

**FY 2020 Non-Measure Data Collection
Paper Tool
01-01-2018 (Q1 2018) through 12-31-2018 (Q4 2018)**

This paper tool is provided as an optional, informal mechanism to aid psychiatric facilities and hospital psychiatric units in the categorization of non-measure diagnostic data for the CMS Inpatient Psychiatric Facility Quality Reporting Program. If there are any questions or concerns regarding use of this paper tool, please contact the IPFQR Program Support Contractor at IPFQualityReporting@area-m.hcqis.org.

Non-Measure Data Annual Collection

- Diagnostic code grouping for the purpose of reporting non-measure data utilizes the categories developed for the Clinical Classifications Software (CCS) under the Healthcare Cost and Utilization Project (H-CUP) by the Agency for Healthcare Research and Quality (AHRQ), with codes found at: <http://www.hcup-us.ahrq.gov/toolssoftware/ccs/AppendixASingleDX.txt>.
- Categorization should be based on the primary diagnosis at discharge.

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| Total Discharges Calendar Year 2018 |
| |

| Age Strata | Total Discharges Calendar Year 2018 |
|---------------------------------|--|
| Children (≥ 1yr. and < 13 yrs.) | |
| Adolescent (≥ 13 and < 18 yrs.) | |
| Adult (≥ 18 yrs. and < 65 yrs.) | |
| Older Adult (≥ 65 yrs.) | |

| Diagnostic Categories | Total Discharges Calendar Year 2018 |
|---|--|
| Anxiety disorders (651) | |
| Delirium, dementia, and amnesic and other cognitive disorders (653) | |
| Mood disorders (657) | |
| Schizophrenia and other psychotic disorders (659) | |
| Alcohol-related disorders (660) | |
| Substance-related disorders (661) | |
| Other diagnosis – Not included in one of the above categories | |

| Payer | Total Discharges Calendar Year 2018 |
|--------------|--|
| Medicare | |
| Non-Medicare | |

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PRA DISCLOSURE STATEMENT

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1171. The time required to complete this information collection is estimated to average 2.5 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850