



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

March 2024 Town Hall Presentation Transcript

Speakers

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March 14, 2024
2:00 p.m. Eastern Time (ET)

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Jane Chaine: Hello. 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 Team, or EOCT. I will serve as your host for today's presentation.

Today's presentation is streaming audio through your computer on the GoTo 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 the Questions section on your screen, and you will be provided with a dial-in and access code number. However, we have a limited number of phone lines available.

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For today's presentation, the audio connections are muted to reduce background sounds. However, real-time interaction is encouraged. So, if you do have a question, use the Questions feature on your screen. When submitting a question, please type your question in the Ask the Staff a Question section, and click Send. On occasion, there are 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](#) by using the link provided on this slide, and your question will be answered within 10 business days.

Another feature available during today's webinar is the Handouts feature that you see displayed on your screen. Here, you can download webinar frequently asked questions and event materials. The event FAQs document includes today's dial-in number, should you need audio through a telephone line, a link for closed captioning, and information on where you can obtain materials from today's presentation.

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Please note, today's event materials, including the recording and slides, are available on the Events page on www.MyCROWNWeb.org.

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

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

Here is today's agenda. The first agenda topic is the ESRD data reporting deadlines for EQRS and NHSN data. Followed by that, there will be a couple of EOCT announcements, including a new ESRD QIP resource that is now available, and I will also provide an update on the finalized Version 2023 Form 2728, which will include resource links to additional information on the updates to the Form 2728. Next on the agenda are the EQRS updates. This will cover the new Medication Reconciliation, or MedRec, field in EQRS and training on how to enter MedRec data in EQRS. We will also discuss the Influenza Vaccination Dashboard reports. This is a new dashboard in EQRS as of January of this year. Then we will review the 2744 or Annual ESRD Facility Survey and how to access the 2744 reports in EQRS. After that, we will take a few minutes to review frequently asked questions pertaining to today's presentation topics. Lastly, I will provide additional resources and contacts to assist you and your facility with navigating EQRS and the ESRD QIP. As time permits, today's event will end with a question-and-answer session. So, please be sure to stay on to participate in the Q&A session. We have a lot to cover. So, let's get started.

We will start our discussion today with the calendar year 2024 ESRD data submission deadlines for EQRS and NHSN, or the National Healthcare Safety Network.

First, let's review the EQRS data submission deadlines.

This table lists the EQRS clinical data Submission deadlines for the first half of the 2024 calendar year.

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As you can see here, the January 2024 EQRS clinical data submission deadline is quickly approaching and will be Monday, April 1, at 11:59 p.m. Pacific Time. As a reminder, EQRS opens for data submission on the first of the month and closes approximately two months after the end of the reporting month. I say approximately two months after the end of the reporting month because there are times that the last day of the month falls on a Saturday, a Sunday, or a federal holiday. In those cases, the clinical month closes at 11:59 p.m. Pacific Time on the next federal business day. EQRS clinical data are due monthly for all collection types, including hemodialysis and peritoneal dialysis and includes reporting for laboratory values, some medication information, and more.

Listed here are the EQRS clinical data submission deadlines for the remainder of the 2024 calendar year. Looking at the last month in 2024, you can see here the deadline for December 2024 data is not until February 28, 2025, at 11:59 p.m. Pacific Time.

Now, let's review the deadline for the EQRS Clinical Depression Screening and Follow Up reporting for calendar year 2024. The 2024 assessment period opened in EQRS on January 1 of this year and will remain open through the duration of the entire year and through the end of February 2025, or the close of the EQRS December reporting deadline, which is approximately two months after December. In other words, facilities could begin submitting Clinical Depression and Follow Up data for the 2024 assessment period as early as January 2024 and have until February 28 of 2025 at 11:59 p.m. Pacific Time to complete this reporting. Facilities are responsible for screening all eligible patients at least once during the calendar year and must report this information by the end of February of the following year. For additional information on the Clinical Depression Screening and Follow Up measure, please refer the ESRD Technical Measure Specifications available on the CMS.gov website and linked here on this slide.

Next, let's look at the In-center Hemodialysis Consumer Assessment of Healthcare Providers and Systems, or ICH CHAPS, facility attestation submission deadline.

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The ICH CAHPS attestation period occurs once during a calendar year and is typically open for submission during the first two months of the following year. For example, the calendar year 2024 attestations will open for submission on January 1, 2025, and will remain open until the last day in February of 2025. This gives facilities approximately two months to submit an attestation in EQRS. Please note, that most facilities do not need to complete an attestation because they are not exempt and are required to administer the ICH CAHPS Survey. To be exempt from the ICH CAHPS Survey, facilities must have fewer than 30 eligible patients during the eligibility period or in 2023 for the 2024 reporting period. For additional information on the ICH CAHPS Survey measure, including facility and patient exclusions, please refer the ESRD QIP Technical Measure Specifications available on the CMS.gov website linked here on this slide.

Beginning this year, or the calendar year 2024 reporting period, facilities are required to now submit the Commitment to Health Equity facility attestation in EQRS for the new Facility Commitment to Health Equity reporting measure. In the following slide, I will provide a recap of how these data are reported in EQRS and where you can find additional information on this new measure. Now, let's review the Commitment to Health Equity attestation deadline. Starting on January 1 of 2024, facilities could begin to submit, view, and edit their 2024 Commitment to Health Equity facility attestation data and have until February 28 of 2025, at 11:59 p.m. Pacific Time to submit these data in EQRS. The Commitment to Health Equity attestation submission period will open in EQRS each year on January 1 and will remain open for the entire calendar year and through the end of February, or the close of the EQRS December reporting deadline, which is approximately two months after December. Notice that the data submission schedule is the same as the Clinical Depression Screening and Follow Up reporting. For additional information on the Facility Commitment to Health Equity measure, including facility and patient exclusions, please refer the ESRD QIP Technical Measure Specifications available on the CMS.gov website and linked on this slide.

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Let's briefly discuss how to report data for the new Facility Commitment to Health Equity measure. Beginning in the 2024 reporting period for payment year 2026, facilities are required to submit Commitment to Health Equity attestations. As of January 1 of this year, EQRS users can access the Facility Attestations screen in EQRS to begin reporting data for the Commitment to Health Equity attestation. In fact, EQRS users can submit two types of attestations on the Facility Attestations screen. This includes Commitment to Health Equity attestation and the ICH CAHPS attestation. EQRS users can log into EQRS and access the Facility Attestations screen by clicking Attestation from the Facilities drop-down tab in EQRS. For step-by-step training on how to navigate to the Facility Attestations screen and how to submit Commitment to Health Equity attestations in EQRS, please refer to the December EOCT Town Hall slides and recording which are available on the Events page on www.MyCROWNWeb.org. Links to these resources are also provided on this slide.

Here are additional resources to reference for information on EQRS reporting requirements. These resources and more are available on the Home page on www.MyCROWNWeb.org.

Now, let's briefly review the National Healthcare Safety Network, or NHSN, data submission deadlines.

Here, you see the NHSN data submission deadlines for 2024 ESRD data. This includes ESRD QIP data for Dialysis Events, Bloodstream Infections in Hemodialysis Patients, and COVID-19 Vaccination Among Healthcare Personnel. Dialysis facilities have approximately three months to enter their quarterly data. For instance, looking at this table, notice that Quarter 1 2024 data are due July 1, 2024, at 11:59 p.m. Pacific Time. The Quarter 1 deadline includes data for January, February, and March of 2024. Please note that if a deadline falls on a Saturday, Sunday, or federal holiday, it will be moved to the next federal business day; this applies to both NHSN and EQRS data deadlines.

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Linked on this slide is information to the NHSN deadlines for the calendar year 2024 reporting period. This information is available on the Home page on www.MyCROWNWeb.org. For questions about NHSN, please contact the NHSN help desk by sending an email to NHSN@cdc.gov or by using the new NHSN Customer Service Portal, which is linked here on this slide.

Let's transition and discuss a couple important announcements.

On January 31 of this year, CMS published a new ESRD QIP resource. This resource is the ESRD QIP Successful Reporting Guide Version 1.0.

On January 31, 2024, CMS published the [ESRD QIP Successful Reporting Guide](#) on the [Education](#) page on www.MyCROWNWeb.org. The ESRD QIP Successful Reporting Guide is a new resource to assist individuals with ESRD QIP data reporting activities, and it provides information on submitting ESRD QIP data, meeting ESRD QIP data deadlines for the current reporting year, accessing ESRD QIP reports, and participating in QIP milestones. Lastly, the guide provides a comprehensive list of ESRD QIP resources and contact information. The ESRD QIP Successful Reporting Guide will be updated and posted annually. A nice feature about the guide is that much of the information reflects the most current reporting period. For instance, the current guide highlights the ESRD QIP measures for the calendar year 2024 reporting period for payment year 2026. Additionally, the guide provides multiple tables reflecting ESRD QIP measure information that may be helpful for the visual learners.

Here is the first page of ESRD QIP Successful Reporting Guide. Click the link on this slide to access the guide, which is available for download on the Education page on www.MyCROWNWeb.org.

We will now transition to our next announcement and a much-anticipated topic, the updated Form 2728. As I am sure many of you are aware, CMS updated and finalized a new version of the Form 2728, or the ESRD Medical Evidence Report Medicare Entitlement and/or Patient Registration.

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Although the updated Version 2023 form has been finalized, the updated version is not yet available in EQRS. There are many factors at play concerning when the updated form will be available in EQRS. CMS will provide information and notifications when the form will be automatically generated and available in the system. Therefore, please continue to use the current version of the form that is available in EQRS.

On November 30 of 2023, CMS approved an updated Version 2023 Form 2728. EQRS will automatically generate the Version 2023 form once the updates have been completed and tested in the system. EQRS users should continue to use the existing form until it is replaced with the updated 2023 version. CMS will inform the ESRD community when the updated version will automatically generate and be available in EQRS. Let's go over a few basic details about what you can expect when the form does become available in EQRS. Any Form 2728 that is generated after the Version 2023 form goes live in EQRS will automatically be generated to the updated version of the form. Older versions of the form that have been submitted in EQRS will remain in their original version. Additionally, any form that is saved or submitted in EQRS before the Version 2023 form is live will remain in the original form version. Please note, the Version 2023 Form 2728 does not need to be generated or submitted in EQRS if a previous version of the form was already started and is in a saved status in EQRS. Again, facilities should continue to use the existing form until it is replaced with the updated version of the form. As a reminder, the Form 2728 must be submitted for all new ESRD chronic dialysis patients to CMS via EQRS. Submitting this form ensures that patient Medicare benefits are activated and that the dialysis facility is reimbursed for services rendered.

CMS updated the Form 2728 for several important reasons. Let's review the reasons listed here. The updated Version 2023 form aligns and modernizes form language across multiple CMS programs and focuses on health equity. The updated form will improve accuracy and quality of ESRD data being reported to CMS.

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The updated form will collect additional information on dialysis treatment options education and patient understanding of treatment options. Collecting this information will better address the needs of the ESRD patient population. As mentioned a moment ago, the form updates focus on health equity. This is reflected by a series of questions pertaining to social determinants of health. In turn, this information will help better address patient needs and strive towards achieving health equity. The Version 2023 form will allow flexibility in reporting laboratory values. The existing form requires reporting laboratory values within 45 days prior to the most recent ESRD episode; however, if these laboratory values are not available within 30 days of the patient's admission, the new form allows the facility to use the patient's admission laboratory values. Another convenient feature about the updated form is that it allows users to select reasons why the patient is unable to sign the form. This in turn allows the form to be closed in EQRS.

Although the Version 2023 Form 2728 has been finalized by CMS, the form is not yet available in EQRS. Users should continue to use and generate the existing form in EQRS. CMS will notify the ESRD community when the updated form is available. Until then, please continue to generate, save, and submit the current version of the form until further notice. Linked here are additional resources to reference for information on the updated Version 2023 Form 2728. The updated Version 2023 Form 2728 is available online from the CMS.gov website linked here on this slide. The online form also consists of the updated form instructions as they apply to the Version 2023 Form 2728. Being familiar with the form instructions will help you complete the updated form once it becomes available. The instructions provide explanations on how to report each field item and definitions for terms used on the form. I encourage EQRS users and those involved with the completion of the Form 2728 to review the resources posted on www.MyCROWNWeb.org. From the Education page on the MyCROWNWeb.org website you can find these helpful resources listed and linked here. The On Demand training offers slides and a recording that goes through all the form updates by section.

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The reference guide provides a quick summary of the changes by field and specifies if the updated fields are required or optional. Lastly, there is a frequently asked questions document that provides supplemental information and guidance.

Let's transition and discuss what is new in EQRS. In this next section we will review two new updates in EQRS. The first is the new Medication Reconciliation, or MedRec, reporting field in EQRS, and the second is the new Facility Influenza Vaccination Dashboard.

In the following slides, I will review the new MedRec field in EQRS, followed by a brief training on how to enter these data in EQRS. Before we dive into the new MedRec reporting field, let's first discuss some background details about the MedRec reporting measure.

Let's review a few important details about the MedRec measure. CMS added the Medication Reconciliation, or MedRec, measure as a reporting measure to the ESRD QIP measure set starting in the calendar year 2020 reporting period for payment year 2022. The MedRec measure is currently one of the five measures assigned to the Reporting Measure domain for the calendar year 2024 reporting period. This measure is intended to encourage routine medication reconciliations or medication reviews for ESRD dialysis patients. The measure specifically examines the percentage of MedRecs performed and documented by an eligible professional. Because this is a reporting measure, facilities are scored on the completeness of three required data elements reported in EQRS. These include the clinician type and name of the clinician that performed the MedRec and the date, including month, day, and year that the medication reconciliation was performed. We'll review how to enter these data in EQRS shortly, but first let's review the new field.

On January 1 of this year, CMS added a new Medication Reconciliation, or MedRec, reporting field on the Manage Clinical screen in EQRS. The new field requires users to answer the question, "Was a medication reconciliation performed in this clinical month?" Users select Yes or No.

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Starting with the January 2024 clinical month, dialysis facilities are required to complete the new MedRec field under the Medication Reconciliation section of the Manage Clinical screen in EQRS for every clinical month. With the January 2024 clinical closure being on April 1, the first month for this new reporting requirement is right around the corner. If your facility batch submits data or uses a health information exchange or electronic data interchange for data submission, please consult your organization for guidance on how to report data for this new field. EQRS users can navigate to the new field by clicking on Manage Clinical from the Patient drop-down tab in EQRS, which I will demonstrate shortly.

Now that you are somewhat familiar with the new MedRec field, let's review how facilities can satisfy the ESRD QIP reporting requirements for this measure. The first step towards fulfilling the reporting requirement is to complete the new field we just discussed, which is the field for "Was medication reconciliation performed in this clinical month?" Users must complete this field by selecting Yes or No. If the user selects No, the remaining fields are grayed out and will not accept data. It is important to know that selecting No does not give the facility ESRD QIP credit for this measure. To receive credit, the user must select Yes and complete the remaining required fields in the MedRec section on the Manage Clinical screen. Remember this must be entered in EQRS on the Manage Clinical screen each month for every eligible patient. As mentioned previously, if your facility batch submit data, please consult your organization for reporting guidance, as these data may be automatically submitted electronically by your organization.

Displayed here are the Medication Reconciliation reporting fields within the Medication Reconciliation section of the Clinical screen in EQRS. The new reporting field is located at the top, as indicated by the red outline displayed here. As a reminder, all fields in Medication Reconciliation must be completed to receive ESRD QIP credit for the MedRec reporting measure.

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This next section goes into greater detail on how to enter MedRec data in EQRS. Let's review these steps.

Once logged into EQRS, the first step for entering MedRec data is to access the Manage Clinical screen. To do this, click on Patients in the blue navigation menu at the top of the screen.

Next, click Manage Clinical in the sub-menu that displays.

The system refreshes and allows the ability to search for the patient. To complete the search, select the Collection Type. In this example, Hemodialysis is selected as the Collection Type. Next, select the clinical month. In this example we are entering data for January 2024. Click on the Search Patients button to find your patient's name from the list.

Once you have selected your patient, scroll down to the Medication Reconciliation section. Complete the required fields in this section to successfully report the MedRec data for the specific reporting month.

To begin your data entry, complete the first field, "Was medication reconciliation performed in this clinical month?" Select Yes or No from drop-down box. In this example Yes is selected. Remember, if Yes is selected, the remaining fields in the section are enabled and are required to be completed. If No is selected, the remaining fields are grayed out and will not accept data. Facilities will not receive ESRD QIP credit for reporting No. Next, enter the Medication Reconciliation Clinician Type from the drop-down box. In this case a nurse performed the medication reconciliation. Next enter the month, day, and year the MedRec was performed. Here, in this example, you see the MedRec was done on January 25, 2024. The last field listed is the Medication Reconciliation Clinician Name. Type the name of the clinician who performed the MedRec into the text field. All fields in the Medication Reconciliation section must be completed, as indicated here, to receive ESRD QIP credit for this measure.

Here is a summary of the steps for entering Medication Reconciliation data in EQRS. Let's review these steps.

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Once logged into EQRS, click Manage Clinical from the Patients drop-down tab. EQRS refreshes, and the Manage Clinical screen appears. Enter the search criteria and select a specific patient, if needed. Next, scroll down the screen to the Medication Reconciliation section. Complete the fields as applicable. Review your data to be sure they are correct. Lastly, click Save or Submit at the bottom of the screen before exiting the screen. For additional information on the MedRec measure, including facility and patient exclusions, please refer to the calendar year 2024 ESRD QIP Technical Measures Specifications available on the CMS.gov website and linked here on this slide.

In the following section, we will review the Facility Influenza Vaccination Dashboard reports and how to access these reports in EQRS.

On September 5 of 2023, CMS released a Reports Dashboard feature in EQRS. Users can access the Reports screen by clicking on Reports Dashboards from the Reports drop-down tab in EQRS, which I will demonstrate here shortly. Currently, there are three dashboards that generate various reports. These include the Facility Clinical Reports, the Pneumococcal Pneumonia Vaccinations Reports, and the topic of today's discussion, the Influenza Vaccination Reports. Please note that new dashboards will be added to this screen continually and that dashboards are available in EQRS based on the user's access and role in EQRS. Of note, a nice feature about the reports is that they can be downloaded and printed using the Export feature within the reports, which will be illustrated here shortly. Now let's examine the influenza reports in more detail.

On January 18th of this year, CMS added the Facility Influenza Vaccination Dashboard reports in EQRS. The Influenza Vaccination Dashboard consists of two reports, the Facility Summary Report and the Patient Details Report. The Facility Summary Report reflects facility-level information in EQRS. This includes the facility's ESRD Network; CCN; Ownership; Electronic Data Interchange, or EDI, Organization; EDI Facility ID, if applicable; the Facility name; ID; and the Patient Totals at the facility.

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More importantly, the Facility Summary Report reflects vaccination information by the total number of patients. This includes the number of patients that are up to date on their flu vaccine, the total number of patients that are eligible for a flu vaccination, and, lastly, the influenza vaccination rate in the facility. The other influenza report is the Patient Details Report. Similar to the Facility Summary Report, this report lists facility information including Network; EDI Organization; EDI Facility and ID, if applicable; the facility CCN; Name; and Ownership. Indicated by the report name, the Patient Details Report reflects patient-level influenza vaccination information that is in EQRS. This includes patient vaccination statuses and applicable dates, vaccine name, and more. Additionally, conveniently displayed in the lower part of the of the dashboard are the inclusion and exclusion criteria for the data reflected in these reports. This information will be illustrated in a later slide. Please note, both reports reflect data for the current influenza season which runs from August 1 through April 30. Therefore, data will only remain available to view until July 31. After July 31, the reports will reset and reflect data for the next influenza season beginning August 1.

Listed here are other Influenza Vaccination Reports available to other users with a CMS, Network, or corporate-level role. These reports include National Summary Report, EDI Summary Report, and Network Summary Report. Now that you are somewhat familiar with the influenza reports, let's take a closer look at how to navigate to them and how they appear in EQRS.

Once logged into EQRS, click on Reports Dashboards from the Reports drop-down tab in the blue navigation menu at the top of the screen.

EQRS will refresh and display the available dashboards. Select the dashboard you want to access. In this example, we have selected the Facility Influenza Vaccination Dashboard.

Once the Influenza Vaccination Dashboard is selected, the screen refreshes and will display the facility influenza vaccination rate at the top of the screen and the Facility Summary and Patient Details Reports below.

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Users can scroll down the page to view these two reports. Also seen here are two boxes of supplemental information. The top box discloses information relevant to downloading reports. This includes the data limitation for exporting reports and a brief description of how to export reports for downloading. The export function will be demonstrated in a following slide. The second box of information consists of key information about the reports. This includes that data in these reports are captured from EQRS and that the reports reflect data for the current flu season. If you recall from the previous slide, the influenza season runs from August 1 through April 30. Therefore, data remain available to view until July 31. Then, the next influenza season begins in August. Lastly, users are reminded that the report is up to date as of the day it is generated, and reports must be regenerated to see recent updates. Let's take a closer look at the reports.

The Facility Summary Report appears first. Within the report, the facility information is listed, followed by the summary of data, starting with the total number of patients at the facility. Next is the number of patients up to date on their flu vaccination, followed by the number of patients eligible for an influenza vaccination. Lastly, the facility influenza vaccination rate is the last column in the report. Again, remember that these data reflect data for the current influenza season, which runs from August through April.

The second and last report that is available is the Patient Details Report. A nice feature about this report is that the user has the option to filter report information, which I will discuss on the following slide. First, let's look at what is reflected in the Patient Details Report. The Patient Details Report contains several columns of data, some of which are not captured in this image, but they can be viewed by using the scroll bar at the bottom of the report. In addition to patient demographic information, this report lists patient-level information. As you can see here, this information includes vaccination status and eligibility, vaccination date or approximated date of vaccination, flu vaccine or name, as well as reasons for not receiving or declining the flu vaccination. Remember both Facility Summary and Patient Details Reports reflect data for the current influenza season.

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Again, this runs from August 1 through April 30. Because of this, please remember that the data remains available to view until July 3. Then, the next influenza season begins in August.

Illustrated here are the two available Filter By fields within the Patient Details Report. Here, users can enter the patient's EQRS Unique Patient Identifier, UPI, number to view influenza vaccination information for a specific patient. The other filter option is to filter by vaccination status. To do this, users can select a variety of filter options from the Patients Vaccination Status drop-down filter field. This includes Eligible and Up-to-Date, Eligible but Not Up-to-Date, or the option to Select All.

Another convenience is the ability to export reports for downloading or saving them to your computer. As illustrated in this image, the download function is available by clicking the three small dots or the tools icon that appears in the upper right corner of the table. There are two download options within each report, the Export to CSV option or the Export to Excel option. The Export to CSV is the preferred method for downloading large files but, like Excel, CSV files also have a download limit.

Conveniently displayed below the Influenza Vaccination Reports is information on inclusion and exclusion criteria for the influenza vaccination data reflected in these reports. This can be used as a quick reference guide when reviewing the influenza reports. This wraps it up for the EQRS updates. Next, we will transition the next topic of discussion to the 2744 Annual ESRD Facility Survey.

Let's switch gears to our next topic, the 2744 Annual ESRD Facility Survey. In this next section, I will provide a brief overview of the 2744 Annual ESRD Facility Survey, as well as how to access the 2744 reports within EQRS.

If you are unfamiliar with the 2744 Annual ESRD Facility Survey, you may be asking yourself, "Why is it important and what is it?" The 2744 survey is important because CMS requires all Medicare-certified dialysis and transplant facilities to complete the survey each calendar year.

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The survey is typically completed in early spring each year. The survey collects facility and patient information spanning from January 1 through December 31 of the previous year. The survey captures important patient and staff demographic information, including patient counts by modality, vocational rehabilitation and patient employment status, patient Medicare coverage, number of staff by position, and more.

Another question you may have is, “Why is this survey necessary to provide to CMS each year?” The primary purpose of collecting 2744 data is to conduct important research to assess ESRD trends and to evaluate the medical and social impact of ESRD care on a local, regional, and national levels.

This next slide breaks down the specific information that is collected on the two types of 2744 surveys. The 2744A is for dialysis facilities, and the 2744B is for transplant facilities. As you can see from this slide, each form collects different information. The Form 2744A is for dialysis facilities and collects patient information; beginning and ending patient counts; patient additions and losses; number of treatments for in-center hemodialysis patients; home dialysis; self-training modalities; vocational rehabilitation information, including employment status and the number of patients attending school; and, lastly, staffing information, including the number of staff for each position and the number of vacancies. The Form 2744B is for transplant facilities and collects different information including the number of patients that received a transplant and the number of transplants performed, including the type of transplants performed. This includes living donor, deceased donor, and living related donor. The patient count for those awaiting a transplant is also included on this survey. The 2744A and 2744B collect information on Medicare status.

This is what the first page of the 2744A looks like if you were to view it online via the CMS.gov website. The form can be downloaded and printed from the CMS.gov website or with the link provided on this slide. The online 2744 provides instructions and detailed information about the fields within the survey, which may be helpful to those of you unfamiliar with the survey.

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Please note, this is not what you see in EQRS when you are completing the 2744 survey electronically. You will have the opportunity to see the survey a little later on in this section of the presentation.

Similar to the previous slide, displayed here is first page of the 2744B for transplant facilities. This is what the form looks like when viewed online via the CMS.gov website for transplant facilities. The 2744B can downloaded and printed from the CMS.gov website and with the link provided on this slide. Please note, this is not how the survey appears electronically when completing it in EQRS.

Before we move on to review the 2744 reports, let's review some important reminders when it comes to completing the 2744 survey. First, prior to initiating the 2744 survey in EQRS, please follow the guidance provided by your organization and ESRD Network. Some organizations may opt to have the surveys completed at the corporate level, so it is important you consult your organization before starting the survey. Second, remember to use the reports available in EQRS. These reports will be shown a little later in the presentation. The downloadable reports can help facilities verify the auto-populated data on the survey. Third, please ensure survey accuracy by resolving all errors and/or discrepancies prior to submitting the survey for review to the ESRD Network. Again, you will want to use the survey reports to help identify possible errors to assist with resolving survey discrepancies. Fourth, once errors and/or discrepancies have been identified, be sure to go in to the patient record or records to correct the identified errors. Lastly, once the errors have been corrected in the patient records, be sure to regenerate the survey in EQRS. Once corrections have been made and the survey is regenerated, view the 2744 reports again to verify that the survey data are correct.

Next, let's review the 2744 reports that are available in EQRS.

In 2022, CMS added multiple 2744 reports in EQRS to help facilities verify and/or correct the auto-populated data that appear in the electronic 2744 survey.

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These reports are available within the survey on the View Facility Form 2744 screen in EQRS. Listed here are the four dialysis reports. These include Patients Receiving Care Beginning of Survey Period, Additions During Survey Period, Losses During Survey Period, and End of Survey Report. There is one transplant report, and this is the End of Survey Transplant Report.

In the following slides, there will be step by step instructions on how to access the 2744 reports in EQRS.

The first step in navigating to the facility 2744 survey is to login to EQRS. If you have access to multiple facilities in EQRS, be sure click on the orange Change Organization drop-down button in the upper right corner of the navigation menu to select your desired facility.

Next, click on Form 2744 from the Facilities drop-down tab from the blue navigation menu at the top of the screen.

EQRS will refresh and the Manage Form 2744 screen appears. Enter your selections into the displayed fields. In this case, the survey year is 2023, and the survey status is Existing. Click on Search once you are ready to find your survey.

Your facility should appear under Facility Results. Click on the View button located on the right side of the screen to access the survey.

The screen will refresh, and the View Facility Form 2744 screen appears. This is where the survey data auto-populates and where you can access 2744 reports to verify your survey data. Here you see the 2744 reports within the blue sections of the survey, as displayed on this slide. Each report has a down arrow at the end of the report name, indicating that they are downloadable reports.

To view and download a survey report, click on the desired report link. Once the report is generated it will automatically download to your computer.

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Next, locate the downloaded report file. Click on the report to open, view, and save it to your computer.

After reviewing the reports and identifying any errors, make any needed corrections to the patient record. Once all corrections are made, regenerate the 2744 survey to update the auto-populated data and re-download any relevant survey reports to verify the survey has been updated and is accurate. When a survey is regenerated the data within the survey are automatically updated based on changes or corrections that were made to patient records. Therefore, any time a survey is regenerated it is recommended to download a new report to ensure that the report reflects the most up-to-date information.

Let's summarize the steps for accessing the 2744 reports in EQRS. First log into EQRS. Once logged in, select the desired facility, if needed. Next click on Form 2744 from the Facilities tab in the blue navigation menu at the top of the screen. Once the screen refreshes, enter the required information including the Survey Year and Survey Status. Then, click on the Search button to locate your facility's survey. Click the View link or Add link, depending on the status of your survey. Select and click on the desired report that you want to download. Lastly, locate the downloaded report and save it to your computer. Remember to please be sure to regenerate the survey, as well as any relevant reports after any corrections have been made. This ensures that your survey and survey reports reflect the most up-to-date survey data.

For additional guidance on the 2744 survey, please refer to the form that is available online from the CMS.gov website. The online form contains detailed information about the data fields and survey instructions.

Additionally, the 2744 Training Aid provides detailed steps and instructions on how to complete the survey. This resource is available on the Education page on www.MyCROWNWeb.org, or you can use the link provided on this slide to access the training aid.

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Here are some helpful contacts. Your local ESRD Network and the Center for Clinical Standards and Quality, or CCSQ, Service Center can provide further assistance, if needed. Contact your ESRD Network if you need assistance with resolving outstanding survey errors and/or data discrepancies. To find your local ESRD Network use the link provided on this slide. For assistance with technical issues with your survey, such as issues with generating your survey in EQRS, please contact the CCSQ Service Center. The CCSQ Service Center is open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time. You can reach the CCSQ team by phone, email, or their support portal.

Let's transition to the last portion of this presentation, which is addressing frequently asked questions pertaining to today's presentation topics.

This first question pertains to ESRD QIP information and asks, "Where can someone who is new to working in dialysis find general information on the ESRD QIP?" Let's discuss a few helpful resources. CMS recently published a new resource called the ESRD Successful Reporting Guide. This guide provides a good overview of the ESRD QIP and ESRD QIP reporting requirements. This resource can be accessed with the link here on this slide or by going to the Education page on www.MyCROWNWeb.org. For detailed information on the ESRD QIP measures, please refer to the ESRD QIP Technical Measures Specifications, available on the CMS.gov website. For detailed information on the ESRD QIP measure calculations, please refer to the ESRD Measures Manual, available on the CMS.gov website. Both of these resources can be accessed using the links here on this slide.

This next question asks if the updated Form 2728 is available in EQRS. As discussed earlier, the answer is no. Currently, the updated version of Form 2728 is not available in EQRS. Communication on when the Version 2023 Form 2728 will automatically generate and be available in EQRS will be forthcoming from CMS. Facilities should continue to use the existing form that is currently available in EQRS until it is replaced with the updated version. However, the updated form is available to view and download from the CMS.gov website.

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This can be accessed with the link listed on this slide. Also listed here are additional resources that describe the Form 2728 updates. These include an On Demand training slides and recording, a reference guide, and an FAQ document. These resources can be accessed with the links provided on this slide or by going to the Education page on www.MyCROWNWeb.org.

This next question is about reporting Medication Reconciliation data in EQRS and asks, “Will my facility receive ESRD QIP credit on the MedRec measure if No is selected for the new MedRec field: Was medication reconciliation performed in this clinical month?” The answer is no. To receive ESRD QIP credit for this measure, Yes must be selected for the new reporting field. Then, the remaining required data elements must be completed. These include completing the field for Medication Reconciliation clinician type and name and the date the MedRec was performed. These data must be entered for all eligible patients for every clinical month in EQRS.

Here is another MedRec question that asks, “Will my facility receive credit on the MedRec measure for a patient who changed modalities during the month but had MedRec reporting completed for one of the modalities?” The answer is yes, the facility will receive ESRD QIP credit if at least one facility reports the required data elements for this measure. The required data elements include entering the clinician type and name and the date the medication reconciliation was completed.

This last question on MedRec reporting asks, “Will my facility be penalized for not reporting MedRec data for patients who are not admitted to the facility for the entire month?” The answer is no. Facilities will not be penalized for not reporting MedRec data for patients who are not assigned to the facility for the entire reporting month or for patients who receive less than seven in-center hemodialysis treatments during the reporting month. For additional information on the MedRec measure, please refer the ESRD QIP Technical Measure Specifications, linked here on this slide.

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Switching gears, this next question is about the 2744 surveys and asks, “When does the CMS 2744 survey have to be submitted?” This is a great question, but, before I answer this, I want to remind the facility-level users to please follow the guidance provided by your organization prior to initiating the survey in EQRS. Your organization may have the surveys completed at the corporate level. Now, in terms of the 2744 deadline, each network establishes their own due date for the facilities within their service area. Facilities must consult their local ESRD Network to confirm the 2744 submission deadline. Once the survey is submitted via EQRS to the ESRD Network for review, facilities must monitor their forms’ status and work with their ESRD Network to finalize the forms. To find your ESRD Network contact information, please use the link provided here on this slide.

Here is another 2744 question. It asks, “What should I do if I get a warning or an error message when I try to submit my 2744 survey.” For warning messages, the EQRS user should verify that the counts in the survey are correct. Once verified, a comment should be entered that the counts have been verified. On the other hand, error messages are a little more involved. For addressing error messages, the user needs to identify the root cause of the error and correct the patient record accordingly. After addressing warning and/or error messages, it is important to regenerate the survey in EQRS to make certain that the warning and error messages have been resolved. For additional information on the 2744 Annual Facility Survey and how to troubleshoot warning and error messages, please refer to the 2744 Training Aid that is linked here. The resource is also available on the Education page on www.MyCROWNWeb.org.

To wrap up today’s event, we’ll move on to our Q&A session. Before we do that, I’ll share resources that can be used for future reference related to today’s event content.

Here you see a list of additional EQRS and ESRD QIP resources. I’d like to point out that the new ESRD QIP Successful Reporting Guide is listed at the top.

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Again, this guide includes information about how to report data for the EQRS QIP and provides information on how to report data to the EQRS and NHSN systems.

This last slide provides resource links and contact information. Visit our website at www.MyCROWNWeb.org to find past Town Hall event materials other EQRS resources. As a reminder, today's event materials, including the recording and slides, are available on the Events page on www.MyCROWNWeb.org. For assistance with EQRS technical related issues, please contact the CCSQ Service Center. For assistance with ESRD QIP and general EQRS questions, please use the QualityNet Q&A Tool. Lastly you can use the ESRD Network Directory to find your ESRD Network contact information, should you need assistance from your network.

As a reminder, please take a couple minutes to complete the post-event evaluation. A link to the evaluation is available in the Chat section of your screen, and it will also be available in the post-event email that you will receive shortly.

At this time, we will take the last remaining minutes to assist with any questions that you have about today's presentation. Please submit any questions that you have in the Ask a Staff a Question section of your screen. Then, click Send.

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

On behalf of CMS and our EOCT team, we want to thank you for joining today's Town Hall event. Have a great rest of your day.