

**FIRST-YEAR POST-DIALYSIS-INITIATION COSTS FOR MEDICARE INCIDENT HEMODIALYSIS PATIENTS FROM 1995 to 2005: TREND ANALYSIS BY SURVIVAL AND MORTALITY SUBGROUPS.** LW Mau, H Guo, J Liu, TJ Arneson, A Ishani, DT Gilbertson, AJ Collins. Chronic Disease Research Group, Minneapolis

This study aimed to examine trends of first-year medical costs for Medicare incident hemodialysis HD patients and compare costs between those who survived and those who died during the first year.

The study population included all patients aged  $\geq 67$  years at dialysis initiation and covered by Medicare between January 1, 1995, and December 31, 2005. The study cohort was subdivided into survival and mortality subgroups, defined as patients who survived or died within the full first 12 months. One-year post-dialysis-initiation Medicare allowable costs for each incident HD patient were calculated and adjusted by Medicare Price Indices for inflation with 2006 quarter 4 as the reference. The first year cost trend was assessed and the cost was compared between the survival and mortality groups.

Numbers of Medicare incident HD patients aged  $\geq 67$  years increased from 19,044 in 1995 and 31,796 in 2005. In 2005, 56.5% of patients survived; 36.5% died (the other 7% underwent transplant or were lost follow-up). First year post-dialysis-initiation costs increased from \$81,977 in 1995 to \$113,073 in 2005, an increase of 37.9% (Figure 1); but it was relatively stable after inflation adjustment (Figure 2). The annualized mean cost for the mortality group was about twice that for the survival group.

The first-year post-dialysis-initiation costs increased significantly, but it was relative stable over time after inflation adjustment. The cost before death was substantial.

Figure 1.

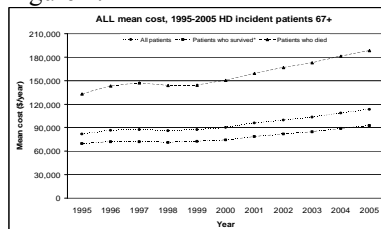


Figure 2.

