

ST. LOUIS
KIDNEY CARE

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JUL - 5 2018

**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

July 5, 2018

Ms. Courtney Avery
Administrator
Illinois Health Facilities & Services Review Board
525 W. Jefferson St., 2nd Floor
Springfield, IL 62761

Re: #17-060, Fresenius Kidney Care Madison County

Dear Ms. Avery,

I am a nephrologist in the St. Louis area writing in support of a 9-station ESRD facility being proposed in Granite City called Fresenius Kidney Care Madison County.

My partner, Dr. Donovan Polack, and I practice in the St. Louis area, and are interested in creating a novel value-based practice for our specialty that incentivises good outcomes, rather than the fee-for-service model within which our specialty currently operates. The observed problem is that a fee-for-service model incentivises encounters, not outcomes, resulting in an expensive hospital-based practice of nephrology with early initiation of dialysis for many patients. My Partner, Donovan Polack, M.D., and I have formed a value-based practice with Fresenius Kidney Care where we take on the downside financial risk of the poor outcomes of our patients should they unfortunately become ill. One part of our value-based practice is our involvement in an ESCO. An ESCO, or an "ESRD Seamless Care Organization", is a novel Medicare (CMS) partnership with groups of health care providers, like myself, where the healthcare providers share in the downside financial risk that comes with the poor outcomes of our patients. The ESCO offers the patients special privileges, such as access to a 24/7 team of nurses and social workers called "the Care Navigation Unit" whose main function is to provide 24 hour access to critical medical records, coordinate care when difficult, change unhealthy patient behavior with education, and prevent missed dialysis treatments so that visits to the ER and unneeded hospitalizations are reduced. Last year, these ESCOs successfully improved the care of the patients involved by reducing hospitalizations and readmissions, and gave a significant cost savings to Medicare in the process.

We have most of our patients receiving dialysis at Fresenius Kidney Care facilities where our patients have the clinical advantage of participating in the Fresenius CMS ESCO. We feel a need to continue this level of care for our patients across the river in Illinois; however, Fresenius clinic options are severely limited and not accessible to patients in the Granite City area where

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we spend much of our time. I currently serve as Medical Director of the DaVita Granite City ESRD facility where we have 36 dialysis patients up from 26 patients in 2017. I became medical director of this unit in 2010, long before we realized the direction our practice must take. Davita cannot offer our patients the clinical advantages that can be offered by our ESCO. For this reason, we have no interest in placing any patients at DaVita Foxpoint. In his letter of support for this proposed unit that was submitted with the application, my partner identified 26 patients that we hope to refer to that facility in the first two years of its operation. I urge you to provide these patients access to a Fresenius Kidney Care clinic on the Illinois side of St. Louis in the Granite City area so that they may enjoy the improved care we are developing on the Missouri side of St. Louis.

I would be happy to provide any additional information you may require for a fully informed decision.

Sincerely,



Nicholas Mayer, D.O.