ESRD Network 11
2023 Annual Report

Michigan, Minnesota, North Dakota, South Dakota, Wisconsin

This report will cover quality improvement efforts led by ESRD Network 11 Task Order Number 75FCMC21F0003 from May 1, 2023- April 30, 2024.

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ESRD DEMOGRAPHIC DATA

Midwest Kidney Network (End Stage Renal Disease Network 11)

Midwest Kidney Network (MKN) is an independent, nonprofit organization working to assess and improve the care of people with kidney disease. We serve a five-state region: Michigan, Minnesota, North Dakota, South Dakota, and Wisconsin.

Geography and Population Density

Our service area covers more than 350,000 square miles and spans three time zones. More than 23 million people live in this five-state region. About 40% reside in the 3 biggest metropolitan areas of Detroit, Milwaukee, and Minneapolis-Saint Paul.

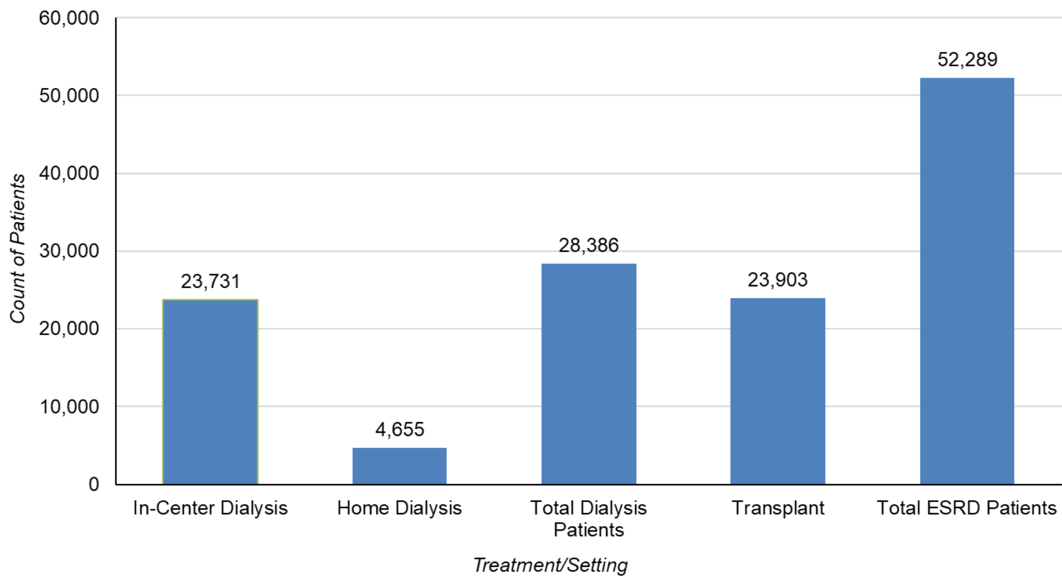
Diverse Populations

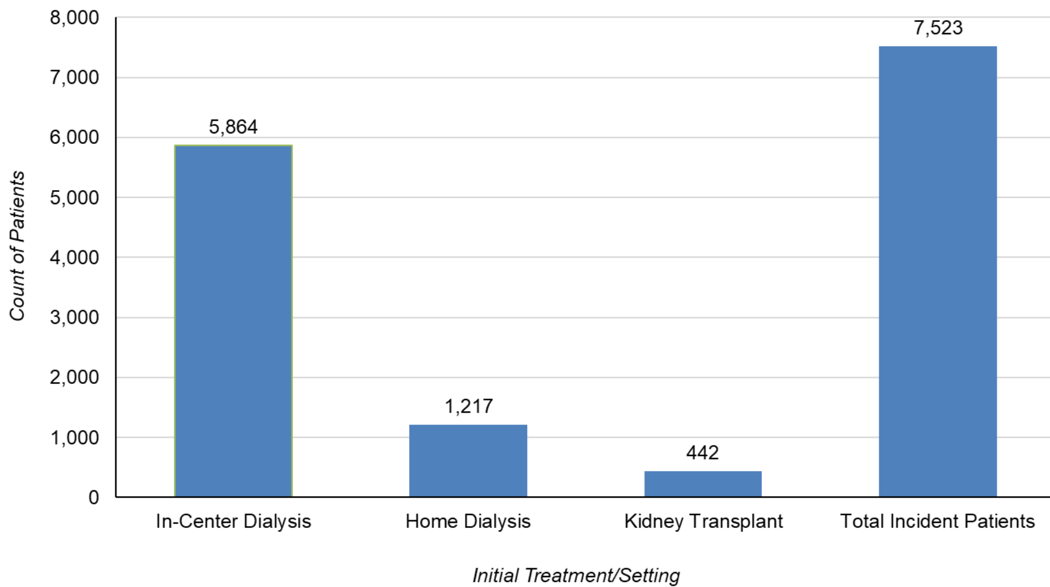
The following are notable points about the diverse population in our five-state region as people of color are more likely to develop end stage kidney disease (ESKD).

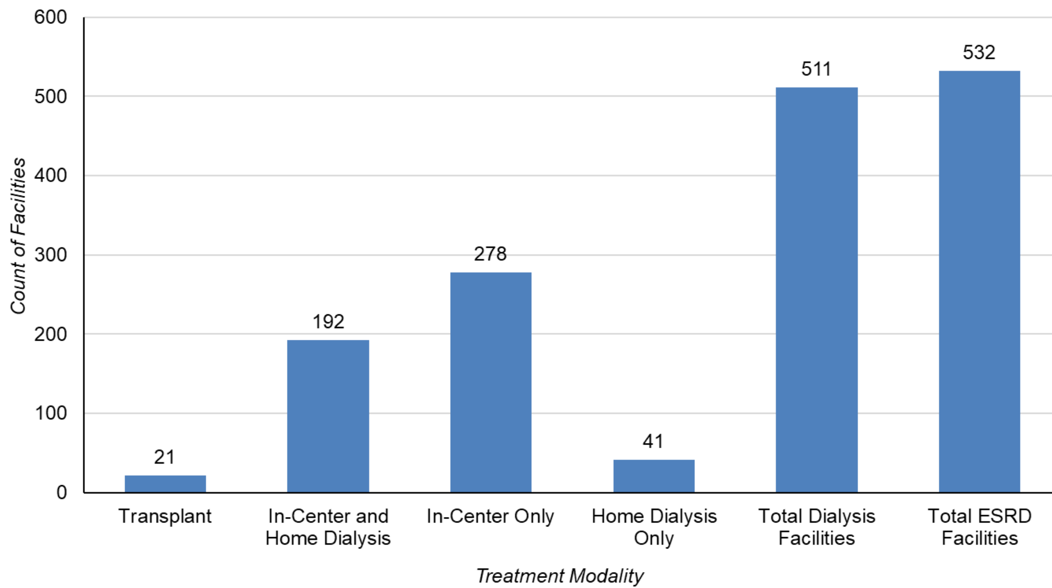
- At 78%, Detroit, Michigan has the third highest percentage of African American population in a US city.
- Midwest Kidney Network's five-state area contains more than fifteen Native American reservations with some of the largest populations in the United States. Ten percent of the population of South Dakota identifies as American Indian or Alaskan Native making it the state with the 4th highest percentage of Native American population in the US.
- Minnesota is home to the largest Somali population in the US.
- Minnesota, Wisconsin and Michigan are 3 of the top 5 states with the highest percentage of Hmong residents. St. Paul, MN is home to more Hmong Americans than any other US metro area.

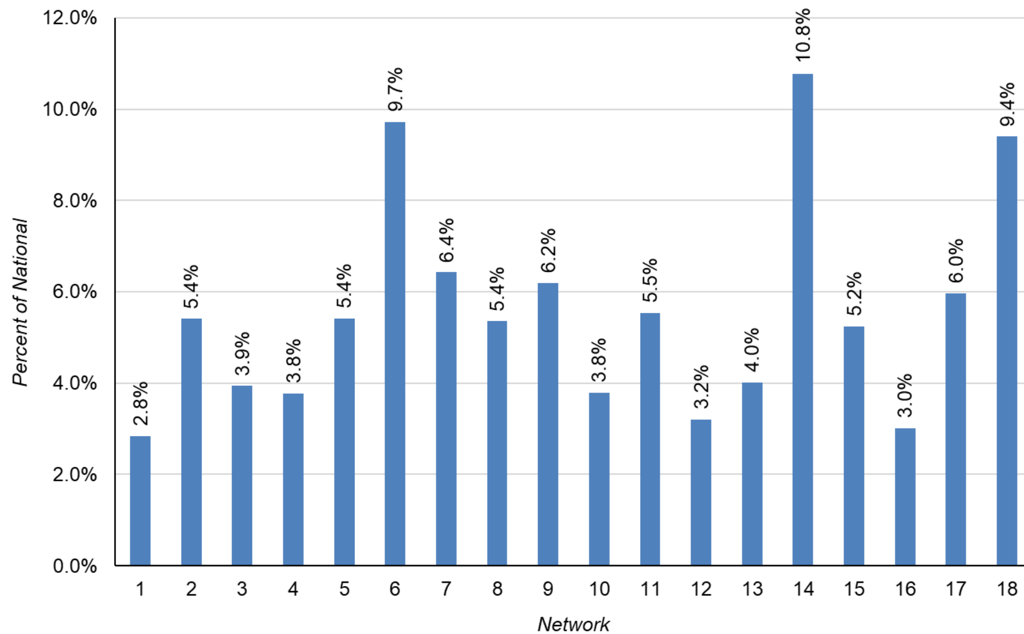
End Stage Renal Disease (ESRD) in Midwest Kidney Network Region

Midwest Kidney Network collaborates with 525 ESRD providers. Of the dialysis providers in this 5-state region, 39% are affiliated with DaVita, 36% are affiliated with FMC, 11% are affiliated with a regional chain, and 14% are independent.

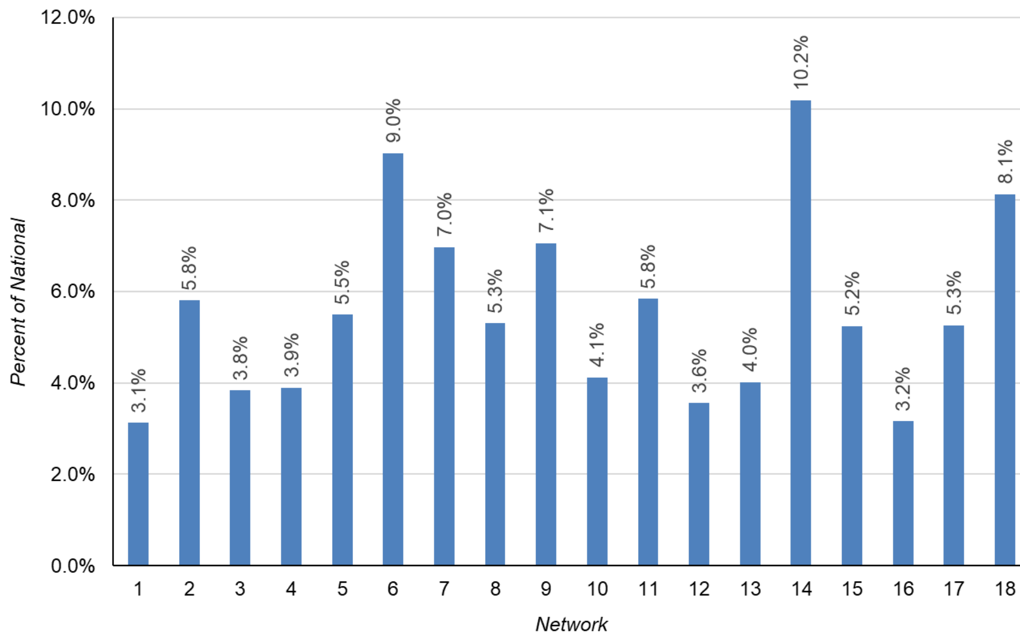

Network 11: Count of Prevalent ESRD Patients by Treatment/Setting
2023
Count of Patients
60,000
50,000
40,000
30,000
20,000
10,000
0
23,731
4,655
28,386
23,903
52,289
In-Center Dialysis
Home Dialysis
Total Dialysis Patients
Transplant
Total ESRD Patients
Treatment/Setting
Total Dialysis Patients = In-Center Dialysis + Home Dialysis
Total ESRD Patients = Transplant + Total Dialysis
SNF dialysis patients are not shown due to small numbers
Source of data: EQRS May 2024


Network 11: Count of Incident ESRD Patients by
Initial Treatment/Setting
2023
Count of Patients
8,000
7,000
6,000
5,000
4,000
3,000
2,000
1,000
0
5,864
1,217
442
7,523
In-Center Dialysis
Home Dialysis
Kidney Transplant
Total Incident Patients
Initial Treatment/Setting
Total Incident = Patients In-Center + Home + Kidney Transplant
Source of data: EQRS May 2024


Network 11: Count of Medicare-Certified Facilities
by Treatment/Setting
2023
600
500
400
300
200
100
0
Count of Facilities
21
192
278
41
511
532
Transplant
In-Center and Home Dialysis
In-Center Only
Home Dialysis Only
Total Dialysis Facilities
Total ESRD Facilities
Treatment Modality
Total Dialysis Facilities = In-Center and Home Dialysis + Home Dialysis Only + In-Center Only
Total ESRD Facilities = Transplant + Total Dialysis Facilities
Source of data: EQRS May 2024

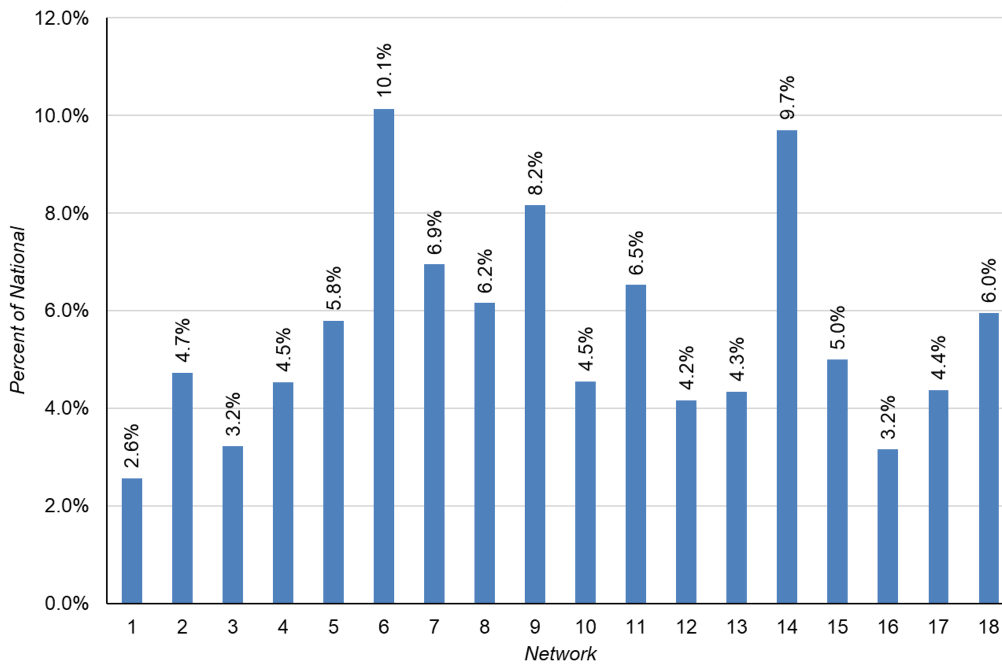

Percent of National Prevalent Dialysis Patients by ESRD Network
2023
12.0%
10.0%
8.0%
6.0%
4.0%
2.0%
0.0%
Percent of National
2.8%
5.4%
3.9%
3.8%
5.4%
9.7%
6.4%
5.4%
6.2%
3.8%
5.5%
3.2%
4.0%
10.8%
5.2%
3.0%
6.0%
9.4%
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
Network
National total dialysis patients: 513,225
Source of data: EQRS May 2024

Percent of National Incident Dialysis Patients by ESRD Network 2023

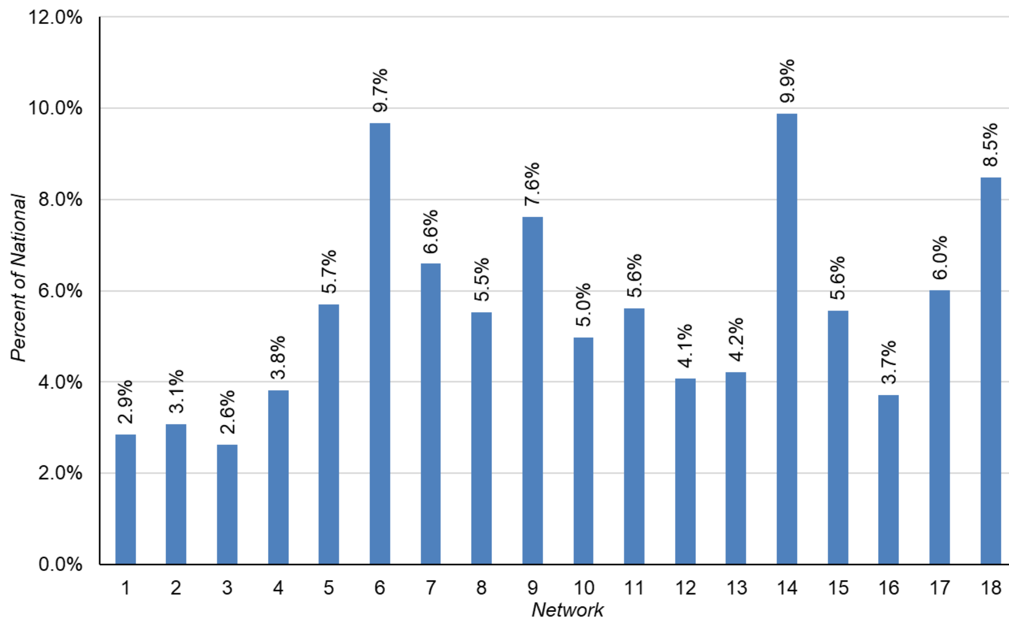


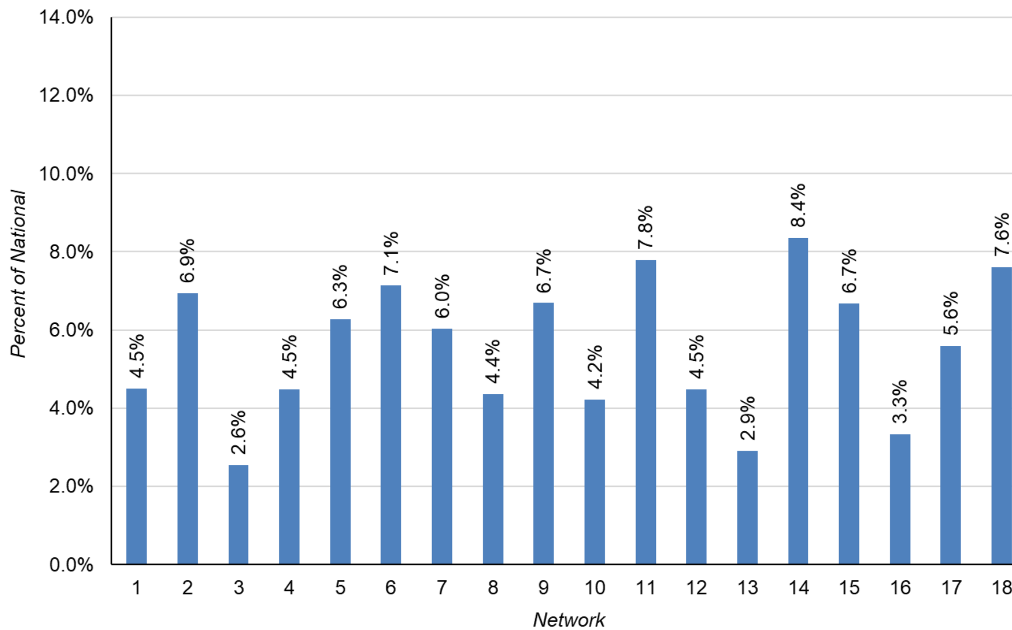
National total incident patients: 128,814
Source of data: EQRS May 2024

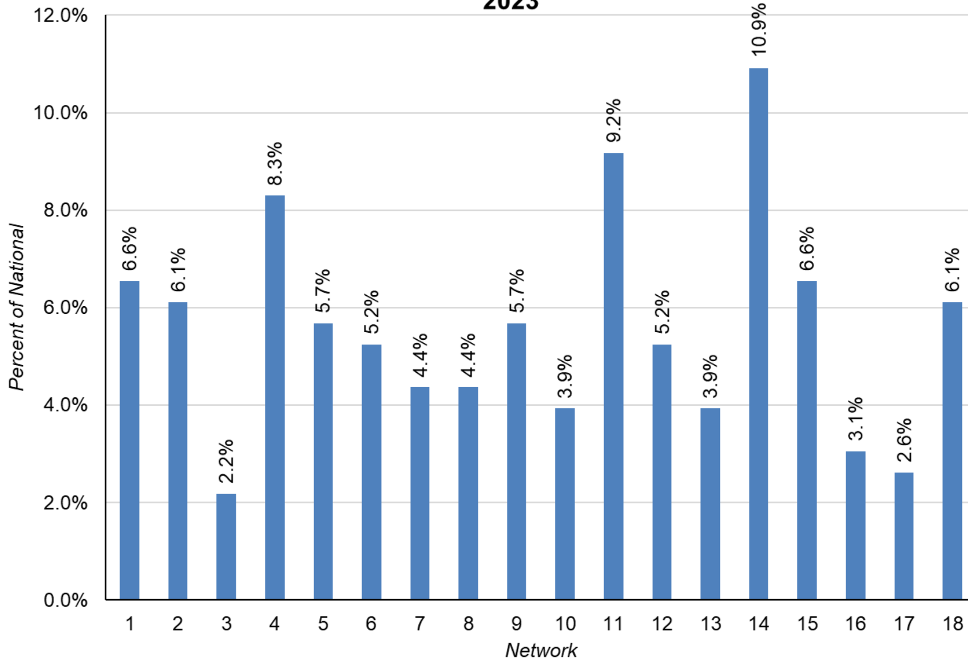
Percent of Medicare-Certified Dialysis Facilities by ESRD Network 2023



National total ESRD Medicare-certified dialysis facilities: 7,830
Source of data: EQRS May 2024


Percent of National Home Hemodialysis and Peritoneal Dialysis Patients by ESRD Network
2023
Percent of National
Network
12.0%
10.0%
8.0%
6.0%
4.0%
2.0%
0.0%
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
2.9%
3.1%
2.6%
3.8%
5.7%
9.7%
6.6%
5.5%
7.6%
5.0%
5.6%
4.1%
4.2%
9.9%
5.6%
3.7%
6.0%
8.5%
National total home hemodialysis and peritoneal dialysis patients: 82,964
Source of data: EQRS May 2024


Percent of National Transplant Patients by ESRD Network
2023
Percent of National
Network
14.0%
12.0%
10.0%
8.0%
6.0%
4.0%
2.0%
0.0%
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
4.5%
6.9%
2.6%
4.5%
6.3%
7.1%
6.0%
4.4%
6.7%
4.2%
7.8%
4.5%
2.9%
8.4%
6.7%
3.3%
5.6%
7.6%
National total transplant patients: 306,878
Source of data: EQRS May 2024



National total ESRD Medicare-certified kidney transplant facilities: 229
Source of data: EQRS May 2024

successful
partnership
contract
negotiating
concessions
agree
mutual
compromising
acceptance
compromised
mediation
settlement
agreement
understanding
argument
negotiation
argue
communication
negotiate
relationship
tolerance
handshake
compromise
business
meeting
deal
demand
give
give up
benefit
balance
dispute
discussion
truce
debate
discuss
cooperation
arrangement
success
resolve
problem
settle
pact
conflict
solution
adjustment
strategy
share
beneficial
risk

Transplant Waitlist & Transplanted Quality Improvement Activity
May 2023 - April 2024

Network Goals

- Achieve an increase in the number of patients added to the transplant waiting list in the Network service area by at least 9%.
- Achieve a 12% increase in the number of patients receiving a kidney transplant.

Project Participants

Project participants in the 2023-2024 project included 513 dialysis and 19 transplant centers with a cohort focus group of approximately 34 dialysis facilities consisting of mid-level and low-level performers. Midwest Kidney Network worked with low performing facilities to provide technical assistance, and with high performing facilities to collect best practices to share with all facilities.

Patient Engagement

Patient subject matter experts (SMEs) provided input into the project shape and direction through participation on the Transplant Advisory Committee, evaluating project activities and sharing their expertise and experience through the Consumer Committee. Patient SMEs also contributed to educational tools related to modality education and transplant, including a care partner pamphlet entitled *Guide for Care Partners: Caring for those that care for you and those that you care for*.

Health Equity

Midwest Kidney Network analyzed and reviewed data on disparities in transplantation, identifying key areas for improvement. The Network reviewed key findings with the Transplant Advisory Group and identified topics for focus and strategies that addressed race, language, and socio-economic issues.

Interventions

Midwest Kidney Network incorporated best practices from previous years as well as a variety of new strategic interventions to enhance working relationships between dialysis facilities and kidney transplant centers as well as Transplant Readiness for actively listed patients. We promoted best practices to support patient education and patient transition from transplant referral to transplant waitlist. Results-oriented interventions included the following activities:

- Utilized a root cause analysis from cohort facilities in the Network 11 project to determine facility specific challenges to referral and active waitlisting to develop focused PDSA cycles.

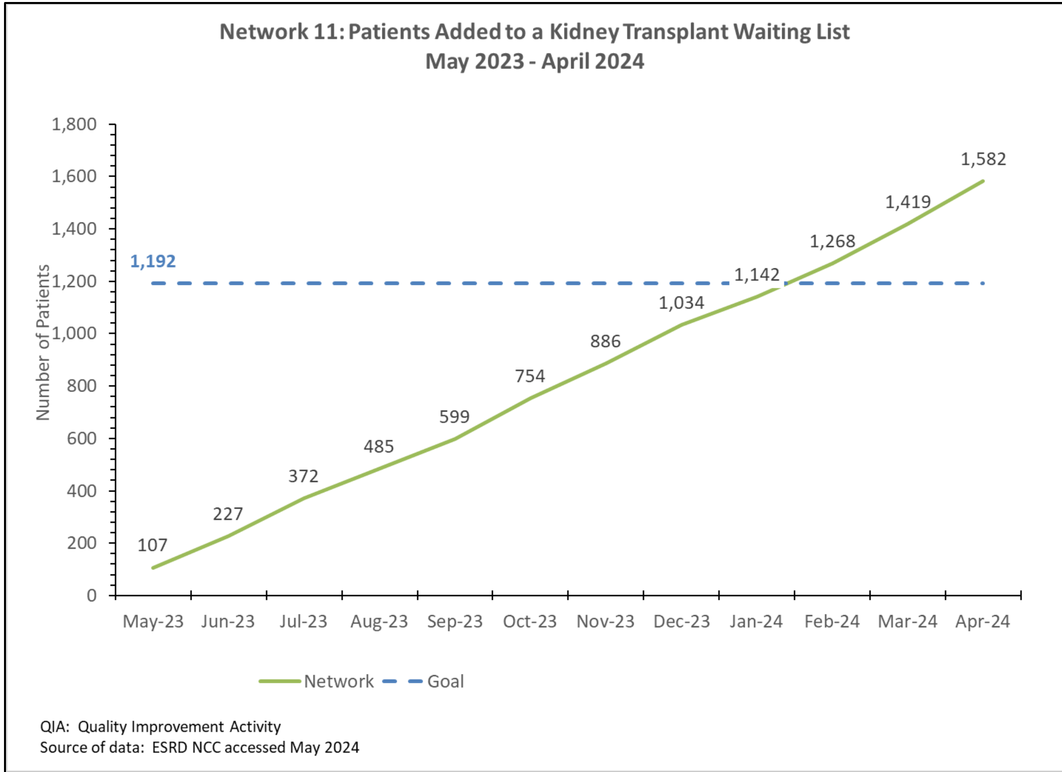
- Utilized the ESRD National Coordinating Center (NCC) Transplant Change Package as a foundation for ongoing improvement to be used for best practices and strategies for pivoting during 6-month PDSA cycle for interventions not showing success.
- Provided education on the quality improvement process as appropriate, establishing a PDSA plan for selected facilities that addressed specific challenges in their RCA which included but not limited to: communication between dialysis staff & transplant centers, patient challenges moving to referral and navigating waitlist requirements, financial barriers, transportation and attending required appointments.
- Technical assistance calls were convened monthly to facilitate 1:1 support for data review, intervention evaluation, and strategic plan to continue, abandon and/or add addition interventions to enhance progress toward goals.
- Best Practices identified and shared:
  - Improving communication flow through a variety of methods including transplant staff attending QAPI meeting and more focused discussion on patients not referred or struggling through evaluation process. Facility created forms that were working successfully were shared with other facilities for creation & utilization. During the PDSA cycle, faxed patient progress reports were found to vary from center to center and some were found to be ineffective in meeting patient and/or staff needs. Pivoting the approach, we worked with the transplant centers and facilities staff to identify "must have content" which includes patient status report, where they were in process toward active listing, contact person & direct contact number as well as next steps in process. Facilities could add content to current document or develop a new template. Selected facilities asked to share new forms with the Network 11 staff for review and best practices. This best practice has been shared and is now being utilized successfully in select centers using faxed reports.
  - Standardizing monthly reports from transplant centers to dialysis centers and promoting sharing of electronic medical record transplant section. This is being utilized successfully by multiple providers.
  - Increasing education and support for engaging patients in living donation. Peer Mentoring resources were shared with facilities and transplant centers to utilize the opportunity for education and peer mentors for patients considering transplant. Also incorporated input from Consumer Committee (PAC) patient SMEs to shape this activity.
  - Increase education to address hesitancy in the acceptance of high KDPI kidneys for both healthcare staff and patients; resources from the United Network for Organ Sharing (UNOS) and the ESRD NCC were shared.
    What is KDPI? A new animation for patients explains the kidney donor profile index - UNOS
    Learn about KDPI - OPTN (hrsa.gov)
  - Technical assistance calls to low-mid performing facilities to discuss specific RCA and implement or follow-up on current facility specific report (data) and brainstorm new strategies for rapid cycle improvement for PDSA cycle.
  - Incorporated the patient SME voice to support the shape and direction of the project with resources from the Network 11 Consumer Committee (PAC) and SME participation on the Advisory Group.

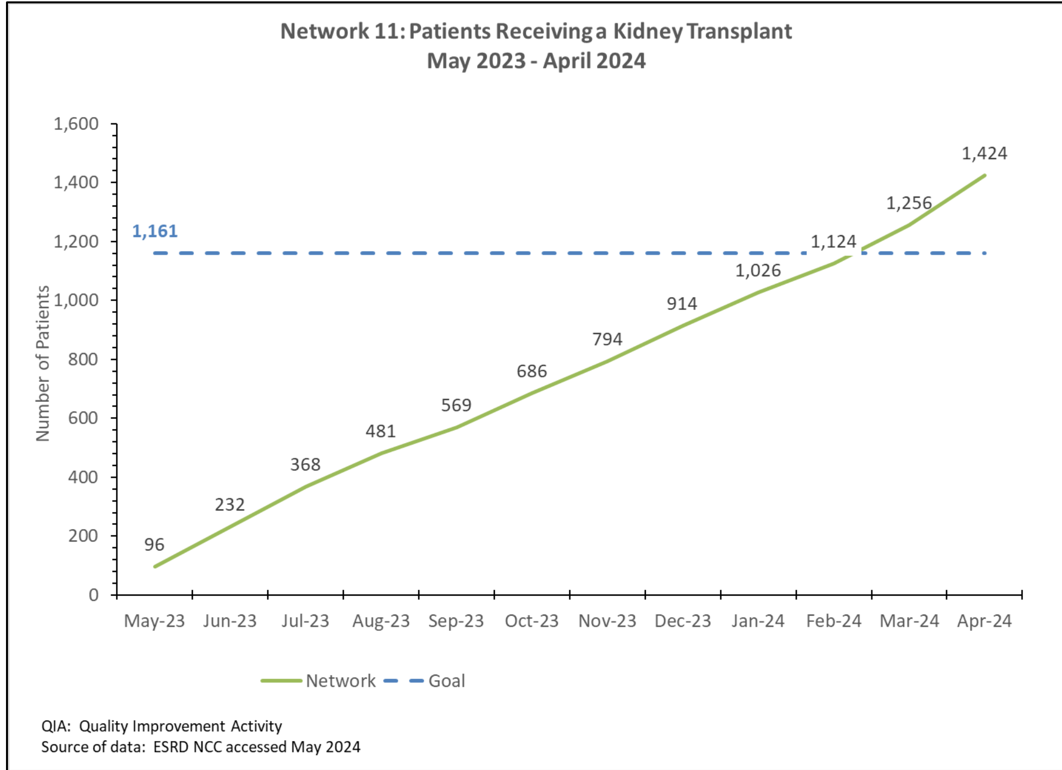
- Attended bi-monthly calls with the 4 Organ Procurement Organizations (OPOs) in the Network 11 region to discuss current challenges and initiatives.
- Shared the *Top of the List* process as a best practice resource (developed by a transplant center in the Network 11 area) to promote transplant readiness for actively listed patients that may be called for a kidney soon. Leaders from the transplant center, which developed the Top of the List process, were invited to present this best practice at the 2024 Annual CMS Quality Conference.
- Shared the Transplant Readiness Form created by Network 11.
- Convened calls with the National Kidney Foundation of Minnesota to discuss common goals in transplantation and identify areas of potential collaboration.
- Provided monthly facility-specific reports to each facility for review of progress towards project goals.

Midwest Kidney Network continues to work with dialysis facilities and transplant centers on all successful strategies and identify areas for continued improvement on both transplant goals.

Results

- From May 2023 through April 2024, 1,582 patients in the Midwest Kidney Network region were added to the kidney transplant waitlist, exceeding the goal of 1,192 patients.
- The number of patients in the Network 11 region who received a kidney transplant progressed to 1,424, exceeding the goal of 1,192 patients.
- The Network achievement for waitlisting was 10% higher than the national average and the Network achievement for patients receiving a kidney transplant was 13% higher than the national average.


Network 11: Patients Added to a Kidney Transplant Waiting List
May 2023 - April 2024
Number of Patients
1,800
1,600
1,400
1,200
1,000
800
600
400
200
0
1,192
107
227
372
485
599
754
886
1,034
1,142
1,268
1,419
1,582
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
Network
Goal
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024


Network 11: Patients Receiving a Kidney Transplant
May 2023 - April 2024
Number of Patients
1,600
1,400
1,200
1,000
800
600
400
200
0
1,161
96
232
368
481
569
686
794
914
1,026
1,124
1,256
1,424
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
Network
Goal
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024

Home Therapy (Incident & Transition to Home) Quality Improvement Activity May 2023-April 2024

Network Goals

- Increase the number of incident ESRD patients starting dialysis using a home modality by at least 30%, from a baseline of 1061 patients to a goal of 1379 patients.
- Increase the number of prevalent ESRD patients moving to a home modality by at least 12%, from a baseline of 1908 patients to a goal of 2137 patients.

Project Participants

The 2023-2024 project included all dialysis facilities in the Midwest Kidney Network region.

Patient Engagement and Health Equity

Patients across the Network 11 service area shaped the direction of this project by supporting the development of educational tools and interventions and utilizing the most recent ESRD National Coordinating Center's Home Dialysis Change Package. Patients helped identify key focus areas such as ongoing modality education and sharing patient experiences with each modality choice. We continue to share the patient-centered booklet *My Life, My Choice* which outlines patient specific experiences with different modalities including home hemodialysis and peritoneal dialysis. Patient SMEs also contributed to educational tools related to modality education through a video entitled "What I Wish I Knew," which is a composition of patients sharing their experiences and advice to other kidney patients. We analyzed urban/rural, gender, race, and socioeconomic status to identify potential health inequities in home dialysis access and care. Our first cohort of units included rural facilities that were located at a geographically long distance from their referred patients, to evaluate barriers. Our third cohort of facilities was invited to join Project ECHO.

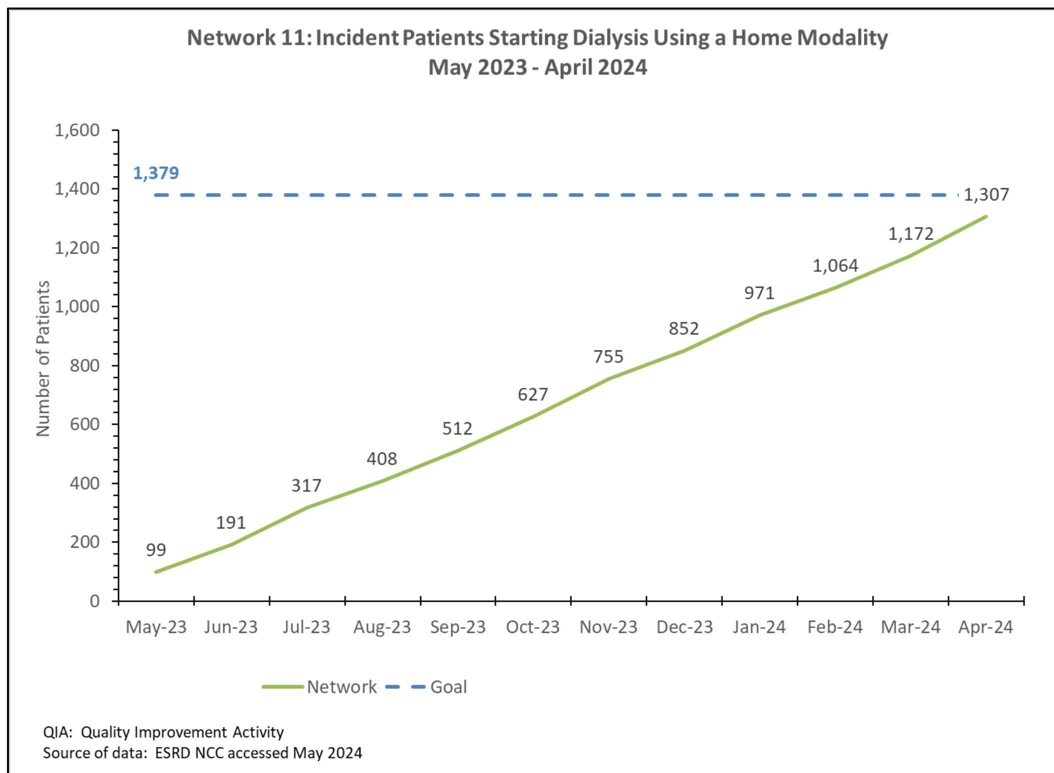
Interventions

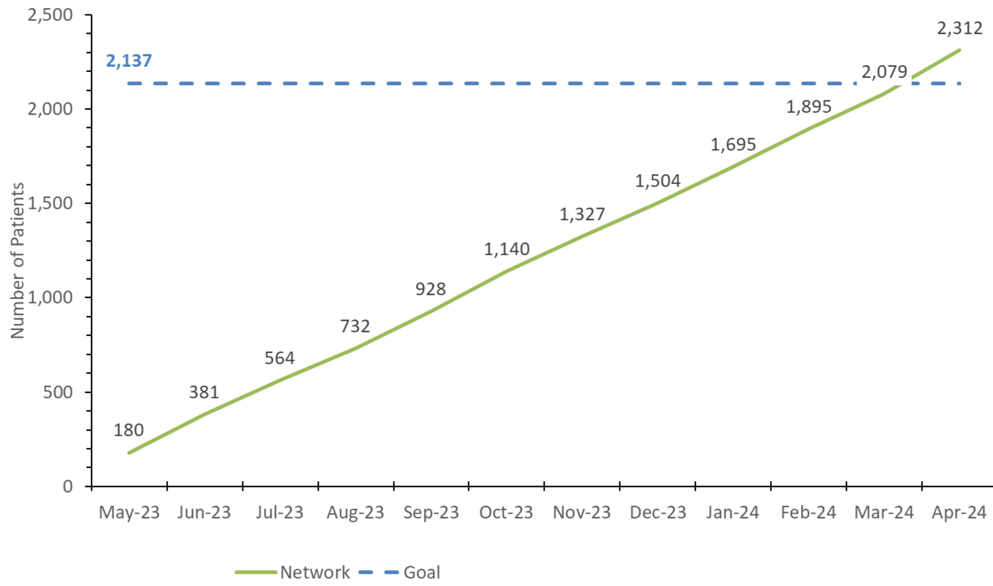
- Developed a coalition of experts to guide the planning and development of interventions for the project. The coalition included empowered patients, nephrologists, nurses in home dialysis and incenter hemodialysis units, providers of home dialysis in skilled nursing facilities, local experts, and educators. The Coalition reviewed all plans for our cohorts prior to start and again to evaluate data from each group.
- Utilized the updated 2023 ESRD NCC Home Dialysis Change Package to guide the projects.
- Participated in Project ECHO Home Dialysis, an NKF initiative, which involved case studies and didactic presentations twice per month on a variety of home dialysis topics.
- Focused activities included: promoted the use of a Home Dialysis Champion and distributed a sample job description to facilities, Home for the Holidays project, and utilization of Medical Education Institute (MEI) tools including the Match-D tool and the My Kidney Life Plan.

- Promoted patient-created educational resources from the ESRD National Coordinating Center and other stakeholders.

Results

- From May 2023 to April 2024, 1,307 incident patients in the Midwest Kidney Network region started dialysis using a home modality, working towards the goal of 1379 patients.
- From May 2023 to April 2024, 2,312 in-center dialysis patients moved to a home modality, exceeding the goal of 2137 patients by 8%.
- Dialysis facilities participating in Project ECHO achieved a combined 22% increase from baseline in straight to home (incident) rates.




Network 11: Prevalent Patients Moving to a Home Modality
May 2023 - April 2024
2,137
2,500
2,000
1,500
1,000
500
0
Number of Patients
180
381
564
732
928
1,140
1,327
1,504
1,695
1,895
2,079
2,312
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
Network
Goal
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024

Influenza Vaccinations (Patient and Staff)
May 2023-April 2024

Network Goal

- Ensure a minimum of 90% of dialysis patients receive an influenza vaccination.
- Ensure a minimum of 90% of dialysis facility staff receive an influenza vaccination.

Project Participants

The 2023-2024 project included all dialysis facilities in the Midwest Kidney Network region.

Patient Engagement and Health Equity

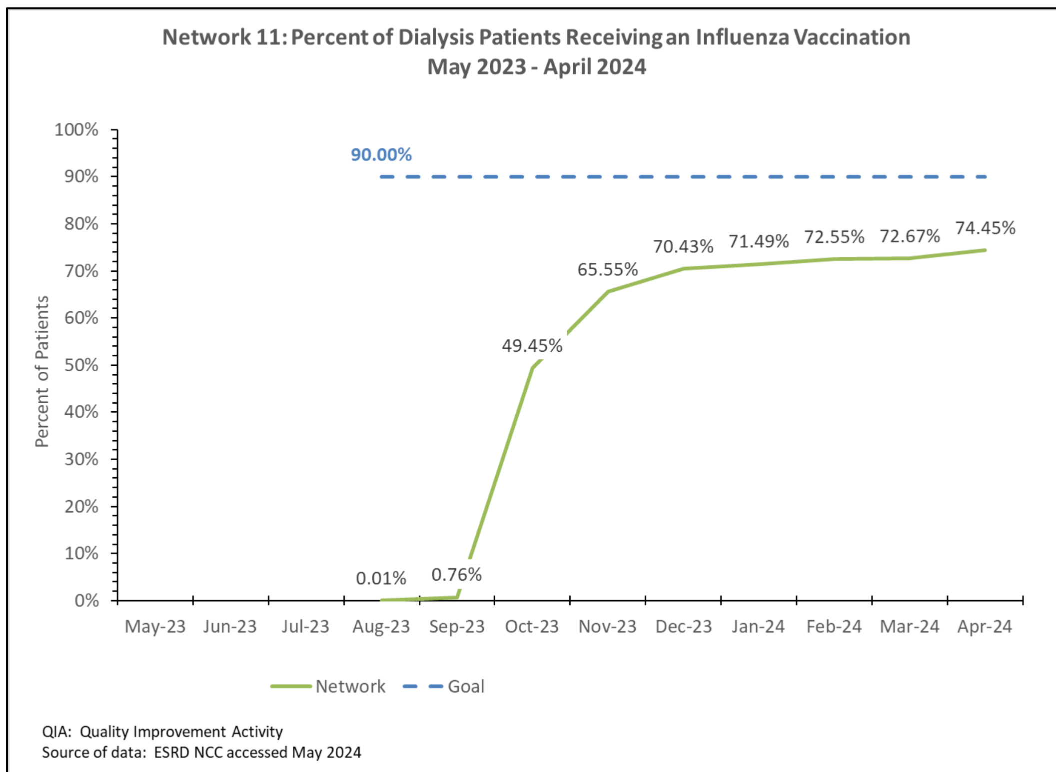
Patients across the Network 11 service area shaped the direction of this project by supporting the development of educational tools and interventions. Patients helped identify key focus areas and participated in the Midwest Kidney Network Advisory Groups and on the Consumer Committee. The Network utilized educational materials from the ESRD NCC NPFE-LAN vaccination group, including Get the Facts about the Flu Vaccine. Throughout the year, the Network promoted vaccine equity resources, including educational webinars on vaccination perspectives and strategies in different patient populations, and information on vaccination coverage for uninsured adults.

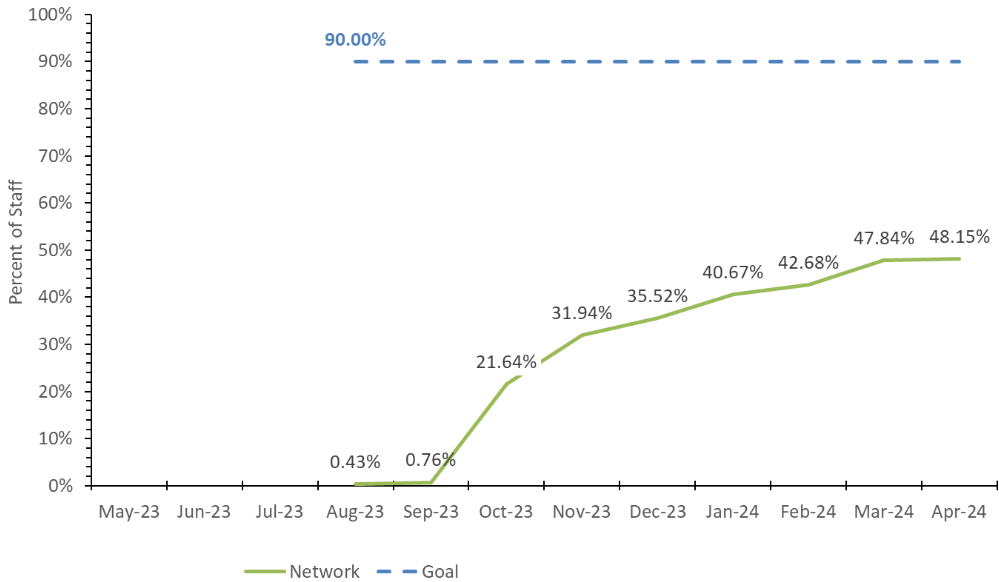
Interventions

- Encouraged facilities to create an influenza education bulletin board for their patients, the Network shared visuals of previous examples.
- Began an influenza education campaign in July and August in preparation of the seasonal vaccine season, and then disseminated updated Vaccination Information Sheets in September for the current year of influenza vaccine to every Network facility.
- Provided resources on the current CDC recommendations on influenza vaccination.
- Shared best practices during technical assistance calls and with cohort PDSA groups, using the ESRD NCC Vaccination Change Package and the Forum of ESRD Network's Vaccination Toolkit as a foundation, with specific intervention focus on utilizing a vaccine manager, completing immunization reconciliation, and ensuring accurate data entry.
- Pivoted educational focus to global respiratory health focus, rather than individual vaccine focus, and encouraged facilities to educate patients on protecting respiratory health through receipt of COVID, influenza, and pneumococcal vaccinations.
- With the release of the EQRS pneumococcal and influenza dashboards, instructed facilities on the use of dashboards for immunization reconciliation with the use of state registry and electronic health records to ensure accurate EQRS data.

Results

- From August 2023 through April 2024, Midwest Kidney Network achieved a patient influenza vaccination rate of 74.45% for patients, which is just slightly less than the national average of 78.33%
- The Network achieved a staff influenza vaccination rate of 48.15%, which is just below the national average of 48.56%.




Network 11: Percent of Dialysis Facility Staff Receiving an Influenza Vaccination
May 2023 - April 2024
100%
90%
80%
70%
60%
50%
40%
30%
20%
10%
0%
Percent of Staff
90.00%
0.43%
0.76%
21.64%
31.94%
35.52%
40.67%
42.68%
47.84%
48.15%
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
Network
Goal
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024

COVID-19 Vaccinations (Patients and Staff) May 2023-April 2024

Network Goals

- Ensure a minimum of 80% of dialysis patients are fully vaccinated for COVID-19.
- Ensure a minimum of 95% of dialysis facility staff are fully vaccinated for COVID-19.

Project Participants

The 2023-2024 project included all dialysis facilities in the Midwest Kidney Network region, with focused cohort technical assistance to selected facilities not meeting the vaccination goals across all vaccination metrics.

Patient Engagement and Health Equity

Patients across the Network 11 service area shaped the direction of this project by supporting the development of educational tools and interventions. The Network utilized and promoted patient produced materials, including the ESRD NCC's COVID-19 Vaccination Patient Stories created by the NPFE-LAN vaccination group. Throughout the year, the Network promoted vaccine equity resources, including educational webinars on vaccination perspectives and strategies in different patient populations, and information on vaccination coverage for uninsured adults.

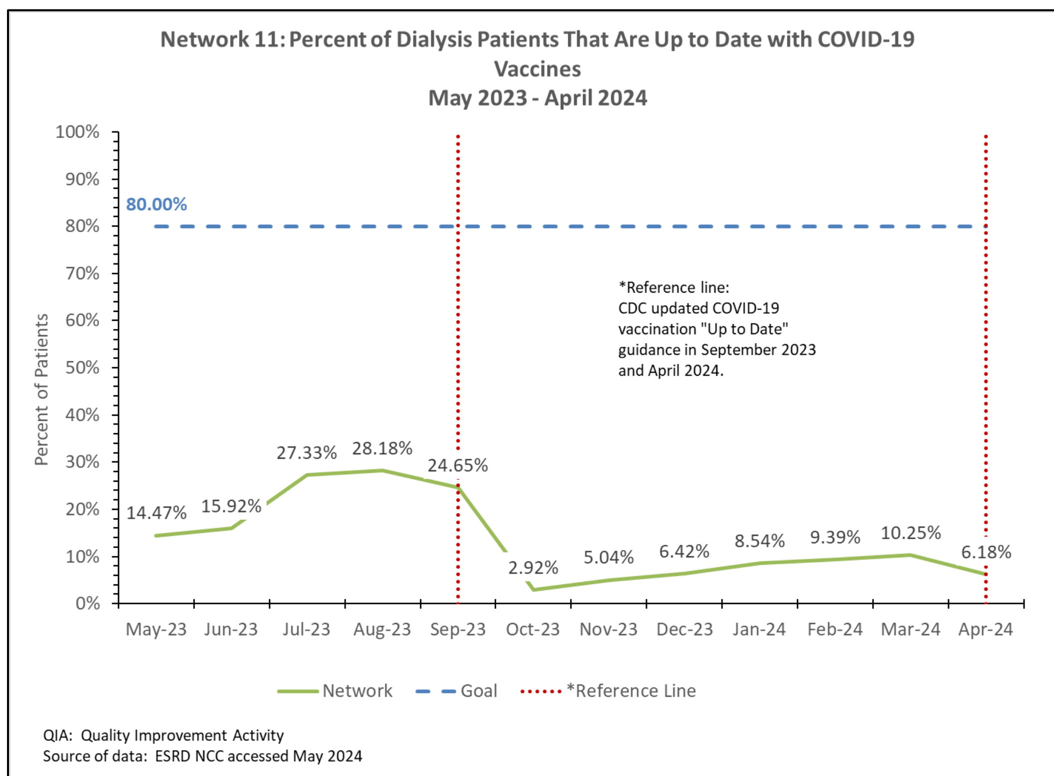
Interventions

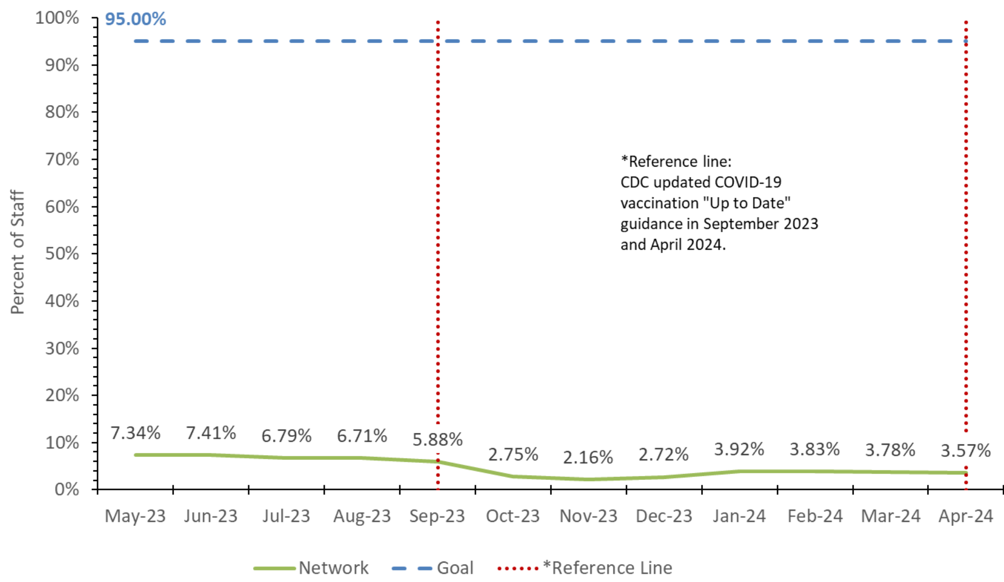
- Frequently shared CDC recommendations and education, as well as updated guidance with all Network 11 facilities.
- Promoted all relevant CDC COCA calls and distributed key slides with pertinent information to facilities after the calls.
- Shared best practices during technical assistance calls and with cohort PDSA groups, using the ESRD NCC Vaccination Change Package as a foundation, with specific intervention focus on utilizing a vaccine manager, completing immunization reconciliation, and ensuring accurate data entry.
- Focused technical assistance targeting facilities with high numbers of COVID unknown status to complete correct data entry in NHSN.
- Shared updated guidance on COVID vaccination data entry into NHSN to ensure data integrity. Collaborated with quality managers of regional chains to improve vaccination data integrity, and then spread this successful practice to larger dialysis organization leadership.
- Convened monthly state-specific Network calls to discuss trends in respiratory illness, identify challenges in vaccination, educate on updated vaccination recommendations, and discuss other changes and challenges with the ending of the public health emergency.

- Pivoted strategy in 2024 to focus on respiratory health and discussion of all applicable vaccinations rather than individual vaccination projects, which aligned with change in CDC's approach.

Results

- From May 2023 through April 2024, Midwest Kidney Network's rate of patients fully vaccinated for COVID-19 progressed to 6.18%, which is just above the national average of 6.17%.
- The Network's rate of dialysis facility staff fully vaccinated for COVID-19 progressed to 3.57%, which is just slightly below the national average of 3.67%.




Network 11: Percent of Dialysis Facility Staff That Are Up to Date with COVID-19 Vaccines
May 2023 - April 2024
100%
90%
80%
70%
60%
50%
40%
30%
20%
10%
0%
Percent of Staff
95.00%
*Reference line:
CDC updated COVID-19 vaccination "Up to Date" guidance in September 2023 and April 2024.
7.34%
7.41%
6.79%
6.71%
5.88%
2.75%
2.16%
2.72%
3.92%
3.83%
3.78%
3.57%
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
Network
Goal
*Reference Line
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024

Pneumococcal Vaccinations May 2023-April 2024

Network Goals

Achieve an increase in the percentage of dialysis patients that are fully vaccinated for pneumococcal pneumonia in the Network service area by at least 7%.

Project Participants

The 2023-2024 project included all dialysis facilities in the Midwest Kidney Network region.

Patient Engagement and Health Equity

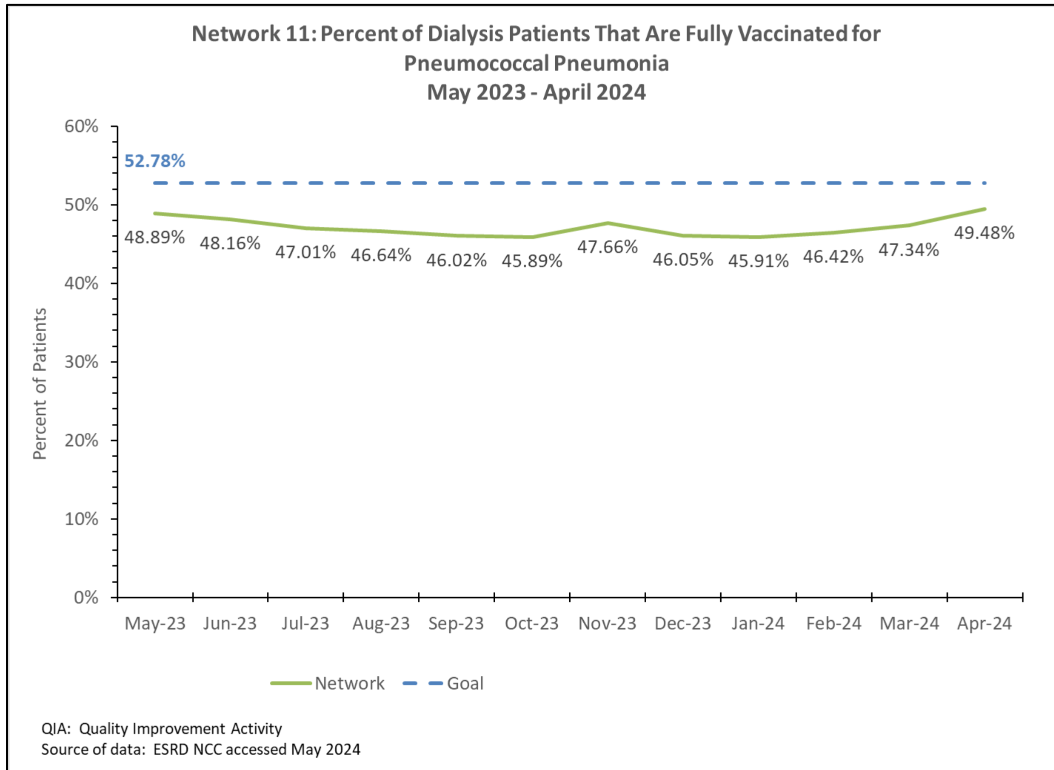
Patients across the Network 11 service area shaped the direction of this project by supporting the development of educational tools and interventions. Patients helped identify key focus areas and participated in the Midwest Kidney Network Advisory Groups and on the Consumer Committee (PAC). The Network utilized educational materials from the ESRD NCC NPFE-LAN vaccination group, including Get the Facts about the Pneumonia Vaccine Throughout the year, the Network promoted vaccine equity resources, including educational webinars on vaccination perspectives and strategies in different patient populations, and information on vaccination coverage for uninsured adults.

Interventions

- We began promoting pneumonia vaccinations in June and continued to reach-out to select facilities based on monthly data analysis for discussion on vaccination management, tracking and follow-up, including education on the PCV20.
- Routinely provided CDC pneumococcal algorithm and mobile application to the cohort, as well as on group calls with demonstration of dashboard
- Shared best practices during technical assistance calls and with cohort PDSA groups, using the ESRD NCC Vaccination Change Package and the Forum of ESRD Network's Vaccination Toolkit as a foundation, with specific intervention focus on utilizing a vaccine manager, completing immunization reconciliation, and ensuring accurate data entry.
- Pivoted educational focus to global respiratory health focus, rather than individual vaccine focus, and encouraged facilities to educate patients on protecting respiratory health through receipt of COVID, influenza, and pneumococcal vaccinations.
- With the release of the EQRS pneumococcal and influenza dashboards, instructed facilities on the use of dashboards for immunization reconciliation with the use of state registry and electronic health records to ensure accurate EQRS data.

Results

From May 2023 to April 2024, the percent of patients in the Midwest Kidney Network region receiving a pneumococcal pneumonia vaccine progressed from the baseline of 49.33% to 49.48%, working towards the goal of 52.78%



Data Quality (2728 Forms Over 1 Year, CMS Form 2728, CMS Form 2746) May 2023-April 2024

Network Goal

- Achieve a 1% increase in the number of incomplete initial CMS-2728 forms that are over one (1) year old, that are completed and submitted.
- Achieve a 4% increase in the rate of CMS 2728 forms from dialysis facilities submitted within 45 days of the start date at the facility.
- Achieve a 9% increase in the rate of CMS 2746 forms from dialysis facilities submitted within 14 days of the date of death.

Project Participants

The 2023-2024 Data Quality Measures project included all dialysis facilities in the Network 11 five-state region.

Interventions

Midwest Kidney Network staff completed the following interventions to support facility movement towards Data Quality Measures goals.

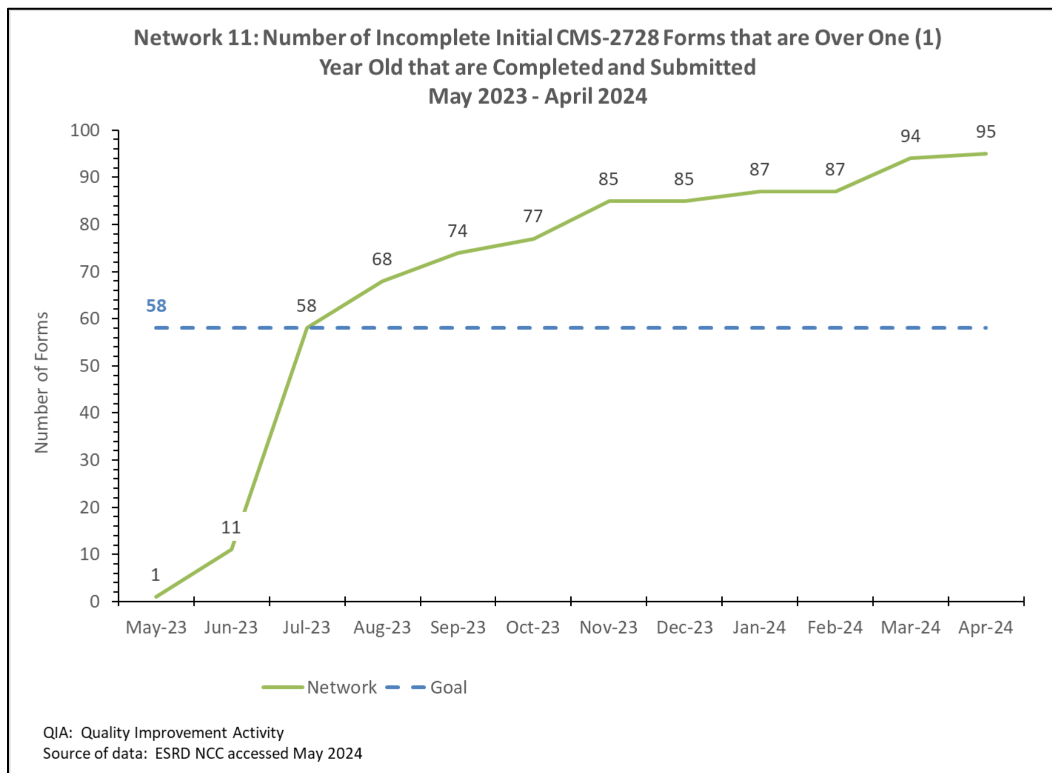
- Provided EQRS & CMS form technical assistance to all providers on an on-demand basis. Dialysis facility and transplant unit staff were able to contact Network 11 staff to resolve any EQRS technical issue, question, or concern Monday through Friday 8:00am – 5:00pm. A total of 3,387 EQRS and CMS form technical assistance events were conducted throughout the year.
- Continuing with our previous years' efforts, Network staff updated and distributed monthly *Data Quality Measures Facility Specific Reports*, which provided the facility administrator with detailed information about the facility's data and progress-to-date toward each measure's goal.
- Completed a total of 1,136 phone calls and 2,499 faxed reminders to dialysis facilities regarding upcoming due dates for CMS 2728 & 2746 forms.
- Resolved 7,144 data discrepancies in EQRS, resulting in greater data integrity of the database.
- Conducted two Data Quality Measures cohort cycles. Each cohort was focused on a Root Cause Analysis and mitigation of barriers with rapid cycle improvement initiatives at the facility level.
- Held a CMS Form Advisory group and gathered best practices on timely CMS form submission. The gathered best practices were then shared with cohort participants and all EQRS users.
- Provided live and recorded educational trainings including *EQRS Management for Dialysis Facility Administrators*, which provided specific tools and guidelines for effective EQRS data management & CMS form timeliness from the administrator perspective.

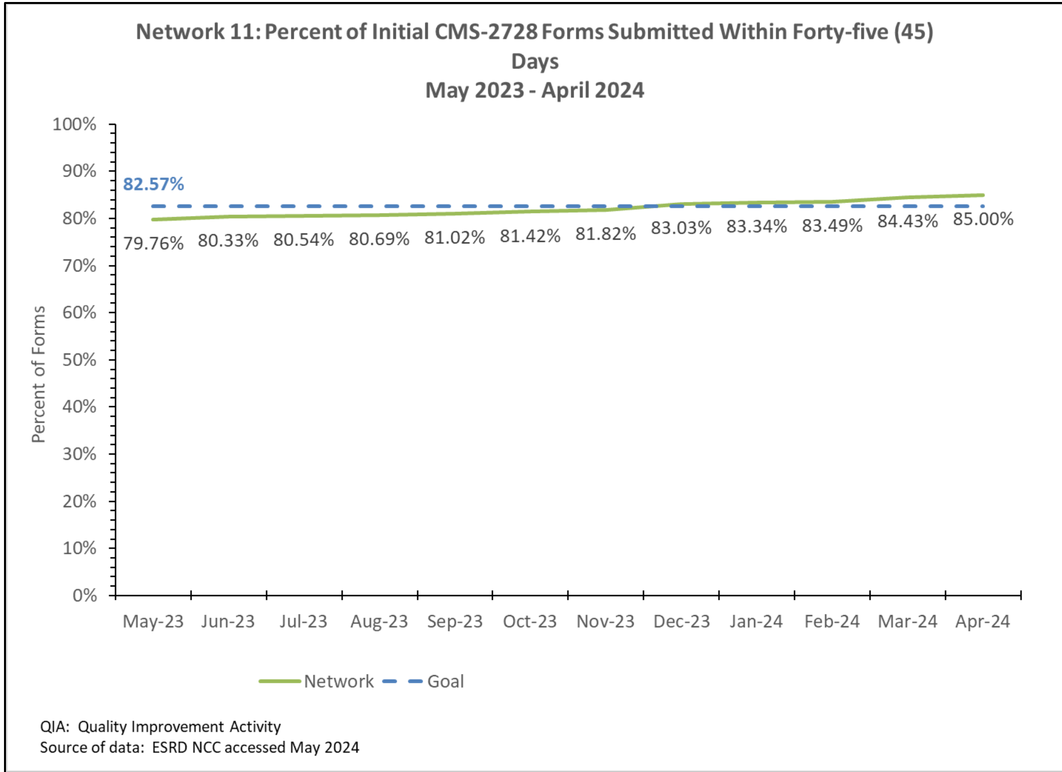
- Distributed the *Help for the Holidays* postcard to all facilities in November 2023 to offer additional assistance and support to facilities during the holiday season.

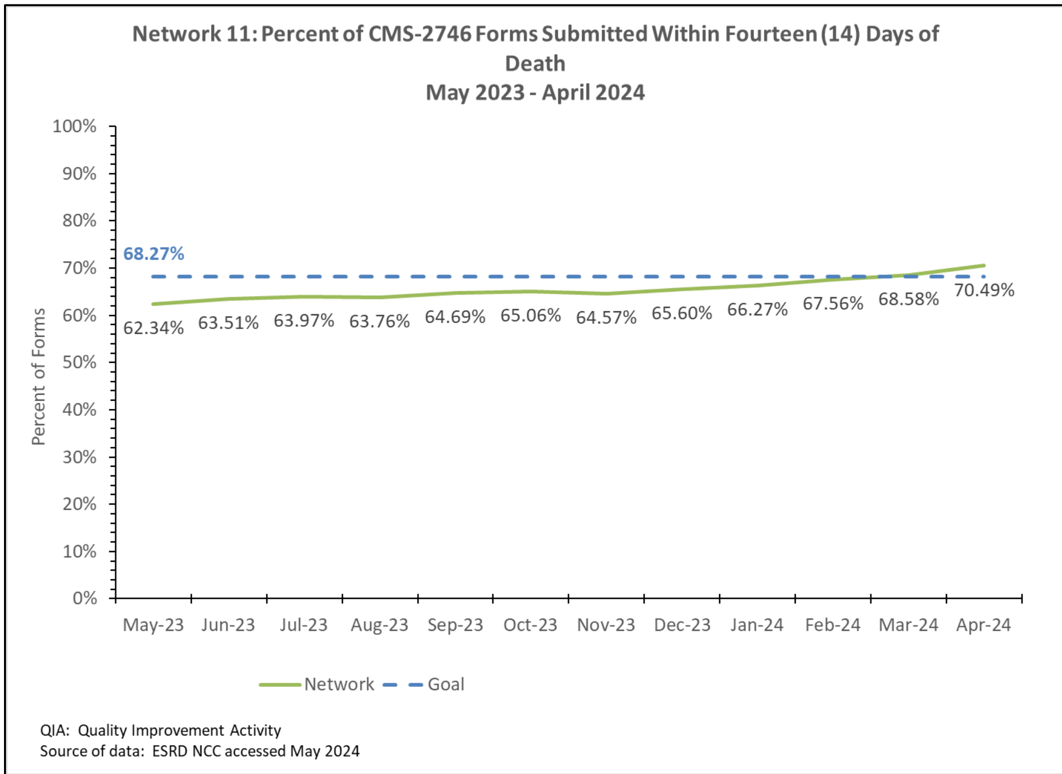
Results

Midwest Kidney Network all Data Quality Measures goals for 2023-2024.

- The Network's number of incomplete initial CMS-2728 forms over one (1) year old, that are completed and submitted, exceed goal by 37 forms reconciled.
- The Network's rate of CMS-2728 forms submitted within 45 days increased to 85% timeliness, exceeding the goal of 82.57%.
- The Network's rate of CMS-2746 forms submitted within 14 days increased to 70.49% timeliness, exceeding the goal of 68.27%.




Network 11: Percent of Initial CMS-2728 Forms Submitted Within Forty-five (45) Days
May 2023 - April 2024
100%
90%
80%
70%
60%
50%
40%
30%
20%
10%
0%
Percent of Forms
82.57%
79.76%
80.33%
80.54%
80.69%
81.02%
81.42%
81.82%
83.03%
83.34%
83.49%
84.43%
85.00%
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
Network
Goal
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024


Network 11: Percent of CMS-2746 Forms Submitted Within Fourteen (14) Days of Death
May 2023 - April 2024
100%
90%
80%
70%
60%
50%
40%
30%
20%
10%
0%
Percent of Forms
68.27%
62.34%
63.51%
63.97%
63.76%
64.69%
65.06%
64.57%
65.60%
66.27%
67.56%
68.58%
70.49%
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
Network
Goal
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024

Hospitalization (Inpatient Admissions, ED Visits, Readmissions)
May 2023-April 2024

Network Goals

- Achieve a decrease in the rate of hospital admissions for a diagnosis on the Primary Diagnosis Categories in the Network service area by at least 4%, from a baseline of 1.90 to a goal of 1.82 admissions per 100 patient months.
- Achieve a decrease in the rate of outpatient emergency department visits for a diagnosis on the Primary Diagnosis Categories in the Network service area by at least 4%, from a baseline of .87 to a goal of .83 ED visits per 100 patient months.
- Achieve a decrease in the rate of hospital 30-day unplanned readmissions for a diagnosis on the Primary Diagnosis Categories in the Network service area by at least 4%, from a baseline of 8.20% to a goal of 7.87% of discharges.

Project Participants

All dialysis providers in the Midwest Kidney Network service area participated in the project in 2023-2024, with lower performing facilities recruited throughout the year for participation in a 4-month PDSA cycle workplan to address one or more of the project goals. After the first quarter, we extended the PDSA cycle from 4 months to 6 months due to a longer time period required to implement and sustain change to impact hospitalization metrics.

Patient Engagement and Health Equity

Patients across the Network 11 service area shaped the direction of this project by supporting the development of educational tools and interventions and giving insight to barriers. Patients helped identify key focus areas such as providing education on helpful hints to managing fluid restrictions and attending all dialysis treatments. Midwest Kidney Network analyzed unique needs impacting rates in rural versus urban areas and continues to develop strategies to address social determinants of health and their influences on hospitalization, readmissions, and emergency department usage, including promoting the use of a social determinants of health screening tool to identify unmet needs impacting patients' healthcare usage.

Interventions

Midwest Kidney Network utilized various strategies to develop tailored interventions based on a facility's unique needs. We promoted root cause analysis to understand the factors leading to hospitalization and emergency department usage and promoted best practices to address transitions of care. Results-oriented interventions included the following activities:

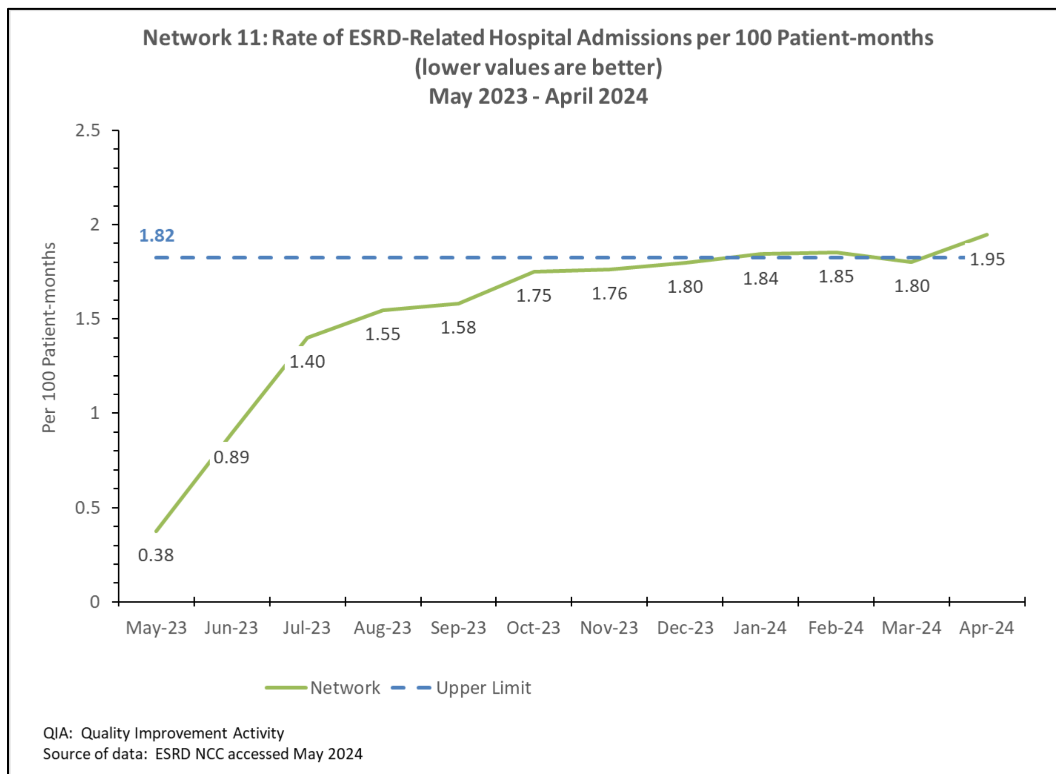
- Analyzed hospitalization data and facilities for PDSA cycle participation for each of the 3 goals in the project. Facilities received a 6-month work plan and tailored monthly technical assistance specific to their needs, as well as facility rate trends over time to

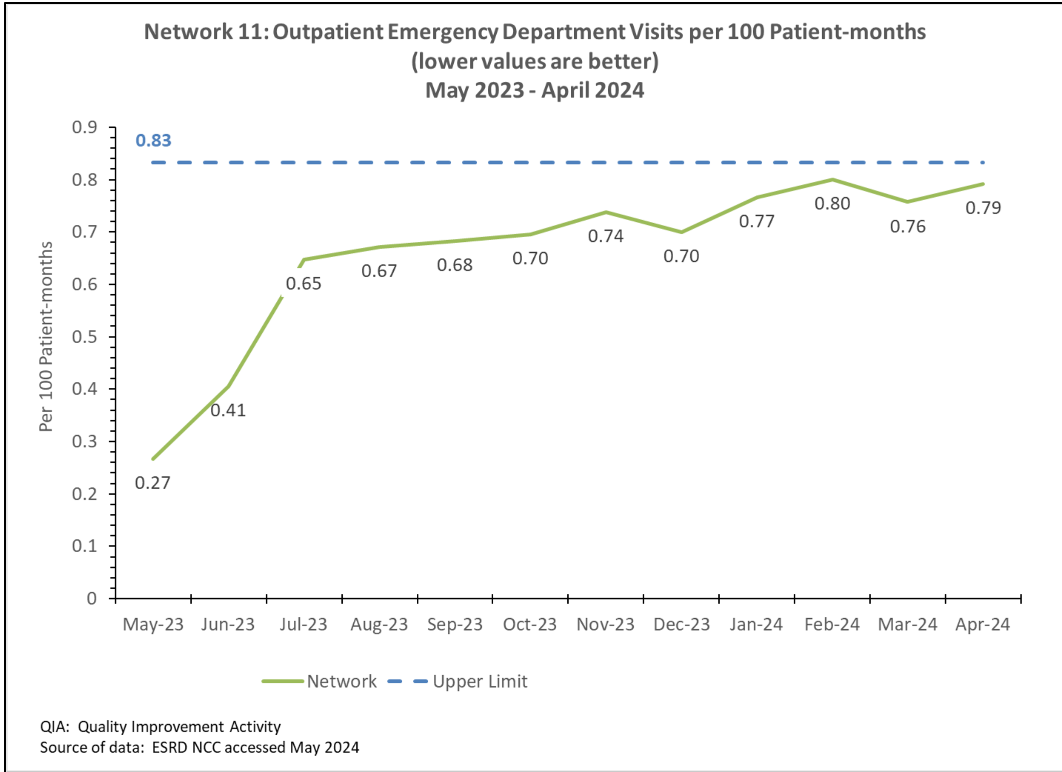
support project participation, while utilizing the ESRD NCC's Hospitalization Change Package and the Forum of ESRD Network's Transitions in Care Toolkit as a foundation.

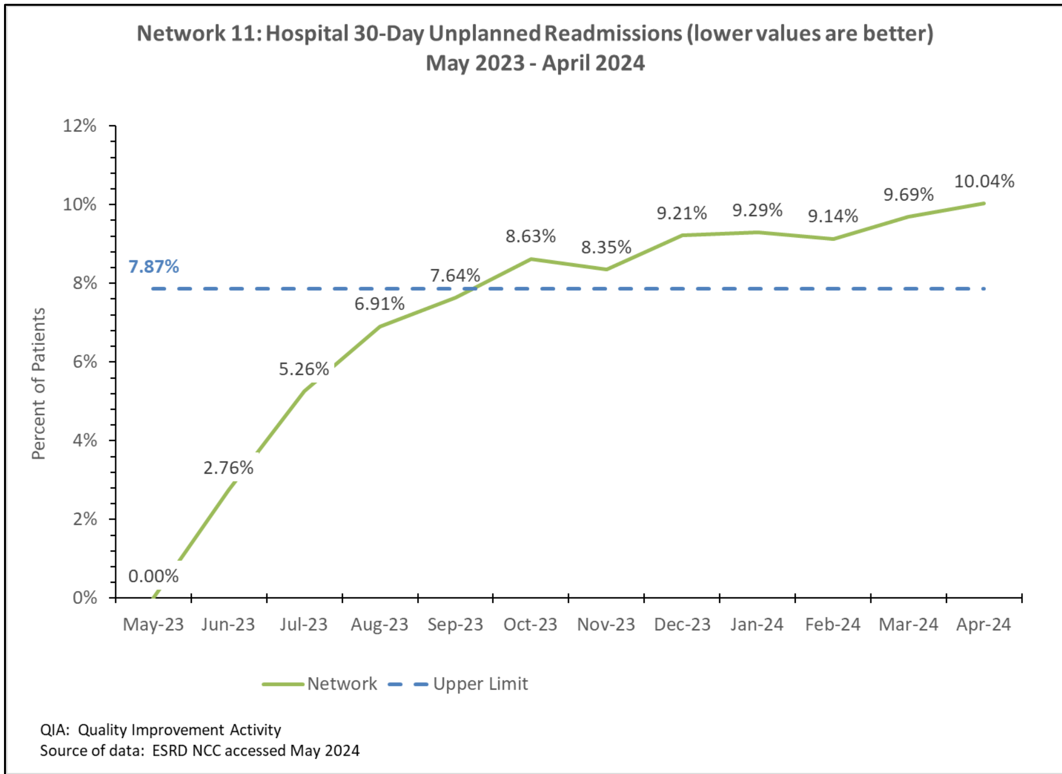
- Convened quarterly meetings with the hospitalization Advisory Group, which was comprised of nephrologists, nurses, social workers, dietician, and patient subject matter experts to identify challenges, discuss best practices, review Network 11 data, and shape the project interventions. The Advisory Group was updated on the project between meetings to garner feedback on which project strategies to abandon or adopt, and to seek insight into new ideas for innovative mitigation strategies.
- Collaborated with the Infection Control Assessment and Response (ICAR) teams from each of the 5 Network states to establish working partnerships and plan for future collaborations. Educated on and promoted ICAR visits with all facilities with high infection and sepsis hospitalization rates. Presented at infection control conferences in Michigan and North Dakota during the contract year. Began collaboration with Project Firstline of Minnesota to further support this infection prevention work.
- Collaborated with Superior Health Quality Alliance on implementation of a Sepsis Improvement Sprint with the target audience of hospitals, dialysis facilities, skilled nursing facilities, and home health care agencies. Developed a Dialysis Sepsis Gap Analysis Tool, Sepsis Screening Tool, and Sepsis Resources Toolkit based on best practices and other pertinent resources to guide dialysis sprint participants through the QI steps to identify sepsis early and refer as needed. Presented the Sprint project at a poster session at the 2024 Annual CMS Quality Conference.
- Collaborated with Networks 3, 4, and 5 to create a patient education Fluid Management Workbook and missed treatment micro-learn video. The pilot of the intervention was completed in 2024, and utilized patient feedback for development, implementation, and edits prior to final product completion.
- Shared best practices and education on factors impacting hospitalization rates each month via email to all Network 11 facilities, as well as convened open office hours for facilities to provide feedback and collaborate across organizations.
- Collaborated with Great Plains QIN to provide coaching to organizations with ESRD patients who are high utilizers of the hospital due to inpatient admissions or emergency department visits.
- Continued to utilize the Network's Transitions in Care Assessment from the previous year's Reducing Readmissions Improvement Sprint and provided a Reducing Readmissions Resource Toolkit.
- Provided coaching on best practices in vascular access management and facilitated improving communication with local vascular access surgery centers to reduce admissions and ER visits related to vascular access complications.
- Promoted all ESRD NCC Hospitalization LAN calls to the cohort and all Network facilities via the Network E-news.

Results

- From May 2023 to April 2024, Midwest Kidney Network's rate of hospital admissions was 1.95 admissions per 100 patient months, working towards the goal of 1.82 admissions per 100 patient months.
- The Network met the outpatient emergency department visit's goal with a rate of .79 visits per 100 patient months.
- The Network's rate of hospital 30-day unplanned readmissions goal was 10.04%, working towards the goal of 7.87%.




Network 11: Outpatient Emergency Department Visits per 100 Patient-months
(lower values are better)
May 2023 - April 2024
Per 100 Patient-months
0.83
0.27
0.41
0.65
0.67
0.68
0.70
0.74
0.70
0.77
0.80
0.76
0.79
May-23 Jun-23 Jul-23 Aug-23 Sep-23 Oct-23 Nov-23 Dec-23 Jan-24 Feb-24 Mar-24 Apr-24
Network
Upper Limit
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024


Network 11: Hospital 30-Day Unplanned Readmissions (lower values are better)
May 2023 - April 2024
Percent of Patients
7.87%
0.00%
2.76%
5.26%
6.91%
7.64%
8.63%
8.35%
9.21%
9.29%
9.14%
9.69%
10.04%
May-23 Jun-23 Jul-23 Aug-23 Sep-23 Oct-23 Nov-23 Dec-23 Jan-24 Feb-24 Mar-24 Apr-24
Network
Upper Limit
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024

Nursing Home (Blood Transfusion, Catheter Infection, and Peritonitis) May 2023-April 2024

Network Goals

- Achieve a decrease in the rate of blood transfusions in ESRD patients dialyzing in a nursing home by at least 3%, from a baseline of 5.77 to a goal of less than 5.60 blood transfusions per 100 patient months.
- Achieve a decrease in the rate of hemodialysis catheter infections in dialysis patients receiving home dialysis within nursing homes by at least 6%, from a baseline of 0.956 to a goal of less than 0.899 hemodialysis catheter infections per 100 patient months.
- Achieve a decrease in the rate of incidence of peritonitis in dialysis patients receiving home dialysis within nursing homes by at least 3%, from a baseline of 1.124 to a goal of less than 1.090 peritonitis infections per 100 patient months.

Project Participants

All dialysis facilities in the Midwest Kidney Network service area which provide dialysis treatments within a nursing home setting participated in the project in 2023-2024.

Patient Engagement and Health Equity

Patients across the Network 11 service area shaped the direction of this project by sharing perspectives on the benefits of home hemodialysis and peritoneal in the skilled nursing facility (SNF) setting through the Home Dialysis Coalition as well as input from the Consumer Committee (PAC).

Intervention

Midwest Kidney Network incorporated a variety of strategic interventions including:

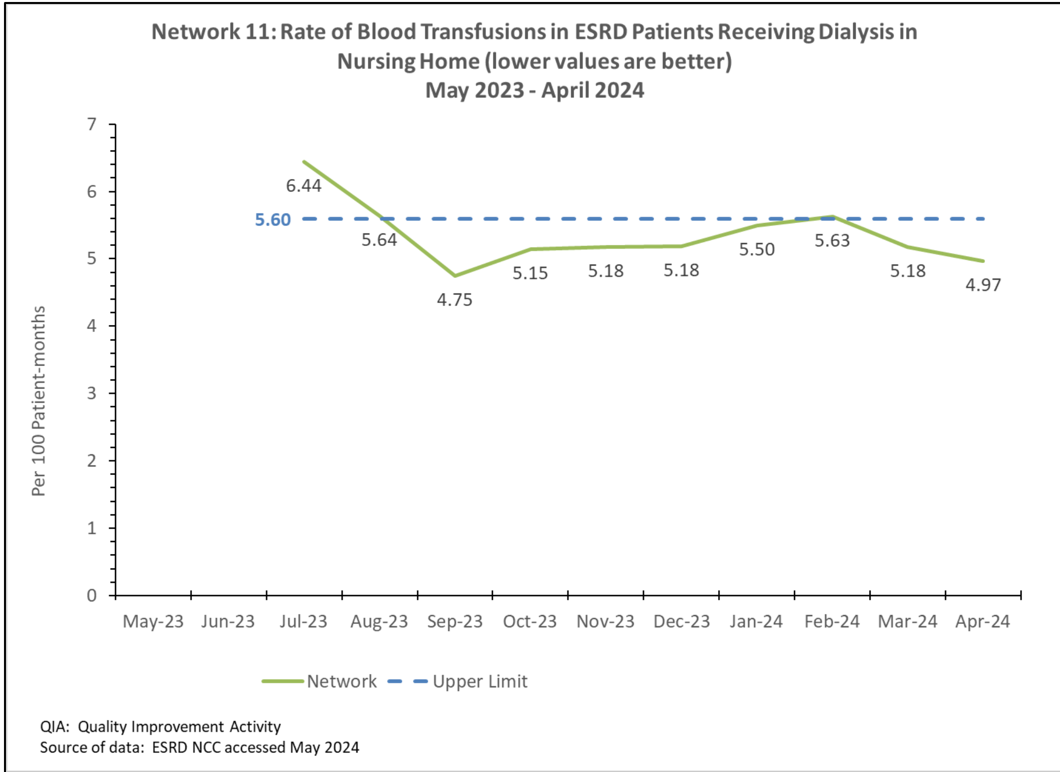
- Convened technical assistance calls to discuss results of the RCA on patients with anemia and history of transfusions, CVC infections and peritonitis. Supported facility in the development of a PDSA plan and follow up, and provided facility-focused infection control education, discussion, and resources.
- Convened technical assistance calls with individual facilities highlighting transitions of care best practices between the SNF and dialysis staff, as well as dialysis staff and hospital staff for continuity of care. Distributed Transitions of Care Best Practices and resources related to communications between SNF, dialysis and hospital staff.
- Promoted and supported dialysis staff education for SNF staff relating to infection control on access site care and signs symptoms of infection.
- Supported implementation of monthly audits on patient care, infection control practices and hand hygiene.
- Distributed educational resources and discussed information relative to infection control for CVC site infections, bloodstream infections and peritonitis to dialysis

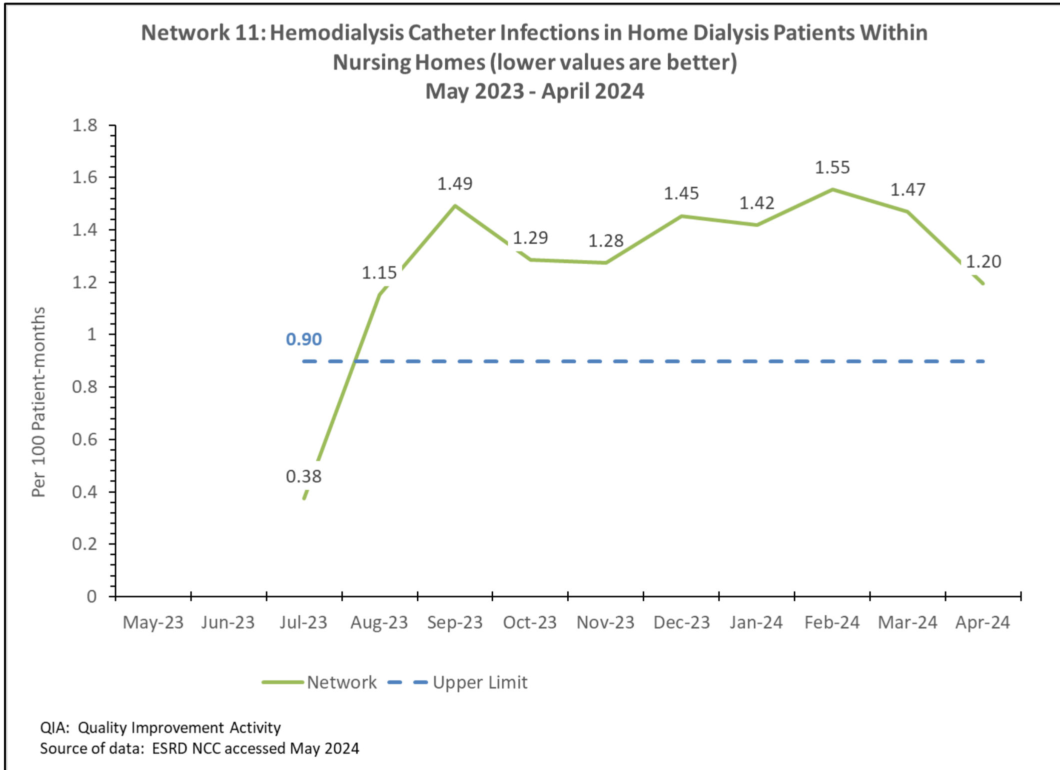
facilities with patients in a skilled nursing facility (SNF) to decrease infections in patients dialyzing in that setting. These education sources came from various sources including the CDC, ESRD NCC and best practices shared by other facilities or ESRD Networks.

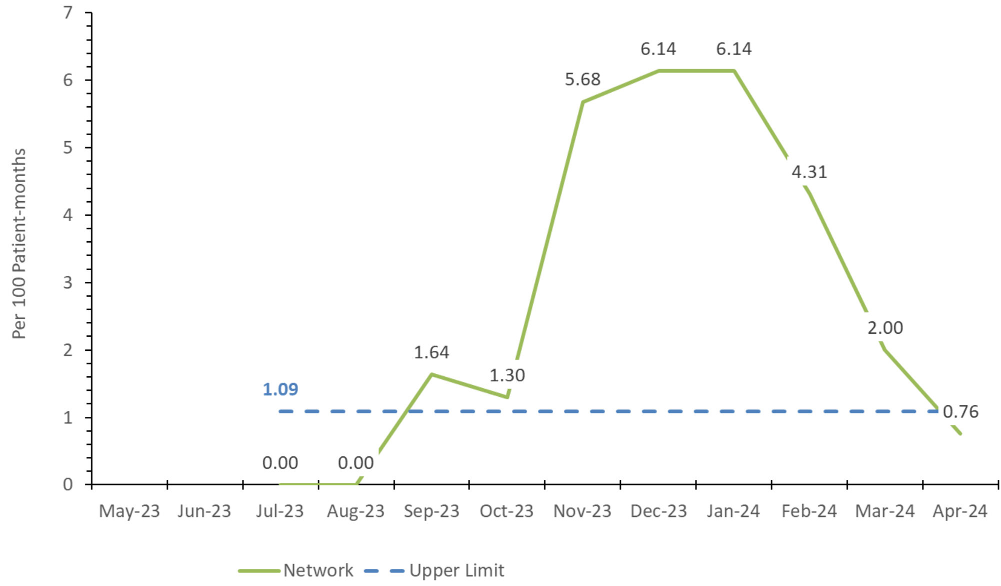
- Included Network 11 hospitalization project coordinator in discussions with SNF facilities to provide additional technical assistance on CVC infections and related hospital admissions.
- Provided resources and discussion on anemia management, supporting interventions to improve anemia management protocols and communication in transitions of care related to transfusion.
- Followed up with low performing facilities to discuss effectiveness of interventions and evaluate strategies for improvement to continue and those to abandon, adding new concepts and initiatives to improve progress toward goals.
- Provided resources to cohort facilities on peritonitis such as the ESRD National Coordinating Center (NCC) tools on preventing peritonitis.
- Collaborated with Minnesota Infection Control Assessment & Response (ICAR) to evaluate opportunities for infection control activities.
- Distributed the monthly Facility-Specific Progress Reports which provided the facility with detailed information about the facility's data and progress-to-date toward goal.
- Conducted ongoing data analysis related to peritonitis incidents to ensure infection incidents were attributed accurately to facilities within the data system, discrepancies were corrected as identified.

Results

- Midwest Kidney Network achieved the goal of decreasing the rate of blood transfusions in ESRD patients dialyzing in a nursing home with a final rate of 4.97 per 100 patient months.
- The Network's rate of hemodialysis catheter infections in dialysis patients receiving home dialysis within nursing homes was 1.20, working towards a goal of 0.899 infections per 100 patient months.
- The Network achieved the goal of decreasing the rate of peritonitis in dialysis patients receiving home dialysis within nursing homes with a final rate of .76 per 100 patient months.


Network 11: Rate of Blood Transfusions in ESRD Patients Receiving Dialysis in Nursing Home (lower values are better)
May 2023 - April 2024
Per 100 Patient-months
7
6
5
4
3
2
1
0
6.44
5.60
5.64
4.75
5.15
5.18
5.18
5.50
5.63
5.18
4.97
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
Network
Upper Limit
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024


Network 11: Hemodialysis Catheter Infections in Home Dialysis Patients Within Nursing Homes (lower values are better)
May 2023 - April 2024
Per 100 Patient-months
1.8
1.6
1.4
1.2
1
0.8
0.6
0.4
0.2
0
0.38
0.90
1.15
1.49
1.29
1.28
1.45
1.42
1.55
1.47
1.20
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
Network
Upper Limit
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024


Network 11: Peritonitis Events in Home Dialysis Patients Within Nursing Homes
(lower values are better)
May 2023 - April 2024
Per 100 Patient-months
0
1
2
3
4
5
6
7
1.09
0.00
0.00
1.64
1.30
5.68
6.14
6.14
4.31
2.00
0.76
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
Network
Upper Limit
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024

Telemedicine May 2023-April 2024

Network Goal

Achieve an increase in the number of rural ESRD patients using telemedicine to access a home modality in the Network service area by at least 3%. With a baseline of 703 patients using telemedicine to access a home modality, the goal for the Midwest Kidney Network was 724 patients.

Project Participants

The 2023-2024 project included all rural dialysis facilities providing home dialysis in the Midwest Kidney Network region.

Patient Engagement and Health Equity

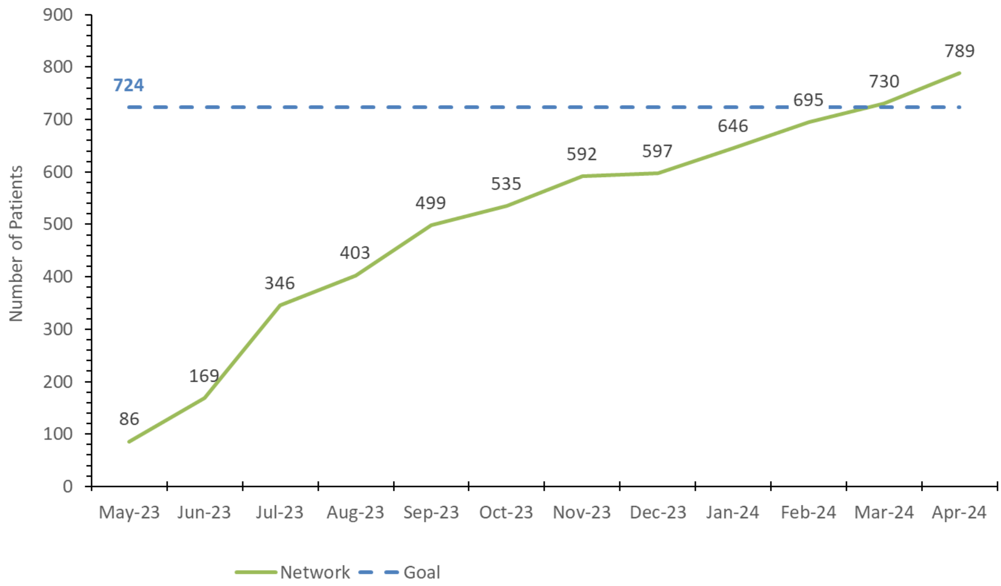
Patients across the Midwest Kidney Network service area shaped the direction of this project by supporting the development of educational tools and interventions. Patients helped identify key focus areas such as proximity to home dialysis unit, ability to provide transportation to the home unit and how to participate in telemedicine with their internet availability.

Interventions

- Distributed the ESRD NCC Telemedicine Toolkit to all home dialysis units.
- Convened technical assistance calls to a variety of facilities in all projects and incorporated the opportunity and availability of telehealth for patients in their area.
- Promoted the value of telemedicine for both urban and rural patients by sharing the *Telemedicine Tip Sheet* on the Network 11 COVID-19 webpage and via Facebook.

Results

From May 2023 to April 2024, 789 rural home dialysis patients in the Midwest Kidney Network region used telemedicine, surpassing our goal of 724 by 9%. Many patients preferred to see their physician in person although many patients appreciated learning about this technology.


Network 11: Number of Rural Patients Using Telemedicine to Access a Home Modality
May 2023 - April 2024
Number of Patients
900
800
700
600
500
400
300
200
100
0
724
86
169
346
403
499
535
592
597
646
695
730
789
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
Network
Goal
QIA: Quality Improvement Activity
Source of data: ESRD NCC accessed May 2024

Depression Treatment May 2023-April 2024

Network Goals

- Achieve a 10% increase in the percentage of patients, identified as having depression, who are treated by a mental health professional.

Project Participants

All dialysis providers in the Midwest Kidney Network service area participated in the project in 2023-2024.

Patient Engagement and Health Equity

Patients across the Network 11 service area were invited to be part of each Midwest Kidney Network project including the depression project. MKN's Consumer Committee members and the Behavioral Health Coalition helped shape the direction of this project with their feedback and assistance in the development of educational tools and interventions. We continue to discuss the impact of and mitigation strategies for health equity and depression.

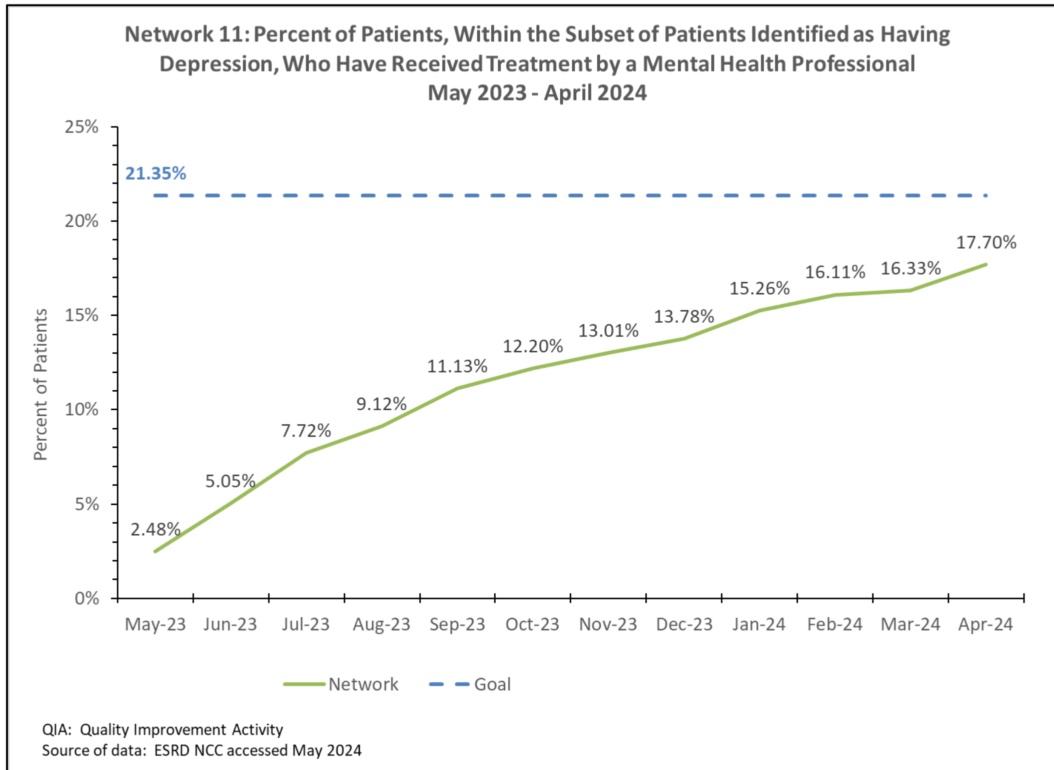
Interventions

Midwest Kidney Network incorporated a variety of strategic interventions, including:

- Invited community stakeholders to be part of the MKN behavioral health coalition. This dynamic group included 6 renal social workers, a renal dietitian, a behavioral health therapist, and 2 patient SME's. The coalition helped develop a plan for this project and assisted with the development of resources.
- A social worker from the Depression Advisory Committee worked on designing a depression algorithm based on the Owatonna Depression Algorithm. The behavioral health therapist from the committee offered resources on suicide assessment. Together these resources were shared with the cohort depression project facilities.
- A social worker from the Midwest Kidney region spoke on a national NCC Learning Action Network call on Depression Assessment using patient scenarios to demonstrate the use of PHQ 9.
- Regularly emailed cohort facilities resources on disparities in mental health, treatment and health equity issues.
- Developed Huddle Up! educational resources in collaboration with Network 5 to assist social workers during staff meetings to discuss depression with staff and consider real life scenarios.
- In addition to individual technical assistance calls, the Network hosted a call with cohort project facilities to discuss depression screening, treatment, and barriers.

Results

In patients identified as screening positive for depression during the calendar year of 2023-2024, 17.70% had a Medicare Part B outpatient visit claim with a diagnosis code for depression.



successful
conflicting
nonstop
partnership
contract
problem
settle
resolve
resolving
negotiating
mutual
agree
concessions
compromising
acceptance
pact
mediation
compromised
settlement
agreement
understanding
argument
negotiation
argue
communication
negotiate
relationship
tolerance
handshake
solution
strategy
share
beneficial
adjustment
business
compromise
meeting
give
deal
demand
debate
truce
discussion
give up
benefit
balance
discuss
dispute
cooperation
risk
arrangement
success

ESRD Network Grievance and Access to Care Data

Network Goals

May 2023 – April 2024:

- Increase patient awareness of the Network as an educational resource and mediator for grievances with metrics included in the Network Internal Quality Improvement plan.
- Improve the patient's experience of care by resolving grievances and access to care issues.

Responding to Patient's Concerns

From May 2023 through April 2024, the Midwest Kidney Network responded to 33 grievances from patients and provided support, strategies, options, and assistance. Midwest Kidney Network staff were intentional in their individualized customer service and incorporated the following best practices into their discussions with patients:

- Explained the grievance process and what Midwest Kidney Network can do to address their grievance.
- Reassured callers that their concern was important to us. Collaborated with patients on a plan and sought their permission and agreement to move forward.
- Sent grievance letters to patients summarizing their grievance process.

To educate patients and families, Midwest Kidney Network distributed brochures describing the role of the Network and the grievance process including the option for filing anonymous grievances.

During this same time period, the Midwest Kidney Network also responded to 27 patient concerns. Midwest Kidney Network worked with the patients to identify the type of assistance which was needed and provided the appropriate education and resources.

Working with Dialysis Providers with Concerns

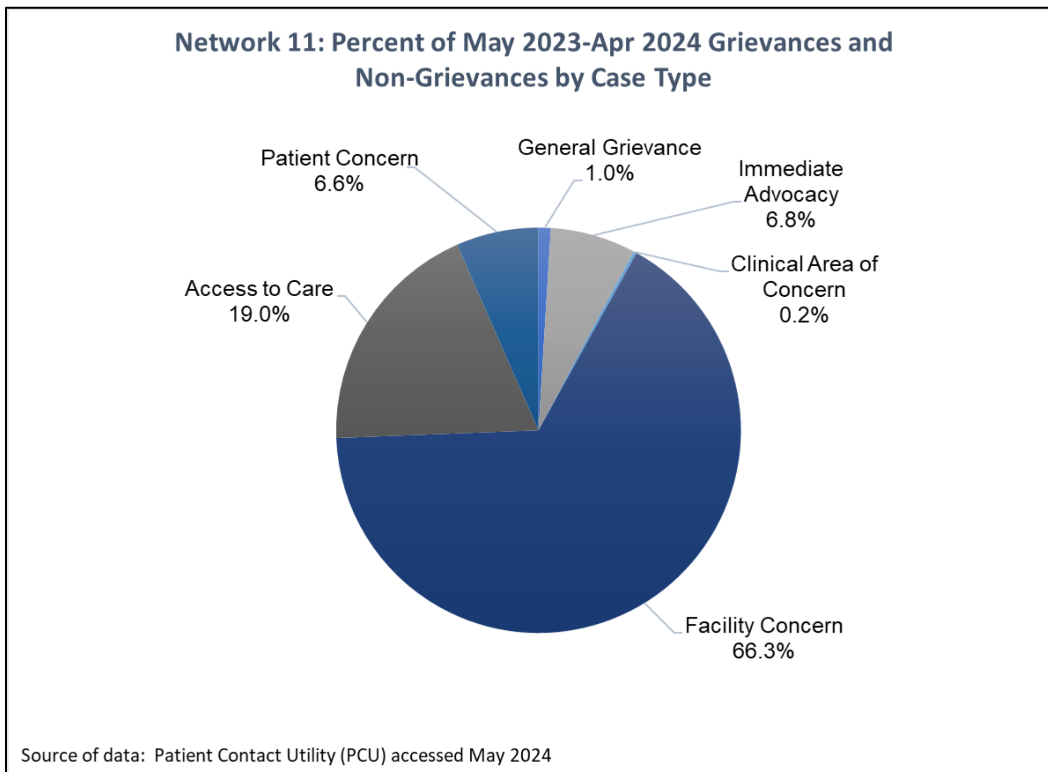
In the same time period, Midwest Kidney Network received 272 calls from facilities/providers. These facilities represent the diversity of urban/rural, inner city/suburban, Large Dialysis Organization facilities, and independent dialysis facilities. Midwest Kidney Network responded to calls from dialysis facilities by aiding in problem solving, sharing best practices, helping to understand the Medicare Conditions for Coverage as it applies to grievances, and strategizing interventions in working with behavioral issues in the dialysis unit.

Results

During this 12-month time period, Midwest Kidney Network responded to a total of 410 concerns filed by patients and facility personnel. Calls included:

- Facility Concerns 272
- Access to Care Issues 78
- Immediate Advocacy 28
- Quality of Care issues 1
- General Grievances 4
- Patient Concerns 27

Source of data: EQRS Patient Contact Utility (PCU)



ESRD Network Recommendations

Recommendations for Sanctions

Midwest Kidney Network monitors ESRD facilities in this region using annually updated Midwest Kidney Network Recommended Treatment goals and other indicators. In 2023, the Network did not recommend any sanctions or alternative sanctions.

Recommendations to CMS for Additional Services or Facilities

Through technical assistance and on-site visits, Network 11 staff have identified the following areas of need in this 5-state region:

- More outpatient dialysis chair availability for stable higher acuity patients (vents/trachs).
- Reimbursement to skilled nursing facility dialysis dens to support the treatment of acute kidney injury patients in the SNF versus the hospital setting.
- Transplant evaluations and follow-ups closer to the patient home, especially in rural areas.
- Additional Medicare and Medicaid benefits to support transportation for dialysis treatments and transplant evaluation.
- Modifications to regulations regarding nursing oversight and training for home dialysis, especially in rural areas. For example, providing opportunities for home dialysis nurse trainers to train patients at the patient’s primary facility that is not been certified for home dialysis.

ESRD Network COVID-19 Emergency Preparedness Intervention

Assessing Provider and Patient Needs

Through on-site and virtual technical assistance, the Network continues to see the impact of COVID-19 PHE on dialysis facility staffing. The Network provided clinical and quality improvement technical guidance to new or newly promoted staff. We also shared learning opportunities and resources for Facility Administrators including the RHA Core Curriculum for Renal Healthcare Administrators, Fundamentals of Dialysis and Patient Care Training and the Forum of ESRD Network's Medical Director Toolkits.

During monthly state calls and virtual technical assistance, Midwest Kidney Network continued to assess for trends in respiratory illness and provided coaching on interventions and strategies to improve safety and infection control in the clinic setting. Additionally, the Network communicated key changes impacting clinics with the unwinding of the public health emergency to ensure facilities remained in compliance with the ending of PHE waivers.

Collaboration with Stakeholders

Midwest Kidney Network hosted and facilitated regularly scheduled state-specific calls with a variety of stakeholders including state surveyors, state emergency preparedness staff, and representatives from dialysis providers. These calls provided a platform to discuss emerging state-specific COVID-19 issues and the potential impact on the provision of dialysis care, and to identify any new trends or challenges that may require assistance from the Network.

Resources Developed and Education Provided

The Network continued to provide updated and accurate COVID-19 resources, guidance, and updates to dialysis and kidney transplant providers in 2023-2024 with specific guidance on the unwinding of the public health emergency and change in PHE waivers.

ESRD Network Significant Emergency Preparedness Intervention

During the time period of May 2023-April 2024, several dialysis providers in the Midwest Kidney Network region experienced minor emergencies requiring brief facility closures due to power outages or water room issues. In these cases, patients were offered alternate treatment options and the clinics returned to normal operations within a short period of time. The Midwest Kidney Network 5-state region is prone to significant winter snowstorms that can also impact access to care, 5 facilities reported brief closures due to inclement weather.

In partnership with the Kidney Community Response (KCER) Coalition, one Emergency Status Situational Reports (ESSRs) was submitted for a more significant emergency which occurred during the time period May 2023 – April 2024.

- **Aug 28, 2023:** Monitored a metro Detroit, MI facility which was closed temporarily due to flooding. All patients were offered alternate treatment options and the facility resumed normal operations.

Additional Activities

- Distributed emergency preparedness guides for patients on dialysis by mail and through the Midwest Kidney Network website.
- Monitored facilities in flood-prone regions throughout Spring 2024, there was no impact to patients, staff, or facilities.
- Updated Midwest Kidney Network's emergency preparedness plans, including provision of annual orientation and test of phone transfer to backup Network 8.
- Provided technical assistance to dialysis providers on emergency plans.
- Communicated all pertinent FDA MedWatch and recalls to Network facilities and medical directors, as well as posted to the Network website.
- February 2024: Network 11 hosted and facilitated the annual disaster drill which included a 2-hour interactive table-top exercise simulating a cybersecurity related incident affecting a large dialysis organization. More than 60 people, including Network staff, from the Network 11 region attended the exercise.

Acronym List Appendix

This appendix contains an acronym list created by the KPAC (Kidney Patient Advisory Council) of the National Forum of ESRD Networks. We are grateful to the KPAC for creating this list of acronyms to assist patients and stakeholders in the readability of this annual report. We appreciate the collaboration of the National Forum of ESRD Networks especially the KPAC.