



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

IPFQR Program: Psychiatric Inpatient Experience (PIX) Survey
Administration and Data Collection
Presentation Transcript

Speaker

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December 30, 2024

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Lisa Vinson: Hello and welcome to the IPFQR Program webinar entitled, *Psychiatric Inpatient Experience, PIX, Survey Administration and Data Collection*. My name is Lisa Vinson, and I am the Inpatient Psychiatric Facility Quality Reporting, or IPFQR, Program Lead for the Inpatient and Outpatient Healthcare Quality Systems Development and Program Support Team. I will be the speaker for this event. As you may recall, in early November we hosted our first Psychiatric Inpatient Experience Survey educational event, which provided an overview of this new survey. The information provided today will focus on administration and data collection of the PIX Survey. I will also address a few of the commonly asked questions we have received.

If you have questions pertaining to the webinar topic, please email them to WebinarQuestions@hsag.com, hyperlinked on this slide. Please be sure to include the title of today's event, *IPFQR Program: PIX Survey Administration and Data Collection*, in the subject line. In the body of the email, include your question along with the applicable slide number. If you have questions unrelated to today's topic, please feel free to submit them via the [QualityNet Question and Answer Tool](#), which can also be accessed by selecting the hyperlink on this slide.

Acronyms you may hear and see today include C-S-V for comma-separated value; H-Q-R for Hospital Quality Reporting; P-I-X, or PIX, for Psychiatric Inpatient Experience; Q-R for Quick Response; and X-M-L for Extensible Markup Language.

The purpose of this presentation is to provide information about data collection for the Psychiatric Inpatient Experience Survey. This presentation also addresses commonly asked questions.

The objectives for today are that IPFQR Program participants will be able to understand the PIX Survey; demonstrate how to successfully collect data for the patient experience survey; obtain information about implementation, resources, tools, and educational opportunities during the voluntary reporting period; and answer questions related to the new patient experience survey.

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Let's begin with 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. Sampling plans should ensure that data for at least 300 completed PIX surveys are submitted per year. The PIX survey has 23 questions categorized by four domains: Treatment Team Relationship, Environment, Treatment Effectiveness, and Nursing Team Presence.

Patients can respond to each question using a five-point Likert scale. The selections on this scale include Strongly Agree, Somewhat Agree, Neutral, Somewhat Disagree, Strongly Disagree, and Does Not Apply. There are also six questions in the optional Demographic Questions section which could be useful to the IPF in understanding patient experience of care. Please note that the demographic questions are not reported to CMS, nor are they scored or reported by CMS.

Provided on this slide is the PIX Survey. The first page lists the 23 questions, and the second page provides the optional six demographic questions. Of note, there is a Spanish version available as well. You can access the PIX Survey along with other resources by visiting the QualityNet IPFQR Program Resources page under Psychiatric Inpatient Experience (PIX) Survey Resources.

As it relates to PIX Survey data submission requirements, the data will be submitted to CMS' Hospital Quality Reporting, or HQR, system. The voluntary reporting period is calendar year 2025, and these data will be submitted from July 1–August 15, 2026. The mandatory reporting period is calendar year 2026, and these data will be submitted from July 1–August 15, 2027. Please note that the August 15th deadline date will shift to the next business day, if this day falls on a Friday, Saturday, Sunday, or federal holiday.

Now we will review when and how the PIX Survey should be administered to patients in IPFs.

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A PIX survey should be offered to all patients discharged from an IPF during the reporting period who are 13 years of age or older at the time of discharge. There are exclusions, which include 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. If an IPF is divided into an adult department and a pediatric department, the pediatric IPF should administer the PIX Survey to eligible patients who are 13 years of age or older at discharge.

The PIX Survey can be distributed to patients beginning 24 hours prior to discharge. As mentioned earlier, the survey is available in English and Spanish. The PIX Survey is anonymous and can be administered via paper copy, electronically, like tablet or computer, or, if necessary, via mail. Patients must be given the option to request assistance from administrative 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. It is ideal and encouraged for the patient to complete the survey unless the patient requests assistance from a caregiver. As I stated earlier, the PIX Survey is anonymous and 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, and individual identities will be safeguarded to maintain anonymity: A survey should not be administered, stored in, or in any way connected to the medical record. A survey should not contain any identifiers like name, date of birth, survey ID, etc. CMS will provide feedback reports to IPFs which will include information and data in aggregate with no identifying information.

Pictured on this slide is the five-point Likert scale that patients taking the survey will use to rate their experience with their care. For visual cueing, IPFs can provide the emojis provided on this slide, which correspond to the Likert scale options, along with survey. As illustrated, the options are Strongly Agree, Somewhat Agree, Neutral, Somewhat Disagree, Strongly Disagree, and Does Not Apply.

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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. However, anonymity must be maintained regardless of format the survey is administered. If it is not possible for the patient to complete the survey prior to discharge, the facility should provide a sealable, stamped envelope addressed to the IPF 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 is 300.

Mail-back surveys will be submitted to the Hospital Quality Reporting System at the same time and in the same manner as surveys that were completed prior to discharge. As it relates to PIX Survey Data Submission, the CMS HQR System human-centered design team is conducting interviews with IPFs about PIX survey implementation and data submission. XML file upload, CSV file upload, and data form submission methods will be available for the voluntary reporting period. HQR is exploring a solution to enable direct survey submission from patients to the HQR System beginning with the mandatory reporting period. Submission of the PIX Survey will be each sampled survey to include individual item responses. If you would like to participate in the research regarding PIX survey data submission, please email Amy Orange at aorange@bellese.io or sign up at the web address provided on this slide.

Now we will review commonly asked questions we have received as it pertains to the PIX Survey.

Question #1: Can our IPF use a vendor to conduct the PIX Survey? Yes, an IPF can choose whether to administer the PIX Survey or use a vendor. If a vendor is used, anonymity must be maintained.

Question #2: Are IPFs participating in voluntary reporting required to start data collection in January 2025? No, IPFs participating in voluntary reporting may begin data collection in any month in 2025.

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Question #3: Are we allowed to add additional questions and a comment section to the PIX Survey? Yes, an IPF can choose to add additional questions and/or a comment section to the 23-question PIX Survey. The questions must maintain anonymity and not be identifiable. Only the 23 questions on the PIX Survey will be submitted to HQR System.

Question # 4: Can an electronic version of the survey, a web link, be submitted post-discharge? No, if an IPF uses an electronic version of the survey, it should be offered to the patient prior to discharge. If it is not possible for the patient to complete the survey prior to discharge, the facility should provide a sealable, stamped envelope addressed to the IPF for the patient to return the survey following discharge.

Question # 5: Can we create a QR, or quick response, code to capture survey data? Yes, as long as the survey remains anonymous and no identifiable information is obtained.

Lastly Question #6: How will the scores be calculated? The CMS HQR System will calculate a score for each domain, as well as an overall score. 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. 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 domains in which all questions were answered. An overall score would not be calculated.

The QualityNet – IPFQR Program Resources page houses all PIX Survey resources. This includes the PIX Survey, Fact Sheet, and Frequently Asked Questions document. You may also refer to the PIX Survey educational event we hosted in November, which is accessible by selecting the hyperlink on this slide.

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

If there has been turnover at your facility within the last several months, 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. We invite you to sign up for the IPFQR Program Listserve by clicking on the Listserve Registration icon on this slide. This will allow you to receive email communications about future IPFQR Program webinars, program updates, resources, and other announcements. 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 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 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 support team via phone at (866) 800-8765 or via secure fax at (877) 789-4443. Lastly you can access the IPFQR Program webpages on Quality Reporting Center and QualityNet by selecting the respective icons pictured at the bottom of this slide.

This concludes today's webinar. 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.