

Dialysis Facility Report for Fiscal Year (FY) 2017

**\*Purpose of the Report**

The *Dialysis Facility Report (DFR) for FY 2017* 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 2017 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-first in a series of annual reports. This is one of 6,783 reports that have been distributed to ESRD providers in the U.S.

**\*This DFR includes data specific to CCN(s): 502508**

**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 2012 and December 2015. Mortality, hospitalization, and transplantation statistics are reported for a three- or four-year period. Regional and national averages are included to allow for comparisons. Several of the summaries of patient mortality, hospitalization, and transplantation are adjusted to account for the characteristics of the patient mix at this facility, 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 highlights from this report are given on pages 2 and 3. 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 2017*. The *Guide* may be downloaded from the methodology section of the Dialysis Data website at [www.DialysisData.org](http://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 DFR for FY 2017 has been reorganized by measure area. Summaries for All Dialysis Patients Treated as of December 31st of Each Year (former Table 10) and Characteristics of New Dialysis Patients (former Table 9) may now be found at the beginning of the Report. The following NEW tables include measures previously reported in Table 6 (Facility Modality, Anemia Management, and Dialysis Adequacy for Medicare Dialysis Patients) and Table 14 (CROWNWeb Clinical Data): Table 8: Anemia Management; Table 9: Dialysis Adequacy and Table 10: Mineral Metabolism. Vascular access type and access-related infection summaries have been combined and in the new Table 11. Most recent patient placement information and Medicare eligibility summaries reported on the Annual Facility Survey; and basic survey information formally reported in Tables 13 and 15, respectively, may now be found in the new Table 13: Facility Information.

**\*How to Submit Comments**

**Between July 15, 2016 and August 15, 2016**, facilities may submit comments to their state surveyor or UM-KECC by visiting [www.DialysisData.org](http://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](mailto:DialysisData@umich.edu) or 1-855-764-2885.

- (1) **State Surveyor:** Dialysis facilities may submit comments on the DFR for their state's surveyors. State surveyor(s) will receive a copy of their DFR with the comments they submitted in September 2016.
- (2) **UM-KECC:** Submit questions or suggestions to improve the DFR to UM-KECC. These comments will not be shared with CMS or your state surveyor.

## \*Facility Highlights

### *Patient Characteristics (Tables 1 and 2):*

- Among the 45 patients with Medical Evidence Forms (CMS-2728) indicating treatment at this facility during 2015:
  - 9% of these patients were not under the care of a nephrologist before starting dialysis, compared to 19% in your State, 19% in your Network, and 23% nationally.
  - 49% of these patients were informed of their transplant options, compared to 75% in your State, 79% in your Network, and 87% nationally.
- Among the patients treated at this facility on December 31, 2015, 15% were treated in a nursing home during the year, compared to 15% nationally.

### *Standardized Mortality Ratio (SMR) (Table 3):*

- At this facility, the 2012-2015 SMR is 1.04, which is 4% more deaths than expected. Among all U.S. facilities, 59% of facilities had a four-year SMR (2012-2015) lower than 1.04. This difference is not statistically significant ( $p \geq 0.05$ ), so this higher mortality could plausibly be just a chance occurrence. The 2012-2015 SMR of observed to expected deaths is 0.98 and 0.94 for your State and Network, respectively.
- At this facility, the 2012-2014 first-year SMR of observed to expected deaths is 0.84, which is 16% fewer deaths than expected at this facility. Among all U.S. facilities, 40% of facilities had a first-year SMR lower than 0.84. This difference is not statistically significant ( $p \geq 0.05$ ), so this lower mortality could plausibly be just a chance occurrence. The first-year SMR (2012-2014) of observed to expected deaths is 0.89 and 0.87 for your State and Network, respectively.

### *Hospitalizations and Readmissions (Table 4):*

- The 2012-2015 SHR (Admissions) at this facility is 0.83, which is 17% 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 2012-2015 SHR (Admissions) for your State and Network is 0.89 and 0.87, respectively.
- The 2015 SRR at this facility is 1.03, which is 3% more admissions than expected. This difference is not statistically significant ( $p \geq 0.05$ ), so the higher number of readmissions could plausibly be just a chance occurrence. The 2015 SRR for your State and Network is 0.96 and 0.92, respectively.

### *Infection (Tables 4 and 11):*

- The percentage of Medicare dialysis patients at this facility hospitalized with septicemia during 2012-2015 was 9.6%, compared to 11.8% in your State, 10.6% in your Network, and 10.9% nationally.
- The rate of PD catheter-related infection was 2.8 per 100 PD patient-months, compared to 2.8 in your State, 2.3 in your Network, and 2.5 nationally.

### *Transplantation (Table 5):*

- Of the patients under age 70 treated at this facility during 2012-2015 who had not previously received a transplant, 6% were transplanted annually, while a rate of 4% would be expected for these patients.
- The 2012-2015 Standardized 1<sup>st</sup> Transplantation Ratio (STR) of observed to expected number of patients transplanted for this facility is 1.42, which is 42% higher than expected for this facility. This difference is not statistically significant ( $p \geq 0.05$ ) and could plausibly be due to random chance. The 2012-2015 STR for your State and Network is 1.37 and 1.28, respectively.

### *Transplant Waitlist (Table 6):*

- Among the 135 dialysis patients under age 70 treated at this facility on December 31, 2015, 34% were on the kidney transplant waitlist, compared to 23% nationally. This difference is statistically significant ( $p < 0.05$ ) and is unlikely to be due to random chance. The percentage of patients on the kidney transplant waitlist on December 31, 2015, in your State and Network is 20% and 18%, respectively.

*Influenza Vaccination (Table 7):*

- Among the 127 Medicare dialysis patients treated at this facility on December 31, 2015, 76% were vaccinated between August 1 and December 31, 2015 compared to 73% 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, Network, and Nation is 77%, 76%, and 73%, respectively.

*Anemia Management (Table 8):*

- Among the 101 HD patients in this facility included in the analysis in 2015, 12% had a hemoglobin value below 10 g/dL, compared to 13% in your State, 12% in your Network, and 16% nationally.
- Among the 9 PD patients in this facility included in the analysis in 2015, 0% had a hemoglobin value below 10 g/dL, compared to 21% in your State, 21% in your Network, and 26% nationally.

*Dialysis Adequacy (Table 9):*

- In 2015, 91% of eligible HD patient-months had a Kt/V  $\geq 1.2$ , compared to 95% in your State, 95% in your Network, and 95% nationally.
- In 2015, 91% of eligible PD patient-months had a Kt/V  $\geq 1.7$ , compared to 89% in your State, 90% in your Network, and 87% nationally.

*Mineral Metabolism (Table 10):*

- In 2015, 20% of eligible patient-months had a serum phosphorus value  $>7.0$  mg/dL, compared to 14% in your State, 14% in your Network, and 12% nationally.
- In 2015, 3% of eligible patient-months had calcium uncorrected value  $>10.2$  mg/dL, compared to 4% in your State, 4% in your Network, and 3% nationally.

*Vascular Access (Table 11):*

- At this facility in 2015, 30% of incident patients had arteriovenous (AV) fistulae in place, compared to 31% in your State, 30% in your Network, and 22% nationally.
- Of the prevalent patients receiving hemodialysis treatment at this facility in 2015, 2% had a catheter which had been in place for at least 90 days as their only vascular access, compared to 8% in your State, 8% in your Network, and 10% nationally.

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NKC RENTON KIDNEY CENTER State: WA Network: 16 CCN: 502508

**TABLE 1: Summaries for All Dialysis Patients Treated as of December 31st of Each Year<sup>\*1</sup>, 2012-2015**

Measure Name	2012	2013	2014	2015	-	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
							<b>2015</b>	
1a Patients treated on 12/31 (n)	127	129	127	158		71.2	62.0	66.9
1b Average age (years)	64.2	62.6	61.0	59.2		61.4	61.3	61.7
1c Age (% of 1a; sums to 100%)								
< 18	0.0	0.0	0.0	0.0		0.4	0.4	0.3
18-64	45.7	51.2	59.8	61.4		54.0	54.0	54.6
65+	54.3	48.8	40.2	38.6		45.6	45.6	45.2
1d Female (% of 1a)	43.3	48.1	46.5	46.8		43.7	42.9	43.5
1e Race (% of 1a; sums to 100%) <sup>*3</sup>								
African American	22.8	24.0	21.3	29.1		11.8	8.3	35.5
Asian/Pacific Islander	36.2	37.2	38.6	30.4		14.2	10.2	5.7
Native American	0.0	0.8	1.6	1.3		1.5	2.9	1.2
White	40.9	38.0	37.8	38.6		72.2	78.1	57.3
Other/Unknown/Missing	0.0	0.0	0.8	0.6		0.4	0.4	0.3
1f Ethnicity (% of 1a; sums to 100%)								
Hispanic	7.9	7.8	5.5	3.2		12.1	12.2	18.4
Non-Hispanic	92.1	92.2	94.5	96.2		87.4	87.4	81.2
Unknown	0.0	0.0	0.0	0.6		0.5	0.4	0.4
1g Primary Cause of ESRD (% of 1a; sums to 100%)								
Diabetes	44.1	40.3	42.5	44.9		45.4	44.8	45.0
Hypertension	26.8	24.0	21.3	20.3		18.0	17.7	29.4
Glomerulonephritis	20.5	22.5	20.5	22.8		16.0	16.6	11.1
Other/Unknown	8.7	13.2	15.7	11.4		20.0	20.4	13.5
Missing	0.0	0.0	0.0	0.6		0.6	0.6	1.1
1h Average duration of ESRD (years)	4.5	4.5	4.9	4.9		4.9	4.8	4.9
1i Years since start of ESRD (% of 1a; sums to 100%)								
< 1	10.2	18.6	15.0	19.0		16.6	16.8	16.1
1-2	25.2	9.3	20.5	17.7		18.1	18.4	17.0
2-3	11.0	23.3	7.9	18.4		14.3	14.2	13.6
3-6	33.1	26.4	29.1	20.9		25.4	25.4	26.2
6+	20.5	22.5	27.6	24.1		25.6	25.2	27.1
1j Nursing home patients (% of 1a) <sup>*4</sup>	4.7	10.1	7.9	14.6		13.6	13.1	14.8
1k Modality (% of 1a; sums to 100%)								
In-center hemodialysis	100	99.2	100	82.3		84.1	82.8	87.6
Home hemodialysis	0.0	0.0	0.0	5.1		2.9	2.6	1.8
Continuous ambulatory peritoneal dialysis	0.0	0.0	0.0	1.3		1.5	2.1	1.8
Continuous cycling peritoneal dialysis	0.0	0.8	0.0	11.4		10.7	11.8	8.3
Other modality <sup>*5</sup>	0.0	0.0	0.0	0.0		0.8	0.7	0.5

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 Arabian.

[\*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] 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).

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**TABLE 2: Characteristics of New Dialysis Patients\*<sup>1</sup>, 2012-2015 (Form CMS-2728)**

Measure Name	2012	2013	2014	2015	-	State* <sup>2</sup>	Network* <sup>2</sup>	U.S.* <sup>2</sup>
<b>Patient Characteristics*<sup>3</sup></b>							<b>2015</b>	
2a Total number of patients with forms (n)	39	52	40	45		17.6	16.1	17.7
2b Average age (years [0-95])* <sup>3</sup>	58.6	59.6	60.6	60.7		62.5	62.7	63.4
2c Female (% of 2a)	43.6	46.2	47.5	42.2		42.2	39.5	42.4
2d Race (% of 2a; sums to 100%)* <sup>4</sup>								
African-American	15.4	23.1	7.5	20.0		9.3	6.1	26.5
Asian/Pacific Islander	35.9	32.7	30.0	22.2		13.3	8.8	5.2
Native American	0.0	1.9	2.5	0.0		1.7	2.8	0.9
White	48.7	42.3	57.5	57.8		75.1	81.9	67.1
Other/Unknown	0.0	0.0	2.5	0.0		0.6	0.4	0.3
2e Hispanic (% of 2a)	5.1	3.8	2.5	0.0		7.2	8.2	15.0
2f Primary cause of ESRD (% of 2a; sums to 100%)								
Diabetes	48.7	53.8	50.0	44.4		46.7	47.2	48.0
Hypertension	17.9	19.2	20.0	17.8		18.4	17.6	29.6
Primary glomerulonephritis	12.8	13.5	7.5	20.0		13.0	13.4	7.5
Other/Unknown	20.5	13.5	22.5	17.8		21.9	21.8	14.9
2g Medical coverage (% of 2a; sums to 100%)								
Employer group only	23.1	34.6	25.0	15.6		12.8	11.6	12.6
Medicare only	17.9	28.8	25.0	26.7		26.7	29.9	31.4
Medicaid only	17.9	11.5	17.5	8.9		12.1	11.5	12.1
Medicare and Medicaid only	15.4	7.7	15.0	15.6		12.9	11.3	13.2
Medicare and other	2.6	5.8	10.0	20.0		23.5	22.5	19.0
Other/Unknown	15.4	7.7	5.0	8.9		10.7	10.7	7.5
None	7.7	3.8	2.5	4.4		1.4	2.6	4.2
2h Body Mass Index* <sup>5</sup> (Median; Weight/Height <sup>2</sup> )								
Male	27.1	26.1	29.8	27.2		27.7	28.3	27.8
Female	27.5	26.1	29.4	29.7		28.5	29.4	29.1
2i Employment* <sup>6</sup>								
Six months prior to ESRD treatment	60.0	50.0	60.0	41.2		36.4	36.7	31.7
At first ESRD treatment	45.0	35.7	30.0	29.4		28.3	27.3	22.6
2j Primary modality (% of 2a; sums to 100%)								
Hemodialysis	76.9	78.8	90.0	84.4		88.0	86.1	89.9
CAPD/CCPD	23.1	21.2	10.0	15.6		12.0	13.9	10.1
Other/Unknown/Missing	0.0	0.0	0.0	0.0		0.0	0.0	0.0
2k Number of incident hemodialysis patients (n)	30	41	36	38		15.5	13.9	15.9
2l Access used at first outpatient dialysis (% of 2k; sums to 100%)								
Arteriovenous fistula	23.3	29.3	27.8	21.1		28.2	25.8	16.9
Arteriovenous graft	0.0	4.9	2.8	2.6		3.0	3.3	3.0
Catheter	76.7	65.9	69.4	76.3		68.5	70.7	80.0
Other/Unknown/Missing	0.0	0.0	0.0	0.0		0.3	0.2	0.2
2m Arteriovenous fistula placed (% of 2k)	56.7	58.5	47.2	65.8		49.7	46.6	33.6

(continued)

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**TABLE 2 (cont.): Characteristics of New Dialysis Patients<sup>\*1</sup>, 2012-2015 (Form CMS-2728)**

Measure Name	2012	2013	2014	2015	-	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
<b>Average Lab Values Prior to Dialysis<sup>*3</sup></b>							<b>2015</b>	
2n Hemoglobin (g/dL [3-18])	9.5	9.1	9.4	9.3		9.4	9.6	9.4
2o Serum albumin (g/dL [0.8-6.0])	3.6	3.9	3.8	.		3.2	3.2	3.2
2p Serum creatinine (mg/dL [2-33])	6.8	7.7	7.4	8.6		6.8	6.4	6.5
2q GFR (mL/min [0-60])	9.6	8.3	9.2	8.6		9.8	10.4	10.7
<b>Care Prior to ESRD Therapy</b>								
2r Received ESA prior to ESRD (% of 2a)	38.5	44.2	27.5	28.9		20.6	19.2	13.4
2s Pre-ESRD nephrologist care (% of 2a; sums to 100%) <sup>*7</sup>								
No	17.9	9.6	20.0	8.9		18.6	19.0	22.9
Yes, < 6 months	25.6	28.8	27.5	26.7		15.9	14.6	13.5
Yes, 6-12 months	10.3	15.4	12.5	11.1		17.7	20.4	19.5
Yes, > 12 months	43.6	46.2	40.0	53.3		43.3	41.6	29.9
Unknown/Missing	2.6	0.0	0.0	0.0		4.4	4.4	14.2
2t Informed of transplant options (% of 2a)	61.5	57.7	55.0	48.9		75.5	78.8	86.8
2u Patients not informed of transplant options (n)	15	22	18	23		4.3	3.4	2.3
2v Reason not informed (% of 2u; may not sum to 100%)								
Medically unfit	46.7	31.8	22.2	34.8		42.9	42.2	36.0
Unsuitable due to age	6.7	13.6	0.0	8.7		10.7	15.4	25.8
Psychologically unfit	0.0	4.5	11.1	0.0		4.5	3.5	3.4
Patient declined information	0.0	4.5	0.0	0.0		1.1	0.9	1.9
Patient has not been assessed	53.3	45.5	61.1	56.5		38.9	40.2	37.1
<b>Comorbid Conditions</b>								
2w Pre-existing comorbidity (% yes of 2a) <sup>*7</sup>								
Congestive heart failure	28.2	30.8	30.0	31.1		29.1	28.0	28.8
Atherosclerotic heart disease <sup>*8</sup>	17.9	21.2	20.0	24.4		16.2	18.1	14.0
Other cardiac disorder <sup>*7</sup>	10.3	13.5	20.0	15.6		17.5	16.3	20.0
CVD, CVA, TIA	7.7	11.5	12.5	4.4		9.3	8.9	8.4
Peripheral vascular disease	20.5	15.4	12.5	20.0		9.8	12.2	10.4
History of hypertension	87.2	90.4	92.5	91.1		85.0	85.0	87.6
Diabetes <sup>*7</sup>	66.7	65.4	62.5	53.3		58.4	58.4	62.6
Diabetes on insulin	51.3	57.7	52.5	44.4		42.8	41.8	41.6
COPD	5.1	9.6	7.5	6.7		7.7	7.9	9.3
Current smoker	10.3	9.6	7.5	6.7		5.9	6.8	6.1
Cancer	5.1	5.8	7.5	4.4		7.8	7.6	7.0
Alcohol dependence	0.0	0.0	2.5	0.0		1.0	1.8	1.5
Drug dependence	2.6	1.9	0.0	0.0		2.5	2.0	1.2
Inability to ambulate	2.6	0.0	5.0	2.2		4.1	4.6	7.1
Inability to transfer	0.0	0.0	5.0	2.2		1.4	1.5	3.9
2x Average number of comorbid conditions	3.2	3.3	3.4	3.1		3.0	3.0	3.1

n/a= not applicable

[\*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 Arabian.

[\*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 122-208cm, 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 (0.01% in US in 2015).

[\*8] '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.

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NKC RENTON KIDNEY CENTER State: WA Network: 16 CCN: 502508

**TABLE 3: Mortality Summary for All Dialysis Patients (2012-15) & New Dialysis Patients (2012-14)\*1**

Measure Name	2012	2013	2014	2015	2012-2015	State *2	Network *2	U.S. *2
<b>All Patients: Death Rates</b>							<b>2012-2015</b>	
3a Patients (n=number)	175	177	174	212	738 *8	95.4	80.5	95.5
3b Patient-years (PY) at risk (n)	130.3	129.8	131.3	132.6	523.9 *8	67.1	56.8	64.2
3c Deaths (n)	21	19	24	25	89 *8	12.0	10.0	11.2
3d Expected deaths (n)	23.2	22.1	19.9	20.4	85.6 *8	12.2	10.6	11.2
<b>All Patients: Categories of Death</b>								
3e Withdrawal from dialysis prior to death (% of 3c)	28.6	42.1	37.5	24.0	32.6	40.0	41.2	24.9
3f Death due to Infections (% of 3c)	19.0	31.6	20.8	12.0	20.2	13.7	13.5	11.7
Death due to Cardiac causes (% of 3c)	42.9	42.1	54.2	32.0	42.7	36.2	38.7	43.5
3g Dialysis unrelated deaths *3 (n; excluded from SMR)	0	0	0	0	0 *8	0.1	0.1	0.1
<b>All Patients: Standardized Mortality Ratio (SMR)</b>								
3h SMR *4	0.91	0.86	1.21	1.22	1.04	0.98	0.94	1.00
3i P-value *5	0.750	0.590	0.409	0.361	0.743	n/a	n/a	n/a
3j Confidence interval for SMR *6								
High (97.5% limit)	1.38	1.34	1.80	1.81	1.28	n/a	n/a	n/a
Low (2.5% limit)	0.56	0.52	0.77	0.79	0.83	n/a	n/a	n/a
3k SMR percentiles for this facility *7								
In this State	42	41	71	85	70	n/a	n/a	n/a
In this Network	51	46	71	84	74	n/a	n/a	n/a
In the U.S.	43	38	73	74	59	n/a	n/a	n/a
<b>New Patients: First Year Death Rates</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>		<b>2012-2014</b>		<b>2012-2014</b>	
3l New patients (n=number)	39	52	40		131 *8	18.7	16.3	17.0
3m Patient-years (PY) at risk (n)	34.7	48.4	36.2		119 *8	16.5	14.5	14.9
3n Deaths (n)	6	5	7		18 *8	3.4	2.9	3.4
3o Expected deaths (n)	6.5	8.2	6.9		21.5 *8	3.8	3.3	3.4
<b>New Patients: Categories of Deaths</b>								
3p Withdrawal from dialysis prior to death (% of 3n)	33.3	40.0	57.1		44.4	43.7	43.3	26.6
3q Death due to Infections (% of 3n)	16.7	20.0	14.3		16.7	14.0	13.0	10.8
Death due to Cardiac causes (% of 3n)	66.7	40.0	42.9		50.0	32.6	36.4	38.9
<b>New Patients: First Year Standardized Mortality Ratio (SMR)</b>								
3r SMR *4	0.93	0.61	1.02		0.84	0.89	0.87	1.00
3s P-value *5	0.999	0.350	0.999		0.531	n/a	n/a	n/a
3t Confidence interval for SMR *6								
High (97.5% limit)	2.02	1.43	2.10		1.32	n/a	n/a	n/a
Low (2.5% limit)	0.34	0.20	0.41		0.50	n/a	n/a	n/a
3u First Year SMR percentiles for this facility *7								
In this State	59	36	62		45	n/a	n/a	n/a
In this Network	60	38	60		45	n/a	n/a	n/a
In the U.S.	50	31	56		40	n/a	n/a	n/a

n/a = not applicable

\*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.

# Dialysis Facility Report for FY (FY) 2017

NKC RENTON KIDNEY CENTER State: WA Network: 16 CCN: 502508

**TABLE 4: Hospitalization Summary for Medicare Dialysis Patients<sup>\*1</sup>, 2012-2015**

Measure Name	2012	2013	2014	2015	2012-2015	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
<b>Medicare Dialysis Patients</b>							<b>2012-2015</b>	
4a Medicare dialysis patients (n)	140	138	137	167	582 <sup>*3</sup>	74.8	62.8	74.1
4b Patient-years (PY) at risk (n)	106.8	101.2	99.8	98.4	406.2 <sup>*3</sup>	49.2	40.8	45.4
<b>Days Hospitalized Statistics</b>								
4c Total days hospitalized (n)	841	693	809	816	3159 <sup>*3</sup>	486.9	389.1	599.8
4d Expected total days hospitalized (n)	1443.5	1324.7	1237.3	1274.9	5280.3 <sup>*3</sup>	657.5	539.0	601.9
4e Standardized Hospitalization Ratio (Days) <sup>*4</sup>	0.58	0.52	0.65	0.64	0.60	0.74	0.72	1.00
4f P-value <sup>*5</sup>	0.146	0.096	0.241	0.238	0.103	n/a	n/a	n/a
4g Confidence interval for SHR (Days) <sup>*6</sup>								
High (97.5% limit)	1.19	1.11	1.30	1.31	1.10	n/a	n/a	n/a
Low (2.5% limit)	0.31	0.27	0.35	0.34	0.35	n/a	n/a	n/a
4h Percentiles for this facility (Days) <sup>*7</sup>								
In this State	30	30	38	40	32	n/a	n/a	n/a
In this Network	39	30	39	41	34	n/a	n/a	n/a
In the U.S.	14	10	20	18	10	n/a	n/a	n/a
<b>Admission Statistics</b>								
4i Total admissions (n)	171	133	150	155	609 <sup>*3</sup>	80.8	64.8	82.7
4j Expected total admissions (n)	201.8	185.0	171.6	177.6	736.0 <sup>*3</sup>	90.9	74.7	82.8
4k Standardized Hospitalization Ratio (Admissions) <sup>*4</sup>	0.85	0.72	0.87	0.87	0.83	0.89	0.87	1.00
4l P-value <sup>*5</sup>	0.546	0.234	0.649	0.642	0.426	n/a	n/a	n/a
4m Confidence interval for SHR (Admissions) <sup>*6</sup>								
High (97.5% limit)	1.37	1.21	1.43	1.41	1.27	n/a	n/a	n/a
Low (2.5% limit)	0.55	0.46	0.57	0.57	0.56	n/a	n/a	n/a
4n Percentiles for this facility (admissions) <sup>*7</sup>								
In this State	42	28	51	55	41	n/a	n/a	n/a
In this Network	49	34	55	57	46	n/a	n/a	n/a
In the U.S.	34	18	38	36	27	n/a	n/a	n/a
4o Diagnoses associated with hospitalization (% of 4a) <sup>*8</sup>								
Septicemia	7.9	8.0	9.5	12.6	9.6	11.8	10.6	10.9
Acute myocardial infarction	2.9	5.1	5.1	4.2	4.3	4.5	4.4	4.1
Congestive heart failure	15.7	21.0	22.6	19.8	19.8	22.8	21.4	23.4
Cardiac dysrhythmia	15.7	12.3	17.5	14.4	14.9	17.3	16.0	15.9
Cardiac arrest	3.6	4.3	5.1	1.2	3.4	2.1	1.9	2.1
4p One day admissions (% of 4i)	24.6	16.5	18.0	19.4	19.9	14.5	13.9	11.5
4q Average length of stay (days per admission; 4c/4i)	4.9	5.2	5.4	5.3	5.2	6.0	6.0	7.3

(continued)



# Dialysis Facility Report for FY (FY) 2017

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**TABLE 4 (cont.): Hospitalization Summary for Medicare Dialysis Patients<sup>\*1</sup>, 2012-2015**

Measure Name	2012	2013	2014	2015	2012-2015	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
<b>Emergency Department (ED) Statistics</b>							<b>2012-2015</b>	
4r Total ED visits (n)	282	231	280	322	1115 <sup>*3</sup>	147.5	119.6	138.7
4s Expected total ED visits (n)	315	302	296	307	1220 <sup>*3</sup>	152.3	125.8	139.2
4t Standardized Hospitalization Ratio (ED) <sup>*4</sup>	0.90	0.77	0.95	1.05	0.91	0.97	0.95	1.00
4u P-value <sup>*5</sup>	0.736	0.296	0.925	0.690	0.735	n/a	n/a	n/a
4v Confidence interval for SHR (ED) <sup>*6</sup>								
High (97.5% limit)	1.43	1.22	1.45	1.57	1.35	n/a	n/a	n/a
Low (2.5% limit)	0.60	0.52	0.66	0.74	0.66	n/a	n/a	n/a
4w Percentiles for this facility (ED) <sup>*7</sup>								
In this State	43	24	43	67	45	n/a	n/a	n/a
In this Network	44	24	49	69	46	n/a	n/a	n/a
In the U.S.	38	20	46	61	38	n/a	n/a	n/a
4x Patients with ED visit (% of 4a)	67.1	65.9	65.0	62.9	65.1	63.4	62.5	60.8
4y ED visits that result in hospitalization (% of 4t)	47.5	46.8	42.5	39.8	43.9	42.2	40.2	47.8
4z Admissions that originate in the ED (% of 4i)	78.4	81.2	79.3	82.6	80.3	77.2	74.2	80.2
<b>Readmission Statistics</b>							<b>2015</b>	
4aa Index discharges (n)	167	122	145	165	n/a	73.8	61.3	77.2
4ab Total readmissions (n)	53	24	48	45	n/a	17.7	14.5	20.3
4ac Expected total readmissions (n)	44	33	36	44	n/a	20.3	17.3	20.7
4ad Standardized Readmission Ratio (SRR)	1.19	0.72	1.33	1.03	n/a	1.0	0.9	1.0
4ae P-value <sup>*5</sup>	0.396	0.110	0.161	0.840	n/a	n/a	n/a	n/a
4af Confidence interval for SRR <sup>*6</sup>					n/a			
High (97.5% limit)	1.48	1.08	1.75	1.41	n/a	n/a	n/a	n/a
Low (2.5% limit)	0.93	0.43	0.96	0.69	n/a	n/a	n/a	n/a

n/a = not applicable.

[\*1] Based on patients with Medicare as primary insurer; 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 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 present at admission and diagnoses added during the hospital stay.

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**TABLE 5: Transplantation Summary for Dialysis Patients under Age 70<sup>\*1</sup>, 2012-2015**

Measure Name	2012	2013	2014	2015	2012-2015	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
<b>All patients</b>							<b>2012-2015</b>	
5a Eligible patients (n)	109	110	115	153	487 <sup>*10</sup>	66.1	55.7	65.4
5b Transplants (n)	4	6	4	6	20 <sup>*10</sup>	2.8	2.2	1.9
5c Donor type (sums to 5b) <sup>*3</sup>								
Living donor (n)	1	1	1	1	4 <sup>*10</sup>	0.6	0.6	0.5
Deceased donor (n)	3	5	3	5	16 <sup>*10</sup>	2.2	1.7	1.5
<b>Patients who have not Previously Received a Transplant</b>								
5d Eligible patients (n)	105	106	109	138	458 <sup>*10</sup>	59.7	50.3	59.7
5e Patient years (PY) at risk (n)	71.7	72.0	81.5	90.5	315.8 <sup>*10</sup>	41.9	35.5	40.7
5f First transplants <sup>*4</sup> (n)	4	6	3	5	18 <sup>*10</sup>	2.4	1.9	1.7
5g Expected first transplants (n)	2.9	3.0	3.2	3.6	12.6 <sup>*10</sup>	1.8	1.5	1.7
<b>Standardized 1st Transplantation Ratio (STR)<sup>*5</sup></b>								
5h STR <sup>*6</sup>					1.42	1.37	1.28	1.00
5i P-value <sup>*7</sup>					0.185	n/a	n/a	n/a
5j Confidence interval for STR <sup>*8</sup>								
High (97.5% limit)					2.24	n/a	n/a	n/a
Low (2.5% limit)					0.84	n/a	n/a	n/a
5k STR percentiles for this facility <sup>*9</sup>								
In this State					58	n/a	n/a	n/a
In this Network					66	n/a	n/a	n/a
In the U.S.					72	n/a	n/a	n/a

n/a = not applicable.

<sup>\*1</sup> See *Guide, Section VIII*.

<sup>\*2</sup> Values are shown for the average facility, annualized.

<sup>\*3</sup> Values may not sum to 5b due to unknown donor type.

<sup>\*4</sup> Among first transplants that occurred after the start of dialysis from 2012-2015, 3.8% of transplants in the U.S. were not included because the transplant occurred fewer than 90 days after the start of ESRD and 1.1% were not included because the patient was not assigned to a facility at time of transplant.

<sup>\*5</sup> This section is calculated for the 4-year period only and not reported if there are fewer than 3 expected transplants.

<sup>\*6</sup> Standardized 1st Transplantation Ratio calculated as ratio of actual (5f) to expected (5g) transplants.

<sup>\*7</sup> 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.

<sup>\*8</sup> The confidence interval range represents uncertainty in the value of the STR due to random variation.

<sup>\*9</sup> All facilities are included in ranking, regardless of the number of expected transplants.

<sup>\*10</sup> Sum of 4 years used for calculations; should not be compared to regional averages.

# Dialysis Facility Report for FY (FY) 2017

NKC RENTON KIDNEY CENTER State: WA Network: 16 CCN: 502508

**TABLE 6: Waitlist Summary for Dialysis Patients under Age 70 Treated on December 31st of Each Year<sup>\*1</sup>, 2012-2015**

Measure Name	2012	2013	2014	2015	-	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
							<b>2015</b>	
6a Eligible patients on 12/31 (n)	78	87	96	135		52.2	45.0	48.2
6b Patients on the waitlist (% of 6a)	24.4	25.3	30.2	34.1		20.5	18.2	22.6
6c P-value <sup>*3</sup> (compared to U.S. value)	0.536	0.463	0.097	<0.01		n/a	n/a	n/a
6d Patients on the waitlist by subgroup (%) <sup>*4</sup>								
Age < 40	33.3	50.0	45.5	40.9		35.0	28.4	33.1
Age 40-69	23.2	23.5	28.2	32.7		18.4	16.6	21.2
Male	28.6	22.4	29.1	40.3		21.2	18.7	23.7
Female	17.2	28.9	31.7	27.0		19.5	17.4	21.0
African American	21.7	23.1	38.5	34.9		19.8	18.1	21.0
Asian/Pacific Islander	26.1	29.6	34.5	45.7		26.4	26.6	33.2
Native American	.	0.0	0.0	0.0		9.9	13.1	15.5
White, Hispanic	20.0	33.3	50.0	33.3		20.2	16.9	25.4
White, non-Hispanic	25.9	22.2	20.6	27.5		19.6	17.3	21.6
Other/unknown race	.	.	0.0	0.0		21.7	18.0	24.9
Diabetes	25.9	17.2	31.6	29.6		15.0	12.9	18.4
Non-diabetes	23.5	29.3	29.3	37.0		25.1	22.6	26.0
Previous kidney transplant	66.7	100	100	80.0		36.9	31.4	40.1
No previous kidney transplant	22.7	21.7	27.2	28.3		18.8	16.8	21.1
< 2 years since start of ESRD	21.6	16.2	34.1	19.1		15.3	14.4	15.3
2-4 years since start of ESRD	30.0	26.9	20.7	43.8		25.8	23.2	28.1
5+ years since start of ESRD	23.8	37.5	34.8	40.0		21.4	17.6	25.3

n/a = not applicable.

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

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

[\*3] Facility waitlist percentage is compared to the U.S. waitlist percentage for that year: 24.3% (2012), 24.4% (2013), 24.0% (2014), 22.6% (2015). A p-value greater than 0.05 indicates that the difference between percent of patients waitlisted at the facility and national percentage is plausibly due to random chance.

[\*4] A missing value indicates that there were no eligible patients in the subgroup.

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**TABLE 7: Influenza Vaccination Summary for Medicare Dialysis Patients Treated on December 31st of Each Year<sup>\*1</sup>, Flu Seasons August 2012-December 2015**

Measure Name	2012	2013	2014	2015	-	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
							<b>2015</b>	
7a Eligible patients on 12/31 (n)	103	99	99	127		50.8	43.4	46.9
7b Patients vaccinated between Aug. 1 and Dec. 31 (% of 7a)	84.5	86.9	81.8	75.6		77.0	76.2	73.3
7c P-value <sup>*3</sup> (for 7b compared to U.S. value <sup>*4</sup> )	<0.01	<0.01	0.040	0.321		n/a	n/a	n/a
							<b>2014</b>	
7d Patients vaccinated between Aug 1 and Mar 31 of following year (% of 7a)	86.4	86.9	81.8			75.8	74.9	74.2
7e P-value <sup>*3</sup> (for 7d compared to U.S. value <sup>*5</sup> )	<0.01	<0.01	0.048			n/a	n/a	n/a
							<b>2015</b>	
7f Patients vaccinated between Aug 1 and Dec 31 by subgroup (%) <sup>*6</sup>								
Age < 18	.	.	.	.		53.8	57.7	57.5
Age 18-39	75.0	0.0	66.7	41.7		71.3	74.0	69.9
Age 40-64	77.1	89.5	80.0	76.7		75.4	75.9	73.8
Age 65-74	83.9	82.8	76.0	78.1		77.7	76.0	72.8
Age 75+	93.9	90.3	95.7	87.0		81.1	77.9	74.1
Male	82.5	92.0	84.0	73.3		76.4	75.2	73.5
Female	87.0	81.6	79.6	77.6		77.7	77.3	73.1
African American	88.5	91.7	81.0	68.4		72.2	72.2	71.0
Asian/Pacific Islander	91.2	84.2	91.9	82.9		80.7	80.7	76.7
Native American	.	.	100	100		80.9	76.0	80.0
White	76.7	86.5	72.5	74.5		76.9	75.9	74.4
Other/unknown race	.	.	.	.		92.9	94.6	68.5
Hispanic	87.5	83.3	100	100		81.2	82.6	75.0
< 1 year since start of ESRD	50.0	69.2	75.0	65.0		66.7	64.5	59.7
1-2 years since start of ESRD	88.2	82.1	75.0	69.2		76.3	76.0	72.4
3+ years since start of ESRD	88.1	93.1	85.1	82.4		80.0	79.4	77.2

n/a = not applicable

[\*1] Based on patients with Medicare as primary insurer; see *Guide, Section X*.

[\*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): 70.5% (2012), 71.4% (2013), 73.8% (2014), 73.3% (2015).

[\*5] Compared to the U.S. value for that year and time period (8/1-3/31): 71.5% (2012), 72.2% (2013), 74.2% (2014).

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

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**TABLE 8: Anemia Management <sup>\*1</sup>, 2012-2015**

Measure Name	2012	2013	2014	2015	-	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
<b>Hemoglobin and ESA-CROWNweb</b>							<b>2015</b>	
8a Eligible patients (n) <sup>*3</sup>	148	168	170	206		94.2	81.5	86.4
8b Eligible patient-months (n) <sup>*4</sup>	995	1481	1514	1572		805.8	703.2	760.2
8c Average hemoglobin <sup>*5</sup> (g/dL) (average of 8b)	10.9	10.7	10.7	10.8		10.8	10.9	10.8
<b>8d Hemoglobin categories (% of 8b; sums to 100%)</b>								
<10 g/dL	19.2	22.4	25.0	21.6		18.7	17.8	20.5
10-<11 g/dL	30.1	34.0	34.5	34.4		34.4	32.9	33.1
11-12 g/dL	29.4	28.2	26.2	28.6		29.4	30.1	28.3
>12 g/dL	11.8	10.1	12.2	12.9		12.6	14.5	12.2
Missing/Out of range	9.5	5.3	2.2	2.5		4.9	4.7	5.9
8e ESA prescribed (% of 8b)	87.5	93.9	91.2	91.9		76.6	70.7	67.6
<b>Standardized Transfusion Ratio (STR)</b>								
8f Adult Medicare patients (n)	103	115	117	139		65.1	56.5	60.3
8g Patient years (PY) at risk (n)	70	75	80	76		39.9	34.4	36.6
8h Total transfusions (n)	27	21	17	22		11.0	9.7	14.1
8i Expected total transfusions (n)	33.2	34.0	32.7	30.3		15.8	13.5	14.4
8j Standardized Transfusion Ratio <sup>*6</sup>	0.81	0.62	0.52	0.73		0.69	0.71	1.00
Upper Confidence Limit (97.5%)	1.68	1.39	1.25	1.56		n/a	n/a	n/a
Lower Confidence Limit (2.5%)	0.43	0.31	0.24	0.38		n/a	n/a	n/a
8k P-value <sup>*7</sup>	0.648	0.267	0.153	0.463		n/a	n/a	n/a
<b>Hemoglobin-Medicare Claims <sup>*8</sup></b>								
8l Eligible hemodialysis (HD) patients (n) <sup>*8</sup>	106	101	103	101		42.8	33.1	36.3
<b>8m Hemoglobin categories among HD pts (% of 8l; sums to 100%)</b>								
< 10 g/dL	7.5	9.9	12.6	11.9		12.6	12.4	16.5
10-<11 g/dL	72.6	82.2	75.7	74.3		69.6	68.1	65.1
11-12 g/dL	19.8	7.9	11.7	13.9		17.4	19.2	18.1
> 12 g/dL	0.0	0.0	0.0	0.0		0.4	0.3	0.3
8n Eligible peritoneal dialysis (PD) patients (n) <sup>*8</sup>	0	1	0	9		4.5	4.1	3.3
<b>8o Hemoglobin categories among PD pts (% of 8n; sums to 100%)</b>								
< 10 g/dL	.	0.0	.	0.0		21.4	21.3	26.4
10-<11 g/dL	.	0.0	.	66.7		61.3	61.5	57.2
11-12 g/dL	.	100	.	33.3		16.7	16.4	15.7
> 12 g/dL	.	0.0	.	0.0		0.5	0.7	0.6

n/a = not applicable

[\*1] See Guide, Section XI.

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

[\*3] Includes those 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] Based on in-range values; see Guide for range values.

[\*6] Calculated as a ratio of observed transfusions to expected transfusions (8h to 8i); not shown if there are fewer than 10 patient-years at risk for transfusions.

[\*7] 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.

[\*8] Among ESA-treated dialysis patient with ESRD for 90+ days and 4 or more claims at this facility.

# Dialysis Facility Report for FY (FY) 2017

NKC RENTON KIDNEY CENTER State: WA Network: 16 CCN: 502508

**TABLE 9: Dialysis Adequacy<sup>\*1</sup>, May 2012-2015**

Measure Name	2012	2013	2014	2015	-	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
<b>Hemodialysis Adequacy</b>							<b>2015</b>	
9a Eligible HD patients (n)	148	168	170	181		82.7	70.4	79.2
9b Eligible HD patient-months (n) <sup>*3</sup>	992	1481	1514	1479		707.5	603.8	694.1
9c Average normalized protein catabolic rate (nPCR) <sup>*4</sup> (average of 9b)	1.1	1.1	1.1	1.1		1.0	1.0	0.9
9d nPCR Missing/Out of range (% of 9b)	9.8	6.3	3.6	3.8		23.7	22.3	29.1
9e Ultrafiltration Rate: Average <sup>*4</sup> (ml/kg/hr) (average of 9b)	5.7	5.3	4.8	4.7		6.9	7.3	8.1
9f Ultrafiltration Rate categories (% of 9b; sums to 100%)								
<=13 (ml/kg/hr)	85.7	88.0	91.5	92.0		62.8	61.6	55.6
>13 (ml/kg/hr)	1.7	2.6	1.5	1.6		5.1	6.1	7.9
Missing/Out of range	12.6	9.4	7.0	6.5		32.1	32.3	36.5
9g Eligible HD Kt/V patients (n) <sup>*5</sup>	139	159	161	166		75.2	63.7	74.9
9h Eligible HD Kt/V patient-months (n) <sup>*3 *5</sup>	925	1397	1438	1392		627.1	531.6	643.5
9i Average Kt/V <sup>*4</sup> (average of 9h)	1.7	1.7	1.7	1.7		1.7	1.7	1.6
9j Kt/V categories (% of 9h; sums to 100%)								
<1.2	1.5	2.8	2.4	2.9		2.6	2.7	3.2
1.2-<1.8	62.5	62.6	63.4	67.4		61.4	63.3	68.1
>=1.8	33.0	32.3	32.1	28.5		32.8	30.6	24.9
Missing/Out of range	3.0	2.4	2.1	1.2		3.3	3.4	3.8
<b>Peritoneal Dialysis Adequacy<sup>*6</sup></b>								
9k Eligible PD patients (n)	0	0	0	26		18.4	20.3	20.3
9l Eligible PD patient-months (n) <sup>*3</sup>	0	0	0	93		135.0	154.9	161.7
9m Average weekly Kt/V (average of 9l)		.	.	2.3		2.3	2.3	2.3
9n Weekly Kt/V categories (% of 9l; sums to 100%)								
<1.7		.	.	0.0		7.3	6.6	7.6
1.7-<2.5		.	.	81.7		61.2	60.4	59.8
>=2.5		.	.	17.2		24.2	27.2	24.4
Missing/Out of range		.	.	1.1		7.2	5.7	8.2
9o Average normalized protein catabolic rate (nPCR) <sup>*4</sup> (average of 9l)		.	.	0.8		0.8	0.8	0.8
9p nPCR Missing/Out of range (% of 9l)		.	.	23.7		79.4	77.6	80.5
<b>Adult Kt/V--Medicare Claims<sup>*7</sup></b>								
9q Eligible adult hemodialysis (HD) patients (n) <sup>*8</sup>	221	179	176	189		75.5	62.3	65.2
9r Eligible adult HD patient-months (n) <sup>*3</sup>	1330	1239	1203	1176		517.4	425.7	471.5
9s Kt/V categories among adult HD patients (% of 9r; sums to 100%)								
<1.2	2.3	2.4	2.2	3.7		2.1	2.5	2.5
1.2-<1.4	6.9	8.6	9.1	11.7		11.5	12.8	17.2
1.4-<1.6	23.8	22.6	21.5	23.7		24.8	26.8	29.6
1.6-<1.8	29.2	28.4	28.3	27.1		26.8	26.7	25.5
>= 1.8	32.4	32.4	34.1	28.8		32.2	28.7	23.1
Missing/Out of range/Not performed/Expired	5.5	5.6	4.7	4.8		2.6	2.5	2.0

(continued)

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**TABLE 9: Dialysis Adequacy<sup>\*1</sup>, May 2012-2015**

Measure Name	2012	2013	2014	2015	-	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
							<b>2015</b>	
9t Adult HD: Kt/V $\geq$ 1.2 (% of 9r) <sup>*5</sup>	92.3	92.0	93.1	91.4		95.3	95.0	95.4
9u Eligible adult peritoneal dialysis (PD) patients (n)	8	13	12	21		8.4	8.3	6.1
9v Eligible adult PD patient-months (n) <sup>*3</sup>	14	14	18	66		61.4	61.7	46.6
9w Kt/V categories among adult PD patients (% of 9v; sums to 100%)								
<1.7	50.0	0.0	5.6	0.0		5.6	6.0	7.5
1.7-<1.9	7.1	7.1	11.1	12.1		15.8	14.5	18.6
1.9-<2.2	28.6	7.1	5.6	34.8		30.3	29.6	28.2
2.2-<2.5	7.1	7.1	11.1	34.8		20.9	21.7	17.5
$\geq$ 2.5	0.0	0.0	5.6	9.1		22.1	24.2	23.1
Missing/Out of range/Not performed/Expired	7.1	78.6	61.1	9.1		5.3	4.1	5.1
9x Adult PD: Kt/V $\geq$ 1.7 (% of 9v) <sup>*9</sup>	42.9	21.4	33.3	90.9		89.2	89.9	87.4

n/a = not applicable.

\*1] See Guide, Section XII.

\*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] HD Kt/V summaries are restricted to patients who dialyze thrice weekly.

\*6] The PD Adequacy section uses the most recent value over a 4-month look-back period. Therefore, reporting for PD in this table begins with August 2012 which includes a look-back through May 2012.

\*7] Kt/V: K = dialyzer clearance of urea; t = dialysis time; V = patient's total body water. Based on the value code D5; Result of last Kt/V.

\*8] Patient-months reporting 2 or fewer, or 4 or more adult dialysis sessions per week were excluded from the HD Kt/V calculations.

\*9] Values calculated based only on Kt/V values reported in range.

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**TABLE 10: Mineral Metabolism <sup>\*1</sup>, May 2012-2015**

Measure Name	2012	2013	2014	2015	-	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
							<b>2015</b>	
10a Eligible patients (n) <sup>*3</sup>	148	168	170	206		94.2	81.5	86.4
10b Eligible patient-months (n) <sup>*4</sup>	995	1481	1514	1572		805.8	703.2	760.2
10c Average phosphorous <sup>*5</sup> (mg/dL) (average of 10b)	5.2	5.3	5.7	5.7		5.4	5.4	5.3
10d Phosphorous categories (% of 10b; sums to 100%)								
<3.5 mg/dL	8.4	9.7	8.6	6.2		7.6	7.8	8.7
3.5-4.5 mg/dL	22.6	24.2	21.6	18.6		23.1	23.8	24.3
4.6-5.5 mg/dL	28.2	23.6	22.9	25.3		26.8	27.3	27.8
5.6-7.0 mg/dL	21.7	24.7	24.8	26.7		22.9	22.7	21.0
>7.0 mg/dL	9.4	12.5	19.8	20.3		14.4	13.6	11.8
Missing/Out of range	9.5	5.3	2.4	2.8		5.2	4.9	6.3
10e Average calcium uncorrected <sup>*5</sup> (mg/dL) (average of 10b)	9.2	9.1	9.1	9.2		9.0	9.0	9.0
10f Calcium uncorrected categories (% of 10b; sums to 100%)								
<8.4 mg/dL	8.7	14.0	13.3	10.2		13.9	14.2	16.3
8.4-10.2 mg/dL	74.6	73.7	78.2	84.2		77.4	77.1	74.0
>10.2 mg/dL	7.1	6.9	6.1	2.8		3.5	3.7	3.2
Missing/Out of range	9.5	5.3	2.3	2.8		5.2	5.0	6.5

<sup>\*1</sup> See *Guide, Section XIII*.

<sup>\*2</sup> Values are shown for the average facility.

<sup>\*3</sup> Includes those who switch between HD and PD during the month and patients for whom modality is unknown.

<sup>\*4</sup> Patients may be counted up to 12 times per year.

<sup>\*5</sup> Based on in-range values; see *Guide* for range values.



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**TABLE 11: Vascular Access Information and Access-Related Infection<sup>\*1</sup>, 2012-2015**

Measure Name	2012	2013	2014	2015	-	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
<b>Vascular Access<sup>*3</sup></b>							<b>2015</b>	
11a Prevalent adult hemodialysis patient-months <sup>*4</sup> (n)	1027	1558	1582	1559		753.0	653.2	730.6
11b Vascular access type in use (% of 11a; sums to 100%)								
Arteriovenous fistula	68.8	71.8	71.3	74.5		74.2	72.4	65.6
Arteriovenous graft	23.2	20.6	19.5	15.7		12.7	13.8	18.7
Catheter	8.0	7.6	9.2	9.8		13.1	13.8	15.7
Other/Missing	0.0	0.0	0.0	0.0		0.0	0.0	0.0
11c Arteriovenous fistulae in place (% of 11a) <sup>*5</sup>	69.9	72.0	72.1	75.4		75.0	73.6	66.9
11d Catheter only >= 90 days (% of 11a) <sup>*6</sup>	2.5	2.2	1.6	2.2		8.0	8.3	9.9
<b>Vascular Access at First Treatment<sup>*3</sup></b>								
11e Incident adult hemodialysis patients (n)	17	38	35	40		17.2	15.6	17.4
11f Vascular access type in use (% of 11e; sums to 100%)								
Arteriovenous fistula	29.4	34.2	25.7	25.0		29.5	27.2	19.6
Arteriovenous graft	0.0	5.3	5.7	2.5		4.4	5.0	4.5
Catheter	70.6	60.5	68.6	72.5		66.0	67.8	75.8
Other/Missing	0.0	0.0	0.0	0.0		0.1	0.0	0.1
11g Arteriovenous fistulae in place (% of 11e) <sup>*5</sup>	29.4	34.2	25.7	30.0		31.4	29.6	22.3
<b>Infection: Peritoneal dialysis (PD)<sup>*3</sup></b>								
11h Eligible PD patients (n)	20	22	11	24		10.1	9.8	7.4
11i Eligible PD patient-months <sup>*4</sup>	27	26	16	71		69.5	69.4	53.3
11j PD catheter infection rate per 100 PD patient-months <sup>*7</sup>	3.70	3.85	6.25	2.82		2.78	2.34	2.49
11k P-value <sup>*8</sup> for 11n (compared to U.S. value) <sup>*9</sup>	0.571	0.552	0.369	0.531		n/a	n/a	n/a

n/a = not applicable

[\*1] See *Guide, Section XIV*.

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

[\*3] Vascular Access type is based on data reported in CROWNWeb as of May, 2012 so summaries for 2012 are not for a full calendar year. PD infection summaries are based on Medicare Dialysis claims.

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

[\*5] Includes all patients with 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 fistula or graft in place. Catheter is only access. Port access devices are reported as catheters for this project.

[\*7] The ICD-9 PD catheter infection code for PD patients is 996.68 which is effective from 5/1/2012-9/30/2015 and the ICD-10 PD catheter infection code for PD patients is T8571XA which is effective from 10/1/2015-12/31/2015.

[\*8] 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 chance.

[\*9] Compared to U.S. value for that year: 3.09 (2012), 3.05 (2013), 2.84 (2014), and 2.49 (2015).

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**TABLE 12: Comorbidities Reported on Medicare Claims for Medicare Dialysis Patients Treated as of December 31st of Each Year<sup>\*1</sup>, 2012-2015**

Measure Name	2012	2013	2014	2015	-	State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
							<b>2015</b>	
12a Medicare dialysis patients on 12/31 (n)	104	99	98	121		52.8	45.8	50.1
12b Comorbidity (% yes of 12a)								
<b>Infections</b>								
AIDS/HIV positive	0.0	1.0	0.0	0.8		0.6	0.5	1.8
Dialysis access-related	18.3	13.1	5.1	9.9		10.1	10.0	10.5
Hepatitis B	0.0	0.0	0.0	0.0		1.2	1.0	1.9
Hepatitis other	1.9	4.0	5.1	5.8		5.7	5.1	5.8
Metastatic	5.8	6.1	4.1	3.3		3.8	3.6	3.6
Pneumonia	5.8	1.0	5.1	4.1		5.7	5.3	5.9
Tuberculosis	0.0	0.0	0.0	0.8		0.5	0.5	0.5
Other	34.6	37.4	30.6	39.7		42.0	41.2	45.0
<b>Cardiovascular</b>								
Cardiac arrest	1.0	1.0	0.0	0.8		1.7	1.6	1.6
Cardiac dysrhythmia	23.1	16.2	27.6	25.6		34.6	34.4	36.7
Cerebrovascular disease	23.1	23.2	23.5	23.1		21.1	18.7	24.0
Congestive heart failure	35.6	38.4	46.9	43.0		47.4	45.9	51.2
Ischemic heart disease	32.7	31.3	33.7	31.4		42.8	41.8	48.6
Myocardial infarction	2.9	6.1	4.1	6.6		8.4	8.2	9.0
Peripheral vascular disease <sup>*3</sup>	40.4	34.3	40.8	41.3		39.7	37.5	42.0
<b>Other</b>								
Alcohol dependence	1.9	2.0	2.0	1.7		3.2	3.2	3.1
Anemia	1.9	2.0	4.1	3.3		5.7	5.8	9.1
Cancer	11.5	12.1	10.2	9.1		10.0	9.9	10.8
Chronic obstructive pulmonary disease	23.1	28.3	17.3	33.1		30.6	30.2	32.1
Diabetes	64.4	56.6	54.1	57.9		60.8	59.9	65.9
Drug dependence	2.9	8.1	9.2	12.4		5.2	5.5	2.9
Gastrointestinal tract bleeding	2.9	5.1	5.1	2.5		3.6	3.3	3.4
Hyperparathyroidism	98.1	96.0	96.9	98.3		92.0	88.4	88.1
12c Average number of comorbid conditions	4.3	4.2	4.3	4.5		4.8	4.6	5.0

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

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**TABLE 13: Facility Information <sup>\*1</sup>, 2015**

Measure Name	2015	- State <sup>*2</sup>	Network <sup>*2</sup>	U.S. <sup>*2</sup>
13a Organization	NORTHWEST KIDNEY CENTERS			
13b Ownership	Non-profit			
13c Initial Medicare certification date	02/28/1986			
13d Number of stations	32			
13e Services provided	Hemodialysis and Peritoneal Dialysis			
13f Shifts after 5:00 pm	Yes			
13g Dialyzer Reuse				
13h CMS Certification Number (CCN) included in this report	502508			
13i National Provider Identifier (NPI) <sup>*3</sup>	1922193564			
<b>Patient Placement</b>			<b>2015</b>	
13j Patients treated during year from AFS Form-2744 (n)	288	114.8	99.2	104.9
13k Transferred into facility (% of 13j)	27.8	18.3	16.5	15.1
13l Transferred out of facility (% of 13j)	19.4	17.7	15.8	14.9
13m Patients treated on 12/31 (n)	197	77.5	67.8	72.7
13n Medicare eligibility status (% of 13m; sums to 100% <sup>*4</sup> )				
Medicare	76.6	84.1	86.8	63.6
Medicare application pending	0.0	0.7	0.6	0.9
Non-Medicare	23.4	15.2	12.6	35.5
<b>Survey and Certification</b>				
13o Date of last survey	01/29/2016	n/a	n/a	n/a
13p Type of survey	Recertification	n/a	n/a	n/a
13q Compliance condition after survey	Unknown			
13r Number of CFC deficiencies cited	0	0.3	0.4	0.3
13s Number of Standard deficiencies cited	0	8.1	5.5	5.9

n/a = not applicable

<sup>[\*1]</sup> See *Guide, Section XVI*. Information based on data reported in CROWNWeb as of May, 2016. If missing, data were not available.

<sup>[\*2]</sup> Values are shown for the average facility.

<sup>[\*3]</sup> Information based on CROWNWeb data as of March 2016. If missing, data were not available.

<sup>[\*4]</sup> Values may not sum to exactly 100% because of unknown Medicare status.

<sup>[\*5]</sup> Data on this section are from the facility's latest survey since January 2009. If your facility has not been surveyed since January 2009, facility-level data on this table will be missing.