

MNTrac and TeleTracking Reporting Frequently Asked Questions

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Frequently Asked Questions

Process and General Questions

1. When is my deadline for submission?

Please ensure to upload all data by 12 noon, each day, 7 days per week. Thank you!

Effective Monday, August 10, 2020, hospitals can begin to submit their PPE data three times a week. Please note that if you have an established and streamlined process in place to capture this information and do not wish to disrupt the process – stay the course. For our state reporting purposes, we will use PPE data submitted on Mondays, Wednesdays, and Fridays.

2. Do I have to wait until 9 a.m. to submit my upload (until I receive the daily alert)?

No, as long as the submission is completed each day, 7 days a week, before 12 noon, it can be submitted as early as desired. The MNTrac alert notification is a courtesy reminder, however, you do not have to wait for it to go out (at 9am) before submitting.

3. TeleTracking Resources

- [MDH MNTrac Webpage](#)
- [MNTrac and TeleTracking Data Dictionary](#)
- [Hospital Data Updated Memos](#)

[Regional Healthcare Preparedness Coordinators](#) (RHPCs) are the first go to for assistance with TeleTracking. The MDH team is a resource as well, Health.HPP@state.mn.us.

[\(HHS\) TeleTracking Frequently Asked Questions Webpage](#)

[Updated Guidance from HHS July 29, 2020](#)

4. TeleTracking is emailing Hospitals saying the submission deadline is 5:00 p.m. EDT. Have there been any official changes to the MNTrac submission deadline in Minnesota?

There have not been any changes to the MNTrac deadline. In order for MDH to submit on Hospitals' behalf, MDH needs all submissions by 12 noon, daily, 7 days per week, so that there is sufficient time to compile, verify and address any errors in the data before meeting the TeleTracking deadline.

5. In the recent memo (Friday 8/7/2020), Angie Koch indicated there might be an additional two fields: "Total Confirmed COVID-19 Previous Day Admissions" and "Total Suspected COVID-19 Previous Day Admissions." What is the status of this change?

The latest guidance from TeleTracking indicates that these fields will be added Thursday, August 13, 2020.

6. Do I still need to complete the REDCap Survey and NHSH uploads/reports?

No, fortunately the new MNTrac - TeleTracking import template satisfies all Bed, PPE, and Remdesivir requirements. The goal is to reduce reporting burden and streamline our process.

7. How do I know which TeleTracking Template to use and how do I know if it has been updated?

Please use the template that is attached to the NHSN/TeleTracking Widget in MNTrac. If changes occur RHPCs and Hospitals will be notified and the template will be replaced in MNTrac and available at the newly updated [MNTrac webpage](#). In addition, each import template will have a date tagged to it and therefore, you will be able to cross reference if you have the most updated spreadsheet.

8. When did the TeleTracking template change? Why?

The new updated template will be available in MNTrac on 8/13/2020 (template will also include this date). Previous versions 7/23/2020 and 7/28/2020 are obsolete. The reason the template has been updated and modified is due to the transition from NHSN to TeleTracking as well as the increased data requests from the White House COVID Task Force and U.S. Department of Health and Human Services. Changes include addition of new data points, re-definition of field requirements, and refinement of column header titles. Updates to the template are likely to continue until the transition is complete.

9. Why are there two upload templates in MNTrac?

The MNTrac System is used in other states across the country, some of which are still using the NHSN template to upload data. However, the vendor placed the TeleTracking template above the NHSN template, in the NHSN/TeleTracking widget in MNTrac, for easy access for Minnesota hospitals!

10. Aside from TeleTracking, Do I still have to do the daily bed availability in MNTrac?

Yes, that information is used by hospitals to identify resources when deciding patient placement.

11. Do I need to submit TeleTracking data to MNTrac if I am already providing it directly into the federal TeleTracking system?

Yes, it is a State of Minnesota requirement, as this important data is not only used by the Federal Government, but also by MDH, other State Agencies, and the Governor's office to plan and respond to the COVID-19 crisis.

12. Some multi-state healthcare systems are reporting to TeleTracking directly, so reporting to MNTrac is duplicative. Do we need to report to MNTrac if our health system is submitting data for our hospital directly to TeleTracking along with the system's hospitals in other states?

Yes, even though a Minnesota hospital may be part of a multi-state system that is reporting directly to TeleTracking, please also report to MNTrac.

13. By submitting this information MDH is reporting to TeleTracking thus fulfilling our obligation on reporting and we do not need to report in to TeleTracking, correct?

Yes, the state is fulfilling the request on behalf of the hospitals.

14. For hospitals or systems that are submitting PPE and remdesivir directly to TeleTracking but submitting bed capacity and patient data to MNTrac, how will all the data be put together to account for ICU confirmed and suspected COVID?

It is a State of Minnesota requirement to upload all the data included in the TeleTracking Template as specified in HHS guidance, as this important data is not only used by the Federal Government, but also by MDH, other State Agencies, and the Governor's office to plan and respond to the COVID-19 crisis. This also will facilitate being able to put all the data together for reporting.

15. Is direct reporting to TeleTracking necessary?

Direct reporting to TeleTracking is not necessary. All hospitals are asked to provide the required TeleTracking data to MDH via the MNTrac system. The MDH Team will report data from all hospitals to TeleTracking.

16. What if I report directly to TeleTracking, does my upload to MNTrac overwrite the data reported directly to TeleTracking?

If a hospital submits data directly to TeleTracking and to MNTrac, the direct submission and MDH's submission of the MNTrac data will each create a separate record (of "row of data" so to speak) in the HHS TeleTracking database.

17. What is the impact of reporting Personal Protective Equipment (PPE) inventory and usage?

Any data, including PPE, are reviewed by both state and federal partners. Although data are used for planning purposes, we also ensure that state and federal leadership do not implement decisions until further research is conducted to ensure data are accurate.

18. Can I upload multiple facilities on one template?

Yes. This functionality is especially helpful to Hospital Systems. Just make sure each facility has its own row of data under the TeleTracking column headings. Coming soon – **MNTrac Bulk (multi-facility) Uploads - Hospital Systems** how-to guide. In the meantime please reach out to your RHPC or Health.HPP@state.mn.us for assistance.



19. Can I upload multiple collection dates of data on one TeleTracking Template into MNTrac?

Yes, you can use one template with multiple rows of collection dates as long as each date has its own row. Please note that any changes to “old” data will be uploaded if it is included in this batch upload.

20. Our hospital system submits the TeleTracking CSV file via an email to Health.HPP@state.mn.us; can we continue to do that? I don't have the instructions on HOW TO go the "WIDGET" or do I have a System LOGIN from MNTrac.

Yes, definitely, please proceed with emailing the file daily to the MDH data team for as long as needed. As mentioned above, coming soon – **MNTrac Bulk (multi-facility) Uploads - Hospital Systems** how-to guide. Also, if you would like to be set-up with a MNTrac account, email a request to Health.HPP@state.mn.us.

21. Can multiple people complete and submit different parts of the template?

Yes, multiple people within a facility can complete and submit different parts of the TeleTracking Template. This is a new feature added by ImageTrend as we recognize that you will most likely have multiple people on your data team filling out various portions of your report. Just make sure each submission contains the collection date, the facility NHSN ID, and that the submission occurs before 12 noon, daily. **Note:** If two people or more upload a file containing data in the same field, the later upload overwrites the earlier upload(s) for that field.

22. If several people from a facility are entering the spreadsheet, some fields will be empty on each spreadsheet. Won't that lead to an error message?

Blanks will not create an error. As long as the collection date and the NHSN number is on the template you should not get an error

23. So I can submit information for two hospitals using the same spreadsheet (import once)? As long as I have both NHSN IDs in the correct rows?

Yes - as long as each line has a distinct NHSN ID.

24. Which fields are required for the MNTrac Upload?

The required fields are “Collection Date” and “NHSN ID”. Please reach out to your Health Care Coalition if you have a question about your NHSN ID. You can also find your NHSN ID in your agency setup – Identification Tab. See required fields for Remdesivir distribution in the [Remdesivir](#) section below.

25. How do I know what the definitions are for each data field?

Please reference this [MNTrac and TeleTracking Data Directory](#), which provides validation rules and data descriptions for the TeleTracking column identifiers. It is essential that you read this document. The data Directory is attached to this email and is attached to each morning’s MNTrac Daily Bed, Ventilator, and TeleTracking Updates COVID-19 Alert.

26. Can we submit the transposed version of the TeleTracking Template?

No, the TeleTracking Template will only upload in the column format with the correct column headers along the top row.

27. Can we submit the TeleTracking Template as an xlsx file instead of a csv file?

An .xlsx file will not upload into MNTrac, the TeleTracking Template will only upload as an MS Excel .csv file.

28. How do I test my MNTrac TeleTracking upload?

Go into reports and find the report titled “Visible TeleTracking Report.” Coming soon – **MNTrac Visible TeleTracking Report** how-to guide. In the meantime please reach out to your RHPC or Health.HPP@state.mn.us for assistance.

29. What happens if we don't have the option to click on "reports", to verify an upload – the Report link doesn't appear in the blue bar above the agency summary page?

This is likely a MNTrac **Content Rights** matter. Please contact your MNTrac Facility Administrator, RHPC or Health.HPP@state.mn.us.

30. Can MDH provide instructions on uploading the completed TeleTracking template?

A How-To guides on uploading is in progress. In the meantime please contact to your RHPC or email Health.HPP@state.mn.us for assistance.

31. Whom do I contact for help?

[Regional Healthcare Preparedness Coordinators](#) (RHPCs) are the first go to for assistance with TeleTracking. The MDH team is a resource as well, Health.HPP@state.mn.us.

For the latest version of the [MNTrac and TeleTracking Data Dictionary](#), [TeleTracking/MNTrac Submission Frequently Asked Questions](#), and **Hospital Data Updated Memos**, please visit the newly launched [MDH MNTrac Webpage](#).

Data Field Questions

32. Aside from the required fields, what happens if I don't fill in all the data points in the template (i.e. if I leave some of them blank)?

The data (or lack thereof) will still be accepted by TeleTracking. Blank fields will be uploaded and registered as blanks in the TeleTracking system. However, in efforts to be compliant with HHS requests, we want to ensure that every field has a response – to the best extent possible.

33. What are some of the common errors that occur with uploads and how do you fix them?

- **Column headers are incorrect (misspelled, extra spaces, hidden characters).** If your file won't upload, please make sure the column headings match the column headings on the TeleTracking template exactly.
- **Required fields do not contain a numeric value.** As indicated above in the Data Directory, the following fields must have at minimum a zero (0) or the submission to TeleTracking will be rejected:
 - Confirmed_Patients
 - Admits_In_Last_24_Hrs_Confirmed_Adult (new field, 8/13/2020)
 - Suspected_Patients
 - Admits_In_Last_24_Hrs_Suspected_Adult (new field, 8/13/2020)
 - ICU_Confirmed_Patients
 - ICU_Suspected_Patients
- **The data entered into a cell does not mesh/align with data Validation Rules.** For example, the field "Confirmed_Patients" cannot contain a smaller number than the field "Confirmed_Patients_Adult" because adult patients is a subset of all confirmed patients. The math doesn't add up. Several fields are similar to these. Please reference the Data Directory for the Validation Rules and review your data for alignment before uploading.
- **Errors in the "PPE_Source" field.** There are two possible selections ""Managed by Health System" or "Managed by Facility" for this data point and they have to be spelled correctly without extra spaces, even at the end of the phrase. This applies also to the several "yes/no" responses.

34. What are Parent and Child Fields?

A Child Field is the subset of a Parent Field so the number entered in a child field cannot be greater than the number entered in a parent field. If this occurs TeleTracking will not accept the data. The [MNTrac and TeleTracking Data Dictionary](#) provides rules associated with these types of fields. For example, Total Beds is a Parent Field and Total Beds Adult is a Child Field.

35. Some of the fields require text answers – how do I answer those?

Please refer to the [MNTrac and TeleTracking Data Dictionary](#) to verify that you are putting in the correct type of response. For yes or no answers please type in the full YES or NO, not only "y" or "n". Field, PPE_Source asks you to answer either "Managed by Health System" or "Managed by facility". Please type in the full response and make sure they are not extra space before, within the phrase, or after the phrase.

36. What is the definition of critical healthcare personnel?

Each facility should identify staffing shortages based on their facility needs and internal policies for staffing ratios. The use of temporary staff does not count as a staffing shortage if staffing ratios are met according to the facility's needs and internal policies for staffing ratios.

37. If you enter zero for "Admits_In_Last_24_Hrs_Confirmed" or zero for "Admits_In_Last_24_Hrs_Suspected", can you leave age brackets for those data points blank?

No, a zero should be entered in each age bracket. A blank means you do not know or do not have the data.

38. If you enter zero for "Confirmed_Patients" or "Suspected_Patients", can you leave "Confirmed_Patients_Adult" and "Suspected_Patients_Adult" blank?

No, a zero should be entered. A blank means you do not know or do not have the data

39. For Total_Beds_Adult: the data description states "includes all ICU beds". Should Pediatric and Neonatal ICU beds be counted for this data point?

No, only count total adult ICU beds.

40. Do Inpatient Beds include Maternity beds?

Yes, HHS (TeleTracking) confirmed that maternity beds should be included as inpatient beds.

41. Can you define "staffed" beds?

Staffed Beds count is dynamic and should be based on the number of hospitalized patients and the number of staff needed to care for them.

42. For total staffed beds, looks like ED staffed beds should be included. Our ED staffed bed capacity changes very frequently. Is it appropriate to use number of operational ED beds in this total bed count?

Yes it would be appropriate to county operational ED beds.

43. NHSN wanted nursery beds counted in the total bed count. Is this true for the TeleTracking reporting?

Staffed Beds count is dynamic and should be based on the number of hospitalized patients and the number of staff needed to care for them. The total number of all staffed inpatient and outpatient beds in your hospital, including all overflow, observation, and surge/expansion beds used for inpatients and for outpatients (includes all Nursery, ICU, ED and observation).

44. Please confirm which types of beds should be included in bed count totals.

The total number of all staffed inpatient and outpatient beds in your hospital, including all overflow, observation, and surge/expansion beds used for inpatients and for outpatients (includes all Nursery, ICU, ED and observation).

45. In regard to "staffed beds", I have considered staffed beds to be the beds we actually have staff to care for the patients. E.g. If we have 25 total beds and nursing staff available for 10 patients, we would have 10 staffed beds. Please clarify.

Yes, you are reporting correctly.

46. Our vendor delivers swabs that they have, sometimes nasal swabs sometimes oral. Do we add oral swabs to the sheet?

There is a field for Nasal_Swabs_3Day_Supply and a field for Nasal_Pharyngeal_Swabs_3Day_Supply.

47. An ED visit may not start as a COVID visit but may go that direction. So anyone that is swabbed should be counted?

ED patients seeking routine pre-procedure screening unrelated to COVID-19 should be counted in total ED volume, but not for suspected COVID-19 patient count

ED patients being admitted for non-COVID-19 should be counted in total ED volume, but not for suspected COVID-19 patient counts.

Suspected is defined as a person who is being managed as though he/she has COVID-19 because of signs and symptoms suggestive of COVID-19 as described by CDC's guidance but does not have a laboratory positive COVID19 test result. This may include patients who have not been tested or those with pending test results. The count may also include patients with negative test results but whom continue to show signs/symptoms suggestive of COVID-19. Do not include those who are waiting for a screening test result as suspected cases unless they meet the signs and symptoms criteria described above.

48. Anticipated critical medical supply shortage, is there a text count limit?

It does not appear to have a limit.

49. Please clarify the guidance for the "Days on Hand" data points.

Enter YES for each supply type for which your facility is able to maintain at least a 3- day supply. Enter NO for those for which your facility is not able to maintain at least a 3- day supply. Enter N/A if the item is not applicable for your facility.

- Ventilator supplies (any supplies, including flow sensors, tubing, connectors, valves, filters, etc.)
- Ventilator medications
- N95 masks
- Other respirators such as PAPRs or elastomerics
- Surgical masks
- Eye protection including face shields and goggles
- Single-use gowns

- Exam Gloves
- Laboratory – nasal pharyngeal swabs
- Laboratory –nasal swabs
- Laboratory –viral transport media

Remdesivir

50. What are the minimum fields required for the allocations of Remdesivir?

In addition to Collection Date and NHSN ID, the required fields for Remdesivir are the following:

- Confirmed_Patients
- Admits_In_Last_24_Hrs_Confirmed_Adult (new field, 8/13/2020)
- Suspected_Patients
- Admits_In_Last_24_Hrs_Suspected_Adult (new field, 8/13/2020)
- ICU_Confirmed_Patients
- ICU_Suspected_Patients
- Remdesivir_Current_Inventory
- Remdesivir_Used_Previous_Day

Note: We want to make a distinction, regarding the list of TeleTracking data points above, that there are Federal (HHS) required fields and State of Minnesota required fields for Remdesivir allocation.

Effective on Monday, August 3, 2020, MDH moved forward with utilizing the following TeleTracking data elements, from the list above, for calculating Remdesivir allocations to Minnesota hospitals.

- Confirmed_Patients
- Suspected_Patients
- Patients_Using_Ventilation

MDH is requiring this data based on new treatment recommendations from the National Institute of Health which place priority for treatment on those patients on oxygen alone. A [full guidance update](#) is now available.

51. With the changes to Remdesivir, can you clarify if we are still entering # of vials in inventory and number used in the previous day?

Yes, please continue to answer the Remdesivir questions on the TeleTracking template, including # of vials in inventory and number used in the previous day.

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Contact health.communications@state.mn.us to request an alternate format.

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