September 16, 2019

Via Electronic Mail Only
Seema Verma, Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-5527-P
P.O. Box 8013
Baltimore, MD 21244-1850

Re: Medicare Program: Specialty Care Models to Improve Quality of Care and Reduce Expenditures: ETC Model [CMS-5527-P]

Dear Administrator Verma:

On behalf of the members of the Advanced Medical Technology Association (AdvaMed), we are writing to provide comments on the proposed End-Stage Renal Disease (ESRD) Treatment Choices Model (ETC Model). AdvaMed member companies produce the medical devices, diagnostic products, and health information systems that are transforming health care through earlier disease detection, less invasive procedures, and more effective treatments. AdvaMed members range from the largest to the smallest medical technology innovators and companies.

AdvaMed is pleased that CMS and CMMI have undertaken efforts to establish a payment model that would enhance beneficiary choice regarding ESRD treatment modalities and improve patient’s access to technologies for home dialysis and related service. The proposed nationwide, mandatory ETC Model addresses the need for increased utilization of home dialysis and kidney transplants. The ETC Model targets 50 percent of eligible ESRD beneficiaries to adequately test incentives designed to further those goals. We are encouraged by this Administration’s commitment to addressing these dual challenges through the President’s July 10, 2019 Executive Order on Advancing American Kidney Health Initiative, as well as the announcement of four other voluntary models, which include the Kidney Care First (KCF) Model and three, voluntary Comprehensive Kidney Care Contracting (CKCC) Models. We support the ETC Model’s goals and believe the mandatory, comprehensive nature for the ETC Model complements the four voluntary models. Taken together, all five models hold the promise of advancing care for the 37 million Americans with kidney disease, which is projected to increase dramatically by 2030. For these reasons, we recommend that CMS move forward with all five proposed models nationwide as soon as feasible in 2020.
AdvaMed appreciates the work that has gone into developing the proposed ETC Model and would like to offer comments on the **Home Dialysis Payment Adjustment**.

CMS proposes a Home Dialysis Payment Adjustment (HDPA) that would increase payments for Medicare home dialysis and home dialysis-related claims during the initial three years of the ETC Model, for participating ESRD facilities and Managing Clinicians.¹

AdvaMed supports the proposed HDPA and believes it has the potential to provide an up-front positive incentive for participating ESRD facilities and Managing Clinicians to support ESRD beneficiaries in choosing home dialysis. However, the existing structure and payment amount of the proposed HDPA may not be adequate to enable provider participation due to the upfront investments required for a dialysis facility’s transition to providing more home dialysis services. For a facility with only a few patients receiving home dialysis, the amount of the proposed payment adjustment this facility would receive would not be enough to cover the infrastructure and the incremental investments in labor required for a facility’s transition to providing home dialysis services.

**AdvaMed urges CMS to consider adjusting HDPA to incorporate the startup costs for those facilities that expand their supports to the home dialysis patients.**

AdvaMed appreciates the opportunity to comment on the proposed rule and urges CMS to consider and incorporate our recommendations into the final rules for the ETC Model. We also urge CMS to work with us and other stakeholders as the agency moves forward with the implementation and development of new and modified payment policies.

We would be pleased to answer any questions regarding these comments. Please contact me or Chien-Wei Lan at clan@advamed.org, if we can be of further assistance.

Sincerely,

Donald May  
Executive Vice President  
Payment and Health Care Delivery

---

¹ Centers for Medicare and Medicaid Services, Medicare Program; Specialty Care Models to Improve Quality of Care and Reduce Expenditures, CMS-5527-P