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*Making Sense of the
QIP Morass*


Fall Meeting 2015 ANNA



Objectives First Session:

- Describe the Quality Incentive Program (QIP)
- Identify the QIP measures established for performance periods 2015 and 2016
- Discuss the proposed QIP measures for performance period 2017


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Medicare Improvements for Patients and Providers Act (MIPPA) of 2008

- Became law on July 15, 2008
- CMS responsible for rules that implement the law
- Required the implementation of an ESRD bundled payment system and quality incentive program effective January 2011


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What Is The Bundled Payment System?

- One payment to cover all items and services to include:
 - ESAs and their oral or other forms of administration that are for "renal dialysis services"
 - Injectable drugs and biologicals and their oral or other forms of administration that are for "renal dialysis services"
 - Oral or other forms of non-injectable drugs and biologicals that are "renal dialysis services"


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PPS: The Bundle Also Includes

- Diagnostic laboratory tests that are "renal dialysis services"
- Home and self-dialysis training
- All supplies, equipment, and support services necessary for the effective performance of a patient's dialysis furnished in the ESRD facility or in a patient's home

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PPS

But it is not that simple.....

Impacting Factors

- Per treatment basis
- Annual market basket update
- ESRD case-mix adjustments
 - Patient level
 - Facility level
- Training add-on
- Outlier policy

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Quality Incentive Program (QIP)

- Intent: promote high-quality care by dialysis facilities treating patients with ESRD
- CMS selects measures, establishes performance standards, specifies a performance period for each payment year
- CMS assesses the total performance of each ESRD facility and can reduce payments by up to 2% if a facility does not meet or exceed a certain total performance score
- Requires public reporting of results

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Goal for QIP Measures

- Promote high-quality care
- Strengthen the goals of the National Quality Strategy

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National Quality Strategy


- Part of the Affordable Care Act (ACA)
- Led by Agency for Healthcare Research Quality (AHRQ)
- Three aims:

Healthier People	+	Better Care	\$	Smarter Spending
←—————→				

Goals
Safety
Patient and Family Engagement
Care Coordination
Treatment and Prevention of Chronic Disease
Population / Community Health
Affordability

Measures Requirements

- MIPPA requirement: Use National Quality Forum (NQF) endorsed measures *when available*

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National Quality Forum

- Lead national collaborations to improve health and healthcare through measurement
- NQF endorsement of standards = gold standard for health care quality

Role of NQF
Endorse consensus standards for performance measurement
Convene working groups to foster quality improvement
Ensure consistent, high quality performance information is publicly available
Seek real time feedback to ensure measures are meaningful and accurate

Measures Requirements

- CMS may add measures if NQF endorsed measures do not exist or are not sufficient for the topic area
- The law *requires* measures on anemia & adequacy
- Annual update required

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