CMS Manual System

Pub. 100-14 Medicare End Stage Renal Disease Network Organizations

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Department of Health &

Human Services (DHHS)

Centers for Medicare & Medicaid Services (CMS)

I. SUMMARY OF CHANGES: We have revised Chapter 6 – Community Information and Resources to add two new subsections under the revised section on providing educational assistance, to revise the Table of Contents, and to revise the section on providing technical assistance. A new hypertext link to Chapter 2, Subsection 70.1 is being added to Chapter 6, Section 40.

NEW/REVISED MATERIAL - EFFECTIVE DATE: April 26, 2004 IMPLEMENTATION DATE: April 26, 2004

Disclaimer for manual changes only: The revision date and transmittal number apply to the red italicized material only. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. SCHEDULE OF CHANGES (R = REVISED, N = NEW, D = DELETED)

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
R	2/70/70.1 Quarterly Progress and Status Report
R	6/ Table of Contents
N	6/20/20.1/ Provision of Educational Information – Providers/Facilities
N	6/20/20.2/ Provision Of Educational Information – Patients
R	6/30/ Provision of Technical Assistance
R	6/40/ Resolution of Difficult Situations and Grievances

III. ATTACHMENTS:

	Business Requirements
X	Manual Instruction
	Confidential Requirements
	One-Time Notification
	Recurring Update Notification

Medicare ESRD Network Organizations Manual

Chapter 6 - Community Information and Resources

Table of Contents

(Rev. 6, 03-12-04)

 $20.1-Provision\ of\ Educational\ Information-Providers/Facilities$

20.2 - Provision Of Educational Information – Patients

20.1 – Provision of Educational Information – Providers/Facilities

(Rev. 6, 03-12-04)

To ensure that the renal community is apprised of the activities in its network area, the Network distributes, at least annually, the following informational and/or educational materials to its facilities/providers along with a directive that each provider/facility makes the information available to its patients or informs its patients on how to contact the Network organization to obtain the information:

- ESRD program goals and Network activities to meet these goals;
- The Network's plan for monitoring facility compliance with the goals;
- Regional patterns or profiles of care as provided in the Clinical Performance Measures Annual Report;
- The Network's annual report in either hard copy or by referral to the Network's Web site;
- Any updated information and/or material as directed, appropriate, and/or necessary (necessity would result from, for example, a substantive change to a grievance process that resulted in updated informational material on the process);
- Results of the Network's quality improvement projects;
- Special mailings (assume two per year and 5-10 pages per mailing) as directed by CMS, including duplicating the materials, as necessary;
- Annual printing and distribution of Dialysis Unit Specific Reports within 30 days of receipt of the Dialysis Unit Specific reports (by hard copy or electronic) produced by a CMS designated source for the dialysis facilities within the Network's area. Produce and distribute two copies of each facility's report sending one copy to the attention of the facility's Medical Director and the other copy to the Unit Administrator. Each facility should only receive copies of its own report;
- Annual notification of the updated Quality Measures for Dialysis Facility Compare (DFC), within 30 days of receipt of the Dialysis Unit Specific Report (by hard copy or electronic) produced by a CMS designated entity or other report that describes the three quality measures to be posted on Medicare's DFC Web site for the dialysis facilities within the Network's area. The DFC update notification should also include instructions as to how the dialysis facility can access and use the DFC Web site and provide comments to CMS regarding its

updated measures. The CMS or its designee will provide instructions for preparing the notification to the dialysis facilities;

- Other materials (such as journal articles or pertinent research information) that facilities/providers can use in their quality improvement programs; and
- Information on accessing and using the information on the Dialysis Facility Compare Web site on Medicare.gov, and assisting patients to do so (include one module in an annual meeting dedicated to this topic).

The Network reports quarterly to its project officer (PO) through the Quarterly Progress and Status Report the activities conducted to distribute the above types of material. If more resources than allocated are needed to conduct these activities, the Network contacts its PO for guidance in prioritizing work activities.

20.2 - Provision Of Educational Information – Patients

(Rev. 6, 03-12-04)

ENO 605

Annually, the Network makes available, at a minimum, the following informational material to the patients in its network area, or informs them on how to contact the Network organization to obtain the information. The types of information include:

- The process for reporting and resolving patient grievances;
- Treatment options and new ESRD technologies available for patients;
- State/regional vocational rehabilitation programs available in the network area;
- A user-friendly toll free number to facilitate communications with beneficiaries within the network area. At a minimum, the toll free number must be advertised to patients through the New Patient Package letter of introduction, patient brochures, and on the Network Web site. A staff person should be available to answer the phone during normal working hours or, if a staff person is not available, the telephone system must allow the person to leave a message;
- The Network's web site that follows CMS standards and guidelines, which includes at a minimum:
 - The Network's grievance process;
 - The location of the Network;
 - *Toll free number for patients to contact the Network;*

- Current completed Annual Report;
- Network goals;
- A link to the Medicare.gov Dialysis Facility Compare site (http://www.medicare.gov/Dialysis/Home.asp); and
- Information on how to access and use Medicare's Dialysis Facility Compare Web site.

The Network reports quarterly to its project officer (PO) through the Quarterly Progress and Status Report the activities conducted to distribute the above types of material. If more resources than allocated are needed to conduct these activities, the Network contacts its PO for guidance in prioritizing work activities.

30 - Provision of Technical Assistance

(Rev. 6, 03-12-04)

ENO 610

Upon request, the Network provides technical assistance, guidance, and/or appropriate referrals to facilities/providers and patients in the network area. At a minimum, the Network notifies facilities/providers annually that it is available to assist them in these areas:

- Identifying available providers *and/or facilities* for patients seeking ESRD services (including transient patients) *and*;
 - Referring those patients to the Medicare.gov Dialysis Facilities Compare Web site:
 - Educating dialysis facility professional staff regarding the use of the information on Dialysis Facility Compare in assisting patients to make choices about dialysis facilities, to participate in decision making regarding their treatment, and other applicable uses per guidance set forth in the ESRD Network Organizations Manual; and
 - Providing, upon request or inquiry, assistance in understanding the information provided on the Dialysis Facility Compare Web page and Medicare.gov Web site.

NOTE: The Network's role is complementary to the efforts of the local facility staff in making transient dialysis arrangements for the facility's patients.

- Assisting providers/facilities in the development of community and patient education programs;
- Promoting patient education regarding kidney transplantation and self-care home dialysis;
- Encouraging and assisting providers/facilities to do timely patient assessments and appropriate referrals for evaluation of kidney transplant;
- Addressing impediments to referrals and/or transplantation, as appropriate and feasible;
- Assisting providers/facilities in assessing the functional status of patients;
- Defining or establishing rehabilitation goals for referring suitable candidates to vocational rehabilitation programs;
- Assisting providers/facilities (that are having difficulty in meeting Network goals) in developing appropriate plans for correction; and
- Assisting providers/facilities in the development of local disaster plans that include planning for such emergencies as floods, earthquakes, hurricanes, etc.

The Network is required to assist facilities/providers and patients (or provide the appropriate referral) upon request. If the Network is unable to assist all or some requestors because of resource limitations, the Network contacts its PO to discuss the situation(s) and obtain guidance for prioritizing work activities.

The Network reports quarterly to its PO through the Quarterly Progress and Status Report the activities or assistance it conducted or provided.

40 - Resolution of Difficult Situations and Grievances

(Rev. 6, 03-12-04)

ENO 615

The Network assumes a proactive role in the prevention, facilitation, and resolution of complaints and grievances, including implementing educational programs that will assist facility staff in handling difficult situations. Conduct trend analysis of reported situations to detect patterns of greater concern. The Network is responsible for, but not limited to, the following activities:

• Implementing educational programs designed to provide facility staff with an understanding of the issues and skills *needed* to prevent, intervene *in*, or mitigate difficult patient and/or facility situations;

- Upon request, assisting in the resolution of patient, provider, and/or facility complaints, before they become formal grievances by providing education, and/or facilitating solutions and/or making referrals, which address the issue(s) involved;
- Describing and reporting in the Quarterly Progress and Status Report, patient and facility concerns/grievances and Network actions and interventions in a narrative format;
- Annually analyzing facility-specific data to identify patterns of concern at the facility or the Network level, and opportunities to improve;
- Implementing interventions aimed at reducing grievances and/or the numbers of difficult situations;
- Collecting and appropriately categorizing inquiries/complaints/grievance data using the Standard Information Management System (SIMS); and
- Utilizing grievance data to plan new training modules, provide facilities with feedback and/or make recommendations to CMS.

See Chapter 7 of this manual for evaluating, resolving and reporting patient grievances and facility concerns. *The Network should refer* immediate and serious grievances to the appropriate CMS regional office and State survey agency, within 24 hours of receipt. Upon request, assist the State survey agency with the investigation of a complaint.

Report on these activities in the Quarterly Progress and Status Report as required in Chapter 2, §70.1.

70.1 - Quarterly Progress and Status Reports

(Rev. 3, 09-12-03)

ENO 230.A

The Quarterly Progress and Status Reports are used to:

- Provide a summary of Network activities conducted during the previous quarter;
- Alert the PO of potential quality of care or other problems in the network area;
- Alert the PO of problems encountered in fulfilling contract requirements; and
- *Allow the PO to m*onitor the Network's performance in meeting contract requirements.

The Network *must* submit one *hard* copy *and an electronic copy* of the report to its PO and to CMS Central Office by the 15th working day after the beginning of each calendar quarter. *The electronic version must be in Word format. The Quarterly Progress and Status Reports should include the information in Exhibit 2-2.*