

## FOR IMMEDIATE RELEASE

Vinson  
October 7, 2009

Contact: Brandy B.

(804) 794-5824



### Fistula First Breakthrough Initiative Provides Road Map to Reach CMS Goal of 66%

“Achieving this benchmark is increasingly realistic with better defined roles for all of the stakeholders,” says Jay Wish, MD, FFBI Clinical Consultant.

**MIDLOTHIAN, VA (October 7, 2009)** – The Fistula First Breakthrough Initiative (FFBI) announces the release of a strategic plan that aims to achieve the CMS goal of 66% AV fistula utilization in prevalent hemodialysis patients.

The FFBI Strategic Plan focuses on seven (7) strategies and two (2) policy recommendations. The plan was developed by conducting a root cause analysis that identified the underlying barriers to AV fistula placement and use. A technical expert panel identified potential solutions to address the root causes.

Led by the FFBI, with support from the ESRD Networks, the Quality Improvement Organizations (QIOs), and the FFBI Coalition, the following strategies and policy recommendations will be implemented:

1. **Nephrologist as Leader:** Encourage and support nephrologists to take a leadership role and be accountable for vascular access management in all hemodialysis patients.
2. **Leveraging Partnerships:** Partner with organizations to improve AV fistula placement and utilization rates.
3. **Hospital Systems:** Modify hospital systems to promote AV fistula placement.
4. **Patient Self-Management:** Promote patient self-management through the stages of CKD.
5. **Addressing Access Problems:** Promote fast-track protocols for rapid identification and referral of vascular access problems, which include failure to mature, revisions of the failing AV fistula, and failure to place an AV fistula.
6. **Practitioner Training and Credentialing:** Promote training, experience, and credentialing of healthcare professionals in the area of hemodialysis vascular access management.

7. **FFBI Change Concepts:** Expand and endorse the current Change Concepts for education and promotion throughout the renal, surgical, and interventional communities.

The percentage of prevalent hemodialysis patients in the U.S. with an AV fistula as their primary vascular access was 32.4% (87,344 patients) at the beginning of 2003. By May 2009, this percentage had increased to 52.6% (179,113 patients). As a result, nearly 92,000 additional patients experienced improved adequacy, fewer hospitalizations, fewer infections, and a lowered mortality risk than those with other forms of vascular access. The dramatic change in practice patterns that produced the improvement was due to the targeted efforts of many organizations and individuals, facilitated by the Fistula First Breakthrough Initiative. However, the CMS goal, based upon achievable practice, is a prevalent AV fistula utilization rate of 66%, which requires the identification of additional opportunities for improvement.

The FFBI Strategic Plan presents recommendations for accountability and organizational, behavioral, and infrastructural changes across healthcare systems which, if implemented, will result in sustainable outcomes improvement. Coordination among all partners is essential, and CMS leadership is required.

The FFBI Strategic Plan can be viewed in full on the FFBI website [www.fistulafirst.org](http://www.fistulafirst.org).