



# **IPFQR Program: Patient Experience Survey Overview**

**Lisa Vinson, BS, BSN, RN**

Program Lead

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program  
Inpatient and Outpatient Healthcare Quality Systems Development  
and Program Support

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- We will respond to questions as soon as possible.

# Acronyms

<b>CMS</b>	Centers for Medicare & Medicaid Services
<b>IPF</b>	inpatient psychiatric facility
<b>IPFQR</b>	Inpatient Psychiatric Facility Quality Reporting
<b>PIX</b>	Psychiatric Inpatient Experience
<b>Q&amp;A</b>	question and answer

# Purpose

This presentation will provide an overview of the Psychiatric Inpatient Experience (PIX) Survey for participants in the IPFQR Program.

# Objectives

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Participants will be able to demonstrate an understanding of the intent of the PIX Survey and related IPFQR Program requirements.

IPFQR Program: PIX Survey Overview

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## **PIX Survey Background**

# Background

The PIX Survey was finalized for inclusion in the IPFQR Program in the [fiscal year 2024 IPF Prospective Payment System final rule](#) (pages 51121–51128) with voluntary reporting for CY 2025 and mandatory reporting beginning CY 2026 (for FY 2028 payment determination).

# Background

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.



# Background

Adoption of the PIX Survey supports several CMS priorities:

- CMS' Meaningful Measures 2.0 framework
  - Person-Centered Care
  - Individual and Caregiver Voice
  - Commitment to prioritize outcome and patient-reported measures
- CMS National Quality Strategy
  - Foster Engagement
- CMS Behavioral Health Strategy
  - Strengthen Equity and Quality in Behavioral Health Care

# Background

- CMS also 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.

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## **PIX Survey Overview**

# Overview

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

# Overview

- The PIX Survey has 23 questions in four domains:
  - 1) Treatment Team Relationship
  - 2) Nursing Team Presence
  - 3) Treatment Effectiveness
  - 4) Environment
- Patients can respond to each question using a five-point Likert scale (strongly agree, somewhat agree, neutral, somewhat disagree, strongly disagree, does not apply).

# Overview

There are six questions in the *optional* Demographic Questions section.

- These questions could be useful to the IPF in understanding patient experience of care.
- The demographic questions are not reported to CMS, nor are they scored or reported by CMS.

# Overview

## QualityNet IPFQR Program Resources – PIX Survey

**YPX Insights | Psychiatry Inpatient**

**Directions:** Please answer each statement based on your current hospitalization experience. If a question does not apply to you, please select "Does not apply." We encourage you to answer truthfully and candidly.

Treatment Team Relationship	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
My Doctor/Provider treated me with care and respect.						
My Doctor/Provider valued my opinion even if we didn't always agree.						
My Doctor/Provider helped me understand my treatment options.						
I had input into decisions about my treatment.						
My Social Worker helped me include family or other supports in my treatment if I wished.						

  

Environment	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
The unit was clean.						
I felt physically safe on the unit.						
I had access to quiet space if I needed it.						
Healthy food options were available.						
I had enough access to fresh air and/or natural light.						
I was satisfied with the services available on the weekends.						
I was supported in keeping busy and finding social/recreational activities.						

  

Treatment Effectiveness	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
The symptoms/problems that brought me to the hospital have improved.						
Group therapy was helpful.						
I have skills to help manage symptoms/problems I face in daily life.						
My medications will help me.						
I will have the resources I need to be successful after I leave the hospital.						

  

Nursing Team Presence	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
Nurses were caring and respectful.						
Counselors/Technicians were caring and respectful.						
Nurses were attentive to my needs.						
Counselors/Technicians were attentive to my needs.						
Staff paid attention to what was happening on the unit.						
Staff worked together to care for me.						

**YPX Insights | Psychiatry Inpatient**

Demographic Questions [Optional]	Suggested Item Choices
Did you receive assistance completing this survey?	Yes No
Age	12 – 17 18 – 24 25 – 34 35 – 44 45 – 54 55 – 64 65 – 74 75 and over
Gender	Female Male Transgender Male Transgender Female Non-binary Other Prefer Not to Say
Sexual Orientation	Heterosexual/Straight Homosexual/Gay Homosexual/Lesbian Bisexual Other Prefer Not to Say
Race/Ethnicity	Asian/Pacific Islander Black or African American Hispanic or Latino Native American or American Indian Biracial/Multiracial White Other Prefer Not to Say
Disability Status	None Deaf or Hearing Problems Blind or Vision Problems Learning Difficulty Difficulty Walking Difficulty Thinking/Remembering Other Prefer Not to Say

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## **Data Collection, Submission, and Reporting**



# Cohort

- All patients discharged from an IPF during the reporting period who are 13 years of age or older at discharge
- Exclusions:
  - Patients who are under 13 years of age at time of discharge
  - Patients who are unable to complete the survey due to cognitive or intellectual limitations

# Data Collection

The survey can be distributed to patients beginning 24 hours prior to discharge.

- 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.

# Data Collection

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.

# Data Collection

- IPFs can choose whether to provide the survey in a paper format or create an electronic survey tool that replicates the questions on the paper tool.
- The survey must be administered in a way 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.

# Data Collection

- 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.
- Survey is available in English and Spanish.
  - Other language translations are in development.

# Sampling

- 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.
  - 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.

# Scoring

- This measure is reported as five separate rates, one for each of the four domains of the PIX 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.

# Scoring

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.



# Scoring

- 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.
  - If a patient responds to some, but not all, questions, a score will be calculated for the domain(s) in which all questions were answered. An overall score would not be calculated.

# Data Submission

- IPFs will submit PIX Survey data to CMS' Hospital Quality Reporting (HQR) system.
- Voluntary reporting period:
  - January 1–December 31, 2025 (Calendar Year 2025)
    - Data submission period: July 1–August 15, 2026\*
- Mandatory reporting begins:
  - January 1–December 31, 2026 (Calendar Year 2026)
    - Data submission period: July 1–August 15, 2027

\* The deadline date will move to the next business day when August 15 falls on a Friday, Saturday, Sunday, or federal holiday.

# Resources and Tools

## QualityNet – [IPFQR Program Resources](#)

- PIX Survey
- Fact Sheet
- Frequently Asked Questions

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**Thank You!**

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