



Proposed Updates to IPF Quality Reporting Program *CHA Member Forum*

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Objectives

- Review proposed changes to IPF Quality Reporting Program included in the FFY 2017 IPPS Proposed Rule
 - The full text of the proposed rule and the CHA summary are available at www.calhospital.org/regulatory-tracker
- Solicit CHA member feedback on proposed changes for CHA comments
 - All comments due on June 17 by 2 pm PT.
 - Comments submitted online at www.regulations.gov
 - Draft comments available the week of June 13 via CHA News



IPF Quality Reporting Program



Inpatient Quality Facility Reporting Program (IPF QRP)

- CMS proposes to increase the IPF QRP measure set from the current 16 to 18 measures in FFY 2019
 - CMS proposes the addition of two measures
- CMS proposes a refinement to one current measure
- IPFs that do not successfully participate in the IPF QRP are subject to a 2.0 percentage point reduction to the market basket update for the applicable year



Proposed Non-Measure Changes

- CMS is proposing unspecified IPFQR timelines for data display and review. CMS would continue to publish measure data once a year. CMS would no longer specify:
 - The approximate dates when IPFs' 30-day preview period will begin
 - The exact dates when the data would be publicly available on Hospital Compare
- If finalized, CMS would employ a sub-regulatory process to communicate publication and preview timeframes.



IPF QRP Current Measures

Measure ID	Measure Description
HBIPS-2	Hours of Physical Restraint Use (NQF #0640)
HBIPS-3	Hours of Seclusion Use (NQF #0641)
HBIPS-5	Patients Discharged on Multiple Antipsychotic Medications with Appropriate Justification (NQF #0560)
FUH	Follow-Up After Hospitalization for Mental Illness (NQF #0576)
SUB-1	Alcohol Use Screening (NQF #1661)
SUB-2 and SUB-2a	Alcohol Use Brief Intervention Provided or Offered and the subset, Alcohol Use Brief Intervention (NQF #1663)
TOB-1	Tobacco Use Screening (NQF #0651)
TOB-2 and TOB-2a	Tobacco Use Treatment Provided or Offered and the subset, Tobacco Use Treatment (during the hospital stay) (NQF #1654)
TOB-3 and TOB-3a	Tobacco Use Treatment Provided or Offered at Discharge and the subset, Tobacco Use Treatment at Discharge (NQF #1656)
IMM-2	Influenza Immunization (NQF #1659)
N/A	Transition Record with Specified Elements Received and Discharged Patients (NQF #0647)
N/A	Timely Transmission of Transition Record (NQF #0648)
N/A	Screening for Metabolic Disorders
N/A	Influenza Vaccination Coverage Among Healthcare Personnel
N/A	Assessment of Patient Experience of Care
N/A	Use of an Electronic Health Record (EHR)



Refinement to Screening for Metabolic Disorders Measure

- CMS is proposing to update the previously finalized **Screening for Metabolic Disorders** measure by updating the length of stay exclusion as follows:
 - Exclude patients with a length of stay equal to or greater than 365 days
 - Exclude patients with a length of stay equal to or less than 3 days



Proposed Measures for FFY 2019

NQF ID	Measure	MAP Recommendation
1664	SUB-3 Alcohol & Other Drug Use Disorder Treatment Provided or Offered at Discharge, and the subset measure SUB-3a Alcohol & Other Drug Use Disorder Treatment at Discharge	The measure was supported for inclusion in the IPFQR program by the MAP
N/A	Thirty-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an IPF	The MAP offered the measure conditional support pending NQF endorsement and examination of SDS factors




SUB-3 and the Subset SUB-3a: Measure Description

- **SUB-3** includes hospitalized patients aged 18 years and older who are identified with alcohol or drug use disorder who receive or refuse at discharge a prescription for FDA-approved medications for alcohol or drug use disorder, OR who receive a referral for addictions treatment.
- **SUB-3a** includes hospitalized patients age 18 years and older who receive a prescription for FDA-approved medications for alcohol or drug use disorder OR a referral for addictions treatment.



SUB-3 and the Subset SUB-3a: Numerator and Denominator

- **Numerator:**
 - **SUB-3:** The number of patients who received or refused at discharge a prescription for medication for treatment of alcohol or drug use disorder OR received or refused a referral for addictions treatment
 - **SUB-3a:** The number of patients who received a prescription at discharge for medication for treatment of alcohol or drug use disorder OR a referral for addictions treatment
- **Denominator:**
 - The number of hospitalized inpatients 18 years of age and older identified with an alcohol or drug use disorder
- Full measure specifications: <http://www.qualityforum.org/QPS/1664>



Thirty-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an IPF

- The number of hospitalized inpatients 18 years of age and older who are discharged alive from an IPF with a principal diagnosis of a psychiatric disorder that are enrolled in Medicare Parts A & B for 12 months prior to the index admission, the month of admission, and 30 days post discharge



Proposed Readmission Measure Numerator and Denominator

- **Numerator:**
 - The number of patients who had an unplanned admission to an IPF or to an acute care on or between days 3 and 30 post-discharge, except those considered planned by the CMS Planned Readmission Algorithm, Version 3.0
- **Denominator:**
 - The number of hospitalized inpatients 18 years of age and older who are discharged alive from an IPF with a principal diagnosis of a psychiatric disorder that are enrolled in Medicare Parts A & B for 12 months prior to the index admission, the month of admission, and 30 days post discharge
- **Full Measure Specifications:** [NQF Website](#)



Proposed Readmissions Measure Comments

- Adjust for SDS
- CMS should delay finalizing the measure until it is NQF endorsed
- Unique challenges of IPFs
- Others?

Questions/Comments



Email your questions to
mhoward@calhospital.org
or use the Q&A box in the
Adobe room



Additional Resources

CHA DataSuite Reports

Contact: Lindsay Montano lmontano@calhospital.org and
Amber Ott aott@calhospital.org

CHA Regulatory Summaries

Contact: Megan Howard mhoward@calhospital.org and Alyssa
Keefe akeefe@calhospital.org

CHA Resources: www.calhospital.org/regulatory-tracker

- ✓ Proposed and Final Rules
- ✓ CHA Regulatory Summaries
- ✓ Member Resources
- ✓ Archives of previous rules

Questions:

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FOR MEMBERS

CHA Regulatory Tracker

Click on the tabs above the tracker to view regulations with open comment periods and anticipated regulations that will soon be released. A document outlining anticipated regulatory action in 2016 is [available here](#).

[Open Comment Period](#) [Forthcoming Regulations](#) [Final Rules](#) [Other](#)

Due May 31, 2016

- [SAMHSA Increased Patient Limits for MAT Treatment of Opioid Use Disorder](#)

Due June 3, 2016

- [ONC RFI on Measuring Interoperability](#)

Due June 17, 2016

- [FFY 2017 IPPS Proposed Rule](#)
 - [CHA Summary](#)
 - [IPPS CHA Member Forum Slides](#)
 - [Register for CHA Member Forum \(May 31\) IPF QR Provisions](#)
- [FFY 2017 LTCH PPS Proposed Rule](#)
 - [CHA Summary](#)
 - [LTCH CHA Member Forum Slides](#)

[Archive of Federal Rules](#)

[CHA Federal Quality Measure Inventory](#)

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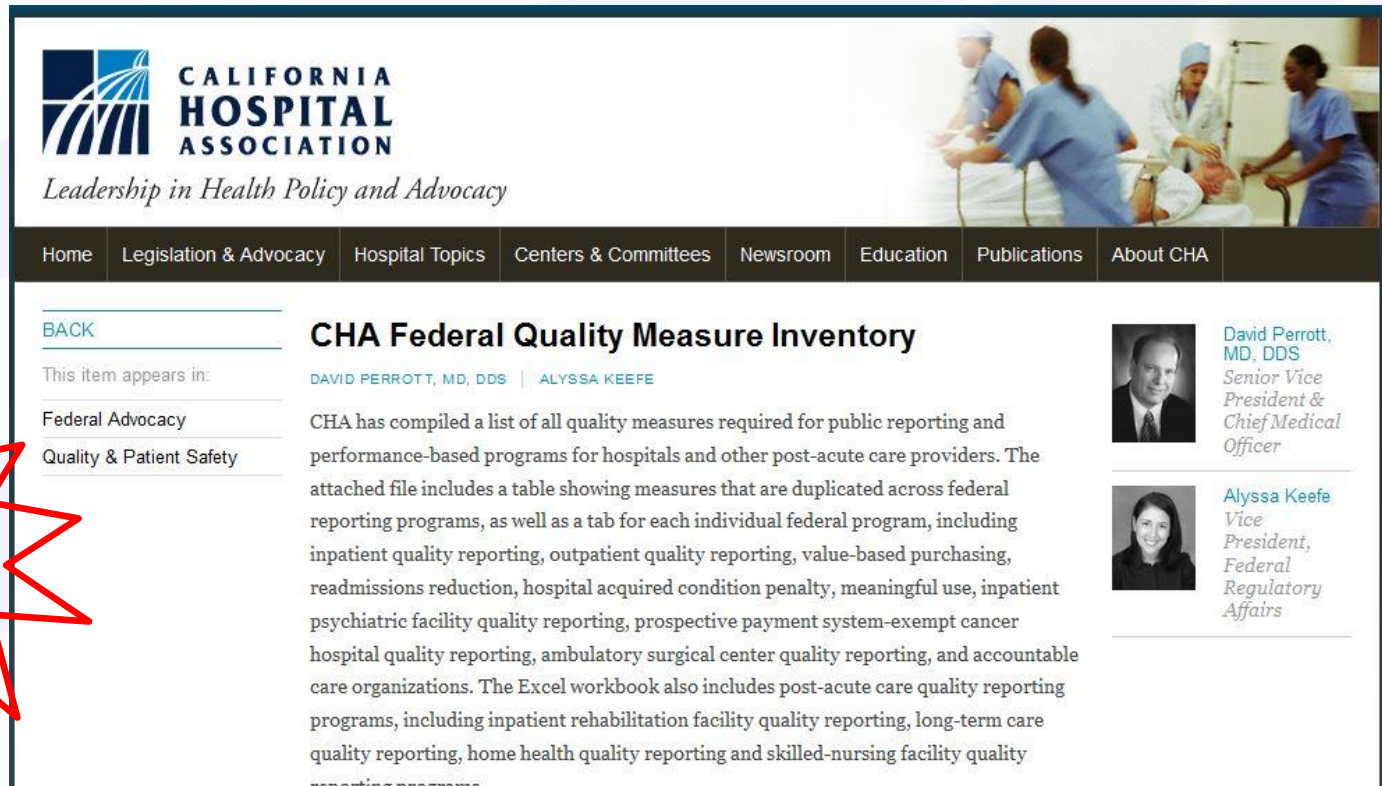


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CHA Resources: Federal Quality Measure Inventory

<http://www.calhospital.org/cha-news-article/cha-releases-federal-quality-measure-inventory>



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CHA Federal Quality Measure Inventory

DAVID PERROTT, MD, DDS | ALYSSA KEEFE

CHA has compiled a list of all quality measures required for public reporting and performance-based programs for hospitals and other post-acute care providers. The attached file includes a table showing measures that are duplicated across federal reporting programs, as well as a tab for each individual federal program, including inpatient quality reporting, outpatient quality reporting, value-based purchasing, readmissions reduction, hospital acquired condition penalty, meaningful use, inpatient psychiatric facility quality reporting, prospective payment system-exempt cancer hospital quality reporting, ambulatory surgical center quality reporting, and accountable care organizations. The Excel workbook also includes post-acute care quality reporting programs, including inpatient rehabilitation facility quality reporting, long-term care quality reporting, home health quality reporting and skilled-nursing facility quality reporting programs.

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Thank You!

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