



# **MLN Connects**<sup>TM</sup>

*National Provider Call*

## **End-Stage Renal Disease Quality Incentive Program**

# **Previewing Your Facility's PY 2014 Performance Data**

**August 7, 2013**



# Medicare Learning Network®

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# Presenters

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# Purpose

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**To provide an overview of the Payment Year (PY) 2014 End-Stage Renal Disease (ESRD) Quality Incentive Program (QIP) and describe what to expect during the Preview Period**

**This National Provider Call (NPC) will discuss:**


- General program information
- Understanding your Performance Score Report (PSR)
- How to submit formal inquiries and clarification questions
- Activities following the Preview Period
- Where to go for more help and information

# Introduction

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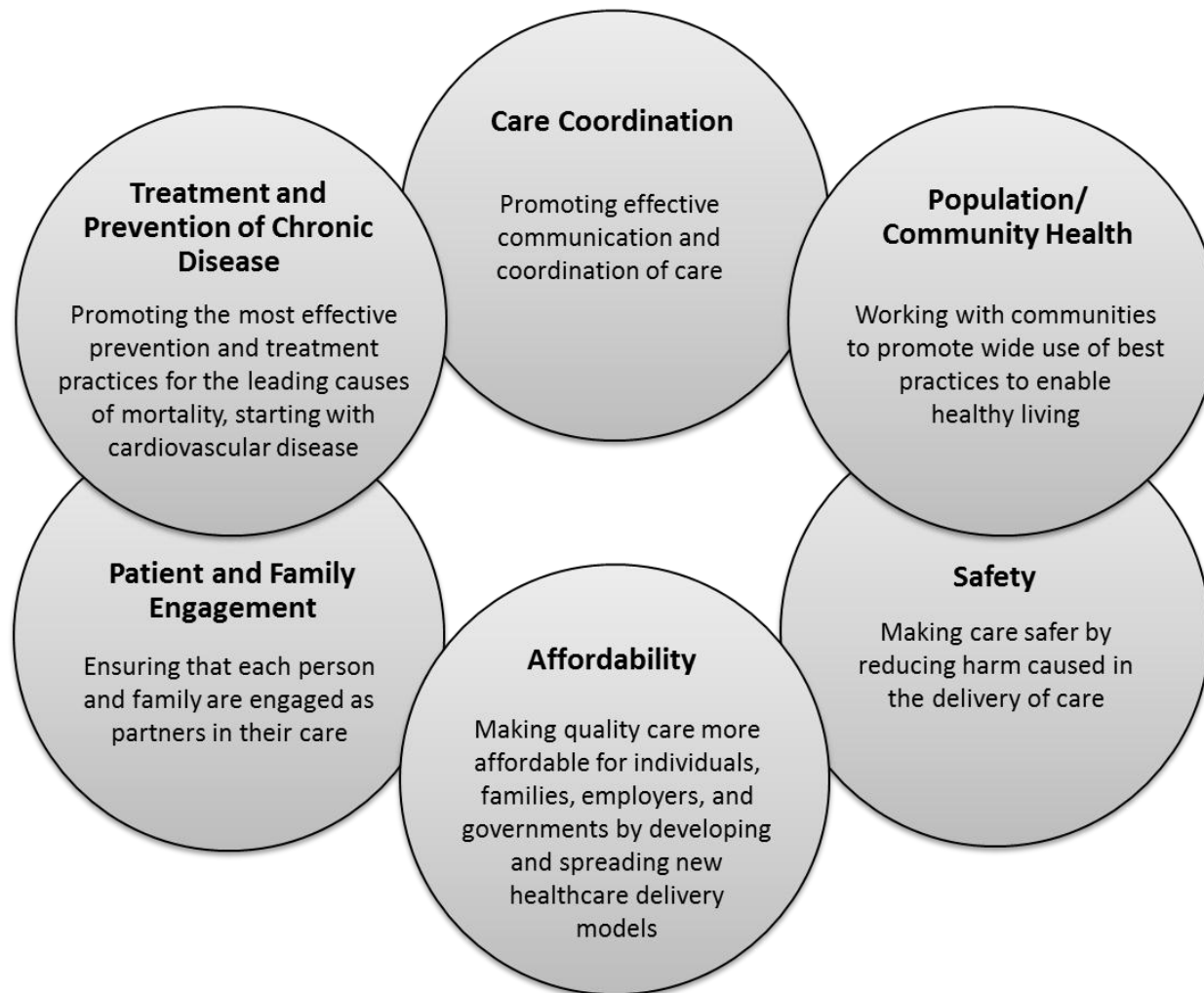
Presenter:  
**Jim Poyer**

# CMS Objectives for Value-Based Purchasing

- **Identify and require reporting** of evidence-based measures that promote the adoption of best practice clinical care
  - **Advance transparency of performance** across all sites of care to drive improvement and facilitate patient decision-making around quality
  - **Implement and continually refine payment** models that drive high standards of achievement and improvement in the quality of healthcare provision
  - **Stimulate the meaningful use of information** technology to improve care coordination, decision support, and availability of quality improvement data
  - **Refine measurements and incentives** to achieve healthcare equity, to eliminate healthcare disparities, and to address/reduce unintended consequences
- 
- **Paying for quality healthcare is no longer the payment system of the future; it's the payment system of today.**
  - **The ESRD QIP is the leading edge of payment reform and can serve as an example to the healthcare system.**

# Six Domains of Quality Measurement

## Based on the National Quality Strategy





Presenter:  
**Anita Segar**

# ESRD QIP Legislative Drivers

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The ESRD QIP is described in Section 1881(h) of the Social Security Act, as added by Section 153(c) of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA)

- **Program intent:** Promote patient health by encouraging renal dialysis facilities to deliver high-quality patient care
- **Section 1881(h):**
  - Authorizes payment reductions if a facility does not meet or exceed the minimum Total Performance Score (TPS) as set forth by CMS
  - Allows payment reductions of up to 2%

# Overview of MIPPA Section 153(c)

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**MIPPA requires the Secretary of the Department of Health and Human Services to create an ESRD QIP that will:**

- Select measures
- Establish performance standards that apply to individual measures
- Specify the performance period for a given PY
- Develop a methodology for assessing total performance of each facility based on performance standards for measures during a performance period
- Apply an appropriate payment percentage reduction to facilities that do not meet or exceed established TPS
- Publicly report results through websites and facility posting

# Program Policy: ESRD QIP Development from Legislation to Rulemaking

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**ESRD QIP rulemaking implements Section 1881(h)**

**2011: CMS proposed and finalized rules for PYs 2013 and 2014**

- **Proposed Rule / Notice of Proposed Rulemaking:**
  - July 8, 2011 (76 Federal Register 40,517)
- **Final Rule:**
  - November 10, 2011 (76 Federal Register 70,228)

Presenter:  
**Anita Segar**

# PY 2014 Preview Period Timeline

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- **Preview Period opens July 29, 2013**
  - Preview PSR ready for download from [DialysisReports.org](http://DialysisReports.org)
  - Submit all clarification questions and formal inquiries online
  - **Recommendation: Submit clarification questions by August 13**
  - Responses to clarification questions help facilities determine whether a formal inquiry should be made
- **Preview Period closes August 29, 2013**
  - All clarification questions and formal inquiries must be received by 5:00 p.m. EDT
  - CMS will respond to questions and inquiries received before deadline; the responses may be delivered after the Preview Period has elapsed

# PY 2014: Overview

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- **Program includes six measures:**
  - Scoring on each clinical measure is based upon a facility's achievement or improvement on the measure (facility receives higher score)
  - Scoring on reporting measures is based on meeting specific requirements for each measure
- **Performance period: Calendar Year (CY) 2012**
- **Comparison period: July 1, 2010 – June 30, 2011**
- **TPS on 100-point range:**
  - Facilities must earn at least 53 points to avoid a payment reduction
  - 0.5% reduction assessed per 10 points below the minimum TPS (to a maximum reduction of 2%)

# Snapshot: PY 2014 Program Measures

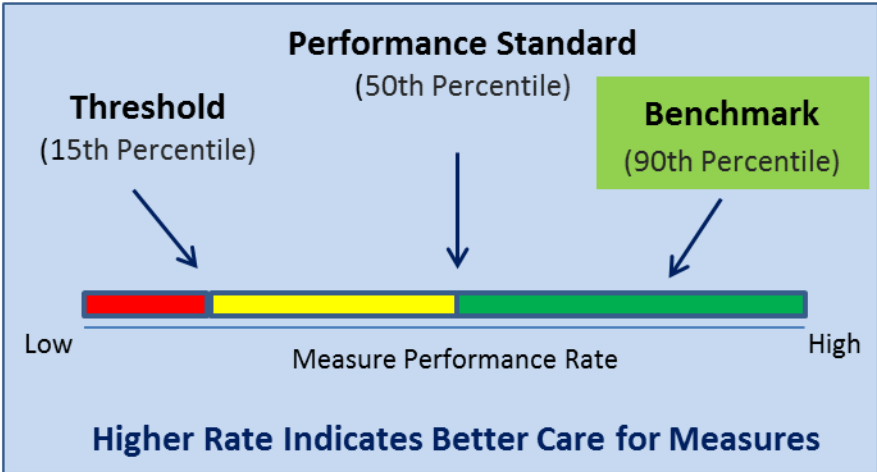
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- **Three clinical measures (90% of TPS):**
  - Hemoglobin Greater than 12 g/dL
  - Urea Reduction Ratio (URR) Greater than or Equal to 65%
  - Vascular Access Type (VAT)
    - ❖ Fistula
    - ❖ Catheter
  
- **Three reporting measures (10% of TPS):**
  - Reporting dialysis events (infections) to the Centers for Disease Control and Prevention's (CDC) National Healthcare Safety Network (NHSN)
  - Administering the In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH CAHPS) survey
  - Monitoring mineral metabolism data (serum calcium and serum phosphorus)

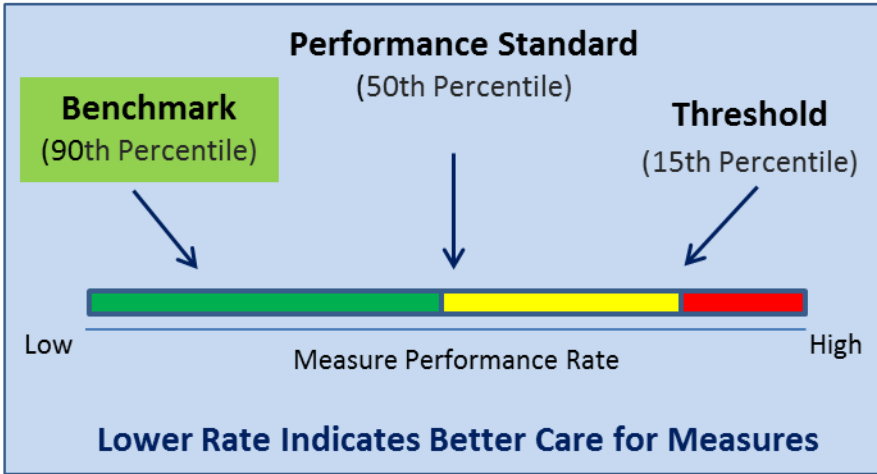


# PY 2014 Clinical Measures: Directionality

Dialysis Adequacy:  
VAT – Fistula



Anemia Management:  
VAT – Catheter



# PY 2014 Clinical Measures:

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## Two Continued from PY 2013

- **Percentage of patients with hemoglobin levels greater than 12 g/dL (Hemoglobin Greater than 12 g/dL)**
  - Lower percentage indicates better care
- **Percentage of patients with a URR of 65% or greater (Hemodialysis Adequacy)**
  - Higher percentage indicates better care
- **Facilities must have at least 11 patients to be scored on these clinical measures**

# PY 2014 Clinical Measures:

## Vascular Access Type

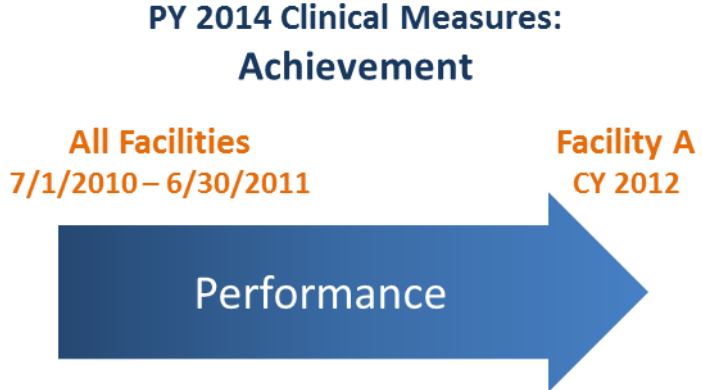
- **The VAT measure consists of two submeasures:**
  - Percent of hemodialysis patients using an arterial venous fistula (AVF) during last treatment of the month
    - ❖ Higher percentage is desirable
  - Percent of hemodialysis patients using an intravenous catheter during the last treatment of the month and for at least 89 days prior
    - ❖ Lower percentage is desirable
- **Each submeasure receives a score**
- **The submeasures scores are then averaged to derive the VAT measure score**
- **A facility must have at least 11 cases to be scored on each of these submeasures**

# PY 2014: Achievement and Improvement

## Scoring Methods

**Achievement Score:** Points awarded by comparing the facility's rate during the performance period with the performance of **all facilities nationally** during the comparison period

- Rate better than or equal to benchmark: 10 points
- Rate worse than achievement threshold: 0 points
- Rate between the two: 1 – 9 points



**Improvement Score:** Points awarded by comparing the facility's rate during the performance period **with its previous performance** during the comparison period

- Rate better than or equal to benchmark: 10 points (per achievement score)
- Rate at or worse than improvement threshold: 0 points
- Rate between the two: 0 – 9 points



# PY 2014 Reporting Measures:

## NHSN Dialysis Events

- **To earn the maximum 10 points on the measure, a facility must have:**
  - Enrolled in the NHSN and completed the required training during or prior to CY 2012 **and**
  - Reported at least three consecutive months of dialysis event data collected during CY 2012 by April 30, 2013
  
- **To earn 5 points, a facility must have:**
  - Enrolled in the NHSN and completed the required training during or prior to CY 2012
  
- **Facilities that did not enroll and receive training** during or prior to CY 2012 will receive 0 points
  
- **If a facility received a CMS Certification Number (CCN) after June 30, 2012,** then it will *only* be scored if it successfully completed the requirements to obtain a full 10 points

# PY 2014 Reporting Measures:

## ICH CAHPS Survey

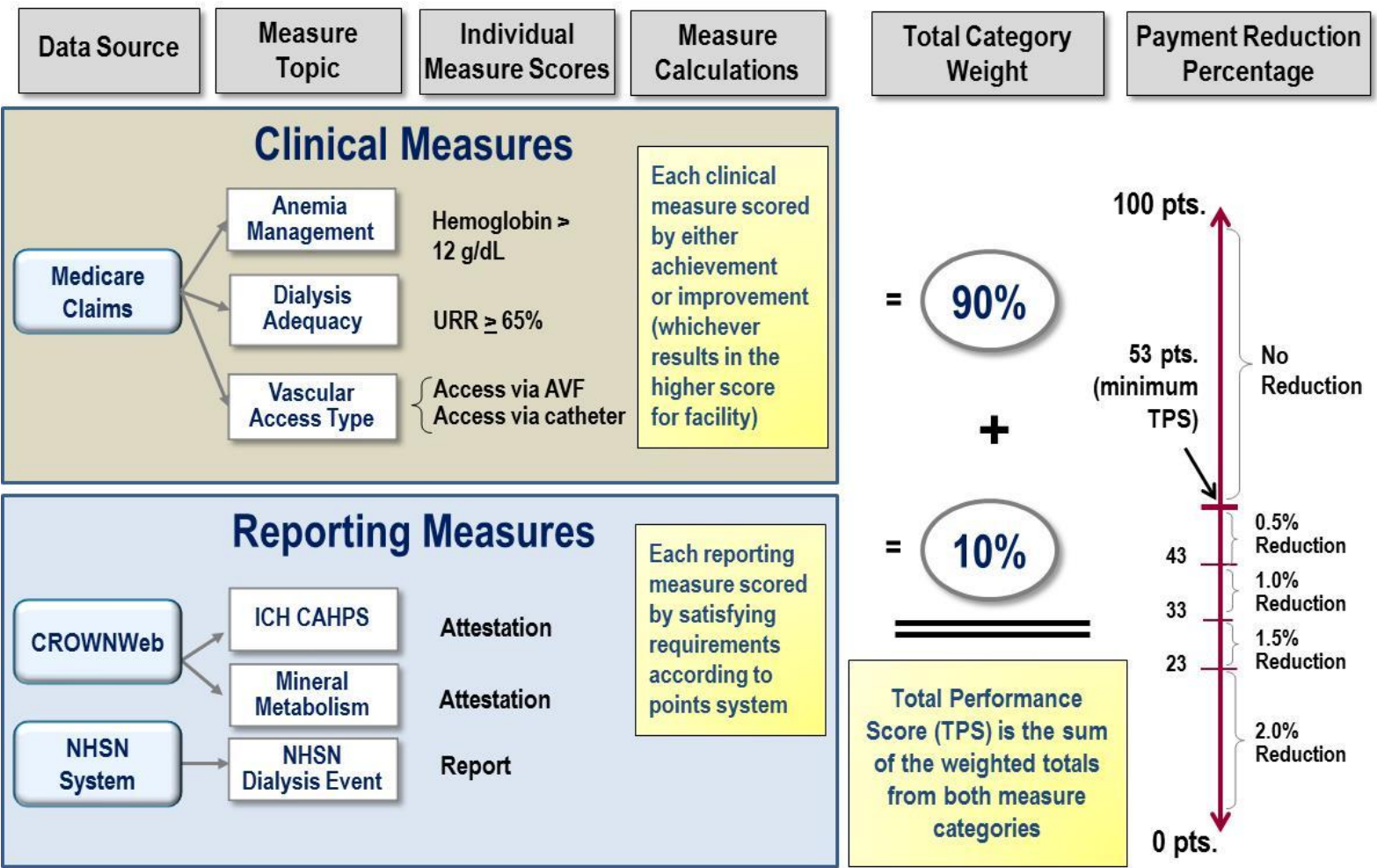
- **To earn the maximum 10 points on this measure, a facility must have:**
  - Attested to successfully administering the ICH CAHPS survey during CY 2012 via CROWNWeb by January 30, 2013
  - Facilities will not be scored on this measure if it is deemed that the ICH CAHPS survey does not apply
- **0 points are awarded to eligible facilities that did not make this attestation**
- **If a facility received a CCN after June 30, 2012, then it will only be scored if it successfully completed the requirements to obtain a full 10 points**

# PY 2014 Reporting Measures:

## Mineral Metabolism

- Modified by PY 2015 final rule (published November 2012)
- **To earn the maximum 10 points on this measure, a facility must have attested via CROWNWeb by January 30, 2013 to monitoring serum calcium and serum phosphorus levels on a monthly basis for at least 96% of:**
  - In-center Medicare patients who have been treated at least seven times by the facility during that month
  - and**
  - Home hemodialysis Medicare patients for whom the facility submits a claim during that month
- Facilities treating fewer than 11 eligible Medicare patients during the performance period earn 10 points on the measure by attesting via CROWNWeb that they met these requirements for “all but one” eligible patients
- 0 points are awarded to facilities that did not make one of these attestations
- If a facility received a CCN after June 30, 2012, then it will only be scored if it successfully completed the requirements to obtain a full 10 points

# PY 2014 Scoring and Payment Reduction Methodology





# Performance Score Report Overview

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Presenter:  
**Anita Segar**

# Performance Score Report Contents

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- **Your PSR contains the following information:**
  - Your **performance rate in 2012** on each PY 2014 clinical measure
    - ❖ Includes information for you to review the number of patients whose data was used in calculating each measure
  - An explanation of how this rate is translated into **your score on both achievement and improvement** for each clinical measure
  - A record of compliance with NHSN requirements
  - A record of attestations your facility made for the three remaining reporting measures
  - An explanation of how **your measure scores** are weighted and translated into your TPS
  - Information regarding if and/or how Medicare payments to your facility will be affected as a result of your TPS
  
- **Detailed information about how the performance rates were calculated is available in the *Guide to the Performance Score Report*, which will be available on [DialysisReports.org](http://DialysisReports.org)**

# Preview Performance Score Report

Your facility's performance scores will be detailed in the PSR using tables and explanatory text



U.S. Department of Health & Human Services



Centers for Medicare & Medicaid Services

Payment Year 2014  
End-Stage Renal Disease  
Quality Incentive Program

Preview Performance Score Report

July 29, 2013

# Score Summary and Payment Reduction Percentage

## Projected Payment Reduction Percentage

## 0.5% Reduction

Performance Measures	Measure Score	Measure Weight
<b><i>Clinical Measures</i></b>		<b><i>Total of 90%</i></b>
<b>Anemia Management</b> Percent of patients with average hemoglobin greater than 12 g/dL	3	45%
<b>Dialysis Adequacy – Urea Reduction Ratio (URR)</b> Percent of hemodialysis patients with URR greater than or equal to 65%	N/A	–
<b>Vascular Access Type (VAT) (two sub-measures)</b>	6	45%
<ul style="list-style-type: none"> <li>Percent of hemodialysis patients using arteriovenous (AV) fistula during last treatment of the month</li> </ul>	10	–
<ul style="list-style-type: none"> <li>Percent of hemodialysis patients with intravenous catheter in use for 90 days or more</li> </ul>	1	–
<b><i>Reporting Measures</i></b>		<b><i>Total of 10%</i></b>
<b>NHSN Dialysis Event Reporting</b> Score on enrolling, training, and reporting requirements	N/A	–
<b>Patient Experience of Care Survey Attestation</b> Attesting to successful administration of In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH CAHPS) survey	N/A	–
<b>Mineral Metabolism Monitoring Attestation</b> Attesting to measuring calcium and phosphorus serum levels of patients at least once per month	10	10%
<b>Total Performance Score</b>	<b>51</b>	<b>100%</b>

# Vascular Access Type – Fistula

#	Calculation Definition	Value
<b>Facility Rate Calculation for Performance Period</b> <i>Performance Period: All of calendar year 2012</i>		
6a	Does the facility meet the required case minimum for the sub-measure? <i>If no, the measure will not be calculated (skip to Table 7).</i>	Yes
6b	Number of patient-months with AV fistula used for last treatment of the month	250
6c	Total number of patient-months included in calculation	320
6d	<b>Facility Performance Rate:</b> Divide 6b by 6c and round Percent of patient-months receiving treatment with AV fistula	78%
<b>Facility Baseline Calculation (Improvement Threshold)</b> <i>Baseline Period: July 1, 2010 – June 30, 2011</i>		
6e	Number of patient-months with AV fistula used for last treatment of the month	220
6f	Total number of patient-months included in calculation	290
6g	<b>Facility Baseline Rate:</b> Divide 6e by 6f and round Percent of patient-months receiving treatment with fistula	76%
<b>National Achievement Threshold and Benchmark</b>		
6h	<b>Achievement Threshold</b>	46%
6i	<b>Benchmark</b>	74%
<b>Facility Performance Measure Score Calculation</b>		
6j	Does the Facility Performance Rate meet or exceed the Benchmark? <i>Is 6d equal to or greater than 6i?</i> <i>If Yes, 10 points awarded for Achievement (skip to 6m and skip Improvement Score Calculation).</i> <i>If No, proceed to 6k.</i>	Yes

#	Calculation Definition	Value
<b>Achievement Score Calculation</b>		
6k	Does the Facility Performance Rate fall below the Achievement Threshold? <i>Is 6d less than 6h?</i> <i>If Yes, 0 points awarded for Achievement (skip to 6m).</i> <i>If No, proceed to 6l.</i>	n/a
6l	<b>Achievement Score Calculation</b> <i>Calculate <math>9 \times [(6d - 6h) / (6i - 6h)] + 0.5</math>, then round.</i>	n/a
6m	<b>Achievement Score (from 6j, 6k, or 6l)</b>	10
<b>Improvement Score Calculation</b>		
6n	Does the Facility Performance Rate fall below the Facility Baseline Rate, and/or does the Facility Baseline Rate equal the Benchmark? <i>Is 6d less than 6g, and/or 6i equal to 6g?</i> <i>If Yes to either, 0 points awarded for Improvement (skip to 6p).</i> <i>If No to both, proceed to 6o.</i>	n/a
6o	<b>Improvement Calculation</b> <i>Calculate <math>10 \times [(6d - 6g) / (6i - 6g)] - 0.5</math>, then round.</i>	n/a
6p	<b>Improvement Score (from 6n or 6o)</b>	n/a
<b>Performance Sub-Measure Score</b>		
6q	<b>Performance Score Calculation Applied</b> Assign the higher of Achievement (6m) or Improvement (6n).	Achievement
6r	<b>Performance Sub-Measure Score</b>	10

# Vascular Access Type – Catheter

#	Calculation Definition	Value
<b>Facility Rate Calculation for Performance Period</b> <i>Performance Period: All of calendar year 2012</i>		
7a	Does the facility meet the required case minimum for the sub-measure? <i>If no, the measure will not be calculated (skip to Table 8).</i>	Yes
7b	Number of patient-months with catheter in use for at least 90 days	70
7c	Total number of patient-months included in calculation	320
7d	<b>Facility Performance Rate:</b> Divide 7b by 7c and round Percent of patient-months with catheter in use for at least 90 days	<b>22%</b>
<b>Facility Baseline Calculation (Improvement Threshold)</b> <i>Baseline Period: July 1, 2010 – June 30, 2011</i>		
7e	Number of patient-months with catheter in use for at least 90 days	70
7f	Total number of patient-months included in calculation	290
7g	<b>Facility Baseline Rate:</b> Divide 7e by 7f and round Percent of patient-months with catheter in use for at least 90 days	<b>24%</b>
<b>National Achievement Threshold and Benchmark</b>		
7h	<b>Achievement Threshold</b>	24%
7i	<b>Benchmark</b>	5%
<b>Facility Performance Measure Score Calculation</b>		
7j	Does the Facility Performance Rate meet or fall below the Benchmark? <i>Is 7d equal to or less than 7i?</i> <i>If Yes, 10 points awarded for Achievement (skip to 7m and skip Improvement Score Calculation).</i> <i>If No, proceed to 7k.</i>	No

#	Calculation Definition	Value
<b>Achievement Score Calculation</b>		
7k	Does the Facility Performance Rate exceed the Achievement Threshold? <i>Is 7d greater than 7h?</i> <i>If Yes, 0 points awarded for Achievement (skip to 7m).</i> <i>If No, proceed to 7l.</i>	No
7l	<b>Achievement Score Calculation</b> <i>Calculate <math>9 \times [(7d - 7h) / (7i - 7h)] + 0.5</math>, then round.</i>	$9 \times [(22 - 24) / (5 - 24)] + 0.5$
7m	<b>Achievement Score (from 7j, 7k, or 7l)</b>	<b>1</b>
<b>Improvement Score Calculation</b>		
7n	Does the Facility Performance Rate exceed the Facility Baseline Rate, and/or does the Facility Baseline Rate equal the Benchmark? <i>Is 7d greater than 7g, and/or 7i equal to 7g?</i> <i>If Yes to either, 0 points awarded for Improvement (skip to 7p).</i> <i>If No to both, proceed to 7o.</i>	No
7o	<b>Improvement Calculation</b> <i>Calculate <math>10 \times [(7d - 7g) / (7i - 7g)] - 0.5</math>, then round</i>	$10 \times [(22 - 24) / (5 - 24)] - 0.5$
7p	<b>Improvement Score (from 7n or 7o)</b>	<b>1</b>
<b>Performance Sub-Measure Score</b>		
7q	<b>Performance Score Calculation Applied</b> <i>Assign the higher of Achievement (7m) or Improvement (7p).</i>	Achievement
7r	<b>Performance Sub-Measure Score</b>	<b>1</b>

# Vascular Access Type – Combined Score

#	Calculation Definition	Value
<b>Performance Measure Score Calculation</b>		
8a	AV Fistula Sub-Measure Score <i>(from 6r)</i>	10
8b	Catheter Sub-Measure Score <i>(from 7r)</i>	1
8c	Average of Sub-Measure Scores <i>If 6r equals No Score Calculated, enter the value for 8b. If 7r equals No Score Calculated, enter the value for 8a. If neither 6r nor 7r equals No Score Calculated, then add 8a and 8b, divide the sum by 2, and round.</i>	6
8d	<b>Performance Measure Score (from 8c)</b>	<b>6</b>

# Mineral Metabolism Reporting

#	Calculation Definition	Value
<b>Mineral Metabolism Monitoring Attestation for 2012</b>		
11a	<p>Did the facility attest to measuring serum calcium and phosphorus levels for at least 96% of eligible Medicare patients (or, for facilities treating fewer than 11 eligible Medicare patients, “all but one” eligible patients) on a monthly basis throughout the performance period?</p> <p><i>If No, 0 points may be awarded (proceed to 11b).</i></p> <p><i>If Yes, 10 points awarded (skip to 11c).</i></p>	Yes
11b	<p>Is the facility CMS certification date after June 30, 2012?</p> <p><i>If Yes, measure is N/A unless 10 points were given in 11a.</i></p> <p><i>If No, the facility is awarded points from 11a.</i></p>	No
11c	<b>Performance Measure Score</b>	<b>10</b>



# Measure Weighting

#	Calculation Definition	Value
<b>Overall Measure Category Weighting</b>		
12a	Number of clinical measures with scores calculated <i>Count numerical scores from 4q, 5q, and 8d.</i>	2
12b	Number of reporting measures with scores calculated <i>Count numerical scores from 9e, 10d, and 11c.</i>	1
12c	Overall weight for clinical measures <i>Compare 12a to Table 3.</i>	90%
12d	Overall weight for reporting measures <i>Compare 12b to Table 3.</i>	10%
<b>Clinical Measures Weight Calculation</b>		
12e	Weight applied to each of the clinical measure scores <i>Divide 12c by 12a.</i>	45%
<b>Reporting Measures Weight Calculation</b>		
12f	Weight applied to each of the reporting measure scores <i>Divide 12d by 12b.</i>	10%

# Performance Score Calculation

#	Calculation Definition	Value
<b>Measure Weights</b>		
13a	Relative weight for each clinical measure (from 12e)	45%
13b	Relative weight for each reporting measure (from 12f)	10%
<b>Weighted Score Calculations: Clinical Measures</b>		
<b>Anemia Management</b>		
13c	Measure score (from 4q)	3
13d	Weighted measure score (multiply 13c by 13a)	1.35
<b>Dialysis Adequacy</b>		
13e	Measure score (from 5q)	n/a
13f	Weighted measure score (multiply 13e by 13a)	n/a
<b>Vascular Access Type</b>		
13g	Measure score (from 8d)	6
13h	Weighted measure score (multiply 13g by 13a)	2.7

#	Calculation Definition	Value
<b>Weighted Score Calculations: Reporting Measures</b>		
<b>NHSN Dialysis Event Reporting</b>		
13i	Measure score (from 9e)	n/a
13j	Weighted measure score (multiply 13i by 13b)	n/a
<b>Patient Experience of Care Survey Attestation</b>		
13k	Measure score (from 10d)	n/a
13l	Weighted measure score (multiply 13k by 13b)	n/a
<b>Mineral Metabolism Monitoring Attestation</b>		
13m	Measure score (from 11c)	10
13n	Weighted measure score (multiply 13m by 13b)	1
<b>Total Performance Score</b>		
13o	Sum of weighted measure scores Add 13d + 13f + 13h + 13j + 13l + 13n	5.05
13p	Scale weighted score to 0 – 100 scale Multiply 13o by 10, then round.	51
13q	<b>Total Performance Score (from 13p)</b>	<b>51</b>
13r	<b>Payment reduction at this facility (compare 13q to Table 2)</b>	<b>0.5% Reduction</b>

# Preview Period Overview

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Presenter:  
**Anita Segar**

# Preview Period: Overview and Timeframe

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- **CMS allows facilities to preview their PY 2014 performance scores prior to publicly posting those scores**
  - Facilities will access their Preview PSR via [DialysisReports.org](http://DialysisReports.org)
- **Preview PSRs were posted on July 29, 2013**
- **The Preview Period ends August 29, 2013, at 5:00 p.m. (EDT)**
  - During this timeframe, facilities will be able to ask clarification questions and/or submit a **single formal inquiry** explaining why the facility believes there was an error in calculation
  - All submissions must be made through [DialysisReports.org](http://DialysisReports.org).

# Clarification Questions

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- **Purpose: Ensure that facilities completely understand how their scores were calculated**
- **Only authenticated users with permissions from the Master Account Holder (MAH) may submit clarification questions**
- **CMS will respond to formal inquiries and clarification questions via Arbor Research**

# Formal Inquiry

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- **Purpose: Provide CMS with an explanation of why the facility believes an error in calculation has occurred**
  - This typically occurs after submitting a clarification question and/or requesting a patient list
- **Each facility may submit only ONE formal inquiry at [DialysisReports.org](http://DialysisReports.org)**
- **Formal inquiries must be submitted before 5:00 p.m. (EDT) on August 29, 2013**
- Only the authenticated user assigned permission from the MAH may submit the formal inquiry on behalf of the facility
- Facilities must indicate approval of the Medical Director/Facility Administrator when submitting the formal inquiry
- Once a formal inquiry has been submitted, it may not be recalled

# User Accounts and PSR Access

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- All facilities need to ensure that they have the proper credentials to access [DialysisReports.org](http://DialysisReports.org) to download and view their Preview PSR
- All facility passwords were reset on June 28, 2013
- Facility MAHs:
  - Should test new passwords prior to July 29
  - Can set individual user accounts with user-specific permissions
  - Should consult the Frequently Asked Questions (FAQ) on [DialysisReports.org](http://DialysisReports.org)
- ESRD Networks:
  - Were provided new passwords through the facility MAH
  - Received detailed instructions (given to the MAH) about how to access their account and download PSRs
  - Will have access to their facilities' preview scores
  - Can assist facilities with PSR issues or questions during the Preview Period

# DFR Website System Assistance

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- Facilities may submit requests for help with log-ins, forgotten passwords, setting up user access, and other technical problems to [DialysisReports.org](https://DialysisReports.org)
- Facilities unable to log in to [DialysisReports.org](https://DialysisReports.org) may:
  - Email [support@DialysisReports.org](mailto:support@DialysisReports.org)
  - Call toll-free: 877-665-1680, Mon-Fri, 9:00 a.m. – 5:00 p.m. (EDT)



# DialysisReports.org Walk-through

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Presenter:

**Claudia Dahlerus**

# DialysisReports.org Home Page

- This website provides a general overview of the various reports as well as methodology, measure specifications, Frequently Asked Questions, and contact information
- The Secure Log-In icon (with the blue lock) is available on the right side of the screen

**DIALYSISREPORTS.ORG**

Home Methodology ESRD Measures FAQ Contact Us

**Dialysis Facility Reports, State and Region Profiles, and the Quality Incentive Program.**

The Dialysis Facility Reports (DFRs) and State and Region Profiles are created annually under contract to the Centers for Medicare & Medicaid Services (CMS) to provide dialysis facilities, state surveyors, and regions with valuable information on patient characteristics, treatment patterns, hospitalization, mortality, and transplantation patterns in their facilities.

The end-stage renal disease (ESRD) Quality Incentive Program (QIP) is the first Medicare program that links provider or facility payments to performance, based on outcomes assessed through specific quality measures. These measures are important indicators of patient outcomes and at the core of medical management of ESRD patients.

**What information is included in the DFRs?**

The Dialysis Facility Reports include information about directly actionable practice patterns such as dose of dialysis, vascular access, and anemia management, as well as patient outcomes (such as mortality, hospitalization, and transplantation) that can be used to inform and motivate reviews of practices. The information in the report facilitates comparisons of facility patient characteristics, treatment patterns, and outcomes to local and national averages. Such comparisons help to evaluate patient outcomes and to account for important differences in the patient mix - including age, sex, race, and patients' diabetic status - which in turn enhances each facility's understanding of the clinical experience relative to other facilities in the state, Network, and nation.

**What are the DFRs used for?**

The reports are intended to be used by facilities in their quality improvement efforts. In addition, selected measures are publicly reported on the [Dialysis Facility Compare website](#) allowing dialysis patients to review and compare characteristics and quality information on dialysis facilities in the United States. State surveyors use data reported in the Dialysis Facility Reports to make decisions on which

**FOR DIALYSIS FACILITIES AND STATE SURVEYORS**

**Secure Log-In**

**Important Dates**

**7/15/2012**  
Facility Reports are posted

**7/15/2012 - 8/15/2012**  
Facility comment period

**8/31/2012**  
State and Region Profiles are posted

For a detailed list of dates, [click here](#).

**New for the Quality Incentive Program**

New preview performance score reports (PSRs) will be posted on July 15, 2012. Facilities will be able to submit clarification questions and one formal inquiry regarding this report during the preview period (July 15 through August 15).

**New for the Dialysis Facility Report**

The 2012 Dialysis Facility Reports (DFRs) will be posted on Sunday, July 15, 2012. Please note that the DFC preview has been moved from the DFR into your new DFC Report. Also, the summaries reported in the 2011 Supplement to the DFR have been incorporated into the DFR. A

**State and Region Profiles**

State and Region Profiles are provided to the state survey agencies and CMS regional offices annually. They include maps and tables comparing state or region information as well as the Dialysis Facility Reports for every facility in the state or region. The State and Region Dialysis Profiles are available only to the corresponding State Survey Agency or CMS Regional Office. Authorized users can access the Profiles by logging into the secure site.

**What is the Quality Incentive Program (QIP)?**

# Log-In Types

---

- **There are two types of log-in accounts:**
  - **Master Account Holder**
    - Create and edit user accounts specific to a facility
    - Grant permissions to user accounts
  - **User Account (permission-based)**
    - View reports
    - Submit questions/comments and inquiries

# Log-In Page

- After clicking the Secure Log-in icon, two options appear:
  - View Reports
  - or
  - Create/Edit Users
- Log in to “Create/Edit Users” using MAH credentials
- Log in to “View Reports” using User Account credentials

**DIALYSISREPORTS.ORG**

Click on the appropriate login box below. Users that wish to view or inquire on reports will use the left login box. Master Account Holders that wish to manage user accounts will use the right box.

All user accounts were reset on 6/15/2012. If you are experiencing repeated problems with logging in, please contact your Master Account Holder to be sure that your account has been enabled properly.

**View Reports**      **Create/Edit Users**

Questions about logging in? Please click the help button below.

**Help**

You are accessing a U.S. Government information system, which includes: (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only. Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.

By using this information system, you understand and consent to the following:

- You have no reasonable expectation of privacy regarding any communication or data transiting or stored on this information system. At any time, and for any lawful Government purpose, the Government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.
- Any communication or data transiting or stored on this information system may be disclosed or used for any lawful Government purpose.

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# MAH Log-In

- To log into the master account, the MAH should:
  - Enter the six-digit facility ID number in the Username field
  - In the Password field, enter the master account password associated with that facility that was provided by the Network
  - Click the Log-In button

**DIALYSISREPORTS.ORG**

Click on the appropriate login box below. Users that wish to view or inquire on reports will use the left login box. Master Account Holders that wish to manage user accounts will use the right box.

All user accounts were reset on 6/15/2012. If you are experiencing repeated problems with logging in, please contact your Master Account Holder to be sure that your account has been enabled properly.

**View Reports**

**Master Login to Add or Remove Users**

Username:

Password:

[I need my login information](#)

Questions about logging in? Please click the help button below.

**Help**

You are accessing a U.S. Government information system, which includes: (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.

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- Any communication or data transiting or stored on this information system may be disclosed or used for any lawful Government purpose.

# MAH Landing Page

- Upon successful log-in to the master account, the MAH lands on the Create/Edit Users tab
- The MAH is able to view all established user accounts for a facility, including the “Enabled” status and permissions granted to each user
- It is the MAH’s responsibility to ensure that the appropriate users have access to their facility’s reports

**DIALYSISREPORTS.ORG**

Currently logged in as Master Account Holder (Facility user type) [Logout](#)

[Home](#) [Create/Edit Users](#) [View Reports](#)

You are logged in as the Master Account Holder for this facility.

This page will allow you to create or edit individual user accounts that can be used to view reports and submit questions or comments.

To view reports or submit comments, please click on the **View Reports** tab. If you are already logged in as an individual user, please click on the appropriate DFR, DFC or QIP tab for the reports you would like to view.

Master Account Holder is [redacted]  
[Edit Master Account Holder Contact Info](#)

**User Accounts for [redacted]**  
 Need to create or edit users for another facility? [Click Here](#)

[Create New User](#)

								--- Permissions for Facility [redacted] ---			
Edit	First Name	Last Name	Username	Enabled	Contact Role	Phone	Phone Ext	Can View DFR/DFC Report	Can Comment on DFR/DFC Report & Discuss PII/PHI	Can View QIP Reports	Can Submit QIP Inquiries & Discuss PII/PHI
<a href="#">Edit</a>	[redacted]	[redacted]	[redacted]	No	Head Nurse	[redacted]		No	No	No	No
<a href="#">Edit</a>	[redacted]	[redacted]	[redacted]	No		[redacted]		No	No	No	No
<a href="#">Edit</a>	[redacted]	[redacted]	[redacted]	Yes		[redacted]		Yes	Yes	Yes	No
<a href="#">Edit</a>	[redacted]	[redacted]	[redacted]	Yes		[redacted]		Yes	Yes	No	No
<a href="#">Edit</a>	[redacted]	[redacted]	[redacted]	Yes	Administrator	[redacted]		Yes	Yes	No	No

[Create New User](#)

▪ **Beginning June 28, all user permissions will be reset. MAHs will need to log in and enable user accounts as well as reassign permissions for this year’s Preview Period.**



# MAH Options

- Within the master account, the MAH can:
  - Create a new user
  - Edit an existing user
  - Change the MAH contact information
  - Log in to view reports with a separate user account

**DIALYSISREPORTS.ORG**

Currently logged in as Master Account Holder (Facility user type) [Logout](#)

Home Create/Edit Users **View Reports**

You are logged in as the Master Account Holder for this facility.

This page will allow you to create or edit individual user accounts that can be used to view reports and submit questions or comments.

To view reports or submit comments, please click on the **View Reports** tab. If you are already logged in as an individual user, please click on the appropriate DFR, DFC or QIP tab for the reports you would like to view.

Master Account Holder is [redacted]  
[Edit Master Account Holder Contact Info](#)

**User Accounts for [redacted]**  
 Need to create or edit users for another facility? [Click Here](#)

**Create New User**

User Accounts							--- Permissions for Facility [redacted] ---				
Edit	First Name	Last Name	Username	Enabled	Contact Role	Phone	Phone Ext	Can View DFR/DFC Report	Can Comment on DFR/DFC Report & Discuss PII/PHI	Can View QIP Reports	Can Submit QIP Inquiries & Discuss PII/PHI
<b>Edit</b>	[redacted]	[redacted]	[redacted]	No	Head Nurse	[redacted]		No	No	No	No
<b>Edit</b>	[redacted]	[redacted]	[redacted]	No		[redacted]		No	No	No	No
<b>Edit</b>	[redacted]	[redacted]	[redacted]	Yes		[redacted]		Yes	Yes	Yes	No
<b>Edit</b>	[redacted]	[redacted]	[redacted]	Yes		[redacted]		Yes	Yes	No	No
<b>Edit</b>	[redacted]	[redacted]	[redacted]	Yes	Administrator	[redacted]		Yes	Yes	No	No

**Create New User**

# MAH – Create New User

- To create a new user account, click the Create New User button. The Create New User dialog box appears.
- Enter user's name and contact information
- Check the boxes to establish the desired permissions:
  - Can View DFR Reports
  - Can Comment on DFR Reports and Discuss PII/PHI
  - Can View DFC Reports
  - Can Comment on DFC Reports and Discuss PII/PHI
  - Can View QIP PSR/PSC
  - Can Submit Formal QIP Inquiry/QIP Informal Question and Discuss PII/PHI
- Click Save to add the user

The screenshot shows a 'Create New User' dialog box with the following fields and options:

- Fields:** First Name\*, Last Name\*, Email Address (Username)\*, Contact Role (dropdown menu), Other Specify, Phone Number\* (with an Extension field).
- Permissions:**
  - DFR Permissions:** (Check all that apply)
    - Can View DFR Reports
    - Can Comment on DFR Reports and Discuss PII/PHI
  - DFC Permissions:** (Check all that apply)
    - Can View DFC Reports
    - Can Comment on DFC Reports and Discuss PII/PHI
  - QIP Permissions:** (Check all that apply)
    - Can View QIP PSR/PSC
    - Can Submit QIP Formal Inquiry/Clarification Question and Discuss PII/PHI (permission already assigned)
- Note:** The user's password will be automatically generated and sent to the email address above once this form is submitted.
- Buttons:** Save, Cancel

- **Note:** Facilities of dialysis organizations with corporate user accounts can follow these steps to add the corporate user account if they have done so previously



# MAH – Edit User

- The MAH can edit an existing user account at any time
  - This is where MAHs will reassign permissions to existing users for this year’s Preview Period
- From the Create/Edit Users tab, click the Edit button next to the desired user account in the table
- The “Edit This User” dialog box appears. Here the MAH can:
  - Change user contact information
  - Enable/disable the account
  - Reset password
  - Alter account permissions
- Click Save to update the User account

- Note: Facilities that have previously added the corporate user account of their dialysis organization can follow these steps to enable the corporate user account for this year

# Edit MAH Contact Information

- The current MAH for a facility is displayed in a box in the upper right corner of the Create/Edit Users tab
- To update the MAH information:
  - Click the “Edit Master Account Holder Contact Info” link
  - Update the form fields or  
Click the “Load From Existing Users” button and select a user from the drop-down list
  - Click Save to update the MAH information

The screenshot displays the 'DIALYSISREPORTS.ORG' website interface. At the top, it shows the user is logged in as a 'Master Account Holder' with a 'Facility user type'. Navigation buttons for 'Home', 'Create/Edit Users', and 'View Reports' are visible. The main section is titled 'Master Account Contact Information' and includes a note that the information is saved independently. A form contains fields for 'First Name\*', 'Last Name\*', 'Email Address (Username)\*', 'Phone Number\*' (with an 'Extension' sub-field), 'Street Address', 'City', 'State', and 'Zip Code'. A 'Save' button is located below the form. To the right, there is a 'Load From Existing Users' button and a corresponding dropdown menu. The footer contains administrative information and a copyright notice for 2012.

# MAH – User Account Dual Log-In (1 of 2)

- It is possible to be logged in as one MAH and one user at the same time using the View Reports tab within the master account
- The MAH does not need to log out of the master account in order to log into an individual user account

The screenshot shows the DialysisReports.org website interface. At the top, it says "DIALYSISREPORTS.ORG" and "Currently logged in as Master Account Holder (Facility user type)". There are navigation buttons for "Home", "Create/Edit Users", and "View Reports". Below this, a "View Reports" section contains a message: "You are currently logged in as the Master Account Holder for this facility. To view the Dialysis Facility Reports (DFR), Dialysis Facility Compare (DFC) Reports, or QIP reports, you must log in with a user account." A light blue callout box with a question mark icon contains the text: "But I'm already logged in! There are two types of logins: the Master Account Holder, and a User account. In order to view reports, you need to be logged in as a User. You do not need to log out of your Master Account in order to log in as a user - you can be logged in as one Master Account and one User at the same time." Below this, it says "Please select a User account from the list below (or create a new one if needed):" and shows a table with columns "Select", "First Name", "Last Name", and "Username". The table has three rows, each with a "Log In" button in the "Select" column. At the bottom, it says "Secure.DialysisReports.org is administered by: Arbor Research Collaborative for Health and the University of Michigan Kidney Epidemiology and Cost Center (KECC)." and "Copyright © 2012, Arbor Research Collaborative for Health. Privacy Policy".

# MAH – User Account Dual Log-In (2 of 2)

- Click the Log In button next to the appropriate user account from the table of users (limited to the facility associated with the currently active master account). The “User Login to View Reports” dialog box appears.
- Enter username (email address) and user account password
- Click the Log In button
- If the MAH does not find their user account in the list, return to the Create/Edit Users tab and create a new account

The screenshot shows the DIALYSISREPORTS.ORG website interface. At the top, it says 'Currently logged in as Master Account Holder' and 'Facility user type'. There are navigation buttons for 'Home', 'Create/Edit Users', and 'View Reports'. Below this is a 'View Reports' section with a message: 'You are currently logged in as the Master Account Holder for this facility. To view the Dialysis Facility Reports (DFR), Dialysis Facility Compare (DFC) Reports, or QIP reports, you must log in with a user account.'

A dialog box titled 'User Login to View Reports' is overlaid on the page. It contains fields for 'Username:' and 'Password:', a 'Log In' button, and a link for 'Forgot Your Password?'. A 'Cancel' button is also present at the bottom of the dialog.

Below the dialog, there is a table with columns: 'First Name', 'Last Name', and 'Username'. Each row in the table has a 'Log In' button next to it. The first 'Log In' button is highlighted with a red box.

# User Log-In from Home Page (1 of 2)

- After clicking the Secure Log-in icon, individual facility users click “View Reports”
- The Username is the email address used to establish the user account
- The user must have been authorized by the MAH to be able to access reports

**DIALYSISREPORTS.ORG**

Click on the appropriate login box below. Users that wish to view or inquire on reports will use the left login box. Master Account Holders that wish to manage user accounts will use the right box.

**All user accounts were reset on 6/15/2012.** If you are experiencing repeated problems with logging in, please contact your Master Account Holder to be sure that your account has been enabled properly.

**User Login to View Reports**

Email:

Password:

[Forgot Your Password?](#)

**Create/Edit Users**

**Help**

Questions about logging in? Please click the help button below.

You are accessing a U.S. Government information system, which includes: (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.

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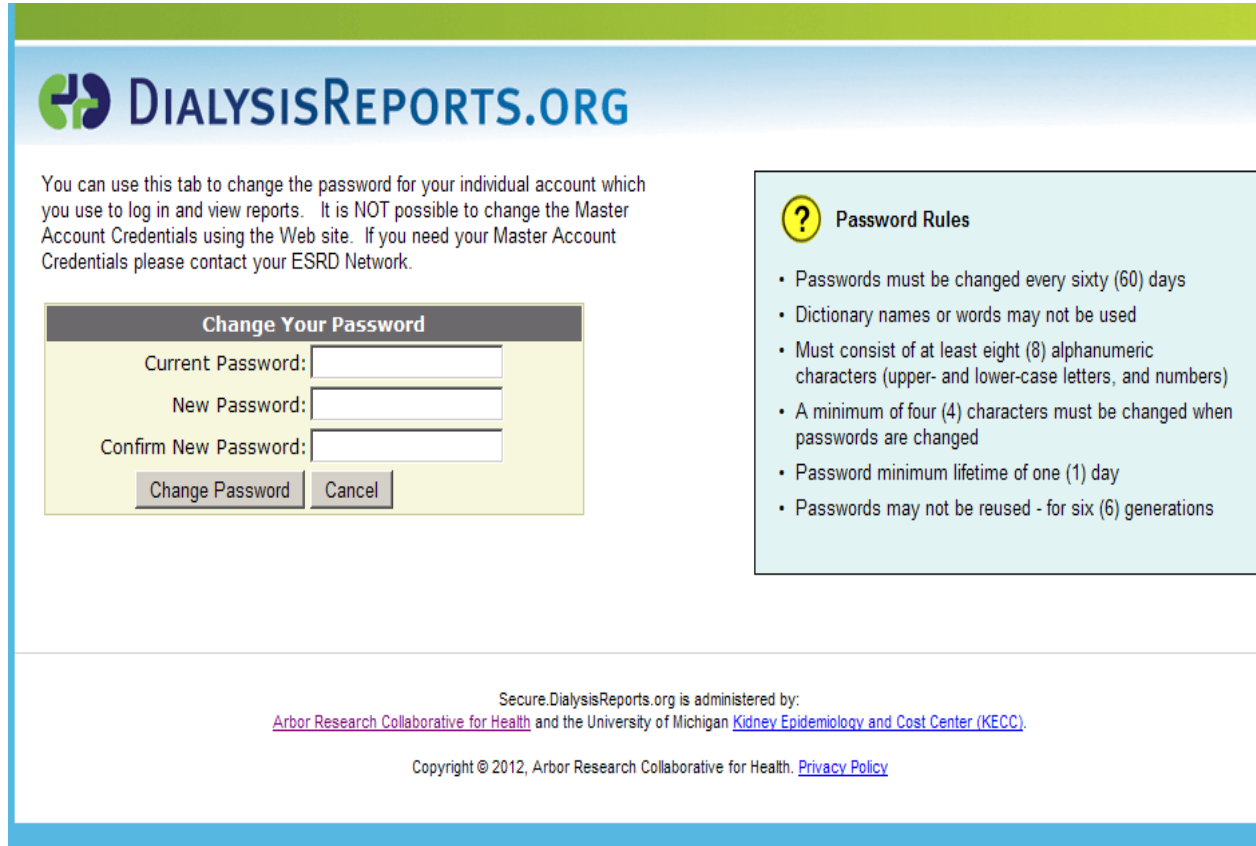
- You have no reasonable expectation of privacy regarding any communication or data transiting or stored on this information system. At any time, and for any lawful Government purpose, the Government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.
- Any communication or data transiting or stored on this information system may be disclosed or used for any lawful Government purpose.

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# User Log-In from Home Page (2 of 2)

- When logging into View Reports for the first time, the user will enter the **temporary password** received in the auto-generated email received upon account creation by the MAH
- Once the user is logged in, the system will prompt the user to change their password
- Please note the **password rules** in the box on the right side of the screen



**DIALYSISREPORTS.ORG**

You can use this tab to change the password for your individual account which you use to log in and view reports. It is NOT possible to change the Master Account Credentials using the Web site. If you need your Master Account Credentials please contact your ESRD Network.

**Change Your Password**

Current Password:

New Password:

Confirm New Password:

**? Password Rules**

- Passwords must be changed every sixty (60) days
- Dictionary names or words may not be used
- Must consist of at least eight (8) alphanumeric characters (upper- and lower-case letters, and numbers)
- A minimum of four (4) characters must be changed when passwords are changed
- Password minimum lifetime of one (1) day
- Passwords may not be reused - for six (6) generations

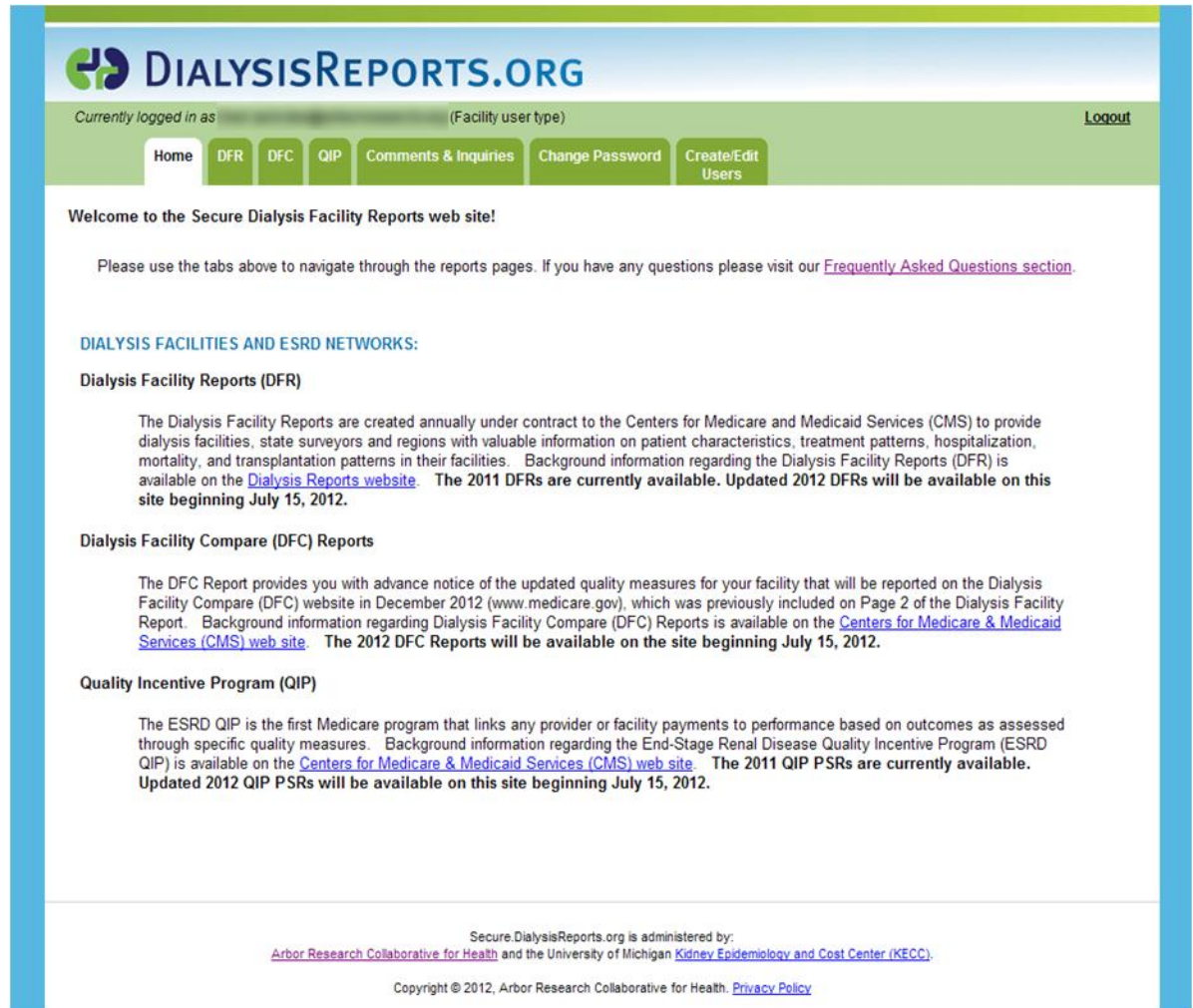
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# User Landing Page

- Upon successful log-in, the user lands on the Home tab, which provides basic information on:
  - Dialysis Facility Reports (DFR)
  - Dialysis Facility Compare (DFC) Reports
  - Quality Incentive Program (QIP)



**DIALYSISREPORTS.ORG**

Currently logged in as (Facility user type) [Logout](#)

[Home](#) [DFR](#) [DFC](#) [QIP](#) [Comments & Inquiries](#) [Change Password](#) [Create/Edit Users](#)

Welcome to the Secure Dialysis Facility Reports web site!

Please use the tabs above to navigate through the reports pages. If you have any questions please visit our [Frequently Asked Questions section](#).

**DIALYSIS FACILITIES AND ESRD NETWORKS:**

**Dialysis Facility Reports (DFR)**

The Dialysis Facility Reports are created annually under contract to the Centers for Medicare and Medicaid Services (CMS) to provide dialysis facilities, state surveyors and regions with valuable information on patient characteristics, treatment patterns, hospitalization, mortality, and transplantation patterns in their facilities. Background information regarding the Dialysis Facility Reports (DFR) is available on the [Dialysis Reports website](#). The 2011 DFRs are currently available. Updated 2012 DFRs will be available on this site beginning July 15, 2012.

**Dialysis Facility Compare (DFC) Reports**

The DFC Report provides you with advance notice of the updated quality measures for your facility that will be reported on the Dialysis Facility Compare (DFC) website in December 2012 ([www.medicare.gov](#)), which was previously included on Page 2 of the Dialysis Facility Report. Background information regarding Dialysis Facility Compare (DFC) Reports is available on the [Centers for Medicare & Medicaid Services \(CMS\) web site](#). The 2012 DFC Reports will be available on the site beginning July 15, 2012.

**Quality Incentive Program (QIP)**

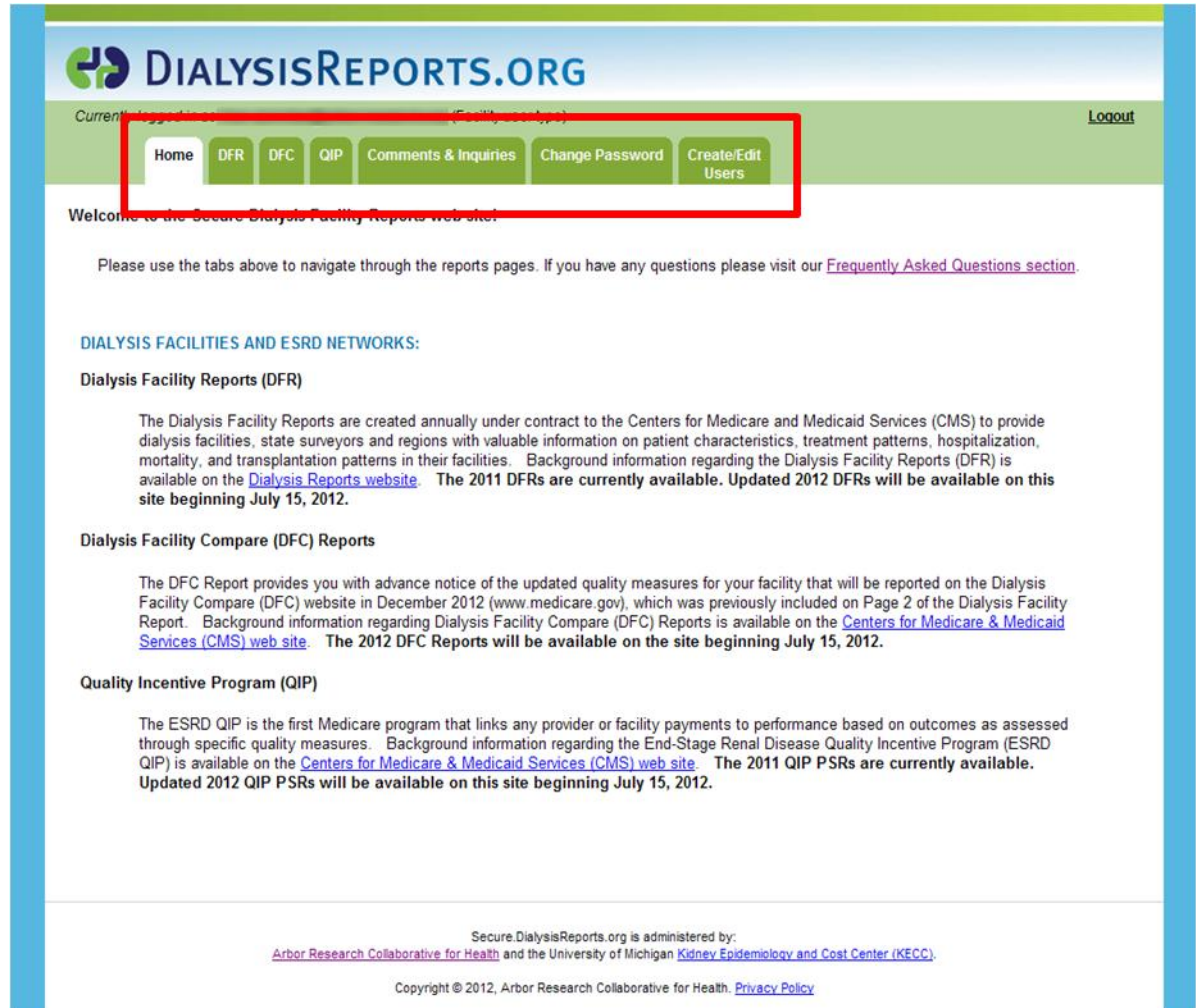
The ESRD QIP is the first Medicare program that links any provider or facility payments to performance based on outcomes as assessed through specific quality measures. Background information regarding the End-Stage Renal Disease Quality Incentive Program (ESRD QIP) is available on the [Centers for Medicare & Medicaid Services \(CMS\) web site](#). The 2011 QIP PSRs are currently available. Updated 2012 QIP PSRs will be available on this site beginning July 15, 2012.

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# User Permissions

- Facility users will see seven tabs:
  - Home
  - DFR
  - DFC
  - QIP
  - Comments & Inquiries
  - Change Password
  - Create/Edit Users



The screenshot shows the DialysisReports.org website interface. At the top, the logo and name "DIALYSISREPORTS.ORG" are displayed. Below the logo, the text "Currently logged in as: (Facility user type)" is visible. A red box highlights a navigation menu with the following tabs: Home, DFR, DFC, QIP, Comments & Inquiries, Change Password, and Create/Edit Users. The "Logout" link is located in the top right corner. The main content area includes a welcome message, a navigation instruction, and sections for "DIALYSIS FACILITIES AND ESRD NETWORKS:", "Dialysis Facility Reports (DFR)", "Dialysis Facility Compare (DFC) Reports", and "Quality Incentive Program (QIP)".

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# User – View/Download Reports

- The three reports tabs (DFR, DFC, QIP) show a table of reports the user is authorized to view, sorted by provider number
- Download a report by clicking the blue link in the “View Reports (PDF)” column
- Users can download reports for multiple facilities at one time
  - Using the checkboxes in the left column and clicking the “Download Report Selected in Table Above” button will start the download process for multiple reports

The screenshot shows the DIALYSISREPORTS.ORG website interface. At the top, there is a navigation bar with tabs for Home, DFR, DFC, QIP, Comments & Inquiries, Change Password, and Create/Edit Users. The DFR tab is currently selected. Below the navigation bar, there is a section titled "Dialysis Facility Reports" with a message: "You are currently viewing the 2012 Dialysis Facility Reports (DFRs). The comment period is now closed." To the right of this message are two informational boxes: "Where Is My Facility?" and "Why Are There No Actions Listed?". Below the message is a box containing information about downloading data as XLSX or ZIP files, and a link to download a data dictionary PDF file. At the bottom of the screenshot is a table with 12 records. The table has columns for Provider No., Facility Name, State, View Reports (PDF), and Action. The checkboxes in the Provider No. column and the "View Reports (PDF)" column are highlighted with red boxes. The "View Reports (PDF)" column contains links for "2012 DFR" and "Where is my report?". The "Action" column contains links for "Comment for State Surveyors".

Provider No.	Facility Name	State	View Reports (PDF)	Action
<input type="checkbox"/>		AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
<input type="checkbox"/>		AL	<a href="#">Where is my report?</a>	
<input type="checkbox"/>		AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
<input type="checkbox"/>		AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
<input type="checkbox"/>		AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
<input type="checkbox"/>		AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
<input type="checkbox"/>		AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
<input type="checkbox"/>		AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
<input type="checkbox"/>		AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
<input type="checkbox"/>		MD	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
<input type="checkbox"/>		TX	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>

# User – DFR Tab

- The DFR tab is where users can download DFRs that they are authorized to view
- Clicking on the blue links in the “Action” column directs the user to the **Comments & Inquiries** tab
  - The DFC and QIP tabs also have an Action column
- If no actions appear in the Action column, contact the MAH regarding permissions
- Links are available to download DFR summary data (either as an Excel workbook or a zipped CSV file) for all facilities that the user is authorized to view, as well as a data dictionary

**DIALYSISREPORTS.ORG**

Currently logged in as [User Name] Logout

Home **DFR** DFC QIP Comments & Inquiries Change Password Create/Edit Users

### Dialysis Facility Reports

You are currently viewing the 2012 Dialysis Facility Reports (DFRs). The comment period is now closed.

In addition to the individual DFR reports available below, DFR Summary data is also available as an Excel workbook or a zipped set of CSV files for the facilities in the table below.

Download data as: [XLSX file](#) [ZIP file](#)

Download data dictionary: [Data Dictionary PDF file](#)

Large amounts of data may take a few minutes to download. Please be patient.

**Where Is My Facility?**

If your facility is not listed below, it is possible that your facility does not have a DFR, **or** your account does not have permission to view your facility's report. If you think this is true, speak to your Master Account Holder.

**Why Are There No Actions Listed?**

If there are no actions listed for your facility, speak to your Master Account Holder to get permission to make comments.

Provider No.	Facility Name	State	View Reports (PDF)	Action
[Redacted]	[Redacted]	AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
[Redacted]	[Redacted]	AL	<a href="#">Where is my report?</a>	<a href="#">Comment for State Surveyors</a>
[Redacted]	[Redacted]	AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
[Redacted]	[Redacted]	AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
[Redacted]	[Redacted]	AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
[Redacted]	[Redacted]	AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
[Redacted]	[Redacted]	AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
[Redacted]	[Redacted]	AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
[Redacted]	[Redacted]	AL	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
[Redacted]	[Redacted]	MD	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>
[Redacted]	[Redacted]	TX	<a href="#">2012 DFR</a>	<a href="#">Comment for State Surveyors</a>





# User – QIP Tab

- The QIP tab is where users can download Performance Score Reports (PSRs) and Performance Score Certificates (PSCs) that they are authorized to view
- Links are available to download Performance Score Summary data (either as an Excel workbook or a zipped CSV file) for all facilities that the user is authorized to view

**Quality Incentive Program (QIP) Reports**

You are currently viewing the Payment Year 2013 Final Performance Score Reports (PSRs) and Performance Score Certificates (PSCs). The inquiry period is closed. Per CMS requirements, each facility is responsible for downloading, printing, and posting their Performance Score Certificate within 5 business days of being made available by CMS.

**Where Is My Facility?**  
If your facility is not listed below, it is possible that your facility does not have QIP reports, **or** your account does not have permission to view your facility's report. If you think this is true, speak to your Master Account Holder.

**Why Are There No Actions Listed?**  
If your facility is listed but there are no actions shown for it, it is possible that your account does not have permissions to comment (contact your Master Account Holder to change permissions) **or** the Formal Inquiry has already been submitted for your facility.

In addition to the individual reports available below, Performance Score Summary data is also available as an Excel workbook or a zipped CSV file for the facilities in the table below. This data provides a summary of the components making up the Performance Score for the facility/facilities in the table below.

Download data as: [XLSX file](#) [ZIP file](#)

Large amounts of data may take a few minutes to download. Please be patient.

Record 1 - 12 of 12	Provider No. ▲	Facility Name	State	View Reports (PDF)
<input type="checkbox"/>			AL	<a href="#">PY 2013 PSR</a> <a href="#">PY 2013 PSC</a>
<input type="checkbox"/>			AL	<a href="#">PY 2013 PSR</a> <a href="#">PY 2013 PSC</a>
<input type="checkbox"/>			AL	<a href="#">PY 2013 PSR</a> <a href="#">PY 2013 PSC</a>
<input type="checkbox"/>			AL	<a href="#">PY 2013 PSR</a> <a href="#">PY 2013 PSC</a>
<input type="checkbox"/>			AL	<a href="#">PY 2013 PSR</a> <a href="#">PY 2013 PSC</a>
<input type="checkbox"/>			AL	<a href="#">PY 2013 PSR</a> <a href="#">PY 2013 PSC</a>
<input type="checkbox"/>			AL	<a href="#">PY 2013 PSR</a> <a href="#">PY 2013 PSC</a>
<input type="checkbox"/>			AL	<a href="#">PY 2013 PSR</a> <a href="#">PY 2013 PSC</a>
<input type="checkbox"/>			AL	<a href="#">PY 2013 PSR</a> <a href="#">PY 2013 PSC</a>
<input type="checkbox"/>			AL	<a href="#">PY 2013 PSR</a> <a href="#">PY 2013 PSC</a>
<input type="checkbox"/>			AL	<a href="#">PY 2013 PSR</a> <a href="#">PY 2013 PSC</a>

# User – Comments & Inquiries Tab (1 of 3)

- Similar to last year, users select from a drop-down list the facility for which they would like to submit a comment / question or QIP Formal Inquiry
- After the facility is selected, a list of additional options will become available
  - Options are based on permissions granted by the MAH

**DIALYSISREPORTS.ORG**

Currently logged in as User (Facility user type) [Logout](#)

[Home](#) [DFR](#) [DFC](#) [QIP](#) **Comments & Inquiries** [Change Password](#) [Create/Edit Users](#)

**Comments & Inquiries**

Please select facility:

Please select an option from the list box below:

- QIP: Question / Comment about my QIP score
- QIP: Request Patient Level Data
- DFR: Question / Comment about my DFR for UM/KECC
- DFC: Comments on DFC for CMS
- DFR: Comments on DFR for State Surveyor
- General Help / Comments / Suggestions

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# User – Comments & Inquiries Tab (2 of 3)

- For example, if the user was not granted the permission “Can Submit Formal QIP Inquiry/QIP Informal Question and Discuss PII/PHI,” they will not see the following options:
  - QIP: Question/ Comment about my QIP score
  - QIP: Submit a Formal QIP Inquiry to CMS
  - QIP: Request Patient Level Data

**DIALYSISREPORTS.ORG**

Currently logged in as \_\_\_\_\_ (Facility user type) [Logout](#)

[Home](#) [DFR](#) [DFC](#) [QIP](#) [Comments & Inquiries](#) [Change Password](#) [Create/Edit Users](#)

### Comments & Inquiries

Please select facility:

Please select an option from the list box below:

- DFR: Question / Comment about my DFR for UM/KECC
- DFC: Comments on DFC for CMS
- DFR: Comments on DFR for State Surveyor
- General Help / Comments / Suggestions

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# User – Comments & Inquiries Tab (3 of 3)

- After clicking on an option, the user can type the comment, question, or formal inquiry into the field(s) provided
- Note the timeout counter above the comment field(s). Click the “Request more time” button to reset.
- To receive an email copy of the question/comment or formal inquiry, check the “Email a copy to me” box below the comment field(s)
- Click the Submit button

DIALYSISREPORTS.ORG

Currently logged in as User (Facility user type) Logout

Home DFR DFC QIP Comments & Inquiries Change Password Create/Edit Users

Comments & Inquiries

Please select facility: [Dropdown]

Please select an option from the list box below:

- DFR: Question / Comment about my DFR for UM/KECC
- DFC: Comments on DFC for CMS
- DFR: Comments on DFR for State Surveyor
- General Help / Comments / Suggestions

Remaining time before timeout (MM:SS): 29:59 Request more time

Questions / Comments about DFR to UM-KECC

Please use this box for any questions or comments about your facility's 2012 DFR statistics or methods. The UM-KECC will respond to these comments. The comments received from this section will not appear on the DFC website and will not be sent to the state surveyors.

Comments on this report (including the supplemental report) and suggestions for future reports.

Email a copy to me

Do not include Personally Identifiable Information (PII) or Protected Health Information (PHI) when submitting inquiries to DialysisReports.org.

Submit

- Note: Do not include Personally Identifiable Information (PII) or Protected Health Information (PHI) when submitting questions or inquiries to DialysisReports.org

# User – Change Password Tab

- When logged in to the individual user account to view reports, users can change their password on this tab
- Type the current password into the designated field, type in the new password, type the new password again to confirm, and click the Change Password button
- Please note the password rules in the box on the right side of the screen

**DIALYSISREPORTS.ORG**

Currently logged in as User (Facility user type) [Logout](#)

[Home](#) [DFR](#) [DFC](#) [QIP](#) [Comments & Inquiries](#) **Change Password** [Create/Edit Users](#)

You can use this tab to change the password for your individual account which you use to log in and view reports. It is NOT possible to change the Master Account Credentials using the Web site. If you need your Master Account Credentials please contact your ESRD Network.

**Change Your Password**

Current Password:

New Password:

Confirm New Password:

**? Password Rules**

- Passwords must be changed every sixty (60) days
- Dictionary names or words may not be used
- Must consist of at least eight (8) alphanumeric characters (upper- and lower-case letters, and numbers)
- A minimum of four (4) characters must be changed when passwords are changed
- Password minimum lifetime of one (1) day
- Passwords may not be reused - for six (6) generations

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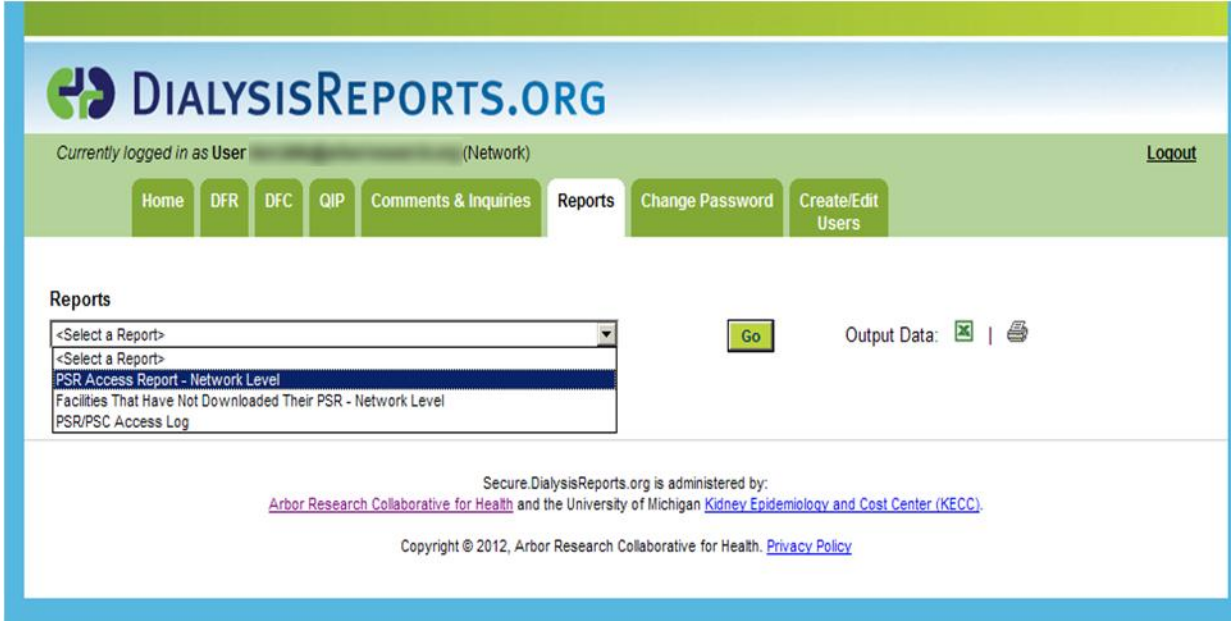
# User – Master Account Dual Log-In

- It is possible to be logged in as one user and one MAH at the same time using the Create/Edit Users tab within the individual user account used to view reports
- The user does not need to log out of their individual user account in order to log into a Master Account
- MAH credentials are required

The screenshot shows the DIALYSISREPORTS.ORG website interface. At the top, the user is logged in as 'User' (Facility user type). The 'Create/Edit Users' tab is highlighted with a red box. Below the navigation bar, a message states: 'You are currently logged in with a User account. To create or edit users, you must log in with a Master Account Holder account.' A callout box explains that users can be logged in as both a Master Account Holder and a User simultaneously. A login form for Master Accounts is also highlighted with a red box, containing fields for Username and Password, and a 'Log In' button. A link for 'I need my login information' is provided below the form. The footer includes administrative information and a copyright notice for 2012.

# Network User – Reports Tab

- An additional tab called Reports is available to Network users
- The following Network-specific reports will be available to Network users on this tab:
  - Dialysis Reports Website Account Updates
  - PSR Access Report
  - Certificate Access Report
  - PSR/PSC Access Log
- These reports will be generated using real-time data



The screenshot displays the DIALYSISREPORTS.ORG website interface. At the top, the logo and name "DIALYSISREPORTS.ORG" are visible. Below the header, a navigation bar contains several tabs: Home, DFR, DFC, QIP, Comments & Inquiries, Reports (which is currently selected), Change Password, and Create/Edit Users. The user is logged in as "User" (Network). A "Logout" link is located in the top right corner. The main content area is titled "Reports" and features a dropdown menu with the following options: "<Select a Report>", "<Select a Report>", "PSR Access Report - Network Level" (highlighted), "Facilities That Have Not Downloaded Their PSR - Network Level", and "PSR/PSC Access Log". A "Go" button is positioned to the right of the dropdown. To the right of the "Go" button, there is an "Output Data:" label followed by icons for a spreadsheet and a printer. At the bottom of the page, a footer states: "Secure.DialysisReports.org is administered by: Arbor Research Collaborative for Health and the University of Michigan Kidney Epidemiology and Cost Center (KECC). Copyright © 2012, Arbor Research Collaborative for Health. Privacy Policy".

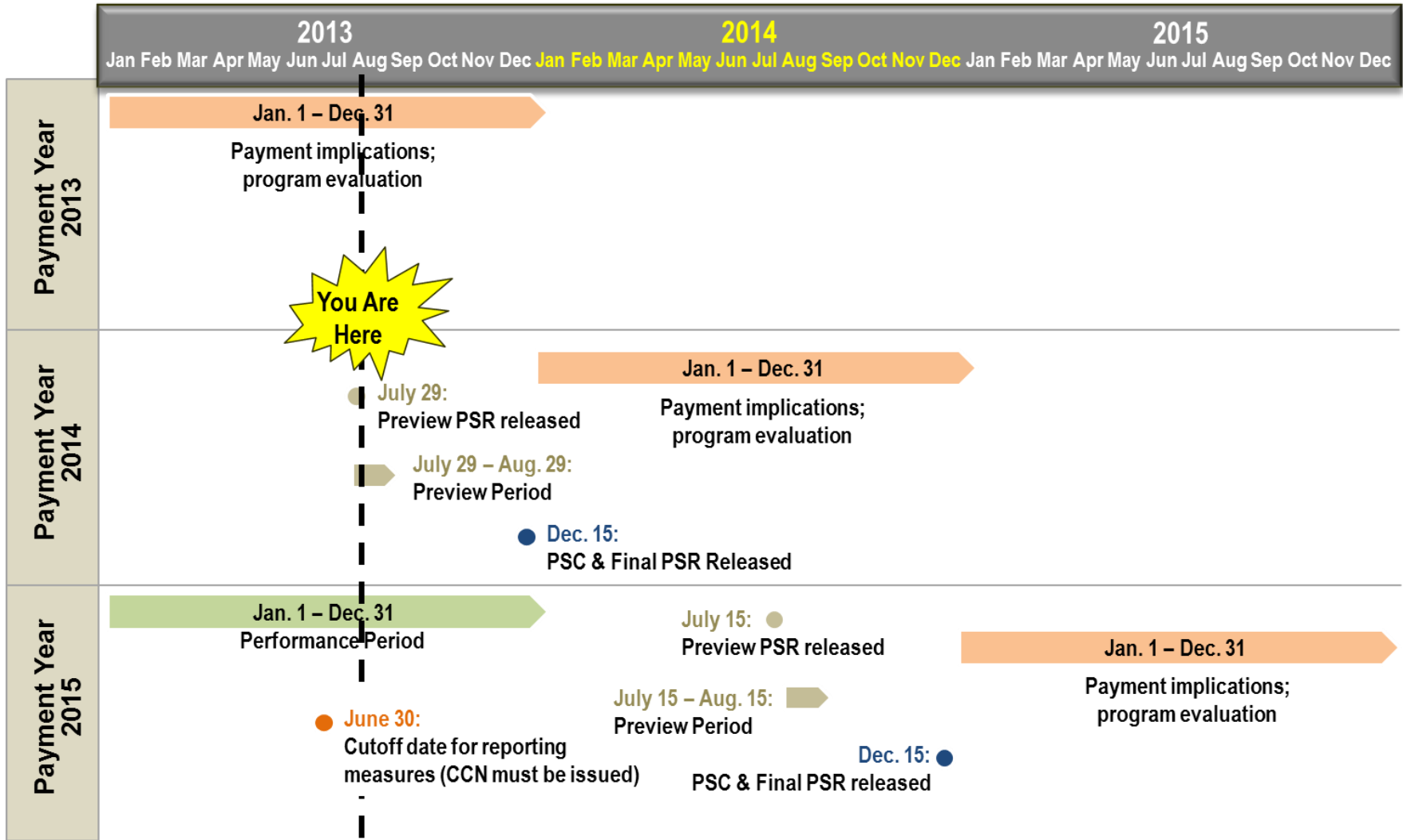
# Follow-Up Activities and Responsibilities

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Presenter:

**Brenda Gentles**

# ESRD QIP Critical Dates and Milestones



# Activities Following the Preview Period

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- **CMS will review any outstanding inquiries, then finalize facility TPS and payment reduction percentages**
  - Once scores are finalized, a final PSR will be posted to Dialysis Facility Reports (DFR) outlining your facility's information
  - Once issued as final, a PSR cannot be changed
- **In December 2013, each facility's Performance Score Certificate (PSC) will be posted on [www.DialysisReports.org](http://www.DialysisReports.org)**
- **By the end of January 2014, performance score data will be made available to the public on the Dialysis Facility Compare (DFC) website: <http://www.medicare.gov/Dialysis>**
- **Payment reductions (if applicable) are applied to dialysis services beginning January 1, 2014, and will remain in place for the duration of the year**


# Performance Score Certificate

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- **It is your facility's responsibility to log onto [www.DialysisReports.org](http://www.DialysisReports.org) in mid-December to print your PSCs**
  - **English and Spanish** versions must be posted
  - The certificate must be **displayed in a prominent location**
  - The certificate must be **posted by the first business day of 2014** and remain posted throughout the year
- **The certificate contains:**
  - Your TPS and score on each measure
    - ❖ It does not contain detailed information about how the scores were calculated
  - National average scores for comparison
- **Your patients may have questions about the certificate**
  - CMS recommends that you educate your staff on the performance scores so that they can answer patient questions


# Sample Performance Score Certificate

## (English version)



U.S. DEPARTMENT of HEALTH & HUMAN SERVICES  
CENTERS for MEDICARE & MEDICAID SERVICES

**End-Stage Renal Disease Quality Incentive Program**  
2014 Certificate of Dialysis Facility Performance - Part 1



Facility CMS Certification Number: XXXXXX

\*\* The information shown below is based on 2012 data.  
To obtain scores and rates, data from July 1, 2010 – June 30, 2011 are compared to data from 2012. \*\*


**Certificate of Dialysis Performance For (Facility)**

<b>TOTAL PERFORMANCE SCORE</b>	<b>70 out of 100</b>			
National Average	58 out of 100			
This Facility Meets:	<ul style="list-style-type: none"> <li>3 of 4 Clinical Measures of Quality</li> <li>2 of 3 Indicators of Quality Care</li> </ul>			
<b>CLINICAL MEASURES OF QUALITY</b>	<b>FACILITY PERCENT</b>	<b>NATIONAL MEDIAN PERCENT</b>	<b>MEETS STANDARD</b>	<b>FACILITY SCORE</b>
Anemia Management – percentage of patients with hemoglobin greater than 12 g/dL <i>(Shows how well a facility keeps red blood cell counts at an acceptable level – lower score desirable)</i>	6%	4%	No	6 of 10
Dialysis Adequacy – percentage of patients with urea reduction ratio (URR) of at least 65% <i>(Shows how well a facility cleans blood during a dialysis treatment – higher score desirable)</i>	100%	98%	Yes	10 of 10
Vascular Access Type – two sub-measures				
Treatment with Fistula <i>(higher score desirable)</i>	70%	58%	Yes	5 of 10
Treatment with Catheter <i>(lower score desirable)</i>	30%	14%	No	
<b>INDICATORS OF QUALITY CARE</b>	<b>FACILITY MEET REQUIREMENTS?</b>			<b>FACILITY SCORE</b>
Did the facility report infection information to the Centers for Disease Control and Prevention (CDC)?	Yes			10 of 10
Was the patient experience of care survey administered?	Yes			10 of 10
Did the facility confirm that it monitors patient calcium and phosphorus levels?	No			0 of 10

Facility Name and Address  
Facility Name  
Street Address  
City, State ZIP


\_\_\_\_\_  
Facility Medical Director

\_\_\_\_\_  
CMS Chief Medical Officer  
Director, Office of Clinical Standards and Quality



U.S. DEPARTMENT of HEALTH & HUMAN SERVICES  
CENTERS for MEDICARE & MEDICAID SERVICES

**End-Stage Renal Disease Quality Incentive Program**  
2014 Certificate of Dialysis Facility Performance - Part 2



Facility CMS Certification Number: XXXXXX

**What is the purpose of the End-Stage Renal Disease (ESRD) Quality Incentive Program (QIP)?**

The purpose of this program is to improve patient care. When the Centers for Medicare & Medicaid Services (CMS) pays a dialysis facility for a patient's care, it expects that care to be of good quality. When a facility doesn't meet certain standards, CMS will lower that facility's payments by up to two percent for an entire year. This gives the facility a financial reason to meet CMS' standards for good quality care.

**How are facilities scored?**

The Total Performance Score is a single number that tells how a facility performed overall. Each facility earns points for each clinical measure based on two factors:

- How close its rate (Facility Percent) comes to the national rate (National Median Percent); and
- Its previous performance.

The national rate and the facility's previous rate come from July 1, 2010 – June 30, 2011 data.

Indicators of Quality Care points are earned if the facility meets certain requirements. Points are earned for registering with and reporting infection information to the CDC, confirming that patient surveys were administered, and monitoring the calcium and phosphorus levels of patients.

**Note:** Individual measure scores might not add up to the Total Performance Score. Measures are assigned different levels of importance that determine their contribution to the Total Performance Score. The highest possible Total Performance Score is 100 points.

A facility may score less than the National Median Percent on a specific measure but still meet the standard set for that facility.

This is because the facility has shown improvement compared to a previous year. Some facilities may not have enough data to calculate a specific measure score or Total Performance Score. This doesn't reflect the quality of care provided in those facilities.

**What facilities will receive an ESRD QIP Performance Score Certificate?**

Only facilities that were active during Calendar Year 2012 will receive a Total Performance Score and a Performance Score Certificate (PSC) in December 2013.

Facilities that began to care for Medicare patients after 2012 won't receive a performance score nor be required to post a certificate.

**How can I get more information?**

To learn more about the ESRD QIP and other CMS quality initiatives, please do one of the following:

- Visit the ESRD Network Coordinating Center (NCC) website at: <http://www.esrdncc.org/>
- Visit the Dialysis Facility Compare website at: <http://www.medicare.gov/Dialysis>

NOTE: Dialysis facilities are required to post both parts of this Certificate prominently in a patient area . This Certificate expires December 31, 2014.

# Recap: Facility Responsibilities

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- **Establish your account to access [DialysisReports.org](https://DialysisReports.org)**
- **Facilities and Networks could access their Preview PSRs beginning July 29**
  - Recommendation: Submit clarification questions by August 13 to receive a prompt response and to have enough time to submit a formal inquiry if necessary
- **If you believe there is an error in your score**, submit a single formal inquiry
  - If you are contacted for follow-up information, respond in a timely manner so that your inquiry can be given due consideration
- **Preview Period ends August 29 at 5:00 p.m. (EDT)**
- **Download, print, and post** your English and Spanish PSCs in December (from [DialysisReports.org](https://DialysisReports.org))
- **Educate your staff** about the ESRD QIP so they can answer patient questions about the publicly posted certificate



# Key ESRD QIP Dates to Remember

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## During 2013:

- PY 2013 payment reductions applied
- PY 2014 Preview Period
- PY 2015 Performance Period
- PY 2016 Rulemaking
  - Proposed rule published in June/July
  - 60-day comment period
  - Final rule will be published by mid-November
- PY 2014 PSC
  - Available for download in mid-December
  - Post by first business day in 2014

**PY 2014 payment reductions are effective January 1, 2014**

# Resources

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- **CMS ESRD QIP**
  - <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/index.html>
- **ESRD Network Coordinating Center (NCC)**
  - <http://www.esrdncc.org/>
- **Dialysis Facility Reports**
  - <http://www.DialysisReports.org>
- **Dialysis Facility Compare**
  - <http://www.medicare.gov/dialysisfacilitycompare>
- **Medicare Improvements for Patients and Providers Act of 2008 (MIPPA)**
  - [www.gpo.gov/fdsys/pkg/PLAW-110publ275/pdf/PLAW-110publ275.pdf](http://www.gpo.gov/fdsys/pkg/PLAW-110publ275/pdf/PLAW-110publ275.pdf)
- **ESRD QIP PYs 2013 and 2014 Final Rule**
  - <http://www.gpo.gov/fdsys/pkg/FR-2011-11-10/pdf/2011-28606.pdf>
- **Numerical Values for PY 2014 Standards**
  - <http://www.dialysisreports.org/pdf/esrd/public-measures/UpdatedBaseline-2014-FR.pdf>

# Resources: PY 2014 Clinical Measure Specifications

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- **Hemoglobin Greater than 12 g/dL**
  - <http://www.dialysisreports.org/pdf/esrd/public-measures/AnemiaManagement-HGB12-2013-2014-FR.pdf>
- **Hemodialysis Adequacy**
  - <http://www.dialysisreports.org/pdf/esrd/public-measures/DialysisAdequacy-URR65-2013-2014-FR.pdf>
- **VAT – Fistula**
  - <http://www.dialysisreports.org/pdf/esrd/public-measures/VascularAccess-Fistula-2014-FR.pdf>
- **VAT – Catheter**
  - <http://www.dialysisreports.org/pdf/esrd/public-measures/VascularAccess-Catheter-2014-FR.pdf>

# Question and Answer Session

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# A Message from the CMS

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## Provider Communications Group

Presenter:

**Aryeh Langer**

#### **Attention: Medicare-Enrolled Providers and Suppliers**

- Give CMS feedback about your experience with your Medicare Administrative Contractor (MAC), the contractor that processes your Medicare claims
- Your feedback will help CMS monitor performance trends, improve oversight, and increase efficiency of the Medicare program
- Only providers and suppliers who register for the MSI will be included in the random sample to rate their MAC
- For more information and to register today for the 2013 MSI, go to <http://www.cms.gov/Medicare/Medicare-Contracting/MSI/>

# Evaluate Your Experience

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- Please help us continue to improve the MLN Connects National Provider Call Program by providing your feedback about today's call.
- To complete the evaluation, visit <http://npc.blhtech.com/> and select the title for today's call.
- Evaluations are anonymous, confidential, and voluntary.
- All registrants will receive a reminder email about the evaluation for this call. Please disregard the email if you have already completed the evaluation.
- We appreciate your feedback.

# Thank You

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- For more information about the MLN Connects National Provider Call Program, please visit <http://cms.gov/Outreach-and-Education/Outreach/NPC/index.html>
- For more information about the Medicare Learning Network (MLN), please visit <http://cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/index.html>