

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): 502523

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.

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, 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 or 1-877-665-1680.

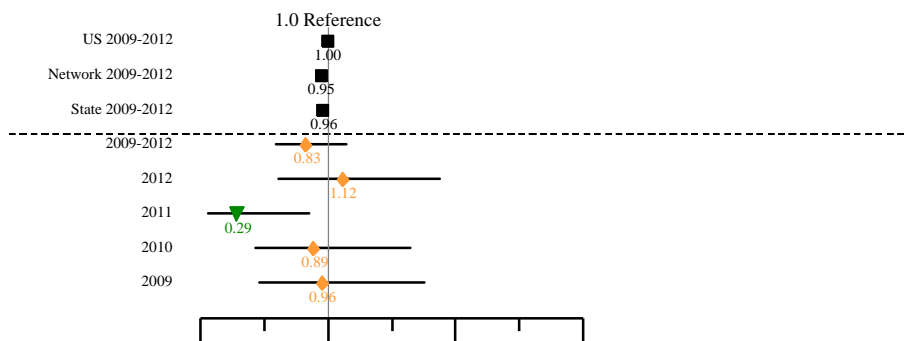
- (1) **State Surveyor:** Dialysis Facilities may submit comments on the DFR for their state's surveyors. State surveyor(s) will receive a copy of their DFR with the comments they submitted in September 2013.
- (2) **UM-KECC:** Submit questions or suggestions to improve the DFR to UM-KECC. These comments 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 0.83, which is 17% fewer deaths than expected at this facility. Among all U.S. facilities, 24% of facilities had a four-year SMR lower than 0.83. 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.

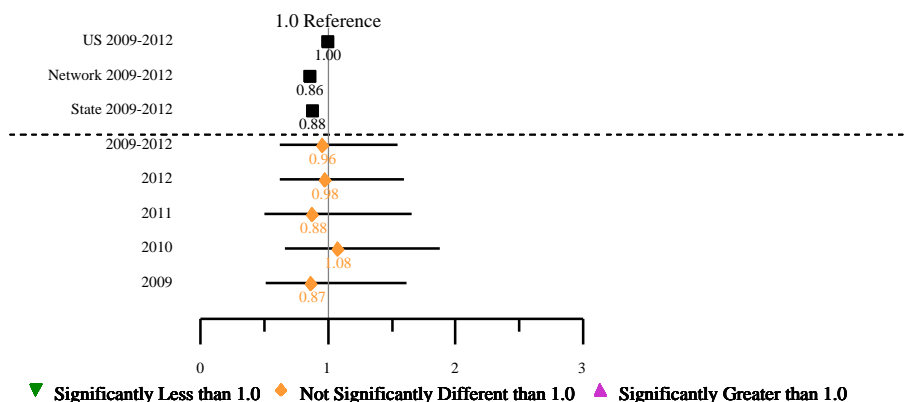


- At this facility, the 2009-2011 first-year SMR of observed to expected deaths is 0.80, which is 20% fewer deaths than expected at this facility. Among all U.S. facilities, 33% of facilities had a first-year SMR lower than 0.80. This difference is not statistically significant ($p \geq 0.05$), so this 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):

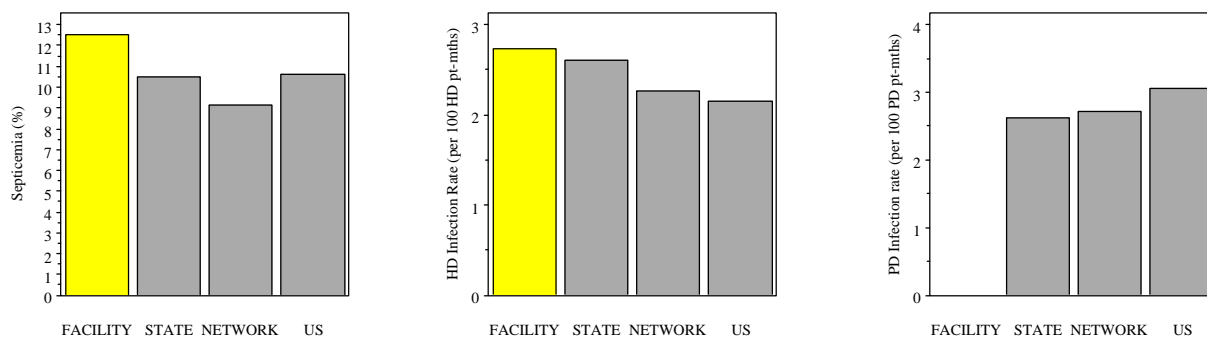
- The 2009-2012 SHR (ED) at this facility is 0.85, which is 15% fewer ED visits than expected. This difference is not statistically significant ($p \geq 0.05$), so this lower ED visit ratio could plausibly be just a chance occurrence. The 2009-2012 SHR (ED) for your State and Network is 0.97 and 0.95, respectively.
- The 2009-2012 SHR (Days) at this facility is 0.72, which is 28% 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 0.96, which is 4% 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 12.5%, 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 2.7 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 0.0 per 100 PD patient-months, compared to 2.6 in your State, 2.7 in your Network, and 3.0 nationally.



Transplantation (Table 3):

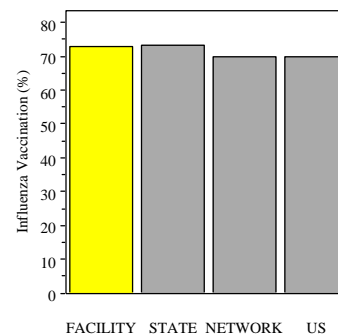
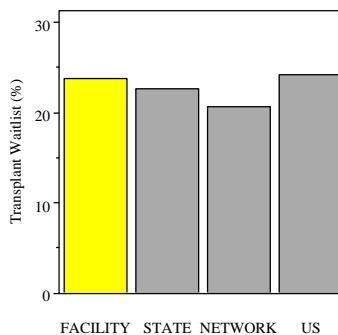
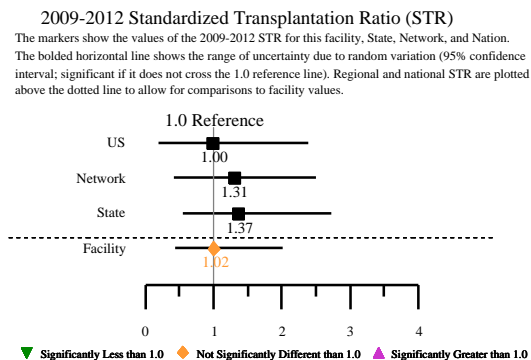
- Of the patients under age 70 treated at this facility during 2009-2012 who had not previously received a transplant, 4% were transplanted annually, while a rate of 4% would be expected for these patients.
- The 2009-2012 Standardized 1st Transplantation Ratio (STR) of observed to expected number of patients transplanted for this facility is 1.02, which is 2% 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 59 dialysis patients under age 70 treated at this facility on December 31, 2012, 24% were on the kidney transplant waitlist compared to 24% nationally. This difference is not statistically significant ($p \geq 0.05$) and is plausibly due to random chance.

Influenza Vaccination (Table 5):

- Among the 63 Medicare dialysis patients treated at this facility on December 31, 2011, 73% were vaccinated between September 1 and December 31, 2011 compared to 70% nationally. This difference is not statistically significant ($p \geq 0.05$) and is plausibly 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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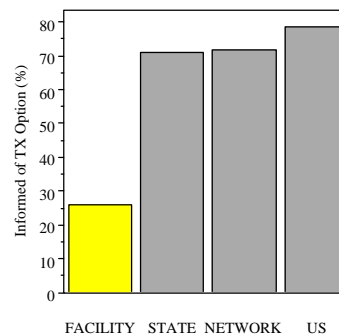
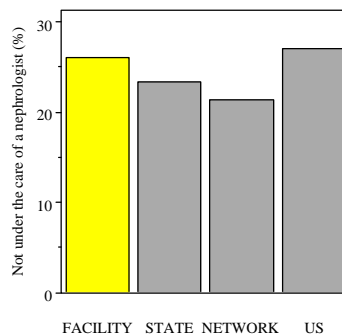
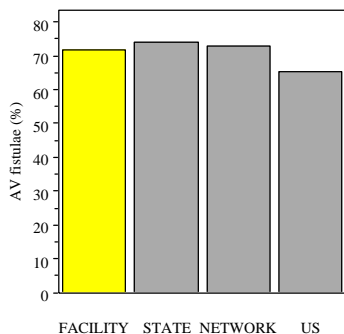
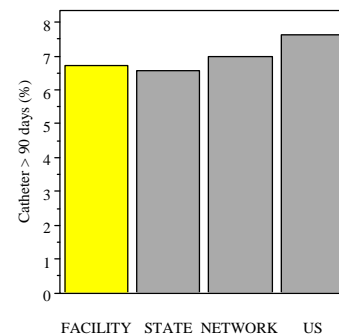
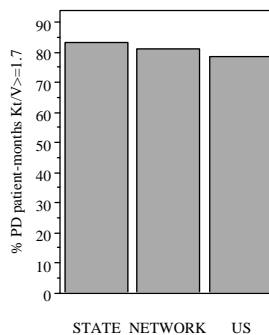
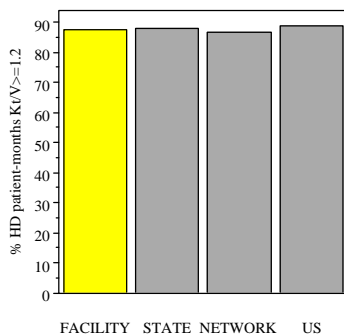
NKC WEST SEATTLE KIDNEY CENTER State: WA Network: 16 CCN: 502523

Practice Patterns (Tables 6 and 7):

- Among the 55 ESA-treated dialysis patients included in the analysis in 2012, the average hemoglobin calculated is 10.6 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 68 HD patients in this facility included in the analysis in 2012, 97% 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, 87% of eligible HD patient-months had a Kt/V ≥ 1.2 , compared to 88% in your State, 87% in your Network, and 89% nationally.
- In 2012, the percent of eligible PD patient-months that had a Kt/V ≥ 1.7 is unavailable. The percent of patients with Kt/V ≥ 1.7 in your State, Network, and US is 83%, 81%, and 79% respectively.
- At this facility in 2012, an average of 63% 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, 7% 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 23 patients with Medical Evidence Forms (CMS-2728) indicating treatment at this facility during 2012:
 - 26% 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.
 - 26% 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, 4% 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)*1

Measure Name	This Facility					Regional Averages*2, per Year, 2009-2012		
	2009	2010	2011	2012	2009-2012	State	Network	U.S.
All Patients: Death Rates								
1a Patients (n=number)	72	90	100	109	371 *8	100.3	81.0	96.3
1b Patient-years (PY) at risk (n)	57.4	55.4	60.6	74.2	247.6 *8	69.8	56.1	62.9
1c Deaths (n)	10	10	3	14	37 *8	13.4	10.8	11.7
1d Expected deaths (n)	10.5	11.2	10.3	12.5	44.5 *8	14.0	11.3	11.7
All Patients: Categories of Death								
1e Withdrawal from dialysis prior to death (% of 1c)	70.0	40.0	100	50.0	56.8	40.9	41.4	25.4
1f Death due to: Infections (% of 1c)	30.0	20.0	33.3	14.3	21.6	16.4	16.2	14.6
Cardiac causes (% of 1c)	70.0	40.0	0.0	35.7	43.2	40.0	43.1	45.8
1g Dialysis unrelated deaths*3 (n; excluded from SMR)	0	1	0	1	2 *8	0.2	0.1	0.1
All Patients: Standardized Mortality Ratio (SMR)								
1h SMR *4	0.96	0.89	0.29	1.12	0.83	0.96	0.95	1.00
1i P-value*5	0.990	0.872	0.016	0.750	0.294	n/a	n/a	n/a
1j Confidence interval for SMR*6								
High (97.5% limit)	1.76	1.64	0.85	1.87	1.15	n/a	n/a	n/a
Low (2.5% limit)	0.46	0.43	0.06	0.61	0.59	n/a	n/a	n/a
1k SMR Percentiles for this Facility (i.e. percent of facilities with lower mortality rates)*7								
In this State	44	43	4	72	27	n/a	n/a	n/a
In this Network	49	45	5	73	30	n/a	n/a	n/a
In the U.S.	46	40	5	63	24	n/a	n/a	n/a
Regional Averages Per Year, 2009-2011*2								
New Patients: First Year Death Rates								
1l New Patients (n=number)	17	25	34		76 *8	22.9	18.9	18.5
1m Patient-years (PY) at risk (n)	15.0	23.7	31.0		69.7 *8	20.0	16.5	16.0
1n Deaths (n)	3	3	7		13 *8	4.4	3.7	4.0
1o Expected deaths (n)	3.9	5.1	7.3		16.3 *8	5.1	4.3	4.0
New Patients: Categories of Deaths								
1p Withdrawal from dialysis prior to death (% of 1n)	100	66.7	57.1		69.2	43.8	45.0	28.1
1q Death due to: Infections (% of 1n)	0.0	0.0	42.9		23.1	14.2	14.1	13.4
Cardiac causes (% of 1r)	33.3	66.7	28.6		38.5	37.8	40.2	42.1
New Patients: First Year Standardized Mortality Ratio (SMR)								
1r SMR *4	0.77	0.59	0.95		0.80	0.86	0.86	1.00
1s P-value*5	0.913	0.498	0.990		0.494	n/a	n/a	n/a
1t Confidence interval for SMR*6								
High (97.5% limit)	2.26	1.71	1.96		1.36	n/a	n/a	n/a
Low (2.5% limit)	0.16	0.12	0.38		0.42	n/a	n/a	n/a
1u First Year SMR Percentiles for this Facility (i.e. percent of facilities with lower mortality rates)*7								
In this State	49	25	73		45	n/a	n/a	n/a
In this Network	49	27	65		42	n/a	n/a	n/a
In the U.S.	38	27	51		33	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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TABLE 2: Hospitalization Summary for Medicare Dialysis Patients^{*1}, 2009-2012

Measure Name	This Facility					Regional Averages ^{*2} , per Year, 2009-2012		
	2009	2010	2011	2012	2009-2012	State	Network	U.S.
Medicare Dialysis Patients								
2a Medicare dialysis patients (n)	61	75	80	88	304 ^{*3}	81.4	65.1	76.4
2b Patient-years (PY) at risk (n)	47.3	47.0	44.0	57.5	195.9 ^{*3}	53.3	41.7	45.9
Days Hospitalized Statistics								
2c Total days hospitalized (n)	367	590	471	593	2021 ^{*3}	517.5	390.8	641.8
2d Expected total days hospitalized (n)	700.7	716.9	601.0	775.4	2794.0 ^{*3}	758.5	585.2	643.7
2e Standardized Hospitalization Ratio (Days) ^{*4}	0.52	0.82	0.78	0.76	0.72	0.68	0.67	1.00
2f P-value ^{*5}	0.202	0.701	0.641	0.502	0.395	n/a	n/a	n/a
2g Confidence Interval for SHR (Days) ^{*6}								
High (97.5% limit)	1.36	1.78	1.83	1.54	1.43	n/a	n/a	n/a
Low (2.5% limit)	0.24	0.43	0.37	0.41	0.41	n/a	n/a	n/a
2h Percentiles for this Facility (i.e. % of facilities with lower hospitalization rates [days]) ^{*7}								
In this State	27	79	73	59	63	n/a	n/a	n/a
In this Network	31	77	74	65	69	n/a	n/a	n/a
In the U.S.	10	38	33	31	22	n/a	n/a	n/a
Admission Statistics								
2i Total admissions (n)	85	107	76	109	377 ^{*3}	93.1	70.5	89.9
2j Expected total admissions (n)	97.2	99.1	86.1	111.7	394.1 ^{*3}	106.1	82.2	90.0
2k Standardized Hospitalization Ratio (Admissions) ^{*4}	0.87	1.08	0.88	0.98	0.96	0.88	0.86	1.00
2l P-value ^{*5}	0.738	0.703	0.755	0.981	0.926	n/a	n/a	n/a
2m Confidence Interval for SHR (Admissions) ^{*6}								
High (97.5% limit)	1.61	1.87	1.65	1.60	1.55	n/a	n/a	n/a
Low (2.5% limit)	0.51	0.66	0.50	0.62	0.62	n/a	n/a	n/a
2n Percentiles for this Facility (i.e. % of facilities with lower hospitalization rates [admissions]) ^{*7}								
In this State	63	80	56	61	73	n/a	n/a	n/a
In this Network	63	79	59	67	75	n/a	n/a	n/a
In the U.S.	38	65	39	51	48	n/a	n/a	n/a
2o Diagnoses Associated with Hospitalization (% of 2a) ^{*8}								
Septicemia	9.8	10.7	10.0	18.2	12.5	10.5	9.2	10.6
Acute myocardial infarction	4.9	2.7	1.3	4.5	3.3	4.1	4.0	4.0
Congestive heart failure	14.8	20.0	17.5	25.0	19.7	20.2	18.9	21.8
Cardiac dysrhythmia	13.1	20.0	13.8	21.6	17.4	14.8	13.6	13.5
Cardiac arrest	0.0	2.7	1.3	1.1	1.3	1.8	1.6	1.5
2p One day admissions (% of 2i)	22.4	20.6	15.8	16.5	18.8	18.4	18.0	13.5
2q Average length of stay (days per admission; 2c/2i)	4.3	5.5	6.2	5.4	5.4	5.6	5.5	7.1
2r Readmissions within 30 days (n) ^{*9}	18	32	22	30	102 ^{*3}	26.6	19.2	27.9
2s Admissions that result in readmission within 30 days (% of 2i) ^{*9}	21.2	29.9	28.9	27.5	27.1	28.6	27.2	31.1

(continued)

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TABLE 2 (cont.): Hospitalization Summary for Medicare Dialysis Patients^{*1}, 2009-2012

Measure Name	This Facility					Regional Averages ^{*2} , per Year, 2009-2012		
	2009	2010	2011	2012	2009-2012	State	Network	U.S.
Emergency Department (ED) Statistics								
2t Total ED visits (n)	111	117	134	142	504 ^{*3}	154.7	117.4	135.1
2u Expected total ED visits (n)	147	148	133	164	592 ^{*3}	159.2	123.7	135.5
2v Standardized Hospitalization Ratio (ED) ^{*4}	0.76	0.79	1.01	0.87	0.85	0.97	0.95	1.00
2w P-value ^{*5}	0.371	0.415	0.941	0.562	0.465	n/a	n/a	n/a
2x Confidence Interval for SHR (ED) ^{*6}								
High (97.5% limit)	1.37	1.37	1.68	1.38	1.30	n/a	n/a	n/a
Low (2.5% limit)	0.43	0.47	0.62	0.55	0.56	n/a	n/a	n/a
2y Percentiles for this Facility (i.e. % of facilities with lower hospitalization rates [ED]) ^{*7}								
In this State	15	27	58	35	34	n/a	n/a	n/a
In this Network	23	29	58	38	36	n/a	n/a	n/a
In the U.S.	20	24	54	34	28	n/a	n/a	n/a
2z Patients with ED visit (% of 2a)	65.6	56.0	53.8	58.0	57.9	61.9	60.7	58.9
2aa ED visits that result in hospitalization (% of 2t)	47.7	59.8	47.0	47.9	50.4	44.1	41.8	50.6
2bb Admissions that originate in the ED (% of 2i)	62.4	65.4	82.9	62.4	67.4	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.

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TABLE 3: Transplantation Summary for Dialysis Patients under Age 70^{*1}, 2009-2012

Measure Name	This Facility					Regional Averages ^{*2} , per Year, 2009-2012		
	2009	2010	2011	2012	2009-2012	State	Network	U.S.
3a Eligible patients (n)	55	66	77	82	280 ^{*10}	67.9	54.9	66.3
3b Transplants (n)	3	4	2	2	11 ^{*10}	3.2	2.4	2.1
3c Donor type (sums to 3b ^{*3})								
Living Donor (n)	1	2	0	1	4 ^{*10}	0.9	0.8	0.7
Deceased Donor (n)	2	2	2	1	7 ^{*10}	2.3	1.7	1.5
Patients who have not Previously Received a Transplant								
3d Eligible patients (n)	51	62	73	78	264 ^{*10}	61.2	49.2	59.5
3e Patient years (PY) at risk (n)	40.6	37.1	46.4	55.3	179.5 ^{*10}	42.7	34.3	39.4
3f First transplants ^{*4} (n)	3	2	1	2	8 ^{*10}	2.8	2.1	1.8
3g Expected First transplants (n)	2.0	1.7	2.0	2.1	7.8 ^{*10}	2.0	1.6	1.8
Standardized 1st Transplantation Ratio (STR)^{*5}								
3h STR ^{*6}	.	.	.	.	1.02	1.37	1.31	1.00
3i P-value ^{*7}	.	.	.	.	0.990	n/a	n/a	n/a
3j 95% Confidence interval for STR ^{*8}								
Upper limit	.	.	.	.	2.01	n/a	n/a	n/a
Lower limit	.	.	.	.	0.44	n/a	n/a	n/a
3k STR Percentiles for this Facility (i.e. percent of facilities with lower transplantation rates) ^{*9}								
In this State	.	.	.	.	36	n/a	n/a	n/a
In this Network	.	.	.	.	42	n/a	n/a	n/a
In the U.S.	.	.	.	.	55	n/a	n/a	n/a

TABLE 4: Waitlist Summary for Dialysis Patients under Age 70 Treated on December 31st of Each Year^{*1}, 2009-2012

Measure Name	This Facility				Regional Averages ^{*2} , 2012		
	2009	2010	2011	2012	State	Network	U.S.
4a Eligible patients on 12/31 (n)	43	41	66	59	53.8	44.3	46.2
4b Patients on the waitlist (% of 4a)	23.3	26.8	19.7	23.7	22.6	20.7	24.3
4c P-value (compared to U.S. value) ^{*11}	0.524	0.419	0.233	0.532	n/a	n/a	n/a
4d Patients on the waitlist by subgroup (%) ^{*12}							
Age < 40	40.0	25.0	0.0	0.0	35.5	31.9	36.7
Age 40-69	21.1	27.0	20.3	25.0	20.6	18.8	22.5
Male	25.0	36.0	24.3	22.6	23.4	21.6	25.3
Female	20.0	12.5	13.8	25.0	21.6	19.4	22.9
African American	23.1	33.3	12.5	13.3	23.6	20.8	22.4
Asian/Pacific Islander	16.7	14.3	29.4	37.5	25.7	25.8	36.2
Native American	0.0	.	0.0	.	15.0	16.1	18.9
White, Hispanic	20.0	0.0	0.0	0.0	21.4	20.5	27.7
White, Non-Hispanic	33.3	35.3	28.6	30.0	22.3	20.2	23.2
Other/unknown race	0.0	0.0	0.0	0.0	22.9	22.6	28.5
Diabetes	11.8	20.0	20.0	16.0	15.4	14.7	19.6
Non-diabetes	30.8	30.8	19.4	29.4	28.7	25.5	27.9
Previous kidney transplant	100	100	40.0	66.7	39.9	36.8	45.5
No previous kidney transplant	15.4	23.1	18.0	21.4	20.8	18.9	22.3
< 2 years since start of ESRD	23.1	17.6	16.1	16.0	17.5	16.2	16.2
2-4 years since start of ESRD	7.1	25.0	5.9	21.4	25.6	23.1	28.4
5+ years since start of ESRD	37.5	41.7	38.9	35.0	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^{*1}, Flu Seasons August 2009-March 2012

Measure Name	This Facility			Regional Averages, 2011-2012 ^{*2}		
	2009-10	2010-11	2011-12	State	Network	U.S.
5a Eligible patients on 12/31 (n)	49	42	63	59.9	46.2	49.8
5b Patients vaccinated between Aug. 1 and Dec. 31 (% of 5a)	89.8	85.7	73.0	73.4	69.8	69.7
5c P-value ^{*3} (for 5b compared to U.S. value ^{*4})	<0.01	<0.01	0.338	n/a	n/a	n/a
5d Patients vaccinated between Aug. 1 and Mar. 31 (% of 5a)	93.9	85.7	73.0	74.0	70.4	70.3
5e P-value ^{*3} (for 5d compared to U.S. value ^{*5})	<0.01	0.012	0.378	n/a	n/a	n/a
5f Patients vaccinated between Aug. 1 and Dec. 31 by subgroup (%) ^{*6}						
Age < 18	.	.	.	76.5	65.5	49.8
Age 18-39	100	50.0	100	68.1	65.8	65.4
Age 40-64	90.9	90.5	71.4	73.6	69.8	69.2
Age 65-74	83.3	83.3	76.5	73.2	69.8	70.2
Age 75+	100	85.7	70.0	75.2	71.6	72.0
Male	90.0	87.5	62.9	72.5	69.2	69.9
Female	89.5	83.3	85.7	74.6	70.6	69.6
African American	92.3	80.0	81.8	73.0	67.5	66.9
Asian/Pacific Islander	88.9	88.9	73.7	79.3	72.9	72.9
Native American	100	100	50.0	74.8	58.1	74.2
White	87.5	90.5	67.9	72.3	70.3	71.3
Other/unknown race	100	0.0	100	81.8	68.5	66.1
Hispanic	100	100	20.0	79.8	79.3	71.2
< 1 year since start of ESRD	50.0	88.9	53.3	61.8	59.4	58.1
1-2 years since start of ESRD	94.4	83.3	69.2	74.7	71.2	69.7
3+ years since start of ESRD	96.0	85.7	82.9	76.7	72.3	73.2

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 (8/1-12/31): 69.8% (2009-10), 68.7% (2010-11), 69.7% (2011-12).

^{*5} 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).

^{*6} 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^{*1}, 2009-2012

Measure Name	This Facility				Regional Averages ^{*2} , 2012		
	2009	2010	2011	2012	State	Network	U.S.
Modality (among all dialysis patients with ESRD for 90+ days and 1+ claim at this facility)							
6a Patients treated during year (n)	87	90	104	128	103.9	78.0	75.3
6b Patient-months treated during year (n) ^{*3}	617	602	627	754	736.9	559.3	565.2
6c Modality (% of 6b; sums to 100%)							
Hemodialysis	98.1	99.0	99.7	100	84.5	85.1	91.5
CAPD/CCPD	0.0	0.0	0.0	0.0	7.2	9.9	7.4
Other dialysis ^{*4}	1.9	1.0	0.3	0.0	8.3	5.1	1.1
6d Percent of patient-months prescribed Iron by Modality ^{*5}							
Hemodialysis	68.9	68.6	45.0	48.0	60.3	60.7	62.4
CAPD/CCPD	.	.	.	.	22.6	18.9	24.4
Hemoglobin (among ESA-treated dialysis patients with ESRD for 90+ days and 4+ Hemoglobin claims at this facility)							
6e Eligible patients (n)	52	54	46	55	56.3	42.2	45.5
6f Average hemoglobin (g/dL)	11.7	11.5	11.2	10.6	10.7	10.7	10.6
6g Hemoglobin categories (% of 6e; sums to 100%)							
< 10 g/dL	0.0	0.0	0.0	9.1	8.0	7.7	10.1
10-<11 g/dL	11.5	24.1	34.8	65.5	60.9	61.1	62.1
11-<12 g/dL	65.4	61.1	60.9	25.5	30.6	30.5	27.2
> 12 g/dL	23.1	14.8	4.3	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^{*1}, 2009-2012

Measure Name	This Facility				Regional Averages ^{*2} , 2012		
	2009	2010	2011	2012	State	Network	U.S.
Hemoglobin (among ESA-treated dialysis patients with ESRD for 90+ days and 4+ Hemoglobin claims at this facility) (cont.)							
6h Eligible hemodialysis (HD) patients (n) ^{*6}	52	54	46	55	52.6	39.2	43.0
6i Hemoglobin categories among HD pts (% of 6h; sums to 100%)							
< 10 g/dL	0.0	0.0	0.0	9.1	7.8	7.6	9.9
10-<11 g/dL	11.5	24.1	34.8	65.5	60.6	60.5	62.0
11-12 g/dL	65.4	61.1	60.9	25.5	31.1	31.2	27.5
> 12 g/dL	23.1	14.8	4.3	0.0	0.5	0.7	0.6
6j Eligible peritoneal dialysis (PD) patients (n) ^{*6}	0	0	0	0	4.2	3.9	3.1
6k Hemoglobin categories among PD pts (% of 6j; sums to 100%)							
< 10 g/dL	.	.	.	.	17.0	19.4	21.4
10-<11 g/dL	.	.	.	.	53.3	55.8	54.4
11-12 g/dL	.	.	.	.	27.3	23.1	23.0
> 12 g/dL	.	.	.	.	2.4	1.7	1.2
Urea Reduction Ratio (URR; among HD patients with ESRD for 183+ days and 4+ URR claims at this facility)^{*7}							
6l Eligible patients (n)	52	53	51	68	53.4	40.2	44.4
6m URR categories (% of 6l; sums to 100%)							
< 60.0 %	3.8	0.0	2.0	1.5	0.7	0.8	0.7
60.0-64.9 %	3.8	3.8	0.0	1.5	0.5	0.9	0.9
65.0-69.9 %	5.8	1.9	7.8	7.4	6.7	7.2	9.0
70.0-74.9 %	30.8	30.2	25.5	27.9	26.8	30.2	33.2
75+ %	55.8	64.2	64.7	61.8	65.2	60.9	56.2
6n URR 65+ (% of 6l; meets a KDOQI guideline)	92.3	96.2	98.0	97.1	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	13	29	38	17	n/a	n/a	n/a
In this Network	11	26	34	20	n/a	n/a	n/a
In the U.S.	12	30	39	19	n/a	n/a	n/a
Kt/V (K = dialyzer clearance of urea; t = dialysis time; V = patient's total body water)^{*8 *9}							
6p Eligible HD patients (n)	.	70	102	125	90.0	68.1	69.4
6q Eligible HD patient-months (n) ^{*3}	.	279	589	714	598	457	501
6r HD: Average Kt/V ^{*10}	.	1.7	1.7	1.7	1.7	1.7	1.6
6s Kt/V categories among HD patients (% of 6q; sums to 100%)							
<1.2	.	3.6	4.1	2.8	3.4	3.2	2.7
1.2-<1.4	.	10.8	10.9	9.2	9.7	10.7	11.8
1.4-<1.6	.	25.4	25.3	25.4	23.1	24.2	26.3
1.6-<1.8	.	24.0	23.6	23.9	25.1	25.0	26.3
>= 1.8	.	31.5	29.9	28.9	30.0	26.6	24.5
Missing/Out of Range/Not Performed/Expired	.	4.7	6.3	9.8	8.7	10.2	8.5
6t HD: Kt/V >=1.2 (% of 6q)	.	91.8	89.6	87.4	87.9	86.5	88.8
6u Eligible peritoneal dialysis (PD) Patients (n)	.	0	0	0	8.2	7.9	5.6
6v Eligible PD patient-months (n) ^{*3}	.	0	0	0	59.3	58.1	42.2
6w PD: Average Kt/V ^{*10}	.	.	.	.	2.3	2.3	2.3
6x Kt/V categories among PD patients (% of 6v; sums to 100%)							
<1.7	.	.	.	.	7.0	7.5	8.1
1.7-<1.9	.	.	.	.	12.5	11.4	14.4
1.9-<2.2	.	.	.	.	25.8	24.3	24.4
2.2-<2.5	.	.	.	.	19.3	18.5	17.0
>=2.5	.	.	.	.	25.8	27.0	22.9
Missing/Out of Range/Not Performed/Expired	.	.	.	.	9.6	11.4	13.2
6y PD: Kt/V >=1.7 (% of 6v) ^{*10}	.	.	.	.	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 ^{*1}, CMS Fistula First (Jan. 2009 - Apr. 2012) and CROWNWeb (May - Dec. 2012)

Measure Name	This Facility				Regional Averages ^{*2} , 2012			
	2009	2010	2011	2012	State	Network	U.S.	
Vascular Access								
7a	Prevalent hemodialysis patient-months ^{*3}	780	802	995	876	n/a	n/a	n/a
7b	Vascular access type in use (% of 7a; sums to 100%)							
	Arteriovenous fistula	75.1	68.1	65.7	66.9	69.3	68.1	60.5
	Arteriovenous graft	7.8	8.2	13.3	15.8	13.5	13.4	19.8
	Catheter	17.1	23.7	21.0	17.4	17.2	18.4	19.7
	Other/Missing	0.0	0.0	0.0	0.0	0.1	0.1	0.1
7c	Arteriovenous fistulae in place (% of 7a) ^{*4}	82.6	81.4	74.3	71.7	73.9	73.0	65.3
7d	Catheter only >= 90 days (% of 7a) ^{*5}	5.6	6.4	6.1	6.7	6.6	7.0	7.6
Vascular Access at First Treatment								
7e	Incident hemodialysis patients (n)	13	19	30	8	12.2	11.8	12.0
7f	Vascular access type in use (% of 7e; sums to 100%)							
	Arteriovenous fistula	15.4	15.8	43.3	25.0	30.4	28.2	18.7
	Arteriovenous graft	0.0	10.5	10.0	12.5	4.7	5.4	6.1
	Catheter	84.6	73.7	46.7	62.5	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) ^{*4}	38.5	36.8	56.7	62.5	41.9	40.6	32.2

TABLE 8: Dialysis Access Type and Access-Related Infection Summary for Medicare Dialysis Patients ^{*1}, 2009 - 2012

Measure Name	This Facility				Regional Averages ^{*2} , 2012			
	2009	2010	2011	2012	State	Network	U.S.	
Vascular Access ^{*6 *7}								
8a	Eligible hemodialysis patient-months (n)	.	307	675	793	655.7	500.3	540.7
8b	Hemodialysis vascular access type (% of 8a)							
	Vascular Catheter	.	17.3	14.8	13.1	14.9	16.1	18.0
	Arteriovenous Graft	.	1.6	2.7	11.6	12.4	12.8	21.2
	Arteriovenous Fistula Only	.	58.6	59.4	66.8	70.8	70.0	60.7
	Other (>1) ^{*8}	.	22.5	23.1	8.4	1.9	1.1	0.1
8c	Vascular catheter reported >3 consecutive months	.	5.4	5.0	5.2	8.7	9.9	11.9
Hemodialysis (HD)								
8d	Eligible HD patients (n)	74	86	116	115	98.8	78.1	81.7
8e	Eligible HD patient-months ^{*3}	616	627	692	803	693.4	537.8	588.6
8f	HD infection rate per 100 hemodialysis patient-months ^{*9}	3.73	2.71	3.47	2.74	2.60	2.27	2.15
8g	P-value ^{*10} (compared to U.S. value) ^{*11}	0.296	0.399	0.080	0.152	n/a	n/a	n/a
Peritoneal Dialysis (PD)								
8h	Eligible PD patients (n)	0	1	0	1	10.0	9.6	6.8
8i	Eligible PD patient-months ^{*3}	0	1	0	3	68.1	66.5	48.5
8j	PD catheter infection rate per 100 PD patient-months ^{*9}	.	0.00	.	0.00	2.63	2.72	3.05
8k	P-value ^{*10} (compared to U.S. value) ^{*12}	.	0.967	.	0.911	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*¹, 2009-2012 (Form CMS-2728)

Measure Name	This Facility				Regional Averages* ² , 2012			
	2009	2010	2011	2012	State	Network	U.S.	
Patient Characteristics								
9a	Total number of patients with forms (n)	17	25	34	23	20.9	18.2	17.9
9b	Average age (years [0-95]) ^{*3}	62.6	60.8	62.9	65.6	62.4	62.6	63.3
9c	Female (% of 9a)	35.3	40.0	47.1	30.4	44.1	41.8	43.3
9d	Race (% of 9a; sums to 100%) ^{*4}							
	African-American	17.6	24.0	17.6	17.4	7.5	5.9	26.9
	Asian/Pacific Islander	17.6	20.0	5.9	30.4	10.8	7.9	4.7
	Native American	0.0	0.0	2.9	0.0	1.4	3.3	1.1
	White	64.7	52.0	70.6	47.8	78.6	82.0	66.6
	Other/Unknown/Missing	0.0	4.0	2.9	4.3	1.7	0.9	0.8
9e	Hispanic (% of 9a)	5.9	4.0	11.8	4.3	6.8	6.9	14.1
9f	Primary cause of ESRD (% of 9a; sums to 100%)							
	Diabetes	17.6	60.0	35.3	47.8	45.6	45.1	46.0
	Hypertension	5.9	24.0	20.6	17.4	19.7	19.5	29.6
	Primary Glomerulonephritis	35.3	4.0	14.7	8.7	11.8	11.5	7.3
	Other/Missing	41.2	12.0	29.4	26.1	22.9	23.8	17.1
9g	Medical coverage (% of 9a; sums to 100%)							
	Employer group only	17.6	20.0	8.8	8.7	12.0	12.4	13.1
	Medicare only	11.8	24.0	17.6	13.0	22.4	24.2	26.5
	Medicaid only	23.5	20.0	26.5	13.0	12.0	10.5	10.8
	Medicare and Medicaid only	11.8	8.0	11.8	26.1	12.0	11.4	14.1
	Medicare and Other	29.4	4.0	17.6	17.4	23.9	23.8	21.7
	Other/Unknown	0.0	8.0	2.9	8.7	9.3	9.7	6.8
	None	5.9	16.0	14.7	13.0	8.3	8.0	7.0
9h	Body Mass Index ^{*5}							
	Male	27.4	25.1	26.8	26.2	28.1	28.1	27.7
	Female	21.7	35.3	33.4	25.7	28.7	28.9	29.0
9i	Employment ^{*6}							
	Six months prior to ESRD treatment	33.3	35.7	6.3	28.6	32.4	34.6	31.9
	At first ESRD treatment	22.2	14.3	6.3	14.3	24.4	24.6	20.4
9j	Primary modality (% of 9a; sums to 100%)							
	Hemodialysis	100	100	100	100	90.2	88.1	91.4
	CAPD/CCPD	0.0	0.0	0.0	0.0	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)	17	25	34	23	18.9	16.0	16.4
9l	Access used at first outpatient dialysis (% of 9k; sums to 100%)							
	Arteriovenous fistula	17.6	16.0	38.2	30.4	26.5	25.9	16.5
	Arteriovenous graft	0.0	4.0	0.0	4.3	4.2	3.6	2.9
	Catheter	82.4	80.0	61.8	65.2	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)	35.3	40.0	58.8	60.9	47.1	46.2	34.8
Average Lab Values Prior to Dialysis^{*3}								
9n	Hemoglobin (g/dL [3-18])	9.9	9.8	9.6	9.3	9.6	9.8	9.6
9o	Serum Albumin (g/dL [0.8-6.0])	3.5	3.4	3.5	3.5	3.3	3.3	3.2

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TABLE 9 (cont.): Characteristics of New Dialysis Patients^{*1}, 2009-2012 (Form CMS-2728)

Measure Name	This Facility				Regional Averages ^{*2} , 2012		
	2009	2010	2011	2012	State	Network	U.S.
Average Lab Values Prior to Dialysis^{*3}							
9p Serum Creatinine (mg/dL [2-33])	7.3	7.7	7.4	6.6	6.3	6.2	6.3
9q GFR (mL/min [0-60])	9.6	9.2	9.2	10.2	10.5	10.8	11.0
Care Prior to ESRD Therapy							
9r Received ESA prior to ESRD (% of 9a)	23.5	32.0	41.2	43.5	27.0	24.3	16.5
9s Pre-ESRD nephrologist care (% of 9a; sums to 100%)							
No	35.3	36.0	26.5	26.1	23.3	21.4	27.1
Yes, < 6 months	23.5	12.0	17.6	13.0	13.4	12.1	13.8
Yes, 6-12 months	11.8	24.0	8.8	17.4	19.1	20.4	18.3
Yes, > 12 months	23.5	20.0	44.1	43.5	41.6	42.9	28.2
Unknown/missing	5.9	8.0	2.9	0.0	2.5	3.2	12.5
9t Informed of transplant options (% of 9a)	29.4	48.0	38.2	26.1	70.9	71.8	78.4
9u Patients not informed of transplant options (n)	12	13	21	17	5.4	4.4	3.0
9v Reason not informed (% of 9u; may not sum to 100%)							
Medically unfit	25.0	53.8	33.3	47.1	50.9	47.3	36.1
Unsuitable due to age	16.7	0.0	9.5	5.9	15.3	17.2	25.3
Psychologically unfit	8.3	7.7	4.8	5.9	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	41.7	30.8	61.9	35.3	35.8	39.6	39.3
Comorbid Conditions							
9w Pre-existing Comorbidity (% yes of 9a)							
Congestive heart failure	41.2	44.0	32.4	39.1	30.5	31.4	30.4
Atherosclerotic heart disease ^{**7}	35.3	40.0	29.4	34.8	21.6	23.7	18.1
Other cardiac disorder ^{**7}	29.4	24.0	11.8	17.4	16.0	15.2	18.9
CVD, CVA, TIA	11.8	20.0	14.7	21.7	9.9	9.8	9.0
Peripheral vascular disease	35.3	40.0	26.5	34.8	15.0	15.3	12.4
History of hypertension	88.2	92.0	91.2	87.0	87.0	86.9	86.9
Diabetes ^{**7}	23.5	68.0	64.7	60.9	57.9	57.5	60.2
Diabetes on insulin	11.8	64.0	41.2	39.1	42.0	41.6	39.3
COPD	5.9	12.0	14.7	13.0	10.4	10.0	9.7
Current smoker	11.8	12.0	8.8	13.0	7.5	7.7	6.5
Cancer	5.9	4.0	8.8	17.4	7.6	8.0	7.3
Alcohol dependence	11.8	4.0	2.9	0.0	1.8	1.9	1.6
Drug dependence	11.8	4.0	11.8	0.0	2.5	1.6	1.1
Inability to ambulate	0.0	4.0	2.9	4.3	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	3.2	4.3	3.6	3.8	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 31st of Each Year^{*1}, 2009-2012

Measure Name	This Facility				Regional Averages ^{*2} , 2012		
	2009	2010	2011	2012	State	Network	U.S.
10a Patients treated on 12/31 (n)	53	57	75	68	73.8	61.5	64.4
10b Average age (years)	58.0	60.0	59.6	60.3	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	62.3	63.2	66.7	63.2	54.6	54.3	55.4
65+	37.7	36.8	33.3	36.8	45.0	45.4	44.3
10d Female (% of 10a)	35.8	43.9	46.7	45.6	44.7	43.5	44.6
10e Race (% of 10a; sums to 100%) ^{*3}							
African American	20.8	26.3	22.7	17.6	11.9	9.0	37.2
Asian/Pacific Islander	20.8	19.3	25.3	27.9	14.0	10.3	5.4
Native American	5.7	1.8	4.0	0.0	2.5	3.9	1.4
White	50.9	50.9	45.3	51.5	70.9	76.2	55.2
Other/Unknown/Missing	1.9	1.8	2.7	2.9	0.6	0.6	0.8
10f Ethnicity (% of 10a; sums to 100%)							
Hispanic	11.3	5.3	10.7	13.2	9.9	9.7	16.6
Non-Hispanic	88.7	94.7	88.0	85.3	89.0	89.3	81.3
Unknown	0.0	0.0	1.3	1.5	1.1	1.0	2.1
10g Cause of ESRD (% of 10a; sums to 100%)							
Diabetes	43.4	43.9	45.3	52.9	45.4	43.8	44.2
Hypertension	13.2	14.0	14.7	10.3	18.3	18.1	28.5
Glomerulonephritis	26.4	15.8	17.3	19.1	14.6	15.3	11.0
Other/Unknown	17.0	26.3	22.7	17.6	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)	4.8	4.4	4.9	5.1	4.7	4.7	4.7
10i Years since start of ESRD (% of 10a; sums to 100%)							
< 1	13.2	31.6	22.7	8.8	17.0	17.4	16.4
1-2	18.9	7.0	16.0	27.9	18.8	18.2	17.2
2-3	13.2	14.0	9.3	10.3	14.3	14.8	14.2
3-6	24.5	22.8	28.0	27.9	25.9	26.0	26.9
6+	30.2	24.6	24.0	25.0	24.1	23.6	25.4
10j Nursing home patients (% of 10a) ^{*4}	15.1	12.3	6.7	4.4	6.1	5.4	6.2
10k Modality (% of 10a; sums to 100%)							
In-center hemodialysis	98.1	96.5	98.7	100	85.7	83.8	88.6
Home hemodialysis	0.0	0.0	1.3	0.0	3.5	2.9	1.7
Continuous ambulatory peritoneal dialysis	0.0	1.8	0.0	0.0	1.8	2.6	1.9
Continuous cycling peritoneal dialysis	0.0	0.0	0.0	0.0	8.7	10.3	7.3
Other modality ^{*5}	1.9	1.8	0.0	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^{*1}, 2009-2012

Measure Name	This Facility				Regional Averages ^{*2} , 2012		
	2009	2010	2011	2012	State	Network	U.S.
11a Medicare dialysis patients on 12/31 (n)	45	47	59	57	58.8	48.4	51.0
11b Comorbidity (% yes of 11a)							
Infections							
AIDS/HIV positive	0.0	0.0	0.0	0.0	0.7	0.5	1.7
Dialysis access-related	17.8	12.8	22.0	19.3	15.2	14.5	14.7
Hepatitis B	0.0	0.0	8.5	8.8	1.1	1.0	2.8
Hepatitis other	11.1	8.5	13.6	15.8	6.0	5.1	6.3
Metastatic	2.2	4.3	5.1	3.5	4.3	4.0	3.9
Pneumonia	13.3	4.3	8.5	3.5	5.2	4.9	5.3
Tuberculosis	0.0	0.0	1.7	1.8	0.4	0.3	0.6
Other	48.9	34.0	39.0	50.9	39.5	38.1	43.0
Cardiovascular							
Cardiac arrest	0.0	0.0	1.7	0.0	1.5	1.3	1.4
Cardiac dysrhythmia	22.2	38.3	42.4	47.4	32.7	32.1	34.5
Cerebrovascular disease	20.0	23.4	15.3	29.8	22.7	20.3	25.1
Congestive heart failure	33.3	40.4	44.1	49.1	45.0	43.7	48.8
Ischemic heart disease	44.4	42.6	47.5	56.1	39.4	39.6	47.8
Myocardial infarction	6.7	2.1	8.5	7.0	7.3	7.5	7.8
Peripheral vascular disease ^{*3}	40.0	29.8	44.1	52.6	38.3	35.1	41.1
Other							
Alcohol dependence	2.2	2.1	3.4	1.8	3.1	3.4	2.7
Anemia	4.4	4.3	6.8	5.3	5.4	5.1	8.6
Cancer	8.9	10.6	15.3	12.3	9.4	9.0	10.3
Chronic obstructive pulmonary disease	13.3	23.4	32.2	33.3	28.5	28.1	29.9
Diabetes	51.1	46.8	59.3	71.9	59.8	58.0	63.0
Drug dependence	0.0	4.3	10.2	5.3	4.5	4.0	2.2
Gastrointestinal tract bleeding	2.2	2.1	1.7	0.0	3.3	2.9	3.0
Hyperparathyroidism	86.7	93.6	93.2	94.7	88.5	86.5	87.2
11c Average number of comorbid conditions	4.3	4.3	5.2	5.7	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^{*1}, 2009-2012

Measure Name	This Facility				Regional Averages ^{*2} , 2012		
	2009	2010	2011	2012	State	Network	U.S.
12a Number of patients placed in facility ^{*1} (n)	72	90	100	109	107.7	89.0	91.8
12b Initial patient placement for the year (% of 12a; sums to 100%)							
Continuing at facility on 01/01	80.6	58.9	57.0	68.8	67.3	68.0	69.4
Incident (new to ESRD)	15.3	24.4	21.0	18.3	18.6	19.0	18.2
Transferred into facility	4.2	16.7	22.0	12.8	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	73.6	63.3	75.0	62.4	68.5	69.1	70.2
Alive in another facility on 12/31	1.4	14.4	15.0	15.6	9.8	8.7	8.4
Received a transplant	4.2	5.6	2.0	2.8	3.7	3.3	2.5
Died; death attributed to this facility	13.9	11.1	3.0	12.8	12.4	12.2	12.7
Died; death attributed to another facility	0.0	0.0	2.0	2.8	1.4	1.4	1.5
Other ^{*3}	6.9	5.6	3.0	3.7	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) *1, 2009-2012

Measure Name	This Facility				Regional Averages *2, 2012		
	2009	2010	2011	2012	State	Network	U.S.
Patients Treated During the Year							
13a Patients treated during year (n)	95	107	157	143	123.4	104.0	104.6
13b Incident patients (% of 13a)	17.9	23.4	21.7	17.5	16.2	16.8	17.0
13c Transferred into facility (% of 13a)	7.4	15.0	36.3	17.5	18.7	17.8	15.2
13d Transferred out of facility (% of 13a)	12.6	28.0	35.7	23.1	18.3	17.5	14.9
Patients Treated on 12/31							
13e Patients treated on 12/31 (n)	66	63	92	87	81.9	69.8	72.0
13f Patient modality on 12/31 (n; sums to 13e)							
In-center HD	66	63	92	87	70.8	59.1	64.2
Frequency <= 4 times per week	66	63	92	87	70.8	59.1	64.2
Frequency > 4 times per week	0	0	0	0	0.0	0.0	0.0
In-center CAPD *3	0	0	0	0	0.0	0.0	0.0
In-center CCPD *3	0	0	0	0	0.0	0.0	0.0
In-center Other *3	0	0	0	0	0.0	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	0	0	0	0	1.5	2.0	1.5
Home CCPD	0	0	0	0	6.8	6.7	5.0
Home Other *3	0	0	0	0	0.0	0.0	0.0
13g Vocational Rehabilitation: Patients aged 18-54 (n)	24	24	32	27	24.4	20.9	21.7
Employed (full or part-time) (% of 13g)	29.2	33.3	31.3	18.5	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% *4)							
Medicare	80.3	76.2	75.0	77.0	85.9	87.4	85.7
Medicare application pending	7.6	9.5	14.1	2.3	1.7	1.8	2.7
Non-Medicare	12.1	14.3	10.9	20.7	12.3	10.8	11.6
Facility Staffing on 12/31 *5							
13i Total full and part time staff positions (n)	17	16	18	20	18.8	15.8	14.5
13j Staff positions by type (n; sums to 13i)							
Full time nurse *6	7	8	8	8	4.9	4.8	5.0
Full time patient care technician	5	5	6	5	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 *6	1	0	1	1	2.2	1.4	0.9
Part time patient care technician	2	1	1	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^{*1}

Measure Name	This Facility	Regional Averages		
		State	Network	U.S.
14a Date of last survey	01/06/2011	n/a	n/a	n/a
14b Type of last survey	Recertification	n/a	n/a	n/a
14c Compliance condition after last survey	Meets requirements	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 ^{*2}				
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^{*1}, 2013

Characteristic	This Facility
Ownership:	Nonprofit
Organization:	NORTHWEST KIDNEY CENTERS
Initial Medicare certification date:	09/21/1998
Number of stations ^{*2} :	20
Services provided ^{*2} :	Hemodialysis
CMS Certification Number (CCN) included in this report:	502523
National Provider Identifier (NPI) ^{*3} :	1164515797

[*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.