

Centers for Medicare & Medicaid Services Special Open Door Forum

> End-Stage Renal Disease Quality Incentive Program:

# **Reviewing Your Facility's PY 2013 Performance Data**



Thursday, June 21, 2012 2:00 p.m. – 3:30 p.m. EDT



To provide an overview of the Payment Year (PY) 2013 End-Stage Renal Disease (ESRD) Quality Incentive Program (QIP) and describe what to expect during the Preview Period.

This Open Door Forum (ODF) 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



# **ESRD QIP Overview**

**Presenter:** 

#### **Teresa Casey**

Director, Division of ESRD, Population and Community Health Office of Clinical Standards and Quality, CMS

#### **CMS Objectives for Value-Based Purchasing**



- Identify and require reporting of evidencebased 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.

# **ESRD QIP Legislative Drivers**

The ESRD QIP is described in Section 1881(h) of the Social Security Act, as amended by Section 153(c) of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA)

#### Program intent:

Promote patient health by encouraging 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 as set forth by CMS
- Allows payment reductions of up to 2%

# **Overview of MIPPA Section 153(c)**



- Select measures
- Establish performance standards that apply to individual measures
- Specify performance period for a given PY
- Develop methodology for assessing total performance of each facility based on performance standards with respect to measures for a performance period
- Apply an appropriate payment reduction to facilities that do not meet or exceed established total performance scores
- Publicly report results through websites and facility posting

# **From Rulemaking to Implementation**

- ESRD QIP rulemaking implements Section 1881(h)
- 2011: CMS proposed and finalized rules for PYs 2013 and 2014
  - Proposed Rule / Notice of Proposed Rulemaking (NPRM):
    - ✤ July 8, 2011 (76 FR 40517)
  - Final Rule:
    - November 10, 2011 (76 FR 70228)



# **Scoring Methodology**

**Presenter:** 

#### **Teresa Casey**

Director, Division of ESRD, Population and Community Health Office of Clinical Standards and Quality, CMS

### **PY 2013 Preview Period Timeline**



#### Preview Period opens July 15, 2012

- Preview PSR ready for download from <u>DialysisReports.org</u>
- 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, 2012

- All clarification questions and formal inquiries must be received by 5:00 p.m. EDT
- CMS will respond to questions and inquiries received before deadline; the responses may be delivered after the Preview Period has elapsed

# Snapshot: PY 2013 Program

- Two measures continue from PY 2012:
  - Hemoglobin Greater Than 12 g/dL
  - Urea Reduction Ratio (URR) Greater Than or Equal to 65%
- One measure retired since PY 2012:
  - Hemoglobin Less Than 10 g/dL
- National performance rate based on Calendar Year (CY) 2009
- Facilities must earn a Total Performance Score of 30 points to avoid a payment reduction
- Payment reduction levels: 1%, 1.5%, or 2%



- Percentage of patients with hemoglobin levels greater than 12 g/dL (Anemia Management)
  - Lower percentage indicates better care
- Percentage of patients with a URR of 65% or greater (Dialysis Adequacy)
  - Higher percentage indicates better care
- Facilities must have at least 11 patients eligible for each measure to receive a Total Performance Score

#### Measures: Anemia Management Exclusions



- Claims will be excluded from the measure calculation if the patient:
  - Is less than 18 years old as of the start date of the claim
  - Is in the first 89 days of dialysis as of the start date of the claim
  - Has a reported hemoglobin value (or hematocrit value divided by 3) less than 5 g/dL or greater than 20 g/dL
  - Is <u>not</u> treated with erythropoietin-stimulating agents (ESAs) according to the claim, specifically epoetin alfa or darbepoetin alfa
  - Has fewer than 4 months of eligible claims at the facility in the performance period

#### Measures: Dialysis Adequacy Exclusions



- Claims will be excluded from the measure calculation if the patient:
  - Is less than 18 years old as of the start date of the claim
  - Has fewer than 7 dialysis sessions per month (HCPCS modifier = G6)
  - Is in the first 182 days of ESRD as of the start date of the claim
  - Is on home hemodialysis or peritoneal dialysis according to the claim
  - Is on frequent hemodialysis (4 or more sessions per week)
  - Has fewer than 4 months of eligible claims at a facility in the performance period

### **Performance Standards**

CIVIERS for MEDICARE & MEDICARD SERVICES

- The performance period is CY 2011
- Data is obtained from facility dialysis claims
- One of two performance standards apply:
  - The facility's performance in CY 2007

#### or

- The national performance rate in CY 2009
- The standard that yields the best score for the facility will be applied

# **National Performance Rates**

- The CY 2009 national performance rate for the Anemia Management measure: 14%
- The CY 2009 national performance rate for the Dialysis Adequacy measure: 97%
- Reference: CY 2011 ESRD Prospective Payment System (PPS) Final Rule (includes ESRD QIP PYs 2013 and 2014)
   – 76 FR 70228, 70261



- Facility meets or exceeds performance standard for a measure: 10 points
- Facility does not meet the performance standard for a measure: 2 points subtracted from 10 points for every 1% below the performance standard
- Total Performance Score =
   Sum of the Two Measure Scores x 1.5
  - Measures are weighted equally
  - Highest score is 30 points

Difference between Facility Rate and Performance Standard	Points
Meets or exceeds standard	10 points
1%	8 points
2%	6 points
3%	4 points
4%	2 points
5% or more	0 points

#### **Scoring Overview: The National Average**

This example shows how points would be assigned using the National Average as the Performance Standard:

		Percent of Patients with Hemoglobin Greater than 12 g/dL	Percent of Patients with URR Greater than or Equal to 65%
Difference between	National	14%	97%
Facility Rate and	Average		
Performance Standard	Points	Facility Perf	ormance Rate
Meets or	10 points	14% or less	97% or more
exceeds standard			
1%	8 points	15%	96%
2%	6 points	16%	95%
3%	4 points	17%	94%
4%	2 points	18%	93%
5% or more	0 points	19% or more	92% or less

**Note:** For the anemia management measure, a lower rate reflects better performance; for the dialysis adequacy measure, a higher rate reflects better performance.

#### Scoring Overview: Hemoglobin Greater Than 12 g/dL



	Facility Rate Calculation (2007) for Performance Standa	ard Determination
5a	Number of patients with average hemoglobin greater than 12 g/dL	30
5b	Total number of patients included in calculation	135
5c	Percent of patients with average hemoglobin greater than 12 g/dL Divide 5a by 5b and round	22%
	Performance Standard Determination	
5d	Facility comparison rate for 2007 (from 5c)	22%
5e	National average in 2009	14%
5f	Performance standard applied Apply the worse of 5d or 5e	This facility in 2007 22%
	Facility Rate Calculation for Performance Perio	od (2011)
5g	Number of patients with average hemoglobin greater than 12 g/dL	20
5h	Total number of patients included in calculation	155
5i	Percent of patients with average hemoglobin greater than 12 g/dL Divide 5g by 5h and round	13%
	Facility Performance Measure Score Calcul	ation
5j	Facility performance rate in 2011 (from 5i)	13%
5k	Performance standard (from 5f)	22%
51	Does the facility meet or exceed the standard? Is 5j equal to or lower (i.e., a better score) than 5k?	Yes
5m	Difference between facility rate and performance standard	Meets or exceeds
5n	Performance Measure Score	10

#### Scoring Overview: URR of at Least 65%



	Facility Rate Calculation (2007) for Performance Standa	ard Determination				
6a	Number of patients with URR greater than or equal to 65%	114				
6b	Total number of patients included in calculation	121				
6c	Percent of patients with URR greater than or equal to 65% <i>Divide 6a by 6b and round</i>	94%				
Performance Standard Determination						
6d	Facility comparison rate for 2007 (from 6c)	94%				
6e	National average in 2009	97%				
6f	Performance standard applied Apply the lesser (worse) of 6d or 6e	This facility in 2007 94%				
	Facility Rate Calculation for Performance Perio	od (2011)				
6g	Number of patients with URR greater than or equal to 65%	130				
6h	Total number of patients included in calculation	135				
6i	Percent of patients with URR greater than or equal to 65% <i>Divide 6g by 6h and round</i>	96%				
	Facility Performance Measure Score Calcul	ation				
6j	Facility performance rate in 2011 (from 6i)	96%				
6k	Performance standard (from 6f)	94%				
61	Does the facility meet or exceed the standard? Is 6j equal to or higher (i.e., a better score) than 6k?	Yes				
6m	Difference between facility rate and performance standard	Meets or exceeds				
6n	Performance Measure Score	10				



 A facility's Total Performance Score determines whether a payment reduction applies

PY 2013 Payment	Reduction Scale
Total Performance Score	Percentage of Payment Reduction
30 points	No Reduction
26 – 29 points	1.0%
21 – 25 points	1.5%
20 points or fewer	2.0%
No score calculated	No reduction

### Scoring Overview: Performance Score Calculation



	Patients with Hemoglobin greater than 12 g/	/dL
7a	Performance measure score (from 5n)	10
7b	Weighted measure score (multiply 7a by 1.5)	15
	Patients with URR greater than or equal to 6	5%
7c	Performance measure score (from 6n)	10
7d	Weighted measure score (multiply 7c by 1.5)	15
	TOTAL PERFORMANCE SCORE	
7e	Total Performance Score Add weighted measure scores (7b + 7d) and round	30
7f	Payment reduction at this facility	No Reduction



# Performance Score Report Overview

**Presenter:** 

#### **Michelle Deal**

ESRD QIP Systems & Operations Lead Division of Value, Incentives and Quality Reporting Office of Clinical Standards and Quality, CMS

### **Preview Performance Score Report**



Your facility's performance scores will be detailed in the PSR using tables, like the ones displayed in the previous slides, and explanatory text.



U.S. Department of Health & Human Services



**Centers for Medicare & Medicaid Services** 

Payment Year 2013 End-Stage Renal Disease Quality Incentive Program

**Preview Performance Score Report** 

July 15, 2012

#### Score Summary and Payment Reduction Percentage



PROJECTED PAYMENT REDUCTION P	NO REDUCTION					
TOTAL PERFORMANCE SCORE						
Facility Total Performance Score: 30 (out of 30)						
PERFORMANCE MEASURES	MEASURE SCORES	MEASURE WEIGHT	WEIGHTED ACTUAL SCORES			
Anemia Management Percent of patients with average hemoglobin greater than 12 g/dL	<b>10</b> (out of 10)	50%	<b>15</b> (out of 15)			
<b>Dialysis Adequacy</b> Percent of hemodialysis patients with Urea Reduction Ratio (URR) greater than or equal to 65%	<b>10</b> (out of 10)	50%	<b>15</b> (out of 15)			
Total Performance Score			<b>30</b> (out of 30)			

# **Preview Performance Score Report**



- Your **performance rate in 2011** on the two PY 2013 quality measures
  - 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 (0 10) for each measure
- An explanation of how your two measure scores are weighted and translated into your Total Performance Score
- Information regarding if and/or how Medicare payments to your facility will be affected as a result of your Total Performance Score
- Detailed information about how the performance rates were calculated is available in the Guide to the Performance Score Report, which will be available on <u>DialysisReports.org</u>

#### **Preview Period: Overview and Timeframe**



- CMS allows facilities to preview their PY 2013 performance scores prior to publicly posting those scores.
  - Facilities will access their Preview PSR via the secure Dialysis Facility Reports (DFR) website at <u>DialysisReports.org</u>.
- Preview PSRs will be posted on July 15, 2012. The Preview Period ends August 15, 2012, at 5:00 p.m. (EDT).
  - During this timeframe, facilities will be able to ask clarification questions and/or submit a single formal inquiry explaining why the facility believes there was an error in calculation.
  - All submissions must be made through <u>DialysisReports.org</u>.



- Purpose: ensure that facilities completely understand how their 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



- Purpose: provide CMS with an explanation of why the facility believes there was an error in calculation
  - This typically occurs after submitting a clarification question and/or requesting a patient list
- Each facility may submit only ONE formal inquiry at <u>DialysisReports.org</u>
- Formal inquiries must be submitted before 5:00 p.m. (EDT) on August 15, 2012
- 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 the <u>DialysisReports.org</u> website in order to download and view their Preview PSR
- All facility passwords were reset on June 15, 2012
- **Facility Master Account Holders:** 
  - 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 <u>DialysisReports.org</u>

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



# DialysisReports.org Walk-Through

**Presenter:** 

#### **Claudia Dahlerus**

Project Manager Arbor Research Collaborative for Health

### **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

#### **CALCENTING** Methodology ESRD Measures FAQ Contact Us Home FOR DIALYSIS FACILITIES AND STATE SURVEYORS Dialysis Facility Reports, State and Region Profiles, and the Quality Incentive Program. The Dialysis Facility Reports (DFRs) and State and Region Profiles are created annually under contract to Secure Log-In the Centers for Medicare & Medicaid Services (CMS) to provide dialysis facilities, state surveyors, and regions with valuable information on patient characteristics, treatment patterns, hospitalization, mortality, and transplantation patterns in their facilities. The end-stage renal disease (ESRD) Quality Incentive Program (QIP) is the first Medicare program that 7/15/2012 Facility Reports are posted links provider or facility payments to performance, based on outcomes assessed through specific quality measures. These measures are important indicators of patient outcomes and at the core of medical 7/15/2012 - 8/15/2012 management of ESRD patients. Facility comment period 8/31/2012 What information is included in the DFRs? State and Region Profiles are posted The Dialysis Facility Reports include information about For a detailed list of dates, click directly actionable practice patterns such as dose of here. dialysis, vascular access, and anemia management, as well as patient outcomes (such as mortality, hospitalization, and transplantation) that can be New for the Quality Incentive used to inform and motivate reviews of practices. Program The information in the report facilitates comparisons of facility patient characteristics, treatment patterns, New preview performance score and outcomes to local and national averages. Such reports (PSRs) will be posted on July 15, 2012. Facilities will be comparisons help to evaluate patient outcomes and able to submit clarification to account for important differences in the patient questions and one formal inquiry mix - including age, sex, race, and patients' diabetic regarding this report during the State and Region Profiles status - which in turn enhances each facility's preview period (July 15 through August 15). understanding of the clinical experience relative to State and Region Profiles are provided to the state other facilities in the state, Network, and nation. survey agencies and CMS regional offices annually. They include maps and tables comparing state or What are the DFRs used for? region information as well as the Dialysis Facility Report Reports for every facility in the state or region. The The reports are intended to be used by facilities in The 2012 Dialysis Facility Reports State and Region Dialysis Profiles are available (DFRs) will be posted on Sunday,

only to the corresponding State Survey Agency or

CMS Regional Office. Authorized users can access

the Profiles by logging into the secure site.

What is the Quality Incentive Program

(QIP)?

The reports are intended to be used by facilities in their quality improvement efforts. In addition, selected measures are publicly reported on the <u>Dialysis Facility Compare website</u> allowing dialysis patients to review and compare characteristics and quality information on dialysis facilities in the United States. State surveyors use data reported in the Dialysis Facility Reports to make decisions on which

July 15, 2012. Please note that

the DFC preview has been moved

from the DFR into your new DFC

reported in the 2011 Supplement

Report. Also, the summaries

incorporated into the DFR. A

to the DFR have been



#### • 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



Questions about

logging in? Please

click the help button

below

Help

#### To log in to 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

#### DIALYSISREPORTS.ORG

Click on the appropriate login box below. Users that wish to view or inquire on reports will use the left login box. Master Account Holders that wish to manage user accounts will use the right box.

All user accounts were reset on 6/15/2012. If you are experiencing repeated problems with logging in, please contact your Master Account Holder to be sure that your account has been enabled properly.

View Reports
Username: 123456
Password:
Log In
I need my login information

You are accessing a U.S. Government information system, which includes: (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.

Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.

By using this information system, you understand and consent to the following:

- You have no reasonable expectation of privacy regarding any communication or data transiting or stored on this information system. At any time, and for any lawful Government purpose, the Government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.
- · Any communication or data transiting or stored on this information system may be disclosed or used for any law ful Government purpose.

## **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

Currently	y logged in as I	Master Account	Holder (Facility us	er type)							Logo
	Home	Create/Edit Users R	View leports								
'ou are l his pagi nat can o view r you are ppropria	logged in as th e will allow you be used to vie eports or subn ∋ already logge ate DFR, DFC	ne Master Acco u to create or e w reports and s mit comments, ad in as an indiv or QIP tab for t	ount Holder for this facility dit individual user accoun submit questions or comm please click on the <b>View</b> vidual user, please click o he reports you would like	ts nents. Reports tal n the to view.	b.	aster Account H	Holder is ount Hold	er Contact	Info		
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Beginning June 15, 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

Currentl	y logged in as I	Master Accum	(Facility us	er type)							Logo
	Home	Create/Edit Users	View eports								
ou are	logged in as th	ne Master Acco	ount Holder for this facility		Mas	ster Account H	lolder is	Res Tank	-		
hat can	be used to vie	w reports and s	submit questions or comn	nents.	Edit	Master Acco	unt Hold	er Contact	Info		
f you are ppropria	already logge ate DFR, DFC	ed in as an indiv or QIP tab for t	idual user, please click o he reports you would like	to view.							
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# 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/DFC Reports
  - Can Comment on DFR/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

	Users Reports	
[	Create New User	
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can b	Last Name*	
iew rep	Email Address (Username)*	
ou are a ropriate	Contact Role <please select=""></please>	
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	Phone Number* Extension	
er Ac		
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reate N	DFR Permissions: (Check all that apply)	
	Can View DFR/DFC Reports	
	□ Can Comment on DFR/DFC Reports and Discuss PII/PHI	1500
	QIP Permissions: (Check all that apply)	2500 Cal
	Can View QIP PSR/PSC	Subr
	Can Submit QIP Formal Inquiry/Clarification Question and Discuss PII/PHI	QIF
	Note: The user's password will be automatically generated and sent to the email address above once this form is submitted.	8
dit		Discu PII/P
Edit S	Save Cancel	No

Note: Facilities of dialysis organizations with a corporate user account can follow these steps to add the corporate user account if they have not 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

	Edit This User
* Indicates required fields.	
First Name*	inam.
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Email Address (Username)*	Contraction of the second s
Contact Role	Other
Other Specify:	
Phone Number*	Extension
Enable This User	
Reset Password (Clicking this button v	will reset the user's password to a temporary value, which is then emailed to them.)
Permissions:	
DFR Permissions: (Check all that apply) ☑ Can View DFR/DFC Reports ☑ Can Comment on DFR/DFC Reports a	and Discuss PII/PHI
QIP Permissions: (Check all that apply) I Can View QIP PSR/PSC Can Submit QIP Formal Inquiry/Clarific	cation Question and Discuss PII/PHI
Save Cancel	

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 dropdown list
  - Click Save to update the MAH information

Contraction Contra	
Currently logged in as Master Account Holder (Facility user type)	gout
Home Create/Edit View Reports	
Master Account Contact Information	
Below is the current Master Account Holder Contact Information for your facility. Please update if necessary.	
Important Note: Contact information that is saved here will not affect any existing user account information. The fields on this page are independently sa and intended to be facility-level contact information.	wed,
* Indicates required fields. Load From Existing Users	
First Name*	
Last Name*	
Email Address (Username)* Phone Number* Extension	
Street Address	
City	
State Zip Code	
Save	
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### MAH – User Account Dual Log-In



- It is now 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

CALIVING DIALYSISREPORTS.ORG	
Currently logged in as Master Account Holder (Facility user type) Home Create/Edit View	Logout
View Reports You are currently logged in as the Master Account Holder for this facility. To view the Dialysis Facility Reports (DFR), Dialysis Facility Compare (DFC) Reports, or QIP reports,	
you must log in with a user account.	
There are two types of logins: the Master Account Holder, and a User account. In order to view reports, you need to be logged in as a User.	
you can be logged in as one Master Account and one User at the same time.	
Please select a User account from the list below (or create a new one if needed):	

Select	First Name	Last Name	Username
Log In			Contraction of the Contraction o
Log In			and the second se
Log In		-	

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### MAH – User Account Dual Log-In



- 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

		Her Account Ho	older	Facility user type)			
Hon	ne Crea Ut	ite/Edit Sers Rep	ew orts				
w Reports							
u are current	ly logged i	n as the Mast	er Account	Holder for this facility			
view the Di	alysis Fac	cility Reports	(DFR), Dia	alysis Facility Compare	(DFC) Repo	orts, or QI	P reports,
u must log i	n with a u	user account.					
0							
10 0		v loggod int					
But I'	m already	y logged in:					
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There are two	types of	logins: the Ma	ister Accou	unt Holder, and a User acc	ount.		
There are two	m alread o types of w reports,	logins: the Ma	ster Accou	unt Holder, and a User acc	o View Re	eports	
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## **User Log-In from Home Page**



- 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

Contraction Contra
Click on the appropriate login box below. Users that wish to view or inquire on reports will use the left login box. Master Account Holders that wish to manage user accounts will use the right box. All user accounts were reset on 6/15/2012. If you are experiencing repeated problems with logging in, please contact your
Master Account Holder to be sure that your account has been enabled properly.
User Login to View Reports         Email:       someone@hostname.com         Password:       Create/Edit Users         Log In       Log In         Forgot Your Password?       Help
You are accessing a U.S. Government information system, which includes: (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.
Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.
By using this information system, you understand and consent to the following:
<ul> <li>You have no reasonable expectation of privacy regarding any communication or data transiting or stored on this information system. At any time, and for any law ful Government purpose, the Government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.</li> <li>Any communication or data transiting or stored on this information system may be disclosed or used for any law ful Government purpose.</li> </ul>
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# **User Log-In from Home Page**



When logging into View Reports for the first time, the User will use 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

#### DIALYSISREPORTS.ORG

You can use this tab to change the password for your individual account which you use to log in and view reports. It is NOT possible to change the Master Account Credentials using the Web site. If you need your Master Account Credentials please contact your ESRD Network.

Change Yo	ur Password
Current Password:	
New Password:	
Confirm New Password:	
Change Password	Cancel



- · Passwords must be changed every sixty (60) days
- · Dictionary names or words may not be used
- Must consist of at least eight (8) alphanumeric characters (upper- and lower-case letters, and numbers)
- A minimum of four (4) characters must be changed when passwords are changed
- Password minimum lifetime of one (1) day
- Passwords may not be reused for six (6) generations

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### **User Landing Page**



- Upon successful log-in, the User lands on the Home tab, which provides basic information on:
  - Dialysis Facility Report (DFR)
  - Dialysis Facility
     Compare (DFC)
     Report
     (new this year)
  - Quality Incentive Program (QIP)



#### **User Permissions**



- Facility Users will see seven tabs:
  - Home
  - DFR
  - DFC (new)
  - QIP
  - Comments & Inquiries
  - Change Password
  - Create/Edit Users

CarlysisReports.org	
Current Generation (Fedity Generation Comments & Inquiries Change Password Create/Edit	<u>Loqout</u>
Welcone to the Secure Blaight Facility Reports their site:	

Please use the tabs above to navigate through the reports pages. If you have any questions please visit our Frequently Asked Questions section.

#### DIALYSIS FACILITIES AND ESRD NETWORKS:

#### Dialysis Facility Reports (DFR)

The Dialysis Facility Reports are created annually under contract to the Centers for Medicare and Medicaid Services (CMS) to provide dialysis facilities, state surveyors and regions with valuable information on patient characteristics, treatment patterns, hospitalization, mortality, and transplantation patterns in their facilities. Background information regarding the Dialysis Facility Reports (DFR) is available on the <u>Dialysis Reports website</u>. The 2011 DFRs are currently available. Updated 2012 DFRs will be available on this site beginning July 15, 2012.

#### Dialysis Facility Compare (DFC) Reports

The DFC Report provides you with advance notice of the updated quality measures for your facility that will be reported on the Dialysis Facility Compare (DFC) website in December 2012 (www.medicare.gov), which was previously included on Page 2 of the Dialysis Facility Report. Background information regarding Dialysis Facility Compare (DFC) Reports is available on the <u>Centers for Medicare & Medicaid</u> <u>Services (CMS) web site</u>. The 2012 DFC Reports will be available on the site beginning July 15, 2012.

#### Quality Incentive Program (QIP)

The ESRD QIP is the first Medicare program that links any provider or facility payments to performance based on outcomes as assessed through specific quality measures. Background information regarding the End-Stage Renal Disease Quality Incentive Program (ESRD QIP) is available on the <u>Centers for Medicare & Medicard Services (CMS) web site</u>. The 2011 QIP PSRs are currently available. Updated 2012 QIP PSRs will be available on this site beginning July 15, 2012.

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# **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 leftmost 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 will be able to download DFRs that the User is 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



#### **Dialysis Facility Reports**

You are currently viewing the 2012 Dialysis Facility Reports (DFRs). The comment period is open. Please note that August 15, 2012 (5:00pm EDT) is the last day you can submit your comments for the 2012 DFRs. (?) Where Is My Facility?

If your facility is not listed below, it is possible that your facility does not have a DFR, or

your account does not have permission to view your facility's report. If you think this is true, speak to your Master Account Holder. Why Are There No Actions Listed?

If there are no actions listed for your facility, speak to your Master Account Holder to get permission to make comments.

Record 1 - 11 of 11 Page 1					ider No.
Г	Provider No. A	Facility Name	State	View Reports (PDF)	Action
	and the second s	CONTRACTOR OF STREET	1996	Where is my report?	
			1.	Where is my report?	
			16	2012 DFR	Comment for State Surveyors Comment for UM-KECC
		and the second sec		2012 DFR	
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		and the second se	-	2012 DFR	Comment for State Surveyors Comment for UM-KECC
Г		ALC: MERICIPA	16	2012 DFR	Comment for State Surveyors Comment for UM-KECC
		den man anna	10.	2012 DFR	Comment for State Surveyors Comment for UM-KECC
		NUMBER OF STREET, STRE		2012 DFR	Comment for State Surveyors Comment for UM-KECC
	-	terms and the set of the		2012 DFR	Comment for State Surveyors Comment for UM-KECC
		And the second second second		2012 DFR	Comment for State Surveyors Comment for UM-KECC

#### User – DFC Tab



- New this year, 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 in December 2012 (www.medicare.gov), previously included on Page 2 of the DFR



The New Dialysis Facility Compare (DFC) Reports are available below. The Report provides you with advance notice of the updated quality measures for your facility that will be reported on the Dialysis Facility Compare (DFC) website in December 2012 (www.medicare.gov), which was previously included on Page 2 of the Dialysis Facility Reports.



Why Are There No (? Actions Listed?

If your facility is not listed below, it is possible that your facility does not have DFC reports, to make comments.

your account does not have permission to view your facility's report. If you think this is true, speak to your Master Account Holder



	Record 1 - 11 of 11			Page 1 (Provider N	Vo. 💌 of 1
	Provider No. A	Facility Name	State	View Reports (PDF)	Action
		and the second se		Where is my report?	
				Where is my report?	
Γ			1.00	2012 DFC	DFC Comment for CMS
		second of the local second		2012 DFC	
Г			10.	2012 DFC	DFC Comment for CMS
				2012 DFC	DFC Comment for CMS
Г				2012 DFC	DFC Comment for CMS
				2012 DFC	DFC Comment for CMS
Г	Contract (	and the second		2012 DFC	DFC Comment for CMS
	(and and a			2012 DFC	DFC Comment for CMS
	Sec. 1	second states when the second	1 100	2012 DFC	DFC Comment for CMS

Download Reports Selected in Table Above

If you don't have Adobe Acrobat Reader, click on the Adobe button below to download the latest version for free. Get Acrobat. Reader

#### **User – QIP Tab**



- The QIP tab is where Users will be able to download Performance Score Reports (PSRs) and Performance Score Certificates (PSCs) that the User is authorized to view
- Click the Performance Score Summary (Excel) link to generate an Excel spreadsheet with data on the performance score per measure for each facility listed in the table
  - This will generate a summary of data for all facilities that the User is authorized to view



# **User – Comments & Inquiries Tab**



- Similar to last year, the User selects from a dropdown 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

CIALYSISREPORTS.ORG	
Currently logged in as User (Facility user type)	Logout
Home DFR DFC QIP Comments & Inquiries Change Password Create/Edit Users	
Comments & Inquiries         Please select facility:       Please select an option from the list box below:         Image: Comment acceleration of the comment about my QIP score       QIP: Question / Comment about my QIP score         QIP: Request Patient Level Data       DFR: Question / Comment about my DFR for UM/KECC         DFR: Question / Comments on DFC for CMS       DFR: Comments on DFR for State Surveyor         General Help / Comments / Suggestions       Suggestions	
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# **User – Comments & Inquiries Tab**



- 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 (new this year)

H DIALYSISREPORTS.ORG	
Currently logged in as (Facility user type)	Loqout
Home DFR DFC QIP Comments & Inquiries Change Password Create/Edit Users	
Comments & Inquiries         Please select facility:       Please select an option from the list box below:         Image: Comment and the image: Comment about my DFR for UM/KECC DFC: Comments on DFC for CMS DFR: Comments on DFR for State Surveyor General Help / Comments / Suggestions	
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# **User – Comments & Inquiries Tab**



- 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
- DIALYSISREPORTS.ORG (Facility user type) Currently logged in as User Logout Comments & Inquiries Change Password **Comments & Inquiries** Please select facility: Please select an option from the list box below: DFR: Question / Comment about my DFR for UM/KECC DFC: Comments on DFC for CMS DFR: Comments on DFR for State Surveyor General Help / Comments / Suggestions Remaining time before timeout (MM:SS): 29:59 Request more time Questions / Comments about DFR to UM-KECC Please use this box for any questions or comments about your facility's 2012 DFR statistics or methods. The UM-KECC will respond to these comments. The comments received from this section will not appear on the DFC website and will not be sent to the state surveyors Comments on this report (including the supplemental report) and suggestions for future reports. Email a copy to me Do not include Personally Identifiable Information (PII) or Protected Health Information (PII) when submitting inquiries to DialysisReports.org. Submit
- 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

<ul> <li>Password Rules</li> <li>Passwords must be changed every sixty (60) days</li> <li>Dictionary names or words may not be used</li> <li>Must consist of at least eight (8) alphanumeric characters (upper- and lower-case letters, and numbers)</li> <li>A minimum of four (4) characters must be changed when passwords are changed</li> <li>Password minimum lifetime of one (1) day</li> <li>Passwords may not be reused - for six (6) generations</li> </ul>

### **User – Master Account Dual Log-In**



- It is now 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

Contraction Contra	
Currently logged in as User (Facility user type) Home DFR DFC QIP Comments & Inquiries Change Password Create/Edit Users	<u>Loqout</u>
Edit/Create Users	
You are currently logged in with a User account. To create or edit users, you must log in with a Master Account Holder account.	
Put I'm already logged in!	
There are two types of logins: the Master Account Holder, and a User account.	
In order to create or edit users, you need to be logged in as a Master Account Holder.	
You do not need to log out of your Master Account in order to log in as a user - you can be logged in as one Master Account and one User at the same time.	
Please log in below to a Master Account (using the user name and password supplied by your ESRD Network).	
Master Login to Add or Remove Users         Username:         Password:         Log In         Lneed my login information	
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# **Network User – Reports Tab**



- An additional tab called Reports is now available to Network users
- The following Networkspecific 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:** 

#### **Michelle Deal**

ESRD QIP Systems & Operations Lead Division of Value, Incentives and Quality Reporting Office of Clinical Standards and Quality, CMS

# **Activities Following the Preview Period**



- CMS will review any outstanding inquiries, then finalize facility Total Performance Scores and payment reduction percentages
  - Once scores are finalized, a final PSR will be posted to DFR outlining your facility's information
  - Once issued as final, a PSR cannot be changed
- In December 2012, each facility's Performance Score Certificate (PSC) will be posted on <u>DialysisReports.org</u>
- By the end of January 2013, performance score data will be made available to the public on the Dialysis Facility Compare (DFC) website: <u>http://www.medicare.gov/Dialysis</u>
- Payment reductions (if applicable) are applied to dialysis services beginning January 1, 2013 and will remain in place for the duration of the year

# **Performance Score Certificate**



- It is your facility's responsibility to log on to <u>DialysisReports.org</u> in mid-December to print your PSC
  - The certificate must be **displayed in a prominent patient area**
  - The certificate must be **posted within five business days** of it being made available and remain posted throughout CY 2013

#### The certificate contains:

- Your Total Performance Score 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
  - We recommend that you educate your staff on the performance scores so that they can answer patient questions

#### **Sample Performance Score Certificate**



no <i>ur a nencur sener</i> s	
27 out of 30	
26	
MEETS ANDARD	
Yes	
No	



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

End-Stage Renal Disease Quality Incentive Program 2013 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' standards for good quality care.

#### How are facilities scored?

The Total Performance Score is a single number, or grade, that tells how a facility performed overall. Points are given for each measure based on how close the facility's performance comes to CMS' standards, and these points are used to calculate the Total Performance Score.

Individual measure scores may not add up to the Total Performance Score. Measures are assigned levels of importance and then converted to a 0-30 point scale that determines their contribution to the Total Performance Score. The highest possible Total Performance Score is 30 points.

A facility may score less than the national average on a specific measure but still meet the standard set for that facility. This is because the facility has shown improvement compared to a previous year. Some facilities may not have enough data to calculate a specific measure score or Total Performance Score. This doesn't reflect the quality of care provided in those facilities. What facilities receive an ESRD QIP Performance Score Certificate?

Only facilities that were active during the performance period will receive a performance score and a Performance Score Certificate (PSC).

Facilities that began to care for Medicare patients after the performance period won't receive a performance score nor be required to post a PSC.

#### 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: <u>http://www.medicare.gov/Dialysis</u>

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

This Certificate expires December 31, 2013.

# **Recap: Facility Responsibilities**



- Establish your account to access <u>DialysisReports.org</u>
- Facilities and Networks may access their Preview PSRs beginning July 15
  - Recommendation: submit clarification questions by August 1, 2012 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 Performance Score Certificate in December (from <u>DialysisReports.org</u>)
- Educate your staff about the ESRD QIP so they can answer patient questions about the publicly posted certificate

# **Key ESRD QIP Dates to Remember**

#### Happening during 2012:

- PY 2012 payment reductions applied
- PY 2013 Preview Period
- PY 2014 Performance Period
- PY 2015 rulemaking
  - Proposed Rule published June/July
  - Final Rule will be published by mid-November

#### PY 2013 PSC

- Available for download mid-December
- 5 business days to print and post

#### PY 2013 payment reductions effective January 1, 2013

#### Resources: Overview of PYs 2012, 2013, and 2014



	PY 2012	PY 2013	PY 2014	
Measures	3 Total • Hgb > 12 g/dL • Hgb < 10 g/dL • URR ≥ 65%	2 Total ● Hgb > 12 g/dL ● URR ≥ 65%	6 Total 3 Clinical • Hgb > 12 g/dL • URR ≥ 65% • VAT	3 Reporting • NHSN • ICH CAHPS • Mineral Metabolism
Performance Period	CY 2010	CY 2011	CY 2012	
Baseline Period	N/A	N/A	July 1, 2010 – June 30, 2011	
Performance Standard	Lesser of the facility performance rate in CY 2007 <b>or</b> the national performance rate in CY 2008	Lesser of the facility performance rate in CY 2007 <b>or</b> the national performance rate in CY 2009	Median national performance rate	
Weighting	50% for Hgb < 10 g/dL 25% for Hgb > 12 g/dL 25% for URR ≥ 65%	50% Hgb > 12 g/dL 50% for URR ≥ 65%	Clinical Measures: 90%Reporting Measures: 10%If a facility is only eligible for one type of measure, that measure(s) will comprise 100% of the TPS.	
Maximum TPS	30 Points	30 Points	100 Points	
Payment Reductions: Minimum Score	Payment reduction applied for any score less than 26	Payment reduction applied for any score less than 30	Payment reductions applied for any score less than 53	
Payment Reductions: Scale	Sliding Scale: 0.5% – 2% if under minimum TPS	Sliding Scale: 1% – 2% if under minimum TPS	Sliding Scale: 0.5% – 2% if under minimum TPS	
Special Rule	Applies	Applies	Does not apply. Score for clinical measures based on the higher of an improvement or an achievement score.	
Achievement Score Calculation	N/A	N/A	Applies	
Improvement Score Calculation	N/A	N/A	Applies	
Reporting Measures	N/A	N/A	Reporting measures are not scored using the achievement/improvement methodology. In order to score points, facilities must complete certain requirements that vary by measure.	



• The CMS website for the ESRD QIP:

http://www.cms.gov/ESRDQualityImproveInit/ (or Google "CMS + ESRD")

- Includes links to:
  - Frequently Asked Questions (FAQ)
  - ESRD Conditions for Coverage
  - Dialysis Facility Compare

#### • **CY 2011 ESRD PPS Final Rule** (includes ESRD QIP PYs 2013 and 2014):

http://www.gpo.gov/fdsys/pkg/FR-2011-11-10/pdf/2011-28606.pdf

#### Anemia Management specifications:

http://www.dialysisreports.org/pdf/esrd/public-measures/AnemiaManagement-HGB12-2013-2014-FR.pdf

#### Dialysis Adequacy Specifications:

http://www.dialysisreports.org/pdf/esrd/public-measures/DialysisAdequacy-URR65-2013-2014-FR.pdf





#### More information about the ESRD QIP is available:

- ESRD Network Coordinating Center (NCC): <u>http://www.esrdncc.org/</u>
- Dialysis Facility Compare: <u>http://www.medicare.gov/Dialysis</u>
- Dialysis Facility Reports: <u>http://www.DialysisReports.org</u>





# **ESRD QIP Questions?**



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