

Quality ID #329: Adult Kidney Disease: Catheter Use at Initiation of Hemodialysis

– National Quality Strategy Domain: Effective Clinical Care

– Meaningful Measure Area: Appropriate Use of Healthcare

2019 COLLECTION TYPE:

MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:

Outcome – High Priority

This is a two-part measure which is paired with Measure #330: Adult Kidney Disease: Catheter Use for Greater Than or Equal to 90 Days. If there is documentation that the patient initiated hemodialysis with a catheter, then Measure #330 *should* also be submitted.

DESCRIPTION:

Percentage of patients aged 18 years and older with a diagnosis of End Stage Renal Disease (ESRD) who initiate maintenance hemodialysis during the measurement period, whose mode of vascular access is a catheter at the time maintenance hemodialysis is initiated

INSTRUCTIONS:

This measure is to be submitted a minimum of **once per performance period** for patients with ESRD who initiated maintenance hemodialysis during the performance period. This measure may be submitted by Merit-based Incentive Payment System (MIPS) eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

Measure Submission Type:

Measure data may be submitted by individual MIPS eligible clinicians, groups, or third party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality-data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

DENOMINATOR:

All patients aged 18 years and older with a diagnosis of ESRD who initiate maintenance hemodialysis during the measurement period

Denominator Criteria (Eligible Cases):

Patients aged ≥ 18 years on date of encounter

AND

Diagnosis for ESRD (ICD-10-CM): N18.6, Z49.31

AND

Patient encounter during performance period (CPT): 90957, 90958, 90959, 90960, 90961, 90962, 90966, 90970

AND

Initiation of maintenance hemodialysis during the submission/maintenance period

AND NOT

DENOMINATOR EXCLUSIONS:

Patient is undergoing palliative dialysis with a catheter: G9747

OR

Patient approved by a qualified transplant program and scheduled to receive a living donor kidney transplant: G9748

NUMERATOR:

Patients whose mode of vascular access is a catheter at the time maintenance hemodialysis is initiated

Numerator Instructions:

Of note, the performance tags indicating 'Performance Met' and 'Performance Not Met' are included to highlight what is being measured and submitted and not to encourage catheter use.

INVERSE MEASURE - A lower calculated performance rate for this measure indicates better clinical care or control. The "Performance Not Met" numerator option for this measure is the representation of the better clinical quality or control. Submitting that numerator option will produce a performance rate that trends closer to 0%, as quality increases. For inverse measures, a rate of 100% means all of the denominator eligible patients did not receive the appropriate care or were not in proper control.

Numerator Options:

Performance Met:

Patient whose mode of vascular access is a catheter at the time maintenance hemodialysis is initiated (**G9240**)

OR

Denominator Exception:

Documentation of reasons for patient initiating maintenance hemodialysis with a catheter as the mode of vascular access (e.g., patient has a maturing AVF/AVG, time-limited trial of hemodialysis, other medical reasons, patient declined AVF/AVG, other patient reasons, patient followed by reporting nephrologist for fewer than 90 days, other system reasons) (**G9239**)

OR

Performance Not Met:

Patient whose mode of vascular access is not a catheter at the time maintenance hemodialysis is initiated (**G9241**)

RATIONALE:

Cuffed tunneled central venous catheters should be discouraged as permanent vascular access.

Among vascular access modalities, catheters have the highest rates of infectious complications, thrombosis, risk of permanent central venous stenosis or occlusion.

Patients receiving catheters and grafts have greater mortality risk than patients dialyzed with fistulae.

CLINICAL RECOMMENDATION STATEMENTS:

The following evidence statements are quoted verbatim from the referenced clinical guidelines. Only selected portions of the clinical guidelines are quoted here; for more details, please refer to the full guideline.

A structured approach to the type and location of long-term HD accesses should help optimize access survival and minimize complications. The access should be placed distally and in the upper extremities whenever possible.

Options for fistula placement should be considered first, followed by prosthetic grafts if fistula placement is not possible. Catheters should be avoided for HD and used only when other options listed are not available. (KDOQI, 2006)

- 2.1. The order of preference for placement of fistulae in patients with kidney failure who choose HD as their initial mode of KRT should be (in descending order of preference):
 - 2.1.1. Preferred: Fistulae (B)
 - 2.1.1.1. A wrist (radiocephalic) primary fistula (A)
 - 2.1.1.2. An elbow (brachiocephalic) primary fistula (a)
 - 2.1.1.3. A transposed brachial basilic vein fistula (B)

- 2.1.2. Acceptable: AVG of synthetic or biological material, such as: (B)
- 2.1.2.1. A forearm loop graft, preferable to a straight configuration
- 2.1.2.2. Upper-arm graft
- 2.1.2.3. Chest wall or “necklace” prosthetic graft or lower-extremity fistula or graft; all upper-arm sites should be exhausted. (KDOQI, 2006)

COPYRIGHT:

The Measures are not clinical guidelines, do not establish a standard of medical care, and have not been tested for all potential applications.

The Measures, while copyrighted, can be reproduced and distributed, without modification, for noncommercial purposes, eg, use by health care providers in connection with their practices. Commercial use is defined as the sale, license, or distribution of the Measures for commercial gain, or incorporation of the Measures into a product or service that is sold, licensed or distributed for commercial gain.

Commercial uses of the Measures require a license agreement between the user and the American Medical Association (AMA), [on behalf of the Physician Consortium for Performance Improvement® (PCPI®)] or Renal Physicians Association (RPA). Neither the AMA, RPA, PCPI, nor its members shall be responsible for any use of the Measures.

The AMA’s and PCPI’s significant past efforts and contributions to the development and updating of the Measures is acknowledged. RPA is solely responsible for the review and enhancement (“Maintenance”) of the Measures as of July 11, 2014.

RPA encourages use of the Measures by other health care professionals, where appropriate.

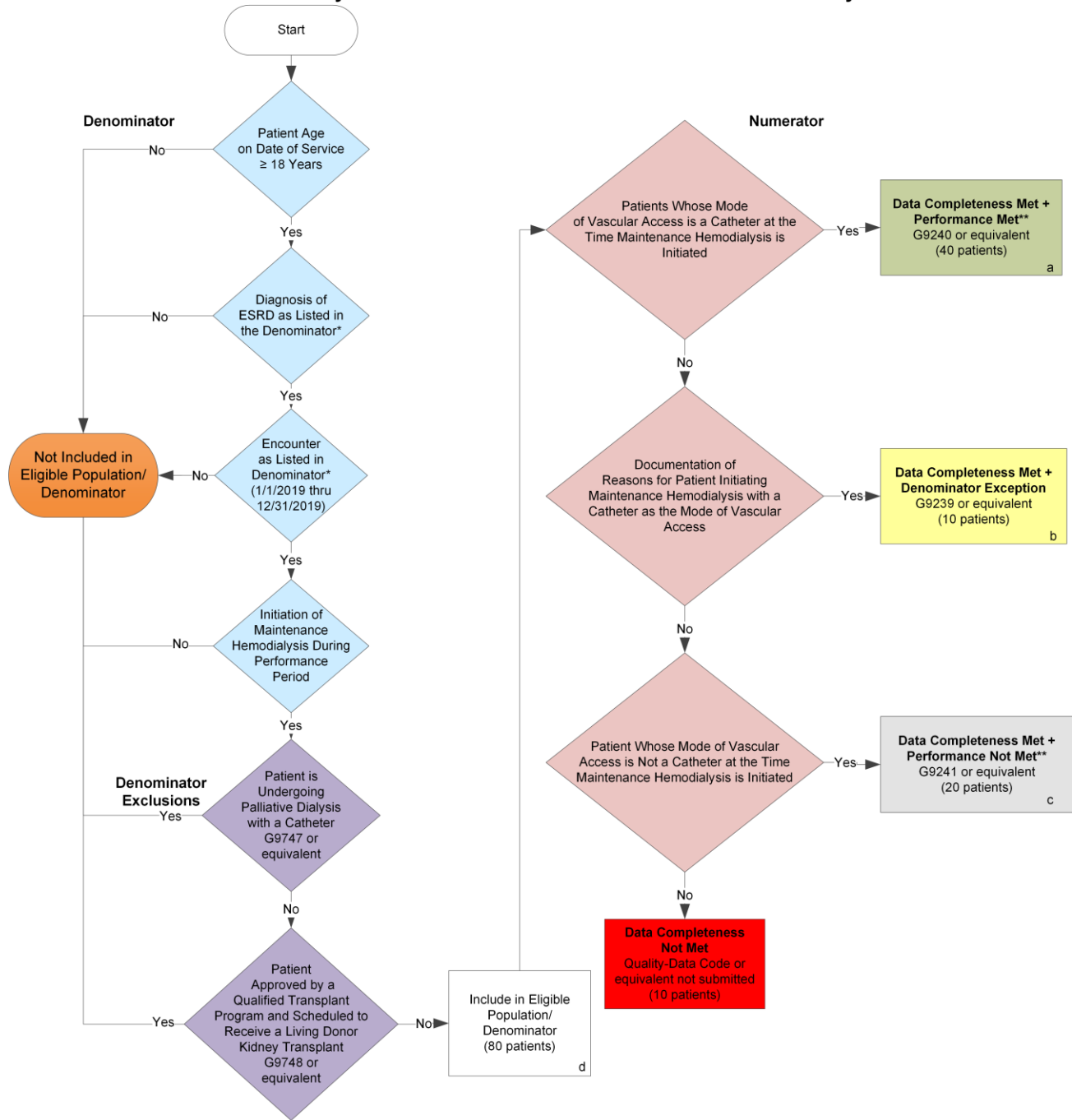
THE MEASURES AND SPECIFICATIONS ARE PROVIDED “AS IS” WITHOUT WARRANTY OF ANY KIND.

© 2015 American Medical Association and Renal Physicians Association. All Rights Reserved. Applicable FARS/DFARS Restrictions Apply to Government Use.

Limited proprietary coding is contained in the Measure specifications for convenience. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. The AMA, RPA, the PCPI and its members disclaim all liability for use or accuracy of any Current Procedural Terminology (CPT®) or other coding contained in the specifications.

CPT® contained in the Measures specifications is copyright 2004-2018 American Medical Association.

2019 Clinical Quality Measure Flow for Quality ID #329: Adult Kidney Disease: Catheter Use at Initiation of Hemodialysis



*See the posted Measure Specification for specific coding and instructions to submit this measure.
 **A lower calculated performance rate for this measure indicates better clinical care or control.
 NOTE: Submission Frequency: Patient-process

CPT only copyright 2018 American Medical Association. All rights reserved.
 The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.
 v3

**2019 Registry Flow for Quality ID #329:
Adult Kidney Disease: Catheter Use at Initiation of Hemodialysis**

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a=40 patients)} + \text{Denominator Exception (b=10 patients)} + \text{Performance Not Met (c=20 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=40 patients)}}{\text{Data Completeness Numerator (70 patients) - Denominator Exception (b=10 patients)}} = \frac{40 \text{ patients}}{60 \text{ patients}} = 66.67\%$$

*See the posted Measure Specification for specific coding and instructions to submit this measure.

**A lower calculated performance rate for this measure indicates better clinical care or control.

NOTE: Submission Frequency: Patient-process

CPT only copyright 2016 American Medical Association. All rights reserved.

**2019 Clinical Quality Measure Flow Narrative For Quality ID #329:
Adult Kidney Disease: Catheter Use at Initiation of Hemodialysis**

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification. This is a two-part measure which is paired with Measure #330: Adult Kidney Disease: Catheter Use for Greater Than or Equal to 90 Days. If there is documentation that the patient initiated hemodialysis with a catheter, then Measure #330 *should* also be submitted.

1. Start with Denominator
2. Check Patient Age:
 - a. If Patient Age is greater than or equal to 18 years on Date of Service equals No during the measurement period, do not include in Eligible Population. Stop Processing.
 - b. If Patient Age is greater than or equal to 18 years on Date of Service equals Yes during the measurement period, proceed to check Patient Diagnosis.
3. Check Patient Diagnosis:
 - a. If Diagnosis of ESRD as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
 - b. If Diagnosis of ESRD as Listed in the Denominator equals Yes, proceed to check Encounter Performed.
4. Check Encounter Performed:
 - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
 - b. If Encounter as Listed in the Denominator equals Yes, proceed to check Initiation of Maintenance Hemodialysis During Performance Period.
5. Check Initiation of Maintenance Hemodialysis During Performance Period:
 - a. If Initiation of Maintenance Hemodialysis During Performance period equals No, do not include in Eligible Population. Stop Processing.
 - b. If Initiation of Maintenance Hemodialysis During Performance period equals Yes, proceed to check Palliative Dialysis.
6. Check Palliative Dialysis:
 - a. If Patient is Undergoing Palliative Dialysis with a Catheter equals Yes, do not include in Eligible Population. Stop Processing.
 - b. If Patient is Undergoing Palliative Dialysis with a Catheter equals No, proceed to check Kidney Transplant.
7. Check Kidney Transplant:
 - a. If Patient Approved by a Qualified Transplant Program and Scheduled to Receive a Living Donor Kidney Transplant equals Yes, do not include in Eligible Population. Stop Processing.
 - b. If Patient Approved by a Qualified Transplant Program and Scheduled to Receive a Living Donor Kidney Transplant equals No, include in Eligible Population.
8. Denominator Population:

- a. Denominator Population is all Eligible Patients in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 patients in the Sample Calculation.
9. Start Numerator
 10. Check Patients Whose Mode of Vascular Access is a Catheter at the Time Maintenance Hemodialysis is Initiated:
 - a. If Patients Whose Mode of Vascular Access is a Catheter at the Time Maintenance Hemodialysis is Initiated equals Yes, include in Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 40 patients in the Sample Calculation.
 - c. If Patients Whose Mode of Vascular Access is a Catheter at the Time Maintenance Hemodialysis is Initiated equals No, proceed to check Documentation of Reasons for Patient Initiating Maintenance Hemodialysis with a Catheter as the Mode of Vascular Access.
 11. Check Documentation of Reasons for Patient Initiating Maintenance Hemodialysis with a Catheter as the Mode of Vascular Access:
 - a. If Documentation of Reasons for Patient Initiating Maintenance Hemodialysis with a Catheter as the Mode of Vascular Access equals Yes, include in Data Completeness Met and Denominator Exception.
 - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 10 patients in the Sample Calculation.
 - c. If Documentation of Reasons for Patient Initiating Maintenance Hemodialysis without a Catheter as the Mode of Vascular Access equals No, proceed to check Patients Whose Mode of Vascular Access is Not a Catheter at the Time Maintenance Hemodialysis is Initiated.
 12. Check Patients Whose Mode of Vascular Access is Not a Catheter at the Time Maintenance Hemodialysis is Initiated:
 - a. If Patients Whose Mode of Vascular Access is Not a Catheter at the Time Maintenance Hemodialysis is Initiated equals Yes, include in the Data Completeness Met and Performance Not Met.
 - b. Data Completeness Met and Performance Not Met letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 20 patients in the Sample Calculation.
 - c. If Patients Whose Mode of Vascular Access is Not a Catheter at the Time Maintenance Hemodialysis is Initiated equals No, proceed to check Data Completeness Not Met.
 13. Check Data Completeness Not Met:
 - a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 patients have been subtracted from Data Completeness Numerator in the Sample Calculation.

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a=40 patients) + Denominator Exception (b=10 patients) + Performance Not Met (c=20 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=40 patients)}}{\text{Data Completeness Numerator (70 patients) - Denominator Exception (b=10 patients)}} = \frac{40 \text{ patients}}{60 \text{ patients}} = 66.67\%$$