



December 4, 2012

Joseph Martin, Executive Director  
Pennsylvania Health Care Cost Containment Council  
225 Market Street, Suite 400  
Harrisburg PA 17101

Dear Mr. Martin,

We have received The Hospital Performance Report for 2011. We appreciate the opportunity to review and comment on this data. The report indicates that our risk-adjusted mortality and length of stay were not statistically different than expected for the DRGs reported, with the exception of Colorectal procedures, Congestive Heart Failure and Hypertension and Fainting. We have reviewed all fourteen cases and have identified the following characteristics which contribute to this statistical difference:

**Colorectal procedures (3 of 46 expired)**

- 2 of 3 had a do-not-resuscitate order
- 1 of 3 was 79 years old
- 2 of 3 were 90 years old
- 3 of 3 had hemicolectomy with diagnosis of colon malignancy
- 3 of 3 had co-morbid conditions including CHF (2), acute renal failure, anemia (3), and atrial fibrillation (2)

**Congestive Heart Failure (10 of 106 expired)**

- 8 of 10 had a do-not-resuscitate order
- 2 of 9 patients were transferred from skilled nursing facilities
- 9 of 10 patients were admitted via Emergency Department
- 2 of 10 were age 70 – 78
- 5 of 10 were age 82 - 88
- 3 of 10 were age 90 - 95
- 10 of 10 had co-morbid conditions including atrial fibrillation (3), acute renal failure (3), anemia (3), chronic kidney failure (5), valvular disorder (4), electrolyte imbalance (3), thyroid disease 3), diabetes (5),

**Hypertension and Fainting (1 of 2 expired)**

- 59 y/o was transferred from a skilled nursing facility and cause of death was lymphoma

Nason appreciates the opportunity to provide comment on our clinical outcomes. The information from this report will be utilized in our continuous quality improvement efforts.

Sincerely,

A handwritten signature in black ink that reads 'Garrett W. Hoover'.

Garrett W. Hoover, MA, MHA, FACHE  
President/CEO