

TO: Facility Administrator at [Facility Name]

CCN#: [Facility CCN]

FROM: Heather DuVall, Project Coordinator

Healthcare Management Solutions

SUBJECT: ESRD QIP Data Validity and Reliability

ACTION REQUIRED: Please submit your response by 6/30/2014

The Centers for Medicare & Medicaid Services (CMS) contracted with Healthcare Management Solutions, LLC (HMS) to conduct a data reliability and validity check on the Clinical Performance Measure (CPM) data entered into the CROWNWeb system.

Your facility was chosen to participate in this effort and a request letter for records was sent to you in February 2014 with a follow up letter sent in April 2014. The timeframe for record acceptance has closed as of May 31, 2014. A Final Report of findings from this validation project will be provided to CMS leadership as well as to all ESRD Networks. A list of non-participating facilities will be included as part of this report.

The purpose of this letter is to determine what barriers/issues you may have encountered that resulted in non-submittal of records. HMS is dedicated to ensuring facility compliance with record requests as well as reducing the burden of record submittal for facilities. Please take the time to respond to this letter via the contact information provided below (email preferred) and let us know what we can do to assist you in participating in any future record requests.

Sincerely,

Heather DuVall
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