



# FACT SHEET

## Medicare QIOs and Chronic Kidney Disease

### Opportunities for Better CKD Care

More than 26 million Americans have Chronic Kidney Disease (CKD) and millions more are not aware they are at risk for the disease, which often is caused by diabetes and hypertension. Individuals with a family history of kidney failure are also at risk.

CKD decreases quality of life and increases health care expenditures. It now ranks as the ninth leading cause of death in the U.S. As a result, the Medicare QIO program is directing a special effort in 10 states and the Virgin Islands to detect the incidence and slow the progression of CKD.

Early screenings and patient education can prevent more serious kidney disease. Studies also show that African-Americans, Latinos and American Indians are more likely than Caucasians to develop CKD. QIOs are tasked with analyzing data to identify opportunities for narrowing these health disparities.

### Where QIOs Are Focusing

QIOs are focusing on three clinical areas:

- Timely testing for urine microalbumin to identify early kidney failure due to diabetes;
- Prescription of an ACE inhibitor and/or angiotensin receptor blocker (ARB) to slow the progression of kidney failure in patients with diabetes and hypertension; and
- AV fistula placement for individuals who elect hemodialysis as their treatment option for kidney failure. An AV fistula is the gold standard for obtaining vascular access.

### How QIOs Are Making an Impact

Medicare QIOs work directly with primary care physicians and nephrologists to increase the adoption of evidence-based standards for CKD care. The Kidney Foundation Outcomes Quality Initiative (KDOQI) defines five stages of CKD and its associated complications; QIOs promote adoption of the KDOQI treatment guidelines for better health outcomes.

Optimal CKD care also requires early referral and a strong partnership between a patient's primary care physician and a nephrologist. To achieve the best possible results, QIOs carefully target patients who are most likely to benefit from education on risk factors, early identification, and treatment choices for CKD. More than 2,000 physicians have signed an agreement to work one-on-one with QIOs and utilize resources that will change their systems of care and result in better management of CKD patients and those at risk for the disease.

QIOs offer on-site technical assistance, tools and resources; academic detailing on CKD standards of care; staff education on CKD; and assistance utilizing electronic

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### The Medicare QIO Program

The Centers for Medicare & Medicaid Services (CMS) improves health care for all Americans through a network of 53 Quality Improvement Organizations (QIO); one in each U.S. state as well as the District of Columbia, Puerto Rico and the Virgin Islands. With expertise in health care quality improvement and experience in related areas that include data analysis and social marketing, QIO staff engage health care providers on a local level to align processes of care with evidence-based standards that are associated with the best patient outcomes. QIOs are private, primarily non-profit organizations that provide services to CMS in a three-year contract period called a "Statement of Work" (SOW); an evaluation process determines the award of future work. The current contract cycle is the 9th SOW and will end in July 2011.

**Medicare Quality Improvement Program**

[www.cms.hhs.gov/qualityimprovementorgs](http://www.cms.hhs.gov/qualityimprovementorgs)

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health records to enhance patient-physician communication. QIOs also disseminate free patient education materials via collaboration with partners like the National Kidney Disease Education Program, Renal Physicians Association and the National Kidney Foundation.

In addition, QIOs are bringing together health care providers, community organizations and health care consumers to increase awareness of evidence-based care for CKD. Collaborative partners include community health centers, End-Stage Renal Disease Networks, state health departments, local chapters of kidney organizations, patient representatives, and health care professional organizations.

### How QIOs Measure Results

QIOs are expected to achieve results and are held accountable for the performance of the health care providers that they assist. CMS will measure QIOs' ability to meet the following improvement goals.

- Statewide rates of nephropathy screening in diabetic patients will demonstrate at least a 10% relative improvement over baseline.
- Statewide rates of ACE/ARB therapy in CKD patients who have diabetes and hypertension will demonstrate at least a 10% reduction in the gap between baseline performance and the 92% benchmark.
- Statewide rates of AV fistula placement and maturation for individuals with kidney failure who elect hemodialysis will demonstrate at least a 10% reduction in the gap between baseline performance the NKF-KDOQI target rate of 66%.

### For More Information

#### Medicare QIO Program

([www.cms.hhs.gov/qualityimprovementorgs](http://www.cms.hhs.gov/qualityimprovementorgs)) provides an overview of the QIO Program.

**MedQIC** ([www.qualitynet.org/medqic](http://www.qualitynet.org/medqic)) is a resource for quality improvement interventions and associated tools, toolkits, presentations, and other resources.

**National Kidney Foundation** ([www.kidney.org](http://www.kidney.org)) provides a wide range of CKD prevention related education resources and tools for health care professionals and beneficiaries.

#### National Kidney Disease Education Program

([www.nkdep.nih.gov](http://www.nkdep.nih.gov)) provides resources for consumers and professionals to improve patient outcomes.

**Renal Physicians Association** ([www.renalmd.org](http://www.renalmd.org)) provides resources for consumers and professionals to improve patient outcomes.

**Fistula First Breakthrough Initiative** ([www.fistulafirst.org](http://www.fistulafirst.org)) provides patient and professional resources about AV fistulas.

For additional QIO executive summaries, visit [www.cms.hhs.gov/qualityimprovementorgs](http://www.cms.hhs.gov/qualityimprovementorgs).