

# 2013 Dialysis Facility Report

## Purpose of the Report

The *2013 Dialysis Facility Report (DFR)* 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 2014 survey and certification process.

This report has been prepared for this facility by the University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) and Arbor Research Collaborative for Health 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 eighteenth in a series of annual reports. This is one of 6,207 reports that have been distributed to ESRD providers in the U.S.

## **This DFR includes data specific to CCN(s): 502510**

**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 2009 and December 2012. 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 2013 Dialysis Facility Reports*. The *Guide* may be downloaded from the methodology section of the Dialysis Reports website at [www.DialysisReports.org](http://www.DialysisReports.org).

**What's New This Year:** As part of a continuing effort to improve the quality and relevance of this report, the following changes have been incorporated into your 2013 DFR. The UM-KECC ESRD database now includes the new web-based data collection system, CROWNWeb. It was rolled out nationally in June 2012 and replaces the functionality of SIMS. Authorized users may now securely submit, update, and verify data provided to Medicare about people who have ESRD on a monthly basis. In addition, the Influenza Vaccination table (Table 5) has been amended to include vaccinations administered during the month of August to better coordinate with delivery date of vaccine supply to facilities.

## How to Submit Comments

**Between August 29, 2013 and September 22, 2013**, facilities may submit comments to their state surveyor or UM-KECC by visiting [www.DialysisReports.org](http://www.DialysisReports.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 [Support@DialysisReports.org](mailto:Support@DialysisReports.org) or 1-877-665-1680.

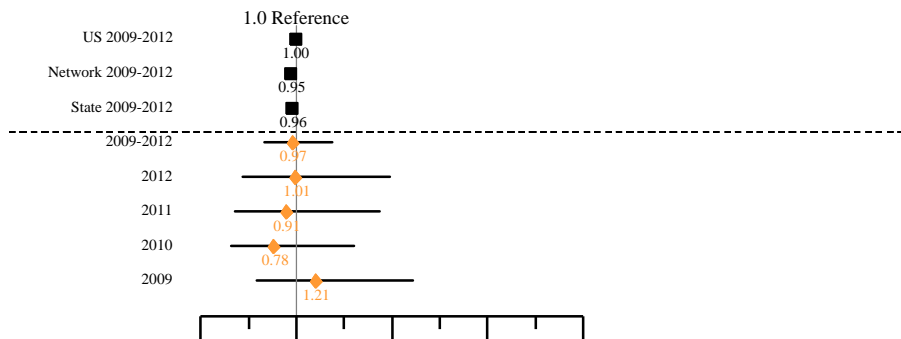
- (1) **State Surveyor:** Dialysis Facilities may submit comments on the DFR for their state's surveyors. State surveyor(s) will receive a copy of their DFR with the comments they submitted in September 2013.
- (2) **UM-KECC:** Submit questions or suggestions to improve the DFR to UM-KECC. These comments will not be shared with CMS or your state surveyor.

## Facility Highlights

### Standardized Mortality Ratio (SMR) (Table 1):

- At this facility, 2009-2012 SMR is 0.97, which is 3% fewer deaths than expected at this facility. Among all U.S. facilities, 45% of facilities had a four-year SMR lower than 0.97. This difference is not statistically significant ( $p \geq 0.05$ ), so this lower mortality could plausibly be just a chance occurrence. The 2009-2012 SMR of observed to expected deaths is 0.96 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.

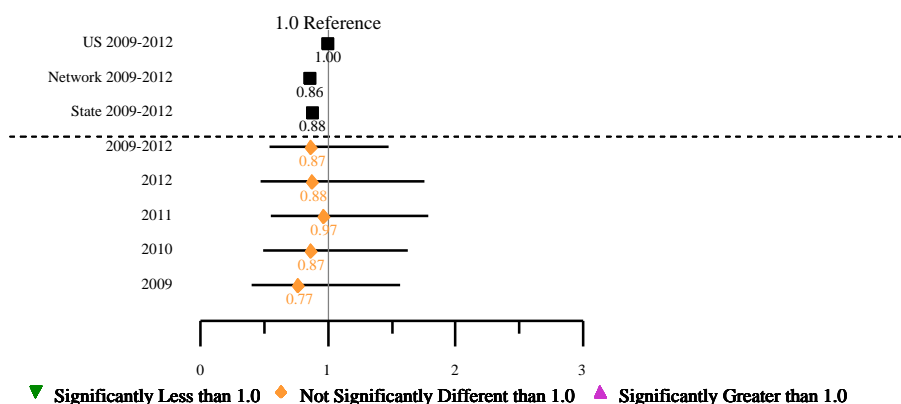


- At this facility, the 2009-2011 first-year SMR of observed to expected deaths is 0.82, which is 18% fewer deaths than expected at this facility. Among all U.S. facilities, 35% of facilities had a first-year SMR lower than 0.82. This difference is not statistically significant ( $p \geq 0.05$ ), so this lower mortality could plausibly be just a chance occurrence. The first-year SMR (2009-2011) of observed to expected deaths is 0.86 and 0.86 for your State and Network, respectively.

### Standardized Hospitalization Ratio (SHR) (Table 2):

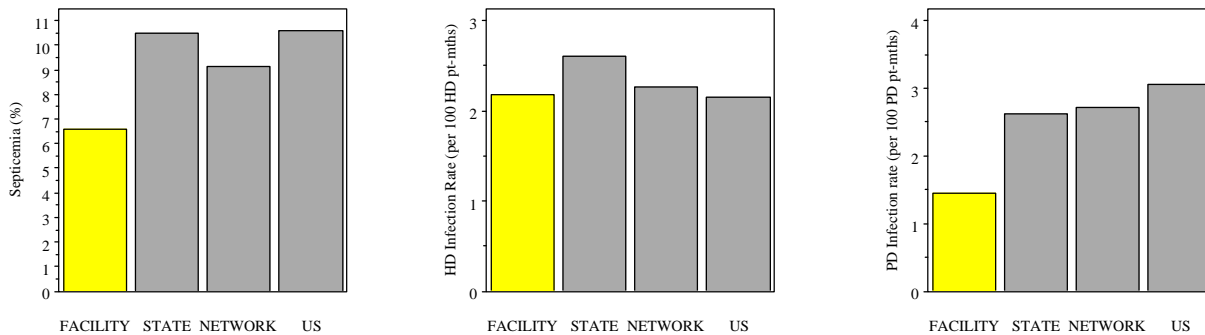
- The 2009-2012 SHR (ED) at this facility is 1.43, which is 43% more ED visits than expected. This difference is not statistically significant ( $p \geq 0.05$ ), so this higher ED visit ratio could plausibly be just a chance occurrence. The 2009-2012 SHR (ED) for your State and Network is 0.97 and 0.95, respectively.
- The 2009-2012 SHR (Days) at this facility is 0.76, which is 24% fewer days hospitalized than expected. This difference is not statistically significant ( $p \geq 0.05$ ), so this lower hospitalization could plausibly be just a chance occurrence. The 2009-2012 SHR (Days) for your State and Network is 0.68 and 0.67, respectively.
- The 2009-2012 SHR (Admissions) at this facility is 0.87, which is 13% fewer admissions hospitalized than expected. This difference is not statistically significant ( $p \geq 0.05$ ), so this lower hospitalization could plausibly be just a chance occurrence. The 2009-2012 SHR (Admissions) for your State and Network is 0.88 and 0.86, 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 2009-2012 was 6.6%, compared to 10.5% in your State, 9.2% in your Network, and 10.6% nationally.
- The rate of HD infection among HD patients at this facility in 2012 was 2.2 per 100 HD patient-months, compared to 2.6 in your State, 2.3 in your Network, and 2.2 nationally.
- The rate of PD catheter-related infection was 1.4 per 100 PD patient-months, compared to 2.6 in your State, 2.7 in your Network, and 3.0 nationally.

**Transplantation (Table 3):**

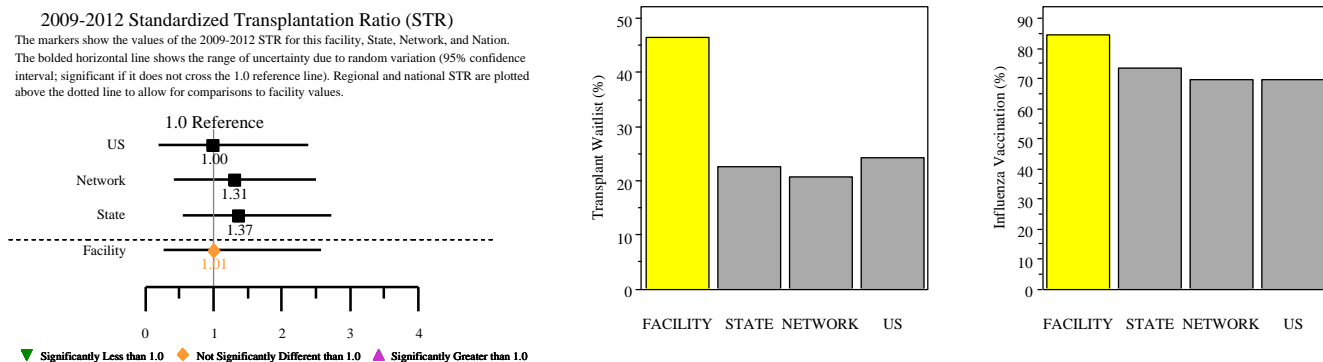
- Of the patients under age 70 treated at this facility during 2009-2012 who had not previously received a transplant, 4% were transplanted annually, while a rate of 4% would be expected for these patients.
- The 2009-2012 Standardized 1<sup>st</sup> Transplantation Ratio (STR) of observed to expected number of patients transplanted for this facility is 1.01, which is 1% higher than expected for this facility. This difference is not statistically significant ( $p \geq 0.05$ ) and could plausibly be due to random chance. The 2009-2012 STR for your State and Network is 1.37 and 1.31, respectively.

**Transplant Waitlist (Table 4):**

- The percentage of patients on the kidney transplant waitlist on December 31, 2012 in your State and Network is 23% and 21%, respectively. Among the 28 dialysis patients under age 70 treated at this facility on December 31, 2012, 46% 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):**

- Among the 32 Medicare dialysis patients treated at this facility on December 31, 2011, 84% were vaccinated between September 1 and December 31, 2011 compared to 70% nationally. This difference is statistically significant ( $p < 0.05$ ) and is unlikely to be due to random chance. The percentage of patients vaccinated in your State, Network, and nation is 73%, 70%, and 70%, respectively.



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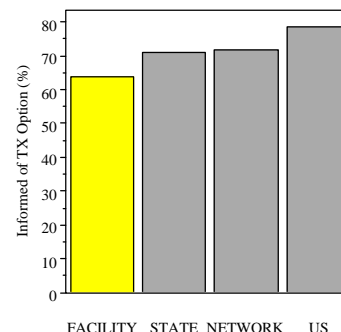
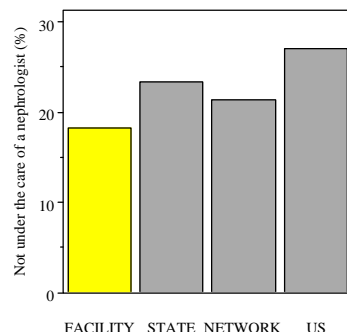
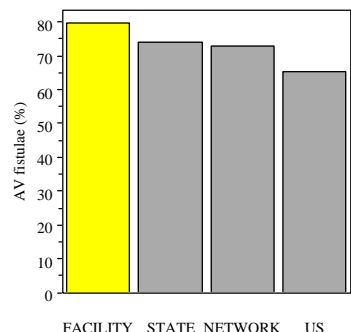
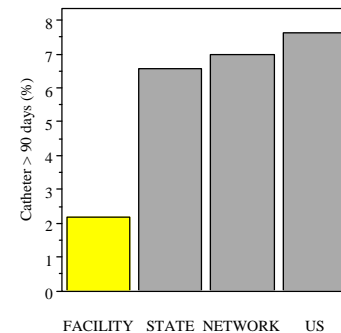
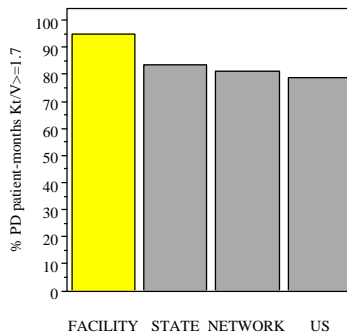
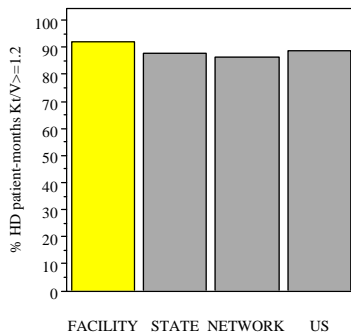
NKC PORT ANGELES KIDNEY CENTER State: WA Network: 16 CCN: 502510

## Practice Patterns (Tables 6 and 7):

- Among the 36 ESA-treated dialysis patients included in the analysis in 2012, the average hemoglobin calculated is 10.7 g/dL, compared to 10.7 g/dL in your State, 10.7 g/dL in your Network, and 10.6 g/dL nationally.
- Among the 31 HD patients in this facility included in the analysis in 2012, 100% had URR above the KDOQI minimum value for URR (65%), compared to 99% in your State, 98% in your Network, and 98% nationally.
- In 2012, 92% of eligible HD patient-months had a Kt/V  $\geq 1.2$ , compared to 88% in your State, 87% in your Network, and 89% nationally.
- In 2012, 95% of eligible PD patient-months had a Kt/V  $\geq 1.7$ , compared to 83% in your State, 81% in your Network, and 79% nationally.
- At this facility in 2012, an average of 100% of incident patients had arteriovenous (AV) fistulae in place, compared to 42% in your State, 41% in your Network, and 32% nationally.
- Of the prevalent patients receiving hemodialysis treatment at this facility in 2012, 2% 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 8% nationally.

## Patient Characteristics (Tables 9 and 10):

- Among the 11 patients with Medical Evidence Forms (CMS-2728) indicating treatment at this facility during 2012:
  - 18% of these patients were not under the care of a nephrologist before starting dialysis, compared to 23% in your State, 21% in your Network, and 27% nationally.
  - 64% of these patients were informed of their transplant options, compared to 71% in your State, 72% in your Network, and 78% nationally.
- Among the patients treated at this facility on December 31, 2012, 5% were treated in a nursing home during the year, compared to 6% nationally.



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

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**TABLE 1: Mortality Summary for All Dialysis Patients (2009-12) & New Dialysis Patients (2009-11)\*<sup>1</sup>**

Measure Name	This Facility					Regional Averages* <sup>2</sup> , per Year, 2009-2012		
	2009	2010	2011	2012	2009-2012	State	Network	U.S.
<b>All Patients: Death Rates</b>								
1a Patients (n=number)	59	56	55	57	227 * <sup>8</sup>	100.3	81.0	96.3
1b Patient-years (PY) at risk (n)	39.6	43.2	39.6	41.0	163.3 * <sup>8</sup>	69.8	56.1	62.9
1c Deaths (n)	10	7	7	8	32 * <sup>8</sup>	13.4	10.8	11.7
1d Expected deaths (n)	8.27	9.01	7.73	7.95	33.0 * <sup>8</sup>	14.0	11.3	11.7
<b>All Patients: Categories of Death</b>								
1e Withdrawal from dialysis prior to death (% of 1c)	30.0	28.6	28.6	50.0	34.4	40.9	41.4	25.4
1f Death due to: Infections (% of 1c)	0.0	14.3	0.0	0.0	3.1	16.4	16.2	14.6
Cardiac causes (% of 1c)	60.0	14.3	85.7	62.5	56.3	40.0	43.1	45.8
1g Dialysis unrelated deaths * <sup>3</sup> (n; excluded from SMR)	0	0	0	0	0 * <sup>8</sup>	0.2	0.1	0.1
<b>All Patients: Standardized Mortality Ratio (SMR)</b>								
1h SMR * <sup>4</sup>	1.21	0.78	0.91	1.01	0.97	0.96	0.95	1.00
1i P-value * <sup>5</sup>	0.634	0.644	0.982	0.990	0.958	n/a	n/a	n/a
1j Confidence interval for SMR * <sup>6</sup>								
High (97.5% limit)	2.22	1.60	1.87	1.98	1.37	n/a	n/a	n/a
Low (2.5% limit)	0.58	0.31	0.36	0.43	0.66	n/a	n/a	n/a
1k SMR Percentiles for this Facility (i.e. percent of facilities with lower mortality rates) * <sup>7</sup>								
In this State	72	27	45	53	51	n/a	n/a	n/a
In this Network	73	32	47	62	54	n/a	n/a	n/a
In the U.S.	71	28	40	52	45	n/a	n/a	n/a
<b>New Patients: First Year Death Rates</b>								
	<b>2009</b>	<b>2010</b>	<b>2011</b>		<b>2009-2011</b>	<b>Regional Averages Per Year, 2009-2011 *<sup>2</sup></b>		
1l New Patients (n=number)	15	9	9		33 * <sup>8</sup>	22.9	18.9	18.5
1m Patient-years (PY) at risk (n)	12.6	6.7	8.9		28.3 * <sup>8</sup>	20.0	16.5	16.0
1n Deaths (n)	3	3	1		7 * <sup>8</sup>	4.4	3.7	4.0
1o Expected deaths (n)	4.1	1.8	2.6		8.6 * <sup>8</sup>	5.1	4.3	4.0
<b>New Patients: Categories of Deaths</b>								
1p Withdrawal from dialysis prior to death (% of 1n)	33.3	66.7	0.0		42.9	43.8	45.0	28.1
1q Death due to: Infections (% of 1n)	0.0	33.3	0.0		14.3	14.2	14.1	13.4
Cardiac causes (% of 1r)	66.7	100	100		85.7	37.8	40.2	42.1
<b>New Patients: First Year Standardized Mortality Ratio (SMR)</b>								
1r SMR * <sup>4</sup>	0.73	.	.		0.82	0.86	0.86	1.00
1s P-value * <sup>5</sup>	0.822	.	.		0.755	n/a	n/a	n/a
1t Confidence interval for SMR * <sup>6</sup>								
High (97.5% limit)	2.13	.	.		1.68	n/a	n/a	n/a
Low (2.5% limit)	0.15	.	.		0.33	n/a	n/a	n/a
1u First Year SMR Percentiles for this Facility (i.e. percent of facilities with lower mortality rates) * <sup>7</sup>								
In this State	42	.	.		52	n/a	n/a	n/a
In this Network	43	.	.		47	n/a	n/a	n/a
In the U.S.	35	.	.		35	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, 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.

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NKC PORT ANGELES KIDNEY CENTER State: WA Network: 16 CCN: 502510

**TABLE 2: Hospitalization Summary for Medicare Dialysis Patients<sup>\*1</sup>, 2009-2012**

Measure Name	This Facility					Regional Averages <sup>*2</sup> , per Year, 2009-2012		
	2009	2010	2011	2012	2009-2012	State	Network	U.S.
<b>Medicare Dialysis Patients</b>								
2a Medicare dialysis patients (n)	53	50	49	45	197 <sup>*3</sup>	81.4	65.1	76.4
2b Patient-years (PY) at risk (n)	33.5	36.4	34.0	31.6	135.6 <sup>*3</sup>	53.3	41.7	45.9
<b>Days Hospitalized Statistics</b>								
2c Total days hospitalized (n)	286	310	489	342	1427 <sup>*3</sup>	517.5	390.8	641.8
2d Expected total days hospitalized (n)	498.6	515.6	460.7	406.1	1881.1 <sup>*3</sup>	758.5	585.2	643.7
2e Standardized Hospitalization Ratio (Days) <sup>*4</sup>	0.57	0.60	1.06	0.84	0.76	0.68	0.67	1.00
2f P-value <sup>*5</sup>	0.340	0.359	0.739	0.813	0.538	n/a	n/a	n/a
2g Confidence Interval for SHR (Days) <sup>*6</sup>								
High (97.5% limit)	1.62	1.63	2.25	2.08	1.57	n/a	n/a	n/a
Low (2.5% limit)	0.25	0.26	0.56	0.39	0.42	n/a	n/a	n/a
2h Percentiles for this Facility (i.e. % of facilities with lower hospitalization rates [days]) <sup>*7</sup>								
In this State	33	38	94	72	71	n/a	n/a	n/a
In this Network	42	41	93	76	75	n/a	n/a	n/a
In the U.S.	14	15	63	39	26	n/a	n/a	n/a
<b>Admission Statistics</b>								
2i Total admissions (n)	52	62	63	52	229 <sup>*3</sup>	93.1	70.5	89.9
2j Expected total admissions (n)	67.4	71.5	64.9	58.9	262.7 <sup>*3</sup>	106.1	82.2	90.0
2k Standardized Hospitalization Ratio (Admissions) <sup>*4</sup>	0.77	0.87	0.97	0.88	0.87	0.88	0.86	1.00
2l P-value <sup>*5</sup>	0.503	0.701	0.965	0.764	0.659	n/a	n/a	n/a
2m Confidence Interval for SHR (Admissions) <sup>*6</sup>								
High (97.5% limit)	1.56	1.63	1.78	1.76	1.47	n/a	n/a	n/a
Low (2.5% limit)	0.40	0.49	0.55	0.47	0.54	n/a	n/a	n/a
2n Percentiles for this Facility (i.e. % of facilities with lower hospitalization rates [admissions]) <sup>*7</sup>								
In this State	33	62	65	46	46	n/a	n/a	n/a
In this Network	41	57	67	54	56	n/a	n/a	n/a
In the U.S.	24	37	50	38	34	n/a	n/a	n/a
2o Diagnoses Associated with Hospitalization (% of 2a) <sup>*8</sup>								
Septicemia	3.8	6.0	8.2	8.9	6.6	10.5	9.2	10.6
Acute myocardial infarction	5.7	2.0	10.2	2.2	5.1	4.1	4.0	4.0
Congestive heart failure	15.1	18.0	20.4	20.0	18.3	20.2	18.9	21.8
Cardiac dysrhythmia	11.3	16.0	30.6	22.2	19.8	14.8	13.6	13.5
Cardiac arrest	1.9	2.0	0.0	2.2	1.5	1.8	1.6	1.5
2p One day admissions (% of 2i)	28.8	27.4	20.6	13.5	22.7	18.4	18.0	13.5
2q Average length of stay (days per admission; 2c/2i)	5.5	5.0	7.8	6.6	6.2	5.6	5.5	7.1
2r Readmissions within 30 days (n) <sup>*9</sup>	12	25	17	13	67 <sup>*3</sup>	26.6	19.2	27.9
2s Admissions that result in readmission within 30 days (% of 2i) <sup>*9</sup>	23.1	40.3	27.0	25.0	29.3	28.6	27.2	31.1

(continued)

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NKC PORT ANGELES KIDNEY CENTER State: WA Network: 16 CCN: 502510

**TABLE 2 (cont.): Hospitalization Summary for Medicare Dialysis Patients<sup>\*1</sup>, 2009-2012**

Measure Name	This Facility					Regional Averages <sup>*2</sup> , per Year, 2009-2012		
	2009	2010	2011	2012	2009-2012	State	Network	U.S.
<b>Emergency Department (ED) Statistics</b>								
2t Total ED visits (n)	129	142	126	159	556 <sup>*3</sup>	154.7	117.4	135.1
2u Expected total ED visits (n)	96.9	106	99.4	87.9	390 <sup>*3</sup>	159.2	123.7	135.5
2v Standardized Hospitalization Ratio (ED) <sup>*4</sup>	1.33	1.34	1.27	1.81	1.43	0.97	0.95	1.00
2w P-value <sup>*5</sup>	0.215	0.197	0.330	<0.01	0.052	n/a	n/a	n/a
2x Confidence Interval for SHR (ED) <sup>*6</sup>								
High (97.5% limit)	2.10	2.12	2.03	2.70	2.03	n/a	n/a	n/a
Low (2.5% limit)	0.85	0.86	0.79	1.22	1.00	n/a	n/a	n/a
2y Percentiles for this Facility (i.e. % of facilities with lower hospitalization rates [ED]) <sup>*7</sup>								
In this State	90	97	87	98	94	n/a	n/a	n/a
In this Network	91	92	89	97	95	n/a	n/a	n/a
In the U.S.	88	88	84	98	94	n/a	n/a	n/a
2z Patients with ED visit (% of 2a)	60.4	62.0	67.3	66.7	64.0	61.9	60.7	58.9
2aa ED visits that result in hospitalization (% of 2t)	18.6	31.7	32.5	23.3	26.4	44.1	41.8	50.6
2bb Admissions that originate in the ED (% of 2i)	46.2	72.6	65.1	71.2	64.2	73.3	69.6	76.1

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 Hospitalization Ratio calculated as ratio of actual to expected events (2c/2d for days, 2i/2j for admissions, and 2t/2u for ED visits); not shown if there are too few patient years at risk.

[\*5] A p-value less than 0.05 indicates that the difference between the actual and expected hospitalization/ED 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 Ratio (SHR) 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.

[\*9] This value may be an underestimate since readmissions discharged after December 31, 2012 are not included.

# 2013 Dialysis Facility Report

NKC PORT ANGELES KIDNEY CENTER State: WA Network: 16 CCN: 502510

**TABLE 3: Transplantation Summary for Dialysis Patients under Age 70<sup>\*1</sup>, 2009-2012**

Measure Name	This Facility					Regional Averages <sup>*2</sup> , per Year, 2009-2012		
	2009	2010	2011	2012	2009-2012	State	Network	U.S.
3a Eligible patients (n)	36	33	30	35	134 <sup>*10</sup>	67.9	54.9	66.3
3b Transplants (n)	1	1	1	3	6 <sup>*10</sup>	3.2	2.4	2.1
3c Donor type (sums to 3b <sup>*3</sup> )								
Living Donor (n)	0	0	0	0	0 <sup>*10</sup>	0.9	0.8	0.7
Deceased Donor (n)	1	1	1	3	6 <sup>*10</sup>	2.3	1.7	1.5
<b>Patients who have not Previously Received a Transplant</b>								
3d Eligible patients (n)	32	29	26	30	117 <sup>*10</sup>	61.2	49.2	59.5
3e Patient years (PY) at risk (n)	23.7	22.7	20.1	22.7	89.3 <sup>*10</sup>	42.7	34.3	39.4
3f First transplants <sup>*4</sup> (n)	0	1	1	2	4 <sup>*10</sup>	2.8	2.1	1.8
3g Expected First transplants (n)	1.1	1.0	0.9	1.0	4.0 <sup>*10</sup>	2.0	1.6	1.8
<b>Standardized 1st Transplantation Ratio (STR)<sup>*5</sup></b>								
3h STR <sup>*6</sup>	.	.	.	.	1.01	1.37	1.31	1.00
3i P-value <sup>*7</sup>	.	.	.	.	0.990	n/a	n/a	n/a
3j 95% Confidence interval for STR <sup>*8</sup>								
Upper limit	.	.	.	.	2.58	n/a	n/a	n/a
Lower limit	.	.	.	.	0.27	n/a	n/a	n/a
3k STR Percentiles for this Facility (i.e. percent of facilities with lower transplantation rates) <sup>*9</sup>								
In this State	.	.	.	.	32	n/a	n/a	n/a
In this Network	.	.	.	.	41	n/a	n/a	n/a
In the U.S.	.	.	.	.	54	n/a	n/a	n/a

**TABLE 4: Waitlist Summary for Dialysis Patients under Age 70 Treated on December 31st of Each Year<sup>\*1</sup>, 2009-2012**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2012		
	2009	2010	2011	2012	State	Network	U.S.
4a Eligible patients on 12/31 (n)	28	27	27	28	53.8	44.3	46.2
4b Patients on the waitlist (% of 4a)	21.4	33.3	40.7	46.4	22.6	20.7	24.3
4c P-value (compared to U.S. value) <sup>*11</sup>	0.465	0.194	0.044	<0.01	n/a	n/a	n/a
4d Patients on the waitlist by subgroup (%) <sup>*12</sup>							
Age < 40	0.0	0.0	50.0	50.0	35.5	31.9	36.7
Age 40-69	23.1	37.5	39.1	46.2	20.6	18.8	22.5
Male	0.0	33.3	37.5	44.4	23.4	21.6	25.3
Female	30.0	33.3	42.1	47.4	21.6	19.4	22.9
African American	.	.	.	.	23.6	20.8	22.4
Asian/Pacific Islander	50.0	66.7	50.0	50.0	25.7	25.8	36.2
Native American	0.0	25.0	60.0	75.0	15.0	16.1	18.9
White, Hispanic	.	.	.	.	21.4	20.5	27.7
White, Non-Hispanic	21.7	30.0	33.3	40.9	22.3	20.2	23.2
Other/unknown race	.	.	.	.	22.9	22.6	28.5
Diabetes	10.0	33.3	50.0	45.5	15.4	14.7	19.6
Non-diabetes	27.8	33.3	36.8	47.1	28.7	25.5	27.9
Previous kidney transplant	0.0	25.0	33.3	0.0	39.9	36.8	45.5
No previous kidney transplant	24.0	34.8	41.7	50.0	20.8	18.9	22.3
< 2 years since start of ESRD	16.7	20.0	36.4	35.7	17.5	16.2	16.2
2-4 years since start of ESRD	44.4	55.6	60.0	85.7	25.6	23.1	28.4
5+ years since start of ESRD	0.0	25.0	16.7	28.6	26.2	23.7	29.0

n/a = not applicable [\*1] See *Guide, Section VI and VII*. [\*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 2009-2012, 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 1.6% 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 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: 24.2% (2009), 24.5% (2010), 24.4% (2011), 24.3% (2012). 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. [\*12] A missing value indicates that there were no eligible patients in the subgroup.



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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 August 2009-March 2012**

Measure Name	This Facility			Regional Averages, 2011-2012 <sup>*2</sup>		
	2009-10	2010-11	2011-12	State	Network	U.S.
5a Eligible patients on 12/31 (n)	38	40	32	59.9	46.2	49.8
5b Patients vaccinated between Aug. 1 and Dec. 31 (% of 5a)	86.8	90.0	84.4	73.4	69.8	69.7
5c P-value <sup>*3</sup> (for 5b compared to U.S. value <sup>*4</sup> )	0.012	<0.01	0.047	n/a	n/a	n/a
5d Patients vaccinated between Aug. 1 and Mar. 31 (% of 5a)	86.8	90.0	84.4	74.0	70.4	70.3
5e P-value <sup>*3</sup> (for 5d compared to U.S. value <sup>*5</sup> )	0.019	<0.01	0.055	n/a	n/a	n/a
5f Patients vaccinated between Aug. 1 and Dec. 31 by subgroup (%) <sup>*6</sup>						
Age < 18	.	.	.	76.5	65.5	49.8
Age 18-39	50.0	100	75.0	68.1	65.8	65.4
Age 40-64	76.9	85.7	90.9	73.6	69.8	69.2
Age 65-74	90.9	75.0	83.3	73.2	69.8	70.2
Age 75+	100	100	81.8	75.2	71.6	72.0
Male	87.5	88.2	83.3	72.5	69.2	69.9
Female	86.4	91.3	85.0	74.6	70.6	69.6
African American	.	.	.	73.0	67.5	66.9
Asian/Pacific Islander	100	100	100	79.3	72.9	72.9
Native American	50.0	100	75.0	74.8	58.1	74.2
White	87.9	87.9	84.0	72.3	70.3	71.3
Other/unknown race	.	.	.	81.8	68.5	66.1
Hispanic	.	.	100	79.8	79.3	71.2
< 1 year since start of ESRD	72.7	100	60.0	61.8	59.4	58.1
1-2 years since start of ESRD	90.0	86.7	100	74.7	71.2	69.7
3+ years since start of ESRD	94.1	89.5	83.3	76.7	72.3	73.2

n/a = not applicable

<sup>\*1</sup> Based on patients with Medicare as primary insurer; see *Guide, Section VIII*.

<sup>\*2</sup> Values are shown for the average facility.

<sup>\*3</sup> 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.

<sup>\*4</sup> Compared to the U.S. value for that year and time period (8/1-12/31): 69.8% (2009-10), 68.7% (2010-11), 69.7% (2011-12).

<sup>\*5</sup> Compared to the U.S. value for that year and time period (8/1-3/31): 71.2% (2009-10), 69.3% (2010-11), 70.3% (2011-12).

<sup>\*6</sup> A missing value indicates that there were no eligible patients in the subgroup.

**TABLE 6: Facility Modality, Hemoglobin, and Dialysis Adequacy for Medicare Dialysis Patients<sup>\*1</sup>, 2009-2012**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2012		
	2009	2010	2011	2012	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)	56	53	52	50	103.9	78.0	75.3
6b Patient-months treated during year (n) <sup>*3</sup>	425	464	429	398	736.9	559.3	565.2
6c Modality (% of 6b; sums to 100%)							
Hemodialysis	80.9	73.5	75.5	85.2	84.5	85.1	91.5
CAPD/CCPD	9.6	16.4	12.4	12.1	7.2	9.9	7.4
Other dialysis <sup>*4</sup>	9.4	10.1	12.1	2.8	8.3	5.1	1.1
6d Percent of patient-months prescribed Iron by Modality <sup>*5</sup>							
Hemodialysis	85.8	80.9	50.3	54.0	60.3	60.7	62.4
CAPD/CCPD	53.7	51.3	54.7	60.4	22.6	18.9	24.4
<b>Hemoglobin (among ESA-treated dialysis patients with ESRD for 90+ days and 4+ Hemoglobin claims at this facility)</b>							
6e Eligible patients (n)	36	43	35	36	56.3	42.2	45.5
6f Average hemoglobin (g/dL)	11.6	11.2	11.0	10.7	10.7	10.7	10.6
6g Hemoglobin categories (% of 6e; sums to 100%)							
< 10 g/dL	2.8	0.0	5.7	8.3	8.0	7.7	10.1
10-<11 g/dL	8.3	20.9	37.1	52.8	60.9	61.1	62.1
11-<12 g/dL	83.3	79.1	57.1	38.9	30.6	30.5	27.2
> 12 g/dL	5.6	0.0	0.0	0.0	0.5	0.7	0.6

(continued)

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**TABLE 6 (cont.): Facility Modality, Hemoglobin, and Dialysis Adequacy for Medicare Dialysis Patients<sup>\*1</sup>, 2009-2012**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2012		
	2009	2010	2011	2012	State	Network	U.S.
<b>Hemoglobin (among ESA-treated dialysis patients with ESRD for 90+ days and 4+ Hemoglobin claims at this facility) (cont.)</b>							
6h Eligible hemodialysis (HD) patients (n) <sup>*6</sup>	31	34	29	31	52.6	39.2	43.0
6i Hemoglobin categories among HD pts (% of 6h; sums to 100%)							
< 10 g/dL	0.0	0.0	6.9	6.5	7.8	7.6	9.9
10-<11 g/dL	6.5	14.7	41.4	54.8	60.6	60.5	62.0
11-12 g/dL	93.5	82.4	51.7	38.7	31.1	31.2	27.5
> 12 g/dL	0.0	2.9	0.0	0.0	0.5	0.7	0.6
6j Eligible peritoneal dialysis (PD) patients (n) <sup>*6</sup>	6	10	8	5	4.2	3.9	3.1
6k Hemoglobin categories among PD pts (% of 6j; sums to 100%)							
< 10 g/dL	0.0	10.0	0.0	40.0	17.0	19.4	21.4
10-<11 g/dL	16.7	50.0	37.5	40.0	53.3	55.8	54.4
11-12 g/dL	50.0	30.0	50.0	20.0	27.3	23.1	23.0
> 12 g/dL	33.3	10.0	12.5	0.0	2.4	1.7	1.2
<b>Urea Reduction Ratio (URR; among HD patients with ESRD for 183+ days and 4+ URR claims at this facility)<sup>*7</sup></b>							
6l Eligible patients (n)	28	30	27	31	53.4	40.2	44.4
6m URR categories (% of 6l; sums to 100%)							
< 60.0 %	0.0	0.0	3.7	0.0	0.7	0.8	0.7
60.0-64.9 %	3.6	3.3	0.0	0.0	0.5	0.9	0.9
65.0-69.9 %	14.3	3.3	0.0	6.5	6.7	7.2	9.0
70.0-74.9 %	25.0	26.7	40.7	38.7	26.8	30.2	33.2
75+ %	57.1	66.7	55.6	54.8	65.2	60.9	56.2
6n URR 65+ (% of 6l; meets a KDOQI guideline)	96.4	96.7	96.3	100	98.7	98.3	98.4
6o URR percentiles for this facility (i.e. % of facilities with a smaller percentage of patients with URR 65+)							
In this State	30	34	18	98	n/a	n/a	n/a
In this Network	29	31	19	99	n/a	n/a	n/a
In the U.S.	33	35	22	99	n/a	n/a	n/a
<b>Kt/V (K = dialyzer clearance of urea; t = dialysis time; V = patient's total body water)<sup>*8 *9</sup></b>							
6p Eligible HD patients (n)	.	34	44	43	90.0	68.1	69.4
6q Eligible HD patient-months (n) <sup>*3</sup>	.	170	325	330	598	457	501
6r HD: Average Kt/V <sup>*10</sup>	.	1.6	1.6	1.6	1.7	1.7	1.6
6s Kt/V categories among HD patients (% of 6q; sums to 100%)							
<1.2	.	1.2	2.8	1.8	3.4	3.2	2.7
1.2-<1.4	.	9.4	11.7	8.8	9.7	10.7	11.8
1.4-<1.6	.	37.1	32.6	41.2	23.1	24.2	26.3
1.6-<1.8	.	38.8	37.2	28.2	25.1	25.0	26.3
>= 1.8	.	10.6	9.2	13.9	30.0	26.6	24.5
Missing/Out of Range/Not Performed/Expired	.	2.9	6.5	6.1	8.7	10.2	8.5
6t HD: Kt/V >=1.2 (% of 6q)	.	95.9	90.8	92.1	87.9	86.5	88.8
6u Eligible peritoneal dialysis (PD) Patients (n)	.	12	12	8	8.2	7.9	5.6
6v Eligible PD patient-months (n) <sup>*3</sup>	.	64	103	57	59.3	58.1	42.2
6w PD: Average Kt/V <sup>*10</sup>	.	2.1	2.2	2.2	2.3	2.3	2.3
6x Kt/V categories among PD patients (% of 6v; sums to 100%)							
<1.7	.	21.9	9.7	1.8	7.0	7.5	8.1
1.7-<1.9	.	10.9	15.5	15.8	12.5	11.4	14.4
1.9-<2.2	.	21.9	32.0	45.6	25.8	24.3	24.4
2.2-<2.5	.	29.7	20.4	22.8	19.3	18.5	17.0
>=2.5	.	14.1	16.5	10.5	25.8	27.0	22.9
Missing/Out of Range/Not Performed/Expired	.	1.6	5.8	3.5	9.6	11.4	13.2
6y PD: Kt/V >=1.7 (% of 6v) <sup>*10</sup>	.	76.6	84.5	94.7	83.4	81.1	78.7

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 2009-2012.

[\*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.

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**TABLE 7: Vascular Access Information <sup>\*1</sup>, CMS Fistula First (Jan. 2009 - Apr. 2012) and CROWNWeb (May - Dec. 2012)**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2012		
	2009	2010	2011	2012	State	Network	U.S.
<b>Vascular Access</b>							
7a Prevalent hemodialysis patient-months <sup>*3</sup>	416	417	392	323	n/a	n/a	n/a
7b Vascular access type in use (% of 7a; sums to 100%)							
Arteriovenous fistula	45.2	52.3	68.4	76.5	69.3	68.1	60.5
Arteriovenous graft	28.6	25.2	14.8	10.8	13.5	13.4	19.8
Catheter	25.7	22.5	16.8	12.7	17.2	18.4	19.7
Other/Missing	0.5	0.0	0.0	0.0	0.1	0.1	0.1
7c Arteriovenous fistulae in place (% of 7a) <sup>*4</sup>	62.3	71.9	81.4	79.6	73.9	73.0	65.3
7d Catheter only >= 90 days (% of 7a) <sup>*5</sup>	2.4	2.2	1.8	2.2	6.6	7.0	7.6
<b>Vascular Access at First Treatment</b>							
7e Incident hemodialysis patients (n)	11	7	7	2	12.2	11.8	12.0
7f Vascular access type in use (% of 7e; sums to 100%)							
Arteriovenous fistula	18.2	0.0	57.1	100.0	30.4	28.2	18.7
Arteriovenous graft	9.1	0.0	0.0	0.0	4.7	5.4	6.1
Catheter	72.7	100.0	42.9	0.0	64.5	66.2	75.0
Other/Missing	0.0	0.0	0.0	0.0	0.3	0.3	0.2
7g Arteriovenous fistulae in place (% of 7e) <sup>*4</sup>	36.4	71.4	71.4	100.0	41.9	40.6	32.2

**TABLE 8: Dialysis Access Type and Access-Related Infection Summary for Medicare Dialysis Patients <sup>\*1</sup>, 2009 - 2012**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2012		
	2009	2010	2011	2012	State	Network	U.S.
<b>Vascular Access <sup>*6 *7</sup></b>							
8a Eligible hemodialysis patient-months (n)	.	183	340	358	655.7	500.3	540.7
8b Hemodialysis vascular access type (% of 8a)							
Vascular Catheter	.	14.2	12.1	10.1	14.9	16.1	18.0
Arteriovenous Graft	.	9.8	4.1	8.4	12.4	12.8	21.2
Arteriovenous Fistula Only	.	44.3	58.8	78.2	70.8	70.0	60.7
Other (>1) <sup>*8</sup>	.	31.7	25.0	3.4	1.9	1.1	0.1
8c Vascular catheter reported >3 consecutive months	.	3.3	2.9	3.1	8.7	9.9	11.9
<b>Hemodialysis (HD)</b>							
8d Eligible HD patients (n)	49	42	43	47	98.8	78.1	81.7
8e Eligible HD patient-months <sup>*3</sup>	379	372	341	368	693.4	537.8	588.6
8f HD infection rate per 100 hemodialysis patient-months <sup>*9</sup>	1.85	1.88	0.59	2.17	2.60	2.27	2.15
8g P-value <sup>*10</sup> (compared to U.S. value) <sup>*11</sup>	0.068	0.132	<0.01	0.537	n/a	n/a	n/a
<b>Peritoneal Dialysis (PD)</b>							
8h Eligible PD patients (n)	15	15	13	9	10.0	9.6	6.8
8i Eligible PD patient-months <sup>*3</sup>	93	124	108	69	68.1	66.5	48.5
8j PD catheter infection rate per 100 PD patient-months <sup>*9</sup>	3.23	1.61	0.93	1.45	2.63	2.72	3.05
8k P-value <sup>*10</sup> (compared to U.S. value) <sup>*12</sup>	0.486	0.222	0.144	0.374	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] 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.

[\*6] Based on V modifiers including V5, V6, and V7 for catheter, graft, and fistula, respectively. Collection began July 2010.

[\*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: 3.29 (2009), 2.99 (2010), 2.54 (2011), and 2.15 (2012).

[\*12] Compared to U.S. value for that year: 4.00 (2009), 3.29 (2010), 3.13 (2011), and 3.05 (2012).

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**TABLE 9: Characteristics of New Dialysis Patients<sup>\*1</sup>, 2009-2012 (Form CMS-2728)**

Measure Name		This Facility				Regional Averages <sup>*2</sup> , 2012		
		2009	2010	2011	2012	State	Network	U.S.
<b>Patient Characteristics</b>								
9a	Total number of patients with forms (n)	15	9	9	11	20.9	18.2	17.9
9b	Average age (years [0-95]) <sup>*3</sup>	69.2	68.3	61.9	65.0	62.4	62.6	63.3
9c	Female (% of 9a)	66.7	33.3	55.6	63.6	44.1	41.8	43.3
9d	Race (% of 9a; sums to 100%) <sup>*4</sup>							
	African-American	0.0	0.0	0.0	0.0	7.5	5.9	26.9
	Asian/Pacific Islander	6.7	0.0	0.0	0.0	10.8	7.9	4.7
	Native American	13.3	11.1	11.1	0.0	1.4	3.3	1.1
	White	80.0	88.9	88.9	100	78.6	82.0	66.6
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	1.7	0.9	0.8
9e	Hispanic (% of 9a)	0.0	0.0	11.1	0.0	6.8	6.9	14.1
9f	Primary cause of ESRD (% of 9a; sums to 100%)							
	Diabetes	26.7	22.2	33.3	27.3	45.6	45.1	46.0
	Hypertension	0.0	11.1	0.0	9.1	19.7	19.5	29.6
	Primary Glomerulonephritis	40.0	55.6	44.4	36.4	11.8	11.5	7.3
	Other/Missing	33.3	11.1	22.2	27.3	22.9	23.8	17.1
9g	Medical coverage (% of 9a; sums to 100%)							
	Employer group only	0.0	22.2	22.2	9.1	12.0	12.4	13.1
	Medicare only	33.3	22.2	11.1	18.2	22.4	24.2	26.5
	Medicaid only	13.3	0.0	33.3	0.0	12.0	10.5	10.8
	Medicare and Medicaid only	13.3	0.0	11.1	18.2	12.0	11.4	14.1
	Medicare and Other	40.0	55.6	11.1	36.4	23.9	23.8	21.7
	Other/Unknown	0.0	0.0	11.1	9.1	9.3	9.7	6.8
	None	0.0	0.0	0.0	9.1	8.3	8.0	7.0
9h	Body Mass Index <sup>*5</sup>							
	Male	25.5	31.5	25.9	24.8	28.1	28.1	27.7
	Female	25.1	33.9	36.2	33.1	28.7	28.9	29.0
9i	Employment <sup>*6</sup>							
	Six months prior to ESRD treatment	50.0	100	0.0	25.0	32.4	34.6	31.9
	At first ESRD treatment	0.0	0.0	0.0	25.0	24.4	24.6	20.4
9j	Primary modality (% of 9a; sums to 100%)							
	Hemodialysis	73.3	100	88.9	81.8	90.2	88.1	91.4
	CAPD/CCPD	26.7	0.0	11.1	18.2	9.8	11.9	8.6
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.0	0.0	0.0
9k	Number of incident hemodialysis patients (n)	11	9	8	9	18.9	16.0	16.4
9l	Access used at first outpatient dialysis (% of 9k; sums to 100%)							
	Arteriovenous fistula	18.2	22.2	50.0	44.4	26.5	25.9	16.5
	Arteriovenous graft	18.2	0.0	0.0	0.0	4.2	3.6	2.9
	Catheter	63.6	77.8	50.0	55.6	69.0	70.3	80.3
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.3	0.3	0.3
9m	Arteriovenous fistulae placed (% of 9k)	27.3	66.7	62.5	77.8	47.1	46.2	34.8
<b>Average Lab Values Prior to Dialysis<sup>*3</sup></b>								
9n	Hemoglobin (g/dL [3-18])	10.2	10.0	9.5	9.7	9.6	9.8	9.6
9o	Serum Albumin (g/dL [0.8-6.0])	3.8	3.8	3.4	4.0	3.3	3.3	3.2

(continued)

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**TABLE 9 (cont.): Characteristics of New Dialysis Patients<sup>\*1</sup>, 2009-2012 (Form CMS-2728)**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2012		
	2009	2010	2011	2012	State	Network	U.S.
<b>Average Lab Values Prior to Dialysis<sup>*3</sup></b>							
9p Serum Creatinine (mg/dL [2-33])	5.8	6.1	5.7	7.6	6.3	6.2	6.3
9q GFR (mL/min [0-60])	10.1	11.7	10.2	7.8	10.5	10.8	11.0
<b>Care Prior to ESRD Therapy</b>							
9r Received ESA prior to ESRD (% of 9a)	46.7	44.4	22.2	9.1	27.0	24.3	16.5
9s Pre-ESRD nephrologist care (% of 9a; sums to 100%)							
No	20.0	11.1	11.1	18.2	23.3	21.4	27.1
Yes, < 6 months	26.7	33.3	44.4	9.1	13.4	12.1	13.8
Yes, 6-12 months	33.3	11.1	22.2	27.3	19.1	20.4	18.3
Yes, > 12 months	20.0	44.4	22.2	45.5	41.6	42.9	28.2
Unknown/missing	0.0	0.0	0.0	0.0	2.5	3.2	12.5
9t Informed of transplant options (% of 9a)	73.3	55.6	33.3	63.6	70.9	71.8	78.4
9u Patients not informed of transplant options (n)	4	4	6	4	5.4	4.4	3.0
9v Reason not informed (% of 9u; may not sum to 100%)							
Medically unfit	50.0	50.0	50.0	75.0	50.9	47.3	36.1
Unsuitable due to age	0.0	0.0	0.0	25.0	15.3	17.2	25.3
Psychologically unfit	0.0	0.0	0.0	0.0	3.2	3.1	3.5
Patient declined information	0.0	0.0	0.0	0.0	1.2	1.4	1.7
Patient has not been assessed	50.0	50.0	50.0	25.0	35.8	39.6	39.3
<b>Comorbid Conditions</b>							
9w Pre-existing Comorbidity (% yes of 9a)							
Congestive heart failure	33.3	33.3	11.1	0.0	30.5	31.4	30.4
Atherosclerotic heart disease <sup>*7</sup>	33.3	44.4	22.2	18.2	21.6	23.7	18.1
Other cardiac disorder <sup>*7</sup>	26.7	66.7	11.1	9.1	16.0	15.2	18.9
CVD, CVA, TIA	13.3	11.1	11.1	0.0	9.9	9.8	9.0
Peripheral vascular disease	13.3	22.2	33.3	18.2	15.0	15.3	12.4
History of hypertension	93.3	88.9	100	100	87.0	86.9	86.9
Diabetes <sup>*7</sup>	53.3	44.4	55.6	36.4	57.9	57.5	60.2
Diabetes on insulin	40.0	22.2	33.3	18.2	42.0	41.6	39.3
COPD	13.3	0.0	11.1	0.0	10.4	10.0	9.7
Current smoker	0.0	0.0	33.3	0.0	7.5	7.7	6.5
Cancer	20.0	11.1	0.0	27.3	7.6	8.0	7.3
Alcohol dependence	0.0	0.0	11.1	0.0	1.8	1.9	1.6
Drug dependence	0.0	0.0	11.1	9.1	2.5	1.6	1.1
Inability to ambulate	13.3	0.0	33.3	9.1	4.3	4.3	7.1
Inability to transfer	0.0	0.0	0.0	0.0	2.1	1.9	3.9
9x Average number of comorbid conditions	3.5	3.4	3.8	2.5	3.2	3.2	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.

[\*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 10: Summaries for All Dialysis Patients Treated as of December 31<sup>st</sup> of Each Year<sup>\*1</sup>, 2009-2012**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2012		
	2009	2010	2011	2012	State	Network	U.S.
10a Patients treated on 12/31 (n)	42	44	41	39	73.8	61.5	64.4
10b Average age (years)	63.6	65.7	63.3	63.1	61.5	61.5	61.5
10c Age (% of 10a; sums to 100%)							
< 18	0.0	0.0	0.0	0.0	0.4	0.3	0.3
18-64	45.2	45.5	53.7	53.8	54.6	54.3	55.4
65+	54.8	54.5	46.3	46.2	45.0	45.4	44.3
10d Female (% of 10a)	64.3	59.1	65.9	61.5	44.7	43.5	44.6
10e Race (% of 10a; sums to 100%) <sup>*3</sup>							
African American	0.0	0.0	0.0	0.0	11.9	9.0	37.2
Asian/Pacific Islander	9.5	11.4	9.8	7.7	14.0	10.3	5.4
Native American	7.1	9.1	12.2	10.3	2.5	3.9	1.4
White	83.3	79.5	78.0	82.1	70.9	76.2	55.2
Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.6	0.6	0.8
10f Ethnicity (% of 10a; sums to 100%)							
Hispanic	0.0	0.0	2.4	2.6	9.9	9.7	16.6
Non-Hispanic	97.6	97.7	95.1	97.4	89.0	89.3	81.3
Unknown	2.4	2.3	2.4	0.0	1.1	1.0	2.1
10g Cause of ESRD (% of 10a; sums to 100%)							
Diabetes	31.0	31.8	29.3	38.5	45.4	43.8	44.2
Hypertension	9.5	6.8	4.9	5.1	18.3	18.1	28.5
Glomerulonephritis	23.8	27.3	29.3	28.2	14.6	15.3	11.0
Other/Unknown	35.7	34.1	36.6	28.2	20.4	21.7	14.3
Missing	0.0	0.0	0.0	0.0	1.3	1.2	1.9
10h Average duration of ESRD (years)	4.2	4.3	5.5	4.3	4.7	4.7	4.7
10i Years since start of ESRD (% of 10a; sums to 100%)							
< 1	21.4	15.9	14.6	12.8	17.0	17.4	16.4
1-2	16.7	27.3	12.2	25.6	18.8	18.2	17.2
2-3	16.7	11.4	14.6	7.7	14.3	14.8	14.2
3-6	31.0	31.8	39.0	28.2	25.9	26.0	26.9
6+	14.3	13.6	19.5	25.6	24.1	23.6	25.4
10j Nursing home patients (% of 10a) <sup>*4</sup>	11.9	11.4	4.9	5.1	6.1	5.4	6.2
10k Modality (% of 10a; sums to 100%)							
In-center hemodialysis	78.6	75.0	80.5	79.5	85.7	83.8	88.6
Home hemodialysis	0.0	0.0	0.0	0.0	3.5	2.9	1.7
Continuous ambulatory peritoneal dialysis	4.8	6.8	2.4	2.6	1.8	2.6	1.9
Continuous cycling peritoneal dialysis	16.7	15.9	14.6	17.9	8.7	10.3	7.3
Other modality <sup>*5</sup>	0.0	2.3	2.4	0.0	0.3	0.4	0.5

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).

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**TABLE 11: Comorbidities Reported on Medicare Claims for Medicare Dialysis Patients Treated as of December 31st of Each Year<sup>\*1</sup>, 2009-2012**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2012		
	2009	2010	2011	2012	State	Network	U.S.
11a Medicare dialysis patients on 12/31 (n)	37	38	35	29	58.8	48.4	51.0
11b Comorbidity (% yes of 11a)							
<b>Infections</b>							
AIDS/HIV positive	0.0	0.0	0.0	0.0	0.7	0.5	1.7
Dialysis access-related	8.1	18.4	2.9	17.2	15.2	14.5	14.7
Hepatitis B	0.0	0.0	0.0	0.0	1.1	1.0	2.8
Hepatitis other	5.4	10.5	8.6	10.3	6.0	5.1	6.3
Metastatic	2.7	0.0	2.9	0.0	4.3	4.0	3.9
Pneumonia	0.0	10.5	8.6	6.9	5.2	4.9	5.3
Tuberculosis	0.0	0.0	0.0	0.0	0.4	0.3	0.6
Other	29.7	47.4	51.4	31.0	39.5	38.1	43.0
<b>Cardiovascular</b>							
Cardiac arrest	2.7	0.0	0.0	3.4	1.5	1.3	1.4
Cardiac dysrhythmia	24.3	42.1	37.1	37.9	32.7	32.1	34.5
Cerebrovascular disease	18.9	7.9	17.1	20.7	22.7	20.3	25.1
Congestive heart failure	32.4	34.2	42.9	34.5	45.0	43.7	48.8
Ischemic heart disease	32.4	31.6	48.6	37.9	39.4	39.6	47.8
Myocardial infarction	5.4	0.0	8.6	0.0	7.3	7.5	7.8
Peripheral vascular disease <sup>*3</sup>	43.2	42.1	48.6	41.4	38.3	35.1	41.1
<b>Other</b>							
Alcohol dependence	2.7	2.6	2.9	3.4	3.1	3.4	2.7
Anemia	2.7	5.3	8.6	10.3	5.4	5.1	8.6
Cancer	21.6	15.8	8.6	17.2	9.4	9.0	10.3
Chronic obstructive pulmonary disease	24.3	28.9	31.4	34.5	28.5	28.1	29.9
Diabetes	48.6	55.3	48.6	55.2	59.8	58.0	63.0
Drug dependence	8.1	5.3	8.6	0.0	4.5	4.0	2.2
Gastrointestinal tract bleeding	5.4	2.6	0.0	0.0	3.3	2.9	3.0
Hyperparathyroidism	70.3	92.1	97.1	93.1	88.5	86.5	87.2
11c Average number of comorbid conditions	3.9	4.5	4.8	4.6	4.6	4.4	4.9

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 both venous, arterial and nonspecific peripheral vascular diseases.

**TABLE 12: How Patients Were Assigned to This Facility and End of Year Patient Status<sup>\*1</sup>, 2009-2012**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2012		
	2009	2010	2011	2012	State	Network	U.S.
12a Number of patients placed in facility <sup>*1</sup> (n)	59	56	55	57	107.7	89.0	91.8
12b Initial patient placement for the year (% of 12a; sums to 100%)							
Continuing at facility on 01/01	67.8	75.0	80.0	71.9	67.3	68.0	69.4
Incident (new to ESRD)	25.4	16.1	14.5	17.5	18.6	19.0	18.2
Transferred into facility	6.8	8.9	5.5	10.5	14.1	13.0	12.4
12c Patient status at end of year (% of 12a; sums to 100%)							
Alive in this facility on 12/31	71.2	78.6	74.5	68.4	68.5	69.1	70.2
Alive in another facility on 12/31	6.8	5.4	3.6	3.5	9.8	8.7	8.4
Received a transplant	3.4	1.8	5.5	8.8	3.7	3.3	2.5
Died; death attributed to this facility	16.9	12.5	12.7	14.0	12.4	12.2	12.7
Died; death attributed to another facility	0.0	0.0	1.8	0.0	1.4	1.4	1.5
Other <sup>*3</sup>	1.7	1.8	1.8	5.3	4.2	5.3	4.8

[\*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.

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**TABLE 13: Patient and Staff Counts from the Annual Facility Survey (Form CMS-2744) <sup>\*1</sup>, 2009-2012**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2012		
	2009	2010	2011	2012	State	Network	U.S.
<b>Patients Treated During the Year</b>							
13a Patients treated during year (n)	65	60	59	61	123.4	104.0	104.6
13b Incident patients (% of 13a)	23.1	15.0	15.3	18.0	16.2	16.8	17.0
13c Transferred into facility (% of 13a)	7.7	6.7	8.5	8.2	18.7	17.8	15.2
13d Transferred out of facility (% of 13a)	6.2	8.3	5.1	9.8	18.3	17.5	14.9
<b>Patients Treated on 12/31</b>							
13e Patients treated on 12/31 (n)	46	45	44	42	81.9	69.8	72.0
13f Patient modality on 12/31 (n; sums to 13e)							
In-center HD	37	34	36	34	70.8	59.1	64.2
Frequency <= 4 times per week	37	34	36	34	70.8	59.1	64.2
Frequency > 4 times per week	0	0	0	0	0.0	0.0	0.0
In-center CAPD <sup>*3</sup>	0	0	0	0	0.0	0.0	0.0
In-center CCPD <sup>*3</sup>	0	0	0	0	0.0	0.0	0.0
In-center Other <sup>*3</sup>	0	0	0	0	0.0	0.0	0.0
Home HD	0	0	0	0	2.7	2.0	1.2
Frequency <= 4 times per week	0	0	0	0	0.7	0.7	0.6
Frequency > 4 times per week	0	0	0	0	2.0	1.3	0.6
Home CAPD	3	6	1	1	1.5	2.0	1.5
Home CCPD	6	5	7	7	6.8	6.7	5.0
Home Other <sup>*3</sup>	0	0	0	0	0.0	0.0	0.0
13g Vocational Rehabilitation: Patients aged 18-54 (n)	13	14	14	13	24.4	20.9	21.7
Employed (full or part-time) (% of 13g)	7.7	42.9	35.7	15.4	18.0	16.0	8.7
Attending School (full or part-time) (% of 13g)	0.0	0.0	0.0	0.0	2.1	2.4	0.7
13h Medicare eligibility status on 12/31 (% of 13e; sums to 100% <sup>*4</sup> )							
Medicare	91.3	88.9	81.8	81.0	85.9	87.4	85.7
Medicare application pending	6.5	8.9	15.9	2.4	1.7	1.8	2.7
Non-Medicare	2.2	2.2	2.3	16.7	12.3	10.8	11.6
<b>Facility Staffing on 12/31 <sup>*5</sup></b>							
13i Total full and part time staff positions (n)	11	12	12	12	18.8	15.8	14.5
13j Staff positions by type (n; sums to 13i)							
Full time nurse <sup>*6</sup>	2	2	1	2	4.9	4.8	5.0
Full time patient care technician	0	0	0	1	7.0	5.9	5.6
Full time renal dietitian	0	0	0	0	0.4	0.4	0.6
Full time social worker	0	0	0	0	0.5	0.4	0.6
Part time nurse <sup>*6</sup>	4	3	4	3	2.2	1.4	0.9
Part time patient care technician	3	5	5	4	2.3	1.4	0.7
Part time renal dietitian	1	1	1	1	0.8	0.8	0.6
Part time social worker	1	1	1	1	0.7	0.8	0.5

[\*1] See Guide, Section XVI (Table 13).

[\*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 June 24, 2013. 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.



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**TABLE 14: Survey and Certification Activity<sup>\*1</sup>**

Measure Name	This Facility	Regional Averages		
		State	Network	U.S.
14a Date of last survey	04/22/2010	n/a	n/a	n/a
14b Type of last survey	Recertification	n/a	n/a	n/a
14c Compliance condition after last survey	Acceptable plan of correction	n/a	n/a	n/a
14d Number of deficiencies cited at last survey				
Condition for coverage (CfC) deficiencies	0	0.2	0.3	0.3
Standard deficiencies	2	11.1	6.7	6.7
14e CfC deficiencies cited at last survey <sup>*2</sup>				
V100 Compliance with Fed., State, and Local Laws	No, not cited	0.0	0.0	0.0
V110 Infection Control	No, not cited	3.9	2.8	5.3
V175 Water and Dialysate Quality	No, not cited	3.9	5.6	3.7
V300 Reuse of Hemodialysis and Bloodlines	No, not cited	0.0	0.6	0.5
V400 Physical Environment	No, not cited	1.3	1.7	2.7
V450 Patient Rights	No, not cited	0.0	0.0	0.5
V500 Patient Assessment	No, not cited	1.3	1.1	3.2
V540 Patient Plan of Care	No, not cited	1.3	2.8	3.7
V580 Care at Home	No, not cited	0.0	0.6	0.6
V625 Quality Assessment & Performance Improvement	No, not cited	2.6	3.9	4.5
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	0.6	0.7
V710 Responsibilities of the Medical Director	No, not cited	2.6	2.8	4.2
V725 Medical Records	No, not cited	0.0	0.0	0.3
V750 Governance	No, not cited	7.8	5.0	3.8

n/a = not applicable

[\*1] See *Guide, Section XVII*. 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 15: Facility Information<sup>\*1</sup>, 2013**

Characteristic	This Facility
Ownership:	Nonprofit
Organization:	NORTHWEST KIDNEY CENTERS
Initial Medicare certification date:	07/18/1988
Number of stations <sup>*2</sup> :	10
Services provided <sup>*2</sup> :	Hemodialysis and Peritoneal Dialysis
CMS Certification Number (CCN) included in this report:	502510
National Provider Identifier (NPI) <sup>*3</sup> :	1891880332

[\*1] Information based on SIMS data as of March 31, 2013. See *Guide, Section XVIII*.

[\*2] Information based on data available on DFC as of May, 2013.

[\*3] Information based on CROWNWeb data as of December, 2012. If missing, data were not available.