



The Kidney Care Quality and Education Act of 2007

Summary

The Kidney Care Quality and Education Act of 2007 was introduced on February 27, 2007, as S.691 in the Senate and H.R. 1193 in the House. There are several significant differences between this bill and the Kidney Care Quality and Improvement Act of the last Congress.

The new bill mandates an update to the composite rate for three years, and makes the update part of a three-year quality demonstration project. The update is set at the ESRD market basket for each of the three years.

The bill creates a new “Continuous Quality Improvement Initiative,” which will provide “quality payments” to facilities and physicians for reporting, improving, and exceeding quality thresholds to be adopted by the Secretary of the Department of Health and Human Services (HHS) in consultation with a newly created ESRD Advisory Committee. The payments will be made for reporting in 2008, and for improvement or exceeding the thresholds in 2009 and 2010. Pediatric facilities are required only to report for the three years of the demonstration. The funding pool for the quality payments will come from withholding one-quarter to one-half of the update amount.

The bill establishes the “ESRD Advisory Committee.” Members will be appointed by the Secretary of HHS and will advise the Secretary on quality, reimbursement, and all other issues pertaining to the ESRD program, including setting the quality thresholds described above.

At the end of the three-year demonstration, the Secretary of HHS, the Medicare Payment Advisory Commission (MedPAC), and the Institute of Medicine (IOM) will evaluate and make recommendations as to whether the update and the quality initiative should be made permanent by the Congress.

These new provisions link an annual update to the industry’s acceptance of accountability for quality care. The cost of the bill is at least two thirds less than last year’s legislation.

Additionally, the bill once again creates a number of demonstration projects, studies and other measures designed to improve the quality of renal care. These include: education on chronic kidney disease and ESRD self-management, Medicare coverage for education of patients approaching dialysis or transplantation, a blood flow monitoring demonstration to evaluate how this affects quality and cost of ESRD care, an IOM study of barriers to home dialysis and other treatment modalities; and requiring standardized training and certification of patient care dialysis technicians.

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A copy of the House bill HR 1193 can be found in the “Members Only” section of our website as [NRAA Report 591](#)

The text of the Senate bill S.691 has not yet been received from Government Printing Office