

Website Content Specified in the End-Stage Renal Disease Quality Incentive Program 2014 Final Rule

On November 10, 2011, CMS published a rule in the Federal Register outlining the policies and procedures for the payment year (PY) 2014 End-Stage Renal Disease (ESRD) Quality Incentive Program (QIP) (76 FR 70228).

The final rule finalized the performance standards that apply to the PY 2014 ESRD QIP, but due to data limitations related to the claims verification process, we were unable to assign actual numbers to these finalized standards based on a full year of data (76 FR 70276). The final rule estimated performance standards based on data from July 1, 2010, through March 30, 2011, or nine of the 12 months of baseline data.

The final rule stated that we would publish the performance standards based on the full 12 months of data on this website. Therefore, in accordance with the final rule, the numbers for the performance standards for the PY 2014 ESRD QIP measures are as follows:

Table 1: Numerical Values for the Finalized Achievement and Improvement Performance Standards for the PY 2014 ESRD QIP Clinical Measures

Measure	Achievement/Improvement Performance Standard
Hemoglobin > 12 g/dL	4%
Vascular Access Type	
%Fistula	58%
%Catheter	14%
URR	98%

Because of the same data limitations discussed above, CMS was unable to publish in the final rule the numerical values for the achievement thresholds and benchmarks for the clinical measures. The final rule estimated achievement thresholds and benchmarks based on data from July 1, 2010, through March 30, 2011, or nine of the 12 months of baseline data (76 FR 70278). The final rule indicated that we would publish the achievement thresholds and benchmarks based on the full 12 months of data on this website. Therefore, the numbers for the achievement thresholds and benchmarks for the PY 2014 ESRD QIP are as follows:

Table 2: Numerical Values for the Finalized Achievement Thresholds and Benchmarks for the PY 2014 ESRD QIP Measures

Measure	Measure Description/Definition	Achievement Threshold (15 th percentile)	Benchmark (90 th percentile)
Hemoglobin Greater Than 12 g/dL Measure	% of patients with hemoglobin greater than 12 g/dL	10%	0%
Dialysis Adequacy (URR)	% of patients with URR greater than or equal to 65%	94%	100%
Vascular Access Type	Average of two sub-measures		
(Fistula)	<i>% of patients receiving treatment with fistulae</i>	46%	74%
(Catheter)	<i>% of patients receiving treatment with catheters</i>	24%	5%
NHSN Dialysis Event Reporting Measure	Enroll and report at least 3 months of dialysis event data	N/A	N/A
Patient Experience of Care Survey Usage Reporting Measure	Facilities must attest that they successfully fielded survey during the performance period	N/A	N/A
Mineral Metabolism Reporting Measure	Facilities must attest that they measures serum calcium and serum phosphorus levels of Medicare patients	N/A	N/A

Finally, because CMS did not yet have the finalized performance standards, achievement thresholds, and benchmarks for the reasons discussed above, we were unable to publish a numerical value for the PY 2014 minimum Total Performance Score or the resulting payment reduction scale. The final rule estimated a minimum Total Performance Score and an estimated payment reduction scale based on data from July 1, 2010, through March 30, 2011, or nine of the 12 months of baseline data (76 FR 70282). The final rule indicated that we would publish the achievement thresholds and benchmarks based on the full 12 months of data on this website. After completing the calculations based on a full calendar year of data, CMS has determined that the minimum Total Performance Score for the PY 2014 ESRD QIP is **53**. The payment reduction scale for the PY 2014 ESRD QIP is as follows:

Table 3: Payment Reduction Scale for the PY 2014 ESRD QIP

Score	Reduction
100 to 53	0%
52 to 43	0.5%
42 to 33	1.0%
32 to 23	1.5%
22 or below	2.0%