

Readmissions for the Same Condition

January 2013 – August 2014 Data



PA Health Care Cost Containment Council

June 2015

About the Report

Readmissions for the Same Condition

This report on readmissions for the same condition presents hospital-specific results for four conditions: abnormal heartbeat, chronic obstructive pulmonary disease (COPD), congestive heart failure (CHF), and diabetes – medical management. The study examines the percent of hospitalizations, discharged January 2013 through August 2014, that were followed by a readmission for the same condition as that of a previous hospital stay, where only the first readmission within 30 days of discharge is considered. Produced by the Pennsylvania Health Care Cost Containment Council (PHC4), this report shows hospital-specific, risk-adjusted ratings for readmissions for the same condition and the average hospital charge for the readmission stays. Also included are statewide statistics related to patient characteristics, county-level results, regional and statewide trends, as well as Medicare and Medicaid payment information. Taken together, this information can be helpful to patients, families, and purchasers in making more informed health care decisions, and can serve as an aid to providers in highlighting additional opportunities for quality improvement and cost containment.

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About PHC4

Created by the PA General Assembly in 1986, 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. More than 840,000 public reports on patient treatment results are downloaded from the PHC4 website each year, and nearly 100 organizations and individuals annually utilize PHC4’s special requests process to access and use data. PHC4 is governed by a 25-member board of directors, representing business, labor, consumers, health care providers, insurers, and state government.

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About the Report

About readmissions

In recent years, the rate of patient readmission to hospitals has come under increasing scrutiny, as both a potential indicator of the quality of care and as a significant cost driver. While readmissions are not always preventable and indeed are often pre-planned, they also can result from a wide variety of factors related to action taken or not taken during the initial hospital stay or to a patient's post-discharge care or behavior. Studying readmissions for the same condition may be of significant interest to both providers and utilizers of health care as this information may help identify frequent and potentially preventable readmissions, especially for chronic conditions. There is a growing consensus that the health care system not only can, but must, reduce the number of preventable readmissions. By recognizing and addressing this as a key component for improving the quality of health care, it is anticipated that not only will repeat patient hospitalizations be minimized but so too will the associated costs.

About this report

The Pennsylvania Health Care Cost Containment Council (PHC4) is uniquely positioned to evaluate and report on hospital readmissions in Pennsylvania through the inpatient data that it collects from Pennsylvania hospitals.

- This new report on readmissions for the same condition includes hospital-specific ratings for four different medical conditions, as defined by ICD-9-CM (International Classification of Diseases, Ninth Revision, Clinical Modification) codes and/or Medicare Severity – Diagnosis-Related Groups (MS-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 the period January 2013 through August 2014.

Also on PHC4's website for Readmissions for the Same Condition:

- ⇒ [Statewide Statistics and Key Findings](#)
 - ⇒ [Hospital Results](#)
 - ⇒ [Medicare and Medicaid Payments](#)
 - ⇒ [County-Level Rates and Regional Trends](#)
 - ⇒ [Hospital Comments](#)
 - ⇒ [Technical Notes](#)
 - ⇒ [Downloadable Data](#)
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About the Report

- All Pennsylvania general acute care and several 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 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 time frame of the report.
- Hospital names have been shortened in many cases for formatting purposes. Hospital names may be different today than they were during the period covered in this report due to mergers and name changes.

About the data

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.

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 Human Services. The most recent Medicare and Medicaid payment data available to PHC4 for use in this report was for 2011-2012.

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” on admission to the hospital—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 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 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, coronary artery disease, etc., to calculate risk for the patients in this report.

About the Report

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, coronary artery disease, 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 this report and why is it important?

In the hospital results section of the report are the following measures, reported for each hospital:

- **Total Number 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 have 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 that small or specialty hospitals may report low volume due to the unique patient population they serve or geographic location.
- **Risk-Adjusted 30-Day Readmissions for the Same Condition.** This measure is reported as a statistical rating that represents the number of patients who are readmitted for the same condition as the initial or index hospital stay within 30 days after being discharged. Index hospitalizations are the beginning point for examining readmissions and, for this report, include adult inpatient discharges for abnormal heartbeat, COPD, CHF, or diabetes – medical management. All analyses are limited to discharges from Pennsylvania general and specialty general acute care hospitals only. Readmissions that are likely to have been planned (identified through a set of criteria used by the Centers for Medicare and Medicaid Services (CMS)—referred to as the “Planned Readmission Algorithm, Version 3.0”¹) are not included in the analysis. While some re-hospitalizations can be expected, high quality care may lessen the need for subsequent, unplanned hospitalizations. To determine the risk-adjusted rating for readmissions for the same condition, PHC4 compares the number of

¹ Centers for Medicare and Medicaid Services. 2014. “2014 Measures and Specifications Report: Hospital-Level 30-Day Risk-Standardized Readmission Measures.” Available at <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HospitalQualityInits/Measure-Methodology.html>

About the Report

patients one could reasonably expect to be readmitted (for the same condition), after accounting for patient risk, with the actual number of such readmissions. (Please see “Understanding the Symbols” box on this page.)

- **Case Mix Adjusted Average Hospital Charge of Readmissions for the Same Condition.** The average hospital charge represents the entire length of the readmission stay for the same condition. 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 is adjusted for the mix of cases (readmissions) that are specific to each hospital and includes only charges for patients readmitted back to the original hospital to ensure the figures reported are specific to that hospital alone. (For more information, please refer to the Technical Notes at www.phc4.org).

In the payments section of the report is information about Medicare and Medicaid payments for readmissions for the same condition:

- **Medicare and Medicaid Payments for Readmissions.** This section of the report displays the average payments made by Medicare fee-for-service, Medicaid fee-for-service, and Medicaid managed care for readmissions for the same condition (along with the number of readmissions included in the average payment). Included are payments for patients readmitted to any Pennsylvania hospital (original or other general or specialty general acute care hospital). Detailed information is also shown, which breaks down the results by the MS-DRGs (Medicare Severity – Diagnosis-Related Group) associated with each condition. The most recent payment data available to PHC4 was for years 2011 through 2012.

Understanding the Symbols

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

- **Hospital’s rate was significantly lower than expected.** Fewer patients 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 were readmitted was within the range anticipated based on patient risk and random variation.
- **Hospital’s rate was significantly higher than expected.** More patients were readmitted than could be attributed to patient risk and random variation.

About the Report

Uses of this report

This report can be used as a tool to examine hospital performance in specific treatment categories. It is not intended to be a sole source of information for making decisions about health care, nor should it be used to generalize about the overall quality of care provided by a hospital. Readers of this report should use it in discussions with their physicians who can answer specific questions and concerns about their care.

- **Patients/Consumers** can use this report as an aid in making decisions about where to seek treatment for the conditions detailed in this report. This report should be used in conjunction with a physician or other health care provider when making health care decisions.
- **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 health care options.
- **Everyone** can use this information to raise important questions about why differences exist in the quality and efficiency of care.

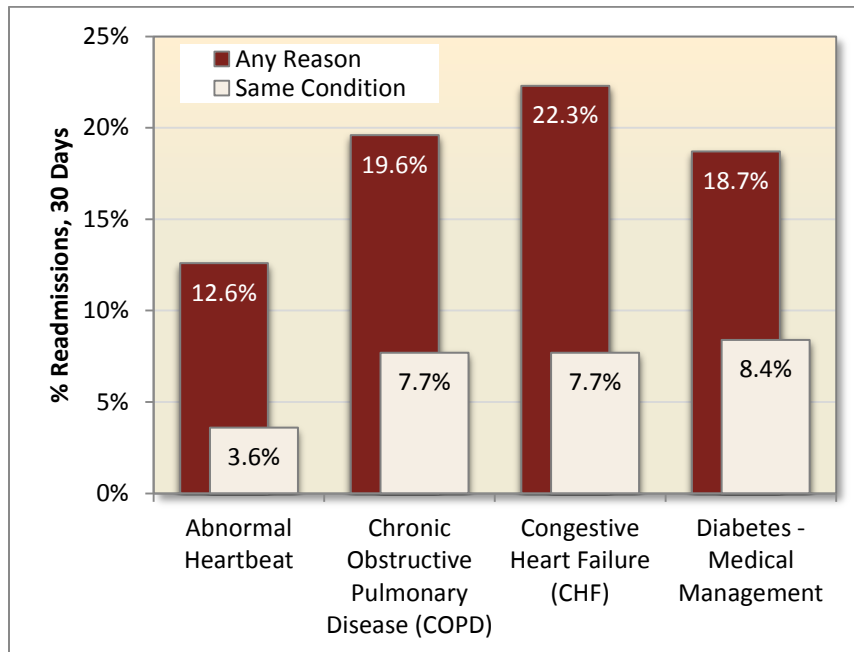
The measurement of quality is highly complex, and the information used to capture such measures is limited. A readmission is sometimes an unavoidable consequence of a patient's medical condition. Hospitals and physicians may do everything right, and the patient may still need to be readmitted. However, 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.

Statewide Statistics and Key Findings

Statewide information about readmissions and the key findings of this report are presented in this section. The study examines hospitalizations from January 1, 2013 through August 31, 2014 that were followed by a readmission within 30 days of discharge for four conditions: abnormal heartbeat, chronic obstructive pulmonary disease (COPD), congestive heart failure (CHF), and diabetes – medical management.

Statewide 30-day readmission rates are shown in Figure 1. For each condition, the overall rate of readmission for any reason is compared to the overall rate of readmission for the same condition.

Figure 1. 30-Day Readmission Rates: Readmissions for Any Reason versus Same Condition



Studying readmissions for the same condition may be of significant interest to both providers and utilizers of health care as this information may help identify frequent and potentially preventable readmissions, especially for chronic conditions.

Other Information about Readmissions from PHC4:

PHC4 has issued a number of other reports and research briefs that highlight hospital readmissions including PHC4's *Hospital Performance Report*, *Cardiac Surgery in Pennsylvania* report, and the *Knee and Hip Replacements* report. PHC4 has also reported readmission data for patients who contracted healthcare-associated infections and released a general overview of readmissions that includes statewide and county rates, along with conditions, reasons, and patient characteristics associated with readmissions. All of these reports are available on PHC4's website at www.phc4.org.

Statewide Statistics and Key Findings

Table 1 examines differences between hospitalizations that were either followed by a readmission within 30 days of discharge or not. Hospitalizations that were followed by readmissions for any reason are compared to hospital stays that were followed by readmissions for the same condition. The information in this table is specific to index hospitalizations only (not readmission hospitalizations). Index hospitalizations are the beginning point for examining readmissions and for this report include adult inpatient discharges for abnormal heartbeat, COPD, CHF, or diabetes – medical management.

Overall, patients with readmissions (for any reason or for the same condition) spent more days in the hospital during their initial stay compared to patients who were not readmitted.

Table 1. Hospitalizations followed by Readmissions within 30 Days January 1, 2013–August 31, 2014 Data							
Condition	Total Index Hospital Stays	Was the Index (Initial) Hospitalization followed by a Readmission?					
		No		Yes			
		Patients without Readmissions		Patients with Readmissions for Any Reason		Patients with Readmissions for Same Condition	
		Number of Index Hospital Stays	Average Length of Stay for the Index Stay	Number of Index Hospital Stays	Average Length of Stay for the Index Stay	Number of Index Hospital Stays	Average Length of Stay for the Index Stay
Abnormal Heartbeat	62,235	54,423	3.2	7,812	4.1	2,247	3.3
COPD	55,398	44,524	4.0	10,874	4.4	4,285	4.1
CHF	63,140	49,034	4.7	14,106	5.2	4,860	5.0
Diabetes – Medical Management	25,257	20,527	3.4	4,730	4.0	2,133	3.5

Focusing on readmissions for the same condition...

The total number of days in the hospital for these readmissions amounted to:

- Readmissions for abnormal heartbeat ... **7,673 additional days** spent in the hospital
- Readmissions for COPD ... **19,340 additional days** spent in the hospital
- Readmissions for CHF ... **26,054 additional days** spent in the hospital
- Readmissions for diabetes – medical management ... **7,854 additional days** spent in the hospital

Statewide Statistics and Key Findings

For these four conditions alone, readmissions for the same condition within 30 days amounted to over \$84 million (\$84,031,378) in Medicare and Medicaid payments for the two-year period 2011-2012 (the most recent payment data available to PHC4).

Condition	Medicare Fee-for-Service	Medicaid Fee-for-Service	Medicaid Managed Care
Abnormal Heartbeat	\$8,651,623	\$173,782	\$700,851
COPD	\$19,252,017	\$1,059,338	\$6,989,916
CHF	\$29,696,224	\$1,065,158	\$4,093,025
Diabetes – Medical Management	\$4,728,456	\$1,849,005	\$5,771,983
Total	\$62,328,320	\$4,147,283	\$17,555,775

While the figures in Table 2 shed some light on the financial impact of readmissions for the same condition for Medicare (fee-for-service) and Medicaid (fee-for-service and managed care), they do not include payments for readmissions covered by other insurance types or for uninsured patients. As an estimate, if payments for these additional readmissions were made at the Medicare fee-for-service rate, an additional \$77 million would be added to the total amount paid in 2011-2012 for these four conditions. Estimated additional payments by condition: abnormal heartbeat = \$12 million; COPD = \$26 million; CHF = \$28 million; diabetes – medical management = \$11 million.

Trends in rates of readmission for the same condition:

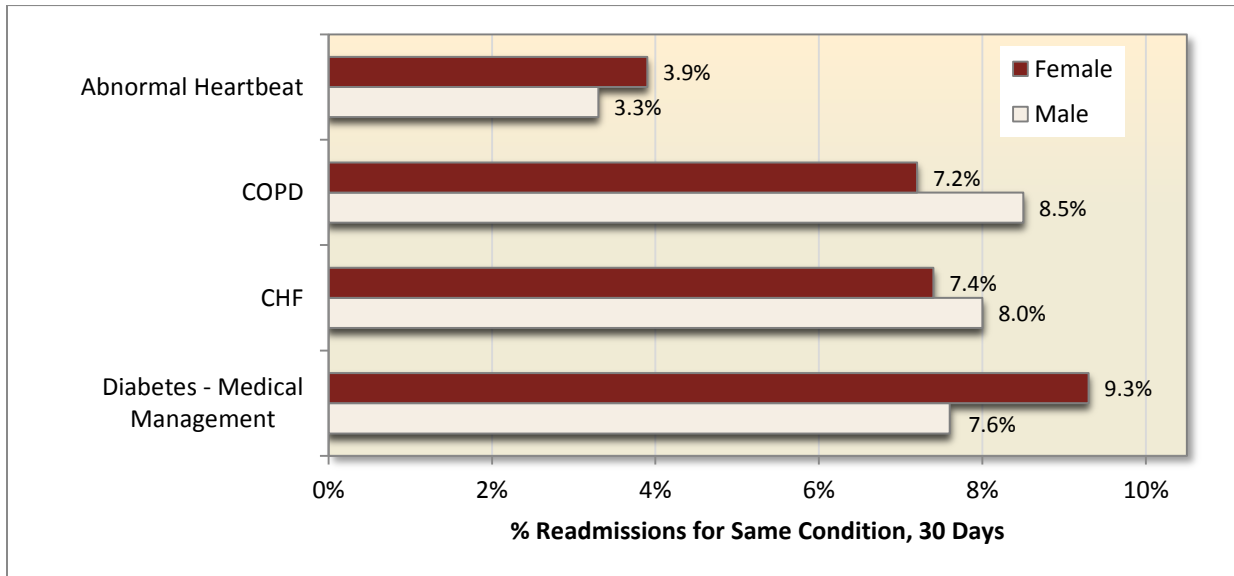
Statewide, looking at years 2008 through the time period covered in this report, there was a significant decline in readmission rates for the same condition for COPD since 2008. For CHF, there was a significant decline starting in 2010. There were no significant changes since 2008 for abnormal heartbeat or diabetes – medical management.

Regionally, there was a significant decline in these readmission rates for COPD in Western PA. Significant declines were seen in CHF since 2010 for each region (Western PA, Central & Northeastern PA, and Southeastern PA). The only significant increase reported was since 2008 for Central & Northeastern PA for the condition diabetes – medical management.

Statewide Statistics and Key Findings

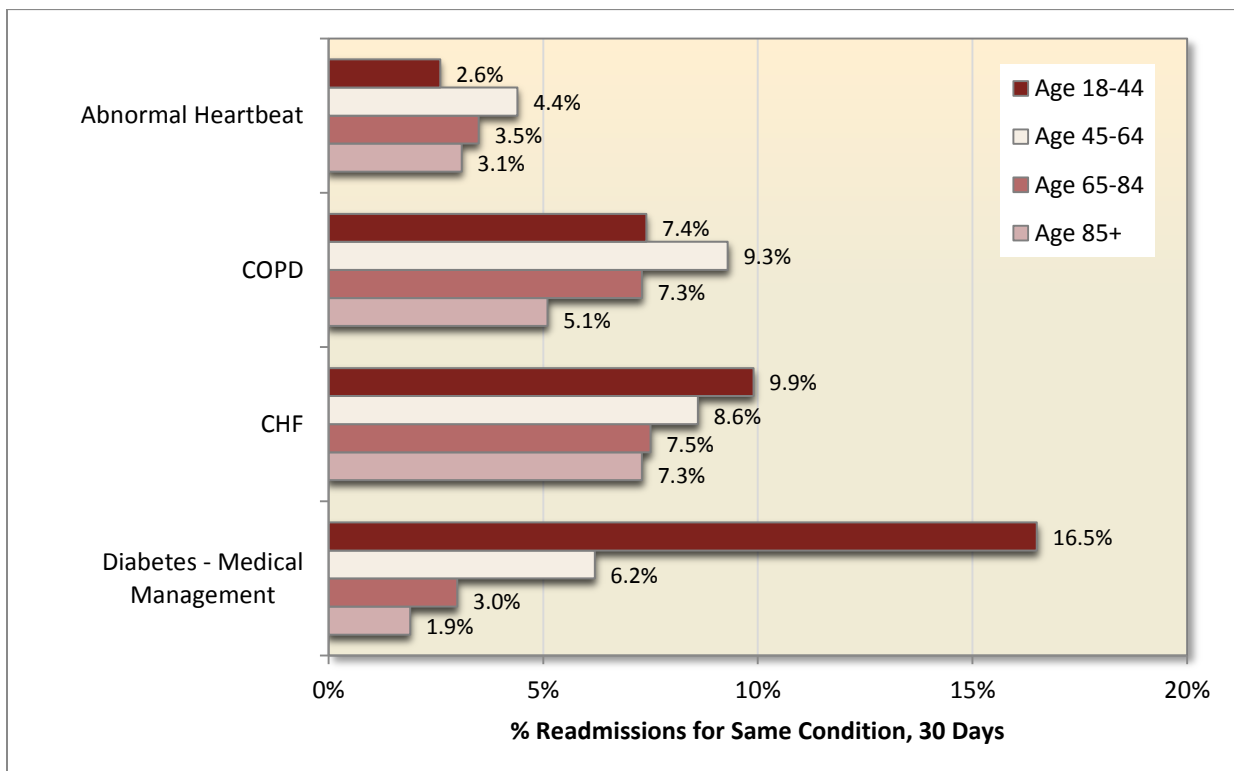
The largest gender difference in the rates of readmission for the same condition occurred for diabetes - medical management, where the rate was over 21% higher for females versus males.

Figure 2. Rates of Readmission for Same Condition, by Gender



The highest rate of readmission for the same condition occurred in the 18-44 age group for diabetes – medical management.

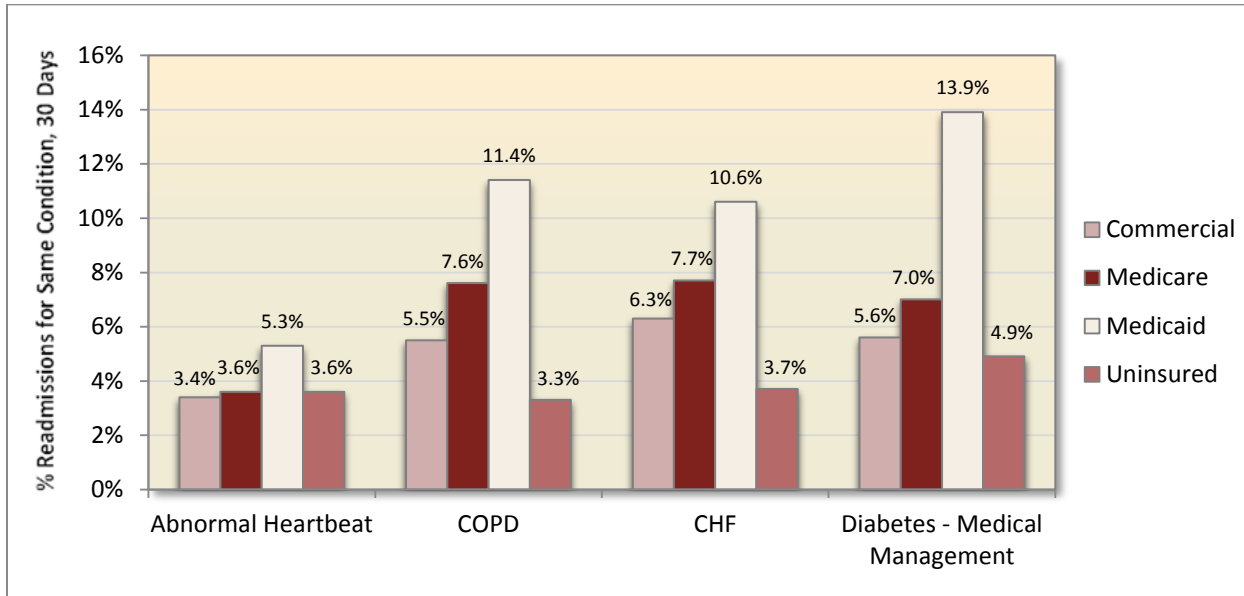
Figure 3. Rates of Readmission for Same Condition, by Age



Statewide Statistics and Key Findings

For all four conditions, the Medicaid category was associated with the highest rates of readmission for the same condition.

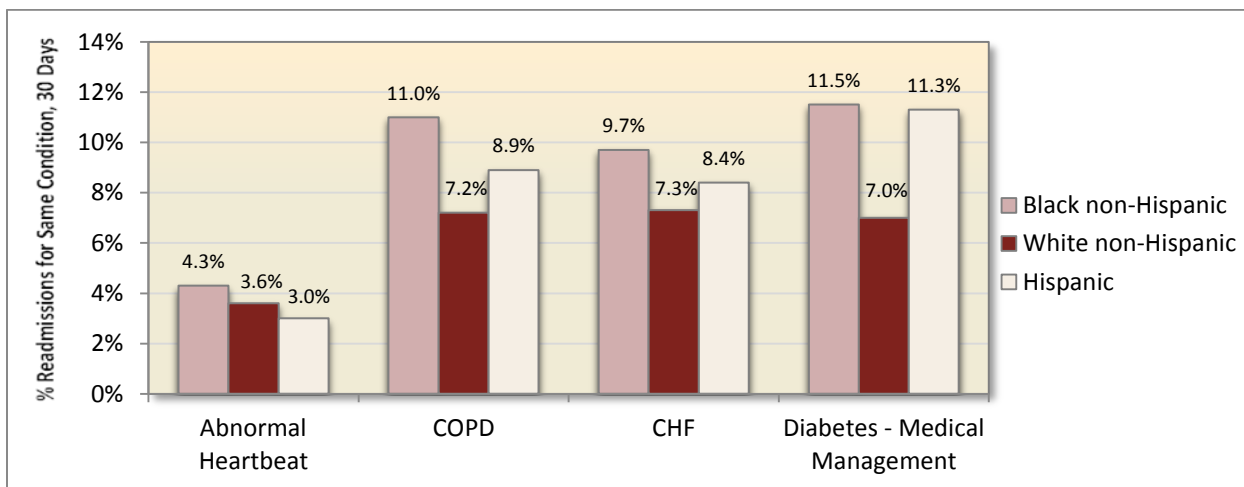
Figure 4. Rates of Readmission for Same Condition, by Payer*



*The payer was identified by the hospital in the discharge record as the anticipated payer and may not necessarily be the organization that ultimately paid the claim. Included in each category are all types of payer organizations such as health maintenance organizations, fee-for-service, preferred provider organizations, etc. Not shown are data for other low-volume payers such as governmental payers or for hospitalizations in which this information was unknown, invalid, or missing.

For all four conditions, the black non-Hispanic category had the highest rates of readmission for the same condition.

Figure 5. Rates of Readmission for Same Condition, by Race/Ethnicity*



*Internal PHC4 analysis suggests Hispanic ethnicity may be underreported. Not shown are data for other low-volume categories of race/ethnicity such as Asian, American Indian, Alaskan Native, Native Hawaiian, etc., or for hospitalizations in which this information was unknown, invalid, or missing.

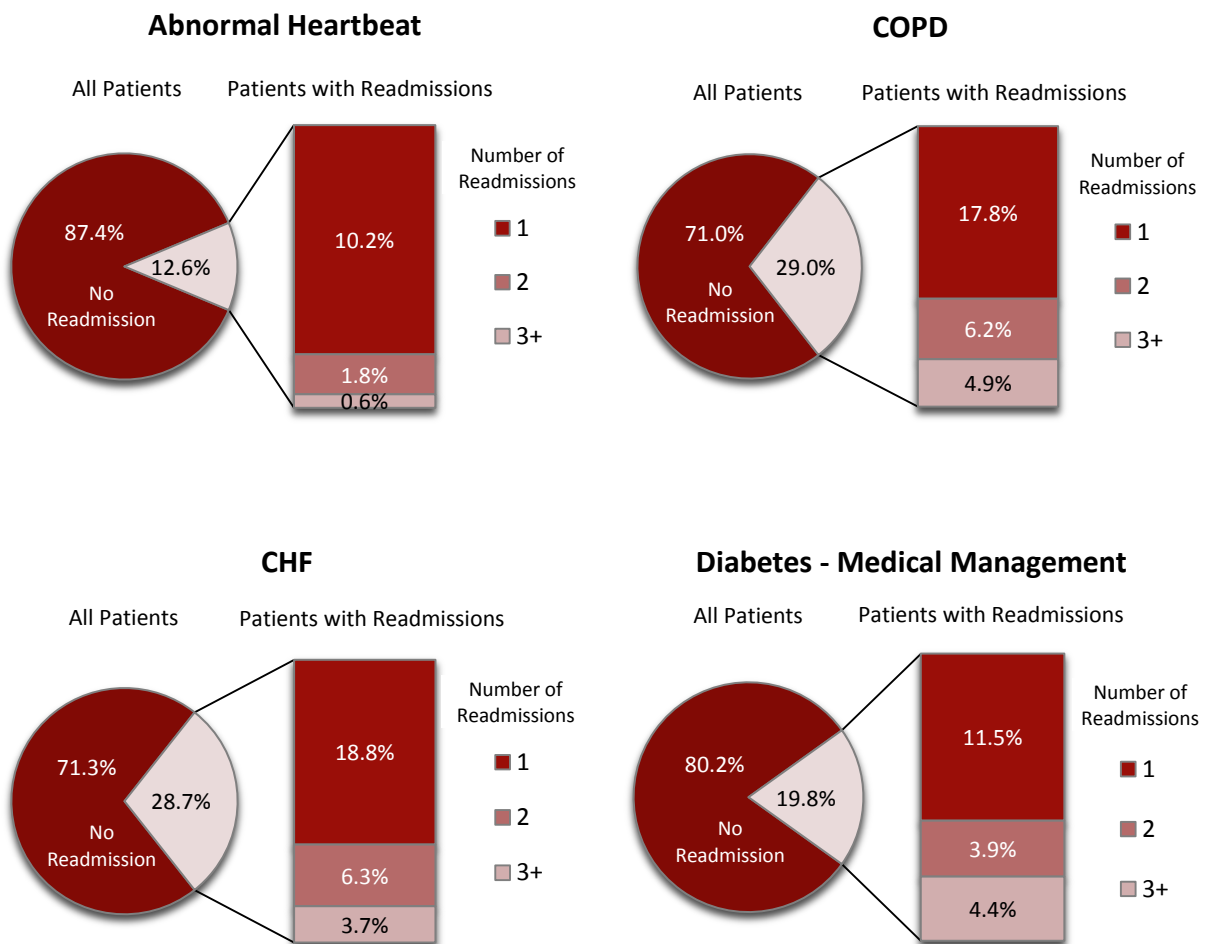
Statewide Statistics and Key Findings

Figure 6 shows the extent of repeat hospitalizations for the same condition over a one year period (2012). Patients hospitalized for abnormal heartbeat, COPD, CHF, or diabetes – medical management were followed for one year and multiple readmissions for the same condition were tallied.

Among these four conditions, patients with COPD had the highest rate, at 29.0%, of repeat hospitalizations (having at least two or more stays for COPD) within one year.

Patients hospitalized for COPD had the highest rate, at 4.9%, of being hospitalized four or more times for their disease.

Figure 6. Multiple Readmissions for the Same Condition within One Year of Initial Discharge, 2012 Data



Note: Figures may not add exactly due to rounding.

Hospital Results

Abnormal Heartbeat

Table Notes

Total Number of Cases includes all index (initial) hospitalizations, after exclusions.

30-Day Readmissions for Same Condition includes readmissions to any general or specialty acute care hospital in Pennsylvania. Clinically complex cases are excluded. Out-of-state residents are also excluded because readmission data is not available for patients readmitted to non-Pennsylvania hospitals. See Technical Notes for other exclusions.

Average Hospital Charge of Readmissions for Same Condition is based on readmissions to only the original hospital, reflects the entire length of stay of the readmission, and is trimmed and case mix adjusted. In almost all cases, hospitals typically receive actual payments from private insurers or government payers that are considerably less than the listed charge.

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition	Abnormal Heartbeat
Statewide	62,235	3.6%	\$23,100	
ACMH	203	◉	\$9,699	
Abington Memorial	1,291	◉	\$30,138	
Albert Einstein	761	◉	\$35,858	
Allegheny General	952	◉	\$21,779	
Allegheny Valley	361	◉	\$10,804	
Aria Health	1,341	◉	\$22,310	
Barnes-Kasson County	26	◉	NR	
Berwick	74	◉	NR	
Bradford Regional	74	◉	NR	
Brandywine	249	◉	\$24,302	
Bucktail	0	NR	NR	
Butler Memorial	723	◉	\$10,919	
Canonsburg	123	◉	NR	
Carlisle Regional	172	◉	NR	
Chambersburg	631	◉	\$14,709	
Charles Cole Memorial	61	◉	NR	
Chester County	689	◉	\$19,855	
Chestnut Hill	330	●	\$52,748	

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Clarion	79	⊙	NR
Corry Memorial	14	⊙	NR
Crozer Chester	378	⊙	\$69,642
Delaware County Memorial	228	●	\$52,977
Doylestown	558	⊙	\$23,772
Eastern Regional	6	⊙	NR
Easton	405	⊙	\$33,268
Ellwood City	124	⊙	NR
Endless Mountains	26	⊙	NR
Ephrata Community	236	⊙	NR
Evangelical Community	289	⊙	\$9,237
Excela Hlth Westmoreland	1,006	⊙	\$15,463
Forbes	665	⊙	\$12,806
Frick	199	●	\$9,452
Fulton County	40	⊙	NR
Geisinger Wyoming Valley	625	⊙	\$20,183
Geisinger-Bloomsburg	43	⊙	NR
Geisinger-Community	579	⊙	\$19,311
Geisinger-Lewistown	291	●	\$10,428
Geisinger/Danville	830	⊙	\$23,126
Gettysburg	249	⊙	\$13,307
Gnaden Huetten Memorial	118	⊙	NR
Good Samaritan/Lebanon	403	⊙	\$12,783
Grand View	514	⊙	\$18,036
Grove City	137	⊙	NR
Hahnemann University	513	⊙	\$84,932
Hanover	222	⊙	NR
Heart of Lancaster	87	⊙	NR

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 readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

- Rate was significantly lower than expected.
- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR: Not reported. Too few cases after exclusions.

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Heritage Valley Beaver	694	○	\$6,969
Heritage Valley Sewickley	295	⊙	\$9,445
Highlands	68	⊙	NR
Holy Redeemer	495	⊙	\$39,754
Holy Spirit	777	○	\$20,789
Hospital Fox Chase Cancer	16	⊙	NR
Hospital University PA	974	⊙	\$34,179
Indiana Regional	402	⊙	\$7,232
J C Blair Memorial	68	⊙	NR
Jameson Memorial	313	⊙	\$9,373
Jeanes	390	⊙	\$38,891
Jefferson	916	⊙	\$16,029
Jennersville Regional	169	⊙	NR
Jersey Shore	52	⊙	NR
Kane Community	35	⊙	NR
Lancaster General	1,765	○	\$19,659
Lancaster Regional	153	⊙	NR
Lansdale	287	⊙	\$18,406
Latrobe Area	345	⊙	\$12,402
Lehigh Valley	1,456	⊙	\$31,708
Lehigh Valley/Hazleton	300	⊙	\$20,269
Lehigh Valley/Muhlenberg	638	⊙	\$31,122
Lock Haven	49	⊙	NR
Lower Bucks	184	⊙	\$34,096
Magee Womens/UPMC	63	⊙	NR
Main Line Bryn Mawr	673	○	\$33,514
Main Line Lankenau	827	⊙	\$27,337
Main Line Paoli	664	⊙	\$29,797

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Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Meadville	267	⊙	\$22,478
Memorial MC	989	⊙	\$8,201
Memorial York	283	⊙	\$14,375
Memorial/Towanda	33	⊙	NR
Mercy Fitzgerald	326	⊙	\$32,892
Mercy Philadelphia	209	⊙	\$35,731
Mercy Suburban	196	⊙	NR
Methodist Division/TJUH	212	⊙	\$29,439
Meyersdale	10	⊙	NR
Millcreek Community	58	⊙	NR
Milton S Hershey	540	⊙	\$28,280
Miners	12	⊙	NR
Monongahela Valley	324	○	NR
Moses Taylor	200	⊙	NR
Mount Nittany	433	○	\$16,275
Muncy Valley	19	⊙	NR
Nason	57	⊙	NR
Nazareth	451	⊙	\$27,094
Ohio Valley General	158	⊙	NR
Palmerton	69	⊙	NR
Penn Highlands/Brookville	23	⊙	NR
Penn Highlands/Clearfield	90	⊙	NR
Penn Highlands/DuBois	330	⊙	NR
Penn Highlands/Elk	126	⊙	\$7,167
Penn Presbyterian	431	⊙	\$30,355
Pennsylvania	444	⊙	\$38,273
Phoenixville	338	⊙	\$37,391
Pinnacle Health	1,310	⊙	\$11,276

Abnormal Heartbeat

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- Rate was significantly lower than expected.
- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR: Not reported. Too few cases after exclusions.

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Pocono	570	⊙	\$18,498
Pottstown Memorial	385	⊙	\$25,183
Punxsutawney Area	42	⊙	NR
Reading	1,088	⊙	\$17,071
Regional Scranton	672	⊙	\$21,634
Riddle Memorial	385	⊙	\$23,922
Robert Packer	587	⊙	\$11,077
Roxborough Memorial	183	⊙	NR
Sacred Heart/Allentown	149	⊙	NR
Saint Vincent	750	⊙	\$23,660
Schuylkill-East Norwegian	211	⊙	\$22,668
Schuylkill-South Jackson	194	⊙	\$16,129
Sharon Regional	498	⊙	\$13,370
Soldiers & Sailors	79	⊙	NR
Somerset	107	⊙	NR
Southwest Regional MC	62	⊙	NR
Springfield	78	⊙	NR
St Clair Memorial	933	●	\$12,068
St Joseph's/Philadelphia	77	⊙	NR
St Joseph/Reading	478	⊙	\$17,558
St Luke's Miners	78	⊙	NR
St Luke's Quakertown	125	⊙	NR
St Luke's/Anderson	260	⊙	NR
St Luke's/Bethlehem	862	⊙	\$32,400
St Mary	1,422	⊙	\$25,901
Sunbury Community	46	⊙	NR
Taylor	242	⊙	\$49,373
Temple University	551	⊙	\$67,257

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 readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

- Rate was significantly lower than expected.
- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR: Not reported. Too few cases after exclusions.

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Thomas Jefferson Univ	702	⊙	\$36,044
Titusville Area	31	●	NR
Troy Community	25	⊙	NR
Tyler Memorial	51	⊙	NR
Tyrone	29	⊙	NR
UPMC Altoona	826	⊙	\$13,411
UPMC Bedford	99	⊙	NR
UPMC East	454	⊙	\$19,816
UPMC Hamot	901	⊙	\$25,729
UPMC Horizon	321	⊙	\$9,651
UPMC McKeesport	309	⊙	\$20,154
UPMC Mercy	696	⊙	\$22,811
UPMC Northwest	259	●	\$16,526
UPMC Passavant	1,119	⊙	\$18,040
UPMC Presby Shadyside	1,994	⊙	\$52,745
UPMC St Margaret	634	⊙	\$23,805
Uniontown	440	⊙	\$5,286
Warren General	73	⊙	NR
Washington	751	⊙	\$17,038
Wayne Memorial	125	⊙	NR
Waynesboro	83	⊙	NR
West Penn	134	⊙	\$22,208
Wilkes-Barre General	778	⊙	\$21,390
Williamsport Regional	679	⊙	\$13,988
Windber	77	●	NR
York	1,188	⊙	\$13,674

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 readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

- Rate was significantly lower than expected.
- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR: Not reported. Too few cases after exclusions.

Hospital Results

Chronic Obstructive Pulmonary Disease (COPD)

Table Notes

Total Number of Cases includes all index (initial) hospitalizations, after exclusions.

30-Day Readmissions for Same Condition includes readmissions to any general or specialty acute care hospital in Pennsylvania. Clinically complex cases are excluded. Out-of-state residents are also excluded because readmission data is not available for patients readmitted to non-Pennsylvania hospitals. See Technical Notes for other exclusions.

Average Hospital Charge of Readmissions for Same Condition is based on readmissions to only the original hospital, reflects the entire length of stay of the readmission, and is trimmed and case mix adjusted. In almost all cases, hospitals typically receive actual payments from private insurers or government payers that are considerably less than the listed charge.

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition	COPD
Statewide	55,398	7.7%	\$31,568	<p>Chronic damage, inflammation, and narrowing of the airways in the lungs. Common COPD diseases include emphysema and chronic obstructive bronchitis.</p> <p>Understanding the Symbols</p> <p>The symbols displayed in this report represent a comparison of a hospital's actual rate of readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).</p> <ul style="list-style-type: none"> ○ Rate was significantly lower than expected. ◉ Rate was not significantly different than expected. ● Rate was significantly higher than expected. <p>NR: Not reported. Too few cases after exclusions.</p>
ACMH	142	◉	\$7,649	
Abington Memorial	582	◉	\$52,069	
Albert Einstein	791	◉	\$29,091	
Allegheny General	421	◉	\$27,528	
Allegheny Valley	316	○	\$12,369	
Aria Health	1,402	◉	\$40,484	
Barnes-Kasson County	83	◉	NR	
Berwick	230	◉	\$43,380	
Bradford Regional	195	◉	\$9,078	
Brandywine	280	◉	\$49,845	
Bucktail	6	◉	NR	
Butler Memorial	489	◉	\$18,488	
Canonsburg	238	◉	\$19,646	
Carlisle Regional	156	◉	\$22,684	
Chambersburg	325	○	\$16,664	
Charles Cole Memorial	125	◉	\$11,528	

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition	COPD
Chester County	315	⊙	\$34,947	<p>Chronic damage, inflammation, and narrowing of the airways in the lungs. Common COPD diseases include emphysema and chronic obstructive bronchitis.</p> <p>Understanding the Symbols</p> <p>The symbols displayed in this report represent a comparison of a hospital's actual rate of readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).</p> <ul style="list-style-type: none"> ○ Rate was significantly lower than expected. ⊙ Rate was not significantly different than expected. ● Rate was significantly higher than expected. <p>NR: Not reported. Too few cases after exclusions.</p>
Chestnut Hill	407	⊙	\$48,839	
Clarion	100	⊙	NR	
Corry Memorial	120	⊙	\$20,177	
Crozer Chester	416	●	\$81,392	
Delaware County Memorial	359	⊙	\$71,146	
Doylestown	417	⊙	\$31,509	
Eastern Regional	6	⊙	NR	
Easton	411	⊙	\$51,421	
Ellwood City	137	⊙	\$15,344	
Endless Mountains	114	●	\$14,806	
Ephrata Community	291	⊙	\$27,557	
Evangelical Community	126	⊙	NR	
Excelsior Hlth Westmoreland	957	⊙	\$20,092	
Forbes	537	⊙	\$20,886	
Frick	408	⊙	\$17,741	
Fulton County	97	⊙	NR	
Geisinger Wyoming Valley	515	⊙	\$36,136	
Geisinger-Bloomsburg	127	⊙	\$26,836	
Geisinger-Community	566	⊙	\$27,203	
Geisinger-Lewistown	399	●	\$15,116	
Geisinger/Danville	545	○	\$44,280	
Gettysburg	227	⊙	\$22,328	
Gnaden Huetten Memorial	202	●	\$23,129	
Good Samaritan/Lebanon	339	○	\$16,286	
Grand View	231	⊙	\$33,919	
Grove City	153	⊙	\$21,397	
Hahnemann University	519	⊙	\$71,740	

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition	COPD
Hanover	185	⊙	\$17,360	<p>Chronic damage, inflammation, and narrowing of the airways in the lungs. Common COPD diseases include emphysema and chronic obstructive bronchitis.</p> <p>Understanding the Symbols</p> <p>The symbols displayed in this report represent a comparison of a hospital's actual rate of readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).</p> <ul style="list-style-type: none"> ○ Rate was significantly lower than expected. ⊙ Rate was not significantly different than expected. ● Rate was significantly higher than expected. <p>NR: Not reported. Too few cases after exclusions.</p>
Heart of Lancaster	104	⊙	\$29,699	
Heritage Valley Beaver	537	○	\$13,098	
Heritage Valley Sewickley	311	⊙	\$9,736	
Highlands	167	⊙	\$17,415	
Holy Redeemer	290	⊙	\$69,603	
Holy Spirit	596	⊙	\$24,139	
Hospital Fox Chase Cancer	16	⊙	NR	
Hospital University PA	288	⊙	\$46,832	
Indiana Regional	389	⊙	\$14,611	
J C Blair Memorial	100	⊙	NR	
Jameson Memorial	649	⊙	\$12,236	
Jeanes	277	⊙	\$47,943	
Jefferson	1,072	⊙	\$19,974	
Jennersville Regional	175	⊙	\$33,439	
Jersey Shore	94	⊙	\$11,819	
Kane Community	99	⊙	\$18,021	
Lancaster General	802	⊙	\$26,671	
Lancaster Regional	191	⊙	\$32,579	
Lansdale	159	⊙	\$23,069	
Latrobe Area	472	●	\$14,376	
Lehigh Valley	969	⊙	\$39,500	
Lehigh Valley/Hazleton	288	⊙	\$26,514	
Lehigh Valley/Muhlenberg	619	⊙	\$46,717	
Lock Haven	115	⊙	\$27,157	
Lower Bucks	270	⊙	\$32,336	
Magee Womens/UPMC	154	⊙	\$34,343	
Main Line Bryn Mawr	392	⊙	\$48,412	

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition	COPD
Main Line Lankenau	462	○	\$50,487	<p>Chronic damage, inflammation, and narrowing of the airways in the lungs. Common COPD diseases include emphysema and chronic obstructive bronchitis.</p> <p>Understanding the Symbols</p> <p>The symbols displayed in this report represent a comparison of a hospital's actual rate of readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).</p> <ul style="list-style-type: none"> ○ Rate was significantly lower than expected. ◉ Rate was not significantly different than expected. ● Rate was significantly higher than expected. <p>NR: Not reported. Too few cases after exclusions.</p>
Main Line Paoli	295	◉	\$44,845	
Meadville	316	◉	\$19,487	
Memorial MC	710	◉	\$17,209	
Memorial York	370	◉	\$22,951	
Memorial/Towanda	55	◉	NR	
Mercy Fitzgerald	515	●	\$57,700	
Mercy Philadelphia	739	◉	\$49,389	
Mercy Suburban	193	◉	\$51,646	
Methodist Division/TJUH	640	●	\$46,801	
Meyersdale	30	●	NR	
Millcreek Community	120	◉	\$12,615	
Milton S Hershey	356	◉	\$20,781	
Miners	62	◉	NR	
Monongahela Valley	490	◉	\$16,861	
Moses Taylor	276	○	\$20,667	
Mount Nittany	395	○	\$27,282	
Muncy Valley	69	◉	NR	
Nason	54	◉	NR	
Nazareth	516	◉	\$31,899	
Ohio Valley General	207	◉	\$15,035	
Palmerton	123	●	\$17,066	
Penn Highlands/Brookville	98	◉	\$8,815	
Penn Highlands/Clearfield	169	○	NR	
Penn Highlands/DuBois	242	◉	\$11,018	
Penn Highlands/Elk	249	◉	\$11,864	
Penn Presbyterian	290	◉	\$30,808	
Pennsylvania	300	◉	\$81,358	

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Phoenixville	242	⊙	\$71,719
Pinnacle Health	972	⊙	\$17,413
Pocono	739	⊙	\$21,734
Pottstown Memorial	584	●	\$56,036
Punxsutawney Area	113	⊙	\$14,115
Reading	732	○	\$33,693
Regional Scranton	388	⊙	\$24,474
Riddle Memorial	371	⊙	\$46,880
Robert Packer	235	⊙	\$18,166
Roxborough Memorial	145	○	NR
Sacred Heart/Allentown	185	⊙	\$31,760
Saint Vincent	319	⊙	\$29,110
Schuylkill-East Norwegian	242	⊙	\$14,319
Schuylkill-South Jackson	275	⊙	\$15,655
Sharon Regional	317	⊙	\$22,818
Soldiers & Sailors	244	●	\$17,527
Somerset	159	⊙	\$18,043
Southwest Regional MC	220	○	\$8,872
Springfield	91	⊙	NR
St Clair Memorial	635	⊙	\$16,456
St Joseph's/Philadelphia	452	●	\$26,981
St Joseph/Reading	646	⊙	\$22,194
St Luke's Miners	110	⊙	\$16,792
St Luke's Quakertown	89	⊙	NR
St Luke's/Anderson	191	⊙	\$37,093
St Luke's/Bethlehem	552	○	\$34,548
St Mary	1,026	●	\$30,929
Sunbury Community	128	⊙	\$39,585

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 readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

- Rate was significantly lower than expected.
- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR: Not reported. Too few cases after exclusions.

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition	COPD
Taylor	384	⊙	\$77,471	<p>Chronic damage, inflammation, and narrowing of the airways in the lungs. Common COPD diseases include emphysema and chronic obstructive bronchitis.</p> <p>Understanding the Symbols</p> <p>The symbols displayed in this report represent a comparison of a hospital's actual rate of readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).</p> <ul style="list-style-type: none"> ○ Rate was significantly lower than expected. ⊙ Rate was not significantly different than expected. ● Rate was significantly higher than expected. <p>NR: Not reported. Too few cases after exclusions.</p>
Temple University	915	⊙	\$70,187	
Thomas Jefferson Univ	317	⊙	\$31,706	
Titusville Area	78	⊙	NR	
Troy Community	93	⊙	\$15,346	
Tyler Memorial	151	⊙	\$28,074	
Tyrone	49	⊙	NR	
UPMC Altoona	541	○	\$20,077	
UPMC Bedford	167	⊙	\$12,104	
UPMC East	336	⊙	\$31,334	
UPMC Hamot	449	⊙	\$44,589	
UPMC Horizon	294	⊙	\$16,437	
UPMC McKeesport	596	⊙	\$21,585	
UPMC Mercy	694	⊙	\$20,387	
UPMC Northwest	622	●	\$13,837	
UPMC Passavant	728	⊙	\$29,567	
UPMC Presby Shadyside	928	○	\$57,899	
UPMC St Margaret	670	⊙	\$25,115	
Uniontown	726	⊙	\$10,760	
Warren General	137	○	NR	
Washington	525	⊙	\$13,607	
Wayne Memorial	112	⊙	\$14,529	
Waynesboro	136	○	NR	
West Penn	136	⊙	\$14,240	
Wilkes-Barre General	892	●	\$38,059	
Williamsport Regional	286	⊙	\$13,547	
Windber	74	⊙	NR	
York	751	⊙	\$17,240	

Hospital Results

Congestive Heart Failure (CHF)

Table Notes

Total Number of Cases includes all index (initial) hospitalizations, after exclusions.

30-Day Readmissions for Same Condition includes readmissions to any general or specialty acute care hospital in Pennsylvania. Clinically complex cases are excluded. Out-of-state residents are also excluded because readmission data is not available for patients readmitted to non-Pennsylvania hospitals. See Technical Notes for other exclusions.

Average Hospital Charge of Readmissions for Same Condition is based on readmissions to only the original hospital, reflects the entire length of stay of the readmission, and is trimmed and case mix adjusted. In almost all cases, hospitals typically receive actual payments from private insurers or government payers that are considerably less than the listed charge.

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition	CHF
Statewide	63,140	7.7%	\$35,589	<p>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).</p> <p>Understanding the Symbols</p> <p>The symbols displayed in this report represent a comparison of a hospital's actual rate of readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).</p> <ul style="list-style-type: none"> ○ Rate was significantly lower than expected. ◉ Rate was not significantly different than expected. ● Rate was significantly higher than expected. <p>NR: Not reported. Too few cases after exclusions.</p>
ACMH	199	◉	\$14,945	
Abington Memorial	1,034	◉	\$55,761	
Albert Einstein	1,042	◉	\$42,151	
Allegheny General	837	◉	\$34,663	
Allegheny Valley	470	◉	\$16,560	
Aria Health	1,030	◉	\$33,184	
Barnes-Kasson County	84	○	NR	
Berwick	114	◉	\$22,316	
Bradford Regional	92	◉	NR	
Brandywine	322	◉	\$57,053	
Bucktail	2	NR	NR	
Butler Memorial	384	◉	\$19,542	
Canonsburg	182	◉	\$14,716	
Carlisle Regional	158	◉	\$25,507	
Chambersburg	606	◉	\$22,764	
Charles Cole Memorial	72	◉	\$8,362	
Chester County	557	◉	\$26,987	
Chestnut Hill	448	◉	\$58,125	

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Clarion	85	⊙	NR
Corry Memorial	54	⊙	NR
Crozer Chester	518	⊙	\$85,206
Delaware County Memorial	317	⊙	\$63,159
Doylestown	661	⊙	\$37,112
Eastern Regional	2	NR	NR
Easton	368	⊙	\$43,238
Ellwood City	142	⊙	\$14,301
Endless Mountains	40	⊙	NR
Ephrata Community	249	⊙	\$27,851
Evangelical Community	160	⊙	NR
Excela Hlth Westmoreland	854	⊙	\$23,300
Forbes	611	⊙	\$20,656
Frick	218	⊙	\$18,715
Fulton County	50	⊙	NR
Geisinger Wyoming Valley	541	○	\$39,382
Geisinger-Bloomsburg	105	⊙	\$23,090
Geisinger-Community	483	⊙	\$29,427
Geisinger-Lewistown	351	⊙	\$19,026
Geisinger/Danville	1,127	○	\$38,094
Gettysburg	236	⊙	\$20,224
Gnaden Huetten Memorial	120	⊙	\$11,187
Good Samaritan/Lebanon	330	⊙	\$18,048
Grand View	352	⊙	\$32,387
Grove City	113	⊙	NR
Hahnemann University	721	⊙	\$93,138
Hanover	274	⊙	\$21,101
Heart of Lancaster	98	⊙	NR

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 readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

- Rate was significantly lower than expected.
- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR: Not reported. Too few cases after exclusions.

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Heritage Valley Beaver	736	○	\$13,764
Heritage Valley Sewickley	329	⊙	\$19,727
Highlands	131	●	\$21,555
Holy Redeemer	480	⊙	\$64,698
Holy Spirit	756	⊙	\$26,458
Hospital Fox Chase Cancer	5	⊙	NR
Hospital University PA	768	⊙	\$77,322
Indiana Regional	306	⊙	\$11,082
J C Blair Memorial	138	⊙	\$10,108
Jameson Memorial	439	⊙	\$11,292
Jeanes	377	⊙	\$65,616
Jefferson	760	⊙	\$18,291
Jennersville Regional	165	⊙	\$28,683
Jersey Shore	90	⊙	\$16,742
Kane Community	98	○	NR
Lancaster General	1,484	○	\$25,994
Lancaster Regional	205	⊙	\$36,497
Lansdale	360	⊙	\$36,114
Latrobe Area	410	●	\$23,829
Lehigh Valley	1,517	⊙	\$58,414
Lehigh Valley/Hazleton	372	⊙	\$18,866
Lehigh Valley/Muhlenberg	859	⊙	\$43,775
Lock Haven	107	⊙	\$29,186
Lower Bucks	269	⊙	\$43,720
Magee Womens/UPMC	102	⊙	\$63,571
Main Line Bryn Mawr	502	⊙	\$54,315
Main Line Lankenau	816	⊙	\$50,925
Main Line Paoli	399	⊙	\$45,710

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 readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

- Rate was significantly lower than expected.
- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR: Not reported. Too few cases after exclusions.

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Meadville	250	⊙	\$17,833
Memorial MC	1,154	●	\$16,896
Memorial York	187	⊙	\$21,456
Memorial/Towanda	41	⊙	NR
Mercy Fitzgerald	476	⊙	\$67,682
Mercy Philadelphia	419	●	\$52,869
Mercy Suburban	171	⊙	\$61,103
Methodist Division/TJUH	554	⊙	\$57,970
Meyersdale	19	⊙	NR
Millcreek Community	157	⊙	\$16,680
Milton S Hershey	837	●	\$26,926
Miners	73	⊙	NR
Monongahela Valley	463	⊙	\$20,956
Moses Taylor	218	⊙	\$27,662
Mount Nittany	464	⊙	\$26,877
Muncy Valley	26	⊙	NR
Nason	108	⊙	\$10,065
Nazareth	554	⊙	\$41,391
Ohio Valley General	195	⊙	\$21,852
Palmerton	103	⊙	\$15,352
Penn Highlands/Brookville	34	⊙	NR
Penn Highlands/Clearfield	179	⊙	\$7,310
Penn Highlands/DuBois	380	⊙	\$9,000
Penn Highlands/Elk	261	⊙	\$12,640
Penn Presbyterian	613	○	\$55,847
Pennsylvania	365	⊙	\$65,896
Phoenixville	277	⊙	\$61,448
Pinnacle Health	1,097	⊙	\$17,929

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 readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

- Rate was significantly lower than expected.
- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR: Not reported. Too few cases after exclusions.

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition	CHF
Pocono	586	⊙	\$24,924	<p>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).</p> <p>Understanding the Symbols</p> <p>The symbols displayed in this report represent a comparison of a hospital's actual rate of readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).</p> <ul style="list-style-type: none"> ○ Rate was significantly lower than expected. ⊙ Rate was not significantly different than expected. ● Rate was significantly higher than expected. <p>NR: Not reported. Too few cases after exclusions.</p>
Pottstown Memorial	339	⊙	\$63,718	
Punxsutawney Area	124	⊙	\$11,412	
Reading	1,317	⊙	\$29,717	
Regional Scranton	702	⊙	\$39,845	
Riddle Memorial	387	⊙	\$56,627	
Robert Packer	327	●	\$22,574	
Roxborough Memorial	205	⊙	\$18,781	
Sacred Heart/Allentown	221	●	\$34,476	
Saint Vincent	588	⊙	\$40,217	
Schuylkill-East Norwegian	315	⊙	\$18,877	
Schuylkill-South Jackson	261	⊙	\$15,446	
Sharon Regional	260	⊙	\$18,827	
Soldiers & Sailors	143	⊙	\$11,963	
Somerset	151	⊙	\$28,113	
Southwest Regional MC	135	⊙	NR	
Springfield	37	⊙	NR	
St Clair Memorial	895	⊙	\$17,781	
St Joseph's/Philadelphia	103	●	\$37,649	
St Joseph/Reading	497	⊙	\$31,106	
St Luke's Miners	150	⊙	\$17,349	
St Luke's Quakertown	169	⊙	\$32,183	
St Luke's/Anderson	367	⊙	\$51,772	
St Luke's/Bethlehem	883	⊙	\$46,567	
St Mary	687	○	\$43,016	
Sunbury Community	67	⊙	\$22,172	
Taylor	263	⊙	\$95,697	
Temple University	523	○	\$81,607	

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Thomas Jefferson Univ	716	⊙	\$61,422
Titusville Area	61	⊙	NR
Troy Community	46	⊙	NR
Tyler Memorial	51	⊙	NR
Tyrone	56	⊙	\$10,425
UPMC Altoona	785	⊙	\$22,261
UPMC Bedford	120	⊙	\$9,611
UPMC East	397	⊙	\$28,037
UPMC Hamot	699	⊙	\$51,874
UPMC Horizon	327	⊙	\$20,680
UPMC McKeesport	484	⊙	\$27,632
UPMC Mercy	554	●	\$30,597
UPMC Northwest	273	⊙	\$15,221
UPMC Passavant	871	○	\$40,561
UPMC Presby Shadyside	1,742	⊙	\$55,808
UPMC St Margaret	861	⊙	\$31,888
Uniontown	563	●	\$10,423
Warren General	135	⊙	\$14,063
Washington	787	⊙	\$15,437
Wayne Memorial	157	⊙	\$12,242
Waynesboro	136	⊙	\$22,118
West Penn	151	○	\$34,744
Wilkes-Barre General	703	⊙	\$35,961
Williamsport Regional	446	⊙	\$14,284
Windber	118	⊙	\$13,529
York	1,243	⊙	\$21,388

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 readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

- Rate was significantly lower than expected.
- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR: Not reported. Too few cases after exclusions.

Hospital Results

Diabetes – Medical Management

Table Notes

Total Number of Cases includes all index (initial) hospitalizations, after exclusions.

30-Day Readmissions for Same Condition includes readmissions to any general or specialty acute care hospital in Pennsylvania. Clinically complex cases are excluded. Out-of-state residents are also excluded because readmission data is not available for patients readmitted to non-Pennsylvania hospitals. See Technical Notes for other exclusions.

Average Hospital Charge of Readmissions for Same Condition is based on readmissions to only the original hospital, reflects the entire length of stay of the readmission, and is trimmed and case mix adjusted. In almost all cases, hospitals typically receive actual payments from private insurers or government payers that are considerably less than the listed charge.

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition	Diabetes – Medical Management
Statewide	25,257	8.4%	\$28,072	
ACMH	56	◉	NR	
Abington Memorial	366	◉	\$28,830	
Albert Einstein	627	◉	\$27,836	
Allegheny General	259	◉	\$22,360	
Allegheny Valley	151	◉	\$13,948	
Aria Health	642	◉	\$31,487	
Barnes-Kasson County	25	◉	NR	
Berwick	50	◉	NR	
Bradford Regional	34	◉	NR	
Brandywine	111	◉	NR	
Bucktail	4	NR	NR	
Butler Memorial	170	◉	\$27,259	
Canonsburg	49	◉	NR	
Carlisle Regional	85	◉	\$20,779	
Chambersburg	241	◉	\$14,947	
Charles Cole Memorial	28	◉	NR	
Chester County	178	◉	\$14,098	
Chestnut Hill	195	◉	\$31,677	

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Clarion	58	⊙	NR
Corry Memorial	9	⊙	NR
Crozer Chester	285	⊙	\$69,858
Delaware County Memorial	181	⊙	\$39,878
Doylestown	164	○	NR
Eastern Regional	0	NR	NR
Easton	157	⊙	NR
Ellwood City	20	⊙	NR
Endless Mountains	8	⊙	NR
Ephrata Community	132	⊙	\$15,883
Evangelical Community	65	⊙	NR
Excela Hlth Westmoreland	257	⊙	\$14,768
Forbes	206	⊙	\$14,134
Frick	79	⊙	\$8,606
Fulton County	29	⊙	NR
Geisinger Wyoming Valley	252	⊙	\$27,324
Geisinger-Bloomsburg	33	⊙	NR
Geisinger-Community	200	⊙	NR
Geisinger-Lewistown	142	⊙	NR
Geisinger/Danville	333	●	\$26,404
Gettysburg	91	⊙	\$21,270
Gnaden Huetten Memorial	57	⊙	NR
Good Samaritan/Lebanon	143	⊙	\$23,915
Grand View	105	⊙	NR
Grove City	43	⊙	NR
Hahnemann University	362	⊙	\$59,072
Hanover	98	⊙	\$12,783
Heart of Lancaster	62	⊙	\$22,993

Diabetes – Medical Management

The body is unable to 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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NR: Not reported. Too few cases after exclusions.

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Heritage Valley Beaver	182	⊙	\$10,419
Heritage Valley Sewickley	152	⊙	NR
Highlands	42	⊙	NR
Holy Redeemer	89	⊙	NR
Holy Spirit	298	●	\$21,415
Hospital Fox Chase Cancer	7	⊙	NR
Hospital University PA	294	○	\$43,821
Indiana Regional	137	⊙	NR
J C Blair Memorial	41	●	\$7,578
Jameson Memorial	141	⊙	NR
Jeanes	192	⊙	\$41,964
Jefferson	230	⊙	\$19,835
Jennersville Regional	64	⊙	NR
Jersey Shore	20	⊙	NR
Kane Community	16	⊙	NR
Lancaster General	498	⊙	\$21,065
Lancaster Regional	86	⊙	\$30,798
Lansdale	117	⊙	\$17,472
Latrobe Area	119	⊙	\$7,222
Lehigh Valley	487	○	NR
Lehigh Valley/Hazleton	97	⊙	NR
Lehigh Valley/Muhlenberg	231	○	NR
Lock Haven	39	⊙	NR
Lower Bucks	133	⊙	NR
Magee Womens/UPMC	84	⊙	\$25,733
Main Line Bryn Mawr	163	⊙	\$37,157
Main Line Lankenau	343	⊙	\$25,775
Main Line Paoli	112	⊙	NR

Diabetes – Medical Management

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NR: Not reported. Too few cases after exclusions.

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Meadville	104	⊙	NR
Memorial MC	379	●	\$10,671
Memorial York	173	●	\$15,261
Memorial/Towanda	30	⊙	NR
Mercy Fitzgerald	281	⊙	\$48,345
Mercy Philadelphia	385	⊙	\$31,536
Mercy Suburban	143	⊙	\$28,313
Methodist Division/TJUH	344	⊙	\$36,203
Meyersdale	9	⊙	NR
Millcreek Community	28	⊙	NR
Milton S Hershey	255	⊙	\$22,382
Miners	12	⊙	NR
Monongahela Valley	113	⊙	NR
Moses Taylor	124	⊙	NR
Mount Nittany	141	⊙	NR
Muncy Valley	5	⊙	NR
Nason	25	⊙	NR
Nazareth	264	⊙	\$23,321
Ohio Valley General	79	⊙	NR
Palmerton	34	⊙	NR
Penn Highlands/Brookville	6	⊙	NR
Penn Highlands/Clearfield	41	⊙	NR
Penn Highlands/DuBois	115	⊙	NR
Penn Highlands/Elk	62	⊙	NR
Penn Presbyterian	266	⊙	\$27,734
Pennsylvania	207	⊙	\$54,352
Phoenixville	123	⊙	\$53,437
Pinnacle Health	679	●	\$16,086

Diabetes – Medical Management

The body is unable to 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.

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- Rate was significantly lower than expected.
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- Rate was significantly higher than expected.

NR: Not reported. Too few cases after exclusions.

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Pocono	249	⊙	\$18,166
Pottstown Memorial	230	⊙	\$41,501
Punxsutawney Area	31	⊙	NR
Reading	369	○	\$21,812
Regional Scranton	129	⊙	NR
Riddle Memorial	131	⊙	NR
Robert Packer	111	⊙	NR
Roxborough Memorial	120	⊙	NR
Sacred Heart/Allentown	106	⊙	\$28,457
Saint Vincent	195	⊙	\$17,736
Schuylkill-East Norwegian	91	⊙	NR
Schuylkill-South Jackson	119	●	\$10,712
Sharon Regional	151	⊙	NR
Soldiers & Sailors	38	⊙	NR
Somerset	38	⊙	NR
Southwest Regional MC	50	⊙	NR
Springfield	28	⊙	NR
St Clair Memorial	207	⊙	\$12,445
St Joseph's/Philadelphia	174	●	\$30,201
St Joseph/Reading	157	⊙	\$20,035
St Luke's Miners	50	⊙	NR
St Luke's Quakertown	80	⊙	NR
St Luke's/Anderson	145	⊙	NR
St Luke's/Bethlehem	364	⊙	\$36,465
St Mary	341	⊙	\$27,857
Sunbury Community	5	⊙	NR
Taylor	159	⊙	\$72,002
Temple University	757	⊙	\$59,389

Diabetes – Medical Management

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NR: Not reported. Too few cases after exclusions.

Hospital Results

Hospital	Total Number of Cases	30-Day Readmissions for Same Condition	Average Hospital Charge of Readmissions for Same Condition
Thomas Jefferson Univ	366	⊙	\$49,881
Titusville Area	44	⊙	NR
Troy Community	26	⊙	NR
Tyler Memorial	18	⊙	NR
Tyrone	18	⊙	NR
UPMC Altoona	289	⊙	\$12,581
UPMC Bedford	33	⊙	NR
UPMC East	166	⊙	\$22,740
UPMC Hamot	248	⊙	NR
UPMC Horizon	128	⊙	NR
UPMC McKeesport	160	⊙	\$14,964
UPMC Mercy	295	⊙	\$19,390
UPMC Northwest	101	○	NR
UPMC Passavant	281	⊙	\$20,960
UPMC Presby Shadyside	632	⊙	\$49,408
UPMC St Margaret	200	⊙	\$15,756
Uniontown	249	⊙	\$7,339
Warren General	51	⊙	NR
Washington	240	⊙	\$14,918
Wayne Memorial	71	⊙	NR
Waynesboro	78	⊙	NR
West Penn	104	⊙	\$23,138
Wilkes-Barre General	269	⊙	NR
Williamsport Regional	190	⊙	\$10,693
Windber	41	⊙	NR
York	447	⊙	\$15,738

Diabetes – Medical Management

The body is unable to 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.

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- Rate was significantly lower than expected.
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NR: Not reported. Too few cases after exclusions.

Medicare and Medicaid Payments

The following tables include information about payments made by Medicare and Medicaid for readmissions for the same condition (based on the first readmission occurring within 30 days of the initial hospitalization). This analysis is based on data from 2011 through 2012, which is the most recent payment data available to PHC4, and includes payments for patients readmitted to any Pennsylvania hospital (original or other general or specialty general acute care hospital). Some readmission records were excluded from this analysis of average payments (e.g., payments for patients who were transferred or left against medical advice) to avoid skewing the results. Payments from Medicare Advantage plans (e.g., Medicare HMOs) are not included, nor are patient liabilities (e.g., coinsurance and deductible dollar amounts). The first table shows summary information about average payments for each of the conditions in this report. The second table shows additional details including payments for each MS-DRG (Medicare Severity – Diagnosis-Related Group) associated with a condition. Differences in the approaches used by Medicare and Medicaid in determining payments may account for some of the variation seen across these payers.

Average Medicare and Medicaid Payments for Readmissions for the Same Condition
2011-2012 Statewide Data

Condition	Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
	Number of Readmissions	Average Payment	Number of Readmissions	Average Payment	Number of Readmissions	Average Payment
Abnormal Heartbeat	1,472	\$5,660	26	\$6,684	101	\$6,361
Chronic Obstructive Pulmonary Disease (COPD)	3,121	\$6,009	149	\$6,893	949	\$7,006
Congestive Heart Failure (CHF)	4,125	\$6,952	100	\$10,372	434	\$8,673
Diabetes – Medical Management	732	\$6,001	245	\$6,594	978	\$5,467

Additional Information: Economic Impact of Excess Readmissions

The Centers for Medicare and Medicaid Services (CMS) makes available on its website (www.cms.gov) hospital-specific information about penalties incurred for having too many readmissions. Readers are referred to this information as it might be useful for understanding further the economic impact relevant to a hospital for having too many readmissions, or more specifically, the loss of reimbursement payments for such additional hospitalizations.

Medicare and Medicaid Payments

Average Medicare and Medicaid Payments for Readmissions for the Same Condition, by MS-DRG for Abnormal Heartbeat, COPD, CHF, and Diabetes – Medical Management 2011-2012 Statewide Data

MS-DRG	MS-DRG Description	Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
		Number of Readmissions	Average Payment	Number of Readmissions	Average Payment	Number of Readmissions	Average Payment
Abnormal Heartbeat		1,472	\$5,660	26	\$6,684	101	\$6,361
242	Permanent Cardiac Pacemaker Implant w/ MCC	14	\$24,013	0	NR	0	NR
243	Permanent Cardiac Pacemaker Implant w/ CC	12	\$14,737	2	NR	0	NR
244	Permanent Cardiac Pacemaker Implant w/o CC/MCC	12	\$13,542	0	NR	0	NR
246	Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	0	NR	0	NR	0	NR
247	Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/o MCC	0	NR	0	NR	0	NR
248	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	0	NR	0	NR	0	NR
249	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/o MCC	0	NR	0	NR	0	NR
250	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/ MCC	7	NR	0	NR	0	NR
251	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/o MCC	21	\$11,979	1	NR	7	NR
258	Cardiac Pacemaker Device Replacement w/ MCC	0	NR	0	NR	0	NR
259	Cardiac Pacemaker Device Replacement w/o MCC	0	NR	0	NR	0	NR
260	Cardiac Pacemaker Revision Except Device Replacement w/ MCC	0	NR	0	NR	0	NR
261	Cardiac Pacemaker Revision Except Device Replacement w/ CC	0	NR	0	NR	0	NR
262	Cardiac Pacemaker Revision Except Device Replacement w/o CC/MCC	0	NR	0	NR	0	NR
286	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC	1	NR	0	NR	0	NR
287	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC	0	NR	0	NR	0	NR

Medicare and Medicaid Payments

Average Medicare and Medicaid Payments for Readmissions for the Same Condition, by MS-DRG for Abnormal Heartbeat, COPD, CHF, and Diabetes – Medical Management 2011-2012 Statewide Data

MS-DRG	MS-DRG Description	Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
		Number of Readmissions	Average Payment	Number of Readmissions	Average Payment	Number of Readmissions	Average Payment
308	Cardiac Arrhythmia and Conduction Disorders w/ MCC	328	\$7,632	8	NR	18	\$7,126
309	Cardiac Arrhythmia and Conduction Disorders w/ CC	534	\$5,228	10	NR	39	\$6,530
310	Cardiac Arrhythmia and Conduction Disorders w/o CC/MCC	543	\$3,529	5	NR	37	\$5,112
Chronic Obstructive Pulmonary Disease (COPD)		3,121	\$6,009	149	\$6,893	949	\$7,006
190	Chronic Obstructive Pulmonary Disease w/ MCC	1,010	\$7,246	59	\$9,135	184	\$7,443
191	Chronic Obstructive Pulmonary Disease w/ CC	1,285	\$5,985	48	\$5,845	385	\$7,096
192	Chronic Obstructive Pulmonary Disease w/o CC/MCC	826	\$4,534	42	\$4,942	380	\$6,703
Congestive Heart Failure (CHF)		4,125	\$6,952	100	\$10,372	434	\$8,673
286	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC	53	\$15,797	3	NR	11	\$12,742
287	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC	123	\$7,950	7	NR	22	\$11,832
291	Heart Failure and Shock w/ MCC	1,335	\$9,027	14	\$9,025	77	\$8,495
292	Heart Failure and Shock w/ CC	1,910	\$6,215	52	\$8,218	248	\$8,552
293	Heart Failure and Shock w/o CC/MCC	704	\$4,175	24	\$4,920	76	\$7,746
Diabetes – Medical Management		732	\$6,001	245	\$6,594	978	\$5,467
073	Cranial and Peripheral Nerve Disorders w/ MCC	67	\$8,140	5	NR	22	\$6,384
074	Cranial and Peripheral Nerve Disorders w/o MCC	155	\$5,705	44	\$7,844	176	\$6,277
299	Peripheral Vascular Disorders w/ MCC	5	NR	0	NR	1	NR
300	Peripheral Vascular Disorders w/ CC	11	\$5,390	1	NR	0	NR
301	Peripheral Vascular Disorders w/o CC/MCC	0	NR	0	NR	0	NR
637	Diabetes w/ MCC	120	\$8,734	28	\$11,962	73	\$5,852
638	Diabetes w/ CC	245	\$5,343	100	\$6,044	421	\$5,437

Medicare and Medicaid Payments

**Average Medicare and Medicaid Payments for Readmissions for the Same Condition, by MS-DRG
for Abnormal Heartbeat, COPD, CHF, and Diabetes – Medical Management
2011-2012 Statewide Data**

MS-DRG	MS-DRG Description	Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
		Number of Readmissions	Average Payment	Number of Readmissions	Average Payment	Number of Readmissions	Average Payment
639	Diabetes w/o CC/MCC	114	\$3,513	65	\$4,199	274	\$4,835
698	Other Kidney and Urinary Tract Diagnoses w/ MCC	1	NR	0	NR	1	NR
699	Other Kidney and Urinary Tract Diagnoses w/ CC	13	\$6,713	1	NR	6	NR
700	Other Kidney and Urinary Tract Diagnoses w/o CC/MCC	1	NR	1	NR	4	NR

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

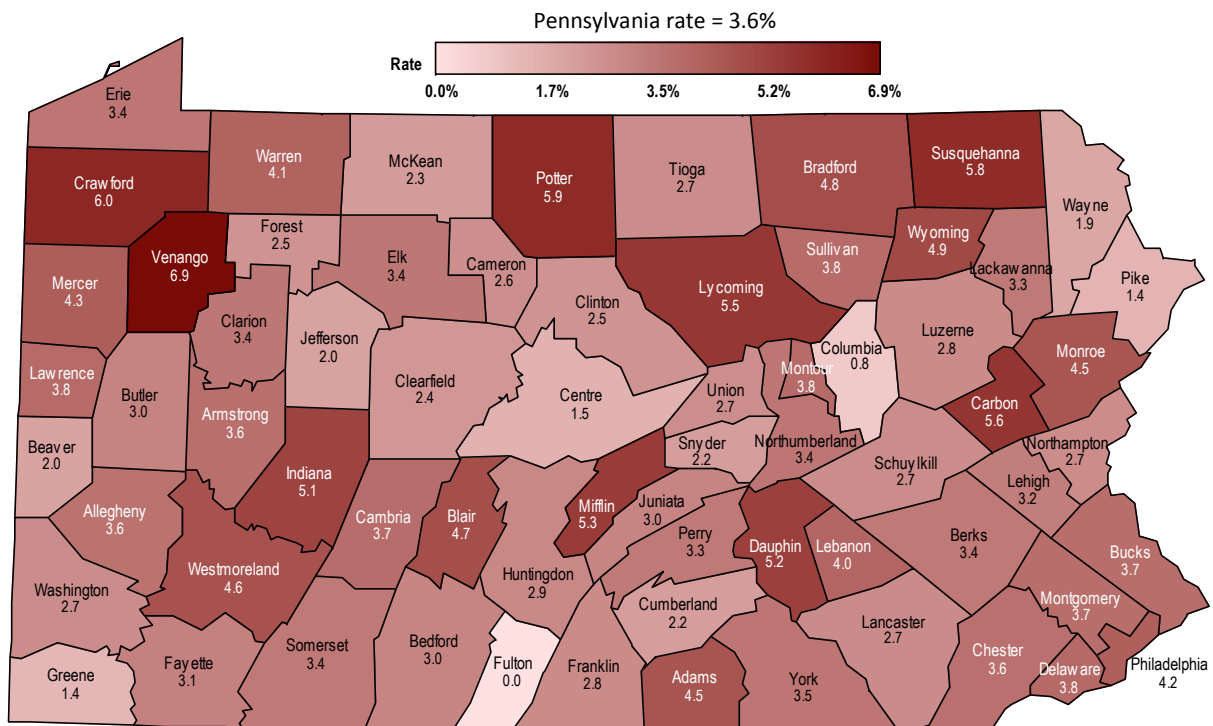
County-Level Rates and Regional Trends

Rates of Readmission for the Same Condition by County

The rates of readmission for the same condition for each county are provided in the following maps. Each county rate is based on all discharges (for the given condition) for patients residing in that county and does not represent the rate for any specific hospital within the county. If a patient is hospitalized repeatedly, each of their hospitalizations is counted independently. County rates are not adjusted for differences in patient risk characteristics (such as age, gender, etc.), so that the true differences in rates would not be masked by differences in underlying risk. Rates for counties with small volumes of hospitalizations are sensitive to small changes in the number of readmissions, so higher rates may be reflective of minor fluctuations in the number of readmissions.

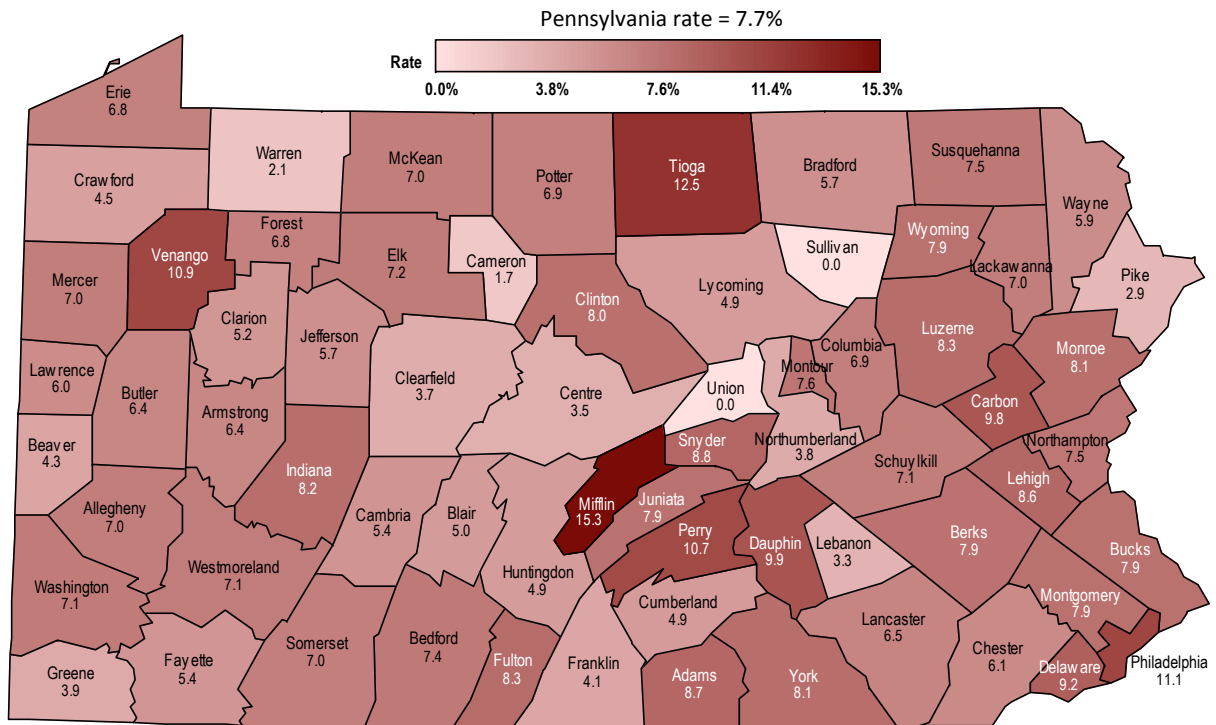
For each of the reported conditions, rates of readmission for the same condition varied by county. Even within regions and for neighboring counties, the rates were sometimes very different.

Map 1. Abnormal Heartbeat

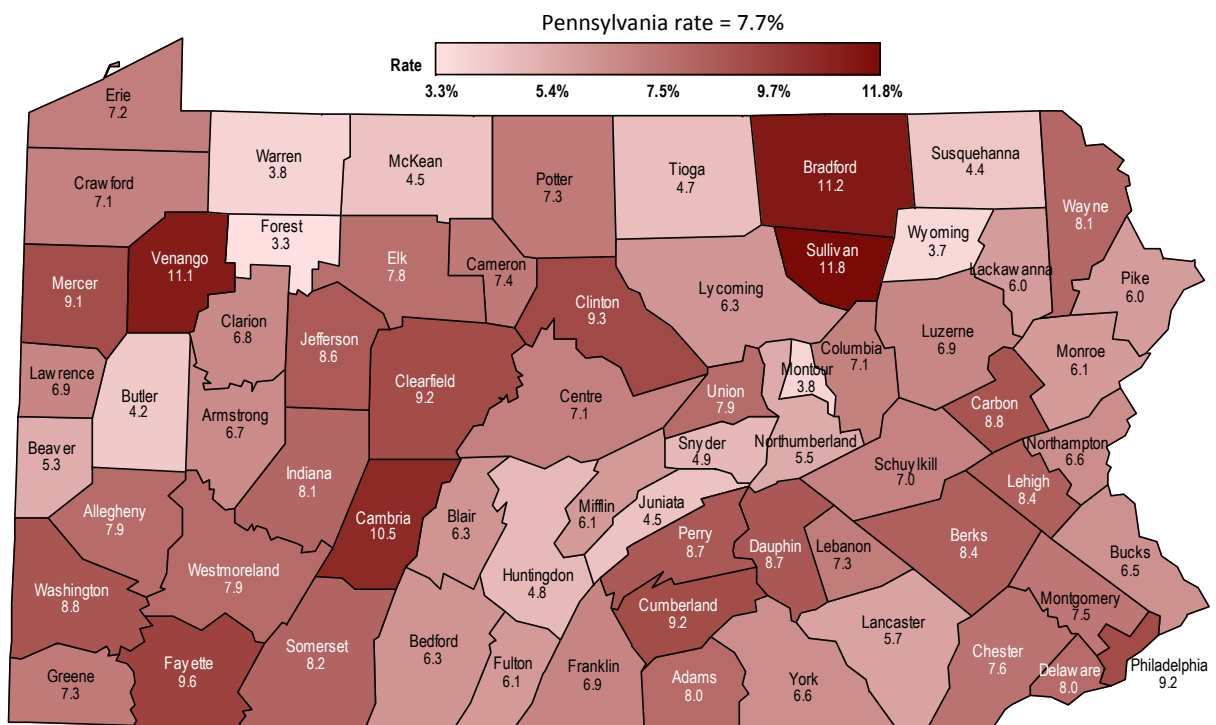


County-Level Rates and Regional Trends

Map 2. Chronic Obstructive Pulmonary Disease (COPD)

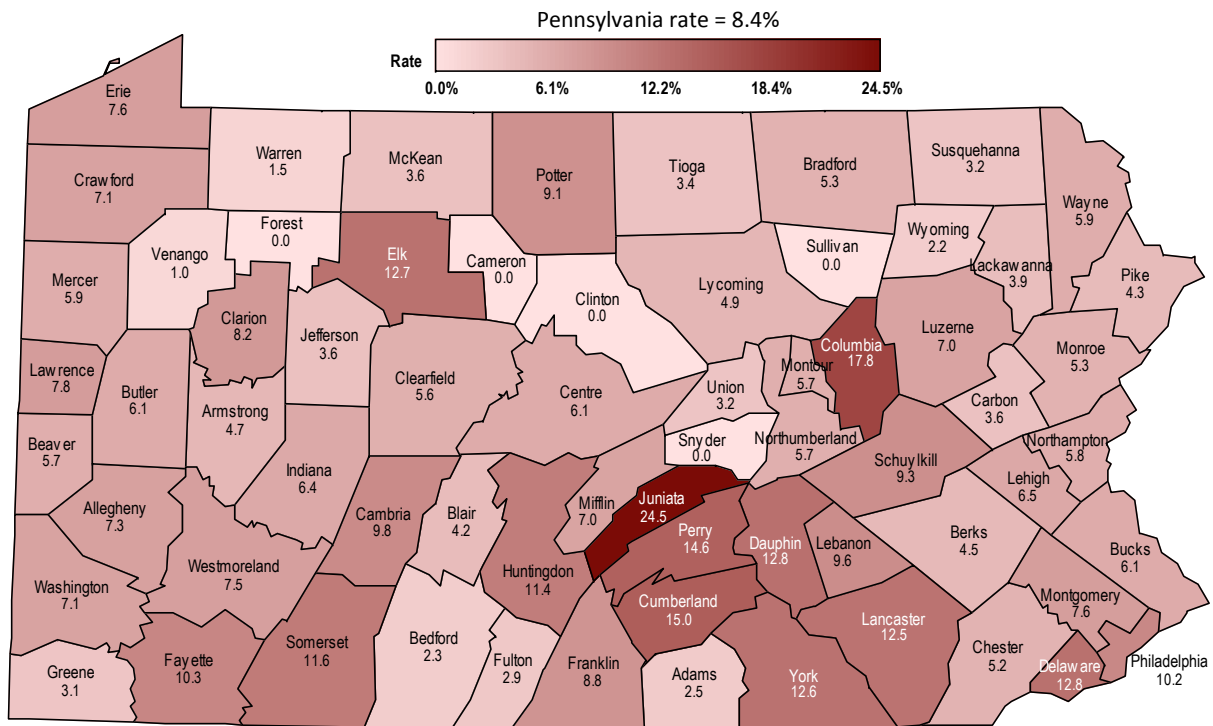


Map 3. Congestive Heart Failure (CHF)



County-Level Rates and Regional Trends

Map 4. Diabetes - Medical Management



For each of the reported conditions, rates of readmission for the same condition varied by county. Even within regions and for neighboring counties, the rates were sometimes very different.

On the following pages are figures displaying trends in these readmission rates over time, focusing on regional differences. The regions are defined as follows:

Western Pennsylvania — Allegheny, Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Cameron, Clarion, Clearfield, Crawford, Elk, Erie, Fayette, Forest, Greene, Indiana, Jefferson, Lawrence, McKean, Mercer, Potter, Somerset, Venango, Warren, Washington, and Westmoreland Counties

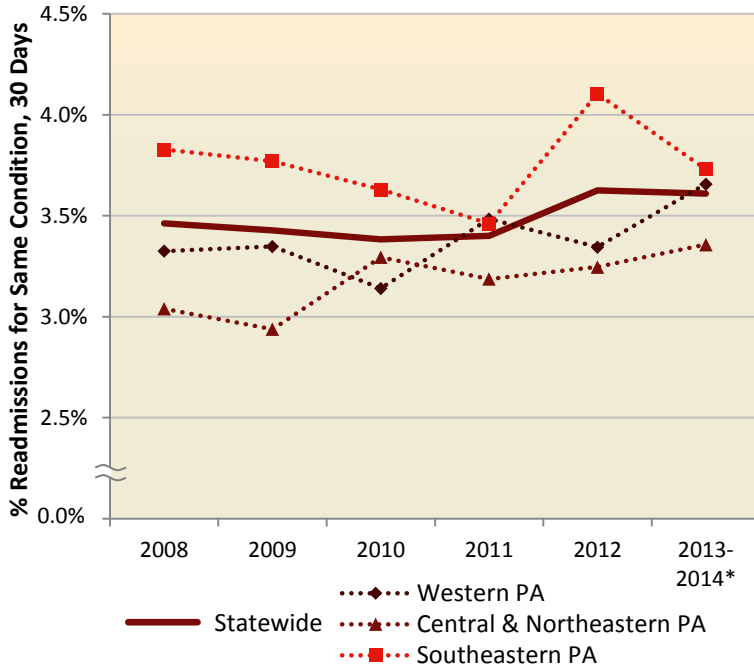
Central & Northeastern Pennsylvania — Adams, Bradford, Centre, Clinton, Columbia, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lackawanna, Lancaster, Lebanon, Luzerne, Lycoming, Mifflin, Monroe, Montour, Northumberland, Perry, Pike, Snyder, Sullivan, Susquehanna, Tioga, Union, Wayne, Wyoming, and York Counties

Southeastern Pennsylvania — Berks, Bucks, Carbon, Chester, Delaware, Lehigh, Montgomery, Northampton, Philadelphia, and Schuylkill Counties

County-Level Rates and Regional Trends

Trends in Rates of Readmission for the Same Condition by PA Region and Overall

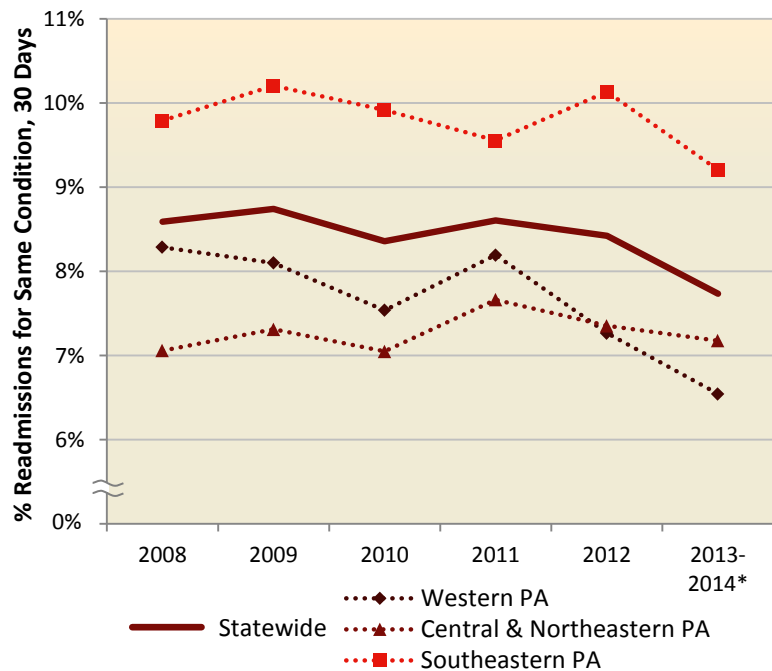
Figure 1. Abnormal Heartbeat



The statewide rate of readmission for the same condition (abnormal heartbeat) showed no significant change since 2008. Rates for each of the PA regions also showed no significant changes over this time period.

The statewide rate of readmission for the same condition (COPD) showed a significant decline since 2008. However, the region of Western PA showed the only significant decline in the rate during that time. Central & Northeastern PA and Southeastern PA showed no significant changes since 2008.

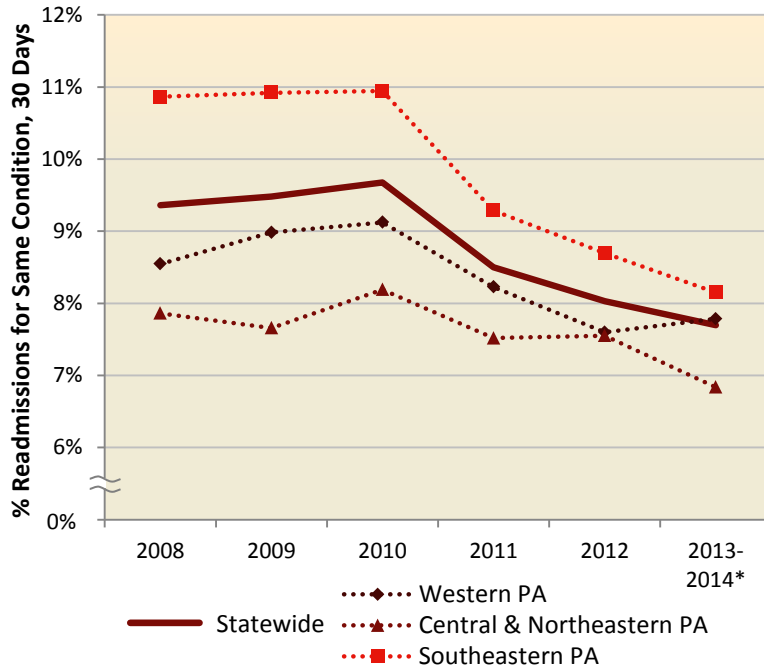
Figure 2. COPD



*Represents data from January 1, 2013 through August 31, 2014

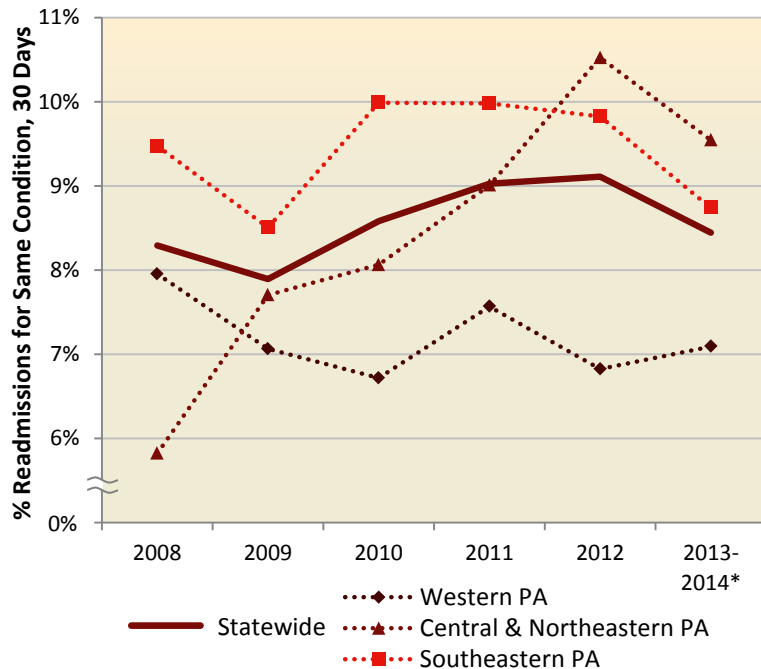
County-Level Rates and Regional Trends

Figure 3. CHF



The statewide rate of readmission for the same condition (CHF) showed no significant change from 2008 to 2010, and then showed a significant decline since 2010. Similarly, the rates for each of the PA regions also showed no significant changes from 2008 to 2010, and then showed significant declines since 2010.

Figure 4. Diabetes - Medical Management



The statewide rate of readmission for the same condition (diabetes - medical management) showed no significant change from 2008. The rate for Central & Northeastern PA showed a significant increase during that time, but the other regions showed no significant differences.

*Represents data from January 1, 2013 through August 31, 2014



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For More Information

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