

Medicare Open Enrollment

Medicare open enrollment has begun, and we don't want you to miss an opportunity to obtain insurance coverage. Open enrollment occurs **October 15 through December 7, 2018**. Medicare has different parts to cover specific services.

Medicare Part A (hospital insurance) covers inpatient hospital stays, care in a skilled nursing facility, hospice care, and some home health care. Medicare Part B (medical insurance) covers certain doctors' services, outpatient care, outpatient dialysis, medical supplies, and preventive services. If you do not enroll when eligible, you may have to pay a late enrollment penalty for Part B, and you might experience a gap in coverage. Medicare Part D provides prescription drug coverage and is available at an additional cost. To enroll in Medicare Part D, you must choose an approved Medicare plan that offers Medicare prescription coverage in your state.

Medicare prescription drug plans have a list of covered drugs (called a formulary) placed under different tiers. Prescriptions in each tier have a different cost; lower tiers mean lower drug costs for you.

For more information about Medicare coverage, contact 1-800-MEDICARE. You can also call the national State Health Insurance Program (SHIP) at 1-877-839-2675 to direct you to your local SHIP and for free information about Medicare coverage.

Immunizations

Never miss a flu vaccine. Experts agree that the flu vaccine is the single best way to protect you and your loved ones against the flu. If you are vaccinated, you are less likely to get the flu. If you do get sick, studies show that when you are vaccinated, your illness will likely be milder which helps keep you out of the hospital.

By getting vaccinated, you can prevent the spread of flu to those at greatest risk for becoming dangerously ill, including young children, pregnant women, people 65 and older, and those with certain medical conditions.

For additional information, please consult your doctor, and visit the following websites:

- The Centers for Disease Control and Prevention (<https://www.cdc.gov>)
- US. Department of Health and Human Services (<https://www.hhs.gov>)

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Quality Incentive Program (QIP) Performance Scores

What is a QIP Score?

Quality Incentive Program (QIP) promotes high-quality services in outpatient dialysis facilities treating patients with ESRD. This program changes the way CMS pays for the treatment of patients with ESRD by linking a portion of payment directly to facilities' performance on quality of care measures. Payment reductions result when a facility's overall score on applicable measures does not meet established standards.

Where can I find my facility's score?

CMS publicly reports facility ESRD QIP scores, and these scores are available

online at [Dialysis Facility Compare \(https://www.medicare.gov/dialysisfacilitycompare/\)](https://www.medicare.gov/dialysisfacilitycompare/). In addition, each facility is required to display a [Performance Score Certificate](#) that lists its Total Performance Score, as well as its performance on each of the quality measures identified for that year.

What can I do to help improve my facility's QIP score?

- You can help with the reduction of bloodstream infections by washing your hands and access before and after each treatment.
- Join patient and family engagement/care coordination activities such as participating in lobby days, peer support groups, QAPI meetings and plan-of-care meetings.

Treatment Options: Patient Story



My name is Anisha Twymon. I chose Peritoneal Dialysis (PD) because at the time I was battling kidney failure. I was also enrolled in college getting my Bachelor's

of Arts. PD allowed me to continue college, work, and get my dialysis treatments. PD was the best option for me because it allowed me to still see my kids as much as I wanted and gave them a little hands-on with what their mother was going through. At a young age for

all of us, it was a big change and really opened our eyes. With PD, I had my normal life. You don't have to get dressed to do your treatments and can be in the comfort of your own home. I did my treatments just about anywhere as long as it was a clean environment to do so. PD allowed me to finish college and work. My classes were only 90 minutes each, so I could do almost all of my classes and do my treatment in my professor's office, if I had to. It's easy to carry the treatment with you.

Another great reason to choose PD is you don't have a fistula or a graft in your arm. You also don't get stuck three days a week or have to get out of your bed to go to the clinic.

Vascular Access in Dialysis Patients

Before someone is able to initiate dialysis, a vascular access is needed as an entry point to the bloodstream in the body. Vascular access allows the blood to circulate through a machine that filters the blood for toxins and excess fluids. If you are reading this, chances are you or someone you know may need to obtain a dialysis access, or maybe you already have one in place.

There are three common types of vascular accesses utilized in hemodialysis: an arteriovenous fistula (AV fistula), an arteriovenous graft (AV graft), and a central venous catheter (known as CVC).

For the majority of providers, the fistula is the gold standard because it is made of the patient's own vessels, usually has a lower rate of infections, has a lower risk of clotting, can get better blood flow, and usually lasts for many years.

The graft is similar to the fistula, and it is considered the next best option if you cannot

have a fistula. The graft is created artificially, can work well and has a good flow, but it tends to have a few more problems with clots and infections than a fistula. Grafts can last for a long time and can provide adequate treatment if they are cared for properly. Lastly, there are catheters or CVCs. Catheters have a greater chance of becoming infected, clotted, or failing to provide adequate dialysis.

If you or a loved one is in need of dialysis, make sure you learn about the different accesses available. Do your own research, but also speak with your healthcare team. Making an informed choice will help you get the best access and treatment available. Having the best type of access can also benefit you if you choose to get listed for transplant, as patients with good dialysis outcomes usually have better results when receiving a kidney transplant.

For more information on vascular access, contact your doctor, facility staff or ESRD Network.

How Can the Network Help?



If you are unhappy with the care you receive at your dialysis or transplant unit, you have the right to file a grievance. If you have a concern,

you may get help by talking to the staff at your clinic. If that does not work or you feel you cannot discuss your problem with someone at your facility, you can call the Network or

State Survey Agency for help. Below, you will find information on what the Network can and cannot do:

We Can

- Investigate your grievance in an effort to resolve any issues you are having at the dialysis or transplant center.
- Provide recommendations to the staff and you on how to improve the concern.
- Advocate for patient rights.
- Provide contact information of other dialysis units and physicians.

Continued on next page

How Can the Network Help *continued from page 3*

- Collaborate with patients who are having a hard time keeping or finding a dialysis facility.
- Provide general information on Medicare ESRD coverage.
- Refer complaints to another agency (some grievances cannot be handled by the Network and must be referred to another agency).
- facility personnel policies and procedures.
- Assist with payment of bills or transportation arrangements.
- Override state or federal licensing/certification requirements.

To file a grievance please contact the following agencies:

- **ESRD Network of Texas**
(877) 886-4435
(For patients and facilities in Texas)
- **ESRD Network 8**
(877) 936-9260
(For patients and facilities in AL, MS, TN)

We Cannot

- Make a dialysis facility, transplant center, or physician admit a patient.
- Request that a specific staff member provide your care.
- Change or get involved in

Dialysis Friendly Recipe

Pasta with Pesto*

Ingredients

- 1 lb. linguine
- 1/4 cup olive oil
- 1/4 cup parmesan cheese - grated
- 2 tablespoons basil leaves - dried
- 1/4 cup chopped parsley - fresh
- 1 clove garlic

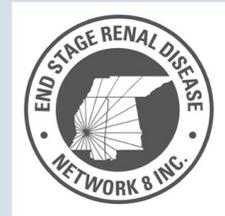
Cooking Instructions

- 1) Combine all ingredients, except for the uncooked pasta, in a blender or food processor.
- 2) Blend or process until smooth.
- 3) Cook pasta in unsalted boiling water according to package directions.
- 4) Toss sauce with drained pasta. Serve hot.

*Recipe from the National Kidney Foundation:
<https://foodcare.com/static/recipe7>

Recipe Note:

Servings 8; Calories 165;
Protein 4.67g;
Carbohydrates 18g;
Fat 8.21g;
Cholesterol 2.75mg;
Sodium 182mg;
Potassium 56mg;
Phosphorus 133mg;
Calcium 62mg; Fiber1.26g



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