



Central & Northeastern
Pennsylvania

HOSPITAL PERFORMANCE REPORT

16 Common Medical Conditions and Surgical Procedures • 2012 Data



Pennsylvania Health Care Cost Containment Council
December 2013



About PHC4

The Pennsylvania Health Care Cost Containment Council (PHC4) is an independent state agency charged with collecting, analyzing, and reporting information that can be used to improve the quality and restrain the cost of health care in the state. It was created in the mid-1980s when Pennsylvania businesses and labor unions, in collaboration with other key stakeholders, joined forces to enact market-oriented health care reforms. As a result of their years of effort, the General Assembly passed legislation (Act 89 of 1986) creating PHC4.

The primary goal is to empower purchasers of health care benefits, such as businesses and labor unions, as well as other stakeholders, with information they can use to improve quality and restrain costs. Nearly 100 organizations and individuals annually utilize PHC4's special requests process to access and use data. More than 840,000 public reports on patient treatment results are downloaded from the PHC4 website annually. Today, PHC4 is a recognized national leader in public health care reporting.

It is governed by a 25-member board of directors representing business, labor, consumers, health care providers, insurers, and state government.

Additional Information on the PHC4 Website

Hospitals may have commented on this report. Comments are available on the PHC4 website at www.phc4.org or by request.

Technical information about the methodology and the calculations used for this report is detailed in a supplement, the *Technical Notes*, which is accessible from the website.

Hospital specific data details for each of the three regional versions of this report are available in a collective format, as **Downloadable Data Sets**, which can be accessed from the website.

Scan this Quick Response Code with your smartphone (using a QR code reader app) or visit www.phc4.org to learn more about PHC4.



Table of Contents

Key Findings	2
Understanding this Report	6
Medical Conditions and Surgical Procedures	
Abnormal Heartbeat	12
Chest Pain	14
Chronic Obstructive Pulmonary Disease (COPD)	16
Colorectal Procedures.....	18
Congestive Heart Failure (CHF).....	20
Diabetes – Medical Management	22
Gallbladder Removal – Laparoscopic	24
Gallbladder Removal – Open	26
Heart Attack – Medical Management	28
Hypotension and Fainting	30
Kidney and Urinary Tract Infections	32
Kidney Failure – Acute	34
Pneumonia – Aspiration	36
Pneumonia – Infectious	38
Septicemia	40
Stroke	42
Medicare and Medicaid Payments – 2011 Statewide Data	44



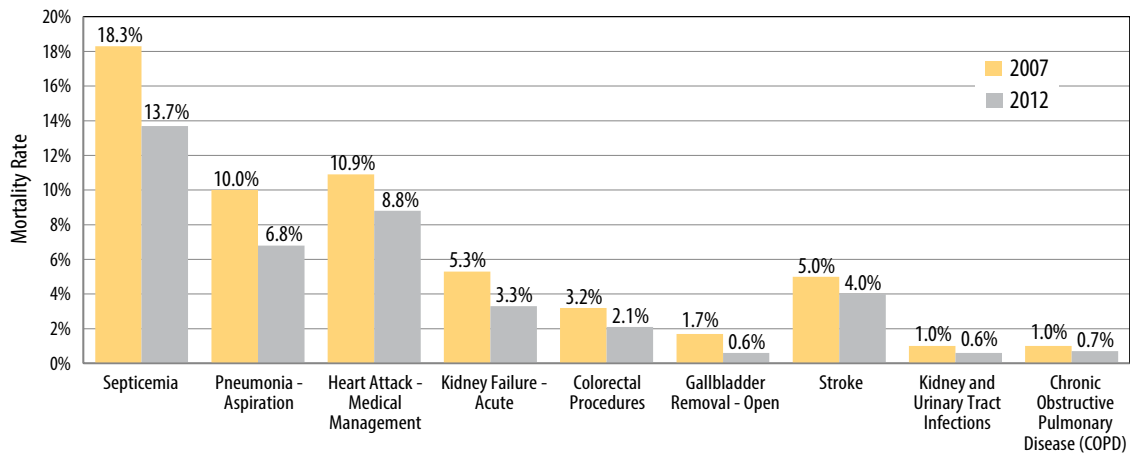
Counties included in this Report:

- Adams
- Bradford
- Centre
- Clinton
- Columbia
- Cumberland
- Dauphin
- Franklin
- Fulton
- Huntingdon
- Juniata
- Lackawanna
- Lancaster
- Lebanon
- Luzerne
- Lycoming
- Mifflin
- Monroe
- Montour
- Northumberland
- Perry
- Pike
- Snyder
- Sullivan
- Susquehanna
- Tioga
- Union
- Wayne
- Wyoming
- York

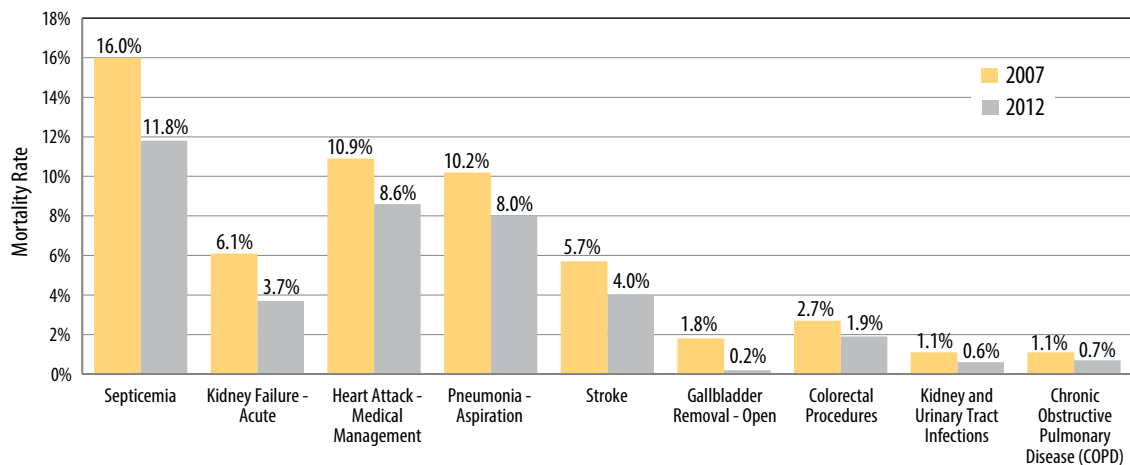
Key Findings

Mortality Rates

- Statewide in-hospital mortality rates showed a statistically significant decrease in nine of the 16 conditions between 2007 and 2012 (as graphed below). Of these, the largest decrease was in Septicemia, where the mortality rate decreased from 18.3% in 2007 to 13.7% in 2012. The only statistically significant increase was in Chest Pain, where the mortality rate increased from 0.04% in 2007 to 0.10% in 2012 (not graphed due to scale).



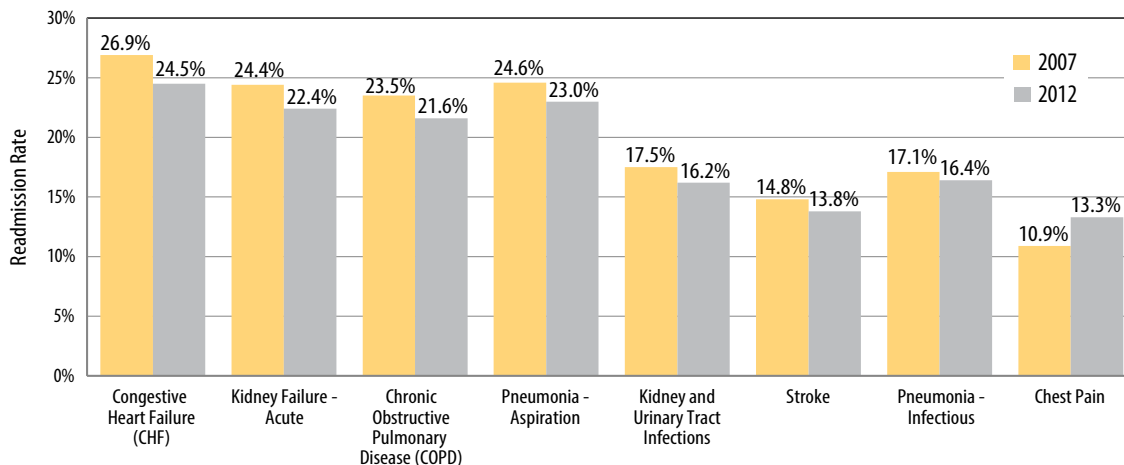
- In Central and Northeastern Pennsylvania, mortality rates showed a statistically significant decrease in nine of the 16 conditions between 2007 and 2012. Of these, the largest decrease was in Septicemia, where the mortality rate decreased from 16.0% in 2007 to 11.8% in 2012. No condition in Central and Northeastern Pennsylvania showed a statistically significant increase in mortality rate between 2007 and 2012.



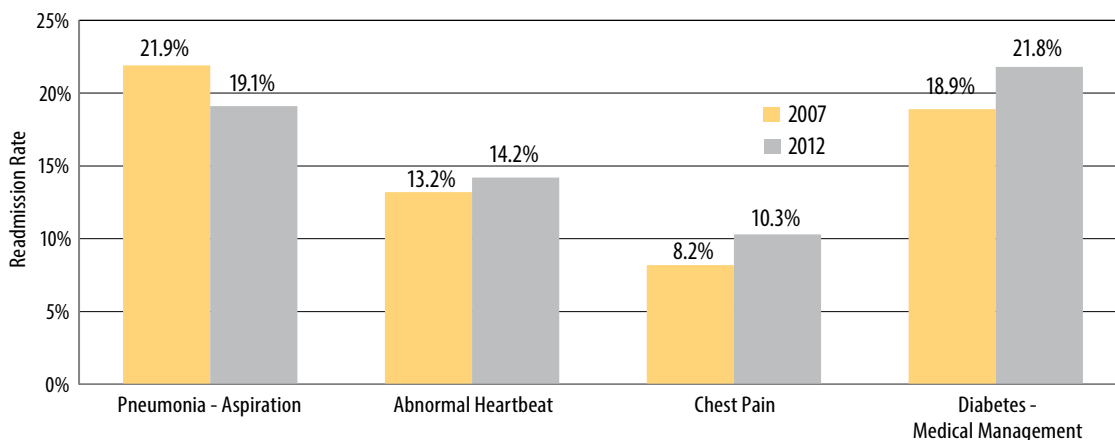
- After accounting for patient risk, hospitals in the Central and Northeastern Pennsylvania region as a whole had a significantly higher mortality rate than the rest of the state for Congestive Heart Failure (CHF), Diabetes - Medical Management, Kidney Failure - Acute, Pneumonia - Aspiration, and Pneumonia - Infectious.

Readmission Rates

- Statewide patient readmission rates showed a statistically significant decrease in seven of the 13 conditions for which readmissions were reported between 2007 and 2012. Of these, the largest decrease was in Congestive Heart Failure (CHF), where the readmission rate decreased from 26.9% in 2007 to 24.5% in 2012. The only statistically significant increase was in Chest Pain, where the readmission rate increased from 10.9% in 2007 to 13.3% in 2012.



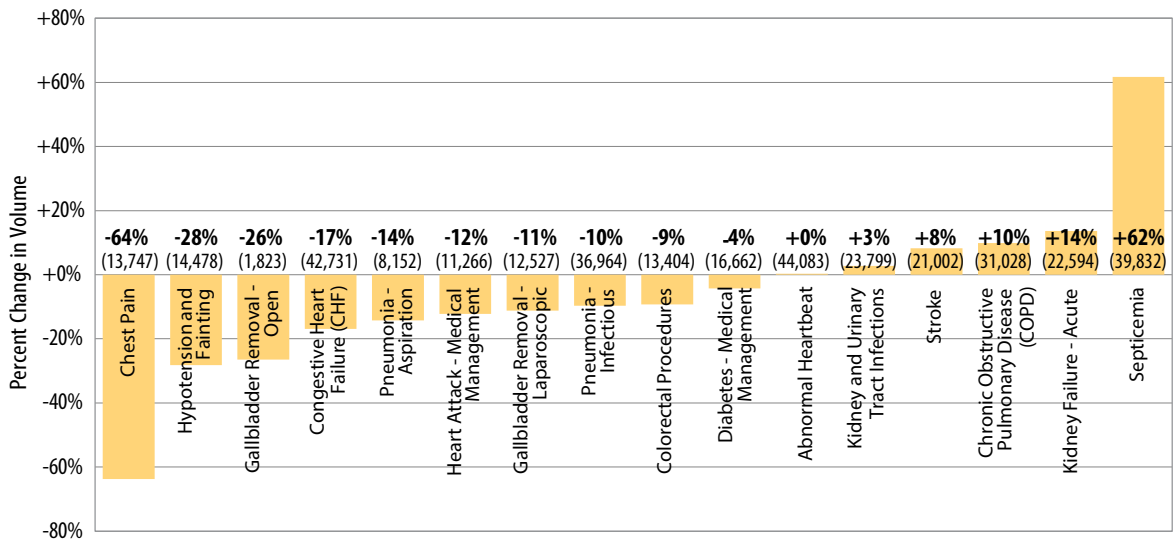
- In Central and Northeastern Pennsylvania, the only condition that showed a statistically significant decrease in the patient readmission rate was Pneumonia - Aspiration, where the rate decreased from 21.9% in 2007 to 19.1% in 2012. Statistically significant increases were seen in three conditions, with the largest increase in Diabetes - Medical Management, where the readmission rate increased from 18.9% in 2007 to 21.8% in 2012.



- After accounting for patient risk, hospitals in the Central and Northeastern Pennsylvania region as a whole had a significantly lower readmission rate than the rest of the state for Abnormal Heartbeat, Chest Pain, Chronic Obstructive Pulmonary Disease (COPD), Congestive Heart Failure (CHF), Hypotension and Fainting, Kidney and Urinary Tract Infections, Kidney Failure - Acute, and Pneumonia - Aspiration.

Volume of Hospital Admissions

- The following chart shows the statewide percent change in volume, from 2007 to 2012, for each of the 16 conditions and procedures included in this report (admission totals in 2012 are shown in parentheses). Chest Pain had the largest percentage decrease in volume (-63.7%), from 37,868 admissions in 2007 to 13,747 in 2012. Septicemia had the largest percentage increase in volume (+61.6%), from 24,642 admissions in 2007 to 39,832 in 2012.



Medicare and Medicaid Payments (2011 data)

Medicare Fee-for-Service

- Medicare fee-for-service was the primary payer for 44.5% of the Pennsylvania admissions in 2011 for the conditions and procedures in this report, for a total of nearly \$1.12 billion.
- The condition with the highest average Medicare fee-for-service payment in 2011 was Colorectal Procedures, at \$18,806 per hospitalization. The condition with the lowest average Medicare fee-for-service payment in 2011 was Chest Pain, at \$2,774 per hospitalization.

Medicaid Fee-for-Service

- Medicaid fee-for-service was the primary payer for 3.0% of the Pennsylvania admissions in 2011 for the conditions and procedures in this report, for a total of nearly \$99 million.
- The condition with the highest average Medicaid fee-for-service payment in 2011 was Colorectal Procedures, at \$18,099 per hospitalization. The condition with the lowest average Medicaid fee-for-service payment in 2011 was Chest Pain, at \$3,599 per hospitalization.

Medicaid Managed Care

- Medicaid managed care was the primary payer for 4.9% of the Pennsylvania admissions in 2011 for the conditions and procedures in this report, for a total of \$125 million.
- The condition with the highest average Medicaid managed care payment in 2011 was Colorectal Procedures, at \$16,782 per hospitalization. The condition with the lowest average Medicaid managed care payment in 2011 was Chest Pain, at \$3,799 per hospitalization.

Note: Differences in the approaches used by Medicare and Medicaid in determining payments may account for some of the variation seen across these payers for a given condition.

Understanding this Report

What is the purpose of this report?

Before we make a major purchase, we usually gather as much information as we can about the available product or service. By comparing what we learn about the quality of the product as well as what will be charged for it, we decide on what we believe is the best product for the best possible price. When it comes to health care services, unfortunately, the information available to consumers and purchasers to make such decisions is limited and often not widely accessible. PHC4's *Hospital Performance Report* can help to fill the information vacuum and assist consumers and purchasers in making more informed health care decisions. This report can also serve as an aid to providers in highlighting additional opportunities for quality improvement and cost containment. It should not be used in emergency situations.



About this report

- This report includes hospital-specific outcomes for 16 medical conditions and surgical procedures, as defined by ICD-9-CM (International Classification of Diseases, Ninth Revision, Clinical Modification) codes and/or Diagnosis-Related Groups (DRGs). Technical Notes relevant to this report provide additional detail. They are posted to PHC4's website at www.phc4.org.
- This report covers adult (18 years and older) inpatient hospital discharges, regardless of payer, during calendar year 2012.
- This report is divided into three regional versions: Western PA, Central and Northeastern PA, and Southeastern PA.
- All Pennsylvania general acute care and most specialty general acute care hospitals are included. Children's hospitals and some specialty hospitals are not reported because they typically treat few cases relevant to the conditions and procedures included in this report. Hospitals that closed or merged with other facilities during the study period are not reported, nor are hospitals that recently opened since the data available does not represent the full timeframe of the report.



- The hospital names have been shortened in many cases for formatting purposes. Hospital names may be different today than during the time period covered in this report due to mergers and name changes. A list of changes can be found on the PHC4 website at www.phc4.org.

Where does the data come from?

The hospital discharge data compiled for this report was submitted to PHC4 by Pennsylvania hospitals. The data was subject to standard validation processes by PHC4 and verified for accuracy by the hospitals at the individual case level. The Medicare fee-for-service payment data was obtained from the Centers for Medicare and Medicaid Services. Medicaid payment data (fee-for-service and managed care) was obtained from the Pennsylvania Department of Public Welfare.

Accounting for high-risk patients

Included in the data PHC4 receives from Pennsylvania hospitals is information indicating, in simple terms, “how sick the patient was” – information that is used to account for high-risk patients. Even though two patients may be admitted to the hospital with the same illness, there may be differences in the seriousness of their conditions. In order to report fair comparisons among hospitals, PHC4 uses a complex mathematical formula to risk adjust the mortality and readmission data included in this report, meaning that hospitals receive “extra credit” for treating patients who are more seriously ill or at a greater risk than others. Risk adjusting the data is important because sicker patients may be more likely to die or be readmitted.

PHC4 uses clinical laboratory data, patient characteristics such as age and gender, and billing codes that describe the patient’s medical conditions such as the presence of cancer, diabetes, etc. to calculate risk for the patients in this report. A comprehensive description of the risk-adjustment techniques used for this report can be found in the Technical Notes on PHC4’s website at www.phc4.org.



What is measured in the report and why is it important?

PHC4's mission is to provide the public with information that will help to improve the quality of health care services while also providing opportunities to restrain costs. The measurement of quality in health care is not an exact science. There may be a number of ways to define quality; however, for the purposes of this report, the following measures are suggested.

- ***Volume of Cases*** – For each hospital, the number of cases for each condition, after exclusions, is reported. This can give a patient or a purchaser an idea of the experience each facility has in treating such patients. Studies have suggested that,

in at least some areas, the volume of cases treated by a physician or hospital can be a factor in the success of the treatment. The number of cases represents separate hospital admissions, not individual patients. A patient admitted several times would be included each time in the number of cases. Outcome data are not reported for hospitals that had fewer than five cases evaluated for a measure; such low volume cannot be considered meaningful and, as such, the outcome data are not displayed. Not Reported (NR) appears in the table when this occurs.

Note: Small or specialty hospitals may report low volume due to the unique patient population they serve or geographic location.

- **Risk-Adjusted Mortality** – This measure is reported as a statistical rating that represents the number of patients who died during the hospital stay. To determine the mortality rating, PHC4 compares the number of patients one could reasonably expect to die in a given hospital in a given condition, after accounting for patient risk, with the actual number of deaths. (Please see “Understanding the Symbols” box on this page.) PHC4 has used risk-adjusted mortality statistics as a measure of quality since it began publishing reports in 1989. The mortality analysis includes Do Not Resuscitate (DNR) cases. Since DNR is defined and utilized differently across Pennsylvania hospitals, such records are retained in the analysis to avoid potential biases in mortality ratings.

- **Risk-Adjusted Readmissions** – This measure is reported as a statistical rating that represents the number of patients who were readmitted following their initial hospital stay. A readmission is defined as a subsequent acute care hospitalization, for any reason in any Pennsylvania hospital, where the admit date is within 30 days of the discharge date of the

original hospitalization. To determine the risk-adjusted readmission rating, PHC4 compares the number of patients one could reasonably expect to be readmitted, after accounting for patient risk, with the actual number of readmissions. (Please see “Understanding the Symbols” box on this page.) The readmission measure is not reported for conditions or procedures that are likely to result in a high number of planned readmissions. While some re-hospitalizations can be expected, high quality care may lessen the need for subsequent hospitalizations.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital’s actual rate to what is expected after accounting for patient risk.

○	Hospital's rate was significantly lower than expected.	Fewer patients died or were readmitted than could be attributed to patient risk and random variation.
◉	Hospital's rate was not significantly different than expected.	The number of patients who died or were readmitted was within the range anticipated based on patient risk and random variation.
●	Hospital's rate was significantly higher than expected.	More patients died or were readmitted than could be attributed to patient risk and random variation.



- ***Case-Mix Adjusted Hospital Charges*** – This report also includes the average hospital charge for each of the 16 conditions and procedures. The average charge reported is for the entire length of the hospital stay. It does not include professional

fees (e.g., physician fees) or other additional post-discharge costs, such as rehabilitation treatment, long-term care and/or home health care. The average charge was adjusted for the mix of cases that was specific to each hospital. (For more information, please refer to the Technical Notes at www.phc4.org). While charges are what the hospital reports on the billing form, they may not accurately represent the amount a hospital receives in payment for the services it delivers. Hospitals usually receive less in actual payments than the listed charge.

- ***Medicare and Medicaid Payments*** – In a separate section, payments are displayed separately for Medicare fee-for-service, Medicaid fee-for-service, and Medicaid managed care for the 16 medical conditions/surgical procedures included in this report. This information is also broken down by the MS-DRGs (Medicare Severity – Diagnosis-Related Group) associated with each condition/procedure. The most recent payment data available to PHC4 was for calendar year 2011.

How to use this report

- ***Patients/Consumers*** can use this report as an aid in making decisions about where to seek treatment for the conditions detailed in this report. As with any health care decision, PHC4 urges the reader to use this report in conjunction with a physician or other health care provider when making a health care decision.
- ***Group Benefits Purchasers/Insurers*** can use this report as part of a process in determining where employees, subscribers, members, or participants should go for their health care.
- ***Health Care Providers*** can use this report as an aid in identifying opportunities for quality improvement and cost containment.
- ***Policymakers/Public Officials*** can use this report to enhance their understanding of health care issues, to ask provocative questions, to raise public awareness of important issues and to help constituents identify quality health care options.
- All of the previously mentioned groups can use this information to raise important questions about why differences exist in the quality and efficiency of care.

This report can be used as a tool to examine hospital performance in specific treatment categories. It should not be used to generalize about the overall quality of care at a hospital. The measurement of quality is highly complex, and the information used to capture such measures is limited. A hospital death is frequently an unavoidable consequence of a patient's medical condition. Hospitals and physicians may do everything right, and the patient can still die. However, the statistical methods used for this report eliminate many of the clinical and medical differences among the patients in different hospitals, thereby allowing us to explore the real differences in the measures presented. The pursuit of these issues can play an important and constructive role in raising the quality while restraining the cost of health care in the Commonwealth of Pennsylvania.



Abnormal Heartbeat

Includes abnormalities in the heart rate (how fast or slow the heart beats) and/or the heart rhythm (how regular/steady the heart beats). Common examples include tachycardia (too fast), bradycardia (too slow), and atrial fibrillation (too fast and irregular).

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients. See page 9.

- Rate significantly lower than expected.
- ◉ Rate not significantly different than expected.
- Rate significantly higher than expected.

NR Not reported. Fewer than five cases evaluated.

Abnormal Heartbeat				
Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	44,083	0.9%	14.8%	\$38,850
Central & Northeastern PA	11,225	1.0%	14.2%	\$26,992
Barnes-Kasson County	15	○	○	\$16,211
Berwick	61	○	○	\$42,857
Bucktail	0	NR	NR	NR
Carlisle Regional	111	○	○	\$34,949
Chambersburg	415	○	○	\$26,439
Endless Mountains	16	○	○	\$8,227
Ephrata Community	189	○	○	\$31,186
Evangelical Community	200	○	○	\$12,924
Fulton County	18	○	○	\$20,451
Geisinger Wyoming Valley	371	○	○	\$42,927
Geisinger-Bloomsburg	29	○	○	\$31,769
Geisinger-Community	390	○	○	\$26,571
Geisinger/Danville	522	○	○	\$33,189
Gettysburg	164	○	○	\$21,982
Good Samaritan/Lebanon	238	○	○	\$29,724
Hanover	136	○	○	\$20,625
Hazleton General	164	○	○	\$30,862
Heart of Lancaster	74	○	○	\$39,718
Holy Spirit	682	●	○	\$27,624
J C Blair Memorial	60	○	○	\$17,097
Jersey Shore	33	○	○	\$14,129
Lancaster General	1,418	○	○	\$29,452

Abnormal Heartbeat

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	113	⊙	⊙	\$43,890
Lewistown	201	⊙	⊙	\$14,451
Lock Haven	34	⊙	⊙	\$36,532
Memorial York	134	⊙	⊙	\$26,219
Memorial/Towanda	25	⊙	⊙	\$28,391
Mid-Valley	18	⊙	⊙	\$26,877
Milton S Hershey	354	⊙	⊙	\$26,927
Moses Taylor	131	⊙	⊙	\$33,283
Mount Nittany	305	⊙	⊙	\$22,369
Muncy Valley	19	⊙	⊙	\$12,783
Pinnacle Health	739	⊙	⊙	\$21,764
Pocono	443	⊙	⊙	\$28,000
Regional Scranton	419	⊙	⊙	\$33,303
Robert Packer	811	⊙	●	\$19,525
Soldiers & Sailors	71	⊙	⊙	\$14,355
Sunbury Community	36	●	⊙	\$34,372
Troy Community	18	⊙	⊙	\$10,818
Tyler Memorial	41	⊙	⊙	\$20,120
Wayne Memorial	103	⊙	⊙	\$16,436
Waynesboro	64	⊙	⊙	\$27,267
Wilkes-Barre General	626	●	⊙	\$41,566
Williamsport Regional	388	●	⊙	\$18,651
York	826	⊙	⊙	\$20,960

Chest Pain

Pain in the chest that is not related to the heart (non-cardiac chest pain). Common causes for this type of chest pain include gastric reflux (“heart-burn”), pleurisy (inflammation of the membrane around the lungs), and problems with the ribs and muscles of the chest.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital’s actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients. See page 9.

- Rate significantly lower than expected.
- ◉ Rate not significantly different than expected.
- Rate significantly higher than expected.

NR Not reported. Fewer than five cases evaluated.

Chest Pain				
Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	13,747	0.1%	13.3%	\$20,464
Central & Northeastern PA	2,814	0.1%	10.3%	\$14,121
Barnes-Kasson County	28	◉	◉	\$6,157
Berwick	35	◉	◉	\$20,599
Bucktail	2	NR	NR	NR
Carlisle Regional	20	◉	◉	\$17,175
Chambersburg	42	◉	○	\$12,859
Endless Mountains	20	◉	◉	\$3,174
Ephrata Community	31	◉	◉	\$20,569
Evangelical Community	25	◉	◉	\$5,654
Fulton County	9	◉	◉	\$11,330
Geisinger Wyoming Valley	40	◉	◉	\$21,370
Geisinger-Bloomsburg	4	NR	NR	NR
Geisinger-Community	243	◉	◉	\$13,563
Geisinger/Danville	98	◉	◉	\$18,602
Gettysburg	68	◉	◉	\$12,278
Good Samaritan/Lebanon	45	◉	◉	\$9,973
Hanover	19	◉	◉	\$9,958
Hazleton General	35	◉	◉	\$15,146
Heart of Lancaster	23	◉	◉	\$16,932
Holy Spirit	298	◉	◉	\$16,262
J C Blair Memorial	18	◉	◉	\$6,642
Jersey Shore	9	◉	◉	\$5,548
Lancaster General	163	◉	◉	\$14,870

Chest Pain

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	21	⊙	⊙	\$19,673
Lewistown	33	⊙	⊙	\$11,182
Lock Haven	4	NR	NR	NR
Memorial York	18	⊙	⊙	\$12,672
Memorial/Towanda	10	⊙	⊙	\$9,839
Mid-Valley	6	⊙	⊙	\$11,881
Milton S Hershey	53	⊙	⊙	\$12,298
Moses Taylor	158	⊙	●	\$16,248
Mount Nittany	52	⊙	⊙	\$14,711
Muncy Valley	11	⊙	⊙	\$5,691
Pinnacle Health	239	⊙	⊙	\$13,775
Pocono	94	⊙	⊙	\$15,960
Regional Scranton	151	⊙	⊙	\$13,194
Robert Packer	316	⊙	⊙	\$11,389
Soldiers & Sailors	3	NR	NR	NR
Sunbury Community	10	⊙	⊙	\$16,301
Troy Community	0	NR	NR	NR
Tyler Memorial	18	⊙	⊙	\$9,948
Wayne Memorial	16	⊙	⊙	\$9,461
Waynesboro	10	⊙	⊙	\$15,057
Wilkes-Barre General	145	⊙	⊙	\$20,488
Williamsport Regional	86	⊙	⊙	\$9,891
York	85	⊙	⊙	\$11,995

Chronic Obstructive Pulmonary Disease (COPD)

Chronic damage, inflammation, and narrowing of the airways in the lungs. Common COPD diseases include emphysema and chronic obstructive bronchitis.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients. See page 9.

- Rate significantly lower than expected.
- ◉ Rate not significantly different than expected.
- Rate significantly higher than expected.

NR Not reported. Fewer than five cases evaluated.

Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	31,028	0.7%	21.6%	\$26,969
Central & Northeastern PA	7,536	0.7%	19.5%	\$20,625
Barnes-Kasson County	45	○	○	\$8,988
Berwick	167	○	○	\$34,815
Bucktail	10	○	○	\$10,149
Carlisle Regional	129	○	○	\$19,204
Chambersburg	203	○	○	\$16,704
Endless Mountains	81	○	○	\$8,362
Ephrata Community	141	○	○	\$27,302
Evangelical Community	65	○	○	\$6,957
Fulton County	64	○	○	\$17,123
Geisinger Wyoming Valley	242	○	○	\$30,046
Geisinger-Bloomsburg	77	○	○	\$24,315
Geisinger-Community	291	○	○	\$19,768
Geisinger/Danville	278	○	○	\$29,265
Gettysburg	133	○	○	\$14,851
Good Samaritan/Lebanon	219	●	○	\$19,046
Hanover	79	○	○	\$14,650
Hazleton General	99	○	○	\$19,740
Heart of Lancaster	48	○	○	\$22,072
Holy Spirit	322	○	○	\$24,136
J C Blair Memorial	68	○	○	\$7,663
Jersey Shore	53	●	○	\$10,080
Lancaster General	504	○	○	\$21,586

Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	77	⊙	⊙	\$32,303
Lewistown	207	⊙	⊙	\$12,632
Lock Haven	60	⊙	⊙	\$27,091
Memorial York	186	⊙	⊙	\$14,631
Memorial/Towanda	40	⊙	⊙	\$17,451
Mid-Valley	22	⊙	⊙	\$22,767
Milton S Hershey	155	⊙	⊙	\$19,505
Moses Taylor	208	⊙	⊙	\$22,528
Mount Nittany	211	⊙	⊙	\$21,648
Muncy Valley	28	⊙	⊙	\$10,287
Pinnacle Health	432	⊙	⊙	\$17,353
Pocono	443	⊙	⊙	\$21,895
Regional Scranton	263	⊙	⊙	\$19,232
Robert Packer	244	⊙	⊙	\$19,605
Soldiers & Sailors	153	⊙	⊙	\$12,304
Sunbury Community	86	⊙	⊙	\$24,488
Troy Community	39	⊙	⊙	\$11,477
Tyler Memorial	88	⊙	⊙	\$20,130
Wayne Memorial	79	⊙	⊙	\$11,904
Waynesboro	86	⊙	⊙	\$15,848
Wilkes-Barre General	573	⊙	⊙	\$31,380
Williamsport Regional	142	⊙	⊙	\$13,761
York	396	⊙	⊙	\$14,057

Colorectal Procedures

Surgical procedure performed on the colon (large intestine) and rectum (last section of the large intestine). Reasons for colorectal procedures include cancer and diverticulitis (severe inflammation of large intestine). Common procedures include removal of the rectum or part or all of the large intestine. Does not include patients with abdominal trauma.

Understanding the Symbols

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- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Colorectal Procedures			
Hospital	Cases	Mortality	Average Hospital Charge
TOTAL: Statewide	13,404	2.1%	\$78,579
Central & Northeastern PA	3,535	1.9%	\$55,910
Barnes-Kasson County	2	NR	NR
Berwick	5	◉	NR
Bucktail	0	NR	NR
Carlisle Regional	79	◉	\$82,908
Chambersburg	115	◉	\$38,849
Endless Mountains	0	NR	NR
Ephrata Community	78	◉	\$45,938
Evangelical Community	49	◉	\$28,845
Fulton County	0	NR	NR
Geisinger Wyoming Valley	111	◉	\$93,649
Geisinger-Bloomsburg	17	◉	\$52,431
Geisinger-Community	102	◉	\$49,542
Geisinger/Danville	272	◉	\$85,376
Gettysburg	61	◉	\$45,789
Good Samaritan/Lebanon	82	◉	\$61,339
Hanover	50	◉	\$38,303
Hazleton General	80	◉	\$69,279
Heart of Lancaster	27	◉	\$73,817
Holy Spirit	147	◉	\$50,804
J C Blair Memorial	6	◉	\$49,297
Jersey Shore	11	◉	\$21,255
Lancaster General	258	◉	\$50,392

Readmission ratings were not reported for Colorectal Procedures to avoid counting readmissions that may have been planned for cancer treatment.

Colorectal Procedures

Hospital	Cases	Mortality	Average Hospital Charge
Lancaster Regional	47	⊙	\$83,533
Lewistown	49	⊙	\$37,625
Lock Haven	6	⊙	\$127,309
Memorial York	49	⊙	\$42,141
Memorial/Towanda	8	⊙	\$67,694
Mid-Valley	0	NR	NR
Milton S Hershey	281	⊙	\$50,814
Moses Taylor	70	⊙	\$59,047
Mount Nittany	80	⊙	\$49,768
Muncy Valley	7	⊙	\$48,292
Pinnacle Health	323	⊙	\$40,337
Pocono	102	⊙	\$56,753
Regional Scranton	133	⊙	\$47,614
Robert Packer	149	⊙	\$49,296
Soldiers & Sailors	16	●	\$32,407
Sunbury Community	17	⊙	\$63,872
Troy Community	2	NR	NR
Tyler Memorial	4	NR	NR
Wayne Memorial	48	⊙	\$43,300
Waynesboro	20	⊙	\$39,127
Wilkes-Barre General	205	⊙	\$91,438
Williamsport Regional	123	●	\$43,629
York	244	⊙	\$47,694

Readmission ratings were not reported for Colorectal Procedures to avoid counting readmissions that may have been planned for cancer treatment.

Congestive Heart Failure (CHF)

Inability of the heart to pump enough blood to meet the needs of the body leading to swelling of the legs and shortness of breath from fluid build-up in the lungs. Common causes of heart failure include heart disease (e.g., coronary artery disease and heart valve problems) and long-standing hypertension (high blood pressure).

Understanding the Symbols


The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients. See page 9.

- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Congestive Heart Failure (CHF)

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	42,731	2.8%	24.5%	\$33,169
Central & Northeastern PA	10,728	3.3%	23.2%	\$23,464
Barnes-Kasson County	52	●	◉	\$9,945
Berwick	83	◉	◉	\$42,799
Bucktail	8	◉	◉	\$11,598
Carlisle Regional	151	●	●	\$22,605
Chambersburg	340	◉	◉	\$21,535
Endless Mountains	17	◉	◉	\$7,817
Ephrata Community	148	◉	○	\$31,630
Evangelical Community	126	◉	○	\$9,952
Fulton County	40	◉	◉	\$21,366
Geisinger Wyoming Valley	330	◉	◉	\$31,301
Geisinger-Bloomsburg	88	◉	◉	\$24,912
Geisinger-Community	330	◉	◉	\$20,992
Geisinger/Danville	747	◉	◉	\$33,242
Gettysburg	171	◉	◉	\$19,741
Good Samaritan/Lebanon	267	◉	○	\$20,416
Hanover	160	◉	◉	\$18,257
Hazleton General	252	◉	◉	\$24,800
Heart of Lancaster	70	◉	◉	\$25,667
Holy Spirit	485	◉	◉	\$24,668
J C Blair Memorial	112	◉	◉	\$11,636
Jersey Shore	61	◉	◉	\$13,097
Lancaster General	1,068	◉	◉	\$26,562

Congestive Heart Failure (CHF)

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	104	⊙	⊙	\$31,876
Lewistown	213	⊙	⊙	\$14,996
Lock Haven	68	⊙	⊙	\$30,375
Memorial York	131	●	⊙	\$20,288
Memorial/Towanda	36	⊙	⊙	\$16,815
Mid-Valley	40	⊙	⊙	\$22,657
Milton S Hershey	570	⊙	⊙	\$24,079
Moses Taylor	182	⊙	⊙	\$26,594
Mount Nittany 	279	●	⊙	\$21,608
Muncy Valley	19	⊙	⊙	\$13,745
Pinnacle Health	738	●	⊙	\$22,167
Pocono	370	⊙	⊙	\$25,622
Regional Scranton	534	⊙	⊙	\$22,052
Robert Packer	328	⊙	⊙	\$20,472
Soldiers & Sailors	113	⊙	⊙	\$12,584
Sunbury Community	43	⊙	⊙	\$23,743
Troy Community	45	⊙	⊙	\$10,807
Tyler Memorial	46	⊙	⊙	\$19,705
Wayne Memorial	114	⊙	⊙	\$12,085
Waynesboro	101	⊙	⊙	\$22,001
Wilkes-Barre General	460	⊙	⊙	\$32,467
Williamsport Regional	271	⊙	⊙	\$14,737
York	817	⊙	⊙	\$18,488

 This hospital has submitted comments specific to this condition. These comments are posted on PHC4's website at <http://www.phc4.org/reports/hpr/12/comments.htm>.

Diabetes – Medical Management

Inability of the body to metabolize food properly because it does not make enough insulin or it does not use the insulin properly. Diabetes can lead to acute complications such as a coma from too much or too little glucose (blood sugar) and long-term complications such as kidney disease and damage to blood vessels and nerves.

Understanding the Symbols

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- Rate significantly lower than expected.
- ◉ Rate not significantly different than expected.
- Rate significantly higher than expected.

NR Not reported. Fewer than five cases evaluated.

Diabetes - Medical Management

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	16,662	0.6%	21.0%	\$26,649
Central & Northeastern PA	3,804	0.8%	21.8%	\$18,389
Barnes-Kasson County	8	○	○	\$7,901
Berwick	38	○	○	\$28,970
Bucktail	1	NR	NR	NR
Carlisle Regional	79	○	○	\$19,915
Chambersburg	168	○	○	\$15,358
Endless Mountains	12	○	○	\$5,145
Ephrata Community	104	○	○	\$19,897
Evangelical Community	64	○	○	\$9,816
Fulton County	8	○	○	\$12,561
Geisinger Wyoming Valley	152	○	○	\$24,623
Geisinger-Bloomsburg	31	○	○	\$21,564
Geisinger-Community	114	○	○	\$19,115
Geisinger/Danville	203	○	○	\$30,954
Gettysburg	68	○	○	\$12,597
Good Samaritan/Lebanon	97	○	○	\$18,186
Hanover	45	○	○	\$12,964
Hazleton General	54	○	○	\$18,159
Heart of Lancaster	53	○	○	\$20,112
Holy Spirit	152	●	○	\$18,536
J C Blair Memorial	31	○	○	\$7,910
Jersey Shore	13	○	○	\$9,172
Lancaster General	268	○	○	\$19,199

Diabetes - Medical Management

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	38	⊙	⊙	\$21,848
Lewistown	79	⊙	⊙	\$13,514
Lock Haven	30	⊙	⊙	\$23,226
Memorial York	89	⊙	⊙	\$12,511
Memorial/Towanda	27	⊙	⊙	\$11,807
Mid-Valley	9	⊙	⊙	\$16,279
Milton S Hershey	184	●	⊙	\$20,167
Moses Taylor	108	⊙	⊙	\$22,406
Mount Nittany	96	⊙	⊙	\$17,916
Muncy Valley	3	NR	NR	NR
Pinnacle Health	313	⊙	⊙	\$16,468
Pocono	163	⊙	○	\$21,901
Regional Scranton	90	●	⊙	\$17,219
Robert Packer	107	⊙	⊙	\$19,092
Soldiers & Sailors	15	⊙	⊙	\$9,854
Sunbury Community	13	⊙	⊙	\$19,707
Troy Community	10	⊙	⊙	\$10,477
Tyler Memorial	13	⊙	⊙	\$11,055
Wayne Memorial	47	⊙	●	\$9,594
Waynesboro	36	⊙	⊙	\$12,535
Wilkes-Barre General	180	⊙	⊙	\$23,503
Williamsport Regional	121	⊙	⊙	\$13,049
York	270	⊙	⊙	\$13,996

Gallbladder Removal – Laparoscopic

Removal of the gallbladder using several small incisions and a laparoscope (small camera on the end of an instrument) inserted into the abdomen. This type of procedure is sometimes referred to as “minimally invasive” surgery. Common reasons for laparoscopic gallbladder removal include cholelithiasis (stones in the gallbladder) and cholecystitis (inflammation of the gallbladder).

Understanding the Symbols

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 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Gallbladder Removal - Laparoscopic

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	12,527	0.3%	6.9%	\$42,427
Central & Northeastern PA	3,148	0.3%	7.0%	\$33,980
Barnes-Kasson County	3	NR	NR	NR
Berwick	35	◉	◉	\$70,576
Bucktail	0	NR	NR	NR
Carlisle Regional	32	◉	◉	\$54,511
Chambersburg	111	◉	◉	\$28,819
Endless Mountains	1	NR	NR	NR
Ephrata Community	41	◉	◉	\$27,436
Evangelical Community	46	◉	◉	\$20,448
Fulton County	2	NR	NR	NR
Geisinger Wyoming Valley	75	◉	◉	\$58,367
Geisinger-Bloomsburg	22	◉	◉	\$30,756
Geisinger-Community	165	◉	◉	\$33,470
Geisinger/Danville	181	◉	◉	\$60,610
Gettysburg	46	◉	◉	\$27,496
Good Samaritan/Lebanon	107	◉	◉	\$33,518
Hanover	62	◉	◉	\$22,666
Hazleton General	97	◉	◉	\$35,676
Heart of Lancaster	60	◉	◉	\$46,792
Holy Spirit	113	◉	◉	\$30,654
J C Blair Memorial	22	◉	◉	\$21,536
Jersey Shore	10	◉	◉	\$20,366
Lancaster General	331	◉	◉	\$30,563

Gallbladder Removal - Laparoscopic

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	32	⊙	⊙	\$50,087
Lewistown	46	⊙	⊙	\$22,504
Lock Haven	9	⊙	⊙	\$73,037
Memorial York	42	⊙	⊙	\$23,828
Memorial/Towanda	8	⊙	⊙	\$30,387
Mid-Valley	0	NR	NR	NR
Milton S Hershey	91	⊙	⊙	\$31,913
Moses Taylor	87	⊙	●	\$43,112
Mount Nittany	152	⊙	⊙	\$32,186
Muncy Valley	5	⊙	⊙	\$25,499
Pinnacle Health	199	⊙	⊙	\$21,724
Pocono	132	⊙	⊙	\$32,506
Regional Scranton	101	⊙	⊙	\$32,130
Robert Packer	97	⊙	⊙	\$22,129
Soldiers & Sailors	7	⊙	⊙	\$20,346
Sunbury Community	6	⊙	⊙	\$48,891
Troy Community	1	NR	NR	NR
Tyler Memorial	7	⊙	⊙	\$34,556
Wayne Memorial	55	⊙	⊙	\$22,641
Waynesboro	16	⊙	⊙	\$25,653
Wilkes-Barre General	183	●	⊙	\$49,969
Williamsport Regional	82	⊙	⊙	\$30,639
York	228	⊙	⊙	\$22,784

Gallbladder Removal – Open

Removal of the gallbladder using one large incision rather than several small incisions as is used in laparoscopic gallbladder removal. This type of open procedure is sometimes referred to as “traditional” gallbladder removal. Common reasons for open gallbladder removal include cholelithiasis (stones in the gallbladder), cholecystitis (inflammation of the gallbladder), and cancer.

Understanding the Symbols

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- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Gallbladder Removal - Open

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	1,823	0.6%	10.4%	\$66,455
Central & Northeastern PA	584	0.2%	9.7%	\$46,114
Barnes-Kasson County	0	NR	NR	NR
Berwick	0	NR	NR	NR
Bucktail	0	NR	NR	NR
Carlisle Regional	17	◉	◉	\$69,604
Chambersburg	16	◉	◉	\$38,993
Endless Mountains	0	NR	NR	NR
Ephrata Community	3	NR	NR	NR
Evangelical Community	19	◉	◉	\$21,159
Fulton County	0	NR	NR	NR
Geisinger Wyoming Valley	20	◉	◉	\$59,639
Geisinger-Bloomsburg	3	NR	NR	NR
Geisinger-Community	18	◉	◉	\$54,021
Geisinger/Danville	68	◉	◉	\$75,083
Gettysburg	4	NR	NR	NR
Good Samaritan/Lebanon	19	◉	◉	\$49,615
Hanover	12	◉	◉	\$23,625
Hazleton General	17	◉	◉	\$77,143
Heart of Lancaster	15	◉	◉	\$53,836
Holy Spirit	19	◉	◉	\$45,819
J C Blair Memorial	9	◉	◉	\$24,893
Jersey Shore	4	NR	NR	NR
Lancaster General	47	◉	◉	\$40,129

Gallbladder Removal - Open

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	10	⊙	⊙	\$80,200
Lewistown	5	⊙	⊙	NR
Lock Haven	1	NR	NR	NR
Memorial York	0	NR	NR	NR
Memorial/Towanda	3	NR	NR	NR
Mid-Valley	0	NR	NR	NR
Milton S Hershey	25	⊙	●	\$45,117
Moses Taylor	12	⊙	⊙	\$42,235
Mount Nittany	2	NR	NR	NR
Muncy Valley	1	NR	NR	NR
Pinnacle Health	39	⊙	⊙	\$30,471
Pocono	19	⊙	⊙	\$48,863
Regional Scranton	21	⊙	⊙	\$38,838
Robert Packer	22	⊙	⊙	\$32,089
Soldiers & Sailors	2	NR	NR	NR
Sunbury Community	0	NR	NR	NR
Troy Community	3	NR	NR	NR
Tyler Memorial	3	NR	NR	NR
Wayne Memorial	18	⊙	⊙	\$38,102
Waynesboro	4	NR	NR	NR
Wilkes-Barre General	28	⊙	⊙	\$69,086
Williamsport Regional	10	⊙	⊙	\$21,619
York	46	⊙	⊙	\$34,555

Heart Attack – Medical Management

Occurs when there is blockage or obstruction in a blood vessel (coronary artery) causing damage or death to an area of the heart (myocardial infarction). Patients who are treated with a balloon (angioplasty)/stent procedure or open heart surgery are not included.

Understanding the Symbols

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- Rate significantly higher than expected.

NR Not reported. Fewer than five cases evaluated.

Heart Attack - Medical Management				
Hospital	Cases	Transfer to Acute Care %	Mortality	Average Hospital Charge
TOTAL: Statewide	11,266	17.6	8.8%	\$38,227
Central & Northeastern PA	3,371	16.5	8.6%	\$26,436
Barnes-Kasson County	1	NR	NR	NR
Berwick	14	29.4	◉	\$47,305
Bucktail	1	NR	NR	NR
Carlisle Regional	25	60.9	◉	\$31,735
Chambersburg*	208	19.2	◉	\$24,393
Endless Mountains	0	NR	NR	NR
Ephrata Community	26	63.5	◉	\$30,323
Evangelical Community*	129	19.2	◉	\$12,896
Fulton County	4	NR	NR	NR
Geisinger Wyoming Valley*	76	2.8	◉	\$43,263
Geisinger-Bloomsburg	7	16.7	◉	\$26,422
Geisinger-Community*	78	2.7	◉	\$29,501
Geisinger/Danville*	249	2.2	◉	\$39,651
Gettysburg	22	71.2	●	\$17,692
Good Samaritan/Lebanon*	80	8.0	◉	\$20,121
Hanover	111	47.5	◉	\$18,019
Hazleton General	109	29.6	◉	\$29,792
Heart of Lancaster	9	50.0	◉	\$27,512
Holy Spirit*	131	3.2	◉	\$27,754
J C Blair Memorial	15	52.2	◉	\$9,809
Jersey Shore	6	40.0	◉	\$8,906
Lancaster General*	310	1.3	◉	\$29,120

* Indicates hospitals that provided advanced cardiac services (angioplasty/stent procedures for heart attack) during the report period. This information is provided since patients admitted to facilities that do not provide advanced cardiac services may be transferred, for further diagnosis and treatment, to facilities that provide these services.

Readmission ratings were not reported for Heart Attack - Medical Management to avoid counting readmissions that may have been planned.

Heart Attack - Medical Management

Hospital	Cases	Transfer to Acute Care %	Mortality	Average Hospital Charge
Lancaster Regional*	22	0.0	●	\$36,224
Lewistown	71	43.2	⊙	\$15,920
Lock Haven	15	34.8	⊙	\$34,666
Memorial York*	47	18.5	⊙	\$23,563
Memorial/Towanda	3	NR	NR	NR
Mid-Valley	9	27.3	⊙	\$22,557
Milton S Hershey*	174	0.6	⊙	\$27,258
Moses Taylor	33	45.3	⊙	\$29,455
Mount Nittany*	86	26.7	⊙	\$24,776
Muncy Valley	7	30.0	⊙	\$8,880
Pinnacle Health*	264	2.4	⊙	\$22,636
Pocono*	91	4.7	⊙	\$33,480
Regional Scranton*	145	1.5	⊙	\$32,788
Robert Packer*	172	1.2	⊙	\$24,579
Soldiers & Sailors	24	15.4	⊙	\$11,676
Sunbury Community	15	23.5	⊙	\$30,922
Troy Community	0	NR	NR	NR
Tyler Memorial	3	NR	NR	NR
Wayne Memorial	27	57.1	⊙	\$14,327
Waynesboro	17	69.2	⊙	\$22,775
Wilkes-Barre General*	175	5.3	⊙	\$36,826
Williamsport Regional*	131	0.8	⊙	\$17,149
York*	229	0.5	⊙	\$20,171

* Indicates hospitals that provided advanced cardiac services (angioplasty/stent procedures for heart attack) during the report period. This information is provided since patients admitted to facilities that do not provide advanced cardiac services may be transferred, for further diagnosis and treatment, to facilities that provide these services.

Readmission ratings were not reported for Heart Attack - Medical Management to avoid counting readmissions that may have been planned.

Hypotension and Fainting

Hypotension is an abnormally low blood pressure with effects ranging from dizziness to fainting. Dehydration is an example of a condition that can cause hypotension. Fainting (syncope) is a temporary loss of consciousness. Syncope may also be referred to as “passing out” or “blacking out.”


Understanding the Symbols

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- Rate significantly lower than expected.
- ◉ Rate not significantly different than expected.
- Rate significantly higher than expected.

NR Not reported. Fewer than five cases evaluated.

Hypotension and Fainting

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	14,478	0.3%	11.8%	\$23,243
Central & Northeastern PA	3,167	0.3%	10.5%	\$16,859
Barnes-Kasson County	30	○	○	\$8,525
Berwick	45	○	○	\$27,260
Bucktail	1	NR	NR	NR
Carlisle Regional	61	○	○	\$15,473
Chambersburg	119	○	○	\$16,091
Endless Mountains	15	○	○	\$3,935
Ephrata Community	39	○	○	\$18,555
Evangelical Community	49	○	○	\$7,803
Fulton County	18	○	○	\$12,445
Geisinger Wyoming Valley	110	○	○	\$23,907
Geisinger-Bloomsburg	5	○	○	\$18,184
Geisinger-Community	169	○	○	\$19,546
Geisinger/Danville	164	○	○	\$25,984
Gettysburg	79	○	○	\$13,895
Good Samaritan/Lebanon	80	○	○	\$13,255
Hanover	26	○	○	\$12,422
Hazleton General 	53	○	●	\$21,478
Heart of Lancaster	19	○	○	\$13,079
Holy Spirit	198	○	○	\$17,113
J C Blair Memorial	20	○	○	\$9,118
Jersey Shore	4	NR	NR	NR
Lancaster General	279	○	○	\$16,481

 This hospital has submitted comments specific to this condition. These comments are posted on PHC4's website at <http://www.phc4.org/reports/hpr/12/comments.htm>.

Hypotension and Fainting

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	34	⊙	⊙	\$21,790
Lewistown	23	⊙	⊙	\$11,531
Lock Haven	16	⊙	⊙	\$21,482
Memorial York	23	⊙	⊙	\$14,931
Memorial/Towanda	11	⊙	⊙	\$12,915
Mid-Valley	10	⊙	⊙	\$13,522
Milton S Hershey	91	⊙	⊙	\$15,227
Moses Taylor	74	⊙	⊙	\$20,230
Mount Nittany	54	⊙	⊙	\$17,847
Muncy Valley	2	NR	NR	NR
Pinnacle Health	250	●	⊙	\$14,641
Pocono	141	⊙	⊙	\$21,054
Regional Scranton	116	⊙	⊙	\$14,505
Robert Packer	160	⊙	⊙	\$15,879
Soldiers & Sailors	4	NR	NR	NR
Sunbury Community	16	⊙	⊙	\$16,606
Troy Community	5	⊙	⊙	\$5,692
Tyler Memorial	14	⊙	⊙	\$14,450
Wayne Memorial	34	⊙	⊙	\$11,188
Waynesboro	17	⊙	⊙	\$13,888
Wilkes-Barre General	179	⊙	⊙	\$21,564
Williamsport Regional	83	⊙	⊙	\$10,898
York	227	⊙	⊙	\$12,310

Kidney and Urinary Tract Infections

Infections of the urinary tract, which includes the kidneys (pyelonephritis) and bladder (cystitis). These infections can be acute or chronic.

Understanding the Symbols

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- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Kidney and Urinary Tract Infections

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	23,799	0.6%	16.2%	\$23,661
Central & Northeastern PA	5,468	0.6%	14.8%	\$17,470
Barnes-Kasson County	29	○	○	\$10,533
Berwick	50	●	○	\$28,394
Bucktail	3	NR	NR	NR
Carlisle Regional	71	○	○	\$18,402
Chambersburg	120	○	○	\$13,710
Endless Mountains	50	○	○	\$4,953
Ephrata Community	113	○	○	\$20,313
Evangelical Community	31	○	○	\$9,514
Fulton County	25	○	○	\$12,371
Geisinger Wyoming Valley	180	○	○	\$26,920
Geisinger-Bloomsburg	36	○	○	\$19,194
Geisinger-Community	264	○	○	\$17,367
Geisinger/Danville	247	○	○	\$25,613
Gettysburg	128	○	○	\$12,316
Good Samaritan/Lebanon	140	○	○	\$17,068
Hanover	52	○	○	\$12,004
Hazleton General	84	○	○	\$17,785
Heart of Lancaster	77	○	○	\$17,107
Holy Spirit	256	○	○	\$18,811
J C Blair Memorial	45	○	○	\$8,287
Jersey Shore	34	○	○	\$7,725
Lancaster General	453	○	○	\$17,748

Kidney and Urinary Tract Infections

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	77	⊙	⊙	\$23,195
Lewistown	92	⊙	⊙	\$11,742
Lock Haven	31	⊙	⊙	\$22,469
Memorial York	79	⊙	⊙	\$12,695
Memorial/Towanda	55	⊙	⊙	\$11,321
Mid-Valley	31	⊙	⊙	\$15,713
Milton S Hershey	162	⊙	⊙	\$17,847
Moses Taylor	151	⊙	⊙	\$22,869
Mount Nittany	133	⊙	⊙	\$17,058
Muncy Valley	15	⊙	⊙	\$7,989
Pinnacle Health	371	⊙	⊙	\$15,360
Pocono	230	⊙	⊙	\$20,411
Regional Scranton	240	⊙	⊙	\$17,916
Robert Packer	114	⊙	⊙	\$17,843
Soldiers & Sailors	58	⊙	⊙	\$9,217
Sunbury Community	19	⊙	⊙	\$19,385
Troy Community	30	⊙	⊙	\$9,243
Tyler Memorial	32	⊙	⊙	\$16,348
Wayne Memorial	70	⊙	⊙	\$9,916
Waynesboro	35	⊙	⊙	\$11,786
Wilkes-Barre General	391	⊙	⊙	\$23,851
Williamsport Regional	95	⊙	⊙	\$10,419
York	469	⊙	⊙	\$13,380

Kidney Failure – Acute

A sudden and rapid loss of kidney function resulting in a build-up of waste products that are normally filtered by the kidneys and removed from the body through urine. Because these waste products are toxic, acute kidney failure can be life-threatening. Acute kidney failure may be caused by trauma, surgery, dehydration, medication or other conditions.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients. See page 9.

- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Kidney Failure - Acute

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	22,594	3.3%	22.4%	\$31,287
Central & Northeastern PA	5,726	3.7%	20.4%	\$22,879
Barnes-Kasson County	6	◉	◉	\$8,471
Berwick	18	◉	◉	\$42,277
Bucktail	0	NR	NR	NR
Carlisle Regional	203	●	◉	\$20,140
Chambersburg	201	◉	○	\$19,560
Endless Mountains	4	NR	NR	NR
Ephrata Community	60	◉	◉	\$24,424
Evangelical Community	59	◉	◉	\$8,908
Fulton County	5	◉	NR	\$15,305
Geisinger Wyoming Valley	258	◉	◉	\$32,106
Geisinger-Bloomsburg	15	◉	◉	\$22,101
Geisinger-Community	129	◉	◉	\$25,061
Geisinger/Danville	387	◉	◉	\$35,176
Gettysburg	74	◉	◉	\$19,735
Good Samaritan/Lebanon	129	◉	◉	\$19,054
Hanover	116	●	◉	\$15,084
Hazleton General	108	◉	◉	\$22,275
Heart of Lancaster	49	◉	◉	\$21,989
Holy Spirit	211	◉	◉	\$24,528
J C Blair Memorial	20	◉	◉	\$9,129
Jersey Shore	17	◉	◉	\$9,241
Lancaster General	566	○	◉	\$22,686

Kidney Failure - Acute

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	67	⊙	⊙	\$29,021
Lewistown	79	⊙	⊙	\$15,006
Lock Haven	29	⊙	⊙	\$27,372
Memorial York	69	⊙	⊙	\$18,033
Memorial/Towanda	6	⊙	⊙	\$10,574
Mid-Valley	14	●	⊙	\$15,179
Milton S Hershey	324	⊙	⊙	\$24,162
Moses Taylor	143	⊙	⊙	\$31,609
Mount Nittany	176	⊙	⊙	\$21,865
Muncy Valley	1	NR	NR	NR
Pinnacle Health	429	●	⊙	\$20,465
Pocono	193	⊙	⊙	\$28,739
Regional Scranton	182	⊙	⊙	\$22,746
Robert Packer	115	⊙	⊙	\$24,941
Soldiers & Sailors	50	⊙	⊙	\$9,536
Sunbury Community	17	●	⊙	\$22,529
Troy Community	6	⊙	⊙	\$11,702
Tyler Memorial	13	⊙	⊙	\$14,418
Wayne Memorial	76	⊙	⊙	\$13,693
Waynesboro	56	⊙	⊙	\$19,686
Wilkes-Barre General	257	●	⊙	\$32,599
Williamsport Regional	155	⊙	⊙	\$16,201
York	634	⊙	⊙	\$16,950

Pneumonia – Aspiration

Caused by inhaling food, drink, mucus from the mouth, or vomit into the lungs leading to inflammation and/or infection. Common causes of aspiration pneumonia include coma, problems with swallowing, and decreased mental alertness from medication or alcohol.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients. See page 9.

- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Pneumonia - Aspiration

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	8,152	6.8%	23.0%	\$41,274
Central & Northeastern PA	1,693	8.0%	19.1%	\$29,278
Barnes-Kasson County	1	NR	NR	NR
Berwick	57	◉	◉	\$49,025
Bucktail	0	NR	NR	NR
Carlisle Regional	26	●	◉	\$27,367
Chambersburg	46	◉	◉	\$20,356
Endless Mountains	3	NR	NR	NR
Ephrata Community	35	◉	◉	\$33,245
Evangelical Community	11	◉	◉	\$8,699
Fulton County	15	◉	◉	\$21,601
Geisinger Wyoming Valley	29	◉	○	\$35,191
Geisinger-Bloomsburg	6	◉	●	\$43,382
Geisinger-Community	20	◉	◉	\$30,024
Geisinger/Danville	53	◉	◉	\$46,035
Gettysburg	53	◉	○	\$21,879
Good Samaritan/Lebanon	80	◉	◉	\$29,028
Hanover	50	◉	◉	\$21,266
Hazleton General	56	◉	◉	\$31,368
Heart of Lancaster	14	◉	◉	\$34,505
Holy Spirit	67	◉	◉	\$32,037
J C Blair Memorial	10	◉	◉	\$12,027
Jersey Shore	2	NR	NR	NR
Lancaster General	216	◉	◉	\$29,199

Pneumonia - Aspiration

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	24	⊙	⊙	\$34,921
Lewistown	24	⊙	⊙	\$16,024
Lock Haven	20	⊙	⊙	\$41,112
Memorial York	28	⊙	⊙	\$20,990
Memorial/Towanda	10	⊙	⊙	\$21,449
Mid-Valley	5	⊙	⊙	\$32,111
Milton S Hershey	65	⊙	⊙	\$29,276
Moses Taylor	36	⊙	⊙	\$33,716
Mount Nittany 	71	●	⊙	\$27,114
Muncy Valley	4	NR	NR	NR
Pinnacle Health	71	⊙	⊙	\$26,616
Pocono	89	⊙	⊙	\$37,378
Regional Scranton	47	⊙	⊙	\$26,896
Robert Packer	28	⊙	⊙	\$25,872
Soldiers & Sailors	16	●	⊙	\$12,705
Sunbury Community	20	⊙	⊙	\$31,967
Troy Community	3	NR	NR	NR
Tyler Memorial	9	⊙	⊙	\$18,711
Wayne Memorial	21	⊙	⊙	\$17,964
Waynesboro	22	⊙	⊙	\$19,282
Wilkes-Barre General	73	⊙	⊙	\$44,611
Williamsport Regional	55	⊙	⊙	\$22,245
York	102	●	⊙	\$21,642

 This hospital has submitted comments specific to this condition. These comments are posted on PHC4's website at <http://www.phc4.org/reports/hpr/12/comments.htm>.

Pneumonia – Infectious


An infection in one or both lungs caused by bacteria or viruses.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients. See page 9.

- Rate significantly lower than expected.
- ◉ Rate not significantly different than expected.
- Rate significantly higher than expected.

NR Not reported. Fewer than five cases evaluated.

Pneumonia - Infectious				
Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	36,964	2.5%	16.4%	\$29,766
Central & Northeastern PA	10,037	2.8%	15.9%	\$22,722
Barnes-Kasson County	57	◉	◉	\$11,485
Berwick	68	◉	◉	\$36,811
Bucktail	9	◉	◉	\$10,463
Carlisle Regional	137	◉	◉	\$24,933
Chambersburg	237	◉	○	\$17,614
Endless Mountains	41	◉	◉	\$8,822
Ephrata Community	241	◉	○	\$27,740
Evangelical Community	80	◉	◉	\$8,335
Fulton County	75	◉	◉	\$18,436
Geisinger Wyoming Valley	413	◉	◉	\$31,963
Geisinger-Bloomsburg	119	◉	◉	\$29,713
Geisinger-Community	411	◉	◉	\$23,692
Geisinger/Danville	483	◉	◉	\$30,962
Gettysburg	262	◉	◉	\$17,421
Good Samaritan/Lebanon	282	◉	◉	\$21,697
Hanover	130	◉	◉	\$15,744
Hazleton General 	309	◉	●	\$23,883
Heart of Lancaster	114	◉	◉	\$22,876
Holy Spirit	463	◉	◉	\$24,384
J C Blair Memorial	115	◉	◉	\$9,443
Jersey Shore	96	◉	◉	\$12,275
Lancaster General	614	◉	○	\$22,052

 This hospital has submitted comments specific to this condition. These comments are posted on PHC4's website at <http://www.phc4.org/reports/hpr/12/comments.htm>.

Pneumonia - Infectious

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	118	⊙	⊙	\$34,545
Lewistown	237	⊙	⊙	\$15,160
Lock Haven	74	⊙	⊙	\$31,842
Memorial York	136	⊙	⊙	\$17,334
Memorial/Towanda	167	⊙	⊙	\$16,436
Mid-Valley	37	⊙	⊙	\$20,340
Milton S Hershey	373	●	⊙	\$21,551
Moses Taylor	267	⊙	⊙	\$29,181
Mount Nittany	274	⊙	⊙	\$22,618
Muncy Valley	41	⊙	⊙	\$12,402
Pinnacle Health	523	⊙	⊙	\$20,204
Pocono	464	⊙	⊙	\$25,002
Regional Scranton	388	⊙	⊙	\$22,421
Robert Packer	224	⊙	⊙	\$22,577
Soldiers & Sailors	148	⊙	⊙	\$14,604
Sunbury Community	109	⊙	⊙	\$27,094
Troy Community	64	⊙	⊙	\$11,414
Tyler Memorial	122	⊙	⊙	\$18,929
Wayne Memorial	158	⊙	⊙	\$15,224
Waynesboro	102	⊙	⊙	\$18,408
Wilkes-Barre General	491	⊙	⊙	\$35,504
Williamsport Regional	225	⊙	⊙	\$16,126
York	539	●	⊙	\$16,519

Septicemia

An infection in the bloodstream sometimes referred to as blood poisoning. Also includes patients in which septicemia progresses to a severe life-threatening infection known as sepsis. Sepsis occurs when there is system-wide inflammation as the body responds to the severe infection, resulting in further illness and injury.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients. See page 9.

- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Septicemia			
Hospital	Cases	Mortality	Average Hospital Charge
TOTAL: Statewide	39,832	13.7%	\$51,257
Central & Northeastern PA	12,058	11.8%	\$35,465
Barnes-Kasson County	11	◉	\$15,825
Berwick	91	◉	\$64,882
Bucktail	1	NR	NR
Carlisle Regional	262	◉	\$36,198
Chambersburg	797	◉	\$26,458
Endless Mountains	1	NR	NR
Ephrata Community	175	◉	\$35,880
Evangelical Community	463	◉	\$12,052
Fulton County	17	◉	\$23,790
Geisinger Wyoming Valley	444	◉	\$54,839
Geisinger-Bloomsburg	25	◉	\$41,963
Geisinger-Community	219	◉	\$37,822
Geisinger/Danville	1,060	◉	\$57,792
Gettysburg	145	◉	\$24,754
Good Samaritan/Lebanon	196	●	\$30,155
Hanover	403	◉	\$19,995
Hazleton General	458	◉	\$37,315
Heart of Lancaster	22	◉	\$37,762
Holy Spirit	766	◉	\$35,966
J C Blair Memorial	43	◉	\$12,466
Jersey Shore	19	◉	\$15,280
Lancaster General	760	◉	\$35,752

Readmission ratings were not reported for Septicemia to avoid counting readmissions that may have been planned for cancer treatment.

Septicemia

Hospital	Cases	Mortality	Average Hospital Charge
Lancaster Regional	69	⊙	\$49,489
Lewistown	168	⊙	\$22,746
Lock Haven	89	⊙	\$42,080
Memorial York	111	⊙	\$28,292
Memorial/Towanda	35	⊙	\$24,229
Mid-Valley	12	⊙	\$35,818
Milton S Hershey	828	⊙	\$39,561
Moses Taylor	231	⊙	\$46,840
Mount Nittany	405	⊙	\$31,635
Muncy Valley	21	⊙	\$18,063
Pinnacle Health	759	⊙	\$31,620
Pocono	158	⊙	\$43,402
Regional Scranton	365	⊙	\$36,165
Robert Packer	269	⊙	\$36,532
Soldiers & Sailors	90	⊙	\$18,874
Sunbury Community	31	⊙	\$31,242
Troy Community	5	⊙	\$13,556
Tyler Memorial	58	⊙	\$37,052
Wayne Memorial	75	●	\$22,355
Waynesboro	241	⊙	\$25,573
Wilkes-Barre General	171	●	\$52,516
Williamsport Regional	368	⊙	\$25,597
York	1,121	⊙	\$29,051

Readmission ratings were not reported for Septicemia to avoid counting readmissions that may have been planned for cancer treatment.

Stroke

An ischemic stroke occurs when there is a blockage or obstruction in a blood vessel in the brain (cerebral artery) or neck (carotid artery) causing damage or death to an area of the brain. Not included are patients who are treated with a balloon (angioplasty)/stent procedure or other surgery to remove the blockage or obstruction, or patients admitted with a rupture or break in an artery (hemorrhagic stroke) unless the hemorrhage occurs after the ischemic stroke but during the hospitalization.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients. See page 9.

- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
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- NR Not reported. Fewer than five cases evaluated.

Stroke				
Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	21,002	4.0%	13.8%	\$40,240
Central & Northeastern PA	5,562	4.0%	13.3%	\$26,800
Barnes-Kasson County	8	◉	●	\$13,328
Berwick	34	◉	◉	\$36,431
Bucktail	0	NR	NR	NR
Carlisle Regional	80	◉	◉	\$26,825
Chambersburg	230	◉	○	\$24,564
Endless Mountains	14	◉	◉	\$5,796
Ephrata Community	97	◉	◉	\$27,653
Evangelical Community	107	◉	◉	\$13,921
Fulton County	17	◉	◉	\$22,618
Geisinger Wyoming Valley	245	◉	◉	\$38,132
Geisinger-Bloomsburg	2	NR	NR	NR
Geisinger-Community	231	◉	◉	\$31,303
Geisinger/Danville	419	◉	◉	\$35,619
Gettysburg	62	◉	◉	\$22,353
Good Samaritan/Lebanon	94	◉	◉	\$21,777
Hanover	110	◉	◉	\$18,978
Hazleton General	73	◉	◉	\$29,126
Heart of Lancaster	45	◉	◉	\$28,639
Holy Spirit	241	◉	◉	\$27,908
J C Blair Memorial	13	◉	◉	\$10,692
Jersey Shore	11	◉	◉	\$9,814
Lancaster General	562	○	○	\$23,183

Stroke

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Lancaster Regional	43	⊙	⊙	\$31,300
Lewistown	66	⊙	⊙	\$15,394
Lock Haven	17	⊙	⊙	\$27,798
Memorial York	61	⊙	⊙	\$19,652
Memorial/Towanda	11	⊙	⊙	\$16,689
Mid-Valley	7	⊙	⊙	\$21,718
Milton S Hershey	411	⊙	⊙	\$34,665
Moses Taylor	97	⊙	⊙	\$35,586
Mount Nittany	155	⊙	⊙	\$24,802
Muncy Valley	7	⊙	⊙	\$9,577
Pinnacle Health	405	●	⊙	\$23,854
Pocono	235	⊙	⊙	\$29,042
Regional Scranton	151	⊙	⊙	\$22,048
Robert Packer	155	⊙	⊙	\$29,180
Soldiers & Sailors	24	⊙	⊙	\$9,828
Sunbury Community	9	⊙	⊙	\$20,740
Troy Community	1	NR	NR	NR
Tyler Memorial	7	⊙	⊙	\$20,175
Wayne Memorial	57	⊙	⊙	\$16,023
Waynesboro	36	⊙	⊙	\$24,919
Wilkes-Barre General	275	⊙	⊙	\$35,774
Williamsport Regional	195	⊙	⊙	\$14,286
York	442	●	⊙	\$21,089

Medicare and Medicaid Payments – 2011 Statewide Data

Medicare fee-for-service (FFS), Medicaid FFS, and Medicaid managed care organization (MCO) payments for the 16 medical conditions/surgical procedures included in this Hospital Performance Report

Displayed separately are the average amounts paid by Medicare fee-for-service, Medicaid fee-for-service, and Medicaid managed care organizations for inpatient hospitalizations. Payments from Medicare Advantage plans (e.g., Medicare HMOs) are not included, nor are patient liabilities (e.g., coinsurance and deductible dollar amounts). The most recent payment data available to PHC4 is for calendar year 2011.

The average Medicare fee-for-service payment is calculated using the claim-payment amount based on data provided by the Centers for Medicare and Medicaid Services (CMS). The average Medicaid fee-for-service and managed care organization payments are calculated separately and are based on the claim-payment amounts obtained from the Pennsylvania Department of Public Welfare. The average payment for each payer category is calculated by summing the payment amounts for the cases in a particular medical condition/surgical procedure and dividing the sum by the number of cases in that condition/procedure group for the given payer.

Most of the medical conditions and surgical procedures included in this report are defined using ICD.9.CM (International Classification of Diseases, Ninth Revision, Clinical Modification) diagnosis and procedure codes, with a secondary requirement that they be limited to particular MS-DRGs (Medicare Severity – Diagnosis-Related Group) – information available from the discharge data that PHC4 receives from Pennsylvania hospitals. Two conditions (Chest Pain and Hypotension and Fainting) are comprised of single MS-DRGs.

In this section, average payments are displayed for the 16 medical conditions/surgical procedures included in this report – broken down by the MS-DRGs included within each condition/procedure. While the 16 conditions/procedures have been defined using diagnosis and procedure codes that represent a clinically cohesive population, the payment data is displayed by the individual MS-DRGs included within each condition to account for variations in case-mix.

Medicare and Medicaid Payments – 2011 Statewide Data

For the 16 medical conditions/surgical procedures included in this Hospital Performance Report

MS-DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
		Cases	Average Payment	Cases	Average Payment	Cases	Average Payment
Abnormal Heartbeat		18,792	\$7,263	653	\$7,710	948	\$7,159
242	Permanent Cardiac Pacemaker Implant w/ MCC	729	\$21,507	12	\$19,928	12	\$20,412
243	Permanent Cardiac Pacemaker Implant w/ CC	1,452	\$15,588	23	\$18,214	18	\$17,603
244	Permanent Cardiac Pacemaker Implant w/o CC/MCC	1,452	\$11,710	23	\$13,512	33	\$15,643
246	Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	28	\$18,465	0	NR	0	NR
247	Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/o MCC	46	\$12,393	2	NR	1	NR
248	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	14	\$16,978	0	NR	0	NR
249	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/o MCC	17	\$12,937	6	NR	0	NR
250	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/ MCC	189	\$21,344	11	\$18,260	11	\$15,505
251	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/o MCC	1,084	\$12,495	46	\$11,228	94	\$10,607
258	Cardiac Pacemaker Device Replacement w/ MCC	5	NR	0	NR	0	NR
259	Cardiac Pacemaker Device Replacement w/o MCC	13	\$10,352	3	NR	2	NR
260	Cardiac Pacemaker Revision Except Device Replacement w/ MCC	5	NR	0	NR	0	NR
261	Cardiac Pacemaker Revision Except Device Replacement w/ CC	9	NR	0	NR	1	NR
262	Cardiac Pacemaker Revision Except Device Replacement w/o CC/MCC	5	NR	0	NR	0	NR
286	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC	181	\$12,490	19	\$12,404	10	NR
287	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC	426	\$6,032	38	\$8,994	34	\$5,937
308	Cardiac Arrhythmia and Conduction Disorders w/ MCC	3,098	\$7,037	93	\$9,782	123	\$6,759
309	Cardiac Arrhythmia and Conduction Disorders w/ CC	4,809	\$4,426	161	\$5,730	293	\$6,200
310	Cardiac Arrhythmia and Conduction Disorders w/o CC/MCC	5,230	\$2,615	216	\$3,805	316	\$4,862
Chest Pain		4,139	\$2,774	247	\$3,599	1,463	\$3,799
313	Chest Pain	4,139	\$2,774	247	\$3,599	1,463	\$3,799

Note: Differences in the approaches used by Medicare and Medicaid in determining payments may account for some of the variation seen across these payers for a given condition.

NR = Not Reported (10 or fewer cases)
 CC = Complication or Comorbidity
 MCC = Major Complication or Comorbidity

Medicare and Medicaid Payments – 2011 Statewide Data

For the 16 medical conditions/surgical procedures included in this Hospital Performance Report

MS-DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
		Cases	Average Payment	Cases	Average Payment	Cases	Average Payment
Chronic Obstructive Pulmonary Disease (COPD)		14,848	\$5,183	1,031	\$5,864	2,180	\$6,447
190	Chronic Obstructive Pulmonary Disease w/ MCC	5,105	\$6,489	302	\$7,617	459	\$6,782
191	Chronic Obstructive Pulmonary Disease w/ CC	5,378	\$5,206	324	\$5,888	846	\$6,565
192	Chronic Obstructive Pulmonary Disease w/o CC/MCC	4,365	\$3,626	405	\$4,538	875	\$6,156
Colorectal Procedures		3,908	\$18,806	424	\$18,099	445	\$16,782
329	Major Small and Large Bowel Procedures w/ MCC	1,129	\$31,560	130	\$27,911	94	\$21,521
330	Major Small and Large Bowel Procedures w/ CC	1,665	\$15,146	190	\$15,408	191	\$17,888
331	Major Small and Large Bowel Procedures w/o CC/MCC	744	\$9,527	75	\$9,212	120	\$11,948
332	Rectal Resection w/ MCC	55	\$28,457	6	NR	4	NR
333	Rectal Resection w/ CC	193	\$14,742	15	\$11,492	25	\$15,544
334	Rectal Resection w/o CC/MCC	122	\$9,395	8	NR	11	\$12,902
Congestive Heart Failure (CHF)		22,998	\$6,274	779	\$9,164	1,575	\$8,011
286	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC	330	\$14,727	28	\$23,909	29	\$8,964
287	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC	844	\$7,024	124	\$10,725	132	\$8,791
291	Heart Failure and Shock w/ MCC	6,847	\$8,462	142	\$12,699	307	\$8,107
292	Heart Failure and Shock w/ CC	10,448	\$5,702	360	\$7,390	833	\$8,127
293	Heart Failure and Shock w/o CC/MCC	4,529	\$3,531	125	\$5,407	274	\$7,074
Diabetes - Medical Management		4,918	\$5,166	1,320	\$6,207	2,340	\$5,348
073	Cranial and Peripheral Nerve Disorders w/ MCC	202	\$7,848	15	\$8,671	38	\$6,321
074	Cranial and Peripheral Nerve Disorders w/o MCC	629	\$4,863	99	\$6,771	327	\$5,675
299	Peripheral Vascular Disorders w/ MCC	44	\$8,425	3	NR	3	NR
300	Peripheral Vascular Disorders w/ CC	105	\$5,449	13	\$8,213	10	NR
301	Peripheral Vascular Disorders w/o CC/MCC	5	NR	0	NR	4	NR
637	Diabetes w/ MCC	825	\$8,445	162	\$11,583	202	\$6,257
638	Diabetes w/ CC	2,153	\$4,525	591	\$5,920	997	\$5,350
639	Diabetes w/o CC/MCC	827	\$2,751	414	\$4,035	709	\$4,799
698	Other Kidney and Urinary Tract Diagnoses w/ MCC	25	\$8,813	6	NR	7	NR
699	Other Kidney and Urinary Tract Diagnoses w/ CC	94	\$5,957	12	\$7,039	31	\$6,815
700	Other Kidney and Urinary Tract Diagnoses w/o CC/MCC	9	NR	5	NR	12	\$4,772

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Medicare and Medicaid Payments – 2011 Statewide Data

For the 16 medical conditions/surgical procedures included in this Hospital Performance Report

MS-DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
		Cases	Average Payment	Cases	Average Payment	Cases	Average Payment
Gallbladder Removal - Laparoscopic		2,323	\$9,776	786	\$6,933	1,002	\$7,655
411	Cholecystectomy with Common Duct Exploration (C.D.E.) w/ MCC	2	NR	1	NR	0	NR
412	Cholecystectomy with C.D.E. w/ CC	3	NR	2	NR	1	NR
413	Cholecystectomy with C.D.E. w/o CC/MCC	2	NR	2	NR	1	NR
417	Laparoscopic Cholecystectomy without C.D.E. w/ MCC	547	\$15,360	104	\$11,379	97	\$9,788
418	Laparoscopic Cholecystectomy without C.D.E. w/ CC	926	\$9,558	217	\$7,511	300	\$8,571
419	Laparoscopic Cholecystectomy without C.D.E. w/o CC/MCC	843	\$6,345	460	\$5,677	603	\$6,855
Gallbladder Removal - Open		614	\$14,356	117	\$11,883	108	\$9,711
411	Cholecystectomy with C.D.E. w/ MCC	15	\$25,974	1	NR	2	NR
412	Cholecystectomy with C.D.E. w/ CC	29	\$13,742	2	NR	3	NR
413	Cholecystectomy with C.D.E. w/o CC/MCC	11	\$9,226	2	NR	2	NR
414	Cholecystectomy Except by Laparoscope without C.D.E. w/ MCC	181	\$22,191	19	\$24,401	11	\$11,909
415	Cholecystectomy Except by Laparoscope without C.D.E. w/ CC	240	\$11,794	34	\$12,589	47	\$10,118
416	Cholecystectomy Except by Laparoscope without C.D.E. w/o CC/MCC	138	\$7,811	59	\$7,699	43	\$8,103
Heart Attack - Medical Management		5,600	\$8,110	274	\$11,071	222	\$11,719
280	Acute Myocardial Infarction, Discharged Alive w/ MCC	2,543	\$10,467	89	\$17,209	65	\$13,556
281	Acute Myocardial Infarction, Discharged Alive w/ CC	1,623	\$6,471	98	\$8,837	91	\$11,889
282	Acute Myocardial Infarction, Discharged Alive w/o CC/MCC	896	\$4,099	75	\$5,771	60	\$9,435
283	Acute Myocardial Infarction, Expired w/ MCC	402	\$10,147	6	NR	6	NR
284	Acute Myocardial Infarction, Expired w/ CC	95	\$4,506	5	NR	0	NR
285	Acute Myocardial Infarction, Expired w/o CC/MCC	41	\$2,866	1	NR	0	NR
Hypotension and Fainting		7,178	\$3,673	250	\$4,489	551	\$4,432
312	Syncope and Collapse	7,178	\$3,673	250	\$4,489	551	\$4,432
Kidney and Urinary Tract Infections		11,993	\$4,777	690	\$5,991	1,204	\$5,705
689	Kidney and Urinary Tract Infections w/ MCC	3,235	\$6,563	118	\$10,223	191	\$7,246
690	Kidney and Urinary Tract Infections w/o MCC	8,758	\$4,118	572	\$5,118	1,013	\$5,414

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Medicare and Medicaid Payments – 2011 Statewide Data

For the 16 medical conditions/surgical procedures included in this Hospital Performance Report

MS-DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
		Cases	Average Payment	Cases	Average Payment	Cases	Average Payment
Kidney Failure - Acute		11,270	\$6,689	623	\$10,316	1,004	\$7,680
682	Renal Failure w/ MCC	3,589	\$9,484	196	\$15,605	239	\$8,616
683	Renal Failure w/ CC	6,567	\$5,723	353	\$8,041	612	\$7,523
684	Renal Failure w/o CC/MCC	1,114	\$3,375	74	\$7,160	153	\$6,846
Pneumonia - Aspiration		5,053	\$9,414	183	\$15,380	267	\$10,298
177	Respiratory Infections and Inflammations w/ MCC	2,325	\$11,486	83	\$21,482	93	\$10,482
178	Respiratory Infections and Inflammations w/ CC	2,152	\$8,292	87	\$10,768	137	\$10,509
179	Respiratory Infections and Inflammations w/o CC/MCC	576	\$5,240	13	\$7,285	37	\$9,051
Pneumonia - Infectious		17,950	\$6,117	1,180	\$6,687	1,998	\$7,289
177	Respiratory Infections and Inflammations w/ MCC	485	\$11,649	37	\$17,310	40	\$13,440
178	Respiratory Infections and Inflammations w/ CC	450	\$8,624	27	\$10,838	29	\$10,870
179	Respiratory Infections and Inflammations w/o CC/MCC	74	\$5,466	10	NR	4	NR
193	Simple Pneumonia and Pleurisy w/ MCC	5,378	\$8,198	232	\$9,525	354	\$8,270
194	Simple Pneumonia and Pleurisy w/ CC	8,126	\$5,399	572	\$5,861	1,100	\$7,186
195	Simple Pneumonia and Pleurisy w/o CC/MCC	3,437	\$3,462	302	\$4,372	471	\$6,053
Septicemia		17,030	\$11,235	1,448	\$16,695	1,295	\$10,851
870	Septicemia or Severe Sepsis with Mechanical Ventilation 96+ Hours	957	\$37,207	195	\$29,020	116	\$22,233
871	Septicemia or Severe Sepsis without Mechanical Ventilation 96+ Hours w/ MCC	11,318	\$11,156	840	\$17,578	767	\$10,212
872	Septicemia or Severe Sepsis without Mechanical Ventilation 96+ Hours w/o MCC	4,755	\$6,197	413	\$9,081	412	\$8,835
Stroke		8,951	\$7,089	738	\$9,849	616	\$10,354
061	Acute Ischemic Stroke with Use of Thrombolytic Agent w/ MCC	138	\$18,868	12	\$25,165	4	NR
062	Acute Ischemic Stroke with Use of Thrombolytic Agent w/ CC	198	\$11,471	19	\$10,513	11	\$14,828
063	Acute Ischemic Stroke with Use of Thrombolytic Agent w/o CC/MCC	63	\$8,881	6	NR	9	NR
064	Intracranial Hemorrhage or Cerebral Infarction w/ MCC	1,962	\$11,127	126	\$18,855	95	\$12,034
065	Intracranial Hemorrhage or Cerebral Infarction w/ CC	4,165	\$6,267	341	\$8,323	292	\$9,948
066	Intracranial Hemorrhage or Cerebral Infarction w/o CC/MCC	2,425	\$4,160	234	\$6,477	205	\$9,760

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