

Improving dialysis care quality reduces health care utilization and improves patient outcomes.

Hospital admissions are a key cost driver in the U.S. health system and often represent fragmented care. This is especially true for patients with end-stage renal disease (ESRD), who are among the most complex and costly Medicare beneficiaries. Advances in dialysis care have led to reductions in health care utilization and costs, as well as improved patient survival.

Patients receiving dialysis are spending less time in the hospital.

- Between 2007 and 2017, hospitalization rates fell over 14 percent for patients receiving dialysis (see Figure 1).¹
- Patients receiving dialysis in 2017 spent an average of 2.5 fewer days in the hospital per year than patients in 2007 (see Figure 2).¹
- From 2009 to 2017, all-cause hospitalizations decreased by 13 percent for patients receiving dialysis, and admissions for circulatory diseases fell by 12 percent.¹
- Hospitalizations due to vascular access infections fell by 54.6 percent from 2007 to 2016.²

Reduced hospitalizations have saved taxpayers an estimated 761 million in Medicare expenditures since 2010.¹

Figure 2: Hospital Days for Patients with ESRD

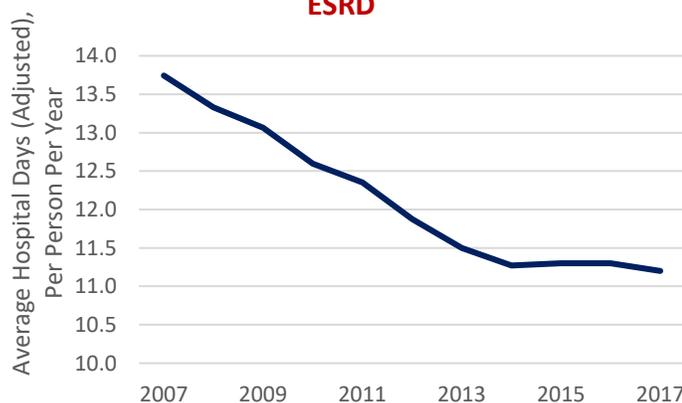
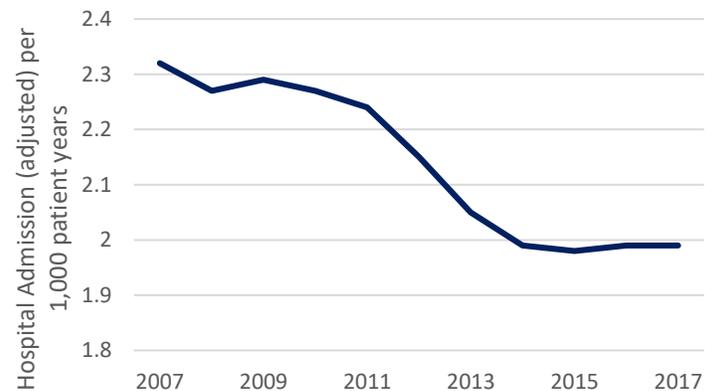


Figure 1: Hospital Admissions For Dialysis Patients



Improved dialysis care has led to increased survival for patients with ESRD.

From 2007 to 2017, the annual mortality rate has decreased 19 percent for patients receiving dialysis.¹

About Kidney Care Partners

Kidney Care Partners (KCP) is a coalition of more than 30 organizations, comprised of patient advocates, dialysis professionals, care providers, researchers, and manufacturers, dedicated to working together to improve quality of care for individuals with Chronic Kidney Disease (CKD). Go to <https://kidneycarepartners.com/> for more information.

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¹ United States Renal Data System. 2019 USRDS annual data report: Overview of kidney disease in the United States. National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 2019.

² United States Renal Data System. 2018 USRDS annual data report: Epidemiology of kidney disease in the United States. National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 2018.

The data reported here have been supplied by the United States Renal Data System (USRDS). The interpretation and reporting of these data are the responsibility of the author(s) and in no way should be seen as an official policy or interpretation of the U.S. government.