

THE NATIONAL QUALITY FORUM

CALL FOR CANDIDATE STANDARDS END STAGE RENAL DISEASE

Background

Currently, more than half a million American lives have been altered by a diagnosis of end stage renal disease (ESRD), a serious condition that is almost always fatal unless treated with dialysis or transplantation. ESRD is the only disease-specific condition that is explicitly guaranteed Medicare coverage, with Medicare costs for the condition reaching \$24 billion in 2007. In the same year, all-cause mortality rates for ESRD were roughly 6-8 times higher for dialysis patients than for the general population.¹

In 2007, the incidence rate of ESRD in Americans fell 2.1 percent to equal 354 per million population (more than 527,000 cases)—the first the decline in the rate since 1995. Racial and ethnic differences persist: In 2007, the rates in the African American and Native American populations were 3.7 and 1.8 times higher, respectively, than the rate in the Caucasian population, and the rate in the Hispanic population was 1.5 times higher than the rate of the non-Hispanic population.²

The National Quality Forum (NQF) is soliciting additional End Stage Renal Disease (ESRD) measures for quality improvement and public reporting. In 2008, NQF endorsed 25 standardized performance measures for ESRD care in the areas of anemia; dialysis adequacy; mineral metabolism; vascular access; influenza immunization; mortality; and patient education, perception of care, and quality of life. These measures were intended to facilitate efforts to improve the quality of care delivered to ESRD patients in all care settings, including dialysis facilities, in-home settings, physician offices, and hospitals.

This project will address additional aspects of ESRD care and successful transition to renal replacement therapy. Specific considerations may include, but are not limited to areas of transition from stage 4 chronic kidney disease (CKD) to ESRD, mineral metabolism, vascular access-related infections, anemia management, fluid weight management, and pediatric hemodialysis.

This “Call” formally solicits candidate standards for review, evaluation, and potential endorsement as national voluntary consensus standards for ESRD care. The project will consider measures for use at the individual clinician, group, facility, health plan, and health system levels. The project scope is limited to ESRD only, but it will address CKD to a limited extent, such as those measures focused on transitioning to successful renal replacement therapy from stage 4 CKD or measures for which the evidence indicates applicability for both ESRD and CKD. All remaining NQF-endorsed ESRD standards, as well as new renal measures, will be reviewed in an endorsement maintenance cycle for the renal disease topic area in early 2011.

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NQF Process

Any organization or individual may submit candidate standards for consideration. To be included as part of the initial evaluation, candidate standards must meet the following general criteria as specified in the [measure evaluation criteria](#):

- A. The measure is in the public domain or an [intellectual property agreement](#) is signed. Please note that no material will be accepted without fully executing the Measure Steward Agreement. All materials not meeting this requirement will be returned to the sender.
- B. The measure owner/steward verifies there is an identified responsible entity and process to maintain and update the measure on a schedule that is commensurate with the rate of clinical innovation, but at least every 3 years.
- C. The intended use of the measure includes both public reporting and quality improvement.
- D. The requested measure submission information is complete. Generally, measures should be fully developed and tested* so that all the evaluation criteria have been addressed and information needed to evaluate the measure is provided.

***Untested measures (i.e., without testing and results for [Scientific Acceptability of Measure Properties](#))** are only eligible for time-limited endorsement. The NQF [Time-limited Endorsement Policy](#) was modified in 2009 as follows:

- Limited Use. Time-limited endorsement is only available for use if all of the following conditions are met:
 - An incumbent measure does not address the specific topic of interest in the proposed measure;
 - A critical timeline must be met (e.g., legislative mandate); and
 - The measure is not complex (e.g., composite, requires risk adjustment).
- Time Period. The measure steward verifies a timeline and committed resources to conduct testing within 12 months if granted time-limited endorsement.

To submit a measure, please complete the following:

- [Online Measure Submission Form](#)
- [Measure Steward Agreement Form](#)

Please note that no materials will be accepted unless accompanied by a fully executed Measure Steward Agreement. All materials not meeting this requirement will be returned to the sender.

Deadline for Submission

Materials must be submitted electronically via the online submission form **by 6:00 pm EST on September 30, 2010.**

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Contact Information

For more information, contact Lauren Richie at 202-783-1300 or e-mail esrd@qualityforum.org. Thank you for your assistance with this project!

Notes

1. U.S. Renal Data System, *USRDS 2009 Annual Data Report: Atlas of End-Stage Renal Disease in the United States*, National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 2009. Available at <http://www.usrds.org/atlas.htm> Last accessed on July 6, 2010.
2. Vassalotti JA, Stevens LA, Levey AS, Testing for chronic kidney disease: A position statement from the National Kidney Foundation, *A J Kid Dis*, 2007;50(2):169-344.