

Dialysis Facility Report for Fiscal Year (FY) 2022

Purpose of the Report

The *Dialysis Facility Report (DFR) for FY 2022* is provided as a resource for characterizing selected aspects of clinical experience at this facility relative to other caregivers in this state, ESRD Network, and across the United States. Since these data could be useful in quality improvement and assurance activities, each state's surveying agency may utilize this report as a resource during the FY 2022 survey and certification process.

This report has been prepared for this facility by the University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) with funding from the Centers for Medicare & Medicaid Services (CMS) and is based primarily on data reported in CROWNWeb, Medicare claims and data collected for CMS. It is the twenty-sixth in a series of annual reports. This is one of 8,079 reports that have been distributed to ESRD providers in the U.S.

This DFR includes data specific to CCN(s): 999999

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 2017 and December 2020. Mortality, hospitalization, transplantation, and waitlist statistics are reported for a three- or four-year period. Regional and national averages are included to allow for comparisons. Some of the summaries of patient mortality, hospitalization, transplantation, waitlist, vascular access, and anemia management are adjusted to account for the characteristics of the patient mix at this facility, such as age, sex and diabetes as a cause of ESRD. Unless otherwise specified, data refer to hemodialysis (HD) and peritoneal dialysis (PD) patients combined.

Selected facility highlights from this report are provided on pages 4 through 7. For a complete description of the methods used to calculate the statistics in this report, please see the *Guide to the Dialysis Facility Reports for FY 2022*. The *Guide* may be downloaded from the methodology section of the Dialysis Data website at www.DialysisData.org.

What's New This Year

As part of a continuing effort to improve the quality and relevance of this report for your facility, the following changes have been incorporated into the DFR for FY 2022:

- COVID-19 patient counts, deaths, and hospitalizations among Medicare dialysis patients are reported in the new Table C1, and among Medicare nursing home (NH) dialysis patients in the new Table C2. These summaries are presented for each quarter of 2020, with regional averages presented for Quarter 4 (October 2020 – December 2020).
- COVID adjustments are included in the models for Standardized Mortality Ratio (Table 3), Standardized Hospitalization Ratio - Admissions (Table 4), and Standardized Readmission Ratio (Table 4).
- Influenza vaccinations reported in CROWNWeb are now included in Table 7.
- Summaries of selected measures from this report are presented for nursing home patients in the new Table 15 for facilities that have more than ten patients who were in a nursing home at least one day during 2020, and were active in the facility on December 31, 2020.
- Medicare Advantage patients are now included in Standardized Hospitalization Ratio (Admissions and Days) in Table 4 and Prevalent Comorbidities in Table 12. As a result, prevalent comorbidity summaries are restricted to inpatient claims.

Data Limitations in FY 2022 DFRs

Due to incomplete CROWNWeb data for 2020 and the COVID Extraordinary Circumstances Exception (ECE) data policy from CMS, the measures reported in the FY 2022 Dialysis Facility Report based on calendar year 2020 have been modified to optimize the available information. Here we provide a brief overview of the impact of data incompleteness and exclusions on the FY 2022 DFR.

The CMS ECE policy restricts the use and availability of claims data from March-June 2020 and CROWNWeb clinical data from January–June 2020. In addition, CROWNWeb data incompleteness for the end of 2020 results in:

- Unavailable clinical data for the last four months of the calendar year;
- Unavailable incident dialysis patient data during the last three months of the calendar year;
- An inability to place patients in dialysis facilities for the last two months of the calendar year.

Although this affects all measures, several measures in the DFRs do not need incident patients or patient assignment through the end of 2020 because of the 90-day new patient rule and 60-day transfer rules. (Please see *Guide to the Dialysis Facility Reports for FY 2022*, in the section entitled “General Inclusion Criteria for Dialysis Patients” for details on the 90-day and 60-day rules.) Information on hospitalizations, transplants, wait listing, nursing home, and deaths are available through the end of 2020. CROWNWeb clinical data are only available for July and August 2020 (due to both ECE and data incompleteness). A summary of data available for 2020 measures reported in the FY 2022 DFR is provided in the table below. Table footnotes provide additional information for specific measures impacted by the data limitations.

Incorporating COVID-19 Data Exclusions

Data from January 2020 – June 2020 CROWNWeb clinical data will be excluded from all calculations. This affects summaries for both adult and pediatric measures as applicable: Influenza Vaccination (Table 7); Anemia Management - Hemoglobin (Table 8); Dialysis Adequacy (Table 9); Mineral Metabolism (Table 10); and Vascular Access (Table 11). PD Kt/V, long-term catheter rates, and influenza vaccination rates for all dialysis patients in 2020 are not available due to insufficient data. Outcomes during the period March 2020 – June 2020 for remaining measures will not be reported. This includes summaries for both adult and pediatric measures as applicable: Mortality (Table 3); Hospitalization including Emergency Department and Readmission statistics (Table 4); Transplantation (Table 5); Waitlist (Table 6); Influenza Vaccination (Table 7); Anemia Management - STRR (Table 8); and Vascular Access – PD Infection (Table 11).

How to Submit Comments

Between July 15, 2021 and August 15, 2021, facilities may submit comments to their state surveyor or UM-KECC by visiting www.DialysisData.org, logging on to view their report, and clicking on the **Comments & Inquiries** tab. Questions or comments after the comment period is over may be submitted to us directly at DialysisData@umich.edu or 1-855-764-2885.

- (1) **State Surveyor:** Select “**DFR: Comments on DFR for State Surveyor**” from the drop down list to submit comments regarding this report for the state's surveyor(s). Any comments submitted will be appended and sent to the state’s surveyor(s) in September 2021. Please do not include questions for UM-KECC using this option.
- (2) **UM-KECC:** Select “**DFR: Comments on DFR for UM-KECC**” to submit questions or suggestions to improve the DFR to UM-KECC. These comments will not be shared with CMS or your state surveyor.

Table: Data Availability for 2020 Summaries in the FY 2022 Dialysis Facility Reports

DFR Table	2020 Data Availability
Table C1: COVID-19 in Medicare Dialysis Patients, 2020 Table C2: COVID-19 in Medicare Dialysis Patients Treated in Nursing Home Facilities, 2020 Table 1: Summaries for All Dialysis Patients Treated as of December 31st Table 12: Comorbidities Reported on Inpatient Medicare Claims for Medicare Dialysis Patients	January-December (12 months)
Table 2: Characteristics of New Dialysis Patients (Form CMS-2728)	January-September (9 months)
Table 3: Mortality Summaries: All Dialysis Patients (SMR) and New Patients (2019 FY SMR) Table 4: Hospitalization Summary: Standardized Hospitalization Ratios (SHRs) Table 5: Transplantation Summary for Dialysis Patients (STR) Table 6: Summary for New Dialysis Patients (2019 SWR) Table 8: Anemia Management: Transfusion (STrR)	January-February, July-December (8 months)
Table 4: Readmission Summaries (SRR)	January 1-30, July-October (5 months)
Table 6: Waitlist Summary for All Dialysis Patients (Patients Waitlisted) Table 11: Access-Related Infection Summaries for All Medicare Patients	January-February, July-October (6 months)
Table 7: Influenza Vaccination Summary for Medicare Dialysis Patients for August 2019-March 2020 flu season	January-February (2 out of 3 months)
Table 8: Anemia Management: Hemoglobin Table 9: Dialysis Adequacy Summaries: HD Kt/V, UFR, and Albumin (HD and PD) Table 10: Mineral Metabolism Summaries: Calcium, Phosphorous, Hypercalcemia Table 11: Vascular Access Information for All Dialysis Patients and at Incidence (VA types and SFR)	July-August (2 months)

SAMPLE

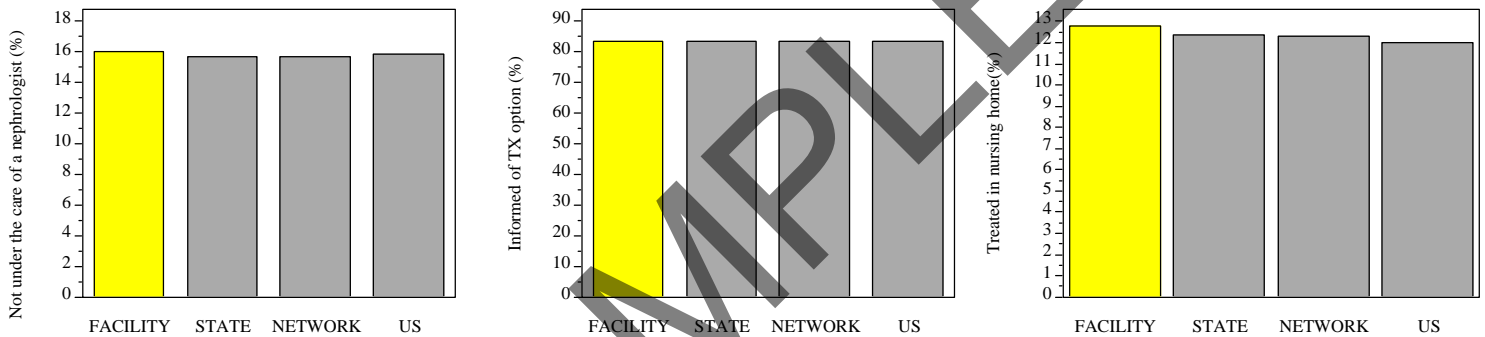
Facility Highlights

Bar charts in this section are displayed as a percentage for all measures reported and highlight the facility's value compared to the state, network, and US.

The line charts in this section are displayed for all standardized measures. The markers show the values of the corresponding standardized measure for this facility, state, network, and US. The bolded horizontal line shows the range of uncertainty due to random variation (95% confidence interval; significant if it does not cross the 1.0 reference line). Regional and national values are plotted above the dotted line to allow for comparisons to facility values.

Patient Characteristics (Tables 1 and 2):

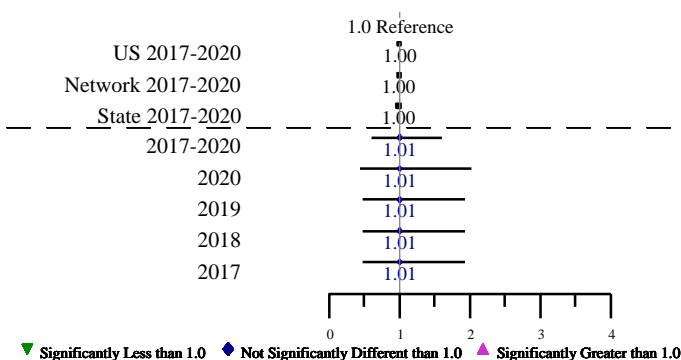
- Among the 10 incident patients with Medical Evidence Forms (CMS-2728) indicating treatment at this facility during 2020:
 - 16% of these patients were not under the care of a nephrologist before starting dialysis, compared to 16% in your State, 16% in your Network, and 16% nationally.
 - 84% of these patients were informed of their transplant options, compared to 84% in your State, 83% in your Network, and 83% nationally.
- Among the patients treated at this facility on December 31, 2020, 13% were treated in a nursing home during the year, compared to 12% in your State, 12% in your Network, and 12% nationally.



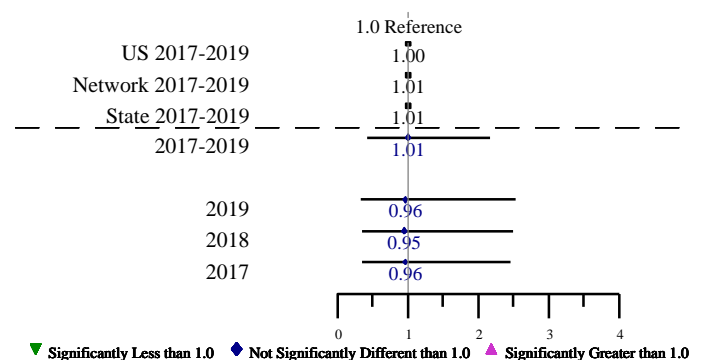
Standardized Mortality Ratio (SMR) (Table 3):

- At this facility, the 2017-2020 SMR is 1.01, which is 1% more deaths than expected at this facility. Among all U.S. facilities, 50% of facilities had a four-year SMR lower than 1.01. This difference is not statistically significant ($p \geq 0.05$), so this higher mortality could plausibly be just a chance occurrence. The 2017-2020 SMR of observed to expected deaths is 1.00 and 1.00 for your State and Network, respectively.
- At this facility, the 2017-2019 first-year SMR of observed to expected deaths is 1.01, which is 51% more deaths than expected at this facility. Among all U.S. facilities, 51% of facilities had a first-year SMR lower than 1.01. This difference is not statistically significant ($p \geq 0.05$), so this higher mortality could plausibly be just a chance occurrence. The first-year SMR (2017-2019) of observed to expected deaths is 1.01 and 1.01 for your State and Network, respectively.

2017-2020 SMR

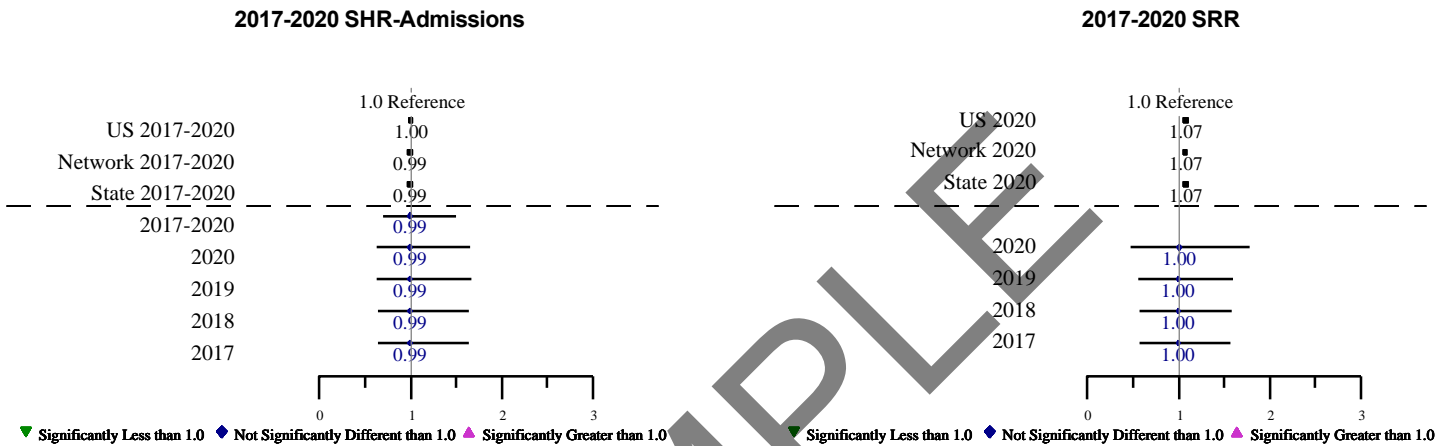


2017-2019 First-Year SMR



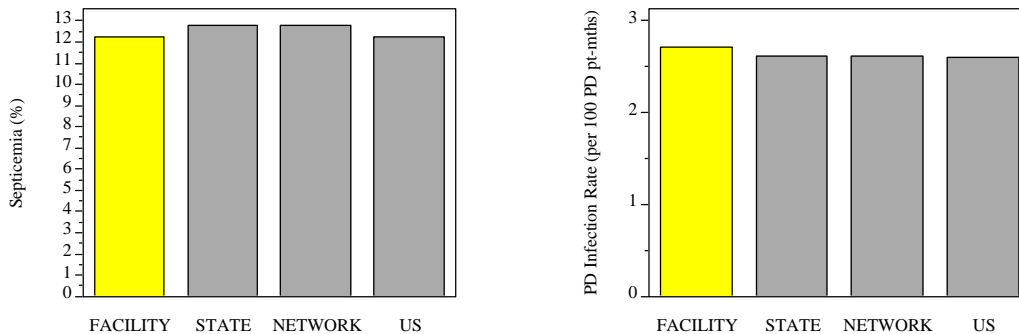
Hospitalizations and Readmissions (Table 4):

- The 2017-2020 Standardized Hospitalization Ratio (SHR-Admissions) at this facility is 0.99, which is 1% fewer admissions hospitalized than expected. This difference is not statistically significant ($p \geq 0.05$), so this lower hospitalization could plausibly be just a chance occurrence. The 2017-2020 SHR (Admissions) for your State and Network is 0.99 and 0.99, respectively.
- The 2020 Standardized Readmission Ratio (SRR) at this facility is 1.00, which is equivalent to the national reference value. The 2020 SRR for your State and Network is 1.07 and 1.07, respectively.



Infection (Tables 4 and 11):

- The percentage of Medicare dialysis patients at this facility hospitalized with septicemia during 2017-2020 is 12%, compared to 13% in your State, 13% in your Network, and 12% nationally.
- The 2020 rate of PD catheter-related infection was 2.7 per 100 PD patient-months, compared to 2.6 in your State, 2.6 in your Network, and 2.6 nationally.

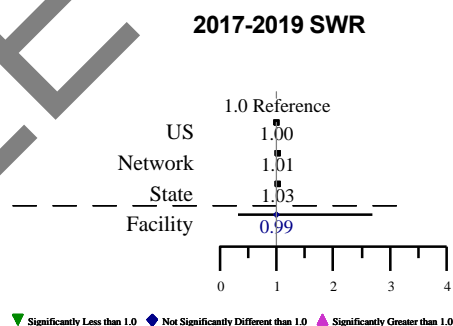
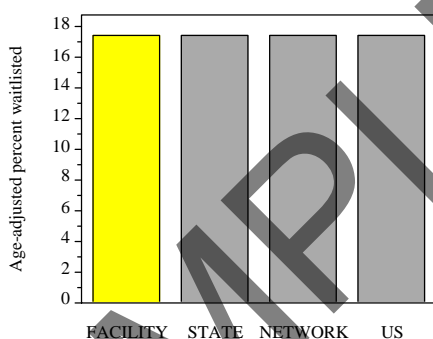
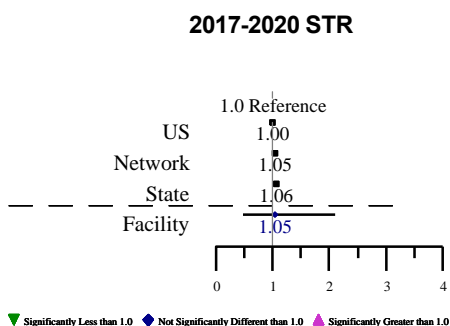


Transplantation (Table 5):

- The 2017-2020 Standardized 1st Transplantation Ratio (STR) of observed to expected number of patients transplanted for this facility is 1.05, which is 5% higher than expected for this facility. This difference is not statistically significant ($p \geq 0.05$) and is plausibly due to random chance. The 2017-2020 STR for your State and Network is 1.06 and 1.05, respectively.

Transplant Waitlist (Table 6):

- The 2020 age-adjusted percent waitlisted at this facility is 17.4%, which equal to the national adjusted percentage. The age-adjusted percent waitlisted in your State and Network is 17.5% and 17.4%, respectively.
- At this facility, the 2017-2019 Standardized Waitlist Ratio (SWR) is 0.99, which is 1% fewer patients on the waitlist and living donor transplants than expected at this facility. This difference is not statistically significant ($p \geq 0.05$) and could plausibly be due to a chance occurrence. The 2017-2019 SWR for your State and Network is 1.03 and 1.01, respectively.

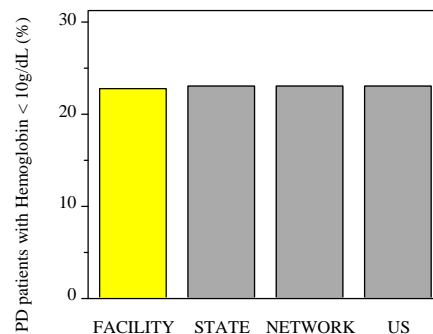
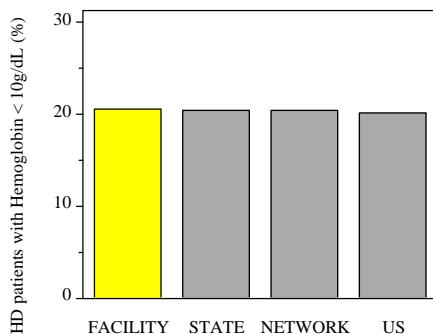
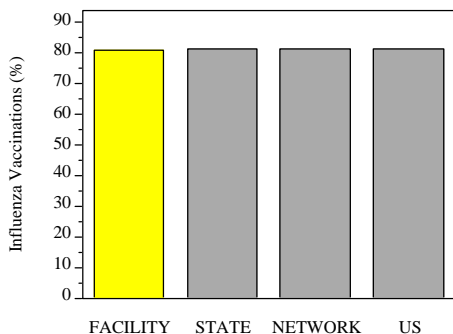


Influenza Vaccination (Table 7):

- Among the 34 Medicare dialysis patients treated at this facility on December 31, 2020, 81% were vaccinated between August 1 and December 31, 2020 compared to 81% nationally. This difference is not statistically significant ($p \geq 0.05$) and is plausibly due to random chance. The percentage of patients vaccinated in your State and Network is 81% and 81%, respectively.

Anemia Management (Table 8):

- In 2020, 21% of eligible hemodialysis patient-months had a hemoglobin value below 10 g/dL, compared to 20% in your State, 20% in your Network, and 20% nationally.
- In 2020, 23% of eligible peritoneal dialysis patient-months had a hemoglobin value below 10 g/dL, compared to 23% in your State, 23% in your Network, and 23% nationally.



Dialysis Adequacy (Table 9):

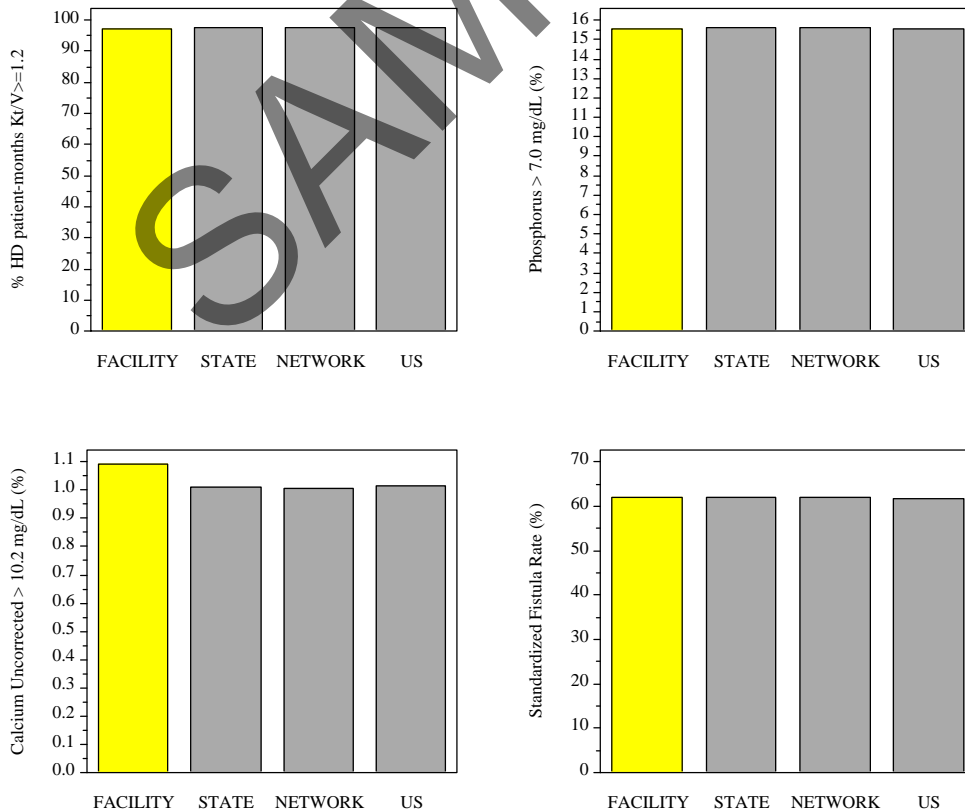
- In 2020, 97% of eligible hemodialysis patient-months had a Kt/V ≥ 1.2 reported, compared to 97% in your State, 97% in your Network, and 97% nationally.
- The percentage of eligible peritoneal dialysis (PD) patients at this facility with Kt/V ≥ 1.7 in 2020 was not calculated due to data limitations. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

Mineral Metabolism (Table 10):

- In 2020, 16% of eligible patient-months had a serum phosphorus value >7.0 mg/dL, compared to 16% in your State, 16% in your Network, and 16% nationally.
- In 2020, 1.1% of eligible patient-months had calcium uncorrected value >10.2 mg/dL, compared to 1.0% in your State, 1.0% in your Network, and 1.0% nationally.

Vascular Access (Table 11):

- This facility's 2020 Standardized Fistula Rate (SFR) for prevalent patients is 62%, which is 0% higher than the national SFR. This difference is not statistically significant ($p \geq 0.05$) and could plausibly be due to a chance occurrence. The SFR in your State and Network is 62% and 62%, respectively.
- The long-term catheter rate among prevalent patients receiving hemodialysis treatment at this facility in 2020 was not calculated due to data limitations. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.



Dialysis Facility Report for Fiscal Year (FY) 2022
 SAMPLE Dialysis Facility State: XX Network: 99 CCN: SAMPLE

The tables below provide quarterly updates of COVID-19 patient counts, deaths, and hospitalizations among Medicare dialysis patients (Table C1) and Medicare nursing home (NH) dialysis patients (Table C2) in 2020 Q1-Q4.

TABLE C1. COVID in Medicare Dialysis Patients, 2020^{*1}

Item	Outcome Description	This Facility				Regional Averages Q4: Oct-Dec		
		Q1: Jan-Mar	Q2: Apr-Jun	Q3: Jul-Sep	Q4: Oct-Dec	State	Network	U.S.
1	Medicare dialysis patients treated during the quarter (n)	59	57	57	53	n/a	n/a	n/a
2	Patients ever identified with COVID [prior to or during current quarter] (n)	0	3	4	6	n/a	n/a	n/a
	Patients ever identified with COVID (% of 1)	0.0	5.3	7.0	11.3	12.1	12.1	12.1
3	Patients first identified with COVID in current quarter (n)	0	2	2	3	n/a	n/a	n/a
	Patients first identified with COVID in current quarter (% of 1)	0.0	3.5	3.5	5.7	6.5	6.5	6.4
Deaths among Medicare patients								
4	Deaths (n)	3	3	3	3	n/a	n/a	n/a
5	Deaths among patients ever identified with COVID (n)	0	1	1	1	n/a	n/a	n/a
	Deaths among patients ever identified with COVID (% of 4)	0.0	33.3	33.3	33.3	27.5	27.4	27.7
Hospitalizations^{*2} among Medicare patients								
6	Hospitalizations (n)	18	15	16	14	n/a	n/a	n/a
7	Hospitalizations among patients ever identified with COVID (n)	0	2	2	4	n/a	n/a	n/a
	Hospitalizations among patients ever identified with COVID (% of 6)	0.0	13.3	12.5	28.6	26.0	25.9	26.0

[*1] Includes patients with Medicare as primary insurer or with a Medicare Advantage plan. See *Guide*, Section XIX.

[*2] Hospitalization is defined as having at least one day in a hospital from Medicare inpatient claims during the reporting period.

TABLE C2. COVID in Medicare Dialysis Patients Treated in Nursing Home (NH) Facilities, 2020^{*1}

Item	Outcome Description	This Facility				Regional Averages Q4: Oct-Dec		
		Q1: Jan-Mar	Q2: Apr-Jun	Q3: Jul-Sep	Q4: Oct-Dec	State	Network	U.S.
1	Medicare NH dialysis patients treated during the quarter (n)	7	6	6	5	n/a	n/a	n/a
2	Patients ever identified with COVID [prior to or during current quarter] (n)	0	1	1	2	n/a	n/a	n/a
	Patients ever identified with COVID (% of 1)	0.0	16.7	16.7	40.0	38.8	39.0	39.3
3	Patients first identified with COVID in current quarter (n)	0	1	1	1	n/a	n/a	n/a
	Patients first identified with COVID in current quarter (% of 1)	0.0	16.7	16.7	20.0	20.1	20.2	20.0
Deaths among Medicare NH patients								
4	Deaths (n)	1	1	1	1	n/a	n/a	n/a
5	Deaths among patients ever identified with COVID (n)	0	0	0	0	n/a	n/a	n/a
	Deaths among patients ever identified with COVID (% of 4)	0.0	0.0	0.0	0.0	38.5	38.6	38.8
Hospitalizations^{*2} among Medicare NH patients								
6	Hospitalizations (n)	5	3	3	3	n/a	n/a	n/a
7	Hospitalizations among patients ever identified with COVID (n)	0	1	1	1	n/a	n/a	n/a
	Hospitalizations among patients ever identified with COVID (% of 6)	0.0	33.3	33.3	33.3	41.0	41.3	41.5

[*1] Includes patients treated in a nursing home at least one day during the quarter and have Medicare as primary insurer or with a Medicare Advantage plan. See *Guide*, Section XIX.

[*2] Hospitalization is defined as having at least one day in a hospital from Medicare inpatient claims during the reporting period.

TABLE 1: Summaries for All Dialysis Patients Treated as of December 31st of Each Year^{*1}, 2017-2020

Measure Name	This Facility				Regional Averages ^{*2} , 2020		
	2017	2018	2019	2020	State	Network	U.S.
1a Patients treated on 12/31 (n)	58	59	61	59	60.7	60.7	60.7
1b Average age (years)	61.9	62.2	62.5	62.5	62.6	62.6	62.6
1c Age (% of 1a; sums to 100%)							
< 18	0.8	0.8	0.8	0.8	0.2	0.2	0.2
18-64	52.5	51.5	50.5	50.4	51.4	51.5	51.4
65+	46.7	47.7	48.8	48.9	48.4	48.3	48.4
1d Female (% of 1a)	42.8	42.6	42.5	42.2	42.5	42.5	42.4
1e Race (% of 1a; sums to 100%) ^{*3}							
African American	32.7	32.7	32.6	33.4	35.8	36.0	34.6
Asian/Pacific Islander	4.8	4.8	5.0	5.2	5.2	5.5	6.5
Native American	1.4	1.3	1.3	1.3	1.3	1.2	1.2
White	60.9	60.9	60.7	59.7	57.2	56.9	57.3
Other/Unknown/Missing	0.3	0.3	0.3	0.4	0.4	0.4	0.5
1f Ethnicity (% of 1a; sums to 100%)							
Hispanic	15.6	15.6	15.9	16.2	16.7	16.9	19.0
Non-Hispanic	84.2	84.2	83.8	83.3	82.9	82.7	80.6
Unknown	0.2	0.3	0.3	0.5	0.4	0.4	0.4
1g Primary Cause of ESRD (% of 1a; sums to 100%)							
Diabetes	45.3	45.5	45.6	45.0	45.5	45.6	46.2
Hypertension	29.5	29.8	29.8	30.0	30.5	30.5	30.1
Glomerulonephritis	10.6	10.4	10.0	9.8	9.9	9.8	9.8
Other/Unknown	14.1	13.8	14.0	14.3	13.4	13.3	13.1
Missing	0.5	0.6	0.6	0.9	0.8	0.8	0.8
1h Average duration of ESRD (years)	4.8	4.8	4.8	5.0	5.1	5.1	5.1
1i Years since start of ESRD (% of 1a; sums to 100%)							
< 1	17.4	17.0	17.3	15.0	14.3	14.2	14.1
1-2	17.8	17.7	17.4	18.0	17.4	17.4	17.3
2-3	14.1	14.0	13.8	14.0	13.9	13.9	13.9
3-6	25.3	25.7	25.8	26.4	26.7	26.7	26.8
6+	25.4	25.6	25.8	26.7	27.7	27.8	27.9
1j Nursing home patients (% of 1a) ^{*4}	15.6	15.8	15.5	12.7	12.4	12.3	12.0
1k Modality (% of 1a; sums to 100%) ^{*5}							
In-center hemodialysis	86.1	85.9	85.4	85.2	85.2	85.2	85.4
Home hemodialysis	2.2	2.2	2.3	2.6	2.7	2.8	2.6
Continuous ambulatory peritoneal dialysis	1.6	1.5	1.5	1.6	1.5	1.5	1.5
Continuous cycling peritoneal dialysis	9.8	10.1	10.4	10.5	10.5	10.5	10.4
Other modality	0.3	0.3	0.3	0.0	0.0	0.0	0.0

n/a = not applicable

[*1] See *Guide, Section IV*.

[*2] Values are shown for the average facility.

[*3] 'Asian' includes Indian sub-continent. 'Native American' includes Alaskan Native. 'White' includes Middle Eastern and Arab.

[*4] Includes patients who were also treated by a nursing facility at any time during the year. The source of nursing facility history of patients is the Nursing Home Minimum Dataset.

[*5] In 2020, modality is as of October 31, 2020. Other modality includes other dialysis, uncertain modality, and patients not on dialysis but still temporarily assigned to the facility (discontinued dialysis, recovered renal function, and lost to follow up).

TABLE 2: Characteristics of New Dialysis Patients ^{*1}, 2017-2020 (Form CMS-2728)

Measure Name	This Facility				Regional Averages ^{*2} , 2020 [^]			
	2017	2018	2019	2020 [^]	State	Network	U.S.	
Patient Characteristics								
2a	Total number of patients with forms (n)	15	15	15	10	10.6	10.6	10.6
2b	Average age (years [0-95]) ^{*3}	63.1	63.4	63.5	63.2	63.5	63.5	63.5
2c	Female (% of 2a)	42.0	41.8	41.6	41.5	41.7	41.7	41.6
2d	Race (% of 2a; sums to 100%) ^{*4}							
	African-American	26.7	26.5	27.4	29.4	29.7	29.5	28.6
	Asian/Pacific Islander	4.8	4.9	5.1	5.2	5.3	5.5	6.1
	Native American	1.2	1.3	1.3	1.3	1.1	1.1	1.1
	White	67.1	67.1	66.0	63.7	63.5	63.5	63.8
	Other/Unknown	0.3	0.3	0.2	0.4	0.3	0.3	0.4
2e	Hispanic (% of 2a)	13.6	13.8	14.3	15.0	15.1	15.3	16.4
2f	Primary cause of ESRD (% of 2a; sums to 100%)							
	Diabetes	48.1	47.8	47.3	46.4	47.7	47.8	48.1
	Hypertension	30.1	30.1	29.3	29.9	29.8	29.8	29.5
	Primary glomerulonephritis	7.1	6.9	6.7	6.6	6.5	6.5	6.5
	Other/Unknown	14.6	15.2	16.8	17.1	15.9	15.9	15.9
2g	Medical coverage (% of 2a; sums to 100%)							
	Employer group only	12.8	12.2	12.2	12.5	12.9	12.8	12.7
	Medicare only	34.0	35.4	35.3	35.3	35.2	35.3	35.0
	Medicaid only	12.5	12.5	13.2	13.6	13.3	13.3	13.7
	Medicare and Medicaid only	12.3	12.1	11.8	11.6	11.8	11.8	12.0
	Medicare and other	17.0	16.2	15.8	14.5	14.7	14.6	14.5
	Other/Unknown	7.2	7.3	7.3	7.9	7.7	7.7	7.9
	None	4.2	4.4	4.5	4.5	4.4	4.4	4.2
2h	Median body mass index ^{*5} (Median; Weight/Height ²)							
	Male	28.5	28.6	28.5	28.7	28.2	28.3	28.1
	Female	29.9	29.8	29.8	30.0	29.3	29.3	29.2
2i	Employment ^{*6}							
	Six months prior to ESRD treatment	34.5	34.9	36.0	36.2	36.9	36.7	36.8
	At first ESRD treatment	24.9	25.1	24.8	24.1	25.0	24.9	24.9
2j	Primary modality (% of 2a; sums to 100%)							
	Hemodialysis	88.7	88.3	88.0	87.5	86.3	86.4	86.4
	CAPD/CCPD	11.3	11.7	12.0	12.5	13.7	13.6	13.6
	Other/Unknown	0.0	0.0	0.0	0.0	0.0	0.0	0.0
2k	Number of incident hemodialysis patients (n)	13	13	13	8	9.1	9.1	9.1
2l	Access used at first outpatient dialysis (% of 2k; sums to 100%)							
	Arteriovenous fistula	17.4	16.7	15.4	14.6	14.0	14.0	14.1
	Arteriovenous graft	3.2	3.3	3.1	2.9	2.7	2.7	2.7
	Catheter	79.2	79.8	81.1	82.1	82.9	83.0	82.9
	Other/Unknown/Missing	0.2	0.2	0.4	0.4	0.3	0.3	0.3
2m	Arteriovenous fistula placed (% of 2k)	33.2	31.1	28.5	25.8	25.0	24.9	25.2

(continued)

TABLE 2 (cont.): Characteristics of New Dialysis Patients^{*1}, 2017-2020 (Form CMS-2728)

Measure Name	This Facility				Regional Averages ^{*2} , 2020 [^]		
	2017	2018	2019	2020 [^]	State	Network	U.S.
Average Lab Values Prior to Dialysis^{*3}							
2n Hemoglobin (g/dL [5-20])	9.4	9.4	9.3	9.3	9.3	9.3	9.3
2o Serum albumin (g/dL [0.8-6.0])	3.2	3.2	3.3	3.3	3.3	3.3	3.3
2p Serum creatinine (mg/dL [0-33])	6.4	6.4	6.4	6.5	6.5	6.5	6.5
2q GFR (mL/min [0-30])	10.8	10.8	10.8	10.6	10.7	10.7	10.6
Care Prior to ESRD Therapy							
2r Received ESA prior to ESRD (% of 2a)	13.6	15.0	16.1	16.1	16.2	16.2	16.3
2s Pre-ESRD nephrologist care (% of 2a; sums to 100%) ^{*7}							
No	19.5	17.8	16.4	16.1	15.7	15.7	15.9
Yes, < 6 months	14.7	15.6	17.1	17.9	17.4	17.4	17.4
Yes, 6-12 months	20.3	20.5	20.6	19.9	19.9	20.0	20.0
Yes, > 12 months	31.5	32.5	32.0	31.6	32.6	32.6	32.5
Unknown/Missing	13.9	13.6	13.9	14.5	14.3	14.3	14.3
2t Informed of transplant options (% of 2a)	88.7	88.3	84.5	83.8	83.5	83.5	83.5
2u Patients not informed of transplant options (n)	2	2	2	2	1.7	1.7	1.7
2v Reason not informed (% of 2u; may not sum to 100%) ^{*8}							
Medically unfit	37.9	28.2	18.4	18.0	15.4	15.3	16.2
Unsuitable due to age	29.0	22.3	15.4	14.1	11.9	11.6	11.9
Psychologically unfit	4.8	3.5	2.3	2.1	1.4	1.3	1.3
Patient declined information	2.7	1.9	1.6	1.1	0.9	0.9	0.9
Patient has not been assessed	30.1	48.5	64.7	68.1	73.2	73.5	72.4
Comorbid Conditions							
2w Pre-existing comorbidity (% yes of 2a) ^{*9}							
Congestive heart failure	28.3	28.6	29.0	27.7	28.2	28.2	28.1
Atherosclerotic heart disease ^{*9}	12.7	12.1	12.2	11.6	12.2	12.4	12.5
Other cardiac disorder ^{*9}	19.9	20.6	21.5	20.5	20.8	20.9	20.7
CVD, CVA, TIA	8.4	8.7	9.0	8.7	8.9	8.9	8.8
Peripheral vascular disease	9.1	8.9	9.2	8.6	8.7	8.9	8.9
History of hypertension	87.4	87.9	87.8	87.9	88.5	88.6	88.5
Diabetes ^{*9}	63.4	64.0	64.3	63.6	64.4	64.5	64.5
Diabetes on insulin	42.4	42.6	43.4	42.6	43.3	43.4	43.3
COPD	9.4	9.6	9.6	9.2	9.0	9.1	8.9
Current smoker	6.9	7.4	7.4	7.2	7.1	7.1	6.9
Cancer	6.8	7.2	7.4	7.3	7.2	7.2	7.2
Alcohol dependence	1.6	1.7	1.8	1.8	1.8	1.8	1.8
Drug dependence	1.3	1.4	1.7	1.6	1.6	1.6	1.6
Inability to ambulate	7.0	7.1	7.1	6.7	6.4	6.4	6.4
Inability to transfer	3.5	3.7	3.7	3.5	3.3	3.3	3.4
2x Average number of comorbid conditions	3.1	3.1	3.2	3.1	3.1	3.1	3.1

n/a= not applicable

[^] Includes medical evidence forms submitted between January and September 2020. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[*1] See *Guide, Section V*.

[*2] Values are shown for the average facility.

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

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

[*5] The median BMI is computed for adult patients at least 20 years old with height, weight, and BMI values in acceptable ranges. Acceptable range for height, weight, and BMI are 122-208 cm, 32-318 kg, and 10-55, respectively.

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

[*7] Values may not sum to exactly 100% because of patients that received nephrology care but duration unknown (0.011% in US in 2020).

[*8] Values may not sum to exactly 100% because of patients for which multiple reasons are selected, or when other or no reason is selected.

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

TABLE 3: Mortality Summary for All Dialysis Patients (2017-20)[^] & New Dialysis Patients (2017-19)^{*1 ^}

Measure Name	This Facility					Regional Averages ^{*2}		
	2017	2018	2019	2020 [^]	2017-2020 [^]	State	Network	U.S.
All Patients: Death Counts						2017-2020[^]		
3a Patients (n)	80	82	84	82	328 ^{*8}	82.7	82.7	91.3
3b Patient-years (PY) at risk (n)	57.8	58.9	60.0	40.0	216.7 ^{*8}	54.7	54.7	56.9
3c Deaths (n)	10	10	10	8	39 ^{*8}	9.8	9.8	10.3
3d Expected deaths (n)	11.4	11.1	10.9	8.4	39.4 ^{*8}	9.9	9.9	10.3
3e Withdrawal from dialysis prior to death (% of 3c)	27.1	27.3	27.9	17.1	24.6	25.3	25.2	24.4
3f Death due to Infections (% of 3c)	10.7	10.5	9.9	6.9	9.4	9.7	9.8	9.8
Death due to Cardiac causes (% of 3c)	45.4	45.8	47.0	30.7	41.9	43.5	43.6	43.1
Death due to Liver disease (% of 3c)	1.5	1.6	1.5	0.9	1.4	1.4	1.4	1.4
3g Dialysis unrelated deaths ^{*3} (n; excluded from SMR)	0	0	0	0	0 ^{*8}	0.1	0.1	0.1
All Patients: Standardized Mortality Ratio (SMR)								
3h SMR^{*4}	1.01	1.01	1.01	1.01	1.01	1.00	1.00	1.00
3i P-value ^{*5}	0.498	0.503	0.498	0.498	0.495	n/a	n/a	n/a
3j Confidence interval for SMR ^{*6}								
High (97.5% limit)	1.93	1.94	1.94	2.03	1.61	n/a	n/a	n/a
Low (2.5% limit)	0.49	0.48	0.48	0.45	0.61	n/a	n/a	n/a
3k SMR percentiles for this facility ^{*7}								
In this State	51	51	51	50	50	n/a	n/a	n/a
In this Network	51	51	51	50	50	n/a	n/a	n/a
In the U.S.	51	51	51	50	50	n/a	n/a	n/a
New Patients: First Year Death Counts						2017-2019[^]		
3l New patients (n=number)	15	15	15		45 ^{*8}	15.5	15.5	15.5
3m Patient-years (PY) at risk (n)	13.1	13.2	10.6		36.8 ^{*8}	12.8	12.8	12.8
3n Deaths (n)	3	3	2		7 ^{*8}	2.6	2.6	2.6
3o Expected deaths (n)	3.0	2.8	2.2		7.7 ^{*8}	2.5	2.5	2.5
3p Withdrawal from dialysis prior to death (% of 3n)	28.9	29.6	28.5		28.8	29.5	29.5	29.1
3q Death due to Infections (% of 3n)	10.0	9.4	9.0		9.4	9.5	9.6	9.7
Death due to Cardiac causes (% of 3n)	41.3	41.5	41.4		40.9	41.3	41.4	41.9
Death due to Liver disease (% of 3n)	2.6	2.5	2.8		2.6	2.7	2.7	2.7
New Patients: First Year Standardized Mortality Ratio (SMR)								
3r SMR ^{*4}	0.96	0.95	0.96		1.01	1.01	1.01	1.00
3s P-value ^{*5}	0.498	0.496	0.492		0.497	n/a	n/a	n/a
3t Confidence interval for SMR ^{*6}								
High (97.5% limit)	2.46	2.51	2.53		2.18	n/a	n/a	n/a
Low (2.5% limit)	0.36	0.35	0.34		0.43	n/a	n/a	n/a
3u First Year SMR percentiles for this facility ^{*7}								
In this State	50	50	52		51	n/a	n/a	n/a
In this Network	51	50	52		51	n/a	n/a	n/a
In the U.S.	50	50	52		51	n/a	n/a	n/a

n/a = not applicable

[^] Data from March through June 2020 are excluded from all calculations due to data exceptions. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[*1] See *Guide, Section VI*.

[*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 to expected deaths (3c to 3d for all patients, 3n to 3o for new patients); not shown if there are fewer than 3 expected deaths.

[*5] A p-value less than 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 or equal to 0.05 indicates that the difference could plausibly be due to random chance.

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

[*7] All facilities are included in ranking, regardless of the number of expected deaths.

[*8] Sum of 4 years (all patients) or 3 years (new patients) used for calculations; should not be compared to regional averages.

TABLE 4: Hospitalization Summary for Medicare Dialysis Patients^{*1}, 2017-2020[^]

Measure Name	This Facility					Regional Averages ^{*2} , per Year, 2017-2020 [^]			
	2017	2018	2019	2020 [^]	2017-2020 [^]	State	Network	U.S.	
Medicare Dialysis Patients									
4a	Medicare dialysis patients (n)	67	68	70	67	272 ^{*3}	68.6	68.6	74.5
4b	Patient-years (PY) at risk (n)	46.9	47.8	48.7	32.4	175.8 ^{*3}	44.4	44.4	45.0
Days Hospitalized Statistics									
4c	Total days hospitalized (n)	530	537	535	364	1,966 ^{*3}	496.4	496.2	521.4
4d	Expected total days hospitalized (n)	616.3	598.3	580.5	389.7	2,047.4 ^{*3}	512.1	512.0	521.6
4e	Standardized Hospitalization Ratio (Days) ^{*4}	0.96	0.97	0.97	0.97	0.97	0.97	0.97	1.00
4f	P-value ^{*5}	0.501	0.502	0.501	0.499	0.495	n/a	n/a	n/a
4g	Confidence interval for SHR (Days) ^{*6}								
	High (97.5% limit)	1.98	1.95	1.95	1.97	1.73	n/a	n/a	n/a
	Low (2.5% limit)	0.57	0.56	0.57	0.55	0.64	n/a	n/a	n/a
4h	Percentiles for this facility (Days) ^{*7}								
	In this State	50	50	50	50	50	n/a	n/a	n/a
	In this Network	50	50	50	50	50	n/a	n/a	n/a
	In the U.S.	50	50	50	50	50	n/a	n/a	n/a
Admission Statistics									
4i	Total admissions (n)	73	74	74	48	270 ^{*3}	68.1	68.1	69.8
4j	Expected total admissions (n)	83.0	80.7	78.6	50.4	274.3 ^{*3}	68.6	68.6	69.8
4k	Standardized Hospitalization Ratio (Admissions)^{*4}	0.99	0.99	0.99	0.99	0.99	0.99	0.99	1.00
4l	P-value ^{*5}	0.499	0.500	0.501	0.494	0.498	n/a	n/a	n/a
4m	Confidence interval for SHR (Admissions) ^{*6}								
	High (97.5% limit)	1.64	1.64	1.66	1.66	1.50	n/a	n/a	n/a
	Low (2.5% limit)	0.64	0.63	0.63	0.63	0.70	n/a	n/a	n/a
4n	Percentiles for this facility (admissions) ^{*7}								
	In this State	50	50	50	50	50	n/a	n/a	n/a
	In this Network	50	50	50	50	50	n/a	n/a	n/a
	In the U.S.	50	50	50	50	50	n/a	n/a	n/a
4o	Diagnoses associated with hospitalization (% of 4a)^{*8}								
	Septicemia	11.9	12.1	12.0	13.1	12.2	12.8	12.8	12.2
	Acute myocardial infarction	5.4	5.8	6.1	7.0	6.1	6.3	6.3	6.0
	Congestive heart failure	27.4	28.0	28.0	28.8	27.9	29.1	29.1	27.5
	Cardiac dysrhythmia	18.2	18.6	18.8	19.5	18.7	19.3	19.3	18.2
	Cardiac arrest	2.4	2.3	2.2	2.7	2.4	2.6	2.6	2.4
4p	One day admissions (% of 4i)	9.9	9.8	9.6	9.1	9.6	9.5	9.5	9.5
4q	Average length of stay (days per admission; 4c/4i)	7.2	7.2	7.2	7.6	7.3	7.3	7.3	7.5
4r	Admissions that originate in the ED (% of 4i)	79.2	79.9	80.4	82.0	80.6	82.9	83.1	83.4

(continued)

TABLE 4 (cont.): Hospitalization Summary for Medicare Dialysis Patients^{*1}, 2017-2020[^]

Measure Name	This Facility					Regional Averages ^{*2} , per Year, 2017-2020 [^]			
	2017	2018	2019	2020 [^]	2017-2020 [^]	State	Network	U.S.	
Emergency Department (ED) Statistics									
4s	Total ED visits (n)	117	117	116	70	420 ^{*3}	106.0	106.0	109.0
4t	Expected total ED visits (n)	134.2	128.0	123.8	73.7	430.3 ^{*3}	107.6	107.6	109.2
4u	Standardized Hospitalization Ratio (ED) ^{*4}	0.99	1.00	0.99	0.99	1.00	0.99	0.99	1.00
4v	P-value ^{*5}	0.496	0.498	0.497	0.501	0.497	n/a	n/a	n/a
4w	Confidence interval for SHR (ED) ^{*6}								
	High (97.5% limit)	1.71	1.68	1.71	1.77	1.61	n/a	n/a	n/a
	Low (2.5% limit)	0.62	0.63	0.62	0.60	0.66	n/a	n/a	n/a
4x	Percentiles for this facility (ED) ^{*7}								
	In this State	50	50	50	50	50	n/a	n/a	n/a
	In this Network	50	50	50	50	50	n/a	n/a	n/a
	In the U.S.	50	50	50	50	50	n/a	n/a	n/a
4y	Medicare ^{*9} dialysis patients with ED visit (%)	63.9	63.9	63.6	54.6	61.2	63.0	63.1	59.8
4z	ED visits that result in hospitalization (% of 4s)	42.4	42.9	42.9	45.4	43.3	43.2	43.2	43.3
Readmission Statistics									
4aa	Index discharges (n)	68	68	67	26		27.0	27.0	27.0
4ab	Total readmissions (n)	18	18	18	7		7.2	7.2	7.2
4ac	Expected total readmissions (n)	21	20	19	8		8.2	8.2	8.2
4ad	Standardized Readmission Ratio (SRR)^{*4}	1.00	1.00	1.00	1.00		1.07	1.07	1.07
4ae	P-value ^{*5}	0.501	0.498	0.500	0.496		n/a	n/a	n/a
4af	Confidence interval for SRR ^{*6}								
	High (97.5% limit)	1.57	1.58	1.59	1.77		n/a	n/a	n/a
	Low (2.5% limit)	0.57	0.57	0.56	0.47		n/a	n/a	n/a

n/a = not applicable.

[^] Data from March through June 2020 are excluded from all calculations due to data exceptions. Readmission Statistics are further limited to index discharges between January 1-30, 2020 and July-October 2020. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[*1] The ED statistics include only patients with Medicare as primary insurer and exclude patients with Medicare Advantage plans. All other summaries include patients with Medicare as primary insurer or with a Medicare Advantage plan; see *Guide, Section VII*.

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

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

[*4] Standardized Ratios are calculated as a ratio of actual to expected events (4c/4d for days, 4i/4j for admissions, 4r/4s for ED visits, and 4ab/4ac for readmissions). SHRs are not shown if there are less than 5 patient years at risk. SRR is not shown if fewer than 11 index discharges in the year.

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

[*6] The confidence interval range represents uncertainty in the value of the standardized hospitalization and readmission ratios (SHRs and SRR) due to random variation.

[*7] All facilities are included in ranking, regardless of the number of patient years at risk.

[*8] Includes diagnoses in any position on a hospital inpatient claim.

[*9] Medicare Advantage patients are excluded from this summary.

TABLE 5: Transplantation Summary for Dialysis Patients under Age 75^{*1}, 2017-2020[^]

Measure Name	This Facility					Regional Averages ^{*2} , per Year, 2017-2020 [^]		
	2017	2018	2019	2020 [^]	2017-2020 [^]	State	Network	U.S.
All Transplants								
5a Eligible patients (n)	64	65	66	64	259 ^{*10}	65.5	65.5	72.3
5b Transplants (n)	2	2	2	2	8 ^{*10}	2.0	2.0	2.0
5c Donor type (sums to 5b) ^{*3}								
Living donor (n)	0	0	0	0	2 ^{*10}	0.5	0.5	0.5
Deceased donor (n)	2	2	2	1	6 ^{*10}	1.6	1.6	1.6
First Transplants								
5d Eligible patients (n)	59	61	61	60	241 ^{*10}	60.9	60.9	67.0
5e Patient years (PY) at risk (n)	43.0	43.7	44.3	29.3	160.3 ^{*10}	40.5	40.5	42.0
5f First transplants ^{*4} (n)	2	2	2	1	7 ^{*10}	1.8	1.8	1.8
5g Expected first transplants (n)	1.8	1.9	2.0	1.4	6.8 ^{*10}	1.7	1.7	1.7
Standardized 1st Transplantation Ratio (STR)^{*5}								
5h STR ^{*6}					1.05	1.06	1.05	1.00
5i P-value ^{*7}					0.400	n/a	n/a	n/a
5j Confidence interval for STR ^{*8}								
High (97.5% limit)					2.11	n/a	n/a	n/a
Low (2.5% limit)					0.48	n/a	n/a	n/a
5k STR percentiles for this facility ^{*9}								
In this State					51	n/a	n/a	n/a
In this Network					51	n/a	n/a	n/a
In the U.S.					51	n/a	n/a	n/a

n/a = not applicable.

[^] Data from March through June 2020 are excluded from all calculations due to data exceptions. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[*1] See *Guide, Section VIII*.

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

[*3] Values may not sum to 5b due to unknown donor type.

[*4] Among first transplants that occurred after the start of dialysis from 2017-2020, 3.2% of transplants in the U.S. were not included because the transplant occurred fewer than 91 days after the start of ESRD and 0.9% were not included because the patient was not assigned to a facility at time of transplant.

[*5] This section is calculated for the 4-year period only and not reported if there are fewer than 3 expected transplants.

[*6] Standardized 1st Transplantation Ratio is calculated as a ratio of actual (5f) to expected (5g) transplants.

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

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

[*9] All facilities are included in ranking, regardless of the number of expected transplants.

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

TABLE 6: Waitlist Summary for All Dialysis Patients (2017-2020) ^ & New Dialysis Patients (2017-2019) ^ under Age 75 *1

Measure Name	This Facility				Regional Averages *2, 2020 ^		
	2017	2018	2019	2020 ^	State	Network	U.S.
All Dialysis Patients							
6a Eligible patients (n)	64	65	66	59	59.6	59.6	59.6
6b Patient-months at risk (n) *3	540	548	554	275	278.0	278.1	278.0
6c Patient-months on the waitlist (% of 6b) *3	19.6	18.7	18.1	17.4	17.7	17.4	18.0
6d Patient-months on the waitlist by subgroup (%) *3 *4							
Age < 40	29.1	27.9	27.2	26.4	27.8	27.6	28.2
Age 40-74	18.4	17.5	16.9	16.2	16.6	16.3	16.9
Male	20.7	19.9	19.3	18.5	18.8	18.6	19.2
Female	17.9	16.9	16.3	15.6	16.0	15.7	16.1
African American	19.9	18.7	18.3	17.6	17.1	17.1	16.9
Asian/Pacific Islander	28.1	27.2	26.1	25.6	26.5	25.8	26.6
Native American	16.8	16.2	14.9	14.1	16.1	15.2	11.1
White, Hispanic	21.2	20.5	20.4	19.9	19.2	18.9	19.6
White, non-Hispanic	18.4	17.7	17.3	16.7	17.0	16.9	16.8
Other/unknown race	23.4	22.4	22.7	20.5	21.4	20.8	21.4
Diabetes	15.9	15.1	14.7	14.4	14.4	14.1	14.7
Non-diabetes	22.7	21.6	20.8	19.7	20.4	20.3	20.8
Previous kidney transplant	33.1	31.6	30.2	29.1	30.3	30.2	30.7
No previous kidney transplant	18.4	17.6	17.1	16.5	16.6	16.4	17.0
< 2 years since start of ESRD	13.7	13.3	13.4	13.0	13.7	13.6	13.7
2-4 years since start of ESRD	24.4	23.3	22.6	21.8	22.0	21.8	22.4
5+ years since start of ESRD	21.8	20.5	19.1	18.1	17.5	17.3	18.2
6e Age-adjusted percentage of patient-months waitlisted *5	19.7	18.7	18.1	17.4	17.5	17.4	17.4
6f P-value *6	0.467	0.473	0.482	0.486	n/a	n/a	n/a
6g Confidence interval for percent waitlisted *7							
High (97.5% limit)	46.1	45.6	45.1	45.1	n/a	n/a	n/a
Low (2.5% limit)	7.64	7.07	6.70	6.23	n/a	n/a	n/a
New Dialysis Patients							
6h Eligible patients (n)	10	10	10	29	10.1	10.1	10.0
6i Patient-years (PY) at risk (n)	8	8	9	26	8.9	8.9	8.9
6j First waitlist events (n) *8	1	1	1	2	0.8	0.8	0.8
6k Expected 1st waitlist events (n) *8	0.9	1.0	0.6	2.5	0.8	0.8	0.8
6l Standardized Waitlist Ratio (SWR) *8 *9				0.99	1.03	1.01	1.00
6m P-value *6				0.485	n/a	n/a	n/a
6n Confidence interval for SWR *7							
High (97.5% limit)				2.68	n/a	n/a	n/a
Low (2.5% limit)				0.32	n/a	n/a	n/a

n/a = not applicable.

[^] Data from March through June 2020 are excluded from all calculations due to data exceptions. Summaries for All Dialysis Patients also exclude data between November and December 2020 due to data exceptions. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[*1] See *Guide, Section IX*.

[*2] For "All Dialysis Patients" section, values are shown for the average facility. For "New Dialysis Patients" section, values are shown for the average facility, annualized.

[*3] Eligible patient-months (6b) include patients assigned to the facility on the last day of each month. A patient may be counted up to 12 times per year.

[*4] The waitlist percentage for each subgroup is calculated as a rate of waitlisted patient-months to patient-months at risk in each subgroup. A missing value indicates that there were no eligible patients in the subgroup.

[*5] Age-adjusted percentage of prevalent patients waitlisted is not shown if there are fewer than 11 eligible patients in this facility.

[*6] A p-value less than 0.05 indicates that the difference between the observed and expected waitlist events (SWR), or the difference between the age-adjusted percent waitlisted for your facility and the overall national percentage is probably real and is not due to random chance alone. A p-value greater than or equal to 0.05 indicates that the difference could plausibly be due to random chance.

[*7] The confidence interval range represents uncertainty in the value of the SWR or age-adjusted percent waitlisted due to random variation.

[*8] An event is defined as a waitlisting or living-donor transplant.

[*9] SWR is calculated as a ratio of observed waitlisted events to expected waitlisted events (6j/6k); not shown if a facility has less than 2 expected waitlisted events or less than 11 eligible patients.

TABLE 7: Influenza Vaccination Summary for Medicare Dialysis Patients and All Dialysis Patients^{*1}, Flu Seasons August 2017-December 2020

Measure Name	This Facility				Regional Averages ^{*2}				
	2017	2018	2019 [^]	2020	State	Network	U.S.		
Medicare Dialysis Patients					2020				
7a Eligible patients on Dec. 31 (n)	38	38	38	34	34.6	34.6	34.6		
7b Patients vaccinated between Aug. 1 and Dec. 31 (% of 7a)	76.8	77.4	76.7	80.7	81.5	81.5	81.4		
7c P-value ^{*3} (for 7b compared to U.S. value ^{*4})	0.220	0.226	0.217	0.246	n/a	n/a	n/a		
7d Patients vaccinated between Aug. 1 and Mar. 31 of following year (% of 7a)					2019[^]	2019[^]	2019[^]		
7e P-value ^{*3} (for 7d compared to U.S. value ^{*5})	0.226	0.231	0.222		n/a	n/a	n/a		
7f Patients vaccinated between Aug 1 and Dec 31 by subgroup (%) ^{*6}					2020				
Age < 18	62.1	59.0	57.3	62.0	60.6	61.9	65.4		
Age 18-39	70.2	70.1	70.0	72.5	72.1	72.2	72.3		
Age 40-64	75.0	75.6	74.8	78.6	79.1	79.1	79.1		
Age 65-74	79.1	79.6	79.0	83.1	83.7	83.7	83.6		
Age 75+	81.7	82.2	80.7	85.4	86.3	86.3	86.2		
Male	76.7	77.0	76.4	80.4	81.2	81.2	81.1		
Female	77.6	78.2	77.3	81.3	81.9	81.9	81.8		
African American	74.1	74.8	73.8	77.2	76.7	76.4	77.5		
Asian/Pacific Islander	80.6	81.3	80.2	86.0	87.3	87.0	84.6		
Native American	79.9	78.8	76.8	80.5	77.3	80.4	82.2		
White	77.7	78.3	77.8	82.1	83.4	83.6	83.4		
Other/unknown race	72.7	75.9	73.7	79.0	79.0	78.5	78.6		
Hispanic	78.3	79.3	78.6	82.0	83.6	83.8	83.5		
< 1 year since start of ESRD	67.6	66.0	63.6	75.2	75.6	75.6	75.6		
1-2 years since start of ESRD	76.3	76.9	76.0	79.0	79.6	79.6	79.6		
3+ years since start of ESRD	80.1	80.6	80.4	82.5	83.1	83.1	83.0		
All Dialysis Patients: Half Flu Season (Aug. 1-Dec. 31)					2017	2018	2019	2020^{^^}	2020^{^^}
7g Eligible patients (n)	76	79	78						
7h Patients vaccinated (% of 7g)	52.3	76.0	74.6						
7i P-value ^{*3} (for 7h compared to U.S. value ^{*7})	0.038	0.146	0.154						
7j Patients that declined vaccination (% of 7g)	6.1	6.2	3.8						
7k Patients excluded due to medical contraindication (n)	1	1	0						
All Dialysis Patients: Full Flu Season (Aug. 1-Mar. 31 of the following year)					2017	2018	2019^{^*}	2019^{^*}	
7l Eligible patients (n)	82	83							
7m Patients vaccinated (% of 7l)	52.7	75.6							
7n P-value ^{*3} (for 7m compared to U.S. value ^{*8})	0.039	0.139							
7o Patients that declined vaccination (% of 7l)	5.7	5.9							
7p Patients excluded due to medical contraindication (n)	1	1							

n/a = not applicable

[^] Data from March 2020 are excluded from all calculations for Medicare patients (rows 7d-7e) due to data exceptions. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[^^] Measures in rows 7g-7k are not calculated since data from September through December 2020 are unavailable. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[^*] Measures in rows 7l-7p are not calculated since data from January 2020 through March 2020 are excluded from all calculations due to data exceptions. See *Data Limitations in FY 2022 DFRs* on pages 2-3 more information.

[*1] Medicare Dialysis Patients are those treated on December 31 with Medicare as primary insurer. All Dialysis Patients are those treated for at least one full reporting month during the flu season; see *Guide, Section VIII*.

[*2] Values are shown for the average facility.

[*3] A p-value greater than or equal to 0.05 indicates that the difference between percent of patients vaccinated at the facility and national percentage is plausibly due to random chance.

[*4] Compared to the U.S. value for that year and time period (8/1-12/31): 77.9% (2017), 78.3% (2018), 77.5% (2019), 81.4% (2020).

[*5] Compared to the U.S. value for that year and time period (8/1-3/31): 78.8% (2017), 79.0% (2018), 78.2% (2019).

[*6] A missing value indicates that there were no eligible patients in the subgroup.

[*7] Compared to the U.S. value for that year and time period (8/1-12/31): 52.6% (2017), 76.9% (2018), 75.4% (2019).

[*8] Compared to the U.S. value for that year and time period (8/1-3/31): 53.1% (2017), 76.5% (2018).

TABLE 8: Anemia Management Summaries for Adult Dialysis Patients ^{*1}, 2017-2020

Measure Name	This Facility				Regional Averages ^{*2}		
	2017	2018	2019	2020 ^{^^}	State	Network	U.S.
Hemoglobin and ESA for Adult Hemodialysis (HD) Patients							2020 ^{^^}
8a Eligible patients (n)	68	69	71	53	56.8	56.8	56.8
8b Eligible patient-months (n) ^{*3}	600	610	617	102	109.7	109.7	109.7
8c Average hemoglobin ^{*4} (g/dL) (average of 8b)	10.8	10.7	10.7	10.8	10.8	10.8	10.8
8d Hemoglobin categories (% of 8b; sums to 100%)							
<10 g/dL	20.6	21.8	22.6	20.7	20.4	20.4	20.2
10-<11 g/dL	33.0	33.8	34.2	33.4	33.9	34.0	34.0
11-12 g/dL	29.1	28.6	28.4	30.0	30.4	30.4	30.5
>12 g/dL	12.6	12.0	11.8	13.4	13.4	13.4	13.4
Missing/Out of range	4.6	3.7	2.9	2.6	1.8	1.9	1.9
8e ESA prescribed (% of 8b)	73.5	73.0	74.5	74.4	74.7	74.7	74.7
Hemoglobin and ESA for Adult Peritoneal Dialysis (PD) Patients							
8f Eligible patients (n)	8	9	9	7	17.0	16.8	16.6
8g Eligible patient-months (n) ^{*3}	66	69	74	13	32.3	32.0	31.7
8h Average hemoglobin ^{*4} (g/dL) (average of 8g)	10.9	10.9	10.9	10.9	10.9	10.9	10.9
8i Hemoglobin categories (% of 8g; sums to 100%)							
<10 g/dL	22.0	22.9	23.4	22.8	23.1	23.1	23.1
10-<11 g/dL	27.6	28.4	28.6	28.6	28.8	28.8	28.9
11-12 g/dL	25.6	25.2	25.6	26.0	26.2	26.2	26.2
>12 g/dL	19.0	18.3	18.3	19.1	18.9	19.0	18.8
Missing/Out of range	5.8	5.3	4.2	3.5	3.0	3.0	3.0
8j ESA prescribed (% of 8g)	55.3	55.3	55.5	56.7	56.6	56.6	56.9
Standardized Transfusion Ratio (STrR)							
	2017	2018	2019	2020 [^]			2020 [^]
8k Eligible adult Medicare patients (n)	45	45	45	42	43.4	43.4	43.4
8l Patient years (PY) at risk (n)	29	29	28	18	19.1	19.1	19.1
8m Total transfusions (n)	10	9	9	6	6.4	6.4	6.4
8n Expected total transfusions (n)	11.1	10.4	9.6	6.6	6.6	6.6	6.6
8o Standardized Transfusion Ratio ^{*5}	0.99	0.99	0.98	0.97	0.98	0.98	1.00
Upper Confidence Limit (97.5%)	3.16	3.12	3.27	3.18	n/a	n/a	n/a
Lower Confidence Limit (2.5%)	0.42	0.43	0.42	0.42	n/a	n/a	n/a
8p P-value ^{*6}	0.501	0.494	0.501	0.501	n/a	n/a	n/a

n/a = not applicable

[^] Data from March through June 2020 are excluded from all calculations due to data exceptions. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[^^] Includes data reported in July and August 2020 only due to data limitations. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[*1] See *Guide, Section XI*. Transfusion summaries include adult Medicare Dialysis Patients only.

[*2] Values are shown for the average facility.

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

[*4] Based on in-range values; see *Guide* for range values.

[*5] Calculated as a ratio of observed to expected transfusions (8m to 8n); not shown if there are fewer than 10 patient-years at risk (8l). The confidence interval range represents uncertainty in the value of the STrR due to random variation.

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

TABLE 9: Dialysis Adequacy Summaries for Adult Dialysis Patients^{*1}, 2017-2020^{^^}

Measure Name	This Facility				Regional Averages ^{*2} , 2020 ^{^^}		
	2017	2018	2019	2020 ^{^^}	State	Network	U.S.
Hemodialysis (HD) Adequacy							
9a Eligible adult HD patients (n)	68	69	71	53	56.8	56.8	56.8
9b Eligible adult HD patient-months (n) ^{*3}	600	610	617	102	109.7	109.7	109.7
9c Average serum albumin (g/dL) (average of 9b)	3.7	3.8	4.4	3.9	3.9	3.9	3.9
9d Serum albumin categories (% of 9b; sums to 100%)							
< 3.0 g/dL	3.7	3.3	2.6	2.5	2.5	2.5	2.5
3.0-<3.5 g/dL	14.3	12.7	10.2	10.0	10.2	10.2	10.0
3.5-<4.0 g/dL	46.6	45.1	42.0	41.7	42.4	42.4	42.2
>=4.0 g/dL	30.1	34.3	41.3	42.4	42.2	42.2	42.6
Missing	5.4	4.6	4.0	3.5	2.8	2.8	2.8
9e Serum albumin<4.0 g/dl(% of 9b)	64.5	61.1	54.8	54.2	55.1	55.0	54.7
9f Ultrafiltration rate average ^{*4} (ml/kg/hr) (average of 9b)	7.7	7.6	7.5	7.5	7.6	7.6	7.6
9g Ultrafiltration rate categories (% of 9b; sums to 100%)							
<=13 ml/kg/hr	80.7	82.7	83.9	84.8	85.3	85.4	85.3
>13 ml/kg/hr	8.8	8.0	7.4	7.2	7.4	7.4	7.5
Missing/Out of range	10.5	9.3	8.7	8.1	7.2	7.2	7.2
9h Eligible adult HD Kt/V patients (n) ^{*5}	65	66	68	50	54.9	54.8	54.8
9i Eligible adult HD Kt/V patient-months (n) ^{*3*5}	568	582	589	95	105.7	105.7	105.6
9j Average Kt/V ^{*4} (average of 9i)	1.6	1.6	1.6	1.6	1.6	1.6	1.6
9k Kt/V categories (% of 9i; sums to 100%)							
<1.2	3.5	2.9	2.2	1.8	1.5	1.5	1.5
1.2-<1.8	69.8	70.8	69.6	71.3	71.3	71.3	71.3
>=1.8	22.9	23.6	26.0	25.5	26.1	26.2	26.2
Missing/Out of range	3.8	2.7	2.2	1.4	1.0	1.1	1.1
Peritoneal Dialysis (PD) Adequacy							
9l Eligible adult PD patients (n)	8	9	9	7	17.0	16.8	16.6
9m Eligible adult PD patient-months (n) ^{*3}	66	69	74	13	32.3	32.0	31.7
9n Average weekly Kt/V ^{*4*5} (average of 9m)	2.3	2.3	2.2				
9o Weekly Kt/V categories (% of 9m; sums to 100%) ^{*5}							
<1.7	6.1	5.5	5.9				
1.7-<2.5	62.3	63.3	65.0				
>=2.5	24.9	25.2	23.9				
Missing/Out of range	6.7	6.0	5.3				
9p Average serum albumin (g/dL) (average of 9m)	3.5	3.5	3.6	3.6	3.6	3.6	3.6
9q Serum albumin categories (% of 9m; sums to 100%)							
< 3.0 g/dL	11.5	10.1	7.7	7.7	7.8	7.8	7.7
3.0-<3.5 g/dL	30.5	28.9	24.6	24.9	25.1	25.1	24.9
3.5-<4.0 g/dL	39.4	40.4	42.1	42.5	42.8	42.8	42.9
>=4.0 g/dL	12.8	15.2	21.5	21.3	21.1	21.1	21.3
Missing	5.8	5.3	4.2	3.7	3.2	3.1	3.2
9r Serum albumin <4.0 g/dL(% of 9m)	81.4	79.5	74.3	75.1	75.7	75.8	75.5

n/a = not applicable.

[^^] Includes data reported in July and August 2020 only due to data limitations. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[*1] See *Guide, Section XII*. Unless otherwise noted, all summaries are based on data reported in CROWNWeb and the patient must be on HD (or PD) for the entire reporting month to be included in patient counts and summaries.

[*2] Values are shown for the average facility.

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

[*4] Based on in-range values; see *Guide* for range values.

[*5] Kt/V summaries are supplemented with Medicare claims if missing in CROWNWeb. HD Kt/V summaries are restricted to patients who dialyze thrice weekly. See section of *Guide* titled "Determination of Thrice Weekly Dialysis" for more information. The most recent value over a 4-month period is selected for PD Kt/V. PD Kt/V values for 2020 are not calculated due to data exceptions; see *Data Limitations in FY 2022 DFRs* section on pages 2-3 more information.

TABLE 10: Mineral Metabolism Summaries for All Adult Dialysis Patients ^{*1}, 2017-2020 ^{^^}

Measure Name	This Facility				Regional Averages ^{*2} , 2020 ^{^^}		
	2017	2018	2019	2020 ^{^^}	State	Network	U.S.
10a Eligible adult patients (n) ^{*3}	76	77	79	60	62.7	62.7	62.8
10b Eligible adult patient-months (n) ^{*3 *4}	668	681	693	115	121.2	121.2	121.3
10c Average phosphorus ^{*5} (mg/dL) (average ^{*6})	5.3	5.3	5.4	5.5	5.5	5.5	5.5
10d Phosphorus categories (% of 10b; sums to 100%) ^{*6}							
<3.5 mg/dL	8.3	8.0	7.5	7.1	7.3	7.2	7.3
3.5-4.5 mg/dL	24.3	23.8	23.2	22.4	22.6	22.6	22.6
4.6-5.5 mg/dL	29.3	29.6	29.7	29.7	29.8	29.8	29.9
5.6-7.0 mg/dL	20.3	20.9	21.5	22.0	22.2	22.2	22.2
>7.0 mg/dL	12.4	13.1	14.3	15.5	15.6	15.6	15.5
Missing/Out of range	5.4	4.6	3.8	3.2	2.5	2.5	2.5
10e Average calcium uncorrected ^{*5} (mg/dL) (average of 10b)	8.9	8.9	8.9	8.9	8.9	8.9	8.9
10f Calcium uncorrected categories (% of 10b; sums to 100%)							
<8.4 mg/dL	16.3	16.9	19.0	19.8	20.2	20.2	20.1
8.4-10.2 mg/dL	77.0	77.4	76.2	76.1	76.5	76.6	76.6
>10.2 mg/dL	1.4	1.4	1.3	1.1	1.0	1.0	1.0
Missing/Out of range	5.3	4.4	3.5	3.0	2.3	2.3	2.3
10g Average uncorrected serum or plasma calcium > 10.2 mg/dL ^{*5 *7}	3.5	3.1	2.3	3.4	2.7	2.6	2.7

[^^] Includes data reported in July and August 2020 only due to data limitations. See Data Limitations in FY 2022 DFRs on pages 2-3 for more information.
 [*1] See *Guide, Section XIII*. Summaries are based on data reported in CROWNWeb and the patient must be assigned to the facility the entire month to be included.
 [*2] Values are shown for the average facility.
 [*3] Includes patients on ESRD more than 90 days who switch between HD and PD during the month and patients for whom modality is unknown.
 [*4] Patients may be counted up to 12 times per year.
 [*5] The acceptable range for phosphorus and calcium is 0.1 – 20 mg/dL. Values outside of this range are considered missing, which are counted towards the numerator.
 [*6] Eligible patients included in the phosphorus summaries differ slightly from what is reported in 10b since it includes patient-months within the first 90 days of ESRD.
 [*7] Hypercalcemia is averaged from uncorrected serum or plasma calcium values over a rolling 3-month period. Eligible patients included in the hypercalcemia summary differs slightly from what is reported in 10b since patients must be 18 as of the first day of the 3-month period.

TABLE 11: Vascular Access Information for All Dialysis Patients and Access-Related Infection Summaries for All Medicare Patients^{*1}, 2017-2020

Measure Name	This Facility				Regional Averages ^{*2}		
	2017	2018	2019	2020 ^{^^}	State	Network	U.S.
Vascular Access							2020^{^^}
11a	Prevalent adult hemodialysis patients (n)	72	73	75	55	59.0	59.0
11b	Prevalent adult hemodialysis patient-months(n) ^{*3*4}	637	648	656	106	113.5	113.6
11c	Vascular access type in use (% of 11b; sums to 100%)						
	Arteriovenous fistula	61.7	62.2	61.9	61.2	61.6	61.4
	Arteriovenous graft	17.0	17.0	17.1	16.9	17.6	17.7
	Catheter	16.9	17.1	18.1	19.6	19.2	19.1
	Other/Missing	4.4	3.7	2.9	2.4	1.6	1.7
11d	Standardized Fistula Rate (SFR) ^{*5}	63.5	63.5	63.1	61.9	61.9	61.8
11e	P-value ^{*6}	0.512	0.514	0.510	0.508	n/a	n/a
11f	Confidence interval for SFR ^{*7}						
	High (97.5% limit)	40.4	40.5	40.1	37.9	n/a	n/a
	Low (2.5% limit)	84.4	84.3	84.1	83.7	n/a	n/a
11g	Long-Term Catheter Rate^{*8}	12.7	12.9	13.4			
Vascular Access at First Treatment							
11h	Incident hemodialysis patients (n)	13	13	13	3	3.7	3.7
11i	Vascular access type in use (% of 11h; sums to 100%)						
	Arteriovenous fistula	17.3	16.4	15.4	9.1	9.2	9.2
	Arteriovenous graft	3.8	3.9	3.5	2.1	2.1	2.1
	Catheter	77.0	76.7	78.5	55.4	55.4	55.5
	Other/Missing	2.0	3.0	2.6	33.4	33.4	33.3
11j	Arteriovenous fistulae in place (% of 11h) ^{*9}	19.1	18.0	16.5	9.6	9.6	9.6
Infection: Peritoneal dialysis (PD)							
		2017	2018	2019	2020[^]		2020[^]
11k	Eligible PD patients (n)	6	6	6	6	12.4	12.3
11l	Eligible PD patient-months ^{*4}	44	45	47	24	51.9	51.5
11m	PD catheter infection rate per 100 PD patient-months ^{*10}	2.63	2.70	2.57	2.71	2.62	2.60
11n	P-value ^{*11} of 11m (compared to U.S. value) ^{*12}	0.365	0.367	0.361	0.435	n/a	n/a

n/a = not applicable

[^] Infection summaries include data between January-February and July-October due to data exceptions. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[^^] Vascular access summaries include data reported in July and August 2020 only due to data limitations. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[*1] See *Guide, Section XIV*. Vascular Access type is based on data reported in CROWNWeb. For the prevalent summaries (rows 11a-11g), the patient must be assigned to the facility for the entire calendar month to be included. The PD infection summaries are based on Medicare Dialysis claims.

[*2] Values are shown for the average facility.

[*3] Patient months with a catheter that have limited life expectancy, including under hospice care in the current reporting month, or with metastatic cancer, end stage liver disease, coma or anoxic brain injury in the past 12 months, were excluded.

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

[*5] Includes patients with an autogenous arteriovenous (AV) fistula as the sole means of vascular access. SFR is calculated as an adjusted rate of AV fistula in use reported in 11c; not shown if fewer than 11 eligible adult HD patients.

[*6] A p-value less than 0.05 indicates that the difference between the fistula rate for your facility and the overall national fistula rate is probably real and is not due to random chance alone.

[*7] The confidence interval range represents uncertainty in the value of the SFR due to random variation.

[*8] Includes patients using a catheter continuously for three months or longer. Patients with other or missing access types (11c) are also counted as catheter in use in the numerator. Long-term catheter rate (11g) values in 2020 were not calculated due to data limitations. See *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

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

[*10] The ICD-9 PD catheter infection code for PD patients is 996.68 which is effective thru 9/30/2015 and the ICD-10 PD catheter infection code for PD patients is T8571XA which is effective beginning 10/1/2015.

[*11] A p-value greater than or equal to 0.05 indicates the differences between the percent of patients with infection at the facility and national percentage is plausibly due to random change.

[*12] Compared to U.S. value for that year: 2.56 (2017), 2.48 (2018), 2.47 (2019), and 2.60 (2020).

TABLE 12: Comorbidities Reported on Inpatient Medicare Claims for Medicare Dialysis Patients Treated as of December 31st of Each Year^{*1}, 2017-2020

	Measure Name	This Facility				Regional Averages ^{*2} , 2020		
		2017	2018	2019	2020	State	Network	U.S.
12a	Medicare dialysis patients on 12/31 (n)	48	49	50	48	49.2	49.2	49.3
12b	Comorbidity (% yes of 12a)							
	Infections							
	AIDS/HIV positive	0.8	0.8	0.7	0.7	0.8	0.8	0.8
	Intravascular/implanted device-related ^{*3}	5.5	5.4	4.9	4.8	4.7	4.7	4.7
	Hepatitis B	0.5	0.5	0.4	0.4	0.5	0.5	0.5
	Hepatitis other	2.4	2.3	2.0	1.9	2.0	2.0	2.0
	Metastatic	1.4	1.4	1.4	1.4	1.4	1.4	1.4
	Pneumonia	3.8	4.2	5.0	3.5	3.4	3.4	3.5
	Tuberculosis	0.0	0.0	0.1	0.2	0.2	0.2	0.2
	Other	20.2	20.2	19.4	19.1	18.8	18.7	18.8
	Cardiovascular							
	Cardiac arrest	0.9	0.9	0.8	0.9	1.0	1.0	1.0
	Cardiac dysrhythmia	19.1	19.4	19.0	19.1	18.9	18.8	18.7
	Cerebrovascular disease	7.5	7.5	7.3	7.3	7.3	7.3	7.3
	Congestive heart failure	30.8	31.3	30.4	30.4	30.4	30.4	30.1
	Ischemic heart disease	28.1	28.1	26.8	26.6	26.5	26.5	26.3
	Myocardial infarction	5.8	6.2	6.3	7.0	6.9	6.9	6.9
	Peripheral vascular disease ^{*4}	17.1	17.3	16.9	17.0	17.0	17.0	17.0
	Other							
	Alcohol dependence	1.4	1.5	1.4	1.3	1.4	1.4	1.4
	Anemia	2.2	2.2	2.5	2.7	2.7	2.7	2.7
	Cancer	3.4	3.4	3.4	3.3	3.2	3.2	3.2
	Chronic obstructive pulmonary disease	16.9	16.7	15.9	15.0	14.9	14.9	14.6
	Diabetes	38.0	38.0	36.5	36.5	36.6	36.6	36.6
	Drug dependence	1.3	1.3	1.2	1.2	1.2	1.2	1.2
	Gastrointestinal tract bleeding	2.6	2.6	2.7	2.9	2.9	2.9	2.9
	Hyperparathyroidism	20.2	21.1	20.1	20.1	20.1	19.9	19.7
12c	Average number of comorbid conditions	2.3	2.3	2.3	2.2	2.2	2.2	2.2

n/a = not applicable

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

[*2] Values are shown for the average facility.

[*3] This category includes bloodstream and other infections related to intravascular access and other implanted devices, not limited to dialysis access.

[*4] Peripheral vascular disease includes venous, arterial and nonspecific peripheral vascular diseases.

TABLE 13: Facility Information ^{*1} , 2020

Measure Name	This Facility 2020	Regional Averages ^{*2} , 2020		
		State	Network	U.S.
13a Organization	SAMPLE MEDICAL CARE(SMC)			
13b Ownership	Profit			
13c Initial Medicare certification date	01/01/2016			
13d Number of stations	17			
13e Services provided	Unavailable			
13f Shifts after 5:00 pm	Yes			
13g Dialyzer Reuse	Yes			
13h CMS Certification Numbers (CCN) included in this report	999999			
13i National Provider Identifier (NPI) ^{*3}	1234569874			
Long Term Care (LTC) ^{*4}				
13j Dialysis facility located in a Skilled Nursing Facility (SNF)	Yes			
13k Services provided in LTC facility by non-SNF based facility	None			
Patient Placement				
13l Patients treated during year from AFS Form-2744 (n)	101	100.4	100.4	100.6
13m Transferred into facility (% of 13l)	17.0	15.0	15.0	14.9
13n Transferred out of facility (% of 13l)	15.8	14.9	14.9	14.9
13o Patients treated on 12/31 (n)	68	n/a	n/a	n/a
13p Medicare eligibility status (% of 13o; sums to 100% ^{*5})		n/a	n/a	n/a
Medicare	75.4	75.6	75.6	74.8
Medicare application pending	0.9	0.6	0.6	0.7
Non-Medicare	23.6	23.7	23.7	24.4
Survey and Certification ^{*6}				
13q Date of last survey	01/03/2018			
13r Type of survey	Unknown			
13s Compliance condition after survey	Meets Requirements			
13t Number of CFC deficiencies cited	0	0.2	0.2	0.2
13u Number of Standard deficiencies cited	5	4.6	4.6	4.6

n/a = not applicable

[*1] See *Guide, Section XVI*. Information based on data reported in CROWNWeb as of May 2021. If missing, data were not available.

[*2] Values are shown for the average facility.

[*3] 'NPI' obtained from CROWNWeb as of March 2021. If missing, data were not available.

[*4] LTC information obtained from CMS Form-3427 submitted during most recent survey.

[*5] Values may not sum to exactly 100% because of unknown Medicare status.

[*6] Data on this section are from the facility's latest survey since January 2009 according to information reported in QIES as of early June 2020. If your facility has not been surveyed since January 2009, facility-level data on this table will be missing.

TABLE 14: Selected Measures for Dialysis Patients under Age 18^{*1}, 2017-2020[^]

Measure Name	This Facility				Regional Averages ^{*2} , 2020		
	2017	2018	2019	2020	State	Network	U.S.
Patient Characteristics							
14.1a	Patients treated on 12/31 (n)	7	6	6	6	n/a	n/a
14.1c	Age (% of 14.1a; sums to 100%)						
	< 5	24.8	23.3	21.6	23.3	25.4	25.8
	5-9	16.2	14.6	15.5	14.1	14.2	15.0
	10-14	26.8	31.7	27.2	28.9	30.1	28.6
	15-17	32.2	30.4	35.6	33.8	30.3	30.6
14.1d	Female (% of 14.1a)	39.0	42.0	41.6	41.8	42.1	42.3
14.1e	Race (% of 14.1a; sums to 100%) ^{*3}						
	African American	32.2	27.9	29.3	29.4	31.6	30.8
	Asian/Pacific Islander	4.2	5.3	5.6	5.1	3.6	3.9
	Native American	1.0	1.4	1.6	1.3	1.0	1.0
	White	61.4	63.6	60.3	60.7	61.4	61.9
	Other/Unknown/Missing	1.2	1.9	3.2	3.5	2.5	2.5
14.1f	Ethnicity (% of 14.1a; sums to 100%)						
	Hispanic	28.3	28.0	26.4	26.9	24.1	24.8
	Non-Hispanic	71.5	71.9	72.5	71.2	74.3	73.7
	Unknown	0.3	0.2	1.0	1.9	1.6	1.5
14.1g	Cause of ESRD (% of 14.1a; sums to 100%)						
	Diabetes	1.4	1.3	0.8	1.0	2.6	2.5
	Hypertension	2.5	2.4	2.6	2.1	2.5	2.7
	Glomerulonephritis	29.8	36.5	28.8	28.3	27.7	27.0
	Cystic Kidney	24.5	23.5	29.6	30.5	29.5	29.7
	Congenital/Hereditary	16.8	13.2	13.3	12.8	10.7	11.0
	Hemolytic Uremic Syndrome	0.0	0.0	0.0	0.0	0.0	0.0
	Other	21.3	21.1	18.3	18.2	20.2	20.3
	Unknown/Missing	3.6	2.0	6.6	7.1	6.9	6.9
14.1i	Years since start of ESRD (% of 14.1a; sums to 100%)						
	< 1	35.4	31.8	33.0	28.7	30.8	28.5
	1-2	22.2	24.2	21.0	24.2	23.7	23.8
	2-3	14.9	13.9	13.4	12.1	11.8	12.4
	3-6	14.2	14.0	14.4	14.4	15.9	16.4
	6+	13.3	16.1	18.3	20.5	17.8	18.9
14.1k	Modality (% of 14.1a; sums to 100%)						
	In-center hemodialysis	42.1	44.4	47.8	45.7	47.4	46.4
	Home hemodialysis	1.1	1.7	0.3	0.4	1.3	1.1
	Continuous ambulatory peritoneal dialysis	2.1	0.1	1.1	2.0	1.1	1.0
	Continuous cycling peritoneal dialysis	54.5	52.9	50.5	51.4	49.8	51.2
	Other modality ^{*4}	0.2	0.9	0.3	0.5	0.3	0.3

(continued)

TABLE 14 (cont.): Selected Measures for Dialysis Patients under Age 18^{*1}, 2017-2020[^]

Measure Name	This Facility				Regional Averages ^{*2} , 2020			
	2017	2018	2019	2020	State	Network	U.S.	
Characteristics of New Dialysis Patients								
14.2a	Total number of patients with forms (n)	4	3	3	2	n/a	n/a	n/a
14.2g	Medical coverage (% of 14.2a; sums to 100%)							
	Employer group only	22.0	19.3	23.6	19.3	18.3	19.0	18.9
	Medicare (alone or combined w/ other insurance)	4.4	3.6	1.4	3.3	18.0	17.1	17.2
	Medicaid only	54.2	57.9	58.9	58.7	48.6	48.9	49.4
	Other/Unknown/None	19.4	19.2	16.1	18.7	15.1	15.0	14.5
14.2k	Number of incident hemodialysis patients (n)	2	2	2	1	n/a	n/a	n/a
14.2l	Access used at first outpatient dialysis (% of 14.2k; sums to 100%)							
	Arteriovenous fistula	3.1	2.1	4.2	2.0	4.5	4.2	4.0
	Arteriovenous graft	0.9	0.0	0.4	0.7	0.9	0.8	1.1
	Catheter	96.0	97.9	95.2	96.8	94.3	94.3	94.5
	Other/Unknown/Missing	0.0	0.0	0.3	0.5	0.4	0.6	0.4
14.2m	Arteriovenous fistulae placed (% of 14.2k)	4.5	7.2	6.8	3.3	7.4	6.9	6.9
14.2s	Pre-ESRD nephrologist care (% of 14.2a; sums to 100%)							
	No	22.5	18.3	20.3	15.1	16.5	16.0	16.3
	Yes, < 6 months	22.3	21.4	24.6	21.0	22.7	23.0	24.6
	Yes, 6-12 months	15.6	16.6	12.2	20.4	16.6	17.0	15.9
	Yes, > 12 months	35.9	38.1	39.7	39.0	34.6	35.3	34.9
	Unknown	3.8	5.6	3.2	4.4	9.5	8.7	8.3
14.2t	Informed of transplant options (% of 14.2a)	89.9	92.8	87.9	89.0	87.3	87.2	87.6
Death Rates								
14.3a	Patients (n=number)	11	11	10	9	41	n/a	n/a
14.3b	Patient years (PY) at risk (n)						n/a	n/a
14.3c	Deaths (n)	0	0	0	0	1	n/a	n/a
Days Hospitalized Statistics								
14.4a	Medicare dialysis patients (n)	4	4	4	4	16	n/a	n/a
14.4b	Patient years (PY) at risk (n)	2.4	2.2	2.5	1.5	8.5	n/a	n/a
14.4c	Total days hospitalized (n)	36	36	38	20	130	n/a	n/a
Admission Statistics								
14.4i	Total admissions (n)	5	5	5	3	18	n/a	n/a
Transplantation								
14.5d	Eligible patients (n)	9	9	9	8	35	n/a	n/a
14.5e	Patient years (PY) at risk (n)	5.7	5.5	5.3	3.3	19.9	n/a	n/a
14.5f	First transplants (n) ^{*5}	3	3	3	2	9	n/a	n/a
Waitlist								
14.6a	Eligible patients (n)	12	11	11	9	n/a	n/a	n/a
14.6b	Eligible patients-months (n) ^{*6}	89	85	84	39	n/a	n/a	n/a
14.6c	Patients-months on the waitlist (% of 14.6b)	37.1	37.2	39.6	38.5	36.9	36.8	35.7
14.6d	Patient-months on the waitlist by age (%)							
	Age < 10	38.1	39.3	39.3	39.7	39.4	36.0	35.1
	Age 10-17	43.3	43.2	44.7	44.1	43.3	43.2	41.3

(continued)

TABLE 14 (cont.): Selected Measures for Dialysis Patients under Age 18^{*1}, 2017-2020[^]

Measure Name	This Facility				Regional Averages ^{*2} , 2020			
	2017	2018	2019	2020	State	Network	U.S.	
Hemoglobin								
14.8a	Eligible hemodialysis (HD) patients (n)	5	5	5	3	n/a	n/a	n/a
14.8b	Eligible HD patient-months (n) ^{*6}	35	34	33	5	n/a	n/a	n/a
14.8c	Average hemoglobin ^{*6} (g/dL) (average of 14.8b)	10.7	10.7	10.7	10.8	10.8	10.8	10.9
14.8d	Hemoglobin categories (% of 14.8b; sums to 100%)							
	< 10 g/dL	24.1	26.5	25.9	22.4	19.6	19.9	19.8
	10-<11 g/dL	24.8	23.3	26.5	27.7	26.8	27.1	26.9
	11-12 g/dL	29.0	28.6	27.7	32.0	34.4	33.4	32.8
	> 12 g/dL	15.5	15.8	15.0	10.9	11.4	12.3	13.1
	Missing/Out of Range	6.6	5.8	4.9	7.1	7.8	7.3	7.5
14.8f	Eligible peritoneal dialysis (PD) patients (n)	6	5	5	3	n/a	n/a	n/a
14.8g	Eligible PD patient-months (n) ^{*6}	41	39	39	6	n/a	n/a	n/a
14.8h	Average hemoglobin ^{*6} (g/dL) (average of 14.8g)	10.8	10.7	10.8	10.8	10.9	10.9	10.9
14.8i	Hemoglobin categories (% of 14.8g; sums to 100%)							
	< 10 g/dL	25.9	27.8	27.0	26.4	23.0	23.8	24.5
	10-<11 g/dL	24.4	24.5	22.5	24.5	27.9	26.1	24.7
	11-12 g/dL	23.9	22.1	22.5	20.6	22.2	22.4	22.6
	> 12 g/dL	17.7	17.7	17.9	19.1	18.9	19.6	20.3
	Missing/Out of Range	8.0	7.8	10.0	9.3	8.0	8.0	7.9
Albumin								
14.9a	Eligible HD patients (n)	5	5	5	3	n/a	n/a	n/a
14.9b	Eligible HD patient-months (n) ^{*6}	35	34	33	5	n/a	n/a	n/a
14.9c	Average serum albumin (g/dL) (average of 14.9b)	3.9	4.0	4.0	4.0	4.0	4.0	4.0
14.9d	Serum albumin categories (% of 14.9b; sums to 100%)							
	< 3.0 g/dL	2.4	2.9	2.8	2.3	2.3	2.4	2.8
	3.0-<3.5 g/dL	11.8	9.9	7.2	8.8	7.6	7.2	8.1
	3.5-<4.0 g/dL	33.7	29.4	27.0	25.5	24.0	24.3	26.0
	>=4.0 g/dL	45.9	51.1	57.7	56.2	57.7	58.3	55.1
	Missing	6.2	6.7	5.2	7.2	8.3	7.9	8.0
14.9k	Eligible PD patients (n)	6	5	5	3	n/a	n/a	n/a
14.9l	Eligible PD patient-months (n) ^{*6}	41	39	39	6	n/a	n/a	n/a
14.9o	Average serum albumin (g/dL) (average of 14.9l)	3.6	3.6	3.7	3.8	3.8	3.7	3.7
14.9p	Serum albumin categories (% of 14.9l; sums to 100%)							
	< 3.0 g/dL	14.3	10.8	8.5	9.2	8.9	9.2	9.8
	3.0-<3.5 g/dL	17.0	19.8	16.2	14.5	14.5	15.1	15.1
	3.5-<4.0 g/dL	32.8	30.4	29.1	29.6	33.0	31.1	31.5
	>=4.0 g/dL	27.4	30.0	34.5	35.8	34.3	35.6	34.7
	Missing	8.6	9.0	11.7	10.9	9.2	9.1	8.9
Kt/V^{*7}								
14.9g	Eligible hemodialysis (HD) patients (n) ^{*8}	4	4	4	2	n/a	n/a	n/a
14.9h	Eligible HD patient-months (n) ^{*6 *8}	28	27	27	4	n/a	n/a	n/a
14.9j	HD: Kt/V >= 1.2 (% of 14.9h) ^{*9}	90.2	91.2	91.8	90.4	90.8	90.7	90.3
14.9n	PD: Kt/V >= 1.8 (% of 14.9l) ^{*9 *10}	67.7	65.9	65.9				

(continued)

TABLE 14 (cont.): Selected Measures for Dialysis Patients under Age 18^{*1}, 2017-2020[^]

Measure Name	This Facility				Regional Averages ^{*2} , 2020			
	2017	2018	2019	2020	State	Network	U.S.	
Vascular Access^{*11}								
14.11a	Eligible hemodialysis (HD) patients (n)	6	5	5	3	n/a	n/a	n/a
14.11b	Eligible patient-months (n) ^{*6}	38	37	36	6	n/a	n/a	n/a
14.11c	Arteriovenous Fistula in use (%)	22.4	21.0	23.5	23.4	20.6	20.5	19.1
14.11g	Long-Term Catheter Rate	52.9	52.3	57.0				

n/a = not applicable

[^] For exclusions due to data exceptions, please refer to corresponding parent table and *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[*1] See *Guide, Section XVII* corresponding to the parent table in the DFR.

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

[*3] 'Asian' includes Indian sub-continent. 'Native American' includes Alaskan Native. 'White' includes Middle Eastern and Arab.

[*4] Other modality includes other dialysis, uncertain modality, and patients not on dialysis but still temporarily assigned to the facility (discontinued dialysis, recovered renal function, and lost to follow-up).

[*5] Among first transplants that occurred after the start of dialysis from 2017-2020, 3.2% of transplants in the U.S. were not included because the transplant occurred fewer than 90 days after the start of ESRD and 0.9% were not included because the patient was not assigned to a facility at time of transplant.

[*6] A patient may be counted up to 12 times per year. Eligible patient-months for the waitlist summary include patients assigned to the facility on the last day of each month.

[*7] Kt/V summaries are based on data reported in CROWNWeb and include patients on HD (or PD) the entire month at the facility. Medicare claims are used if missing in CROWNWeb.

[*8] HD Kt/v summaries restricted to patients on thrice weekly in-center hemodialysis.

[*9] Based on in-range values; see *Guide* for range values.

[*10] PD Kt/V summaries select the most recent value collected within 6 months of the reporting month.

[*11] Vascular Access type is based on data reported in CROWNWeb. Patient months with a catheter that have limited life expectancy, including under hospice care in the current reporting month, or with metastatic cancer, end stage liver disease, coma or anoxic brain injury in the past 12 months, were excluded. 'Arteriovenous Fistula in use' includes patients with an autogenous arteriovenous (AV) fistula as the sole means of vascular access. 'Long-Term Catheter Rate' includes patients using a catheter continuously for three months or longer. Patients with other or missing access types (11c) are also counted as catheter in use in the numerator.

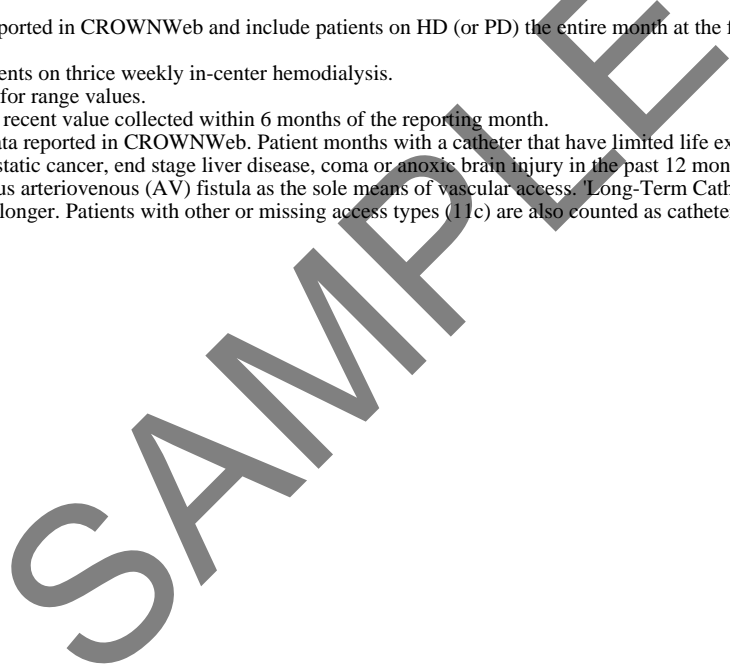


TABLE 15: Selected Measures for Nursing Home (NH) Dialysis Patients^{*1}, 2017-2020[^]

Measure Name	This Facility				Regional Averages ^{*2} , 2020		
	2017	2018	2019	2020	State	Network	U.S.
Patient Characteristics							
15.1a	Patients treated on 12/31 (n)	4	4	4	4	n/a	n/a
15.1c	Age (% of 15.1a; sums to 100%)						
	< 18	0.0	0.0	0.0	0.0	0.0	0.0
	18-64	34.3	34.1	33.5	34.3	34.2	33.9
	65+	65.7	65.9	66.5	65.7	65.8	66.1
15.1d	Female (% of 15.1a)	48.8	49.1	48.6	48.1	48.5	48.1
15.1e	Race (% of 15.1a; sums to 100%) ^{*3}						
	African American	33.6	33.8	34.2	35.0	35.2	34.9
	Asian/Pacific Islander	4.4	4.4	4.4	4.5	3.5	3.8
	Native American	0.9	1.0	1.1	1.1	1.2	1.1
	White	61.0	60.6	59.9	59.1	59.8	59.9
	Other/Unknown/Missing	0.2	0.2	0.3	0.3	0.3	0.3
15.1f	Ethnicity (% of 15.1a; sums to 100%)						
	Hispanic	13.0	13.1	13.0	13.4	12.7	12.5
	Non-Hispanic	86.8	86.7	86.8	86.3	87.0	87.2
	Unknown	0.2	0.1	0.2	0.3	0.4	0.4
15.1g	Cause of ESRD (% of 15.1a; sums to 100%)						
	Diabetes	55.8	55.5	55.9	55.4	55.6	55.3
	Hypertension	27.4	27.4	27.4	27.4	27.7	27.6
	Glomerulonephritis	5.2	5.3	4.9	4.9	4.5	4.6
	Other	11.2	11.5	11.4	11.4	11.2	11.5
	Unknown/Missing	0.4	0.4	0.4	0.9	0.9	1.0
15.1i	Years since start of ESRD (% of 15.1a; sums to 100%)						
	< 1	21.9	20.8	20.1	17.4	17.5	17.7
	1-2	15.7	15.6	15.2	16.0	16.3	16.4
	2-3	12.4	12.1	12.4	12.5	12.8	12.7
	3-6	24.7	25.5	25.7	26.5	26.6	26.6
	6+	25.4	26.0	26.6	27.6	26.7	26.7
15.1k	Modality (% of 15.1a; sums to 100%)						
	In-center hemodialysis	96.4	96.2	95.7	96.0	94.6	94.4
	Home hemodialysis	1.2	1.4	1.9	2.1	3.0	3.2
	Continuous ambulatory peritoneal dialysis	0.3	0.2	0.2	0.2	0.3	0.3
	Continuous cycling peritoneal dialysis	1.5	1.5	1.6	1.7	2.1	2.1
	Other modality ^{*4}	0.5	0.6	0.7	0.0	0.0	0.0

(continued)

TABLE 15 (cont.): Selected Measures for Nursing Home (NH) Dialysis Patients^{*1}, 2017-2020[^]

Measure Name	This Facility				Regional Averages ^{^2} , 2020			
	2017	2018	2019	2020	State	Network	U.S.	
Characteristics of New Dialysis Patients								
15.2a	Total number of patients with forms (n)	2	2	2	1	n/a	n/a	n/a
15.2g	Medical coverage (% of 15.2a; sums to 100%)							
	Employer group only	3.2	2.5	2.6	3.2	2.8	2.9	2.9
	Medicare (alone or combined w/ other insurance)	83.6	83.9	82.3	80.8	82.5	82.3	82.0
	Medicaid only	8.4	9.2	10.2	10.5	8.9	9.0	9.3
	Other/Unknown/None	4.8	4.4	4.9	5.5	5.9	5.9	5.7
15.2k	Number of incident hemodialysis patients (n)	2	2	2	1	n/a	n/a	n/a
15.2l	Access used at first outpatient dialysis (% of 15.2k; sums to 100%)							
	Arteriovenous fistula	9.3	8.7	8.0	6.9	6.6	6.6	6.8
	Arteriovenous graft	2.8	2.8	2.7	2.6	2.1	2.1	2.0
	Catheter	86.5	86.9	87.8	88.8	89.0	88.9	88.9
	Other/Unknown/Missing	1.4	1.5	1.5	1.8	2.3	2.4	2.3
15.2m	Arteriovenous fistulae placed (% of 15.2k)	24.1	22.0	20.1	17.2	15.8	15.8	16.2
15.2s	Pre-ESRD nephrologist care (% of 15.2a; sums to 100%)							
	No	23.8	21.2	19.4	19.7	19.3	19.2	18.8
	Yes, < 6 months	15.7	17.2	19.4	18.8	19.3	19.5	19.4
	Yes, 6-12 months	18.0	19.0	18.6	18.3	18.1	18.0	17.9
	Yes, > 12 months	24.0	24.8	24.2	24.3	23.6	23.5	23.5
	Unknown	18.5	17.8	18.4	18.9	19.8	19.9	20.5
15.2t	Informed of transplant options (% of 15.2a)	80.5	80.7	78.5	77.6	78.1	78.2	77.8
Mortality summary for all NH dialysis								
15.3a	Patients (n)	7	7	7	6	n/a	n/a	n/a
15.3b	Patient years (PY) at risk (n)	4.2	4.3	4.4	2.6	n/a	n/a	n/a
15.3c	Deaths (n)	2	2	2	1	n/a	n/a	n/a
15.3d	Expected deaths (n)	7	7	7	5	n/a	n/a	n/a
15.3c/15.3b	Rate (deaths per 100 PYs at risk)	41.4	40.2	39.0	41.8	49.0	49.0	48.5
15.3h	SMR (deaths/expected deaths)	1.3	1.2	1.2	1.0	1.1	1.1	1.1
15.3e	Withdrawal from dialysis prior to death (% of 15.3c)	33.2	33.5	33.1	20.5	20.5	20.7	20.6
Hospitalization summary for NH Medicare dialysis patients								
15.4a	Medicare dialysis patients (n)	6	6	6	6	n/a	n/a	n/a
15.4b	Patient years (PY) at risk (n)	3.8	3.9	4.0	2.3	n/a	n/a	n/a
15.4i	Total admissions (n)	12	12	12	7	n/a	n/a	n/a
15.4j	Expected total admissions (n)	36	36	36	23	n/a	n/a	n/a
15.4i/15.4b	Rate (admissions per 100 PYs at risk)	316.2	314.6	311.3	310.9	317.6	318.1	317.7
15.4k	SHR (admissions/expected admissions)	1.6	1.6	1.6	1.5	1.5	1.5	1.5
15.4o	Diagnoses associated with hospitalization (% of 15.4a)							
	Septicemia	25.8	25.7	25.2	27.7	27.6	27.7	27.7
	Acute myocardial infarction	9.4	10.5	10.7	12.3	12.1	12.1	12.2
	Congestive heart failure	47.6	48.9	48.9	50.5	50.1	50.2	50.2
	Cardiac dysrhythmia	34.8	35.7	35.4	36.8	36.7	37.0	37.1
	Cardiac arrest	4.2	4.2	3.8	4.5	4.8	4.8	4.8

(continued)

TABLE 15 (cont.): Selected Measures for Nursing Home (NH) Dialysis Patients^{*1}, 2017-2020[^]

Measure Name	This Facility				Regional Averages ^{*2} , 2020			
	2017	2018	2019	2020	State	Network	U.S.	
Comorbidities reported on Medicare claims								
15.12a	Medicare dialysis patients on 12/31 (n)	4	4	4	3	n/a	n/a	n/a
15.12b	Comorbidity (% yes of 15.12a)							
Infections								
	AIDS/HIV positive	1.1	1.1	1.0	1.2	1.0	1.0	1.1
	Intravascular/implanted device-related ^{*7}	9.9	9.6	8.9	8.7	8.6	8.6	8.5
	Hepatitis B	1.1	1.1	1.0	0.9	0.9	0.9	0.9
	Hepatitis other	4.8	4.7	4.1	4.3	4.0	4.1	4.1
	Metastatic	3.9	3.9	3.9	4.0	4.0	4.0	4.0
	Pneumonia	10.2	10.5	12.0	9.8	9.6	9.7	9.7
	Tuberculosis	0.1	0.1	0.2	0.4	0.3	0.3	0.3
	Other	43.4	42.0	40.8	42.4	42.4	42.3	42.3
Cardiovascular								
	Cardiac arrest	2.3	2.3	2.0	2.3	2.5	2.5	2.5
	Cardiac dysrhythmia	39.1	38.8	37.8	39.1	39.1	39.4	39.6
	Cerebrovascular disease	18.9	18.8	18.4	19.4	19.4	19.5	19.3
	Congestive heart failure	56.1	56.3	55.0	56.4	56.4	56.6	56.6
	Ischemic heart disease	51.8	50.5	48.8	49.8	49.2	49.5	49.7
	Myocardial infarction	11.3	12.1	12.2	13.9	13.8	13.7	13.9
	Peripheral vascular disease ^{*7}	36.8	37.2	35.6	37.5	37.5	37.6	37.5
Anemia^{*8}								
15.8a	Eligible adult HD patients (n)	6	6	6	4	n/a	n/a	n/a
15.8b	Eligible adult HD patient-months (n) ^{*5}	46	48	49	7	n/a	n/a	n/a
15.8d	Hemoglobin (HD) < 10 g/dL (% of 15.8b)	28	30	30	28	28.0	28.0	28.1
15.8e	ESA prescribed (% of 15.8b)	79	79	80	80	79.2	79.3	79.4
15.8f	Eligible adult PD patients (n)	1	1	1	0	n/a	n/a	n/a
15.8g	Eligible adult PD patient-months (n) ^{*5}	6	6	6	1	n/a	n/a	n/a
15.8i	Hemoglobin (PD) < 10 g/dL (% of 15.8g)	28	29	32	29	30.0	30.0	30.1
15.8j	ESA prescribed (% of 15.8g)	58	57	61	63	58.4	58.1	58.4
Dialysis Adequacy^{*8 *9}								
15.9a	Eligible adult HD Kt/V patients (n)	6	6	6	4	n/a	n/a	n/a
15.9b	Eligible adult HD Kt/V patient-months (n) ^{*5}	44	46	47	7	n/a	n/a	n/a
15.9k	Kt/V (HD) < 1.2 (% of 15.9b)	3	3	2	2	2.3	2.3	2.3
15.9l	Eligible adult PD Kt/V patients (n)	0	0	0	0	n/a	n/a	n/a
15.9m	Eligible adult PD Kt/V patient-months (n) ^{*5}	1	1	1	0	n/a	n/a	n/a
15.9o	Kt/V (PD) < 1.7 (% of 15.9m)	10	8	10				
Vascular Access^{*8 *10}								
15.11a	Prevalent adult hemodialysis patients (n)	7	7	7	4	n/a	n/a	n/a
15.11b	Prevalent adult hemodialysis patient months (n) ^{*5}	49	50	51	7	n/a	n/a	n/a
15.11c	Arteriovenous fistula in use (% of 15.11b)	52.2	51.9	51.7	50.3	50.0	50.1	50.3
15.11g	Long-Term Catheter Rate	17.5	17.9	18.4				

(continued)

TABLE 15 (cont.): Selected Measures for Nursing Home (NH) Dialysis Patients^{*1}, 2017-2020[^]

n/a = not applicable; Kt/V: K = dialyzer clearance of urea; t = dialysis time; V = patient's total body water.

[^] For exclusions due to data exceptions, please refer to corresponding parent table and *Data Limitations in FY 2022 DFRs* on pages 2-3 for more information.

[*1] See *Guide, Section XVIII* corresponding to the parent table in the DFR.

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

[*3] 'Asian' includes Indian sub-continent. 'Native American' includes Alaskan Native. 'White' includes Middle Eastern and Arab.

[*4] Other modality includes other dialysis, uncertain modality, and patients not on dialysis but still temporarily assigned to the facility (discontinued dialysis, recovered renal function, and lost to follow-up).

[*5] A patient may be counted up to 12 times per year.

[*6] Deaths due to street drugs and accidents unrelated to treatment are excluded.

[*7] Intravascular/implanted device-related category includes bloodstream and other infections related to intravascular access and other implanted devices, not limited to dialysis access. Peripheral vascular disease includes venous, arterial and nonspecific peripheral vascular diseases.

[*8] Summaries are based on data reported in CROWNWeb and the patient must be on HD (or PD) for the entire reporting month to be included in patient counts and summaries.

[*9] Summaries are supplemented with Medicare claims if missing in CROWNWeb. HD Kt/V summaries are restricted to patients who dialyze thrice weekly. The PD summaries use the most recent value over a 4-month look-back period.

[*10] Patient months with a catheter that have limited life expectancy, including under hospice care in the current reporting month, or with metastatic cancer, end stage liver disease, coma or anoxic brain injury in the past 12 months, were excluded. Other or missing access types are counted as catheter in use in the numerator. LTCR includes patients using a catheter continuously for three months or longer.

SAMPLE