Delivering Quality Care and Innovation Where It Matters Most

DaVita puts its resources toward improving results for some of the sickest patients in American healthcare

DENVER, Oct. 3, 2018 /PRNewswire/ -- DaVita Inc.(NYSE: DVA), a health care services provider of kidney care, clinical research and care to the chronically ill, today acknowledged its collective achievements in improving clinical outcomes and research so far in 2018.

"Delivering differential care for medically-complex patient populations is a core competency at DaVita," saidAllen R. Nissenson, M.D., FACP, chief medical officer for DaVita Kidney Care. "We've made great strides in consistently providing quality patient care and impactful research this year, and we look forward to building on this success."

DaVita® Health Solutions

DaVita Health Solutions, a subsidiary of DaVita Inc., delivers house calls and post-acute care programs to help manage the nation's most high-risk patients—or Most Vulnerable Patients (MVPs)—under at-risk arrangements with payer and risk-bearing entities. The company recently partnered with a large regional health plan to help manage its MVPs who initially had:

- Four or more chronic conditions per patient
- 800 emergency department visits per 1,000 patients
- 650 hospital admits per 1,000 patients

The program served approximately 7,000 patients in partnership with over 600 local primary care physicians, specialists and extended care teams, including family members, caregivers, hospitals, skilled nursing facilities and home care agencies.

By the end of year one, DaVita Health Solutions made a positive impact:

- 10-15 percent fewer emergency room visits
- 35-40 percent fewer hospitalizations
- 15-20 percent lower cost of care
- 91 percent patient satisfaction rating

To learn more about DaVita Health Solutions program and results, download thecase study.

DaVita Kidney Care

This year, the Centers for Medicare & Medicaid Services (CMS) released results for its two clinical quality programs for the kidney care industry, each of which indicates DaVita Kidney Care as a clinical quality leader.

Quality Incentive Program Results

CMS' end stage renal disease (ESRD) Quality Incentive Program (QIP) results showed DaVita's was one of the best clinical quality providers. The entire kidney care community improved key clinical outcome metrics this year, including:

- **Central venous catheters**, a common but least desirable form of blood access for dialysis treatments,**were reduced by 18 percent.**
- **Infection rates decreased by 14 percent**. ESRD patients have impaired immune systems as well as co-morbid conditions, such as diabetes, that makes them particularly susceptible to infections.
- **Dialysis adequacy**, the measure that tells clinicians how well dialysis is working to remove waste products from the blood, was **improved by 5 percent.**

Five-Star Quality Rating System (Five-Star) Results

DaVita's focus on helping improve patients' health and quality of life is demonstrated in this year'sFive-Star ratings, where the company has more three, four and five star centers than it has ever had in the history of the program. The results mark DaVita's best quality performance in the program to date.

The broader kidney care community has also continued to improve with an increase in the number of dialysis centers receiving a three-, four- or five-star quality rating by 10 percent since 2016. Other meaningful improvements have been demonstrated in

publicly reported clinical quality measures, including:

- 3 percent improvement in dialysis adequacy, which measures how well dialysis removes waste from the blood.
- 8 percent improvement in bloodstream infections, which are one of the leading causes of hospitalizations among dialysis patients.

DaVita Clinical Research

DaVita Clinical Research (DCR), the research arm of DaVita that informs clinical care and outcomes through retrospective research. DCR also delivers new therapies with a renal research site network that assists pharmaceutical and medical device companies in the design, recruitment and completion of clinical trials. DCR has furthered nephrology practice and contributed to its body of knowledge by publishing these research results in 2018.

Printed Manuscripts

- Effects of Oral Nutritional Supplements on Mortality, Missed Dialysis Treatments, and Nutritional Markers in Hemodialysis Patients. *J Ren Nutr*. 2018;28(3):191-6. Epub 2017/12/10.

  DCR analysis of DaVita pilot program to provide ONS to in-center hemodialysis patients with serum albumin ≤ 3.5 g/dL; demonstrated beneficial effects of ONS in reducing mortality.

- The Precision of Standardized Hospitalization, Readmission, and Mortality Ratios for Dialysis Facilities.*Am J Kidney Dis*. 2018;71(2):291-4. Epub 2017/11/23.

  DCR analysis to assess the precision of standardized ratios (SHR, SMR, SRR) as applied to dialysis facilities: results demonstrate that, as currently calculated, standardized ratios are highly imprecise, limiting their utility for comparing dialysis facility performance.

- Dialysate temperature of 36 degrees C: association with clinical outcomes.*J Nephrol*. 2018;31(1):129-36. Epub 2016/12/22.

  DCR study assessing whether standardized dialysate temperature of 36C was associated with improved clinical outcomes compared to the default temperature of 37C: results showed that rates of death, hospitalization, missed treatments and intradialytic hypotension were not significantly different between groups.

- Vocational activity and health insurance type among patients with end-stage renal disease: association with outcomes.*J Nephrol*. 2018;31(4):577-84. Epub 2018/02/09.

  DCR study showing that vocational activity and, separately, commercial insurance were independently associated with better clinical and quality of life outcomes compared to other vocational and insurance status categories.
- Serum-to-dialysate potassium gradient and its association with short-term outcomes in hemodialysis patients.*Nephrol Dial Transplant*. 2018;33(7):1207-14. Epub 2017/10/11.

  High serum to dialysate potassium gradient at the start of dialysis leads to rapid lowering of serum potassium. In this study, higher potassium gradient was shown to be independently associated with greater risk for all-cause hospitalization and ED visits.

- Cluster-Randomized Trial of Devices to Prevent Catheter-Related Bloodstream Infection *J Am Soc Nephrol*. 2018;29(4):1336-43. Epub 2018/02/24.

  Prospective, cluster-randomized, open-label trial showed that, compared to Tego hemodialysis connectors with Curos disinfecting caps, ClearGuard HD antimicrobial barrier caps significantly lowered the rate of catheter-related BSIs in patients undergoing dialysis using CVCs.

- Anemia and mortality in patients with nondialysis-dependent chronic kidney disease.*BMC Nephrol*. 2018;19(1):135. Epub 2018/06/13.

  DCR study evaluating contemporary use of erythropoiesis-stimulating agents in patients with pre-dialysis CKD: ESA use in pre-dialysis CKD patients was extremely rare and disproportionately among older, sicker patients who had high rates of death and cardiovascular events.

Conference Publications

- Pharmacokinetics, Safety, and Tolerability of Thrice-Weekly Dosing of Cinacalcet in Hemodialysis Patients with Secondary Hyperparathyroidism (SHPT). Poster presented at 2018 National Kidney Foundation Spring Clinical Meetings. April 10-14, 2018; Austin, TX.

  Phase I, open-label, multiple dose study to assess the pharmacokinetics, safety and tolerability of thrice-weekly cinacalcet in hemodialysis patients with secondary hyperparathyroidism; study results suggested that thrice weekly administration was safe and effective and may therefore offer an alternative to current clinical practice.

About DaVita Inc.
DaVita Inc., a Fortune 500® company, is the parent company of DaVita Kidney Care and DaVita Medical Group. DaVita Kidney Care is a leading provider of kidney care in the United States, delivering dialysis services to patients with chronic kidney failure and end stage renal disease. As of June 30, 2018, DaVita Kidney Care operated or provided administrative services at 2,580 outpatient dialysis centers located in the United States serving approximately 201,000 patients. The company also operated 253 outpatient dialysis centers located in 10 countries outside the United States. DaVita Medical Group manages and operates medical groups and affiliated physician networks in California, Colorado, Florida, Nevada, New Mexico and Washington in its pursuit to deliver excellent-quality health care in a dignified and compassionate manner. DaVita Medical Group's teammates, employed clinicians and affiliated clinicians provided care for approximately 1.7 million patients. For more information, please visit DaVita.com/About.

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