

Inpatient and Outpatient Healthcare Quality Systems Development and Program Support

# IPFQR Program: Patient Experience Survey Overview Presentation Transcript

### **Speaker**

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### November 7, 2024 2:00 p.m. Eastern Time

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### Inpatient and Outpatient Healthcare Quality Systems Development and Program Support

Lisa Vinson:

Welcome to today's presentation titled, IPFOR Program: Patient Experience Survey Overview. My name is Lisa Vinson. I am the IPFQR Program Lead for the Inpatient and Outpatient Healthcare Quality Systems Development and Program Support, and I am the speaker for today's event. Before we delve into today's topic, I would like to cover a few housekeeping items. First, 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 QualityReportingCenter.com in your web browser, and, on the bottom left of the screen, you will see a list of Upcoming Events. Click on the link for this event, and there you will find the presentation slides available for download. This webinar is being recorded, and the transcript, slides, and a recording of today's presentation will be posted to QualityNet at a later date. Secondly, we ask that you submit any questions pertinent to the webinar topic in the Chat tool. To obtain answers to questions that are not specific to the content of this webinar, we recommend that you submit your inquiry via the QualityNet Question and Answer Tool. You can access this tool from the QualityNet home page. There, you can search for questions unrelated to the current webinar topic. If you do not find your questions there, then you can submit your question to us via this tool. Finally, at the end of this presentation, you will have the opportunity to complete a survey. We ask that you complete the survey, as we value your feedback regarding what works well, as well as any areas for improvement in future presentations.

Please use the Chat tool to submit questions that are pertinent to the webinar topic. As a reminder, we do not use the raised-hand feature in the Chat tool during webinars. As stated earlier, please submit additional questions after this event through the question-and-answer tool via QualityNet. Be sure to include the webinar name and slide number.

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Provided on this slide are acronyms you may hear or see during today's presentation. They include CMS for Centers for Medicare & Medicaid Services; IPF for inpatient psychiatric facility; IPFQR for Inpatient Psychiatric Facility Quality Reporting; PIX for Psychiatric Inpatient Experience; and Q&A for question and answer

The purpose of this presentation is to provide an overview of the Psychiatric Inpatient Experience, or PIX, Survey for participants in the IPFQR Program.

The objective for today is that IPFQR Program participants will be able to demonstrate an understanding of the intent of the PIX Survey and related IPFQR Program requirements.

We will begin our discussion with learning more about the background of the PIX Survey.

The PIX Survey was finalized for inclusion in the IPFQR Program in the fiscal year 2024 IPF Prospective Payment System final rule with voluntary reporting for calendar year 2025 and mandatory reporting beginning calendar year 2026 for fiscal year 2028 payment determination. Please refer to pages 51121 through 51128 for additional information.

CMS believes it is critical to ensure that the voice of the individual is included in care decisions and that a comprehensive approach to quality must include directly reported feedback from patients regarding facility, provider, and payer performance.

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Adoption of the PIX Survey supports several CMS priorities, which are outlined on this slide. The first priority is CMS' Meaningful Measures 2.0 framework. This priority addresses person-centered care, individual and caregiver voice, and it aligns with the commitment to prioritize outcome and patient-reported measures. The second priority is CMS National Quality Strategy which addressed fostering engagement. The third priority, CMS Behavioral Health Strategy, addresses strengthening equity and quality in the area of behavioral health care.

Lastly, CMS received input from many interested members of the public who strongly advocated for a patient experience of care measure in the IPFQR Program. In the Consolidated Appropriations Act of 2023, the inclusion of a patient experience measure in the IPFQR Program became required by law.

Now, I will provide an overview of the PIX Survey.

The PIX Survey obtains feedback on the care experience directly from individuals who receive services in inpatient psychiatric facilities. This survey is standardized, publicly available, minimally burdensome, and psychometrically validated specifically for the IPF setting. It was developed by an interdisciplinary team of researchers and clinicians at Yale University - Yale New Haven Psychiatric Hospital.

The PIX Survey consists of 23 questions categorized by four domains. They are Treatment Team Relationship, Nursing Team Presence, Treatment Effectiveness, and Environment. Patients can respond to each question using a five-point Likert scale. The five points are Strongly Agree; Somewhat Agree; Neutral; Somewhat Disagree and Strongly Disagree. There is also an option to choose that the question does not apply.

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Of note, there are six questions in the Demographic Questions sections which are optional. These questions are not reported or scored to CMS; however, they could be beneficial to the IPF in understanding patient experience of care.

This page displays the PIX Survey, 23 questions on page 1 and the optional Demographic Questions on page 2. The PIX Survey can be found on the <u>QualityNet IPFQR Program</u> Resources page under the header of Psychiatric Inpatient Experience (PIX) Survey Resources, which you can access by selecting the hyperlink on this slide.

Our last topic to cover will be data collection, submission, and reporting of the PIX Survey.

The PIX Survey cohort consists of all patients discharged from an IPF during the reporting period who are 13 years of age or older at discharge. There are two exclusions, patients who are under 13 years of age at time of discharge and patients who are unable to complete the survey due to cognitive or intellectual limitations.

The PIX Survey should be distributed to patients beginning 24 hours prior to discharge. Of note, the survey can be completed prior to discharge using either a paper copy of the survey or an electronic version of the survey via tablet or computer.

If it is not possible for the patient to complete the survey prior to discharge, the facility should provide a sealable, addressed, stamped envelope for the patient to return the survey following discharge. Mail-back surveys received by the IPF on or prior to December 31 count toward the calendar year reporting period in which the survey was received. Relying exclusively on the mail-back option may prevent the IPF from meeting the measure's minimum sampling requirements, which will review shortly.

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IPFs can choose whether to provide the PIX Survey in a paper format or create an electronic survey tool that replicates the questions on the paper tool. The survey is anonymous and must be administered in a manner that maintains the patient's anonymity. Patients should be informed that all responses provided will be treated with strict anonymity. CMS will provide feedback reports to IPFs which will include information and data in aggregate with no identifying information.

Furthermore, patients must be given the option to request assistance from staff; a caregiver, including parents or guardians; or a peer. The survey includes an item inquiring if the patient received any assistance while completing it. The PIX Survey is available in English and Spanish, and other language translations are in development.

As stated earlier, there sampling requirements for the PIX Survey. Sampling plans should ensure that data for at least 300 completed PIX Surveys are submitted per year. Sampling is required from every month throughout the entire reporting period, and IPFs should not stop sampling or curtail ongoing survey activities once 300 surveys have been received. IPFs that are unable to reach 300 completed surveys because of small patient population size or characteristics of their patient population, such as patients who are unable to complete the survey due to cognitive or intellectual limitations, will be required to submit data on survey results for all eligible patient discharges.

The PIX Survey is reported as five separate rates, one for each of the four domains of the survey and one overall rate. Each rate will be calculated from patient responses on the PIX Survey and then publicly reported on CMS' Compare tool available on Medicare.gov.

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Mean scores will be calculated by assigning a numerical value ranging from 1, Strongly Disagree, to 5, Strongly Agree. Average responses will be calculated by adding the values of all responses and dividing that by the number of responses. Omitted questions or Does Not Apply selections are excluded from score calculation. Higher scores indicate better performance.

Please note that a domain score is only calculated when all questions in that domain are answered. An overall score is only calculated when all domains are scored. For instance, if a patient responds to some, but not all, questions, a score will be calculated for the domain or domains in which all questions were answered. An overall score would not be calculated.

As it relates to PIX Survey data submission requirements, the data will be submitted to CMS' Hospital Quality Reporting, or HQR, system which program participants are familiar with. The voluntary reporting period is calendar year 2025, and this data will be submitted from July 1 through August 15, 2026. The mandatory reporting period is calendar year 2026, and this data will be submitted from July 1 through August 15, 2027. Please note that the August 15 deadline date will shift to the next business day, if this day falls on a Friday, Saturday, Sunday, or federal holiday. There will be more information forthcoming regarding submitting PIX Survey data.

The <u>QualityNet IPFQR Program Resources page</u> will house all PIX Survey resources. The resources provided on this slide are available and can be accessed by clicking on the hyperlink on this slide.

Before we conclude this presentation, we will review some helpful resources.

Has there been any turnover at your facility within the last several months? If so, we want to hear from you!

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Would you like to receive email communications about future IPFQR Program webinars, program updates, resources, and other announcements? If so, then we invite you to sign up for the IPFQR Program Listserve by clicking on the Listserve Registration icon on this slide. Another way to find information about upcoming webinars is to click on the Upcoming Webinars icon on this slide.

When you have a general question about the IPFQR Program or need clarification about any of the program measures, be sure to leverage the Find an Answer function in the QualityNet Question & Answer Tool. If you do not see a published article in the question-and-answer tool related to your question, then you can submit your inquiry to us via the question-and-answer tool, which you can access by selecting the Q&A Tool icon on this slide. The best way to reach us when you have questions about IPFQR Program eligibility, such as next steps for a newly eligible provider, or to notify us 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 IPFQR Program support team via phone at (866) 800-8765 or via secure fax at (877) 789-4443.

This concludes today's presentation. As stated during my introductory remarks, you will have the opportunity to complete a survey. We ask that you complete the survey, as we value your feedback regarding what works well, as well as any areas for improvement.

Thank you for your time and attention, and we hope you enjoy the remainder of your day!