

**Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program
Online Data Entry Tool Content for Substance Use Measure Collection
Fiscal Year (FY) 2020 and Subsequent Years**

IPFs should complete this form using the fillable PDF format and submit via email to:
IPFQualityReporting@hcqis.org.

CCN	<input type="text"/>	Facility Name	<input type="text"/>
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Substance Use - SUB-1: Alcohol Use Screening

NUMERATOR CY 2018

The number of patients who were screened for alcohol use using a validated screening questionnaire for unhealthy drinking within the first three days of admission

DENOMINATOR CY 2018

The number of hospitalized inpatients 18 years of age and older

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Substance Use - SUB-2: Alcohol Use Brief Intervention Provided or Offered

NUMERATOR

CY 2018

The number of patients who received or refused a brief intervention

DENOMINATOR

CY 2018

The number of hospitalized inpatients 18 years of age and older
who screen positive for unhealthy alcohol use or an alcohol use disorder
(alcohol abuse or alcohol dependence)

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Substance Use - SUB-2a: Alcohol Use Brief Intervention

NUMERATOR CY 2018

The number of patients who received a brief intervention

DENOMINATOR CY 2018

The number of hospitalized inpatients 18 years of age and older
who screen positive for unhealthy alcohol use or an alcohol use disorder
(alcohol abuse or alcohol dependence)

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Substance Use - SUB-3: Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge

NUMERATOR CY 2018

The number of patients who received or refused at discharge
a prescription for medication for treatment of alcohol or drug use disorder OR
received or refused a referral for addictions treatment

DENOMINATOR CY 2018

The number of hospitalized inpatients 18 years of age and older identified
with an alcohol or drug use disorder

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Substance Use - SUB-3a: Alcohol and Other Drug Use Disorder Treatment at Discharge

<i>NUMERATOR</i>	CY 2018
The number of patients who received a prescription at discharge for medication for treatment of alcohol or drug use disorder OR a referral for addictions treatment	<input type="text"/>

<i>DENOMINATOR</i>	CY 2018
The number of hospitalized inpatients 18 years of age and older identified with an alcohol or drug use disorder	<input type="text"/>

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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 **0938-1022 (Current expiration: 07/31/2019)**. The time required to complete this information collection is estimated to average 10 minutes 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 estimates(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, MD 21244-1650.