

# Dialysis Facility Report for Fiscal Year (FY) 2020

## Purpose of the Report

The *Dialysis Facility Report (DFR) for FY 2020* 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 2020 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-fourth in a series of annual reports. This is one of 7,674 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 2015 and December 2018. 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 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 2020*. The *Guide* may be downloaded from the methodology section of the Dialysis Data website at [www.DialysisData.org](http://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 2020: (1) The age-adjusted percentage of patient-months waitlisted for prevalent patients and the Standardized Waitlist Ratio (SWR) for incident dialysis patients have been added to Table 6; (2) Hemoglobin and ESA summaries from CROWNWeb are now calculated for hemodialysis and peritoneal dialysis patients separately in Table 8. The claims-based hemoglobin and ESA measures have been removed; (3) The NQF-endorsed long-term catheter rate (LTCR) and Standardized Fistula Rate (SFR) measures have been added to Table 11 as modified versions of the percent of patients with a catheter in use for greater than 90 days and the percent of patients with an arteriovenous fistulae in place measures, respectively. The new measures exclude patients for whom other vascular access types may be either more difficult or not appropriate; (4) Information regarding long-term care services from CMS Form 3427 was added to Table 13; and (5) New figures were added to the highlights section.

## How to Submit Comments

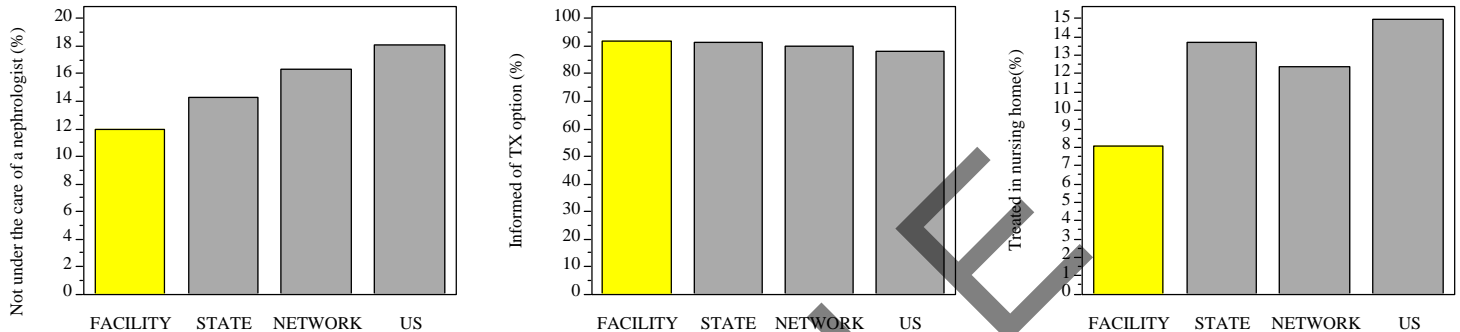
**Between July 15, 2019 and August 15, 2019**, facilities may submit comments to their state surveyor or UM-KECC by visiting [www.DialysisData.org](http://www.DialysisData.org), logging on to view their report, and clicking on the **Comments & Inquiries** tab. Questions or comments after the comment period is over may be submitted to us directly at [DialysisData@umich.edu](mailto: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 2019. 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

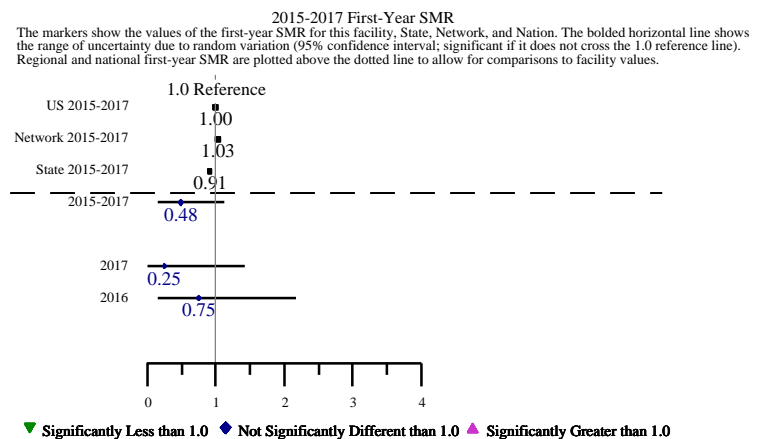
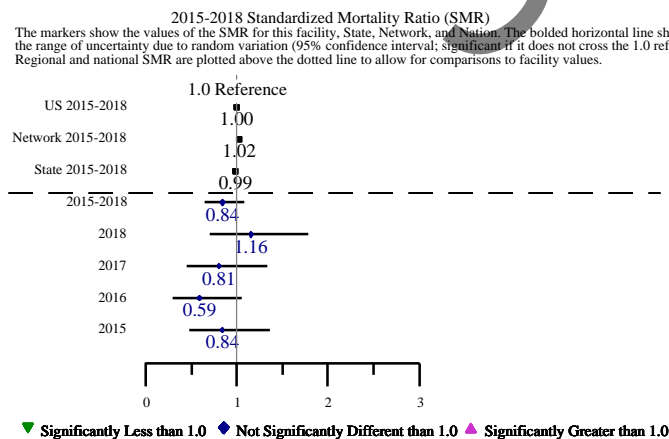
### Patient Characteristics (Tables 1 and 2):

- Among the 25 incident patients with Medical Evidence Forms (CMS-2728) indicating treatment at this facility during 2018:
  - 12% of these patients were not under the care of a nephrologist before starting dialysis, compared to 14% in your State, 16% in your Network, and 18% nationally.
  - 92% of these patients were informed of their transplant options, compared to 91% in your State, 90% in your Network, and 88% nationally.
- Among the patients treated at this facility on December 31, 2018, 8% were treated in a nursing home during the year, compared to 14% in your State, 12% in your Network, and 15% nationally.



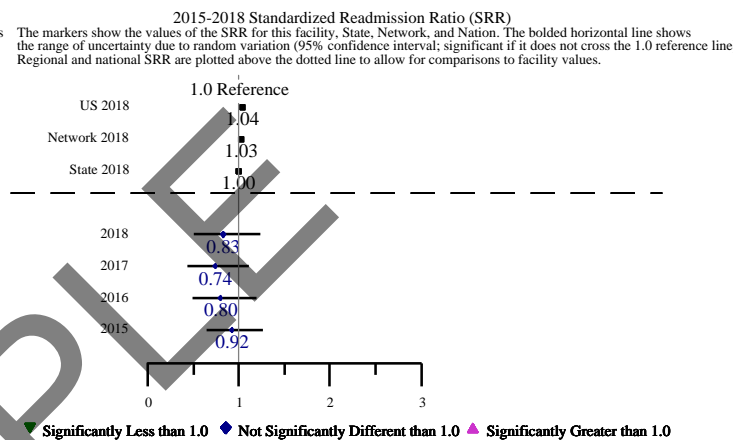
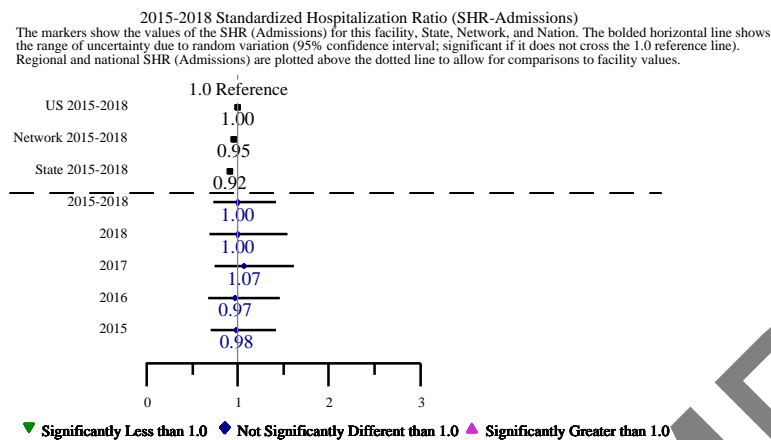
### Standardized Mortality Ratio (SMR) (Table 3):

- At this facility, the 2015-2018 SMR is 0.84, which is 16% fewer deaths than expected at this facility. Among all U.S. facilities, 28% of facilities had a four-year SMR lower than 0.84. This difference is not statistically significant ( $p \geq 0.05$ ), so this lower mortality could plausibly be just a chance occurrence. The 2015-2018 SMR of observed to expected deaths is 0.99 and 1.02 for your State and Network, respectively.
- At this facility, the 2015-2017 first-year SMR of observed to expected deaths is 0.48, which is 52% fewer deaths than expected at this facility. Among all U.S. facilities, 15% of facilities had a first-year SMR lower than 0.48. 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 (2015-2017) of observed to expected deaths is 0.91 and 1.03 for your State and Network, respectively.



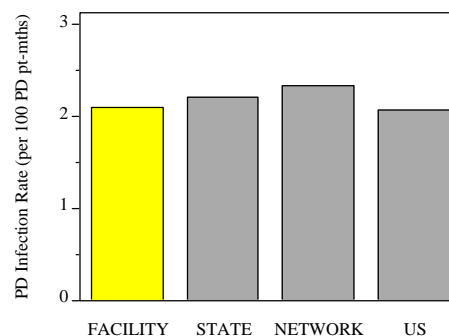
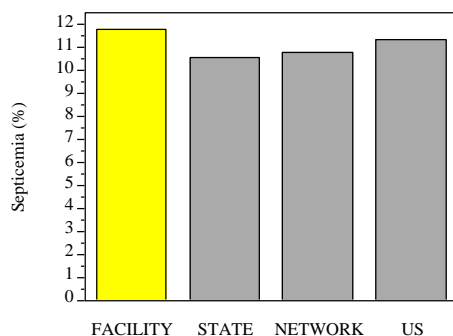
### Hospitalizations and Readmissions (Table 4):

- The 2015-2018 SHR (Admissions) at this facility is 1.00, which is equivalent to the national reference value. The 2015-2018 SHR (Admissions) for your State and Network is 0.92 and 0.95, respectively.
- The 2018 SRR at this facility is 0.83, which is 17% fewer admissions than expected. This difference is not statistically significant ( $p \geq 0.05$ ), so this lower number of readmissions could plausibly be just a chance occurrence. The 2018 SRR for your State and Network is 1.00 and 1.03, respectively.



### Infection (Tables 4 and 11):

- The percentage of Medicare dialysis patients at this facility hospitalized with septicemia during 2015-2018 is 12%, compared to 11% in your State, 11% in your Network, and 11% nationally.
- The 2018 rate of PD catheter-related infection was 2.1 per 100 PD patient-months, compared to 2.2 in your State, 2.3 in your Network, and 2.1 nationally.

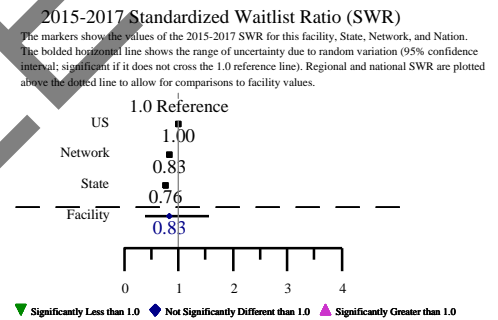
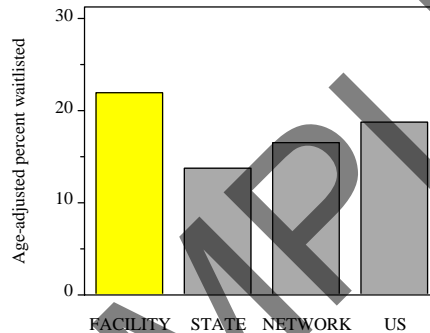
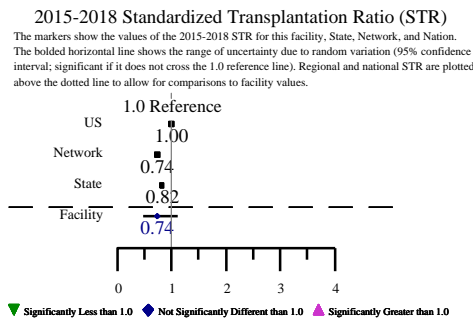


**Transplantation (Table 5):**

- The 2015-2018 Standardized 1<sup>st</sup> Transplantation Ratio (STR) of observed to expected number of patients transplanted for this facility is 0.74, which is 26% lower than expected for this facility. This difference is not statistically significant ( $p \geq 0.05$ ) and is plausibly due to random chance. The 2015-2018 STR for your State and Network is 0.82 and 0.74, respectively.

**Transplant Waitlist (Table 6):**

- The 2018 age-adjusted percent waitlisted at this facility is 22%, which is 3.3% higher than the national adjusted percentage. This difference is not statistically significant ( $p \geq 0.05$ ) and could plausibly be due to a chance occurrence. The age-adjusted percent waitlisted in your State and Network is 14% and 17%, respectively.
- At this facility, the 2015-2017 SWR is 0.83, which is 17% 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 2015-2017 SWR for your State and Network is 0.76 and 0.83, respectively.

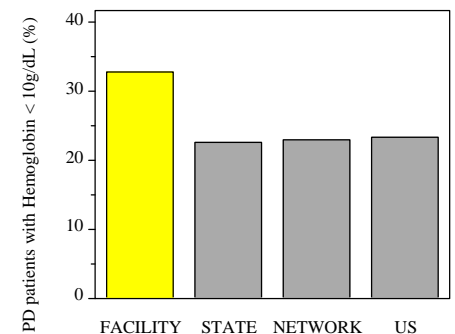
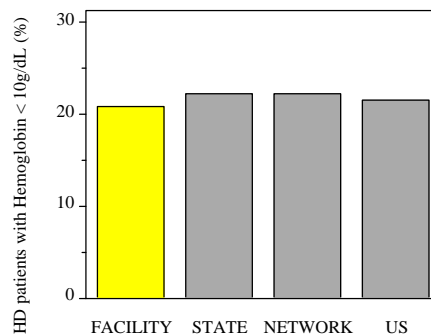
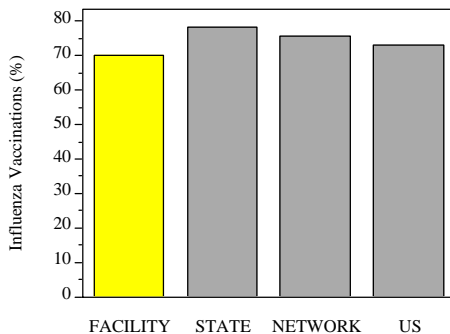


**Influenza Vaccination (Table 7):**

- Among the 80 Medicare dialysis patients treated at this facility on December 31, 2018, 70% were vaccinated between August 1 and December 31, 2018 compared to 73% 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 76%, respectively.

**Anemia Management (Table 8):**

- In 2018, 21% 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 2018, 33% 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):*

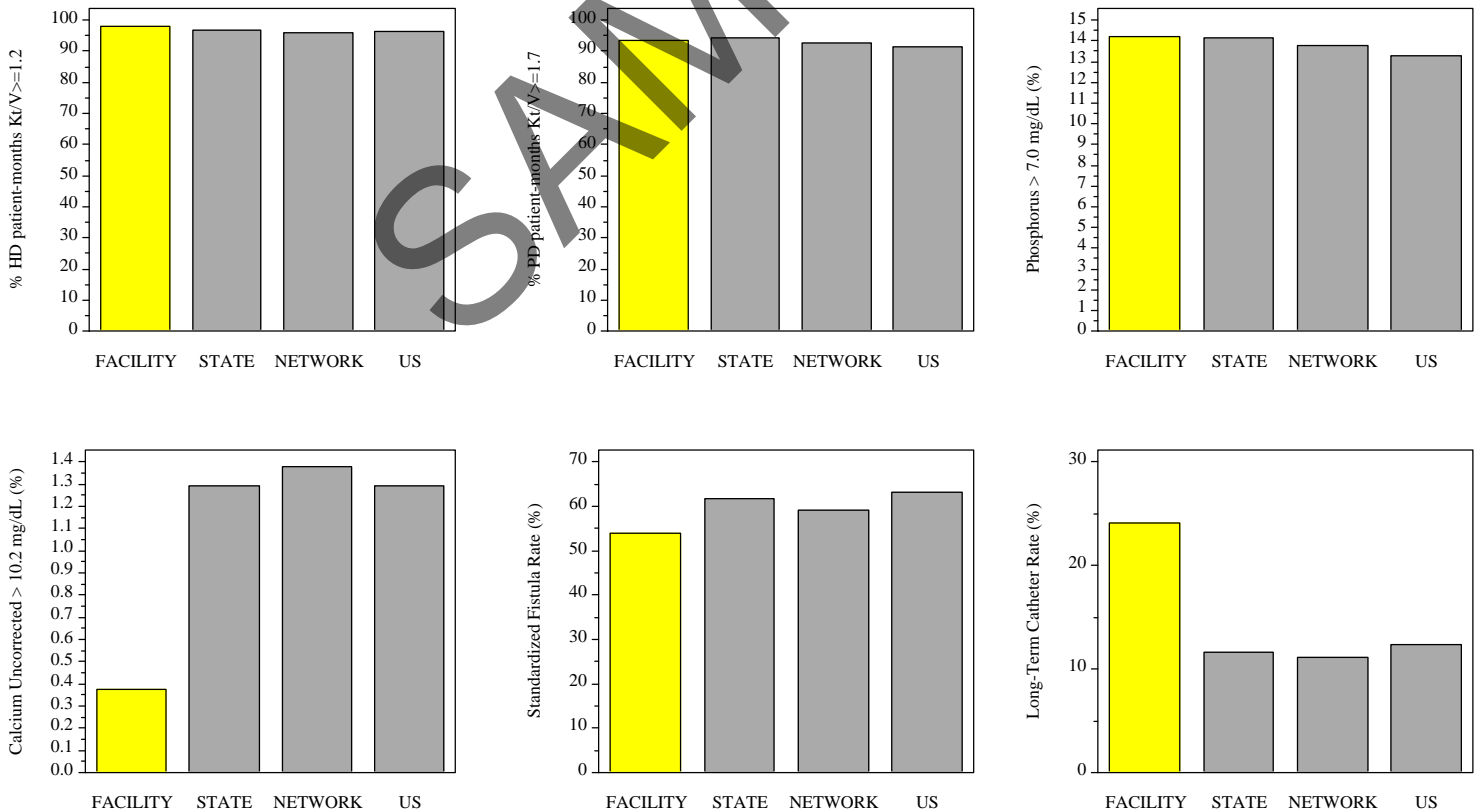
- In 2018, 98% of eligible hemodialysis patient-months had a Kt/V  $\geq 1.2$  reported, compared to 97% in your State, 96% in your Network, and 96% nationally.
- In 2018, 93% of eligible peritoneal dialysis patient-months had a Kt/V  $\geq 1.7$  reported, compared to 94% in your State, 93% in your Network, and 91% nationally.

*Mineral Metabolism (Table 10):*

- In 2018, 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 13% nationally.
- In 2018, 0.4% of eligible patient-months had calcium uncorrected value  $>10.2$  mg/dL, compared to 1.3% in your State, 1.4% in your Network, and 1.3% nationally.

*Vascular Access (Table 11):*

- This facility's 2018 Standardized Fistula Rate (SFR) for prevalent patients is 54%, which is 9% lower 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 62% and 59%, respectively.
- Of the prevalent patients receiving hemodialysis treatment at this facility in 2018, the long-term catheter rate was 24%, compared to 12% in your State, 11% in your Network, and 12% nationally.



**TABLE 1: Summaries for All Dialysis Patients Treated as of December 31<sup>st</sup> of Each Year<sup>\*1</sup>, 2015-2018**

Measure Name		This Facility				Regional Averages <sup>*2</sup> , 2018		
		2015	2016	2017	2018	State	Network	U.S.
1a	Patients treated on 12/31 (n)	135	136	128	124	73.4	62.1	63.7
1b	Average age (years)	55.6	55.7	56.5	56.8	61.2	60.9	62.4
1c	Age (% of 1a; sums to 100%)							
	< 18	6.7	8.1	5.5	6.5	0.3	0.2	0.2
	18-64	58.5	55.9	57.8	53.2	55.5	56.2	52.3
	65+	34.8	36.0	36.7	40.3	44.3	43.6	47.4
1d	Female (% of 1a)	46.7	47.1	43.0	39.5	44.4	45.1	42.7
1e	Race (% of 1a; sums to 100%) <sup>*3</sup>							
	African American	57.8	51.5	47.7	51.6	59.7	64.5	34.5
	Asian/Pacific Islander	4.4	5.1	4.7	2.4	1.5	1.6	6.1
	Native American	0.0	0.0	0.0	0.0	1.0	0.4	1.2
	White	37.8	43.4	47.7	46.0	37.6	33.3	57.8
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.1	0.2	0.4
1f	Ethnicity (% of 1a; sums to 100%)							
	Hispanic	10.4	8.8	10.9	8.9	4.2	3.5	18.7
	Non-Hispanic	88.1	89.7	88.3	88.7	95.5	96.2	80.9
	Unknown	1.5	1.5	0.8	2.4	0.3	0.3	0.3
1g	Primary Cause of ESRD (% of 1a; sums to 100%)							
	Diabetes	37.0	36.8	42.2	36.3	44.5	40.7	46.4
	Hypertension	19.3	20.6	21.9	24.2	30.6	37.9	30.0
	Glomerulonephritis	17.8	16.2	12.5	15.3	12.4	10.0	10.3
	Other/Unknown	23.7	24.3	21.9	21.8	11.9	10.7	12.7
	Missing	2.2	2.2	1.6	2.4	0.6	0.7	0.7
1h	Average duration of ESRD (years)	5.7	5.7	5.8	6.0	5.3	5.3	5.0
1i	Years since start of ESRD (% of 1a; sums to 100%)							
	< 1	13.3	15.4	15.6	14.5	14.6	14.3	15.5
	1-2	12.6	11.8	15.6	17.7	16.1	15.6	16.9
	2-3	9.6	11.8	8.6	8.1	12.8	13.1	13.8
	3-6	31.9	30.1	25.8	20.2	26.0	26.5	26.6
	6+	32.6	30.9	34.4	39.5	30.5	30.5	27.2
1j	Nursing home patients (% of 1a) <sup>*4</sup>	10.4	8.8	7.8	8.1	13.7	12.4	15.0
1k	Modality (% of 1a; sums to 100%)							
	In-center hemodialysis	76.3	74.3	76.6	79.0	86.3	86.4	86.9
	Home hemodialysis	4.4	2.9	3.1	4.8	2.7	2.1	1.9
	Continuous ambulatory peritoneal dialysis	0.0	0.7	0.8	2.4	0.9	1.2	1.3
	Continuous cycling peritoneal dialysis	19.3	21.3	18.0	12.9	9.3	9.8	9.3
	Other modality <sup>*5</sup>	0.0	0.7	1.6	0.8	0.7	0.5	0.6

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<sup>\*1</sup>, 2015-2018 (Form CMS-2728)**

Measure Name		This Facility				Regional Averages <sup>*2</sup> , 2018		
		2015	2016	2017	2018	State	Network	U.S.
<b>Patient Characteristics</b>								
2a	Total number of patients with forms (n)	23	30	26	25	16.8	14.1	15.9
2b	Average age (years [0-95]) <sup>*3</sup>	46.9	48.4	57.2	55.3	62.4	62.3	63.8
2c	Female (% of 2a)	47.8	43.3	34.6	64.0	43.4	44.8	41.9
2d	Race (% of 2a; sums to 100%) <sup>*4</sup>							
	African-American	43.5	33.3	23.1	44.0	46.0	51.0	25.7
	Asian/Pacific Islander	8.7	0.0	3.8	0.0	1.3	1.6	5.7
	Native American	0.0	0.0	0.0	0.0	0.9	0.5	1.0
	White	47.8	66.7	73.1	56.0	51.6	46.7	67.2
	Other/Unknown	0.0	0.0	0.0	0.0	0.2	0.2	0.3
2e	Hispanic (% of 2a)	17.4	3.3	11.5	4.0	3.5	2.9	15.5
2f	Primary cause of ESRD (% of 2a; sums to 100%)							
	Diabetes	17.4	30.0	42.3	36.0	49.3	44.4	49.1
	Hypertension	26.1	26.7	26.9	24.0	29.1	36.9	29.9
	Primary glomerulonephritis	21.7	16.7	7.7	28.0	9.2	6.9	6.9
	Other/Unknown	34.8	26.7	23.1	12.0	12.4	11.9	14.1
2g	Medical coverage (% of 2a; sums to 100%)							
	Employer group only	21.7	16.7	23.1	20.0	13.5	12.5	11.9
	Medicare only	8.7	13.3	26.9	36.0	36.7	36.6	34.8
	Medicaid only	39.1	23.3	19.2	12.0	9.6	8.8	12.7
	Medicare and Medicaid only	4.3	16.7	11.5	12.0	10.5	12.0	12.7
	Medicare and other	13.0	13.3	15.4	8.0	16.2	15.1	16.4
	Other/Unknown	4.3	0.0	3.8	0.0	5.7	6.2	7.1
	None	8.7	16.7	0.0	12.0	7.8	8.8	4.3
2h	Median body mass index <sup>*5</sup> (Median; Weight/Height^2)							
	Male	27.6	26.3	28.0	27.9	28.7	28.3	28.1
	Female	33.6	24.8	27.9	31.2	30.2	29.9	29.2
2i	Employment <sup>*6</sup>							
	Six months prior to ESRD treatment	25.0	18.8	62.5	50.0	35.1	33.0	35.2
	At first ESRD treatment	25.0	6.3	50.0	40.0	25.0	22.9	25.3
2j	Primary modality (% of 2a; sums to 100%)							
	Hemodialysis	69.6	76.7	73.1	72.0	86.8	87.6	88.5
	CAPD/CCPD	30.4	23.3	26.9	28.0	13.2	12.4	11.5
	Other/Unknown	0.0	0.0	0.0	0.0	0.0	0.0	0.0
2k	Number of incident hemodialysis patients (n)	16	23	19	18	14.6	12.3	14.1
2l	Access used at first outpatient dialysis (% of 2k; sums to 100%)							
	Arteriovenous fistula	31.3	4.3	21.1	11.1	21.6	16.9	16.0
	Arteriovenous graft	6.3	8.7	5.3	5.6	4.4	3.7	3.0
	Catheter	62.5	87.0	73.7	83.3	73.8	79.2	80.8
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.2	0.2	0.2
2m	Arteriovenous fistula placed (% of 2k)	37.5	8.7	31.6	22.2	39.3	31.7	30.3

(continued)

**TABLE 2 (cont.): Characteristics of New Dialysis Patients<sup>\*1</sup>, 2015-2018 (Form CMS-2728)**

Measure Name		This Facility				Regional Averages <sup>*2</sup> , 2018		
		2015	2016	2017	2018	State	Network	U.S.
<b>Average Lab Values Prior to Dialysis<sup>*3</sup></b>								
2n	Hemoglobin (g/dL [3-18])	9.0	9.6	9.1	9.2	9.3	9.2	9.3
2o	Serum albumin (g/dL [0.8-6.0])	3.5	3.3	3.5	3.3	3.2	3.2	3.2
2p	Serum creatinine (mg/dL [0-33])	8.6	7.9	7.8	8.3	7.1	6.9	6.4
2q	GFR (mL/min [0-30])	8.3	8.5	9.7	8.6	9.8	10.3	10.7
<b>Care Prior to ESRD Therapy</b>								
2r	Received ESA prior to ESRD (% of 2a)	4.3	20.0	23.1	40.0	15.6	12.7	14.8
2s	Pre-ESRD nephrologist care (% of 2a; sums to 100%) <sup>*7</sup>							
	No	13.0	10.0	11.5	12.0	14.2	16.3	18.1
	Yes, < 6 months	13.0	20.0	7.7	12.0	14.5	14.5	15.4
	Yes, 6-12 months	34.8	26.7	46.2	24.0	21.8	19.7	20.3
	Yes, > 12 months	39.1	43.3	34.6	52.0	42.7	35.7	32.6
	Unknown/Missing	0.0	0.0	0.0	0.0	6.8	13.7	13.6
2t	Informed of transplant options (% of 2a)	69.6	76.7	84.6	92.0	91.2	89.9	88.0
2u	Patients not informed of transplant options (n)	7	7	4	2	1.5	1.4	1.9
2v	Reason not informed (% of 2u; may not sum to 100%) <sup>*8</sup>							
	Medically unfit	71.4	14.3	50.0	0.0	16.7	20.4	28.9
	Unsuitable due to age	57.1	28.6	75.0	50.0	22.0	17.4	22.8
	Psychologically unfit	0.0	14.3	0.0	0.0	2.6	2.6	2.7
	Patient declined information	0.0	0.0	0.0	0.0	1.5	1.9	1.6
	Patient has not been assessed	0.0	28.6	0.0	100	56.9	58.2	48.2
<b>Comorbid Conditions</b>								
2w	Pre-existing comorbidity (% yes of 2a) <sup>*9</sup>							
	Congestive heart failure	4.3	10.0	11.5	8.0	31.8	30.1	29.2
	Atherosclerotic heart disease <sup>*9</sup>	13.0	0.0	11.5	8.0	14.0	10.2	13.1
	Other cardiac disorder <sup>*9</sup>	0.0	3.3	3.8	0.0	22.7	20.0	20.8
	CVD, CVA, TIA	0.0	3.3	3.8	4.0	12.2	9.9	8.8
	Peripheral vascular disease	0.0	0.0	7.7	4.0	9.4	8.0	9.5
	History of hypertension	73.9	66.7	61.5	80.0	90.9	90.6	88.6
	Diabetes <sup>*9</sup>	21.7	43.3	46.2	44.0	66.3	64.5	64.9
	Diabetes on insulin	13.0	20.0	38.5	28.0	45.1	43.5	43.6
	COPD	4.3	0.0	11.5	4.0	10.9	9.8	9.5
	Current smoker	8.7	13.3	0.0	0.0	11.6	9.1	7.0
	Cancer	0.0	6.7	3.8	8.0	9.1	7.3	7.3
	Alcohol dependence	0.0	0.0	0.0	0.0	2.6	1.9	1.7
	Drug dependence	0.0	6.7	0.0	0.0	2.4	1.8	1.4
	Inability to ambulate	0.0	3.3	0.0	0.0	6.6	6.4	7.2
	Inability to transfer	0.0	3.3	3.8	0.0	3.1	3.7	3.8
2x	Average number of comorbid conditions	1.4	1.8	2.0	1.9	3.4	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 (0.01% in US in 2018).

[\*8] Values may not sum to exactly 100% because of patients for which multiple reasons are selected, 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 (2015-18) & New Dialysis Patients (2015-17)** <sup>\*1</sup>

		This Facility					Regional Averages <sup>*2</sup>		
	Measure Name	2015	2016	2017	2018	2015-2018	State	Network	U.S.
	All Patients: Death Counts							2015-2018	
3a	Patients (n=number)	170	166	175	169	680 <sup>*8</sup>	93.3	79.1	92.3
3b	Patient-years (PY) at risk (n)	133.5	132.2	134.7	123.3	523.7 <sup>*8</sup>	69.1	58.0	62.6
3c	Deaths (n)	16	11	15	20	62 <sup>*8</sup>	11.3	9.4	11.0
3d	Expected deaths (n)	19.1	18.6	18.6	17.3	73.5 <sup>*8</sup>	11.4	9.2	11.0
3e	Withdrawal from dialysis prior to death (% of 3c)	25.0	72.7	53.3	35.0	43.5	31.5	24.3	25.6
3f	Death due to Infections (% of 3c)	37.5	18.2	20.0	5.0	19.4	12.3	10.1	10.7
	Death due to Cardiac causes (% of 3c)	56.3	36.4	33.3	50.0	45.2	44.9	45.6	45.0
	Death due to Liver disease (% of 3c)	0.0	9.1	0.0	5.0	3.2	1.6	1.3	1.6
3g	Dialysis unrelated deaths <sup>*3</sup> (n; excluded from SMR)	0	0	0	0	0 <sup>*8</sup>	0.1	0.1	0.1
	All Patients: Standardized Mortality Ratio (SMR)								
3h	SMR <sup>*4</sup>	0.84	0.59	0.81	1.16	0.84	0.99	1.02	1.00
3i	P-value <sup>*5</sup>	0.570	0.083	0.484	0.569	0.192	n/a	n/a	n/a
3j	Confidence interval for SMR <sup>*6</sup>								
	High (97.5% limit)	1.36	1.06	1.33	1.79	1.08	n/a	n/a	n/a
	Low (2.5% limit)	0.48	0.30	0.45	0.71	0.65	n/a	n/a	n/a
3k	SMR percentiles for this facility <sup>*7</sup>								
	In this State	32	12	33	74	30	n/a	n/a	n/a
	In this Network	33	14	28	68	26	n/a	n/a	n/a
	In the U.S.	35	15	33	70	28	n/a	n/a	n/a
	New Patients: First Year Death Counts	2015	2016	2017		2015-2017		2015-2017	
3l	New patients (n=number)	23	30	26		79 <sup>*8</sup>	17.1	14.3	16.4
3m	Patient-years (PY) at risk (n)	21.5	28.9	25.0		75.4 <sup>*8</sup>	15.4	12.8	14.5
3n	Deaths (n)	1	3	1		5 <sup>*8</sup>	2.8	2.6	3.1
3o	Expected deaths (n)	2.4	4.0	3.9		10.3 <sup>*8</sup>	3.1	2.5	3.1
3p	Withdrawal from dialysis prior to death (% of 3n)	100	66.7	100		80.0	32.3	26.3	27.9
3q	Death due to Infections (% of 3n)	0.0	33.3	0.0		20.0	11.4	8.8	9.7
	Death due to Cardiac causes (% of 3n)	0.0	33.3	0.0		20.0	41.3	40.6	40.3
	Death due to Liver disease (% of 3n)	0.0	0.0	0.0		0.0	2.1	1.9	2.7
	New Patients: First Year Standardized Mortality Ratio (SMR)								
3r	SMR <sup>*4</sup>	.	0.75	0.25		0.48	0.91	1.03	1.00
3s	P-value <sup>*5</sup>	.	0.858	0.193		0.109	n/a	n/a	n/a
3t	Confidence interval for SMR <sup>*6</sup>								
	High (97.5% limit)	.	2.18	1.42		1.13	n/a	n/a	n/a
	Low (2.5% limit)	.	0.15	0.01		0.16	n/a	n/a	n/a
3u	First Year SMR percentiles for this facility <sup>*7</sup>								
	In this State	.	42	20		16	n/a	n/a	n/a
	In this Network	.	36	19		14	n/a	n/a	n/a
	In the U.S.	.	39	18		15	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<sup>\*1</sup>, 2015-2018**

Measure Name	This Facility					Regional Averages <sup>*2</sup> , per Year, 2015-2018		
	2015	2016	2017	2018	2015-2018	State	Network	U.S.
<b>Medicare Dialysis Patients</b>								
4a Medicare dialysis patients (n)	133	122	121	123	499 <sup>*3</sup>	74.9	63.7	69.7
4b Patient-years (PY) at risk (n)	98.6	87.4	77.8	76.4	340.2 <sup>*3</sup>	51.5	43.3	42.2
<b>Days Hospitalized Statistics</b>								
4c Total days hospitalized (n)	1,427	1,237	1,420	1,347	5,431 <sup>*3</sup>	589.2	514.5	576.4
4d Expected total days hospitalized (n)	1,340.3	1,058.0	960.2	973.8	4,332.3 <sup>*3</sup>	671.7	546.5	578.1
4e Standardized Hospitalization Ratio (Days) <sup>*4</sup>	1.06	1.17	1.48	1.38	1.25	0.88	0.94	1.00
4f P-value <sup>*5</sup>	0.716	0.428	0.054	0.133	0.170	n/a	n/a	n/a
4g Confidence interval for SHR (Days) <sup>*6</sup>								
High (97.5% limit)	1.76	1.94	2.35	2.30	1.87	n/a	n/a	n/a
Low (2.5% limit)	0.68	0.75	0.99	0.90	0.90	n/a	n/a	n/a
4h Percentiles for this facility (Days) <sup>*7</sup>								
In this State	77	88	96	97	96	n/a	n/a	n/a
In this Network	70	81	94	91	90	n/a	n/a	n/a
In the U.S.	66	75	91	88	85	n/a	n/a	n/a
<b>Admission Statistics</b>								
4i Total admissions (n)	181	145	147	137	610 <sup>*3</sup>	84.3	71.4	78.0
4j Expected total admissions (n)	184.1	150.1	137.7	136.4	608.2 <sup>*3</sup>	91.9	74.9	78.0
<b>4k Standardized Hospitalization Ratio (Admissions)<sup>*4</sup></b>	<b>0.98</b>	<b>0.97</b>	<b>1.07</b>	<b>1.00</b>	<b>1.00</b>	<b>0.92</b>	<b>0.95</b>	<b>1.00</b>
4l P-value <sup>*5</sup>	0.987	0.955	0.651	0.870	0.889	n/a	n/a	n/a
4m Confidence interval for SHR (Admissions) <sup>*6</sup>								
High (97.5% limit)	1.42	1.46	1.62	1.54	1.42	n/a	n/a	n/a
Low (2.5% limit)	0.71	0.67	0.74	0.69	0.74	n/a	n/a	n/a
4n Percentiles for this facility (admissions) <sup>*7</sup>								
In this State	64	63	78	68	73	n/a	n/a	n/a
In this Network	63	57	70	58	65	n/a	n/a	n/a
In the U.S.	52	50	64	55	55	n/a	n/a	n/a
<b>4o Diagnoses associated with hospitalization (% of 4a)<sup>*8</sup></b>								
Septicemia	15.8	13.9	8.3	8.9	11.8	10.6	10.8	11.4
Acute myocardial infarction	3.0	4.9	2.5	2.4	3.2	3.9	3.8	4.2
Congestive heart failure	20.3	23.8	24.8	21.1	22.4	26.0	24.9	23.9
Cardiac dysrhythmia	13.5	10.7	10.7	7.3	10.6	13.3	12.5	13.2
Cardiac arrest	0.8	0.0	0.8	0.8	0.6	2.0	2.2	1.9
4p One day admissions (% of 4i)	15.5	13.8	5.4	6.6	10.7	8.4	9.0	9.7
4q Average length of stay (days per admission; 4c/4i)	7.9	8.5	9.7	9.8	8.9	7.0	7.2	7.4

(continued)

**TABLE 4 (cont.): Hospitalization Summary for Medicare Dialysis Patients<sup>\*1</sup>, 2015-2018**

Measure Name		This Facility					Regional Averages <sup>*2</sup> , per Year, 2015-2018		
		2015	2016	2017	2018	2015-2018	State	Network	U.S.
<b>Emergency Department (ED) Statistics</b>									
4r	Total ED visits (n)	366	269	260	228	1,123 <sup>*3</sup>	171.5	141.6	136.0
4s	Expected total ED visits (n)	322.1	276.0	257.4	247.3	1,102.8 <sup>*3</sup>	168.2	139.3	136.3
4t	Standardized Hospitalization Ratio (ED) <sup>*4</sup>	1.14	0.97	1.01	0.92	1.02	1.02	1.02	1.00
4u	P-value <sup>*5</sup>	0.391	0.967	0.829	0.844	0.783	n/a	n/a	n/a
4v	Confidence interval for SHR (ED) <sup>*6</sup>								
	High (97.5% limit)	1.67	1.52	1.58	1.43	1.45	n/a	n/a	n/a
	Low (2.5% limit)	0.82	0.67	0.69	0.65	0.75	n/a	n/a	n/a
4w	Percentiles for this facility (ED) <sup>*7</sup>								
	In this State	73	43	54	38	55	n/a	n/a	n/a
	In this Network	72	49	55	39	56	n/a	n/a	n/a
	In the U.S.	73	51	56	41	57	n/a	n/a	n/a
4x	Patients with ED visit (% of 4a)	69.9	68.0	71.1	67.5	69.1	67.1	66.4	62.2
4y	ED visits that result in hospitalization (% of 4r)	40.4	45.0	50.4	51.8	46.1	39.5	40.9	47.2
4z	Admissions that originate in the ED (% of 4i)	81.8	83.4	89.1	86.1	84.9	80.4	81.1	82.4
<b>Readmission Statistics</b>								<b>2018</b>	
4aa	Index discharges (n)	154	129	125	125		80.4	70.0	72.8
4ab	Total readmissions (n)	40	26	26	26		20.8	18.8	19.9
4ac	Expected total readmissions (n)	43	33	35	31		22.5	19.2	20.5
<b>4ad</b>	<b>Standardized Readmission Ratio (SRR)<sup>*4</sup></b>	<b>0.92</b>	<b>0.80</b>	<b>0.74</b>	<b>0.83</b>		<b>1.00</b>	<b>1.03</b>	<b>1.04</b>
4ae	P-value <sup>*5</sup>	0.539	0.272	0.148	0.364		n/a	n/a	n/a
4af	Confidence interval for SRR <sup>*6</sup>								
	High (97.5% limit)	1.27	1.19	1.11	1.24		n/a	n/a	n/a
	Low (2.5% limit)	0.64	0.49	0.44	0.51		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<sup>\*1</sup>, 2015-2018**

Measure Name		This Facility					Regional Averages <sup>*2</sup> , per Year, 2015-2018		
		2015	2016	2017	2018	2015-2018	State	Network	U.S.
All Transplants									
5a	Eligible patients (n)	155	144	148	146	593 <sup>*10</sup>	77.6	66.5	73.5
5b	Transplants (n)	5	2	11	7	25 <sup>*10</sup>	2.0	1.5	2.1
5c	Donor type (sums to 5b) <sup>*3</sup>								
	Living donor (n)	1	0	0	2	3 <sup>*10</sup>	0.3	0.3	0.5
	Deceased donor (n)	4	2	11	5	22 <sup>*10</sup>	1.7	1.2	1.6
First Transplants									
5d	Eligible patients (n)	139	132	133	133	537 <sup>*10</sup>	72.3	62.5	68.0
5e	Patient years (PY) at risk (n)	107.5	101.1	107.0	96.2	411.8 <sup>*10</sup>	53.7	45.9	46.5
5f	First transplants <sup>*4</sup> (n)	4	2	10	6	22 <sup>*10</sup>	1.8	1.4	1.8
5g	Expected first transplants (n)	6.2	7.7	8.4	7.4	29.6 <sup>*10</sup>	2.1	1.8	1.8
Standardized 1st Transplantation Ratio (STR) <sup>*5</sup>									
5h	STR <sup>*6</sup>					0.74	0.82	0.74	1.00
5i	P-value <sup>*7</sup>					0.177	n/a	n/a	n/a
5j	Confidence interval for STR <sup>*8</sup>								
	High (97.5% limit)					1.12	n/a	n/a	n/a
	Low (2.5% limit)					0.46	n/a	n/a	n/a
5k	STR percentiles for this facility <sup>*9</sup>								
	In this State					57	n/a	n/a	n/a
	In this Network					60	n/a	n/a	n/a
	In the U.S.					40	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 2015-2018, 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 1.2% 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 (2015-2018) & New Dialysis Patients (2015-2017) under Age 75<sup>\*1</sup>**

		This Facility				Regional Averages <sup>*2</sup> , 2018		
	Measure Name	2015	2016	2017	2018	State	Network	U.S.
<b>All Dialysis Patients</b>								
6a	Eligible patients (n)	150	150	156	144	82.1	70.3	68.7
6b	Patient-months at risk (n) <sup>*3</sup>	1385	1367	1410	1271	696.3	591.8	577.0
6c	<b>Patient-months on the waitlist (% of 6b)</b>	<b>28.5</b>	<b>29.7</b>	<b>25.0</b>	<b>23.6</b>	<b>14.2</b>	<b>16.9</b>	<b>19.2</b>
6d	Patient-months on the waitlist by subgroup (%) <sup>*3 *4</sup>							
	Age < 40	54.6	53.8	48.0	44.4	23.7	26.2	29.4
	Age 40-74	21.2	22.5	18.0	17.6	13.1	15.8	18.0
	Male	23.6	21.0	16.0	14.3	14.7	17.8	20.5
	Female	34.6	39.4	36.0	37.1	13.5	15.6	17.4
	African American	23.9	26.9	22.4	24.7	13.2	16.3	18.1
	Asian/Pacific Islander	55.8	59.7	36.0	7.4	24.6	30.2	28.4
	Native American	.	.	33.3	.	14.0	14.6	12.6
	White, Hispanic	25.2	20.3	18.2	13.2	13.1	20.5	20.8
	White, non-Hispanic	37.6	33.3	29.9	26.2	15.8	17.0	18.1
	Other/unknown race	.	.	.	.	5.5	13.6	22.1
	Diabetes	18.8	18.7	18.2	19.8	10.7	13.0	15.4
	Non-diabetes	35.0	36.5	29.5	25.9	16.9	19.4	22.4
	Previous kidney transplant	48.0	45.8	40.0	43.0	28.6	34.3	32.9
	No previous kidney transplant	26.1	28.0	23.5	21.4	13.1	15.7	18.1
	< 2 years since start of ESRD	19.8	25.9	19.8	21.9	12.6	11.9	14.0
	2-4 years since start of ESRD	41.6	38.8	33.1	26.5	18.5	21.9	23.6
	5+ years since start of ESRD	23.4	24.7	24.0	23.5	12.1	17.1	20.5
6e	Age-adjusted percentage of patient-months waitlisted <sup>*5</sup>	26.5	27.1	23.3	22.0	13.8	16.5	18.7
6f	P-value <sup>*6</sup>	0.479	0.315	0.518	0.580	n/a	n/a	n/a
6g	Confidence interval for percent waitlisted <sup>*7</sup>							
	High (97.5% limit)	41.0	42.1	37.1	36.7	n/a	n/a	n/a
	Low (2.5% limit)	15.8	16.0	13.6	12.1	n/a	n/a	n/a
<b>New Dialysis Patients</b>		<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2015-2017</b>	<b>2015-2017 <sup>*2</sup></b>		
6h	Eligible patients (n)	16	25	18	59	12.2	10.4	10.8
6i	Patient-years (PY) at risk (n)	13	24	16	54	11.0	9.2	9.5
6j	First waitlist events (n) <sup>*8</sup>	3	4	2	9	0.9	0.8	1.0
6k	Expected 1st waitlist events (n) <sup>*8</sup>	3	5	3	11	1.2	1.0	1.0
6l	Standardized Waitlist Ratio (SWR) <sup>*8 *9</sup>				0.83	0.76	0.83	1.00
6m	P-value <sup>*6</sup>				0.702	n/a	n/a	n/a
6n	Confidence interval for SWR <sup>*7</sup>							
	High (97.5% limit)				1.57	n/a	n/a	n/a
	Low (2.5% limit)				0.38	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 31<sup>st</sup> of Each Year<sup>\*1</sup>, Flu Seasons August 2015-December 2018**

Measure Name	This Facility				Regional Averages <sup>*2</sup>		
	2015	2016	2017	2018	State	Network	U.S.
						<b>2018</b>	
7a Eligible patients on 12/31 (n)	97	85	74	80	52.9	44.4	42.4
7b Patients vaccinated between Aug. 1 and Dec. 31 (% of 7a)	76.3	65.9	71.6	70.0	78.4	75.5	73.0
7c P-value <sup>*3</sup> (for 7b compared to U.S. value <sup>*4</sup> )	0.293	0.309	0.472	0.310	n/a	n/a	n/a
						<b>2017</b>	
<b>7d Patients vaccinated between Aug 1 and Mar 31 of following year (% of 7a)</b>	<b>76.3</b>	<b>67.1</b>	<b>71.6</b>		<b>79.4</b>	<b>76.0</b>	<b>73.3</b>
7e P-value <sup>*3</sup> (for 7d compared to U.S. value <sup>*5</sup> )	0.336	0.344	0.415		n/a	n/a	n/a
						<b>2018</b>	
7f Patients vaccinated between Aug 1 and Dec 31 by subgroup (%) <sup>*6</sup>							
Age < 18	100	50.0	80.0	100	63.6	54.9	56.1
Age 18-39	54.5	20.0	42.9	50.0	72.7	69.3	68.6
Age 40-64	79.2	75.7	71.9	64.3	78.6	75.9	73.2
Age 65-74	78.9	54.2	78.9	77.3	79.1	76.1	73.1
Age 75+	75.0	100	72.7	70.6	79.3	76.4	73.8
Male	82.7	73.3	81.3	78.4	78.5	75.5	73.0
Female	68.9	57.5	53.8	55.2	78.4	75.6	73.0
African American	75.0	72.1	71.8	76.3	77.8	74.7	70.2
Asian/Pacific Islander	100	80.0	33.3	100	89.1	84.0	75.9
Native American	.	.	.	.	85.7	84.7	80.2
White	74.3	56.8	75.0	62.5	78.7	76.6	74.3
Other/unknown race	.	.	.	.	81.3	74.1	70.8
Hispanic	75.0	100	100	100	82.7	79.8	73.7
< 1 year since start of ESRD	55.6	50.0	92.3	42.9	66.2	61.8	59.5
1-2 years since start of ESRD	70.0	50.0	76.9	77.3	77.8	73.0	71.4
3+ years since start of ESRD	80.9	74.5	64.6	75.0	81.0	79.0	76.7

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): 73.3% (2015), 68.9% (2016), 72.5% (2017), 73.0% (2018).

[\*5] Compared to the U.S. value for that year and time period (8/1-3/31): 73.8% (2015), 69.6% (2016), 73.3% (2017).

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

**TABLE 8: Anemia Management Summaries for Adult Dialysis Patients<sup>\*1</sup>, 2015-2018**

Measure Name		This Facility				Regional Averages <sup>*2</sup> , 2018		
		2015	2016	2017	2018	State	Network	U.S.
<b>Hemoglobin and ESA for Adult Hemodialysis (HD) Patients</b>								
8a	Eligible patients (n)	127	122	128	124	87.1	73.2	76.3
8b	Eligible patient-months (n) <sup>*3</sup>	1,198	1,202	1,188	1,148	777.7	648.6	666.8
8c	Average hemoglobin <sup>*4</sup> (g/dL) (average of 8b)	10.9	10.9	11.0	10.9	10.8	10.8	10.8
8d	<b>Hemoglobin categories (% of 8b; sums to 100%)</b>							
	<10 g/dL	20.6	18.7	17.1	20.8	22.2	22.2	21.6
	10-<11 g/dL	31.6	34.9	32.6	34.3	33.4	33.5	34.8
	11-12 g/dL	26.9	30.4	30.2	26.7	29.5	29.1	29.5
	>12 g/dL	16.6	14.1	18.0	16.6	13.7	12.9	12.0
	Missing/Out of range	4.3	1.8	2.1	1.6	1.2	2.3	2.1
8e	ESA prescribed (% of 8b)	80.1	77.8	67.3	69.1	72.7	72.4	74.1
<b>Hemoglobin and ESA for Adult Peritoneal Dialysis (PD) Patients</b>								
8f	Eligible patients (n)	26	25	31	28	23.1	21.3	21.1
8g	Eligible patient-months (n) <sup>*3</sup>	265	217	232	183	180.5	168.6	167.0
8h	Average hemoglobin <sup>*4</sup> (g/dL) (average of 8g)	10.4	10.4	10.4	10.4	10.9	10.9	10.9
8i	<b>Hemoglobin categories (% of 8g; sums to 100%)</b>							
	<10 g/dL	26.4	33.6	37.9	32.8	22.6	23.0	23.3
	10-<11 g/dL	29.1	26.3	24.6	31.7	29.6	28.9	29.4
	11-12 g/dL	22.6	23.0	22.8	21.3	26.5	26.2	25.8
	>12 g/dL	7.9	9.2	11.6	9.3	19.1	18.7	18.1
	Missing/Out of range	14.0	7.8	3.0	4.9	2.2	3.2	3.4
8j	ESA prescribed (% of 8g)	10.2	61.8	52.6	62.3	58.4	57.1	56.7
<b>Standardized Transfusion Ratio (STrR)</b>								
8k	Eligible adult Medicare patients (n)	109	100	98	89	67.6	57.6	56.5
8l	Patient years (PY) at risk (n)	73	62	50	46	42.1	35.4	33.4
8m	Total transfusions (n)	12	12	10	15	14.9	13.2	12.3
8n	Expected total transfusions (n)	28.7	23.0	18.3	16.6	15.6	12.8	12.5
8o	Standardized Transfusion Ratio <sup>*5</sup>	0.42	0.52	0.55	0.91	0.95	1.02	1.01
	Upper Confidence Limit (97.5%)	1.18	1.45	1.69	2.24	n/a	n/a	n/a
	Lower Confidence Limit (2.5%)	0.17	0.22	0.20	0.40	n/a	n/a	n/a
8p	P-value <sup>*6</sup>	0.105	0.233	0.319	0.906	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 All Dialysis Patients<sup>\*1</sup>, 2015-2018**

Measure Name		This Facility				Regional Averages <sup>*2</sup> , 2018		
		2015	2016	2017	2018	State	Network	U.S.
<b>Hemodialysis (HD) Adequacy</b>								
9a	Eligible adult HD patients (n)	127	122	128	124	87.1	73.2	76.3
9b	Eligible adult HD patient-months (n) <sup>*3</sup>	1,198	1,202	1,188	1,148	777.7	648.6	666.8
9c	Average serum albumin (g/dL) (average of 9b)	3.9	3.8	3.8	3.8	3.8	3.8	3.8
9d	<b>Serum albumin categories (% of 9b; sums to 100%)</b>							
	< 3.0 g/dL	2.8	2.8	3.0	2.8	3.0	3.1	3.3
	3.0-<3.5 g/dL	8.4	9.2	10.4	10.7	12.0	12.1	12.6
	3.5-<4.0 g/dL	37.1	47.8	47.9	42.5	46.9	46.1	46.0
	>=4.0 g/dL	46.9	37.9	36.0	41.6	36.2	35.5	35.3
	Missing	4.8	2.2	2.7	2.4	2.0	3.3	2.9
9e	Ultrafiltration rate average <sup>*4</sup> (ml/kg/hr) (average of 9b)	7.2	7.5	7.6	7.3	7.4	7.6	7.7
9f	<b>Ultrafiltration rate categories (% of 9b; sums to 100%)</b>							
	<=13 ml/kg/hr	81.6	86.0	82.2	85.5	87.1	83.8	84.2
	>13 ml/kg/hr	9.1	8.7	10.3	8.1	7.0	8.2	8.5
	Missing/Out of range	9.3	5.2	7.5	6.4	5.9	8.0	7.3
9g	Eligible adult HD Kt/V patients (n) <sup>*5</sup>	109	104	110	107	81.5	70.1	73.4
9h	Eligible adult HD Kt/V patient-months (n) <sup>*3 *5</sup>	1,017	1,007	1,013	981	719.6	614.8	634.4
9i	Average Kt/V <sup>*4</sup> (average of 9h)	1.6	1.7	1.7	1.7	1.6	1.6	1.6
9j	<b>Kt/V categories (% of 9h; sums to 100%)</b>							
	<1.2	3.3	2.7	1.0	0.9	2.1	2.4	2.0
	1.2-<1.8	61.7	59.8	58.3	58.7	69.5	73.3	72.1
	>=1.8	32.7	36.4	39.0	39.4	27.1	22.4	24.3
	Missing/Out of range	2.3	1.1	1.7	0.9	1.3	1.8	1.5
<b>Peritoneal Dialysis (PD) Adequacy</b>								
9k	Eligible adult PD patients (n)	26	25	31	28	23.1	21.3	21.1
9l	Eligible adult PD patient-months (n) <sup>*3</sup>	265	217	232	183	180.5	168.6	167.0
9m	Average weekly Kt/V <sup>*4 *5</sup> (average of 9l)	2.2	2.4	2.3	2.1	2.3	2.2	2.3
9n	<b>Weekly Kt/V categories (% of 9l; sums to 100%)<sup>*5</sup></b>							
	<1.7	7.9	4.1	3.4	3.8	3.5	4.1	4.8
	1.7-<2.5	61.1	59.4	67.2	69.9	69.2	68.9	66.5
	>=2.5	23.0	32.3	27.2	23.5	25.0	23.9	24.8
	Missing/Out of range	7.9	4.1	2.2	2.7	2.3	3.1	3.9
9o	Average serum albumin (g/dL) (average of 9l)	3.4	3.4	3.4	3.5	3.5	3.5	3.5
9p	<b>Serum albumin categories (% of 9l; sums to 100%)</b>							
	< 3.0 g/dL	14.3	15.2	9.1	10.9	11.0	11.4	10.3
	3.0-<3.5 g/dL	30.9	31.3	34.5	26.2	30.6	30.3	29.4
	3.5-<4.0 g/dL	30.9	36.9	43.1	48.1	42.0	41.2	41.8
	>=4.0 g/dL	10.2	8.8	9.5	9.8	14.3	14.0	15.1
	Missing	13.6	7.8	3.9	4.9	2.1	3.1	3.4

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<sup>\*1</sup>, 2015-2018**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2018		
	2015	2016	2017	2018	State	Network	U.S.
10a Eligible adult patients (n) <sup>*3</sup>	150	144	157	151	93.2	79.9	83.1
10b Eligible adult patient-months (n) <sup>*3 *4</sup>	1,467	1,424	1,421	1,332	833.3	708.6	727.8
10c Average phosphorous <sup>*5</sup> (mg/dL) (average of 10b <sup>*6</sup> )	5.3	5.3	5.6	5.5	5.4	5.3	5.3
<b>10d Phosphorous categories (% of 10b; sums to 100%)<sup>*6</sup></b>							
<3.5 mg/dL	8.6	7.5	5.9	7.1	8.7	8.8	8.2
3.5-4.5 mg/dL	25.8	28.2	24.4	23.7	23.8	23.8	24.3
4.6-5.5 mg/dL	25.6	27.3	26.6	26.8	28.8	28.9	30.0
5.6-7.0 mg/dL	22.0	18.3	23.3	25.3	22.6	21.6	21.2
>7.0 mg/dL	11.8	15.6	16.9	14.2	14.2	13.8	13.3
Missing/Out of range	6.1	3.1	2.9	2.8	1.9	3.1	2.9
10e Average calcium uncorrected <sup>*5</sup> (mg/dL) (average of 10b)	8.8	8.8	8.7	8.7	8.9	8.9	8.9
<b>10f Calcium uncorrected categories (% of 10b; sums to 100%)</b>							
<8.4 mg/dL	19.9	20.9	24.6	27.2	17.8	17.7	17.2
8.4-10.2 mg/dL	71.4	74.8	72.0	69.6	79.2	78.1	78.8
>10.2 mg/dL	1.6	1.0	0.4	0.4	1.3	1.4	1.3
Missing/Out of range	7.0	3.3	3.1	2.9	1.7	2.8	2.7
10g Average uncorrected serum or plasma calcium > 10.2 mg/dL <sup>*5 *7</sup>	4.6	2.1	1.4	1.4	1.3	2.0	2.0

[\*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 phosphorous 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 phosphours 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<sup>\*1</sup>, 2015-2018**

Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2018		
	2015	2016	2017	2018	State	Network	U.S.
<b>Vascular Access</b>							
11a Prevalent adult hemodialysis patients (n)	126	130	131	130	91.9	77.1	80.5
11b Prevalent adult hemodialysis patient-months(n) <sup>*3 *4</sup>	1,215	1,239	1,208	1,180	808.8	672.5	693.9
<b>11c Vascular access type in use (% of 11b; sums to 100%)</b>							
Arteriovenous fistula	54.7	55.0	52.1	54.7	63.5	60.7	63.4
Arteriovenous graft	13.6	17.1	18.7	15.1	19.0	21.8	17.8
Catheter	27.2	26.3	27.0	28.6	15.9	14.7	16.6
Other/Missing	4.5	1.5	2.2	1.6	1.6	2.8	2.2
11d Standardized Fistula Rate (SFR) <sup>*5</sup>	52.7	52.0	50.9	53.9	61.8	59.1	63.0
11e P-value <sup>*6</sup>	0.294	0.221	0.156	0.276	n/a	n/a	n/a
11f Confidence interval for SFR <sup>*7</sup>							
High (97.5% limit)	34.9	33.0	32.4	35.5	n/a	n/a	n/a
Low (2.5% limit)	69.2	69.5	67.9	70.9	n/a	n/a	n/a
<b>11g Long-Term Catheter Rate<sup>*8</sup></b>	<b>19.5</b>	<b>23.2</b>	<b>23.6</b>	<b>24.2</b>	<b>11.6</b>	<b>11.1</b>	<b>12.4</b>
<b>Vascular Access at First Treatment</b>							
11h Incident hemodialysis patients (n)	14	21	17	18	15.2	13.1	14.9
11i Vascular access type in use (% of 11h; sums to 100%)							
Arteriovenous fistula	21.4	4.8	17.6	11.1	20.2	16.0	15.3
Arteriovenous graft	7.1	9.5	5.9	5.6	4.8	4.4	3.4
Catheter	71.4	85.7	76.5	72.2	71.0	74.5	76.0
Other/Missing	0.0	0.0	0.0	11.1	4.0	5.1	5.3
11j Arteriovenous fistulae in place (% of 11h) <sup>*9</sup>	28.6	9.5	23.5	16.7	21.6	17.4	16.8
<b>Infection: Peritoneal dialysis (PD)</b>							
11k Eligible PD patients (n)	27	21	25	23	8.8	7.8	7.2
11l Eligible PD patient-months <sup>*4</sup>	238	169	170	143	62.5	55.9	50.5
11m PD catheter infection rate per 100 PD patient-months <sup>*10</sup>	5.88	2.96	8.24	2.10	2.21	2.33	2.07
11n P-value <sup>*11</sup> of 11m (compared to U.S. value) <sup>*12</sup>	<0.01	0.464	<0.01	0.570	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; not shown if fewer than 11 eligible adult HD patients.

[\*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 (2015), 2.65 (2016), 2.65 (2017), and 2.07 (2018).

**TABLE 12: Comorbidities Reported on Medicare Claims for Medicare Dialysis Patients Treated as of December 31st of Each Year<sup>\*1</sup>, 2015-2018**

	Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2018		
		2015	2016	2017	2018	State	Network	U.S.
12a	Medicare dialysis patients on 12/31 (n)	103	102	89	94	56.7	48.1	46.4
12b	Comorbidity (% yes of 12a)							
	<b>Infections</b>							
	AIDS/HIV positive	3.9	2.9	2.2	3.2	2.4	2.6	1.7
	Intravascular/implanted device-related <sup>*3</sup>	13.6	12.7	13.5	11.7	8.5	9.3	9.0
	Hepatitis B	2.9	2.0	1.1	2.1	1.3	1.3	1.6
	Hepatitis other	6.8	8.8	12.4	10.6	5.2	4.8	5.3
	Metastatic	3.9	2.9	2.2	3.2	2.6	2.8	3.1
	Pneumonia	2.9	5.9	4.5	7.4	8.6	8.8	9.6
	Tuberculosis	0.0	0.0	1.1	0.0	0.2	0.2	0.4
	Other	38.8	41.2	33.7	38.3	32.2	32.8	35.0
	<b>Cardiovascular</b>							
	Cardiac arrest	0.0	1.0	5.6	2.1	1.8	1.7	1.8
	Cardiac dysrhythmia	47.6	35.3	31.5	38.3	33.8	33.3	37.6
	Cerebrovascular disease	16.5	16.7	20.2	18.1	22.1	23.9	24.6
	Congestive heart failure	45.6	43.1	49.4	42.6	53.0	53.2	54.0
	Ischemic heart disease	37.9	36.3	46.1	43.6	43.1	43.1	49.6
	Myocardial infarction	11.7	5.9	11.2	12.8	8.7	8.6	10.8
	Peripheral vascular disease <sup>*4</sup>	40.8	31.4	42.7	40.4	41.7	40.2	44.6
	<b>Other</b>							
	Alcohol dependence	5.8	8.8	6.7	2.1	2.8	2.6	3.1
	Anemia	3.9	7.8	10.1	4.3	6.9	9.6	9.9
	Cancer	10.7	12.7	12.4	20.2	10.7	10.5	11.3
	Chronic obstructive pulmonary disease	37.9	34.3	27.0	25.5	32.1	30.8	31.9
	Diabetes	54.4	52.9	56.2	51.1	66.1	65.7	68.2
	Drug dependence	1.9	8.8	3.4	3.2	4.0	3.3	3.7
	Gastrointestinal tract bleeding	2.9	2.0	3.4	0.0	4.2	4.3	4.2
	Hyperparathyroidism	81.6	67.6	65.2	73.4	90.8	90.4	87.5
12c	Average number of comorbid conditions	4.7	4.4	4.6	4.5	4.8	4.8	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 <sup>\*1</sup>, 2018**

Measure Name		This Facility	Regional Averages <sup>*2</sup> , 2018		
		2018	State	Network	U.S.
13a	Organization	SAMPLE MEDICAL CARE(SMC)			
13b	Ownership	Non-profit			
13c	Initial Medicare certification date	07/01/2002			
13d	Number of stations	41			
13e	Services provided	Hemodialysis and Peritoneal Dialysis			
13f	Shifts after 5:00 pm	.			
13g	Dialyzer Reuse	.			
13h	CMS Certification Numbers (CCN) included in this report	999999			
13i	National Provider Identifier (NPI) <sup>*3</sup>	1234567890			
<b>Long Term Care (LTC) <sup>*4</sup></b>					
13j	Dialysis facility located in a Skilled Nursing Facility (SNF)	No			
13k	Services provided in LTC facility by non-SNF based facility	None			
<b>Patient Placement</b>					
13l	Patients treated during year from AFS Form-2744 (n)	191	110.0	94.4	101.4
13m	Transferred into facility (% of 13l)	8.4	13.8	15.7	15.5
13n	Transferred out of facility (% of 13l)	8.9	13.5	15.4	15.5
13o	Patients treated on 12/31 (n)	145	n/a	n/a	n/a
13p	Medicare eligibility status (% of 13o; sums to 100% <sup>*5</sup> )		n/a	n/a	n/a
	Medicare	59.3	68.8	70.7	67.0
	Medicare application pending	0.7	0.2	0.6	0.7
	Non-Medicare	40.0	31.0	28.7	32.3
<b>Survey and Certification <sup>*6</sup></b>					
13q	Date of last survey	10/12/2017			
13r	Type of survey	Recertification			
13s	Compliance condition after survey	Meets Requirements			
13t	Number of CFC deficiencies cited	0	0.1	0.1	0.3
13u	Number of Standard deficiencies cited	3	4.3	3.8	5.1

n/a = not applicable

[\*1] See *Guide, Section XVI*. Information based on data reported in CROWNWeb as of May, 2019. If missing, data were not available.

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

[\*3] 'NPI' obtained from CROWNWeb as of March 2019. 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. 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<sup>\*1</sup>, 2015-2018**

Measure Name		This Facility				Regional Averages <sup>*2</sup> , 2018		
		2015	2016	2017	2018	State	Network	U.S.
<b>Patient Characteristics</b>								
14.1a	Patients treated on 12/31 (n)	9	11	7	8	n/a	n/a	n/a
14.1c	Age (% of 14.1a; sums to 100%)							
	< 5	0.0	9.1	14.3	0.0	16.3	14.4	27.5
	5-9	22.2	18.2	28.6	12.5	14.0	14.4	17.2
	10-14	33.3	18.2	28.6	25.0	27.9	29.9	27.7
	15-17	44.4	54.5	28.6	62.5	41.9	41.2	27.7
14.1d	Female (% of 14.1a)	22.2	45.5	42.9	25.0	37.2	41.2	43.1
14.1e	Race (% of 14.1a; sums to 100%) <sup>*3</sup>							
	African American	66.7	45.5	71.4	75.0	55.8	59.8	28.8
	Asian/Pacific Islander	0.0	9.1	0.0	0.0	0.0	0.0	4.4
	Native American	0.0	0.0	0.0	0.0	0.0	1.0	1.5
	White	33.3	45.5	28.6	25.0	41.9	38.1	63.2
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	2.3	1.0	2.0
14.1f	Ethnicity (% of 14.1a; sums to 100%)							
	Hispanic	11.1	18.2	0.0	0.0	9.3	11.3	30.1
	Non-Hispanic	88.9	81.8	100	75.0	83.7	84.5	68.9
	Unknown	0.0	0.0	0.0	25.0	7.0	4.1	1.0
14.1g	Cause of ESRD (% of 14.1a; sums to 100%)							
	Diabetes	0.0	0.0	0.0	0.0	0.0	0.0	1.9
	Hypertension	0.0	0.0	0.0	0.0	0.0	2.1	3.4
	Glomerulonephritis	44.4	36.4	14.3	25.0	44.2	38.1	29.9
	Cystic Kidney	0.0	18.2	28.6	25.0	20.9	21.6	25.0
	Congenital/Hereditary	22.2	9.1	14.3	25.0	11.6	13.4	14.9
	Hemolytic Uremic Syndrome	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	Other	11.1	18.2	14.3	0.0	16.3	19.6	20.5
	Unknown/Missing	22.2	18.2	28.6	25.0	7.0	5.2	4.4
14.1i	Years since start of ESRD (% of 14.1a; sums to 100%)							
	< 1	33.3	36.4	28.6	25.0	23.3	32.0	28.6
	1-2	22.2	27.3	28.6	25.0	23.3	22.7	23.8
	2-3	11.1	18.2	14.3	12.5	20.9	17.5	13.7
	3-6	22.2	9.1	28.6	12.5	11.6	12.4	17.0
	6+	11.1	9.1	0.0	25.0	20.9	15.5	16.8
14.1k	Modality (% of 14.1a; sums to 100%)							
	In-center hemodialysis	22.2	27.3	42.9	50.0	51.2	47.4	47.2
	Home hemodialysis	0.0	0.0	0.0	0.0	2.3	1.0	1.0
	Continuous ambulatory peritoneal dialysis	0.0	0.0	0.0	0.0	2.3	1.0	0.4
	Continuous cycling peritoneal dialysis	77.8	72.7	57.1	37.5	41.9	49.5	50.7
	Other modality <sup>*4</sup>	0.0	0.0	0.0	12.5	2.3	1.0	0.7

(continued)

**TABLE 14 (cont.): Selected Measures for Dialysis Patients under Age 18<sup>\*1</sup>, 2015-2018**

	Measure Name	This Facility				Regional Averages <sup>*2</sup> , 2018		
		2015	2016	2017	2018	State	Network	U.S.
	<b>Characteristics of New Dialysis Patients</b>							
14.2a	Total number of patients with forms (n)	6	5	3	2	n/a	n/a	n/a
14.2g	Medical coverage (% of 14.2a; sums to 100%)							
	Employer group only	16.7	0.0	0.0	0.0	31.6	19.0	17.6
	Medicare (alone or combined w/ other insurance)	0.0	0.0	0.0	0.0	5.3	6.9	22.4
	Medicaid only	83.3	100	100	100	63.2	69.0	43.8
	Other/Unknown/None	0.0	0.0	0.0	0.0	0.0	5.2	16.2
14.2k	Number of incident hemodialysis patients (n)	2	2	1	0	n/a	n/a	n/a
14.2l	Access used at first outpatient dialysis (% of 14.2k; sums to 100%)							
	Arteriovenous fistula	0.0	0.0	0.0	.	0.0	0.0	4.0
	Arteriovenous graft	0.0	0.0	0.0	.	0.0	0.0	0.4
	Catheter	100	100	100	.	100	100	95.3
	Other/Unknown/Missing	0.0	0.0	0.0	.	0.0	0.0	0.2
14.2m	Arteriovenous fistulae placed (% of 14.2k)	50.0	0.0	0.0	.	12.5	13.8	9.2
14.2s	Pre-ESRD nephrologist care (% of 14.2a; sums to 100%)							
	No	0.0	0.0	0.0	0.0	10.5	12.1	19.5
	Yes, < 6 months	33.3	0.0	0.0	0.0	21.1	17.2	18.9
	Yes, 6-12 months	50.0	100	100	50.0	15.8	8.6	15.8
	Yes, > 12 months	16.7	0.0	0.0	50.0	52.6	31.0	35.4
	Unknown	0.0	0.0	0.0	0.0	0.0	31.0	10.4
14.2t	Informed of transplant options (% of 14.2a)	100	100	100	100	94.7	98.3	87.7
	<b>Death Rates</b>							
14.3a	Patients (n=number)	13	14	14	11	n/a	n/a	n/a
14.3b	Patient years (PY) at risk (n)	8.2	9.8	10.3	7.9	n/a	n/a	n/a
14.3c	Deaths (n)	0	1	0	0	n/a	n/a	n/a
	<b>Days Hospitalized Statistics</b>							
14.4a	Medicare dialysis patients (n)	5	3	4	6	n/a	n/a	n/a
14.4b	Patient years (PY) at risk (n)	4.0	2.2	3.6	4.6	n/a	n/a	n/a
14.4c	Total days hospitalized (n)	136	64	21	31	n/a	n/a	n/a
	<b>Admission Statistics</b>							
14.4i	Total admissions (n)	20	5	4	6	n/a	n/a	n/a
	<b>Transplantation</b>							
14.5d	Eligible patients (n)	11	13	13	10	n/a	n/a	n/a
14.5e	Patient years (PY) at risk (n)	6.4	8.8	9.6	7.0	n/a	n/a	n/a
14.5f	First transplants (n) <sup>*5</sup>	2	0	5	2	n/a	n/a	n/a
	<b>Waitlist</b>							
14.6a	Eligible patients (n)	16	15	16	12	n/a	n/a	n/a
14.6b	Eligible patients-months (n) <sup>*6</sup>	115	129	132	103	n/a	n/a	n/a
14.6c	Patients-months on the waitlist (% of 14.6b)	54.8	54.3	62.1	57.3	48.3	42.1	36.5
14.6d	Patient-months on the waitlist by age (%)							
	Age < 10	100	45.2	45.8	63.6	41.9	41.5	36.7
	Age 10-17	36.6	57.1	71.4	55.6	55.4	48.7	41.6

(continued)

**TABLE 14 (cont.): Selected Measures for Dialysis Patients under Age 18<sup>\*1</sup>, 2015-2018**

Measure Name		This Facility				Regional Averages <sup>*2</sup> , 2018		
		2015	2016	2017	2018	State	Network	U.S.
<b>Hemoglobin</b>								
14.8a	Eligible hemodialysis (HD) patients (n)	3	3	5	5	n/a	n/a	n/a
14.8b	Eligible HD patient-months (n) <sup>*6</sup>	16	29	31	52	n/a	n/a	n/a
14.8c	Average hemoglobin <sup>*6</sup> (g/dL) (average of 14.8b)	10.9	10.7	11.2	11.3	10.7	10.6	10.9
14.8d	Hemoglobin categories (% of 14.8b; sums to 100%)							
	< 10 g/dL	6.3	17.2	9.7	23.1	25.5	25.2	21.4
	10-<11 g/dL	37.5	41.4	22.6	9.6	25.9	28.5	26.4
	11-12 g/dL	56.3	37.9	48.4	28.8	30.6	30.0	31.2
	> 12 g/dL	0.0	3.4	16.1	25.0	12.0	12.1	17.4
	Missing/Out of Range	0.0	0.0	3.2	13.5	6.0	4.2	3.6
14.8f	Eligible peritoneal dialysis (PD) patients (n)	10	11	11	6	n/a	n/a	n/a
14.8g	Eligible PD patient-months (n) <sup>*6</sup>	76	80	85	35	n/a	n/a	n/a
14.8h	Average hemoglobin <sup>*6</sup> (g/dL) (average of 14.8g)	10.4	10.2	10.7	9.5	10.9	10.8	10.8
14.8i	Hemoglobin categories (% of 14.8g; sums to 100%)							
	< 10 g/dL	19.7	40.0	31.8	60.0	23.6	25.1	26.7
	10-<11 g/dL	14.5	31.3	20.0	11.4	24.5	22.9	24.0
	11-12 g/dL	11.8	6.3	14.1	11.4	28.3	28.1	23.5
	> 12 g/dL	7.9	11.3	16.5	0.0	16.3	18.4	18.4
	Missing/Out of Range	46.1	11.3	17.6	17.1	7.3	5.4	7.4
<b>Albumin</b>								
14.9a	Eligible HD patients (n)	3	3	5	5	n/a	n/a	n/a
14.9b	Eligible HD patient-months (n) <sup>*6</sup>	16	29	31	52	n/a	n/a	n/a
14.9c	Average serum albumin (g/dL) (average of 14.9b)	4.0	4.1	4.2	4.3	4.1	4.1	3.9
14.9d	Serum albumin categories (% of 14.9b; sums to 100%)							
	< 3.0 g/dL	0.0	0.0	0.0	0.0	0.9	0.4	3.0
	3.0-<3.5 g/dL	6.3	0.0	6.5	0.0	4.6	3.2	9.9
	3.5-<4.0 g/dL	31.3	37.9	12.9	5.8	24.5	28.5	32.2
	>=4.0 g/dL	62.5	62.1	77.4	80.8	63.9	63.4	50.9
	Missing	0.0	0.0	3.2	13.5	6.0	4.4	3.9
14.9k	Eligible PD patients (n)	10	11	11	6	n/a	n/a	n/a
14.9l	Eligible PD patient-months (n) <sup>*6</sup>	76	80	85	35	n/a	n/a	n/a
14.9o	Average serum albumin (g/dL) (average of 14.9l)	3.3	3.5	3.5	3.5	3.7	3.8	3.6
14.9p	Serum albumin categories (% of 14.9l; sums to 100%)							
	< 3.0 g/dL	9.2	10.0	2.4	11.4	10.7	7.1	11.9
	3.0-<3.5 g/dL	23.7	20.0	28.2	28.6	18.5	18.4	19.9
	3.5-<4.0 g/dL	15.8	48.8	42.4	31.4	20.2	30.0	32.3
	>=4.0 g/dL	5.3	7.5	8.2	14.3	42.5	39.1	28.0
	Missing	46.1	13.8	18.8	14.3	8.2	5.4	7.9
<b>Kt/V<sup>*7</sup></b>								
14.9g	Eligible hemodialysis (HD) patients (n) <sup>*8</sup>	3	3	5	5	n/a	n/a	n/a
14.9h	Eligible HD patient-months (n) <sup>*6 *8</sup>	16	29	31	51	n/a	n/a	n/a
14.9j	HD: Kt/V >= 1.2 (% of 14.9h) <sup>*9</sup>	100	100	100	100	96.1	97.0	92.7
14.9n	PD: Kt/V >= 1.8 (% of 14.9l) <sup>*9 *10</sup>	21.1	31.3	88.2	54.3	61.4	70.0	72.0

(continued)

**TABLE 14 (cont.): Selected Measures for Dialysis Patients under Age 18<sup>\*1</sup>, 2015-2018**

Measure Name		This Facility				Regional Averages <sup>*2</sup> , 2018		
		2015	2016	2017	2018	State	Network	U.S.
<b>Vascular Access<sup>*11</sup></b>								
14.11a	Eligible hemodialysis (HD) patients (n)	3	4	5	5	n/a	n/a	n/a
14.11b	Eligible patient-months (n) <sup>*6</sup>	19	33	33	52	n/a	n/a	n/a
14.11c	Arteriovenous Fistula in use (%)	0.0	18.2	48.5	40.4	31.8	25.6	24.3
14.11g	Long-Term Catheter Rate	63.2	72.7	36.4	50.0	50.2	56.4	57.4

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 2015-2018, 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 1.2% 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.