

ESRD QIP Summary: Payment Years (PY) 2022 – 2025

The Centers for Medicare & Medicaid Services (CMS) administers the End-Stage Renal Disease Quality Incentive Program (ESRD QIP) to promote high-quality care in renal dialysis facilities. The program changes the way CMS pays for the treatment of ESRD patients by linking a portion of payment directly to facilities' performance on a core set of quality measures.



	PY 2022*	PY 2023*	PY 2024*	PY 2025*
Measures	<p>1 Patient & Family Engagement</p> <ul style="list-style-type: none"> In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH CAHPS) <p>4 Care Coordination</p> <ul style="list-style-type: none"> Standardized Readmission Ratio (SRR) Standardized Hospitalization Ratio (SHR) Percentage of Prevalent Patients Waitlisted (PPPW) Clinical Depression Screening and Follow-Up <p>6 Clinical Care</p> <ul style="list-style-type: none"> Kt/V Dialysis Adequacy (comprehensive) Vascular Access <ul style="list-style-type: none"> Standardized Fistula Rate (SFR) Long-term Catheter Rate Standardized Transfusion Ratio (STrR) Hypercalcemia Ultrafiltration Rate (UFR) <p>3 Safety</p> <ul style="list-style-type: none"> National Healthcare Safety Network (NHSN) Blood Stream Infection (BSI) clinical NHSN Dialysis Event Reporting Medication Reconciliation (MedRec) 	<p>1 Patient & Family Engagement</p> <ul style="list-style-type: none"> ICH CAHPS (paused) <p>4 Care Coordination</p> <ul style="list-style-type: none"> Standardized Readmission Ratio (SRR) (paused) Standardized Hospitalization Ratio (SHR) (paused) PPPW (paused) Clinical Depression Screening and Follow-Up <p>6 Clinical Care</p> <ul style="list-style-type: none"> Kt/V Dialysis Adequacy (comprehensive) (paused) Vascular Access <ul style="list-style-type: none"> Standardized Fistula Rate (SFR) (paused) Long-term Catheter Rate (paused) Standardized Transfusion Ratio (STrR) Hypercalcemia Ultrafiltration Rate (UFR) <p>3 Safety</p> <ul style="list-style-type: none"> NHSN Blood Stream Infection (BSI) clinical NHSN Dialysis Event Reporting Medication Reconciliation (MedRec) 	<p>1 Patient & Family Engagement</p> <ul style="list-style-type: none"> ICH CAHPS <p>4 Care Coordination</p> <ul style="list-style-type: none"> Standardized Readmission Ratio (SRR) Standardized Hospitalization Ratio (SHR) PPPW Clinical Depression Screening and Follow-Up <p>6 Clinical Care</p> <ul style="list-style-type: none"> Kt/V Dialysis Adequacy (comprehensive) Vascular Access <ul style="list-style-type: none"> Standardized Fistula Rate (SFR) Long-term Catheter Rate Standardized Transfusion Ratio (STrR) Hypercalcemia Ultrafiltration Rate (UFR) <p>3 Safety</p> <ul style="list-style-type: none"> NHSN Blood Stream Infection (BSI) clinical NHSN Dialysis Event Reporting Medication Reconciliation (MedRec) 	<p>1 Patient & Family Engagement</p> <ul style="list-style-type: none"> ICH CAHPS <p>3 Care Coordination</p> <ul style="list-style-type: none"> Standardized Readmission Ratio (SRR) Standardized Hospitalization Ratio (SHR) PPPW <p>4 Clinical Care</p> <ul style="list-style-type: none"> Kt/V Dialysis Adequacy (comprehensive) Vascular Access <ul style="list-style-type: none"> Standardized Fistula Rate (SFR) Long-term Catheter Rate Standardized Transfusion Ratio (STrR) <p>1 Safety</p> <ul style="list-style-type: none"> NHSN Blood Stream Infection (BSI) clinical <p>6 Reporting</p> <ul style="list-style-type: none"> Clinical Depression Screening and Follow-Up Hypercalcemia Ultrafiltration Rate (UFR) NHSN Dialysis Event Reporting Medication Reconciliation (MedRec) COVID-19 Healthcare personnel (HCP) Vaccination
Performance Period	Calendar Year (CY) 2020	CY 2021	CY 2022	CY 2023
Baseline Period	CY 2018 (achievement) CY 2019 (improvement)	CY 2019 (achievement) CY 2019 (improvement)	CY 2019 (achievement) CY 2019 (improvement)	CY 2019 and CY 2021 (achievement) CY 2022 (improvement)
Performance Standard	National Performance Rate (CY 2018)	National Performance Rate (CY 2019)	National Performance Rate (CY 2019)	National Performance Rate (CY 2019 and 2021)
Weighting	<p>Patient & Family Engagement: 15%</p> <p>Care Coordination: 30%</p> <p>Clinical Care: 40%</p> <p>Patient Safety: 15%</p>	<p>Patient & Family Engagement: 0%</p> <p>Care Coordination: 35%</p> <p>Clinical Care: 45%</p> <p>Patient Safety: 20%</p>	<p>Patient & Family Engagement: 15%</p> <p>Care Coordination: 30%</p> <p>Clinical Care: 40%</p> <p>Patient Safety: 15%</p>	<p>Patient & Family Engagement: 15%</p> <p>Care Coordination: 30%</p> <p>Clinical Care: 35%</p> <p>Patient Safety: 10%</p> <p>Reporting Measure: 10%</p>
Minimum Data Requirements	Facility needs to qualify for: <ul style="list-style-type: none"> at least one measure in two out of the four domains 	Facility needs to qualify for: <ul style="list-style-type: none"> at least one measure in two out of the four domains 	Facility needs to qualify for: <ul style="list-style-type: none"> at least one measure in two out of the four domains 	Facility needs to qualify for: <ul style="list-style-type: none"> at least one measure in two out of the five domains
Low-Volume Facility Score Adjustment	<ul style="list-style-type: none"> SRR: 11 – 41 index discharges SHR: 5 – 14 patient-years at risk All other clinical measures: 11 – 25 cases 	<ul style="list-style-type: none"> SRR: 11 – 41 index discharges SHR: 5 – 14 patient-years at risk All other clinical measures: 11 – 25 cases 	<ul style="list-style-type: none"> SRR: 11 – 41 index discharges SHR: 5 – 14 patient-years at risk All other clinical measures: 11 – 25 cases 	<ul style="list-style-type: none"> SRR: 11 – 41 index discharges STrR: 10-21 patient-years at risk SHR: 5 – 14 patient-years at risk All other clinical measures: 11 – 25 cases
Minimum Total Performance Score (TPS)	N/A (No TPS calculated)	83 points	57 points	55 points

*Please refer to the [CY 2022 ESRD PPS final rule and the CY 2023 ESRD PPS final rule](#) for additional information related to operational system issues and the effects of the COVID-19 Public Health Emergency on the ESRD QIP. FOR ADDITIONAL DETAILS: About the **program**: <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/index>; About **specifications** on each measure (including exclusions): https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/061_TechnicalSpecifications. Questions remaining after reviewing this content should be submitted via the [QualityNet Question and Answer Tool](#).