End-Stage Renal Disease (ESRD)
Outreach, Communication, and Training (EOCT)

**November 2021 Town Hall
Presentation Transcript**

Speakers

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Jane Chaine: Hello, and welcome everyone. Thank you for joining today's Town Hall event. My name is Jane Chaine, and I am the Communications Director for the End Stage Renal Disease, or ESRD, Outreach Communication and Training (EOCT) Team. Today you will hear from me, along with other subject-matter experts, including Aya Inoue, a Project Manager with Arbor Research Collaborative for Health, and Matthew McDonough, a project director with the EOCT team. We will serve as your hosts and presenters for today's presentation.

Today's presentation is streaming audio through your computer through the GlobalMeet platform, so you do not need a telephone line to hear today's presentation. However, if you are having trouble hearing the streaming audio or need to call in, please submit a message to Ask a Question, and you will be provided with a dial-in and access code number.

If your audio is breaking up, press the F5 key on your computer or click the refresh button as demonstrated on this slide.

If you are hearing an echo, it is likely caused by having multiple browsers open for this event; look at the top of your browser tabs to make sure you only have one event open.

For today's presentation, the audio connections are muted to reduce background sounds. However, real time interaction is encouraged, so if you have a question, use the Ask a Question feature on your screen. When submitting a question, please submit your question to All Panelists. On occasion, there will be questions that will require research beyond the scope of today's call, so if your question does not get answered, please submit your question to the QualityNet Question and Answer Tool. Also, know that your question will be answered within 10 business days.

I would like to remind everyone that the information presented today is for reference only and does not constitute CMS guidance. The audience is encouraged to refer to the final rules that are published on the *Federal Register* website.

Today's event materials, including the recording and slides, will be available within 10 business days under the Events page from www.MyCROWNWeb.org.

Here is today's agenda. The first agenda item that will be covered are the ESRD Quality Reporting System, or better known as EQRS, announcements, and new features. I will follow-up with a training on the EQRS Quality Incentive Program, or QIP, User Interface (UI). Then, the presentation will be handed over to Aya from Arbor to provide an overview of the ESRD QIP Payment Year 2022 Preview Period Preview Performance Score Report. Then, Aya will wrap up with a discussion on preview period activities and responsibilities. Lastly, Matthew McDonough and other subject-matter experts on the line will close the call by assisting with answering preview period questions. At the end of the presentation, I will provide resources to assist you and your facility with navigating through the preview period.

Here is a list of acronyms that you will hear being used during today's presentation.

I'd like to now switch gears to discuss a few EQRS announcements.

This first announcement pertains to EQRS data submission. By now everyone is aware that EQRS opened for 2021 data submission as of September 20, 2021. Starting on this date, dialysis facilities could begin reporting January through September 2021 Clinical Data and Clinical Depression Screening and Follow-up Plan data in EQRS. Please note, all subsequent months in 2021 will open for data submission on the first day of the month. Lastly, facilities can submit a 2021 In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems, or ICH CAHPS, attestation starting January 1, 2022.

This next slide displays the data submission deadline for all months in 2021, which is February 28, 2022, at 11:59 p.m. Pacific Time (PT). This deadline applies to all 2021 EQRS Clinical Data, Clinical Depressing screening data, and facility ICH CAHPS attestations.

This second announcement pertains to a new security measure that CMS launched in October. This security measure disables any EQRS user role or roles for users that have not logged into their EQRS account within 60 days from their last login. Please be reassured that EQRS users will receive multiple email notifications as the 60-day inactivity deadline approaches. If you receive one of these in-activity email notifications, please login to EQRS to maintain your role within EQRS. It is especially important to keep your EQRS role active during this time, while the preview period is active, to ensure that you can participate in preview period activities. If your EQRS user role becomes disabled, refer to the HCQIS HARP Training, for step-by-step instructions on how to re-request your EQRS role or roles. The HCQIS HARP Training can be accessed with the hyperlink displayed on this slide or go to www.MyCROWNWeb.org to access the link to the HARP Training Materials that is displayed on the MyCROWNWeb home page.

This last announcement pertains to the closure of the CRAFT mailbox, which went into effect on October 29 of this year. All questions previously sent to the CRAFT mailbox need to now be submitted to the QualityNet Question and Answer Tool. Refer to this slide for simple instructions on how to submit questions through the QualityNet Q&A Tool.

Please note, the QualityNet Q&A Tool should be used for submitting the following types of questions: EQRS training questions, general EQRS data entry questions, ESRD QIP questions, or questions pertaining to CMS reporting requirements. All other EQRS system related inquiries should be submitted to the QualityNet Service Center. The QualityNet Service center is open Monday through Friday, 8 a.m. through 8 p.m. ET and can be reached by phone or email, as seen listed on this slide.

The next important topic is the new EQRS features.

This slide lists the most recently added EQRS features. This includes Standard Kt/V method, Telemedicine Usage, and Nursing Home Identifier.

Let's review the Standard Kt/V method in a little more detail. Once you are logged into EQRS, this feature is found under the Adequacy section of the Manage Clinical screen. As shown on this slide, the Kt/V Method drop down field now contains Standard as a Kt/V method reporting option. This feature allows EQRS users to report Kt/V and the required ultrafiltration rate data elements when the Standard Kt/V method is used as the Kt/V method.

The next feature is Telemedicine usage. Telemedicine is a new reporting section of the Manage Clinical page and applies to both Hemodialysis and Peritoneal Dialysis collection types. This feature allows facilities to report and track if a patient received telemedicine and the number of telemedicine visits during a particular month. This data should be entered every clinical month on each patient, by selecting Yes or No from the Telemedicine drop down menu. Selecting Yes enables the other fields in this section. If the patient received any telemedicine visits, enter the date of the last visit and number of visits during the reporting month.

The last EQRS feature to be discussed is the Nursing Home Identifier. The Nursing Home Identifier feature is in the Contact Information section of the Patient screen and should be reviewed upon admission or if the patient's nursing home status has changed. Also, as a reminder, patient demographic information should be reviewed monthly and updated accordingly in EQRS. Let's focus on the new feature, notice the second checkbox on this slide, which reads: "Is the patient in a nursing home setting?" EQRS users will want to select this checkbox, if the patient resides in a nursing home. Once this box is checked, the Nursing Home Setting field becomes enabled and a Nursing Home Setting must be selected. To complete the Nursing Home reporting in EQRS, select one of the three options from the Nursing Home Setting drop down menu. These include Permanent Resident, Short Term Care or Rehabilitation, or Other. You do not need to enter any nursing home information in EQRS, if the patient does not reside in a nursing home.

So far, we have covered EQRS announcements and new features in EQRS. So now let's transition to the ESRD QIP UI training.

The following slides will provide guidance on how to navigate the preview period reports and how to submit inquiries about your facility scores and reports. As a reminder, the first day of the active preview period started today, November 18, and will end on December 20, 2021, at 11:59 p.m. PT.

EQRS users can view ESRD QIP scores and submit inquiries via EQRS. For this training, we'll go over how to access the ESRD QIP UI, QIP roles and functionality, view scores and feedback, view and download reports, and submit, save and reply to inquiries. This training will cover the tasks that will be performed by facility and corporate level ESRD QIP UI users. CMS periodically applies updates to enhance system performance and the user experience, so please know that the screenshots and steps covered in today's training are subject to change.

Let's start our training by providing an overview of how to access the ESRD QIP User Interface.

Starting with Payment Year 2021, CMS implemented a change to improve the way users can view reports and submit ESRD QIP inquiries. This change included a migration of the ESRD QIP roles and functionality to EQRS, which helped consolidate the roles and functionality of its ESRD QIP, Renal Management Information System, and EQRS applications into one environment. That means, instead of needing multiple user IDs and being required to use multiple web addresses to access these different ESRD systems, you can now use one user ID and only need to go to one web address to login.

The first step to accessing the ESRD QIP User Interface and complete tasks within EQRS is to complete the Healthcare Quality Information System Account Roles and Profile, better known as HARP account registration. If you've already completed the HARP account registration and already have a HARP account, you do not need to complete the HARP account registration process again. Only one HARP account is needed to access the multiple interfaces within EQRS.

For step-by-step instructions on how to establish a HARP account, please visit www.mycrownweb.org, and go to the Education page to access the training HARP training materials.

After establishing your HARP account, the next step to access the ESRD QIP User Interface is to request an ESRD QIP role. Users can check their access and submit new access requests by going to the link provided on this slide. After logging into EQRS, users can navigate to the My Access screen to review their roles and applications. If QIP is not listed and you need access to the QIP User Interface, then submit a request for access.

To submit a request, click Request Access in the navigation menu.

Next, when requesting access to the ESRD QIP User Interface, you must indicate the organization category. Please know that it is very important that you make a selection that applies to your level of access. An incorrect submission may result in the request being rejected and delay your access to the interfaces within EQRS.

In this scenario, we are requesting a facility-level role. Next, we need to select the application or interface we need access to in EQRS, so we are going to select QIP and click on the Continue button.

The next steps in the process is to search for your organization by entering your facility CCN, NPI, or facility name and select the desired role. The role selections are specific to the organization category that was selected a couple steps ago.

After indicating the role, you can click the Add button to be presented with the ability to submit the request to a facility Security Official for approval.

As noted earlier, roles and the ability to complete tasks within the ESRD QIP User Interface vary based on a user's level of access. Let's start with a Facility Point of Contact. A facility must have at least one POC and a POC can serve as a POC for multiple facilities.

Facility POCs can view scores, view and submit inquiries, and view and download QIP reports within their purview. Also, a facility may have multiple Facility Viewers. These individuals can view scores and inquiries and download PSRs and PSCs.

Let's look at the corporate-level role. These users can view and access materials for all facilities owned by an organization. An organization may have multiple Corporate POCs. These individuals can view scores, view and submit organization and facility specific inquiries, and view and download all reports.

If QIP Scores is not displayed as a menu option in the blue navigation menu at the top of the screen, users will need to click the orange Change Organization button in the upper right-hand side of the screen and select QIP from the Change Organization drop down field.

To access the QIP User Interface, simply click the QIP Scores link in the navigation menu.

Once in the QIP environment, the system defaults to the Scores and Feedback screen, but you can toggle to the other screens as needed.

Now that the QIP User Interface has been reviewed, I will discuss the Scores and Feedback screens within the QIP User Interface.

Before we jump into the QIP Scores and Feedback screens, I would like to provide a brief recap of the Calendar Year 2022 ESRD Prospective Payment System, or PPS, Final Rule as it pertains to the Payment Year 2022 QIP scoring. It is important to know that this final rule contains a special rule policy that affects Payment Year 2022 QIP scoring. The special rule policy went into effect in response to EQRS operational issues and the COVID-19 Public Health Emergency. This special rule protects facilities from being penalized due to extraordinary circumstances beyond facility control. Under the special rule policy, facilities will not receive any payment reductions, nor will Total Performance Scores be calculated or awarded for PY 2022.

Instead, Performance Score Cards and measure scores will display N/A or Not Applicable. Additionally, there will be no achievement and improvement points or scores for any measures. However, there will be measure rates for all measures, which will be provided to facilities via the Performance Score Reports that are available through the QIP User Interface.

Now that we have reviewed the special rule policy, let's go over the Scores and Feedback screen. The Scores and Feedback screen provides users with quick access to a synopsis of scores and summaries related to a facility or facilities within the user's purview. A user can select or search for their facility to find details about their Total Performance Score and a summary of the QIP measures contributing to the facility. The Performance Score Report, or PSR, provides a drill down of the measures contributing to a facilities performance; the PSR is available via the View/Download Reports screen. As a reminder, for Payment Year 2022, Total Performance Scores and Measures Scores will display N/A or Not Applicable.

Users with purview over multiple facilities can view scores and feedback data on this screen for one facility at a time. Users can select their facilities from a list or by completing a search. All users with an ESRD QIP role can access the Scores and Feedback screen.

Let's now take a look at the steps to access the Scores and Feedback screen. Log into EQRS with your HARP account. Next, click QIP Scores in the blue navigation menu. After clicking QIP Scores, you are automatically taken to the Scores and Feedback screen.

If you are a facility-level user with access to a small number of facilities in the ESRD QIP UI, those facilities will automatically populate on the Scores and Feedback screen. However, users with access to several facilities, as well as corporate-level users, can use the Filter Facilities option to search for facilities. If using this option, enter facility details and/or select a Network or State and click Apply Filter.

This screenshot helps reinforce some of what was covered a moment ago. The Scores and Feedback screen displays a list of facilities in a facility level users' purview. The search option automatically displays if that user has access to 10 or more facilities. The Scores and Feedback screen displays details for one facility at a time, but users can view details regarding each of their facilities by clicking the radio button next to the individual facility.

After selecting your facility, scroll down to the Runs section to review the details to ensure that you have selected the right facility.

Next, scroll down to the Score Details section for an overview of the Total Performance Score, reduction percentage, as well as additional facility details. Remember though that payment year, TPSs, and payment reductions will not be calculated and will instead display N/A or Not Applicable.

Scrolling down to the Measure Summary section, here you will find a summary of the measures. Payment Year 2022 has 14 measures that contribute to a facility's performance. Again, you will see N/A displayed under the Payment Year 2022 measure.

Moving on to the Corporate POCs, Corporate POCs view the same synopsis-like overview of the score details as the facility POC. The only difference is that the filter facility section is automatically expanded and requires an entry in order to display facilities for the user.

To summarize the details covered in this section, the Scores and Feedback screen in the ESRD QIP UI provides a synopsis of the facility's Total Performance Score and the measures that contribute to the facility's performance. To access the Scores and Feedback screen, you first need to log into EQRS, click QIP Scores from the blue navigation menu at the top of the screen, and then select your facility. Remember, all users with an ESRD QIP role can access this screen.

Let's now review the View/Download Reports screen in the QIP environment.

The View and Download screen provides users with the ability to view and download the Patient List Report, or PLR, the Patient Score Report, or PSR, the Performance Summary Score Report, or PSSR, and the Performance Score Certificate, or PSC. Please note that the PSC does not become available until after the preview period closes. All users with an ESRD QIP role can access the View/Download Reports screen, but these reports are viewable based on roles and availability. Users can contact the QualityNet Service Center to obtain reports that are not listed in the ESRD QIP UI.

The Performance Score Report, or PSR, includes details such as facility information, achievement and improvement scores, Total Performance Scores, and more.

The Patient List Report lists all the patients whose data are used to calculate a facility's ESRD QIP measure rates.

As mentioned throughout this presentation, no achievement and improvement scores will be generated. Total Performance Scores and measure scores will not be calculated. N/A or Not Applicable will display in place of these scores. Additionally, no facility will receive a payment reduction for Payment Year 2022.

The Performance Score Summary Report includes data such as a facility's achievement and improvement scores for each clinical measure, earned performance scores, Total Performance Scores, and more.

The Performance Score Certificate indicates the facilities Total Performance Score. Facilities are required to post the PSC on display in a prominent location with 15 business days of the PSC's release. As a reminder, the PSC is not released until after the preview period.

Let's look at how to view and download reports as a Facility POC. First, log into EQRS. Click QIP Scores in the blue navigation menu and click View/Download Reports.

Remember, if you have access to multiple facilities in the ESRD QIP UI you may need to use the search option.

If so, enter the search criteria, indicate the Payment Year, which in this case is 2022. Select the name of the report you'd like to run and click Apply Filter. We'll cover the search fields for Corporate POCs in a moment.

Now, navigate to the Select Available Reports section. Here, you'll see a list of available reports for the Payment Year indicated. Select the hyperlink next to the desired report to download an individual report, as shown on this slide.

Downloaded reports will display at the bottom of your internet browser. You can click on the report to open or save the file. Remember to access EQRS using Google Chrome. The system works best with Chrome. If you are unable to download your report, contact the QualityNet Service Center regarding this technical issue.

After downloading your report, closely review it for accuracy and to understand the measures contributing to your facility's performance. Here, you will see a sample PSR. Notice the N/A footnote at the bottom of the report; this is in reference to the special rule policy that applies to PY 2022 QIP scoring that was discussed earlier in the presentation.

When looking at corporate-level users, similar steps are followed. The Select your Facility and Payment Year section is automatically expanded, requiring the user to search for facilities. Furthermore, corporate-level users can conduct a single facility level search or select "This is an organizational-level search." to display data for multiple facilities.

Here, you'll see two search options for Corporate POCs. The image to the left shows a single-facility search. Enter the facility name and payment year to do your search. The image to the right shows a Corporate POC performing an organizational-level search. The user checks This is an Organizational-level Search checkbox at the top and the system displays additional fields in the Select your Facility and Payment Year section. It now asks for the Network, State, Report type, and Payment Year.

To recap, the View/Download Reports screen can be accessed by all users with an ESRD QIP role, but reports are displayed based on roles and availability. To access reports, log in to EQRS, click the QIP Scores link in the blue navigation menu, and click the View/Download Reports link on the left-hand side of the screen. Next, select your facility and the desired report to initiate the download process.

Let's now discuss how to submit, save, and reply to inquiries in the ESRD QIP UI.

Let's go over some background information and tips regarding when to submit inquiries. The Preview Period inquiry screen in the ESRD QIP UI provides users with the ability to gain more information about their facility's QIP scores as well as provides a chance to attempt to change their QIP score if they believe it is incorrect. There's only one inquiry type and POCs can submit and reply to as many inquiries as necessary. Additionally, the ESRD QIP UI presents POCs with the ability to draft and save inquiries, but, please note, information entered in a saved inquiry is only viewable by the person who saved that information.

Inquiries are submitted by Facility and Corporate POCs, but other ESRD QIP UI users have the ability to view submitted inquiries to help provide additional support if needed. Here is a quick breakdown of a few roles. Facility POCs and Viewers can view submitted inquiries within their purview or scope. Corporate-level users can view inquiries submitted for all facilities within an organization. Network-level users can view inquiries for all facilities within their network service area. Please note, POCs can submit and reply to as many inquiries as necessary. One key point: Please remember that POCs must check on the status of a submitted inquiry in the ESRD QIP UI until the inquiry is closed.

Inquiries are submitted via an email-like form. I will show you a visual overview of this in a moment. It includes a From field, which is automatically populated from the email address associated with the user's account; a CC field to allow the user to inform another person of the inquiry; a Subject line; a Message section; and a File Attachment option.

However, the system will allow you to reply to an existing inquiry if you need to reply to a question from CMS. Please note, the ability to submit new inquiries will be disabled once the Preview Period ends. Please log in early and often during the Preview Period to submit and reply to inquiries.

It is important to submit inquiries as soon as possible once the preview period starts; this will allow adequate time for any necessary communication to take place. When submitting inquiries, include as much information as possible. Include the CCNs of the facilities that you believe to be impacted. This is important. Including the CCN helps CMS with pinpointing the facilities you are referencing in your inquiry. Additionally, include evidence of the issue that you are reporting. You can include attachments to further support your inquiry. Also, please direct questions regarding the National Healthcare Safety Network, better known as NHSN, to the NHSN Help Desk.

To start the process of submitting an inquiry, log into EQRS to access the QIP Scores screen. Click the Preview Period Inquiries link on the left-hand side of the screen.

While on the inquiry screen, you are presented with a countdown clock, similar to the one seen on this slide. This serves as a reminder to help ensure that you submit all new inquiries prior to the end of the Preview Period. The Filter Inquiries option displays, allowing users to fine-tune their search if attempting to locate an inquiry.

The inquiries page also shows a list of previously submitted inquiries. Looking at this example, you will see a system-generated Inquiry ID in the first column. It includes the facility name and CCN, the subject line, the date created, and the status of the inquiry. To start the process, click Create New Inquiry.

The ESRD QIP UI now displays an email-like form. Select the facility for which you are submitting the inquiry. Review the From field. Remember this field is pre-populated and cannot be changed.

The CC field is optional. The subject line is not mandatory, but it is recommended. The message field is, of course, required. When creating an inquiry, you can upload an attachment to support your inquiry.

After typing your message and uploading any needed attachments, click the Send Inquiry button at the bottom of the screen. The system will refresh and displays a message that reads "Your inquiry was sent successfully." Once submitted, it is important to monitor the status of your inquiry.

You also have the ability to save a draft. For a saved inquiry, follow the same steps to create an inquiry; however, instead of clicking the Send button, click Save as Draft until you are ready to submit your inquiry.

Once an inquiry has been submitted, you can reply to provide additional information and/or to reply to comments or questions from CMS. To initiate a reply, you will need to search for the previously submitted inquiry. After accessing the Preview Period Inquiry screen, enter the necessary search criteria. Click the Apply Filter button, or you can scroll down to the bottom of the previously submitted inquiry section, if the information for your inquiry has been generated.

Click the Inquiry ID on the left-hand column for a display of the inquiry message history. The system refreshes and shows when the inquiry was created and a history of the comments associated with the inquiry. It is recommended that the person who initiated the inquiry replies whenever possible to avoid any confusion related to the comments. Click Send Message when you are ready to submit your inquiry.

Once a reply is sent, the system refreshes and displays a message that it was successfully processed. Please remember that POCs must continue to monitor the status of a submitted inquiry until the inquiry is closed.

Now, let's focus on corporate-level users. As a reminder, the steps to access the preview inquiry screen are the same for all users.

This screenshot shows the subtle differences in the previously submitted inquiry section when comparing facility-level POCs and Corporate POCs. The information displayed in this section are the same, except that two of the columns have different headers as shown here on this slide.

Similar to the Facility POCs, Corporate POCs can start the inquiry process by clicking Create New Inquiry.

The ESRD QIP UI provides Corporate POCs with the ability to indicate if they are submitting a facility-level inquiry or an organizational-level inquiry. If you are submitting an inquiry for a facility, do not use the "This is an organizational-level inquiry." Checkbox. Instead, use the Facility Selection search option to find your facility. Follow the same steps as a Facility POC to indicate who the message is from, the subject, the message, and include any necessary attachments.

If a corporate POC believes that the inquiry is an organization-wide inquiry, they should select the "This is an organizational level inquiry." checkbox. Once the box is checked, then the Facility Selection option will disappear, and the inquiry can then be submitted for the organization versus a specific facility.

The steps to save and attach files are the same as what we covered in the Facility POC section. Additionally, the steps to search for and reply to inquiries are the same as Facility POCs. The only difference is that Corporate POCs can select facility-level inquiries and organizational-level inquiries, which uses the organization name instead of the facility name.

To summarize the Preview Period inquiry process, POCs may submit and reply to as many inquiries as necessary during the Preview Period. To submit an inquiry, log into EQRS, click QIP Scores in the blue navigation menu, navigate to the Preview Period Inquiry screen, and click Create New Inquiry. You must have a role of Facility POC or Corporate POC to submit inquiries. Lastly, remember that the ability to submit new inquiries will be disabled once the preview period ends.

Today's event materials including the recording and slides will be available within 10 business days under the Events page from www.MyCROWNWeb.org. Additionally, the following couple of slides provides additional resources.

Materials supporting the ESRD QIP Preview Period are available via the ESRD QIP page on the qualitynet.cms.gov website. A Guide to the Payment Year 2022 ESRD QIP Performance Score Report and Payment Year 2022 ESRD QIP Quick Start Guide will be available via the qualitynet.cms.gov website as well.

Should you have any questions after this event you can use the QualityNet Q&A Tool for general ESRD QIP questions and training-related questions. For EQRS system-related questions, please contact the QualityNet Service Center.

At this time, I'd like to turn it over to Aya from Arbor Research to discuss the PY 2022 ESRD QIP Preview Period. After Aya presents, I will provide additional links to resources. Aya, I will now turn it over to you.

Aya Inoue: Good afternoon, everyone. As Jane mentioned, my name is Aya Inoue and I am a Project Manager for Arbor Research Collaborative for Health. Today, I will be reviewing the ESRD QIP Payment Year 2022 Preview Period information.

This portion of the presentation is to equip you with the information and tools that you need to be successful during the preview period. On this call I will provide you with a summary of the performance categories that are used in the ESRD QIP, and I will also discuss the details of Performance Score Reports, or PSRs. The Patient List Reports, or PLRs, will be discussed as well as a summary of preview period activities.

The Payment Year 2022 Preview Period is scheduled to begin on November 18, 2021, and end December 20, 2021, at 11:59 p.m. PT. Preview Performance Score Reports will be made available by November 18, 2021, via the EQRS website.

We recommend that you confirm your access to EQRS as soon as possible to avoid any delays accessing your Preview Period report. We also recommend that facilities submit any preview inquiries by December 11, 2021, or one week prior to the close of the preview period to receive a response in a timely manner. Please know that some responses may be delivered after the close of the preview period.

Here, you'll see an overview of the ESRD QIP measures and domains that were used to assess facility performance for Payment Year 2022. Items marked with a star represent the suppressed measures for PY 2022. We encourage you to visit the [CMS ESRD Measures Manual](#) to learn more about these measures. This chart also contains the new domains and measure rates for each domain.

For Payment Year 2022, there are four domains including Clinical Care, Care Coordination, Safety, and Patient & Family Engagement. As Jane mentioned throughout the presentation, no facility will be awarded a TPS nor will any facility receive a PY 2022 payment reduction.

This slide demonstrates directionality of the Payment Year 2022 clinical measures and their effects on the performance standards in relationship to rates. For the Kt/V Dialysis Adequacy measure, the Standardized Fistula Rate measure, the ICH CAHPS measure, and the Percentage of Prevalent Patients Waitlisted (PPPW) measure, a higher percentage rate indicates better care. In the bottom diagram, for the Long-Term Catheter Rate measure, NHSN Bloodstream Infection measure, Hypercalcemia measure, the Standardized Readmission Ratio, Standardized Transfusion Ratio, and Standardized Hospitalization ratios measures, a lower percentage rate indicates better care.

This diagram shows the sequence in the process of scoring facility performance. First, we collect data from several data sources such as Medicare reimbursement claims, NHSN, EQRS, and the ICH CAHPS. Typically, the estimated performance scores are released along and with the payment reduction status in the Preview PSR. Next, the preview period is conducted, typically lasting for approximately 30 days.

After the preview period has ended, scores are adjusted if needed and payment reductions are submitted to the Medicare Administrative Contractor, or MAC. Final results are released via Final PSR and facility Performance Score Certificates, which are both available for download in EQRS within the ESRD QIP UI. As mentioned earlier, no facility will receive a PY 2022 payment reduction.

As Jane discussed earlier, CMS has applied a special rule for QIP scoring for Payment Year 2022. Again, here is recap of the special rule, which includes no PY 2022 payment reductions for ESRD facilities; all PY 2022 PSCs will display N/A or Not Applicable in place of a TPS; no TPS will be calculated or awarded; no scoring of any measures within all four ESRD QIP domains; and no achievement and improvement points will be calculated. Lastly, all measure rates will be calculated for all measures.

Once CMS completes the measure rates calculations for the measures, CMS will share them with facilities via the Preview Period reports. In this section, I will provide an overview of the Performance Score Report, Patient List Report, as well as Performance Summary Score Report.

First, let's talk about the Preview PSR. The PSR contains your individual measure scores. These are results and scores that are based on data submitted for each eligible Payment Year 2022 measure. The PSR provides an explanation of how your measure scores were weighted and how they translate into your Total Performance Score. As mentioned earlier, N/A will be displayed in place of the facility's measure scores and Total Performance Score. Also noteworthy, there are four measure suppressions that apply to PY 2022, as seen listed on this slide. Additional information about the PSR is contained in the Guide to the Payment Year 2022 Performance Score Report, which will be available via the qualitynet.cms.gov [website].

After downloading your report, closely review it for accuracy. Here, on this slide is a sample PSR. Review your reports for accuracy and to get a good understanding of the measures contributing to your facility's performance.

The last page of the Preview PSR provides a summary of the domains and their measures.

In addition to the Preview PSR, authorized users are able to access available Patient List Reports, which is a list of patients who are included in each of the measure calculations and Performance Score Summary Report. As mentioned already, reports and the ability to perform certain tasks within the ESRD QIP User Interface are based on a user's role, which was covered earlier in the presentation, when Jane provided the ESRD QIP User Interface training portion of today's webinar.

Now, let's talk about the Patient List Report, or the PLR. The PLR contains a list of patients who were included in each of the measure calculations. We'll take a look at a sample PLR in a moment, but the purpose of the PLR is to help provide you with a better understanding of which data were used in the measure calculation, and to help provide a means for you to confirm that the data used in the measure calculations are correct. If the data in the report appear incorrect, submit an inquiry with specific patient information for clarification. If it is confirmed that the data are incorrect and it is not due to an error by the facility, submit a request to make a change.

Let's take a look at the sample PLR. Just a reminder that this is mock data. Unlike the PSR, this is a spreadsheet. It separates the data into tabs that can be accessed by clicking on the tabs at the bottom. The first tab provides you with an overview of the report parameters, providing you with an opportunity to ensure that you have the correct report by reviewing the facility payment year and measurement period displayed.

As you navigate through each tab, you will see that the reports include details such as the patient MBI, EQRS ID, Patient ID, first and last name, as well as MBI history and measurement period. You will be able to use the information in this report to identify which patients were included in the calculation for each measure. If you have questions upon review and need to refer to a specific patient within your inquiry, please include the Patient ID or row number from the spreadsheet.

At a high level, the PSSR contains the performance values of each facility for the given Payment Year. It is a summarized view of the measure scores for all selected facilities and can be used to view results for multiple facilities. As a reminder for PY 2022, no facility will be awarded a TPS, and both TPS and measure scores will display N/A or Not Applicable.

In this next section, we will be covering all of the key follow-up activities and responsibilities that you will need to know about for this preview period.

Following the close of the preview period, CMS will review any outstanding inquiries. As a reminder, Total Performance Scores will not be issued for PY 2022, nor will any facility receive a payment reduction. Please note that the final Performance Score Reports and the Performance Score Certificate are scheduled to be available in February 2022. Facility performance scores will also be made publicly available on the Care Compare website. Again, there will be no calculated TPSs and no facility will receive a payment reduction Payment Year 2022.

Once the Performance Score Certificates are made available, facilities must download, print, and post both English and Spanish versions in a prominent location of the facility. The certificates must be posted within the first 15 business days of its availability and remain posted throughout the duration of 2022. Please note, for PY 2022, each certificate will display N/A or Not Applicable since no Total Performance Scores were issued for PY 2022. Although N/A will be displayed on the PSC, CMS encourages facility staff to review the certificate and facility performance in order to answer any questions that patients may have. Again, although there is no PY 2022 TPS displayed on the facility certificate, the certificate still must be posted in a visible and prominent location of the dialysis facility.

Now, I will recap some of the key responsibilities and activities to ensure a smooth Preview Period. As a reminder, the Payment Year 2022 Preview Period begins today, November 18, 2021.

CMS encourages facility Point of Contacts to establish HARP accounts, if necessary, and update your EQRS role to access the ESRD QIP User Interface. As a reminder, all Preview Period inquiries must be submitted before the end of the Preview Period scheduled end date, which is December 20, 2021, at 11:59 p.m. PT or, if you are on the east coast, on December 21, 2021, at 2:59 a.m. ET. In early 2022, facilities must download, print, and post the Performance Score Certificates within 15 days of their availability. Lastly, we recommend that you educate your staff about the ESRD QIP so that they can answer patient questions about the publicly posted certificate. I will now turn it back over to Jane to share additional resources pertinent to this presentation. Jane, back to you.

Jane Chaine: Thank you, Aya. Here you see a list of resources that will link you directly to additional information related to ESRD QIP, HARP, Care Compare, and more, so you'll be able to access the links once you obtain a copy of these slides. As mentioned earlier, the materials from today's presentation will be made on the Events page from www.MyCROWNWeb.org within 10 business days.

At this time, we will take the few remaining minutes to assist with any Preview Period related questions we've received during today's event. Questions not answered during the webinar will be answered within 10 business days.

I am now going to open up the line to Mathew McDonough, one of our Subject-Matter Experts to assist with answering questions. So, let's go ahead and jump into the questions. Matt, I will now turn it over to you.

Thank you everyone. We truly appreciate you being on and sharing a part of your day with us. Thank you everyone for submitting questions and participating in today's event. This last slide has a list of resources that you can use pertaining to the topics presented today.

Also, please complete the post event survey that will appear on the screen momentarily.

Thank you all for attending. That concludes today's Town Hall. As a reminder, a post-event evaluation will pop up. We do ask that you please take a minute or two to complete it. We do review those. It helps us with identifying topics for future calls, as well. So, thank you everyone for joining us. Enjoy the rest of your day and we hope to see you on a future call. Thank you.