Dear Colleagues:

The National Forum of ESRD Networks (“The Forum” at www.esrdnetworks.org) appreciates this opportunity to offer comments regarding several quality metrics for chronic kidney disease (CKD) and end-stage renal disease (ESRD) that the Centers for Medicare and Medicaid Services (CMS) has offered for review. The Forum noted the current placement of CKD quality metrics under the “Primary Care and Chronic Illness Standing Committee” and hopes that in the future there is the opportunity to utilize a broader mandate under CKD recognizing the patient-centered implications of a continuum of care from CKD to ESRD. The Forum would also very much like to be more proactively engaged in stages earlier than the public commentary period given the representation of all Congressionally mandated and CMS contracted ESRD Networks. Given the limited time available to the Forum to provide comment on the current quality metrics, we would nevertheless like to offer some abbreviated thoughts regarding the following metrics:

• Delay in Progression of CKD Measure (CBE ID 3753): Whereas the Forum remains fully supportive of efforts to slow the progression of CKD and value-based payment models that encourage such process improvement, we are concerned about several areas of the proposed streamlined metric to include the limited exclusionary criteria of advanced or metastatic cancer. The Forum feels that there are several other acute and chronic disease states associated with limited life expectancy that should be accounted for in the denominator and would welcome the opportunity to make further recommendations. Furthermore, notwithstanding the separate mortality metric (see below), death as the competing event for CKD progression to ESRD has not been accounted for in this metric, so that death events may appear to halt progression to ESRD, leading to misleadingly favorable scores. Lastly, the Forum would also like to recognize the fact that delaying CKD progression measures that begin in the latter stages (i.e., stage 4) of CKD limits a provider’s ability to make meaningful change in the trajectory of the patient’s illness. The Forum therefore recommends initiating such quality metrics at earlier CKD stages if possible.

• Risk Standardized Mortality Ratio for Late-Stage CKD and ESRD (CBE ID 3754): The Forum again voices its appreciation regarding efforts to improve the outcomes of persons with CKD; however, the Forum has
concerns regarding individual providers’ abilities to have consistent and direct impacts on all-cause mortality. Quality measures that assess outcomes outside of the nephrologist’s control may lead to ineffective strategies for efforts that are unlikely to succeed. The Forum would welcome the opportunity to discuss efforts more directly under the kidney care community’s control and place a focus of incentivizing improvements in these critically important areas.

- ESRD Dialysis Patient Life Goals Survey (PaLS) (CBE ID 3742): The Forum is supportive of efforts to better understand life goals of persons with CKD as well as efforts to better focus on person-centered outcomes with the ultimate goal of living well with kidney disease. While we do support the premise of this quality measure, the Forum has concerns regarding dialysis facility staffing shortages (and the increased burden on limited staff to obtain such important information), as well as the willingness of patients to participate in more surveys without clear indication of how it might benefit them.

The Forum would once again like to thank CMS and PQM for the opportunity to comment on the above proposed quality measurements and offer its willingness to become more actively engaged in future discussions.

Sincerely,

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