

2004 Dialysis Facility Report

Purpose of the Report

Enclosed is the *2004 Dialysis Facility Report* (DFR) for this facility based on data from the Centers for Medicare & Medicaid Services (CMS). This DFR includes data specific to this facility that 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, Network, and across the United States.

In October 2004, state surveyors will receive the DFRs for all dialysis facilities in their state.

This report also provides you with advance notice of the updated quality measures (urea reduction ratio, hematocrit, patient survival) for your facility that will be reported on the Dialysis Facility Compare (DFC) website in November 2004 (www.medicare.gov).

Collaborators

CMS has contracted with the University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) to produce the *2004 Dialysis Facility Reports*. CMS has also contracted with Qualis Health and the Colorado Foundation for Medical Care (CFMC), private non-profit Quality Improvement Organizations, to assist with this report.

How to Submit Comments

Please visit www.cfmc.org/esrddata 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 2004. Your comments will **not** appear on the DFC website.
- State Surveyor:** Comments on your DFR for the State Surveyors. The State Surveyors will receive a copy of your DFR in October 2004 with your comments.
- UM-KECC:** Questions about your DFR for UM-KECC.

The deadline for submitting comments is October 10, 2004.

Dear Dialysis Facility Director:

This report has been prepared for this facility by the Kidney Epidemiology and Cost Center (KECC) at the University of Michigan with funding from the Centers for Medicare & Medicaid Services (CMS). It is the ninth in a series of annual reports. This is one of 4647 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 October 2004. Selected highlights from this report are given here. The information specific to this facility is printed in **bold type** for easy identification.

Dialysis Facility Compare: URR and hematocrit measures were calculated for Medicare approved dialysis facilities operating at any time during 2003. The patient survival measure was calculated for Medicare approved dialysis facilities operating at any time from 2000 through 2003. 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 2003 with URR \geq 65% <i>Number of patients included in calculation: 254</i>	95%
2. The percentage of Medicare patients treated in this facility during 2003 with hematocrit \geq 33% <i>Number of patients included in calculation: 278</i>	86%
3. Patient survival reported as “as expected”, “better than expected”, or “worse than expected” for the time period 2000-2003 for this facility	As Expected
<i>Standardized Mortality Ratio (SMR):</i> 0.82 <i>Upper Confidence Limit:</i> 0.92 <i>Lower Confidence Limit:</i> 0.73	

Please see Table 5 for more information on URR and hematocrit for this facility. URR and 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 treated in this facility between January 2000 and December 2003. Most statistics are reported separately for each year. Mortality, hospitalization, and transplantation statistics are also reported for a three or four year period. Regional and national averages are included to allow for comparisons. Several of the summaries of patient mortality, hospitalization, and transplantation are adjusted to account for the characteristics of the patient mix at this facility such as age, sex, 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 urea reduction ratio (URR) of 65% or higher, with hematocrit of 33% or higher, and with central catheters are included, as suggested by K/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 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 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. 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, BMI, and comorbidities, 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 15% annual observed death rate among the patients treated at this facility during 2000-2003, while a rate of 19% would be expected, based on the age, sex, race, diabetes as cause of ESRD, duration of ESRD, BMI, and comorbidity index of those patients; and state population death rates. The SMR of observed to expected deaths is 0.82, which is not far (18%) below 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. 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 of observed to expected number of admissions for patients at this facility is 0.81, which is 19% lower than expected.

Transplantation: Transplantation summaries are reported in Table 3 and Figure 2. The Standardized Transplantation Ratio (STR) represents relative transplantation rates (observed / expected) for patients at this facility adjusting for patient age. Patients aged 70 and above and 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 2000-2003 who had not previously been transplanted, 6.5% were transplanted annually, while a rate of 6.8% would be expected for these patients. The STR of observed to expected number of patients transplanted for this facility is 0.95, which is 5% lower than expected for this facility.

Transplant Waitlist: Table 4 summarizes waitlist information, at the end of each year, for patients under age 70 being treated at this facility. Unlike the mortality, hospitalization, and transplantation statistics, the waitlist statistics do not include patients who transferred out of the facility less than 60 days before.

Among the 304 dialysis patients under age 70 treated at this facility on December 31, 2003, 44% were on the kidney transplant waitlist compared to 22% 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 urea reduction ratio for patients treated at this facility during each year. These data are derived from Medicare paid dialysis claim data from CMS. Vascular access type and reuse information, as reported by facilities for 2002 in the Centers for Disease Control (CDC) Surveillance of Dialysis-Associated Diseases, is summarized in Table 6.

Among the 278 dialysis patients included in the analysis of Medicare claims data of hematocrit for 2003 at this facility, 86% have hematocrit above K/DOQI guidelines ($HCT \geq 33\%$) compared to 89% nationally. Among the 254 hemodialysis patients in this facility included in the analysis of Medicare claims data of URR in 2003, 95% have URR above K/DOQI guidelines ($URR \geq 65\%$), compared to 91% nationally. In 2002, this facility reported that 33.9% of patients have cuffed catheter accesses compared to the national average of 23.1%, and that 0.0% of patients have noncuffed catheter accesses, compared to the national average of 2.4%. See Tables 5 and 6 for more information about practice patterns.

Infection: Information on infection is reported in Tables 2 (item 2g) and 6 (items 6d and 6e). The information in Table 2 is based on Medicare dialysis patient claims while that in Table 6 is self-reported by the facility in the CDC Surveillance of Dialysis-Associated Diseases.

The percentage of patients at this facility hospitalized due to septicemia during 2000-2002 was 9.5%, compared to 10.5% nationally. There were 0 patients diagnosed with Hepatitis B at this facility during 2002.

Patient Characteristics: Characteristics of patients starting dialysis during 2000-2003 are reported in Table 7. Table 8 gives summaries for all dialysis patients being treated at the end of each year, 2000-2003.

There were 111 patients with Medical Evidence Forms (CMS 2728) indicating they started treatment at this facility during 2003. The average number of comorbidities reported on the CMS 2728 for these patients was 2.2, which is lower than the average of 2.7 reported nationally for patients starting treatment during 2000-2003. The average serum albumin calculated for these patients (before first dialysis) is 3.3 g/dl, which is higher than the 2000-2003 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 9.9 ml/min, which is higher than the 2000-2003 national average value of 9.5.

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 (CMS Form 2728). Network 10 has a list of the patients included in the mortality analyses for this facility. Table 9 reports the number of patients placed in this facility for analyses in Tables 1, 2, 3, and 8 of this report. 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 each year, and for those who transfer out of this facility, receive a transplant, or die during the year.

The hospitalization, modality, URR, and Hematocrit statistics reported in Tables 2 and 5 are based on Medicare claims data.

Facility Information: General information about this facility is provided in Tables 10 and 11. Table 10 provides counts of patients treated, Medicare eligibility, and treatment modality from the Annual Facility Survey (CMS Form 2744). Table 11 includes services provided by this facility as well as the certification date, ownership, and last survey action for the facility.

This facility reported caring for 381 patients at the end of 2002 and reported having 66 stations available in 2004. This facility offers both hemodialysis and peritoneal dialysis services. Additional information regarding patient modality is available in Table 10.

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 of this type. Comments can be submitted at www.cfmc.org/esrddata until October 10, 2004. 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 2004 Dialysis Facility Reports*. The Guide is available from ESRD Network 10 and is also on the UM-KECC web site at www.sph.umich.edu/kecc.

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, 2000-2003

	<u>This Facility</u>					<u>Regional Averages², per year, 2000-2003</u>		
	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2003</u>	<u>2000-2003</u>	<u>State</u>	<u>Network</u>	<u>U.S.</u>
Death Rates								
1a Patients (n=number)	345	442	490	518		101.5	101.5	90.1
1b Patient years (PY) at risk (n)	257.9	337.2	369.4	396.5	1361 ⁷	68.9	68.9	57.6
1c Deaths (n)	23	53	63	71	210 ⁷	16.2	16.2	13.1
1d Expected deaths (n)	46.8	64.2	69.8	75.9	257 ⁷	15.9	15.9	13.2
1e Death rate per 100 PY (% of 1b)	8.9	15.7	17.1	17.9	15.4	23.5	23.5	22.7
1f Expected death rate per 100 PY (% of 1b)	18.1	19.0	18.9	19.1	18.9	23.1	23.1	22.9
Categories of Death								
1g Withdrawal from dialysis prior to death (% of 1c)	0.0	9.4	9.5	2.8	6.2	16.0	16.0	21.6
1h Due to infections, not including AIDS (% of 1c)	13.0	24.5	20.6	12.7	18.1	14.8	14.8	21.2
1i Dialysis unrelated deaths ³ (n) (excluded from SMR)	0	0	1	0	1 ⁷	0.2	0.2	0.2
Standardized Mortality Ratio								
1j SMR ⁴ (see Figure 1)	0.49	0.83	0.90	0.94	0.82	1.02	1.02	0.99
1k P-value ⁵	<.01	0.09	0.23	0.31	<.01	n/a	n/a	n/a
1l C.I. for SMR ⁶								
High (95% limit)	0.70	1.04	1.11	1.14	0.92	n/a	n/a	n/a
Low (5% limit)	0.34	0.65	0.72	0.76	0.73	n/a	n/a	n/a
SMR Percentiles for This Facility (i.e. percent of facilities with lower mortality rates)								
1m In this State	9	32	36	51	22			
1n In this Network	9	32	36	51	22			
1o In U.S.	9	31	43	46	24			

n/a = not applicable.

[1] See Guide, Section IV.

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

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

[4] Calculated as a ratio of deaths (1c) to expected deaths (1d).

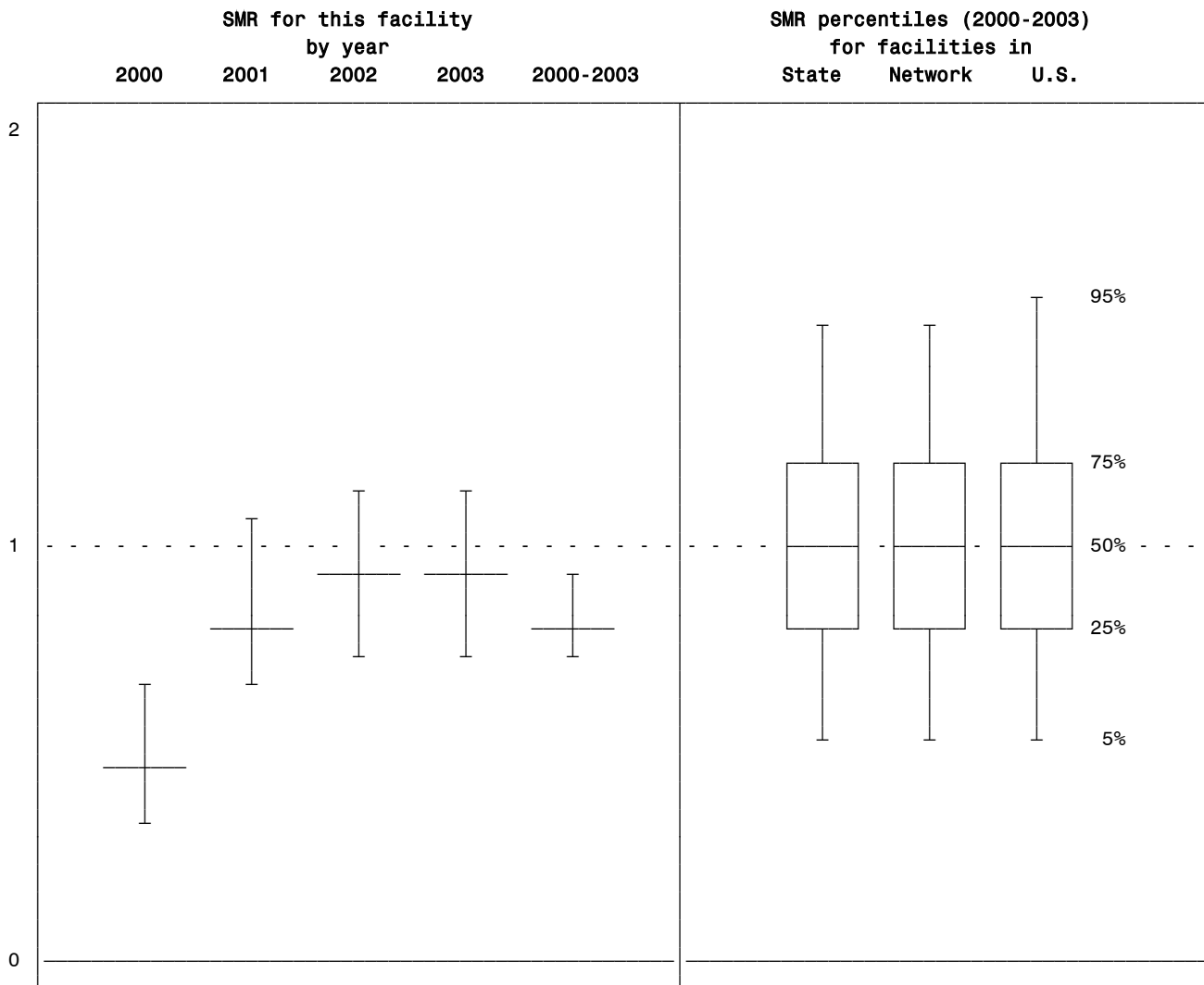
Not shown if there are too few expected deaths.

[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 (C.I.) 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.

FIGURE 1: Standardized Mortality Ratio (SMR) for Dialysis Patients, 2000-2003



The horizontal line 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 the dotted line 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 = 0.82) for 2000-2003, was higher than
 24 percent of facilities in the nation
 22 percent of facilities in this Network
 22 percent of facilities in this state

TABLE 2: Hospitalization Summary for Medicare Dialysis Patients¹, 2000-2002

	<u>This Facility</u>				<u>Regional Averages², 2000-2002, per year</u>		
	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2000-2002</u>	<u>State</u>	<u>Network</u>	<u>U.S.</u>
2a Medicare dialysis patients (n)	228	293	325		71.6	71.6	65.2
2b Patient years (PY) at risk ³ (n)	167.1	226.3	251.7	645.0 ⁵	48.6	48.6	40.8
Total Admission Count							
2c PY at risk for total admissions ³ (n)	163.4	217.0	241.5	621.9 ⁵	46.5	46.5	39.0
2d Total admissions (n)	194	405	427	1026 ⁵	105.6	105.6	79.1
2e Expected total admissions (n)	329	441	490	1260 ⁵	94.4	94.4	79.5
2f Standardized Total Admission Ratio ⁴	0.59	0.92	0.87	0.81	1.12	1.12	1.00
Diagnoses Present at Admission (% of 2a)							
2g Septicemia (% of 2a)	5.7	12.6	9.2	9.5	12.4	12.4	10.5
2h Acute Myocardial Infarction (% of 2a)	0.9	2.4	5.5	3.2	5.0	5.0	4.1
Length of Stay							
2i Unadjusted average length of admission (days)	7.1	8.4	8.7	8.3	7.2	7.2	8.1
2j One day admissions (% of 2d)	7.7	7.7	8.0	7.8	16.2	16.2	15.5
2k Unadjusted average days in the hospital per dialysis patient year	8.2	15.0	14.8	13.1	15.8	15.8	15.7

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 (2c) to expected (2d) total admissions.

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

TABLE 3: Transplantation Summary for Previously Untransplanted Dialysis Patients Under Age 70¹, 2000-2003

	<u>This Facility</u>					<u>Regional Averages², per year, 2000-2003</u>		
	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2003</u>	<u>2000-2003</u>	<u>State</u>	<u>Network</u>	<u>U.S.</u>
Transplantation Rates (among eligible patients)								
3a Eligible patients (n) ¹	204	254	282	309		61.6	61.6	54.9
3b Patient years (PY) at risk (n)	153.2	191.7	213.0	232.5	790 ⁷	42.5	42.5	36.1
3c Actual 1st transplants (n) ³	8	14	17	12	51 ⁷	3.0	3.0	2.2
3d Expected 1st transplants (n)	10.4	13.0	14.6	15.9	53.9 ⁷	2.6	2.6	2.3
3e 1st transplant rate per 100 PY (% of 3b)	5.2	7.3	8.0	5.2	6.5	7.1	7.1	6.2
3f Expected 1st transplant rate per 100 PY at risk (% of 3b)	6.8	6.8	6.8	6.8	6.8	6.2	6.2	6.2
3g Number of cadaveric transplants	6	13	16	11	46 ⁷	2.0	2.0	1.5
Standardized Transplantation Ratio								
3h STR ⁴ (also shown in Figure 3)	0.77	1.07	1.17	0.75	0.95	1.14	1.14	1.00
3i P-value ⁵	0.29	0.43	0.3	0.2	0.38	n/a	n/a	n/a
3j C.I. for STR ⁶								
High (95% limit)	1.39	1.68	1.75	1.22	1.19	n/a	n/a	n/a
Low (5% limit)	0.38	0.65	0.74	0.44	0.74	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	52	55	26	37			
3l In this Network	29	52	55	26	37			
3m In U.S.	44	61	65	45	51			

n/a= not applicable.

[1] See Guide, Section VI.

[2] Values are shown for the average facility.

[3] From 2000-2003, 5.8 % of transplants in the U.S. were not included because the transplant occurred less than 90 days after the start of ESRD and 0.8% were not included because the patient was not assigned to a facility at time of transplant.

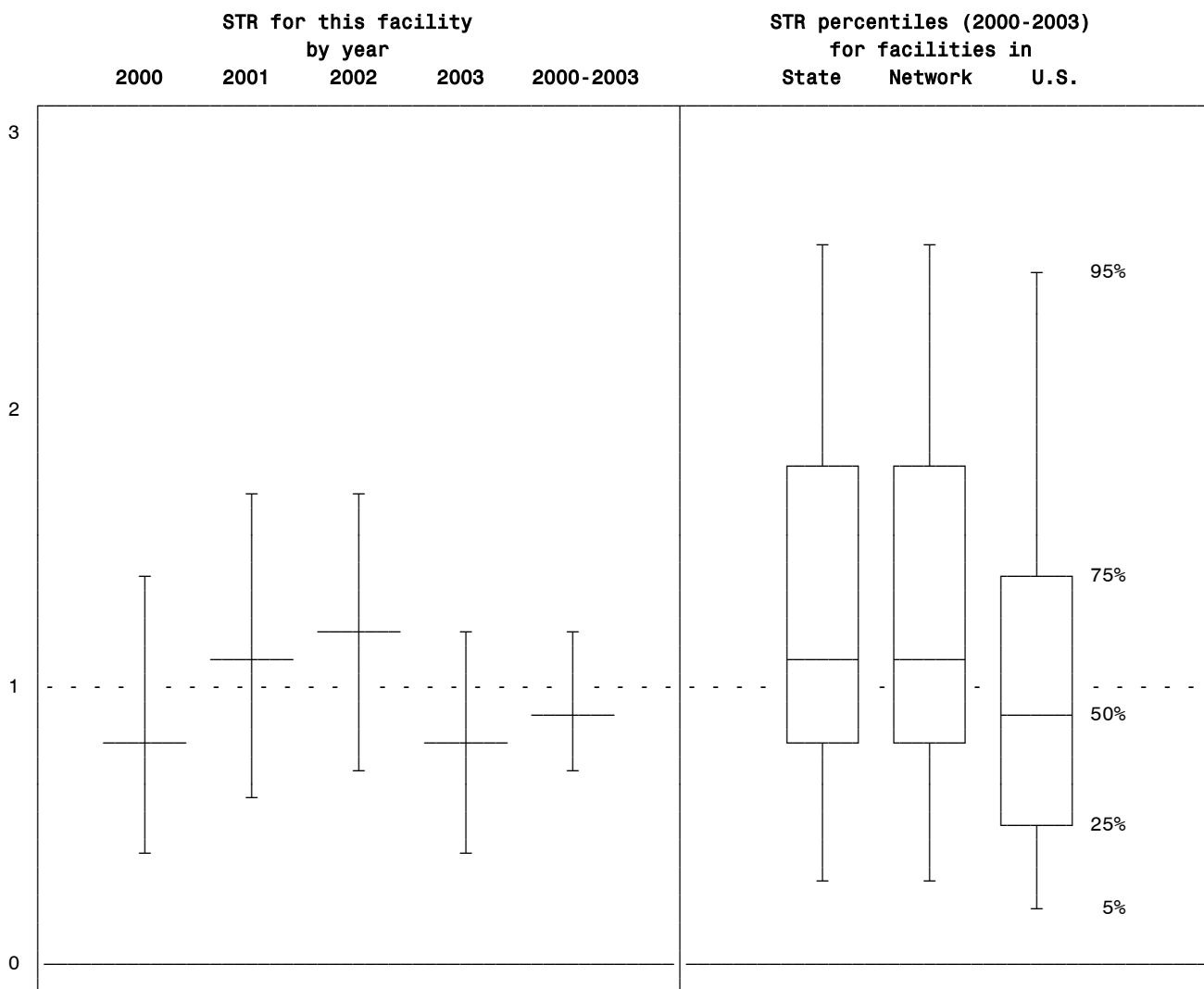
[4] Standardized Transplantation Ratio calculated as ratio of actual (3c) to expected (3d). Not shown if 3d is too small.

[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 (C.I.) 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.

FIGURE 2: Standardized Transplantation Ratio (STR) for Previously Untransplanted Dialysis Patients under Age 70, 2000-2003



The horizontal line 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 the dotted line at 1)

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

The transplantation at this facility (STR = 0.95) for 2000-2003, was higher than
 51 percent of facilities in the nation
 37 percent of facilities in this Network
 37 percent of facilities in this state

TABLE 4: Percent of Patients on the Waitlist among Dialysis Patients under Age 70 Treated as of December 31 of each Year¹, 2000-2003

	<u>This Facility</u>				<u>Regional Averages², 2003</u>		
	2000	2001	2002	2003	State	Network	U.S.
4a Eligible patients on 12/31 (n) ¹	155	277	270	304	53.3	53.3	46.2
4b Patients on the waitlist (% of 4a)	45.2	38.3	38.5	44.1	25.6	25.6	21.6
4c P-value (compared to U.S. value) ³	<.01	<.01	<.01	<.01	n/a	n/a	n/a
4d Patients on the waitlist by subgroup (% of corresponding subgroup in 4e)							
Age < 20	50.0	63.6	62.5	50.0	48.4	48.4	31.1
Age 20-69	45.0	37.2	37.8	44.0	25.5	25.5	21.5
Male	47.1	36.4	39.3	47.0	26.8	26.8	22.6
Female	43.5	40.0	37.9	41.9	24.3	24.3	20.4
Asian/Pacific Islander	100	100	100	100	36.0	36.0	34.4
Black	41.0	34.1	36.6	42.6	24.6	24.6	19.6
Native American	41.7	41.7	17.4
White	84.6	70.8	52.4	61.1	25.8	25.8	22.3
Other/Unknown race	50.0	100	100	100	29.3	29.3	22.7
Diabetes	38.5	29.3	30.9	31.6	18.6	18.6	15.7
Non-diabetes	47.4	41.6	41.8	50.0	29.9	29.9	25.8
Previous kidney transplant	81.3	62.3	63.8	75.0	54.0	54.0	43.6
No previous kidney transplant	35.8	32.6	33.2	39.4	22.5	22.5	19.3
4e Eligible patients in 4a by subgroup (n)							
Age < 20	4	11	8	6	0.4	0.4	0.5
Age 20-69	151	266	262	298	53.0	53.0	45.7
Male	70	132	117	132	29.4	29.4	25.3
Female	85	145	153	172	23.9	23.9	20.9
Asian/Pacific Islander	1	1	2	1	1.4	1.4	1.8
Black	139	249	246	284	26.1	26.1	19.5
Native American	0	0	0	0	0.1	0.1	0.8
White	13	24	21	18	24.1	24.1	22.0
Other/Unknown race	2	3	1	1	1.6	1.6	2.0
Diabetes	39	75	81	98	20.0	20.0	19.3
Non-diabetes	116	202	189	206	33.3	33.3	26.9
Previous kidney transplant	32	53	47	40	5.3	5.3	4.3
No previous kidney transplant	123	224	223	264	48.1	48.1	41.9

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:

20.6% (2000), 20.9% (2001), 21.2% (2002), 21.6% (2003)

A p-value less than or equal to 0.05 indicates that the difference between the percent of patients waitlisted at the facility and the national percentage 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.

TABLE 5: Facility Practice Patterns¹, 2000-2003

Modality	This Facility				Regional Averages ² , 2003		
	2000	2001	2002	2003	State	Network	U.S.
5a Patients treated during year (n) ¹	210	323	358	338	90.0	90.0	79.4
5b Modality (% of 5a; sums to 100%)							
Hemodialysis	85.7	93.8	93.0	94.1	90.1	90.1	92.5
CAPD/CCPD	0.0	3.4	4.7	5.9	8.5	8.5	5.6
Other dialysis	14.3	2.8	2.2	0.0	1.4	1.4	2.0
Hematocrit (among dialysis patients with ESRD for at least 90 days and 4+ hematocrit claims from this facility)							
5c Eligible patients (n) ¹	107	251	261	278	57.1	57.1	49.4
5d Average hematocrit (%)	34.7	34.5	35.2	35.4	35.9	35.9	35.5
5e Hematocrit categories (% of pts. in 5c, sums to 100%)							
< 30.0 %	1.9	7.6	3.1	1.8	2.2	2.2	2.1
30.0-32.9 %	17.8	10.8	14.2	12.2	7.5	7.5	9.1
33.0-35.9 %	52.3	58.2	45.6	44.6	41.6	41.6	49.3
36+ %	28.0	23.5	37.2	41.4	48.7	48.7	39.5
5f Hematocrit 33+ (% of pts. in 5c) (meets K/DOQI guidelines)	80.4	81.7	82.8	86.0	90.3	90.3	88.8
5g C.I. for Hematocrit 33+							
High (95% limit)	86.8	86.0	86.9	89.6	n/a	n/a	n/a
Low (5% limit)	71.9	76.4	77.7	81.4	n/a	n/a	n/a
5h Hematocrit percentiles for this facility (i.e. percent of facilities with smaller % pts with hematocrit 33+)							
In this State	43	24	15	19			
In this Network	43	24	15	19			
In U.S.	45	39	31	29			
5i Hematocrit 33+ (% of HD pts)	80.4	80.2	83.6	87.3	90.5	90.5	88.7
Hematocrit 33+ (% of PD pts)	.	91.7	53.3	54.5	76.0	76.0	76.8
Urea Reduction Ratio (URR) (among HD patients with ESRD for at least 1 year and 4+ URR claims from this facility)							
5j Eligible patients (n) ¹	106	233	252	254	51.6	51.6	44.6
5k URR categories (% of pts. in 5j, sums to 100%)							
< 60.0 %	2.8	3.4	3.2	2.8	4.4	4.4	4.3
60.0-64.9 %	8.5	2.6	4.4	2.4	4.7	4.7	4.5
65.0-69.9 %	38.7	27.0	19.4	23.6	15.6	15.6	16.2
70.0-74.9 %	27.4	27.0	32.9	33.1	31.1	31.1	32.7
75+ %	22.6	39.9	40.1	38.2	44.2	44.2	42.2
5l URR 65+ (% of pts in 5j) (meets K/DOQI guidelines)	88.7	94.0	92.5	94.9	90.9	90.9	91.2
5m C.I. for URR 65+							
High (95% limit)	93.4	96.4	95.1	97.0	n/a	n/a	n/a
Low (5% limit)	81.2	90.2	88.5	91.4	n/a	n/a	n/a
5n URR percentiles for this facility (i.e. percent of facilities with smaller % pts with URR 65+)							
In this State	63	75	65	64			
In this Network	63	75	65	64			
In U.S.	43	63	50	60			

n/a= not applicable.

[1] See Guide, Section VIII.

[2] Values are shown for the average facility.

TABLE 6: Self Reported Practice Pattern Information¹, 2002

	This Facility	Regional Averages ²		
		State	Network	U.S.
6a Reuse method ³ : [% using this method in region; sums to 100%]				
No Reuse	No	32.3	32.3	36.9
Formaldehyde	No	6.9	6.9	13.1
Glutaraldehyde	No	26.2	26.2	2.7
Peracetic acid	Yes	33.8	33.8	44.3
Heat	No	0.0	0.0	1.7
Other	No	0.8	0.8	1.4
6b Hemodialysis patients as of December 2-7, 2002 (chronic, non-transient, in-center patients only)	118	79.8	79.8	65.7
6c Vascular access type (% of 6c) ³ : (sums to 100%)				
AV Graft	34.7	39.1	39.1	41.6
AV Fistula	30.5	32.7	32.7	32.3
Cuffed Catheter	33.9	25.0	25.0	23.1
Non-cuffed Catheter	0.0	2.6	2.6	2.4
Port Access Device	0.8	0.6	0.6	0.6
6d Hemodialysis patients who have ever received at least 3 doses of hepatitis B vaccine (% of 6c).	29.7	40.5	40.5	57.9
6e Number of chronic, non-transient in-center hemodialysis patients treated at any time during 2002 that have converted from hepatitis B surface antigen negative to positive (n)	0	0.22	0.22	0.09

n/a= not applicable.

[1] See Guide, Section IX.

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

[3] Source: 2002 CDC Surveillance.

TABLE 7: Patient Characteristics as Reported on the Medical Evidence Form (CMS Form 2728) for Patients Starting Dialysis¹, 2000-2003

Patient Characteristic [range] ²	This Facility				Regional Averages 2000-2003		
	2000	2001	2002	2003	State	Network	U.S.
7a Total number of patients with forms	35	85	99	111			
7b Age (average Years [0-95])	52.7	53.8	57.1	54.6	62.8	62.8	62.6
7c Sex (% Female)	65.7	51.8	57.6	56.8	46.7	46.7	46.7
7d Ethnicity (% Hispanic)	2.9	2.4	3.0	1.8	8.9	8.9	12.0
7e Race (% of 7a; sums to 100%)							
White	14.3	4.7	15.2	5.4	63.4	63.4	63.4
Black	82.9	94.1	83.8	94.6	32.2	32.2	28.6
Asian	0.0	0.0	1.0	0.0	1.7	1.7	2.3
American Indian/Alaskan Native	0.0	0.0	0.0	0.0	0.2	0.2	1.2
Pacific Islander	0.0	0.0	0.0	0.0	0.4	0.4	0.9
Middle East/Arabian	0.0	0.0	0.0	0.0	0.4	0.4	0.4
Indian Subcontinent	0.0	0.0	0.0	0.0	0.6	0.6	0.3
Other/Multiracial	2.9	0.0	0.0	0.0	0.9	0.9	2.7
Unknown/Missing	0.0	1.2	0.0	0.0	0.2	0.2	0.4
7f Body Mass Index ³ (Weight/Height ²)							
Male	26.6	26.1	25.1	28.2	25.6	25.6	25.4
Female	28.6	27.8	27.5	27.1	26.9	26.9	26.4
7g Primary cause of ESRD (% of 7a; sums to 100%)							
Diabetes	20.0	37.6	37.4	40.5	40.7	40.7	44.8
Hypertension	40.0	25.9	35.4	28.8	32.2	32.2	27.2
Primary Glomerulonephritis	5.7	9.4	12.1	10.8	7.8	7.8	8.5
Other/Missing	34.3	27.1	15.2	19.8	19.2	19.2	19.5
7h Employment ⁴							
Six months prior to ESRD treatment	42.9	34.3	34.0	31.6	40.8	40.8	37.3
At first ESRD treatment	42.9	31.4	27.7	25.4	25.3	25.3	22.5
Average Lab Values Prior to Dialysis [range]²							
7i Hematocrit (% [9-54])	27.8	28.7	29.0	29.3	29.8	29.8	29.9
7j Hemoglobin (g/dl [3-18])	9.2	9.5	9.7	9.8	9.9	9.9	9.9
7k Serum Albumin (g/dl [0.8-6.0])	3.3	3.2	3.3	3.3	3.1	3.1	3.1
7l Serum Creatinine (mg/dl [2-33])	7.8	8.4	7.6	7.6	7.2	7.2	7.3
7m BUN (mg/dl [24-250])	91	82	86	88	86	86	86
7n GFR (ml/min [0-60])	9.1	9.9	10.3	9.9	9.9	9.9	9.5

n/a= not applicable.

[1] See Guide, Section X.

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

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

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

TABLE 7 (CONTINUED): Patient Characteristics as Reported on the Medical Evidence Form (CMS Form 2728) for Patients Starting Dialysis¹, 2000-2003

Patient Characteristic [range] ²	This Facility				Regional Averages 2000-2003		
	2000	2001	2002	2003	State	Network	U.S.
7o Pre-existing Comorbidity (% yes of 7a)							
Congestive Heart Failure	11.4	7.1	29.3	20.7	29.7	29.7	32.0
Ischemic Heart Disease, CAD	11.4	5.9	16.2	18.0	23.1	23.1	25.1
Myocardial Infarction	2.9	3.5	8.1	4.5	7.9	7.9	8.8
Cardiac Arrest	0.0	0.0	0.0	0.0	0.8	0.8	0.8
Cardiac Dysrhythmia	5.7	2.4	8.1	5.4	4.0	4.0	6.2
Pericarditis	0.0	0.0	2.0	2.7	0.4	0.4	0.6
CVD, CVA, TIA	2.9	7.1	9.1	10.8	8.8	8.8	9.4
Peripheral Vascular Disease	5.7	7.1	5.1	5.4	10.7	10.7	14.3
History of Hypertension	45.7	49.4	66.7	66.7	77.5	77.5	78.6
Diabetes ³	28.6	15.3	35.4	34.2	45.4	45.4	45.2
Diabetes/on insulin (% of total)	17.1	16.5	26.3	17.1	22.8	22.8	22.7
Chronic Obstructive Pulmonary Disease	0.0	3.5	4.0	4.5	7.0	7.0	7.6
Current Smoker	5.7	3.5	5.1	6.3	4.4	4.4	5.0
Cancer	5.7	4.7	4.0	6.3	6.9	6.9	6.0
Alcohol Dependence	2.9	1.2	1.0	0.9	1.6	1.6	1.3
Drug Dependence	0.0	1.2	1.0	1.8	1.4	1.4	0.9
Inability to Ambulate	0.0	1.2	3.0	6.3	3.0	3.0	4.1
Inability to Transfer	0.0	1.2	1.0	1.8	1.1	1.1	1.5
7p HIV status (% of 7a; sums to 100%)							
Positive	0.0	2.4	0.0	0.0	0.9	0.9	0.8
Cannot disclose	0.0	0.0	0.0	0.0	0.3	0.3	21.6
Negative/Missing/Unknown	100	97.6	100	100	98.9	98.9	77.7
7q AIDS status (% of 7a; sums to 100%)							
Positive	0.0	1.2	1.0	1.8	0.3	0.3	0.4
Cannot disclose	0.0	0.0	0.0	0.0	0.3	0.3	21.5
Negative/Missing/Unknown	100	98.8	99.0	98.2	99.4	99.4	78.1
7r Average number of comorbid conditions	1.5	1.3	2.3	2.2	2.6	2.6	2.7
7s Average Comorbidity Index ⁴	-13.1	-13.5	-4.2	-4.5	-1.5	-1.5	0.0

n/a= not applicable.

[1] See Guide, Section X.

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

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

[4] Expected impact of patient comorbidity on mortality at the facility as a percent difference from US average.

TABLE 8: Summaries for All Dialysis Patients Treated as of December 31 of each Year¹, 2000-2003

	<u>This Facility</u>				<u>Regional Averages², 2003</u>		
	2000	2001	2002	2003	State	Network	U.S.
8a Patients treated on 12/31 of year (n)	302	354	376	401	74.8	74.8	64.9
8b Average age (yrs)	57.9	56.5	58.0	57.1	60.8	60.8	60.4
8c Age (% of 8a; sums to 100%)							
< 20	1.3	2.8	1.6	1.5	0.5	0.5	0.6
20-64	57.3	58.2	56.9	62.1	54.8	54.8	55.9
65+	41.4	39.0	41.5	36.4	44.7	44.7	43.4
8d Cause of ESRD (% of 8a; sums to 100%)							
Diabetes	29.5	29.7	32.4	34.2	37.2	37.2	41.3
Hypertension	41.4	37.9	38.3	35.9	31.4	31.4	27.2
Glomerulonephritis	7.6	7.3	8.0	9.5	10.4	10.4	11.4
Other/Unknown	14.6	19.2	16.5	16.2	17.4	17.4	18.0
Missing	7.0	5.9	4.8	4.2	3.5	3.5	2.1
8e Race (% of 8a; sums to 100%)							
Asian/Pacific Islander	0.7	0.3	0.3	0.2	2.6	2.6	4.1
Black	91.4	92.4	93.6	95.3	42.6	42.6	37.7
Native American	0.0	0.0	0.0	0.0	0.2	0.2	1.5
White	7.3	6.5	5.6	4.2	52.0	52.0	52.8
Other/Unknown/Missing	0.7	0.8	0.5	0.2	2.6	2.6	3.8
8f Ethnicity (% of 8a; sums to 100%)							
Hispanic	1.7	2.0	1.6	2.0	9.3	9.3	13.3
Non-Hispanic	67.2	75.4	80.6	84.3	82.0	82.0	80.3
Unknown	31.1	22.6	17.8	13.7	8.7	8.7	6.4
8g Female (% of 8a)	56.6	55.1	56.6	59.9	46.4	46.4	46.8
8h Average duration of ESRD (yrs)	5.4	5.0	4.9	4.8	3.9	3.9	4.0

[1] See Guide, Section XI.

[2] Values are shown for the average facility.

TABLE 9: How Patients were Assigned to this Facility and End of Year Patient Status¹, 2000-2003²

	<u>This Facility</u>				<u>Regional Averages², 2003</u>		
	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2003</u>	<u>State</u>	<u>Network</u>	<u>U.S.</u>
9a Number of patients placed in facility ¹ (n)	345	442	490	518	108.1	108.1	92.5
9b Initial patient placement for the year in this facility (% of 9a; sums to 100%)							
Continuing at facility on 1/1	66.1	68.3	72.2	72.6	67.4	67.4	67.8
Incident (new to ESRD)	13.0	16.3	17.6	19.3	21.7	21.7	21.1
Transferred into facility	20.9	15.4	10.2	8.1	10.9	10.9	11.0
9c Patient status at end of year (% of 9a; sums to 100%)							
Alive in this facility on 12/31	87.5	80.1	76.7	77.4	69.2	69.2	70.2
Alive in another facility on 12/31	1.7	2.7	4.3	3.7	8.2	8.2	7.9
Received a transplant	2.6	3.4	4.5	3.9	3.7	3.7	3.1
Died; death attributed to this facility	6.7	12.0	12.9	13.7	15.9	15.9	15.8
Died; death attributed to another facility	0.9	0.9	0.4	1.2	1.5	1.5	1.5
Other ²	0.6	0.9	1.2	0.2	1.5	1.5	1.5

[1] See Guide, Section XII.

[2] 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 10: Patient Counts from Annual Facility Survey (CMS Form 2744)¹, 2000-2002

	<u>This Facility</u>			<u>Regional Averages², 2002</u>		
	2000	2001	2002	State	Network	U.S.
10a Patients treated during year (n)	92	327	530	126.3	126.3	104.8
10b Incident patients (% of 10a)	9.8	15.3	18.9	23.4	23.4	21.2
10c Transferred into facility (% of 10a)	52.2	26.9	8.9	12.3	12.3	14.2
10d Transferred out of facility (% of 10a)	21.7	9.8	10.0	13.2	13.2	14.5
Patients Treated as of 12/31						
10e Patients treated as of 12/31 (n)	66	243	381	82.4	82.4	69.0
10f Medicare eligibility status as of 12/31 (% of 10e; sums to 100%)						
Medicare	77.3	78.6	82.2	81.1	81.1	89.3
Medicare application pending	3.0	1.6	2.6	11.0	11.0	6.3
Non-Medicare	19.7	19.8	15.2	7.9	7.9	4.4
10g Patient modality (n; sums to 10e)						
In-center HD	32	205	357	73.9	73.9	62.3
In-center IPD	0	0	0	0.0	0.0	0.0
In-center CAPD	0	0	0	0.1	0.1	0.0
In-center CCPD	1	0	0	0.0	0.0	0.0
Home HD	0	0	0	1.0	1.0	0.3
Home IPD	0	0	0	0.0	0.0	0.0
Home CAPD	15	9	11	3.5	3.5	2.6
Home CCPD	18	29	13	3.9	3.9	3.7
Transient Patients						
10h Transient patients treated during year (n)	2	12	14	4.3	4.3	18.4
10i In-center treatments for transient patients (n)	13	37	35	15.0	15.0	66.3

[1] See Guide, Section XIII.

[2] Values are shown for the average facility.

TABLE 11: Facility Information¹, 2004

Date of last survey: 03/22/2002

Type of action at last survey: RECERTIFICATION

Ownership: For Profit

Organization: INDEPENDENT

Initial Medicare certification date: 08/01/1998

Number of stations: 66

Services provided: Hemodialysis and Peritoneal Dialysis

Accepts pediatric patients: Yes

Practices dialyzer reuse: Yes

Provider numbers included in this report: 140088 142310 143523 143524 143527

[1] See Guide, Section XIV.