

# HOSPITAL PERFORMANCE REPORT

## ***31 Common Medical Procedures and Treatments***

Federal Fiscal Year 2007 • October 1, 2006 - September 30, 2007





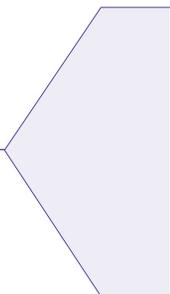
### Counties included in this Report

- 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

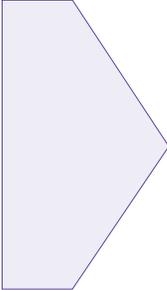
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## Key Findings



- The overall mortality rate for conditions reported in 2004 through 2007 decreased significantly, from 4.6% in 2004 to 4.2% in 2007.
- Patient mortality rates decreased significantly in 17 of the 25 treatment categories between 2004 and 2007 (in conditions where four years of mortality data were reported). The largest decline was in Respiratory Failure without Mechanical Ventilation, where the mortality rate decreased from 17.0% in 2004 to 11.7% in 2007.
- Among the conditions reported, Respiratory Failure with Mechanical Ventilation had the highest mortality rate, at 29.3%, and Hysterectomy - Abdominal had the lowest rate at 0.1%.
- There was wide variation in length of stay among hospitals. The condition with the most variation was Diabetes with Amputation, where hospitals' average length of stay ranged from 4.2 to 17.2 days after taking patient risk factors into account.
- The average length of stay decreased significantly for 18 of the 29 conditions between 2004 and 2007. The largest decline was in Respiratory Failure with Mechanical Ventilation, where the average length of stay decreased from 10.5 in 2004 to 9.7 in 2007.
- The overall readmission rate for conditions reported for 2005 through 2007 changed only slightly, from 18.6% in 2005 to 18.7% in 2007. The largest increase was in Respiratory Failure without Mechanical Ventilation, where the readmission rate increased from 25.3% in 2005 to 27.3% in 2007.
- There were 57,360 readmissions for any reason in 2007 (for the categories covered in the report). These readmissions amounted to approximately \$2.4 billion in charges and 351,000 hospital days.
- Among the conditions reported, Respiratory Failure with Mechanical Ventilation had the highest readmission rate, at 27.5%, and Hysterectomy - Vaginal had the lowest rate at 3.3%.
- There were 15,122 readmissions for complication or infection in 2007 (for the categories covered in the report). These readmissions amounted to approximately \$774 million in charges and 112,000 hospital days.
- The condition with the highest readmission rate for complication or infection was Respiratory Failure without Mechanical Ventilation (13.9%). The condition with the lowest rate was Hysterectomy - Vaginal (2.0%).



# Understanding this Report

## Foreword

The Pennsylvania Health Care Cost Containment Council (PHC4) was established as an independent state agency by the General Assembly and the Governor of the Commonwealth of Pennsylvania in 1986. To help improve the quality and restrain the cost of health care, PHC4 promotes health care competition through the collection, analysis and public dissemination of uniform cost and quality-related information. Thanks to the vision of its General Assembly, Pennsylvania has begun to build a new health care marketplace where purchasers, consumers, providers, payors, and policymakers can make more informed decisions about the delivery of health care. This *Hospital Performance Report* is one of a series of public reports designed to achieve this goal. Information about additional treatment and surgical categories is posted on the PHC4 Web site at [www.phc4.org](http://www.phc4.org).

## What is the purpose of the 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 quality product for the best possible price. It should be the same with 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* can help to fill the information vacuum and assist consumers and purchasers in making more informed health care decisions. This report can also 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 31 conditions based on ICD-9-CM (International Classification of Diseases, Ninth Revision, Clinical Modification) codes, which specify the clinical reason(s) for a patient's hospitalization. Of

the 31 code-based conditions, there are 19 diagnoses and 12 procedures. Descriptions of these conditions are on pages 6 and 7.

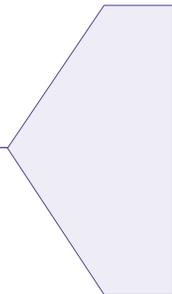
- This report covers inpatient hospital discharges during Federal Fiscal Year (FFY) 2007, which includes data from October 1, 2006 through September 30, 2007.
- This report is divided into three regional versions and is hospital-specific.
- All Pennsylvania general acute care and most specialty general acute care hospitals, regardless of size, are included.
- The hospital names have been shortened in many cases for formatting purposes. Hospital names may be different today than during the time period covered in this report due to mergers and name changes. A list of changes can be found on the PHC4 Web site at [www.phc4.org](http://www.phc4.org).

## Where does the data come from?

The data compiled for the purpose of this publication is reported as it was submitted to PHC4 by Pennsylvania hospitals. The data was subject to standard verification processes by PHC4. In addition, hospitals submit data indicating, in simple terms, "how sick the patient was" or, in technical jargon, a "severity score." The data is then risk-adjusted.

## Accounting 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, length of stay and readmission data, meaning that hospitals receive "extra credit" for treating patients that 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, stay in the hospital longer, or be readmitted.



A sophisticated patient risk classification system called Atlas Outcomes™ is used to collect clinical information about hospital patients and to predict each patient's chance of mortality and expected length of stay. Atlas Outcomes™ is a clinical information system developed by MediQual Systems, Inc.®, a business of Cardinal Health. This system is based on electronically available admit/discharge/transfer and laboratory data, as well as selected clinical data abstracted from the patient record, including EKG readings, vital signs, medical history, imaging, pathology and operative results. PHC4 also independently adjusts for other risk factors, such as poverty rate or the presence of cancer in the patient population included 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 Web site at [www.phc4.org](http://www.phc4.org).

### What is measured in the report and why is it important?

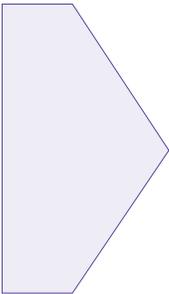
PHC4's mission is to provide the public with information that will help to improve the quality of health care services while also providing opportunities to restrain costs. The measurement of quality in health care is not an exact science. There may be a number of ways to define quality; however, for the purposes of this report, six measures are suggested. With the exception of volume of cases, each of these measures has been adjusted for patient risk. (For more information, see the previous section titled, Accounting for high-risk patients.)

- **Volume 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

readmitted several times would be included each time in the number of cases. Outcome data are not reported for hospitals that had 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: Small or specialty hospitals may report low volume due to the unique patient population they serve or geographic location.

- **Risk-Adjusted Mortality** – PHC4 has used risk-adjusted mortality statistics as a measure of quality since it began publishing reports in 1989. To determine the mortality rating, PHC4 compares the number of patients one could reasonably expect to die in a given hospital in a given condition with the actual number of deaths.
- **Risk-Adjusted Length of Stay** – The length of time a patient stays in the hospital can reflect how successful the hospital is in providing treatment and has an impact on the resources used in delivering treatment.
- **Risk-Adjusted Length of Stay Outliers** – Length of stay “outliers” are abnormally short or long hospitalizations – those individual hospitalizations where the difference between the actual and expected length of stay was in the top (long length of stay outliers) or bottom (short length of stay outliers) 5% of all statewide hospitalizations. They are the hospitalizations where the difference between the actual and expected length of stay was above or below the normal range for all hospitalizations in the state. For any one hospital, the outlier rate is the number of outliers divided by the total number of hospitalizations. Length of stay may be an important quality of care indicator; however, many factors affect length of stay, some of which are beyond the hospital's control. Abnormally short or long hospital stays may result from factors, such as payor expectations, complications, clinical treatment advancements,



or avoidable admissions due to inadequate health and social support in the community. Reported ratings should be interpreted cautiously and do not necessarily indicate high or low quality care.

- **Risk-Adjusted Readmissions** – A readmission is defined as a subsequent acute care hospitalization, for any reason in any Pennsylvania hospital, where the admit date is within 30 days of the discharge date of the original hospitalization. To determine the risk-adjusted readmission rating, PHC4 compares the number of patients one could reasonably expect to be readmitted in a given hospital in a given condition with the actual number of readmissions. The methodology was designed to limit planned readmissions; however, some may still be included. While some re-hospitalizations can be expected, high quality care may lessen the need for subsequent hospitalizations.
- **Risk-Adjusted Readmissions for Complication/Infection** – The risk-adjusted readmission rating (discussed above) takes into consideration all subsequent hospitalizations within 30 days of the discharge date of the original hospitalization. However, this measure includes only readmissions with a principal diagnosis of a complication/infection (see the Technical Notes on the PHC4 Web site, [www.phc4.org](http://www.phc4.org), for a detailed description).

### Understanding the Symbols

Symbols representing ratings for risk-adjusted mortality, readmissions, and length of stay outliers are displayed in the report. These symbols reflect a comparison of a hospital's actual rate and what is expected.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.

### Other data issues

- **Do Not Resuscitate Cases** – The mortality analysis includes Do Not Resuscitate (DNR) cases. Since DNR is defined and utilized differently across Pennsylvania hospitals, such records are retained in the analysis to avoid potential biases in mortality ratings.
- Not all data is reported for all measures. For example, readmission rates are not reported for Heart Attack – Medical Management because subsequent admissions are often planned.

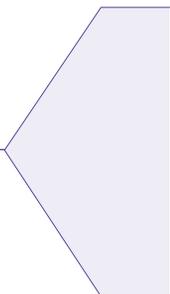
### Hospital charges

This report also includes the average hospital charge for each of the 31 code-based conditions. 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.

A look at the financial data submitted by hospitals to PHC4 can shed some light on the relationship between the amount hospitals charge or bill for inpatient services, and the amount they receive in Net Patient Revenue (NPR). Pennsylvania hospitals received, on average state-wide, \$.27 in NPR for every dollar that they charged in Fiscal Year 2007 (for most hospitals 7/1/2006 through 6/30/2007).

Within the geographic area covered in this report, hospitals received, on average, \$.41 in NPR for every dollar charged. Broken down even further, hospitals within Northcentral Pennsylvania received, on average, \$.35 in NPR for every dollar charged, Southcentral Pennsylvania hospitals received an average of \$.47 on the dollar, and hospitals in Northeastern Pennsylvania received an average of \$.36 on the dollar.

These regional figures are aggregate only and cannot be applied to individual hospitals or individual average charges for conditions to calculate actual payment figures. This is due to substantial variation in hospital charges



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from hospital to hospital and from insurance product line to product line. There is also substantial variation in actual payments that hospitals receive for specific services. Actual payments to hospitals are imposed by Medicare and Medicaid, or result from negotiations with insurance companies, other third-party payors, and even individual patients.

### How to use the report

- **Patients/Consumers** can use this report as an aid in making decisions about where to seek treatment for the conditions detailed in this report. As with any health care decision, PHC4 urges the reader to use this report in conjunction with a physician or other health care provider when making a health care decision.
- **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 quality health care options.
- **All of the previously mentioned groups** can use this information to raise important questions about why differences exist in the quality and efficiency of care.

This report can be used as a tool. It should not be used to generalize about the overall quality of care at a hospital, but instead to examine hospital performance in specific treatment categories. The measurement of quality is highly complex, and the information used to capture such measures is limited. A hospital death is frequently an unavoidable consequence of a patient's medical condition. Hospitals and physicians may do everything right,

and the patient can still die. However, the statistical methods used 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 in this report. 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.

### Hospitals not included

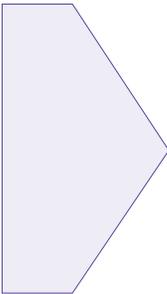
Hospitals are asked to submit timely, accurate health care data to PHC4. PHC4, acting upon the advice of its Technical Advisory Group, a panel of physicians and other health care experts, has determined that hospitals missing UB data or patient severity scores in excess of or equal to 10% of all records in the list of 35 diseases, procedures, and medical conditions that need to be abstracted are excluded from this report. These hospitals are listed below. Although hospitalization data specific to these hospitals is not shown in this report, these records have been included in the overall analysis for the measures included in this report (unless noted otherwise), and thus are reflected in the statewide and regional totals.

#### Hospitals not included

- Montrose General
- Wayne Memorial

#### Hospital with revenue data errors

- Bucktail: All records from this facility have been excluded from the charges analyses due to errors in revenue data. NA (not available) is reported for this facility under the charges columns of the report.



## Code-Based Diagnosis Descriptions

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**Abnormal Heartbeat:** Abnormal heart rate or rhythm including tachycardia, bradycardia, fibrillation, flutter and heart block. Does not include heart attack, congenital heart defects, or heart valve disorders.

**Blood Clot in Extremities:** Inflammation of a blood vessel with the formation of a thrombus (blood clot) in a deep or superficial vein involving the legs, arms, and other parts of the body. Includes deep vein thrombosis (DVT).

**Blood Clot in Lung:** The formation of a thrombus (blood clot) and/or infarction (damage or death) of the lung tissue. Often called pulmonary embolism or pulmonary infarct.

**Chronic Obstructive Pulmonary Disease (COPD):** Chronic lung disease where breathing is difficult due to airway narrowing, excess mucus production or inflammation. It is caused most frequently by bronchitis, asthma, or emphysema.

**Congestive Heart Failure (CHF):** Heart failure occurs when the heart loses its ability to pump enough blood through the body. Heart failure usually worsens over time as the heart gradually loses its pumping ability and works less efficiently, resulting in high blood pressure and fluid collection in the lungs.

**Diabetes with Amputation:** Includes patients who have diabetes and undergo an amputation of the arm, leg, or toe.

**Diabetes – Medical Management:** Includes patients hospitalized for control of blood sugar. Conditions include coma, high blood sugar crisis, and fluid imbalances. Kidney, eye, nerve, or blood vessel damage related to diabetes are included.

**Heart Attack – Medical Management:** A heart attack (myocardial infarction) occurs when there is blockage or obstruction in the blood vessels that supply oxygen to the heart muscle causing an infarction (damage or death) to an area of the heart. Included are heart attack patients who were treated without a balloon (angioplasty) procedure or open heart surgery.

**Intestinal Obstruction:** Partial or complete blockage of the intestine often caused by scar tissue, tumors, twisting and kinking, or decreased blood supply that prevents the contents in the intestine from passing beyond the blockage.

**Kidney Failure – Acute:** A sudden and rapid loss of kidney function resulting in a build-up of waste products that are normally removed from the body through urine. Because

these waste products are toxic, acute kidney failure can be life-threatening. Acute kidney failure may be caused by trauma, surgery, dehydration, medication or other conditions.

**Kidney and Urinary Tract Infections:** Acute and chronic infections of the kidney and urinary tract. Does not include urinary stone or urinary symptoms, such as frequency, bleeding, or pain.

**Pneumonia – Aspiration:** Inflammation of the lungs and bronchial tubes caused by inhaling foreign material, such as food, drink, vomit, or secretions from the mouth into the lungs. Does not include infectious pneumonia.

**Pneumonia – Infectious:** Simple pneumonia (inflammation of the lung) includes viral and bacterial pneumonia, as well as pleurisy, an inflammation of the membrane surrounding the lungs.

**Respiratory Failure with Mechanical Ventilation:** Failure of the lungs to support the exchange of essential gases (oxygen and carbon dioxide), making the use of mechanical ventilation necessary. A mechanical ventilator (“breathing machine”) delivers oxygen through a tube placed in the mouth or nose into the trachea (windpipe). The breathing machine can be set to help or completely control breathing.

**Respiratory Failure without Mechanical Ventilation:** Inability of the lungs to support the exchange of essential gases (oxygen and carbon dioxide) without the need for mechanical ventilation.

**Stomach and Intestinal Bleeding:** Bleeding from ulcers or areas of inflammation in the stomach, small or large intestine, rectum, or esophagus (muscular tube that connects the mouth to the stomach).

**Septicemia:** Also known as blood poisoning, is a systemic infection of the patient’s blood. Does not include post-operative or post-injury infections.

**Stroke – Hemorrhagic:** Stroke is a cardiovascular disease that affects the blood vessels supplying blood to the brain. In hemorrhagic strokes, a blood vessel in the brain breaks or ruptures and causes bleeding (hemorrhage) within or around the brain.

**Stroke – Non-hemorrhagic:** In ischemic (non-hemorrhagic) strokes, a blood clot blocks a blood vessel in the brain or an artery leading to the brain. This is the most common type of stroke. Transient ischemic attack (temporary stroke symptoms) is not included.

## Code-Based Procedure Descriptions

**Abdominal Aortic Aneurysm Repair – Endovascular (EVAR):** An abdominal aortic aneurysm (AAA) is a bulging or weakened area of the aorta (the aorta is the main blood vessel coming from the heart that supplies blood to all organs) in the abdomen. This procedure repairs the aneurysm in a minimally invasive manner. A covered stent (mesh tube) or 'endograft' is inserted through small incisions in the groin and advanced through the blood vessels to the weakened or bulging area of the abdominal aorta using X-rays to guide the placement. This endograft reinforces the weakened area of the aorta and prevents rupture of the aneurysm.

**Abdominal Aortic Aneurysm Repair – Open:** An abdominal aortic aneurysm (AAA) is a bulging or weakened area of the aorta (the aorta is the main blood vessel coming from the heart that supplies blood to all organs) in the abdomen. This 'open' procedure is performed through an incision in the abdomen. A synthetic graft is sutured (sewn) into the aorta to replace the weakened section.

**Colorectal Procedures:** The majority of colorectal procedures are performed in relation to the presence of cancer or diverticulitis (inflammation of part of the lower digestive tract). Does not include patients with abdominal trauma.

**Gallbladder Removal – Laparoscopic:** Cholecystectomy is the operation for removal of the gallbladder. Included are patients who underwent this type of surgery carried out with a laparoscope (microscopic camera) through 3 or 4 small incisions.

**Gallbladder Removal – Open:** Traditional gallbladder removal surgery that is carried out through an incision in the right side of the upper abdomen.

**Heart Attack – Angioplasty/Stent:** Treatment (called percutaneous transluminal coronary angioplasty or PTCA) of a heart attack using special balloons to open up obstructed arteries and increase blood flow to the heart. Often, a

stent (a mesh tube) is inserted in the blocked or narrowed artery to open it wider and prevent re-narrowing or recurring blockage. Does not include coronary artery bypass graft surgery (CABG).

**Hip Fracture – Surgical Repair:** Fracture ("broken bone") of the hip involves the top portion of the femur (thigh bone). Surgical repair includes inserting a pin, rod or screw into the bone to hold the fracture together for healing or may also include a partial or total hip joint replacement.

**Hysterectomy – Abdominal:** An operation, performed through an abdominal incision, to remove the uterus (womb) and sometimes the ovaries and fallopian tubes. This type of surgery is performed when vaginal or laparoscopic approaches are deemed inappropriate for a variety of conditions, including female cancers, uterine fibroids, endometriosis, pelvic trauma, and uterine or vaginal prolapse.

**Hysterectomy – Vaginal:** Includes hysterectomy through a vaginal approach and those laparoscopically (use of microscopic camera) assisted. Includes hysterectomy performed for a variety of conditions such as female cancers, pelvic trauma, uterine fibroids, and endometriosis.

**Prostatectomy – Radical:** Radical prostatectomy is the surgical removal of the entire prostate. This type of surgery is usually performed when localized cancer is present.

**Prostatectomy – Transurethral:** This type of surgery involves the surgical removal of part of the prostate gland and is usually done to relieve urinary symptoms caused by benign (non-cancerous) enlargement of the prostate.

**Removal of Blockage of Neck Vessels:** This procedure, also known as a carotid endarterectomy, is performed to prevent strokes. It involves removal of blockages, complete or partial, in the two arteries (carotid arteries) that supply the brain with blood and oxygen.

**Information about additional treatment and surgical categories is posted on the Web site at [www.phc4.org](http://www.phc4.org)**

## Abnormal Heartbeat

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Barnes Kasson County	18	⊖	3.0	0.0	⊖	0.0	⊖	⊖	\$10,107	
Berwick	119	⊖	2.6	6.7	⊖	1.7	⊖	⊖	\$21,965	
Bloomsburg	41	⊖	2.5	5.0	⊖	2.5	⊖	⊖	\$16,264	
Bucktail	0	NR	NR	NR	NR	NR	NR	NR	NA	
Carlisle Regional	146	⊖	3.4	5.6	⊖	5.6	⊖	⊖	\$25,040	
Chambersburg	341	⊖	3.2	4.4	⊖	3.8	⊖	⊖	\$18,650	
Community/Scranton	268	⊖	3.3	3.7	⊖	6.0	⊖	⊖	\$18,042	
Ephrata Community	198	⊖	3.0	8.6	●	2.5	⊖	⊖	\$18,365	
Evangelical Community	181	⊖	2.7	9.5	●	1.1	⊖	⊖	\$9,458	
Fulton County	18	⊖	3.5	5.6	⊖	5.6	⊖	⊖	\$14,493	
Geisinger Wilkes-Barre	190	⊖	4.0	5.8	⊖	8.5	●	⊖	\$25,572	
Geisinger Wyoming Valley	228	⊖	3.1	5.3	⊖	2.7	⊖	⊖	\$27,828	
Geisinger/Danville	341	⊖	2.7	10.0	●	0.9	⊖	⊖	\$19,900	
Gettysburg	61	⊖	3.3	3.3	⊖	1.6	⊖	⊖	\$13,850	
Good Samaritan/Lebanon	312	⊖	3.0	9.2	●	3.9	⊖	⊖	\$17,592	
Hanover	144	⊖	2.7	4.9	⊖	2.1	⊖	⊖	\$10,302	
Hazleton General	159	●	3.9	6.5	⊖	9.1	●	⊖	\$22,816	
Heart of Lancaster	52	⊖	3.5	3.8	⊖	7.7	⊖	⊖	\$25,416	
Holy Spirit	456	⊖	3.2	4.0	⊖	4.2	⊖	⊖	\$15,567	
J C Blair Memorial	64	⊖	3.4	4.7	⊖	1.6	⊖	⊖	\$9,975	
Jersey Shore	39	⊖	3.0	2.6	⊖	2.6	⊖	⊖	\$10,113	
Lancaster General	1,207	⊖	3.9	4.6	⊖	8.6	●	⊖	\$21,298	
Lancaster Regional	88	⊖	3.7	1.2	⊖	7.0	⊖	⊖	\$24,460	
Lewistown	144	⊖	2.6	6.9	⊖	0.7	⊖	⊖	\$10,782	

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

# Abnormal Heartbeat

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Lock Haven	47	⊖	1.8	10.6	⊖	0.0	⊖	⊖	\$15,276	
Marian Community	70	⊖	3.0	10.1	⊖	4.3	⊖	⊖	\$11,521	
Memorial York	112	⊖	3.0	5.4	⊖	5.4	⊖	⊖	\$16,275	
Memorial/Towanda	20	⊖	4.2	0.0	⊖	20.0	●	⊖	\$19,706	
Mercy/Scranton	382	⊖	3.0	5.5	⊖	2.9	⊖	⊖	\$21,852	
Mid-Valley	46	⊖	2.6	6.5	⊖	0.0	⊖	⊖	\$13,075	
Milton S Hershey	317	⊖	3.1	3.9	⊖	6.4	⊖	●	\$14,189	
Moses Taylor	162	⊖	3.9	1.9	⊖	7.5	⊖	⊖	\$18,642	
Mount Nittany	213	⊖	3.0	5.2	⊖	4.3	⊖	⊖	\$13,715	
Muncy Valley	24	⊖	2.4	0.0	⊖	0.0	⊖	⊖	\$9,474	
Pinnacle Health	602	⊖	3.4	3.7	⊖	3.4	⊖	⊖	\$19,242	
Pocono	356	⊖	2.8	6.2	⊖	2.3	○	⊖	\$19,278	
Robert Packer	523	⊖	2.6	4.0	⊖	0.8	○	⊖	\$13,058	
Shamokin Area Community	84	⊖	3.2	4.8	⊖	1.2	⊖	⊖	\$7,518	
Soldiers & Sailors	54	⊖	2.8	5.7	⊖	0.0	⊖	⊖	\$12,466	
Sunbury Community	79	⊖	2.5	2.5	⊖	0.0	○	●	\$14,140	
Troy Community	8	⊖	2.2	28.6	●	0.0	⊖	⊖	\$6,418	
Tyler Memorial	40	⊖	2.8	2.5	⊖	2.5	⊖	⊖	\$16,085	
Waynesboro	78	⊖	2.9	5.1	⊖	5.1	⊖	⊖	\$17,117	
Williamsport	261	⊖	2.6	8.6	●	0.4	○	⊖	\$16,169	
WVHCS	462	⊖	3.9	4.6	⊖	9.4	●	⊖	\$19,066	
York	497	⊖	3.3	5.1	⊖	2.0	○	⊖	\$13,192	
<b>Central &amp; Northeastern</b>	<b>9,364</b>		<b>3.2</b>	<b>5.4</b>		<b>4.3</b>			<b>\$17,938</b>	
<b>TOTAL: Statewide</b>	<b>39,330</b>		<b>3.3</b>	<b>5.0</b>		<b>5.0</b>			<b>\$27,634</b>	

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Blood Clot in Extremities

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Barnes Kasson County	6	⊖	2.4	16.7	⊖	0.0	⊖	\$6,462
Berwick	14	⊖	4.6	0.0	⊖	0.0	⊖	\$13,529
Bloomsburg	7	⊖	3.4	0.0	⊖	0.0	⊖	\$10,824
Bucktail	0	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	29	⊖	4.2	0.0	⊖	0.0	⊖	\$10,359
Chambersburg	61	⊖	3.4	13.1	●	1.6	⊖	\$8,098
Community/Scranton	58	⊖	5.0	3.5	⊖	5.3	⊖	\$11,554
Ephrata Community	30	⊖	3.4	6.9	⊖	0.0	⊖	\$9,447
Evangelical Community	11	⊖	3.9	27.3	●	9.1	⊖	\$7,544
Fulton County	8	⊖	5.2	0.0	⊖	12.5	⊖	\$10,935
Geisinger Wilkes-Barre	39	⊖	4.1	7.7	⊖	7.7	⊖	\$12,168
Geisinger Wyoming Valley	20	⊖	3.6	5.3	⊖	5.3	⊖	\$13,087
Geisinger/Danville	16	⊖	2.8	37.5	●	0.0	⊖	\$12,719
Gettysburg	25	⊖	4.5	4.0	⊖	0.0	⊖	\$8,133
Good Samaritan/Lebanon	41	⊖	4.1	0.0	⊖	2.4	⊖	\$11,903
Hanover	31	⊖	3.6	3.2	⊖	0.0	⊖	\$6,745
Hazleton General	67	⊖	3.7	6.0	⊖	1.5	⊖	\$9,673
Heart of Lancaster	14	⊖	4.3	0.0	⊖	7.1	⊖	\$8,940
Holy Spirit	61	⊖	3.8	5.0	⊖	0.0	⊖	\$8,621
J C Blair Memorial	7	⊖	4.8	0.0	⊖	0.0	⊖	\$5,567
Jersey Shore	9	⊖	4.1	0.0	⊖	0.0	⊖	\$4,432
Lancaster General	99	⊖	4.5	1.0	⊖	6.1	⊖	\$11,106
Lancaster Regional	15	⊖	3.9	0.0	⊖	7.1	⊖	\$11,534
Lewistown	47	⊖	3.7	4.3	⊖	0.0	⊖	\$6,385

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Blood Clot in Extremities

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Lock Haven	10	⊖	3.6	10.0	⊖	0.0	⊖	\$10,250
Marian Community	15	⊖	5.1	13.3	⊖	6.7	⊖	\$9,198
Memorial York	42	⊖	3.4	9.5	⊖	2.4	⊖	\$7,289
Memorial/Towanda	2	NR	NR	NR	NR	NR	NR	NR
Mercy/Scranton	72	⊖	4.1	4.2	⊖	0.0	⊖	\$11,427
Mid-Valley	14	⊖	3.3	0.0	⊖	0.0	⊖	\$6,903
Milton S Hershey	37	⊖	5.2	5.4	⊖	13.5	●	\$11,431
Moses Taylor	55	⊖	5.1	1.8	⊖	7.3	⊖	\$11,289
Mount Nittany	46	⊖	4.7	6.5	⊖	13.0	●	\$11,776
Muncy Valley	5	⊖	4.4	0.0	⊖	0.0	⊖	NR
Pinnacle Health	84	⊖	3.6	6.1	⊖	3.7	⊖	\$10,730
Pocono	60	⊖	3.8	5.1	⊖	3.4	⊖	\$12,500
Robert Packer	14	⊖	4.4	0.0	⊖	0.0	⊖	\$10,977
Shamokin Area Community	61	⊖	4.1	1.6	⊖	0.0	⊖	\$6,075
Soldiers & Sailors	16	⊖	4.3	0.0	⊖	0.0	⊖	\$9,403
Sunbury Community	2	NR	NR	NR	NR	NR	NR	NR
Troy Community	4	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	18	⊖	4.4	5.6	⊖	5.6	⊖	\$10,344
Waynesboro	18	●	4.2	5.9	⊖	0.0	⊖	\$8,737
Williamsport	54	⊖	3.9	3.8	⊖	3.8	⊖	\$9,899
WVHCS	85	⊖	4.9	2.4	⊖	7.1	⊖	\$11,692
York	104	⊖	4.9	5.8	⊖	4.8	⊖	\$7,883
<b>Central &amp; Northeastern</b>	<b>1,555</b>		<b>4.2</b>	<b>4.9</b>		<b>3.7</b>		<b>\$9,929</b>
<b>TOTAL: Statewide</b>	<b>7,324</b>		<b>4.3</b>	<b>5.0</b>		<b>5.0</b>		<b>\$16,725</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊕ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Blood Clot in Lung

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Barnes Kasson County	0	NR	NR	NR	NR	NR	NR	NR
Berwick	9	⊙	6.6	0.0	⊙	0.0	⊙	\$21,920
Bloomsburg	29	⊙	3.8	3.4	⊙	0.0	⊙	\$17,510
Bucktail	0	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	29	⊙	5.0	7.1	⊙	3.6	⊙	\$16,509
Chambersburg	58	●	4.6	11.1	⊙	1.9	⊙	\$15,372
Community/Scranton	27	⊙	4.9	3.7	⊙	0.0	⊙	\$20,246
Ephrata Community	45	⊙	4.7	6.7	⊙	0.0	⊙	\$18,306
Evangelical Community	62	⊙	4.1	8.2	⊙	0.0	⊙	\$8,210
Fulton County	7	⊙	5.4	0.0	⊙	0.0	⊙	\$15,120
Geisinger Wilkes-Barre	14	⊙	6.3	0.0	⊙	7.1	⊙	\$22,703
Geisinger Wyoming Valley	48	⊙	5.4	10.9	⊙	4.3	⊙	\$25,784
Geisinger/Danville	117	⊙	3.5	21.2	●	0.0	○	\$25,607
Gettysburg	43	⊙	5.3	7.1	⊙	0.0	⊙	\$13,229
Good Samaritan/Lebanon	62	⊙	5.2	4.9	⊙	3.3	⊙	\$20,512
Hanover	35	⊙	5.6	5.7	⊙	5.7	⊙	\$12,077
Hazleton General	28	⊙	5.5	0.0	⊙	7.4	⊙	\$24,438
Heart of Lancaster	15	⊙	4.6	7.7	⊙	15.4	⊙	\$18,455
Holy Spirit	109	⊙	5.5	3.7	⊙	3.7	⊙	\$17,145
J C Blair Memorial	13	⊙	4.8	15.4	⊙	0.0	⊙	\$8,732
Jersey Shore	13	⊙	4.1	7.7	⊙	0.0	⊙	\$8,213
Lancaster General	183	⊙	5.6	0.5	○	3.3	⊙	\$17,478
Lancaster Regional	21	⊙	5.6	0.0	⊙	4.8	⊙	\$20,599
Lewistown	38	⊙	4.6	10.5	⊙	2.6	⊙	\$11,187

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Blood Clot in Lung

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Lock Haven	10	⊖	3.8	0.0	⊖	0.0	⊖	\$15,504
Marian Community	12	⊖	5.8	8.3	⊖	8.3	⊖	\$15,866
Memorial York	48	⊖	4.3	6.4	⊖	0.0	⊖	\$11,205
Memorial/Towanda	4	NR	NR	NR	NR	NR	NR	NR
Mercy/Scranton	27	⊖	5.7	0.0	⊖	3.7	⊖	\$20,840
Mid-Valley	5	⊖	4.2	0.0	⊖	0.0	⊖	\$13,996
Milton S Hershey	96	⊖	4.5	18.3	●	6.5	⊖	\$14,623
Moses Taylor	29	⊖	6.3	0.0	⊖	13.8	⊖	\$20,829
Mount Nittany	65	⊖	5.9	3.2	⊖	6.3	⊖	\$15,780
Muncy Valley	4	NR	NR	NR	NR	NR	NR	NR
Pinnacle Health	123	⊖	5.9	3.3	⊖	7.4	⊖	\$21,332
Pocono	34	⊖	4.3	2.9	⊖	2.9	⊖	\$19,979
Robert Packer	66	⊖	4.6	9.5	⊖	3.2	⊖	\$16,863
Shamokin Area Community	20	⊖	4.2	11.1	⊖	0.0	⊖	\$7,619
Soldiers & Sailors	5	⊖	4.6	0.0	⊖	0.0	⊖	\$10,580
Sunbury Community	13	⊖	4.3	0.0	⊖	0.0	⊖	\$16,987
Troy Community	4	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	4	NR	NR	NR	NR	NR	NR	NR
Waynesboro	35	⊖	5.2	2.9	⊖	0.0	⊖	\$16,879
Williamsport	61	⊖	4.5	6.7	⊖	0.0	⊖	\$16,974
WVHCS	48	⊖	5.7	4.2	⊖	2.1	⊖	\$19,232
York	125	⊖	6.2	3.2	⊖	8.1	⊖	\$13,645
<b>Central &amp; Northeastern</b>	<b>1,859</b>		<b>5.1</b>	<b>6.4</b>		<b>3.6</b>		<b>\$17,174</b>
<b>TOTAL: Statewide</b>	<b>6,987</b>		<b>5.4</b>	<b>5.0</b>		<b>5.0</b>		<b>\$28,207</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊕ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay %	Short Length of Stay Rating <sup>†</sup>	Long Length of Stay %	Long Length of Stay Rating <sup>†</sup>	For Any Reason	For Complication or Infection	
Barnes Kasson County	91	⊙	4.3	1.1	⊙	2.2	⊙	⊙	⊙	\$8,487
Berwick	119	⊙	4.1	5.1	⊙	0.8	⊙	⊙	⊙	\$16,290
Bloomsburg	51	⊙	3.0	5.9	⊙	0.0	⊙	⊙	⊙	\$13,444
Bucktail	9	●	3.6	0.0	⊙	0.0	⊙	⊙	⊙	NA
Carlisle Regional	129	⊙	4.1	7.9	⊙	1.6	⊙	⊙	⊙	\$14,235
Chambersburg	219	⊙	3.9	8.8	●	3.2	⊙	⊙	⊙	\$13,081
Community/Scranton	217	⊙	4.8	3.7	⊙	3.7	⊙	⊙	⊙	\$13,803
Ephrata Community	146	⊙	3.7	6.9	⊙	1.4	⊙	⊙	⊙	\$15,195
Evangelical Community	69	⊙	3.1	13.2	●	1.5	⊙	⊙	⊙	\$6,115
Fulton County	34	⊙	4.2	0.0	⊙	8.8	⊙	⊙	⊙	\$9,418
Geisinger Wilkes-Barre	137	⊙	4.9	1.5	⊙	1.5	⊙	⊙	⊙	\$15,942
Geisinger Wyoming Valley	184	⊙	4.6	3.3	⊙	2.8	⊙	⊙	⊙	\$17,261
Geisinger/Danville	104	⊙	2.9	22.3	●	1.9	⊙	⊙	⊙	\$19,714
Gettysburg	50	⊙	4.7	6.0	⊙	4.0	⊙	⊙	⊙	\$12,569
Good Samaritan/Lebanon	242	⊙	4.1	10.0	●	4.2	⊙	⊙	⊙	\$14,931
Hanover	90	⊙	4.1	6.8	⊙	1.1	⊙	⊙	⊙	\$9,348
Hazleton General	168	⊙	4.8	1.8	⊙	5.4	⊙	⊙	⊙	\$18,203
Heart of Lancaster	32	⊙	4.3	6.3	⊙	3.1	⊙	⊙	⊙	\$15,195
Holy Spirit	186	⊙	4.5	3.8	⊙	7.7	⊙	⊙	⊙	\$16,740
J C Blair Memorial	45	⊙	4.8	2.2	⊙	6.7	⊙	⊙	⊙	\$8,454
Jersey Shore	66	⊙	4.8	1.6	⊙	6.3	⊙	⊙	⊙	\$8,879
Lancaster General	412	⊙	5.2	4.0	⊙	11.6	●	⊙	⊙	\$17,697
Lancaster Regional	92	⊙	5.3	5.4	⊙	8.7	⊙	⊙	⊙	\$19,375
Lewistown	244	⊙	3.8	5.0	⊙	3.8	⊙	⊙	⊙	\$8,748

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

# Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay	Long Length of Stay	For Any Reason	For Complication or Infection			
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Lock Haven	79	⊙	3.2	7.6	⊙	0.0	○	⊙	⊙	\$12,655
Marian Community	88	⊙	4.4	1.2	⊙	1.2	⊙	⊙	⊙	\$9,312
Memorial York	137	⊙	3.9	2.2	⊙	2.2	⊙	⊙	⊙	\$9,296
Memorial/Towanda	56	⊙	4.2	3.6	⊙	1.8	⊙	⊙	⊙	\$14,087
Mercy/Scranton	139	⊙	4.5	2.9	⊙	4.3	⊙	⊙	●	\$14,414
Mid-Valley	23	⊙	4.2	13.0	⊙	4.3	⊙	⊙	⊙	\$11,497
Milton S Hershey	81	⊙	4.1	5.0	⊙	5.0	⊙	⊙	⊙	\$13,696
Moses Taylor	159	⊙	5.1	3.1	⊙	8.2	⊙	⊙	⊙	\$11,011
Mount Nittany	170	⊙	5.6	1.8	⊙	8.3	⊙	⊙	⊙	\$15,833
Muncy Valley	13	⊙	3.6	0.0	⊙	0.0	⊙	⊙	⊙	\$6,510
Pinnacle Health	270	⊙	4.5	3.7	⊙	6.3	⊙	⊙	⊙	\$17,770
Pocono	273	⊙	4.0	7.4	⊙	4.8	⊙	⊙	⊙	\$15,349
Robert Packer	125	⊙	4.2	3.3	⊙	4.9	⊙	○	⊙	\$13,608
Shamokin Area Community	121	⊙	4.4	0.0	○	0.8	○	●	●	\$7,091
Soldiers & Sailors	112	⊙	3.6	5.4	⊙	0.9	○	⊙	⊙	\$9,258
Sunbury Community	76	⊙	3.8	5.4	⊙	0.0	○	⊙	⊙	\$12,496
Troy Community	29	⊙	2.9	25.0	●	0.0	⊙	⊙	⊙	\$5,319
Tyler Memorial	84	⊙	4.6	0.0	○	3.6	⊙	⊙	⊙	\$9,981
Waynesboro	103	⊙	4.5	2.9	⊙	4.9	⊙	⊙	⊙	\$14,271
Williamsport	121	⊙	3.9	7.4	⊙	1.7	⊙	⊙	⊙	\$13,196
WVHCS	296	●	5.4	2.8	⊙	6.6	⊙	⊙	⊙	\$17,030
York	292	⊙	3.8	12.1	●	3.5	⊙	○	⊙	\$9,469
<b>Central &amp; Northeastern</b>	<b>6,114</b>		<b>4.4</b>	<b>5.3</b>		<b>4.4</b>				<b>\$13,653</b>
<b>TOTAL: Statewide</b>	<b>27,715</b>		<b>4.5</b>	<b>5.0</b>		<b>5.0</b>				<b>\$21,410</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Congestive Heart Failure (CHF)

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay %	Short Length of Stay Rating <sup>†</sup>	Long Length of Stay %	Long Length of Stay Rating <sup>†</sup>	For Any Reason	For Complication or Infection	
Barnes Kasson County	64	⊙	4.7	1.6	⊙	0.0	⊙	⊙	⊙	\$9,091
Berwick	153	⊙	4.8	2.0	⊙	2.0	⊙	⊙	⊙	\$19,796
Bloomsburg	97	⊙	3.5	5.4	⊙	0.0	⊙	⊙	⊙	\$15,056
Bucktail	4	NR	NR	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	197	⊙	4.7	2.7	⊙	4.8	⊙	⊙	⊙	\$18,170
Chambersburg	370	⊙	4.4	9.5	●	3.6	⊙	⊙	⊙	\$17,837
Community/Scranton	302	⊙	5.6	6.5	⊙	8.2	●	⊙	⊙	\$17,043
Ephrata Community	206	⊙	4.1	9.8	●	2.5	⊙	⊙	⊙	\$18,479
Evangelical Community	162	⊙	3.5	14.0	●	1.3	⊙	⊙	⊙	\$8,749
Fulton County	55	●	5.7	1.9	⊙	3.8	⊙	⊙	⊙	\$13,162
Geisinger Wilkes-Barre	254	⊙	5.4	4.5	⊙	3.2	⊙	⊙	⊙	\$20,869
Geisinger Wyoming Valley	259	⊙	5.3	7.5	⊙	9.1	●	⊙	⊙	\$22,198
Geisinger/Danville	425	⊙	3.7	13.7	●	1.5	⊙	⊙	⊙	\$20,313
Gettysburg	142	⊙	4.5	5.7	⊙	2.9	⊙	⊙	⊙	\$11,899
Good Samaritan/Lebanon	341	⊙	4.7	4.9	⊙	2.7	⊙	⊙	⊙	\$15,648
Hanover	211	⊙	4.5	4.4	⊙	2.0	⊙	⊙	⊙	\$10,116
Hazleton General	277	⊙	4.9	4.2	⊙	4.2	⊙	●	●	\$20,239
Heart of Lancaster	65	⊙	4.9	8.2	⊙	8.2	⊙	⊙	⊙	\$17,480
Holy Spirit	494	●	4.8	3.8	⊙	3.2	⊙	⊙	⊙	\$16,464
J C Blair Memorial	91	⊙	5.5	4.5	⊙	4.5	⊙	⊙	⊙	\$9,672
Jersey Shore	92	⊙	4.4	1.1	⊙	1.1	⊙	⊙	⊙	\$9,263
Lancaster General	749	⊙	5.5	4.7	⊙	6.7	●	⊙	⊙	\$19,014
Lancaster Regional	124	⊙	5.9	0.8	⊙	4.1	⊙	⊙	⊙	\$19,824
Lewistown	312	⊙	4.0	5.7	⊙	2.7	⊙	⊙	⊙	\$9,507

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Congestive Heart Failure (CHF)

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay	Long Length of Stay	For Any Reason	For Complication or Infection			
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Lock Haven	117	⊙	3.6	4.3	⊙	0.0	○	⊙	⊙	\$15,933
Marian Community	129	⊙	5.1	3.1	⊙	3.9	⊙	⊙	⊙	\$11,452
Memorial York	257	⊙	4.6	5.2	⊙	3.6	⊙	⊙	⊙	\$12,419
Memorial/Towanda	67	⊙	4.9	1.5	⊙	3.0	⊙	⊙	⊙	\$14,401
Mercy/Scranton	495	⊙	4.9	6.0	⊙	3.1	○	○	⊙	\$16,691
Mid-Valley	46	⊙	3.7	2.2	⊙	0.0	⊙	⊙	⊙	\$10,124
Milton S Hershey	431	⊙	5.2	4.8	⊙	6.7	⊙	⊙	⊙	\$14,875
Moses Taylor	300	⊙	5.4	3.4	⊙	4.8	⊙	⊙	⊙	\$13,234
Mount Nittany	303	●	5.9	4.9	⊙	10.5	●	⊙	⊙	\$16,171
Muncy Valley	48	⊙	4.7	0.0	⊙	2.1	⊙	⊙	⊙	\$9,655
Pinnacle Health	762	●	5.0	7.4	●	6.3	⊙	⊙	⊙	\$19,087
Pocono	409	⊙	4.3	7.0	⊙	3.5	⊙	⊙	⊙	\$18,443
Robert Packer	295	⊙	3.7	11.2	●	2.8	⊙	⊙	⊙	\$12,581
Shamokin Area Community	218	●	4.9	0.0	○	0.5	○	⊙	⊙	\$6,951
Soldiers & Sailors	136	⊙	4.2	3.1	⊙	0.8	○	⊙	⊙	\$10,769
Sunbury Community	161	⊙	4.0	1.9	⊙	0.0	○	⊙	⊙	\$14,533
Troy Community	40	⊙	3.2	12.5	●	0.0	⊙	⊙	⊙	\$5,501
Tyler Memorial	87	⊙	4.9	4.7	⊙	5.9	⊙	⊙	⊙	\$13,574
Waynesboro	138	⊙	4.4	8.3	⊙	2.3	⊙	⊙	⊙	\$16,777
Williamsport	248	⊙	4.0	14.5	●	1.7	○	○	⊙	\$14,943
WVHCS	538	⊙	5.5	5.1	⊙	7.2	●	○	○	\$17,611
York	812	⊙	4.6	6.8	●	4.3	⊙	○	⊙	\$11,871
<b>Central &amp; Northeastern</b>	<b>11,595</b>		<b>4.8</b>	<b>6.0</b>		<b>4.2</b>				<b>\$15,729</b>
<b>TOTAL: Statewide</b>	<b>51,898</b>		<b>5.0</b>	<b>5.0</b>		<b>5.0</b>				<b>\$25,808</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Diabetes with Amputation

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Barnes Kasson County	0	NR	NR	NR	NR	NR
Berwick	10	⊖	12.0	⊖	⊖	\$57,329
Bloomsburg	2	NR	NR	NR	NR	NR
Bucktail	0	NR	NR	NR	NR	NA
Carlisle Regional	15	⊖	10.3	⊖	⊖	\$47,298
Chambersburg	26	⊖	10.6	⊖	⊖	\$28,778
Community/Scranton	27	⊖	9.5	⊖	⊖	\$37,311
Ephrata Community	14	⊖	8.6	⊖	⊖	\$31,108
Evangelical Community	18	⊖	6.2	⊖	⊖	\$18,025
Fulton County	0	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	16	⊖	10.6	⊖	⊖	\$39,177
Geisinger Wyoming Valley	6	⊖	NR	NR	NR	NR
Geisinger/Danville	24	⊖	5.4	⊖	⊖	\$39,812
Gettysburg	6	⊖	9.9	⊖	⊖	\$28,949
Good Samaritan/Lebanon	8	⊖	11.7	⊖	⊖	\$58,064
Hanover	3	NR	NR	NR	NR	NR
Hazleton General	15	⊖	9.0	⊖	⊖	\$32,501
Heart of Lancaster	1	NR	NR	NR	NR	NR
Holy Spirit	17	⊖	8.1	⊖	⊖	\$25,731
J C Blair Memorial	2	NR	NR	NR	NR	NR
Jersey Shore	1	NR	NR	NR	NR	NR
Lancaster General	45	⊖	9.9	⊖	⊖	\$44,500
Lancaster Regional	5	●	NR	NR	NR	NR
Lewistown	4	NR	NR	NR	NR	NR

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊕ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

## Diabetes with Amputation

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Lock Haven	0	NR	NR	NR	NR	NR
Marian Community	5	⊙	4.2	⊙	⊙	\$11,338
Memorial York	7	⊙	8.2	⊙	⊙	\$26,155
Memorial/Towanda	0	NR	NR	NR	NR	NR
Mercy/Scranton	12	⊙	6.6	⊙	⊙	\$27,623
Mid-Valley	0	NR	NR	NR	NR	NR
Milton S Hershey	25	⊙	12.1	⊙	⊙	\$42,641
Moses Taylor	11	⊙	8.0	⊙	⊙	\$27,499
Mount Nittany	1	NR	NR	NR	NR	NR
Muncy Valley	2	NR	NR	NR	NR	NR
Pinnacle Health	25	⊙	10.1	⊙	⊙	\$34,549
Pocono	17	⊙	10.6	⊙	⊙	\$35,512
Robert Packer	17	⊙	8.1	⊙	⊙	\$27,587
Shamokin Area Community	5	⊙	6.5	●	⊙	NR
Soldiers & Sailors	1	NR	NR	NR	NR	NR
Sunbury Community	2	NR	NR	NR	NR	NR
Troy Community	1	NR	NR	NR	NR	NR
Tyler Memorial	2	NR	NR	NR	NR	NR
Waynesboro	8	⊙	7.4	⊙	⊙	\$18,669
Williamsport	14	⊙	9.2	⊙	⊙	\$35,488
WVHCS	29	⊙	11.4	⊙	⊙	\$28,654
York	44	⊙	8.9	⊙	⊙	\$19,398
<b>Central &amp; Northeastern</b>	<b>494</b>		<b>9.3</b>			<b>\$33,058</b>
<b>TOTAL: Statewide</b>	<b>2,138</b>		<b>9.8</b>			<b>\$62,963</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Diabetes - Medical Management

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay %	Short Length of Stay Rating <sup>†</sup>	Long Length of Stay %	Long Length of Stay Rating <sup>†</sup>	For Any Reason	For Complication or Infection	
Barnes Kasson County	20	⊙	3.9	0.0	⊙	0.0	⊙	⊙	⊙	\$6,809
Berwick	65	⊙	3.7	3.1	⊙	3.1	⊙	⊙	⊙	\$13,403
Bloomsburg	23	⊙	3.1	8.7	⊙	0.0	⊙	⊙	⊙	\$12,087
Bucktail	3	NR	NR	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	82	⊙	3.0	3.7	⊙	1.2	⊙	⊙	⊙	\$10,973
Chambersburg	149	⊙	3.7	1.3	⊙	3.4	⊙	⊙	⊙	\$11,122
Community/Scranton	88	⊙	3.9	9.3	⊙	7.0	⊙	⊙	⊙	\$11,945
Ephrata Community	127	⊙	3.5	8.7	⊙	2.4	⊙	⊙	⊙	\$14,028
Evangelical Community	55	⊙	3.0	9.1	⊙	0.0	⊙	⊙	⊙	\$5,908
Fulton County	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	101	⊙	3.9	7.1	⊙	3.0	⊙	⊙	⊙	\$14,833
Geisinger Wyoming Valley	92	⊙	4.4	5.4	⊙	13.0	●	⊙	⊙	\$17,810
Geisinger/Danville	93	⊙	3.1	20.4	●	4.3	⊙	⊙	⊙	\$19,883
Gettysburg	36	⊙	3.2	5.6	⊙	2.8	⊙	⊙	⊙	\$8,526
Good Samaritan/Lebanon	111	⊙	3.5	4.5	⊙	5.4	⊙	●	⊙	\$11,322
Hanover	58	⊙	2.9	3.4	⊙	1.7	⊙	⊙	⊙	\$7,306
Hazleton General	81	●	3.7	0.0	⊙	3.8	⊙	⊙	⊙	\$13,368
Heart of Lancaster	27	⊙	3.7	3.7	⊙	7.4	⊙	●	⊙	\$12,890
Holy Spirit	116	⊙	3.7	2.6	⊙	2.6	⊙	⊙	⊙	\$11,958
J C Blair Memorial	25	⊙	4.3	0.0	⊙	4.2	⊙	⊙	⊙	\$8,596
Jersey Shore	17	⊙	3.1	5.9	⊙	5.9	⊙	⊙	⊙	\$7,283
Lancaster General	266	⊙	4.2	2.7	⊙	6.1	⊙	⊙	⊙	\$14,050
Lancaster Regional	61	⊙	4.2	11.5	●	6.6	⊙	⊙	⊙	\$13,473
Lewistown	93	⊙	3.8	2.2	⊙	4.3	⊙	⊙	⊙	\$8,069

- Significantly higher than expected.
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- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Diabetes - Medical Management

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay %	Short Length of Stay Rating <sup>†</sup>	Long Length of Stay %	Long Length of Stay Rating <sup>†</sup>	For Any Reason	For Complication or Infection	
Lock Haven	13	⊙	2.6	7.7	⊙	0.0	⊙	⊙	⊙	\$10,124
Marian Community	46	⊙	3.7	6.7	⊙	4.4	⊙	⊙	⊙	\$8,511
Memorial York	58	⊙	3.5	0.0	⊙	3.4	⊙	⊙	⊙	\$11,230
Memorial/Towanda	18	⊙	3.0	0.0	⊙	0.0	⊙	⊙	⊙	\$8,865
Mercy/Scranton	98	⊙	4.0	8.2	⊙	5.1	⊙	⊙	⊙	\$14,167
Mid-Valley	9	⊙	3.5	0.0	⊙	0.0	⊙	⊙	⊙	\$9,644
Milton S Hershey	97	●	4.2	3.2	⊙	6.3	⊙	⊙	⊙	\$12,380
Moses Taylor	90	⊙	4.0	2.2	⊙	3.3	⊙	⊙	⊙	\$10,991
Mount Nittany	78	⊙	4.4	3.9	⊙	9.1	⊙	⊙	⊙	\$12,345
Muncy Valley	11	⊙	3.6	9.1	⊙	9.1	⊙	⊙	⊙	\$6,746
Pinnacle Health	272	⊙	3.8	4.1	⊙	4.1	⊙	⊙	⊙	\$13,859
Pocono	137	⊙	3.7	7.3	⊙	4.4	⊙	⊙	⊙	\$15,639
Robert Packer	59	⊙	3.2	17.2	●	1.7	⊙	⊙	●	\$12,214
Shamokin Area Community	34	⊙	3.7	2.9	⊙	0.0	⊙	⊙	⊙	\$5,542
Soldiers & Sailors	27	⊙	2.9	0.0	⊙	0.0	⊙	⊙	⊙	\$5,645
Sunbury Community	22	⊙	2.3	9.1	⊙	4.5	⊙	⊙	⊙	\$7,519
Troy Community	13	⊙	3.7	0.0	⊙	0.0	⊙	⊙	⊙	\$6,518
Tyler Memorial	24	⊙	3.3	0.0	⊙	4.2	⊙	⊙	⊙	\$9,924
Waynesboro	41	⊙	3.7	2.4	⊙	0.0	⊙	⊙	⊙	\$9,369
Williamsport	120	⊙	3.7	5.9	⊙	2.5	⊙	⊙	⊙	\$12,093
WVHCS	201	⊙	4.6	4.0	⊙	10.6	●	⊙	⊙	\$13,363
York	226	⊙	3.7	4.9	⊙	7.6	⊙	⊙	⊙	\$9,446
<b>Central &amp; Northeastern</b>	<b>3,539</b>		<b>3.8</b>	<b>5.2</b>		<b>4.8</b>				<b>\$12,170</b>
<b>TOTAL: Statewide</b>	<b>17,166</b>		<b>3.8</b>	<b>5.0</b>		<b>5.0</b>				<b>\$20,477</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Heart Attack - Medical Management

Hospital	Cases	Transfer to Acute Care %	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
					Short Length of Stay		Long Length of Stay		
					%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Barnes Kasson County	4	NR	NR	NR	NR	NR	NR	NR	NR
Berwick	32	43.4	⊙	5.5	3.4	⊙	6.9	⊙	\$30,646
Bloomsburg	22	38.7	⊙	4.7	5.3	⊙	5.3	⊙	\$19,567
Bucktail	2	NR	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	42	49.3	⊙	6.1	0.0	⊙	5.4	⊙	\$22,155
Chambersburg*	139	27.2	⊙	4.4	3.2	⊙	2.4	⊙	\$21,695
Community/Scranton*	67	9.9	⊙	5.0	6.3	⊙	1.6	⊙	\$18,513
Ephrata Community	33	68.8	⊙	3.9	13.3	⊙	0.0	⊙	\$19,082
Evangelical Community	106	27.3	⊙	3.5	7.5	⊙	0.0	⊙	\$8,362
Fulton County	5	54.5	⊙	5.6	0.0	⊙	0.0	⊙	\$13,305
Geisinger Wilkes-Barre*	120	7.8	⊙	5.4	7.5	⊙	2.8	⊙	\$27,870
Geisinger Wyoming Valley*	50	6.4	⊙	4.1	11.4	⊙	2.3	⊙	\$24,664
Geisinger/Danville*	225	0.5	⊙	4.0	8.0	⊙	1.0	⊙	\$29,299
Gettysburg	56	45.9	●	5.4	0.0	⊙	0.0	⊙	\$13,588
Good Samaritan/Lebanon*	97	3.5	⊙	5.3	2.4	⊙	4.8	⊙	\$21,545
Hanover	99	51.2	⊙	5.5	3.6	⊙	2.4	⊙	\$13,054
Hazleton General	51	51.7	⊙	6.3	4.8	⊙	7.1	⊙	\$29,376
Heart of Lancaster	5	71.4	⊙	NR	NR	NR	NR	NR	\$20,239
Holy Spirit*	134	7.6	⊙	4.8	5.8	⊙	3.3	⊙	\$19,072
J C Blair Memorial	27	56.1	⊙	5.5	0.0	⊙	0.0	⊙	\$8,338
Jersey Shore	10	40.0	⊙	4.4	11.1	⊙	0.0	⊙	\$9,216
Lancaster General*	295	1.1	⊙	5.6	3.7	⊙	6.7	⊙	\$22,842
Lancaster Regional*	26	3.8	⊙	6.3	4.0	⊙	4.0	⊙	\$26,360
Lewistown	117	34.6	⊙	4.7	2.0	⊙	1.0	⊙	\$11,554

\* 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.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

# Heart Attack - Medical Management

Hospital	Cases	Transfer to Acute Care %	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
					Short Length of Stay		Long Length of Stay		
					%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Lock Haven	23	47.5	⊖	3.6	0.0	⊖	0.0	⊖	\$17,817
Marian Community	40	39.0	⊖	5.6	2.9	⊖	8.6	⊖	\$14,061
Memorial York	45	43.1	⊖	5.9	0.0	⊖	2.4	⊖	\$17,743
Memorial/Towanda	4	NR	NR	NR	NR	NR	NR	NR	NR
Mercy/Scranton*	125	3.2	⊖	4.9	10.3	●	4.3	⊖	\$22,219
Mid-Valley	13	50.0	⊖	4.9	0.0	⊖	0.0	⊖	\$11,170
Milton S Hershey*	204	1.5	⊖	4.5	4.3	⊖	3.2	⊖	\$19,021
Moses Taylor	50	50.6	⊖	6.0	9.3	⊖	2.3	⊖	\$17,606
Mount Nittany*	63	45.3	⊖	6.4	0.0	⊖	11.5	●	\$19,598
Muncy Valley	23	22.2	⊖	3.8	9.5	⊖	0.0	⊖	\$9,241
Pinnacle Health*	263	3.7	⊖	5.8	2.5	⊖	3.4	⊖	\$25,244
Pocono*	90	31.9	⊖	6.1	4.9	⊖	7.4	⊖	\$30,023
Robert Packer*	164	1.9	⊖	4.2	10.8	●	1.9	⊖	\$17,656
Shamokin Area Community	88	29.3	⊖	5.4	1.2	⊖	3.7	⊖	\$8,768
Soldiers & Sailors	21	30.8	⊖	4.3	16.7	⊖	0.0	⊖	\$13,563
Sunbury Community	19	47.1	⊖	4.3	5.6	⊖	0.0	⊖	\$15,363
Troy Community	2	NR	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	9	65.0	⊖	6.4	0.0	⊖	14.3	⊖	\$18,954
Waynesboro	24	62.8	⊖	6.2	0.0	⊖	6.3	⊖	\$19,754
Williamsport*	113	4.6	⊖	4.5	12.5	●	1.9	⊖	\$18,747
WVHCS*	172	6.3	⊖	6.3	2.7	⊖	8.0	⊖	\$21,946
York*	259	2.9	⊖	5.4	5.6	⊖	5.6	⊖	\$16,084
<b>Central &amp; Northeastern</b>	<b>3,619</b>	<b>22.6</b>		<b>5.1</b>	<b>5.2</b>		<b>3.7</b>		<b>\$20,013</b>
<b>TOTAL: Statewide</b>	<b>12,570</b>	<b>23.4</b>		<b>5.4</b>	<b>5.0</b>		<b>5.0</b>		<b>\$32,314</b>

\* 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.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

† While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

●	Significantly higher than expected.
⊖	Not significantly different than expected.
⊕	Significantly lower than expected.
NR	Not reported. Had fewer than five cases evaluated.
NA	Not available. Not reported due to missing/incomplete data.

## Intestinal Obstruction

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Barnes Kasson County	11	⊙	4.0	0.0	⊙	0.0	⊙	\$8,069
Berwick	17	⊙	4.5	0.0	⊙	6.7	⊙	\$17,885
Bloomsburg	13	⊙	2.9	0.0	⊙	0.0	⊙	\$10,340
Bucktail	0	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	32	●	3.7	3.4	⊙	3.4	⊙	\$14,592
Chambersburg	69	⊙	5.0	1.4	⊙	5.8	⊙	\$10,664
Community/Scranton	62	⊙	4.5	4.8	⊙	9.7	⊙	\$14,187
Ephrata Community	43	⊙	3.1	9.3	⊙	2.3	⊙	\$12,192
Evangelical Community	57	⊙	4.5	0.0	⊙	3.5	⊙	\$8,102
Fulton County	10	⊙	4.4	0.0	⊙	11.1	⊙	\$9,190
Geisinger Wilkes-Barre	32	⊙	4.3	3.3	⊙	3.3	⊙	\$16,707
Geisinger Wyoming Valley	57	⊙	4.6	7.1	⊙	5.4	⊙	\$14,646
Geisinger/Danville	99	⊙	4.5	6.1	⊙	5.1	⊙	\$18,583
Gettysburg	20	⊙	3.3	0.0	⊙	0.0	⊙	\$8,533
Good Samaritan/Lebanon	47	⊙	4.5	6.4	⊙	2.1	⊙	\$14,320
Hanover	35	⊙	4.5	6.1	⊙	6.1	⊙	\$7,976
Hazleton General	45	⊙	4.6	0.0	⊙	2.3	⊙	\$17,188
Heart of Lancaster	18	⊙	3.2	5.6	⊙	0.0	⊙	\$11,810
Holy Spirit	94	⊙	4.7	3.3	⊙	7.6	⊙	\$12,448
J C Blair Memorial	25	⊙	3.6	0.0	⊙	4.0	⊙	\$8,317
Jersey Shore	10	⊙	4.2	0.0	⊙	10.0	⊙	\$5,895
Lancaster General	129	⊙	4.6	3.9	⊙	6.3	⊙	\$11,926
Lancaster Regional	18	⊙	4.6	0.0	⊙	5.6	⊙	\$14,561
Lewistown	41	⊙	3.6	12.8	●	2.6	⊙	\$7,344

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Intestinal Obstruction

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Lock Haven	15	⊖	3.7	0.0	⊖	0.0	⊖	\$14,930
Marian Community	11	⊖	5.2	0.0	⊖	18.2	⊖	\$12,186
Memorial York	36	⊖	4.6	2.8	⊖	2.8	⊖	\$9,484
Memorial/Towanda	17	⊖	3.4	5.9	⊖	0.0	⊖	\$10,372
Mercy/Scranton	55	⊖	4.4	9.3	⊖	5.6	⊖	\$15,775
Mid-Valley	6	⊖	3.2	16.7	⊖	0.0	⊖	\$7,553
Milton S Hershey	77	⊖	5.0	4.1	⊖	6.8	⊖	\$11,522
Moses Taylor	71	⊖	5.0	4.3	⊖	8.6	⊖	\$12,746
Mount Nittany	77	●	4.7	4.1	⊖	6.8	⊖	\$12,907
Muncy Valley	7	⊖	3.4	0.0	⊖	0.0	⊖	\$8,787
Pinnacle Health	71	⊖	4.2	5.7	⊖	4.3	⊖	\$12,582
Pocono	87	⊖	3.9	8.0	⊖	2.3	⊖	\$15,236
Robert Packer	64	⊖	4.1	6.3	⊖	3.1	⊖	\$11,577
Shamokin Area Community	32	⊖	3.8	9.4	⊖	0.0	⊖	\$6,258
Soldiers & Sailors	27	⊖	2.9	7.4	⊖	0.0	⊖	\$6,978
Sunbury Community	32	⊖	3.6	3.1	⊖	0.0	⊖	\$10,415
Troy Community	7	⊖	3.4	0.0	⊖	0.0	⊖	\$5,513
Tyler Memorial	11	⊖	2.7	9.1	⊖	0.0	⊖	\$8,582
Waynesboro	26	⊖	4.0	12.0	⊖	4.0	⊖	\$8,969
Williamsport	64	⊖	4.4	1.6	⊖	0.0	⊖	\$11,676
WVHCS	94	⊖	5.2	6.5	⊖	10.8	●	\$15,524
York	144	⊖	3.9	4.3	⊖	3.6	⊖	\$8,402
<b>Central &amp; Northeastern</b>	<b>2,046</b>		<b>4.3</b>	<b>4.8</b>		<b>4.7</b>		<b>\$12,143</b>
<b>TOTAL: Statewide</b>	<b>8,715</b>		<b>4.3</b>	<b>5.0</b>		<b>5.0</b>		<b>\$20,164</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊕ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Kidney Failure – Acute

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Barnes Kasson County	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Berwick	19	⊖	4.6	0.0	⊖	0.0	⊖	⊖	⊖	\$18,958
Bloomsburg	7	⊖	4.2	0.0	⊖	0.0	⊖	⊖	⊖	\$13,015
Bucktail	0	NR	NR	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	110	⊖	5.6	2.9	⊖	3.9	⊖	⊖	⊖	\$19,154
Chambersburg	140	⊖	4.7	4.4	⊖	0.0	⊖	⊖	⊖	\$13,774
Community/Scranton	76	⊖	6.3	5.4	⊖	5.4	⊖	⊖	⊖	\$18,821
Ephrata Community	67	⊖	4.8	8.2	⊖	0.0	⊖	⊖	⊖	\$18,496
Evangelical Community	32	⊖	3.6	3.1	⊖	0.0	⊖	⊖	⊖	\$6,716
Fulton County	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	84	⊖	6.0	6.3	⊖	2.5	⊖	⊖	⊖	\$23,719
Geisinger Wyoming Valley	120	⊖	6.5	1.8	⊖	7.1	⊖	⊖	⊖	\$24,976
Geisinger/Danville	268	⊖	4.6	11.6	●	2.8	⊖	⊖	⊖	\$25,597
Gettysburg	53	⊖	6.0	4.2	⊖	2.1	⊖	⊖	⊖	\$14,239
Good Samaritan/Lebanon	106	⊖	6.0	6.2	⊖	5.2	⊖	⊖	⊖	\$19,351
Hanover	59	⊖	5.0	0.0	⊖	1.9	⊖	⊖	⊖	\$11,247
Hazleton General	114	⊖	5.7	6.9	⊖	6.9	⊖	⊖	⊖	\$19,622
Heart of Lancaster	70	⊖	4.7	1.5	⊖	1.5	⊖	⊖	⊖	\$15,203
Holy Spirit	210	●	5.8	4.2	⊖	5.8	⊖	⊖	⊖	\$18,269
J C Blair Memorial	11	⊖	4.4	9.1	⊖	0.0	⊖	⊖	⊖	\$6,984
Jersey Shore	6	⊖	4.4	16.7	⊖	0.0	⊖	⊖	⊖	\$6,952
Lancaster General	378	●	6.4	2.6	⊖	5.7	⊖	⊖	⊖	\$17,606
Lancaster Regional	72	⊖	6.5	2.9	⊖	8.8	⊖	⊖	⊖	\$19,462
Lewistown	62	⊖	5.6	1.8	⊖	7.1	⊖	⊖	⊖	\$12,328

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊖ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup>While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Kidney Failure – Acute

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay %	Short Length of Stay Rating <sup>†</sup>	Long Length of Stay %	Long Length of Stay Rating <sup>†</sup>	For Any Reason	For Complication or Infection	
Lock Haven	34	⊙	4.6	0.0	⊙	0.0	⊙	○	⊙	\$13,290
Marian Community	59	⊙	6.1	5.5	⊙	1.8	⊙	⊙	⊙	\$12,870
Memorial York	96	⊙	5.1	8.0	⊙	4.6	⊙	⊙	⊙	\$13,697
Memorial/Towanda	3	NR	NR	NR	NR	NR	NR	NR	NR	NR
Mercy/Scranton	116	⊙	5.3	2.7	⊙	0.9	○	⊙	⊙	\$19,549
Mid-Valley	26	⊙	4.5	0.0	⊙	0.0	⊙	⊙	⊙	\$11,686
Milton S Hershey	259	●	5.3	6.8	⊙	6.4	⊙	●	⊙	\$15,172
Moses Taylor	143	⊙	6.4	5.2	⊙	6.7	⊙	⊙	⊙	\$17,592
Mount Nittany	51	⊙	7.5	7.0	⊙	18.6	●	⊙	⊙	\$18,717
Muncy Valley	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Pinnacle Health	374	⊙	5.8	4.5	⊙	4.8	⊙	⊙	⊙	\$21,243
Pocono	121	⊙	5.2	6.8	⊙	5.1	⊙	⊙	⊙	\$22,266
Robert Packer	147	⊙	4.4	17.5	●	0.7	○	⊙	⊙	\$14,656
Shamokin Area Community	54	●	5.2	2.2	⊙	0.0	⊙	⊙	⊙	\$6,246
Soldiers & Sailors	34	⊙	4.9	12.1	⊙	0.0	⊙	⊙	⊙	\$12,887
Sunbury Community	45	⊙	3.9	12.2	⊙	0.0	⊙	⊙	⊙	\$9,788
Troy Community	5	●	NR	NR	NR	NR	NR	NR	NR	\$5,912
Tyler Memorial	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Waynesboro	50	●	5.7	0.0	⊙	0.0	⊙	⊙	⊙	\$15,666
Williamsport	103	⊙	4.9	7.0	⊙	1.0	⊙	⊙	⊙	\$17,259
WVHCS	140	⊙	7.6	8.0	⊙	15.2	●	⊙	⊙	\$23,960
York	463	⊙	5.4	5.3	⊙	3.0	⊙	○	⊙	\$13,234
<b>Central &amp; Northeastern</b>	<b>4,435</b>		<b>5.6</b>	<b>5.6</b>		<b>4.3</b>				<b>\$17,480</b>
<b>TOTAL: Statewide</b>	<b>19,577</b>		<b>5.8</b>	<b>5.0</b>		<b>5.0</b>				<b>\$28,199</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Kidney and Urinary Tract Infections

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay	Long Length of Stay	For Any Reason	For Complication or Infection			
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Barnes Kasson County	28	⊙	3.7	0.0	⊙	0.0	⊙	⊙	⊙	\$8,292
Berwick	68	⊙	4.2	1.5	⊙	1.5	⊙	⊙	⊙	\$16,426
Bloomsburg	44	⊙	3.9	4.5	⊙	0.0	⊙	⊙	⊙	\$13,368
Bucktail	1	NR	NR	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	79	⊙	3.4	6.4	⊙	3.8	⊙	⊙	⊙	\$11,551
Chambersburg	143	⊙	3.7	7.7	⊙	2.8	⊙	⊙	⊙	\$10,582
Community/Scranton	146	⊙	4.5	4.8	⊙	7.5	⊙	⊙	⊙	\$13,567
Ephrata Community	99	⊙	4.4	6.2	⊙	6.2	⊙	⊙	⊙	\$14,297
Evangelical Community	44	⊙	2.7	7.0	⊙	0.0	⊙	⊙	⊙	\$6,078
Fulton County	26	⊙	3.8	3.8	⊙	0.0	⊙	⊙	⊙	\$7,693
Geisinger Wilkes-Barre	124	⊙	4.6	2.4	⊙	5.7	⊙	⊙	⊙	\$14,999
Geisinger Wyoming Valley	79	⊙	4.0	2.5	⊙	3.8	⊙	⊙	⊙	\$15,028
Geisinger/Danville	137	⊙	3.6	8.8	⊙	2.2	⊙	⊙	⊙	\$18,402
Gettysburg	79	⊙	4.1	2.5	⊙	1.3	⊙	⊙	⊙	\$9,226
Good Samaritan/Lebanon	165	⊙	4.6	6.7	⊙	7.3	⊙	⊙	⊙	\$12,904
Hanover	42	⊙	3.4	9.5	⊙	0.0	⊙	⊙	⊙	\$6,414
Hazleton General	106	⊙	4.1	3.8	⊙	2.9	⊙	⊙	⊙	\$14,052
Heart of Lancaster	72	⊙	4.3	0.0	⊙	2.8	⊙	⊙	⊙	\$14,198
Holy Spirit	170	⊙	4.6	4.1	⊙	8.8	●	⊙	⊙	\$12,174
J C Blair Memorial	28	⊙	5.6	0.0	⊙	10.7	⊙	⊙	⊙	\$8,059
Jersey Shore	31	⊙	3.1	9.7	⊙	0.0	⊙	⊙	⊙	\$5,936
Lancaster General	346	⊙	5.0	2.4	⊙	8.5	●	⊙	⊙	\$13,797
Lancaster Regional	93	⊙	5.2	1.1	⊙	10.9	●	⊙	⊙	\$13,722
Lewistown	158	⊙	3.9	5.8	⊙	5.1	⊙	⊙	⊙	\$8,506

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
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- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

# Kidney and Urinary Tract Infections

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay	Long Length of Stay	For Any Reason	For Complication or Infection			
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Lock Haven	44	⊙	3.4	2.3	⊙	0.0	⊙	⊙	⊙	\$12,658
Marian Community	68	⊙	3.9	8.8	⊙	2.9	⊙	⊙	⊙	\$7,970
Memorial York	101	⊙	4.3	6.1	⊙	5.1	⊙	⊙	⊙	\$8,684
Memorial/Towanda	32	⊙	4.0	6.5	⊙	3.2	⊙	⊙	⊙	\$9,100
Mercy/Scranton	171	⊙	3.9	8.9	●	3.6	⊙	⊙	⊙	\$13,098
Mid-Valley	34	⊙	3.6	2.9	⊙	0.0	⊙	⊙	⊙	\$8,223
Milton S Hershey	147	⊙	3.9	4.8	⊙	2.7	⊙	●	⊙	\$10,600
Moses Taylor	134	⊙	4.8	3.1	⊙	9.9	●	⊙	⊙	\$11,769
Mount Nittany	158	⊙	5.0	1.3	⊙	10.3	●	⊙	⊙	\$11,211
Muncy Valley	18	⊙	3.7	11.1	⊙	0.0	⊙	⊙	⊙	\$7,119
Pinnacle Health	222	⊙	4.5	4.1	⊙	6.8	⊙	⊙	⊙	\$13,831
Pocono	173	⊙	4.0	5.8	⊙	2.3	⊙	⊙	⊙	\$14,615
Robert Packer	68	⊙	3.3	17.6	●	2.9	⊙	⊙	⊙	\$10,218
Shamokin Area Community	78	●	4.3	0.0	⊙	0.0	⊙	⊙	●	\$6,388
Soldiers & Sailors	33	⊙	3.8	0.0	⊙	0.0	⊙	⊙	⊙	\$8,480
Sunbury Community	60	⊙	3.5	5.0	⊙	0.0	⊙	⊙	⊙	\$9,161
Troy Community	37	⊙	3.9	2.7	⊙	0.0	⊙	⊙	⊙	\$6,360
Tyler Memorial	50	⊙	5.3	0.0	⊙	4.1	⊙	⊙	⊙	\$12,585
Waynesboro	58	⊙	4.1	0.0	⊙	0.0	⊙	⊙	⊙	\$10,156
Williamsport	100	⊙	4.1	3.0	⊙	1.0	⊙	⊙	⊙	\$12,231
WVHCS	205	⊙	5.0	3.0	⊙	8.0	⊙	⊙	⊙	\$13,354
York	353	⊙	3.9	7.5	●	3.5	⊙	⊙	⊙	\$8,700
<b>Central &amp; Northeastern</b>	<b>4,722</b>		<b>4.2</b>	<b>4.7</b>		<b>4.8</b>				<b>\$11,782</b>
<b>TOTAL: Statewide</b>	<b>22,659</b>		<b>4.2</b>	<b>5.0</b>		<b>5.0</b>				<b>\$19,934</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Pneumonia - Aspiration

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay	Long Length of Stay	For Any Reason	For Complication or Infection			
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Barnes Kasson County	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Berwick	92	⊙	5.6	2.3	⊙	0.0	⊙	⊙	⊙	\$23,629
Bloomsburg	11	⊙	3.4	0.0	⊙	0.0	⊙	⊙	⊙	\$15,546
Bucktail	1	NR	NR	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	37	⊙	5.7	3.3	⊙	0.0	⊙	⊙	⊙	\$22,053
Chambersburg	76	⊙	5.2	17.6	●	1.5	⊙	⊙	⊙	\$15,273
Community/Scranton	18	⊙	6.0	27.8	●	5.6	⊙	⊙	⊙	\$20,225
Ephrata Community	57	⊙	4.4	12.3	●	1.8	⊙	⊙	⊙	\$18,903
Evangelical Community	61	⊙	4.5	9.8	⊙	0.0	⊙	⊙	⊙	\$9,591
Fulton County	1	NR	NR	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	68	⊙	6.7	6.6	⊙	1.6	⊙	⊙	⊙	\$26,234
Geisinger Wyoming Valley	34	⊙	6.9	3.6	⊙	7.1	⊙	⊙	⊙	\$23,068
Geisinger/Danville	54	⊙	6.8	2.0	⊙	3.9	⊙	⊙	⊙	\$32,308
Gettysburg	26	⊙	4.8	8.3	⊙	0.0	⊙	⊙	⊙	\$12,395
Good Samaritan/Lebanon	47	⊙	6.0	0.0	⊙	2.6	⊙	⊙	⊙	\$20,163
Hanover	36	⊙	6.6	10.0	⊙	6.7	⊙	⊙	⊙	\$13,737
Hazleton General	43	⊙	7.2	4.8	⊙	2.4	⊙	⊙	⊙	\$29,161
Heart of Lancaster	38	⊙	8.0	3.3	⊙	10.0	⊙	⊙	⊙	\$25,191
Holy Spirit	76	⊙	7.4	4.7	⊙	7.8	⊙	⊙	⊙	\$22,911
J C Blair Memorial	7	⊙	4.6	16.7	⊙	0.0	⊙	⊙	⊙	\$8,863
Jersey Shore	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Lancaster General	143	⊙	7.1	1.6	⊙	5.4	⊙	⊙	⊙	\$23,139
Lancaster Regional	47	⊙	7.2	2.3	⊙	4.7	⊙	⊙	⊙	\$24,158
Lewistown	34	⊙	5.2	3.4	⊙	0.0	⊙	⊙	⊙	\$12,519

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Pneumonia - Aspiration

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay	Long Length of Stay	For Any Reason	For Complication or Infection			
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Lock Haven	7	⊙	4.1	0.0	⊙	0.0	⊙	⊙	⊙	\$17,152
Marian Community	15	⊙	4.8	0.0	⊙	0.0	⊙	⊙	⊙	\$7,599
Memorial York	36	⊙	8.8	7.1	⊙	10.7	⊙	⊙	⊙	\$20,263
Memorial/Towanda	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Mercy/Scranton	46	⊙	7.6	0.0	⊙	5.0	⊙	⊙	⊙	\$23,864
Mid-Valley	5	⊙	6.3	0.0	⊙	20.0	⊙	⊙	⊙	\$16,913
Milton S Hershey	70	⊙	6.1	7.8	⊙	4.7	⊙	⊙	⊙	\$18,369
Moses Taylor	38	⊙	6.3	2.7	⊙	2.7	⊙	⊙	⊙	\$14,318
Mount Nittany	44	⊙	7.9	5.3	⊙	13.2	●	⊙	⊙	\$19,535
Muncy Valley	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Pinnacle Health	90	⊙	7.5	1.3	⊙	11.3	●	⊙	⊙	\$27,285
Pocono	232	○	6.3	8.6	●	4.1	⊙	⊙	⊙	\$26,764
Robert Packer	78	○	4.1	9.2	⊙	0.0	○	⊙	⊙	\$12,532
Shamokin Area Community	15	⊙	4.8	15.4	⊙	0.0	⊙	⊙	⊙	\$7,762
Soldiers & Sailors	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Sunbury Community	36	⊙	5.2	3.1	⊙	3.1	⊙	⊙	⊙	\$17,346
Troy Community	10	⊙	3.6	11.1	⊙	0.0	⊙	⊙	⊙	\$5,783
Tyler Memorial	7	⊙	4.7	14.3	⊙	0.0	⊙	⊙	⊙	\$13,728
Waynesboro	21	⊙	8.1	0.0	⊙	0.0	⊙	⊙	⊙	\$21,499
Williamsport	35	⊙	5.7	9.4	⊙	3.1	⊙	⊙	⊙	\$17,381
WVHCS	78	●	7.4	1.5	⊙	7.6	⊙	⊙	⊙	\$23,953
York	82	⊙	6.8	6.6	⊙	2.6	⊙	⊙	⊙	\$16,099
<b>Central &amp; Northeastern</b>	<b>1,988</b>		<b>6.3</b>	<b>5.9</b>		<b>4.0</b>				<b>\$20,823</b>
<b>TOTAL: Statewide</b>	<b>9,216</b>		<b>6.8</b>	<b>5.0</b>		<b>4.9</b>				<b>\$31,924</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Pneumonia - Infectious

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay	Long Length of Stay	For Any Reason	For Complication or Infection			
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Barnes Kasson County	89	⊙	4.5	1.1	⊙	0.0	⊙	⊙	⊙	\$8,801
Berwick	110	⊙	5.5	1.9	⊙	7.4	⊙	⊙	⊙	\$21,133
Bloomsburg	137	⊙	3.7	6.0	⊙	0.8	⊙	⊙	⊙	\$15,068
Bucktail	10	⊙	4.3	0.0	⊙	0.0	⊙	⊙	⊙	NA
Carlisle Regional	216	●	5.5	2.5	⊙	8.5	●	⊙	⊙	\$18,681
Chambersburg	359	⊙	4.2	6.8	⊙	2.0	⊙	⊙	⊙	\$13,322
Community/Scranton	257	⊙	5.5	4.0	⊙	9.1	●	⊙	⊙	\$18,033
Ephrata Community	235	⊙	4.4	3.4	⊙	0.9	⊙	⊙	⊙	\$16,909
Evangelical Community	224	⊙	3.3	24.9	●	0.0	⊙	⊙	⊙	\$6,806
Fulton County	89	●	5.0	1.2	⊙	2.4	⊙	⊙	⊙	\$12,105
Geisinger Wilkes-Barre	227	⊙	5.5	5.1	⊙	4.7	⊙	⊙	⊙	\$21,260
Geisinger Wyoming Valley	226	⊙	5.5	2.7	⊙	7.6	⊙	●	●	\$21,802
Geisinger/Danville	262	⊙	3.6	14.4	●	1.6	⊙	⊙	⊙	\$20,605
Gettysburg	162	⊙	5.2	3.8	⊙	6.3	⊙	⊙	⊙	\$12,245
Good Samaritan/Lebanon	289	⊙	4.6	4.8	⊙	3.3	⊙	⊙	⊙	\$16,559
Hanover	166	⊙	5.1	2.5	⊙	3.1	⊙	⊙	⊙	\$10,410
Hazleton General	335	⊙	5.3	5.3	⊙	4.0	⊙	⊙	⊙	\$20,997
Heart of Lancaster	85	⊙	5.5	1.2	⊙	4.7	⊙	⊙	⊙	\$18,192
Holy Spirit	355	⊙	5.4	3.4	⊙	6.6	⊙	⊙	⊙	\$16,980
J C Blair Memorial	113	⊙	5.4	9.0	⊙	9.9	●	⊙	⊙	\$10,014
Jersey Shore	103	⊙	4.7	3.0	⊙	2.0	⊙	⊙	⊙	\$8,977
Lancaster General	609	⊙	5.3	3.4	⊙	8.6	●	⊙	⊙	\$17,791
Lancaster Regional	151	⊙	5.5	2.7	⊙	2.7	⊙	⊙	⊙	\$18,725
Lewistown	325	⊙	4.5	8.6	●	5.3	⊙	⊙	⊙	\$11,836

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Pneumonia - Infectious

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay %	Short Length of Stay Rating <sup>†</sup>	Long Length of Stay %	Long Length of Stay Rating <sup>†</sup>	For Any Reason	For Complication or Infection	
Lock Haven	99	⊙	4.1	2.1	⊙	1.0	⊙	⊙	⊙	\$15,474
Marian Community	186	⊙	5.3	1.1	○	6.5	⊙	⊙	⊙	\$11,607
Memorial York	243	○	4.6	4.5	⊙	3.7	⊙	⊙	⊙	\$11,144
Memorial/Towanda	107	●	4.7	6.3	⊙	5.2	⊙	⊙	⊙	\$13,740
Mercy/Scranton	303	⊙	4.9	4.8	⊙	3.4	⊙	⊙	⊙	\$15,861
Mid-Valley	50	⊙	4.2	8.0	⊙	0.0	⊙	⊙	⊙	\$10,536
Milton S Hershey	308	⊙	4.8	7.1	⊙	4.4	⊙	⊙	⊙	\$14,351
Moses Taylor	255	⊙	5.6	4.4	⊙	6.8	⊙	⊙	⊙	\$12,687
Mount Nittany	281	●	5.9	3.7	⊙	7.5	⊙	⊙	⊙	\$15,711
Muncy Valley	50	⊙	4.3	0.0	⊙	0.0	⊙	⊙	⊙	\$8,479
Pinnacle Health	403	⊙	5.0	5.9	⊙	5.4	⊙	⊙	⊙	\$18,514
Pocono	482	⊙	4.7	4.0	⊙	3.8	⊙	⊙	⊙	\$18,475
Robert Packer	325	⊙	4.3	10.2	●	3.8	⊙	⊙	⊙	\$14,179
Shamokin Area Community	175	⊙	4.6	5.3	⊙	1.2	○	⊙	●	\$7,741
Soldiers & Sailors	124	⊙	4.5	9.2	⊙	1.7	⊙	⊙	⊙	\$11,781
Sunbury Community	216	⊙	4.3	3.3	⊙	1.9	○	⊙	⊙	\$13,344
Troy Community	85	⊙	3.7	4.8	⊙	0.0	○	⊙	⊙	\$6,112
Tyler Memorial	234	⊙	5.1	4.4	⊙	5.7	⊙	⊙	⊙	\$13,161
Waynesboro	162	⊙	5.1	3.8	⊙	4.4	⊙	⊙	⊙	\$15,172
Williamsport	238	⊙	4.3	8.1	●	2.5	⊙	○	⊙	\$14,874
WVHCS	497	⊙	5.9	4.6	⊙	9.0	●	⊙	⊙	\$19,495
York	636	⊙	4.4	8.2	●	4.8	⊙	⊙	⊙	\$10,510
<b>Central &amp; Northeastern</b>	<b>10,798</b>		<b>4.9</b>	<b>5.7</b>		<b>4.7</b>				<b>\$15,078</b>
<b>TOTAL: Statewide</b>	<b>41,543</b>		<b>5.0</b>	<b>5.0</b>		<b>5.0</b>				<b>\$23,630</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Respiratory Failure with Mechanical Ventilation

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Barnes Kasson County	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Berwick	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Bloomsburg	3	NR	NR	NR	NR	NR	NR	NR	NR	NR
Bucktail	0	NR	NR	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	12	⊖	9.8	0.0	⊖	0.0	⊖	⊖	⊖	\$53,286
Chambersburg	29	⊖	8.1	5.6	⊖	0.0	⊖	⊖	⊖	\$34,493
Community/Scranton	67	⊖	9.1	4.8	⊖	4.8	⊖	⊖	⊖	\$46,503
Ephrata Community	12	⊖	9.6	12.5	⊖	0.0	⊖	⊖	⊖	\$56,308
Evangelical Community	17	⊖	5.6	10.0	⊖	0.0	⊖	⊖	⊖	\$20,211
Fulton County	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	51	⊖	8.1	5.6	⊖	0.0	⊖	⊖	⊖	\$53,311
Geisinger Wyoming Valley	32	⊖	10.8	5.0	⊖	0.0	⊖	⊖	⊖	\$58,424
Geisinger/Danville	69	⊖	8.8	3.8	⊖	3.8	⊖	⊖	⊖	\$89,379
Gettysburg	18	⊖	9.3	0.0	⊖	0.0	⊖	⊖	⊖	\$36,217
Good Samaritan/Lebanon	21	⊖	7.2	0.0	⊖	0.0	⊖	⊖	⊖	\$37,016
Hanover	20	⊖	11.7	0.0	⊖	6.7	⊖	⊖	⊖	\$29,390
Hazleton General	34	⊖	8.8	4.2	⊖	0.0	⊖	⊖	⊖	\$59,688
Heart of Lancaster	7	⊖	8.5	14.3	⊖	0.0	⊖	⊖	⊖	\$68,996
Holy Spirit	74	●	11.4	5.7	⊖	8.6	⊖	⊖	⊖	\$51,514
J C Blair Memorial	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Jersey Shore	1	NR	NR	NR	NR	NR	NR	NR	NR	NR
Lancaster General	73	⊖	10.1	1.9	⊖	7.4	⊖	⊖	⊖	\$59,357
Lancaster Regional	16	⊖	11.1	7.7	⊖	0.0	⊖	⊖	⊖	\$70,177
Lewistown	7	⊖	NR	NR	NR	NR	NR	NR	NR	\$20,773

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊖ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

# Respiratory Failure with Mechanical Ventilation

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay %	Short Length of Stay Rating <sup>†</sup>	Long Length of Stay %	Long Length of Stay Rating <sup>†</sup>	For Any Reason	For Complication or Infection	
Lock Haven	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Marian Community	16	⊙	9.7	7.7	⊙	7.7	⊙	⊙	⊙	\$33,252
Memorial York	36	⊙	11.2	8.7	⊙	4.3	⊙	⊙	⊙	\$43,025
Memorial/Towanda	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Mercy/Scranton	37	○	9.5	3.1	⊙	3.1	⊙	⊙	⊙	\$51,808
Mid-Valley	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Milton S Hershey	75	⊙	12.7	1.8	⊙	10.9	⊙	⊙	⊙	\$52,867
Moses Taylor	37	⊙	11.7	3.4	⊙	10.3	⊙	⊙	⊙	\$45,336
Mount Nittany	25	⊙	11.3	11.8	⊙	11.8	⊙	⊙	⊙	\$66,967
Muncy Valley	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Pinnacle Health	86	⊙	8.7	3.6	⊙	1.8	⊙	⊙	⊙	\$60,240
Pocono	38	○	8.7	6.1	⊙	3.0	⊙	⊙	⊙	\$65,233
Robert Packer	43	⊙	9.4	5.7	⊙	5.7	⊙	⊙	⊙	\$39,957
Shamokin Area Community	8	●	NR	NR	NR	NR	NR	NR	NR	\$22,460
Soldiers & Sailors	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Sunbury Community	11	⊙	8.3	11.1	⊙	0.0	⊙	⊙	⊙	\$37,731
Troy Community	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Waynesboro	15	⊙	10.3	0.0	⊙	0.0	⊙	⊙	⊙	\$44,118
Williamsport	38	⊙	8.7	3.1	⊙	0.0	⊙	⊙	⊙	\$57,114
WVHCS	94	⊙	8.5	6.3	⊙	1.6	⊙	⊙	⊙	\$40,317
York	98	⊙	8.7	5.4	⊙	5.4	⊙	⊙	⊙	\$35,756
<b>Central &amp; Northeastern</b>	<b>1,262</b>		<b>9.5</b>	<b>4.6</b>		<b>4.1</b>				<b>\$50,258</b>
<b>TOTAL: Statewide</b>	<b>6,153</b>		<b>9.7</b>	<b>5.0</b>		<b>5.0</b>				<b>\$76,003</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

●	Significantly higher than expected.
⊙	Not significantly different than expected.
○	Significantly lower than expected.
NR	Not reported. Had fewer than five cases evaluated.
NA	Not available. Not reported due to missing/incomplete data.

## Respiratory Failure without Mechanical Ventilation

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay %	Short Length of Stay Rating <sup>†</sup>	Long Length of Stay %	Long Length of Stay Rating <sup>†</sup>	For Any Reason	For Complication or Infection	
Barnes Kasson County	5	⊖	3.6	0.0	⊖	0.0	⊖	⊖	⊖	\$8,614
Berwick	14	⊖	6.4	0.0	⊖	0.0	⊖	⊖	⊖	\$29,878
Bloomsburg	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Bucktail	0	NR	NR	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	26	⊖	5.7	4.2	⊖	0.0	⊖	⊖	⊖	\$22,732
Chambersburg	97	⊖	5.3	9.8	⊖	2.4	⊖	⊖	⊖	\$20,243
Community/Scranton	63	⊖	6.0	7.0	⊖	3.5	⊖	⊖	⊖	\$20,774
Ephrata Community	48	⊖	5.4	2.4	⊖	2.4	⊖	⊖	⊖	\$25,107
Evangelical Community	101	⊖	3.9	13.6	●	0.0	⊖	⊖	⊖	\$9,358
Fulton County	1	NR	NR	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	57	⊖	6.7	4.1	⊖	8.2	⊖	⊖	⊖	\$21,962
Geisinger Wyoming Valley	69	⊖	6.0	4.8	⊖	3.2	⊖	⊖	⊖	\$24,852
Geisinger/Danville	49	⊖	5.7	12.8	●	5.1	⊖	⊖	⊖	\$30,788
Gettysburg	64	⊖	5.9	0.0	⊖	1.7	⊖	⊖	⊖	\$17,297
Good Samaritan/Lebanon	13	●	4.1	20.0	⊖	0.0	⊖	⊖	⊖	\$20,259
Hanover	85	⊖	6.1	6.5	⊖	5.2	⊖	⊖	⊖	\$15,158
Hazleton General	157	⊖	5.9	7.1	⊖	2.8	⊖	⊖	⊖	\$24,067
Heart of Lancaster	29	⊖	7.0	7.7	⊖	7.7	⊖	⊖	⊖	\$26,327
Holy Spirit	148	⊖	6.2	2.3	⊖	2.3	⊖	⊖	⊖	\$24,073
J C Blair Memorial	31	⊖	7.6	0.0	⊖	12.0	⊖	⊖	⊖	\$14,292
Jersey Shore	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Lancaster General	71	⊖	7.7	1.6	⊖	9.8	⊖	⊖	⊖	\$32,534
Lancaster Regional	33	⊖	6.4	3.4	⊖	3.4	⊖	⊖	⊖	\$27,585
Lewistown	37	⊖	5.8	16.1	●	9.7	⊖	⊖	⊖	\$13,967

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

# Respiratory Failure without Mechanical Ventilation

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay %	Short Length of Stay Rating <sup>†</sup>	Long Length of Stay %	Long Length of Stay Rating <sup>†</sup>	For Any Reason	For Complication or Infection	
Lock Haven	14	⊙	4.2	15.4	⊙	7.7	⊙	⊙	⊙	\$16,120
Marian Community	20	⊙	7.8	0.0	⊙	5.9	⊙	⊙	⊙	\$18,745
Memorial York	60	⊙	7.4	4.1	⊙	8.2	⊙	⊙	⊙	\$20,944
Memorial/Towanda	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Mercy/Scranton	48	⊙	6.2	6.5	⊙	0.0	⊙	⊙	⊙	\$21,909
Mid-Valley	27	⊙	5.3	4.0	⊙	4.0	⊙	⊙	⊙	\$14,502
Milton S Hershey	51	⊙	7.4	2.3	⊙	4.5	⊙	⊙	⊙	\$27,393
Moses Taylor	122	⊙	6.6	4.6	⊙	2.8	⊙	⊙	⊙	\$16,668
Mount Nittany	106	●	7.6	0.0	⊙	7.1	⊙	⊙	⊙	\$21,641
Muncy Valley	7	⊙	5.0	0.0	⊙	0.0	⊙	⊙	⊙	\$10,311
Pinnacle Health	186	⊙	6.4	3.0	⊙	3.6	⊙	⊙	⊙	\$26,795
Pocono	43	⊙	5.4	0.0	⊙	0.0	⊙	⊙	⊙	\$21,787
Robert Packer	83	⊙	5.4	21.3	●	2.7	⊙	⊙	⊙	\$20,406
Shamokin Area Community	11	●	4.1	0.0	⊙	0.0	⊙	⊙	⊙	\$8,195
Soldiers & Sailors	14	⊙	4.9	14.3	⊙	0.0	⊙	⊙	●	\$15,473
Sunbury Community	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Troy Community	1	NR	NR	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	9	⊙	5.1	37.5	●	0.0	⊙	●	⊙	\$14,305
Waynesboro	26	●	6.8	0.0	⊙	0.0	⊙	⊙	⊙	\$19,320
Williamsport	174	⊙	4.9	6.8	⊙	1.2	⊙	⊙	⊙	\$17,755
WVHCS	77	⊙	7.2	1.6	⊙	6.5	⊙	⊙	⊙	\$23,132
York	63	⊙	5.1	13.5	●	3.8	⊙	⊙	⊙	\$13,712
<b>Central &amp; Northeastern</b>	<b>2,395</b>		<b>6.0</b>	<b>6.1</b>		<b>3.6</b>				<b>\$20,875</b>
<b>TOTAL: Statewide</b>	<b>8,607</b>		<b>6.3</b>	<b>5.0</b>		<b>5.0</b>				<b>\$28,904</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Septicemia

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Barnes Kasson County	4	NR	NR	NR	NR	NR	NR	NR
Berwick	49	●	7.0	2.9	⊙	5.7	⊙	\$26,831
Bloomsburg	53	⊙	4.9	4.5	⊙	0.0	⊙	\$21,933
Bucktail	0	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	152	⊙	6.2	5.0	⊙	2.5	⊙	\$27,089
Chambersburg	222	⊙	5.5	3.7	⊙	1.1	⊙	\$19,154
Community/Scranton	128	○	6.8	12.1	●	4.3	⊙	\$27,289
Ephrata Community	44	⊙	7.2	7.7	⊙	5.1	⊙	\$23,650
Evangelical Community	210	○	4.7	8.2	⊙	1.0	○	\$10,755
Fulton County	3	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	111	⊙	7.4	4.5	⊙	4.5	⊙	\$31,621
Geisinger Wyoming Valley	158	⊙	8.0	5.3	⊙	5.3	⊙	\$34,187
Geisinger/Danville	461	⊙	6.5	5.9	⊙	4.0	⊙	\$42,577
Gettysburg	72	⊙	6.7	9.5	⊙	4.8	⊙	\$18,422
Good Samaritan/Lebanon	173	⊙	7.7	2.1	⊙	4.9	⊙	\$26,845
Hanover	180	⊙	7.0	0.7	○	2.0	⊙	\$14,744
Hazleton General	388	⊙	7.1	3.0	⊙	3.3	⊙	\$29,273
Heart of Lancaster	40	⊙	7.7	0.0	⊙	3.2	⊙	\$31,235
Holy Spirit	424	⊙	6.9	2.4	○	2.2	○	\$24,263
J C Blair Memorial	46	⊙	6.5	4.7	⊙	2.3	⊙	\$10,923
Jersey Shore	7	⊙	6.1	0.0	⊙	0.0	⊙	\$16,756
Lancaster General	209	⊙	7.7	4.7	⊙	5.3	⊙	\$28,905
Lancaster Regional	57	⊙	8.5	2.4	⊙	7.3	⊙	\$37,332
Lewistown	69	⊙	6.4	6.5	⊙	3.2	⊙	\$16,982

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

# Septicemia

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Lock Haven	16	⊖	5.8	0.0	⊖	0.0	⊖	\$26,166
Marian Community	80	⊖	7.0	5.7	⊖	4.3	⊖	\$20,098
Memorial York	85	⊖	6.5	7.4	⊖	2.9	⊖	\$18,750
Memorial/Towanda	29	⊖	5.8	0.0	⊖	0.0	⊖	\$17,538
Mercy/Scranton	274	⊖	7.5	2.6	⊖	3.0	⊖	\$29,885
Mid-Valley	13	⊖	4.6	7.7	⊖	0.0	⊖	\$13,472
Milton S Hershey	362	⊖	8.4	4.0	⊖	11.7	●	\$29,718
Moses Taylor	255	⊖	8.8	4.6	⊖	8.3	●	\$25,114
Mount Nittany	81	⊖	7.1	6.1	⊖	4.5	⊖	\$24,169
Muncy Valley	10	⊖	5.3	0.0	⊖	0.0	⊖	\$9,623
Pinnacle Health	575	⊖	7.7	4.8	⊖	5.6	⊖	\$29,850
Pocono	184	⊖	6.7	8.6	⊖	3.3	⊖	\$34,767
Robert Packer	126	⊖	5.9	10.9	●	5.0	⊖	\$23,910
Shamokin Area Community	36	●	6.2	0.0	⊖	0.0	⊖	\$11,290
Soldiers & Sailors	42	⊖	5.0	2.7	⊖	0.0	⊖	\$13,222
Sunbury Community	67	⊖	4.9	0.0	⊖	0.0	⊖	\$16,339
Troy Community	9	⊖	3.5	0.0	⊖	0.0	⊖	\$6,177
Tyler Memorial	44	⊖	6.3	0.0	⊖	2.8	⊖	\$19,817
Waynesboro	67	●	6.0	2.0	⊖	2.0	⊖	\$19,560
Williamsport	104	⊖	6.9	7.1	⊖	2.4	⊖	\$30,311
WVHCS	136	⊖	8.4	6.9	⊖	7.8	⊖	\$24,728
York	505	⊖	6.9	5.8	⊖	2.6	○	\$18,715
<b>Central &amp; Northeastern</b>	<b>6,434</b>		<b>7.0</b>	<b>4.8</b>		<b>4.2</b>		<b>\$26,364</b>
<b>TOTAL: Statewide</b>	<b>23,630</b>		<b>7.3</b>	<b>5.0</b>		<b>5.0</b>		<b>\$40,710</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Stomach and Intestinal Bleeding

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Barnes Kasson County	25	⊖	3.6	4.2	⊖	0.0	⊖	⊖	⊖	\$9,896
Berwick	43	⊖	4.3	2.4	⊖	2.4	⊖	⊖	⊖	\$24,770
Bloomsburg	15	⊖	2.9	0.0	⊖	0.0	⊖	⊖	⊖	\$12,037
Bucktail	0	NR	NR	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	138	⊖	3.9	5.2	⊖	2.2	⊖	⊖	●	\$20,529
Chambersburg	171	⊖	4.0	6.6	⊖	4.8	⊖	⊖	⊖	\$14,523
Community/Scranton	153	⊖	4.8	2.0	⊖	5.9	⊖	⊖	⊖	\$17,581
Ephrata Community	90	⊖	3.6	4.6	⊖	0.0	⊖	⊖	⊖	\$15,415
Evangelical Community	100	⊖	3.2	5.1	⊖	1.0	⊖	⊖	⊖	\$8,264
Fulton County	11	⊖	4.2	9.1	⊖	0.0	⊖	⊖	⊖	\$10,212
Geisinger Wilkes-Barre	108	⊖	4.4	3.7	⊖	3.7	⊖	⊖	⊖	\$20,851
Geisinger Wyoming Valley	138	⊖	4.7	5.1	⊖	4.4	⊖	⊖	⊖	\$21,692
Geisinger/Danville	170	⊖	3.7	7.7	⊖	4.2	⊖	⊖	⊖	\$26,008
Gettysburg	73	⊖	4.8	1.4	⊖	2.7	⊖	⊖	⊖	\$15,122
Good Samaritan/Lebanon	124	⊖	4.5	4.1	⊖	4.1	⊖	⊖	⊖	\$17,073
Hanover	98	⊖	3.7	6.2	⊖	4.1	⊖	⊖	⊖	\$9,572
Hazleton General	191	●	4.8	5.1	⊖	6.7	⊖	⊖	⊖	\$18,206
Heart of Lancaster	31	⊖	4.4	3.2	⊖	3.2	⊖	⊖	⊖	\$18,926
Holy Spirit	240	⊖	4.2	6.0	⊖	5.5	⊖	⊖	⊖	\$15,053
J C Blair Memorial	27	⊖	4.6	0.0	⊖	7.7	⊖	⊖	⊖	\$11,671
Jersey Shore	27	⊖	4.0	3.7	⊖	7.4	⊖	⊖	⊖	\$8,994
Lancaster General	418	⊖	4.6	3.8	⊖	6.5	⊖	⊖	⊖	\$18,414
Lancaster Regional	47	⊖	4.1	10.6	⊖	0.0	⊖	⊖	⊖	\$19,776
Lewistown	88	⊖	4.2	4.6	⊖	5.7	⊖	⊖	⊖	\$10,358

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

# Stomach and Intestinal Bleeding

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay	Long Length of Stay	For Any Reason	For Complication or Infection			
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Lock Haven	17	⊙	3.7	0.0	⊙	0.0	⊙	●	⊙	\$15,156
Marian Community	60	⊙	5.0	5.3	⊙	8.8	⊙	⊙	⊙	\$11,971
Memorial York	82	⊙	4.0	11.0	●	3.7	⊙	●	⊙	\$10,538
Memorial/Towanda	37	⊙	4.4	2.8	⊙	2.8	⊙	⊙	⊙	\$15,850
Mercy/Scranton	169	⊙	5.1	3.6	⊙	7.2	⊙	⊙	⊙	\$17,612
Mid-Valley	24	⊙	4.6	4.2	⊙	0.0	⊙	⊙	⊙	\$9,831
Milton S Hershey	154	●	4.7	3.4	⊙	9.5	●	⊙	⊙	\$15,233
Moses Taylor	169	⊙	4.5	7.3	⊙	6.7	⊙	⊙	⊙	\$11,824
Mount Nittany	129	⊙	4.2	2.4	⊙	4.0	⊙	⊙	⊙	\$12,595
Muncy Valley	13	⊙	3.4	23.1	●	0.0	⊙	⊙	⊙	\$8,590
Pinnacle Health	323	⊙	4.6	5.1	⊙	4.1	⊙	⊙	⊙	\$18,905
Pocono	205	⊙	3.3	11.4	●	0.5	○	⊙	⊙	\$19,396
Robert Packer	148	⊙	3.4	13.7	●	3.4	⊙	⊙	⊙	\$12,358
Shamokin Area Community	57	⊙	4.2	0.0	⊙	1.9	⊙	⊙	●	\$8,249
Soldiers & Sailors	60	⊙	3.0	8.6	⊙	0.0	⊙	⊙	⊙	\$11,685
Sunbury Community	31	⊙	4.2	3.4	⊙	0.0	⊙	⊙	⊙	\$13,889
Troy Community	11	⊙	4.1	0.0	⊙	0.0	⊙	⊙	⊙	\$7,907
Tyler Memorial	38	⊙	3.8	7.9	⊙	0.0	⊙	⊙	⊙	\$12,299
Waynesboro	57	⊙	3.7	7.1	⊙	0.0	⊙	⊙	⊙	\$11,682
Williamsport	152	⊙	3.6	9.3	●	2.0	⊙	○	⊙	\$13,728
WVHCS	243	⊙	4.7	4.6	⊙	7.2	⊙	⊙	⊙	\$15,717
York	303	⊙	4.2	5.0	⊙	5.4	⊙	⊙	⊙	\$11,543
<b>Central &amp; Northeastern</b>	<b>5,083</b>		<b>4.2</b>	<b>5.6</b>		<b>4.4</b>				<b>\$15,674</b>
<b>TOTAL: Statewide</b>	<b>20,411</b>		<b>4.3</b>	<b>5.0</b>		<b>5.0</b>				<b>\$23,802</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

●	Significantly higher than expected.
⊙	Not significantly different than expected.
○	Significantly lower than expected.
NR	Not reported. Had fewer than five cases evaluated.
NA	Not available. Not reported due to missing/incomplete data.

## Stroke - Hemorrhagic

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Barnes Kasson County	1	NR	NR	NR	NR	NR	NR	NR	NR	NR
Berwick	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Bloomsburg	1	NR	NR	NR	NR	NR	NR	NR	NR	NR
Bucktail	0	NR	NR	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	6	⊖	NR	NR	NR	NR	NR	NR	NR	\$17,864
Chambersburg	26	⊖	5.8	0.0	⊖	0.0	⊖	⊖	⊖	\$14,571
Community/Scranton	32	⊖	6.0	3.8	⊖	3.8	⊖	⊖	⊖	\$20,051
Ephrata Community	12	⊖	7.2	0.0	⊖	28.6	●	NR	NR	\$14,100
Evangelical Community	12	⊖	3.2	0.0	⊖	0.0	⊖	⊖	⊖	\$8,225
Fulton County	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	9	⊖	8.2	0.0	⊖	14.3	⊖	⊖	⊖	\$25,980
Geisinger Wyoming Valley	23	⊖	5.0	7.7	⊖	7.7	⊖	⊖	⊖	\$19,715
Geisinger/Danville	104	⊖	6.9	2.9	⊖	4.3	⊖	⊖	⊖	\$46,386
Gettysburg	6	⊖	NR	NR	NR	NR	NR	NR	NR	\$6,201
Good Samaritan/Lebanon	5	⊖	NR	NR	NR	NR	NR	NR	NR	\$11,779
Hanover	12	⊖	4.0	0.0	⊖	0.0	⊖	⊖	⊖	\$9,373
Hazleton General	5	⊖	NR	NR	NR	NR	NR	NR	NR	NR
Heart of Lancaster	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Holy Spirit	39	⊖	5.2	4.3	⊖	4.3	⊖	⊖	⊖	\$19,482
J C Blair Memorial	9	⊖	4.0	0.0	⊖	0.0	⊖	⊖	⊖	\$7,023
Jersey Shore	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Lancaster General	117	⊖	6.2	13.3	●	6.0	⊖	⊖	⊖	\$20,271
Lancaster Regional	3	NR	NR	NR	NR	NR	NR	NR	NR	NR
Lewistown	3	NR	NR	NR	NR	NR	NR	NR	NR	NR

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊕ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

† While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

# Stroke - Hemorrhagic

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Lock Haven	1	NR	NR	NR	NR	NR	NR	NR	NR	NR
Marian Community	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Memorial York	3	NR	NR	NR	NR	NR	NR	NR	NR	NR
Memorial/Towanda	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Mercy/Scranton	37	⊙	6.5	12.1	⊙	12.1	⊙	⊙	⊙	\$19,031
Mid-Valley	3	NR	NR	NR	NR	NR	NR	NR	NR	NR
Milton S Hershey	107	⊙	6.8	0.0	⊙	9.8	⊙	⊙	⊙	\$23,143
Moses Taylor	23	⊙	4.9	4.8	⊙	4.8	⊙	⊙	⊙	\$15,011
Mount Nittany	11	⊙	7.3	0.0	⊙	0.0	⊙	⊙	⊙	\$14,841
Muncy Valley	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Pinnacle Health	41	⊙	5.1	12.9	⊙	0.0	⊙	⊙	⊙	\$25,693
Pocono	7	⊙	5.0	16.7	⊙	0.0	⊙	NR	NR	\$19,330
Robert Packer	23	⊙	4.8	7.1	⊙	0.0	⊙	⊙	⊙	\$18,385
Shamokin Area Community	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Soldiers & Sailors	6	⊙	NR	NR	NR	NR	NR	NR	NR	\$9,267
Sunbury Community	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Troy Community	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	6	⊙	NR	NR	NR	NR	NR	NR	NR	\$15,914
Waynesboro	9	⊙	5.6	0.0	⊙	0.0	⊙	⊙	⊙	\$11,669
Williamsport	43	⊙	4.3	6.3	⊙	0.0	⊙	⊙	⊙	\$16,368
WVHCS	46	⊙	8.6	2.9	⊙	14.3	●	⊙	⊙	\$23,434
York	67	⊙	6.3	4.4	⊙	4.4	⊙	⊙	⊙	\$14,993
<b>Central &amp; Northeastern</b>	<b>887</b>		<b>6.0</b>	<b>5.5</b>		<b>5.6</b>				<b>\$21,466</b>
<b>TOTAL: Statewide</b>	<b>3,652</b>		<b>6.0</b>	<b>5.0</b>		<b>5.0</b>				<b>\$41,250</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Stroke - Non-Hemorrhagic

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Barnes Kasson County	8	⊖	2.7	12.5	⊖	0.0	⊖	⊖	⊖	\$7,889
Berwick	40	⊖	4.7	5.6	⊖	2.8	⊖	⊖	⊖	\$23,427
Bloomsburg	28	⊖	3.8	15.4	●	3.8	⊖	⊖	⊖	\$14,711
Bucktail	0	NR	NR	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	117	⊖	4.4	2.8	⊖	4.6	⊖	⊖	⊖	\$17,764
Chambersburg	176	⊖	4.4	9.0	●	2.4	⊖	⊖	⊖	\$18,676
Community/Scranton	139	⊖	5.4	5.9	⊖	5.9	⊖	⊖	⊖	\$18,737
Ephrata Community	140	⊖	4.2	2.9	⊖	0.7	⊖	⊖	⊖	\$18,851
Evangelical Community	84	⊖	3.5	11.3	●	1.3	⊖	⊖	⊖	\$11,577
Fulton County	24	⊖	4.5	0.0	⊖	0.0	⊖	⊖	⊖	\$10,796
Geisinger Wilkes-Barre	98	⊖	4.8	12.4	●	5.6	⊖	⊖	⊖	\$25,288
Geisinger Wyoming Valley	119	⊖	5.8	3.6	⊖	7.2	⊖	⊖	⊖	\$25,513
Geisinger/Danville	270	●	4.9	7.2	⊖	4.8	⊖	⊖	⊖	\$31,694
Gettysburg	50	⊖	4.0	4.3	⊖	0.0	⊖	⊖	⊖	\$12,455
Good Samaritan/Lebanon	98	⊖	6.0	1.1	⊖	10.0	●	⊖	⊖	\$18,193
Hanover	139	⊖	4.5	7.0	⊖	3.1	⊖	⊖	⊖	\$12,133
Hazleton General	110	⊖	4.9	7.8	⊖	4.9	⊖	●	⊖	\$21,176
Heart of Lancaster	25	⊖	4.8	8.0	⊖	4.0	⊖	⊖	⊖	\$18,583
Holy Spirit	178	⊖	4.7	2.9	⊖	4.1	⊖	⊖	⊖	\$17,816
J C Blair Memorial	50	⊖	5.5	2.0	⊖	6.1	⊖	⊖	⊖	\$9,431
Jersey Shore	15	⊖	3.6	0.0	⊖	0.0	⊖	⊖	⊖	\$7,136
Lancaster General	423	⊖	5.7	4.1	⊖	9.4	●	⊖	⊖	\$19,466
Lancaster Regional	43	⊖	4.1	12.2	⊖	4.9	⊖	⊖	⊖	\$17,982
Lewistown	82	⊖	4.0	3.8	⊖	3.8	⊖	⊖	⊖	\$12,606

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

† While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

# Stroke - Non-Hemorrhagic

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay %	Short Length of Stay Rating <sup>†</sup>	Long Length of Stay %	Long Length of Stay Rating <sup>†</sup>	For Any Reason	For Complication or Infection	
Lock Haven	23	⊙	4.0	4.5	⊙	0.0	⊙	⊙	⊙	\$16,762
Marian Community	52	⊙	5.6	0.0	⊙	12.2	●	⊙	⊙	\$15,059
Memorial York	96	⊙	4.1	9.7	⊙	3.2	⊙	⊙	⊙	\$13,707
Memorial/Towanda	9	⊙	7.2	0.0	⊙	25.0	⊙	⊙	⊙	\$17,605
Mercy/Scranton	142	⊙	4.6	6.6	⊙	2.2	⊙	⊙	⊙	\$19,492
Mid-Valley	7	⊙	2.5	57.1	●	0.0	⊙	NR	NR	\$15,638
Milton S Hershey	236	●	5.9	1.9	⊙	10.7	●	⊙	⊙	\$22,396
Moses Taylor	138	⊙	5.3	3.7	⊙	7.4	⊙	●	●	\$17,132
Mount Nittany	107	⊙	4.7	8.2	⊙	3.1	⊙	⊙	⊙	\$15,493
Muncy Valley	13	⊙	3.6	0.0	⊙	0.0	⊙	⊙	⊙	\$7,346
Pinnacle Health	376	⊙	4.6	8.4	●	4.8	⊙	⊙	⊙	\$20,042
Pocono	182	⊙	5.3	5.5	⊙	5.5	⊙	⊙	⊙	\$23,608
Robert Packer	102	⊙	4.2	8.4	⊙	2.1	⊙	⊙	⊙	\$19,000
Shamokin Area Community	51	⊙	4.7	2.1	⊙	4.3	⊙	⊙	⊙	\$6,938
Soldiers & Sailors	31	⊙	4.2	6.7	⊙	0.0	⊙	⊙	⊙	\$12,315
Sunbury Community	48	⊙	3.7	6.8	⊙	0.0	⊙	⊙	⊙	\$11,462
Troy Community	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	22	⊙	4.3	0.0	⊙	0.0	⊙	⊙	⊙	\$12,354
Waynesboro	44	●	5.2	0.0	⊙	2.5	⊙	⊙	⊙	\$16,295
Williamsport	154	⊙	4.4	9.0	⊙	3.4	⊙	⊙	⊙	\$15,839
WVHCS	205	⊙	5.6	4.6	⊙	7.7	⊙	⊙	⊙	\$19,311
York	334	⊙	4.6	6.1	⊙	3.2	⊙	⊙	⊙	\$14,905
<b>Central &amp; Northeastern</b>	<b>4,902</b>		<b>4.8</b>	<b>5.8</b>		<b>5.0</b>				<b>\$18,571</b>
<b>TOTAL: Statewide</b>	<b>19,450</b>		<b>4.9</b>	<b>5.0</b>		<b>5.0</b>				<b>\$30,595</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Abdominal Aortic Aneurysm Repair - Endovascular

The facilities listed below are those that performed Abdominal Aortic Aneurysm Repair (Endovascular) during the report period.

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Carlisle Regional	4	NR	NR	NR	NR	NR
Chambersburg	5	⊙	2.5	⊙	⊙	\$35,289
Community/Scranton	24	⊙	5.2	⊙	⊙	\$82,615
Ephrata Community	1	NR	NR	NR	NR	NR
Evangelical Community	21	⊙	3.0	⊙	⊙	\$32,423
Geisinger Wilkes-Barre	4	NR	NR	NR	NR	NR
Geisinger Wyoming Valley	6	⊙	1.6	⊙	⊙	\$65,075
Geisinger/Danville	42	⊙	1.5	⊙	⊙	\$106,878
Hazleton General	4	NR	NR	NR	NR	NR
Holy Spirit	61	⊙	1.8	⊙	⊙	\$57,683
Lancaster General	29	⊙	3.1	⊙	⊙	\$59,721
Lancaster Regional	1	NR	NR	NR	NR	NR
Lewistown	1	NR	NR	NR	NR	NR
Mercy/Scranton	20	⊙	2.8	⊙	⊙	\$82,368
Milton S Hershey	33	⊙	3.0	⊙	⊙	\$54,687
Moses Taylor	1	NR	NR	NR	NR	NR
Pinnacle Health	3	NR	NR	NR	NR	NR
Pocono	26	⊙	2.1	⊙	⊙	\$57,077
Robert Packer	31	⊙	3.3	⊙	⊙	\$67,171
Williamsport	1	NR	NR	NR	NR	NR
WVHCS	26	●	3.7	⊙	⊙	\$76,337
York	38	⊙	1.7	⊙	⊙	\$48,061
<b>Central &amp; Northeastern</b>	<b>382</b>		<b>2.6</b>			<b>\$64,854</b>
<b>TOTAL: Statewide</b>	<b>1,567</b>		<b>3.0</b>			<b>\$89,282</b>

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

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## Abdominal Aortic Aneurysm Repair - Open

The facilities listed below are those that performed Abdominal Aortic Aneurysm Repair (Open) during the report period.

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Carlisle Regional	1	NR	NR	NR	NR	NR
Community/Scranton	6	⊙	9.7	⊙	⊙	NR
Geisinger/Danville	31	⊙	6.0	⊙	⊙	\$64,230
Good Samaritan/Lebanon	1	NR	NR	NR	NR	NR
Hanover	1	NR	NR	NR	NR	NR
Holy Spirit	6	⊙	8.3	⊙	⊙	NR
Lancaster General	31	⊙	8.4	⊙	⊙	\$49,874
Lancaster Regional	3	NR	NR	NR	NR	NR
Lewistown	2	NR	NR	NR	NR	NR
Mercy/Scranton	6	⊙	6.6	⊙	⊙	NR
Milton S Hershey	22	⊙	9.3	⊙	⊙	\$57,318
Moses Taylor	4	NR	NR	NR	NR	NR
Pinnacle Health	1	NR	NR	NR	NR	NR
Pocono	1	NR	NR	NR	NR	NR
Robert Packer	1	NR	NR	NR	NR	NR
Williamsport	4	NR	NR	NR	NR	NR
WVHCS	1	NR	NR	NR	NR	NR
York	25	⊙	5.9	⊙	⊙	\$38,426
<b>Central &amp; Northeastern</b>	<b>149</b>		<b>7.6</b>			<b>\$54,785</b>
<b>TOTAL: Statewide</b>	<b>548</b>		<b>7.6</b>			<b>\$80,857</b>

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

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## Colorectal Procedures

Hospital	Cases	Mortality Rating	Length of Stay	Average Charge
Barnes Kasson County	2	NR	NR	NR
Berwick	15	⊕	10.8	\$82,838
Bloomsburg	26	⊕	5.7	\$29,400
Bucktail	0	NR	NR	NA
Carlisle Regional	92	⊕	9.5	\$59,310
Chambersburg	128	⊕	10.7	\$32,155
Community/Scranton	99	⊕	8.8	\$36,598
Ephrata Community	67	⊕	7.5	\$37,102
Evangelical Community	80	⊕	7.2	\$18,658
Fulton County	0	NR	NR	NR
Geisinger Wilkes-Barre	60	⊕	9.3	\$50,639
Geisinger Wyoming Valley	74	⊕	8.0	\$47,586
Geisinger/Danville	219	⊕	7.5	\$65,861
Gettysburg	56	⊕	8.8	\$36,038
Good Samaritan/Lebanon	93	⊕	10.5	\$46,987
Hanover	79	⊕	9.6	\$31,057
Hazleton General	66	⊕	9.5	\$47,942
Heart of Lancaster	42	⊕	8.9	\$49,451
Holy Spirit	151	⊕	8.9	\$35,770
J C Blair Memorial	19	⊕	10.8	\$35,213
Jersey Shore	25	⊕	6.2	\$16,016
Lancaster General	341	○	9.4	\$39,979
Lancaster Regional	29	⊕	11.6	\$55,799
Lewistown	76	⊕	8.7	\$25,649

- Significantly higher than expected.
- ⊕ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

## Colorectal Procedures

Hospital	Cases	Mortality Rating	Length of Stay	Average Charge
Lock Haven	8	⊙	7.6	\$42,029
Marian Community	15	⊙	8.4	\$24,146
Memorial York	69	⊙	7.4	\$28,079
Memorial/Towanda	10	⊙	7.9	\$30,172
Mercy/Scranton	112	⊙	8.0	\$36,334
Mid-Valley	0	NR	NR	NR
Milton S Hershey	269	⊙	8.4	\$31,101
Moses Taylor	92	⊙	8.7	\$26,305
Mount Nittany	102	⊙	8.0	\$28,748
Muncy Valley	2	NR	NR	NR
Pinnacle Health	329	⊙	7.9	\$37,904
Pocono	103	⊙	8.3	\$41,184
Robert Packer	133	⊙	7.6	\$32,566
Shamokin Area Community	22	⊙	6.1	\$17,226
Soldiers & Sailors	24	⊙	6.9	\$24,686
Sunbury Community	24	⊙	7.5	\$33,741
Troy Community	2	NR	NR	NR
Tyler Memorial	18	⊙	9.7	\$35,977
Waynesboro	32	⊙	8.6	\$27,867
Williamsport	132	⊙	8.4	\$32,407
WVHCS	224	⊙	10.3	\$40,481
York	269	⊙	8.0	\$28,662
<b>Central &amp; Northeastern</b>	<b>3,861</b>		<b>8.6</b>	<b>\$37,345</b>
<b>TOTAL: Statewide</b>	<b>14,676</b>		<b>8.7</b>	<b>\$63,084</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Gallbladder Removal - Laparoscopic

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Barnes Kasson County	9	⊙	3.4	⊙	⊙	\$14,240
Berwick	47	⊙	3.6	⊙	⊙	\$39,535
Bloomsburg	16	⊙	2.9	⊙	⊙	\$17,750
Bucktail	0	NR	NR	NR	NR	NA
Carlisle Regional	84	⊙	4.2	⊙	⊙	\$32,001
Chambersburg	240	⊙	3.3	⊙	⊙	\$16,435
Community/Scranton	131	⊙	3.8	⊙	⊙	\$24,330
Ephrata Community	80	⊙	3.0	⊙	⊙	\$21,078
Evangelical Community	58	⊙	3.1	⊙	⊙	\$10,572
Fulton County	0	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	35	⊙	4.3	⊙	⊙	\$28,196
Geisinger Wyoming Valley	55	●	4.2	⊙	⊙	\$39,706
Geisinger/Danville	62	⊙	3.2	⊙	⊙	\$36,822
Gettysburg	68	⊙	3.9	●	⊙	\$19,093
Good Samaritan/Lebanon	109	⊙	4.0	⊙	⊙	\$22,311
Hanover	44	⊙	2.5	⊙	⊙	\$14,784
Hazleton General	77	⊙	4.3	⊙	●	\$27,996
Heart of Lancaster	38	⊙	3.7	⊙	⊙	\$26,549
Holy Spirit	138	⊙	3.8	⊙	⊙	\$22,466
J C Blair Memorial	37	⊙	4.0	⊙	●	\$13,913
Jersey Shore	21	⊙	3.0	⊙	⊙	\$11,261
Lancaster General	363	⊙	4.2	⊙	⊙	\$21,719
Lancaster Regional	24	⊙	3.4	●	●	\$28,499
Lewistown	69	⊙	2.9	⊙	⊙	\$16,014

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

## Gallbladder Removal - Laparoscopic

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Lock Haven	12	⊙	3.0	⊙	⊙	\$22,145
Marian Community	18	⊙	3.4	⊙	●	\$13,079
Memorial York	69	⊙	3.3	⊙	●	\$15,591
Memorial/Towanda	7	⊙	3.0	⊙	⊙	\$23,399
Mercy/Scranton	80	⊙	4.2	⊙	⊙	\$26,116
Mid-Valley	0	NR	NR	NR	NR	NR
Milton S Hershey	73	⊙	3.9	⊙	⊙	\$18,448
Moses Taylor	82	⊙	4.6	⊙	⊙	\$23,840
Mount Nittany	94	⊙	3.2	⊙	⊙	\$17,012
Muncy Valley	1	NR	NR	NR	NR	NR
Pinnacle Health	188	⊙	3.6	⊙	⊙	\$21,306
Pocono	137	⊙	3.1	⊙	⊙	\$24,862
Robert Packer	74	⊙	2.8	⊙	⊙	\$15,831
Shamokin Area Community	34	⊙	3.7	⊙	⊙	\$12,334
Soldiers & Sailors	26	⊙	3.2	⊙	⊙	\$19,894
Sunbury Community	25	⊙	3.3	⊙	⊙	\$22,134
Troy Community	2	NR	NR	NR	NR	NR
Tyler Memorial	23	⊙	4.8	⊙	⊙	\$24,075
Waynesboro	24	⊙	3.8	⊙	⊙	\$18,152
Williamsport	47	⊙	3.7	⊙	⊙	\$20,624
WVHCS	129	⊙	4.2	⊙	⊙	\$22,539
York	205	⊙	3.0	⊙	⊙	\$13,689
<b>Central &amp; Northeastern</b>	<b>3,196</b>		<b>3.7</b>			<b>\$21,304</b>
<b>TOTAL: Statewide</b>	<b>13,962</b>		<b>3.6</b>			<b>\$30,823</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Gallbladder Removal - Open

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Barnes Kasson County	0	NR	NR	NR	NR	NR
Berwick	5	⊙	8.1	⊙	⊙	\$69,168
Bloomsburg	9	⊙	5.0	⊙	⊙	\$29,066
Bucktail	0	NR	NR	NR	NR	NA
Carlisle Regional	14	⊙	6.6	⊙	⊙	\$48,249
Chambersburg	14	⊙	7.3	⊙	⊙	\$26,417
Community/Scranton	15	⊙	8.1	⊙	⊙	\$40,274
Ephrata Community	8	⊙	6.5	⊙	⊙	\$28,057
Evangelical Community	24	⊙	4.9	⊙	⊙	\$14,298
Fulton County	0	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	20	⊙	6.1	⊙	⊙	\$31,707
Geisinger Wyoming Valley	19	⊙	6.9	⊙	⊙	\$50,593
Geisinger/Danville	51	⊙	5.6	⊙	●	\$42,382
Gettysburg	5	⊙	5.4	⊙	⊙	\$25,060
Good Samaritan/Lebanon	26	⊙	6.2	⊙	⊙	\$36,471
Hanover	7	⊙	7.3	⊙	⊙	\$33,568
Hazleton General	17	⊙	8.6	⊙	⊙	\$47,756
Heart of Lancaster	15	⊙	4.9	⊙	⊙	\$28,747
Holy Spirit	24	⊙	6.9	⊙	⊙	\$30,653
J C Blair Memorial	13	⊙	7.8	⊙	⊙	\$20,483
Jersey Shore	4	NR	NR	NR	NR	NR
Lancaster General	62	⊙	7.9	⊙	⊙	\$36,878
Lancaster Regional	15	●	6.4	⊙	⊙	\$45,959
Lewistown	8	⊙	4.4	⊙	⊙	\$17,989

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

## Gallbladder Removal - Open

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Lock Haven	4	NR	NR	NR	NR	NR
Marian Community	2	NR	NR	NR	NR	NR
Memorial York	7	⊙	5.5	⊙	⊙	\$12,872
Memorial/Towanda	2	NR	NR	NR	NR	NR
Mercy/Scranton	21	⊙	7.4	⊙	⊙	\$31,735
Mid-Valley	0	NR	NR	NR	NR	NR
Milton S Hershey	30	⊙	6.7	⊙	⊙	\$28,556
Moses Taylor	29	⊙	8.5	⊙	⊙	\$32,066
Mount Nittany	18	⊙	7.1	⊙	⊙	\$24,947
Muncy Valley	2	NR	NR	NR	NR	NR
Pinnacle Health	32	⊙	5.8	⊙	⊙	\$30,131
Pocono	22	⊙	5.8	⊙	⊙	\$36,944
Robert Packer	28	⊙	6.1	⊙	⊙	\$22,820
Shamokin Area Community	4	NR	NR	NR	NR	NR
Soldiers & Sailors	4	NR	NR	NR	NR	NR
Sunbury Community	2	NR	NR	NR	NR	NR
Troy Community	2	NR	NR	NR	NR	NR
Tyler Memorial	3	NR	NR	NR	NR	NR
Waynesboro	4	NR	NR	NR	NR	NR
Williamsport	12	⊙	6.7	⊙	⊙	\$32,640
WVHCS	33	⊙	6.2	⊙	⊙	\$23,774
York	68	⊙	6.6	⊙	⊙	\$23,073
<b>Central &amp; Northeastern</b>	<b>716</b>		<b>6.5</b>			<b>\$31,271</b>
<b>TOTAL: Statewide</b>	<b>2,470</b>		<b>6.7</b>			<b>\$50,753</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Heart Attack - Angioplasty/Stent

The facilities listed below are those that provided advanced cardiac services (angioplasty/stent for heart attack) during the report period.

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Chambersburg	132	⊙	3.6	3.1	⊙	3.1	⊙	\$40,367
Community/Scranton	107	⊙	4.2	2.8	⊙	6.5	⊙	\$39,146
Geisinger Wilkes-Barre	57	⊙	4.8	3.6	⊙	7.1	⊙	\$70,940
Geisinger Wyoming Valley	97	⊙	3.4	5.3	⊙	2.1	⊙	\$60,811
Geisinger/Danville	411	⊙	3.2	5.2	⊙	1.5	⊙	\$66,318
Good Samaritan/Lebanon	94	⊙	3.7	3.3	⊙	1.1	⊙	\$50,829
Holy Spirit	175	⊙	3.7	1.7	⊙	2.3	⊙	\$34,106
Lancaster General	402	⊙	3.9	5.3	⊙	6.6	⊙	\$45,290
Lancaster Regional	47	⊙	3.9	2.2	⊙	4.3	⊙	\$78,803
Mercy/Scranton	228	⊙	3.6	6.7	⊙	3.6	⊙	\$53,332
Milton S Hershey	218	●	3.5	6.2	⊙	5.2	⊙	\$30,944
Mount Nittany	10	⊙	4.3	10.0	⊙	10.0	⊙	\$46,557
Pinnacle Health	375	⊙	3.9	4.6	⊙	4.0	⊙	\$45,540
Pocono	66	⊙	3.6	10.8	⊙	1.5	⊙	\$50,956
Robert Packer	204	⊙	3.2	5.0	⊙	1.5	⊙	\$27,415
Williamsport	147	⊙	3.5	5.5	⊙	2.7	⊙	\$39,159
WVHCS	101	⊙	4.8	2.0	⊙	10.9	●	\$52,290
York	322	⊙	3.8	3.1	⊙	2.5	⊙	\$37,676
<b>Central &amp; Northeastern</b>	<b>3,193</b>		<b>3.7</b>	<b>4.6</b>		<b>3.7</b>		<b>\$46,242</b>
<b>TOTAL: Statewide</b>	<b>12,240</b>		<b>3.8</b>	<b>5.0</b>		<b>5.0</b>		<b>\$67,429</b>

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

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## Hip Fracture - Surgical Repair

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Barnes Kasson County	0	NR	NR	NR	NR	NR
Berwick	29	⊙	5.5	⊙	⊙	\$53,705
Bloomsburg	17	⊙	4.0	●	⊙	\$24,365
Bucktail	0	NR	NR	NR	NR	NA
Carlisle Regional	83	⊙	5.2	⊙	⊙	\$41,941
Chambersburg	143	⊙	6.3	⊙	⊙	\$25,394
Community/Scranton	88	⊙	6.8	⊙	⊙	\$35,798
Ephrata Community	105	⊙	6.0	⊙	⊙	\$28,359
Evangelical Community	93	⊙	5.1	⊙	⊙	\$14,506
Fulton County	0	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	73	⊙	4.5	⊙	⊙	\$30,684
Geisinger Wyoming Valley	75	⊙	6.5	⊙	⊙	\$36,721
Geisinger/Danville	122	●	5.0	⊙	⊙	\$46,662
Gettysburg	56	⊙	5.0	⊙	⊙	\$25,195
Good Samaritan/Lebanon	110	⊙	7.3	⊙	⊙	\$29,657
Hanover	86	⊙	4.2	⊙	⊙	\$16,805
Hazleton General	74	⊙	5.2	⊙	⊙	\$37,526
Heart of Lancaster	31	⊙	8.1	⊙	⊙	\$39,575
Holy Spirit	182	⊙	5.0	⊙	⊙	\$23,653
J C Blair Memorial	1	NR	NR	NR	NR	NR
Jersey Shore	13	⊙	5.6	⊙	⊙	\$13,622
Lancaster General	328	⊙	6.2	⊙	⊙	\$30,070
Lancaster Regional	47	⊙	6.0	⊙	⊙	\$38,651
Lewistown	52	⊙	4.5	⊙	⊙	\$20,319

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

## Hip Fracture - Surgical Repair

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Lock Haven	12	⊙	4.8	⊙	⊙	\$30,722
Marian Community	42	⊙	6.6	⊙	⊙	\$21,468
Memorial York	79	⊙	5.3	⊙	●	\$20,106
Memorial/Towanda	6	⊙	7.4	⊙	⊙	\$32,957
Mercy/Scranton	98	⊙	5.2	⊙	⊙	\$28,493
Mid-Valley	7	⊙	4.8	⊙	⊙	\$22,192
Milton S Hershey	106	⊙	6.4	⊙	⊙	\$28,626
Moses Taylor	124	⊙	6.3	⊙	⊙	\$22,191
Mount Nittany	104	⊙	5.4	⊙	⊙	\$27,111
Muncy Valley	0	NR	NR	NR	NR	NR
Pinnacle Health	223	⊙	4.4	⊙	⊙	\$27,009
Pocono	106	⊙	5.8	⊙	⊙	\$36,335
Robert Packer	117	⊙	5.7	⊙	⊙	\$27,697
Shamokin Area Community	52	⊙	5.9	⊙	⊙	\$14,152
Soldiers & Sailors	41	⊙	4.6	⊙	⊙	\$19,625
Sunbury Community	23	⊙	5.3	⊙	⊙	\$34,896
Troy Community	0	NR	NR	NR	NR	NR
Tyler Memorial	16	⊙	6.0	⊙	⊙	\$30,754
Waynesboro	41	⊙	6.3	⊙	⊙	\$24,036
Williamsport	126	⊙	4.9	⊙	⊙	\$21,719
WVHCS	189	⊙	6.2	⊙	⊙	\$30,503
York	211	⊙	5.3	⊙	⊙	\$18,238
<b>Central &amp; Northeastern</b>	<b>3,590</b>		<b>5.6</b>			<b>\$27,627</b>
<b>TOTAL: Statewide</b>	<b>13,231</b>		<b>5.9</b>			<b>\$40,507</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Hysterectomy - Abdominal

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Barnes Kasson County	4	NR	NR	NR	NR	NR	NR	NR
Berwick	14	⊖	2.8	0.0	⊖	7.1	⊖	\$33,983
Bloomsburg	28	⊖	2.3	0.0	⊖	3.6	⊖	\$13,479
Bucktail	0	NR	NR	NR	NR	NR	NR	NA
Carlisle Regional	46	⊖	2.3	4.3	⊖	2.2	⊖	\$23,028
Chambersburg	134	⊖	2.5	0.7	⊖	2.2	⊖	\$11,270
Community/Scranton	27	⊖	2.8	3.7	⊖	7.4	⊖	\$14,709
Ephrata Community	100	⊖	2.6	4.0	⊖	3.0	⊖	\$11,688
Evangelical Community	98	⊖	1.6	8.2	⊖	0.0	⊖	\$7,734
Fulton County	0	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	66	⊖	2.4	4.5	⊖	3.0	⊖	\$16,255
Geisinger Wyoming Valley	123	⊖	2.5	2.4	⊖	3.3	⊖	\$19,068
Geisinger/Danville	252	●	2.3	14.0	●	2.8	⊖	\$18,044
Gettysburg	98	⊖	2.9	0.0	⊖	3.1	⊖	\$12,923
Good Samaritan/Lebanon	166	⊖	2.6	1.2	⊖	2.4	⊖	\$14,301
Hanover	92	⊖	2.5	3.3	⊖	1.1	⊖	\$11,662
Hazleton General	60	⊖	2.8	1.7	⊖	3.3	⊖	\$12,504
Heart of Lancaster	80	⊖	2.3	6.3	⊖	1.3	⊖	\$22,511
Holy Spirit	56	⊖	3.1	0.0	⊖	5.4	⊖	\$12,992
J C Blair Memorial	44	⊖	1.7	11.4	⊖	0.0	⊖	\$10,890
Jersey Shore	3	NR	NR	NR	NR	NR	NR	NR
Lancaster General	452	⊖	2.4	7.1	⊖	2.2	⊖	\$12,811
Lancaster Regional	22	⊖	2.6	0.0	⊖	4.5	⊖	\$18,301
Lewistown	88	⊖	2.3	1.1	⊖	1.1	⊖	\$8,349

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Hysterectomy - Abdominal

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Lock Haven	23	⊖	2.4	13.0	⊖	4.3	⊖	\$13,189
Marian Community	3	NR	NR	NR	NR	NR	NR	NR
Memorial York	131	⊖	2.8	5.4	⊖	4.6	⊖	\$10,938
Memorial/Towanda	11	⊖	2.4	9.1	⊖	0.0	⊖	\$15,424
Mercy/Scranton	22	⊖	3.4	0.0	⊖	9.1	⊖	\$14,443
Mid-Valley	0	NR	NR	NR	NR	NR	NR	NR
Milton S Hershey	452	⊖	1.9	15.7	●	1.5	○	\$10,735
Moses Taylor	203	⊖	3.2	2.5	⊖	8.9	●	\$12,230
Mount Nittany	99	⊖	2.3	2.0	⊖	0.0	○	\$11,809
Muncy Valley	1	NR	NR	NR	NR	NR	NR	NR
Pinnacle Health	430	⊖	2.7	3.7	⊖	3.7	⊖	\$13,937
Pocono	53	⊖	3.0	3.8	⊖	0.0	⊖	\$15,352
Robert Packer	126	⊖	1.7	18.3	●	0.8	○	\$13,128
Shamokin Area Community	5	⊖	2.4	0.0	⊖	0.0	⊖	\$11,242
Soldiers & Sailors	42	⊖	2.3	4.8	⊖	0.0	⊖	\$10,772
Sunbury Community	4	NR	NR	NR	NR	NR	NR	NR
Troy Community	2	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	36	⊖	2.5	2.8	⊖	5.6	⊖	\$12,112
Waynesboro	58	⊖	2.8	1.7	⊖	0.0	⊖	\$10,790
Williamsport	192	⊖	2.9	2.1	⊖	4.2	⊖	\$11,528
WVHCS	226	⊖	2.6	9.7	●	4.4	⊖	\$10,818
York	442	⊖	2.9	2.9	○	5.7	⊖	\$11,094
<b>Central &amp; Northeastern</b>	<b>4,691</b>		<b>2.5</b>	<b>6.0</b>		<b>3.2</b>		<b>\$12,815</b>
<b>TOTAL: Statewide</b>	<b>15,703</b>		<b>2.7</b>	<b>5.0</b>		<b>5.0</b>		<b>\$24,200</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup>While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Hysterectomy - Vaginal

Hospital	Cases	Length of Stay	Readmission Rating		Average Charge
			For Any Reason	For Complication or Infection	
Barnes Kasson County	1	NR	NR	NR	NR
Berwick	4	NR	NR	NR	NR
Bloomsburg	37	1.3	○	○	\$12,610
Bucktail	0	NR	NR	NR	NA
Carlisle Regional	67	1.4	○	○	\$24,642
Chambersburg	139	1.4	○	○	\$8,880
Community/Scranton	2	NR	NR	NR	NR
Ephrata Community	22	1.6	●	○	\$12,467
Evangelical Community	242	1.2	○	○	\$5,995
Fulton County	0	NR	NR	NR	NR
Geisinger Wilkes-Barre	10	1.8	○	○	\$13,900
Geisinger Wyoming Valley	14	1.4	○	●	\$22,937
Geisinger/Danville	59	1.6	○	○	\$22,101
Gettysburg	52	2.0	○	○	\$11,488
Good Samaritan/Lebanon	36	1.9	○	○	\$13,123
Hanover	41	1.5	○	○	\$12,832
Hazleton General	25	1.9	○	○	\$14,596
Heart of Lancaster	15	1.3	○	○	\$21,811
Holy Spirit	36	1.6	○	○	\$11,257
J C Blair Memorial	61	1.1	○	○	\$9,782
Jersey Shore	4	NR	NR	NR	NR
Lancaster General	175	1.7	○	○	\$13,592
Lancaster Regional	5	1.4	○	○	\$16,301
Lewistown	44	1.2	○	○	\$11,561

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

## Hysterectomy - Vaginal

Hospital	Cases	Length of Stay	Readmission Rating		Average Charge
			For Any Reason	For Complication or Infection	
Lock Haven	14	1.2	⊙	⊙	\$8,550
Marian Community	0	NR	NR	NR	NR
Memorial York	23	1.5	⊙	⊙	\$9,010
Memorial/Towanda	39	2.0	⊙	⊙	\$13,174
Mercy/Scranton	28	2.1	⊙	⊙	\$11,773
Mid-Valley	0	NR	NR	NR	NR
Milton S Hershey	87	1.2	●	●	\$9,155
Moses Taylor	12	2.4	⊙	⊙	\$13,172
Mount Nittany	71	1.4	⊙	⊙	\$10,829
Muncy Valley	0	NR	NR	NR	NR
Pinnacle Health	233	1.5	●	●	\$11,928
Pocono	23	2.0	⊙	⊙	\$16,557
Robert Packer	30	1.2	⊙	⊙	\$10,311
Shamokin Area Community	1	NR	NR	NR	NR
Soldiers & Sailors	7	1.5	⊙	⊙	\$18,816
Sunbury Community	6	1.8	⊙	⊙	\$21,044
Troy Community	0	NR	NR	NR	NR
Tyler Memorial	0	NR	NR	NR	NR
Waynesboro	19	1.7	⊙	⊙	\$11,566
Williamsport	24	2.3	⊙	⊙	\$9,011
WVHCS	100	1.2	⊙	⊙	\$10,759
York	84	1.6	⊙	⊙	\$9,060
<b>Central &amp; Northeastern</b>	<b>1,900</b>	<b>1.5</b>			<b>\$11,586</b>
<b>TOTAL: Statewide</b>	<b>6,824</b>	<b>1.6</b>			<b>\$18,071</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Prostatectomy - Radical

Hospital	Cases	Length of Stay	Outlier Cases				Average Charge
			Short Length of Stay		Long Length of Stay		
			%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Barnes Kasson County	0	NR	NR	NR	NR	NR	NR
Berwick	2	NR	NR	NR	NR	NR	NR
Bloomsburg	9	3.4	0.0	⊖	11.1	⊖	\$23,463
Bucktail	0	NR	NR	NR	NR	NR	NA
Carlisle Regional	3	NR	NR	NR	NR	NR	NR
Chambersburg	40	2.7	0.0	⊖	9.8	⊖	\$15,096
Community/Scranton	1	NR	NR	NR	NR	NR	NR
Ephrata Community	8	2.4	0.0	⊖	0.0	⊖	\$13,817
Evangelical Community	15	3.1	0.0	⊖	0.0	⊖	\$9,613
Fulton County	0	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	9	3.0	0.0	⊖	11.1	⊖	\$25,764
Geisinger Wyoming Valley	11	3.6	0.0	⊖	0.0	⊖	\$30,612
Geisinger/Danville	87	1.4	6.9	⊖	0.0	⊖	\$36,297
Gettysburg	1	NR	NR	NR	NR	NR	NR
Good Samaritan/Lebanon	43	2.7	2.3	⊖	0.0	⊖	\$24,570
Hanover	1	NR	NR	NR	NR	NR	NR
Hazleton General	0	NR	NR	NR	NR	NR	NR
Heart of Lancaster	9	2.8	0.0	⊖	0.0	⊖	\$34,927
Holy Spirit	14	3.1	7.1	⊖	7.1	⊖	\$13,898
J C Blair Memorial	0	NR	NR	NR	NR	NR	NR
Jersey Shore	0	NR	NR	NR	NR	NR	NR
Lancaster General	74	2.6	1.4	⊖	4.1	⊖	\$16,423
Lancaster Regional	92	1.4	11.7	●	4.3	⊖	\$41,388
Lewistown	0	NR	NR	NR	NR	NR	NR

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Prostatectomy - Radical

Hospital	Cases	Length of Stay	Outlier Cases				Average Charge
			Short Length of Stay		Long Length of Stay		
			%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Lock Haven	0	NR	NR	NR	NR	NR	NR
Marian Community	1	NR	NR	NR	NR	NR	NR
Memorial York	1	NR	NR	NR	NR	NR	NR
Memorial/Towanda	0	NR	NR	NR	NR	NR	NR
Mercy/Scranton	41	2.8	0.0	⊖	4.9	⊖	\$23,939
Mid-Valley	0	NR	NR	NR	NR	NR	NR
Milton S Hershey	46	2.5	4.3	⊖	6.5	⊖	\$19,401
Moses Taylor	21	2.7	4.5	⊖	4.5	⊖	\$13,786
Mount Nittany	28	2.5	7.1	⊖	3.6	⊖	\$16,848
Muncy Valley	0	NR	NR	NR	NR	NR	NR
Pinnacle Health	57	3.5	0.0	⊖	13.6	●	\$24,281
Pocono	14	3.5	0.0	⊖	0.0	⊖	\$21,811
Robert Packer	15	4.4	0.0	⊖	26.7	●	\$35,149
Shamokin Area Community	0	NR	NR	NR	NR	NR	NR
Soldiers & Sailors	0	NR	NR	NR	NR	NR	NR
Sunbury Community	3	NR	NR	NR	NR	NR	NR
Troy Community	0	NR	NR	NR	NR	NR	NR
Tyler Memorial	0	NR	NR	NR	NR	NR	NR
Waynesboro	0	NR	NR	NR	NR	NR	NR
Williamsport	43	3.1	0.0	⊖	7.0	⊖	\$16,034
WVHCS	34	3.3	2.9	⊖	8.8	⊖	\$16,561
York	23	3.4	0.0	⊖	12.5	⊖	\$14,918
<b>Central &amp; Northeastern</b>	<b>747</b>	<b>2.6</b>	<b>3.4</b>		<b>6.1</b>		<b>\$24,504</b>
<b>TOTAL: Statewide</b>	<b>3,830</b>	<b>2.5</b>	<b>4.9</b>		<b>5.0</b>		<b>\$38,684</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

<sup>†</sup> While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊕ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Prostatectomy - Transurethral

Hospital	Cases	Length of Stay	Average Charge
Barnes Kasson County	0	NR	NR
Berwick	4	NR	NR
Bloomsburg	10	1.6	\$13,331
Bucktail	0	NR	NA
Carlisle Regional	8	2.2	\$20,528
Chambersburg	27	1.7	\$12,170
Community/Scranton	8	2.1	\$9,853
Ephrata Community	8	3.1	\$15,043
Evangelical Community	13	2.0	\$7,019
Fulton County	0	NR	NR
Geisinger Wilkes-Barre	5	2.3	NR
Geisinger Wyoming Valley	3	NR	NR
Geisinger/Danville	21	2.1	\$17,152
Gettysburg	4	NR	NR
Good Samaritan/Lebanon	45	2.9	\$14,583
Hanover	6	2.3	\$8,447
Hazleton General	9	3.2	\$13,780
Heart of Lancaster	15	2.7	\$17,473
Holy Spirit	37	2.2	\$9,674
J C Blair Memorial	0	NR	NR
Jersey Shore	0	NR	NR
Lancaster General	41	2.6	\$13,227
Lancaster Regional	8	1.3	\$15,304
Lewistown	36	2.6	\$7,632

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

## Prostatectomy - Transurethral

Hospital	Cases	Length of Stay	Average Charge
Lock Haven	3	NR	NR
Marian Community	0	NR	NR
Memorial York	36	3.8	\$8,265
Memorial/Towanda	0	NR	NR
Mercy/Scranton	15	2.4	\$11,971
Mid-Valley	0	NR	NR
Milton S Hershey	5	1.5	\$9,618
Moses Taylor	12	3.6	\$11,264
Mount Nittany	28	1.8	\$9,598
Muncy Valley	0	NR	NR
Pinnacle Health	75	2.9	\$11,418
Pocono	49	2.0	\$11,451
Robert Packer	33	1.9	\$12,072
Shamokin Area Community	23	3.0	\$6,843
Soldiers & Sailors	14	2.3	\$6,836
Sunbury Community	19	2.8	\$15,879
Troy Community	0	NR	NR
Tyler Memorial	0	NR	NR
Waynesboro	0	NR	NR
Williamsport	39	2.1	\$11,848
WVHCS	26	2.6	\$13,624
York	77	2.5	\$8,386
<b>Central &amp; Northeastern</b>	<b>769</b>	<b>2.5</b>	<b>\$11,437</b>
<b>TOTAL: Statewide</b>	<b>3,776</b>	<b>2.6</b>	<b>\$17,918</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Removal of Blockage of Neck Vessels

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Barnes Kasson County	0	NR	NR	NR	NR	NR
Berwick	0	NR	NR	NR	NR	NR
Bloomsburg	0	NR	NR	NR	NR	NR
Bucktail	0	NR	NR	NR	NR	NA
Carlisle Regional	43	⊙	3.2	⊙	⊙	\$37,028
Chambersburg	29	⊙	1.7	⊙	⊙	\$13,509
Community/Scranton	95	⊙	2.8	⊙	⊙	\$16,833
Ephrata Community	27	⊙	2.1	⊙	⊙	\$15,605
Evangelical Community	30	⊙	1.5	⊙	⊙	\$8,758
Fulton County	0	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	35	⊙	2.5	⊙	⊙	\$21,269
Geisinger Wyoming Valley	67	⊙	1.8	⊙	⊙	\$21,074
Geisinger/Danville	130	⊙	1.4	⊙	⊙	\$20,235
Gettysburg	0	NR	NR	NR	NR	NR
Good Samaritan/Lebanon	54	⊙	2.7	⊙	⊙	\$22,763
Hanover	20	⊙	2.9	⊙	⊙	\$15,974
Hazleton General	7	⊙	2.5	⊙	⊙	\$18,736
Heart of Lancaster	0	NR	NR	NR	NR	NR
Holy Spirit	62	⊙	2.1	⊙	⊙	\$13,301
J C Blair Memorial	0	NR	NR	NR	NR	NR
Jersey Shore	0	NR	NR	NR	NR	NR
Lancaster General	160	⊙	2.1	⊙	⊙	\$16,661
Lancaster Regional	14	⊙	2.7	⊙	⊙	\$34,662
Lewistown	5	⊙	2.5	⊙	⊙	\$12,604

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

## Removal of Blockage of Neck Vessels

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Lock Haven	0	NR	NR	NR	NR	NR
Marian Community	14	⊙	2.1	⊙	⊙	\$10,218
Memorial York	0	NR	NR	NR	NR	NR
Memorial/Towanda	0	NR	NR	NR	NR	NR
Mercy/Scranton	44	⊙	2.3	⊙	⊙	\$17,247
Mid-Valley	0	NR	NR	NR	NR	NR
Milton S Hershey	80	⊙	2.2	⊙	⊙	\$20,779
Moses Taylor	19	⊙	3.2	⊙	⊙	\$14,694
Mount Nittany	31	⊙	2.6	⊙	⊙	\$12,492
Muncy Valley	0	NR	NR	NR	NR	NR
Pinnacle Health	44	⊙	2.3	⊙	⊙	\$18,818
Pocono	36	⊙	2.0	⊙	⊙	\$17,185
Robert Packer	39	⊙	2.3	⊙	⊙	\$17,660
Shamokin Area Community	0	NR	NR	NR	NR	NR
Soldiers & Sailors	0	NR	NR	NR	NR	NR
Sunbury Community	0	NR	NR	NR	NR	NR
Troy Community	0	NR	NR	NR	NR	NR
Tyler Memorial	0	NR	NR	NR	NR	NR
Waynesboro	2	NR	NR	NR	NR	NR
Williamsport	79	⊙	1.5	⊙	⊙	\$12,468
WVHCS	88	⊙	2.6	⊙	⊙	\$15,410
York	75	⊙	2.1	⊙	⊙	\$10,547
<b>Central &amp; Northeastern</b>	<b>1,329</b>		<b>2.2</b>			<b>\$17,466</b>
<b>TOTAL: Statewide</b>	<b>5,206</b>		<b>2.4</b>			<b>\$27,882</b>

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 3.

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- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.



**Pennsylvania Health Care Cost Containment Council**

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Hospitals may have commented on this report.  
Copies of their comments are available on the PHC4 Web site or by request.