

February 21, 2023

The Honorable Chiquita Brooks-LaSure Administrator Centers for Medicare & Medicaid Services Department of Health and Human Services Attention: CMS-10823 7500 Security Boulevard Baltimore, MD 21244

CMS-10823 End Stage Renal Disease (ESRD) Quality Incentive Program (QIP): Study of Quality and Patient Experience

Dear Administrator Brooks-LaSure:

On behalf of the Alliance for Home Dialysis, thank you for your commitment to ensuring high quality care for dialysis patients. We were encouraged to see the recently published information collection related to the ESRD QIP and CMS' desire to deepen its understanding of the dialysis landscape. The Alliance is a coalition of clinical societies, patient groups, facilities, and innovators who have come together to advocate for policies that will increase access to home dialysis: both peritoneal dialysis and home hemodialysis. We believe that patients deserve to be empowered and able to access the best treatment for them- in partnership with their clinical team- which is very often home therapy.

In addition to focusing on dialysis quality, quality of life, and access to care, we were pleased to see that health equity was listed as well. The Alliance is committed to advocating for patients of all backgrounds to have access to the best treatment modality for them, including home modalities. While access to education about CKD and ESRD are crucial to any patient with kidney disease, research has shown that patients of color, especially Black patients, are shown to be less likely to receive pre-ESRD nephrology care than their white counterparts and are often not exposed to the same opportunities for early education. We believe that disparity in access to these important educational resources can impact not only dialysis modality choices, but also transplants. We believe that there should be a greater focus on ensuring that these populations have access to desperately needed education, especially upstream, meaning before dialysis.

In addition, we want to take this opportunity to encourage you to also ensure that the experiences of home dialysis patients are taken into account through the interviews that will be conducted. While we understand that the ESRD QIP offers opportunities to drive improvements in the quality, safety, and efficacy of dialysis care, we have long been concerned that it does not adequately reflect and/or apply to the experiences of the ESRD patients who dialysis at home. We believe that for the QIP to operate as intended, these patients' experiences and outcomes must be adequately measured. This will help to

ensure that quality improvements extend to all modalities, not only in-center patients. Therefore, we urge you to include home dialysis patients, clinicians, and stakeholders in this information collection.

Finally, we note CMS' interest in understanding emerging trends. There are indeed new trends to capture, including entities forming to provide value-based care, clinicians participating in these new practice patterns, and new technologies and drugs receiving and aspiring to TPNIES and TDAPA, with more on the way. We urge CMS to include in the information collection the viewpoints of these organizations breaking new ground in ESRD care so that the Agency may understand the quality efforts and improved outcomes for which these entities are striving on behalf of dialysis patients.

Thank you again for the opportunity to provide comments on this topic. If you have any questions or would like to discuss further, please contact Michelle Seger at <u>mseger@vennstrategies.com</u>.

Sincerely,

Michelle Seger Managing Director Alliance for Home Dialysis