

# 2014 Dialysis Facility Report

## (for CMS Survey use in FY 2015)

### Purpose of the Report

The *2014 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 2015 survey and certification process.

This report has been prepared for this facility by the University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) with funding from the Centers for Medicare & Medicaid Services (CMS) and is based primarily on Medicare claims and data collected for CMS. It is the nineteenth in a series of annual reports. This is one of 6,371 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 2010 and December 2013. 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 2014 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 2014 DFR. The UM-KECC ESRD database now includes the new web-based data collection system, CROWNWeb. It was rolled out nationally in May 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. Table 14 presents descriptive statistics on a portion of the CROWNWeb clinical data. In addition, the Influenza Vaccination table (Table 5) has been amended to include a fourth year of vaccination statistics to assess the percentage of patients vaccinated by December 31<sup>st</sup>, 2013.

Table 6 now includes a transfusion summary for adult Medicare dialysis patients treated in your facility and the Standardized Transfusion Ratio (STrR) that allows for national comparison of transfusion activity.

### How to Submit Comments

**Between July 15, 2014 and August 15, 2014**, 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.

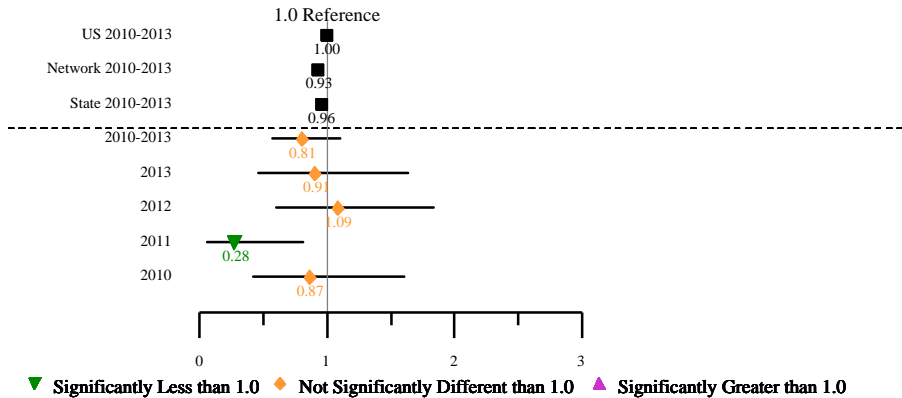
- (1) **State Surveyor:** Dialysis facilities may submit comments on the DFR for their state's surveyors. State surveyor(s) will receive a copy of their DFR with the comments they submitted in September 2014.
- (2) **UM-KECC:** Submit questions or suggestions to improve the DFR to UM-KECC. These comments will not be shared with CMS or your state surveyor.

**Facility Highlights**

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

- At this facility, the 2010-2013 SMR is 0.81, which is 19% fewer deaths than expected at this facility. Among all U.S. facilities, 21% of facilities had a four-year SMR lower than 0.81. This difference is not statistically significant ( $p \geq 0.05$ ), so this lower mortality could plausibly be just a chance occurrence. The 2010-2013 SMR of observed to expected deaths is 0.96 and 0.93 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.

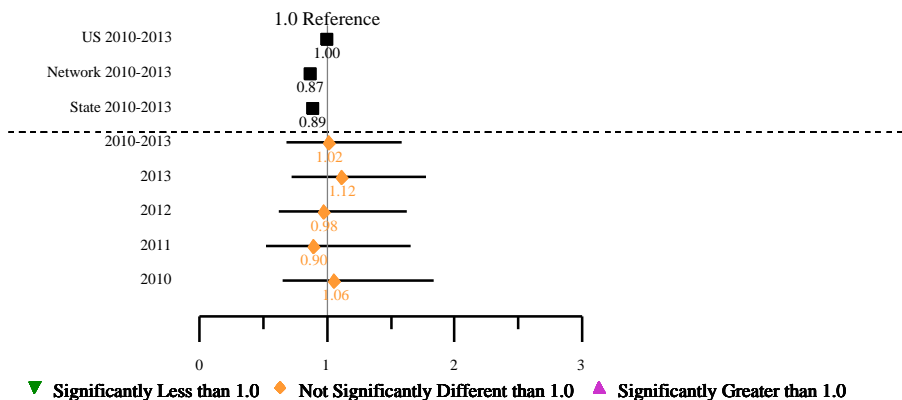


- At this facility, the 2010-2012 first-year SMR of observed to expected deaths is 0.74, which is 26% fewer deaths than expected at this facility. Among all U.S. facilities, 29% of facilities had a first-year SMR lower than 0.74. This difference is not statistically significant ( $p \geq 0.05$ ), so this lower mortality could plausibly be just a chance occurrence. The first-year SMR (2010-2012) of observed to expected deaths is 0.86 and 0.84 for your State and Network, respectively.

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

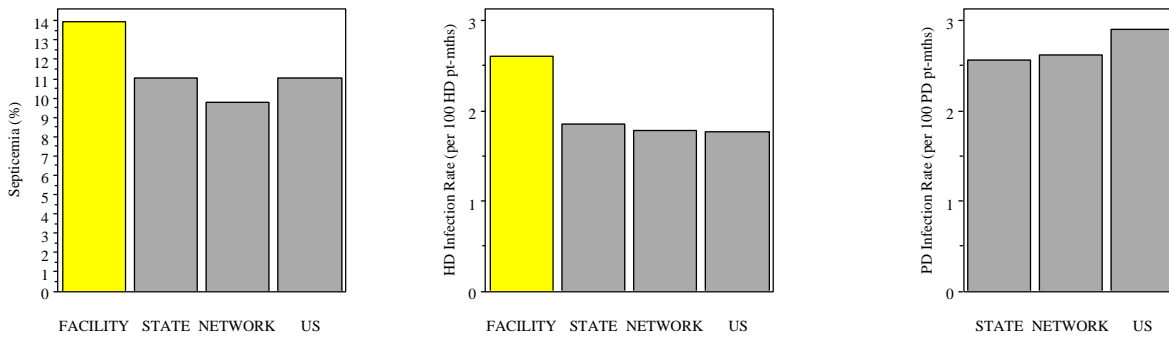
- The 2010-2013 SHR (ED) at this facility is 0.95, which is 5% fewer ED visits than expected. This difference is not statistically significant ( $p \geq 0.05$ ), so this lower ED visit ratio could plausibly be just a chance occurrence. The 2010-2013 SHR (ED) for your State and Network is 0.97 and 0.95, respectively.
- The 2010-2013 SHR (Days) at this facility is 0.80, which is 20% 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 2010-2013 SHR (Days) for your State and Network is 0.69 and 0.68, respectively.
- The 2010-2013 SHR (Admissions) at this facility is 1.02, which is 2% more admissions hospitalized than expected. This difference is not statistically significant ( $p \geq 0.05$ ), so this higher hospitalization could plausibly be just a chance occurrence. The 2010-2013 SHR (Admissions) for your State and Network is 0.89 and 0.87, respectively.

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



**Infection (Tables 2 and 8):**

- The percentage of Medicare dialysis patients at this facility hospitalized with septicemia during 2010-2013 was 13.9%, compared to 11.1% in your State, 9.8% in your Network, and 11.0% nationally.
- The rate of HD infection among HD patients at this facility in 2013 was 2.6 per 100 HD patient-months, compared to 1.9 in your State, 1.8 in your Network, and 1.8 nationally.
- The rate of PD catheter-related infection is unavailable. The rates of PD catheter-related infection are 2.6, 2.6, and 2.9 for your State, Network and U.S., respectively.



**Transplantation (Table 3):**

- Of the patients under age 70 treated at this facility during 2010-2013 who had not previously received a transplant, 5% were transplanted annually, while a rate of 4% would be expected for these patients.
- The 2010-2013 Standardized 1<sup>st</sup> Transplantation Ratio (STR) of observed to expected number of patients transplanted for this facility is 1.14, which is 14% 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 2010-2013 STR for your State and Network is 1.40 and 1.30, respectively.

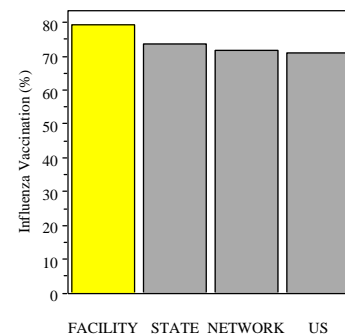
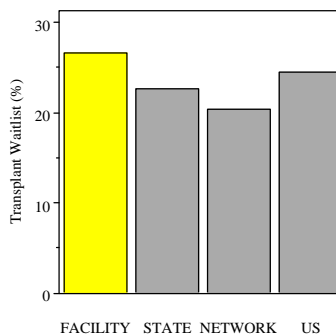
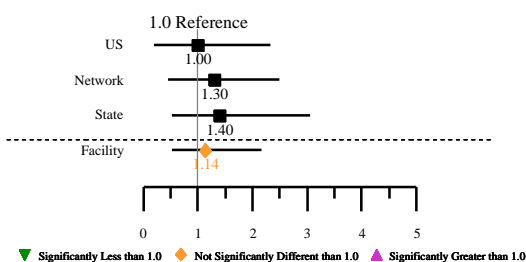
**Transplant Waitlist (Table 4):**

- Among the 45 dialysis patients under age 70 treated at this facility on December 31, 2013, 27% were on the kidney transplant waitlist compared to 25% nationally. This difference is not statistically significant ( $p \geq 0.05$ ) and is plausibly due to random chance. The percentage of patients on the kidney transplant waitlist on December 31, 2013 in your State and Network is 23% and 20%, respectively.

**Influenza Vaccination (Table 5):**

- Among the 58 Medicare dialysis patients treated at this facility on December 31, 2013, 79% were vaccinated between August 1 and December 31, 2013 compared to 71% 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 74%, 72%, and 71%, respectively.

2010-2013 Standardized Transplantation Ratio (STR)  
 The markers show the values of the 2010-2013 STR 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 STR are plotted above the dotted line to allow for comparisons to facility values.



▼ Significantly Less than 1.0    ◆ Not Significantly Different than 1.0    ▲ Significantly Greater than 1.0

# 2014 Dialysis Facility Report

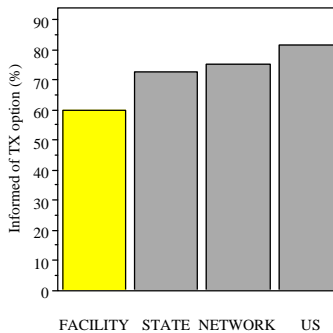
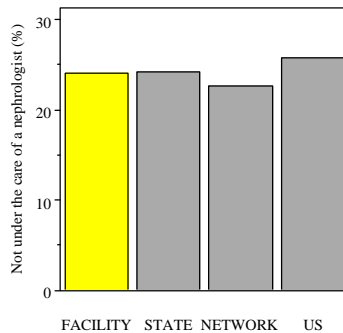
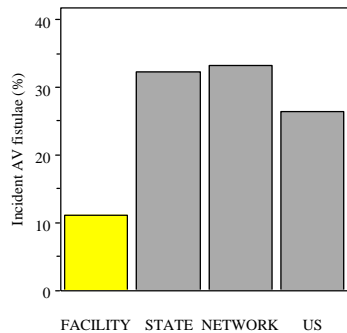
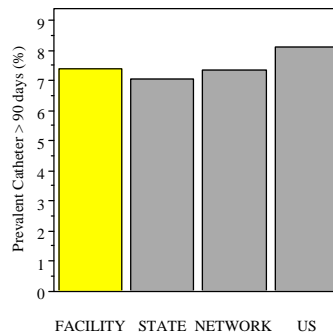
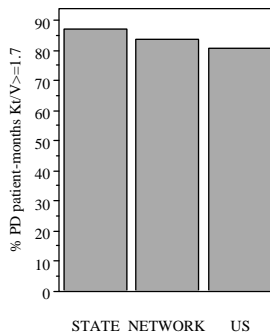
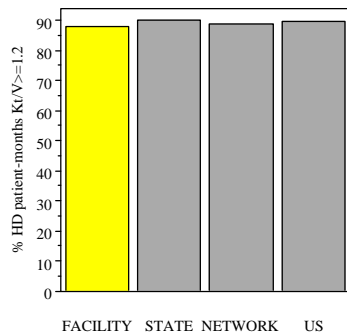
NKC WEST SEATTLE KIDNEY CENTER State: WA Network: 16 CCN: 502523

## Practice Patterns (Tables 6 and 7):

- Among the 55 ESA-treated dialysis patients included in the analysis in 2013, the average hemoglobin calculated is 10.4 g/dL, compared to 10.5 g/dL in your State, 10.6 g/dL in your Network, and 10.5 g/dL nationally.
- Among the 62 HD patients in this facility included in the analysis in 2013, 95% had URR above the KDOQI minimum value for URR (65%), compared to 99% in your State, 99% in your Network, and 99% nationally.
- In 2013, 88% of eligible HD patient-months had a Kt/V  $\geq 1.2$ , compared to 90% in your State, 89% in your Network, and 90% nationally.
- In 2013, the percent of eligible PD patient-months that had a Kt/V  $\geq 1.7$  is unavailable. The percent of patients with Kt/V  $\geq 1.7$  in your State, Network, and US is 87%, 84%, and 81% respectively.
- At this facility in 2013, an average of 11% of incident patients had arteriovenous (AV) fistulae in place, compared to 32% in your State, 33% in your Network, and 26% nationally.
- Of the prevalent patients receiving hemodialysis treatment at this facility in 2013, 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 25 patients with Medical Evidence Forms (CMS-2728) indicating treatment at this facility during 2013:
  - 24% of these patients were not under the care of a nephrologist before starting dialysis, compared to 24% in your State, 23% in your Network, and 26% nationally.
  - 60% of these patients were informed of their transplant options, compared to 72% in your State, 75% in your Network, and 82% nationally.
- Among the patients treated at this facility on December 31, 2013, 19% were treated in a nursing home during the year, compared to 15% nationally.



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

# 2014 Dialysis Facility Report

NKC WEST SEATTLE KIDNEY CENTER State: WA Network: 16 CCN: 502523

**TABLE 1: Mortality Summary for All Dialysis Patients (2010-13) & New Dialysis Patients (2010-12)\*1**

Measure Name	This Facility					Regional Averages*2, per Year, 2010-2013		
	2010	2011	2012	2013	2010-2013	State	Network	U.S.
<b>All Patients: Death Rates</b>								
1a Patients (n=number)	93	102	112	108	415 *9	101.0	82.0	93.7
1b Patient-years (PY) at risk (n)	58.9	64.5	77.1	71.5	272.0 *9	71.2	57.9	63.6
1c Deaths (n)	10	3	14	11	38 *9	13.2	10.6	11.5
1d Expected deaths (n)	11.5	10.8	12.8	12.1	47.1 *9	13.8	11.3	11.5
<b>All Patients: Categories of Death</b>								
1e Withdrawal from dialysis prior to death (% of 1c)	40.0	100	50.0	18.2	42.1	40.4	41.9	25.7
1f Death due to: Infections (% of 1c)	20.0	33.3	14.3	27.3	21.1	14.7	14.8	13.8
Cardiac causes (% of 1c)	40.0	0.0	35.7	45.5	36.8	39.1	42.0	46.0
1g Dialysis unrelated deaths *3 (n; excluded from SMR)	1	0	1	0	2 *9	0.1	0.1	0.1
<b>All Patients: Standardized Mortality Ratio (SMR)</b>								
1h SMR *5	0.87	0.28	1.09	0.91	0.81	0.96	0.93	1.00
1i P-value *6	0.807	0.011	0.815	0.907	0.202	n/a	n/a	n/a
1j Confidence interval for SMR *7								
High (97.5% limit)	1.60	0.81	1.83	1.63	1.11	n/a	n/a	n/a
Low (2.5% limit)	0.42	0.06	0.60	0.45	0.57	n/a	n/a	n/a
1k SMR percentiles for this facility (i.e., percent of facilities with lower mortality rates) *8								
In this State	38	4	71	51	20	n/a	n/a	n/a
In this Network	42	5	73	55	27	n/a	n/a	n/a
In the U.S.	37	5	62	42	21	n/a	n/a	n/a
<b>Regional Averages*2, per Year, 2010-2012</b>								
<b>New Patients: First Year Death Rates</b>								
1l New patients (n=number)	24	33	22		79 *9	21.2	17.9	18.0
1m Patient-years (PY) at risk (n)	22.7	30.0	19.7		72.4 *9	18.7	15.8	15.6
1n Deaths (n)	3	7	3		13 *9	4.0	3.3	3.8
1o Expected deaths (n)	5.1	7.4	5.1		17.5 *9	4.6	4.0	3.8
<b>New Patients: Categories of Deaths</b>								
1p Withdrawal from dialysis prior to death (% of 1n)	66.7	57.1	0.0		46.2	43.7	44.0	27.9
1q Death due to: Infections (% of 1n)	0.0	42.9	33.3		30.8	13.0	13.6	12.8
Cardiac causes (% of 1r)	66.7	28.6	33.3		38.5	36.4	39.6	41.6
<b>New Patients: First Year Standardized Mortality Ratio (SMR)</b>								
1r SMR *5	0.59	0.95	0.59		0.74	0.86	0.84	1.00
1s P-value *6	0.507	0.999	0.514		0.339	n/a	n/a	n/a
1t Confidence interval for SMR *7								
High (97.5% limit)	1.73	1.96	1.73		1.27	n/a	n/a	n/a
Low (2.5% limit)	0.12	0.38	0.12		0.40	n/a	n/a	n/a
1u First Year SMR percentiles for this facility (i.e., percent of facilities with lower mortality rates) *8								
In this State	25	73	32		40	n/a	n/a	n/a
In this Network	28	65	37		39	n/a	n/a	n/a
In the U.S.	27	51	28		29	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] Not shown if fewer than 3 expected deaths.

\*5] Calculated as a ratio of deaths to expected deaths (1c to 1d for all patients, 1n to 1o for new patients).

\*6] 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.

\*7] The confidence interval range represents uncertainty in the value of the SMR due to random variation.

\*8] All facilities are included in ranking, regardless of the number of expected deaths.

\*9] Sum of 4 years (all patients) or 3 years (new patients) used for calculations; should not be compared to regional averages.

# 2014 Dialysis Facility Report

NKC WEST SEATTLE KIDNEY CENTER State: WA Network: 16 CCN: 502523

**TABLE 2: Hospitalization Summary for Medicare Dialysis Patients<sup>\*1</sup>, 2010-2013**

Measure Name	This Facility					Regional Averages <sup>*2</sup> , per Year, 2010-2013		
	2010	2011	2012	2013	2010-2013	State	Network	U.S.
<b>Medicare Dialysis Patients</b>								
2a Medicare dialysis patients (n)	76	80	88	86	330 <sup>*3</sup>	81.7	65.1	73.7
2b Patient-years (PY) at risk (n)	48.5	45.9	58.2	58.5	211.0 <sup>*3</sup>	54.1	42.4	46.1
<b>Days Hospitalized Statistics</b>								
2c Total days hospitalized (n)	594	507	612	647	2360 <sup>*3</sup>	517.0	392.4	625.7
2d Expected total days hospitalized (n)	732.9	631.9	812.0	764.3	2941.2 <sup>*3</sup>	746.3	578.2	626.9
2e Standardized Hospitalization Ratio (Days) <sup>*4</sup>	0.81	0.80	0.75	0.85	0.80	0.69	0.68	1.00
2f P-value <sup>*5</sup>	0.659	0.676	0.500	0.675	0.552	n/a	n/a	n/a
2g Confidence interval for SHR (Days) <sup>*6</sup>								
High (97.5% limit)	1.72	1.83	1.57	1.61	1.50	n/a	n/a	n/a
Low (2.5% limit)	0.42	0.39	0.40	0.48	0.47	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	79	78	60	66	74	n/a	n/a	n/a
In this Network	76	78	65	72	77	n/a	n/a	n/a
In the U.S.	36	36	30	39	32	n/a	n/a	n/a
<b>Admission Statistics</b>								
2i Total admissions (n)	108	81	111	123	423 <sup>*3</sup>	93.1	70.6	88.1
2j Expected total admissions (n)	101.6	90.1	113.3	110.0	414.9 <sup>*3</sup>	105.0	81.6	88.2
2k Standardized Hospitalization Ratio (Admissions) <sup>*4</sup>	1.06	0.90	0.98	1.12	1.02	0.89	0.87	1.00
2l P-value <sup>*5</sup>	0.753	0.793	0.998	0.587	0.858	n/a	n/a	n/a
2m Confidence interval for SHR (Admissions) <sup>*6</sup>								
High (97.5% limit)	1.83	1.66	1.62	1.77	1.58	n/a	n/a	n/a
Low (2.5% limit)	0.65	0.52	0.62	0.72	0.68	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	79	58	64	87	76	n/a	n/a	n/a
In this Network	79	62	66	84	77	n/a	n/a	n/a
In the U.S.	63	41	52	68	57	n/a	n/a	n/a
2o Diagnoses associated with hospitalization (% of 2a) <sup>*8</sup>								
Septicemia	11.8	10.0	20.5	12.8	13.9	11.1	9.8	11.0
Acute myocardial infarction	2.6	1.3	5.7	5.8	3.9	4.4	4.3	4.2
Congestive heart failure	19.7	17.5	28.4	32.6	24.8	21.7	20.3	23.3
Cardiac dysrhythmia	19.7	13.8	23.9	25.6	20.9	16.6	15.2	15.3
Cardiac arrest	2.6	1.3	1.1	3.5	2.1	1.9	1.7	1.8
2p One day admissions (% of 2i)	20.4	17.3	16.2	11.4	16.1	17.5	17.2	13.2
2q Average length of stay (days per admission; 2c/2i)	5.5	6.3	5.5	5.3	5.6	5.6	5.6	7.1
2r Readmissions within 30 days (n) <sup>*9</sup>	32	25	32	29	118 <sup>*3</sup>	26.7	19.1	27.1
2s Admissions that result in readmission within 30 days (% of 2i) <sup>*9</sup>	29.6	30.9	28.8	23.6	27.9	28.7	27.0	30.7

(continued)

# 2014 Dialysis Facility Report

NKC WEST SEATTLE KIDNEY CENTER State: WA Network: 16 CCN: 502523

**TABLE 2 (cont.): Hospitalization Summary for Medicare Dialysis Patients<sup>\*1</sup>, 2010-2013**

Measure Name	This Facility					Regional Averages <sup>*2</sup> , per Year, 2010-2013		
	2010	2011	2012	2013	2010-2013	State	Network	U.S.
<b>Emergency Department (ED) Statistics</b>								
2t Total ED visits (n)	120	141	159	197	617 <sup>*3</sup>	160.0	122.5	138.8
2u Expected total ED visits (n)	152	139	180	181	653 <sup>*3</sup>	165.0	128.8	139.2
2v Standardized Hospitalization Ratio (ED) <sup>*4</sup>	0.79	1.01	0.88	1.09	0.95	0.97	0.95	1.00
2w P-value <sup>*5</sup>	0.406	0.924	0.618	0.681	0.785	n/a	n/a	n/a
2x Confidence interval for SHR (ED) <sup>*6</sup>								
High (97.5% limit)	1.36	1.69	1.41	1.66	1.41	n/a	n/a	n/a
Low (2.5% limit)	0.47	0.62	0.56	0.72	0.64	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	27	60	42	70	44	n/a	n/a	n/a
In this Network	30	62	41	71	50	n/a	n/a	n/a
In the U.S.	23	55	36	66	44	n/a	n/a	n/a
2z Patients with ED visit (% of 2a)	56.6	53.8	63.6	65.1	60.0	62.7	61.9	61.2
2aa ED visits that result in hospitalization (% of 2t)	58.3	46.8	45.9	42.1	47.3	43.8	41.2	49.2
2ab Admissions that originate in the ED (% of 2i)	64.8	81.5	65.8	67.5	69.0	75.2	71.5	77.6

n/a = not applicable.

[\*1] Based on patients with Medicare as primary insurer; see *Guide, Section V*.

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

[\*3] 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 less than 5 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, 2013 are not included.

# 2014 Dialysis Facility Report

NKC WEST SEATTLE KIDNEY CENTER State: WA Network: 16 CCN: 502523

**TABLE 3: Transplantation Summary for Dialysis Patients under Age 70<sup>\*1</sup>, 2010-2013**

Measure Name	This Facility					Regional Averages <sup>*2</sup> , per Year, 2010-2013		
	2010	2011	2012	2013	2010-2013	State	Network	U.S.
3a Eligible patients (n)	69	79	85	83	316 <sup>*10</sup>	68.8	56.2	64.4
3b Transplants (n)	4	2	2	5	13 <sup>*10</sup>	3.1	2.4	2.1
3c Donor type (sums to 3b <sup>*3</sup> )								
Living donor (n)	2	0	1	1	4 <sup>*10</sup>	0.9	0.8	0.6
Deceased donor (n)	2	2	1	4	9 <sup>*10</sup>	2.3	1.7	1.5
<b>Patients who have not Previously Received a Transplant</b>								
3d Eligible patients (n)	63	73	78	75	289 <sup>*10</sup>	62.4	50.7	58.0
3e Patient years (PY) at risk (n)	38.8	48.3	55.5	48.3	190.9 <sup>*10</sup>	44.0	35.9	39.9
3f First transplants <sup>*4</sup> (n)	2	1	2	4	9 <sup>*10</sup>	2.8	2.1	1.8
3g Expected first transplants (n)	1.8	2.1	2.2	1.9	7.9 <sup>*10</sup>	2.0	1.6	1.8
<b>Standardized 1st Transplantation Ratio (STR)<sup>*5</sup></b>								
3h STR <sup>*6</sup>	.	.	.	.	1.14	1.40	1.30	1.00
3i P-value <sup>*7</sup>	.	.	.	.	0.786	n/a	n/a	n/a
3j Confidence interval for STR <sup>*8</sup>								
High (97.5% limit)	.	.	.	.	2.16	n/a	n/a	n/a
Low (2.5% limit)	.	.	.	.	0.52	n/a	n/a	n/a
3k STR percentiles for this facility (i.e., % of facilities with lower transplantation rates) <sup>*9</sup>								
In this State	.	.	.	.	42	n/a	n/a	n/a
In this Network	.	.	.	.	51	n/a	n/a	n/a
In the U.S.	.	.	.	.	60	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>, 2010-2013**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2013		
	2010	2011	2012	2013	State	Network	U.S.
4a Eligible patients on 12/31 (n)	45	67	62	45	54.6	46.1	47.6
4b Patients on the waitlist (% of 4a)	26.7	20.9	24.2	26.7	22.7	20.4	24.5
4c P-value (compared to U.S. value) <sup>*11</sup>	0.417	0.311	0.552	0.426	n/a	n/a	n/a
4d Patients on the waitlist by subgroup (%) <sup>*12</sup>							
Age < 40	25.0	0.0	0.0	0.0	37.9	30.9	36.7
Age 40-69	26.8	21.5	25.4	27.3	20.2	18.7	22.9
Male	34.5	25.6	23.5	25.0	22.4	20.6	25.6
Female	12.5	14.3	25.0	28.6	23.1	20.2	23.1
African American	30.8	13.3	11.8	0.0	23.3	20.8	22.8
Asian/Pacific Islander	11.1	29.4	37.5	31.3	27.7	26.9	36.9
Native American	.	0.0	.	.	13.5	16.4	19.2
White, Hispanic	0.0	0.0	0.0	0.0	22.1	19.4	27.9
White, non-Hispanic	36.8	29.2	30.4	43.8	21.9	19.9	23.3
Other/unknown race	.	0.0	0.0	.	28.6	20.0	29.4
Diabetes	17.6	19.4	14.8	12.0	16.3	14.7	19.9
Non-diabetes	32.1	22.2	31.4	45.0	28.0	25.1	28.2
Previous kidney transplant	75.0	50.0	60.0	75.0	42.2	36.6	45.1
No previous kidney transplant	22.0	18.0	21.1	22.0	20.6	18.7	22.6
< 2 years since start of ESRD	16.7	15.6	15.4	11.1	16.5	15.3	16.6
2-4 years since start of ESRD	25.0	6.7	21.4	26.3	26.8	24.2	29.0
5+ years since start of ESRD	40.0	40.0	36.4	35.3	25.9	23.0	28.8

n/a = not applicable [\*1] See *Guide, Sections 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 2010-2013, 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 1.3% were not included because the patient was not assigned to a facility at time of transplant. [\*5] This section is calculated for the 4-year period only and not reported if there are fewer than 3 expected transplants. [\*6] Standardized 1st Transplantation Ratio calculated as ratio of actual (3f) to expected (3g) transplants. [\*7] A p-value less than 0.05 indicates that the difference between the actual and expected transplants is probably real and is not due to random chance, while a p-value greater than or equal to 0.05 indicates that the difference is plausibly due to random chance. [\*8] The confidence interval range represents uncertainty in the value of the STR due to random variation. [\*9] All facilities are included in ranking, regardless of the number of expected transplants. [\*10] Sum of 4 years used for calculations; should not be compared to regional averages. [\*11] Facility waitlist percentage is compared to the U.S. waitlist percentage for that year: 24.4% (2010), 24.3% (2011), 24.4% (2012), 24.5% (2013). 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 2010-December 2013**

Measure Name	This Facility				Regional Averages		
	2010	2011	2012	2013	State	Network	U.S.
<b>2013</b>							
5a Eligible patients on 12/31 (n)	44	62	59	58	56.8	46.4	48.5
5b Patients vaccinated between Aug. 1 and Dec. 31 (% of 5a)	84.1	72.6	81.4	79.3	73.8	71.6	71.0
5c P-value <sup>*3</sup> (for 5b compared to U.S. value <sup>*4</sup> )	0.013	0.334	0.036	0.103	n/a	n/a	n/a
<b>2012</b>							
5d Patients vaccinated between Aug 1 and Mar 31 of following year (% of 5a)	84.1	72.6	81.4	n/a	74.6	71.4	71.1
5e P-value <sup>*3</sup> (for 5d compared to U.S. value <sup>*5</sup> )	0.016	0.371	0.050	n/a	n/a	n/a	n/a
<b>2013</b>							
5f Patients vaccinated between Aug 1 and Dec 31 by subgroup (%) <sup>*6</sup>							
Age < 18	.	.	.	.	50.0	50.0	51.1
Age 18-39	50.0	100	66.7	100	69.9	68.9	67.8
Age 40-64	87.0	72.2	85.7	78.1	74.0	72.2	71.0
Age 65-74	83.3	73.3	78.6	76.9	73.1	70.5	70.9
Age 75+	85.7	70.0	71.4	83.3	75.7	73.2	72.3
Male	84.6	62.9	72.4	69.0	73.4	71.1	71.0
Female	83.3	85.2	90.0	89.7	74.2	72.4	71.1
African American	72.7	80.0	84.6	66.7	67.9	67.7	68.4
Asian/Pacific Islander	81.8	73.7	89.5	86.4	80.4	80.0	75.6
Native American	100	50.0	.	.	71.4	61.5	75.6
White	90.5	69.0	76.9	79.2	73.5	71.5	72.2
Other/unknown race	.	100	0.0	.	83.3	76.5	71.2
Hispanic	100	20.0	60.0	100	83.4	82.3	74.1
< 1 year since start of ESRD	80.0	56.3	88.9	66.7	61.2	59.5	57.8
1-2 years since start of ESRD	83.3	66.7	76.5	78.9	74.7	71.8	70.6
3+ years since start of ESRD	86.4	82.4	81.8	81.8	76.9	75.1	74.7

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): 68.1% (2010), 69.2% (2011), 70.1% (2012), 71.0% (2013).

[\*5] Compared to the U.S. value for that year and time period (8/1-3/31): 68.7% (2010), 69.8% (2011), 71.1% (2012).

[\*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<sup>\*1</sup>, 2010-2013**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2013		
	2010	2011	2012	2013	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)	90	104	129	123	99.1	77.2	74.8
6b Patient-months treated during year (n) <sup>*3</sup>	602	627	757	754	729.8	561.2	562.5
6c Modality (% of 6b; sums to 100%)							
Hemodialysis	99.0	99.7	100	100	83.9	84.4	90.9
CAPD/CCPD	0.0	0.0	0.0	0.0	8.3	10.9	8.0
Other dialysis <sup>*4</sup>	1.0	0.3	0.0	0.0	7.8	4.7	1.1
6d Percent of patient-months prescribed iron by modality <sup>*5</sup>							
Hemodialysis	68.6	45.0	48.1	39.5	55.7	56.8	60.7
CAPD/CCPD	.	.	.	.	22.0	19.4	24.2
<b>Hemoglobin (among ESA-treated dialysis patients with ESRD for 90+ days and 4+ hemoglobin claims at this facility)</b>							
6e Eligible patients (n)	54	46	55	55	52.8	40.5	44.2
6f Average hemoglobin (g/dL)	11.5	11.2	10.6	10.4	10.5	10.6	10.5
6g Hemoglobin categories (% of 6e; sums to 100%)							
< 10 g/dL	0.0	0.0	9.1	12.7	11.7	10.5	12.3
10-<11 g/dL	24.1	34.8	65.5	78.2	70.7	69.2	67.9
11-<12 g/dL	61.1	60.9	25.5	7.3	17.3	19.9	19.5
> 12 g/dL	14.8	4.3	0.0	1.8	0.3	0.3	0.3

(continued)

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**TABLE 6 (cont.): Facility Modality, Hemoglobin, and Dialysis Adequacy for Medicare Dialysis Patients<sup>\*1</sup>, 2010-2013**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2013		
	2010	2011	2012	2013	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>	54	46	55	55	49.2	37.4	41.6
6i Hemoglobin categories among HD pts (% of 6h; sums to 100%)							
< 10 g/dL	0.0	0.0	9.1	12.7	11.9	10.4	12.0
10-<11 g/dL	24.1	34.8	65.5	78.2	70.9	69.4	68.0
11-12 g/dL	61.1	60.9	25.5	7.3	16.9	19.9	19.6
> 12 g/dL	14.8	4.3	0.0	1.8	0.3	0.3	0.3
6j Eligible peritoneal dialysis (PD) patients (n) <sup>*6</sup>	0	0	0	0	4.4	4.0	3.2
6k Hemoglobin categories among PD pts (% of 6j; sums to 100%)							
< 10 g/dL	.	.	.	.	18.1	20.2	23.6
10-<11 g/dL	.	.	.	.	59.3	58.6	57.0
11-12 g/dL	.	.	.	.	21.8	20.6	18.5
> 12 g/dL	.	.	.	.	0.8	0.7	0.9
<b>Standardized Transfusion Ratio (STrR)</b>							
6l Adult Medicare patients (n)	66	57	53	66	72.7	61.9	62.5
6m Patient years (PY) at risk (n)	39	24	31	39	44.9	37.9	38.6
6n Total transfusions (n)	28	15	10	18	15.1	13.0	16.7
6o Expected total transfusions (n)	18.7	11.0	14.5	17.9	19.8	16.6	16.9
6p Standardized Transfusion Ratio <sup>*11</sup>	1.50	1.36	0.69	1.01	0.76	0.78	1.00
Upper Confidence Limit (97.5%)	3.04	3.68	2.29	2.39	n/a	n/a	n/a
Lower Confidence Limit (2.5%)	0.81	0.56	0.24	0.47	n/a	n/a	n/a
6q P-value <sup>*12</sup>	0.183	0.451	0.604	0.886	n/a	n/a	n/a
<b>Urea Reduction Ratio (URR; among HD patients with ESRD for 183+ days and 4+ URR claims at this facility)<sup>*7</sup></b>							
6r Eligible patients (n)	53	51	68	62	50.7	39.2	43.3
6s URR 65+ (% of 6r; meets a KDOQI guideline)	96.2	98.0	97.1	95.2	98.7	98.6	98.7
<b>Adult Kt/V (K = dialyzer clearance of urea; t = dialysis time; V = patient's total body water)<sup>*8,*9</sup></b>							
6t Eligible adult HD patients (n)	70	102	122	116	83.4	66.0	68.2
6u Eligible adult HD patient-months (n) <sup>*3</sup>	279	589	704	671	578.7	450.4	494.0
6v Adult HD: Average Kt/V <sup>*10</sup>	1.7	1.7	1.7	1.7	1.7	1.7	1.6
6w Kt/V categories among adult HD patients (% of 6u; sums to 100%)							
<1.2	3.6	4.1	2.8	3.9	2.5	2.6	2.4
1.2-<1.4	10.8	10.9	9.4	7.7	9.9	10.5	13.2
1.4-<1.6	25.4	25.3	26.1	25.2	23.5	24.5	26.9
1.6-<1.8	24.0	23.6	24.4	26.4	25.8	26.1	25.9
>= 1.8	31.5	29.9	29.3	28.5	30.8	27.7	23.8
Missing/Out of range/Not performed/Expired	4.7	6.3	8.0	8.3	7.6	8.6	7.9
6x Adult HD: Kt/V >=1.2 (% of 6u) <sup>*10</sup>	91.8	89.6	89.2	87.8	90.0	88.8	89.7
6y Eligible adult peritoneal dialysis (PD) patients (n)	0	0	0	0	8.4	8.2	5.9
6z Eligible adult PD patient-months (n) <sup>*3</sup>	0	0	0	0	62.0	62.1	45.0
6aa Adult PD: Average Kt/V <sup>*10</sup>	.	.	.	.	2.3	2.3	2.2
6ab Kt/V categories among adult PD patients (% of 6z; sums to 100%)							
<1.7	.	.	.	.	5.6	6.2	7.9
1.7-<1.9	.	.	.	.	12.1	12.1	16.5
1.9-<2.2	.	.	.	.	27.4	25.0	25.2
2.2-<2.5	.	.	.	.	20.8	19.3	16.8
>=2.5	.	.	.	.	27.0	27.5	22.2
Missing/Out of range/Not performed/Expired	.	.	.	.	7.2	10.0	11.3
6ac Adult PD: Kt/V >=1.7 (% of 6z) <sup>*10</sup>	.	.	.	.	87.2	83.8	80.8

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 2010-2013.

[\*8] Claims identified as having 2 or fewer, or 4 or more adult dialysis sessions per week were excluded from the Kt/V calculations.

[\*9] Collection of the measures calculated in this section began in July 2010. Includes patients with Medicare as primary insurer and based on the value code D5: Result of last Kt/V.

[\*10] Values calculated based only on Kt/V values reported in range.

[\*11] Calculated as a ratio of observed transfusions to expected transfusions (6n to 6o); not shown if there are fewer than 10 patient-years at risk for transfusions.

[\*12] A p-value less than 0.05 indicates that the difference between the actual and expected transfusion is probably real and is not due to random chance alone, while a p-value greater than or equal to 0.05 indicates that the difference could plausibly be due to random chance.

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**TABLE 7: Vascular Access Information<sup>\*1</sup>, CMS Fistula First (Jan. 2010 - Apr. 2012) and CROWNWeb (May 2012 - Dec. 2013)**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2013			
	2010	2011	2012	2013	State	Network	U.S.	
<b>Vascular Access</b>								
7a	Prevalent hemodialysis patient-months <sup>*3</sup>	802	995	998	920	834.9	698.8	734.5
7b	Vascular access type in use (% of 7a; sums to 100%)							
	Arteriovenous fistula	68.1	65.7	67.4	70.9	70.2	68.9	61.8
	Arteriovenous graft	8.2	13.3	15.1	11.1	12.8	12.8	19.0
	Catheter	23.7	21.0	17.4	18.0	16.8	18.2	19.1
	Other/Missing	0.0	0.0	0.0	0.0	0.2	0.1	0.1
7c	Arteriovenous fistulae in place (% of 7a) <sup>*4</sup>	81.4	74.3	71.8	71.3	72.9	72.5	65.2
7d	Catheter only >= 90 days (% of 7a) <sup>*5</sup>	6.4	6.1	6.5	7.4	7.0	7.3	8.1
<b>Vascular Access at First Treatment</b>								
7e	Incident hemodialysis patients (n)	19	30	16	18	14.1	12.3	10.7
7f	Vascular access type in use (% of 7e; sums to 100%)							
	Arteriovenous fistula	15.8	43.3	25.0	11.1	28.1	26.7	19.3
	Arteriovenous graft	10.5	10.0	6.3	5.6	4.6	4.0	3.4
	Catheter	73.7	46.7	68.8	83.3	67.3	69.2	77.2
	Other/Missing	0.0	0.0	0.0	0.0	0.1	0.0	0.1
7g	Arteriovenous fistulae in place (% of 7e) <sup>*4</sup>	36.8	56.7	43.8	11.1	32.3	33.3	26.3

**TABLE 8: Dialysis Access Type and Access-Related Infection Summary for Medicare Dialysis Patients<sup>\*1</sup>, 2010 - 2013**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2013			
	2010	2011	2012	2013	State	Network	U.S.	
<b>Vascular Access<sup>*7</sup></b>								
8a	Eligible hemodialysis patient-months (n)	307	675	796	798	660.8	528.9	559.7
8b	Hemodialysis vascular access type (% of 8a)							
	Vascular catheter	17.3	14.8	13.1	16.2	14.4	15.5	16.6
	Arteriovenous graft	1.6	2.7	11.6	11.7	13.6	13.1	20.5
	Arteriovenous fistula only	58.6	59.4	67.0	72.2	71.9	71.3	62.8
	Other (>1) <sup>*8</sup>	22.5	23.1	8.4	0.0	0.0	0.1	0.1
8c	Vascular catheter reported >3 consecutive months	5.4	6.1	6.2	11.0	8.9	9.8	10.8
<b>Hemodialysis (HD)</b>								
8d	Eligible HD patients (n)	84	112	105	100	85.7	68.4	72.6
8e	Eligible HD patient-months <sup>*3</sup>	635	690	791	767	657.1	516.6	566.2
8f	HD infection rate per 100 hemodialysis patient-months <sup>*9</sup>	2.68	3.48	2.91	2.61	1.86	1.79	1.77
8g	P-value <sup>*10</sup> of 8f (compared to U.S. value) <sup>*11</sup>	0.358	0.089	0.118	0.059	n/a	n/a	n/a
<b>Peritoneal Dialysis (PD)</b>								
8h	Eligible PD patients (n)	0	0	0	0	9.5	9.3	6.9
8i	Eligible PD patient-months <sup>*3</sup>	0	0	0	0	67.2	68.3	50.5
8j	PD catheter infection rate per 100 PD patient-months <sup>*9</sup>	.	.	.	.	2.56	2.62	2.90
8k	P-value <sup>*10</sup> of 8j (compared to U.S. value) <sup>*12</sup>	.	.	.	.	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: 3.02 (2010), 2.58 (2011), 2.22 (2012), and 1.77 (2013).

[\*12] Compared to U.S. value for that year: 3.27 (2010), 3.13 (2011), 3.09 (2012), and 2.90 (2013).

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**TABLE 9: Characteristics of New Dialysis Patients\*<sup>1</sup>, 2010-2013 (Form CMS-2728)**

Measure Name	This Facility				Regional Averages* <sup>2</sup> , 2013			
	2010	2011	2012	2013	State	Network	U.S.	
<b>Patient Characteristics</b>								
9a	Total number of patients with forms (n)	24	33	22	25	20.5	18.2	17.9
9b	Average age (years [0-95]) <sup>*3</sup>	60.8	63.6	65.9	60.5	62.7	62.7	63.4
9c	Female (% of 9a)	41.7	48.5	31.8	60.0	42.1	41.5	42.8
9d	Race (% of 9a; sums to 100%) <sup>*4</sup>							
	African-American	25.0	18.2	22.7	12.0	9.4	5.9	26.8
	Asian/Pacific Islander	20.8	6.1	31.8	36.0	10.3	7.1	4.8
	Native American	0.0	3.0	0.0	0.0	1.4	3.3	0.9
	White	54.2	72.7	45.5	52.0	78.5	83.5	67.4
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.3	0.2	0.1
9e	Hispanic (% of 9a)	4.2	12.1	4.5	12.0	7.2	7.3	14.2
9f	Primary cause of ESRD (% of 9a; sums to 100%)							
	Diabetes	62.5	36.4	45.5	64.0	45.7	46.1	46.6
	Hypertension	25.0	18.2	18.2	8.0	20.6	19.8	30.6
	Primary glomerulonephritis	0.0	15.2	9.1	12.0	9.7	9.7	6.9
	Other/Missing	12.5	30.3	27.3	16.0	24.0	24.4	16.0
9g	Medical coverage (% of 9a; sums to 100%)							
	Employer group only	20.8	9.1	9.1	12.0	11.2	12.2	12.5
	Medicare only	25.0	18.2	13.6	28.0	29.8	28.8	28.6
	Medicaid only	20.8	27.3	13.6	0.0	10.5	9.5	10.7
	Medicare and Medicaid only	8.3	12.1	27.3	16.0	11.2	10.8	14.0
	Medicare and other	4.2	18.2	18.2	8.0	19.9	22.4	20.9
	Other/Unknown	8.3	3.0	9.1	20.0	11.9	10.0	6.3
	None	12.5	12.1	9.1	16.0	5.6	6.3	7.0
9h	Body Mass Index <sup>*5</sup>							
	Male	25.1	26.1	26.6	22.6	27.2	27.8	27.7
	Female	35.3	33.4	25.7	31.2	29.0	29.3	29.0
9i	Employment <sup>*6</sup>							
	Six months prior to ESRD treatment	14.3	6.7	16.7	8.3	26.4	24.8	21.1
	At first ESRD treatment	35.7	6.7	33.3	50.0	35.3	33.7	30.5
9j	Primary modality (% of 9a; sums to 100%)							
	Hemodialysis	100	100	100	100	90.0	87.7	90.5
	CAPD/CCPD	0.0	0.0	0.0	0.0	10.0	12.3	9.5
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.0	0.0	0.0
9k	Number of incident hemodialysis patients (n)	24	33	22	25	18.4	15.9	16.2
9l	Access used at first outpatient dialysis (% of 9k; sums to 100%)							
	Arteriovenous fistula	16.7	39.4	27.3	16.0	24.5	24.7	16.9
	Arteriovenous graft	4.2	0.0	4.5	8.0	3.7	3.2	2.8
	Catheter	79.2	60.6	68.2	76.0	71.7	71.9	80.0
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.1	0.2	0.3
9m	Arteriovenous fistula placed (% of 9k)	41.7	57.6	59.1	48.0	46.1	45.6	35.2
<b>Average Lab Values Prior to Dialysis<sup>*3</sup></b>								
9n	Hemoglobin (g/dL [3-18])	9.9	9.6	9.3	9.3	9.4	9.6	9.5
9o	Serum albumin (g/dL [0.8-6.0])	3.5	3.5	3.5	3.4	3.3	3.3	3.2

(continued)

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**TABLE 9 (cont.): Characteristics of New Dialysis Patients<sup>\*1</sup>, 2010-2013 (Form CMS-2728)**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2013		
	2010	2011	2012	2013	State	Network	U.S.
<b>Average Lab Values Prior to Dialysis<sup>*3</sup></b>							
9p Serum creatinine (mg/dL [2-33])	7.4	7.2	6.3	8.0	6.6	6.3	6.4
9q GFR (mL/min [0-60])	9.4	9.4	10.4	8.1	10.1	10.6	10.9
<b>Care Prior to ESRD Therapy</b>							
9r Received ESA prior to ESRD (% of 9a)	33.3	42.4	40.9	24.0	22.2	21.1	15.0
9s Pre-ESRD nephrologist care (% of 9a; sums to 100%)							
No	33.3	24.2	27.3	24.0	24.2	22.7	25.8
Yes, < 6 months	12.5	18.2	13.6	28.0	16.5	15.9	13.5
Yes, 6-12 months	25.0	9.1	13.6	16.0	15.8	17.9	18.7
Yes, > 12 months	20.8	45.5	45.5	32.0	40.9	39.7	29.1
Unknown/Missing	8.3	3.0	0.0	0.0	2.6	3.8	12.9
9t Informed of transplant options (% of 9a)	50.0	39.4	22.7	60.0	72.4	75.2	81.7
9u Patients not informed of transplant options (n)	12	20	17	10	5.2	4.1	2.7
9v Reason not informed (% of 9u; may not sum to 100%)							
Medically unfit	58.3	35.0	47.1	20.0	46.3	45.9	37.8
Unsuitable due to age	0.0	10.0	5.9	10.0	12.2	16.5	26.2
Psychologically unfit	8.3	5.0	5.9	0.0	5.6	3.9	3.7
Patient declined information	0.0	0.0	0.0	0.0	1.3	1.5	1.8
Patient has not been assessed	33.3	60.0	35.3	70.0	37.7	37.2	38.1
<b>Comorbid Conditions</b>							
9w Pre-existing comorbidity (% yes of 9a)							
Congestive heart failure	45.8	33.3	40.9	52.0	32.6	30.4	29.5
Atherosclerotic heart disease <sup>*7</sup>	41.7	30.3	31.8	28.0	20.6	22.2	16.1
Other cardiac disorder <sup>*7</sup>	25.0	12.1	18.2	12.0	18.0	17.4	19.5
CVD, CVA, TIA	20.8	15.2	22.7	16.0	9.0	9.0	8.7
Peripheral vascular disease	41.7	27.3	31.8	28.0	12.1	13.6	11.5
History of hypertension	91.7	90.9	90.9	88.0	87.7	86.4	87.6
Diabetes <sup>*7</sup>	70.8	66.7	59.1	68.0	57.4	58.5	61.3
Diabetes on insulin	66.7	42.4	36.4	56.0	43.0	42.4	40.4
COPD	12.5	15.2	13.6	4.0	9.9	10.5	9.6
Current smoker	8.3	9.1	13.6	8.0	9.4	9.1	6.3
Cancer	4.2	9.1	18.2	4.0	8.6	8.2	7.1
Alcohol dependence	4.2	3.0	0.0	4.0	1.3	1.6	1.5
Drug dependence	4.2	12.1	0.0	16.0	3.4	2.4	1.2
Inability to ambulate	4.2	3.0	4.5	4.0	4.4	4.6	6.9
Inability to transfer	0.0	0.0	0.0	0.0	1.7	1.6	3.8
9x Average number of comorbid conditions	4.4	3.7	3.8	3.9	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<sup>\*1</sup>, 2010-2013**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2013		
	2010	2011	2012	2013	State	Network	U.S.
10a Patients treated on 12/31 (n)	61	77	71	70	76.4	65.8	66.6
10b Average age (years)	59.2	58.9	59.4	62.1	61.3	61.3	61.6
10c Age (% of 10a; sums to 100%)							
< 18	0.0	0.0	0.0	0.0	0.4	0.3	0.3
18-64	65.6	68.8	66.2	60.0	54.6	54.3	55.1
65+	34.4	31.2	33.8	40.0	45.0	45.4	44.6
10d Female (% of 10a)	41.0	44.2	42.3	45.7	44.2	43.5	44.2
10e Race (% of 10a; sums to 100%) <sup>*3</sup>							
African American	24.6	22.1	18.3	17.1	12.1	8.7	36.7
Asian/Pacific Islander	21.3	24.7	26.8	31.4	13.5	9.7	5.4
Native American	1.6	3.9	0.0	1.4	1.8	3.6	1.3
White	52.5	48.1	53.5	50.0	72.2	77.7	55.8
Other/Unknown/Missing	0.0	1.3	1.4	0.0	0.3	0.3	0.7
10f Ethnicity (% of 10a; sums to 100%)							
Hispanic	4.9	10.4	12.7	10.0	10.1	9.9	16.7
Non-Hispanic	93.4	87.0	84.5	87.1	88.9	89.3	81.6
Unknown	1.6	2.6	2.8	2.9	1.0	0.8	1.8
10g Cause of ESRD (% of 10a; sums to 100%)							
Diabetes	44.3	45.5	52.1	55.7	44.8	43.9	44.5
Hypertension	13.1	14.3	9.9	11.4	18.4	18.2	28.9
Glomerulonephritis	16.4	16.9	19.7	12.9	14.7	15.3	10.8
Other/Unknown	26.2	23.4	18.3	20.0	21.0	21.6	14.0
Missing	0.0	0.0	0.0	0.0	1.1	1.1	1.7
10h Average duration of ESRD (years)	4.9	5.3	6.0	5.7	4.8	4.8	4.8
10i Years since start of ESRD (% of 10a; sums to 100%)							
< 1	29.5	22.1	8.5	14.3	16.6	17.1	16.2
1-2	6.6	15.6	26.8	12.9	18.0	18.3	17.0
2-3	13.1	9.1	9.9	17.1	15.1	14.1	13.8
3-6	23.0	26.0	25.4	27.1	25.6	26.2	27.0
6+	27.9	27.3	29.6	28.6	24.7	24.3	26.0
10j Nursing home patients (% of 10a) <sup>*4</sup>	11.5	6.5	4.2	18.6	15.0	13.8	14.7
10k Modality (% of 10a; sums to 100%)							
In-center hemodialysis	96.7	98.7	100	95.7	85.6	83.8	88.2
Home hemodialysis	0.0	1.3	0.0	0.0	3.5	2.8	1.9
Continuous ambulatory peritoneal dialysis	1.6	0.0	0.0	1.4	1.4	2.4	1.7
Continuous cycling peritoneal dialysis	0.0	0.0	0.0	1.4	9.2	10.5	7.8
Other modality <sup>*5</sup>	1.6	0.0	0.0	1.4	0.3	0.4	0.4

n/a = not applicable

[\*1] See Guide, Section XIII.

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

[\*3] 'Asian' includes Indian sub-continent. 'Native American' includes Alaskan Native. 'White' includes Middle Eastern and Arabian.

[\*4] Includes patients who were also treated by a nursing facility at any time during the year. The source of nursing facility history of patients is the Nursing Home Minimum Dataset.

[\*5] Other modality includes other dialysis, uncertain modality, and patients not on dialysis but still temporarily assigned to the facility (discontinued dialysis, recovered renal function, and lost to follow up).

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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>, 2010-2013**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2013		
	2010	2011	2012	2013	State	Network	U.S.
11a Medicare dialysis patients on 12/31 (n)	49	59	58	59	59.9	50.6	51.8
11b Comorbidity (% yes of 11a)							
<b>Infections</b>							
AIDS/HIV positive	0.0	0.0	0.0	0.0	0.7	0.5	1.8
Dialysis access-related	12.2	22.0	19.0	16.9	14.4	14.5	14.6
Hepatitis B	0.0	8.5	12.1	13.6	1.0	0.9	2.9
Hepatitis other	8.2	13.6	15.5	8.5	6.2	5.4	6.3
Metastatic	4.1	5.1	3.4	11.9	4.6	4.2	4.0
Pneumonia	6.1	8.5	3.4	3.4	6.1	5.9	5.8
Tuberculosis	0.0	1.7	1.7	1.7	0.6	0.5	0.6
Other	34.7	39.0	53.4	59.3	40.8	40.4	45.3
<b>Cardiovascular</b>							
Cardiac arrest	0.0	1.7	0.0	1.7	1.7	1.6	1.6
Cardiac dysrhythmia	38.8	44.1	48.3	39.0	34.7	34.7	36.8
Cerebrovascular disease	22.4	15.3	29.3	28.8	23.2	20.9	26.2
Congestive heart failure	40.8	44.1	50.0	50.8	46.0	45.6	51.0
Ischemic heart disease	42.9	49.2	62.1	54.2	41.1	42.0	49.2
Myocardial infarction	2.0	8.5	8.6	15.3	8.1	8.0	8.6
Peripheral vascular disease <sup>*3</sup>	30.6	45.8	55.2	50.8	37.9	36.3	42.9
<b>Other</b>							
Alcohol dependence	2.0	3.4	1.7	5.1	3.6	3.4	2.9
Anemia	4.1	6.8	5.2	5.1	4.6	4.9	8.8
Cancer	12.2	15.3	13.8	10.2	10.2	10.3	10.7
Chronic obstructive pulmonary disease	22.4	32.2	34.5	32.2	30.2	30.5	31.8
Diabetes	49.0	59.3	74.1	61.0	60.1	59.2	64.9
Drug dependence	4.1	10.2	5.2	8.5	4.8	4.6	2.4
Gastrointestinal tract bleeding	2.0	1.7	0.0	1.7	2.8	2.8	3.2
Hyperparathyroidism	93.9	93.2	98.3	98.3	91.1	88.1	89.0
11c Average number of comorbid conditions	4.3	5.3	5.9	5.8	4.7	4.7	5.1

n/a = not applicable

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

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

[\*3] Peripheral vascular disease includes venous, arterial and nonspecific peripheral vascular diseases.

**TABLE 12: How Patients Were Assigned to This Facility and End of Year Patient Status<sup>\*1</sup>, 2010-2013**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2013		
	2010	2011	2012	2013	State	Network	U.S.
12a Number of patients placed in facility <sup>*1</sup> (n)	93	102	112	108	106.1	90.4	91.2
12b Initial patient placement for the year (% of 12a; sums to 100%)							
Continuing at facility on 01/01	60.2	59.8	68.8	65.7	69.6	69.7	70.6
Incident (new to ESRD)	23.7	20.6	17.9	22.2	18.4	18.7	18.1
Transferred into facility	16.1	19.6	13.4	12.0	12.0	11.6	11.4
12c Patient status at end of year (% of 12a; sums to 100%)							
Alive in this facility on 12/31	65.6	75.5	63.4	64.8	72.0	72.8	73.0
Alive in another facility on 12/31	14.0	14.7	15.2	18.5	9.1	8.5	8.4
Received a transplant	5.4	2.0	2.7	3.7	3.5	3.2	2.4
Died; death attributed to this facility	10.8	2.9	12.5	10.2	12.6	12.5	12.6
Died; death attributed to another facility	0.0	2.0	2.7	0.9	1.1	1.1	1.3
Other <sup>*3</sup>	4.3	2.9	3.6	1.9	1.7	2.0	2.2

[\*1] Patient assignment for Tables 1, 2, 3, 10, 11 and 12 only. See *Guide, Section XV*.

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

[\*3] Also includes dialysis unrelated deaths. Dialysis unrelated deaths are not attributed to any facility for the purposes of the mortality calculations in this report.

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**TABLE 13: Patient and Staff Counts from the Annual Facility Survey (Form CMS-2744) \*<sup>1</sup>, 2010-2013**

Measure Name	This Facility				Regional Averages * <sup>2</sup> , 2013		
	2010	2011	2012	2013	State	Network	U.S.
<b>Patients Treated During the Year</b>							
13a Patients treated during year (n)	107	157	143	131	121.7	104.9	105.1
13b Incident patients (% of 13a)	23.4	21.7	17.5	20.6	16.3	16.8	16.7
13c Transferred into facility (% of 13a)	15.0	36.3	17.5	11.5	17.6	17.2	16.1
13d Transferred out of facility (% of 13a)	28.0	35.7	23.1	26.7	16.4	16.4	15.9
<b>Patients Treated on 12/31</b>							
13e Patients treated (n)	63	92	87	76	82.8	71.0	71.7
13f Patient modality (n; sums to 13e)							
In-center HD	63	92	87	76	71.1	59.9	63.5
Frequency <= 4 times per week	63	92	87	76	71.1	59.8	63.5
Frequency > 4 times per week	0	0	0	0	0.1	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	1.9	1.3
Frequency <= 4 times per week	0	0	0	0	0.3	0.3	0.5
Frequency > 4 times per week	0	0	0	0	2.4	1.7	0.8
Home CAPD	0	0	0	0	1.3	1.9	1.4
Home CCPD	0	0	0	0	7.6	7.4	5.5
Home Other * <sup>3</sup>	0	0	0	0	0.0	0.0	0.0
13g Vocational rehabilitation: Patients aged 18-54 (n)	24	32	27	20	25.0	21.3	21.4
Employed (full or part-time) (% of 13g)	33.3	31.3	18.5	35.0	24.3	23.3	13.1
Attending school (full or part-time) (% of 13g)	0.0	0.0	0.0	0.0	3.3	3.5	1.0
13h Medicare eligibility status (% of 13e; sums to 100% * <sup>4</sup> )							
Medicare	76.2	75.0	77.0	84.2	86.3	88.4	83.1
Medicare application pending	9.5	14.1	2.3	0.0	1.4	1.4	2.0
Non-Medicare	14.3	10.9	20.7	15.8	12.3	10.2	14.9
<b>Facility Staffing on 12/31 *<sup>5</sup></b>							
13i Total full and part time staff positions (n)	16	18	20	23	19.1	16.3	14.5
13j Staff positions by type (n; sums to 13i)							
Full time nurse * <sup>6</sup>	8	8	8	9	4.9	4.8	5.0
Full time patient care technician	5	6	5	9	7.1	6.3	5.6
Full time renal dietician	0	0	0	0	0.5	0.5	0.6
Full time social worker	0	0	0	0	0.5	0.5	0.6
Part time nurse * <sup>6</sup>	0	1	1	1	2.3	1.4	0.9
Part time patient care technician	1	1	4	2	2.4	1.4	0.7
Part time renal dietician	1	1	1	1	0.7	0.7	0.6
Part time social worker	1	1	1	1	0.7	0.7	0.5

\*<sup>1</sup> See Guide, Section XVI

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

\*<sup>3</sup> Due to rounding, regional average may be slightly greater than 0 (<0.05).

\*<sup>4</sup> Values may not sum to exactly 100% because of unknown Medicare status.

\*<sup>5</sup> Data as of June 24, 2014. 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).

\*<sup>6</sup> Nursing staff includes registered nurse, licensed practical nurse, vocational nurse, or advanced practice nurse degree.



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**TABLE 14: CROWNWeb Clinical Data <sup>\*1</sup>, May 2012-2013**

Measure Name	This Facility				Regional Averages <sup>*2</sup>		
	2010	2011	2012	2013	State	Network	U.S.
						<b>2013</b>	
14a Eligible patients (n) <sup>*3</sup>	.	.	95	93	100.1	85.3	85.9
14b Eligible patient-months (n) <sup>*4</sup>	.	.	570	792	873.4	743.4	755.5
14c Eligible HD patients (n) <sup>*5</sup>	.	.	95	93	89.8	74.8	79.3
14d Eligible HD patient-months (n) <sup>*4</sup>	.	.	570	792	781.1	646.7	696.8
14e Eligible PD patients (n) <sup>*5</sup>	.	.	0	0	23.6	21.9	20.4
14f Eligible PD patient-months (n) <sup>*4</sup>	.	.	0	0	182.9	171.4	160.0
<b>Hemodialysis Adequacy</b>							
14g Eligible HD Kt/V patients (n) <sup>*7</sup>	.	.	86	86	77.1	61.4	61.7
14h Eligible HD Kt/V patient-months (n) <sup>*7</sup>	.	.	500	651	552.3	428.1	456.7
14i Average Kt/V <sup>*6</sup> (average of 14h) <sup>*7</sup>	.	.	1.7	1.7	1.7	1.7	1.6
14j Kt/V categories (% of 14h; sums to 100%) <sup>*7</sup>							
<1.2	.	.	2.8	5.5	2.4	2.4	2.2
1.2-<1.8	.	.	65.0	61.9	62.3	63.4	67.6
>=1.8	.	.	31.2	31.6	33.6	32.6	28.9
Missing/Out of range	.	.	1.0	0.9	1.7	1.5	1.2
14k Average normalized protein catabolic rate (nPCR) <sup>*6</sup> (average of 14d)	.	.	1.1	1.1	1.0	1.0	0.9
14l nPCR Missing/Out of range (% of 14d)	.	.	7.2	4.0	28.0	29.1	32.7
<b>Peritoneal Dialysis Adequacy <sup>*8</sup></b>							
14m Average weekly Kt/V <sup>*6</sup> (average of 14f)	.	.	.	.	2.3	2.3	2.3
14n Weekly Kt/V categories (% of 14f; sums to 100%)							
<1.7	.	.	.	.	3.3	3.7	4.8
1.7-<2.5	.	.	.	.	40.4	45.2	48.9
>=2.5	.	.	.	.	19.8	22.7	20.2
Missing/Out of range	.	.	.	.	36.6	28.4	26.2
14o Average normalized protein catabolic rate (nPCR) <sup>*6</sup> (average of 14f)	.	.	.	.	0.9	0.9	0.9
14p nPCR Missing/Out of range (% of 14f)	.	.	.	.	69.6	59.1	56.5
<b>Anemia</b>							
14q Average hemoglobin <sup>*6</sup> (average of 14b)	.	.	11.0	10.8	10.8	10.9	10.8
14r Hemoglobin categories (% of 14b; sums to 100%)							
<10 g/dL	.	.	18.9	24.5	19.1	17.2	18.3
10-<11 g/dL	.	.	28.1	33.0	34.7	33.5	33.4
11-12 g/dL	.	.	29.1	23.4	28.5	29.0	27.4
>12 g/dL	.	.	18.6	16.5	12.1	13.3	11.2
Missing/Out of range	.	.	5.3	2.7	5.6	7.0	9.7
14s ESA prescribed (% of 14b)	.	.	85.8	92.8	69.5	59.9	64.8

(continued)

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**TABLE 14 (cont.): CROWNWeb Clinical Data <sup>\*1</sup>, May 2012-2013**

Measure Name	This Facility				Regional Averages <sup>*2</sup>		
	2010	2011	2012	2013	State	Network	U.S.
<b>Iron</b>							
<b>2013</b>							
14t Average reticulocyte hemoglobin content (CHr) <sup>*6</sup> (average of 14b)	.	.	.	.	33.1	33.4	30.7
14u CHr categories (% of 14b; sums to 100%)							
<29 pg	.	.	0.0	0.0	0.0	0.0	0.3
>=29 pg	.	.	0.0	0.0	0.6	1.7	1.5
Missing/Out of range	.	.	100	100	99.4	98.3	98.2
14v Average transferrin saturation (TSAT) <sup>*6</sup> (average of 14b)	.	.	34.4	31.0	31.2	31.5	32.3
14w TSAT categories (% of 14b; sums to 100%)							
<20%	.	.	5.3	8.1	10.4	10.8	10.3
>=20%	.	.	35.1	32.2	50.3	56.7	64.2
Missing/Out of range	.	.	59.6	59.7	39.4	32.5	25.5
14x Average ferritin <sup>*6</sup> (average of 14b)	.	.	1048	1120	889	861	854
14y Ferritin categories (% of 14b; sums to 100%)							
<200 ng/ml	.	.	0.5	0.3	2.1	2.6	2.4
>=200 ng/ml	.	.	39.6	40.5	46.7	46.0	46.0
Missing/Out of range	.	.	59.8	59.2	51.2	51.5	51.6
14z Intravenous iron prescribed (% of 14b)	.	.	63.7	64.0	54.8	46.3	46.6
14aa Oral iron prescribed (% of 14b)	.	.	0.0	0.0	2.2	2.0	1.2
<b>Mineral Metabolism</b>							
14ab Average phosphorous <sup>*6</sup> (average of 14b)	.	.	5.5	5.6	5.3	5.2	5.1
14ac Phosphorous categories (% of 14b; sums to 100%)							
<3.5 mg/dL	.	.	5.6	8.5	8.7	8.4	9.3
3.5-4.5 mg/dL	.	.	21.9	20.1	25.0	24.9	25.2
4.6-5.5 mg/dL	.	.	25.8	23.1	27.9	27.8	28.3
5.6-7.0 mg/dL	.	.	27.5	28.0	20.2	19.5	17.4
>7.0 mg/dL	.	.	13.5	17.7	12.0	11.3	9.5
Missing/Out of range	.	.	5.6	2.7	6.2	8.0	10.4
14ad Average calcium uncorrected <sup>*6</sup> (average of 14b)	.	.	9.0	9.1	9.0	9.0	9.0
14ae Calcium uncorrected categories (% of 14b; sums to 100%)							
<8.4 mg/dL	.	.	18.8	14.0	14.6	13.9	14.2
8.4-10.2 mg/dL	.	.	71.4	76.8	73.6	72.6	70.5
>10.2 mg/dL	.	.	4.2	6.6	4.7	4.6	4.1
Missing/Out of range	.	.	5.6	2.7	7.0	9.0	11.1

n/a = not applicable.

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

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

[\*3] 14a includes those who switch between HD and PD during the month and patients for whom modality is unknown.

[\*4] Patients may be counted up to 12 times per year.

[\*5] Sum of eligible HD and PD patients may not add to 14a.

[\*6] Based on in-range values; see *Guide* for range values.

[\*7] Kt/V summaries are restricted to patients who dialyze thrice weekly and whose Kt/V calculation method is Daugirdas II or UKM.

[\*8] The PD Adequacy section uses the most recent value over a 4-month look-back period. Therefore, reporting for PD in this table begins with August 2012 which includes a look-back through May 2012.

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**TABLE 15: Survey and Certification Activity<sup>\*1</sup>**

Measure Name	This Facility	Regional Averages		
		State	Network	U.S.
15a Date of last survey	06/26/2013	n/a	n/a	n/a
15b Type of last survey	Recertification	n/a	n/a	n/a
15c Compliance condition after last survey	Meets requirements	n/a	n/a	n/a
15d Number of deficiencies cited at last survey				
Condition for coverage (CfC) deficiencies	0	0.3	0.3	0.3
Standard deficiencies	8	10.2	6.2	6.3
15e 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	2.5	2.1	5.5
V175 Water and Dialysate Quality	No, not cited	5.0	5.9	3.7
V300 Reuse of Hemodialysis and Bloodlines	No, not cited	0.0	0.0	0.5
V400 Physical Environment	No, not cited	2.5	1.1	2.5
V450 Patient Rights	No, not cited	0.0	0.0	0.4
V500 Patient Assessment	No, not cited	1.3	1.6	2.6
V540 Patient Plan of Care	No, not cited	1.3	2.7	3.1
V580 Care at Home	No, not cited	0.0	0.5	0.5
V625 Quality Assessment & Performance Improvement	No, not cited	2.5	3.7	4.4
V660 Special Purpose Renal Dialysis Facilities	No, not cited	0.0	0.0	0.0
V675 Laboratory Services	No, not cited	0.0	0.0	0.0
V680 Personnel Qualifications	No, not cited	0.0	1.1	0.7
V710 Responsibilities of the Medical Director	No, not cited	2.5	3.2	4.0
V725 Medical Records	No, not cited	0.0	0.0	0.3
V750 Governance	No, not cited	8.8	5.9	3.6

n/a = not applicable

<sup>[\*1]</sup> See *Guide, Section XVIII*. Data on this table are from the facility's latest survey since January 2009. If your facility has not been surveyed since January 2009, facility-level data on this table will be missing.

<sup>[\*2]</sup> Regional values are the percentage of surveys that were cited for the respective CfC deficiency.

**TABLE 16: Facility Information<sup>\*1</sup>, 2014**

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

<sup>[\*1]</sup> Information based on SIMS data as of March 31, 2014. See *Guide, Section XIX*.

<sup>[\*2]</sup> Information based on data available on DFC as of May 2014.

<sup>[\*3]</sup> Information based on CROWNWeb data as of December 2013. If missing, data were not available.