

TECHNICAL EXPERT PANEL NOMINATION FORM

Project Title: End Stage Renal Disease (ESRD) Dialysis Facility Compare (DFC) Star Ratings Technical Expert Panel (TEP)

Project Overview:

The Centers for Medicare & Medicaid Services (CMS) has contracted with The University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) to act as quality measure developer and DFC technical content support contractor, under the *Kidney Disease Quality Measure Development, Maintenance, and Support* contract. The contract number is 75FCMC18D0041, task order number 75FCMC18F0001. As part of this contract, UM-KECC convenes technical expert panels (TEPs) to provide valued consumer and provider input for both quality measure development and the Dialysis Facility Compare (DFC) Quality of Patient Care Star Rating (DFC Star Rating). This TEP Charter has been developed in response to CMS' request for TEP recommendations related to options for resetting the DFC Star Rating baseline distribution. We are seeking interest from individuals with relevant experience, expertise, and a variety of perspectives to serve on this TEP, including patients.

A DFC Star Rating TEP was first convened in 2015 to review the original star rating methodology and presentation of the DFC Star Ratings on the DFC website. The 2015 TEP provided several recommendations that were implemented in the updated DFC Star Rating methodology released in October 2016. A second TEP was convened in 2017. TEP members provided recommendations on candidate measures proposed for inclusion in the DFC Star Ratings. See the respective 2015 and 2017 DFC Star Rating TEP reports for a summary of the deliberations and TEP recommendations. These are available at <https://dialysisdata.org/content/esrd-measures>.

CMS developed the DFC Star Rating to help health care consumers (including patients and caregivers) understand CMS quality measures and more easily identify differences in overall quality when selecting dialysis facilities, as part of CMS' broader initiative for all of the Medicare Compare sites to make quality information more accessible to patients, caregivers, providers and policymakers.

The Medicare DFC website displays two star ratings: (1) the Quality of Patient Care Star Rating (DFC Star Rating) and (2) the Survey of Patients' Experiences Star Ratings. Eleven of the DFC Quality Measures currently reported on the Medicare DFC website are used to calculate the Quality of Patient Care Star Rating (DFC Star Rating). Six In-center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH CAHPS) Survey Measures are used to calculate the separate Survey of Patients' Experiences Star Ratings. The Survey of Patients' Experiences Star Ratings will not be covered as a discussion topic during this TEP.

This TEP will be expected to review and provide input on options for resetting the DFC Star Ratings. This is in anticipation of the need to recalibrate the DFC Star Ratings distribution in the near future to optimize the utility of the DFC Star Ratings for patients and other consumers. Recent observed trends in national performance demonstrate progressive shifts in the DFC Star Rating results over the last three years. This may obscure underlying performance differences if many facilities become concentrated at one end of the distribution. As background, prior DFC Star Rating TEPs (referenced above) identified a strong consumer interest in the ability to follow trends in dialysis facility performance over time. In addition, TEP discussions have considered how a reporting approach, that reported longitudinal facility performance trends, could be reset from time to time if the star rating system lost the ability to show meaningful differences over the range of facility performance.

The TEP will be expected to represent a diversity of perspectives and backgrounds. Members will be selected based on their personal experience as patients, caregivers and providers, or based on methodological expertise. Given that the audience for the DFC Star Ratings is primarily patients, the TEP will have ample representation from patients and patient advocates.

We anticipate that the in-person meeting will take place over one day. There will also be additional pre- and follow-up teleconference calls. TEP members are expected to attend all meetings.

Project Objectives:

The University of Michigan Kidney Epidemiology and Cost Center (UM-KECC), through its contract with the Centers for Medicare and Medicaid Services (CMS), will convene a technical expert panel to obtain recommendations on options for resetting DFC Star Ratings distribution. Input from the TEP will inform the development of a methodology for resetting the DFC Star Ratings distribution. The final methodology developed is intended to ensure that the DFC Star Ratings to continue to be informative by reflecting meaningful performance differences among facilities.

TEP Expected Time Commitment:

- TEP members should expect to attend one or two 2-hour teleconference calls prior to the in-person meeting
- The in-person meeting will be held for one-day in June 2019 in Baltimore, MD. The exact meeting date will be finalized after the call for nominations period
- After the in-person meeting, additional conference calls (2 – 5 calls) may be needed

TEP Requirements:

The TEP will be composed of 10-20 individuals with relevant expertise and perspectives, such as:

- Renal disease patients and caregivers
 - Experts with subject matter expertise, e.g. subject-matter scientists in nephrology care; clinicians and nurses; consumer testing; communication of star rating systems in patient perspectives
 - Experts with methodological expertise, e.g. statisticians/biostatisticians with expertise in score or scale development, multivariate analysis, risk assessment, latent variable modeling
 - Individuals working on dialysis facility quality improvement
 - Individuals working on health care disparities
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Instructions:

Applicants/nominees must submit these documents ***with this completed and signed form:***

A letter of interest (not to exceed two pages) highlighting experience/knowledge relevant to the expertise described above. Subject matter and consumer experts should have expertise and experience in quality measure development, and health care consumer rating methodologies. For patients and consumers, experience and knowledge to highlight include years as a dialysis patient (or as a care-giver/family member), interest and familiarity with quality measures, and any participation or service on patient or consumer advocacy or advisory groups. Patients should also identify all other relevant knowledge and experience they believe is important.

Curriculum vitae/resume or a summary of relevant experience (including publications) for a maximum of 10 pages.

Consumer/patient/family (caregiver) applicants/nominees are not required to submit a curriculum vitae.

Patients/consumers should also identify all other relevant knowledge and experience they believe is important. Patient participants may elect to keep their names confidential in public documents.

Send this completed and signed TEP Nomination form, statement of interest, CV to UM-KECC with "Nomination" in the subject line at dialysisdata@umich.edu. Due by close of business April 5, 2019 Eastern Time.

Potential TEP members must be aware that participation on the TEP is voluntary. As such, individuals wishing to participate on the TEP should understand that their input will be recorded in the meeting minutes. Proceedings of the TEP will be summarized in a report that is disclosed to the general public. If a participant has disclosed private, personal data by his or her own choice, then that material and those communications are not deemed to be covered by patient-provider confidentiality. If potential patient participants wish to keep their names confidential, that request can be accommodated. Any questions about confidentiality will be answered by The University of Michigan Kidney Epidemiology and Cost Center (UM-KECC).

All potential TEP members must disclose any significant financial interest or other relationships that may influence their perceptions or judgment. It is unethical to conceal (or fail to disclose) conflicts of interest. However, the disclosure requirement is not intended to prevent individuals with particular perspectives or strong points of view from serving on the TEP. The intent of full disclosure is to inform the measure developer, other TEP members, and CMS about the source of TEP members' perspectives and how that might affect discussions or recommendations.

Applicant/Nominee Information (Self-Nominations Are Acceptable):

Name:

Credentials:

Role:

Organizational Affiliation, if any:

City:

State:

Mailing address:

Telephone:

Email:

Person Recommending the Nominee:

Complete this section only if you are nominating a third party for the TEP. You must sign this form and attest that you have notified the nominee of this action and that they are agreeable to serving on the TEP. The measure developer will request the required information from the nominee.

Name:

Credentials:

Role:

Organizational Affiliation, if any:

City:

State:

Mailing address:

Telephone:

Email:

I attest that I have notified the nominee of this action and that the nominee is agreeable to serve on the TEP.

Signature: _____ Date: _____

Applicant/Nominee's Disclosure:

This section addresses disclosure of any current and past activities that may indicate a conflict of interest. As a measure developer for the Centers for Medicare & Medicaid Services (CMS), the University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) must ensure independence, objectivity, scientific rigor, and balance in its measure development activities.

Do you or any family members have a financial interest, arrangement, or affiliation with any corporate

organizations that may create a potential conflict of interest? ☐Yes ☐No

If yes, describe (grant/research support, consultant, speaker's bureau, and major stock shareholder, other financial or material support). Include the name of the corporation/ organization.

Do you or any family members have intellectual interest in a study or other research related to the quality measures under consideration? ☐Yes ☐No

If yes, describe the type of intellectual interest and the name of the organization/group.

Applicant/Nominee's Agreement:

If at any time during my service as a member of this TEP my conflict of interest status changes, I will notify the measure developer and the TEP chair.

It is anticipated that there will be <approximate time commitment that is required>. I am able to commit to attending the TEP meetings in person, by teleconference, or by mutually agreed-upon alternative means.

If selected to participate in the TEP and the measures are submitted to a measure endorsement organization (such as the National Quality Forum), I will be available to discuss the measures with the organization or its representatives and work with the measure developer to make revisions to the measures, if necessary.

I understand that my participation on the TEP is voluntary. As such, I understand that my input will be recorded in the meeting minutes. Proceedings of the TEP will be summarized in a report that is disclosed to the general public. If I have disclosed private, personal data by my own choice, then that material and those communications are not deemed to be subject to any confidentiality laws.

If selected to participate in the TEP, I will keep all materials and discussions confidential until such time that CMS authorizes their release.

I have read the above and agree to abide by it.

Signature: _____ Date: _____

For patient participants only: I wish to keep my name confidential. ☐Yes ☐No
