Data Dictionary for Quarterly Dialysis Facility Compare

Release Date: July 2014

This document provides the variable name, variable type, maximum length and a description for each column included in the downloadable databases available on the Dialysis Facility Compare (DFC) website. The measures are obtained using the methodology described in the *Guide to the Dialysis Facility Compare Report* available for download from the Methodology tab of the Dialysis Reports website (http://www.dialysisreports.org/pdf/esrd/public/DFCReportGuide.pdf). For each quality measure (Tables 2-8), a variable indicating the time period, patient count and data availability code (Table 9) are provided. Updates to the data dictionary are listed on page 2.

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Updates to Data Dictionary

DATE	REVISIONS
4/29/2013	Access, CSV, CSV (Revised) variable names added.
9/13/2013	Added transfusion table (new table 7)

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Table 1: Facility Identification Variables

Variable Name reported in the Access/CSV file	Variable Name reported in the CSV (Revised)	Туре	Max. Length	Description
PROVNUM	Provider Number	Varchar	50	Lists the numeric code used to identify the provider listed.
FACNAME	Facility Name	Varchar	80	Lists the name of the facility listed.
PHYSTATE	State	Char	2	Lists the alphabetic postal code used to identify the state that corresponds to the facility listed.
NETWORK	Network	Varchar	2	Lists the numeric code for the network in which facility participates.
PHYADDR1	Address Line 1	Varchar	60	Lists the first line of the address that corresponds to the facility listed.
PHY ADDR2	Address Line 2	Varchar	60	Lists the second line of the address that corresponds to the facility listed.
PHYCITY	City	Varchar	30	Lists the name of the city that corresponds to the facility listed.
PHYZIP	Zip	Varchar	5	Lists the full postal ZIP code that corresponds to the facility listed.
PHYCOUNTY	County	Varchar	60	Lists the name of the county that corresponds to the facility listed.
PHONENUM	Phone Number	Varchar	14	Lists the telephone number that corresponds to the facility listed.
OWNTYPE	Profit or Non-Profit	Varchar	50	Indicates if the dialysis facility's

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				operates as a for- profit or non-profit
CHAINYN	Chain Owned	Varchar	3	business. Indicates whether or not the facility is owned or managed by a chain organization.
CHAINNAM	Chain Organization	Varchar	50	Lists the name of the chain organization if applicable.
SHIFT	Late Shift	Bit (access)/text(CSV Rev)	5 (CSV Revised)	Lists whether or not the facility has a shift starting at 5:00 p.m. or later.
TOTSTAS	# of Dialysis Stations	int		Indicates the total number of dialysis stations at the dialysis facility.
HD	Offers in-center hemodialysis	Bit (access)/text(CSV Rev)	5 (CSV Revised)	Indicates whether the facility offers incenter hemodialysis.
PD	Offers in-center peritoneal dialysis	Bit (access)/text(CSV Rev)	5 (CSV Revised)	Indicates whether the facility offers incenter peritoneal dialysis.
HOMEHD	Offers home hemodialysis training.	Bit (access)/text(CSV Rev)	5 (CSV Revised)	Indicates whether the facility offers home hemodialysis training.
CERTDATE	Certification or Recertification Date	datetime		Lists the initial or recertification date for the facility listed. These facilities are certified if they pass inspection. Medicare or Medicaid only covers care provided by certified providers. Being certified is not the same as being accredited.

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Table 2: Adequacy of Dialysis

Variable Name	CSV (Revised) Label	Type	Max.	Description			
reported in the Access/CSV file	Name		Length				
Date_Claims	Claims Date	datetime		Lists the data collection period for claims-based summaries			
(1) Percentage of hem	odialysis (HD) patients wi	th URR G	REATER	than 65%			
URRG65_C	URR Data Availability Code	Varchar	50	Lists whether the facility had sufficient URR data available or the reason for why the data is not available.			
PURR_F	No. of HD patients with URR data	Varchar	250	Lists the number of hemodialysis patients included in the URR greater than or equal 65 percent summary (FACILITY).			
URRG65_F	Percentage of HD patients with URR >=65% (FACILITY)	Varchar	250	Lists the percentage of patients who had urea reduction ratio (URR) greater than or equal to 65 percent (FACILITY).			
URRG65_S	Percentage of HD patients with URR >=65% (STATE)	Varchar	250	Lists the percentage of hemodialysis patients who had urea reduction ratio (URR) greater than or equal to 65 percent (STATE).			
URRG65_U	Percent of HD Patients with URR >=65	Varchar	250	Lists the percentage of hemodialysis patients who had urea reduction ratio (URR) greater than or equal to 65 percent (US).			
` /	(2) Percentage of Adult hemodialysis (HD) patients with $Kt/V \ge 1.2$						
HDKTV12_C	Adult HD Kt/V data availability code	Varchar	50	Lists whether the facility had sufficient Adult HD Kt/V data available or the reason for why the data is not available.			
HDKTVPATS_F	Number of Adult HD patients with KT/V data	Varchar	250	Lists the number of Adult hemodialysis (HD) patients included in Kt/V greater than or equal to 1.2 summary			

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				(FACILITY).
HDKTVPM_F	Number of Adult HD patient-months with Kt/V data	Varchar	250	Lists the number of Adult hemodialysis (HD) patient-months included in Kt/V greater than or equal to 1.2 summary (FACILITY).
HDKTVPM12_F	Percentage of Adult HD Patients with Kt/V >=1.2	Varchar	250	Lists the percentage of Adult hemodialysis (HD) patients with Kt/V greater than or equal to 1.2 (FACILITY).
HDKTVPM12_S	Percentage of Adult HD patients with Kt/V>=1.2	Varchar	250	Lists the percentage of Adult hemodialysis (HD) patients with Kt/V greater than or equal to 1.2 (STATE).
HDKTVPM12_U	Percentage of Adult HD patients with Kt/V>=1.2	Varchar	250	Lists the percentage of Adult hemodialysis (HD) patients with Kt/V greater than or equal to 1.2 (US).
(3) Percentage of Adult	peritoneal dialysis (PD)	patients wi	ith $Kt/V \ge$	1.7
PDKTV17_C	Adult PD Kt/V data availability code	Varchar	50	Lists whether the facility had sufficient Adult PD Kt/V data available or the reason for why the data is not available.
PDPATS_F	Number of Adult PD patients with KT/V data	Varchar	250	Lists the number of Adult peritoneal dialysis (PD) patients included in Kt/V greater than or equal to 1.7 summary (FACILITY).
PDKTVPM_F	Number of Adult PD patient-months with Kt/V data	Varchar	250	Lists the number of Adult peritoneal dialysis (PD) patient-months included in Kt/V greater than or equal to 1.7 summary (FACILITY).
PDKTVPM17_F	Percentage of Adult PD PTS with Kt/V>=1.7	Varchar	250	Lists the percentage of Adult peritoneal dialysis (PD) patients with Kt/V greater than or equal to 1.7 (FACILITY).
PDKTVPM17_S	Percentage of Adult PD PTS with Kt/V>=1.7	Varchar	250	Lists the percentage of Adult peritoneal dialysis (PD) patients with Kt/V

				greater than or equal to 1.7 (STATE).
PDKTVPM17_U	Percentage of Adult PD PTS with Kt/V>=1.7	Varchar	250	Lists the percentage of Adult peritoneal dialysis (PD) patients with Kt/V greater than or equal to 1.7 (US).
(4) Percentage of Pedia	atric hemodialysis (HD)	patients wi	th Kt/V >	1.2
PHDKTV12_C	Pediatric HD Kt/V Data Availability Code	Varchar	50	Lists whether the facility had sufficient Pediatric HD Kt/V data available or the reason for why the data is not available.
PHDKTVpats_F	Number of Pediatric HD patients with Kt/V data	Varchar	250	Lists the number of Pediatric hemodialysis (HD) patients included in Kt/V greater than or equal to 1.2 summary (FACILITY).
PHDKTVPM_F	Number of Pediatric HD patient-months with KT/V data	Varchar	250	Lists the number of Pediatric hemodialysis (HD) patient-months included in Kt/V greater than or equal to 1.2 summary (FACILITY).
PHDKTVPM12_F	Percentage of Pediatric HD patents with Kt/V>=1.2	Varchar	250	Lists the percentage of Pediatric hemodialysis (HD) patients with Kt/V greater than or equal to 1.2 (FACILITY).
PHDKTVPM12_S	Percentage of Pediatric HD patients with Kt/V>=1.2	Varchar	250	Lists the percentage of Pediatric hemodialysis (HD) patients with Kt/V greater than or equal to 1.2 (STATE).
PHDKTVPM12_U	Percentage of Pediatric HD patients with Kt/V>=1.2	Varchar	250	Lists the percentage of Pediatric hemodialysis (HD) patients with Kt/V greater than or equal to 1.2 (US).

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Table 3: Adequacy of Anemia Management

Variable Name reported in the Access/CSV file	CSV (Revised) Label Name	Туре	Max. Length	Description
Date_Claims	Claims Date			Lists the data collection period for
HCDDD E	N 1 C	X7 1	250	claims-based summaries.
HGBRD_F	Number of	Varchar	250	Lists the number of patients
	Dialysis Patients			included in the hemoglobin (hgb)
	with Hgb data			greater than 12.0 g/dL summary (FACILITY).
(1) Percent of patie	ents with Hemoglobi	n (Hgb) I	LESS than	,
HGBL10_C	HGB<10 data	Varchar	50	Lists whether the facility had
_	availability code			sufficient hemoglobin (hgb) data
				available or the reason for why the
				data is not available.
HGBL10_F	Percentage of	Varchar	250	Lists the percentage of patients who
	Medicare patients			had average hemoglobin (hgb) less
	with Hgb <10 g/dL			than 10.0 g/dL (FACILITY).
HGBL10_S	Percentage of	Varchar	250	Lists the percentage of patients who
	patients with			had average hemoglobin (hgb) less
	Hgb<10 g/dL			than 10.0 g/dL.
HgbL10_U	Percentage of	Varchar	250	Lists the percentage of patients who
	patients with			had average hemoglobin (hgb) less
	Hgb<10 g/dL			than 10.0 g/dL (US).
	patients with Hemogl	obin (Hgb		ER than 12 g/dL
HGBG12_C	Hgb > 12 data	Varchar	50	Lists whether the facility had
	availability code			sufficient hemoglobin (hgb) data
				available or the reason for why the
				data is not available.
HGBG12_F	Percentage of	Varchar	250	Lists the percentage of patients who
	Medicare patients			had average hemoglobin (hgb)
	with Hgb>12 g/dL			greater than 12.0 g/dL (FACILITY).
HGBG12_S	Percentage of	Varchar	250	Lists the percentage of patients who
	patients with			had average hemoglobin (hgb)
	Hgb>12 g/dL			greater than 12.0 g/dL (STATE).
HGBG12_U	Percentage of	Varchar	250	Lists the percentage of patients who
	patients with			had average hemoglobin (hgb)
	Hgb>12 g/dL			greater than 12.0 g/dL (US).

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Table 4: Vascular Access (VA)

Variable Name reported in the Access/CSV file	CSV (Revised) Label Name	Туре	Max. Length	Description
Date_Claims	Claims Date	datetime		Lists the data collection period for
*******	(datetime)	**		claims-based summaries.
VAHDPAT_F	Number of Adult patients included in arterial venous fistula and catheter	Varchar	250	Lists the number of Adult patients included in arterial venous fistula and catheter summaries (FACILITY).
	summaries			(2122211)
VAHDPM_F	Number of Adult patient-months included in arterial venous fistula and catheter summaries	Varchar	250	Lists the number of Adult patient- months included in arterial venous fistula and catheter summaries (FACILITY).
(1) Percentage of p	patients with Arterio	venous Fis	tulae in pl	ace
	Arteriovenous	Varchar	50	Lists whether the facility had
VAVF_C	fistulae in place data availability code			sufficient arterial venous fistula data available or the reason for why the data is not available.
VAVF_F	Percentage of	Varchar	250	Lists the percentage of Adult
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	patients with	, arenar	200	patients who received treatment
	arteriovenous			through an arterial venous fistula
	fistulae in place			(FACILITY).
VAVF_S	Percentage of patients with arteriovenous fistulae in place	Varchar	250	Lists the percentage of Adult patients who received treatment through an arterial venous fistula (STATE).
VAVF_U	Percentage of patients with arteriovenous fistulae in place	Varchar	250	Lists the percentage of Adult patients who received treatment through an arterial venous fistula (US).
(2) Percentage of p	patients with Vascula	r Cathete	r in use foi	r 90 days or longer
VCG90_C	Vascular catheter data availability code	Varchar	50	Lists whether the facility had sufficient vascular catheter data available or the reason for why the data is not available.
VCG90_F	Percentage of patients with vascular catheter in use for 90 days or longer	Varchar	250	Lists the percentage of Adult patients who had a catheter (tube) left in a vein longer than 90 days for their regular hemodialysis treatments (FACILITY).
VCG90_S	Percentage of patients with	Varchar	250	Lists the percentage of Adult patients who had a catheter (tube)

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	vascular catheter in use for 90 days or longer			left in a vein longer than 90 days for their regular hemodialysis treatments (STATE).
VCG90_U	Percentage of patients with vascular catheter in use for 90 days or longer	Varchar	250	Lists the percentage of Adult patients who had a catheter (tube) left in a vein longer than 90 days for their regular hemodialysis treatments (US).

Table 5: Patient Survival: Standardized Mortality Ratio (SMR)

Variable Name reported in the	CSV (Revised) Label Name	Туре	Max. Length	Description
Access/CSV file				
DATE_SMR	SMR Date	datetime		Lists the data collection period for
				patient survival summary (SMR).
PTSURV_C	Patient Survival	Varchar	50	Lists whether the facility had
	data availability			sufficient patient survival data
	code			available or the reason for why the
				data is not available.
DFCMORTTEX	Patient Survival	Varchar	250	Patient survival CATEGORY
T	Category Text			(Better, Worse or As Expected).
RDSMZ_F	Number of	Varchar	250	Lists the number of patients
	Patients included			included in the facility's survival
	in survival			summary (FACILITY).
	summary			
SMRZ_F	Standardized	Varchar	250	Lists the facility's Standardized
CITY (Z. E.	Mortality Ratio	** 1	2.50	Mortality Ratio (FACILITY).
CHIMZ_F	SMR: Upper	Varchar	250	Lists the upper confident limit
	Confidence Limit			(97.5%) for Standardized Morality
CLOMZ_F	(97.5%) SMR: Lower	Varchar	250	Ratio (SMR). Lists the lower confident limit
CLOMZ_F	Confidence Limit	varchar	230	(2.5%) for Standardized Morality
	(2.5%)			Ratio (SMR).
PTSURVS1	Survival- Better	Varchar	250	Lists the number of facilities in the
TISORVSI	than expected	Varchar	230	State with patient deaths categorized
	инин охростои			as "Better than expected" (STATE).
PTSURVS2	Survival- As	Varchar	250	Lists the number of facilities in the
	expected			State with patient deaths categorized
				as "As expected" (STATE).
PTSURVS3	Survival- Worse	Varchar	250	Lists the number of facilities in the
	than expected			State with patient deaths categorized
				as "Worse than expected" (STATE).
PTSURVU1	Survival- Better	Varchar	250	Lists the number of facilities in the
	than expected			Nation with patient deaths
Mar. 2014				categorized as "Better than

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				expected" (US).
PTSURVU2	Survival- As	Varchar	250	Lists the number of facilities in the
	expected			Nation with patient deaths
				categorized as "As expected" (US).
PTSURVU3	Survival- Worse	Varchar	250	Lists the number of facilities in the
	than expected			Nation with patient deaths
				categorized as "Worse than
				expected" (US).

Table 6: Patient Hospitalization: Standardized Hospitalization Ratio (SHR) for Admissions

Variable Name	CSV (Revised)	Type	Max.	Description
reported in the	Label Name		Length	
Access/CSV file				
DATE_SHR	SHR Date	datetime		Lists the time period for patient
				hospitalization summary (SHR).
PTHOSP_C	Patient	Varchar	50	Lists whether the facility had
	Hospitalization			sufficient hospitalization data
	data availability			available or the reason for why the
	Code			data is not available.
DFCHOSPTEXT	Patient	Varchar	250	Patient hospitalization category.
	hospitalization			
	category text			
RDSHY4_F	Number of patients	Varchar	250	Lists the number of patients
	included in			included in the facility's
	hospitalization			hospitalization summary
	summary			(FACILITY).
SHRTY4_F	Standard	Varchar	250	Lists the facility's Standardized
	Hospitalization			Hospitalization Ratio (FACILITY).
	Ratio			
CHICHTAY4_F	SHR: Upper	Varchar	250	Lists the upper confident limit
	Confidence Limit			(97.5%) for Standardized
	(97.5%)			Hospitalization Ratio (SHR).
CLOCHTAY4_F	SHR: Lower	Varchar	250	Lists the lower confident limit
	Confidence Limit			(2.5%) for Standardized
	(2.5%)			Hospitalization Ratio (SHR).
PTHOSPS1	Hospitalizations-	Varchar	250	Lists the number of facilities in the
	Better than			State with patient hospitalizations
	expected			categorized as "Better than
				expected" (STATE).
PTHOSPS2	Hospitalizations-	Varchar	250	Lists the number of facilities in the
	As expected			State with patient hospitalizations
				categorized as "As expected"
				(STATE).

PTHOSPS3	Hospitalizations- Worse than expected	Varchar	250	Lists the number of facilities in the State with patient hospitalizations categorized as "Worse than expected" (STATE).
PTHOSPU1	Hospitalizations- Better than expected	Varchar	250	Lists the number of facilities in the Nation with patient hospitalizations categorized as "Better than expected" (US).
PTHOSPU2	Hospitalizations- As expected	Varchar	250	Lists the number of facilities in the Nation with patient hospitalizations categorized as "As expected" (US).
PTHOSPU3	Hospitalizations- Worse than expected	Varchar	250	Lists the number of facilities in the Nation with patient hospitalizations categorized as "Worse than expected" (US).

Table 7: Transfusions: Standardized Transfusion Ratio (STrR)

Variable Name reported in the Access/CSV file	CSV (Revised) Label Name	Туре	Max. Length	Description	
DATE_STrR	STrR Date	datetime		Lists the time period for patient transfusion summary (STrR).	
PTTRAN_C	Patient Transfusion data availability Code	Varchar	50	Lists whether the facility had sufficient transfusion data available or the reason for why the data is not available.	
DFCSTrRTEXT	Patient Transfusion category text	Varchar	250	Patient transfusion category.	
PATSTR_F	Number of patients included in transfusion summary	Varchar	250	Lists the number of patients included in the facility's transfusion summary (FACILITY).	
STrR_F	Standard Transfusion Ratio			Lists the facility's Standardized Transfusion Ratio (FACILITY).	
STrRUCL_F	STRr: Upper Confidence Limit (97.5%)	Varchar	250	Lists the upper confident limit (97.5%) for Standardized Transfusion Ratio (STRr).	
STrRLCL_F	STRr: Lower Confidence Limit (2.5%)	Varchar	250	Lists the lower confident limit (2.5%) for Standardized Transfusion Ratio (STRr).	
PTSTRS1	Transfusions- Better than expected	Varchar	250	Lists the number of facilities in the State with patient transfusions categorized as "Better than	

				expected" (STATE).
PTSTRS2	Transfusions- As expected	Varchar	250	Lists the number of facilities in the State with patient transfusions categorized as "As expected" (STATE).
PTSTRS3	Transfusions- Worse than expected	Varchar	250	Lists the number of facilities in the State with patient transfusions categorized as "Worse than expected" (STATE).
PTSTRU1	Transfusions- Better than expected	Varchar	250	Lists the number of facilities in the Nation with patient transfusions categorized as "Better than expected" (US).
PTSTRU2	Transfusions- As expected	Varchar	250	Lists the number of facilities in the Nation with patient transfusions categorized as "As expected" (US).
PTSTRU3	Transfusions- Worse than expected	Varchar	250	Lists the number of facilities in the Nation with patient transfusions categorized as "Worse than expected" (US).

Table 8: Mineral and Bone Disorder (CROWNWeb)

Variable Name reported in the Access/CSV file	CSV (Revised) Label Name	Type	Max. Length	Description
Date_CW	Mineral and Bone Disorder Date	Char	19	Time period for Mineral and Bone Disorder measures.
(1) Percent of patie	ents with Hypercalce	mia (sei	rum calciu	m > 10.2 mg/dL
Hypercalpats_f	Number of patients in hypercalcemia summary	Num	8	Lists the number of patients included in the facility's hypercalcemia summary (FACILITY).
Hypercalpm_f	Number of patient- months in hypercalcemia summary	Num	8	Lists the number of patient-months included in the facility's hypercalcemia summary (FACILITY).
Hypercal_C	Hypercalcemia Data Availability Code	Char	3	Lists whether the facility had sufficient hypercalcemia data available or the reason for why the data is not available.
Hypercal_F	Percentage of Adult patients with hypercalcemia	Num	8	Lists the percentage of Adult patients with hypercalcemia (serum calcium greater than 10.2 mg/dL) (FACILITY).

	(serum calcium greater than 10.2 mg/dL)			
Hypercal_S	Percentage of Adult patients with hypercalcemia (serum calcium greater than 10.2 mg/dL)	Num	8	Lists the percentage of Adult patients with Hypercalcemia (serum calcium greater than 10.2 mg/dL) (STATE).
Hypercal_U	Percentage of Adult patients with hypercalcemia (serum calcium greater than 10.2 mg/dL)	Num	8	Lists the percentage of Adult patients with Hypercalcemia (serum calcium greater than 10.2 mg/dL) (US).
(2) Percent of patie	ents with Serum pho	sphorus	concenti	rations
Serumphospats_F	Number of patients in Serum phosphorus summary.	Num	8	Lists the number of patients included in the facility's serum phosphorus summary (FACILITY).
Serumphospm_F	Number of patient- months in Serum phosphorus summary.	Num	8	Lists the number of patient-months included in the facility's serum phosphorus summary (FACILITY).
Serumphos_C	Serum phosphorus Data Availability Code.	Char	3	Lists whether the facility had sufficient serum phosphorus data available or the reason for why the data is not available.
Serumphos1_F	Percentage of Adult patients with serum phosphorus less than 3.5 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus less than 3.5 mg/dL (FACILITY).
Serumphos2_F	Percentage of Adult patients with serum phosphorus between 3.5-4.5 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus between 3.5-4.5 mg/dL (FACILITY).
Serumphos3_F	Percentage of Adult patients with serum phosphorus between 4.6-5.5 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus between 4.6-5.5 mg/dL (FACILITY).
Serumphos4_F	Percentage of Adult patients with serum phosphorus between 5.6-7.0 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus between 5.6-7.0 mg/dL (FACILITY).

Serumphos5_F	Percentage of	Num	8	Lists the percentage of Adult patients
-	Adult patients with serum phosphorus greater than 7.0 mg/dL			with serum phosphorus greater than 7.0 mg/dL (FACILITY).
Serumphos1_S	Percentage of Adult patients with serum phosphorus less than 3.5 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus less than 3.5 mg/dL (STATE).
Serumphos2_S	Percentage of Adult patients with serum phosphorus between 3.5-4.5 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus between 3.5-4.5 mg/dL (STATE).
Serumphos3_S	Percentage of Adult patients with serum phosphorus between 4.6-5.5 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus between 4.6-5.5 mg/dL (STATE).
Serumphos4_S	Percentage of Adult patients with serum phosphorus between 5.6-7.0 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus between 5.6-7.0 mg/dL (STATE).
Serumphos5_S	Percentage of Adult patients with serum phosphorus greater than 7.0 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus greater than 7.0 mg/dL (STATE).
Serumphos1_U	Percentage of Adult patients with serum phosphorus less than 3.5 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus less than 3.5 mg/dL (US).
Serumphos2_U	Percentage of Adult patients with serum phosphorus between 3.5-4.5 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus between 3.5-4.5 mg/dL (US).
Serumphos3_U	Percentage of Adult patients with serum phosphorus between 4.6-5.5 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus between 4.6-5.5 mg/dL (US).
Serumphos4_U	Percentage of Adult patients with	Num	8	Lists the percentage of Adult patients with serum phosphorus between 5.6-

	serum phosphorus between 5.6-7.0 mg/dL			7.0 mg/dL (US).
Serumphos5_U	Percentage of Adult patients with serum phosphorus greater than 7.0 mg/dL	Num	8	Lists the percentage of Adult patients with serum phosphorus greater than 7.0 mg/dL (US).

Table 9: Data Availability Codes

Code "001" indicates data is available and therefore there is not a footnote associated with this data availability code.

	Data Availability Code	Footnote Number	Footnote Text	Measure
Data Available	"001"	n/a	n/a	All Measures
Data Not Available	"199"	1	The number of patients is too small to report. Call the facility to discuss this quality measure.	All Measures
	"201"	2	Data not reported – Call the facility to discuss this quality measure.	All Measures
	"255"	3	CMS determined that the percentage was not accurate.	All Measures
	"258"	4	The facility was not open for the entire reporting period.	All Measures
	"256"	5	The facility does not provide hemodialysis.	URR, HD Kt/V, and Vascular Access Measures
	"254"	6	The facility does not provide hemodialysis to pediatric patients.	Pediatric Kt/V
	"257"	7	The facility does not provide peritoneal dialysis.	PD Kt/V

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