# Crosswalk for Changes to Section 226A of the Social Security Act

## End Stage Renal Disease Medical Evidence Report Medicare Entitlement and/or Patient Registration (CMS-2728)

Table. Crosswalk to Section 226A of the Social Security Act

| Section of Current CMS-2728 (10/22) | Type of Change | Rationale for Change |
| --- | --- | --- |
| Section A #3 | Add: Place for Social Security Number | Necessary for improved identification for coverage benefits |
| Section A #7 | Add: Place for Alternate Phone Contact | Necessary for improved contact during disasters and emergencies |
| Section A #8 | Add: Selection of pronouns | Provide inclusion for gender identity |
| Section A #9 | Add: Section to provide clarity of gender changed male to cisgender man and female to cisgender woman | Provide inclusion for gender identity |
| Section A #12 | Add: Middle Eastern North AfricaRemove: Decline to answer | Provide clarity for racial inclusion |
| Section A #19 | Add: Co-Morbidities that are more relevant to pediatric patients and additional co-morbidities for adults | Provide acknowledgement and inclusion of pediatric issues along with additional co-morbidities affecting adult ESRD patients |
| Section A #20 d | Add: Response for additional accesses with which a patient may start dialysis. Add: Question regarding starting dialysis using both a Central Venous Catheter and a fistula or graft.Add: Question regarding the presence of a maturing peritoneal catheter | Provide clarity of the access choice of incident patients and assist staff in reporting correctly by clearly defining the choices |
| Section A #20 e | Add: Question related to presence of acute kidney injury in the last 12 months | Identify predisposing factors that could be mitigated to prevent ESRD |
| Section A #20 f | Add: Question related to education regarding home dialysis modality education prior to starting dialysis | Identify the education and understanding of options a patient has been made aware of prior to starting dialysis |
| Section A #20 g | Add: Question related to education regarding kidney transplant education prior to starting dialysisAdd: Question related to education regarding living donor kidney transplant education prior to starting dialysis | Identify the education and understanding of options, including living donor transplant, a patient has been made aware of prior to starting dialysis |
| Section A #20 h | Add: Question related to active medical management without dialysis | Identify the education and understanding of options, including active medical management without dialysis, a patient has been made aware of prior to starting dialysis |
| Section A #21 | Add: Ability for providers to use laboratory values from the admission to the dialysis facility if previous laboratory values are not available in 30 days | Provide an avenue to provide required information to the providers if there is an issue obtaining access to the previous medical record |
| Section A #21 g | Remove: Lipid ProfileAdd: LDL | Change request for laboratory values that are more pertinent to the ESRD patient |
| Section A #22 | Add: Question related to the patient have living will or Medical/Physician order for life sustaining treatment. | Provide inclusion of end of life decisions  |
| Section A #23 | Add: Question related to concern about patient access to shelter | Provide inclusion of social determinants of health  |
| Section A #24 | Add: Question related to caregiver support for daily careAdd: Question related to caregiver support with home dialysis/kidney transplantAdd: Question related to whether the caregiver lives with the patient | Provide inclusion of social determinants of health  |
| Section A #25 | Add: Question related to access to transportation | Provide inclusion of social determinants of health  |
| Section A #26 | Add: Question related to understanding health literature in EnglishAdd: Question related to different way other than written documents to learn about healthAdd: Question related to the need for a translator to understand health information | Provide inclusion of social determinants of health  |
| Section A #27 | Add: Question related to ability to support the very basics like housing, medical care, electricity, and heating | Provide inclusion of social determinants of health  |
| Section A #28 | Add: Question related to access to food in the last twelve (12) months  | Provide inclusion of social determinants of health  |
| Section A #29 | Add: Question related to whether the patient has been threatened with harm or been physically hurt in the last twelve (12) months | Provide inclusion of social determinants of health  |
| Section B #36 | Clarified: The previous CMS-2728 asked if the patient was informed of transplant options. This was revised to does the patient understand transplant options at the time of admission with an option to indicate not applicable if question #20(g) had a yes response. | Provide clarity that informing patients of transplant options requires understanding on the part of the patient. |
| Section B #37 | Add: Responses that assist in clarifying the reason a patient has not chosen transplant as an option | Provide clarity as to why a patient isn’t choosing transplant as a modality option |
| Section B #37 | Add: Place for the provider to indicate if they have been referred to a transplant center. Add: “At this time” to the option “Patient has not been assessed”Revise: “is not eligible” to “has a absolute contraindication” | Gain insight into how providers are working toward the CMS goal of ESRD patients receiving a transplant |
| Section B #38 | Add: Question related to referral to a transplant center and the name of the transplant center | Gain insight into referral of ESRD patients to receive a transplant |
| Section B #39 | Add: Question related to the patient’s understanding of home modality options at the time of admission with an option to indicate not applicable if question #20(f) had a yes response. | Provide clarity as to why a patient isn’t choosing home dialysis as a modality option |
| Section B #40 | Add: Responses that assist in clarifying the reason a patient did not choose a home modality as an option | Gain insight into how providers are working toward the CMS goal of ESRD patients utilizing a home modality |
| Section C #48 | Revise: “Type of Donor” to “Type of Transplant” Add: “Multi-organ” and “Paired Exchange” as options for kidney transplant types | Gain insight into types to transplants receive |
| Section C # 50 | Add: Transitional Care Unit as an option | Include all dialysis care areas in the options |
| Section F | Add: Options for Lost to Follow-up, Moved out of the United States and territories, and Death as reasons a CMS-2728 for has not been signed | Provide an avenue to close a form that cannot be signed by a patient |
| LIST OF PRIMARY CAUSES OF RENAL DISEASE | Add: E11.21 Type 2 diabetes mellitus with diabetic nephropathy | Provide updated option for the cause of renal disease |
| LIST OF PRIMARY CAUSES OF RENAL DISEASE | Add: I12.0 Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease | Provide updated option for the cause of renal disease |
| LIST OF PRIMARY CAUSES OF RENAL DISEASE | Add: U07.1 COVID19 | Provide updated option for the cause of renal disease |

The remainder are updates on the accompanying Instructions for Completion based on the suggestions from ESRD Networks, ESRD providers, and other stakeholders.