Outpatient Quality Program Systems and Stakeholder Support Team

February 2021 Town Hall
Presentation Transcript
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Oniel Delva: Hello, everyone and welcome. Thank you so much for joining us for today's event. This is the February 2021 Town Hall Event. For this event, we wanted to take time to highlight current EQRS data reporting requirements and help to answer some of the EQRS questions that have been frequently submitted to our team, as well as the QualityNet Service Desk over the past couple of months. As a lot of you on the line may know, we saw on the 29th of January CMS did send out an announcement that data reporting for Clinical, ICH CAHPS® Attestation, as well as Clinical Depression Screening, just data reporting for those, are currently suspended in EQRS, but there are still elements of data that users need to continue to report in the system. Today, we're going to spend the majority of our time together highlighting what the different reporting items are. And then we'll also delve a little deeper and talk a little bit more about the data reporting suspension for the three items that I just mentioned a moment ago. If that is new to you, there you go, we'll talk about it more in a moment, but if you received that announcement on the 29th, today is just kind of a reminder as to what that means and what you should do at this time.

Now, a few more things before we continue, we do know that a lot of information will be shared today and we want to make sure that you are all well informed and with that said, today's call is being recorded and a copy of that recording will be made available via the Events page on the MyCROWNWeb.org website within 10 business days. So, really in the exact same location where you registered to attend today's event. We, of course, will work to make the recording available as soon as possible, but we do ask that you allow some time for us to get that content posted. Now, with that said, though you might be thinking, wow, that's a lot for me to get the recording, but we do have already available to you a copy of the slides that we will be viewing today so you can go to the MyCROWNWeb.org website. Again, go to the Events page in the same location where you registered for todays event, so you will look where it

says February 2021 Town Hall and you will have the ability to access a PDF copy of the slides.

Also, before going to the next slide, we are providing closed captioning for today's event. If you need closed captioning, just message our team via the chat option that we see available here, and we will make sure that you are provided with the necessary links in order for you to get the captions. Now, continuing with some additional housekeeping items, as we set the stage and prepare for today's discussion, moving forward, we will be using a new or this new webinar platform GlobalMeet to host all of our Town Hall Events. This platform helps to support more connections and as you can see displayed on screen some information regarding the fact that we are streaming audio over your computer speakers. So, what does that mean exactly? Well, it means that you don't need a telephone line in order to participate, to hear us as part of today's event. It helps to free up a line at your facility. So, really, all you need are just head phones or computer speakers and you will be able to follow along with us for the audio portion of today's call. But, if you do need a telephone line, that was included as part of the confirmation email that was sent when you registered for todays event, but you can also message the team and we can work to ensure that you are given the phone number to hear us if you are having challenges with hearing this part of the streaming audio that is done primarily with this call and this webinar platform.

Now, as we go on today, as you are streaming your audio, if you come across issues or the audio is paused. [brief pause] I did that on purpose, where the audio is paused or if it starts to break up a little bit, you can hit the F5 key or hit the "Refresh" option that's displayed at the top of your web browser to resume the audio so that you can hear it without a problem. Again, if you are streaming audio, just hit the F5 key or "Refresh" if the audio starts to break up or you are having challenges. Now, a couple more things for housekeeping. If you're currently hearing an echo, okay? Echos are caused by multiple connections to the same event on one computer. Meaning if you click on and open multiple browsers with this event playing, then it might cause an echo, and what you will need to do is close all but one browser and that will help to eliminate any echos you might be hearing if you are streaming the audio. Alright, and then just a couple more things. Of course, the way that you would submit questions to us because the lines if you are connected via telephone or if you are streaming, of course, you can hear us, primarily me, but we cannot hear you. But, if you have questions as we go on with today's event, we do ask that you please use the chat option that's located on the left-hand side of your screen, where you can ask a question and we'll be more than happy to work towards providing you with a response. Now we do know that there are some questions that might come up, as

always as you may know as well, questions that might come up that require additional research, where we are limited on the information that we're able to view today or the direction that we're able to provide today, so there might be questions that require additional research that might need to be performed, whether it be by our team or by your ESRD Network, and so on. If there are questions that are submitted today that we're not able to provide you with an immediate response to, please send it to CRAFT@MyCROWNWeb.org and we'll work toward providing you with a response as soon as possible, so CRAFT@MyCROWNWeb.org. Okay? One moment.

Okay, I'm going to move on to the next slide. Hello, for those of you who may have joined our calls in the past. You may know the voice and seen the picture that we typically include as part of our Town Hall Events. My name is Oniel Delva and I will serve as your presenter for today's call. We'll cover a lot of good information, I believe, of course, as to what you need to know at this time to help you with data reporting in the EQRS application.

Now, here is just a quick overview of the agenda that we are going to follow with the items that we'll be highlighting today. Starting with what we'll spend some time on, covering the EQRS Data Reporting System, just the announcement that went out at the end of January. Now, the announcement did go out after our January Town Hall Event, so we're just gonna spend some time just to break that down a little bit, to talk about what exactly is meant and the process that you would follow at this time, and the bulk of our time today we're gonna spend just looking at current EQRS data reporting requirements. While certain items are postponed as far as the reporting in the system that doesn't mean it's everything. There are still some things that you would work towards entering in the system and what are those deadlines and when should you work to get those entered in the application. We'll talk a little bit about 2744s. Just tips, we did cover last month. Hopefully, you had an opportunity to join us for that session. We did cover the 2744 Annual Facility Survey on the January 2021 Town Hall Event, where we provided the in-depth, step-by-step training during that session. If you have not had an opportunity to view or listen to or access, if you did not attend that Town Hall Event, it is available to you. We recommend going out to the MyCROWNWeb.org website. You can go to the Event tab and click on the January Town Hall Event so that you can access the 2744 training that was provided. Now, today we're just going to give some tips that will, hopefully, assist you with data cleanup and, hopefully, assist you with the what you need to know as it relates to the 2744 in the EQRS application. And then, we're gonna wrap today up with some FAQs. We worked with the QualityNet Service Desk in obtaining some of the top questions that they are

receiving, as well as our team, we looked at some of the top questions that we've received, whether it be during a Town Hall Event or that are submitted to the CRAFT mailbox, and we pulled those, and we'll help to provide a response to those questions today, and hopefully, they will help to answer questions that you might have. But, we do also understand that sometimes when providing a response to one question that might end up creating another question. So, we should have some time today as well to help with some of the questions that we receive via the chat option that's displayed as part of todays event. Then again, if there are questions that require the additional research, such as I'm looking at one right now that came in with regard to Kt/V, that might need additional time for a response to be provided. So, thank you so much for those of you who started sending questions in early. You can submit them as we go on with today's event. We'll tackle them as we can, whether it be verbally, at the end, once we get to the verbal Q&A portion that I will help to lead, or members of the team can help to answer via the chat as well, so you can keep that open to look for [a] response that may be submitted to you regarding the question that you sent in. Alright.

Now, let's go ahead and jump right into the first area of focus for today's discussion. The first area of focus is the EQRS announcement. Now, CMS is aware of the challenges that some users are facing currently with entering data via the EQRS application once the EQRS rollout occurred back in November, and of course, CMS is mindful of you all and our team and the support teams are mindful of you all. We want to make sure that the data that is reported or entered into the system is accurate, it's up to date, it's reliable, as well as want to make sure that you are given enough time to obtain the necessary information to plug into the application. So with that said, CMS, as I mentioned, is aware of the challenges that [are] currently being faced by some users and with that, if you are experiencing challenges with the system, now we're going to go over a couple of things in a moment that, hopefully, will help with reducing the number of challenges or amount of challenges some might be facing, as far as [a] reminder to use the Chrome web browser versus Internet Explorer, but if there are things that you are continuing to experience, CMS is looking at those and you can always make sure that information is reported to the QualityNet Service Desk if it's system-related challenges, and if you need help regarding training, education, or anything like that, that's us, as well as your Network is available to you to assist however possible. So, CMS, as well as all supporting teams are continuing to monitor and assess the system and the issues and things that are ongoing to help ensure that processes and different things are put in place to improve the overall user experience. So, to help with supporting that, I did share a little bit ago regarding the January 29 announcement. So, just being mindful of the challenges and things users might be facing to help with reducing the

burden the users might be encountering at this time, they postponed or sent out an announcement announcing the postponement of the Clinical, ICH CAHPS® Attestation, as well as Clinical Depression Screening and Follow-up Plan data reporting in the EQRS application. So, the suspension for that we have in a moment, we're going to show the calendar for which month it starts with, but really it began with the September 2020 clinical month for the Clinical component. And, I do know that ICH CAHPS® and Clinical Depression Screening reporting for those two elements were going to be due next month, early March, late March, and so on, but no, the data reporting for those have been suspended, so users should not send any additional information to CMS as it relates to these three items as of right now while CMS is continuing to look into implementing solutions and things to support data reporting needs, support the user community, and so on. So, while you might see changes occur in the system, which we will cover in a moment as well, as far as you might say, "Well, wait a minute, Oniel, I see in the system the clinical month for September 2020 now reflects closed; it was open before, meaning I can report data, but now it's closed, so what does this mean exactly? Am I now going to get penalized for not entering information in?" The answer is no, you would not because data reporting for those are suspended right now, and when it's announced that data reporting is to resume for those months and those different items, of course, a new due date will be provided as well to help you with working towards getting that information plugged in the system by the new date that is provided. Alright? Now, looking at the month, we touched on this just a moment ago, starting with the September, here you can see we wanted to provide a clear breakdown for you, so that you will see the September 2020 clinical month, October 2020, November as well as the December 2020 clinical month data reporting for those. Basically, it is suspended until further notice. As mentioned, you may see changes occur in the system. I know that December would have been due by March 1st, so you might see that still reflected in the system, but just know that you can disregard what is currently shown as if it's in the application as the due dates for those months, that CMS is also working on changes or updates that can potentially be applied to the application so that it reflects correctly what is due at this time, I guess you can say. But with that, just know that the reporting for Clinical, ICH CAHPS®, Clinical Depression Screening [is] currently suspended until further notice, and new dates will be announced, and when they are announced, then you will know when you can plug the information in the application, and then your submission deadline that is provided for those items. Now, just to wrap up the announcement that went out as it relates to the suspension of Clinical data and ICH CAHPS®, as well as Clinical Depression Screening, here this slide is talking about the Facility Dashboard and Clinical screen. Now, I did touch on this a moment ago, but we wanted to make sure that we provide you with this information once you access a copy of the slides and

there is also an announcement that is planned to go out tomorrow, February 26, to provide additional direction as well, but here it's reiterating the point that I mentioned a moment ago, the fact that the submission deadlines that will display on the Dashboard, the Clinical screen, the ICH CAHPS® Attestation screen, as well as the Clinical Depression Screening screens within the application will be updated as needed. So, the impacted months or the impacted submission deadlines that were in place before with the focus on the Clinical screen, I do know as you know, in parenthesis next to a particular month, you will see "Open" and we all know "Open" is an indicator that CMS is still accepting clinical data for that reporting month within the EQRS application. And we all know when you see closing parenthesis that means that month is closed and CMS is no longer accepting clinical data for that month, right? So, with that said, with the months that are currently suspended as far as data reporting, as noted earlier starting with September, October, November, and December currently those clinical months, while the system may reflect next to one of those months or all of those months in parenthesis "Closed" at this time there is no penalty, you are not being penalized, of course, because at this time, the data reporting is suspended. When a new date is announced, then those months will be opened, reopened, I guess you can say, once again, giving you the ability to enter data for those months. Now, I will say before wrapping this up and moving on to the next section, anything that you've already reported is not lost. It is in the application. So, anything that maybe before the data suspension took place, you started reporting data for September and just didn't finish, whatever you entered is still there. It's not lost. It's still in the system being held on to. And, once the months are reopened, in a sense, you now can go back in and finish entering the information for what you did not get a chance to do. So, kinda [the] same thing for the other months. You have not started entering data for those months lets say, but yet you see that it's closed, so no, don't worry about impact, negative impact because it will be reopened, and I hope what I'm saying is making sense. I know I'm kind of saying it in different ways because I know it's good to repeat at times and say in different ways to help ensure that the message is effectively communicated. So, I am kind of covering the same things different ways to, hopefully, help answer any confusion, any questions you might have. The question might be, "Hey, what is the new date, Oniel, can you tell me now?" We don't have that information as of yet. We are, of course, continuing to work with CMS and once that information is announced, we, of course, will be one of the first ones, the EOCT Team, will be one of the first ones and your ESRD Networks will be one of the first groups to get that information out to you as soon as possible. So, hopefully, that helps, once again, with that.

I'm just going to scroll through the questions real quick. Looking at some of the questions that we've received so far before jumping to the next

topic, hopefully, to help with answering things as we go along. "What about January and February," came in. We don't have information as of yet regarding January and February. It will be as the extension or the suspension takes place, we will help to capture those months that are impacted and will help CMS to communicate, and we will help to communicate out those months as well.

"Are admits and discharges impacted?" No, we'll talk about admits and discharges in a moment and one of the things that we want to stress, actually, we're getting ready to talk about it now. One of the things that we want to stress and CMS wants to stress is that the suspension of the data reporting, it applies to Clinical data. So, that's hemo, peritoneal dialysis, vascular access data. So, those three and just anything that's on the Clinical screen, impacts ICH CAHPS® Attestation. If your facility was one of the facilities that was required to log into EQRS, go to the Facilities tab, pull up facility attestation, and indicate that your facility is not eligible for the ICH CAHPS® Attestation if your facility was required to follow those steps and complete that within EQRS and data reporting, for that is suspended. And another thing is the Clinical Depression Screening—data reporting for that is suspended. But, admitting patients, discharging patients, the forms, making sure that your other information is up to date, all of those we will continue to do at this time, which I'm getting ready to reiterate in a moment as well. Great questions I see that we're getting so far. Please continue to send those in. One more and then I'll jump into the next one.

"Do we need to still do the Depression Screening so that we can enter when reopened?" Great question. Well, the Depression Screening information that you're reporting in the EQRS application right now would have been what you did in 2020 now, I believe, and correct me if I'm wrong. I apologize, I believe it's for 2020, what was done before. So, let me just say it like this so it's not confusing. What you're reporting now in the EQRS application is what you did before. Okay? So, for 2021, yes, you would still continue to work with a third-party vendor or you would still be required to follow the steps and process necessary for Clinical Depression Screening. Oh, the third-party vendor, that's for ICH CAHPS®. For Clinical Depression Screening, yes, you would still do whatever you need to do at the facility level to obtain the information so that you can report it in the application for [the] future and so on. Right now, as far as the suspension, we're primarily just focusing on what you would enter in EQRS itself, but everything else that you would do at the facility level as it relates to working to meet ESRD QIP requirements, working to meet your facility-level requirements, working to maintain patient information and your internal database if you are part of a large dialysis organization, or if your information is electronically entered in the

system, any and everything that you would do to make sure that the data is up to date and maintained, you will continue to follow those. The only thing is the reporting of that data in the EQRS application for those three items are currently suspended. So, hopefully that helps to answer those questions as well.

Alright. Let's go ahead and move on for what is currently required and then I'll continue to look at some of the questions that are being submitted via chat as well to, hopefully, help with providing a response before we end today's discussion. If you are having any issues, let's see there are a lot of issues with admissions. Just a reminder to please make sure you are using Google Chrome when accessing the EQRS application that will, hopefully, help with reducing any challenges that you are seeing. But, if you are continuing to encounter issues and you … please work with the QualityNet Service Desk and if you are part of a large dialysis organization and the challenge is with maybe your internal system or the information transferring from your internal system to EQRS, work with your corporate office, and so on. Just identify those proper groups and individuals that you would work with to get what is needed right now to get that information plugged in the application as well. So let's go ahead and continue. Great questions that we're receiving so far. Please keep them coming. We'll answer what we can and if there is anything that we're not able to provide an immediate response to, of course, you can send to us afterwards via CRAFT C-R-A-F-T@MyCROWNWeb.org. Alright. Let's jump to the next section for today's discussion.

Now, we talked about a moment ago, of course, what's currently suspended, but here is just a brief overview of what's not suspended that users must continue to make sure that the following tasks are completed, items within these different areas, such as, admit[ting] and discharg[ing] of patients, completing CMS forms, add[ing] and update[ing] details on the treatment screens. So, if there is a new permanent doctor-prescribed change in the patient's modality, you want to make sure that information continues to get added to the system as needed. Resolving accretions. Now, accretions, we're not going to have time to fully go into a breakdown of what that is, but just a high-level overview, accretion is if there is a patient that's been identified as ESRD and that patient should be admitted to your facility in EQRS, but the patient is currently not admitted to your facility in EQRS [and] that creates a discrepancy between the two: the enrollment database and the different systems that EQRS is currently looking at or plugged with or to. Where now, that patient might need to be admitted to your facility in the EQRS application, so that's accretion. If you need additional information regarding accretions, you can always access the Education page on the MyCROWNWeb.org website, and there you will see complete training resources that give a full breakdown of the

steps that one would follow in order to resolve different things and accretions in this case, and as well as an overview of what exactly that section is representing in the application. And then, also, update facility details. We'll touch more on some of those in a moment as well. Alright. Let me go ahead and continue.

Here, we're providing just a couple reminders and a breakdown of the ESRD Systems Data Management Guidelines. Now, the ESRD Systems Data Management Guidelines [have] been in place for a while, I will say, at least, what year is this, 2021? At least, I wanna say, five years maybe? There have been different versions and updates of the ESRD Systems Data Management Guidelines that [have] been made available, but primarily it's saying the same thing. Users need to continue to follow the ESRD Systems Data Management Guidelines where [they] provide just, really, standards and an overview of the process that you should follow. It's a CMS-approved document that breaks down the frequency by when you should do something, as well as what you should do to support three primary areas: Data Monitoring, Data Measuring, and the majority of it is Data Management. So, the Data Management component it says covers these items at a minimum. At a minimum, this is what you need to do with entering data in the EQRS system. These items are required, meaning these: admit patients; discharge patients; you need to add these forms by these particular dates; you need to enter currently suspended, but when it is due, enter Clinical data, and some of the other areas as well. Now, of course, there are other things that you might do at the facility level or that you want to make sure that gets plugged in EQRS on a regular basis, but this document helps to break down to support these three areas, at a minimum, here is what the different items that need to be plugged in [to] EQRS and the frequency that should be followed.

Here [is a] high-level overview of the information on the slides here, you can access this at any time. The ESRD Systems Data Management Guidelines [are] available via the MyCROWNWeb.org website if you have not accessed [them] already. Anywhere on the site, you will notice on the left-hand side of the screen a little icon that you can click to access the PDF version of that document and save it to your desktop, and when a new updated version is available, then you can replace the existing with the new version, and an announcement would go out to let you know when that is available. But, going back to this slide here, [is] kind of a high-level overview of what is included here on this slide. The Data Management Guidelines provide and highlight, call out three Tiers of Data Managers. Okay. Three Tiers with the first being Tier 1. This individual is at a facility, really, it would be you, the majority of you, the majority of the 239 folks who are on, it just jumped to 241, but the majority of you who are on for today's call, you would fall in the Tier 1 category of the Data

Manager, where you're at the facility level, you are helping to enter data in the system, you're helping to update facility details as needed. Tier 2 individuals provide technical assistance, really, if you think about your ESRD Network, they fall in the Tier 2 category, where they're helping to support Tier 1, and helping to support the next level up as well, Tier 3. Really, it's the ongoing loop of working to support each other. And then Tier 3 is just the support teams that CMS has in place. So, really, all of these individuals within these different Tiers, these groups, everyone plays a role with making sure that data gets entered, updated, maintained somehow within the EQRS application, so it's good to know where you fall in, of course, as it relates to making sure that information is either entered, it's monitored, or it's whatever else, measured within the application.

Alright. So, now we're going to take a look at the different areas within the system and as [they] relate to the different Tiers, and then we're gonna pause to see additional questions we may have gotten via the chat as well, and then we'll jump into our next session. So, hopefully, you all enjoy the pause in between where after covering a section, just kind of scroll through the chat, and see questions that we have received to help with providing a response before we end today. Again, if there is a question that either we don't get a chance to answer, whether it's very technical or maybe time doesn't permit for us to cover that question verbally, then please send it to us afterwards at CRAFT@MyCROWNWeb.org or if it is a question that maybe you require the assistance of your Network, feel free to reach out to them as well. And lastly, if it is a system-related question or challenge the QualityNet Service Desk is always available to assist as needed.

Alright. Here we go. So, looking at Tier 1, again, Tier 1 is primarily you—those individuals who are on if you are at a facility. At this time, here are some of the things that you would focus on making sure is entered, is up to date within the application. Looking at Data Monitoring. So, Personnel. There, you would want to make sure that you review in the EQRS application you have the proper staff at your facility, key personnel who interact with patients. Maybe it's the physician, whose name needs to appear on the drop down in the application where it asks for the attending practitioner. Maybe you are a person who enters the form in the system or enters data in the system regularly. You want to make sure that your name is included on the Personnel screen. Here, you see frequency all the way to the far right, it says at least quarterly, but do it whenever possible. Let's say you just had a staff member start last week, please go in and update the Personnel section within the EQRS application to make sure that the proper person is reflected there, so that as you are completing forms and entering data in the system, the right name displays in the drop-down

[menu] for either [the] attending practitioner or person completing this form.

Next, you can see we're going to jump into Data Managing. Data Managing is a big chunk. Let's look at Facilities. So, Facilities. Make sure that in Facility Summary the facility information is up to date. Now, that one frequency it says annually, but, of course, same thing, you want to do [it] regular[ly] as needed. Now, the reason why you want to do that regularly, and maybe even the reason why it's listed as annually, the annually piece is because, as a lot of us may know, data that's entered in EQRS gets carried over, transfers from one screen to another, really, to help with data entry, with reducing the amount of time that it takes for information to be reported. So, let's say facility phone number and address is required on at least three items. I'm just making this up. Let's say it's required on at least three items. When you're doing something in EQRS, well, the system knows addresses are required here, here, and here. So, let's save the user some time. Instead of requiring to enter the data three times, just please make sure you enter it once on this particular screen and it carries over automatically for you. So, it is listed at least annually because on the CMS-2744 form that information has definitely your facility's contact address and additional details, so you want to make sure that it's up to date. Now, if a change occurs, you don't have to wait until the end of the month or the end of the year to make that update. Update it as soon as possible. Make sure it is up to date.

Okay, let's jump into Patients. Patient Admit and Discharge Patients and then, next it says complete the forms 2728, 2746 forms. Now, the Admit and Discharge patients, please make sure that is done within five business days of when the patient is first treated at your facility, or if the patient discontinues dialysis or transfers somewhere else, please make sure it is within five business days that is entered. Again, keeping data reporting up to date, doing that as soon as possible will help to definitely eliminate potentially weeks later—"Oh no, I forgot to enter a discharge." Please make sure that you do that as soon as possible.

For the forms, of course, working toward making sure that they are entered within a timely manner. It's recommended that within ten business days for the 2728 form, but no later than 45 days of when regular chronic dialysis began, and then for the 2746, within 14 days of death to please make sure that is entered in the system. Alright. Key Personnel within five business days of when there is a staff change.

The action list, that's the Accretions component that I talked about earlier, here you can see the frequency listed there as well. If it's new or

reassigned, so within 15 days of when it's issued, and if it's listed as under investigation, you want to work toward resolving that within 30 days. Then, right now, as we all know, the big thing is I like to call "the 2744 season,"—that's what we're currently in right now. We are focusing on making sure that form is completed by the date that's provided, really, by your ESRD Network for the local due date. So, follow that direction that's provided to you by your Network for the 2744. Alright. So, that's Tier 1. For the next Tiers, I'm gonna kinda go through them somewhat quickly since [they apply] more so to Network-level folks and support teams. But, here you can see, same thing, the following for Data Monitoring and Data Managing, at least different items or areas at that level for Tier 2, they are working towards monitoring, making sure information gets reported, reaching out to facilities to make sure that the necessary information is received as well, so that they can work toward getting things entered by the frequency that is outlined as part of the Data Management Guidelines as well.

And then, the last one for Tier 3, you can see smaller lists for this group here, where monitoring and managing facilities, patients, as well as the Action List. Some other things that they are focusing on as well. Alright. So, before we jump into the next session, I see we have about 20 minutes remaining, so we do have just two more main sections to cover, so let me jump into the questions here. Let me see what we might have. Someone said that the 2746 is not allowing them to enter primary, is it primary cause of death or primary information for this patient? I will say if it's not allowing you to enter the primary whatever-you-call-it, cause of death, primary cause of renal failure, "primary something" that's entered on another screen, remember data gets carried over from the Patients screen, the medical info section for 2746, it gets carried over from the Treatment screen, as well to complete the 2746 and 2728 forms. And also, I see the submitter is from a DaVita facility. Please, if it's anything regarding admits and discharges for your facility, if you are at a FMC, DaVita, DCI facility, or if you work with an EMR vendor to get data electronically entered for you in the EQRS application, work with your corporate office or your vendor first to make sure that the data is correctly reflected in your internal system, so that it gets carried over and plugged into the EQRS application for you on your behalf. Alright?

Let me see another question, pertaining to, "A patient was at my facility and discharged on the 15th of December and then went to a hospital and then the patient passed away later on the February 6, do I need to complete the 2746 for this individual?" For that scenario, no. The system should recognize and should not require you to complete the 2746. So, let's break it down a little bit. The person goes to the hospital December 15, but does not return back to your facility. We know, based on the direction that's

been given to us, if a patient is gone for 30 days plus for the reporting month, you would enter a discharge in the EQRS application, so you would discharge the person from your facility in EQRS. Okay? Now, if the patient passes away within 30 days of when the discharge occurred at your unit, within 30 days, then you would enter the date and cause of death, and at that time, EQRS would recognize that, "Hey, you are the last outpatient dialysis facility to treat the patient and it's the person [who] passed away within 30 days," so therefore, you would be the one required, your facility would be the one required to complete that 2746 form. But, if the patient passes away more than 30 days after being discharged from your facility, you want to make sure that you update the record to reflect that the patient did pass away, but the system should recognize that it's been 30 plus days and should not trigger for that 2746 to be completed by you.

Alright. Let me do one more. We have about 17 or so minutes remaining and I have just a couple more sections to cover. Let me see. Report we can run to see all active personnel at the facility, so question is, "Is there a report that we can run to see all active personnel at our facility in EQRS?" Great question, but no. At this time, there are only two reports on the Report screen within EQRS, primarily focusing on patients: Events and Patient Roster. You can always go to the Personnel screen within the EQRS application and do a search by your facility name. So, go to Facilities, and then search facility name or facility and personnel, and then search by the name. There, you will see a complete list of everyone who has been entered as affiliated with your facility staff members and they will be listed there. So, while there isn't a report, and I'm using air quotes, report that you can run that is available via the Reports screen of the application, you can always go to that screen and look at the information that is displayed.

Let me jump to the next section and then we'll do the same thing, kinda jump back in for some of the questions, and then from there we'll work towards wrapping up today's discussion. Thank you again, great questions coming in. Hopefully, some of the things that I've covered and some of the questions that I've answered [helped] to answer questions you might have. If you have additional questions … I did see another one come in regarding patients being hospitalized for over 30 days and if you should enter a discharge. There is a document that is available on the Education page on the MyCROWNWeb.org website. Alright. So, as I'm talking, you can navigate there if you'd like, go to MyCROWNWeb.org, click Education, and there, you should see a document that is called EQRS Admit Discharge Items. I'm going to have to pull it up myself, but there you will see that document, and you will be able to follow the instructions. There are at least ten scenarios that are listed there and I'm pulling it up

right now as I'm talking to you. That's why I'm sounding like this. [chuckling] But, there you'll see, I believe, there are ten scenarios that break down exactly when and what you would follow as [they] relate to admitting and discharging patients to and from your facility. I'm pulling it up right now and it is called the … I apologize. It's going a little bit slow on my end. It's called the … It's not pulling up, I apologize. It's the Admit and Discharge Guidance document, EQRS Admit and Discharge Guidance. You will be able to follow along what's required there. Okay?

Let me go ahead and jump into the 2744 now, and then we're gonna do FAQs, and we're gonna work towards wrapping up today's discussion. Now, for the 2744, as mentioned, we did cover last month, during that Town Hall, the complete breakdown, step-by-step instructions on what you would follow in order to complete the form, whether you are at a dialysis facility or if you are at a transplant center. That training provided an overview of the different forms and how you would work towards making sure that you complete those or how you can complete those. Now, I will say, I do know a lot of us, we know that historically there have been reports 2744 reports in the EQRS—oh, I'm sorry—in the then CROWNWeb system, that we were able to use to help us with the 2744 process. With the rollout of the 2744 in EQRS, at the time of the rollout, reports weren't and currently aren't available. So, of course, you continue to work with your ESRD Network as possible to try to troubleshoot and find where some of the errors might be coming from, and hopefully, I'm going to provide a couple tips that, hopefully, will assist you as well with your effort with working to resolve 2744 errors.

Alright. So, here [the] overview of the 2744, it's completed by transplant facilities, as well as dialysis facilities. It's completed on an annual basis. Key thing to know is that there are four screens within the application that carry data over automatically on to the 2744 with pre-populating fields. It's the Facility Details page or screen. Patients, which have the demographics because there are questions about eligibility status, questions about the discharge, cause of death, different questions that [are] listed there. The Admissions screen and the Treatment screen, and also for patients in the demographics, there are questions about vocational rehab, and so on that are populated on the 2744 form, and the system pulls information automatically from these different screens. So, of course, please, you want to make sure that the data on those screens are up to date and correctly reflect what's going on with the patient's treatment so that that information is reflected accurately on the form.

Now, continuing here, Troubleshooting 2744. Please make sure any time there is a permanent doctor-prescribed change in the patient's modality, so they are transferring from in-center hemo to home CAPD let's say, any

time that occurs, you want to make sure that you update the patient's record by adding a new treatment. Not editing the existing, because if you edit the existing, what's going to end up happening is the system is going to show: okay, John Smith started, was admitted at our facility let's say January, I'm going to make this up, January 2019, but the treatment didn't start until February 25, 2021. Wait, something is off here, so that's gonna throw the system off. So, what you wanna do is you leave the existing entry for the patient's treatment [be]cause the system keeps a detailed history and shows the different changes that have occurred over time for the patient's treatment. Where it shows first the person started in-center hemo, and then three months later changed to home CAPD, and then however many years later, the person maybe got a transplant, and then from there returned to dialysis, and so on. So, it's keeping that history of everything that's occurred with the patient, so you don't want to edit the existing. Now, of course, if it was entered incorrectly when the patient first started, then yeah, you have the ability to edit the existing, so it's reflected accurately, but if it's a new doctor-prescribed change, you want to make sure you click the new treatment option so that it will reflect similar to what you see with this screenshot here, where it keeps that history of what is occurring or occurred with the patient.

For the next tips and tricks for troubleshooting, please make sure that you go in and you update any system discharges. On the 2744, when it's being completed, it has the section that covers or highlights the discharge reason, discharge from the facility, and the reason listed, whether it be the person transferred to another facility, was discharged because of death, discharged because the person discontinued dialysis, whatever it might be. Here, you want to make sure that it is reflected accurately because system discharge is not a discharge reason on the 2744 form. So, please go in and check and update any system discharges to the correct discharge reasons. And system discharges occur when a patient transfers to another facility and they're admitted to that other facility, and you don't enter a discharge on your end. That's why it's reflecting a system discharge, so please go in and make the update then.

Couple more troubleshooting and then we'll jump into the FAQs, [be]cause we have about nine minutes remaining. Troubleshooting for 2744, as mentioned, while there aren't the 2744 reports that we have historically used, on the report screen, there are two reports that you can use to assist you with getting an idea of current patients at your facility and assist you with just an overview of some of the events and things that have occurred at your facility. You can run the Patient Events Report and Patient Roster Report and just look at the data there and see can any of the information that's available there assist you with resolving 2744 errors and

if so, perfect. So, hopefully that can help you with troubleshooting and getting those taken care of as well.

Last couple slides for troubleshooting. Please, when you access the PDF copy of the slides, you can click on the link that's available here, that will take you to the instructions on CMS' website. Actually, I believe you can mouse over it, and click on the link now, and it should take you there. That's 2744A for dialysis facilities, and I'm going to jump to 2744B for transplant centers, so please, you can click the links when you access the materials, and so on to help you with following the instructions that's called out on the form.

Now, let me just jump to the FAQs because we have about seven minutes remaining to help with time. So, of course the the ideas, the troubleshooting tips that were just provided, just to assist you in any way possible with resolving 2744 errors. The reports that are out there, they may or may not contain everything that you need to assist you with resolving errors, but you can use [them] if available, or if needed, or however you see fit to assist you with resolving those, and then, of course, please remember to use Google Chrome, Google Chrome to access the system because that helps with the necessary links, necessary forms, necessary options to display when using the application.

Alright. So let's jump here. So, FAQ number one, "Can you assist me with unlocking my account?" For accounts, just remember to avoid being locked. Please make sure that you update your account passwords regularly. As we know, HARP is the application to use to assist users with registering for access, so use your HARP account to keep it up to date, keep up to date with your two-factor authentication options, keep your passwords up to date. If you need assistance with resetting your password, you can use this account recovery link that's available on the QualityNet.org website to assist you with resetting the password on your own.

Alright. Next question is, "Field 24 on a 2728 form, which is [the] date [the] patient started chronic dialysis at current facility is incorrect. Can you assist me with updating this field?" Now, as we talked about before, the 2728 form is pre-populated based on information that's entered on various screens, so for this one, it's the Admissions screen. So, this would be the date that was reflected as when the person was admitted to your facility. If you are at a facility that manages the data reporting at the facility level, you can always go to the Facilities screen in order … I'm sorry, the Admit and Discharge screen, to make sure that the right information is reflected there, and as long as the form is still in a "Saved" status, and hasn't been submitted as of yet, you can update it and that

information will be reflected on the form. If you are at a facility that works with an LDO where it electronically submits data in the application, please work with your LDO representative first or EMR vendor before working to enter data in EQRS as you want to make sure that it's reflected correctly on both ends.

Next one, "I am having issues printing a 2728 form. Can you assist me with printing this form?" Just a reminder, please use Google Chrome to access the EQRS application. It works best with Chrome. Here, you can clear your cache and cookies, and quick instructions when you access a copy of the slides you can get here. Basically, you wanna click control, shift, delete, and just get to the options to clear all data basically, and from there, you can log in the system to see what options are displayed, and if it's an older form that was prior to when CROWNWeb went live, that was prior to when EQRS went live definitely, you may need to contact your ESRD Network or even the initial facility to get a copy of that 2728 form. Just a couple more questions for us. Next question is, "I don't see the option to complete a 2746 form. Can you assist me with completing this form in EQRS?" Remember, for the 2746 option to display, you need to have indicated the date and cause of death on the Patient screen. If that's not done, then the form will not be triggered, so please make sure that's reflected in the system in order for the option to display. If you are at an LDO, of course, please make sure that you work with them so that the proper discharge reason is reflected as the patient passing away.

Alright. Just a couple more questions. "I noticed an error on the 2728 form after I submitted it. How do I fix this?" For this, please work to make sure that your 2728s are up to date before you submit that data in the system. But, after submitting it, if you notice an error, please work with the QualityNet Service Desk. Contact them so that they can put in the necessary tickets or follow the process to see how they may be able to assist you with implementing an update to that form.

Then, the last question that I have—perfect timing, because we have about three minutes remaining. This is an admit discharge question, "When attempting to admit a patient to my facility, I received a possible duplicate patient error message. Can you assist with admitting this patient?" Reminder that the system uses six key identifiers when admitting the patient to the facility to determine whether or not this person is already in EQRS. It uses: first name, last name, date of birth, gender, Social Security Number, and Medicare Beneficiary ID. If those six items match exactly what is currently in the system, then it presents a message of an exact match—bata-boom, bata-bing—there is nothing much you need to do. You can follow the process to admit the patient at your facility without a problem. But, if you enter any of those slightly off, transpose a number

here or there, it will present that possible duplicate message. This is to help ensure that duplicate patients aren't in EQRS. In this case, you would contact your ESRD Network to assist you with reviewing what is there and what you're entering so that the patient is correctly entered in the EQRS application. Alright?

So with that, we have only about a minute remaining. I did cover a lot and thank you to those of you who submitted questions to us. Hopefully, the answers I provided earlier and the answers I just gave a moment ago with those questions assist you. If you have further questions after today's event, please feel free to contact the Help Desk. Contact us as well. And in a moment, I'm going to display this link here, a post-event evaluation will display. Please click this link where it says "click here" for the short post-event evaluation. We do look at those and they assist us with future topics for our Town Hall Events, so take a moment and click the link now. We're going to leave it up, go ahead, and mouse over where it says "please click here to complete the evaluation." Go ahead and click on that, and it should bring up your Internet Explorer, and take you directly to the post-event evaluation. Thank you so much for your time, thank you for joining us for today's discussion. We hope to see you on a future Town Hall Event. Have a great day everyone.