WHITE PAPER

Value-Based Kidney Care in Practice: A Clinical Roadmap for Nephrology Groups

How CCM, RPM, and KCC Participation Drive Better Outcomes and Sustainable Care

tellihealth

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Executive Summary

Nephrology is at a crossroads. **With over 37 million Americans** affected by chronic kidney disease (CKD) and Medicare shifting more and more to value-based reimbursement models, providers face growing pressure to improve outcomes while managing costs. The CMS Kidney Care Choices (KCC) Model offers a powerful opportunity—but success depends on having the right clinical infrastructure. This paper explores how Chronic Care Management (CCM) and Remote Patient Monitoring (RPM) can help nephrology practices thrive in a value-based environment, delivering both better care and stronger care coordination.

1. Clinical Stakes of CKD

- CKD affects **15% of Medicare beneficiaries** and requires significant resources to manage.
- Care is often fragmented, leading to frequent hospitalizations and unplanned dialysis starts.
- CMS is transitioning to capitated and outcomes-based payments via the Kidney Care Choices (KCC) Model.

2. What Is the KCC Model—and Why It Matters

KCC is a CMS innovation model that encourages nephrology providers to:

- Slow CKD progression
- Reduce avoidable hospital visits
- Support home dialysis and transplant readiness
- Take accountability for total patient care

Operational Impacts on Your Nephrology Practice

CMS has announced several updates to the KKC model for CY2026 - most notably the elimination of the Kidney Care First option and the Kidney Transplant Bonus - but participation is still financially appealing due to:

- **CKD Quarterly Capitation Payments** - Steady upfront payments help support cash flow.
- **Shared Savings in CKCC Tracks** - Potentially significant bonus opportunities for care-efficient, high-performing practices.
- **Extended CKCC Duration (to 2027)** - More time to optimize performance and financial returns under CKCC structures.

3. CCM and RPM: Cornerstones of KCC Success

Chronic Care Management (CCM)

- Provides structured care coordination for patients with multiple chronic conditions
- Enables nurse-led outreach, medication reconciliations, and care gap closures

Remote Patient Monitoring (RPM)

- Supports ongoing vitals tracking from home (e.g., blood pressure, weight)
- Provides early identification of complications before they lead to hospitalization

Why It Matters:

- Both services strengthen patient engagement and proactive management, core elements in achieving success under KCC.

4. Real-World Clinical Impact

How CCM and RPM Support Better Kidney Care

Nephrology practices using Tellihealth's tools have demonstrated measurable improvements in key clinical areas:

- Fewer **ER visits and readmissions**
- Better **blood pressure management**
- More **planned dialysis** starts and **increased transplant readiness**
- Higher **patient engagement** and **health literacy**

Case Study:

Enhancing Hypertension Management in a Nephrology Practice with Tellihealth RPM

A leading nephrology practice leveraging Tellihealth's Remote Patient Monitoring (RPM) solution has demonstrated measurable clinical benefits among its highest-risk patient population. Through continuous monitoring and timely interventions, **patients who entered the program with Stage II Hypertension saw an average decrease of 7 mmHg in systolic blood pressure over a 12-month period.** This sustained improvement has led to a **4% reduction in the overall prevalence of Stage II Hypertension** within the RPM-enrolled cohort, underscoring the impact of RPM in managing chronic conditions and improving long-term outcomes.

6. Implementation Blueprint

Here's how a nephrology group can launch a value-based kidney program with Tellihealth in 30–60 days:

Step 1 **Identify eligible patients (CKD stages 4–5, ESRD, or 2+ chronic conditions)**

Step 2 **Enroll patients in RPM and/or CCM**

Step 3 **Deploy devices (for RPM) and launch nurse-led engagement**

Step 4 **Integrate performance tracking and reporting**

Step 5 **Align with KCC care planning and quality measures**

Tellihealth helps providers stay focused on patients by delivering the people, processes, and platform they need.

7. Why Tellihealth

- **Nurse-led care coordination** model with deep nephrology experience
- **Tech-enabled platform** that integrates into existing workflows
- **Compliance support** for CCM and RPM program delivery
- **Demonstrated clinical outcomes aligned** with KCC quality measures

Conclusion

Kidney Care Choices (KCC) offers nephrology providers a powerful opportunity to lead in proactive, value-based kidney care. Yet, it also brings challenges—requiring providers to elevate patient care while achieving Medicare savings. With the right infrastructure, including Chronic Care Management (CCM) and Remote Patient Monitoring (RPM), nephrology groups can deepen patient engagement, improve outcomes, and fulfill the promise of better kidney care for millions in need.

Ready to unlock the value of value-based care? Let's talk!

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