

TABLE 6: Quality of Patient Care Star Rating Calculation^{*1}

This star rating is based on the measures reported in this QDFCC-Preview Report. The time period for SMR in this table is 2020-2023, SWR is 2020-2022; all other measures are 2023. Further description of the methodology can be found in *Section X* of the *Guide to the Quarterly Dialysis Facility Care Compare Report*.

Note: The time period reflected for these measures may not match the time period of SFR and PPPW in Table 1 and the time periods in Table 4.

Calculation Definition	This Facility
6a Domain 1 Score (average of 6c, 6e, 6g, and 6i) ^{*2}	0.60
6b Standardized Mortality Ratio (SMR) ^{*3}	0.95
6c Measure Score: SMR ^{*4}	-0.01
6d Standardized Hospitalization Ratio (Admissions) (SHR) ^{*3}	0.91
6e Measure Score: SHR ^{*4}	0.28
6f Standardized Readmission Ratio (SRR) ^{*3}	0.41
6g Measure Score: SRR ^{*4}	1.88
6h Standardized Transfusion Ratio (STrR) ^{*3}	0.78
6i Measure Score: STrR ^{*4}	0.24
6j Domain 2 Score ^{*5} (average of 6l and 6n) ^{*2}	0.01
6k Standardized Fistula Rate (SFR) (%) ^{*6}	61.85
6l Measure Score: SFR ^{*4}	0.13
6m Long-Term Catheter Rate (%) ^{*6}	16.08
6n Measure Score: Catheter ^{*4}	-0.12
6o Domain 3 Score (average of 6u and 6w) ^{*2}	-0.42
6p Adult HD: Percentage of patients with Kt/V \geq 1.2 (%) ^{*6}	97.44
6q Adult PD: Percentage of patients with Kt/V \geq 1.7 (%) ^{*6}	89.64
6r Pediatric HD: Percentage of patients with Kt/V \geq 1.2 ^{*6}	100.00%
6s Pediatric PD: Percentage of patients with Kt/V \geq 1.7 ^{*6}	79.25%
6t Overall: Percentage of patients with Kt/V \geq specified threshold (%) ^{*6}	95.19
6u Measure Score: Kt/V ^{*4}	-0.54
6v Percentage of patients with uncorrected serum or plasma calcium $>$ 10.2 mg/dL (%) ^{*6}	1.82
6w Measure Score: Hypercalcemia ^{*4}	-0.31
6x Domain 4 Score (average of 6z and 6ab) ^{*2}	-0.07
6y Standardized First Kidney Transplant Waitlist Ratio for Incident Dialysis Patients (SWR) ^{*3}	0.35
6z Measure Score: SWR ^{*4}	-0.79
6aa Percentage of Prevalent Patients Waitlisted (PPPW) ^{*6}	23.38
6ab Measure Score: PPPW ^{*4}	0.64
6ac Final Score (average of 6a, 6j, 6o, 6x) ^{*8 *9}	0.0916
6ad Quality of Patient Care Star Rating	★ ★ ★ ☆ ☆

[1] See *Guide, Section X*.
 [2] The Domain Score is the average of the measure scores within that domain. If there is at least one measure in the domain, the missing measures in that domain are imputed with the average of the measure score to limit the non-missing measures from being too influential. If all measures in a domain are missing, then the domain score is not calculated.
 [3] Calculated as a ratio of observed deaths/admissions/readmissions/transfusions/transplants waitlisted to expected deaths/admissions/readmissions/transfusions/transplants waitlisted; not included in star rating calculation if there are fewer than 3 expected deaths for mortality, fewer than 5 or 10 patient-years at risk for admissions or transfusions, fewer than 11 index discharges for readmissions, or fewer than 2 expected waitlist events or fewer than 11 eligible patients for SWR, respectively.
 [4] If a measure is Not Available, its measure score will be imputed with the average of the measure score to limit the non-missing measures from being too influential in calculation of the domain score.
 [5] Facilities that serve only PD patients will not have any measures in this domain since their patients do not have fistulas or catheters. For these facilities, this domain was not included in the star rating calculation.
 [6] Percentages based on 10 or fewer patients are shown in this table but will be reported as "Not Available" on DFCC.
 [7] For improved ability to compare Kt/V in facilities with different types of patients in terms of modality or pediatric status, the adult and pediatric HD and PD Kt/V measurements were pooled into one measure. The percentage of patients that achieve Kt/V greater than the specified thresholds for each of the four respective patient types (adult PD patients, adult HD patients, pediatric HD patients, and pediatric PD patients) was weighted based on the number of patient-months of data available. If the overall Kt/V percentage is based on 10 or fewer patients, then it is reported as "Not Available" in this table.
 [8] Final score is the average of the 4 domain scores, with half-weight given to Domain 3. If all measures in a given domain are missing, then there is no final score and no star rating computed with the exception of PD-only facilities. PD-only facilities are not eligible for Domain 2 (SFR and catheter), therefore, they are only scored on Domains 1, 3, and 4 if they have at least one measure value in each of these three domains.
 [9] The final score value has been truncated for display purposes.