

**Southern California Renal Disease Council, Inc. ESRD Network 18**  
**Detail Plan for Clinical Indicators for 2007-2008 Contract Year**  
(Contract Number: HHSM-500-2006-NW018C)

<i>Clinical Indicator</i>	<i>CMS Goal</i>	<i>NW 18 CPM 2005</i> <i>(2004 data)</i>	<i>NW 18 CPM 2006</i> <i>(2005 data)</i>	<i>US CPM 2006</i> <i>(2005 data)</i>	<i>NW 18 Goal for 2008</i>	<i>Follow-up Activities</i>
<b><i>Adequacy of Dialysis</i></b>						
% of patients with URR $\geq$ 65%	80%	86%	86%	88%	88%	<ul style="list-style-type: none"> <li>• CPM results show that the NW meets current CMS goal, although it is 2 percentage points below the national average.</li> <li>• Per MRB decision, the goal is set at the national average of 88% (URR) and 91% (Kt/V)</li> <li>• Review and analyze 100% of facility-specific data when available</li> <li>• Update facility clinical profiles</li> <li>• Monitoring/follow-up to be done per protocol</li> <li>• Together with the MRB develop targeted interventions for an identified group of facilities</li> </ul>
% of patients with Kt/V $\geq$ 1.2 (HD) Kt/V $\geq$ 1.7 (PD)	80%	88%	89%	91%	91%	
<b><i>Anemia Management</i></b>						
% of patients with mean Hemoglobin $\geq$ 11.0gm/dl	70%	87%	88%	84%	88%	<ul style="list-style-type: none"> <li>• CPM results show that the NW meets current CMS goal and exceeds the national average</li> <li>• Per MRB decision, the goal is set at 88% for the next year because of patient safety issues associated with high Hemoglobin level</li> <li>• Review and analyze 100% of facility-specific data</li> <li>• Update facility clinical profiles</li> <li>• Monitoring/follow-up to be done as per protocol.</li> <li>• Together with the MRB develop targeted interventions for an identified group of facilities.</li> </ul>
<b><i>Nutrition Albumin</i></b>						
% of patients with mean serum albumin $\geq$ 3.5/3.2 g/dl (BCG/BCP)	80%	85%	84%	80%	To sustain current goal of 84%	<ul style="list-style-type: none"> <li>• CPM results show that the NW meets CMS and NW goals and exceeds the national average</li> <li>• Per MRB decision, the goal is to meet or exceed current level of performance</li> <li>• Review and analyze 100% of facility-specific data</li> <li>• Update facility clinical profiles</li> <li>• Monitoring/follow-up to be done as per protocol</li> <li>• Together with the MRB develop targeted interventions for an identified group of facilities</li> </ul>

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<p><b><i>Vascular Access: AV Fistulas</i></b></p> <p>% of prevalent hemodialysis patients over 18 years of age with AVFs</p> <p>2007-2008 NW Goal</p> <p>2007-2008 NW Stretch Goal</p>	<p><b>66% by June 30, 2009</b></p> <p>48.3%</p> <p>51.0%</p>	38%	49%	44%	<p><b>66% by June 30, 2009</b></p> <p>53.4%</p> <p>55.0%</p>	<ul style="list-style-type: none"> <li>• CPM results show that the percentage of patients in the NW with prevalent AVFs increased by 11% since last year</li> <li>• Monthly data collection via FFBI project – the Network AVF rate is 50.1 (April 2007 data).</li> <li>• CMS will establish a yearly goal for the Network in July 2007*</li> <li>• Per MRB decision, the Network stretch goal is set at 54%</li> <li>• Quarterly feedback to all facilities to be provided as a part of FFBI</li> <li>• Sharing best practices via Fistula First Newsletter</li> <li>• Application of statistical analysis to determine the significance of facility and Network improvement</li> <li>• Quarterly update of facility clinical profiles</li> <li>• Together with the MRB develop targeted interventions for an identified group of facilities.</li> </ul>
<p><b><i>Vascular Access: Stenosis monitoring of AV Grafts</i></b></p> <p>% of hemodialysis patients with AVG are monitored for stenosis</p>	<p><b>100%</b></p>	69%	72%	69%	<p><b>100%</b></p>	<ul style="list-style-type: none"> <li>• No current available facility-specific data (CPM only).</li> <li>• CPM results show a 2% increase since last year and is above the national average</li> <li>• Environmental scan to identify specific opportunities for improvement</li> <li>• Provider education on stenosis monitoring techniques</li> <li>• Together with the MRB develop targeted interventions for an identified group of facilities</li> </ul>
<p><b><i>Vascular Access: Decreasing Catheter Use</i></b></p> <p>% of hemodialysis patients with catheter &gt; 90 days</p>	<p><b>&lt;10%</b></p>	23%	18%	21%	<p><b>To meet or exceed CMS Goal of &lt; 10%</b></p>	<ul style="list-style-type: none"> <li>• CPM results show a 5 percentage points decrease from the prior year and is below the national average</li> <li>• Monthly data collection via FFBI project – the Network long-term catheter rate is 8.2% (April 2007 data)</li> <li>• Quarterly update of facility clinical profiles</li> <li>• Together with the MRB develop targeted interventions for an identified group of facilities</li> </ul>