To: IPAs & Dialysis Providers
From: IEHP – Provider Relations
Date: November 8, 2019
Subject: ESRD – Medicare FFS Eligibility for Dialysis Recipients

To better serve Members receiving dialysis treatment, Inland Empire Health Plan (IEHP) is partnering with Dialysis Providers to ensure IEHP Members are aligned with the appropriate plan/payer based on Member Line of Business.

IEHP Medi-Cal Members receiving dialysis services are eligible for Fee-For-Service (FFS) Medicare based on the following criteria:

- **Inpatient or outpatient hemodialysis:** Members are eligible for FFS Medicare the first day of the fourth month they receive dialysis.

- **In home dialysis or peritoneal dialysis:** Members are eligible for FFS Medicare the first day of the first month they receive dialysis.

To ensure Members are appropriately transitioned to FFS Medicare, Providers must complete the *End Stage Renal Disease Medical Evidence Report Medicare Entitlement and/or Patient Registration* form (form CMS-2728-U3) at the onset of dialysis. The form should be submitted directly to Medicare for review.

The CMS-2728-U3 form can be found at the following address: [https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/CMS-Forms-Items/CMS008867.html](https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/CMS-Forms-Items/CMS008867.html)

As a reminder, all communications sent by IEHP can also be found on our Provider portal at: [www.iehp.org](http://www.iehp.org) > For Providers > Plan Updates > Correspondence.

If you have any questions, please do not hesitate to contact the IEHP Provider Relations Team at (909) 890-2054.

Enclosed: CMS-2728-U3 form & Instructions