

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

TABLE 18: Requirements for Successful Reporting of the Previously Finalized and Newly Proposed ESRD QIP Reporting Measures for PY 2026

Measure	Reporting Frequency	Data Elements
MedRec	Monthly	<ul style="list-style-type: none"> • Date of the medication reconciliation. • Type of eligible professional who completed the medication reconciliation: <ul style="list-style-type: none"> 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
NHSN Dialysis Event	Monthly	Three types of dialysis events reported: <ul style="list-style-type: none"> • IV antimicrobial start; • positive blood culture; and • pus, redness, or increased swelling at the vascular access site.
Hypercalcemia	Monthly	Total uncorrected serum or plasma calcium lab values
Measure	Reporting Frequency	Data Elements
COVID-19 Vaccination Coverage Among HCP*	At least one week of data each month, submitted quarterly	Cumulative number of HCP eligible to work in the facility for at least one day during the reporting period and who received an up to date vaccination course against SARS-CoV-2.
Facility Commitment to Health Equity**	Annually	Domains to which facility must attest affirmatively: <ul style="list-style-type: none"> • Equity is a Strategic Priority • Data Collection • Data Analysis • Quality Improvement • Leadership Engagement

* We are finalizing our proposal to update the COVID-19 Coverage Among HCP reporting measure beginning with PY 2026, as discussed in section IV.C.3 of this final rule.

** We are finalizing our proposal to add the Facility Commitment to Health Equity reporting measure beginning with PY 2026, as discussed in section IV.C.2 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 19a: Previously Finalized Eligibility Requirements for Scoring on ESRD QIP Measures

Measure	Minimum data requirements	CCN open date	Small facility adjuster
Kt/V Comprehensive (Clinical)	11 qualifying patients	N/A	11-25 qualifying patients
VAT: Long-term Catheter Rate (Clinical)	11 qualifying patients	N/A	11-25 qualifying patients
VAT: Standardized Fistula Rate (Clinical)*	11 qualifying patients	N/A	11-25 qualifying patients
Hypercalcemia (Reporting)	11 qualifying patients	Before September 1 of the performance period that applies to the program year.	N/A
NHSN BSI (Clinical)	11 qualifying patients	Before October 1 prior to the performance period that applies to the program year.	11-25 qualifying patients
NHSN Dialysis Event (Reporting)	11 qualifying patients	Before September 1 of the performance period that applies to the program year.	N/A
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 risk
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 patients during the calendar year preceding the performance period must submit survey results. Facilities would not receive a score if they do not obtain a total of at least 30 completed surveys during the performance period	Before October 1 prior to the performance period that applies to the program year.	N/A
Depression Screening and Follow-Up (Reporting)**	11 qualifying patients	Before September 1 of the performance period that applies to the program year.	N/A
Ultrafiltration (Reporting)***	11 qualifying patients	Before September 1 of the performance period that applies to the program year.	N/A
MedRec (Reporting)	11 qualifying patients	Before September 1 of the performance period that applies to the program year.	N/A
PPPW (Clinical)	11 qualifying patients	N/A	11-25 qualifying patients
COVID-19 Vaccination Coverage Among HCP (Reporting)****	N/A	Before September 1 of the performance period that applies to the program year.	N/A

* We are finalizing our proposal to remove the Standardized Fistula Rate clinical measure beginning in PY 2026, as discussed in section IV.C.5 of this final rule, and removed from Table 19b.

** We are finalizing our proposal to update the Clinical Depression Screening and Follow-Up measure and convert it to a clinical measure beginning with PY 2026, as discussed in section IV.C.4 of this final rule.

*** We are finalizing our proposal to remove the Ultrafiltration Rate reporting measure beginning in PY 2026, as discussed in section IV.C.5 of this final rule, and removed from Table 19b.

**** We are finalizing our proposal to update the COVID-19 Vaccination Coverage Among HCP measure beginning with PY 2026, as discussed in section IV.C.3 of this final rule.