End-Stage Renal Disease Quality Incentive Program - Preview Performance Score Report
Payment Year: 2019
Facility: 502556

Clinical Care Subdomain

Improvement Period: 01/01/2016-12/31/2016
Performance Period: 01/01/2017-12/31/2017

Table 1 - Clinical Care Subdomain Measures and Measure Topics

Clinical Care Measures/Measure Topics	Improvement Period Numerator	Improvement Period Denominator	Improvement Period Rate/Ratio	Performance Period Numerator	Performance Period Denominator	Performance Period Rate/Ratio	Achievement Threshold	Benchmark	Improvement Score	Achievement Score	Measure Score	Measure Weight (% of Subdomain)
Hypercalcemia	0	778	0.00%	0	846	0.00%	4.24%	0.32%	-	10	10	13.79%
Kt/V Comprehensive	731	764	95.68%	805	825	97.58%	86.99%	97.74%	9	9	9	32.76%
Standardized Transfusion Ratio	7	18.413	0.380	4	16.680	0.240	1.488	0.421	-	10	10	20.69%
Vascular Access Type Topic	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	9c	32.76%
VAT Fistula	459	633	72.51%	504	708	71.19%	53.66%	79.62%	0	7	7	N/A
VAT Catheter	15	568	2.64%	19	646	2.94%	17.20%	2.95%	-	10	10	N/A

Eligible Clinical Care Measures/Measure Topics: 4 of 4
Weighted Clinical Care Subdomain Score: 93

c The measure score was calculated by aggregating its component measure scores

Notes:
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Patient and Family Engagement/Care Coordination Subdomain

Improvement Period: 01/01/2016-12/31/2016
Performance Period: 01/01/2017-12/31/2017

Table 2 - Patient and Family Engagement/Care Coordination Subdomain Measures

Patient and Family Engagement/Care Coordination Measures	Improvement Period Numerator	Improvement Period Denominator	Improvement Period Rate/Ratio	Performance Period Numerator	Performance Period Denominator	Performance Period Rate/Ratio	Achievement Threshold	Benchmark	Improvement Score	Achievement Score	Measure Score	Measure Weight (% of Subdomain)
ICH CAHPS	**N/A**	**N/A**	**N/A**	**N/A**	**N/A**	**N/A**	**N/A**	**N/A**	**N/A**	**N/A**	**9c**	**61.90%**
Neph Comm and Caring	N/A	N/A	88.17%	N/A	N/A	88.30%	56.41%	77.06%	-	10	10	N/A
Quality of Dialysis Care and Ops	N/A	N/A	60.22%	N/A	N/A	67.16%	52.88%	71.21%	6	8	8	N/A
Providing Info to Patients	N/A	N/A	88.16%	N/A	N/A	90.46%	72.09%	85.55%	-	10	10	N/A
Overall Rating of Neph	N/A	N/A	75.87%	N/A	N/A	80.90%	49.33%	76.57%	-	10	10	N/A
Overall Rating of Dialysis Staff	N/A	N/A	74.15%	N/A	N/A	73.91%	48.84%	77.42%	0	8	8	N/A
Overall Rating of Dialysis Facility	N/A	N/A	73.59%	N/A	N/A	81.56%	51.18%	80.58%	-	10	10	N/A
Standardized Readmission Ratio	**21**	**23.079**	**0.910**	**18**	**22.115**	**0.814**	**1.289**	**0.624**	**3**	**7**	**7**	**38.10%**

Eligible Patient and Family Engagement/Care Coordination Measures: **2 of 2**
Weighted Patient and Family Engagement/Care Coordination Subdomain Score: **82**

c **The measure score was calculated by aggregating its component measure scores**

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Safety Domain

Improvement Period: 01/01/2016-12/31/2016
Performance Period: 01/01/2017-12/31/2017

Table 3 - Safety Domain Measures (Topic and Clinical Measure)

Safety Measures	Improvement Period Numerator	Improvement Period Denominator	Improvement Period Rate/Ratio	Performance Period Numerator	Performance Period Denominator	Performance Period Rate/Ratio	Achievement Threshold	Benchmark	Improvement Score	Achievement Score	Measure Score	Measure Weight (% of Domain)
NHSN Topic	**N/A**	**N/A**	**N/A**	**N/A**	**N/A**	**N/A**	**N/A**	**N/A**	**N/A**	**N/A**	**5[c]**	**100.00%**
NHSN Bloodstream Infection	-	-	-	8.000	4.693	1.705	1.738	0.000	0	1	1	N/A

Table 4 - Safety Domain Measures (Reporting Measure)

Safety Measure	Number of Successful Reported Months	Number of Eligible Months	Measure Score	Measure Weight (% of Domain)
NHSN Dialysis Event Reporting	12	12	10	N/A

Eligible Safety Measures: **2 of 2**
Weighted Safety Domain Score: **50.000**

[c] **The measure score was calculated by aggregating its component measure scores**

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Reporting Domain

Performance Period: 01/01/2017-12/31/2017
NHSN HCP Influenza Vaccination Performance Period: 10/01/2016-03/31/2017

Table 5 - Reporting Domain Measures (Reported Months)

Reporting Measures	Number of Successful Reported Months	Number of Eligible Months	Threshold Reporting Rate	Measure Score	Measure Weight (% of Domain)
Anemia Management	12	12	99%	10	20.00%
Mineral Metabolism	11	12	97%	9	20.00%

Table 6 - Reporting Domain Measures (Reported Patients)

Reporting Measures	Number of Reported Patients	Number of Eligible Patients	Measure Score	Measure Weight (% of Domain)
Clinical Depression Screening and Follow-up	90	90	10	20.00%
NHSN Healthcare Personnel Influenza Vaccination	N/A	N/A	10	20.00%
Pain Assessment and Follow-up	N/A	N/A	10	20.00%
Period 1	77	77	N/A	N/A
Period 2	78	78	N/A	N/A

Eligible Reporting Measures: 5 of 5
Weighted Reporting Domain Score: 98.000

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Preview Performance Score

Table 7 - Preview Performance Score Details

Category	Facility Score	State Average Score*	National Average Score*	Facility Measure Weights	Facility Weighted Score
Total Performance Score Before Applicable Deductions+	84	70	66	N/A	N/A
Clinical Measure Domain (75%)	88.800	66.500	60.124	N/A	66.600
Hypercalcemia	10	7	7	8.00%	0.8000
ICH CAHPS	9	7	5	26.00%	2.3400
Kt/V Comprehensive	9	8	8	19.00%	1.7100
Standardized Readmission Ratio	7	6	5	16.00%	1.1200
Standardized Transfusion Ratio	10	7	5	12.00%	1.2000
Vascular Access Type Topic	9	6	5	19.00%	1.7100
Safety Measure Domain (15%)	50.000	75.747	72.386	N/A	7.500
NHSN Topic	5	8	7	100.00%	5.0000
Reporting Measure Domain (10%)	98.000	92.555	94.989	N/A	9.800
Anemia Management	10	10	10	20.00%	2.0000
Clinical Depression Screening	10	10	10	20.00%	2.0000
Mineral Metabolism	9	9	9	20.00%	1.8000
NHSN HCP Influenza Vaccination	10	9	9	20.00%	2.0000
Pain Assessment	10	10	10	20.00%	2.0000

* State and National Average Scores are unweighted

Notes:

- **A dash (-) indicates that the facility was not eligible to receive a score on the measure during the measurement period.**

Minimum Total Performance Score: 60 points
Extraordinary Circumstance Exception Approved: N/A
+Total Performance Score Before Applicable Deductions: 84 points
Reduction for Noncompliance with Feasibility Study and/or Pilot Validation Study: 0 points
Total Performance Score: 84 points
Total Payment Reduction: No Reduction

Please consult the CMS ESRD Measures Manual (https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/Downloads/CMS-ESRD-Measures-Manual-2017.pdf) and the CMS ESRD QIP Guide to the PSR (https://www.qualitynet.org/dcs/BlobServer?blobkey=id&blobnocache=true&blobwhere=1228890829400&blobheader=multipart %2Foctet-stream&blobheadername1=Content-Disposition&blobheadervalue1=attachment%3Bfilename%3DPY2019_GuidePSR_061518.pdf&blobcol=urldata &blobtable=MungoBlobs)for additional details on scoring calculations.