



CROWNWeb Town Hall: Outcomes of the CROWNWeb Data Validation

With CROWNWeb Outreach, Communication, and Training (OCT)



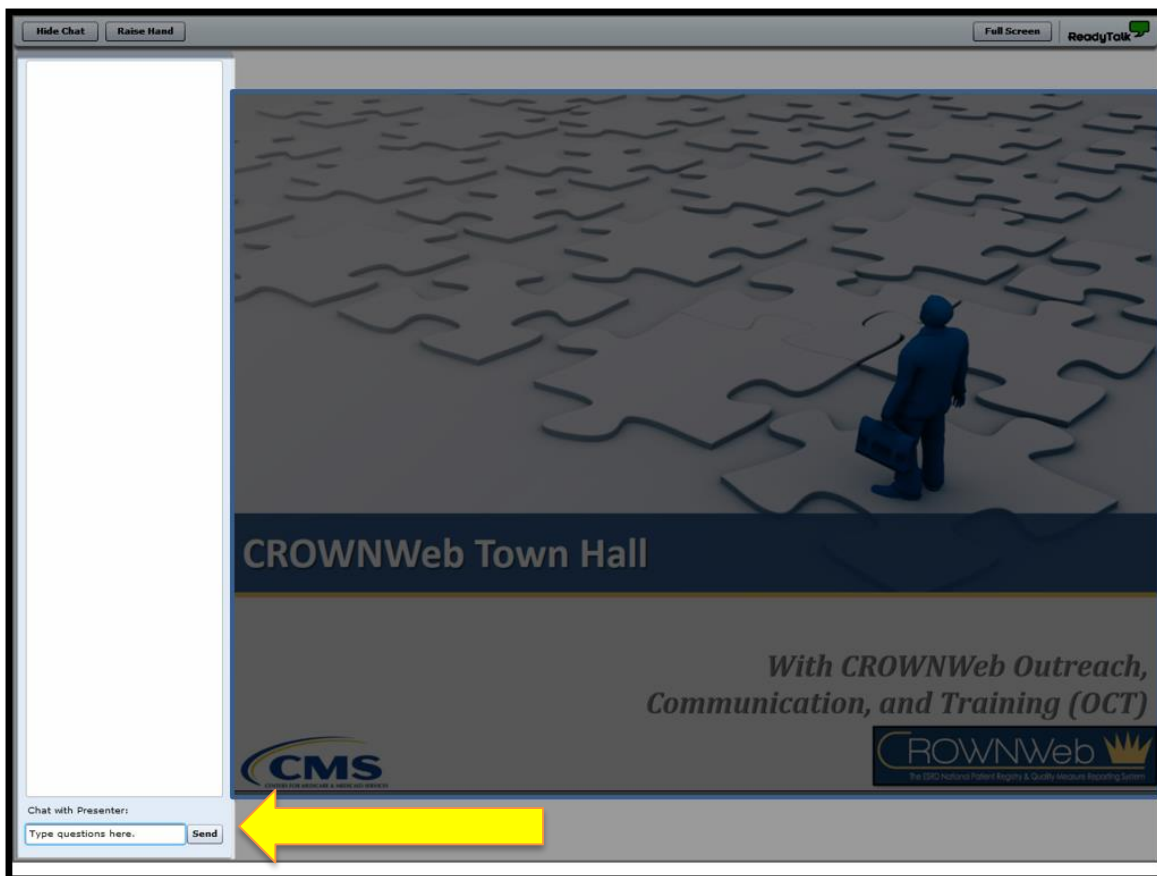
November 17, 2016 – 2pm to 3pm ET

Audio for Today's Event

- **Audio for this event is available via INTERNET STREAMING (speakers or headphones) - No telephone line is required.**
 - NOTE: A limited number of phone lines are available if you are experiencing poor audio quality – send us a chat message!
- **Audio from computer speakers breaking up or stopping?**
 - Click Pause button
 - Wait 5 seconds
 - Click Play button
- **Hear a bad echo on the call?**
 - Echo is usually caused by multiple connections to a single event.
 - Close all but one browser/tab and the echo will clear up.

Submitting Questions

Type questions in the “Chat with Presenter” section, located in the bottom-left corner of your screen.



Note: Some questions may require additional research. Unanswered questions may be submitted to CRAFT@MyCROWNWeb.org.

Today's Host

Janis Grady, RHIT, CPHQ

Contract Officer's Representative (COR)

CROWNWeb Outreach, Communication, and Training (OCT)

Centers for Medicare & Medicaid Services,

Division of Quality Measurement (DQM)



Today's Presenters

Oniel Delva, BA, CTT+

Communications Manager



Michael Seckman, CTT+

Training Manager



Kirsten Keating

Project Coordinator





CROWNWeb Data Validation Methods

CROWNWeb Validations

CMS utilizes multiple outlets to help ensure the accuracy and validity of data reported via CROWNWeb.

1. CROWNWeb has built-in data verification features to inform users of a missing or out-of-range value.

Error: Minimum required fields are missing or invalid. Please review errors and/or warnings and make the necessary changes in order to continue.

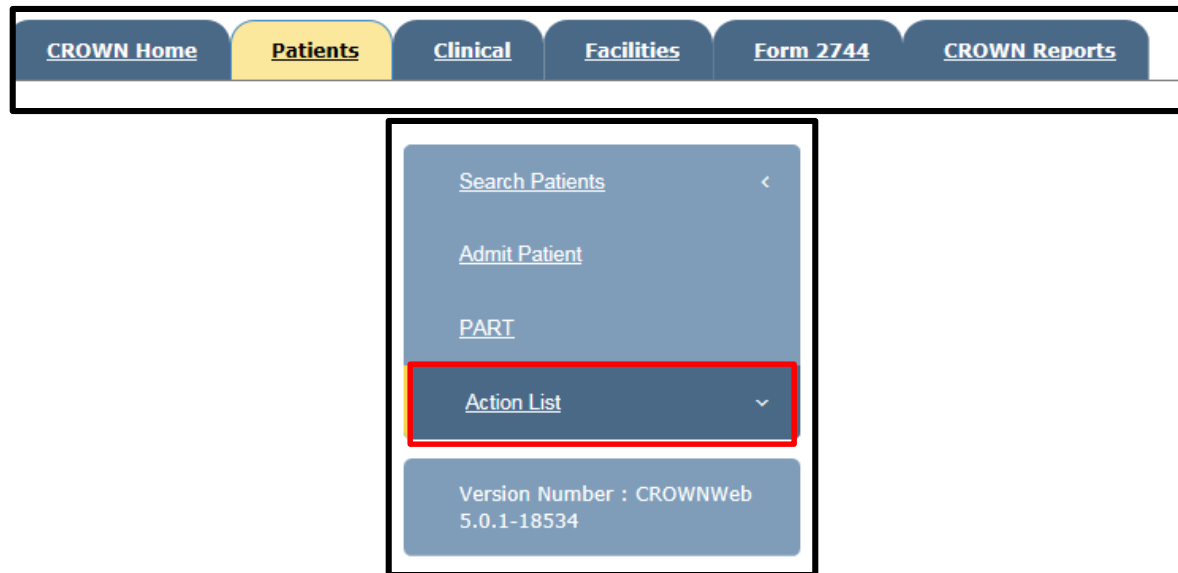
Hemoglobin Date ts mandatory when Hemoglobin is populated.

Warning: Mandatory clinical fields were not populated. Please make any necessary changes to the mandatory fields indicated.

Hemoglobin (Hgb) (g/dL)

CMS Databases

2. CROWNWeb receives information each night from CMS' Renal Management Information System (REMIS), and assigns Notification and Accretion Alerts to identify discrepancies.



3. Various aspects of CROWNWeb's data entry are also cross-checked by CMS' approved Data Validation contractor (AST).



ESRD CROWNWeb Data Validity and Reliability Project

Today's Guest Presenter

Darren Childers, PMP

Program Manager

Allegheny Science & Technology



Darren Childers is the program manager for End Stage Renal Disease (ESRD) Quality Incentive Program (QIP) Data Validation and Reliability contract. In his role, Darren is responsible for the effort to assess the validity and reliability of the CROWNWeb and NHSN data reported by dialysis facilities

2015 CROWNWeb Data Validation

Purpose:

The Validation Project focuses on Patient Demographic information and Clinical Performance Measures (CPM) data.

- To assess the accuracy of the clinical data submitted electronically in CROWNWeb against providers' source medical records.

Methodology Overview

Validation Period

- April – June 2015

Dialysis Types Validated

- Hemodialysis
- Peritoneal Dialysis

Validation Criteria

Requested records for 300 randomly selected facilities

- 299 facilities responded (99.63%)
- 2,982 Patient records were selected for validation (10 records per facility)



Let's Look at Outcomes

Overall Results

Element Groups	Match Rate	Missing Data	Error Rate
All Facilities	81.4%	8.1%	10.5%
Adequacy	83.9%	8.7%	7.4%
Anemia Management	69.9%	9.9%	20.2%
Mineral Metabolism	89.2%	6.6%	4.2%
Vascular Access	80.5%	9.0%	10.4%



Let's Look at Access Types

Access Types in CROWNWeb

*Date of Reported Dialysis Session ☐ N/A

*Current Access Type

*Date Access Type Changed

AV Fistula Usable Date

AV Fistula Maturing

AV Fistula State

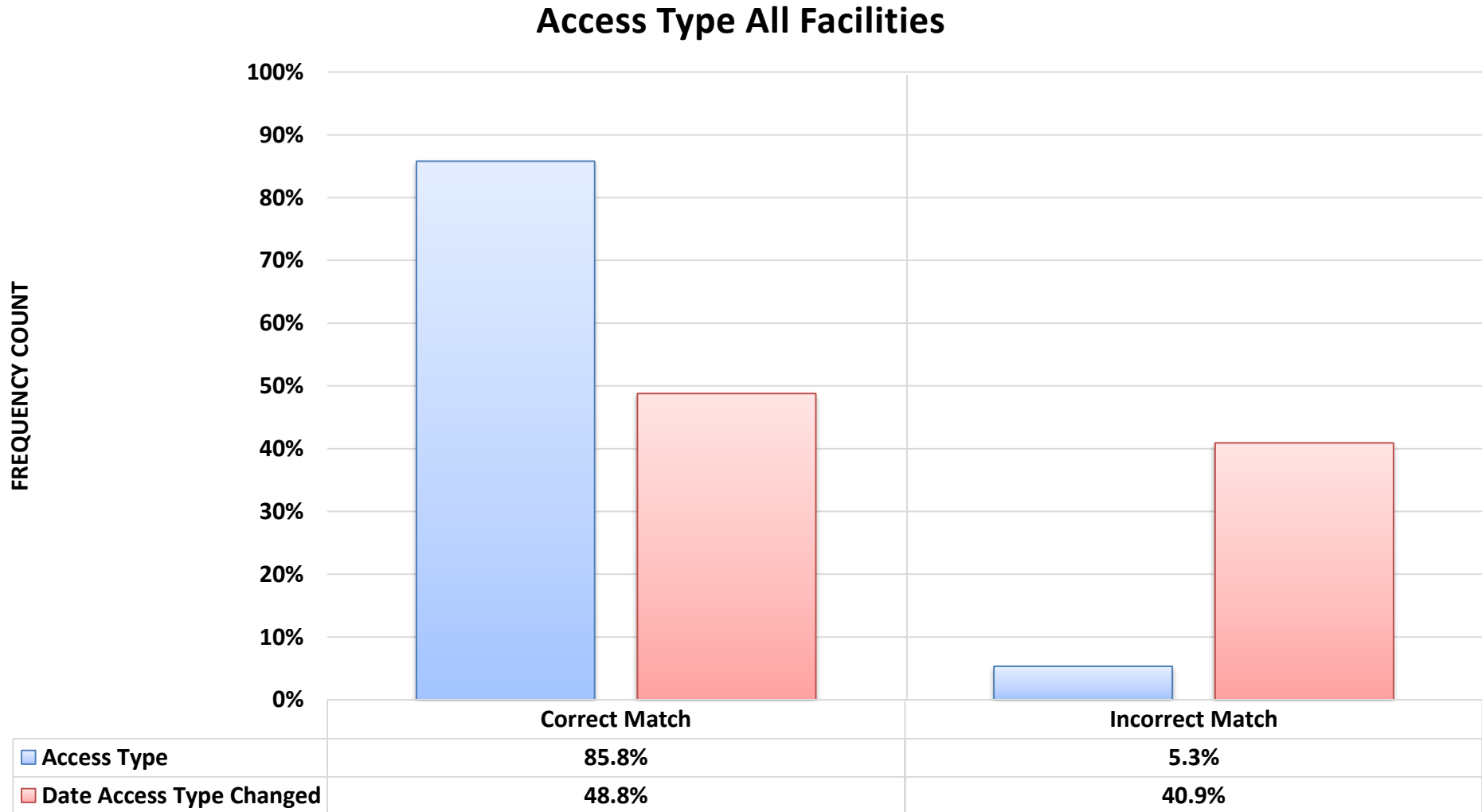
AV Fistula Creation Date

AV Graft Maturing

AV Graft State

AV Fistula Only (with 2 Needles)
AV Fistula Combined with an AV Graft
AV Fistula Combined with a Catheter
AV Fistula single needle device
AV Graft Only (with 2 Needles)
AV Graft Combined with a Catheter
AV Graft single needle device
Catheter Only
Port Access Only
Other/Unknown

Access Types in the Validation Project





Let's Look at Dialysis Adequacy

Adequacy in CROWNWeb

Adequacy

*Kt/V ☐ N/A

Kt/V Method

UKM (Urea Kinetic Modeling)
Daugirdas II

*Blood Urea Nitrogen (BUN) Pre-Dialysis (mg/dL) ☐ N/A

*BUN Post-Dialysis (mg/dL) ☐ N/A

*Pre-Dialysis Weight ☐ N/A

*Post-Dialysis Weight ☐ N/A

*Delivered Minutes of BUN Hemodialysis Session ☐ N/A

*Height ☐ N/A

*Serum Creatinine (mg/dL) ☐ N/A

*Normalized Protein Catabolic Rate (nPCR) ☐ N/A

Hemodialysis

Peritoneal
Dialysis

Adequacy

*Kt/V ☐ N/A

Dubois and Dubois
Other

 V Method

*Body Surface Area (BSA) Method ☐ N/A

*RRF Assessed in Kt/V ☐ N/A

*24hr Urine Volume (mL) ☐ N/A

*Height ☐ N/A

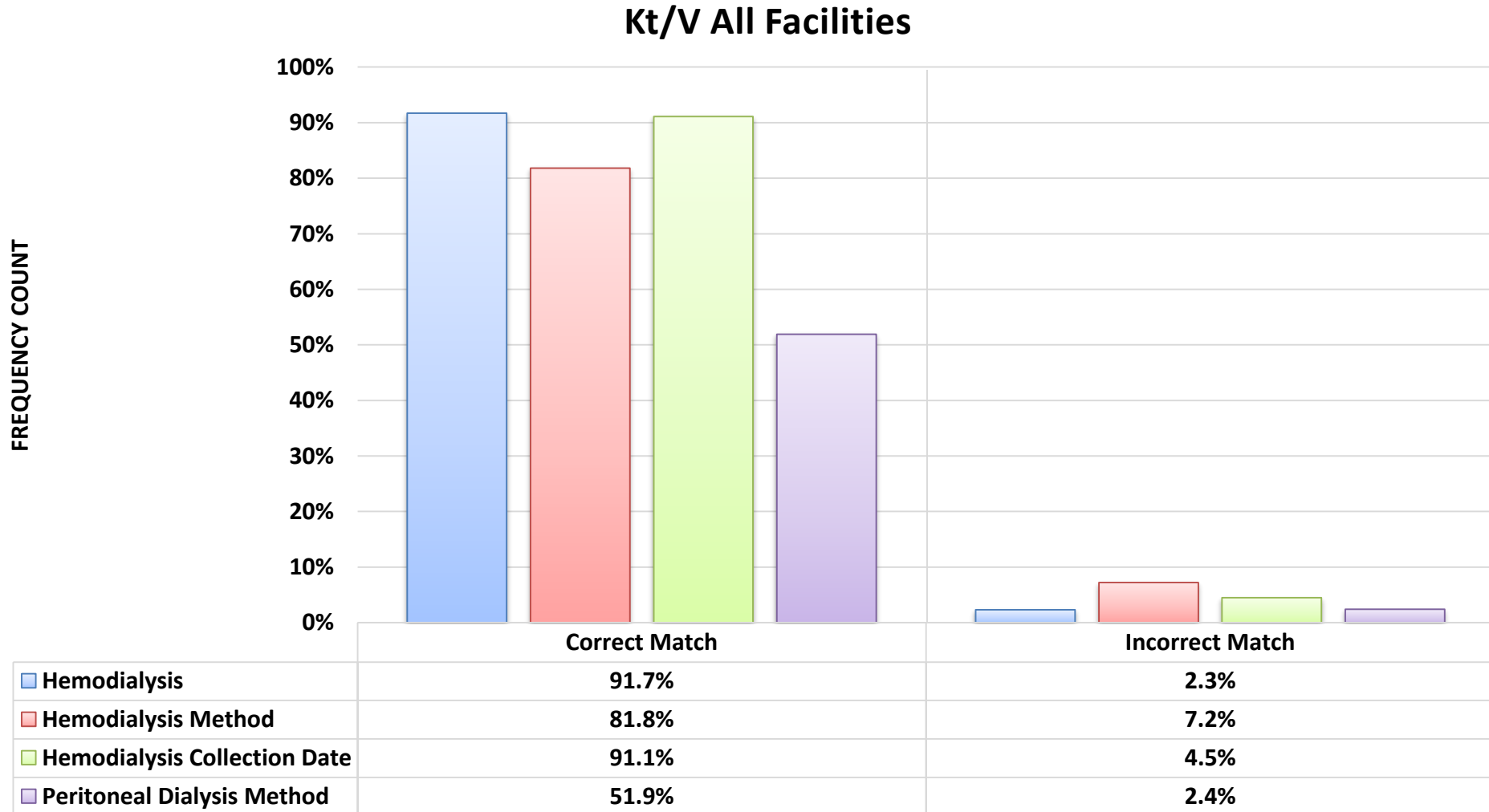
*Clinic Weight ☐ N/A

*Body Surface Area (BSA) Corrected ☐ N/A

*Serum Creatinine (mg/dL) ☐ N/A

% Body Weight
Hume
Watson
Other





Kt/V in the Validation Project





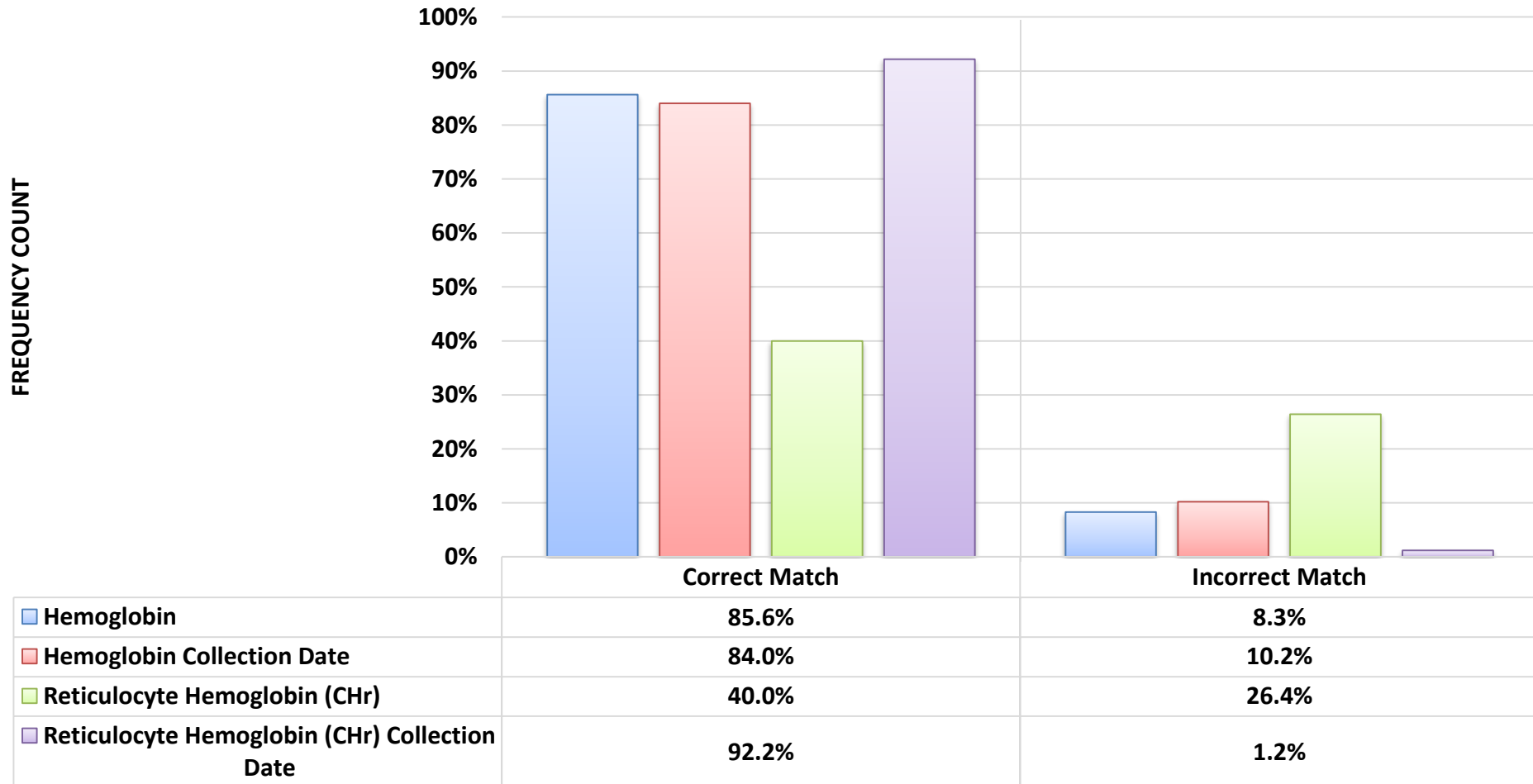
Let's Look at Anemia Management

Anemia Management in CROWNWeb

Anemia Management				
*Hemoglobin (Hgb) (g/dL)	<input type="text" value="10"/>	<input type="checkbox"/> N/A	<input type="text" value="08/14/2016"/>	
*Ferritin (ng/mL)	<input type="text" value="2000"/>	<input type="checkbox"/> N/A	<input type="text" value="08/14/2016"/>	
*Iron Saturation (TSAT) (%)	<input type="text" value="60"/>	<input type="checkbox"/> N/A	<input type="text" value="08/14/2016"/>	
*Reticulocyte Hemoglobin (CHr) (pg)	<input type="text" value="30"/>	<input type="checkbox"/> N/A	<input type="text" value="08/14/2016"/>	

Anemia Management in the Validation Project

Anemia Management All Facilities






Let's Look at ESA

ESA in CROWNWeb

ESA

***ESA Administered** Yes ☒ ☐ N/A 01/01/2015 

***ESA Agent Prescribed** Epoetin Alfa ☒ ☐ N/A

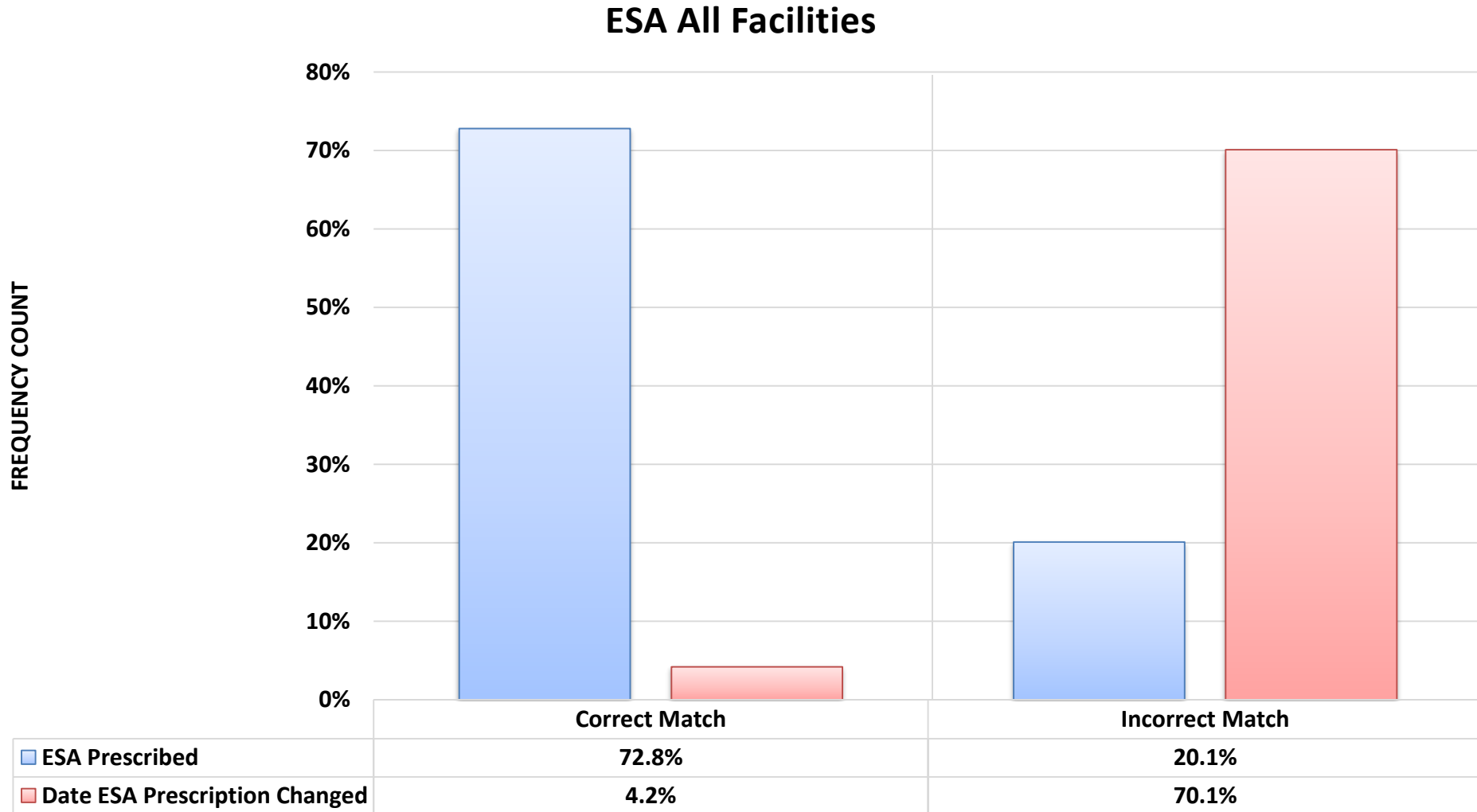
Other ESA Agent Prescribed

***ESA Monthly Dose** 15000 ☐ ☒ N/A Units ☒

Other ESA Monthly Dose Measure

ESA Route SC (Subcutaneous) ☒



ESA in the Validation Project





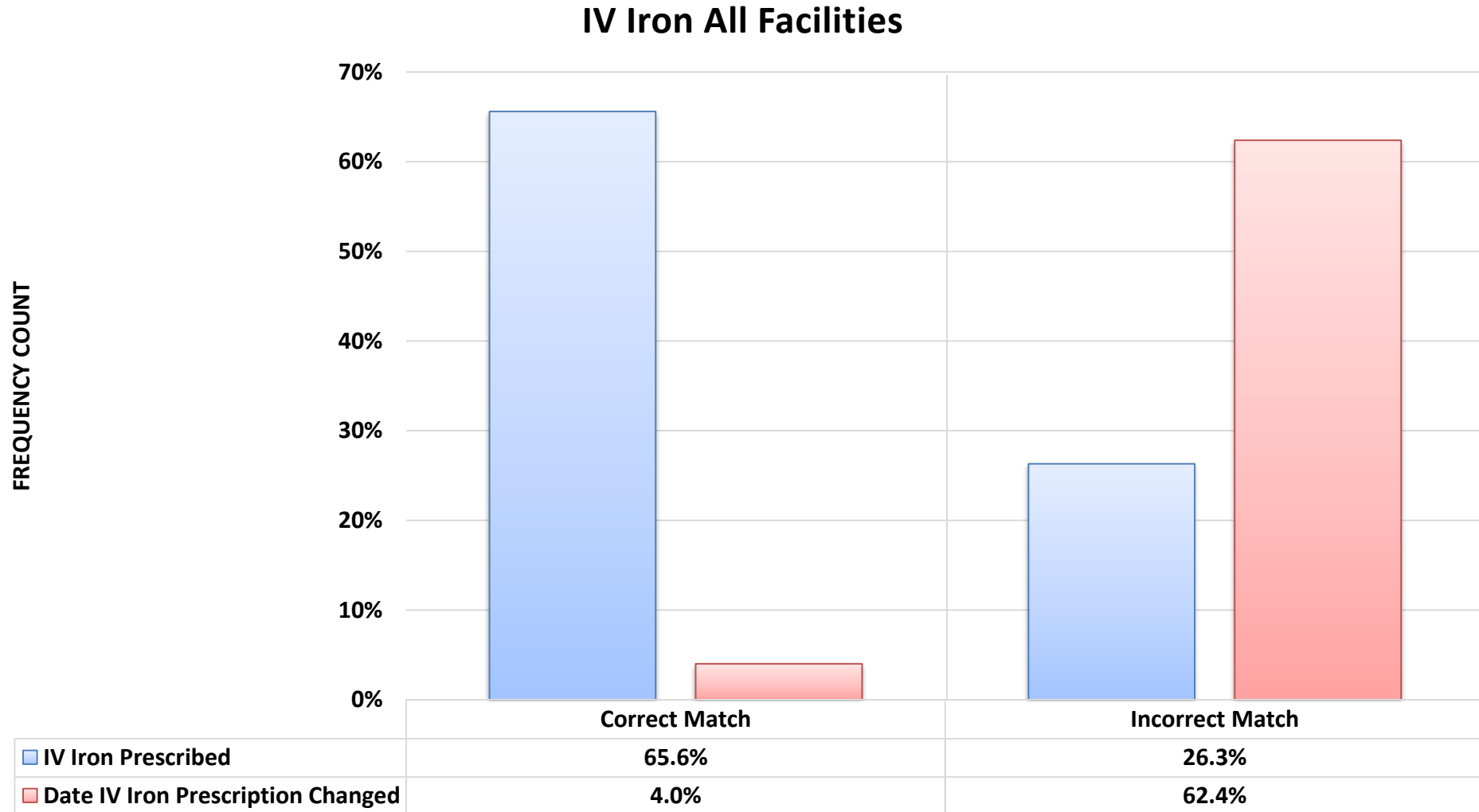
Let's Look at IV Iron

IV Iron in CROWNWeb

Iron	
*Intravenous (IV) Iron Administered	Yes <input checked="" type="checkbox"/> <input type="checkbox"/> N/A 02/15/2016 
<div>Iron Dextran (Dexferrum, Infed) Sodium Ferric Gluconate (Ferrelecit) Iron Sucrose (Venofer) Other</div>	*Intravenous (IV) Iron Iron Sucrose (Venofer) <input checked="" type="checkbox"/> <input type="checkbox"/> N/A
	Other Intravenous (IV) Iron <input type="text"/>
	*Intravenous (IV) Iron Dose 2500 <input type="checkbox"/> <input checked="" type="checkbox"/> N/A mg <input type="text"/>
	Other Intravenous (IV) Iron Dose Measure <input type="text"/>
	*Oral (PO) Iron Prescribed Oral Iron Prescribed <input checked="" type="checkbox"/> <input type="checkbox"/> N/A 01/01/2016 
	*Oral (PO) Iron Ferrous Sulfate <input checked="" type="checkbox"/> <input type="checkbox"/> N/A
	Other Oral (PO) Iron <input type="text"/>
	*Oral (PO) Iron Dose 1500 <input type="checkbox"/> <input checked="" type="checkbox"/> N/A mg <input type="text"/>
	Other Oral (PO) Iron Dose Measure <input type="text"/>

Ferrous Fumarate
Ferrous Sulfate
Ferrous Gluconate
Other

IV Iron in the Validation Project






Let's Look at Mineral Metabolism


Phosphorus in CROWNWeb


Mineral Metabolism

*Phosphorus (mg/dL) ☐ N/A 


Phosphorus Method 

*Uncorrected Calcium (mg/dL) ☐ N/A 

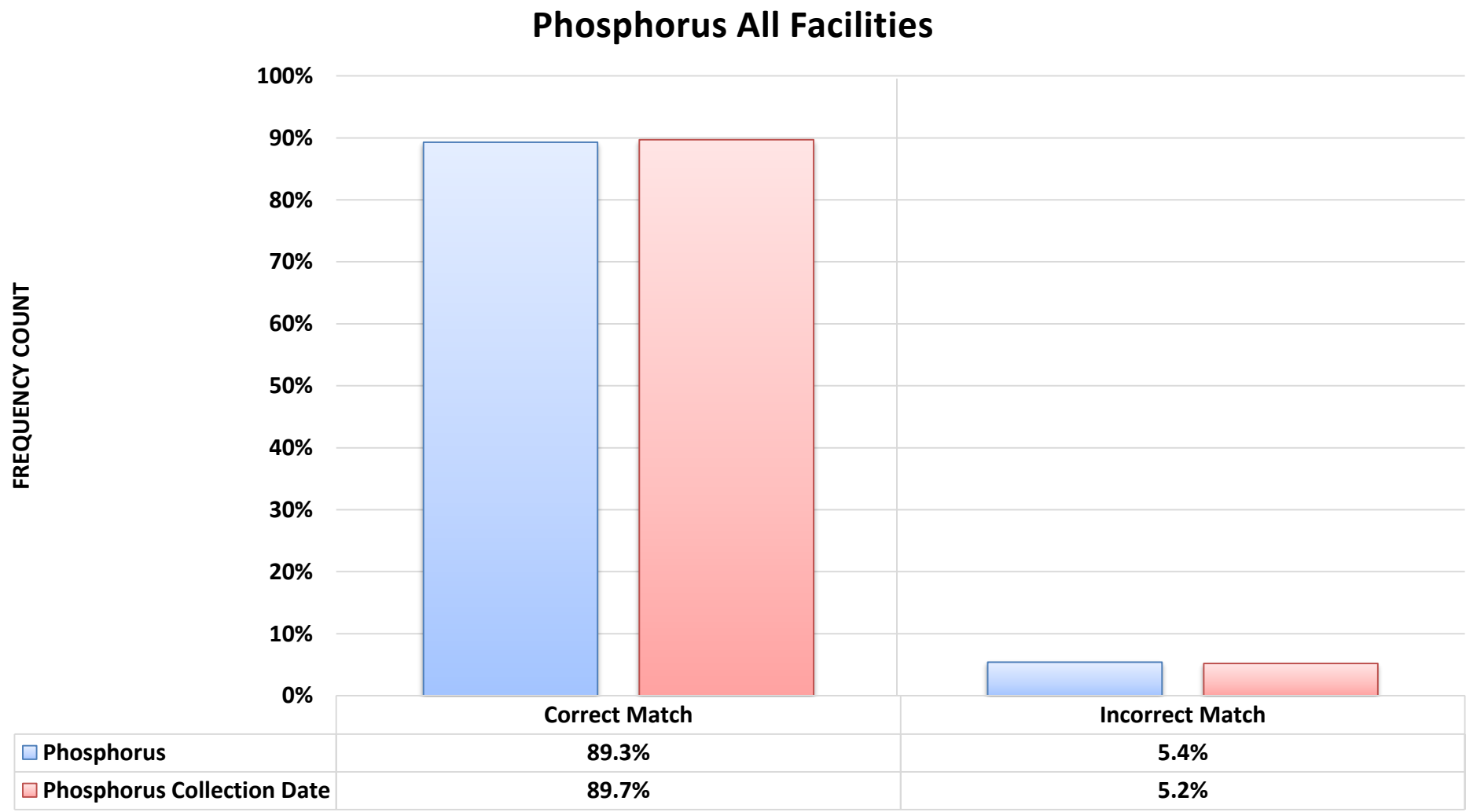
*Corrected Calcium (mg/dL) ☐ N/A 

*Serum Albumin (g/dL) ☐ N/A 

Serum Albumin Lower Limit (g/dL) ☐ N/A

Serum Albumin Lab Method  ☐ N/A


Phosphorus in the Validation Project





Calcium in CROWNWeb


Mineral Metabolism

*Phosphorus (mg/dL) ☐ N/A 

Phosphorus Method 

*Uncorrected Calcium (mg/dL) ☐ N/A 

*Corrected Calcium (mg/dL) ☐ N/A 

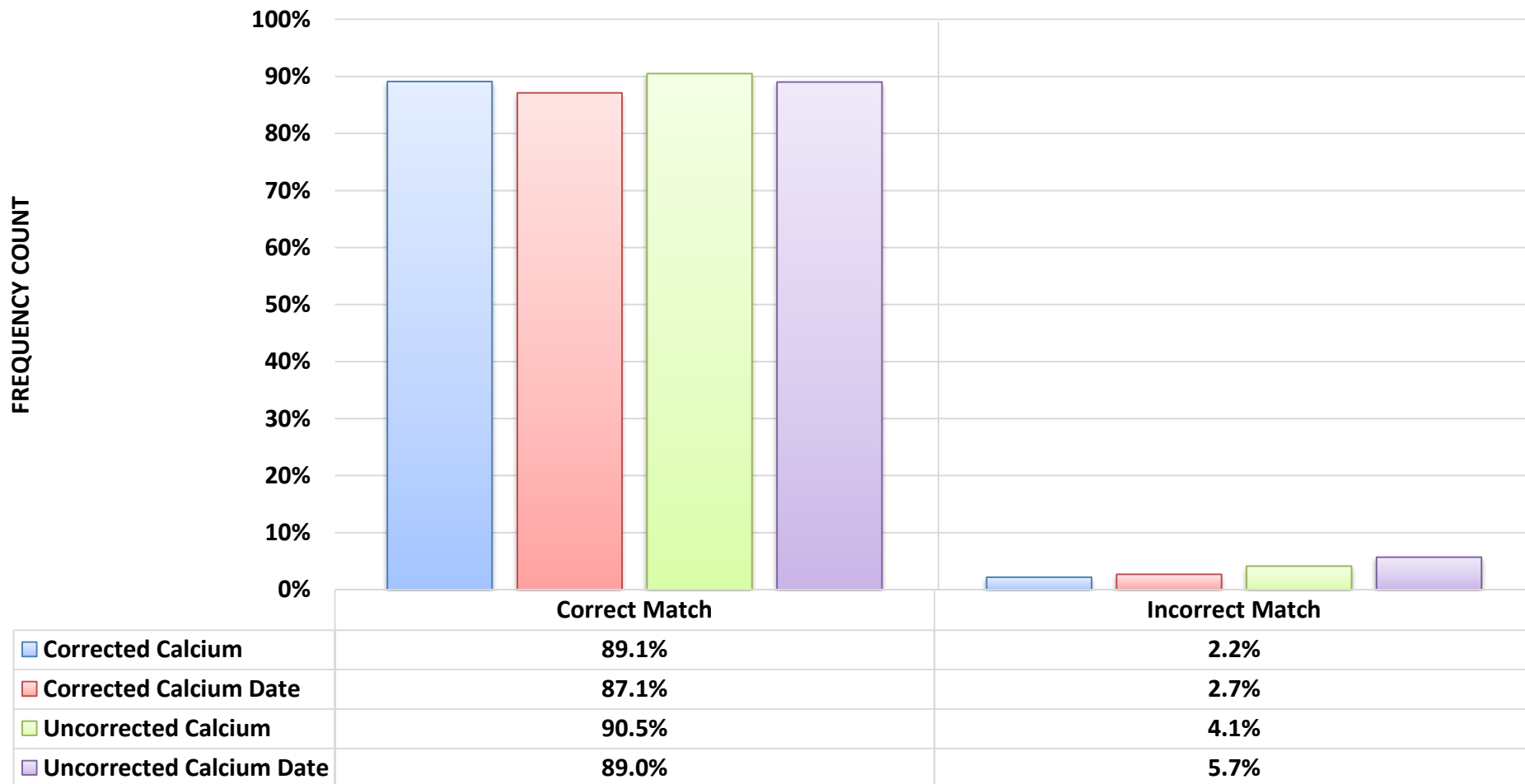
*Serum Albumin (g/dL) ☐ N/A 

Serum Albumin Lower Limit (g/dL) ☐ N/A

Serum Albumin Lab Method  ☐ N/A

Calcium in the Validation Project

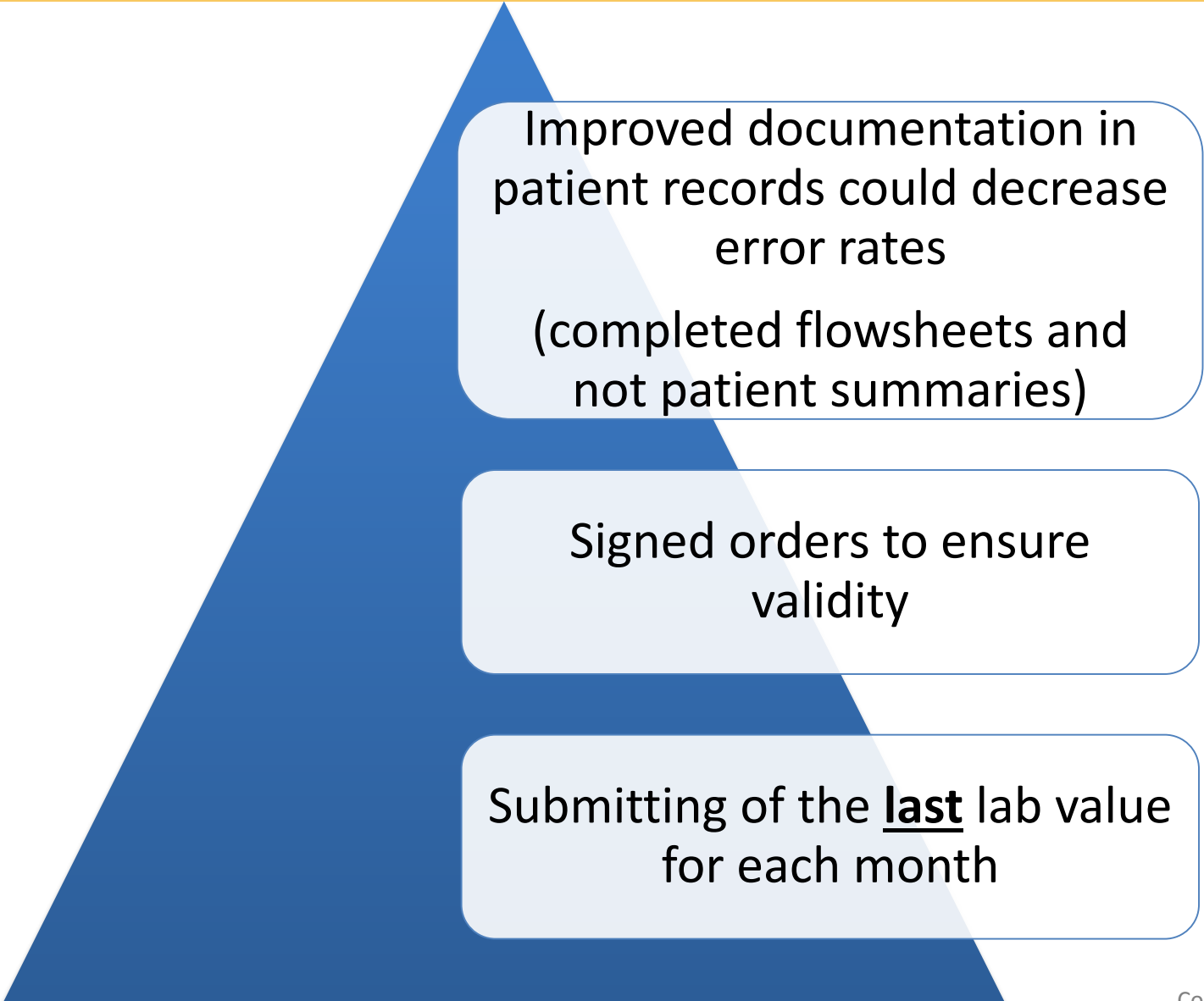
Calcium All Facilities





Opportunities for Improvement

Recommendations for Improvement



Improved documentation in
patient records could decrease
error rates

(completed flowsheets and
not patient summaries)

Signed orders to ensure
validity

Submitting of the **last** lab value
for each month



2016 Data Validity and Reliability Project

2016 Validation Project

Reporting period to be used for validation

- April – June 2016

Anticipated record request date

- Beginning of December 2016

Validation Request Letter

****This is a sample letter only****



SBA 8(a) Certified
Small Disadvantaged Business
Woman-Owned Small Business

TO: Facility Administrator at [Facility Name]

CCN#: [Facility CCN]

FROM: Rochelle Chalmers, Project Coordinator
Allegheny Science & Technology

SUBJECT: ESRD QIP Data Validity and Reliability Study – Request for Medical Records

ACTION REQUIRED: Please submit your response by [Date]

The Centers for Medicare & Medicaid Services (CMS) contracted with Allegheny Science & Technology (AST) to assess the accuracy of the Clinical Performance Measure (CPM) data entered into the CROWNWeb. Your dialysis facility has been randomly selected to participate in this effort.

Similar validation efforts were conducted in early 2014, 2015, and 2016; the findings from those studies have led to changes for reporting of performance measures as well as improved training efforts for facilities. Your participation will give your facility a unique opportunity to have input on any future changes to CMS reporting requirements and will allow you to identify any internal data submission workflow issues.

IMPORTANT; if you do not submit the requested medical records CMS will deduct 10 points from your Total Performance Score (TPS) on the ESRD QIP.

Note: any negative findings from the validation study will not count against your facility.

AST has randomly selected the following patients from your facility for medical record review:

- Patient A (hemodialysis) SSN#
- Patient B (hemodialysis) SSN#
- Patient C (peritoneal dialysis) SSN#

Questions





ESRD QIP

Today's Guest Presenter

Celeste Bostic, MIM RN BSN

Nurse Consultant ESRD/QIP

Division of Value, Incentives, and Quality Reporting (DVIQR)

Quality Measurement and Value-Based Incentives Group (QMVIG)

CMS| Center for Clinical Standards and Quality (CCSQ)



Celeste Bostic is a Nurse Consultant for the End-Stage Renal Disease Quality Incentive Program (ESRD QIP) at the Centers for Medicare and Medicaid Services (CMS). As a Nurse Consultant, Celeste serves as a subject matter expert providing a clinical perspective and supporting policy decisions for the program. She also is responsible for outreach and communications activities for the ESRD QIP Program.

ESRD QIP

More than 6,000 facilities participated in the Preview Period for Payment Year (PY) 2017

Approximately 180 facilities have not designated a facility point of Contact (FPOC) in the ESRD QIP system.

Thank You

FPOCs have access to the PY 2017 reporting documents

Special Note: System users are required to change their passwords every 60 days in order to keep their accounts active.

ESRD QIP PY 2017 Reporting Documents

Final Performance Score Reports (PSR)



Performance Score Certificate (PSC)

- Must be posted and visible to patients 1/1/17 – 12/31/17
- Facilities without a FPOC should request certificates via the QualityNet Helpdesk

Performance Score Summary Report (PSSR)

- QIP: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/08_ReportandCert.html



Performance Score Certificate



U.S. DEPARTMENT of HEALTH & HUMAN SERVICES
CENTERS for MEDICARE & MEDICAID SERVICES
End-Stage Renal Disease Quality Incentive Program
2016 Certificate of Dialysis Facility Performance – Part 1



Facility CMS Certification Number: 999999

** To obtain scores and rates, CMS compares data from 2012 and 2013 to data from 2014. **

Example Only

A Sample Facility, City, State

TOTAL PERFORMANCE SCORE: 87 out of 100
National Average: 73 out of 100

Clinical Measures of Quality	Facility Percent in 2014	National Median in 2012	Facility Percent in 2013	Facility Score
Hemoglobin > 12g/dL (Shows how well a facility keeps red blood cell counts at an acceptable level – lower score desirable)	0%	0%	0%	10 of 10
Kt/V Dialysis Adequacy – Hemodialysis (Shows how well a facility cleans blood during a dialysis treatment – higher score desirable)	96%	93.4%	93%	8 of 10
Kt/V Dialysis Adequacy – Peritoneal Dialysis (Shows how well a facility cleans blood during a dialysis treatment – higher score desirable)	N/A	85.7%	N/A	N/A
Kt/V Dialysis Adequacy – Pediatric Hemodialysis (Shows how well a facility cleans blood during a dialysis treatment – higher score desirable)	N/A	93%	N/A	N/A
Vascular Access Type – Fistula (Compares access to a patient's bloodstream via fistula – higher score desirable)	88%	62.3%	86%	10 of 10
Vascular Access Type – Catheter (Compares access to a patient's bloodstream via catheter – lower score desirable)	1%	10.6%	2%	10 of 10
NHSN Bloodstream Infection in Hemodialysis Outpatients (Shows how well a facility prevented patient infections during treatment – lower score desirable)	0.296	0.861	N/A	8 of 10
Hypercalcemia (Shows how well a facility managed patient metabolism of calcium – lower score desirable)	4%	1.7%	14%	7 of 10

Quality Reporting Measures	Facility Performance in 2014	Facility Score
Did the facility report anemia management information?	Yes	10 of 10
Did the facility report patient phosphorus levels?	Yes	6 of 10
Was the patient experience of care survey administered and delivered?	Yes	10 of 10

A Sample Facility
Street Address
City, State ZIP

Facility Medical Director

/s/ Patrick Conway
CMS Chief Medical Officer
Deputy Administrator for Innovation and Quality

ESRD QIP Questions

QualityNet Helpdesk

7 a.m. - 7 p.m. CT

Monday – Friday

E-mail: gnetsupport@hcqis.org

For ESRD support, e-mail: gnetsupport-esrd@hcqis.org

Phone: (866) 288-8912

TTY: (877) 715-6222

Fax: (888) 329-7377

ESRD QIP Mailbox:

ESRDQIP@cms.hhs.gov



Latest News and Reminders

EQRS System Maintenance

The ESRD Quality Reporting Systems (EQRS) and Enterprise Services applications that support the Centers for Medicare & Medicaid Services (CMS) will not be available beginning:

Thursday, December 8 at 9:00 p.m. ET

Through

Monday, December 12, 2016 at 11:59 p.m. ET

CROWNWeb 5.1 is scheduled to be released during the EQRS System maintenance.

Important Dates for 2016

Clinical Month	Date of Closure for Clinical Submissions
September 2016	November 30, 2016 at 11:59 p.m. ET
October 2016	December 31, 2016 at 11:59 p.m. ET

2016 CROWNWeb Town Hall Events

Thursday, December 15, 2016

2016 CROWNWeb New User Training

Tuesday, December 6, 2016

All Events are at 2:00 PM Eastern

You may register for all events at www.MyCROWNWeb.org

Thanks for Attending!

**Our next CROWNWeb
Town Hall will be held:**

Date: December 15, 2016

Time: 2pm-3pm ET



For Further Information...

Help Me Form: <http://help.MyCROWNWeb.org/>

QualityNet Help Desk: 1-866-288-8912

Website: <http://www.MyCROWNWeb.org>

Please let us know what you think by following the link!

A survey will pop up in your browser when the session ends.