

Quality Measures Specifications for PY 2013 and PY 2014 ESRD QIP Final Rule

November 1, 2011

Anemia Management – Hemoglobin > 12 g/dl

Measure Description

This measure reports the percentage of eligible Medicare dialysis patients with a mean hemoglobin value greater than 12.0 g/dL.

Data Source

Medicare claims

Care Setting

Dialysis provider/facility

Measurement Duration

The measurement duration is 12 months. Patients with at least 4 months of eligible claims at the facility are included.

Improvement Notation

Better quality=Lower Proportion

Denominator

The number of eligible Medicare dialysis patients at the facility during the measurement (baseline or performance) period.

The denominator will include all dialysis patients 18 years and older with ESRD for 90 days or longer, who are treated with erythropoiesis stimulating agents (ESAs), and have valid hemoglobin values.

A hemoglobin value is considered valid if it is greater than or equal to 5 g/dl and less than or equal to 20 g/dl. When hematocrit is reported on the claim it is changed to hemoglobin by dividing by 3 and rounding to the first decimal place. After the criteria above are met we restrict to the last claim of the month for a patient at a facility. A patient must have at least 4 months of eligible claims at the facility to be included in the denominator.

Denominator Exclusions

Claims are excluded if any of the following criteria are met:

- Patient is less than 18 years old as of the start of the claim, or
- Patient is in the first 89 days of ESRD as of the start of the claim, or
- Patient's reported hemoglobin value (or hematocrit value divided by 3) is less than 5 g/dl or greater than 20 g/dl, or
- Patient is not treated with ESAs according to the claim, specifically epoetin alfa or darbepoetin alfa, or
- Patient has fewer than 4 months of eligible claims at the facility in the measurement period.

Numerator

Number of eligible Medicare dialysis patients at the facility during the measurement period with a mean hemoglobin value greater than 12.0 g/dl.

Patients from the denominator are included in the numerator if the mean of their monthly hemoglobin values (rounded to a single decimal place) is greater than 12.0 g/dl.

Quality Measures Specifications for PY 2013 and PY 2014 ESRD QIP Final Rule

November 1, 2011

Hemodialysis Adequacy – Urea Reduction Ratio (URR)

Measure Description

This measure reports the percentage of eligible Medicare in-center hemodialysis (HD) patients with a median urea reduction ratio (URR) of at least 65%.

Data Source

Medicare claims

Care Setting

Dialysis provider/facility

Measurement Duration

The measurement duration is 12 months. Patients with at least 4 months of eligible claims at the facility are included.

Improvement Notation

Better quality=Higher Proportion

Denominator

Number of eligible Medicare in-center hemodialysis patients at the facility during the measurement period (baseline or performance).

The denominator will include all in-center hemodialysis patients 18 years and older with ESRD for 183 days or longer, and whose last claim of the month for the patient at the facility indicates thrice-weekly in-center hemodialysis with a valid URR reading.

Denominator Exclusions

Claims are excluded if any of the following criteria are met:

- Patient is less than 18 years old as of the start of the claim, or
- Patient has fewer than 7 dialysis sessions per month (HCPCS modifier=G6), or
- Patient is in the first 182 days of ESRD as of the start of the claim, or
- Patient is on home hemodialysis or peritoneal dialysis (PD) according to the claim, or
- Patient is on frequent hemodialysis (see below), or
- Patient has fewer than 4 months of eligible claims at a facility in the measurement period.

Frequent hemodialysis claims are identified for exclusions in three ways:

- If the claim covers 7 or fewer days, the claim must have had fewer than 4 sessions documented.
- If the claim covers more than 7 days, the claim must have had a rate of fewer than 4 sessions per week.
- The beginning date of the claim must not have occurred in a month during which the SIMS database recorded the patient's modality as frequent in-center hemodialysis (defined as 5 or more dialysis sessions per week).

Numerator

The number of eligible Medicare in-center hemodialysis patients with a median urea reduction ratio (URR) category greater than or equal to 65%.

Patients from the denominator are included in the numerator if the median of their monthly URR category indicates a value of at least 65%.