

PA Health Care Cost Containment Council

Hospital Performance Report



2014 Data



Central and Northeastern
Pennsylvania

December 2015



About the Report

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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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Also on PHC4's website for the *Hospital Performance Report*:

- ⇒ **Key Findings**
- ⇒ **Hospital Results**
- ⇒ **Medicare and Medicaid Payments**
- ⇒ **Hospital Comments**
- ⇒ **Technical Notes**
- ⇒ **Downloadable Data**

About the 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* (HPR) can help to fill the information vacuum and assist consumers and purchasers in making more informed health care decisions. The HPR can 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 17 different medical conditions and surgical procedures, 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 2014 through December 2014.
- This report is divided into three regional versions: Western Pennsylvania, Central and Northeastern Pennsylvania, and Southeastern Pennsylvania. (Please see sidebar on this page for details.)
- 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

This report is divided into three regional versions: Western Pennsylvania, Central and Northeastern Pennsylvania, and Southeastern Pennsylvania.

Western Pennsylvania includes the following counties:

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
Westmoreland

Central and Northeastern Pennsylvania includes the following counties:

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

Southeastern Pennsylvania includes the following counties:

Berks ▪ Bucks ▪ Carbon ▪ Chester
Delaware ▪ Lehigh ▪ Montgomery
Northampton ▪ Philadelphia
Schuylkill

About the Report

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 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 2013.

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 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, heart failure, 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, heart failure, 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 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 for 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-

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission 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.

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adjusted mortality statistics as a measure of quality since it began publishing reports in 1989. The mortality analysis includes Do Not Resuscitate (DNR) cases. Because 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 30-Day Readmissions.** This measure is reported as a statistical rating that represents the number of patients who are readmitted following their initial hospital stay. A readmission is defined as a subsequent acute care hospitalization, for any reason to any Pennsylvania general and specialty general acute care 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 the previous 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.
- **Case Mix Adjusted Average Hospital Charge.** This report also includes the average hospital charge for each of the 17 conditions and procedures. The average hospital charge represents 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 is adjusted for the mix of cases that are 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.

This report includes the following hospital-specific measures:

- Total number of cases
- Risk-adjusted mortality ratings
- Risk-adjusted readmission ratings
- Case mix adjusted average hospital charge

In the payments section of the report is information about Medicare and Medicaid payments:

- **Medicare and Medicaid Payments.** This section of the report displays the average payments made by Medicare fee-for-service, Medicaid fee-for-service, and Medicaid managed care for the 17 medical conditions/surgical procedures included in this report. This

About the Report

information is also broken down by the MS-DRGs (Medicare Severity – Diagnosis-Related Group) associated with each condition. The most recent payment data available to PHC4 is for 2013.

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.

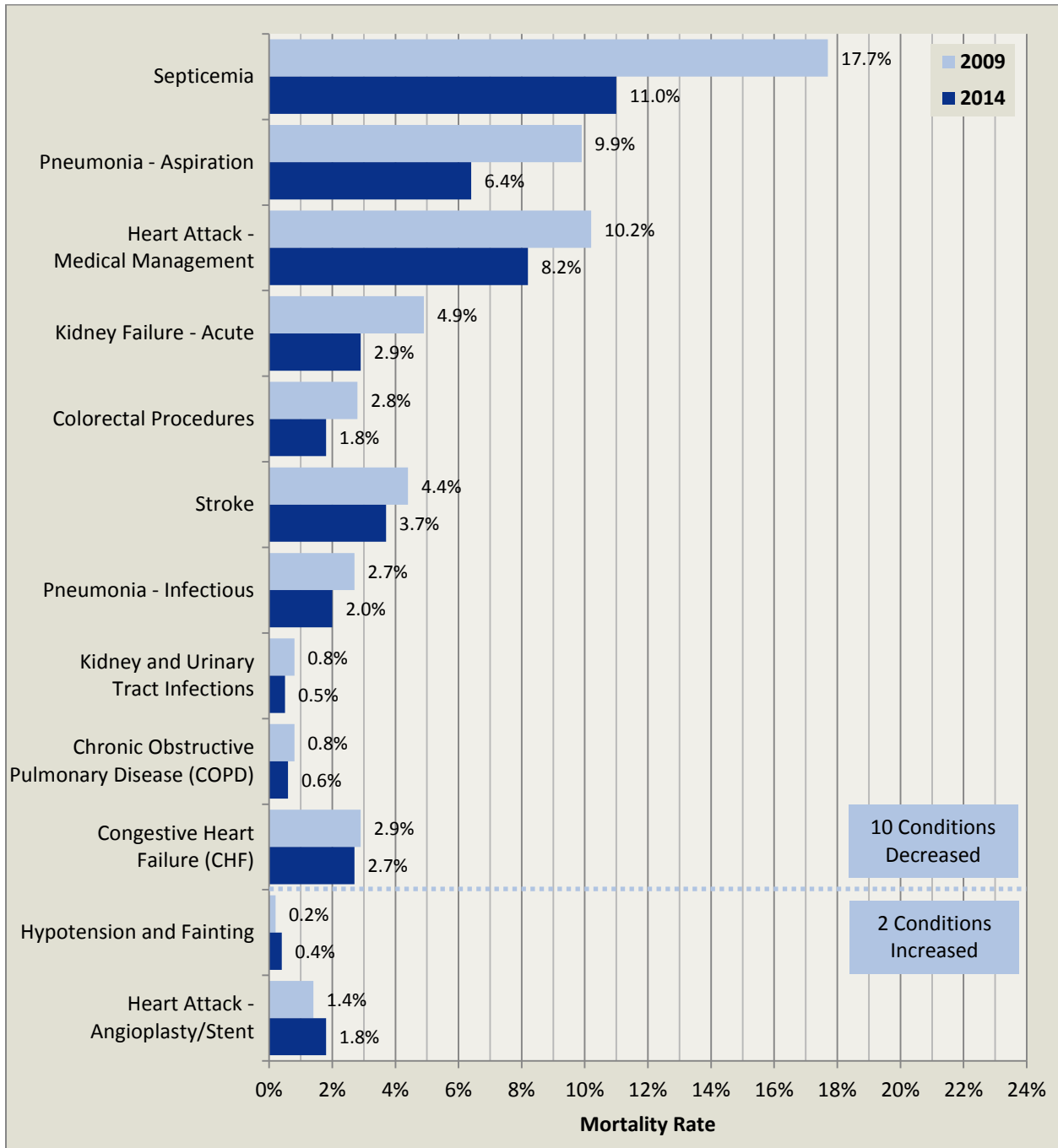
The measurement of quality is highly complex, and the information used to capture such measures is limited. A hospital death or a readmission is sometimes an unavoidable consequence of a patient's medical condition. Hospitals and physicians may do everything right, and the patient may still die or need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

Key Findings

Mortality Rates

Statewide in-hospital mortality rates showed a statistically significant decrease in ten of the 16 conditions reported in 2009 and 2014. The largest decrease was in Septicemia, where the mortality rate decreased from 17.7% in 2009 to 11.0% in 2014.

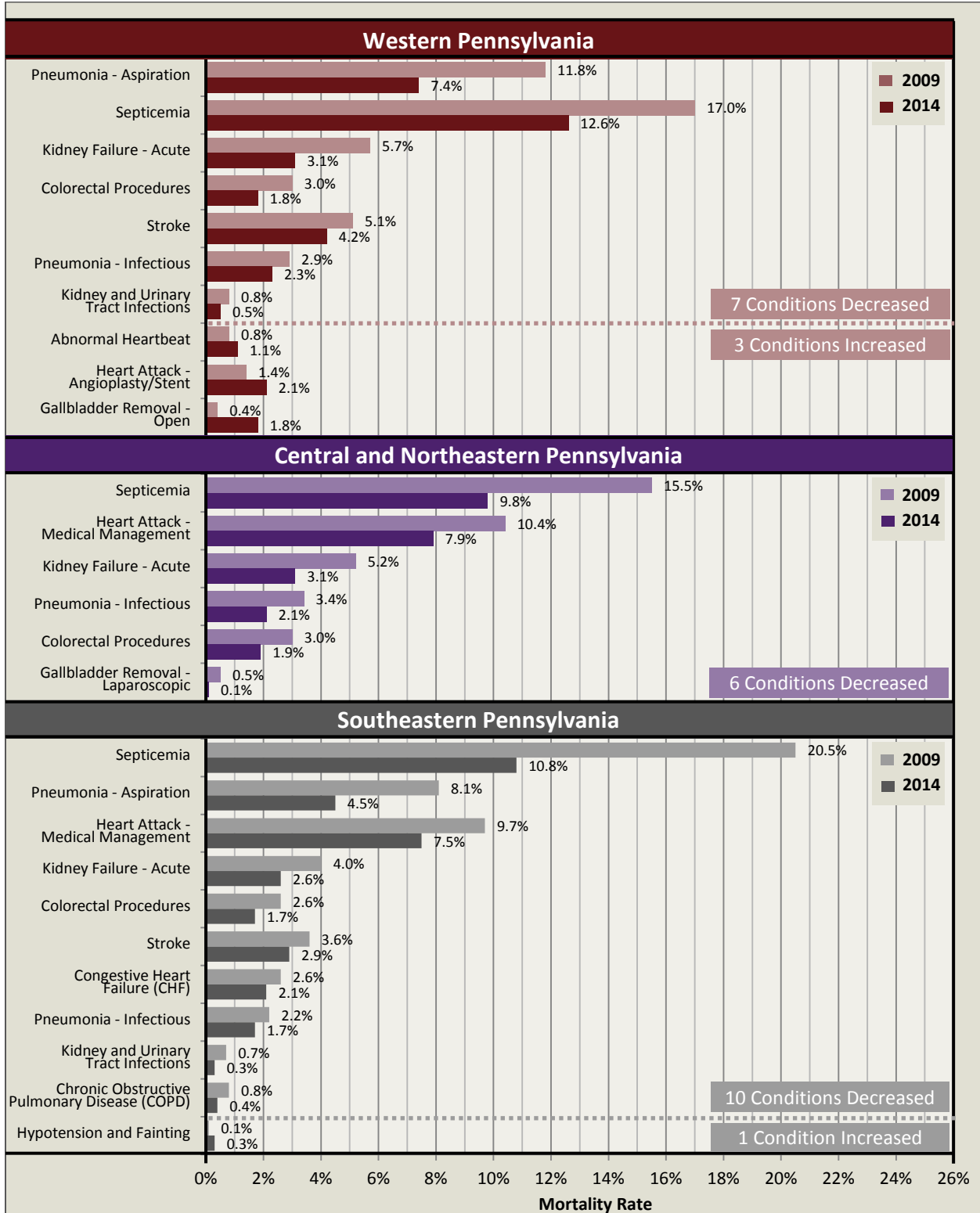
Statewide in-hospital mortality rates showed a statistically significant increase in two of the 16 conditions reported in 2009 and 2014. The largest increase was in Heart Attack - Angioplasty/Stent, where the mortality rate increased from 1.4% in 2009 to 1.8% in 2014.



Key Findings

Mortality Rates

Across different areas of the state, in-hospital mortality rates showed statistically significant differences in the following conditions reported in 2009 and 2014.



Key Findings

Mortality Rates

Taking patient risk into account, the following in-hospital mortality rates across the different areas of the state were significantly higher or lower than the rest of the state in 2014.

	Western Pennsylvania	Central and Northeastern Pennsylvania	Southeastern Pennsylvania
Conditions with Statistically <u>Higher</u> Mortality Rates than Rest of State	<ul style="list-style-type: none"> Abnormal Heartbeat Congestive Heart Failure (CHF) Heart Attack – Medical Management Kidney Failure – Acute Pneumonia – Aspiration Pneumonia – Infectious Septicemia Stroke 	<ul style="list-style-type: none"> Congestive Heart Failure (CHF) Kidney and Urinary Tract Infections Kidney Failure – Acute Pneumonia – Aspiration Septicemia Stroke 	<ul style="list-style-type: none"> None
Conditions with Statistically <u>Lower</u> Mortality Rates than Rest of State	<ul style="list-style-type: none"> None 	<ul style="list-style-type: none"> None 	<ul style="list-style-type: none"> Abnormal Heartbeat Chronic Obstructive Pulmonary Disease (COPD) Congestive Heart Failure (CHF) Heart Attack – Medical Management Kidney and Urinary Tract Infections Kidney Failure – Acute Pneumonia – Aspiration Pneumonia – Infectious Septicemia Stroke

Western Pennsylvania:

- After accounting for patient risk, hospitals in Western Pennsylvania as a whole had significantly higher in-hospital mortality rates than the rest of the state for eight conditions, the greatest difference occurring in Septicemia (12.6% Western PA, 11.6% rest of PA).

Central and Northeastern Pennsylvania:

- After accounting for patient risk, hospitals in Central and Northeastern Pennsylvania as a whole had significantly higher in-hospital mortality rates than the rest of the state for six conditions, the greatest difference occurring in Pneumonia – Aspiration (8.6% Central and Northeastern PA, 6.3% rest of PA).

Southeastern Pennsylvania:

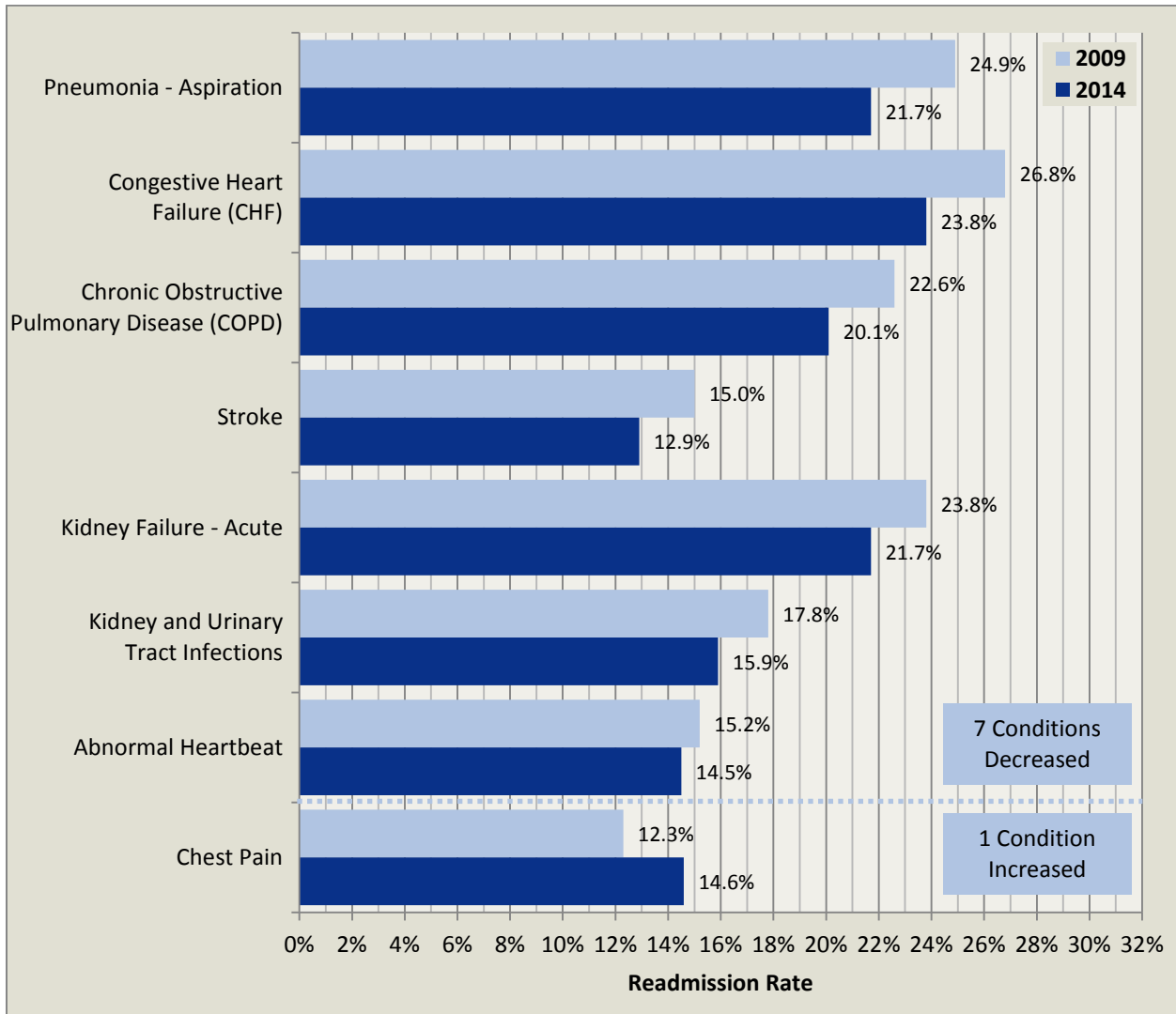
- After accounting for patient risk, hospitals in Southeastern Pennsylvania as a whole had significantly lower in-hospital mortality rates than the rest of the state for ten conditions, the greatest difference occurring in Pneumonia – Aspiration (4.5% Southeastern PA, 6.5% rest of PA).

Key Findings

Readmission Rates

Statewide 30-day readmission rates showed a statistically significant decrease in seven of the 13 conditions reported in 2009 and 2014. The largest decrease was in Pneumonia - Aspiration, where the readmission rate decreased from 24.9% in 2009 to 21.7% in 2014.

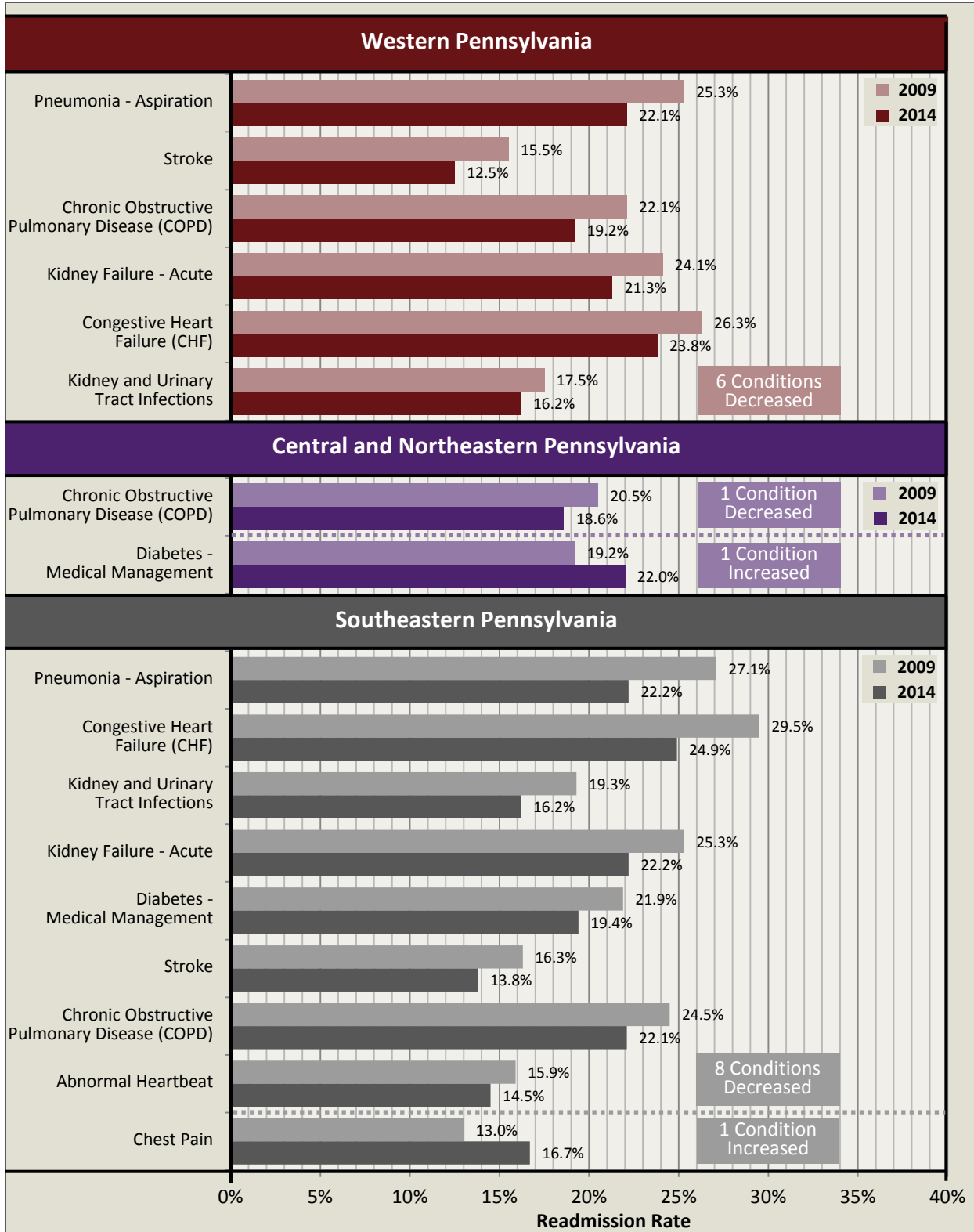
Statewide 30-day readmission rates showed a statistically significant increase in only one of the 13 conditions reported in 2009 and 2014. The condition, Chest Pain, had its rate increase from 12.3% in 2009 to 14.6% in 2014.



Key Findings

Readmission Rates

Across different areas of the state, 30-day readmission rates showed statistically significant differences in the following conditions reported in 2009 and 2014.



Key Findings

Readmission Rates

Taking patient risk into account, the following 30-day readmission rates across the different areas of the state were significantly higher or lower than the rest of the state in 2014.

	Western Pennsylvania	Central and Northeastern Pennsylvania	Southeastern Pennsylvania
Conditions with Statistically Higher Readmission Rates than Rest of State	<ul style="list-style-type: none"> Abnormal Heartbeat 	<ul style="list-style-type: none"> Diabetes – Medical Management 	<ul style="list-style-type: none"> Chest Pain Chronic Obstructive Pulmonary Disease (COPD) Stroke
Conditions with Statistically Lower Readmission Rates than Rest of State	<ul style="list-style-type: none"> None 	<ul style="list-style-type: none"> Abnormal Heartbeat Chest Pain Chronic Obstructive Pulmonary Disease (COPD) Congestive Heart Failure (CHF) Hypotension and Fainting 	<ul style="list-style-type: none"> Diabetes – Medical Management

Western Pennsylvania:

- After accounting for patient risk, hospitals in Western Pennsylvania as a whole had a significantly higher 30-day readmission rate than the rest of the state for only one condition, Abnormal Heartbeat (14.9% Western PA, 14.2% rest of PA).

Central and Northeastern Pennsylvania:

- After accounting for patient risk, hospitals in Central and Northeastern Pennsylvania as a whole had a significantly higher 30-day readmission rate than the rest of the state for only one condition, Diabetes – Medical Management (22.0% Central and Northeastern PA, 19.6% rest of PA).
- After accounting for patient risk, hospitals in Central and Northeastern Pennsylvania as a whole had significantly lower 30-day readmission rates than the rest of the state for five conditions, the greatest difference occurring in Chest Pain (11.3% Central and Northeastern PA, 13.5% rest of PA).

Southeastern Pennsylvania:

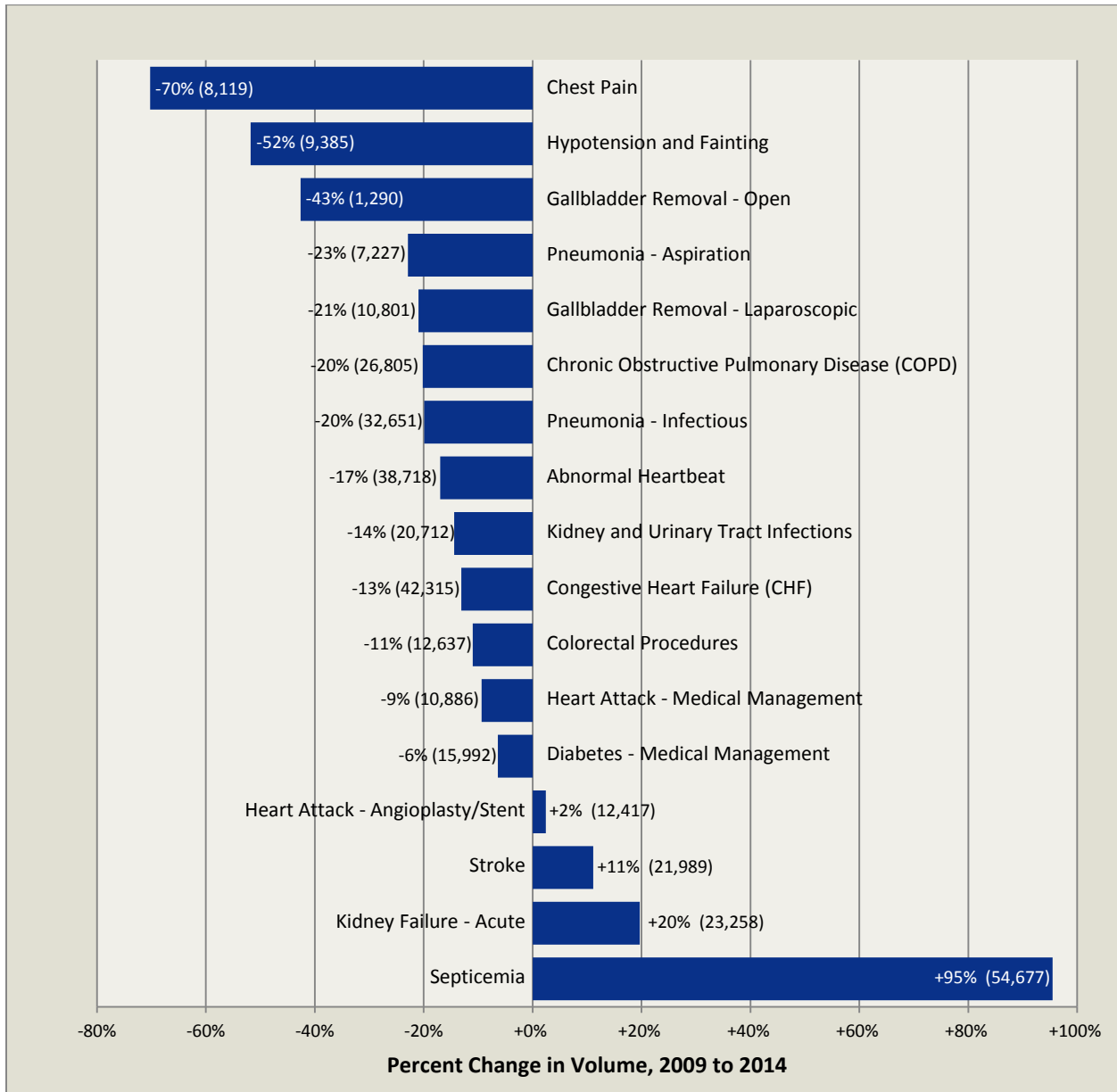
- After accounting for patient risk, hospitals in Southeastern Pennsylvania as a whole had significantly higher 30-day readmission rates than the rest of the state for three conditions, the greatest difference occurring in Chest Pain (16.7% Southeastern PA, 15.4% rest of PA).
- After accounting for patient risk, hospitals in Southeastern Pennsylvania as a whole had a significantly lower 30-day readmission rate than the rest of the state for only one condition, Diabetes – Medical Management (19.4% Southeastern PA, 20.6% rest of PA).

Key Findings

Volume of Hospital Admissions

The following chart shows the statewide percent change in volume of discharges, from 2009 to 2014, for each of the 17 conditions and procedures included in this report (admission totals in 2014 are shown in parentheses).

Chest Pain had the largest decrease in volume (-70%), from 27,278 discharges in 2009 to 8,119 in 2014. Septicemia had the largest increase in volume (+95%), from 27,969 discharges in 2009 to 54,677 in 2014.



Medicare and Medicaid Payments

2013 Data for Pennsylvania Residents

Medicare Fee-for-Service

- Medicare fee-for-service was the primary payer for 39.1% of the statewide admissions for Pennsylvania residents in 2013 for the conditions and procedures in this report, for a total of nearly \$1.01 billion.
- The condition with the highest average Medicare fee-for-service payment in 2013 was Colorectal Procedures, at \$18,285 per hospitalization. The condition with the lowest average Medicare fee-for-service payment in 2013 was Chest Pain, at \$2,969 per hospitalization.

Medicaid Fee-For-Service

- Medicaid fee-for-service was the primary payer for 2.3% of the statewide admissions for Pennsylvania residents in 2013 for the conditions and procedures in this report, for a total of over \$80 million.
- The condition with the highest average Medicaid fee-for-service payment in 2013 was Colorectal Procedures, at \$16,694 per hospitalization. The condition with the lowest average Medicaid fee-for-service payment in 2013 was Chest Pain, at \$3,737 per hospitalization.

Medicaid Managed Care

- Medicaid managed care was the primary payer for 5.4% of the statewide admissions for Pennsylvania residents in 2013 for the conditions and procedures in this report, for a total of nearly \$160 million.
- The condition with the highest average Medicaid managed care payment in 2013 was Colorectal Procedures, at \$17,614 per hospitalization. The condition with the lowest average Medicaid managed care payment in 2013 was Chest Pain, at \$4,384 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.

Abnormal Heartbeat

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	38,718	0.9%	14.5%	\$39,658
Central & Northeastern PA	9,430	0.9%	13.8%	\$29,074
Barnes-Kasson County	18	⊙	⊙	\$14,878
Berwick	47	⊙	⊙	\$54,971
Bucktail	0	NR	NR	NR
Carlisle Regional	93	●	⊙	\$37,972
Chambersburg	395	⊙	●	\$25,644
Endless Mountains	11	⊙	⊙	\$9,702
Ephrata Community	139	⊙	○	\$32,334
Evangelical Community	138	⊙	⊙	\$17,809
Fulton County	22	⊙	⊙	\$26,514
Geisinger Wyoming Valley	367	⊙	⊙	\$48,118
Geisinger-Bloomsburg	24	⊙	⊙	\$34,499
Geisinger-Community	398	⊙	⊙	\$37,731
Geisinger-Lewistown	152	⊙	⊙	\$15,474
Geisinger/Danville	510	⊙	⊙	\$37,692
Gettysburg	154	⊙	⊙	\$23,523
Good Samaritan/Lebanon	251	⊙	○	\$26,739
Hanover	137	⊙	⊙	\$20,612
Heart of Lancaster	59	⊙	⊙	\$37,763
Holy Spirit	359	⊙	⊙	\$28,219
J C Blair Memorial	37	⊙	⊙	\$12,765
Jersey Shore	33	●	⊙	\$19,034

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 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.

Abnormal Heartbeat

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Lancaster General	896	⊖	⊖	\$28,942
Lancaster Regional	101	⊖	⊖	\$45,557
Lehigh Valley/Hazleton	170	⊖	⊖	\$29,161
Lock Haven	28	●	⊖	\$50,972
Memorial York	152	⊖	⊖	\$26,261
Memorial/Towanda	17	⊖	⊖	\$27,530
Milton S Hershey	313	⊖	⊖	\$30,367
Moses Taylor	123	⊖	⊖	\$48,044
Mount Nittany	316	⊖	⊖	\$25,490
Muncy Valley	7	⊖	⊖	\$11,822
Pinnacle Health	838	⊖	⊖	\$19,034
Pocono	298	⊖	⊖	\$33,006
Regional Scranton	407	⊖	⊖	\$39,844
Robert Packer	626	⊖	⊖	\$20,093
Soldiers & Sailors	39	⊖	⊖	\$20,071
Sunbury Community	28	⊖	⊖	\$36,518
Troy Community	11	⊖	⊖	\$15,685
Tyler Memorial	21	⊖	⊖	\$29,886
Wayne Memorial	70	⊖	⊖	\$20,175
Waynesboro	54	⊖	⊖	\$23,821
Wilkes-Barre General	402	⊖	⊖	\$46,476
Williamsport Regional	377	⊖	⊖	\$24,220
York	791	⊖	⊖	\$21,553

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).

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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.

Chest Pain

Hospital	Total Number of Cases	Readmissions (for any reason)	Average Hospital Charge
Statewide	7,990	14.6%	\$22,593
Central & Northeastern PA	1,784	11.3%	\$15,796
Barnes-Kasson County	14	⊙	\$5,237
Berwick	22	⊙	\$31,573
Bucktail	0	NR	NR
Carlisle Regional	6	⊙	\$21,593
Chambersburg	37	⊙	\$15,125
Endless Mountains	6	⊙	\$4,313
Ephrata Community	10	⊙	\$23,320
Evangelical Community	14	⊙	\$9,347
Fulton County	8	⊙	\$17,432
Geisinger Wyoming Valley	53	⊙	\$19,905
Geisinger-Bloomsburg	11	⊙	\$14,165
Geisinger-Community	174	⊙	\$19,080
Geisinger-Lewistown	27	●	\$12,675
Geisinger/Danville	82	⊙	\$22,558
Gettysburg	40	⊙	\$14,437
Good Samaritan/Lebanon	33	⊙	\$14,158
Hanover	16	⊙	\$13,230
Heart of Lancaster	2	NR	NR
Holy Spirit	40	⊙	\$21,842
J C Blair Memorial	8	⊙	\$8,266
Jersey Shore	12	⊙	\$15,042

Chest Pain

Pain in the chest that is usually not related to the heart (non-cardiac chest pain). Common causes for this type of chest pain include gastric reflux (“heartburn”), 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 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.

Mortality ratings were not reported for Chest Pain because the number of mortalities statewide was less than 10.

Chest Pain

Hospital	Total Number of Cases	Readmissions (for any reason)	Average Hospital Charge
Lancaster General	62	⊖	\$16,402
Lancaster Regional	20	⊖	\$21,444
Lehigh Valley/Hazleton	38	○	\$18,019
Lock Haven	4	NR	NR
Memorial York	81	⊖	\$13,635
Memorial/Towanda	1	NR	NR
Milton S Hershey	42	⊖	\$15,065
Moses Taylor	28	⊖	\$19,702
Mount Nittany	42	○	\$17,116
Muncy Valley	2	NR	NR
Pinnacle Health	221	○	\$9,280
Pocono	53	⊖	\$19,632
Regional Scranton	70	⊖	\$17,982
Robert Packer	162	⊖	\$12,503
Soldiers & Sailors	3	NR	NR
Sunbury Community	2	NR	NR
Troy Community	4	NR	NR
Tyler Memorial	14	⊖	\$12,925
Wayne Memorial	12	⊖	\$12,503
Waynesboro	17	⊖	\$12,009
Wilkes-Barre General	91	⊖	\$22,357
Williamsport Regional	61	⊖	\$12,247
York	139	⊖	\$14,011

Chest Pain

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

Understanding the Symbols

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

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Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge	COPD
Statewide	26,805	0.6%	20.1%	\$27,429	
Central & Northeastern PA	6,664	0.7%	18.6%	\$22,700	
Barnes-Kasson County	63	●	⊙	\$9,306	
Berwick	85	⊙	⊙	\$41,089	
Bucktail	3	NR	NR	NR	
Carlisle Regional	79	⊙	⊙	\$23,623	
Chambersburg	141	⊙	⊙	\$17,162	
Endless Mountains	71	●	⊙	\$7,963	
Ephrata Community	153	⊙	⊙	\$28,413	
Evangelical Community	68	⊙	⊙	\$13,745	
Fulton County	43	⊙	⊙	\$21,622	
Geisinger Wyoming Valley	202	⊙	⊙	\$30,002	
Geisinger-Bloomsburg	53	●	⊙	\$29,758	
Geisinger-Community	257	⊙	⊙	\$30,339	
Geisinger-Lewistown	225	⊙	⊙	\$13,885	
Geisinger/Danville	283	⊙	⊙	\$35,739	
Gettysburg	107	⊙	⊙	\$17,909	
Good Samaritan/Lebanon	202	⊙	○	\$20,299	
Hanover	124	⊙	●	\$15,706	
Heart of Lancaster	37	⊙	⊙	\$24,517	
Holy Spirit	257	⊙	⊙	\$25,091	
J C Blair Memorial	50	⊙	⊙	\$10,059	
Jersey Shore	68	⊙	○	\$12,719	

Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge	COPD
Lancaster General	360	⊖	⊖	\$22,768	
Lancaster Regional	98	⊖	⊖	\$33,937	
Lehigh Valley/Hazleton	148	⊖	⊖	\$22,129	
Lock Haven	50	⊖	⊖	\$37,248	
Memorial York	153	⊖	⊖	\$16,267	
Memorial/Towanda	42	⊖	⊖	\$18,908	
Milton S Hershey	153	⊖	⊖	\$21,512	
Moses Taylor	124	⊖	⊖	\$26,294	
Mount Nittany	193	⊖	⊖	\$22,655	
Muncy Valley	38	⊖	⊖	\$16,515	
Pinnacle Health	486	⊖	⊖	\$14,548	
Pocono	293	⊖	⊖	\$21,729	
Regional Scranton	204	⊖	⊖	\$32,582	
Robert Packer	241	⊖	⊖	\$19,078	
Soldiers & Sailors	99	⊖	⊖	\$16,485	
Sunbury Community	76	⊖	⊖	\$31,457	
Troy Community	49	⊖	●	\$14,930	
Tyler Memorial	75	⊖	⊖	\$24,264	
Wayne Memorial	67	⊖	⊖	\$12,571	
Waynesboro	80	⊖	⊖	\$14,837	
Wilkes-Barre General	450	●	●	\$35,788	
Williamsport Regional	173	⊖	⊖	\$15,150	
York	436	⊖	⊖	\$16,316	

Colorectal Procedures

Hospital	Total Number of Cases	Mortality	Average Hospital Charge
Statewide	12,637	1.8%	\$85,543
Central & Northeastern PA	3,338	1.9%	\$64,850
Barnes-Kasson County	2	NR	NR
Berwick	4	NR	NR
Bucktail	0	NR	NR
Carlisle Regional	50	⊖	\$90,141
Chambersburg	109	⊖	\$45,415
Endless Mountains	0	NR	NR
Ephrata Community	39	⊖	\$57,792
Evangelical Community	53	⊖	\$42,575
Fulton County	0	NR	NR
Geisinger Wyoming Valley	101	⊖	\$110,951
Geisinger-Bloomsburg	23	⊖	\$42,967
Geisinger-Community	77	⊖	\$77,090
Geisinger-Lewistown	51	●	\$35,667
Geisinger/Danville	285	⊖	\$104,670
Gettysburg	51	⊖	\$53,109
Good Samaritan/Lebanon	90	⊖	\$59,084
Hanover	40	⊖	\$41,205
Heart of Lancaster	16	⊖	\$92,657
Holy Spirit	90	⊖	\$51,450
J C Blair Memorial	7	⊖	\$34,403
Jersey Shore	13	⊖	\$31,299

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

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 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.

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

Colorectal Procedures

Hospital	Total Number of Cases	Mortality	Average Hospital Charge
Lancaster General	293	⊖	\$51,119
Lancaster Regional	26	⊖	\$88,138
Lehigh Valley/Hazleton	55	⊖	\$72,473
Lock Haven	2	NR	NR
Memorial York	24	⊖	\$43,704
Memorial/Towanda	4	NR	NR
Milton S Hershey	305	⊖	\$57,492
Moses Taylor	62	⊖	\$115,529
Mount Nittany	87	⊖	\$54,058
Muncy Valley	0	NR	NR
Pinnacle Health	389	⊖	\$39,275
Pocono	94	⊖	\$61,152
Regional Scranton	127	⊖	\$92,472
Robert Packer	128	⊖	\$51,060
Soldiers & Sailors	13	●	\$26,862
Sunbury Community	18	⊖	\$70,590
Troy Community	0	NR	NR
Tyler Memorial	6	⊖	\$110,341
Wayne Memorial	34	⊖	\$46,660
Waynesboro	14	⊖	\$47,877
Wilkes-Barre General	203	⊖	\$97,381
Williamsport Regional	104	⊖	\$57,693
York	249	⊖	\$56,454

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

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 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.

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

Congestive Heart Failure (CHF)

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge	CHF
Statewide	42,315	2.7%	23.8%	\$35,837	<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 mortality or 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>
Central & Northeastern PA	10,425	3.1%	22.1%	\$26,185	
Barnes-Kasson County	57	○	○	\$11,147	
Berwick	69	○	○	\$49,114	
Bucktail	3	NR	NR	NR	
Carlisle Regional	106	○	○	\$24,914	
Chambersburg	400	○	○	\$21,343	
Endless Mountains	35	○	○	\$8,470	
Ephrata Community	179	○	○	\$33,323	
Evangelical Community	92	○	○	\$14,577	
Fulton County	28	○	○	\$22,179	
Geisinger Wyoming Valley	390	○	○	\$34,624	
Geisinger-Bloomsburg	56	○	○	\$25,572	
Geisinger-Community	296	○	○	\$31,007	
Geisinger-Lewistown	206	○	○	\$17,306	
Geisinger/Danville	725	○	○	\$38,208	
Gettysburg	141	○	○	\$20,186	
Good Samaritan/Lebanon	219	○	○	\$19,414	
Hanover	181	○	○	\$17,923	
Heart of Lancaster	70	○	○	\$29,785	
Holy Spirit	420	○	○	\$26,596	
J C Blair Memorial	75	○	○	\$10,772	
Jersey Shore	55	○	○	\$14,733	

Congestive Heart Failure (CHF)

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge	CHF
Lancaster General	906	⊖	○	\$26,428	<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 mortality or 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>
Lancaster Regional	116	⊖	⊖	\$37,225	
Lehigh Valley/Hazleton	216	⊖	⊖	\$26,331	
Lock Haven	72	⊖	⊖	\$45,899	
Memorial York	120	●	⊖	\$21,240	
Memorial/Towanda	25	●	⊖	\$14,186	
Milton S Hershey	541	⊖	⊖	\$28,160	
Moses Taylor	140	●	⊖	\$32,137	
Mount Nittany	322	⊖	⊖	\$25,070	
Muncy Valley	17	⊖	⊖	\$14,082	
Pinnacle Health	761	⊖	⊖	\$17,759	
Pocono	433	⊖	⊖	\$27,991	
Regional Scranton	495	⊖	⊖	\$32,805	
Robert Packer	379	⊖	●	\$22,397	
Soldiers & Sailors	84	⊖	●	\$19,054	
Sunbury Community	35	⊖	⊖	\$31,198	
Troy Community	44	⊖	⊖	\$12,517	
Tyler Memorial	27	⊖	⊖	\$18,976	
Wayne Memorial	125	⊖	⊖	\$14,487	
Waynesboro	94	⊖	⊖	\$20,290	
Wilkes-Barre General	461	●	⊖	\$37,382	
Williamsport Regional	280	⊖	⊖	\$19,132	
York	921	●	⊖	\$21,351	

Diabetes – Medical Management

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	15,992	0.6%	19.8%	\$27,907
Central & Northeastern PA	3,978	0.8%	22.0%	\$19,507
Barnes-Kasson County	17	⊙	●	\$8,828
Berwick	22	⊙	⊙	\$31,046
Bucktail	2	NR	NR	NR
Carlisle Regional	33	⊙	⊙	\$22,839
Chambersburg	154	⊙	⊙	\$15,452
Endless Mountains	7	⊙	⊙	\$9,883
Ephrata Community	74	⊙	●	\$22,449
Evangelical Community	39	⊙	⊙	\$12,767
Fulton County	15	⊙	⊙	\$15,255
Geisinger Wyoming Valley	170	⊙	⊙	\$29,085
Geisinger-Bloomsburg	20	⊙	⊙	\$19,678
Geisinger-Community	138	⊙	⊙	\$24,830
Geisinger-Lewistown	84	⊙	⊙	\$16,333
Geisinger/Danville	229	⊙	⊙	\$30,198
Gettysburg	70	⊙	●	\$15,932
Good Samaritan/Lebanon	89	⊙	⊙	\$18,784
Hanover	72	⊙	⊙	\$13,316
Heart of Lancaster	38	⊙	●	\$20,588
Holy Spirit	145	⊙	⊙	\$21,730
J C Blair Memorial	28	⊙	⊙	\$7,128
Jersey Shore	12	⊙	⊙	\$10,119

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

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 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.

Diabetes – Medical Management

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Lancaster General	326	⊖	⊖	\$19,573
Lancaster Regional	42	⊖	⊖	\$26,515
Lehigh Valley/Hazleton	59	⊖	⊖	\$18,836
Lock Haven	21	⊖	⊖	\$28,418
Memorial York	98	⊖	●	\$15,370
Memorial/Towanda	24	●	●	\$11,652
Milton S Hershey	183	⊖	●	\$22,000
Moses Taylor	77	⊖	⊖	\$33,686
Mount Nittany	103	⊖	⊖	\$21,624
Muncy Valley	4	NR	NR	NR
Pinnacle Health	461	⊖	⊖	\$12,802
Pocono	150	⊖	⊖	\$22,584
Regional Scranton	93	⊖	⊖	\$24,133
Robert Packer	133	⊖	⊖	\$20,321
Soldiers & Sailors	20	⊖	⊖	\$10,811
Sunbury Community	7	⊖	⊖	\$23,813
Troy Community	17	⊖	⊖	\$9,492
Tyler Memorial	8	⊖	⊖	\$21,476
Wayne Memorial	52	⊖	⊖	\$12,955
Waynesboro	42	⊖	⊖	\$14,633
Wilkes-Barre General	148	⊖	⊖	\$27,510
Williamsport Regional	113	⊖	⊖	\$12,493
York	338	⊖	⊖	\$14,764

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

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 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.

Gallbladder Removal – Laparoscopic

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	10,801	0.2%	6.8%	\$47,522
Central & Northeastern PA	2,703	0.1%	6.4%	\$41,246
Barnes-Kasson County	1	NR	NR	NR
Berwick	20	⊙	⊙	\$96,064
Bucktail	0	NR	NR	NR
Carlisle Regional	40	⊙	⊙	\$56,041
Chambersburg	91	⊙	⊙	\$32,031
Endless Mountains	2	NR	NR	NR
Ephrata Community	56	⊙	⊙	\$32,869
Evangelical Community	25	⊙	⊙	\$31,360
Fulton County	0	NR	NR	NR
Geisinger Wyoming Valley	92	⊙	⊙	\$64,017
Geisinger-Bloomsburg	21	⊙	⊙	\$27,837
Geisinger-Community	108	⊙	⊙	\$45,302
Geisinger-Lewistown	38	⊙	⊙	\$28,460
Geisinger/Danville	176	⊙	⊙	\$71,340
Gettysburg	36	●	⊙	\$28,942
Good Samaritan/Lebanon	78	⊙	⊙	\$36,957
Hanover	41	⊙	⊙	\$25,404
Heart of Lancaster	27	⊙	⊙	\$51,362
Holy Spirit	77	⊙	⊙	\$34,347
J C Blair Memorial	12	⊙	⊙	\$20,299
Jersey Shore	8	⊙	⊙	\$21,061

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

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 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.

Gallbladder Removal – Laparoscopic

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Lancaster General	238	⊖	⊖	\$33,259
Lancaster Regional	35	⊖	⊖	\$51,100
Lehigh Valley/Hazleton	90	⊖	⊖	\$42,571
Lock Haven	20	⊖	⊖	\$90,471
Memorial York	53	⊖	⊖	\$24,966
Memorial/Towanda	2	NR	NR	NR
Milton S Hershey	94	⊖	⊖	\$42,306
Moses Taylor	79	⊖	⊖	\$70,938
Mount Nittany	109	⊖	⊖	\$38,998
Muncy Valley	1	NR	NR	NR
Pinnacle Health	212	⊖	⊖	\$19,491
Pocono	115	⊖	⊖	\$38,119
Regional Scranton	100	⊖	⊖	\$65,091
Robert Packer	90	⊖	⊖	\$27,075
Soldiers & Sailors	12	⊖	⊖	\$31,608
Sunbury Community	13	⊖	⊖	\$43,936
Troy Community	3	NR	NR	NR
Tyler Memorial	6	⊖	⊖	\$58,299
Wayne Memorial	54	⊖	⊖	\$27,798
Waynesboro	27	⊖	⊖	\$31,227
Wilkes-Barre General	109	⊖	⊖	\$64,825
Williamsport Regional	80	⊖	⊖	\$41,550
York	212	⊖	⊖	\$25,821

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

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 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.

Gallbladder Removal – Open

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge	<h2>Gallbladder Removal – Open</h2> <p>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.</p> <p>Understanding the Symbols</p> <p>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 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>
Statewide	1,290	1.0%	10.8%	\$75,246	
Central & Northeastern PA	400	0.8%	9.8%	\$57,088	
Barnes-Kasson County	0	NR	NR	NR	
Berwick	1	NR	NR	NR	
Bucktail	0	NR	NR	NR	
Carlisle Regional	4	NR	NR	NR	
Chambersburg	15	◉	◉	\$38,503	
Endless Mountains	0	NR	NR	NR	
Ephrata Community	1	NR	NR	NR	
Evangelical Community	11	◉	◉	\$35,643	
Fulton County	0	NR	NR	NR	
Geisinger Wyoming Valley	23	◉	◉	\$86,856	
Geisinger-Bloomsburg	2	NR	NR	NR	
Geisinger-Community	8	◉	◉	\$85,855	
Geisinger-Lewistown	4	NR	NR	NR	
Geisinger/Danville	42	◉	◉	\$91,777	
Gettysburg	2	NR	NR	NR	
Good Samaritan/Lebanon	14	◉	◉	\$50,566	
Hanover	2	NR	NR	NR	
Heart of Lancaster	3	NR	NR	NR	
Holy Spirit	8	◉	◉	\$39,402	
J C Blair Memorial	2	NR	NR	NR	
Jersey Shore	3	NR	NR	NR	

Gallbladder Removal – Open

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge	<h3>Gallbladder Removal – Open</h3> <p>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.</p> <p>Understanding the Symbols</p> <p>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 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>
Lancaster General	52	○	○	\$43,059	
Lancaster Regional	2	NR	NR	NR	
Lehigh Valley/Hazleton	6	○	○	NR	
Lock Haven	2	NR	NR	NR	
Memorial York	1	NR	NR	NR	
Memorial/Towanda	0	NR	NR	NR	
Milton S Hershey	16	○	○	\$57,727	
Moses Taylor	14	○	○	\$87,502	
Mount Nittany	6	○	○	\$70,588	
Muncy Valley	0	NR	NR	NR	
Pinnacle Health	36	○	○	\$26,824	
Pocono	17	○	○	\$67,345	
Regional Scranton	17	○	○	\$71,403	
Robert Packer	14	○	○	\$33,736	
Soldiers & Sailors	6	○	○	\$29,231	
Sunbury Community	2	NR	NR	NR	
Troy Community	1	NR	NR	NR	
Tyler Memorial	1	NR	NR	NR	
Wayne Memorial	5	○	NR	\$40,783	
Waynesboro	1	NR	NR	NR	
Wilkes-Barre General	18	○	○	\$89,270	
Williamsport Regional	8	○	○	\$41,322	
York	30	○	○	\$41,200	

Heart Attack – Angioplasty/Stent

Hospital	Total Number of Cases	Mortality	Average Hospital Charge
Statewide	12,417	1.8%	\$86,416
Central & Northeastern PA	3,505	1.6%	\$67,599
Barnes-Kasson County	0	NR	NR
Berwick	0	NR	NR
Bucktail	0	NR	NR
Carlisle Regional	0	NR	NR
Chambersburg	168	⊙	\$60,951
Endless Mountains	0	NR	NR
Ephrata Community	0	NR	NR
Evangelical Community	82	⊙	\$56,213
Fulton County	0	NR	NR
Geisinger Wyoming Valley	125	⊙	\$110,634
Geisinger-Bloomsburg	0	NR	NR
Geisinger-Community	129	⊙	\$66,706
Geisinger-Lewistown	0	NR	NR
Geisinger/Danville	355	⊙	\$95,775
Gettysburg	0	NR	NR
Good Samaritan/Lebanon	142	⊙	\$66,218
Hanover†	50	⊙	\$52,225
Heart of Lancaster	0	NR	NR
Holy Spirit	121	⊙	\$54,305
J C Blair Memorial	0	NR	NR
Jersey Shore	0	NR	NR

† The data shown for this hospital is not representative of a full year; this facility did not begin performing these procedures until September 2014.

Heart Attack – Angioplasty/Stent

Procedures are used to open narrowed or blocked coronary (heart) arteries to restore blood flow to the heart muscle by inserting a catheter (thin tube) through the skin of the upper thigh or arm. An angioplasty is performed by inflating a small balloon at the end of the catheter to widen the narrowed or blocked area in the artery. Angioplasty procedures are often combined with the placement of a stent (permanent metallic mesh tube) to prevent the artery from narrowing again. Only patients who had a myocardial infarction (heart attack) are included.

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 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.

Readmission ratings were not reported for Heart Attack – Angioplasty/Stent to avoid counting readmissions that may have been planned.

Heart Attack – Angioplasty/Stent

Hospital	Total Number of Cases	Mortality	Average Hospital Charge
Lancaster General	378	⊙	\$60,257
Lancaster Regional	34	⊙	\$99,290
Lehigh Valley/Hazleton	0	NR	NR
Lock Haven	0	NR	NR
Memorial York	67	⊙	\$63,511
Memorial/Towanda	0	NR	NR
Milton S Hershey	191	⊙	\$57,559
Moses Taylor	0	NR	NR
Mount Nittany	74	⊙	\$61,789
Muncy Valley	0	NR	NR
Pinnacle Health	332	⊙	\$56,376
Pocono	151	⊙	\$66,922
Regional Scranton	212	⊙	\$87,566
Robert Packer	235	⊙	\$37,198
Soldiers & Sailors	0	NR	NR
Sunbury Community	0	NR	NR
Troy Community	0	NR	NR
Tyler Memorial	0	NR	NR
Wayne Memorial	0	NR	NR
Waynesboro	0	NR	NR
Wilkes-Barre General	133	⊙	\$107,007
Williamsport Regional	193	⊙	\$68,239
York	333	⊙	\$55,243

Heart Attack – Angioplasty/Stent

Procedures are used to open narrowed or blocked coronary (heart) arteries to restore blood flow to the heart muscle by inserting a catheter (thin tube) through the skin of the upper thigh or arm. An angioplasty is performed by inflating a small balloon at the end of the catheter to widen the narrowed or blocked area in the artery. Angioplasty procedures are often combined with the placement of a stent (permanent metallic mesh tube) to prevent the artery from narrowing again. Only patients who had a myocardial infarction (heart attack) are included.

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 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.

Readmission ratings were not reported for Heart Attack – Angioplasty/Stent to avoid counting readmissions that may have been planned.

Heart Attack – Medical Management

Hospital	Total Number of Cases	Transfer to Acute Care	Mortality	Average Hospital Charge
Statewide	10,886	17.1%	8.2%	\$39,649
Central & Northeastern PA	3,253	14.9%	7.9%	\$30,211
Barnes-Kasson County	3	NR	NR	NR
Berwick	35	25.0%	⊙	\$55,082
Bucktail	0	NR	NR	NR
Carlisle Regional	34	49.2%	⊙	\$24,544
Chambersburg*	241	18.1%	⊙	\$27,750
Endless Mountains	0	NR	NR	NR
Ephrata Community	18	73.5%	●	\$28,730
Evangelical Community*	104	16.2%	⊙	\$19,439
Fulton County	3	NR	NR	NR
Geisinger Wyoming Valley*	91	1.2%	⊙	\$44,486
Geisinger-Bloomsburg	8	41.7%	⊙	\$28,259
Geisinger-Community*	99	4.4%	⊙	\$35,347
Geisinger-Lewistown	29	60.9%	⊙	\$14,640
Geisinger/Danville*	282	0.8%	⊙	\$47,467
Gettysburg	20	59.2%	⊙	\$17,809
Good Samaritan/Lebanon*	83	3.8%	⊙	\$23,604
Hanover*†	66	50.8%	⊙	\$20,235
Heart of Lancaster	9	41.7%	⊙	\$29,182
Holy Spirit*	94	3.4%	⊙	\$30,164
J C Blair Memorial	8	58.8%	⊙	\$11,735
Jersey Shore	7	25.0%	⊙	\$20,191

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

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 Accounting for High Risk Patients in About the Report).

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- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.
- NR Not reported. Too few cases after exclusions.

* 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.

† This hospital began providing advanced cardiac services beginning September 2014.

Heart Attack – Medical Management

Hospital	Total Number of Cases	Transfer to Acute Care	Mortality	Average Hospital Charge
Lancaster General*	322	0.7%	⊙	\$26,614
Lancaster Regional*	28	10.3%	⊙	\$45,469
Lehigh Valley/Hazleton	74	36.4%	⊙	\$25,382
Lock Haven	7	41.7%	⊙	\$46,590
Memorial York*	58	14.3%	⊙	\$25,735
Memorial/Towanda	8	12.5%	⊙	\$21,488
Milton S Hershey*	163	0.0%	⊙	\$32,452
Moses Taylor	14	64.5%	⊙	\$36,832
Mount Nittany*	84	33.3%	●	\$26,916
Muncy Valley	6	0.0%	⊙	\$8,416
Pinnacle Health*	232	1.4%	⊙	\$22,846
Pocono*	123	5.0%	⊙	\$37,593
Regional Scranton*	122	2.5%	○	\$38,531
Robert Packer*	241	2.2%	⊙	\$24,644
Soldiers & Sailors	18	10.0%	⊙	\$23,055
Sunbury Community	4	NR	NR	NR
Troy Community	0	NR	NR	NR
Tyler Memorial	2	NR	NR	NR
Wayne Memorial	22	51.1%	⊙	\$15,124
Waynesboro	24	55.8%	⊙	\$21,797
Wilkes-Barre General*	151	5.0%	⊙	\$42,838
Williamsport Regional*	170	3.1%	⊙	\$23,990
York*	145	0.7%	⊙	\$25,872

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

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 Accounting for High Risk Patients in About the Report).

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- NR Not reported. Too few cases after exclusions.

* 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

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	9,385	0.4%	12.7%	\$25,683
Central & Northeastern PA	2,350	0.5%	10.8%	\$19,169
Barnes-Kasson County	13	⊙	⊙	\$8,989
Berwick	21	⊙	⊙	\$38,180
Bucktail	0	NR	NR	NR
Carlisle Regional	13	⊙	⊙	\$20,940
Chambersburg	57	⊙	○	\$16,613
Endless Mountains	1	NR	NR	NR
Ephrata Community	29	⊙	⊙	\$22,100
Evangelical Community	31	⊙	⊙	\$13,601
Fulton County	13	⊙	⊙	\$17,737
Geisinger Wyoming Valley	100	⊙	⊙	\$26,303
Geisinger-Bloomsburg	12	⊙	⊙	\$23,876
Geisinger-Community	139	⊙	⊙	\$25,498
Geisinger-Lewistown	34	⊙	⊙	\$13,229
Geisinger/Danville	128	⊙	⊙	\$30,461
Gettysburg	55	⊙	⊙	\$16,348
Good Samaritan/Lebanon	39	⊙	○	\$17,253
Hanover	36	⊙	⊙	\$11,650
Heart of Lancaster	2	NR	NR	NR
Holy Spirit	47	⊙	⊙	\$20,125
J C Blair Memorial	12	⊙	⊙	\$8,542
Jersey Shore	6	⊙	⊙	\$12,486

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

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 Accounting for High Risk Patients in About the Report).

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

NR Not reported. Too few cases after exclusions.

Hypotension and Fainting

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Lancaster General	178	⊖	⊖	\$17,546
Lancaster Regional	29	⊖	⊖	\$24,985
Lehigh Valley/Hazleton	62	⊖	⊖	\$18,027
Lock Haven	12	⊖	⊖	\$30,887
Memorial York	60	⊖	⊖	\$13,033
Memorial/Towanda	5	●	NR	\$13,581
Milton S Hershey	76	⊖	⊖	\$19,797
Moses Taylor	46	⊖	⊖	\$27,569
Mount Nittany	69	⊖	⊖	\$22,392
Muncy Valley	6	⊖	⊖	\$7,540
Pinnacle Health	223	●	⊖	\$10,702
Pocono	85	⊖	⊖	\$25,629
Regional Scranton	92	⊖	○	\$20,960
Robert Packer	81	⊖	⊖	\$16,286
Soldiers & Sailors	8	⊖	●	\$9,797
Sunbury Community	15	⊖	⊖	\$25,754
Troy Community	2	NR	NR	NR
Tyler Memorial	6	⊖	⊖	\$12,566
Wayne Memorial	23	⊖	⊖	\$11,245
Waynesboro	12	⊖	⊖	\$15,510
Wilkes-Barre General	136	⊖	⊖	\$26,673
Williamsport Regional	83	⊖	⊖	\$11,416
York	253	⊖	⊖	\$15,000

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 was significantly higher than expected.
- NR Not reported. Too few cases after exclusions.

Kidney and Urinary Tract Infections

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	20,712	0.5%	15.9%	\$24,502
Central & Northeastern PA	4,776	0.7%	15.0%	\$18,801
Barnes-Kasson County	22	⊙	●	\$8,645
Berwick	46	⊙	⊙	\$35,644
Bucktail	6	⊙	⊙	\$9,149
Carlisle Regional	56	⊙	⊙	\$22,296
Chambersburg	126	⊙	⊙	\$14,723
Endless Mountains	35	⊙	⊙	\$5,958
Ephrata Community	71	⊙	⊙	\$20,594
Evangelical Community	32	⊙	⊙	\$12,621
Fulton County	27	⊙	⊙	\$15,965
Geisinger Wyoming Valley	220	⊙	⊙	\$25,336
Geisinger-Bloomsburg	42	⊙	⊙	\$23,854
Geisinger-Community	188	⊙	⊙	\$23,667
Geisinger-Lewistown	140	⊙	○	\$13,243
Geisinger/Danville	247	⊙	⊙	\$28,437
Gettysburg	74	⊙	⊙	\$15,052
Good Samaritan/Lebanon	141	⊙	○	\$17,361
Hanover	79	⊙	⊙	\$13,396
Heart of Lancaster	67	⊙	⊙	\$18,954
Holy Spirit	170	⊙	⊙	\$20,187
J C Blair Memorial	34	⊙	⊙	\$8,776
Jersey Shore	43	●	⊙	\$10,841

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 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.

Kidney and Urinary Tract Infections

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Lancaster General	352	⊖	⊖	\$17,505
Lancaster Regional	63	⊖	⊖	\$25,753
Lehigh Valley/Hazleton	137	⊖	⊖	\$17,654
Lock Haven	35	⊖	⊖	\$26,163
Memorial York	75	⊖	⊖	\$15,470
Memorial/Towanda	36	⊖	⊖	\$12,312
Milton S Hershey	176	⊖	⊖	\$19,115
Moses Taylor	123	⊖	⊖	\$29,292
Mount Nittany	161	⊖	⊖	\$18,697
Muncy Valley	17	⊖	⊖	\$12,298
Pinnacle Health	415	⊖	⊖	\$11,890
Pocono	150	⊖	⊖	\$20,436
Regional Scranton	160	⊖	⊖	\$26,933
Robert Packer	93	⊖	⊖	\$15,158
Soldiers & Sailors	41	⊖	⊖	\$9,513
Sunbury Community	21	⊖	⊖	\$19,098
Troy Community	30	⊖	⊖	\$9,995
Tyler Memorial	35	⊖	⊖	\$17,099
Wayne Memorial	42	⊖	○	\$13,305
Waynesboro	39	⊖	⊖	\$14,362
Wilkes-Barre General	249	●	⊖	\$27,559
Williamsport Regional	98	⊖	⊖	\$12,073
York	359	⊖	⊖	\$14,248

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 was significantly higher than expected.
- NR Not reported. Too few cases after exclusions.

Kidney Failure – Acute

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	23,258	2.9%	21.7%	\$32,406
Central & Northeastern PA	5,819	3.1%	21.2%	\$23,959
Barnes-Kasson County	4	NR	NR	NR
Berwick	14	⊖	⊖	\$42,799
Bucktail	0	NR	NR	NR
Carlisle Regional	182	⊖	⊖	\$24,171
Chambersburg	313	⊖	⊖	\$18,665
Endless Mountains	15	●	⊖	\$8,326
Ephrata Community	53	⊖	⊖	\$28,860
Evangelical Community	108	⊖	⊖	\$14,096
Fulton County	5	⊖	NR	\$23,424
Geisinger Wyoming Valley	296	⊖	⊖	\$32,476
Geisinger-Bloomsburg	27	⊖	⊖	\$22,155
Geisinger-Community	211	⊖	⊖	\$30,787
Geisinger-Lewistown	42	⊖	⊖	\$18,388
Geisinger/Danville	429	⊖	⊖	\$33,017
Gettysburg	96	⊖	⊖	\$18,870
Good Samaritan/Lebanon	111	⊖	○	\$23,255
Hanover	128	⊖	○	\$15,377
Heart of Lancaster	55	⊖	⊖	\$26,352
Holy Spirit	204	⊖	⊖	\$26,549
J C Blair Memorial	19	⊖	⊖	\$11,217
Jersey Shore	7	⊖	⊖	\$13,552

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

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- ⊖ Rate was not significantly different than expected.
- Rate was significantly higher than expected.
- NR Not reported. Too few cases after exclusions.

Kidney Failure – Acute

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Lancaster General	412	⊖	○	\$20,589
Lancaster Regional	54	⊖	⊖	\$27,870
Lehigh Valley/Hazleton	140	⊖	⊖	\$24,951
Lock Haven	44	⊖	⊖	\$29,226
Memorial York	70	⊖	⊖	\$17,021
Memorial/Towanda	9	⊖	⊖	\$12,794
Milton S Hershey	282	⊖	●	\$24,671
Moses Taylor	158	⊖	⊖	\$38,223
Mount Nittany	161	⊖	⊖	\$22,914
Muncy Valley	7	⊖	⊖	\$12,056
Pinnacle Health	486	⊖	●	\$16,897
Pocono	163	⊖	⊖	\$28,667
Regional Scranton	150	⊖	●	\$33,760
Robert Packer	174	⊖	⊖	\$21,486
Soldiers & Sailors	82	⊖	⊖	\$17,837
Sunbury Community	40	⊖	⊖	\$28,734
Troy Community	4	NR	NR	NR
Tyler Memorial	6	⊖	⊖	\$17,499
Wayne Memorial	81	●	⊖	\$12,055
Waynesboro	68	⊖	⊖	\$16,565
Wilkes-Barre General	223	●	⊖	\$38,440
Williamsport Regional	184	⊖	⊖	\$19,325
York	502	⊖	⊖	\$18,630

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

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- ⊖ Rate was not significantly different than expected.
- Rate was significantly higher than expected.
- NR Not reported. Too few cases after exclusions.

Pneumonia – Aspiration

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	7,227	6.4%	21.7%	\$43,337
Central & Northeastern PA	1,354	8.6%	19.5%	\$32,401
Barnes-Kasson County	1	NR	NR	NR
Berwick	9	⊖	⊖	\$40,847
Bucktail	1	NR	NR	NR
Carlisle Regional	20	⊖	⊖	\$30,998
Chambersburg	42	⊖	⊖	\$20,822
Endless Mountains	5	⊖	NR	\$8,372
Ephrata Community	32	⊖	⊖	\$31,012
Evangelical Community	11	⊖	⊖	\$15,066
Fulton County	3	NR	NR	NR
Geisinger Wyoming Valley	57	⊖	⊖	\$53,401
Geisinger-Bloomsburg	4	NR	NR	NR
Geisinger-Community	28	⊖	⊖	\$47,132
Geisinger-Lewistown	27	⊖	⊖	\$26,173
Geisinger/Danville	39	⊖	⊖	\$46,437
Gettysburg	27	⊖	⊖	\$25,283
Good Samaritan/Lebanon	71	⊖	⊖	\$26,192
Hanover	34	⊖	⊖	\$22,151
Heart of Lancaster	3	NR	NR	NR
Holy Spirit	46	⊖	⊖	\$37,714
J C Blair Memorial	9	⊖	⊖	\$9,970
Jersey Shore	7	⊖	⊖	\$14,368

Pneumonia – Aspiration

Caused by inhaling food, drink, mucus 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 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.

Pneumonia – Aspiration

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Lancaster General	152	⊖	⊖	\$29,137
Lancaster Regional	22	⊖	⊖	\$52,946
Lehigh Valley/Hazleton	53	●	⊖	\$36,747
Lock Haven	16	⊖	⊖	\$50,494
Memorial York	8	⊖	⊖	\$21,726
Memorial/Towanda	2	NR	NR	NR
Milton S Hershey	36	⊖	⊖	\$26,989
Moses Taylor	27	⊖	⊖	\$46,556
Mount Nittany	65	⊖	⊖	\$29,862
Muncy Valley	2	NR	NR	NR
Pinnacle Health	69	⊖	⊖	\$20,935
Pocono	90	⊖	⊖	\$37,628
Regional Scranton	67	⊖	⊖	\$43,957
Robert Packer	34	⊖	⊖	\$27,141
Soldiers & Sailors	19	⊖	⊖	\$29,133
Sunbury Community	20	⊖	⊖	\$39,363
Troy Community	2	NR	NR	NR
Tyler Memorial	6	⊖	⊖	\$31,123
Wayne Memorial	15	⊖	⊖	\$16,926
Waynesboro	12	⊖	⊖	\$30,000
Wilkes-Barre General	42	●	⊖	\$55,013
Williamsport Regional	48	●	⊖	\$22,669
York	71	⊖	⊖	\$20,968

Pneumonia – Aspiration

Caused by inhaling food, drink, mucus 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 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.

Pneumonia – Infectious

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	32,651	2.0%	16.4%	\$30,919
Central & Northeastern PA	8,734	2.1%	16.4%	\$25,112
Barnes-Kasson County	52	⊙	⊙	\$13,476
Berwick	53	⊙	⊙	\$46,848
Bucktail	13	⊙	⊙	\$12,642
Carlisle Regional	112	●	⊙	\$26,395
Chambersburg	264	⊙	⊙	\$17,538
Endless Mountains	45	⊙	⊙	\$7,811
Ephrata Community	208	⊙	⊙	\$29,145
Evangelical Community	107	⊙	⊙	\$13,504
Fulton County	61	⊙	⊙	\$21,672
Geisinger Wyoming Valley	322	⊙	⊙	\$36,335
Geisinger-Bloomsburg	79	⊙	⊙	\$32,498
Geisinger-Community	342	⊙	⊙	\$35,133
Geisinger-Lewistown	221	⊙	⊙	\$17,253
Geisinger/Danville	366	⊙	⊙	\$37,002
Gettysburg	115	⊙	⊙	\$21,688
Good Samaritan/Lebanon	293	⊙	⊙	\$23,750
Hanover	164	⊙	⊙	\$16,302
Heart of Lancaster	99	⊙	⊙	\$27,037
Holy Spirit	415	⊙	⊙	\$24,568
J C Blair Memorial	43	⊙	⊙	\$10,505
Jersey Shore	93	⊙	⊙	\$16,395

Pneumonia – Infectious

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

Understanding the Symbols

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- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.
- NR Not reported. Too few cases after exclusions.

Pneumonia – Infectious

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Lancaster General	483	○	⊙	\$23,272
Lancaster Regional	106	⊙	⊙	\$35,892
Lehigh Valley/Hazleton	303	⊙	⊙	\$23,593
Lock Haven	55	⊙	⊙	\$38,588
Memorial York	152	⊙	⊙	\$18,889
Memorial/Towanda	104	⊙	⊙	\$19,999
Milton S Hershey	333	⊙	⊙	\$24,986
Moses Taylor	176	●	⊙	\$32,094
Mount Nittany	288	⊙	⊙	\$25,050
Muncy Valley	57	⊙	⊙	\$17,568
Pinnacle Health	593	●	⊙	\$15,800
Pocono	368	⊙	⊙	\$27,755
Regional Scranton	337	⊙	⊙	\$36,049
Robert Packer	248	⊙	⊙	\$21,818
Soldiers & Sailors	147	⊙	⊙	\$19,904
Sunbury Community	88	⊙	⊙	\$35,401
Troy Community	48	⊙	⊙	\$14,728
Tyler Memorial	93	⊙	⊙	\$21,775
Wayne Memorial	124	⊙	⊙	\$15,577
Waynesboro	89	⊙	⊙	\$16,213
Wilkes-Barre General	408	●	⊙	\$40,140
Williamsport Regional	236	⊙	⊙	\$18,199
York	422	⊙	⊙	\$18,656

Pneumonia – Infectious

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

Understanding the Symbols

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Septicemia

Hospital	Total Number of Cases	Mortality	Average Hospital Charge
Statewide	54,677	11.0%	\$52,860
Central & Northeastern PA	17,021	9.8%	\$36,996
Barnes-Kasson County	10	⊖	\$20,305
Berwick	123	⊖	\$54,609
Bucktail	0	NR	NR
Carlisle Regional	227	⊖	\$43,199
Chambersburg	912	⊖	\$28,020
Endless Mountains	1	NR	NR
Ephrata Community	278	⊖	\$37,389
Evangelical Community	463	⊖	\$19,194
Fulton County	16	⊖	\$35,366
Geisinger Wyoming Valley	703	○	\$61,255
Geisinger-Bloomsburg	58	⊖	\$36,591
Geisinger-Community	407	⊖	\$53,039
Geisinger-Lewistown	94	●	\$31,667
Geisinger/Danville	1,304	⊖	\$55,588
Gettysburg	449	⊖	\$27,632
Good Samaritan/Lebanon	242	●	\$33,483
Hanover	439	⊖	\$21,628
Heart of Lancaster	38	⊖	\$49,016
Holy Spirit	712	○	\$38,531
J C Blair Memorial	150	⊖	\$12,998
Jersey Shore	9	⊖	\$21,241

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 a system-wide inflammation as the body responds to the severe infection, resulting in further illness and injury.

Understanding the Symbols

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NR Not reported. Too few cases after exclusions.

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

Septicemia

Hospital	Total Number of Cases	Mortality	Average Hospital Charge
Lancaster General	1,382	⊙	\$34,238
Lancaster Regional	47	⊙	\$59,825
Lehigh Valley/Hazleton	425	⊙	\$35,967
Lock Haven	135	⊙	\$45,181
Memorial York	204	⊙	\$25,412
Memorial/Towanda	38	⊙	\$27,089
Milton S Hershey	1,380	⊙	\$41,883
Moses Taylor	343	⊙	\$55,551
Mount Nittany	704	⊙	\$34,986
Muncy Valley	7	⊙	\$29,813
Pinnacle Health	1,207	●	\$24,918
Pocono	371	⊙	\$43,279
Regional Scranton	486	●	\$48,367
Robert Packer	480	●	\$35,702
Soldiers & Sailors	95	●	\$26,779
Sunbury Community	50	⊙	\$32,858
Troy Community	10	⊙	\$11,968
Tyler Memorial	24	⊙	\$29,977
Wayne Memorial	133	⊙	\$19,233
Waynesboro	296	⊙	\$23,749
Wilkes-Barre General	379	●	\$59,044
Williamsport Regional	559	⊙	\$27,261
York	1,631	⊙	\$27,975

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 a system-wide inflammation as the body responds to the severe infection, resulting in further illness and injury.

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Stroke

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	21,989	3.7%	12.9%	\$43,306
Central & Northeastern PA	5,627	4.2%	12.0%	\$30,830
Barnes-Kasson County	4	NR	NR	NR
Berwick	9	⊙	⊙	\$58,624
Bucktail	0	NR	NR	NR
Carlisle Regional	61	⊙	⊙	\$30,563
Chambersburg	235	⊙	⊙	\$26,596
Endless Mountains	3	NR	NR	NR
Ephrata Community	106	⊙	○	\$29,024
Evangelical Community	104	⊙	⊙	\$22,135
Fulton County	9	⊙	⊙	\$26,962
Geisinger Wyoming Valley	256	⊙	⊙	\$43,114
Geisinger-Bloomsburg	7	⊙	⊙	\$27,105
Geisinger-Community	281	○	⊙	\$38,878
Geisinger-Lewistown	85	●	⊙	\$18,052
Geisinger/Danville	426	⊙	⊙	\$47,622
Gettysburg	67	⊙	⊙	\$23,097
Good Samaritan/Lebanon	78	⊙	⊙	\$24,962
Hanover	140	⊙	⊙	\$18,578
Heart of Lancaster	31	●	⊙	\$30,234
Holy Spirit	217	⊙	⊙	\$30,127
J C Blair Memorial	11	⊙	⊙	\$11,752
Jersey Shore	7	⊙	⊙	\$12,519

Stroke

An ischemic stroke occurs when there is an obstruction (blockage) in a blood vessel in the brain or neck 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 obstruction responsible for the stroke, or patients admitted with a rupture (break) in a blood vessel in the brain (hemorrhagic stroke) unless the hemorrhage occurs after the ischemic stroke but during the hospitalization.

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Stroke

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Lancaster General	553	⊖	⊖	\$22,269
Lancaster Regional	42	⊖	⊖	\$37,382
Lehigh Valley/Hazleton	105	⊖	⊖	\$31,785
Lock Haven	11	⊖	⊖	\$41,630
Memorial York	70	⊖	⊖	\$24,163
Memorial/Towanda	8	⊖	⊖	\$21,032
Milton S Hershey	454	⊖	⊖	\$40,467
Moses Taylor	123	⊖	●	\$46,348
Mount Nittany	156	⊖	⊖	\$32,290
Muncy Valley	3	NR	NR	NR
Pinnacle Health	446	⊖	⊖	\$19,717
Pocono	203	⊖	⊖	\$35,568
Regional Scranton	105	⊖	⊖	\$35,809
Robert Packer	147	●	⊖	\$31,001
Soldiers & Sailors	32	⊖	⊖	\$19,314
Sunbury Community	11	⊖	⊖	\$41,307
Troy Community	3	NR	NR	NR
Tyler Memorial	5	⊖	⊖	\$27,101
Wayne Memorial	51	⊖	⊖	\$18,275
Waynesboro	49	⊖	⊖	\$25,718
Wilkes-Barre General	219	⊖	⊖	\$43,970
Williamsport Regional	202	⊖	⊖	\$17,402
York	491	●	⊖	\$23,507

Stroke

An ischemic stroke occurs when there is an obstruction (blockage) in a blood vessel in the brain or neck 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 obstruction responsible for the stroke, or patients admitted with a rupture (break) in a blood vessel in the brain (hemorrhagic stroke) unless the hemorrhage occurs after the ischemic stroke but during the hospitalization.

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Medicare and Medicaid Payments

The following table includes information about payments made by Medicare and Medicaid for the 17 medical conditions/surgical procedures included in this *Hospital Performance Report*. This analysis is based on data from 2013, which is the most recent payment data available to PHC4. Displayed separately are the average amounts paid by Medicare fee-for-service, Medicaid fee-for-service, and Medicaid managed care organizations for inpatient hospitalizations of Pennsylvania residents only. Payments from Medicare Advantage plans (e.g., Medicare HMOs) are not included, nor are patient liabilities (e.g., coinsurance and deductible dollar amounts).

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-

The payments analysis is based on data from 2013, the most recent information available to PHC4.

Displayed separately are the average amounts paid by Medicare fee-for-service, Medicaid fee-for-service, and

Medicaid managed care organizations for inpatient hospitalizations of Pennsylvania residents only.

service and managed care organization payments are calculated separately and are based on the claim-payment amounts obtained from the Pennsylvania Department of Human Services. 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 17 medical conditions/surgical procedures included in this report – broken down by the MS-DRGs included within each condition/procedure. While the 17 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. Differences in the approaches used by Medicare and Medicaid in determining payments may account for some of the variation seen across these payers.

Medicare and Medicaid Payments

Medicare and Medicaid Payments – 2013 Statewide Data							
For the 17 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		15,331	\$6,981	517	\$7,856	1,126	\$7,423
242	Permanent Cardiac Pacemaker Implant w/ MCC	578	\$21,505	7	NR	11	\$22,023
243	Permanent Cardiac Pacemaker Implant w/ CC	1,137	\$15,091	24	\$17,699	27	\$19,008
244	Permanent Cardiac Pacemaker Implant w/o CC/MCC	953	\$11,725	18	\$11,772	26	\$16,339
246	Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	22	\$19,969	4	NR	0	NR
247	Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/o MCC	25	\$12,888	1	NR	2	NR
248	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	13	\$18,462	3	NR	1	NR
249	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/o MCC	14	\$11,208	0	NR	0	NR
250	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/ MCC	131	\$20,856	13	\$17,574	12	\$18,418
251	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/o MCC	591	\$13,138	28	\$10,906	97	\$11,501
258	Cardiac Pacemaker Device Replacement w/ MCC	4	NR	0	NR	0	NR
259	Cardiac Pacemaker Device Replacement w/o MCC	14	\$10,681	1	NR	0	NR
260	Cardiac Pacemaker Revision Except Device Replacement w/ MCC	3	NR	0	NR	0	NR
261	Cardiac Pacemaker Revision Except Device Replacement w/ CC	10	NR	1	NR	0	NR
262	Cardiac Pacemaker Revision Except Device Replacement w/o CC/MCC	7	NR	0	NR	0	NR
286	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC	156	\$12,481	18	\$13,870	15	\$8,501
287	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC	342	\$6,007	30	\$6,928	31	\$6,304
308	Cardiac Arrhythmia and Conduction Disorders w/ MCC	2,985	\$7,144	92	\$8,524	138	\$7,814
309	Cardiac Arrhythmia and Conduction Disorders w/ CC	4,172	\$4,324	131	\$5,505	376	\$6,251
310	Cardiac Arrhythmia and Conduction Disorders w/o CC/MCC	4,174	\$2,575	146	\$3,714	390	\$5,249
Chest Pain		2,336	\$2,969	155	\$3,737	865	\$4,384
313	Chest Pain	2,336	\$2,969	155	\$3,737	865	\$4,384

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)
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Medicare and Medicaid Payments

Medicare and Medicaid Payments – 2013 Statewide Data							
For the 17 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)		11,662	\$5,318	476	\$6,113	2,199	\$6,811
190	Chronic Obstructive Pulmonary Disease w/ MCC	4,544	\$6,508	162	\$7,365	589	\$7,212
191	Chronic Obstructive Pulmonary Disease w/ CC	4,205	\$5,180	148	\$6,633	836	\$6,880
192	Chronic Obstructive Pulmonary Disease w/o CC/MCC	2,913	\$3,659	166	\$4,426	774	\$6,431
Colorectal Procedures		3,278	\$18,285	272	\$16,694	553	\$17,614
329	Major Small and Large Bowel Procedures w/ MCC	885	\$31,200	77	\$26,813	100	\$24,481
330	Major Small and Large Bowel Procedures w/ CC	1,453	\$15,107	121	\$14,048	283	\$17,996
331	Major Small and Large Bowel Procedures w/o CC/MCC	647	\$9,363	57	\$8,804	126	\$12,141
332	Rectal Resection w/ MCC	50	\$26,692	2	NR	5	NR
333	Rectal Resection w/ CC	150	\$14,119	7	NR	23	\$17,082
334	Rectal Resection w/o CC/MCC	93	\$9,306	8	NR	16	\$11,531
Congestive Heart Failure (CHF)		18,903	\$6,457	613	\$9,934	1,448	\$8,772
286	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC	296	\$14,500	54	\$19,704	58	\$10,265
287	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC	676	\$6,669	85	\$11,363	133	\$9,387
291	Heart Failure and Shock w/ MCC	6,295	\$8,686	142	\$12,156	307	\$9,447
292	Heart Failure and Shock w/ CC	8,433	\$5,605	284	\$7,155	761	\$8,494
293	Heart Failure and Shock w/o CC/MCC	3,203	\$3,530	48	\$6,284	189	\$7,907
Diabetes - Medical Management		3,950	\$5,403	907	\$6,256	2,507	\$5,988
073	Cranial and Peripheral Nerve Disorders w/ MCC	148	\$8,457	11	\$16,636	45	\$8,911
074	Cranial and Peripheral Nerve Disorders w/o MCC	477	\$5,127	65	\$6,002	278	\$6,247
299	Peripheral Vascular Disorders w/ MCC	34	\$9,158	3	NR	5	NR
300	Peripheral Vascular Disorders w/ CC	89	\$5,444	2	NR	20	\$7,406
301	Peripheral Vascular Disorders w/o CC/MCC	3	NR	1	NR	2	NR
637	Diabetes w/ MCC	726	\$8,358	120	\$11,537	249	\$7,352
638	Diabetes w/ CC	1,821	\$4,581	431	\$5,742	1,181	\$5,939
639	Diabetes w/o CC/MCC	518	\$2,888	259	\$4,054	674	\$5,182
698	Other Kidney and Urinary Tract Diagnoses w/ MCC	39	\$10,146	3	NR	6	NR
699	Other Kidney and Urinary Tract Diagnoses w/ CC	84	\$5,879	9	NR	37	\$6,280
700	Other Kidney and Urinary Tract Diagnoses w/o CC/MCC	11	\$3,850	3	NR	10	NR

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Medicare and Medicaid Payments

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For the 17 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		2,030	\$9,704	516	\$6,906	1,075	\$8,516
411	Cholecystectomy with Common Duct Exploration (C.D.E.) w/ MCC	3	NR	0	NR	2	NR
412	Cholecystectomy with C.D.E. w/ CC	4	NR	1	NR	0	NR
413	Cholecystectomy with C.D.E. w/o CC/MCC	1	NR	3	NR	0	NR
417	Laparoscopic Cholecystectomy without C.D.E. w/ MCC	452	\$14,796	56	\$10,857	100	\$10,236
418	Laparoscopic Cholecystectomy without C.D.E. w/ CC	815	\$9,644	168	\$7,780	349	\$9,485
419	Laparoscopic Cholecystectomy without C.D.E. w/o CC/MCC	755	\$6,648	288	\$5,639	624	\$7,701
Gallbladder Removal - Open		446	\$14,079	59	\$12,247	111	\$11,511
411	Cholecystectomy with C.D.E. w/ MCC	5	NR	2	NR	1	NR
412	Cholecystectomy with C.D.E. w/ CC	8	NR	1	NR	1	NR
413	Cholecystectomy with C.D.E. w/o CC/MCC	6	NR	1	NR	0	NR
414	Cholecystectomy Except by Laparoscope without C.D.E. w/ MCC	143	\$21,307	8	NR	21	\$17,438
415	Cholecystectomy Except by Laparoscope without C.D.E. w/ CC	167	\$12,127	29	\$11,122	51	\$11,386
416	Cholecystectomy Except by Laparoscope without C.D.E. w/o CC/MCC	117	\$7,643	18	\$9,953	37	\$8,655
Heart Attack - Angioplasty/Stent		2,911	\$13,800	610	\$14,636	493	\$17,445
246	Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	496	\$20,259	54	\$19,415	54	\$20,958
247	Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/o MCC	1,466	\$11,763	326	\$13,059	275	\$18,137
248	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	263	\$19,469	43	\$22,804	24	\$19,063
249	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/o MCC	503	\$10,510	158	\$13,624	106	\$14,647
250	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/ MCC	60	\$18,586	11	\$22,764	5	NR
251	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/o MCC	123	\$11,040	18	\$13,285	29	\$13,184

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Medicare and Medicaid Payments

Medicare and Medicaid Payments – 2013 Statewide Data

For the 17 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
Heart Attack - Medical Management		4,674	\$7,859	167	\$10,723	293	\$11,477
280	Acute Myocardial Infarction, Discharged Alive w/ MCC	2,154	\$10,267	53	\$14,481	107	\$13,817
281	Acute Myocardial Infarction, Discharged Alive w/ CC	1,368	\$5,959	51	\$9,608	100	\$10,642
282	Acute Myocardial Infarction, Discharged Alive w/o CC/MCC	738	\$3,884	55	\$6,905	76	\$9,182
283	Acute Myocardial Infarction, Expired w/ MCC	309	\$10,455	8	NR	9	NR
284	Acute Myocardial Infarction, Expired w/ CC	65	\$4,164	0	NR	0	NR
285	Acute Myocardial Infarction, Expired w/o CC/MCC	40	\$2,483	0	NR	1	NR
Hypotension and Fainting		4,306	\$3,915	117	\$4,520	451	\$5,042
312	Syncope and Collapse	4,306	\$3,915	117	\$4,520	451	\$5,042
Kidney and Urinary Tract Infections		9,458	\$4,815	375	\$6,778	1,073	\$5,928
689	Kidney and Urinary Tract Infections w/ MCC	2,870	\$6,415	71	\$12,511	166	\$7,136
690	Kidney and Urinary Tract Infections w/o MCC	6,588	\$4,118	304	\$5,439	907	\$5,706
Kidney Failure - Acute		9,613	\$6,463	426	\$9,248	1,160	\$8,372
682	Renal Failure w/ MCC	2,946	\$9,261	80	\$15,830	268	\$9,450
683	Renal Failure w/ CC	5,711	\$5,531	284	\$7,976	727	\$8,122
684	Renal Failure w/o CC/MCC	956	\$3,406	62	\$6,581	165	\$7,724
Pneumonia - Aspiration		3,829	\$9,480	105	\$11,913	269	\$11,138
177	Respiratory Infections and Inflammations w/ MCC	1,970	\$11,261	42	\$14,865	107	\$12,555
178	Respiratory Infections and Inflammations w/ CC	1,515	\$8,094	53	\$10,540	114	\$10,894
179	Respiratory Infections and Inflammations w/o CC/ MCC	344	\$5,388	10	NR	48	\$8,558
Pneumonia - Infectious		15,062	\$6,243	708	\$6,746	1,936	\$7,471
177	Respiratory Infections and Inflammations w/ MCC	507	\$11,338	16	\$18,330	44	\$13,703
178	Respiratory Infections and Inflammations w/ CC	391	\$7,770	16	\$10,508	50	\$10,600
179	Respiratory Infections and Inflammations w/o CC/ MCC	57	\$5,277	4	NR	7	NR
193	Simple Pneumonia and Pleurisy w/ MCC	5,010	\$8,224	192	\$8,870	387	\$8,546
194	Simple Pneumonia and Pleurisy w/ CC	6,494	\$5,335	333	\$5,894	1,006	\$7,252
195	Simple Pneumonia and Pleurisy w/o CC/MCC	2,603	\$3,497	147	\$4,225	442	\$6,069

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

Medicare and Medicaid Payments – 2013 Statewide Data							
<i>For the 17 medical conditions/surgical procedures included in this Hospital Performance Report</i>							
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
Septicemia		19,291	\$10,981	1,418	\$15,511	2,338	\$12,228
870	Septicemia or Severe Sepsis with Mechanical Ventilation 96+ Hours	840	\$37,476	156	\$25,700	190	\$25,212
871	Septicemia or Severe Sepsis without Mechanical Ventilation 96+ Hours w/ MCC	13,519	\$11,146	836	\$17,037	1,343	\$12,030
872	Septicemia or Severe Sepsis without Mechanical Ventilation 96+ Hours w/o MCC	4,932	\$6,016	426	\$8,784	805	\$9,494
Stroke		8,113	\$6,995	651	\$9,904	766	\$10,667
061	Acute Ischemic Stroke with Use of Thrombolytic Agent w/ MCC	134	\$17,790	9	NR	8	NR
062	Acute Ischemic Stroke with Use of Thrombolytic Agent w/ CC	238	\$11,656	18	\$7,595	16	\$16,735
063	Acute Ischemic Stroke with Use of Thrombolytic Agent w/o CC/MCC	69	\$8,707	3	NR	5	NR
064	Intracranial Hemorrhage or Cerebral Infarction w/ MCC	1,838	\$10,663	139	\$17,903	125	\$12,009
065	Intracranial Hemorrhage or Cerebral Infarction w/ CC	3,661	\$6,149	296	\$8,425	393	\$10,348
066	Intracranial Hemorrhage or Cerebral Infarction w/o CC/MCC	2,173	\$4,087	186	\$6,166	219	\$9,695

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.

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