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Outpatient Quality Program Systems and Stakeholder Support Team

August 2020 Town Hall

Presentation Transcript

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Oniel Delva: Hello, everyone. Once again, thank you so much for joining us for today's event, this is the August 2020 Town Hall event focusing on EQRS/CROWNWeb data reporting. We are thrilled to be able to resume these Town Hall events with you and it would be nice if we're able to play the "Welcome back, Kotter" theme song on today's call for those of you who may be familiar or know the show. But, of course, you know we can't play the theme song. So, however, you can hum it along if you like as we go through these housekeeping items. So, as you can see, we are happy to just to be able to continue and resume these Town Hall events with you. We really appreciate you sharing a part of your Thursday afternoon with us as we go through and just discuss some of the things that have taken place as it relates to EQRS, CROWNWeb, some of the things to come, and ways you can continue to work towards managing data entry in the system.

For today's call, we are going to start off with some important reminders as mentioned there are a lot of things that have and will continue to take place within the next few months as CMS continues to work towards fully implementing the ESRD Quality Reporting System, which we will just refer to as EQRS on today's call. We've talked a lot about EQRS and CMS' migration or efforts to migrate the CROWNWeb system, as well as the additional legacy applications to EQRS, which includes, you know, CROWNWeb, ESRD QIP, and REMUS. Actually, you now use the EQRS URL or web link to access CROWNWeb. Additionally, you use EQRS if you're, if you have and you attempt to access the facility dashboard, and most most recently, the ESRD QIP user interface for the payment year 2021 preview period that's happening right now. So we'll talk a little bit more about the changes and and break this down a little bit further. We'll cover reminders and discuss important changes to come that are designed to support your data reporting needs. We'll look at just third and fourth quarter data reminders, as well as we'll wrap up today by taking a look at just some educational resources that you can access via the www.myCROWNweb.org, as well as www.qualitynet.org website.

Today's call is being recorded and a copy of the recording will be made available within 10 business days along with the PDF copy of the slides. The slides are actually available now in the exact same location where you went to register to attend today's event, and that is exactly where you will go to access the PDF copy of the slides and the recording when it is made available. I also wanted to mention that for today's call, we do have a closed captioner on as you multitask at your facilities and you do have the ability to expand the multimedia viewer option that is located in the bottom right hand side of your screen. As the captioner is captioning the things that will be shared as part of today's event, so, you have the ability to use that if needed. Now, all lines are muted. They are muted upon entry

to help with reducing background sounds, but we, you know, do encourage if you have questions as we go on with today's event—questions based on the content that's covered, of course, you do have the ability to use the Q&A option that is located in the bottom right-hand side of your screen when submitting questions. We do ask that you please select "All panelists" so that everyone who is on as a panelist will be able to view your questions as we work towards providing a response. Now, of course, as the note at the bottom indicates, some questions may come in today that we do not have, you know, time to fully break down and provide a response, or a question that might require additional research or, you know, question that's specific to you and your facility. If a question is submitted and we either don't have time to answer that question as part of today's event or if it requires additional research, of course, we do encourage that you submit those questions following the today's event to CRAFT@myCROWNweb.org and the team will receive it and we'll review and work towards providing you with the response. So, that's CRAFT, c-r-a-f-t at myCROWNWeb.org. And we do like to have a little bit of fun, of course, as we go on with our events. So, today we do have two polling questions that will be asked just as a way to give you an opportunity to communicate with us since you can hear us and we can't hear you. You can interact with us with these two polling questions. They're not being graded, of course, and we just want to give you a chance to just, you know, interact with us as mentioned.

My name is Oniel Delva and I'm with the ESRD Outreach Communication and Training Team and I will serve as your host and presenter for today's call and we also have other subject matter experts on the line who will help with answering questions submitted via Q&A. And, of course, please note that any information that that is shown as part of today's event are all fictitious. No real patient information will be viewed during today's presentation.

Now, let's jump into the latest news and reminders. As mentioned, of course, a lot has taken place since our last Town Hall event and a lot of things are to come within the next few months as CMS continues to work towards the full implementation of the EQRS global application. So, let's cover just reminders related to data submission, HARP, the ESRD QIP, and a new announcement related to transient patient entry in CROWNWeb. So, we'll take a look at those in a moment. We often hear from the community regarding how helpful it is to use the EQRS facility dashboard for reminders and announcements, so please continue to use the facility dashboard for reminders related to currently due and passed due forms, notifications, and accretion-related discrepancies that may require your attention, system discharges, etc. The facility dashboard provides an overview of the clinical data that is still due for the open clinical months

and shows the submission deadline for the current methods, or for the current months, I should say, not methods, as you can see on the form—the screenshot here that we pulled is just showing. We, of course, had to cut it off a little bit where the bottom portion you don't see everything that's fully displayed as part of the dashboard, but, of course, you know, if you've gone out and you've looked at the dashboard, you know what's listed there. But just, you know, I'll use this for the remainder regarding upcoming clinical deadlines, the submission deadline for … that are, you know, still marked as open in the EQRS CROWNWeb system. And, of course, when submitting clinical data, please remember to provide all available data related to hemodialysis and peritoneal dialysis treatment, as well as vascular access data.

For the next couple slides, we will discuss HARP and, of course, I know that a lot, if not everyone on today's call, have heard of HARP and we are going to drill down a little today just to discuss how you can use HARP, as well as EQRS, but how you can use HARP to continue to maintain your access to EQRS. I know a lot of people, including myself, may establish an account for, let's say, system access or establish an account to be a part of some sort of list, but you may not go back to review and update the information that you may have selected when you initially created the account. So, we'll take some time to just talk a little about some of the things that maybe you did not select initially, that you can go back and, you know, maybe update for your HARP account to help maintain your ongoing access. So, we'll just talk briefly on that. HARP is used throughout CMS and it allows individuals to create just one account in order to access CMS applications on many CMS applications, including EQRS and after establishing a HARP account, all users will really use this system in order to just, you know, continue to maintain their access to the CMS applications within their scope.

Now, we will cover the ability to select additional two-factor authentication devices. In a moment, as you can see from this slide here, what we're calling out that we're going to focus on, but before we get to that, I wanted to talk a little bit about just the ability to select the Challenge Question, which you can see is right above the the red box that's highlighted here. When establishing a HARP account, users aren't necessarily prompted to set up a Challenge Question to complete the registration. Now, the process is designed when establishing an account, is designed to be as simple as possible, of course, to allow you to set up your account. However, it is important that you also select an answer [to] a Challenge Question and doing this will help you with updating your password should you forget it down the line and when selecting additional two factor authentication devices. So, please update your HARP profile to include a Challenge Question if you did not do it initially when you set up

your account. And taking, you know, the extra step now will help with eliminating extra steps later that may be required, you know, if you forget your password or you didn't change your password in time or whatever it might be. Setting up the Challenge Question does assist you with the ability to manage and update your information on on your own on your end. So, so, please go ahead and take the extra step and take care of that if you have not done so already. For the two-factor authentication piece, you can select multiple two-factor authentication devices to help ensure that you have immediate access to the device needed for the security code submitted to allow you to access [to] the system. So, email is set up as the default two-factor authentication device and email is needed, but you do have the ability to update the email address that is located or stored, however you want to look at it in your HARP account. So, to update the email, of course, you click the blue "Edit" button in the upper right in order to update that, but for the two-factor authentication option where you get [to] have the ability to select additional devices, you click "Two-factor authentication devices"—that link in order to be taken to the screen that does allow you to set up, really, as many two-factor authentication devices as you need because you might not have access to that email address that, you know, the code will be sent to, but if you have your mobile device set up, you can use that … select that as the device that you'd like to receive the code update to.

Now, for this slide, it provides an overview of the two-factor authentication options in HARP and to help with time I'm not going to go through and read all of the descriptions listed here, so please access the PDF copy of today's slides for the full description if you need to access [to] this later to know. Okay. If I select the option to verify … let's say, what exactly does that mean? What's that option in HARP when, you know, updating your two-factor authentication options? So, you do have the ability to do that, but let's just take a look real quick just to break down, just [to] provide some of these descriptions, and what they are representing. As mentioned, email is set up as the default two-factor authentication device and email cannot be removed. An email address is needed for your HARP account, but you do have the ability to update it and edit the email address on file. If you no longer have access to that email or, you know, maybe it's easier for you to to get updates via another email address, whatever it might be on your end, you can make the update and you can select SMS to receive a text message code, select voice so that you receive a call with the code, or download and select the available mobile app options to access or obtain the system-generated codes that will allow you to log in to access your account. So, again, here you can set up as many as you'd like and this is just an overview of the options in the system.

Looking at this information here. A moment ago, we went over just, you know, HARP and how that is used to maintain or manage your account, but, of course, EQRS is the application that you would use in order to manage your role and access to the different user interfaces that are currently and will be added to this EQRS global application. Of course, if you need training, we've gone over HARP in how to manage and maintain roles within EQRS as part of previously held training events, and also the new user training events that are provided monthly we are in the process of updating that to provide instructions related to EQRS, and how one will, you know, continue to work to maintain their access. So, you can go out to the myCROWNWeb.org website if you need training and additional information related to how you can ensure that your account is up to date, so that you can continue to access these applications.

Here, we're gonna just talk a little bit regarding just some recent system updates that have taken place. Of course, you know since the last time we we held a Town Hall event to support, to support, to support—that is a hard word for me to say, apparently—to support COVID-19 related of reporting … CMS back earlier this year initially added two ICD-10 codes to the CROWNWeb application: ICD-10 code U07.1 indicating COVID-19 virus-verified or -identified, and then U07.2, indicating a COVID-19 virus not identified. However, you know as the month continued and such, and, really, to help ensure that accurate information, or give you the ability to report what's needed, I should say, in the system, CMS did apply an update back on the 13th of July, where the ICD-10 code U07.2 COVID-19 virus not identified was removed from the system. So, the one indicating COVID-19 virus identified is still in CROWNWeb, and please, of course, you know, use the code as needed, and we wanted to provide that as an announcement. As it relates to changes to the application, things maybe you've noticed, or maybe not noticed, but of course, we want to provide you with that now. One of the biggest additions this year that has taken place is the addition/inclusion of the ESRD QIP user interface to the EQRS application. Now, this is the biggest change to data reporting for ESRD QIP since the inception of the program and with this, the complete transition of the roles and functionality took place. Where users historically were required to use the ESRD QIP system, which was a separate application in itself, to access QIP reports and scores and so on, but now to help with the user experience and to help with, you know, supporting data reporting needs, and just again, the migration of these three legacy applications into the one EQRS global app—the roles and functionality for the ESRD QIP was added to the EQRS global app, which a lot of you, if you have QIP roles have seen and you are aware of this change. And speaking of QIP, we wanted … we wanted to provide a reminder of regarding the payment year 2021 preview period. It is set to end on the 31st of July at 11:59 p.m. Pacific. So, please if you are either a

facility point-of-contact or facility viewer in the ESRD QIP application and you need to, you know, review the reports' scores that are in the application, please do so and for facility points-of-contact, please submit any new inquiries by the end of the preview period, again, set to end on the 31st of August at 11:59 p.m. Pacific, which is also September 1st at 2:59 a.m Eastern. CMS will continue to review submitted inquiries and, you know, even after the end of the preview period. And actually, one of the things that will be taking place tomorrow and we are excited to announce as part of today's event—CMS does continue to review the application, the EQRS app, CROWNWeb currently, and, you know, the ESRD QIP user interface, and apply updates as needed, again, to support the user experience—one of the things that will be implemented tomorrow will be the inclusion or addition of email notifications for inquiries. So, when CMS responds to an inquiry that a facility point-of-contact may submit via the ESRD QIP user interface, the facility point- or the points-of-contact, whether it's facility or corporate point-of-contact within the ESRD QIP UI, will receive a notification informing them that CMS has responded to the inquiry. Now, that email notification basically is just notifying them to "Hey, go to the ESRD QIP UI to view additional details, so that you can reply or provide information that CMS may be requiring as [it] relates to that particular inquiry." So, the QIP UI is the method, the process, the system—however you want to look at it—that will be, that's used, of course, for all inquiries during the preview period. After reviewing your score, if you see something and you want to and need to submit an inquiry, please use the ESRD QIP UI. But this email notification, again, will be a way to just inform you if you do serve a role within the ESRD QIP UI, serving the role, then it will notify you that, "Hey, an inquiry was responded to," giving you the ability to go and review that. Okay.

Alright. Actually, we do have time, but now let's go ahead and let me launch this. This is our first polling question. We did say that we do have a couple [of] polling questions built in as part of today's event as a way to give you an opportunity to interact with us a little. Of course, this isn't being graded. We just want to see if you had a chance to and just to see the community based on the 227 folks who are currently connected. This question is asking, "Have you reviewed your payment year 2021 ESRD QIP score and report via the ESRD QIP user interface?" So, have you done so? Alright. Remember we mentioned that the payment year 2021 preview period is set to end in a few days? Really, August 31st at 11:59 p.m. Pacific. So, have you gone in and reviewed your ESRD QIP scores and reports via the ESRD QIP UI? Now, I'm seeing some of the responses here. I guess based on role maybe some of you who are responding, you might not have an ESRD QIP role, so maybe that's the reason why I'm seeing some of the nos come through, but of course, just, you know, have

you gone in and accessed that screen if you do have a role, as it relates to ESRD QIP? And have you downloaded your reports, reviewed the scores, maybe even submitted an inquiry if needed? Alright. So, let me go ahead and do a quick countdown giving you a chance to make your selection and click the "Submit" button to participate. So, I'm a counting down in three … two … I see three in progress. It's always interesting when I start counting down. That's when I see additional selections or folks, like oh, "let me go ahead and submit my response." Alright. I see one in progress, but let me go ahead and help with closing this out in three … two … and a one. Alright. So, close this out and share the results with all. Again, this—you're not being graded—we just want to give you a chance to interact with us a little bit. So, of the 129 shows that responded or those who responded, I should say, about 70 said "yes," they've gone in [to] access their ESRD QIP scores and report; and about 56 indicated "no, I haven't gone in to access that now." Of course, for the "nos," I'm going to ask some of you maybe you indicated "no" because of your role. Maybe you don't have a QIP role and you're not required to go in and you don't do anything on that end. If that's the case, fine. But, of course, if you are one who needs to submit inquiries or review the information, please do so as soon possible. Alright. Thank you so much to those of you who participated as part of our first polling question. We do have another a little bit later that'll give you a chance to interact with us once again.

Now, for the next couple slides, you know, as you can see, it's an important announcement. As noted down at the bottom, it is our goal to help ensure or help to provide you with things to come and announce major changes. And first, this is the first time that, you know, this major change is going to be announced and additional information will be provided in the upcoming months as we hold additional events, and distribute additional materials. But, this is announced that the "transient patient status" field will not be included in EQRS. All patients must be admitted to a facility and patients who come from another facility may be admitted as a transfer in, you know, the same as before. However, the transient status "yes" or "no" option that is currently in CROWNWeb will not be included in EQRS. Now, here, let's look at this a little bit further just to break down, you know, what I just mentioned as it relates to this particular item. So, CMS, of course, reviews all fields usage and functionality in the current CROWNWeb system as it plans the EQRS rollout and changes are made to, you know, maybe what is available now or what will be available. Changes are made based on CMS requirements, user needs, data quality, you know, and so on. The removal of the "transient patient status" field helps to support data quality and helps to really eliminate the possibility of two admissions at the same time for a patient. It helps with ensuring that only one admission and patient record is, you know, in the ESRD or the patient registry at a time. Now, doing

this, of course, it helps to ensure that patients are correctly admitted and discharged within a timely manner from, you know, facilities. So, as an individual is, you know, coming here to receive treatment, then it is accurately showing that the patient is at. I'm just going to use the ABC dialysis receiving treatment and when the patient leaves that facility, it will accurately show that the patient then, you know, either went to another facility or whatever it might be. It helps to capture and note exactly where the patient is receiving his or her treatment. Now, additional details will be provided as we go on. As mentioned, with distributing the newsletters that are sent out with training that will be provided, as well as you can see as the last bullet point indicates that the September Town Hall event we will go more just in depth with providing details regarding this change. So, again, reminder: all patients must be admitted to a facility in EQRS CROWNWeb and, you know, the "transfer in" option will continue to remain as the option, as you've you know, maybe done as the patient comes to your facility, but just the the one field indicating transient status "yes" or "no"—that field will not be included with the EQRS rollout. Okay.

Alright. Continuing now with just discussing just some data submission reminders, reminders for third quarter, fourth quarter. Now, the screenshots and some of the things that will be shown as we move forward towards this EQRS rollout, you know, will look slightly different, of course, but for the screens, the majority of the information that's reported it's really, it's the same. It just will have a different look and feel as you navigate through through the system. So, this is really to help with capturing, supporting data cleanup with some of the things that will be required at the start of, you know, 2021 with some of the forms that will be … that will be due now. Let's start off real quick by just discussing patient attributes. Now, the "patient attributes" screen when currently in CROWNWeb, when a patient goes through the admit process, there are three screens currently viewed and the patient attributes is one of the screens that is viewed, where it has the patient's, you know, name and Social Security number, and such. And again, reminder that this is fictitious information that's being shown: race, ethnicity, the address, and so on. Now, the information that's entered here on the "patient attributes" screen, it does carry over and helps with populating information that is included as part of various forms and areas within CROWNWeb. So, for example the 2728 form is—let me back up and say, for example, the "patient attributes" screen includes information that is populated on the 2728 form, information that's populated on the 2744 Annual Facility Survey that is done typically at the start of the year. So, you know, in additional areas too with that, please review and help to ensure that patient information is correct, is up to date, on the "patient attributes" screen. I do know that on this screen, it does have if the patient is currently enrolled in

Medicare, you know, what's … what's their status as a pending application, are they currently enrolled, and so on. Well, please make sure that this information is, you know, updated and accurately reflecting the patient status because on the 2744 Annual Facility Survey, that is one of the questions or one of the areas where you want to make sure that this information is right here. Because when it comes to completing the 2744, if you see an error or something on that particular form, that error might not be fixable on the form where it will be. It requires that you access the "patient attributes" screen to make the update. So, you know, again, going back to what I said earlier, it it helps to take the extra step now to make sure that the information is correct to help eliminate, you know, [the] possibility of additional steps or confusion down the line when completing, you know, like the 2744, as well as—we do see a lot of times, I will say—emails that are submitted to us via CRAFT from, you know, facility representatives who indicate, "Hey, I've submitted a 2728 and after it was submitted we noticed that something was wrong on the form. We noticed that, you know, maybe the Social Security number was, you know, numbers were transposed or, you know, maybe the address … maybe the name, something is wrong on the form after we've submitted it." Well, of course, you want to make sure that you review the information closely before you submit, but [on] the 2728 forms, for example, changes cannot be reflected on the form at the facility level after the form has been has been submitted. You would have to contact the QualityNet Help Desk for support, but you can eliminate that step by first making sure that the information is accurate on the "patient attributes" screen, of course, before submitting the the form.

Alright. Now, just jumping in real quick looking at the treatment information section again, focusing on third quarter, fourth quarter data, reporting data cleanup, making sure that the information is right in the system for the treatment information. We do as part of training and, you know, reminders and such, we do stress and inform anytime there is a permanent doctor-prescribed change in a patient's treatment, please go in in the system and update the patient's record by adding the new treatment summary. Now, don't edit the existing treatment record, but you would add a new treatment record because the system keeps a detailed history of everything that takes place as it relates to the care that this patient is receiving, whether at your facility or facility prior to, you know, their arrival at yours, whatever it might be. It keeps a detailed record of everything that's transpired, so it would show the patient started on this particular date, as in-center hemo, let's say, but over the course of, you know, treatment over time, they change from in-center or hemo maybe to home CAPD, within three months maybe they change to something else, and so on so in order for the system to know when to trigger certain forms, as well as to accurately reflect information on the 2744 form, the Annual

Facility Survey that's done at the start of each year. Please make sure that, you know, you go in and you add the treatment record versus, you know, trying to edit the existing [record] because that could cause an error and plus it might end up showing something like, "well, the patient started at my facility in January 2020," but if you edit the existing treatment versus adding a new item, then [it] will show but treatment didn't start until like August 2020, then it's gonna basically throw it off. So, please remember to add a new treatment record versus editing the existing [record] when updating records to reflect the correct treatment that the patient is receiving at your facility. For this one here, I'm not going to go into great length and detail and break down, you know, clinical, but, of course, we do touch on these regularly. Just a reminder, so please make sure that for clinical data reporting, you are doing it regularly for all patients, you know, who are at your facility during the the clinical month that is being reported and of course, you know, as we know, in parentheses next to a reporting month it indicates whether it's open or closed and if the month is closed. Unfortunately, you know clinical data, whether it's hemodialysis PD or vascular access data, cannot be reported for months that are closed. So, please, you know, continue to work towards ensuring that all necessary information is reported on the clinical screen for the open month because you know the information that's entered here on the clinical screen and CROWNWeb does play a role as it relates to ESRD QIP scores, and you know we want to make sure that you are reporting your information in the system as needed. Okay. Go ahead and continue.

I do see some questions are coming in via chat, or Q&A, I should say. So, thank you for your questions. We do have some time built in to go back and assist with some of the questions that we've received. Of course, we received a couple related to transient, which I knew we were going to receive. As mentioned, this is the first time that we announced that as part of today's call and so we'll go back in a moment and just take a look at some of those questions that we've received. Next, we're going to continue with our focus on data management and just continue to work towards, you know, reporting information in the system as needed. But, before we jump into the discussion regarding data management, we're going to start off with a polling question, which I will open and should be located on the right-hand side of your screen, where it's asking, "Are you familiar with the ESRD Systems Data Management Guidelines?" Are you familiar with the ESRD Systems Data Management Guidelines: "yes." "somewhat," or "no." Oniel, I don't know what you're talking about. So, "Are you familiar with the ESRD Systems Data Management Guidelines?" is the poll question that is currently up on your screen. Make your selection "yes," "somewhat," "no," and click the "Submit" button, please. Alright. So, I do see that of the 229 that are currently connected, we do have a response over about 135, and there's seven [or] eight in progress right now. To

make your selection, click the "Submit" button. And again, this is just a fun way for you to interact with us a little bit, helps us with knowing the content that's covered, if you're familiar with the content. If you, recall earlier, we touched a little bit on reporting of, not reporting. I apologize we talked earlier about accessing the ESRD QIP Payment Year 2021 preview period, the reports, and if you've submitted inquiries and such. And I'll give you a chance to just kind of communicate with us a little bit and here we're just asking, "Hey, are you familiar with the the data management guidelines?" Alright. Okay. I do see that we have six in progress. I'm gonna start the countdown to close this out, so please submit your answer if you have not done so in three … submit them in two … still see about five or six in progress, and submit them in one. Alright. So, let me go ahead and close this out. So, it was about five in progress. So, it's okay if you didn't get a chance to submit your answer. Again, it's just a fun way to interact with us. You're not being graded or anything as it relates to these questions. That's all we are asking. So, it's processing now. Let me just go ahead and go over some of the results that we receive as it relates to this question here where it does show of those who responded, 76. Alright. Let me go ahead and apply and share with everyone just so you can see 76 indicated, "Yeah, they're familiar with the guidelines," about 46 said "Somewhat." Oniel, "Somewhat familiar with the guidelines," and then we have 25 who said "Nope, I am not familiar with the ESRD Systems Data Management Guidelines. What are you talking about, good sir?" So, thank you so much once again for your participation. Let me close this out and just give just a high-level overview of the guidelines. Alright. One moment, trying to close the polling out.

Alright. So, for the the Data Management Guidelines, this is [a] high-level overview just of the purpose … Now, in the system when reporting information there are certain things that have you can save, a hard deadline, hard submission deadline, for example. The 2728 forms, they are due within a certain number of days. Even the 2746 forms, they are due within, you know, "x" number of days, right? The clinical data reporting they are due monthly because if you don't submit it and the month is closed, unfortunately you can't report data for that clinical month. But, there are also some things in the system that doesn't mean necessarily have, like, a hard submission deadline, but it is highly recommended that you complete those things within a timely manner, within a certain time frame in order to support your data reporting requirements, and in order to continue to support patients', you know, needs. With that said, that's part of the purpose of why the guidelines were created. It was created as a way to help describe, create, to standardize processes and standardize ways that facilities can work to ensure—okay, well, when should we admit a patient to our facility, while the guidelines help to call out when a facility comes to you or when a patient comes to your facility [to] please make sure that

you work towards admitting the patient within "x" number of days. So, now it helps to create a standardized process that facilities throughout the nation can work towards, following to, you know, again, complete data reporting the guidelines break these items down into three categories. Really, it includes a breakdown of data monitoring, data measuring, and data managing, working towards monitoring data, how you can use different tools within the system to monitor information, to help measure in the data managing component, really is the entry of information in CROWNWeb. You can access the Data Management Guidelines via the link that's located at the bottom, really on the myCROWNWeb website, anywhere on the site, I should say. The home page and education page, throughout the site, you will be able to click and access the PDF copy of this document. Now, I will say, which we actually have in a little bit, I call out the fact that this document is being updated and I'll touch on that in a moment, but continuing to look at just, you know, high-level overview of the guidelines, it calls out the tasks that what are known as data managers can perform as it relates to the three areas, as it relates to data monitoring, measuring, and data managing: Tier 1-, Tier 2-, and Tier 3-level data managers. Tier 1 is facility-level users. Okay. Well, we'll say that to, you know, kind of simplify and keep it, you know, so that it doesn't become too confusing. So, Tier 1 Data Managers are facility-level users. Tier 2 are primarily the ESRD Networks in teams to help support facilities and then the Tier 3 is just the CMS support teams, including the the Help Desk, and additional teams as well that've been designated by CMS. So, really, these three different levels of Data Managers work toward ensuring that the information that is entered in CROWNWeb and an EQRS are accurate and up to date, and you know, relevant, and and so on. So, Tier 1, Tier 2, and Tier 3 Data Managers. Here, just looking at some of the examples of a Tier 1 Data Manager task, things that this individual, you know, performs as it relates to, you know, the areas that we mentioned a moment ago. Looking at data monitoring, the Data Management Guidelines break the section down or the different tasks that are required as it relates to that category down. So, for example, to support monitoring. Alright. So, you can see the section listed here indicating facility dashboard. So, when using the dashboard, it helps with, you know, monitoring what may be required at the facility. And, it's recommended the frequency by when, or the frequency that you should follow when using the dashboard is at least weekly. Now, of course, these are just—I don't want to use the word guidelines, you know, but—guidance. They're there for guidance. You can access the guideline or you can access the facility dashboard, I should say, as often as you'd like. It doesn't have to be weekly, but at least once a week for you to review this information. For facilities, where it breaks down to monitor facility attestation, monitor facility summary, and when you should do that, as well, again, to support data cleanup and data accuracy, personnel at least quarterly review that in reports, and so on. For

the next couple sections, same thing, I'm not going to go through these in great length to help with time, but you can see just an overview of how the Data Management Guidelines calls out based on the category, whether it's data monitoring, data measuring, or data managing, as well as the different tiers, the different levels of Data Managers, what are some of the tasks that individuals who fall within that category would complete—again, with Tier 1 being facility-level users. So, really the majority of you on today's call would fall under or in the Tier 1 Data Manager category, you know, and then we said Network is Tier 2 primarily, and then Tier 3 are additional CMS support teams, such as the Help Desk, and so on. So, Tier 3, again, overview of some of the things that anyone in that category would come the things that they would complete and you can use the link that's included at the bottom of this PDF slide deck or on the MyCROWNWeb.org website to get an idea of the things that are required called out in the guidelines. Now, as we continue to work towards moving toward this EQRS rollout, we on this end, we are the team that helps to manage or to update, I should say, the Data Management Guidelines, so we are currently in the process of reviewing and updating the guidelines to continue to meet the community's needs and meet CMS's needs. Here, the bullet point that you can see, the second bullet points in the sub that's listed, there some of the things that we're doing. We're, you know, updating it to include just the revision of the account management procedures because I believe the existing guidelines still call out EIDM in QMARS, which are the old ways that people used to register for an account. So, we are updating it to reflect HARP as the correct account registration method that the community uses, including we're updating it to include the new EQRS procedures, updating it to include new screenshots to reflect EQRS (because currently that document primarily focuses and has CROWNWeb-related screenshots). So, that's going to be updated, remove old procedures that are not going to be included as part of the EQRS rollout, as well as include new resources, links, so that you can continue to access the training and communication materials necessary as you continue to enter data in the system.

Now, real quick, just to wrap up with our discussion, the last thing that we have we wanted to go over, just some educational resources where you can access materials. As we continue to move forward with, you know, efforts starting with the myCROWNWeb.org website here, if you've used the site for a while, of course, you know where some of the things are located, but I will say we are also in the process of updating the myCROWNweb.org website to really simplify and help enhance the ways that users, you in the community, can access information, where it's immediately available to you, as well as changes to support the rollout of EQRS. So, training materials currently, we have that a lot of it, focuses on CROWNWeb, but updates will be made so that the materials focus on

EQRS when CMS gets ready to roll that application out fully later this year. Education page is where you can access the current resources, including the HARP training materials, ESRD QIP program-related items, the additional training materials that are available, such as the Quick Start Guides, which will be updated to reflect EQRS, so you can use that. Currently, we do have and you can access the news page on the myCROWNWeb.org website. Now, the news page is where we archive all CMS-related announcements. We archive the newsletters that are distributed. We, you know, archive events as well. We sometimes do receive emails from, you know, representatives from the community asking, "Hey, I know you all covered ultra filtration on one of these Town Hall events. I can't remember which one. Can you send me the link or can you send me where I can access that information." And, yes we can. We … we … you can always use this site here to either go to the Events page to access the previous event, or currently, as mentioned, we do house and store the archive training materials, and newsletters, and announcements on the the news section. Additional training materials are available here. We do have the Quick Start Guide— I'm sorry—the ESRD System Data Management Guidelines there list of some of the primary causes of renal failure that's currently in the system   into some additional things that you can currently access to support your data reporting needs. And just to wrap up for the QualityNet.org website, of course, you can use that site too for just [the] latest news and up-to-date information, but here we're going to focus primarily on the Payment Year 2021 Preview Period resources that are available via the website. You can go to the QualityNet.org website if you still need access to the Payment Year 2021 Performance Score Report presentation if you need the guide to understand your PSR. If you need Quick Start Guide-related to QIP UI, please feel free to go to the my prom to the—I'm sorry—to the QualityNet.org website in order to access that information. Also, if you have questions following today's event, you can access the slide here, but this is to help break down and tell where you should route questions. So, questions regarding ESRD QIP, general questions, can be submitted to the Service Now Q&A tool. Just a reminder to please use the Q&A or the ESRD QIP UI within the system to submit preview-related questions. If it's system-related questions, use the Help Desk. In training-related questions, you can always submit to CRAFT@myCROWNweb.org. Alright.

We do have about seven minutes remaining, so let me go ahead and expand and open the Q&A to see some of the questions that we received, if we're able to assist with providing a response. Alright. I'm going to scroll to the top. Some of the ones that we receive, I know that questions we receive started to come in around the time when I mentioned transient, so let me see here. Alright. Would CROWN, would be able to add three affiliated with CROWN, will be able to add three affiliated tribes in North

Dakota. That's a very good question. Actually, that is an enhancement idea I would recommend that you submit because the system, when selecting the tribe on the "patient attributes" screen tribe or area of origin, and there's another field where, you know, terms like Hawaiian or Pacific Islander that's a drop-down, where it currently only allows for one submission or one selection to be made for that. So, in this case, where you know, it's three affiliated tribes, we would recommend that you submit that as an enhancement because the system currently only allows the selection of one as related to that particular item. Alright. Usually. Okay. So, the patient will transfer in or only. Okay. So, this one is regarding transient. You see a couple transits. I'll try to lump these together. So, just to clarify a little as to what I mentioned earlier, you know, again, with this being the first time being announced moving forward or with the EQRS rollout, and also to support the transition from CROWNWeb to EQRS, there is a date also that we're going to announce where CMS is asking for users to, you know, transfer in. [It] has and will continue to be an option in the system, and if or when a patient comes to your facility, yes, you will want to select "transfer in." If you know that's the appropriate selection for the admit reason, then you know you select that. However, currently in the system where it asks, you know, transient status "yes" or "no"—that is the field that's … that will not be included as part of the EQRS. The transient status "yes" or "no" option, where now the transfer in, if that is the case, would be selected as the option or maybe if, you know, receiving backup hemo treatment, or you know, whatever the selection may be, you'd closely review the admission reason and make the proper selection, so that the system can continue and CMS can continue to ensure that one patient record is affiliated with a facility at a time. It shows you know one admit, so the patient is currently at this facility receiving treatment. And then, you know let's say, when the person leaves, transfers out, goes to another facility, goes back to his or her home facility, whatever it may be, the system will help to capture the fact that, you know, John Smith is at this facility currently receiving treatment, eliminating any confusion as to, you know, well, where is he at currently, where is he currently dialyzing. So, hopefully that helps to answer, and again, as mentioned during the September Town Hall, we'll provide additional information, and training will be provided too to help with ensuring that the community, you know, you all fully understand the updates regarding the transient status field removal. Alright.

I do see a couple questions regarding the code. I went to 2017. You cannot see. So, the yeah, the ICD-10 code for, you know, COVID-19. CMS did update the system and that should be displayed as, and if you have challenges or with reporting information in the system, of course, you do have the ability to either work with your ESRD Network or if you're encountering issues with where the system is not performing or behaving

or doing something that it's supposed to do, please contact the QualityNet Help Desk to, you know, enter or report, open a ticket, where they can assist with looking into anything further to continue to ensure that you are able to report data.

If a patient is gone for an entire month, I do see someone submitted something regarding the patient goes maybe out of the country for the entire month, you know, what should you do now? The patient is at your facility, you know, at least one day for the month. What happens is the clinical screen does present that individual giving you the ability to report what you may have done, that the data for labs drawn or treatment that was provided for that patient during that reporting month, but one of the things that, you know, we, you know, encourage if you … the patient is gone for the entire reporting month, and in order to help ensure that that individual is not displayed on the clinical screen in CROWNWeb, you do have the ability to enter the discharge in CROWNWeb to help with removing the patient from the clinical list, so that it doesn't appear as if the person was at your facility for that month, and you, you know, just didn't report any of the data that's needed for, you know, that patient during that reporting month. So, you do have the ability to make the entry indicating that the patient was gone, not affiliated with your facility for that month, and when that individual returns, of course, you want to make sure that you do the admit, so that the person's name appears back on the clinical screen for data reporting. Alright.

You see we have about 30 seconds remaining until we get to the top of ourselves. As mentioned a little bit earlier, there are some questions that will be submitted that we might not have time to answer today due to time, due to additional research that may be required, so please use CRAFT, c-r-a-f-t at myCROWNweb.org to submit questions following today's event. Please join us next month on September 24th for the September 2020 Town Hall event. We do have a lot of good information that will be covered during that call. Some of the additional changes to take place as it relates to EQRS will be discussed as part of that call. So, registration information will go out. Please register to join us for that call. Also, as mentioned, you do have the ability to submit additional questions to us. Use the Help Me form on the myCROWNWeb.org website. You can use the Help Desk for assistance. Use the QualityNet.org site as well and thank you all once again for joining us. A post-event evaluation will display once we end today's event. We do look at those, so thank you in advance for your time and for completing the evaluation and we hope to see you on a future Town Hall event. Enjoy your day, everyone. We'll talk to you, see you on a future call. Thank you.