

Report on Medicare Compliance Volume 27, Number 23. June 25, 2018

Provision in IPPS Rule Would Cut Payment Ties to Key Quality Measures

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In about six weeks, hospitals will find out if they will be free of some quality reporting and its ties to payment. The final 2019 inpatient prospective payment system (IPPS) regulation will address CMS's proposal to reduce and "de-duplicate" quality measures, including measures in the Inpatient Quality Reporting (IQR) and Value Based Purchasing (VBP) programs.

"CMS says it's trying to not just have measures for the sake of having measures, but to make sure its measures are meaningfully contributing to the overall quality of care," says Washington, D.C., attorney Daniel Hettich, with King & Spalding. This is part of an initiative called Meaningful Measures.

The changes in the proposed IPPS regulation, which was published in the May 7 Federal Register, affect multiple quality programs, including:

- (1) IQR, which collects and publishes inpatient data on various measures, including health care-associated infections, patient safety, mortality outcomes and process of care.
- (2) VBP, which adjusts inpatient payments according to hospitals' performance on a similar set of measures.

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