

2002 Unit Specific Report (USR) for Dialysis Patients

Purpose of the Report

Enclosed is the 2002 Unit-Specific Report (USR) for this facility based on data from the Centers for Medicare & Medicaid Services. This USR includes data specific to this facility that could be useful in quality improvement activities. The information contained in this report will allow comparison 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. It is intended that this information will help caregivers to understand their clinical experience relative to other caregivers in their state, Network, and across the United States.

Collaborators

The University of Michigan Kidney Epidemiology and Cost Center has produced the 2002 Unit-Specific Reports with funding from the Centers for Medicare & Medicaid Services.

How to Submit Comments

We welcome questions or comments about the content of this report or any suggestions you might have for future reports of this type. Improvements in the content of future reports will depend on feedback from the nephrology community.

Comments can be submitted at www.cfmc.org/esrddata until August 15, 2002. If you have questions, please contact The University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) directly by electronic mail, fax, or regular postal delivery. Please note 'Year 2002 Unit-Specific Reports' as the topic of your correspondence and include your contact information and your facility's Medicare Provider number.

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Dear Dialysis Unit Director:

This report has been prepared for your facility by the Kidney Epidemiology and Cost Center (KECC) at the University of Michigan with funding from the Centers for Medicare & Medicaid Services (CMS). This is one of 3895 reports that have been sent to the ESRD Networks for distribution to ESRD providers in the U.S. Selected highlights from this report are given here. The information in this letter that is specific to your facility is printed in **bold type** so that you can easily identify it.

Overview: This report includes summaries of patient characteristics, treatment patterns, and patient outcomes for dialysis patients treated in this facility between January 1998 and June 2001. Most data are reported for each year and also for the three or three and a half year period. Regional and national averages are included to allow comparison. Several of the summaries of patient mortality, hospitalization, and transplantation are adjusted to account for the characteristics of the patient mix at this facility such as age, sex, race, 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 based on the DOQI 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 could 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 and also in Figure 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. Deaths after transfer are attributed to your unit until December 31 of the year of transfer (June 30 for 2001 data). Time at risk and deaths after transplantation are excluded from the analysis. The SMR is adjusted for patient age, sex, race, and diabetes as a cause of ESRD. We include an Adjusted SMR, which also adjusts for the comorbidity index at your facility (item 6s), the population death rates in your state, and the percentage of new patients at your facility. The rate of withdrawal from dialysis and the percentage of deaths due to infection are reported to help in the interpretation of the mortality outcomes.

There was a 13% annual observed death rate among the patients treated at this facility between 1998-2001, while a rate of 15% would be expected, based on the age, diabetes status, race, and sex of those patients. Some of these patients died after transfer out of this facility (2 out of 2 in 2000; see item 9p). The SMR of observed to expected deaths is 0.92, which is not far (8%) below the national reference value of 1.00. The Adjusted SMR (item 1p) is 0.96, which is not far (4%) below the national reference value of 1.00. The Adjusted SMR can differ from the original SMR because it accounts for more patient characteristics.

Hospitalization: Hospitalization summaries are reported for Medicare patients in Table 2 and Figure 2. Table 2 includes two distinct measures of the frequency of hospitalizations: 1) first hospitalization rates and 2) total admission rates. The first hospitalization rate characterizes the fraction of patients admitted per year, and considers only the first hospitalization for each patient in a given year. The relative first hospitalization ratio of

observed/expected is expressed as a Standardized Hospitalization Ratio (SHR), similar to the SMR. The SHR adjusts for patient age, sex, race, and diabetes as a cause of ESRD. The total admission rate reports the total number of hospital admissions per year, including multiple admissions per patient.

Of the Medicare primary payor dialysis patients treated at your facility between 1998-2000 56% were hospitalized annually, while a rate of 60% would be expected. The SHR of observed to expected number of patients hospitalized for this facility is 0.94, which is 6% lower than expected.

Transplantation: Transplantation summaries are reported in Table 3 and Figure 3. The Standardized Transplantation Ratio (STR) represents relative transplantation rates (observed / expected) for patients at this facility adjusting for patient age. Patients aged 65 and above or with a prior kidney transplant are excluded.

The STR was not calculated for your facility for 1998-2000 because there were insufficient data to yield reliable results.

Practice Patterns: Table 4 summarizes dialytic modality, hematocrit, and the urea reduction ratio. These data are derived from Medicare paid dialysis claim data from CMS. Vascular access type and reuse information as reported by facilities for 2000 in the Centers for Disease Control Surveillance of Dialysis-Associated Diseases is summarized in Table 5.

Among the 13 EPO-treated dialysis patients included in the analysis of Medicare claims data of hematocrit for 2000 at your facility, 54% have hematocrit above DOQI guidelines ($HCT \geq 33\%$) compared to 77% nationally. There were no patients at your facility with URR (dose of dialysis) included in the analysis of Medicare claims data for 2000. Your facility reported that 27.1% of patients have cuffed catheter accesses compared to the national average of 20.7%, and that 0.0% of patients have noncuffed catheter accesses, compared to the national average of 3.3%. See Tables 4 and 5 for more information about practice patterns.

Patient Characteristics: Characteristics of patients starting dialysis during 1998-2001 (CMS Form 2728) are in Table 6. Table 7 gives summaries for all dialysis patients treated during 1998-2001.

There were 0 patients(s) with Medical Evidence Forms (MEF) indicating they started treatment at your facility during 2000. According to MEFs or claim records, this facility has a relatively small percentage of patients starting dialysis in 2000 (5%) compared to the U.S. average of 26%.

Sources of Patient Data: This report is based primarily on Medicare claims and data collected for CMS. Patients were assigned to your facility based on Medical Evidence forms (CMS Form 2728) submitted by your facility and on Medicare claims for your facility (See Table 9). Network 10 has a list of the patients included in the analyses for your facility. For comparison, Table 8 reports patient counts reported by this facility on the Annual Facility Survey (CMS Form 2744). Table 9 reports the number of patients placed in this facility according to each data source for patients included in the mortality summaries for this report. The number of patients excluded from the calculations in the report because they died of AIDS is also reported. Table 9 also provides information on patient status at the end of the year, both for patients who remain in this facility until the end of a given year, and for those who transfer out of this facility, receive a transplant, or die.

Of the patients included in this report for 2000, 100% were attributed to your facility on the basis of recent information (Medicare claim or Medical Evidence Form within 6 months, see Table 9). Over three-quarters of facilities have more than 85% of patients attributed by such recent information.

The Annual Facility Survey (AFS) submitted by your facility indicates that 163 patients were being treated at your facility during 2000 (see Table 8), of which 5 (3.1% of item 8a) transferred into the facility during the year. The USR patient count of 19 does not include patients transferred into your facility during the year. The comparable AFS patient count for the year is 158. The USR count of 19 patients in this report for 2000 (see Table 7) differs by over 20% from the count of patients reported in the AFS. Differences in counts of patients can result from many causes, including changes in ownership or inaccuracies and incompleteness of data submitted to the CMS for the patients in this facility.

These are just a few highlights of the statistics you will find in this report based on the data for your 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 of this type. Comments can be submitted at www.cfmcc.org/esrddata until August 15, 2002. If you have questions, please contact us directly at kecc@umich.edu or (734) 998-6611.

For a complete description of the data reported here please see the *Guide to the 2002 Unit-Specific Reports*. The Guide is available from ESRD Network 10 and is also on the KECC web site at www.med.umich.edu/kidney.

**Prepared by
The Kidney Epidemiology and Cost Center at the University of Michigan
under contract to the Centers for Medicare & Medicaid Services**

TABLE 1: Mortality Summary for All Dialysis Patients¹, 1998-2001²

	This Facility					Regional Averages ³ , per year, 1998-2001 ²		
	1998	1999	2000	2001 ²	1998-2001 ²	State	Network	U.S.
Death Rates								
1a Patients (n=number)	1	19	17	16	53 ⁸	102	102	76
1b Deaths (n)	0	4	2	0	6 ⁸	17	17	12
1c Expected deaths (n)	0.0	2.7	2.8	1.0	6.5 ⁸	16.4	16.4	12.2
1d Death rate (% of 1a)	0.0	21.1	11.8	0.0	13.3	18.8	18.8	18.4
1e Expected death rate (% of 1a)	1.4	14.3	16.6	12.4	14.6	18.3	18.3	18.1
Categories of Death								
1f Withdrawal from dialysis prior to death (% of 1b)	.	50.0	0.0	.	33.3	15.1	15.1	19.4
1g Due to infections, not including AIDS (% of 1b)	.	25.0	50.0	.	33.3	16.8	16.8	21.0
1h Dialysis unrelated deaths ⁴ (n) (excluded from SMR)	0	0	0	0	0 ⁸	0.2	0.2	0.2
Standardized Mortality Ratio (standardized for age, race, sex, and diabetes mix)								
1i SMR ⁵ (see Figure 1)	.	1.47	0.71	.	0.92	1.03	1.03	1.01
1j P-value ⁶	.	0.29	0.46	.	0.52	n/a	n/a	n/a
1k C.I. for SMR ⁷								
High (95% limit)	.	3.36	2.22	.	1.81	n/a	n/a	n/a
Low (5% limit)	.	0.50	0.12	.	0.40	n/a	n/a	n/a
SMR Percentiles for This Facility (i.e. percent of facilities with lower mortality rates)								
1l In This State	.	88	20	.	31			
1m In This Network	.	88	20	.	31			
1n In U.S.	.	86	20	.	35			
Adjusted SMR (also adjusted for comorbidity, duration of ESRD, and population death rates)¹								
1o Adjusted expected deaths (n)	0.0	2.5	2.7	1.0	6.2	16.6	16.6	12.4
1p Adjusted SMR ⁵	.	1.58	0.75	.	0.96	1.02	1.02	1.00
1q P-value ⁶	.	0.25	0.5	.	0.57	n/a	n/a	n/a
1r C.I. for Adjusted SMR ⁷								
High (95% limit)	.	3.61	2.34	.	1.90	n/a	n/a	n/a
Low (5% limit)	.	0.54	0.13	.	0.42	n/a	n/a	n/a
Adjusted SMR Percentiles for This Facility (i.e. percent of facilities with lower mortality rates)								
1s In This State	.	93	25	.	41			
1t In This Network	.	93	25	.	41			
1u In U.S.	.	91	24	.	44			

n/a = not applicable.

[1] See Guide, Section IV.

[2] Includes data through June 2001. Rates in 1d and 1e are annualized.

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

[4] Defined as deaths due to AIDS, street drugs, and accidents unrelated to treatment.

[5] Calculated as a ratio of deaths (1b) to expected deaths (1c or 1o).

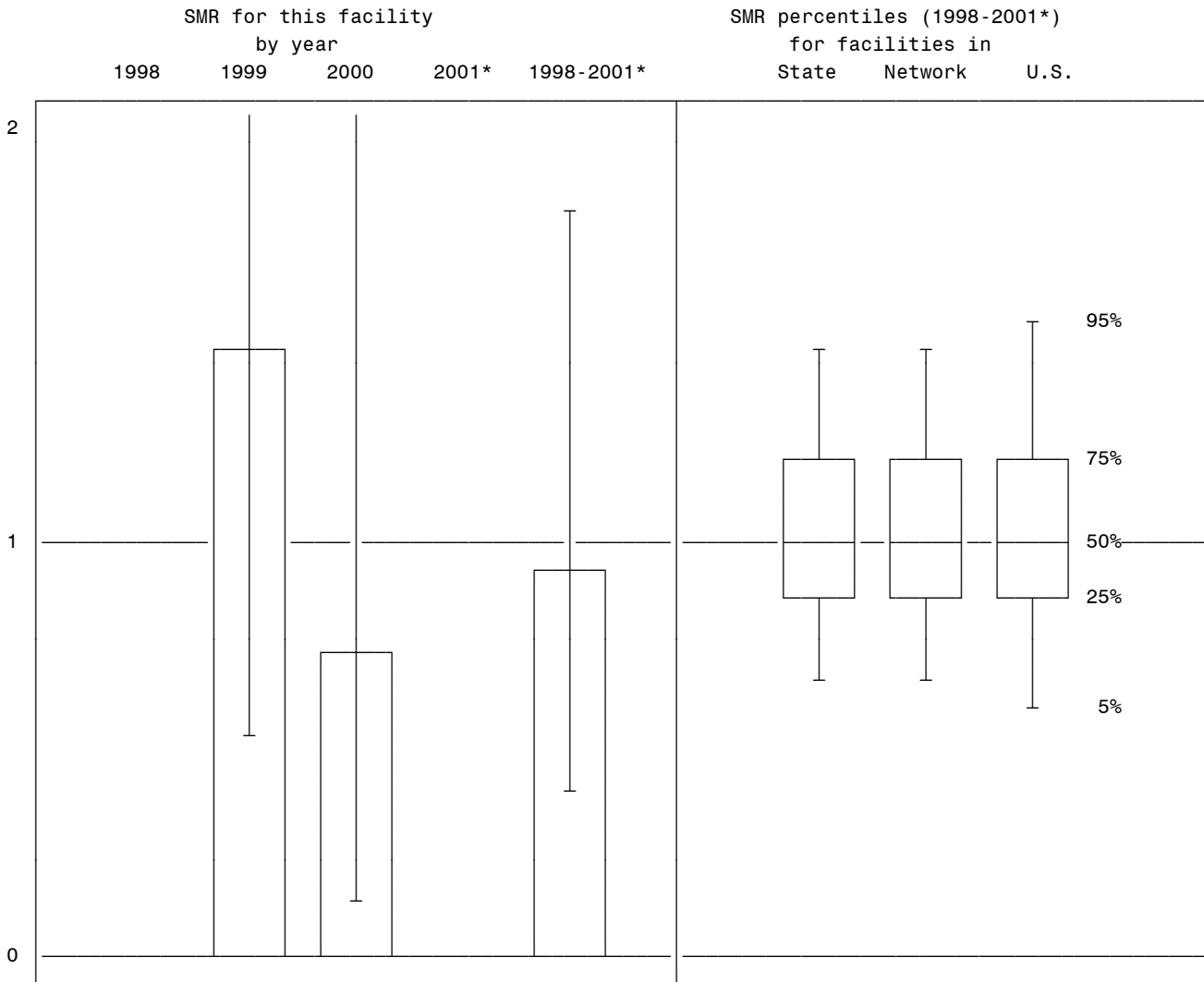
Not shown if there are too few expected deaths.

[6] 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.

[7] The confidence interval (C.I.) range represents uncertainty in the value of the SMR due to random variation.

[8] Sum of 3.5 years used for calculations; should not be compared to regional averages.

FIGURE 1: Standardized Mortality Ratio (SMR) for Dialysis Patients



The vertical bar shows the value of the SMR (actual / expected mortality) for this facility. The vertical lines show the range of uncertainty due to random variation (90% confidence interval; significant if the vertical line does not cross at 1)

The horizontal line in the middle of each box is the median SMR for facilities in a region. The lower and upper boundaries of the box are the 25th and 75th percentiles for facilities in the region. The vertical lines extend to the 5th and 95th percentiles

The mortality at this facility (SMR = 0.92) for 1998-2001*, was higher than
 35 percent of facilities in the nation
 31 percent of facilities in this network
 31 percent of facilities in this state

[*] Includes data through June 2001.

TABLE 2: Hospitalization Summary for Medicare Dialysis Patients¹, 1998-2000

	<u>This Facility</u>				<u>Regional Averages², 1998-2000, per year</u>		
	1998	1999	2000	1998-2000	State	Network	U.S.
2a Medicare Dialysis Patients (n)	0	18	14	32 ⁷	62	62	47
Patients Hospitalized							
2b Patients hospitalized (once or more)	0	9	9	18 ⁷	38	38	28
2c Expected number hospitalized (n)	0.0	10.4	8.7	19.2 ⁷	36.2	36.2	28.4
2d Hosp. rate (% of 2a)	.	50.0	64.3	56.3	61.5	61.5	59.9
2e Expected hosp. rate (% of 2a)	.	58.0	62.4	60.0	58.2	58.2	59.9
Total Admission Count							
2f Total admissions (n)	0	14	20	34 ⁷	97	97	68
2g Expected total admissions (n)	0	25	22	47 ⁷	87.7	87.7	68.0
2h Stand. Total Adm. Ratio ³	.	0.56	0.90	0.72	1.11	1.11	1.00
Diagnoses Present at Admission (% of 2a)							
2i Septicemia (% of 2a)	.	16.7	14.3	15.6	12.5	12.5	11.6
2j Acute Myocardial Infarction (% of 2a)	.	0.0	0.0	0.0	4.8	4.8	4.3
Length of Stay							
2k Unadj. avg. length of adm. (days)	.	13.9	7.1	9.9	7.3	7.3	7.7
2l One day admissions (% of 2f)	.	7.1	5.0	5.9	14.9	14.9	15.7
2m Unadjusted average days in the hospital per dialysis patient year	.	13.8	11.2	12.6	14.9	14.9	14.3
Standardized Hospitalization Ratio							
2n SHR ⁴ (also shown in Figure 2)	.	0.86	1.03	0.94	1.06	1.06	1.00
2o P-value ⁵	.	0.4	0.51	0.45	n/a	n/a	n/a
2p C.I. for SHR ⁶							
High (95% limit)	.	1.50	1.80	1.39	n/a	n/a	n/a
Low (5% limit)	.	0.45	0.54	0.61	n/a	n/a	n/a
SHR Percentiles for This Facility (i.e. percent of facilities with lower hospitalization rates)							
2q In This State	.	22	46	30			
2r In This Network	.	22	46	30			
2s In U.S.	.	28	54	38			

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 Total Admission Ratio calculated as ratio of actual (2f) to expected (2g) total admissions.

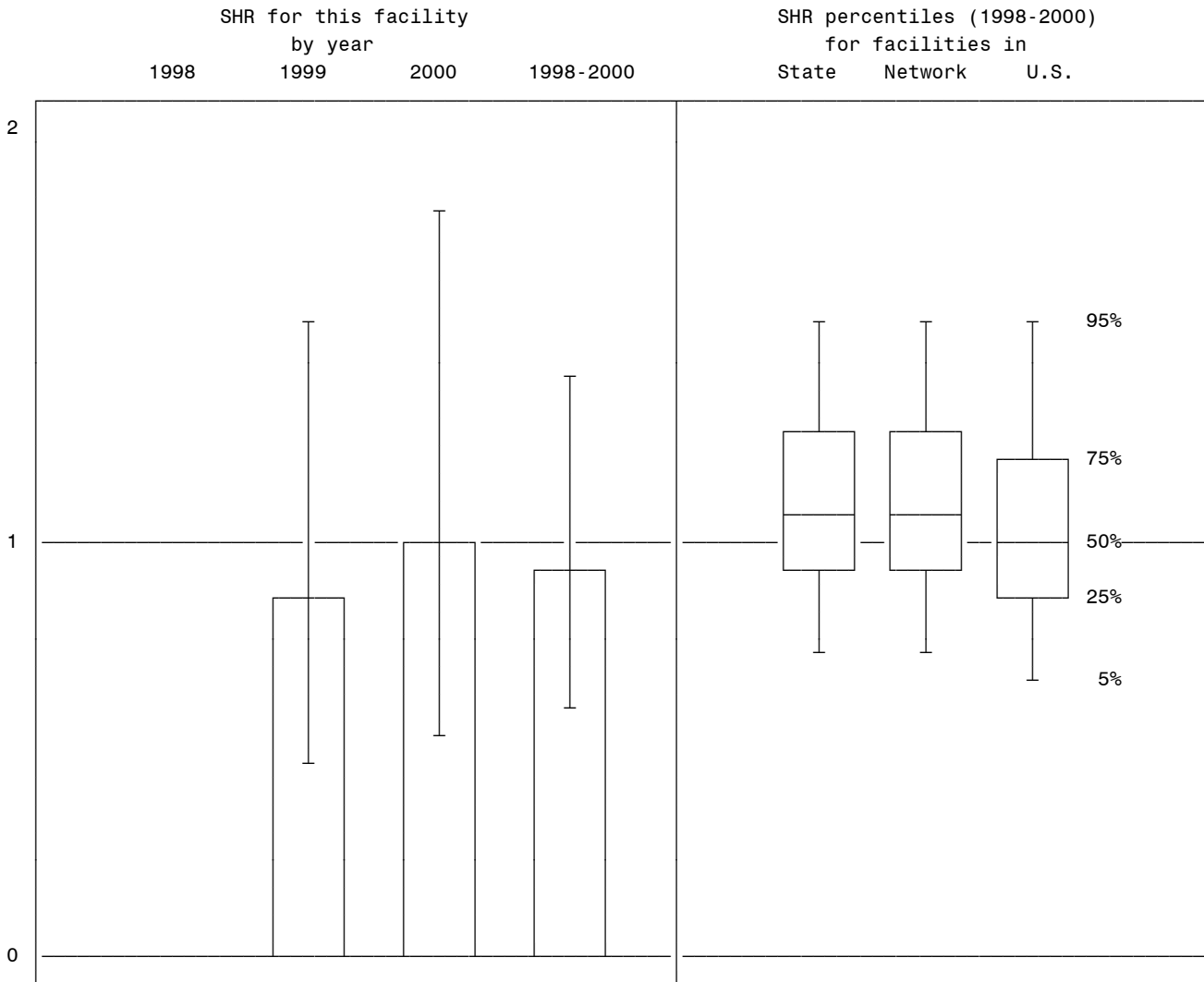
[4] Standardized Hospitalization Ratio calculated as ratio of actual (2b) to expected (2c). Not shown if 2c is too small.

[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, while a p-value greater than 0.05 indicates that the difference could possibly be due to random chance.

[6] The confidence interval (C.I.) range represents uncertainty in the value of the SHR due to random variation.

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

FIGURE 2: Standardized Hospitalization Ratio (SHR) for Medicare Dialysis Patients



The vertical bar shows the value of the SHR (actual / expected hospitalization) for this facility. The vertical lines show the range of uncertainty due to random variation (90% confidence interval; significant if the vertical line does not cross at 1)

The horizontal line in the middle of each box is the median SHR for facilities in a region. The lower and upper boundaries of the box are the 25th and 75th percentiles for facilities in the region. The vertical lines extend to the 5th and 95th percentiles

The hospitalization at this facility (SHR = 0.94) for 1998-2000, was higher than
 38 percent of facilities in the nation
 30 percent of facilities in this network
 30 percent of facilities in this state

TABLE 3: Transplantation Summary for Previously Untransplanted Dialysis Patients Under Age 65¹, 1998-2000

	<u>This Facility</u>				<u>Regional Averages², 1998-2000, per year</u>		
	1998	1999	2000	1998-2000	State	Network	U.S.
Transplantation Rates (among eligible patients)							
3a Eligible patients (n) ¹	1	9	8	18 ⁶	44	44	35
3b Actual 1st transplants (n)	0	1	0	1 ⁶	3	3	2
3c Expected 1st transplants (n)	0.0	0.9	0.9	1.8 ⁶	2.5	2.5	2.0
3d 1st transplant rate (% of 3a)	0.0	11.1	0.0	5.6	6.3	6.3	5.8
3e Expected 1st transp. rate (% of 3a)	1.0	10.0	10.8	9.9	5.7	5.7	5.8
3f Number of cadaveric transplants	0	0	0	0 ⁶	1.8	1.8	1.3
Standardized Transplantation Ratio							
3g STR ³ (also shown in Figure 3)	.	.	.	.	1.12	1.12	1.00
3h P-value ⁴	.	.	.	.	n/a	n/a	n/a
3i C.I. for STR ⁵							
High (95% limit)	.	.	.	.	n/a	n/a	n/a
Low (5% limit)	.	.	.	.	n/a	n/a	n/a
STR Percentiles for This Facility (i.e. percent of facilities with lower transplantation rates)							
3j In This State	.	.	.	.
3k In This Network	.	.	.	.
3l In U.S.	.	.	.	.

n/a= not applicable.

[1] See Guide, Section VI.

[2] Values are shown for the average facility.

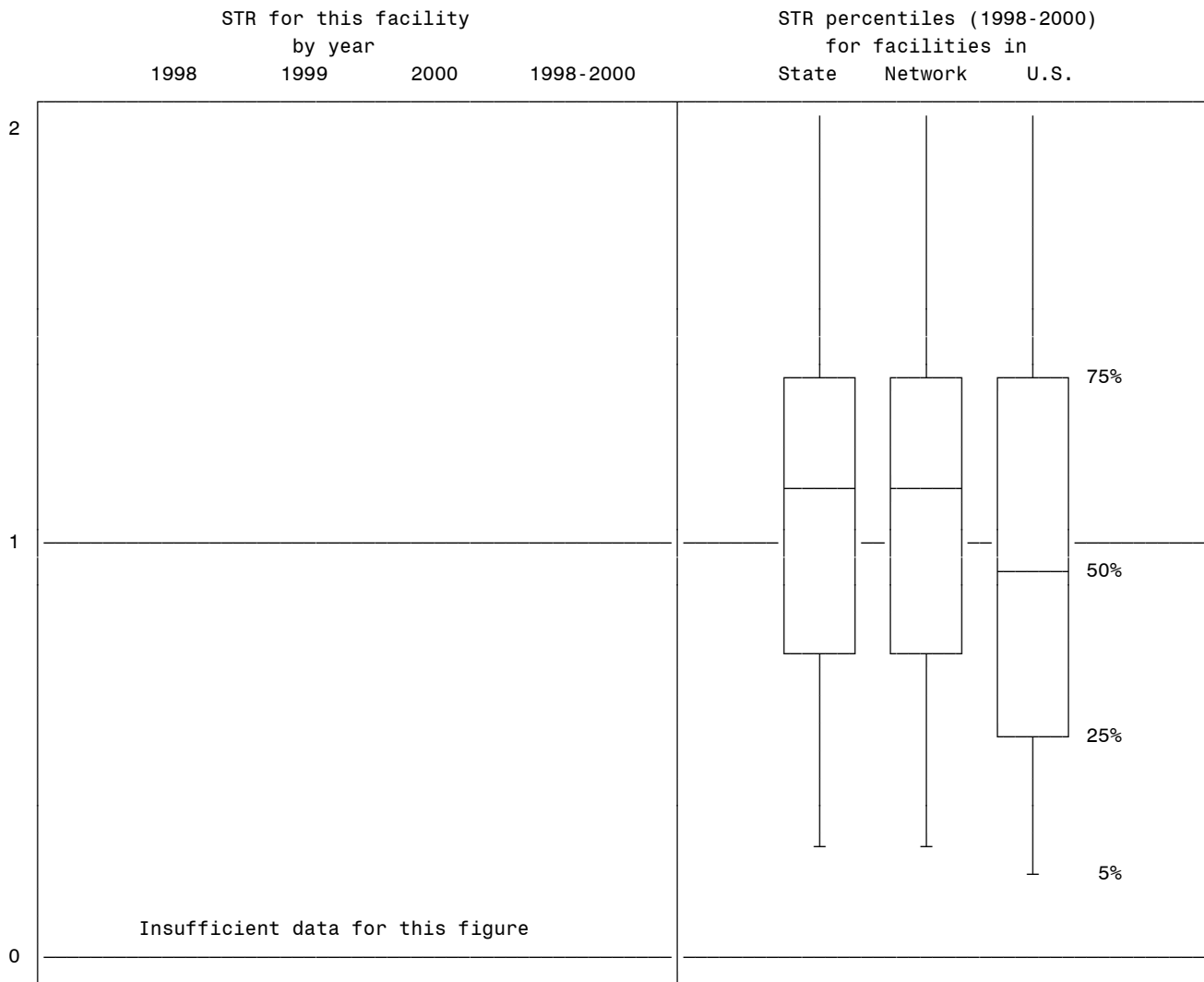
[3] Standardized Transplantation Ratio calculated as ratio of actual (3b) to expected (3c).
 Not shown if 3c is too small.

[4] 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, while a p-value greater than 0.05 indicates that the difference could possibly be due to random chance.

[5] The confidence interval (C.I.) range represents uncertainty in the value of the STR due to random variation.

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

FIGURE 3: Standardized Transplantation Ratio (STR) for Previously Untransplanted Dialysis Patients under Age 65



<p>The vertical bar shows the value of the STR (actual / expected transplantation) for this facility. The vertical lines show the range of uncertainty due to random variation (90% confidence interval; significant if the vertical line does not cross at 1)</p>	<p>The horizontal line in the middle of each box is the median STR for facilities in a region. The lower and upper boundaries of the box are the 25th and 75th percentiles for facilities in the region. The vertical lines extend to the 5th and 95th percentiles</p>
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TABLE 4: Facility Practice Patterns¹, 1998-2001²

	<u>This Facility</u>				<u>Regional Averages³, 2000</u>		
	1998	1999	2000	2001 ²	State	Network	U.S
4a Patients treated during year (n) (equal to 7a) ¹	1	21	19	18	101	101	75
4b Modality (% of 4a; sums to 100%)							
Hemodialysis	0.0	0.0	0.0	11.1	89.6	89.6	89.3
CAPD/CCPD	0.0	81.0	73.7	83.3	8.7	8.7	8.9
Other Dialysis (recent switch)	100	19.0	26.3	5.6	1.7	1.7	1.8

Hematocrit (among EPO treated patients with ESRD for at least 90 days and >3 hematocrit claims from this facility)

4c Eligible patients (n) ¹	7	14	13	10	60	60	38
4d Average hematocrit (%)	32.6	33.6	33.0	34.4	34.7	34.7	34.5
4e Hematocrit Categories (% of pts. in 4c, sums to 100%)							
< 30.0 %	0.0	14.3	0.0	0.0	6.0	6.0	5.4
30.0-32.9 %	71.4	14.3	46.2	10.0	15.4	15.4	17.1
33.0-35.9 %	28.6	64.3	53.8	80.0	46.1	46.1	50.6
36+ %	0.0	7.1	0.0	10.0	32.5	32.5	26.9
4f Hematocrit 33+ (% of pts. in 4c) (meets DOQI guidelines)	28.6	71.4	53.8	90.0	78.6	78.6	77.5

Urea Reduction Ratio (URR) (among HD patients with ESRD for at least 1 year and > 3 URR claims from this facility)

4g Eligible patients (n) ¹	0	0	0	0	45	45	29
4h URR Categories (% of pts. in 4g, sums to 100%)							
< 60.0 %	.	.	.	.	8.7	8.7	5.7
60.0-64.9 %	.	.	.	.	7.8	7.8	6.0
65.0-69.9 %	.	.	.	.	23.5	23.5	21.2
70.0-74.9 %	.	.	.	.	31.2	31.2	33.4
75+ %	.	.	.	.	28.8	28.8	33.8
4i URR 65+ (% of pts in 4f) (meets DOQI guidelines)	.	.	.	.	83.5	83.5	88.3

n/a= not applicable.

[1] See Guide, Section VII.

[2] Includes data through June 2001.

[3] Values are shown for the average facility.

Table 5: Self Reported Practice Pattern Information¹, 2000

	This Facility	Regional Averages ²		
		State	Network	U.S.
5a Reuse Method ³ : [% using this method in region; sums to 100%]				
No Reuse	No	24.8	24.8	19.7
Formaldehyde	No	10.7	10.7	24.3
Glutaraldehyde	No	25.6	25.6	4.1
Peracetic acid	Yes	36.4	36.4	47.4
Heat	No	0.8	0.8	3.3
Other	No	1.7	1.7	1.2
5b Bleach Used to Reuse [% using bleach in region] ³	Yes	32.2	32.2	27.2
5c Vascular Access Type (% of HD pts) ³ : (sums to 100%)				
AV Graft	45.0	44.3	44.3	48.1
AV Fistula	27.9	28.4	28.4	27.9
Cuffed Catheter	27.1	23.1	23.1	20.7
Non-cuffed Catheter	0.0	4.2	4.2	3.3
5d Reason for Catheter Use ³ : (% of pts with catheters in 5c; sums to 100%)				
New HD pts awaiting fistula/graft	13.2	28.2	28.2	25.3
Fistula/graft failed, new one planned	2.6	23.7	23.7	28.3
Fistula/graft placement impossible	52.6	36.7	36.7	40.7
Other	31.6	11.4	11.4	5.6

n/a= not applicable.

[1] See Guide, Section VIII.

[2] Regional averages are for the average facility unless otherwise noted in [] in description at left of table.

[3] Source: 2000 CDC Surveillance.

TABLE 6: Patient Characteristics as Reported on the Medical Evidence Form (CMS Form 2728) for Patients Starting Dialysis¹, 1998-2001²

Patient Characteristic [range] ³	This Facility				Regional Averages 1998-2001 ²		
	1998	1999	2000	2001 ²	State	Network	U.S.
6a Total Number of Patients with Forms	0	0	0	10			
6b Age (average Years [0-95])	.	.	.	55.8	62.3	62.3	61.9
6c Sex (% Female)	.	.	.	40.0	46.0	46.0	46.4
6d Ethnicity (% Hispanic)	.	.	.	0.0	7.7	7.7	11.3
6e Race (% of 6a; sums to 100%)							
White	.	.	.	0.0	62.4	62.4	63.4
Black	.	.	.	90.0	33.5	33.5	28.5
Asian	.	.	.	0.0	1.6	1.6	2.4
American Indian/Alaskan Native	.	.	.	0.0	0.1	0.1	1.2
Pacific Islander	.	.	.	0.0	0.3	0.3	0.9
Middle East/Arabian	.	.	.	0.0	0.3	0.3	0.3
Indian Subcontinent	.	.	.	0.0	0.4	0.4	0.3
Other/Multiracial	.	.	.	0.0	1.2	1.2	2.6
Unknown	.	.	.	10.0	0.2	0.2	0.4
6f Body Mass Index ⁴ (Weight/Height ²)							
Male	.	.	.	23.3	25.1	25.1	25.0
Female	.	.	.	19.9	26.4	26.4	26.0
6g Primary Cause of ESRD (% of 6a; sums to 100%)							
Diabetes	.	.	.	30.0	40.4	40.4	44.0
Hypertension	.	.	.	40.0	31.4	31.4	26.4
Primary Glomerulonephritis	.	.	.	0.0	8.6	8.6	9.6
Other	.	.	.	30.0	19.6	19.6	20.0
6h Employment ⁵							
Six months prior to ESRD treatment	.	.	.	50.0	41.4	41.4	38.1
At first ESRD treatment	.	.	.	50.0	26.7	26.7	23.2
Average Lab Values Prior to Dialysis [range]³							
6i Hematocrit (% [9-54])	.	.	.	27.7	29.1	29.1	29.3
6j Hemoglobin (g/dl [3-18])	.	.	.	9.2	9.6	9.6	9.7
6k Serum Albumin (g/dl [0.8-6.0])	.	.	.	3.3	3.1	3.1	3.2
6l Serum Creatinine (mg/dl [2-33])	.	.	.	10.5	7.5	7.5	7.7
6m BUN (mg/dl [24-250])	.	.	.	102	89	89	89
6n GFR (ml/min [0-25])	.	.	.	6.0	8.5	8.5	8.2

n/a= not applicable.

[1] See Guide, Section IX.

[2] Includes data through June 2001.

[3] For continuous variables, all summaries are computed based only on responses in range indicated in brackets for the variable.

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

[5] Full-time, Part-time, or Student (% of 18-60 year olds).

TABLE 6 (CONTINUED): Patient Characteristics as Reported on the Medical Evidence Form (HCFA Form 2728) for Patients Starting Dialysis¹, 1998-2001²

<u>Patient Characteristic [range]³</u>	<u>This Facility</u>				<u>Regional Averages</u> <u>1998-2001²</u>		
	<u>1998</u>	<u>1999</u>	<u>2000</u>	<u>2001²</u>	<u>State</u>	<u>Network</u>	<u>U.S.</u>
6o Pre-existing Co-morbidity (% yes of 6a)							
Congestive Heart Failure	.	.	.	10.0	30.0	30.0	31.8
Ischemic Heart Disease, CAD	.	.	.	0.0	23.2	23.2	23.9
Myocardial Infarction	.	.	.	0.0	8.1	8.1	8.8
Cardiac Arrest	.	.	.	0.0	0.6	0.6	0.8
Cardiac Dysrhythmia	.	.	.	0.0	3.9	3.9	5.9
Pericarditis	.	.	.	0.0	0.5	0.5	0.8
CVD, CVA, TIA	.	.	.	0.0	8.5	8.5	9.1
Peripheral Vascular Disease	.	.	.	0.0	11.5	11.5	14.3
History of Hypertension	.	.	.	20.0	76.0	76.0	75.6
Diabetes ⁴	.	.	.	30.0	49.5	49.5	51.0
Diabetes/on insulin (% of total)	.	.	.	0.0	21.5	21.5	23.0
Chronic Obstructive Pulmonary Disease	.	.	.	0.0	5.9	5.9	7.1
Current Smoker	.	.	.	0.0	4.5	4.5	5.1
Cancer	.	.	.	0.0	6.4	6.4	5.4
Alcohol Dependence	.	.	.	0.0	1.6	1.6	1.4
Drug Dependence	.	.	.	0.0	1.4	1.4	1.0
Inability to Ambulate	.	.	.	0.0	3.0	3.0	4.0
Inability to Transfer	.	.	.	0.0	1.1	1.1	1.4
6p HIV Status (% of 6a; sums to 100%)							
Positive	.	.	.	0.0	0.9	0.9	0.7
Cannot Disclose	.	.	.	0.0	51.9	51.9	48.8
Negative/Missing/Unknown	.	.	.	100	47.2	47.2	50.5
6q AIDS Status (% of 6a; sums to 100%)							
Positive	.	.	.	0.0	0.3	0.3	0.4
Cannot Disclose	.	.	.	0.0	52.2	52.2	48.8
Negative/Missing/Unknown	.	.	.	100	47.5	47.5	50.8
6r Average Number of Co-morbid Conditions	.	.	.	0.6	2.6	2.6	2.7
6s Average Comorbidity Index [0-47]	.	.	.	1.5	4.9	4.9	5.2

n/a= not applicable.

[1] See Guide, Section IX.

[2] Includes data through June 2001.

[3] For continuous variables, all summaries are computed based only on responses in range. indicated in brackets for the variable.

[4] Also includes patients with diabetes as the primary cause of ESRD.

TABLE 7: Summaries for All Dialysis Patients Treated¹, 1998-2001²

	<u>This Facility</u>				<u>Regional Averages³, 2000</u>		
	1998	1999	2000	2001 ²	State	Network	U.S.
7a Patients treated during year (n)	1	21	19	18	101	101	75
7b Average age (yrs)	37.4	51.5	57.0	49.8	61.7	61.7	61.0
7c Age (% of 7a by group; sums to 100%)							
< 20	0.0	4.8	5.3	5.6	0.8	0.8	0.8
20-64	100	52.4	52.6	77.8	51.4	51.4	53.5
65+	0.0	42.9	42.1	16.7	47.9	47.9	45.7
7d Cause of ESRD (% of 7a; sums to 100%)							
Diabetes	100	9.5	5.3	11.1	37.0	37.0	40.5
Hypertension	0.0	47.6	42.1	38.9	30.8	30.8	26.9
Glomerulonephritis	0.0	9.5	10.5	11.1	10.8	10.8	11.7
Other/Unknown	0.0	23.8	31.6	27.8	18.4	18.4	18.4
Missing	0.0	9.5	10.5	11.1	2.9	2.9	2.5
7e Race (% of 7a; sums to 100%)							
Asian/Pacific Islander	0.0	0.0	0.0	0.0	2.0	2.0	3.5
Black	100	76.2	73.7	83.3	39.1	39.1	35.5
Native American	0.0	0.0	0.0	0.0	0.2	0.2	1.6
White	0.0	23.8	26.3	16.7	56.4	56.4	56.7
Other/Unk/Missing	0.0	0.0	0.0	0.0	2.3	2.3	2.7
7f Sex (%) Female	100	57.1	52.6	72.2	46.7	46.7	47.5
7g Incident during year (%)	100	19.0	5.3	11.1	27.4	27.4	26.2
7h Average duration of ESRD (yrs) for dialysis patients treated as of 1/1	.	4.4	4.2	5.4	3.5	3.5	3.5

TABLE 8: Patient Counts from Annual Facility Survey (CMS Form 2744)⁴, 1998-2000

	<u>This Facility</u>			<u>Regional Averages³, 2000</u>		
	1998	1999	2000	State	Network	U.S.
8a Patients treated during year (n)	.	.	163	137	137	103
8b Incident patients (% of 8a)	.	.	10.4	23.8	23.8	22.1
8c Transferred into facility (% of 8a)	.	.	3.1	13.6	13.6	13.9
8d Transferred out of facility (% of 8a)	.	.	1.8	14.9	14.9	14.1
8e Patients treated as of 12/31 (n)	.	.	137	89	89	68
8f Medicare pts treated as of 12/31 (% of 8e)	.	.	78.1	75.6	75.6	83.1

[1] See Guide, Section X.

[2] Includes data through June 2001.

[3] Values are shown for the average facility.

[4] See Guide, Section XI.

TABLE 9: How Patients were Assigned to this Facility and Patient Status¹, 1998-2001²

	1998		This Facility				2001 ²	
	n	%	n	%	n	%	n	%
9a Number of patients placed in facility (equal to 1a) ³	1	100	19	100	17	100	16	100
Patient Placement in this Facility (9b-9g sum to 9a)								
Patients placed by Medicare paid dialysis claim dated								
9b 0-6 months prior	1	100.0	19	100.0	17	100.0	13	81.3
9c 6-12 months prior	0	0.0	0	0.0	0	0.0	1	6.3
9d 12-24 months prior	0	0.0	0	0.0	0	0.0	0	0.0
Patients placed by HCFA Medical Evidence Form dated								
9e 0-6 months prior	0	0.0	0	0.0	0	0.0	2	12.5
9f 6-12 months prior	0	0.0	0	0.0	0	0.0	0	0.0
9g 12-24 months prior	0	0.0	0	0.0	0	0.0	0	0.0
9h Patient exclusions due to AIDS death These patients were excluded from lines 9a-9g	0		0		0		0	
Patient Status During Year for Patients Placed in this Facility (9i-9p sum to 9a)								
Patients still in unit on last day of the year								
9i Patients incident (new) during the year	1	100.0	3	15.8	1	5.9	2	12.5
9j Prevalent patients with > 100 days of dialysis claims paid to this facility	0	0.0	7	36.8	7	41.2	9	56.3
9k Prevalent patients with 1-99 days of dialysis claims paid to this facility	0	0.0	0	0.0	1	5.9	1	6.3
9l Prevalent patients with no paid dialysis claims paid to this facility	0	0.0	0	0.0	0	0.0	0	0.0
Patients no longer in unit on last day of the year								
9m Patients alive and being treated in another unit on last day of the year	0	0.0	4	21.1	5	29.4	3	18.8
9n Patients transplanted	0	0.0	1	5.3	1	5.9	1	6.3
9o Patients who died at this facility	0	0.0	0	0.0	0	0.0	0	0.0
9p Patients who died at another facility	0	0.0	4	21.1	2	11.8	0	0.0

[1] See Guide, Section XII.

[2] Includes data through June 2001.

[3] Patients are placed on 1/1 of the year or on day 90 of ESRD during the year, by either their most recent dialysis claim or Medical Evidence Form.