2009 Dialysis Facility Report

Purpose of the Report

Enclosed is the *2009 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): 999999

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 October 2009, 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, hemoglobin, and patient survival) for your facility that will be reported on the Dialysis Facility Compare (DFC) website in November 2009 (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 *2009 Dialysis Facility Reports.*

How to Submit Comments

Between September 30, 2009 and October 15, 2009, you may submit comments for CMS on the three DFC measures, for your state surveyor, or for UM-KECC. Please visit www.DialysisReports.org, log on to view your report, and click **Comments**.

- **Dialysis Facility Compare:** Comment on the three DFC measures (see page 2) which will be reported on the DFC public website in November 2009. The comment period begins September 30, 2009 and ends October 15, 2009. 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 October 2009 with your comments.
- **UM-KECC:** Submit questions about your DFR to UM-KECC. You can also submit your suggestions to improve the DFR.

IMPORTANT: Please note that any comments posted during the original comment period will not change. It is not necessary to comment during the new comment period unless you have new comments on the SMR or would like to change your original comments.

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 fourteenth in a series of annual reports. This is one of 5,507 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 2009. 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 2009 DFR. The percent of cardiac related deaths has been added to Table 1. First year mortality statistics for new dialysis patients who started dialysis between January 1, 2005 and December 31, 2007 are calculated and reported in the second half of Table 1. Please refer to the section entitled "What's New" in Section I of the *Guide to the 2009 Dialysis Facility Reports* for greater detail on these changes.

Dialysis Facility Compare: Anemia management is reported as two measures: the percent of patients with hemoglobin values of less than 10 g/dL and the percent of patients with hemoglobin values greater than 12 g/dL. The URR and hemoglobin measures were calculated for Medicare approved dialysis facilities operating at any time during 2008. The hemoglobin measures were 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 2005 through 2008. 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 2008 with URR ≥ 65%** *Number of patients included in calculation: 113*	**92%**
2.	**The percentage of Medicare patients treated in this facility during 2008** **with ESA-treated hemoglobin <10 g/dL** **with ESA-treated hemoglobin >12 g/dL** *Number of patients included in calculation: 110*	 **16%** **3%**
3.	**Patient survival reported as "as expected," "better than expected," or "worse than expected" for the time period 2005-2008 for this facility** *Standardized Mortality Ratio (SMR): 1.05* *P-value: 0.62*	**As Expected**

Please see Table 5 for more information on URR and ESA-treated hemoglobin for this facility. URR and ESA-treated hemoglobin 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 Standardized Mortality Ratio (SMR) is less than 1.00 and statistically significant ($p<0.05$), the patient survival classification is "Better than Expected" on DFC. If the facility SMR is greater than 1.00 and statistically significant ($p<0.05$), the patient survival classification is "Worse than Expected" on DFC. Otherwise, the patient survival classification is "As Expected" on DFC. Please note that the classification is not reported for a facility if the SMR is based on 3 or fewer expected deaths.

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 2005 and December 2008. 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 and with central catheters are included, as suggested by Kidney Disease Outcomes Quality Initiative (KDOQI) Clinical Practice Guidelines. Summary data about the percent of patients with hemoglobin from 10 g/dL to 12 g/dL are also reported. 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 and cardiac related deaths are reported in the table to help in the interpretation of the mortality outcomes.

There was a 23% annual observed death rate among the patients treated at this facility during 2005-2008, while a rate of 22% 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 1.05, which is not far (5%) above the national reference value of 1.00.

First Year Mortality: Mortality summaries for new dialysis patients are also provided in Table 1. The first year SMR compares the observed death rate in this facility to the death rate that would be expected based on national death rates for new dialysis patients with the characteristics of the patients at this facility. Similar to the mortality of all patients, the SMR for new dialysis patients is adjusted for patient age, sex, race, ethnicity, diabetes as a cause 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 and cardiac related deaths are also reported to facilitate the interpretation of the mortality outcomes.

There was a 36% annual observed first year death rate among the patients starting dialysis at this facility during 2005-2007, while a rate of 26% would be expected, based on the age, sex, race, ethnicity, diabetes as cause of ESRD, nursing home status, BMI at incidence, comorbidities at incidence, and state population death rates. The first year SMR of observed to expected deaths is 1.40, which is 40% more deaths than expected at this facility. This difference is not statistically significant (p>0.05), so this higher mortality could plausibly be just a chance occurrence.

Hospitalization: Hospitalization summaries are reported for Medicare patients in Table 2. The table includes information on the number of days hospitalized, the number of hospital admissions, and the diagnoses present at admission for patients at this facility. The Standardized Hospitalization Ratio (SHR) for Days compares the observed number of days hospitalized to the number of days that would be expected based on national hospitalization rates for patients with the characteristics of the patients at this facility. The Standardized Hospitalization Ratio (SHR) for Admissions compares the observed number of admissions to the number of admissions that would be expected based on national hospitalization rates for patients with the characteristics of the patients at this facility. Both measures are adjusted for age, race, ethnicity, sex, diabetes, duration of ESRD, nursing home status, and BMI. 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 SHR (days) of observed to expected number of days hospitalized at this facility during 2005-2007 is 0.90, which is 10% lower than expected. The SHR (admissions) of observed to expected number of admissions for patients at this facility during 2005-2007 is 0.90, which is 10% lower than expected.

Infection: Information on hospitalizations for septicemia is reported on Table 2. The information in Table 2 is based on Medicare patient claims.

The percentage of Medicare dialysis patients at this facility hospitalized with septicemia during 2005-2007 was 17%, compared to 12% nationally.

Transplantation: Transplantation summaries are reported in Table 3. The Standardized Transplantation Ratio (STR) represents relative first 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 2005-2008 who had not previously received a transplant, 7% were transplanted annually, while a rate of 5% would be expected for these patients. The STR of observed to expected number of patients transplanted for this facility is 1.26, which is 26% higher than expected for this facility. This difference is not statistically significant (p>0.05) and could plausibly be due to random chance.

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 93 dialysis patients under age 70 treated at this facility on December 31, 2008, 25% were on the kidney transplant waitlist compared to 21% nationally. This difference is not statistically significant (p>0.05) and is plausibly due to random chance.

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

Among the 110 ESA-treated dialysis patients included in the analysis of Medicare claims data of hemoglobin for 2008 at this facility, 81% had hemoglobin between 10-12 g/dL compared to 71% nationally. Among the 113 hemodialysis patients in this facility included in the analysis of Medicare claims data of URR in 2008, 92% had URR above the KDOQI minimum value for URR (URR ≥ 65%), compared to 96% nationally.

At this facility in 2008, an average of 39% of incident patients had AV fistulae in place, compared to 31% nationally. Also at this facility in 2008, an average of 51% of prevalent patients had AV fistulae in place, compared to 58% nationally. Of the prevalent patients receiving hemodialysis treatment at this facility in 2008, 10% had a catheter which had been in place for more than 90 days as their only vascular access, compared to 11% nationally. See Tables 5 and 6 for more information about practice patterns.

Patient Characteristics: Characteristics of patients starting dialysis during 2005-2008 are reported in Table 7. Table 8 gives summaries for all dialysis patients being treated at the end of each year, 2005-2008. Comorbidities are reported in Table 9 for Medicare dialysis patients being treated at the end of each year, 2005-2007.

There were 11 patients with Medical Evidence Forms (CMS-2728) which indicated that they started treatment at this facility during 2008. The average number of comorbidities reported for new patients is 3.5, which is higher than the average of 3.1 reported nationally. Also, 9% of these patients were not under the care of a nephrologist before starting dialysis, compared to 31% nationally. Furthermore, 64% of these patients were informed of their transplant options, compared to 72% nationally. The average serum albumin calculated for these patients (before first dialysis) is 3.3 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 14.0 ml/min, which is higher than the national average value of 11.0 ml/min.

Among patients treated at this facility on December 31, 2008, 6% were treated in a nursing home during the year, which is lower than the national average value of 13%. The average number of comorbidities reported on Medicare claims in 2007 for Medicare patients in this facility on December 31, 2007 is 3.7, which is lower than the national average value of 4.1.

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 28 staff members to care for 140 patients at the end of 2008. This facility reported having 21 stations available as of March 31, 2009. 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 99 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 or suggestions can be submitted at the secure site available at www.DialysisReports.org until October 15, 2009. If you have questions after the comment period is over, please contact us directly at keccdfr@umich.edu or (734) 998-9823.

For a complete description of the methods used to calculate the statistics in this report, please see the *Guide to the 2009 Dialysis Facility Reports*. The *Guide* is available from ESRD Network 99, and is also on the UM-KECC web site at www.DialysisReports.org.

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

TABLE 1: Mortality Summary for All Dialysis Patients (2005-08) & New Dialysis Patients (2005-07)[1]

		This Facility					Regional Averages[2], per Year, 2005-2008		
	Measure Name	2005	2006	2007	2008	2005-2008	State	Network	U.S.
All Patients: Death Rates									
1a	Patients (n=number)	205	184	166	177	732[7]	96.5	70.0	90.1
1b	Patient years (PY) at risk (n)	148.6	126.5	124.9	126.2	526.2[7]	67.0	47.9	60.6
1c	Deaths (n)	35	37	20	30	122[7]	14.6	10.8	12.7
1d	Expected deaths (n)	32.2	26.4	28.0	29.6	116[7]	15.0	11.8	12.7
1e	Death rate per 100 PY (% of 1b)	23.6	29.2	16.0	23.8	23.2	21.8	22.5	21.0
1f	Expected death rate per 100 PY (% of 1b)	21.6	20.9	22.5	23.5	22.1	22.5	24.6	21.0
All Patients: Categories of Death									
1g	Withdrawal from dialysis prior to death (% of 1c)	28.6	37.8	30.0	20.0	29.5	27.5	34.1	23.8
1h	Death due to: Infections (% of 1c)	28.6	24.3	20.0	20.0	23.8	17.3	18.0	17.5
	Cardiac causes (% of 1c)	42.9	32.4	60.0	26.7	38.5	31.1	30.3	27.3
1i	Dialysis unrelated deaths[3] (n; excluded from SMR)	0	0	1	2	3[7]	0.1	0.1	0.1
All Patients: Standardized Mortality Ratio (SMR)									
1j	SMR[4]	1.09	1.40	0.71	1.01	1.05	0.97	0.91	1.00
1k	P-value[5]	0.66	0.06	0.14	0.99	0.62	n/a	n/a	n/a
1l	Confidence interval for SMR[6]								
	High (95% limit)	1.51	1.93	1.10	1.45	1.25	n/a	n/a	n/a
	Low (5% limit)	0.76	0.99	0.44	0.68	0.87	n/a	n/a	n/a
All Patients: SMR Percentiles for this Facility (i.e. percent of facilities with lower mortality rates)									
1m	In this State	62	88	18	64	65			
1n	In this Network	69	89	31	69	76			
1o	In the U.S.	53	82	21	60	59			
New Patients: First Year Death Rates		2005	2006	2007		2005-2007	Regional Averages Per Year, 2005-2007[2]		
1p	New Patients (n=number)	53	12	10		75[7]	23.7	18.9	20.2
1q	Patient years (PY) at risk (n)	42.2	9.6	9.2		61.1[7]	19.9	15.8	17.1
1r	Deaths (n)	16	4	2		22[7]	5.9	4.6	4.8
1s	Expected deaths (n)	10.2	2.4	3.1		15.7[7]	6.2	5.1	4.8
1t	Death rate per 100 PY	37.9	41.5	21.6		36.0	29.5	28.9	28.1
1u	Expected death rate per 100 PY	24.2	24.7	33.8		25.7	30.9	32.1	28.1
New Patients: Categories of Deaths									
1v	Withdrawal from dialysis prior to death (% of 1r)	25.0	75.0	100		40.9	34.3	42.9	32.2
1w	Death due to: Infections (% of 1r)	37.5	0.0	0.0		27.3	21.2	22.8	23.1
	Cardiac causes (% of 1r)	25.0	75.0	0.0		31.8	33.6	36.2	33.1
New Patients: First Year Standardized Mortality Ratio (SMR)									
1x	SMR[4]	1.57	1.68	0.64		1.40	0.95	0.90	1.00
1y	P-value[5]	0.11	0.44	0.79		0.15	n/a	n/a	n/a
1z	Confidence interval for SMR[6]								
	High (95% limit)	2.55	4.30	2.31		2.12	n/a	n/a	n/a
	Low (5% limit)	0.90	0.46	0.08		0.88	n/a	n/a	n/a

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 1d for all patients, 1r to 1s for new patients) to expected deaths; 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 (all patients), or 3 years (new patients), used for calculations; should not be compared to regional averages.

TABLE 2: Hospitalization Summary for Medicare Dialysis Patients[1], 2005-2007

	Measure Name	This Facility 2005	2006	2007	2005-2007	Regional Averages[2], per Year, 2005-2007 State	Network	U.S.
Medicare Dialysis Patients								
2a	Medicare dialysis patients (n)	160	154	141	455[5]	79.1	57.2	67.4
2b	Patient years (PY) at risk (n)	113.6	103.7	103.7	321.0[5]	54.3	38.7	44.5
Days Hospitalized Statistics								
2c	Total days hospitalized (n)	1692	1758	924	4374[5]	869	542	658
2d	Expected total days hospitalized (n)	1802.4	1589.1	1485.5	4877.0[5]	808.2	579.9	658.0
2e	Days hospitalized per PY	14.9	17.0	8.9	13.6	16.0	14.0	14.8
2f	Expected days hospitalized per PY	15.9	15.3	14.3	15.2	14.9	15.0	14.8
2g	Standardized Hospitalization Ratio (Days)[3]	0.94	1.11	0.62	0.90	1.07	0.93	1.00
Admission Statistics								
2h	Total admissions (n)	226	193	140	559[5]	115	77	84
2i	Expected total admissions (n)	228.7	202.3	191.9	623.0[5]	103.9	74.7	84.4
2j	Admissions per PY	2.0	1.9	1.3	1.7	2.1	2.0	1.9
2k	Expected admissions per PY	2.0	2.0	1.9	1.9	1.9	1.9	1.9
2l	Standardized Hospitalization Ratio (Admissions)[4]	0.99	0.95	0.73	0.90	1.11	1.03	1.00
Diagnoses Present at Admission (% of 2a)								
2m	Septicemia	18.8	16.9	14.2	16.7	15.3	12.8	12.3
2n	Acute myocardial infarction	6.9	5.8	2.1	5.1	6.0	5.2	4.2
2o	Congestive heart failure	28.8	20.8	19.1	23.1	30.9	28.1	25.2
2p	Cardiac dysrhythmia	16.3	11.0	12.1	13.2	16.6	16.8	14.6
2q	Cardiac arrest	3.1	1.3	2.8	2.4	2.2	1.8	1.7
Length of Stay								
2r	One day admissions (% of 2h)	18.6	15.5	22.9	18.6	12.4	14.4	13.6
2s	Average length of stay (days per admission; 2c/2h)	7.5	9.1	6.6	7.8	7.5	7.0	7.8

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] Standardized Hospitalization Ratio (Days) calculated as ratio of actual (2c) to expected (2d) hospitalized days.
[4] Standardized Hospitalization Ratio (Admissions) calculated as ratio of actual (2h) to expected (2i) 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, 2005-2008

	Measure Name	This Facility 2005	2006	2007	2008	2005-2008	Regional Averages[2], per Year, 2005-2008 State	Network	U.S.
3a	Eligible patients[1] (n)	147	121	110	112	490[9]	63.6	43.7	61.6
3b	Transplants (n)	8	7	7	3	25[9]	3.0	2.5	2.5
3c	Donor type (sums to 3b[3])								
	Living Donor (n)	2	1	0	1	4[9]	1.0	1.0	0.8
	Deceased Donor (n)	6	6	7	2	21[9]	2.0	1.6	1.7
Patients who have not Previously Received a Transplant									
3d	Eligible patients[1] (n)	134	106	100	104	444[9]	57.5	38.9	55.0
3e	Patient years (PY) at risk (n)	96.7	76.8	76.1	77.6	327.3[9]	40.4	26.8	37.8
3f	1st transplants[4] (n)	7	6	6	3	22[9]	2.7	2.2	2.1
3g	Expected 1st transplants (n)	5.3	4.4	3.9	3.9	17.5[9]	2.2	1.5	2.1
3h	1st transplant rate per 100 PY	7.2	7.8	7.9	3.9	6.7	6.6	8.2	5.6
3i	Expected 1st transplant rate per 100 PY	5.5	5.7	5.1	5.0	5.3	5.6	5.5	5.6
3j	Donor type (sums to 3f[5])								
	Living Donor (n)	2	0	0	1	3[9]	0.9	0.8	0.6
	Deceased Donor (n)	5	6	6	2	19[9]	1.8	1.4	1.5
Standardized 1st Transplantation Ratio (STR)									
3k	STR[6]	1.31	1.36	1.54	0.78	1.26	1.19	1.49	1.00
3l	P-value[7]	0.58	0.56	0.40	0.92	0.34	n/a	n/a	n/a
3m	95% Confidence interval for STR[8]								
	Upper limit	2.70	2.97	3.34	2.27	1.90	n/a	n/a	n/a
	Lower limit	0.53	0.50	0.56	0.16	0.79	n/a	n/a	n/a
STR Percentiles for this Facility (i.e. percent of facilities with lower transplantation rates)									
3n	In this State	56	59	69	41	53			
3o	In this Network	47	49	55	35	40			
3p	In the U.S.	67	69	76	48	67			

n/a = not applicable
[1] See *Guide, Section VI.*
[2] Values are shown for the average facility, annualized.
[3] Values may not sum to 3b due to unknown donor type.
[4] Among first transplants that occurred after the start of dialysis from 2005-2008, 4.2% of transplants in the U.S. were not included because the transplant occurred less than 90 days after the start of ESRD and 0.2% were not included because the patient was not assigned to a facility at time of transplant.
[5] Values may not sum to 3f due to unknown donor type.
[6] Standardized Transplantation Ratio calculated as ratio of actual (3f) to expected (3g). Not shown if 3g is too small.
[7] A p-value less than or equal to 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 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] 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 Year[1], 2005-2008

		This Facility				Regional Averages[2], 2008		
	Measure Name	**2005**	**2006**	**2007**	**2008**	**State**	**Network**	**U.S.**
4a	Eligible patients on 12/31[1] (n)	96	87	83	93	50.2	34.4	46.4
4b	Patients on the waitlist (% of 4a)	34.4	33.3	33.7	24.7	21.5	22.2	21.4
4c	P-value [3] (compared to U.S. value)	<.01	0.02	0.02	0.25	n/a	n/a	n/a
4d	Patients on the waitlist by subgroup (% of corresponding value in 4e)							
	Age < 40	60.0	60.0	50.0	25.0	36.4	36.3	32.0
	Age 40-69	29.6	27.8	32.0	24.7	19.3	19.9	19.8
	Male	32.7	33.3	34.9	23.9	22.1	22.3	22.0
	Female	36.2	33.3	32.5	25.5	20.9	21.9	20.7
	African American	39.2	30.8	27.7	20.0	19.7	20.2	20.0
	Asian/Pacific Islander	.	.	.	100	28.4	37.2	32.6
	Native American	0.0	.	.	.	31.3	22.0	17.2
	White, Hispanic	0.0	50.0	50.0	0.0	19.4	18.5	23.8
	White, Non-Hispanic	31.0	36.4	41.2	30.8	23.7	23.3	20.6
	Other/unknown race	.	.	.	.	8.6	13.6	26.1
	Diabetes	28.6	28.9	35.6	21.6	16.7	17.3	16.3
	Non-diabetes	40.4	38.1	31.6	28.6	25.0	25.9	25.5
	Previous kidney transplant	54.5	55.6	42.9	42.9	42.9	43.0	43.7
	No previous kidney transplant	31.8	30.8	32.9	23.3	19.2	19.5	19.2
	< 2 years since start of ESRD	32.6	32.4	41.4	10.8	12.0	12.9	11.1
	2-4 years since start of ESRD	33.3	32.0	24.0	36.7	28.7	28.6	26.8
	5+ years since start of ESRD	37.9	35.7	34.5	30.8	26.3	27.9	29.2
4e	Eligible patients in 4a by subgroup (n)							
	Age < 40	15	15	8	8	6.6	4.6	6.3
	Age 40-69	81	72	75	85	43.5	29.8	40.0
	Male	49	45	43	46	28.6	19.7	26.1
	Female	47	42	40	47	21.6	14.8	20.2
	African American	51	52	47	50	25.9	13.7	19.4
	Asian/Pacific Islander	0	0	0	1	0.6	0.9	2.2
	Native American	1	0	0	0	0.3	1.3	0.8
	White, Hispanic	2	2	2	3	1.5	1.4	7.0
	White, Non-Hispanic	42	33	34	39	21.6	16.9	16.4
	Other/unknown race	0	0	0	0	0.2	0.2	0.6
	Diabetes	49	45	45	51	21.0	14.8	20.4
	Non-diabetes	47	42	38	42	29.2	19.6	25.9
	Previous kidney transplant	11	9	7	7	5.0	3.9	4.2
	No previous kidney transplant	85	78	76	86	45.1	30.6	42.2
	< 2 years since start of ESRD	43	34	29	37	19.5	13.7	18.0
	2-4 years since start of ESRD	24	25	25	30	16.4	11.0	14.5
	5+ years since start of ESRD	29	28	29	26	14.3	9.7	13.9

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: 22.6% (2005), 23.0% (2006), 23.7% (2007), 21.4% (2008). 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.

TABLE 5: Facility Modality, Hemoglobin, and Urea Reduction Ratio for Medicare Dialysis Patients[1], 2005-2008

		This Facility				Regional Averages[2], 2008		
	Measure Name	2005	2006	2007	2008	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)	163	162	152	153	84.3	66.1	77.1
5b	Modality (% of 5a; sums to 100%)							
	Hemodialysis	84.0	85.8	86.2	86.9	89.1	89.6	89.5
	CAPD/CCPD	12.9	8.0	13.2	9.8	4.7	5.0	5.6
	Other dialysis[3]	3.1	6.2	0.7	3.3	6.2	5.4	4.8
Hemoglobin (among ESA-treated dialysis patients with ESRD for 90+ days and 4+ Hemoglobin claims at this facility)								
5c	Eligible patients[1] (n)	123	119	107	110	57.1	42.0	49.6
5d	Average hemoglobin (g/dL)	12.6	11.9	11.8	10.6	11.6	11.6	11.6
5e	Hemoglobin categories (% of 5c; sums to 100%)							
	< 10 g/dL	1.6	2.5	1.9	16.4	2.6	2.4	2.3
	10-12 g/dL	18.7	42.9	61.7	80.9	68.4	72.7	71.3
	> 12 g/dL	79.7	54.6	36.4	2.7	29.0	24.9	26.4
5f	Hemoglobin 10-12 g/dL (% of HD pts)	17.0	41.6	63.0	84.0	68.2	72.4	71.1
	Hemoglobin 10-12 g/dL (% of PD pts)	28.6	66.7	42.9	0.0	64.9	67.9	68.9
5g	Hemoglobin percentiles for this facility[4]							
	In this State	7	48	79	72			
	In this Network	7	38	61	59			
	In the U.S.	6	37	62	69			
Urea Reduction Ratio (URR; among HD patients with ESRD for 183+ days and 4+ URR claims at this facility)[6]								
5h	Eligible patients[1](n)	95	100	97	113	52.1	38.4	45.4
5i	URR categories (% of 5h; sums to 100%)							
	< 60.0 %	7.4	5.0	3.1	0.9	1.7	1.9	1.5
	60.0-64.9 %	12.6	14.0	5.2	7.1	2.5	3.0	2.7
	65.0-69.9 %	47.4	48.0	51.5	26.5	11.3	13.0	11.0
	70.0-74.9 %	29.5	25.0	30.9	46.9	39.1	39.1	36.0
	75+ %	3.2	8.0	9.3	18.6	45.4	43.0	48.8
5j	URR 65+ (% of 5h; meets a KDOQI guideline)	80.0	81.0	91.8	92.0	95.8	95.1	95.8
5k	URR percentiles for this facility[5]							
	In this State	4	2	13	17			
	In this Network	4	2	18	21			
	In the U.S.	3	3	16	16			

n/a = not applicable
[1] See *Guide, Section VIII.*
[2] Counts are shown for the average facility.
[3] Other dialysis includes patients who switch between HD and PD during the year and patients for whom modality is unknown.
[4] Percent of facilities with a smaller percentage of patients with hemoglobin 10-12 g/dl.
[5] Percent of facilities with a smaller percentage of patients with URR 65+.
[6] Patient's identified in the Standard Information Management System (SIMS) as having dialyzed five or more times per week were excluded from the URR calculations. Among eligible patients in the US, 0.44% were excluded due to frequent dialysis in 2008.

TABLE 6: Vascular Access Information[1] (CMS Fistula First), 2005-2008

	Measure Name	This Facility 2005	2006	2007	2008	Regional Averages[2], 2008 State	Network	U.S.
Vascular Access								
6a	Prevalent hemodialysis patient months[3]	1709	1454	1424	1446			
6b	Vascular access type in use (% of 6a; sums to 100%)							
	Arteriovenous fistula	26.3	35.2	41.0	42.7	46.5	48.3	50.2
	Arteriovenous graft	42.0	38.4	36.1	31.5	27.1	21.4	22.7
	Catheter	31.4	25.9	22.8	25.8	26.1	30.0	26.7
	Other/Missing	0.3	0.4	0.1	0.0	0.3	0.3	0.4
6c	Arteriovenous fistulae in place[4] (% of 6a)	31.7	42.2	49.2	51.2	54.1	57.3	58.1
6d	Catheter only ≥ 90 days[5] (% of 6a)	14.2	9.4	10.3	9.5	11.6	13.7	11.5
Vascular Access at First Treatment								
6e	Incident hemodialysis patients (n)	26	0	12	23	18.9	14.8	17.3
6f	Vascular access type in use[6] (% of 6e; sums to 100%)							
	Arteriovenous fistula	15.4	.	41.7	21.7	14.6	14.9	15.8
	Arteriovenous graft	11.5	.	8.3	4.3	5.3	4.5	6.8
	Catheter	53.8	.	50.0	73.9	77.7	79.2	74.9
	Other/Missing	19.2	.	0.0	0.0	2.3	1.3	2.5
6g	Arteriovenous fistulae in place[4] (% of 6e)	23.1	.	58.3	39.1	25.3	28.8	30.8

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.

TABLE 7: Characteristics of New Dialysis Patients[1], 2005-2008 (Form CMS-2728)

		This Facility				Regional Averages[2], 2008		
	Measure Name	**2005**	**2006**	**2007**	**2008**	**State**	**Network**	**U.S.**
	Patient Characteristics[3]							
7a	Total number of patients with forms (n)	53	12	10	11	35.0	30.4	31.9
7b	Average age (years [0-95])	63.2	65.8	73.2	61.2	64.3	64.8	63.3
7c	Female (% of 7a)	43.4	50.0	40.0	45.5	44.8	44.2	44.0
7d	Race[4] (% of 7a; sums to 100%)							
	African-American	35.8	16.7	10.0	36.4	33.5	23.3	28.4
	Asian/Pacific Islander	0.0	0.0	0.0	0.0	1.1	1.8	4.2
	Native American	0.0	0.0	0.0	0.0	0.5	2.4	1.1
	White	64.2	83.3	90.0	63.6	64.1	71.7	65.8
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.8	0.8	0.5
7e	Hispanic (% of 7a)	1.9	0.0	0.0	9.1	3.0	3.2	13.4
7f	Primary cause of ESRD (% of 7a; sums to 100%)							
	Diabetes	50.9	41.7	30.0	54.5	40.8	40.3	45.1
	Hypertension	18.9	16.7	40.0	36.4	30.4	27.2	28.7
	Primary Glomerulonephritis	13.2	16.7	20.0	9.1	6.3	6.7	6.4
	Other/Missing	17.0	25.0	10.0	0.0	22.6	25.8	19.9
7g	Medical coverage (% of 7a; sums to 100%)							
	Employer group only	3.8	33.3	10.0	18.2	17.8	16.2	16.1
	Medicare only	11.3	0.0	10.0	9.1	16.2	16.3	20.4
	Medicaid only	7.5	0.0	0.0	9.1	10.3	10.0	11.4
	Medicare and Medicaid only	22.6	0.0	0.0	9.1	11.2	10.2	12.6
	Medicare and Other	37.7	50.0	80.0	45.5	36.0	37.0	23.8
	Other/Unknown	15.1	16.7	0.0	9.1	4.0	6.0	8.6
	None	1.9	0.0	0.0	0.0	4.6	4.3	7.1
7h	Body Mass Index[5]							
	Male	28.7	24.2	28.1	22.7	26.8	26.9	26.6
	Female	26.1	33.5	27.6	32.8	28.8	28.7	28.0
7i	Employment[6]							
	Six months prior to ESRD treatment	19.0	66.7	33.3	40.0	34.8	38.7	36.2
	At first ESRD treatment	9.5	66.7	33.3	40.0	18.1	22.5	22.0
7j	Primary modality[7] (% of 7a; sums to 100%)							
	Hemodialysis	.	50.0	44.4	50.0	94.4	94.5	93.9
	CAPD/CCPD	.	50.0	55.6	50.0	5.6	5.5	6.1
	Other/Unknown/Missing	.	0.0	0.0	0.0	0.0	0.0	0.0
7k	Number of incident hemodialysis patients[7] (n)	.	6	4	5	33.2	28.6	29.8
7l	Access used at first outpatient dialysis[7] (% of 7k; sums to 100%)							
	Arteriovenous fistula	.	0.0	50.0	0.0	12.7	14.1	13.6
	Arteriovenous graft	.	0.0	0.0	0.0	2.9	2.7	3.3
	Catheter	.	100	50.0	100	84.3	83.2	81.9
	Other/Unknown/Missing	.	0.0	0.0	0.0	0.1	0.0	1.2
7m	Arteriovenous fistulae placed[7] (% of 7k)	.	16.7	75.0	0.0	22.9	27.0	29.2
	Average Lab Values Prior to Dialysis[3]							
7n	Hemoglobin (g/dL [3-18])	10.5	11.2	12.0	10.5	9.9	10.0	9.9
7o	Serum Albumin (g/dL [0.8-6.0])	3.2	3.5	3.6	3.3	3.2	3.2	3.1

TABLE 7 (cont): Characteristics of New Dialysis Patients[1], 2005-2008 (Form CMS-2728)

		This Facility				Regional Averages[2], 2008		
	Measure Name	**2005**	**2006**	**2007**	**2008**	**State**	**Network**	**U.S.**
	Average Lab Values Prior to Dialysis[3]							
7p	Serum Creatinine (mg/dL [2-33])	7.0	5.0	5.4	5.1	5.8	5.8	6.3
7q	GFR (mL/min [0-60])	10.3	12.4	11.9	14.0	11.9	11.8	11.0
	Care Prior to ESRD Therapy							
7r	Received ESA prior to ESRD (% of 7a)	47.2	33.3	70.0	36.4	26.1	29.5	26.3
7s	Pre-ESRD nephrologist care[7] (% of 7a; sums to 100%)							
	No	.	25.0	20.0	9.1	33.0	32.1	31.0
	Yes, < 6 months	.	0.0	0.0	0.0	3.8	4.8	11.6
	Yes, 6-12 months	.	41.7	30.0	54.5	20.1	21.5	20.8
	Yes, > 12 months	.	33.3	50.0	36.4	32.8	34.1	24.2
	Unknown	.	0.0	0.0	0.0	10.3	7.6	12.4
7t	Informed of transplant options[7] (% of 7a)	.	91.7	90.0	63.6	69.0	71.0	72.4
7u	Patients not informed of transplant options[7] (n)	.	1	0	3	10.2	8.7	9.2
7v	Reason not informed[7] (% of 7u; may not sum to 100%)							
	Medically unfit	.	0.0	.	100	38.4	43.9	30.9
	Unsuitable due to age	.	0.0	.	0.0	33.4	32.0	23.9
	Psychologically unfit	.	0.0	.	0.0	2.1	3.0	2.8
	Patient declined information	.	0.0	.	0.0	1.3	1.2	1.3
	Patient has not been assessed	.	100	.	0.0	33.2	29.4	44.9
	Comorbid Conditions							
7w	Pre-existing Comorbidity (% yes of 7a)							
	Congestive heart failure	56.6	25.0	40.0	27.3	41.5	37.4	32.8
	Atherosclerotic heart disease[8]	34.0	41.7	40.0	36.4	26.8	26.8	21.0
	Other cardiac disorder[8]	0.0	0.0	10.0	0.0	19.8	19.7	17.1
	CVD, CVA, TIA	5.7	0.0	0.0	18.2	10.7	10.3	9.5
	Peripheral vascular disease	18.9	33.3	10.0	18.2	15.4	15.5	14.0
	History of hypertension	98.1	91.7	100	90.9	86.1	84.5	84.7
	Diabetes[8]	56.6	41.7	30.0	63.6	57.4	56.0	57.8
	Diabetes on insulin	17.0	25.0	30.0	45.5	38.3	38.0	36.3
	COPD	5.7	33.3	0.0	18.2	13.0	12.3	9.3
	Current smoker	5.7	0.0	0.0	9.1	8.2	7.7	6.2
	Cancer	0.0	0.0	0.0	18.2	11.2	10.9	7.4
	Alcohol dependence	0.0	0.0	0.0	0.0	2.1	2.3	1.6
	Drug dependence	0.0	0.0	0.0	0.0	1.8	1.5	1.3
	Inability to ambulate	0.0	0.0	0.0	9.1	8.8	7.5	6.9
	Inability to transfer	0.0	0.0	0.0	0.0	5.1	3.8	3.5
7x	Average number of comorbid conditions	3.0	2.9	2.6	3.5	3.5	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.

TABLE 8: Summaries for All Dialysis Patients Treated as of December 31 of Each Year[1], 2005-2008

		This Facility				Regional Averages[2], 2008		
	Measure Name	**2005**	**2006**	**2007**	**2008**	**State**	**Network**	**U.S.**
8a	Patients treated on 12/31 (n)	141	123	127	130	71.2	52.3	65.2
8b	Average age (years)	60.1	61.6	63.6	62.7	61.6	62.6	60.9
8c	Age (% of 8a; sums to 100%)							
	< 20	0.7	0.0	0.0	0.0	0.5	0.5	0.5
	20-64	57.4	59.3	55.1	58.5	54.9	51.3	56.2
	65+	41.8	40.7	44.9	41.5	44.6	48.1	43.3
8d	Female (% of 8a)	48.9	47.2	51.2	51.5	45.4	44.9	45.3
8e	Race (% of 8a; sums to 100%)							
	African American	44.7	55.3	54.3	55.4	45.2	32.7	37.4
	Asian/Pacific Islander	0.0	0.0	0.0	0.8	1.3	2.4	4.8
	Native American	0.7	0.0	0.0	0.0	0.5	3.0	1.5
	White	54.6	44.7	45.7	43.8	52.6	61.5	55.1
	Other/Unknown/Missing	0.0	0.0	0.0	0.0	0.4	0.5	1.2
8f	Ethnicity (% of 8a; sums to 100%)							
	Hispanic	2.1	2.4	2.4	2.3	3.3	3.8	15.3
	Non-Hispanic	95.0	94.3	95.3	96.2	95.3	95.0	82.7
	Unknown	2.8	3.3	2.4	1.5	1.4	1.2	1.9
8g	Cause of ESRD (% of 8a; sums to 100%)							
	Diabetes	47.5	47.2	48.0	53.8	41.0	41.5	43.7
	Hypertension	19.9	22.0	25.2	21.5	29.8	26.7	27.7
	Glomerulonephritis	16.3	15.4	11.8	11.5	10.0	10.6	10.2
	Other/Unknown	13.5	11.4	11.8	10.8	16.8	19.0	17.3
	Missing	2.8	4.1	3.1	2.3	2.3	2.2	1.1
8h	Average duration of ESRD (years)	4.5	4.8	4.7	4.3	4.3	4.2	4.3
8i	Years since start of ESRD (% of 8a; sums to 100%)							
	< 1	22.0	16.3	13.4	12.3	18.5	19.1	18.1
	1-2	25.5	21.1	18.9	26.9	18.6	18.9	18.7
	2-3	10.6	18.7	14.2	15.4	15.3	15.8	14.9
	3-6	20.6	18.7	29.1	20.8	26.5	25.8	25.9
	6+	21.3	25.2	24.4	24.6	21.1	20.4	22.4
8j	Nursing home patients[3] (% of 8a)	6.4	13.0	8.7	6.2	14.2	16.2	13.3
8k	Modality (% of 8a; sums to 100%)							
	In-center hemodialysis	83.7	90.2	85.8	86.9	90.9	90.8	90.6
	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	1.5	1.5	1.1
	Continuous ambulatory peritoneal dialysis	14.2	7.3	11.0	3.8	3.8	3.4	2.7
	Continuous cycling peritoneal dialysis	1.4	1.6	3.1	9.2	3.2	3.7	4.9
	Other modality[4]	0.7	0.8	0.0	0.0	0.7	0.7	0.7

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 Year[1], 2005-2007

		This Facility			Regional Averages[2], 2007		
	Measure Name	**2005**	**2006**	**2007**	**State**	**Network**	**U.S.**
9a	Medicare dialysis patients on 12/31 (n)	112	103	107	55.6	40.1	47.3
9b	Comorbidity (% yes of 9a)						
	AIDS/HIV positive	0.0	0.0	0.9	1.2	1.0	1.8
	Alcohol dependence	3.6	2.9	1.9	2.4	2.7	2.2
	Anemia	5.4	4.9	3.7	9.8	7.9	7.3
	Cancer	12.5	10.7	10.3	12.1	11.9	10.7
	Cardiac arrest	0.9	1.0	1.9	1.5	1.4	1.5
	Cardiac dysrhythmia	24.1	23.3	22.4	43.4	41.6	35.1
	Cerebrovascular disease	25.9	25.2	26.2	30.9	27.4	27.3
	Chronic obstructive pulmonary disease	23.2	28.2	24.3	35.9	32.8	29.6
	Congestive heart failure	43.8	41.7	49.5	57.6	54.2	51.8
	Diabetes	55.4	57.3	63.6	63.2	62.1	62.3
	Drug dependence	0.0	1.0	0.0	2.4	2.6	1.9
	Gastrointestinal tract bleeding	3.6	6.8	0.9	3.4	3.2	2.9
	Hepatitis B	0.9	1.0	0.9	1.3	1.0	1.2
	Hepatitis other	4.5	2.9	2.8	4.6	3.6	3.8
	Hyperparathyroidism	6.3	5.8	7.5	8.0	13.2	8.8
	Infection	56.3	47.6	47.7	55.4	50.6	51.1
	Ischemic heart disease	52.7	49.5	49.5	59.7	56.2	51.0
	Myocardial infarction	5.4	11.7	3.7	11.5	9.8	8.5
	Peripheral vascular disease[3]	53.6	44.7	53.3	49.8	47.6	46.5
	Pneumonia	6.3	2.9	1.9	5.5	5.0	5.3
9c	Average number of comorbid conditions	3.8	3.7	3.7	4.6	4.4	4.1

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.

TABLE 10: How Patients Were Assigned to This Facility and End of Year Patient Status[1], 2005-2008

		This Facility				Regional Averages[2], 2008		
	Measure Name	**2005**	**2006**	**2007**	**2008**	**State**	**Network**	**U.S.**
10a	Number of patients placed in facility[1] (n)	205	184	166	177	101.5	74.9	91.1
10b	Initial patient placement for the year in this facility (% of 10a; sums to 100%)							
	Continuing at facility on 01/01	69.8	76.6	74.1	71.8	68.6	67.9	69.1
	Incident (new to ESRD)	26.3	16.3	13.3	5.1	19.9	20.6	19.9
	Transferred into facility	3.9	7.1	12.7	23.2	11.5	11.4	11.0
10c	Patient status at end of year (% of 10a; sums to 100%)							
	Alive in this facility on 12/31	68.8	66.8	76.5	73.4	70.2	69.8	71.6
	Alive in another facility on 12/31	9.3	6.5	3.6	3.4	8.6	8.5	8.2
	Received a transplant	2.9	3.3	4.2	2.3	3.1	3.5	2.8
	Died; death attributed to this facility	17.1	20.1	12.0	16.9	15.0	15.2	14.2
	Died; death attributed to another facility	1.0	2.7	0.6	1.1	1.6	1.5	1.4
	Other[3]	1.0	0.5	3.0	2.8	1.5	1.6	1.8

[1] Patient assignment for Tables 1,2,3,8, and 9 only. 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.

TABLE 11: Patient and Staff Counts from the Annual Facility Survey (Form CMS-2744)[1], 2005-2008

		This Facility				Regional Averages[2], 2008		
	Measure Name	2005	2006	2007	2008	State	Network	U.S.
	Patients Treated During the Year							
11a	Patients treated during year (n)	227	200	176	197	113.8	83.2	99.3
11b	Incident patients (% of 11a)	24.2	7.0	5.1	5.1	20.1	20.3	19.7
11c	Transferred into facility (% of 11a)	4.8	21.0	18.8	26.4	13.3	14.3	13.6
11d	Transferred out of facility (% of 11a)	15.0	10.0	7.4	9.1	13.8	14.7	14.1
	Patients Treated as of 12/31							
11e	Patients treated as of 12/31 (n)	144	133	132	140	75.5	54.2	66.9
11f	Patient modality as of 12/31 (n; sums to 11e)							
	In-center HD	122	118	115	120	70.9	51.9	64.8
	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
	In-center Other	0	0	0	0	0.0	0.0	0.0
	Home HD	0	0	0	0	1.1	0.8	0.8
	Home CAPD	20	15	17	7	3.0	2.0	1.9
	Home CCPD	2	0	0	13	2.3	1.9	3.4
	Home Other	0	0	0	0	0.0	0.0	0.0
11g	Medicare eligibility status as of 12/31 (% of 11e; sums to 100%)							
	Medicare	92.4	94.7	93.2	93.6	87.0	87.4	86.9
	Medicare application pending	7.6	5.3	6.8	6.4	10.3	9.2	8.9
	Non-Medicare	0.0	0.0	0.0	0.0	2.8	3.4	4.2
	Facility Staffing as of 12/31[3]							
11h	Total full and part time staff positions (n)	33	23	26	28	14.6	12.8	14.5
11i	Staff positions by type (n; sums to 11h)							
	Full time nurse[4]	12	7	8	7	4.0	3.6	4.7
	Full time patient care technician	14	9	12	10	6.0	4.0	5.5
	Full time renal dietician	1	1	1	0	0.4	0.3	0.5
	Full time social worker	1	1	1	1	0.5	0.4	0.5
	Part time nurse[4]	2	1	1	6	1.2	1.6	1.2
	Part time patient care technician	1	2	2	2	1.1	1.2	0.9
	Part time renal dietician	1	1	0	1	0.8	0.8	0.6
	Part time social worker	1	1	1	1	0.7	0.7	0.6

[1] See *Guide, Section XIV*.
[2] Values are shown for the average facility.
[3] Staffing data as of March 31, 2009. *A full time position* is defined as a position with at least 32 hours of employment a week and *a part time position* is defined as a position with less than 32 hours of employment a week (includes positions that were opened but not filled on this date).
[4] Nursing staff includes registered nurse, licensed practical nurse, vocational nurse, or advanced practical nurse degree.

TABLE 12: Survey and Certification Activity[1], January 2005-June 2009

		This Facility	Regional Averages[2], Jan 2005-June 2009		
	Measure Name	**Survey**	**State**	**Network**	**U.S.**
12a	Date of last survey	01/01/2005	n/a	n/a	n/a
12b	Type of last survey	RECERTIFICATION	n/a	n/a	n/a
12c	Compliance condition after last survey	Acceptable plan of correction	n/a	n/a	n/a
12d	Number of deficiencies cited at last survey[3]				
	Condition for coverage (CfC) deficiencies	1	0.1	0.1	0.2
	Standard deficiencies	8	2.1	4.2	4.7
12e	CfC deficiencies cited at last survey[3]				
	V100 Compliance with Fed., State, and local	No, not cited	0.0	0.3	0.2
	V110 Governing body and management	Yes, cited	4.2	2.5	7.5
	V185 Long term program and care plan	No, not cited	2.1	0.8	2.0
	V215 Patient rights and responsibilities	No, not cited	0.0	0.0	0.3
	V230 Medical records	No, not cited	0.0	0.0	0.9
	V255 Physical environment	No, not cited	1.4	1.9	4.7
	V300 Reuse	No, not cited	0.7	0.3	1.1
	V410 Affiliation agreement-arrangement	No, not cited	0.0	0.3	0.4
	V420 Director of a renal dialysis facility	No, not cited	0.7	1.4	2.1
	V430 Staff of a renal dialysis facility	No, not cited	0.0	0.0	1.3
	V440 Minimal service requirements	No, not cited	0.0	0.0	0.9

[1] See *Guide, Section XV.*
[2] Average values are shown for the latest survey at each facility during the period January 2005 through June 2009. Some surveys from April through June of 2009 may not be included.
[3] Values are shown for this facility only if the most recent survey was in 2005 or later.

TABLE 13: Facility Information[1], 2009

Ownership:	Non-profit
Organization:	Not applicable
Initial Medicare certification date:	01/01/2007
Number of stations:	21
Services provided:	Hemodialysis and Peritoneal Dialysis
Provider numbers included in this report:	999999
National Provider Identifier (NPI)[2]:	

[1] Information based on SIMS data as of March 31, 2009. See *Guide, Section XVI.*
[2] Information based on CROWNWEB data as of April, 2009. If missing, data was not available.