

Dialysis Facility Report for Fiscal Year (FY) 2021

Purpose of the Report

The *Dialysis Facility Report (DFR) for FY 2021* 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 2021 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 data reported in CROWNWeb, Medicare claims and data collected for CMS. It is the twenty-fifth in a series of annual reports. This is one of 7,920 reports that have been distributed to ESRD providers in the U.S.

This DFR includes data specific to CCN(s): 999999

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 2016 and December 2019. Mortality, hospitalization, transplantation, and waitlist statistics are reported for a three- or four-year period. Regional and national averages are included to allow for comparisons. Some of the summaries of patient mortality, hospitalization, transplantation, waitlist, vascular access, and anemia management 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 5. For a complete description of the methods used to calculate the statistics in this report, please see the *Guide to the Dialysis Facility Reports for FY 2021*. The *Guide* may be downloaded from the methodology section of the Dialysis Data website at www.DialysisData.org.

What's New This Year: As part of a continuing effort to improve the quality and relevance of this report for your facility, the following changes have been incorporated into the DFR for FY 2021: Medicare Advantage patients are now excluded from the following measures:

- Standardized Hospitalization Ratio (SHR) for emergency department visits (Table 4)
- Influenza summaries (Table 7)
- Transfusion summaries (Table 8)
- Access-related infection summaries (Table 11)

How to Submit Comments

Between July 15, 2020 and August 15, 2020, facilities may submit comments to their state surveyor or UM-KECC by visiting www.DialysisData.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 DialysisData@umich.edu or 1-855-764-2885.

- (1) **State Surveyor:** Select “**DFR: Comments on DFR for State Surveyor**” from the drop down list to submit comments regarding this report for the state's surveyor(s). Any comments submitted will be appended and sent to the state's surveyor(s) in September 2020. Please do not include questions for UM-KECC using this option.
- (2) **UM-KECC:** Select “**DFR: Comments on DFR for UM-KECC**” to submit questions or suggestions to improve the DFR to UM-KECC. These comments will not be shared with CMS or your state surveyor.

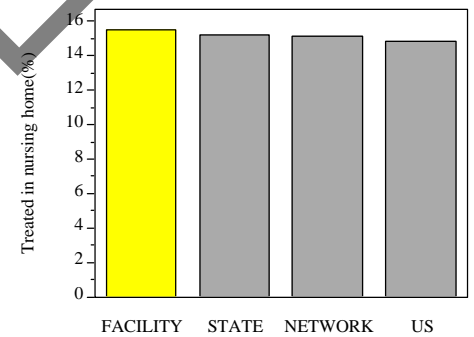
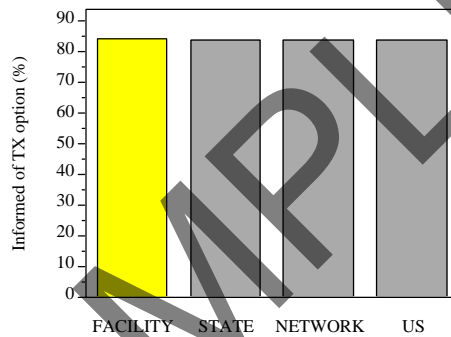
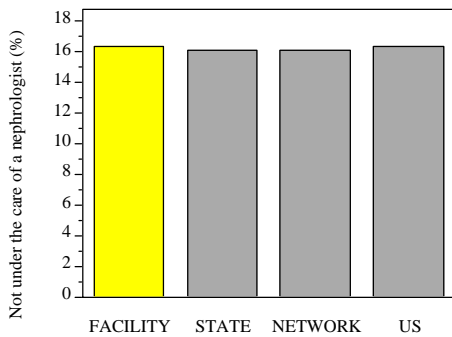
Facility Highlights

Bar charts in this section are displayed as a percentage for all measures reported and highlight the facility's value compared to the state, network, and US.

The line charts in this section are displayed for all standardized measures. The markers show the values of the corresponding standardized measure for this facility, state, network, and US. 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 values are plotted above the dotted line to allow for comparisons to facility values.

Patient Characteristics (Tables 1 and 2):

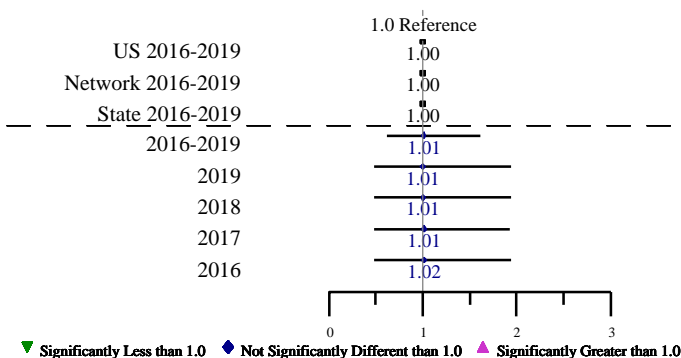
- Among the 15 incident patients with Medical Evidence Forms (CMS-2728) indicating treatment at this facility during 2019:
 - 16% of these patients were not under the care of a nephrologist before starting dialysis, compared to 16% in your State, 16% in your Network, and 16% nationally.
 - 84% of these patients were informed of their transplant options, compared to 84% in your State, 84% in your Network, and 84% nationally.
- Among the patients treated at this facility on December 31, 2019, 15% were treated in a nursing home during the year, compared to 15% in your State, 15% in your Network, and 15% nationally.



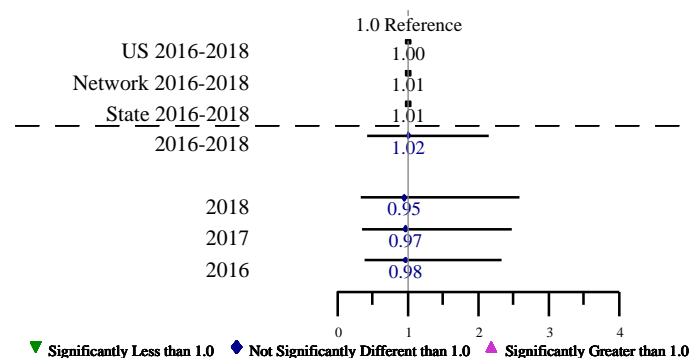
Standardized Mortality Ratio (SMR) (Table 3):

- At this facility, the 2016-2019 SMR is 1.01, which is 20% more deaths than expected at this facility. Among all U.S. facilities, 51% of facilities had a four-year SMR lower than 1.01. This difference is not statistically significant ($p \geq 0.05$), so this higher mortality could plausibly be just a chance occurrence. The 2016-2019 SMR of observed to expected deaths is 1.00 and 1.00 for your State and Network, respectively.
- At this facility, the 2016-2018 first-year SMR of observed to expected deaths is 1.02, which is 50% more deaths than expected at this facility. Among all U.S. facilities, 51% of facilities had a first-year SMR lower than 1.02. This difference is not statistically significant ($p \geq 0.05$), so this higher mortality could plausibly be just a chance occurrence. The first-year SMR (2016-2018) of observed to expected deaths is 1.01 and 1.01 for your State and Network, respectively.

2016-2019 SMR

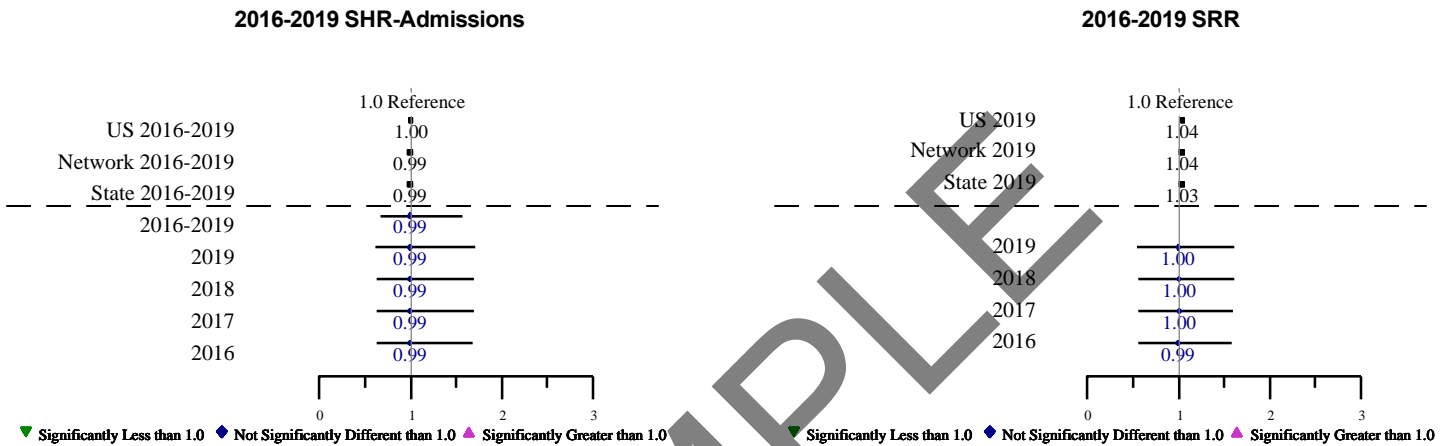


2016-2018 First-Year SMR



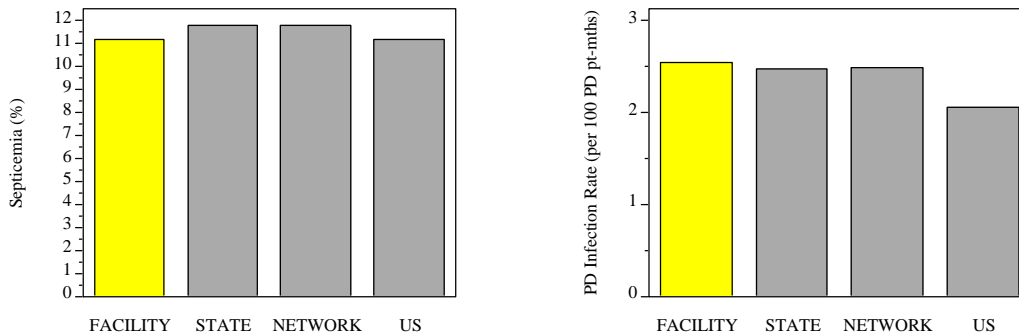
Hospitalizations and Readmissions (Table 4):

- The 2016-2019 Standardized Hospitalization Ratio (SHR-Admissions) at this facility is 0.99, which is 17% 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 2016-2019 SHR (Admissions) for your State and Network is 0.99 and 0.99, respectively.
- The 2019 Standardized Readmission Ratio (SRR) at this facility is 1.00, which is equivalent to the national reference value. The 2019 SRR for your State and Network is 1.03 and 1.04, respectively.



Infection (Tables 4 and 11):

- The percentage of Medicare dialysis patients at this facility hospitalized with septicemia during 2016-2019 is 11%, compared to 12% in your State, 12% in your Network, and 11% nationally.
- The 2019 rate of PD catheter-related infection was 2.6 per 100 PD patient-months, compared to 2.5 in your State, 2.5 in your Network, and 2.1 nationally.

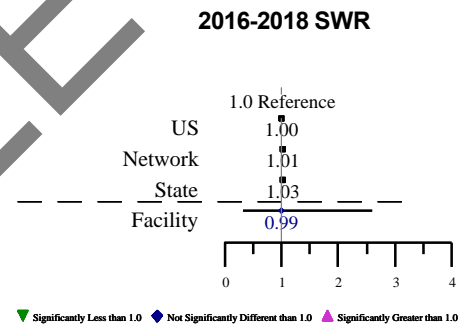
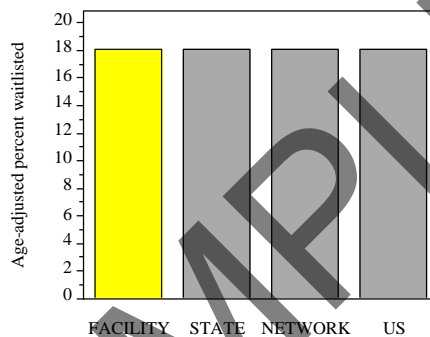
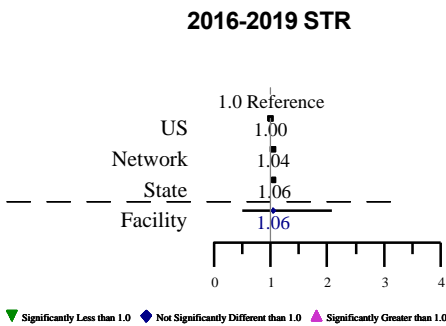


Transplantation (Table 5):

- The 2016-2019 Standardized 1st Transplantation Ratio (STR) of observed to expected number of patients transplanted for this facility is 1.06, which is 52% higher than expected for this facility. This difference is not statistically significant ($p \geq 0.05$) and is plausibly due to random chance. The 2016-2019 STR for your State and Network is 1.06 and 1.04, respectively.

Transplant Waitlist (Table 6):

- The 2019 age-adjusted percent waitlisted at this facility is 18.1%, which equal to the national adjusted percentage. The age-adjusted percent waitlisted in your State and Network is 18.1% and 18.1%, respectively.
- At this facility, the 2016-2018 Standardized Waitlist Ratio (SWR) is 0.99, which is 61% fewer patients on the waitlist and living donor transplants than expected at this facility. This difference is not statistically significant ($p \geq 0.05$) and could plausibly be due to a chance occurrence. The 2016-2018 SWR for your State and Network is 1.03 and 1.01, respectively.

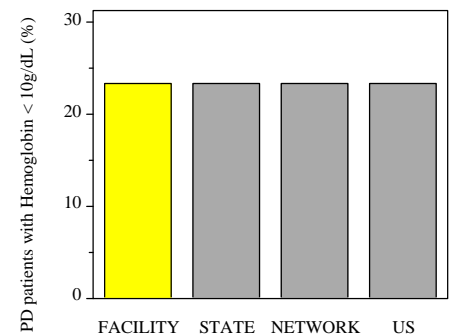
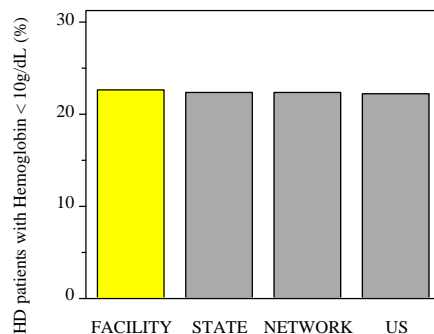
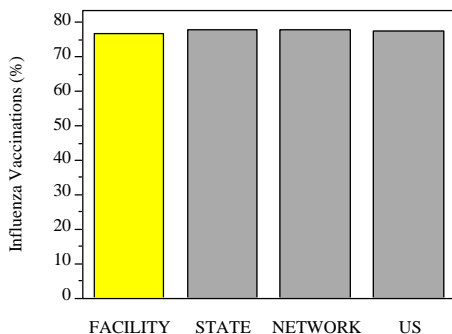


Influenza Vaccination (Table 7):

- Among the 38 Medicare dialysis patients treated at this facility on December 31, 2019, 77% were vaccinated between August 1 and December 31, 2019 compared to 78% 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 and Network is 78% and 78%, respectively.

Anemia Management (Table 8):

- In 2019, 23% of eligible hemodialysis patient-months had a hemoglobin value below 10 g/dL, compared to 22% in your State, 22% in your Network, and 22% nationally.
- In 2019, 23% of eligible peritoneal dialysis patient-months had a hemoglobin value below 10 g/dL, compared to 23% in your State, 23% in your Network, and 23% nationally.



Dialysis Adequacy (Table 9):

- In 2019, 95% of eligible hemodialysis patient-months had a Kt/V ≥ 1.2 reported, compared to 97% in your State, 97% in your Network, and 97% nationally.
- In 2019, 88% of eligible peritoneal dialysis patient-months had a Kt/V ≥ 1.7 reported, compared to 91% in your State, 91% in your Network, and 91% nationally.

Mineral Metabolism (Table 10):

- In 2019, 14% of eligible patient-months had a serum phosphorus value >7.0 mg/dL, compared to 14% in your State, 14% in your Network, and 14% nationally.
- In 2019, 1.3% of eligible patient-months had calcium uncorrected value >10.2 mg/dL, compared to 1.2% in your State, 1.2% in your Network, and 1.2% nationally.

Vascular Access (Table 11):

- This facility's 2019 Standardized Fistula Rate (SFR) for prevalent patients is 63%, which is 0% higher than the national SFR. This difference is not statistically significant ($p \geq 0.05$) and could plausibly be due to a chance occurrence. The SFR in your State and Network is 63% and 63%, respectively.
- Of the prevalent patients receiving hemodialysis treatment at this facility in 2019, the long-term catheter rate was 14%, compared to 13% in your State, 13% in your Network, and 13% nationally.

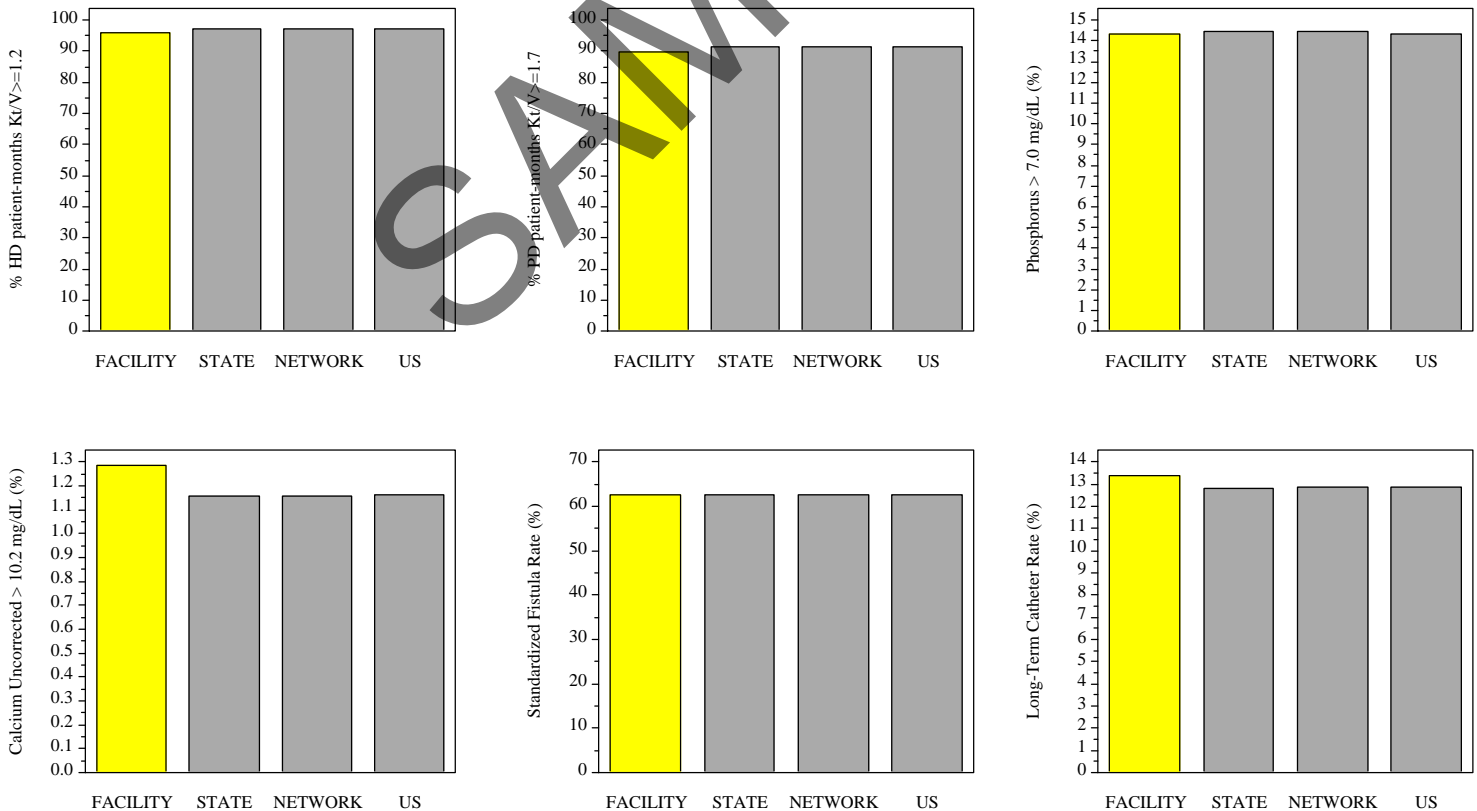


TABLE 1: Summaries for All Dialysis Patients Treated as of December 31st of Each Year^{*1}, 2016-2019

Measure Name	This Facility				Regional Averages ^{*2} , 2019		
	2016	2017	2018	2019	State	Network	U.S.
1a Patients treated on 12/31 (n)	58	60	61	62	63.0	63.0	63.1
1b Average age (years)	61.7	61.9	62.2	62.5	62.6	62.6	62.7
1c Age (% of 1a; sums to 100%)							
< 18	0.8	0.8	0.7	0.7	0.2	0.2	0.2
18-64	53.1	52.5	51.5	50.5	51.4	51.5	51.4
65+	46.1	46.7	47.7	48.8	48.4	48.3	48.4
1d Female (% of 1a)	43.2	42.8	42.6	42.4	42.7	42.7	42.6
1e Race (% of 1a; sums to 100%) ^{*3}							
African American	32.6	32.6	32.6	32.7	35.4	35.6	34.2
Asian/Pacific Islander	4.6	4.8	4.8	5.0	5.0	5.2	6.3
Native American	1.4	1.3	1.3	1.3	1.3	1.2	1.2
White	61.1	61.0	60.9	60.6	57.9	57.5	57.8
Other/Unknown/Missing	0.3	0.3	0.3	0.4	0.4	0.4	0.4
1f Ethnicity (% of 1a; sums to 100%)							
Hispanic	15.4	15.6	15.6	15.8	16.4	16.5	18.8
Non-Hispanic	84.3	84.1	84.1	83.7	83.2	83.0	80.7
Unknown	0.3	0.3	0.4	0.5	0.4	0.4	0.4
1g Primary Cause of ESRD (% of 1a; sums to 100%)							
Diabetes	45.0	45.2	45.5	45.5	45.9	46.0	46.6
Hypertension	29.2	29.5	29.8	29.7	30.3	30.3	30.0
Glomerulonephritis	10.9	10.6	10.4	10.0	10.0	10.0	9.9
Other/Unknown	14.3	14.0	13.8	14.0	13.1	13.0	12.8
Missing	0.5	0.6	0.6	0.8	0.7	0.7	0.7
1h Average duration of ESRD (years)	4.7	4.8	4.8	4.9	5.0	5.0	5.0
1i Years since start of ESRD (% of 1a; sums to 100%)							
< 1	17.7	17.3	16.9	16.9	15.8	15.8	15.6
1-2	18.1	17.9	17.6	17.3	16.9	16.9	16.8
2-3	13.8	14.0	14.0	13.8	13.7	13.7	13.6
3-6	25.0	25.3	25.8	25.9	26.5	26.5	26.6
6+	25.4	25.5	25.7	26.0	27.2	27.2	27.3
1j Nursing home patients (% of 1a) ^{*4}	15.5	15.6	15.7	15.5	15.2	15.1	14.8
1k Modality (% of 1a; sums to 100%)							
In-center hemodialysis	86.3	86.1	85.9	85.5	86.0	86.1	86.3
Home hemodialysis	2.1	2.2	2.2	2.3	2.4	2.4	2.2
Continuous ambulatory peritoneal dialysis	1.8	1.6	1.5	1.5	1.4	1.4	1.4
Continuous cycling peritoneal dialysis	9.5	9.8	10.1	10.3	9.9	9.9	9.8
Other modality ^{*5}	0.3	0.3	0.3	0.3	0.3	0.3	0.3

n/a = not applicable

[*1] See *Guide, Section IV*.

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

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

[*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).

TABLE 2: Characteristics of New Dialysis Patients^{*1}, 2016-2019 (Form CMS-2728)

Measure Name	This Facility				Regional Averages ^{*2} , 2019			
	2016	2017	2018	2019	State	Network	U.S.	
Patient Characteristics								
2a	Total number of patients with forms (n)	15	15	15	15	15.6	15.6	15.6
2b	Average age (years [0-95]) ^{*3}	63.1	63.1	63.5	63.5	63.8	63.8	63.9
2c	Female (% of 2a)	42.6	42.1	41.9	41.5	42.0	42.0	41.8
2d	Race (% of 2a; sums to 100%) ^{*4}							
	African-American	26.3	26.7	26.5	27.3	27.7	27.5	26.6
	Asian/Pacific Islander	4.5	4.7	4.9	5.1	5.0	5.2	5.9
	Native American	1.2	1.2	1.3	1.3	1.1	1.1	1.1
	White	67.6	67.1	67.1	66.0	65.9	65.9	66.1
	Other/Unknown	0.3	0.3	0.3	0.3	0.3	0.3	0.3
2e	Hispanic (% of 2a)	13.6	13.6	13.7	14.2	14.4	14.5	16.1
2f	Primary cause of ESRD (% of 2a; sums to 100%)							
	Diabetes	48.3	48.1	47.8	47.4	48.3	48.4	48.7
	Hypertension	29.2	30.2	30.1	29.2	29.6	29.6	29.4
	Primary glomerulonephritis	7.5	7.2	7.0	6.6	6.5	6.5	6.5
	Other/Unknown	14.9	14.6	15.2	16.7	15.7	15.6	15.5
2g	Medical coverage (% of 2a; sums to 100%)							
	Employer group only	12.5	12.8	12.1	12.2	12.3	12.3	12.2
	Medicare only	33.4	34.0	35.4	35.2	35.0	35.1	34.8
	Medicaid only	12.3	12.5	12.4	13.2	12.9	12.9	13.3
	Medicare and Medicaid only	12.3	12.3	12.1	11.7	12.0	12.0	12.2
	Medicare and other	17.8	17.1	16.3	15.9	16.0	16.0	15.7
	Other/Unknown	7.7	7.2	7.2	7.3	7.2	7.2	7.4
	None	3.9	4.2	4.4	4.5	4.5	4.5	4.3
2h	Median body mass index ^{*5} (Median; Weight/Height ²)							
	Male	28.4	28.5	28.6	28.5	28.2	28.2	28.1
	Female	29.9	29.9	29.8	29.8	29.2	29.2	29.1
2i	Employment ^{*6}							
	Six months prior to ESRD treatment	33.6	34.5	34.9	35.9	36.4	36.3	36.5
	At first ESRD treatment	23.6	24.9	25.1	24.7	25.7	25.6	25.6
2j	Primary modality (% of 2a; sums to 100%)							
	Hemodialysis	89.0	88.7	88.3	88.1	87.8	87.9	87.9
	CAPD/CCPD	11.0	11.3	11.7	11.9	12.2	12.1	12.1
	Other/Unknown	0.0	0.0	0.0	0.0	0.0	0.0	0.0
2k	Number of incident hemodialysis patients (n)	14	13	13	13	13.7	13.7	13.7
2l	Access used at first outpatient dialysis (% of 2k; sums to 100%)							
	Arteriovenous fistula	17.2	17.5	16.7	15.5	14.8	14.8	14.8
	Arteriovenous graft	3.2	3.2	3.3	3.1	3.1	3.1	3.0
	Catheter	79.4	79.2	79.8	81.0	81.8	81.8	81.8
	Other/Unknown/Missing	0.2	0.2	0.2	0.4	0.3	0.3	0.3
2m	Arteriovenous fistula placed (% of 2k)	34.1	33.2	31.1	28.6	27.6	27.5	27.8

(continued)

TABLE 2 (cont.): Characteristics of New Dialysis Patients^{*1}, 2016-2019 (Form CMS-2728)

Measure Name	This Facility				Regional Averages ^{*2} , 2019		
	2016	2017	2018	2019	State	Network	U.S.
Average Lab Values Prior to Dialysis^{*3}							
2n Hemoglobin (g/dL [5-20])	9.3	9.3	9.4	9.3	9.3	9.3	9.3
2o Serum albumin (g/dL [0.8-6.0])	3.2	3.2	3.2	3.3	3.3	3.3	3.3
2p Serum creatinine (mg/dL [0-33])	6.4	6.4	6.4	6.4	6.3	6.3	6.4
2q GFR (mL/min [0-30])	10.8	10.8	10.8	10.8	10.9	10.8	10.8
Care Prior to ESRD Therapy							
2r Received ESA prior to ESRD (% of 2a)	13.2	13.5	14.9	16.1	15.9	15.9	16.1
2s Pre-ESRD nephrologist care (% of 2a; sums to 100%) ^{*7}							
No	21.0	19.5	17.8	16.4	16.1	16.1	16.4
Yes, < 6 months	14.0	14.7	15.6	17.1	16.7	16.7	16.7
Yes, 6-12 months	19.5	20.4	20.5	20.6	20.4	20.5	20.4
Yes, > 12 months	30.8	31.5	32.5	32.0	32.6	32.6	32.3
Unknown/Missing	14.7	13.9	13.6	13.8	14.1	14.1	14.2
2t Informed of transplant options (% of 2a)	87.8	88.7	88.3	84.4	84.0	83.9	84.0
2u Patients not informed of transplant options (n)	2	2	2	2	2.5	2.5	2.5
2v Reason not informed (% of 2u; may not sum to 100%) ^{*8}							
Medically unfit	39.3	37.9	28.2	18.3	16.7	16.4	17.4
Unsuitable due to age	28.1	29.0	22.4	15.4	13.0	12.6	13.2
Psychologically unfit	4.7	4.8	3.5	2.2	1.5	1.5	1.5
Patient declined information	2.7	2.7	2.0	1.6	1.1	1.1	1.1
Patient has not been assessed	29.8	30.1	48.4	64.9	70.7	71.2	69.9
Comorbid Conditions							
2w Pre-existing comorbidity (% yes of 2a) ^{*9}							
Congestive heart failure	28.2	28.3	28.6	29.0	29.6	29.8	29.6
Atherosclerotic heart disease ^{*9}	13.1	12.7	12.1	12.3	12.8	13.0	13.1
Other cardiac disorder ^{*9}	19.7	19.9	20.6	21.5	21.8	21.8	21.6
CVD, CVA, TIA	8.5	8.4	8.7	9.1	9.2	9.2	9.1
Peripheral vascular disease	9.7	9.1	8.9	9.2	9.4	9.5	9.5
History of hypertension	87.1	87.4	88.0	87.8	88.7	88.7	88.7
Diabetes ^{*9}	63.0	63.4	64.0	64.4	65.0	65.1	65.1
Diabetes on insulin	41.9	42.3	42.6	43.5	44.3	44.5	44.2
COPD	9.6	9.4	9.6	9.7	9.7	9.8	9.5
Current smoker	6.9	6.9	7.4	7.4	7.3	7.4	7.1
Cancer	6.9	6.8	7.2	7.3	7.5	7.5	7.4
Alcohol dependence	1.6	1.6	1.7	1.8	1.8	1.8	1.8
Drug dependence	1.3	1.3	1.4	1.6	1.6	1.6	1.6
Inability to ambulate	6.7	7.0	7.1	7.1	6.9	7.0	7.0
Inability to transfer	3.6	3.5	3.7	3.7	3.6	3.6	3.7
2x Average number of comorbid conditions	3.1	3.1	3.1	3.2	3.2	3.2	3.2

n/a= not applicable

[*1] See *Guide, Section V*.

[*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 Arab.

[*5] The median BMI is computed for adult patients at least 20 years old with height, weight, and BMI values in acceptable ranges. Acceptable range for height, weight, and BMI are 122-208 cm, 32-318 kg, and 10-55, respectively.

[*6] Full-time, part-time, or student (% of 18-60 year olds).

[*7] Values may not sum to exactly 100% because of patients that received nephrology care but duration unknown (0.003% in US in 2019).

[*8] Values may not sum to exactly 100% because of patients for which multiple reasons are selected, or when other or no reason is selected.

[*9] '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.

TABLE 3: Mortality Summary for All Dialysis Patients (2016-19) & New Dialysis Patients (2016-18) *1

Measure Name	This Facility					Regional Averages *2		
	2016	2017	2018	2019	2016-2019	State	Network	U.S.
All Patients: Death Counts						2016-2019		
3a Patients (n=number)	79	82	84	85	330 *8	83.0	83.0	92.0
3b Patient-years (PY) at risk (n)	57.7	59.0	60.1	61.2	237.9 *8	59.8	59.9	62.3
3c Deaths (n)	10	10	10	11	41 *8	10.4	10.4	10.9
3d Expected deaths (n)	11.4	11.4	11.1	10.9	41.9 *8	10.5	10.5	10.9
3e Withdrawal from dialysis prior to death (% of 3c)	26.6	27.0	27.2	27.6	26.9	27.2	27.1	26.2
3f Death due to Infections (% of 3c)	10.6	10.7	10.5	9.8	10.3	10.4	10.5	10.5
Death due to Cardiac causes (% of 3c)	44.4	45.3	45.9	46.6	45.5	46.0	46.1	45.6
Death due to Liver disease (% of 3c)	1.7	1.5	1.5	1.5	1.6	1.6	1.6	1.5
3g Dialysis unrelated deaths *3 (n; excluded from SMR)	0	0	0	0	0 *8	0.1	0.1	0.1
All Patients: Standardized Mortality Ratio (SMR)								
3h SMR *4	1.02	1.01	1.01	1.01	1.01	1.00	1.00	1.00
3i P-value *5	0.501	0.498	0.502	0.498	0.499	n/a	n/a	n/a
3j Confidence interval for SMR *6								
High (97.5% limit)	1.95	1.93	1.95	1.94	1.62	n/a	n/a	n/a
Low (2.5% limit)	0.48	0.49	0.48	0.48	0.62	n/a	n/a	n/a
3k SMR percentiles for this facility *7								
In this State	51	51	51	51	51	n/a	n/a	n/a
In this Network	51	51	51	51	51	n/a	n/a	n/a
In the U.S.	51	51	51	51	51	n/a	n/a	n/a
New Patients: First Year Death Counts								
	2016	2017	2018		2016-2018		2016-2018	
3l New patients (n=number)	15	15	15		45 *8	15.9	15.9	15.8
3m Patient-years (PY) at risk (n)	13.3	13.3	13.4		40.0 *8	14.1	14.1	14.0
3n Deaths (n)	3	3	3		8 *8	2.9	2.9	2.9
3o Expected deaths (n)	3.3	3.0	2.8		8.6 *8	2.8	2.8	2.8
3p Withdrawal from dialysis prior to death (% of 3n)	27.9	28.8	29.4		28.6	29.1	29.1	28.7
3q Death due to Infections (% of 3n)	9.1	10.0	9.4		9.5	9.5	9.6	9.7
Death due to Cardiac causes (% of 3n)	39.9	41.3	41.4		40.5	40.7	40.9	41.4
Death due to Liver disease (% of 3n)	2.7	2.6	2.5		2.6	2.6	2.6	2.6
New Patients: First Year Standardized Mortality Ratio (SMR)								
3r SMR *4	0.98	0.97	0.95		1.02	1.01	1.01	1.00
3s P-value *5	0.495	0.500	0.504		0.498	n/a	n/a	n/a
3t Confidence interval for SMR *6								
High (97.5% limit)	2.34	2.49	2.58		2.16	n/a	n/a	n/a
Low (2.5% limit)	0.39	0.35	0.33		0.43	n/a	n/a	n/a
3u First Year SMR percentiles for this facility *7								
In this State	50	50	50		51	n/a	n/a	n/a
In this Network	50	50	50		51	n/a	n/a	n/a
In the U.S.	50	50	50		51	n/a	n/a	n/a

n/a = not applicable

[*1] See Guide, Section VI.

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

[*3] Defined as deaths due to street drugs and accidents unrelated to treatment.

[*4] Calculated as a ratio of deaths to expected deaths (3c to 3d for all patients, 3n to 3o 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.

TABLE 4: Hospitalization Summary for Medicare Dialysis Patients^{*1}, 2016-2019

Measure Name	This Facility					Regional Averages ^{*2} , per Year, 2016-2019			
	2016	2017	2018	2019	2016-2019	State	Network	U.S.	
Medicare Dialysis Patients									
4a	Medicare dialysis patients (n)	61	62	63	63	249 ^{*3}	62.7	62.8	68.6
4b	Patient-years (PY) at risk (n)	40.1	40.3	40.4	40.1	160.9 ^{*3}	40.6	40.6	41.2
Days Hospitalized Statistics									
4c	Total days hospitalized (n)	530	541	546	542	2,158 ^{*3}	544.8	544.8	570.8
4d	Expected total days hospitalized (n)	627.4	614.5	595.7	576.9	2,242.2 ^{*3}	560.6	560.7	571.1
4e	Standardized Hospitalization Ratio (Days) ^{*4}	0.97	0.97	0.97	0.97	0.97	0.97	0.97	1.00
4f	P-value ^{*5}	0.500	0.499	0.505	0.502	0.494	n/a	n/a	n/a
4g	Confidence interval for SHR (Days) ^{*6}								
	High (97.5% limit)	2.02	1.98	2.00	1.99	1.80	n/a	n/a	n/a
	Low (2.5% limit)	0.55	0.56	0.55	0.55	0.62	n/a	n/a	n/a
4h	Percentiles for this facility (Days) ^{*7}								
	In this State	50	50	50	50	50	n/a	n/a	n/a
	In this Network	50	50	50	50	50	n/a	n/a	n/a
	In the U.S.	50	50	50	50	50	n/a	n/a	n/a
Admission Statistics									
4i	Total admissions (n)	72	74	75	75	298 ^{*3}	75.2	75.2	77.2
4j	Expected total admissions (n)	84.3	83.1	80.7	78.7	303.5 ^{*3}	75.9	75.9	77.2
4k	Standardized Hospitalization Ratio (Admissions)^{*4}	0.99	0.99	0.99	0.99	0.99	0.99	0.99	1.00
4l	P-value ^{*5}	0.500	0.502	0.501	0.503	0.498	n/a	n/a	n/a
4m	Confidence interval for SHR (Admissions) ^{*6}								
	High (97.5% limit)	1.69	1.69	1.69	1.70	1.57	n/a	n/a	n/a
	Low (2.5% limit)	0.62	0.62	0.62	0.62	0.67	n/a	n/a	n/a
4n	Percentiles for this facility (admissions) ^{*7}								
	In this State	50	50	50	50	50	n/a	n/a	n/a
	In this Network	50	50	50	50	50	n/a	n/a	n/a
	In the U.S.	50	50	50	50	50	n/a	n/a	n/a
4o	Diagnoses associated with hospitalization (% of 4a)^{*8}								
	Septicemia	11.0	11.2	11.5	11.3	11.1	11.8	11.8	11.2
	Acute myocardial infarction	4.6	5.0	5.4	5.7	5.2	5.4	5.4	5.1
	Congestive heart failure	24.5	25.5	26.2	26.2	25.5	26.7	26.7	25.1
	Cardiac dysrhythmia	16.7	17.0	17.4	17.5	17.0	17.7	17.7	16.6
	Cardiac arrest	2.1	2.3	2.2	2.1	2.2	2.3	2.3	2.2
4p	One day admissions (% of 4i)	9.8	9.9	9.7	9.7	9.8	9.6	9.6	9.6
4q	Average length of stay (days per admission; 4c/4i)	7.3	7.2	7.2	7.2	7.2	7.2	7.2	7.4

(continued)

TABLE 4 (cont.): Hospitalization Summary for Medicare Dialysis Patients^{*1}, 2016-2019

Measure Name	This Facility					Regional Averages ^{*2} , per Year, 2016-2019			
	2016	2017	2018	2019	2016-2019	State	Network	U.S.	
Emergency Department (ED) Statistics									
4r	Total ED visits (n)	117	120	119	118	473 ^{*3}	119.4	119.4	122.7
4s	Expected total ED visits (n)	137.4	134.0	127.4	123.2	484.5 ^{*3}	121.1	121.2	122.9
4t	Standardized Hospitalization Ratio (ED) ^{*4}	0.99	0.99	1.00	1.00	1.00	0.99	0.99	1.00
4u	P-value ^{*5}	0.495	0.497	0.497	0.499	0.495	n/a	n/a	n/a
4v	Confidence interval for SHR (ED) ^{*6}								
	High (97.5% limit)	1.70	1.71	1.68	1.71	1.62	n/a	n/a	n/a
	Low (2.5% limit)	0.62	0.62	0.63	0.62	0.66	n/a	n/a	n/a
4w	Percentiles for this facility (ED) ^{*7}								
	In this State	50	50	50	50	50	n/a	n/a	n/a
	In this Network	50	50	50	50	50	n/a	n/a	n/a
	In the U.S.	50	50	50	50	50	n/a	n/a	n/a
4x	Patients with ED visit (% of 4a)	56.8	56.2	55.7	55.2	55.5	57.2	57.2	54.1
4y	ED visits that result in hospitalization (% of 4r)	42.2	42.4	42.9	43.0	42.6	42.7	42.8	42.9
4z	Admissions that originate in the ED (% of 4i)	66.5	66.2	65.9	65.3	66.1	67.9	68.0	68.1
Readmission Statistics									
									2019
4aa	Index discharges (n)	69	71	70	68		70.8	70.8	70.8
4ab	Total readmissions (n)	19	19	19	18		19.1	19.1	19.1
4ac	Expected total readmissions (n)	22	22	21	20		19.5	19.5	19.5
4ad	Standardized Readmission Ratio (SRR)^{*4}	0.99	1.00	1.00	1.00		1.03	1.04	1.04
4ae	P-value ^{*5}	0.500	0.499	0.501	0.496		n/a	n/a	n/a
4af	Confidence interval for SRR ^{*6}								
	High (97.5% limit)	1.58	1.60	1.61	1.61		n/a	n/a	n/a
	Low (2.5% limit)	0.56	0.56	0.55	0.55		n/a	n/a	n/a

n/a = not applicable.

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

[*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 Ratios are calculated as a ratio of actual to expected events (4c/4d for days, 4i/4j for admissions, 4r/4s for ED visits, and 4ab/4ac for readmissions). SHRs are not shown if there are less than 5 patient years at risk. SRR is not shown if fewer than 11 index discharges in the year.

[*5] A p-value less than 0.05 indicates that the difference between the actual and expected 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 and readmission ratios (SHRs and SRR) due to random variation.

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

[*8] Includes diagnoses in any position on a hospital inpatient claim.

TABLE 5: Transplantation Summary for Dialysis Patients under Age 75^{*1}, 2016-2019

Measure Name	This Facility					Regional Averages ^{*2} , per Year, 2016-2019			
	2016	2017	2018	2019	2016-2019	State	Network	U.S.	
All Transplants									
5a	Eligible patients (n)	63	65	66	67	262 ^{*10}	66.0	66.0	73.1
5b	Transplants (n)	2	2	2	2	8 ^{*10}	2.1	2.1	2.1
5c	Donor type (sums to 5b) ^{*3}								
	Living donor (n)	0	0	0	1	2 ^{*10}	0.5	0.5	0.5
	Deceased donor (n)	2	2	2	2	7 ^{*10}	1.7	1.7	1.7
First Transplants									
5d	Eligible patients (n)	59	61	62	63	244 ^{*10}	61.4	61.4	67.7
5e	Patient years (PY) at risk (n)	42.9	43.9	44.6	45.1	176.4 ^{*10}	44.4	44.4	46.1
5f	First transplants ^{*4} (n)	2	2	2	2	7 ^{*10}	1.9	1.9	1.9
5g	Expected first transplants (n)	1.8	1.8	1.9	2.0	7.2 ^{*10}	1.8	1.8	1.8
Standardized 1st Transplantation Ratio (STR)^{*5}									
5h	STR ^{*6}					1.06	1.06	1.04	1.00
5i	P-value ^{*7}					0.394	n/a	n/a	n/a
5j	Confidence interval for STR ^{*8}								
	High (97.5% limit)					2.09	n/a	n/a	n/a
	Low (2.5% limit)					0.49	n/a	n/a	n/a
5k	STR percentiles for this facility ^{*9}								
	In this State					52	n/a	n/a	n/a
	In this Network					52	n/a	n/a	n/a
	In the U.S.					51	n/a	n/a	n/a

n/a = not applicable.

[*1] See *Guide, Section VIII*.

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

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

[*4] Among first transplants that occurred after the start of dialysis from 2016-2019, 3.3% of transplants in the U.S. were not included because the transplant occurred fewer than 91 days after the start of ESRD and 1.1% 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 is calculated as a ratio of actual (5f) to expected (5g) 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.

TABLE 6: Waitlist Summary for All Dialysis Patients (2016-2019) & New Dialysis Patients (2016-2018) under Age 75^{*1}

Measure Name	This Facility				Regional Averages ^{*2} , 2019		
	2016	2017	2018	2019	State	Network	U.S.
All Dialysis Patients							
6a Eligible patients (n)	63	65	66	67	67.8	67.8	67.8
6b Patient-months at risk (n) ^{*3}	540	551	559	565	567.1	567.5	567.3
6c Patient-months on the waitlist (% of 6b)^{*3}	20.7	19.5	18.6	18.0	18.2	18.0	18.6
6d Patient-months on the waitlist by subgroup (%) ^{*3 *4}							
Age < 40	30.7	28.9	27.7	27.1	28.4	28.2	28.9
Age 40-74	19.4	18.3	17.4	16.9	17.1	16.9	17.4
Male	21.8	20.6	19.8	19.1	19.4	19.2	19.8
Female	19.0	17.9	16.8	16.3	16.6	16.3	16.7
African American	21.2	19.9	18.7	18.2	17.6	17.6	17.5
Asian/Pacific Islander	29.6	28.0	27.1	25.9	27.9	27.1	27.5
Native American	16.2	16.8	16.4	15.1	15.3	14.7	11.9
White, Hispanic	22.4	21.1	20.3	20.2	19.4	19.3	20.2
White, non-Hispanic	19.6	18.3	17.6	17.3	17.6	17.5	17.4
Other/unknown race	25.6	23.5	22.5	23.0	22.2	21.7	22.7
Diabetes	16.8	15.8	15.0	14.6	14.7	14.4	15.0
Non-diabetes	23.7	22.6	21.5	20.7	21.3	21.1	21.6
Previous kidney transplant	35.4	32.9	31.4	30.0	31.4	31.3	31.8
No previous kidney transplant	19.4	18.4	17.5	17.0	17.2	16.9	17.5
< 2 years since start of ESRD	14.2	13.7	13.3	13.4	14.1	13.9	14.0
2-4 years since start of ESRD	26.1	24.3	23.2	22.5	22.7	22.4	23.1
5+ years since start of ESRD	23.5	21.7	20.3	19.0	18.3	18.1	19.1
6e Age-adjusted percentage of patient-months waitlisted^{*5}	20.9	19.6	18.7	18.1	18.1	18.1	18.1
6f P-value ^{*6}	0.466	0.468	0.473	0.483	n/a	n/a	n/a
6g Confidence interval for percent waitlisted ^{*7}							
High (97.5% limit)	47.3	46.1	45.5	45.0	n/a	n/a	n/a
Low (2.5% limit)	8.31	7.60	7.02	6.66	n/a	n/a	n/a
New Dialysis Patients							
	2016	2017	2018	2016-2018		2016-2018^{*2}	
6h Eligible patients (n)	10	10	10	29	10.4	10.4	10.3
6i Patient-years (PY) at risk (n)	9	9	9	26	9.2	9.2	9.2
6j First waitlist events (n) ^{*8}	1	1	1	3	1.0	1.0	1.0
6k Expected 1st waitlist events (n) ^{*8}	1.0	1.0	0.9	2.9	0.9	0.9	0.9
6l Standardized Waitlist Ratio (SWR) ^{*8 *9}				0.99	1.03	1.01	1.00
6m P-value ^{*6}				0.489	n/a	n/a	n/a
6n Confidence interval for SWR ^{*7}							
High (97.5% limit)				2.61	n/a	n/a	n/a
Low (2.5% limit)				0.33	n/a	n/a	n/a

n/a = not applicable.

[*1] See *Guide, Section IX*.

[*2] For "All Dialysis Patients" section, values are shown for the average facility. For "New Dialysis Patients" section, values are shown for the average facility, annualized.

[*3] Eligible patient-months (6b) include patients assigned to the facility on the last day of each month. A patient may be counted up to 12 times per year.

[*4] The waitlist percentage for each subgroup is calculated as a rate of waitlisted patient-months to patient-months at risk in each subgroup. A missing value indicates that there were no eligible patients in the subgroup.

[*5] Age-adjusted percentage of prevalent patients waitlisted is not shown if there are fewer than 11 eligible patients in this facility.

[*6] A p-value less than 0.05 indicates that the difference between the observed and expected waitlist events (SWR), or the difference between the age-adjusted percent waitlisted for your facility and the overall national percentage is probably real and is not due to random chance alone. 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 SWR or age-adjusted percent waitlisted due to random variation.

[*8] An event is defined as a waitlisting or living-donor transplant.

[*9] SWR is calculated as a ratio of observed waitlisted events to expected waitlisted events (6j/6k); not shown if a facility has less than 2 expected waitlisted events or less than 11 eligible patients.

TABLE 7: Influenza Vaccination Summary for Medicare Dialysis Patients Treated on December 31st of Each Year^{*1}, Flu Seasons August 2016-December 2019

Measure Name	This Facility				Regional Averages ^{*2}		
	2016	2017	2018	2019	State	Network	U.S.
							2019
7a Eligible patients on 12/31 (n)	39	39	38	38	38.5	38.5	38.5
7b Patients vaccinated between Aug. 1 and Dec. 31 (% of 7a)	72.8	76.8	77.3	76.8	77.8	77.8	77.6
7c P-value ^{*3} (for 7b compared to U.S. value ^{*4})	0.176	0.221	0.226	0.214	n/a	n/a	n/a
							2018
7d Patients vaccinated between Aug 1 and Mar 31 of following year (% of 7a)	73.8	77.8	78.0		79.0	79.1	79.0
7e P-value ^{*3} (for 7d compared to U.S. value ^{*5})	0.180	0.227	0.231		n/a	n/a	n/a
							2019
7f Patients vaccinated between Aug 1 and Dec 31 by subgroup (%) ^{*6}							
Age < 18	58.2	62.3	58.7	54.9	55.8	55.8	57.4
Age 18-39	66.3	70.2	70.1	70.5	70.2	70.4	70.6
Age 40-64	70.9	75.0	75.7	75.0	75.9	75.9	75.9
Age 65-74	74.8	79.1	79.4	78.9	79.6	79.6	79.3
Age 75+	77.8	81.7	82.0	80.7	81.6	81.6	81.1
Male	72.7	76.7	76.9	76.5	77.6	77.6	77.4
Female	73.5	77.6	78.1	77.4	78.1	78.1	77.9
African American	69.9	74.1	74.6	73.9	73.3	73.2	74.4
Asian/Pacific Islander	76.0	80.6	81.2	80.4	81.2	81.0	78.8
Native American	75.2	80.0	78.9	77.1	74.9	76.5	78.8
White	74.0	77.7	78.2	77.9	79.7	79.8	79.5
Other/unknown race	70.8	73.0	76.0	74.5	76.6	75.5	74.0
Hispanic	74.6	78.4	79.5	78.9	80.4	80.7	79.5
< 1 year since start of ESRD	64.6	67.7	66.1	63.8	64.2	64.2	64.0
1-2 years since start of ESRD	72.7	76.4	76.8	76.2	76.8	76.9	76.7
3+ years since start of ESRD	75.4	80.0	80.5	80.3	81.2	81.2	81.0

n/a = not applicable

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

[*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): 73.6% (2016), 77.9% (2017), 78.3% (2018), 77.6% (2019).

[*5] Compared to the U.S. value for that year and time period (8/1-3/31): 74.4% (2016), 78.8% (2017), 79.0% (2018).

[*6] A missing value indicates that there were no eligible patients in the subgroup.

TABLE 8: Anemia Management Summaries for Adult Dialysis Patients^{*1}, 2016-2019

Measure Name	This Facility				Regional Averages ^{*2} , 2019		
	2016	2017	2018	2019	State	Network	U.S.
Hemoglobin and ESA for Adult Hemodialysis (HD) Patients							
8a Eligible patients (n)	68	70	71	72	75.3	75.3	75.3
8b Eligible patient-months (n) ^{*3}	598	612	622	629	659.2	659.3	659.0
8c Average hemoglobin ^{*4} (g/dL) (average of 8b)	10.8	10.8	10.7	10.7	10.7	10.7	10.7
8d Hemoglobin categories (% of 8b; sums to 100%)							
<10 g/dL	20.8	20.6	21.8	22.7	22.4	22.5	22.3
10-<11 g/dL	33.0	33.0	33.7	34.2	35.0	35.0	35.1
11-12 g/dL	28.7	29.0	28.6	28.3	28.9	28.9	29.0
>12 g/dL	11.9	12.6	12.0	11.8	11.8	11.8	11.7
Missing/Out of range	5.6	4.8	3.9	3.0	1.8	1.8	1.9
8e ESA prescribed (% of 8b)	74.1	73.4	72.9	74.5	75.4	75.4	75.2
Hemoglobin and ESA for Adult Peritoneal Dialysis (PD) Patients							
8f Eligible patients (n)	8	9	9	10	22.5	22.3	22.1
8g Eligible patient-months (n) ^{*3}	66	68	71	75	175.8	174.5	172.7
8h Average hemoglobin ^{*4} (g/dL) (average of 8g)	10.9	10.9	10.9	10.9	10.9	10.9	10.9
8i Hemoglobin categories (% of 8g; sums to 100%)							
<10 g/dL	22.3	21.9	22.9	23.4	23.4	23.4	23.4
10-<11 g/dL	27.5	27.6	28.3	28.5	29.2	29.2	29.4
11-12 g/dL	24.4	25.6	25.2	25.6	26.0	26.0	26.0
>12 g/dL	18.2	18.9	18.2	18.2	18.1	18.2	18.0
Missing/Out of range	7.6	5.9	5.4	4.3	3.2	3.2	3.2
8j ESA prescribed (% of 8g)	55.2	55.4	55.3	55.4	56.3	56.1	56.1
Standardized Transfusion Ratio (STrR)							
8k Eligible adult Medicare patients (n)	45	46	46	46	47.2	47.2	47.2
8l Patient years (PY) at risk (n)	29	29	29	29	29.9	29.9	30.0
8m Total transfusions (n)	10	10	9	9	9.3	9.3	9.3
8n Expected total transfusions (n)	12.0	11.0	10.3	9.5	9.5	9.5	9.5
8o Standardized Transfusion Ratio ^{*5}	0.99	0.99	0.99	0.99	0.98	0.98	1.01
Upper Confidence Limit (97.5%)	3.11	3.15	3.14	3.29	n/a	n/a	n/a
Lower Confidence Limit (2.5%)	0.43	0.43	0.43	0.42	n/a	n/a	n/a
8p P-value ^{*6}	0.499	0.500	0.496	0.500	n/a	n/a	n/a

n/a = not applicable

[*1] See *Guide, Section XI*. Transfusion summaries include adult Medicare Dialysis Patients only.

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

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

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

[*5] Calculated as a ratio of observed to expected transfusions (8m to 8n); not shown if there are fewer than 10 patient-years at risk (8l). The confidence interval range represents uncertainty in the value of the STrR due to random variation.

[*6] 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.

TABLE 9: Dialysis Adequacy Summaries for Adult Dialysis Patients*1, 2016-2019

Measure Name	This Facility				Regional Averages*2, 2019		
	2016	2017	2018	2019	State	Network	U.S.
Hemodialysis (HD) Adequacy							
9a Eligible adult HD patients (n)	68	70	71	72	75.3	75.3	75.3
9b Eligible adult HD patient-months (n)*3	598	612	622	629	659.2	659.3	659.0
9c Average serum albumin (g/dL) (average of 9b)	3.8	3.7	3.8	4.4	4.7	4.7	4.7
9d Serum albumin categories (% of 9b; sums to 100%)							
< 3.0 g/dL	3.7	3.7	3.3	2.6	2.6	2.6	2.6
3.0-<3.5 g/dL	14.0	14.3	12.7	10.2	10.3	10.3	10.3
3.5-<4.0 g/dL	45.6	46.5	45.0	41.9	42.8	42.8	42.7
>=4.0 g/dL	30.1	30.0	34.2	41.2	41.5	41.5	41.7
Missing	6.6	5.6	4.8	4.0	2.8	2.8	2.8
9e Serum albumin<4.0 g/dl(% of 9b)	63.3	64.4	61.0	54.7	55.8	55.7	55.5
9f Ultrafiltration rate average*4 (ml/kg/hr) (average of 9b)	7.8	7.7	7.6	7.5	7.6	7.6	7.6
9g Ultrafiltration rate categories (% of 9b; sums to 100%)							
<=13 ml/kg/hr	78.7	80.6	82.6	83.8	85.1	85.2	85.1
>13 ml/kg/hr	9.5	8.8	8.0	7.4	7.7	7.7	7.8
Missing/Out of range	11.8	10.6	9.5	8.8	7.2	7.1	7.1
9h Eligible adult HD Kt/V patients (n)*5	63	65	67	68	72.1	72.1	72.1
9i Eligible adult HD Kt/V patient-months (n)*3*5	549	565	573	569	606.9	607.2	607.0
9j Average Kt/V*4 (average of 9i)	1.6	1.6	1.6	1.6	1.6	1.6	1.6
9k Kt/V categories (% of 9i; sums to 100%)							
<1.2	3.4	3.6	3.0	2.6	1.6	1.6	1.6
1.2-<1.8	68.9	69.7	70.7	69.3	70.7	70.7	70.7
>=1.8	23.3	23.0	23.7	26.2	26.4	26.4	26.4
Missing/Out of range	4.4	3.7	2.7	1.9	1.3	1.3	1.3
Peritoneal Dialysis (PD) Adequacy							
9l Eligible adult PD patients (n)	8	9	9	10	22.5	22.3	22.1
9m Eligible adult PD patient-months (n)*3	66	68	71	75	175.8	174.5	172.7
9n Average weekly Kt/V*4*5 (average of 9m)	2.3	2.3	2.3	2.2	2.2	2.2	2.2
9o Weekly Kt/V categories (% of 9m; sums to 100%)*5							
<1.7	6.3	6.1	5.6	5.8	5.0	5.0	5.0
1.7-<2.5	59.3	62.0	63.0	64.6	67.8	67.8	67.9
>=2.5	25.5	24.7	25.0	23.8	23.6	23.6	23.4
Missing/Out of range	8.9	7.3	6.4	5.8	3.6	3.6	3.7
9p Average serum albumin (g/dL) (average of 9m)	3.5	3.5	3.5	3.6	3.6	3.6	3.6
9q Serum albumin categories (% of 9m; sums to 100%)							
< 3.0 g/dL	11.2	11.4	10.2	7.7	7.8	7.7	7.6
3.0-<3.5 g/dL	30.1	30.4	28.8	24.5	25.0	25.1	25.1
3.5-<4.0 g/dL	38.0	39.4	40.4	42.0	42.9	42.9	43.0
>=4.0 g/dL	12.8	12.8	15.2	21.6	21.1	21.1	21.2
Missing	7.9	6.0	5.4	4.3	3.2	3.2	3.2
9r Serum albumin <4.0 g/dL(% of 9m)	79.3	81.2	79.4	74.1	75.6	75.7	75.7

n/a = not applicable.

[*1] See Guide, Section XII. Unless otherwise noted, all summaries are based on data reported in CROWNWeb and the patient must be on HD (or PD) for the entire reporting month to be included in patient counts and summaries.

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

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

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

[*5] Kt/V summaries are supplemented with Medicare claims if missing in CROWNWeb. HD Kt/V summaries are restricted to patients who dialyze thrice weekly. See section of Guide titled "Determination of Thrice Weekly Dialysis" for more information. The most recent value over a 4-month period is selected for PD Kt/V.

TABLE 10: Mineral Metabolism Summaries for All Adult Dialysis Patients ^{*1}, 2016-2019

Measure Name	This Facility				Regional Averages ^{*2} , 2019		
	2016	2017	2018	2019	State	Network	U.S.
10a Eligible adult patients (n) ^{*3}	75	77	79	81	82.5	82.5	82.5
10b Eligible adult patient-months (n) ^{*3 *4}	666	681	694	705	722.1	722.2	722.7
10c Average phosphorus ^{*5} (mg/dL) (average of 10b ^{*6})	5.3	5.3	5.3	5.4	5.4	5.4	5.4
10d Phosphorus categories (% of 10b; sums to 100%) ^{*6}							
<3.5 mg/dL	8.3	8.3	7.9	7.5	7.7	7.7	7.7
3.5-4.5 mg/dL	24.3	24.3	23.8	23.1	23.4	23.4	23.5
4.6-5.5 mg/dL	28.8	29.2	29.5	29.7	30.0	30.0	30.1
5.6-7.0 mg/dL	20.0	20.2	20.8	21.5	21.8	21.9	21.8
>7.0 mg/dL	11.9	12.3	13.1	14.3	14.4	14.4	14.3
Missing/Out of range	6.7	5.6	4.8	3.8	2.6	2.6	2.6
10e Average calcium uncorrected ^{*5} (mg/dL) (average of 10b)	8.9	8.9	8.9	8.9	8.9	8.9	8.9
10f Calcium uncorrected categories (% of 10b; sums to 100%)							
<8.4 mg/dL	16.9	16.3	16.9	19.0	19.3	19.3	19.2
8.4-10.2 mg/dL	74.6	76.9	77.2	76.2	77.2	77.2	77.3
>10.2 mg/dL	1.6	1.4	1.4	1.3	1.2	1.2	1.2
Missing/Out of range	6.9	5.4	4.5	3.5	2.3	2.3	2.3
10g Average uncorrected serum or plasma calcium > 10.2 mg/dL ^{*5 *7}	4.8	3.7	3.2	2.5	1.7	1.7	1.7

[*1] See *Guide, Section XIII*. Summaries are based on data reported in CROWNWeb and the patient must be assigned to the facility the entire month to be included.
 [*2] Values are shown for the average facility.
 [*3] Includes patients on ESRD more than 90 days 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] The acceptable range for phosphorus and calcium is 0.1 – 20 mg/dL. Values outside of this range are considered missing, which are counted towards the numerator.
 [*6] Eligible patients included in the phosphorus summaries differ slightly from what is reported in 10b since it includes patient-months within the first 90 days of ESRD.
 [*7] Hypercalcemia is averaged from uncorrected serum or plasma calcium values over a rolling 3-month period. Eligible patients included in the hypercalcemia summary differs slightly from what is reported in 10b since patients must be 18 as of the first day of the 3-month period.

TABLE 11: Vascular Access Information for All Dialysis Patients and Access-Related Infection Summaries for All Medicare Patients^{*1}, 2016-2019

Measure Name	This Facility				Regional Averages ^{*2} , 2019			
	2016	2017	2018	2019	State	Network	U.S.	
Vascular Access								
11a	Prevalent adult hemodialysis patients (n)	72	74	75	76	79.5	79.5	79.5
11b	Prevalent adult hemodialysis patient-months(n) ^{*3 *4}	625	639	648	655	686.2	686.6	686.3
11c	Vascular access type in use (% of 11b; sums to 100%)							
	Arteriovenous fistula	60.6	61.0	61.3	61.4	62.6	62.6	62.9
	Arteriovenous graft	16.5	16.8	16.8	16.9	18.0	18.1	17.8
	Catheter	16.6	16.6	16.9	17.9	17.5	17.5	17.4
	Other/Missing	6.3	5.5	5.0	3.7	1.9	1.9	1.9
11d	Standardized Fistula Rate (SFR) ^{*5}	62.7	63.0	63.0	62.7	62.6	62.6	62.5
11e	P-value ^{*6}	0.510	0.509	0.511	0.508	n/a	n/a	n/a
11f	Confidence interval for SFR ^{*7}							
	High (97.5% limit)	39.4	39.7	39.8	39.6	n/a	n/a	n/a
	Low (2.5% limit)	83.6	83.8	83.7	83.6	n/a	n/a	n/a
11g	Long-Term Catheter Rate^{*8}	13.6	13.1	13.3	13.7	12.8	12.9	12.9
Vascular Access at First Treatment								
11h	Incident hemodialysis patients (n)	14	13	13	13	14.6	14.6	14.6
11i	Vascular access type in use (% of 11h; sums to 100%)							
	Arteriovenous fistula	17.2	17.3	16.4	14.9	14.1	14.1	14.1
	Arteriovenous graft	3.8	3.7	3.9	3.4	3.4	3.3	3.3
	Catheter	77.7	76.9	76.6	76.0	77.4	77.4	77.3
	Other/Missing	1.4	2.1	3.1	5.7	5.2	5.1	5.2
11j	Arteriovenous fistulae in place (% of 11h) ^{*9}	19.4	19.1	18.0	16.0	15.1	15.1	15.1
Infection: Peritoneal dialysis (PD)								
11k	Eligible PD patients (n)	6	6	6	6	13.7	13.6	14.6
11l	Eligible PD patient-months ^{*4}	45	45	46	47	100.2	99.6	102.2
11m	PD catheter infection rate per 100 PD patient-months ^{*10}	2.79	2.60	2.75	2.58	2.48	2.48	2.06
11n	P-value ^{*11} of 11m (compared to U.S. value) ^{*12}	0.369	0.366	0.368	0.362	n/a	n/a	n/a

n/a = not applicable

[*1] See *Guide, Section XIV*. Vascular Access type is based on data reported in CROWNWeb. For the prevalent summaries (rows 11a-11g), the patient must be assigned to the facility for the entire calendar month to be included. The PD infection summaries are based on Medicare Dialysis claims.

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

[*3] Patient months with a catheter that have limited life expectancy, including under hospice care in the current reporting month, or with metastatic cancer, end stage liver disease, coma or anoxic brain injury in the past 12 months, were excluded.

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

[*5] Includes patients with an autogenous arteriovenous (AV) fistula as the sole means of vascular access. SFR is calculated as an adjusted rate of AV fistula in use reported in 11c; not shown if fewer than 11 eligible adult HD patients.

[*6] A p-value less than 0.05 indicates that the difference between the fistula rate for your facility and the overall national fistula rate is probably real and is not due to random chance alone.

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

[*8] Includes patients using a catheter continuously for three months or longer. Patients with other or missing access types (11c) are also counted as catheter in use in the numerator.

[*9] Includes all patients with fistulae, regardless of whether or not they received their hemodialysis treatments using their fistulae.

[*10] The ICD-9 PD catheter infection code for PD patients is 996.68 which is effective thru 9/30/2015 and the ICD-10 PD catheter infection code for PD patients is T8571XA which is effective beginning 10/1/2015.

[*11] 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 change.

[*12] Compared to U.S. value for that year: 2.89 (2016), 2.65 (2017), 2.65 (2018), and 2.06 (2019).

TABLE 12: Comorbidities Reported on Medicare Claims for Medicare Dialysis Patients Treated as of December 31st of Each Year^{*1}, 2016-2019

	Measure Name	This Facility				Regional Averages ^{*2} , 2019		
		2016	2017	2018	2019	State	Network	U.S.
12a	Medicare dialysis patients on 12/31 (n)	44	44	44	44	45.4	45.4	45.5
12b	Comorbidity (% yes of 12a)							
	Infections							
	AIDS/HIV positive	1.6	1.5	1.5	1.5	1.7	1.6	1.7
	Intravascular/implanted device-related ^{*3}	9.6	9.5	9.2	8.6	8.4	8.4	8.5
	Hepatitis B	1.6	1.5	1.4	1.2	1.4	1.4	1.4
	Hepatitis other	5.3	5.3	5.0	4.4	4.7	4.7	4.8
	Metastatic	3.4	3.0	3.0	3.1	3.1	3.1	3.2
	Pneumonia	7.0	8.7	9.7	10.5	10.4	10.4	10.5
	Tuberculosis	0.5	0.4	0.4	0.5	0.5	0.5	0.6
	Other	35.0	35.6	35.5	35.1	34.8	34.8	35.0
	Cardiovascular							
	Cardiac arrest	1.6	1.8	1.7	1.7	1.7	1.7	1.7
	Cardiac dysrhythmia	36.8	37.5	38.2	38.8	38.3	38.3	38.2
	Cerebrovascular disease	24.3	24.2	24.4	24.3	24.4	24.4	24.5
	Congestive heart failure	51.8	53.0	54.2	54.7	54.8	54.8	54.7
	Ischemic heart disease	49.4	49.5	49.9	49.6	49.6	49.6	49.6
	Myocardial infarction	9.6	10.2	10.9	11.3	11.2	11.2	11.3
	Peripheral vascular disease ^{*4}	43.9	43.9	44.2	44.2	44.4	44.4	44.6
	Other							
	Alcohol dependence	2.9	2.8	3.1	3.0	3.1	3.0	3.1
	Anemia	9.5	9.7	10.3	11.0	10.6	10.6	10.6
	Cancer	11.0	11.2	11.5	11.6	11.5	11.5	11.5
	Chronic obstructive pulmonary disease	32.8	32.7	32.7	32.2	32.0	32.0	31.7
	Diabetes	66.3	67.0	67.6	67.5	67.9	68.0	68.3
	Drug dependence	3.6	3.6	3.7	3.8	3.8	3.8	3.8
	Gastrointestinal tract bleeding	4.6	4.5	4.3	4.3	4.4	4.4	4.4
	Hyperparathyroidism	86.3	85.3	87.4	87.2	87.6	87.5	87.3
12c	Average number of comorbid conditions	5.0	5.0	5.1	5.1	5.1	5.1	5.1

n/a = not applicable

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

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

[*3] This category includes bloodstream and other infections related to intravascular access and other implanted devices, not limited to dialysis access.

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

TABLE 13: Facility Information ^{*1}, 2019

Measure Name	This Facility 2019	Regional Averages ^{*2} , 2019		
		State	Network	U.S.
13a Organization	SAMPLE MEDICAL CARE(SMC)			
13b Ownership	Profit			
13c Initial Medicare certification date	01/01/2016			
13d Number of stations	17			
13e Services provided	Unavailable			
13f Shifts after 5:00 pm	Yes			
13g Dialyzer Reuse	Yes			
13h CMS Certification Numbers (CCN) included in this report	999999			
13i National Provider Identifier (NPI) ^{*3}	1234569874			
Long Term Care (LTC) ^{*4}				
13j Dialysis facility located in a Skilled Nursing Facility (SNF)	Yes			
13k Services provided in LTC facility by non-SNF based facility	None			
Patient Placement				
13l Patients treated during year from AFS Form-2744 (n)	101	101.4	101.4	101.5
13m Transferred into facility (% of 13l)	18.7	16.1	16.0	15.9
13n Transferred out of facility (% of 13l)	16.7	16.1	16.0	15.9
13o Patients treated on 12/31 (n)	69	n/a	n/a	n/a
13p Medicare eligibility status (% of 13o; sums to 100% ^{*5})		n/a	n/a	n/a
Medicare	75.4	75.3	75.3	74.6
Medicare application pending	1.0	0.7	0.7	0.8
Non-Medicare	23.6	23.9	23.9	24.6
Survey and Certification ^{*6}				
13q Date of last survey	01/03/2018			
13r Type of survey	Unknown			
13s Compliance condition after survey	Meets Requirements			
13t Number of CFC deficiencies cited	0	0.2	0.2	0.2
13u Number of Standard deficiencies cited	5	4.9	4.9	4.9

n/a = not applicable

[*1] See *Guide, Section XVI*. Information based on data reported in CROWNWeb as of May, 2020. If missing, data were not available.

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

[*3] 'NPI' obtained from CROWNWeb as of March 2020. If missing, data were not available.

[*4] LTC information obtained from CMS Form-3427 submitted during most recent survey.

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

[*6] Data on this section are from the facility's latest survey since January 2009 according to information reported in QIES as of early June 2020. If your facility has not been surveyed since January 2009, facility-level data on this table will be missing.

TABLE 14: Selected Measures for Dialysis Patients under Age 18^{*1}, 2016-2019

Measure Name	This Facility				Regional Averages ^{*2} , 2019			
	2016	2017	2018	2019	State	Network	U.S.	
Patient Characteristics								
14.1a	Patients treated on 12/31 (n)	7	7	6	6	n/a	n/a	n/a
14.1c	Age (% of 14.1a; sums to 100%)							
	< 5	25.1	25.7	24.6	23.9	25.8	26.1	25.9
	5-9	17.7	16.3	15.0	15.7	15.8	16.2	16.4
	10-14	24.8	26.4	31.1	26.4	27.3	27.6	28.4
	15-17	32.3	31.7	29.4	34.0	31.0	30.2	29.3
14.1d	Female (% of 14.1a)	37.2	39.3	40.6	39.6	40.5	41.9	42.1
14.1e	Race (% of 14.1a; sums to 100%) ^{*3}							
	African American	31.9	31.3	27.3	29.9	30.1	30.2	27.7
	Asian/Pacific Islander	3.7	4.8	5.3	5.9	3.9	4.0	4.0
	Native American	1.6	1.0	1.5	1.9	1.3	1.1	1.2
	White	60.9	61.7	64.0	59.1	62.3	62.2	64.6
	Other/Unknown/Missing	1.8	1.1	1.9	3.3	2.4	2.5	2.5
14.1f	Ethnicity (% of 14.1a; sums to 100%)							
	Hispanic	26.7	29.0	28.4	26.0	22.8	23.7	26.8
	Non-Hispanic	72.8	70.6	71.1	72.2	74.8	73.6	70.8
	Unknown	0.5	0.4	0.5	1.9	2.4	2.7	2.4
14.1g	Cause of ESRD (% of 14.1a; sums to 100%)							
	Diabetes	0.7	1.7	1.4	1.2	1.7	1.6	1.7
	Hypertension	3.2	2.8	2.4	2.5	2.6	2.7	2.6
	Glomerulonephritis	28.6	28.3	34.8	26.8	26.8	26.5	26.3
	Cystic Kidney	17.5	23.9	23.5	29.8	28.7	28.8	29.1
	Congenital/Hereditary	27.8	17.5	13.5	13.9	14.0	13.5	13.5
	Hemolytic Uremic Syndrome	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	Other	18.8	22.0	21.8	18.3	19.3	19.8	19.8
	Unknown/Missing	3.4	3.8	2.6	7.4	6.9	7.1	6.9
14.1i	Years since start of ESRD (% of 14.1a; sums to 100%)							
	< 1	33.5	35.7	31.6	29.9	29.3	29.4	29.2
	1-2	25.6	22.0	23.9	21.7	21.5	21.2	21.1
	2-3	11.6	16.1	14.1	15.4	14.3	15.1	14.8
	3-6	14.8	14.3	14.6	14.8	14.9	14.7	15.3
	6+	14.5	11.9	15.9	18.2	19.9	19.6	19.5
14.1k	Modality (% of 14.1a; sums to 100%)							
	In-center hemodialysis	45.4	41.5	42.9	45.8	44.8	45.8	46.5
	Home hemodialysis	0.2	1.1	1.8	0.6	1.0	1.0	1.1
	Continuous ambulatory peritoneal dialysis	1.7	2.1	0.1	1.5	1.4	1.3	1.1
	Continuous cycling peritoneal dialysis	52.4	55.2	54.3	51.9	52.4	51.4	51.0
	Other modality ^{*4}	0.3	0.2	0.9	0.2	0.5	0.5	0.4

(continued)

TABLE 14 (cont.): Selected Measures for Dialysis Patients under Age 18^{*1}, 2016-2019

Measure Name	This Facility				Regional Averages ^{*2} , 2019			
	2016	2017	2018	2019	State	Network	U.S.	
Characteristics of New Dialysis Patients								
14.2a	Total number of patients with forms (n)	4	4	3	3	n/a	n/a	n/a
14.2g	Medical coverage (% of 14.2a; sums to 100%)							
	Employer group only	19.3	22.0	18.9	25.8	17.8	18.4	18.6
	Medicare (alone or combined w/ other insurance)	5.0	4.4	2.5	1.1	21.5	20.6	23.5
	Medicaid only	54.3	54.5	59.7	56.8	46.6	47.0	43.8
	Other/Unknown/None	21.4	19.1	18.9	16.4	14.0	14.1	14.1
14.2k	Number of incident hemodialysis patients (n)	2	2	2	2	n/a	n/a	n/a
14.2l	Access used at first outpatient dialysis (% of 14.2k; sums to 100%)							
	Arteriovenous fistula	4.8	3.1	2.3	2.6	4.8	5.1	4.1
	Arteriovenous graft	0.5	0.9	0.0	0.4	0.6	0.6	0.9
	Catheter	94.7	96.1	97.7	96.7	94.4	94.1	94.7
	Other/Unknown/Missing	0.0	0.0	0.0	0.3	0.1	0.2	0.2
14.2m	Arteriovenous fistulae placed (% of 14.2k)	9.3	4.5	7.7	4.3	8.2	8.7	7.8
14.2s	Pre-ESRD nephrologist care (% of 14.2a; sums to 100%)							
	No	23.2	22.2	17.7	19.9	19.5	19.3	19.4
	Yes, < 6 months	22.5	21.8	21.2	23.4	24.9	24.8	24.0
	Yes, 6-12 months	13.1	15.3	17.3	11.8	12.3	12.3	12.9
	Yes, > 12 months	38.1	36.9	38.6	42.0	37.5	38.0	38.0
	Unknown	3.0	3.8	5.2	3.0	5.8	5.6	5.8
14.2t	Informed of transplant options (% of 14.2a)	91.7	90.1	92.8	89.9	82.8	82.6	82.1
Death Rates								
14.3a	Patients (n=number)	11	11	11	10	n/a	n/a	n/a
14.3b	Patient years (PY) at risk (n)	7.0	6.8	6.6	6.3	n/a	n/a	n/a
14.3c	Deaths (n)	0	0	0	0	n/a	n/a	n/a
Days Hospitalized Statistics								
14.4a	Medicare dialysis patients (n)	5	4	4	4	n/a	n/a	n/a
14.4b	Patient years (PY) at risk (n)	2.8	2.4	2.2	2.4	n/a	n/a	n/a
14.4c	Total days hospitalized (n)	40	37	36	36	n/a	n/a	n/a
Admission Statistics								
14.4i	Total admissions (n)	6	5	5	5	n/a	n/a	n/a
Transplantation								
14.5d	Eligible patients (n)	9	10	9	9	n/a	n/a	n/a
14.5e	Patient years (PY) at risk (n)	5.7	5.8	5.5	5.2	n/a	n/a	n/a
14.5f	First transplants (n) ^{*5}	2	3	3	3	n/a	n/a	n/a
Waitlist								
14.6a	Eligible patients (n)	12	12	11	11	n/a	n/a	n/a
14.6b	Eligible patients-months (n) ^{*6}	91	90	86	82	n/a	n/a	n/a
14.6c	Patients-months on the waitlist (% of 14.6b)	39.9	36.6	37.0	40.6	38.8	38.4	37.7
14.6d	Patient-months on the waitlist by age (%)							
	Age < 10	38.0	38.6	38.4	40.3	41.1	39.4	38.4
	Age 10-17	46.0	43.3	43.1	44.9	42.2	42.4	41.4

(continued)

TABLE 14 (cont.): Selected Measures for Dialysis Patients under Age 18^{*1}, 2016-2019

Measure Name	This Facility				Regional Averages ^{*2} , 2019			
	2016	2017	2018	2019	State	Network	U.S.	
Hemoglobin								
14.8a	Eligible hemodialysis (HD) patients (n)	5	5	5	5	n/a	n/a	n/a
14.8b	Eligible HD patient-months (n) ^{*6}	36	35	34	32	n/a	n/a	n/a
14.8c	Average hemoglobin ^{*6} (g/dL) (average of 14.8b)	10.9	10.7	10.7	10.7	10.8	10.8	10.8
14.8d	Hemoglobin categories (% of 14.8b; sums to 100%)							
	< 10 g/dL	20.7	24.3	26.7	25.1	22.5	22.3	22.2
	10-<11 g/dL	25.4	24.5	23.9	27.2	26.6	26.1	26.0
	11-12 g/dL	30.5	28.7	28.9	28.4	29.3	30.0	29.9
	> 12 g/dL	17.4	15.4	15.9	15.1	15.6	15.9	16.5
	Missing/Out of Range	6.1	7.1	4.7	4.2	6.0	5.8	5.4
14.8f	Eligible peritoneal dialysis (PD) patients (n)	6	6	6	5	n/a	n/a	n/a
14.8g	Eligible PD patient-months (n) ^{*6}	41	41	39	38	n/a	n/a	n/a
14.8h	Average hemoglobin ^{*6} (g/dL) (average of 14.8g)	10.8	10.8	10.7	10.8	10.8	10.8	10.8
14.8i	Hemoglobin categories (% of 14.8g; sums to 100%)							
	< 10 g/dL	26.5	25.6	27.6	26.2	26.9	27.2	26.8
	10-<11 g/dL	24.1	23.7	24.0	22.9	23.0	23.1	23.2
	11-12 g/dL	22.2	24.2	21.6	22.3	22.9	23.3	23.9
	> 12 g/dL	17.8	17.3	17.9	17.8	18.0	17.6	18.0
	Missing/Out of Range	9.4	9.2	8.9	10.8	9.2	8.8	8.2
Albumin								
14.9a	Eligible HD patients (n)	5	5	5	5	n/a	n/a	n/a
14.9b	Eligible HD patient-months (n) ^{*6}	36	35	34	32	n/a	n/a	n/a
14.9c	Average serum albumin (g/dL) (average of 14.9b)	3.9	3.9	3.9	4.0	4.0	4.0	4.0
14.9d	Serum albumin categories (% of 14.9b; sums to 100%)							
	< 3.0 g/dL	3.4	2.5	2.9	3.0	2.5	2.4	2.6
	3.0-<3.5 g/dL	12.2	12.0	10.3	7.8	7.3	7.2	8.1
	3.5-<4.0 g/dL	28.6	33.6	29.4	27.4	28.6	28.3	30.0
	>=4.0 g/dL	49.4	45.2	51.8	57.5	55.4	56.0	53.7
	Missing	6.3	6.7	5.6	4.4	6.3	6.1	5.7
14.9k	Eligible PD patients (n)	6	6	6	5	n/a	n/a	n/a
14.9l	Eligible PD patient-months (n) ^{*6}	41	41	39	38	n/a	n/a	n/a
14.9o	Average serum albumin (g/dL) (average of 14.9l)	3.7	3.6	3.6	3.7	3.7	3.7	3.7
14.9p	Serum albumin categories (% of 14.9l; sums to 100%)							
	< 3.0 g/dL	10.0	14.0	10.8	8.8	9.3	9.5	10.1
	3.0-<3.5 g/dL	19.8	16.5	19.5	16.0	16.5	16.8	18.0
	3.5-<4.0 g/dL	32.1	32.3	30.0	28.5	30.5	30.7	30.8
	>=4.0 g/dL	26.6	27.4	29.3	33.5	33.1	32.8	32.2
	Missing	11.5	9.8	10.3	13.3	10.5	10.1	9.0
Kt/V^{*7}								
14.9g	Eligible hemodialysis (HD) patients (n) ^{*8}	4	4	4	4	n/a	n/a	n/a
14.9h	Eligible HD patient-months (n) ^{*6 *8}	30	27	27	25	n/a	n/a	n/a
14.9j	HD: Kt/V >= 1.2 (% of 14.9h) ^{*9}	90.6	90.5	92.1	92.7	92.6	93.5	92.8
14.9n	PD: Kt/V >= 1.8 (% of 14.9l) ^{*9 *10}	55.4	67.8	65.9	65.5	70.5	72.4	73.1

(continued)

TABLE 14 (cont.): Selected Measures for Dialysis Patients under Age 18^{*1}, 2016-2019

Measure Name	This Facility				Regional Averages ^{*2} , 2019			
	2016	2017	2018	2019	State	Network	U.S.	
Vascular Access^{*11}								
14.11a	Eligible hemodialysis (HD) patients (n)	6	6	5	5	n/a	n/a	n/a
14.11b	Eligible patient-months (n) ^{*6}	40	38	37	35	n/a	n/a	n/a
14.11c	Arteriovenous Fistula in use (%)	24.9	22.1	21.6	22.7	21.6	20.5	20.1
14.11g	Long-Term Catheter Rate	53.6	52.2	53.1	58.5	58.2	60.9	61.7

n/a = not applicable

[*1] See *Guide, Section XVII* corresponding to the parent table in the DFR.

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

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

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

[*5] Among first transplants that occurred after the start of dialysis from 2016-2019, 3.3% of transplants in the U.S. were not included because the transplant occurred fewer than 90 days after the start of ESRD and 1.1% were not included because the patient was not assigned to a facility at time of transplant.

[*6] A patient may be counted up to 12 times per year. Eligible patient-months for the waitlist summary include patients assigned to the facility on the last day of each month.

[*7] Kt/V summaries are based on data reported in CROWNWeb and include patients on HD (or PD) the entire month at the facility. Medicare claims are used if missing in CROWNWeb.

[*8] HD Kt/v summaries restricted to patients on thrice weekly in-center hemodialysis.

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

[*10] PD Kt/V summaries select the most recent value collected within 6 months of the reporting month.

[*11] Vascular Access type is based on data reported in CROWNWeb. Patient months with a catheter that have limited life expectancy, including under hospice care in the current reporting month, or with metastatic cancer, end stage liver disease, coma or anoxic brain injury in the past 12 months, were excluded. 'Arteriovenous Fistula in use' includes patients with an autogenous arteriovenous (AV) fistula as the sole means of vascular access. 'Long-Term Catheter Rate' includes patients using a catheter continuously for three months or longer. Patients with other or missing access types (11c) are also counted as catheter in use in the numerator.

SAMPLE