Understanding the CMS End-Stage Renal Disease (ESRD) Measures Manual

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## Agenda

### Speaker

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### Topics

- **CMS ESRD Measures Manual & JIRA Overview**  
- **CMS ESRD Measures Manual** Organizational Structure  
- **CMS ESRD Measures Manual** Measure Example  
- How to Provide Feedback Using the JIRA Platform  
- Upcoming ESRD QIP Activities  
- Selecting a Venue When Contacting CMS  

### Resources

**Questions**
CMS ESRD Measures Manual & JIRA Overview
The CMS ESRD Measures Manual provides a transparent and detailed description of how CMS ESRD measures are calculated, offering a comprehensive understanding of how CMS evaluates the quality of care provided by dialysis facilities.

CMS has designed the Manual to serve as a resource for improving the reliability and validity of CMS ESRD measures.

The Manual should enhance dialysis facilities’ quality improvement efforts by enabling dialysis facilities to more accurately track, predict, and improve their performance in CMS ESRD quality programs to ultimately lead to better care for patients with ESRD.
CMS has also created a site on the Office of the National Coordinator’s (ONC) JIRA platform that anyone can use to submit questions about CMS ESRD quality measures, as well as recommendations for non-substantive, technical changes.

Substantive changes to the ESRD QIP measure set will continue to be made through rulemaking, and the public will continue to submit recommendations for substantive changes via public comments.

While many of the chapters in the Manual interpret ESRD QIP policies finalized through rulemaking, the Manual is not intended to document all of the policies finalized for the ESRD QIP.
• The *Manual* is “As-Is”

  • It contains the level of detail that currently exists in present documentation, recognizing that additional details will be added in response to requests submitted via the JIRA platform

• The *Manual* contains specifications that apply to the ESRD QIP and Dialysis Facility Compare (DFC).
CMS ESRD Measures Manual
Organizational Structure
CMS ESRD Measures Manual Table of Contents

1. Introduction
2. Measurement Information
3. Cross-Measure Determinations
4. Methodologies for Deriving ESRD QIP Scores
5. Calculating Star Ratings for DFC
2. Measurement Information

2.1 Vascular Access Type: Fistula
2.2 Vascular Access Type: Catheter ≥ 90 Days
2.3 Adult Hemodialysis Adequacy
2.4 Adult Peritoneal Dialysis Adequacy
2.5 Pediatric Hemodialysis Adequacy
2.6 Pediatric Peritoneal Dialysis Adequacy
2.7 Hypercalcemia
2.8 Anemia Management Reporting (ESRD QIP Only)
2.9 Mineral Metabolism Reporting (ESRD QIP Only)
2.10 Screening for Clinical Depression and Follow-Up Reporting (ESRD QIP only)
2.11 Pain Assessment and Follow-Up Reporting (ESRD QIP only)
2.12 Standardized Readmission Ratio Measure
2.13 Standardized Transfusion Ratio Measure
2.14 Standardized Hospitalization Ratio Measure
2.15 Standardized Mortality Ratio Measure
2.16 ICH CAHPS
2.17 NHSN Bloodstream Infection
2.18 NHSN HCP
3. Cross Measure Determinations

3.1 Determining Patient-Level Exclusions

3.2 Facility Mapping and Impacts of Change of Ownership

ESRD QIP Measure Types

• Process Measures

• Intermediate Outcome Measures

• Reporting Measures

• Clinical Measures

• Outcome Measures
4. Methodologies for Deriving ESRD QIP Scores

4.1 Calculating an ESRD QIP Score from a Facility’s Performance Rate on a Clinical Measure

4.2 Calculating a Facility’s Total Performance Score from the Facility’s Measures Scores

4.3 Calculating a Facility’s Payment Reduction for the Facility’s TPS
5. Calculating Star Rating for DFC

5.1 Introduction

5.2 Overview of Measures

5.3 Developing Quality Measure Domains

5.4 Factor Analysis

5.5 Quality Measure Domains

5.6 Overall Star Rating for Each Facility

5.7 Conclusions

5.8 References
CMS ESRD Measures Manual Measure Example: Adult Hemodialysis Adequacy
Table of Contents for Adult Hemodialysis Adequacy

2.3 Adult Hemodialysis Adequacy

2.3.1 Measure Name
2.3.2 Measure Description
2.3.3 Measure Rationale
2.3.4 Measure Type
2.3.5 Improvement Noted as Higher or Lower Rate
2.3.6 Risk Adjustment
2.3.7 Selected References
2.3.8 Numerator Statement
2.3.9 Facility Exclusions
2.3.10 Denominator Statement
2.3.11 Denominator Exclusions
2.3.12 Data Elements and Data Sources
2.3.13 Mapping Patients to Facilities
2.3.14 Calculating Numerators
2.3.15 Assigning Patient-Months to Numerators and Denominators
2.3.16 Flowchart
How to Provide Feedback Using the JIRA Platform
How to Provide Feedback

• CMS has created a feedback system on the ONC JIRA platform that anyone can use to submit questions about CMS ESRD quality measures.

• The public also can use the JIRA platform to make recommendations for non-substantive, technical changes to ESRD measure specifications.

• Recommendations for substantive changes to the ESRD QIP measure set should continue to be made through the rulemaking process, especially the public comment function.

• Changes finalized through rulemaking, as well as those accepted through the JIRA commenting process, will be incorporated in future iterations of the Manual.
How to Provide Feedback

- Each question and/or comment should be submitted as an individual issue.
- No discussions or responses within JIRA are binding.
- CMS will acknowledge receipt of all recommendations promptly.
Upcoming ESRD QIP Activities

Payment Year 2017
- Aug. 15: Preview PSR released
- Aug. 15 – Sept. 16: Preview Period
- Dec.: PSC & Final PSR released
- Jan. 1 – Dec. 31, 2017: Payment implications; program evaluation

Payment Year 2018
- Jan. 1 – Dec. 31, 2016: Performance Period
- July: Preview PSR released
- July – Aug.: Performance Period
- Dec.: PSC & Final PSR released
- Jan. 1 – Dec. 31, 2018: Payment implications; program evaluation

Payment Year 2019
- Nov.: PY 2020 Final Rule released (includes final values for PY 2019 performance standards)
- July: Preview PSR released
- July – Aug.: Performance Period
- Dec.: PSC & Final PSR released
Key ESRD QIP Dates to Remember

- **January 1 – December 31, 2016:** PY 2016 Payment Reductions Applied
- **January 1 – December 31, 2016:** PY 2018 Performance Period
- **June 24 – Early November 2016:** PY 2020 Rulemaking
  - Proposed Rule displayed June 24, 2016
  - 60-Day comment period ends August 23, 2016
  - Final Rule published early November
- **August 15 – September 16, 2016:** PY 2017 Preview Period
- **Mid-December 2016:** PY 2017 PSC available for download; post within 15 business days
- **January 1, 2017:** PY 2017 payment reductions applied
Key DFC Dates to Remember

- **July 15 – Mid-August 2016**: Quarterly Dialysis Facility Compare (QDFC)-Preview period for October 2016 reports (report will remain available to view and download)

- **Mid-July 2016**: CMS Dialysis Facility Compare website updated with DFC measures from QDFC-Preview for July 2016 report

- **Mid-October 2016**: CMS Dialysis Facility Compare website updated with DFC measures from QDFC-Preview for October 2016 report

- **November 1 – Mid-November 2016**: QDFC-Preview period for January 2017 reports (report will remain available to view and download)
## Selecting a Venue When Contacting CMS

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<th>Subject</th>
<th>Contact Venue</th>
<th>Timeframe</th>
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<tr>
<td>Calculations and Scores Regarding the Preview Period</td>
<td>ESRD QIP System <a href="www.QualityNet.org">www.QualityNet.org</a></td>
<td>PY 2017 Preview Period</td>
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<td><strong>CMS ESRD Measures Manual</strong></td>
<td>JIRA Platform</td>
<td>Anytime</td>
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<tr>
<td>Extraordinary Circumstances Exception Requests</td>
<td>ESRD QIP Mailbox <a href="ESRDQIP@cms.hhs.gov">ESRDQIP@cms.hhs.gov</a></td>
<td>Anytime</td>
</tr>
<tr>
<td>General Inquiries, Specific Requests, Program Clarification and Assistance</td>
<td>ESRD QIP Mailbox <a href="ESRDQIP@cms.hhs.gov">ESRDQIP@cms.hhs.gov</a></td>
<td>Anytime</td>
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Resources

- ESRD Quality Incentive Program (QIP) section of CMS.gov
- CMS ESRD Measures Manual
- Office of the National Coordinator (ONC) Issue Tracking System’s JIRA Platform
Questions?
Questions

If you have additional questions, please contact:

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Thank You