Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

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

Reporting Healthcare Personnel COVID-19 Vaccination Data Refresher

Presentation Transcript

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Evette Robinson: Hello. Welcome to the educational webinar, *Reporting Healthcare Personnel COVID-19 Vaccination Data Refresher*. My name is Evette Robinson, and I am the IPFQR Program Lead for the Inpatient Value, Incentives, and Quality Reporting, or VIQR, Support Contractor. I will be the moderator for the event.

Our speakers for today's webinar are Elizabeth Kalayil and Sherese Dennard from the Centers for Disease Control and Prevention. Elizabeth Kalayil is a Public Health Analyst with the Lantana Consulting Group. She is based in the Division of Healthcare Quality Promotion at the CDC. Elizabeth earned a Master of Public Health degree in International Health from Emory University. Sherese Dennard is a Program Analyst with Goldbelt Incorporated. She is also based in the Division of Healthcare Quality Promotion at the CDC. Sherese has a Master of Education from Central Michigan University. At this time, I will turn the presentation over to our first presenter, Elizabeth Kalayil.

Elizabeth Kalayil: Thank you, Evette. During the January 20, 2022, webinar, *NHSN Enrollment and Reporting Healthcare Personnel COVID-19 Vaccination Data*, attendees received step-by-step instructions on how to complete the following: NHSN enrollment and COVID-19 Coverage Among Healthcare Personnel measure data submission and verification.

The purpose of this webinar is to provide a refresher training on how to report COVID-19 vaccination data for healthcare personnel and learn about updates to the NHSN module.

In terms of learning objectives, those participating in the webinar will be able to ensure proper NHSN enrollment for inpatient psychiatric facilities and identify the steps facilities should follow to successfully report data through NHSN. Participants will also be able to review how to report cumulative vaccination data and run data reports. During the last part of the webinar, frequently asked questions and data reporting updates will be highlighted.

Now, we will go over how to get started in NHSN.

The first step to getting started in NHSN is the enrollment process. Facilities that are currently not participating in NHSN and wish to participate must enroll their facility in NHSN. 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. 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 information about the HPS Component, please visit the second link listed on this slide.

We will now go into a bit more detail on the activation process. To activate the component, the Facility Administrator logs into SAMS. Please note that only the NHSN Facility Administrator can activate a new component. Next, click on NHSN Reporting from the SAMS log in page. Activating the HPS Component is only necessary for facilities currently enrolled in another component. Also, the component only needs to be activated one time. From the home page, the Facility Administrator will select Add/Edit Component under the Facility tab. Next, the Facility Administrator will check the HPS Component box. The Facility Administrator can then add the name, phone, e-mail, and address for this person so that he/she can be reached if CDC/NHSN has updates or questions about the HPS Component.

If your facility is not enrolled in NHSN, you must designate an individual to be your NHSN Facility Administrator and then complete the five-step enrollment process. However, if your facility is already enrolled in NHSN, you must contact your NHSN Facility Administrator and ask him or her to activate the HPS Component. If you are unsure of your facility's status with NHSN, please e-mail nhsn@cdc.gov for more information.

CMS IPF units that are associated with a facility, such as an acute care, critical access, or long-term care hospital, and have a distinct CCN from the parent hospital, need to make sure that they are mapped appropriately as locations. The link listed on this slide provides instructions on how this can be accomplished.

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

We will now go over a few main points for new users to NHSN. Once the new user information has been saved in NHSN, that user will receive an automated Welcome to NHSN e-mail with the instructions to begin the process of becoming a NHSN user. After agreeing to the NHSN Rules of Behavior, the new user will receive an automated e-mail to register with SAMS. SAMS 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. Note that the SAMS process has been revised recently. So, please review the updates to this process by clicking the link on this slide. NHSN highly recommends that, if there is a change in the NHSN Facility Administrator, he or she should transfer that role to another user in NHSN 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 to have that role manually reassigned to the new NHSN Facility Administrator. You can request this reassignment using the Facility Administrator Change Request Form at 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.

When reporting data in NHSN, it is important to remember that these data should be reported cumulatively. The next couple of slides will address what cumulative data are and how to report it.

Cumulative vaccination data are the total number of individuals in the facility who have ever received the COVID-19 vaccine since it became available. This is in contrast to incident vaccination data, the number of new individuals who received a vaccine in a specific week. Please note that incident data are not used for reporting COVID-19 vaccination data in NHSN.

This slide shows you an example of how to report cumulative COVID-19 vaccination data. These data are for healthcare personnel who were eligible to have worked at the facility for at least one day during the week of data collection. In this example, the facility had 50 healthcare personnel who were eligible to have worked. Ten of those healthcare personnel received their first dose of the Pfizer COVID-19 vaccine, while five healthcare personnel received dose 1 and dose 2 of the Pfizer COVID-19 vaccine.

This example shows how COVID-19 vaccination of healthcare personnel looks during the second week of reporting. Five more healthcare personnel received their first dose of the Pfizer COVID-19 vaccine during this week. So, at the end of the second week, the facility reports that a total of 15 healthcare personnel received their first dose of the Pfizer COVID-19 vaccine. You would also still report the five healthcare personnel who received both dose 1 and dose 2 of the vaccine for the previous week.

This example shows how COVID-19 vaccination of healthcare personnel looks during the third week of reporting. Fifteen healthcare personnel received their first vaccine dose in week two. You would then add three healthcare personnel who received their first vaccine dose in week three, which gives you a total of 18. Of the 18 healthcare personnel, 10 received their second vaccine dose in week three. Therefore, you would subtract 10 from 18. So, for week three, the cumulative number of healthcare personnel who received their first vaccine dose should be reported as eight.

This example also shows how COVID-19 vaccination of healthcare personnel receiving their first and second vaccine doses looks during the third week of reporting. Five healthcare personnel received their second dose in week two. You would then add the 10 healthcare personnel who received the second dose in week three. Therefore, for week three, the cumulative number of healthcare personnel who received the second dose should be reported as 15.

Now, I will turn the presentation over to my colleague, Sherese Dennard.

Sherese Dennard: Thank you, Elizabeth.

Analysis and reporting options are available in NHSN for facilities to generate reports on their COVID-19 vaccination data. Facilities should note that the COVID-19 Vaccination folder includes a default variable list with new healthcare personnel categories, while those in the COVID-19 Vaccination Pre-10.0 NHSN Release folder contains the old default variable list.

One type of report that we would like to highlight here 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 and report options, quick reference guides on how to run various reports can be found using the links listed on this slide.

We will now address some commonly asked questions related to data reporting.

The first question involves the inclusion of vendors as HCP. The CDC has decided to change guidance on counting vendors working in healthcare facilities. Vendors providing care, treatment, or services should now be included in the other contract personnel category if they work in the facility on a regular (weekly) basis, regardless of clinical responsibility or patient contact.

Before we continue with our questions, I have two notes on reporting. Firstly, we understand it is difficult for facilities to determine vaccination status of their vendors. If facilities are unable to gather this information, the individual can be marked as "unknown" vaccination status. Additionally, please note that, even though reporting of other contract personnel category is required for NHSN surveillance, it is not part of the COVID HCP measure data sent to CMS for the IPFQR Program.

Question 2 addresses the question of how frequently facilities must report COVID-19 vaccination data. In answer to this question, NHSN allows for and encourages weekly submission of COVID-19 vaccination data via the Weekly COVID-19 Vaccination Module.

Facilities that are part of the Inpatient Psychiatric Facility Quality Reporting Program must submit COVID-19 vaccination data via the Weekly COVID-19 Vaccination Module for at least one week per month to fulfill CMS reporting requirements. Facilities can select any week within the month to report data. Facilities may choose to report these data weekly. COVID-19 vaccination data should be submitted by the end of the quarter, as defined by CMS. A week is designated as belonging to the month of the week-end date. For example, reporting data for the week of September 27 through October 3 is considered as submitting data for a week in October.

Question 3: My IPF unit has a distinct CCN, with an "S" in the third position, and is part of a larger (acute care) hospital. Why do I need to map the location of the IPF when it is in a building that is separate from the main hospital?

Mapping the location of the IPF unit, even those that are not physically located within the main hospital, is necessary to ensure that the data submitted by the distinct IPF unit are received by CMS to meet IPFQR Program reporting requirements pertaining to the annual payment update and to ensure accurate public reporting of the COVID HCP measure data for the IPF unit. Once the IPF unit is added as a location of the parent hospital, the IPF unit-specific CCN is linked with that location. IPF units that have a distinct CCN from the parent hospital do not need to enroll or activate the Healthcare Personnel Safety, HPS, Component separately, unless their parent hospital is not already enrolled in NHSN. View more information about how to map an IPF unit or update an existing IPF location at the link on this slide.

This last question covers how to report data for IPF units. The question is: If my IPF unit has the exact same CCN as my acute care or critical access facility, do I need to report the IPF unit data separately from this facility? The answer is no. If the IPF unit CCN is 100 percent identical to the CCN of its acute care or critical access facility, then separate healthcare personnel COVID-19 vaccination summary data reporting is not required by CMS.

Therefore, counts of healthcare personnel working in the IPF unit can be included in the total counts for the acute care or critical access facility. However, IPF units whose CCNs differ from the acute care or critical access facility CCN by even one letter or number must either be mapped as locations of the parent facility or enrolled as a separate NHSN facility, and their data must be reported separately.

This question pertains to how IPFs can utilize .CSV file uploads: Can I submit COVID-19 vaccination data for an IPF and unit in the same .CSV file as the COVID-19 vaccination data for its affiliated acute care or critical access facility? The answer is no. A .CSV file can only contain one OrgID per reporting week. Facilities or groups that wish to report COVID-19 vaccination data for an IPF and unit via .CSV file should submit IPF and/or IRF unit data in a separate .CSV file from the acute care or critical access facility data.

Finally, we will discuss recent updates to the NHSN vaccination modules.

We are excited to announce that the Data Tracking Worksheet was updated on NHSN web pages January 11, 2022. We would also like to inform users that NHSN has created a new functionality in the application to allow users to manage their person-level tracking worksheet in the application, which will be available in a future release.

Another update is that the eligibility question for additional and booster doses has been removed. In the February 2022 release of the NHSN application, the question on the data collection form that asked for facilities to report the number of individuals eligible to receive an additional or booster dose of the COVID-19 vaccine was removed. This was previously Question 4 on the form. Removing the question on the number of individuals eligible to receive an additional or booster dose has simplified reporting for users. In addition, most individuals are now eligible for a booster dose five months after receiving their primary series vaccination. So, it is no longer necessary to collect. The image on this slide is how the screen now appears with the eligibility question removed.

Note, with the eligibility question removed, the question on the number of individuals who have received an additional or booster dose, which was previously Question 5, is now Question 4.

I will turn the presentation over to Evette, who will address the next topic.

Evette Robinson: Thank you, Sherese. Let's review the important CMS IPFQR Program deadlines for the COVID-19 Vaccination Coverage Among Healthcare Personnel measure.

This table shows the upcoming CMS deadlines for reporting COVID HCP measure data for encounters through Quarter 4 of 2022. Any questions about the COVID HCP measure reporting requirements and deadlines for the IPFQR Program can be directed to the email address on this slide or the QualityNet Question and Answer Tool, which I will review shortly.

I want to thank our guest speakers for today's presentation, Elizabeth Kalayil and Sherese Dennard, for providing an excellent overview of the NHSN enrollment and COVID HCP measure data submission processes. In the next several slides, I will review helpful resources pertaining to these topics, as well as the IPFQR Program in general.

This slide includes a list of acronyms used in this presentation.

This slide includes links to various resources, including the Fiscal Year 2022 Inpatient Psychiatric Facilities Prospective Payment System Final Rule and NHSN enrollment resources for IPFs.

This slide lists additional resources that are available to facilities for reporting COVID-19 vaccination data through NHSN for healthcare personnel.

CMS recommends that IPFs refer to the latest version of IPFQR Program resources, which are located on the QualityNet and Quality Reporting Center websites. They can be accessed by clicking on the icons on this slide.

We encourage you to keep us up to date with points of contact at your facility by sending the completed Contact Change Form to us whenever there are staff changes relevant to the IPFQR Program or other quality reporting programs. We also recommend that you sign up for the IPFQR Program Listserve, if you have not already, by clicking on the Listserve Registration icon on this slide. Once enrolled in the IPFQR Program ListServe, you will receive communications pertaining to IPFQR Program webinars, program updates, and other announcements. Information about upcoming webinars can be viewed by clicking on the Upcoming Webinars icon. We encourage everyone to leverage the Find an Answer function in the QualityNet Question and Answer Tool to find information about program requirements and measures, OR, if not found, submit your inquiries to us via the tool. We also welcome your recommendations for future webinar topics via the Q&A tool, which you can access by selecting the Q&A Tool icon. You can click on the Email Support icon to send an email to us at IPFQualityReporting@hsag.com regarding eligibility, such as next steps for a newly-eligible provider or notification that an IPF is closed or will be closing. Contact the VIQR support contractor via phone at (866) 800-8765 or secure fax at (877) 789-4443.

We ask that you email any questions pertinent to the webinar topic to nhsn@cdc.gov, using the information provided on this slide. If you have a question about NHSN enrollment, include IPF Enrollment Guidance in the subject line. For questions regarding reporting HCP COVID-19 vaccination data, enter Weekly COVID-19 vaccination - IPF in the subject line. If your question pertains to a specific slide, we ask that you include the slide number in the body of the email.

This concludes the content portion of the webinar, *Reporting Healthcare Personnel COVID-19 Vaccination Data Refresher*. As a reminder, you will have the opportunity to complete a survey at the end of this presentation. We value your feedback and welcome your suggestions regarding future presentations. Thank you for your time and attention.