



# EQRS New User Training

*With ESRD Outreach,  
Communication, and Training (EOCT)*

**End Stage Renal Disease  
Quality Reporting System**

# Today's Trainer

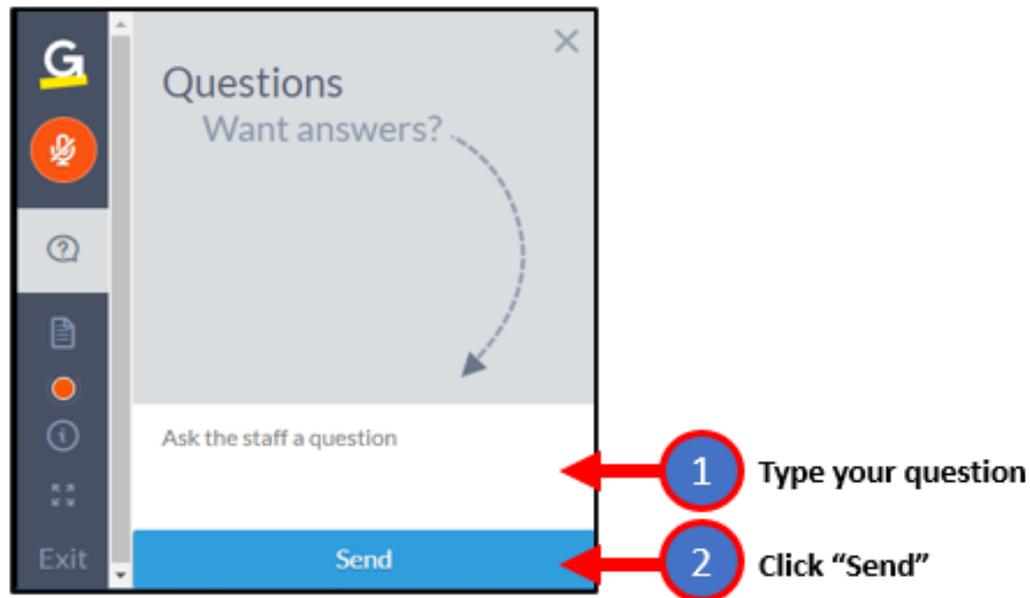
**ESRD Outreach, Communication, and Training Team**



**Jane Chaine, MSN, RN, CNN, RD**  
*Communications Director*

# Submitting Questions

Type a question in the “Ask the staff a question” section on your screen and click “Send.”



**Note:** Some questions may require additional research.  
Unanswered questions may be submitted to [QualityNet Question and Answer Tool](#).

# Our Agenda Today

- **Manage Access**
- **Facility Dashboard Overview**
- **Set Default Preferences**
- **Add Facility Personnel**
- **Admit a Patient**
- **View and Edit Patient Details**
- **Submit an Initial CMS-2728 Form**
- **Add Treatment Information**
- **Add Vaccination Information**
- **Enter Clinical Information**
- **Enter Clinical Depression Data**
- **Discharge a Patient**
- **Complete a CMS-2746 Form**
- **Resolve Accretions**
- **Resources and Evaluation**



# How We'll Do Things Today

**Each lesson is divided into two parts:**

- Part 1 – Background information
- Part 2 – Demonstration

**Note:**

Data used in this presentation is fictitious.  
Content subject to change.



# Manage Access

# Maintain HARP User Account

Use the Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP) to maintain your user account.

- One HARP account is needed to access multiple CMS applications.
- All EQRS users must have a HARP account.
- Maintain HARP account via <https://harp.cms.gov/user-profile/home>.
- Access HARP training materials via <https://mycrownweb.org/harp-training/>.

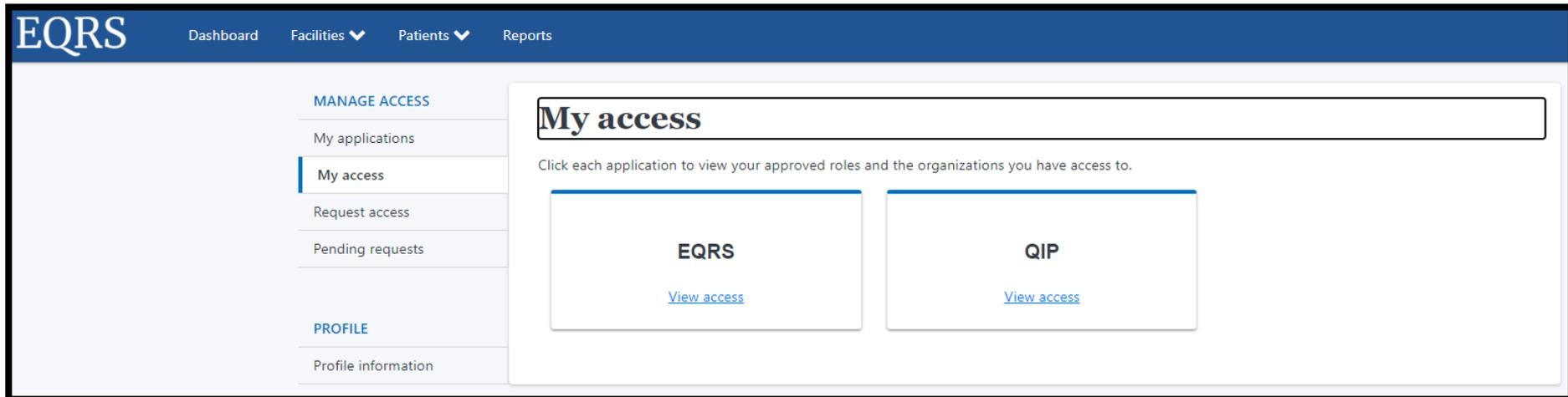
# HARP Menu Options

Use the HARP menu options to update your account.

The screenshot displays the 'User Profile' page. On the left, a sidebar menu is highlighted with a red box, containing the following options: 'Profile Information' (with a person icon), 'Change Password' (with a gear icon), 'Challenge Question' (with a lock icon), and 'Two-Factor Devices' (with a mobile phone icon). A hand cursor is pointing at the 'Two-Factor Devices' option. Below the menu is a 'Need Help?' section with the text 'Contact your application's help desk for assistance.' and a link 'Contact Help Desk →'. The main content area is titled 'Profile Information' and features an 'Edit' button in the top right corner. The profile information is organized into two columns of labels: First Name, Middle Name, Email Address, Home Address Line 1, City, ZIP Code, and Country on the left; and Last Name, Date of Birth, Phone Number, Home Address Line 2, State, and ZIP Code Extension on the right.

# Maintain EQRS Role(s)

- EQRS blends functionalities of the following legacy ESRD Systems into one global application:
  - CROWNWeb
  - ESRD QIP
- Use EQRS to maintain and request roles for necessary user interfaces.  
Direct link: <https://eqrs.cms.gov/globalapp>



The screenshot displays the EQRS user interface. At the top, there is a navigation bar with the EQRS logo and menu items: Dashboard, Facilities (with a dropdown arrow), Patients (with a dropdown arrow), and Reports. Below the navigation bar is a sidebar menu with the following sections: MANAGE ACCESS (with sub-items: My applications, My access, Request access, Pending requests), and PROFILE (with sub-item: Profile information). The main content area is titled 'My access' and includes the instruction: 'Click each application to view your approved roles and the organizations you have access to.' There are two application cards: 'EQRS' and 'QIP'. Each card has a 'View access' link below it.

**Note:** Access step-by-step HARP account registration and EQRS role request instructions via <https://mycrownweb.org/harp-training/>.



# Facility Dashboard Overview

# Facility Dashboard

The EQRS Facility Dashboard provides reminders and announcements.

The screenshot displays the EQRS Facility Dashboard for facility 123456 ABC Dialysis. The navigation bar includes 'EQRS', 'Dashboard' (highlighted with a red box), 'Facilities', 'Patients', and 'Reports'. The facility name '123456 ABC Dialysis' is shown below the navigation bar.

**Overview**

Form 2728		
New	Due	Past due
0	0	0

Form 2746	
Due	Past due
0	0

**Accretions**

Unresolved
0

**System Discharges**

2022	2021
0	1

**Add a backup facility to your facility**  
Please add a backup for your facility by navigating to the Backup facility section.

**Facility Dashboard Overview**

**Upcoming Reminders**

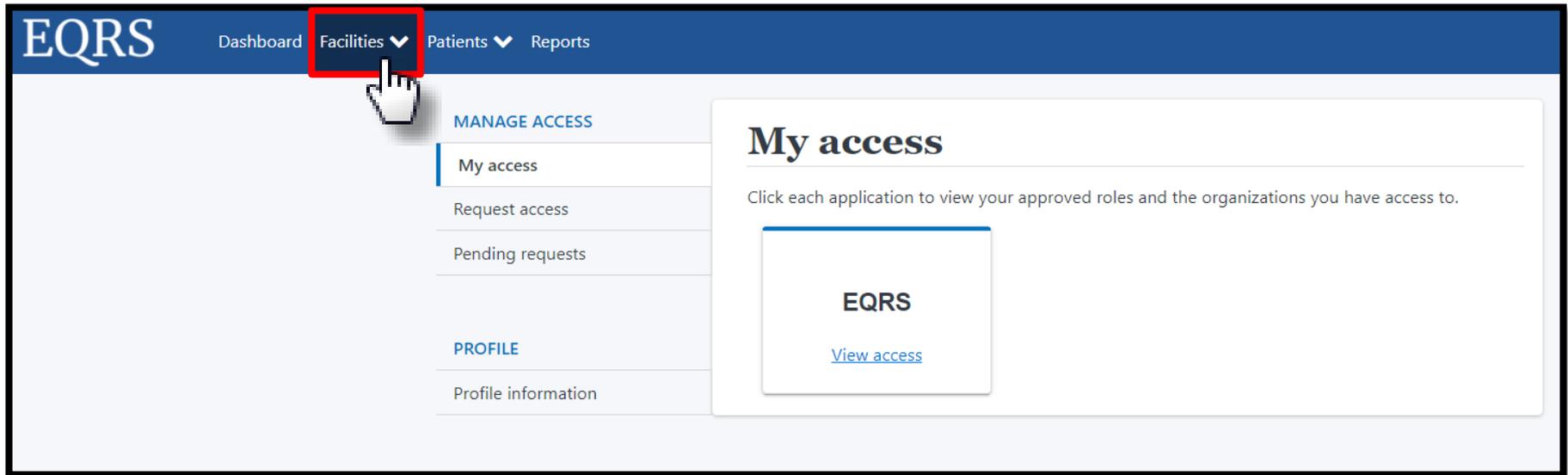
- 06/29/2022 5:00 pm PDT - Clinical Data submission deadline for the April 2022 clinical period.
- 07/31/2022 5:00 pm PDT - Clinical Data submission deadline for the May 2022 clinical period.
- 08/30/2022 5:00 pm PDT - Clinical Data submission deadline for the June 2022 clinical period.
- 02/27/2023 4:00 pm PDT - Clinical Depression Screening reporting period closes for the January 1 - December 31, 2022 assessment period.



# Set Default Preferences

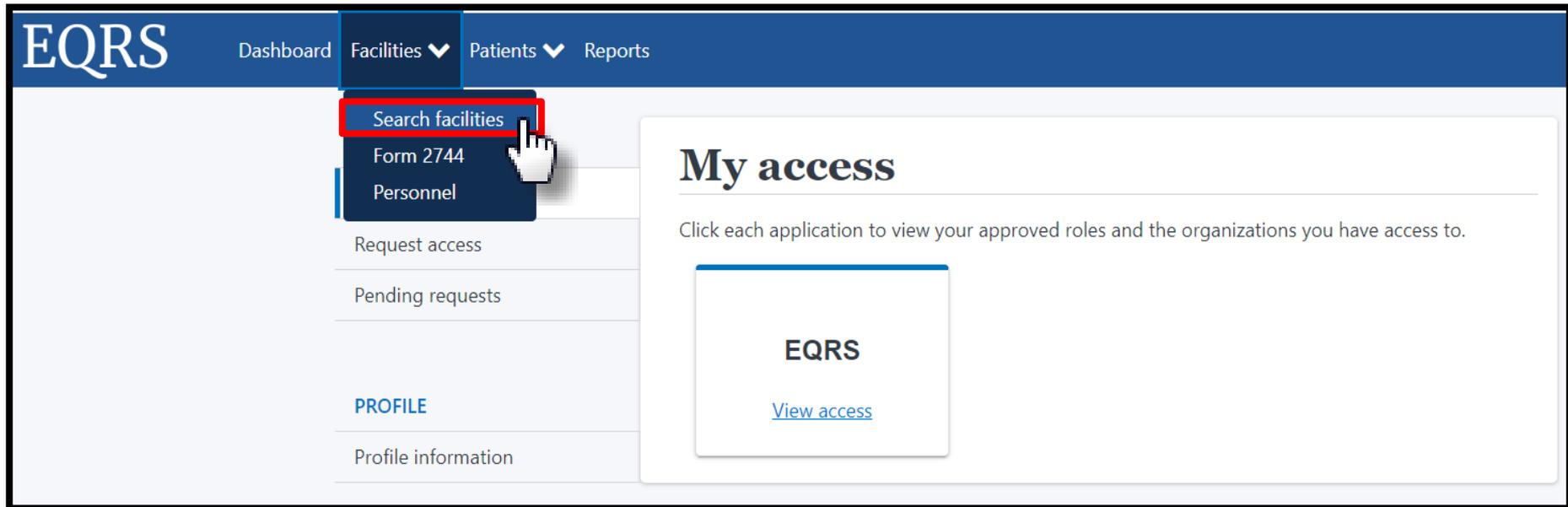
# Click Facilities

Click **Facilities** in the navigation menu.



# Click Search Facilities

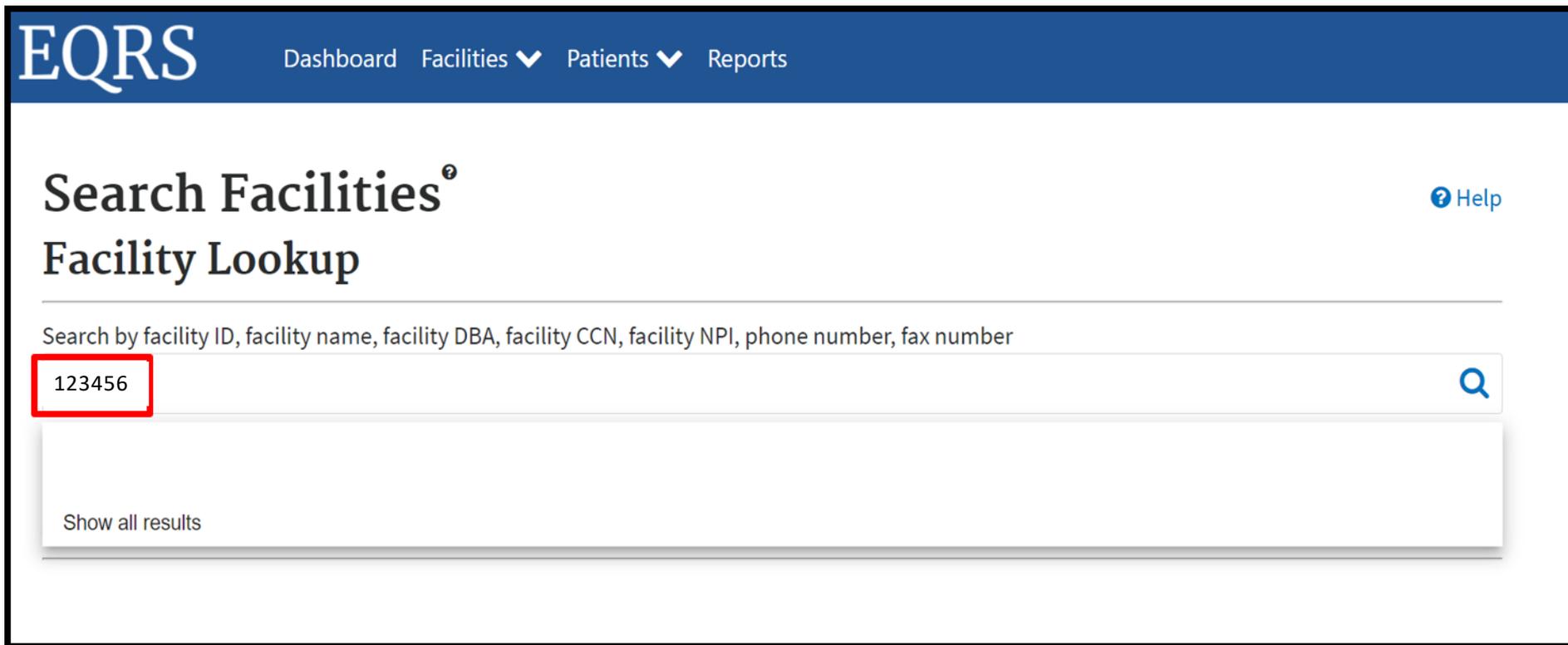
Click **Search Facilities** in the navigation menu.



The screenshot shows the EQRS application interface. The top navigation bar is dark blue with the EQRS logo on the left and menu items: Dashboard, Facilities (with a dropdown arrow), Patients (with a dropdown arrow), and Reports. The 'Facilities' dropdown menu is open, showing a list of options: Search facilities (highlighted with a red box and a mouse cursor), Form 2744, Personnel, Request access, Pending requests, PROFILE, and Profile information. The main content area on the right is titled 'My access' and contains a card for 'EQRS' with a 'View access' link.

# Search for Facility

Enter the facility identifier.



The screenshot shows the EQRS (Enterprise Quality Reporting System) interface. At the top, there is a dark blue navigation bar with the EQRS logo on the left and menu items for Dashboard, Facilities (with a dropdown arrow), Patients (with a dropdown arrow), and Reports. Below the navigation bar, the main content area has a white background. The heading "Search Facilities" is displayed in a large, bold, dark blue font, with a registered trademark symbol (®) to its upper right. Below this heading is the sub-heading "Facility Lookup" in a slightly smaller, bold, dark blue font. To the right of the heading is a "Help" link with a question mark icon. Below the heading and sub-heading is a horizontal line. Underneath the line is a search instruction: "Search by facility ID, facility name, facility DBA, facility CCN, facility NPI, phone number, fax number". Below this instruction is a search input field with a light gray border. The number "123456" is entered into this field and is highlighted with a red rectangular box. To the right of the input field is a magnifying glass icon. Below the input field is a large, empty white rectangular area. At the bottom left of this area is a link that says "Show all results".

# Click Default Preferences

Click the **Default Preferences** link in the Actions section.

**EQRS** Dashboard Facilities ▾ Patients ▾ Reports Change organization ▾

**ABC DIALYSIS**

- ✓ Network Information
- ✓ Contact Information
- ✓ Certification
- ✓ Services Information
- ✓ Ownership
- ✓ Hours and shifts
- Backup facility

## Facility summary

[Print page](#) [Help](#)

6/7

You have errors in sections of the form. Please update and resolve the following:

- Backup facility

**Actions**

Attestations [↗](#) **Default preferences** [↗](#) Personnel [↗](#)

### Network information

[View to edit](#)

**Network:** Network 10 **Network facility code:** XG

**Program type:** Dialysis

**Facility legal name:** **Facility DBA name:**

# Select Preferences

Select default values and click **Submit**.

Select Default values for this facility in the section below

Expand All

---

**Adequacy Defaults** ^

<b>BSA Method (PD)</b>	<b>Patient Height Unit of Measure</b>
<input type="text" value="Dubois and Dubois"/>	<input type="text" value="in"/>
<b>Kt/V Method (HD)</b>	<b>Patient Weight Unit of Measure</b>
<input type="text" value="UKM (Urea Kinetic Modeling)"/>	<input type="text" value="lbs"/>
<b>V Method (PD)</b>	<b>RRF Assessed in Calculating Kt/V (PD)</b>
<input type="text" value="% Body Weight"/>	<input type="text" value="Yes"/>

---

**Mineral Metabolism Defaults** ^

**Lab Method for Serum Albumin**

---

**GFR Calculation Defaults** ^

<b>Adult Calculation Method</b>	<b>Pediatric Calculation Method</b>
<input type="text" value="MDRD IDMS standardized"/>	<input type="text" value="Schwartz Equation"/>

# Successful Submission

EQRS displays a “**Facility default Preferences submitted successfully**” message.



## Successful

Facility default Preferences submitted successfully.

---

### Adequacy Defaults ^

<b>BSA Method (PD):</b> Dubois and Dubois	<b>Patient Height Unit of Measure:</b> cm
<b>Kt/V Method (HD):</b> UKM (Urea Kinetic Modeling)	<b>Patient Weight Unit of Measure:</b> kg
<b>V Method (PD):</b> % Body Weight	<b>RRF Assessed in Calculating Kt/V (PD):</b> Yes

---

### Mineral Metabolism Defaults ∨

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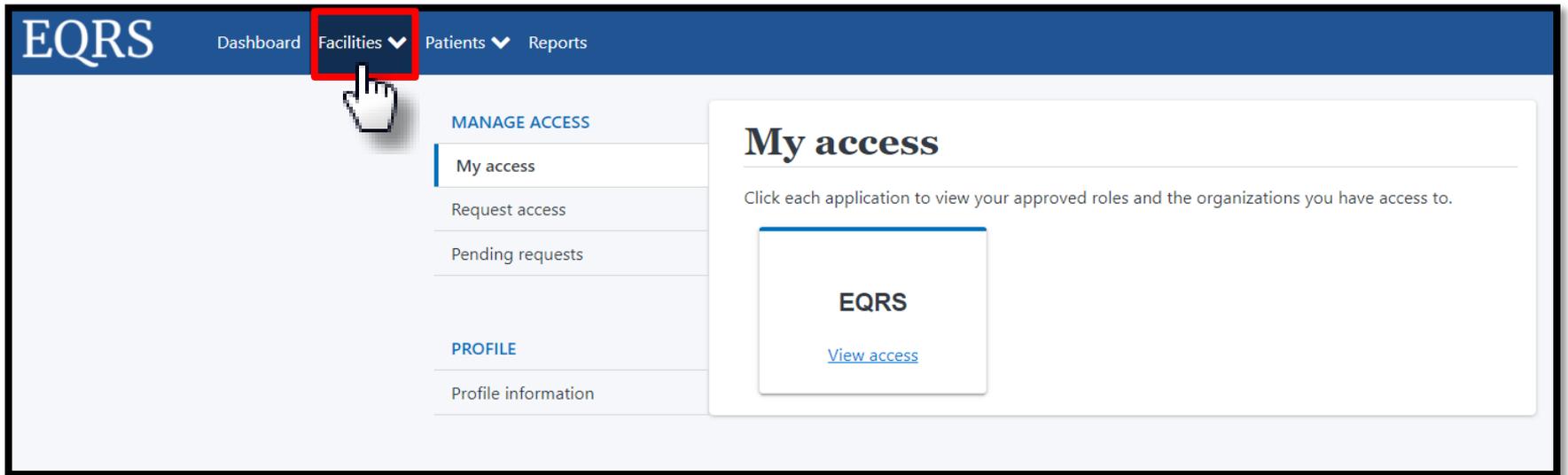
### GFR Calculation Defaults ∨



# Add Facility Personnel

# Click Facilities

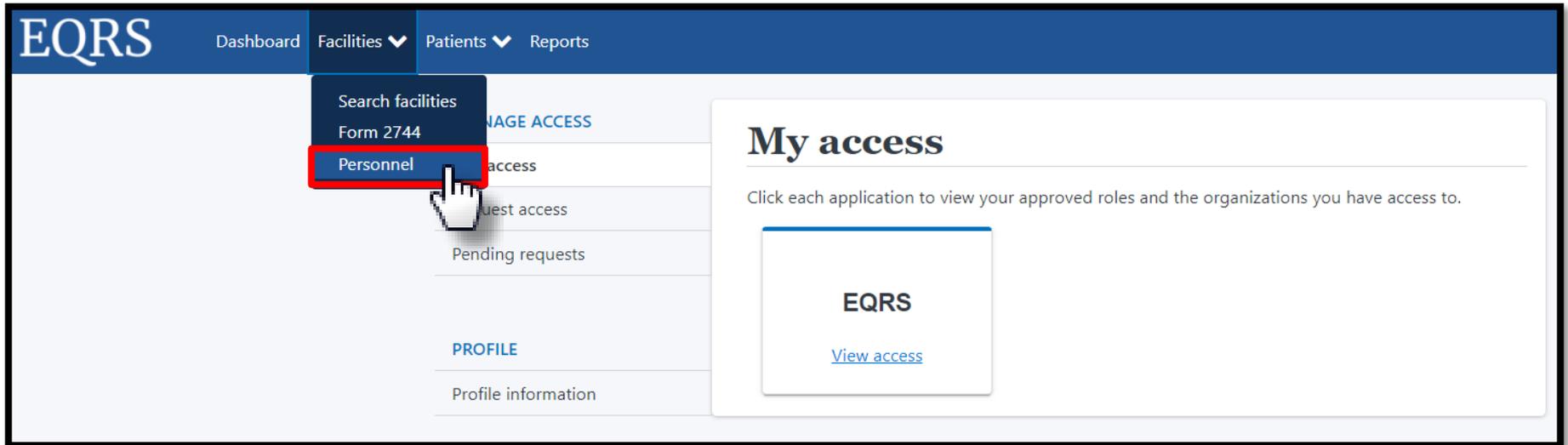
Click **Facilities** in the navigation menu.



The screenshot shows the EQRS web application interface. The top navigation bar is dark blue with the EQRS logo on the left and menu items: Dashboard, Facilities (highlighted with a red box and a mouse cursor), Patients, and Reports. Below the navigation bar, the main content area is light gray. On the left, there is a sidebar menu with two sections: 'MANAGE ACCESS' containing 'My access', 'Request access', and 'Pending requests'; and 'PROFILE' containing 'Profile information'. On the right, there is a white box titled 'My access' with the text 'Click each application to view your approved roles and the organizations you have access to.' Below this text is a card for 'EQRS' with a blue link 'View access'.

# Click Search Facilities

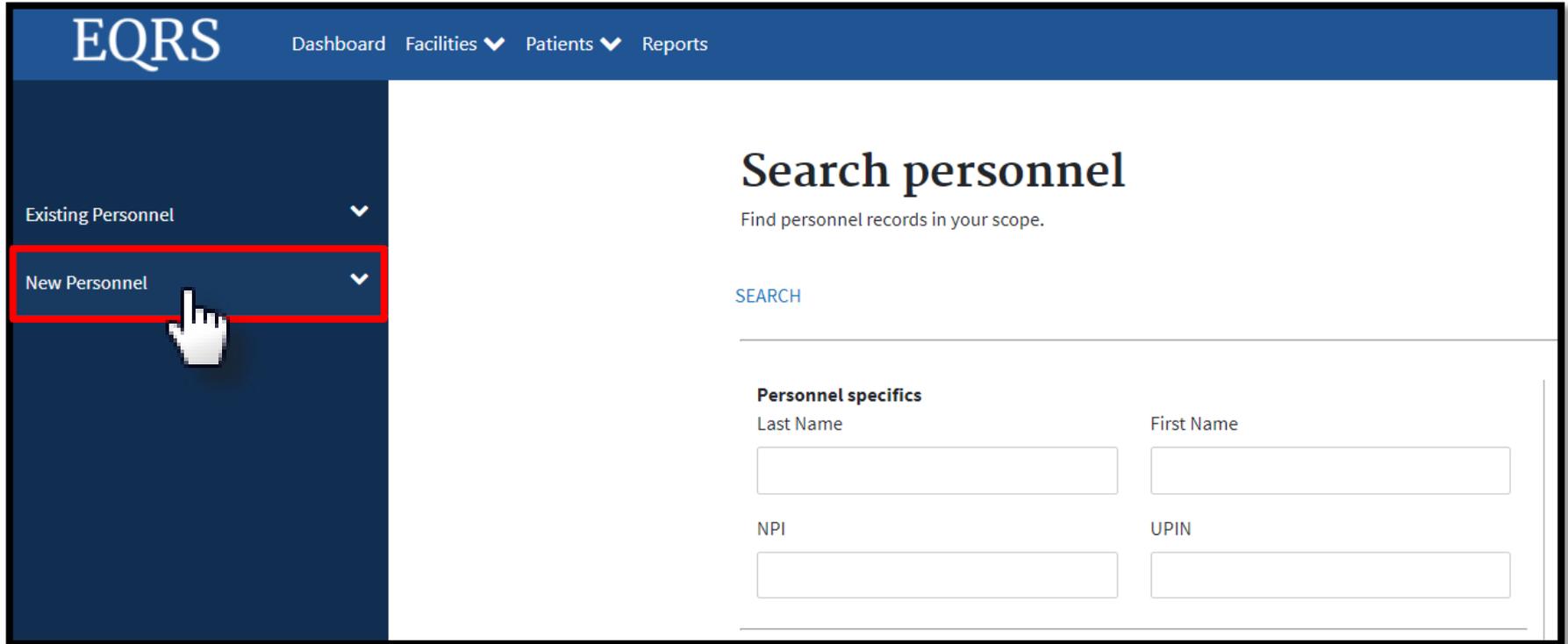
Click **Personnel** in the navigation menu.



The screenshot shows the EQRS application interface. The top navigation bar is dark blue with the EQRS logo on the left and menu items: Dashboard, Facilities (with a dropdown arrow), Patients (with a dropdown arrow), and Reports. The 'Facilities' dropdown menu is open, showing options: Search facilities, Form 2744, Personnel (highlighted with a red box and a mouse cursor), Request access, Pending requests, and a section header PROFILE with Profile information below it. On the right side of the page, there is a 'My access' section with the text 'Click each application to view your approved roles and the organizations you have access to.' Below this text is a white box containing the EQRS logo and a blue link labeled 'View access'.

# Click New Personnel

Click **New Personnel** to display menu options.



The screenshot displays the EQRS web application interface. The top navigation bar includes the logo 'EQRS' and menu items: 'Dashboard', 'Facilities', 'Patients', and 'Reports'. On the left side, a dark blue sidebar contains two menu items: 'Existing Personnel' and 'New Personnel'. The 'New Personnel' item is highlighted with a red rectangular border, and a white mouse cursor is positioned over it. The main content area on the right is titled 'Search personnel' and includes the instruction 'Find personnel records in your scope.' Below this is a 'SEARCH' section with a horizontal line. Underneath, there is a 'Personnel specifics' section with four input fields: 'Last Name', 'First Name', 'NPI', and 'UPIN'.

EQRS Dashboard Facilities Patients Reports

Existing Personnel

New Personnel

## Search personnel

Find personnel records in your scope.

SEARCH

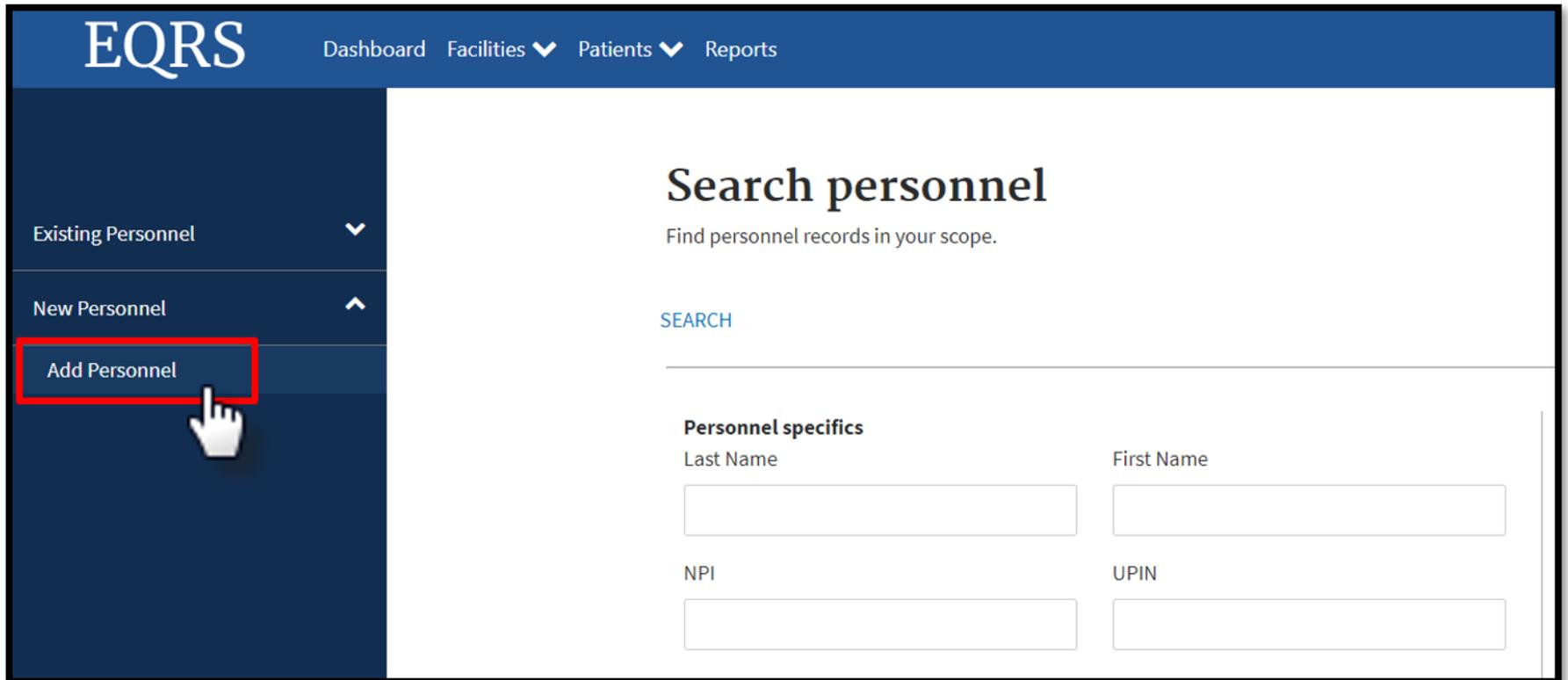
**Personnel specifics**

Last Name First Name

NPI UPIN

# Click Add Personnel

Click **Add Personnel** to enter information.



The screenshot displays the EQRS web application interface. The top navigation bar includes the EQRS logo and menu items: Dashboard, Facilities (with a dropdown arrow), Patients (with a dropdown arrow), and Reports. The left sidebar contains three main sections: Existing Personnel (with a dropdown arrow), New Personnel (with an upward arrow), and Add Personnel (highlighted with a red box and a hand cursor). The main content area is titled 'Search personnel' and includes the instruction 'Find personnel records in your scope.' Below this is a 'SEARCH' section with a horizontal line. Underneath, there is a 'Personnel specifics' section with four input fields: Last Name, First Name, NPI, and UPIN.

EQRS Dashboard Facilities ▼ Patients ▼ Reports

Existing Personnel ▼

New Personnel ▲

**Add Personnel**

## Search personnel

Find personnel records in your scope.

SEARCH

---

**Personnel specifics**

Last Name

First Name

NPI

UPIN

# Select Accordion

Click on the desired section to expand and view.

## Add new personnel

[Help](#)

Add new personnel and positions using the form below.

Personnel information ▼

Positions ▼

[Review](#)

# Enter Personnel Information

Complete the Personnel Information section.

## Add new personnel

[Help](#)

Add new personnel and positions using the form below.

Personnel information ^

Credentials

Organizational Unique Personnel Identifier

---

<input type="text" value="Address Line 1"/>	<input type="text" value="Home phone"/>
<input type="text" value="Address Line 2"/>	<input type="text" value="Cell phone"/>
<input type="text" value="Zip Code"/> <input type="text" value="Zip ext."/>	<input type="text" value="Fax"/>
<input type="text" value="City"/> <input type="text" value="State"/>	<input type="text" value="Email"/>

# Add Position

Indicate the employee's position and click **Add Positions**.

Positions ^

---

Facility Name  
**ABC DIALYSIS**

Job Description  
Facility Nephrologist ▼

Job Code  
FNEPH

Job Title

**Add Positions**

---

Positions  
*Added positions from above form*

**Review**

# Click Review

Click **Review** for a final look before submission.

### Positions

Facility Name  
**ABC DIALYSIS**

Job Description:  Job Code:  Job Title:

**Add Positions**

#### Positions

Facility CCN	Facility NPI	Facility DBA	Job Description	Job Title	Job Code	Remove
123456	123456789123	ABC DIALYSIS	Facility Nephrologist	FNEPH		

**Review**

# Click Submit

Review the entry and click **Submit**.

## Review changes

Review the information and submit.

[Help](#)

### Personnel Information

[Edit](#)

<b>Salutation:</b> Dr.	<b>Personnel NPI:</b> 7234567890
<b>First Name:</b> Meredith	<b>Credentials:</b> UPIN:
<b>Middle Initial:</b>	<b>Organizational Unique Personnel Identifier:</b>
<b>Last Name:</b> Grey	
<b>Suffix:</b>	

---

<b>Address Line 1:</b>	<b>Home Phone:</b>
<b>Address Line 2:</b>	<b>Cell Phone:</b>
<b>City:</b>	<b>Fax Number:</b>
<b>State:</b>	<b>Email:</b>
<b>Zip Code:</b>	<b>Alternate Email:</b>
<b>County:</b>	

---

<b>Business Name:</b>	<b>Business Phone:</b>
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### Positions

[Edit](#)

Facility CCN	Facility NPI	Facility DBA	Job Description	Job Title	Job Code
123456	1588779326	ABC DIALYSIS	Facility Nephrologist		FNEPH

**Submit**

# Successful Submission

EQRS displays “Personnel information added successfully” message.

## View existing personnel Help

View the personnel record and make changes if needed

**Personnel information added successfully**  
Please review your information below.

### Personnel Information Edit

<b>Salutation:</b> Dr.	<b>Personnel NPI:</b> 7234567890
<b>First Name:</b> Meredith	<b>Credentials:</b> UPIN:
<b>Middle Initial:</b>	<b>Organizational Unique Personnel Identifier:</b>
<b>Last Name:</b> Grey	
<b>Suffix:</b>	

---

<b>Address Line 1:</b>	<b>Home Phone:</b>
<b>Address Line 2:</b>	<b>Cell Phone:</b>
<b>City:</b>	<b>Fax Number:</b>
<b>State:</b>	<b>Email:</b>
<b>Zip Code:</b>	<b>Alternate Email:</b>
<b>County:</b>	

---

<b>Business Name:</b>	<b>Business Phone:</b>
-----------------------	------------------------

### Positions Edit

Facility CCN	Facility NPI	Facility DBA	Job Description	Job Title	Job Code
123456	1588779326	ABC DIALYSIS	Facility Nephrologist		FNEPH



# Admit a Patient

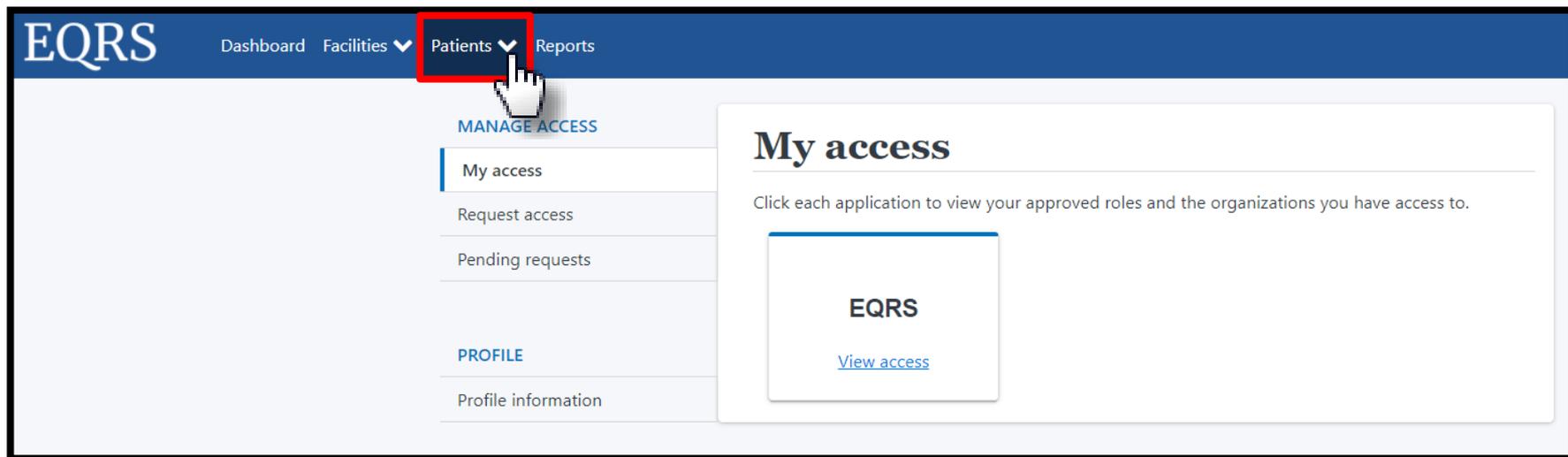
# Key Identifiers

EQRS uses six key identifiers when transferring a patient:

- First Name
- Last Name
- Date of Birth
- Gender
- Social Security Number
- Medicare Beneficiary Identifier

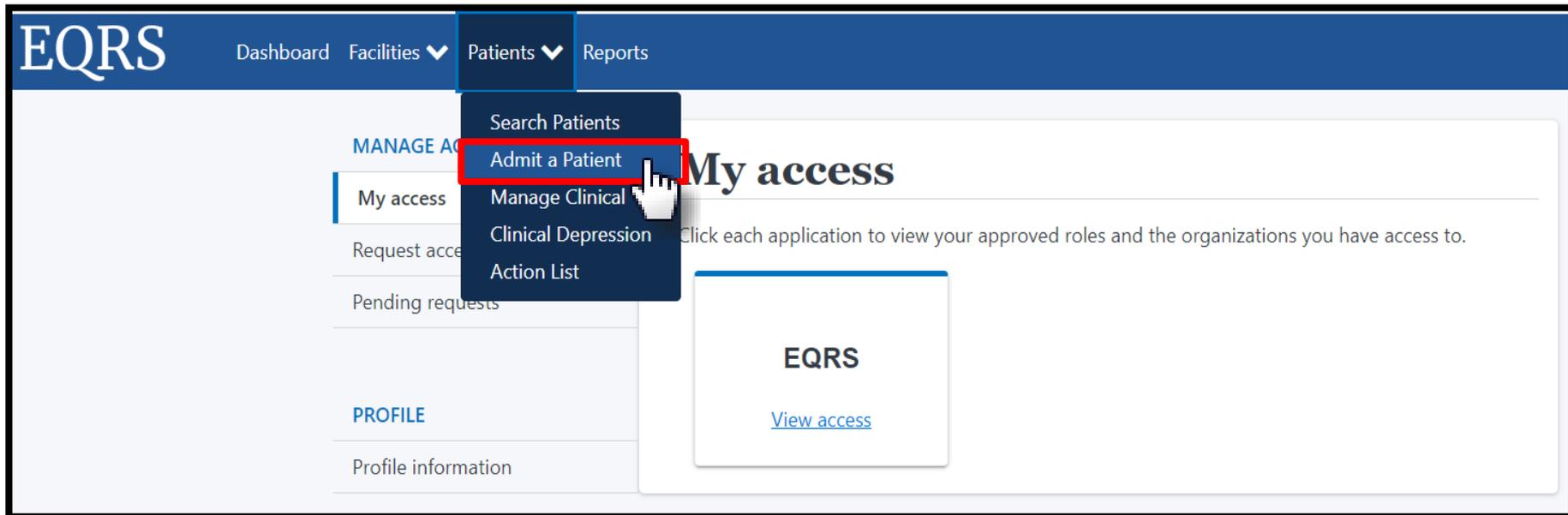
# Click Patients

Click **Patients** in the navigation menu.



# Click Admit Patient

Click **Admit Patient** in the Patients sub-menu.



The screenshot displays the EQRS web application interface. The top navigation bar includes the EQRS logo and menu items: Dashboard, Facilities, Patients, and Reports. The 'Patients' menu is expanded, showing a sub-menu with the following options: Search Patients, Admit a Patient, Manage Clinical, Clinical Depression, and Action List. The 'Admit a Patient' option is highlighted with a red rectangular box, and a mouse cursor is positioned over it. The main content area features a 'My access' section with a card containing the EQRS logo and a 'View access' link. The left sidebar contains sections for 'MANAGE ACCESS' (with sub-items: My access, Request access, Pending requests) and 'PROFILE' (with sub-item: Profile information).

# Enter Patient Information

Enter data in the Patient Information section.

## Admit Patient Help

Complete the sections below to admit a patient in EQRS.

[Expand All](#)

### Patient Information

<b>Patient's first name *</b>	<input type="text" value="Itsa"/>	<b>Middle initial</b>	<input type="text"/>
<b>Patient's last name *</b>	<input type="text" value="Patient"/>	<b>Suffix</b>	<input type="text" value=""/>
<b>Date of birth *</b>	Month: <input type="text" value="01"/> Day: <input type="text" value="01"/> Year: <input type="text" value="1960"/>	<b>Gender *</b>	<input type="text" value="Female"/>
<b>Social Security Number *</b>	<input type="text" value="987651234"/>	<input type="checkbox"/>	N/A
<b>Medicare Beneficiary Identifier *</b>	<input type="text"/>	<input checked="" type="checkbox"/>	N/A

# Enter Admission Information

Enter data in the Admission Information section and click **Next**.

Admission Information ^

**Admit Facility \***

ABC DIALYSIS

**Admit Date \***

Month Day Year

06 23 2021

**Admit Reason \***

New ESRD Patient ▼

**Next**

# Patient Match Message

Displays for new patient records says, “**No patient matches found.**”

**Admit Patient** Help

**No patient matches found. New patient record will be created.**

Complete the sections below to admit a patient in EQRS. Expand All

**Patient Information**

<b>Patient's first name *</b>	<b>Middle initial</b>
Captain	
<b>Patient's last name *</b>	<b>Suffix</b>
America	
<b>Date of birth *</b>	<b>Gender *</b>
Month: 04    Day: 25    Year: 1975	Male
<b>Social Security Number *</b>	<input type="checkbox"/> N/A
553245869	
<b>Medicare Beneficiary Identifier *</b>	<input checked="" type="checkbox"/> N/A

# Additional Fields Display

EQRS displays additional fields for data entry.

Complete the sections below to admit a patient in EQRS. [Expand All](#)

- Patient Information
- Ethnicity, race, tribe and origin
- Contact Information
- Miscellaneous Information
- Medical Information
- Admission Information
  - Admit Facility \***  
ABC DIALYSIS
  - Admit Date \***  
Month: 06 Day: 28 Year: 2021
  - Admit Reason \***  
New ESRD Patient
- Dialysis Treatment Information

# Enter Race and Ethnicity

Enter race and ethnicity, and tribe and origin, if applicable.

Ethnicity, race, tribe and origin ^

**Patient's Self Reporting Of Race and Ethnicity**

Self Reported by Patient ▼

**Ethnicity**

Not Hispanic or Latino ▼

**Race (check all that apply)**

White

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

American Indian/Alaska Native

Other

**Tribe and Origin**

**Name of Enrolled/Principal Tribe** ▼ **Country/Area Of Origin** ▼

# Enter Contact Information

Enter the mailing address.

Contact Information ^

Do not contact

**Mailing address**

---

Address Line 1 Address Line 2

123 Patient Lane

Zip Code Zip ext. (optional)

33607

City State \* County

Tampa Florida Hillsborough

# Provide Physical Address

Provide the physical address and Nursing Home Setting and date (if applicable)

Contact Information

Do not contact

**Mailing address**

---

Address Line 1  
123 Patient Lane

Address Line 2

Zip Code  
33607

Zip ext. (optional)

City  
Tampa

State \*  
Florida

County  
Hillsborough

Physical address same as mailing address

Is the patient in a nursing home setting?

Nursing Home Setting  
Permanent Resident

Date entered nursing home

Month  
MM

Day  
DD

Year  
YYYY

**Phone**

# Enter Miscellaneous Info

Enter data in the Miscellaneous Information section.

### Miscellaneous Information ^

Current status	Effective date		
Medicare enrollment *	Month	Day	Year
Medicare Application Pending <span>▼</span>	06	23	2021
Citizenship	Month	Day	Year
US Citizen <span>▼</span>	06	23	2021
Employment	Month	Day	Year
Employed Part Time <span>▼</span>	06	23	2021
School	Month	Day	Year
<span>▼</span>	MM	DD	YYYY
Vocational Rehabilitation	Month	Day	Year
<span>▼</span>	MM	DD	YYYY

# Enter Effective Date

Enter the Medical Information effective date.

Medical Information ^

**Effective date \***

Month      Day      Year

<input type="text" value="06"/>	<input type="text" value="23"/>	<input type="text" value="2021"/>
---------------------------------	---------------------------------	-----------------------------------

# Review Admission Information

The Admission Information section is pre-populated.

Admission Information ^

**Admit Facility \***  
ABC DIALYSIS

**Admit Date \***

Month Day Year

06 23 2021

**Admit Reason \***

New ESRD Patient ▼

# Enter Dialysis Treatment Information

Add a new dialysis treatment.

### Dialysis Treatment Information ^

**Treatment Start Date \***

Month Day Year

06 23 2021

**Primary Dialysis Setting \*** **Dialysis Time Period**

Dialysis Facility/Center ▼  ▼

**Expected Self-care Setting**

▼

# Enter Dialysis Treatment Information

Add a new dialysis treatment and click **Submit**.

<b>Primary Type of Treatment *</b>	<b>Sessions Per Week</b>	<b>Time Per Session (minutes)</b>			
Hemodialysis	3	240			
<b>Attending Practitioner *</b>	<b>Attending Practitioner UPIN</b>	<b>Attending Practitioner NPI</b>			
Fury, Nick		1780762971			
<b>Type of Dialysis Training</b>					
<b>Dialysis Training Start Date</b>	<b>Dialysis Training End Date</b>				
Month	Day	Year	Month	Day	Year
MM	DD	YYYY	MM	DD	YYYY

**Submit**

# Successful Admission

EQRS displays “Patient admission was successful” message.

The screenshot displays a user interface for EQRS. At the top, a green notification box with a red border contains a checkmark icon and the text "Successful Patient admission was successful." Below this, the heading "View Patient Demographics (Itsa Patient - 3100008572)" is shown. To the right of the heading are "Edit" and "Help" buttons. A "Collapse All" link is located in the top right corner of the patient information section. The patient information is presented in a table format:

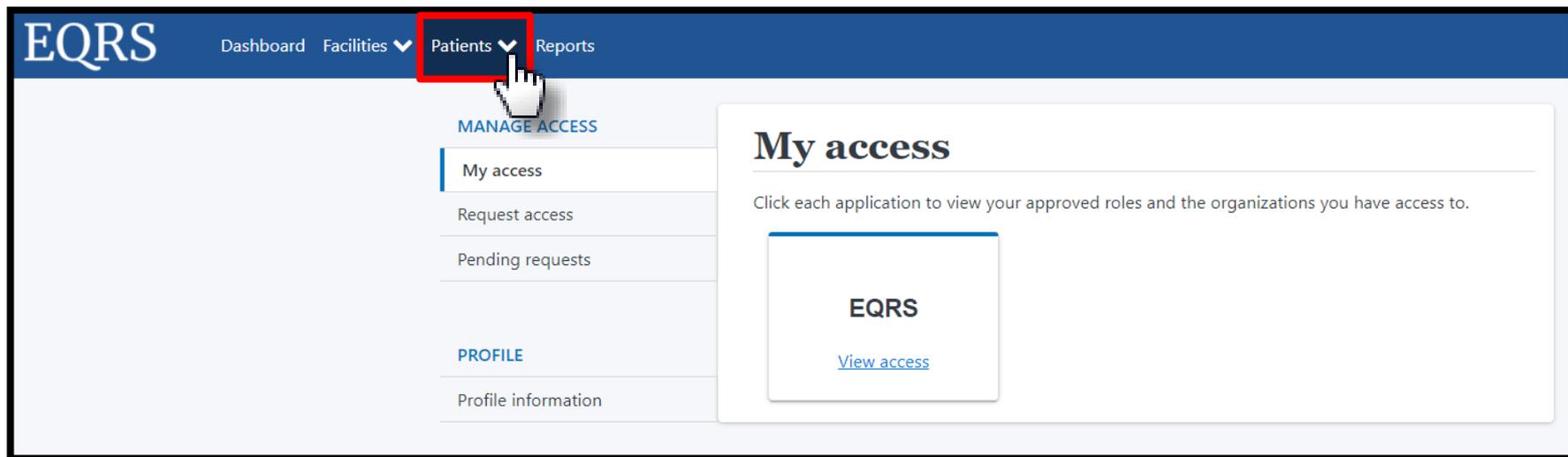
Patient Information	
<b>Patient's first name:</b>	Itsa
<b>Patient's last name:</b>	Patient
<b>Date of birth:</b>	01/01/1960
<b>Social Security Number:</b>	XXXXX1234
<b>Medicare Beneficiary Identifier:</b>	N/A
<b>Medicare Claim Number:</b>	N/A
<b>Middle initial:</b>	
<b>Suffix:</b>	
<b>Gender:</b>	F



# View and Edit Patient Details

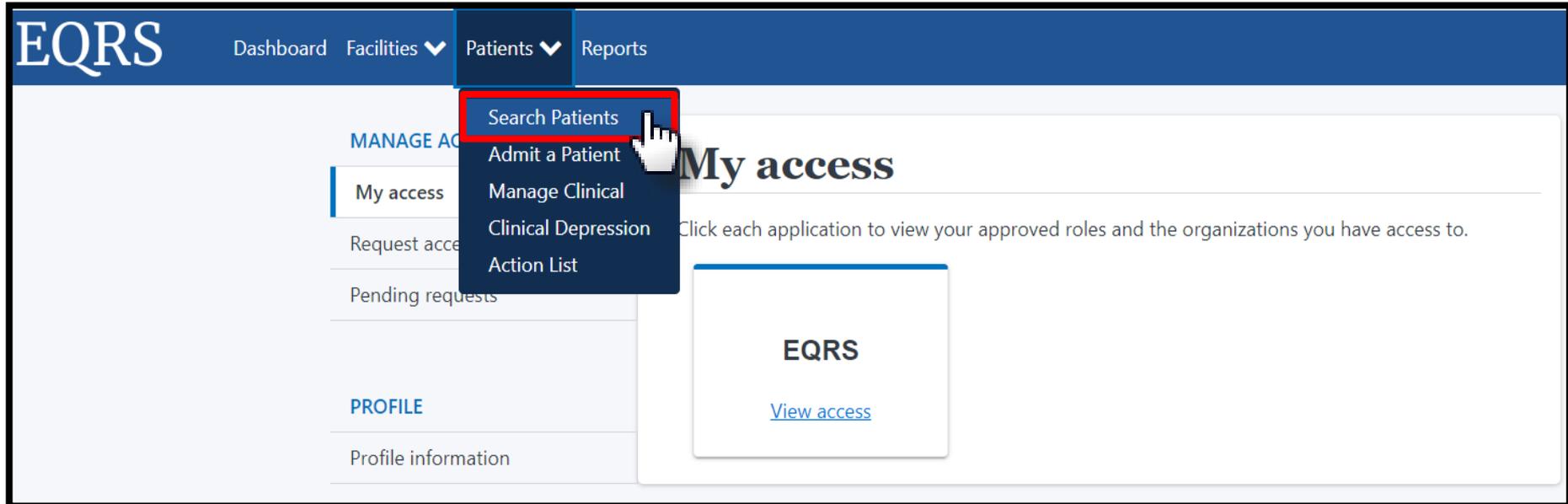
# Click Patients

Click **Patients** in the navigation menu.



# Click Search Patients

Click **Search Patients** in the Patients sub-menu.



The screenshot displays the EQRS web application interface. At the top, a dark blue navigation bar contains the EQRS logo on the left and menu items: Dashboard, Facilities (with a dropdown arrow), Patients (with a dropdown arrow), and Reports. Below this, a light blue sidebar menu is visible, with 'MANAGE ACCESS' as the main category. Under 'MANAGE ACCESS', there are several sub-items: 'My access' (highlighted with a blue bar), 'Request access', and 'Pending requests'. A dark blue dropdown menu is open under the 'Patients' menu item, listing: 'Search Patients' (highlighted with a red box and a mouse cursor), 'Admit a Patient', 'Manage Clinical', 'Clinical Depression', and 'Action List'. The main content area on the right features a 'My access' section with a heading and a sub-heading 'Click each application to view your approved roles and the organizations you have access to.' Below this, there is a white box with the EQRS logo and a blue link labeled 'View access'.

# Enter Search Criteria

Enter search criteria to locate patient.

## Search Patients

Use the criteria below to search for a patient. [Help](#)

SEARCH

Patient criteria		Criteria	<a href="#">Clear all</a>
Patient's First Name	Patient's Last Name	Patient's First Name	
<input type="text" value="Itsa"/>	<input type="text" value="Patient"/>	<input type="text" value="Itsa"/>	
Medicare Beneficiary Identifier	Social Security Number	Patient's Last Name	
<input type="text"/>	<input type="text"/>	<input type="text" value="Patient"/>	
HICNUM	EQRS Patient ID (aka CROWN UPI)	Admitted Facility	
<input type="text"/>	<input type="text"/>	ABC DIALYSIS	
SIMS UPI	Gender		<input type="button" value="Submit"/>
<input type="text"/>	<input type="text"/>		

# Click EQRS Patient ID

Click the **EQRS Patient ID** (aka **CROWN UPI**).

## Search Patient Results

[Help](#)

[Back to Search](#)

EQRS Patient ID (aka CROWN UPI)	First Name	Middle Initial	Last Name	Gender	Date of Birth	Date of Death	Social Security Number	HICNUM	Medicare Beneficiary Identifier	SIMS UPI
3100008572	Itsa		Patient	F	01/01/1960		XXXXX1234	N/A	N/A	

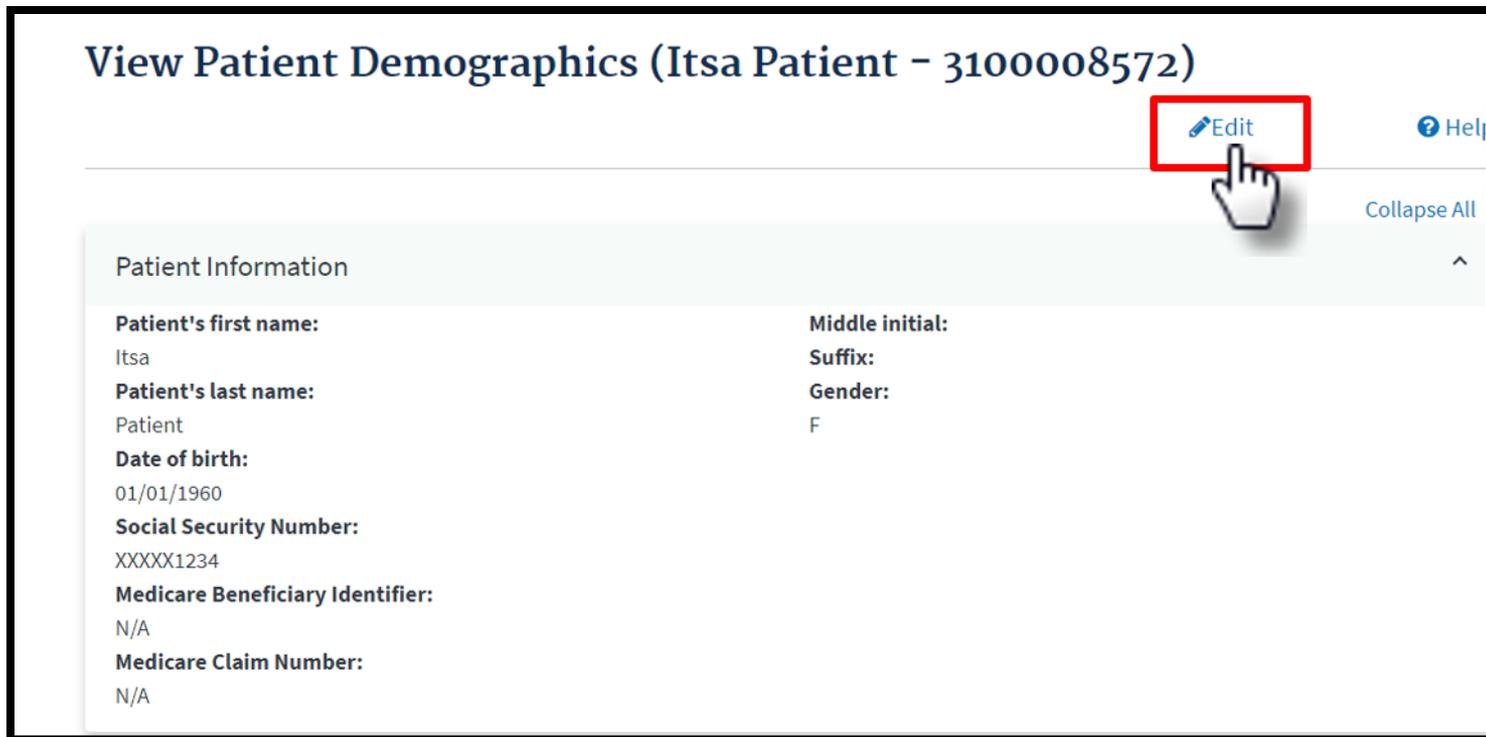
Showing 1 to 1 of 1 results

Page Size: 10

◀ Prev 1 Next ▶

# Click Edit

Click **Edit** to update the patient's information.



The screenshot shows a web interface for viewing patient demographics. The title is "View Patient Demographics (Itsa Patient - 3100008572)". In the top right corner, there is a blue "Help" icon and a "Collapse All" link. Below the title bar, there is a red-bordered button with a pencil icon and the text "Edit". A hand cursor is pointing at the "Edit" button. The main content area is titled "Patient Information" and contains the following data:

<b>Patient's first name:</b> Itsa	<b>Middle initial:</b>
<b>Patient's last name:</b> Patient	<b>Suffix:</b>
<b>Date of birth:</b> 01/01/1960	<b>Gender:</b> F
<b>Social Security Number:</b> XXXXX1234	
<b>Medicare Beneficiary Identifier:</b> N/A	
<b>Medicare Claim Number:</b> N/A	

# Enter Updates

Enter the desired updates.

## Edit Patient (Itsa Patient - 3100008572) Help

Complete the sections below to edit a patient in EQRS. Expand All

### Patient Information

<b>Patient's first name *</b>	<input type="text" value="Itsa"/>	<b>Middle initial</b>	<input type="text"/>
<b>Patient's last name *</b>	<input type="text" value="Patient"/>	<b>Suffix</b>	<input type="text" value=""/>
<b>Date of birth *</b>	<input type="text" value="01"/> <input type="text" value="01"/> <input type="text" value="1960"/>	<b>Gender *</b>	<input type="text" value="Female"/>
<b>Social Security Number *</b>	<input type="text" value="987651234"/>	<input type="checkbox"/> N/A	
<b>Medicare Beneficiary Identifier *</b>	<input type="text"/>	<input checked="" type="checkbox"/> N/A	

# Submit Updates

Click the **Submit** button to process the desired updates.

**Social Security Number**

  N/A

**Medicare Beneficiary Identifier**

  N/A

**Medicare Claim Number**

  N/A

Ethnicity, race, tribe and origin ▼

Contact Information ▼

Miscellaneous Information ▼

Medical Information ▼



# Successful Submission

EQRS displays “**Successfully edited patient**” message.

 **Successful**  
Successfully edited patient.

## View Patient Demographics (Itsa Patient - 3100008572)

[Edit](#) [Help](#)

[Collapse All](#)

**Patient Information** 

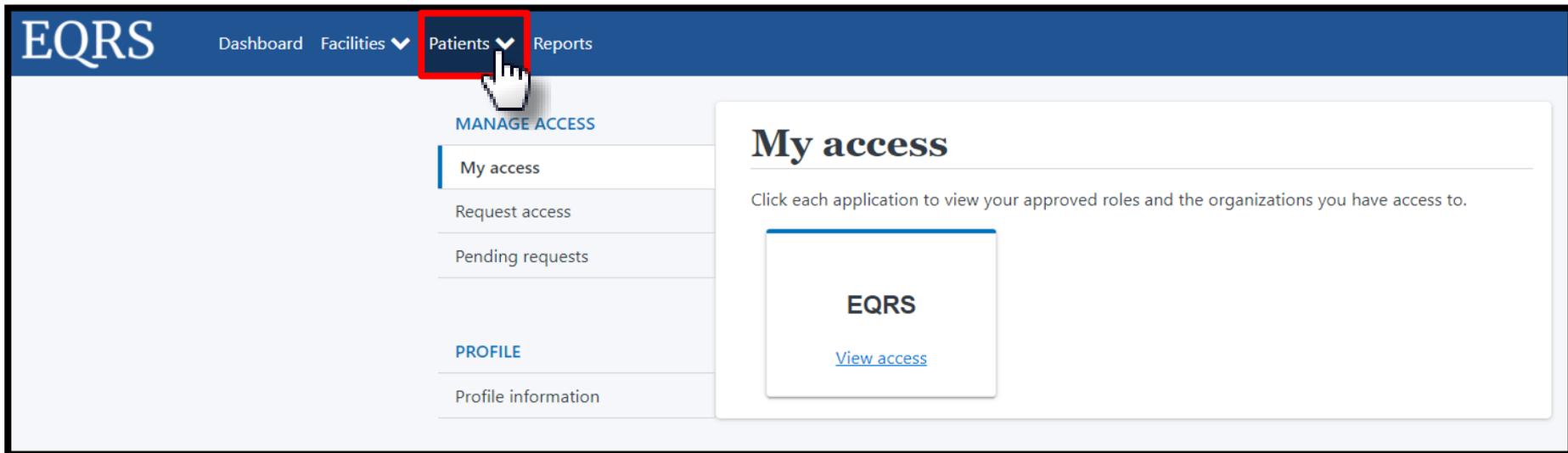
<b>Patient's first name:</b> Itsa	<b>Middle initial:</b>
<b>Patient's last name:</b> Patient	<b>Suffix:</b>
<b>Date of birth:</b> 01/01/1960	<b>Gender:</b> F
<b>Social Security Number:</b> XXXXX1234	
<b>Medicare Beneficiary Identifier:</b> N/A	
<b>Medicare Claim Number:</b> N/A	



# Submit an Initial CMS-2728

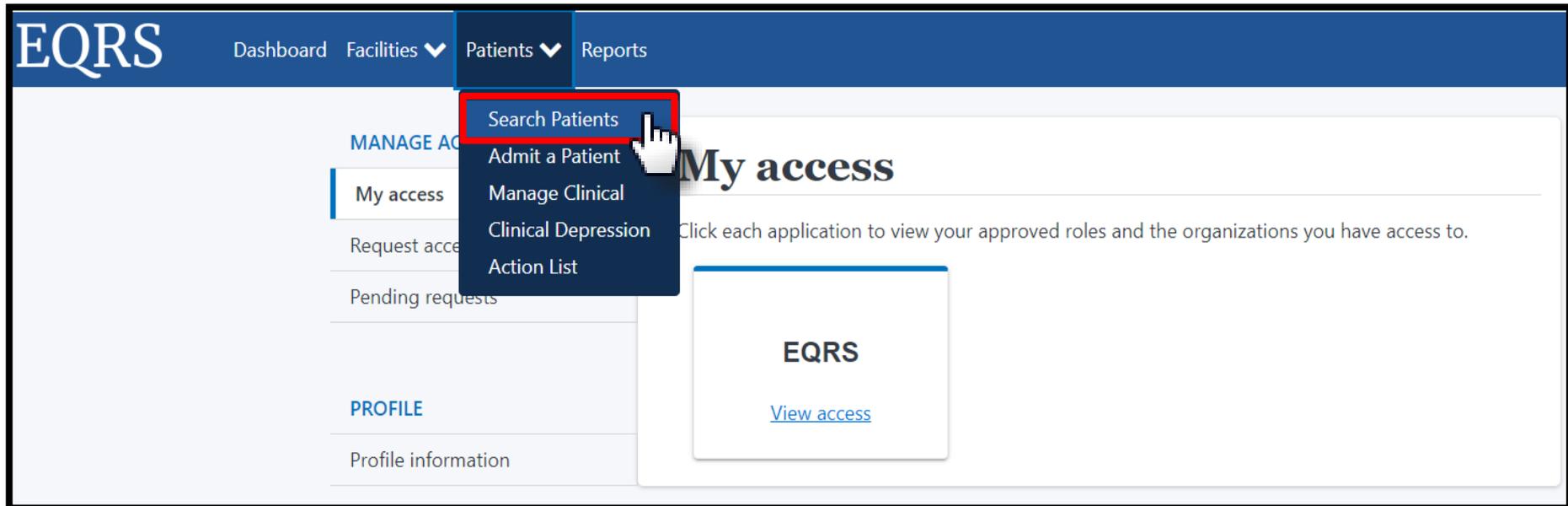
# Click Patients

Click **Patients** in the navigation menu.



# Click Search Patients

Click **Search Patients** in the Patients sub-menu.



# Enter Search Criteria

Enter search criteria to locate patient and click **Submit**.

## Search Patients

Use the criteria below to search for a patient. [? Help](#)

SEARCH

---

**Patient criteria**

Patient's First Name

Patient's Last Name

Medicare Beneficiary Identifier

Social Security Number

HICNUM

EQRS Patient ID (aka CROWN UPI)

SIMS UPI

Gender

**Criteria** [Clear all](#)

*Patient's First Name*

✖ Itsa

*Patient's Last Name*

✖ Patient

*Admitted Facility*

ABC DIALYSIS

---

**Submit**

# Click EQRS Patient ID

Click the **EQRS Patient ID (aka CROWN UPI)**.

**Search Patient Results** ? Help

[Back to Search](#)

EQRS Patient ID (aka CROWN UPI)	First Name	Middle Initial	Last Name	Gender	Date of Birth	Date of Death	Social Security Number	HICNUM	Medicare Beneficiary Identifier	SIMS UPI
3100008572	Itsa		Patient	F	01/01/1960		XXXXX1234	N/A	N/A	

Showing 1 to 1 of 1 results    Page Size: 10    << Prev 1 Next >>

# Click Form 2728

View the patient's demographics and click the **Form 2728** link.

The screenshot shows a web application interface for managing patient information. On the left is a sidebar titled 'MANAGE PATIENT' with a list of options: Patient, Patient History, Admissions, Treatments, Vaccinations, and Form 2728. The 'Form 2728' option is highlighted with a red rectangle and a mouse cursor. The main content area is titled 'View Patient Demographics (Itsa Patient - 3100008572)' and includes 'Edit' and 'Help' buttons. Below the title is a 'Patient Information' section with a 'Collapse All' button. The patient information is displayed in two columns:

Patient Information	
<b>Patient's first name:</b> Itsa	<b>Middle initial:</b>
<b>Patient's last name:</b> Patient	<b>Suffix:</b>
<b>Date of birth:</b> 01/01/1960	<b>Gender:</b> F
<b>Social Security Number:</b> XXXXX1234	
<b>Medicare Beneficiary Identifier:</b> N/A	
<b>Medicare Claim Number:</b> N/A	

# Add Initial 2728

Click **Add Initial 2728**.

Manage Form 2728 (Itsa Patient - 3100008572) [? Help](#)

Eligible 2728 Forms	Admit Date	Admit Facility	Due Date	Add 2728
Initial Dialysis	08/25/2020	ABC DIALYSIS	10/09/2020	<b>Add Initial 2728</b>

Existing 2728 Forms

Status	Admit Facility	Due Date	Date Submitted
No Form 2728s exist for this patient.			



# CMS-2728 Section A (continued)

<b>(6) *Sex</b> Male		
<b>(7) *Ethnicity</b> Not Hispanic or Latino	<b>(8) Country/Area of Origin or Ancestry</b>	
<b>(9) *Race</b> White <b>Name of Enrolled/Principal Tribe:</b>	<b>(10) *Is patient applying for ESRD Medicare coverage?</b> <input type="text" value="v"/>	
<b>(11) *Current Medical Coverage</b> <input type="checkbox"/> Medicaid <input type="checkbox"/> VA <input checked="" type="checkbox"/> Medicare <input type="checkbox"/> Medicare Advantage <input type="checkbox"/> Employer Group Health Insurance <input type="checkbox"/> Other <input type="checkbox"/> None	<b>(12) *Height</b> <input type="text" value="191"/> <input style="border: none; border-bottom: 1px solid #ccc; padding: 2px 5px;" type="text" value="Centimeters"/> <input type="text" value="v"/>	<b>(13) *Dry Weight</b> <input type="text" value="77"/> <input style="border: none; border-bottom: 1px solid #ccc; padding: 2px 5px;" type="text" value="Kilograms"/> <input type="text" value="v"/>

# CMS-2728 Section A (continued)

## (14) \*Primary cause of Renal Failure

25040

Diabetes with renal manifestations Type 2

## (15) \*Employment Status(6 mos prior and current status)

### Prior:

Employed Part Time

### Current:

Retired Due to Age/Preference

## (16) \*Co-Morbid Conditions

- |                                                                      |                                                                    |
|----------------------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> a. Congestive heart failure                 | <input type="checkbox"/> n. Malignant neoplasm, Cancer             |
| <input type="checkbox"/> b. Atherosclerotic heart disease ASHD       | <input type="checkbox"/> o. Toxic nephropathy                      |
| <input checked="" type="checkbox"/> c. Other cardiac disease         | <input type="checkbox"/> p. Alcohol dependence                     |
| <input type="checkbox"/> d. Cerebrovascular disease, CVA, TIA*       | <input type="checkbox"/> q. Drug dependence*                       |
| <input checked="" type="checkbox"/> e. Peripheral vascular disease*  | <input type="checkbox"/> r. Inability to ambulate                  |
| <input checked="" type="checkbox"/> f. History of hypertension       | <input type="checkbox"/> s. Inability to transfer                  |
| <input type="checkbox"/> g. Amputation                               | <input type="checkbox"/> t. Needs assistance with daily activities |
| <input type="checkbox"/> h. Diabetes, currently on insulin           | <input type="checkbox"/> u. Institutionalized                      |
| <input checked="" type="checkbox"/> i. Diabetes, on oral medications | <input type="checkbox"/> u1. Institutionalized - Assisted Living   |
| <input type="checkbox"/> j. Diabetes, without medications            | <input type="checkbox"/> u2. Institutionalized - Nursing Home      |
| <input type="checkbox"/> k. Diabetic retinopathy                     | <input type="checkbox"/> u3. Institutionalized - Other Institution |
| <input type="checkbox"/> l. Chronic obstructive pulmonary disease    | <input type="checkbox"/> v. Non-renal congenital abnormality       |

# CMS-2728 Section A (continued)

**(17) \*Prior to ESRD therapy:**

a. Did patient receive exogenous erythropoietin or equivalent?

No ▼

If Yes, answer:

▼

b. Was patient under care of nephrologist?

Yes ▼

If Yes, answer:

▼

c. Was patient under care of kidney dietitian?

No ▼

If Yes, answer:

▼

**d. What access was used on first outpatient dialysis:**

Catheter ▼

If not AVF, then:

a. Is maturing AVF present?

Yes ▼

b. Is maturing graft present?

No ▼

# CMS-2728 Section A (continued)

## (18) Laboratory Values Within 45 Days Prior to the Most Recent ESRD Episode (Lipid Profile Within 1 Year of Most Recent ESRD Episode)

Laboratory Test	Value	Date		
a.1 Serum Albumin (g/dl)	<input type="text"/>	Month <input type="text" value="MM"/>	Day <input type="text" value="DD"/>	Year <input type="text" value="YYYY"/>
a.2 Serum Albumin Lower Limit	<input type="text"/>			
a.3 Lab Method Used (BCG or BCP)	<input type="text" value="v"/>			
b. *Serum Creatinine (mg/dl)	<input type="text" value="8.0"/>	Month <input type="text" value="06"/>	Day <input type="text" value="20"/>	Year <input type="text" value="2021"/>
c. Hemoglobin (g/dl)	<input type="text"/>	Month <input type="text" value="MM"/>	Day <input type="text" value="DD"/>	Year <input type="text" value="YYYY"/>
d. HbA1c	<input type="text"/>	Month <input type="text" value="MM"/>	Day <input type="text" value="DD"/>	Year <input type="text" value="YYYY"/>

# CMS-2728 Section A (continued)

e. Lipid Profile TC	<input type="text"/>	Month MM	Day DD	Year YYYY
LDL	<input type="text"/>	Month MM	Day DD	Year YYYY
HDL	<input type="text"/>	Month MM	Day DD	Year YYYY
TG	<input type="text"/>	Month MM	Day DD	Year YYYY

# Select Next Accordion Section

Click on the desired section to expand and view.

B. COMPLETE FOR ALL ESRD PATIENTS IN DIALYSIS TREATMENT



C. COMPLETE FOR ALL KIDNEY TRANSPLANT PATIENTS



D. COMPLETE FOR ALL ESRD SELF-DIALYSIS TRAINING PATIENTS (MEDICARE APPLICANTS ONLY)



E. PHYSICIAN IDENTIFICATION



F. OBTAIN SIGNATURE FROM PATIENT



Save

Submit

Cancel

# CMS-2728 Section B

Review and complete Section B, as needed.

<b>(19) Name of Dialysis Facility</b> ABC DIALYSIS	<b>(20a) Medicare Provider Number (for item 19)</b>	<b>(20b) Facility NPI (for item 19)</b> ABC DIALYSIS
<b>(21) *Primary Dialysis Setting</b> Dialysis Facility/Center	<b>(22) *Primary Type of Dialysis</b> Hemodialysis  Sessions Per Week: 3 / Hours Per Session: 3.5	
<b>(23) *Date Regular Chronic Dialysis Began</b> Month      Day      Year  <input type="text" value="MM"/> <input type="text" value="DD"/> <input type="text" value="YYYY"/>	<b>(24) *Date Patient Started Chronic Dialysis at Current Facility</b>  ABC DIALYSIS	
<b>(25) *Has Patient Been Informed of Kidney Transplant Options?</b>  <input type="text" value="v"/>	<b>(26) If patient NOT informed of transplant options, please check all that apply</b>  <input type="checkbox"/> Patient declined information <input type="checkbox"/> Patient is not eligible medically <input type="checkbox"/> Patient has not been assessed <input type="checkbox"/> Other	

# CMS-2728 Section C

Review and complete Section C, as needed.

(27) *Date of Transplant	(28) Name of Transplant Hospital
(29a) Medicare Provider Number for Item 28	(29b) Facility NPI for Item 28
Date patient was admitted as an inpatient to a hospital in preparation for, or anticipation of, a kidney transplant prior to the date of actual transplantation.	
(30) Enter Date	(31) Name of Preparation Hospital
(32a) Medicare Provider Number for Item 31	(32b) Facility NPI for Item 31
(33) *Current Status of Transplant (if Functioning, skip items 35 and 36)	(34) *Type of Donor
(35) If Non-Functioning, Date of Return to Regular Dialysis	(36) Current Dialysis Treatment Site

# CMS-2728 Section D

Review and complete Section D, as applicable.

<b>(37) Name of Training Provider</b> Find Facility by facility ID, facility name, facility DBA, facility CCN, facility NPI, phone number, fax number <input type="text"/>			<b>(38a) Medicare Provider Number of Training Provider (for item 37)</b>	<b>(38b) NPI of Training Provider</b>
<b>(39) Date Training Began</b> Month      Day      Year <input type="text"/> MM <input type="text"/> DD <input type="text"/> YYYY		<b>(40) Type of Training</b> <input type="text"/> <input type="text"/>		
<b>(41) This Patient is Expected to Complete (or has completed) Training and will Self-dialyze on a Regular Basis</b> <input type="text"/>		<b>(42) Date When Patient Completed, or is Expected to Complete, Training</b> Month      Day      Year <input type="text"/> MM <input type="text"/> DD <input type="text"/> YYYY		
<i>I certify that the above self-dialysis training information is correct and is based on consideration of all pertinent medical, psychological, and sociological factors as reflected in records kept by this training facility.</i>				
<b>(43) Printed Name and Signature of Physician personally familiar with the patient's training</b> <input type="text"/>		Month      Day      Year <input type="text"/> MM <input type="text"/> DD <input type="text"/> YYYY	<b>(44a) UPIN of Physician in item 43</b>	<b>(44b) NPI of Physician in item 43</b>

# CMS-2728 Section E

Select the Attending Physician.

E. PHYSICIAN IDENTIFICATION		
<b>(45) *Attending Physician</b> <input type="text" value="Nick Fury"/>		<b>(46) Physician's Phone No.</b>
<b>(47a) UPIN of Physician in item 45</b>	<b>(47b) NPI of Physician in item 45</b> 1780762971	
<b>PHYSICIAN ATTESTATION</b>		
<p><i>I certify, under penalty of perjury, that the information on this form is correct to the best of my knowledge and belief. Based on diagnostic tests and laboratory findings, I further certify that this patient has reached the stage of renal impairment that appears irreversible and permanent and requires a regular course of dialysis or kidney transplant to maintain life. I understand that this information is intended for use in establishing the patient's entitlement to Medicare benefits and that any falsification, misrepresentation, or concealment of essential information may subject me to fine, imprisonment, civil penalty, or other civil sanctions under applicable Federal laws.</i></p>		
<b>(49) *Date</b>		
Month <input type="text" value="MM"/>	Day <input type="text" value="DD"/>	Year <input type="text" value="YYYY"/>
<b>(52) Remarks</b> <input type="text"/>		

# Click Save

Select the GFR Calculation Method and click **Save**.

F. OBTAIN SIGNATURE FROM PATIENT

*I hereby authorize any physician, hospital, agency, or other organization to disclose any medical records or other information about my medical condition to the Department of Health and Human Services for purposes of reviewing my application for Medicare entitlement under the Social Security Act and/or for scientific research.*

(54) \*Date

Month  Day  Year

**Form Entered Date:**  
04/15/2021

**Network:**  
10

**GFR Calculation Method:**

**GFR:**  
0.0

**Save** **Submit** **Cancel**



# Select Print

EQRS displays the “**Successfully saved form 2728**” message. Click the **Print** link.

 **Successful**  
Successfully saved form 2728.

**View ESRD Medical Evidence (2728) - Saved**

 [Print](#)    [Edit](#)    [Delete](#)    [Help](#)

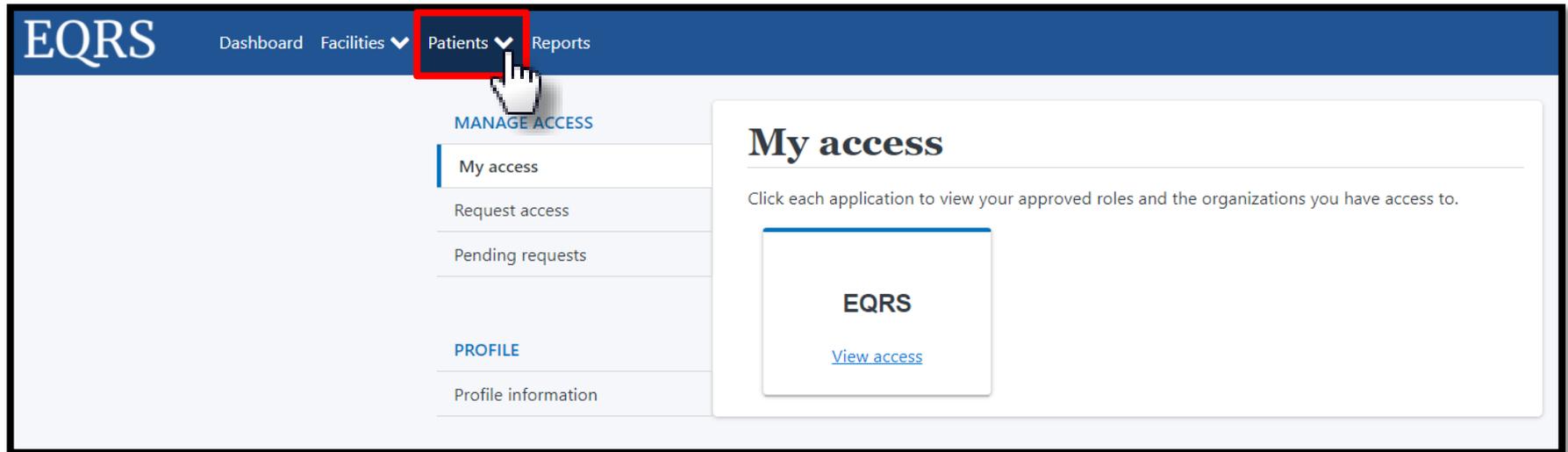
**Submit Date:**   **CONTROL NUMBER 0938-0046 Expires 11/30/2022**

**A. COMPLETE FOR ALL ESRD PATIENTS - 3100008572**

<i>FormType:</i> Initial Dialysis		
<b>(1) Patient's Last Name</b> Patient	<b>First Name</b> Itsa	<b>MI</b>
<b>(2) Medicare Beneficiary Identifier or Social Security Number</b> XXX-XX-1234		<b>(3) Date of Birth</b> 01/01/1960

# Form Signed: Click Patients

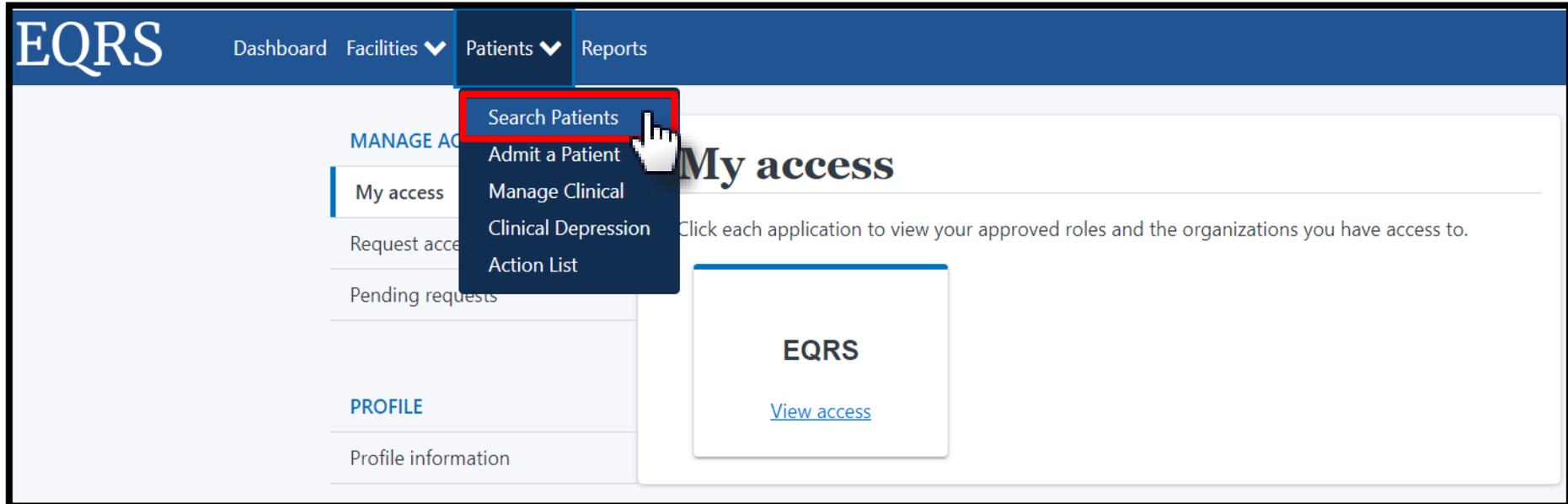
Click **Patients** in the navigation menu.



The screenshot shows the EQRS application interface. The top navigation bar is dark blue with the EQRS logo on the left and menu items: Dashboard, Facilities (with a dropdown arrow), Patients (with a dropdown arrow and a red box around it), and Reports. A mouse cursor is pointing at the Patients dropdown arrow. Below the navigation bar, the left sidebar contains a 'MANAGE ACCESS' section with 'My access' (highlighted with a blue bar), 'Request access', and 'Pending requests'. Below that is a 'PROFILE' section with 'Profile information'. The main content area on the right is titled 'My access' and contains the text 'Click each application to view your approved roles and the organizations you have access to.' Below this text is a box for the 'EQRS' application with a 'View access' link.

# Click Search Patients

Click **Search Patients** in the Patients sub-menu.



# Enter Search Criteria

Enter search criteria to locate patient and click **Submit**.

## Search Patients

Use the criteria below to search for a patient. [? Help](#)

SEARCH

---

**Patient criteria**

Patient's First Name

Patient's Last Name

Medicare Beneficiary Identifier

Social Security Number

HICNUM

EQRS Patient ID (aka CROWN UPI)

SIMS UPI

Gender

**Criteria** [Clear all](#)

*Patient's First Name*

✖ Itsa

*Patient's Last Name*

✖ Patient

*Admitted Facility*

ABC DIALYSIS

---

**Submit**

# Click EQRS Patient ID

Click the **EQRS Patient ID (aka CROWN UPI)**.

**Search Patient Results** ? Help

[Back to Search](#)

EQRS Patient ID (aka CROWN UPI)	First Name	Middle Initial	Last Name	Gender	Date of Birth	Date of Death	Social Security Number	HICNUM	Medicare Beneficiary Identifier	SIMS UPI
3100008572	Itsa		Patient	F	01/01/1960		XXXXX1234	N/A	N/A	

Showing 1 to 1 of 1 results    Page Size: 10    << Prev 1 Next >>

# Click Form 2728

View the patient's demographics and click the **Form 2728** link.

The screenshot shows a web application interface for managing a patient. On the left is a sidebar with a 'MANAGE PATIENT' header and a list of menu items: Patient, Patient History, Admissions, Treatments, Vaccinations, and Form 2728. The 'Form 2728' item is highlighted with a red rectangle and a mouse cursor. The main content area is titled 'View Patient Demographics (Itsa Patient - 3100008572)' and includes 'Edit' and 'Help' buttons. Below the title is a 'Patient Information' section with a 'Collapse All' link. The patient information is displayed in two columns: the left column contains 'Patient's first name: Itsa', 'Patient's last name: Patient', 'Date of birth: 01/01/1960', 'Social Security Number: XXXXX1234', 'Medicare Beneficiary Identifier: N/A', and 'Medicare Claim Number: N/A'; the right column contains 'Middle initial:', 'Suffix:', and 'Gender: ♀'.

**MANAGE PATIENT**

**Patient**

Patient History

Admissions

Treatments

Vaccinations

**Form 2728**

## View Patient Demographics (Itsa Patient - 3100008572)

[Edit](#) [Help](#)

[Collapse All](#)

**Patient Information**

<b>Patient's first name:</b> Itsa	<b>Middle initial:</b>
<b>Patient's last name:</b> Patient	<b>Suffix:</b>
<b>Date of birth:</b> 01/01/1960	<b>Gender:</b> ♀
<b>Social Security Number:</b> XXXXX1234	
<b>Medicare Beneficiary Identifier:</b> N/A	
<b>Medicare Claim Number:</b> N/A	

# Existing 2728 Forms: Initial Dialysis

Click the **Initial Dialysis** link.

Manage Form 2728 (Itsa Patient - 3100008572) Help

Eligible 2728 Forms Admit Date Admit Facility Due Date Add 2728

No Form 2728 is required for this patient.

Existing 2728 Forms Status Admit Facility Due Date Date Submitted

<a href="#">Initial Dialysis</a> +	Saved	ABC DIALYSIS	10/09/2020	
------------------------------------	-------	--------------	------------	--

# Click Edit

Click the **Edit** link.

View ESRD Medical Evidence (2728) - Saved

[Print](#) [Edit](#) [Delete](#) [Help](#)

Submit Date: OMB CONTROL NUMBER 0938-0046 Expires 11/30/2022

**A. COMPLETE FOR ALL ESRD PATIENTS - 3100008572**

<i>FormType:</i> Initial Dialysis		
<b>(1) Patient's Last Name</b> Patient	<b>First Name</b> Itsa	<b>MI</b>
<b>(2) Medicare Beneficiary Identifier or Social Security Number</b> XXX-XX-1234		<b>(3) Date of Birth</b> 01/01/1960
<b>(4) Patient Mailing Address</b> 123 Patient Lane Tampa, FL 33607		<b>(5) Phone Number</b>
<b>(6) Sex</b> Female	<b>(7) Ethnicity</b> Not Hispanic or Latino	<b>(8) Country/Area of Origin or Ancestry</b>
<b>(9) Race</b> White Asian		<b>(10) Is patient applying for ESRD Medicare coverage?</b> Yes

# View Section E

Scroll down to Section E.

## Edit an ESRD Medical Evidence (2728) - Saved

 Print

 Help

OMB CONTROL NUMBER 0938-0046 Expires 11/30/2022

[Expand All](#)

A. COMPLETE FOR ALL ESRD PATIENTS - 3100008572 

**\*Check One:**

Initial

Re-entitlement

Supplemental

**(1) \*Patient's Last Name**

Patient

**\*First Name**

Itsa

**MI**

**(2) Medicare Beneficiary Identifier or Social Security Number**

XXX-XX-1234

**(3) \*Date of Birth**

01/01/1960

# Enter Date Physician Signed

Enter the date the physician signed the form.

E. PHYSICIAN IDENTIFICATION		
(45) *Attending Physician Nick Fury	(46) Physician's Phone No.	
(47a) UPIN of Physician in item 45	(47b) NPI of Physician in item 45 1780762971	
<b>PHYSICIAN ATTESTATION</b>		
<p><i>I certify, under penalty of perjury, that the information on this form is correct to the best of my knowledge and belief. Based on diagnostic tests and laboratory findings, I further certify that this patient has reached the stage of renal impairment that appears irreversible and permanent and requires a regular course of dialysis or kidney transplant to maintain life. I understand that this information is intended for use in establishing the patient's entitlement to Medicare benefits and that any falsification, misrepresentation, or concealment of essential information may subject me to fine, imprisonment, civil penalty, or other civil sanctions under applicable Federal laws.</i></p>		
<b>(49) *Date</b>		
Month MM	Day DD	Year YYY
<b>(52) Remarks</b>		
<div style="border: 1px solid gray; height: 100px;"></div>		

# Enter Date Patient Signed and Submit

Enter the date the patient signed the form and click **Submit**.

F. OBTAIN SIGNATURE FROM PATIENT

*I hereby authorize any physician, hospital, agency, or other organization to disclose any medical records or other information about my medical condition to the Department of Health and Human Services for purposes of reviewing my application for Medicare entitlement under the Social Security Act and/or for scientific research.*

(54) \*Date

Month	Day	Year
<input type="text" value="MM"/>	<input type="text" value="DD"/>	<input type="text" value="YYYY"/>

<b>Form Entered Date:</b> 04/15/2021	<b>Network:</b> 10
<b>GFR Calculation Method:</b> <input type="text" value="MDRD IDMS standardized"/>	<b>GFR:</b> 0.0

# Successful Submission

EQRS displays the “Successfully submitted form 2728” message.

 **Successful**  
Successfully submitted form 2728.

View ESRD Medical Evidence (2728) – Submitted

 Print

 Help

Submit Date: 06/24/2021

OMB CONTROL NUMBER 0938-0046 Expires 11/30/2022

A. COMPLETE FOR ALL ESRD PATIENTS - 3100021521

*FormType:*

Initial Dialysis

(1) Patient's Last Name

Patient

First Name

Itsa

MI

(2) Medicare Beneficiary Identifier or Social Security Number

XXX-XX-2828

(3) Date of Birth

12/12/1921

(4) Patient Mailing Address

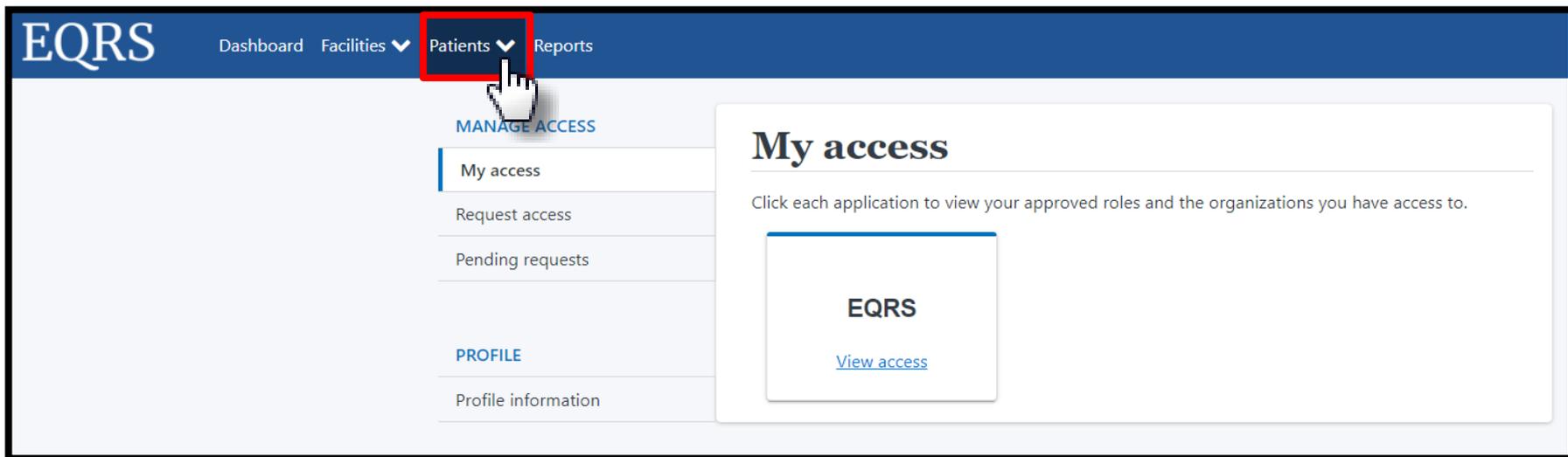
(5) Phone Number



# Add Treatment Information

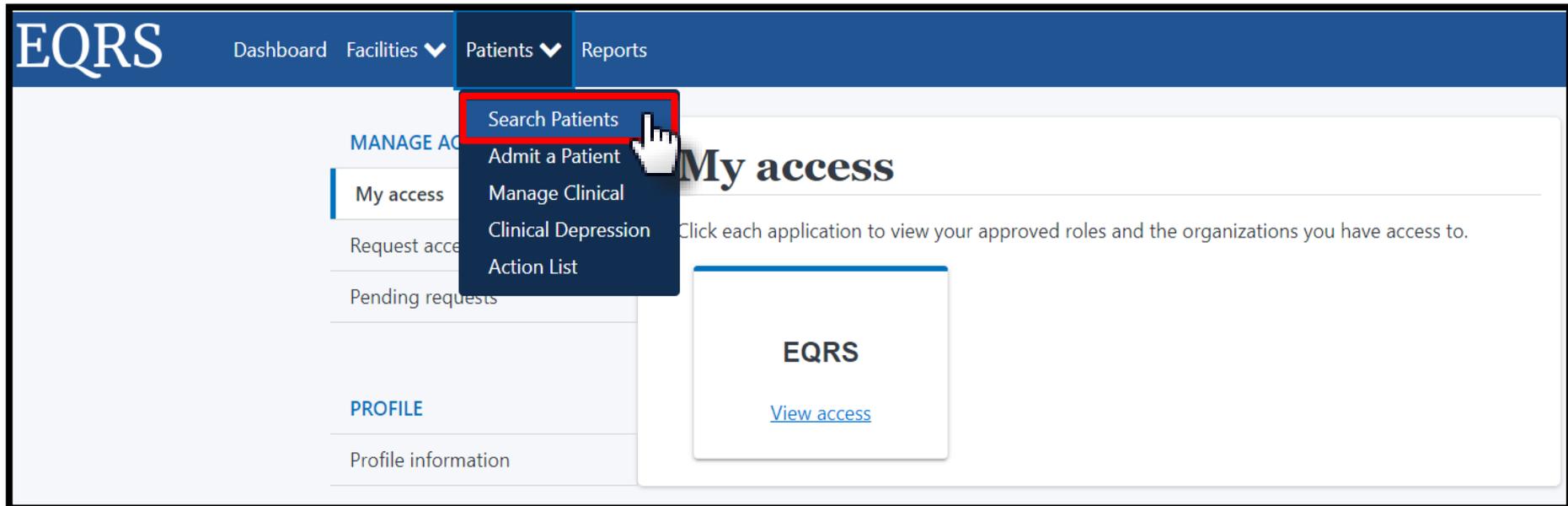
# Click Patients

Click **Patients** in the navigation menu.



# Click Search Patients

Click **Search Patients** in the Patients sub-menu.



# Enter Search Criteria

Enter search criteria to locate patient and click **Submit**.

## Search Patients

Use the criteria below to search for a patient. [? Help](#)

SEARCH

---

<b>Patient criteria</b>	
Patient's First Name	Patient's Last Name
<input type="text" value="Itsa"/>	<input type="text" value="Patient"/>
Medicare Beneficiary Identifier	Social Security Number
<input type="text"/>	<input type="text"/>
HICNUM	EQRS Patient ID (aka CROWN UPI)
<input type="text"/>	<input type="text"/>
SIMS UPI	Gender
<input type="text"/>	<input type="text"/>

**Criteria** [Clear all](#)

- Patient's First Name*
  - ✖ Itsa
- Patient's Last Name*
  - ✖ Patient
- Admitted Facility*
  - ABC DIALYSIS

# Click EQRS Patient ID

Click the **EQRS Patient ID (aka CROWN UPI)**.

**Search Patient Results** [? Help](#)

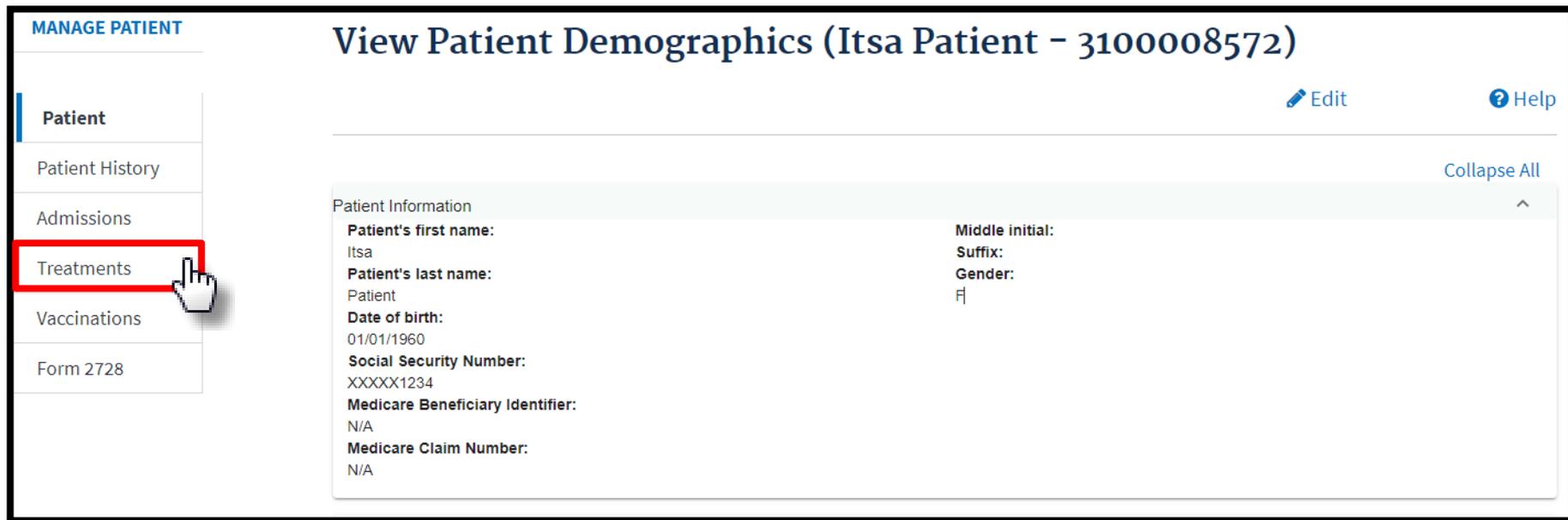
[Back to Search](#)

EQRS Patient ID (aka CROWN UPI)	First Name	Middle Initial	Last Name	Gender	Date of Birth	Date of Death	Social Security Number	HICNUM	Medicare Beneficiary Identifier	SIMS UPI
3100008572	Itsa		Patient	F	01/01/1960		XXXXX1234	N/A	N/A	

Showing 1 to 1 of 1 results    Page Size: 10    << Prev 1 Next >>

# Click Treatments

View the patient's demographics and click the **Treatments** link.



The screenshot displays a web interface for managing a patient. On the left, a sidebar titled "MANAGE PATIENT" contains several menu items: "Patient", "Patient History", "Admissions", "Treatments", "Vaccinations", and "Form 2728". The "Treatments" item is highlighted with a red rectangular box, and a mouse cursor is positioned over it. The main content area is titled "View Patient Demographics (Itsa Patient - 3100008572)". In the top right corner of this area, there are "Edit" and "Help" buttons. Below the title, there is a "Collapse All" link. The patient information is presented in a light green box with the following details:

Patient Information	
<b>Patient's first name:</b> Itsa	<b>Middle initial:</b>
<b>Patient's last name:</b> Patient	<b>Suffix:</b>
<b>Date of birth:</b> 01/01/1960	<b>Gender:</b> F
<b>Social Security Number:</b> XXXXX1234	
<b>Medicare Beneficiary Identifier:</b> N/A	
<b>Medicare Claim Number:</b> N/A	

# Click Admit Date

Click the **Admit Date** link.

## View patient treatments (Itsa Patient - 3100008572)

[Help](#)

Select an admission to view associated treatments.

Admit Date	Admit Reason	Discharge Date	Discharge Reason	Facility Name	Facility CCN	Facility NPI
<a href="#">08/25/2020</a>	New ESRD Patient			ABC DIALYSIS	123456	1234567819



Page Size

◀◀ Prev 1 Next ▶▶

Showing 1 to 1 of 1 results

10



# Click New Treatment

Click the **New Treatment** link.

## View patient treatments (Itsa Patient - 3100008572) Help

Select an admission to view associated treatments.

Admit Date	Admit Reason	Discharge Date	Discharge Reason	Facility Name	Facility CCN	Facility NPI
<a href="#">08/25/2020</a>	New ESRD Patient			ABC DIALYSIS	123456	1234567819

Page Size Showing 1 to 1 of 1 results  Prev 1 Next

---

### Treatment Summary (08/25/2020) Help

Treatment Start Date	Treatment	Transplant Status	Attending Practitioner	UP	NPI
<a href="#">08/25/2020</a>	Dialysis Facility/Center Hemodialysis	N/A	Fury, Nick	<b>+New Treatment</b>	1234567819

Page Size Showing 1 to 1 of 1 results  Prev 1 Next

# Submit New Treatment

Enter the new treatment information. Click **Submit**.

### Dialysis Treatment Information

**Treatment Start Date \***

Month: 09 Day: 01 Year: 2020

**Primary Dialysis Setting \***      **Dialysis Time Period**

Expected Self-care Setting

**Primary Type of Treatment \***      **Sessions Per Week**      **Time Per Session (minutes)**

CAPD

**Attending Practitioner \***      **Attending Practitioner UPIN**      **Attending Practitioner NPI**

Grev, Meredith

**Type of Dialysis Training**

**Dialysis Training Start Date**      **Dialysis Training End Date**

Month: MM Day: DD Year: YYYY      Month: MM Day: DD Year: YYYY

**Cancel**      **Submit**

# Successful Submission

EQRS displays the “Treatment added successfully” message.

The screenshot displays the EQRS interface. At the top, there are filters for Treatment Start Date, Treatment, Transplant Status, Attending Practitioner, UPIN, and NPI. Below the filters is a table with two rows of treatment data. A green message box with a checkmark icon and the text "Successful Treatment added successfully." is highlighted with a red border. Below the message box, there is a section titled "View Treatment Information (09/01/2020)" with "Edit", "Delete", and "Help" buttons. The treatment information is displayed in a table format.

Treatment Start Date	Treatment	Transplant Status	Attending Practitioner	UPIN	NPI
<a href="#">09/01/2020</a>	Home CAPD	N/A	Grey, Meredith		7234567890
<a href="#">08/25/2020</a>	Dialysis Facility/Center Hemodialysis	N/A	Fury, Nick		1780762971

Page Size: 10  
Showing 1 to 2 of 2 results

**Successful**  
Treatment added successfully.

**View Treatment Information (09/01/2020)**

Edit Delete Help

**Treatment information**

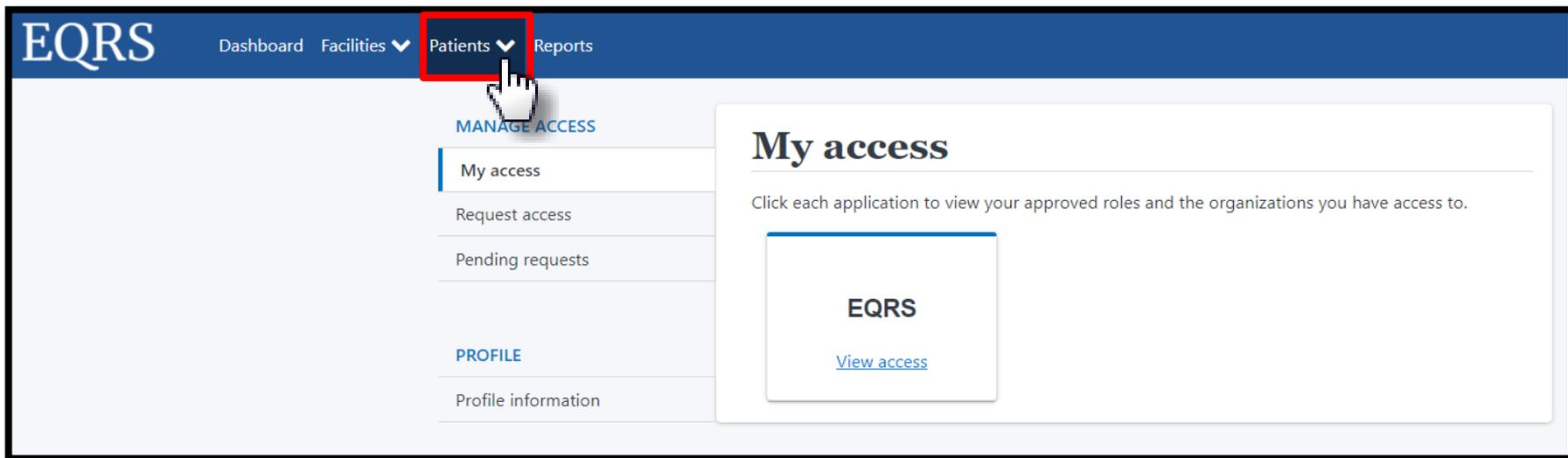
<b>Treatment Start date:</b> 09/01/2020	<b>Submit date:</b> 09/04/2020	
<b>Primary Dialysis Setting:</b> Home	<b>Dialysis Time Period:</b> N/A	<b>Expected Self-care Setting:</b> N/A
<b>Primary Type of Treatment:</b> CAPD	<b>Sessions Per Week:</b> N/A	<b>Time Per Session (minutes):</b> N/A
<b>Attending Practitioner:</b> Grey, Meredith	<b>Attending Practitioner UPIN:</b> N/A	<b>Attending Practitioner NPI:</b> 7234567890
<b>Type of Dialysis Training:</b> N/A	<b>Dialysis Training Start Date:</b> N/A	<b>Dialysis Training End Date:</b> N/A



# Add Vaccination Information

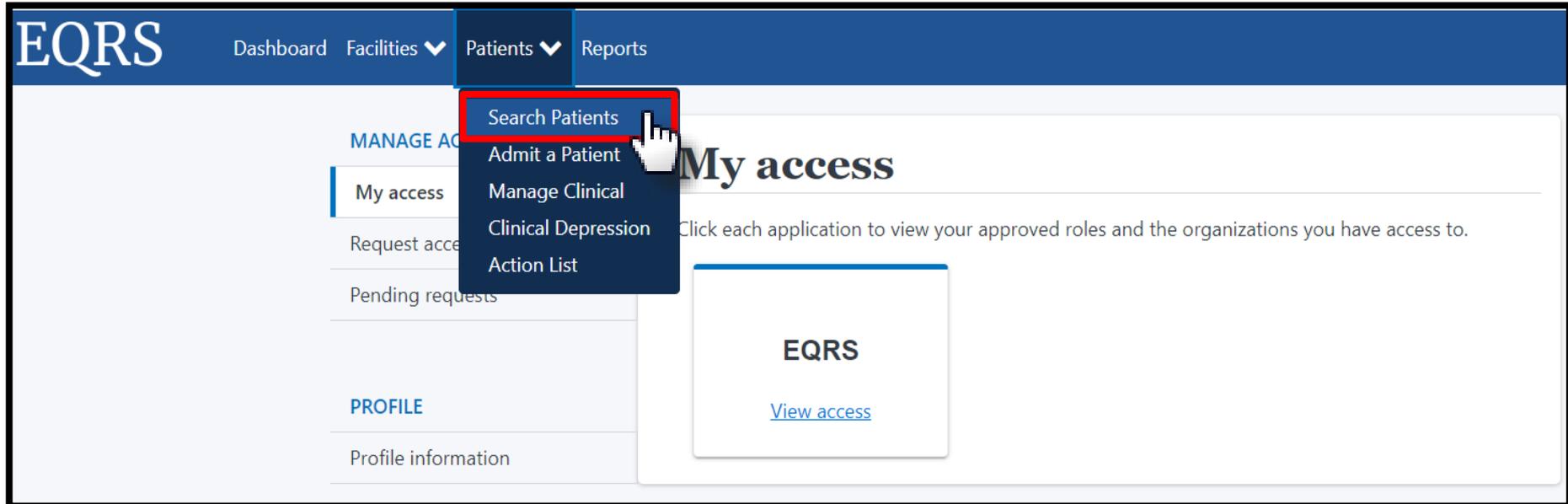
# Click Patients

Click **Patients** in the navigation menu.



# Click Search Patients

Click **Search Patients** in the Patients sub-menu.



# Enter Search Criteria

Enter search criteria to locate patient and click **Submit**.

## Search Patients

Use the criteria below to search for a patient. [? Help](#)

SEARCH

Patient criteria		Criteria	<a href="#">Clear all</a>
Patient's First Name	Patient's Last Name	Patient's First Name	
<input type="text" value="Itsa"/>	<input type="text" value="Patient"/>	<input type="text" value="✘ Itsa"/>	
Medicare Beneficiary Identifier	Social Security Number	Patient's Last Name	
<input type="text"/>	<input type="text"/>	<input type="text" value="✘ Patient"/>	
HICNUM	EQRS Patient ID (aka CROWN UPI)	Admitted Facility	
<input type="text"/>	<input type="text"/>	ABC DIALYSIS	
SIMS UPI	Gender		<input type="button" value="Submit"/>
<input type="text"/>	<input type="text"/>		

# Click EQRS Patient ID

Click the **EQRS Patient ID (aka CROWN UPI)**.

**Search Patient Results** [Help](#)

[Back to Search](#)

EQRS Patient ID (aka CROWN UPI)	First Name	Middle Initial	Last Name	Gender	Date of Birth	Date of Death	Social Security Number	HICNUM	Medicare Beneficiary Identifier	SIMS UPI
3100008572	Itsa		Patient	F	01/01/1960		XXXXX1234	N/A	N/A	

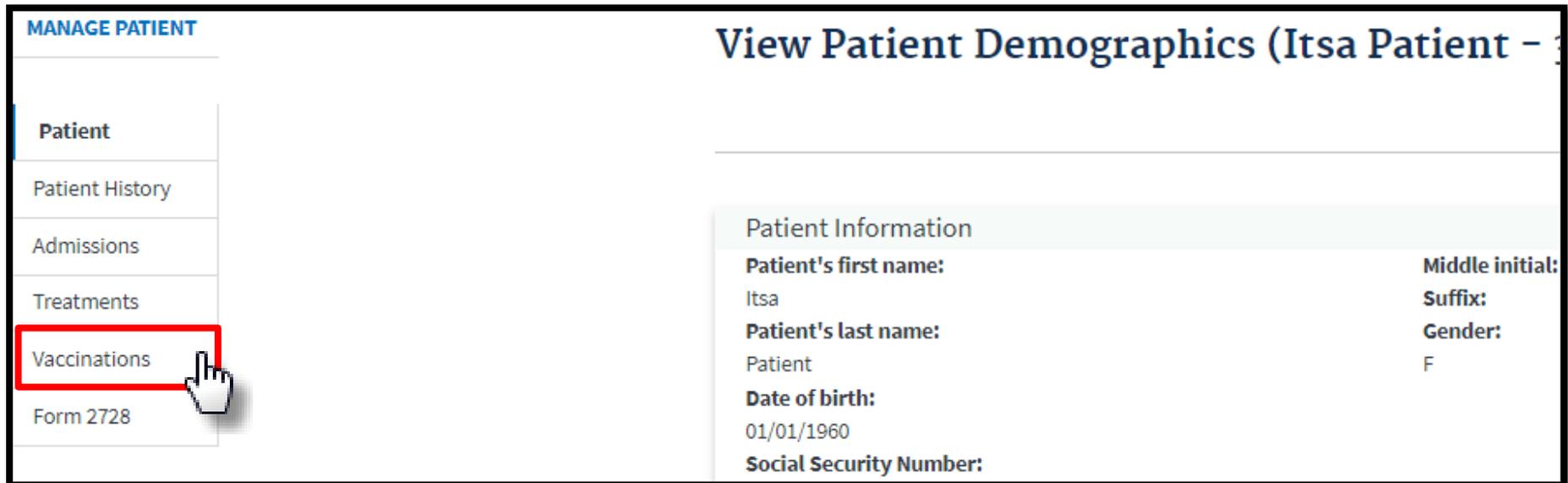
Showing 1 to 1 of 1 results

Page Size: 10

◀ Prev 1 Next ▶

# Click Vaccinations

View the patient's demographics and click the **Vaccinations** link.



**MANAGE PATIENT**

- Patient**
- Patient History
- Admissions
- Treatments
- Vaccinations**
- Form 2728

## View Patient Demographics (Itsa Patient -

**Patient Information**

<b>Patient's first name:</b> Itsa	<b>Middle initial:</b>
<b>Patient's last name:</b> Patient	<b>Suffix:</b>
<b>Date of birth:</b> 01/01/1960	<b>Gender:</b> F
<b>Social Security Number:</b>	

# Click Add Vaccination Data

Click the **Add Vaccination Data** link to add information for the desired vaccination.

Patient Vaccination Data

**Itsa Patient** (UPI: 3100008572)

---

**Vaccinations Summary**

It is required to document patient vaccinations which were received or not received when that event occurs. For more information please [click here](#). The information for Itsa Patient is below.  
[Why does CMS collect this data?](#)

[Expand All](#) | [Collapse All](#)

> Hepatitis B	+ Add Vaccination Data
> Influenza	+ Add Vaccination Data
> Pneumococcal	+ Add Vaccination Data

# Click Add Vaccination Data: Hepatitis B

Click the **Add Vaccination Data** link to enter Hepatitis B vaccination information.

Patient Vaccination Data

**Itsa Patient** (UPI: 3100008572)

---

### Vaccinations Summary

It is required to document patient vaccinations which were received or not received when that event occurs. For more information please [click here](#). The information for Itsa Patient is below.  
[Why does CMS collect this data?](#)

[Expand All](#) | [Collapse All](#)

> Hepatitis B	<a href="#">+ Add Vaccination Data</a>
> Influenza	<a href="#">+ Add Vaccination Data</a>
> Pneumococcal	<a href="#">+ Add Vaccination Data</a>

# Enter Vaccination Data: Hepatitis B

Review and enter the required vaccination data.

## Add Vaccination Data ✕

Vaccination Type	Patient Name	UPI
HepatitisB	Itsa Patient	3100008572

\* Indicates required field

**\* Did the patient receive the HepatitisB vaccination?**

Yes, Received at Facility  Yes, Received at Another Facility  No

**\* Is this dose part of a series or booster?**

Series Dose  Booster Dose  Dose Type Unknown

**\* Vaccination Name**

Engerix-B ▾

**\* Vaccination Date**

06/29/2022 📅

# Click Add Vaccination Data: Hepatitis B

Click **Add Vaccination Data** to save your entry.

Approximate Date

Date Unknown

\* Did the patient experience a serious adverse reaction to the vaccine? ⓘ

Yes  No  Unknown

\* Did the patient receive the Hepatitis B surface antibody test?

Yes  No  Unknown

\* Hepatitis B Surface Antibody (Anti-HBs)

\* Hepatitis B Surface Antibody (Anti-HBs) Test Date

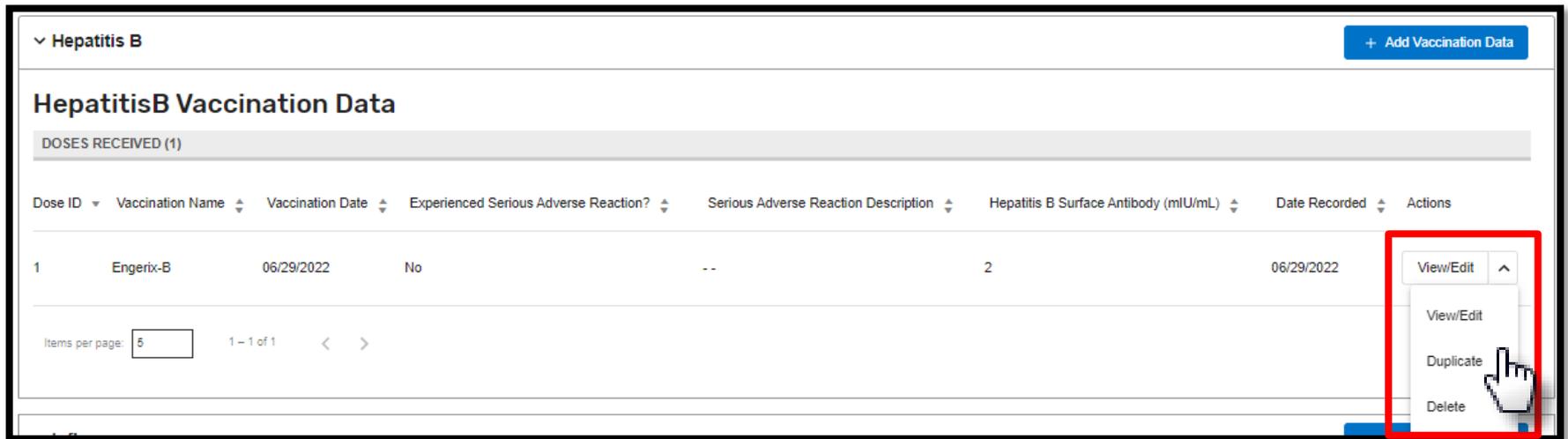
ⓘ

Date Unknown

Cancel **Add Vaccination Data**

# View/Edit/Duplicate/Delete Vaccination Data: Hepatitis B

**View/Edit/Duplicate/Delete** Hepatitis B Vaccination Data, as needed.



The screenshot displays a web interface for managing Hepatitis B vaccination data. At the top left, there is a dropdown menu for "Hepatitis B" and a blue button labeled "+ Add Vaccination Data". Below this is a section titled "HepatitisB Vaccination Data" with a sub-header "DOSES RECEIVED (1)". A table lists the vaccination data with columns: Dose ID, Vaccination Name, Vaccination Date, Experienced Serious Adverse Reaction?, Serious Adverse Reaction Description, Hepatitis B Surface Antibody (mIU/mL), Date Recorded, and Actions. The table contains one row with the following data: Dose ID 1, Vaccination Name Engerix-B, Vaccination Date 06/29/2022, Experienced Serious Adverse Reaction? No, Serious Adverse Reaction Description --, Hepatitis B Surface Antibody (mIU/mL) 2, Date Recorded 06/29/2022. Below the table, there is a pagination control showing "Items per page: 5" and "1 - 1 of 1". A red box highlights the "Actions" column for the first row, which has a dropdown menu with options: "View/Edit" (with an up arrow), "View/Edit", "Duplicate", and "Delete". A mouse cursor is pointing at the "Duplicate" option.

Dose ID	Vaccination Name	Vaccination Date	Experienced Serious Adverse Reaction?	Serious Adverse Reaction Description	Hepatitis B Surface Antibody (mIU/mL)	Date Recorded	Actions
1	Engerix-B	06/29/2022	No	--	2	06/29/2022	View/Edit View/Edit Duplicate Delete

# Click Add Vaccination Data: Influenza

Click the **Add Vaccination Data** link to enter Influenza vaccination information.

Patient Vaccination Data

**Itsa Patient** (UPI: 3100008572)

---

**Vaccinations Summary**

It is required to document patient vaccinations which were received or not received when that event occurs. For more information please [click here](#). The information for Itsa Patient is below.  
[Why does CMS collect this data?](#)

[Expand All](#) | [Collapse All](#)

> Hepatitis B	<a href="#">+ Add Vaccination Data</a>
> Influenza	<a href="#">+ Add Vaccination Data</a>
> Pneumococcal	<a href="#">+ Add Vaccination Data</a>

# Enter and Add Vaccination Data: Influenza

- Review and enter the required vaccination data.
- Click **Add Vaccination Data** to save your entry.

### Add Vaccination Data ×

Vaccination Type	Patient Name	UPI
Influenza	Itsa Patient	3100008572

\* Indicates required field

**\* Did the patient receive the Influenza vaccination?**

Yes, Received at Facility    Yes, Received at Another Facility    No

**\* Vaccination Name**

Fluzone High-Dose Quad (IIV4-HD) ▼

**\* Vaccination Date**

11/17/2021 📅

Approximate Date

Date Unknown

**\* Did the patient experience a serious adverse reaction to the vaccine?** ⓘ

Yes    No    Unknown

Cancel **Add Vaccination Data**

# View/Edit/Delete Vaccination Data: Influenza

**View/Edit/Delete** Influenza Vaccination Data, as needed.

▼ Influenza + Add Vaccination Data

### Influenza Vaccination Data

DOSES RECEIVED (1)

Dose ID ▼	Vaccination Name ▲	Vaccination Date ▲	Experienced Serious Adverse Reaction? ▲	Serious Adverse Reaction Description ▲	Date Recorded ▲	Actions
1	FluLaval (IIV4)	12/01/2021	No	--	06/15/2022	<div style="border: 2px solid red; padding: 5px;"><a href="#">View/Edit ▲</a> <a href="#">View/Edit</a> <a href="#">Delete</a></div>

Items per page:  1 - 1 of 1 < >

# Add Vaccination Data: Pneumococcal

Click the **Add Vaccination Data** link to enter Pneumococcal vaccination information.

Patient Vaccination Data

**Itsa Patient** (UPI: 3100008572)

---

**Vaccinations Summary**

It is required to document patient vaccinations which were received or not received when that event occurs. For more information please [click here](#). The information for Itsa Patient is below.  
[Why does CMS collect this data?](#)

[Expand All](#) | [Collapse All](#)

> Hepatitis B	<a href="#">+ Add Vaccination Data</a>
> Influenza	<a href="#">+ Add Vaccination Data</a>
> Pneumococcal	<a href="#">+ Add Vaccination Data</a>

# Enter and Add Vaccination Data: Pneumococcal

- Review and enter the required vaccination data.
- Click **Add Vaccination Data** to save your entry.

### Add Vaccination Data ✕

Vaccination Type	Patient Name	UPI
Pneumococcal	Itsa Patient	3100008572

\* Indicates required field

**\* Did the patient receive the Pneumococcal vaccination?**

Yes, Received at Facility  Yes, Received at Another Facility  No

**\* Vaccination Name**

Pneumovax 23 (PPSV23) ▾

**\* Vaccination Date**

06/20/2022 📅

Approximate Date

Date Unknown

**\* Did the patient experience a serious adverse reaction to the vaccine?** ⓘ

Yes  No  Unknown

Cancel Add Vaccination Data

# View/Edit/Delete Vaccination Data: Pneumococcal

**View/Edit/Delete** Pneumococcal Vaccination Data, as needed.

▼ Pneumococcal + Add Vaccination Data

### Pneumococcal Vaccination Data

DOSES RECEIVED (1)

Dose ID ▼	Vaccination Name ⇅	Vaccination Date ⇅	Experienced Serious Adverse Reaction? ⇅	Serious Adverse Reaction Description ⇅	Date Recorded ⇅	Actions
1	Pneumovax 23 (PPSV23)	06/20/2022	No	--	06/30/2022	<div style="border: 2px solid red; padding: 5px;"><a href="#">View/Edit</a> ▲ <a href="#">View/Edit</a> <a href="#">Delete</a> </div>

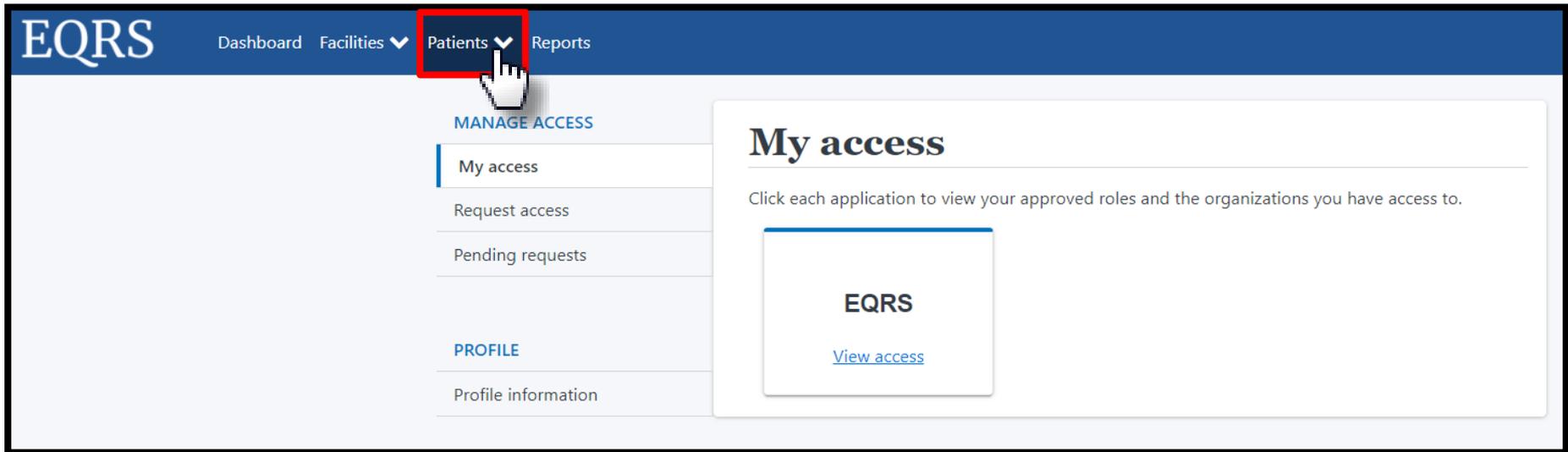
Items per page:  1 - 1 of 1 < >



# Enter Clinical Information

# Click Patients

Click **Patients** in the navigation menu.



# Click Manage Clinical

Click **Manage Clinical** in the Patients sub-menu.

The screenshot displays the EQRS web application interface. The top navigation bar includes 'EQRS', 'Dashboard', 'Facilities', 'Patients', and 'Reports'. The 'Patients' menu is expanded, showing options: 'Search Patients', 'Admit a Patient', 'Manage Clinical' (highlighted with a red box and a mouse cursor), 'Clinical Depression', and 'Action List'. The main content area features a 'My access' section with the text 'Click each application to view your approved roles and the organizations you have access to.' Below this, there is a card for 'EQRS' with a 'View access' link.

# Patient Search

Select the search criteria for the desired patient and click **Search Patients**.

**Manage Patient Clinical Values** Help

**Info**  
No clinical data for selected facility, patient, and clinical month.

**Patient Search**

ABC DIALYSIS

Collection Type \*  
Hemodialysis

Clinical Month \*  
June 2021 (Open)

Last Name Group

Patient Clinical Status

**Search Patients**

Select Patient  
Eight, Patient (3100020535)

EQRS Patient ID	Patient Name	Date of Birth	Medicare Beneficiary Identifier
<a href="#">3100020535</a>	Patient Eight	03/15/1960	

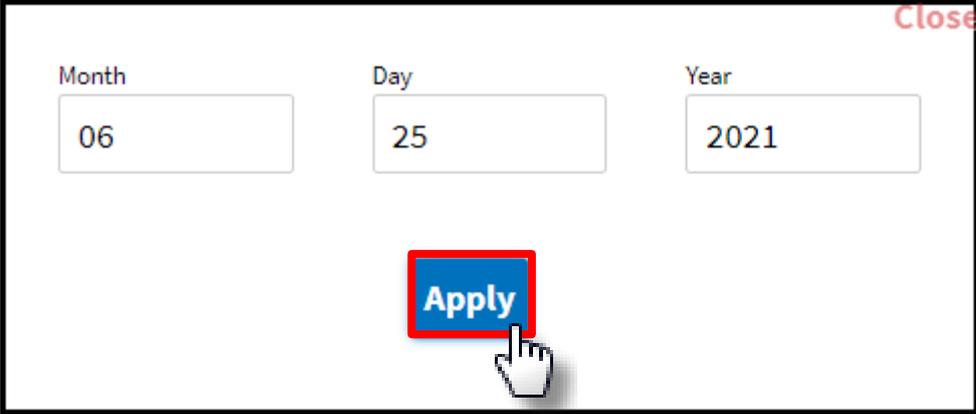
No Clinical Data Available for All Collection Types

**Save** **Reset** **Submit** **Delete**

# Set Common Lab Test Date

Indicate the Common Lab Test Date to support data reporting efforts and Click **Apply**.

Common Lab Test Date: 06/25/2021



A screenshot of a web form for setting a common lab test date. The form is titled "Common Lab Test Date: 06/25/2021" in the top left. It contains three input fields: "Month" with the value "06", "Day" with the value "25", and "Year" with the value "2021". A red "Close" button is in the top right corner. A blue "Apply" button is centered below the input fields, with a red border and a mouse cursor pointing at it.

# Enter Anemia Management

Review and enter Anemia Management data, if applicable.

Anemia Management				
<b>Hemoglobin (Hgb) (g/dL) *</b>	Month	Day	Year	<input type="checkbox"/> N/A
<input type="text" value="10"/>	<input type="text" value="08"/>	<input type="text" value="25"/>	<input type="text" value="2020"/>	
<b>Ferritin (ng/mL) *</b>	Month	Day	Year	<input type="checkbox"/> N/A
<input type="text" value="2000"/>	<input type="text" value="08"/>	<input type="text" value="25"/>	<input type="text" value="2020"/>	
<b>Iron Saturation (TSAT) (%) *</b>	Month	Day	Year	<input type="checkbox"/> N/A
<input type="text" value="60"/>	<input type="text" value="08"/>	<input type="text" value="25"/>	<input type="text" value="2020"/>	
<b>Reticulocyte Hemoglobin (CHR) (pg) *</b>	Month	Day	Year	<input type="checkbox"/> N/A
<input type="text" value="30"/>	<input type="text" value="08"/>	<input type="text" value="25"/>	<input type="text" value="2020"/>	

# Enter Adequacy

Review and enter Adequacy data, if applicable.

Adequacy	
<b>Kt/V *</b> 1.2	Month: 08 Day: 26 Year: 2020 <input type="checkbox"/> N/A
<b>Kt/V Method</b> UKM (Urea Kinetic Modeling)	
<b>Blood Urea Nitrogen (BUN) Pre-Dialysis (mg/dL) *</b> 100	<input type="checkbox"/> N/A
<b>BUN Post-Dialysis (mg/dL) *</b> 35	<input type="checkbox"/> N/A
<b>Pre-Dialysis Weight *</b> 77	<b>Pre-Dialysis Weight Unit</b> kg <input type="checkbox"/> N/A
<b>Post-Dialysis Weight *</b> 75	<b>Post-Dialysis Weight Unit</b> kg <input type="checkbox"/> N/A
<b>Delivered Minutes of BUN Hemodialysis Session *</b> 240	<input type="checkbox"/> N/A
<b>Height *</b> 196	<b>Height Unit</b> cm <input type="checkbox"/> N/A
<b>Serum Creatinine (mg/dL) *</b> 12.3	Month: MM Day: DD Year: YYYY <input type="checkbox"/> N/A
<b>Normalized Protein Catabolic Rate (nPCR) *</b> [Empty]	Month: MM Day: DD Year: YYYY <input checked="" type="checkbox"/> N/A
<b>Total Number of Dialysis Sessions During the Clinical Month</b> 13	

# Add Ultrafiltration

Review and **Add** Ultrafiltration data, if applicable.

Ultrafiltration

Session UF ID	Session UF Date	Session UF Pre-Dialysis Weight	Session UF Post-Dialysis Weight	Session UF Delivered Minutes	Edit	Delete
31000058019	06/18/2021	77 kg	75 kg	240		

Session UF ID: Not Yet Assigned

Session UF Date

Month:  Day:  Year:

Session UF Pre-Dialysis Weight:

Session UF Post-Dialysis Weight:

Session UF Delivered Minutes:

**Add**

# Enter Medication Reconciliation

Review and enter Medication Reconciliation data, if applicable.

Medication Reconciliation

Was medication reconciliation performed in this clinical month? \*

Yes ▾

Medication Reconciliation Clinician Type \*      Month      Day      Year

Nurse ▾      12      19      2023

Medication Reconciliation Clinician Name \*

Jane Doe

# Enter Mineral Metabolism

Review and enter Mineral Metabolism data, if applicable.

Mineral Metabolism			
<b>Phosphorus (mg/dL) *</b>	Month	Day	Year
<input type="text" value="6.1"/>	<input type="text" value="07"/>	<input type="text" value="06"/>	<input type="text" value="2022"/>
<input type="checkbox"/> N/A			
<b>Phosphorus Method</b>			
<input type="text" value="Plasma"/>			
<b>Uncorrected Calcium (mg/dL) *</b>	Month	Day	Year
<input type="text" value="10.1"/>	<input type="text" value="07"/>	<input type="text" value="06"/>	<input type="text" value="2022"/>
<input type="checkbox"/> N/A			
<b>Corrected Calcium (mg/dL) *</b>	Month	Day	Year
<input type="text" value="9.3"/>	<input type="text" value="07"/>	<input type="text" value="06"/>	<input type="text" value="2022"/>
<input type="checkbox"/> N/A			
<b>Serum Albumin (g/dL) *</b>	Month	Day	Year
<input type="text" value="3.0"/>	<input type="text" value="07"/>	<input type="text" value="06"/>	<input type="text" value="2022"/>
<input type="checkbox"/> N/A			
<b>Serum Albumin Lower Limit (g/dL)</b>			
<input type="text"/>			<input checked="" type="checkbox"/> N/A
<b>Serum Albumin Lab Method</b>			
<input type="text" value="BCG"/>			<input type="checkbox"/> N/A
<b>Parathyroid Hormone (PTH) Value (pg/mL)</b>	Month	Day	Year
<input type="text" value="306"/>	<input type="text" value="07"/>	<input type="text" value="06"/>	<input type="text" value="2022"/>
<input type="checkbox"/> N/A			
<b>Parathyroid Hormone (PTH) Method</b>			
<input type="text" value="Plasma"/>			
<b>Parathyroid Hormone (PTH) Upper Limit Assay Range (pg/mL)</b>			
<input type="text"/>			<input checked="" type="checkbox"/> N/A

# Erythropoietin Stimulating Agents (ESA)

Review and provide ESA data, as needed.

ESA Date = Date of the most recent prescription

ESA Monthly Dose:

- In-center Patients = Amount administered
- Home Patients = Amount prescribed

ESA

<b>ESA Administered *</b>	<b>Month</b>	<b>Day</b>	<b>Year</b>	<input type="checkbox"/> N/A
Yes	06	20	2021	
<b>ESA Agent Prescribed *</b>				<input type="checkbox"/> N/A
Epoetin Beta				
<b>Other ESA Agent Prescribed</b>				
<b>ESA Monthly Dose *</b>				<input type="checkbox"/> N/A
15,000			Units	
<b>Other ESA Monthly Dose Measure</b>				
<b>ESA Route</b>	<b>Select one route</b>			
SC (Subcutaneous)				

# Add Infection

Review and **Add** Infection data, as needed.

The screenshot shows a web application interface for adding infection data. At the top, it says "Infection" and "No Infection Data Available" with a "Help" icon. Below is a table with columns: Infection ID, Infection Requires Hospitalization, Infection Hospitalization Date, Edit, and Delete. Two rows of data are shown. Below the table, there are input fields for "Infection ID: Not Yet Assigned", "Infection Requires Hospitalization" (a dropdown menu), "Month" (MM), "Day" (DD), "Year" (YYYY), and an "N/A" checkbox. At the bottom, there are three buttons: "Add" (highlighted with a red box and a mouse cursor), "Reset", and "Cancel".

Infection ID	Infection Requires Hospitalization	Infection Hospitalization Date	Edit	Delete
31000057352	Infection does not require hospitalization	N/A		
31000057351	Infection requires hospitalization	04/04/2021		

**Infection ID: Not Yet Assigned**

**Infection Requires Hospitalization \***

Infection requires hospitalization

Month: MM Day: DD Year: YYYY  N/A

**Add** **Reset** **Cancel**

# Enter Iron

Review and enter Iron data, if applicable.

Iron Date = Date of the most recent prescription

Iron Dose:

- In-center Patients = Amount administered
- Home Patients = Amount prescribed

Iron				
<b>Intravenous (IV) Iron Administered *</b>	<b>Month</b>	<b>Day</b>	<b>Year</b>	
Yes	MM	DD	YYYY	<input type="checkbox"/> N/A
<b>Intravenous (IV) Iron *</b>				<input type="checkbox"/> N/A
<b>Other Intravenous (IV) Iron</b>				
<b>Intravenous (IV) Iron Dose *</b>				
5000			mg	<input type="checkbox"/> N/A
<b>Other Intravenous (IV) Iron Dose Measure</b>				
<b>Oral (PO) Iron Prescribed *</b>	<b>Month</b>	<b>Day</b>	<b>Year</b>	
Oral Iron Prescribed	MM	DD	YYYY	<input type="checkbox"/> N/A
<b>Oral (PO) Iron *</b>				<input type="checkbox"/> N/A
Ferrous Fumarate				
<b>Other Oral (PO) Iron</b>				
<b>Oral (PO) Iron Dose *</b>				
5000			mg	<input type="checkbox"/> N/A
<b>Other Oral (PO) Iron Dose Measure</b>				

# Enter Fluid Weight Management

Review and enter Fluid Weight Management data, if applicable.

Fluid Weight Management ^

**Post-Dialysis Target Weight for Session \***    **Month**    **Day**    **Year**

Was Prescribed ▼    08    26    2020     N/A

# Enter Hospitalization

Review and click **Add** to enter Hospitalization data, if applicable.

Hospitalization

No Hospitalization Data Available  N/A [Help](#)

Hospitalization ID	Admission Date	All Hospital Visits	Name of Hospital	Discharge Date	Edit	Delete
31000058020	04/25/2021	Emergency Room (ER) Visit	ABC Hospital	04/30/2021		

Hospitalization ID: Not Yet Assigned

Admission Date \*

Month  Day  Year   N/A

All Hospital Visits \*

N/A

Discharge Date \*

Month  Day  Year   N/A

Name of Hospital \*

N/A

**Add**

# Enter Telemedicine

Review and enter Telemedicine Information, as needed.

Telemedicine

Telemedicine

Yes

Yes

No

Number of Telemedicine Visits

Telemedicine

Telemedicine

Yes

Number of Telemedicine Visits

2

Last Telemedicine Visit

Month

Day

Year

10

25

2021

Save

Reset

Submit

Delete

# Successful Submission

EQRS displays the “**Successfully submitted clinical data**” message.

## Manage Patient Clinical Values Help

**Successful**  
Successfully submitted clinical data.

### Patient Search

ABC DIALYSIS

**Collection Type \*** **Clinical Month \*** **Last Name Group** **Patient Clinical Status**

Hemodialysis August 2020 (Open)

**Select Patient**

**Search Patients** Patient, Itsa (3100008572)

EQRS Patient ID	Patient Name	Date of Birth	Medicare Beneficiary Identifier
3100008572	Itsa Patient	01/01/1960	

No Clinical Data Available for All Collection Types

**Save** **Reset** **Submit** **Delete**

# Vascular Access: Patient Search

Search for the desired patient by clicking **Search Patients**.

**Manage Patient Clinical Values** Help

**Info**  
No clinical data for selected facility, patient, and clinical month.

**Patient Search**

ABC DIALYSIS

**Collection Type \*** **Clinical Month \*** **Last Name Group** **Patient Clinical Status**

Vascular Access June 2021 (Open)

**Search Patients** **Select Patient**  
Eight, Patient (3100020535)

EQRS Patient ID	Patient Name	Date of Birth	Medicare Beneficiary Identifier
<a href="#">3100020535</a>	Patient Eight	03/15/1960	

No Clinical Data Available for All Collection Types

**Save** **Reset** **Submit** **Delete**

# Vascular Access: Indicate Access

Review and enter Vascular Access data, if applicable and then click **Submit**.

Vascular Access

Date of Reported Dialysis Session \*  
Month: 04 Day: 30 Year: 2021  N/A

Current Access Type \*  
Catheter Only

Date Access Type Changed \*  
Month: 04 Day: 30 Year: 2021  N/A

AV Fistula Usable Date  
Month: MM Day: DD Year: YYYY  N/A

AV Fistula Maturing  
Yes  N/A

AV Fistula State  
Created  N/A

AV Fistula Creation Date  
Month: 04 Day: 18 Year: 2021  N/A

AV Graft Maturing  
No  N/A

AV Graft State  
Not yet present  N/A

Save Reset **Submit** Delete

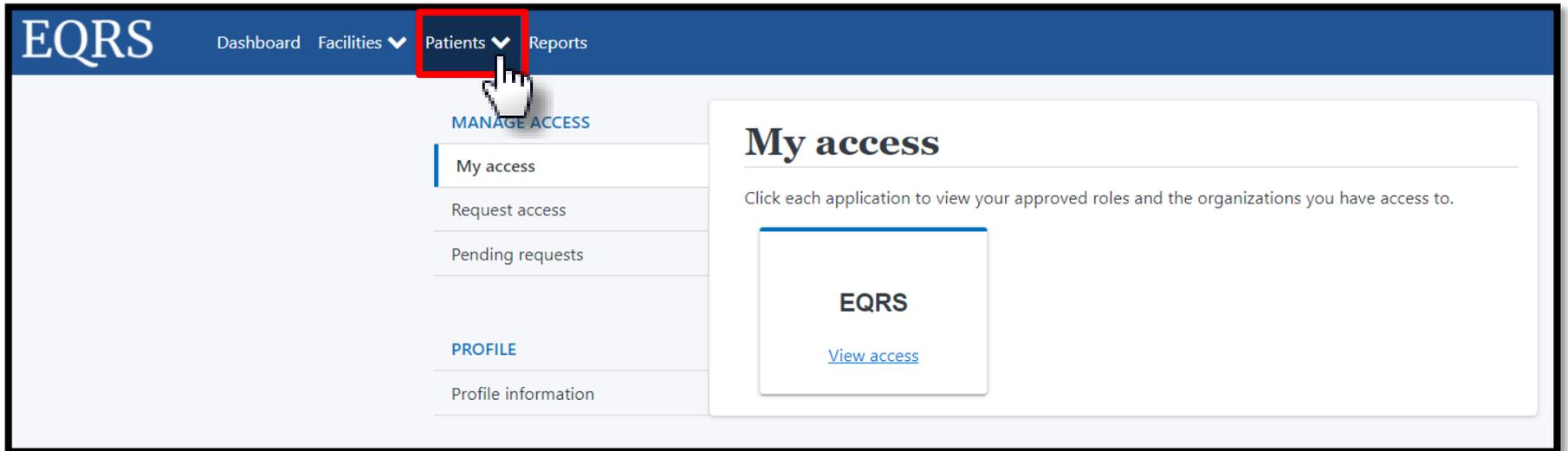




# Enter Clinical Depression Data

# Form Signed: Click Patients

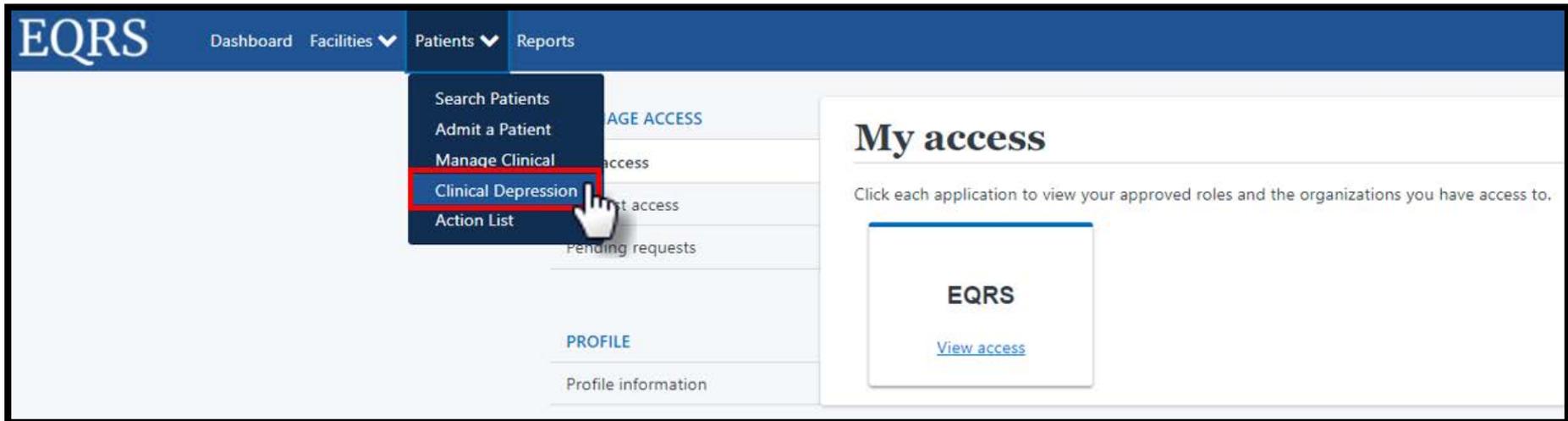
Click **Patients** in the navigation menu.



The screenshot shows the EQRS application interface. The top navigation bar is dark blue and contains the EQRS logo on the left and the following menu items: Dashboard, Facilities (with a dropdown arrow), Patients (with a dropdown arrow and a red box around it), and Reports. A mouse cursor is pointing at the Patients menu item. Below the navigation bar, the left sidebar is light blue and contains the following sections: MANAGE ACCESS (with a blue vertical bar on the left) containing My access, Request access, and Pending requests; and PROFILE containing Profile information. The main content area is white and features a 'My access' section with the heading 'My access' and the text 'Click each application to view your approved roles and the organizations you have access to.' Below this text is a white box with a blue border containing the text 'EQRS' and a blue link labeled 'View access'.

# Click Clinical Depression

Click **Clinical Depression** in the Patients sub-menu.



# Depression Screening: Select Status

Select the **Depression screening status** options:

- All
- Required
- Submitted

**Clinical Depression Screening and Follow-Up Reporting** [Help](#)

FACILITY

Facility CCN, NPI, and name: (123456 1234561235) ABC DIALYSIS      Assessment period: 01/01/2021 - 12/31/2021

PATIENT [Facility history](#)

Depression screening status: **Required** (dropdown menu open showing All, Required, Submitted)

Patient name search:

	Screening status	Last updated	Actions
	Required		Report
	Required		Report
3100008232	Required		Report
3100008229	Required		Report
3100008230	Required		Report
3100008230	Required		Report

# Click Report

Review the list and click **Report** for the desired patient.

## Clinical Depression Screening and Follow-Up Reporting [Help](#)

FACILITY

---

Facility CCN, NPI, and name: (123456 1234561235) ABC DIALYSIS      Assessment period: 01/01/2021 - 12/31/2021

PATIENT [Facility history](#)

---

Depression screening status: Required      Patient name search:

UPI	Patient name	Screening status	Last updated	Actions
3100008231	Man, Iron	Required		<a href="#">Report</a>
3100008232	Man, Spider	Required		<a href="#">Report</a>
3100008229	Marvel, Captain	Required		<a href="#">Report</a>
3100008230	Panther, Black	Required		<a href="#">Report</a>

# Submit Clinical Depression

Review the Clinical Depression options, make the necessary selection, and click **Submit**.

## Clinical Depression Screening and Follow-Up Reporting for Man, Spider

In order to comply with QIP requirements, you must submit Clinical Depression Screening and Follow-Up Plan information for each eligible patient at least once during the calendar year.

The assessment periods are from 1/1 to 12/31 of each calendar year. Users can enter data during the entire assessment period and are given two months past the end of the assessment period 2/28 to complete their reporting. On 3/1 the previous year's assessment period closes and the reported values become read-only.

- Only required to be submitted for patients age 12 or older
- Only required to be submitted for patients treated at the facility for 90 days or longer
- Only required of facilities with at least 11 eligible patients during the assessment period selected
- Only required of facilities with a CCN open date prior to April 1 of the assessment year selected

Please select one of the following options describing the clinical depression screening and (when necessary) the follow up plan documented for the patient.

- Screening for clinical depression is documented as being positive, and a follow-up plan is documented<sup>?</sup>
- Screening for clinical depression documented as positive, and a follow-up plan not documented, and the facility possess documentation stating the patient is not eligible<sup>?</sup>
- Screening for clinical depression documented as positive, the facility possesses no documentation of a follow-up plan, and no reason is given<sup>?</sup>
- Screening for clinical depression is documented as negative, and a follow-up plan is not required
- Screening for clinical depression not documented, but the facility possesses documentation stating the patient is not eligible<sup>?</sup>
- Clinical depression screening not documented, and no reason is given

Cancel

Submit



# Successful Submission

EQRS displays a time stamp of the Clinical Depression Screening that was submitted and displays the “**Clinical depression assessment reported successfully**” message.

 **Clinical depression assessment reported successfully**  
Review your report by viewing "Submitted" and using patient search to locate the record.

## Clinical Depression Screening and Follow-Up Reporting [? Help](#)

FACILITY

---

Facility CCN, NPI, and name: (123456 1234567890) ABC DIALYSIS      Assessment period: 01/01/2021 - 12/31/2021

PATIENT [Facility history](#)

---

Depression screening status:       Patient name search:

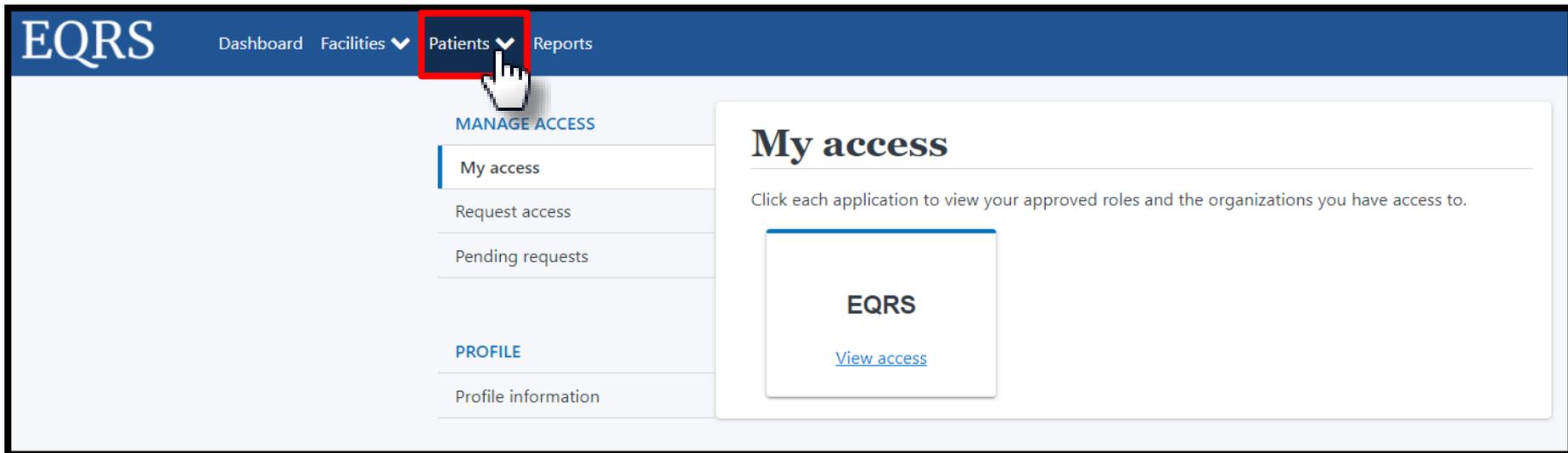
UPI	Patient name	Screening status	Last updated	Actions
3100008231	Man, Iron	Required		Report
3100008232	Man, Spider	Submitted	06/28/2021, 5:40 pm	Report



# Discharge a Patient

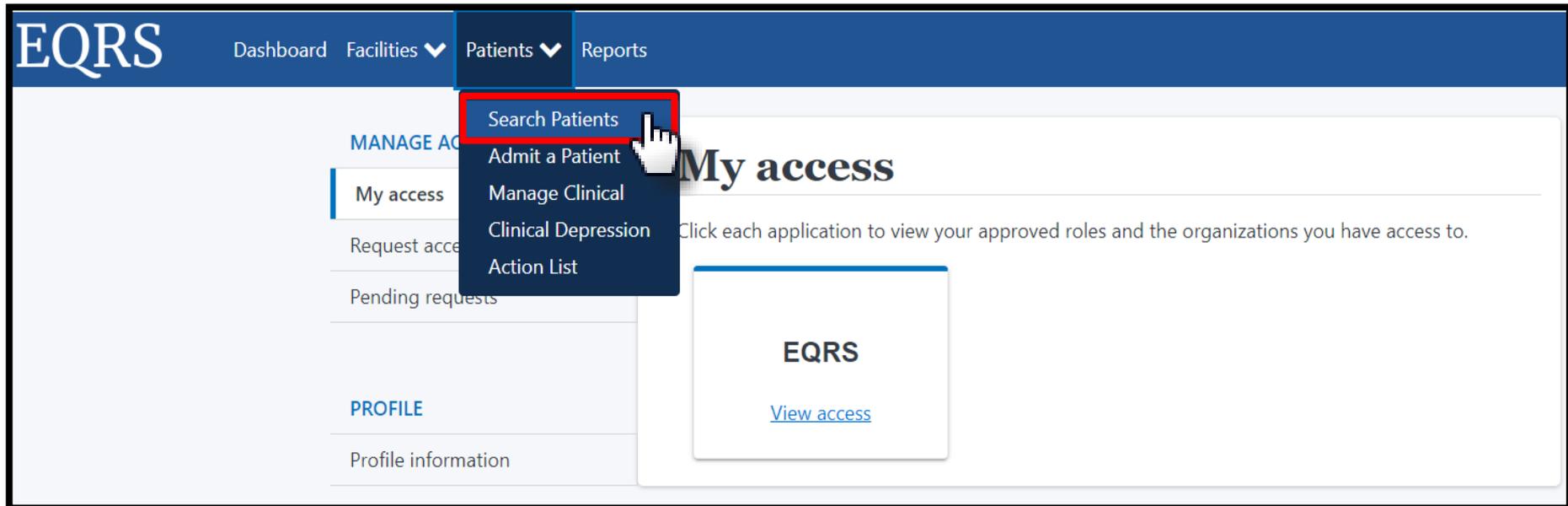
# Click Patients

Click **Patients** in the navigation menu.



# Click Search Patients

Click **Search Patients** in the Patients sub-menu.



# Enter Search Criteria

Enter search criteria to locate patient. Click Submit.

## Search Patients

Use the criteria below to search for a patient. [? Help](#)

SEARCH

---

Patient criteria		Criteria	<a href="#">Clear all</a>
Patient's First Name	Patient's Last Name	<i>Patient's First Name</i>	
<input type="text" value="Patient"/>	<input type="text" value="One"/>	<input checked="" type="checkbox"/> Patient	
Medicare Beneficiary Identifier	Social Security Number	<i>Patient's Last Name</i>	
<input type="text"/>	<input type="text"/>	<input checked="" type="checkbox"/> One	
HICNUM	EQRS Patient ID (aka CROWN UPI)	<i>Admitted Facility</i>	
<input type="text"/>	<input type="text"/>	ABC DIALYSIS	
SIMS UPI	Gender		<input checked="" type="button" value="Submit"/>
<input type="text"/>	<input type="text" value=""/>		

# Click EQRS Patient ID

Click the **EQRS Patient ID (aka CROWN UPI)**.

**Search Patient Results** [Help](#)

[Back to Search](#)

EQRS Patient ID (aka CROWN UPI)	First Name	Middle Initial	Last Name	Gender	Date of Birth	Date of Death	Social Security Number	HICNUM	Medicare Beneficiary Identifier	SIMS UPI
3100008572	Itsa		Patient	F	01/01/1960		XXXXX1234	N/A	N/A	

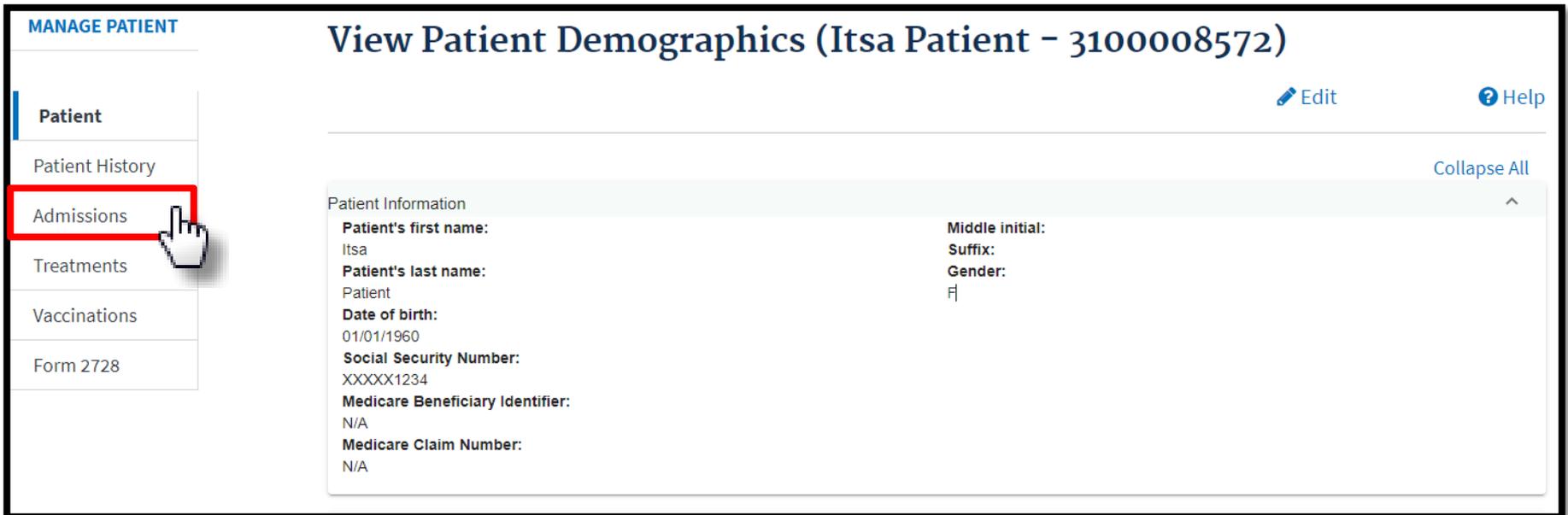
Page Size: 10

Showing 1 to 1 of 1 results

◀ Prev 1 Next ▶

# Click Admission

View the patient's demographics and click the Admissions link.



The screenshot displays a web application interface for managing a patient. On the left, a sidebar titled 'MANAGE PATIENT' contains a list of navigation options: 'Patient', 'Patient History', 'Admissions', 'Treatments', 'Vaccinations', and 'Form 2728'. The 'Admissions' option is highlighted with a red rectangular box, and a mouse cursor is positioned over it. The main content area is titled 'View Patient Demographics (Itsa Patient - 3100008572)'. It includes an 'Edit' button (pencil icon) and a 'Help' button (question mark icon) in the top right corner. Below the title, there is a 'Collapse All' link. The patient information is presented in a table format:

Patient Information	
<b>Patient's first name:</b> Itsa	<b>Middle initial:</b>
<b>Patient's last name:</b> Patient	<b>Suffix:</b>
<b>Date of birth:</b> 01/01/1960	<b>Gender:</b> F
<b>Social Security Number:</b> XXXXX1234	
<b>Medicare Beneficiary Identifier:</b> N/A	
<b>Medicare Claim Number:</b> N/A	

# Click Admit Date

Click the **Admit Date** link.

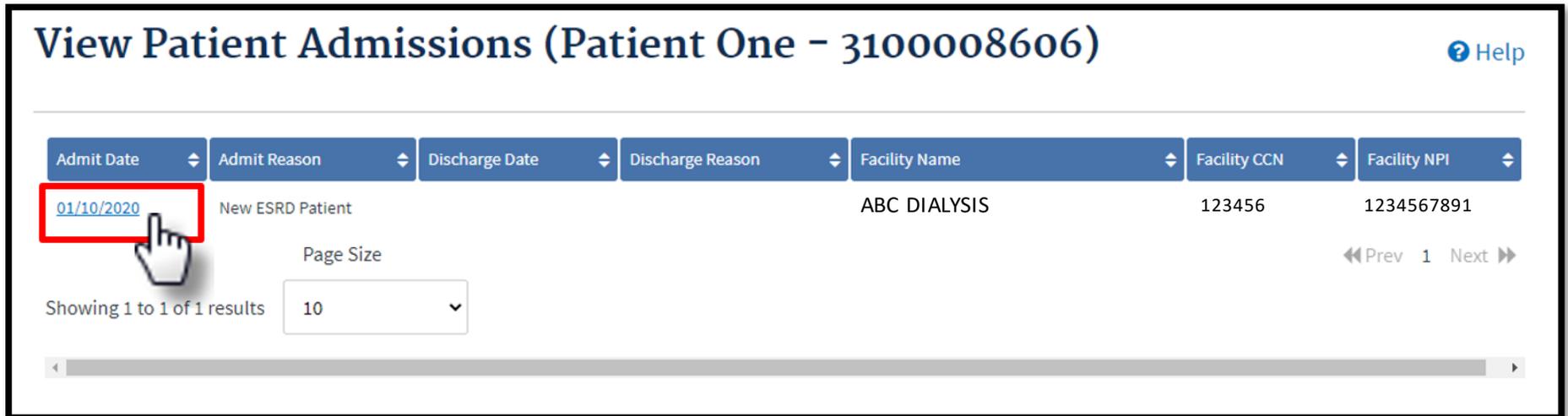
**View Patient Admissions (Patient One - 3100008606)** [Help](#)

Admit Date	Admit Reason	Discharge Date	Discharge Reason	Facility Name	Facility CCN	Facility NPI
<a href="#">01/10/2020</a>	New ESRD Patient			ABC DIALYSIS	123456	1234567891

Page Size: 10

Showing 1 to 1 of 1 results

◀ Prev 1 Next ▶



# Click Edit

Review the Admission Information and click the **Edit** link.

## View Admission Information (01/10/2020)



### Admission information

<b>Admit date:</b> 01/10/2020	<b>Admit reason:</b> New ESRD Patient	<b>Submit date:</b> 09/10/2020
<b>Facility CCN:</b> 123456	<b>Facility NPI:</b> 1234567891	<b>Facility name:</b> ABC DIALYSIS
<b>Discharge date:</b> N/A	<b>Discharge reason:</b> N/A	<b>Transfer discharge subcategory:</b> N/A



# Successful Submission

EQRS displays the “Admission record update successful” message.

**View Patient Admissions (Patient One - 3100008606)** [Help](#)

Admit Date	Admit Reason	Discharge Date	Discharge Reason	Facility Name	Facility CCN	Facility NPI
<a href="#">01/10/2020</a>	New ESRD Patient	09/02/2020	Discontinue	ABC DIALYSIS		

Page Size: 10 (Showing 1 to 1 of 1 results) [Prev](#) 1 [Next](#)

 **Successful**  
Admission record update successful.

**View Admission Information (01/10/2020)** [Edit](#) [Delete](#) [Help](#)

Admission information ^

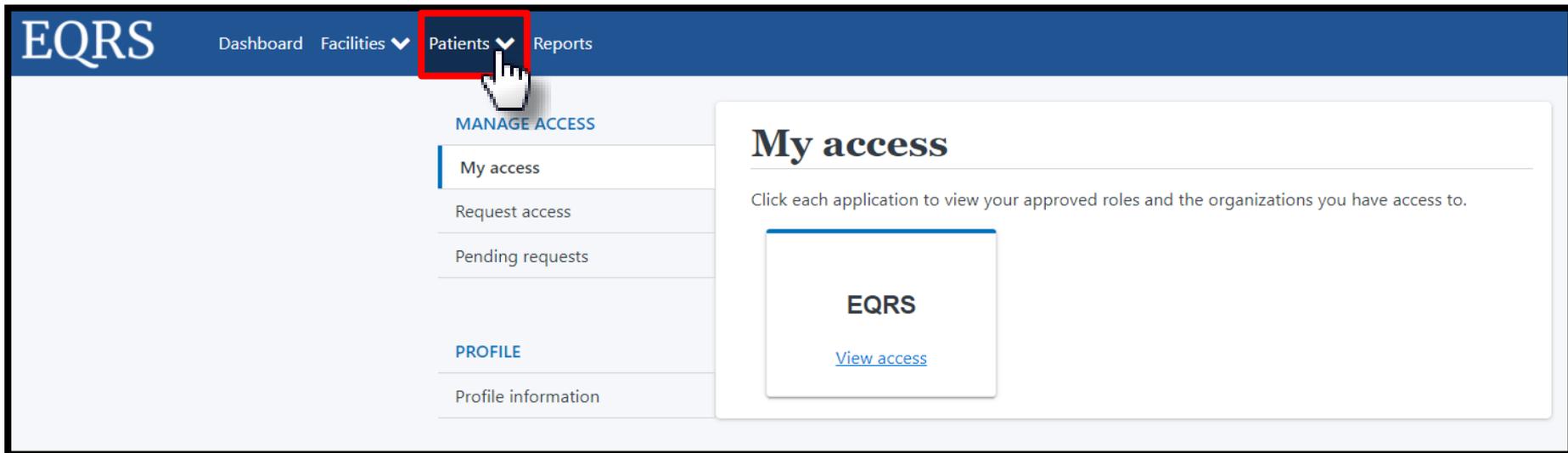
<b>Admit date:</b> 01/10/2020	<b>Admit reason:</b> New ESRD Patient	<b>Submit date:</b> 09/10/2020
<b>Facility CCN:</b> 123456	<b>Facility NPI:</b> 1234567891	<b>Facility name:</b> ABC DIALYSIS
<b>Discharge date:</b> 09/02/2020	<b>Discharge reason:</b> Discontinue	<b>Transfer discharge subcategory:</b> N/A



# Complete a CMS-2746 Form

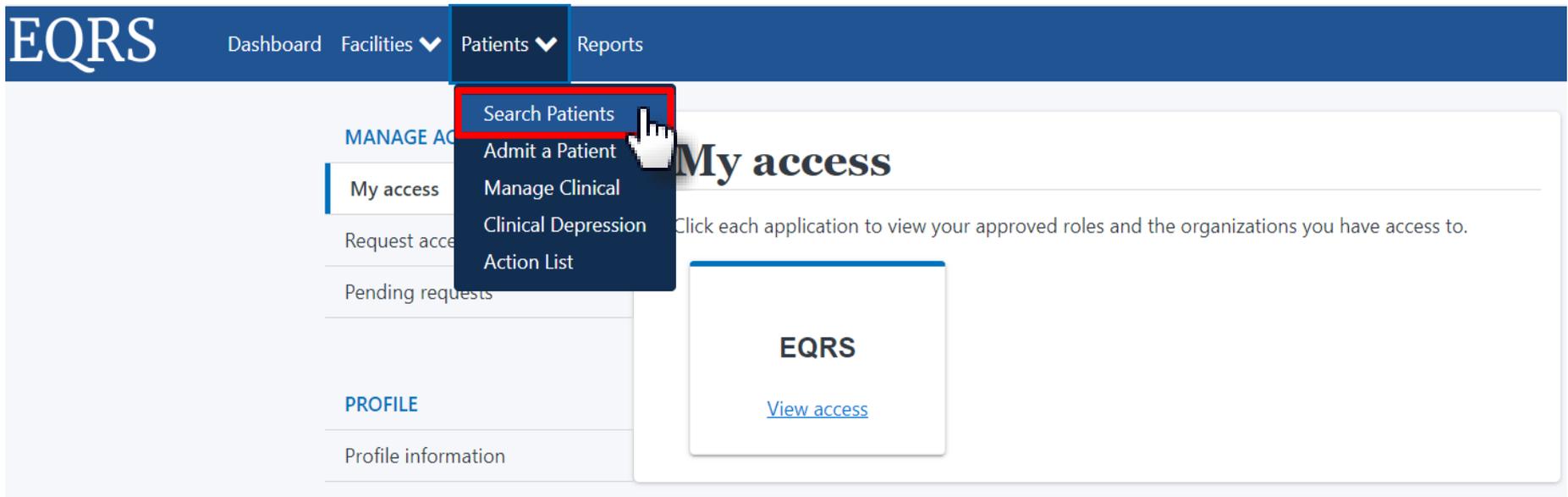
# Click Patients

Click **Patients** in the navigation menu.



# Click Search Patients

Click **Search Patients** in the Patients sub-menu.



The screenshot displays the EQRS web application interface. At the top, a dark blue navigation bar contains the EQRS logo on the left and menu items: Dashboard, Facilities (with a dropdown arrow), Patients (with a dropdown arrow), and Reports. The 'Patients' dropdown menu is open, showing a list of options: Search Patients (highlighted with a red box and a mouse cursor), Admit a Patient, Manage Clinical, Clinical Depression, and Action List. Below the navigation bar, the main content area is divided into two sections. On the left is a sidebar with a 'MANAGE ACCESS' section containing 'My access', 'Request access', and 'Pending requests', and a 'PROFILE' section containing 'Profile information'. On the right is the 'My access' section, which includes a heading, a sub-heading, and a paragraph: 'Click each application to view your approved roles and the organizations you have access to.' Below this text is a card with the EQRS logo and a 'View access' link.

# Enter Search Criteria

Enter search criteria to locate patient. Click Submit.

## Search Patients

Use the criteria below to search for a patient. [Help](#)

SEARCH

---

**Patient criteria**

Patient's First Name

Patient's Last Name

Medicare Beneficiary Identifier

Social Security Number

HICNUM

EQRS Patient ID (aka CROWN UPI)

SIMS UPI

Gender

**Criteria** [Clear all](#)

*Patient's First Name*  
✘ Ima

*Patient's Last Name*  
✘ Patient

*Admitted Facility*  
ABC DIALYSIS

---

# Click EQRS Patient ID

Click the **EQRS Patient ID (aka CROWN UPI)**.

**Search Patient Results** ? Help

[Back to Search](#)

EQRS Patient ID (aka CROWN UPI)	First Name	Middle Initial	Last Name	Gender	Date of Birth	Date of Death	Social Security Number	HICNUM	Medicare Beneficiary Identifier	SIMS UPI
3100008572	Itsa		Patient	F	01/01/1960		XXXXX1234	N/A	N/A	

Showing 1 to 1 of 1 results    Page Size: 10    << Prev 1 Next >>

# Click Edit

View the patient's demographics and click the **Edit** link.

**View Patient Demographics (Ima Patient - 3100008545)**

[Edit](#) [Help](#)

[Collapse All](#)

**Patient Information** ^

<b>Patient's first name:</b> Ima	<b>Middle initial:</b>
<b>Patient's last name:</b> Patient	<b>Suffix:</b>
<b>Date of birth:</b> 01/01/1950	<b>Gender:</b> M
<b>Social Security Number:</b> XXXXX6789	
<b>Medicare Beneficiary Identifier:</b> N/A	
<b>Medicare Claim Number:</b> N/A	

# Click Medical Information

Expand the Medical Information section to enter the death information.

**Edit Patient (Ima Patient - 3100008545)** [Help](#)

Complete the sections below to edit a patient in EQRS. [Expand All](#)

**Patient Information** ^

<b>Patient's first name *</b>	<b>Middle initial</b>
<input type="text" value="Ima"/>	<input type="text"/>
<b>Patient's last name *</b>	<b>Suffix</b>
<input type="text" value="Patient"/>	<input type="text" value=""/>

Ethnicity, race, tribe and origin v

Contact Information v

Miscellaneous Information v

**Medical Information** v



[Cancel](#) [Submit](#)

# Click Submit

Indicate the date and cause of death. Click **Submit**.

Medical Information ^

**Effective date \***

Month Day Year

01 01 2010

**Death date**

Month Day Year

09 09 2020

**Death code description**

Hypoglycemia ▼

**Death code**

100

Cancel Submit



# Click Form 2746

EQRS displays **Successfully edited patient** message.  
Next click the **Form 2746** link.

The screenshot shows the 'MANAGE PATIENT' interface. On the left is a navigation menu with the following items: Patient, Patient History, Admissions, Treatments, Vaccinations, Form 2728, and Form 2746. The 'Form 2746' item is highlighted with a red box and a hand cursor. The main content area features a green success message: 'Successful Successfully edited patient.' Below this is the title 'View Patient Demographics (Ima Patient - 3100008545)' with 'Edit' and 'Help' buttons. A 'Collapse All' link is also present. The 'Patient Information' section is expanded, displaying the following data:

<b>Patient's first name:</b> Ima	<b>Middle initial:</b>
<b>Patient's last name:</b> Patient	<b>Suffix:</b>
<b>Date of birth:</b> 01/01/1950	<b>Gender:</b> M
<b>Social Security Number:</b> XXXXX6789	
<b>Medicare Beneficiary Identifier:</b> N/A	
<b>Medicare Claim Number:</b> N/A	

# Indicate Key Patient Info

Review the form and indicate Key Patient Info, as needed.

**Add a Death Notice (2746)**

[? Help](#)  
OMB CONTROL NUMBER 0938-0448 Expires 11/30/2022

[Collapse All](#)

Key Patient Info - 3100008545 ^

<b>(1a) Patient's Last Name</b> Patient	<b>(1b) First Name</b> Ima	<b>(1c) MI</b>
<b>(2) Patient's Sex</b> Male	<b>(3) Date of Birth</b> 01/01/1950	<b>(4) Medicare Beneficiary Identifier or Social Security Number</b> XXX-XX-6789
<b>(5) Patient State of Residence</b> FL	<b>(6) *Place of Death</b> Home	<b>(7) Date of Death</b> 09/09/2020
<b>(8) Modality at Time of Death</b> Incenter Hemodialysis		
<b>(9) Provider Name and Address</b> <b>(a)</b> ABC DIALYSIS <b>(b) Address Line 1:</b> <b>(c) Address Line 2:</b> <b>(d) Zip Code:</b> <b>(e) City:</b> <b>(f) State:</b>		<b>(10) Provider Number</b> 123456

# Review Cause of Death

Review the Cause of Death and indicate any Secondary Causes, as needed.

Cause of Death ^

**(11) Cause of Death**

**(a) Primary Cause:**  
100: Hypoglycemia

**(b)\* Were there secondary causes?**

No ▼

**If Yes, specify:**

<input type="text"/>	<input type="text" value="▼"/>

**(c) If cause is other (98), please specify:**

# Indicate Renal Replacement Therapy

Review and complete the Renal Replacement Therapy section, as needed.

Renal Replacement Therapy ^

**(12) \*Renal replacement therapy discontinued prior to death:**

**(a) If yes, check one of the following :**

**(b) Date of last dialysis treatment**

Month	Day	Year
09	02	2020

**(13) \*Was discontinuation of renal replacement therapy after patient/family request to stop dialysis ?**

Yes

No

Unknown

Not Applicable

# Indicate Transplant and Hospice Care

Review and complete the Transplant and Hospice section, as needed.

Transplant and Hospice ^

**(14) If deceased ever received a transplant**

**(a) Date of most recent transplant**

Month Day Year

Unknown

**(b) Type of transplant received**

Living Related

Living Unrelated

Deceased

Unknown

**(c) Was graft functioning(patient not on dialysis) at time of death?**

Yes

No

Unknown

**(d) Did transplant patient resume chronic maintenance dialysis prior to death?**

Yes

No

Unknown

**(15) \*Was the patient receiving Hospice care prior to death?**

Yes

No

Unknown

# Click Submit

Complete the Physician section and click **Submit**.

Physician		
(16) *Name of Physician Nick Fury	(a) Physician UPIN	(b) Physician NPI 1780762971
(17) *Person completing this form Meredith Grey	*Date Month: 09 Day: 09 Year: 2020	
Form Information		
Form Entered Date: 09/10/2020	Network Number: 10	
<a href="#">Save</a>		<a href="#">Submit</a>
<a href="#">Reset</a>		

# Successful Submission

EQRS displays “Successfully submitted form 2746” message.

 **Successful**  
Successfully submitted form 2746.

### View a Death Notice (2746) - Submitted

[Print](#) [Help](#)

OMB CONTROL NUMBER 0938-0448 Expires 11/30/2022

**Key Patient Info - 310008545**

(1a) Patient's Last Name Patient	(1b) First Name Ima	(1c) MI
(2) Gender Male	(3) Date of Birth 01/01/1950	(4) Medicare Beneficiary Identifier or Social Security Number XXX-XX-6789
(5) Patient State of Residence FL	(6) Place of Death Home	(7) Date of Death 09/09/2020
(8) Modality at Time of Death Incenter Hemodialysis		
(9) Provider Name and Address (a) (b) Address Line 1: (c) Address Line 2: (d) Zip Code: (e) City: (f) State: ...		(10) Provider Number 123456



# Resolve Accretions

# What is an Accretion?

## **Accretion:**

An ESRD patient identified in another CMS database that appears to be associated with your facility in the CMS database but is not currently admitted to your facility in EQRS.

Accepting an accretion walks you through admitting the patient to your facility in EQRS.

# What Does Each Action Do?

You can take the following actions on accretions:

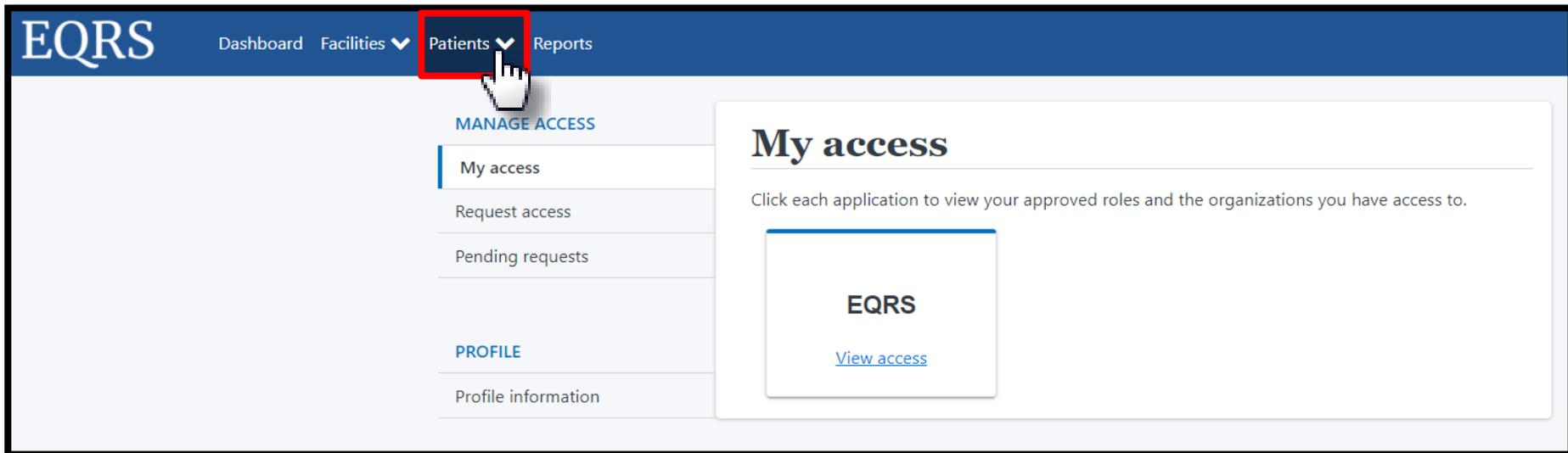
**ACCEPT** – You agree with the external source and will admit the patient to your facility in EQRS.

**INVESTIGATE** – This informs other users that the accretion is “under investigation” by you.

**ESCALATE TO NETWORK** – The patient is not in your facility. This option escalates the accretion to your network so they can reassign it to the correct facility.

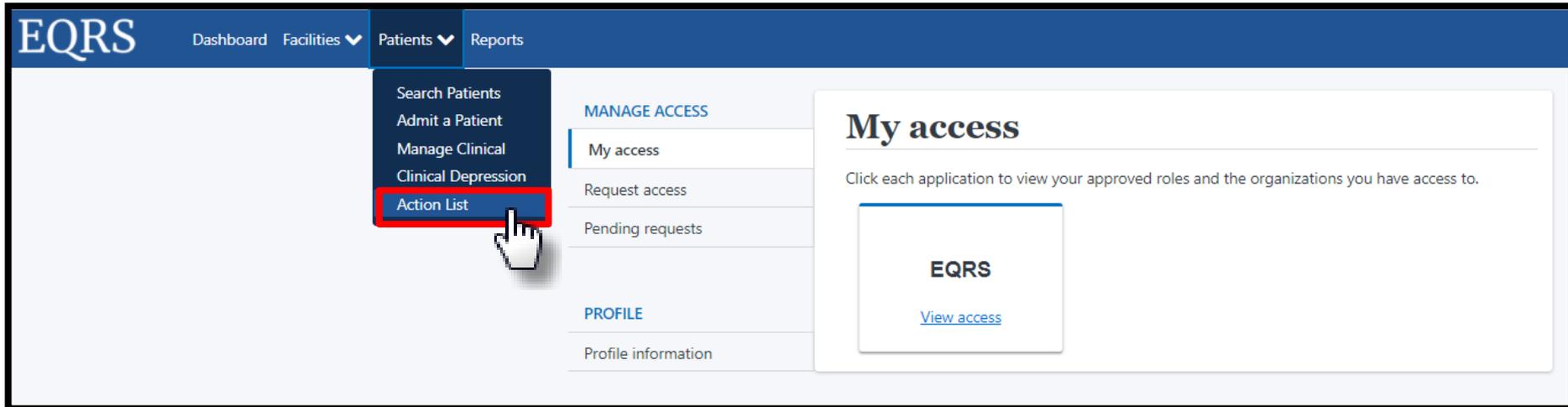
# Click Patients

Click **Patients** in the navigation menu.



# Click Action List

Click **Action List** in the Patients sub-menu.



# Enter Filter Actions

Enter Action Status and click **Filter**.

## Action List - 5 Records Found

Filter Actions

**Action Type \***

Accretion ▼

**Action Status \***

New

Under Investigation

Escalated

Reassigned

**Assigned To \***

ABC DIALYSIS S

**Clear Filter** **Filter**



# Click Accretion Link

Click the **Accretion link** in the Action Type section.

Action List ^

Below is a list of notifications and accretions that match your filters. You may adjust your filters as much as you need.

Action Type	Assigned To	Days Open
<a href="#">Accretion: Patient ABC</a> SSN:XXX-XX-4506	ABC Dialysis	10
<a href="#">Accretion: Patient ABC</a> SSN:XXX-XX-2908	ABC Dialysis	10
<a href="#">Accretion: Patient ABC</a> SSN:XXX-XX-5204	ABC Dialysis	10
<a href="#">Accretion: Patient ABC</a> SSN:XXX-XX-7802	ABC Dialysis	10
<a href="#">Accretion: Patient ABC</a> SSN:XXX-XX-2109	ABC Dialysis	10

Page Size 10 ▼

Showing 1 to 5 of 5 results

◀ Prev 1 Next ▶

# View Accretion

Click the accordion to view accretion information.

## View Accretion Help

Accretion Details ∨

Key Patient Information ∧

**First Name:**  
**Last Name:**

**Gender:** Female  
**Date of Birth:** 11/21/1942

**State:**  
**Zip Code:** 34655

**Social Security Number:** XXX-XX-4506  
**Medicare Claim Number:** 0XXXXX506A  
**Medicare Beneficiary Identifier:**

Facility & Treatment Information ∨

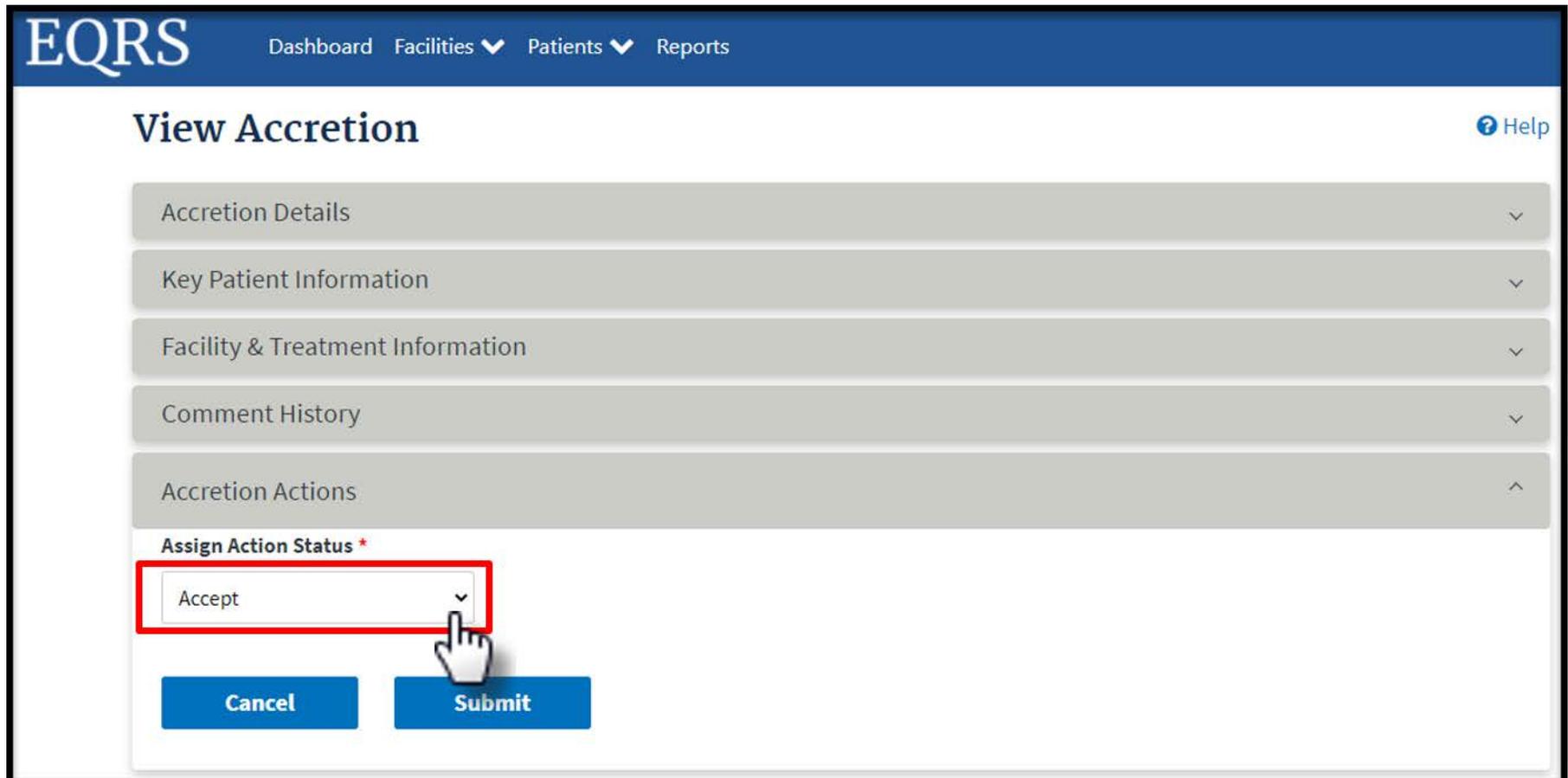
Comment History ∨

Accretion Actions ∧

**Assign Action Status \***

# Accretion Accepted

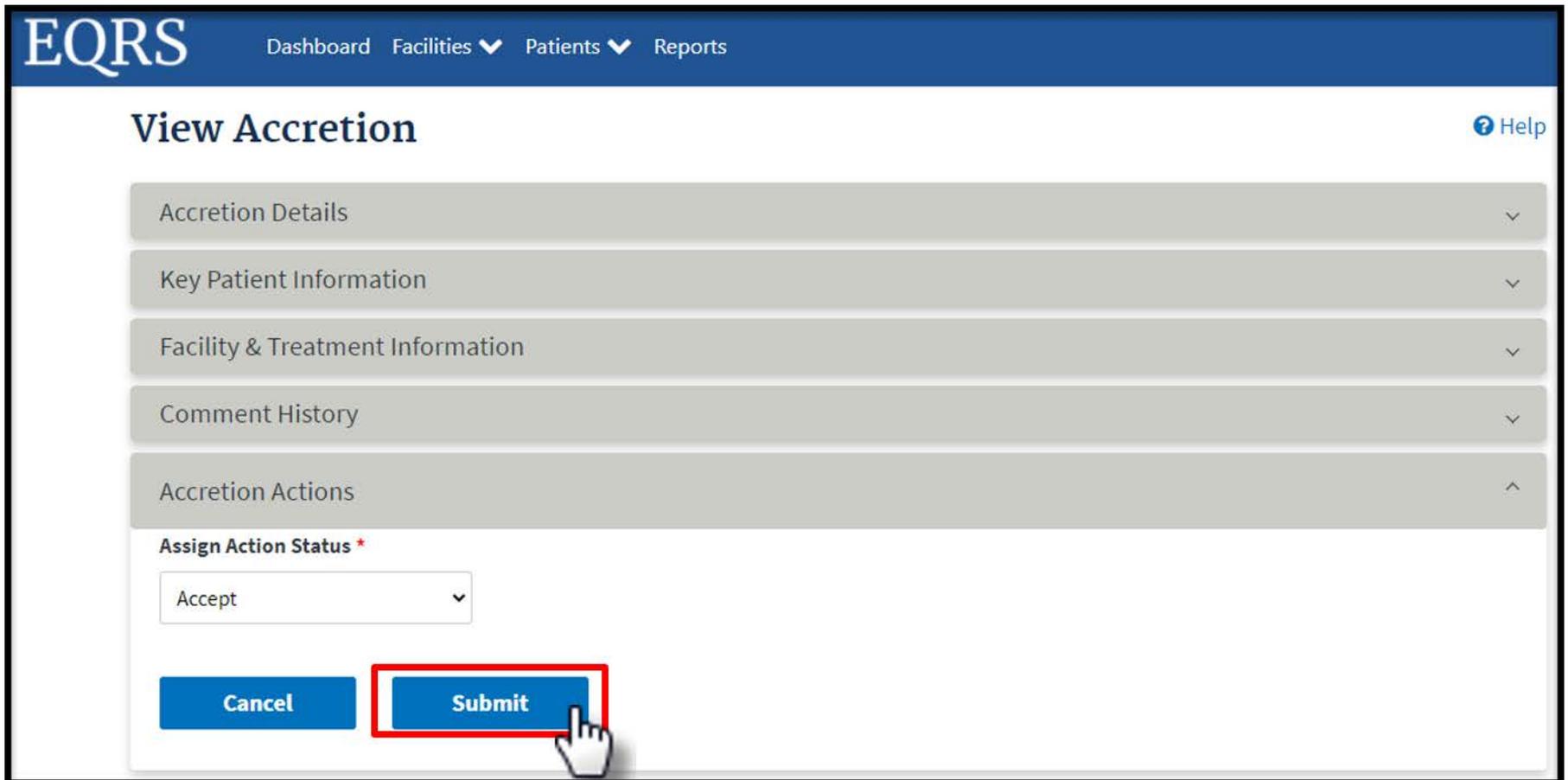
Select **Accept** under the Assign Action Status to accept accretion.



The screenshot displays the EQRS 'View Accretion' page. The top navigation bar includes 'EQRS' and menu items for 'Dashboard', 'Facilities', 'Patients', and 'Reports'. The main content area is titled 'View Accretion' and features a 'Help' icon. Below the title are several expandable sections: 'Accretion Details', 'Key Patient Information', 'Facility & Treatment Information', 'Comment History', and 'Accretion Actions'. The 'Accretion Actions' section is expanded, revealing the 'Assign Action Status \*' dropdown menu. The 'Accept' option is selected and highlighted with a red border. A hand cursor is positioned over the dropdown arrow. Below the dropdown are two buttons: 'Cancel' and 'Submit'.

# Submit Accretion

Click the **Submit** button to submit accretion.



The screenshot shows the EQRS interface. At the top, there is a navigation bar with the EQRS logo and menu items: Dashboard, Facilities (with a dropdown arrow), Patients (with a dropdown arrow), and Reports. Below the navigation bar is the main content area titled "View Accretion" with a "Help" icon in the top right corner. The main content area contains several expandable sections: "Accretion Details", "Key Patient Information", "Facility & Treatment Information", "Comment History", and "Accretion Actions". Below these sections is a form with a label "Assign Action Status \*" and a dropdown menu currently set to "Accept". At the bottom of the form are two buttons: "Cancel" and "Submit". The "Submit" button is highlighted with a red rectangular border, and a hand cursor is pointing at it.

# Accretion: Admit Patient

Complete the patient admission process.

**i** Accretion under investigation

## Admit Patient [Help](#)

Complete the sections below to admit a patient in EQRS. [Expand All](#)

### Patient Information

<b>Patient's first name *</b>	<b>Middle initial</b>
<input type="text"/>	<input type="text"/>
<b>Patient's last name *</b>	<b>Suffix</b>
<input type="text"/>	<input type="text"/>
<b>Date of birth *</b>	<b>Gender *</b>
Month: <input type="text" value="11"/> Day: <input type="text" value="21"/> Year: <input type="text" value="1942"/>	<input type="text" value="Female"/>
<b>Social Security Number *</b>	<input type="checkbox"/> N/A
<input type="text"/>	
<b>Medicare Beneficiary Identifier *</b>	<input type="checkbox"/> N/A
<input type="text"/>	



# Resources and Evaluation



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Input search criteria

Search

## Sign Up for Mailing List

Enter your information below to receive updates on system trainings, project information, and monthly newsletters!

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Last name

Company

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## ESRD Systems Data Management Guidelines

ESRD Systems Data Management Guidelines PDF.



## Important Links

- [HARP Training Materials](#)
- [ESRD QIP UI Quick Start Guide](#)
- [ESRD Systems Data Management Guidelines](#)

## Learn About EQRS

**MyCROWNWeb.org** provides a number of tools to help the ESRD community become better users of the EQRS system. Please visit the pages and quick links on the website for more information on the End Stage Renal Disease (ESRD) Quality Reporting System (EQRS). Please check out the [Latest Official News from CMS](#) and [Event Announcements](#) for more latest news.



## Information

MyCROWNWeb.org features extensive information on EQRS. [Events](#) provides recorded presentations from recent Town Halls, describing the evolution of EQRS. [News](#) provides the latest news from CMS on ESRD and EQRS, and provides links to monthly

# Education tab



Home

Events

Education

News

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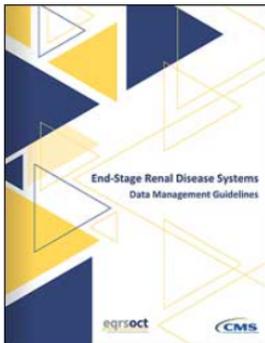
## Educational Resources Navigation

[EQRS Minimum Computer Specifications](#)

[Virtual Training Calendar](#)

## ESRD Systems Data Management Guidelines

ESRD Systems Data Management Guidelines [PDF](#).



## Online Help Portal

Visit the EQRS Help Portal to ask your questions directly to the Help Desk or the EOCT staff.



## Educational Resources



## EQRS Educational Resources

MyCROWNWeb offers many different training and educational tools to help new and experienced users of EQRS. Please visit the pages listed below to find the best educational resources for you:



[Virtual Training Calendar](#)

### EQRS Resources:

- ★ [EQRS Data Submission Stopwatch](#)
- ★ [EQRS Quick Start Guide](#)
- ★ [Form \(2728, 2746\) Modifications Process Update](#)
- ★ [EQRS: Patient Admit/Discharge Guidance](#)
- ★ [EQRS Minimum Computer Specifications](#)
- ★ [CMS-2744 Annual Facility Survey Training](#)

### HARP Training

- ★ [HARP Training](#)
  - ★ [HARP Training Recording](#)  
*Revised on: 04/02/2020*
  - ★ [HARP Training PDF](#)  
*Revised on: 04/02/2020*
  - ★ [HARP Quick Start Guide](#)  
*Revised on: 04/02/2020*

### ESRD Quality Incentive Program:



The new End-Stage Renal Disease Quality Incentive Program (ESRD) Facility User Quick Start Guide is now available in [PDF](#).

- [ESRD QIP Training Slides](#)
- [ESRD QIP System Preview Period Training Video](#)