

Nephrology VBR: Year 2 (Cohort 1)

Value based reimbursement for nephrologists will begin at the same time as other specialist value-based reimbursement- 3/1/2023. Nephrologists who participate in MCT2D and meet the below requirements will receive 5% VBR. Considering the start date of the VBR, the below will be a mix of retrospective and prospective measures. Unless there is a specific deadline listed, the activities will need to be completed prior to 11/30/23. All items must be completed to continue earning VBR.

Requirement	Responsibility	Due Date
Attend in-person Spring regional meeting. Attendees: PCP practices, nephrology practices, endocrinology practices.	Clinical Champion	April/May 2023
Attend nephrology clinical champion meeting. Attendees: Nephrology clinical champions only	Clinical Champion	Fall 2023
Complete progress report survey (Due 6/1/2023)	Clinical Champion	6/1/2023
Attend educational session on emerging uses of SGLT2is/GLP1 RAs (1hr). One attendee from the practice must attend live, the rest may view a recorded version.	Each Physician	11/30/2023
Respond to requests from the coordinating center and your physician organization related to MCT2D related work in a timely way (either 3 days or as specified)	Practice	Ongoing
Present on your site's implementation of the quality improvement initiatives at a collaborative meeting, regional meeting, or conference call, if requested	Practice	Ongoing

MCT2D Progress Report

MCT2D will be distributing a short progress report survey that is to be completed by each participating practice. The survey will take approximately 20 minutes to complete. The intent of this survey is to understand the perceived improvements by the practice in implementing the MCT2D pillars- increasing prescribing of SGLT2is and GLP1RAs, and increasing urine albumin testing. This survey also asks questions about workflow changes intended to support these initiatives. Progress report surveys will be distributed in early March and due on June 1st.

Maintain a Log of Interventions

MCT2D will not ask for a formal submission from individual practices for information related to quality improvement logs. This VBR requirement is to ensure that physician organizations are getting the information that they need from participating practices in order to respond to questions on the PO level quality improvement logs, and to ensure that practices are documenting changes made related to MCT2D work. If a PO has had a difficult time getting responses and answers from a practice regarding their MCT2D work, they could let us know and we would reach out to the practice and remind them of this expectation.

Regional Meeting Attendance

Clinical champions must attend the spring of specialist practices must attend meetings in person each year. If the clinical champion is unable to attend, a delegate may be sent in their place. The delegate should be someone with a clinical background from the practice. If the clinical champion or a delegate cannot attend, the clinical champion may watch a recording of the regional meetings and respond to questions to demonstrate viewing and understanding of the meeting. However, there is a three-strike policy on regional meetings. If a clinical champion or delegate does not attend and the video needs to be viewed instead, this is one strike. If the clinical champion or delegate does not attend and the video is not viewed at all, this is an additional strike. Three strikes mean that the practice will no longer be able to participate in MCT2D.

Present on Implementation at MCT2D Meetings

If asked, sites are required to present at an MCT2D regional meeting, collaborative wide meeting, or learning community event about their progress and operationalization of the MCT2D initiatives. It is not expected that every site will be asked, but this requirement is built into the expectations in order to ensure best practice sharing and set the expectation that practices and POs will be asked to contribute in this way. Practices will be asked at minimum one month in advance of any virtual meeting and two months in advance of any in person meetings. The MCT2D coordinating centers will collaborate with the PO and practice to ensure feasibility.