

DEVELOPMENT OF KIDNEY TRANSPLANT REFERRAL MEASURES

Stakeholders Meeting
April 14-15, 2005

Ashwini Sehgal

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Goals of Project

- Develop measures for quality improvement, public reporting
- Based on evidence, conditions for coverage
- Minimally burdensome to providers

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Why bother given shortage?

- Ethical obligation to distribute scarce resource fairly
- May increase living donations

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NOT Goal of Project

- Forcing all patients through the transplant process

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Tasks

- Literature review
- Draft measure
- Technical expert panel (TEP) meetings
- Comments from renal community
- Stakeholders meeting
- Final recommended measures

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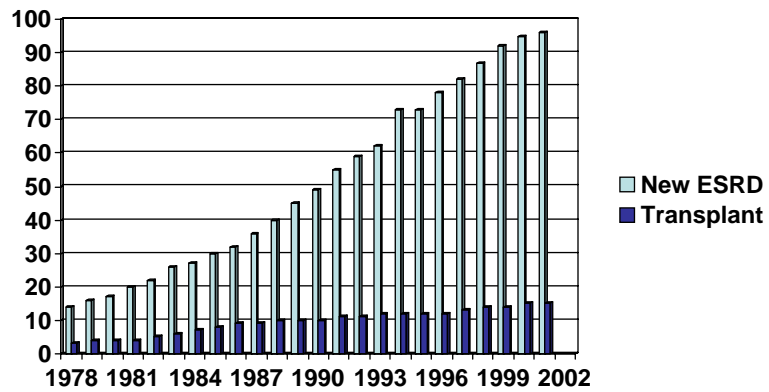
OUTLINE

- Literature Review
- Conditions for Coverage
- Clinical performance measures (CPM's)
- Draft CPM's

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Literature Review

New ESRD vs. transplants



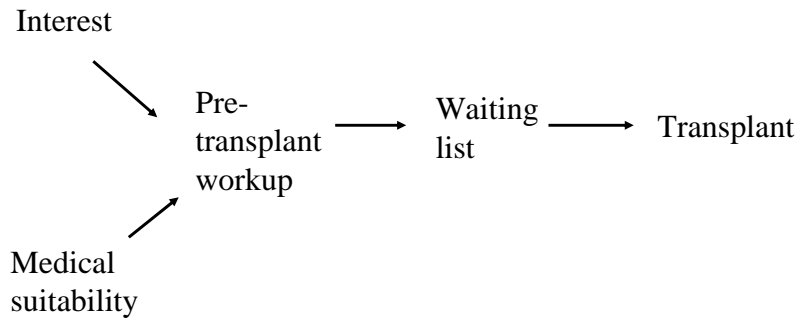
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Key Points

- *Large, growing gap: need vs. supply*

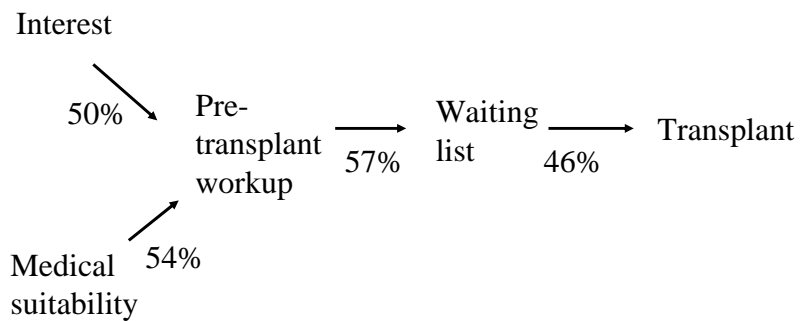
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Steps in Transplant Process Deceased donor transplant



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Steps in Transplant Process Movement of all patients



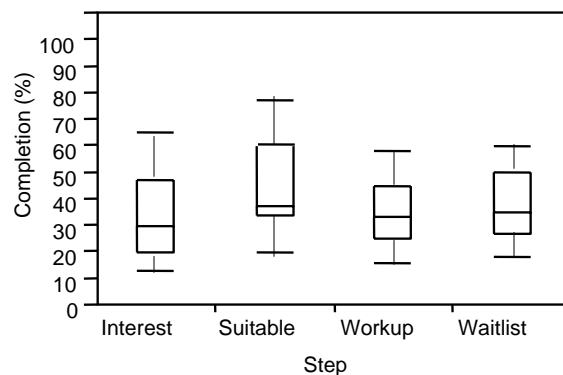
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Key Points

- Large, growing gap: need vs. supply
- *Several steps involved in access; more than just a waiting list problem*

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Barriers to Receiving Kidney Transplant Variation across dialysis facilities



**Variation persisted after adjustment for patient characteristics

Key Points

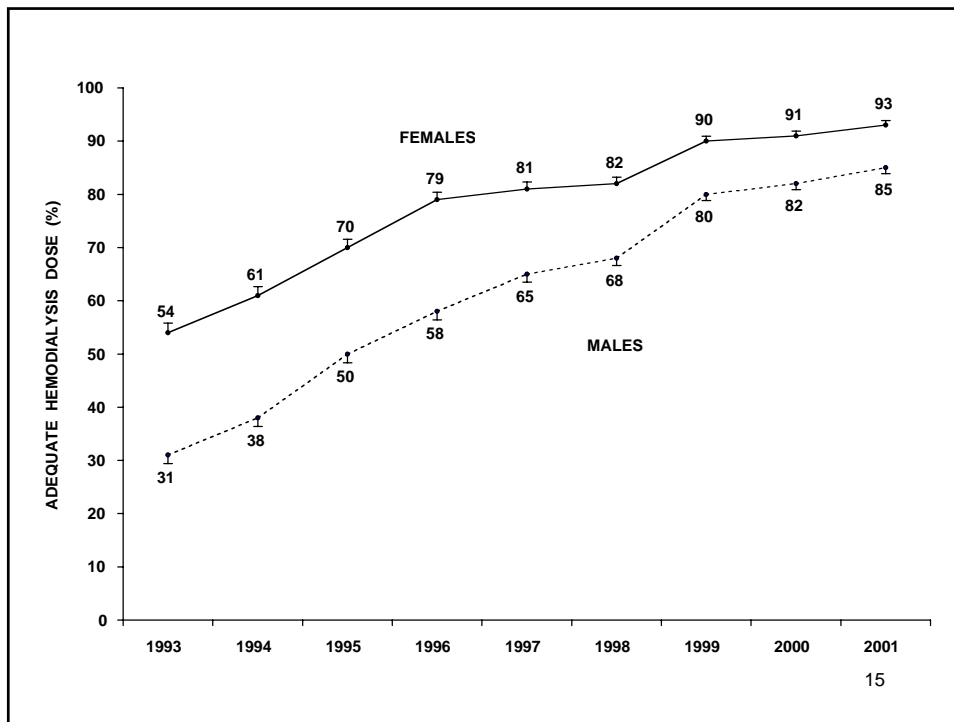
- Large, growing gap: need vs. supply
- Several steps involved in access; more than just a waiting list problem
- *Facility variation suggests process of care can be improved*

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Medicare quality improvement efforts

- Components
 - Workgroup identifies key indicators
 - Mandatory reporting by providers
 - Distribution of performance data
 - Education, supervision by Networks
- Initial focus on dialysis dose, anemia, albumin

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Key Points

- Large, growing gap: need vs. supply
- Several steps involved in access; more than just a waiting list problem
- Facility variation suggests process of care can be improved
- *Standardized reporting of indicators helpful in quality improvement*

OUTLINE

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Medicare Conditions for Coverage

- Interdisciplinary medical team evaluates treatment options at least annually
- Team includes transplant surgeon or designee
- Patient involved in care planning
- Results recorded on long-term program form

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Key Points

- Large, growing gap: need vs. supply
- Several steps involved in access
- Facility variation suggests process of care can be improved
- Standardized reporting of indicators part of successful quality improvement
- *Facilities already required to evaluate, record information on transplant access*

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OUTLINE

- Literature Search
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Clinical Performance Measures (CPM's)

- Indicators that assess processes and outcomes of health care for quality improvement activities
- Adequacy of dialysis
 - Prescribed treatment time, Kt/V
- Anemia management
 - Erythropoietin dose, Hemoglobin

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CPM's: Challenges

- Dialysis staff already overburdened
- Specific steps not under control of dialysis providers
- Reliability, validity of submitted information
- Adjust for patient characteristics

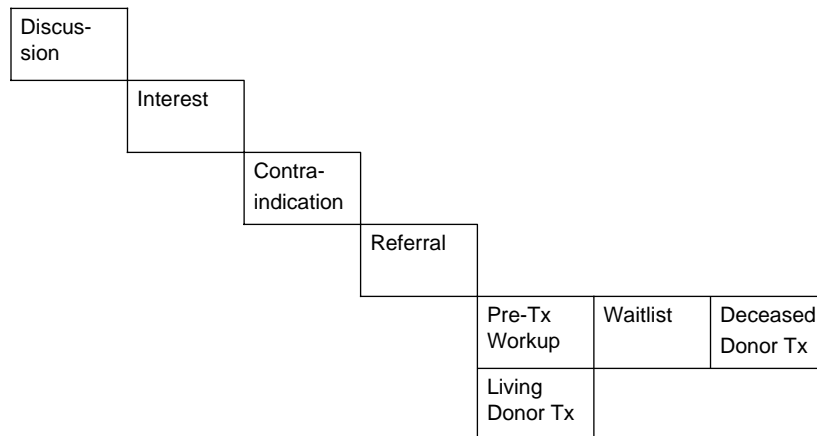
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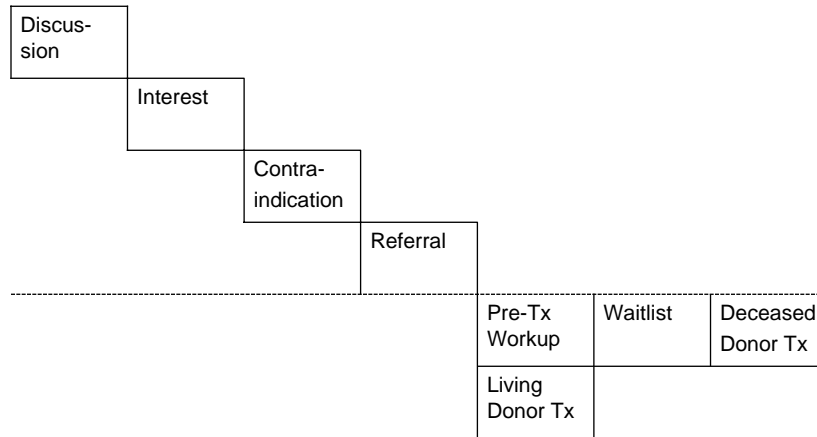
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Overview



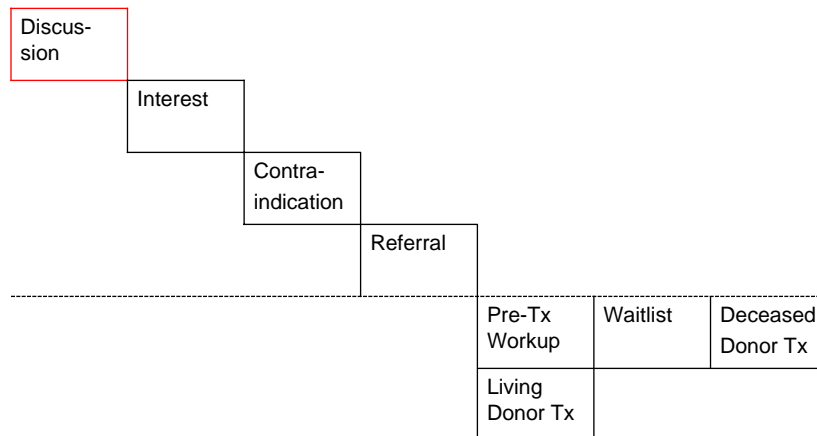
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Dialysis Provider vs. Tx Center



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CPM: Incident Pt Discussion



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CPM: Incident Pt Discussion Data Collection

Patient and/or representative acknowledge that nephrologist or dialysis team has discussed, within 90 days of initiation of dialysis at the current facility, the option of transplantation.

- a. Yes
- b. No

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CPM: Incident Pt Discussion Measure

Percent of patients and/or patient representatives who acknowledge that nephrologist or dialysis team has discussed, within 90 days of initiation of dialysis at the current facility, the option of transplantation.

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CPM: Incident Pt Discussion Details

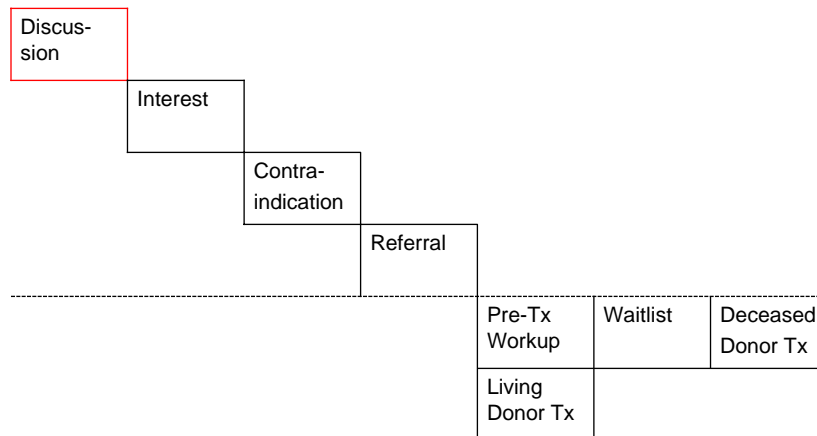
Numerator: Yes responses

Denominator: All incident patients of dialysis facility (< 90 days at current facility)

Data Sources: Long term care plan, other parts of dialysis facility medical record

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CPM: Prevalent Pt Discussion



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CPM: Prevalent Pt Discussion Data Collection

Patient and/or representative acknowledge that nephrologist or dialysis team has discussed, within the last 12 months, the option of transplantation.

- a. Yes
- b. No

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CPM: Prevalent Pt Discussion Measure

Percent of patient and/or patient representatives who acknowledge that nephrologist or dialysis team has discussed, within the last 12 months, the option of transplantation.

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CPM: Prevalent Pt Discussion Details

Numerator: Yes responses

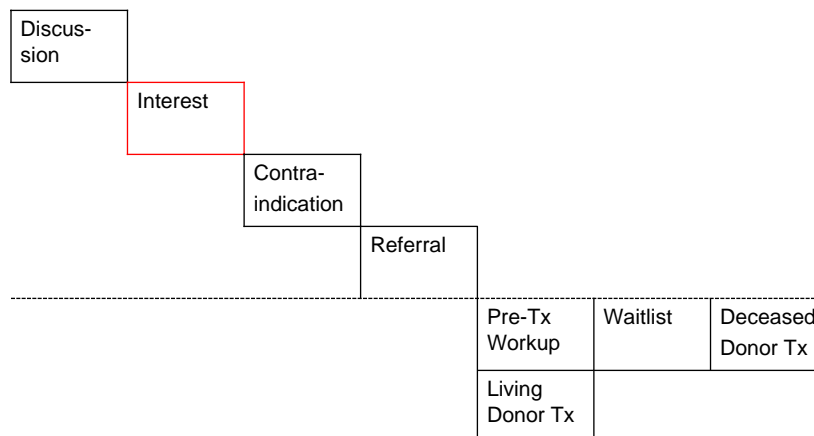
Denominator: All prevalent patients (≥ 90 days at current facility)

Exclusions: Patients with permanent exclusions to transplantation

Data Sources: Long term care plan, other parts of dialysis facility medical record

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Descriptor: Interest



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Descriptor: Interest

Data Collection

Does patient want to be evaluated for kidney transplantation?

- a. Yes
- b. Undecided (specify why)
- c. No (specify why)

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Descriptor: Interest

Details

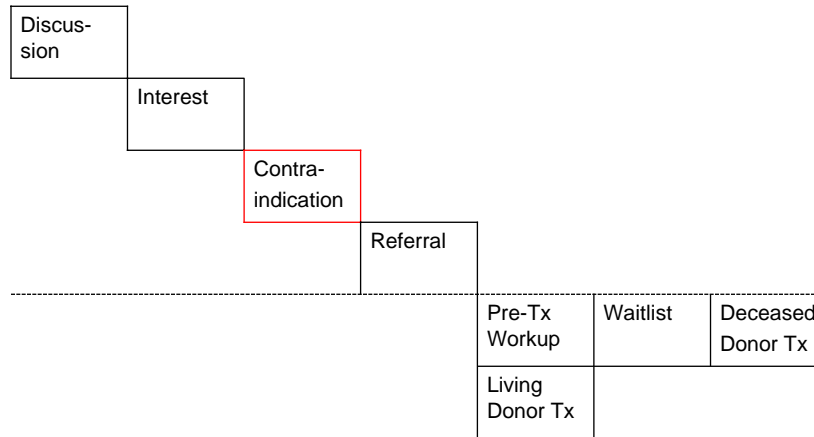
Exclusions: Patients with permanent exclusions to transplantation

Data Sources: Long term care plan, other parts of dialysis facility medical record

Use: To calculate denominator for subsequent CPM

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Descriptor: Contraindication



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Descriptor: Contraindication Data Collection

Are there any contraindications to referring patient for transplant evaluation?

- a. Yes (specify contraindication)
- b. No

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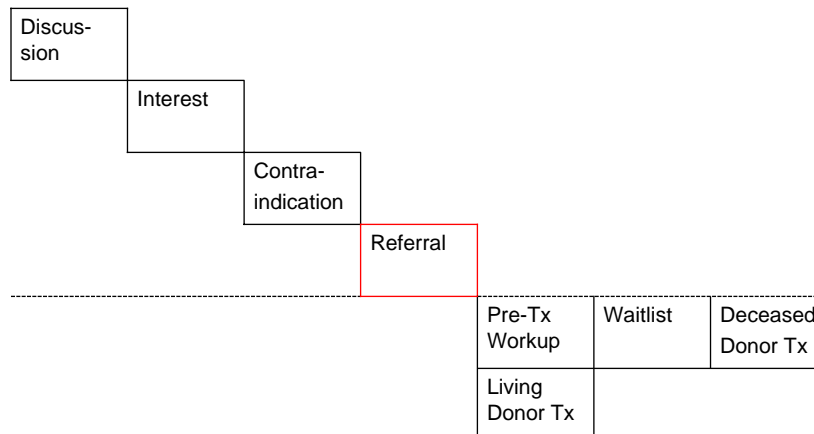
Descriptor: Contraindication Details

Data Sources: Long term care plan, other parts of dialysis facility medical record

Use: To calculate denominator for subsequent CPM

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CPM: Referral to Tx Center



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CPM: Referral to Tx Center

Data Collection

Has patient been referred to a transplant center for an evaluation?

- a. Yes (specify who referred, how referred and date)
- b. No (specify reasons for not referring)

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CPM: Referral to Tx Center

Measure

Percent of patients referred to a transplant center for evaluation.

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CPM: Referral to Tx Center Details

Numerator: Yes responses

Denominator 1: All patients

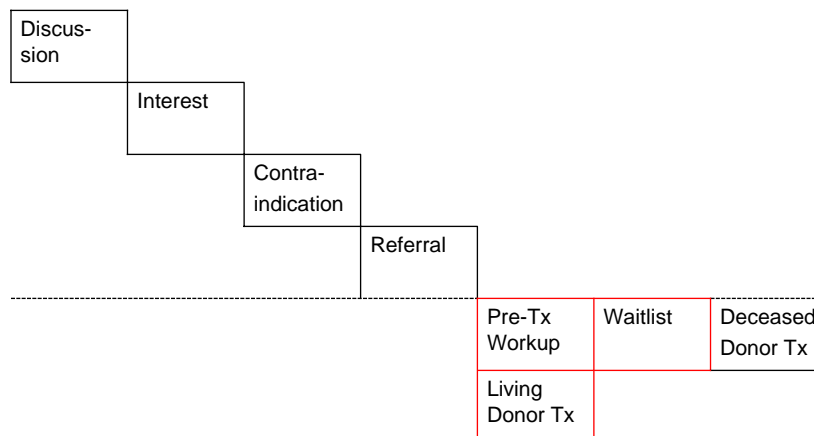
Denominator 2: Exclude patients with
contraindications

Denominator 3: Exclude uninterested
patients

Denominator 4: Exclude patients with
contraindications, uninterested patients

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CPM: Waitlist/Living Donor Tx



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CPM: Waitlist/Living Donor Tx Data Collection

Was patient placed on deceased donor waiting list or did patient receive living donor transplant within twelve months after referral to transplant center?

- a. Yes, placed on waiting list (specify date)
- b. Yes, received living donor transplant
- c. No (specify reason)

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CPM: Waitlist/Living Donor Tx Measure

Percent of referred patients who were placed on deceased donor transplant waiting list or received a living donor transplant within twelve months after referral to transplant center.

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CPM: Waitlist/Living Donor Tx Details

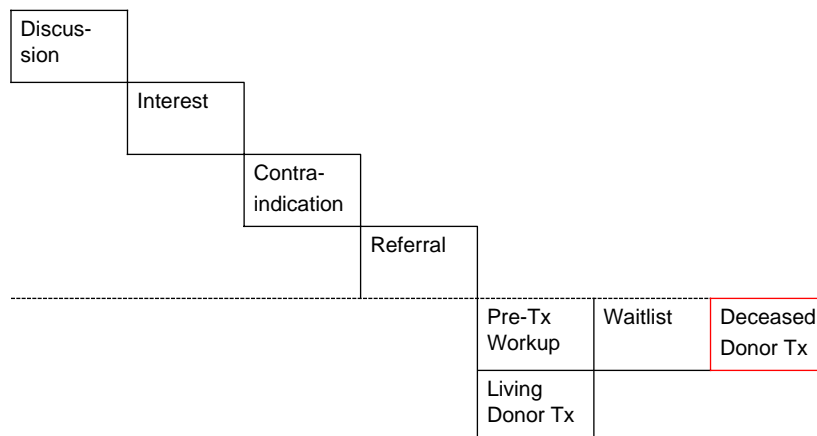
Numerator: Yes responses

Denominator 1: All patients referred to
transplant center

Denominator 2: Exclude patients who are
not transplant candidates after pre-
transplant workup

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Descriptor: Deceased Donor Tx



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Descriptor: Deceased Donor Tx Data Collection

Has patient received a deceased donor
kidney transplant?

- a. Yes (specify date)
- b. No

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Sources of information

Dialysis facility:

CPM's, descriptors above dotted line

Scientific Registry of Transplant
Recipients (SRTR) or United Network for
Organ Sharing (UNOS):

CPM, descriptor below dotted line

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