

2005 Dialysis Facility Report

Purpose of the Report

Enclosed is the *2005 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): 143524

This 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, Network, and across the United States.

In October 2005, each state surveyor 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 2005 (www.medicare.gov).

Collaborators

CMS has contracted with the University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) to produce the *2005 Dialysis Facility Reports*. CMS has also contracted with Qualis Health and the Colorado Foundation for Medical Care (CFMC), both of which are 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 2005. 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 2005 with your comments.
- UM-KECC:** Questions about your DFR for UM-KECC.

The deadline for submitting comments is September 9, 2005.

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 tenth in a series of annual reports. This is one of 4851 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 2005. 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 2004. The patient survival measure was calculated for Medicare approved dialysis facilities operating at any time from 2001 through 2004. 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 2004 with URR \geq 65% <i>Number of patients included in calculation: 0</i>	Not Available
2. The percentage of Medicare patients treated in this facility during 2004 with hematocrit \geq 33% <i>Number of patients included in calculation: 3</i>	Not Available
3. Patient survival reported as “as expected”, “better than expected”, or “worse than expected” for the time period 2001-2004 for this facility <i>Standardized Mortality Ratio (SMR): 1.13</i> <i>Upper Confidence Limit: 1.59</i> <i>Lower Confidence Limit: 0.78</i>	As Expected

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 who were treated in this facility between January 2001 and December 2004, with vascular access information reported through March 2005. 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, including 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 at incidence, and comorbidities at incidence, as well as state population death rates. The rate of withdrawal from dialysis and the percentage of deaths due to infection are reported in the table to help in the interpretation of the mortality outcomes.

There was a 17% annual observed death rate among the patients treated at this facility during 2001-2004, while a rate of 15% would be expected, based on the age, sex, race, diabetes as cause of ESRD, duration of ESRD, BMI, and comorbidities of those patients; and state population death rates. The SMR of observed to expected deaths is 1.13, which is not far (13%) above the national reference value of 1.00.

Hospitalization: Hospitalization summaries are reported for Medicare patients in Table 2. The total admission rate reports the total number of hospital admissions per year, including multiple admissions per patient. 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 0.93, which is 7% 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 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 2001-2004 who had not previously been transplanted, 11.0% were transplanted annually, while a rate of 7.6% would be expected for these patients. The STR of observed to expected number of patients transplanted for this facility is 1.45, which is 45% 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, 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 41 dialysis patients under age 70 treated at this facility on December 31, 2004, 56% 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 use for prevalent and incident patients, as reported in the CMS Fistula First data, are summarized in Table 6. State surveyors should keep in mind that this is the first time that the Fistula First data have been included in these reports. We would like feedback on the ways to best summarize and present this information, both in order to improve the utility of these reports in the future and to explore potential issues that might be relevant for public reporting of such statistics.

There were only 3 EPO-treated patients at this facility with hematocrit included in the analysis of Medicare claims data for 2004. There were no patients at this facility with URR (dose of dialysis) included in the analysis of Medicare claims data for 2004.

We do not have information on the fistula use at this facility. See Tables 5 and 6 for more information about practice patterns.

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

The percentage of patients at this facility hospitalized due to septicemia during 2001-2003 was 5.4%, compared to 10.6% nationally.

Patient Characteristics: Characteristics of patients starting dialysis during 2001-2004 are reported in Table 7. Table 8 gives summaries for all dialysis patients being treated at the end of each year, 2001-2004.

There were 9 patients with Medical Evidence Forms (CMS 2728) indicating they started treatment at this facility during 2004. The average number of comorbidities reported on the CMS 2728 for these patients was 2.1, which is lower than the average of 2.8 reported nationally for patients starting treatment during 2001-2004. The average serum albumin calculated for these patients (before first dialysis) is 3.7 g/dl, which is higher than the 2001-2004 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 2001-2004 national average value of 9.6.

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 40 patients at the end of 2003 and reported having 5 stations available in 2005. This facility offers peritoneal dialysis services only. 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 September 9, 2005. 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 2005 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 (UM-KECC)
under contract to the Centers for Medicare & Medicaid Services

TABLE 1: Mortality Summary for All Dialysis Patients¹, 2001-2004

	This Facility					Regional Averages ² , per Year, 2001-2004		
	2001	2002	2003	2004	2001-2004	State	Network	U.S.
Death Rates								
1a Patients (n=number)	49	50	51	59		97.5	97.5	92.8
1b Patient years (PY) at risk (n)	30.9	33.0	36.3	39.9	140 ⁷	65.5	65.5	58.3
1c Deaths (n)	6	4	8	6	24 ⁷	15.6	15.6	13.4
1d Expected deaths (n)	4.6	4.9	5.6	6.1	21.2 ⁷	15.2	15.2	13.4
1e Death rate per 100 PY (% of 1b)	19.4	12.1	22.1	15.0	17.1	23.9	23.9	23.0
1f Expected death rate per 100 PY (% of 1b)	14.9	14.9	15.5	15.2	15.2	23.2	23.2	23.0
Categories of Death								
1g Withdrawal from dialysis prior to death (% of 1c)	0.0	25.0	0.0	0.0	4.2	16.0	16.0	22.2
1h Due to infections (% of 1c)	16.7	25.0	0.0	16.7	12.5	14.1	14.1	21.3
1i Dialysis unrelated deaths ³ (n) (excluded from SMR)	0	0	0	0	0 ⁷	0.1	0.1	0.1
Standardized Mortality Ratio								
1j SMR ⁴ (see Figure 1)	1.30	0.81	1.42	0.99	1.13	1.03	1.03	1.00
1k P-value ⁵	0.32	0.45	0.2	0.59	0.3	n/a	n/a	n/a
1l C.I. for SMR ⁶								
High (95% limit)	2.57	1.85	2.57	1.95	1.59	n/a	n/a	n/a
Low (5% limit)	0.57	0.28	0.71	0.43	0.78	n/a	n/a	n/a
SMR Percentiles for This Facility (i.e. percent of facilities with lower mortality rates)								
1m In this State	82	20	88	55	70			
1n In this Network	82	20	88	55	70			
1o In U.S.	79	29	86	54	70			

n/a = not applicable.

[1] See *Guide*, Section IV.

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

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

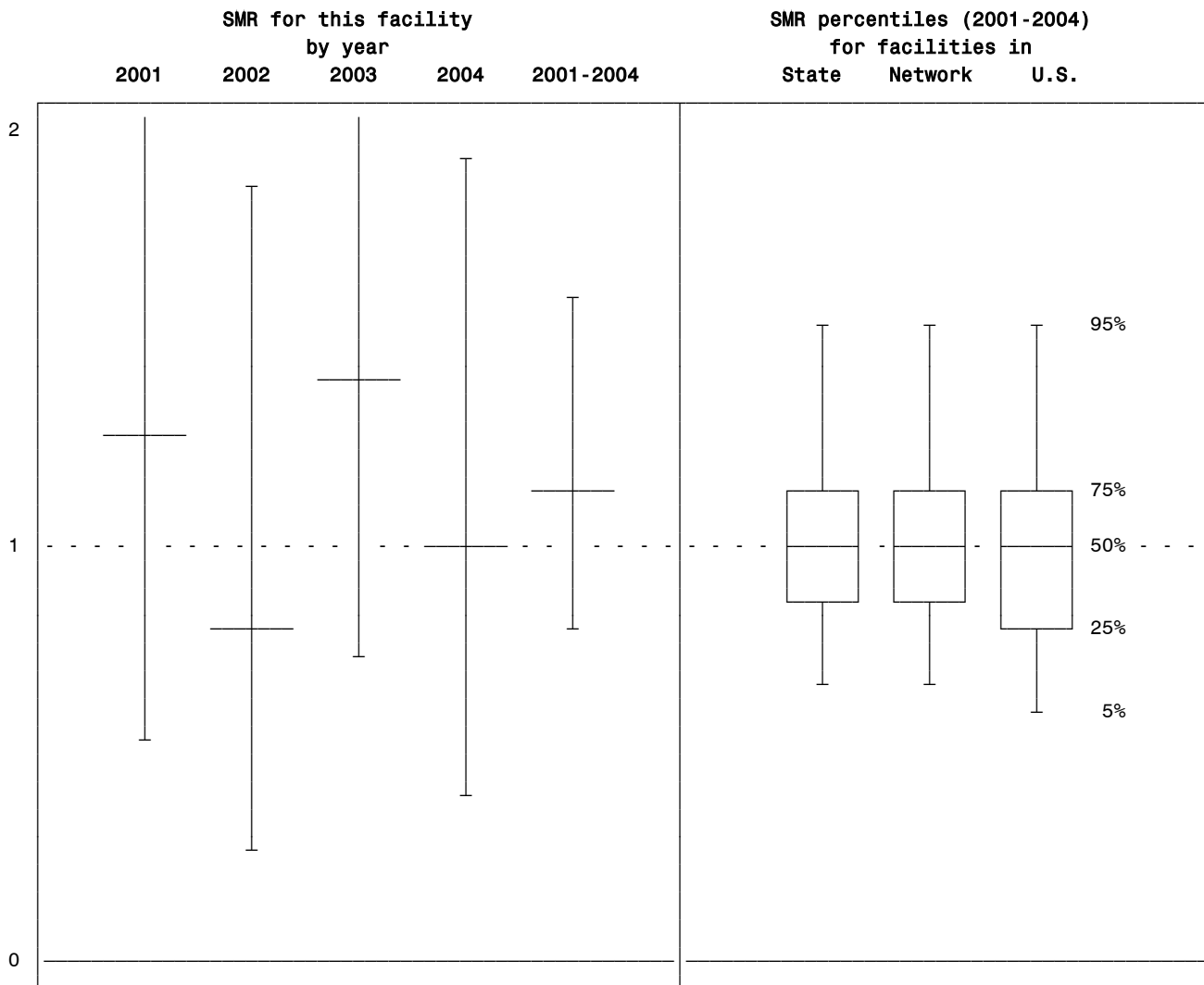
[4] Calculated as a ratio of deaths (1c) to expected deaths (1d).
Not shown if there are too few expected deaths.

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

[6] The confidence interval (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, 2001-2004



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 = 1.13) for 2001-2004, was higher than
 70 percent of facilities in the nation
 70 percent of facilities in this Network
 70 percent of facilities in this state

TABLE 2: Hospitalization Summary for Medicare Dialysis Patients¹, 2001-2003

	This Facility				Regional Averages ² , 2001-2003, per Year		
	2001	2002	2003	2001-2003	State	Network	U.S.
2a Medicare dialysis patients (n)	18	21	17		70.0	70.0	68.0
2b Patient years (PY) at risk ³ (n)	12.2	15.4	13.2	40.8 ⁵	47.0	47.0	41.9
Total Admission Count							
2c PY at risk for total admissions ³ (n)	11.7	14.7	12.3	38.7 ⁵	44.9	44.9	40.1
2d Total admissions (n)	15	28	32	75 ⁵	102.9	102.9	81.3
2e Expected total admissions (n)	23	30	27	80 ⁵	90.9	90.9	81.4
2f Standardized Total Admission Ratio ⁴	0.64	0.92	1.20	0.93	1.13	1.13	1.00
Diagnoses Present at Admission (% of 2a)							
2g Septicemia (% of 2a)	0.0	4.8	11.8	5.4	12.7	12.7	10.6
2h Acute Myocardial Infarction (% of 2a)	0.0	4.8	11.8	5.4	5.2	5.2	4.2
Length of Stay							
2i Unadjusted average length of admission (days)	11.2	9.8	9.8	10.0	7.3	7.3	8.1
2j One day admissions (% of 2d)	0.0	0.0	6.3	2.7	15.6	15.6	15.0
2k Unadjusted average days in the hospital per dialysis patient year	13.8	17.7	23.7	18.5	16.0	16.0	15.8

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] 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, 2001-2004

	This Facility					Regional Averages ² , per Year, 2001-2004		
	2001	2002	2003	2004	2001-2004	State	Network	U.S.
Transplantation Rates (among eligible patients)								
3a Eligible patients (n) ¹	34	31	37	41		59.5	59.5	56.7
3b Patient years (PY) at risk (n)	20.7	23.2	26.5	29.2	100 ⁷	40.7	40.7	36.6
3c Actual 1st transplants (n) ³	3	4	1	3	11 ⁷	3.0	3.0	2.3
3d Expected 1st transplants (n)	1.6	1.9	2.0	2.1	7.6 ⁷	2.5	2.5	2.3
3e 1st transplant rate per 100 PY (% of 3b)	14.5	17.2	3.8	10.3	11.0	7.3	7.3	6.2
3f Expected 1st transplant rate per 100 PY at risk (% of 3b)	7.9	8.1	7.4	7.3	7.6	6.1	6.1	6.2
3g Number of cadaveric transplants	2	4	1	2	9 ⁷	1.9	1.9	1.5
Standardized Transplantation Ratio								
3h STR ⁴ (also shown in Figure 2)	1.83	2.13	0.51	1.41	1.45	1.18	1.18	1.01
3i P-value ⁵	0.23	0.12	0.42	0.36	0.15	n/a	n/a	n/a
3j C.I. for STR ⁶								
High (95% limit)	4.74	4.88	2.42	3.65	2.40	n/a	n/a	n/a
Low (5% limit)	0.50	0.73	0.03	0.38	0.81	n/a	n/a	n/a
STR Percentiles for This Facility (i.e. percent of facilities with lower transplantation rates)								
3k In this State	80	89	19	63	64			
3l In this Network	80	89	19	63	64			
3m In U.S.	83	88	31	72	75			

n/a= not applicable.

[1] See *Guide*, Section VI.

[2] Values are shown for the average facility.

[3] Among first transplants that occurred after the start of dialysis from 2001-2004, 4.5 % of transplants in the U.S. were not included because the transplant occurred less than 90 days after the start of ESRD and 0.7 % were not included because the patient was not assigned to a facility at time of transplant.

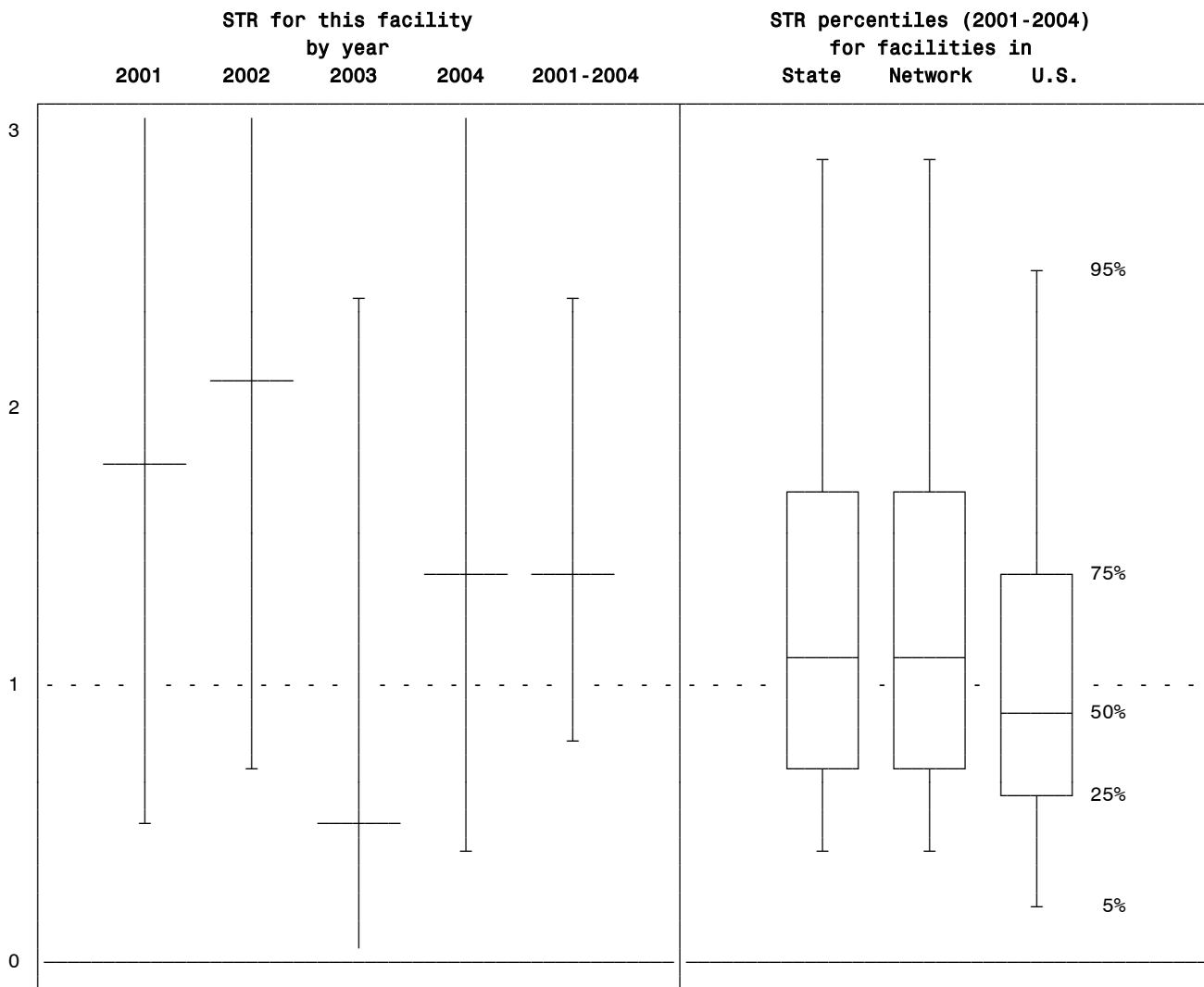
[4] Standardized Transplantation Ratio calculated as ratio of actual (3c) to expected (3d). Not shown if 3d is too small.

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

[6] The confidence interval (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, 2001-2004



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 = 1.45) for 2001-2004, was higher than
 75 percent of facilities in the nation
 64 percent of facilities in this Network
 64 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, 2001-2004

	This Facility				Regional Averages ² , 2004		
	2001	2002	2003	2004	State	Network	U.S.
4a Eligible patients on 12/31 (n) ¹	32	30	36	41	49.1	49.1	45.7
4b Patients on the waitlist (% of 4a)	56.3	60.0	69.4	56.1	25.8	25.8	22.0
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	60.0	66.7	75.0	42.9	35.1	35.1	33.9
Age 20-69	55.6	59.3	68.8	58.8	25.7	25.7	21.9
Male	50.0	55.6	73.3	65.0	26.6	26.6	23.0
Female	61.1	61.9	66.7	47.6	24.9	24.9	20.8
Asian/Pacific Islander	.	100	100	50.0	34.7	34.7	35.4
Black	42.9	50.0	66.7	60.7	25.9	25.9	20.1
Native American	.	.	.	.	26.3	26.3	16.7
White, Hispanic	.	100	100	100	24.7	24.7	23.9
White, Non-Hispanic	80.0	80.0	66.7	33.3	25.5	25.5	22.3
Other/Unknown race	100	.	.	33.3	24.5	24.5	22.8
Diabetes	50.0	77.8	66.7	55.6	20.0	20.0	16.2
Non-diabetes	57.7	52.4	70.8	56.3	29.3	29.3	26.2
Previous kidney transplant	83.3	100	100	55.6	55.6	55.6	43.9
No previous kidney transplant	50.0	50.0	63.3	56.3	22.5	22.5	19.8
<2 years since start of ESRD	46.2	50.0	63.2	55.0	15.2	15.2	13.9
2-4 years since start of ESRD	54.5	54.5	75.0	50.0	29.5	29.5	26.3
5+ years since start of ESRD	75.0	85.7	77.8	61.5	37.4	37.4	29.1
4e Eligible patients in 4a by subgroup (n)							
Age < 20	5	3	4	7	0.4	0.4	0.5
Age 20-69	27	27	32	34	48.7	48.7	45.2
Male	14	9	15	20	27.6	27.6	25.2
Female	18	21	21	21	21.6	21.6	20.4
Asian/Pacific Islander	0	1	1	2	1.2	1.2	1.8
Black	21	22	27	28	23.9	23.9	19.2
Native American	0	0	0	0	0.1	0.1	0.8
White, Hispanic	0	2	2	2	4.6	4.6	5.4
White, Non-Hispanic	10	5	6	6	17.5	17.5	16.4
Other/Unknown race	1	0	0	3	1.9	1.9	2.0
Diabetes	6	9	12	9	18.4	18.4	19.3
Non-diabetes	26	21	24	32	30.8	30.8	26.4
Previous kidney transplant	6	6	6	9	4.9	4.9	4.2
No previous kidney transplant	26	24	30	32	44.2	44.2	41.5
<2 years since start of ESRD	13	12	19	20	20	20	19
2-4 years since start of ESRD	11	11	8	8	16	16	14
5+ years since start of ESRD	8	7	9	13	13	13	13

n/a= not applicable. [1] See *Guide*, Section VII. [2] Values are shown for the average facility.
 [3] Facility waitlist percentage is compared to the U.S. waitlist percentage for that year: 21.0% (2001), 21.3% (2002), 21.5% (2003), 22.0% (2004). A p-value >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 Practice Patterns¹, 2001-2004

Modality	This Facility				Regional Averages ² , 2004		
	2001	2002	2003	2004	State	Network	U.S.
5a Patients treated during year (n) ¹	20	25	35	35	83.5	83.5	77.6
5b Modality (% of 5a; sums to 100%)							
Hemodialysis	0.0	0.0	37.1	5.7	84.9	84.9	87.8
CAPD/CCPD	65.0	80.0	60.0	51.4	6.9	6.9	4.3
Other dialysis	35.0	20.0	2.9	42.9	8.3	8.3	7.9
Hematocrit (among EPO treated dialysis patients with ESRD for 90+ days and 4+ hematocrit claims from this facility)							
5c Eligible patients (n) ¹	12	12	12	3	51.6	51.6	48.2
5d Average hematocrit (%)	34.7	32.9	32.9	34.4	35.9	35.9	35.8
5e Hematocrit categories (% of 5c; sums to 100%)							
< 30.0 %	8.3	16.7	16.7	0.0	1.8	1.8	1.7
30.0-32.9 %	0.0	25.0	33.3	33.3	6.8	6.8	7.3
33.0-35.9 %	66.7	58.3	33.3	66.7	42.4	42.4	43.9
36+ %	25.0	0.0	16.7	0.0	49.0	49.0	47.1
5f Hematocrit 33+ (% of 5c) (meets K/DOQI guidelines)	91.7	58.3	50.0	66.7	91.4	91.4	91.0
5g C.I. for Hematocrit 33+							
High (95% limit)	98.5	80.7	74.6	93.9	n/a	n/a	n/a
Low (5% limit)	64.6	32.0	25.4	20.8	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	73	2	1	3			
In this Network	73	2	1	3			
In U.S.	78	2	1	3			
5i Hematocrit 33+ (% of HD pts)	.	.	.	.	91.7	91.7	91.1
Hematocrit 33+ (% of PD pts)	91.7	58.3	50.0	66.7	80.2	80.2	78.8
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	0	0	0	0	47.8	47.8	44.1
5k URR categories (% of 5j; sums to 100%)							
< 60.0 %	.	.	.	.	3.4	3.4	3.7
60.0-64.9 %	.	.	.	.	3.9	3.9	4.0
65.0-69.9 %	.	.	.	.	14.1	14.1	14.6
70.0-74.9 %	.	.	.	.	28.5	28.5	32.4
75+ %	.	.	.	.	50.0	50.0	45.2
5l URR 65+ (% of 5j) (meets K/DOQI guidelines)	.	.	.	.	92.7	92.7	92.3
5m C.I. for URR 65+							
High (95% limit)	.	.	.	.	n/a	n/a	n/a
Low (5% limit)	.	.	.	.	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	.	.	.	.
In this Network	.	.	.	.
In U.S.	.	.	.	.

n/a= not applicable.

[1] See *Guide*, Section VIII.

[2] Values are shown for the average facility.

The CDC vascular access statistics that have been included in this report in past years are no longer available. The vascular access statistics reported on the following table are derived instead from the CMS Fistula First Initiative data. While they are likely to be similar to those your ESRD Network has sent to you, both the format and the completeness of the data may differ somewhat from the Network statistics. We expect the more current and detailed data from Fistula First to prove useful to facilities and surveyors. Similar to the CDC data, these data are self-reported at the facility level (not patient-specific) and have not been verified.

TABLE 6: Self-Reported Vascular Access Information¹, Quarterly from April 2004 - March 2005

	2004			2005 Q1	2004 Q2- 2005 Q1	Regional Averages ² , 2004 Q2 - 2005 Q1		
	Q2	Q3	Q4			State	Network	U.S.
Vascular Access in Use								
6a Prevalent hemodialysis patient months ³ (n)			
6b Vascular access type in use ⁴ (% of 6a; sums to 100%)								
AV Fistula	35.6	35.6	36.6
AV Graft	31.7	31.7	34.9
Catheter	30.6	30.6	27.5
Other	0.0	0.0	0.0
Missing	2.2	2.2	1.0
6c Fistulae placed ⁵ (% of 6a)	42.3	42.3	43.3
6d Catheter only > 90 days ⁶ (% of 6a)	15.1	15.1	12.9
Vascular Access at First Treatment								
6e Incident hemodialysis patients (n)	23.2	23.2	18.7
6f Vascular access type in use ⁴ (% of 6e; sums to 100%)								
AV Fistula	10.2	10.2	13.0
AV Graft	7.0	7.0	8.3
Catheter	64.5	64.5	70.5
Other	0.0	0.0	0.3
Missing	18.4	18.4	8.0
6g Fistulae placed ⁵ (% of 6e)	18.9	18.9	24.2

n/a= not applicable.

[1] See *Guide*, Section IX. Source: CMS Fistula First Initiative

[2] Values are shown for the average facility.

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

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

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

[6] Catheter was used for treatment and has been in place for 90 days or more prior to treatment. Patient does not have an AV fistula or AV graft in place. Catheter is only access.

Note: Port Access Devices are reported as catheters for this project.

TABLE 7: Patient Characteristics as Reported on the Medical Evidence Form (CMS Form 2728) for Patients Starting Dialysis¹, 2001-2004

Patient Characteristics [range] ²	This Facility				Regional Averages 2001-2004		
	2001	2002	2003	2004	State	Network	U.S.
7a Total number of patients with forms	22	10	15	9			
7b Age (average Years [0-95])	46.3	43.0	40.1	57.3	62.7	62.7	62.5
7c Sex (% Female)	31.8	70.0	46.7	66.7	46.5	46.5	46.3
7d Ethnicity (% Hispanic)	0.0	10.0	0.0	0.0	9.1	9.1	12.6
7e Race (% of 7a; sums to 100%)							
White	4.5	40.0	26.7	33.3	63.1	63.1	63.7
Black	90.9	50.0	73.3	66.7	32.5	32.5	28.3
Asian	0.0	10.0	0.0	0.0	1.7	1.7	2.4
American Indian/Alaskan Native	0.0	0.0	0.0	0.0	0.2	0.2	1.1
Pacific Islander	0.0	0.0	0.0	0.0	0.4	0.4	1.0
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	0.7	0.7	0.3
Other/Multiracial	0.0	0.0	0.0	0.0	0.8	0.8	2.5
Unknown/Missing	4.5	0.0	0.0	0.0	0.3	0.3	0.3
7f Body Mass Index ³ (Weight/Height ²)							
Male	22.6	27.5	26.2	22.0	25.8	25.8	25.6
Female	24.8	23.9	26.7	28.0	27.1	27.1	26.6
7g Primary cause of ESRD (% of 7a; sums to 100%)							
Diabetes	31.8	40.0	26.7	44.4	40.6	40.6	44.9
Hypertension	22.7	20.0	0.0	0.0	32.9	32.9	27.6
Primary Glomerulonephritis	4.5	10.0	20.0	22.2	7.1	7.1	8.1
Other/Missing	40.9	30.0	53.3	33.3	19.4	19.4	19.4
7h Employment ⁴							
Six months prior to ESRD treatment	16.7	0.0	77.8	0.0	39.9	39.9	36.3
At first ESRD treatment	16.7	0.0	77.8	25.0	24.5	24.5	21.9
Average Lab Values Prior to Dialysis [range]²							
7i Hematocrit (% [9-60])	29.3	29.5	31.3	33.9	30.0	30.0	30.1
7j Hemoglobin (g/dl [3-18])	9.7	9.8	10.9	11.4	10.0	10.0	10.0
7k Serum Albumin (g/dl [0.8-6.0])	3.3	3.5	3.7	3.7	3.1	3.1	3.1
7l Serum Creatinine (mg/dl [2-33])	8.6	5.8	7.7	6.4	6.9	6.9	7.1
7m BUN (mg/dl [24-250])	91	79	82	64	85	85	85
7n GFR (ml/min [0-60])	9.9	11.6	9.3	9.9	10.0	10.0	9.6

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, 2001-2004

Patient Characteristic [range] ²	This Facility				Regional Averages 2001-2004		
	2001	2002	2003	2004	State	Network	U.S.
Comorbid Conditions							
7o Pre-existing Comorbidity (% yes of 7a)							
Congestive Heart Failure	4.5	10.0	0.0	11.1	31.0	31.0	32.0
Ischemic Heart Disease, CAD	0.0	0.0	0.0	11.1	24.0	24.0	25.2
Myocardial Infarction	0.0	0.0	0.0	11.1	7.4	7.4	8.6
Cardiac Arrest	0.0	0.0	0.0	0.0	0.8	0.8	0.7
Cardiac Dysrhythmia	0.0	0.0	0.0	0.0	4.5	4.5	6.3
Pericarditis	0.0	0.0	0.0	0.0	0.4	0.4	0.6
CVD, CVA, TIA	0.0	0.0	6.7	11.1	9.1	9.1	9.3
Peripheral Vascular Disease	0.0	0.0	0.0	11.1	10.8	10.8	14.2
History of Hypertension	18.2	80.0	60.0	77.8	78.7	78.7	79.8
Diabetes ³	31.8	50.0	26.7	44.4	52.4	52.4	53.6
Diabetes/on insulin	4.5	40.0	13.3	11.1	23.2	23.2	22.6
COPD	0.0	0.0	0.0	0.0	7.4	7.4	7.8
Current Smoker	0.0	0.0	0.0	0.0	4.6	4.6	5.0
Cancer	0.0	20.0	6.7	22.2	6.7	6.7	6.2
Alcohol Dependence	0.0	0.0	0.0	0.0	1.6	1.6	1.3
Drug Dependence	0.0	0.0	0.0	0.0	1.4	1.4	1.0
Inability to Ambulate	0.0	0.0	6.7	0.0	3.4	3.4	4.1
Inability to Transfer	0.0	0.0	0.0	0.0	1.1	1.1	1.5
7p HIV status (% of 7a; sums to 100%)							
Positive	4.5	0.0	0.0	0.0	0.8	0.8	0.8
Cannot disclose	0.0	0.0	0.0	0.0	0.1	0.1	22.6
Negative/Missing/Unknown	95.5	100	100	100	99.1	99.1	76.6
7q AIDS status (% of 7a; sums to 100%)							
Positive	0.0	0.0	0.0	0.0	0.3	0.3	0.4
Cannot disclose	0.0	0.0	0.0	0.0	0.1	0.1	22.6
Negative/Missing/Unknown	100	100	100	100	99.6	99.6	77.0
7r Average number of comorbid conditions	0.6	2.0	1.2	2.1	2.7	2.7	2.8
7s Average Comorbidity Index ⁴	-21.8	-9.2	-16.8	-7.3	-1.1	-1.1	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 U.S. average.

TABLE 8: Summaries for All Dialysis Patients Treated as of December 31 of Each Year¹, 2001-2004

	<u>This Facility</u>				<u>Regional Averages², 2004</u>		
	2001	2002	2003	2004	State	Network	U.S.
8a Patients treated on 12/31 of year (n)	31	31	36	44	69.0	69.0	64.4
8b Average age (yrs)	45.4	50.6	46.8	47.4	61.1	61.1	60.5
8c Age (% of 8a; sums to 100%)							
< 20	12.9	6.5	11.1	13.6	0.5	0.5	0.7
20-64	71.0	71.0	72.2	65.9	54.2	54.2	55.9
65+	16.1	22.6	16.7	20.5	45.3	45.3	43.4
8d Cause of ESRD (% of 8a; sums to 100%)							
Diabetes	19.4	25.8	33.3	27.3	37.3	37.3	41.7
Hypertension	22.6	25.8	16.7	13.6	31.4	31.4	27.3
Glomerulonephritis	19.4	16.1	22.2	25.0	10.2	10.2	11.2
Other/Unknown	29.0	22.6	25.0	27.3	16.8	16.8	17.7
Missing	9.7	9.7	2.8	6.8	4.3	4.3	2.1
8e Race (% of 8a; sums to 100%)							
Asian/Pacific Islander	0.0	0.0	2.8	4.5	2.6	2.6	4.1
Black	71.0	77.4	77.8	72.7	42.4	42.4	37.5
Native American	0.0	0.0	0.0	0.0	0.2	0.2	1.5
White	25.8	22.6	19.4	15.9	51.6	51.6	53.1
Other/Unknown/Missing	3.2	0.0	0.0	6.8	3.3	3.3	3.9
8f Ethnicity (% of 8a; sums to 100%)							
Hispanic	3.2	6.5	5.6	6.8	9.9	9.9	13.9
Non-Hispanic	83.9	83.9	91.7	84.1	82.7	82.7	80.3
Unknown	12.9	9.7	2.8	9.1	7.4	7.4	5.9
8g Female (% of 8a)	67.7	74.2	61.1	56.8	46.0	46.0	46.5
8h Average duration of ESRD (yrs)	3.7	4.7	4.2	4.8	4.0	4.0	4.1
8i Years since start of ESRD (% of 8a; sums to 100%)							
<1	12.9	16.1	25.0	18.2	19.4	19.4	19.4
1-2	25.8	12.9	22.2	29.5	19.9	19.9	19.8
2-3	19.4	19.4	8.3	15.9	15.7	15.7	14.8
3-6	22.6	29.0	27.8	9.1	24.9	24.9	25.5
6+	19.4	22.6	16.7	27.3	20.1	20.1	20.4

[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, 2001-2004²

	<u>This Facility</u>				<u>Regional Averages², 2004</u>		
	<u>2001</u>	<u>2002</u>	<u>2003</u>	<u>2004</u>	<u>State</u>	<u>Network</u>	<u>U.S.</u>
9a Number of patients placed in facility ¹ (n)	49	50	51	59	100.9	100.9	92.5
9b Initial patient placement for the year in this facility (% of 9a; sums to 100%)							
Continuing at facility on 1/1	49.0	62.0	60.8	61.0	67.1	67.1	67.4
Incident (new to ESRD)	18.4	16.0	27.5	16.9	20.6	20.6	20.8
Transferred into facility	32.7	22.0	11.8	22.0	12.2	12.2	11.9
9c Patient status at end of year (% of 9a; sums to 100%)							
Alive in this facility on 12/31	63.3	62.0	70.6	74.6	68.4	68.4	69.6
Alive in another facility on 12/31	12.2	12.0	3.9	3.4	9.1	9.1	8.6
Received a transplant	10.2	14.0	5.9	6.8	3.5	3.5	3.2
Died; death attributed to this facility	12.2	8.0	15.7	10.2	15.6	15.6	15.5
Died; death attributed to another facility	2.0	2.0	3.9	0.0	1.8	1.8	1.6
Other ²	0.0	2.0	0.0	5.1	1.6	1.6	1.6

[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, 2001-2003

	<u>This Facility</u>			<u>Regional Averages², 2003</u>		
	2001	2002	2003	State	Network	U.S.
10a Patients treated during year (n)	55	56	58	119.3	119.3	105.0
10b Incident patients (% of 10a)	14.5	12.5	22.4	21.4	21.4	21.1
10c Transferred into facility (% of 10a)	23.6	3.6	10.3	13.4	13.4	13.7
10d Transferred out of facility (% of 10a)	20.0	19.6	8.6	14.5	14.5	13.9

Patients Treated as of 12/31

10e Patients treated as of 12/31 (n)	38	26	40	78.2	78.2	70.1
10f Patient modality (n; sums to 10e)						
In-center HD	0	4	10	69.7	69.7	63.6
In-center IPD	0	0	0	0.0	0.0	0.0
In-center CAPD	0	0	0	0.0	0.0	0.0
In-center CCPD	0	0	0	0.0	0.0	0.0
Home HD	0	0	0	1.3	1.3	0.3
Home IPD	0	0	0	0.0	0.0	0.0
Home CAPD	9	10	8	3.0	3.0	2.4
Home CCPD	29	12	22	4.0	4.0	3.8
10g Medicare eligibility status as of 12/31 (% of 10e; sums to 100%)						
Medicare	68.4	76.9	75.0	83.6	83.6	89.0
Medicare application pending	5.3	3.8	2.5	9.0	9.0	6.5
Non-Medicare	26.3	19.2	22.5	7.3	7.3	4.5

Transient Patients

10h Transient patients treated during year (n)	0	0	0	6.3	6.3	18.3
10i In-center treatments for transient patients (n)	0	0	0	37.6	37.6	62.8

[1] See *Guide*, Section XIII.

[2] Values are shown for the average facility.

TABLE 11: Facility Information¹, 2005

Date of last survey: 01/15/2004

Type of action at last survey: RECERTIFICATION

Ownership: For Profit

Organization:

Initial Medicare certification date: 01/01/1991

Number of stations: 5

Services provided: Peritoneal Dialysis

Provider numbers included in this report: 143524

[1] See *Guide*, Section XIV.