



End Stage Renal Disease Quality Reporting System

Quarterly Newsletter

In This Issue:

P1 CY 2023 ESRD PPS Proposed Rule

P1 Register for the EQRS Town Hall

P1 EQRS Data Management Guidelines

P2 New Features in EQRS

P3 New Features in EQRS (Cont'd)

P4 From the Chat Box

P5 How to Route Questions

P6 EQRS Data Submission Deadlines

Web Resources:

MyCROWNWeb Website

Data Management Guidelines

Education

Conditions for Coverage

ESRD Help

CY 2023 ESRD PPS Proposed Rule

On June 28, 2022, the Calendar Year (CY) 2023 End-Stage Renal Disease (ESRD) Prospective Payment System (PPS) Proposed Rule was published on the [Federal Register](#) website. Each year, the Center for Medicare & Medicaid Services (CMS) issues a proposed rule to update Medicare payment policies and rates under the PPS. Additionally, the proposed rule contains proposed updates for the ESRD Quality Incentive Program (ESRD QIP) requirements and includes requests for information on topics relevant to the ESRD QIP. This year the proposed rule requested information on quality indicators for home dialysis patients, principles for measuring healthcare quality disparities and potential future inclusion of two social drivers of health measures, as well as proposed refinements to the [ESRD Treatment Choices Model](#). For more information, click on the following links:

- [CY 2023 ESRD PPS Proposed Rule](#)
- [CY 2023 ESRD PPS Proposed Rule Fact Sheet](#)

Register for the EQRS Town Hall

Join the ESRD Outreach, Communication and Training (EOCT) Team for a [Town Hall event](#) for information on various EQRS reporting activities.

Date: Thursday, September 8, 2022

Time: 2:00 p.m. – 3:00 p.m. Eastern Time (ET)

The following topics will be discussed:

• EQRS Data Submission Deadlines and announcements
• EOCT Announcements
• New EQRS features: <ul style="list-style-type: none"> – Vaccination Module – Admission in Support of Transplant feature – Parathyroid Hormone (PTH) reporting fields
• EQRS FAQs

EQRS Data Management Guidelines

The EQRS Data Management Guidelines outline and detail the standardized data management processes created, reviewed, and approved by CMS. EQRS users can use these guidelines when conducting and overseeing data entry activities and reporting efforts. The EQRS Data Management Guidelines document is updated annually to align with system releases, program policy, and CMS data quality goals. In August 2022, the guidelines were updated and reposted on the [Home](#) page on www.MyCROWNWeb.org and is available here: https://mycrownweb.org/?smd_process_download=1&download_id=6011.

New Features in EQRS

Vaccination Module:

On August 8, 2022, CMS added a new Vaccination Module on the *Manage Patient* screen in EQRS. Dialysis facilities are required to enter any new patient vaccination data for Hepatitis B, Influenza, and Pneumococcal vaccinations on the *Manage Patient* screen under the new *Vaccinations* tab (displayed in Figure 1 below) in EQRS. Facilities can enter vaccination data at any time after a patient is admitted to the facility and can view and edit vaccination data entered by facilities where the patient was previously admitted. Additionally, the most recent vaccination records will be migrated from the *Manage Clinical* screen to the new vaccination screens up until October 1, 2022. Starting on *October 1, 2022, the vaccination fields will no longer appear on the *Manage Clinical* screen in EQRS.

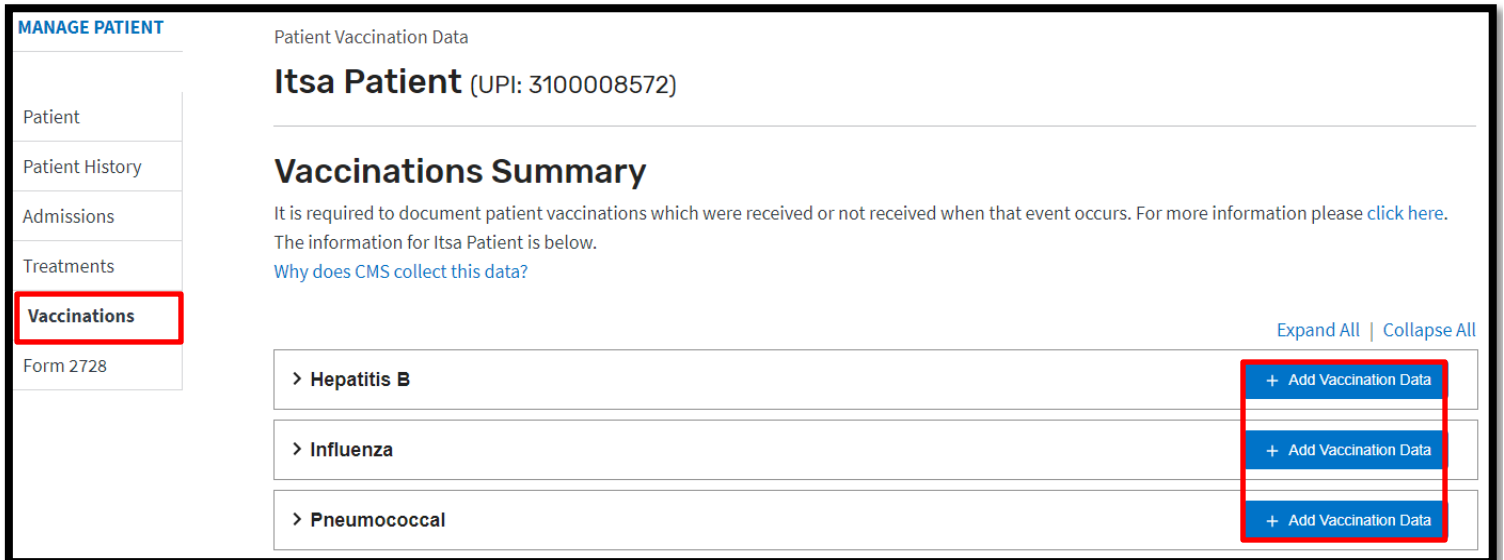
This new EQRS reporting process for vaccinations is an event-based reporting process. A vaccination event occurs anytime that a patient:

- Receives a vaccine dose administered by the reporting facility
- Receives a vaccine dose by an outside provider with documentation
- Receives a vaccine dose which is self-reported with or without documentation
- Does not receive a vaccine dose offered by the reporting facility

Please note: If your facility batch submits data or uses Health Information Exchange (HIE)/Electronic Data Interchange (EDI) data submission methods, please follow the guidance provided by your organization.

*Date is subject to change.

Figure 1: Vaccination Reporting Module



For more information about the new EQRS reporting process for vaccinations, please refer to the [EQRS Vaccination Data Submission Requirements and Frequently Asked Questions](#) resource that is available on the [Education](#) page on www.MyCROWNWeb.org. Additionally, the Vaccination Module will be presented during the September 8, 2022, EQRS Town Hall event. Register for the September 8, 2022, EQRS Town Hall event [here](#).

New Features in EQRS Continued

Admission in Support of Transplant:

On July 14, 2022, CMS added the Admission in Support of Transplant feature on the *Manage Patient* screen under the *Admission* tab in the *Admission Information* section in EQRS. This feature includes two new discharge reasons and an updated description of an existing discharge reason. The two new discharge reasons are **Delayed Function Resolved following a Transplant** and **Delayed Function Unresolved following a Transplant**. Additionally, the updated description of the existing discharge reason has been changed from Recovered Function to **Recovered Function of Original Kidney**.

Figure 2: Admission in Support of Transplant Feature: New Discharge Reasons

The screenshot shows two dropdown menus. The 'Admit Reason' dropdown is set to 'Dialysis in Support of Transp'. The 'Discharge Reason' dropdown is open, showing a list of options: Acute, Death, Delayed Function Resolved following a Transplant, Delayed Function Unresolved following a Transplant, Discontinue, Involuntary, Lost to Follow Up, Other, Recovered Function of Original Kidney, Transfer, Transplant in US, and Transplant outside US. The last two options are highlighted with a red border.

The Dialysis in Support of Transplant feature allows EQRS to retain two open admissions on a single patient and is intended for patients that require **temporary** dialysis after receiving a kidney transplant. Facilities may initiate a second admission in EQRS (while the patient is currently admitted to a transplant facility) if the *Admit Reason* is **Dialysis in Support of Transplant**. The *Discharge Reason* of **Delayed Function Resolved following a Transplant** or **Delayed Function Unresolved following a Transplant** should be used when the *Admit Reason* is **Dialysis in Support of Transplant** (displayed in Figure 2 above) and the patient has either gained function of their transplanted kidney and no longer needs dialysis or the patient's transplanted kidney has failed.

Please note: If your facility batch submits data or uses HIE/EDI data submission methods, please follow the guidance provided by your organization.

Parathyroid Hormone Reporting Fields:

On July 28, 2022, CMS added new parathyroid hormone (PTH) reporting fields to the *Manage Clinical* screen, under the *Mineral Metabolism* section in EQRS. The new PTH reporting fields include *Parathyroid Hormone Value* and date (Month, Day, Year), *Parathyroid Hormone Method*, and *Parathyroid Hormone Upper Limit Assay Range* (displayed in Figure 3 below). Dialysis facilities can report PTH values monthly and must select N/A if a PTH value was not measured for the patient for the clinical month. The *Parathyroid Hormone Method*, *Parathyroid Upper Limit Assay Range* and date fields are required fields when a PTH value is entered. Reporting of PTH data allows CMS to assess bone mineral management and adverse outcomes associated with the management of PTH among the ESRD patient population.

Please note: If your facility batch submits data or uses HIE/EDI data submission methods, please follow the guidance provided by your organization.

Figure 3: PTH Reporting Fields (located on the *Manage Clinical* screen, under *Mineral Metabolism*)

The screenshot shows three input fields for PTH reporting. The first is 'Parathyroid Hormone (PTH) Value (pg/mL)' with a text input box and an 'N/A' checkbox. The second is 'Parathyroid Hormone Method' with a dropdown menu. The third is 'Parathyroid Hormone (PTH) Upper Limit Assay Range (pg/mL)' with a text input box and an 'N/A' checkbox. Above these fields are three date input boxes labeled 'Month', 'Day', and 'Year' with placeholders 'MM', 'DD', and 'YYYY' respectively.

From the Chat Box

Question: CMS requires that all ESRD patients are admitted in **EQRS within 5 business days** of the patient starting dialysis at the facility. How can I confirm that all current patients at my facility are admitted to my facility in EQRS?

Answer: There are reports available within EQRS that can help determine if any patients are missing from the facility census in EQRS. These include the *Patient Events Report* and *Patient Roster Report*. The *Patient Events Report* and *Patient Roster Report* should be generated monthly to identify any discrepancies between the facility's internal census and the census in EQRS. In addition to using these reports to confirm patient admission and census information, facilities can also use these reports to confirm that patient discharge and treatment information is correctly listed in EQRS. Monitoring this information helps to ensure that permanent patients are correctly documented in EQRS and that the CMS-2744 Annual Facility Survey data are accurate. It also allows for the timely submission of various CMS forms, as well as EQRS Clinical Data.

Please note: Facilities that batch submit data into EQRS need to consult their organization on how to resolve missing admissions and/or data in EQRS, prior to manually correcting the data in EQRS.

The *Patient Events Report* contains patient admission and discharge information for a specific date range and can be used to ensure all patient admissions and discharges are accounted for in EQRS. The *Patient Roster Report* contains patient census, patient treatment and admission information for a specific date and can be used to ensure patient admission and treatment information is correct in EQRS. To generate a *Patient Events Report* and/or a *Patient Roster Report*, login to EQRS, click on the **Reports** tab, and then select the desired report (see Figure 4 below).

From the Chat Box!

Figure 4: EQRS Reports (*Patient Events Report* and *Patient Roster Report*)



Facilities can contact their ESRD Network for further guidance and/or assistance with resolving patient admission issues. Use this link to find your ESRD Network's contact information: <https://esrdncc.org/en/ESRD-network-map/>.

For additional information on EQRS activities and CMS timelines for these activities, refer to the EQRS Data Management Guidelines: https://mycrownweb.org/?smd_process_download=1&download_id=6011

How to Route Questions

Please do NOT include patients' Protected Health Information (PHI) and Personally Identifiable Information (PII) (such as patient name, date of birth, social security number, Medicare Beneficiary Identifier, and Health Insurance Claim Number) when submitting a ticket and/or inquiry to the QualityNet Q&A Tool, CCSQ Service Center or ESRD Network. Any disclosure of PHI or PII should only be in accordance with, and to the extent permitted by, the Health Information Portability and Accountability Act (HIPAA), the HIPAA Privacy and Security Rules, and other applicable laws.

Please note: The EQRS identification number is the ONLY acceptable patient identifier when contacting the QualityNet Q&A Tool, CCSQ Service Center or ESRD Network.

The table below contains contact information organized by question type:

<i>Question or Issue Type</i>	<i>*Contact Information</i>
<p>EQRS & ESRD QIP Questions:</p> <ul style="list-style-type: none"> • General ESRD QIP questions • General EQRS data entry questions • CMS reporting requirement questions 	<p>QualityNet Question & Answer (Q&A) Tool: https://cmsqualitysupport.servicenowservices.com/qnet_qa</p> <p>Note: To access EQRS training and/or educational materials, visit the <i>Education</i> page on MyCROWNWeb.org.</p>
<p>EQRS System-related Questions or Issues:</p> <ul style="list-style-type: none"> • Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP)/EQRS account lockout • EQRS reporting errors and/or system issues (i.e., making modifications on submitted CMS-2728 (version 2014 or older), multiple Patient IDs, batching errors, etc.) • Other technical issues with EQRS not working properly 	<p>The Center for Clinical Standards and Quality (CCSQ) Service Center: The CCSQ Service Center can be reached Monday through Friday 8 a.m.-8 p.m. ET via:</p> <p>Phone: (866) 288-8912 Email: qnetsupport-esrd@cms.hhs.gov CCSQ Support Central (to create and track a ticket): https://cmsqualitysupport.servicenowservices.com/ccsq_support_central</p>
<p>ESRD Network Assistance with:</p> <ul style="list-style-type: none"> • Editing the <i>View Patient Demographics</i> screen in EQRS to complete a missing or saved CMS-2728 Form when the facility no longer has access to edit this screen • Adding a date of death and/or primary death code to the <i>View Patient Demographics</i> screen in EQRS for patients who have been discharged from your facility for over 90 days • Resolving possible duplicate or near match patients in EQRS • Making modifications on submitted CMS-2728 (version 2018 or newer) or CMS-2746 Forms • Quality Improvement Activities (QIAs) • Patient grievances and/or facility concerns 	<p>ESRD Network Directory:</p> <p>Contact your ESRD network directly. Use the link below if you need assistance finding your ESRD Network's contact information.</p> <p>https://esrdncc.org/en/ESRD-network-map/</p>

EQRS Data Submission Deadlines

Dialysis facilities must meet the EQRS data deadlines listed below to meet CMS reporting requirements. **Failure to complete the submission of data by the deadlines listed in this announcement puts your facility at risk for an ESRD QIP payment reduction.** The data submission deadline applies to all collection types (Hemodialysis and Peritoneal Dialysis) and to all submission methods. CMS strongly recommends that facilities complete large data submissions and audit batch submitted data prior to data submission deadlines.

2022 EQRS Data Submission Schedule for: EQRS Clinical Data	
Reporting Month	Data Submission Deadline
July 2022	September 30, 2022, at 11:59 p.m. PT
August 2022	October 31, 2022, at 11:59 p.m. PT
September 2022	November 30, 2022, at 11:59 p.m. PT
October 2022	January 2, 2023, at 11:59 p.m. PT
November 2022	January 31, 2023, at 11:59 p.m. PT
December 2022	February 28, 2023, at 11:59 p.m. PT

2022 EQRS Data Submission Schedule for: Clinical Depression Screening and Follow Up & ICH CAHPS Facility Attestation	
Assessment Period/Attestation Period	Data Submission Deadline
January 2022-December 2022 (All months in 2022)	February 28, 2023, at 11:59 PM PT