



Dialysis Facility Compare: Quality Measure Update

June 28, 2017
1:00 P.M. ET

Agenda

Topic	Speaker
Dialysis Facility Compare July Preview Period: July 15-August 15	Elena K. Balovlenkov, MS, RN, CHN Technical Lead, Dialysis Facility Compare, Division of Quality Measurement, Centers for Medicare & Medicaid Services
Dialysis Facility Compare October 2017 Quality Measures	
New and Modified Measures Table	Joel Andress, PhD
Dialysis Facility Compare 2017 Star Ratings Update	End-Stage Renal Disease Measures Development Lead, Division of Quality Measurement, Centers for Medicare & Medicaid Services
Star Ratings Technical Expert Panel	
Patient List Requests	
Including the Patient Voice	Elena K. Balovlenkov, MS, RN, CHN
Patient Summit	Technical Lead, Dialysis Facility Compare, Division of Quality Measurement, Centers for Medicare & Medicaid Services
How Can You Help?	
Questions	

Dialysis Facility Compare July Preview Period: July 15-August 15

Public Reporting for 2017

- » Quality measure results publicly reported on Dialysis Facility Compare (DFC) will be refreshed
 - There are no changes to the DFC measure set for 2017
- » The DFC Star Ratings will be refreshed
 - There are no changes to the Star Ratings methodology for 2017

New and Modified Measures Table

- » Provides a preview of the October 2018 measure candidates
- » Information available only to facilities, starting with the preview period

DFC October 2017 Quality Measures

Measure	NQF #	Included in Star Ratings?
Percentage of adult hemodialysis patients who had enough wastes removed from their blood during dialysis (Kt/V greater than or equal to 1.2)	0249	Yes
Percentage of adult peritoneal dialysis patients who had enough wastes removed from their blood (Kt/V greater than or equal to 1.7)	0318	Yes
Percentage of children who had enough wastes removed from their blood during hemodialysis (Kt/V greater than or equal to 1.2)	1423	Yes
Percentage of children who had enough wastes removed from their blood during peritoneal dialysis (Kt/V greater than or equal to 1.8)	2706	No
Percentage of adult dialysis patients who received treatment through an arteriovenous fistula	0257	Yes
Percentage of adult dialysis patients who had a catheter (tube) left in a vein longer than 90 days for their regular hemodialysis treatments	0256	Yes
Adult dialysis patients who had too much calcium in their blood: Average calcium greater than 10.2 mg/dL	1454	Yes
Standardized Mortality Ratio (SMR)	0369	Yes
Standardized Transfusion Ratio (STrR)	N/A	Yes
Standardized Hospitalization Ratio (SHR)	1463	Yes
Standardized Readmission Ratio (SRR)	2496	No
NHSN Bloodstream Infection – Standardized Infection Ratio (SIR)	1460	No
In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH-CAHPS) patient experience with care	0258	No

New and Modified Measures Table

- » Several National Quality Forum (NQF)-endorsed measures were added or updated in 2016 that will be previewed to facilities during the July preview period
- » The set of new and updated measures will be included in a separate table in the preview report

New and Modified Measures Table

- » This additional table will allow facilities to preview their new measure data before the start of public reporting in the October 2018 DFC release
- » Facilities will be able to ask questions and request patient lists for these measure calculations
- » The table will be calculated for calendar year 2016 data and remain available for each quarterly preview period leading up to the preview for October 2018 (published in July 2018)

New and Updated Quality Measures in New and Modified Measures Table

Measure	NQF #
Proportion of Patients with Hypercalcemia	1454
Standardized Mortality Ratio (SMR)	0369
Standardized Hospitalization Ratio (SHR)	1463
Standardized Transfusion Ratio (STrR)	2979
Standardized Fistula Rate	2977
Long Term Catheter Rate	2978
Measurement of Normalized Protein Catabolic Rate (nPCR) for Pediatric Hemodialysis (HD) Patients	1425

DFC 2017 Star Ratings Update

- » Again, measures used in the October 2017 Star Ratings are the same measures used in the previous Star Ratings

- » So, why is this?

Star Ratings Technical Expert Panel

- » In early 2017, DFC convened a Technical Expert Panel (TEP) to review and make recommendations on:
 - Measures to include/retire
 - Star Ratings scoring methodology
 - Presentation of the Star Ratings on the DFC website
- » The TEP included patient and provider subject matter experts

Key Star Ratings TEP Recommendations

- » Replace current Vascular Access, Hypercalcemia, SMR, SHR, and STrR quality measures with the recently updated versions that were endorsed by NQF
- » Include Pediatric PD Kt/V in the Star Ratings
- » Add ICH-CAHPS as a separate rating from the overall Star Ratings
- » Provided input on potential next steps for re-baselining

For a complete summary, see the Technical Expert Panel final report [here](#).

Key Star Ratings TEP Recommendations

- » 54 percent of TEP members supported the addition of Standardized Readmission Ratio (SRR) to the Star Ratings; 46 percent did not support adding SRR to the Star Ratings
- » The TEP did not achieve majority consensus to support addition of the National Healthcare Safety Network Bloodstream Infection (NHSN SIR) measure to the Star Ratings

For a complete summary, see the Technical Expert Panel final report [here](#).

DFC 2017 Star Ratings

- » Again, the DFC Star Ratings will be refreshed in October 2017
- » The methodology used for this update will be the same as for the October 2016 release (no changes from previous methodology)
- » No additional measures or measure updates will be added to the DFC Star Ratings for the October 2017 release
- » Details about the current Star Ratings methodology can be found at:
<https://dialysisdata.org/content/methodology>

Star Ratings TEP Next Steps

- » CMS is currently reviewing and evaluating the Star Ratings TEP recommendations
- » CMS will announce its decision on the final set of measures and revisions to the methodology during a National Provider Call in fall 2017
- » For a complete summary, see the Technical Expert Panel final report:
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/Downloads/End-Stage-Renal-Disease-ESRD-Dialysis-Facility-Compare-DFC-Star-Ratings.zip>

Resources

- » Information about measure specifications and the Star Ratings methodology can be found in the CMS End-Stage Renal Disease (ESRD) Measures Manual: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/Downloads/CMS-ESED-Measures-Manual-2017-v2-5-2-17.pdf>

Patient List Requests: What's Changing

- » During the quarterly DFC preview periods, users are able to request their facility's patient lists
- » Starting with the November 2017 Preview Period for the January 2018 refresh, DFC is updating the patient list request protocol
 - Facilities will be encouraged to request patient lists in the first five days of a 15-day preview period and the first 10 days of a 30-day preview period
 - Patient list requests in the first 5-10 days of a preview period will receive top priority in response time
 - After this period, DFC will continue to send out patient lists, if requested, but the response time will be greater

Including the Patient Voice

- » CMS continues to believe that DFC is intended to support patients seeking information on kidney care
- » We continue to reach out to the community for ideas and suggestions on how to improve
- » We also continue to develop tools to help the community educate health care professionals, patients, and caregivers about DFC

Patient Summit Overview

- » On April 3, 2017, NORC at the University of Chicago, with support from the American Association of Kidney Patients, conducted a five-hour discussion with ESRD patients and one caregiver
- » Patients were members of five national organizations representing the interests of ESRD patients
- » 12 patients participated in the meeting
- » This feedback session was the first time DFC leveraged relationships with patient advocacy organizations in the kidney community to dually:
 - Receive broad patient input on the website
 - Engage patients

Key Patient Summit Takeaways

- » Patients want and seek resources specific to their current stage of disease and health status
- » Current depictions of ESRD and ESRD patients do not always represent the range of patient experiences, and many feel they are too negative
- » Information about treatment options and quality should be proactively provided directly into the hands of patients who might not otherwise seek it out
- » Medicare is a trusted source of information

Patient Summit Next Steps

- » Look for opportunities to incorporate feedback into DFC, where possible. For example:
 - Reorganize existing content to address different stages of kidney disease
 - Address patients' sensitivities around terminology and depictions of patients
- » Consider feedback in the bigger picture of DFC's future development
- » Consider a future meeting with less engaged patients to understand their perspectives and how DFC can help them engage in their kidney care

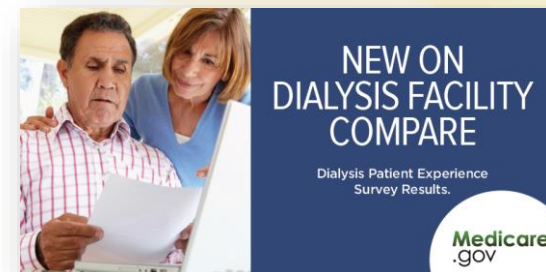
How Can You Help?

To encourage providers, dialysis centers, and consumers to use DFC as a valuable and reliable resource for information relevant to kidney care, CMS developed English- and Spanish-language stakeholder toolkits that include messages tailored to the needs of the ESRD community.

CMS encourages our ESRD stakeholders to use the toolkits and:

- » Share our sample tweets and Facebook posts
- » Download and share our social media graphics
- » Include an article in member newsletters, blogs or e-blasts

To request a toolkit, email CMSESRD@ketchum.com.



Questions?

For additional questions about the Star Ratings methodology or measure specifications, please email the UM-KECC helpdesk at

dialysisdata@umich.edu

Elena K. Balovlenkov, MS, RN, CHN

Technical Lead, Dialysis Facility Compare,
Division of Quality Measurement,
Centers for Medicare & Medicaid Services

Elena.Balovlenkov@cms.hhs.gov

Joel Andress, PhD

End-Stage Renal Disease Measures Development Lead,
Division of Quality Measurement,
Centers for Medicare & Medicaid Services

Joel.Andress@cms.hhs.gov

Thank you!