



January 17, 2018, Dialysis Facility Compare National Provider Call Questions and Answers

The questions below were received during the January 17 Dialysis Facility Compare National Provider Call. Questions were submitted to the Centers for Medicare & Medicaid Services (CMS) via the chat box and answered either over the phone during the webinar or subsequent to the webinar by CMS subject matter experts, as part of the question and answer commitment for the remaining submitted questions not answered during the webinar.

Section 1: responses to questions submitted through the chat box but not answered during the call due to time constraints.

Question: Can the CAHPS survey be made simpler and less often? Some patients are getting tired of being bothered with it.

Response: The ICH CAHPS team is cognizant of patient burden. We are considering ways to reduce the number of items in the questionnaire. We are also considering sending the survey only once a year, but are concerned with facilities meeting the minimum number of surveys required for reporting purposes.

Question: Will the 2016 ICH-CAHPS star rating be available for preview in February 1 to 15 2018? Will 2016 ICH-CAHPS star rating be released in DFC in April 2018?

Response: The updated ICH CAHPS top, middle, and lower box scores are available in the February 1st through February 15th preview period. You will be able to view this on your preview reports for that preview period, which serves as the preview for the April release. The ICH CAHPS star rating is being implemented for the first time beginning with the public release in October 2018. The ICH CAHPS star ratings will be available for facilities to preview during the July 2018 preview period.

Question: Is it accurate to say that the five star scores that will be released in April will reflect performance from full calendar year 2016?

Response: The Star Ratings which will be released in April will reflect performance from the most recent time periods available, based on the specific measure. The table (star rating data periods sheet) outlines exactly what time periods will be covered for each measure included in the Star Rating.

Question: When will ICH-CAHPS Star Rating being posted on DFC website?

Response: The ICH CAHPS Star Rating is scheduled to be posted on the DFC website in October 2018.



Question: What will be the data source for transplant related measures?

Response: The complete list of data sources for each of the measures are available in appendix materials of the measure specifications available on DialysisData.org:

<https://www.dialysisdata.org/content/methodology>. The Percentage of Prevalent Patients Waitlisted documentation is available at

https://dialysisdata.org/sites/default/files/content/ESRD_Measures/PPPW_MIF_MJF.pdf. The

Standardized Waitlist Ratio documentation is available at

https://dialysisdata.org/sites/default/files/content/ESRD_Measures/SWR_MIF_MJF.pdf

Question: It would be very helpful to segregate MDR data from all patients in the DFC and the DFR reports as they are combined within charts. This is confusing and incongruous.

Response: Thank you for your comment, your recommendation has been shared with the appropriate groups at CMS.

Question: I realize that CMS wants to follow specific clinical indicators to assure their money is well spent. However, I believe we as providers do not differentiate MDR patients from non-MDR patients. Why not look at all patients?

Response: Some measures included on DFC are based on all patients; however, others are dependent on data from Medicare Claims and therefore are limited to Medicare Patients.

Question: Is it true that CMS only allows a certain number of 5 Star centers and that a center could not move up until a center drops out of the 5 Star category? Is this true for the 4 stars as well?

Response: No, there is no set limit to the number of facilities in each star category.

Question: To clarify: a new star rating will be calculated in April and the one calculated in October will not show on the website when updated?

Response: New Star Ratings will be publically posted on the DFC website in April 2018. The Star Ratings previewed in July/August 2017 will not be displayed on the DFC website.

Question: Can you please clarify on the subset of patients that had data removed due to a cms-2728 not submitted? Has the requirement of the form being in submitted status been removed or will the data only be included in the calculations when the 2728 is in submitted status?

Response: In the calculations previewed in July 2017, a subset of patients who had clinical data included in CROWNWeb but did not have a 2728 form available in the CROWNWeb system on the date the extract was created had clinical data removed from the extract. This data was supplied for calculation and the measures affected will be recalculated with complete data for the February 2018 preview period.



Question: CMS issued an email memorandum on October 13, 2017 stating their intention to suppress publicly reported quality data on DFC for clinics affected by Hurricanes Harvey, Irma and Maria. CMS has updated the counties and parishes affected by the storms in the QIP exemptions, added the state of South Carolina to the exemptions, and also added clinics affected by the California wildfires. Will these additional areas be exempt from the DFC 5 star program?

Response: CMS plans to release guidance on disaster areas in the near future via wide release. Please stay tuned.

Section 2: contains the transcript of questions answered during the live call

The following questions were answered over the phone during the January 17 webinar. Questions and answers are presented as they appear in the transcript of the webinar.

Question: ESRD measures manual is version 2.5, which includes performance year 2016 for the October 2017 release. When will the ESRD measures manual will be updated with the current specifications?

Response: So, I think that is not something that I own, so I don't want to make any promises to it. If you send in your question to the help desk, then we will forward you to the appropriate parties, and I think they can get you a more precise answer on that. I can't give you an expected release date yet. Thank you.

Question: Can you clarify the new timing of measure release for measures impacted by the nursing home data set? When will they be posted to the website and when will they be used to calculate a star rating score?

Response: So, for the measures that were affected by this... The only measures that were affected by this were standardized risk-adjustment measures, which we calculate annually. So, essentially what happened is those data are for calendar year 2016. We are going to be calculating those measures using calendar year 2016 data. And they will be released as part of the January release this month. So, all of the data that were affected by the nursing home data issue for the Standardized Mortality, Hospitalization, and Transfusion Ratio Measures will be available this month at the release. Thank you

Question: What about us measuring the UFR rate now for CMS? Is this something we will be looking at too?

Response: Right now, the ultrafiltration rate reporting measure is being collected as part of the calendar 2018 reporting requirements for the QIP. This is not currently included in DFC for the not-minor reason that we don't currently have data reported to us yet that we could use to report on DFC. I think that is a measure that we may consider in the future as a candidate measure, but I think we would hesitate to be bringing it forward until we'd had a chance to actually have enough data to report on it on DFC. And



right now, there simply hasn't been enough time for that to have been reported for us to do so. I think certainly if that's something that you'd be interested in seeing on DFC, please let us know through the help desk, and that will be part of the feedback that goes into our decision-making process about what measures to consider for future implementation.

Question: Since a facility would not receive the points associated with the CAHPS survey, would they automatically receive a lower star rating?

Response: No. So, what would happen is you simply would not receive a Star Rating for the patient experience of care. You would still potentially receive a Star Rating based on the clinical measures, and that Star Rating would be unaffected by the lack of ICH CAHPS reporting data. To clarify, for the CAHPS-based Star Rating, you simply would not receive any score. It would not provide you with a worse score simply because you didn't have data for that measure. I hope that clarifies the question, but if not, feel free to follow up.

Question: Is there a plan for the future to implement stand-alone home programs in this rating?

Response: I'm not sure that I understand how that works within DFC. I guess the answer to that is no. We do incorporate home patients within some of our measures, where either the evidence bears it out or there's no particular reason to exclude the patients. For example, the adult hemodialysis measure includes home hemodialysis patients. I think the issue we would have with developing measures specific to that, if that's what you're asking about -- if not, I apologize, and feel free to provide us either with a follow-up here or -- to clarify or to send a message to our help desk. I think the primary issue there is the number of patients, the size of the population that engage in or that receive home hemodialysis, or even, to some extent, peritoneal dialysis, limits the capacity for us to develop a measure that is sufficiently reliable to assess facilities. If you have any additional questions on that vein, of course, I certainly welcome you to send them to us either here or in writing to the help desk.

Question: Who does CMS use the ICH-CAHPS results to rate a facility on the star rating? For example there are 94 patients in a clinic, but an average of 15 patients out of the 94 returned the questionnaire. How reliable is that data?

Response: I think first of all, the CAHPS aren't currently incorporated in the Star Ratings. If you attended our October call, then you're aware that we are planning to implement a Star Rating based off of the CAHPS measure in October 2018. So, that hasn't been done yet, and that doesn't affect what you'll see in April. That said, I think the answer to your question is that CMS has a minimum reporting standard of 30 completed surveys. If 30 surveys haven't been completed, then we don't incorporate reporting. That's consistent with the requirements for the ESRD QIP, and it's been applied to the public reporting of the ICH CAHPS on DFC since its implementation last year.

Question: Do you have an exact date or date range to expect the 5 star rating release?

Response: At this point, I don't have the exact date in front of me. It's typically in the second or third week of April, I believe, and so I think we're still on target for that range.



Question: Would you be able to tell me how the dfr data is compiled for transplant options? Is this information obtained from the ESRD 2728 form question #26?

Response: Yes, the information in rows 2t and 2u on the DFR is obtained from question #26 from Form CMS-2728. The reasons for not informing the patients reported in 2v was from question #27 in the Form CMS-2728.

Question: I understand the transplant measures will be published in the October 19 DFC release. Will they be included in the calculation of five star scores? If so, will you release new technical specifications for calculating five star scores?

Response: So, to clarify, CMS has not made a final decision about publicly reporting the transplant measures as yet. When we do, we will be releasing an announcement regarding that decision. If they are publicly reported beginning in October 2019, then they will not be part of the Star Ratings. If at some point in the future they or any other measure becomes part of the Star Ratings calculations, then yes, the methodologies for incorporating them in the Star Ratings will be something that we'll present through National Provider Call-In, through online posted documentation explaining how they would be incorporated with that, and that's true of any measure, not just the transplant measures. And it would also, I should say, be included in the ESRD Measures Manual.

Question: You have mentioned that in order to be included in the DFC data extract the "record" for the patient/provider/month must be in submitted status. Just to clarify, are you referring to the cweb clinical record submission or more specifically to the 2728 form itself?

Response: So, that was referring specifically to the 2728 form. I don't know enough about submission requirements on CROWNWeb to tell you if that applies more generally as well. I can only tell you that that was the issue that we were experiencing for the 2728 form here.

Please send your question to the help desk. We will provide the Web address for that as part of the presentation at the end of the presentation so that we can get you a formal response from the CROWNWeb team.

Question: Since 2016 star rating comprise 2017 hypercalcemia, and vascular access data, was the new/updated hypercalcemia & vascular access quality measures used in 2016 star rating?

Response: So, I'm going to tell you how I understand your question to be asked. If I am getting it incorrect, then please feel free to respond. What I understand you to be asking is whether or not we're using the new updated measures that were finalized in the rules, which are the two updated vascular access measures and the updated hypercalcemia measures. Those measures, which are being updated, do not go into effect on Dialysis Facility Compare until the October 2018 release. So, we are using the older version of the measures for the April release. And that includes, for the Dialysis Facility Compare, Star Ratings that will be published with the April release. The new measures are intended to be



implemented for public reporting beginning in October, and that's when their data would be included and when their data would be incorporated in the calculation of the Star Ratings.

Question: So the individual clinics that don't have 30 surveys returned don't receive any points and would automatically lose star rating status?

Response: The answer to your question is that beginning with October 2018, when we start incorporating IHC CAHPS in the Star Ratings, what will happen is that there will be two separate Star Ratings, one based on clinical measures and the other based upon the ICH CAHPS. Now, this information was gone over in some detail at the October release, so I don't want to repeat all of that, but certainly you can go back and look at the information that we provided then for more details. The short answer is that yes, if we don't have CAHPS data for your facility, then we will simply not assign a Star Rating to your facility. And that would be reflected on the website.

Question: Do the measure results include all patients or only medicare patients?

Response: The answer to that question is that it depends upon the particular measure. Some of the measures, such as the Standardized Readmission and Standardized Hospitalization Ratio measures, make use of Medicare claims data either to identify events like hospitalizations or for risk adjustments. Another example for that would be the Standardized Mortality Ratio. In those cases, we limit the population to Medicare patients only. Other measures are collected through the CROWNWeb tool, which allows us to collect data for all patients, not merely Medicare patients, so measures such as Kt/V or hypercalcemia, which are dependent upon CROWNWeb data, include all ESRD dialysis patients, not merely Medicare patients.

Question: Why do the DFC standards differ from the QIP standards?

Response: The reason that the DFC standards vary from the QIP standards are -- well, there are a number of them, and we've addressed them in writing elsewhere. To summarize, the primary difference is that the focus of the programs is different. Whereas the QIP is designed to provide a payment determination that modifies payment to dialysis facilities, the primary mission of DFC is to provide quality information to patients to help inform their quality decision making as they receive care. And so the standards that are applied not only for the reporting of quality measures on DFC but also as they're included within the Star Ratings are geared toward that particular goal, and we believe that the different standards in the two programs reflect those different missions that the two programs hold.

Question: Why doesn't the star rating update if you are updating components of the rating?

Response: The reason that it didn't update in October is because we had found issues with the data, and essentially we made a program decision to freeze the data because we didn't want to simply wipe out the data that were available. So we kept the most recent data that we had posted on the website, and waited until we were able to update all of the component measures of the Dialysis Facility Compare Star Ratings before we updated DFC. We were not able to provide full updates of the Kt/V and hypercalcemia measures until April. And so we decided that we would be updating the Star Ratings at the same time.



And up until then, all we're simply doing is keeping the site itself frozen and not reporting any data other than what had most recently been posted in the July release of last year.

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