

### Hematocrit Level in ESRD Patients

---

*This measure is to be reported for all patients aged 18 years and older with ESRD undergoing hemodialysis — a minimum of **once** per reporting period.*

#### Measure description

Percentage of patients aged 18 years and older with a diagnosis of end-stage renal disease undergoing hemodialysis with a documented hematocrit value greater than or equal to 33 (or a hemoglobin value greater than or equal to 11)

#### What will you need to report for each patient with ESRD for this measure?

If you select this measure for reporting, you will report:

- The hematocrit or hemoglobin value:
  - Hematocrit  $\geq$  33 or hemoglobin  $\geq$  11 OR
  - Hematocrit  $<$  33 or hemoglobin  $<$  11

#### What if this process or outcome of care is not appropriate for your patient?

There may be times when it is not appropriate to document the hematocrit value, due to:

- Documented reasons (eg, patient was not an eligible candidate for hematocrit [hemoglobin] measure)

In these cases, you will need to indicate that a documented reason applies, specify the reason on the worksheet and in the medical chart. The office/billing staff will then report the G-code that represents these valid reasons (also called exclusions).

# End Stage Renal Disease (ESRD)

## Hematocrit Level in ESRD Patients

### PQRI Data Collection Sheet

Patient's Name	Practice Medical Record Number (MRN)	Birth Date (mm/dd/yyyy) / /	<input type="checkbox"/> Male <input type="checkbox"/> Female
National Provider Identifier (NPI)		Date of Service	

#### Clinical Information

#### Billing Information

#### Step 1 Is patient eligible for this measure?

	Yes	No	Code Required on Claim Form
Patient is aged 18 years and older.	<input type="checkbox"/>	<input type="checkbox"/>	Verify date of birth on claim form.
Patient has a diagnosis of ESRD.	<input type="checkbox"/>	<input type="checkbox"/>	Refer to coding specifications document for list of applicable codes.
There is either a G-Code for ESRD services or a CPT Procedure Code for hemodialysis.	<input type="checkbox"/>	<input type="checkbox"/>	
If <b>No</b> is checked for any of the above, STOP. Do not report a G-Code.			

#### Step 2 Does patient meet or have an acceptable reason for not meeting the measure?

Hematocrit or Hemoglobin Value	Yes	No	Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)
Documented; hematocrit $\geq$ 33 or hemoglobin $\geq$ 11	<input type="checkbox"/>	<input type="checkbox"/>	G8078
Documented; hematocrit $<$ 33 or hemoglobin $<$ 11	<input type="checkbox"/>	<input type="checkbox"/>	G8079
Not documented for the following reason: <ul style="list-style-type: none"> <li>Documented reason (eg, patient was not an eligible candidate for hematocrit [hemoglobin] measure)</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	G8080
Document reason here and in medical chart. _____ _____			If <b>No</b> is checked for <b>all</b> of the above, report G8387 (End-stage renal disease patient with a hematocrit OR hemoglobin not documented.)

### Hematocrit Level in ESRD Patients

---

#### Coding Specifications

Codes required to document patient has ESRD and is receiving hemodialysis:

An ICD-9 diagnosis code and either a G-code for ESRD or a CPT procedure code are required to identify patients to be included in this measure.

#### ESRD ICD-9 diagnosis codes

- 585.6 (End-stage renal disease)

#### AND either

- G0314, G0315, G0316, G0317, G0318, G0319 (ESRD related services during the course of treatment),
- G0322, G0323 (ESRD related services for home dialysis patients),
- G0326, G0327 (ESRD related services for home dialysis [less than full month])

#### OR

#### CPT procedure codes

- 90935, 90937 (hemodialysis)

Quality codes for this measure (one of the following for every eligible patient):

#### G-Code descriptors

(Data Collection sheet should be used to determine appropriate combination of codes.)

- **G8078:** End-stage renal disease patient with documented hematocrit greater than or equal to 33 (or hemoglobin greater than or equal to 11)
- **G8079:** End-stage renal disease patient with documented hematocrit less than 33 (or hemoglobin less than 11)
- **G8080:** Clinician documented that end-stage renal disease patient was not an eligible candidate for hematocrit (hemoglobin) measure
- **G8387:** End-stage renal disease patient with a hematocrit OR hemoglobin not documented

THE MEASURES AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.

Limited proprietary coding is contained in the Measure specifications for convenience. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets.

All liability is disclaimed for use or accuracy of any Current Procedural Terminology (CPT®) or other coding contained in the specifications.

CPT® contained in the Measures specifications is copyright 2006 American Medical Association.

PQRI 2007 Measure 38, Effective Date 07/01/2007  
CPT® copyright 2006 American Medical Association