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HARP Account Needed for EQRS Users

The Centers for Medicare and Medicaid Services (CMS) is planning to release the Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP) for End Stage Renal Disease (ESRD) Quality Reporting System (EQRS) users by the end of February 2020. All EQRS users must complete a HARP account setup.

What is 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. It also provides a single location for users to modify their user profile, change their password, update their challenge question, and add or remove two-factor authentication devices.

EQRS users previously created accounts through the Enterprise Identity Data Management (EIDM) system. To supports users' transition to HARP, CMS automatically migrated all existing EIDM accounts and user roles to HARP. To complete the migration, current EIDM account holders must: [Log in to HARP](#), register a two-factor authentication device, and select a challenge question.

Non-EIDM users or interested individuals can create a new HARP account within minutes by going to <https://harp.qualitynet.org/register/profile-info>.

For more information on HARP, please visit <https://harp.qualitynet.org/login/help>.

Register for HARP Training

Please join CMS and the ESRD Outreach, Communication, and Training (EOCT) Team on Thursday, February 13, 2020 or Wednesday, February 19, 2020 at 2:00 PM ET for HARP Training. These informative educational sessions will provide attendees with an overview of how to: Establish a HARP account as an existing Enterprise Identity Data Management (EIDM) account holder, register for a new HARP account, manage roles in EQRS, and approve/reject role requests in EQRS as a Security Official.

February 13, 2020

February 19, 2020

The Journey to EQRS

CMS introduced the first phase of the transition to EQRS in 2017 with the addition of the Facility Dashboard to the Consolidated Renal Operations in a Web-Enabled Network (CROWNWeb) system. CMS has focused on migrating sections of the applications to EQRS through multiple releases and will roll out numerous updates in 2020. Below is an overview of CMS' EQRS system objectives and system design.

EQRS System Objectives:

- Include functionalities from three ESRD Legacy Systems: CROWNWeb, the Renal Management Information System (REMIS), and ESRD Quality Incentive Program (QIP).
- Support the submission of patient, clinical, and provider data, as well as the production of performance analyses on quality data for ESRD Programs.
- Serve as the system of record to create system, architectural, and process efficiencies.
- Provide a user-centric system that will fulfill the ESRD Program's business, and patient needs of the ESRD Community.

EQRS System Design:

- System design plays a major role in the strategic plan to develop a coherent EQRS application, by utilizing user-centric methodologies.
- Scaled Agile Framework (SAFe) methodologies are used to achieve outcomes critical to EQRS; thus, accelerating the delivery of value, improving fit-for-purpose of delivered solutions, and burden reduction.
- Human-Centered Design (HCD) is being utilized to increase user engagement, which focuses on the needs and goals of the ESRD Community. To volunteer and get more information on EQRS System Research, please email the EQRS System Design Team at EQRSUserResearch@cms.hhs.gov.

Access materials from the [January 30, 2020 Town Hall](#) event for more information on the Journey to EQRS.

Clinical Closures

Clinical closure dates apply to all Collection Types (Hemodialysis and Peritoneal Dialysis). Additionally, clinical data submissions apply to all submission methods.

	Clinical Closure Date
December 2019 Clinical Month	March 2, 2020 at 11:59 PM PT
January 2020 Clinical Month	March 31, 2020 at 11:59 PM PT
February 2020 Clinical Month	April 30, 2020 at 11:59 PM PT



For future newsletter suggestions or other questions, contact: craft@MyCROWNWeb.org

The information included as part of this newsletter is current as of the date of release.

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