



DCL
Kidney Care

2025

Annual REPORT



www.dclkidneycare.org



Message From the CEO

As we look back on 2025, I want to thank each of you for the dedication, professionalism, and compassion you bring to DCL every day. The past year required resilience and adaptability, and because of you, DCL in its 38th year, continued to serve our patients and community with strength and purpose.

In 2025 there was no shortage of challenges facing our industry and more specifically, DCL. The strain of rising prices impacted DCL through rising labor and supply costs. When supply costs increase more than what our payments from Medicare increase, it creates pressure to find cost savings without sacrificing our high quality of care. DCL certainly felt the impact of staffing challenges and increased contract labor that comes with delivering complex care in a demanding environment. In June, our Northwest facility water room shutdown halted dialysis services temporarily. However, through a series of solutions, we resumed services in a limited fashion and became fully operational again in October. Then there is **EPIC...!** In August, we began our journey to implement Epic as our new EMR. While it's currently a challenging process, it promises to be a significant victory for DCL in 2026.

Although the challenges presented significant difficulties, they were manageable. Our team consistently demonstrates resilience by prioritizing solutions rather than dwelling on obstacles, which is exactly what we did. There were so many accomplishments in 2025 at DCL despite the challenges we faced. These accomplishments were not accidental, but the product of disciplined operations, thoughtful cost management, and teams committed to doing the right thing for patients.

Accomplishments in 2025:

Compliance: The year started with a significant change in CMS requirements for medications included in the dialysis bundle payment. As of January 1, 2025, DCL has been required to provide phosphate binders at no charge to our patients with Medicare, Medicare Advantage, and VA insurance. This transition affected all areas of our business and required a multidisciplinary effort to ensure that our patients received the appropriate medications and that these medications were billed properly. Also, our outpatient facilities and home program demonstrated strong performance in patient CVC management, adequacy, hospitalizations, readmissions, and infection rates, reflecting the dedication and commitment of team members throughout DCL.

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Message From the CEO

In addition, all our outpatient facilities and home program achieved CMS Quality Improvement Performance (QIP) scores that meet or exceed Medicare standards, meaning no payment penalties for 2026. Also in 2025, our hospital team successfully participated in CHI-St. Elizabeth's hospital Joint Commission survey along with our Northwest facility successfully completed their state re-accreditation survey and both surveys were completed deficiency free! Finally, our outpatient facilities and home program received the Qsource ESRD Network Golden Awards in Flu Fighter and Respiratory Shield recognizing facilities going above and beyond to protect patient health and improve care outcomes.

Accountability: By the end of 2025 DCL converted to dry acid at all units. This transition to dry acid was very important to DCL because it significantly lowered our acid costs and eliminated our reliance on expensive liquid acid. We focused our efforts on lowering the administrative costs for printing and developed a new relationship with a vendor to consolidate our business services. This initiative, on its own, has resulted in substantial cost savings exceeding 20%. Although DCL faced considerable challenges throughout 2025, the organization maintained strong financial performance. Notably, during this period, DCL also developed its inaugural investment policy, which received approval from the Board of Directors.

Relationships: In March, our Home program opened their new skilled dialysis space at Ambassador-Lincoln through the support of state grant funds, we expanded our ability to treat up to 8 patients. In April, we held DCL's first Annual Meeting, gathering everyone to celebrate our company achievements and recognizing our people who were awarded DCL's first C.A.R.E. awards. Our Kidney Care Management (KCM) program reached its highest census, supporting 149 participants in addition to expanding our relationships with community partners: Blue Stem, Asian Community Center, Urban Indian Health, and the Malone Center.

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Message From the CEO

Excellence: In August, DCL formally signed an agreement with Bryan Health to implement Epic as our new EMR. This was the result of several years of persistence working with Bryan for DCL to have the opportunity to have an EMR that is widely considered the gold standard in healthcare. In November, our Hospital team implemented an innovative night-shift program aimed at eliminating most of the on-call hours. In December our Home program completed the CMS ETC model program, which started in 2021 and aimed to grow home patient census and patient transplants. The Home program achieved positive performance improvement each year of the program. Our Home program also achieved its highest patient census in 2025, with 26% of its patients on the transplant list and 7 patients receiving transplants in 2025. There are several other instances of success and celebrations DCL experienced in 2025, but these are just some examples of the impressive work our dedicated team achieves every day at DCL. As we shift our focus to 2026, there are many opportunities that lie ahead for us as we evolve our mission and intentionally position DCL for long-term success in kidney care.

Looking Ahead to 2026:

Compliance: In our industry there is no shortage of regulatory standards ensuring that what we do and how we do it is done correctly. The standard of always being ready for a state survey can feel overwhelming, however when steps are taken day by day, it seems more manageable. We remain committed to ensuring that the care we deliver is provided in full compliance with all relevant standards and regulations. Epic will have tools built in to give us insight into trends and patterns, which we can use to support our patients by focusing on limiting hospitalizations and readmissions.

Accountability: As a non-profit healthcare provider at the core of our mission is to care for and support those living with kidney disease regardless of their ability to pay for our services. A mission with great importance does not come without intense focus on ensuring our resources are used in an efficient manner so that DCL can continue to be trusted to care for people for years to come. We will continue to focus on exploring efficiencies in how we deliver and support our patients and KCM participants. In addition, the cost of employee benefits continues to grow at an accelerated rate, so we will ensure that we know what benefits are most valued by our people, which will be key to maintaining those benefits at rates that are affordable. We will be asking for your input so your voice can be heard and play a part in deciding what benefits we provide.

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Message From the CEO

Relationships: Through KCM, DCL will continue to invest in education, and early-stage kidney disease support meeting people earlier in their CKD journey and addressing long-standing gaps in awareness and access across our community. As DCL evolves into a full-service kidney care company, we will advance our participation in value-based care partnerships, ensuring we are effectively supporting those with chronic kidney disease. We're investing in our people through new training, career ladder programs, and free CEU opportunities to help them reach their potential.

Excellence: The wait will soon be over when we implement Epic on June 1st and the countless hours so many have dedicated to helping build our Epic-Beans platform will become a reality. The functionality Epic offers will undoubtedly provide DCL with many operational and administrative efficiencies, in addition to providing holistic, coordinated clinical care. While this project has been challenging and at times difficult, DCL will have the valuable opportunity to implement an EMR, the gold standard in healthcare, for which we are grateful.

Beyond 2026: DCL's role will continue to evolve. The future of kidney care is not limited to traditional acute & outpatient dialysis—it includes education, prevention, and coordinated support across the continuum of chronic kidney disease. Our goal is to ensure DCL remains a trusted, independent leader in kidney care for our community for decades to come.

I am deeply grateful for the work you do and the commitment you show, especially in the face of challenge. 2025 tested us, but it also demonstrated our resilience and our shared belief in DCL's mission. Together, we will continue building an organization that serves patients, supports its people, and adapts thoughtfully to a changing healthcare environment.

When we lead with **Care**, hold ourselves **Accountable**, build strong **Relationships**, and pursue **Excellence**, DCL creates lasting impact for our patients, our community, and each other.

All the best,

A handwritten signature in blue ink, appearing to read "Scott Butterfield".

Scott Butterfield

Employee Retention and Development

In support of DCL's 2025 organizational goal of improving staff retention and development, focused efforts have been made to strengthen the onboarding and professional growth of clinical staff. During 2025, DCL developed and implemented a structured first-year clinical roadmap designed to provide clear training expectations, role-specific competency timelines, and ongoing support for both newly hired staff and their assigned preceptors.

This roadmap enhances the onboarding experience by promoting consistency in training, improving clinical confidence, and facilitating successful transition to independent practice within our specialized dialysis setting. By providing additional structure and mentorship during the first year of employment, this initiative supports long-term staff engagement and contributes to workforce stability.

In addition to these implemented strategies, DCL continues to advance preceptor development initiatives. These efforts are focused on equipping experienced staff with the tools and resources necessary to effectively mentor new team members, support skill development, and foster a culture of continuous learning.

Collectively, these initiatives are intended to improve staff satisfaction, support retention efforts, and maintain high standards of patient care across all service lines. Ongoing investment in workforce development is expected to positively impact clinical quality outcomes, including continuity of care, treatment adherence, and performance within QAPI and CMS quality metrics.

85

In 2025, DCL's total workforce remained relatively stable, with 85 employees compared to 88 in 2024 (a decrease of 3 employees, or -3.4%)

27

Hiring activity increased, with 27 new employees added in 2025 versus 19 in 2024 (+8 hires, +42.1%), indicating continued investment in staffing capacity and pipeline development

41%

Employees with more than five years of experience remained steady at 41% in both years, reflecting a consistent experienced core across the organization

76%

Retention dipped slightly from 78% in 2024 to 76% in 2025 (-2 percentage points), suggesting an opportunity to further strengthen onboarding, engagement, and retention strategies as hiring increased

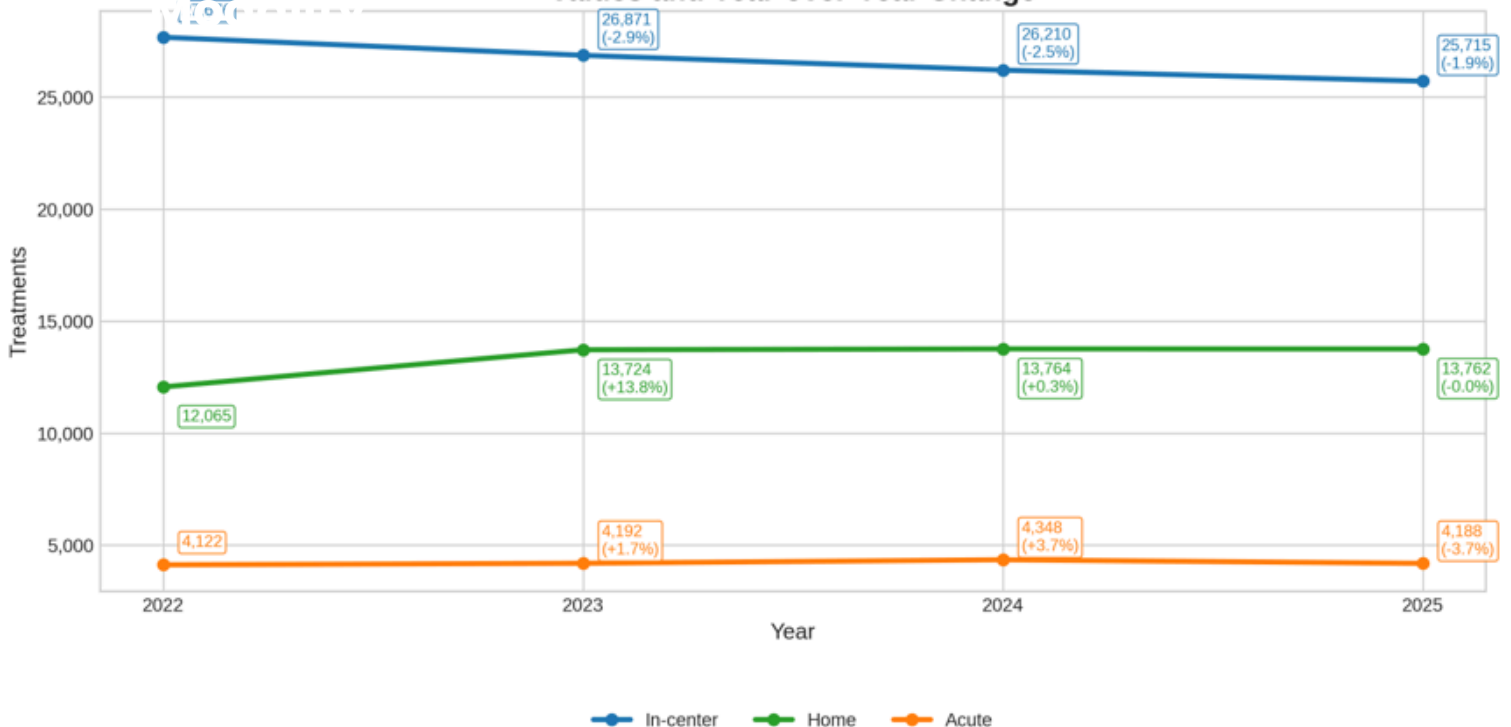
Treatment Trends and 2026 Outlook

From 2022 through 2025, DCL maintained a stable overall treatment base, with modest year-to-year variation driven primarily by changes in treatment mix rather than underlying demand. Total treatments peaked in 2023 and declined slightly in 2024 and 2025, reflecting broader dialysis industry trends rather than a loss of market relevance or access.

The most significant trend over this period was a continued shift in modality mix. In-center hemodialysis treatments declined steadily each year, while home dialysis volumes increased from 2022 to 2023 and then remained essentially flat through 2025, demonstrating sustained patient engagement and clinical appropriateness. Acute dialysis volumes remained relatively stable across all four years, indicating consistent hospital-based demand.

Looking ahead to 2026, DCL expects overall treatment volumes to remain stable, with continued gradual shifts in modality mix rather than material growth or decline. Strategic focus will center on maintaining reliable in-center access, supporting appropriate home dialysis utilization, and sustaining workforce and financial stability amid ongoing cost and labor pressures.

DCL Dialysis Treatment Trends by Modality (2022–2025)
Values and Year-over-Year Change



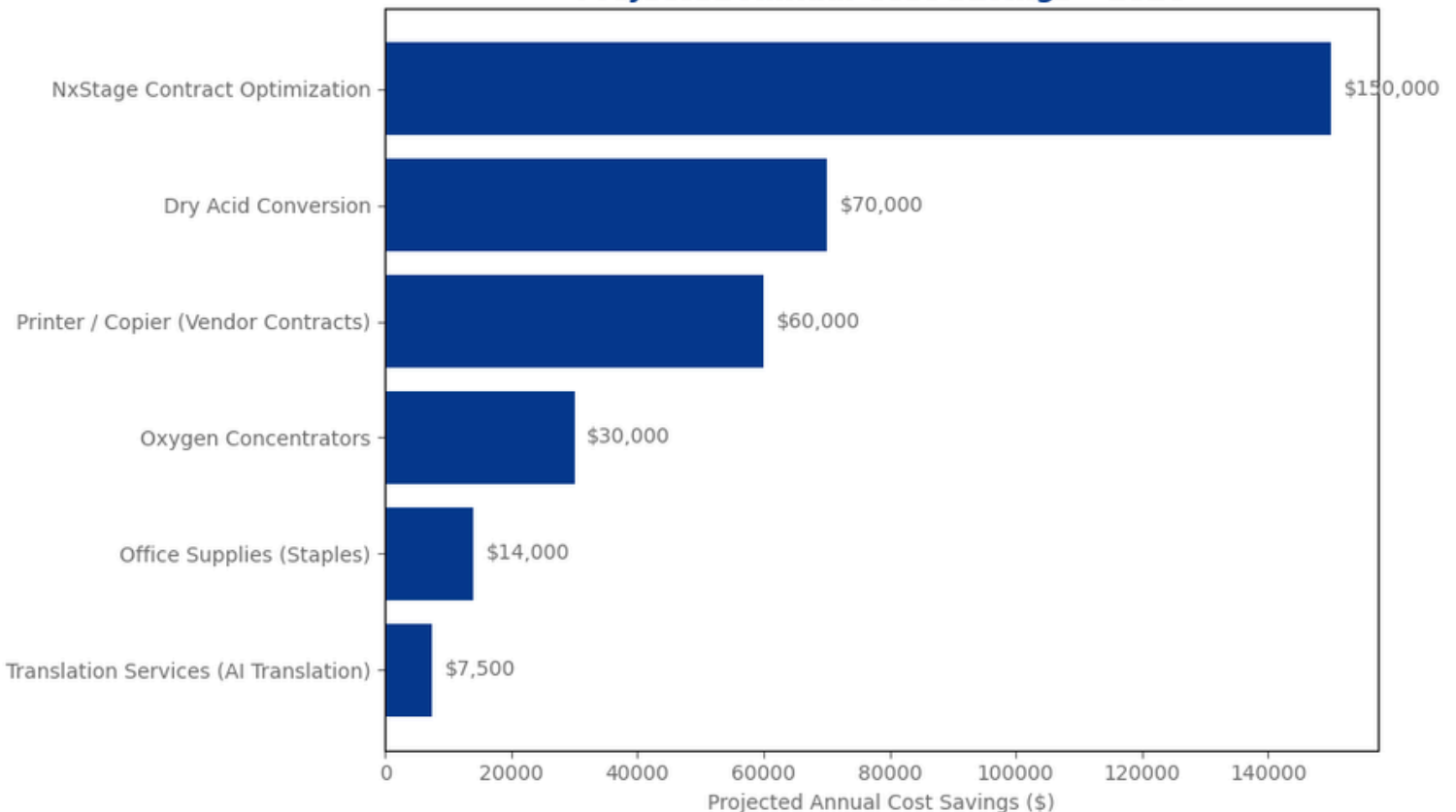
Operational Cost Stewardship: 2025 Results and 2026 Outlook

Throughout 2025, DCL implemented targeted initiatives to reduce costs while maintaining high standards of quality, safety, and patient care. These efforts focused on utilization oversight, vendor alignment, and standardizing equipment and supplies across the organization rather than relying on short-term reductions.

Initiatives such as AI-enabled translation services, transitioning to more cost-effective vendor contracts, converting to dry acid, and standardizing oxygen concentrators addressed key cost drivers, reduced variation, and generated meaningful, recurring savings.

Building on this strong foundation, DCL will carry these disciplined practices forward into 2026. As the organization moves into the coming year, focus will remain on sustainable cost-stewardship strategies—including leveraging our group purchasing organization, strengthening contract oversight, expanding standardization, and pursuing bulk purchasing and proactive service agreements—to support long-term financial stability while preserving the quality, safety, and reliability of patient care.

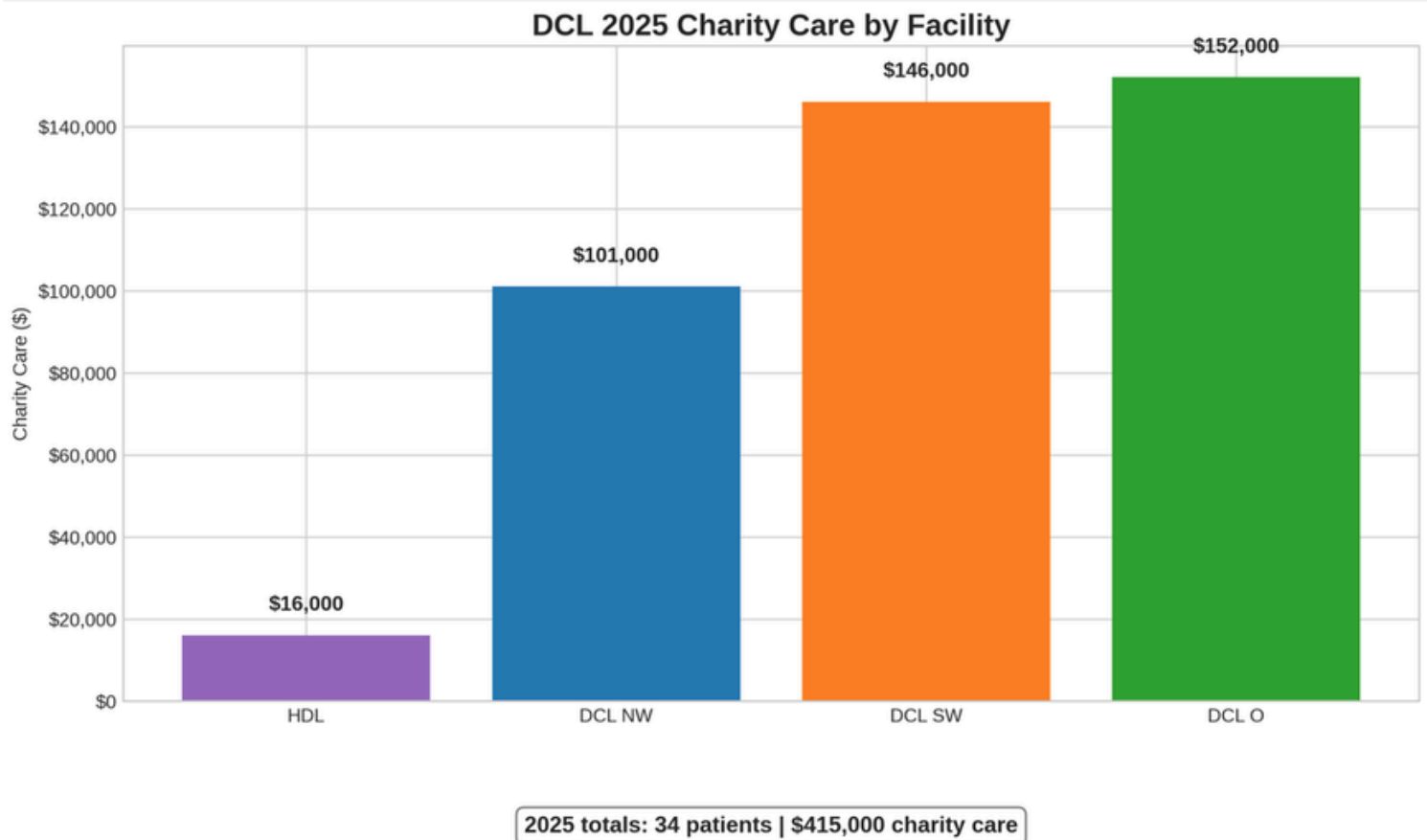
Projected Annual Cost Savings - 2026



Coordinated Financial and Social Work Support for Patients

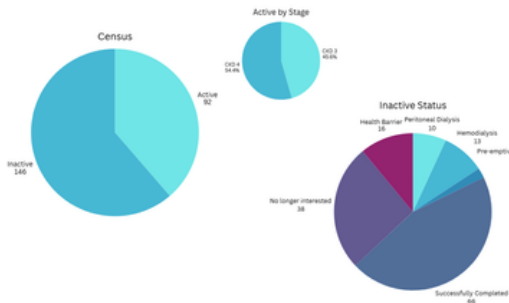
DCL is deeply committed to supporting patients who are uninsured, underinsured, or experiencing financial hardship. Our mission is to ensure that no one faces barriers to receiving quality dialysis care due to financial challenges. To accomplish this, we offer financial assistance based on income levels, which are assessed according to federal poverty guidelines.

Our Finance and Social Work teams work closely together to make sure every patient is aware of the support options available to them. They do an outstanding job guiding individuals through the charity care application process, providing hands-on help at each step. This collaborative approach not only makes it easier for patients to understand their eligibility but also ensures that all necessary paperwork is completed smoothly and efficiently.



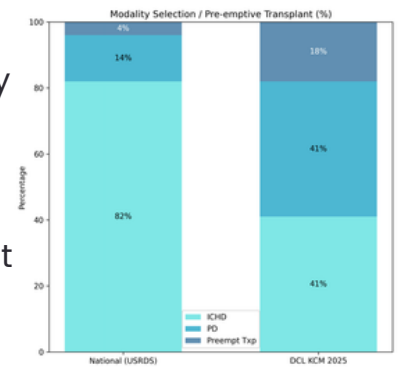
CKD Community Education & Support

The Kidney Care Management (KCM) program demonstrated strong performance in 2025 across participant completion, dialysis readiness, and optimal start outcomes, consistently outperforming national benchmarks. Collectively, these results underscore the KCM program’s impact in delivering proactive, well-coordinated kidney care that supports high completion rates, safer dialysis starts, informed modality choice, and improved transitions across the kidney care continuum.

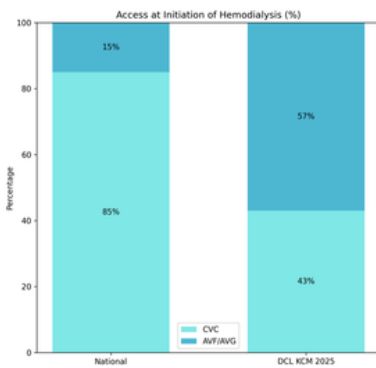


KCM served a total of 238 participants, with 66 individuals successfully completing the program, representing the largest share of participants exiting active status. This high completion volume reflects effective longitudinal engagement and the program’s ability to guide patients through the full care management pathway, while additional transitions aligned with appropriate clinical progression to dialysis or transplant.

KCM participants showed marked improvement in preparation for kidney replacement therapy compared to national norms. Modality selection shifted meaningfully toward patient-centered and home-based options, with peritoneal dialysis and in-center hemodialysis equally selected (41% each) in 2025, alongside a substantial increase in pre-emptive transplant (18%), far exceeding national averages.



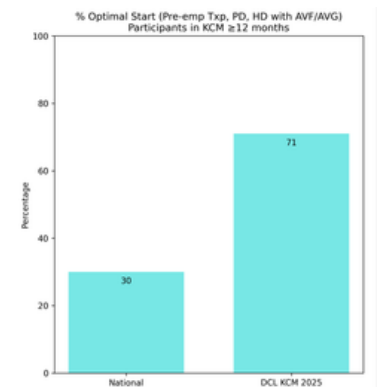
Source: United States Renal Data System (USRDS), 2024 Annual Data Report: Epidemiology of Kidney Disease in the United States.



Source: United States Renal Data System (USRDS), 2024 Annual Data Report: Epidemiology of Kidney Disease in the United States, National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases.

Dialysis access planning also improved year over year, with 57% of KCM participants initiating hemodialysis using an AV fistula or graft in 2025, compared to 15% nationally, reducing reliance on higher-risk catheter starts.

These coordinated efforts translated into strong optimal start outcomes—defined as pre-emptive transplant, peritoneal dialysis, or hemodialysis with mature AV access—with 100% of eligible participants achieving an optimal start in 2024 and 71% in 2025, compared to 30% nationally.



Source: United States Renal Data System (USRDS), 2024 Annual Data Report: Epidemiology of Kidney Disease in the United States, National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases.



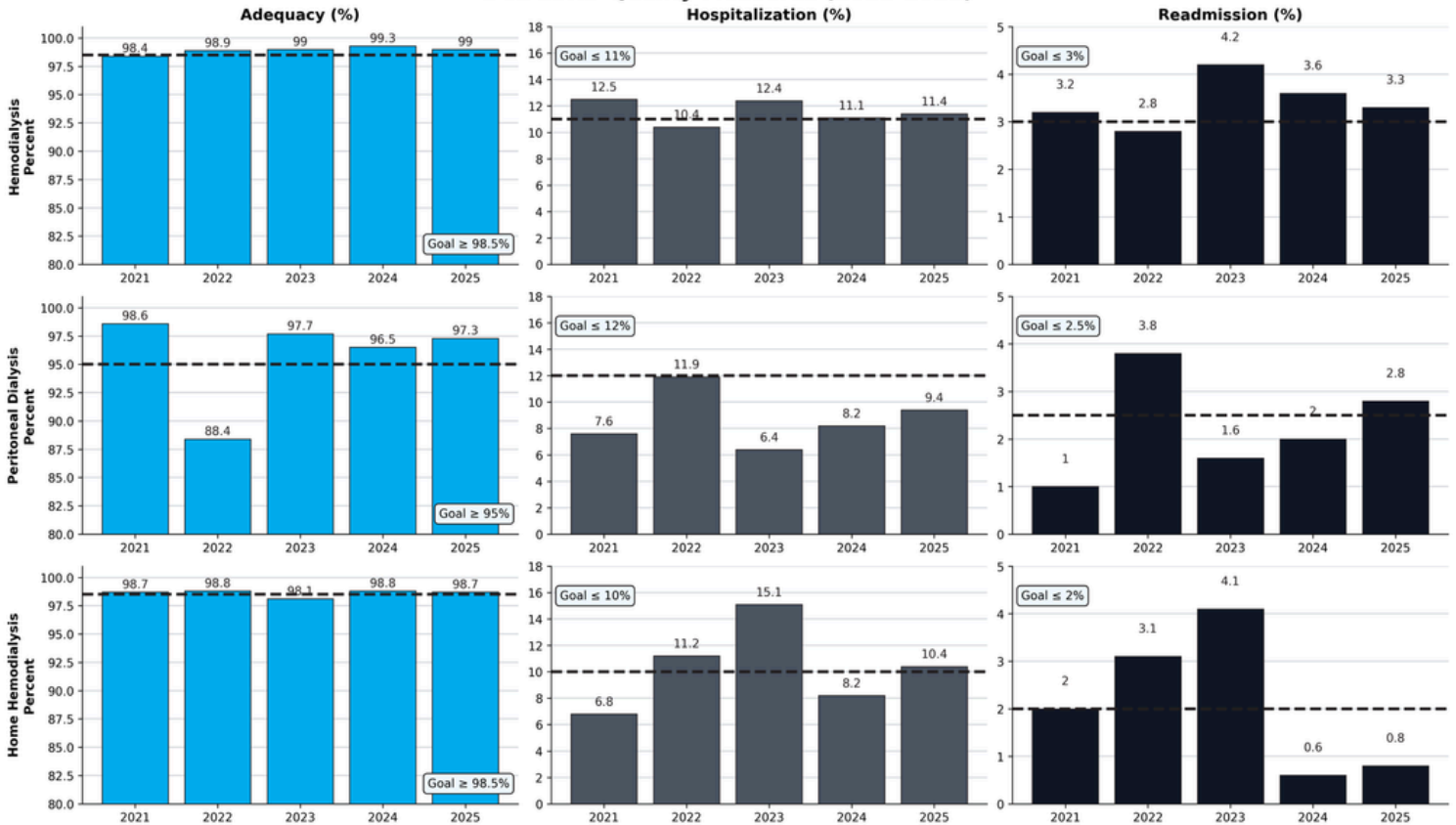
Quality in Clinical Metrics: Reducing Hospitalizations & Readmissions

In 2025, DCL launched a company-wide initiative to help reduce patient hospitalizations and readmissions by improving communication and collaboration across all departments. Nursing, providers, dietitians, and social workers are working together to identify both medical and social factors that may increase a patient's risk for returning to the hospital.

As part of this effort, our Social Work team now completes a Post-Hospitalization Review with patients after they are discharged from the hospital. This helps identify any barriers—such as transportation, medication access, or home support needs—that could make it difficult for patients to continue treatment safely in the outpatient setting.

By addressing these challenges early and connecting patients with available resources, we aim to support safer transitions back to dialysis and help keep our patients healthy and out of the hospital.

DCL ESRD Quality Measures (2021-2025)

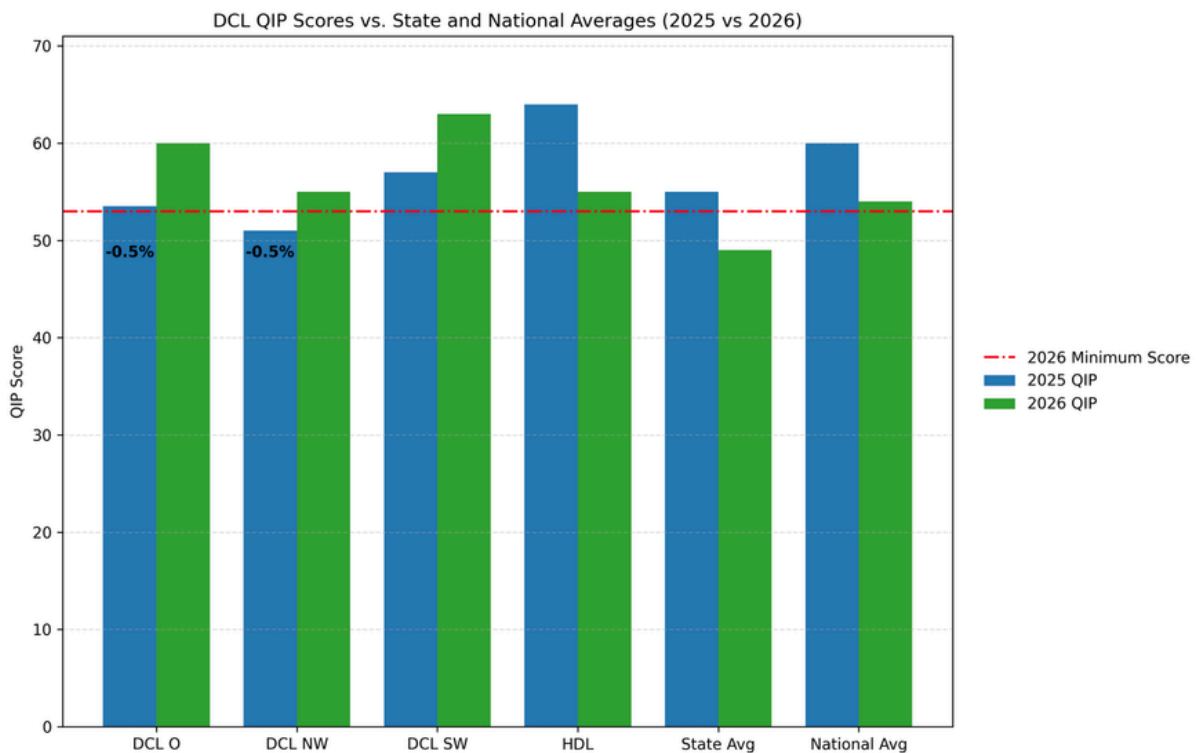


Quality Incentive Program (QIP)



DCL demonstrated meaningful improvement in Quality Incentive Program (QIP) performance from 2025 to 2026, with notable gains across all facilities. In 2025, two DCL facilities experienced modest payment reductions (-0.5%) due to QIP scores below the minimum threshold. By contrast, all DCL facilities exceeded the minimum QIP score in 2026, resulting in no payment reductions across the organization.

Facility-level performance improved substantially year over year. DCL O increased its QIP score from 53.5 in 2025 to 60 in 2026, and DCL NW improved from 51 to 55, both moving from below-threshold performance to scores exceeding the 2026 minimum. DCL SW and HDL also demonstrated strong performance in both years, with further improvement in 2026.



When compared to benchmarks, DCL's 2026 results were strong relative to both state and national averages. In 2026, the state average declined to 49 and the national average to 54, while all DCL facilities met or exceeded these benchmarks. Several locations performed at or above the national average, reinforcing DCL's commitment to quality, consistency, and patient-centered care.

Overall, the elimination of QIP payment reductions in 2026 reflects effective quality improvement efforts, operational focus, and clinical engagement across DCL. These results position the organization favorably relative to peers and demonstrate continued progress in delivering high-quality dialysis care.

Commitment to C.A.R.E.

At DCL we believe that our commitment to C.A.R.E. (Commitment, Accountability, Relationships, and Excellence) is fundamental to our mission of providing high-quality kidney care to the Lincoln community. This commitment is not just a set of principles; it is the cornerstone of our daily operations and the foundation of the trust we build with our patients and their families.

Compliance: Adhering to all policies, procedures, and regulations is crucial for ensuring the safety and quality of care we provide. By maintaining strict compliance, we protect our patients, staff, and the integrity of our services. This dedication to following best practices and legal standards ensures that our patients receive the most reliable and effective treatments available.

Accountability: Taking responsibility for our actions and their outcomes is crucial in maintaining the highest standards of care. By being accountable, we ensure that our practices are transparent, our mistakes are corrected promptly, and our patients can trust in the reliability and integrity of our services.

Relationships: Building positive and respectful interactions with patients, colleagues, and stakeholders is essential for creating a supportive and compassionate care environment. Strong relationships foster collaboration, enhance communication, and ensure that every patient feels valued and understood.

Excellence: Striving for excellence in all aspects of our work drives us to continuously improve and innovate. By staying informed about the latest advancements in dialysis treatment and kidney care, we ensure that our patients benefit from the most effective and up-to-date care available.







Froggy981

47m

Congrats LAURYN, this week's winner of Workplace Rewards! She scored a whole goodie bag of prizes including lunch from daVinci's for her whole Dialysis Center of Lincoln crew!

Make your nomination to be our next Workplace Rewards winner: froggy981.com/2025/12/30/workplace-rewards/

We're the best weekend crew ever 🥰🥰

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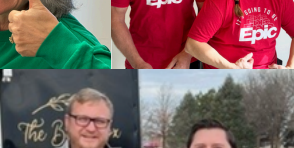
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