End-Stage Renal Disease (ESRD) Quality Reporting System (EQRS)
ESRD Outreach, Communication, and Training (EOCT)

EQRS November Town Hall
Questions and Answers

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This Q&A summary was modified to reflect the most up-to-date information pertaining to EQRS reporting information and Payment Year (PY) 2022 preview period information and facility activities. As of the posting date, this document will not be updated any further. This document was modified for grammar. It answers provider questions submitted during the event. Subject-matter experts developed the responses during and after the event.

General Webinar Questions

Question 1: **How can I access the slide deck and recording from the November 18, 2021, Town Hall event?**

The November Town Hall slides and recording are available on the Events page of the MyCROWNWeb website: https://mycrownweb.org/events/.

General EQRS Questions

Question 2: **When can end-stage renal disease (ESRD) facilities submit a calendar year (CY) 2021 In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH CAHPS) facility attestation in End-Stage Renal Disease (EQRS) Quality Reporting System (EQRS)?**

ESRD facilities can submit an ICH CAHPS attestation in EQRS for CY 2021 starting on January 1, 2022. CY 2021 facility attestations must be submitted by February 28, 2022, at 11:59 p.m. Pacific Time (PT).

Question 3: **When is the EQRS data submission deadline for 2021 data?**

The data submission deadline for all months in 2021 is February 28, 2022, at 11:59 p.m. PT. This deadline applies to EQRS Clinical Data, Clinical Depression Screening and Follow-up reporting, and ICH CAHPS facility attestations.

Question 4: **When should facilities enter 2021 data in EQRS?**

Effective September 20, 2021, all ESRD facilities can submit 2021 EQRS Clinical Data and Clinical Depression Screening and Follow-Up reporting in EQRS. As of January 1, 2022, facilities can submit CY 2021 ICH CAHPS facility attestations. The data submission deadline for these data for all months in 2021 is February 28, 2022, at 11:59 p.m. PT.

Question 5: **What reports are available within EQRS that facilities can use to help ensure accurate reporting?**

There are two reports available in EQRS that can assist facilities with accurately reporting data. These reports are the Patient Roster Report (PRR) and the Patient Events Report (PER). The PRR provides a list of

admitted patients at the selected facility or facilities on a specific date and can assist facilities in confirming the accuracy of patient data. The PER provides a list of all patient events in EQRS. To obtain the PRR and PER, log into EQRS using Google Chrome and click on the Reports tab in the navigation menu at the top of the screen.

For more information about the PRR and PER, refer to page 16 of the *EQRS Data Management Guidelines*: https://mycrownweb.org/wp-content/uploads/2021/08/EQRS-Data-Managment-Guidelines_vFINAL508.pdf.

New EQRS Features Questions

Question 6:   **Are standard Kt/V lab values included in measure calculations?**

No. Kt/V lab values reported in EQRS using the standard method are not used in the ESRD Quality Incentive Program (QIP) Kt/V Dialysis Adequacy - Comprehensive measure calculation. Kt/V lab values reported in EQRS must have either the UKM or Daugardis II method selected to be included in the ESRD QIP measure calculation.

Question 7:   **Is telemedicine information required to be reported in EQRS?**

Yes. Facilities should enter this information every clinical month for each patient. Enter this data under the Telemedicine section of the Manage Clinical screen in EQRS. Although telemedicine reporting in EQRS is an ESRD Network requirement, it will not impact the facility's QIP score at this time. Additionally, if your facility batch submits or uses a Health Information Exchange (HIE)/Electronic Data Interchange (EDI) method, follow the guidance provided by your organization. If batch or HIE submission is unavailable, the facility will be responsible for reporting it in the EQRS user interface (UI) until batch or HIE submission is available. Additionally, For additional information about the telemedicine feature in EQRS, refer to the *Telemedicine Usage Frequently Asked Questions (FAQs)* document that is available from the MyCROWNWeb website: https://mycrownweb.org/wp-content/uploads/2021/11/Telemedicine-Usage-FAQs-Draft_20211116_CMS-Approved_FINAL.pdf.

Question 8:   **Are we required to report on telemedicine for all months in 2021?**

Dialysis facilities are required to report all available clinical data for all patients in EQRS each month. Enter this data under the Telemedicine section of the Manage Clinical screen. Although telemedicine reporting in

EQRS is an ESRD Network requirement, it will not impact the facility's QIP score at this time.

For additional information about the telemedicine feature in EQRS, refer to the *Telemedicine Usage FAQs* document that is available from the MyCROWNWeb.org website: https://mycrownweb.org/wp-content/uploads/2021/11/Telemedicine-Usage-FAQs-Draft_20211116_CMS-Approved_FINAL.pdf.

Question 9: **How is the facility supposed to know if a patient has received a telemedicine visit?**

The facility will need to determine the best way for the facility to track, monitor, and report this information. Additionally, it is the facility's responsibility to determine the most appropriate person to enter data into EQRS, and any user with EQRS access can enter this data. For additional information about the telemedicine feature, refer to the *Telemedicine Usage (FAQs)* document that is available from the MyCROWNWeb website: https://mycrownweb.org/wpcontent/uploads/2021/11/Telemedicine-Usage-FAQs-Draft_20211116_CMS-Approved_FINAL.pdf

Question 10: **How often does telemedicine data need to be reported in EQRS?**

Telemedicine reporting should be completed every clinical month for each patient, regardless of whether the patient received a telemedicine visit or not. Enter this data under the Telemedicine section on the Manage Clinical screen. Although telemedicine reporting in EQRS is an ESRD Network requirement, it will not impact the facility's QIP score at this time.

For additional information about the telemedicine feature in EQRS, refer to the *Telemedicine Usage FAQs* document that is available from the MyCROWNWeb website: https://mycrownweb.org/wp-content/uploads/2021/11/Telemedicine-Usage-FAQs-Draft_20211116_CMS-Approved_FINAL.pdf.

Question 11: **Is nursing home setting information required to be reported in EQRS?**

Yes. Facilities should review and update this information upon the patient's admission to the facility, monthly, and/or if the patient's nursing home status has changed. Facilities do not need to enter nursing home setting information in EQRS for patients that are not in a nursing home. Although reporting nursing home setting information in EQRS is an

ESRD Network requirement, it will not impact the facility's QIP score at this time.

Enter the nursing home setting information under Contact Information of the Manage Patient screen in EQRS. Lastly, if your facility batch submits or uses an HIE/EDI method, follow the guidance provided by your organization. If batch or HIE submission is unavailable, the facility will be responsible for reporting it in the EQRS UI until batch or HIE submission is available.

Question 12:   **Can the telemedicine data and nursing home setting information be batched submitted in EQRS via an HIE/EDI if the information is documented in the patient's electronic medical record (EMR)?**

If your facility batch submits or uses an HIE/EDI method, follow the guidance provided by your organization. If batch or HIE/EDI submission is unavailable, the facility will be responsible for reporting these data into the EQRS UI until batch or HIE submission is available. For additional questions, please contact the QualityNet Service Center. The QualityNet Service Center is open Monday–Friday 8 a.m. to 8 p.m. Eastern Time (ET) and can be reached via phone at (866) 288-8912 or via email at qnetsupport-esrd@hcqis.org.

Question 13:   **How often should the nursing home setting information be reported and/or updated in EQRS?**

All patient demographic information, including the fields for the nursing home setting, should be reviewed, and updated upon the patient's admission to the facility, monthly, and when the patient's nursing home status changes. Enter the nursing home setting information under Contact Information of the Manage Patient screen in EQRS. The facility does not need to enter nursing home setting information in EQRS for patients that are not in a nursing home. Additionally, although reporting nursing home setting information in EQRS is an ESRD Network requirement, it will not impact the facility's QIP score at this time. Lastly, if your facility batch submits or uses an HIE/EDI method, follow the guidance provided by your organization. If batch or HIE submission is unavailable, the facility will be responsible for reporting it in the EQRS UI until batch or HIE submission is available.

Question 14:   **Should the nursing home setting be reported in EQRS even if the patient is in a nursing home temporarily?**

Yes. The nursing home setting information should be documented in EQRS even if the patient is temporarily residing in a nursing home. Facilities should review and update this information upon the patient's admission to the facility, monthly, and when the patient's nursing home status changes. However, facilities do not need to enter nursing home setting information in EQRS for patients that are not in a nursing home.

General ESRD QIP Questions

Question 15:   **Where does the Centers for Medicare & Medicaid Services (CMS) get their information for hospitalizations, readmissions, and transplant waitlist?**

Hospitalizations and readmissions data are determined by the inpatient Medicare claims submitted for the patient. Waitlisting information is obtained from the Organ Procurement and Transplant Network (OPTN).

Please refer to the CMS ESRD Measures Manual for the 2020 Performance Period for additional details about data sources for all QIP measures, including Standardized Hospitalization Readmission Ratio (SHR), Standardized Readmission Ratio (SRR) and Percentage of Prevalent Patients Waitlisted (PPPW): https://www.hhs.gov/guidance/document/cms-esrd-measures-manual-2020-performance-period.

Question 16:   **What are the National Healthcare Safety Network (NHSN) data measure types that are submitted for the ESRD QIP?**

There are two NHSN measures that are included in the ESRD QIP. These are the NHSN Bloodstream Infection (BSI) in Hemodialysis Patients Clinical measure and the NHSN Dialysis Event Reporting measure. Both measures are part of the ESRD QIP Safety domain. The NHSN BSI in Hemodialysis Patients Clinical measure requires a facility to report a full year (i.e., 12 months) of data. The NHSN Dialysis Event Reporting measure is a monthly measure, so your facility PSR will display how many eligible months were successfully reported. For facilities to achieve full points on NHSN measures, facilities must submit data according to the Centers for Disease Control and Prevention (CDC) *Dialysis Event Surveillance Protocol*.

ESRD QIP Preview Period Questions

Question 17:   **What range of time is included in PY 2022?**

For PY 2022 ESRD QIP, the baseline period is CY 2019 or January 1, 2019–December 31, 2019. The performance period is CY 2020 but excludes the months for which CMS granted an exception under the ESRD QIP in response to the COVID-19 Public Health Emergency (PHE).

For details regarding months included in individual measure calculations, please refer to the *ESRD QIP FAQs: Exceptions for Dialysis Facilities Affected by COVID-19* document: https://www.cms.gov/files/document/covid-qip-esrd-faqs.pdf. For more information about the ESRD QIP visit the cms.gov website at https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP.

Question 18:   **Why are ESRD facilities not receiving a QIP payment penalty for PY 2022?**

As specified in the CY 2022 ESRD QIP Prospective Payment System (PPS) final rule document that was published in the *Federal Register* on November 8, 2021, a special rule will go into effect for PY 2022 ESRD QIP scoring. Under the special rule, no ESRD facility will receive a payment reduction for PY 2022, and no Total Performance Scores (TPSs) or measure scores will be awarded or calculated for PY 2022 due to the impact of the COVID-19 PHE and EQRS operational issues. For additional information about the special rule, refer to the CY 2022 ESRD QIP PPS final rule that is published on the *Federal Register* website: https://www.federalregister.gov/documents/2021/11/08/2021-23907/medicare-program-end-stage-renal-disease-prospective-payment-system-payment-for-renal-dialysis.

Question 19:   **Do facilities have to post their PY 2022 Performance Score Certificate (PSC) even if there will be no TPS awarded and no payment penalty?**

Although the PY 2022 PSCs will display N/A or Not Applicable and no TPSs will be awarded or calculated, facilities are still required to download, print, and post both English and Spanish versions of the PSC in a prominent location of their facility. The certificates must be posted within the first 15 business days of its availability and remain posted throughout the duration of 2022.

Question 20:   **What are the data periods for each QIP measure as they pertain to the COVID-19 PHE?**

To find out more information regarding the data periods affected by the COVID-19 PHE, refer to the *ESRD QIP FAQs: Exceptions for Dialysis Facilities Affected by COVID-19* document: https://www.cms.gov/files/document/covid-qip-esrd-faqs.pdf.

ESRD QIP User Interface (UI) Questions

Question 21:   **What should I do if there is a missing ESRD QIP report for my facility in the ESRD QIP UI?**

If you are having technical issues with accessing ESRD QIP reports in the ESRD QIP UI, please contact the QualityNet Service Center. The QualityNet Service Center is open Monday–Friday 8 a.m. to 8 p.m. ET and can be reached via phone at (866) 288-8912 or via email at qnetsupport-esrd@hcqis.org.

Question 22:   **If I am locked out of EQRS, how can I reset my password?**

To reset your password, go to the HARP login webpage (https://harp.cms.gov/login/login) and click on the Having trouble logging in? link. Follow the instructions listed on the *Account Recovery* page. If you need additional assistance, contact the QualityNet Service Center for assistance. The QualityNet Service Center is open Monday–Friday 8 a.m. to 8 p.m. ET and can be reached via phone at (866) 288-8912 or via email at qnetsupport-esrd@hcqis.org.

Question 23:   **Where can I find instructions for obtaining access to the ESRD QIP UI?**

Refer to page 5 of the ESRD QIP Quick Start Guide for instructions on how to request access to the ESRD QIP UI: https://mycrownweb.org/wp-content/uploads/2021/08/PY-2022-ESRD-QIP-UI-Quick-Start-Guide_CMS_Approved508_c-1.pdf. For further assistance with requesting access to the ESRD QIP UI, please contact the QualityNet Service Center. The QualityNet Service Center is open Monday–Friday 8 a.m. to 8 p.m. ET and can be reached via phone at (866) 288-8912 or via email at qnetsupport-esrd@hcqis.org.

Question 24:   **How long does it take for my EQRS roles to be approved?**

Please contact the QualityNet Service Center for an update on your EQRS role(s) request. The QualityNet Service Center is open Monday–Friday 8 a.m. to 8 p.m. ET and can be reached via phone at (866) 288-8912 or via email at qnetsupport-esrd@hcqis.org.

Question 25:   **Can multiple payment year reports be accessed from the ESRD QIP UI at the same time?**

Currently only PY 2021 final reports and PY 2022 preview period reports are available in the ESRD QIP UI.

Other Questions

Question 26:   **Where should I submit a question about Organ Procurement and Transplantation Network (OPTN) data?**

You should first submit an inquiry through the ESRD QIP UI if the question is related to patients included in the facility's PPPW measure. To submit an inquiry in the ESRD QIP UI, login to EQRS and confirm that QIP is selected from the orange Change Organization dropdown. Click QIP Scores in the blue navigation menu at the top of the screen. Once in the ESRD QIP UI, click on the Preview Period Inquires link that is listed on the left side of the screen to initiate your inquiry.