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This star rating is based on the measures reported in the QDFCC-Preview Report for the October 2020 Release. It has not been updated for the April 2023 refresh. The time period for SMR in this table is 2016-2019; all other measures are 2019. Important: The time period reflected for these measures do not match the time periods in Tables 1 and 4. Further description of the methodology can be found in *Section X* of the *Guide to the Quarterly Dialysis Facility Care Compare Report*.

Calculation Definition	This Facility
<b>6a Standardized Outcomes Domain Score</b> (average of 6c, 6e, 6g, and 6i) *2	-0.64
6b Standardized Mortality Ratio (SMR) *3	0.86
6c Measure Score: SMR *4	0.35
6d Standardized Hospitalization Ratio (Admissions) (SHR) *3	1.19
6e Measure Score: SHR *4	-1.02
6f Standardized Readmission Ratio (SRR) *3	1.19
6g Measure Score: SRR *4	-1.04
6h Standardized Transfusion Ratio (STrR) *3	1.64
6i Measure Score: STrR *4	-0.86
<b>6j Other Outcomes 1 Domain Score</b> *5 (average of 6l and 6n) *2	-1.14
6k Standardized Fistula Rate (SFR) (%) *6	47.71
6l Measure Score: SFR *4	-1.44
6m Long Term Catheter Rate (%) *6	17.41
6n Measure Score: Catheter *4	-0.83
<b>6o Other Outcomes 2 Domain Score</b> (average of 6u and 6w)	0.28
6p Adult HD: Percentage of patients with Kt/V >= 1.2 (%) *6	95.56
6q Adult PD: Percentage of patients with Kt/V >= 1.7 (%) *6	96.98
6r Pediatric HD: Percentage of patients with Kt/V >= 1.2 *6	100.00%
6s Pediatric PD: Percentage of patients with Kt/V >= 1.8 *6	50.00%
6t Overall: Percentage of patients with Kt/V >= specified threshold (%) *7	95.66
6u Measure Score: Kt/V *4	0.09
6v Percentage of patients with uncorrected serum or plasma calcium > 10.2 mg/dL (%) *6	1.24
6w Measure Score: Hypercalcemia *4	0.47
<b>6x Final Score (average of 6a, 6j, 6o)</b> *8 *9	-0.5003
<b>6y Quality of Patient Care Star Rating</b>	★ ★ ★ ☆ ☆

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