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Meeting the Goal: Submit Saved CMS-2728 Forms

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Janis Grady

The completion of the CMS-2728 form is vital – as it helps to support End Stage Renal Disease (ESRD) patients’ Medicare benefits, and provides CMS with necessary data regarding the ESRD patient population. CMS’ #1 data quality goal for CROWNWeb is to decrease the number of SAVED/Missing forms.

When entering a CMS-2728 form in CROWNWeb, users should remember that the process is not complete until they have entered all necessary patient information, and clicked the “Submit” button. Currently, there are nearly 10,000 CMS-2728 forms in a “Saved” status waiting to be submitted in CROWNWeb. Users should review saved forms to determine what is needed to complete the submission. CMS recommends submitting Initial CMS-2728 forms **within 10 business days** of Date Patient Started Chronic Dialysis at Current Facility (field #25 of CMS-2728 Form), but no later than 45 days. (See [page 33](#) of the [CROWNWeb Data Management Guidelines](#).)

Need help determining if your facility has CMS forms in a “Saved” status? **The Reports screen in CROWNWeb includes a “Saved Status Report” as well as a “Missing Forms Report” that are designed to assist users with identifying forms that are not submitted.**

CMS to Release CROWNWeb 4.10

On Tuesday, April 5, 2016, CMS will release the latest version of CROWNWeb – CROWNWeb 4.10. This release will include two new components that are designed to help enhance the user experience:

- **Patient Matching:** CROWNWeb will use a new algorithm to help determine if a patient admitted to a facility currently exists in the system.
- **Facility Dashboard Framework:** CROWNWeb will include the initial development framework needed for a Facility Dashboard that identifies outstanding items.

Upcoming Event

CROWNWeb Town
Hall Webinar:
April 28, 2016
2pm EDT-3pm EDT

CROWNWeb 4.10: New Patient Matching Solution

During the patient admission process, CROWNWeb uses 6 key identifiers to determine if the patient currently exists in the system: Social Security Number, Medicare Claim Number, First Name, Last Name, Gender, and Date of Birth. If these are entered in the system incorrectly, CROWNWeb triggers a “Near Match In-Scope” or “Near Match Out-of-Scope” message – depending on whether the patient is in a facility to which the user does or does not have access. **CROWNWeb 4.10 will help reduce the number of “Near Match” patients and diminish record mergers by using the following features to better support patient matching:**

- **Soundex on Patient First or Last Name:** Use of a phonetic (sounds like) system
- **Reverse First and Last Names:** Checks if the first and last name are transposed
- **Birth Date:** Verifies if date of birth values are within the same month and year
- **Other Name:** Recognizes if the First Name and Last Name fields contain other values such as “Jones Smith” vs. “Jones”
- **Strip Special Characters:** Disregards periods, apostrophes, and/or hyphens

EIDM/QARM Communications and Training

CMS is actively working to develop the communication and training materials for the transition to Enterprise Identity Management (EIDM) and the QualityNet Authorization and Role Management (QARM) in June/July 2016. **All CROWNWeb and QIP system users will be required to re-establish user access and application accounts. Our Outreach, Communications, and Training (OCT) contractor is documenting the transition plans to EIDM/QARM, for provider access to both CROWNWeb and QIP systems.** Reports to identify users at each dialysis facility are being addressed by the EIDM/QARM Teams for sharing with all dialysis organizations.

CMS will be coordinating efforts with the EDI Submitters, the ESRD Networks, and the National Coordinating Center (NCC), as we move closer to the QARM release date.

Additional questions or training needs can be submitted to CRAFT@mycrownweb.org.

2016 Clinical Data Closure Dates

Clinical closures dates apply to all Collect Types. Additionally, clinical data submissions apply to all submission methods.

Clinical Month	Date of Closure for Clinical Submissions
January 2016	March 31, 2016 at 11:59 p.m. ET
February 2016	April 30, 2016 at 11:59 p.m. ET
March 2016	May 31, 2016 at 11:59 p.m. ET

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