# PA Health Care Cost Containment Council

## **Western 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

#### **Table of Contents**

About the Report	1
Key Findings	7
Hospital Results	
•	
Medicare and Medicaid Payments	. 49

#### **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.

Joe Martin, Executive Director
225 Market Street, Suite 400, Harrisburg, PA 17101
717-232-6787 • www.phc4.org



#### 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 <a href="https://www.phc4.org">www.phc4.org</a>). 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.

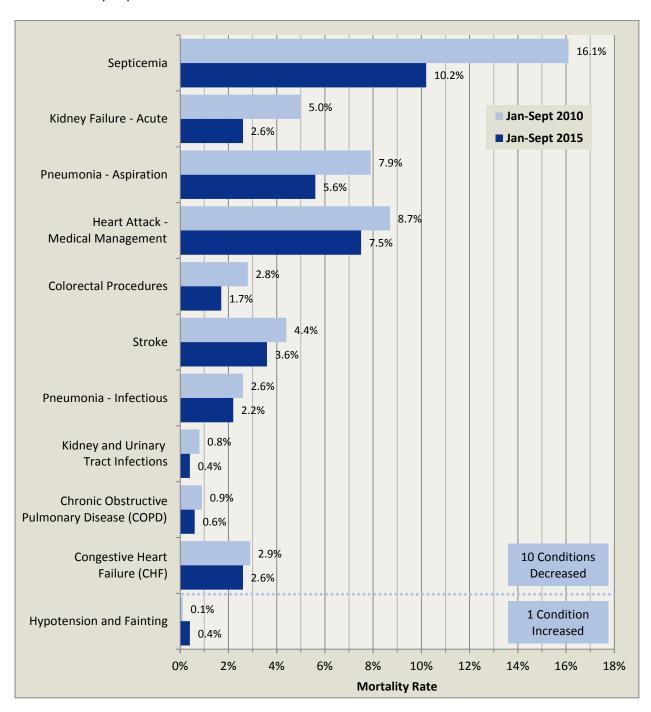
- Patients/Consumers can use this report as an aid in making decisions about where to seek
  treatment for the conditions detailed in this report. This report should be used in
  conjunction with a physician or other health care provider when making health care
  decisions.
- **Group Benefits Purchasers/Insurers**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

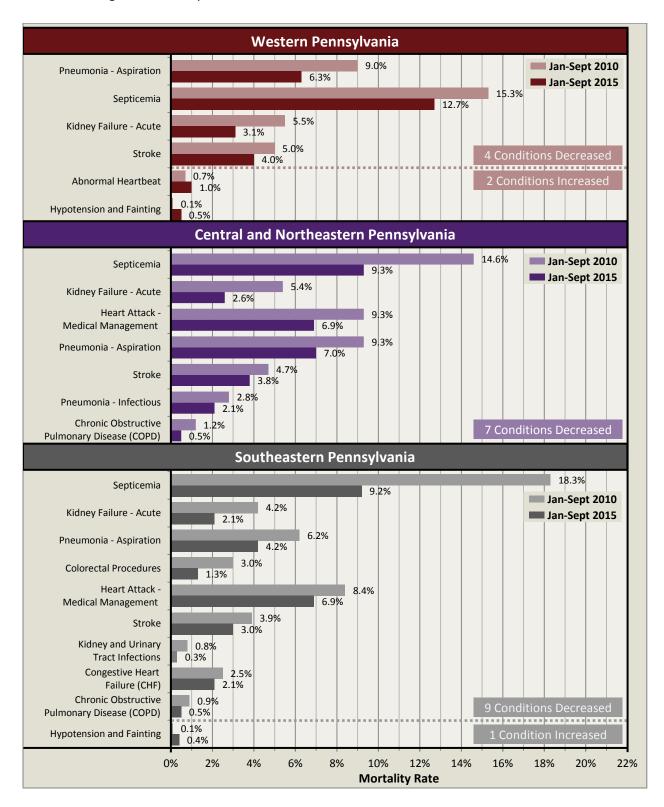
**Statewide** in-hospital mortality rates showed a statistically significant <u>increase</u> in only one condition, Hypotension and Fainting, where the mortality rate increased from 0.1% in January-September 2010 to 0.4% in January-September 2015.



PHC4 • Hospital Performance Report • Jan through Sept 2015 Data • Key Findings • 7

## **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.



PHC4 • Hospital Performance Report • Jan through Sept 2015 Data • Key Findings • 8

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

#### 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).

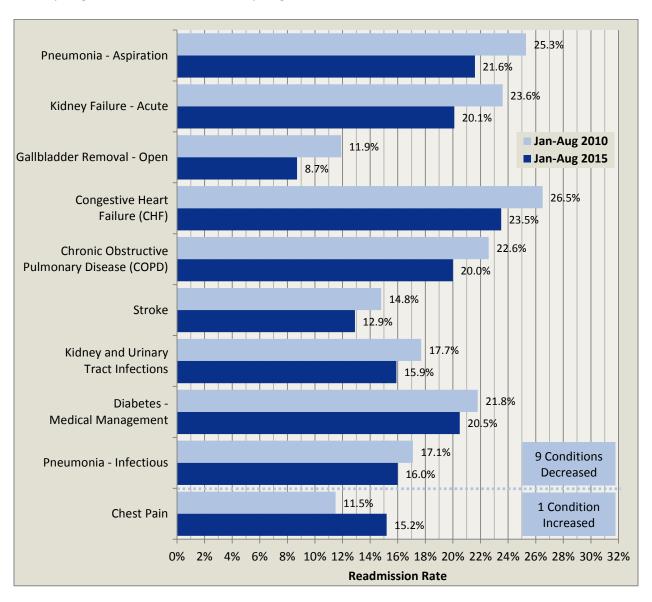
#### Southeastern Pennsylvania:

 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.\*

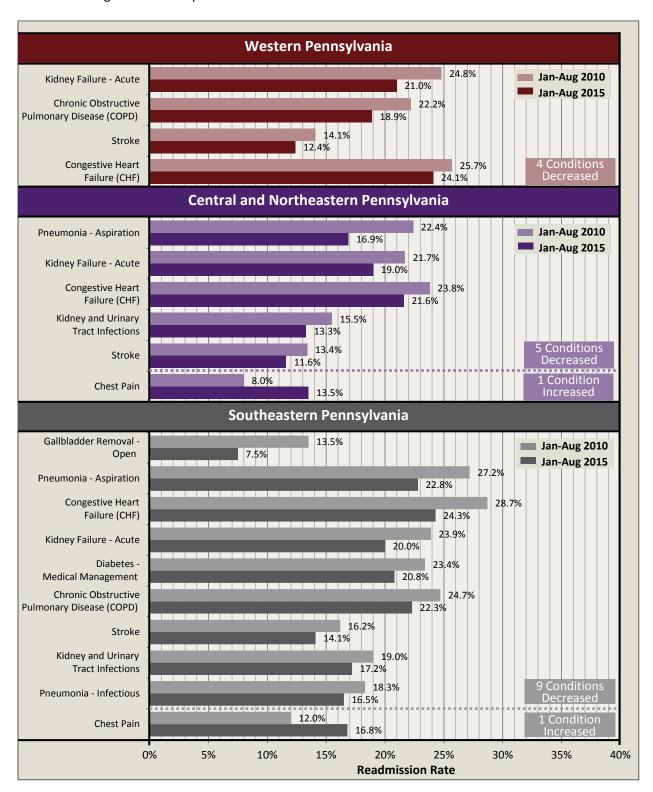
**Statewide** 30-day readmission rates showed a statistically significant <u>increase</u> in only one of the 13 conditions reported in 2010 and 2015. The condition, Chest Pain, had its rate increase from 11.5% in January-August 2010 to 15.2% in January-August 2015.



<sup>\*</sup> 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	<ul> <li>Abnormal Heartbeat</li> <li>Congestive Heart         <ul> <li>Failure (CHF)</li> <li>Kidney Failure – Acute</li> </ul> </li> </ul>	• None	<ul> <li>Chest Pain</li> <li>Chronic Obstructive Pulmonary Disease (COPD)</li> <li>Kidney and Urinary Tract Infections</li> <li>Stroke</li> </ul>
Conditions with Readmission Rates Statistically <u>Lower</u> than Expected	• None	<ul> <li>Abnormal Heartbeat</li> <li>Chronic Obstructive Pulmonary Disease (COPD)</li> <li>Congestive Heart Failure (CHF)</li> <li>Kidney and Urinary Tract Infections</li> <li>Pneumonia – Aspiration</li> <li>Stroke</li> </ul>	• 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:

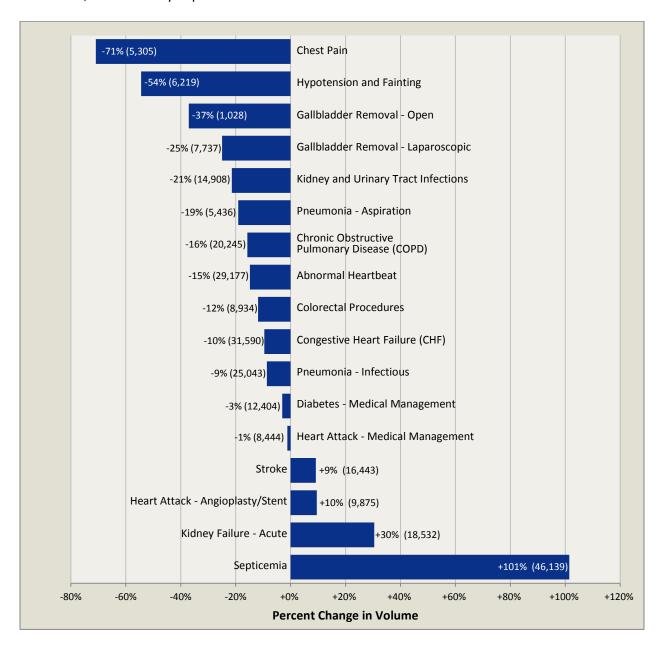
After accounting for patient risk, hospitals in Southeastern Pennsylvania as a whole had 30-day readmission rates that were significantly <u>higher</u> than expected for four conditions, the greatest difference occurring in Chronic Obstructive Pulmonary Disease (COPD) (22.3% actual, 20.9% expected).

## **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
Western Pennsylvania	9,828	1.0%	15.4%	\$28,216
ACMH	100	·	0	\$22,249
Allegheny General	475	·	0	\$28,840
Allegheny Valley	162	·	0	\$20,051
Bradford Regional	26	·	0	\$13,781
Butler Memorial	325	·	0	\$30,655
Canonsburg	54	·	0	\$24,735
Charles Cole Memorial	21	·	0	\$13,210
Clarion	41	0	0	\$15,986
Conemaugh Memorial	431	·	0	\$19,976
Conemaugh Meyersdale	4	NR	NR	NR
Conemaugh Miners	6	·	0	\$14,966
Corry Memorial	7	·	0	\$16,557
Ellwood City	40	0	0	\$12,343
Excela Hith Westmoreland	496	·	•	\$25,663
Forbes	349	0	0	\$21,190
Frick	79	·	0	\$19,798
Grove City	54	·	0	\$22,018
Heritage Valley Beaver	357	•	0	\$16,120
Heritage Valley Sewickley	116	•	0	\$15,109
Highlands	18	0	0	\$15,853
Indiana Regional	181	0	0	\$22,460
Jameson Memorial	139	•	0	\$13,958
Jefferson	373	0	0	\$21,323
Kane Community	10	0	0	\$17,446
Latrobe Area	152	0	0	\$20,228
Magee Womens UPMC	33	0	0	\$35,027
Meadville	90	0	0	\$20,424
Millcreek Community	25	0	0	\$16,434
Monongahela Valley	140	0	•	\$22,555

## 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
Nason	17	0	0	\$13,285
Ohio Valley General	90	0	0	\$30,405
Penn Highlands Brookville	15	·	0	\$10,799
Penn Highlands Clearfield	33	·	0	\$12,916
Penn Highlands DuBois	150	·	0	\$15,785
Penn Highlands Elk	42	0	0	\$14,922
Punxsutawney Area	24	0	0	\$15,768
Saint Vincent	315	·	0	\$34,500
Sharon Regional	230	·	0	\$25,122
Somerset	58	·	0	\$22,122
St Clair Memorial	368	<b>⊙</b>	0	\$22,696
Titusville Area	10	<b>⊙</b>	0	\$12,366
Tyrone	7	·	0	\$20,778
Uniontown	169	•	•	\$12,576
UPMC Altoona	385	•	0	\$23,512
UPMC Bedford	33	·	0	\$18,601
UPMC East	233	·	0	\$33,986
UPMC Hamot	547	·	0	\$38,362
UPMC Horizon	134	·	0	\$24,736
UPMC McKeesport	143	·	•	\$35,054
UPMC Mercy	289	·	0	\$36,190
UPMC Northwest	126	·	0	\$18,309
UPMC Passavant	534	•	0	\$36,462
UPMC Presby Shadyside	783	•	0	\$53,607
UPMC St Margaret	237	•	0	\$36,403
Warren General	38	<b>⊙</b>	0	\$20,179
Washington	350	0	0	\$18,320
Washington HS Greene	26	0	0	\$16,469
West Penn	97	<b>⊙</b>	0	\$24,561
Windber	31	•	•	\$14,740

## 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
Western Pennsylvania	1,339	13.8%	\$15,364
АСМН	2	NR	NR
Allegheny General	37	0	\$17,117
Allegheny Valley	10	0	\$15,561
Bradford Regional	2	NR	NR
Butler Memorial	15	0	\$21,275
Canonsburg	3	NR	NR
Charles Cole Memorial	7	0	\$9,693
Clarion	1	NR	NR
Conemaugh Memorial	71	0	\$10,436
Conemaugh Meyersdale	0	NR	NR
Conemaugh Miners	1	NR	NR
Corry Memorial	1	NR	NR
Ellwood City	7	0	\$8,619
Excela Hlth Westmoreland	107	0	\$12,401
Forbes	42	0	\$13,436
Frick	18	0	\$12,739
Grove City	3	NR	NR
Heritage Valley Beaver	34	0	\$9,915
Heritage Valley Sewickley	19	0	\$10,991
Highlands	2	NR	NR
Indiana Regional	33	0	\$13,757
Jameson Memorial	42	0	\$10,634
Jefferson	35	0	\$13,068
Kane Community	1	NR	NR
Latrobe Area	22	0	\$11,670
Magee Womens UPMC	20	0	\$22,308
Meadville	7	0	\$15,514
Millcreek Community	7	NR	\$10,543
Monongahela Valley	20	0	\$11,216

#### **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
Nason	6	0	\$5,387
Ohio Valley General	37	·	\$11,998
Penn Highlands Brookville	0	NR	NR
Penn Highlands Clearfield	0	NR	NR
Penn Highlands DuBois	28	·	\$9,469
Penn Highlands Elk	6	·	\$7,927
Punxsutawney Area	9	·	\$10,648
Saint Vincent	37	·	\$23,861
Sharon Regional	82	·	\$13,756
Somerset	9	0	\$8,639
St Clair Memorial	14	·	\$12,702
Titusville Area	6	0	\$4,434
Tyrone	1	NR	NR
Uniontown	40	0	\$7,429
UPMC Altoona	41	0	\$12,276
UPMC Bedford	7	0	\$13,060
UPMC East	39	0	\$16,524
UPMC Hamot	45	·	\$23,177
UPMC Horizon	12	·	\$9,811
UPMC McKeesport	17	·	\$21,532
UPMC Mercy	85	0	\$18,651
UPMC Northwest	16	0	\$8,874
UPMC Passavant	39	·	\$21,925
UPMC Presby Shadyside	123	·	\$27,220
UPMC St Margaret	22	0	\$22,670
Warren General	4	NR	NR
Washington	38	0	\$13,519
Washington HS Greene	0	NR	NR
West Penn	6	0	\$25,975
Windber	0	NR	NR

#### **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	COPD
Statewide	20,245	0.6%	20.0%	\$28,230	Chronic damage,
Western Pennsylvania	7,764	0.7%	18.9%	\$18,787	inflammation and narrowing of the airways in the lungs.
ACMH	78	·	0	\$16,809	Common COPD diseases
Allegheny General	135	·	0	\$23,168	include emphysema and chronic obstructive
Allegheny Valley	125	·	0	\$16,512	bronchitis.
Bradford Regional	83	·	0	\$11,823	Understanding the Symbols
Butler Memorial	209	·	0	\$19,020	The symbols displayed in this report represent a
Canonsburg	97	·	0	\$17,197	comparison of a hospital's
Charles Cole Memorial	63	·	0	\$9,507	actual rate of mortality or readmission to its expected
Clarion	68	·	0	\$13,199	rate, which takes into account varying illness levels among
Conemaugh Memorial	268	·	0	\$13,667	patients (see Accounting for High Risk Patients in About
Conemaugh Meyersdale	19	·	0	\$11,293	the Report).
Conemaugh Miners	27	·	0	\$13,077	O Rate was significantly
Corry Memorial	30	·	0	\$14,306	lower than expected.  • Rate was not
Ellwood City	37	·	0	\$11,176	significantly different
Excela Hlth Westmoreland	374	·	0	\$19,021	than expected.  Rate was significantly
Forbes	185	·	0	\$18,861	higher than expected.
Frick	105	0	0	\$16,062	NR Not reported. Too few cases after exclusions.
Grove City	84	·	0	\$21,941	cases after exclusions.
Heritage Valley Beaver	174	·	0	\$10,729	
Heritage Valley Sewickley	55	·	0	\$12,108	
Highlands	63	·	0	\$13,637	
Indiana Regional	150	·	0	\$15,327	
Jameson Memorial	234	·	0	\$13,805	
Jefferson	356	•	0	\$17,575	
Kane Community	41	·	0	\$13,642	
Latrobe Area	206	·	0	\$16,379	
Magee Womens UPMC	43	·	0	\$31,894	
Meadville	115	•	0	\$15,282	
Millcreek Community	47	·	0	\$12,993	
Monongahela Valley	227	0	0	\$17,616	

## **Chronic Obstructive Pulmonary Disease (COPD)**

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Nason	27	0	0	\$9,207
Ohio Valley General	99	0	0	\$17,958
Penn Highlands Brookville	39	·	0	\$12,769
Penn Highlands Clearfield	93	·	0	\$9,548
Penn Highlands DuBois	124	0	0	\$11,814
Penn Highlands Elk	94	0	0	\$12,313
Punxsutawney Area	17	0	0	\$10,338
Saint Vincent	194	0	0	\$23,494
Sharon Regional	132	0	0	\$17,159
Somerset	51	0	0	\$16,609
St Clair Memorial	260	0	0	\$15,965
Titusville Area	38	•	0	\$6,771
Tyrone	9	0	0	\$10,024
Uniontown	226	0	0	\$13,854
UPMC Altoona	259	·	0	\$17,308
UPMC Bedford	41	·	0	\$10,674
UPMC East	125	·	0	\$22,677
UPMC Hamot	285	·	0	\$32,113
UPMC Horizon	103	·	0	\$18,700
UPMC McKeesport	149	·	0	\$23,713
UPMC Mercy	279	·	· ·	\$27,319
UPMC Northwest	177	·	0	\$17,057
UPMC Passavant	258	·	0	\$28,314
UPMC Presby Shadyside	321	·	0	\$38,276
UPMC St Margaret	243	·	0	\$28,590
Warren General	66	·	0	\$14,993
Washington	214	·	0	\$13,259
Washington HS Greene	66	·	0	\$13,326
West Penn	46	·	0	\$19,471
Windber	31	0	0	\$13,905

#### 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
Western Pennsylvania	2,891	1.9%	\$70,156
ACMH	26	0	\$31,349
Allegheny General	187	0	\$65,111
Allegheny Valley	23	•	\$51,397
Bradford Regional	12	•	\$23,827
Butler Memorial	63	•	\$65,904
Canonsburg	17	•	\$36,659
Charles Cole Memorial	6	•	\$34,687
Clarion	14	•	\$26,037
Conemaugh Memorial	105	•	\$34,278
Conemaugh Meyersdale	0	NR	NR
Conemaugh Miners	0	NR	NR
Corry Memorial	1	NR	NR
Ellwood City	8	0	\$40,474
Excela Hith Westmoreland	46	0	\$36,255
Forbes	112	0	\$50,034
Frick	13	•	\$47,499
Grove City	1	NR	NR
Heritage Valley Beaver	97	0	\$34,998
Heritage Valley Sewickley	45	0	\$35,567
Highlands	12	0	\$41,337
Indiana Regional	38	0	\$37,764
Jameson Memorial	25	0	\$38,473
Jefferson	140	0	\$37,132
Kane Community	6	0	\$47,683
Latrobe Area	58	0	\$35,639
Magee Womens UPMC	28	0	\$101,002
Meadville	20	0	\$45,856
Millcreek Community	6	0	\$36,823
Monongahela Valley	41	0	\$43,985

## 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
Nason	25	0	\$26,297
Ohio Valley General	19	0	\$48,248
Penn Highlands Brookville	2	NR	NR
Penn Highlands Clearfield	15	0	\$40,528
Penn Highlands DuBois	64	0	\$31,046
Penn Highlands Elk	8	0	\$33,684
Punxsutawney Area	7	0	\$29,432
Saint Vincent	98	0	\$92,670
Sharon Regional	35	0	\$56,371
Somerset	18	0	\$44,092
St Clair Memorial	121	0	\$58,950
Titusville Area	5	0	NR
Tyrone	3	NR	NR
Uniontown	60	0	\$26,412
UPMC Altoona	121	•	\$59,283
UPMC Bedford	4	NR	NR
UPMC East	37	0	\$83,239
UPMC Hamot	100	•	\$110,103
UPMC Horizon	47	•	\$70,996
UPMC McKeesport	21	•	\$65,678
UPMC Mercy	44	0	\$85,081
UPMC Northwest	26	0	\$34,192
UPMC Passavant	233	•	\$91,173
UPMC Presby Shadyside	388	•	\$150,540
UPMC St Margaret	70	•	\$99,306
Warren General	11	0	\$57,791
Washington	93	0	\$33,597
Washington HS Greene	2	NR	NR
West Penn	40	0	\$73,587
Windber	22	0	\$35,619

## 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
Western Pennsylvania	10,794	3.0%	24.1%	\$24,620
ACMH	120	<b>⊙</b>	· ·	\$17,353
Allegheny General	491	<b>⊙</b>	· ·	\$29,979
Allegheny Valley	177	·	0	\$21,029
Bradford Regional	38	·	0	\$12,800
Butler Memorial	193	·	0	\$26,484
Canonsburg	93	·	0	\$25,709
Charles Cole Memorial	23	·	0	\$13,678
Clarion	49	·	0	\$12,630
Conemaugh Memorial	474	•	0	\$15,896
Conemaugh Meyersdale	14	·	0	\$14,040
Conemaugh Miners	27	<b>⊙</b>	0	\$18,400
Corry Memorial	22	·	0	\$15,243
Ellwood City	61	·	0	\$13,094
Excela Hith Westmoreland	406	·	0	\$21,696
Forbes	341	·	•	\$20,978
Frick	78	·	0	\$19,570
Grove City	71	·	0	\$22,594
Heritage Valley Beaver	424	·	0	\$12,677
Heritage Valley Sewickley	190	·	0	\$16,259
Highlands	60	·	0	\$14,565
Indiana Regional	161	·	0	\$16,776
Jameson Memorial	208	·	•	\$14,678
Jefferson	372	·	0	\$21,840
Kane Community	27	•	0	\$21,898
Latrobe Area	228	·	•	\$20,689
Magee Womens UPMC	61	·	0	\$42,892
Meadville	91	<b>⊙</b>	0	\$18,955
Millcreek Community	83	<b>⊙</b>	0	\$14,717
Monongahela Valley	276	·	0	\$20,727

#### **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
Nason	70	0	0	\$11,595
Ohio Valley General	61	·	0	\$22,554
Penn Highlands Brookville	20	0	0	\$12,045
Penn Highlands Clearfield	75	·	•	\$13,763
Penn Highlands DuBois	226	0	0	\$13,669
Penn Highlands Elk	93	•	0	\$14,049
Punxsutawney Area	32	•	0	\$10,911
Saint Vincent	344	·	0	\$33,827
Sharon Regional	130	·	0	\$22,289
Somerset	62	·	0	\$17,183
St Clair Memorial	408	0	0	\$19,142
Titusville Area	17	·	0	\$9,224
Tyrone	15	·	0	\$10,655
Uniontown	250	•	•	\$14,104
UPMC Altoona	362	•	0	\$21,783
UPMC Bedford	56	·	0	\$11,799
UPMC East	216	·	0	\$29,485
UPMC Hamot	429	·	0	\$41,918
UPMC Horizon	151	·	0	\$23,313
UPMC McKeesport	176	<b>⊙</b>	0	\$28,976
UPMC Mercy	284	0	0	\$30,217
UPMC Northwest	128	0	0	\$20,481
UPMC Passavant	410	•	0	\$33,221
UPMC Presby Shadyside	821	<b>⊙</b>	0	\$49,832
UPMC St Margaret	434	<b>⊙</b>	0	\$35,299
Warren General	63	0	0	\$17,525
Washington	408	0	0	\$15,980
Washington HS Greene	65	0	0	\$13,238
West Penn	75	0	0	\$22,719
Windber	34	0	0	\$14,437

#### **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
Western Pennsylvania	3,612	0.5%	19.7%	\$18,759
ACMH	26	•	0	\$15,719
Allegheny General	166	•	•	\$26,101
Allegheny Valley	52	•	0	\$11,888
Bradford Regional	17	•	0	\$7,641
Butler Memorial	74	·	0	\$18,382
Canonsburg	14	·	0	\$16,605
Charles Cole Memorial	14	·	0	\$9,593
Clarion	22	·	0	\$9,845
Conemaugh Memorial	186	·	•	\$12,361
Conemaugh Meyersdale	2	NR	NR	NR
Conemaugh Miners	0	NR	NR	NR
Corry Memorial	2	NR	NR	NR
Ellwood City	9	•	0	\$8,746
Excela Hith Westmoreland	118	•	0	\$15,595
Forbes	107	•	0	\$16,734
Frick	38	•	0	\$13,469
Grove City	23	•	0	\$19,513
Heritage Valley Beaver	115	•	•	\$9,717
Heritage Valley Sewickley	87	•	0	\$9,509
Highlands	18	•	0	\$8,249
Indiana Regional	55	•	0	\$15,180
Jameson Memorial	48	•	0	\$11,037
Jefferson	97	•	0	\$15,893
Kane Community	15	•	0	\$13,798
Latrobe Area	61	•	0	\$12,087
Magee Womens UPMC	56	•	0	\$26,429
Meadville	34	•	0	\$14,087
Millcreek Community	17	•	0	\$19,213
Monongahela Valley	68	<b>⊙</b>	0	\$13,642

## 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
Nason	12	0	0	\$9,813
Ohio Valley General	38	·	0	\$13,415
Penn Highlands Brookville	6	0	0	\$11,842
Penn Highlands Clearfield	30	·	0	\$9,419
Penn Highlands DuBois	69	0	0	\$12,746
Penn Highlands Elk	27	0	0	\$8,201
Punxsutawney Area	9	0	0	\$10,454
Saint Vincent	94	·	0	\$24,674
Sharon Regional	85	·	0	\$16,033
Somerset	21	·	0	\$13,016
St Clair Memorial	80	·	0	\$15,035
Titusville Area	23	0	0	\$6,385
Tyrone	11	·	0	\$9,868
Uniontown	116	<b>⊙</b>	0	\$8,709
UPMC Altoona	121	·	0	\$16,109
UPMC Bedford	13	<b>⊙</b>	0	\$12,175
UPMC East	85	<b>⊙</b>	0	\$22,906
UPMC Hamot	142	<b>⊙</b>	0	\$32,888
UPMC Horizon	59	<b>⊙</b>	0	\$21,781
UPMC McKeesport	92	<b>⊙</b>	0	\$23,517
UPMC Mercy	140	0	0	\$22,326
UPMC Northwest	51	0	0	\$11,804
UPMC Passavant	109	<b>⊙</b>	0	\$24,657
UPMC Presby Shadyside	316	0	0	\$37,647
UPMC St Margaret	99	<b>⊙</b>	0	\$25,226
Warren General	27	•	0	\$12,627
Washington	95	0	0	\$12,854
Washington HS Greene	26	•	0	\$9,896
West Penn	48	0	0	\$19,454
Windber	10	0	0	\$8,067

## 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
Western Pennsylvania	2,413	0.3%	8.0%	\$36,517
ACMH	43	·	0	\$24,761
Allegheny General	60	·	0	\$44,484
Allegheny Valley	34	·	0	\$35,355
Bradford Regional	0	NR	NR	NR
Butler Memorial	80	·	•	\$33,608
Canonsburg	55	·	0	\$26,266
Charles Cole Memorial	8	·	0	\$28,841
Clarion	15	·	0	\$18,586
Conemaugh Memorial	65	·	0	\$24,256
Conemaugh Meyersdale	0	NR	NR	NR
Conemaugh Miners	0	NR	NR	NR
Corry Memorial	2	NR	NR	NR
Ellwood City	9	·	0	\$16,787
Excela Hlth Westmoreland	65	·	0	\$23,288
Forbes	45	0	0	\$36,328
Frick	15	•	0	\$29,859
Grove City	7	·	0	\$32,263
Heritage Valley Beaver	106	·	0	\$19,844
Heritage Valley Sewickley	54	·	0	\$19,704
Highlands	46	·	0	\$18,553
Indiana Regional	44	·	0	\$26,889
Jameson Memorial	34	·	0	\$20,419
Jefferson	103	·	0	\$24,358
Kane Community	6	•	0	\$24,146
Latrobe Area	65	·	0	\$24,708
Magee Womens UPMC	19	·	0	\$52,698
Meadville	38	·	0	\$32,059
Millcreek Community	9	0	•	\$19,101
Monongahela Valley	40	0	0	\$23,963

### 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
Nason	23	0	0	\$14,050
Ohio Valley General	21	•	0	\$31,153
Penn Highlands Brookville	0	NR	NR	NR
Penn Highlands Clearfield	8	·	0	\$25,773
Penn Highlands DuBois	27	0	0	\$21,383
Penn Highlands Elk	11	0	0	\$28,441
Punxsutawney Area	6	·	0	\$13,966
Saint Vincent	96	·	0	\$48,858
Sharon Regional	40	·	0	\$36,252
Somerset	17	·	0	\$24,407
St Clair Memorial	146	0	0	\$33,322
Titusville Area	4	NR	NR	NR
Tyrone	5	·	NR	\$27,491
Uniontown	61	<b>⊙</b>	·	\$13,543
UPMC Altoona	131	·	0	\$33,105
UPMC Bedford	6	0	0	\$14,682
UPMC East	51	<b>⊙</b>	•	\$53,151
UPMC Hamot	105	<b>⊙</b>	0	\$60,307
UPMC Horizon	29	<b>⊙</b>	0	\$34,684
UPMC McKeesport	24	<b>⊙</b>	0	\$42,949
UPMC Mercy	45	•	0	\$48,813
UPMC Northwest	15	0	0	\$21,100
UPMC Passavant	119	<b>⊙</b>	·	\$50,029
UPMC Presby Shadyside	148	•	0	\$80,192
UPMC St Margaret	113	•	0	\$55,810
Warren General	1	NR	NR	NR
Washington	54	0	0	\$22,767
Washington HS Greene	9	0	0	\$21,586
West Penn	17	0	•	\$45,405
Windber	8	0	0	\$23,062

### 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 - Open**

Hospital	Total Number of Cases	Readmissions (for any reason)	Average Hospital Charge
Statewide	1,028	8.7%	\$78,939
Western Pennsylvania	308	10.5%	\$64,904
АСМН	2	NR	NR
Allegheny General	19	0	\$37,385
Allegheny Valley	2	NR	NR
Bradford Regional	1	NR	NR
Butler Memorial	0	NR	NR
Canonsburg	4	NR	NR
Charles Cole Memorial	0	NR	NR
Clarion	2	NR	NR
Conemaugh Memorial	16	0	NR
Conemaugh Meyersdale	0	NR	NR
Conemaugh Miners	0	NR	NR
Corry Memorial	1	NR	NR
Ellwood City	0	NR	NR
Excela Hith Westmoreland	8	0	\$35,233
Forbes	8	0	\$58,819
Frick	0	NR	NR
Grove City	3	NR	NR
Heritage Valley Beaver	2	NR	NR
Heritage Valley Sewickley	3	NR	NR
Highlands	2	NR	NR
Indiana Regional	2	NR	NR
Jameson Memorial	1	NR	NR
Jefferson	6	0	\$38,430
Kane Community	0	NR	NR
Latrobe Area	0	NR	NR
Magee Womens UPMC	0	NR	NR
Meadville	10	0	\$40,237
Millcreek Community	6	0	\$19,622
Monongahela Valley	3	NR	NR

### 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
Nason	2	NR	NR
Ohio Valley General	4	NR	NR
Penn Highlands Brookville	0	NR	NR
Penn Highlands Clearfield	1	NR	NR
Penn Highlands DuBois	3	NR	NR
Penn Highlands Elk	3	NR	NR
Punxsutawney Area	0	NR	NR
Saint Vincent	15	·	\$57,673
Sharon Regional	8	•	\$60,785
Somerset	3	NR	NR
St Clair Memorial	8	0	\$43,303
Titusville Area	0	NR	NR
Tyrone	1	NR	NR
Uniontown	2	NR	NR
UPMC Altoona	16	·	NR
UPMC Bedford	2	NR	NR
UPMC East	10	·	\$67,019
UPMC Hamot	21	·	\$71,977
UPMC Horizon	5	NR	\$44,573
UPMC McKeesport	6	·	\$57,774
UPMC Mercy	12	0	\$64,764
UPMC Northwest	7	·	\$21,374
UPMC Passavant	9	·	\$77,078
UPMC Presby Shadyside	53	·	\$125,353
UPMC St Margaret	1	NR	NR
Warren General	2	NR	NR
Washington	9	0	\$39,878
Washington HS Greene	0	NR	NR
West Penn	2	NR	NR
Windber	2	NR	NR

### 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
Western Pennsylvania	3,575	1.8%	\$76,295
ACMH	45	<b>⊙</b>	\$86,432
Allegheny General	142	•	\$68,630
Allegheny Valley	0	NR	NR
Bradford Regional	0	NR	NR
Butler Memorial	140	·	\$84,352
Canonsburg	0	NR	NR
Charles Cole Memorial	0	NR	NR
Clarion	0	NR	NR
Conemaugh Memorial	233	0	\$53,281
Conemaugh Meyersdale	0	NR	NR
Conemaugh Miners	0	NR	NR
Corry Memorial	0	NR	NR
Ellwood City	0	NR	NR
Excela HIth Westmoreland	232	0	\$62,952
Forbes	83	0	\$62,796
Frick	0	NR	NR
Grove City	0	NR	NR
Heritage Valley Beaver	134	<b>⊙</b>	\$43,074
Heritage Valley Sewickley	0	NR	NR
Highlands	0	NR	NR
Indiana Regional	0	NR	NR
Jameson Memorial	27	·	\$52,895
Jefferson	135	·	\$62,960
Kane Community	0	NR	NR
Latrobe Area	0	NR	NR
Magee Womens UPMC	0	NR	NR
Meadville	46	·	\$48,652
Millcreek Community	0	NR	NR
Monongahela Valley	59	0	\$60,574

## 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).

- 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 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
Nason	0	NR	NR
Ohio Valley General	0	NR	NR
Penn Highlands Brookville	0	NR	NR
Penn Highlands Clearfield	0	NR	NR
Penn Highlands DuBois	128	0	\$45,042
Penn Highlands Elk	0	NR	NR
Punxsutawney Area	0	NR	NR
Saint Vincent	204	0	\$112,935
Sharon Regional	72	0	\$72,790
Somerset	51	0	\$54,207
St Clair Memorial	127	0	\$59,534
Titusville Area	0	NR	NR
Tyrone	0	NR	NR
Uniontown	66	0	\$28,182
UPMC Altoona	318	·	\$53,265
UPMC Bedford	0	NR	NR
UPMC East	77	·	\$86,801
UPMC Hamot	297	·	\$109,572
UPMC Horizon	0	NR	NR
UPMC McKeesport	50	·	\$86,570
UPMC Mercy	112	0	\$78,610
UPMC Northwest	0	NR	NR
UPMC Passavant	184	·	\$83,241
UPMC Presby Shadyside	412	·	\$126,329
UPMC St Margaret	0	NR	NR
Warren General	0	NR	NR
Washington	148	·	\$57,373
Washington HS Greene	0	NR	NR
West Penn	53	·	\$64,858
Windber	0	NR	NR

## 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).

- 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 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
Western Pennsylvania	2,929	16.7%	8.5%	\$30,551
ACMH*	24	37.8%	•	\$21,879
Allegheny General*	138	2.4%	•	\$44,034
Allegheny Valley	47	52.8%	•	\$21,499
Bradford Regional	5	50.0%	•	\$13,722
Butler Memorial*	60	8.8%	•	\$31,746
Canonsburg	8	53.3%	0	\$27,583
Charles Cole Memorial	9	20.0%	0	\$8,713
Clarion	15	13.3%	0	\$12,585
Conemaugh Memorial*	112	2.9%	0	\$20,990
Conemaugh Meyersdale	1	NR	NR	NR
Conemaugh Miners	2	NR	NR	NR
Corry Memorial	2	NR	NR	NR
Ellwood City	13	48.0%	0	\$10,869
Excela Hlth Westmoreland*	97	11.9%	0	\$26,322
Forbes*	54	4.0%	0	\$28,589
Frick	42	23.1%	0	\$19,615
Grove City	8	22.2%	0	\$18,880
Heritage Valley Beaver*	91	6.4%	0	\$15,615
Heritage Valley Sewickley	22	38.5%	0	\$16,055
Highlands	5	20.0%	0	\$11,051
Indiana Regional	32	43.1%	•	\$18,150
Jameson Memorial*	45	34.4%	•	\$19,133
Jefferson*	97	6.2%	•	\$25,568
Kane Community	3	NR	NR	NR
Latrobe Area	31	45.5%	•	\$17,450
Magee Womens UPMC	5	28.6%	•	\$40,506
Meadville*	16	40.0%	•	\$21,868
Millcreek Community	4	NR	NR	NR
Monongahela Valley*	86	16.0%	0	\$22,793

### 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.

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

<sup>\*</sup> 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.

## **Heart Attack - Medical Management**

Hospital	Total Number of Cases	Transfer to Acute Care	Mortality	Average Hospital Charge
Nason	4	NR	NR	NR
Ohio Valley General	8	71.4%	•	\$17,339
Penn Highlands Brookville	11	28.6%	•	\$9,282
Penn Highlands Clearfield	7	50.0%	0	\$8,478
Penn Highlands DuBois*	78	12.6%	•	\$18,930
Penn Highlands Elk	11	16.7%	0	\$12,093
Punxsutawney Area	9	43.8%	0	\$14,445
Saint Vincent*	106	5.0%	0	\$46,494
Sharon Regional*	44	11.6%	•	\$32,204
Somerset*	39	21.7%	0	\$19,780
St Clair Memorial*	80	2.6%	0	\$23,423
Titusville Area	8	0.0%	0	\$8,612
Tyrone	19	0.0%	0	\$11,809
Uniontown*	80	30.8%	•	\$14,901
UPMC Altoona*	265	5.8%	•	\$25,765
UPMC Bedford	3	NR	NR	NR
UPMC East*	89	16.8%	0	\$34,803
UPMC Hamot*	162	0.7%	•	\$59,803
UPMC Horizon	24	48.8%	•	\$24,833
UPMC McKeesport*	78	22.3%	•	\$36,778
UPMC Mercy*	108	1.1%	•	\$38,144
UPMC Northwest	11	56.5%	0	\$19,386
UPMC Passavant*	163	1.9%	•	\$38,418
UPMC Presby Shadyside*	239	0.5%	•	\$56,727
UPMC St Margaret	49	50.0%	•	\$30,546
Warren General	11	28.6%	0	\$14,565
Washington*	102	7.6%	0	\$20,225
Washington HS Greene	9	52.6%	•	\$9,781
West Penn*	20	0.0%	•	\$34,236
Windber	18	32.0%	0	\$12,057

### 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.

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

<sup>\*</sup> 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.

## **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
Western Pennsylvania	1,811	0.5%	12.6%	\$16,910
ACMH	8	·	0	\$13,676
Allegheny General	73	·	0	\$21,615
Allegheny Valley	17	·	0	\$20,214
Bradford Regional	5	·	0	\$6,259
Butler Memorial	36	·	0	\$18,944
Canonsburg	11	·	0	\$20,605
Charles Cole Memorial	2	NR	NR	NR
Clarion	1	NR	NR	NR
Conemaugh Memorial	112	<b>⊙</b>	•	\$11,761
Conemaugh Meyersdale	0	NR	NR	NR
Conemaugh Miners	2	NR	NR	NR
Corry Memorial	0	NR	NR	NR
Ellwood City	12	·	0	\$9,515
Excela Hlth Westmoreland	91	·	0	\$14,101
Forbes	78	·	0	\$16,885
Frick	18	·	0	\$11,756
Grove City	8	·	0	\$16,506
Heritage Valley Beaver	51	·	0	\$10,446
Heritage Valley Sewickley	18	·	0	\$11,379
Highlands	6	·	0	\$10,883
Indiana Regional	48	·	0	\$13,260
Jameson Memorial	45	·	0	\$10,924
Jefferson	67	·	0	\$17,013
Kane Community	1	NR	NR	NR
Latrobe Area	59	·	0	\$12,529
Magee Womens UPMC	24	·	0	\$23,074
Meadville	22	·	0	\$15,205
Millcreek Community	8	·	0	\$11,647
Monongahela Valley	38	•	0	\$15,962

## 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
Nason	6	0	0	\$8,678
Ohio Valley General	28	•	0	\$12,152
Penn Highlands Brookville	1	NR	NR	NR
Penn Highlands Clearfield	8	·	0	\$10,898
Penn Highlands DuBois	31	0	•	\$10,408
Penn Highlands Elk	5	0	NR	\$8,755
Punxsutawney Area	4	NR	NR	NR
Saint Vincent	44	0	0	\$25,831
Sharon Regional	52	0	0	\$13,137
Somerset	11	·	0	\$16,310
St Clair Memorial	45	0	0	\$14,513
Titusville Area	7	0	0	\$7,252
Tyrone	2	NR	NR	NR
Uniontown	34	·	0	\$7,915
UPMC Altoona	81	·	0	\$17,371
UPMC Bedford	4	NR	NR	NR
UPMC East	33	0	0	\$16,932
UPMC Hamot	58	<b>⊙</b>	0	\$26,707
UPMC Horizon	20	<b>⊙</b>	0	\$15,712
UPMC McKeesport	31	<b>⊙</b>	0	\$17,991
UPMC Mercy	93	0	0	\$20,466
UPMC Northwest	26	0	0	\$11,421
UPMC Passavant	58	<b>⊙</b>	0	\$21,451
UPMC Presby Shadyside	145	<b>⊙</b>	0	\$31,971
UPMC St Margaret	48	•	0	\$21,349
Warren General	11	•	0	\$14,327
Washington	52	0	0	\$11,451
Washington HS Greene	4	NR	NR	NR
West Penn	6	0	0	\$14,668
Windber	2	NR	NR	NR

# 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
Western Pennsylvania	5,372	0.6%	16.1%	\$16,738
ACMH	67	<b>⊙</b>	•	\$13,040
Allegheny General	151	<b>⊙</b>	0	\$23,563
Allegheny Valley	82	·	0	\$13,782
Bradford Regional	26	<b>⊙</b>	0	\$7,293
Butler Memorial	115	<b>⊙</b>	•	\$17,261
Canonsburg	45	<b>⊙</b>	0	\$12,020
Charles Cole Memorial	25	<b>⊙</b>	0	\$9,348
Clarion	28	<b>⊙</b>	0	\$9,892
Conemaugh Memorial	191	<b>⊙</b>	0	\$12,583
Conemaugh Meyersdale	11	·	0	\$9,260
Conemaugh Miners	7	<b>⊙</b>	0	\$15,481
Corry Memorial	10	<b>⊙</b>	0	\$12,646
Ellwood City	25	<b>⊙</b>	0	\$8,640
Excela Hlth Westmoreland	252	<b>⊙</b>	0	\$14,610
Forbes	189	<b>⊙</b>	0	\$16,021
Frick	46	<b>⊙</b>	•	\$12,861
Grove City	56	<b>⊙</b>	•	\$17,842
Heritage Valley Beaver	129	<b>⊙</b>	•	\$9,379
Heritage Valley Sewickley	72	<b>⊙</b>	•	\$10,042
Highlands	24	<b>⊙</b>	0	\$10,019
Indiana Regional	162	·	0	\$11,884
Jameson Memorial	108	·	0	\$11,361
Jefferson	219	·	0	\$14,471
Kane Community	11	·	0	\$11,311
Latrobe Area	135	·	•	\$12,101
Magee Womens UPMC	67	<b>⊙</b>	•	\$24,487
Meadville	57	·	0	\$12,992
Millcreek Community	47	·	0	\$10,492
Monongahela Valley	132	0	0	\$12,487

## 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**

- 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
Nason	44	0	0	\$8,509
Ohio Valley General	68	·	0	\$12,548
Penn Highlands Brookville	28	0	0	\$10,075
Penn Highlands Clearfield	27	·	0	\$9,340
Penn Highlands DuBois	63	0	0	\$9,776
Penn Highlands Elk	33	0	0	\$10,147
Punxsutawney Area	26	·	0	\$10,177
Saint Vincent	92	·	0	\$20,690
Sharon Regional	88	·	0	\$15,585
Somerset	30	<b>⊙</b>	0	\$11,892
St Clair Memorial	249	<b>⊙</b>	0	\$14,032
Titusville Area	15	<b>⊙</b>	0	\$6,136
Tyrone	15	•	•	\$10,942
Uniontown	123	0	0	\$8,349
UPMC Altoona	219	0	0	\$16,106
UPMC Bedford	47	0	0	\$9,984
UPMC East	109	0	0	\$21,398
UPMC Hamot	135	0	0	\$25,997
UPMC Horizon	87	0	0	\$17,136
UPMC McKeesport	75	0	0	\$18,362
UPMC Mercy	210	<b>⊙</b>	0	\$20,414
UPMC Northwest	73	<b>⊙</b>	0	\$13,801
UPMC Passavant	210	<b>⊙</b>	0	\$23,748
UPMC Presby Shadyside	396	<b>⊙</b>	•	\$36,928
UPMC St Margaret	183	<b>⊙</b>	0	\$26,340
Warren General	15	•	0	\$14,888
Washington	144	<b>⊙</b>	0	\$11,113
Washington HS Greene	22	<b>⊙</b>	0	\$8,314
West Penn	35	<b>⊙</b>	0	\$19,831
Windber	8	0	0	\$12,886

## 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**

- 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
Statewide	18,532	2.6%	20.1%	\$32,145
Western Pennsylvania	6,259	3.1%	21.0%	\$23,741
ACMH	49	•	0	\$15,570
Allegheny General	217	·	0	\$30,618
Allegheny Valley	97	·	0	\$19,909
Bradford Regional	26	·	0	\$11,285
Butler Memorial	160	·	0	\$24,645
Canonsburg	60	·	0	\$19,410
Charles Cole Memorial	17	•	0	\$12,252
Clarion	28	·	0	\$10,018
Conemaugh Memorial	342	•	0	\$15,873
Conemaugh Meyersdale	3	NR	NR	NR
Conemaugh Miners	7	·	0	\$17,610
Corry Memorial	5	·	NR	\$17,542
Ellwood City	20	·	0	\$13,206
Excela Hlth Westmoreland	159	·	0	\$19,041
Forbes	143	•	0	\$21,695
Frick	77	·	0	\$16,499
Grove City	15	·	0	\$20,196
Heritage Valley Beaver	242	·	0	\$11,011
Heritage Valley Sewickley	75	·	0	\$11,077
Highlands	13	·	0	\$18,832
Indiana Regional	148	·	0	\$15,006
Jameson Memorial	77	·	0	\$11,620
Jefferson	155	•	0	\$20,749
Kane Community	11	·	0	\$12,445
Latrobe Area	117	0	0	\$17,807
Magee Womens UPMC	47	0	0	\$32,700
Meadville	96	•	0	\$15,770
Millcreek Community	45	·	0	\$15,367
Monongahela Valley	126	0	0	\$19,257

# 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
Nason	11	0	0	\$7,982
Ohio Valley General	30	•	0	\$20,497
Penn Highlands Brookville	14	·	0	\$15,173
Penn Highlands Clearfield	32	·	0	\$9,153
Penn Highlands DuBois	141	·	0	\$14,329
Penn Highlands Elk	28	0	0	\$10,656
Punxsutawney Area	32	0	0	\$11,200
Saint Vincent	225	·	0	\$30,755
Sharon Regional	122	·	0	\$20,091
Somerset	64	·	0	\$16,844
St Clair Memorial	215	<b>⊙</b>	0	\$18,044
Titusville Area	4	NR	NR	NR
Tyrone	2	NR	NR	NR
Uniontown	151	0	0	\$10,682
UPMC Altoona	330	•	0	\$21,675
UPMC Bedford	14	·	0	\$11,264
UPMC East	169	·	0	\$28,687
UPMC Hamot	346	·	0	\$44,560
UPMC Horizon	119	·	0	\$25,062
UPMC McKeesport	111	·	0	\$28,192
UPMC Mercy	221	·	0	\$29,404
UPMC Northwest	64	·	0	\$14,338
UPMC Passavant	193	·	0	\$30,431
UPMC Presby Shadyside	565	·	•	\$47,950
UPMC St Margaret	189	·	0	\$32,968
Warren General	33	<b>⊙</b>	0	\$15,296
Washington	138	<b>⊙</b>	0	\$15,588
Washington HS Greene	23	<b>⊙</b>	0	\$8,490
West Penn	72	<b>⊙</b>	0	\$24,264
Windber	17	0	•	\$13,060

# 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
Western Pennsylvania	2,205	6.3%	22.8%	\$31,898
ACMH	20	•	0	\$30,094
Allegheny General	129	•	•	\$39,525
Allegheny Valley	32	·	0	\$27,684
Bradford Regional	4	NR	NR	NR
Butler Memorial	25	•	0	\$32,984
Canonsburg	9	·	0	\$23,699
Charles Cole Memorial	7	•	NR	\$22,918
Clarion	9	·	0	\$20,114
Conemaugh Memorial	83	·	0	\$18,579
Conemaugh Meyersdale	4	NR	NR	NR
Conemaugh Miners	4	NR	NR	NR
Corry Memorial	0	NR	NR	NR
Ellwood City	5	·	0	\$13,236
Excela Hlth Westmoreland	81	·	0	\$27,774
Forbes	46	•	0	\$27,669
Frick	28	·	0	\$22,432
Grove City	5	·	NR	NR
Heritage Valley Beaver	92	•	0	\$15,114
Heritage Valley Sewickley	24	•	0	\$16,879
Highlands	8	<b>⊙</b>	0	\$19,784
Indiana Regional	83	·	0	\$21,299
Jameson Memorial	33	·	0	\$17,409
Jefferson	39	•	0	\$28,122
Kane Community	8	·	0	\$14,787
Latrobe Area	27	·	0	\$23,706
Magee Womens UPMC	29	•	0	\$52,237
Meadville	31	·	0	\$18,933
Millcreek Community	3	NR	NR	NR
Monongahela Valley	41	0	0	\$30,857

# 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
Nason	5	<b>⊙</b>	NR	\$12,861
Ohio Valley General	6	•	NR	\$24,376
Penn Highlands Brookville	25	·	0	\$17,303
Penn Highlands Clearfield	16	0	•	\$11,892
Penn Highlands DuBois	24	<b>⊙</b>	0	\$13,369
Penn Highlands Elk	7	·	0	\$14,829
Punxsutawney Area	12	·	0	\$14,473
Saint Vincent	27	·	0	\$30,254
Sharon Regional	43	·	0	\$23,460
Somerset	8	·	0	\$23,926
St Clair Memorial	126	<b>⊙</b>	0	\$24,872
Titusville Area	0	NR	NR	NR
Tyrone	1	NR	NR	NR
Uniontown	50	·	0	\$18,881
UPMC Altoona	77	•	0	\$26,642
UPMC Bedford	4	NR	NR	NR
UPMC East	72	·	0	\$38,254
UPMC Hamot	42	·	0	\$44,084
UPMC Horizon	27	·	0	\$25,356
UPMC McKeesport	36	<b>⊙</b>	· ·	\$29,399
UPMC Mercy	72	<b>⊙</b>	· ·	\$36,126
UPMC Northwest	85	·	0	\$26,540
UPMC Passavant	110	·	0	\$39,001
UPMC Presby Shadyside	245	·	0	\$71,462
UPMC St Margaret	91	·	0	\$44,023
Warren General	6	•	NR	\$16,082
Washington	46	•	0	\$19,098
Washington HS Greene	4	NR	NR	NR
West Penn	16	·	0	\$33,315
Windber	4	NR	NR	NR

# 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
Western Pennsylvania	9,533	2.4%	16.1%	\$22,138
ACMH	159	<b>⊙</b>	0	\$19,417
Allegheny General	208	·	0	\$31,709
Allegheny Valley	164	·	0	\$20,254
Bradford Regional	63	·	0	\$12,706
Butler Memorial	252	•	0	\$24,975
Canonsburg	93	·	0	\$20,312
Charles Cole Memorial	74	•	0	\$11,950
Clarion	83	•	0	\$12,728
Conemaugh Memorial	359	•	•	\$15,776
Conemaugh Meyersdale	18	·	0	\$12,021
Conemaugh Miners	28	·	0	\$18,034
Corry Memorial	57	•	0	\$17,110
Ellwood City	66	<b>⊙</b>	0	\$12,921
Excela Hlth Westmoreland	356	·	0	\$23,570
Forbes	192	•	0	\$21,600
Frick	105	•	•	\$20,355
Grove City	80	•	0	\$24,450
Heritage Valley Beaver	288	<b>⊙</b>	0	\$11,940
Heritage Valley Sewickley	164	•	0	\$12,542
Highlands	86	•	0	\$15,290
Indiana Regional	134	•	0	\$17,420
Jameson Memorial	281	•	0	\$15,726
Jefferson	380	•	0	\$20,690
Kane Community	41	0	0	\$16,087
Latrobe Area	134	0	0	\$17,678
Magee Womens UPMC	56	0	0	\$36,664
Meadville	136	0	0	\$16,839
Millcreek Community	67	<b>⊙</b>	•	\$16,110
Monongahela Valley	177	0	0	\$20,227

# 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
Nason	71	0	0	\$10,824
Ohio Valley General	109	•	0	\$19,119
Penn Highlands Brookville	97	0	•	\$14,539
Penn Highlands Clearfield	58	·	0	\$10,926
Penn Highlands DuBois	132	0	0	\$13,190
Penn Highlands Elk	78	·	0	\$12,551
Punxsutawney Area	91	·	0	\$13,297
Saint Vincent	154	·	0	\$25,952
Sharon Regional	124	·	0	\$17,475
Somerset	68	<b>⊙</b>	0	\$16,679
St Clair Memorial	443	<b>⊙</b>	0	\$19,422
Titusville Area	63	<b>⊙</b>	0	\$6,830
Tyrone	44	<b>⊙</b>	0	\$14,665
Uniontown	245	•	0	\$13,257
UPMC Altoona	412	0	0	\$22,162
UPMC Bedford	96	0	0	\$12,867
UPMC East	195	0	0	\$31,685
UPMC Hamot	220	0	0	\$35,672
UPMC Horizon	175	0	0	\$22,659
UPMC McKeesport	177	0	0	\$28,202
UPMC Mercy	261	<b>⊙</b>	0	\$32,145
UPMC Northwest	160	<b>⊙</b>	•	\$21,516
UPMC Passavant	400	<b>⊙</b>	0	\$32,110
UPMC Presby Shadyside	558	•	0	\$50,864
UPMC St Margaret	277	·	0	\$36,677
Warren General	65	·	0	\$15,360
Washington	293	0	0	\$14,194
Washington HS Greene	64	•	0	\$13,062
West Penn	56	0	0	\$27,173
Windber	38	0	0	\$12,018

# 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
Western Pennsylvania	12,777	12.7%	\$41,065
АСМН	114	0	\$26,234
Allegheny General	573	•	\$57,705
Allegheny Valley	147	•	\$30,829
Bradford Regional	96	•	\$17,300
Butler Memorial	284	0	\$40,628
Canonsburg	49	•	\$29,518
Charles Cole Memorial	60	•	\$15,305
Clarion	127	•	\$18,396
Conemaugh Memorial	795	•	\$23,531
Conemaugh Meyersdale	6	•	\$16,445
Conemaugh Miners	53	•	\$20,188
Corry Memorial	31	•	\$20,523
Ellwood City	33	•	\$15,248
Excela Hlth Westmoreland	299	0	\$34,453
Forbes	295	0	\$33,751
Frick	130	0	\$38,860
Grove City	21	•	\$34,454
Heritage Valley Beaver	549	0	\$20,400
Heritage Valley Sewickley	254	•	\$22,135
Highlands	7	•	\$21,914
Indiana Regional	249	•	\$21,875
Jameson Memorial	311	•	\$21,650
Jefferson	226	•	\$38,463
Kane Community	39	•	\$17,551
Latrobe Area	364	0	\$26,363
Magee Womens UPMC	72	•	\$70,513
Meadville	287	•	\$26,701
Millcreek Community	66	•	\$20,223
Monongahela Valley	278	0	\$35,037

## **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
Nason	4	NR	NR
Ohio Valley General	4	NR	NR
Penn Highlands Brookville	13	•	\$16,552
Penn Highlands Clearfield	53	0	\$15,315
Penn Highlands DuBois	262	0	\$19,608
Penn Highlands Elk	71	•	\$15,887
Punxsutawney Area	19	0	\$16,006
Saint Vincent	508	0	\$39,287
Sharon Regional	175	0	\$30,764
Somerset	223	0	\$22,938
St Clair Memorial	496	0	\$31,890
Titusville Area	35	0	\$10,870
Tyrone	1	NR	NR
Uniontown	341	•	\$20,721
UPMC Altoona	419	•	\$32,648
UPMC Bedford	65	0	\$18,931
UPMC East	254	0	\$46,199
UPMC Hamot	604	0	\$60,503
UPMC Horizon	193	0	\$37,453
UPMC McKeesport	346	0	\$51,003
UPMC Mercy	347	0	\$51,944
UPMC Northwest	168	0	\$27,510
UPMC Passavant	275	0	\$55,005
UPMC Presby Shadyside	1,018	•	\$103,830
UPMC St Margaret	207	0	\$60,314
Warren General	117	0	\$23,146
Washington	476	0	\$21,468
Washington HS Greene	22	0	\$16,826
West Penn	141	0	\$51,192
Windber	95	0	\$15,371

## **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.

## **Stroke**

Hospital	Total Number of Cases	Mortality	Readmissions (for any reason)	Average Hospital Charge
Statewide	16,443	3.6%	12.9%	\$44,679
Western Pennsylvania	5,397	4.0%	12.4%	\$34,705
ACMH	70	·	0	\$18,616
Allegheny General	426	·	0	\$47,586
Allegheny Valley	66	·	0	\$25,292
Bradford Regional	4	NR	NR	NR
Butler Memorial	143	·	0	\$31,613
Canonsburg	19	•	0	\$25,427
Charles Cole Memorial	14	•	0	\$15,001
Clarion	15	·	0	\$12,591
Conemaugh Memorial	257	•	0	\$18,116
Conemaugh Meyersdale	6	•	0	\$10,692
Conemaugh Miners	3	NR	NR	NR
Corry Memorial	2	NR	NR	NR
Ellwood City	19	•	0	\$12,269
Excela Hlth Westmoreland	119	•	0	\$21,997
Forbes	226	•	0	\$25,468
Frick	16	•	0	\$19,063
Grove City	16	•	0	\$17,163
Heritage Valley Beaver	140	•	0	\$14,436
Heritage Valley Sewickley	72	•	0	\$17,311
Highlands	5	•	0	\$9,457
Indiana Regional	88	•	0	\$18,403
Jameson Memorial	35	•	0	\$14,885
Jefferson	163	0	0	\$29,739
Kane Community	14	0	0	\$16,860
Latrobe Area	74	0	0	\$17,305
Magee Womens UPMC	15	<b>⊙</b>	0	\$42,231
Meadville	63	0	0	\$24,490
Millcreek Community	18	•	0	\$17,120
Monongahela Valley	75	•	0	\$24,134

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

## **Stroke**

Hospital			Average Hospital Charge		
Nason	9	0	0	\$10,756	
Ohio Valley General	22	0	0	\$16,726	
Penn Highlands Brookville	7	·	0	\$11,735	
Penn Highlands Clearfield	11	·	0	\$13,401	
Penn Highlands DuBois	85	·	0	\$18,579	
Penn Highlands Elk	16	0	0	\$15,101	
Punxsutawney Area	14	0	0	\$11,401	
Saint Vincent	222	·	0	\$40,529	
Sharon Regional	68	0	0	\$26,829	
Somerset	22	0	0	\$18,856	
St Clair Memorial	199	·	0	\$22,469	
Titusville Area	12	·	0	\$6,988	
Tyrone	2	NR	NR	NR	
Uniontown	110	0	0	\$13,440	
UPMC Altoona	295	•	0	\$26,213	
UPMC Bedford	5	·	NR	\$13,416	
UPMC East	102	·	0	\$35,640	
UPMC Hamot	334	·	0	\$46,170	
UPMC Horizon	50	·	0	\$25,729	
UPMC McKeesport	65	·	•	\$33,797	
UPMC Mercy	258	·	· ·	\$44,267	
UPMC Northwest	79	0	0	\$21,218	
UPMC Passavant	146	·	0	\$33,676	
UPMC Presby Shadyside	735	•	0	\$69,090	
UPMC St Margaret	122	·	·	\$35,410	
Warren General	30	·	0	\$16,246	
Washington	141	·	· ·	\$17,795	
Washington HS Greene	1	NR	NR	NR	
West Penn	46	·	0	\$34,630	
Windber	4	NR	NR	NR	

### **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.
- Rate was significantly higher than expected.
- 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	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
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



### Pennsylvania Health Care Cost Containment Council

Joe Martin, Executive Director

225 Market Street, Suite 400, Harrisburg, PA 17101

Phone: 717-232-6787 ◆ Fax: 717-232-3821

www.phc4.org



### **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.