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ADMISSION, DISCHARGE, and EQRS

Phyllis Haas, MSW, LMSW
Patient Engagement Specialist
Quality Insights Renal Network 5

CMS PROTOCOL REGARDING . . .

- Admission/Readmission
- Discharge
- Involuntary Discharge
- EQRS Reporting

ADMISSION

New ESRD Patient

Transfer In

Restart

Initial 2728 required

Patient transferring into facility

Submit Re-Entitlement 2728 if > 1 year since stopping dialysis

Patient restarting dialysis

Discharge reason was:

Discontinue

Recover Function

Other

Lost to Follow-up

ADMISSION (cont)

After Transplant Failed Submit Re-Entitlement 2728 if
> 3 years since receiving
kidney transplant
Kidney transplant failed
Patient restarting chronic
outpatient dialysis

ADMISSION (cont)

To Support Transplant

Use this admit reason only for patients who require temporary dialysis after receiving a kidney transplant

If a patient's transplanted kidney is still functioning, do not admit them to your facility

If the transplant fails, admit them as, "Dialysis After Transplant Failed"

Discharge

Involuntary Discharge

Per Conditions for Coverage ,
all IVD's MUST be reported to
the Network

Lost To Follow Up

Used when unable to locate a
patient

Facility MUST contact the
Network before selecting this
option

Transfer

Patient transferred to CMS-
certified dialysis facility in the
US

DISCHARGE (cont)

Other

Patient is in prison and is receiving treatment in prison
Patient is Out Of Country for > 30 days

Discontinue

Patient and/or family wishes to permanently stop dialysis

Death

Patient died while a patient at facility

Submit 2746 form within 14 days

DISCHARGE (cont)

Transplant in US

Patient received kidney transplant in US

Transplant outside US

Patient received kidney transplant in another country

Recover Function

Patient recovered NATIVE kidney function and no longer requires dialysis

Does not apply to transplanted kidney

LOST TO FOLLOW UP REMINDER

- Facilities **MUST** contact the Network before updating EQRS with a Lost to Follow Up status
- If the patient cannot be located and there has been an inability to contact the patient for over 30 days, the following should occur:
 - Request a welfare check by authorities
 - Request intervention from emergency contacts
 - Determine if the patient has been hospitalized, incarcerated, or left the country (Refer to the table for guidance on how to document these events in EQRS)
- **Should the patient be “found”:**
 - The facility must readmit the patient
 - The previous chair assignment does not have to be provided
 - If a chair is unavailable, the facility must assist in securing treatment at another location until space becomes available

CONCLUSION

- Quality Insights Renal Network 5's overarching goal is to support and advocate on behalf of ESRD patients
- To that end, Network staff are experts in their respective fields and available to provide guidance, regulatory interpretation, and mediation as requested
- Questions and/or recommendations may be directed to The Network online at www.QIRN5.org, telephonically at 804 320 0004, via FAX at 804 320 5918, or USPS at PO Box 29274, Henrico, VA 23242