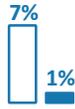


Kidney Care First (KCF) is a voluntary, patient-focused Kidney Care Choices (KCC) Model option with an aim to reduce Medicare expenditures while preserving or enhancing the quality of care furnished to beneficiaries with late-stage chronic kidney disease (CKD) and end-stage renal disease (ESRD). KCF builds on the existing [Comprehensive End-Stage Renal Disease Care \(CEC\) Model](#) and includes design elements from the recently announced [Primary Care First Model](#).



Approximately 37 million patients suffer from chronic kidney disease, and more than 726,000 patients have end-stage renal disease (ESRD).¹



ESRD treatment accounts for over 7% in Medicare spending, but only 1% of Medicare beneficiaries have ESRD.²



1 out of 5 patients who begin dialysis to treat ESRD die within one year.³

KCF Participation



Interested Stakeholders Apply to KCF

KCF will be open to participation by KCF practices comprised of nephrology practices and their nephrologists only, subject to meeting certain eligibility requirements.



Participants Deliver Coordinated, Cost-Effective Care

Participating KCF practices will be responsible for eligible beneficiaries' kidney care from late-stage CKD or ESRD through dialysis, kidney transplantation and post-transplant care. Eligible Medicare beneficiaries include those who:

- Have CKD stages 4 or 5
- Have ESRD and are receiving maintenance dialysis
- Were aligned to a KCF practice by virtue of their CKD or ESRD and then receive a kidney transplant



Trump Administration Goals

- ✓ Delay the progression of CKD to ESRD
- ✓ Support beneficiary transitions onto dialysis
- ✓ Support beneficiaries through the transplant process
- ✓ Keep beneficiaries healthy post-transplant



Participants Receive Payment

There are four types of key payment mechanisms under KCF. The first three mechanisms will also be used under the Comprehensive Kidney Care Contracting (CKCC) Options, whereas the fourth mechanism is unique to KCF.

1

Adjusted Monthly Capitated Payment (AMCP):

To equalize payments for managing a beneficiary who dialyzes at home and payments for managing an in-center dialysis beneficiary.

2

CKD Quarterly Capitated Payment (CKD QCP):

To manage aligned CKD stage 4 and 5 beneficiaries equivalent to monthly AMCP for aligned ESRD beneficiaries.

3

Kidney Transplant Bonus (KTB):

Up to \$15,000 paid out over three years for every successfully transplanted beneficiary whose transplant stays healthy.

4

Performance Based Adjustment (PBA):

Adjustment to payments made to participating practices based on performance of certain quality and utilization measures. PBA applies to the AMCP and CKD QCP, but not the KTB mechanism.



The KCF option is expected to run from Spring 2020 through December 31, 2023 with the option for up to 2 additional years. Interested stakeholders may apply in the fall of 2019. For more details on the timeline for KCF, please refer to the [KCC Model Infographic](#).

For more information on the Kidney Care Choices Model, please visit: <https://innovation.cms.gov/initiatives/voluntary-kidney-models/>

For questions about the KCF Option, please email KCF-CKCC-CMMI@cms.hhs.gov

¹ Centers for Disease Control and Prevention. Chronic Kidney Disease in the United States, 2019.

² United States Renal Data System. Annual Data Report, 2018; Volume 2, Chapter 9: Healthcare Expenditures for Personas with ESRD.

³ United States Renal Data System. Annual Data Report, 2018; Volume 2, Chapter 9: Healthcare Expenditures for Personas with ESRD.