

# End-Stage Renal Disease Quality Incentive Program - Preview Performance Score Report Payment Year: 2019 Facility: 502553

# **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	10	1284	0.78%	8	1272	0.63%	4.24%	0.32%	3	9	9	13.79%
Kt/V Comprehensive	1391	1415	98.30%	1425	1455	97.94%	86.99%	97.74%	-	10	10	32.76%
Standardized Transfusion Ratio	12	28.750	0.417	8	26.011	0.308	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	9°	32.76%
VAT Fistula	737	984	74.90%	763	956	79.81%	53.66%	79.62%	-	10	10	N/A
VAT Catheter	50	923	5.42%	41	893	4.59%	17.20%	2.95%	3	8	8	N/A

Eligible Clinical Care Measures/Measure Topics: Weighted Clinical Care Subdomain Score:

<sup>c</sup> The measure score was calculated by aggregating its component measure scores

#### Notes:

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"N/A" indicates the value is not applicable to the measure/measure topic scoring calculation. •





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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	7°	61.90%
Neph Comm and Caring	N/A	N/A	85.93%	N/A	N/A	75.12%	56.41%	77.06%	0	9	9	N/A
Quality of Dialysis Care and Ops	N/A	N/A	65.32%	N/A	N/A	66.08%	52.88%	71.21%	1	7	7	N/A
Providing Info to Patients	N/A	N/A	85.38%	N/A	N/A	80.98%	72.09%	85.55%	0	6	6	N/A
Overall Rating of Neph	N/A	N/A	80.84%	N/A	N/A	60.75%	49.33%	76.57%	0	4	4	N/A
Overall Rating of Dialysis Staff	N/A	N/A	69.48%	N/A	N/A	72.57%	48.84%	77.42%	3	8	8	N/A
Overall Rating of Dialysis Facility	N/A	N/A	81.89%	N/A	N/A	73.03%	51.18%	80.58%	0	7	7	N/A
Standardized Readmission Ratio	24	27.043	0.887	24	28.975	0.828	1.289	0.624	2	7	7	38.10%

Eligible Patient and Family Engagement/Care Coordination Measures: Weighted Patient and Family Engagement/Care Coordination Subdomain Score: 70

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 $^{\rm c}$  The measure score was calculated by aggregating its component measure scores

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# End-Stage Renal Disease Quality Incentive Program - Preview Performance Score Report Payment Year: 2019 Facility: 502553

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	7℃	100.00%
NHSN Bloodstream Infection	3.000	5.966	0.503	4.000	5.107	0.783	1.738	0.000	0	5	5	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: 70.000

<sup>c</sup> 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	12	12	97%	10	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	158	158	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	132	132	N/A	N/A
Period 2	139	139	N/A	N/A

Eligible Reporting Measures: 5 of 5 Weighted Reporting Domain Score: 100.000

Notes:

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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%)	84.700	66.500	60.124	N/A	63.525
Hypercalcemia	9	7	7	8.00%	0.7200
ICH CAHPS	7	7	5	26.00%	1.8200
Kt/V Comprehensive	10	8	8	19.00%	1.9000
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%)	70.000	75.747	72.386	N/A	10.500
NHSN Topic	7	8	7	100.00%	7.0000
Reporting Measure Domain (10%)	100.000	92.555	94.989	N/A	10.000
Anemia Management	10	10	10	20.00%	2.0000
Clinical Depression Screening	10	10	10	20.00%	2.0000
Mineral Metabolism	10	9	9	20.00%	2.0000
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** <sup>+</sup>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 (<u>https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/Downloads/CMS-ESRD-Measures-Manual-2017.pdf</u>) and the CMS ESRD QIP Guide to the PSR (<u>https://www.qualitynet.org/dcs/BlobServer?blobkey=id&blobnocache=true&blobwhere=1228890829400&blobheader=multipart</u> %2Foctet-stream&blobheadername1=Content-Disposition&blobheadervalue1=attachment%3Bfilename%3DPY2019\_GuidePSR\_061518.pdf&blobcol=urldata &blobtable=MungoBlobs)for additional details on scoring calculations.

