Hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula

*This measure is to be reported **each time** a procedure for hemodialysis access is performed for patients aged 18 years and older with advanced chronic kidney disease or end stage renal disease during the reporting period. It is anticipated that clinicians who perform the listed surgical procedures as specified in the denominator coding will submit this measure.*

Measure description

Percentage of patients aged 18 years and older with a diagnosis of advanced chronic kidney disease (CKD) (stage 4 or 5) or end stage renal disease (ESRD) requiring hemodialysis vascular access documented by surgeon to have received autogenous AV fistula

What will you need to report for each patient undergoing a procedure for hemodialysis access for this measure?

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

■ Whether or not you performed autogenous AV fistula

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

There may be times when it is not appropriate to perform autogenous AV fistula, due to:

■ Documented reasons (eg, patient was not an eligible candidate for autogenous AV fistula)

In these cases, you will need to indicate that a documented reason applies, and 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).