

End-Stage Renal Disease Network of the Ohio River Valley

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Provider Insider

AN ELECTRONIC NEWSLETTER FOR RENAL CARE PROFESSIONALS



NETWORK UPDATE!

2017 Quality Improvement Activities (QIA's)

We are excited to launch our 2017 Quality Improvement Activities (QIAs) throughout the region. We are in the process of contacting facilities who will be included in the 2017 projects now. If you would like to learn more about the focus of our quality improvement work please <u>click here</u> for an overview of each QIA.



On February 15th, we will host an educational program for every facility in Network 9. The program will review the 2017

initiatives that are outlined by The Centers for Medicare and Medicaid Services for our work in NW9. Watch your inbox an e-mail registration to this event this week.

The Network is Hiring

Patient Services Coordinator II - ESRD (#16286)

Under the supervision of the Director, the Patient Services Coordinator II is responsible for evaluating and resolving patient grievances, providing conflict management techniques to dialysis providers in order to avert involuntary discharges, and developing and implementing Quality Improvement Activities for the improvement of End Stage Renal Disease (ESRD) patient quality of care. At the direction of the Centers for Medicare and Medicaid Services (CMS), the Patient Services Coordinator serves as a patient advocate for all dialysis patients in Ohio, Indiana, and Kentucky. Additionally, the Patient Services Coordinator II is a resource for all outpatient dialysis providers on any ESRD patient questions or concerns.

QUALIFICATIONS:

- Strong communication skills (written and verbal) with the ability to effectively communicate with external and internal customers/staff.
- Computer proficiency with knowledge of various software programs preferred.
- Strong interpersonal and advocacy skills with the ability to work professionally and successfully with a diverse population.
- Strong problem solving, mediation, and organizational skills with the ability to prioritize assignments and meet deadlines.
- Strong attention to detail with the ability to maintain accurate records.

EDUCATION & EXPERIENCE:

- Bachelor's degree in Social Work, required. Master's degree, preferred.
- A minimum of three (3) years of related healthcare experience, required.
- Experience working in the dialysis setting, preferred.
- Knowledge of state/federal agencies, community resources and nephrology, preferred.

IPRO offers a comprehensive benefits package.

HOW TO APPLY:

Interested candidates must note the position # identified in the title line when applying for this position. Please submit a resume, along with a cover letter (which should include salary requirements or history) to:

IPRO

Attn: Human Resources 1979 Marcus Avenue Lake Success, NY 11042-1002 Careers1@ipro.org

While we are grateful for all interest expressed in employment with IPRO, only qualified candidates being considered will be contacted.

IPRO is an Equal Opportunity/Affirmative Action Employer; Minority/Female/Disabled/Veteran



Did You Know?

ESRD Facilities Receive Coverage and Payment For AKI

In accordance with sections 1861(s)(2)(F) and 1834(r) of the Act, as amended by sections 808(a) and 808(b), respectively, of the Trade Preferences Extension Act (TPEA), Centers for Medicare & Medicaid Services (CMS) will provide coverage and payment for renal dialysis services furnished on or after January 1, 2017 by an End Stage Renal Disease (ESRD) facility to an individual with Acute Kidney Injury (AKI). Under the law, the payment will be the amount of the ESRD PPS base rate, as adjusted by the wage index. CMS is finalizing that drugs, biologicals, laboratory services, and supplies that ESRD facilities are certified to furnish, but that are not renal dialysis services, may be paid for separately when furnished to individuals with AKI.

This regulation pertains to coverage and payment only. AKI patients **should not be entered in the CROWNWeb system** which is currently the National **ESRD** Patient Registry. CMS decisions have not been made if and/or how AKI patient data will be captured from the ESRD dialysis facility.



Patient Services

Patient Ambassador

This year, the Network is requesting that facilities selected to participate in a Quality Improvement Activity (QIA) designate at least one patient to perform the role of a Patient Ambassador. The facility's Patient Ambassador will assist with the roll out of the activity and provide valuable feedback on the patients' perspective of the QIA work.

Roles and Responsibilities include:

- Participate in educational and informational web conference presentations with the Network
- Review and provide feedback on educational materials designed for patients in the target facilities and throughout the Network community
- Acts as part of the project support team with the facility staff to assist with implementation of the project.



Interested in Joining A Technical Expert Panel?

End Stage Renal Disease (ESRD) Patient-Reported Outcomes (PRO) Technical Expert Panel

The University of Michigan Kidney Epidemiology and Cost Center (UM-KECC), through its contract with the Centers for Medicare and Medicaid Services (CMS), will convene a technical expert panel (TEP) to evaluate and make recommendations regarding the development of patient-reported outcome (PRO) measures.

For this project, TEP members will (1) review the current quality of life and recovery time measure concepts; (2) provide recommendations on their potential development; and (3) review and provide recommendations on the Patient-Reported Outcome Measurement Information System (PROMIS) and potentially other PRO measures or measure concepts identified by the TEP. For more information, please visit_cms.gov

The TEP nomination period closes on February 10, 2017. Please submit all nomination materials by the closing date.

Click <u>here</u> for The TEP Charter and Nomination form



Patient Experience

Patient & Provider Engagement: Continuing the Discussion, Answering Your Questions

January 25, 2017, 2:00 PM ET Click <u>here</u> to register.

The National Forum of ESRD Networks is continuing its Patient Experience Webinar series with Webinar #4. This webinar will focus on two topics that received the most comments and questions:



- Breaking down barriers to engaging professionals, administration and patients
- How to get started: Peer Mentoring & Patient Advocacy

Managing Diabetes in the Workplace

The Diabetes at Work website is a resource of the National Diabetes Education Program (NDEP), a program of the National Institutes of Health and the Centers for Disease Control and Prevention (CDC). Launched in April 2002, Diabetes at Work is the first online resource specifically designed to address the management of diabetes in the workplace.

Visit the CDC Diabetes at Work website, for more information and helpful resources including:

- Worksite Wellness Resources
- Success Stories
- Diabetes at Work E-News
- Fact Sheets

CDC Safe Healthcare Practices

Tune in to Safe Healthcare: Reducing Infection in the Outpatient Dialysis Facility - Results of the Standardizing Care to Improve Outcomes in Pediatric End Stage Renal Disease (SCOPE) Collaborative

January 31, 2017, 3:00 PM ET Click here to register

CDC, in collaboration with various clinical partners, presents the webinar series, *Tune in to Safe Healthcare*, which focuses on a variety of infection control and prevention topics. These webinars feature CDC and external experts and serve as a tool to educate healthcare providers on best practices to improve patient safety.

Webinars are offered free of cost with an opportunity to earn continuing education.









Emergency Preparedness & Alerts

Is Your Facility Ready? Don't Let a Natural Disaster Keep Patients from Treatment

Many dialysis patients depend on public transportation to get to and from dialysis treatment. However, public transportation may be limited during a disaster situation; patients may be forced to either delay dialysis or skip treatment, putting their health at risk, or they may have to go to a hospital for treatment. This Kidney Community Emergency Response (KCER) Coalition study takes a look at the barriers and possible solutions to the transportation needs of dialysis patients during a natural disaster or major community emergency.

<u>Click here</u> to continue reading the full article in KCER Watch.

Alerts and Recalls

January 20, 2017: FDA Class 2 Recall: Fresenius 2008 Dialysis Machines due to UF Rate Errors

January 18, 2017: Recall: Tego Connector No. D1000, NM1000

January 16, 2017: Lifepak 1000 Defibrillators by Physio-Control: Remove and Reinstall Battery

Please visit http://kcercoalition.com/en/alerts-recalls/ for up-to-date alerts and recalls.





Data Management

CROWNWeb

If you are a clinic and have a data or CROWNWEB related issue please contact our Information Systems Department by creating a help ticket in our Knowledge Bases and Customer Portal. Click here to access the portal and create a help desk ticket!

Pain Assessment Reporting Due in CROWNWeb by February 1, 2017

Conditions covering the second six months of the performance period (July 1, 2016-December 31, 2016) must be reported in CROWNWeb before February 1, 2017. Conditions include:

- 1. Pain assessment using a standardized tool is documented as positive and a follow-up plan is documented
- 2. Pain assessment documented as positive, a follow-up plan is not documented, and the facility possesses documentation that the patient is not eligible
- 3. Pain assessment documented as positive using a standardized tool, a follow-up plan is not documented, and no reason is given
- 4. Pain assessment using a standardized tool is documented as negative, and no follow-up plan required
- 5. No documentation of pain assessment, and the facility possesses documentation the patient is not eligible for a pain assessment using a standardized tool
- 6. No documentation of pain assessment, and no reason is given

Reporting Exclusions Criteria:

- Patients who are younger than 18 years
- Patients treated at the facility for fewer than 90 days
- Facilities with a CCN open date after July 1, 2016
- Facilities treating fewer than 11 qualifying patients during the performance period

If you have any questions about the reporting requirement, please contact <u>James Hrubrik</u>, Operations Manager at the Network.

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 be tracking the completion of this task by dialysis facilities and will communicate to those that did not complete this CDC requirement.



Start training now!

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

When submitting a help desk ticket please include the clinic CCN#. ease remember that you should <u>NEVER</u> 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.

Upcoming Meeting & Events

Wednesday, January 25, 2017 - The Experience of Care: Patients and Providers and Partners Webinar #4 - Continuing the Discussions, Answering Your Questions

Friday, February 10, 2017 - Sunday, February 12, 2017 - ASDIN 13th Annual Scientific Meeting - Optimizing Outcomes in Dialysis Access Care

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.

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