



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

Monthly New User Training Presentation Transcript

Speaker

Jane Chaine, MSN, RN, CNN, RD
Communications Director, EOCT

DISCLAIMER: This presentation document was current at the time of publication and/or upload onto the MyCROWNWeb.org website. Medicare policy changes frequently. Any links to Medicare online source documents are for reference use only. In the case that Medicare policy, requirements, or guidance related to these questions and answers change following the date of posting, these questions and answers will not necessarily reflect those changes; this information will remain as an archived copy with no updates performed.

Any references or links to statutes, regulations, and/or other policy materials included are provided as summary information. No material contained therein is intended to take the place of either written laws or regulations. In the event of any conflict between the information provided by the question-and-answer session and any information included in any Medicare rules and/or regulations, the rules and regulations shall govern. The specific statutes, regulations, and other interpretive materials should be reviewed independently for a full and accurate statement of their contents. This document has been edited for grammar.

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

Jane Chaine:

Hello everyone and welcome! Welcome to the End-Stage Renal Disease (ESRD) Quality Reporting System, better known as EQRS, New User Training! This training will serve as an overview of the EQRS system. Unfortunately, we do not have enough time to provide in-depth training for every element in EQRS, however, at the end of today's session, I will give you information on where you can access in-depth, step-by-step instructions on all procedures performed in EQRS, including the slides and recording from today's training.

My name is Jane Chaine. I will serve as your trainer for today's event. Also, on the line are other subject matter experts who will assist with answering questions during today's event. Before we get started, I have some housekeeping items to review with you. Today's presentation is streaming audio through your computer through the GoTo platform, so you do not need a telephone line to hear today's presentation. However, if you are unable to hear the streaming audio or need to call in, please send a message to the "Question box" and you will be provided with a dial-in number and event access code. Please note, there are limited phone lines available. If your audio is breaking up, press the F5 key on your computer or click the refresh button. If you are hearing an echo, it is likely caused by having multiple browsers open for this event, and you are hearing audio being streamed for each of those open events. If you hear an echo, look at the top of your browser tabs and make sure you only have one event open.

As we go on with today's event, you'll hear from me, but unfortunately, I will not be able to verbally hear from you, but I encourage you to get involved. You can ask questions by using the Q&A feature that is located on your screen. When submitting a question, please type your question in the "Ask the staff a question" section and click Send. Some questions may require research beyond the scope of today's call, so if your question does not get answered today, please submit your question to the QualityNet Question and Answer Tool, by using the link that is located here on this slide. As a reminder today's slides and recording are available on the

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

Education page on the MyCROWNWeb.org website. Scroll to the bottom of the Education page to access today's training materials.

Here, is an overview of the topics that will be covered today. We'll start off with a brief overview of how to register for and maintain access to EQRS. Next, we'll discuss the Facility Dashboard. We'll cover how to set Facility Default Preferences to save you time entering data in EQRS. We will cover adding facility personnel, admitting a patient, viewing and editing patient details, submitting an Initial 2728 Form. We'll discuss when and how you would add a new treatment record, and vaccination information. And how to enter Clinical information and Clinical Depression data. We'll review how to discharge a patient and complete a CMS-2746 Form. The last training topic will cover Accretions and how to resolve them in EQRS. Today's call will end with an overview of how you can access training resources and the event presentation evaluation.

Here is a quick breakdown of how we will do things today. First, we will start off with some background information, and then from there, we will demonstrate how you will complete that particular task in EQRS. Please note that the data displayed in today's presentation, is fictitious. No real patient data will be used during today's training. Please note, CMS is continuing to work on improving EQRS, so the information covered today is subject to change. Okay, let's get started!

Let's start today's training with a brief overview of how to manage your access to EQRS.

In order to access EQRS, users must complete the Healthcare Quality Information System Access Roles and Profile – better known as HARP – account registration process. HARP must be used to register for EQRS access and to also maintain access to many CMS applications, such as EQRS. Creating and maintaining a HARP account is the first part of your EQRS data reporting efforts. We, unfortunately, don't have enough time during today's training to provide step-by-step instructions on how to complete the HARP account registration process. Go to the Education

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

page on www.MyCROWNWeb.org to access complete HARP training materials.

After establishing a HARP account, remember that you can use the menu to update your password, create or change your Challenge Question, register two-factor authentication devices, and more.

HARP is used to create and maintain your EQRS username and password, and functions to manage the roles needed to complete tasks within EQRS. EQRS blends the functionalities that were once completed in CMS's CROWNWeb, and ESRD Quality Incentive Program applications. You can use the My Access page within EQRS to view and ensure that you have the right roles – based on the tasks that you need to complete within EQRS. As a reminder, the HARP training materials can be accessed from the Education page on www.MyCROWNWeb.org. It is also important to remember that as of October 15, 2021, CMS launched an automated security measure. 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 notifications as the 60-day inactivity deadline approaches. CMS recommends that if you receive one of these in-activity email notifications to login to EQRS to maintain your role or roles within EQRS environment.

Now let's jump into the Facility Dashboard section in EQRS. This is a great feature in EQRS because it helps highlight and show data submission needs.

When you log into EQRS, the Facility Dashboard should be one of the first sections you access. It displays outstanding or past due 2728 and/or 2746 Forms. It shows any unresolved Accretions. It displays the number of system discharges that occurred this year and the past year. The dashboard reports the number of Clinical Depression screenings that need to be completed and shows if the facility has any clinical data that is due.

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

Let's take a few minutes to talk about setting facility default preferences. As you enter data in EQRS, you will see fields, primarily on the 2728 Form and the Clinical screen, that ask for the method used to calculate a particular value. Setting a default entry for those fields will help save time later.

To access the Default Preferences screen, click on Facilities in the blue navigation menu at the top of the screen.

Next, start the search process by clicking on Search Facilities from the sub-menu.

Continue with the search by entering search criteria. A facility search can be conducted by typing in the facility ID, facility name, the facility's CMS certification number, and more. In this example, the facility's six-digit CCN will be used to find the facility in the system.

After selecting the correct facility, click on the Default preferences link towards the upper-middle part of the screen, in the Actions section.

After clicking on the default preferences, the system refreshes, and default fields appear on the screen. Default methods can be set for Adequacy, Mineral Metabolism, and the GFR Calculation. For Adequacy, we can set the BSA Method or V Method for PD patients and Kt/V Method for hemodialysis patients. The unit of measure for height and weight can be set, as well as the default option for Residual Renal Function Assessed in Calculating the Kt/V for peritoneal dialysis patients. For the Mineral Metabolism default section, the Lab Method for Serum Albumin can be selected. Lastly, we can set the GFR calculation method for adult and pediatric patients. Click the Submit button once all desired fields have been completed.

After submitting the selected default preferences, the system refreshes and displays a message that reads : *Facility default Preference submitted* successfully.

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

Now, let's talk about adding Facility Personnel in EQRS and why this is important. In EQRS information will display only if and when it is entered in the system. So the only way a staff member's name will appear in EQRS is if you've added that individual to the Personnel section. Key individuals who interact with patients; who might need to sign off on forms, such as the nephrologist or key staff members at your facility should be entered into EQRS, so that their names can be selected as you are entering information into the system.

Once signed into EQRS click on Facilities in the blue navigation menu at the top of the screen.

In this example, a facility staff member is being added to the system, so click Personnel.

The system will refresh and display a Search Personnel screen, which gives the ability to search for an existing staff member, edit a staff member's information, or to add a new staff member. To begin the process of adding a new staff member, click on the New Personnel option that appears on the left side of your screen.

Once the screen refreshes and the Add Personnel option appears, Click on Add Personnel to begin entering information.

The system will refresh, and the screen will display two sections – the Personnel Information and the Positions sections. Starting with the first section that appears, click on the Personnel Information to view the fields within that section.

Once the screen opens to the Personnel Information, start entering in staff information, starting with the staff member's salutation. In this case, the salutation selected is Dr., next enter the first name, last name, and suffix if it applies. If entering someone like a nephrologist or medical director, you must enter that doctor's Personnel NPI or UPIN for that individual's name to display in the drop-down lists. Here you can also enter the person's credentials and contact information.

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

Next, scroll towards the bottom of the page and click on the Positions section. Now select the staff member's job description from the drop-down list and the Job Code field will automatically populate based on the selection made. Once the information is entered, click the Add Positions button to save your entry.

The system will refresh and display the position that was selected and provides the option to add other positions, if that staff member holds multiple jobs at the facility. When ready to move on to the next step, click on the Review button.

The system refreshes and displays a screen to review the personnel information that was entered and gives the option to make edits by clicking on the edit button toward the top of the page. Be sure to review the information before submitting it. Click the Submit button to add this information.

If correctly entered, EQRS refreshes and displays a message that reads Personnel information added successfully.

Now, let's discuss the process that we would follow in order to admit a patient to our facility in EQRS. This is important because you can only view and report treatment information for patients who are admitted to your facility in EQRS. And you can not see patient information under facilities that you do not have access to in EQRS. Additionally, if it is a new patient, you want to make sure that the patient is added to your facility, ASAP. Please remember that only chronic patients should be entered into EQRS, so please do not admit acute patients to your facility in the EQRS.

EQRS has checks and balances built-in to help ensure that the system doesn't have duplicate patient records. For instance, when admitting a patient, EQRS uses six key identifiers and uses them to identify if the patient already exists in the system or if it is a new patient record. The system looks at the First and Last Name, Date of Birth, Gender, Social

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

Security Number, and Medicare Beneficiary Identifier – also known as MBI number.

Once you are logged into EQRS, the first step in the process of admitting a patients to EQRS is to navigate to the menu at the top of the screen and click on Patients.

Next, the system will refresh and provide a sub-menu of items to select. Click on Admit a patient from the sub menu.

Next, the Patient Information page will appear. When admitting a patient, you want to look at the fields closely and enter all available information. As you enter data, the screen may display fields that might not be marked as required to complete, but these fields may be required later, when submitting CMS forms, or for reporting clinical data, etc. You will want to collect as much information before attempting to admit the patient to your facility in EQRS. The first fields to enter on the Patient Information section is the patient's first and last name. Enter the date of birth and select the gender. Next, you can enter the social security number and Medicare Beneficiary Identifier or MBI number. Please take note of the N/A checkboxes next to the social security number and Medicare Beneficiary Identifier fields. If the patient does not have a social security number or MBI, you can then select N/A.

Next, you will need to click on the Admissions Information section that appears directly below the Patient Information Section. Enter the Admit Date - this is the date when the patient first dialyzed at your facility. Select the Admit Reason and then click Next to continue.

After clicking Next, EQRS will refresh and gray out the fields that have been completed and captured in the system, in this case, the Patient Information and Admission Information has been completed so these fields are grayed out. Notice the message at the top of the screen that reads *“No patient matches found. New patient record will be created.”* This is the message you want to see when you are adding a new patients into EQRS.

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

Additionally, on that same Admit Patient screen, additional sections will now appear including, : race/ethnicity/tribe and origin, contact information, Misc information, admission information and dialysis treatment information. The admission information that was entered earlier on has been saved in the system and will now appear. Next you will want to move through each section that appears and enter as much information as you are able. The next section to complete is the Ethnicity, race tribe and origin section.

After clicking on the “Ethnicity, race, tribe and origin section,” select who provided information about the patient’s race and ethnicity. For instance, did the patient or a family member provide the information? Next select the correct ethnicity from the drop-down box and select the race or races that apply. More than one race can be entered. The Tribe and Country/Area of Origin fields become enabled based on the selections entered in the race category. For instance, the Tribe field will be enabled if you select American Indian/Alaska Native and the Country/Area of Origin field will be enabled if you select Native Hawaiian or Other Pacific Islander.

The next section to click on is the Contact Information section. After clicking on this section enter the patient’s mailing address. In this case, it is 123 Patient Lane. Enter the Zip Code and then the options for the City, State, and county will display based on the Zip Code entered.

Further down the page is a section for the patient's Physical address. Notice here that there are two different check boxes. The first checkbox reads: “*Physical address same as mailing address*” If the physical and mailing addresses are different, then continue by entering the physical address and enter a phone number and email address, if possible. Here in this example “*Physical address same as mailing address*” has been selected. The second checkbox reads: “*Is the patient in a nursing home setting.*” Notice in this example that this box is selected, once this box is selected then the field for *Nursing Home Setting* becomes enabled and a Nursing Home Setting must be selected. Select the patient’s *Nursing Home Setting* from the three options in the drop-down menu, these include

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

Permanent Resident, Short Term Care or Rehabilitation or Other. In this example Permanent Resident is selected. Next enter the date the patient entered the nursing home. If the patient does not reside in a nursing home, you do not need to enter any nursing home information in EQRS.

Now, navigate to the Miscellaneous Information section and click on this section to enter information. Click the drop-down menu for Medicare Enrollment and select if the patient is currently enrolled, if the Medicare application is pending, or if the patient is not applying. Enter the effective date. Select the patient's Citizenship status and the effective date. Indicate the current employment status. Is this person employed full-time, part-time, or retired? Notice that there isn't an asterisk next to employment status, indicating that it is not a mandatory field, so The system won't prevent you from admitting the patient if you do not enter this information, but it will be needed for the CMS-2728 Form. As a reminder, some of the fields may not be marked as mandatory now but will be required later. Entering as much information you can now, will save you time later. Lastly enter if the patient is in school and/or vocational rehabilitation status.

Now, go to the Medical Information section and enter the effective date. In this case, the effective date is the date that the patient was admitted to the facility.

Now, go to the Admission Information section. This section will be pre-populated with the admission date and the admit reason, since it was already entered earlier on in the EQRS admitting process.

Lastly, navigate to and click on the Dialysis Treatment Information section. Notice here that the Treatment Start Date is grayed out because the EQRS system will pre-populate this field based on the Admit Date that was entered in a previous section. Next, enter the Primary Dialysis Setting; Is this patient completing his or her treatments at a dialysis facility, at home or at a skilled or long-term nursing facility? In this example, the primary dialysis setting is a dialysis facility. At this point, the

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

Expected Self-Care Setting and Dialysis Time Period fields are not required.

Continuing with the Dialysis Treatment information, enter the Primary Type of Treatment. Is this a Hemodialysis, CAPD, CCPD or a home hemodialysis patient? In this example hemodialysis has been selected. Next, since hemodialysis is selected, the prescribed number of sessions per week and the minutes per session (or per treatment) should be entered. Select the attending practitioner. If the patient is a home dialysis patient, then the dialysis training type and training start and end dates should be entered here. If the patient is not a home dialysis patient and is receiving in-center hemodialysis, then the training type and training dates are not applicable and do not need to be completed. Once you have completed the dialysis treatment information click the Submit button.

If everything is entered correctly, EQRS will refresh and display a message at the top of the page that reads: *Patient admission was successfully submitted*. This is the message you want to see when you admit a patient in the EQRS system.

The next topic that will be covered is how to view and edit patient details in EQRS. EQRS should have the most up-to-date and relevant patient information. So, for instance, if a patient moves or other demographic information changes, the patient record in EQRS will need to be updated.

Once you are logged into EQRS, the first step in the process of admitting a patients to EQRS is to navigate to the menu at the top of the screen and click on Patients.

Now, click Search Patients in the sub-menu that displays.

To conduct your search, enter the patient criteria. A quick way to do this is to enter the patient's first and last name. Then click the Submit button to view the search results.

Once the system refreshes, review the name and information that appear on the screen to confirm that it is the correct patient, then click on the

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

EQRS Patient ID link on the left of your screen to bring up the patient's record.

Again, review the patient's information to make certain that you have selected the correct patient. , Next click the Edit button in the upper right-hand side to make any needed edits.

After clicking on the Edit button, the patient information fields are now available for edits and changes can be made to the patient's information. (deleted: name, and social security number, etc).

Remember to click on any of the necessary sections to display the hidden fields; make any needed updates and click the Submit button at the bottom of the page to process the changes.

Once the updated record has been submitted and if there are no data entry errors, EQRS will refresh and display a message at the top of the screen that reads *Successfully Edited Patient*. This is the message you want to see displayed on your screen.

The next topic that will be presented is how to submit an Initial CMS-2728 Form. If you are new to submitting 2728 form, you need to know that there are three types of CMS-2728 Forms. The most common 2728 Form is an Initial 2728 Form, the other 2728 Forms is the Supplemental 2728 Form, and the Re-entitlement 2728 Form. The different 2728 CMS Forms may be due at various times during a patient's treatment course. For example, a Supplemental 2728 Form would be due if the patient has received a transplant or trained for self-care dialysis within the first 3 months of the first date of dialysis and the Initial 2728 Form had been submitted. The EQRS system knows the requirements and displays correct forms, based on entries made. The scope of this presentation will review how to submit an initial CMS 2728 Form.

Once logged into EQRS, the first step to get started on an initial 2728 Form, is to search for the patient. To do this, click on Patients in the blue navigation menu at the top of the screen.

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

Now, click Search Patients in the sub-menu that displays.

To search patients, enter patient criteria information, again, the easiest way to do this is to enter the patient's first and last name. In this example, "Itsa Patient" is entered in the patient criteria fields under first and last name. Once the patient criteria displays to the right of your screen, click the Submit button to do your search.

Review the name and information to confirm that it is the correct patient, then click on the EQRS Patient ID link on the left of your screen.

The system will display Patient Information. Review the information again to ensure that this is the correct patient. Next, click on the Form 2728 in the menu display that is on the left-hand side of the screen.

If the patient was admitted as a New ESRD patient, and the 2728 Form has not been submitted yet, a blue box will appear that reads *Add Initial 2728*, just like in this example. The due date for the 2728 Form is shown to the left, as well as the facility's name and the patient's admit date. As a reminder this is a fake patient, and this facility is being used for training purposes only. Click on the blue box that reads *Add Initial 2728* to access the electronic CMS-2728 Form.

There are multiple steps and sections to complete within the 2728 form. Please note, that most of the fields here in Section A will be pre-populated with information that was entered during the admitting process. After all the information you have about the patient is entered into the form, the form will need to be saved and printed for the doctor and the patient to sign. After the signatures are obtained, the dates that the form was signed must be entered into EQRS. Next the facility can electronically upload the information by submitting the completed 2728 into the system. Then the signed 2728 form will need to be mailed to the local Social Security Administration office. Mailing the 2728 form to the Social Security office is an important step to ensure that the patient benefits are activated, and that the facility is reimbursed for services rendered. Refer to the 2728 form for detailed instructions.

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

As seen on the screen, the patient's demographic information automatically carries over because this information was already entered when the patient was added in the EQRS system. Data entry begins with field 10, which asks *"Is patient applying for ESRD Medicare coverage?"* Select Yes or No. In this example, yes is selected. Next, check off the current medical coverage and be sure to select all that apply. In field 12, enter the height in inches or centimeters and in field 13 enter the dry weight in pounds or kilograms. In this example, inches and pounds have been selected.

Continuing to question 14, which asks the Primary Cause of Renal Failure. Enter the Primary Cause of Renal Failure by either selecting a diagnosis from the drop-down list or by typing in the ICD-10 code. When typing in an ICD-10 code, be sure to enter the code without any decimals. Next, Question 15 asks for employment status including 6 months prior to dialysis, as well as the current status. In this example, the employment status information carried over from the previous information that was entered and displays that the patient is employed full time. Question 16 asks for the co-morbid conditions to be entered. It is important to know that this is the only place in EQRS where co-morbid conditions are documented, so it is important that this information is complete and accurate.

Continuing on to Q17, where it asks about the patient "Prior to ESRD therapy." Here, the system has built in conditionally required fields, where certain fields will become active based on the selections. Looking at question a, "Did patient receive EPO prior to dialysis?" Yes, no, or unknown? Based on the selection, if yes is indicated, then the corresponding field next to it would become active, and a selection of either 6 months, 6-12 months, or greater than 12 months will need to be made. The next question, question b asks, "Was patient under the care of a nephrologist?" Again, similar as before, select yes, no, or unknown, and based the selection the field to the right becomes active. The next question, question c, asks, "Was patient under care of kidney dietitian?" Make the correct selection. The last question in this section asks, "What

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

access was used on first outpatient dialysis?” Review the options and make the selections. Again, the conditionally required selection options applies, based on the selections entered.

Question 18 addresses laboratory values. Indicated by the red asterisk, 18b is the only mandatory field, however, if the other lab information is available, it is important to enter it, because this will be the only opportunity to document these lab values on the 2728 Form in EQRS. Question 18b, the patient’s Serum Creatinine must have a value and the date of the lab result. With the exception of the Lipid profile, all lab values on this form, must be within 45 days prior to the most recent ESRD episode.

To help with time during our training, I’m just going to focus on the required fields, but as mentioned before, please provide all available information for the patient because this is the only time you will be able to report this data in EQRS.

We’re now going to continue by taking a look at the other sections on the CMS-2728 Form. Going in order, we’re now going to jump to Section B.

In Section B, some of the data has carried over from the details that were entered from the EQRS admission process. In this section, data entry begins with Field 23, which asks the date of *when Regular Chronic Dialysis Began*. If a patient began treatment at a hospital, before coming to the facility, then indicate that date here. However, many times, Field 23 will be the same as Field 24, if your out-patient dialysis facility is where the patient received his or her first chronic dialysis treatment. The next Field, Field 25 asks “Has patient been informed of kidney transplant options?” Enter either Yes or no. If No, then Field 26 will become enabled, and the facility must select the reason why the patient was not informed about transplant options.

Moving along to Section C. Section C is to be completed for all kidney transplant patients. This section will be skipped for now since this Form is

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

being completed for a new dialysis patient. If the patient has received a kidney transplant at any point in time, this section must be completed.

Section D is to be completed for all ESRD self-dialysis training patients, so this would include your home dialysis patients. This does not apply to the example being presented today but should be completed for all patient undergoing dialysis training, whether it be peritoneal dialysis or home hemodialysis.

Now, moving down towards the bottom of the Form is Section E, Physician Identification. The patient's attending physician should already be selected. The Form has not been signed by the doctor yet, so Field 49 is blank for now. Once all sections are completed the Form will need to be saved and printed for the doctor and patient signatures.

Section F is the last section on the Form and is the section where the patient signs. Like the physician's signature, we can't complete Field 54 because the patient hasn't signed the form yet. Lastly, this section also includes the selection for the GFR Calculation Method – select the calculation method from the drop-down list, if it is known and click Save.

After clicking the Save button, the EQRS system will automatically refresh and display a message that the 2728 Form was successfully saved. Next, print the form to have the doctor and patient sign it.

After the form has been printed and signed by the doctor and patient, the Form can be completed in EQRS. Once signed into EQRS the patient's record will need to be pulled up. To do this, click on Patients in the blue navigation menu at the top of the screen.

Now, click Search Patients in the sub-menu that displays.

Same as before, search for the patient by using the first name and last name. So, we enter "Itsa Patient" and click the Submit button.

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

Same as before in the earlier section, review the name and information to confirm that it is the correct patient, then click on the EQRS Patient ID link on the left of your screen to bring up the patient's record.

Once the patient record is displayed, click the FORM 2728 in the menu display that is on the left-hand side of the screen.

The system will refresh. Under the Existing 2728 Forms column on the left side of the screen, there is an Initial Dialysis link – click on this link to add to the form. Before I continue to the next slide, Notice the Status column to the right of the Initial Dialysis Link, this column displays the status of the 2728 Form; here the Form has a Saved status and is not yet completed.

After clicking on the Initial Dialysis link, the screen will refresh and open up to the 2728 Form. Click Edit in the upper-right hand side of the screen to enable the fields on the page.

Once the screen refreshes and the 2728 Form is open for edits - scroll down to Section E, the signature section of the Form.

Here, in Section E, under Field 49, enter the date that the doctor signed the form and enter any remarks the doctor may have written on the form.

Next, scroll to Field 54 to enter the date that the patient signed the form. Enter any additional data gathered to complete the 2728 Form, then click the Submit button.

After the form is submitted a message at the top of the screen will display that the form was successfully submitted.

Next, let's talk about adding treatment information in EQRS. We'll discuss when you'd do this and why. Anytime there is a permanent, doctor-prescribed order or change to the patient's treatment, you want to go in EQRS to update the patient's record. The system keeps a detailed history of everything that takes place with the patient, so it is important to make sure that accurate information is captured in EQRS.

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

Same as in the earlier section, to search for the patient click on Patients in the blue navigation menu at the top of the screen.

Now, click Search Patients in the sub-menu that displays.

Same as the earlier sections, enter patient criteria to conduct a search. Again, a quick way to do this is to enter the patients first and last name. Then click the Submit button to view the search results.

Be sure to review the name and information to confirm that it is the correct patient, then click on the EQRS Patient ID link on the left of your screen to bring up the patient's record.

Once the system refreshes and the Manage Patient page displays, click on the Treatments link on the left-hand side of the screen to access the patient's treatment record.

Next, the screen will refresh and display an admit Date on the left side of the screen, click on the admit date to pull up the patient's treatment record.

EQRS will refresh and display the treatment record for the admission record that was selected. In this example, there is a new doctor-prescribed change in the patient's treatment modality; the patient is switching from in-center HD to home therapy. The first step to make this treatment change in the system is to click on the New Treatment link, as shown here on the screen.

When the page refreshes enter the new treatment information. For today's training, we'll focus on the required fields only. Starting from the top of the page, add the treatment start date and select the primary dialysis setting, which in this example is home. Next enter the primary type of treatment, in this example it is CAPD. Select the attending practitioner, which is typically the nephrologist and any additional necessary data. After reviewing that the information, you entered is correct, click the Submit button to make these changes.

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

The system will refresh and display a message that the *Treatment added successfully*. The screen will also display the information that was just entered and submitted in the system.

Next, let's talk about adding vaccination information in EQRS. This section covers how to enter information for hepatitis B, pneumococcal and influenza vaccinations. The vaccination reporting process is an event-based reporting process. A vaccination event occurs anytime a patient receives a vaccine administered by the reporting facility or an outside provider or when a patient self-reports that a vaccine was received and lastly, a vaccine event is also when a patient does not receive a vaccine that has been offered by the reporting facility. Vaccination data can be entered at any time following a patient admission to the facility and data should be entered as soon as possible after the patient has been admitted to the facility or when a vaccination event has occurred.

The vaccination information is entered on the Manage Patients screen. To begin the process of entering vaccination data, search for the patient by clicking on Patients in the blue navigation menu.

Next, click Search Patients in the sub-menu that displays.

Same as the earlier sections, enter patient criteria and click Submit to conduct your search.

Once the screen refreshes, click on the EQRS Patient ID link on the left of your screen to bring up the patient's record.

Next, the Manage Patient page will display, click the Vaccinations link on the left side of the screen to access the patient's vaccination information.

The Vaccination Summary will display for your patient. Next, click on one of the three Add Vaccination Data links to add information for the desired vaccine.

The first vaccination listed on the Vaccination Summary page is Hepatitis B. To add Hepatitis B information, click on the Add Vaccination Data link.

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

Next complete the required fields on the Hepatitis B vaccination screen. Enter where the patient received the vaccination, if the vaccination was part of a series or if it was a booster. Next enter the vaccination name and date.

Moving down the screen, report if the patient experienced an adverse reaction and also be prepared to enter the patients Hepatitis B surface antibody information. Lastly, click the Add Vaccination Data button to save your entry.

Once your Hepatitis B data is entered you will notice that the vaccination data can be viewed/edited, duplicated and deleted from the Vaccination Summary screen. Unique to the Hepatitis B vaccination reporting is the ability to Duplicate vaccination data. The duplicate feature can save you time when entering a Hepatitis B vaccination series. After the first dose in a Hepatitis B vaccination series is entered, users can select Duplicate from the drop-down menu as displayed on the screen, which will duplicate the dose and allow a new date to be entered and any other changes to the doses in the series.

The next vaccination listed under the Vaccination Summary screen is Influenza. Just as with the Hepatitis B vaccination, Click on the Add Vaccination Data link to the right to begin your entry.

Enter where the patient received the influenza vaccine, the name and date of the vaccination and if the patient had an adverse reaction. Click on the Add Vaccination Data button to save your entry.

Once the influenza data is entered and saved, it will appear immediately in EQRS. EQRS users can then view/edit and delete information as needed.

The last vaccination listed on the Vaccinations Summary screen is the Pneumococcal vaccination. Click on the Add Vaccination Data to enter Pneumococcal vaccination information.

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

Enter where the patient received the Pneumococcal vaccination, the name and date of the vaccination and if the patient had an adverse reaction. Click on the Add Vaccination Data button to save your entry.

Same as the previous vaccines, once the pneumococcal data is entered and saved, it will appear immediately, and users can then view/edit and delete information as needed.

The next topic that will be reviewed is how to enter clinical information in EQRS. Clinical data is due on a monthly basis for all collection types, including hemodialysis and peritoneal dialysis patients. This is also where you would enter vascular access data.

Once logged into EQRS, the first step for entering clinical data is to click on Patients in the blue navigation menu.

Next, click on 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. Is data being submitted for a hemodialysis or peritoneal dialysis patient, or is this vascular access data that is being submitted? In this example, Hemodialysis is selected as the Collection Type. Next, select the clinical month. Before we continue, notice how the word Open is in parentheses next to the month. This is letting you know that data can still be submitted for this clinical month. If closed is displayed, it means that CMS is no longer accepting clinical data submissions for that clinical month. Please be sure that all necessary data gets reported before a month is closed. Continuing with the search, the Last Name Group or Patient Clinical Status field can be completed to fine-tune your search. Click the Search Patients button to display the patient or a list of patients, depending on how you completed the search.

A nice feature to point out is the ability to select a Common Lab Test Date. This can help save time when entering lab values. You can enter the common lab test date and click Apply. The date entered in this area will automatically display as you enter lab values. You can also manually change a specific field, if needed.

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

Moving down the **Manage Clinical** screen, the Anemia Management section appears first and includes the following fields: Hemoglobin, Ferritin, Iron Saturation, and Reticulocyte Hemoglobin.

Notice that these fields all have red asterisks, indicating that they are required. Enter the value and the date of the lab result. In this example, the facility has reported Anemia Management data for **August 2020**. Notice that the system gives the ability to select N/A if for that reporting month, the lab work was not drawn or not available.

Moving down the screen, the next section is the Adequacy section. Hemodialysis patients must have adequacy data entered every month. Typically, peritoneal dialysis patients have adequacy drawn every three months, so with taking that into consideration, EQRS allows users to select the N/A checkbox next to specific fields to indicate that the adequacy related labs were not drawn during that clinical month. In this example, data has been populated for a hemodialysis patient in the necessary fields, including the Kt/V value and method and lab draw date. Next the pre and post BUNs have been entered, as well as the pre and post patient weights. Next, be sure to input the Delivered Minutes of dialysis, this is how long the patient dialyzed on the date reported. Next, the patient height will need to be entered. The patient's Serum Creatinine and Normalized Protein Catabolic lab values and dates will need to be entered. And the last entry for the adequacy section is the total Number of Dialysis Sessions the patient completed During the Clinical Month.

Moving down to the Ultrafiltration section. In this section, enter the Ultrafiltration or UF data elements for all the dialysis treatments that the patient received during the week that the Kt/V lab value was drawn; please note, UF data elements do not need to be reported in EQRS for any other week besides the week of the Kt/V lab draw. Please note, the data elements for the actual treatment day that the Kt/V lab value was drawn should be entered into the Adequacy section (which was discussed on the previous slide). For instance, if a patient treats Monday, Wednesday, and Friday and a Kt/V lab value is drawn on Monday, then the UF data elements for Monday will need to be entered under the Adequacy section

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

and then the Wednesday and Friday UF data elements should be entered here in this section under the UF section. Likewise, if a patient treats on Tuesday, Thursday, Saturday, and the Kt/V lab value is drawn on Tuesday, then the UF data elements for Tuesday will need to be entered in the Adequacy section and the Thursday and Saturday UF data elements will need to be entered here, under the UF section. To report the UF information, enter the ultrafiltration date, the patient's Pre and Post dialysis Weight, and Delivered Minutes or length of dialysis treatment. Click the Add button to save the UF data and to add an additional session, if needed. The system will support as many entries as needed.

The next section is Medication Reconciliation, which captures information about whether the patient's medications were reviewed for the month. To complete this reporting, select if a medication reconciliation was preformed in the clinical month you are reporting. Select Yes or No. Next select the clinician type, in this example a Nurse completed the medication reconciliation. Enter the date the medication reconciliation was completed. And lastly, you will need to enter the name of the clinician that preformed the medication reconciliation.

Moving down to Mineral Metabolism, in this section enter the phosphorus value, method and date of the lab draw. Next enter the value and date for Uncorrected and Corrected Calcium and Serum Albumin. Enter the Serum Albumin Lower Limit and Lab Method. Next enter the PTH value, Method, Upper Limit Assay Range and date. Select N/A for the values that were not recorded for the patient for that clinical month.

Next, moving on to the ESA section. This is where ESA data is entered. For in-center hemodialysis patients and home dialysis patients that receive ESA medication at the clinic, enter the total amount administered during the month. However, for home dialysis patients that self-administer ESA at home, enter the amount prescribed for the month. In this example, ESA Administered is marked as yes and the date it was administered. Now select the ESA Agent Prescribed, here in this example Epoetin Beta is selected. Based on the information entered, the conditionally required fields become enabled. Enter the ESA Monthly Dose, and Route of

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

administration. In this example, the patient's monthly ESA dose is 15,000 units given Subcutaneously.

The next section is Infection. This is where the facility reports patient infections in EQRS. Here you report any infections that the patient has had during the month. All infections should be reported here, so both dialysis related and non dialysis related infections and whether or not the infection required hospitalization. In this example two infections occurred during the month and one of the infections required the patient to be hospitalized.

Moving on to the Iron section. Similar to the ESA section, enter the actual amount that was administered during the month for in-center hemodialysis and home dialysis patients that received the medication in the facility. However, for home dialysis patients who take Iron at home, enter the amount of Iron prescribed for the month.

Continuing to the next section is the Fluid Weight Management section. In this section select if the patients Post-Dialysis Target Weight was prescribed or was not prescribed for this session and the Post-Dialysis Weight Assessment Date. For consistency, purposes, use the monthly lab draw date.

Next is the hospitalization section. This is where hospitalization information is entered if the patient visited the hospital at any point during the month. Enter the hospital admission date, select the hospital visits (so is this an ER visit, a hospitalization or an ER visit that led to a hospitalization). The discharge date and Name of the Hospital are also required, so this data will need to be typed into the fields. Click the Add button to save the entry and to add additional hospitalization information. In this example, the patient went to the hospital once to visit the ER.

Moving down to the bottom of the Manage Clinical screen is Telemedicine. This reporting feature applies to Hemodialysis and Peritoneal dialysis collection types and 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

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

month on each patient, by selecting yes or no from the Telemedicine drop down menu. Selecting yes will enable 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. Here in this example Yes is selected so the remaining fields under Telemedicine have become enabled. Enter the month, day and year of the patients last Telemedicine Visit and the number of Telemedicine Visits for the clinical month. After entering all the clinical data on the patient, click the Submit button to process the data that has been entered.

If everything was entered correctly, the system will refresh and display a message that reads *Successfully submitted clinical data*. This is the message you want to see on your screen.

Next, I will briefly review vascular access data reporting. As mentioned earlier, the Manage Clinical screen is also where you will submit Vascular Access data. Under the collection type drop down box, select vascular access. As a reminder, this is also where you select hemodialysis or peritoneal patient. Next, select the month from the Clinical Month drop down box. Then click the Search Patients button to do your search and EQRS will display a list of patients that meet the search criteria.

Once you select the patient you want to enter data on, scroll down to start entering data. Enter the date of reported dialysis session for the clinical month. The next field is Current Access Type. Here you enter the type of access used for dialysis on the reported dialysis session date. On this screen, the system will enable fields based on your selections. The selected Access Type will determine if the AV Fistula or AV Graft fields are now required. In this example, Catheter Only for the Access Type is selected, which then enabled additional fields below. The next required field is Date Access Type Changed. Enter the date that the access type selected became active. After entering all needed information, click the Submit button to process your entries.

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

If everything has been entered correctly, the system will refresh and display a message that reads *Successfully submitted clinical data*. This is the message you want to see on your screen.

The next topic that will be reviewed is how to enter Clinical Depression Screening and Follow-Up data in EQRS. As a reminder, facilities are required to submit Clinical Depression Screening and Follow-Up Plan information for each eligible patient at least once during the calendar year. Users can enter data during the entire assessment period, which runs from January 1st to December 31st and assessments should be entered by the close of the December clinical month. Now we will review the steps to follow to document Clinical Depression Screening data.

Once logged into EQRS, the first step for reporting clinical depression information is to click on Patients in the blue navigation menu.

Select Clinical Depression from the sub-menu.

The screen will refresh and display facility information and the assessment period. Below that, is the Depression Screening Status field; in the Depression screening status drop down you can select All, Required or Submitted. In this example, the Required status is selected, so all patients that require a Depression screening or follow up reporting for the 2021 Assessment period will display on the screen. Alternatively, a specific patient record can be pulled up by using the Patient name search field that is on the right-side of the screen.

The screen will refresh and display a list of patients that have a required screening status for the specified Assessment period. Click on the Report link that is on the right side of the screen to report Depression screening information for the desired patient.

Next, the screen displays an overview of the Clinical Depression Screening data reporting requirements at the top of the screen and the reporting response options at the bottom. Make the necessary selection for the patient and click the Submit button to process your data entry.

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

Once the screening response has been submitted, EQRS will refresh and display a message that the Clinical depression assessment has been reported successfully. Additionally, the screen will update to display a change in the screening status.

The next topic to be reviewed is how to discharge a patient in EQRS. As a reminder, the facility needs to discharge a patient if dialysis is discontinued for any reason, or the patient has transferred to another facility.

To get the discharge process started, first find the patient's record. Same as in the earlier sections, click on Patients located in the blue navigation menu at the top of the screen.

Now, click Search Patients in the sub-menu that displays.

Same as before, enter patient criteria to conduct a search. Again, a quick way to do this is to enter the patients first and last name. Then click the Submit button to view the search results.

Once the system refreshes, review the name and information that appear on the screen to confirm that it is the correct patient, then click on the EQRS Patient ID link on the left of your screen to bring up the patient's record.

Once the EQRS system refreshes and generates the patients record, verify that you have selected the correct patient. Then navigate to the left-hand side of the screen and click on the Admissions link. Clicking on the Admissions link will pull up the patient's admit/discharge record.

Next, the system will automatically generate the patient's Admit Date; find the Admit date on the left-hand side of the screen. Click on the date to proceed to the next screen.

After clicking the Admit date, EQRS will refresh, and an Edit button will appear towards the top, right-hand side of the screen, click on this Edit button.

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

Once the Edit button is clicked, EQRS enables the Admission information fields to be edited. Find the fields for the Discharge date and Discharge reason, on the right side of the screen. Enter the discharge date and select Discontinue. Next, click on the submit button to process the discharge.

EQRS will refresh and display a message that reads *Admission record update successful* - this is what you want to see. Additionally, the screen will display the patient's discharge date and reason for discharge. Confirm that the discharge information is correct before moving to another screen.

The next topic for review is how to complete a CMS-2746 Death Notification Form in EQRS. Complete this form whenever a patient that is admitted to the facility has expired OR if the patient was discharged from the system and the patient passed away within 30 days, without being admitted to another facility. It is important to remember that the 2746 form must be completed within two weeks of the patient's date of death.

Once logged into EQRS, the first step to get started on a 2746 Form, is to search for the patient. To do this, click on Patients in the blue navigation menu at the top of the screen.

Now, click Search Patients in the sub-menu that displays.

To search patients, enter patient criteria information, again the easiest way to do this is to enter the patient's first and last name. In this example, "Ima Patient" is entered in the patient criteria fields under first and last name. Once the patient criteria displays to the right of your screen, click the Submit button to do your search.

Once the system refreshes, review the name and information that appear on the screen to confirm that it is the correct patient, then click on the EQRS Patient ID link on the left of your screen to bring up the patient's record.

The system will refresh and display Patient Information on the Manage Patient screen. Review the information again to ensure that this is the

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

correct patient. Next, click on the Edit button in the upper right-hand screen.

Next scroll down to the Medical Information section and click on this section to access the necessary fields to enter the death information.

Once in the Medical Information section, enter the date of death. Next, enter the Death Code Description by either using the drop-down list to view a long list of available death code descriptions or alternatively, you can enter the Death Code, if it is available to you. Once the death information is entered, click the Submit button to save your entries.

Once the death information is submitted on the Medical Information section, then the screen will refresh and display Form 2746 under the Manage Patient tabs on the left-hand side of the screen. To access the 2746 Form, click on Form 2746 on the left-hand side of the screen.

Once the Form 2746 is clicked, the Form will appear on the screen. Notice that information is automatically populated from various screens within the system. Fields 1 to 5 and 7-10 are automatically populated. Field 6, the Place of Death is a required field. In this example, Home is entered as the place of death.

Moving on to field 11, the cause of death, notice that the primary cause of death is already populated, that is because the cause and death has already been entered under the Medical Information section and has carried over to the electronic 2746 Form. Notice that Field 11b, the secondary cause of death is required, this is where you enter if there were any secondary causes of death, select yes or no. If yes, then the secondary cause or causes will need to be entered in the fields below.

Moving down to question 12, which asks if renal replacement therapy was discontinued prior to death, select yes or no? If yes, select an answer for field 12a from the drop-down box and enter the patients last dialysis treatment date. Next, select an answer for field 13, which asks if the discontinuation of dialysis was after a patient or family request.

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

Moving down the form to the Transplant and Hospice section of the 2746 Form. Here fields 14 and 15 ask about the patient's transplant and hospice history, including if the patient received a transplant and/or was on hospice prior to death. Make the necessary selections.

The next section on the form contains fields pertaining to the patient's physician. In field 16, select the patient's physician name from the drop-down box and select the name of the person who is completing the 2746 form and the date the Form was completed. Once the data entry has been completed, click the Submit button to process the Form.

Once the information is submitted and if it has been entered correctly, the system will refresh and display a message that reads *Successfully submitted form 2746*. This is the message you want to see on your screen.

The next topic is how to resolve accretions. In the following slides I will provide a definition for what an Accretion is and how to resolve in EQRS.

Before I provide the definition for an Accretion, I want to highlight a nice feature about EQRS. EQRS communicates regularly with other CMS databases by crosschecking data that is in EQRS. Because EQRS has this feature, accretions are identified. What is an accretion? An accretion, it is when a patient has been identified as having an ESRD status in another CMS database and it shows in that other CMS system that the patient should be associated with your facility, but the patient is currently not admitted to your facility in EQRS. When this occurs, it is considered an Accretion. When an accretion occurs, the facility needs to review it and take action to resolve it.

When resolving Accretions in EQRS, the system presents facility users with three actions that can be taken to resolve the accretion(s). The first option is to accept the accretion. When an accretion is accepted, it means that the facility agrees with the external source and will admit the patient to the facility in EQRS. The second option is to investigate the accretion. Selecting the second option to investigate, will inform other EQRS users in the facility the accretion is being investigated and further research into

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

the problem is needed. Lastly, if you have researched the accretion to find that the patient is in fact not a patient at the facility, then the third option will need to be selected, which is escalating the accretion to your assigned ESRD Network. When the accretion is escalated to the Network, the Network can assist by re-assigning the patient to the correct facility.

Next, let's review how to resolve an Accretion in EQRS. Once logged into EQRS, the first step is to search for the patient. To do this, click on Patients in the blue navigation menu at the top of the screen.

Select Action List from the submenu. It's important to know that Accretions are accessible via the Action List screen in EQRS.

Once EQRS refreshes and the Action screen appears, select Accretion from the Action Type drop down box. Next select the action status you want; do you want to view new Accretions? Ones under investigation, or those that were escalated to the Network? Or accretions that were reassigned to your facility? Make the desired selections and click the Filter button.

Once the filter button is clicked, a new screen will appear with a list of patients that need to be reviewed and potentially admitted to the facility in EQRS. In this example here, this screen has displayed 5 accretions, listing the patient names, the facility the Accretion was assigned to, and the number of days the Accretion has been open. Next, we'll click on the name of the patient who triggered the Accretion, under the Action Type column.

After clicking on a patient, a new screen displays an overview of this Accretion. Click through each section to view and research details related to the accretion.

Once the facility has researched the accretion and agrees that this patient should be admitted to the facility, then the facility EQRS user will need to scroll to the Accretions Action section and select Accept from the Assign Action Status. Again, by selecting Accept, that means that the facility has

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

researched this accretion and agrees that the patient should be admitted to the facility in EQRS.

Next, click on the Submit button to be taken to the next step in the process, which will be to admit the patient to the facility.

Once the accretion status has been assigned to accept, the screen will refresh, and the facility will need to admit the patient to the facility in EQRS and then remove the patient from the Accretions list. For the sake of time, the admit process will not be reviewed again since that was already covered. However, please note that some information about the patient should carry over to the admit screen, which should help save time when admitting the patient to the facility in EQRS.

All right, everyone. That concludes the EQRS demo portion of today's training. A lot has been covered today and since there is not enough time to provide in-depth, step-by-step instructions for everything in EQRS, the next slide provides additional details on how and where to obtain more information about EQRS, which we will review in a minute. As a reminder, please complete a very quick Survey that will appear on your screen after the presentation is over. This Survey can also be completed through a post event email that you will receive after this presentation. Also, a link to the training certificate will be available on the last slide of this presentation and in the follow up email you will receive.

On screen, you can see a screenshot for the MyCROWNWeb.org website. Here is where additional EQRS information, training and education materials can be accessed.

On the Education screen from MyCROWNWeb.org, you can find all available EQRS education materials. From here you can access the downloadable slides from today's presentation, a link of today's presentation, which you can play and pause as needed, quick start guides, as well as the ESRD Systems Data Management Guidelines, along with other materials.