



September 2, 2014

Marilyn Tavenner
Administrator
Centers for Medicare and Medicaid Services
200 Independence Avenue, SW
Washington, DC 20201

Re: CMS-1612-P: Revisions to Payment Policies Under the Physician Fee Schedule, Clinical Laboratory Fee Schedule, Access to Identifiable Data for the Center for Medicare and Medicaid Innovation Models & Other Revisions to Part B for CY 2015; Proposed Rule

Dear Administrator Tavenner:

On behalf of Kidney Care Partners (KCP), I am writing to thank you for the opportunity to provide comments on “Revisions to Payment Policies under the Physician Fee Schedule, Clinical Laboratory Fee Schedule, Access to Identifiable Data for the Center for Medicare and Medicaid Innovation Models & Other Revisions to Part B for CY 2015” (Proposed Rule). We strongly support the proposed modifications to align payment policies related to the hospitalization of in-center and home dialysis patients. We also support the proposals related to the Chronic Care Management (CCM) codes, but want to clarify that the codes would be available for billing for services provided to patients with chronic kidney disease (CKD) who are not Stage V (End Stage Renal Disease (ESRD)).

As you know, KCP is an alliance of members of the kidney care community that includes patient advocates, dialysis care professionals, providers, and manufacturers organized to advance policies that improve the quality of care for individuals with both CKD and irreversible kidney failure, known as ESRD.¹

I. KCP Supports the Proposed Modification to the Physician Billing Rules Related to the Hospitalization of Home Dialysis Patients.

KCP applauds the Centers for Medicare and Medicaid Services (CMS) for proposing a modification to the billing rules that would allow nephrologists to bill the full month when a home dialysis patient has been hospitalized during that month. This is already the policy when an in-center dialysis patient is hospitalized. We agree that dialysis patients should have access to the different treatment modalities that are available and that payment policies should not create barriers to such access. Our members have been concerned that the different policies in the

¹ A list of KCP members is provided in Appendix A.

billing rules for in-center and home dialysis patients who are hospitalized during a month have unintentionally created a barrier to accessing home dialysis. We are pleased that CMS has recognized this problem and proposed a modification to align the billing rules. Therefore, we strongly encourage the Agency to finalize the policy as proposed.

II. KCP Supports the Implementation of the CCM Codes and Encourages CMS to Clarify that Nephrologists May Use the Codes When Treating Patients with CKD.

Patient care management is critically important to improving patient outcomes and reducing Medicare spending. This fact is especially true when caring for patients with chronic conditions, such as kidney disease. We support the Agency's proposal to implement new CCM service codes for non-face-to-face services provided to chronically ill patients. Given the importance of managing chronic kidney disease as early as possible in its progression, we encourage CMS to clarify in the final rule that nephrologists would be allowed to use these codes when providing such services to CKD patients.

III. Conclusion

We appreciate having the opportunity to provide comments on the Proposed Rule. Please do not hesitate to contact Kathy Lester at klester@lesterhealthlaw.com or at (202) 534-1773 to answer any questions or arrange a meeting to discuss our comments further.

Sincerely,



Edward R. Jones, M.D.
Chairman
Kidney Care Partners

Members of Kidney Care Partners

AbbVie
Akebia Therapeutics, Inc.
American Kidney Fund
American Nephrology Nurses' Association
American Renal Associates, Inc.
American Society of Nephrology
American Society of Pediatric Nephrology
Amgen
Baxter Healthcare Corporation
Board of Nephrology Examiners and Technology
Centers for Dialysis Care
DaVita Healthcare Partners, Inc.
Dialysis Patient Citizens
Dialysis Clinic, Inc.
Fresenius Medical Care North America
Fresenius Medical Care Renal Therapies Group
Greenfield Health Systems
Hospira
Keryx Biopharmaceuticals, Inc.
Kidney Care Council
National Kidney Foundation
National Renal Administrators Association
Nephrology Nursing Certification Commission
Northwest Kidney Centers
NxStage Medical
Renal Physicians Association
Renal Support Network
Renal Ventures Management, LLC
Rogosin Institute
Sanofi
Satellite Healthcare
U.S. Renal Care