HANOVERHOSPITAL
When performance counts.

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May 4, 2005

Mr. Marc P. Volavka
Executive Director
Pennsylvania Health Care Cost Containment Council
225 Market Street Suite 400
Harrisburg, PA 17101

Dear Mr. Volavka:

We have reviewed our hospital's report on Total Hip and Knee Replacements for FY2002. After reviewing the data, we have these comments:

> As listed on the Outcome Report, there were patients included in the report for Readmissions Within 30 Days who had been readmitted with diagnoses completely unrelated to the joint replacement surgery or had been validated as a complication originating from their Rehab stay. Included in the readmission diagnoses were patients admitted for COPD with Acute Exacerbation, ASCAD, a viral infection occurring 11 days post surgery, and a Perforation of the intestine secondary to a high grade large cell lymphoma. In this case the prior admission when the joint replacement was done had been a very complicated post operative course with intestinal bleeding increasing the Inpatient stay. This case had been a 'Request for Special Exclusion" case of which the orthopedic surgeon, James Ellison, MD, was denied. Also included in the Readmissions was a case that had been validated as required by PHC4 in October 2004 by the hospital and the Rehab facility as a complication originating during the Rehab stay. We feel that the inclusion of these cases in the study misrepresents our hospital and the care we provide.
>
> In addition, the cases we were able to re-evaluate in 2004, were the post-operative complication cases not the other cases involved with Readmissions. That report specifically stated that our hospital was classified as "Same as Expected", so we did not comment. However, this most recent report lists the same thirteen cases but shows our classification as "Higher than Expected". This was discussed by telephone with a PHC4 representative who stated the Risk Factor Model was updated. We are concerned about how this data has been gathered and how it can be included in the new report without appearing in the prior report.

In the future, we would like the opportunity to review cases in a timelier manner rather than three years later. We would also appreciate the opportunity to review all of the cases included in the study prior to this point in the process (just prior to public release).

Sincerely,

Carol V. Freer, MD
Vice President, Medical Affairs

Susan S Gilbert CCS
Manager Coding and DATAA