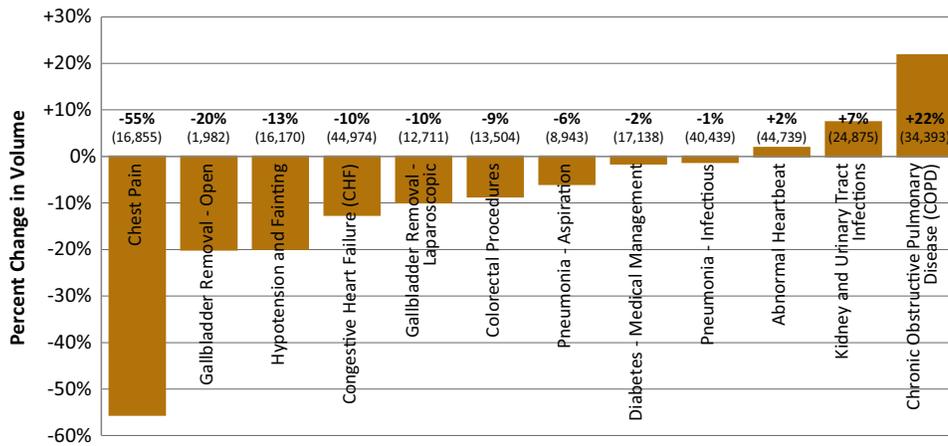


# Key Findings

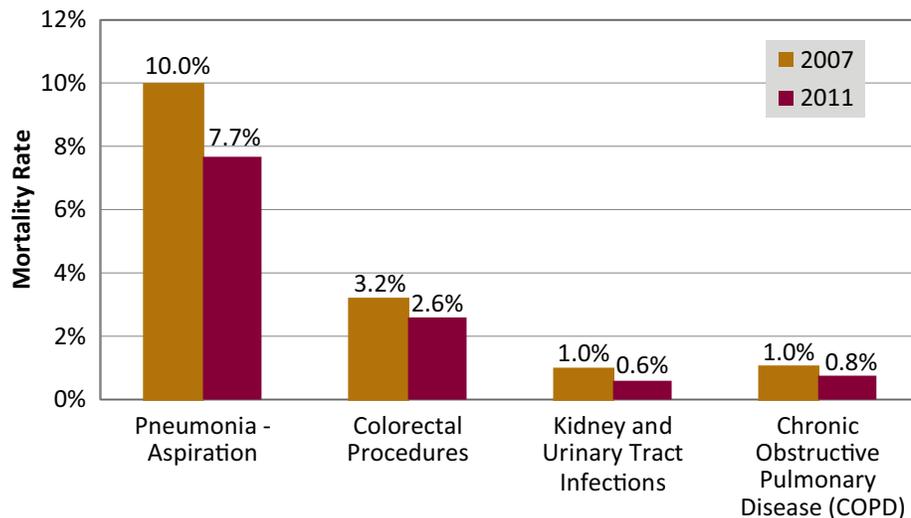
## Volume of Hospital Admissions

- The following chart shows the statewide percent change in volume, from 2007 to 2011, for each of the 12 conditions and procedures included in this report (admission totals in 2011 are shown in parentheses). Chest Pain had the largest percentage decrease in volume (-55%) from 37,868 admissions in 2007 to 16,855 admissions in 2011. Chronic Obstructive Pulmonary Disease (COPD) had the largest percentage increase in volume (+22%) from 28,251 admissions in 2007 to 34,393 admissions in 2011.



## Mortality Rates

- Statewide in-hospital mortality rates showed a statistically significant decrease in 4 of the 12 conditions between 2007 and 2011. Of these, the largest decrease was in Pneumonia - Aspiration, where the mortality rate dropped from 10.0% in 2007 to 7.7% in 2011. Other reported conditions and procedures showed no significant difference.



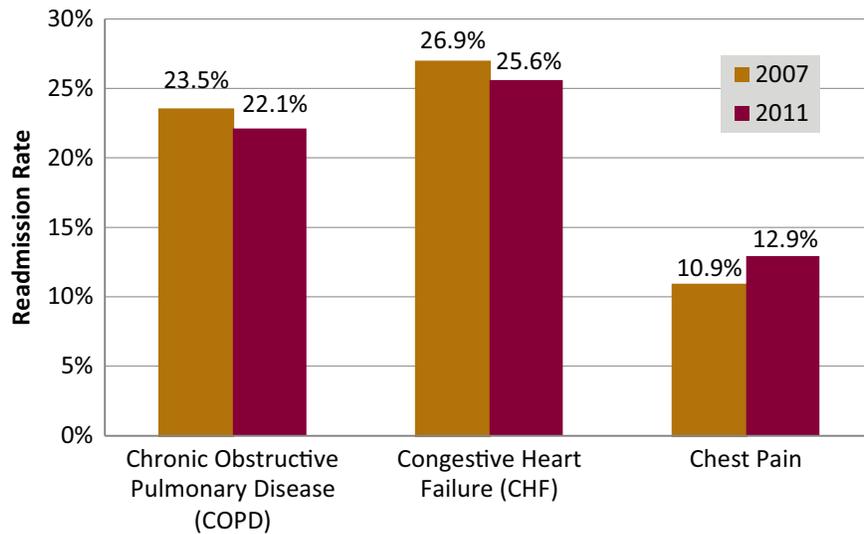
## Key Findings

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- After accounting for patient risk, hospitals in the Western Pennsylvania region as a whole had a significantly higher mortality rate than the rest of the state for Congestive Heart Failure (CHF), Pneumonia - Aspiration, and Pneumonia - Infectious. Other reported conditions and procedures showed no significant difference.

### Readmissions for Any Reason

- Statewide readmission rates showed a statistically significant decrease from 2007 to 2011 in Chronic Obstructive Pulmonary Disease (COPD) and Congestive Heart Failure (CHF). Chest Pain was the only reported condition to show a statistically significant increase in the readmission rate, from 10.9% in 2007 to 12.9% in 2011. Other reported conditions and procedures showed no significant difference.



- After accounting for patient risk, hospitals in the Western Pennsylvania region as a whole had a significantly lower readmission rate than the rest of the state for Pneumonia - Infectious. Other reported conditions and procedures showed no significant difference.

### Medicare Fee-For-Service Payments (2010 data)

- Medicare fee-for-service was the primary payer for 41.7% of Pennsylvania admissions in 2010 for the conditions and procedures in this report, for a total of over \$755 million.
- The condition with the highest average Medicare fee-for-service payment in 2010 was Colorectal Procedures, at \$18,619 per hospitalization. The condition with the lowest average Medicare fee-for-service payment in 2010 was Chest Pain, at \$2,678.