

## 2011 Dialysis Facility Report

### Purpose of the Report

Enclosed is the *2011 Dialysis Facility Report (DFR)* for your facility, based on data from the Centers for Medicare & Medicaid Services (CMS).

### This DFR includes data specific to provider number(s): 502516

These data could be useful in quality improvement and assurance activities. The information contained in this report facilitates comparisons of patient characteristics, treatment patterns, transplantation rates, hospitalization rates, and mortality rates to local and national averages. Some of these comparisons account for the patient mix at this facility, including age, sex, race, and diabetic status. This report 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.

In September 2011, each state's surveyor(s) will receive the DFRs with comments (if applicable) for all dialysis facilities in their state.

This report also provides you with advance notice of the updated quality measures (urea reduction ratio, hemoglobin, and patient survival) for your facility that will be reported on the Dialysis Facility Compare (DFC) website in November 2011 ([www.medicare.gov](http://www.medicare.gov)).

### Collaborators

CMS has contracted with the University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) and Arbor Research Collaborative for Health to produce the *2011 Dialysis Facility Reports*.

### How to Submit Comments

**Between July 15, 2011 and August 15, 2011**, you may submit comments to (1) CMS on the three DFC measures, (2) your state surveyor, or (3) UM-KECC. Please visit [www.DialysisReports.org](http://www.DialysisReports.org), log on to view your report, and click on the **Comments & Inquiries** tab. If you have questions after the comment period is over, please contact us directly at [Support@DialysisReports.org](mailto:Support@DialysisReports.org) or 1-877-665-1680.

- (1) **Dialysis Facility Compare:** Comment on the three DFC measures (see page 2) which will be reported on the DFC public website in November 2011. The comment period begins July 15, 2011 and ends August 15, 2011. Your comments will be shared with CMS but will **not** appear on the DFC website.
- (2) **State Surveyor:** Comment on your DFR for your state's surveyors. The surveyor(s) in your state will receive a copy of your DFR in September 2011 with your comments.
- (3) **UM-KECC:** Submit questions about your DFR to UM-KECC. You can also submit your suggestions to improve the DFR. These comments will not be shared with CMS or your state surveyor.

**Dear Dialysis Facility Director:**

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). It is the sixteenth in a series of annual reports. This is one of 5,877 reports that have been sent to the ESRD Networks for distribution to ESRD providers in the U.S. Your state survey agency will receive this report in September 2011. Selected highlights from this report are given here. The information specific to this facility is printed in **bold type** for easy identification.

**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 your 2011 DFR. Emergency department and readmission statistics have been added to Table 2. In addition, most of the hospitalization summaries (Table 2) are now calculated for a four-year period. Values for each year from 2007-2010, along with a summarized statistic for the four-year period are reported for Medicare dialysis patients. We also reported the averages in your state, your ESRD Network, and the nation for this combined four-year period. We've added a new table that reports influenza vaccination summary statistics identified on Medicare claims for Medicare dialysis patients treated on December 31st of each year in your facility (Table 5). Average values for 2010 are also reported among patients in your state, Network, and the U.S. A new section on the prescription of erythropoiesis stimulating agents (ESA) and iron has been added to Table 6.

**Dialysis Facility Compare Preview:** Anemia management is reported as two measures: the percent of patients with hemoglobin values of less than 10 g/dL and the percent of patients with hemoglobin values greater than 12 g/dL. The URR and hemoglobin measures were calculated for Medicare approved dialysis facilities operating at any time during 2010. The hemoglobin measures were calculated only for patients treated with erythropoiesis stimulating agents (ESA). The patient survival measure was calculated for Medicare approved dialysis facilities operating at any time from 2007 through 2010. The following measures for this facility will appear on the DFC website:

Measure Name	This Facility
<b>1. The percentage of Medicare hemodialysis patients treated in this facility during 2010 with URR <math>\geq</math> 65%</b> <i>Number of patients included in calculation: 60</i>	<b>93%</b>
<b>2. The percentage of Medicare patients treated in this facility during 2010 with ESA-treated hemoglobin &lt;10 g/dL</b> <b>with ESA-treated hemoglobin &gt;12 g/dL</b> <i>Number of patients included in calculation: 64</i>	<b>2%</b> <b>11%</b>
<b>3. Patient survival reported as "as expected," "better than expected," or "worse than expected" for the time period 2007-2010 for this facility</b> <i>Standardized Mortality Ratio (SMR): 0.88</i> <i>P-value: 0.39</i>	<b>As Expected</b>

Please see Table 6 for more information on URR and ESA-treated hemoglobin for this facility. URR and ESA-treated hemoglobin measures based on 10 or fewer patients will be reported as "not available" on DFC. Table 1 provides additional information on patient survival. If the Standardized Mortality Ratio (SMR) is less than 1.00 and statistically significant ( $p < 0.05$ ), the patient survival classification is "Better than Expected" on DFC. If the facility SMR is greater than 1.00 and statistically significant ( $p < 0.05$ ), the patient survival classification is "Worse than Expected" on DFC. Otherwise, the patient survival classification is "As Expected" on DFC. Please note that the classification is not reported for a facility if the SMR is based on 3 or fewer expected deaths.

**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 2007 and December 2010. 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, race, ethnicity, and diabetes as a cause of ESRD. Unless otherwise specified, data refer to hemodialysis and peritoneal dialysis patients combined.

Summary data about the percent of patients with URR of 65% or higher (Table 6) and with central catheters (Table 7) are included, as suggested by Kidney Disease Outcomes Quality Initiative (KDOQI) Clinical Practice Guidelines. These practice pattern measures are strongly correlated with the mortality and hospitalization measures found in these reports. Note that elevated mortality or hospitalization rates may be due to a variety of causes unrelated to clinical practices, so it may not always be possible to identify clinical practices that explain those rates.

**Mortality:** Mortality summaries are provided in Table 1. Standardized Mortality Ratios (SMR) for all patients and for patients in their first year of ESRD treatment are calculated for each facility. Although mortality statistics can vary substantially from year to year, they are reported here as a key outcome for dialysis patients. The SMR compares the observed death rate in this facility to the death rate that would be expected based on national death rates for patients with the characteristics of the patients at this facility. For the overall SMR, time at risk and deaths within 60 days after transfer out of this facility are attributed to this facility. The first year SMR includes all incident patients at the facility for their entire first year of dialysis whether they transfer out of the facility or not. Time at risk and deaths after transplantation are excluded from the analysis. The SMR is adjusted for patient age, sex, race, ethnicity, diabetes as a cause of ESRD, duration of ESRD, nursing home status, body mass index (BMI) at incidence, comorbidities at incidence, and state population death rates. Additionally, each year's estimate is compared to the US mortality rates for the same year. The rate of withdrawal from dialysis and the percentage of deaths due to infection and cardiac related deaths are reported in the table to help in the interpretation of the mortality outcomes.

**There was a 19% annual observed death rate among the patients treated at this facility during 2007-2010, while a rate of 22% would be expected after adjustment for the factors listed above. The SMR of observed to expected deaths is 0.88, which is 12% fewer deaths than expected at this facility. Among all U.S. facilities, only 31% of facilities had an SMR lower than 0.88. This difference is not statistically significant ( $p \geq 0.05$ ), so this lower mortality could plausibly be just a chance occurrence.**

**There was a 27% annual observed first year death rate among the patients starting dialysis at this facility during 2007-2009, while a rate of 31% would be expected after adjustment for the factors listed above. The first year SMR of observed to expected deaths is 0.87, which is 13% fewer deaths than expected at this facility. Among all U.S. facilities, only 40% of facilities had an SMR lower than 0.87. This difference is not statistically significant ( $p \geq 0.05$ ), so this lower mortality could plausibly be just a chance occurrence.**

**Hospitalization:** Hospitalization summaries are reported for Medicare patients in Table 2. The table includes information on the number of days hospitalized, the number of hospital admissions and the diagnoses present at admission, and the number of emergency department (ED) visits for patients at this facility. The Standardized Hospitalization Ratio (SHR) for Days, Admissions, and ED visits compares the observed number of events (be it days hospitalized, admissions, or ED visits) to the number that would be expected based on national rates for patients with the characteristics of the patients at this facility. The three measures are adjusted for age, sex, diabetes, duration of ESRD, nursing home status, BMI, and comorbidities at incidence. Additionally, each year's estimate is compared to the US rates for the same year. As in the mortality calculation, time at risk and events within 60 days after transfer out of this facility are attributed to this facility. Time at risk and events starting 3 days before transplantation are excluded from the analysis.

**The SHR (Days) of observed to expected number of days hospitalized at this facility during 2007-2010 is 0.53, which is 47% lower than expected. The SHR (Admissions) of observed to expected number of admissions for patients at this facility during 2007-2010 is 0.69, which is 31% lower than expected. The SHR (ED) of observed to expected number of ED visits for patients at this facility during 2007-2009 is 0.79, which is 21% lower than expected.**

**Infection:** Information on hospitalizations for septicemia reported in Table 2 is based on Medicare patient claims.

**The percentage of Medicare dialysis patients at this facility hospitalized with septicemia during 2007-2010 was 6%, compared to 11% nationally.**

**Transplantation:** Transplantation summaries are reported in Table 3. The Standardized Transplantation Ratio (STR) represents relative first transplantation rates (observed/expected) for patients at this facility adjusting for patient age. Additionally, each year's estimate is compared to the US transplantation rates for the same year. Patients who are 70 or older as well as those with a prior kidney transplant are excluded. As in the mortality and hospitalization calculations, time at risk and transplants within 60 days after transfer out of this facility are attributed to this facility.

**Of the patients under age 70 treated at this facility during 2007-2010 who had not previously received a transplant, 10% were transplanted annually, while a rate of 5% would be expected for these patients. The STR of observed to expected number of patients transplanted for this facility is 2.12, which is 112% higher than expected for this facility. This difference is statistically significant ( $p < 0.05$ ) and is unlikely to be due to random chance.**

**Transplant Waitlist:** Table 4 summarizes waitlist information for patients under age 70 being treated at this facility at the end of each year. Unlike the mortality, hospitalization, and transplantation statistics, the waitlist statistics do not include patients who transferred out of the facility.

**Among the 40 dialysis patients under age 70 treated at this facility on December 31, 2010, 50% were on the kidney transplant waitlist compared to 24% nationally. This difference is statistically significant ( $p < 0.05$ ) and is unlikely to be due to random chance.**

**Influenza Vaccination:** Table 5 summarizes influenza vaccination information for Medicare patients being treated at this facility at the end of each year. Similar to the waitlist table, influenza vaccination statistics do not include patients who transferred out of the facility.

**Among the 57 Medicare dialysis patients treated at this facility on December 31, 2009, 91% were vaccinated between September 1 and December 31, 2009 compared to 69% nationally. This difference is statistically significant ( $p < 0.05$ ) and is unlikely to be due to random chance.**

**Practice Patterns:** Table 6 summarizes the dialytic modality, hemoglobin, and URR for patients treated at this facility during each year. These data are derived from CMS Medicare paid dialysis claim data. Vascular access data for prevalent and incident patients as reported by the CMS Fistula First project are summarized in Table 7.

**There were 64 ESA-treated dialysis patients included in the analysis of Medicare claims data of hemoglobin for 2010 at this facility. The average hemoglobin calculated for these patients is 11.5, g/dL compared to 11.4 g/dL nationally. Among the 60 hemodialysis patients in this facility included in the analysis of Medicare claims data of URR in 2010, 93% had URR above the KDOQI minimum value for URR ( $URR \geq 65\%$ ), compared to 97% nationally.**

**At this facility in 2010, an average of 39% of incident patients had arteriovenous (AV) fistulae in place, compared to 35% nationally. Also at this facility in 2010, an average of 75% of prevalent patients had AV fistulae in place, compared to 64% nationally. Of the prevalent patients receiving hemodialysis treatment at this facility in 2010, 3% had a catheter which had been in place for at least 90 days as their only vascular access, compared to 9% nationally. See Tables 6 and 7 for more information about practice patterns.**

**Patient Characteristics:** Characteristics of patients starting dialysis during 2007-2010 are reported in Table 8. Table 9 gives summaries for all dialysis patients being treated at the end of each year, 2007-2010. Comorbidities are reported in Table 10 for Medicare dialysis patients being treated at the end of each year, 2007-2009.

**There were 28 patients with Medical Evidence Forms (CMS-2728) which indicated that they started treatment at this facility during 2010. The average number of comorbidities reported for new patients is 3.5, which is higher than the average of 3.2 reported nationally. Also, 18% of these patients were not under the care of a nephrologist before starting dialysis, compared to 30% nationally. Furthermore, 32% of these patients were informed of their transplant options, compared to 77% nationally. The average serum albumin calculated for these patients (before first dialysis) is 3.7 g/dL, which is higher than the national average value of 3.1 g/dL. The average residual renal function (GFR), estimated by the 4-variable MDRD equation, was 10.1 mL/min, which is lower than the national average value of 11.2 mL/min.**

**Among patients treated at this facility on December 31, 2010, 13% were treated in a nursing home during the year, which is higher than the national average value of 13%. The average number of comorbidities reported on Medicare claims in 2009 for Medicare patients in this facility on December 31, 2009 is 4.1, which is lower than the national average value of 4.2.**

## 2011 Dialysis Facility Report

NKC TOTEM LAKE KIDNEY CENTER State: WA Network: 16 CMS Provider#: 502516

**Facility Information:** General information about this facility is provided in Tables 12, 13, and 14. Table 12 provides counts of patients treated, Medicare eligibility, treatment modality, and staffing from the Annual Facility Survey (Form CMS-2744). Table 13 reports survey and certification activity. Table 14 includes services provided by this facility as well as information on ownership.

**This facility reported having 20 staff members to care for 77 patients at the end of 2010. This facility reported having 15 stations available as of March 31, 2011. This facility offers both hemodialysis and peritoneal dialysis services. Additional information regarding patient counts, patient modality, and facility staffing is available in Table 12.**

**Sources of Patient Data:** This report is based primarily on Medicare claims and data collected for CMS. Patients were assigned to this facility based on the Standard Information Management System (SIMS) database, Medicare claims, and Medical Evidence Forms (Form CMS-2728). Network 16 has a list of the patients included in the mortality analyses for this facility. Table 10 reports comorbidities reported on Medicare claims. Table 11 reports the number of patients placed in this facility for analyses in Tables 1, 2, 3, 9, and 10 of this report. Table 11 also provides information on patient status at the end of the year, both for patients who remain in this facility until the end of each year, and for those who transfer out of this facility, receive a transplant, or die during the year.

These are just a few highlights of the statistics you will find in this report based on the data for this facility. We hope that this report is of interest to you and that you will discuss it with your staff. We welcome any questions or comments you might have about the content of the current report or any suggestions you might have for future reports. Comments or suggestions can be submitted via the secure site [www.DialysisReports.org](http://www.DialysisReports.org) between July 15, 2011 and August 15, 2011. If you have questions after the comment period is over, please contact us directly at [Support@DialysisReports.org](mailto:Support@DialysisReports.org) or 1-877-665-1680.

For a complete description of the methods used to calculate the statistics in this report, please see the *Guide to the 2011 Dialysis Facility Reports*. The *Guide* is available from ESRD Network 16, and is also on the Dialysis Reports web site at [www.DialysisReports.org](http://www.DialysisReports.org).

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

# 2011 Dialysis Facility Report

NKC TOTEM LAKE KIDNEY CENTER State: WA Network: 16 CMS Provider#: 502516

**TABLE 1: Mortality Summary for All Dialysis Patients (2007-10) & New Dialysis Patients (2007-09) \*1**

Measure Name	This Facility					Regional Averages*2, per Year, 2007-2010		
	2007	2008	2009	2010	2007-2010	State	Network	U.S.
<b>All Patients: Death Rates</b>								
1a Patients (n=number)	97	90	95	104	386 *8	97.9	78.7	92.4
1b Patient years (PY) at risk (n)	61.2	62.5	68.9	70.6	263.2 *8	68.6	54.7	61.4
1c Deaths (n)	14	12	8	16	50 *8	13.8	11.3	12.1
1d Expected deaths (n)	13.0	12.7	14.6	16.7	57.0 *8	14.7	11.8	12.1
1e Death rate per 100 PY (% of 1b)	22.9	19.2	11.6	22.7	19.0	20.1	20.6	19.7
1f Expected death rate per 100 PY (% of 1b)	21.3	20.3	21.2	23.7	21.7	21.5	21.6	19.7
<b>All Patients: Categories of Death</b>								
1g Withdrawal from dialysis prior to death (% of 1c)	50.0	58.3	75.0	56.3	58.0	40.3	41.1	25.0
1h Death due to: Infections (% of 1c)	7.1	41.7	37.5	12.5	22.0	17.5	17.4	16.1
Cardiac causes (% of 1c)	21.4	33.3	37.5	31.3	30.0	30.1	30.2	25.6
1i Dialysis unrelated deaths *3 (n; excluded from SMR)	0	0	0	0	0 *8	0.2	0.1	0.1
<b>All Patients: Standardized Mortality Ratio (SMR)</b>								
1j SMR *4	1.08	0.95	0.55	0.96	0.88	0.93	0.95	1.00
1k P-value *5	0.85	0.99	0.09	0.99	0.39	n/a	n/a	n/a
1l Confidence interval for SMR *6								
High (95% limit)	1.81	1.65	1.08	1.55	1.16	n/a	n/a	n/a
Low (5% limit)	0.59	0.49	0.24	0.55	0.65	n/a	n/a	n/a
1m SMR Percentiles for this Facility (i.e. percent of facilities with lower mortality rates) *7								
In this State	68	57	4	50	37			
In this Network	64	48	6	50	37			
In the U.S.	60	47	12	46	31			
						<b>Regional Averages Per Year, 2007-2009 *2</b>		
<b>New Patients: First Year Death Rates</b>								
1n New Patients (n=number)	31	22	31		84 *8	24.2	19.2	19.1
1o Patient years (PY) at risk (n)	28.4	17.7	24.1		70.1 *8	20.8	16.5	16.4
1p Deaths (n)	5	5	9		19 *8	5.2	4.2	4.4
1q Expected deaths (n)	7.0	5.8	9.2		22.0 *8	5.8	4.6	4.4
1r Death rate per 100 PY	17.6	28.3	37.4		27.1	25.2	25.3	26.7
1s Expected death rate per 100 PY	24.7	32.7	38.2		31.3	27.8	27.9	26.7
<b>New Patients: Categories of Deaths</b>								
1t Withdrawal from dialysis prior to death (% of 1r)	40.0	40.0	77.8		57.9	48.1	52.3	34.2
1u Death due to: Infections (% of 1r)	40.0	40.0	0.0		21.1	22.0	24.3	22.9
Cardiac causes (% of 1r)	20.0	20.0	44.4		31.6	35.5	38.0	32.9
<b>New Patients: First Year Standardized Mortality Ratio (SMR)</b>								
1v SMR *4	0.71	0.87	0.98		0.87	n/a	n/a	n/a
1w P-value *5	0.60	0.96	0.99		0.62	n/a	n/a	n/a
1x Confidence interval for SMR *6								
High (95% limit)	1.67	2.02	1.86		1.35	n/a	n/a	n/a
Low (5% limit)	0.23	0.28	0.45		0.52	n/a	n/a	n/a
1y First Year SMR Percentiles for this Facility (i.e. percent of facilities with lower mortality rates) *7								
In this State	30	45	55		42			
In this Network	37	51	58		45			
In the U.S.	33	45	52		40			

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, 1p to 1q 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.

# 2011 Dialysis Facility Report

NKC TOTEM LAKE KIDNEY CENTER State: WA Network: 16 CMS Provider#: 502516

**TABLE 2: Hospitalization Summary for Medicare Dialysis Patients<sup>\*1</sup>, 2007-2010**

Measure Name	This Facility					Regional Averages <sup>*2</sup> , per Year, 2007-2010		
	2007	2008	2009	2010	2007-2010	State	Network	U.S.
<b>Medicare Dialysis Patients</b>								
2a Medicare dialysis patients (n)	75	69	70	87	301 <sup>*6</sup>	78.1	62.1	72.2
2b Patient years (PY) at risk (n)	47.1	45.7	50.9	54.5	198.2 <sup>*6</sup>	52.4	40.7	44.8
<b>Days Hospitalized Statistics</b>								
2c Total days hospitalized (n)	345	428	291	395	1459 <sup>*6</sup>	495.5	382.0	650.7
2d Expected total days hospitalized (n)	650.3	653.0	709.0	759.7	2771.9 <sup>*6</sup>	768.0	590.3	651.0
2e Days hospitalized per PY	7.3	9.4	5.7	7.2	7.4	9.46	9.39	14.5
2f Expected days hospitalized per PY	13.8	14.3	13.9	13.9	14.0	14.7	14.5	14.5
2g Standardized Hospitalization Ratio (Days) <sup>*3</sup>	0.53	0.66	0.41	0.52	0.53	0.65	0.65	1.00
2h Percentiles for this Facility (i.e. % of facilities with lower hospitalization rates [days]) <sup>*4</sup>								
In this State	41	59	4	29	23	n/a	n/a	n/a
In this Network	37	54	13	29	25	n/a	n/a	n/a
In the U.S.	10	20	4	9	6	n/a	n/a	n/a
<b>Admission Statistics</b>								
2i Total admissions (n)	68	57	67	73	265 <sup>*6</sup>	87.5	67.3	88.3
2j Expected total admissions (n)	89.2	89.6	98.8	108.6	386.2 <sup>*6</sup>	104.4	80.5	88.4
2k Admissions per PY	1.4	1.2	1.3	1.3	1.3	1.7	1.7	2.0
2l Expected admissions per PY	1.9	2.0	1.9	2.0	1.9	2.0	2.0	2.0
2m Standardized Hospitalization Ratio (Admissions) <sup>*3</sup>	0.76	0.64	0.68	0.67	0.69	0.84	0.84	1.00
2n Percentiles for this Facility (i.e. % of facilities with lower hospitalization rates [admissions]) <sup>*4</sup>								
In this State	36	18	16	16	18	n/a	n/a	n/a
In this Network	40	19	23	22	19	n/a	n/a	n/a
In the U.S.	22	10	13	12	10	n/a	n/a	n/a
2o Diagnoses Associated with Hospitalization (% of 2a) <sup>*5</sup>								
Septicemia	8.0	7.2	4.3	3.4	5.6	9.9	8.8	11.2
Acute myocardial infarction	8.0	5.8	4.3	2.3	5.0	4.1	3.9	4.1
Congestive heart failure	12.0	18.8	17.1	19.5	16.9	18.3	17.2	21.5
Cardiac dysrhythmia	14.7	13.0	11.4	8.0	11.6	12.5	11.8	12.0
Cardiac arrest	1.3	1.4	0.0	0.0	0.7	1.7	1.5	1.3
2p One day admissions (% of 2i)	23.5	21.1	23.9	20.5	22.3	19.3	18.5	13.4
2q Average length of stay (days per admission; 2c/2i)	5.1	7.5	4.3	5.4	5.5	5.7	5.7	7.4
2r Readmissions within 30 days (n)	16	15	22	12	65 <sup>*6</sup>	96.0	70.8	110
2s Admissions that result in readmission within 30 days (% of 2i)	23.5	26.3	32.8	16.4	24.5	27.4	26.3	31.1
						<b>Regional Averages Per Year, 2007-2009<sup>*2</sup></b>		
<b>Emergency Department(ED) Statistics</b>								
2t Total ED visits (n)	107	101	118		326 <sup>*6</sup>	432.4	328.9	385.7
2u Expected total ED visits (n)	134	131	146		412 <sup>*6</sup>	454.6	350.1	385.8
2v ED visits per PY	2.3	2.2	2.3		2.3 <sup>*6</sup>	2.5	2.6	2.8
2w Expected ED visits per PY	2.8	2.9	2.9		2.9 <sup>*6</sup>	2.7	2.8	2.8
2x Standardized Hospitalization Ratio (ED) <sup>*3</sup>	0.80	0.77	0.81		0.79	0.95	0.94	1.00
2y Percentiles for this Facility (i.e. % of facilities with lower hospitalization rates [ED]) <sup>*4</sup>								
In this State	22	22	21		18	n/a	n/a	n/a
In this Network	27	22	30		20	n/a	n/a	n/a
In the U.S.	25	21	26		20	n/a	n/a	n/a
2z Patients with ED visit (% of 2a)	50.7	55.1	70.0		58.4 <sup>*7</sup>	56.0	57.4	57.9
2aa ED visits that result in hospitalization (% of 2t)	43.9	42.6	39.8		42.0	41.1	39.2	50.6
2ab Admissions that originate in the ED (% of 2i)	69.1	75.4	70.1		71.4 <sup>*7</sup>	63.0	62.0	71.6

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] Calculated as ratio of actual to expected events (2e/2f for days, 2k/2l for admissions, and 2v/2w for ED visits); not shown if there are fewer than 5 patient years at risk.

[\*4] All facilities are included in ranking, regardless of the number of patient years at risk.

[\*5] Includes diagnoses present at admission and diagnoses added during the hospital stay.

[\*6] Sum of 4 years (days and admissions) or 3 years (ED visits), used for calculations; should not be compared to regional averages.

[\*7] Percent is based on the sum of three years.

# 2011 Dialysis Facility Report

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**TABLE 3: Transplantation Summary for Dialysis Patients under Age 70<sup>\*1</sup>, 2007-2010**

Measure Name	This Facility					Regional Averages <sup>*2</sup> , per Year, 2007-2010		
	2007	2008	2009	2010	2007-2010	State	Network	U.S.
3a Eligible patients (n)	64	60	63	60	247 <sup>*11</sup>	65.6	52.6	63.4
3b Transplants (n)	5	3	3	4	15 <sup>*11</sup>	3.2	2.5	2.3
3c Donor type (sums to 3b <sup>*3</sup> )								
Living Donor (n)	2	1	1	1	5 <sup>*11</sup>	1.0	0.9	0.7
Deceased Donor (n)	3	2	2	3	10 <sup>*11</sup>	2.3	1.7	1.6
<b>Patients who have not Previously Received a Transplant</b>								
3d Eligible patients (n)	50	51	51	49	201 <sup>*11</sup>	58.4	46.9	57.0
3e Patient years (PY) at risk (n)	31.6	37.0	37.4	31.0	136.9 <sup>*11</sup>	41.2	32.8	38.4
3f First transplants <sup>*4</sup> (n)	5	3	2	4	14 <sup>*11</sup>	2.9	2.2	2.0
3g Expected First transplants (n)	1.8	1.8	1.7	1.3	6.6 <sup>*11</sup>	2.2	1.7	2.0
3h First transplant rate per 100 PY	15.8	8.1	5.3	12.9	10.2	7.0	6.8	5.1
3i Expected First transplant rate per 100 PY	5.7	4.9	4.5	4.2	4.8	5.2	5.2	5.1
3j Donor type (sums to 3f <sup>*5</sup> )								
Living Donor (n)	2	1	1	1	5 <sup>*11</sup>	0.8	0.7	0.6
Deceased Donor (n)	3	2	1	3	9 <sup>*11</sup>	2.1	1.5	1.4
<b>Standardized 1st Transplantation Ratio (STR)<sup>*6</sup></b>								
3k STR <sup>*7</sup>	.	.	.	.	2.12	1.33	1.31	1.00
3l P-value <sup>*8</sup>	.	.	.	.	0.02	n/a	n/a	n/a
3m 95% Confidence interval for STR <sup>*9</sup>								
Upper limit	.	.	.	.	3.56	n/a	n/a	n/a
Lower limit	.	.	.	.	1.16	n/a	n/a	n/a
3n STR Percentiles for this Facility (i.e. percent of facilities with lower transplantation rates) <sup>*10</sup>								
In this State	.	.	.	.	81	n/a	n/a	n/a
In this Network	.	.	.	.	85	n/a	n/a	n/a
In the U.S.	.	.	.	.	88	n/a	n/a	n/a

n/a = not applicable.

[\*1] See *Guide, Section VI*.

[\*2] Values are shown for the average facility, annualized.

[\*3] Values may not sum to 3b due to unknown donor type.

[\*4] Among first transplants that occurred after the start of dialysis from 2007-2010, 3.9% of transplants in the U.S. were not included because the transplant occurred less than 90 days after the start of ESRD and 0.9% were not included because the patient was not assigned to a facility at time of transplant.

[\*5] Values may not sum to 3f due to unknown donor type.

[\*6] This section is not reported if there are fewer than 3 expected transplants.

[\*7] Standardized Transplantation Ratio calculated as ratio of actual (3f) to expected (3g) transplants.

[\*8] 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.

[\*9] The confidence interval range represents uncertainty in the value of the STR due to random variation.

[\*10] All facilities are included in ranking, regardless of the number of expected transplants.

[\*11] Sum of 4 years used for calculations; should not be compared to regional averages.



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**TABLE 4: Waitlist Summary for Dialysis Patients under Age 70 Treated as of December 31st of Each Year<sup>\*1</sup>, 2007-2010**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2010		
	2007	2008	2009	2010	State	Network	U.S.
4a Eligible patients on 12/31 (n)	46	50	47	40	53.8	44.1	46.5
4b Patients on the waitlist (% of 4a)	32.6	40.0	42.6	50.0	22.6	19.5	23.8
4c P-value (compared to U.S. value) <sup>*3</sup>	0.11	<.01	<.01	<.01	n/a	n/a	n/a
4d Patients on the waitlist by subgroup (% of corresponding value in 4e)							
Age < 40	66.7	83.3	83.3	75.0	32.1	28.6	35.0
Age 40-69	24.3	34.1	36.6	47.2	21.0	17.9	22.1
Male	35.5	40.0	46.9	52.2	22.8	19.2	23.8
Female	26.7	40.0	33.3	47.1	22.4	19.9	23.8
African American	0.0	0.0	50.0	0.0	23.2	19.7	21.9
Asian/Pacific Islander	33.3	55.6	75.0	83.3	25.3	24.3	35.7
Native American	.	.	.	.	14.9	14.3	17.7
White, Hispanic	0.0	0.0	0.0	0.0	22.8	18.3	26.6
White, Non-Hispanic	35.3	38.5	36.1	50.0	22.2	19.3	23.3
Other/unknown race	.	.	.	.	21.2	20.0	25.9
Diabetes	31.3	33.3	36.8	42.1	17.6	14.2	19.0
Non-diabetes	33.3	44.8	46.4	57.1	26.8	23.8	27.6
Previous kidney transplant	71.4	66.7	60.0	85.7	43.5	39.0	46.4
No previous kidney transplant	25.6	34.1	37.8	42.4	20.1	17.0	21.5
< 2 years since start of ESRD	23.8	30.0	15.4	20.0	17.2	14.4	15.8
2-4 years since start of ESRD	33.3	47.1	58.8	72.7	25.3	21.8	27.6
5+ years since start of ESRD	50.0	46.2	47.1	64.3	27.4	24.3	29.6
4e Eligible patients in 4a by subgroup (n)							
Age < 40	9	6	6	4	7.9	6.5	6.0
Age 40-69	37	44	41	36	45.9	37.6	40.5
Male	31	35	32	23	30.5	25.3	26.4
Female	15	15	15	17	23.3	18.8	20.1
African American	2	1	2	3	7.6	4.8	19.2
Asian/Pacific Islander	9	9	8	6	7.2	4.2	2.2
Native American	0	0	0	0	1.6	2.1	0.8
White, Hispanic	1	1	1	1	5.8	4.7	7.4
White, Non-Hispanic	34	39	36	30	31.1	28.0	16.2
Other/unknown race	0	0	0	0	0.5	0.3	0.6
Diabetes	16	21	19	19	24.5	19.7	20.6
Non-diabetes	30	29	28	21	29.4	24.4	25.9
Previous kidney transplant	7	9	10	7	5.9	4.9	4.1
No previous kidney transplant	39	41	37	33	47.9	39.2	42.3
< 2 years since start of ESRD	21	20	13	15	22.1	18.3	17.6
2-4 years since start of ESRD	15	17	17	11	15.5	12.7	14.4
5+ years since start of ESRD	10	13	17	14	16.3	13.1	14.5

n/a = not applicable

[\*1] See *Guide, Section VII*.

[\*2] Values are shown for the average facility.

[\*3] Facility waitlist percentage is compared to the U.S. waitlist percentage for that year: 23.8% (2007), 24.0% (2008), 24.2% (2009), 23.8% (2010).

A p-value greater than 0.05 indicates that the difference between percent of patients waitlisted at the facility and national percentage is plausibly due to random chance.

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**TABLE 5: Influenza Vaccination Summary for Medicare Dialysis Patients Treated on December 31st of Each Year\*<sup>1</sup>, Flu Seasons September 2007-March 2010**

Measure Name	This Facility			Regional Averages, 2009-2010* <sup>2</sup>		
	2007-08	2008-09	2009-10	State	Network	U.S.
5a Eligible patients on 12/31 (n)	48	50	57	58.2	44.8	49.1
5b Patients vaccinated between Sep. 1 and Dec. 31 (% of 5a)	89.6	92.0	91.2	75.4	70.8	69.0
5c P-value* <sup>3</sup> (for 5b compared to U.S. value* <sup>4</sup> )	<.01	<.01	<.01	n/a	n/a	n/a
5d Patients vaccinated between Sep. 1 and Mar. 31 (% of 5a)	89.6	96.0	94.7	77.6	72.3	70.3
5e P-value* <sup>3</sup> (for 5d compared to U.S. value* <sup>5</sup> )	<.01	<.01	<.01	n/a	n/a	n/a
5f Patients vaccinated between Sep. 1 and Dec. 31 by subgroup (% of corresponding value in 5g)						
Age < 18	.	.	.	62.5	58.3	49.5
Age 18-39	71.4	80.0	80.0	70.3	67.2	64.8
Age 40-64	76.9	93.3	92.9	75.1	70.9	68.6
Age 65-74	100	88.9	86.4	74.1	69.8	69.8
Age 75+	100	100	100	79.2	73.4	70.8
Male	87.9	86.7	96.7	74.6	70.4	69.3
Female	93.3	100	85.2	76.4	71.4	68.7
African American	50.0	100	100	71.8	67.4	65.4
Asian/Pacific Islander	88.9	80.0	100	83.5	77.5	70.8
Native American	100	.	.	70.5	54.6	73.2
White	91.7	94.6	88.6	74.8	71.5	71.3
Other/unknown race	.	.	.	82.4	75.0	65.0
Hispanic	0.0	100	100	83.2	79.3	71.5
< 1 year since start of ESRD	90.0	100	78.6	66.9	61.7	58.4
1-2 years since start of ESRD	95.2	86.7	90.9	75.1	71.7	69.2
3+ years since start of ESRD	82.4	93.1	96.9	78.5	73.8	72.4
5g Eligible patients in 5a by subgroup (n)						
Age < 18	0	0	0	< 1.0	< 1.0	< 1.0
Age 18-39	7	5	5	5.1	4.2	3.9
Age 40-64	13	15	14	24.4	19.2	21.5
Age 65-74	14	18	22	14.4	10.9	12.1
Age 75+	14	12	16	14.1	10.4	11.4
Male	33	30	30	32.6	25.2	26.6
Female	15	20	27	25.6	19.6	22.5
African American	2	3	4	7.0	4.0	18.4
Asian/Pacific Islander	9	10	9	6.9	3.8	2.1
Native American	1	0	0	1.6	2.1	0.8
White	36	37	44	42.5	34.7	27.3
Other/unknown race	0	0	0	0.3	0.1	0.5
Hispanic	2	1	1	5.3	4.0	7.1
< 1 year since start of ESRD	10	6	14	10.7	8.7	8.6
1-2 years since start of ESRD	21	15	11	17.3	13.4	14.3
3+ years since start of ESRD	17	29	32	30.3	22.8	26.2

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 (9/1-12/31): 63.3% (2007-08), 64.2% (2008-09), 69.0% (2009-10).

[\*5] Compared to the U.S. value for that year and time period (9/1-3/31): 63.8% (2007-08), 64.9% (2008-09), 70.3% (2009-10).

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**TABLE 6: Facility Modality, Hemoglobin, and Urea Reduction Ratio for Medicare Dialysis Patients<sup>\*1</sup>, 2007-2010**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2010		
	2007	2008	2009	2010	State	Network	U.S.
<b>Modality (among all dialysis patients with ESRD for 90+ days and 1+ claim at this facility)</b>							
6a Patients treated during year (n)	108	87	80	87	100.5	76.4	75.0
6b Patients months treated during year (n) <sup>*3</sup>	642	588	632	663	723.5	542.4	558.3
6c Modality (% of 6b; sums to 100%)							
Hemodialysis	100	100	98.7	100	85.4	85.3	92.5
CAPD/CCPD	0.0	0.0	0.0	0.0	7.2	10.0	6.6
Other dialysis <sup>*4</sup>	0.0	0.0	1.3	0.0	7.4	4.7	0.9
6d Percent of patient months prescribed ESA by Modality <sup>*5</sup>							
Hemodialysis	100	100	100	100	100	100	100
CAPD/CCPD	.	.	.	.	83.7	83.2	81.1
6e Percent of patient months prescribed Iron by Modality <sup>*5</sup>							
Hemodialysis	76.6	74.5	77.9	66.5	64.1	63.1	60.5
CAPD/CCPD	.	.	.	.	16.0	12.7	14.3
<b>Hemoglobin (among ESA-treated dialysis patients with ESRD for 90+ days and 4+ Hemoglobin claims at this facility)</b>							
6f Eligible patients (n)	56	51	55	64	59.0	44.6	49.0
6g Average hemoglobin (g/dL)	12.1	11.7	11.6	11.5	11.4	11.4	11.4
6h Hemoglobin categories (% of 6f; sums to 100%)							
< 10 g/dL	0.0	0.0	1.8	1.6	2.3	2.6	3.1
10-11 g/dL	1.8	5.9	5.5	7.8	18.5	18.3	18.0
11-12 g/dL	35.7	68.6	69.1	79.7	68.0	68.5	68.2
> 12 g/dL	62.5	25.5	23.6	10.9	11.2	10.6	10.7
6i Eligible hemodialysis (HD) patients (n) <sup>*6</sup>	56	51	55	64	55.2	42.4	50.1
6j Hemoglobin categories among HD pts (% of 6i; sums to 100%)							
< 10 g/dL	0.0	0.0	1.8	1.6	2.4	2.8	3.2
10-11 g/dL	1.8	5.9	5.5	7.8	18.1	17.6	17.5
11-12 g/dL	35.7	68.6	69.1	79.7	68.4	69.0	68.5
> 12 g/dL	62.5	25.5	23.6	10.9	11.2	10.6	10.8
6k Eligible peritoneal dialysis (PD) patients (n) <sup>*6</sup>	0	0	0	0	11.1	11.2	9.6
6l Hemoglobin categories among PD pts (% of 6k; sums to 100%)							
< 10 g/dL	.	.	.	.	5.8	6.9	8.3
10-11 g/dL	.	.	.	.	30.4	29.1	27.1
11-12 g/dL	.	.	.	.	49.5	50.7	51.6
> 12 g/dL	.	.	.	.	14.3	13.2	13.0
<b>Urea Reduction Ratio (URR; among HD patients with ESRD for 183+ days and 4+ URR claims at this facility)<sup>*7</sup></b>							
6m Eligible patients (n)	50	47	47	60	52.6	39.2	44.6
6n URR categories (% of 6m; sums to 100%)							
< 60.0 %	2.0	0.0	0.0	3.3	0.9	1.0	1.1
60.0-64.9 %	0.0	0.0	2.1	3.3	1.8	2.0	2.3
65.0-69.9 %	6.0	4.3	17.0	5.0	5.8	7.5	10.8
70.0-74.9 %	26.0	40.4	23.4	18.3	26.6	30.8	35.6
75+ %	66.0	55.3	57.4	70.0	64.8	58.7	50.2
6o URR 65+ (% of 6m; meets a KDOQI guideline)	98.0	100	97.9	93.3	97.3	97.0	96.6
6p URR percentiles for this facility (i.e. % of facilities with a smaller percentage of patients with URR 65+)							
In this State	50	98	46	12	n/a	n/a	n/a
In this Network	51	99	41	12	n/a	n/a	n/a
In the U.S.	57	99	48	16	n/a	n/a	n/a

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 6f.

[\*7] Claims identified as having 4 or more dialysis sessions per week were excluded from the URR calculations. Among eligible claims in the US, 1.33% were excluded due to frequent dialysis in 2007-2010.

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**TABLE 7: Vascular Access Information (CMS Fistula First)<sup>\*1</sup>, 2007-2010**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2010			
	2007	2008	2009	2010	State	Network	U.S.	
<b>Vascular Access</b>								
7a	Prevalent hemodialysis patient months <sup>*3</sup>	800	812	914	942	n/a	n/a	n/a
7b	Vascular access type in use (% of 7a; sums to 100%)							
	Arteriovenous fistula	66.3	67.4	68.8	66.1	66.3	65.4	56.0
	Arteriovenous graft	11.0	10.6	10.4	14.2	12.1	12.6	20.4
	Catheter	22.8	22.0	20.8	19.6	21.6	22.0	23.5
	Other/Missing	0.0	0.0	0.0	0.0	0.0	0.0	0.1
7c	Arteriovenous fistulae in place (% of 7a) <sup>*4</sup>	76.4	78.1	76.3	74.8	75.5	74.3	63.8
7d	Catheter only >= 90 days (% of 7a) <sup>*5</sup>	6.4	5.4	6.6	3.2	7.5	7.8	9.2
<b>Vascular Access at First Treatment</b>								
7e	Incident hemodialysis patients (n)	20	15	19	28	20.5	17.9	17.0
7f	Vascular access type in use (% of 7e; sums to 100%) <sup>*6</sup>							
	Arteriovenous fistula	35.0	20.0	26.3	10.7	23.9	24.0	17.4
	Arteriovenous graft	15.0	6.7	5.3	7.1	3.6	3.6	7.7
	Catheter	50.0	73.3	68.4	82.1	72.4	72.3	74.7
	Other/Missing	0.0	0.0	0.0	0.0	0.1	0.1	0.2
7g	Arteriovenous fistulae in place (% of 7e) <sup>*4</sup>	40.0	26.7	31.6	39.3	43.3	41.3	34.9

n/a = not applicable

[\*1] See *Guide, Section X*.

[\*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.

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**TABLE 8: Characteristics of New Dialysis Patients<sup>\*1</sup>, 2007-2010 (Form CMS-2728)**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2010			
	2007	2008	2009	2010	State	Network	U.S.	
<b>Patient Characteristics</b>								
8a	Total number of patients with forms (n)	31	22	31	28	36.4	33.1	30.2
8b	Average age (years [0-95]) <sup>*3</sup>	58.6	64.5	68.9	66.4	63.5	63.8	63.5
8c	Female (% of 8a)	41.9	45.5	48.4	50.0	44.1	42.5	43.5
8d	Race (% of 8a; sums to 100%) <sup>*4</sup>							
	African-American	6.5	4.5	6.5	7.1	8.1	6.4	27.9
	Asian/Pacific Islander	35.5	4.5	6.5	10.7	10.3	7.6	4.6
	Native American	3.2	0.0	0.0	0.0	2.0	3.2	1.1
	White	54.8	86.4	87.1	82.1	79.0	82.1	66.0
	Other/Unknown/Missing	0.0	4.5	0.0	0.0	0.6	0.7	0.4
8e	Hispanic (% of 8a)	6.5	0.0	3.2	0.0	6.3	6.1	14.0
8f	Primary cause of ESRD (% of 8a; sums to 100%)							
	Diabetes	58.1	50.0	32.3	28.6	47.0	43.6	45.5
	Hypertension	12.9	13.6	25.8	32.1	19.4	21.1	29.1
	Primary Glomerulonephritis	19.4	9.1	0.0	14.3	11.0	10.9	7.2
	Other/Missing	9.7	27.3	41.9	25.0	22.5	24.5	18.3
8g	Medical coverage (% of 8a; sums to 100%)							
	Employer group only	38.7	31.8	22.6	14.3	14.1	13.8	15.1
	Medicare only	12.9	13.6	12.9	17.9	20.5	25.1	23.2
	Medicaid only	6.5	4.5	6.5	10.7	13.1	10.7	11.9
	Medicare and Medicaid only	3.2	13.6	6.5	14.3	11.0	9.6	12.9
	Medicare and Other	25.8	31.8	45.2	32.1	28.3	27.2	21.8
	Other/Unknown	3.2	4.5	6.5	7.1	7.5	7.5	7.9
	None	9.7	0.0	0.0	3.6	5.5	6.2	7.3
8h	Body Mass Index <sup>*5</sup>							
	Male	27.6	29.4	26.6	24.6	27.5	27.4	27.5
	Female	28.7	29.7	26.5	26.9	29.0	29.3	28.9
8i	Employment <sup>*6</sup>							
	Six months prior to ESRD treatment	73.3	66.7	55.6	16.7	37.1	38.0	34.0
	At first ESRD treatment	53.3	33.3	44.4	0.0	24.0	24.4	20.3
8j	Primary modality (% of 8a; sums to 100%)							
	Hemodialysis	100	95.5	100	100	91.9	90.1	93.1
	CAPD/CCPD	0.0	4.5	0.0	0.0	7.6	9.6	6.9
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.4	0.2	0.0
8k	Number of incident hemodialysis patients (n)	31	21	31	28	32.6	29.2	27.9
8l	Access used at first outpatient dialysis (% of 8k; sums to 100%)							
	Arteriovenous fistula	29.0	14.3	16.1	21.4	23.2	23.2	14.9
	Arteriovenous graft	3.2	4.8	3.2	0.0	2.9	2.5	2.9
	Catheter	67.7	81.0	80.6	78.6	73.9	74.2	81.9
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.0	0.0	0.2
8m	Arteriovenous fistulae placed (% of 8k)	32.3	28.6	22.6	42.9	41.9	42.6	31.6
<b>Average Lab Values Prior to Dialysis<sup>*3</sup></b>								
8n	Hemoglobin (g/dL [3-18])	10.3	10.8	10.8	10.3	10.0	10.0	9.8
8o	Serum Albumin (g/dL [0.8-6.0])	3.5	3.7	3.7	3.7	3.3	3.2	3.1

(continued)

# 2011 Dialysis Facility Report

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**TABLE 8 (cont.): Characteristics of New Dialysis Patients<sup>\*1</sup>, 2007-2010 (Form CMS-2728)**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2010		
	2007	2008	2009	2010	State	Network	U.S.
<b>Average Lab Values Prior to Dialysis<sup>*3</sup></b>							
8p Serum Creatinine (mg/dL [2-33])	7.5	6.8	6.4	6.5	6.3	6.0	6.2
8q GFR (mL/min [0-60])	9.3	9.8	10.1	10.1	10.7	11.1	11.2
<b>Care Prior to ESRD Therapy</b>							
8r Received ESA prior to ESRD (% of 8a)	58.1	59.1	54.8	50.0	30.8	29.9	21.8
8s Pre-ESRD nephrologist care (% of 8a; sums to 100%)							
No	25.8	18.2	35.5	17.9	29.0	27.5	30.4
Yes, < 6 months	12.9	9.1	25.8	28.6	9.7	8.4	13.2
Yes, 6-12 months	6.5	27.3	9.7	10.7	18.2	20.8	19.1
Yes, > 12 months	51.6	45.5	29.0	42.9	40.8	40.5	25.1
Unknown/missing	3.2	0.0	0.0	0.0	2.3	2.8	12.2
8t Informed of transplant options (% of 8a)	41.9	40.9	22.6	32.1	68.9	67.6	76.7
8u Patients not informed of transplant options (n)	18	13	24	19	11.7	10.9	7.0
8v Reason not informed (% of 8u; may not sum to 100%)							
Medically unfit	16.7	23.1	66.7	78.9	47.0	44.8	31.4
Unsuitable due to age	0.0	7.7	16.7	0.0	11.3	15.5	24.0
Psychologically unfit	0.0	0.0	0.0	0.0	3.2	2.5	2.7
Patient declined information	5.6	0.0	4.2	0.0	1.4	1.3	1.4
Patient has not been assessed	77.8	69.2	25.0	21.1	36.5	40.3	44.5
<b>Comorbid Conditions</b>							
8w Pre-existing Comorbidity (% yes of 8a)							
Congestive heart failure	48.4	54.5	45.2	50.0	34.2	33.4	32.2
Atherosclerotic heart disease <sup>**7</sup>	45.2	45.5	35.5	42.9	25.5	27.1	20.8
Other cardiac disorder <sup>**7</sup>	6.5	18.2	16.1	14.3	16.7	15.5	18.2
CVD, CVA, TIA	9.7	9.1	9.7	17.9	10.2	9.9	9.4
Peripheral vascular disease	19.4	22.7	32.3	25.0	16.2	16.8	13.6
History of hypertension	87.1	86.4	74.2	92.9	85.4	85.6	86.2
Diabetes <sup>**7</sup>	61.3	59.1	51.6	39.3	57.7	55.5	59.1
Diabetes on insulin	38.7	50.0	32.3	28.6	42.5	39.7	38.2
COPD	9.7	9.1	12.9	14.3	11.9	11.6	9.7
Current smoker	0.0	4.5	6.5	3.6	8.2	7.9	6.3
Cancer	6.5	18.2	16.1	14.3	9.5	9.5	7.7
Alcohol dependence	0.0	9.1	3.2	0.0	1.6	2.0	1.8
Drug dependence	3.2	0.0	0.0	0.0	2.3	2.1	1.3
Inability to ambulate	6.5	0.0	9.7	7.1	6.5	5.8	7.4
Inability to transfer	0.0	0.0	3.2	0.0	3.4	2.6	3.8
8x Average number of comorbid conditions	3.4	3.9	3.5	3.5	3.3	3.2	3.2

n/a= not applicable

[\*1] See *Guide, Section XI*.

[\*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.

[\*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.

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**TABLE 9: Summaries for All Dialysis Patients Treated as of December 31 of Each Year<sup>\*1</sup>, 2007-2010**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2010		
	2007	2008	2009	2010	State	Network	U.S.
9a Patients treated on 12/31 (n)	64	65	72	69	74.6	62.3	65.3
9b Average age (years)	61.4	61.9	63.4	66.1	61.4	61.3	61.2
9c Age (% of 9a; sums to 100%)							
< 18	0.0	0.0	0.0	0.0	0.5	0.4	0.4
18-64	50.0	52.3	45.8	40.6	55.0	55.2	56.2
65+	50.0	47.7	54.2	59.4	44.5	44.4	43.4
9d Female (% of 9a)	28.1	38.5	40.3	50.7	44.2	43.4	44.9
9e Race (% of 9a; sums to 100%)							
African American	4.7	4.6	8.3	5.8	12.2	9.2	37.3
Asian/Pacific Islander	17.2	16.9	13.9	11.6	13.0	9.5	5.0
Native American	1.6	0.0	0.0	0.0	2.6	4.1	1.4
White	76.6	78.5	77.8	82.6	71.6	76.7	55.1
Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.7	0.5	1.1
9f Ethnicity (% of 9a; sums to 100%)							
Hispanic	3.1	1.5	1.4	2.9	9.3	9.2	16.0
Non-Hispanic	95.3	96.9	97.2	97.1	89.5	89.8	82.4
Unknown	1.6	1.5	1.4	0.0	1.2	1.0	1.7
9g Cause of ESRD (% of 9a; sums to 100%)							
Diabetes	34.4	40.0	40.3	39.1	43.8	42.8	44.1
Hypertension	18.8	13.8	18.1	24.6	18.6	18.8	28.1
Glomerulonephritis	17.2	16.9	12.5	8.7	15.4	15.6	11.5
Other/Unknown	29.7	29.2	27.8	26.1	21.2	21.8	14.9
Missing	0.0	0.0	1.4	1.4	1.0	1.0	1.3
9h Average duration of ESRD (years)	4.4	4.6	5.5	4.8	4.5	4.5	4.5
9i Years since start of ESRD (% of 9a; sums to 100%)							
< 1	28.1	16.9	16.7	20.3	18.9	19.4	17.5
1-2	15.6	21.5	16.7	23.2	20.4	20.5	18.4
2-3	20.3	10.8	13.9	13.0	13.5	13.8	14.2
3-6	18.8	30.8	30.6	26.1	24.7	24.2	26.3
6+	17.2	20.0	22.2	17.4	22.5	22.1	23.6
9j Nursing home patients (% of 9a) <sup>*3</sup>	17.2	12.3	13.9	13.0	13.8	12.6	12.7
9k Modality (% of 9a; sums to 100%)							
In-center hemodialysis	100	100	100	100	86.3	84.6	89.9
Home hemodialysis	0.0	0.0	0.0	0.0	3.3	2.6	1.5
Continuous ambulatory peritoneal dialysis	0.0	0.0	0.0	0.0	2.0	2.7	2.3
Continuous cycling peritoneal dialysis	0.0	0.0	0.0	0.0	7.6	9.4	5.6
Other modality <sup>*4</sup>	0.0	0.0	0.0	0.0	0.8	0.7	0.7

n/a = not applicable

[\*1] See *Guide, Section XII*.

[\*2] Values are shown for the average facility.

[\*3] 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.

[\*4] 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).

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**TABLE 10: Comorbidities Reported on Medicare Claims for Medicare Dialysis Patients Treated as of December 31 of Each Year<sup>\*1</sup>, 2007-2009**

Measure Name	This Facility			Regional Averages <sup>*2</sup> , 2009		
	2007	2008	2009	State	Network	U.S.
10a Medicare dialysis patients on 12/31 (n)	50	48	56	61.9	47.2	50.8
10b Comorbidity (% yes of 10a)						
AIDS/HIV positive	0.0	2.1	0.0	0.8	0.6	1.8
Alcohol dependence	0.0	0.0	1.8	2.2	2.3	2.0
Anemia	2.0	0.0	3.6	5.0	5.0	6.6
Cancer	14.0	10.4	19.6	10.2	9.7	10.8
Cardiac arrest	2.0	4.2	0.0	1.7	1.7	1.5
Cardiac dysrhythmia	34.0	37.5	39.3	31.8	32.1	34.5
Cerebrovascular disease	16.0	27.1	32.1	22.3	20.1	26.6
Chronic obstructive pulmonary disease	14.0	16.7	23.2	24.8	24.2	29.1
Congestive heart failure	40.0	45.8	50.0	43.4	42.4	50.8
Diabetes	52.0	56.3	55.4	56.9	56.0	62.2
Drug dependence	4.0	6.3	1.8	2.9	2.9	1.9
Gastrointestinal tract bleeding	0.0	4.2	1.8	2.1	2.1	2.7
Hepatitis B	0.0	0.0	0.0	1.2	0.9	1.1
Hepatitis other	2.0	0.0	0.0	5.1	4.6	4.8
Hyperparathyroidism	4.0	10.4	3.6	7.0	6.8	8.2
Infection: dialysis access-related	18.0	16.7	17.9	16.3	16.5	18.9
Infection: not related to dialysis access	54.0	41.7	41.1	45.5	42.9	49.8
Ischemic heart disease	56.0	54.2	51.8	40.5	39.9	49.9
Myocardial infarction	10.0	14.6	1.8	7.0	6.7	8.4
Peripheral vascular disease <sup>*3</sup>	48.0	47.9	53.6	38.8	35.7	44.3
Pneumonia	14.0	10.4	8.9	5.7	5.2	5.6
10c Average number of comorbid conditions	3.8	4.1	4.1	3.7	3.6	4.2

n/a = not applicable

[\*1] Based on patients with Medicare as primary insurer on 12/31 each year. See *Guide, Section XIII*.

[\*2] Values are shown for the average facility.

[\*3] Peripheral vascular disease includes both venous and arterial diseases.



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**TABLE 11: How Patients Were Assigned to This Facility and End of Year Patient Status<sup>\*1</sup>, 2007-2010**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2010		
	2007	2008	2009	2010	State	Network	U.S.
11a Number of patients placed in facility <sup>*1</sup> (n)	97	90	95	104	104.0	86.5	90.9
11b Initial patient placement for the year in this facility (% of 11a; sums to 100%)							
Continuing at facility on 01/01	63.9	71.1	68.4	69.2	67.4	67.0	69.0
Incident (new to ESRD)	21.6	21.1	23.2	22.1	20.7	21.1	19.3
Transferred into facility	14.4	7.8	8.4	8.7	12.0	11.8	11.7
11c Patient status at end of year (% of 11a; sums to 100%)							
Alive in this facility on 12/31	66.0	72.2	75.8	66.3	71.7	72.0	71.9
Alive in another facility on 12/31	11.3	7.8	8.4	10.6	8.2	8.1	8.4
Received a transplant	6.2	4.4	3.2	3.8	3.6	3.4	2.7
Died; death attributed to this facility	14.4	13.3	8.4	15.4	13.6	13.5	13.5
Died; death attributed to another facility	1.0	1.1	0.0	1.9	1.1	1.1	1.4
Other <sup>*3</sup>	1.0	1.1	4.2	1.9	1.9	2.0	2.2

[\*1] Patient assignment for Tables 1,2,3,9, and 10 only. See *Guide, Section XIV*.

[\*2] Values are shown for the average facility.

[\*3] Includes patients who recovered renal function, discontinued dialysis, or were lost to follow-up. Also includes dialysis unrelated deaths. Dialysis unrelated deaths are not attributed to any facility for the purposes of the mortality calculations in this report.

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**TABLE 12: Patient and Staff Counts from the Annual Facility Survey (Form CMS-2744)<sup>\*1</sup>, 2007-2010**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2010		
	2007	2008	2009	2010	State	Network	U.S.
<b>Patients Treated During the Year</b>							
12a Patients treated during year (n)	110	104	120	121	119.0	98.6	103.3
12b Incident patients (% of 12a)	28.2	22.1	25.0	25.6	19.1	20.1	19.0
12c Transferred into facility (% of 12a)	11.8	11.5	11.7	8.3	15.6	15.0	13.6
12d Transferred out of facility (% of 12a)	20.0	14.4	17.5	16.5	14.9	14.6	14.1
<b>Patients Treated on 12/31</b>							
12e Patients treated on 12/31 (n)	68	70	79	77	81.1	66.9	70.8
12f Patient modality on 12/31 (n; sums to 12e)							
In-center HD	68	70	79	77	70.9	57.3	64.2
In-center CAPD	0	0	0	0	0.0	0.1	0.0
In-center CCPD	0	0	0	0	0.0	0.0	0.0
In-center Other	0	0	0	0	0.0	0.0	0.0
Home HD	0	0	0	0	2.5	1.6	1.0
Home CAPD	0	0	0	0	1.6	1.9	1.9
Home CCPD	0	0	0	0	6.0	6.0	3.7
Home Other	0	0	0	0	0.0	0.0	0.0
12g Medicare eligibility status on 12/31 (% of 12e; sums to 100% <sup>*3</sup> )							
Medicare	80.9	74.3	78.5	81.8	87.3	89.2	86.3
Medicare application pending	13.2	18.6	15.2	11.7	6.7	5.7	9.3
Non-Medicare	5.9	7.1	6.3	6.5	5.9	5.1	4.4
<b>Facility Staffing on 12/31<sup>*4</sup></b>							
12h Total full and part time staff positions (n)	20	20	19	20	19.3	15.7	14.0
12i Staff positions by type (n; sums to 12h)							
Full time nurse <sup>*5</sup>	4	5	4	3	5.0	4.5	4.7
Full time patient care technician	4	4	4	5	7.1	5.8	5.2
Full time renal dietician	0	0	0	0	0.4	0.4	0.5
Full time social worker	0	0	0	0	0.5	0.4	0.5
Part time nurse <sup>*5</sup>	4	2	2	4	2.5	1.6	1.0
Part time patient care technician	6	6	7	6	2.2	1.5	0.8
Part time renal dietician	1	1	1	1	0.8	0.8	0.6
Part time social worker	1	2	1	1	0.7	0.7	0.6

[\*1] See *Guide, Section XV*.

[\*2] Values are shown for the average facility.

[\*3] Values may not sum to exactly 100% because of unknown Medicare status.

[\*4] Data as of March 31, 2011. A *full time position* is defined as a position with at least 32 hours of employment a week and a *part time position* is defined as a position with less than 32 hours of employment a week (includes positions that were opened but not filled on this date).

[\*5] Nursing staff includes registered nurse, licensed practical nurse, vocational nurse, or advanced practice nurse degree.

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**TABLE 13: Survey and Certification Activity<sup>\*1</sup>, January 2007-October 2008**

Measure Name	This Facility Survey	Regional Averages <sup>*2</sup> , Jan 2007-Oct 2008		
		State	Network	U.S.
13a Date of last survey	06/18/2007	n/a	n/a	n/a
13b Type of last survey	RECERTIFICATION	n/a	n/a	n/a
13c Compliance condition after last survey	Acceptable plan of correction	n/a	n/a	n/a
13d Number of deficiencies cited at last survey <sup>*3</sup>				
Condition for coverage (CfC) deficiencies	0	0.0	0.2	0.2
Standard deficiencies	2	5.4	4.3	4.2
13e CfC deficiencies cited at last survey <sup>*3</sup>				
V100 Compliance with Fed., State, and local	No, not cited	0.0	0.0	0.1
V110 Governing body and management	No, not cited	0.0	6.7	8.0
V185 Long term program and care plan	No, not cited	0.0	1.3	2.2
V215 Patient rights and responsibilities	No, not cited	0.0	0.0	0.4
V230 Medical records	No, not cited	0.0	1.3	1.1
V255 Physical environment	No, not cited	0.0	5.3	5.1
V300 Reuse	No, not cited	0.0	0.0	0.7
V410 Affiliation agreement-arrangement	No, not cited	0.0	0.0	0.2
V420 Director of a renal dialysis facility	No, not cited	0.0	2.7	2.5
V430 Staff of a renal dialysis facility	No, not cited	0.0	0.0	1.5
V440 Minimal service requirements	No, not cited	0.0	0.0	1.0

n/a = not applicable

[\*1] See *Guide, Section XVI*.

[\*2] Average values are shown for the latest survey at each facility during the period January 2007 through October 2008.

[\*3] Values are shown for the latest survey at each facility during the period January 2007 through October 2008.

**TABLE 14: Facility Information<sup>\*1</sup>, 2011**

Field	This Facility
Ownership:	Non-profit
Organization:	REGIONAL-NORTHWEST KIDNEY CENTERS
Initial Medicare certification date:	04/29/1996
Number of stations:	15
Services provided:	Hemodialysis and Peritoneal Dialysis
Provider numbers included in this report:	502516
National Provider Identifier (NPI) <sup>*2</sup> :	1912090531

[\*1] Information based on SIMS data as of March 31, 2011. See *Guide, Section XVII*.

[\*2] Information based on CROWNWEB data as of April 2011. If missing, data was not available.