



2022 CMS QUALITY CONFERENCE

New Hope, New Health: Charting a Path Forward

Moving Home Dialysis Forward

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High Desert Nephrology, Desert Cities Dialysis

#CMSQualCon22

Session Agenda



- 1 Current Status of Home Dialysis
- 3 Health Services Advisory Group ESRD Network Strategies

- 2 Mindset Movements
- 4 How One Provider is Moving Home Dialysis Forward

Mrs. Odum

HTN, OA, Dyslipidemia

CKD IIIb → IV

CKD V

 PD

2015 – 2018

2018 – 2019

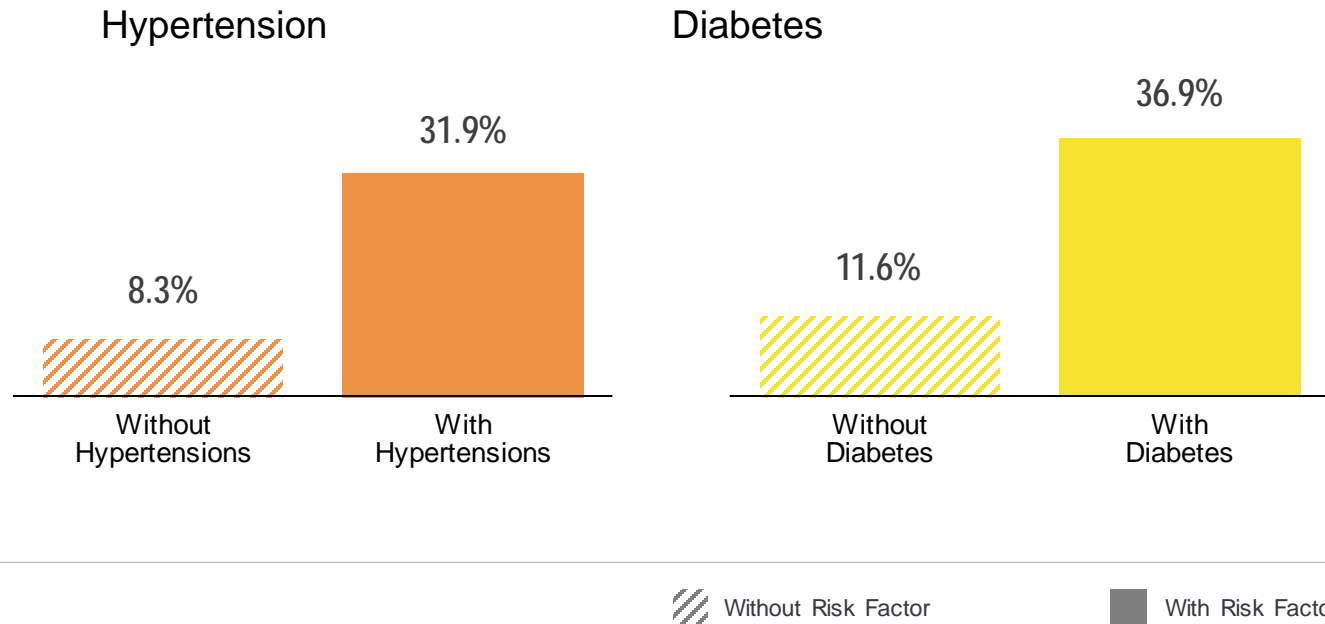
2019 – Present



Prevalence of CKD in U.S.

Prevalence of CKD in U.S.

Adults within age, sex, race/ethnicity, & risk factor categories, 2003-2018



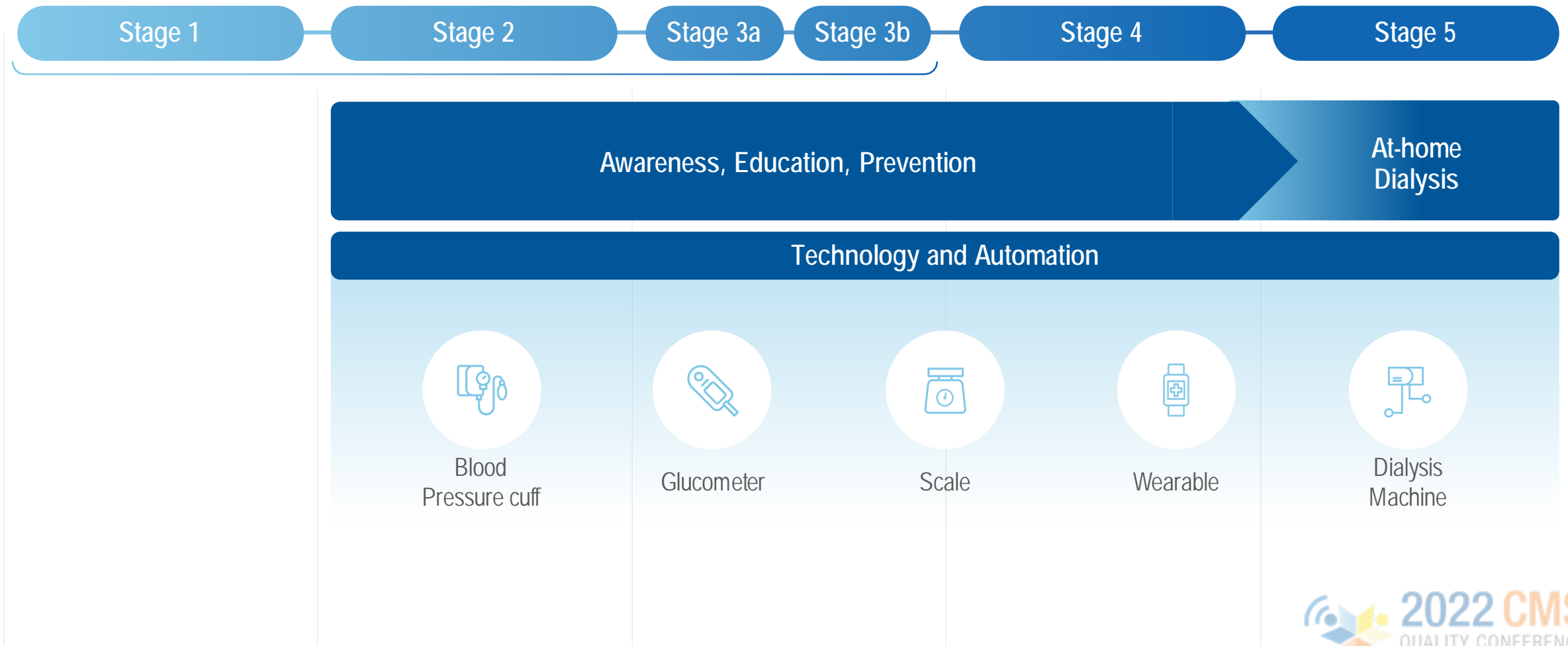
Awareness

Education

Prevention

Source: USRDS 2020 Annual Report

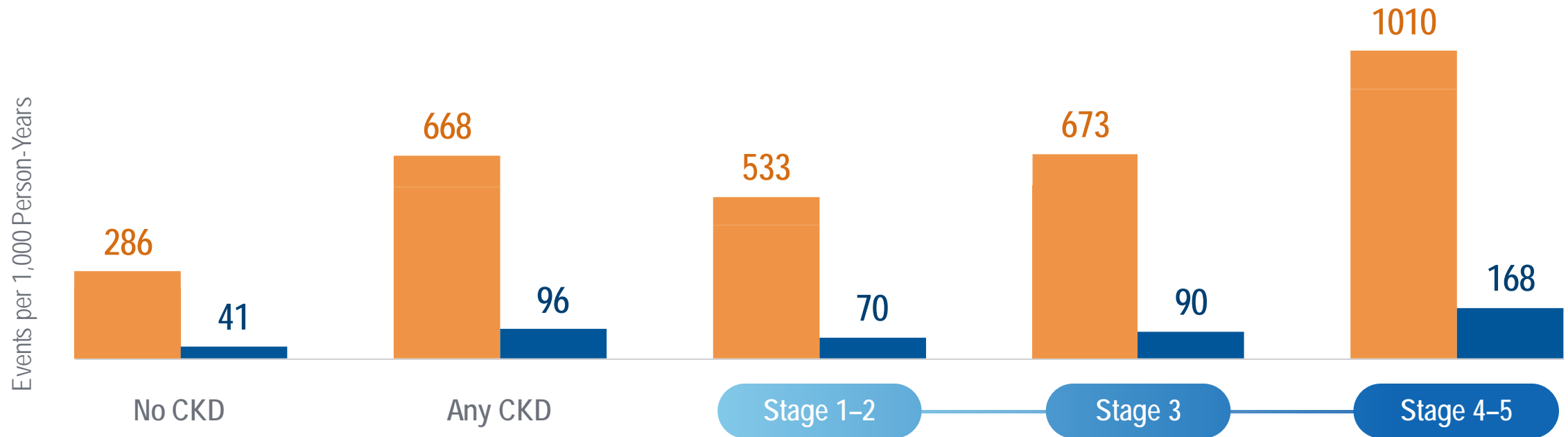
Kidney Care Continuum



Progressive CKD and Utilization

Hospitalization and mortality in Medicare beneficiaries

Aged ≥66, by kidney disease status, 2018



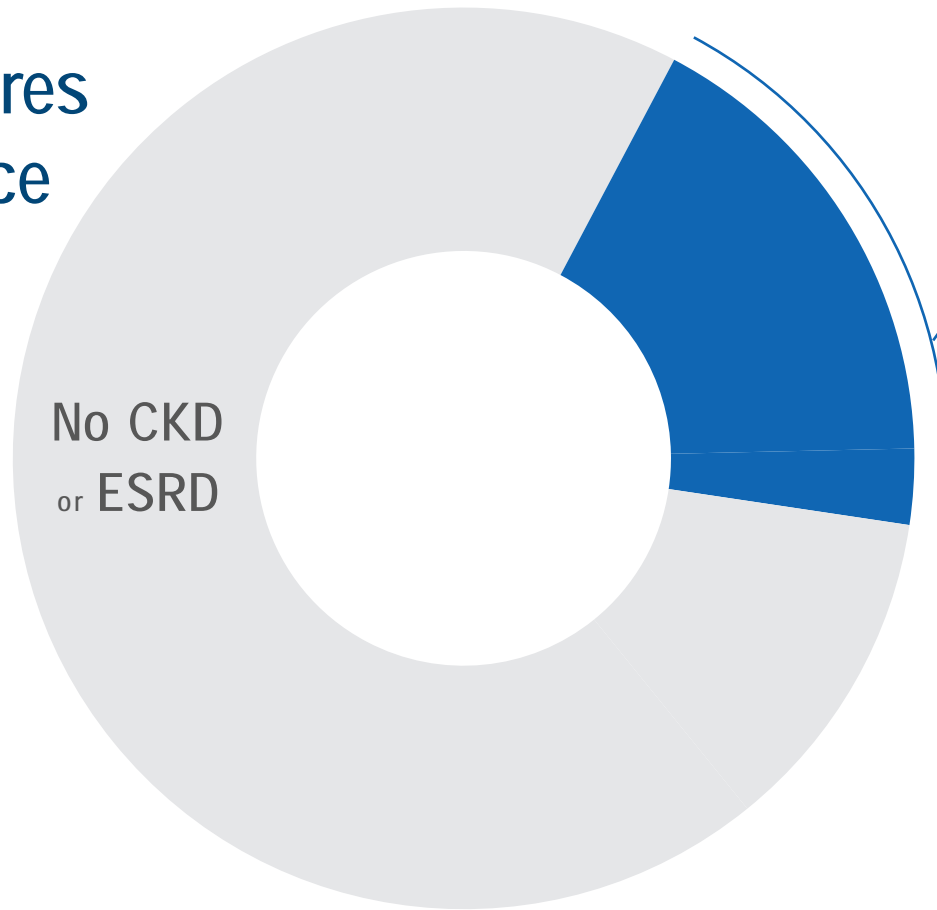
Source: USRDS 2020 Annual Report

 Hospitalization

 All-Cause Mortality

Cost of CKD

2018 expenditures
of fee-for-service
Medicare
beneficiaries



All-ages CKD population: \$81.8B

12.1%
OF TOTAL
POPULATION

22.3%
OF TOTAL
SPENDING

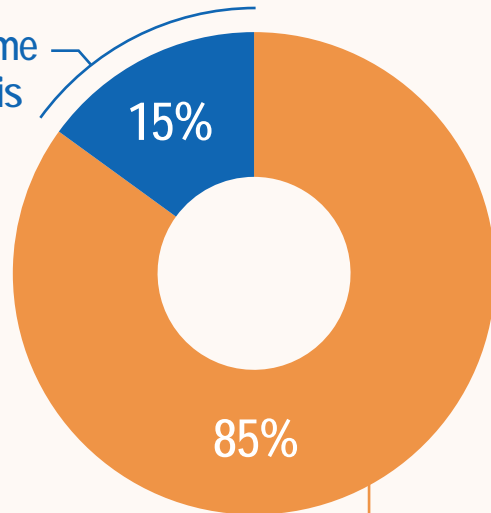
≥66 accounts for 86% of CKD spending

Moving Home Dialysis Forward

Current Healthcare Practices



At home dialysis

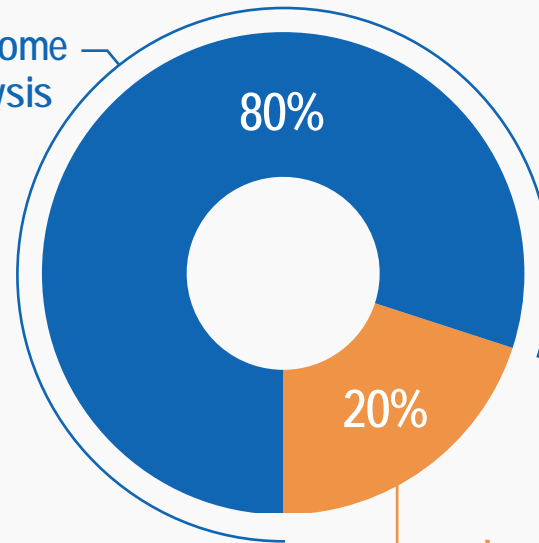


In-center dialysis

AAKH Goal



At home dialysis

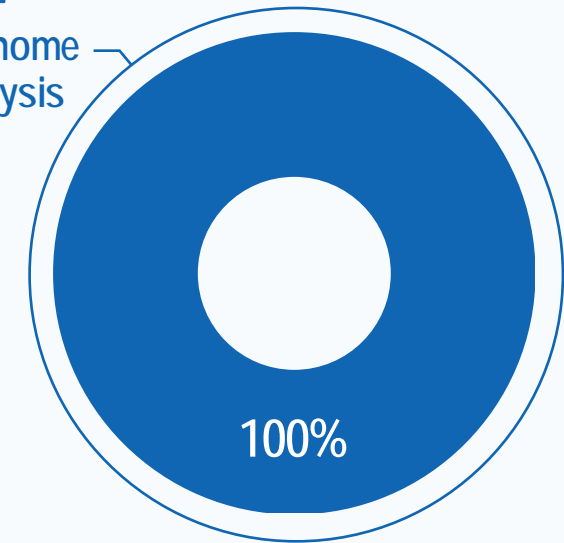


In-center dialysis

Industry Mindset

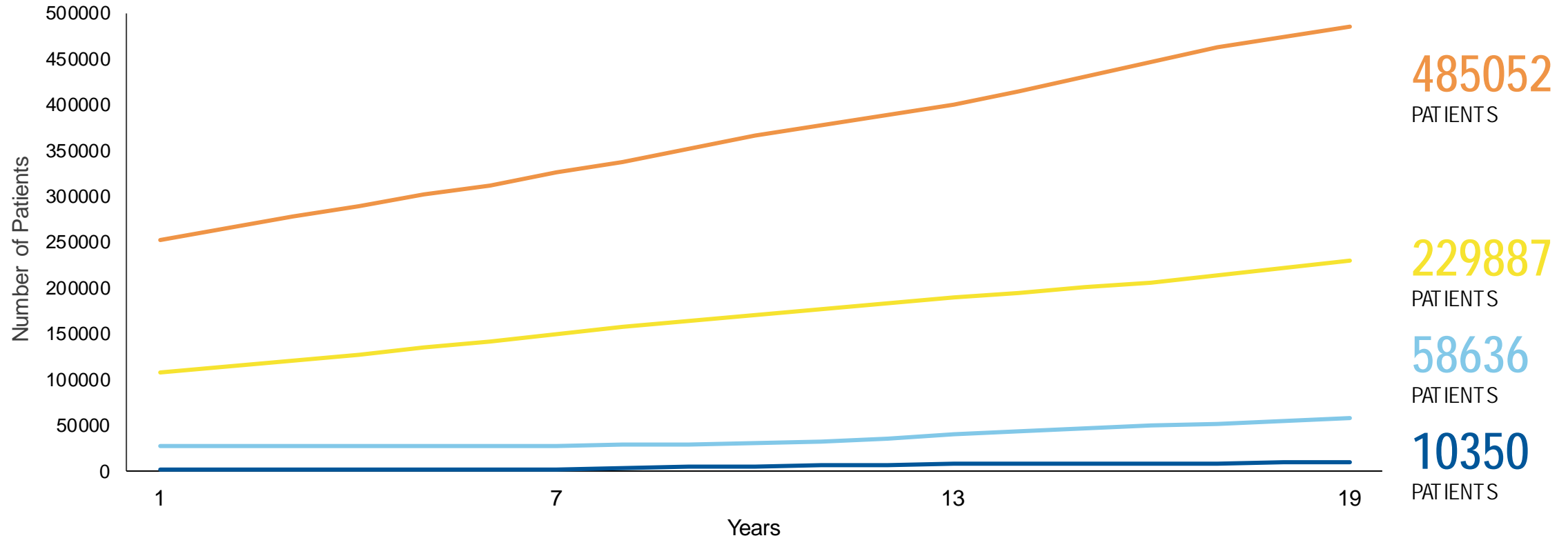


At home dialysis



Prevalent ESRD patients by modality

2000-2018



— In-Center Hemodialysis

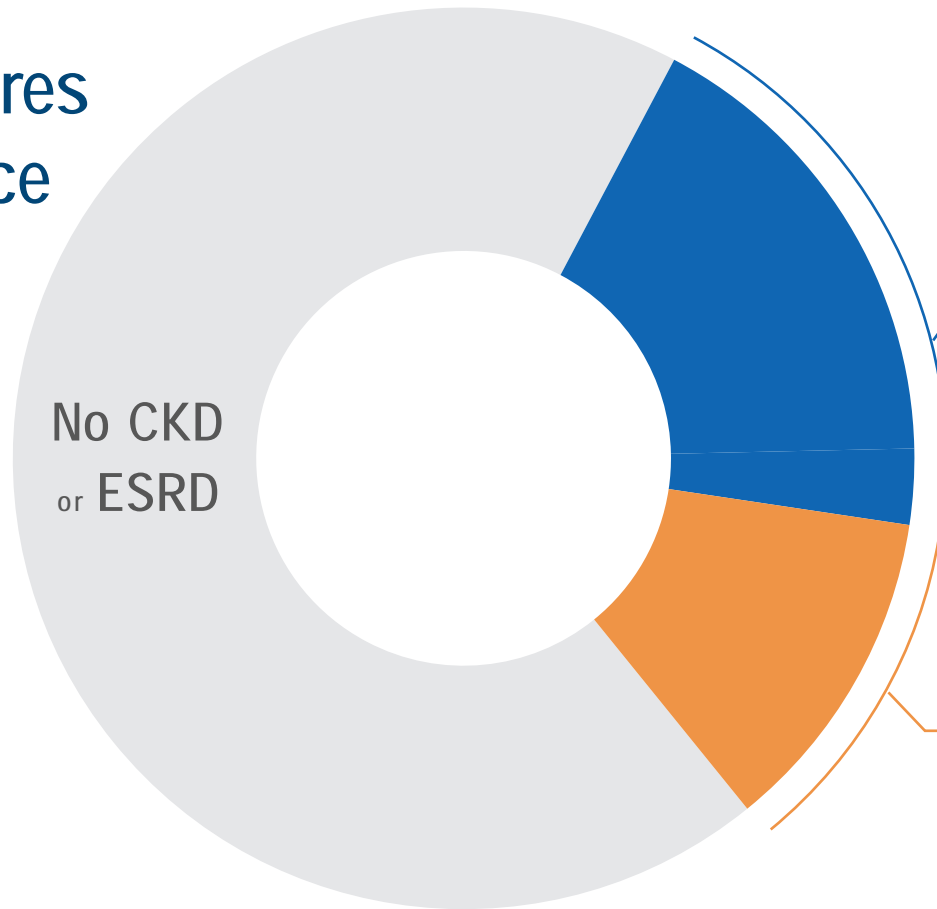
— Home Hemodialysis

— Peritoneal Dialysis

— Transplant

Cost of ESRD

2018 expenditures
of fee-for-service
Medicare
beneficiaries



All-ages CKD population: \$81.8B

12.1%
OF TOTAL
POPULATION

22.3%
OF TOTAL
SPENDING

≥66 accounts for 86% of CKD spending

All-ages ESRD population: \$49.2B

0.4%
OF TOTAL
POPULATION

11.8%
OF TOTAL
SPENDING

Olga

In Center HD

2007

PD

2008

In Center HD

2012

 Home Hemodialysis

2013 – Present



Quality of Life

Average life expectancy of patients with ESRD is approximately 4-years

1461 days

Time receiving dialysis in-center



576 days

19 MONTHS

Time at home

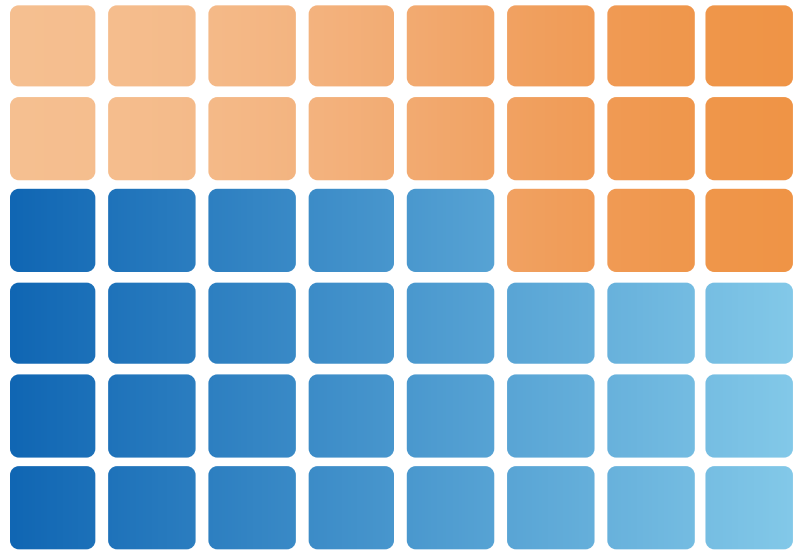


884 days

29 MONTHS

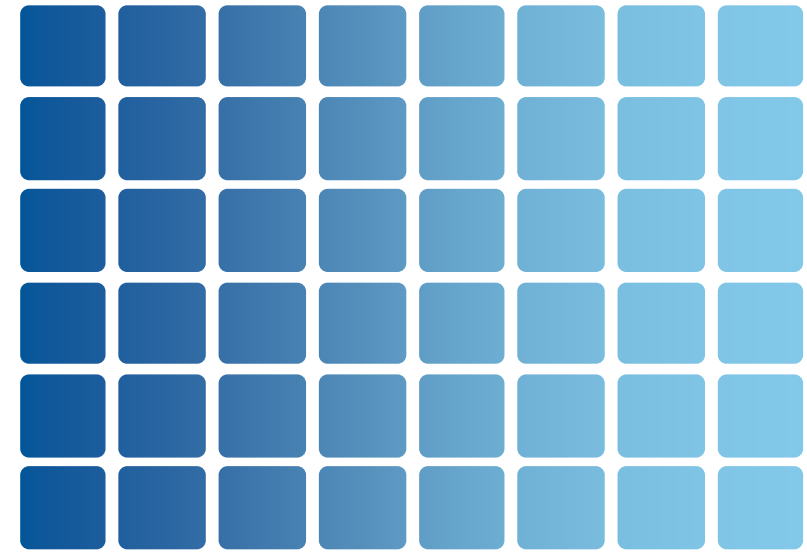
Quality of Life

In-center Dialysis Patient



48 months

At-Home Dialysis Patient

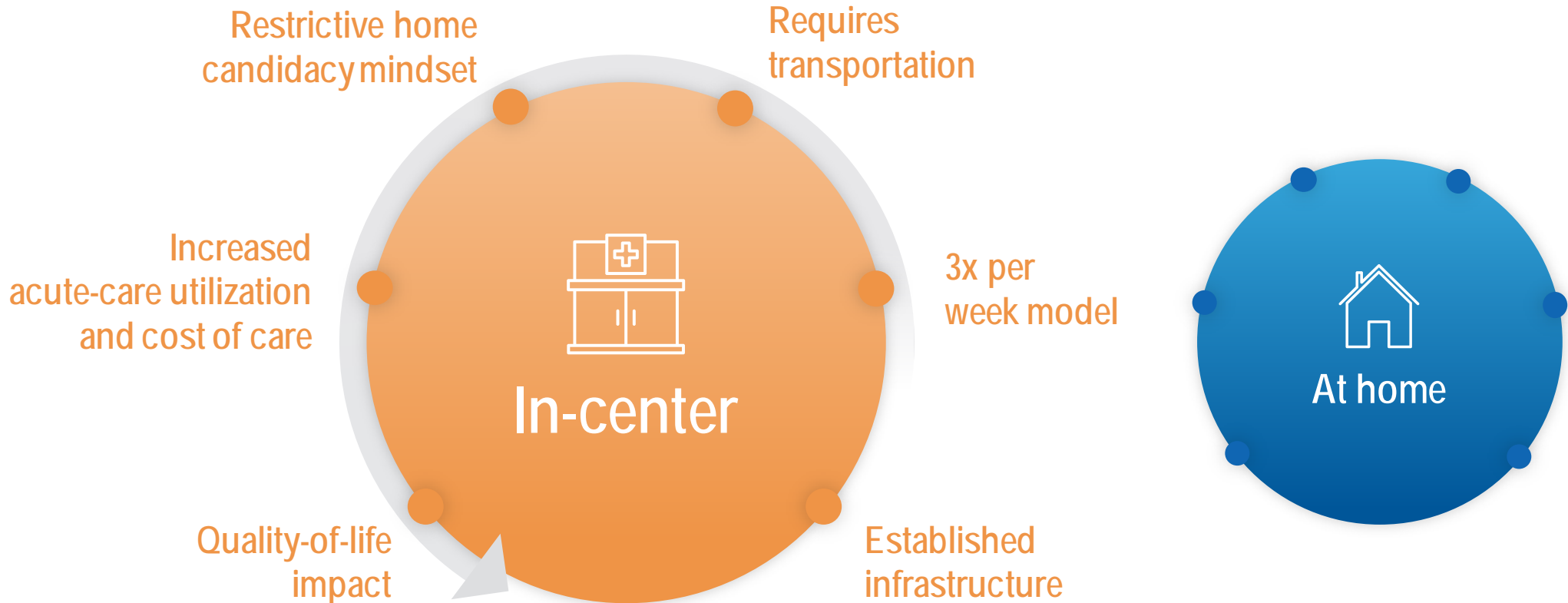


48 months

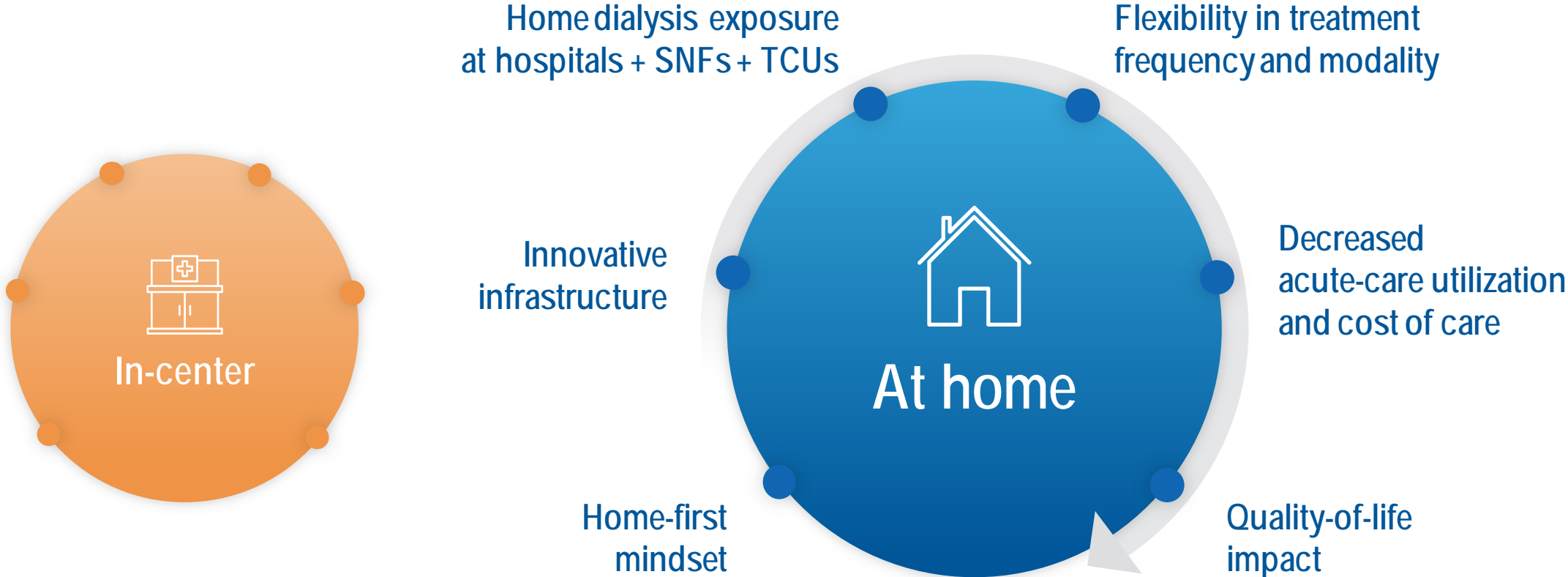
Orange In-center dialysis

Blue At home dialysis

In-center and at-home dialysis paradigms



In-center and at-home dialysis paradigms



Henry

HTN, RCC

In Center

2011

 Home Hemodialysis

2012

Kidney Transplant

2016



Health Services Advisory Group ESRD Network Strategies

Donna DeBello, RN

ESRD Network Home Dialysis Goals

The ESRD Networks are charged with engaging dialysis providers, patients and other stakeholders to drive healthcare improvement.

Network goals

- 1 The Executive Order on Advancing American Kidney Health (AAKH) goal to have 80% of new ESRD patients either receiving dialysis at home or receiving a transplant by 2025.
- 2 Achieving the following by April 2026 per the current Network Statement of Work:
 - 60% increase in number of incident ESRD patients starting dialysis on a home modality
 - 30% increase in the number of prevalent ESRD patients moving to a home modality

Network Home Dialysis Quality Improvement Strategies



Analyze available data to identify trends and focus facilities or low performers in need of targeted interventions.



Improve communication between home dialysis providers and in-center dialysis providers.



Conduct focused interventions with low performing facilities.



Support physicians and hospitals with educating patients early in the process.



Collect and spread best practices from high performing facilities.



Initiate and support a home dialysis coalition to drive change at a local level.

Focused Interventions – Facility Level

Educate **all in-center staff** on home dialysis options

Utilize the **Home Dialysis Change Package**

Conduct a **root cause analysis (RCA)** and create an action plan

Identify a Home Champion to act as an advocate and educate new patients

Discuss improvement activities with the Interdisciplinary Team (IDT) during monthly facility Quality Assessment and Performance Improvement (QAPI) meetings.

Utilize a **home dialysis patient tracker** to monitor patients through the steps to home dialysis

Promote communication between physicians, case managers, and in-center and home dialysis programs to establish early education of patients regarding home modalities

Home Dialysis Change Package

Aim: Increase Home Dialysis Use

PRIMARY DRIVERS

1

Foster physician support of home dialysis

2

Adopt a mindset that home dialysis is possible

3

Elevate home program collaboration and refine operations

4

Provide continuous patient and caregiver support

SECONDARY DRIVERS

1a Strength nephrologists' comfort level with dialysis at home

1b Improve primary care and specialty physician awareness and education

2a Frequently address misconceptions and promote benefits among staff members and patients

2b Consider all patients, widely refer patients, and explore options before declining patients for home modalities

3a Promote a culture of teamwork and build strong relationships

3b Measure, monitor, and assess program metrics

4a Individualize patient and caregiver education

4b Identify and address barriers in the patient's home

4c Recognize and support patient and family psychosocial needs

Focused Interventions –Patient Education



Display the home dialysis machines in an area visible to patients



Host a home dialysis Lobby Day with assistance from a home program



Use videos and patient testimonials

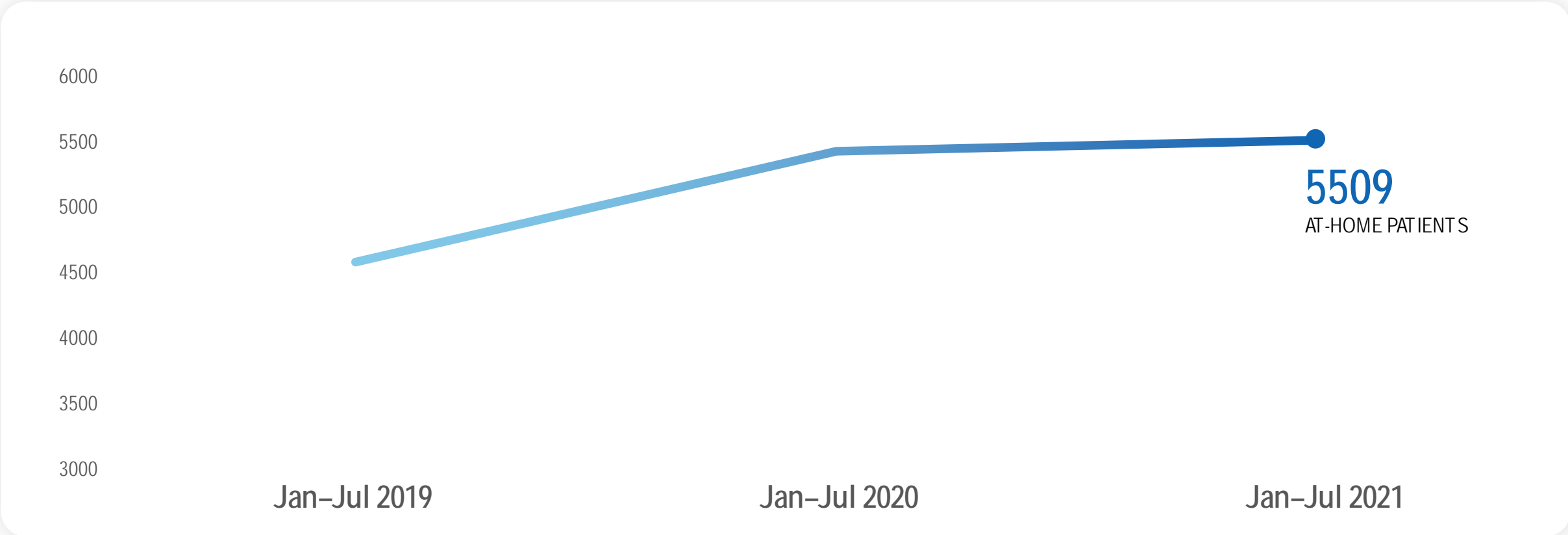


Connect interested patients with peer mentors or virtual patient support groups



Create a bulletin board to promote home dialysis

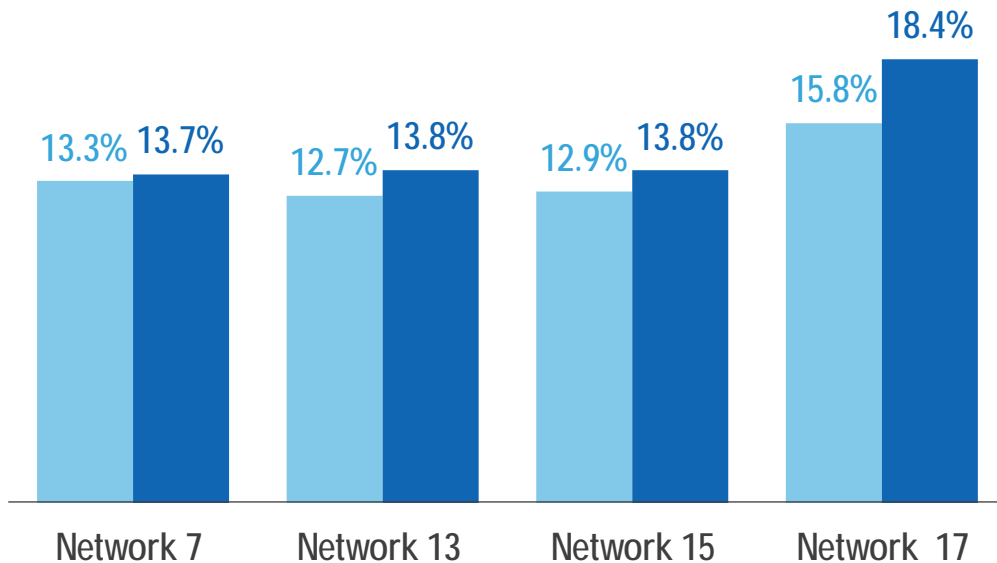
HSAG ESRD Network Home Dialysis Transitions



HSAG Network Home Dialysis Growth

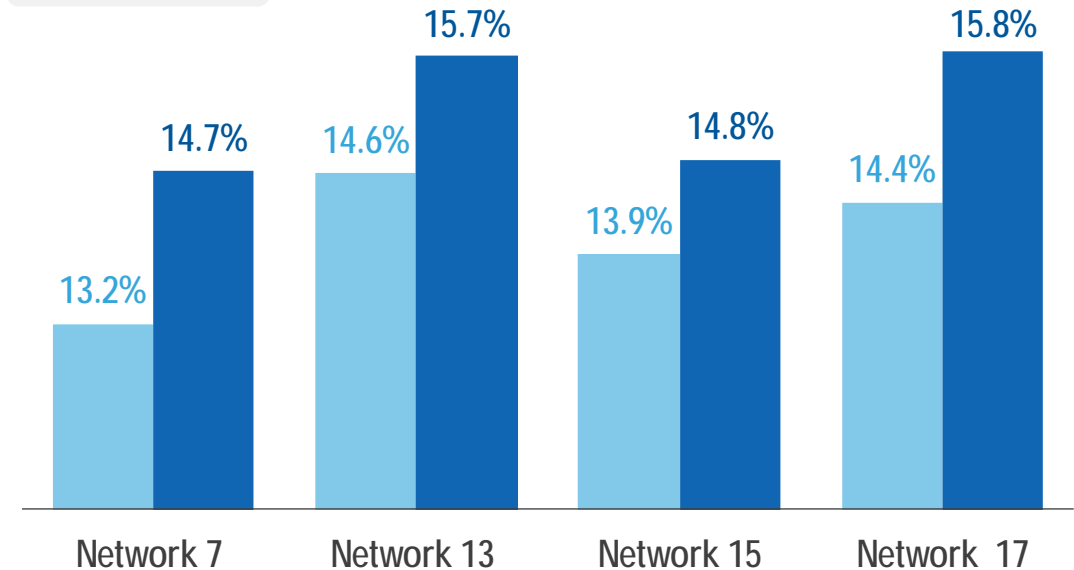
HSAG ESRD Network Incident Patients Starting on Home Dialysis

2019–2020



HSAG ESRD Network Prevalent Patients on Home Dialysis

2019–2020



■ 2019 Rate of Incident Patients Starting on a Home Modality ■ 2020 Rate of Incident Patients Starting on a Home Modality

Karen

HTN, IgA Nephropathy

CKD IV

2015

 PD

2016

Kidney Transplant

2016

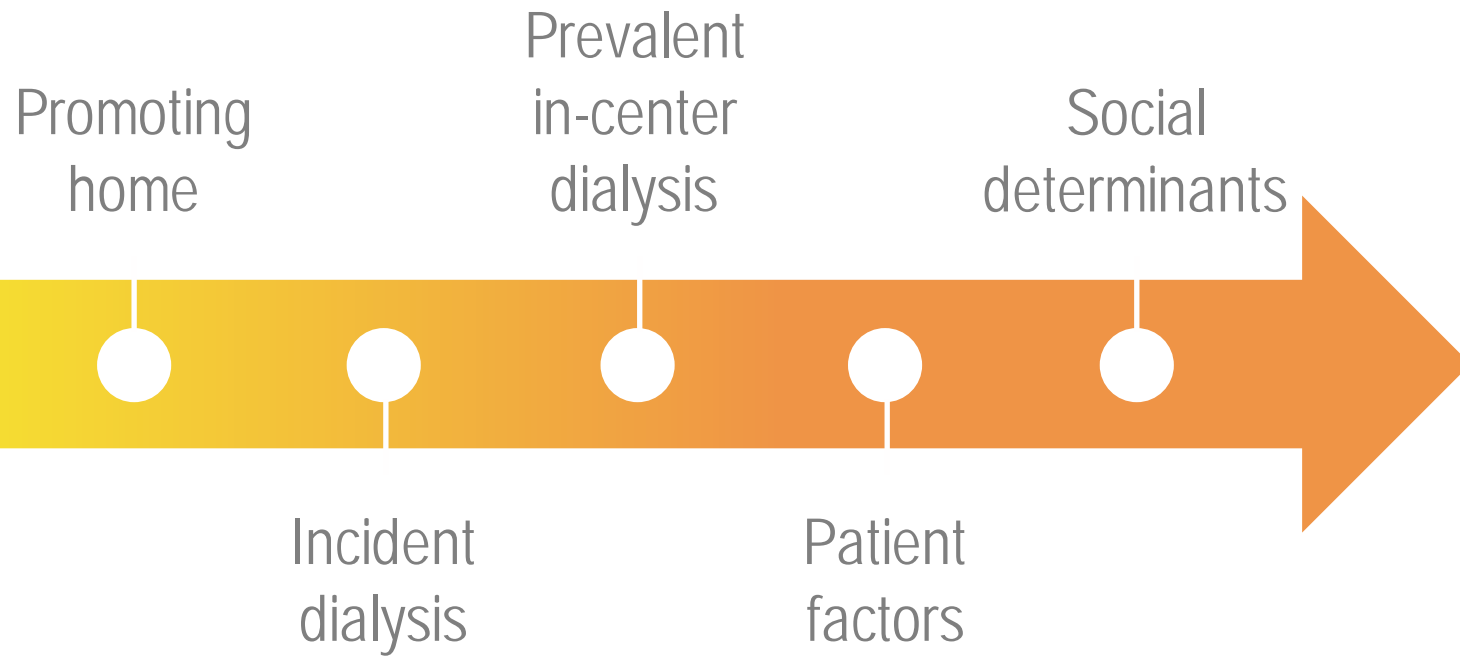


How One Dialysis Provider is Moving Home Dialysis Forward



Jessica Dewess, RN, Home Hemodialysis Training Nurse

Kyeasha Barner, RN, Peritoneal Dialysis Training Nurse

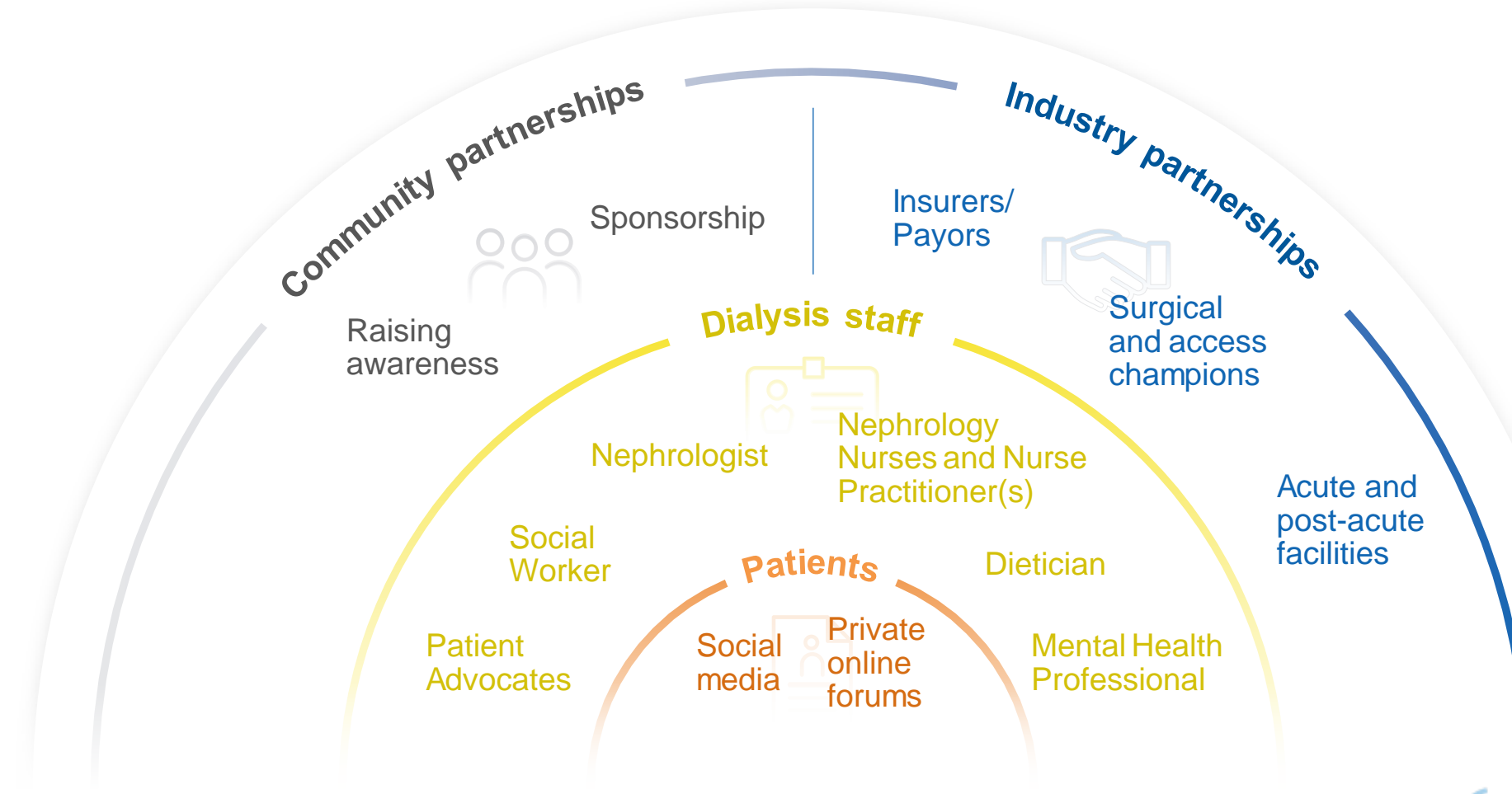
Growing Home Dialysis



Retention

- 
Caregiver burnout
- 
Modality change

Home Dialysis Communities



Rocco

CVA, Wheelchair bound, Chronic Indwelling Foley, HTN

CKD IV 2009 – 2011

CKD V 2012 – 2016

 Home Hemodialysis 2016 – Present

