



End-Stage Renal Disease (ESRD) Quality Reporting System (EQRS)

ESRD Quality Program Support Contractor

Webinar Question and Answer Summary Document:

EQRS Overview, EQRS Basics, EQRS Facility Landing Page

This document is based on questions asked and answered during the March 25, 2025, Monthly EQRS Stakeholder Meeting. Event slides and recording are available on the events page of MyCROWNWeb at: <https://mycrownweb.org/events/>.

Additional questions can be asked using the QualityNet Help Desk:

- By email at gnetsupport-esrd@cms.hhs.gov.
- With an Online Ticket submission at https://cmsqualitysupport.servicenowservices.com/ccsq_support_central.

DISCLAIMER: The responses provided in this document reflect answers that were current and accurate as of the date on which the event referenced above occurred. Subsequent to the event, questions and answers were compiled and edited for clarity and completeness. We recommend that this question-and-answer document be relied on for the clearest answers to questions posed during the event.

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Question 1. Can you clarify when the facility is responsible for completing a Form CMS-2746 (death notice)? I was told that if the patient leaves our facility and dies within 30 days of discharge, we are

responsible for completing the form. But if the patient dies after 30 days, we are not responsible.

That is correct. If a patient dies more than 30 days after their last treatment at your facility you are not responsible for the Form CMS-2746. If the patient dies in 30 days or less, then you must submit a Form CMS-2746.

Question 2. If one of our patients leaves our facility but is not transferred to another certified facility, are we responsible for completing a Form CMS-2746 (death notice) if they die?

If the patient is not permanently transferred to another certified facility and they die within 30 days after leaving yours, then you are responsible for completing a Form CMS-2746. If the patient dies more than 30 days after leaving your facility, you do not need to complete a Form CMS-2746 for them.

Question 3. Do transplant centers need to fill out the Missing Required Facility Information in the Facilities Section within EQRS?

If they do not have a backup facility, then they do not need to fill out the Missing Required Facility information.

Question 4. What happens when the original Form CMS-2728 is never received by the Social Security Administration office?

This form should only be sent to the Social Security Office if the patient is actually applying for ESRD Medicare coverage. Under these circumstances, if the Social Security Office did not receive the form, then you should just give the patient a copy of the form from their chart to take with them to the Social Security office. It may be necessary to have the doctor and patient sign this copy of the form.

Question 5. A patient in a dialysis facility was on hemodialysis there for an entire month. For the whole month they also received a single Erythropoiesis-Stimulating Agent (ESA). For part of the month, they received it intravenously and for part of the month the medication was given subcutaneously. Currently EQRS only allows for the selection of one route. Which route should be selected?

At present there's no way to enter two options in EQRS. In this situation, report the one that they received most during that month. For example, if the ESA was administered intravenously only once, but for the most part it was given subcutaneously, select the subcutaneous route.

Question 6. How can I access the supplemental Form CMS-2728 if it does not populate with the flush treatment entry and hemodialysis has been in place for less than 90 days?

In the patient's record, click treatments on the left-hand side of the screen. Add a treatment and insert the information for peritoneal dialysis (PD). This will generate the supplemental form.

Question 7. We need to print the Form CMS-2728 to send to the doctor to give us a diagnosis code. So do we have to enter a bogus diagnosis code and then white it out before we send it to the doctor?

Encourage the doctor to give you the diagnosis code before you send them the form. Receiving this information in advance will allow you to send them a prepopulated form that they can sign and return to you. You should not enter a bogus or fake diagnosis code.

Question 8. What happens if the original facility sent the Form CMS-2728 to us without a signature? What should we do if this was done before our time?

If the originating facility still has a signed copy of the form, ask them to send you a signed copy. If this is not possible, you can access the patient's Form CMS-2728 in EQRS and print out a copy of it at any time to retrieve the signature needed.

Question 9. For clinical data: when it says, "patient not treated on date submitted" when the patient was treated on that date, do we check the box that says, "no clinical data for the clinical month?"

Check the patient's treatments in EQRS. If there is a date discrepancy, check the treatment section of the patient record first. If that doesn't work and the date still isn't lining up, check with your local ESRD Network.

Question 10. I had a patient recently inform me that they are required to submit the Form CMS-2728 signed by the nephrologist with blue ink only to apply for Medicare. Is this accurate?

Signing in blue ink is no longer required. The form does not have to be signed in blue ink.

Question 11. Our organization allows patients to have ‘home hemodialysis back-up’ in-center hemodialysis treatments at facilities that are not necessarily the home facility of the patient (meaning, the facility has a different CCN). Occasionally labs are drawn at one of these crossover treatments. Are we permitted to enter the labs that occur during the backup runs? For example, a patient is assigned to clinic A but has one backup run during the month at clinic B and monthly labs are drawn. Are we permitted to report the labs when manually entering the clinical file in clinic A?

Yes. As long as you have an actual printed copy in your records of that laboratory information with the draw dates and what the values are, you are permitted to submit that.

Question 12. When we cannot get a signature from a patient in a skilled nursing facility or their proxy, is the nursing home staff able to sign for the patient on a Form CMS-2728?

Only someone that the patient has officially designated as their power of attorney is allowed to sign off on the form. Staff without that designation cannot sign off on the form.

Question 13. How can I get access to NHSN data entry?

The National Healthcare Safety Network (NHSN) is operated by the Centers for Disease Control and Prevention (CDC). To get access, please reach out to the NHSN Help Desk using the following link:
<https://sams.cdc.gov/>.

Question 14. Where can we locate the user training videos on the MyCROWNWeb.org website?

Go to <https://mycrownweb.org/education>. If you scroll down to the bottom of this page, you will see the training videos in a table that is titled “New User Training Resources.” This education page also has

many other valuable training resources identified by the topics they address.