Appendix 1: The following tables extract from the Federal Register is included as references for the measure reporting requirements.

TABLE 26: Requirements for Successful Reporting on the PY 2025 ESRD QIP Reporting Measures

Measure	Reporting Frequency	Data Elements	
Ultrafiltration	4 data elements are reported for	In-Center Hemodialysis (ICHD) Kt/V Date	
	every hemodialysis (HD) Kt/V	Post-Dialysis Weight	
	session during the week of the	Pre-Dialysis Weight	
	monthly Kt/V draw, and the	Delivered Minutes of blood urea nitrogen (BUN)	
	number of sessions of dialysis	Hemodialysis	
	is reported monthly	Number of sessions of dialysis delivered by the	
		dialysis unit to the patient in the reporting	
		Month	
MedRec	Monthly	Date of the medication reconciliation.	
		Type of eligible professional who completed the	
		medication reconciliation:	
		o physician,	
		o nurse,	
		o advanced registered nurse practitioner (ARNP),	
		o physician assistant (PA),	
		o pharmacist, or	
		o pharmacy technician personnel	
		Name of eligible professional	
Clinical	1 of 6 conditions reported	Screening for clinical depression is documented as	
Depression	annually	being positive and a follow-up plan is documented.	
Screening and		Screening for clinical depression documented as	
Follow-Up		positive, a follow-up plan	
		is not documented, and the facility possesses	
		documentation that the patient is not	
		eligible.	
		Screening for clinical depression documented as	
		positive, the facility	
		possesses no documentation of a follow-up plan, and no	
		reason is given.	
		Screening for clinical depression documented as	
		negative and no follow-up plan required.	
		Screening for clinical depression not documented, but	
		the facility possesses	
		documentation stating the patient is not eligible.	
		Clinical depression screening not documented, and no	
		reason is given.	
NHSN Dialysis	Monthly	Three types of dialysis events reported:	
Event	Monthly	IV antimicrobial start:	
		positive blood culture; and	
		pus, redness, or increased swelling at the vascular	
		access site.	
Hypercalcemia**	Monthly		
COVID-19	At least one week of data each	Total uncorrected serum or plasma calcium lab values	
		Cumulative number of HCP eligible to work in the	
Vaccination	month, submitted quarterly	facility for at least one day during the reporting period	
Coverage among		and who received a complete vaccination course against	
HCP***		SARS-CoV-2.	

^{*}We are finalizing our proposal to convert the STrR reporting measure to a clinical measure beginning in PY 2025, as discussed in section IV.E.1.b of this final rule, and have updated this table accordingly.

^{**}We are finalizing our proposal to convert the Hypercalcemia clinical measure to a reporting measure beginning in PY 2025, as discussed in section IV.E.1.c of this final rule.

^{***}We are finalizing our proposal to adopt the COVID-19 Coverage among HCP reporting measure beginning in PY 2025, as discussed in section IV.E.1.a of this final rule.

Appendix 2: The following tables extract from the Federal Register is included as reference for the eligibility requirements for scoring on ESRD QIP measures.

TABLE 27: Eligibility Requirements for Scoring on ESRD QIP Measures

Measure	Minimum data requirements	CCN open date	Small facility adjuster
Kt/V Comprehensive	11 qualifying patients	N/A	11 25 qualifying patients
(Clinical)			
VAT: Long-term	11 qualifying patients	N/A	11-25 qualifying patients
Catheter Rate (Clinical)			
VAT: Standardized	11 qualifying patients	N/A	11-25 qualifying patients
Fistula Rate (Clinical)			
Hypercalcemia	11 qualifying patients	N/A	N/A
(Reporting)*	. ,		
NHSN BSI (Clinical)	11 qualifying patients	Before October 1 prior	11-25 qualifying patients
	. ,	to the performance	. , , , ,
		period that applies to	
		the program year.	
NHSN Dialysis Event	11 qualifying patients	N/A	N/A
(Reporting)			
SRR (Clinical)	11 index discharges	N/A	11-41 index discharges
STrR (Clinical)**	10 patient-years at risk	N/A	10-21 patient-years at risi
SHR (Clinical)	5 patient-years at risk	N/A	5-14 patient-years at risk
ICH CAHPS (Clinical)	Facilities with 30 or more survey-eligible	Before October 1 prior	N/A
	patients during the calendar year	to the performance	
	preceding the performance period must	period that applies to	
	submit survey results. Facilities would	the program year.	
	not receive a score if they do not obtain a		
	total of at least 30 completed surveys		
	during the performance period		
Depression Screening	11 qualifying patients	Before April 1 of the	N/A
and Follow-Up		performance	
(Reporting)		period that applies to	
		the program year.	
Ultrafiltration	11 qualifying patients	Before April 1 of the	N/A
(Reporting)		performance	
		period that applies to	
		the program year.	
MedRec (Reporting)	11 qualifying patients	Before October 1 prior	N/A
		to the performance	
		period that applies to	
		the program year.	
PPPW (Clinical)	11 qualifying patients	N/A	11-25 qualifying patients
COVID-19 Vaccination	11 qualifying healthcare personnel	N/A	N/A
Coverage among HCP	. , , , , , , , , , , , , , , , , , , ,		
(Reporting)***			

^{*} We are finalizing our proposal to convert the Hypercalcemia clinical measure to a reporting measure beginning in PY 2025, as discussed in section IV.E.1.c of this final rule.

Resources:

- PY 2025 Final Rule: https://www.federalregister.gov/documents/2022/11/07/2022-23778/medicare-program-end-stage-renal-disease-prospective-payment-system-payment-for-renal-dialysis
- CY 2023 Technical Specifications: https://www.cms.gov/files/document/cy-2023-final-technical-specifications-20221118.pdf
- KDOQI Guidelines: https://www.kidney.org/professionals/guidelines
- NHSN CDC Dialysis Component: https://www.cdc.gov/nhsn/dialysis/event/index.html
- Dialysis Facility Report: https://dialysisdata.org/

^{**}We are finalizing our proposal to convert the STrR reporting measure to a clinical measure beginning in PY 2025, as discussed in section IV.E.1.b of this final rule, and have updated this table accordingly in this final rule.

^{***}We are finalizing our proposal to adopt the COVID-19 Vaccination Coverage among HCP measure beginning in PY 2025, as discussed in section IV.E.1.a of this final rule.