



**2021 IPPS Final Rule Workshop**  
**Review: IQR and IPFQR Chart-abstracted**  
**Requirements and Validation Changes**

## Chart-Abstracted Requirements

- IPPS
- IPFQR
- ORYX (The Joint Commission)

## Changes in CMS' Validation Schedule

## **CMS IQR and IPFQR Programs:**

- **No new measures added**
- **No measures removed**

# Final Rule Page Directory

**Access the FY2021 IPPS/LTCH PPS Final Rule from the Federal Register at:**

**<https://www.federalregister.gov/documents/2020/09/18/2020-19637/medicare-program-hospital-inpatient-prospective-payment-systems-for-acute-care-hospitals-and-the>**

- **Hospital IQR Program pp. 58926-58959**

**Access the FY2021 Inpatient Psychiatric Facilities (IPF PPS) Final Rule from the Federal Register at:**

**<https://www.federalregister.gov/documents/2020/08/04/2020-16990/medicare-program-fy-2021-inpatient-psychiatric-facilities-prospective-payment-system-ipf-pps-and>**

- **Hospital IPFQR Program pp. 47042-47070**

# CY2021 Chart-Abstracted Measures in the Hospital IQR Program

Measure	Measure Name
SEP-1	Early Management Bundle, Severe Sepsis/Septic Shock
PC-01	Elective Delivery Prior to 39 Completed Weeks Gestation <i>(collected in aggregate and submitted via Web-Based Tool)</i>

*Reminder: If you do not deliver babies at your organization, you must enter zeroes for the PC-01 measure each quarter.*

# CY2021 Available eCQMs: (eCQMs reported in 2022)

## IQR Electronic Measures Available for CY2020 Reporting Period

eED-2	ePC-05	eVTE-1
eVTE-2	eSTK-2	eSTK-3
eSTK-5	eSTK-6	CMS506*

*\*The Opioid measure will be required for submission in 2022 and beyond.*

# IPFQR Measure Requirements

# IPFQR Program Measures (1 of 3)

Measure	Measure Type	Sampling Allowed
HBIPS-2: Hours of Physical Restraint Use	Chart-Abstracted	No
HBIPS-3: Hours of Seclusion Use	Chart-Abstracted	No
HBIPS-5: Patients Discharged on Multiple Antipsychotic Medications with Appropriate Justification	Chart-Abstracted	Yes
TR-1: Transition Record with Specified Elements Received by Discharged Patients	Chart-Abstracted	Yes
TR-2: Timely Transition of Transition Record	Chart-Abstracted	Yes
SMD: Screening for Metabolic Disorders	Chart-Abstracted	Yes



# IPFQR Program Measures (2 of 3)

Measure	Measure Type	Sampling Allowed
IMM-2: Influenza Immunization	Chart-Abstracted	Yes
SUB-2/2a: Alcohol Use Brief Intervention Provided or Offered and the subset SUB-2a Alcohol Use Brief Intervention	Chart-Abstracted	Yes
SUB-3/3a: Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge and the subset SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge	Chart-Abstracted	Yes
TOB-2/2a: Tobacco Use Treatment Provided or Offered and the subset TOB-2a: Tobacco Use Treatment	Chart-Abstracted	Yes
TOB-3/3a: Tobacco Use Treatment Provided or Offered at Discharge and the subset TOB-3a: Tobacco Use Treatment at Discharge	Chart-Abstracted	Yes

# IPFQR Program Measures (3 of 3)

Measure	Measure Type	Sampling Allowed
FUH: Follow-Up After Hospitalization for Mental Illness	Claims-Based	N/A
30-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an Inpatient Psychiatric Facility (IPF)	Claims-Based	N/A
*Medication Continuation Following Inpatient Psychiatric Discharge * New quality measures for the FY 2021 payment determination and subsequent years	Claims-Based	N/A

# CY2021 ORYX Performance Measure Reporting

# CY2021 Joint Commission ORYX Performance Measure Reporting

## 2021 ORYX Reporting Requirements

- **HCO's ORYX requirements will be calculated by the number of Licensed Beds and/or volume of Outpatient Visits, instead of average daily census (ADS).**

# ORYX – TJC – Acute Care Hospitals

Facility Size/Type	Chart-Abstracted Measures Requirements	Electronic Clinical Quality Measure (eCQM) Requirements
Hospitals (HAP) with $\geq 26$ Licensed beds OR $\geq 50,000$ Outpatient visits <i>AND</i> :		Select a minimum of 4 eCQMs, reporting the same eCQMs for 2 self-selected quarters.  There are 12 available eCQMs for CY2021.
300+ live births annually	PC-01, PC-02, PC-05, PC-06	
1-299 live births annually	PC-01	
Do not provide Obstetrical Services	None	

- Additional measures are available for submission based on patient population/services offered.
- HCOs can submit associated eCQMs instead of chart-abstracted Measures to meet their PC measure requirements.
- HCOs that do not provide Obstetrical Services are not required to submit alternate chart-abstracted measures but may do so if they wish.

**Source:** Joint Commission Website - Measurement: <https://www.jointcommission.org/measurement/reporting/accreditation-oryx/>

# ORYX – TJC – Small Hospitals

Facility Size/Type	Chart-Abstracted Measures Requirements	Electronic Clinical Quality Measure (eCQM) Requirements
Hospitals (HAP) with < 26 Licensed beds AND <50,000 Outpatient visits	Required to submit any combination of three (3) eCQMs and/or chart-abstracted measures applicable to patient population/services offered	

May elect to submit additional measures based on patient population/services offered.

Source: Joint Commission Website - Measurement: <https://www.jointcommission.org/measurement/reporting/accreditation-oryx/>

# ORYX – TJC – Critical Access Hospitals (CAH)

Facility Size/Type	Chart-Abstracted Measures Requirements	Electronic Clinical Quality Measure (eCQM) Requirements
Critical Access Hospitals (CAH)	Required to submit any combination of three (3) eCQMs and/or chart-abstracted measures applicable to patient population/services offered	

- May elect to submit additional measures based on patient population/services offered.

**Source:** Joint Commission Website - Measurement: <https://www.jointcommission.org/measurement/reporting/accreditation-oryx/>

# ORYX – TJC – Freestanding Psychiatric Hospitals (HAP)

Facility Size/Type	Chart-Abstracted Measures Requirements	Electronic Clinical Quality Measure (eCQM) Requirements
Freestanding Psychiatric Hospitals (HAP)	HBIPS-1, HBIPS-2, HBIPS-3, HBIPS-5	N/A

- IMM-2, TOB-2, TOB-3, SUB-2, SUB-3 are available as additional chart-abstracted measures

Source: Joint Commission Website - Measurement: <https://www.jointcommission.org/measurement/reporting/accreditation-oryx/>



# ORYX – TJC – Other

Facility Size/Type	Chart-Abstracted Measures Requirements	Electronic Clinical Quality Measure (eCQM) Requirements
Free-standing Children's Hospitals	ORYX Performance Measurement reporting requirements continue to be suspended for these Hospital Accreditation Programs.	
Long Term Acute Care Hospitals (LTACHs)		
Inpatient Rehabilitation Facilities (IRFs)		
HCOs Participating in CMS PPS-Exempt-Cancer Hospital Quality Reporting (PCHQR) Program		

**Source:** Joint Commission Website - Measurement: <https://www.jointcommission.org/measurement/reporting/accreditation-oryx/>

# Additional ORYX – TJC – Chart-Abstracted Measures

## Additional Chart-Abstracted Measures (TJC)

**ED-1, ED-2**

HBIPS-1, HBIPS-2, HBIPS-3, HBIPS-5

TOB-2, TOB-3

SUB-2, SUB-3

OP-18, OP-23

**VTE-6**

**IMM-2**

PC-01, PC-02, PC-05, PC-06

**Source:** Joint Commission Website - Measurement: <https://www.jointcommission.org/measurement/reporting/accreditation-oryx/>

# 2021 ORYX eCQM Reporting

## Electronic Measures Available for ORYX Reporting

eED-2	eOPI-1	ePC-01	ePC-02
ePC-05	ePC-06	eSTK-2	eSTK-3
eSTK-5	eSTK-6	eVTE-1	eVTE-2

Source: Joint Commission Website - Measurement: <https://www.jointcommission.org/measurement/reporting/accreditation-oryx/>

# Validation Changes

# Validation Changes

## Aligned Quarters Used for FY2023 Validation

Fiscal Year 2023	Quarter
Chart-Abstracted Measures Data	3Q2020
	4Q2020
eCQMs	1Q2020 – 4Q2020

Source: Quality Reporting Center: FY2021 IPPS/LTCH PPS Final Rule Overview for Hospital Quality Programs

# Validation Changes (cont.)

## Aligned Quarters Used for Validation for FY2024 and Subsequent Years

Fiscal Year 2024	Quarter
Chart-Abstracted Measures	1Q2021
	2Q2021
	3Q2021
	4Q2021
eCQMs	1Q 2021 – 4Q 2021

**Source:** Quality Reporting Center: FY2021 IPPS/LTCH PPS Final Rule Overview for Hospital Quality Programs

# Validation Changes Affecting FY2024 PD

## (1 of 2)

### Current Validation Process

Selection Process	Number of Hospitals	Measure Type
Random Selection	400	Chart-Abstracted
Target Selection	Up to 200	Chart-Abstracted
Random Selection	Up to 200	eCQMs
Total:	Up to 800	

### Validation Process for FY2024 Payment Determination

Selection Process	Number of Hospitals	Measure Type
Random Selection	Up to 200	Chart-Abstracted & eCQMs
Targeted Selection	Up to 200	Chart-Abstracted & eCQMs
Total:	Up to 400	

**Source:** Quality Reporting Center: FY2021 IPPS/LTCH PPS Final Rule Overview for Hospital Quality Programs

# Validation Changes Affecting FY2024 PD

## (2 of 2)

	Quarters of Data Required for Validation	Payment Determination Criteria
<p>COMBINED Process (Chart-abstracted and eCQM Validation)</p> <p>Up to 200 Random Hospitals + Up to 200 Targeted Hospitals</p>	1Q2021 – 4Q2021	<p>Chart-abstracted Measures: At least 75% validation score (weighted at 100%) AND eCQM: Successful submission of at least 75% of requested medical records</p>

**Source:** Quality Reporting Center: FY2021 IPPS/LTCH PPS Final Rule Overview for Hospital Quality Programs



# Revised Reporting Schedules

Reporting Quarter	CMS Deadline	TJC Deadline	IPFQR Deadline
1Q2020	August 17, 2020	January 31, 2021	August 16, 2021
2Q2020	November 16, 2020	January 31, 2021	
3Q2020	February 16, 2021	April 30, 2021	
4Q2020	May 17, 2021	April 30, 2021	

# Q & A





# WHEN YOU RETURN

Our next presentation will be in the main workshop room.

Click the link found in your calendar invitation to  
return to the main session.

**YOU ARE HERE**



▪ 1:00-1:10: Break

▪ 1:10-2:00: The 2021 “Voluntary” Electronic Measures

**Join this session by clicking the main workshop link found in your calendar invitation or confirmation email.**

▪ A review of the specifications and steps for implementing the Hybrid Hospital-Wide 30-Day Readmission measure and the Safe Use of Opioids - Concurrent Prescribing eCQM.

**BREAK**