999999999A	9AA9AA9AA99	99999A	99/99/9999	99/99/9999	99/99/9999	F332	Mood disorders (657)	Yes	Yes
5	999999	999999999A	9AA9AA9AA99	99999A	99/99/9999	99/99/9999	99/99/9999	F1020	CCS 660 Alcohol-related disorders (660)	Yes	Yes

Contact the CCSQ Service Center if you identify any rows in the second column containing provider IDs that are not for your facility.

For more information on this worksheet, see page 9 of the FAPH measure's *2023 User Guide for the IPF-Specific Report*.

IPFQR Program:
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Interpreting the IPF Readmission ISR

Overview of IPF Readmission Measure

The IPF Readmission measure estimates an all-cause, unplanned, 30-day, risk-standardized readmission rate for adult fee-for-service (FFS) patients in Medicare who have a principal discharge diagnosis of a psychiatric disorder or dementia/Alzheimer's disease.

Overview of IPF Readmission ISR

Your IPF Readmission ISR contains 13 worksheets:

1. Summary
2. Publicly Reported
3. National-State Performance
4. Facility Performance
5. Distribution of Rates
6. Index Admission Diagnoses
7. Readmit Location
8. Readmit per Beneficiary
9. Readmit Diagnoses
10. Risk Factor Distribution
11. Dual Eligible Within-Hospital
12. Dual Eligible Across-Hospitals
13. Discharge-Level Data

Worksheet 1: Summary

- The summary worksheet provides general information on the measure, links to resources, and information on your facility.
- Before reviewing the report, check that the name of your IPF and CCN are accurate.
 - Contact the CCSQ Service Center if you notice any discrepancies.
 - Phone: (866) 288-8912
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 - Email: QnetSupport@cms.hhs.gov

Worksheet 2: Publicly Reported Performance Information

This worksheet contains information that will be publicly available in the Provider Data Catalog in January 2024.

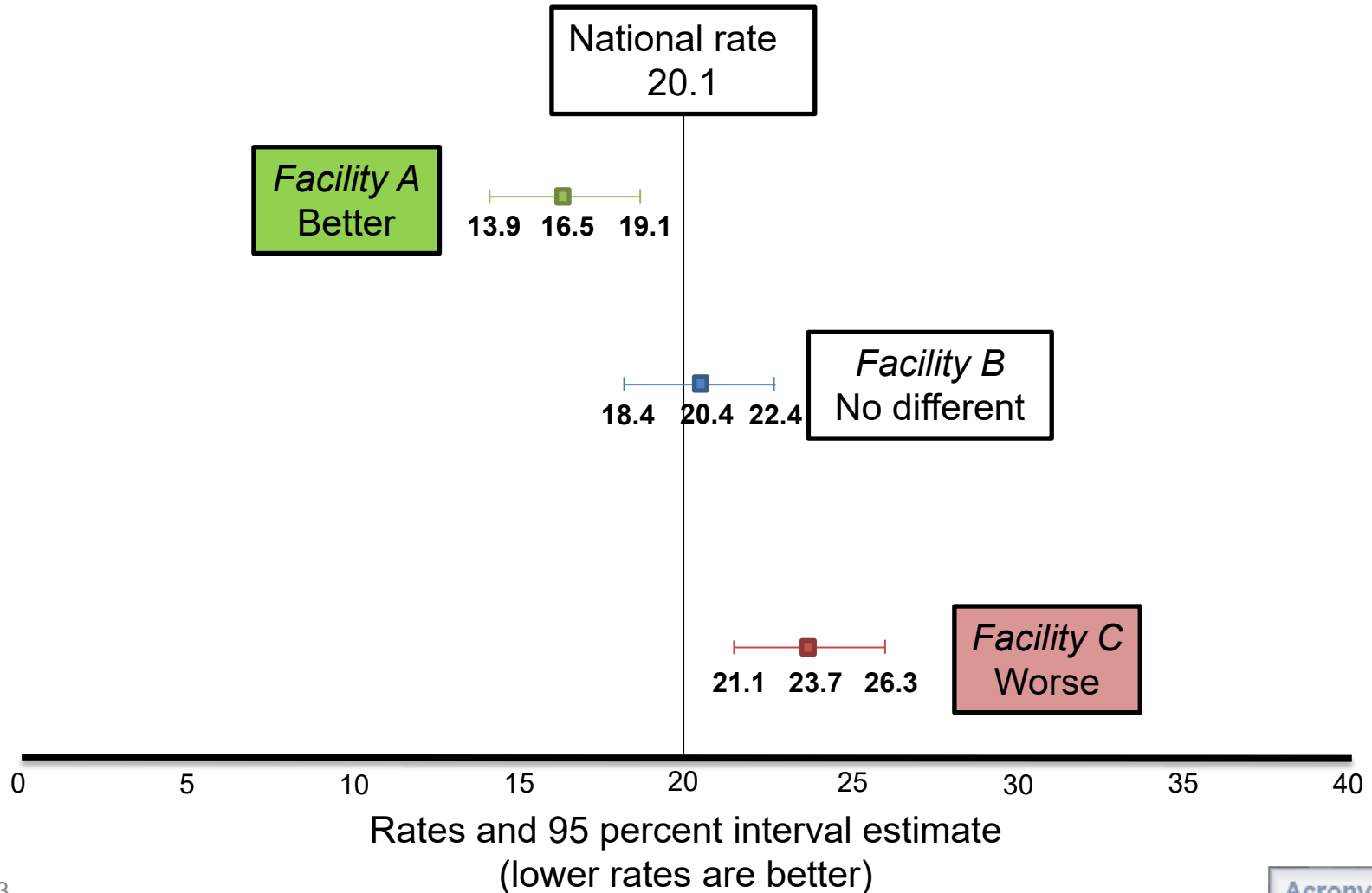
3	TABLE 1. YOUR FACILITY'S PERFORMANCE ON THE 30-DAY IPF READMISSION MEASURE (READM-30-IPF)	
4		
5	READM-30-IPF Performance Information	--
6	Your Facility's Comparative Performance	Worse than the national rate
7	Your Facility's Number of Index Admissions (Measure Population)	728
8	Your Facility's Risk-Standardized Readmission Rate (RSRR)	23.7%
9	Lower Limit of 95% Interval Estimate for RSRR	21.1%
10	Upper Limit of 95% Interval Estimate for RSRR	26.3%
11	National Observed Unplanned Readmission Rate	20.1%

For more information on this worksheet, see page 6 of the IPF Readmission measure's *2023 User Guide for the IPF-Specific Report*.

SRR and RSRR

- Standardized risk ratio (SRR): predicted number of readmissions for a specific IPF divided by the number expected for any IPF with a similar case mix
- Risk-standardized readmission rate (RSRR): SRR multiplied by the national readmission rate

Worksheet 2: Publicly Reported Performance Information



Worksheet 3: National-State Performance

This worksheet provides the number of facilities in each performance category at the state and national level.

TABLE 2. NATIONAL AND STATE PERFORMANCE CATEGORIES FOR READM-30-IPF		
3		
4		
5	Total Number of Facilities in the Nation with Measure Results	1,692
6	Number of facilities in the nation that performed better than the national rate	109
7	Number of facilities in the nation that performed no different than the national rate	1,325
8	Number of facilities in the nation that performed worse than the national rate	177
9	Number of facilities in the nation that had too few cases	81
10	Total Number of Facilities in Your State with Measure Results	120
11	Number of facilities in the state that performed better than the national rate	8
12	Number of facilities in the state that performed no different than the national rate	96
13	Number of facilities in the state that performed worse than the national rate	12
14	Number of facilities in the state that had too few cases	4

For more information on this worksheet, see page 7 of the IPF Readmission measure's *2023 User Guide for the IPF-Specific Report*.

Worksheet 4: Facility Performance

This worksheet shows how your RSRR was calculated.

TABLE 3. CALCULATION OF YOUR FACILITY'S RISK-STANDARDIZED READMISSION RATE (READM-30-IPF)		
READM-30-IPF Performance Information	Facility	National
Number of Index Admissions (Measure Population)	728	623,953
Total Number of 30-Day Unplanned Readmissions	204	125,283
Observed Unplanned Readmission Rate	28.0%	20.1%
Standardized Risk Ratio (SRR)	1.18	1.00
Lower Limit of 95% Interval Estimate for SRR	1.05	--
Upper Limit of 95% Interval Estimate for SRR	1.31	--
Risk-Standardized Readmission Rate (RSRR)	23.7%	--
Lower Limit of 95% Interval Estimate for RSRR	21.1%	--
Upper Limit of 95% Interval Estimate for RSRR	26.3%	--

For more information on this worksheet, see page 8 of the IPF Readmission measure's *2023 User Guide for the IPF-Specific Report*.

Worksheet 5: Distribution of Rates

This worksheet provides the distribution of facility-level observed and RSRR nationwide. Rows 7 and 9 show your facility's percentile rank for the observed rate and RSRR.

TABLE 4. NATIONWIDE DISTRIBUTION OF READM-30-IPF RATES AMONG IPFS WITH AT LEAST 25 ELIGIBLE DISCHARGES AND YOUR FACILITY'S PERFORMANCE PERCENTILES									
Readmission Rate Type	# IPFs	Minimum	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Maximum	Percentile
Nationwide distribution of observed unplanned readmission rates	1,611	2.0%	12.0%	15.4%	18.5%	22.5%	26.1%	40.3%	--
Your facility's observed unplanned readmission rate percentile	--	--	--	--	--	--	--	--	93rd
Nationwide distribution of RSRRs	1,611	11.4%	16.8%	18.3%	20.1%	22.0%	23.8%	35.8%	--
Your facility's RSRR percentile	--	--	--	--	--	--	--	--	89th

For more information on this worksheet, see page 9 of the IPF Readmission measure's *2023 User Guide for the IPF-Specific Report*.

Worksheet 6: Index Admission Diagnoses

This worksheet provides information on the types of patients discharged from your facility and facilities nationwide, by diagnosis.

TABLE 5. CCS PRINCIPAL DISCHARGE DIAGNOSES FOR THE INDEX ADMISSIONS

Discharge Diagnosis for the Index Admission	Count	Percent of All Index Admissions	% Readmitted within 30 days	% Readmitted with the Same Diagnosis
Discharges from your facility	--	--	--	--
CCS 657 Mood disorders	43	42.6%	23.3%	11.6%
CCS 659 Schizophrenia and other psychotic disorders	21	20.8%	19.0%	9.5%
CCS 660 Alcohol-related disorders	9	8.9%	44.4%	33.3%
CCS 654 Developmental disorders	8	7.9%	50.0%	50.0%
CCS 650 Adjustment disorders	7	6.9%	0.0%	0.0%
CCS 651 Anxiety disorders	7	6.9%	14.3%	0.0%
CCS 661 Substance-related disorders	4	4.0%	0.0%	0.0%
CCS 658 Personality disorders	2	2.0%	0.0%	0.0%
CCS 652 Attention-deficit, conduct, and disruptive behavior disorders	NQ	NQ	NQ	NQ
CCS 653 Delirium, dementia, and amnestic and other cognitive disorders	NQ	NQ	NQ	NQ
CCS 655 Disorders usually diagnosed in infancy, childhood, or adolescence	NQ	NQ	NQ	NQ
CCS 656 Impulse control disorders, NEC	NQ	NQ	NQ	NQ
CCS 662 Suicide and intentional self-inflicted injury	NQ	NQ	NQ	NQ
CCS 663 Screening and history of mental health and substance abuse codes	NQ	NQ	NQ	NQ
CCS 670 Miscellaneous disorders	NQ	NQ	NQ	NQ
Discharges nationwide	--	--	--	--
CCS 657 Mood disorders	253,949	43.0%	19.6%	8.6%
CCS 659 Schizophrenia and other psychotic disorders	198,609	33.6%	22.6%	11.9%
CCS 653 Delirium, dementia, and amnestic and other cognitive disorders	80,397	13.6%	15.8%	7.0%
CCS 660 Alcohol-related disorders	18,883	3.2%	21.1%	10.7%
CCS 661 Substance-related disorders	17,675	3.0%	19.4%	6.4%
CCS 651 Anxiety disorders	7,808	1.3%	16.4%	1.9%
CCS 650 Adjustment disorders	5,656	1.0%	16.4%	1.7%

For more information on this worksheet, see page 10 of the IPF Readmission measure's *2022 User Guide for the IPF-Specific Report*.

Worksheet 7: Readmit Location

This worksheet shows what type of facility patients were readmitted to, both at your facility and nationwide.

3 TABLE 6. READMISSION LOCATION (READM-30-IPF)			
4			
5	READM-30-IPF Performance Information	Facility	National
6	Number of index admissions (Measure Population)	728	623,953
7	Total number of 30-day unplanned readmissions	204	125,283
8	Observed unplanned readmission rate	28.0%	20.1%
9	Readmissions by Location	--	--
10	Total number of 30-day unplanned readmissions that returned to discharging facility	85	51,231
11	Percent of all readmissions that returned to discharging facility	41.7%	40.9%
12	Total number of 30-day unplanned readmissions that are readmitted to another facility	119	74,052
13	Percent of all readmissions that are readmitted to another facility	58.3%	59.1%
14	Readmissions to other facilities by type of facility	--	--
15	Total number of 30-day unplanned readmissions that are readmitted to a different IPF	71	39,753
16	Percent of all readmissions that are readmitted to a different IPF	34.8%	31.7%
17	Total number of 30-day unplanned readmissions that are readmitted to an acute care hospital	48	34,299
18	Percent of all readmissions that are readmitted to an acute care hospital	23.5%	27.4%

For more information on this worksheet, see page 11 of the IPF Readmission measure's *2023 User Guide for the IPF-Specific Report*.

Worksheet 8: Readmit per Beneficiary

This worksheet shows how many patients were readmitted more than once during the measurement period.

3 TABLE 7. BENEFICIARIES WITH MULTIPLE READMISSIONS (July 1, 2015-June 30, 2017)			
4			
5	READM-30-IPF Admissions and Readmissions	Facility	National
6	Number of index admissions	728	623,953
7	Number of unique beneficiaries with an eligible index admission	472	379,854
8	Readmissions	--	--
9	Number of readmissions	204	125,283
10	Number of unique beneficiaries with readmissions	138	79,505
11	Number of readmissions per beneficiary	--	--
12	Number of unique beneficiaries with one readmission during the performance period	102	57,050
13	Percent of unique beneficiaries with one readmission during the performance period	73.9%	71.8%
14	Number of unique beneficiaries with two or more readmissions during the performance period	36	22,455
15	Percent of unique beneficiaries with two or more readmissions during the performance period	26.1%	28.2%

For more information on this worksheet, see page 12 of the IPF Readmission measure's *2023 User Guide for the IPF-Specific Report*.

Worksheet 9: Readmit Diagnoses

This worksheet shows the most common causes of readmission for your patients and for patients nationwide.

TABLE 8. TOP 10 CCS PRINCIPAL DIAGNOSES OF READMISSIONS FOLLOWING DISCHARGE

CCS Diagnoses on the Readmission	Count	Percent of Readmissions
Readmissions from your facility	--	--
CCS 657.1 Bipolar disorder	5	21.7%
CCS 657.2/662 Depressive disorder	5	21.7%
CCS 652/654/655 ADD/developmental/childhood disorder	4	17.4%
CCS 660 Alcohol disorder	3	13.0%
CCS 659.2 Psychosis	2	8.7%
CCS 157 Acute and unspecified renal failure	1	4.3%
CCS 2 Septicemia (except in labor)	1	4.3%
CCS 658 Personality disorder	1	4.3%
CCS 659.1 Schizo-affective disorder	1	4.3%
--	--	--
--	--	--
Readmissions nationwide	--	--
CCS 659.1 Schizo-affective disorder	22,312	18.8%
CCS 657.1 Bipolar disorder	19,045	16.1%
CCS 657.2/662 Depressive disorder	17,091	14.4%
CCS 659.2 Psychosis	15,989	13.5%
CCS 653 Dementia	7,068	6.0%
CCS 660 Alcohol disorder	4,543	3.8%
CCS 661 Drug disorder	3,387	2.9%

For more information on this worksheet, see page 13 of the IPF Readmission measure's 2023 *User Guide for the IPF-Specific Report*.

Worksheet 10: Risk Factor Distribution

This worksheet shows how the case mix of your facility's discharges compares to the case mix of discharges nationwide.

3 TABLE 9. DISTRIBUTION OF PATIENT RISK FACTORS AMONG DISCHARGES FOR READM-30-IPF			
4			
5 Risk Factor/Condition Indicator	Facility Discharges	National Discharges	
6 Number of index admissions	728	623,953	
7 Risk Factor/Condition Indicators	--	--	
8 Gender: Male	55.4%	49.0%	
9 Age	--	--	
10 18-34	13.7%	12.4%	
11 35-44	18.3%	14.8%	
12 45-54	25.7%	18.6%	
13 55-64	19.6%	18.2%	
14 65-74	13.9%	17.3%	
15 75-84	6.2%	12.0%	
16 85+	2.6%	6.6%	
17 Principal discharge diagnosis on index admission	--	--	
18 CCS 650 Adjustment disorder	NQ	0.9%	
19 CCS 651 Anxiety	NQ	1.3%	
20 CCS 652/654/655 ADD/Developmental/Childhood disorders	NQ	0.2%	
21 CCS 653 Dementia	7.7%	13.7%	
22 CCS 656 Impulse control disorders	NQ	0.4%	
23 CCS 657.1 Bipolar disorder	22.9%	20.4%	
24 CCS 657.2/662 Depressive disorder	23.4%	23.2%	
25 CCS 658 Personality disorder	NQ	0.4%	

For more information on this worksheet, see page 14 of the IPF Readmission measure's 2023 User Guide for the IPF-Specific Report.

Worksheet 11: Dual-Eligible Within-Hospital

This worksheet summarizes the facility-level performance on the within-hospital disparity method applied for patients who are dually eligible for Medicare and Medicaid.

TABLE 10. SUMMARY OF YOUR FACILITY'S PERFORMANCE ON THE WITHIN-HOSPITAL DISPARITY METHOD APPLIED TO THE READM-30-IPF FOR PATIENTS WHO ARE MEDICARE AND MEDICAID DUALLY ELIGIBLE	
Performance Information	Readmission
Your Facility's Comparative Performance	Similar outcomes for patients who are dually eligible and non-dually eligible
Your Facility's Rate Difference	-0.63%
Your Facility's Average Predicted Readmission Rate for Patients Who Are Dually Eligible [a]	13.99%
Your Facility's Average Predicted Readmission Rate for Patients Who Are Non-Dually Eligible	14.62%
Total Number of Readmissions (Numerator) at Your Facility for Patients Who Are Dually Eligible	25
Total Number of Eligible Discharges (Denominator) at Your Facility for Patients Who Are Dually Eligible	157
Total Number of Readmissions (Numerator) at Your Facility for Patients Who Are Non-Dually Eligible	36
Total Number of Eligible Discharges (Denominator) at Your Facility for Patients Who Are Non-Dually Eligible	250
Average Rate Difference in Your State	0.48%
Total Number of Unplanned 30-Day Readmissions (Numerator) in Your State	1,315
Total Number of Eligible Discharges (Denominator) in Your State	6,985
Total Number of Unplanned 30-Day Readmissions (Numerator) in the Nation	63,867
Total Number of Eligible Discharges (Denominator) in the Nation	325,945

For more information on this worksheet, see page 15 of the IPF Readmission measure's 2023 *User Guide for the IPF-Specific Report*.

Worksheet 12:

Dual Eligible Across-Hospital

This worksheet summarizes the facility-level performance on the across-hospital disparity method applied for patients who are dually eligible for Medicare and Medicaid.

TABLE 11. SUMMARY OF YOUR FACILITY'S PERFORMANCE ON THE ACROSS-HOSPITAL DISPARITY METHOD APPLIED TO THE READM-30-IPF FOR PATIENTS WHO ARE MEDICARE AND MEDICAID DUALLY ELIGIBLE

Performance Information	Readmission
Your Facility's Comparative Performance	Better than the national rate
Your Facility's RSRR for Patients Who Are Dually Eligible	17.44%
Total Number of Readmissions (Numerator) at Your Facility for Patients Who Are Dually Eligible	25
Total Number of Eligible Discharges (Denominator) at Your Facility for Patients Who Are Dually Eligible	157
Observed Readmission Rate (Numerator/ Denominator) at Your Facility for Patients Who Are Dually Eligible	15.92%
Average RSRR in Your State for Patients Who Are Dually Eligible	22.15%
Total Number of Readmissions (Numerator) for Patients Who Are Dually Eligible in Your State	821
Total Number of Eligible Discharges (Denominator) for Patients Who Are Dually Eligible in Your State	3,700
Observed Readmission Rate (Numerator/ Denominator) in Your State for Patients Who Are Dually Eligible	22.19%
Total Number of Readmissions (Numerator) for Patients Who Are Dually Eligible in the Nation	36,439
Total Number of Eligible Discharges (Denominator) for Patients Who Are Dually Eligible in the Nation	164,728
National Observed Readmission Rate (Numerator/ Denominator) for Patients Who Are Dually Eligible	22.12%

For more information on this worksheet, see page 16 of the IPF Readmission measure's 2023 *User Guide for the IPF-Specific Report*.

Worksheet 13: Discharge-Level Data

This worksheet provides information on all discharges eligible for inclusion in the measure from your facility during the measurement period.

TABLE 12. DISCHARGE-LEVEL INFORMATION FOR READM-30-IPF

ID Number	Provider ID	HICNO	MBI [a]	Dual Eligible [b]	Medical Record Number	Beneficiary DOB	Admission Date of Index Stay	Discharge Date of Index Stay	Principal Discharge Diagnosis of Index Stay	Principal Discharge CCS of Index Stay	Unplanned Readmission within 30 Days (Yes/No)	Admission Date of Readmission	Discharge Date of Readmission	Principal Discharge Diagnosis of Readmission	Principal Discharge CCS of Readmission	Readmission to the Same Provider (Yes/No) [1]	Readmission to an IPF (Yes/No)	Provider ID of Readmitting Facility [2]
1	999999	9999999999A	9AA9AA9AA99		999999A	99/99/9999	99/99/9999	99/99/9999	F339	CCS 657.2/662 Depressive disorder	Yes	99/99/9999	99/99/9999	F333	CCS 657.2/662 Depressive disorder	No	Yes	999999
2	999999	9999999999A	9AA9AA9AA99		999999A	99/99/9999	99/99/9999	99/99/9999	F259	CCS 659.1 Schizo-affective disorder	Yes	99/99/9999	99/99/9999	R4182	CCS 259 Residual codes	Yes	No	888888
3	999999	9999999999A	9AA9AA9AA99		999999A	99/99/9999	99/99/9999	99/99/9999	F430	CCS 651 Anxiety disorders	Yes	99/99/9999	99/99/9999	F39	CCS 657.1 Bipolar disorder	No	Yes	888888
4	999999	9999999999A	9AA9AA9AA99		999999A	99/99/9999	99/99/9999	99/99/9999	F333	CCS 657.2/662 Depressive disorder	Yes	99/99/9999	99/99/9999	F332	CCS 657.2/662 Depressive disorder	No	Yes	999999
5	999999	9999999999A	9AA9AA9AA99		999999A	99/99/9999	99/99/9999	99/99/9999	F3130	CCS 657.1 Bipolar disorder	Yes	99/99/9999	99/99/9999	F314	CCS 657.1 Bipolar disorder	Yes	Yes	999999
6	999999	9999999999A	9AA9AA9AA99		999999A	99/99/9999	99/99/9999	99/99/9999	F250	CCS 659.1 Schizo-affective disorder	Yes	99/99/9999	99/99/9999	F250	CCS 659.1 Schizo-affective disorder	No	Yes	888888
7	999999	9999999999A	9AA9AA9AA99		999999A	99/99/9999	99/99/9999	99/99/9999	F250	CCS 659.1 Schizo-affective disorder	Yes	99/99/9999	99/99/9999	F259	CCS 659.1 Schizo-affective disorder	Yes	Yes	888888
8	999999	9999999999A	9AA9AA9AA99		999999A	99/99/9999	99/99/9999	99/99/9999	F339	CCS 657.2/662 Depressive disorder	Yes	99/99/9999	99/99/9999	F332	CCS 657.2/662 Depressive disorder	Yes	Yes	888888

Contact the CCSQ Service Center if you identify any rows in the second column containing provider IDs that are not for your facility. For more information on this worksheet, see page 17 of the IPF Readmission measure's *2023 User Guide for the IPF-Specific Report*.

IPFQR Program:
Review of FY 2024 ISRs for Claims-Based Measures

Interpreting the MedCont ISR

Overview of MedCont Measure

The MedCont measure assesses whether psychiatric patients admitted to an IPF for major depressive disorder, schizophrenia, or bipolar disorder filled a prescription for evidence-based medication within two days before discharge and 30 days post-discharge.

Overview of MedCont ISR

Your MedCont ISR contains five worksheets:

1. Summary
2. Publicly Reported
3. Distribution of Rates
4. Patient Characteristics
5. Discharge-Level Data

Worksheet 1: Summary

- The summary worksheet provides general information on the measure, links to resources, and information on your facility.
- Before reviewing the report, check that the name of your IPF and CCN are accurate.
 - Contact the CCSQ Service Center if you notice any discrepancies.
 - Phone: (866) 288-8912
 - TRS: 711
 - Email: QnetSupport@cms.hhs.gov

Worksheet 2: Publicly Reported Performance Information

This worksheet contains information that will be publicly available in the Provider Data Catalog in January 2024.

TABLE 1. YOUR FACILITY'S PERFORMANCE ON THE MEDCONT MEASURE

MedCont Performance Information	--
Your Facility's Denominator (Measure Population)	92
Your Facility's Rate	93.5%
State Rate	79.8%
National Rate	73.1%

For more information on this worksheet, see pages 6 of the MedCont measure's *2023 User Guide for the IPF-Specific Report*.

Worksheet 3: Distribution of Rates

This worksheet provides the nationwide distribution of MedCont rates.

TABLE 2. NATIONWIDE DISTRIBUTION OF MEDCONT RATES AMONG IPFS WITH AT LEAST 75 DENOMINATOR CASES AND YOUR FACILITY'S PERFORMANCE PERCENTILES

MedCont Rate Type	# IPFs	Minimum	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Maximum	Percentile
Nationwide Distribution of MedCont Rates	856	34.31%	62.60%	68.91%	74.82%	79.75%	83.70%	93.48%	--
Your Facility's MedCont Rate Percentile	--	--	--	--	--	--	--	--	100th

For more information on this worksheet, see page 7 of the MedCont measure's *2023 User Guide for the IPF-Specific Report*.

Worksheet 4: Patient Characteristics

This worksheet provides information on the types of patients discharged from your facility and facilities nationwide, by diagnosis.

TABLE 3. PRINCIPAL DIAGNOSES AT DISCHARGE

Discharge Diagnoses of the IPF Hospitalizations	Facility Count	Percent of All IPF Hospitalizations	MedCont Rate
PRINCIPAL DIAGNOSES AT DISCHARGE FROM YOUR FACILITY	--	--	--
Bipolar Disorder	14	15.2%	78.6%
Major Depressive Disorder (MDD)	60	65.2%	96.7%
Schizophrenia	18	19.6%	94.4%
PRINCIPAL DIAGNOSES AT DISCHARGE NATIONWIDE	--	--	--
Bipolar Disorder	50,796	26.1%	73.5%
Major Depressive Disorder (MDD)	59,620	30.7%	72.4%
Schizophrenia	83,885	43.2%	73.3%

For more information on this worksheet, see page 8 of the MedCont measure's *2023 User Guide for the IPF-Specific Report*.

Worksheet 5: Discharge-Level Data

This worksheet provides information on all discharges eligible for inclusion in the measure from your facility during the measurement period.

TABLE 4. YOUR FACILITY'S DISCHARGE-LEVEL INFORMATION FOR THE MEDCONT MEASURE

ID Number	Provider ID	HICNO	MBI ^a	Medical Record Number	Beneficiary DOI	Admission Date of IPF Hospitalization	Discharge Date of IPF Hospitalization	Principal Discharge Diagnosis of IPF Hospitalization (ICD-10)	Principal Discharge Diagnosis of IPF Hospitalization	Prescription filled within 2 days prior to discharge through 30 days after discharge?
1	999999	999999999A	9AA9A99AA99	99999A	99/99/9999	99/99/9999	99/99/9999	F250	Schizophrenia	Yes
2	999999	999999999A	9AA9A99AA99	99999A	99/99/9999	99/99/9999	99/99/9999	F200	Schizophrenia	Yes
3	999999	999999999A	9AA9A99AA99	99999A	99/99/9999	99/99/9999	99/99/9999	F329	MDD	Yes

Contact the CCSQ Service Center if you identify any rows in the second column containing provider IDs that are not for your facility.

For more information on this worksheet, see page 9 of the MedCont measure's *2023 User Guide for the IPF-Specific Report*.

Acronyms

CBM	claims-based measure	IPFQR	Inpatient Psychiatric Facility Quality Reporting
CCN	CMS Certification Number	IPF Readmission	30-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an IPF
CCS	clinical classifications software	IPPS	Inpatient Prospective Payment System
CCSQ	Center for Clinical Standards and Quality	ISR	IPF-Specific Report
CMS	Centers for Medicare & Medicaid Services	LTCH	Long-Term Care Hospital
FAPH	Follow-Up After Psychiatric Hospitalization	NQ	no qualifying index admissions
FFS	fee-for-service	PPS	Prospective Payment System
FUH	Follow-Up After Hospitalization for Mental Illness	Q&A	questions and answers
FY	fiscal year	READM-30-IPF	30-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an IPF
HARP	HCQIS Access Roles and Profile	RSRR	Risk-Standardized Readmission Rate
HCQIS	Health Care Quality Information Systems	SRR	Standardized Risk Ratio
HICNO	health insurance claim number	VIQR	Value, Incentives, and Quality Reporting
IPF	inpatient psychiatric facility		

IPFQR Program:
Review of FY 2024 ISRs for Claims-Based Measures

Helpful Resources

Confidential Review Period Resources

- QualityNet > Inpatient Psychiatric Facilities > [IPFQR Measures](#)
 - <https://qualitynet.cms.gov/ipf/ipfqr/measures>
 - CBM specifications
 - Contains FY 2024 specifications for each measure
- QualityNet > Inpatient Psychiatric Facilities > [Public Reporting](#)
 - <https://qualitynet.cms.gov/ipf/public-reporting>
 - Quick Reference Guide for the ISR Confidential Review Period
 - Contains information on the confidential review period and contact information
- These resources are also available for download from the Quality Reporting Center [IPFQR Program Resources and Tools](#) web page.

Helpful Resources

IPFQR Program Web Pages
(Click the icons.)



Helpful Resources

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(866) 800-8765**



**Fax
(877) 789-4443**

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Thank You!

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