End-Stage Renal Disease (ESRD) Quality Reporting System (EQRS) Data Management Guidelines

eqrsoct
Outreach, Communication and Training

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Document Control

©	Information
Sequence Number	0005
Document Type	Guidelines
Release Number	7.0
Release Date	September 12, 2023

Document Updates

Additions	• Transplant Editor Role • Transplant Dashboard • Peritonitis Infections Module • Dashboard Reports
Removals	Not applicable

Contributors

A special "thank you" goes to the following individuals and groups for their contribution to the development of the EQRS Data Management Guidelines:

Centers for Medicare & Medicaid Services (CMS)	Delia Housel and Kateisha Martin EQRS Systems Leads
ESRD Outreach, Communication, and Training Contractor (EOCT)	Jane Chaine, Communications Director, HSAG
ESRD Networks, Programs, and Data Managers	

Table of Contents

Overview and Introduction

EQRS Overview

The End Stage Renal Disease (ESRD) Quality Reporting System (EQRS) is a cloud-based data-collection system that is mandated by the Centers for Medicare & Medicaid Services (CMS) to enable dialysis facilities to meet Section 494.180(h) of the 2008 updated Conditions for Coverage for ESRD Dialysis Facilities. The updated conditions call for the electronic submission of administrative and clinical data by all Medicare-certified dialysis facilities in the U.S. The system is designed to help the renal community receive more complete and accurate data about dialysis patients, and the system is used to collect clinical performance measures data from dialysis facilities.

EQRS provides the dialysis facilities and CMS with a comprehensive view of the ESRD community and programs. This project uses open-source and test-driven development. It aligns with CMS' strategic vision to advance health equity, expand access to coverage and care, and drive high-quality person-centered care. EQRS is used by CMS and the renal community to:

- Monitor the status of transplant activities, dialysis activities, and Medicare utilization (inpatient stays and outpatient dialysis bills) of ESRD patients and their Medicare providers.
- Calculate Medicare ESRD coverage periods, dialysis coverage periods, clinical dialysis periods, and transplant periods for renal patients.
- Extract data for program analysis, policy development, and some epidemiological research.
- Serve as a repository of renal information about non-Medicare patients resident in the United States, and is one of the primary sources of data for the United States Renal Data System (USRDS).

EQRS is the system that supports the ESRD Quality Incentive Program (QIP), a legislatively mandated, value-based purchasing program. Section 153(c) of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) added section 1881(h) of the Social Security Act which establishes the requirements for the QIP. EQRS supports QIP by calculating facility performance scores for public use. MIPPA requirements for QIP include the following:

- Selecting measures on which facilities will be scored
- Establishing performance standards that apply to individual measures
- Specifying a performance period with respect to a payment year (PY)
- Developing a methodology for assessing the Total Performance Score (TPS) of each facility based on its performance during the performance period
- Applying an appropriate payment reduction to facilities that do not meet or exceed a minimum TPS
- Allowing facilities an opportunity to review scores before public dissemination
- Reporting scores publicly through facility-posted certificates and a CMS web-based list

For additional information on the ESRD QIP, refer to the CMS.gov website: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP

EQRS Introduction

More than 15,000 people from more than 8,100 renal dialysis facilities and approximately 224 renal transplantation centers use EQRS. These users process and access information that include (but are not limited to) facility details, patient admissions/discharges, CMS forms, and patient clinical data. Additionally, other ESRD stakeholders, including ESRD Network representatives, use EQRS to support data accuracy activities, reinforce quality improvement steps, and provide technical assistance to dialysis facilities.

To help ensure that all data reported via EQRS accurately reflect the quality of patient care, it is vital that all EQRS users understand and follow standardized processes when completing specific tasks.

This document describes standardized data management processes created, reviewed, and approved by CMS. EQRS users should reference these guidelines when overseeing data entry and reporting efforts.

Tasks to be completed by EQRS users and submission timelines are identified in this EQRS Data Management Guidelines document. These tasks fall into three categories:

1. **Data Monitoring** consists of policies, processes, and practices that address the accuracy, validity, completeness, timeliness, and integrity of data (data quality).
2. **Quality Measure Data Monitoring** quantifies quality of care through comparison to a criterion. Quality measurements typically focus on structures or processes of care that have a relationship to positive health outcomes.
3. **Data Quality Managing** consists of the business processes that ensure the integrity of an organization's data during collection, application (including aggregation), warehousing, and analysis.[1]

Accessing Training Materials

Step-by-step instructions regarding how to complete procedures highlighted in this document can be accessed via https://mycrownweb.org/education/.

Using EQRS

EQRS allows users to enter and manage data in the following areas:

- Patient information (including demographics, treatment and admission records)
- Facility information (including contact information, hours, and types of services)
- Personnel information (including current staff members and job titles)
- Clinical Data
- Clinical Depression and Follow-up
- Vaccinations
- Peritonitis Infections

---

[1] Source of definitions: http://library.ahima.org/PB/DataQualityModel#.XBPCHmhKhEY

EQRS allows users to generate reports in the following areas:

- Patient Events Report
- Patient Roster Report
- Facility Form 2744

Using the ESRD QIP Application in EQRS

All EQRS users with access to the QIP application within EQRS can participate in ESRD QIP preview period activities, including viewing and downloading ESRD QIP preview period scores and reports. EQRS users with access to the QIP application as a Facility or Corporate Point of Contact (POC) can submit inquiries to CMS about their preview period scores and reports during the annual preview period. Additionally, users with a QIP role can view and download ESRD QIP Performance Score Certificates once they are available after the preview period. For additional guidance regarding utilization of the ESRD QIP application within EQRS, refer to the *ESRD QIP User Interface Quick Start Guide* at https://mycrownweb.org/wp-content/uploads/2023/07/PY-2024-ESRD-QIP-UI-Quick-Start_FINAL508.pdf.

What is Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP)?

HARP is a secure identity management portal provided by CMS. Creating an account via HARP provides users with a user ID and password that can be used to access many CMS applications. HARP is also used to support the identity vetting process by requiring users to complete a Two-Factor Authentication (TFA) process that helps grant users access to CMS applications after they have successfully submitted identity documentation to an authentication tool. During the account registration process, users must select a TFA code delivery method. Security Codes are submitted to designated devices to help authenticate users' access.
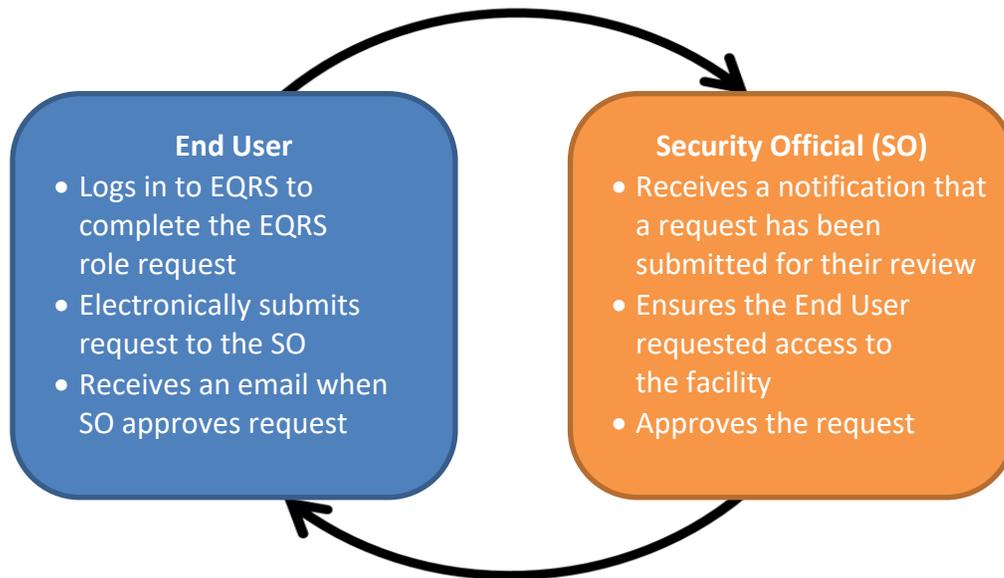
HARP provides a single location for users to:

- Modify their user profile.
- Change their password.
- Update their Challenge Question.
- Add or remove TFA devices.

After establishing a HARP account, a user must log in to EQRS to request access to the user interfaces within EQRS.

The following image outlines the process required to request a role in EQRS:

End User
- Logs in to EQRS to complete the EQRS role request
- Electronically submits request to the SO
- Receives an email when SO approves request

Security Official (SO)
- Receives a notification that a request has been submitted for their review
- Ensures the End User requested access to the facility
- Approves the request

Overview of EQRS Roles

- End User:

  o Performs tasks within CMS applications, including EQRS and QIP
  o May have a user role and scope over multiple organizations

- Security Official:

  o Can serve as the SO over multiple organizations
  o Approves or denies additional SO and End User role requests for a specific organization
  o Must have an End User role to perform tasks in the EQRS application
  o Cannot approve their own End User role request

All EQRS users must complete a HARP account setup. Below are resources to assist with registering for a HARP account:

- Register for a HARP account via https://harp.cms.gov/register/profile-info.
- Access EQRS via https://eqrs.cms.gov/globalapp/.
- Access step-by-step HARP account registration and EQRS role request instructions via https://mycrownweb.org/harp-training/.

Account Maintenance

Due to the sensitivity of the data stored in EQRS, all users must first complete a HARP account registration process to establish and maintain a user ID. Additionally, users must use EQRS to request and maintain roles, as well as access user interfaces within EQRS. Users' roles and scope are approved by their facility's assigned SO.

In 2021, CMS implemented a security measure which disables the EQRS user role(s) for users who have not logged into their EQRS account within 60 days from their last login. EQRS users who are getting close to the 60-day inactivity deadline receive EQRS login inactivity alerts via email notification at days 50, 53, 55, 57, and 59. Users must login to their EQRS account to reset this timer.

To reactive their EQRS user role(s), users must login to EQRS using their HARP account credentials. Step-by-step instructions on how to re-request your EQRS user role(s) is covered on slides 36–45 of the HARP Training, available on MyCROWNWeb: https://mycrownweb.org/wp-content/uploads/2021/09/HCQIS-Access-Roles-and-Profile-HARP-Training_updated09012021.pdf

End User Roles and Responsibilities

End User Roles

There are three types of roles for an End User. An End User can have more than one role.

- **Viewer** – Views previously submitted data
- **Editor** – Enters data into EQRS
- **Batch** – Electronically uploads data into EQRS on behalf of facilities within the user's scope

In 2023, CMS added the Transplant Editor role to EQRS to allow transplant centers to track waitlisted patients and admit and discharge patients within their transplant center. This new role allows the user to view and print Form CMS-2746 or the ESRD Death Notification, and Form CMS-2728 or the ESRD Medical Evidence Report/Patient Registration for patients nationwide. The Transplant Editor can edit Form CMS-2744 or the ESRD Medical Information System ESRD Facility Survey. Transplant editors can contact their ESRD Network for assistance with completing certain tasks within EQRS.

EQRS Data Manager

EQRS Data Managers oversee data entries. A Data Manager is defined as any authorized user who **monitors** data quality, **measures** data effectiveness, and **manages** data reliability, accuracy, and timeliness.

There are three tiers of Data Managers who complete monitoring, measuring, and managing activities to support successful reporting of data via EQRS:

- **Tier 1 Data Managers include dialysis facility and transplant center users and Electronic Data Interface (EDI) submitters.** Tier 1 Data Managers are individuals or groups that manually enter patient and facility details directly into EQRS. Tier 1 Data Managers can also be affiliated with an organization that electronically uploads information on behalf of a facility.
- **Tier 2 Data Managers include ESRD Network-level users.** Tier 2 Data Managers are individuals or groups that provide technical data reporting assistance. Tier 2 Data Managers primarily

monitor data reporting efforts to foster accurate and timely submissions by Tier 1 users. Additionally, Tier 2 Data Managers input data directly into EQRS to support data reporting requirements. Tier 2 users analyze reported data to determine appropriate support activities for improving quality of both data and healthcare outcomes.

- **Tier 3 Data Managers include data support contractors such as those responsible for the Center for Clinical Standards and Quality (CCSQ) Service Center and the Application Development Organizations (ADOs)**. Tier 3 Data Managers are individuals or groups that support CMS data reporting needs, as well as monitor and analyze EQRS data entry. Additionally, individuals or groups in this classification support Tier 1 and Tier 2 Data Managers.

In their respective roles, Data Managers:

- Foster timely and accurate reporting by analyzing data submission and quality, using EQRS reports.
- Assist with or oversee data entry for dialysis facilities, kidney transplantation centers, and Veterans Health Administration (VHA) facilities.
- Work to resolve Action List discrepancies.
- Generate, review, and finalize Form CMS-2744 ESRD Facility Survey submissions.
- Monitor compliance with ESRD QIP reporting and performance measures.
- Assist CMS and other ESRD stakeholders described in this document with **monitoring**, **measuring**, and **managing** all EQRS data.

Tasks authorized to be performed by specific Data Managers are identified in the following sections of these EQRS Data Management Guidelines.

Chapter 1
Data Monitoring
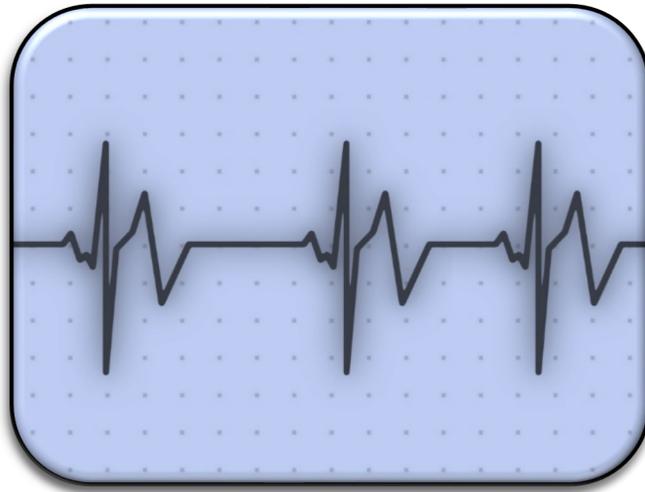
Data Monitoring

EQRS has five tasks that support efforts to promote data quality through data monitoring. EQRS also offers multiple reports and search capabilities to allow users to monitor and audit data entry efforts.

Section	Task	Authorized Tier
Facility Dashboard	Monitor Facility Dashboard	Tier 1 and Tier 2
Facilities	Monitor Facility In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH CAHPS) Attestations	Tier 1, Tier 2, and Tier 3
	Monitor Facility Summary	Tier 1 and Tier 2
	Monitor Saved Facilities	Tier 2
Personnel	Review Personnel Information	Tier 1

This chapter provides further details about data monitoring and the timeframes for performing required tasks to support data validity.

Note: An overview of the tiers is in the EQRS Data Manager section on Page 6.
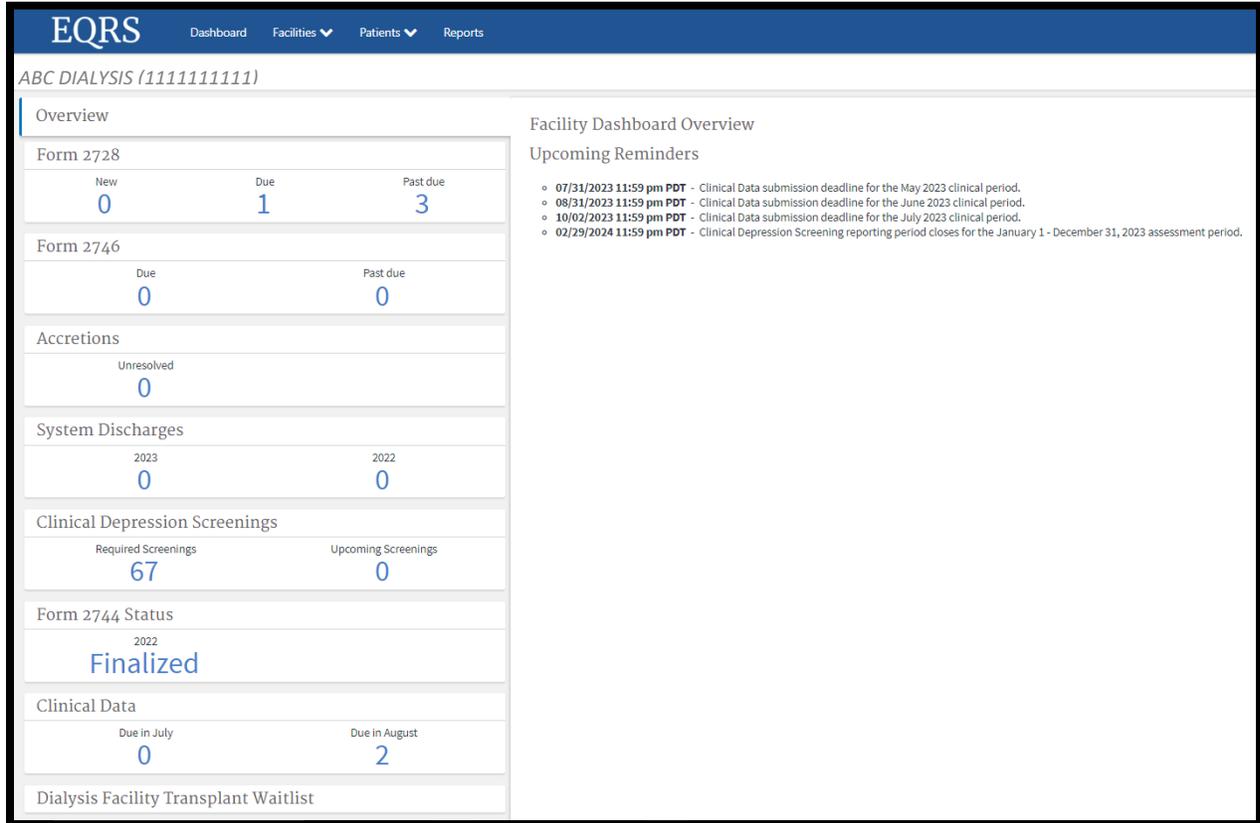
Facility Dashboard

Monitor Facility Dashboard

Key Points	The Facility Dashboard allows users to view: • Upcoming data submission reminders in EQRS. • A list of outstanding deliverables for the facilities within their scope. • The number of outstanding items to view more detail on required submissions. • Transplant waitlist information on all living patients that are on a waitlist and contact information for those transplant centers for facilities within their scope.

Frequency	Tier 1 Data Managers monitor Facility Dashboard data at least weekly to help ensure that required data are completed within a timely manner.

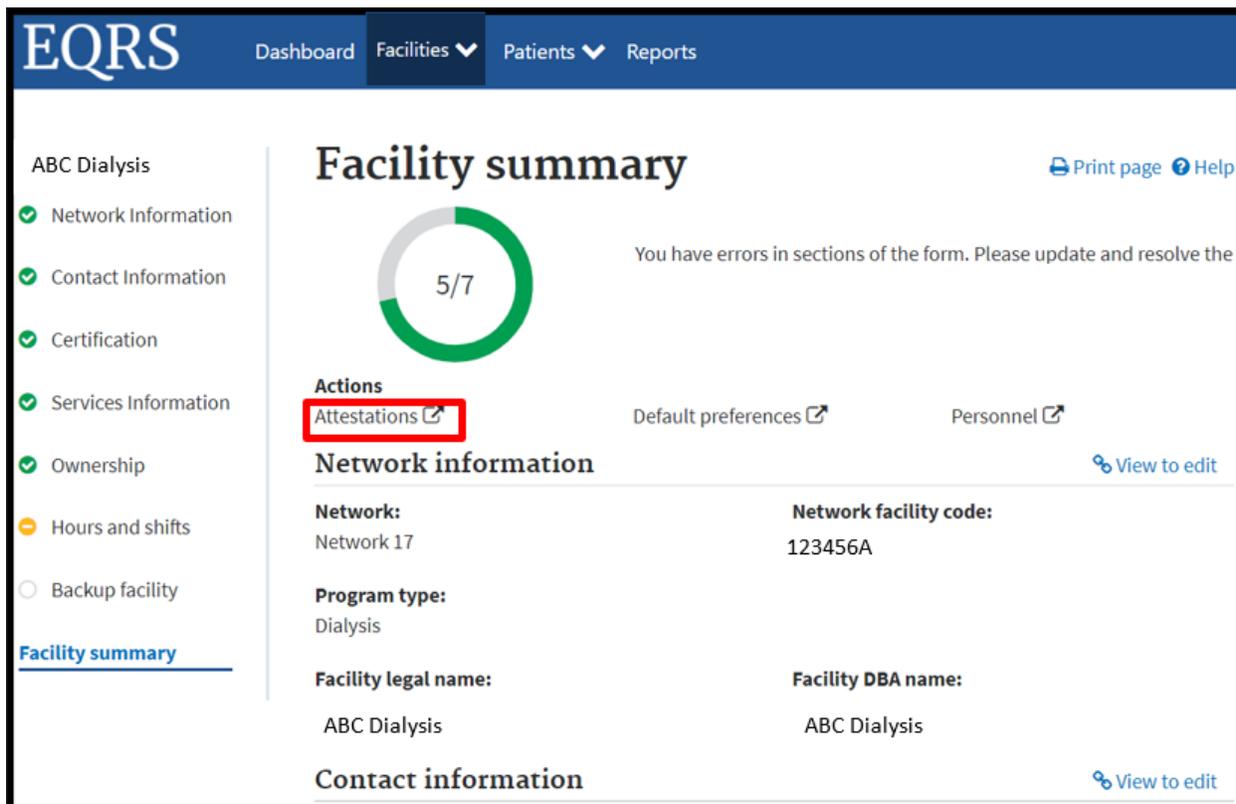**Figure 1: Example of Facility Dashboard Screen**

Facilities

Monitor Facility ICH CAHPS Attestations

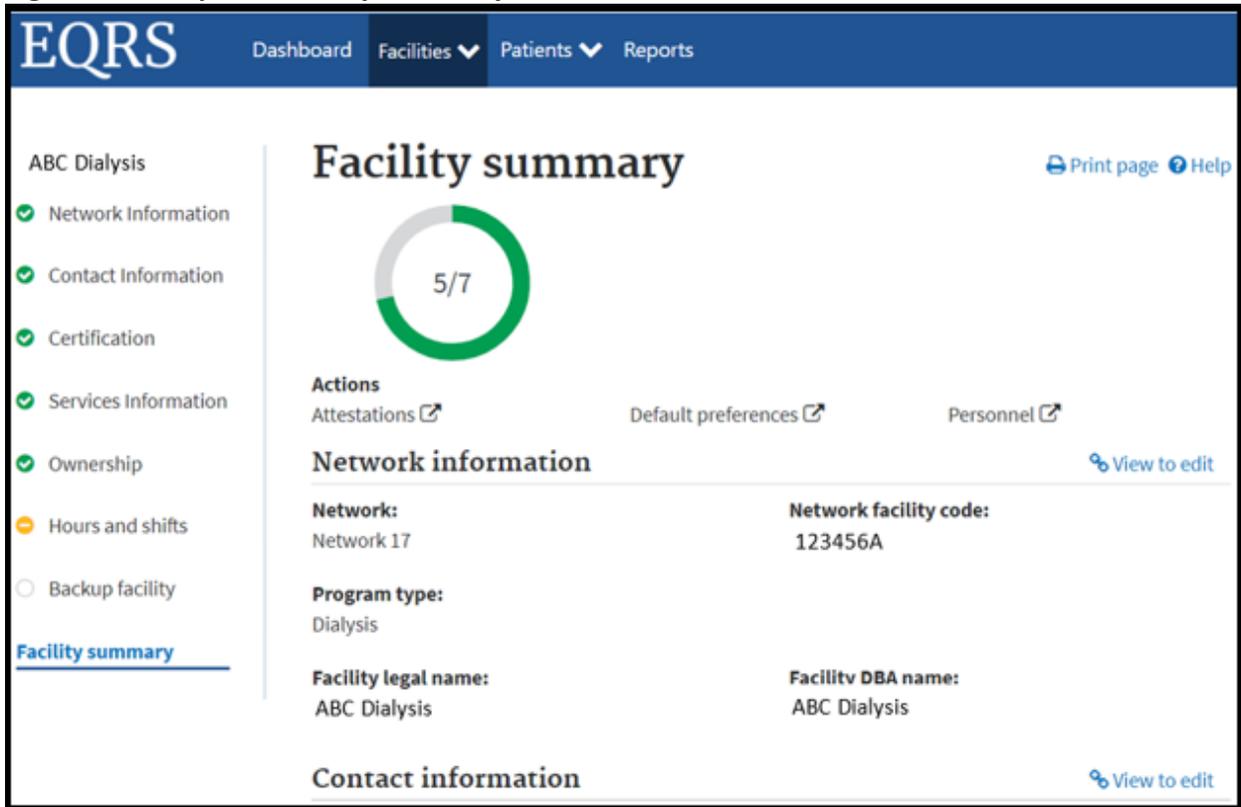| Key Points	• Facility ICH CAHPS Attestation supports the ESRD QIP. • The Facility ICH CAHPS Attestation submission period is typically the first two months of each year. • Tier 1 and Tier 2 Data Managers use EQRS to monitor the ICH CAHPS Attestation statuses of facilities within their scope.
Frequency	Tier 1 Data Managers monitor Facility ICH CAHPS Attestations in EQRS to help ensure that required data are completed between January 1 and the end of the Attestation submission period for each year.

Figure 2: Facility Attestations Link Screen

Monitor Facility Summary

Key Points	• EQRS contains details related to facilities' ownership details and history, services, certifications, and number of Medicare-certified stations. • Information entered on the *Facility Summary* screen supports the ESRD QIP, Dialysis Facility Reports, Care Compare, and Form CMS-2744 ESRD Facility Survey. • Tier 1 and Tier 2 Data Managers assist with promoting data accuracy by using EQRS to monitor facility details to ensure that EQRS contains up-to-date information.
Frequency	Tier 1 and Tier 2 Data Managers ensure that all necessary facility updates are applied annually by December 31 in support of the Form CMS-2744 ESRD Facility Survey.
Additional Guidance	The following link has guidance on how to *View a Facility* in EQRS: https://mycrownweb.org/?smd_process_download=1&download_id=7685

Figure 3: Example of Facility Summary Screen

Monitor Saved Facilities

Key Points	• Tier 2 Data Managers are authorized to Add and Save new facilities and facility details in EQRS. • Tier 2 Data Managers monitor facility status to ensure that Saved facilities are updated with required information. • Users at facilities that are in a Saved status cannot submit either patient or facility data.
Frequency	Tier 2 Data Managers monitor facility data entry to ensure that all Saved facilities are submitted (fully processed) in EQRS within 30 days.

Figure 4: Example of Add/Save New Facility Screen

Personnel

Review Personnel Information

Key Points	- EQRS allows Tier 1 and Tier 2 Data Managers to list key personnel at facilities within their scope. - Personnel entered will display on other screens: - Facility ICH CAHPS Attestation - Treatment Summary - Form CMS-2728 - Form CMS-2746 - ESRD stakeholders use personnel data for various communication efforts. - Tier 1 Data Managers review Personnel Details to ensure staff information is current.
Frequency	Tier 1 Data Managers review *Personnel Information* at least quarterly.

Additional Guidance	The following link has guidance on how to *Add Facility Personnel* in EQRS: https://mycrownweb.org/?smd_process_download=1&download_id=7685

Figure 5: Example of Personnel Details Screen

View existing personnel

View the personnel record and make changes if needed

Help

✓ Personnel information added successfully
Please review your information below.

Personnel Information   Edit

Salutation: Personnel NPI:
Dr.   7234567890
First Name: Credentials:
Meredith   UPIN:
Middle Initial: Organizational Unique Personnel Identifier:
Last Name:
Grey
Suffix:

Chapter 2
Quality Measure
Data Monitoring

Quality Measure Data Monitoring

CMS works to ensure that EQRS contains reports that promote data accuracy through data measuring. EQRS currently contains two patient data specific reports and one clinical data report. These reports contain search capabilities that allow users to measure verified data and determine if specific data submission requirements were met. Additional information on how to generate these reports is described below. CMS is actively working on adding additional reports to the Dashboard Reports screen in EQRS to better support facilities with data entry activities and trending.

Note: An overview of the Tiers is in the EQRS Data Manager section on page 6.

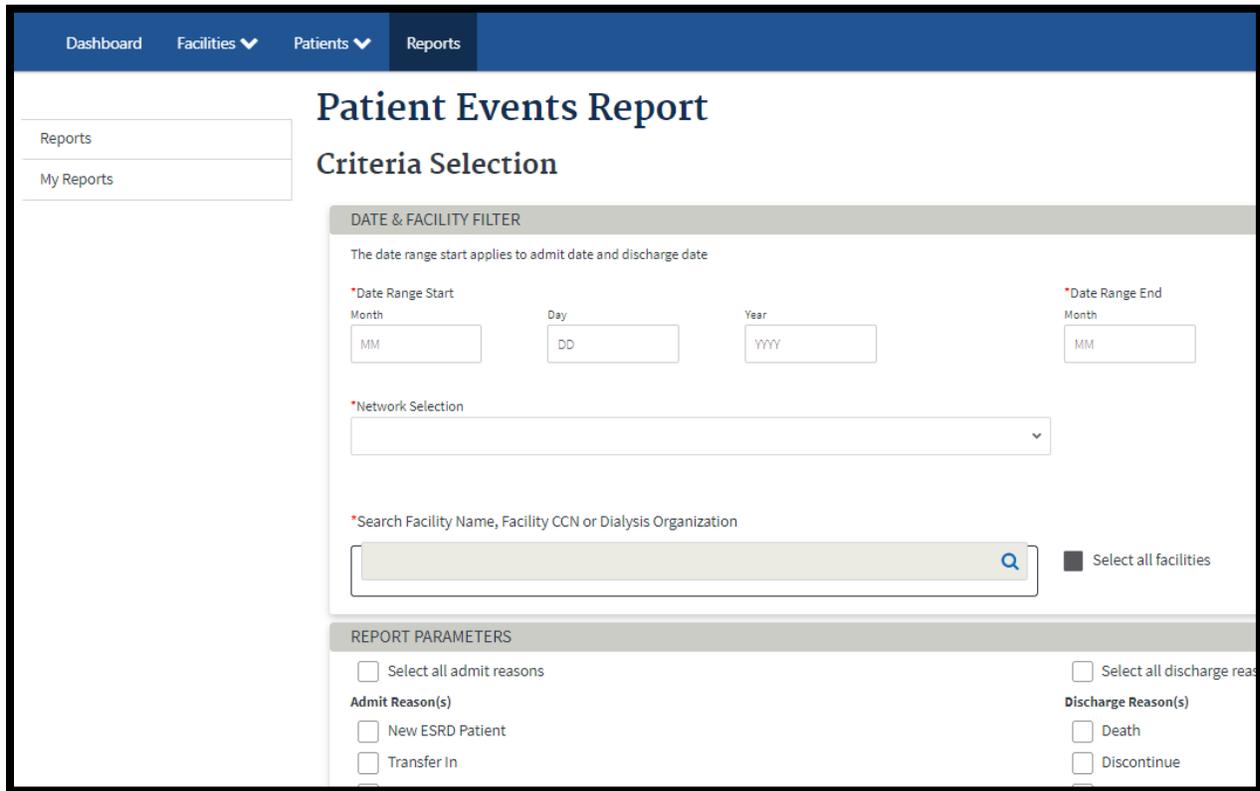| Report Type	Task	Authorized Tier
Patient Events Report	Monitor all patient events in EQRS	Tier 1, Tier 2, and Tier 3
Patient Roster Report	Monitor and review patients admitted to the facility or facilities	Tier 1, Tier 2, and Tier 3
Facility Clinical Data Dashboard Reports*	Monitor and review clinical data submitted by a facility in EQRS	Tier 1, Tier 3, Tier 3

*Dashboard reports are available and displayed in EQRS based on the user's EQRS role. Additional dashboards with various reports will be added periodically.

EQRS Reports

Generate Patient Events Report

|	
Key Points	- The Patient Events Report identifies all patient events in EQRS for a selected facility as of a specific date range. - EQRS allows Tier 1, Tier 2, and Tier 3 Data Managers to generate *Patient Events Reports* to verify and monitor patient admissions and discharges. - Tier 1, Tier 2, and Tier 3 Data Managers cross-reference *Patient Events Reports* to troubleshoot admit and discharge related errors in EQRS.
Frequency	Tier 1 Data Managers should review the *Patient Events Report* monthly to ensure all patient admissions and discharges are accounted for in the facility in EQRS.
Additional Guidance	To access the *Patient Events Report*, log into EQRS and click on the Reports tab in the menu at the top of the screen.

Figure 6: Example of Patient Event Report Screen

Generate Patient Roster Report

Key Points	• The Patient Roster Report allows users to generate, download, and print a report which includes all patients present at the selected facility(ies) within the user scope as of a specific date. • EQRS allows Tier 1, Tier 2, and Tier 3 Data Managers to generate *Patient Roster Reports* to verify patient census, treatment and admission information based on a specific date.
Frequency	Tier 1 Data Managers should review the *Patient Roster Report* monthly to ensure patient admission and treatment information is correct in EQRS.
Additional Guidance	To access the *Patient Roster Report*, log into EQRS and click on the Reports tab in the menu at the top of the screen.

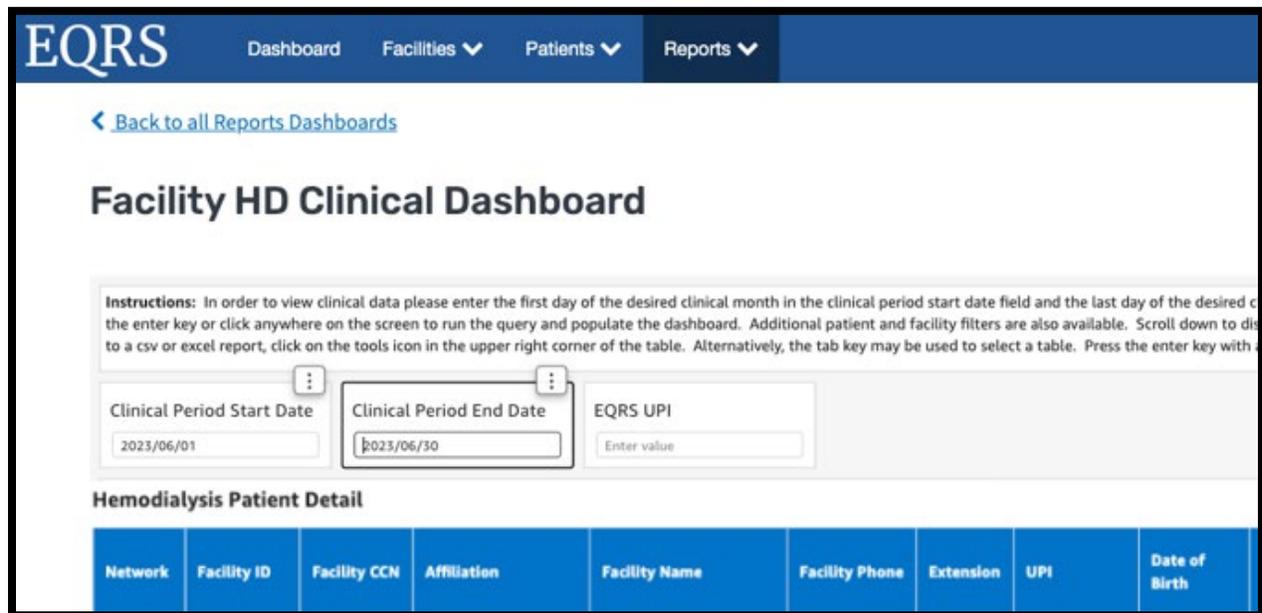**Figure 7: Example of Patient Roster Report Screen**
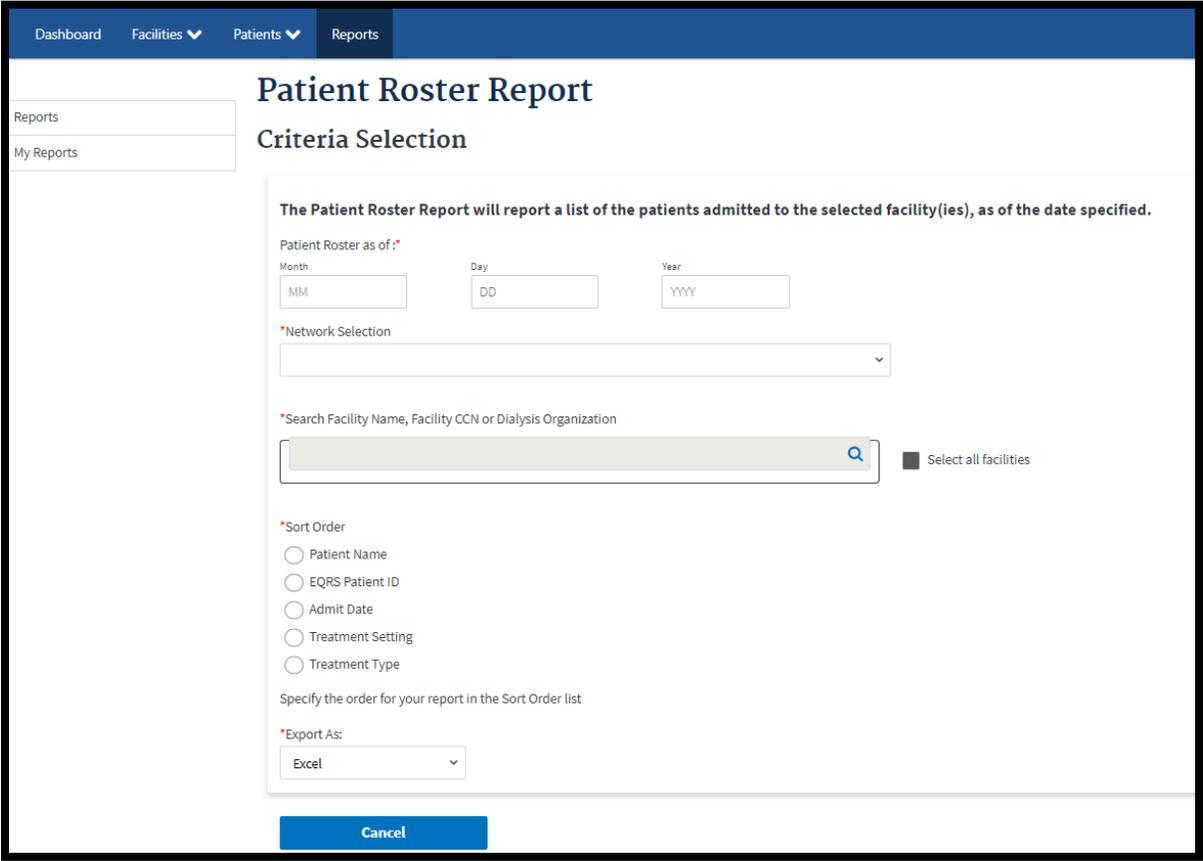
Generate Facility Hemodialysis (HD) Clinical Dashboard and Facility Peritoneal Dialysis (PD) Clinical Dashboard Reports

Key Points	• Users can generate three facility clinical dashboard reports:
	    ○ Patient Detail Report
	    ○ Facility Aggregate Report
	    ○ Averages Report
	• The facility clinical dashboard allows users to generate, download and print reports that contain clinical data such as laboratory and medication values for an entire facility or for a select patient for a specific date range.
	• The facility clinical dashboard is available for both HD and PD data.
	• EQRS allows Tier 1, Tier 2 and Tier 3 Data Managers to generate Facility Clinical Dashboard reports to verify clinical data that was submitted in EQRS for a specific date range.

Frequency	Tier 1 Data Managers should review the facility clinical dashboard data monthly and prior to the end of the month to ensure clinical data is correctly submitted in EQRS.
Additional Guidance	To access the facility HD or PD clinical dashboards, log into EQRS and click on Reports Dashboards from the Reports tab in the menu at the top of the screen.

Figure 8: Example of Facility Clinical Dashboard Screen

Chapter 3
Data Managing

Data Managing

The following user tasks support efforts to promote accurate and timely data submissions through data managing. This chapter provides additional information about data managing and the timeframes for performing required tasks to support accurate and timely data submissions in EQRS.

Section	Task	Authorized Tier
Facilities	Add New Facility	Tier 2
	Submit Facility ICH CAHPS Attestations	Tier 1
	Update Facility Summary	Tier 1 and Tier 2
Patients	Admit and Discharge Patients	Tier 1 and Tier 2*
	Delete and modify Form CMS-2728 and modify Form CMS-2746	Tier 3
	Complete Form CMS-2728 and Form CMS-2746	Tier 1, Tier 2*
	Modify Form CMS-2728 and modify and delete Form CMS-2746	Tier 2**
	Add Vaccination Data	Tier 1
	Add Peritonitis Infection Data	Tier 1
Personnel	Add Key Personnel	Tier 1 and Tier 2
Clinical	Manage Clinical Data and Clinical Depression Screening and Follow-up	Tier 1
Action List	Resolve Action List Accretions	Tier 1, Tier 2, and Tier 3
Form 2744	Add New Form CMS-2744A and Form CMS-2744B	Tier 1 and Tier 2**
	Accept/Reject/Finalize Form CMS-2744	Tier 2
	Add New Form CMS-2744A for Closed Facilities	Tier 1 and Tier 2**
	Re-open finalized Form CMS-2744 for modifications	Tier 2

*Tier 2 Data Managers are authorized to complete patient admissions/discharges, update records, and submit CMS forms for dialysis facilities, kidney transplant and VHA centers.

**Tier 2 Data Managers can provide assistance with Form CMS-2744, including re-opening finalized Form CMS-2744 for Tier 1 Data Managers for form modifications.
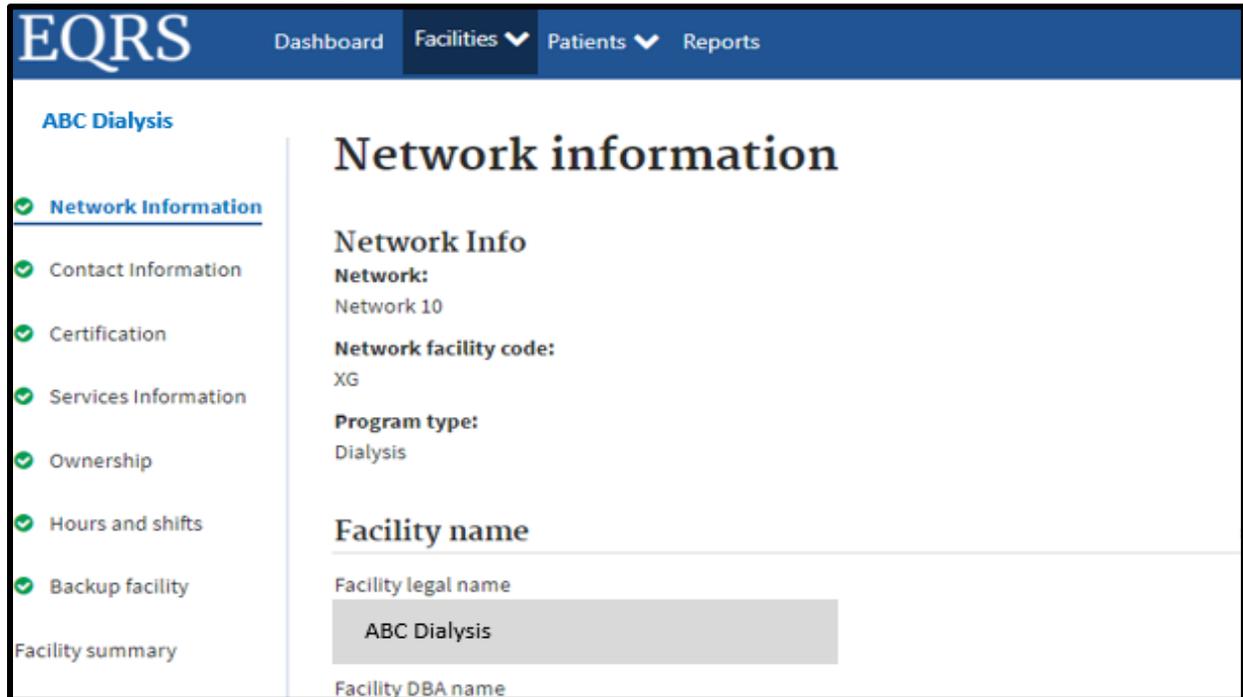
Note: An overview of the Tiers is in the EQRS Data Manager section on page 6.

Facilities

Add New Facility in EQRS

Key Points	• The Facility Summary section in EQRS contains details regarding a facility's demographics, ownership, services, certifications, hours, and shifts.
	• EQRS allows Tier 2 Data Managers to add new dialysis and kidney transplant facilities.
	• Pending CMS Certification Number (CCN):
	    o EQRS receives data from facilities with a pending certification status.
	    o Tier 2 Data Managers shall enter pending facilities into EQRS.
	    o Tier 2 Data Managers shall complete the required fields and select the Provider Use Type as Pending Cert in EQRS.
	    o Tier 2 Data Managers shall leave the CCN blank in EQRS until the Division of Survey and Certification provides a CCN to the facility.
	    o Tier 2 Data Managers shall enter the assigned CCN and change the Provider Use Type to the appropriate facility type as indicated in the certification letter.
	• Tier 1 and Tier 2 Data Managers must work together to ensure that all necessary documents are obtained to add a new facility in EQRS.

Frequency	Tier 2 Data Managers add dialysis and kidney transplant facilities within 1 business day of receiving notification from a new facility.

Figure 9: Add New Facility Screen

Submit Facility ICH CAHPS Attestations

Key Points	• Facility ICH CAHPS Attestations are used to support the ESRD QIP. • Tier 1 Data Managers manually enter or electronically upload data to the Facility Attestation screen. • Tier 1 Data Managers support the ESRD QIP by working to ensure that accurate Facility Attestation data are reported by CMS-designated submission deadlines.
Frequency	Tier 1 Data Managers use EQRS to manage and support Facility ICH CAHPS Attestation submission requirements between January 1 and the end of the attestation submission period for each year (as directed by the ESRD Prospective Payment System final rule per payment year). The ICH CAHPS Attestation submission period typically occurs in the first two months of the year.

Figure 10: Facility ICH CAHPS Attestation Screen

Review and Update Facility Summary Details

Key Points	• After facilities are added in EQRS, the system allows Tier 1 and Tier 2 Data Managers the ability to update details for facilities that are within their scope. • Tier 1 Data Managers can update most fields; however, they must work with Tier 2 users to edit disabled fields. • Changes made to the Facility Summary section appear immediately in EQRS.
Frequency	Tier 1 Data Managers should review facility details for accuracy at least annually and apply necessary updates, as needed.

Figure 11: Facility Summary Screen

Patients

Admit and Discharge Patients

Key Points	• Chronic ESRD patients dialyzing at outpatient dialysis facilities as a permanent patient must be admitted to a dialysis facility in EQRS. Acute dialysis patients should not be entered into EQRS. • Patients who receive a kidney transplant at a kidney transplant center must be admitted to a kidney transplant center in EQRS. • Tier 1 Data Managers admit and discharge ESRD patients to and from dialysis facilities, transplant centers and VHA facilities within their scope. • See the Admit and Discharge Reasons on page 36 for more details.
Frequency	• Tier 1 Data Managers admit and discharge patients to and from their respective dialysis and VHA facilities within 5 business days of first treatment and discharge within 5 business days of last treatment. • Tier 1 Data managers admit patients to their respective kidney transplant center within 5 business days from the date of transplant. • Tier 2 Data Managers can assist with the admissions and discharges for dialysis facilities, transplant centers and VHA facilities when those facilities do not have EQRS editors. Tier 2 Data Managers admit and discharge patients to and from their respective VHA facilities within two business days of notification and discharge within two business days of last treatment notification.
Additional Guidance	The following links provide guidance on how to admit and discharge ESRD patients in EQRS: • https://mycrownweb.org/?smd_process_download=1&download_id=7685 • https://mycrownweb.org/?smd_process_download=1&download_id=7763

Figure 12: Admit Patient Screen

Complete Form CMS-2728 and Form CMS-2746

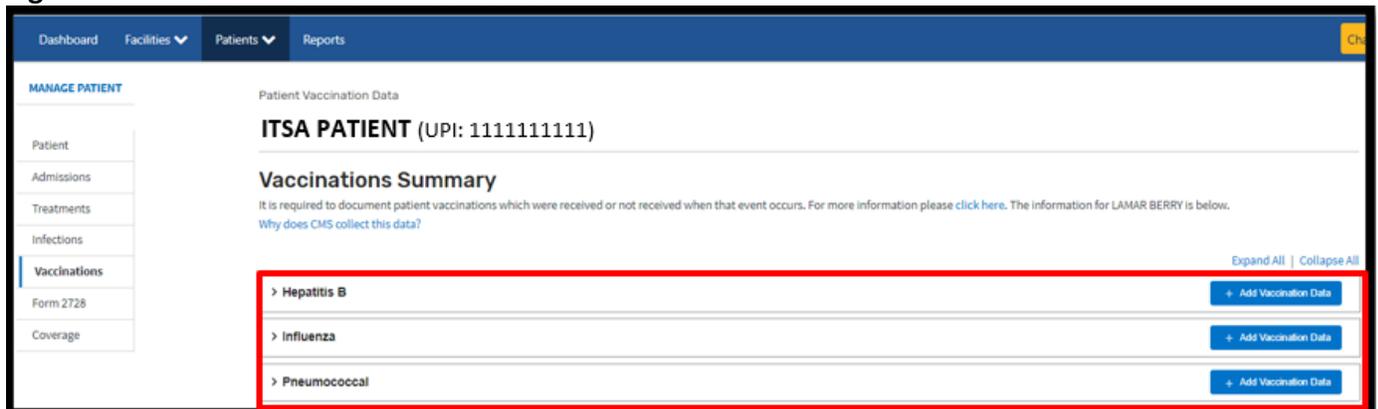|	
Key Points	- Form CMS-2728 ESRD Patient Medicare Entitlement and/or Patient Registration serves as a Medicare enrollment and patient registry form for renal and kidney transplant patients in the U.S. and U.S. territories. - Form CMS-2728 should be completed and submitted directly to CMS in EQRS within 45 days of the patient's admission to the facility. The original signed Form CMS-2728 should be submitted to the local Social Security Administration if the patient is applying for ESRD Medicare benefits. - A Form CMS-2746 ESRD Death Notification should be completed and submitted directly to CMS in EQRS within 14 days of the patient's date of death. - Copies of the printed and signed Form CMS-2728 and the printed Form CMS-2746 are kept in the patient's medical record. - Form CMS-2728 and Form CMS-2746 are completed on Manage Patient screens. - Form modifications must be requested within 60 business days of being submitted in EQRS. After 60 business days, the only field that can be modified is the field for the Date Regular Chronic Dialysis Began. - Modification requests can be submitted to Tier 2 Data Managers for Form CMS-2728 (version 2018 or newer) and Form CMS-2746. - Modification requests can be submitted to Tier 3 Data Managers for Form CMS-2728 (version 2014 or older).
Frequency	Tier 1 Data Managers: - Submit Form CMS-2728 no later than 45 days once the patient starts chronic dialysis or transplant date at the facility, but complete the form within 10 business days, as a best practice. - Submit Form CMS-2746s within 14 days of the patient's date of death. Tier 2 Data Managers: - Submit Initial Form CMS-2728 within 5 business days of notification. - Submit Form CMS-2746 for VHA facilities within 5 business days of notification of the date of death. - Tier 2 Data Managers should modify a submitted Form CMS-2728 or a submitted Form CMS-2746 within 10 business days when a modification request is received. Tier 3 Data Managers: - Support Tier 1 and Tier 2 Data Managers by deleting and/or modifying saved Form CMS-2728 within 10 business days of assignment to the Tier 3 Data Manager. - Support Tier 1 and Tier 2 Data Managers by deleting saved Form CMS-2746, as needed, within 5 business days of assignment to the Tier 3 Data Manager.

Additional Guidance	For guidance on how to complete Form CMS-2728 and Form CMS-2746 visit: https://mycrownweb.org/?smd_process_download=1&download_id=7685

Add Vaccination Data

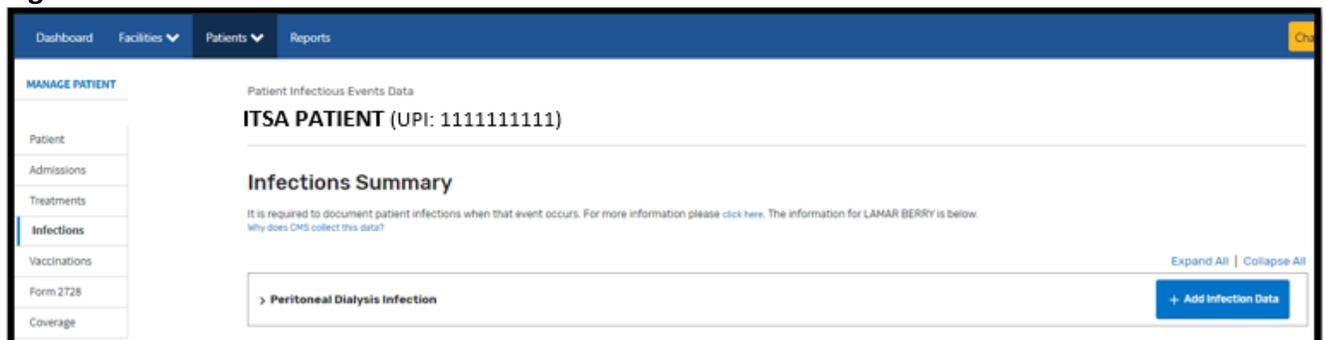| Key Points	• Patient vaccination data for Hepatitis B, Pneumococcal, and Influenza vaccinations are required to be entered into EQRS and can be entered at any time following a patient admission to the submitting facility. • Patient vaccination data are entered on the *Manage Patient* screen under the Vaccinations tab. • Tier 1 Data Managers report Vaccination data by manually entering vaccination event information or electronically through batch submission. • Patient vaccination records can be viewed and edited by any facility where the patient is admitted in EQRS. • Anytime a vaccination is offered to a patient, the vaccination event should be reported in EQRS.
Frequency	Vaccination data submission is required when a vaccination event occurs. A vaccination event occurs when a patient: • Receives a vaccine dose administered by the reporting facility • Receives a vaccine dose by an outside provider with documentation • Receives a vaccine dose which is self-reported with or without documentation • Does not receive a vaccine dose offered by the reporting facility
Additional Guidance	These links include guidance on how to add vaccinations in EQRS: • https://mycrownweb.org/?smd_process_download=1&download_id=7685 • https://mycrownweb.org/?smd_process_download=1&download_id=7694

Figure 13: Patient Vaccination Data Screen

Add Peritonitis Infection Data

Key Points	• Peritonitis infection data should be entered into EQRS anytime an infection event occurs and should be completed within 90 days of the event date. • Peritonitis infection data are entered on the *Manage Patient* screen under the Infections tab. • Tier 1 Data Managers report peritonitis infection data by manually entering event information or electronically through batch submission. • Patient infection records can be viewed and edited by any facility where the patient is admitted in EQRS.
Frequency	Peritonitis infection data should be entered anytime an event occurs. A peritonitis infection event occurs when a patient has at least two of the following present or the patient has a documented medical diagnosis of peritonitis: • Abdominal pain or cloudy peritoneal dialysis effluent • Peritoneal dialysis effluent white blood cell (WBC) count above 100 cells per microliter or with over 50% WBCs that are neutrophils • Positive peritoneal dialysis effluent culture Li PK-T, et al. ISPD peritonitis guideline recommendations: 2022 update on prevention and treatment. Peritoneal Dialysis International. March .2022:42(2):110-153. Available at: https://journals.sagepub.com/doi/10.1177/08968608221080586. Accessed on July 31, 2023.
Additional Guidance	The following links includes guidance on how to add peritonitis infection data in EQRS: • https://mycrownweb.org/wp-content/uploads/2023/06/Infection-Event-Data-Submission-Requirements_vFINAL508.pdf • https://mycrownweb.org/?smd_process_download=1&download_id=7685

Figure 14: Patient Infectious Events Data Screen

Personnel

Add/Edit Key Personnel

Key Points	• Key personnel, such as the facility medical director, facility nephrologist, facility nurse manager, primary facility contact, and anyone who signs patient forms, must be entered into EQRS.
	• Personnel entered display on other screens:
	   o Facility ICH CAHPS Attestation
	   o Treatment Summary
	   o Form CMS-2728
	   o Form CMS-2746
	• Tier 1 Data Managers review, and "Inactivate Records" as needed.
	• ESRD stakeholders utilize personnel data for various communications and approvals.

Frequency	Tier 1 Data Managers add/edit key staff members on the *Personnel* screen of in-scope dialysis facilities within 5 business days of staff changes.
	Tier 2 Data Managers add/edit key staff members on the *Personnel* screen of in-scope kidney transplantation and VHA facilities within five business days of notification of staff changes.
Additional Guidance	The following link includes guidance on how to edit facility personnel information in EQRS: https://mycrownweb.org/?smd_process_download=1&download_id=7685

Figure 15: Add/Edit Personnel Screen

Clinical

Manage Clinical

Key Points	• Clinical data collected for patients monthly in EQRS support the following:
	  o CMS Quality Strategy
	  o ESRD QIP
	  o CMS Process Improvement Initiatives
	• Clinical data management includes data submission for the following:
	
	| Anemia Management
		Infection

Adequacy	Iron
Ultrafiltration	Fluid Weight
Medication Reconciliation	Hospitalization
Mineral Metabolism	Telemedicine
Erythropoiesis-Stimulating Agents (ESA)	Vascular Access | • Tier 1 Data Managers report clinical data directly to CMS by manually entering lab results and other clinical data, or electronically through batch submission. • Tier 1 Data Managers should report the last lab of the month for hemodialysis and peritoneal dialysis patients or indicate "N/A." ("N/A" does not satisfy the required clinical submission). • Tier 1 Data Managers report the vascular access type used for each patient during their last dialysis treatment during a Clinical Month.
Frequency	Tier 1 Data Managers follow CMS's EQRS Clinical Data submission schedule. The typical EQRS clinical data submission schedule is for EQRS clinical data to open for data entry on the first day of the month and to close approximately two months after the end of the reporting month. If the last day of the month is on a Friday, weekend or Federal holiday, the closing date will be the following Federal business day.
Additional Guidance	The following link includes guidance to add Clinical information in EQRS: https://mycrownweb.org/?smd_process_download=1&download_id=7685

Figure 16: Manage Patient Clinical Values Screen

Report Clinical Depression Screening and Follow-Up Plan

Key Points	• Facilities must submit Clinical Depression Screening and Follow-up information for each eligible patient at least once during the calendar year. • Clinical Depression information is entered on the *Clinical Depression* screen under the *Patients* tab. • Users can enter data during the entire assessment period and are given two months past the end of the assessment period to complete reporting. • After the submission deadline, the previous year's assessment period closes, and the reported value becomes read-only and cannot be modified. • The assessment period runs for a whole calendar year from January 1–December 31.
Frequency	Tier 1 Data Managers must report Clinical Depression Screening and Follow-Up data within two months past the end of the assessment period (as directed by the ESRD Prospective Payment System final rule per payment year).
Additional Guidance	The following link has guidance on how to add Clinical Depression information in EQRS: https://mycrownweb.org/?smd_process_download=1&download_id=7685

Figure 17: Clinical Depression Screening and Follow-up Reporting Screen

Action List

Resolve Action List Accretions

Key Points	• An EQRS accretion is an ESRD patient with a record in another CMS database but not in EQRS.
	• EQRS communicates with various databases to receive Accretion alerts to support data reporting accuracy.
	• Accretions are created when differences are identified between the two databases.
	• Unresolved accretions are displayed for facilities on their Facility Dashboard.
	• Accretions actions can be:
	  o Assigned to Tier 1 Data Managers directly in EQRS or "Reassigned" by Tier 2 users.
	  o Assigned to Tier 2 Data Managers directly in EQRS, "Reassigned" by another Tier 2 user, or "Escalated" by a Tier 1 user.
	    ▪ Tier 2 Data Managers are responsible for resolving Accretions for VHA, and closed facilities. Tier 2 Data Managers are responsible for reassigning or escalating out-of-scope patients or Gap patients.
	  o Assigned to Tier 3 Data Managers directly in EQRS or "Escalated" by Tier 2 users to reconcile in EQRS.

Frequency	All Data Managers use EQRS to resolve open Accretions. | **Resolution Period**	**Accretion Status** | |---|---| | **15 Days** | Newly generated or "Reassigned" Accretions | | **30 Days** | "Under Investigation" and Accretions |
Additional Guidance	The following link has guidance on how to resolve open accretions in EQRS: https://mycrownweb.org/?smd_process_download=1&download_id=7685

Figure 18: Actions taken by Data Managers to Resolve Accretions
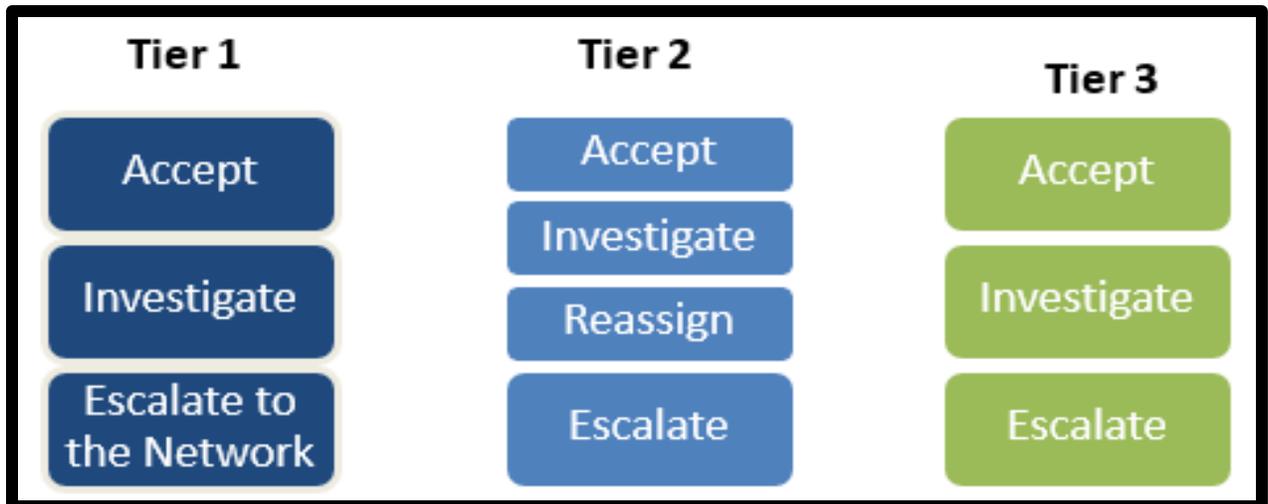
Form 2744

Complete Form CMS-2744A (Dialysis Facilities)

Key Points	• Form CMS-2744A is the annual ESRD Facility Survey that summarizes the following dialysis facility data related to the following:
	  ○ Facility Information
	  ○ Beginning and ending patient Counts
	  ○ Patient additions and losses
	  ○ Patient Medicare and vocational rehabilitation status
	  ○ Number of treatments by modality
	  ○ Number of staffing positions
	• Form CMS-2744A is completed once a year to collect a summary of dialysis facility data for the entire survey year (January 1–December 31).
	• Form CMS-2744A is generated in EQRS with auto-populated facility details and facility counts for that survey period.
	• Tier 1 Data Managers are responsible for verifying that the information listed on Form CMS-2744A is accurate.
	• Reports can be viewed and downloaded from the *View Facility Form 2744* screen to verify the auto-populated data in the form. Identified errors need to be corrected in the patient record(s) and the form regenerated to update the auto-populated form data and survey reports.

Frequency	Tier 1 Data Managers complete Form CMS-2744A at the start of each year for the prior year and submit it by the Network due date.

Figure 19: View Facility Form 2744 and Survey Reports Screen

Complete Form CMS-2744B (Kidney Transplant Facilities)

Key Points	• Form CMS-2744B is the annual ESRD Facility Survey that summarizes the following kidney transplant center data:
	    ○ Number of transplanted patients
	    ○ Patient Medicare status
	    ○ Number and type of transplant procedures performed
	    ○ Number of patients awaiting kidney transplant
	• Form CMS-2744B is completed once a year to collect a summary of transplant center data for the entire survey year (January 1–December 31).
	• Tier 1 Data Managers are responsible for verifying that the information listed on Form CMS-2744B is accurate.
	• Reports can be viewed and downloaded from the *View Facility Form 2744* screen to verify the auto-populated data in the form. Identified errors need to be corrected in the patient record(s) and the form regenerated to update the auto-populated form data and survey reports.

Frequency	Tier 1 Data Managers complete Form CMS-2744B at the start of each year for the prior year and submit it by the Network due date.

Figure 20: View Facility Form 2744 and Survey Report Screen

Accept/Reject/Finalize Form CMS-2744

Key Points	• Tier 1 and Tier 2 Data Managers work together to complete Form CMS-2744A and Form CMS-2744B in EQRS once a year for each dialysis and kidney transplant facility. • Tier 1 Data Managers must review prepopulated counts, run all available reports to verify that all information listed on the survey is accurate, and correct any errors in the patient record(s) before attempting to "Submit for Review." The form is complete once it is "Finalized." • Form CMS-2744A and Form CMS-2744B is "Accepted" or "Rejected" and "Finalized" by Tier 2 Data Managers.

	• A Tier 2 Data Manager may reopen Form CMS-2744 after the form is finalized if modification to the form is needed. • Tier 2 Data Managers attest that all facilities within their scope have completed Form CMS-2744 by the CMS due date.
Frequency	Tier 2 Data Managers review, and "Accept" and "Finalize" or "Reject" Form CMS-2744s within 30 calendar days of the form being "Submitted for Review" by a facility.

Figure 21: Form CMS-2744 Status Descriptions

Add New Form CMS-2744A for Closed Facilities

Key Points	• A Tier 1 Data Manager may complete Form CMS-2744A if the facility is in the process of closing. • Tier 1 Data Managers ensure that all patient, patient admission and discharge, and treatment information are entered into EQRS before submitting Form CMS-2744A in EQRS to the ESRD Network for review.
Frequency	Tier 1 Data Managers submit Form CMS-2744A for acceptance when all patients have been discharged and within 5 business days of the facility closure.

Chapter 4
Tier 3 Data Management Support
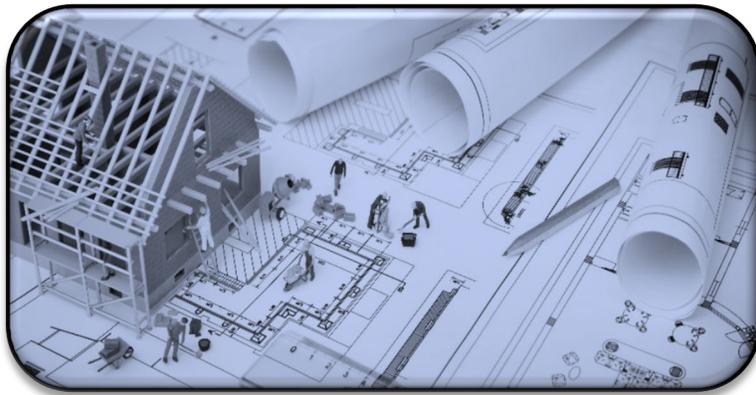
Tier 3 Data Manager Role

Role Defined

Tier 3 Data Managers support **Data Monitoring**, **Data Measuring**, and **Data Managing** by using EQRS to acquire and report necessary data to CMS. Additionally, Tier 3 Data Managers provide support to Tier 1 and Tier 2 users by providing reports and other documentation that provide an overview of data entries.

Examples of Tier 3 data management support:

Data Measuring

Tier 3 User Task	Frequency
Tier 3 Service Now Ticket Resolutions	Monthly
Clinical Compliance Reporting Metrics	As required by CMS

Data Managing

Tier 3 User Task	Performed Within
Form CMS-2744 Deletion and Modification	10 business days after assignment to the Tier 3 Data Manager
Form CMS-2746 Deletion	5 business days after assignment to the Tier 3 Data Manager
Erroneous Patient Deletion	As needed
Acute Patient Maintenance	As needed
Patient Merge	10 business days after assignment to the Tier 3 Data Manager
Patient Unmerge	5 business days after assignment to the Tier 3 Data Manager
Reopen Form CMS-2744s	5 business days after assignment to the Tier 3 Data Manager

Note: Timelines may adjust based on research needed after assignment.

Appendixes

Admit and Discharge Reasons

Admit Reasons

Admit Reason	Definition
New ESRD Patient	The patient being admitted to the facility is new to ESRD with no patient record in EQRS at the time of admission.
Transfer In	The patient being admitted to the facility is a transfer patient from another facility.
Restart	The patient being admitted to the facility had previously stopped dialysis treatment and is now resuming dialysis treatment.
Dialysis After Transplant Failed	The patient being admitted to the facility is resuming dialysis treatment after a failed kidney transplant.
Transplant	The patient being admitted to the transplant facility has been discharged from a chronic outpatient dialysis facility or has had a previous kidney transplant.
Dialysis in Support of Transplant	The patient is temporarily receiving hemodialysis at a facility in support of a kidney transplant.

Discharge Reasons

Discharge Reason	Definition
Acute	The patient is not chronic ESRD and is not receiving a regular course of dialysis treatment.
Death	The patient has expired while being a permanently admitted patient at the facility.
Delayed Function Resolved following a Transplant	The patient's transplanted kidney has gained function and the patient no longer needs dialysis. This discharge reason can only be used when the patient's Admit Reason is Dialysis in Support of Transplant.
Delayed Function Unresolved following a Transplant	The patient's transplant kidney does not regain function and the patient needs to be discharged and re-admitted to the facility as a permanent patient. This discharge reason can only be used when the patient's Admit Reason is Dialysis in Support of Transplant.
Discontinue	The patient has discontinued dialysis treatment.
Involuntary	The patient was involuntarily discharged from the facility. *
Lost to Follow Up	The patient has stopped arriving for scheduled treatments with no prior notification and the facility is unable to locate the patient. *
Other	The patient was discharged from the facility and plans to receive chronic dialysis in prison or another country.
Recover Function of Original Kidney	The patient has recovered function of their native kidney and no longer needs dialysis.
Transfer	The patient has transferred to another facility. Transfer Discharge Subcategory: • Dialysis Facility • Hospice • Hospital • Long Term Care Facility • Nursing Home • Rehab Center
Transplant in US	The patient was discharged from the facility to receive a transplant within the United States.
Transplant Outside US	The patient was discharged from the facility to receive a transplant outside the United States.

*Consult with the local ESRD Network prior to using this discharge reason.

Patient Admit and Discharge Reason Rules

Discharges Allowed

		Discharge Reasons A=Allow N=Not Allow S=System Generated														
		Acute	Death	Discontinue	Lost to Follow Up	Recovered Function of Original Kidney	Involuntary	Other	Transplant in US	Transplant Outside US	Transfer	Transplant Failed	System Discharge	Delayed Function Resolved Following a Transplant	Delayed Function Unresolved Following a Transplant
Admission Record Admit Reason	**New ESRD Patient (Dialysis)**	A	A	A	A	A	A	A	A	A	A	N	S	N	N
	New ESRD Patient (Transplant)	N	A	N	A	N	N	N	A	A	N	A	S	N	N
	Transfer In	N	A	A	A	A	A	A	A	A	A	N	S	N	N
	Restart	N	A	A	A	A	A	A	A	A	A	N	S	N	N
	Dialysis After Transplant Failed	N	A	A	A	N	A	A	A	A	A	N	S	N	N
	Dialysis in Support of Transplant	N	A	N	A	N	N	N	N	N	N	N	S	A	A
	Transplant	N	A	N	A	N	N	N	A	A	N	A	S	N	N

EQRS Data Management Guidelines

Previous Discharge – Next Admit Reason Allowed

		Next Admission Record Admission Reasons A=Allow N=Not Allow S= System Generated						
		New ESRD Patient (Dialysis)	New ESRD Patient (Transplant)	Transfer In	Restart	Dialysis After Transplant Failed	Dialysis in Support of Transplant	Transplant
Previous Admission Record Discharge Reason	**Acute**	A	A	N	N	N	N	N
	Death	N	N	N	N	N	A	N
	Discontinue	N	N	N	A	N	N	A
	Lost to Follow Up	N	N	A	A	A	A	A
	Recovered Function of Original Kidney	N	N	N	A	N	N	A
	Involuntary	N	N	A	N	N	N	A
	Other	N	N	A	A	N	N	A
	Transplant in US	N	N	N	N	A	A	A
	Transplant Outside US	N	N	N	N	A	A	A
	Transfer	N	N	A	N	N	N	N
	Transplant Failed	N	N	N	N	A	A	A
	System Discharge	N	N	S	S	S	S	S
	Delayed Function Resolved following a Transplant	N	N	N	N	A	A	N
	Delayed Function Unresolved following a Transplant	N	N	N	N	A	A	N

EQRS Data Management Guidelines

Previous Admission Record - Next Admission Record Admission Reasons

		Next Admission Record Admission Reasons A=Allow N=Not Allow						
		New ESRD Patient (Dialysis)	New ESRD Patient (Transplant)	Transfer In	Restart	Dialysis After Transplant Failed	Dialysis in Support of Transplant	Transplant
Previous Admission Record Admit Reason	**New ESRD Patient (Dialysis)**	N	N	A	A	N	N	A
	New ESRD Patient (Transplant)	N	N	N	N	A	A	A
	Transfer In	N	N	A	A	N	N	A
	Restart	N	N	A	A	N	N	A
	Dialysis After Transplant Failed	N	N	A	A	N	N	A
	Dialysis in Support of Transplant	N	N	N	N	A	A	A
	Transplant	N	N	N	N	A	A	A

Tier 1 Data Manager Task List

Category	Section	Task	Frequency
Data Monitoring	Facility Dashboard	Monitor Facility Dashboard	At least weekly
	Facilities	Monitor Facility ICH CAHPS Attestation	Monitor once per year between January 1 and the end of the attestation submission period. The ICH CAHPS Attestation submission period typically occurs within the first two months of the year.
		Monitor Facility Summary	By December 31 of each year
	Personnel	Review Personnel	At least quarterly
Data Managing	Facilities	Submit Facility ICH CAHPS Attestation	Submit once per year between January 1 and the end of the attestation submission deadline. The ICH CAHPS Attestation submission period typically occurs in the first two months of the year.
		Update Facility Summary	At least annually
	Patients	Admit and Discharge Patients	Admit within 5 business days of the first treatment. Discharge within 5 business days of the last treatment. Note: EDI submitters admit and discharge with the next submission cycle after completion of an admit or discharge.
		Complete Form CMS-2728 and Form CMS-2746	Form CMS-2728 must be submitted no later than 45 days of the patient starting chronic dialysis at the facility but should be completed with 10 business days as a best practice; Form CMS-2746 should be completed within 14 days of the date of death.

		Vaccinations	Add vaccination information anytime a vaccination event occurs (anytime a patient receives or does not receive an offered vaccination).
		Peritonitis Infections	Add peritonitis infection information anytime a peritonitis infection occurs and within 90 days of the infection event.
	Personnel	Key Personnel	Add personnel within 5 business days of staff changes.
	Clinical	Manage Clinical	Follow CMS's Clinical Data submission deadline schedule.
	Clinical Depression Screening and Follow-Up	Report Clinical Depression Screening and Follow-Up Plan	Report Clinical Depression Screening and Follow-Up data within two months of the end of the assessment period. The Clinical Depression Screening Assessment period is January 1-December 31 of each year.
	Action List	Resolve Accretions	New or Reassigned: within 15 days of issuance; Under Investigation: within 30 days of issuance
	Form 2744	Complete Form CMS-2744A	By Network due date
		Complete Form CMS-2744B	By Network due date
		Add New Form CMS-2744A for Closed Facilities	When all patients are discharged and within 5 business days of the facility closure

Tier 2 Data Manager Task List

Category	Section	Task	Frequency
Data Monitoring	**Facilities**	Monitor Facility ICH CAHPS Attestations	Monitor once per year between January 1 and the end of the attestation submission deadline. The ICH CAHPS Attestation submission period typically occurs in the first two months of the year.
		Monitor Facility Summary	By December 31 of each year
		Monitor Saved Facilities	Within 30 days from date the facility is saved
Data Managing	**Facilities**	Add New Facility in EQRS	Within 1 business day of receiving facility notification
		Update Facility Summary	Within 1 business day of receiving facility update
	Patients	Admit and Discharge Patients	Admit within 2 business days of notification. Discharge within 2 business days of last treatment notification.
		Complete Form CMS-2728 and Form CMS-2746	Form CMS-2728: within 5 business days of notification; Form CMS-2746: within 5 business days of notification
		Modify Form CMS-2728 and Form CMS-2746	Form CMS-2728 and Form CMS-2746: within 10 business days of notification
	Personnel	Add Key Personnel	Within 5 days of notification of staff changes
	Action List	Resolve Accretions	New or Reassigned: within 15 days of issuance; Under Investigation: within 30 days of issuance
	Form 2744	Accept/Reject/Finalize Form CMS-2744	Within 30 calendar days of a form being "Submitted for Review"
		Re-open Finalized Form CMS-2744	As soon as possible after receiving a request for modification

Tier 3 Data Manager Task List

Category	Section	Task	Frequency
Data Monitoring	**Facilities**	Monitor Facility ICH CAHPS Attestations	Once per year between January 1 and the end of the submission period. ICH CAHPS Attestation submission period typically occurs in the first two months of the year.
Data Managing	**Patients**	Modify Form CMS-2728 and Form CMS-2746	Form CMS-2728: within 10 business days of notification; Form CMS-2746: within 5 business days of notification
	Action List	Resolve Accretions	New or Reassigned: within 15 days of issuance; Under Investigation: within 30 days of issuance

Note: Frequency may adjust based on research needed after assignment.