



# End-Stage Renal Disease (ESRD) Quality Reporting System (EQRS) Data Management Guidelines

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# EQRS Data Management Guidelines

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# Introduction and Background

## EQRS Overview

The Centers for Medicare & Medicaid Services (CMS) aims to provide ongoing support to the End-Stage Renal Disease (ESRD) community to foster accurate and timely monthly data submission into the ESRD Quality Reporting System (EQRS). EQRS blends functionalities of three legacy ESRD Systems into one global application. The following legacy ESRD Systems are now consolidated under EQRS to support ESRD facilities and programs and are not operational:

- ESRD Quality Incentive Program (QIP): a quality measure value-based purchasing performance score review system
- Consolidated Renal Operations in a Web Enabled Network (CROWNWeb): an ESRD patient registry and quality measure reporting system
- Renal Management Information System (REMIS): Medicare coverage determination support system

## EQRS Introduction

More than 20,000 people from 8,000+ renal dialysis facilities and select renal transplantation centers use EQRS. These users process and access information that include but are not limited to facility details, patient admission/discharges, CMS forms, and patient clinical data.

Additionally, other ESRD stakeholders, including ESRD Network representatives, use EQRS to support data accuracy activities, reinforce quality improvement steps, and provide technical assistance to dialysis facilities.

To help ensure that all data reported via EQRS accurately reflect the quality of patient care, it is vital that all EQRS users understand and follow standardized processes when completing specific tasks.

This document describes standardized data management processes created, reviewed, and approved by CMS. EQRS users should reference these guidelines when overseeing data entry and reporting efforts.

Tasks to be completed by EQRS users and submission timelines are identified in this EQRS Data Management Guidelines document. These tasks fall into three categories:

1. **Data Monitoring** consists of policies, processes, and practices that address the accuracy, validity, completeness, timeliness, and integrity of data (data quality).
2. **Data Quality Measuring** quantifies quality of care through comparison to a criterion. Quality measurements typically focus on structures or processes of care that have a demonstrated relationship to positive health outcomes.
3. **Data Quality Managing** consists of the business processes that ensure the integrity of an organization's data during collection, application (including aggregation), warehousing, and analysis.<sup>1</sup>

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<sup>1</sup> Source of definitions: <http://library.ahima.org/PB/DataQualityModel#.XBPCmhKhEY>

## Accessing Training Materials

Step-by-step instructions regarding how to complete procedures highlighted in this document can be accessed via <https://mycrownweb.org/education/>.

## Using EQRS

EQRS allow users to enter and manage data, as well as generate reports in the following areas:

- Patient information (including demographics and treatment and admission records)
- Facility information (including contact information, hours, and types of services)
- Personnel information (including current staff members and job titles)
- Clinical Data

## Account Maintenance

Due to the sensitivity of the data stored in EQRS, all users must first complete CMS's Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP) account registration process to establish and maintain a user ID. Additionally, users must use EQRS to request and maintain roles, as well as access user interfaces within EQRS. Users' roles and scope are approved by their facility's assigned Security Official.

## What is HARP?

HARP is a secure identity management portal provided by CMS. Creating an account via HARP provides users with a user ID and password that can be used to access many CMS applications.

HARP is also used to support the identity vetting process by requiring users to complete a Two-Factor Authentication (TFA) process that helps grant users access to CMS applications after they have successfully presented several pieces of identity verifying information to an authentication tool. During the account registration process, users must select a TFA code delivery method. Security Codes are submitted to designated devices to help authenticate users' access.

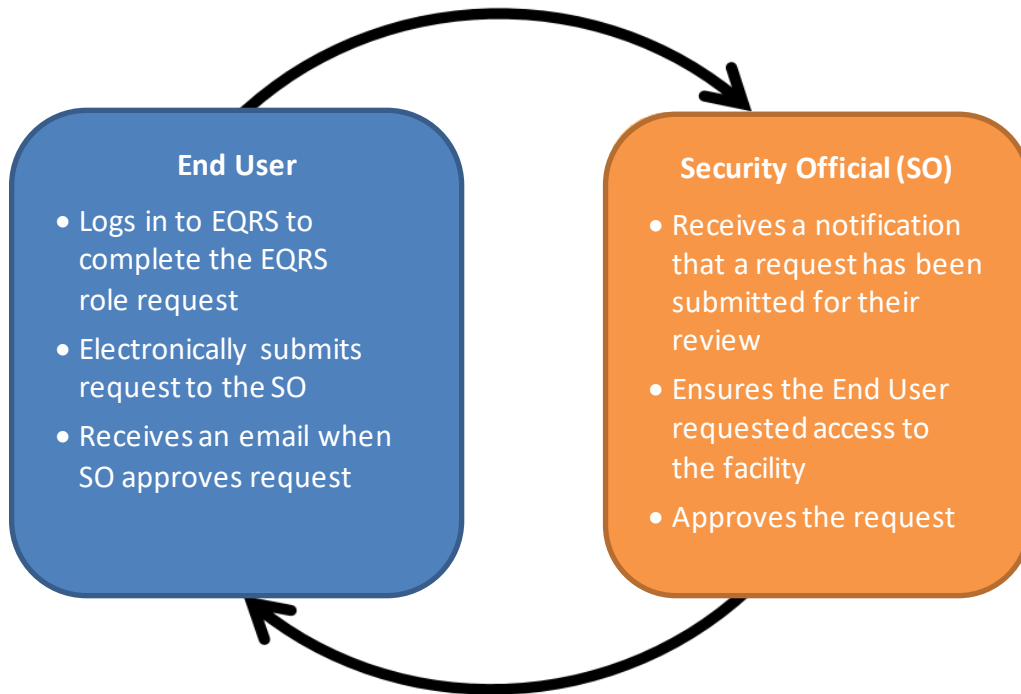
HARP provides a single location for users to:

- Modify their user profile
- Change their password
- Update their Challenge Question
- Add or remove TFA devices

After establishing a HARP account, a user must log in to EQRS to request access to the user interfaces within EQRS.

The following image outlines the process required to request a role in EQRS:

## EQRS Data Management Guidelines



### Overview of EQRS Roles

- **End User**
  - Performs tasks within CMS applications, such as EQRS
  - May have a user role and scope over multiple organizations
- **Security Official**
  - Can serve as the Security Official (SO) over multiple organizations
  - Approves or denies additional SO and End User role requests for a specific organization
  - Must have an End User role to perform tasks in the EQRS application
  - Cannot approve their own End User role request

All EQRS users must complete a HARP account setup.

Register for a HARP account via <https://harp.cms.gov/register/profile-info>.

Access EQRS via <https://eqrs.cms.gov/globalapp/>.

Access step-by-step HARP account registration and EQRS role request instructions via <https://mycrownweb.org/harp-training/>.



## End User Roles and Responsibilities

### End User Roles

There are three types of roles for an End User. An End User can have more than one role.

- **Viewer** – Views previously submitted data
- **Editor** – Enters data into EQRS
- **Batch** – Electronically uploads data into EQRS on behalf of facilities within the user's scope

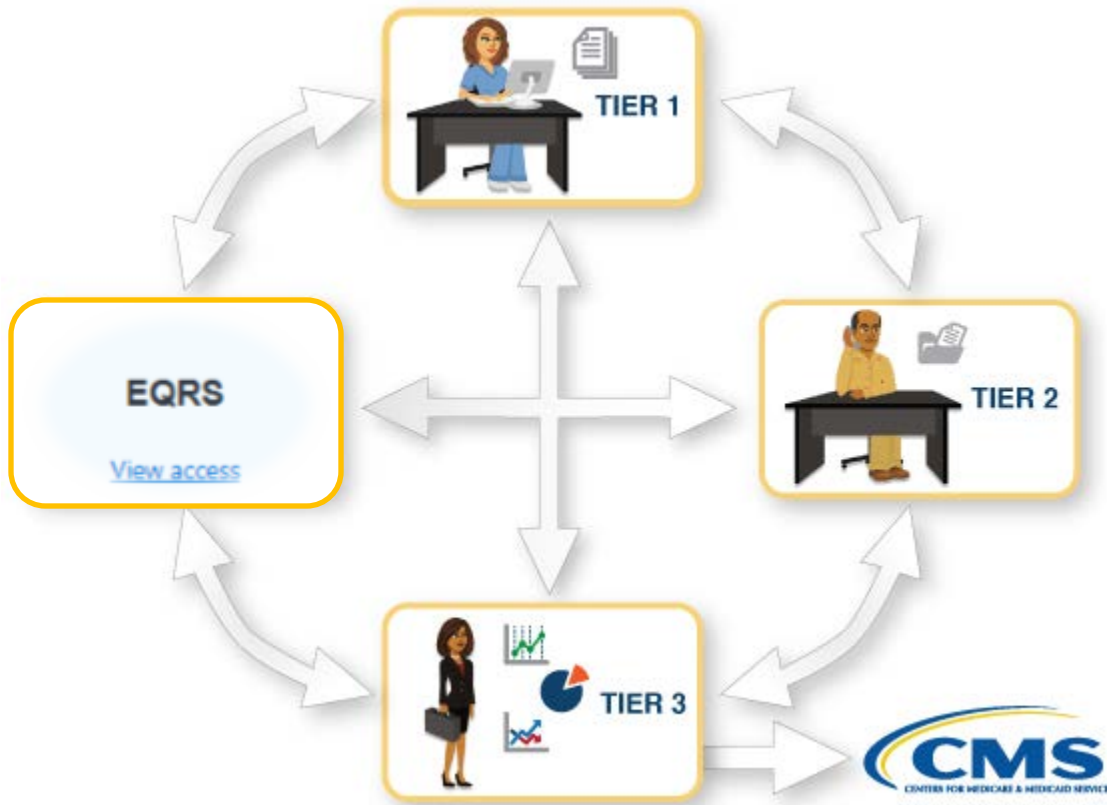
### EQRS Data Manager

EQRS Data Managers oversee data entries. A Data Manager is defined as any authorized user who *monitors* data quality, *measures* data effectiveness, and *manages* data reliability, accuracy, and timeliness.

There are three tiers of Data Managers who complete monitoring, measuring, and managing activities to support successful reporting of data via EQRS:

- **Tier 1 Data Managers include facility-level users and Electronic Data Interface (EDI) submitters.** Tier 1 Data Managers are individuals or groups that manually enter patient and facility details directly into EQRS. Tier 1 Data Managers can also be affiliated with an organization that electronically uploads information on behalf of a facility.
- **Tier 2 Data Managers include ESRD Network-level users.** Tier 2 Data Managers are individuals or groups that provide technical data reporting assistance. Tier 2 Data Managers primarily monitor data reporting efforts to foster accurate and timely submissions by Tier 1 users. Additionally, Tier 2 Data Managers input data directly into EQRS to support data reporting requirements. Tier 2 users analyze reported data to determine appropriate support activities for improving quality of both data and healthcare outcomes.
- **Tier 3 Data Managers include data support contractors such as those responsible for the QualityNet Service Center and the Application Development Organization (ADO).** Tier 3 Data Managers are individuals or groups that support CMS data reporting needs, as well as monitor and analyze EQRS data entry. Additionally, individuals or groups in this classification support Tier 1 and Tier 2 Data Managers. See the next page for an illustration of how Data Manager Tiers work together.

# EQRS Data Management Guidelines



In their respective roles, Data Managers:

- Foster timely and accurate reporting by analyzing data submission and quality, using EQRS reports.
- Assist with or oversee data entry for dialysis facilities, kidney transplantation centers, and Veterans Health Administration (VHA) facilities.
- Work to resolve Action List discrepancies.
- Generate, review, and finalize CMS-2744 ESRD Facility Survey submissions.
- Monitor compliance with ESRD QIP reporting and performance measures.
  - Visit the following link for additional guidance regarding utilization of ESRD QIP:  
[https://mycrownweb.org/wp-content/uploads/2020/07/PY-2021-ESRD-QIP-UI-Quick-Start-Guide\\_508.pdf](https://mycrownweb.org/wp-content/uploads/2020/07/PY-2021-ESRD-QIP-UI-Quick-Start-Guide_508.pdf)
- Assist CMS and other ESRD stakeholders described in this document with **monitoring**, **measuring**, and **managing** all EQRS data.

Tasks authorized to be performed by specific Data Managers are identified in the following sections of these EQRS Data Management Guidelines.

# Chapter 1

## Data Monitoring



## Data Monitoring

EQRS has five tasks that support efforts to promote data quality through data monitoring. They also offer multiple reports and search capabilities to provide users with the means to monitor and audit data entry efforts.

<b>Section</b>	<b>Task</b>	<b>Authorized Tier</b>
<b>Facility Dashboard</b>	Monitor Facility Dashboard	Tier 1 and Tier 2
<b>Facilities</b>	Monitor Facility ICH CAHPS Attestations	Tier 1, Tier 2, and Tier 3
	Monitor Facility Summary	Tier 1 and Tier 2
	Monitor Saved Facilities	Tier 2
<b>Personnel</b>	Review Personnel Information	Tier 1

This chapter provides further details about data monitoring and the timeframes for performing required tasks to support data validity.

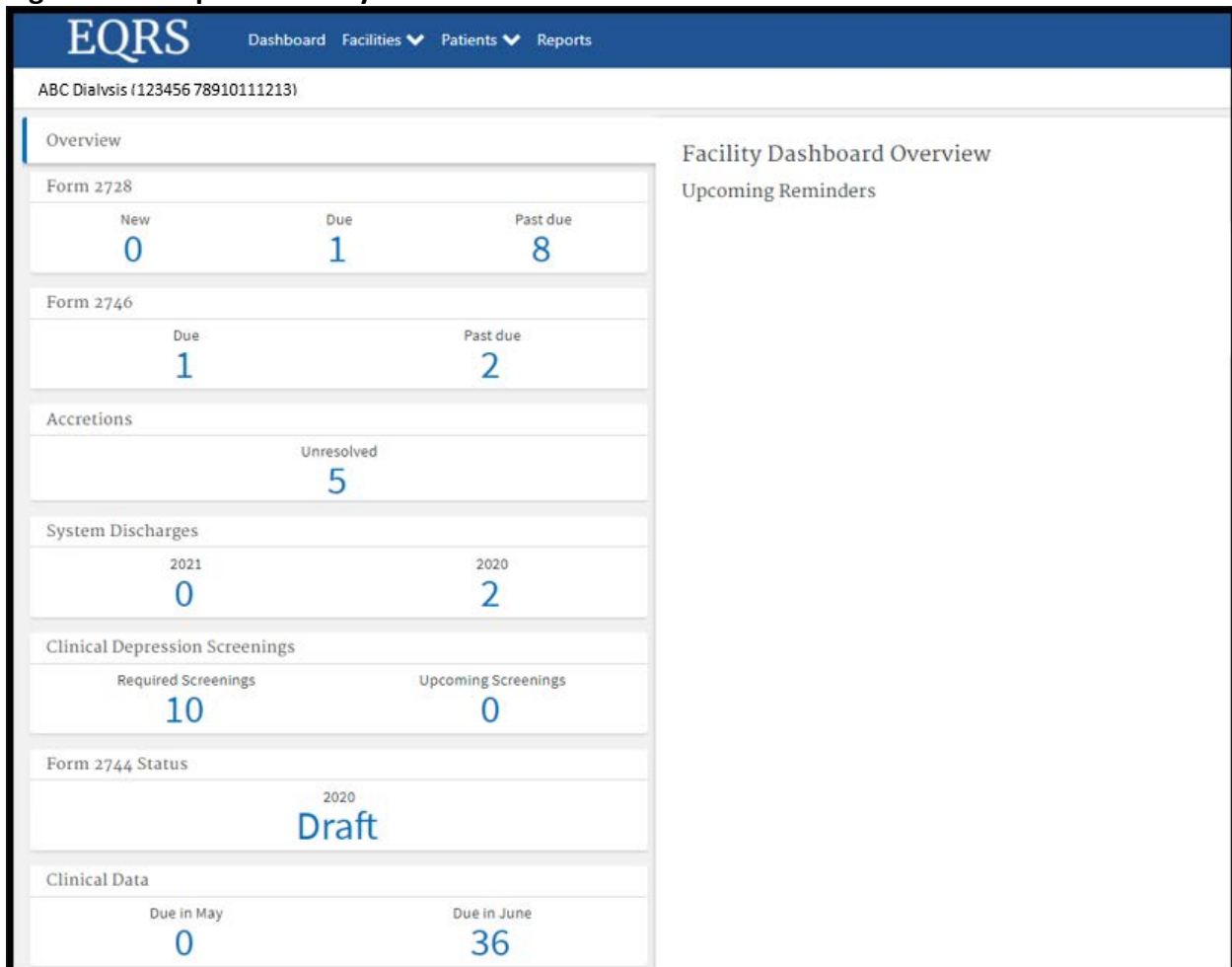
**Note:** An overview of the Tiers can be found in the “EQRS Data Manager” section on Page 5.

## Facility Dashboard

### Monitor Facility Dashboard

<b>Key Points</b>	<ul style="list-style-type: none"> <li>The Facility Dashboard provides users with upcoming data submission reminders in EQRS.</li> <li>The Facility Dashboard presents users with a list of outstanding deliverables for the facilities within their scope.</li> <li>The Facility Dashboard provides users with the ability to click on the number of outstanding items to drilldown further to identify required submissions.</li> </ul>
<b>Frequency</b>	Tier 1 Data Managers monitor Facility Dashboard data at least weekly to help ensure that required data are completed within a timely manner.

**Figure 1: Example of Facility Dashboard**



## Facilities

### Monitor Facility In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH CAHPS) Attestations

<b>Key Points</b>	<ul style="list-style-type: none"> <li>• Facility ICH CAHPS Attestation supports the ESRD QIP Program.</li> <li>• The Facility ICH CAHPS Attestation submission period is typically the first two months of each year.</li> <li>• Tier 1 and Tier 2 Data Managers use EQRS to monitor the ICH CAHPS Attestation statuses of facilities within their scope.</li> </ul>
<b>Frequency</b>	Tier 1 Data Managers monitor Facility ICH CAHPS Attestations in EQRS to help ensure that required data are completed between January 1 and the end of the Attestation submission period for each year.

**Figure 2: Example of Facility Attestations Link**

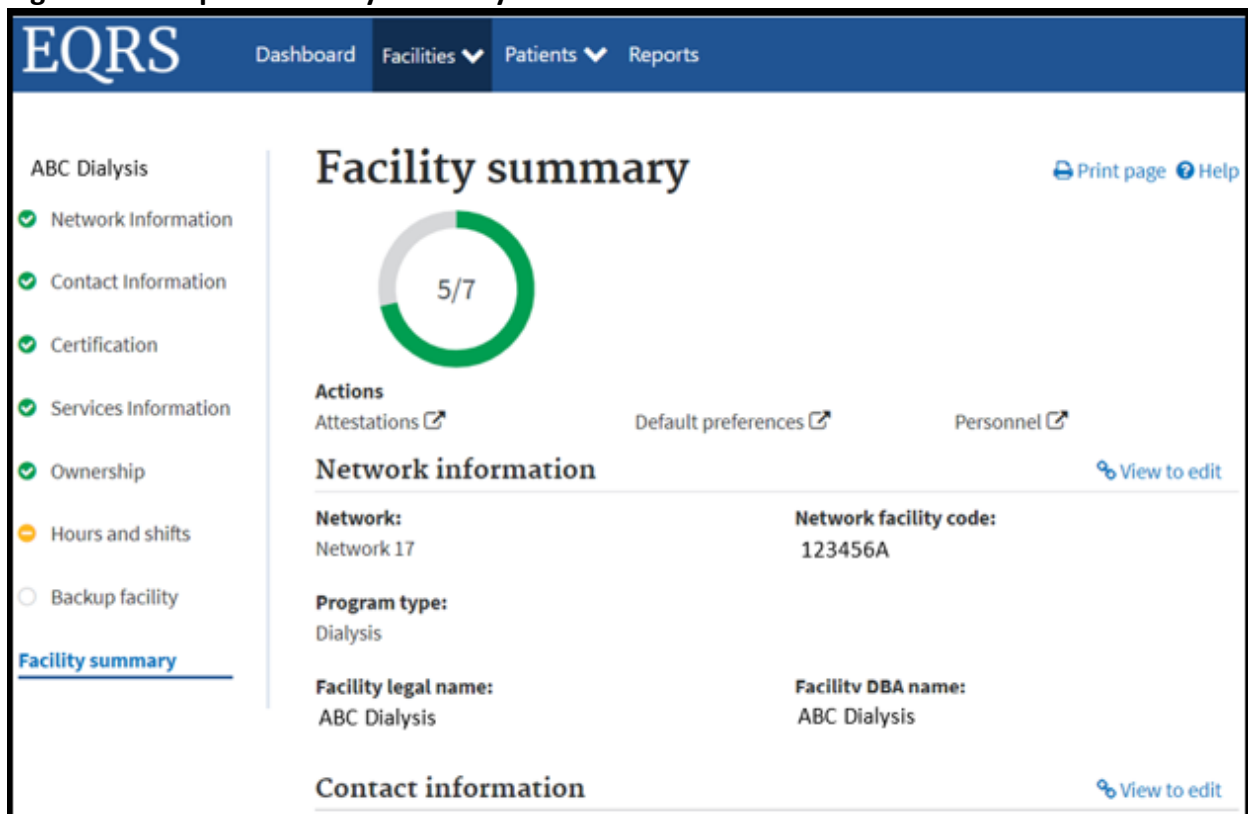
The screenshot displays the EQRS interface for a facility summary. The top navigation bar includes 'EQRS', 'Dashboard', 'Facilities', 'Patients', and 'Reports'. The main content area is titled 'Facility summary' and features a circular progress indicator showing 5/7. A message states: 'You have errors in sections of the form. Please update and resolve the'. Below this, there are links for 'Actions', 'Default preferences', and 'Personnel'. The 'Actions' link is highlighted with a red box. The 'Network information' section includes fields for 'Network' (Network 17), 'Network facility code' (123456A), 'Program type' (Dialysis), 'Facility legal name' (ABC Dialysis), and 'Facility DBA name' (ABC Dialysis). There are also 'View to edit' links for the network information and contact information sections.

# EQRS Data Management Guidelines

## Monitor Facility Summary

<b>Key Points</b>	<ul style="list-style-type: none"> <li>EQRS contains details related to facilities' ownership details and history, services, certifications, and number of Medicare-certified stations.</li> <li>Information entered on the <i>Facility Summary</i> screen supports the ESRD QIP Program, Dialysis Facility Reports, Care Compare, and the CMS-2744 ESRD Facility Survey.</li> <li>Tier 1 and Tier 2 Data Managers assist with promoting data accuracy by using EQRS to monitor facility details to ensure that EQRS contains up-to-date information.</li> </ul>
<b>Frequency</b>	Tier 1 and Tier 2 Data Managers ensure that all necessary facility updates are applied annually by December 31 in support of the CMS-2744 ESRD Facility Survey.
<b>Additional Guidance</b>	The following link has guidance on how to <i>View a Facility</i> in EQRS: <a href="https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf">https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf</a>

Figure 3: Example of Facility Summary



# EQRS Data Management Guidelines

## Monitor Saved Facilities

<b>Key Points</b>	<ul style="list-style-type: none"><li>• Tier 2 Data Managers are authorized to “Add” and “Save” new facilities and facility details in EQRS.</li><li>• Tier 2 Data Managers monitor facility status to ensure that “Saved” facilities are updated with required information.</li><li>• Users at facilities that are in a "Saved" status cannot submit either patient or facility data.</li></ul>
<b>Frequency</b>	Tier 2 Data Managers monitor facility data entry to ensure that all “Saved” facilities are submitted (fully processed) in EQRS within 30 days.

Figure 4: Example of Add/Save New Facility

The screenshot shows the EQRS interface for editing a facility's contact information. The header includes the EQRS logo and navigation links for Dashboard, Facilities, Patients, and Reports. A sidebar on the left lists various facility details like Network Information, Contact Information, Certification, etc. The main content area is titled 'Contact information' and shows the 'Physical address of facility' section. It includes a form with fields for street address, city, state, zip code, county, and address effective start date. The form is currently in an 'Edit' state, with a 'Cancel edit' link and a 'History' link. The 'Update' button is highlighted in blue.

**EQRS** Dashboard Facilities Patients Reports

ABC DIALYSIS

Network Information

Contact Information

Certification

Services Information

Ownership

Hours and shifts

Backup facility

Facility summary

### Contact information

Physical address of facility

What type of edit are you making?

Moving to a new address

Edit to this address record

Street address line 1

123 Lombard Street

Street address line 2 (optional)

City State

San Francisco CA

Zip code Zip ext. (optional)

94517

County

San Francisco

Address effective start date

Month Day Year

11 06 2000

Cancel Update



## Personnel

### Review Personnel Information

<b>Key Points</b>	<ul style="list-style-type: none"> <li>EQRS allows Tier 1 and Tier 2 Data Managers to list key personnel at facilities within their scope.</li> <li>Personnel entered will display on other screens, such as: <table border="1" style="margin-left: 20px;"> <tr><td>Facility ICH CAHPS Attestation</td></tr> <tr><td>Treatment Summary</td></tr> <tr><td>CMS-2728</td></tr> <tr><td>CMS-2746</td></tr> </table> </li> <li>ESRD stakeholders utilize personnel data for various communication efforts.</li> <li>Tier 1 Data Managers review Personnel Details to ensure that EQRS contains information on current staff members.</li> </ul>	Facility ICH CAHPS Attestation	Treatment Summary	CMS-2728	CMS-2746
Facility ICH CAHPS Attestation					
Treatment Summary					
CMS-2728					
CMS-2746					
<b>Frequency</b>	Tier 1 Data Managers review the <i>Personnel Information</i> section at least quarterly.				
<b>Additional Guidance</b>	The following link has guidance on how to <i>Add Facility Personnel</i> in EQRS: <a href="https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf">https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf</a>				

**Figure 5: Example of Personnel Details**

## View existing personnel

Help

View the personnel record and make changes if needed

✓

**Personnel information added successfully**

Please review your information below.

### Personnel Information

Edit

---

<p><b>Salutation:</b> Dr.</p> <p><b>First Name:</b> Meredith</p> <p><b>Middle Initial:</b></p> <p><b>Last Name:</b> Grey</p> <p><b>Suffix:</b></p>	<p><b>Personnel NPI:</b> 7234567890</p> <p><b>Credentials:</b></p> <p><b>UPIN:</b></p> <p><b>Organizational Unique Personnel Identifier:</b></p>
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# Chapter 2

## Data Measuring



## Data Measuring

CMS works to ensure that EQRS contains reports that promote data relevancy through data measuring. The November 2020 EQRS release features two reports and search capabilities that allow users to measure the length of time since last data entry and determine if specific submission requirements were met.

<b>Report Type</b>	<b>Task</b>	<b>Authorized Tier</b>
<b>Patient Events Report</b>	Monitor all patient events in EQRS.	Tier 1, Tier 2, and Tier 3
<b>Patient Roster Report</b>	Monitor and review patients admitted to the facility or facilities.	Tier 1, Tier 2, and Tier 3

This chapter provides additional details about how to generate reports to monitor patient events, including admissions and discharges, treatment information, and patient census.

**Note:** An overview of the Tiers can be found in the “EQRS Data Manager” section on Page 5.

## EQRS Reports

### Generate Patient Events Report

<b>Key Points</b>	<ul style="list-style-type: none"> <li>EQRS allows Tier 1, Tier 2, and Tier 3 Data Managers to generate <i>Patient Events Reports</i> to verify and monitor patient admissions and discharges.</li> <li>Tier 1, Tier 2, and Tier 3 Data Managers cross-reference <i>Patient Events Reports</i> to troubleshoot admit and discharge related errors in EQRS.</li> </ul>
<b>Frequency</b>	Tier 1 Data Managers review the <i>Patient Events Report</i> , monthly to ensure all patient admissions and discharges are accounted for in the facility in EQRS.
<b>Additional Guidance</b>	To access the <i>Patient Events Report</i> and the <i>Patient Roster Report</i> , log into EQRS and click on the Reports tab in the menu at the top of the screen.

**Figure 6: Example of Patient Event Report**

The screenshot shows the EQRS interface for generating a Patient Events Report. The top navigation bar includes 'EQRS', 'Dashboard', 'Facilities', 'Patients', and 'Reports'. The main content area is titled 'Patient Events Report' and 'Criteria Selection'. It features a 'DATE & FACILITY FILTER' section with date range start and end fields (Month, Day, Year) and a 'Network Selection' dropdown. Below this is a search bar for facility names and a 'Select all facilities' button. The 'REPORT PARAMETERS' section is divided into 'Admit Reason(s)' and 'Discharge Reason(s)'. Under 'Admit Reason(s)', 'New ESRD Patient', 'Transfer In', and 'Restart' are checked. Under 'Discharge Reason(s)', 'Involuntary' and 'Transplant outside US' are checked. An 'Export As:' dropdown is set to 'Excel'.

## Generate Patient Roster Report

<b>Key Point</b>	EQRS allows Tier 1, Tier 2 and Tier 3 Data Managers to generate <i>Patient Roster Reports</i> to verify patient census, patient treatment, and admission information based on a specific date.
<b>Frequency</b>	Tier 1 Data Managers review the <i>Patient Roster Report</i> monthly to ensure patient admission and treatment information is correct in EQRS.
<b>Additional Guidance</b>	To access the <i>Patient Events Report</i> and the <i>Patient Roster Report</i> , log into EQRS and click on the Reports tab in the menu at the top of the screen.

**Figure 7: Example of Patient Roster Report**

The Patient Roster Report will report a list of the patients admitted to the selected facility(ies), as of the date specified.

Patient Roster as of:

Month:  Day:  Year:

\*Network Selection:

\*Search Facility Name, Facility CCN or Dialysis Organization:    Select all facilities

\*Sort Order:

Patient Name

EQRS Patient ID

Admit Date

Treatment Setting

Treatment Type

Specify the order for your report in the Sort Order list

\*Export As:

# Chapter 3

## Data Managing



### Data Managing

The following 12 user tasks support efforts to promote accurate and timely data submissions through data managing.

Section	Task	Authorized Tier
<b>Facilities</b>	Add New Facility	Tier 2
	Submit Facility ICH CAHPS Attestations	Tier 1
	Update Facility Summary	Tier 1 and Tier 2
<b>Patients</b>	Admit and Discharge Patients	Tier 1 and Tier 2*
	Delete and modify CMS-2728 forms and delete CMS-2746 forms	Tier 3
	Complete CMS-2728 and CMS-2746 Forms	Tier 1, Tier 2
<b>Personnel</b>	Add Key Personnel	Tier 1 and Tier 2
<b>Clinical</b>	Manage Clinical	Tier 1
<b>Action List</b>	Resolve Action List Accretions	Tier 1, Tier 2, and Tier 3
<b>Form 2744</b>	Add New CMS-2744A Forms	Tier 1
	Add New CMS-2744B Forms	Tier 1 or Tier 2
	Accept/Reject/Finalize CMS-2744 Forms	Tier 2
	Add New CMS-2744A Form for Closed Facilities	Tier 1

\*Tier 2 Data Managers are authorized to complete patient admissions and discharges, and update records for kidney transplantation and VHA centers.

This chapter provides further details about data managing and the timeframes for performing required tasks to support accurate and timely data submissions.

**NOTE:** An overview of the Tiers can be found in the “EQRS Data Manager” section on Page 5

## Facilities

### Add New Facility in EQRS

<b>Key Points</b>	<ul style="list-style-type: none"> <li>• The <i>Facility Summary</i> section in EQRS contains details regarding a facility’s demographics, ownership, services, certifications, hours, and shifts.</li> <li>• EQRS allows Tier 2 Data Managers to add new dialysis and kidney transplantation facilities.</li> <li>• Pending CMS Certification Number (CCN):             <ul style="list-style-type: none"> <li>▪ EQRS can receive data from facilities with a pending certification status.</li> <li>▪ Tier 2 Data Managers shall enter pending facilities into EQRS.</li> <li>▪ Tier 2 Data Managers shall complete the required fields and select the Provider Use Type as “Pending Cert” in EQRS.</li> <li>▪ Tier 2 Data Managers shall leave the CCN blank in EQRS until the Division of Survey and Certification provides a CCN to the facility.</li> <li>▪ Tier 2 Data Managers shall then enter the CCN assigned to the facility by the Division of Survey and Certification and change the Provider Use Type to the appropriate facility type as indicated in the certification letter.</li> </ul> </li> <li>• Tier 1 and Tier 2 Data Managers must work together to ensure that all necessary documents are obtaining to add a new facility in EQRS.</li> </ul>
<b>Frequency</b>	Tier 2 Data Managers add dialysis and kidney transplantation facilities within 1 business day of receiving notification from a new facility.

**Figure 8: Add New Facility**

The screenshot shows the EQRS web interface for adding a new facility. The top navigation bar includes 'EQRS', 'Dashboard', 'Facilities', 'Patients', and 'Reports'. The left sidebar lists various facility details with checkmarks: Network Information, Contact Information, Certification, Services Information, Ownership, Hours and shifts, Backup facility, and Facility summary. The main content area is titled 'Network information' and contains the following fields:

- Network Info**
  - Network:** Network 10
  - Network facility code:** XG
  - Program type:** Dialysis
- Facility name** (with a 'Cancel edit' link)
  - Facility legal name:** ABC Dialysis
  - Facility DBA name:**  Same as legal name
  - Input field: ABC Dialysis

At the bottom of the form are 'Cancel' and 'Update' buttons.



# EQRS Data Management Guidelines

## Submit Facility ICH CAHPS Attestations

<b>Key Points</b>	<ul style="list-style-type: none"><li>• Facility ICH CAHPS Attestations are used to support the ESRD QIP Program.</li><li>• Tier 1 Data Managers manually enter or electronically upload data to the <i>Facility Attestation</i> section.</li><li>• Tier 1 Data Managers support the ESRD QIP Program by working to ensure that accurate Facility Attestation data are reported by CMS-designated submission deadlines.</li></ul>
<b>Frequency</b>	Tier 1 Data Managers use EQRS to manage and support Facility ICH CAHPS Attestation submission requirements between January 1 and the end of the attestation submission period for each year (as directed by the ESRD QIP Program Final Rule per Payment Year). The ICH CAHPS Attestation submission period typically occurs in the first two months of the year.

Figure 9: Facility ICH CAHPS Attestation

The screenshot shows the 'Facility Attestation' form. At the top, it says 'FACILITY' followed by a horizontal line. Below that, it reads 'ICH CAHPS ATTESTATION FOR ABC DIALYSIS' and '123456 1234567890'. Further down, it displays 'Last updated by n/a', 'Submission period: Open (closes on 09/01/2021)', and 'Performance Year: 2020'. There is a dropdown menu with the text 'More info about excluded patients'. Below this, a confirmation statement reads: 'Confirm below if your facility treated fewer than 30 eligible patients for the ICH CAHPS clinical measure during the Calendar Year 2019.' A checkbox is checked, and the text next to it says: 'I attest that my facility is **not eligible** for the ICH CAHPS clinical measure because it treated fewer than 30 eligible patients over the course of the entire eligibility period (i.e., Calendar Year 2019).' Below this, it asks 'I, attest on behalf of \*' with a dropdown menu showing 'Meredith Grey'. At the bottom left, there is a red 'Submit' button with a hand cursor icon pointing to it.

# EQRS Data Management Guidelines

## Update Facility Details

<b>Key Points</b>	<ul style="list-style-type: none"><li>• After facilities are added in EQRS, the system allows Tier 1 and Tier 2 Data Managers the ability to update details for facilities that are within their scope.</li><li>• Tier 1 Data Managers can update most fields; however, they must work with Tier 2 users to edit disabled fields.</li><li>• Changes made to the <i>Facility Summary</i> section appear immediately in EQRS.</li></ul>
<b>Frequency</b>	Tier 1 Data Managers review facility details for accuracy at least annually and apply necessary updates.

Figure 10: Facility Summary

The screenshot displays the EQRS interface for the 'Facility summary' of 'ABC Dialysis'. The top navigation bar includes 'EQRS', 'Dashboard', 'Facilities', 'Patients', and 'Reports'. A left sidebar lists various facility details, all marked with a green checkmark: Network Information, Contact Information, Certification, Services Information, Ownership, Hours and shifts, and Backup facility. The 'Facility summary' section is highlighted. The main content area features a green circular progress indicator with '7/7' inside, and a message: 'You have successfully submitted your facility to CMS.' Below this, there are links for 'Actions' (Attestations, Default preferences, Personnel) and a 'View to edit' link for 'Network information'. The 'Network information' section includes fields for 'Network' (Network 10), 'Network facility code' (XG), 'Program type' (Dialysis), 'Facility legal name' (ABC Dialysis), and 'Facility DBA name' (ABC Dialysis). A 'View to edit' link is also present for this section. The 'Contact information' section includes a 'County' field and 'Physical address effective start date' and 'Mailing address effective start date' (11/06/2000). 'Print page' and 'Help' links are located in the top right corner.

# EQRS Data Management Guidelines

## Patients

### Admit and Discharge Patients

<b>Key Points</b>	<ul style="list-style-type: none"> <li>• Chronic ESRD patients* dialyzing at outpatient dialysis facilities as a permanent patient must be admitted to a dialysis facility in EQRS.</li> <li>• Patients who receive a kidney transplant at a kidney transplantation center must be admitted to a kidney transplantation center in EQRS.</li> <li>• Tier 1 Data Managers admit and discharge ESRD patients to and from dialysis facilities within their scope.</li> <li>• Tier 2 Data Managers admit and discharge patients to and from kidney transplantation and VHA facilities within their scope.</li> <li>• See the Admit and Discharge Reasons on page 36 for more details.</li> </ul>
<b>Frequency</b>	<p>Tier 1 Data Managers admit and discharge patients to and from their respective dialysis facilities within 5 business days of first treatment and discharge within 5 business days of last treatment.</p> <p>Tier 2 Data Managers admit and discharge patients to and from their respective kidney transplantation and VHA facilities within two business days of notification and discharge within two business days of last treatment notification.</p>
<b>Additional Guidance</b>	<p>The following link has guidance to admit and discharge ESRD patients in EQRS: <a href="https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf">https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf</a></p>

\*Acute ESRD patients should not be entered into EQRS.

**Figure 11: Admit Patient Option**

## EQRS Data Management Guidelines

### Complete CMS-2728 and CMS-2746 Forms

<b>Key Points</b>	<ul style="list-style-type: none"> <li>• The CMS-2728 ESRD Patient Medicare Entitlement and/or Patient Registration form serves as the Medicare enrollment and patient registry form for all renal and kidney transplant patients in the U.S. and U.S. territories.</li> <li>• CMS-2728 forms are completed and submitted directly to CMS in EQRS. The original signed CMS-2728 Form is provided to the Social Security Administration (SSA) if the patient is applying for ESRD Medicare benefits.</li> <li>• A CMS-2746 ESRD Death Notification form is completed when a patient expires.</li> <li>• Copies of the printed and signed CMS-2728 form and the printed CMS-2746 form are kept in the patient’s medical record.</li> <li>• Modifications need to be requested within 5 business days. After 5 business days the only field that can be modified is Field 23, which is the field for the date that regular chronic dialysis began.</li> </ul>
<b>Frequency</b>	<p>Tier 1 Data Managers:</p> <ul style="list-style-type: none"> <li>• Start the 2728 forms within 10 business days of the patient starting chronic dialysis at the facility and submit no later than 45 days (field 24 of CMS-2728 form).</li> <li>• Submit CMS-2746 forms within 14 days of the date of death.</li> </ul> <p>Tier 2 Data Managers:</p> <ul style="list-style-type: none"> <li>• Submit Initial CMS-2728 forms within 5 business days of notification.</li> <li>• Submit CMS-2746 forms for kidney transplantation and VHA facilities within 5 business days of notification of the date of death. *</li> </ul> <p>Tier 3 Data Managers:</p> <ul style="list-style-type: none"> <li>• Support Tier 1 and Tier 2 Data Managers by deleting and/or modifying saved CMS-2728 forms within 10 business days of assignment to the Tier 3 Data Manager.</li> <li>• Support Tier 1 and Tier 2 Data Managers by deleting saved CMS-2746 forms within 5 business days of assignment to the Tier 3 Data Manager.</li> </ul>
<b>Additional Guidance</b>	<p>The following link includes guidance to add a CMS-2728 Form and complete a CMS-2746 Form in EQRS: <a href="https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf">https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf</a></p>

\*Tier 1 Data Managers at kidney transplantation centers have limited access in EQRS. However, they are authorized to complete the CMS-2728 and CMS-2746 form in EQRS.

## Personnel

### Add/Edit Key Personnel

<b>Key Points</b>	<ul style="list-style-type: none"> <li>Key personnel, such as the facility medical director, facility nephrologist, facility nurse manager, primary facility contact, and anyone who signs patient forms must be entered into EQRS.</li> <li>Personnel entered display on other screens, such as: <table border="1" style="margin-left: 20px;"> <tr><td>Facility ICH CHAPS Attestation</td></tr> <tr><td>Treatment Summary</td></tr> <tr><td>CMS-2728</td></tr> <tr><td>CMS-2746</td></tr> </table> </li> <li>Tier 1 Data Managers review and “Inactivate Records” as needed.</li> <li>ESRD stakeholders utilize personnel data for various communications and approvals.</li> </ul>	Facility ICH CHAPS Attestation	Treatment Summary	CMS-2728	CMS-2746
Facility ICH CHAPS Attestation					
Treatment Summary					
CMS-2728					
CMS-2746					
<b>Frequency</b>	<p>Tier 1 Data Managers add/edit key staff members on the <i>Personnel</i> screen of in-scope dialysis facilities within 5 business days of staff changes.</p> <p>Tier 2 Data Managers add/edit key staff members on the <i>Personnel</i> screen of in-scope kidney transplantation and VHA facilities within five business days of notification of staff changes.</p>				
<b>Additional Guidance</b>	<p>The following link includes guidance to edit facility personnel information in EQRS: <a href="https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf">https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf</a></p>				

**Figure 12: Add/Edit Personnel Options**

## Add new personnel

Add new personnel and positions using the form below. Help

**Personnel information**

<b>Salutation</b>	<b>First Name (required)</b>	<b>Middle Initial</b>	<b>Last Name (required)</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Suffix</b>	<b>Personnel NPI</b>	<b>UPIN</b>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
<b>Credentials</b>			
<input type="text"/>			
<b>Organizational Unique Personnel Identifier</b>			
<input type="text"/>			

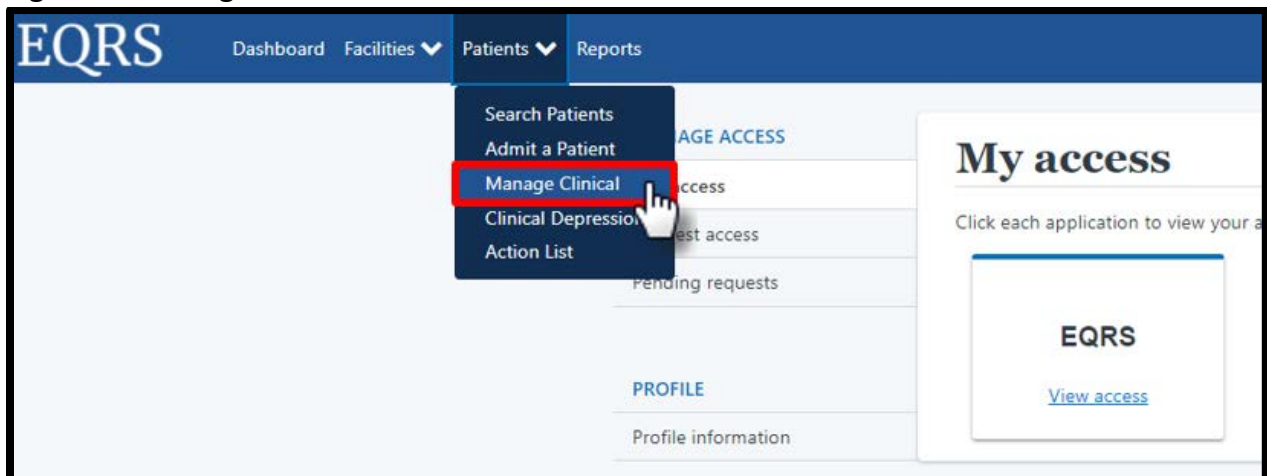
# EQRS Data Management Guidelines

## Clinical

### Manage Clinical

<p><b>Key Points</b></p>	<ul style="list-style-type: none"> <li>• Clinical data collected for patients monthly in EQRS supports:             <ul style="list-style-type: none"> <li>○ The CMS Quality Strategy</li> <li>○ The ESRD QIP Program</li> <li>○ The CMS Process Improvement Initiatives</li> </ul> </li> <li>• Clinical data management includes:             <table border="1" data-bbox="488 558 1528 800"> <tr> <td>Anemia Management</td> <td>Infection</td> </tr> <tr> <td>Dialysis Adequacy</td> <td>Iron</td> </tr> <tr> <td>Ultrafiltration</td> <td>Fluid Weight</td> </tr> <tr> <td>Medication Reconciliation</td> <td>Hospitalization</td> </tr> <tr> <td>Mineral Metabolism</td> <td>Vaccination</td> </tr> <tr> <td>Erythropoiesis-Stimulating Agents (ESA)</td> <td>Vascular Access</td> </tr> </table> </li> <li>• Tier 1 Data Managers report clinical data directly to CMS by manually entering lab results and other clinical data, or electronically through batch submission.</li> <li>• Tier 1 Data Managers report the last lab of the month for hemodialysis and peritoneal dialysis patients or indicate “N/A.” (“N/A” does not satisfy the required clinical submission).</li> <li>• Tier 1 Data Managers report the vascular access type used for each patient during his or her last dialysis treatment during a Clinical Month.</li> </ul>	Anemia Management	Infection	Dialysis Adequacy	Iron	Ultrafiltration	Fluid Weight	Medication Reconciliation	Hospitalization	Mineral Metabolism	Vaccination	Erythropoiesis-Stimulating Agents (ESA)	Vascular Access
Anemia Management	Infection												
Dialysis Adequacy	Iron												
Ultrafiltration	Fluid Weight												
Medication Reconciliation	Hospitalization												
Mineral Metabolism	Vaccination												
Erythropoiesis-Stimulating Agents (ESA)	Vascular Access												
<p><b>Frequency</b></p>	<p>Tier 1 Data Managers follow CMS’s Clinical Data Submission Schedule.</p>												
<p><b>Additional Guidance</b></p>	<p>The following link includes guidance to add Clinical information in EQRS visit <a href="https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf">https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf</a>.</p>												

Figure 13: Manage Clinical Data



# EQRS Data Management Guidelines

## Report Clinical Depression Screening and Follow-Up Plan

<b>Key Points</b>	<ul style="list-style-type: none"> <li>• Facilities must submit Clinical Depression Screening and Follow-Up Plan information for each eligible patient at least once during the calendar year.</li> <li>• Users can enter data during the entire assessment period and are given two months past the end of the assessment period to complete reporting.</li> <li>• After the submission deadline, the previous year’s assessment period closes, and the reported value becomes read-only.</li> <li>• Assessment Period: January 1–December 31.</li> </ul>
<b>Frequency</b>	Tier 1 Data Managers must report Clinical Depression Screening and Follow-Plan data within two months past the end of the assessment period (as directed by the ESRD QIP Program Final Rule per Payment Year).
<b>Additional Guidance</b>	The following link has guidance to add Clinical Depression information in EQRS: <a href="https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf">https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf</a>

**Figure 14: Clinical Depression Screening and Follow-up Plan**

The screenshot displays the EQRS interface for reporting clinical depression screening. The top navigation bar includes 'EQRS', 'Dashboard', 'Facilities', 'Patients', and 'Reports'. The main heading is 'Clinical Depression Screening and Follow-Up Reporting'. Under the 'FACILITY' section, the 'Facility CCN, NPI, and name' is '123456 7891011121 ABC DIALYSIS'. The 'Assessment period' is set to '01/01/2021 - 12/31/2021'. The 'PATIENT' section shows a 'Depression screening status' of 'Required' and a 'Patient name search' field. Below this is a table with the following data:

UPI	Patient name	Screening status	Last updated	Actions
3100021929	Admitreasons, Testing	Required		Report
3100020535	Eight, Patient	Required		Report

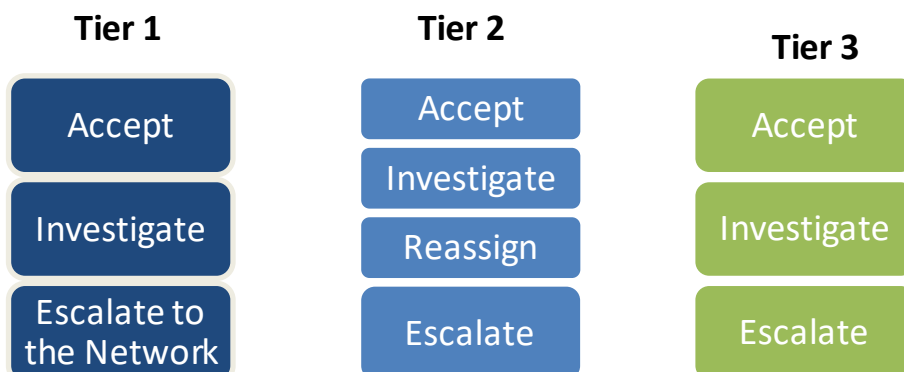
# EQRS Data Management Guidelines

## Action List

### Resolve Action List Accretions

<b>Key Points</b>	<ul style="list-style-type: none"> <li>• Definition of an EQRS accretion: Identifies an ESRD patient who exists in another CMS database but no patient record exists in EQRS.</li> <li>• EQRS communicates with various databases to receive Accretion alerts to support data reporting accuracy.</li> <li>• Accretions are created when differences are identified between the two databases.</li> <li>• Accretions actions can be:             <ul style="list-style-type: none"> <li>○ Assigned to Tier 1 Data Managers directly in EQRS or “Reassigned” by Tier 2 users.</li> <li>○ Assigned to Tier 2 Data Managers directly in EQRS, “Reassigned” by another Tier 2 user, or “Escalated” by a Tier 1 user.                 <ul style="list-style-type: none"> <li>▪ Tier 2 Data Managers are responsible for resolving Accretions for VHA, kidney transplantation, and closed facilities. Tier 2 Data Managers are responsible for reassigning or escalating out-of-scope patients or Gap patients.</li> </ul> </li> <li>○ Assigned to Tier 3 Data Managers directly in EQRS or “Escalated” by Tier 2 users to reconcile in EQRS.</li> </ul> </li> </ul>						
<b>Frequency</b>	<p>All Data Managers use EQRS to resolve open Accretions.</p> <table border="1" data-bbox="521 1129 1260 1251"> <thead> <tr> <th colspan="2">Resolution Period</th> </tr> </thead> <tbody> <tr> <td>15 Days</td> <td>Newly generated or “Reassigned” Accretions</td> </tr> <tr> <td>30 Days</td> <td>“Under Investigation” and Accretions</td> </tr> </tbody> </table>	Resolution Period		15 Days	Newly generated or “Reassigned” Accretions	30 Days	“Under Investigation” and Accretions
Resolution Period							
15 Days	Newly generated or “Reassigned” Accretions						
30 Days	“Under Investigation” and Accretions						
<b>Additional Guidance</b>	<p>The following link has guidance on how to resolve open accretions in EQRS: <a href="https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf">https://mycrownweb.org/wp-content/uploads/2020/10/EQRS-Facility-Editor-Quick-Start-Guide_2020.pdf</a>.</p>						

Figure 15: Actions taken by Data Managers to Resolve Accretions





## Form 2744

### Add New CMS-2744A Forms (Dialysis Facilities)

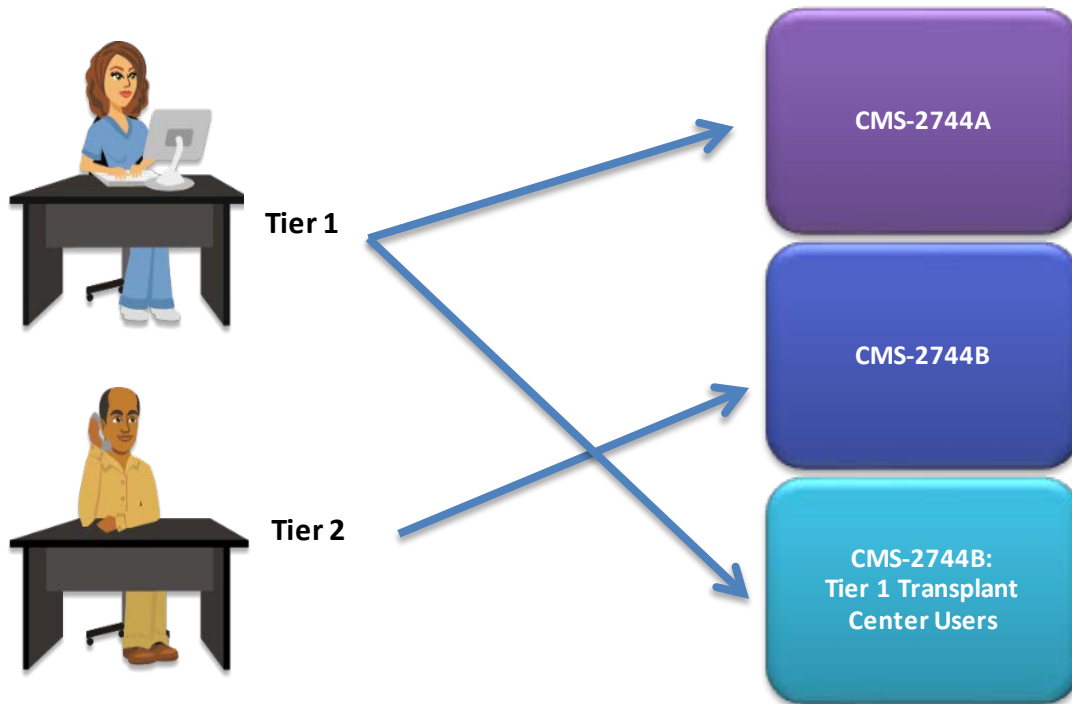
<b>Key Points</b>	<ul style="list-style-type: none"> <li>• The CMS-2744 form is the annual ESRD Facility Survey designed to support data pertaining to:               <ul style="list-style-type: none"> <li>○ Treatment trends</li> <li>○ Utilization of services</li> <li>○ Patterns of practice in treating ESRD patients</li> </ul> </li> <li>• CMS-2744A forms are completed for dialysis facilities that capture facility, treatment, and staffing data for the survey year (January 1–December 31).</li> <li>• All patient admissions and discharges and treatment information are entered in EQRS for the survey year.</li> </ul>
<b>Frequency</b>	Tier 1 Data Managers complete CMS-2744A forms at the start of each year for the prior year and submit by the CMS due date.

### Add New CMS-2744B Forms (Kidney Transplantation Facilities)

<b>Key Points</b>	<ul style="list-style-type: none"> <li>• CMS-2744B forms are completed for kidney transplantation centers to capture data regarding patients' kidney transplant eligibility, the number of kidney transplants performed, and the number of patients awaiting kidney transplant during the survey year (January 1 –December 31).</li> <li>• Tier 1 Data Managers at kidney transplantation centers are authorized to complete CMS-2744B forms for facilities within their scope. *</li> <li>• Tier 2 Data Managers complete CMS-2744B forms for kidney transplantation centers that do not have EQRS access.</li> </ul>
<b>Frequency</b>	Tier 1 and Tier 2 Data Managers complete CMS-2744B forms at the start of each year for the prior year and submit by the CMS due date.

\*Tier 1 Data Managers at kidney transplantation centers have limited access in EQRS. However, they are authorized to complete the CMS-2744B form in EQRS.

Figure 16: CMS-2744 Completion

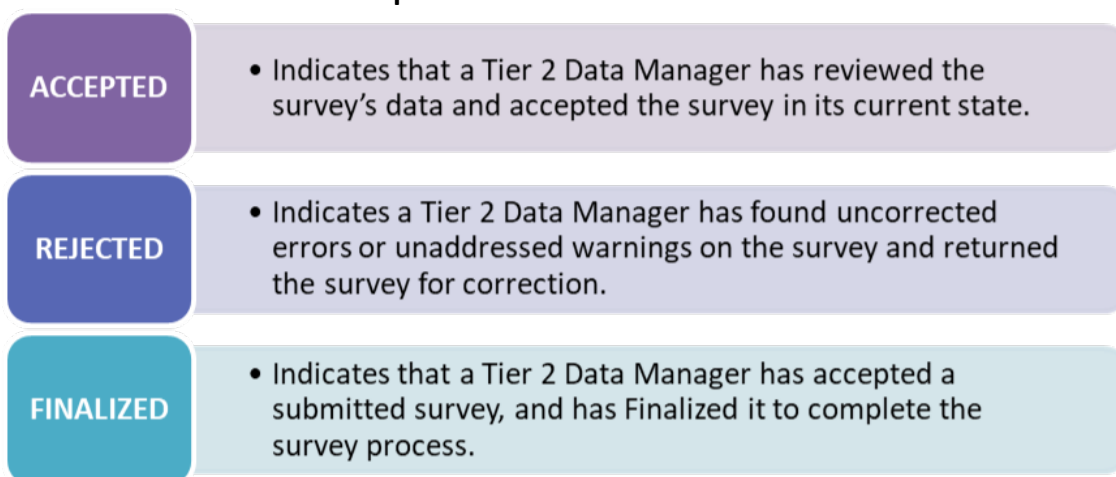


## EQRS Data Management Guidelines

### Accept/Reject/Finalize CMS-2744 Forms

<b>Key Points</b>	<ul style="list-style-type: none"> <li>• Tier 1 and Tier 2 Data Managers work together to complete CMS-2744 forms in EQRS once a year for each dialysis and kidney transplantation facility.</li> <li>• Users must resolve CMS-2744 errors before attempting to “Submit for Review.” The form is complete once it is “Finalized.”</li> <li>• CMS-2744 forms are “Accepted” or “Rejected” and “Finalized” by Tier 2 Data Managers.</li> <li>• Tier 2 Data Managers attest that all facilities within their scope have completed the CMS-2744 forms by the CMS due date.</li> </ul>
<b>Frequency</b>	Tier 2 Data Managers review, and “Accept” and “Finalize” or “Reject” CMS-2744 forms within 30 calendar days of the form being “Submitted for Review” by a facility.

**Figure 17: CMS-2744 Status Descriptions**

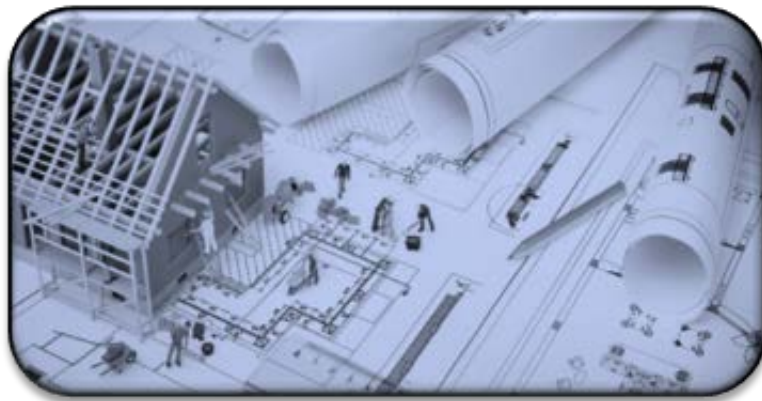


### Add New CMS-2744A Forms for Closed Facilities

<b>Key Points</b>	<ul style="list-style-type: none"> <li>• A Tier 1 Data Manager may complete the CMS-2744A form if the facility is in the process of closing.</li> <li>• Tier 1 Data Managers ensure that all patient, patient admission and discharge, and treatment information are entered into EQRS before submitting a CMS-2744A form.</li> </ul>
<b>Frequency</b>	Tier 1 Data Managers submit CMS-2744A forms for acceptance within 5 business days prior to closure of the facility.

# Chapter 4

## Tier 3 Data Management Support



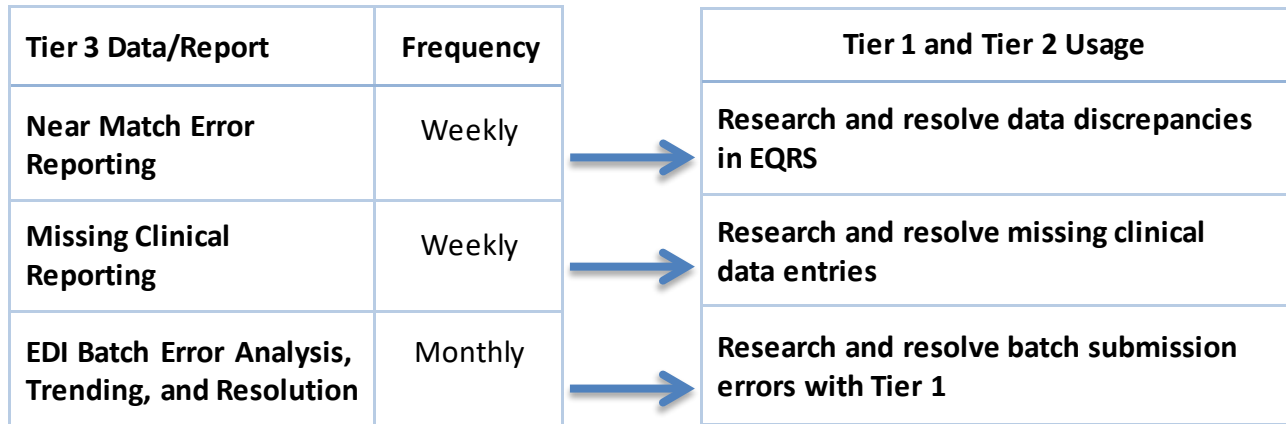
## Tier 3 Data Manager Role

### Role Defined

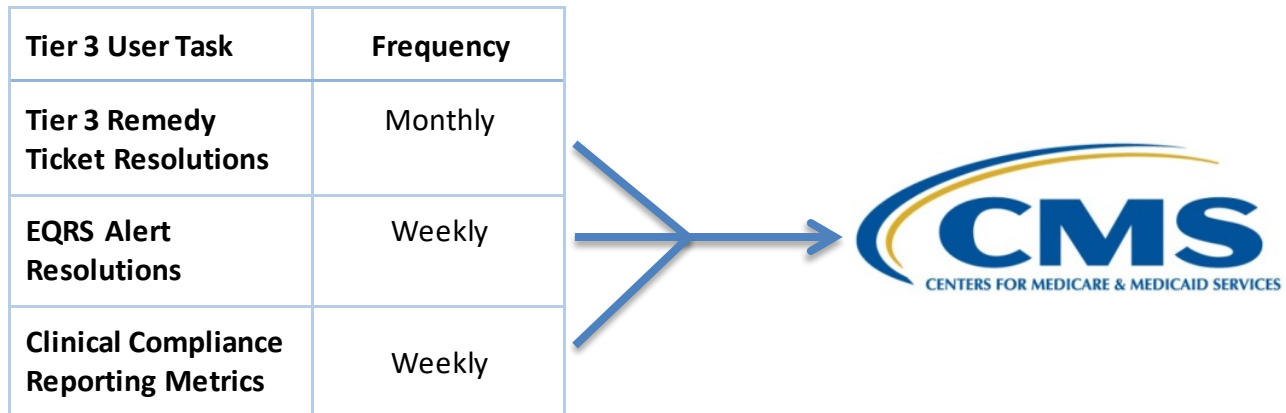
Tier 3 Data Managers support **Data Monitoring**, **Data Measuring**, and **Data Managing** by using EQRS to acquire and report necessary data to CMS. Additionally, Tier 3 Data Managers provide support to Tier 1 and Tier 2 users by providing reports and other documentation that provide an overview of data entries.

Examples of Tier 3 data management support:

#### Data Monitoring



#### Data Measuring



## EQRS Data Management Guidelines

### Data Managing

<b>Tier 3 User Task</b>	<b>Frequency</b>
<b>2728 Form Deletion and Modification</b>	10 business days after assignment to the Tier 3 Data Manager
<b>2746 Form Deletion</b>	5 business days after assignment to the Tier 3 Data Manager
<b>Erroneous Patient Deletion</b>	5 business days after assignment to the Tier 3 Data Manager
<b>Acute Patient Maintenance</b>	5 business days after assignment to the Tier 3 Data Manager
<b>Patient Merge</b>	10 business days after assignment to the Tier 3 Data Manager
<b>Patient Unmerge</b>	5 business days after assignment to the Tier 3 Data Manager
<b>Reopen 2744 Forms</b>	5 business days after assignment to the Tier 3 Data Manager

**Note:** Timelines may adjust based on research needed after assignment.

## Appendixes

### Admit and Discharge Reasons

#### *Admit Reasons*

Admit Reason	Definition
<b>New ESRD Patient</b>	The patient being admitted to the facility is new to ESRD with their information having never been entered at any other facility.
<b>Transfer In</b>	The patient being admitted to the facility is a transfer patient from another facility.
<b>Restart</b>	The patient being admitted to the facility had previously stopped dialysis treatment and is now resuming dialysis treatment.
<b>Dialysis After Transplant Failed</b>	The patient being admitted to the facility is being enrolled back into dialysis treatment after a failed kidney transplant.
<b>Dialysis in Support of Transplant</b>	The patient is temporarily receiving hemodialysis at a facility in support of a kidney transplant.

## EQRS Data Management Guidelines

### *Discharge Reasons*

Discharge Reason	Definition
<b>Acute</b>	The patient is not chronic ESRD and is not receiving a regular course of dialysis treatment.
<b>Death</b>	The patient's date of death.
<b>Discontinue</b>	The patient has discontinued dialysis treatment.
<b>Involuntary</b>	The patient was involuntarily discharged from the facility. *
<b>Lost to Follow Up</b>	The patient has stopped arriving for scheduled treatments with no prior notification and the facility is unable to locate the patient. *
<b>Other</b>	The patient was discharged from the facility and plans to receive chronic dialysis in prison or another country.
<b>Recover Function</b>	The patient has recovered kidney function and no longer needs dialysis (can only use Recover Function reason if it is a native kidney).
<b>Transfer</b>	The patient has transferred to another facility. Transfer Discharge Subcategory: <ul style="list-style-type: none"> <li>• Dialysis Facility</li> <li>• Hospice</li> <li>• Hospital</li> <li>• Long Term Care Facility</li> <li>• Nursing Home</li> <li>• Rehab Center</li> </ul>
<b>Transplant in US</b>	The patient was discharged from the facility to receive a transplant within the United States.
<b>Transplant Outside US</b>	The patient was discharged from the facility to receive a transplant outside the United States.

\*Consult with the local ESRD Network prior to using this discharge reason.



# EQRS Data Management Guidelines

## Patient Admit and Discharge Reason Rules

### *Discharges Allowed*

		Discharge Reasons											
		A=Allow N=Not Allow S=System Generated											
		Acute	Death	Discontinue	Lost to Follow Up	Recover Function	Involuntary	Other	Transplant in US	Transplant Outside US	Transfer	Transplant Failed	System Discharge
Admission Record Admit Reason	New ESRD Patient (Dialysis)	A	A	A	A	A	A	A	A	A	A	N	S
	New ESRD Patient (Transplant)	N	A	N	A	N	N	N	A	A	N	A	S
	Transfer In	N	A	A	A	A	A	A	A	A	A	N	S
	Restart	N	A	A	A	A	A	A	A	A	A	N	S
	Dialysis After Transplant Failed	N	A	A	A	A	A	A	A	A	A	N	S
	Dialysis in Support of Transplant	N	A	N	A	A	A	A	A	A	A	N	S
	Transplant	N	A	N	A	N	N	N	A	A	N	A	S

## EQRS Data Management Guidelines

### *Previous Discharge – Next Admit Reason Allowed*

		Admission Reasons						
		A=Allow N=Not Allow S= System Generated						
		New ESRD Patient (Dialysis)	New ESRD Patient (Transplant)	Transfer In	Restart	Dialysis After Transplant Failed	Dialysis in Support of Transplant	Transplant
Previous Admission Record Discharge Reason	Acute	A	A	N	N	N	N	N
	Death	N	N	N	N	N	N	N
	Discontinue	N	N	N	A	N	N	A
	Lost to Follow Up	N	N	A	A	A	A	A
	Recover Function	N	N	N	A	N	N	A
	Involuntary	N	N	A	N	N	N	A
	Other	N	N	A	A	N	N	A
	Transplant in US	N	N	N	N	A	A	A
	Transplant Outside US	N	N	N	N	A	A	A
	Transfer	N	N	A	N	N	N	N
	Transplant Failed	N	N	N	N	A	N	A
System Discharge	N	N	S	S	S	S	S	

## EQRS Data Management Guidelines

### Previous Admission Record - Next Admission Record Admission Reasons

		Next Admission Record Admission Reasons						
		A=Allow N=Not Allow						
		New ESRD Patient (Dialysis)	New ESRD Patient (Transplant)	Transfer In	Restart	Dialysis After Transplant Failed	Dialysis in Support of Transplant	Transplant
Previous Admission Record Admit Reason	New ESRD Patient (Dialysis)	N	N	A	A	N	N	A
	New ESRD Patient (Transplant)	N	N	N	N	A	A	A
	Transfer In	N	N	A	A	N	N	A
	Restart	N	N	A	A	N	N	A
	Dialysis After Transplant Failed	N	N	A	A	N	N	A
	Dialysis in Support of Transplant	N	N	N	N	A	A	A
	Transplant	N	N	N	N	A	A	A

## EQRS Data Management Guidelines

### Tier 1 Data Manager Task List

Category	Section	Task	Frequency
<b>Data Monitoring</b>	<b>Facility Dashboard</b>	Monitor Facility Dashboard	At least weekly
	<b>Facilities</b>	Monitor Facility ICH CAHPS Attestation	Once per year between January 1 and the end of the reporting period closure; ICH CAHPS Attestation reporting period typically occurs within the first two months of the year
		Monitor Facility Summary	By December 31 of each year
	<b>Personnel</b>	Review Personnel	At least quarterly
<b>Data Managing</b>	<b>Facilities</b>	Submit Facility ICH CAHPS Attestation	Once per year between January 1 and the end of the reporting period closure; ICH CAHPS Attestation reporting period typically occurs in the first two months of the year
		Update Facility Summary	At least annually
	<b>Patients</b>	Admit and Discharge Patients	Admit within 5 business days of first treatment. Discharge within 5 business days of last treatment
		Complete CMS-2728 and CMS-2746 Forms	CMS-2728 should be started within 10 business days of the patient starting chronic dialysis at the facility and submitted no later than 45 days; CMS-2746 should be completed within 14 days of the date of death
	<b>Personnel</b>	Add Key Personnel	Within 5 business days of staff changes
	<b>Clinical</b>	Manage Clinical	Follow CMS's Clinical Data Submission Schedule

## EQRS Data Management Guidelines

	<b>Clinical Depression Screening and Follow-Up</b>	Report Clinical Depression Screening and Follow-Up Plan	Report Clinical Depression Screening and Follow-Plan data within two months past the end of the assessment period; Clinical Depression Assessment Period is from January 1-December 31 of each year
	<b>Action List</b>	Resolve Accretions	New or Reassigned: within 15 days of issuance; Under Investigation: within 30 days of issuance
	<b>Form 2744</b>	Add New CMS-2744A Forms	By CMS due date
		Add New CMS-2744B Forms	By CMS due date
		Add New CMS-2744A Forms for Closed Facilities	Within 5 business days prior to closure

### Tier 2 Data Manager Task List

Category	Section	Task	Frequency
<b>Data Monitoring</b>	<b>Facilities</b>	Monitor Facility ICH CAHPS Attestations	Once per year between January 1 and the end of the reporting period closure; ICH CAHPS Attestation submission period typically occurs in the first two months of the year
		Monitor Facility Summary	By December 31 of each year
		Monitor Saved Facilities	Within 30 days from date the facility is saved
<b>Data Managing</b>	<b>Facilities</b>	Add New Facility in EQRS	Within 1 business day of receiving facility notification
		Update Facility Summary	Within 1 business day of receiving facility update
	<b>Patients</b>	Admit and Discharge Patients	Admit within 2 business days of notification. Discharge within 2 business days of last treatment notification.

## EQRS Data Management Guidelines

		Complete CMS-2728 and CMS-2746 Forms	CMS-2728: within 5 business days of notification; CMS-2746: within 5 business days of notification
	<b>Personnel</b>	Add Key Personnel	Within 5 days of notification of staff changes
	<b>Action List</b>	Resolve Accretions	New or Reassigned: within 15 days of issuance; Under Investigation: within 30 days of issuance
	<b>Form 2744</b>	Add New CMS-2744B Forms	By CMS due date
Accept/Reject/Finalize CMS-2744 Forms		Within 30 calendar days of a form being "Submitted for Review"	

### Tier 3 Data Manager Task List

Category	Section	Task	Frequency
<b>Data Monitoring</b>	<b>Facilities</b>	Monitor Facility ICH CAHPS Attestations	Once per year between January 1 and the end of the reporting period closure. ICH CAHPS Attestation submission period typically occurs in the first two months of the year.
<b>Data Managing</b>	<b>Patients</b>	Delete or Modify CMS-2728 and Delete CMS-2746 Forms	CMS-2728: within 10 business days of notification; CMS-2746: within 5 business days of notification
	<b>Action List</b>	Resolve Accretions	New or Reassigned: within 15 days of issuance; Under Investigation: within 30 days of issuance