

ESRD QIP Summary: Payment Years (PY) 2025 – 2028

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 2025*	PY 2026	PY 2027	PY 2028
Measures	1 Patient & Family Engagement <ul style="list-style-type: none"> In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH CAHPS) Survey 3 Care Coordination <ul style="list-style-type: none"> Standardized Readmission Ratio (SRR) Standardized Hospitalization Ratio (SHR) Percentage of Prevalent Patients Waitlisted (PPPW) 3 Clinical Care <ul style="list-style-type: none"> Kt/V Dialysis Adequacy (comprehensive) Vascular Access Type Topic <ul style="list-style-type: none"> Standardized Fistula Rate (SFR) Long-term Catheter Rate (LTC) Standardized Transfusion Ratio (STrR) 1 Safety <ul style="list-style-type: none"> NHSN Blood Stream Infection (BSI) 6 Reporting <ul style="list-style-type: none"> Clinical Depression Screening and Follow-Up Hypercalcemia Ultrafiltration Rate (UFR) NHSN Dialysis Event Medication Reconciliation (MedRec) COVID-19 Healthcare Personnel (HCP) Vaccination 	1 Patient & Family Engagement <ul style="list-style-type: none"> ICH CAHPS 4 Care Coordination <ul style="list-style-type: none"> SRR SHR PPPW Clinical Depression Screening and Follow-Up 3 Clinical Care <ul style="list-style-type: none"> Kt/V Dialysis Adequacy (comprehensive) LTC STrR 1 Safety <ul style="list-style-type: none"> NHSN BSI 5 Reporting <ul style="list-style-type: none"> Hypercalcemia NHSN Dialysis Event MedRec COVID-19 HCP Vaccination Facility Commitment to Health Equity 	1 Patient & Family Engagement <ul style="list-style-type: none"> ICH CAHPS 4 Care Coordination <ul style="list-style-type: none"> SRR SHR PPPW Clinical Depression Screening and Follow-Up 3 Clinical Care <ul style="list-style-type: none"> Kt/V Dialysis Adequacy Topic (includes 4 individual Kt/V measures: adult HD Kt/V, pediatric HD Kt/V, adult PD Kt/V, pediatric PD Kt/V) LTC STrR 1 Safety <ul style="list-style-type: none"> NHSN BSI 3 Reporting <ul style="list-style-type: none"> Hypercalcemia MedRec COVID-19 HCP Vaccination 	1 Patient & Family Engagement <ul style="list-style-type: none"> ICH CAHPS 4 Care Coordination <ul style="list-style-type: none"> SRR SHR PPPW Clinical Depression Screening and Follow-Up 3 Clinical Care <ul style="list-style-type: none"> Kt/V Dialysis Adequacy Topic (includes 4 individual Kt/V measures: adult HD Kt/V, pediatric HD Kt/V, adult PD Kt/V, pediatric PD Kt/V) LTC STrR 1 Safety <ul style="list-style-type: none"> NHSN BSI 3 Reporting <ul style="list-style-type: none"> Hypercalcemia MedRec COVID-19 HCP Vaccination
Performance Period	CY 2023	CY 2024	CY 2025	CY 2026
Baseline Period	CY 2019 and CY 2021 (achievement) CY 2022 (improvement)	CY 2022 (achievement) CY 2023 (improvement)	CY 2023 (achievement) CY 2024 (improvement)	CY 2024 (achievement) CY 2025 (improvement)
Performance Standard	National Performance Rate (CY 2019 and 2021)	National Performance Rate (CY 2022)	National Performance Rate (CY 2023)	National Performance Rate (CY 2024)
Domain Weights	Patient & Family Engagement: 15% Care Coordination: 30% Clinical Care: 35% Safety: 10% Reporting: 10%	Patient & Family Engagement: 15% Care Coordination: 30% Clinical Care: 35% Safety: 10% Reporting: 10%	Patient & Family Engagement: 15% Care Coordination: 30% Clinical Care: 35% Safety: 10% Reporting: 10%	Patient & Family Engagement: 15% Care Coordination: 30% Clinical Care: 35% Safety: 10% Reporting: 10%
Minimum Data Requirements	Facility needs to qualify for at least one measure in two out of the five domains	Facility needs to qualify for at least one measure in two out of the five domains	Facility needs to qualify for at least one measure in two out of the five domains	Facility needs to qualify for at least one measure in two out of the five domains
Small Facility Adjustment	<ul style="list-style-type: none"> SRR: 11-41 index discharges SHR: 5-14 patient-years at risk STrR: 10-21 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 STrR: 10-21 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 STrR: 10-21 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 STrR: 10-21 patient-years at risk All other clinical measures: 11-25 cases
Minimum Total Performance Score (TPS)	55 points	53 points	56 points	57 points

*Please refer to the [CY 2022 ESRD PPS final rule](https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/index) and the [CY 2023 ESRD PPS final rule](https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/index) 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 see: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/index> and for measure specifications (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](https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/061_TechnicalSpecifications).

