

	Kidney Care First	Comprehensive Kidney Care Contracting			End-Stage Renal Disease Treatment Choices (proposed rule)	Radiation Oncology (proposed rule)
		Graduated	Professional	Global		
Voluntary/Mandatory	Voluntary	Voluntary			Mandatory	Mandatory
Start Date	<ul style="list-style-type: none"> - January 2020 - Financial accountability begins in 2021 (PY1) - The first year (PY0) allows participants to build care relationships and infrastructure 	<ul style="list-style-type: none"> - January 2020 - Financial accountability begins in 2021 (PY1) - The first year (PY0) allows participants to build care relationships and infrastructure 			<ul style="list-style-type: none"> - January 2020 	<ul style="list-style-type: none"> - January or April 2020
Duration	<ul style="list-style-type: none"> - 4 years (through 2023) - CMS option for up to two additional years 	<ul style="list-style-type: none"> - 4 years (through 2023) - CMS option for up to two additional years 			<ul style="list-style-type: none"> - 5 1/2 years (through June 30, 2026) 	<ul style="list-style-type: none"> - 5 years (through 2025)
Eligible Participants	<ul style="list-style-type: none"> - Nephrology practices and nephrologists 	<ul style="list-style-type: none"> - Nephrology practices or nephrologists AND transplant providers - Dialysis facilities and other providers/suppliers are optional 			<ul style="list-style-type: none"> - CMS will randomly select providers (physicians and ESRD facilities) that include roughly half of ESRD beneficiaries 	<ul style="list-style-type: none"> - CMS will randomly select providers and suppliers that provide radiotherapy services
Eligible Beneficiaries	<ul style="list-style-type: none"> - Beneficiaries with CKD stages 4 and 5 - Beneficiaries with ESRD receiving maintenance dialysis - Beneficiaries who were aligned to a participant and then receive a transplant 	<ul style="list-style-type: none"> - Beneficiaries with CKD stages 4 and 5 - Beneficiaries with ESRD receiving maintenance dialysis - Beneficiaries who were aligned to a participant and then receive a transplant 			<ul style="list-style-type: none"> - Adult ESRD patients 	<ul style="list-style-type: none"> - Beneficiaries treated by select providers for any of the 17 cancer types

Beneficiary Alignment	<ul style="list-style-type: none"> - Based on where beneficiary receives the majority of kidney care - Beneficiaries remain aligned for 3 years following successful transplant 	<ul style="list-style-type: none"> - Based on where beneficiary receives the majority of kidney care - Beneficiaries remain aligned for 3 years following successful transplant 			<ul style="list-style-type: none"> - Aligned on a month-to-month basis for purposes of calculating payment adjustments - Beneficiary aligned to the ESRD facility accounting for the most dialysis treatments during a month 	<ul style="list-style-type: none"> - Aligned to the provider treating the beneficiary
Payment Methodology	<ul style="list-style-type: none"> - Participants receive capitated payments for aligned beneficiaries - Capitated payments adjusted based on health outcomes and utilization (compared national standards and participant's own experience) - Bonus payment for every aligned beneficiary who receives successful transplant (paid over 3 years) 	<ul style="list-style-type: none"> - Based on CEC model - Participants begin in 1-sided risk, phase into greater savings/losses 	<ul style="list-style-type: none"> - Based on DC Model Professional PBP option - 50% savings/losses 	<ul style="list-style-type: none"> - Based on the DC Model Global PBP option - 100% risk for TCOC for all Part A/B services 	<ul style="list-style-type: none"> - Positive adjustment on claims for home dialysis and related services for first three model years as well as additional payment for home dialysis - Positive or negative adjustment on claims based on rate of home dialysis and transplant success (applied to the ESRD PPS per treatment base rate) 	<ul style="list-style-type: none"> - Prospective site neutral, episode-based payments to physician group practices, hospital outpatient departments and freestanding radiation therapy centers - 90 day episode of care for 17 cancer types - 2 components: Professional (for services that can only be furnished by a physician, 4% discount) and Technical (for other services, 5% discount) - Withheld amounts for incomplete episodes (2%), quality (2%) and beneficiary experience (1%); a portion can be earned back

Advanced APM?	<ul style="list-style-type: none"> - Yes (2021) - Participating practices can qualify as APM entities if they meet QPP patient thresholds 	<ul style="list-style-type: none"> - No 	<ul style="list-style-type: none"> - Yes (2021) - Kidney Contracting Entities can qualify as APM entities 	<ul style="list-style-type: none"> - Yes (2021) - Kidney Contracting Entities can qualify as APM entities 	<ul style="list-style-type: none"> - Yes 	<ul style="list-style-type: none"> - Yes
Benefit Enhancements	<ul style="list-style-type: none"> - Expansion of kidney disease education benefit - Telehealth - SNF 3-day stay rule - Post-discharge home visits - Care management home visit - Home health 	<ul style="list-style-type: none"> - Expansion of kidney disease education benefit - Telehealth - SNF 3-day stay rule - Post-discharge home visits - Care management home visit - Home health 		<ul style="list-style-type: none"> - Expansion of kidney disease education benefit 		