

# July 2024 Preview Period Webinar



**Tuesday, July 16, 2024**  
**2–3:30 p.m. Eastern Time (ET)**

End-Stage Renal Disease (ESRD)  
Quality Programs Support (QPS)

# Welcome and Today's Agenda

Topic	Speaker
Welcome & Agenda	<b>Alissa Kapke, MS, Arbor Research</b>
Event Information <ul style="list-style-type: none"><li>Housekeeping Items</li><li>Polling – Which topic is of greatest interest to you?</li></ul>	<b>Steve Hines, PhD, Arbor Research</b>
Payment Year (PY) 2025 Preview Period: Basics <ul style="list-style-type: none"><li>When it is</li><li>Why it matters</li></ul>	<b>Nan Ji, MS, Arbor Research</b>
Payment Year (PY) 2025 Preview Period: What's New? <ul style="list-style-type: none"><li>Measure Changes</li><li>Report Updates</li><li>Updated Resources</li></ul>	<b>Nan Ji, MS</b>
What You Should Do in the Preview Period (Three A's) <ul style="list-style-type: none"><li>Access Your Results</li><li>Assess Your Report</li><li>Ask Questions and Follow Up</li></ul>	<b>Alissa Kapke</b>
Other Things to Prepare for <ul style="list-style-type: none"><li>Upcoming Deadlines</li><li>Available Sources of Support</li></ul>	<b>Alissa Kapke</b>
Additional Live Q&A	<b>Steve Hines, PhD</b>

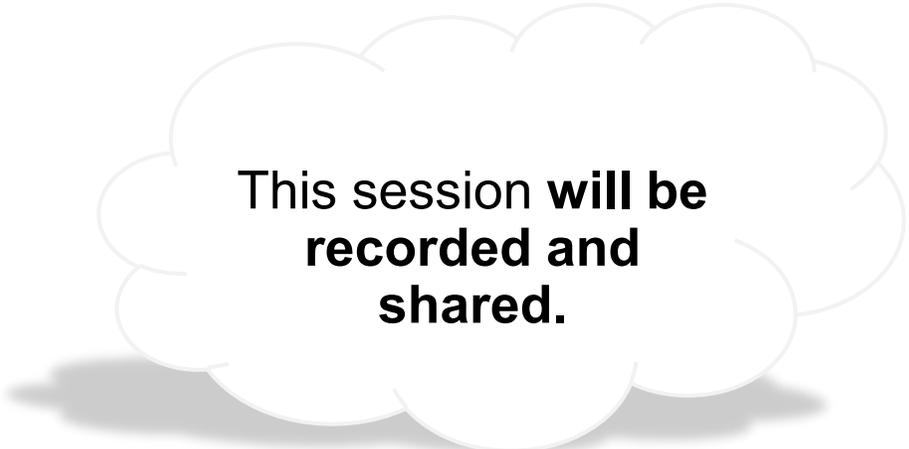
# About Today's Call

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This information is offered as an informal reference and does not constitute official Centers for Medicare & Medicaid Services (CMS) guidance. CMS encourages stakeholders, advocates, and others to refer to the final rules located in the [\*Federal Register\*](#).

# Housekeeping

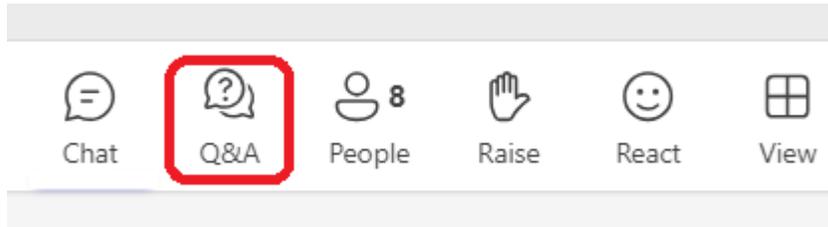
- Participants will be **muted by default**.
- Please note that the **Q&A** feature will be used throughout the session, including for any **questions for our presenters**.
- If you experience any **technical challenges**, you may request support using the **Chat** feature.
- **Following the session**, watch your email for a copy of the slide deck and presentation recording.
- Our project team always is available to answer questions via email at: [ESRDQPS-Admin@arborresearch.org](mailto:ESRDQPS-Admin@arborresearch.org)



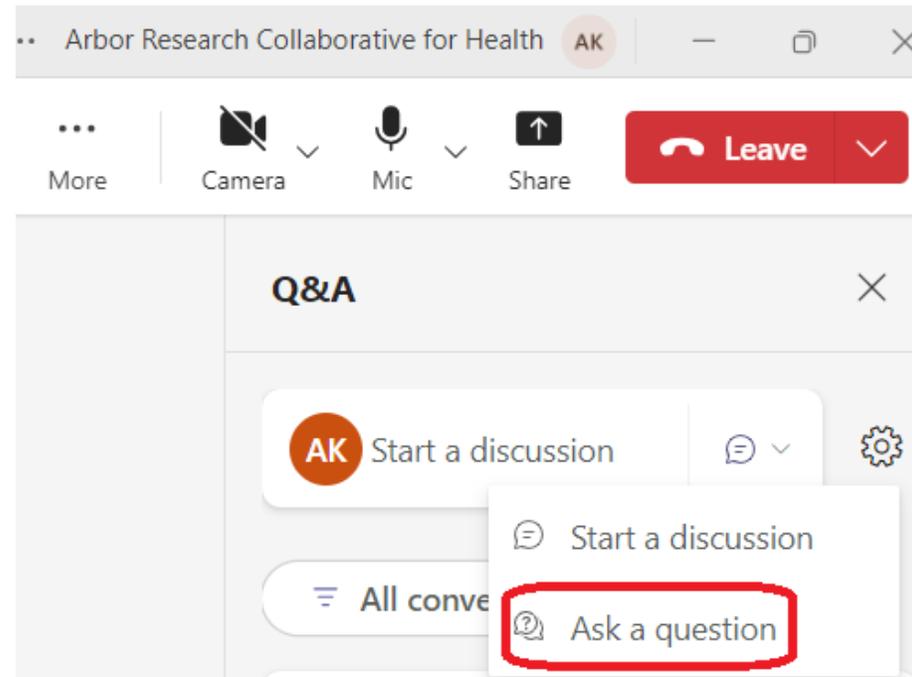
This session **will be recorded and shared**.

# Submitting Questions

- Click on Q&A at top of your screen to submit a question



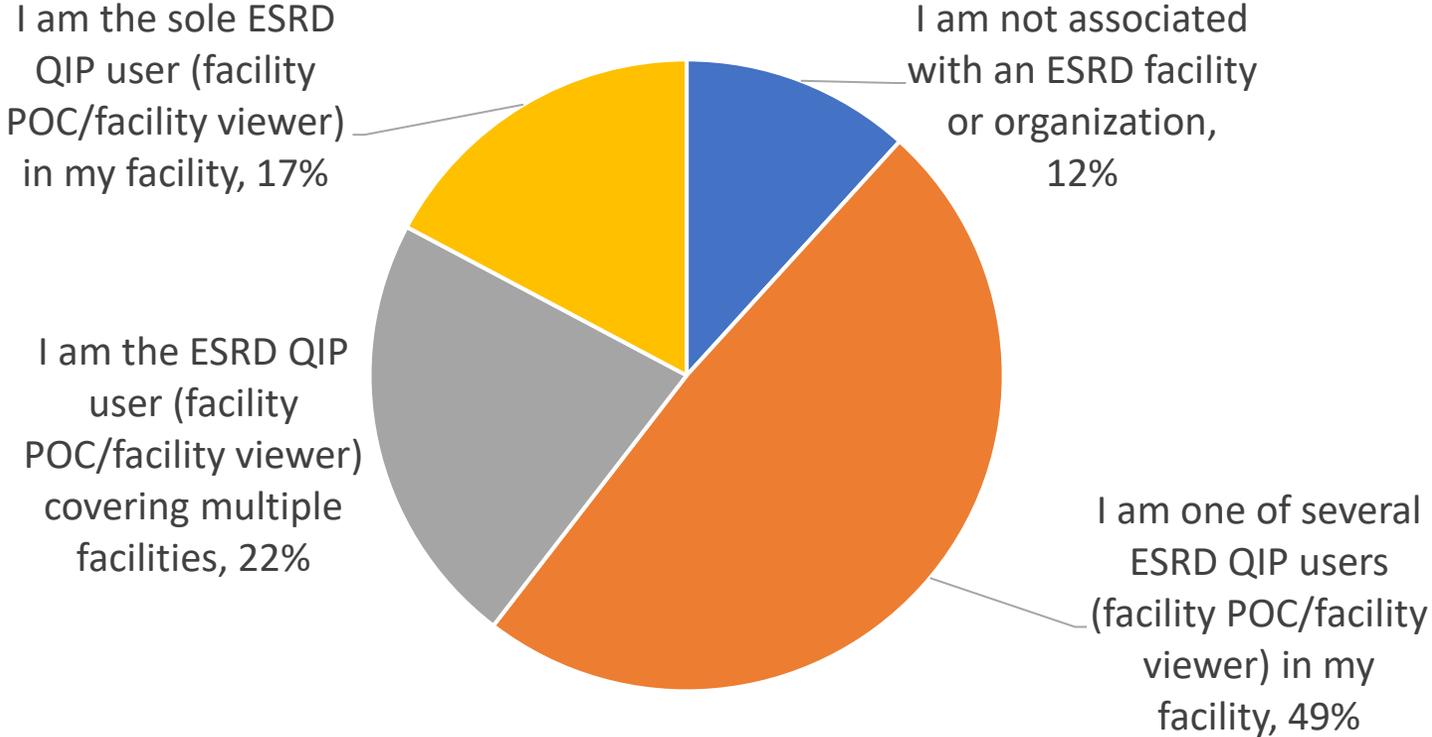
- Under Q&A, select Ask a question.
- Type your question in box on right hand side of your screen.



# Registration Input\*

- Attendees serve in a variety of roles
- We're committed to supporting ALL these groups

\*Based on registrations as of the morning of 7-15-24



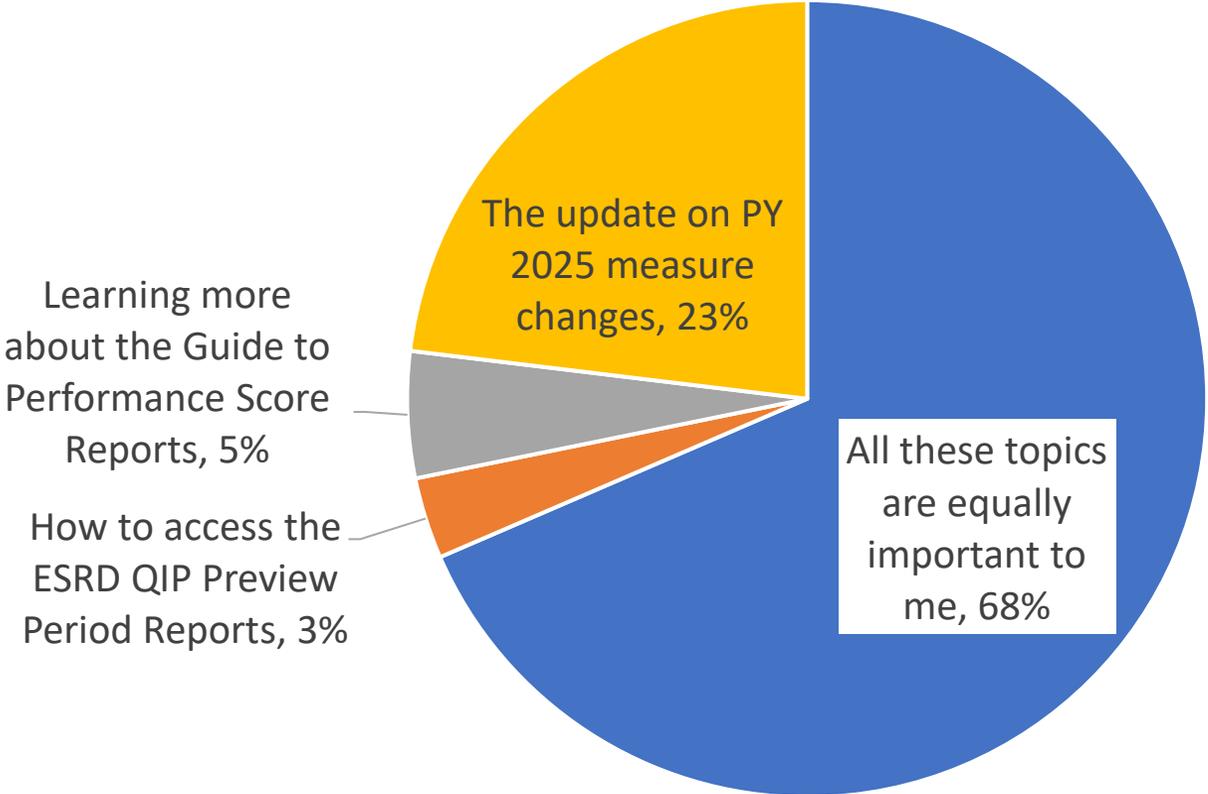
- I am not associated with an ESRD facility or organization
- I am one of several ESRD QIP users (facility POC/facility viewer) in my facility
- I am the ESRD QIP user (facility POC/facility viewer) covering multiple facilities
- I am the sole ESRD QIP user (facility POC/facility viewer) in my facility

# Registration Input\*

- Most registrants want to know more about all event topics
- Measure changes were top individual topic priority

\*Based on registrations as of the morning of 7-15-24

Top Priority Topics

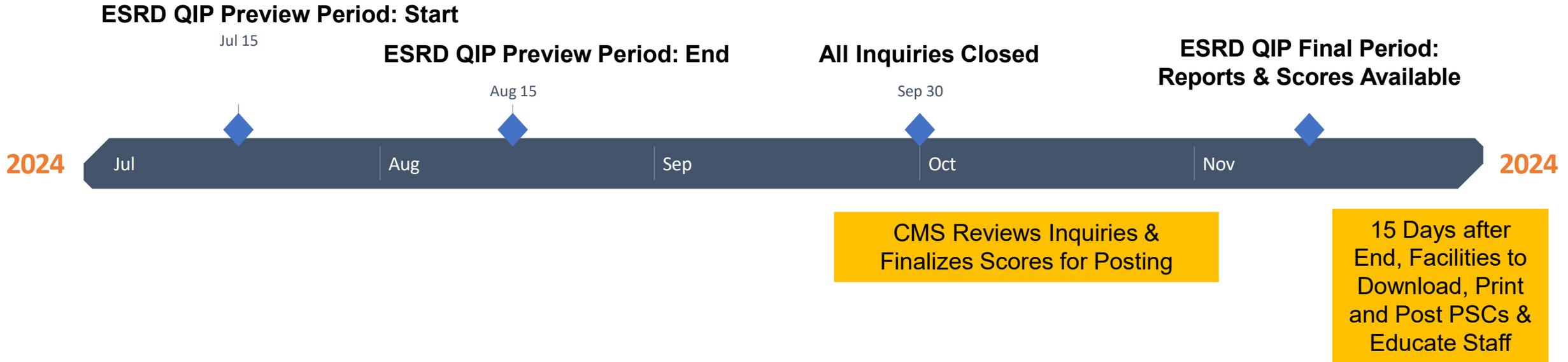




# Payment Year (PY) 2025 ESRD QIP Preview Period: Basics

# When is the PY 2025 Preview Period?

The preview period started on **July 15, 2024**, and ends on **August 15, 2024**, at **11:59 p.m. PT**.



# Why the PY 2025 Preview Period Matters

- Payments depend on scores reported during the Preview Period
- Correcting inaccurate scores **MUST** occur during the Preview Period

Total Performance Score (TPS)	Payment Reduction
100-55 (Score meets or exceeds minimum TPS)	No reduction
54-45 (1 to 10 points below minimum TPS)	0.5%
44-35 (11 to 20 points below minimum TPS)	1.0%
34-25 (21 to 30 points below minimum TPS)	1.5%
24-0 (31 or more points below minimum TPS)	2.0%

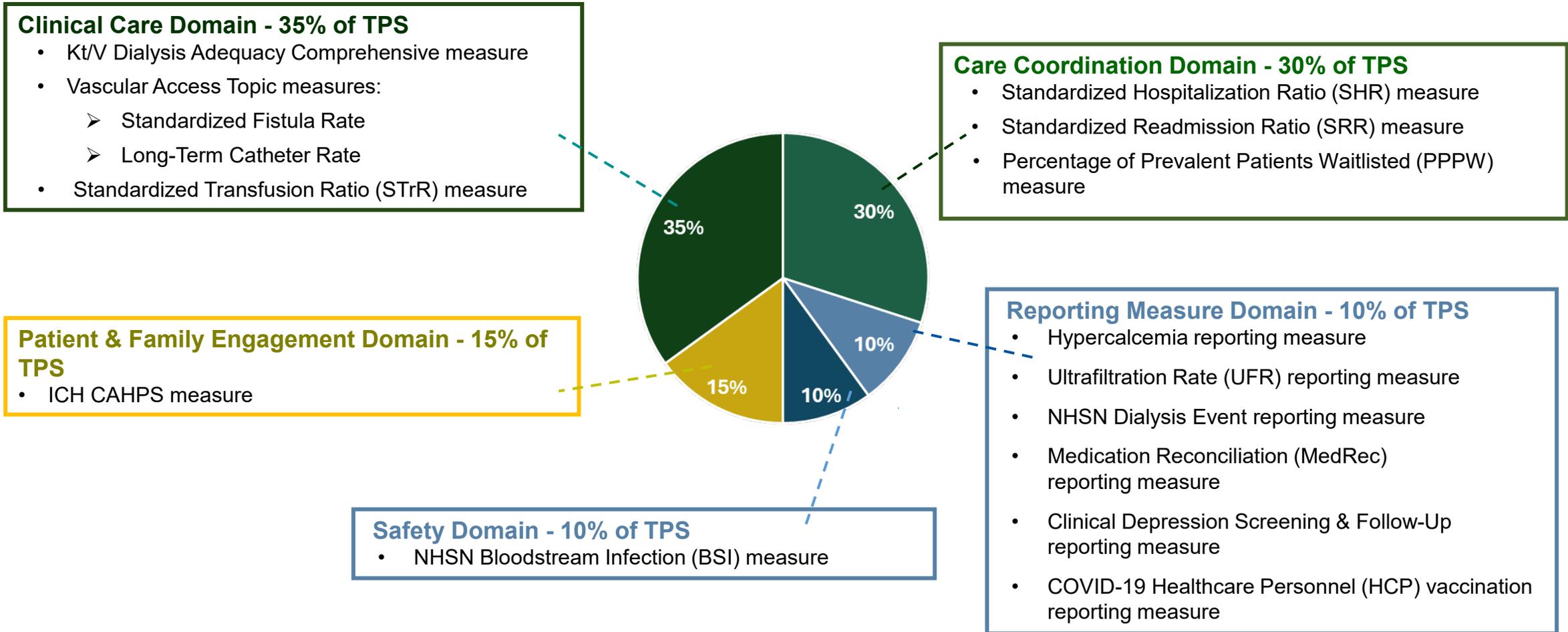


# **PY 2025 Preview Period: What's New?**

# Measure Change Overview

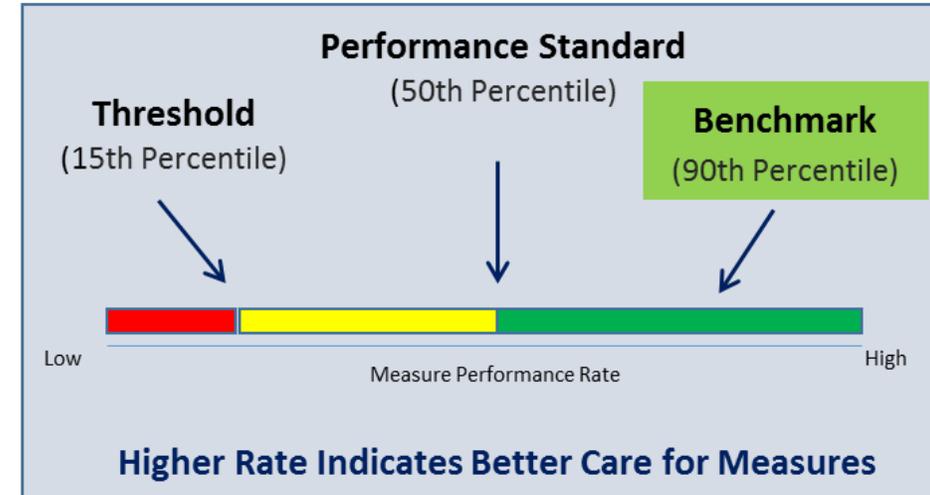
- The **ESRD QIP scoring for PY 2025** will include the following changes from PY 2024:
  - Standardized Transfusion Ratio (STrR) converting from a reporting measure to a clinical measure
  - Hypercalcemia converting from a clinical measure to a reporting measure
  - Addition of COVID-19 Healthcare Personnel (HCP) vaccination reporting measure
  - A new Reporting Measure Domain is adopted which accounts for 10% of Total Performance Score (TPS) calculation
  - All reporting measures are moved to the Reporting Measure Domain and are equally weighted
- For more details, refer to the calendar year (CY) 2023 ESRD Prospective Payment System (PPS) Final Rules posted to the [\*\*Federal Register\*\*](#) website.

# PY 2025 Performance Measures Overview

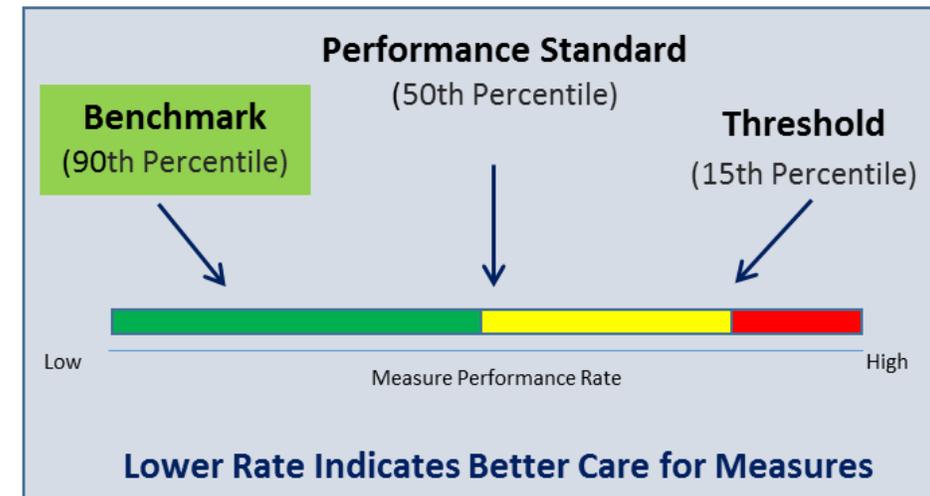


# PY 2025 Clinical Measures: Directionality

- Kt/V Dialysis Adequacy (Comprehensive)
- Vascular Access-Standardized Fistula Rate
- ICH CAHPS
- PPPW



- Vascular Access-Long-Term Catheter Rate
- NHSN Bloodstream Infection
- STrR
- SRR
- SHR



# PY 2025 Preview Performance Score Report (PSR) Updates

- Your PY 2025 Preview PSR contains results and scores based on data submitted for each eligible PY 2025 measure.
- Per the CY 2023 ESRD PPS Final Rule:
  - The mTPS is 55 for PY 2025 to avoid an ESRD QIP penalty.
  - PY 2025 performance standards are calculated using CY 2019 data and CY 2021 data\*.

Additional information is available on the CMS.gov website in the *PY 2025 Guide to the ESRD QIP Performance Score Report*, coming to the [Resources](#) page of CMS.gov.

\*CY 2019 used for measures suppressed in PY 2023 which include SHR, SRR, Kt/V, PPPW, ICH CAHPS, and VAT Topic; CY 2021 used for non-suppressed measures which include STrR and NHSN BSI.

# Preview Period Report Updates



End-Stage Renal Disease Quality Incentive Program - Preview Performance Score Report  
 Payment Year: 2025  
 Facility: 123456



Report Run Date: 06/26/2024

For additional details on PY 2025 ESRD QIP scoring policies, refer to the CY 2023 ESRD PPS Final Rule document on the [Federal Register website](#).

## Clinical Care Domain

Improvement Period: 01/01/2022-12/31/2022

Performance Period: 01/01/2023-12/31/2023

Table 1 - Clinical Care Domain Measures and Measure Topics

Clinical Care Measures/Measure Topics	Improvement Period Numerator	Improvement Period Denominator	Improvement Period Rate/Ratio	Performance Period Numerator	Performance Period Denominator	Performance Period Rate/Ratio	Achievement Threshold	Benchmark	Improvement Score	Achievement Score	Measure Score	Measure Weight (% of Domain)
Standardized Transfusion Ratio	-	-	34.12	-	-	13.75			No Score	10.0	10	41.48%
Kt/V Comprehensive	2336	2446	95.50%	1700	1757	96.76%	94.33%	99.42%	3	5.0	5	0.00%
Vascular Access Type Topic	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	No Score	0.00%
Standardized Fistula Rate	3008631.20	5319561	56.56%	3136735.30	5124630	61.21%	53.29%	76.77%	2	4.0	4	N/A
Long-term Catheter Rate	163	2169	7.51%	118	1804	6.54%	18.35%	4.69%	3	8.0	8	N/A

Eligible Clinical Care Measures/Measure Topics: 3 of 3.0

Weighted Clinical Care Domain Score: **84.444**

**Notes:**

- "N/A" indicates the value is not applicable to the measure/measure topic scoring calculation.

# Report Updates: Sample PSR



End-Stage Renal Disease Quality Incentive Program - Preview Performance Score Report  
 Payment Year: 2025  
 Facility: 123456



Report Run Date: 06/26/2024

## Preview Performance Score

Table 8 - Preview Performance Score Details

Category	Facility Score	State Average Score*	National Average Score*	Facility Measure Weights	Facility Weighted Score
<b>Total Performance Score Before Applicable Deductions+</b>	<b>89</b>	<b>93</b>	<b>91.0</b>	<b>N/A</b>	<b>N/A</b>
<b>Clinical Care Domain (35.00%)</b>	<b>84.444</b>	<b>90.898</b>	<b>87.858</b>	<b>N/A</b>	<b>38.0000</b>
Kt/V Comprehensive	5	6	6.0	0.00%	0.0000
Standardized Transfusion Ratio	10	10	10.0	41.48%	4.1480
Vascular Access Type Topic	No Score	No Score	null	0.00%	-
<b>Care Coordination Measures Domain (30.00%)</b>	<b>100.000</b>	<b>100.000</b>	<b>98.46</b>	<b>N/A</b>	<b>35.0000</b>
Percentage of Prevalent Patients Waitlisted	1	3	4.0	0.00%	0.0000
Standardized Hospitalization Ratio	6	6	5.0	0.00%	0.0000
Standardized Readmission Ratio	4	5	5.0	0.00%	0.0000
<b>Patient And Family Engagement Domain (15.00%)</b>	<b>No Score</b>	<b>No Score</b>	<b>null</b>	<b>N/A</b>	<b>-</b>
ICH CAHPS	1	3	5.0	-	-
<b>Safety Domain (10.00%)</b>	<b>77.833</b>	<b>83.068</b>	<b>82.169</b>	<b>N/A</b>	<b>15.5667</b>
NHSN Bloodstream Infection	6	6	7.0	48.33%	2.8998
<b>Reporting Domain (10.00%)</b>	<b>77.833</b>	<b>83.068</b>	<b>82.169</b>	<b>N/A</b>	<b>15.5667</b>
Clinical Depression Screening and Follow Up Reporting	10	10	10.0	100.00%	10.0000
Hypercalcemia Reporting	4	7	6.0	25.93%	1.0372
Ultrafiltration Rate Reporting	10	10	10.0	32.59%	3.2590
NHSN Dialysis Event	10	10	10.0	23.33%	2.3330
Medication Reconciliation Reporting	9	10	9.0	28.33%	2.5497
Covid 19 Healthcare Personnel Vaccination Reporting	8	5	4.0	null	-

\* State and National Average Scores are unweighted

Minimum Total Performance Score: 55 points  
 Extraordinary Circumstance Exception Approved: None  
 +Total Performance Score Before Applicable Deductions: 89 points  
 Reduction for Noncompliance with CMS EQRS or NHSN Validation Studies: 0 points  
 Total Performance Score: 89 points  
 Total Payment Reduction: No Reduction

# Report Updates: Supplemental Reports

The following reports are also available in EQRS:

- PY 2025 Preview Patient List Report (PLR)
- PY 2025 Preview Performance Score Summary Report (PSSR); only available to Corporate POCs

# Report Updates: Preview Patient List Report (PLR)

## Contents

- List of patients that were included in the measure calculation
  - Each patient identified by name, Medicare Beneficiary Identifier (MBI), MBI History, and EQRS Patient ID
- Indication of which patients were included in the numerator and denominator

## Purpose

- To better understand which data were used in the measure calculations
- To confirm that the data used in the measure calculations are correct

If the data in the report appear incorrect, and not due to an error on the part of the facility:

- Submit an inquiry with specific patient information for clarification/confirmation.  
*The EQRS Patient ID is the only patient identifier that should be used in inquiries.*

# Report Updates Sample PLR

	A	B	C	D	E	F	G	H	I
1	<b>ESRD QIP PY 2025 Preview Patient List Report</b>								
2	<b>Report Parameters</b>								
3	Facility: 000000								
4	Payment Year: 2025								
5	Measurement Period: Improvement 01/01/2022-12/31/2022, Performance 01/01/2023-12/31/2023								
6									
7	<b>Warning!</b> This report contains sensitive information; Personally Identifiable Information (PII) or Protected Health Information (PHI).								
8	Please ensure that these reports are handled appropriately and disposed of properly to avoid any potential PII or PHI exposure or expose the individual to any potential Identity Theft risk								
9	Generated on 05/09/2024 10:04 AM								
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Report Parameters

Catheter Rate

Fistula Rate (Standardized)

KtV Comprehensive

NHSN BSI

NHSN DE

PPPW

Standardized Transfusion Ratio

Standardized Hospitalization Ra

Standardized Readmission Ratio

7/16/2024

Preview Period Webinar

# Report Updates: Sample PLR

	A	B	C	D	E	F	G	H	I	J	K	L
	Patient MBI	Patient ID	Patient First Name	Patient Last Name	MBI History	Measurement Period	Month Included in Denominator	Kt/V Value	Kt/V Date	Kt/V Modality as of Kt/V Reading Date	Included in Numerator?	
1												
2	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
3	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
4	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
5	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
6	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
7	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
8	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
9	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
10	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
11	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
12	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
13	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
14	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
15	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
16	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
17	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
18	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
19	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
20	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
21	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
22	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
23	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
24	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
25	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
26	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
27	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
28	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
29	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
30	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
31	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
32	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
33	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
34	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
35	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
36	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
37	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
38	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
39	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
40	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
41	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	
42	xxxxxx	xxxxxxxx	ABC	XYZ	-	Improvement	2019.9	1.7	09/06/2019	ICHD	Y	

# Report Updates: PSSR

## Contents

- Summarized view of TPS and measure scores for all selected facilities (Summary Measure Score and TPS tab)
- Measure specific results presented in separate tabs

## Purpose

Can be used to view results for multiple facilities

**Note:** PSSRs are available to Corporate POCs, CMS, and CMS Support users.

# Updated PY 2025 Preview Period Materials

- ESRD QIP Preview Period supporting materials are available via the QualityNet website: <https://qualitynet.cms.gov/esrd/esrdqip/resources#tab2>
- PY 2025 supporting materials include the following:
  - *PY 2025 Guide to the ESRD QIP Performance Score Reports*
  - *PY 2025 ESRD QIP User Interface (UI) Quick Start Guide*

File Name	File Type	File Size	
PY 2025 Guide to the ESRD QIP Performance Score Reports (PSRs) (July 2024)	PDF	350 KB	<a href="#">Download</a>
PY 2025 ESRD QIP User Interface Quick Start Guide (July 2024)	PDF	428 KB	<a href="#">Download</a>

# What Every Facility or Organization Should Do in the PY 2025 ESRD QIP Preview Period



# The Three A's:

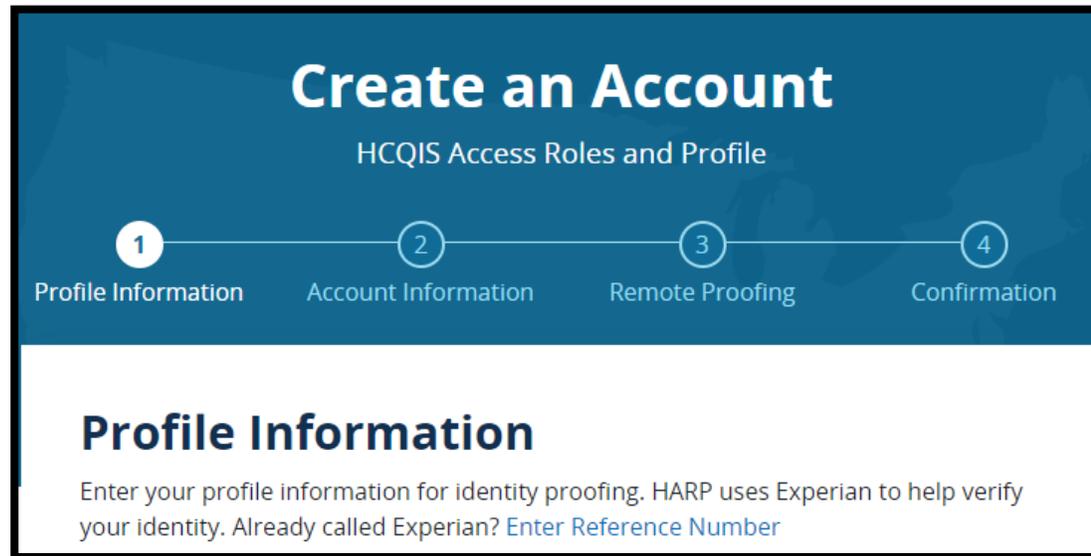
1. **Access** Your Results
2. **Assess** Your Reports
3. **Ask** Questions and Follow Up

# Access Your Results

- Accessing the ESRD QIP User Interface
- Understanding User Roles and Functionality
- Viewing Scores and Feedback

# Establish a HARP Account

**Note: In order to complete remote identity proofing, you will be asked 4 to 5 questions about past addresses, employers, and possibly loans. Please note this is not a credit check.**



- Complete the Healthcare Quality Information System Access Roles and Profile (HARP) account registration process, if needed.
- A single HARP account is needed to access multiple CMS applications.
- Register for a HARP account: <https://harp.cms.gov/register/profile-info>
- Access HARP training materials: <https://mycrownweb.org/harp-training/>

# Access EQRS

Log in to EQRS with HARP account at <https://eqrs.cms.gov/globalapp/>.

- Review the applications listed on the *My Access* screen in EQRS for QIP.
- Submit a request for QIP access, if needed.

The screenshot displays the EQRS Patient Registry interface. At the top, the navigation bar includes the EQRS logo, 'Patient Registry', and the current organization 'ABC Dialysis Facility (123456)' with a 'Change organization' dropdown. The left sidebar contains a 'MANAGE ACCESS' section with 'My access' selected, and a 'PROFILE' section with 'Profile information'. The main content area is titled 'My access' and includes the instruction: 'Click each application to view your approved roles and the organizations you have access to.' Below this instruction are two cards: 'Patient Registry' with a 'View access' link, and 'QIP' with a 'View access' link. The date '7/16/2024' is shown in the bottom left, and 'Preview Period Webinar' is in the bottom center.

# Requesting ESRD QIP UI Role

Click on *Request Access* if you do not see the QIP application under *My access*.



## MANAGE ACCESS

My access

Request access

Pending requests

## PROFILE

Profile information

## My access

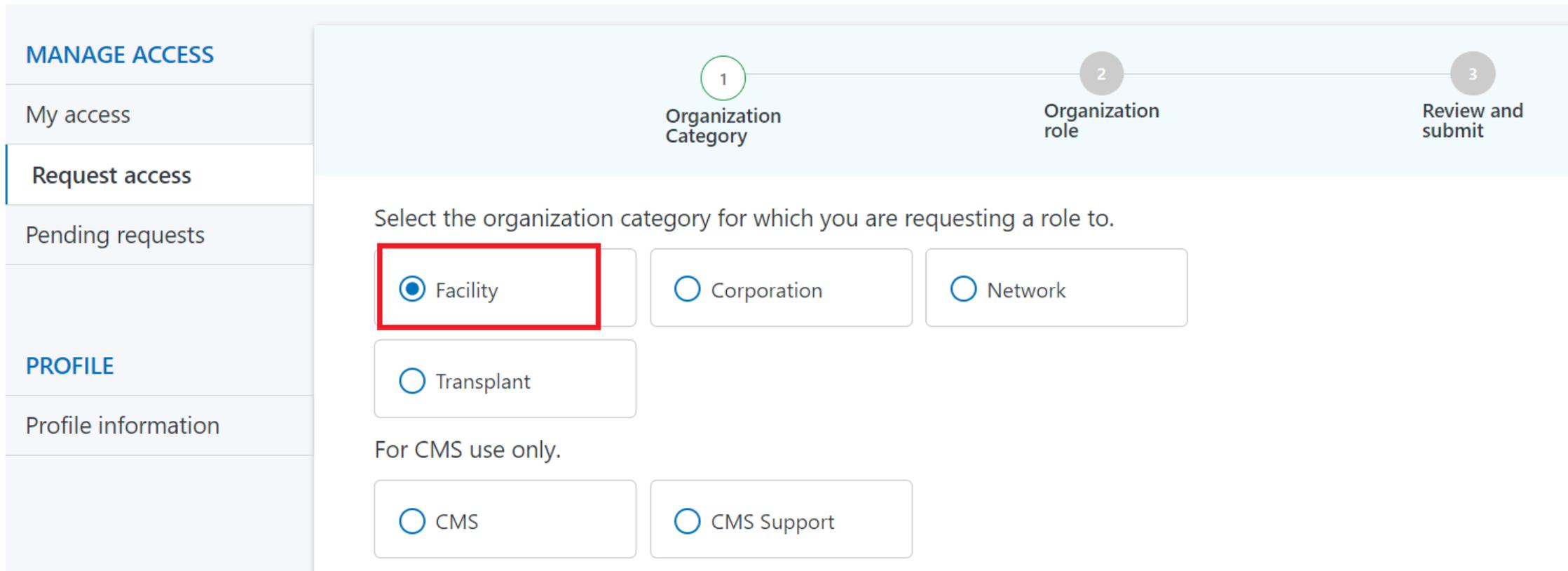
Click each application to view your approved roles and the organizations you have access to.

**Patient Registry**

[View access](#)

# Select Organization

Next, select the organization category for the role you would like to request.



**MANAGE ACCESS**

- My access
- Request access**
- Pending requests

**PROFILE**

- Profile information

1 Organization Category

2 Organization role

3 Review and submit

Select the organization category for which you are requesting a role to.

Facility

Corporation

Network

Transplant

For CMS use only.

CMS

CMS Support

# Select Application

Select the *QIP* application and click *Continue*.

**MANAGE ACCESS**

- My access
- Request access**
- Pending requests

**PROFILE**

- Profile information

1 Organization Category

2 Organization role

3 Review and submit

Select the organization category for which you are requesting a role to.

Facility  Corporation  Network

Transplant

For CMS use only.

CMS  CMS Support

Please select the application you are requesting role to.

Patient Registry  QIP

 **Continue**

# Select Role

- Search for your organization by CCN or facility name in the box below.
- Select one of the three roles below under ‘Select a Role’
- Click Add.

The screenshot displays a web interface for selecting a role. On the left is a sidebar with two main sections: 'MANAGE ACCESS' containing 'My access', 'Request access', and 'Pending requests'; and 'PROFILE' containing 'Profile information'. The main content area features a three-step process flow at the top: 1. Organization Category (highlighted in green), 2. Organization role, and 3. Review and submit. Below the flow is a search instruction: 'Please search by using the organization's CCN, DBA name or NPI number and then select the role you are requesting for.' A search input field contains '123456, ABC Dialysis Center' with a magnifying glass icon. To the right of the search field is a 'Role' dropdown menu with three options: 'Select a Role' (highlighted), 'Facility POC', and 'Facility Viewer'. Below these options is a 'Security Official' label. An 'Add' button is positioned to the right of the dropdown menu.

# ESRD QIP UI Facility Roles

ESRD QIP Role	Scores and Feedback	Inquiries	Reports
<b>Facility Point of Contact (POC)</b> <ul style="list-style-type: none"> <li>A single user can be the Facility POC for multiple facilities.</li> <li>A facility may have multiple Facility POCs.</li> </ul>	View scores	View and submit inquiries	View and download reports: Patient List Report (PLR), Performance Score Report (PSR), Performance Score Certificate (PSC)
<b>Facility Viewer</b> <ul style="list-style-type: none"> <li>A facility may have multiple Facility Viewers.</li> </ul>	View scores	View submitted inquiries	View and download reports (PSR and PSC only)

Note: These are facility-level roles. Additional roles are available for Corporate, Network, CMS, and CMS Support users.

# ESRD QIP UI Corporate Role

ESRD QIP Role	Scores and Feedback	Inquiries	Reports
Corporate POC <ul style="list-style-type: none"><li>An organization may have multiple Corporate POC.</li></ul>	View scores	View and submit inquiries	View and download all reports: PLR, PSR, PSC, and Performance Score Summary Report (PSSR)

Note: A Corporate-level role can view and access materials for all facilities owned by an organization.

# Submit Request

- Click Add to select role.
- Review the selected role and click Submit Request.

**MANAGE ACCESS**

My access

**Request access**

Pending requests

**PROFILE**

Profile information

1 Organization Category

2 Organization role

3 Review and submit

Please search by using the organization's CCN, DBA name or NPI number and then select the role you are requesting for.

Search for organization

123456, ABC Dialysis Facility

Role

Facility POC

Add

**Review selected roles**

Organization	Role requested	CCN	NPI	Actions
ABC Dialysis Facility	Facility POC	123456	0123456789	Remove

< Previous

Submit request

Note: Access step-by-step HARP account registration and EQRS role request instructions via <https://mycrownweb.org/harp-training/>.

# Accessing the ESRD QIP UI

Under the QIP application, select *View access*.

**MANAGE ACCESS**

- My access
- Request access
- Pending requests

**PROFILE**

- Profile information

## My access

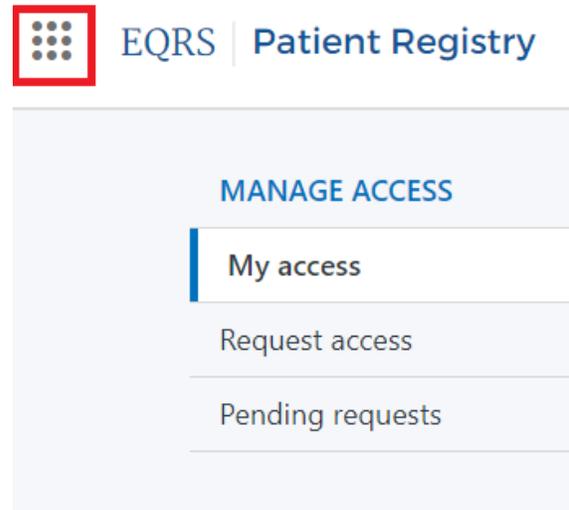
Click each application to view your approved roles and the organizations you have access to.

**Patient Registry**  
[View access](#)

**QIP**  
[View access](#)

# Accessing the QIP UI

If you were previously signed in to the Patient Registry, you must first toggle to the QIP application by clicking the 9 dots in upper left-hand corner.



In the dropdown box, under *CHOOSE APPLICATION*: select QIP



# Accessing the QIP UI

After selecting QIP, you will be prompted to start typing or click on the down arrow and select the CCN you wish to view. Once you select the CCN, select *Go to QIP*

---

Switch to QIP ×

---

Please select an organization you want to view in the QIP application:

Search by organization name, DBA name, or CMS Certification Number (CCN):

× ^

---

Cancel Go to QIP >



# Welcome to the ESRD QIP UI

The ESRD QIP UI is now viewable. Navigate to the desired tabs.

The screenshot displays the ESRD QIP UI interface. At the top, there is a header with the EQRS logo, the text "Quality Incentive Program", and the facility name "ABC DIALYSIS FACILITY (123456)" with a "Change organization" link. Below the header is a navigation sidebar with three tabs: "Scores and Feedback", "Preview Period Inquiries", and "View/Download Reports". The "Scores and Feedback" tab is highlighted with a red border. The main content area shows a "Welcome to the ESRD Quality Incentive Program (QIP)" message. Below this is a "Preview Period PY2025" section with a summary of the start and end dates: "Start Date: 07/15/2024, 12:00 AM EDT\*" and "End Date: 08/14/2024, 11:59 PM PDT\*", followed by "XX days YY hours" and "REMAINING IN THE PREVIEW PERIOD FOR SUBMITTING INQUIRIES". Below this is a "QIP Scores & Feedback" section with a description: "Below you'll find a list of facilities that are in your purview. Choose a facility to view QIP scores and results." and a list of filter options: "Filter Facilities", "Facilities", "Runs", and "Score Details". At the bottom of the page, there is a date "7/16/2024" and a "Preview Period Webinar" link.

\*Dates subject to change

# Scores and Feedback Overview

- Provides users with the ability to view the following:
  - Total Performance Score (TPS)
  - Measures Summary (an overview of the measures that contribute to a TPS)
- The Scores and Feedback screen provides an overview of score details, including individual measure scores, TPS, and payment reduction percentage.
- Users can:
  - See results for facilities within their purview.
  - Set filters to help refine search results.
- Users with purview over multiple facilities can view the Scores and Feedback summary for one facility at a time.
- All ESRD QIP UI roles can view Scores and Feedback.

# Using Filter Facilities Option

- Users with access to multiple facilities can set filters to assist with search efforts.
  - Facilities within a user's purview are automatically displayed in the table of results.
- Enter Facility Name, Facility CMS Certification Number (CCN), or Dialysis Organization.
- Click *Apply Filter*. (Click *Clear Filter* to remove all filters and results.)

Filter Facilities

Facility Name, Facility CCN or Dialysis Organization

Your Dialysis Facility, 111111, Dialysis Organization Name

Enter at least 3 characters to search for a facility

Payment Year \* 2025 Network Select a Network State Select a State

Clear Filter Apply Filter

# Select Facility

- The ESRD QIP UI automatically displays a list of facilities within a facility-level user's purview.
- The *Scores and Feedback* screen displays score details for one facility at a time.
- Users can switch between facilities by clicking the radio button next to the facility information.

## Facilities

This is a list of all the facilities you have permission to view. Choose a facility and scroll down to view all available QIP data for that facility.

Select	Facility CCN	Facility Name	Network Name	Organization	State
<input checked="" type="radio"/>	123456	ABC DIALYSIS CENTER	Network 99	ABC Dialysis, Inc	AK

# View Facility Run

Review the information in the *Runs* section to ensure that you are accessing the most recent results, or results pertaining to the run you wish to review.

Runs: Facility 123456, ABC Dialysis Center

Below is a list of all available data for Facility 123456, ABC DIALYSIS. Please select a run and scroll down to view the run's score details.

Select	Score Run ID	TPS	Run Type	Run Status	Run Date
<input checked="" type="radio"/>	6	N/A	Preview	Completed	08/03/2023

Page Size: 10

Showing 1 to 1 of 1 results

Navigation: << Prev 1 Next >>

# Review Total Performance Score (TPS)

Navigate to the *Score Details* section to view a synopsis of the TPS and Measure Summary.

## Score Details: Run 2025

Run Type: Preview

Run Date: 04/30/2024

Payment Year: 2025

Total Performance Score:

**59**

OUT OF 100

Reduction %:

**0.0%**

<b>Facility:</b>	ABC Dialysis Center
<b>CCN:</b>	123456
<b>Network:</b>	Network 99
<b>State:</b>	AK
<b>Certification Date:</b>	01/01/1990
<b>Organization:</b>	ABC Dialysis, Inc
<b>Org. Code:</b>	ABC
<b>Services Provided:</b>	<ul style="list-style-type: none"><li>• In-Center Hemodialysis</li><li>• Accepts Pediatrics</li><li>• Isolation Stations</li><li>• Accepts Transients</li><li>• Home Peritoneal Dialysis Training and Support</li><li>• In-Center Peritoneal Dialysis</li><li>• Home Hemodialysis Training and Support</li></ul>

# Review Measures Summary

Navigate to the *Measure Summary* section for a synopsis of the measures and scores contributing to your facility's performance. Measure rates and/or numerators and denominators are provided in your PSR in the View/Download Reports section.

## Measure Summary

Measure Name	Score	Measure Type
Clinical Depression Screening and Follow Up	10	Reporting
COVID-19 Healthcare Personnel (HCP) Vaccination	10	Reporting
Fistula Rate	0	Clinical
Hypercalcemia	9	Reporting
ICH CAHPS	No Score	Clinical
Kt/V Comprehensive	4	Clinical
Long Term Catheter	5	Clinical
Medication Reconciliation	10	Reporting
NHSN Bloodstream Infection	3	Clinical
NHSN Dialysis Event	10	Reporting
Percentage of Prevalent Patients Waitlisted	3	Clinical
Standardized Hospitalization Ratio	1	Clinical
Standardized Readmission Ratio	3	Clinical
Standardized Transfusion Ratio	8	Clinical
Ultrafiltration Rate	10	Reporting

Page Size

Showing 1 to 15 of 15 results

25

« Prev 1 Next »

# Corporate Users: Scores and Feedback Screen

- The steps to access the *Scores and Feedback* screen are the same for all users.
- The *Filter Facilities* section is automatically expanded for corporate-level users.
- Enter a search criteria to display data in the *Facilities* section.

## QIP Scores & Feedback

Below you'll find a list of facilities that are in your purview. Choose a facility to view QIP scores and results.

### Filter Facilities

Facility Name, Facility CCN or Dialysis Organization

  
Enter at least 3 characters to search for a facility

Payment Year \*  Network  State

### Facilities

This is a list of all the facilities you have permission to view. Choose a facility and scroll down to view all available QIP data for that facility.

Select	Facility CCN	Facility Name	Network Name	Organization	State
<input checked="" type="radio"/>	111111	ABC Dialysis Center of Florida	Network 7	ABC Dialysis Organization	FL
<input type="radio"/>	222222	XYZ Dialysis Center of Florida	Network 7	XYZ Dialysis Organization	FL

◀ Prev 1 Next ▶

# Scores and Feedback Summary

- The *Scores and Feedback* screen provides an overview of the following:
  - TPS
  - Measures Summary
- To access:
  1. Log in to EQRS with HARP account via <https://eqrs.cms.gov/globalapp/>.
  2. Click on QIP Scores.
  3. Select Facility, if needed.
  4. Review TPS and Measures Summary.
- All ESRD QIP UI roles can view Scores and Feedback.

# Assess Your Reports

- Reports Description
- Viewing/downloading Reports

# View/Download Reports Overview

- Provides users with the ability to view and download the following reports (based on role and availability):
  - PSR
  - PLR
  - PSSR (available for Corporate POCs, CMS and CMS Support users)
  - PSC (available after the preview period)
- All ESRD QIP roles can view and download reports (based on availability).
- Contact the CCSQ Service Center to obtain reports that are not listed in the ESRD QIP UI.

# Reports Description

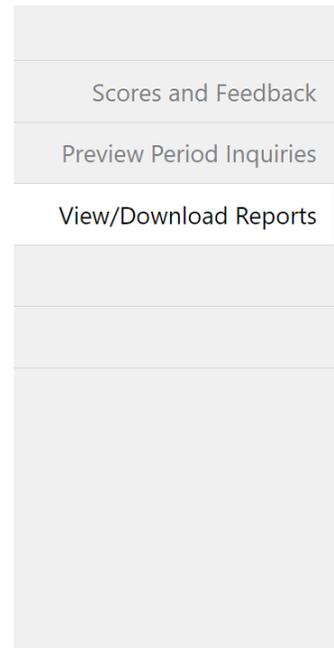
Report	Report Description
<b>PSR</b>	Includes facility CCN, achievement and improvement scores for each clinical measure, scores for each reporting measure, adjusted performance rates or ratios for clinical measures, performance standards applied, state average and national average measure scores, TPS, text indicating ECE months applied (if applicable), and payment reduction percentage.
<b>PLR</b>	Lists all patients whose data is used to calculate a facility's ESRD QIP measure rates, and details associated with these patients, including information on whether the patient or patient-month was used in the numerator calculation, and whether the data were used in the improvement or achievement period.

# Reports Description

Report Name	Report Description
<b>PSSR</b>	This Excel workbook includes a summary measure score tab displaying facility name and CCN, certification date, facility ownership information, individual measure scores, facility TPS, national average TPS, and payment reduction percentage. Additionally, individual measure tabs display measure level details such as achievement, improvement and overall measure scores, national average measure score, unadjusted and adjusted performance rate, national median rate, and number of eligible cases.
<b>PSC</b>	Contains the facility's name, address, CCN, and the TPS for the given PY and how it compares to the national average TPS. There is an English and Spanish version for each facility. This is only available during the Final period.

# Click View/Download Reports

- Click on View/Download Reports.
- Enter your Facility name, CCN, or organization.
- Select a Report Name.
- Click *Apply Filter*.



## View/Download Reports

Below you'll find a list of facility reports that are in your purview. Choose a particular report to view or download.

A search form titled 'Select your Facility and Payment Year'. It includes a checkbox for 'Organizational level search', a search input field for 'Facility Name, Facility CCN or Dialysis Organization', and three dropdown menus for 'Payment Year' (2025), 'Period' (PREVIEW), and 'Report Name'. The 'Report Name' dropdown is open, showing options 'Select a Report', 'PLR', and 'PSR'. The 'PSR' option is highlighted with a red box. There are 'Clear Filter' and 'Apply Filter' buttons at the bottom.A summary of the search criteria. It shows three input fields: 'Payment Year' with '2025', 'Period' with 'PREVIEW', and 'Report Name' with 'PSR'. Below these are two buttons: 'Clear Filter' and 'Apply Filter'. The 'Apply Filter' button is highlighted with a red box and a red arrow pointing to it from the right.

# Select Facility and Payment Year

- Users who have access to multiple facilities can set filters to assist with search efforts.
- Enter Facility Name, Facility CCN or Dialysis Organization.
- Select a report name and click on Apply Filter.

Select your Facility and Payment Year ^

This is an Organizational level search. **Choose additional filters.**

Facility Name, Facility CCN or Dialysis Organization\*

ABC Dialysis Center, 123456, ABC Dialysis Corporation 

Enter at least 3 characters to search for a facility

Payment Year\*

Period\*

Report Name



# Select Available Reports

Click the hyperlink of the report you would like to view to download the file.

## Select available reports ^

Below is a list of reports for payment year 2025 available for view or download. Please note that you may need to download [Adobe Acrobat Reader](#) to view the data.

Facility Name	CCN	Report Name	PY	Period	Available Reports
ABC Dialysis Center	123456	Performance Score Summary Report	2025	preview	<a href="#">ALL-CCNS-PREVIEW-PSSR-PY2025.xlsx</a>

Page Size

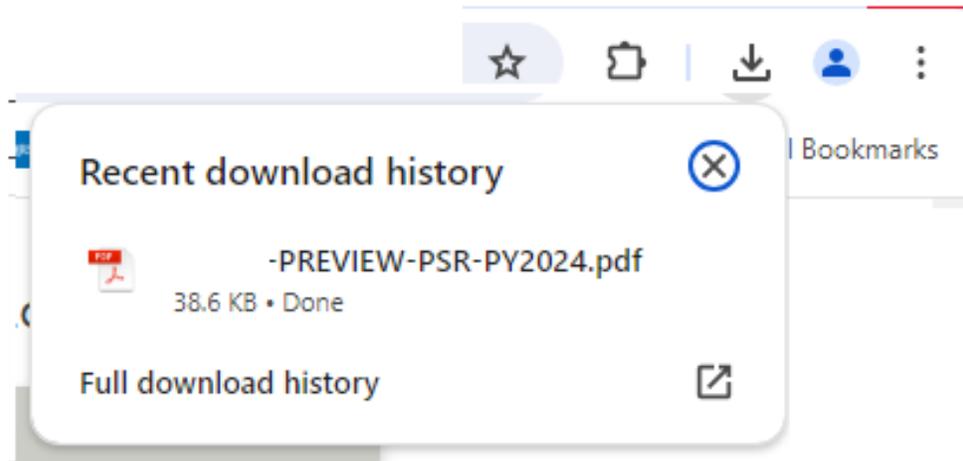
Showing 1 to 1 of 1 results

10

« Prev 1 Next »

# Report Downloads

You can see the downloaded report at the bottom of your browser. Click on the downloaded report or desired action to open or save the file.



# Review Preview Period Reports

For additional details on PY 2025 ESRD QIP scoring policies, refer to the CY 2023 ESRD PPS Final Rule documents, published in the *Federal Register* [website](#).



End-Stage Renal Disease Quality Incentive Program - Preview Performance Score Report  
 Payment Year: 2025  
 Facility: 123456



Report Run Date: 06/26/2024

## Clinical Care Domain

Improvement Period: 01/01/2022-12/31/2022

Performance Period: 01/01/2023-12/31/2023

Table 1 - Clinical Care Domain Measures and Measure Topics

Clinical Care Measures/Measure Topics	Improvement Period Numerator	Improvement Period Denominator	Improvement Period Rate/Ratio	Performance Period Numerator	Performance Period Denominator	Performance Period Rate/Ratio	Achievement Threshold	Benchmark	Improvement Score	Achievement Score	Measure Score	Measure Weight (% of Domain)
Standardized Transfusion Ratio	-	-	34.12	-	-	13.75			No Score	10.0	10	41.48%
Kt/V Comprehensive	2336	2446	95.50%	1700	1757	96.76%	94.33%	99.42%	3	5.0	5	0.00%
Vascular Access Type Topic	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	No Score	0.00%
Standardized Fistula Rate	3009831.20	5319561	56.56%	3136735.30	5124830	61.21%	53.29%	76.77%	2	4.0	4	N/A
Long-term Catheter Rate	163	2109	7.51%	118	1804	6.54%	18.35%	4.69%	3	8.0	8	N/A

Eligible Clinical Care Measures/Measure Topics: 3 of 3.0

Weighted Clinical Care Domain Score: 84.444

**Notes:**

- "N/A" indicates the value is not applicable to the measure/measure topic scoring calculation.

# Corporate Users: Reports Screen

- The steps to access the *View/Download Reports* screen are the same for all users.
- The *Select your Facility and Payment Year* section is automatically expanded for corporate-level users.
- Enter facility details to display reports for a single facility.
- Select: “This is an organizational-level search.” This displays reports for multiple facilities and reveals additional filters to focus the search on a particular state, Network, report type, or a combination of the three.

# Corporate Users: Reports Search

## Single Facility

2024 PREVIEW Select a Report

Organization Name\* Network State

Select a Network Select a State

Clear Filter Apply Filter

Select available reports

Below is a list of reports for payment year 2022 available for view or download. Please note that you may need to download [Adobe Acrobat Reader](#) to view the data.

Displaying first 100 facilities only. Please refine your search.

Facility Name	CCN	Report Name	PY	Period	Available Reports
ABC DIALYSIS CENTER	001111	Performance Score Summary Report	2024	preview	001111-PREVIEW-PSSRPY2023.xlsx
ABC DIALYSIS CENTER	012501	Performance Score Report	2024	preview	012501-PREVIEW-PSR-PY2023.xlsx
ABC DIALYSIS CENTER	012501	Patient List Report	2024	preview	012501-PREVIEW-PLR-PY2023.xlsx
ABC DIALYSIS CENTER	012502	Performance Score Report	2024	preview	012502-PREVIEW-PSR-PY2023.xlsx
ABC DIALYSIS CENTER	012502	Patient List Report	2024	preview	012502-PREVIEW-PLR-PY2023.xlsx
ABC DIALYSIS CENTER	012505	Performance Score Report	2024	preview	012505-PREVIEW-PSR-PY2023.xlsx
ABC DIALYSIS CENTER	012505	Patient List Report	2024	preview	012505-PREVIEW-PLR-PY2023.xlsx
ABC DIALYSIS CENTER	012506	Performance Score Report	2024	preview	012506-PREVIEW-PSR-PY2023.xlsx
ABC DIALYSIS CENTER	012506	Patient List Report	2024	preview	012506-PREVIEW-PLR-PY2023.xlsx

## Organizational-Level

### Single facility search.

Select your Facility and Payment Year

This is an Organizational level search. Please choose additional filters.

Facility Name, Facility CCN or Dialysis Organization\*

Payment Year\* Period\* Report Name

2024 PREVIEW Select a Report

Clear Filter Apply Filter

Select available reports

Below is a list of reports for payment year 2022 available for view or download. Please note that you may need to download [Adobe Acrobat Reader](#) to view the data.

Facility Name	CCN	Report Name	PY	Period	Available Reports
ABC DIALYSIS CENTER	123456	Performance Score Summary Report	2024	preview	001111-PREVIEW-PSSR-PY2023.xlsx

# View/Download Reports Summary

The *View/Download Reports* screen displays reports based on user roles and availability. To access:

1. Log in to EQRS with the HARP account via <https://eqrs.cms.gov/globalapp/>.
2. Click on QIP Scores.
3. Click on View/Download Reports.
4. Select Facility, if needed.
5. Select available reports.
6. View or download selected reports.

# Ask Questions and Follow-Up: How to Submit, Save, and Reply to Inquiries

- Inquiry Process Overview and Recommendations
- Submitting Inquiries
- Checking the Status of Inquiries
- Inquiries Summary

# Inquiries Overview

- The Preview Period Inquiries section allows users to submit inquiries during the 30-day preview period regarding your facility's QIP scores.
- Users may submit and reply to as many inquiries as necessary during the preview period.

The screenshot shows the EQRS Quality Incentive Program interface. At the top, there is a navigation bar with the EQRS logo, the text "EQRS | Quality Incentive Program", and "CMS Support (QIP) Change organization". Below this is a sidebar with three menu items: "Scores and Feedback", "Preview Period Inquiries" (highlighted with a red box), and "View/Download Reports". The main content area is titled "QIP Inquiries" and contains the text: "You may submit an inquiry to CMS in order to gain more information about your QIP scores, or attempt to affect your QIP score, if you believe that the score is incorrect." Below this text is a dropdown menu showing "Preview Period PY2025" with an upward arrow.

# Inquiries Overview (cont.)

- Inquiries are submitted by Facility and Corporate POCs. Other users can view submitted inquiries based on their role:
  - Facility-level users: View inquiries submitted for a facility within their purview.
  - Corporate-level users: View inquiries submitted for all facilities within an organization.
- Facility and Corporate POCs can draft and save inquiries, but saved inquiries are not viewed by other users and are not “Submitted.”
- Users will receive an email notification once an inquiry has been updated; however, users are encouraged to check on the inquiry’s status in the QIP UI.

# Inquiries Overview (cont.)

- Inquiries are submitted through an email-like form in the ESRD QIP UI and includes the following fields:
  - From
  - CC
  - Subject (50 characters maximum)
  - Message (25,000 characters maximum)
  - File attachment (10 megabytes per message)
- Use the ESRD QIP UI to submit and reply to preview period inquiries.
  - Responses to inquiries can be submitted after the close of the preview period.
- The “New Inquiry” submission feature will be disabled once the preview period ends.

# Inquiry Submission Recommendations

- Research and submit inquiries as soon as possible to provide enough time for necessary communications.
- Include as much information as possible and add the following:
  - CCN(s) of the facility/facilities that are believed to be impacted
  - When applicable, evidence of organizational-level issue or error being reported
  - Indication of which records and why if questioning the use of specific data
    - Use the EQRS ID included in the PLR when referring to specific patients.
  - Attachments (optional)
- Direct questions about NHSN data to the NHSN Help Desk at (877) 681-2901 or [nhsn@cdc.gov](mailto:nhsn@cdc.gov).

# Click Preview Period Inquiries

**NOTE: Start date, end date, and days and hours remaining will be displayed once preview period begins**

The screenshot shows the 'QIP Inquiries' section of a web application. On the left is a navigation menu with three items: 'Scores and Feedback', 'Preview Period Inquiries' (which is selected), and 'View/Download Reports'. The main content area is titled 'QIP Inquiries' and contains a sub-header 'Preview Period PY2025'. Below this, there is a 'Start Date:' and 'End Date:' section with 'days' and 'hours' labels, and a note 'REMAINING IN THE PREVIEW PERIOD FOR SUBMITTING INQUIRIES'. A blue button labeled 'Create new inquiry' is highlighted with a red rectangular box. Below this is a 'Filter Inquiries' section with a search input field for 'Facility Name, Facility CCN or Dialysis Organization' and a search icon. At the bottom, there are three input fields: 'Inquiry ID', 'Inquiry Subject', and 'Inquiry Status' (with a 'Select Inquiry Status' dropdown menu).

- Navigate to Preview Period Inquiries in QIP UI.
- Click on Create new inquiry to submit an inquiry during preview period.

# Enter Message

Enter message under *Create an Inquiry*.

- Locate a facility in your purview.
- *From* field is pre-populated and cannot be changed.
- *CC* field is optional.
- *Subject* field is optional but recommended (note: do not enter PHI/PII in subject line).
- *Message* field is mandatory.

The screenshot shows a web form titled "Create an Inquiry". It contains several input fields: a search field for "Facility Name, Facility CCN or Dialysis Organization" with a search icon and a magnifying glass; a "From" field pre-filled with "TestUser@testemail.com"; an empty "CC" field; and an empty "Subject (50 Characters Limit)" field. The "Message" field is a large text area with a red border, containing the placeholder text "Type your inquiry here." Below the message field is an "Upload an attachment" button, followed by a note: "Only the following file types can be accepted: .pdf, .jpg, .png, .bt, .tiff, .xlsx, .xls, .docx, .doc, csv, .zip. Total file size limited to 10 MB per message." At the bottom are three buttons: "Clear Form", "Save as Draft", and "Send Inquiry".

# Attach Supporting Documents

If you would like to attach supporting documentation with your inquiry, select *Upload an attachment*.

- Browse for the desired file(s).
- Click Open to attach the file(s).

Message \* (25000 Characters Limit)

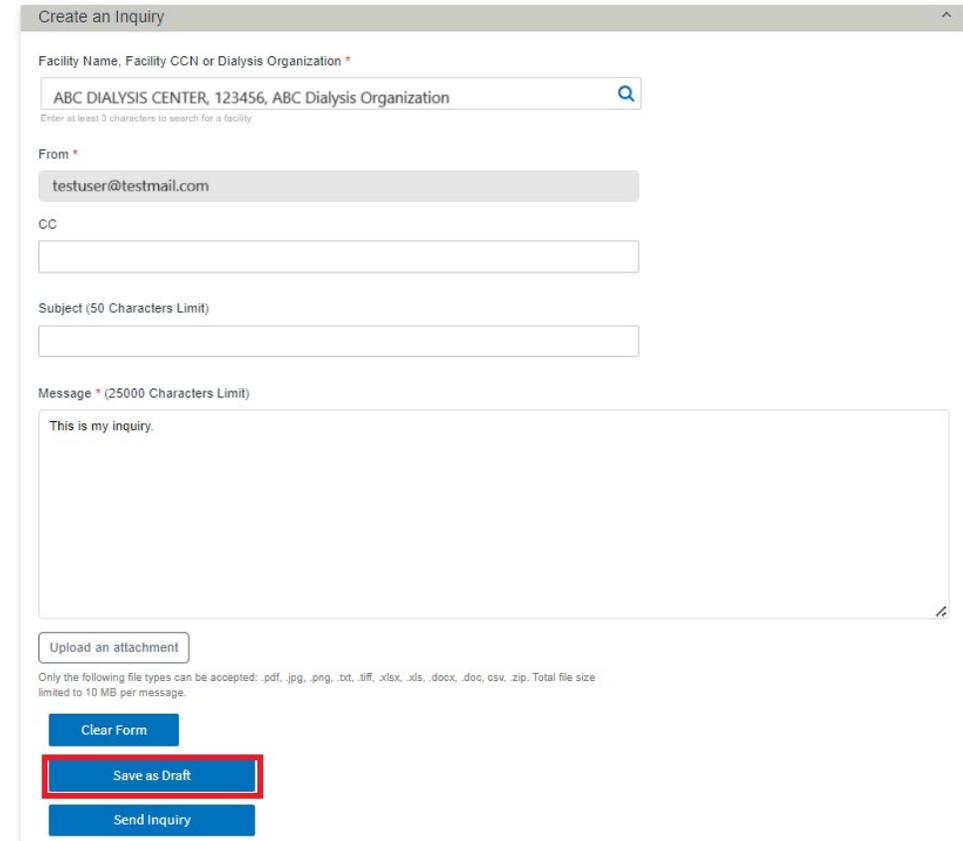
Type your inquiry here.

Upload an attachment

Only the following file types can be accepted: .pdf, .jpg, .png, .txt, .tiff, .xlsx, .xls, .docx, .doc, csv, .zip. Total file size limited to 10 MB per message.

# Save Inquiry as Draft

- After starting an inquiry, click *Save As Draft*.
- The QIP UI prepopulates fields with saved data when the EQRS user returns to submit saved inquiries.
- Once you have saved your draft, you will receive confirmation and you may continue to edit your draft or navigate back to your inquiry screen.



The screenshot shows a web form titled "Create an Inquiry". The form includes the following fields and buttons:

- Facility Name, Facility CCN or Dialysis Organization \***: A search bar containing "ABC DIALYSIS CENTER, 123456, ABC Dialysis Organization" with a magnifying glass icon. Below it is a small note: "Enter at least 3 characters to search for a facility".
- From \***: A text field containing "testuser@testmail.com".
- CC**: An empty text field.
- Subject (50 Characters Limit)**: An empty text field.
- Message \* (25000 Characters Limit)**: A large text area containing the text "This is my inquiry.".
- Upload an attachment**: A button with a plus sign icon.
- Clear Form**: A blue button.
- Save as Draft**: A blue button, highlighted with a red border.
- Send Inquiry**: A blue button.

Below the form, there is a note: "Only the following file types can be accepted: .pdf, .jpg, .png, .tiff, .xlsx, .xls, .docx, .doc, .csv, .zip. Total file size limited to 10 MB per message."

✔ Your inquiry was saved successfully.  
You may continue editing your draft, or [return to all inquiries](#)

# Click Send Inquiry

Click on *Send inquiry* to submit your inquiry to CMS.

- *Message* field and *Upload An Attachment* option are enabled.
- The latest message in the thread displays at the top.
- *Inquiry ID*, *Facility*, *From*, and *Date Sent* fields and previously sent messages are not editable.

Create an Inquiry

Facility Name, Facility CCN or Dialysis Organization \*

ABC DIALYSIS CENTER, 123456, ABC Dialysis Organization

Enter at least 3 characters to search for a facility

From \*

testuser@testmail.com

CC

Subject (50 Characters Limit)

Message \* (25000 Characters Limit)

This is my inquiry.

Upload an attachment

Only the following file types can be accepted: .pdf, .jpg, .png, .txt, .tiff, .xlsx, .xls, .docx, .doc, .osv, .zip. Total file size limited to 10 MB per message.

Clear Form

Save as Draft

Send Inquiry

# Thread Reply Sent Successfully

Once inquiry is submitted, system will display a message indicating your inquiry was sent successfully.

**REMINDER:** Please check on an inquiry's status in the ESRD QIP UI until the inquiry is Closed.

The screenshot displays the 'QIP Inquiries' interface. At the top, there is a blue bar with the text 'Return to all inquiries'. Below this, a message header is shown: 'Re: Inquiry related to Kt/V Performance Score' with a date of '11/14/2022' and an upward arrow. The message details include: 'Inquiry ID: 10022', 'Facility:', 'From: test.uvtuser251@test.com', and 'Date Sent: 08/03/2023'. The message content area contains the text 'Here is my reply...'. A green confirmation box with a checkmark icon and the text 'Your message was sent successfully. You may begin a new inquiry, or return to all inquiries' is highlighted with a red border. Below the message, there is a list of four similar message entries, each with the subject 'Re: Inquiry related to Kt/V Performance Score' and the date '08/03/2023' and a downward arrow. At the bottom, there is another blue bar with the text 'Return to all inquiries'.

# Inquiries Screen: Filters

If you have submitted one or more inquiries, you may filter your inquiries by *Inquiry ID*, *Inquiry Subject*, *Inquiry Status*, or *Date*.

Filter by date by entering start and end date of inquiry submitted or updated date:

Filter Inquiries ^

Facility Name, Facility CCN or Dialysis Organization

ABC DIALYSIS CENTER, 123456, ABC Dialysis Organization 

Enter at least 3 characters to search for a facility

Inquiry ID Inquiry Subject Inquiry Status

INQUIRY SUBMITTED/UPDATED DATE RANGE

Date Range Start Date Range End

07/15/2024 07/31/2024

Filter by inquiry status by *Inquiry Status* selecting an option from the dropdown box:

Filter Inquiries

Facility Name, Facility CCN or Dialysis Organization

Enter at least 3 characters to search for a facility

Inquiry ID Inquiry Subject Inquiry Status

INQUIRY SUBMITTED/UPDATED DATE RANGE

Date Range Start Date Range End

MM/DD/YYYY MM/DD/YYYY

# Inquiries Screen: Inquiry Status

Inquiry Status options you may filter on include:

- **Draft:** Inquiry has not been submitted.
- **Waiting on CMS:** Facility has submitted an inquiry or sent a follow-up response and is waiting for CMS to respond.
- **Waiting on Facility:** CMS has responded and is waiting for facility to review and/or provide supporting documentation.
- **Closed:** CMS has responded to the inquiry and closed the ticket.

## Inquiry Status

Waiting on Facility

Select Inquiry Status

Draft

Waiting on CMS

Waiting on Facility

Closed

# Inquiries Screen: Filter Results

- Filtered results can be sorted by clicking the arrows next to the column header.
- Click on Inquiry ID number to view the inquiry thread.

View Inquiries ^

This table displays current payment year inquiries by default unless filters are selected. Please select an inquiry ID to view all details including messages and attachments related to that inquiry.

Inquiry ID	Facility	CCN	Subject	Date Created	Date Updated	Inquiry Status
<a href="#">10590</a>	ABC DIALYSIS CENTER	123456		07/15/2024	07/20/2024	Waiting on CMS
<a href="#">10589</a>	ABC DIALYSIS CENTER	123456	test	07/18/2024	07/20/2024	Waiting on CMS
<a href="#">10588</a>	ABC DIALYSIS CENTER	123456		07/23/2024	07/25/2024	Waiting on CMS
<a href="#">10587</a>	ABC DIALYSIS CENTER	123456		07/25/2024		Draft

Page Size

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Showing 1 to 4 of 4 results

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7/16/2024

Preview Period Webinar

# Corporate Users: Inquiries Screens

- The steps to access the *Preview Period Inquiries* screen are the same for all users.
- The *Filter Inquiries* section is automatically expanded for corporate-level users.
- Click on *Create A New Inquiry* or enter a search criteria to display previously submitted inquiries.

The screenshot displays the 'Filter Inquiries' interface. At the top is a grey header with the text 'Filter Inquiries'. Below this is a search input field with the placeholder text 'Facility Name, Facility CCN or Dialysis Organization'. A note below the field states 'Enter at least 3 characters to search for a facility'. Underneath are three input fields: 'Inquiry ID', 'Inquiry Subject', and 'Inquiry Status'. The 'Inquiry Status' field contains the text 'Waiting on Facility' and is highlighted with a red border. Below these fields is a section titled 'INQUIRY SUBMITTED/UPDATED DATE RANGE'. It contains two date range input fields, 'Date Range Start' and 'Date Range End', both with the placeholder 'MM/DD/YYYY'. At the bottom are two buttons: 'Clear Filter' and 'Apply Filter', with the 'Apply Filter' button highlighted by a red border.

# Corporate Users: Previously Submitted Inquiries

Corporate Facility and Corporate POCs can view both organization-level inquiries for their organization and facility-level inquiries under their purview. Thus, two column headers are modified for their view.

Below is the list of inquiries meeting your filter criteria. Please select an inquiry ID to view all communication and attachments related to that message thread.

Inquiry ID	Facility/Organization	CCN/Org Code	Subject	Date Created	Date Updated	Inquiry Status
<a href="#">10022</a>			Inquiry related to KI/V Performance Score	08/14/2023	08/15/2023	Waiting on CMS
<a href="#">10023</a>			Inquiry related to KI/V Performance Score	08/14/2023	08/14/2023	Waiting on CMS
<a href="#">10021</a>			New Inquiry Subject HEIST 414090	08/14/2023	08/14/2023	Waiting on CMS
<a href="#">10020</a>			New Inquiry Subject HEIST	08/14/2023	08/14/2023	Closed
<a href="#">10019</a>			test subject	08/14/202	08/14/2023	Waiting on CMS
<a href="#">10018</a>			New Inquiry Subject HEIST 433084	08/14/2023	08/14/2023	Waiting on CMS
<a href="#">10017</a>			New Inquiry Subject HEIST 697675	08/14/2023	08/14/2023	Waiting on CMS
<a href="#">10016</a>			New Inquiry Subject HEIST 180440	08/14/2023	08/14/2023	Waiting on CMS
<a href="#">10015</a>			New Inquiry Subject HEIST 391705	08/14/2023	08/14/2023	Waiting on CMS
<a href="#">10014</a>			New Inquiry Subject HEIST 786611	08/14/2023	08/14/2023	Waiting on CMS

Showing 1 to 10 of 24 results

Page Size: 10

Navigation: << Prev 1 2 3 Next >>



# Corporate Users: Facility-Level Inquiries

If the inquiry is for a single facility, do not click on “This is an organizational-level inquiry.” Instead, use the Facility selection contextual search box.

Quality Incentive Program

DaVita  
Change organization ▾

### QIP Inquiries

You may submit an inquiry to CMS in order to gain more information about your QIP scores, or attempt to affect your QIP score, if you believe that the score is incorrect.

[Return to all inquiries](#)

#### Create an Inquiry

This is an Organizational level Inquiry.

Upload an attachment below that includes the affected CCNs

Facility Name, Facility CCN or Dialysis Organization \*

Enter at least 3 characters to search for a facility

From \*

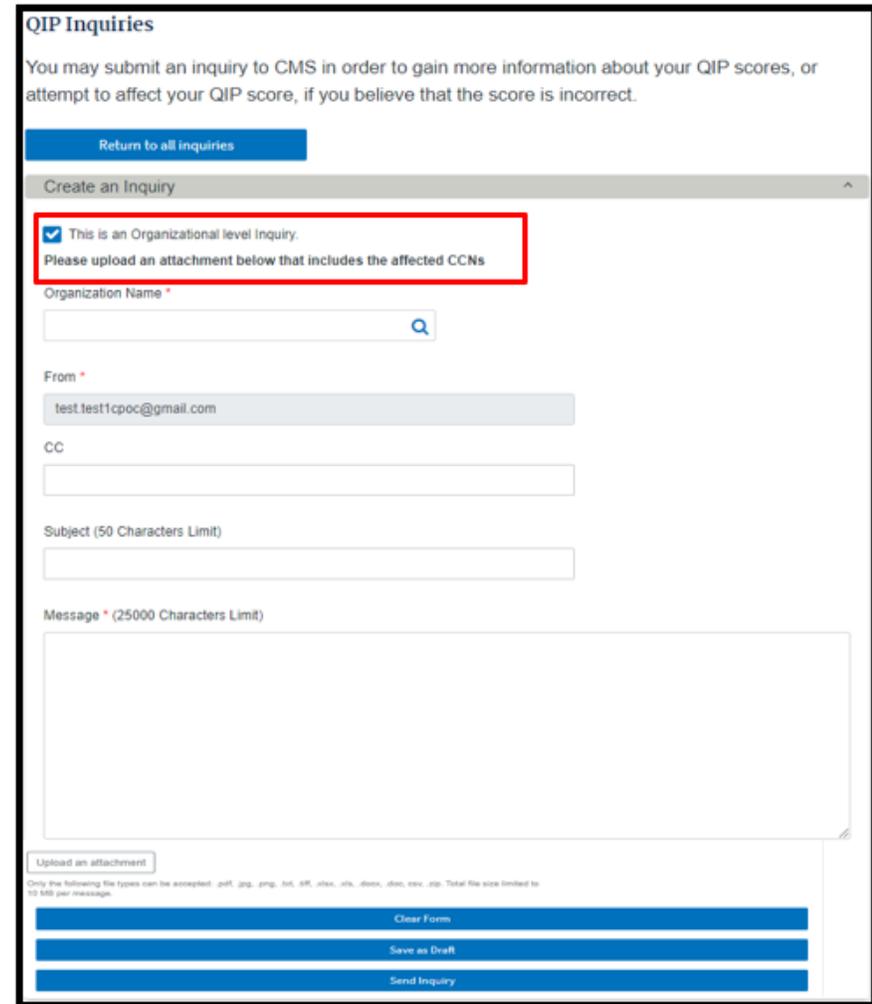
impitestuser14@mailinator.com

CC

Subject (50 Characters Limit)

# Corporate Users: Organizational-Level Inquiries

If the inquiry is an organizational-level inquiry, click: This is an organizational-level inquiry. This will hide the Facility selection contextual search box.



**QIP Inquiries**

You may submit an inquiry to CMS in order to gain more information about your QIP scores, or attempt to affect your QIP score, if you believe that the score is incorrect.

[Return to all inquiries](#)

Create an Inquiry

This is an Organizational level Inquiry.  
Please upload an attachment below that includes the affected CCNs

Organization Name \*

From \*

test.test1cpoc@gmail.com

CC

Subject (50 Characters Limit)

Message \* (25000 Characters Limit)

Upload an attachment

Only the following file types can be accepted: pdf, zip, png, txt, xls, ppt, doc, docx, xlsx, docm, xlsx, zip. Total file size limited to 10 MB per message.

[Clear Form](#)

[Save as Draft](#)

[Send Inquiry](#)

# Corporate Users: Inquiries

- The remaining steps for attaching files, submitting an inquiry, or saving a draft inquiry are the same as a Facility POC.
- Replying to a message thread is similar to Facility POC except when selecting an organizational inquiry, which uses the organization name instead of the facility name.

# Inquiries Summary

- POCs may submit and/or reply to as many inquiries as necessary during the preview period.
- The QIP UI features one inquiry type. To access:
  1. Log in to EQRS with the HARP account via <https://eqrs.cms.gov/globalapp/>.
  2. Click on *QIP*.
  3. Click on *Preview Period Inquiries*.
  4. Click on *Create New Inquiry* or review previously submitted inquiries.
- Facility and Corporate POCs submit inquiries.
- Previously submitted inquiries are viewable in the ESRD QIP UI.

# Trouble Accessing ESRD QIP Reports?

## Having technical issues with accessing your reports in EQRS?

Contact the Center for Clinical Standards and Quality (CCSQ) Service Center Monday–Friday 8 a.m. to 8 p.m. ET:

- Phone: **(866) 288-8912**
- Email: [qnetsupport-esrd@cms.hhs.gov](mailto:qnetsupport-esrd@cms.hhs.gov)
- CCSQ Support Central:  
[https://cmsqualitysupport.servicenowservices.com/ccsq\\_support\\_central](https://cmsqualitysupport.servicenowservices.com/ccsq_support_central)



## **Post Preview Period Activities:**

- **Finalizing ESRD QIP Scores**
- **Posting Performance Score Certificates**
- **Preparing for Upcoming Deadlines**
- **Attending Upcoming Events**

# Finalizing ESRD QIP Scores

CMS will review any outstanding inquiries, then finalize facility PSRs.

- PSRs will outline your facility's information.
- PSRs will be posted for download via the ESRD QIP UI.
- Once issued as final, a PSR cannot be changed.



In late 2024, each facility's PSC is scheduled to be available for download via the ESRD QIP UI.



In late 2024, final measure scores and payment reductions will be made available to facilities confidentially via PSRs.

# Posting Performance Score Certificates

- **It is the facility's responsibility to print and display the PSC, when they become available. PSCs must be:**
  - Posted **within 15 business days** of its availability via the ESRD QIP UI and remain posted throughout the year until the next payment year PSC is available.
  - Displayed **in a prominent patient area.**
  - Posted in **English** and **Spanish.**
- **Your patients may have questions about the certificate.**
  - CMS recommends that you educate your staff about the posted certificates so that they can answer patient questions.

# Recap: Facility Responsibilities

- Establish a HARP account, if needed.
- Update your EQRS role to access the ESRD QIP UI.
- Access ESRD QIP resources via <https://qualitynet.cms.gov/esrd/esrdqip>.
- Access your facility's Preview PSR starting on **July 15, 2024**.
- Submit inquiries before the preview period's scheduled end date of **August 15, 2024, at 11:59 p.m. PT**.
- Download, print, and post your English and Spanish PSCs within 15 business days of their availability via the ESRD QIP UI.
- Educate your staff about the ESRD QIP so that they can answer patient questions about the publicly posted certificate.

# Upcoming EQRS and NHSN Deadlines



# EQRS Deadlines and Information

- Clinical Data Submission Deadlines
- Depression Screening Deadlines
- ICH CAHPS Attestation Submission Deadline
- Facility Commitment to Health Equity Attestation Submission Deadline
- Additional Information

# EQRS Clinical Data Submission Deadlines

Data Submission Schedule for 2024 EQRS Clinical Data	
Reporting Month	Data Submission Deadline
March 2024	June 3, 2024, at 11:59 p.m. PT
April 2024	July 1, 2024, at 11:59 p.m. PT
May 2024	July 31, 2024, at 11:59 p.m. PT
June 2024	September 3, 2024, at 11:59 p.m. PT
July 2024	September 30, 2024, at 11:59 p.m. PT
August 2024	October 31, 2024, at 11:59 p.m. PT
September 2024	December 2, 2024, at 11:59 p.m. PT
October 2024	December 31, 2024, at 11:59 p.m. PT
November 2024	February 3, 2025, at 11:59 p.m. PT
December 2024	March 3, 2025, at 11:59 p.m. PT

**Note:** For additional information on the ESRD QIP measures, refer to the [Calendar Year \(CY\) 2024 ESRD QIP Technical Measure Specifications](#).

# EQRS Depression Screening and Follow-Up Submission Deadline

## EQRS Submission Schedule for 2024 Depression Screening and Follow-Up Assessments

Assessment Period	Data Submission Deadline
January 1 – December 31, 2024	March 3, 2025, at 11:59 p.m. PT

**Note:** For additional information on the Depression Screening and Follow Up measure, refer to the [CY 2024 ESRD QIP Technical Measure Specifications](#).

# ICH CAHPS Attestation Submission Deadline

## EQRS Submission Schedule for 2024 In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH CAHPS) Attestation

Attestation Year	Data Submission Deadline
January 1 – December 31, 2024	March 3, 2025, at 11:59 p.m. PT

**Note:** For additional information on the ICH CAHPS Survey measure, refer to the [CY 2024 ESRD QIP Technical Measure Specifications](#).

# Facility Commitment to Health Equity Attestation Submission Deadline

## EQRS Submission Schedule for Facility Commitment to Health Equity Attestation

Attestation Year	Data Submission Deadline
January 1 – December 31, 2024	March 3, 2025, at 11:59 p.m. PT

**Note:** For additional information on the Facility Commitment to Health Equity measure, refer to the [CY 2024 ESRD QIP Technical Measure Specifications](#).

# EQRS Data Reporting: Additional Information

EQRS data submission deadlines are listed on [MyCROWNWeb.org](https://www.mycrownweb.org): [EQRS deadlines for CY 2024 Data](https://www.mycrownweb.org)

Additional information on EQRS data reporting requirements is available on [MyCROWNWeb.org](https://www.mycrownweb.org):

- [EQRS Data Submission Stopwatch](https://www.mycrownweb.org)
- [EQRS Data Management Guidelines](https://www.mycrownweb.org)
- [ESRD QIP Successful Reporting Guide](https://www.mycrownweb.org) (\*New Resource\*)

# NHSN Deadlines

- NHSN ESRD Data Submission Deadlines
- Additional Information

# NHSN ESRD Data Submission Deadlines

## Data Submission Schedule for 2024 NHSN ESRD Data: Dialysis Events, Bloodstream Infections, and COVID-19 Vaccination Coverage Among Healthcare Personnel

Quarter	2024 Reporting Months	Data Submission Deadline
1	January-March	July 1, 2024, at 11:59 p.m. PT
2	April-June	September 30, 2024, at 11:59 p.m. PT
3	July-September	December 31, 2024, at 11:59 p.m. PT
4	October-December	March 31, 2025, at 11:59 p.m. PT

**Facilities must submit NHSN data by the established deadlines. Not meeting the required reporting deadlines puts your facility at risk for an ESRD QIP payment reduction.**

**Note:** For additional information on the NHSN measures, refer to the [CY 2024 ESRD QIP Technical Measure Specifications](#).

# NHSN Deadlines: Additional Information

NHSN data submission deadlines are listed on [MyCROWNWeb.org: NHSN Deadlines for CY 2024 Data](https://mycrownweb.org/NHSN-Deadlines-for-CY-2024-Data)

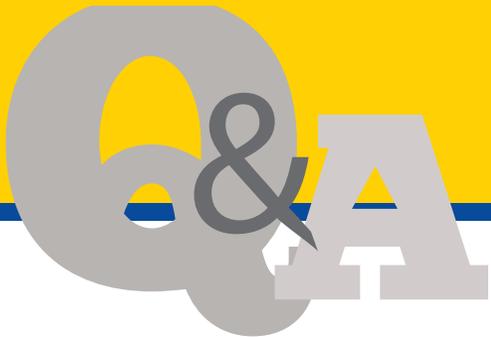
For questions about NHSN, contact the NHSN Help Desk:

- Email: **NHSN@CDC.gov**
- [NHSN-ServiceNow Customer Service Portal](#)

# Available Sources of Support

- Live Q & A
- Online Resources
  - For the Preview Period
  - For EQRS & QIP
- Online and Phone Support
- Training and Informational Events

# Questions & Answers



Please type questions in the chat box!

# Online EQRS & QIP Resources

Resource	URL
CMS.gov: ESRD QIP Section	<a href="http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/index.html">www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/index.html</a>
CMS ESRD Measures Manual	<a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/06_MeasuringQuality">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/06_MeasuringQuality</a>
Technical Specifications for ESRD QIP Measures	<a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/061_TechnicalSpecifications">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/061_TechnicalSpecifications</a>
QualityNet.cms.gov: ESRD QIP Section	<a href="https://qualitynet.cms.gov/esrd/esrdqip">https://qualitynet.cms.gov/esrd/esrdqip</a>
Extraordinary Circumstances Exceptions Policy	<a href="https://qualitynet.cms.gov/esrd/esrdqip/participation#tab5">https://qualitynet.cms.gov/esrd/esrdqip/participation#tab5</a>
Guide to the Performance Score Report and ESRD QIP UI Guide	<a href="https://qualitynet.cms.gov/esrd/esrdqip/reports">https://qualitynet.cms.gov/esrd/esrdqip/reports</a>
HARP Account Registration and EQRS Role Request Training	<a href="https://mycrownweb.org/harp-training/">https://mycrownweb.org/harp-training/</a>
Care Compare	<a href="https://www.medicare.gov/care-compare/">https://www.medicare.gov/care-compare/</a>
ESRD National Coordinating Center	<a href="http://esrdncc.org">esrdncc.org</a>
Medicare Improvements for Patients and Providers Act of 2008	<a href="http://www.gpo.gov/fdsys/pkg/PLAW-110publ275/pdf/PLAW-110publ275.pdf">www.gpo.gov/fdsys/pkg/PLAW-110publ275/pdf/PLAW-110publ275.pdf</a>
MyCrownWeb.org	<a href="http://www.MyCROWNWeb.org">http://www.MyCROWNWeb.org</a>
ESRD Network Directory	<a href="https://esrdncc.org/en/ESRD-network-map/">https://esrdncc.org/en/ESRD-network-map/</a>

# Online PY 2025 Preview Period Resources

- ESRD QIP Preview Period supporting materials are available via the QualityNet website: <https://qualitynet.cms.gov/esrd/esrdqip/resources#tab2>
- PY 2025 supporting materials include the following:
  - *PY 2025 Guide to the ESRD QIP Performance Score Report*
  - *PY 2025 ESRD QIP UI Quick Start Guide*
- Click Download to access the PY 2025 ESRD QIP supporting materials.

File Name	File Type	File Size	
PY 2025 Guide to the ESRD QIP Performance Score Reports (PSRs) (July 2024)	PDF	350 KB	<a href="#">Download</a>
PY 2025 ESRD QIP User Interface Quick Start Guide (July 2024)	PDF	428 KB	<a href="#">Download</a>

# Online or Phone-based Support

Question Type	Contact Information
<p><b>General ESRD QIP questions and EQRS training-related questions</b> (Use the ESRD QIP UI to submit formal preview period inquiries.)</p>	<p>QualityNet Q&amp;A Tool: <a href="https://cmsqualitysupport.servicenowservices.com/qnet_qa">https://cmsqualitysupport.servicenowservices.com/qnet_qa</a></p>
<p><b>EQRS system-related questions or issues</b></p>	<p>CCSQ Service Center:</p> <ul style="list-style-type: none"><li>• Phone: 1-866-288-8912</li><li>• Email: <a href="mailto:qnetsupport-esrd@cms.hhs.gov">qnetsupport-esrd@cms.hhs.gov</a></li><li>• CCSQ Support Central: <a href="https://cmsqualitysupport.servicenowservices.com/ccsq_support_central">https://cmsqualitysupport.servicenowservices.com/ccsq_support_central</a></li></ul>

# Upcoming ESRD QIP & EQRS Events

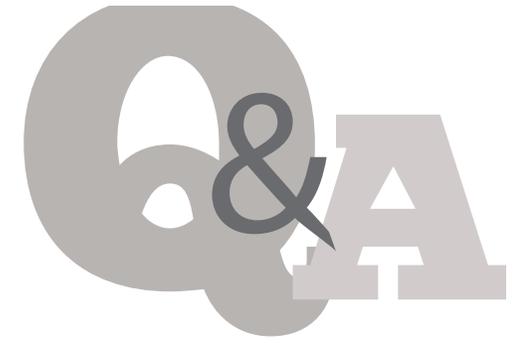
## Save the Dates!

<b>Preview Period Webinar</b> <i>-Today's Webinar</i>	7/16/2024
<b>EQRS Monthly Stakeholder Meeting</b>	7/30/2024
<b>Proposed Rule Webinar</b>	Mid- August
<b>EQRS Monthly Stakeholder Meeting</b>	8/20/2024
<b>EQRS Monthly Stakeholder Meeting</b>	9/17/2024
<b>EQRS Quarterly Townhall Meeting</b>	9/25/2024

# Prior ESRD QIP & EQRS Events

Recordings and slides from prior events are all available at:  
<https://mycrownweb.org/events/>

# Live Questions & Answers



Type your questions or comments in the chat box!

# Post-Event Evaluation

Please complete a short post-event evaluation by clicking on the link in the Chat box. Your feedback will help improve future events.



**Thank You**

# Disclaimer

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# Acronyms

<b>BSI</b>	Bloodstream Infection	<b>PLR</b>	Patient List Report
<b>CC</b>	Carbon Copy	<b>POC</b>	Point of Contact
<b>CCN</b>	CMS Certification Number	<b>PPPW</b>	Percentage of Prevalent Patients Waitlisted
<b>CCSQ</b>	Clinical Standards and Quality	<b>PPS</b>	Prospective Payment System
<b>CMS</b>	Centers for Medicare & Medicaid Services	<b>PSSR</b>	Performance Summary Score Report
<b>CY</b>	Calendar Year	<b>PSC</b>	Performance Score Certificate
<b>EOCT</b>	End-Stage Renal Disease Outreach, Communication, and Training	<b>PSR</b>	Performance Score Report
<b>EQRS</b>	End-Stage Renal Disease Quality Reporting System	<b>PT</b>	Pacific Time
<b>ESRD</b>	End-Stage Renal Disease	<b>PY</b>	Payment Year
<b>ET</b>	Eastern Time	<b>Q&amp;A</b>	Question and Answer
<b>HARP</b>	Healthcare Quality Information System Access Roles and Profile	<b>QIP</b>	Quality Incentive Program
<b>HCP</b>	Healthcare Personnel	<b>SDOH</b>	Social Determinants of Health
<b>ICH CAHPS</b>	In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems	<b>SHR</b>	Standardized Hospitalization Ratio
<b>MAC</b>	Medicare Administrative Contractor	<b>SRR</b>	Standardized Readmission Ratio
<b>MBI</b>	Medicare Beneficiary Identifier	<b>STrR</b>	Standardized Transfusion Ratio
<b>MedRec</b>	Medication Reconciliation	<b>TPS</b>	Total Performance Score
<b>mTPS</b>	minimum TPS	<b>UFR</b>	Ultrafiltration Rate
<b>NHSN</b>	National Healthcare Safety Network	<b>UI</b>	User Interface