

Inpatient Value, Incentives, and Quality Reporting (VIQR)
Outreach and Education Support Contractor

# IPFQR Program: NHSN Enrollment and Reporting COVID-19 HCP Measure Data Presentation Transcript

### **Speakers**

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Lisa Vinson:

Welcome to today's presentation titled, *IPFQR Program: NHSN* Enrollment and Reporting COVID-19 HCP Measure Data. My name is Lisa Vinson. I am the Interim IPFQR Program Lead for the Inpatient Value, Incentives, and Quality Reporting, or VIQR, Support Contractor, and I will be the moderator for today's event. Before I introduce today's speakers, I will review a few housekeeping items. First, the slides for this presentation were posted to the Quality Reporting Center website prior to the event. If you did not receive the slides beforehand, please go to QualityReportingCenter.com in your web browser. On the bottom lefthand side of the screen, you will see a list of Upcoming Events. Click on the link for this event, and there you will find the presentation slides available for download. This webinar is being recorded and the transcript, slides, and a recording of today's presentation will be posted to QualityNet at a later date. Second, we ask that you submit any questions, pertinent to the webinar topic, in the chat tool. Questions that are not addressed during this presentation will be posted to QualityNet and Quality Reporting Center websites at a later date. We look forward to addressing as many of your questions related to this webinar topic as time allows. To obtain answers to questions that are not specific to the content of this webinar, we recommend that you submit your inquiry via the QualityNet Question and Answer Tool. You can access the question-and-answer tool from the QualityNet home page. There, you can search for questions unrelated to the current webinar topic. If you do not find your question there, then you can submit your question to us via this tool.

I would like to welcome our guest speakers for today's presentation, Elizabeth Kalayil and Lori Haas from the CDC. Elizabeth Kalayil is a Public Health Analyst with the Lantana Consulting Group, Inc. and is based in the Division of Healthcare Quality Promotion at CDC. She provides training and technical assistance to healthcare facilities on reporting vaccination data. Elizabeth earned a Master of Public Health degree in International Health from Emory University. Lori Haas is a Health Scientist with the CDC and is also based in the Division of Healthcare Quality Promotion. Lori works on a wide variety of communication and education activities within the branch.

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Lori has a background in nursing and has over 10 years of experience in acute care and public health settings. Now, I will turn the presentation over to Elizabeth. Elizabeth, the floor is yours.

#### Elizabeth Kalayil:

Thank you, Lisa. The purpose of today's webinar is to provide the inpatient psychiatric facility community with a refresher training on submitting COVID-19 healthcare personnel vaccination data. This applies to both free-standing psychiatric hospitals and inpatient psychiatric facility, or IPF, units within hospitals.

At the end of this webinar, attendees will understand how to report data for freestanding hospitals and IPF units within hospitals and how to confirm data submission in NHSN. We will also briefly go over a few reminders regarding data reporting and some frequently asked questions.

The first step to getting started in NHSN is the enrollment process, so we will briefly go over a few points about this process.

In the next few slides, we will review some basic information on enrollment, but, if you are new to reporting data through NHSN, please review prior recordings for comprehensive information on enrollment, which are listed on this slide. We have also included a link to a Quick Learn demonstration on how to enter COVID-19 vaccination data into NHSN.

Facilities that are currently not participating in NHSN and wish to participate must enroll their facility. Please visit the first link on this slide for more information regarding the enrollment process. During this process, facilities may choose to participate in any NHSN components. If you are unsure of your facility's status in NHSN, please submit a ticket through the ServiceNow portal, which is linked on this slide. Facilities that are already enrolled in NHSN and wish to participate in the Healthcare Personnel Safety, or HPS, Component, must activate the component within NHSN. For more information about the Healthcare Personnel Safety Component, please visit the third link listed on this slide.

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Once information on new users has been added and saved in NHSN, that user will receive an automated Welcome to NHSN e-mail with the instructions to begin the process of becoming an NHSN user. Please note that SAMS stands for Secure Access Management Services and provides secure online access to CDC applications, such as NHSN. After registering with SAMS, the new user receives instructions to create a SAMS account and complete an identity verification process. Facilities can review information on the SAMS process by clicking on the link listed on this slide. It's also recommended that users log in to NHSN at least once a year to maintain an active SAMS credential.

NHSN highly recommends that, if there is a change in the NHSN Facility Administrator, he/she should transfer that role to another user prior to leaving the facility. If the previously designated NHSN Facility Administrator has left your facility prior to reassigning that role to another person, you will need to reach out to the NHSN Help Desk. You can request this reassignment using the Facility Administrator Change Request form using the link on this slide. Please do not re-enroll this facility in NHSN. After the NHSN Help Desk completes the re-assignment, the newly designated Facility Administrator will be able to start the new NHSN user onboarding process.

Now, we will cover how to report data during the next part of the presentation.

First, let's discuss a few key points. Both free-standing IPFs and IPF units can report data through NHSN. If an IPF is freestanding, then they will be enrolled as a Hosp-Psych FacType. In contrast, IPF units that are part of a facility will be mapped as a location within their parent facility. It is important to note that IPF units can exist in a variety of settings. In addition to acute care and critical access hospitals, these units can be located within long-term care hospitals, children's hospitals, and cancer hospitals. Some IPF units may have the exact same CMS Certification Number, or CCN, as the parent facility. That means that they are 100 percent identical. However, a CMS-certified IPF unit will have a distinct CCN from the parent facility.

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If the IPF has a distinct CCN from the parent facility, then separate data reporting is required. A distinct CCN from the parent facility can be described as having an M or S in the third position of the CCN, as shown in the example on this slide. Detailed guidance on how to map an IPF unit can be found using the link listed on this slide.

Now, we will go over how we can map an IPF unit as a location within a parent facility. In order to map in IPF unit, first go to the NHSN home page, scroll down to Facility, and select Locations.

Next, enter the information outlined in this slide into the NHSN application.

Once the information has been entered, click on the Add button.

Once an IPF unit has been mapped, the fields for the IPF unit location should appear in NHSN. An example of how this may appear is shown on this slide.

Please note that when you enter the CCN and CCN Effective Date in the appropriate boxes, the Effective Reporting Quarter will automatically populate after the Effective Date is entered. Therefore, please be sure to enter the correct CCN into the application. In order to qualify as a CMS IPF unit within a hospital, the CCN must have an M or S in the third position or SA, SB, SC, SD, or SE in the third and fourth position. If the last four digits of the CCN are between 4000 and 4499, then the IPF must be enrolled as a separate, free-standing facility rather than a location within the hospital.

This slide shows different views of the NHSN data entry screen. Please note that the first screenshot displays what the data entry screen should look like for a mapped IPF unit. The second screenshot displays what the data entry screen should look like for a free-standing IPF.

We also wanted to point out that a facility may have multiple IPF units. However, separate data reporting is not required for each unit. Instead, the data should be combined and submitted to NHSN as a single report.

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Now, we will review an example of this. Let's say that there are three CMS-certified IPF units within a facility, each with a CCN of 12S456. The facility will combine the data for the three CMS-certified IPF units into one report. In other words, the facility will submit one report covering vaccination data for the three CMS-certified IPF units. The facility will also submit a separate report for the acute care hospital, so this report will not include the data for the three IPF units.

The next part of the presentation will review how to confirm data submission. I will now turn things over to my colleague, Lori Haas.

Lori Haas:

Thank you, Elizabeth. When checking that data submission is complete, facilities must be sure to report data for at least one week for each month per quarter. A week is designated as belonging to the month of the weekend date. For example, reporting data for the week of November 27, 2023, through December 3, 2023, is considered as submitting data for a week in December and not November. Please note that COVID-19 vaccination data should be submitted by the end of the reporting quarter, as defined by CMS.

CDC has created data reporting checklists to confirm data submission. Facilities are encouraged to review these using the links on this slide.

Facilities can ensure data are saved in the application by seeing the yellow bar in the calendar view turn green. In the screenshot at the top of this page, we see that data are saved for an IPF unit within a facility. If you have an IPF unit that is mapped as a location, you must report at least one week per month per quarter for this to count as complete reporting for this unit. Please note that only submitting data for the main hospital does not meet the IPF program reporting requirements. Also, if an IPF is free-standing, the calendar view will display similar to the screenshot at the bottom of the slide.

Analysis and reporting options are available in NHSN for facilities to generate reports on their COVID-19 vaccination data.

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Current reports are organized in the COVID-19 Vaccination - IPF folder, as shown on this slide. One type of report that we would like to highlight is the line listing report. The line listing is an organized, detailed list of each record entered into NHSN, available to both facilities and groups. For more information on the line listing and other report options, quick reference guides on how to run various reports can be found using the links listed on this slide. For example, facilities can review COVID-19 vaccination data submitted to CMS in the CMS COVID-19 Rate Table Reports.

The Person-Level COVID-19 Vaccination Form is an optional tool that you can use to report data to the NHSN HCP COVID-19 Vaccination module. Data on individual healthcare personnel are directly entered line by line into the optional Person-Level COVID-19 Vaccination Form. You can also upload the data via a .CSV file. This tool facilitates the reporting of vaccination data, so that the process is easier and more efficient.

Another advantage is that the Person-Level Vaccination Form automatically applies the definition of "up to date" vaccination automatically for a facility.

We have included links to resources on entering COVID-19 vaccination data, mapping IPF units, and reporting up to date vaccination data.

We will now review resources that may be helpful to facilities.

We have included links to resources on entering COVID-19 vaccination data, mapping IPF units, and reporting up-to-date vaccination data. Facilities can also view the final link listed on this slide to review a variety of frequently asked questions on reporting COVID-19 vaccination data.

If you have any questions about information presented in this webinar, please send a message to the NHSN Help Desk via ServiceNow using the link listed on this slide. If your question pertains to a specific slide of this presentation, please include the slide number in the body of your e-mail. I will turn the webinar back over to Lisa.

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Lisa Vinson:

Thank you, Lori. I would like to take this opportunity to briefly review key deadlines associated with the COVID-19 HCP measure for the IPFQR Program.

This chart shows the upcoming CMS deadlines for reporting COVID-19 HCP measure data for encounters through Quarter 4 of 2024. As you can see, the next deadline is for the fourth quarter 2023 data, which is due May 15.

This chart shows the relationship between the encounter calendar year and the payment determination. For instance, data reported for encounters that occurred during calendar year 2023 will impact the IPFQR Program fiscal year 2025 payment determination. Likewise, data reported for calendar year 2024 encounters will impact the IPFQR Program fiscal year 2026 payment determination. Please submit any questions about the COVID-19 HCP measure reporting requirements and deadlines for the IPFQR Program to the QualityNet Question and Answer Tool by selecting topic COVID HCP Vaccination and include your facility's CCN to facilitate a timely response.

At this time, I would like to pose a few of the most commonly asked questions regarding the NHSN enrollment and COVID-19 HCP measure data submission process as they pertain to IPFs.

The first question pertains to data reporting for Quarter 4 of 2023. I reported my IPF's Quarter 4 2023 COVID-19 HCP measure data once per month during the following dates: week of October 23–29, 2023, for October 2023; week of November 27–December 3, 2023, for November 2023; and week of December 25–31, 2023, for December 2023. I can see my data in the NHSN system, but the system says that I only submitted data for two of the three months. Why is this the case?

Lori Haas:

A week is designated as belonging to the month of the week-end date. The data reported during the week of November 27 through December 3 of 2023 counted toward December reporting because the week ended on Sunday, December 3, of 2023.

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Therefore, the NHSN system did not recognize submission of data for the month of November 2023.

Lisa Vinson:

The second question is: What changes occurred for Quarter 1 of 2024 on reporting COVID-19 vaccination data for healthcare personnel?

Lori Haas:

Beginning with the first week of January of 2024, questions related to COVID-19 primary series vaccination were removed and replaced with questions about up-to-date COVID-19 vaccination status. Therefore, healthcare personnel should NOT be counted as up to date with COVID-19 vaccines until they receive the 2023-2024 updated COVID-19 vaccine. Facilities should be careful not to incorrectly over-report the number of HCP who are up to date. HCP who previously had completed primary series should NOT be counted as up to date in Question 2 and Questions 3.1–3.3. These cover reasons why an individual has not received a vaccine, such as medical contraindication, declined, or other/unknown vaccination status. These questions now refer to HCP who are not up to date with the COVID-19 vaccination.

Here is a screenshot of the updated data collection form. You will see that Question 2 refers to "up to date" vaccination, previously Question 4. Question 3, Cumulative Number of HCP in Question 1 with Other conditions, now relates to healthcare personnel who are not up to date with COVID-19 vaccination.

Lisa Vinson:

Question 3 asks: Who is considered up to date for Quarter 1, 2024?

Lori Haas:

For Quarter 1, 2024, individuals are considered up to date with their COVID-19 vaccines for the purpose of NHSN surveillance if they received a 2023-2024 updated COVID-19 vaccine. The "up to date" definition has been changing over time, and facilities should check the key terms document, linked on this slide, for the definition of "up to date" for Quarter 2 of 2024.

Lisa Vinson:

Our final question: What is the Person-Level COVID-19 Vaccination Form?

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Lori Haas:

The Person-Level COVID-19 Vaccination Form is an optional tool that can be used to report data through the weekly NHSN Healthcare Personnel COVID-19 Vaccination Module. Data on individual HCP are directly entered line by line into the optional Person-Level COVID-19 Vaccination Form or can be uploaded via a .CSV file. The form makes reporting vaccination data easier and more efficient by applying definition changes for you. A training on how to use this form is also linked on the slide.

Lisa Vinson:

Now, we will review some helpful resources.

Here is a list of the acronyms that we referenced during this presentation.

CMS recommends that IPFs refer to the updated IPFQR Program specifications manual for information pertaining to the IPFQR Program. The manual is located on the QualityNet and Quality Reporting Center websites, which can be accessed by clicking the icons on this slide. The IPFQR Program specifications manual contains information about program requirements, program measures, and various tools pertinent to the IPFQR Program.

Has there been any turnover at your facility within the last several months? If so, then we want to hear from you. You can let us know about any changes to points of contact at your facility by clicking the Contact Change Form link on this slide and sending the information to us by following the instructions on the form. Would you like to receive email communications about future IPFQR Program webinars, program updates, resources, and other announcements? Then, we invite you to sign up for the IPFQR Program Listserve by clicking on the Listserve Registration icon on this slide. Another way to find information about upcoming webinars is to click on the Upcoming Webinars icon on this slide. When you have general questions about the IPFQR Program or need clarification about any of the program measures, please be sure to leverage the Find an Answer function in the QualityNet Question and Answer Tool. If you do not see a published article in the question-and-answer tool related to your question, then you can submit your inquiry to us via the question-and-answer tool, which you can access by selecting the question-and-answer tool icon.

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The best way to reach us when you have questions about IPFQR Program eligibility, such as next steps for a newly-eligible provider or ways to notify us that an IPF is closed or will be closing, is via email. Just click on the Email Support icon to send an email to us regarding eligibility updates. Finally, you can also contact the VIQR support contract team via phone at (866) 800-8765 or via secure fax at (877) 789-4443.

Once again, I'd like to thank our guest speakers, Elizabeth Kalayil and Lori Haas, for taking the time to review this information with us today. This concludes today's webinar. Thank you for your time and attention.