

# **Data Dictionary for Quarterly Dialysis Facility Compare**

**Release Date: October 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.

## 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)

**Table 1: Facility Identification Variables**

<b>Variable Name reported in the Access/CSV file</b>	<b>Variable Name reported in the CSV (Revised)</b>	<b>Type</b>	<b>Max. Length</b>	<b>Description</b>
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 operates as a for-

				profit or non-profit business.
CHAINYN	Chain Owned	Varchar	3	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 in-center hemodialysis.
PD	Offers in-center peritoneal dialysis	Bit (access)/text(CSV Rev)	5 (CSV Revised)	Indicates whether the facility offers in-center 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.

**Table 2: Adequacy of Dialysis**

Variable Name reported in the Access/CSV file	CSV (Revised) Label Name	Type	Max. Length	Description
Date_Claims	Claims Date	datetime		Lists the data collection period for claims-based summaries
<b>(1) Percentage of hemodialysis (HD) patients with URR GREATER than 65%</b>				
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 $\geq 65\%$ (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 $\geq 65\%$ (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 $\geq 65$	Varchar	250	Lists the percentage of hemodialysis patients who had urea reduction ratio (URR) greater than or equal to 65 percent (US).
<b>(2) Percentage of Adult hemodialysis (HD) patients with Kt/V <math>\geq 1.2</math></b>				
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

				(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 $\geq 1.2$	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 $\geq 1.2$	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 $\geq 1.2$	Varchar	250	Lists the percentage of Adult hemodialysis (HD) patients with Kt/V greater than or equal to 1.2 (US).
<b>(3) Percentage of Adult peritoneal dialysis (PD) patients with Kt/V <math>\geq 1.7</math></b>				
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 $\geq 1.7$	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 $\geq 1.7$	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 $\geq$ 1.7	Varchar	250	Lists the percentage of Adult peritoneal dialysis (PD) patients with Kt/V greater than or equal to 1.7 (US).
<b>(4) Percentage of Pediatric hemodialysis (HD) patients with Kt/V <math>\geq</math> 1.2</b>				
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 $\geq$ 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 $\geq$ 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 $\geq$ 1.2	Varchar	250	Lists the percentage of Pediatric hemodialysis (HD) patients with Kt/V greater than or equal to 1.2 (US).

**Table 3: Adequacy of Anemia Management**

Variable Name reported in the Access/CSV file	CSV (Revised) Label Name	Type	Max. Length	Description
Date_Claims	Claims Date			Lists the data collection period for claims-based summaries.
HGBRD_F	Number of Dialysis Patients with Hgb data	Varchar	250	Lists the number of patients included in the hemoglobin (hgb) greater than 12.0 g/dL summary (FACILITY).
<b>(1) Percent of patients with Hemoglobin (Hgb) LESS than 10 g/dL</b>				
HGBL10_C	HGB<10 data availability code	Varchar	50	Lists whether the facility had sufficient hemoglobin (hgb) data available or the reason for why the data is not available.
HGBL10_F	Percentage of Medicare patients with Hgb <10 g/dL	Varchar	250	Lists the percentage of patients who had average hemoglobin (hgb) less than 10.0 g/dL (FACILITY).
HGBL10_S	Percentage of patients with Hgb<10 g/dL	Varchar	250	Lists the percentage of patients who had average hemoglobin (hgb) less than 10.0 g/dL.
HgbL10_U	Percentage of patients with Hgb<10 g/dL	Varchar	250	Lists the percentage of patients who had average hemoglobin (hgb) less than 10.0 g/dL (US).
<b>(2) Percentage of patients with Hemoglobin (Hgb) GREATER than 12 g/dL</b>				
HGBG12_C	Hgb > 12 data availability code	Varchar	50	Lists whether the facility had sufficient hemoglobin (hgb) data available or the reason for why the data is not available.
HGBG12_F	Percentage of Medicare patients with Hgb>12 g/dL	Varchar	250	Lists the percentage of patients who had average hemoglobin (hgb) greater than 12.0 g/dL (FACILITY).
HGBG12_S	Percentage of patients with Hgb>12 g/dL	Varchar	250	Lists the percentage of patients who had average hemoglobin (hgb) greater than 12.0 g/dL (STATE).
HGBG12_U	Percentage of patients with Hgb>12 g/dL	Varchar	250	Lists the percentage of patients who had average hemoglobin (hgb) greater than 12.0 g/dL (US).



**Table 4: Vascular Access (VA)**

<b>Variable Name reported in the Access/CSV file</b>	<b>CSV (Revised) Label Name</b>	<b>Type</b>	<b>Max. Length</b>	<b>Description</b>
Date_Claims	Claims Date (datetime)	datetime		Lists the data collection period for claims-based summaries.
VAHDPAT_F	Number of Adult patients included in arterial venous fistula and catheter summaries	Varchar	250	Lists the number of Adult patients included in arterial venous fistula and catheter summaries (FACILITY).
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).
<b>(1) Percentage of patients with Arteriovenous Fistulae in place</b>				
VAVF_C	Arteriovenous fistulae in place data availability code	Varchar	50	Lists whether the facility had sufficient arterial venous fistula data available or the reason for why the data is not available.
VAVF_F	Percentage of patients with arteriovenous fistulae in place	Varchar	250	Lists the percentage of Adult patients who received treatment through an arterial venous fistula (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).
<b>(2) Percentage of patients with Vascular Catheter in use for 90 days or longer</b>				
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)

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

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

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

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

<b>Variable Name reported in the Access/CSV file</b>	<b>CSV (Revised) Label Name</b>	<b>Type</b>	<b>Max. Length</b>	<b>Description</b>
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	Varchar	250	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.
<b>(1) Percent of patients with Hypercalcemia (serum calcium &gt; 10.2 mg/dL)</b>				
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).
<b>(2) Percent of patients with Serum phosphorus concentrations</b>				
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 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 (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.

	<b>Data Availability Code</b>	<b>Footnote Number</b>	<b>Footnote Text</b>	<b>Measure</b>
<b>Data Available</b>	"001"	n/a	n/a	All Measures
<b>Data Not Available</b>	"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