



Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Inpatient and Outpatient Healthcare Quality Systems Development and Program Support

IPFQR Program: FY 2026 IPF PPS Proposed Rule Presentation Transcript

Speakers

Kaleigh Emerson, MPH, LMSW
Program Lead, IPFQR Program, CMS

Lisa Vinson, BS, BSN, RN
Program Lead, IPFQR Program
Inpatient and Outpatient Healthcare Quality Systems Development and Program Support

May 22, 2025

DISCLAIMER: This presentation document was current at the time of publication and/or upload onto the websites. Any links to Medicare online source documents are for reference use only. In the case that Medicare policy, requirements, or guidance related to these questions and answers change following the date of posting, these questions and answers will not necessarily reflect those changes; this information will remain as an archived copy with no updates performed.

Any references or links to statutes, regulations, and/or other policy materials included are provided as summary information. No material contained therein is intended to take the place of either written laws or regulations. In the event of any conflict between the information provided by the question-and-answer session and any information included in any Medicare rules and/or regulations, the rules and regulations shall govern. The specific statutes, regulations, and other interpretive materials should be reviewed independently for a full and accurate statement of their contents.

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Inpatient and Outpatient Healthcare Quality Systems Development and Program Support

Lisa Vinson: Welcome to today's presentation, titled IPFQR Program: Fiscal Year 2026 IPF Prospective Payment System, or PPS, Proposed Rule. 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 will be one of the speakers for today's event. As the title indicates, we will be discussing the fiscal year 2026 IPF PPS proposed rule. Please note that today's event is specific for participants in the IPFQR Program.

Our main speaker for today's presentation is Kaleigh Emerson. Kaleigh is the Program Lead for the Inpatient Psychiatric Facility Quality Reporting Program at CMS within the Quality Measurement and Value-Based Incentives Group and Center for Clinical Standards and Quality. On our next slide, we will discuss the question-and-answer limitations for today's event.

Questions submitted pertaining to this event have limitations. The limitations include CMS only addressing procedural questions about the comment submission process. CMS is not able to address any rule-related questions. Later during this presentation, I will be reviewing the comment submission process, and CMS looks forward to receiving your formal comments on the proposed rule.

The purpose of this presentation is to summarize the proposed updates to the IPFQR Program, as outlined in the fiscal year 2026 Inpatient Psychiatric Facility Prospective Payment System proposed rule.

By the end of this presentation, attendees will understand the fiscal year 2026 IPF PPS proposed rule's proposed changes to the IPFQR Program and know how to submit a public comment.

At this time, I will turn the presentation over to Kaleigh. Kaleigh, the floor is yours.

Kaleigh Emerson: Thank you, Lisa. The next few slides will include an overview of the purpose and rationale of the proposed changes to the IPFQR Program.

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Inpatient and Outpatient Healthcare Quality Systems Development and Program Support

Publication of the proposed rule enables CMS to inform IPFQR Program participants about intended modifications to the program, solicit public comment on proposed changes, and provide ample time for IPFs to prepare for potential program changes.

I'll begin with a summary of the proposed changes. CMS has proposed to modify the timeline of the 30-Day Risk-Standardized All-Cause Emergency Department Visit Following an IPF Discharge measure, the IPF ED Visit measure.

There are four measures proposed for removal: Facility Commitment to Health Equity measure, COVID-19 Vaccination Coverage Among Health Care Personnel measure, Screening for Social Drivers of Health, and Screen Positive Rate for SDOH measure.

CMS also proposes to update the Extraordinary Circumstances Exception, or ECE, policy and codify the process for requesting or granting an ECE.

There are also three requests for information: One RFI is on a potential IPF star rating system; one is on future measure concepts on the topics of well-being and nutrition; and one is on the potential use of the Fast Healthcare Interoperability Resources, or FHIR, standard for the IPF patient assessment instrument that is currently under development.

Now, I'll describe the proposed measure modification.

The 30-Day Risk-Standardized All-Cause Emergency Department Visit Following an IPF Discharge measure, the IPF ED Visit measure, was adopted in the fiscal year 2025 final rule. CMS proposes to modify the reporting period from a 12-month calendar year period to a 24-month period that runs from July 1 to June 30. This modification would allow the IPF ED Visit measure to complement a related measure, the 30-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an IPF measure.

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Inpatient and Outpatient Healthcare Quality Systems Development and Program Support

The IPF ED Visit measure is a claims-based measure. It requires no additional data collection or submission by IPFs because the data used to calculate the IPF ED Visit measure are available on Medicare claims. With the modification, the first reporting period would be Quarter 3 2025 through Quarter 2 2027 for fiscal year 2029 payment determination, and the measure would first be publicly displayed in January 2029.

Next, I will describe the proposed measure removals.

The first measure proposed for removal is the Facility Commitment to Health Equity measure. This was adopted in the fiscal year 2024 final rule, and removal would be effective for the fiscal year 2026 payment determination.

If finalized, IPFs that do not report their calendar year 2024 reporting period data for the FCHE measure would not be considered noncompliant for the purposes of fiscal year 2026 payment determination, and data would not be used for public reporting. If not finalized, IPFs that do not report their calendar year 2024 reporting period data for the FCHE measure would be considered noncompliant for the purposes of fiscal year 2026 payment determination. Upon receipt of the non-compliance letter, the 30-day reconsideration period would begin.

The second measure proposed for removal is the COVID-19 Vaccination Coverage Among Health Care Personnel measure. This measure was adopted in the fiscal year 2022 final rule. As proposed, removal would be effective for the fiscal year 2026 payment determination.

If finalized, IPFs that do not report their calendar year 2024 reporting period data for the COVID-19 HCP measure would not be considered noncompliant for the purposes of fiscal year 2026 payment determination, and data would not be used for public reporting. If not finalized, IPFs that do not report their calendar year 2024 reporting period data for the COVID-19 HCP measure would be considered noncompliant for the fiscal year 2026 payment determination. Upon receipt of the non-compliance letter, the 30-day reconsideration period would begin.

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Inpatient and Outpatient Healthcare Quality Systems Development and Program Support

The last two measures proposed for removal are the Screening for Social Drivers of Health and Screen Positive Rate for SDOH measures. These were adopted in the fiscal year 2024 final rule. As proposed, removal of both measures would be effective beginning with the fiscal year 2026 payment determination.

The Screening for SDOH and Screen Positive measures are both voluntary for the calendar year 2024 reporting period/fiscal year 2026 payment determination. Therefore, finalized or not finalized, IPFs that do not report their calendar year 2024 reporting period data for Screening for SDOH and Screen Positive measures would not be considered noncompliant for the purposes of fiscal year 2026 payment determination, and data would not be used for public reporting.

The next slides show the IPFQR Program measures for fiscal year 2028.

Here's the first slide of measures in the program.

This slide shows the remaining measures. Please note the indicators for the four measures proposed for removal.

Next, I'll discuss the proposed updates to the ECE policy.

Under our current ECE policy, we have granted exceptions for extraordinary circumstances, such as natural disasters, that directly affected the ability of facilities to submit quality data. This year, CMS proposes to update and codify the ECE policy to specify that an ECE could be granted in the form of an extension of time for an IPF to comply with data reporting requirements, if CMS deems it an appropriate type of relief.

This slide outlines the specific changes, as proposed, including that an IPF may request an ECE within 30 calendar days of when the extraordinary event occurred.

Now, I'll provide an overview of the three requests for information.

The first RFI is regarding potential IPF star ratings.

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Inpatient and Outpatient Healthcare Quality Systems Development and Program Support

Star ratings summarize facility performance to help patients and caregivers quickly and easily understand quality of care information. The Compare tool currently displays star ratings for many provider types, but not psychiatric facilities.

CMS is seeking feedback on the development of a five-star methodology on the following topics: criteria for measure selection; suitability of measures currently in the IPFQR Program; and future use of additional data for an IPF star rating system.

The second RFI seeks input on well-being and nutrition measure concepts, which we intend to use to inform future measure development. Well-being is a comprehensive approach to disease prevention and health promotion, as it integrates mental and physical health while emphasizing preventive care to proactively address potential health issues. We are seeking comments on tools and measures that assess overall health, happiness, and satisfaction in life that could include aspects of emotional well-being, social connections, purpose, and fulfillment. We would like to receive input and comments on the applicability of tools and constructs that assess for the integration of complementary and integrative health, skill building, and self-care that would be appropriate for the IPF setting and IPFQR Program.

In addition to well-being, we are seeking similar feedback on a quality measure concept of nutrition for future quality measures. Assessment of an individual's nutritional status may include various strategies, guidelines, and practices designed to ensure individuals receive the necessary nutrients for maintaining health, growth, and overall well-being. This includes aspects of health that support or mediate nutritional status, such as physical activity and sleep. We request input on relevant aspects of nutrition for the IPF setting.

The third RFI is regarding our digital quality measurement strategy. We are considering opportunities to advance FHIR-based reporting of patient assessment data for the IPF patient assessment instrument that is currently under development.

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Inpatient and Outpatient Healthcare Quality Systems Development and Program Support

We seek feedback on questions regarding the current state of health information technology use in IPFs; how FHIR-standardized data can be generated, used, and shared; and challenges or opportunities that may arise during this integration. Thank you. We look forward to your comments. Now, I'll turn it back to Lisa.

Lisa Vinson:

Thank you, Kaleigh. We appreciate you taking the time to review this information with us today. Now, I would like to draw your attention to CMS' request for public comment.

The fiscal year 2026 IPF PPS proposed rule is available at the Federal Register website and can be accessed by clicking on the link on this slide. CMS will accept comments on the proposed rule and input on the Requests for Information until Tuesday, June 10, 2025.

If you would like to submit a comment electronically, you may do so by navigating to the proposed rule page in the Federal Register. Then, select the green button labeled Submit a Formal Comment as displayed by the image at the top of the slide in the first sub-bullet. Another option would be to click the hyperlink on this slide, which is the second sub-bullet, which will direct you to the comment page on the Regulations.gov website. On this page you will see the proposed rule image as displayed on this slide. From here, you will need to select the Comment button as denoted by the red box. Please refer to the Federal Register for additional information about alternative methods to submit comments, such as by mail.

Now, we will review some helpful resources.

This slide displays a list of acronyms that we referenced during this presentation.

CMS recommends that IPFs refer to the latest versions of IPFQR Program resources to stay up to date on program requirements. Various documents, including the IPF Specifications Manual, IPFQR Program Guide, and optional paper tools, are available for download from the [QualityNet](#) and [Quality Reporting Center](#) websites.

Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Inpatient and Outpatient Healthcare Quality Systems Development and Program Support

These can be accessed by clicking on the icons on this slide. The IPFQR Program Guide is a great place to start, as it highlights the keys to successfully participate in the IPFQR Program.

This slide provides links to several available resources. These include the Contact Change Form to update points of contact at your facility. The Listserv registration icon will allow you to receive email communications about future IPFQR Program webinars, program updates, resources, and other announcements. [The Question & Answer, or Q&A, tool icon](#) is available for you to submit general questions about the IPFQR Program or if you need clarification about any of the program measures. You may also utilize the Find An Answer function in the Q&A tool as well. The Email Support icon is the best way to reach us when you have questions about IPFQR Program eligibility, such as next steps for a newly-eligible IPF or to notify us that IPF has closed or will be closing. Lastly you can also contact the IPFQR Program Support Team via phone or fax. Both numbers are provided on this slide for your convenience.

This concludes today's webinar. Please remember that comments regarding the fiscal year 2026 IPF PPS proposed rule are due by Tuesday, June 10. You can refer to slide 36 of this presentation to review information on how to formally submit an electronic comment.

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