Understanding Measures, Star Ratings, and Quality Outcomes

July 13, 2021
3:30 pm ET
<table>
<thead>
<tr>
<th>Topic</th>
<th>Speaker</th>
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| Health Equity                                                        | Andrea Curtis  
Analyst, Clinical Standards Group  
Centers for Medicare & Medicaid Services |
| Delay of October 2021 Dialysis Facility Data Release on Medicare.gov | Golden Horton, MS  
Technical Lead, Dialysis Facility Data on Medicare.gov,  
Division of Quality Measurement,  
Centers for Medicare & Medicaid Services |
| Dry Run of revised SMR, SHR, STrR, SRR                               | Golden Horton, MS                                                        |
| Spring 2022 Dialysis Facility Data Release on Medicare.gov           | Golden Horton, MS                                                        |

Questions
Health Equity
Andrea Curtis
Clinical Standards Group, CMS
Health Equity in the Conditions of Participation

» Please send your feedback and ideas on addressing health equity in the Conditions of Participation to: HE.Outreach@cms.hhs.gov
Delay of October 2021 Dialysis Facility Data Release on Medicare.gov

Golden Horton, MS
Division of Quality Measurement, CMS
Background

» Typically, Dialysis Facility data is updated quarterly on Medicare.gov, with refreshes in January, April, July, and October.

» Due to data collection suspensions related to the COVID-19 Pandemic the January, April, and July 2021 refreshes of data did not take place.

» CMS originally planned to update all measures during the October 2021 Release.
Delay of October 2021 Data Release

- The ongoing EQRS users data suspension guidelines, outlined via the January 29, 2021 EQRS Announcement*, impacts available data for Dialysis Facilities
- As a result, the October 2021 Release of Dialysis Facility data will be delayed until Spring 2022, and data from the October 2020 Release will remain on Medicare.gov until the next release
- Additionally, Star Ratings will not be updated with this release

*https://mycrownweb.org/2021/01/eqrs-system-announcement-jan-2021/
Delay of October 2021 Data Release

» CMS will continue to monitor and evaluate the impact of the EQRS data availability issues for the measures and will provide additional guidance on the specific timing of future releases of Dialysis Facility data on Medicare.gov at a later date.

» Later in this presentation, we will review the measures that will be updated in the Spring 2022 release
Dry Run of Updated SMR, SHR, STTrR, SRR

Golden Horton, MS

Division of Quality Measurement, CMS
Background

» From 2018 – 2020, measures reported on Medicare.gov that are NQF endorsed underwent comprehensive review. Measure specifications were reviewed, tested and updated based on new information since the last review cycle.

» As a result of this review, several measures were improved, with the following measures receiving significant updates:
  - Standardized Mortality Ratio for Dialysis Facilities (SMR, NQF #0369)
  - Standardized Hospitalization Ratio for Dialysis Facilities (SHR, NQF #1463)
  - Standardized Readmission Ratio for Dialysis Facilities (SRR)
  - Standardized Transfusion Ratio for Dialysis Facilities (STrR, NQF #2979)
**Dry Run July 15 – August 15, 2021**

» CMS plans to release facility specific reports in order to allow dialysis facilities to preview updated calculations of the SMR, SHR, STrR, and SRR.

» The measure specifications were updated to reflect the most recent version of the measure submitted to NQF.

» These results will not be reported on Medicare.gov until data for the end of the year is available and a regular preview period has been held.

» Facilities will be able to preview their reports via the DialysisData.org website, similar to the typical quarterly preview process.
Dry Run July 15 – August 15, 2021

» The CMS ECE policy restricts the use of claims data from March-June 2020.
» EQRS data incompleteness for the end of 2020 impacts data from the last three months of the year
» A summary of data available for the measures in this report is provided in the table below.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Data Availability</th>
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<tbody>
<tr>
<td>Standardized Mortality Ratio (SMR)</td>
<td></td>
</tr>
<tr>
<td>Standardized Hospitalization Ratio (SHR)</td>
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<tr>
<td>Standardized Transfusion Ratio (STrR)</td>
<td>January-February, July-December, 2020  (8 months)</td>
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<tr>
<td>Standardized Readmission Ratio (SRR)</td>
<td>January, July-October, 2020      (5 months)</td>
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Summary of changes – Medicare Advantage

» Prior measure inclusion criteria based on “active Medicare coverage” identified through presence of Medicare inpatient and outpatient claims did not account completely for Medicare Advantage (MA) patients
  – Dialysis and outpatient claims not available for MA patients resulting in unobserved events and comorbidities for these patients

» Summary of changes to mitigate bias:
  – Added a variable for MA status (SHR and SRR)
  – Identified and added additional MA time at risk (SHR, SMR)
  – MA patients are now excluded from STrR
Medicare Advantage Changes: STrR

The revised STrR excludes Medicare Advantage patients for three reasons:

– Marked regional geographic variation in Medicare Advantage dialysis patients were identified.
– Unable to identify outpatient transfusion events for these patients. Outpatient transfusions account for ~15% of all transfusions in the chronic dialysis population.
– The source for most claims-based diagnoses used for exclusion of patients from the STrR are derived from outpatient claims.
Medicare Advantage Changes: SHR

» The SHR was revised in the following ways to mitigate bias:

- All time at risk for MA patients is included in the measure to mitigate bias related to definition of “active Medicare coverage” based on inpatient and outpatient claims.

- Since MA coverage was associated with substantially lower hospitalization risk we include an indicator in the model for the proportion of patient months with MA coverage.

- Limit ascertainment of claims-based prevalent comorbidities for risk adjustment to inpatient claims, using all available inpatient claims in the prior 365 days for both Medicare Primary (FFS) and MA patients.
Medicare Advantage Changes: SMR

The SMR was revised in the following ways to mitigate bias:

- All time at risk for MA patients is included in the measure to mitigate bias related to definition of “active Medicare coverage” based on inpatient and outpatient claims.
- Limit ascertainment of claims-based prevalent comorbidities for risk adjustment to inpatient claims, using all available inpatient claims in the prior 365 days for both Medicare Primary (FFS) and MA patients.
Medicare Advantage Changes: SRR

» The SRR was revised in the following ways to mitigate bias:

– Limiting the identification of claims-based comorbidity adjusters to inpatient claims sources for both FFS and MA patients. We use all available inpatient claims from the index discharge AND from other inpatient claims in the 12 months prior to the index discharge for both FFS and MA patients.

– Added a model covariate that indicates whether or not the patient was Medicare Advantage at the time of index discharge
Other changes

» In addition to the revisions to account for MA patients, several other revisions were made, including:
  – Changes to the adjustment for nursing home status
  – Changes to the adjustment for BMI
  – Requiring $1200 of paid Medicare claims for each patient month (up from $900) to define Medicare Fee for Service “active Medicare” inclusion
Spring 2022 Dialysis Facility Data Release on Medicare.gov

Golden Horton, MS

Division of Quality Measurement, CMS
Spring 2022 Data Release

» As we mentioned earlier, the October 2021 Release of Dialysis Facility data will be delayed until Spring 2022, and data from the October 2020 Release will remain on Medicare.gov until the next release

» Each of the measures will be calculated using most of CY 2020 data, excluding the exception period of March-June 2020

» The updated versions of STrR, SMR, SHR, and SRR will be included

» Star Ratings will not be updated with this release

» The Preview Period will be held prior to the public release of the measures
Questions?

» For questions please email the UM-KECC helpdesk at dialysisdata@umich.edu

» For questions about CROWNWeb data submission, contact the QualityNet helpdesk at (866) 288-8912 or http://help.mycrownweb.org/

» For questions about the ICH CAHPS® Survey, contact the project team at https://ichcahps.org
Thank you!