PA Health Care Cost Containment Council

Southeastern Pennsylvania

Hospital Performance Report

January – September 2015 Data





Hospital Performance Report for Pennsylvania

Produced by the Pennsylvania Health Care Cost Containment Council (PHC4), this report displays hospital-specific results for inpatient hospital discharges from the period January 2015 through September 2015. In addition to this **About the Report** document, which provides a full description of the *Hospital Performance Report*, the PHC4 website also presents the following accompanying materials:

- **⇒** Medicare and Medicaid Payments
- **⇒** Hospital Comments
- □ Technical Notes
- **⇒** Downloadable Data

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About PHC4

Created by the PA General Assembly in 1986, the PA Health Care Cost Containment Council (PHC4) is an independent state agency charged with collecting, analyzing and reporting information that can be used to improve the quality and restrain the cost of health care in the state. Today, PHC4 is a recognized national leader in public health care reporting. 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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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 2015 through September 2015.
- 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

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. The ultimate responsibility for data accuracy and completeness lied with each individual hospital.

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 2014.

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

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.

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. 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.

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.

- O 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.
- *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-

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. The study period for this measure includes discharges from January 1 through August 31, 2015. Data from September 2015 is used to identify 30-day readmissions for patients discharged in the study period. 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.

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
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 2014.

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.

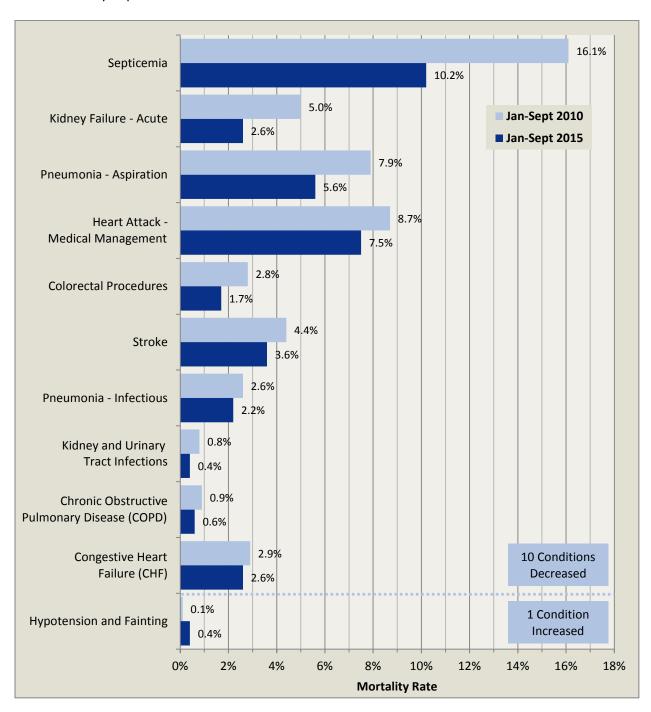
- Patients/Consumers can use this report as an aid in making decisions about where to seek
 treatment for the conditions detailed in this report. This report should be used in
 conjunction with a physician or other health care provider when making health care
 decisions.
- **Group Benefits Purchasers/Insurers** 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.

Mortality Rates

Statewide in-hospital mortality rates showed a statistically significant <u>decrease</u> in ten of the 16 conditions reported in 2010 and 2015. The largest decrease was in Septicemia, where the mortality rate decreased from 16.1% in January-September 2010 to 10.2% in January-September 2015.

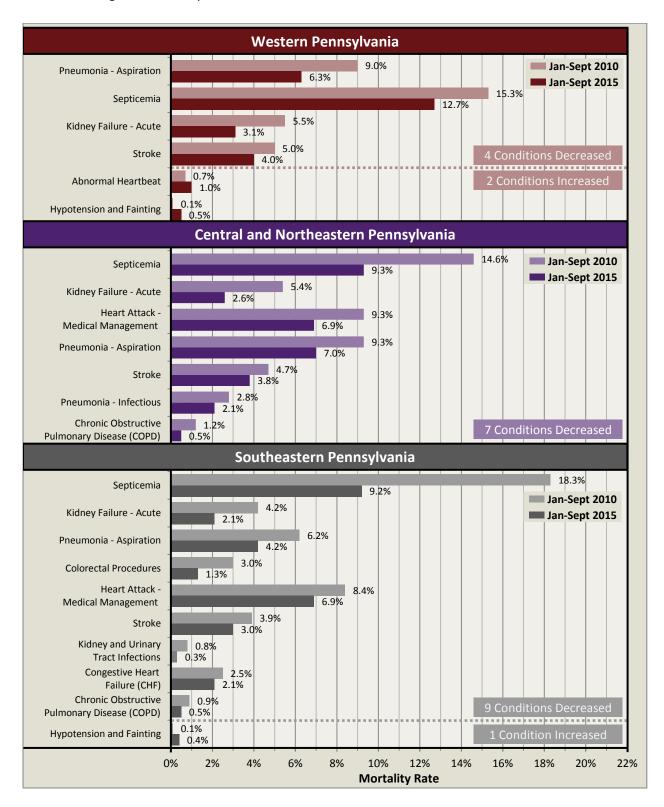
Statewide in-hospital mortality rates showed a statistically significant <u>increase</u> in only one condition, Hypotension and Fainting, where the mortality rate increased from 0.1% in January-September 2010 to 0.4% in January-September 2015.



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Mortality Rates

Across different areas of the state, in-hospital mortality rates showed statistically significant differences in the following conditions reported in 2010 and 2015.



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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 expected in January-September 2015.

	Western Pennsylvania	Central and Northeastern Pennsylvania	Southeastern Pennsylvania
Conditions with Mortality Rates Statistically <u>Higher</u> than Expected	 Congestive Heart Failure (CHF) Heart Attack – Angioplasty/Stent Heart Attack – Medical Management Kidney Failure – Acute Pneumonia – Aspiration Pneumonia – Infectious Septicemia Stroke 	 Abnormal Heartbeat Colorectal Procedures Congestive Heart Failure (CHF) Pneumonia – Aspiration Septicemia 	• None
Conditions with Mortality Rates Statistically <u>Lower</u> than Expected	• None	• None	 Abnormal Heartbeat Colorectal Procedures Congestive Heart Failure (CHF) Heart Attack – Angioplasty/Stent Heart Attack – Medical Management Kidney and Urinary Tract Infections Kidney Failure – Acute Pneumonia – Aspiration Septicemia Stroke

Western Pennsylvania:

 After accounting for patient risk, hospitals in Western Pennsylvania as a whole had in-hospital mortality rates that were significantly <u>higher</u> than expected for eight conditions, the greatest difference occurring in Septicemia (12.7% actual, 11.0% expected).

Central and Northeastern Pennsylvania:

After accounting for patient risk, hospitals in Central and Northeastern Pennsylvania as a whole
had in-hospital mortality rates that were significantly <u>higher</u> than expected for five conditions,
the greatest difference occurring in Pneumonia – Aspiration (7.0% actual, 5.4% expected).

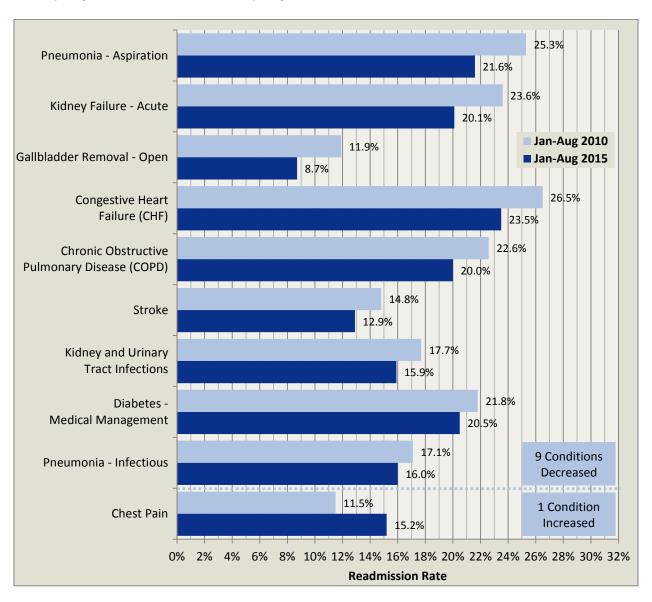
Southeastern Pennsylvania:

 After accounting for patient risk, hospitals in Southeastern Pennsylvania as a whole had inhospital mortality rates that were significantly <u>lower</u> than expected for ten conditions, the greatest difference occurring in Pneumonia – Aspiration (4.2% actual, 5.9% expected).

Readmission Rates

Statewide 30-day readmission rates showed a statistically significant <u>decrease</u> in nine of the 13 conditions reported in 2010 and 2015. The largest decrease was in Pneumonia - Aspiration, where the readmission rate decreased from 25.3% in January-August 2010 to 21.6% in January-August 2015.*

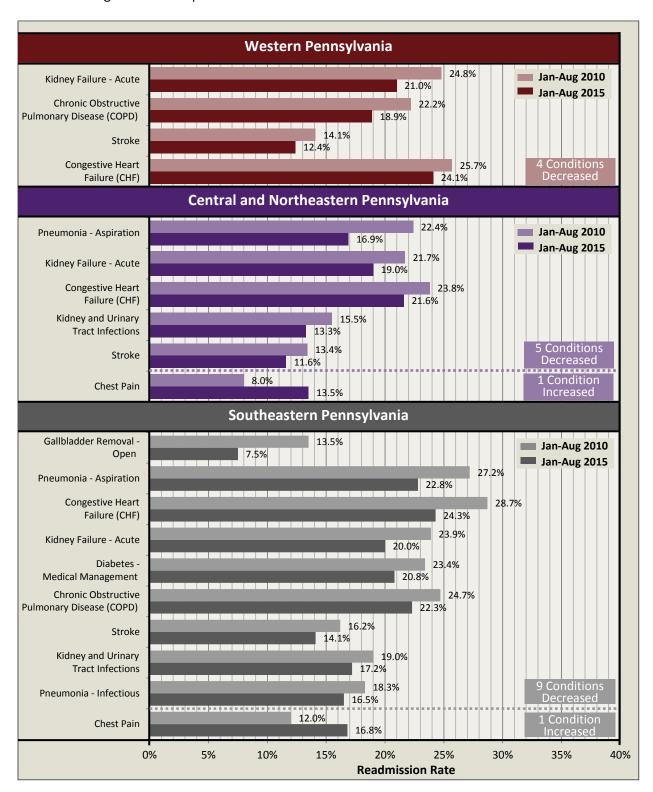
Statewide 30-day readmission rates showed a statistically significant <u>increase</u> in only one of the 13 conditions reported in 2010 and 2015. The condition, Chest Pain, had its rate increase from 11.5% in January-August 2010 to 15.2% in January-August 2015.



^{*} Note: The study period for the readmission analysis included discharges from January 1 through August 31, 2015; September 2015 data was used to identify 30-day readmissions for patients discharged in the study period.

Readmission Rates

Across different areas of the state, 30-day readmission rates showed statistically significant differences in the following conditions reported in 2010 and 2015.



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 expected in January-August 2015.

	Western Pennsylvania	Central and Northeastern Pennsylvania	Southeastern Pennsylvania
Conditions with Readmission Rates Statistically <u>Higher</u> than Expected	 Abnormal Heartbeat Congestive Heart Failure (CHF) Kidney Failure – Acute 	• None	 Chest Pain Chronic Obstructive Pulmonary Disease (COPD) Kidney and Urinary Tract Infections Stroke
Conditions with Readmission Rates Statistically <u>Lower</u> than Expected	• None	 Abnormal Heartbeat Chronic Obstructive Pulmonary Disease (COPD) Congestive Heart Failure (CHF) Kidney and Urinary Tract Infections Pneumonia – Aspiration Stroke 	• None

Western Pennsylvania:

 After accounting for patient risk, hospitals in Western Pennsylvania as a whole had 30-day readmission rates that were significantly <u>higher</u> than expected for three conditions, the greatest difference occurring in Congestive Heart Failure (24.1% actual, 23.0% expected).

Central and Northeastern Pennsylvania:

After accounting for patient risk, hospitals in Central and Northeastern Pennsylvania as a whole
had 30-day readmission rates that were significantly <u>lower</u> than expected for six conditions, the
greatest difference occurring in Pneumonia – Aspiration (16.9% actual, 20.7% expected).

Southeastern Pennsylvania:

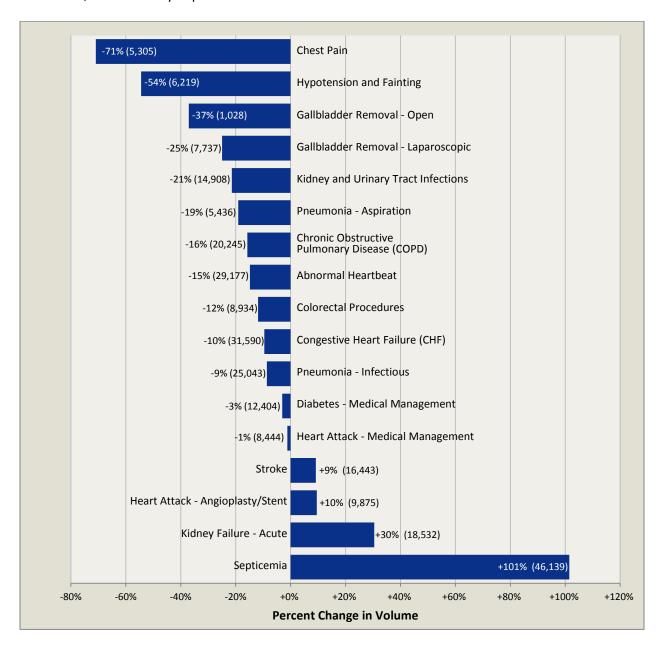
After accounting for patient risk, hospitals in Southeastern Pennsylvania as a whole had 30-day readmission rates that were significantly <u>higher</u> than expected for four conditions, the greatest difference occurring in Chronic Obstructive Pulmonary Disease (COPD) (22.3% actual, 20.9% expected).

Volume of Hospital Admissions

The following chart shows the statewide percent change in volume of discharges, from January-September 2010 to January-September 2015, for each of the 17 conditions and procedures included in this report (admission totals from January-September 2015 are shown in parentheses).

Chest Pain had the largest <u>decrease</u> in volume (-71%), from 18,252 discharges in January-September 2010 to 5,305 in January-September 2015.

Septicemia had the largest <u>increase</u> in volume (+101%), from 22,903 discharges in January-September 2010 to 46,139 in January-September 2015.



Medicare and Medicaid Payments

2014 Data for Pennsylvania Residents

Medicare Fee-for-Service

- Medicare fee-for-service was the primary payer for 38.1% of the statewide admissions for Pennsylvania residents in 2014 for the conditions and procedures in this report, for a total of nearly \$992.5 million (\$992,486,576).
- The condition with the highest average Medicare fee-for-service payment in 2014 was Colorectal Procedures, at \$18,007 per hospitalization. The condition with the lowest average Medicare fee-for-service payment in 2014 was Chest Pain, at \$3,718 per hospitalization.

Medicaid Fee-For-Service

- Medicaid fee-for-service was the primary payer for 2.2% of the statewide admissions for Pennsylvania residents in 2014 for the conditions and procedures in this report, for a total of more than \$78.1 million (\$78,101,871).
- The condition with the highest average Medicaid fee-for-service payment in 2014 was Colorectal Procedures, at \$20,201 per hospitalization. The condition with the lowest average Medicaid feefor-service payment in 2013 was Chest Pain, at \$3,558 per hospitalization.

Medicaid Managed Care

- Medicaid managed care was the primary payer for 5.5% of the statewide admissions for Pennsylvania residents in 2014 for the conditions and procedures in this report, for a total of nearly \$212.6 million (\$212,556,304).
- The condition with the highest average Medicaid managed care payment in 2014 was Colorectal Procedures, at \$23,473 per hospitalization. The condition with the lowest average Medicaid managed care payment in 2014 was Chest Pain, at \$5,355 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	29,177	0.9%	14.7%	\$41,292
Southeastern Pennsylvania	11,900	0.7%	14.9%	\$58,135
Abington Memorial	593	•	•	\$48,017
Albert Einstein	374	•	•	\$67,307
Aria Health	660	0	0	\$41,217
Brandywine	115	0	0	\$57,516
Chester County	342	0	0	\$27,405
Chestnut Hill	146	0	0	\$114,216
Crozer Chester	141	0	0	\$64,522
Delaware County Memorial	102	0	0	\$63,674
Doylestown	312	•	0	\$35,001
Eastern Regional	5	0	NR	\$139,463
Easton	159	•	0	\$90,124
Einstein Montgomery	209	0	0	\$44,210
Gnaden Huetten Memorial	46	0	0	\$26,750
Grand View	233	0	0	\$26,408
Hahnemann University	283	0	•	\$114,804
Holy Redeemer	207	•	0	\$47,859
Hospital Fox Chase Cancer	9	•	0	\$56,233
Hospital University PA	560	0	0	\$105,950
Jeanes	142	0	0	\$91,620
Jennersville Regional	68	•	0	\$67,618
Lansdale	139	•	0	\$27,477
Lehigh Valley Allentown	668	·	0	\$69,694
Lehigh Valley Muhlenberg	282	•	0	\$67,620
Lower Bucks	86	•	0	\$45,399
Main Line Bryn Mawr	300	0	0	\$43,661
Main Line Lankenau	389	•	0	\$42,911

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

- O 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
Main Line Paoli	326	0	0	\$43,563
Mercy Fitzgerald	148	•	0	\$49,668
Mercy Philadelphia	113	•	0	\$77,831
Mercy Suburban	68	0	0	\$38,800
Methodist Division/TJUH	88	•	0	\$62,258
Nazareth	170	0	0	\$63,137
Palmerton	34	•	0	\$24,339
Penn Presbyterian	443	•	0	\$85,208
Pennsylvania	254	•	0	\$73,952
Phoenixville	178	•	0	\$75,962
Pottstown Memorial	164	•	•	\$55,120
Reading	495	0	0	\$31,545
Riddle Memorial	211	0	0	\$45,139
Roxborough Memorial	68	0	0	\$68,826
Sacred Heart Allentown	61	0	0	\$61,685
Schuylkill East Norwegian	86	•	0	\$17,049
Schuylkill South Jackson	66	0	0	\$20,152
Springfield	41	•	0	\$71,592
St Joseph Reading	184	•	0	\$34,757
St Luke's Anderson	147	0	0	\$57,704
St Luke's Bethlehem	417	0	0	\$60,465
St Luke's Miners	27	0	0	\$43,124
St Luke's Quakertown	52	0	0	\$48,322
St Mary MC	699	0	0	\$34,379
Taylor	83	•	0	\$75,592
Temple University	265	0	0	\$90,288
Thomas Jefferson Univ	389	0	0	\$53,456

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

- O 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.

Chest Pain

Hospital	Total Number of Cases	Readmissions (for any reason)	Average Hospital Charge
Statewide	5,305	15.2%	\$22,932
Southeastern Pennsylvania	2,680	16.8%	\$29,533
Abington Memorial	42	0	\$20,975
Albert Einstein	142	0	\$28,838
Aria Health	124	0	\$17,432
Brandywine	25	0	\$36,121
Chester County	30	0	\$19,687
Chestnut Hill	83	0	\$49,562
Crozer Chester	19	0	\$43,327
Delaware County Memorial	20	0	\$39,912
Doylestown	40	0	\$15,497
Eastern Regional	3	NR	NR
Easton	50	•	\$40,319
Einstein Montgomery	23	0	\$23,736
Gnaden Huetten Memorial	2	NR	NR
Grand View	22	0	\$18,966
Hahnemann University	267	•	\$49,664
Holy Redeemer	36	0	\$33,675
Hospital Fox Chase Cancer	1	NR	NR
Hospital University PA	23	0	\$35,621
Jeanes	95	0	\$26,444
Jennersville Regional	26	0	\$44,926
Lansdale	20	•	\$14,231
Lehigh Valley Allentown	94	0	\$32,099
Lehigh Valley Muhlenberg	41	•	\$32,100
Lower Bucks	45	•	\$22,455
Main Line Bryn Mawr	33	•	\$26,311
Main Line Lankenau	43	•	\$25,139

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).

- O 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
Main Line Paoli	39	•	\$25,885
Mercy Fitzgerald	39	0	\$28,339
Mercy Philadelphia	61	•	\$25,980
Mercy Suburban	26	0	\$21,646
Methodist Division/TJUH	70	0	\$25,378
Nazareth	39	0	\$26,283
Palmerton	4	NR	NR
Penn Presbyterian	30	0	\$30,989
Pennsylvania	33	0	\$23,870
Phoenixville	18	0	\$45,913
Pottstown Memorial	18	0	\$41,576
Reading	32	0	\$14,469
Riddle Memorial	26	0	\$25,257
Roxborough Memorial	19	0	\$25,779
Sacred Heart Allentown	76	0	\$22,759
Schuylkill East Norwegian	11	0	\$8,858
Schuylkill South Jackson	15	0	\$9,896
Springfield	4	NR	NR
St Joseph Reading	26	0	\$12,325
St Luke's Anderson	28	0	\$22,618
St Luke's Bethlehem	104	0	\$27,970
St Luke's Miners	10	0	\$21,917
St Luke's Quakertown	8	0	\$25,219
St Mary MC	53	0	\$23,366
Taylor	36	0	\$41,820
Temple University	178	0	\$37,699
Thomas Jefferson Univ	175	0	\$25,377

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).

- O 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.

Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	20,245	0.6%	20.0%	\$28,230
Southeastern Pennsylvania	7,397	0.5%	22.3%	\$41,334
Abington Memorial	248	•	0	\$37,339
Albert Einstein	236	0	0	\$31,065
Aria Health	467	•	•	\$32,079
Brandywine	138	•	•	\$46,317
Chester County	116	•	0	\$30,042
Chestnut Hill	151	•	0	\$62,375
Crozer Chester	112	•	0	\$63,084
Delaware County Memorial	144	•	0	\$53,078
Doylestown	187	•	0	\$30,326
Eastern Regional	5	•	NR	NR
Easton	114	•	•	\$54,006
Einstein Montgomery	98	•	0	\$39,408
Gnaden Huetten Memorial	72	•	•	\$17,815
Grand View	111	•	0	\$25,856
Hahnemann University	134	0	0	\$70,665
Holy Redeemer	84	•	0	\$36,010
Hospital Fox Chase Cancer	24	•	0	\$42,823
Hospital University PA	109	0	0	\$53,219
Jeanes	132	0	•	\$56,844
Jennersville Regional	68	•	0	\$56,532
Lansdale	89	0	0	\$24,498
Lehigh Valley Allentown	332	0	0	\$43,475
Lehigh Valley Muhlenberg	241	0	0	\$43,769
Lower Bucks	93	0	0	\$33,830
Main Line Bryn Mawr	94	·	•	\$47,110
Main Line Lankenau	152	0	0	\$44,402

COPD

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

Understanding the Symbols

- 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.

Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Main Line Paoli	122	•	•	\$44,105
Mercy Fitzgerald	187	•	•	\$49,142
Mercy Philadelphia	213	•	· •	\$44,659
Mercy Suburban	59	•	0	\$40,083
Methodist Division/TJUH	184	•	0	\$39,632
Nazareth	152	•	•	\$31,935
Palmerton	44	•	0	\$18,285
Penn Presbyterian	100	•	0	\$37,915
Pennsylvania	96	0	0	\$59,320
Phoenixville	76	•	0	\$75,391
Pottstown Memorial	194	0	0	\$55,143
Reading	227	0	0	\$25,244
Riddle Memorial	120	0	0	\$49,582
Roxborough Memorial	58	0	0	\$44,779
Sacred Heart Allentown	45	•	0	\$34,160
Schuylkill East Norwegian	99	0	0	\$13,338
Schuylkill South Jackson	127	0	•	\$14,148
Springfield	19	0	0	\$62,642
St Joseph Reading	187	0	0	\$27,164
St Luke's Anderson	107	0	0	\$47,082
St Luke's Bethlehem	213	0	•	\$39,506
St Luke's Miners	54	0	0	\$22,804
St Luke's Quakertown	47	0	0	\$45,181
St Mary MC	245	0	0	\$29,283
Taylor	134	0	0	\$64,400
Temple University	275	0	•	\$63,694
Thomas Jefferson Univ	107	0	0	\$37,804

COPD

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

Understanding the Symbols

- 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.

Colorectal Procedures

Hospital	Total Number of Cases	Mortality	Average Hospital Charge
Statewide	8,934	1.7%	\$87,314
Southeastern Pennsylvania	3,664	1.3%	\$113,798
Abington Memorial	228	0	\$86,390
Albert Einstein	79	0	\$118,410
Aria Health	131	0	\$61,215
Brandywine	29	0	\$225,362
Chester County	86	•	\$64,383
Chestnut Hill	33	0	\$172,344
Crozer Chester	66	0	\$189,286
Delaware County Memorial	42	•	\$133,659
Doylestown	85	•	\$79,839
Eastern Regional	20	0	\$191,536
Easton	35	•	\$247,714
Einstein Montgomery	36	0	\$126,487
Gnaden Huetten Memorial	7	•	\$38,859
Grand View	84	0	\$64,692
Hahnemann University	65	•	\$253,036
Holy Redeemer	73	•	\$89,934
Hospital Fox Chase Cancer	104	0	\$120,944
Hospital University PA	304	•	\$135,937
Jeanes	36	•	\$119,983
Jennersville Regional	14	0	\$132,415
Lansdale	21	0	\$46,577
Lehigh Valley Allentown	295	•	\$131,405
Lehigh Valley Muhlenberg	55	•	\$133,586
Lower Bucks	7	•	\$99,226
Main Line Bryn Mawr	68	•	\$100,212
Main Line Lankenau	177	0	\$109,600

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).

- O 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
Main Line Paoli	102	0	\$84,324
Mercy Fitzgerald	26	0	\$135,807
Mercy Philadelphia	24	·	\$134,487
Mercy Suburban	30	·	\$97,288
Methodist Division/TJUH	29	·	\$106,136
Nazareth	41	·	\$82,074
Palmerton	11	0	\$48,230
Penn Presbyterian	44	·	\$117,095
Pennsylvania	140	·	\$96,319
Phoenixville	40	0	\$170,865
Pottstown Memorial	22	·	\$157,596
Reading	148	·	\$68,895
Riddle Memorial	73	0	\$132,420
Roxborough Memorial	10	0	\$109,097
Sacred Heart Allentown	10	0	\$111,267
Schuylkill East Norwegian	33	0	\$36,657
Schuylkill South Jackson	26	•	\$38,953
Springfield	1	NR	NR
St Joseph Reading	41	0	\$73,738
St Luke's Anderson	24	0	\$122,513
St Luke's Bethlehem	135	•	\$139,103
St Luke's Miners	2	NR	NR
St Luke's Quakertown	13	0	\$142,056
St Mary MC	122	0	\$91,672
Taylor	23	0	\$170,151
Temple University	87	0	\$175,071
Thomas Jefferson Univ	216	•	\$113,997

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).

- O 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
Statewide	31,590	2.6%	23.5%	\$37,603
Southeastern Pennsylvania	12,938	2.1%	24.3%	\$54,596
Abington Memorial	539	0	0	\$49,865
Albert Einstein	554	•	0	\$55,177
Aria Health	631	0	0	\$42,089
Brandywine	171	0	0	\$54,917
Chester County	284	0	0	\$34,229
Chestnut Hill	308	0	0	\$83,656
Crozer Chester	138	0	0	\$75,528
Delaware County Memorial	145	•	0	\$67,043
Doylestown	363	•	•	\$35,453
Eastern Regional	1	NR	NR	NR
Easton	136	•	0	\$59,056
Einstein Montgomery	269	•	0	\$49,990
Gnaden Huetten Memorial	63	0	0	\$21,873
Grand View	137	•	0	\$37,020
Hahnemann University	295	0	0	\$99,788
Holy Redeemer	206	•	0	\$52,988
Hospital Fox Chase Cancer	7	0	0	\$61,137
Hospital University PA	557	0	0	\$90,403
Jeanes	169	0	0	\$76,665
Jennersville Regional	72	•	0	\$69,139
Lansdale	177	0	0	\$28,753
Lehigh Valley Allentown	757	0	0	\$57,338
Lehigh Valley Muhlenberg	484	0	0	\$57,833
Lower Bucks	128	0	0	\$44,774
Main Line Bryn Mawr	236	·	•	\$56,728
Main Line Lankenau	439	0	0	\$56,623

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

- O 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.

Congestive Heart Failure (CHF)

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Main Line Paoli	267	•	0	\$54,818
Mercy Fitzgerald	242	•	0	\$59,250
Mercy Philadelphia	209	•	0	\$56,012
Mercy Suburban	101	•	0	\$49,684
Methodist Division/TJUH	222	•	0	\$58,270
Nazareth	261	•	•	\$50,970
Palmerton	49	•	0	\$17,723
Penn Presbyterian	431	•	0	\$50,732
Pennsylvania	213	0	0	\$75,283
Phoenixville	162	•	0	\$70,065
Pottstown Memorial	144	•	•	\$58,189
Reading	656	0	0	\$26,572
Riddle Memorial	224	0	0	\$51,559
Roxborough Memorial	73	0	0	\$65,635
Sacred Heart Allentown	84	0	0	\$40,150
Schuylkill East Norwegian	104	0	0	\$16,044
Schuylkill South Jackson	81	0	0	\$15,561
Springfield	38	0	0	\$67,835
St Joseph Reading	205	0	0	\$33,418
St Luke's Anderson	170	0	0	\$54,313
St Luke's Bethlehem	383	0	0	\$51,433
St Luke's Miners	55	0	0	\$29,496
St Luke's Quakertown	63	0	0	\$48,632
St Mary MC	387	0	0	\$36,053
Taylor	124	0	•	\$81,786
Temple University	279	0	0	\$72,150
Thomas Jefferson Univ	382	0	0	\$66,362

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

- O 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
Statewide	12,404	0.5%	20.5%	\$28,748
Southeastern Pennsylvania	5,807	0.4%	20.8%	\$38,969
Abington Memorial	171	0	0	\$35,443
Albert Einstein	341	•	0	\$34,632
Aria Health	370	0	0	\$21,178
Brandywine	55	0	0	\$47,943
Chester County	91	•	0	\$25,507
Chestnut Hill	93	•	0	\$52,326
Crozer Chester	91	•	0	\$71,193
Delaware County Memorial	74	•	0	\$64,018
Doylestown	77	•	•	\$27,274
Eastern Regional	3	NR	NR	NR
Easton	92	•	0	\$49,601
Einstein Montgomery	106	•	0	\$38,153
Gnaden Huetten Memorial	38	•	0	\$17,767
Grand View	57	•	0	\$19,175
Hahnemann University	185	0	•	\$65,062
Holy Redeemer	59	•	0	\$31,481
Hospital Fox Chase Cancer	2	NR	NR	NR
Hospital University PA	169	0	0	\$51,583
Jeanes	75	0	0	\$43,552
Jennersville Regional	32	0	0	\$40,135
Lansdale	57	0	0	\$26,423
Lehigh Valley Allentown	231	0	0	\$43,802
Lehigh Valley Muhlenberg	118	·	0	\$44,959
Lower Bucks	70	·	•	\$32,340
Main Line Bryn Mawr	71	·	0	\$40,883
Main Line Lankenau	202	0	•	\$40,383

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

- O 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
Main Line Paoli	55	•	0	\$44,777
Mercy Fitzgerald	156	·	0	\$41,844
Mercy Philadelphia	159	•	0	\$37,409
Mercy Suburban	79	•	0	\$32,441
Methodist Division/TJUH	158	•	0	\$35,899
Nazareth	98	•	0	\$29,619
Palmerton	14	•	•	\$14,041
Penn Presbyterian	170	•	0	\$33,590
Pennsylvania	115	•	0	\$43,104
Phoenixville	45	•	0	\$51,170
Pottstown Memorial	73	•	0	\$45,151
Reading	225	•	0	\$24,937
Riddle Memorial	67	0	0	\$45,467
Roxborough Memorial	42	0	0	\$33,313
Sacred Heart Allentown	45	0	0	\$30,533
Schuylkill East Norwegian	44	•	0	\$13,009
Schuylkill South Jackson	41	0	0	\$14,383
Springfield	11	•	0	\$43,271
St Joseph Reading	58	0	0	\$22,331
St Luke's Anderson	105	0	0	\$36,985
St Luke's Bethlehem	196	0	0	\$35,589
St Luke's Miners	32	0	0	\$20,469
St Luke's Quakertown	24	0	0	\$47,747
St Mary MC	155	0	0	\$29,102
Taylor	74	•	0	\$75,787
Temple University	324	0	0	\$58,003
Thomas Jefferson Univ	194	0	0	\$38,202

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

- O 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	7,737	0.2%	7.2%	\$49,872
Southeastern Pennsylvania	3,386	0.1%	6.2%	\$62,820
Abington Memorial	194	0	0	\$46,135
Albert Einstein	114	0	0	\$88,263
Aria Health	218	0	0	\$33,877
Brandywine	66	0	0	\$117,641
Chester County	106	0	0	\$37,440
Chestnut Hill	32	0	0	\$120,025
Crozer Chester	39	0	0	\$120,303
Delaware County Memorial	57	0	0	\$87,239
Doylestown	95	0	0	\$39,604
Eastern Regional	1	NR	NR	NR
Easton	45	0	0	\$133,625
Einstein Montgomery	58	0	0	\$65,381
Gnaden Huetten Memorial	14	0	0	\$24,362
Grand View	84	0	0	\$33,642
Hahnemann University	58	0	0	\$131,560
Holy Redeemer	60	0	0	\$57,783
Hospital Fox Chase Cancer	2	NR	NR	NR
Hospital University PA	70	0	0	\$88,384
Jeanes	43	0	0	\$83,198
Jennersville Regional	45	•	0	\$90,794
Lansdale	52	0	0	\$35,157
Lehigh Valley Allentown	178	0	0	\$61,393
Lehigh Valley Muhlenberg	90	0	0	\$62,297
Lower Bucks	33	•	0	\$68,292
Main Line Bryn Mawr	79	•	0	\$54,638
Main Line Lankenau	106	0	0	\$58,388

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

- O 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
Main Line Paoli	24	•	0	\$51,803
Mercy Fitzgerald	64	•	0	\$67,336
Mercy Philadelphia	46	•	0	\$67,561
Mercy Suburban	27	•	0	\$56,330
Methodist Division/TJUH	62	•	0	\$65,944
Nazareth	74	•	0	\$50,199
Palmerton	9	•	0	\$27,512
Penn Presbyterian	58	•	0	\$64,653
Pennsylvania	54	•	0	\$55,729
Phoenixville	46	•	0	\$74,296
Pottstown Memorial	65	•	0	\$86,373
Reading	171	0	0	\$33,460
Riddle Memorial	77	0	0	\$78,056
Roxborough Memorial	18	0	0	\$52,528
Sacred Heart Allentown	32	0	0	\$43,580
Schuylkill East Norwegian	22	•	0	\$19,377
Schuylkill South Jackson	32	•	0	\$22,821
Springfield	8	•	0	\$93,554
St Joseph Reading	50	0	0	\$44,939
St Luke's Anderson	36	0	0	\$59,250
St Luke's Bethlehem	86	0	0	\$71,993
St Luke's Miners	3	NR	NR	NR
St Luke's Quakertown	16	0	0	\$57,831
St Mary MC	127	0	0	\$54,495
Taylor	26	•	0	\$96,694
Temple University	70	0	0	\$136,267
Thomas Jefferson Univ	122	0	0	\$70,994

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

- 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	Readmissions (for any reason)	Average Hospital Charge
Statewide	1,028	8.7%	\$78,939
Southeastern Pennsylvania	409	7.5%	\$101,912
Abington Memorial	19	0	\$71,713
Albert Einstein	21	0	\$122,684
Aria Health	11	0	\$46,319
Brandywine	0	NR	NR
Chester County	3	NR	NR
Chestnut Hill	15	0	\$147,252
Crozer Chester	7	NR	\$207,934
Delaware County Memorial	5	NR	\$115,907
Doylestown	4	NR	NR
Eastern Regional	3	NR	NR
Easton	8	0	\$183,724
Einstein Montgomery	1	NR	NR
Gnaden Huetten Memorial	0	NR	NR
Grand View	12	0	\$53,840
Hahnemann University	7	0	\$271,017
Holy Redeemer	14	0	\$74,407
Hospital Fox Chase Cancer	5	0	\$68,140
Hospital University PA	43	0	\$127,673
Jeanes	4	NR	NR
Jennersville Regional	0	NR	NR
Lansdale	3	NR	NR
Lehigh Valley Allentown	17	0	\$81,242
Lehigh Valley Muhlenberg	18	•	\$85,069
Lower Bucks	1	NR	NR
Main Line Bryn Mawr	5	NR	NR
Main Line Lankenau	6	•	\$81,083

Gallbladder Removal – Open

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

Understanding the Symbols

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).

- O 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 Gallbladder Removal – Open because the number of mortalities statewide was less than 10.

Gallbladder Removal – Open

Hospital	Total Number of Cases	Readmissions (for any reason)	Average Hospital Charge
Main Line Paoli	9	0	\$59,104
Mercy Fitzgerald	3	NR	NR
Mercy Philadelphia	3	NR	NR
Mercy Suburban	3	NR	NR
Methodist Division/TJUH	7	0	\$92,282
Nazareth	8	0	\$64,668
Palmerton	1	NR	NR
Penn Presbyterian	7	NR	\$81,861
Pennsylvania	7	NR	\$63,043
Phoenixville	5	0	\$106,862
Pottstown Memorial	3	NR	NR
Reading	14	0	\$35,070
Riddle Memorial	18	0	\$105,652
Roxborough Memorial	1	NR	NR
Sacred Heart Allentown	5	0	NR
Schuylkill East Norwegian	5	NR	NR
Schuylkill South Jackson	2	NR	NR
Springfield	4	NR	NR
St Joseph Reading	4	NR	NR
St Luke's Anderson	0	NR	NR
St Luke's Bethlehem	7	0	\$108,050
St Luke's Miners	0	NR	NR
St Luke's Quakertown	0	NR	NR
St Mary MC	8	0	\$73,043
Taylor	4	NR	NR
Temple University	20	0	\$170,722
Thomas Jefferson Univ	24	0	\$126,836

Gallbladder Removal – Open

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

Understanding the Symbols

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).

- O 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 Gallbladder Removal – Open because the number of mortalities statewide was less than 10.

Heart Attack - Angioplasty/Stent

Hospital	Total Number of Cases	Mortality	Average Hospital Charge
Statewide	9,875	1.4%	\$88,832
Southeastern Pennsylvania	3,663	1.4%	\$114,311
Abington Memorial	160	0	\$111,648
Albert Einstein	160	0	\$99,623
Aria Health	216	•	\$50,927
Brandywine	21	•	\$177,832
Chester County	82	0	\$46,774
Chestnut Hill	0	NR	NR
Crozer Chester	121	•	\$144,592
Delaware County Memorial	0	NR	NR
Doylestown	165	0	\$86,464
Eastern Regional	0	NR	NR
Easton	49	0	\$184,443
Einstein Montgomery	127	•	\$73,696
Gnaden Huetten Memorial	0	NR	NR
Grand View	12	•	\$52,266
Hahnemann University	81	0	\$183,674
Holy Redeemer	41	0	\$136,278
Hospital Fox Chase Cancer	0	NR	NR
Hospital University PA	85	•	\$212,784
Jeanes	56	•	\$111,036
Jennersville Regional	0	NR	NR
Lansdale	0	NR	NR
Lehigh Valley Allentown	403	0	\$143,014
Lehigh Valley Muhlenberg	129	•	\$128,901
Lower Bucks	26	0	\$115,076
Main Line Bryn Mawr	92	•	\$97,192
Main Line Lankenau	144	•	\$80,576

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
Main Line Paoli	66	0	\$91,486
Mercy Fitzgerald	61	0	\$134,024
Mercy Philadelphia	0	NR	NR
Mercy Suburban	0	NR	NR
Methodist Division/TJUH	0	NR	NR
Nazareth	38	•	\$138,090
Palmerton	0	NR	NR
Penn Presbyterian	198	0	\$161,805
Pennsylvania	36	0	\$154,256
Phoenixville	101	0	\$216,258
Pottstown Memorial	0	NR	NR
Reading	195	0	\$81,042
Riddle Memorial	53	0	\$89,176
Roxborough Memorial	0	NR	NR
Sacred Heart Allentown	0	NR	NR
Schuylkill East Norwegian	0	NR	NR
Schuylkill South Jackson	0	NR	NR
Springfield	0	NR	NR
St Joseph Reading	81	0	\$81,280
St Luke's Anderson	70	0	\$111,005
St Luke's Bethlehem	166	0	\$113,925
St Luke's Miners	0	NR	NR
St Luke's Quakertown	0	NR	NR
St Mary MC	228	0	\$87,419
Taylor	0	NR	NR
Temple University	116	0	\$131,956
Thomas Jefferson Univ	84	0	\$111,842

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	8,444	15.7%	7.5%	\$40,376
Southeastern Pennsylvania	2,848	17.4%	6.9%	\$58,293
Abington Memorial*	85	1.3%	0	\$54,373
Albert Einstein*	96	5.1%	0	\$66,538
Aria Health*	165	5.3%	0	\$43,532
Brandywine*	40	13.6%	0	\$69,433
Chester County*	114	11.1%	0	\$31,264
Chestnut Hill	37	57.0%	0	\$74,997
Crozer Chester*	83	2.5%	0	\$86,601
Delaware County Memorial	12	68.4%	0	\$85,979
Doylestown*	85	1.3%	0	\$38,220
Eastern Regional	2	NR	NR	NR
Easton*	36	5.4%	0	\$80,589
Einstein Montgomery*	70	1.5%	•	\$47,429
Gnaden Huetten Memorial	21	46.2%	0	\$18,750
Grand View*	24	38.2%	0	\$38,945
Hahnemann University*	62	1.8%	0	\$127,709
Holy Redeemer*	47	25.5%	0	\$69,684
Hospital Fox Chase Cancer	0	NR	NR	NR
Hospital University PA*	44	9.8%	0	\$109,759
Jeanes*	46	12.0%	0	\$81,023
Jennersville Regional	7	84.0%	•	\$63,277
Lansdale	30	58.5%	•	\$30,358
Lehigh Valley Allentown*	209	1.0%	0	\$70,877
Lehigh Valley Muhlenberg*	63	4.8%	•	\$66,600
Lower Bucks*	35	8.3%	•	\$69,735
Main Line Bryn Mawr*	40	15.6%	•	\$62,212
Main Line Lankenau*	70	0.0%	0	\$54,515

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).

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

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

Heart Attack - Medical Management

Hospital	Total Number of Cases	Transfer to Acute Care	Mortality	Average Hospital Charge
Main Line Paoli*	32	6.1%	0	\$57,751
Mercy Fitzgerald*	58	9.5%	0	\$68,949
Mercy Philadelphia	23	52.2%	•	\$48,709
Mercy Suburban	8	63.2%	0	\$47,191
Methodist Division/TJUH	8	78.3%	0	\$41,050
Nazareth*	108	33.1%	0	\$51,607
Palmerton	14	40.9%	0	\$18,545
Penn Presbyterian*	106	2.1%	0	\$70,914
Pennsylvania*	23	16.7%	0	\$70,799
Phoenixville*	33	8.3%	0	\$97,450
Pottstown Memorial	19	67.8%	0	\$58,664
Reading*	147	0.0%	0	\$33,212
Riddle Memorial*	59	26.3%	0	\$44,676
Roxborough Memorial	11	68.6%	0	\$69,006
Sacred Heart Allentown	14	58.8%	0	\$46,013
Schuylkill East Norwegian	57	23.9%	0	\$14,225
Schuylkill South Jackson	17	39.1%	0	\$17,469
Springfield	5	16.7%	0	\$73,155
St Joseph Reading*	72	0.0%	0	\$39,993
St Luke's Anderson*	23	37.8%	0	\$52,786
St Luke's Bethlehem*	79	5.1%	0	\$61,037
St Luke's Miners	2	NR	NR	NR
St Luke's Quakertown	7	56.3%	0	\$36,583
St Mary MC*	144	2.8%	0	\$37,859
Taylor	38	27.5%	0	\$86,238
Temple University*	136	0.8%	0	\$87,078
Thomas Jefferson Univ*	76	0.0%	0	\$68,157

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).

- O 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.
- * 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	6,219	0.4%	13.4%	\$26,208
Southeastern Pennsylvania	2,832	0.4%	14.6%	\$35,392
Abington Memorial	96	⊙	0	\$31,908
Albert Einstein	138	•	0	\$35,600
Aria Health	156	⊙	0	\$23,958
Brandywine	36	•	0	\$42,204
Chester County	57	•	0	\$23,454
Chestnut Hill	66	•	0	\$54,485
Crozer Chester	18	•	0	\$55,627
Delaware County Memorial	31	•	0	\$46,292
Doylestown	70	•	0	\$22,277
Eastern Regional	4	NR	NR	NR
Easton	32	•	0	\$47,014
Einstein Montgomery	36	•	0	\$35,073
Gnaden Huetten Memorial	10	•	0	\$17,809
Grand View	51	•	0	\$23,196
Hahnemann University	141	0	•	\$61,171
Holy Redeemer	49	•	0	\$38,172
Hospital Fox Chase Cancer	3	NR	NR	NR
Hospital University PA	61	0	0	\$48,292
Jeanes	64	0	0	\$47,651
Jennersville Regional	21	0	0	\$49,110
Lansdale	23	0	0	\$23,675
Lehigh Valley Allentown	144	0	0	\$39,013
Lehigh Valley Muhlenberg	57	·	0	\$37,376
Lower Bucks	28	·	•	\$31,959
Main Line Bryn Mawr	63	·	0	\$32,820
Main Line Lankenau	65	0	•	\$32,385

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

- O 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.

Hypotension and Fainting

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Main Line Paoli	73	0	0	\$33,872
Mercy Fitzgerald	81	·	0	\$32,968
Mercy Philadelphia	71	•	0	\$27,756
Mercy Suburban	36	0	0	\$24,762
Methodist Division/TJUH	54	•	0	\$35,045
Nazareth	67	•	0	\$30,340
Palmerton	8	•	0	\$16,004
Penn Presbyterian	48	•	0	\$37,949
Pennsylvania	36	0	0	\$39,030
Phoenixville	19	·	0	\$56,202
Pottstown Memorial	23	•	0	\$44,843
Reading	77	0	0	\$22,051
Riddle Memorial	56	0	0	\$38,871
Roxborough Memorial	30	0	0	\$29,519
Sacred Heart Allentown	49	0	0	\$32,975
Schuylkill East Norwegian	12	0	0	\$14,603
Schuylkill South Jackson	12	0	0	\$13,812
Springfield	5	0	0	\$41,251
St Joseph Reading	32	0	0	\$27,090
St Luke's Anderson	21	0	0	\$30,204
St Luke's Bethlehem	121	0	0	\$34,361
St Luke's Miners	4	NR	NR	NR
St Luke's Quakertown	6	0	0	\$33,374
St Mary MC	84	0	0	\$25,235
Taylor	19	•	0	\$54,104
Temple University	98	0	0	\$47,248
Thomas Jefferson Univ	103	•	•	\$35,178

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

- O 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
Statewide	14,908	0.4%	15.9%	\$24,501
Southeastern Pennsylvania	5,977	0.3%	17.2%	\$34,576
Abington Memorial	304	•	0	\$30,551
Albert Einstein	182	0	0	\$31,517
Aria Health	244	0	0	\$21,436
Brandywine	93	0	0	\$38,366
Chester County	85	•	0	\$19,072
Chestnut Hill	110	•	0	\$49,979
Crozer Chester	56	•	0	\$55,064
Delaware County Memorial	101	•	•	\$57,373
Doylestown	259	•	0	\$21,893
Eastern Regional	17	•	NR	\$49,812
Easton	57	•	0	\$43,481
Einstein Montgomery	83	•	0	\$33,302
Gnaden Huetten Memorial	22	•	0	\$14,586
Grand View	68	•	0	\$26,897
Hahnemann University	152	•	0	\$63,495
Holy Redeemer	78	•	0	\$33,374
Hospital Fox Chase Cancer	34	•	•	\$31,154
Hospital University PA	124	•	•	\$46,825
Jeanes	102	•	0	\$48,488
Jennersville Regional	70	·	0	\$48,222
Lansdale	125	·	•	\$18,571
Lehigh Valley Allentown	321	•	0	\$39,998
Lehigh Valley Muhlenberg	200	·	0	\$40,356
Lower Bucks	27	·	•	\$32,704
Main Line Bryn Mawr	126	0	0	\$36,162
Main Line Lankenau	127	0	0	\$34,515

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

- 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
Main Line Paoli	148	0	0	\$39,100
Mercy Fitzgerald	146	•	0	\$37,953
Mercy Philadelphia	96	•	0	\$33,229
Mercy Suburban	82	•	0	\$30,804
Methodist Division/TJUH	109	•	0	\$37,007
Nazareth	108	•	0	\$26,181
Palmerton	28	•	0	\$16,781
Penn Presbyterian	129	·	0	\$32,518
Pennsylvania	77	0	0	\$43,190
Phoenixville	85	·	0	\$45,660
Pottstown Memorial	150	0	0	\$37,762
Reading	189	0	0	\$20,405
Riddle Memorial	105	0	0	\$41,585
Roxborough Memorial	41	0	0	\$32,092
Sacred Heart Allentown	25	0	0	\$29,919
Schuylkill East Norwegian	38	0	0	\$10,766
Schuylkill South Jackson	60	⊙	0	\$11,201
Springfield	15	0	0	\$49,188
St Joseph Reading	90	0	0	\$21,719
St Luke's Anderson	86	0	0	\$33,561
St Luke's Bethlehem	164	0	0	\$35,126
St Luke's Miners	37	0	0	\$22,709
St Luke's Quakertown	25	0	0	\$34,157
St Mary MC	271	⊙	0	\$23,768
Taylor	56	0	0	\$54,136
Temple University	126	⊙	0	\$50,715
Thomas Jefferson Univ	204	0	•	\$40,630

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

- 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 Failure - Acute

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	18,532	2.6%	20.1%	\$32,145
Southeastern Pennsylvania	7,388	2.1%	20.0%	\$44,348
Abington Memorial	331	⊙	0	\$40,915
Albert Einstein	314	•	0	\$44,732
Aria Health	371	⊙	0	\$28,833
Brandywine	65	•	0	\$49,911
Chester County	129	•	0	\$25,134
Chestnut Hill	138	•	0	\$55,519
Crozer Chester	106	•	0	\$72,990
Delaware County Memorial	80	•	0	\$64,070
Doylestown	149	•	0	\$33,058
Eastern Regional	25	•	0	\$63,634
Easton	112	•	•	\$56,398
Einstein Montgomery	128	•	0	\$39,942
Gnaden Huetten Memorial	41	•	0	\$19,583
Grand View	62	•	0	\$32,253
Hahnemann University	169	•	•	\$81,773
Holy Redeemer	126	•	0	\$47,507
Hospital Fox Chase Cancer	45	•	0	\$40,642
Hospital University PA	197	•	0	\$57,111
Jeanes	108	•	0	\$61,220
Jennersville Regional	23	•	0	\$64,112
Lansdale	138	·	•	\$24,695
Lehigh Valley Allentown	329	•	•	\$50,954
Lehigh Valley Muhlenberg	188	·	0	\$48,040
Lower Bucks	55	·	0	\$40,845
Main Line Bryn Mawr	115	·	0	\$46,250
Main Line Lankenau	180	0	•	\$44,917

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 lifethreatening. Acute kidney failure may be caused by trauma, surgery, dehydration, medication or other conditions.

Understanding the Symbols

- O 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 Failure - Acute

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Main Line Paoli	120	0	0	\$54,259
Mercy Fitzgerald	146	·	0	\$47,045
Mercy Philadelphia	121	0	•	\$39,954
Mercy Suburban	66	0	0	\$40,791
Methodist Division/TJUH	105	•	0	\$44,384
Nazareth	108	0	0	\$40,143
Palmerton	25	•	0	\$17,848
Penn Presbyterian	138	•	0	\$39,689
Pennsylvania	97	0	0	\$55,488
Phoenixville	80	•	0	\$59,796
Pottstown Memorial	140	•	0	\$42,999
Reading	269	·	0	\$27,219
Riddle Memorial	122	•	0	\$51,441
Roxborough Memorial	146	·	0	\$38,567
Sacred Heart Allentown	38	0	0	\$44,005
Schuylkill East Norwegian	87	•	0	\$16,126
Schuylkill South Jackson	78	0	0	\$15,080
Springfield	19	•	0	\$69,411
St Joseph Reading	123	•	0	\$29,346
St Luke's Anderson	173	0	0	\$43,732
St Luke's Bethlehem	502	0	0	\$47,828
St Luke's Miners	82	0	0	\$23,458
St Luke's Quakertown	74	•	•	\$40,079
St Mary MC	265	·	•	\$33,880
Taylor	71	•	•	\$67,987
Temple University	238	•	•	\$67,162
Thomas Jefferson Univ	166	•	•	\$55,397

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 lifethreatening. Acute kidney failure may be caused by trauma, surgery, dehydration, medication or other conditions.

Understanding the Symbols

- O 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
Statewide	5,436	5.6%	21.6%	\$44,143
Southeastern Pennsylvania	2,141	4.2%	22.8%	\$62,221
Abington Memorial	151	0	0	\$62,566
Albert Einstein	77	0	0	\$46,121
Aria Health	98	0	0	\$44,096
Brandywine	8	0	0	\$84,241
Chester County	37	•	0	\$39,974
Chestnut Hill	42	0	0	\$87,283
Crozer Chester	21	0	0	\$92,196
Delaware County Memorial	32	•	0	\$98,372
Doylestown	76	•	0	\$39,579
Eastern Regional	2	NR	NR	NR
Easton	17	•	0	\$66,811
Einstein Montgomery	41	0	0	\$56,965
Gnaden Huetten Memorial	8	0	0	\$22,555
Grand View	27	0	0	\$38,447
Hahnemann University	32	0	0	\$125,537
Holy Redeemer	63	•	0	\$61,087
Hospital Fox Chase Cancer	7	0	NR	\$54,932
Hospital University PA	33	0	0	\$65,843
Jeanes	81	0	0	\$87,479
Jennersville Regional	34	0	0	\$69,848
Lansdale	36	0	0	\$33,536
Lehigh Valley Allentown	85	0	0	\$63,556
Lehigh Valley Muhlenberg	43	0	0	\$74,556
Lower Bucks	17	0	0	\$50,127
Main Line Bryn Mawr	69	0	0	\$81,115
Main Line Lankenau	68	•	•	\$60,066

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

- O 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
Main Line Paoli	64	0	0	\$72,876
Mercy Fitzgerald	18	•	0	\$48,277
Mercy Philadelphia	9	0	0	\$49,262
Mercy Suburban	37	0	0	\$51,873
Methodist Division/TJUH	42	0	0	\$56,342
Nazareth	48	0	0	\$44,322
Palmerton	8	•	0	\$20,663
Penn Presbyterian	16	•	0	\$50,929
Pennsylvania	29	•	0	\$75,743
Phoenixville	43	•	0	\$97,863
Pottstown Memorial	29	•	0	\$79,175
Reading	58	•	0	\$34,810
Riddle Memorial	137	0	0	\$71,850
Roxborough Memorial	17	0	0	\$60,498
Sacred Heart Allentown	0	NR	NR	NR
Schuylkill East Norwegian	16	0	0	\$22,177
Schuylkill South Jackson	18	0	0	\$19,942
Springfield	10	0	0	\$63,893
St Joseph Reading	22	0	0	\$46,021
St Luke's Anderson	25	0	0	\$68,576
St Luke's Bethlehem	61	0	0	\$60,850
St Luke's Miners	6	0	NR	\$48,952
St Luke's Quakertown	9	0	0	\$55,540
St Mary MC	70	0	0	\$38,894
Taylor	29	0	0	\$111,964
Temple University	35	0	0	\$84,909
Thomas Jefferson Univ	50	0	0	\$54,373

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

- O 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	25,043	2.2%	16.0%	\$32,096
Southeastern Pennsylvania	8,665	2.0%	16.5%	\$46,806
Abington Memorial	460	•	0	\$45,709
Albert Einstein	154	•	0	\$39,378
Aria Health	428	0	0	\$33,525
Brandywine	127	0	0	\$47,967
Chester County	104	0	0	\$27,752
Chestnut Hill	125	•	0	\$75,425
Crozer Chester	105	•	0	\$81,049
Delaware County Memorial	123	•	0	\$67,484
Doylestown	356	•	0	\$34,563
Eastern Regional	13	•	NR	\$76,873
Easton	107	•	0	\$65,066
Einstein Montgomery	112	•	•	\$39,332
Gnaden Huetten Memorial	66	•	0	\$24,520
Grand View	175	•	0	\$28,499
Hahnemann University	155	•	0	\$83,265
Holy Redeemer	165	•	0	\$46,237
Hospital Fox Chase Cancer	37	•	0	\$44,143
Hospital University PA	195	•	•	\$58,865
Jeanes	167	•	0	\$65,680
Jennersville Regional	155	•	0	\$55,966
Lansdale	180	·	0	\$26,546
Lehigh Valley Allentown	485	•	0	\$55,050
Lehigh Valley Muhlenberg	221	0	0	\$57,863
Lower Bucks	40	0	0	\$33,338
Main Line Bryn Mawr	173	0	0	\$57,780
Main Line Lankenau	143	0	0	\$49,999

Pneumonia – Infectious

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

Understanding the Symbols

- O 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
Main Line Paoli	208	0	0	\$57,239
Mercy Fitzgerald	131	•	0	\$55,103
Mercy Philadelphia	90	•	0	\$46,567
Mercy Suburban	60	•	0	\$38,894
Methodist Division/TJUH	167	•	0	\$50,802
Nazareth	163	•	0	\$36,136
Palmerton	37	•	0	\$21,411
Penn Presbyterian	90	•	0	\$41,622
Pennsylvania	122	0	0	\$70,604
Phoenixville	139	•	0	\$72,316
Pottstown Memorial	229	0	0	\$61,952
Reading	457	0	0	\$25,510
Riddle Memorial	192	0	0	\$54,808
Roxborough Memorial	43	0	0	\$41,491
Sacred Heart Allentown	37	0	0	\$35,152
Schuylkill East Norwegian	109	0	0	\$16,829
Schuylkill South Jackson	145	0	0	\$14,603
Springfield	26	0	0	\$68,753
St Joseph Reading	153	0	0	\$29,129
St Luke's Anderson	205	0	0	\$45,406
St Luke's Bethlehem	238	0	0	\$49,867
St Luke's Miners	68	0	0	\$30,712
St Luke's Quakertown	36	0	0	\$49,856
St Mary MC	428	0	0	\$32,051
Taylor	73	0	0	\$79,313
Temple University	133	0	•	\$73,489
Thomas Jefferson Univ	229	0	0	\$49,814

Pneumonia – Infectious

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

Understanding the Symbols

- O 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.

Septicemia

Hospital	Total Number of Cases	Mortality	Average Hospital Charge
Statewide	46,139	10.2%	\$53,558
Southeastern Pennsylvania	18,410	9.2%	\$74,243
Abington Memorial	608	0	\$79,256
Albert Einstein	447	•	\$72,891
Aria Health	1,229	0	\$48,278
Brandywine	218	0	\$82,453
Chester County	855	0	\$45,327
Chestnut Hill	431	•	\$101,988
Crozer Chester	474	0	\$128,338
Delaware County Memorial	269	0	\$111,560
Doylestown	295	0	\$43,783
Eastern Regional	24	0	\$127,414
Easton	614	0	\$78,835
Einstein Montgomery	143	0	\$65,204
Gnaden Huetten Memorial	81	0	\$28,342
Grand View	216	0	\$56,767
Hahnemann University	106	•	\$166,286
Holy Redeemer	179	0	\$79,014
Hospital Fox Chase Cancer	30	0	\$94,927
Hospital University PA	985	0	\$109,834
Jeanes	117	0	\$106,693
Jennersville Regional	9	0	\$45,016
Lansdale	235	0	\$42,794
Lehigh Valley Allentown	381	0	\$85,464
Lehigh Valley Muhlenberg	168	•	\$73,641
Lower Bucks	257	•	\$64,561
Main Line Bryn Mawr	344	0	\$87,486
Main Line Lankenau	576	0	\$85,414

Septicemia

An infection in the bloodstream sometimes referred to as blood poisoning. Also includes patients in which septicemia progresses to a severe lifethreatening infection know 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

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).

- O 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 Septicemia to avoid counting readmissions that may have been planned.

Septicemia

Hospital	Total Number of Cases	Mortality	Average Hospital Charge
Main Line Paoli	174	0	\$91,127
Mercy Fitzgerald	213	0	\$81,752
Mercy Philadelphia	182	•	\$87,690
Mercy Suburban	91	0	\$50,198
Methodist Division/TJUH	156	•	\$75,818
Nazareth	241	•	\$55,270
Palmerton	52	0	\$26,497
Penn Presbyterian	374	0	\$74,939
Pennsylvania	272	0	\$95,851
Phoenixville	344	0	\$101,566
Pottstown Memorial	322	0	\$85,728
Reading	1,613	0	\$36,919
Riddle Memorial	254	0	\$85,370
Roxborough Memorial	267	0	\$76,067
Sacred Heart Allentown	142	0	\$52,064
Schuylkill East Norwegian	158	•	\$20,567
Schuylkill South Jackson	109	•	\$22,407
Springfield	78	•	\$99,175
St Joseph Reading	369	0	\$45,691
St Luke's Anderson	292	0	\$72,896
St Luke's Bethlehem	775	0	\$73,584
St Luke's Miners	141	0	\$44,974
St Luke's Quakertown	177	0	\$65,058
St Mary MC	742	0	\$47,398
Taylor	254	0	\$128,324
Temple University	705	•	\$114,158
Thomas Jefferson Univ	589	0	\$87,012

Septicemia

An infection in the bloodstream sometimes referred to as blood poisoning. Also includes patients in which septicemia progresses to a severe lifethreatening infection know 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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Stroke

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	16,443	3.6%	12.9%	\$44,679
Southeastern Pennsylvania	6,630	3.0%	14.1%	\$60,603
Abington Memorial	354	•	•	\$56,417
Albert Einstein	258	•	•	\$58,868
Aria Health	298	0	0	\$42,760
Brandywine	68	0	0	\$75,625
Chester County	122	0	0	\$31,005
Chestnut Hill	124	0	0	\$88,491
Crozer Chester	169	0	0	\$83,608
Delaware County Memorial	91	•	0	\$74,672
Doylestown	188	•	0	\$36,416
Eastern Regional	1	NR	NR	NR
Easton	54	•	0	\$69,574
Einstein Montgomery	96	•	0	\$56,524
Gnaden Huetten Memorial	30	0	0	\$23,194
Grand View	72	•	0	\$40,181
Hahnemann University	102	0	0	\$141,006
Holy Redeemer	71	•	0	\$50,792
Hospital Fox Chase Cancer	2	NR	NR	NR
Hospital University PA	254	•	0	\$91,476
Jeanes	102	•	0	\$81,955
Jennersville Regional	30	•	0	\$84,451
Lansdale	92	·	0	\$41,315
Lehigh Valley Allentown	411	•	0	\$67,026
Lehigh Valley Muhlenberg	130	·	0	\$60,387
Lower Bucks	53	·	0	\$55,841
Main Line Bryn Mawr	170	0	•	\$57,161
Main Line Lankenau	166	0	0	\$57,052

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.

Understanding the Symbols

- 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.

Stroke

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Main Line Paoli	187	0	0	\$59,190
Mercy Fitzgerald	120	·	•	\$57,502
Mercy Philadelphia	82	0	0	\$53,708
Mercy Suburban	35	0	0	\$46,174
Methodist Division/TJUH	47	0	0	\$50,776
Nazareth	156	0	0	\$43,616
Palmerton	17	0	0	\$21,749
Penn Presbyterian	147	0	0	\$68,445
Pennsylvania	73	0	0	\$74,796
Phoenixville	38	•	0	\$70,618
Pottstown Memorial	90	0	0	\$60,249
Reading	308	0	0	\$34,393
Riddle Memorial	167	0	0	\$63,678
Roxborough Memorial	28	0	0	\$53,693
Sacred Heart Allentown	26	0	0	\$70,556
Schuylkill East Norwegian	35	0	0	\$16,041
Schuylkill South Jackson	31	0	0	\$18,431
Springfield	8	0	0	\$68,000
St Joseph Reading	94	0	0	\$40,355
St Luke's Anderson	83	0	0	\$63,156
St Luke's Bethlehem	243	0	0	\$63,627
St Luke's Miners	12	0	0	\$33,439
St Luke's Quakertown	18	0	0	\$50,271
St Mary MC	261	⊙	0	\$42,635
Taylor	73	⊙	0	\$95,604
Temple University	206	•	•	\$101,309
Thomas Jefferson Univ	533	•	•	\$63,510

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.

Understanding the Symbols

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

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 2014, 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 2014, the most recent information available to PHC4.

Displayed separately are the average amounts paid by Medicare fee-forservice, 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 – 2014 Statewide Data

For the 17 medical conditions/surgical procedures included in this Hospital Performance Report

		Medicare Fee-for-Service		Med Fee-for-		Medicaid Managed Care	
MS- DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Cases	Average Payment	Cases	Average Payment	Cases	Average Payment
Abnor	mal Heartbeat	13,918	\$7,348	408	\$9,304	1,013	\$9,564
242	Permanent Cardiac Pacemaker Implant w/ MCC	568	\$21,736	11	\$51,155	13	\$27,950
243	Permanent Cardiac Pacemaker Implant w/ CC	1,054	\$15,668	15	\$18,121	33	\$20,805
244	Permanent Cardiac Pacemaker Implant w/o CC/MCC	855	\$12,551	20	\$13,159	25	\$15,977
246	Percutaneous Cardiovascular Procedure with Drug- Eluting Stent w/ MCC or 4+ Vessels/Stents	21	\$20,093	2	NR	1	NR
247	Percutaneous Cardiovascular Procedure with Drug- Eluting Stent w/o MCC	20	\$13,301	3	NR	2	NR
248	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	13	\$18,369	0	NR	1	NR
249	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/o MCC	8	NR	0	NR	0	NR
250	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/ MCC	141	\$21,123	7	NR	21	\$24,825
251	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/o MCC	461	\$13,902	33	\$11,194	72	\$14,179
258	Cardiac Pacemaker Device Replacement w/ MCC	2	NR	0	NR	0	NR
259	Cardiac Pacemaker Device Replacement w/o MCC	14	\$11,881	0	NR	0	NR
260	Cardiac Pacemaker Revision Except Device Replacement w/ MCC	3	NR	1	NR	0	NR
261	Cardiac Pacemaker Revision Except Device Replacement w/ CC	11	\$10,620	0	NR	0	NR
262	Cardiac Pacemaker Revision Except Device Replacement w/o CC/MCC	7	NR	0	NR	2	NR
286	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC	155	\$14,002	22	\$16,655	11	\$14,022
287	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC	288	\$6,357	20	\$7,965	43	\$9,183
308	Cardiac Arrhythmia and Conduction Disorders w/ MCC	2,795	\$7,163	65	\$8,852	140	\$9,641
309	Cardiac Arrhythmia and Conduction Disorders w/ CC	3,909	\$4,493	98	\$6,012	341	\$8,149
310	Cardiac Arrhythmia and Conduction Disorders w/o CC/MCC	3,593	\$2,849	111	\$3,859	308	\$6,207
Chest	Pain	2,181	\$3,718	94	\$3,558	658	\$5,355
313	Chest Pain	2,181	\$3,718	94	\$3,558	658	\$5,355

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.

Medicare and Medicaid Payments - 2014 Statewide Data

For the 17 medical conditions/surgical procedures included in this Hospital Performance Report

		Med Fee-for-	icare -Service	Med Fee-for-		Medicaid Managed Care		
MS- DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Cases	Average Payment	Cases	Average Payment	Cases	Average Payment	
Chronic Obstructive Pulmonary Disease (COPD)		10,006	\$5,575	372	\$6,173	2,015	\$8,771	
190	Chronic Obstructive Pulmonary Disease w/ MCC	3,952	\$6,660	134	\$8,290	589	\$10,121	
191	Chronic Obstructive Pulmonary Disease w/ CC	3,740	\$5,398	122	\$5,570	804	\$8,606	
192	Chronic Obstructive Pulmonary Disease w/o CC/MCC	2,314	\$4,010	116	\$4,362	622	\$7,708	
Colored	ctal Procedures	3,073	\$18,007	229	\$20,201	592	\$23,473	
329	Major Small and Large Bowel Procedures w/ MCC	816	\$30,067	89	\$28,810	117	\$30,099	
330	Major Small and Large Bowel Procedures w/ CC	1,324	\$15,254	107	\$15,934	262	\$24,861	
331	Major Small and Large Bowel Procedures w/o CC/MCC	646	\$9,692	24	\$8,280	167	\$16,961	
332	Rectal Resection w/ MCC	42	\$27,906	1	NR	6	NR	
333	Rectal Resection w/ CC	149	\$15,014	6	NR	32	\$21,291	
334	Rectal Resection w/o CC/MCC	96	\$9,728	2	NR	8	NR	
Conges	tive Heart Failure (CHF)	18,800	\$6,714	607	\$10,550	1,541	\$12,149	
286	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC	322	\$15,129	38	\$21,448	63	\$18,099	
287	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC	718	\$7,165	100	\$10,222	152	\$11,840	
291	Heart Failure and Shock w/ MCC	6,255	\$8,793	165	\$12,606	404	\$14,164	
292	Heart Failure and Shock w/ CC	8,556	\$5,836	261	\$8,694	768	\$11,072	
293	Heart Failure and Shock w/o CC/MCC	2,949	\$3,826	43	\$5,061	154	\$10,110	
Diabete	es - Medical Management	3,856	\$5,753	786	\$6,461	2,497	\$7,601	
073	Cranial and Peripheral Nerve Disorders w/ MCC	149	\$8,001	8	NR	36	\$11,312	
074	Cranial and Peripheral Nerve Disorders w/o MCC	422	\$5,530	59	\$6,148	314	\$8,127	
299	Peripheral Vascular Disorders w/ MCC	36	\$9,338	2	NR	2	NR	
300	Peripheral Vascular Disorders w/ CC	91	\$5,797	5	NR	8	NR	
301	Peripheral Vascular Disorders w/o CC/MCC	1	NR	0	NR	4	NR	
637	Diabetes w/ MCC	724	\$8,428	108	\$11,926	255	\$10,328	
638	Diabetes w/ CC	1,801	\$4,988	393	\$5,800	1,176	\$7,398	
639	Diabetes w/o CC/MCC	509	\$3,483	189	\$4,242	641	\$6,224	
698	Other Kidney and Urinary Tract Diagnoses w/ MCC	28	\$10,998	6	NR	7	NR	
699	Other Kidney and Urinary Tract Diagnoses w/ CC	87	\$6,717	12	\$6,485	45	\$9,162	
700	Other Kidney and Urinary Tract Diagnoses w/o CC/MCC	8	NR	4	NR	9	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.

Medicare and Medicaid Payments - 2014 Statewide Data

For the 17 medical conditions/surgical procedures included in this Hospital Performance Report

		Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
MS- DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Cases	Average Payment	Cases	Average Payment	Cases	Average Payment
Gallbladder Removal - Laparoscopic		1,904	\$9,968	457	\$6,687	956	\$11,469
411	Cholecystectomy with Common Duct Exploration (C.D.E.) w/ MCC	2	NR	0	NR	1	NR
412	Cholecystectomy with C.D.E. w/ CC	4	NR	1	NR	3	NR
413	Cholecystectomy with C.D.E. w/o CC/MCC	1	NR	1	NR	0	NR
417	Laparoscopic Cholecystectomy without C.D.E. w/ MCC	455	\$14,921	44	\$11,928	116	\$16,444
418	Laparoscopic Cholecystectomy without C.D.E. w/ CC	814	\$9,554	155	\$7,149	329	\$12,354
419	Laparoscopic Cholecystectomy without C.D.E. w/o CC/MCC	628	\$6,867	256	\$5,511	507	\$9,739
Gallbla	adder Removal - Open	336	\$14,900	48	\$11,745	98	\$15,239
411	Cholecystectomy with C.D.E. w/ MCC	5	NR	0	NR	0	NR
412	Cholecystectomy with C.D.E. w/ CC	10	NR	1	NR	2	NR
413	Cholecystectomy with C.D.E. w/o CC/MCC	8	NR	0	NR	2	NR
414	Cholecystectomy Except by Laparoscope without C.D.E. w/ MCC	105	\$22,621	11	\$19,149	16	\$23,592
415	Cholecystectomy Except by Laparoscope without C.D.E. w/ CC	135	\$12,519	18	\$10,931	38	\$15,448
416	Cholecystectomy Except by Laparoscope without C.D.E. w/o CC/MCC	73	\$8,172	18	\$8,060	40	\$11,749
Heart A	Attack - Angioplasty/Stent	2,996	\$14,126	531	\$14,259	472	\$22,445
246	Percutaneous Cardiovascular Procedure with Drug- Eluting Stent w/ MCC or 4+ Vessels/Stents	558	\$20,229	64	\$17,906	62	\$29,147
247	Percutaneous Cardiovascular Procedure with Drug- Eluting Stent w/o MCC	1,607	\$12,283	300	\$12,934	264	\$21,857
248	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	211	\$18,495	23	\$23,379	29	\$22,430
249	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/o MCC	449	\$11,069	126	\$14,020	83	\$20,158
250	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/ MCC	62	\$18,231	3	NR	6	NR
251	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/o MCC	109	\$11,848	15	\$13,328	28	\$19,273

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.

Medicare and Medicaid Payments – 2014 Statewide Data

For the 17 medical conditions/surgical procedures included in this Hospital Performance Report

		Med Fee-for-		Med Fee-for-		Medicaid Managed Care	
MS- DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Cases	Average Payment	Cases	Average Payment	Cases	Average Payment
Heart A	Attack - Medical Management	4,443	\$7,753	159	\$9,299	298	\$15,404
280	Acute Myocardial Infarction, Discharged Alive w/	1,990	\$10,017	54	\$13,112	98	\$17,556
281	Acute Myocardial Infarction, Discharged Alive w/ CC	1,374	\$6,042	48	\$7,944	103	\$14,680
282	Acute Myocardial Infarction, Discharged Alive w/o CC/MCC	685	\$4,179	52	\$5,789	84	\$13,612
283	Acute Myocardial Infarction, Expired w/ MCC	284	\$10,318	3	NR	9	NR
284	Acute Myocardial Infarction, Expired w/ CC	77	\$4,268	2	NR	2	NR
285	Acute Myocardial Infarction, Expired w/o CC/MCC	33	\$2,750	0	NR	2	NR
Hypote	ension and Fainting	3,676	\$4,229	112	\$4,576	358	\$6,139
312	Syncope and Collapse	3,676	\$4,229	112	\$4,576	358	\$6,139
Kidney	and Urinary Tract Infections	8,800	\$5,042	315	\$6,145	1,090	\$7,587
689	Kidney and Urinary Tract Infections w/ MCC	2,694	\$6,406	70	\$10,672	171	\$9,194
690	Kidney and Urinary Tract Infections w/o MCC	6,106	\$4,440	245	\$4,852	919	\$7,288
Kidney	Failure - Acute	9,124	\$6,537	396	\$10,092	1,208	\$10,414
682	Renal Failure w/ MCC	2,848	\$9,200	114	\$14,765	273	\$13,009
683	Renal Failure w/ CC	5,363	\$5,628	254	\$8,305	755	\$9,861
684	Renal Failure w/o CC/MCC	913	\$3,565	28	\$7,276	180	\$8,800
Pneum	nonia - Aspiration	3,440	\$9,545	119	\$12,829	237	\$13,387
177	Respiratory Infections and Inflammations w/ MCC	1,794	\$11,261	56	\$13,776	98	\$14,309
178	Respiratory Infections and Inflammations w/ CC	1,358	\$8,140	58	\$12,195	104	\$13,377
179	Respiratory Infections and Inflammations w/o CC/MCC	288	\$5,482	5	NR	35	\$10,833
Pneum	nonia - Infectious	12,775	\$6,370	542	\$6,715	1,833	\$10,026
177	Respiratory Infections and Inflammations w/ MCC	432	\$11,538	12	\$11,694	32	\$14,817
178	Respiratory Infections and Inflammations w/ CC	314	\$7,775	13	\$8,821	35	\$15,997
179	Respiratory Infections and Inflammations w/o CC/MCC	39	\$5,897	3	NR	4	NR
193	Simple Pneumonia and Pleurisy w/ MCC	4,318	\$8,214	178	\$8,461	486	\$11,968
194	Simple Pneumonia and Pleurisy w/ CC	5,565	\$5,465	219	\$6,382	902	\$9,429
195	Simple Pneumonia and Pleurisy w/o CC/MCC	2,107	\$3,720	117	\$3,955	374	\$7,897

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.

Medicare and Medicaid Payments - 2014 Statewide Data

For the 17 medical conditions/surgical procedures included in this Hospital Performance Report

		Med Fee-for	icare -Service	Medicaid Fee-for-Service		Medicaid Managed Care	
MS- DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Cases	Average Payment	Cases	Average Payment	Cases	Average Payment
Septic	emia	21,303	\$10,913	1,612	\$15,560	3,030	\$15,475
870	Septicemia or Severe Sepsis with Mechanical Ventilation 96+ Hours	856	\$37,892	136	\$30,543	204	\$34,394
871	Septicemia or Severe Sepsis without Mechanical Ventilation 96+ Hours w/ MCC	14,980	\$11,101	938	\$17,376	1,726	\$16,053
872	Septicemia or Severe Sepsis without Mechanical Ventilation 96+ Hours w/o MCC	5,467	\$6,174	538	\$8,607	1,100	\$11,059
Stroke		7,917	\$6,981	616	\$9,783	802	\$13,437
061	Acute Ischemic Stroke with Use of Thrombolytic Agent w/ MCC	133	\$17,178	9	NR	8	NR
062	Acute Ischemic Stroke with Use of Thrombolytic Agent w/ CC	245	\$11,208	27	\$8,941	35	\$19,148
063	Acute Ischemic Stroke with Use of Thrombolytic Agent w/o CC/MCC	89	\$8,432	5	NR	11	\$16,776
064	Intracranial Hemorrhage or Cerebral Infarction w/ MCC	1,837	\$10,481	116	\$18,470	150	\$16,832
065	Intracranial Hemorrhage or Cerebral Infarction w/ CC or tPA in 24 Hours	3,618	\$6,114	293	\$8,519	403	\$12,845
066	Intracranial Hemorrhage or Cerebral Infarction w/o CC/MCC	1,995	\$4,066	166	\$5,801	195	\$10,572



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For More Information

The information contained in this report and other PHC4 publications is available online at www.phc4.org. Additional financial, hospitalization and ambulatory procedure health care data is available for purchase. For more information, contact PHC4's Special Requests at specialrequests@phc4.org or 717-232-6787.