

# Kidney care reports don't line up with care billed by physicians

April 19 2012

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Information on a mandatory Medicare form meant to help officials assess the quality of care provided to older kidney disease patients is poorly representative of the actual care billed by physicians, according to a study appearing in an upcoming issue of the *Journal of the American Society Nephrology (JASN)*. The findings indicate that better accuracy and consistency are needed when clinicians complete this form. Otherwise, the widely used form will have limited value for public health surveillance and planning.

Patients with progressive [chronic kidney disease](#) (CKD) could receive numerous benefits from seeing a [kidney](#) specialist as early as possible—from a better chance of getting a transplant to a lower risk of dying prematurely while on dialysis. Since 2005, clinicians who provide dialysis must submit information to [Medicare](#) describing when a patient was first seen by a kidney specialist before starting dialysis.

But how accurate is the information that these providers submit to Medicare? To find out, Jane Paik Kim, PhD, Wolfgang Winkelmayr, MD ScD (Stanford University School of Medicine), and their colleagues compared this information with submitted billings from physician visits of older patients who had Medicare coverage before developing kidney failure.

The study included 80,509 patients who were age 67 years or older, who initiated dialysis between July 2005 and December 2008, and who had at least two years of uninterrupted Medicare fee-for-service coverage as

their primary payer.

The researchers found substantial disagreement between information submitted by providers and information on Medicare physician claims on the timing of kidney failure patients' initial visits to kidney specialists before starting dialysis.

Specifically:

- Agreement between the provider reports and claims was only 48% when using the earliest recorded visit to a specialist in an outpatient facility.
- When dividing patients' first visit to a kidney specialist into two groups—more than 12 months before starting dialysis and within 12 months of starting dialysis—the reported information was 70% accurate, but accuracy differed by patient characteristics and declined over time.
- When it was reported that patients had never been seen by a kidney specialist before developing kidney failure, 16% had actually been seen more than 12 months before, another 5% were seen between six and 12 months, and 15% were seen within six months.

"We found that the accuracy of the form varied by several demographic characteristics including age, sex, race, and underlying [kidney disease](#). Unfortunately, accuracy did not improve from 2005 to 2008 and, if anything, appeared to decline in more recent years," said Dr. Winkelmayer. "We suggest several possibilities to improve reporting in the future, including more specific guidance on the form, as well as potentially establishing a quality metric that would financially reward individuals who report such information particularly well."

**More information:** *Journal of the American Society Nephrology* April

19, 2012. [doi: 10.1681/ASN.2011080871](https://doi.org/10.1681/ASN.2011080871)

Provided by American Society of Nephrology

Citation: Kidney care reports don't line up with care billed by physicians (2012, April 19)  
retrieved 27 April 2024 from

<https://medicalxpress.com/news/2012-04-kidney-dont-line-billed-physicians.html>

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