

ESRD Network 4, Inc.



: Working for you

Information Management Data Manual

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Introduction

Network 4 utilizes an automated data processing (ADP) system designated by the Centers for Medicare & Medicaid Services (CMS). The Network utilizes the ADP systems designated by CMS to transmit and receive information electronically from CMS and the facilities. The Consolidated Renal Operations in a Web-enabled Network (CROWN) is the primary source of information to support CMS ESRD benefit determinations.

This manual is designed to assist Medicare-approved facilities and their staff in completing both the Centers for Medicare & Medicaid Services and Network 4 required data collection forms.

All Medicare-approved dialysis facilities are required to participate in Network activities, including the submission of data. The Department of Veterans Affairs (VA) participates in Network activities and VA facilities submit all required forms to the Network.

The Network uses information collected from renal-approved facilities to report to the Secretary of Congress, CMS and the general public, on the incidence and prevalence of ESRD in the Network area, treatment and transplant patterns in the Network and patterns of morbidity and mortality.

Included in this manual are instructions for completing the CMS non-reimbursement forms:

1. Chronic Renal Disease Medical Evidence Report, CMS-2728
2. ESRD Death Notification, CMS-2746
3. ESRD Facility Survey, CMS-2744

The following required data collection forms are also included to track patient events:

1. The revised Monthly Patient Activity Report (MPAR) that is due on the 10th of each month in the Network Office.
2. The Quarterly Patient Roster is due by the date that is specified by the Network.

This data is collected for entry into the National ESRD Registry, the United States Renal Data System (USRDS), Computer Science Corporation (CSC), the Program Management and Medical Information System (PMMIS), the local Network database and the Standard Information Management System (SIMS).

The Network 4 Information Management staff enters and validates data on all forms. If there are discrepancies with the data, the Network Data Entry Specialist will contact your dialysis unit with a Reject Report that is generated on inaccurate forms, i.e., CMS-2728 and CMS-2746. The incomplete form will remain in the "wait status" until the correct data is received in the Network office.

Semi-annually, through the CMS designated ESRD Information System, the Network profiles the facilities to determine their compliance rates for submitting timely, complete, and accurate CMS ESRD forms to the Network. Compliance rates are computed for both accuracy in forms completion and timeliness in forms submission. The facilities are required to maintain 80% compliance semi-annually and the combined rate of 90% annually.

Corrective action plans are required by the facilities that do not meet the 80-90% CMS required benchmark on forms submission.

Meet the Information Management Staff

The Information Management Staff is available to provide all Medicare approved and VA chronic ESRD dialysis and transplant centers with technical assistance on the completion of the CMS/Network required data.

We have provided a summary of the roles and responsibilities of our Information Management staff below:

Laura Kanchy, Data Entry Specialist II -

Responsible for entering data on a daily basis from the CMS-2746 (ESRD Death Notification) forms into the Standard Information Management System (SIMS). Inputs the Monthly Patient Activity Reports (MPARs) received from the dialysis and transplant facilities into SIMS in order to maintain accurate

patient information. Assists with the entry of CMS-2728 (ESRD Medical Evidence Report) forms into SIMS.

Amanda Topeck, Data Entry Specialist I -

Responsible for entering data on a daily basis from the CMS-2728 (ESRD Medical Evidence Report) into SIMS. Updates patient-level transplant information received from the United Network for Organ Sharing (UNOS) in SIMS. Assists with the entry of CMS-2746 (ESRD Death Notification) forms and MPARs received from the dialysis and transplant facilities into SIMS in order to maintain accurate patient information.

**Both Data Entry Specialists have their own assigned units in completing the required Quarterly Patient Rosters and ESRD Facility Survey, CMS-2744.*

Shane B. Perry, Director, Information Systems -

Responsible for the design, development, implementation, and technical support of the Network 4 Information System. Assures that the staff of Network 4 have uninterrupted access to data and/or information to perform responsibilities. Coordinates the Vital Information System to Improve Outcomes in Nephrology (VISION) and QualityNet Exchange for our VISION users.

Rhonda Lockett, Data Director - Supervises the two full-time Data Entry Specialists. Coordinates all data activity of the ESRD Program within Network 4. Collaborates with Network 4 staff on their data needs. Updates the Network Data Manual provided to the facilities based on CMS direction or data collection procedures. Coordinates the preparation of the Annual ESRD Facility Surveys to ensure accuracy and completeness of all surveys. Provides training and technical assistance to dialysis/transplant centers.

*The Information Management staff is available upon request to provide all renal-approved providers with technical assistance on forms completion.

*The Director of Information Systems assists all VISION-users in using the VISION software application.

ESRD Medical Evidence Report (CMS-2728)

End Stage Renal Disease Medical Evidence Report, Medicare Entitlement and/or Patient Registration Form

Purpose

In accordance with section 226A of the law (42, R.S.C.426: 20 CFR 405 Section 2133), the primary purpose of this form is to have a patient medically determined by a physician to have end stage renal disease for purposes of entitlement of Medicare benefits. The CMS-2728 form registers a patient with the USRDS where the data will be used for epidemiological studies. You may go to the USRDS website at the Kidney Epidemiology and Cost Center at the University of Michigan under contract to the Centers for Medicare & Medicaid Services, www.sph.umich.edu/kecc.

The CMS-2728 form is a registration form as well as an entitlement for Medicare benefits.

This form must be completed within 45 days of the patient's current ESRD episode.

When to complete the form?

Initial

For all patients who initially receive a kidney transplant instead of a course of dialysis.

For patients for whom a regular course of dialysis has been prescribed by a physician because they have reached that stage of renal impairment that a kidney transplant or regular course of dialysis is necessary to maintain life. The first date of a regular course of dialysis is the date this prescription is implemented whether as an inpatient of a hospital, an outpatient in a dialysis center or facility, or a home patient.

The form should be completed for all patients in this category even if the patient dies within this time period.

Re-entitlement

For beneficiaries who have already been entitled to ESRD Medicare benefits and those benefits were terminated because their coverage stopped 3 years post transplant but now are again applying for Medicare ESRD benefits because they returned to dialysis or received another kidney transplant.

For beneficiaries who stopped dialysis for more than 12 months, have had their Medicare ESRD benefits terminated and now returned to dialysis or received a kidney transplant. These patients will be reapplying for Medicare ESRD benefits.

Supplemental

Patient has received a transplant or trained for self-care dialysis within the first 3 months of the first date of dialysis and an initial form was submitted.

When should a form not be completed?

The form SHOULD NOT be completed for those patients who are in acute renal failure. Acute renal failure is a condition in which the native kidney function can be expected to recover after a short period of dialysis, i.e., several weeks or months.

What's on the form?

The CMS-2728 form contains data elements concerning gender, race and ethnicity, height, weight, employment status, Medicare coverage, primary cause of renal failure, co-morbid conditions, pre-ESRD laboratory values (within 45 days prior to the most recent ESRD episode), dialysis and kidney transplant data (type of transplant), self-dialysis, kidney transplant options, and the physician's identification and attestation information.

Revision

The CMS-2728 form was revised and was effective June 2005.

Note on Signature Requirements

Patient Signature: If the patient is unable to sign the form, a relative, a person assuming responsibility for the patient or a survivor, should sign it.

The CMS-2728 form requires a physician's signature of attestation certifying that the patient has ESRD.

A special note on lab values

Note: For those patients re-entering the Medicare program after benefits were terminated, Field 19a thru 19c should contain initial laboratory values within 45 days prior to the most recent ESRD episode. Lipid profiles and HbA1c should be within 1 year of the most recent ESRD episode.

Submitting the CMS-2728

This form must be submitted within 45 days prior to the most recent ESRD episode.

How to get a supply of the CMS-2728 forms

You may obtain a supply of the CMS-2728 form from local Social Security Administration Office. If the SSA office is unable to provide your unit with forms, please contact the Network office at 412/325-2250.

Additional Information

Please refer to the Power Point Slides (accompanying this manual) that make special note of the mandatory fields on the CMS-2728 forms.

See the attached sample of the Chronic Renal Disease Medical Evidence Report, CMS-2728.

ESRD Death Notification Form (CMS-2746)

Purpose

The ESRD Death Notification is required by law (42, U.S.C. 426 CFR 405 section 2133), and is completed by all Medicare-approved ESRD facilities upon the death of an ESRD patient. Its primary purpose is to collect facts about the death and the cause of death.

What's on the form?

There is identifying information on the form required for matching purposes, such as patient name, Medicare Insurance Claim number (HIC), and date of birth.

The form contains data elements such as place of death, hospice care prior to death, modality at the time of death, if renal therapy discontinued, and prior transplant information.

Revision

The CMS-2746 form was revised and was effective October 2004.

What is new on the form?

This form has been revised to capture the last dialysis date and if patient received hospice care prior to death. Withdrawal from dialysis has been included on the death form under causes of death. ***Note:** "Withdrawal from Dialysis" cannot be used for **primary** cause of death.

Submitting the CMS-2746

Complete the ESRD Death Notification, CMS-2746, within 2 weeks of the date of death.

Submit the form to the Network within 30 days of the date of death.

How to get a supply of the CMS-2746 forms?

You may contact the Network office to obtain a supply of the ESRD Death Notification form.

Additional Information

Please refer to the Power Point Slides (accompanying this manual) that make special note of the mandatory fields on the CMS-2746 form.

See the attached sample of the ESRD Death Notification, CMS-2746.

ESRD End of Year Facility Survey (CMS-2744)

The ESRD Facility Survey is designed to capture only a limited amount of information concerning each Federally approved renal facility's operation. It is not intended to yield information on the full range of ancillary services or activities (e.g. referrals, graft outcome, etc).

Every facility/center approved by Medicare to provide services to ESRD patients must furnish the information requested in the ESRD Facility Survey (42 U.S.C. 426; 20 CFR 405, Section 2133). It is also the facility's/center's responsibility to provide patient and treatment counts to their local ESRD Network upon termination of operations.

PLEASE NOTE THAT FACILITIES CERTIFIED AS ONLY PROVIDING INPATIENT SERVICES ARE NOT REQUIRED TO COMPLETE THIS SURVEY.

About the form

The survey was revised in October 2004 to capture specific information about the facility's current physical address, number of dialysis stations, facility ownership, staff ratios, and status of individuals working or attending school. to update the CMS Dialysis Facility Compare website.

Vocational Rehabilitation has been added to the survey to obtain information on patients between the ages of 18-54 if they are receiving services from the Vocational Rehabilitation; patients employed full-time or part-time; and patients attending school full-time or part-time.

The ESRD Facility Survey is completed annually. The survey period is January 1 through December 31. Every facility approved by Medicare to provide services to ESRD patients must furnish the information requested on the survey.

Auto-generated from SIMS

The survey is auto-generated from the local SIMS database. All data that you report to the Network on updated patient information is entered into our local SIMS database and is reported back on this survey.

The matrix below explains your additions and losses that you report on the ESRD Facility Survey, CMS-2744 form.

<p><u>Additions</u> Chronic Renal Disease Medical Evidence Report (CMS-2728)</p>	<p># of incident patients (new) # of patients returned after transplantation # of patients who restart dialysis within 36 months of a successful transplant</p>
<p><u>Losses</u> ESRD Death Notification (CMS-2746)</p>	<p># of deaths at your unit for the year # of patients who recovered kidney function # of patients who discontinued dialysis # of patients transplanted</p>

National Clinical Performance Measures (CPM) Project Forms (CMS-820 and CMS-821)

This form is an annual data collection with the goal of describing and analyzing the practice patterns, processes and outcomes of care for the targeted patient population.

Data is collected on specific measures by requesting that the selected dialysis facilities provide patient-specific data for a CMS selected sample of ESRD patients in the facilities.

If you are associated with a Large Dialysis Organization, the corporation will submit your data. You may be asked to validate the data.

If your facility is independently owned, you **will** be asked to submit and validate your data.

Monthly Patient Activity Reports (MPARs)

The Centers for Medicare & Medicaid Services (CMS) requires ESRD Networks to track patient activity throughout the year, including additions, losses, or neutral events. All chronic patients should be included in the report regardless of modality. Please make a copy of the Network Monthly Patient Activity Report (MPAR) for your records then return the original via fax, mail, or QualityNet Exchange.

Note: The Monthly Patient Activity Report does not replace CMS forms 2728 and 2746. You must submit a CMS-2728 form for every new ESRD Patient and a CMS-2746 form for every death event.

Purpose

The MPAR's purpose is to track all patient activity at your dialysis unit. This CMS approved form requires a tracking system to facilitate completion of the year-end ESRD Facility Survey, CMS-2744. The MPAR tracks the following patient events:

New patient – A new patient is a patient who has been diagnosed with renal disease and has never been on dialysis,

(A CMS-2728 form is initiated for Medicare eligibility as well as registration in the ESRD program. This includes a transplant patient who never dialyzed prior to transplantation.)

Modality Change – Occurs when a patient changes his/her modality of treatment.

Transfer In – Occurs when a patient was previously dialyzing as an outpatient in another renal-approved facility and has transferred to a new facility within or out of our Network.

- **Category A:** Patient previously served in ESRD Medicare System;
- **Category B:** Patient new to ESRD Patient Registry

Transfer Out – When a patient transfers from one dialysis facility to another outpatient chronic dialysis facility.

- **Category A:** To ESRD Medicare Dialysis Facility
- **Category B:** To Non-ESRD Medicare Dialysis Facility
- **Category C:** Involuntary Discharge from treatment - For reporting purposes on the annual ESRD Facility Survey, CMS-2744 record the event in Field 11A or 11B.

Transfer out for transplant – When a patient transfers to a Medicare-approved transplant center to receive a kidney transplant.

Dialysis after transplant – Occurs when a patient restarts dialysis therapy after a transplant failure.

Restart – A restart is a patient who resumes dialysis after he/she discontinued dialysis and/or recovered kidney function.

Interruption in Service in a Chronic Outpatient Setting – Neutral event – Patient is experiencing an interruption of services for greater than 30 days while in an acute care setting or rehabilitation facility and is expected to return to the outpatient dialysis facility.

Discontinue – When a patient discontinues ESRD therapy voluntarily or by physician's

recommendation. A death form is required if the discontinued patient dies within 30 days of the event.

Recover kidney function – When a patient regains renal function and is able to survive without ESRD therapy.

Lost-to-follow-up – Patient no longer attends dialysis, facility is unable to locate the patient and Network is unable to locate the patient through the central repository.

Death – Facilities are responsible for completing the CMS-2746 form for the patient if the death occurs within 30 days after the patient has been out of their care and no other facility has reported treating the patient.

See our website:

- Blank MPARs
- Instructions
- Business Rules

Missing Forms Report

A Missing Forms Report is forwarded to dialysis and transplant centers on a regular basis on patients for whom the Network did not receive the appropriate forms for processing the events that have been reported by CMS/CSC and/or the facility.

You must submit the missing forms to the Network within two weeks of receipt of the Missing Forms Report.

Quarterly Patient Roster

Quarterly, the dialysis and transplant centers will receive a Patient Roster to validate patient information. The information on the Patient Roster is based on the data that your unit and/or transplant center reported to the Network by submitting the CMS-2728 form, the CMS-2746 form and the MPAR.

ESRD Forms Submission Compliance Rates

Semi-annually, through CROWN, the Network profiles the facilities to determine their compliance rates for submitting timely and complete, and accurate CMS ESRD forms to the Network.

The semi-annual compliance rate is 90% and the combined annual rate is 90%. If facilities do not meet the mandated rate on forms submission, the Network provides the CMS Regional Office with a list of those facilities that fail the mandated benchmark. The Network forwards educational materials on submitting accurate and timely data to these facilities.

The facilities are also required to submit a corrective action plan regarding their noncompliance on inaccurate and forms submission.

Rejected Forms – Current Rejects

The reject report provides a listing of all forms that have been received by the Network office with incomplete or inaccurate data. Forms will remain on this report until they have been corrected and returned to the Network.

In most cases, the rejected forms report is either faxed or mailed to the dialysis unit. The incomplete data on the form is due within two weeks of receipt of the report.

The purpose of completing the reject forms is to obtain the information on the fields to be corrected, and then make the corrections on the report. Do not submit new forms.

You may fax the forms and/or report to the Network office by the due date printed on the report.

Transplant Centers Responsibility

The transplant centers are required to update the quarterly Patient Roster reports. The transplant center is also responsible to submit the Chronic Renal Disease Medical Evidence Report, CMS-2728, and the ESRD Death Notification, CMS-2746 in a timely manner.

the exception of patient information and processing of the non-reimbursement forms.

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VISION Responsibility

The Centers for Medicare and Medicaid Services (CMS) has implemented a new national data collection system. This new system enables dialysis facilities to enter patient tracking information into a centralized database that is coordinated with other data kept by the ESRD Networks and CMS.

The name of this system is CROWN (Consolidated Renal Operations in a Web-enabled Network). The transmission system is called QualityNet Exchange. QualityNet Exchange contains several layers of security. Users log into QualityNet Exchange with a login ID and password issued to them after they have completed their QualityNet Exchange registration.

VISION (Vital Information to Improve Outcomes in Nephrology) is software designed for entering patient data and generating form reports. The purpose and goal of the software is to improve the accuracy of forms – the VISION software only validates complete and accurate information.

Currently, VISION is being used on a voluntary basis. Non-Corporate facilities interested in using VISION should contact the Network 4 office. You may be asked to complete a “VISION Interest and Readiness Survey” to determine your eligibility for participation. The Network will provide training

Note that the Network is not training those facilities that are part of a corporate chain or LDO.

The QualityNet Help Desk is a resource for VISION users to answer all your questions with