Dialysis Facility Report for Fiscal Year (FY) 2016

Purpose of the Report

The *Dialysis Facility Report (DFR) for FY 2016* is provided as a resource for characterizing selected aspects of clinical experience at this facility relative to other caregivers in this state, ESRD Network, and across the United States. Since these data could be useful in quality improvement and assurance activities, each state's surveying agency may utilize this report as a resource during the FY 2016 survey and certification process.

This report has been prepared for this facility by the University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) with funding from the Centers for Medicare & Medicaid Services (CMS) and is based primarily on Medicare claims and data collected for CMS. It is the twentieth in a series of annual reports. This is one of 6,620 reports that have been distributed to ESRD providers in the U.S.

This DFR includes data specific to CCN(s): 502553

Overview: This report includes summaries of patient characteristics, treatment patterns, and patient outcomes for chronic dialysis patients who were treated in this facility between January 2011 and December 2014. Mortality, hospitalization, and transplantation statistics are reported for a three- or four-year period. Regional and national averages are included to allow for comparisons. Several of the summaries of patient mortality, hospitalization, and transplantation are adjusted to account for the characteristics of the patient mix at this facility, such as age, sex and diabetes as a cause of ESRD. Unless otherwise specified, data refer to hemodialysis (HD) and peritoneal dialysis (PD) patients combined.

Selected highlights from this report are given on pages 2 through 4. For a complete description of the methods used to calculate the statistics in this report, please see the *Guide to the Dialysis Facility Reports for FY 2016.* The *Guide* may be downloaded from the methodology section of the Dialysis Data website at www.DialysisData.org.

What's New This Year: As part of a continuing effort to improve the quality and relevance of this report for your facility, the following changes have been incorporated into the DFR for FY 2016. A new section reporting readmission summaries for each year along with regional comparison values have been added to Table 2. The CROWNWeb clinical data table (Table 14) has added information on the ultrafiltration ratio among hemodialysis patients.

How to Submit Comments

Between July 15, 2015 and August 15, 2015, facilities may submit comments to their state surveyor or UM-KECC by visiting www.DialysisData.org, logging on to view their report, and clicking on the **Comments & Inquiries** tab. Questions or comments after the comment period is over may be submitted to us directly at DialysisData@umich.edu or 1-855-764-2885.

(1) **State Surveyor:** Dialysis facilities may submit comments on the DFR for their state's surveyors. State surveyor(s) will receive a copy of their DFR with the comments they submitted in September 2015.

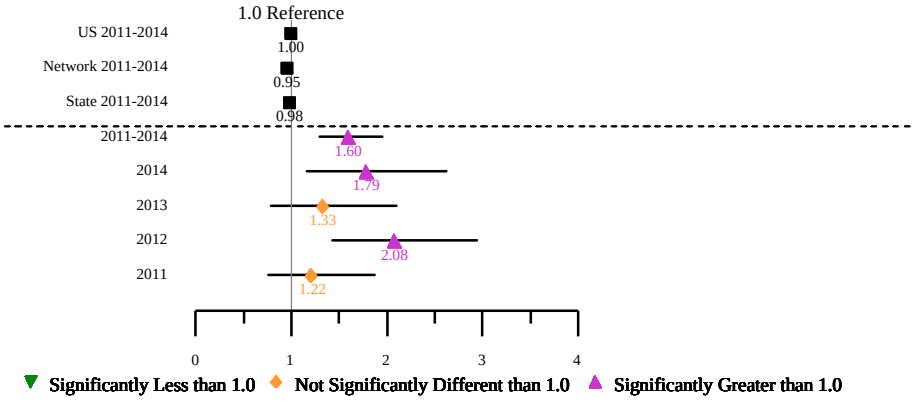
(2) **UM-KECC:** Submit questions or suggestions to improve the DFR to UM-KECC. These comments will not be shared with CMS or your state surveyor.

Facility Highlights

Standardized Mortality Ratio (SMR) (Table 1):

- At this facility, the 2011-2014 SMR is 1.60, which is 60% more deaths than expected. Among all U.S. facilities, 95% of facilities had a four-year SMR (2011-2014) lower than 1.60. This difference is statistically significant (p<0.05), so this higher mortality is unlikely to be due to random chance and probably represents a real difference from the expected mortality in the nation. The 2011-2014 SMR of observed to expected deaths is 0.98 and 0.95 for your State and Network, respectively.

The markers show the values of the SMR for this facility, State, Network, and Nation. The bolded horizontal line shows the range of uncertainty due to random variation (95% confidence interval; significant if it does not cross the 1.0 reference line). Regional and national SMR are plotted above the dotted line to allow for comparisons to facility values.

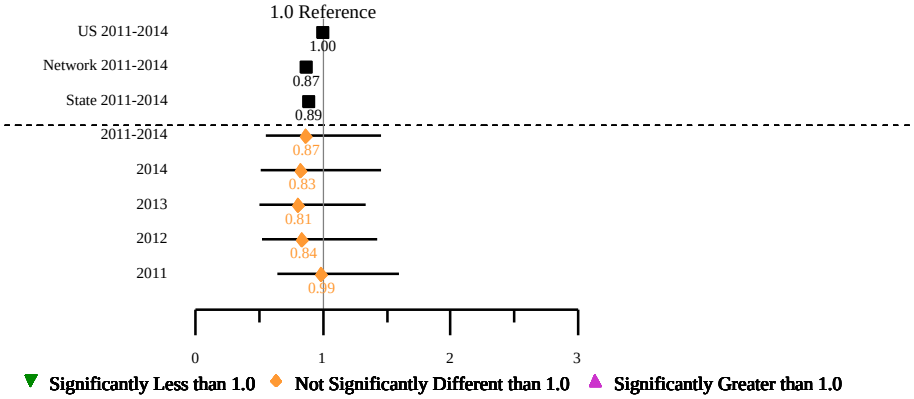


- At this facility, the 2011-2013 first-year SMR of observed to expected deaths is 0.75, which is 25% fewer deaths than expected at this facility. Among all U.S. facilities, 31% of facilities had a first-year SMR lower than 0.75. This difference is not statistically significant (p>=0.05), so this lower mortality could plausibly be just a chance occurrence. The first-year SMR (2011-2013) of observed to expected deaths is 0.85 and 0.83 for your State and Network, respectively.

Standardized Hospitalization Ratio (SHR) (Table 2):

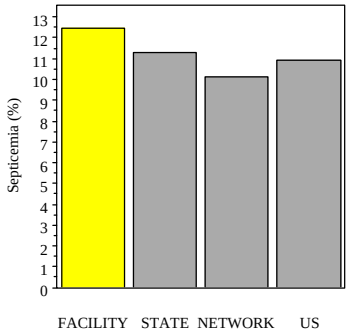
- The 2011-2014 SHR (ED) at this facility is 0.97, which is 3% fewer ED visits than expected. This difference is not statistically significant (p>=0.05), so this lower ED visit ratio could plausibly be just a chance occurrence. The 2011-2014 SHR (ED) for your State and Network is 0.97 and 0.95, respectively.
- The 2011-2014 SHR (Days) at this facility is 0.75, which is 25% fewer days hospitalized than expected. This difference is not statistically significant (p>=0.05), so this lower hospitalization could plausibly be just a chance occurrence. The 2011-2014 SHR (Days) for your State and Network is 0.72 and 0.70, respectively.
- The 2011-2014 SHR (Admissions) at this facility is 0.87, which is 13% fewer admissions hospitalized than expected. This difference is not statistically significant (p>=0.05), so this lower hospitalization could plausibly be just a chance occurrence. The 2011-2014 SHR (Admissions) for your State and Network is 0.89 and 0.87, respectively.

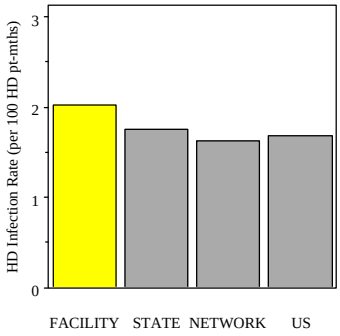
The markers show the values of the SHR (Admissions) for this facility, State, Network, and Nation. The bolded horizontal line shows the range of uncertainty due to random variation (95% confidence interval; significant if it does not cross the 1.0 reference line). Regional and national SHR (Admissions) are plotted above the dotted line to allow for comparisons to facility values.

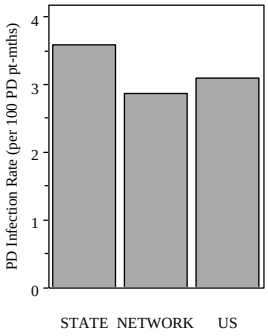


Infection (Tables 2 and 8):

- The percentage of Medicare dialysis patients at this facility hospitalized with septicemia during 2011-2014 was 12.5%, compared to 11.3% in your State, 10.1% in your Network, and 10.9% nationally.
- The rate of HD infection among HD patients at this facility in 2014 was 2.0 per 100 HD patient-months, compared to 1.7 in your State, 1.6 in your Network, and 1.7 nationally.
- The rate of PD catheter-related infection is unavailable. The rates of PD catheter-related infection are 3.6, 2.9, and 3.1 for your State, Network and U.S., respectively.







Transplantation (Table 3):

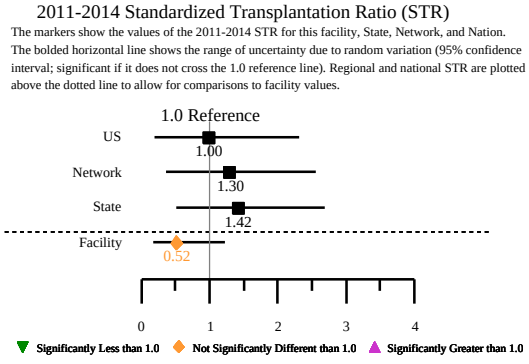
- Of the patients under age 70 treated at this facility during 2011-2014 who had not previously received a transplant, 2% were transplanted annually, while a rate of 4% would be expected for these patients.
- The 2011-2014 Standardized 1st Transplantation Ratio (STR) of observed to expected number of patients transplanted for this facility is 0.52, which is 48% lower than expected for this facility. This difference is not statistically significant (p>=0.05) and is plausibly due to random chance. The 2011-2014 STR for your State and Network is 1.42 and 1.30, respectively.

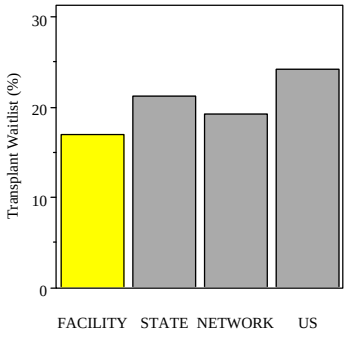
Transplant Waitlist (Table 4):

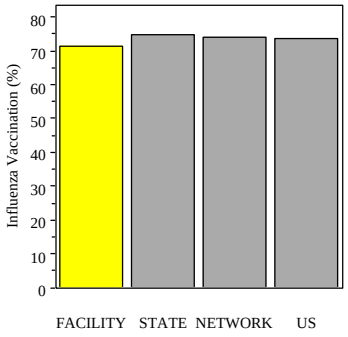
- Among the 71 dialysis patients under age 70 treated at this facility on December 31, 2014, 17% were on the kidney transplant waitlist compared to 24% nationally. This difference is not statistically significant (p>=0.05) and is plausibly due to random chance.The percentage of patients on the kidney transplant waitlist on December 31, 2014 in your State and Network is 21% and 19%, respectively.

Influenza Vaccination (Table 5):

- Among the 70 Medicare dialysis patients treated at this facility on December 31, 2014, 71% were vaccinated between August 1 and December 31, 2014 compared to 74% nationally. This difference is not statistically significant (p>=0.05) and is plausibly due to random chance. The percentage of patients vaccinated in your State, Network, and nation is 75%, 74%, and 74%, respectively.





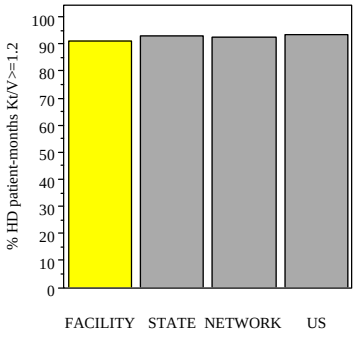


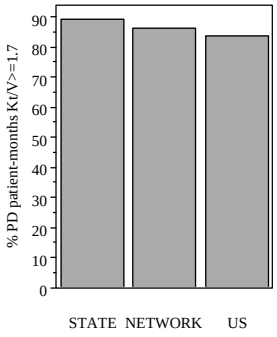
Practice Patterns (Tables 6 and 7):

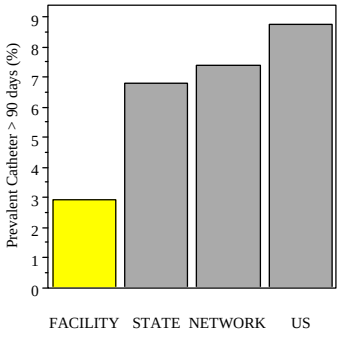
- Among the 76 ESA-treated dialysis patients included in the analysis in 2014, the average hemoglobin calculated is 10.4 g/dL, compared to 10.5 g/dL in your State, 10.5 g/dL in your Network, and 10.5 g/dL nationally.
- Among the 79 HD patients in this facility included in the analysis in 2014, 100% had URR above the KDOQI minimum value for URR (65%), compared to 99% in your State, 99% in your Network, and 99% nationally.
- In 2014, 91% of eligible HD patient-months had a Kt/V >=1.2, compared to 93% in your State, 93% in your Network, and 93% nationally.
- In 2014, the percent of eligible PD patient-months that had a Kt/V >=1.7 is unavailable. The percent of patients with Kt/V>=1.7 in your State, Network, and US is 89%, 86%, and 84% respectively.
- At this facility in 2014, an average of 32% of incident patients had arteriovenous (AV) fistulae in place, compared to 31% in your State, 30% in your Network, and 22% nationally.
- Of the prevalent patients receiving hemodialysis treatment at this facility in 2014, 3% had a catheter which had been in place for at least 90 days as their only vascular access, compared to 7% in your State, 7% in your Network, and 9% nationally.

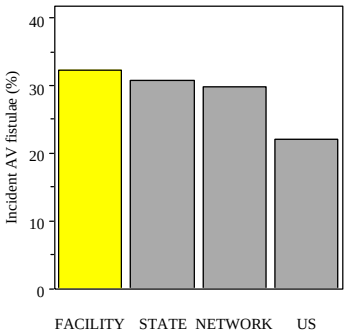
Patient Characteristics (Tables 9 and 10):

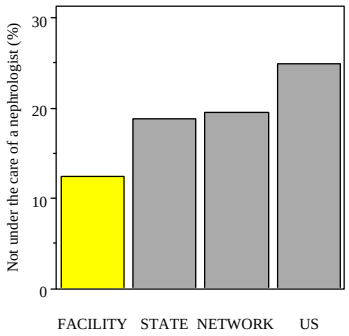
- Among the 32 patients with Medical Evidence Forms (CMS-2728) indicating treatment at this facility during 2014:
  - 13% of these patients were not under the care of a nephrologist before starting dialysis, compared to 19% in your State, 20% in your Network, and 25% nationally.
  - 50% of these patients were informed of their transplant options, compared to 70% in your State, 74% in your Network, and 83% nationally.
- Among the patients treated at this facility on December 31, 2014, 12% were treated in a nursing home during the year, compared to 14% nationally.

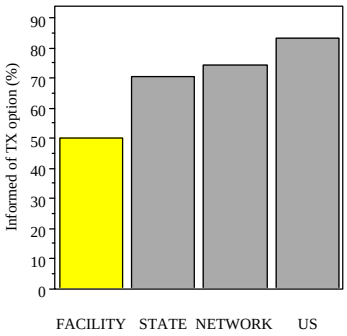












Prepared by
The University of Michigan Kidney Epidemiology and Cost Center (UM-KECC)
under contract with the Centers for Medicare & Medicaid Services

TABLE 1: Mortality Summary for All Dialysis Patients (2011-14) & New Dialysis Patients (2011-13) [*1]

		This Facility					Regional Averages [*2], per Year, 2011-2014		
	Measure Name	2011	2012	2013	2014	2011-2014	State	Network	U.S.
All Patients: Death Rates									
1a	Patients (n=number)	128	135	122	135	520 [*8]	96.3	79.7	93.3
1b	Patient-years (PY) at risk (n)	81.0	80.5	83.3	89.2	334.0 [*8]	67.7	56.0	63.4
1c	Deaths (n)	21	32	18	26	97 [*8]	12.5	10.2	11.2
1d	Expected deaths (n)	17.2	15.4	13.5	14.6	60.7 [*8]	12.7	10.6	11.2
All Patients: Categories of Death									
1e	Withdrawal from dialysis prior to death (% of 1c)	42.9	40.6	33.3	26.9	36.1	40.2	41.3	25.3
1f	Death due to Infections (% of 1c)	52.4	15.6	11.1	15.4	22.7	14.1	14.0	12.8
	Death due to Cardiac causes (% of 1c)	42.9	40.6	66.7	50.0	48.5	37.2	40.2	44.9
1g	Dialysis unrelated deaths [*3] (n; excluded from SMR)	0	0	0	0	0 [*8]	0.1	0.1	0.1
All Patients: Standardized Mortality Ratio (SMR)									
1h	SMR [*4]	1.22	2.08	1.33	1.79	1.60	0.98	0.95	1.00
1i	P-value [*5]	0.418	<0.01	0.280	<0.01	<0.01	n/a	n/a	n/a
1j	Confidence interval for SMR [*6]								
	High (97.5% limit)	1.87	2.94	2.10	2.62	1.95	n/a	n/a	n/a
	Low (2.5% limit)	0.76	1.42	0.79	1.17	1.30	n/a	n/a	n/a
1k	SMR percentiles for this facility (i.e., percent of facilities with lower mortality rates) [*7]								
	In this State	72	97	87	97	96	n/a	n/a	n/a
	In this Network	74	97	88	96	96	n/a	n/a	n/a
	In the U.S.	72	97	80	94	95	n/a	n/a	n/a
	New Patients: First Year Death Rates	**2011**	**2012**	**2013**		**2011-2013**	**Regional Averages [*2], per Year, 2011-2013**		
1l	New patients (n=number)	24	33	27		84 [*8]	20.3	17.1	17.5
1m	Patient-years (PY) at risk (n)	22.0	27.4	24.5		73.9 [*8]	18.0	15.1	15.2
1n	Deaths (n)	6	8	3		17 [*8]	3.6	3.0	3.6
1o	Expected deaths (n)	9.3	6.8	6.4		22.5 [*8]	4.2	3.6	3.6
New Patients: Categories of Deaths									
1p	Withdrawal from dialysis prior to death (% of 1n)	50.0	25.0	33.3		35.3	42.1	42.8	27.2
1q	Death due to Infections (% of 1n)	0.0	12.5	33.3		11.8	13.8	13.5	11.6
	Death due to Cardiac causes (% of 1n)	33.3	50.0	33.3		41.2	34.5	39.0	40.5
New Patients: First Year Standardized Mortality Ratio (SMR)									
1r	SMR [*4]	0.65	1.17	0.47		0.75	0.85	0.83	1.00
1s	P-value [*5]	0.364	0.752	0.236		0.286	n/a	n/a	n/a
1t	Confidence interval for SMR [*6]								
	High (97.5% limit)	1.41	2.31	1.37		1.21	n/a	n/a	n/a
	Low (2.5% limit)	0.24	0.51	0.10		0.44	n/a	n/a	n/a
1u	First Year SMR percentiles for this facility (i.e., percent of facilities with lower mortality rates) [*7]								
	In this State	43	69	27		35	n/a	n/a	n/a
	In this Network	40	71	29		40	n/a	n/a	n/a
	In the U.S.	31	64	24		31	n/a	n/a	n/a

n/a = not applicable
[*1] See *Guide, Section IV*.
[*2] Values are shown for the average facility, annualized.
[*3] Defined as deaths due to street drugs and accidents unrelated to treatment.
[*4] Calculated as a ratio of deaths to expected deaths (1c to 1d for all patients, 1n to 1o for new patients);not shown if there are fewer than 3 expected deaths.
[*5] A p-value less than 0.05 indicates that the difference between the actual and expected mortality is probably real and is not due to random chance alone, while a p-value greater than or equal to 0.05 indicates that the difference could plausibly be due to random chance.
[*6] The confidence interval range represents uncertainty in the value of the SMR due to random variation.
[*7] All facilities are included in ranking, regardless of the number of expected deaths.
[*8] Sum of 4 years (all patients) or 3 years (new patients) used for calculations; should not be compared to regional averages.

TABLE 2: Hospitalization Summary for Medicare Dialysis Patients [*1], 2011-2014

		This Facility					Regional Averages [*2], per Year, 2011-2014		
	Measure Name	2011	2012	2013	2014	2011-2014	State	Network	U.S.
Medicare Dialysis Patients									
2a	Medicare dialysis patients (n)	103	110	100	104	417 [*3]	77.2	62.9	73.0
2b	Patient-years (PY) at risk (n)	62.3	61.6	64.9	71.1	259.9 [*3]	50.9	40.8	45.6
Days Hospitalized Statistics									
2c	Total days hospitalized (n)	722	663	549	928	2862 [*3]	493.5	379.7	604.1
2d	Expected total days hospitalized (n)	1033.7	918.6	913.6	949.8	3815.8 [*3]	685.6	542.0	605.4
2e	Standardized Hospitalization Ratio (Days) [*4]	0.70	0.72	0.60	0.98	0.75	0.72	0.70	1.00
2f	P-value [*5]	0.347	0.404	0.173	0.999	0.418	n/a	n/a	n/a
2g	Confidence interval for SHR (Days) [*6]								
	High (97.5% limit)	1.40	1.45	1.22	1.81	1.45	n/a	n/a	n/a
	Low (2.5% limit)	0.38	0.40	0.33	0.55	0.41	n/a	n/a	n/a
2h	Percentiles for this facility (i.e., % of facilities with lower hospitalization rates [days]) [*7]								
	In this State	60	53	35	81	60	n/a	n/a	n/a
	In this Network	62	60	39	84	64	n/a	n/a	n/a
	In the U.S.	24	27	15	55	25	n/a	n/a	n/a
Admission Statistics									
2i	Total admissions (n)	138	106	101	112	457 [*3]	85.8	66.3	84.8
2j	Expected total admissions (n)	139.4	125.5	125.4	134.5	524.8 [*3]	96.5	76.5	84.8
2k	Standardized Hospitalization Ratio (Admissions) [*4]	0.99	0.84	0.81	0.83	0.87	0.89	0.87	1.00
2l	P-value [*5]	0.999	0.560	0.421	0.569	0.655	n/a	n/a	n/a
2m	Confidence interval for SHR (Admissions) [*6]								
	High (97.5% limit)	1.60	1.42	1.33	1.46	1.46	n/a	n/a	n/a
	Low (2.5% limit)	0.64	0.52	0.50	0.51	0.55	n/a	n/a	n/a
2n	Percentiles for this facility (i.e., % of facilities with lower hospitalization rates [admissions]) [*7]								
	In this State	75	40	38	45	45	n/a	n/a	n/a
	In this Network	73	46	45	48	53	n/a	n/a	n/a
	In the U.S.	53	33	27	31	34	n/a	n/a	n/a
2o	Diagnoses associated with hospitalization (% of 2a) [*8]								
	Septicemia	10.7	12.7	13.0	13.5	12.5	11.3	10.1	10.9
	Acute myocardial infarction	1.9	2.7	4.0	3.8	3.1	4.5	4.4	4.2
	Congestive heart failure	31.1	19.1	23.0	33.7	26.6	22.6	21.1	23.7
	Cardiac dysrhythmia	23.3	22.7	16.0	21.2	20.9	17.6	16.1	16.2
	Cardiac arrest	0.0	2.7	2.0	4.8	2.4	2.0	1.9	2.1
2p	One day admissions (% of 2i)	14.5	14.2	16.8	15.2	15.1	15.9	15.6	12.5
2q	Average length of stay (days per admission; 2c/2i)	5.2	6.3	5.4	8.3	6.3	5.8	5.7	7.1

(continued)

TABLE 2 (cont.): Hospitalization Summary for Medicare Dialysis Patients[*1], 2011-2014

		This Facility					Regional Averages[*2], per Year, 2011-2014		
	Measure Name	2011	2012	2013	2014	2011-2014	State	Network	U.S.
Emergency Department (ED) Statistics									
2r	Total ED visits (n)	216	169	209	227	821 [*3]	152.4	118.9	137.9
2s	Expected total ED visits (n)	211	199	208	233	850 [*3]	156.7	124.8	138.4
2t	Standardized Hospitalization Ratio (ED) [*4]	1.02	0.85	1.01	0.98	0.97	0.97	0.95	1.00
2u	P-value [*5]	0.876	0.501	0.947	0.999	0.989	n/a	n/a	n/a
2v	Confidence interval for SHR (ED) [*6]								
	High (97.5% limit)	1.56	1.34	1.51	1.56	1.53	n/a	n/a	n/a
	Low (2.5% limit)	0.69	0.55	0.68	0.66	0.65	n/a	n/a	n/a
2w	Percentiles for this facility (i.e., % of facilities with lower hospitalization rates [ED]) [*7]								
	In this State	64	34	60	49	48	n/a	n/a	n/a
	In this Network	64	35	61	53	54	n/a	n/a	n/a
	In the U.S.	57	31	55	50	47	n/a	n/a	n/a
2x	Patients with ED visit (% of 2a)	71.8	59.1	69.0	69.2	67.1	63.1	62.0	61.2
2y	ED visits that result in hospitalization (% of 2t)	54.6	49.1	41.6	37.4	45.4	43.0	40.5	48.6
2z	Admissions that originate in the ED (% of 2i)	85.5	78.3	86.1	75.9	81.6	76.4	72.7	79.1
Readmission Statistics									
2aa	Index discharges (n)	150	107	102	110	n/a	82.0	65.6	79.8
2ab	Total readmissions (n)	49	28	22	20	n/a	21.4	16.7	21.7
2ac	Expected total readmissions (n)	49	28	29	31	n/a	22.4	18.9	22.3
2ad	Standardized Readmission Ratio (SRR)	1.00	0.98	0.76	0.65	n/a	1.0	1.0	1.0
2ae	P-value [*5]	0.969	0.936	0.317	0.090	n/a	n/a	n/a	n/a
2af	Confidence interval for SRR [*6]								
	High (97.5% limit)	1.22	1.42	1.14	0.99	n/a	n/a	n/a	n/a
	Low (2.5% limit)	0.64	0.63	0.46	0.39	n/a	n/a	n/a	n/a

n/a = not applicable.
[*1] Based on patients with Medicare as primary insurer; see *Guide, Section V*.
[*2] Values are shown for the average facility, annualized.
[*3] Sum of 4 years used for calculations; should not be compared to regional averages.
[*4] Standardized Ratios are calculated as ratio of actual to expected events (2c/2d for days, 2i/2j for admissions, 2r/2s for ED visits, and 2ab/2ac for readmissions). SHRs are not shown if there are less than 5 patient years at risk. SRR is not shown if fewer than 11 index discharges in the year.
[*5] A p-value less than 0.05 indicates that the difference between the actual and expected event is probably real and is not due to random chance alone, while a p-value greater than or equal to 0.05 indicates that the difference could plausibly be due to random chance.
[*6] The confidence interval range represents uncertainty in the value of the standardized hospitalization and readmission ratios (SHRs and SRR) due to random variation.
[*7] All facilities are included in ranking, regardless of the number of patient years at risk.
[*8] Includes diagnoses present at admission and diagnoses added during the hospital stay.

TABLE 3: Transplantation Summary for Dialysis Patients under Age 70 [*1], 2011-2014

	Measure Name	This Facility 2011	2012	2013	2014	2011-2014	Regional Averages [*2], per Year, 2011-2014 State	Network	U.S.
3a	Eligible patients (n)	90	93	91	97	371 [*10]	66.0	54.9	64.0
3b	Transplants (n)	1	1	2	2	6 [*10]	2.9	2.2	2.0
3c	Donor type [*3]								
	Living donor (n)	0	0	1	0	1 [*10]	0.7	0.6	0.6
	Deceased donor (n)	1	1	1	2	5 [*10]	2.2	1.6	1.4
Patients who have not Previously Received a Transplant									
3d	Eligible patients (n)	83	86	83	87	339 [*10]	60.0	49.6	58.1
3e	Patient years (PY) at risk (n)	54.6	51.7	56.4	55.1	217.8 [*10]	42.2	35.0	40.0
3f	First transplants [*4] (n)	1	1	1	2	5 [*10]	2.6	2.0	1.7
3g	Expected first transplants (n)	2.5	2.3	2.5	2.3	9.6 [*10]	1.8	1.5	1.7
Standardized 1st Transplantation Ratio (STR) [*5]									
3h	STR [*6]	.	.	.	.	0.52	1.42	1.30	1.00
3i	P-value [*7]	.	.	.	.	0.167	n/a	n/a	n/a
3j	Confidence interval for STR [*8]								
	High (97.5% limit)	.	.	.	.	1.22	n/a	n/a	n/a
	Low (2.5% limit)	.	.	.	.	0.17	n/a	n/a	n/a
3k	STR Percentiles for this Facility (i.e., % of facilities with lower transplantation rates) [*9]								
	In this State	.	.	.	.	11	n/a	n/a	n/a
	In this Network	.	.	.	.	18	n/a	n/a	n/a
	In the U.S.	.	.	.	.	27	n/a	n/a	n/a

TABLE 4: Waitlist Summary for Dialysis Patients under Age 70 Treated on December 31st of Each Year [*1], 2011-2014

	Measure Name	This Facility 2011	2012	2013	2014	Regional Averages [*2], 2014 State	Network	U.S.
4a	Eligible patients on 12/31 (n)	65	61	69	71	52.0	44.9	47.5
4b	Patients on the waitlist (% of 4a)	12.3	11.5	17.4	16.9	21.2	19.2	24.1
4c	P-value (compared to U.S. value) [*11]	0.013	<0.01	0.105	0.095	n/a	n/a	n/a
4d	Patients on the waitlist by subgroup (%) [*12]							
	Age < 40	11.1	11.1	25.0	20.0	35.0	30.1	36.1
	Age 40-69	12.5	11.5	15.8	16.4	19.1	17.5	22.5
	Male	12.8	9.1	15.2	15.8	21.7	19.8	25.2
	Female	11.5	14.3	19.4	18.2	20.6	18.5	22.7
	African American	33.3	18.8	19.0	23.8	21.5	19.7	22.5
	Asian/Pacific Islander	0.0	0.0	21.4	18.8	26.7	26.5	35.7
	Native American	0.0	0.0	0.0	0.0	10.4	14.2	17.7
	White, Hispanic	11.1	0.0	11.1	10.0	21.3	18.3	27.2
	White, non-Hispanic	9.7	14.8	16.7	13.0	20.3	18.6	22.9
	Other/unknown race	.	.	.	.	9.1	10.0	22.6
	Diabetes	9.7	10.7	17.2	16.7	16.0	14.2	19.8
	Non-diabetes	14.7	12.1	17.5	17.1	25.6	23.5	27.7
	Previous kidney transplant	20.0	33.3	25.0	25.0	37.8	33.8	43.6
	No previous kidney transplant	11.7	9.1	16.4	15.9	19.4	17.7	22.4
	< 2 years since start of ESRD	4.3	12.0	16.7	17.9	16.0	14.7	16.3
	2-4 years since start of ESRD	17.4	0.0	18.8	15.8	25.6	23.5	29.0
	5+ years since start of ESRD	15.8	21.1	17.4	16.7	23.1	20.7	27.9

n/a = not applicable [*1] See *Guide, Sections VI* (Table 3) and *VII* (Table 4). [*2] Values are shown for the average facility. [*3] Values may not sum to 3b due to unknown donor type. [*4] Among first transplants that occurred after the start of dialysis from 2011-2014, 3.8% of transplants in the U.S. were not included because the transplant occurred fewer than 90 days after the start of ESRD and 1.1% were not included because the patient was not assigned to a facility at time of transplant. [*5] This section is calculated for the 4-year period only and not reported if there are fewer than 3 expected transplants. [*6] Standardized 1st Transplantation Ratio calculated as ratio of actual (3f) to expected (3g) transplants. [*7] A p-value less than 0.05 indicates that the difference between the actual and expected transplants is probably real and is not due to random chance, while a p-value greater than or equal to 0.05 indicates that the difference is plausibly due to random chance. [*8] The confidence interval range represents uncertainty in the value of the STR due to random variation. [*9] All facilities are included in ranking, regardless of the number of expected transplants. [*10] Sum of 4 years used for calculations; should not be compared to regional averages. [*11] Facility waitlist percentage is compared to the U.S. waitlist percentage for that year: 24.3% (2011), 24.4% (2012), 24.5% (2013), 24.1% (2014). A p-value greater than 0.05 indicates that the difference between percent of patients wailisted at the facility and national percentage is plausibly due to random chance. [*12] A missing value indicates that there were no eligible patients in the subgroup.

TABLE 5: Influenza Vaccination Summary for Medicare Dialysis Patients Treated on December 31st of Each Year [*1] , Flu Seasons August 2011-December 2014

		This Facility				Regional Averages [*2]		
	Measure Name	2011	2012	2013	2014	State	Network	U.S.
							2014	
5a	Eligible patients on 12/31 (n)	67	62	76	70	53.2	44.4	47.9
5b	Patients vaccinated between Aug. 1 and Dec. 31 (% of 5a)	74.6	74.2	86.8	71.4	74.8	74.1	73.6
5c	P-value [*3] (for 5b compared to U.S. value [*4])	0.203	0.291	<0.01	0.385	n/a	n/a	n/a
							2013	
5d	Patients vaccinated between Aug 1 and Mar 31 of following year (% of 5a)	74.6	75.8	89.5	n/a	74.5	72.2	71.7
5e	P-value [*3] (for 5d compared to U.S. value [*5])	0.233	0.252	<0.01	n/a	n/a	n/a	n/a
							2014	
5f	Patients vaccinated between Aug 1 and Dec 31 by subgroup (%) [*6]							
	Age < 18	.	.	.	.	40.0	50.0	53.2
	Age 18-39	83.3	60.0	71.4	50.0	70.1	71.0	70.6
	Age 40-64	86.2	77.8	88.2	74.2	75.6	75.2	74.2
	Age 65-74	58.8	70.6	87.5	71.4	73.1	72.1	73.1
	Age 75+	66.7	76.9	89.5	75.0	77.6	76.0	73.9
	Male	80.0	81.8	91.9	75.7	75.3	74.2	73.6
	Female	68.8	65.5	82.1	66.7	74.2	74.0	73.5
	African American	60.0	68.8	85.0	75.0	73.0	72.1	71.5
	Asian/Pacific Islander	63.6	64.3	81.0	61.1	81.2	80.4	76.6
	Native American	100	100	100	100	67.1	62.0	79.3
	White	82.5	80.6	91.2	74.2	74.1	74.1	74.6
	Other/unknown race	.	.	.	.	80.0	69.2	63.9
	Hispanic	71.4	100	100	85.7	82.2	82.0	75.9
	< 1 year since start of ESRD	60.0	58.8	88.2	33.3	65.2	61.2	60.3
	1-2 years since start of ESRD	88.0	81.3	95.2	75.0	73.8	73.8	72.9
	3+ years since start of ESRD	68.8	79.3	81.6	78.4	77.8	77.8	77.3

n/a = not applicable
[*1] Based on patients with Medicare as primary insurer; see *Guide, Section VIII.*
[*2] Values are shown for the average facility.
[*3] A p-value greater than or equal to 0.05 indicates that the difference between percent of patients vaccinated at the facility and national percentage is plausibly due to random chance.
[*4] Compared to the U.S. value for that year and time period (8/1-12/31): 69.2% (2011), 70.1% (2012), 71.0% (2013), 73.6% (2014).
[*5] Compared to the U.S. value for that year and time period (8/1-3/31): 69.8% (2011), 71.1% (2012), 71.7% (2013).
[*6] A missing value indicates that there were no eligible patients in the subgroup.

TABLE 6: Facility Modality, Anemia Management, and Dialysis Adequacy for Medicare Dialysis Patients [*1] , 2011-2014

		This Facility				Regional Averages [*2], 2014		
	Measure Name	2011	2012	2013	2014	State	Network	U.S.
	Modality (among all dialysis patients with ESRD for 90+ days and 1+ claim at this facility)							
6a	Patients treated during year (n)	135	141	123	126	93.3	74.7	72.9
6b	Patient-months treated during year (n) [*3]	806	786	836	885	681.9	539.6	554.3
6c	Modality (% of 6b; sums to 100%)							
	Hemodialysis	100	100	100	100	83.1	84.0	90.5
	CAPD/CCPD	0.0	0.0	0.0	0.0	8.8	11.3	8.4
	Other dialysis [*4]	0.0	0.0	0.0	0.0	8.1	4.8	1.1
6d	Percent of patient-months prescribed iron by modality [*5]							
	Hemodialysis	52.2	50.1	47.8	39.2	54.2	55.7	61.3
	CAPD/CCPD	.	.	.	.	21.8	21.5	25.1
	Hemoglobin (among ESA-treated dialysis patients with ESRD for 90+ days and 4+ hemoglobin claims at this facility)							
6e	Eligible patients (n)	68	69	69	76	49.6	39.4	43.5
6f	Average hemoglobin (g/dL)	11.0	10.6	10.5	10.4	10.5	10.5	10.5
6g	Hemoglobin categories (% of 6e; sums to 100%)							
	< 10 g/dL	10.3	5.8	15.9	11.8	13.0	11.4	14.4
	10-<11 g/dL	35.3	71.0	73.9	73.7	71.4	72.1	68.7
	11-<12 g/dL	48.5	23.2	10.1	14.5	15.4	16.3	16.7
	> 12 g/dL	5.9	0.0	0.0	0.0	0.2	0.3	0.3

(continued)

TABLE 6 (cont.): Facility Modality, Hemoglobin, and Dialysis Adequacy for Medicare Dialysis Patients [*1] , 2011-2014

		This Facility				Regional Averages [*2], 2014		
	Measure Name	2011	2012	2013	2014	State	Network	U.S.
Hemoglobin (among ESA-treated dialysis patients with ESRD for 90+ days and 4+ hemoglobin claims at this facility) (cont.)								
6h	Eligible hemodialysis (HD) patients (n) [*6]	68	69	69	76	45.9	36.0	40.8
6i	Hemoglobin categories among HD pts (% of 6h; sums to 100%)							
	< 10 g/dL	10.3	5.8	15.9	11.8	13.3	11.3	14.1
	10-<11 g/dL	35.3	71.0	73.9	73.7	71.0	71.9	68.9
	11-12 g/dL	48.5	23.2	10.1	14.5	15.4	16.5	16.8
	> 12 g/dL	5.9	0.0	0.0	0.0	0.3	0.3	0.3
6j	Eligible peritoneal dialysis (PD) patients (n) [*6]	0	0	0	0	4.4	4.1	3.3
6k	Hemoglobin categories among PD pts (% of 6j; sums to 100%)							
	< 10 g/dL	.	.	.	.	18.4	20.5	25.7
	10-<11 g/dL	.	.	.	.	63.7	63.3	57.1
	11-12 g/dL	.	.	.	.	17.1	15.5	16.5
	> 12 g/dL	.	.	.	.	0.8	0.7	0.7
Standardized Transfusion Ratio (STrR)								
6l	Adult Medicare patients (n)	69	71	85	89	69.3	59.7	61.2
6m	Patient years (PY) at risk (n)	39	37	48	54	41.9	35.2	37.9
6n	Total transfusions (n)	16	5	9	28	12.9	11.0	15.5
6o	Expected total transfusions (n)	20.0	18.6	22.2	23.0	17.4	14.5	15.6
6p	Standardized Transfusion Ratio [*11]	0.80	0.27	0.41	1.22	0.74	0.76	1.01
	Upper Confidence Limit (97.5%)	2.12	1.47	1.38	2.41	n/a	n/a	n/a
	Lower Confidence Limit (2.5%)	0.34	0.06	0.14	0.67	n/a	n/a	n/a
6q	P-value [*12]	0.715	0.136	0.160	0.473	n/a	n/a	n/a
Urea Reduction Ratio (URR; among HD patients with ESRD for 183+ days and 4+ URR claims at this facility) [*7]								
6r	Eligible patients (n)	67	70	72	79	46.8	37.5	41.9
6s	URR 65+ (% of 6r; meets a KDOQI guideline)	97.0	98.6	98.6	100	98.5	98.6	98.8
Adult Kt/V (K = dialyzer clearance of urea; t = dialysis time; V = patient's total body water) [*8*9]								
6t	Eligible adult HD patients (n)	135	137	119	123	77.9	63.2	65.9
6u	Eligible adult HD patient-months (n) [*3]	780	742	795	849	530.8	426.8	481.6
6v	Adult HD: Average Kt/V [*10]	1.6	1.7	1.7	1.7	1.7	1.7	1.6
6w	Kt/V categories among adult HD patients (% of 6u; sums to 100%)							
	<1.2	6.3	2.8	2.5	2.6	2.3	2.6	2.5
	1.2-<1.4	15.1	8.8	10.6	8.7	10.2	11.0	15.2
	1.4-<1.6	27.6	31.1	24.2	22.9	23.7	25.3	28.3
	1.6-<1.8	25.0	27.0	27.7	27.2	26.7	27.1	26.1
	>= 1.8	20.8	23.2	30.1	32.2	32.3	29.3	23.7
	Missing/Out of range/Not performed/Expired	5.3	7.1	5.0	6.5	4.9	4.8	4.2
6x	Adult HD: Kt/V >=1.2 (% of 6u) [*10]	88.5	90.0	92.5	90.9	92.8	92.6	93.3
6y	Eligible adult peritoneal dialysis (PD) patients (n)	0	0	0	0	8.2	8.4	6.1
6z	Eligible adult PD patient-months (n) [*3]	0	0	0	0	61.7	62.7	46.9
6aa	Adult PD: Average Kt/V [*10]	.	.	.	.	2.3	2.3	2.2
6ab	Kt/V categories among adult PD patients (% of 6z; sums to 100%)							
	<1.7	.	.	.	.	5.1	6.7	7.9
	1.7-<1.9	.	.	.	.	15.0	13.9	17.5
	1.9-<2.2	.	.	.	.	30.6	27.3	26.6
	2.2-<2.5	.	.	.	.	19.4	19.2	16.9
	>=2.5	.	.	.	.	24.3	25.6	22.7
	Missing/Out of range/Not performed/Expired	.	.	.	.	5.7	7.2	8.4
6ac	Adult PD: Kt/V >=1.7 (% of 6z) [*10]	.	.	.	.	89.2	86.1	83.7

n/a = not applicable
[*1] See *Guide, Section IX*. [*2] Values are shown for the average facility. [*3] Patients may be counted up to 12 times per year.
[*4] Other dialysis includes patients who switch between HD and PD during the month and patients for whom modality is unknown or missing.
[*5] Percent of patient months represented by the corresponding modality percent in 6c. [*6] Sum of eligible HD and PD patients may not add to 6e.
[*7] Claims identified as having 4 or more dialysis sessions per week were excluded from the URR calculations. Among eligible claims in the US, less than 2% were excluded due to frequent dialysis in 2011-2014.
[*8] Claims identified as having 2 or fewer, or 4 or more adult dialysis sessions per week were excluded from the Kt/V calculations.
[*9] Collection of the measures calculated in this section began in July 2010. Includes patients with Medicare as primary insurer and based on the value code D5: Result of last Kt/V.
[*10] Values calculated based only on Kt/V values reported in range.
[*11] Calculated as a ratio of observed transfusions to expected transfusions (6n to 6o); not shown if there are fewer that 10 patient-years at risk for transfusions.
[*12] A p-value less than 0.05 indicates that the difference between the actual and expected transfusion is probably real and is not due to random chance alone, while a p-value greater than or equal to 0.05 indicates that the difference could plausibly be due to random chance.

TABLE 7: Vascular Access Information [*1] , CROWNWeb (May 2012 - December 2014)

		This Facility				Regional Averages [*2], 2014		
	Measure Name	2011	2012	2013	2014	State	Network	U.S.
Vascular Access								
7a	Prevalent hemodialysis patient-months [*3] (n)		644	1142	1225	836.0	693.8	767.3
7b	Vascular access type in use (% of 7a; sums to 100%)							
	Arteriovenous fistula		70.0	65.1	66.4	70.7	69.0	62.3
	Arteriovenous graft		15.8	19.1	20.4	12.4	12.8	18.1
	Catheter		14.1	15.8	13.1	16.8	18.1	19.5
	Other/Missing		0.0	0.0	0.0	0.0	0.0	0.0
7c	Arteriovenous fistulae in place (% of 7a) [*4]		70.2	65.3	66.5	72.4	71.3	64.4
7d	Catheter only >= 90 days (% of 7a) [*5]		4.5	3.6	2.9	6.8	7.4	8.7
Vascular Access at First Treatment								
7e	Incident hemodialysis patients (n)		17	33	34	17.9	15.6	17.2
7f	Vascular access type in use (% of 7e; sums to 100%)							
	Arteriovenous fistula		23.5	18.2	32.4	28.7	26.2	18.1
	Arteriovenous graft		5.9	9.1	5.9	4.1	3.9	3.9
	Catheter		70.6	72.7	61.8	67.1	69.8	78.0
	Other/Missing		0.0	0.0	0.0	0.1	0.1	0.0
7g	Arteriovenous fistulae in place (% of 7e) [*4]		23.5	18.2	32.4	30.7	29.8	22.0

TABLE 8: Dialysis Access Type and Access-Related Infection Summary for Medicare Dialysis Patients [*1] , 2011 - 2014

		This Facility				Regional Averages [*2], 2014		
	Measure Name	2011	2012	2013	2014	State	Network	U.S.
Vascular Access [*6*7]								
8a	Eligible hemodialysis patient-months (n)	852	841	886	928	609.5	492.2	545.0
8b	Hemodialysis vascular access type (% of 8a)							
	Vascular catheter	18.2	14.3	13.4	8.7	13.9	14.8	16.0
	Arteriovenous graft	7.5	13.1	22.9	22.2	13.0	13.0	19.8
	Arteriovenous fistula only	56.5	65.4	63.7	69.1	73.0	72.1	64.1
	Other (>1) [*8]	17.8	7.3	0.0	0.0	0.0	0.1	0.1
8c	Vascular catheter reported >3 consecutive months	10.7	6.1	5.3	4.6	8.5	9.1	10.2
Hemodialysis (HD)								
8d	Eligible HD patients (n)	114	137	124	120	80.5	66.3	70.8
8e	Eligible HD patient-months [*3]	852	858	913	841	553.1	440.3	494.5
8f	HD infection rate per 100 hemodialysis patient-months [*9]	5.75	4.66	4.16	2.02	1.75	1.63	1.68
8g	P-value [*10] for 8f (compared to U.S. value) [*11]	<0.01	<0.01	<0.01	0.251	n/a	n/a	n/a
Peritoneal Dialysis (PD)								
8h	Eligible PD patients (n)	0	0	1	0	9.0	9.2	6.9
8i	Eligible PD patient-months [*3]	0	0	1	0	58.5	58.1	45.8
8j	PD catheter infection rate per 100 PD patient-months [*9]	.	.	0.00	.	3.58	2.87	3.10
8k	P-value [*10] for 8j (compared to U.S. value) [*12]	.	.	0.969	.	n/a	n/a	n/a

n/a = not applicable
[*1] See *Guide, Section X* (Table 7) and *Section XI* (Table 8).
[*2] Values are shown for the average facility.
[*3] Patients may be counted up to 12 times per year.
[*4] Includes all patients with fistulae, regardless of whether or not they received their hemodialysis treatments using their fistulae.
[*5] Catheter was used for treatment and has been in place for 90 days or more prior to treatment. Patient does not have an fistula or graft in place. Catheter is only access. Port access devices are reported as catheters for this project.
[*6] (Patients listed as graft or catheter may have had fistulae in place for future use, but they actually received their treatment through a graft or catheter.) Based on V modifiers including V5, V6, and V7 for catheter, graft, and fistula (with two needles), respectively.
[*7] Vascular access section includes adult patients only. Pediatric vascular access data can be found in the pediatric table.
[*8] Other includes patients with >1 access type; it does not include missing access type.
[*9] The ICD-9 infection code for HD patients is 996.62. The ICD-9 PD catheter infection code for PD patients is 996.68.
[*10] A p-value greater than or equal to 0.05 indicates the differences between the percent of patients with infection at the facility and national percentage is plausibly due to random chance.
[*11] Compared to U.S. value for that year: 2.58 (2011), 2.22 (2012), 1.87 (2013), and 1.68 (2014).
[*12] Compared to U.S. value for that year: 3.13 (2011), 3.08 (2012), 3.05 (2013), and 3.10 (2014).

TABLE 9: Characteristics of New Dialysis Patients[*1], 2011-2014 (Form CMS-2728)

		This Facility				Regional Averages[*2], 2014		
	Measure Name	2011	2012	2013	2014	State	Network	U.S.
	Patient Characteristics							
9a	Total number of patients with forms (n)	24	33	27	32	18.8	17.1	17.5
9b	Average age (years [0-95])[*3]	63.9	63.9	60.5	64.3	62.7	62.8	63.3
9c	Female (% of 9a)	37.5	42.4	37.0	37.5	43.0	41.9	42.5
9d	Race (% of 9a; sums to 100%)[*4]							
	African-American	8.3	21.2	25.9	15.6	8.2	5.7	26.7
	Asian/Pacific Islander	25.0	21.2	14.8	31.3	12.2	9.0	5.0
	Native American	0.0	0.0	0.0	0.0	1.5	2.5	0.9
	White	66.7	57.6	59.3	53.1	77.3	82.3	67.0
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.8	0.5	0.3
9e	Hispanic (% of 9a)	0.0	9.1	11.1	6.3	7.8	7.9	15.0
9f	Primary cause of ESRD (% of 9a; sums to 100%)							
	Diabetes	45.8	42.4	59.3	46.9	49.1	47.7	47.1
	Hypertension	25.0	18.2	11.1	15.6	18.6	18.5	30.0
	Primary glomerulonephritis	4.2	3.0	3.7	12.5	10.8	11.4	7.5
	Other/Unknown	25.0	36.4	25.9	25.0	21.6	22.4	15.5
9g	Medical coverage (% of 9a; sums to 100%)							
	Employer group only	8.3	6.1	14.8	15.6	12.3	12.2	12.6
	Medicare only	37.5	39.4	33.3	31.3	25.0	27.8	29.6
	Medicaid only	4.2	15.2	7.4	12.5	12.1	11.6	12.2
	Medicare and Medicaid only	8.3	12.1	11.1	9.4	13.6	11.4	13.5
	Medicare and other	25.0	18.2	11.1	12.5	22.9	22.0	19.5
	Other/Unknown	0.0	3.0	18.5	15.6	11.3	10.8	7.2
	None	16.7	6.1	3.7	3.1	2.7	4.2	5.3
9h	Body Mass Index[*5] (Median; Weight/Height^2)							
	Male	27.5	26.1	25.9	24.0	28.1	28.2	27.8
	Female	30.1	30.2	33.4	30.1	29.0	29.0	29.0
9i	Employment[*6]							
	Six months prior to ESRD treatment	0.0	10.0	46.2	36.4	32.1	32.4	30.6
	At first ESRD treatment	0.0	10.0	15.4	9.1	25.1	24.7	21.8
9j	Primary modality (% of 9a; sums to 100%)							
	Hemodialysis	100	100	100	100	90.8	87.5	90.2
	CAPD/CCPD	0.0	0.0	0.0	0.0	9.2	12.5	9.8
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.0	0.0	0.0
9k	Number of incident hemodialysis patients (n)	24	33	27	32	17.1	14.9	15.8
9l	Access used at first outpatient dialysis (% of 9k; sums to 100%)							
	Arteriovenous fistula	20.8	18.2	11.1	31.3	27.5	25.7	16.7
	Arteriovenous graft	0.0	6.1	0.0	6.3	3.7	3.6	2.9
	Catheter	79.2	75.8	88.9	62.5	68.5	70.2	80.1
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.4	0.4	0.3
9m	Arteriovenous fistula placed (% of 9k)	37.5	39.4	40.7	43.8	44.7	44.2	33.8
	Average Lab Values Prior to Dialysis[*3]							
9n	Hemoglobin (g/dL [3-18])	10.1	9.5	8.4	9.3	9.5	9.6	9.4
9o	Serum albumin (g/dL [0.8-6.0])	3.5	3.7	4.1	3.8	3.3	3.3	3.1

(continued)

TABLE 9 (cont.): Characteristics of New Dialysis Patients[*1], 2011-2014 (Form CMS-2728)

		This Facility				Regional Averages[*2], 2014		
	Measure Name	**2011**	**2012**	**2013**	**2014**	**State**	**Network**	**U.S.**
	Average Lab Values Prior to Dialysis[*3]							
9p	Serum creatinine (mg/dL [2-33])	5.9	6.0	8.0	7.8	6.5	6.2	6.5
9q	GFR (mL/min [0-60])	12.3	11.4	9.5	8.7	10.1	10.6	10.7
	Care Prior to ESRD Therapy							
9r	Received ESA prior to ESRD (% of 9a)	25.0	15.2	14.8	43.8	21.7	21.1	14.2
9s	Pre-ESRD nephrologist care (% of 9a; sums to 100%)[*8]							
	No	37.5	39.4	22.2	12.5	18.8	19.5	24.9
	Yes, < 6 months	12.5	15.2	14.8	31.3	17.6	15.2	13.3
	Yes, 6-12 months	20.8	9.1	18.5	18.8	18.4	19.7	18.7
	Yes, > 12 months	29.2	27.3	37.0	31.3	41.8	41.2	29.4
	Unknown/Missing	0.0	9.1	7.4	6.3	3.5	4.4	13.6
9t	Informed of transplant options (% of 9a)	29.2	39.4	33.3	50.0	70.4	74.3	83.4
9u	Patients not informed of transplant options (n)	17	20	18	16	5.2	4.0	2.5
9v	Reason not informed (% of 9u; may not sum to 100%)							
	Medically unfit	52.9	55.0	55.6	43.8	45.9	46.8	35.9
	Unsuitable due to age	0.0	5.0	11.1	12.5	10.2	13.6	25.3
	Psychologically unfit	0.0	5.0	11.1	0.0	3.0	3.1	3.2
	Patient declined information	0.0	0.0	0.0	0.0	1.4	1.5	1.9
	Patient has not been assessed	47.1	35.0	27.8	43.8	37.1	37.1	39.7
	Comorbid Conditions							
9w	Pre-existing comorbidity (% yes of 9a)							
	Congestive heart failure	54.2	48.5	37.0	21.9	29.9	29.0	29.3
	Atherosclerotic heart disease[*7]	37.5	36.4	37.0	18.8	18.9	19.8	14.8
	Other cardiac disorder[*7]	12.5	15.2	18.5	12.5	19.9	17.8	19.4
	CVD, CVA, TIA	20.8	12.1	11.1	21.9	10.1	9.4	8.3
	Peripheral vascular disease	29.2	21.2	18.5	18.8	11.5	12.3	10.8
	History of hypertension	95.8	84.8	100	87.5	85.7	85.3	87.4
	Diabetes[*7]	70.8	60.6	59.3	56.3	62.2	60.4	61.6
	Diabetes on insulin	62.5	42.4	44.4	34.4	46.3	43.9	40.8
	COPD	8.3	9.1	3.7	9.4	7.9	7.7	9.4
	Current smoker	4.2	6.1	3.7	3.1	6.6	7.1	6.0
	Cancer	4.2	3.0	22.2	6.3	8.5	8.6	7.0
	Alcohol dependence	0.0	9.1	3.7	0.0	1.7	1.7	1.4
	Drug dependence	0.0	0.0	7.4	0.0	2.2	1.8	1.1
	Inability to ambulate	33.3	12.1	11.1	9.4	4.8	4.4	6.8
	Inability to transfer	33.3	12.1	7.4	9.4	2.0	2.0	3.7
9x	Average number of comorbid conditions	4.7	3.7	3.9	3.1	3.2	3.1	3.1

n/a= not applicable
[*1] See *Guide, Section XII.*
[*2] Values are shown for the average facility.
[*3] For continuous variables, summaries include only responses in range indicated in brackets.
[*4] 'Asian' includes Indian sub-continent. 'Native American' includes Alaskan Native. 'White' includes Middle Eastern and Arabian.
[*5] The median BMI is computed for adult patients at least 20 years old with height, weight and BMI values in acceptable ranges. Acceptable range for height, weight and BMI are 122-208cm, 32-318 kg and 10-55 respectively.
[*6] Full-time, part-time, or student (% of 18-60 year olds).
[*7] 'Atherosclerotic heart disease' includes ischemic heart disease (coronary artery disease) and myocardial infarction. 'Other cardiac disorder' includes cardiac arrest, cardiac dysrhythmia, and pericarditis. 'Diabetes' includes patients with diabetes as the primary cause of ESRD.
[*8] Values may not sum to exactly 100% because of patients that received nephrology care but duration unknown. (0.03% in US in 2014).

TABLE 10: Summaries for All Dialysis Patients Treated as of December 31st of Each Year [*1] , 2011-2014

		This Facility				Regional Averages [*2], 2014		
	Measure Name	**2011**	**2012**	**2013**	**2014**	**State**	**Network**	**U.S.**
10a	Patients treated on 12/31 (n)	86	73	84	93	71.2	61.3	66.0
10b	Average age (years)	60.1	59.2	60.2	59.4	61.3	61.2	61.6
10c	Age (% of 10a; sums to 100%)							
	< 18	0.0	0.0	0.0	0.0	0.4	0.3	0.3
	18-64	55.8	57.5	56.0	59.1	54.3	54.4	54.8
	65+	44.2	42.5	44.0	40.9	45.4	45.2	45.0
10d	Female (% of 10a)	43.0	47.9	48.8	46.2	44.4	43.4	43.9
10e	Race (% of 10a; sums to 100%) [*3]							
	African American	18.6	21.9	25.0	29.0	12.0	8.5	36.0
	Asian/Pacific Islander	18.6	24.7	27.4	23.7	13.4	9.6	5.5
	Native American	1.2	1.4	1.2	1.1	1.5	3.1	1.2
	White	61.6	52.1	46.4	46.2	73.0	78.6	57.1
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.2	0.2	0.2
10f	Ethnicity (% of 10a; sums to 100%)							
	Hispanic	10.5	8.2	10.7	12.9	12.1	11.9	18.2
	Non-Hispanic	89.5	91.8	89.3	87.1	87.8	88.1	81.7
	Unknown	0.0	0.0	0.0	0.0	0.1	0.1	0.1
10g	Primary Cause of ESRD (% of 10a; sums to 100%)							
	Diabetes	50.0	46.6	47.6	41.9	45.6	44.7	44.9
	Hypertension	25.6	28.8	31.0	29.0	22.2	22.3	32.2
	Glomerulonephritis	15.1	9.6	8.3	12.9	15.9	16.6	11.2
	Other/Unknown	9.3	15.1	13.1	16.1	16.1	16.2	10.9
	Missing	0.0	0.0	0.0	0.0	0.2	0.2	0.8
10h	Average duration of ESRD (years)	4.2	4.6	4.9	4.7	4.9	4.8	4.8
10i	Years since start of ESRD (% of 10a; sums to 100%)							
	< 1	19.8	24.7	15.5	20.4	16.2	16.8	16.1
	1-2	22.1	17.8	26.2	19.4	18.0	18.2	17.1
	2-3	17.4	19.2	11.9	17.2	14.3	14.1	13.6
	3-6	20.9	13.7	23.8	19.4	26.0	26.0	26.8
	6+	19.8	24.7	22.6	23.7	25.5	24.8	26.5
10j	Nursing home patients (% of 10a) [*4]	17.4	9.6	14.3	11.8	13.1	12.9	14.1
10k	Modality (% of 10a; sums to 100%)							
	In-center hemodialysis	98.8	97.3	100	96.8	85.2	83.2	87.8
	Home hemodialysis	0.0	0.0	0.0	0.0	3.3	2.9	1.8
	Continuous ambulatory peritoneal dialysis	0.0	0.0	0.0	1.1	1.6	2.2	1.7
	Continuous cycling peritoneal dialysis	0.0	1.4	0.0	0.0	9.6	11.3	8.2
	Other modality [*5]	1.2	1.4	0.0	2.2	0.4	0.4	0.4

n/a = not applicable
[*1] See *Guide, Section XIII.*
[*2] Values are shown for the average facility.
[*3] 'Asian' includes Indian sub-continent. 'Native American' includes Alaskan Native. 'White' includes Middle Eastern and Arabian.
[*4] Includes patients who were also treated by a nursing facility at any time during the year. The source of nursing facility history of patients is the Nursing Home Minimum Dataset.
[*5] Other modality includes other dialysis, uncertain modality, and patients not on dialysis but still temporarily assigned to the facility (discontinued dialysis, recovered renal function, and lost to follow up).

TABLE 11: Comorbidities Reported on Medicare Claims for Medicare Dialysis Patients Treated as of December 31st of Each Year [*1] , 2011-2014

		This Facility				Regional Averages [*2], 2014		
	Measure Name	**2011**	**2012**	**2013**	**2014**	**State**	**Network**	**U.S.**
11a	Medicare dialysis patients on 12/31 (n)	70	58	69	71	54.7	46.5	50.7
11b	Comorbidity (% yes of 11a)							
	Infections							
	AIDS/HIV positive	0.0	1.7	2.9	4.2	0.6	0.5	1.8
	Dialysis access-related	25.7	13.8	20.3	8.5	12.3	11.6	12.4
	Hepatitis B	0.0	0.0	0.0	0.0	1.0	1.0	2.3
	Hepatitis other	11.4	6.9	7.2	9.9	6.0	5.4	6.0
	Metastatic	5.7	1.7	0.0	4.2	3.9	3.8	3.8
	Pneumonia	8.6	6.9	7.2	7.0	5.3	5.1	5.7
	Tuberculosis	0.0	0.0	0.0	0.0	0.6	0.4	0.6
	Other	48.6	36.2	31.9	39.4	40.1	39.9	44.9
	Cardiovascular							
	Cardiac arrest	2.9	1.7	1.4	1.4	1.3	1.4	1.6
	Cardiac dysrhythmia	40.0	34.5	37.7	31.0	34.7	34.3	37.1
	Cerebrovascular disease	27.1	27.6	33.3	25.4	23.3	20.8	25.7
	Congestive heart failure	51.4	53.4	50.7	49.3	45.8	44.9	51.1
	Ischemic heart disease	38.6	43.1	37.7	45.1	41.1	41.7	48.8
	Myocardial infarction	7.1	1.7	2.9	7.0	7.2	7.3	8.8
	Peripheral vascular disease [*3]	45.7	48.3	34.8	47.9	39.2	37.0	42.7
	Other							
	Alcohol dependence	2.9	0.0	2.9	2.8	3.2	3.3	3.0
	Anemia	4.3	3.4	4.3	2.8	4.1	4.4	8.1
	Cancer	8.6	8.6	8.7	14.1	10.1	10.2	10.9
	Chronic obstructive pulmonary disease	27.1	25.9	26.1	19.7	29.2	29.9	32.0
	Diabetes	72.9	67.2	59.4	64.8	60.3	59.6	64.9
	Drug dependence	7.1	3.4	2.9	7.0	5.2	5.0	2.6
	Gastrointestinal tract bleeding	5.7	0.0	0.0	4.2	2.9	2.7	3.1
	Hyperparathyroidism	94.3	93.1	98.6	93.0	90.1	86.5	88.4
11c	Average number of comorbid conditions	5.4	4.8	4.7	4.9	4.7	4.6	5.1

n/a = not applicable
[*1] Based on patients with Medicare as primary insurer on 12/31 each year. See *Guide, Section XIV*.
[*2] Values are shown for the average facility.
[*3] Peripheral vascular disease includes venous, arterial and nonspecific peripheral vascular diseases.

TABLE 12: How Patients Were Assigned to This Facility and End of Year Patient Status [*1] , 2011-2014

		This Facility				Regional Averages [*2], 2014		
	Measure Name	**2011**	**2012**	**2013**	**2014**	**State**	**Network**	**U.S.**
12a	Number of patients placed in facility [*1] (n)	128	135	122	135	102.3	88.5	90.3
12b	Initial patient placement for the year (% of 12a; sums to 100%)							
	Continuing at facility on 01/01	56.3	63.0	59.8	62.2	68.7	67.7	70.8
	Incident (new to ESRD)	24.2	17.0	21.3	25.2	17.3	17.5	17.8
	Transferred into facility	19.5	20.0	18.9	12.6	14.0	14.7	11.4
12c	Patient status at end of year (% of 12a; sums to 100%)							
	Alive in this facility on 12/31	67.2	54.1	68.9	68.9	69.6	69.3	73.2
	Alive in another facility on 12/31	10.9	17.8	9.0	8.1	10.5	11.2	8.5
	Received a transplant	0.8	1.5	2.5	1.5	3.4	3.0	2.4
	Died; death attributed to this facility	16.4	23.7	14.8	19.3	13.3	12.8	12.5
	Died; death attributed to another facility	2.3	1.5	1.6	0.0	1.3	1.6	1.4
	Other [*3]	2.3	1.5	3.3	2.2	1.9	2.1	2.2

[*1] Patient assignment for Tables 1, 2, 3, 10, 11 and 12 only. See *Guide, Section XV*.
[*2] Values are shown for the average facility.
[*3] Also includes dialysis unrelated deaths. Dialysis unrelated deaths are not attributed to any facility for the purposes of the mortality calculations in this report.

TABLE 13: Patient and Staff Counts from the Annual Facility Survey (Form CMS-2744) [*1] , 2011-2014

		This Facility				Regional Averages [*2], 2014		
	Measure Name	2011	2012	2013	2014	State	Network	U.S.
Patients Treated During the Year								
13a	Patients treated during year (n)	147	169	154	167	118.1	101.7	103.2
13b	Incident patients (% of 13a)	18.4	18.9	16.9	21.6	16.5	17.4	16.8
13c	Transferred into facility (% of 13a)	25.2	25.4	25.3	16.2	17.8	17.0	15.1
13d	Transferred out of facility (% of 13a)	18.4	23.1	15.6	15.0	17.1	17.1	14.9
Patients Treated on 12/31								
13e	Patients treated (n)	93	87	104	103	78.7	67.6	71.7
13f	Patient modality (n; sums to 13e)							
	In-center HD	93	87	104	103	67.5	56.7	63.3
	Frequency <= 4 times per week	93	87	104	103	67.4	56.7	63.3
	Frequency > 4 times per week	0	0	0	0	0.0	0.0	0.0
	In-center CAPD [*3]	0	0	0	0	0.0	0.0	0.0
	In-center CCPD [*3]	0	0	0	0	0.0	0.0	0.0
	In-center Other [*3]	0	0	0	0	0.1	0.0	0.0
	Home HD	0	0	0	0	2.4	1.8	1.3
	Frequency <= 4 times per week	0	0	0	0	0.5	0.3	0.5
	Frequency > 4 times per week	0	0	0	0	1.9	1.4	0.8
	Home CAPD	0	0	0	0	1.3	1.6	1.4
	Home CCPD	0	0	0	0	7.4	7.4	5.7
	Home Other [*3]	0	0	0	0	0.0	0.0	0.0
13g	Vocational rehabilitation: Patients aged 18-54 (n)	36	36	39	40	23.2	20.1	21.2
	Employed (full or part-time) (% of 13g)	16.7	16.7	15.4	17.5	25.1	23.8	16.0
	Attending school (full or part-time) (% of 13g)	5.6	0.0	2.6	0.0	2.9	3.3	1.1
13h	Medicare eligibility status (% of 13e; sums to 100% [*4])							
	Medicare	81.7	79.3	84.6	75.7	84.9	87.7	74.8
	Medicare application pending	10.8	0.0	3.8	0.0	1.0	1.1	1.4
	Non-Medicare	7.5	20.7	11.5	24.3	14.1	11.2	23.8
Facility Staffing on 12/31 [*5]								
13i	Total full and part time staff positions (n)	21	20	22	23	18.6	15.7	14.4
13j	Staff positions by type (n; sums to 13i)							
	Full time nurse [*6]	8	7	7	7	4.8	4.4	5.0
	Full time patient care technician	11	9	10	9	6.6	6.0	5.6
	Full time renal dietician	1	0	1	1	0.5	0.5	0.6
	Full time social worker	1	1	1	1	0.5	0.5	0.6
	Part time nurse [*6]	0	0	0	1	2.3	1.4	0.8
	Part time patient care technician	0	2	3	4	2.4	1.4	0.7
	Part time renal dietician	0	1	0	0	0.8	0.7	0.5
	Part time social worker	0	0	0	0	0.7	0.7	0.5

[*1] See *Guide, Section XVI*
[*2] Values are shown for the average facility.
[*3] Due to rounding, regional average may be slightly greater than 0 (<0.05).
[*4] Values may not sum to exactly 100% because of unknown Medicare status.
[*5] Data as of May 31, 2015. A *full time position* is defined as a position with at least 32 hours of employment per week, and a *part time position* is defined as a position with less than 32 hours of employment per week (includes positions that were opened but not filled on this date).
[*6] Nursing staff includes registered nurse, licensed practical nurse, vocational nurse, or advanced practice nurse degree.

TABLE 14: CROWNWeb Clinical Data [*1] , May 2012-2014

		This Facility			Regional Averages [*2], 2014		
	Measure Name	2011	2012	2013	2014	State	Network	U.S.
14a	Eligible patients (n) [*3]		109	105	124	95.7	82.4	85.2
14b	Eligible patient-months (n) [*4]		581	973	1017	817.6	699.6	751.7
14c	Eligible HD patients (n) [*5]		109	105	124	85.4	71.7	78.3
14d	Eligible HD patient-months (n) [*4]		581	973	1017	726.2	604.8	689.2
14e	Eligible PD patients (n) [*5]		0	0	0	21.3	21.3	20.5
14f	Eligible PD patient-months (n) [*4]		0	0	0	168.4	165.4	163.1
	Hemodialysis Adequacy [*9]							
14g	Eligible HD Kt/V patients (n) [*7]		92	99	115	69.5	56.6	62.3
14h	Eligible HD Kt/V patient-months (n) [*7]		481	858	868	520.0	408.6	488.3
14i	Average Kt/V [*6] (average of 14h)		1.7	1.7	1.7	1.7	1.7	1.6
14j	Kt/V categories (% of 14h; sums to 100%)							
	<1.2		2.7	1.9	2.0	2.2	2.3	2.2
	1.2-<1.8		64.0	59.8	57.4	57.0	57.3	60.5
	>=1.8		31.2	36.6	37.4	32.4	30.5	25.1
	Missing/Out of range		2.1	1.7	3.2	8.4	9.9	12.2
14k	Average normalized protein catabolic rate (nPCR) [*6] (average of 14d)		1.1	1.1	1.1	1.0	1.0	0.9
14l	nPCR Missing/Out of range (% of 14d)		13.9	1.5	2.5	27.3	27.1	35.3
14m	Ultrafiltration Rate: Average [*6] (ml/kg/hr) (average of 14d)		5.7	5.4	5.3	7.2	7.6	8.4
14n	Ultrafiltration Rate categories (% of 14d; sums to 100%)							
	<=13 (ml/kg/hr)		81.1	91.9	89.9	64.9	62.1	55.3
	>13 (ml/kg/hr)		4.0	3.5	4.7	6.3	7.1	8.9
	Missing/Out of range		15.0	4.6	5.4	28.8	30.8	35.8
	Peritoneal Dialysis Adequacy [*8] [*9]							
14o	Average weekly Kt/V [*6] (average of 14f)		.	.	.	2.3	2.3	2.3
14p	Weekly Kt/V categories (% of 14f; sums to 100%)							
	<1.7		.	.	.	3.7	4.6	5.6
	1.7-<2.5		.	.	.	57.8	55.5	54.0
	>=2.5		.	.	.	24.6	26.7	22.4
	Missing/Out of range		.	.	.	13.8	13.2	18.1
14q	Average normalized protein catabolic rate (nPCR) [*6] (average of 14f)		.	.	.	0.9	0.9	0.8
14r	nPCR Missing/Out of range (% of 14f)		.	.	.	37.7	34.1	45.6
	Anemia							
14s	Average hemoglobin [*6] (g/dL) (average of 14b)		10.8	10.6	10.7	10.8	10.9	10.8
14t	Hemoglobin categories (% of 14b; sums to 100%)							
	<10 g/dL		18.8	26.5	23.4	19.9	18.5	20.2
	10-<11 g/dL		35.3	32.2	33.6	36.2	35.0	34.8
	11-12 g/dL		25.8	29.7	30.8	28.4	28.6	27.4
	>12 g/dL		7.9	10.9	11.1	11.9	13.5	11.4
	Missing/Out of range		12.2	0.7	1.1	3.6	4.4	6.2
14u	ESA prescribed (% of 14b)		86.7	95.6	95.8	75.4	65.6	65.6

(continued)

TABLE 14 (cont.): CROWNWeb Clinical Data [*1] , May 2012-2014

		This Facility			Regional Averages [*2], 2014		
	Measure Name	2011	2012	2013	2014	State	Network	U.S.
Iron								
14v	Average reticulocyte hemoglobin content (CHr) [*6] (average of 14b)		.	.	.	33.4	33.4	31.0
14w	CHr categories (% of 14b; sums to 100%)							
	<29 pg		0.0	0.0	0.0	0.0	0.1	0.4
	>=29 pg		0.0	0.0	0.0	0.6	2.9	2.0
	Missing/Out of range		100	100	100	99.4	97.0	97.7
14x	Average transferrin saturation (TSAT) [*6] (average of 14b)		32.3	32.5	30.5	30.9	31.1	32.3
14y	TSAT categories (% of 14b; sums to 100%)							
	<20%		6.7	8.1	8.8	11.1	12.3	10.7
	>=20%		34.9	33.2	35.2	52.3	61.1	67.0
	Missing/Out of range		58.3	58.7	55.9	36.6	26.6	22.3
14z	Average ferritin [*6] (ng/ml) (average of 14b)		1139.1	1171.4	1179.4	870.5	828.6	848.0
14aa	Ferritin categories (% of 14b; sums to 100%)							
	<200 ng/ml		0.7	0.4	0.3	2.3	3.0	2.7
	>=200 ng/ml		41.0	41.7	43.4	49.1	49.6	48.4
	Missing/Out of range		58.3	57.9	56.3	48.6	47.5	48.9
14ab	Intravenous iron prescribed (% of 14b)		85.9	95.7	82.1	55.5	49.5	51.0
14ac	Oral iron prescribed (% of 14b)		2.8	4.7	4.7	1.6	1.2	1.0
Mineral Metabolism								
14ad	Average phosphorous [*6] (mg/dL) (average of 14b)		5.9	5.6	5.6	5.3	5.3	5.2
14ae	Phosphorous categories (% of 14b; sums to 100%)							
	<3.5 mg/dL		9.0	9.1	9.2	8.2	8.1	8.9
	3.5-4.5 mg/dL		17.7	20.6	22.4	24.8	25.0	25.0
	4.6-5.5 mg/dL		18.9	25.2	23.6	28.5	28.6	28.8
	5.6-7.0 mg/dL		20.3	24.2	23.8	21.7	21.0	19.4
	>7.0 mg/dL		21.9	20.5	19.6	13.3	12.6	11.0
	Missing/Out of range		12.2	0.5	1.4	3.6	4.8	7.0
14af	Average calcium uncorrected [*6] (mg/dL) (average of 14b)		9.2	9.2	9.0	9.0	9.0	9.0
14ag	Calcium uncorrected categories (% of 14b; sums to 100%)							
	<8.4 mg/dL		12.0	11.9	15.6	14.8	14.1	14.9
	8.4-10.2 mg/dL		65.9	74.5	77.4	76.9	76.3	73.6
	>10.2 mg/dL		9.8	13.1	5.7	4.5	4.6	4.2
	Missing/Out of range		12.2	0.5	1.3	3.8	5.0	7.4

n/a = not applicable.
[*1] See *Guide, Section XVII.*
[*2] Values are shown for the average facility.
[*3] 14a includes those who switch between HD and PD during the month and patients for whom modality is unknown.
[*4] Patients may be counted up to 12 times per year.
[*5] Sum of eligible HD and PD patients may not add to 14a.
[*6] Based on in-range values; see *Guide* for range values.
[*7] Kt/V summaries are restricted to patients who dialyze thrice weekly.
[*8] The PD Adequacy section uses the most recent value over a 4-month look-back period. Therefore, reporting for PD in this table begins with August 2012 which includes a look-back through May 2012.
[*9] A missing value indicates that there were no eligible patients in the subgroup.

TABLE 15: Survey and Certification Activity [*1]

			Regional Averages		
	Measure Name	**This Facility**	**State**	**Network**	**U.S.**
15a	Date of last survey	03/11/2015	n/a	n/a	n/a
15b	Type of last survey	Recertification	n/a	n/a	n/a
15c	Compliance condition after last survey	Meets requirements	n/a	n/a	n/a
15d	Number of deficiencies cited at last survey				
	Condition for coverage (CfC) deficiencies	0	0.1	0.3	0.3
	Standard deficiencies	0	8.2	5.6	5.9
15e	CfC deficiencies cited at last survey [*2]				
	V100 Compliance with Fed., State, and Local Laws	No, not cited	0.0	0.0	0.0
	V110 Infection Control	No, not cited	1.2	2.5	5.9
	V175 Water and Dialysate Quality	No, not cited	3.5	4.4	3.6
	V300 Reuse of Hemodialysis and Bloodlines	No, not cited	0.0	0.0	0.4
	V400 Physical Environment	No, not cited	0.0	1.5	2.4
	V450 Patient Rights	No, not cited	0.0	0.5	0.3
	V500 Patient Assessment	No, not cited	0.0	1.0	2.2
	V540 Patient Plan of Care	No, not cited	0.0	3.0	2.8
	V580 Care at Home	No, not cited	0.0	0.5	0.5
	V625 Quality Assessment & Performance Improvement	No, not cited	1.2	3.4	4.4
	V660 Special Purpose Renal Dialysis Facilities	No, not cited	0.0	0.0	0.0
	V675 Laboratory Services	No, not cited	0.0	0.0	0.0
	V680 Personnel Qualifications	No, not cited	0.0	1.5	0.7
	V710 Responsibilities of the Medical Director	No, not cited	1.2	3.0	3.8
	V725 Medical Records	No, not cited	0.0	0.5	0.3
	V750 Governance	No, not cited	5.8	4.4	3.5

n/a = not applicable
[*1] See *Guide, Section XVIII.* Data on this table are from the facility's latest survey since January 2009. If your facility has not been surveyed since January 2009, facility-level data on this table will be missing.
[*2] Regional values are the percentage of surveys that were cited for the respective CfC deficiency.

TABLE 16: Facility Information [*1] , 2015

Characteristic	This Facility
Ownership	Non-profit
Organization	NORTHWEST KIDNEY CENTERS
Initial Medicare certification date	12/16/2008
Number of stations	
Services provided	Hemodialysis and Peritoneal Dialysis
Shifts after 5:00 pm	Yes
Dialyzer Reuse	
CMS Certification Number (CCN) included in this report	502553
National Provider Identifier (NPI) [*2]	1164675112

[*1] Information based on data reported in CROWNWeb as of June, 2015. If missing, data were not available.
[*2] Information based on CROWNWeb data as of December 2014. If missing, data were not available.