

All-KCQA Conference Call/Webinar

November 7, 2014

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KIDNEY CARE QUALITY ALLIANCE

ROLL CALL

OPENING REMARKS

Allen Nissenson, MD – *KCQA Co-Chair*

CALL GROUND RULES

- Call/webinar is open to public (registration was required) and a public access file of all materials was made available on the web
- KCQA members participate in agenda items as they arise
- Specific time is provided on agenda for public comment
- All remarks are ***off the record***

AGENDA

1. Review of recommended fluid management measure specifications
 - Last month's call reviewed specifications for FM2 (related to post-dialysis weight) and previewed for you the FM7 concept (related to avoidance of high UFR)
 - This call again presents FM2, but also presents full specifications for FM7
2. Questions from KCQA members on Steering Committee recommendation and/or specifications
3. Next steps and public comment

STEERING COMMITTEE AND WORKGROUP

- **KCQA Steering Committee:** Ed Jones (Co-Chair); Allen Nissenson (Co-Chair); Akhtar Ashfaq; Donna Bednarski; Barbara Fivush; Ray Hakim; Jay-r Lacson; Shari Ling; Chris Lovell; Tom Manley; Gail Wick
- **Testing/Feasibility Workgroup:** Scott Bieber; Steven Brunelli (non-voting); Maggie Carey (non-voting); Joseph Flynn; Lori Hartwell; Jeffrey Hymes; Mahesh Krishnan; Jay-r Lacson (non-voting); Klemens Meyer; Paul Miller; Don Molony; Tom Parker; Glenda Payne; Dan Weiner

CHARGE FROM STEERING COMMITTEE

Identify the top 4-5 measure concepts, and from there measure specifications (numerator, denominator, exclusions), from which KCQA can approve 1-2 related measures for testing for the purpose of submitting to NQF for endorsement.

STEERING COMMITTEE RECOMMENDATIONS

- ***FM2: Post-Dialysis Weight Above or Below Target Weight***
- ***FM7: Avoidance of Utilization of High UFR (≥ 13 ml/kg/hour)***

Approve both measures as specified for retrospective testing for performance gap, reliability, and feasibility and prospective testing for implementation issues.

FM2: Post-Dialysis Weight Above or Below Target Weight

TITLE	DESCRIPTION	NUMERATOR	DENOMINATOR	EXCLUSIONS
FM2: Post-Dialysis Weight Above or Below Target Weight	Percentage of patients with an average post-dialysis weight ≥ 1 kg above or below the prescribed target weight in the reporting month.	Number of patients from the denominator with an average post-dialysis weight ≥ 1 kg above or below the prescribed target weight in the reporting month. Interpretation of Score: Lower score = better quality	Number of adult in-center hemodialysis patients in an outpatient dialysis facility undergoing chronic maintenance hemodialysis in the reporting month.	1. Age <18 years. 2. Patients in a facility <30 days. 3. Home dialysis patients. 4. <7 hemodialysis treatments in the facility during the month. 5. Facilities treating <XX adult in-center hemodialysis patients during the reporting month.* 6. Patients without a completed CMS Medical Evidence Form (Form CMS-2728),

*The Workgroup agreed to determine the appropriate minimum number of patients empirically during testing.

FM7: Avoidance of Utilization of High UFR (≥ 13 ml/kg/hour)

TITLE	DESCRIPTION	NUMERATOR	DENOMINATOR	EXCLUSIONS
FM7: Avoidance of Utilization of High UFR (≥ 13 ml/kg/hour)	Percentage of adult in-center hemodialysis patients in the facility whose average UFR ≥ 13 ml/kg/hour.	Number of patients from the denominator whose average UFR ≥ 13 ml/kg/hour who receive an average of <240 minutes per treatment during the calculation period. Interpretation of Score: Lower score = better quality	Number of adult in-center hemodialysis patients in an outpatient dialysis facility undergoing chronic maintenance hemodialysis in the calculation period.	<ol style="list-style-type: none"> 1. Age <18 years. 2. Patients in a facility <30 days. 3. Peritoneal dialysis patients. 4. <7 hemodialysis treatments in the facility during the month. 5. Facilities treating <XX adult in-center hemodialysis patients during the calculation period.* 6. Patients without a completed CMS Medical Evidence Form (Form CMS-2728),

*The Workgroup agreed to determine the appropriate minimum number of patients empirically during testing.

NEXT STEPS

- Survey monkey link to Lead Representatives to vote on Steering Committee's recommendations to approve both measures, as specified, for retrospective and prospective testing
- Testing measures
- Workgroup, Steering Committee, and KCQA will review testing results, adjusting specifications if necessary
- Submit measures to NQF

PUBLIC COMMENT