CMS has required major changes in the organizational structure of the Network to continue as a contractor. These changes have required a major revision of the ESRD Network of Texas, Inc. bylaws that include changes in the composition of the Board of Directors and the Network Council.

*CMS has provided the following information to share with you.*

## How CMS Activates the ESRD Networks

CMS engages ESRD Networks to:

- Work in 18 jurisdictions ("Networks") across the country.
- Serve as patient care navigators for over half million patients with end-stage renal disease (kidney failure) treated in nearly 6,000 dialysis clinics or waiting for and recovering from a kidney transplant.
- Lead local efforts to transform care as conveners, organizers, motivators, and change agents.
- Collaborate as partners in quality improvement with beneficiaries, practitioners, health care providers, other health care organizations, and other stakeholders.
- Achieve and measure changes at the patient level by collecting data, analyzing it to inform improvement, and monitoring those improvements for substantive impact.

List of Network staff, contact information, and job duties can be found on our website at www.esrdnetwork.org.

Another major shift in the Network role has been the cessation of the Network/MRB involvement in the DSHS ESRD Licensure Referral and CAP process as a result of changes in the Federal Regulations, whereby any work performed by the Network becomes releasable to CMS and thus is subject to the Freedom of Information Act. Since the Texas ESRD Statute requires that MRB advisement to the DSHS be held confidential and protected, the Network could not comply with the two conflicting requirements, and since CMS is our sole contractor, we must comply with the Federal Regulations and directives.

### CROWNWEB

Network staff will continue to assist Texas ESRD facilities with CMS PART, CMS 2728, CMS 2746, and CMS 2744 form questions and assistance with submission.

More information on CROWNWeb can be found at http://www.esrdnetwork.org/global/cw_overview.asp
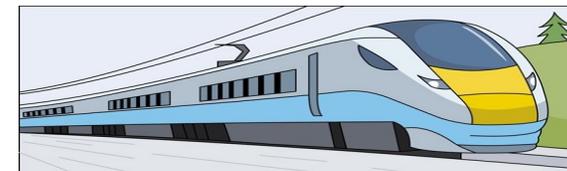
Our professional newsletter released in January 2013 provides more detailed information on topics in this brochure. To access a copy of the newsletter go to our website at www.esrdnetwork.org ⟶ Our Network ⟶ Newsletters ⟶ Professional Newsletters ⟶ Special Edition; January 2013.

**Be ready to board—The Change Train is coming to your location soon.**

On January 1, the ESRD Networks began a new era of the ESRD Network Program. During this new era, our vision is to optimize health outcomes and clinical quality improvement through health system transformation. We will achieve this by placing the over half-million ESRD patients in the more than 6,000 dialysis facilities across the country at the center of everything we do-whether that work occurs at the facility level, at the policymaking table, or through system-wide learning and action networks. Our commitment to patient-centered care is articulated through our three chief Aims:

- Better, safer care by promoting patient and family-centeredness
- Better health for the ESRD population
- Lowering the costs of dialysis care through improvement

# *It's all about them-our Patients, Their Families, and Caregivers*

## Patient Engagement

The ESRD Networks and CMS have joined efforts to address and promote patient engagement through a variety of strategies.

- Promoting patient and family engagement at the facility level
- Establishing a Patient Engagement Learning and Action Network (PE LAN)
- Involving more patients and family members in Network Boards and Committees
- Looking to our patients as Subject Matter Experts (SMEs)

We know that the Network can only succeed in collaboration and partnership with the renal community, including our patients, and we extend our hand to be "all in" with us as we embark on this new journey. We will be calling for volunteers to work with us in testing new ground to improve patient engagement and patient care in the coming months-**we're counting on you!**

## Healthcare Acquired Infections - Learning and Action Network (HAI LAN)

A LAN is a collaborative initiative for the purpose of bringing healthcare professionals, patients, and other stakeholders together to focus on a particular healthcare issue. A LAN utilizes collective creative stakeholders to attain and drive evidence based best practices for rapid wide-scale improvement, sustainability, and ultimately transferability to other organizations.

In an effort to improve the dialysis beneficiary's overall health outcomes, the Network's HAI LAN will have an innovative approach which evolves from primarily a healthcare provider based perspective to a collaborative patient centered/partnering perspective to achieve optimal outcomes.

## Patient Services—Changes

Patient calls to the Network with concerns are regarded as "grievances" not complaints. Clinics must respond to requests for medical records within 24 hours of receipt of request.

The Network has been charged by CMS to reduce the number of IVDs by 5% per quarter. This will take a team
Approach: Network, Facility,
and Patients.

## CMS/ESRD Network of Texas Vascular Access Goals

- Achieve a 68% Arteriovenous fistula-in-use rate for prevalent hemodialysis adult patients
- Decrease the long-term catheter in use ($\geq$ 90 days) rate among prevalent adult patients by at least 2 percentage points in dialysis facilities with a > 10% rate of long-term catheter in use ($\geq$ 90 days)

For VA info contact Kelly Shipley: kshipley@nw14.esrd.net or 469-916-3803

## Support for ESRD QIP and Performance Improvement on QIP

- Promote use of In Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH-CAHPS).
- Address issues identified through ICH CAHPS Data Analysis.
- Assist Facilities in improving their performance on QIP Measures.
- The Network is developing a Professionals QIP page at: www.esrdnetwork.org/professionals/QIP.asp