

# Chronic Kidney Disease

## Why is the Clinical Care Pathways Program Important?

- ✔ Federal anti-trust laws allow independent hospitals, physicians and other providers to form clinical integration networks (CIN) that may **negotiate prices with payers** only when the CIN engages in the facilitation of interdependence and cooperation between providers to reduce spend and improve clinical quality.
- ✔ The Federal Trade Commission (FTC) specifically requires CIN providers to **create and support clinical guidelines** that continually improve quality and that are utilized to measure network and individual provider performance.
- ✔ This program will **target various chronic disease states** and identify evidence-based clinical guidelines to address them.
- ✔ Guidelines were developed by teams of AdventHealth Provider Network (AHPN) primary care and specialist physicians and are **based on nationally accepted standards**. AHPN physicians participated directly in the design of this program.

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**35.5** MILLION  
estimated number of US  
adults with chronic kidney  
disease (CKD)

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**9/10**  
people with CKD do not  
know they have it



# Chronic Kidney Disease (CKD) Definitions

## CKD Clinical Care Pathway: Performance Monitoring Metrics

1. The percentage of patients with a diagnosis of CKD (unspecified or stage 1 through 5) who have a documented eGFR (estimated glomerular filtration rate) & ACR (urine albumin to creatinine ratio) in the past 6 months.
2. The percentage of patients with a diagnosis of CKD (unspecified or stage 1 through 5) who are receiving statin therapy in the past 6 months.
3. The percentage of patients with a diagnosis of CKD (stage 3 through 5) that have had a CBC (complete blood count) in the past 6 months.
4. The percentage of patients with a diagnosis of CKD (unspecified or stage 1 through 5) who have a concurrent diabetes mellitus type 2 diagnosis and have had an A1c in the past 6 months.
5. The percentage of patients with a diagnosis of CKD (unspecified or stage 1 through 5) who have a concurrent diabetes mellitus type 2 diagnosis and are on a SGLT2i (sodium-glucose linked transporter 2 inhibitor) in the past months.
6. The percentage of patients with a diagnosis of CKD (unspecified or stage 1 through 5) who have a concurrent hypertension diagnosis and who filled a prescription for a RASi (Renin Angiotensin inhibitor) in the past 6 months.

## CKD Performance Score Calculation Methodology

**Report Limited to:** Network providers with ≥ 10 CKD patients

**Patient Denominator:** Determined by the metrics above, which results between 2 (OKD stages 1 and 2) and 6 (OKD stage 3+, concurrent diabetes, concurrent hypertension) for each patient.

**Patient Numerator:** "1 " for a metric met, "0" for a metric not met, and is blank for a metric that does not apply.

**Patient Score:** Numerator / Denominator

**Provider Score:** The average of all CKD patient scores attributed to the provider.

**Practice Score:** The average of all CKD patient scores within a practice.

**Network Score:** The average of all CKD patient scores within the network.

## CKD Star Performance Rating Calculation Methodology

For a star performance rating, the deciles were calculated for all baseline provider data. Then the deciles were assigned half stars by decile, while maintaining a minimum of 1 star. This provided the OD star targets for 2025 (subject to change each year).

Baseline Percentile	Score Range	Star Rating
0-10 Percentile	0.00% - 48.42%	1
11-20 Percentile	48.43% - 53.88%	1
21-30 Percentile	53.89% - 60.20%	1.5
31-40 Percentile	60.21% - 64.08%	2
41-50 Percentile	64.09% - 69.20%	2.5
51-60 Percentile	69.21% - 71.98%	3
61-70 Percentile	71.99% - 75.72%	3.5
71-80 Percentile	75.73% - 79.33%	4
81-90 Percentile	79.34% - 82.99%	4.5
91-100 Percentile	83.00% - 100.00%	5