



# Calendar Year (CY) 2021 End-Stage Renal Disease (ESRD) Prospective Payment System (PPS) Proposed Rule



## ESRD Quality Incentive Program (QIP) Proposals

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# Acronyms

<b>BSI</b>	bloodstream infection	<b>OMB</b>	Office of Management and Budget
<b>CDC</b>	Centers for Disease Control and Prevention	<b>PAMA</b>	Protecting Access to Medicare Act of 2014
<b>CMS</b>	Centers for Medicare & Medicaid Services	<b>PPPW</b>	Percentage of Prevalent Patient Waitlisted
<b>CY</b>	calendar year	<b>PPS</b>	prospective payment system
<b>DVIQR</b>	Division of Value, Incentives & Quality Reporting	<b>PSC</b>	Performance Score Certificate
<b>ESRD QIP</b>	End-Stage Renal Disease Quality Incentive Program	<b>PY</b>	payment year
<b>HHS</b>	Health & Human Services	<b>RIA</b>	Regulatory Impact Analysis
<b>ICH CAHPS</b>	In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems	<b>SHR</b>	Standardized Hospitalization Ratio
<b>Kt/V</b>	$K$ (dialyzer clearance of urea) * $t$ (dialysis time) / $V$ (patient's total body water)	<b>SRR</b>	Standardized Readmission Ratio
<b>MIPPA</b>	Medicare Improvements for Patients and Providers Act of 2008	<b>STrR</b>	Standardized Transfusion Ratio
<b>mTPS</b>	Minimum Total Performance Score	<b>TPS</b>	Total Performance Score
<b>NHSN</b>	National Healthcare Safety Network	<b>UFR</b>	Ultrafiltration Rate
<b>NQF</b>	National Quality Forum	<b>VAT</b>	Vascular Access Type

# Objectives

Attendees will be able to:

- Recognize statutory and legislative components for ESRD QIP.
- Understand proposals in the CY 2021 ESRD PPS Proposed Rule for the ESRD QIP program.
- View the proposed rule.
- Know the process to submit comments.

# Guidance

- This webinar is intended for CMS to provide information regarding proposed requirements for the ESRD QIP that are contained within the CY 2021 ESRD PPS Proposed Rule released on July 13, 2020.
- Information is offered as an informal reference and does not constitute official CMS guidance. CMS encourages stakeholders, advocates, and others to refer to the proposed rule located in the [Federal Register](#).

# Statutory Foundations

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# Legislative Drivers

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

- **Program intent:** Promote patient health by providing a financial incentive for renal dialysis facilities to deliver high-quality patient care.
- **Section 188(h):** Authorizes payment reductions of up to 2% if a facility does not meet or exceed the minimum Total Performance Score (TPS).

The Protect Access to Medicare Act of 2014 (PAMA) added section 1881 (h)(2)(A)(iii).

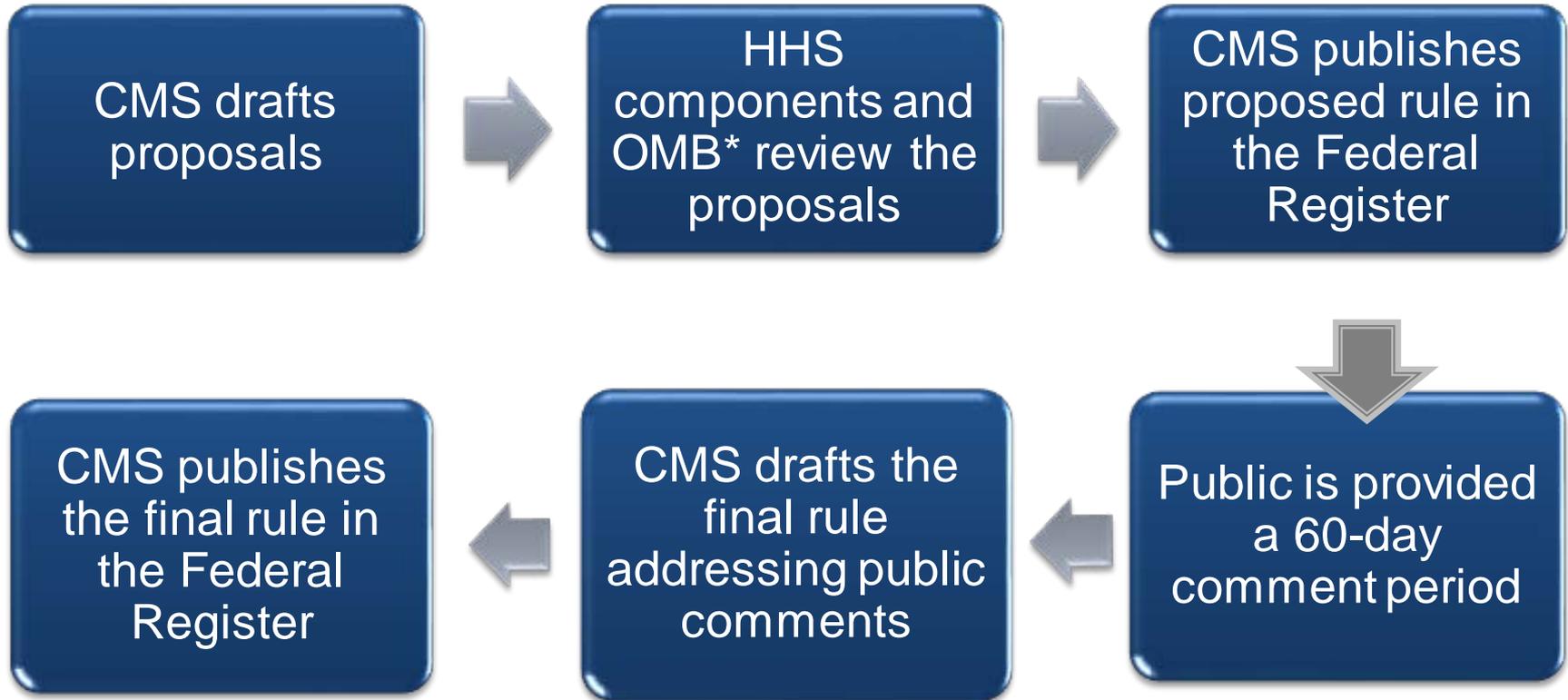
- ESRD QIP must include measures specific to the conditions treated with oral-only drugs, these measures are required to be outcome-based, to the extent feasible.

# Statutory Requirements Overview

MIPPA requires the Health and Human Services(HHS) Secretary to create an ESRD QIP that will:

- Select measures that address:
  - Anemia management
  - Dialysis adequacy
  - Patient Satisfaction
  - Iron Management, bone mineral metabolism, and vascular access
- Establish performance standards
- Specify the performance period
- Develop a methodology for calculating Total Performance Scores (TPS)
- Apply an appropriate payment percentage reduction
- Publicly report results

# Rule Development



\*OMB: Office of Management and Budget

# Proposals for Payment Year (PY) 2023 and PY 2024

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# Proposal

Propose to replace the scoring methodology for the Ultrafiltration Rate (UFR) reporting measure, beginning in PY 2023.

- Facilities would be scored based on the number of eligible patient-months instead of facility-months.
- This would modify the scoring methodology for the UFR reporting measure.

$$\left[ \frac{\text{Number of patient-months successfully reporting data}}{\text{Number of eligible patient-months}} \times 12 \right] - 2$$

# Rationale

This proposal would score facilities based on the number of eligible patient-months, instead of facility-months.

- Flexible approach for facilities unable to obtain information on certain patients.
- Be more consistent with the National Quality Forum (NQF) measure upon which it is based.

# Rationale (cont.)

- Accurately reflect the patient experience by addressing patients may require varying amounts of time in treatment.
- Align more closely with CMS' goal to focus outcome-based measures.

CMS seeks comment on this proposal

# Clarification

The clarification of the timeline for facilities to make changes to their National Healthcare Safety Network (NHSN) Bloodstream Infection (BSI) clinical measure and NHSN Dialysis Event Reporting measure data for the purposes of the ESRD QIP would:

- Emphasize there is a 3-month review and correction period for data submitted to NHSN.
- Reiterate the inability for CMS to accept any changes made after the 3-month review and correction period.

# Rationale

This clarifies to facilities that:

- They can make changes to their data at any point prior to each quarterly submission for the purposes of the ESRD QIP.
- Any changes in their data **after** the submission deadlines would be for the purposes of Centers for Disease Control and Prevention (CDC) surveillance, and not their data for purposes of the ESRD QIP.
  - New or revised data submitted after a deadline will not be reflected in the permanent data file.

# Proposal

Propose to change the number of records a selected facility is required to submit for NHSN Validation.

- Allow facilities selected to participate to submit a total of 20 records across two quarters.
- There are no proposed changes to the CROWNWeb validation study.

# Rationale

This proposal would:

- Provide an adequate sample size for validation
- Reduce facility burden

CMS seeks comment on this proposal

# Summary of Proposals

For PY 2023, CMS proposed:

- Updates to the scoring methodology for the UFR reporting measure
  - Facilities are scored based on the number of eligible patient-months instead of facility-months.
- Clarification of both the reporting requirements for the NHSN BSI measure and the NHSN validation study
- Changing the number of records a selected facility is required to submit for NHSN Validation

# Collection of Information

- Under the Paperwork Reduction Act of 1995, CMS is required to provide a 60-day notice in the Federal Register and solicit public comment on:
- ESRD QIP wage estimates
- Estimated burden associated with the data validation requirements for PY 2023 and PY 2024
- CROWNWeb reporting requirements for PY 2023 and PY 2024

CMS seeks comment on these issues

# **Estimated Performance Standards and Payment Reduction**

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# Performance Period

The Performance Period for PY 2023 and subsequent years CMS continues with:

- The 12-month performance and baseline periods.
- A performance and baseline period for each year that is one year advanced from those specified for the previous payment year.

# Performance Standards

The Performance Standards for the PY 2024 and subsequent years must:

- Include levels of achievement and improvement.
- Be established prior to the beginning of the performance period for the year involved.
  - CMS codified “achievement threshold,” “benchmark,” “improvement threshold,” and “performance standard” in its regulation.

# Domain Weights

A facility must be eligible to receive a score on at least one measure  
In any two domains to receive a Total Performance Score (TPS)

## Clinical Care Domain

40% of TPS

- Kt/V Dialysis Adequacy (comprehensive)
- VAT Measure Topic:
  - Standardized Fistula Rate
  - Long-Term Catheter Rate
- Hypercalcemia
- Standardized Transfusion Ratio (STrR)
- Ultrafiltration Rate reporting measure

## Care Coordination Domain

30% of TPS

- Standardized Readmission Ratio (SRR)
- Standardized Hospitalization Ratio (SHR)
- Clinical Depression Screening & Follow-Up
- Percentage of Prevalent Patients Waitlisted (PPPW)

## Patient & Family Engagement Domain

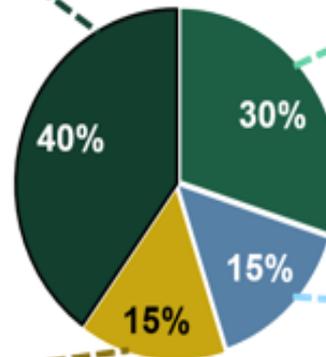
15% of TPS

- ICH CAHPS

## Safety Domain

15% of TPS

- NHSN Bloodstream Infection (BSI)
- NHSN Dialysis Event reporting measure
- Medication Reconciliation



# Estimated Payment Reduction

## Estimated Payment Reduction for PY 2023:

- The current policy:
  - Has been codified to implement the payment reductions on a sliding scale.
  - States a facility will not receive a payment reduction if it achieves a Total Performance Score (TPS) that is at or above the minimum TPS (mTPS).
- We estimate that a facility must meet or exceed a mTPS of 57 in order to avoid payment reduction.
  - The mTPS is based on data from CY 2018 as CY 2019 data are not yet available.

# Payment Reduction Scale: PY 2023

CMS will update and finalize the mTPS using CY 2019 data in the CY 2021 ESRD PPS Final Rule

TPS	Reduction (%)
100-57	0%
56-47	0.5%
46-37	1.0%
36-27	1.5%
26-0	2.0%

A facility must meet or exceed a mTPS of 57 to avoid payment reduction

# Payment Reductions

## Estimated Distribution of PY 2023 and PY 2024 ESRD QIP Payment Reductions

Payment Reduction	Number of Facilities	Percent of Facilities*
0.0%	5,490	76.82%
0.5%	1,215	17.00%
1.0%	336	4.70%
1.5%	65	0.91%
2.0%	41	0.57%

\*Based on estimates, 239 facilities were not scored due to insufficient data.

# Payment Reductions (cont.)

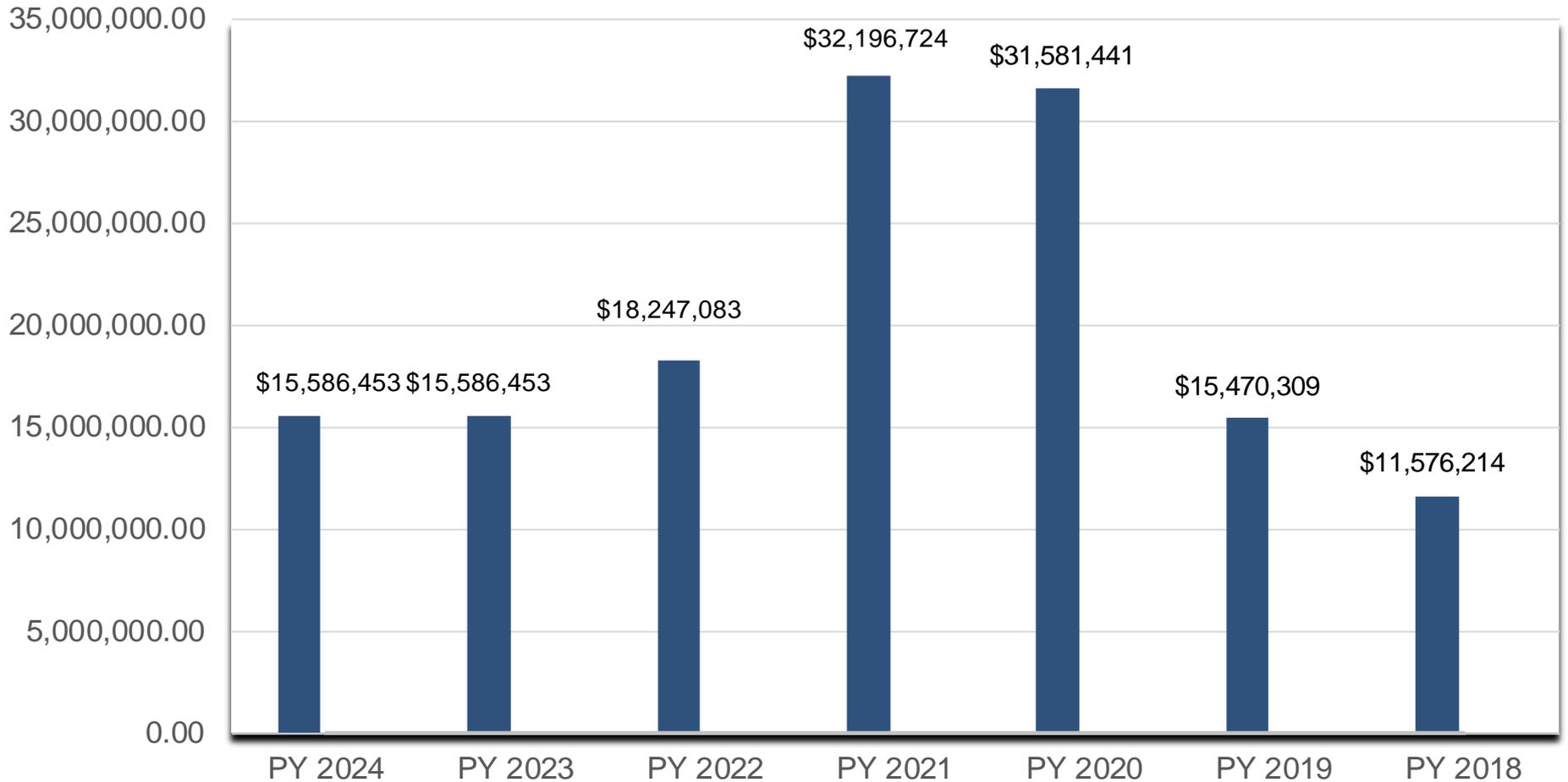
## Data Used to Estimate PY 2023 and PY 2024 ESRD QIP Payment Reductions

Measure	Period of time used*	Performance Period
ICH CAHPS Survey	Jan 2017-Dec 2017	Jan 2018-Dec 2018
SRR	Jan 2017-Dec 2017	Jan 2018-Dec 2018
SHR	Jan 2017-Dec 2017	Jan 2018-Dec 2018
PPPW	Jan 2017-Dec 2017	Jan 2018-Dec 2018
Kt/V Dialysis Adequacy Comprehensive VAT	Jan 2017-Dec 2017	Jan 2018-Dec 2018
Standardized Fistula Ratio	Jan 2017-Dec 2017	Jan 2018-Dec 2018
% Catheter	Jan 2017-Dec 2017	Jan 2018-Dec 2018
Hypercalcemia	Jan 2017-Dec 2017	Jan 2018-Dec 2018

\*Period of time used to calculate achievement thresholds, 50<sup>th</sup> percentiles of the national performance, benchmarks, and improvement thresholds

# Estimated Reductions

## Estimated Payment Reductions and History



# Commenting

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# Public Role in Rulemaking

CMS writes the proposed rule

CMS publishes in the *Federal Register*

Public comment period open

CMS reviews all public comments

CMS publishes the final rule in the *Federal Register* (becomes regulation)

**Your Comments Matter**  
The comment period is open  
until September 4, 2020

# Submitting Comments

- Comments must be received by September 4, 2020.
  - Use file code CMS-1732-P
- CMS encourages submission of electronic comments to [regulations.gov](https://www.regulations.gov).
  - Comments may also be submitted by regular mail or express or overnight mail to the designated addresses provided.
- Responses to comments will be in the final rule.

# Finding the Proposed Rule

1. Begin at [www.FederalRegister.gov](http://www.FederalRegister.gov)
2. Enter CMS-1732-P in the [Find] box.
3. Select the [magnifying glass] button.

The screenshot displays the Federal Register website's search interface. At the top left is the National Archives logo. The main header reads "FEDERAL REGISTER" with the subtitle "The Daily Journal of the United States Government". To the right is the National Archives and Records Administration seal. A blue bar contains the "Document Search" link. Below this is a search bar with "Documents" and "Public Inspection 0" tabs. The search input field contains "CMS-1732-P" and is circled in red. To its right is a magnifying glass icon, also circled in red. A button next to the search bar indicates "1 document". Further right are "Subscribe" and "Other Formats: CSV/Excel, JSON" options. At the bottom of the search bar are links for "Show Advanced Search" and "Learn More".

# Open the Proposed Rule

## 4. Click on the title in blue



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PUBLICATION DATE	DOCUMENTS FOUND	1	RELEVANT	NEWEST	OLDEST
Past 30 days	1				
Past 90 days	1				
Past 365 days	1				
TYPE					
Proposed Rule	1				
AGENCY					

**Medicare Program; End-Stage Renal Disease Prospective Payment System, Payment for Renal Dialysis Services Furnished to Individuals With Acute Kidney Injury, and End-Stage Renal Disease Quality Incentive Program**

by the Centers for Medicare & Medicaid Services on 07/13/2020.

September 4, 2020. ADDRESSES: In commenting, please refer to file code CMS-1732-P. Because of staff and resource limitations, we cannot accept comments ... Medicaid Services, Department of Health and Human Services, Attention: CMS-1732-P, P.O. Box 8010, Baltimore, MD 21244-8010. Please allow...

# To Begin Commenting

5. To submit a comment, select the [Submit A Formal Comment] button

A Proposed Rule by the [Centers for Medicare & Medicaid Services](#) on 07/13/2020

This document has a comment period that ends in 52 days. (09/04/2020)

**SUBMIT A FORMAL COMMENT**

**PUBLISHED DOCUMENT**

Start Printed Page 42132

**AGENCY:**  
Centers for Medicare & Medicaid Services (CMS), HHS.

**ACTION:**  
Proposed rule.

**SUMMARY:**  
This proposed rule would update and make revisions to the End-Stage Renal Disease (ESRD) Prospective Payment System (PPS) for calendar year (CY) 2021. This rule also proposes to update the payment rate for renal dialysis services furnished by an ESRD facility to individuals with acute kidney injury (AKI). In addition, this rule proposes to update requirements for the ESRD Quality Incentive Program (QIP).

**DOCUMENT DETAILS**

**Printed version:**  
[PDF](#)

**Publication Date:**  
07/13/2020

**Agencies:**  
[Centers for Medicare & Medicaid Services](#)

**Dates:**  
To be assured consideration, comments must be submitted at one of the addresses provided below, no later than September 4, 2020.

**Comments Close:**  
09/04/2020

**Document Type:**  
Proposed Rule

# Enter Your Comment

## 6. Enter your comment in the [Comment] field

 You are submitting an official comment to Regulations.gov.  
Comments are due 09/04/2020 at 11:59 pm -0400.

**regulations.gov**  
*close comment form*

Thank you for taking the time to create a comment. Your input is important. Regulations.gov has provided [tips for submitting an effective comment](#).

Once you have filled in the required fields below you can preview and/or submit your comment to the Centers for Medicare Medicaid Services for review. All comments are considered public and will be posted online once the Centers for Medicare Medicaid Services has reviewed them.

You can view [alternative ways to comment](#) or you may also comment via Regulations.gov at, <http://www.regulations.gov/#!submitComment;D=CMS-2020-0079-0002>.

**Comment\***  
.....



**Upload File(s)** + Add a file *Note: You can attach your comment as a file and/or attach supporting documents to your comment. [Attachment Requirements](#).*

# Submit Your Comment

7. Enter your information
8. Select the [I read and understand the statement above] box
9. Select the [Submit Comment] button

**First Name**

**Last Name**

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5 characters left

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You are filing a document into an official docket. Any personal information included in your comment text and/or uploaded attachment(s) may be publicly viewable on the web.

I read and understand the statement above. 

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Please review the [Regulations.gov privacy notice](#) and [user notice](#).

# Key ESRD QIP Dates

Item	Time Frame
PY 2020 Payment Reductions Applied	January 1—December 31, 2020
PY 2021 Preview Period	July 29—August 31, 2020
PY 2022 Performance Period	January 1—December 31, 2020
CY 2021 ESRD PPS	<p><b>Proposed Rule Published:</b> July 13, 2020</p> <ul style="list-style-type: none"> <li>• <b>Comment Period Ends:</b> September 4, 2020</li> </ul> <p><b>Final Rule Published:</b> November 2020 (estimated)</p>
PY 2021 PSC* Available for Download	<p>Mid-December 2020</p> <ul style="list-style-type: none"> <li>• Post within 15 business days</li> </ul>
PY 2021 Payment Reductions	January 1—December 31, 2021

\*PSC: Performance Score Certificate

# Resources

Resource	Location
Program (General)	<u><a href="#">ESRD QIP Section on CMS.gov</a></u> <u><a href="#">ESRD QIP Section on <i>QualityNet</i></a></u>
ESRD QIP Measures	<u><a href="#">Technical Specifications on CMS.gov</a></u> <u><a href="#">ESRD QIP Measures on CMS.gov</a></u> <u><a href="#">ICH CAHPS on CMS.gov</a></u> <u><a href="#">ESRD QIP Measures on <i>QualityNet</i></a></u>
Public Reporting	<u><a href="#">Dialysis Facility Compare</a></u>
Stakeholder Partners	<u><a href="#">Partners in ESRD Care</a></u>
Proposed Rule	<u><a href="#">ESRD QIP Proposed Rule</a></u>

To reach us for comment: Contact us via the [ServiceNow Q&A Tool](#) or [ESRDQIP@CMS.HHS.gov](mailto:ESRDQIP@CMS.HHS.gov).

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