Comprehensive End Stage Renal Disease Care (CEC) Model 2019 Quality Measure Set

Pursuant to Sections VII.a and VII.c. of the CEC Model Participation Agreements, CMS is amending the CEC Model quality measures and scoring methodology for the Performance Years that occur in 2019 and providing notice of those changes through this document. For additional information about the CEC Model Quality Methodology, see the Section VII and Appendix D to the CEC Model Participation Agreements.

Quality Measures and Measure Weights

CMS will calculate the End Stage Renal Disease (ESRD) Seamless Care Organization's (ESCO) Total Quality Score (TQS) for the CEC Model using a set of standardized quality measures. Table 1 displays the CEC Model Quality Measure Set for the Performance Years that occur in 2019 and includes the measure title, National Quality Forum (NQF) number, measure steward, and data source. The CEC Quality Scoring Methodology includes weights for each quality measure to reflect its respective contribution to the ESCO TQS. Table 1 also contains the quality measure TQS weights by measure for PY2019. Pursuant to Section A of Appendix D to the CEC Model Participation Agreements, CMS reserves the right to make determinations about whether any specific measure will be pay-for-reporting or pay-for-performance and will notify ESCOs of such determination.

Table 1: CEC Quality Measure Set, PY2019

Measure Title	NQF #	Measure Steward	Data Source	TQS Weight (Percentage)
Standardized Mortality Ratio	0369	CMS	Claims and CMS Administrative Data	10%
Advance Care Plan	Adapted from 0326[1]	NCQA	Hybrid[2]	25%
Influenza Immunization for the ESRD Population	Adapted from 02261[1]	NCQA	Hybrid[2]	25%
Screening for Clinical Depression and Follow-Up Plan	Adapted from 04181[1]	NCQA	Hybrid[2]	25%
ICH CAHPS [3]	0258	AHRQ	QIP Results[4]	15%

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[1] An Adapted measure is a measure with changes to the specifications for the NCQF-endorsed version of the measure, such as an expanded age range (e.g., 18 and older instead of 65 and older) or alternate data sources for the measure. Measures with an age stratification (e.g., 18 and older instead of all ages) are not considered adaptations from the NQF endorsed measures.

[2] Hybrid measures use claims and medical record data. The ESCO is responsible for reporting on the portion of the measure that requires use of medical record data.

[3] ICH CAHPS is comprised of 6 sub-measures: Nephrologists' Communication and Caring, Quality of Dialysis Center Care and Operations, Providing Information to Patients, Rating of Kidney Doctors, Rating of Dialysis Center Staff, and Rating of Dialysis Center. Each sub-measure will receive equal weight in the ICH CAHPS composite score.

[4] The ESRD QIP generates measure results from Medicare claims, the Consolidated Renal Operations in a Web-Enabled Network (CROWNWeb), and the National Healthcare Safety Network (NHSN).