JASMINE: Good afternoon everyone, and thank you for joining the Understanding the CMS End-Stage Renal Disease Measures Manual. Today we will be hearing from Tamyra Garcia who will be presenting on updates on the Manual and the feedback platform JIRA. So, now we will turn it over to Tamyra.

TAMYRA GARCIA: Good afternoon, folks. Thank you so much for joining us this afternoon. Next slide, please. Okay.

This afternoon we will discuss a few topics related to the ESRD Measures Manual. So, just to manage expectations upfront, we’re going to discuss the Manual, how it’s organized. We’ll provide you with an example of how you can reference the actual Manual to learn information about measures. We are going to give you information on how you can provide feedback to CMS about the Manual using the JIRA platform as well as information on upcoming ESRD QIP and DFC activities in addition to what’s the most appropriate venue to contact when you’re looking to provide CMS with some information or to provide feedback based on the JIRA platform with respect to the Manual, the ESRD QIP rule as well as the common period and the preview period. And finally, we’re going to close out with information on important resources and questions. Next slide, please.
So, to get into this presentation, let’s start off with an overview of the *ESRD Measures Manual* and the JIRA system that we’ll be using to collect information from external stakeholders regarding the *Manual*. Next slide.

So, just to be clear about what the *ESRD Measures Manual* is and what it is not. It is a transparent and detailed description of how CMS *ESRD Measures* are calculated. So, folks who want a deeper understanding of how we evaluate the quality of care provided by dialysis facilities via the measures that we implement would be very much interested in taking a look at this *ESRD Measures Manual*. This *Manual* is definitely a resource that we have to improve the reliability and the validity of the measures by being transparent in terms of providing information, and it should enhance the reader’s sort of knowledge of our quality improvement efforts by really allowing facilities to more accurately track, predict and improve their performance on CMS ESRD quality measures. We’re hoping that this will ultimately lead to better care for patients with ESRD. Next slide, please.

So, just to sort of give you additional information on the measures *Manual* and sort of how you can access our JIRA platform to submit questions, we want to be very clear that whatever questions or recommendations you submit to the JIRA platform, they should definitely be non-substantive technical changes. Many of you are familiar with the rule-making process for the ESRD QIP as well as the review process for DFC, and we want to make sure that everyone submitting to the JIRA platform understands that non-substantive technical changes are what we’re looking for via this platform and that all substantive changes to the ESRD QIP measure set should come through the rule-making process, and we’ll share a bit more information with you
about the ESRD QIP comment period a little further in the presentation, but we wanted to be very clear that the measures Manual is, again, specifically for non-substantive technical changes or for comments that you may have regarding the measures Manual and how we could potentially improve or clarify the information in the Manual. And additionally, while many of the chapters in the Manual interpret ESRD QIP policies and interpret how DFC operationalizes the measures, the Manual is not the sort of documentation. It’s not the formal documentation for this information. The formal and resource for this information is the ESRD QIP rule and policies finalized via the ESRD QIP rule. Next slide.

So, one thing that we wanted to share with you all is that this Manual is termed an as is Manual and that means two things. First, it contains the level of detail that currently exists in present documentation and that is sort of related to data the measures that they’ve been finalized currently. So, those are the two sort of stipulations associated with the as is terminology associated with the rule. They contain specifications related to the ESRD QIP and Dialysis Facility Compare as they currently stand at this date. The ESRD QIP is actually updated annually, and the DFC is updated quarterly. As a result, we’ve decided from the CMS perspective to update the Manual two times a year. Twice a year, and you know, to be clear as stated previously, this Manual is an accurate depiction of what is currently finalized and specified in the context of the measures as of today.

So, forthcoming changes in DFC that will be coming up in the next month or so will be reflected in the Manual’s next release and that date is to be determined at this time, but we will be in touch with our external stakeholders with respect to when that next release will come along. Next slide.
So, now that we’ve sort of shared information with you on what the Manual is, how it can be used, what it is not, and the information that’s contained within the Manual, we’re going to give you a bit of information about the organizational structure as this is quite a large document. Next slide, please.

So, the measures Manual table of contents is separated into five sort of large sections. The first is an introduction. The second contains measurement information, so that delves sort of very deep into clinical and reporting measures. Many of the clinical measures, outcome measures which I know that folks are definitely interested in as well as information on cross-measure determinations. Now, cross-measure determinations really speak to sort of micro-specification-based information on issues that affect more than one measure. These things can include things like modality determination, how facilities are mapped in the programs as well as information on how we specify and calculate things like time on ESRD. Additionally, there’s a chapter on methodologies for deriving ESRD QIP scores. The information presented here is quite similar to what we present on our national provider calls when we’re talking about the final rule. Sort of the waiting structure, how the total performance score is calculated. Those kinds of things and then finally there’s information on how the DFC star ratings are calculated. So, those are sort of the five primary large chapters within the Measures Manual. Next slide.

This slide here really sort of shows the measurement information chapters that were offered in the CMS ESRD Measures Manual Table of Contents. As you can see here, there are clinical measures. There are reporting measures. We have the standardized readmission ratio measure
which is an outcome measure that a lot of folks are interested in learning more about. Some of these measures, for example, anemia management reporting and mineral metabolism are specific to QIP and when that occurs, that information will be specified at the beginning of the sort of description of the measure. Next slide.

As stated previously, we have chapters discussing cross measure determination. Here we have sort of some examples determining patient level exclusions and facility mapping and impacts of change of ownership. We just wanted to provide our external stakeholders and users with this information so that they understand at a micro-specification level the impact of change of ownership and important information on how CMS engages in facility mapping for the purposes of the ESRD programs, and then information on ESRD QIP measure type. So, within the QIP there are process measures there are intermediate outcome measures, reporting clinical and outcome measures as we saw in the previous slide. So, this just gives you a bit more information on how these measures are defined and operational as in the program. Next slide.

Next up we come to methodologies for deriving ESRD QIP scores. As stated previously, information on calculating an ESRD QIP score, the total performance score, and information on the payment reduction for the facility’s total performance score is included in this chapter. We also include information on the small facility adjuster. So, additional ESRD QIP policies, improvement and achievement scoring which could change based on the previous final rule and the policies finalized there and, again, calculating a facility CPS which is a very important aspect of determining a facility score and whether or not they will receive a payment reduction in the ESRD QIP. Next slide.
Again, as stated previously, there is some pertinent information about calculating a star rating for DFC. This was a collaborative effort where the ESRD Quality Incentive Program team and the DFC and Five Star Rating teams got together and really sort of decided that we wanted to provide stakeholders with a comprehensive resource. So, again, we wanted to share this information in one sort of consolidated fashion in this one place. So, along with the ESRD QIP information, there’s information on calculating the CFC score. So, there’s information on overview of measures, how quality measure domains are developed, and an overall star rating information for each facility. So, we’re hoping that this information will be helpful to you, and we’ll speak a bit more in the presentation about how you can submit comments to the JIRA if you have sort of information on how it can be stated clearer or if there’s more that you’d like to know. Next slide, please.

So, now we’re going to get into the actual Manual to give you an example of how the Adult Hemodialysis Adequacy Measure is organized within the Manual. I know that I’m sort of a visual learner. So, we always think it’s important to provide a visual for folks to take a look at. So, we’re going to go into the Manual, and we’re going to start on page 11.

So, all measures are discussed in chapter two as we stated previously, and we’re looking here at the Adult Hemodialysis Measures, an example of a clinical measure in the ESRD program at CMS. So, generally speaking, clinical measure sections include the name of the measure, a description about the measure, some information on the rationale associated with the measure, information on the measure type, directionality, so if the value is higher or if the value is lower,
what sort of most appropriate or what direction would we like to go in in terms of providing and measuring better care, selected references associated with the measure, calculation features, and the way in which a record matched to a specific facility as well as the data source used for the measure.

And now we will move on to some additional information related to differences between ESRD QIP and the DFC. So, we can find on page 13 that where applicable, the Manual flags program specific features in which the DFC and ESRD QIP measures differ. So, here the Manual identifies that the DFC and the ESRD QIP use different exclusion criteria for the measure, and this the primary reason why you may see different scores between the programs even though they both employ the same data sources.

Next up, we’re going to take a look at another feature that the Manual contains which is the flow chart. Now, a vast majority of the measures in the Manual contain a flow chart where applicable. There are some situations where a flow chart would not provide additional information, but wherever it does, we’ve provided this for the user, and it maps the calculation process for the measure. So, this is something that we thought would be, you know, good to just include for folks so that they understand how the measures are met in the ESRD QIP.

And then finally in the Manual, we’re going to take a look at reporting measures. We have on page 40 here how in the ESRD QIP specifically this is as stated previously ESRD QIP only as specified here. In this portion of the Manual, we provide facilities with requested data in a variety of areas to sort of really understand how they earn points to where’s their total
performance score, how the reporting measure specified, and you know, the structure of the reporting measures are similar to the clinical measures as we discussed earlier.

So, that in a nutshell is sort of how the measures are organized within the *ESRD Measures Manual*. The next slide just really contains a summary of what we discussed and what was seen in the *Manual* a few moments ago for the Adult Hemodialysis Adequacy Measure. As you can see, it’s a portion of the chapter 2.3, and then under it the way that it’s organized is subsections 2.3.1, 2.3.2, et cetera through the flow chart piece for 2.3.16. Next slide.

So, now that you all understand how the Measures *Manual* is organized, what it is, what it is not, what we’re interested in hearing from you all in terms of feedback with respect to the *Manual*, we’re going to give you a demonstration of how you can provide feedback to the JIRA platform for the Measures *Manual*. Next slide.

So, CMS has created this feedback system on the ONC JIRA platform. So, anyone who wants to submit questions about the ESRD quality measures can do so using this platform. The public can also use the JIRA platform to make recommendations about not only the *Manual*, but as we stated previously, non-substantive technical changes and recommendations from these will be sort of included in the *Manual* as it’s updated twice annually and all substantive changes that are submitted through the JIRA system we will sort of reply stating, yes, these changes are substantive. They need to be submitted via rule making and any changes finalized through rule-making as well as those accepted through the JIRA process based on CMS’s assessment could potentially be incorporated to future iterations of the *Manual*. So, it will go through a process
where CMS will take a look at the recommendations and determine with a group whether or not they will be implemented into future iterations and what we will then do is sort of provide information ahead of the next Manual’s release summarizing the changes that will be implemented so that all of those folks who are sort of vested in the Manual and submitted recommendations will know what will be included in the next iteration of the Measures Manual.

Next slide.

So, each question and or comment should be submitted as an individual issue. We like to be very clear that if you submit more than one issue into the JIRA system, unfortunately, we’re going to have to sort of address one issue at a time and reply back stating that you submit another inquiry just because it’s important for us to keep track of what’s coming through, and we want to ensure that we understand your needs and are able to reply to each need as it comes along one at a time.

Additionally, no discussions or responses within JIRA are binding. As stated previously, the rule and the measure specifications, the information presented on the CMS website, using those venues are the binding sort of gold standard resource, and so you’ll learn more about sort of what you can see in JIRA as we move along, but there are discussion threads that can be viewed, and we just want to share with you all that the discussion threads and things that come through those discussion threads are not binding to the ESRD QIP or the DFC. The Measure specifications and the rule are the binding entities associated with those CMS programs.
Lastly, CMS will acknowledge receipt of all recommendations promptly. So, you know, if you sort of submit something to us whether it’s a recommendation or a question, we will get back to you all in short order. Next slide.

So, now we are going to move into the sort of tutorial piece of the presentation where we’re going to discuss creating a JIRA account, signing on to JIRA, how someone can create an issue or an inquiry within the system. We’re going to show you a feature of the system entitled the issues dashboard, and it’s really the best place to start tracking the status of an issue that you submit to look at those comment threads that we discussed previously as well as sort of how you can look at an individual issue screen. So, all of the information that’s included there so just that you have a good idea of how the system works and, you know, how you can track issues and also finally how you can log out of the JIRA system. So, let’s get into it.

So, we’ve clicked on the link provided within the User Guide on page two, and this link is really sort of the way that you get to the JIRA page where you can actually create an account. So, after the screen appears, click on the “Sign Up” link on the screen which we’ve done and then enter this information and click the “Sign Up” button. So, the information that we’d like you to click on includes like your name, your email, your user name. Everything identified by an asterisk is required information. So, we’re not going to create an account here today. So, one has already been completed for the purposes of this, you know, presentation, but we just wanted to show you exactly what the screen looks like. Once you complete an account, once you create one, an email will be sent to you verifying the account creation.
So, now that you all sort of have an idea what the screen looks like to create an account, we’re going to move on to signing on to JIRA system. This information can be found on page three of the User Guide that we offered as well and a link that can be found on the CMS website and the sort of CROWN Memo distribution information that we provided, and so after you have an account, click on that original link again, and here we have our user name “Sample1” and our password “sample77”. So, you would enter that information and then click the “Log In” button.

So after clicking the “Log In” button, a “What’s New in JIRA” pop-up window may occur. It didn’t occur in this situation, but if it does, you can check the box never show again and close the window or you will just land automatically on this summary screen titled CMS ESRD Measures Manual. So, that’s where we are now and then from here, you can create issues, you can track issues, and you can comment on important issues related to the ESRD Measures Manual. So, now that we understand how you can create an account and how you can log into the system, we’re actually going to work with you all to create an issue, and information on being able to create an issue can be found on Page 4 of the User Guide, and so now that we’re on the summary screen, what we’re going to do is we’re going to click on the menu item in the upper portion of the screen labeled “Create Issue”. Great. Please note, you should create a new issue as stated previously for each individual comment, question, or submission. So, again, try not to include too many items in one issue.

So, what you’ll do here is fill out the information requested on the screen. Note that the items with an asterisk are required in order for the issue to be submitted properly into the system. With this in mind, we do ask that you provide as much information as possible. We want to understand
your needs as much as we possibly can whether it be a recommendation or a question because we believe that this will assist us with the resolution of an issue. We’d like you all to be as specific and comprehensive as possible when filling out the description field identified here with an asterisk, and we’d like you to please be sure to note the version and the number or release date of the *Manual* that you’re referencing. So, whatever version or release date of the *Manual* that you’re referencing in the issue that you’re submitting, if you can indicate that here, we would be forever grateful or else when we follow up we’ll have to ask you that information.

We’d also ask that after you sort of create this, you click on at the bottom of the box that “Create” button there and this will sort of formally submit the issue to the ONC JIRA system. Please note, we’re not going to create an issue today in this presentation. We really just wanted to give the folks on the call a visual, but we do have a prepopulated sample issue on the platform, but after you create your issue, a message will appear at the top of the screen sharing and sort of informing that your issue has been submitted along with other identifying information, and you’ll also receive an email telling you that your issue has been submitted to the email address that you’ve indicated when you set up your ONC JIRA account. What you will also receive post the initial submission are subsequent emails as the issue progresses toward a resolution or if someone else who is interested in this issue has submitted a comment or if CMS has submitted a response to you issue. So, your email is sort of another additional way of tracking issues in the ONC JIRA system.

So, next we’re going to take a look at the issues dashboard now that we’ve created an issue. Sort of guidance on how to navigate the Issues Dashboard can be found on page five of the User
Guide that we’ve provided, and the Issues Dashboard is a really good place to start tracking the status of your issue and to view any comments that users have posted associated with that issue. This dashboard here shows a summary of all issues in a variety of different ways, and you know, it also includes pre-defined queries that we can use to select issues in different ways. So, to reach the Issues Dashboard, we’ve clicked on the “Issues” link located at the left side of the summary screen landing page after you’ve signed on to JIRA, and once on the Issues Dashboard, we’re going to select the link to run various queries that have already been developed to kind of sort the existing issues that we have on this sort of dummy page here.

So, when you select a query link from this screen, you’ll be taken to a different screen that gives a detailed view of issues selected by the query in order of priority. We have a few here as you can see. You know, things that have been added recently, issues that have been resolved recently, issues that have been updated recently, and one that we think will be of great interest to folks, issues reported by me because, of course, you’d like to track any of the issues that you’ve reported for yourself. So, for the purpose of this demo, we’re going to go on ahead and select issues reported by me.

So, now that we’re here, you can see that, you know, we have a series of issues under the order by column on the left-hand side. What we’re going to do is select this as a “Sample Issue”. It’s the second issue, and another screen pops up here showing more detailed information about this particular issue. So, first, you know, we submitted an issue. We went and we queried issues reported by me, and then we clicked on one of the actual issues. Now, we’re actually taking a look at the issue to kind of get a sort of high-level view of the information provided.
So, under this issue in this screen we see here that there’s information on the title, the description of the inquiry, exactly what was typed into the system when the inquiry was submitted, the type. So, different types could be recommendations, questions, or other, the priority of the issue. Is this a major issue? Is it moderate? Is there no priority at all – it’s not time sensitive? The status of the issue. So, is it open? Has it been assigned to someone? Is this issue resolved? Any comments that folks may have submitted regarding the issue. As you can see there’s a comment bubble below at the bottom of the screen there, and then on the right hand side, there’s information about who reported the issue. So, who is the submitter? That’s under the reporter. Information under the watcher link. So, we’ll discuss more about the watchers later, but those are folks who are interested in sort of keeping track of this issue as it moves along and so you don’t have to submit an issue to collect information on it or to sort of track and issue, and then there’s other information as you all can see here regarding the activity and transactions related to issues.

So, one thing that we thought be useful for folks here is a quick tutorial on how to add a comment. So, in order to add a comment, you’re going to click on the “Comment” button and type in a comment. So, for the purposes of this demonstration, we’ll type in “comment”. Great. And all admins and watchers who have decided that they are interested in tracking this issue will receive an email stating that there is a new comment on the issue log and a link and just sort of a partial bit of the comment, but before we submit this comment, we do want to hit the “Add” button her. Great. Wonderful.
And so, as stated previously, if you’re a watcher or an admin, you will receive an email indicating that a comment has been submitted and a link to this information, and just to sort of give you all a high-level overview of this feature of the JIRA system, you can select other issues from the same query listed on the left side of the screen. In this case we indicated and reported by me and if we were to click on something else, different issues would most likely come up, but to get back to the overall issues dashboard where you can look at those sort of higher level queries, what we’re going to do is press the CMS ESRD Measures Manual link that’s right above the summary title on the top center of the screen. Right next to the little rocket ship, what we don’t want to do in the situation is hit the back button because if we do, it will take us to the very beginning of the ONC JIRA ESRD Measures Manual page. So, please, if you’re looking to go back to the home page, you would hit that CMS ESRD Measures Manual link.

So, now that we’ve discussed how you, you know, log into the system, how you obtain or submit an inquiry, how you’re able to query the different options to look at inquiries, how you’re able to submit a comment associated with an inquiry, we’re going to give you a little bit of information on how you track an issue that you did not submit, so that watcher option that I mentioned a few moments ago, and you know, additional direction on this can be found, again, in the User Guide, but on page five of the User Guide for folks who’d like that reference, and so if you see that an issue is of interest to you, and you decided that you want to be a watcher of an issue that someone else submitted, what we’re going to do is show you how to do that by going to this is a test account issue.
So, we’re going to go to “All Issues”, and the “This is a Test Account” issue. It’s the second issue there and then from the issues dashboard screen, we’ve already selected the all issues piece, and we’ve located it on the left side. We’re going to click on all the way on the right-hand side “Start Watching this Issue”, and once you click on this, you will be notified of all events related to the issue as if it were one of your own issues. So, this is a nice feature because the querying option allows you to see whether or not someone’s already submitted a question that you’re interested in and as opposed to you submitting an additional question, you can actually go in and watch their question or their issue or their inquiry so that you can receive late-breaking information on it as opposed to duplicating efforts, and if you want to stop being a watcher at any time in case there’s an overwhelming amount of emails, you can always hit the “Stop Watching the Issue” button here, and it will remove you from those notifications.

So, this in a nutshell at a very high level are the general features that a user of the Measures Manual would want to access if they were interested in leveraging the JIRA system to submit a question or an inquiry or to just sort of see what other folks are doing in the context of their submissions for questions and inquiries. Before we sort of close out this portion, we did want to be sure that you will always remember to log out of the system. So, in order to log out, you go to the upper right corner of any screen and click that down arrow next to the avatar and choose the “Log Out” option similar to other programs.

So, we’re all logged out of the system, and now that we’ve sort of completed that portion of the presentation, we’re going to head back over to the PowerPoint to conclude. Great. Next slide.
So, we’d like to just give you all a heads up on some upcoming ESRD QIP activities since we are here today discussing ESRD programs at CMS, and we are in late June, early July, but there are a few sort of exciting events coming up, one of which is the preview period. The preview period for this year will be held from August 15th through September 16th of 2016, and we are also happy to announce that the comment period for the proposed rule for Payment Year 2020 has begun. So, it started June 24th and will extend through the 24th of August, if I’m not mistaken, the 23rd of August. I apologize. So, you all have ample time to submit those substantive comments that are related to ESRD QIP policy that would not be appropriate for submission in the JIRA system.

As you all well know, the performance period for Payment Year 2018 is we’re about half-way through, a little more. It started in January and will end in December, and during the preview period that will begin mid-August, you all in the facilities will have access to your preview performance score reports and your preview, additional preview reports that will help you all with quality improvement within your facility.

So, those are the upcoming ESRD QIP activities. There are a bit more there for your viewing pleasure, but what we also wanted to share with you all in the next slide are key dates to remember from the ESRD QIP period in a form that’s a little less visually stimulating. So, there, another thing that we wanted to sort of indicate here is that mid-December 2016, the Payment Year 2017 performance score reports will be available for download, and so that’s something that our stakeholders are typically interested in learning about as well, and this slide is pretty much reflective of the previous slide here.
So, we’re going to move on to the next slide. In addition to those important dates for the ESRD QIP program, we have some key programs for the Dialysis Facility Compare program as well. So, mid-July through mid-August there’s a quarterly Dialysis Facility Compare update as we stated previously. DFC is updated quarterly. So, that’s the next update. In mid-July, the DFC Compare website will update the measures from the preview period for the July 2016 report. In mid-October, they’re going to have another update, the quarterly update, and those updates are typically associated with the outcome measures related to the DFC program and then from the early November to about mid-November, they’ll have their preview period for the January 2017 reports. So, in addition to the important QIP dates, we wanted to give you all some important DFC dates to remember as well as this is an *ESRD Measures Manual*. It’s not specific to either of the program. Next slide.

So, this slide here, “Selecting a Venue When Contacting CMS”, really truly reiterates what we discussed earlier. So, in terms of your inquiry or your concern or your issue, what would be the best venue to communicate that information? So, anything associated with substantive comments surrounding measures or ESRD QIP policies, the most appropriate venue to submit that would be the ESRD QIP comment period for the proposed rule. The proposed rule dates are June 24th through August 23rd and the link to access that information, not only the rule but to submit comments is [www.regulations.gov](http://www.regulations.gov).

Next up we have the subject of Calculations and Scores Regarding the Preview Period that starts in mid-August. If a facility has any questions about how their facility was scored, the best
mechanism to use to submit comments on that would be the ESRD QIP system and the ESRD QIP system can be accessed via QualityNet.org. Of course, you have to have a user name and there’s a process that you go through in order to be able to access that system, but more information can be found there, and we will release additional communication in the coming week for folks to access the ESRD QIP system for the Payment Year 2017 preview period.

The next subject of interest is the CMS ESRD Measures Manual. That’s been the topic of discussion this afternoon, and as you all well know, the JIRA platform that we just had a quick tutorial on is the best place to submit any sort of recommendations you have for improving the Manual, any clarifying questions that you have on the Manual as well as non-substantive technical comment or clarification regarding the ESRD Measures.

Next we have Extraordinary Circumstances and Exemption Requests, affectionately referred to as ECEs. If any facilities have ECEs to submit for CMS, the best place to submit those are to the ESRD QIP mailbox, and we will reply promptly with an email informing you that we have received your requests, and you will receive feedback before the associated preview period linked to the request so that you know whether or not your request was accepted ahead of the preview scores being released.

And then finally, general inquiries or Specific Requests, Program Clarification and Assistance that fall outside of some of the dates associated with these items can be sent to the ESRD QIP mailbox keeping in mind that we cannot respond to preview period questions outside of the preview period or comment period questions outside of the comment period. Next slide.
So, finally here we have some important resources for you all that speak to some of what was discussed in the previous slide, the cms.gov website that I’m sure many of you are familiar with, our new resource, the ESRD QIP Measures Manual, as is Manual, the Office of the National Coordinator Issue Tracking System JIRA platform which is what you will use to submit your questions or recommendations to the measure Manual, and then finally the User Guide for the Measures Manual and the JIRA feedback system which is also available on cms.gov, and a few of these links will be added to some additional resources in the future. Currently, this information is present on cms.gov, but we are also collaborating with our partners to update the quality net website to include important links as well.

And then finally, we move on to the next slide which are questions.

JASMINE: Okay. Thank you so much Tamyra. We will now open the line for question. If you have a question, you can raise your hand or you can type your question into the chat box, so we will first start get started with Connie Zimmerman. Connie, your line is unmuted.

Okay. So, I can go ahead and read Connie’s question aloud. She’d like to know; we are an acute care hospital that contracts renal dialysis services with a local dialysis organization. Does the ESRD PPS QIP apply to our hospital or to the dialysis service itself? Does our hospital need to participate in the ESRD QIP performance measure recording in order to receive the incentive or is this the responsibility of the dialysis service?
TAMYRA GARCIA: Good afternoon, Connie. Thank you so much for your question. That’s quite a complex and intricate question, and we would love for you to submit that question to the ESRD QIP mail box at ESRDQIP@cms.hhs.gov. We have some staff who are currently working on resolving some of the questions that have come into the mailbox in the past week or so, and we can get a response to you in short order with respect for that question. That slide, Slide 21, the previous slide, yes, that ESRDQIP@cms.hhs.gov, that’s exactly where you’d want to go to submit that question formally to the program so that we can get back with you.

JASMINE: Great. Okay. So we will move on to the next question is can you clarify what QIP preview period will be. Previously, we understood that it would be from 8/1 to 9/6. However, Tamyra just stated that it would be from 8/15 to 9/16.

TAMYRA GARCIA: Yes. Thank you so much for that question, and we will be releasing a CROWN memo on this in few days, if I’m not mistaken. It’s actually going through a process now to ensure that we are all aligned with respect to the information presented, but the ESRD QIP preview period will be from August 15th to September 16th and the reason why we delayed the ESRD QIP preview period at a very high level is we wanted to give facilities the time to onboard into the new QARM EIDM system that’s being implemented at CMS. This system will allow for folks to sort of confirm that they are who they say they are in the context of the facility. So, we have facility points of contact that view the preview scores for the facility. So, when a facility wants to go into the ESRD QIP system to view their scores and submit clarification questions, formal inquiries, they need to go through an initial process to ensure that they are exactly who they say they are and in order for us to ensure that facilities are able to get into the
system, learn how to use it, have the correct user name, etcetera, etcetera, it’s a process that we
wanted to give them more than just a few weeks to complete. So, in order to do that, we decided
to delay the preview period and give folks a little bit more time to do so.

JASMINE: Okay. Great. Thank you so much, Tamyra. We will now move on to the next
question which is from Kathy Hanson. Kathy, your line is unmuted. Kathy Hanson? Okay. In
the meantime, Kathy, if you can hear us, feel free to type your question into the chat box, and we
can read it aloud. For now, we will move onto Vivian Smith. Vivian, your line is unmuted. 
Okay, again, Vivian, if you can hear us, feel free to type your question into the chat box. We will
move on to Pat. Pat, your line is unmuted.

TAMYRA GARCIA: Quick question, Jasmine. Do folks have to press the pound 556 in order to
unmute on their end?

JASMINE: We actually can unmute their lines on our end, so we should be able to hear them,
but if not, everyone feel free to type your question into the chat box, and we can read it aloud.
We’ll give folks a few minutes to do that.

Okay. Great. It looks like the questions are coming in. So, we now have a question from Susan
[last name unknown] and she’d like to know, “There is a new safety measure designation for
QIP. Will the Manual be updated for the safety measure domain?”
TAMYRA GARCIA: Yes. So, if that is finalized in the rule, because again this safety domain measure is a proposed policy, then it will be updated in a future iteration Manual. And thank you for your question, Susan.

JASMINE: Okay. It doesn’t look like we have any additional questions, so we are going to end now, but first we’d like to let everyone know that if you have any questions following the webinar, you can feel free to send them to ESRDQIP@cms.hhs.gov, and we will also be sharing the materials from today’s webinar with you all in the coming days. Before, I think the rest of the panelists and organizers, we actually have one final question from Pat. Pat, thank you so much, and I’ll read it aloud.

It says, “I am a reason transplant patient. My question is how are the performance numbers looking since CMS has started?”

TAMYRA GARCIA: Thank you so much for your question, Pat. We have some great resources on that information at cms.gov. Many of the measure have improved over time. Is there any measure that you’re specifically interested in? If so, we can definitely sort of contact you and if you submit a question to the ESRD QIP mail box, we would love to sort of engage with you and sort of learn about what you think would be interested in learning more about from the patient perspective.

JASMINE: Great. Thank you, Tamyra, and again, anyone else who has a similar question, feel free to share your information in the ESRD QIP mail box, and for now we’ll do one final check
to see if there are any last-minute questions, and it doesn’t look like there are. So, thank you so much, Tamyra, and CMS Team. We had a great presentation today and we’ll let everyone enjoy the rest of their afternoon.

TAMYRA GARCIA: Thank you so much. Have a great day, everyone.

(END)