

Admit & Discharge Reasons

<ul style="list-style-type: none"> • NEW ESRD Patient This facility must complete and submit the Initial ESRD 2728 form in CROWNWeb within 45 days of patient start date. • TRANSFER IN As soon as patient admits into your facility- after receiving prior treatment Patient will then appear on the monthly PART. • RESTART Re-Entitlement 2728 is needed when re-starting dialysis after one (1) year of not dialyzing. • DIALYSIS AFTER TRANSPLANT FAILED Re-Entitlement 2728 is needed if patient returns to dialysis 3 or more years after receiving a kidney transplant. • DIALYSIS IN SUPPORT OF TRANSPLANT Admit as TRANSIENT if patient requires Kick-Start or Supportive Dialysis after receiving a kidney transplant. 	<ul style="list-style-type: none"> • INVOLUNTARY DISCHARGE – Per the Conditions for Coverage (CfC), all Involuntary Discharges MUST be reported to the Network. Contact the Network before using any of these options in CROWNWeb: <ul style="list-style-type: none"> ○ Lack of Payment ○ Physical Harm ○ Physical Threat ○ Non-Adherence ○ Property Damage/Theft ○ Verbal/Written Abuse/Threat • LOST TO FOLLOW UP – Facility must follow the CfC, and contact the Network for assistance before selecting this option.
<p style="text-align: center;">TRANSIENT PATIENTS</p> <ul style="list-style-type: none"> • All TRANSIENT patients who dialysis for LESS THAN 30 days must be entered into CROWNWeb [Even if only for one (1) treatment.] • Select “Yes” next to TRANSIENT when Transferring In. • Remember to Transfer Out the patient after he/she leaves your facility. *Then the previous facility will be responsible for patient. 	<ul style="list-style-type: none"> • TRANSFER <ul style="list-style-type: none"> ○ Dialysis Facility – Patient Transferred to a CMS-certified dialysis facility. ○ Long Term Care (LTC) Facility – Patient’s health status has declined and patient is not expected to return to outpatient dialysis but will receive long term care at a LTC Facility. ○ Hospice <ul style="list-style-type: none"> a. If patient is obtaining hospice care due to discontinuing dialysis treatment, please use DISCONTINUE. This is a patient’s/family’s choice and should ONLY be used when patient made the decision to stop treatment permanently. b. If the patient continues dialysis while receiving HOSPICE care you do not need to report anything in CROWNWeb ○ Hospital <ul style="list-style-type: none"> a. Use if the patient is hospitalized > 30 days but may return. b. If the patient is receiving long term care and will not return – use LTC Facility. * Note: CMS CfC expect that the patient will be readmitted to your facility upon discharge from a Hospital. This will require that you hold a chair. ○ Nursing Home – Use ONLY if the NURSING HOME provides dialysis On-Site for the patient. ○ Rehabilitation Center <ul style="list-style-type: none"> a. Use if that patient is in a REHABILITATION CENTER FOR > 30 DAYS. b. If the patient is receiving long term care – use LTC FACILITY. * Note: CMS Conditions for Coverage (CfC) expect that the patient will be readmitted to your facility upon discharge from a hospital. This will require that you hold a chair. • OTHER (Only use for one of the following reasons): <ul style="list-style-type: none"> ○ Patient is IN PRISON and is receiving treatment in prison. ○ Patient is OUT OF COUNTRY for more than 30 days. • DISCONTINUE – Patient/family wishes to permanently stop dialysis treatment. • TRANSPLANT in the U.S. – Patient receiving transplant at CMS-certified transplant facility in the U.S. • TRANSPLANT OUT of the U.S. – Patient receiving transplant in another country. • RECOVER FUNCTION – Patient recovered NATIVE kidney function and no longer needs dialysis (Does not apply to transplanted kidneys.) • ACUTE – Should not be entered in CROWNWeb. If the patient was thought to be CHRONIC, and then confirmed as ACUTE, you must discharge as ACUTE. • DEATH – Submit 2746 within 30 days.

To contact ESRD Network 5, please refer to the following information:

Phone: 804-320-0004 / Fax: 804-320-5918