

2007 Dialysis Facility Report

Purpose of the Report

Enclosed is the *2007 Dialysis Facility Report (DFR)* for this facility, based on data from the Centers for Medicare & Medicaid Services (CMS).

This DFR includes data specific to provider number(s): 999995

These data could be useful in quality improvement and assurance activities. The information contained in this report facilitates comparisons of patient characteristics, treatment patterns, transplantation rates, hospitalization rates, and mortality rates to local and national averages. Some of these comparisons account for the patient mix at this facility, including age, sex, race, and diabetic status. This report 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.

In September 2007, each state's surveyors will receive the DFR for all dialysis facilities in their state.

This report also provides you with advance notice of the updated quality measures (urea reduction ratio, hematocrit, and patient survival) for your facility that will be reported on the Dialysis Facility Compare (DFC) website in November 2007 (www.medicare.gov).

Collaborators

CMS has contracted with the University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) and Arbor Research Collaborative for Health to produce the *2007 Dialysis Facility Reports*.

How to Submit Comments

Please visit www.ArborResearch.org/esrdmeasures and follow the instructions to send your comments to:

- **Dialysis Facility Compare:** Comment on the three DFC measures (see page 2) which will be reported on the DFC public website in November 2007. Your comments will **not** appear on the DFC website.
- **State Surveyor:** Comment on your DFR for the state surveyors. The state surveyors will receive a copy of your DFR in September 2007 with your comments.
- **UM-KECC:** Submit questions about your DFR to UM-KECC. You can also submit your suggestions to improve the DFR.

The deadline for submitting comments is September 10, 2007.

Dear Dialysis Facility Director:

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). It is the twelfth in a series of annual reports. This is one of 5,127 reports that have been sent to the ESRD Networks for distribution to ESRD providers in the U.S. Your state survey agency will receive this report in September 2007. Selected highlights from this report are given here. The information specific to this facility is printed in **bold type** for easy identification.

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 your 2007 DFR. The urea reduction ratio (URR) measure is now based on all Medicare hemodialysis patients with ESRD for at least 6 months, and the mortality summaries reported in Table 1 and used by DFC are now adjusted for nursing home status. In addition, new tables have been added to report comorbid conditions on dialysis claims (Table 9) and prior state survey deficiencies (Table 12). Please refer to the section entitled "What's New" in Section I of the *Guide to the 2007 Dialysis Facility Reports* for greater detail on these changes.

Dialysis Facility Compare: The URR and hematocrit measures were calculated for Medicare approved dialysis facilities operating at any time during 2006. The hematocrit measure was calculated only for patients treated with erythropoiesis stimulating agents (ESA). The patient survival measure was calculated for Medicare approved dialysis facilities operating at any time from 2003 through 2006. The following measures for this facility will appear on the DFC website:

Measure Name	This Facility
1. The percentage of Medicare hemodialysis patients treated in this facility during 2006 with URR \geq 65% <i>Number of patients included in calculation: 114</i>	80%
2. The percentage of Medicare patients treated in this facility during 2006 with ESA-treated hematocrit \geq 33% <i>Number of patients included in calculation: 119</i>	91%
3. Patient survival reported as "as expected," "better than expected," or "worse than expected" for the time period 2003-2006 for this facility <i>Standardized Mortality Ratio (SMR): 1.10</i> <i>Upper Confidence Limit: 1.27</i> <i>Lower Confidence Limit: 0.96</i>	As Expected

Please see Table 5 for more information on URR and ESA-treated hematocrit for this facility. URR and ESA-treated hematocrit measures based on 10 or fewer patients will be reported as "not available" on DFC. Table 1 provides additional information on patient survival. If the upper confidence limit for this facility's SMR is less than 0.8, the patient survival rate will be reported as "better than expected" on DFC. If the lower confidence limit is greater than 1.2, the patient survival rate for this facility will be reported as "worse than expected" on DFC. Otherwise, the patient survival rate will be reported as "as expected" on DFC.

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 2003 and December 2006. 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, including age, sex, race, ethnicity, and diabetes as a cause of ESRD. Unless otherwise specified, data refer to hemodialysis and peritoneal dialysis patients combined.

Summary data about the percent of patients with URR of 65% or higher, with hematocrit of 33% or higher, and with central catheters are included, as suggested by Kidney Disease Outcomes Quality Initiative (KDOQI) Clinical Practice Guidelines. These practice pattern measures are strongly correlated with the mortality and hospitalization measures found in these reports. Note that elevated mortality or hospitalization rates may be due to a variety of causes unrelated to clinical practices, so it may not always be possible to identify clinical practices that explain those rates.

Mortality: Mortality summaries are provided in Table 1. A Standardized Mortality Ratio (SMR) is calculated for each facility. Although mortality statistics can vary substantially from year to year, they are reported here as a key outcome for dialysis patients. The SMR compares the observed death rate in this facility to the death rate that would be expected based on national death rates for patients with the characteristics of the patients at this facility. Time at risk and deaths within 60 days after transfer out of this facility are attributed to this facility. Time at risk and deaths after transplantation are excluded from the analysis. The SMR is adjusted for patient age, sex, race, ethnicity, diabetes as a cause of ESRD, duration of ESRD, nursing home status, BMI at incidence, and comorbidities at incidence, as well as state population death rates. The rate of withdrawal from dialysis and the percentage of deaths due to infection are reported in the table to help in the interpretation of the mortality outcomes.

There was a 27% annual observed death rate among the patients treated at this facility during 2003-2006, while a rate of 24% would be expected, based on the age, sex, race, ethnicity, diabetes as cause of ESRD, duration of ESRD, nursing home status, BMI at incidence, comorbidities at incidence, and state population death rates. The SMR of observed to expected deaths is 1.10, which is not far (10%) above the national reference value of 1.00.

Hospitalization: Hospitalization summaries are reported for Medicare patients in Table 2. The total admission rate reports the total number of hospital admissions per year, including multiple admissions per patient, and is adjusted for age, race, sex, and diabetes. As in the mortality calculation, time at risk and hospitalizations within 60 days after transfer out of this facility are attributed to this facility. Time at risk and hospitalizations starting 3 days before transplantation are excluded from the analysis.

The Standardized Total Admission Ratio (STAR) of observed to expected number of admissions for patients for 2003-2005 at this facility is 1.08, which is 8% higher than expected.

Transplantation: Transplantation summaries are reported in Table 3. The Standardized Transplantation Ratio (STR) represents relative transplantation rates (observed/expected) for patients at this facility adjusting for patient age. Patients who are 70 or older as well as those with a prior kidney transplant are excluded. As in the mortality and hospitalization calculations, time at risk and transplants within 60 days after transfer out of this facility are attributed to this facility.

Of the patients under age 70 treated at this facility during 2003-2006 who had not previously received a transplant, 6.0% were transplanted annually, while a rate of 5.9% would be expected for these patients. The STR of observed to expected number of patients transplanted for this facility is 1.02, which is 2% higher than expected for this facility.

Transplant Waitlist: Table 4 summarizes waitlist information for patients under age 70 being treated at this facility at the end of each year. Unlike the mortality, hospitalization, and transplantation statistics, the waitlist statistics do not include patients who transferred out of the facility.

Among the 88 dialysis patients under age 70 treated at this facility on December 31, 2006, 33% were on the kidney transplant waitlist compared to 23% nationally. This difference is statistically significant ($p < 0.05$) and is unlikely to be due to random chance.

Practice Patterns: Table 5 summarizes dialytic modality, hematocrit, and the URR for patients treated at this facility during each year. These data are derived from Medicare paid dialysis claim data from CMS. Vascular access data for prevalent and incident patients as reported by the CMS Fistula First project are summarized in Table 6.

Among the 119 ESA-treated dialysis patients included in the analysis of Medicare claims data of hematocrit for 2006 at this facility, 91% had hematocrit above KDOQI minimum value for hematocrit ($HCT \geq 33\%$), compared to 92% nationally. Among the 114 hemodialysis patients in this facility included in the analysis of Medicare claims data of URR in 2006, 80% had URR above KDOQI minimum value for URR ($URR \geq 65\%$), compared to 95% nationally. Overall, mortality is 6% higher at facilities with this lower percentage of patients with high URR, compared to average facilities.

At this facility in 2006, 42% of prevalent patients had AV fistulae in place, compared to 52% nationally. Of the prevalent patients receiving hemodialysis treatment at this facility in 2006, 9% had a catheter which had been in place for more than 90 days as their only vascular access, compared to 12% nationally. See Tables 5 and 6 for more information about practice patterns.

Infection: Information on infection is reported on Table 2 (item 2i). The information in Table 2 is based on Medicare dialysis patient claims.

The percentage of Medicare dialysis patients at this facility hospitalized due to septicemia during 2003-2005 was 15.6%, compared to 11.3% nationally.

Patient Characteristics: Characteristics of patients starting dialysis during 2003-2006 are reported in Table 7. Table 8 gives summaries for all dialysis patients being treated at the end of each year, 2003-2006. Comorbidities are reported in Table 9 for Medicare dialysis patients being treated at the end of each year, 2003-2005.

There were 13 patients with Medical Evidence Forms (CMS-2728) which indicated that they started treatment at this facility during 2006. The average number of comorbidities reported for new patients is 3.2, which is higher than the average of 3.1 reported nationally. Also, 30.8% of these patients were not under the care of a nephrologist before starting dialysis, compared to 30.0% nationally. Furthermore, 92.3% of these patients were informed of their transplant options, compared to 71.2% nationally. The average serum albumin calculated for these patients (before first dialysis) is 3.4 g/dl, which is higher than the national average value of 3.1 g/dl. The average residual renal function (GFR) calculated for these patients from serum creatinine (before first dialysis) and other parameters was 13.2 ml/min, which is higher than the national average value of 10.6 ml/min.

Among patients treated at this facility on December 31, 2006, 12.9% were treated in a nursing home during the year, which is lower than the national average value of 13.1%. The average number of comorbidities reported on Medicare claims in 2005 for Medicare patients in this facility on December 31, 2005 is 4.0, which is lower than the national average value of 4.6.

Facility Information: General information about this facility is provided in Tables 11, 12, and 13. Table 11 provides counts of patients treated, Medicare eligibility, treatment modality, and staffing from the Annual Facility Survey (Form CMS-2744). Table 12 reports survey and certification activity. Table 13 includes services provided by this facility as well as information on ownership.

This facility reported having 23 staff members to care for 133 patients at the end of 2006. This facility reported having 21 stations available in April 2007. This facility offers both hemodialysis and peritoneal dialysis services. Additional information regarding patient counts, patient modality, and facility staffing is available in Table 11.

* * *

Sources of Patient Data: This report is based primarily on Medicare claims and data collected for CMS. Patients were assigned to this facility based on the Standard Information Management System (SIMS) database, Medicare claims, and Medical Evidence Forms (Form CMS-2728). Network 95 has a list of the patients included in the mortality analyses for this facility. Table 9 reports comorbidities reported on Medicare claims. Table 10 reports the number of patients placed in this facility for analyses in Tables 1, 2, 3, 8, and 9 of this report. Table 10 also provides information on patient status at the end of the year, both for patients who remain in this facility until the end of each year, and for those who transfer out of this facility, receive a transplant, or die during the year.

These are just a few highlights of the statistics you will find in this report based on the data for this facility. We hope that this report is of interest to you and that you will discuss it with your staff. We welcome any questions or comments you might have about the content of the current report or any suggestions you might have for future reports. Comments and suggestions can be submitted at www.ArborResearch.org/esrdmeasures until September 10, 2007. If you have questions after the comment period is over, please contact us directly at keccdf@umich.edu or (734)998-6611.

For a complete description of the methods used to calculate the statistics in this report, please see the *Guide to the 2007 Dialysis Facility Reports*. The *Guide* is available from ESRD Network 95, and is also on the UM-KECC web site at www.sph.umich.edu/kecc.

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

2007 Dialysis Facility Report

SAMPLE DIALYSIS CENTER State: XX Network: 95 CMS Provider#: 999995

TABLE 1: Mortality Summary for All Dialysis Patients¹, 2003-2006

Measure Name	This Facility					Regional Averages ² , per Year, 2003-2006		
	2003	2004	2005	2006	2003-2006	State	Network	U.S.
Death Rates								
1a Patients (n=number)	185	201	205	188		98.2	69.7	94.0
1b Patient years (PY) at risk (n)	135.8	142.8	148.0	127.8	554 ⁷	67.2	46.9	59.0
1c Deaths (n)	37	40	35	35	147 ⁷	14.9	10.8	13.2
1d Expected deaths (n)	32.9	34.9	35.5	29.8	133 ⁷	15.8	11.9	13.2
1e Death rate per 100 PY (% of 1b)	27.2	28.0	23.6	27.4	26.5	22.1	23.1	22.4
1f Expected death rate per 100 PY (% of 1b)	24.2	24.5	24.0	23.4	24.0	23.5	25.3	22.5
Categories of Death								
1g Withdrawal from dialysis prior to death (% of 1c)	40.5	45.0	28.6	40.0	38.8	27.3	33.3	23.0
1h Due to infections (% of 1c)	40.5	37.5	28.6	25.7	33.3	19.3	19.5	19.5
1i Dialysis unrelated deaths ³ (n; excluded from SMR)	0	0	0	0	0 ⁷	0.2	0.1	0.1
Standardized Mortality Ratio (SMR)								
1j SMR ⁴	1.13	1.15	0.98	1.17	1.10	0.94	0.91	1.00
1k P-value ⁵	0.26	0.22	0.51	0.19	0.13	n/a	n/a	n/a
1l Confidence interval for SMR ⁶								
High (95% limit)	1.48	1.49	1.31	1.55	1.27	n/a	n/a	n/a
Low (5% limit)	0.84	0.86	0.73	0.87	0.96	n/a	n/a	n/a
SMR Percentiles for this Facility (i.e. percent of facilities with lower mortality rates)								
1m In this State	64	74	59	81	78			
1n In this Network	70	75	63	82	81			
1o In the U.S.	60	66	52	74	69			

n/a = not applicable

[1] See *Guide, Section IV*.

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

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

[4] Calculated as a ratio of deaths (1c) to expected deaths (1d); not shown if there are too few expected deaths.

[5] A p-value less than or equal to 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 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] Sum of 4 years used for calculations; should not be compared to regional averages.

2007 Dialysis Facility Report

SAMPLE DIALYSIS CENTER State: XX Network: 95 CMS Provider#: 999995

TABLE 2: Hospitalization Summary for Medicare Dialysis Patients¹, 2003-2005

Measure Name	This Facility				Regional Averages ² , per Year, 2003-2005		
	2003	2004	2005	2003-2005	State	Network	U.S.
Medicare Dialysis Patients							
2a Medicare dialysis patients (n)	143	158	155		76.8	54.9	70.6
2b Patient years (PY) at risk ³ (n)	105.8	112.5	112.3	330.7 ⁵	52.7	37.1	44.0
Total Admission Count							
2c PY at risk for total admissions ³ (n)	100.8	107.3	108.1	316.1 ⁵	50.3	35.6	42.0
2d Total admissions (n)	247	235	222	704 ⁵	111.9	74.1	85.2
2e Expected total admissions (n)	205.6	220.5	225.4	651.4 ⁵	103.5	73.0	85.4
2f Observed admission rate per 100 PY	2.5	2.2	2.1	2.2	2.23	2.08	2.16
2g Expected admission rate per 100 PY	2.0	2.1	2.1	2.1	2.06	2.06	2.04
2h Standardized Total Admission Ratio ⁴	1.20	1.07	0.99	1.08	1.08	1.02	1.00
Diagnoses Present at Admission							
2i Septicemia (% of 2a)	14.0	13.9	18.7	15.6	14.5	12.0	11.3
2j Acute myocardial infarction (% of 2a)	7.0	4.4	6.5	5.9	6.3	5.4	4.2
Length of Stay							
2k Average length of stay (days per admission)	7.6	8.2	6.9	7.6	8.0	7.5	8.3
2l One day admissions (% of 2d)	17.8	16.6	19.8	18.0	12.5	14.6	14.0
2m Average days in the hospital per PY	17.6	17.0	13.6	16.1	17.0	15.0	16.1

n/a = not applicable

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

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

[3] Patient years at risk in 2b includes all time at risk. Patient years at risk for total admissions in 2c does not include time in the hospital.

[4] Standardized Total Admission Ratio calculated as ratio of actual (2d) to expected (2e) total admissions.

[5] Sum of 3 years used for calculations; should not be compared to regional averages.

TABLE 3: Transplantation Summary for Dialysis Patients under Age 70 who have not Previously Received a Transplant¹, 2003-2006

Measure Name	This Facility					Regional Averages ² , per Year, 2003-2006		
	2003	2004	2005	2006	2003-2006	State	Network	U.S.
Transplantation Rates (among eligible patients)								
3a Eligible patients ¹ (n)	117	130	135	110		59.0	38.8	57.5
3b Patient years (PY) at risk (n)	92.0	96.6	97.5	79.5	365.7 ⁷	41.0	26.4	37.0
3c Actual 1 st transplants ³ (n)	3	6	7	6	22 ⁷	2.9	2.4	2.2
3d Expected 1 st transplants (n)	5.3	5.6	5.7	4.9	21.5 ⁷	2.5	1.6	2.2
3e 1 st transplant rate per 100 PY (% of 3b)	3.3	6.2	7.2	7.5	6.0	7.1	8.9	6.1
3f Expected 1 st transplant rate per 100 PY at risk (% of 3b)	5.7	5.8	5.8	6.2	5.9	6.0	5.9	6.0
3g Number of deceased donor transplants (n)	1	5	5	6	17 ⁷	1.8	1.4	1.5
Standardized Transplantation Ratio (STR)								
3h STR ⁴	0.57	1.07	1.23	1.22	1.02	1.18	1.50	1.01
3i P-value ⁵	0.23	0.49	0.35	0.37	0.49	n/a	n/a	n/a
3j Confidence interval for STR ⁶								
High (95% limit)	1.47	2.10	2.31	2.41	1.46	n/a	n/a	n/a
Low (5% limit)	0.15	0.46	0.58	0.53	0.69	n/a	n/a	n/a
STR Percentiles for this Facility (i.e. percent of facilities with lower transplantation rates)								
3k In this State	29	42	57	58	39			
3l In this Network	20	35	47	48	27			
3m In the U.S.	34	59	66	67	56			

n/a = not applicable

[1] See *Guide, Section VI*.

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

[3] Among first transplants that occurred after the start of dialysis from 2003-2006, 4.5% of transplants in the U.S. were not included because the transplant occurred less than 90 days after the start of ESRD and 0.7% were not included because the patient was not assigned to a facility at time of transplant.

[4] Standardized Transplantation Ratio calculated as ratio of actual (3c) to expected (3d). Not shown if 3d is too small.

[5] A p-value less than or equal to 0.05 indicates that the difference between the actual and expected transplant rate is probably real and is not due to random chance, while a p-value greater than 0.05 indicates that the difference is plausibly due to random chance.

[6] The confidence interval range represents uncertainty in the value of the STR due to random variation.

[7] Sum of 4 years used for calculations; should not be compared to regional averages.

TABLE 4: Waitlist Summary for Dialysis Patients under Age 70 Treated as of December 31st of Each Year¹, 2003-2006

Measure Name	This Facility				Regional Averages ² , 2006		
	2003	2004	2005	2006	State	Network	U.S.
4a Eligible patients on 12/31 ¹ (n)	108	113	97	88	52.3	35.1	46.6
4b Patients on the waitlist (% of 4a)	25.0	23.9	33.0	33.0	25.4	25.6	22.9
4c P-value ³ (compared to U.S. value)	0.22	0.35	0.01	0.02	n/a	n/a	n/a
4d Patients on the waitlist by subgroup (% of corresponding value in 4e)							
Age < 20	.	.	100	.	45.0	33.9	31.5
Age 20-69	25.0	23.9	32.3	33.0	25.2	25.5	22.8
Male	27.6	29.3	32.7	33.3	26.7	26.6	23.8
Female	22.0	18.2	33.3	32.6	23.7	24.4	21.7
African American	30.5	32.1	39.2	30.8	23.6	24.0	20.9
Asian/Pacific Islander	100	.	.	.	40.0	45.0	35.1
Native American	.	0.0	0.0	.	37.8	24.7	17.8
White, Hispanic	50.0	0.0	0.0	50.0	25.6	23.5	25.1
White, Non-Hispanic	15.2	16.4	28.6	36.4	26.8	26.3	22.8
Other/unknown race	.	.	0.0	0.0	15.6	15.6	26.7
Diabetes	27.1	22.6	28.0	28.9	20.0	20.3	17.3
Non-diabetes	23.3	25.0	38.3	37.2	29.2	29.6	27.1
Previous kidney transplant	33.3	22.2	50.0	55.6	52.2	48.7	45.3
No previous kidney transplant	24.0	24.0	31.0	30.4	22.5	22.8	20.7
< 2 years since start of ESRD	13.3	15.7	31.1	32.4	18.3	18.6	14.9
2-4 years since start of ESRD	32.3	25.0	33.3	30.8	30.6	30.6	26.9
5+ years since start of ESRD	34.4	36.7	35.7	35.7	30.3	31.4	29.8
4e Eligible patients in 4a by subgroup (n)							
Age < 20	0	0	1	0	0.4	0.3	0.4
Age 20-69	108	113	96	88	51.9	34.8	46.1
Male	58	58	49	45	29.4	19.8	26.0
Female	50	55	48	43	23.0	15.3	20.5
African American	59	56	51	52	26.8	13.9	19.6
Asian/Pacific Islander	1	0	0	0	0.7	0.9	2.1
Native American	0	1	1	0	0.3	1.3	0.8
White, Hispanic	2	1	2	2	1.6	1.4	6.5
White, Non-Hispanic	46	55	42	33	22.6	17.4	16.6
Other/unknown race	0	0	1	1	0.2	0.2	1.0
Diabetes	48	53	50	45	21.7	15.1	20.2
Non-diabetes	60	60	47	43	30.7	20.1	26.4
Previous kidney transplant	12	9	10	9	5.1	3.8	4.2
No previous kidney transplant	96	104	87	79	47.2	31.3	42.4
< 2 years since start of ESRD	45	51	45	34	21.8	15.2	18.8
2-4 years since start of ESRD	31	32	24	26	16.0	10.5	14.3
5+ years since start of ESRD	32	30	28	28	14.5	9.4	13.4

n/a = not applicable

[1] See *Guide, Section VII*.

[2] Values are shown for the average facility.

[3] Facility waitlist percentage is compared to the U.S. waitlist percentage for that year: 21.6% (2003), 22.0% (2004), 22.5% (2005), 22.9% (2006).

A p-value greater than 0.05 indicates that the difference between percent of patients waitlisted at the facility and national percentage is plausibly due to random chance.

2007 Dialysis Facility Report

SAMPLE DIALYSIS CENTER State: XX Network: 95 CMS Provider#: 999995

TABLE 5: Facility Modality, Hematocrit, and Urea Reduction Ratio¹, 2003-2006

Measure Name	This Facility				Regional Averages ² , 2006		
	2003	2004	2005	2006	State	Network	U.S.
Modality (among all dialysis patients with ESRD for 90+ days and 1+ claim at this facility)							
5a Patients treated during year ¹ (n)	142	161	163	162	94.7	69.8	78.4
5b Modality (% of 5a; sums to 100%)							
Hemodialysis	83.1	84.5	84.0	85.8	90.6	91.2	91.7
CAPD/CCPD	11.3	11.8	12.9	8.0	5.2	5.4	5.7
Other dialysis ³	5.6	3.7	3.1	6.2	4.1	3.3	2.6
Hematocrit (among ESA-treated dialysis patients with ESRD for 90+ days and 4+ hematocrit claims at this facility)							
5c Eligible patients ¹ (n)	111	116	123	119	63.1	43.4	49.1
5d Average hematocrit (%)	37.6	36.7	37.9	35.7	36.2	36.0	35.9
5e Hematocrit categories (% of 5c; sums to 100%)							
< 30.0 %	0.9	0.9	1.6	1.7	1.6	1.5	1.5
30.0-32.9 %	4.5	8.6	3.3	7.6	6.1	6.1	6.4
33.0-35.9 %	18.9	26.7	14.6	37.0	37.0	40.8	42.4
36.0-38.9 %	45.9	50.0	48.8	51.3	45.8	43.8	43.5
39+ %	29.7	13.8	31.7	2.5	9.5	7.8	6.2
5f Hematocrit 33+ (% of 5c; meets a KDOQI guideline)	94.6	90.5	95.1	90.8	92.3	92.4	92.1
5g Confidence interval for hematocrit 33+							
High (95% limit)	97.5	94.6	97.7	94.8	n/a	n/a	n/a
Low (5% limit)	88.7	83.8	89.8	84.2	n/a	n/a	n/a
5h Hematocrit percentiles for this facility ⁴							
In this State	71	40	65	33			
In this Network	69	37	63	32			
In the U.S.	75	38	64	32			
5i Hematocrit 33+ (% of HD pts)	95.2	92.6	97.3	92.0	92.8	92.8	92.4
Hematocrit 33+ (% of PD pts)	69.2	72.7	78.6	66.7	80.3	81.3	80.6
Urea Reduction Ratio (URR; among HD patients with ESRD for 183+ days and 4+ URR claims at this facility)							
5j Eligible patients ¹ (n)	107	112	106	114	60.5	42.9	48.8
5k URR categories (% of 5j; sums to 100%)							
< 60.0 %	3.7	0.0	8.5	5.3	1.9	2.2	1.9
60.0-64.9 %	2.8	5.4	10.4	14.9	3.5	4.0	3.6
65.0-69.9 %	34.6	41.1	46.2	44.7	14.3	15.4	13.0
70.0-74.9 %	43.9	42.9	30.2	25.4	39.3	38.8	35.5
75+ %	15.0	10.7	4.7	9.6	40.9	39.6	46.1
5l URR 65+ (% of 5j; meets a KDOQI guideline)	93.5	94.6	81.1	79.8	94.6	93.9	94.5
5m Confidence interval for URR 65+							
High (95% limit)	96.8	97.5	87.4	86.2	n/a	n/a	n/a
Low (5% limit)	87.1	88.8	72.6	71.5	n/a	n/a	n/a
5n URR percentiles for this facility ⁵							
In this State	44	38	5	2			
In this Network	40	41	4	2			
In the U.S.	36	37	4	3			

n/a = not applicable

[1] See *Guide, Section VIII*.

[2] Values are shown for the average facility.

[3] Other dialysis includes patients who switch between HD and PD during the year and patients where modality is unknown.

[4] Percent of facilities with a smaller percentage of patients with hematocrit 33+.

[5] Percent of facilities with a smaller percentage of patients with URR 65+.

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TABLE 6: Vascular Access Information¹ (CMS Fistula First), 2004-2006

Measure Name	This Facility			Regional Averages ² , 2006			
	2004	2005	2006	State	Network	U.S.	
Vascular Access							
6a	Prevalent hemodialysis patient months ³	1775	1709	1454			
6b	Vascular access type in use (% of 6a; sums to 100%)						
	Arteriovenous fistula	28.8	26.3	35.2	36.4	39.7	43.1
	Arteriovenous graft	44.5	42.0	38.4	35.1	28.0	28.0
	Catheter	25.1	31.4	25.9	28.3	32.1	28.4
	Other	1.6	0.2	0.4	0.1	0.1	0.0
	Missing	0.0	0.1	0.0	0.2	0.1	0.4
6c	Arteriovenous fistulae in place ⁴ (% of 6a)	30.4	31.7	42.2	44.6	49.3	51.6
6d	Catheter only > 90 days ⁵ (% of 6a)	6.3	14.2	9.4	11.9	13.9	11.7
Vascular Access at First Treatment							
6e	Incident hemodialysis patients (n)	58	26	.	20.1	16.1	16.6
6f	Vascular access type in use ⁶ (% of 6e; sums to 100%)						
	Arteriovenous fistula	6.9	15.4	.	13.3	13.2	15.3
	Arteriovenous graft	34.5	11.5	.	8.7	5.9	5.5
	Catheter	44.8	53.8	.	75.4	79.4	75.2
	Other	13.8	19.2	.	0.2	0.2	0.0
	Missing	0.0	0.0	.	2.4	1.3	3.9
6g	Arteriovenous fistulae in place ⁴ (% of 6e)	15.5	23.1	.	24.1	26.5	28.8

n/a = not applicable

[1] See *Guide, Section IX*.

[2] Values are shown for the average facility.

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

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

[5] Catheter was used for treatment and has been in place for 90 days or more prior to treatment. Patient does not have an fistula or graft in place. Catheter is only access. Port access devices are reported as catheters for this project.

[6] Patients listed as graft or catheter may have had fistulae in place for future use, but they actually received their treatment through a graft or catheter.

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TABLE 7: Characteristics of New Dialysis Patients¹, 2003-2006 (Form CMS-2728)

Measure Name	This Facility				Regional Averages ² , 2006			
	2003	2004	2005	2006	State	Network	U.S.	
Patient Characteristics³								
7a	Total number of patients with forms (n)	53	79	53	13	26.9	21.3	22.3
7b	Age (average years [0-95])	64.4	63.0	63.2	66.2	63.3	64.2	62.4
7c	Female (% of 7a)	47.2	57.0	41.5	53.8	43.6	43.5	44.6
7d	Race ⁴ (% of 7a; sums to 100%)							
	African-American	34.0	27.8	34.0	23.1	30.3	17.8	28.1
	Asian/Pacific Islander	0.0	0.0	0.0	0.0	1.2	1.8	3.2
	Native American	0.0	1.3	0.0	0.0	0.8	4.7	1.5
	White	66.0	70.9	66.0	76.9	67.4	75.2	66.6
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.2	0.5	0.5
7e	Hispanic (% of 7a)	1.9	1.3	1.9	0.0	2.2	2.7	11.3
7f	Primary cause of ESRD (% of 7a; sums to 100%)							
	Diabetes	49.1	46.8	50.9	46.2	40.1	39.9	44.8
	Hypertension	32.1	25.3	18.9	15.4	29.2	25.8	27.3
	Primary Glomerulonephritis	9.4	8.9	13.2	15.4	7.9	8.1	7.2
	Other/Missing	9.4	19.0	17.0	23.1	22.8	26.2	20.7
7g	Medical coverage (% of 7a; sums to 100%)							
	Employer group only	1.9	0.0	3.8	30.8	15.6	15.7	16.6
	Medicare only	3.8	3.8	11.3	0.0	10.3	12.8	18.2
	Medicaid only	20.8	17.7	7.5	0.0	10.9	9.4	11.3
	Medicare and Medicaid only	22.6	15.2	24.5	0.0	10.5	9.7	12.9
	Medicare and Other	41.5	40.5	35.8	53.8	43.3	41.1	26.5
	Other/Unknown	5.7	17.7	15.1	15.4	5.4	8.0	7.5
	None	3.8	5.1	1.9	0.0	3.9	3.3	7.1
7h	Body Mass Index ⁵							
	Male	24.8	24.8	28.7	24.2	26.7	26.9	26.6
	Female	23.8	29.1	26.4	31.3	28.8	28.6	28.0
7i	Employment ⁶							
	Six months prior to ESRD treatment	26.3	6.3	19.0	66.7	33.3	38.8	36.2
	At first ESRD treatment	15.8	6.3	9.5	66.7	18.6	24.1	21.6
7j	Primary modality ⁷ (% of 7a; sums to 100%)							
	Hemodialysis	.	.	.	53.8	93.8	94.1	93.3
	CAPD/CCPD	.	.	.	46.2	6.2	5.9	6.7
	Other/Unknown/Missing	.	.	.	0.0	0.0	0.0	0.0
7k	Number of incident hemodialysis patients ⁷ (n)	.	.	.	7	25.0	19.8	20.7
7l	Access used at first outpatient dialysis ⁷ (% of 7k; sums to 100%)							
	Arteriovenous fistula	.	.	.	0.0	12.2	13.3	13.5
	Arteriovenous graft	.	.	.	0.0	6.5	4.3	4.4
	Catheter	.	.	.	100	81.0	82.2	80.8
	Other/Unknown/Missing	.	.	.	0.0	0.3	0.2	1.2
7m	Arteriovenous fistulae placed (% of 7k)	.	.	.	14.3	23.7	28.3	31.2
Average Lab Values Prior to Dialysis³								
7n	Hemoglobin (g/dl [3-18])	10.2	10.1	10.5	11.1	10.2	10.3	10.2
7o	Serum Albumin (g/dl [0.8-6.0])	2.8	3.1	3.2	3.4	3.2	3.2	3.1

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TABLE 7 (cont): Characteristics of New Dialysis Patients¹, 2003-2006 (Form CMS-2728)

Measure Name	This Facility				Regional Averages ² , 2006		
	2003	2004	2005	2006	State	Network	U.S.
Average Lab Values Prior to Dialysis³							
7p Serum Creatinine (mg/dl [2-33])	6.3	7.9	7.0	4.8	6.2	6.0	6.5
7q GFR (ml/min [0-60])	10.5	8.6	10.1	13.2	11.3	11.2	10.6
Care Prior to ESRD Therapy							
7r Received ESA prior to ESRD (% of 7a)	49.1	45.6	47.2	38.5	30.4	34.9	30.7
7s Pre-ESRD nephrologist care ⁷ (% of 7a; sums to 100%)							
No	.	.	.	30.8	33.3	31.8	30.0
Yes, < 6 months	.	.	.	0.0	5.0	5.7	11.4
Yes, 6-12 months	.	.	.	38.5	24.6	24.9	24.4
Yes, > 12 months	.	.	.	30.8	27.9	31.3	23.5
Unknown	.	.	.	0.0	9.2	6.3	10.7
7t Informed of transplant options ⁷ (% of 7a)	.	.	.	92.3	68.2	70.4	71.2
7u Patients not informed of transplant options ⁸ (n)	.	.	.	1	8.1	6.4	6.7
7v Reason not informed ⁷ (% of 7u; may not sum to 100%)							
Medically unfit	.	.	.	0.0	35.9	43.1	37.2
Unsuitable due to age	.	.	.	0.0	41.6	37.3	29.9
Psychologically unfit	.	.	.	0.0	6.2	6.3	4.4
Patient declined information	.	.	.	0.0	1.8	2.6	2.3
Patient has not been assessed	.	.	.	100	28.2	25.2	33.6
Comorbid Conditions							
7w Pre-existing Comorbidity (% yes of 7a)							
Congestive heart failure	62.3	50.6	56.6	30.8	40.2	36.6	33.5
Atherosclerotic heart disease ⁸	47.2	30.4	32.1	46.2	27.5	29.2	22.3
Other cardiac disorder ⁸	22.6	7.6	0.0	0.0	19.0	18.1	15.6
CVD, CVA, TIA	30.2	7.6	5.7	0.0	11.4	11.7	9.9
Peripheral vascular disease	49.1	22.8	17.0	38.5	16.4	16.9	15.1
History of hypertension	98.1	92.4	98.1	92.3	86.5	83.5	83.2
Diabetes ⁸	50.9	55.7	56.6	46.2	54.1	55.3	56.6
Diabetes on insulin	22.6	15.2	18.9	23.1	34.7	34.7	34.0
COPD	15.1	7.6	5.7	38.5	14.5	13.9	9.3
Current smoker	11.3	5.1	5.7	0.0	8.5	8.6	6.6
Cancer	3.8	1.3	0.0	0.0	9.3	9.6	7.3
Alcohol dependence	1.9	0.0	0.0	0.0	2.4	2.5	1.6
Drug dependence	0.0	0.0	0.0	0.0	2.1	1.5	1.3
Inability to ambulate	20.8	3.8	0.0	0.0	7.7	6.3	7.0
Inability to transfer	3.8	2.5	0.0	0.0	3.8	2.9	3.2
7x Average number of comorbid conditions	4.4	3.0	3.0	3.2	3.4	3.3	3.1

n/a= not applicable

[1] See *Guide, Section X*.

[2] Values are shown for the average facility.

[3] For continuous variables, summaries include only responses in range indicated in brackets.

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

[5] The median BMI is computed for adult patients at least 20 years old.

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

[7] Data collection for these items began mid-year 2005. Summaries for these items shown starting in 2006.

[8] 'AHD' includes ischemic heart disease (coronary artery disease) and myocardial infarction. 'Other cardiac disorder' includes cardiac arrest, cardiac dysrhythmia, and pericarditis. 'Diabetes' includes patients with diabetes as the primary cause of ESRD.

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TABLE 8: Summaries for All Dialysis Patients Treated as of December 31 of Each Year¹, 2003-2006

Measure Name	This Facility				Regional Averages ² , 2006		
	2003	2004	2005	2006	State	Network	U.S.
8a Patients treated on 12/31 (n)	138	143	142	124	74.8	52.9	65.1
8b Average age (years)	59.1	59.6	60.1	61.5	61.5	62.7	60.8
8c Age (% of 8a; sums to 100%)							
< 20	0.0	0.0	0.7	0.0	0.5	0.5	0.6
20-64	63.8	62.9	57.7	59.7	54.5	50.6	56.1
65+	36.2	37.1	41.5	40.3	45.0	48.8	43.3
8d Female (% of 8a)	46.4	48.3	49.3	47.6	45.9	45.5	45.9
8e Race (% of 8a; sums to 100%)							
African American	49.3	46.9	44.4	54.8	45.2	32.5	37.3
Asian/Pacific Islander	0.7	0.0	0.0	0.0	1.2	2.1	4.7
Native American	0.0	0.7	0.7	0.0	0.5	3.0	1.5
White	50.0	52.4	54.2	44.4	52.7	61.8	54.6
Other/Unknown/Missing	0.0	0.0	0.7	0.8	0.4	0.6	1.8
8f Ethnicity (% of 8a; sums to 100%)							
Hispanic	4.3	2.8	2.1	2.4	3.2	3.6	14.6
Non-Hispanic	92.0	94.4	94.4	93.5	94.4	94.3	82.0
Unknown	3.6	2.8	3.5	4.0	2.3	2.1	3.3
8g Cause of ESRD (% of 8a; sums to 100%)							
Diabetes	45.7	46.2	47.2	46.8	40.8	41.1	42.9
Hypertension	23.9	20.3	19.7	21.8	29.4	26.7	27.4
Glomerulonephritis	13.8	16.8	15.5	15.3	10.0	10.7	10.7
Other/Unknown	13.0	13.3	14.1	11.3	16.8	18.8	17.6
Missing	3.6	3.5	3.5	4.8	3.0	2.7	1.4
8h Average duration of ESRD (years)	4.1	4.3	4.4	4.8	4.1	4.0	4.2
8i Years since start of ESRD (% of 8a; sums to 100%)							
< 1	21.7	27.3	21.8	16.1	19.5	20.7	19.3
1-2	21.7	17.5	26.1	21.0	20.1	20.4	19.3
2-3	13.0	13.3	10.6	19.4	15.0	15.2	14.6
3-6	23.2	19.6	20.4	18.5	25.5	24.9	25.7
6+	20.3	22.4	21.1	25.0	19.9	18.9	21.1
8j Nursing home patients ³ (% of 8a)	6.5	7.7	6.3	12.9	12.7	15.5	13.1
8k Modality (% of 8a; sums to 100%)							
In-center hemodialysis	87.0	86.7	84.5	90.3	91.1	91.0	90.7
In-center self hemodialysis	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Home hemodialysis	0.0	0.0	0.0	0.0	0.8	0.8	0.7
Continuous ambulatory peritoneal dialysis	8.0	6.3	11.3	5.6	3.9	3.7	2.7
Continuous cycling peritoneal dialysis	5.1	6.3	3.5	3.2	3.8	4.1	5.4
Other modality ⁴	0.0	0.7	0.7	0.8	0.3	0.4	0.4

n/a = not applicable

[1] See *Guide, Section XI*.

[2] Values are shown for the average facility.

[3] 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.

[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).

TABLE 9: Comorbidities Reported on Medicare Claims for Medicare Dialysis Patients Treated as of December 31 of Each Year¹, 2003-2005

Measure Name	This Facility			Regional Averages ² , 2005		
	2003	2004	2005	State	Network	U.S.
9a Medicare dialysis patients on 12/31 (n)	105	107	104	53.3	36.5	42.4
9b Comorbidity (% yes of 9a)						
AIDS/HIV positive	0.0	0.9	0.0	1.2	1.4	2.9
Alcohol dependence	3.8	1.9	3.8	2.4	2.9	2.3
Anemia	5.7	7.5	7.7	20.8	18.0	17.1
Cancer	9.5	13.1	12.5	13.4	12.7	11.5
Cardiac arrest	1.0	0.0	1.0	1.4	1.2	1.4
Cardiac dysrhythmia	31.4	35.5	25.0	45.8	42.5	35.3
Cerebrovascular disease	28.6	26.2	26.0	31.7	28.1	26.9
Chronic obstructive pulmonary disease	21.0	21.5	24.0	35.2	33.0	29.3
Congestive heart failure	51.4	48.6	45.2	57.7	55.1	52.1
Diabetes	55.2	60.7	59.6	66.2	64.2	64.8
Drug dependence	1.0	1.9	0.0	2.7	2.9	2.0
Gastrointestinal tract bleeding	6.7	6.5	3.8	3.7	3.5	3.4
Hepatitis B	1.9	1.9	1.0	18.5	12.2	5.7
Hepatitis other	2.9	1.9	4.8	14.9	11.2	11.5
Hyperparathyroidism	29.5	11.2	8.7	16.2	18.6	17.1
Infection	60.0	57.9	60.6	69.8	63.6	61.0
Ischemic heart disease	54.3	57.0	52.9	61.4	57.6	52.2
Myocardial infarction	5.7	6.5	5.8	11.3	9.9	8.7
Peripheral vascular disease ³	47.6	48.6	54.8	51.4	48.8	46.4
Pneumonia	1.9	6.5	6.7	5.6	4.9	5.1
9c Average number of comorbid conditions	4.2	4.2	4.0	5.3	4.9	4.6

n/a = not applicable

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

[2] Values are shown for the average facility.

[3] Peripheral vascular disease includes both venous and arterial diseases.

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TABLE 10: How Patients Were Assigned to This Facility and End of Year Patient Status¹, 2003-2006

Measure Name	This Facility				Regional Averages ² , 2006		
	2003	2004	2005	2006	State	Network	U.S.
10a Number of patients placed in facility ¹ (n)	185	201	205	188	105.6	76.3	92.5
10b Initial patient placement for the year in this facility (% of 10a; sums to 100%)							
Continuing at facility on 01/01	70.3	68.7	69.8	75.5	68.1	66.4	67.6
Incident (new to ESRD)	25.4	28.4	25.9	16.5	21.4	22.3	21.0
Transferred into facility	4.3	3.0	4.4	8.0	10.5	11.3	11.5
10c Patient status at end of year (% of 10a; sums to 100%)							
Alive in this facility on 12/31	74.6	71.1	69.3	66.0	70.8	69.4	70.3
Alive in another facility on 12/31	3.2	5.5	8.8	9.0	7.6	7.8	8.0
Received a transplant	1.6	2.5	2.9	3.2	3.3	4.0	3.1
Died; death attributed to this facility	20.0	19.9	17.1	18.6	15.0	15.3	15.0
Died; death attributed to another facility	0.0	0.0	1.0	3.2	1.4	1.5	1.6
Other ³	0.5	1.0	1.0	0.0	1.8	2.1	2.0

[1] See *Guide, Section XIII*.

[2] Values are shown for the average facility.

[3] Includes patients who recovered renal function, discontinued dialysis, or were lost to follow-up. Also includes dialysis unrelated deaths. Dialysis unrelated deaths are not attributed to any facility for the purposes of the mortality calculations in this report.

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TABLE 11: Patient and Staff Counts from the Annual Facility Survey (Form CMS-2744)¹, 2003-2006

Measure Name	This Facility				Regional Averages ² , 2006			
	2003	2004	2005	2006	State	Network	U.S.	
Patients Treated During the Year								
11a	Patients treated during year (n)	203	230	227	200	121.4	89.4	106.1
11b	Incident patients (% of 11a)	25.1	32.6	24.2	7.0	21.0	21.9	20.4
11c	Transferred into facility (% of 11a)	1.5	2.2	4.8	21.0	13.2	14.2	14.1
11d	Transferred out of facility (% of 11a)	4.4	7.0	15.0	10.0	13.7	14.7	14.3
Patients Treated as of 12/31								
11e	Patients treated on 12/31 (n)	147	157	144	133	81.3	58.2	70.9
11f	Patient modality on 12/31 (n; sums to 11e)							
	In-center HD	128	139	122	118	74.3	53.2	64.6
	In-center IPD	0	0	0	0	0.0	0.0	0.0
	In-center CAPD	0	0	0	0	0.0	0.0	0.0
	In-center CCPD	0	0	0	0	0.0	0.0	0.0
	Home HD	0	0	0	0	0.8	0.5	0.5
	Home IPD	0	0	0	0	0.0	0.0	0.0
	Home CAPD	11	10	20	15	3.7	2.4	2.1
	Home CCPD	8	8	2	0	2.6	2.1	3.6
11g	Medicare eligibility status as of 12/31 (% of 11e; sums to 100%)							
	Medicare	88.4	85.4	92.4	94.7	87.4	87.8	87.5
	Medicare application pending	10.9	14.6	7.6	5.3	9.6	8.6	8.0
	Non-Medicare	0.7	0.0	0.0	0.0	3.0	3.6	4.5
Facility Staffing as of 12/31								
11h	Total full and part time staff positions ³ (n)	.	31	33	23	15.2	12.9	14.5
11i	Staff positions by type ³ (n; sums to 11h)							
	Full time nurse ⁴	.	9	12	7	4.2	3.6	4.7
	Full time patient care technician	.	16	14	9	5.9	4.0	5.4
	Full time renal dietician	.	1	1	1	0.4	0.3	0.5
	Full time social worker	.	1	1	1	0.6	0.4	0.5
	Part time nurse ⁴	.	2	2	1	1.4	2.0	1.2
	Part time patient care technician	.	1	1	2	1.2	1.2	0.9
	Part time renal dietician	.	0	1	1	0.8	0.8	0.6
	Part time social worker	.	1	1	1	0.6	0.7	0.6

[1] See *Guide, Section XIV*.

[2] Values are shown for the average facility.

[3] Items collected beginning in 2004.

[4] Nursing staff includes registered nurse, licensed practical nurse, vocational nurse, or advanced practical nurse degree.

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SAMPLE DIALYSIS CENTER State: XX Network: 95 CMS Provider#: 999995

TABLE 12: Survey and Certification Activity¹, 2007

Measure Name	This Facility Survey	Regional Averages ² , Jan 2003-June 2007		
		State	Network	U.S.
12a Date of last survey	09/12/2004	n/a	n/a	n/a
12b Type of last survey	RECERTIFICATION	n/a	n/a	n/a
12c Compliance condition after last survey	Meets requirements	n/a	n/a	n/a
12d Number of deficiencies cited at last survey ³				
Condition for coverage (CfC) deficiencies	0	0.1	0.1	0.3
Standard deficiencies	6	2.7	4.7	4.9
12e CfC deficiencies cited at last survey ³				
V100 Compliance with Fed., State, and local	No, not cited	0.0	0.6	0.3
V110 Governing body and management	No, not cited	2.4	2.9	8.0
V185 Long term program and care plan	No, not cited	1.6	1.4	3.2
V215 Patient rights and responsibilities	No, not cited	0.0	0.0	0.4
V230 Medical records	No, not cited	0.0	0.3	1.1
V255 Physical environment	No, not cited	0.8	2.9	5.7
V300 Reuse	No, not cited	2.4	1.1	1.3
V410 Affiliation agreement-arrangement	No, not cited	0.0	0.3	0.2
V420 Director of a renal dialysis facility	No, not cited	0.8	1.1	2.8
V430 Staff of a renal dialysis facility	No, not cited	0.0	0.0	1.5
V440 Minimal service requirements	No, not cited	0.0	0.0	1.5

[1] See *Guide, Section XV*.

[2] Average values are shown for the latest survey at each facility during the period January 2003 through June 2007. Some surveys from April through June of 2007 may not be included.

[3] Values are shown for this facility only if the most recent survey was in 2003 or later.

TABLE 13: Facility Information¹, 2007

Ownership:	Non-profit
Organization:	
Initial Medicare certification date:	09/01/1979
Number of stations:	21
Services provided:	Hemodialysis and Peritoneal Dialysis
Provider numbers included in this report:	999995

[1] See *Guide, Section XVI*.