EQRS & NHSN Open Office Hours FAQ

Hosted by Midwest Kidney Network (ESRD Network 11)

Updated: December 2020

GENERAL

- **What phone number should providers/staff call to reach Midwest Kidney Network (ESRD Network 11)?** 651-644-9877
- **What department do I contact at the Network and who do I ask for?**
  - EQRS: Alli (ext. 28) or Cheryl (ext. 29)
  - QIP & Clinical Data Entry: Kristen (ext. 14)
  - Facility Membership Agreements: Cheryl (ext. 29)
  - 5 Diamond Patient Safety Program: Alli (ext. 28)
  - Master Account Holder Information: Kristen (ext. 14) or Alli (ext. 28)
  - Quality Improvement Projects: Candy (ext. 15)
- **How do I contact the QualityNet Helpdesk?** You can reach them by calling 1-866-288-8912 or via email at qnetsupport-esrd@hcqis.org. **Please remember that patient specific information CANNOT be emailed to the QualityNet Helpdesk or to Midwest Kidney Network – it is a CMS Security Violation!**

EQRS

- **Where is the PART in EQRS?** The PART was permanently removed when EQRS went live on 11/9. To find a list of your facility's currently admitted patients, please reference the Patient Roster Report in the EQRS *Reports* tab.
- **I cannot print submitted 2746 or 2728 forms.** EQRS users need to be using Google Chrome exclusively, instead of Internet Explorer.
- **The EQRS system seems to be notably slower than CROWNWeb and EQRS Users are getting "kicked out" frequently. Is there a fix?** You may want to clear your browsing history in Google Chrome, which should allow EQRS to run quicker. If you are still receiving errors, please contact QualityNet Helpdesk to open a ticket.
- **Self-Reporting Race & Ethnicity is "grayed out" in Patient Attributes.** This is a known issue for submitting 2746 forms and manually admitting new ESRD patients. Please contact us at the Network or QualityNet Helpdesk for resolution.
- **How do I change information on a submitted 2728 form?** If a correction (i.e. an incorrect DOB or SSN) needs to be made to a submitted 2728, make all corrections in EQRS first, then contact QualityNet Helpdesk directly, and make a "change request".

- **What if a New ESRD patient runs at your outpatient dialysis facility only one time and then transfers out – do you still complete the 2728?** Yes, whichever outpatient dialysis facility provides the patient with their first ever ESRD treatment, must complete the 2728 form.

- **Can a patient be inpatient (hospitalized) while having their first ESRD treatment?** Yes, a patient can have their first ESRD treatment in a hospital. However, the first outpatient dialysis facility is responsible for completing the patient's 2728.

- **Do AKI (Acute Kidney Injury) patients get admitted in EQRS?** No, AKI patients should not be admitted in EQRS. If or when a patient is deemed ESRD, then the patient may be admitted in EQRS and a 2728 should be completed using the first ESRD treatment date.

- **I noticed that on 2746 forms, it no longer prints the name of the person filling out the form.** For the 2746 form, the *Person Completing This Form* field is left intentionally blank, so that you can instead sign the printed document for the patient's medical record.

- **Where do we find the 2744 in EQRS?** The Annual Facility Survey/2744 form has temporarily been removed from EQRS. The 2744 will be released back to the EQRS database in January 2021. Please continue to watch for communication from Midwest Kidney Network with supporting information and deadlines for submitting the 2744 to the Network.

- **In the reports section in EQRS, I am not able to make a Network Selection, therefore, unable to generate any reports.** This is currently a known issue at the QualityNet Helpdesk. You may open a Helpdesk ticket, but we expect resolution soon with EQRS Reports.

- **How can I stay up to date on news and important information regarding EQRS?** Register to receive Midwest Kidney Network's provider newsletter at www.midwestkidneynetwork.org and you may also attend the monthly EOCT EQRS Town Hall Events, which are typically held on the 4th Thursday of each month.

CLINICAL DATA IN EQRS

- **I have to manually enter clinical data on the same patient each month, is there a resolution?** Ensure that all Patient Attributes have been correctly entered in EQRS and match exactly what is in the facility's patient registration system.

- **What dates should I enter for ESA and iron?** For both in-center and home patients, enter the date that the ESA and/or iron prescription was changed. This date can fall outside of the month of clinical data entry.

- **If we see incorrect dates for PPSV23, PCV13, and Hepatitis B vaccinations, should we correct them? What are the repercussions for doing so?** Yes, you should correct any incorrect vaccination information you see in EQRS. If your clinical data is batched into EQRS, please work with your batch contact to ensure that the information is correct in the batched data or the incorrect information will overwrite your corrections.

- **If a patient is Hepatitis B positive, what do we enter for surface antibody field which is usually a numerical value?** This field can recognize some commonly used words. In this case, you could enter "Positive" into that field.

- **A patient initially dialyzed 3 times per week, but provider writes orders to switch to 2 times per week. How do I record this in EQRS so that the patient's data is counted properly in the QIP?** This change needs to be recorded in the treatment summary. Add a new treatment with 2

in the sessions per week field and the date of the new order as the treatment start date. Do not edit the previous treatment that showed the patient dialyzed 3 times per week.

- **Do we have to report reticulocyte hemoglobin count and nPCR?** Yes, if you have those values for the clinical month, you should enter them. If you do not have those lab results for a patient, you can check the NA box.
- **I have patients that are no longer attending my clinic, but EQRS asks for a clinical depression screening. How can I remove these patients that are no longer attending my clinic? Do I have to complete the depression screening question for patients that were not given a depression screening?** EQRS requires a clinical depression screening response for all patients who treated at your facility during the assessment period, regardless of how long they dialyzed at the facility or whether they are still at the facility. If the patient transferred out of the unit or passed away before their next depression screening was due to be completed, you may select the "Screening for clinical depression not documented, but the facility possesses documentation stating the patient is not eligible" option.
- **Do facilities have to report all infections or just access related?** All infections should be submitted into EQRS, even if they are not related to the dialysis access.
- **Do facilities have to report hospitalizations if the patient is admitted for observation only?** No, you do not need to report observations in EQRS.
- **When entering ultrafiltration rate (UFR) data, I know I am supposed to enter the UFRs from treatments during the week of the patient's Kt/V lab draw. What if the patient misses a treatment during that week?** You only need to enter UFR information for days that the patient received treatment that week. For example, if you have a MWF patient who dialyzes Monday, has Kt/V drawn Wednesday, and misses Friday's treatment, you will only enter the Monday UFR results.
- **If a patient expires before any lab is done in the month, which NA button do we use? Will that count against us in the QIP?** There are two types of NA boxes in the clinical section of EQRS.
  1. At the top of the clinical screen, there is a "No Clinical Data Available for All Collection Types" checkbox. This box should be checked <u>only</u> if the patient did not receive <u>any</u> treatments at your facility during the month. Some examples of this situation would be if the patient was hospitalized or passed away before receiving a treatment. Checking this box will remove all the patient's clinical data for the month, including vascular access data (if applicable).
  2. If the patient received at least one treatment at the facility but missed their labs for any reason, you should use the individual NA boxes next to each clinical field.

The effect of checking an NA box on the QIP depends on the measure and whether the patient dialyzed at that facility for the entire month. Most QIP measures will exclude patients who do not dialyze at the facility for the entire month. In those cases, checking the NA box will not affect the facility's QIP. For more information about the QIP measure inclusion/exclusion criteria, please see the technical specifications on the CMS website:
https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/061_TechnicalSpecifications.

- **Where can I find training materials and other resources for the new COVID-19 module in NHSN?** Please visit the CDC's Dialysis COVID-19 Module website for resources and information: https://www.cdc.gov/nhsn/dialysis/covid19/index.html.

- **I am the administrator of a home-only unit. How do I submit COVID-19 data to the Network?** Home only facilities should enroll in NHSN, if they have not already, to use the new COVID-19 module. If the facility enrolled previously to report vaccination data in the healthcare personnel safety component, they will need to add the dialysis component to access the COVID-19 module. If a facility is experiencing delays enrolling in NHSN, please contact the Network to make arrangements for alternative data submission.

- **Now that my home-only facility is enrolled in NHSN and using the dialysis component, do I need to report infection events such as positive blood cultures?** No, you only need to report data for home dialysis patients in the COVID-19 module.

- **My facility treats both in-center and home dialysis patients. Do I include both groups when I report infection events and COVID-19 numbers?** Please exclude the home dialysis patients from the infection event reporting. That section is for in-center patients only. Please do include ALL your patients, both in-center and home, when you are reporting COVID-19 numbers.

- **In the new COVID-19 module in NHSN, should I be entering cumulative numbers?** No, you should enter just the numbers from the previous week (Wednesday – Tuesday).

- **What are the repercussions if we do not submit NHSN COVID-19 data by Wednesday morning?** If there is a technical reason you are unable to submit the data in NHSN, please contact the Network to make arrangements for submitting the data using a different tool. If you are unable to submit the data by Wednesday morning, you will need to include that week's data with the following data submission to ensure there is no missing data.

- **Do facilities need to confer rights to the COVID-19 data in NHSN?** Yes. With this new module, the Midwest Kidney Network updated their confer rights template which lists the information requested from facilities. As a result, all facilities need to review the updated template and confer rights to the Network group. Even facilities that previously conferred rights will need to do so again since the template has changed.

DIALYSIS FACILITY COMPARE

- **I heard that CMS is retiring the DFC? Is the new Care Compare replacing dialysisdata.org?**
  - CMS has announced that, due to the COVID-19 pandemic, the January, April, and July 2021 refreshes of Dialysis Facility Compare (DFC) will not take place. The October 2020 data will remain on the website until October 2021.
  - The previous Dialysis Facility Compare website is being rolled into the Care Compare website (https://www.medicare.gov/care-compare/) which combines the previous 8 separate provider compare websites. Patients will still be able to find information about dialysis centers on this website.
  - Dialysis facilities will continue to use the dialysisdata.org website to review their preview DFC report prior to the data being released on the public Care Compare

website. The only change is that there will not be updated preview reports in January, April, or July 2021.

- **Do we have to set up an account to access Care Compare site? Are we still going to have quarterly reports like the DFC?** An account is required to access the dialysisdata.org website, but the Care Compare website is public and does not require an account to access it. The quarterly DFC reports are on hold for now, but CMS plans to resume the updates in October 2021. Please watch for information from CMS and the Network on when the updated reports will be available.