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CMS - Engaging Multiple Payers in Payment Reform

The Affordable Care Act created the Center for Medicare & Medicaid Innovation (CMS Innovation Center) to test new payment and service delivery models aimed at reducing program expenditures under Medicare, Medicaid, and the Children's Health Insurance Program (CHIP) and to enhance the quality of care that CMS beneficiaries receive. The Innovation Center is testing more than 20 models that create new incentives for clinicians and organizations that deliver medical care through CMS programs, with a goal to deliver better care at lower cost. CMS is also supporting a variety of state efforts to create new incentives for these clinicians and organizations through the Medicaid and CHIP programs. All of these models share a common pathway for success: They hinge on getting clinicians and healthcare organizations to manage the health of populations and to act as good stewards of healthcare resources.

To read the full article in JAMA, click [here](#).

For the supplemental readings, click [here](#).



Patient Services

Preventing Involuntary Discharge of Patients

In efforts to aide and assist the facilities, the Network developed The [*Preventing the Involuntary Discharge of Dialysis Patients Facility Guide and Checklist*](#) to be utilized with patients at risk for discharge. The guide is intended to serve as an outline your facility can use in conjunction with your existing policies and procedures to establish an appropriate plan of care and interventions for the patient. If you have any questions in regards to the Preventing the Involuntary Discharge of Dialysis Patients Facility Guide and Checklist please contact our Patient Services Director [Andrea Bates](#).

National Kidney Foundation Kidney Walk

The National Kidney Foundation (NKF) and the IPRO End-Stage Renal Disease Network of the Ohio River Valley invite healthcare providers, patients, transplant recipients and donors, caregivers and community members to participate in the 1 or 3 mile Northeast Ohio Kidney Walk on Sunday, June 11, 2017, at the Great Lakes Science Center in Cleveland.

DATE: Sunday, June 11, 2017
TIME: Registration: 8:00 a.m.
Walk Start: 9:00 a.m.

LOCATION:
Great Lakes Science Center
601 Erie side Ave,
Cleveland, OH 44114



The goal of the Kidney Walk is to increase awareness about kidney disease and to raise funds to support lifesaving programs for patients, their families, and those at risk.

Join us at 8:00 AM on June 11 for:

- A complimentary breakfast provided by Bob Evans Farms
- Entertainment by D.J. Ryan Wolf, official DJ for the Cleveland Browns, Z107.9 On-air Mixer and Chopstar DJ.

Walk, dance and show your support for this great cause.

- Sign up your team today via the link below. The NKF is offering two additional team incentives:
- Top fund raising team will get 30 NKF blankets donated to their unit!
- Team with the most team members* will receive a visit from a member of the NKF staff who will present them with an Award Certificate and NKF goodies!

REGISTER YOUR TEAM HERE: <http://donate.kidney.org/IPRO>

*all team members must be registered online prior to Walk day

If you want to participate as an individual, please sign up at

http://donate.kidney.org/site/TR/Walk/NKFServingOhioKentuckyandTennessee?fr_id=8501&pg=entry

February is American Heart Month!

Heart disease is the leading cause of death for American women and men, accounting for 1 in 4 deaths in the United States. Nearly half of Americans have at least one risk factor for heart disease, such as high blood pressure, obesity, physical inactivity, or an unhealthy diet. Risk also increases with age.

7 Simple Tips to Get an Accurate Blood Pressure Reading

It's easy to get skewed results if clinicians and patients aren't on the same page about how to take accurate blood pressure measurements.

This [infographic](#) from the American Medical Association offers a simple way to help ensure the most accurate results.



Educational Webinars

Collaborate, Network and Learn with your Nephrology Nurse Colleagues in Washington, DC

April 7-10, 2017- Register by February 20th for early bird discounts and special rates

Click [here](#) to register





Quality Improvement

Quality Improvement Activities

The quality department is off and running ! The table below outlines our Quality Improvement Activities, their launch dates, facility selection criteria, and the number of facilities involved. If you would like more information about these Quality Improvement Activities please contact our [Quality Improvement Department](#) or refer to the QIA section on the [IPRO website](#).

| Project | Launch Date | Inclusion Requirements | # of target facilities |
|------------------------------|-------------|----------------------------|------------------------------------|
| Long Term Catheter Reduction | January 1 | >10% LTCR | 148 |
| HAI-BSI | January 1 | >.92 pooled mean BSI | 128 |
| HAI- Vaccination | January 1 | 25 of NW lowest quintile | 25 |
| PFHPP Transplant | February 1 | Shown disparity | 23 |
| QIP QIA | February 1 | Below QIP threshold for Ca | 10 |
| NHSN Data | December 1 | No EMR shared | 5 hospitals 20 dialysis clinics |

Secondary Hyperparathyroidism in ESRD Patients

Many dialysis patients develop secondary hyperparathyroidism (SHPT) due to complications of their renal disease that cause complex alterations in bone and mineral metabolism. Patients diagnosed with SHPT are at increased risk of developing hypercalcemia.

Patients with hypercalcemia may experience the following symptoms and are at increased risk for cardiovascular disease, morbidity, and mortality:

- Abdomen pain
- Nausea/ vomiting
- Constipation
- Muscle twitching/ weakness

Dialysis providers continuously struggle to manage the calcium levels of patients with chronic kidney disease (CKD) and ESRD. Many patients struggle to adhere to a diet low in calcium and phosphate. Many of the binders prescribed to maintain patients' phosphorus levels are calcium-based binders. Patients who find the aluminum- magnesium based binders costly will often purchase over the counter antacids to replace their binders.

Patients with ESRD typically have lower amounts of vitamin D to help them metabolize calcium properly and may take over the counter vitamins to help boost vitamin D levels, while unknowingly increasing their calcium levels as well.

Mineral metabolism is an important consideration for the patient, and it is imperative for the clinic to monitor. The CMS Quality Incentive Program (QIP) uses mineral metabolism as one of its measurement to assess quality outcomes for patients. Depending on the percent of patients in a facility that have hypercalcemia, the facility may experience a reduction in payment from Medicare.

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/Downloads/QIP-BoneMineral-FS.pdf>

<http://www.nephrologynews.com/fda-approves-amgens-parsabiv-treat-secondary-hyperparathyroidism/>



Data Management

2744 Form Updates Deadline for Submission

Below is the current statistics of where the Network is with 2744 form processing in CROWNWeb:

| 2744 Form Status Update | |
|-------------------------|-----|
| Draft | 227 |
| Rejected | 31 |
| Finalized | 212 |
| Not Generated | 131 |

Please note that if you are currently in Draft or Not Generated status, please process the form as soon as possible.

The deadline for finalized submission is April 1st, 2017.

CrownWeb and NHSN Data Validation Project in the Payment Year 2017 Final Rule

Allegheny Science & Technology (AST) is under contract with CMS to validate the accuracy of CROWNWeb and NHSN data. AST has a data use agreement in place with CMS to request and receive patient records from dialysis facilities for this purpose.

CMS describes this validation project in the PY2017 final rule, which can be accessed at the following link:

https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/05_LawsandRegs.html

Dialysis Event Surveillance Training

At least one staff member at every dialysis facility must complete Dialysis Event Surveillance protocol training for the National Healthcare Safety Network (NHSN) on an annual basis. Please complete the training as soon as possible.

The Network will track each facility's completion of the training and will contact leadership at those facilities that do not complete this CDC requirement.

[Start training now!](#)

If you have any questions, please contact [James Hrubik](#), Sr. Data Coordinator.



Use the Network Data Knowledge Base and Customer Portal

With the increase in data that must be submitted, as well as systems through which the data is collected, there are multiple ways in which you can reach the Network Data Support Team for help.

- Knowledge Base and Customer Portal <http://help.esrd.ipro.org>

- ESRD Network Data Department can be reached at the following email address:
NW9Help@iproesrdnetwork.freshdesk.com

When submitting a help desk ticket please include the clinic CCN#. ease remember that you should NEVER include any patient-specific information such as Name, Date of Birth, Social Security Number, Medicare Claim Number, etc. The only patient identifier that can safely be communicated is the Unique Patient Identifier (UPI) from CROWNWeb.

IPRO End-Stage Renal Disease Network of the Ohio River Valley, the ESRD Organization for Indiana, Kentucky, and Ohio, prepared this material under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. CMS Contract Number: HHSM-500-2016-00009C.

Stay Connected

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