MLN Connects™

National Provider Call

End-Stage Renal Disease Quality Incentive Program

Previewing Your Facility's Payment Year 2015 Performance Data

July 16, 2014

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Presenters

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Agenda

To provide an overview of the Payment Year (PY) 2015 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

Presenter:

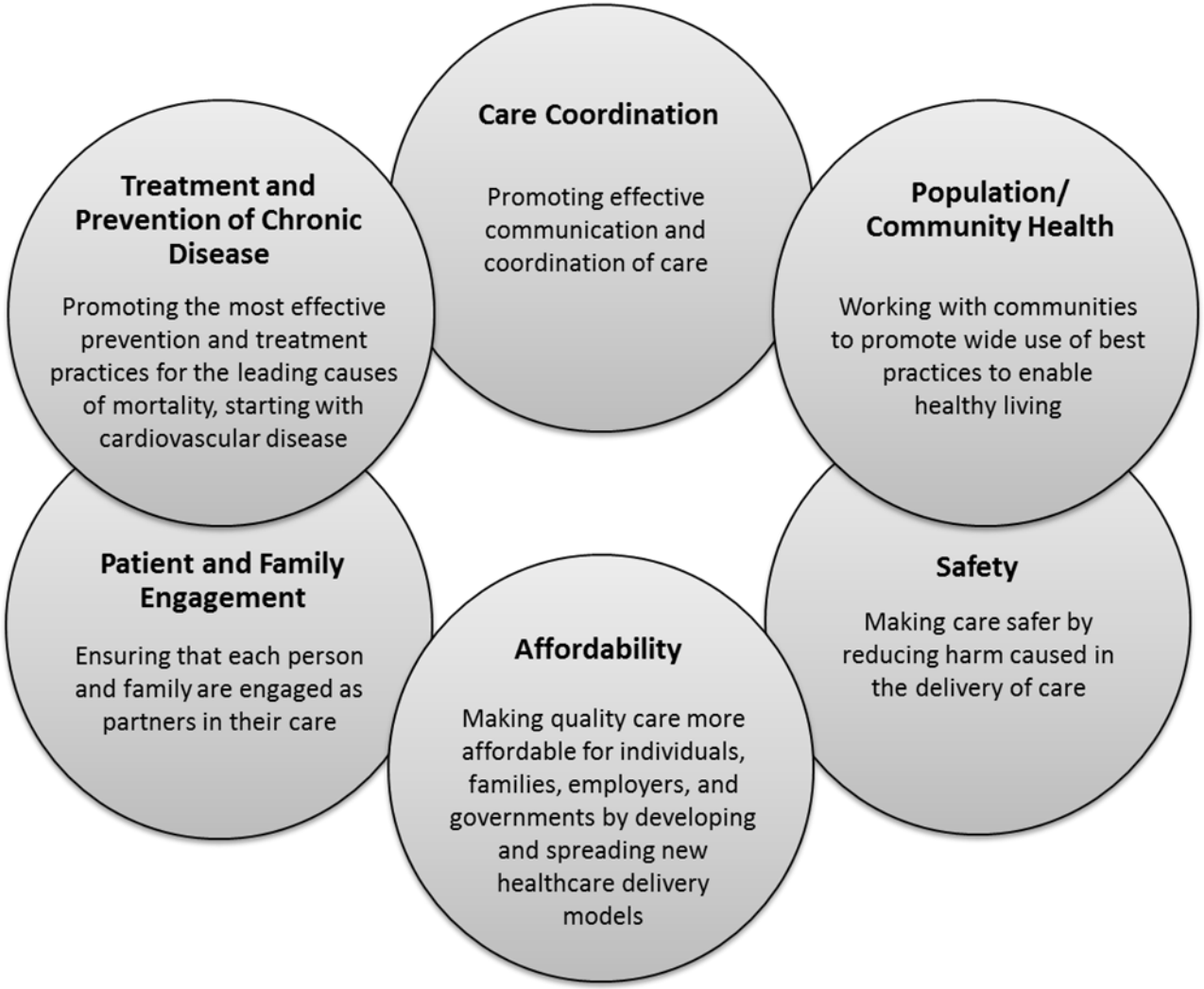
Jim Poyer

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



ESRD QIP Overview

Presenter:

Anita Segar

ESRD QIP Legislative Drivers

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 providing a financial incentive for 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)

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

- **Select measures**
  - Anemia management, reflecting Food and Drug Administration (FDA) labeling
  - Dialysis adequacy
  - Patient satisfaction, as specified by the HHS Secretary
  - Iron management, bone mineral metabolism, and vascular access, as specified by the HHS Secretary
- **Establish performance standards** that apply to individual measures
- **Specify the performance period** for a given payment year (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 total performance scores
- **Publicly report results** through websites and facility posting of performance score certificates (PSC)

Program Policy: ESRD QIP Development from Legislation to Rulemaking

- MIPPA outlines the general requirements for measure selection, weighting, scoring, and payment reduction, which are considered every year
- A rule is an official agency interpretation of legislation that has the full force of law
- Proposed Rule via Notice of Proposed Rulemaking (NPRM)
  - Reflects various what-if analyses to determine financial impacts on facilities
  - Measure selections are ideally evidence-based and promote the adoption of best practice clinical care
  - CMS clearance and legal review by the Office of the General Counsel (OGC)
  - Office of Management and Budget (OMB) review for financial impacts
  - 60-day period for public comment
- Final Rule passes through HHS internal clearance process
- Both are published in the *Federal Register*

PY 2015 Overview

Presenter:

Anita Segar

PY 2015 Preview Period Timeline

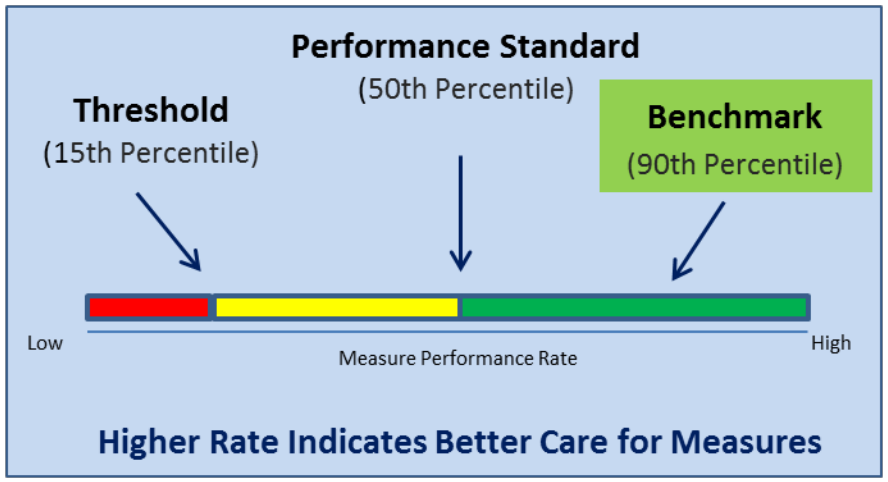
- **Preview Period opened July 15, 2014**
  - Preview PSR ready for download from DialysisReports.org
  - Submit all clarification questions and formal inquiries online
  - **Recommendation: Submit clarification questions by August 1**
  - Responses to clarification questions help facilities determine whether a formal inquiry should be made
- **Preview Period closes August 15, 2014**
  - All clarification questions and formal inquiries must be received by 5:00 p.m. EDT
  - CMS will respond to questions and inquiries received before the deadline; responses to formal inquiries may be delivered after the Preview Period has elapsed

PY 2015: Overview

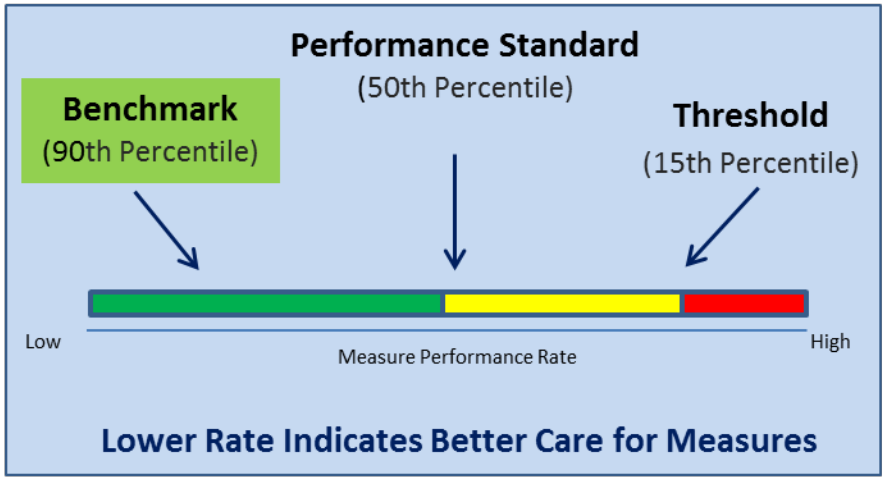
- **Six clinical measures make up 75% of TPS:**
  - Anemia Management
  - Vascular Access Type (VAT) Measure Topic
    - Access via Arteriovenous Fistula (AVF)
    - Access via Catheter
  - Kt/V Dialysis Adequacy Measure Topic
    - Adult Hemodialysis
    - Adult Peritoneal Dialysis
    - Pediatric Hemodialysis
- **Four reporting measures make up 25% of TPS:**
  - Dialysis Events (infections) via the Centers for Disease Control and Prevention's (CDC) National Healthcare Safety Network (NSHN)
  - Patient satisfaction via the In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH CAHPS) Survey
  - Mineral Metabolism
  - Anemia Management

PY 2015 Clinical Measures: Directionality

Kt/V Dialysis Adequacy (all);
VAT – Fistula



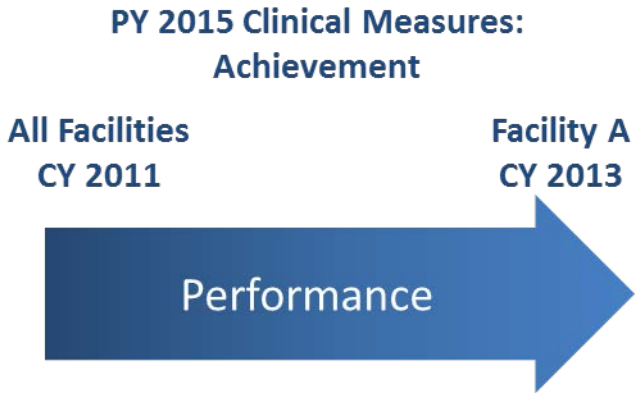
Anemia Management;
VAT – Catheter



PY 2015: Achievement and Improvement Scoring Methods

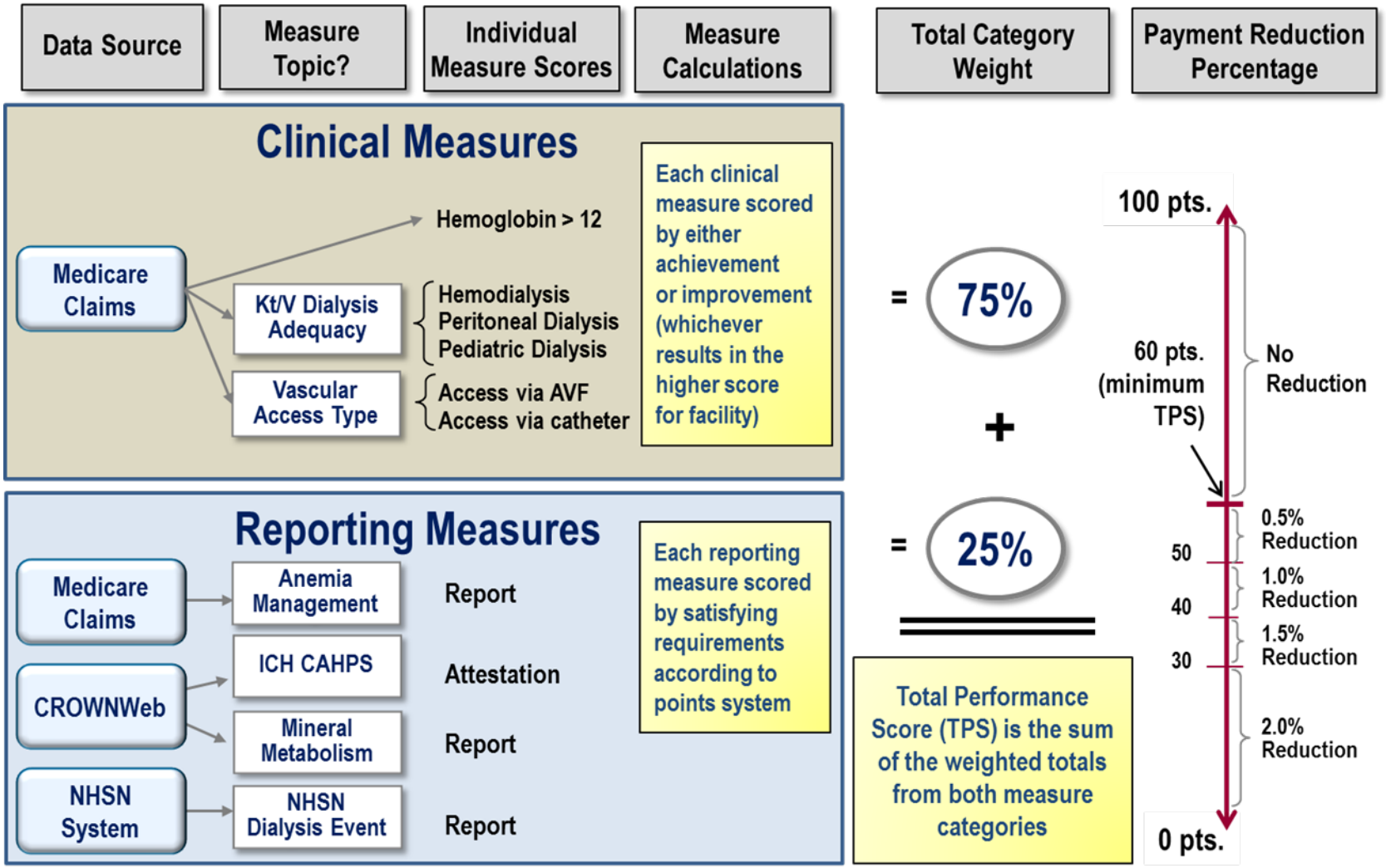
Facility gets the BETTER score from the two methods

Achievement Score: Points awarded by comparing the facility's rate during the performance period (CY 2013) with the performance of **all facilities nationally** during CY 2011



Improvement Score: Points awarded by comparing the facility's rate during the performance period (CY 2013) with **its own previous performance** during CY 2012

PY 2015 Scoring and Payment Reduction Methodology



Performance Score Report Overview

Presenter:

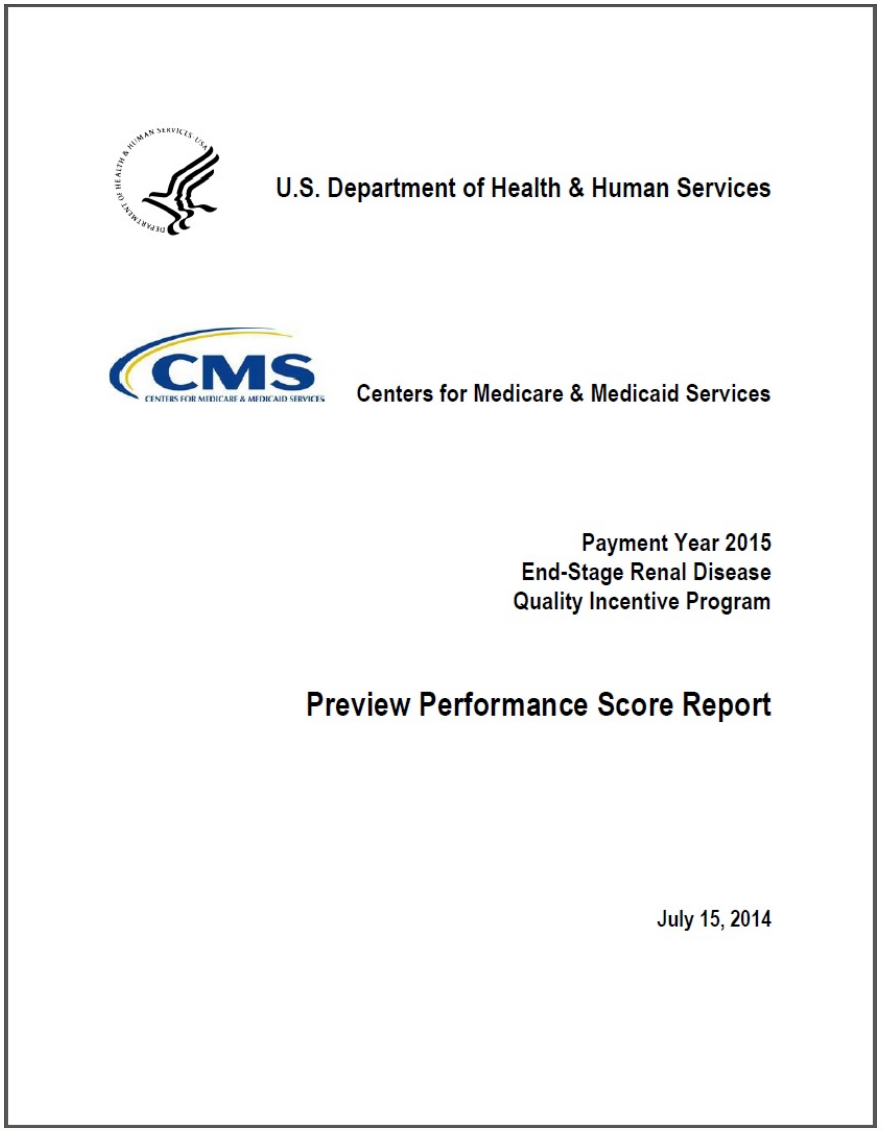
Anita Segar

Performance Score Report Contents

- **Your PSR contains the following information:**
  - Your **performance rate in 2013** on each PY 2015 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

Preview Performance Score Report

Your facility's performance scores will be detailed in the Preview PSR using tables and explanatory text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Centers for Medicare & Medicaid Services

Payment Year 2015
End-Stage Renal Disease
Quality Incentive Program

Preview Performance Score Report

July 15, 2014

Score Summary and Payment Reduction Percentage

PROJECTED* PAYMENT REDUCTION PERCENTAGE:	No reduction	
Performance Measures	**Measure Score**	**Measure Weight**
Clinical Measures		***Total of 75%***
Hemoglobin > 12g/dL Percent of patients with mean hemoglobin greater than 12 g/dL	10	25%
Kt/V Dialysis Adequacy measure topic Three measures for separate populations	10	25%
Percentage of adult hemodialysis patient-months with spKt/V greater than or equal to 1.2	10	
Percentage of adult peritoneal dialysis patient-months with Kt/V greater than or equal to 1.7	N/A	
Percentage of pediatric in-center hemodialysis patient-months with spKt/V greater than or equal to 1.2	N/A	
Vascular Access Type (VAT) measure topic Two measures for different access types	10	25%
Percent of hemodialysis patient-months using arteriovenous (AV) fistula with two needles during last treatment of the month	10	
Percent of hemodialysis patient-months with catheter in use for 90 days or longer prior to last hemodialysis session	10	
Reporting Measures		***Total of 25%***
Anemia Management Reporting Number of months for which facility reports hemoglobin/hematocrit values and ESA dosage, if applicable, on Medicare claims	10	6.25%
NHSN Dialysis Event Reporting Number of months for which facility reports NHSN dialysis events to the CDC	10	6.25%
Patient Experience of Care Survey Attestation Attest to successful administration of In-Center Hemodialysis Consumer Assessment of Health Providers and Systems (ICH CAHPS) survey	10	6.25%
Mineral Metabolism Reporting Number of months for which facility reports serum calcium and phosphorus levels of all patients to CROWNWeb	10	6.25%
Total Performance Score‡	**100**	

Preview Period Details

Presenter:

Anita Segar

Clarification Questions

- Purpose: Ensure that facilities completely understand how their measure 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

- **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
- **Formal inquiries must be submitted before 5:00 p.m. (EDT) on August 15, 2014**
- 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

- **All facilities need to ensure that they have the proper credentials to access DialysisReports.org to download and view their Preview PSR**
- **All facility passwords were reset on June 16, 2014**
- **Facility MAHs:**
  - Should test new passwords prior to July 15
  - Can set individual user accounts with user-specific permissions
  - Should consult the Frequently Asked Questions (FAQ) on **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

- Facilities may submit requests for help with log-ins, forgotten passwords, setting up user access, and other technical problems to DialysisReports.org

- Facilities unable to log in to DialysisReports.org may:
  - Email support@DialysisReports.org
  - Call toll-free: 877-665-1680, Mon-Fri, 9:00 a.m. – 5:00 p.m. (EDT)

DialysisReports.org Walk-Through

Presenter:

Ben Guidinger

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

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

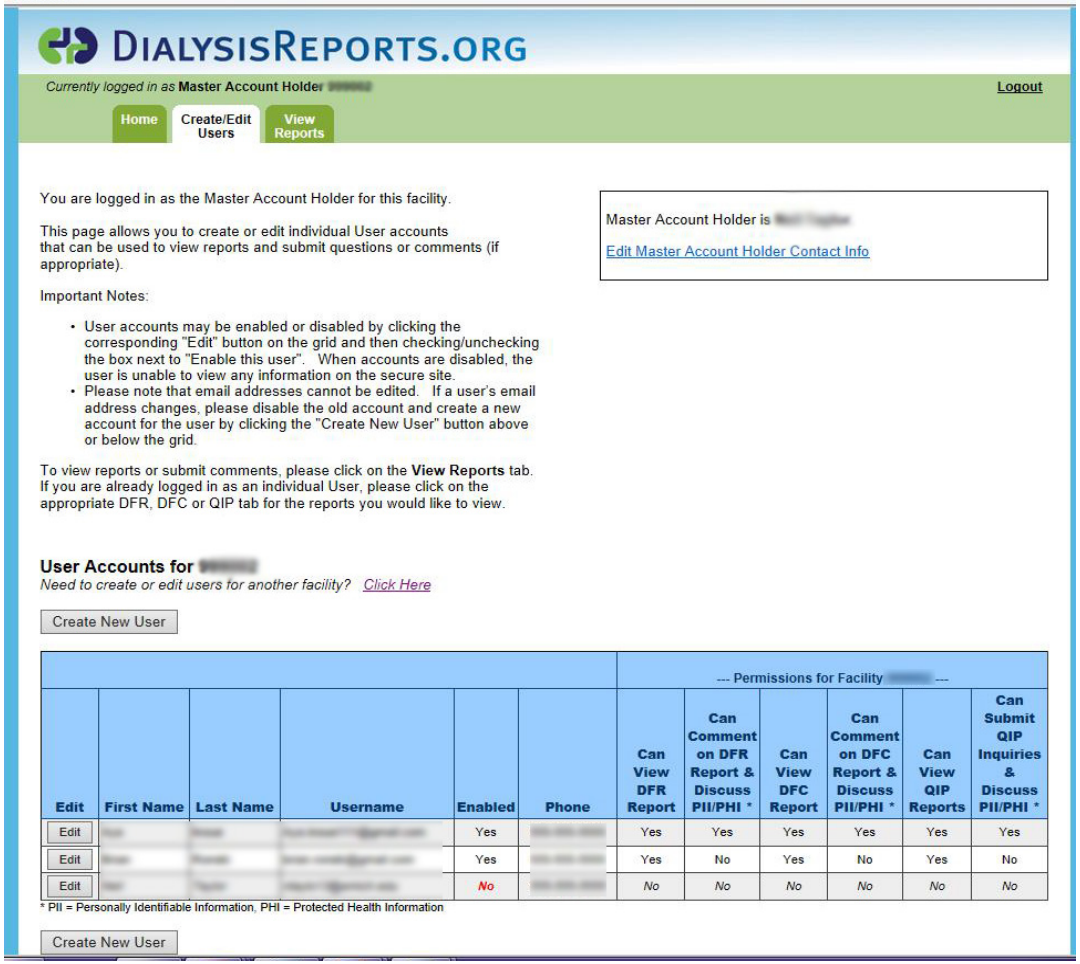
- **After clicking the Secure Log-in icon, two options appear:**
  - **View Reports**
    or
  - **Create/Edit Users**
- Log in to "Create/Edit Users" using MAH credentials
- Log in to "View Reports" using User Account credentials

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

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



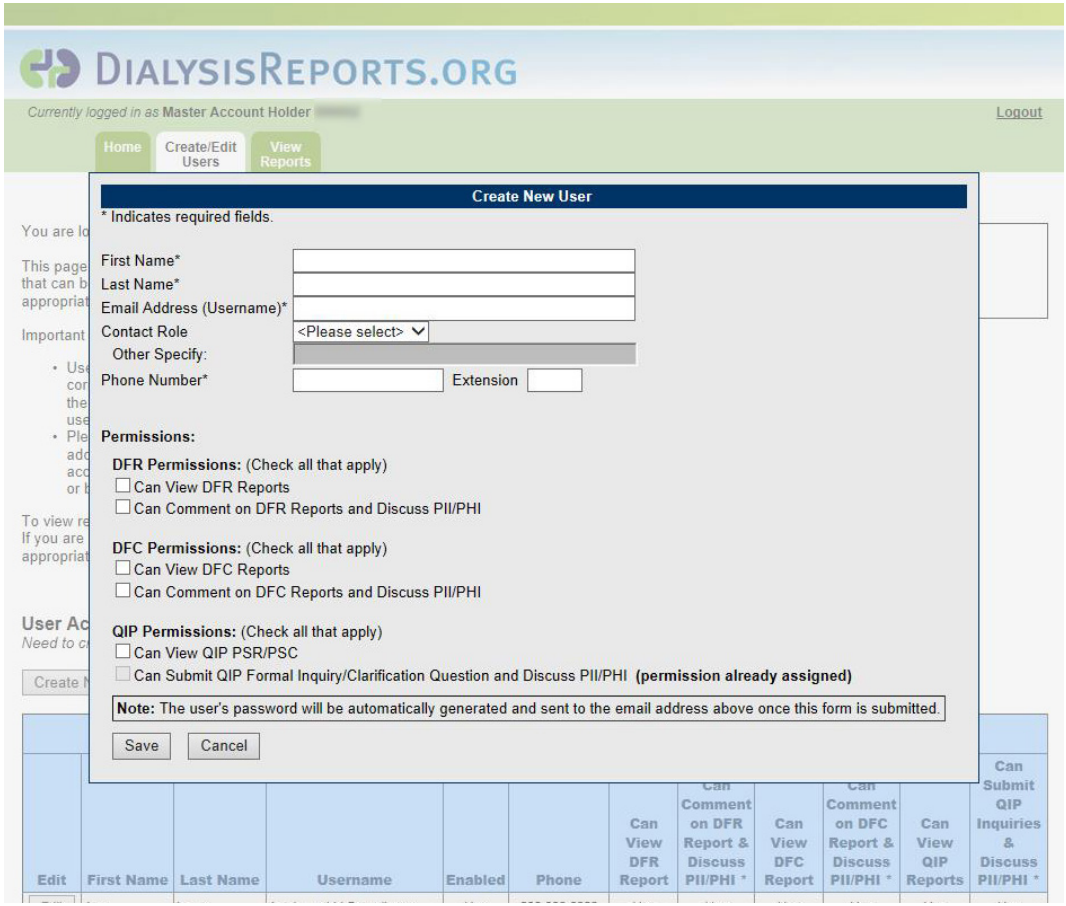
- **Beginning June 16, 2014, all user permissions will be reset. MAHs will need to log in and enable user accounts as well as reassign permissions for this year's Preview Period.**

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

MAH – Create New User

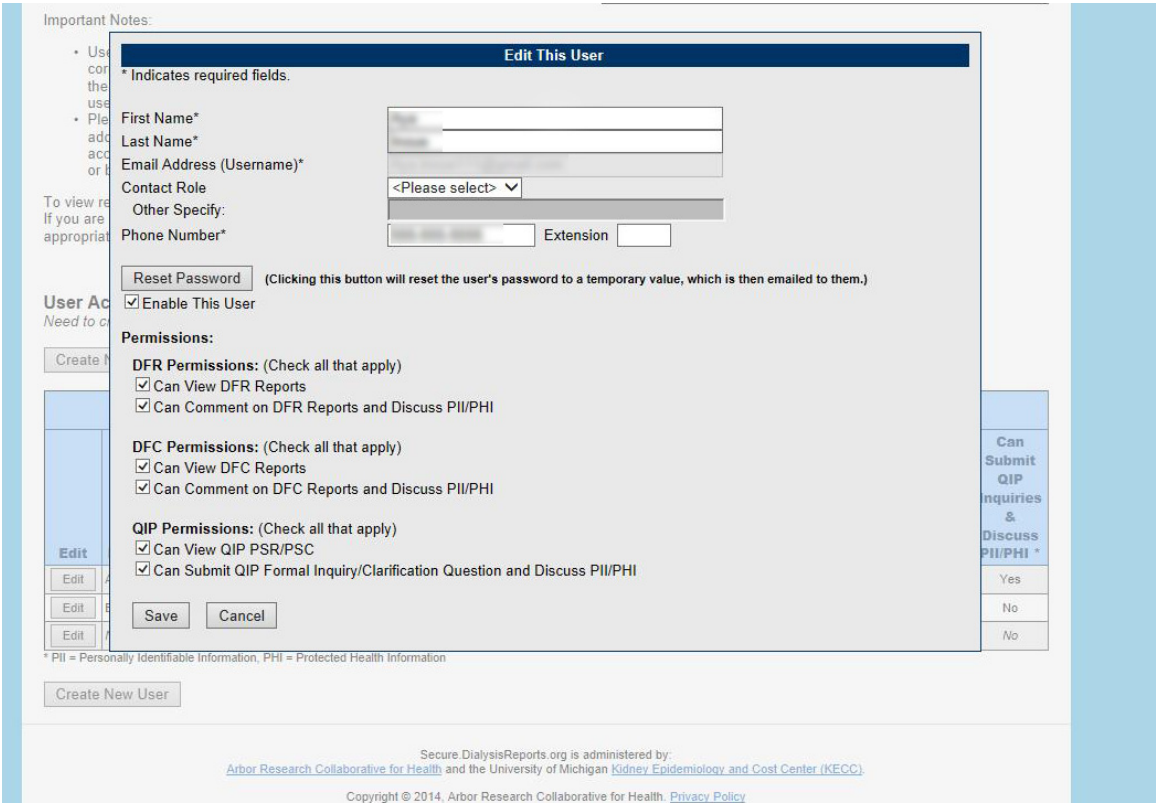
- **To create a new user account, click the Create New User button. The Create New User dialog box appears.**
- **Enter user's name and contact information**
- **Check the boxes to establish the desired permissions:**
  - Can View DFR Reports
  - Can Comment on DFR Reports and Discuss PII/PHI
  - Can 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**



- **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

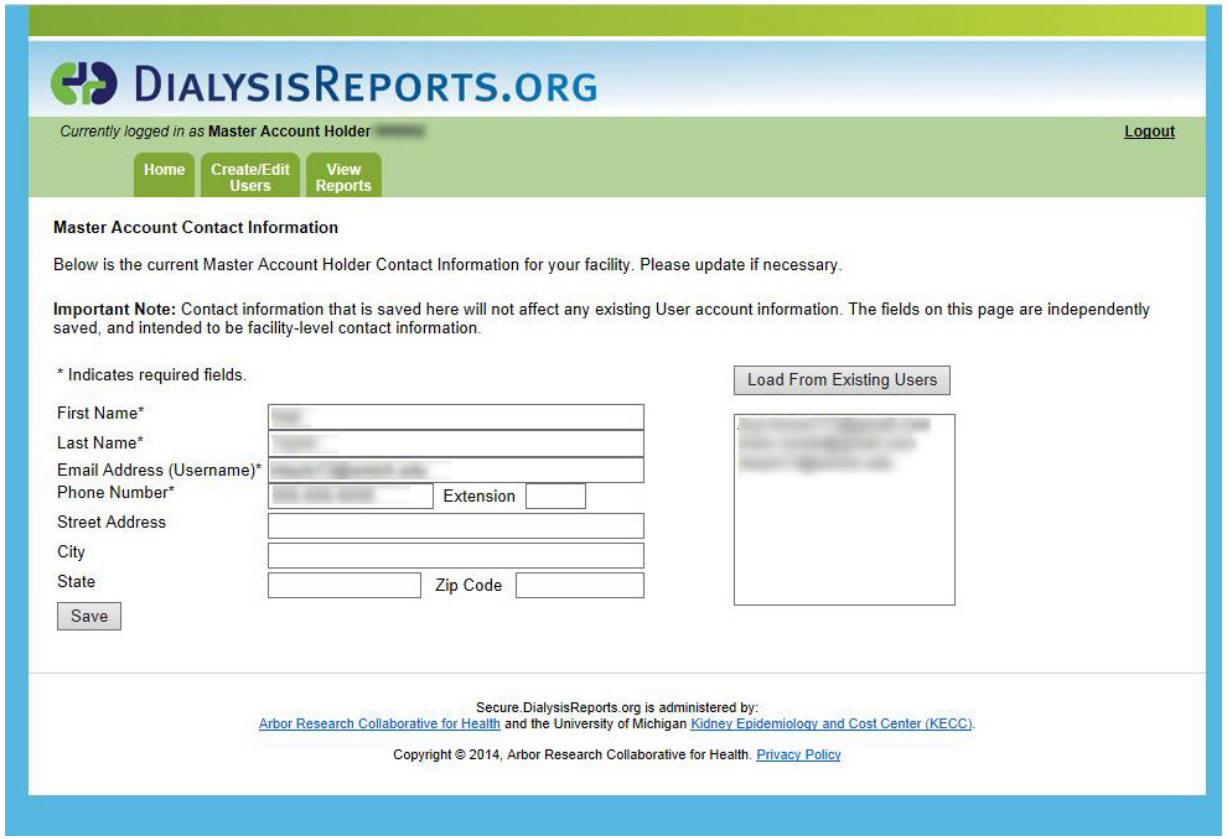
- **The MAH can edit an existing user account at any time**
  - This is where MAHs will reassign permissions to existing users for this year's Preview Period
- **From the Create/Edit Users tab, click the Edit button next to the desired user account in the table**
- **The "Edit This User" dialog box appears. 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

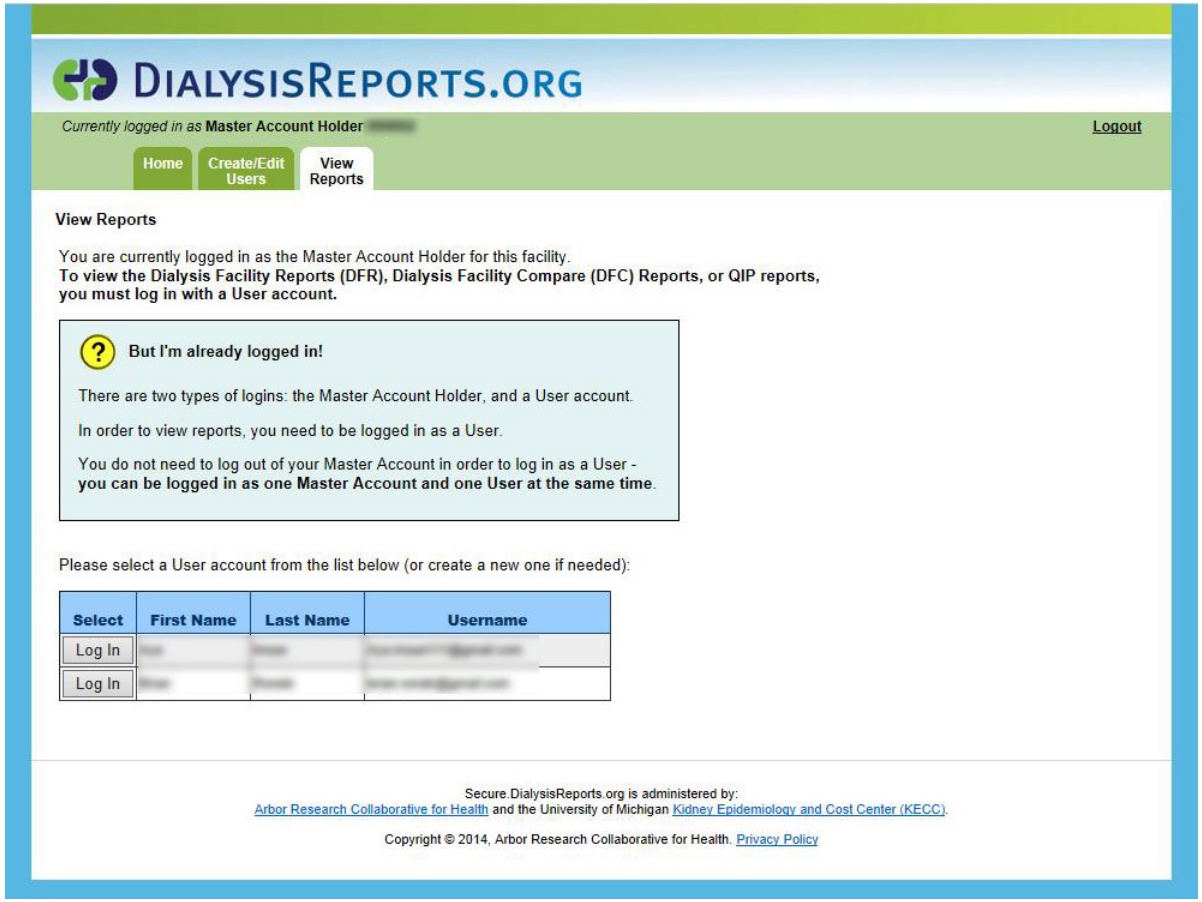
- **The current MAH for a facility is displayed in a box in the upper right corner of the Create/Edit Users tab**
- **To update the MAH information:**
  - Click the "Edit Master Account Holder Contact Info" link
  - Update the form fields
    or
    Click the "Load From Existing Users" button and select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



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



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

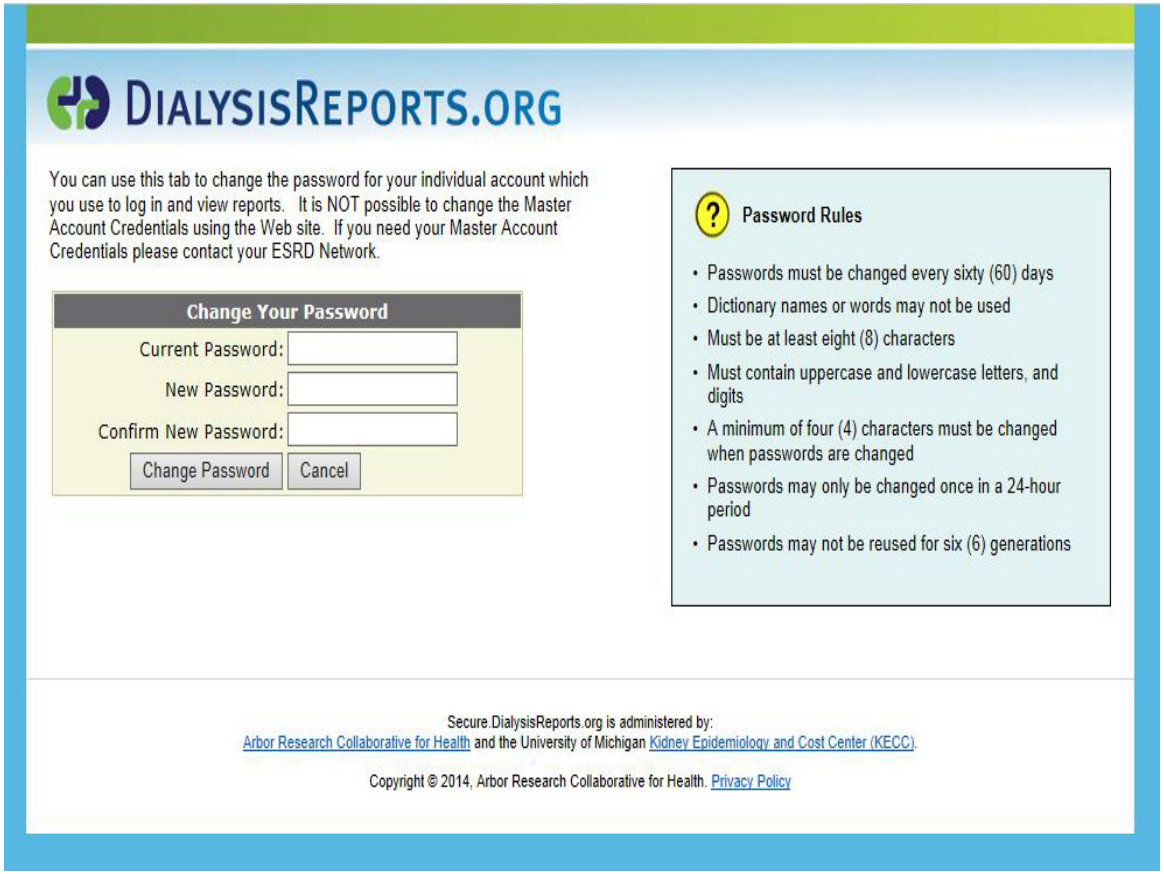
- **Click the Log In button next to the appropriate user account from the table of users** (limited to the facility associated with the currently active master account). The "User Login to View Reports" dialog box appears.
- **Enter username** (email address) and user account password
- **Click the Log 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

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

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



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)

User Permissions

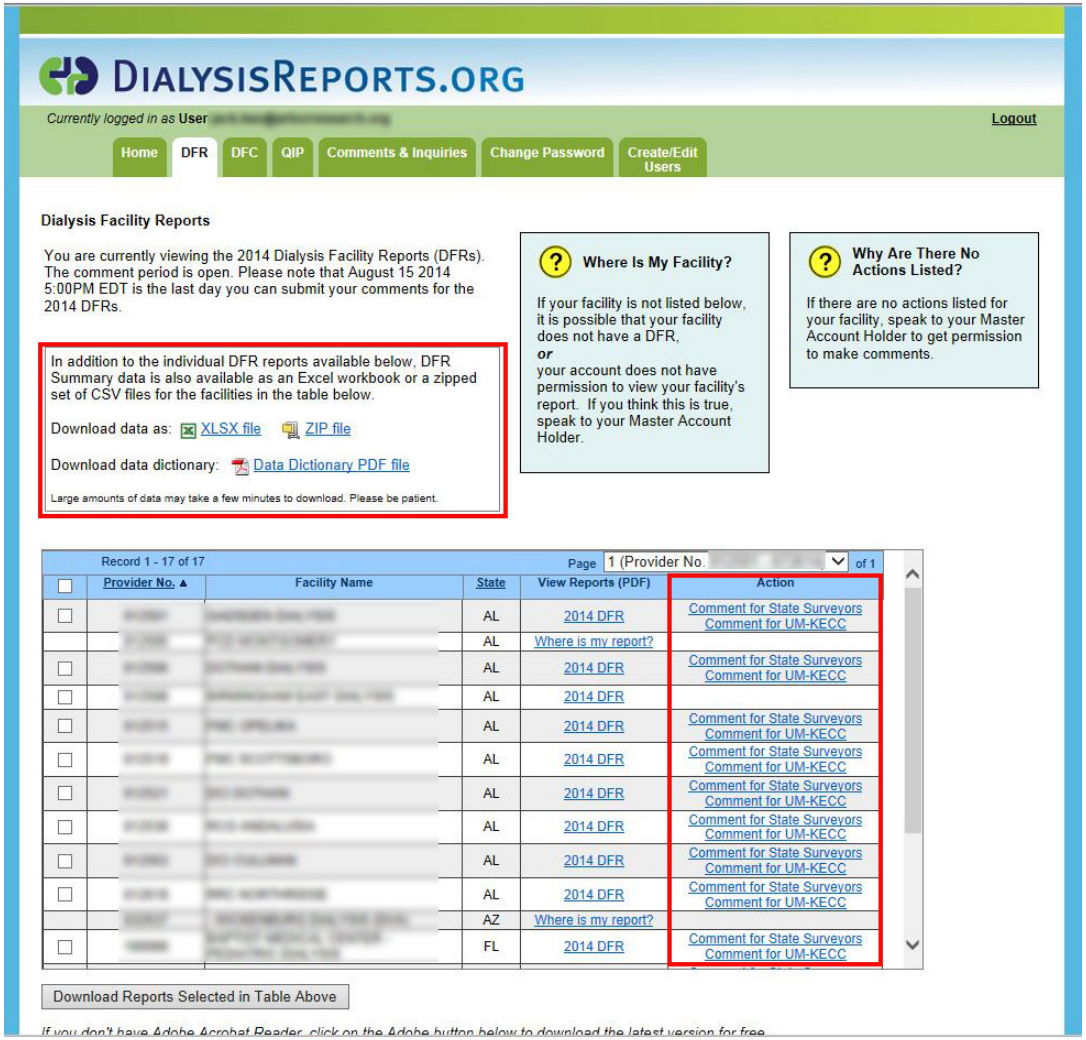
- **Facility users will see several tabs:**
  - Home
  - DFR
  - DFC
  - QIP
  - Comments & Inquiries
  - Change Password
  - Create/Edit Users

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

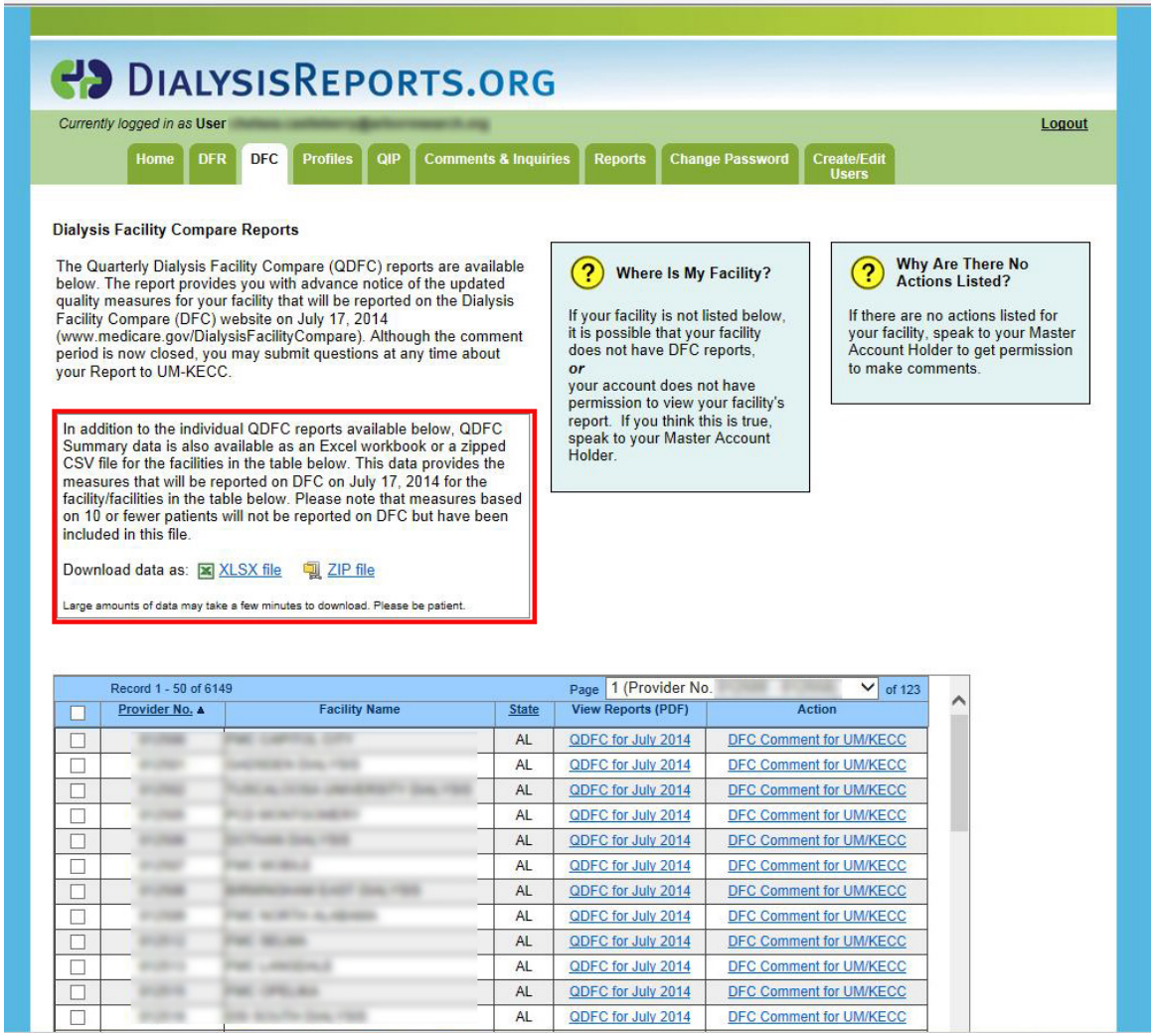
User – DFR Tab

- **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



User – DFC Tab

- **The DFC tab shows a table of DFC Reports the user is authorized to view, sorted by provider number**
- **The DFC Report provides advance notice of the updated quality measures for your facility** that will be reported on the DFC website each quarter (www.medicare.gov)
- **Links are available to download DFC summary data** (either as an Excel workbook or a zipped CSV file) for all facilities that the User is authorized to view



User – QIP Tab

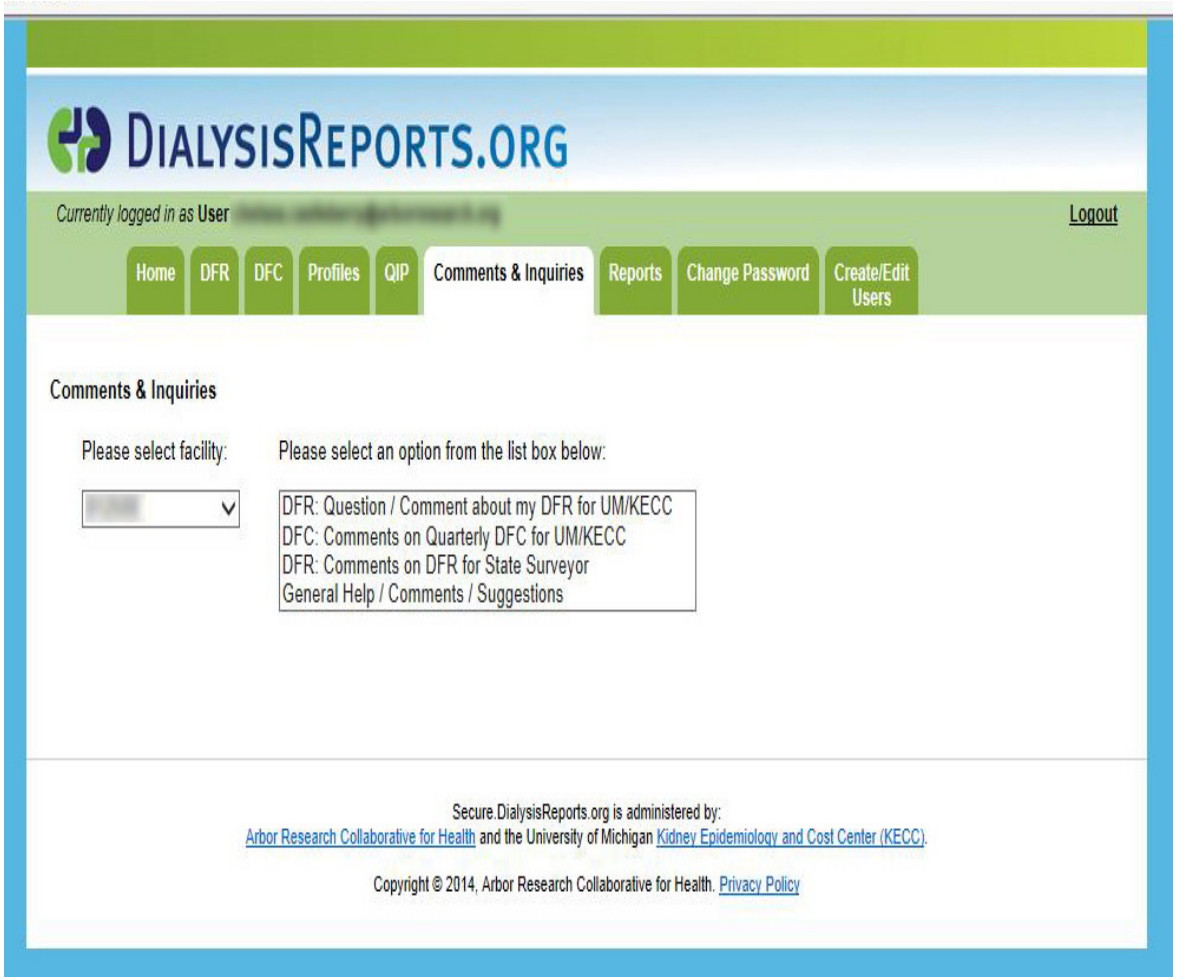
- **The QIP tab is where users can download Performance Score Reports (PSRs) and Performance Score Certificates (PSCs) that they are authorized to view**
- **Links are available to download Performance Score Summary data** (either as an Excel workbook or a zipped CSV file) for all facilities that the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

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

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



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**

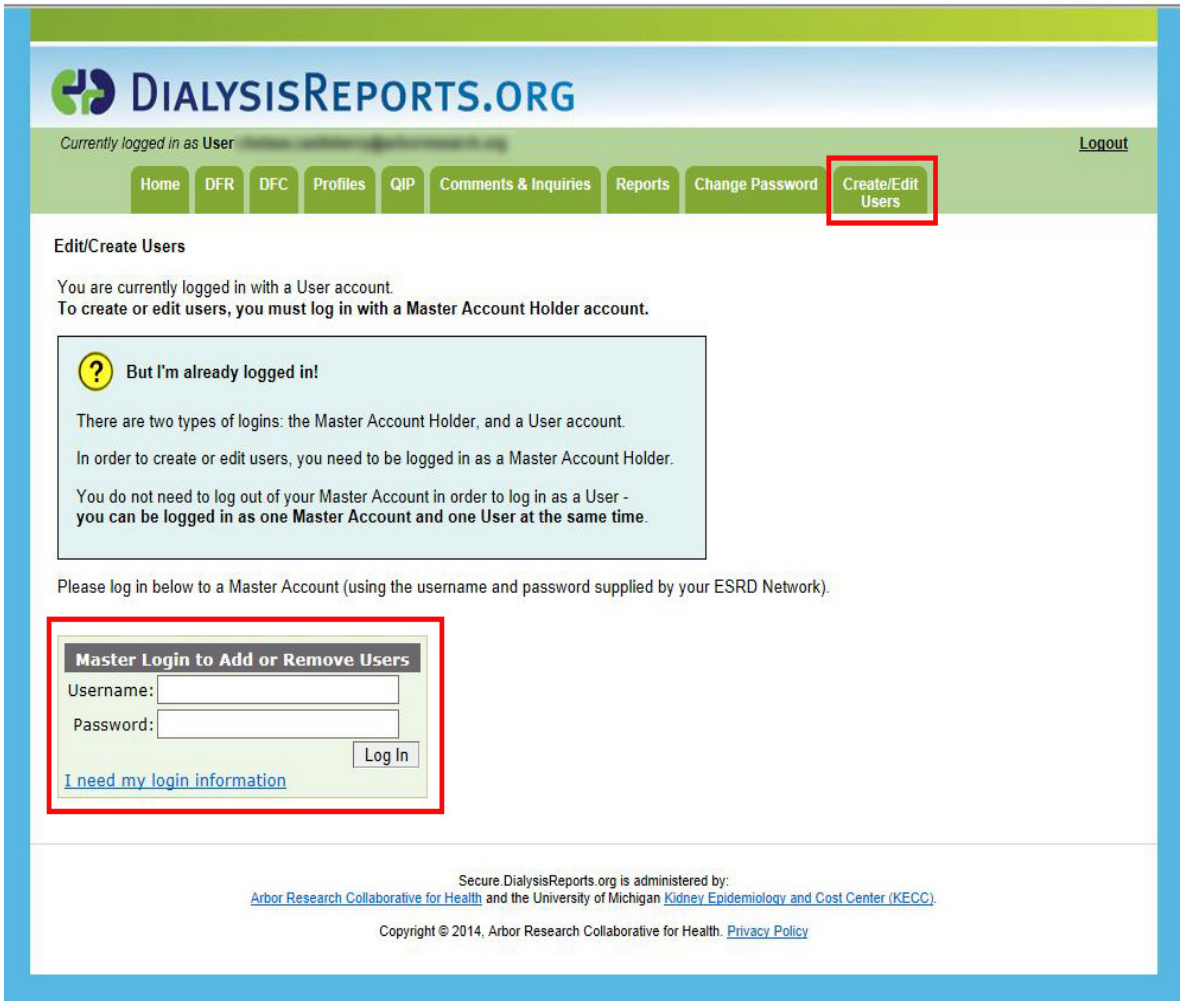
- **Note: Do not include Personally Identifiable Information (PII) or Protected Health Information (PHI) when submitting questions or inquiries to DialysisReports.org**

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

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**



Network User – Reports Tab

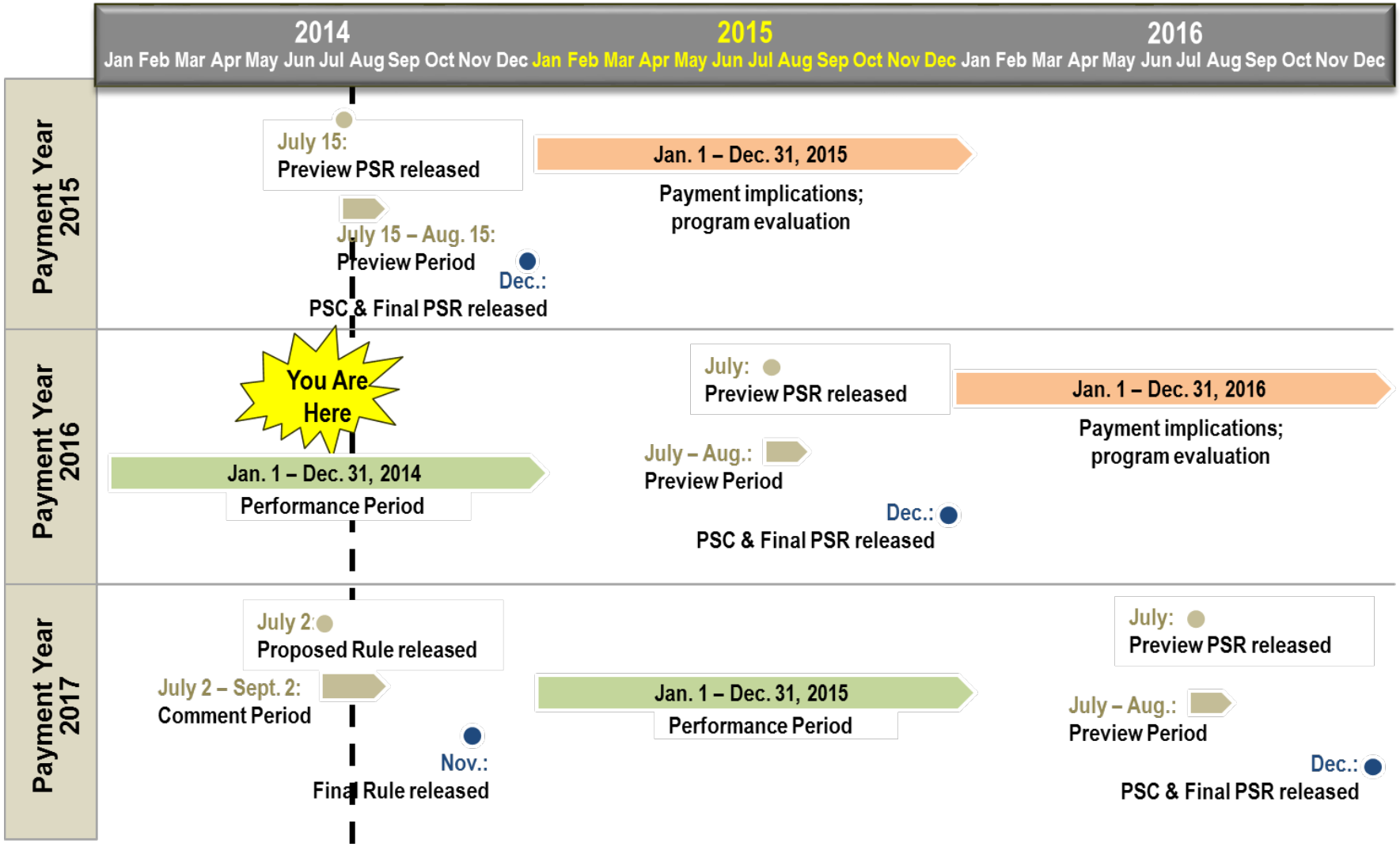
- **An additional tab called Reports is available to Network users**
- **The following Network-specific reports will be available to Network users on this tab:**
  - Dialysis Reports Website Account Updates
  - PSR Access Report
  - Certificate Access Report
  - PSR/PSC Access Log
- **These reports will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

Follow-Up Activities and Responsibilities

Presenter:

Heather Murr

ESRD QIP Critical Dates and Milestones



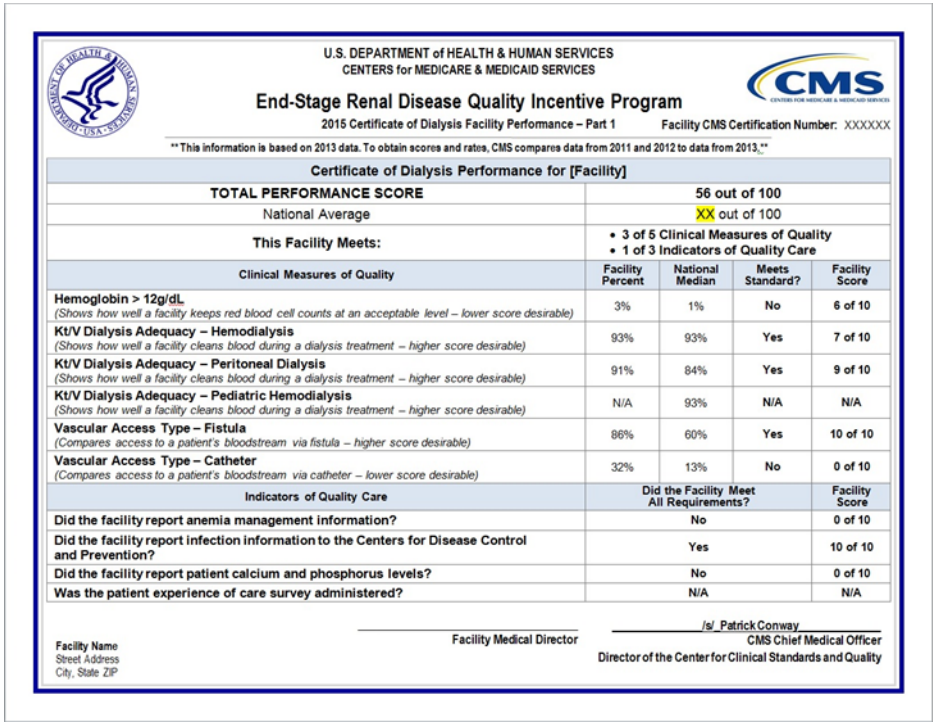
Activities Following the Preview Period

- **CMS will review any outstanding inquiries, then finalize facility TPS and payment reduction percentages**
  - Once scores are finalized, a final PSR will outline your facility's information
  - Once issued as final, a PSR cannot be changed
- **In December 2014, each facility's Performance Score Certificate (PSC) will be posted**
- **By the end of January 2015, performance score data will be made available to the public** on http://www.medicare.gov/Dialysis
- Payment reductions (if applicable) are applied to dialysis services **beginning January 1, 2015**, and will remain in place for the duration of the year

Performance Score Certificate

- **It is your facility's responsibility to print your PSCs in mid-December**
  - The certificate must be **posted by the first business day of 2015** and remain posted throughout the year
  - The certificate must be **prominently displayed in a patient area**
  - **English and Spanish** versions must be posted
- **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

CMS

End-Stage Renal Disease Quality Incentive Program

2015 Certificate of Dialysis Facility Performance – Part 1 Facility CMS Certification Number: XXXXXX

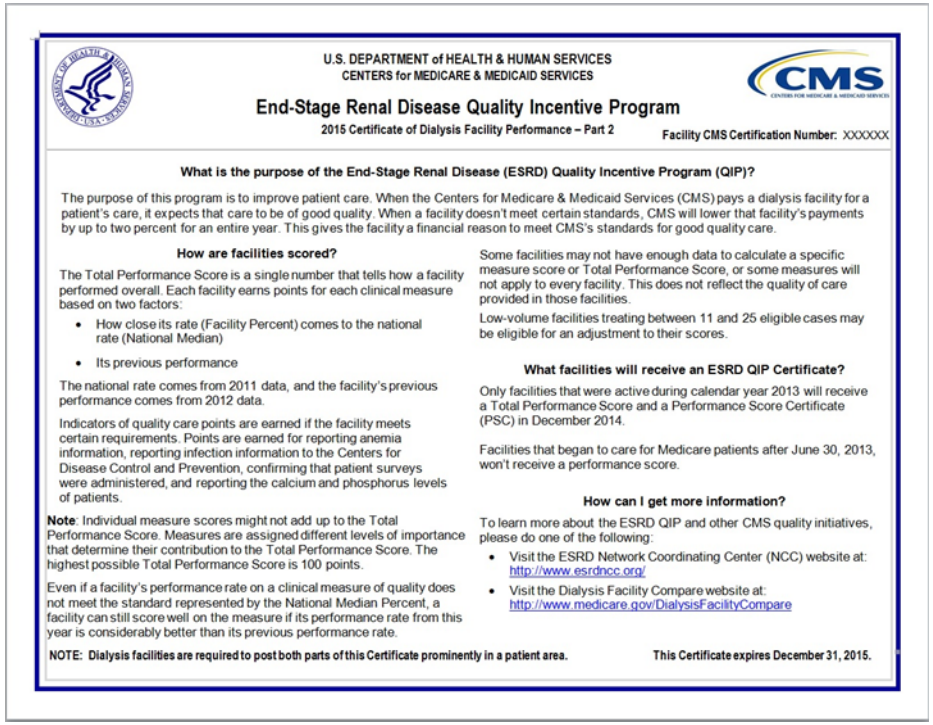
** This information is based on 2013 data. To obtain scores and rates, CMS compares data from 2011 and 2012 to data from 2013.**

Certificate of Dialysis Performance for [Facility]				
TOTAL PERFORMANCE SCORE				56 out of 100
National Average				XX out of 100
This Facility Meets:				• 3 of 5 Clinical Measures of Quality • 1 of 3 Indicators of Quality Care
Clinical Measures of Quality	**Facility Percent**	**National Median**	**Meets Standard?**	**Facility Score**
Hemoglobin > 12g/dL *(Shows how well a facility keeps red blood cell counts at an acceptable level – lower score desirable)*	3%	1%	No	6 of 10
Kt/V Dialysis Adequacy – Hemodialysis *(Shows how well a facility cleans blood during a dialysis treatment – higher score desirable)*	93%	93%	Yes	7 of 10
Kt/V Dialysis Adequacy – Peritoneal Dialysis *(Shows how well a facility cleans blood during a dialysis treatment – higher score desirable)*	91%	84%	Yes	9 of 10
Kt/V Dialysis Adequacy – Pediatric Hemodialysis *(Shows how well a facility cleans blood during a dialysis treatment – higher score desirable)*	N/A	93%	N/A	N/A
Vascular Access Type – Fistula *(Compares access to a patient's bloodstream via fistula – higher score desirable)*	86%	60%	Yes	10 of 10
Vascular Access Type – Catheter *(Compares access to a patient's bloodstream via catheter – lower score desirable)*	32%	13%	No	0 of 10
Indicators of Quality Care			**Did the Facility Meet All Requirements?**	**Facility Score**
Did the facility report anemia management information?			No	0 of 10
Did the facility report infection information to the Centers for Disease Control and Prevention?			Yes	10 of 10
Did the facility report patient calcium and phosphorus levels?			No	0 of 10
Was the patient experience of care survey administered?			N/A	N/A

Facility Medical Director

/s/ Patrick Conway
CMS Chief Medical Officer
Director of the Center for Clinical Standards and Quality

Facility Name
Street Address
City, State ZIP



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

CMS

End-Stage Renal Disease Quality Incentive Program

2015 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's 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)
- Its previous performance

The national rate comes from 2011 data, and the facility's previous performance comes from 2012 data.

Indicators of quality care points are earned if the facility meets certain requirements. Points are earned for reporting anemia information, reporting infection information to the Centers for Disease Control and Prevention, confirming that patient surveys were administered, and reporting 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.

Even if a facility's performance rate on a clinical measure of quality does not meet the standard represented by the National Median Percent, a facility can still score well on the measure if its performance rate from this year is considerably better than its previous performance rate.

Some facilities may not have enough data to calculate a specific measure score or Total Performance Score, or some measures will not apply to every facility. This does not reflect the quality of care provided in those facilities.

Low-volume facilities treating between 11 and 25 eligible cases may be eligible for an adjustment to their scores.

What facilities will receive an ESRD QIP Certificate?

Only facilities that were active during calendar year 2013 will receive a Total Performance Score and a Performance Score Certificate (PSC) in December 2014.

Facilities that began to care for Medicare patients after June 30, 2013, won't receive a performance score.

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/DialysisFacilityCompare

NOTE: Dialysis facilities are required to post both parts of this Certificate prominently in a patient area.

This Certificate expires December 31, 2015.

Recap: Facility Responsibilities

- **Establish your account to access** DialysisReports.org
- **Facilities and Networks can access their Preview PSRs beginning July 15**
  - Recommendation: Submit clarification questions by August 1 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 15 at 5:00 p.m. (EDT)**
- **Download, print, and post** your English and Spanish PSCs by the first business day in January 2015
- **Educate your staff** about the ESRD QIP so they can answer patient questions about the publicly posted certificate

Key ESRD QIP Dates to Remember

- **PY 2014 payment reductions applied** (January 1 – December 31, 2014)
- **PY 2015 Preview Period** (July 15 – August 15, 2014)
- **PY 2016 Performance Period** (January 1 – December 31, 2014)
- **PY 2017 and PY 2018 Rulemaking**
  - Proposed rule published (displayed July 2, 2014)
  - 60-day comment period (ends September 2, 2014)
  - Final rule published (November 2014)
- **PY 2015 PSC** (available for download mid-December 2014; post by first business day in 2015)

PY 2015 payment reductions are effective January 1, 2015

ESRD QIP Resources

- **ESRD QIP section of CMS website:** www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/index.html
- **MIPPA:** www.gpo.gov/fdsys/pkg/PLAW-110publ275/pdf/PLAW-110publ275.pdf
- **ESRD Center on CMS website:** www.cms.gov/Center/Special-Topic/End-Stage-Renal-Disease-ESRD-Center.html?redirect= /center/esrd.asp
- **Dialysis Facility Compare (DFC):** www.medicare.gov/dialysisfacilitycompare
- **Dialysis Facility Reports (DFR):** www.dialysisreports.org
  - ESRD QIP measure specifications: www.dialysisreports.org/ESRDMeasures.aspx
- **United States Renal Data System (USRDS):** www.usrds.org
- **ESRD Network Coordinating Center (NCC):** www.esrdncc.org
- **Dialysis Outcomes and Practice Patterns Study (DOPPS):** www.dopps.org
- **National Quality Forum:** www.qualityforum.org

Resources: PY 2015 Clinical Measure Technical Specifications

- **Anemia Management: Hemoglobin > 12 g/dL:** www.dialysisreports.org/pdf/esrd/public-measures/AnemiaManagement-HGB-2015-FR.pdf
- **Vascular Access Type – Arterial Venous Fistula:** www.dialysisreports.org/pdf/esrd/public-measures/VascularAccess-Fistula-2015-FR.pdf
- **Vascular Access Type – Catheter ≥ 90 Days:** www.dialysisreports.org/pdf/esrd/public-measures/VascularAccess-Catheter-2015-FR.pdf
- **Adult Hemodialysis Adequacy:** www.dialysisreports.org/pdf/esrd/public-measures/HemodialysisAdequacy-ktv-2015-FR.pdf
- **Adult Peritoneal Dialysis Adequacy:** www.dialysisreports.org/pdf/esrd/public-measures/PeritonealDialysisAdequacy-ktv-2015-FR.pdf
- **Pediatric Hemodialysis Adequacy:** www.dialysisreports.org/pdf/esrd/public-measures/PediatricHemodialysisAdequacy-ktv-2015-FR.pdf

Resources: PY 2015 Reporting Measure Technical Specifications

- **ICH CAHPS Survey Administration:** www.dialysisreports.org/pdf/esrd/public-measures/ICHCAHPS-2015-FR.pdf
- **NHSN Dialysis Event Reporting:** www.dialysisreports.org/pdf/esrd/public-measures/ICHCAHPS-2015-FR.pdf
- **Mineral Metabolism Reporting:** www.dialysisreports.org/pdf/esrd/public-measures/ICHCAHPS-2015-FR.pdf
- **Anemia Management Reporting:** www.dialysisreports.org/pdf/esrd/public-measures/AnemiaManagement-Reporting-2015-FR.pdf

Question & Answer Session

ESRDQIP@cms.hhs.gov

A Message from the CMS
Provider Communications Group

Presenter:

Aryeh Langer

Evaluate Your Experience

- 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.

Thank You

- 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