

Understanding Measures, Star Rating, and Quality Outcomes National Provider Call

June 27, 2024

Allison Nemec (Ketchum): Hi, everyone. Thank you for joining today's Dialysis Facility Care Compare on Medicare.gov National Provider call. Our presenters today will be Darrick Hunter and Dr. Stephanie Clark from CMS, as well as Yvette Brown from ICF and Amy Hendershott from RTI.

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Darrick will begin today's presentation by providing an overview of the July 2024 refresh and the October 2024 release of data on Care Compare on Medicare.gov. Stephanie will go into more detail about the new measures and the preview period for October 2024. Yvette will cover accessing patient lists in EQRS, and Amy will discuss ICH CAHPS survey updates. Darrick will conclude with CMS stakeholder updates.

At the end of today's presentation, CMS will hold a Q&A session. Please use the Q&A box to submit your questions. Responses to questions, including those that were not answered during the webinar today, will be posted along with other materials from today's call on the CMS.gov ESRD general information page in the coming weeks.

Now, I would like to introduce Darrick Hunter. Darrick, you may begin.

Darrick Hunter (CMS): Thank you, Alle.

Today I'll start with the July 2024 refresh overview.

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With the July 2024 refresh, the following measures on Dialysis Facility Care Compare, or DFCC, will be updated with data from October 2022 through September 2023, and they are: adult and child patients who have had enough waste removed from their blood during hemodialysis, peritoneal dialysis; adult patients who had way too much calcium in their blood; hemoglobin management, which is downloadable only; phosphorus concentrations in the blood, also downloadable only; adult patients who received treatment through an arteriovenous fistula; adult patients who have a catheter left in the vein for at least three consecutive -- I'm sorry three consecutive complete months for their regular hemodialysis treatment; measurement of nPCR for Pediatric Hemodialysis Patients; patients who were on the kidney or kidney-pancreas transplant waiting list.

The HCP Vaccination Measure has also been updated. It is updated quarterly, and the data used in this release is from July through September 2023.

Next slide, please.

And I'm not seeing it on the screen, but the next one is October 2024 release overview.

Allison Nemec (Ketchum): Give us one second. We'll pull the slides up in a moment.

Darrick Hunter (CMS): Okay, thanks, Alle.

Next slide, please.

Okay, now I will talk about the October 2024 release overview.

Next slide, please.

With the October 2024 release, the following measures on DFCC will be updated with data from calendar year 2023: adult and child patients who have had enough waste removed from their blood during hemodialysis and peritoneal dialysis; adult patients who had too much calcium in their blood; frequency of patient death, hospital admission, or readmission; frequency of transfusions; hemoglobin management, downloadable only; phosphorus concentrations in the blood, downloadable only also; adult patients who received treatment through an arteriovenous fistula; adult patients who had a catheter left in a vein for at least three consecutive complete months for their regular hemodialysis treatment; measurement of nPCR for pediatric hemodialysis patients; patients who were on a kidney or kidney-pancreas transplant waiting list; transplant waitlist within a year of dialysis initiation; prevention of bloodstream infections; emergency department visits; emergency department encounters visits 30 days of hospital discharge; percentage of healthcare personnel who completed COVID-19 primary vaccination series; and Standardized Modality Switch Ratio for Incident Dialysis Patients.

Details will be coming forth in the later slides.

The star rating will also be updated in this release.

Next slide, please.

With the October 2024 relief, the following measures on DFCC will be updated with data from the 2023 spring and 2023 fall ICH CAHPS surveys: the scores and star ratings for the following survey measures: kidney doctor's communication and caring composite; quality of dialysis center care and operations composite; providing information to patients' composite; rating of kidney doctors; rating of dialysis center staff; rating of dialysis center.

The overall star rating on the ICH CAHPS survey of patients' experiences is also updated with this release.

Next slide, please.

Now I'm going to turn it over to Dr. Stephanie Clark.

Stephanie Clark (CMS): Thank you, Darrick, and good afternoon, everyone.

So, we're going to talk a little bit about the new measure that's coming out for the October 2024 release where CMS will report the Standardized Modality Switch Ratio for Incident Dialysis Patients on Medicare.gov.

This measure was included in a dry run table in facility preview reports for the past three quarters. And the measure provides information about the number of patients that consented to changing their treatment modality to a home modality after initially starting on in-center hemodialysis, as a result of ongoing education efforts and effective decision support by the dialysis facility.

The results show whether patients at the facility switched modalities less often, which is worse than expected; more often, which is better than expected; or about the same, which is as expected, compared to similar patients treated at other dialysis centers.

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The numerator for this measure is the observed number of first switches from in-center hemodialysis to a home dialysis modality among eligible patients at the facility during the time period. And the denominator is the expected number of first switches from in-center hemodialysis to a home dialysis modality among eligible patients at the facility during the time period, given the national average of modality switches, and the patient case-mix at the facility.

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So why do we think this information is important?

Dialysis modality impacts other clinical outcomes such as anemia, cardiovascular related outcomes, infection, and patient reported outcomes, such as experience of care. Measures of modality type reflect robust education, effective presentation of modality educational materials, and facilitation of patient decision-making by the dialysis unit. These processes can help patients make an informed choice and select a home dialysis modality, if they wish, that may best fit with their personal goals and values.

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Next, we'll talk about the preview period for October 2024.

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The preview period for the October 2024 release will be held from July 15 through August 15. Facility level reports will be posted on dialysisdata.org. And during the preview period, you can submit comments to CMS on the measures included in the report. Your comments will be shared with CMS, but will not appear on the DFCC website.

Next slide, please.

And now I will pass it over to Yvette.

Yvette Brown (ICF): Thanks, Dr. Stephanie.

Good afternoon, everyone.

Next slide, please.

Each quarter, the Kidney Epidemiology and Cost Center at the University of Michigan generates reports for facilities and large dialysis organizations. These files are bundled into password-protected zip files by organization. Organizations, every quarter, would need to request access to the files by opening a ticket with UM-KECC, and UM-KECC would send them a link to the organization so that they could download those files. This upcoming EQRS feature is meant to simplify this process. In a future state, UM-KECC would be able to upload all the zip files for patient lists and preview period reports to an S3 bucket. They would indicate whether the files are a patient list or preview period reports and which organization they belong to. The files would be scanned, and then EQRS would retrieve those files from the S3 bucket and make them available in the EQRS patient registry. We developed a new module in EQRS that will display the appropriate file links to the users so that they could download those files securely. The new module would only be visible to users with the appropriate role and would only allow them to download files for their organization. The files will remain available to users until the next quarter files were submitted. However, we will retain the database record. So, stay tuned for this new EQRS module coming soon.

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I will turn it over to Amy now.

Amy Hendershott (RTI): Thanks, Yvette.

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We just wanted to give a quick update on some updates with the ICH CAHPS survey. So as we've reported in the past, in an effort to reduce survey burden and increased response rates, CMS tested a shortened ICH CAHPS survey, analyzed the data, and then discussed those results with survey experts and ESRD stakeholders. One of those measures in the shortened survey is now undergoing the Measures Under Consideration, the MUC process, for approval. Once that is complete, there will be some other approval processes so that we can hopefully implement the shortened survey in the future. In addition, CMS is continuing to analyze whether a web-based mode of data collection will work for the ICH CAHPS survey, given the survey population. And we just ask for -- to assist with possible further testing of a web mode that dialysis centers are encouraged to add patient email addresses in the EQRS database to make testing of a web mode more successful.

And then I will hand it back over to Darrick.

Darrick Hunter (CMS): Thank you, Amy.

I'll now speak about CMS stakeholder updates.

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CMS recently launched a new DFCC listserv to better communicate with partners and constituents about DFCC-related news and resources -- including refreshes and new resources. We also conducted in-depth interviews with patients on dialysis who received a kidney transplant to talk about their experiences, what they wish they knew, and what resources would be most helpful.

We're currently developing a patient-centered video series. The first video is about what to know about kidney transplant as a treatment option for kidney disease. This video features testimonials from patients who were on dialysis who received a kidney transplant. We are looking at other potential video opportunities as well, such as Day in the Life.

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Now I'll turn it back over to Alle.

Allison Nemec (Ketchum): Thanks, Darrick, and thank you all.

We are now going to start the Q&A portion of today's webinar. As a reminder, you may now ask any question using the Q&A box. Responses to questions not answered during the webinar will be posted with other webinar materials on the CMS.gov ESRD general information page after the webinar. We currently just have one question that's in the box now, but, please, again, if you have any questions, submit them in the Q&A box, and we'll take a look.

I think this is a question that came in. It's somewhat about the preview period, and if you can please expand on it. But it says, "Will this module be available for the upcoming preview period on July 15 through August 15, 2024?"

Stephanie, this might be for you, or it might be for RTI.

Stephanie Clark (CMS): I think it's actually –

Allison Nemec (Ketchum): A patient list, yeah, EQRS.

Stephanie Clark (CMS): I think it's actually the patient list.

Allison Nemec (Ketchum): Yes.

Stephanie Clark (CMS): And so I'll let Yvette take this one.

Yvette Brown (ICF): Thanks. We don't have an exact date for the deployment of the new mod yet. I don't think people will be ready for the July-August preview period, but hopefully the next one.

Allison Nemec (Ketchum): Thank you, Yvette, for clarifying that.

Stephanie Clark (CMS): And, Alle, I'll just jump in because I think there was a follow-up question.

Allison Nemec (Ketchum): Yes.

Stephanie Clark (CMS): So, Yvette, it sounds like for this upcoming October preview period, the process will be the same, and facilities will still have to request the patient list, or is it we are not doing patient lists as we did before?

Yvette Brown (ICF): No, you won't have to request it. However, we do have a new role in EQRS. So if you don't have that role, you would be able to request that role. And you would only have to do it that one time. Then every time those -- every quarter those lists are available, you would just need to log into EQRS to download it.

Stephanie Clark (CMS): And I'm just going to clarify that until this new process goes into place, we will not be doing patient lists again for the October refresh.

Yvette Brown (ICF): I would need someone from UM-KECC to verify that, but I'm assuming until it goes live, their current process would remain.

Allison Nemec (Ketchum): And Stephanie, I think there's a question in there for you right now.

It says, "Could you discuss how the data for the Standardized Modality Switch Ratio will be displayed? Is there a plan to include this measure as a part of the star rating?"

Stephanie Clark (CMS): So I can speak to the second part, that currently this measure is not in the star ratings, but I don't know if anyone from the team would want to comment on how it's going to be displayed.

And if we can't answer that today, we can get back to you.

Allison Nemec (Ketchum): Okay, we can get back to them on the -- on the first part.

Thank you, Stephanie.

There's another question. "Are the two downloadable data-only measures hemoglobin management, and -- I'm going to probably say this wrong -- phosphorus concentrations in the blood part of the calculation for star measures?" I'm so sorry if I said that wrong.

Stephanie Clark (CMS): Those two measures are not included in the star ratings.

Allison Nemec (Ketchum): Thank you.

Another question. "Will the emergency department measures be included in the star rating for October 2024?"

Stephanie Clark (CMS): So, I'll just clarify that no changes have been made to the star ratings for this release.

Allison Nemec (Ketchum): Thank you, thank you.

Last question that's currently in there. "Are there age limits to the measures? For example, are patients who are younger than 18 years of age included?"

Stephanie Clark (CMS): It depends on the measure. And so each one has a different set of specifications.

Allison Nemec (Ketchum): Thanks, Stephanie.

There are currently no other questions. We'll give it a minute to see if any other additional questions come in. As a reminder, if you have any questions, please submit them to the Q&A box, and we will do our best to get them addressed.

We'll give it another minute here.

Okay, I'm not seeing any other questions coming in. Thank you for those of you who submitted questions, and thank you for those of you who helped answer those questions.

So this concludes Q&A, and this concludes our webinar today. Thank you, again, for those of you for joining us today. As a reminder, the recording, the transcript, and the slide deck, as well as the Q&A from today's session will be posted on the ESRD general information page on CMS.gov in the coming weeks.

We hope everyone enjoys the rest of your day today.

This concludes today's call. Thanks again.