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**Center for Clinical Standards and Quality**

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**Ref: QSO-22-24-ESRD**

**DATE:** September 23, 2022

**TO:** State Survey Agency Directors

**FROM:** Directors, Quality, Safety & Oversight Group (QSOG) and Survey & Operations Group (SOG)

**SUBJECT:** FY2023 Dialysis Facility Outcomes List

**Memorandum Summary**

- The Centers for Medicare & Medicaid Services generates a Dialysis Facility Outcomes List annually at the start of each Federal Fiscal Year. This list establishes the Tier 2 survey workload for state agencies.
- For FY2023, the Outcomes List will include, for the first time, the Percent of Prevalent Patients Waitlisted (PPPW) measure in its methodology. The inclusion of this measure aims to evaluate the dialysis facility's efforts toward the maintenance of each of its patient's active status on the organ transplant waiting list.
- State Agencies are expected to survey 100% of the facilities that are identified on the Outcomes List for their respective state.

**Background:**

CMS uses dialysis facility performance and outcomes data to make informed decisions for the oversight and monitoring of Medicare-certified dialysis facilities. One method for CMS oversight of dialysis facilities is to conduct onsite surveys of dialysis facilities that are identified on the Outcomes List. The Outcomes List is a confidential report, generated annually. The list ranks Medicare-certified dialysis facilities using clinical performance measures and is used to establish the Tier 2 survey workload for state agencies. This activity is in addition to the routine recertification survey work performed within intervals specified by CMS.

In FY2019, the [outcomes list methodology](#) was revised to add focus on dialysis facilities with poor clinical outcomes across four defined clinical measures: mortality, hospitalizations, septicemia, and long-term catheter use (i.e., catheter use greater than 90 days).

The Outcomes List historically has not included any transplant measures in its calculations, despite the clinical importance of such measures and their indications of dialysis facility performance. For the FY2023 Outcomes List, **the age-adjusted percent of prevalent patient-months waitlisted (PPPW) will be added as the 5<sup>th</sup> clinical measure used to generate the Outcomes List.** This measure tracks the percentage of patient-months at each dialysis facility for those patients who were on the kidney or kidney-pancreas transplant waitlist.

With the inclusion of a measure that evaluates the prevalence of the waitlisting status on a monthly basis for each facility patient to whom this would apply, CMS aims to assess the dialysis facility's ability to assist patients in becoming waitlisted for transplant and in staying on the organ transplant waiting list. A measure focusing on the waitlisting process is appropriate and consistent with cross-agency initiatives for improving access to kidney transplantation.

### **Discussion:**

Measures used in the Outcomes List are monitored, analyzed, and updated, if needed, based on impact on quality of care, relevance, and agency goals and initiatives. Existing [regulations](#) in the Conditions for Coverage for ESRD facilities require the interdisciplinary team to develop a plan for pursuing transplant for [each patient that is a referral candidate](#). The plan must be monitored and then adjusted when the expected outcome is not achieved and to address the issues that are identified. For dialysis patients, dialysis facilities play a critical role in working towards providing their patients with the highest quality of care, which for many patients is a kidney transplant. The journey toward a kidney transplant is a complex and often long process for dialysis patients, and dialysis facilities hold substantial control over one of the first and most important steps in this process—referring and maintaining their patients on the waiting lists. This process starts with educating their patients on the option of transplant, referring appropriate patients to a transplant program for evaluation, and optimizing their health and functional status in order to increase their chances of candidacy for the transplant waiting list. These actions are required as part of the ESRD Conditions for Coverage. Dialysis facilities and their care teams are key players who share the responsibility of ensuring patients are waitlisted while they also provide quality care for these patients so that each patient, in turn, can maintain their health in preparation for a transplant.

With the inclusion of this transplant measure, identification of certain dialysis facilities based on performance will be influenced by their actions towards improving patient access to transplants. Through CMS' survey and oversight authorities, the FY2023 Outcomes List survey activities will include procedures to effectively assess and identify non-compliance relating to the management of those patients who are transplant candidates, which can adversely impact their access to transplant, and to also require dialysis facilities to develop strategies that address any identified barriers to transplantation. The ESRD Network program has a goal to increase the number of patients on transplant waiting lists as well. Dialysis facilities are encouraged to contact the ESRD Network for assistance in developing strategies to resolve barriers, as well as to obtain educational tools for both patients and dialysis facility staff.

### **Survey Considerations:**

Every dialysis provider that is involved in caring for patients with End-Stage Renal Disease is obligated to promote activities that assist patients to achieve their individualized goals for managing kidney failure, which for many is a kidney transplant. The PPPW measure acknowledges the accountability and responsibility of the dialysis facility in providing patients with access to a transplant. This includes ensuring each patient maintains their health for transplantation as well as addressing any barriers that may prevent their patient's access to a transplant.

Since FY2023 will be the first year of implementation of the revised Outcomes List, State Survey Agencies are expected to conduct surveys using the Basic ESRD Survey Process. To effectively determine whether a dialysis facility is supporting its patient's active status on the

organ transplant waiting list, surveyors are reminded to use the procedures, tools, and resources in the Basic ESRD Survey Process, which include:

- **Patient Education:** conduct patient and staff interviews to verify that the patient received education about the option for a transplant. Dialysis facilities are expected to provide information on transplant waitlist criteria from the transplant program(s) that services the area, the transplant program(s) exclusion criteria, and procedures for the referral and evaluation of patients. Relevant CMS Tags: V451, V453, V458
- **Patient Assessment:** Conduct patient interviews and review medical records to determine whether assessments were performed to determine patient candidacy for a transplant referral. Each patient's medical record must contain information about the patient's suitability and whether the patient accepted or declined a referral for transplantation. If a referral did not occur, verify the reason why. Relevant CMS Tag: V513
- **Patient Plan of Care:** Conduct patient interviews and review medical records to verify that plans of care include active involvement of the patient and their goals for managing their kidney disease. If the patient is active on a transplant program's waiting list, expect to see a review and update of the patient's status, any pending activity such as lab tests and plans for achieving these items, and facility participation towards meeting the patient's transplant goals. Relevant CMS Tag: V554
- **Coordination with the Transplant Program(s):** Verify the facility's process for referring candidates to a transplant program. For patients that are on a kidney transplant waiting list, verify that the dialysis facility has maintained ongoing communication with the transplant program to monitor the patient's status and address any dialysis-related findings that are impacting the patient's ability to receive a transplant. This includes tracking the completion of the tests and evaluations required for a transplant workup and maintenance of their active status on the waiting list. Relevant CMS Tags: V561, V628, V636

### **Methodology and Measure Considerations:**

This measure is an adjusted percentage of waitlist events among dialysis patients. Results are averaged across patients who were assigned to the dialysis facility as of the last day of each month during the reporting year, adjusted for age. The measure excludes the following during the month: individuals over the age of 75, individuals residing in a skilled nursing facility or nursing facility, and individuals receiving hospice care.

**Numerator Definition:** The numerator for the PPPW is the number of patient-months in which the patient at the dialysis facility is on the kidney or kidney-pancreas transplant waitlist as of the last day of each month during the reporting year.

**Denominator Definition:** The denominator for the PPPW is the sum of all patient-months for patients who are under the age of 75 in the reporting month and who are assigned to the dialysis facility according to each patient's treatment history as of the last day of each month during the reporting year.

For detailed information regarding PPPW, please refer to Section IX "Waitlist Summary for All Dialysis Patients (2017-2020) and New Patients (2017-2019) under Age 75" of the Guide to the FY 2022 Dialysis Facility Reports:

[https://dialysisdata.org/sites/default/files/content/Methodology/FY2022\\_DFR\\_Guide.pdf](https://dialysisdata.org/sites/default/files/content/Methodology/FY2022_DFR_Guide.pdf)

**Contact:**

For questions or concerns relating to this memorandum, please contact [ESRDQuestions@cms.hhs.gov](mailto:ESRDQuestions@cms.hhs.gov).

**Effective Date:**

Immediately. Please communicate to all appropriate staff within 30 days.

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/s/

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