



# The End Stage Renal Disease Network of Texas, Inc.

4099 McEwen Road Suite 820 Dallas TX 75244 972-503-3215 fax 972-503-3219 [www.esrdnetwork.org](http://www.esrdnetwork.org)

A Division of Alliant Health Solutions

## Missing Patients Protocol

### *What to do when patients miss 30+ days of treatment.*

The ESRD Network of Texas (Network 14) Patient Services Department is frequently contacted by Facility Staff members with concerns related to patients missing treatment for thirty or more consecutive days. According to the National Kidney Fund's Adherence Survey, over 18% of patients reported that they skipped dialysis treatments altogether.

In an effort to both, advocate for patient's rights and assist facilities in maintaining their standing with CMS, Network 14 has developed a Missing Patients Protocol to assist with handling patients who miss thirty or more consecutive days of treatment in accordance with the Conditions for Coverage (CfCs).

Patients have the right to refuse any aspect of their treatment plan. This right includes missing treatments. V456 in the CMS Interpretive Guidance states, "The patient has the right to be informed about and participate, if desired, in all aspects of his or her care, and be informed of the right to refuse treatment, to discontinue treatment, and to refuse to participate in experimental research." Additionally, the Interpretive Guidance indicates at V559 that the Interdisciplinary Team, "must recognize each patient has the right to choose less than optimal care when the patient determines optimal care would negatively impact his/her quality of life." **Thus, patients cannot be discharged from the dialysis facility for non-adherence.** Instead, the interdisciplinary team (IDT) is required to "focus on identifying the potential causes of the non-adherence and addressing those causes."

**However, patients who miss thirty consecutive days of treatment** (*that are not hospitalized, in rehab or a nursing home*) **can be made inactive with the facility** (*Refer to your Organizations internal Policies*). If a missing patient reports that he or she wants to resume treatments, the facility is able to readmit the patient with physician orders. Patients must be assessed prior to resuming treatment. If the physician does not accept the returning patient the facility must follow the IVD process and assist with placement.

Because patients encounter several barriers and skip treatment for many different reasons, Facility Staff should ensure that adequate efforts to contact patient, assess treatment barriers, and provide appropriate education have been completed. The following steps should be completed when patients begin to miss treatment:

- Have a discussion with the patient that discontinuing treatment is an option, what it means, and that end-of-life care can be arranged for them. Ensure that patients understand that if they make the decision to stop treatment now, they can change their minds and return to dialysis at your center in the future.
- Involve the patient's nephrologist in attempts to re-engage the patient in their care.
- If you are unable to contact the patient by phone, complete and document the following steps:
  1. Send a Certified Letter of Concern (included target date that patient should contact the facility before being discharged, letter included hospice information).
  2. Contact Police for Welfare Check and provide Patient's Last Known Residence
  3. Contact Friends/Family (medical release of information provided by patient)
  4. Contact Hospitals frequented by Patient
- Contact Adult Protective Services if the patient is a vulnerable adult with questionable competency or is known to be incompetent to make their own healthcare decisions,
- Thoroughly document all interventions and results.



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## CROWNWeb Discharge Reason

- ### Involuntary

This should be used when a patient has been discharged from your unit against his/her will as a result of verbal/written/physical threat or harm, non-payment, or property damage. You should select an *Involuntary Discharge Subcategory* to identify why your patient has been discharged. A CMS-2746 must be submitted if a patient expires within 30 days of the involuntary discharge date *and the patient has not been permanently transferred in by another Medicare certified dialysis unit*. You are required to contact the Network 14 Patient Services Department prior to involuntarily discharging a patient from your unit.

Admit Date	Admit Reason	Admit Facility	Discharge Date	Discharge Reason	Treatment	Physician	Treatment Summary
<a href="#">02/16/2010</a>	New ESRD Patient	[REDACTED]	07/23/2012	Involuntary	<a href="#">Dialysis Facility/Center Hemodialysis</a>		<a href="#">Treatment Summary</a>

- ### Discontinue

This should be used for patients who specifically articulate the decision to permanently stop dialysis. A CMS-2746 must be submitted if a patient expires within 30 days of the discontinue discharge date.

Admit Date	Admit Reason	Admit Facility	Discharge Date	Discharge Reason	Treatment	Physician	Treatment Summary
<a href="#">07/07/2006</a>	New ESRD Patient	[REDACTED]	11/16/2012	Discontinue	<a href="#">Dialysis Facility/Center Hemodialysis</a>		<a href="#">Treatment Summary</a>

- ### Lost to Follow Up

This should be used for patients whose whereabouts are unknown and all attempts to contact the patients have failed. A CMS-2746 must be submitted if a patient expires within 30 days of the lost to follow up discharge date.

Admit Date	Admit Reason	Admit Facility	Discharge Date	Discharge Reason	Treatment	Physician	Treatment Summary
<a href="#">11/08/2012</a>	New ESRD Patient	[REDACTED]	12/21/2012	Lost to Follow Up	<a href="#">Dialysis Facility/Center Hemodialysis</a>		<a href="#">Treatment Summary</a>