

**Release Notes to the Specifications Manual for National Hospital Inpatient Quality Measures-
Hospital-Based Inpatient Psychiatric Services Core Measure Set v2.0b
(11-5-2008)**

This document is intended to highlight major changes to the *Specifications Manual for National Hospital Inpatient Quality Measures-Hospital-Based Inpatient Psychiatric Services Core Measure Set*. In addition to the specific changes listed below, a number of other modifications have been made. These changes include, but are not limited to: improvements to data element definitions, changes to data element names, clarifications to improve understanding of certain sections, updates to examples, and updates to code tables and medication tables. **IT IS IMPORTANT THAT YOU READ THE ENTIRE MANUAL BEFORE BEGINNING IMPLEMENTATION!**

The notes are organized to follow the order of the Table of Contents. Within each topic section, a row represents a change beginning with general changes followed by data elements in alphabetical order. The column headings are described below:

- **Manual Section** - used to identify which section(s) listed in the Table of Contents contain the change listed. The sections are Data Dictionary, Measure Information, Missing and Invalid Data, Sampling Methods, etc.
- **Impacts** - used to identify which portion(s) of the Manual Section is impacted by the change listed. Examples are Alphabetical Data Element List, Data Element Pages, (Topic) Data Element List, Measure Information Form (MIF) and Flowchart (Algorithm). The measures that the data element is collected for are identified.
- **Description of Changes** - used to identify the section within the document where the change occurs, e.g., Definition, Data Collection Question, Allowable Value, and Denominator Data Elements.

NOTE: Additions and Deletions are listed and additions for Version 2.0b are **blue highlighted** in the corresponding document.

- **Page**- the beginning page number is from the 2.0a version of the HBIPS manual
- **Implementation Date**- Date when change is to be implemented

| Section of Manual | Impacts | Description of Changes from Pilot Test Manual | Page | Implementation Date |
|-------------------|--------------|--|------|---------------------|
| Data Dictionary | Data Element | Add the following Programming Note to the data element <i>Psychiatric Care Setting</i> : "Programming Note: The allowable value for <i>Psychiatric Care Setting</i> may be determined electronically using a source such as an Electronic Record (EHR/EMR) or hospital billing system. Hospitals must document the specific data source (field and application) that is used and make this information available to their vendor. This information must be made available to The Joint Commission upon request." | 1-72 | 10/1/2008 |

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| Measure Information Form | Measure Set Population Measures: All HBIPS Discharge Measures (HBIPS-1, 4, 5, 6, and 7) | Change the number of common data elements to determine the Initial Patient Population for Discharge Measures from “three” to “four”. | HBIPS-4 | 10/1/2008 |
| | | Add the data element <i>Psychiatric Care Setting</i> as the fourth common data element to the Initial Patient Population for Discharge Measures. | HBIPS-4 | 10/1/2008 |
| | | Add the following to the end of the sentence that describes the Initial Patient Population for the HBIPS Discharge Measures: “..., and a <i>Psychiatric Care Setting</i> = ‘Y’ or Missing (hospitals able to electronically identify the value for <i>Psychiatric Care Setting</i> may include / exclude cases during the Discharge Topic Population evaluation).” | HBIPS-4 | 10/1/2008 |
| | | Add the following to the middle of the sentence that describes the Initial Patient Population for the HBIPS Discharge Measures: “...and a <i>Psychiatric Care Setting</i> = ‘Y’ or Missing...” | HBIPS-5 | 10/1/2008 |
| | | Add a decision point <i>Psychiatric Care Setting</i> to the Initial Patient Population algorithm for Discharge Measures. <i>Psychiatric Care Setting</i> = Missing or ‘Y’ continues on into the flow. Note: This change caused the Initial Patient Population algorithm for Discharge Measures to be flowed onto two pages. | HBIPS-7 | 10/1/2008 |

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| Measure Information Form | Measure Set Population Measures: All HBIPS Event Measures (HBIPS-2 and 3) | Change the Initial Patient Population for HBIPS Event Measures sentence from “The population of the HBIPS event measures can be identified by using two data elements that are common to the event performance measures in the HBIPS set:“ to “The patient cases to be evaluated within the measure algorithm can be identified by using two data elements that are common to the event performance measures in the HBIPS set. This is also known as the HBIPS Event Topic Population.” | HBIPS-5 | 10/1/2008 |
| | | Add the following to paragraph underneath the data elements used to identify the Initial Patient Population for HBIPS Event Measures: “The HBIPS Event Topic Population is a subset of the entire Initial Patient Population for the HBIPS event measures. The entire Initial Patient Population equals the census data (<i>Psychiatric Inpatient Days - Total Leave Days</i>).” | HBIPS-5 | 10/1/2008 |
| | | Remove the last sentence from the paragraph immediately above the Initial Patient Population definition chart. The sentence to remove is: “The patients in each stratum are counted in the HBIPS Initial Patient Population for event measures of multiple measures.” | HBIPS-5 | 10/1/2008 |
| | | Change the name of the column in the Initial Patient Population definition chart from “Initial Patient Population definition” to “HBIPS Event Topic Population definition” | HBIPS-5 | 10/1/2008 |

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| Measure Information Form | Measure Set Population Measures: All HBIPS Event Measures (HBIPS-2 and 3) | Add the following note to the Initial Patient Population algorithm for Event Measures: “Note: <i>Initial Patient Population Size – Medicare Only and Non-Medicare Only</i> for HBIPS Event measures are not derived from those cases that pass through the Initial Patient Population algorithm. Instead, these data are derived from the HBIPS census data calculated by (<i>Psychiatric Inpatient Days - Total Leave Days</i>).” | HBIPS-8 | 10/1/2008 |
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| Transmission Alphabetical Data Dictionary | <i>Initial Patient Population Size – Medicare Only</i> | Change the last sentence in the fourth paragraph for the Definition from “Refer to HBIPS-2 and 3 Measure Information Forms in this manual for more information concerning how to calculate the census data.” to “The HBIPS census data are calculated by (<i>Psychiatric Inpatient Days - Total Leave Days</i>). <i>Initial Patient Population Size – Medicare Only</i> is not derived from those cases that pass through the Initial Patient Population algorithm.” | 6-23 | 10/1/2008 |
| | All Measures | Add a second note that states: “Note: For 10/1/08 through 3/31/09 discharges, it is not required to segregate Population Size data into Medicare and Non-Medicare buckets. The entire Population Size may be transmitted as Non-Medicare. If assigning all data to the Non-Medicare bucket, the Medicare bucket must be transmitted = 0. Starting with 4/1/09 discharges, it is expected that hospitals and vendors can segregate the Population Size data into Medicare and Non-Medicare buckets” | 6-24 | 10/1/2008 |
| Transmission Alphabetical Data Dictionary | <i>Initial Patient Population Size – Non-Medicare Only</i> | Change the last sentence in the fourth paragraph for the Definition from “Refer to HBIPS-2 and 3 Measure Information Forms in this manual for more information concerning how to calculate the census data.” to “The HBIPS census data are calculated by (<i>Psychiatric Inpatient Days - Total Leave Days</i>). <i>Initial Patient Population Size – Medicare Only</i> is not derived from those cases that pass through the Initial Patient Population algorithm.” | 6-25 | 10/1/2008 |

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| Transmission Alphabetical Data Dictionary | <i>Sample Size – Medicare Only</i> | Add a third note that states: “Note: For 10/1/08 through 3/31/09 discharges, it is not required to segregate Population Size data into Medicare and Non-Medicare buckets. The entire Population Size may be transmitted as Non-Medicare. If assigning all data to the Non- Medicare bucket, the Medicare bucket must be transmitted = 0. Starting with 4/1/09 discharges, it is expected that hospitals and vendors can segregate the Population Size data into Medicare and Non-Medicare buckets“ | 6-37 | 10/1/2008 |
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