

**PA Health Care Cost
Containment Council**

**Central and Northeastern
Pennsylvania**

Hospital Performance Report

**October 2015 – September 2016
Data**



PHC4

October 2017

About the Report

Hospital Performance Report for Pennsylvania

Produced by the Pennsylvania Health Care Cost Containment Council (PHC4), this report displays hospital-specific results for inpatient hospital discharges from the period October 2015 through September 2016. In addition to this **About the Report** document, which provides a full description of the *Hospital Performance Report*, the PHC4 website also presents the following accompanying materials:

- | | |
|---------------------|---------------------|
| ⇒ Key Findings | ⇒ Hospital Comments |
| ⇒ Hospital Results | ⇒ Technical Notes |
| ⇒ Medicare Payments | ⇒ Downloadable Data |

Table of Contents

| | |
|--------------------------------|-----------|
| About the Report | 1 |
| Key Findings | 7 |
| Hospital Results | 15 |
| Medicare Payments | 47 |

About PHC4

Created by the PA General Assembly in 1986, the PA Health Care Cost Containment Council (PHC4) is an independent state agency charged with collecting, analyzing and reporting information that can be used to improve the quality and restrain the cost of health care in the state. Today, PHC4 is a recognized national leader in public health care reporting. More than 840,000 public reports on patient treatment results are downloaded from the PHC4 website each year, and nearly 100 organizations and individuals annually utilize PHC4's special requests process to access and use data. PHC4 is governed by a 25-member board of directors, representing business, labor, consumers, health care providers, insurers, and state government.

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About the Report

What is the purpose of this report?

Before we make a major purchase, we usually gather as much information as we can about the available product or service. By comparing what we learn about the quality of the product as well as what will be charged for it, we decide on what we believe is the best product for the best possible price. When it comes to health care services, unfortunately, the information available to consumers and purchasers to make such decisions is limited and often not widely accessible. PHC4's *Hospital Performance Report* (HPR) can help to fill the information vacuum and assist consumers and purchasers in making more informed health care decisions. The HPR can serve as an aid to providers in highlighting additional opportunities for quality improvement and cost containment. It should not be used in emergency situations.

About this report

- This report includes hospital-specific outcomes for 16 different medical conditions and surgical procedures, as defined by ICD-10-CM/PCS (International Classification of Diseases, Tenth Revision, Clinical Modification/Procedure Coding System) codes and Medicare Severity – Diagnosis-Related Groups (MS-DRGs). Technical Notes relevant to this report provide additional detail. They are posted to PHC4's website at www.phc4.org.
- This report covers adult (18 years and older) inpatient hospital discharges, regardless of payer, during the period October 2015 through September 2016.
- This report is divided into three regional versions: Western Pennsylvania, Central and Northeastern Pennsylvania, and Southeastern Pennsylvania. (Please see sidebar on this page for details.)
- All Pennsylvania general acute care and several specialty general acute care hospitals are included. Children's hospitals and some specialty hospitals are not reported because they

This report is divided into three regional versions: Western Pennsylvania, Central and Northeastern Pennsylvania, and Southeastern Pennsylvania.

Western Pennsylvania includes the following counties:

Allegheny ▪ Armstrong ▪ Beaver
Bedford ▪ Blair ▪ Butler ▪ Cambria
Cameron ▪ Clarion ▪ Clearfield
Crawford ▪ Elk ▪ Erie ▪ Fayette
Forest ▪ Greene ▪ Indiana
Jefferson ▪ Lawrence ▪ McKean
Mercer ▪ Potter ▪ Somerset
Venango ▪ Warren ▪ Washington
Westmoreland

Central and Northeastern Pennsylvania includes the following counties:

Adams ▪ Bradford ▪ Centre
Clinton ▪ Columbia ▪ Cumberland
Dauphin ▪ Franklin ▪ Fulton
Huntingdon ▪ Juniata
Lackawanna ▪ Lancaster
Lebanon ▪ Luzerne ▪ Lycoming
Mifflin ▪ Monroe ▪ Montour
Northumberland ▪ Perry ▪ Pike
Snyder ▪ Sullivan ▪ Susquehanna
Tioga ▪ Union ▪ Wayne ▪ Wyoming
York

Southeastern Pennsylvania includes the following counties:

Berks ▪ Bucks ▪ Carbon ▪ Chester
Delaware ▪ Lehigh ▪ Montgomery
Northampton ▪ Philadelphia
Schuylkill

About the Report

typically treat few cases relevant to the conditions and procedures included in this report. Hospitals that closed or merged with other facilities during the study period are not reported, nor are hospitals that recently opened since the data available does not represent the full time frame of the report.

- Hospital names have been shortened in many cases for formatting purposes. Hospital names may be different today than they were during the period covered in this report due to mergers and name changes.

About the data

Hospital discharge data compiled for this report was submitted to PHC4 by Pennsylvania hospitals. The data was subject to standard validation processes by PHC4 and verified for accuracy by the hospitals at the individual case level. The ultimate responsibility for data accuracy and completeness lied with each individual hospital.

Medicare fee-for-service payment data was obtained from the Centers for Medicare and Medicaid Services (CMS). The most recent Medicare payment data available to PHC4 for use in this report was for calendar year 2015.

Accounting for high-risk patients

Included in the data PHC4 receives from Pennsylvania hospitals is information indicating, in simple terms, “how sick the patient was” on admission to the hospital—information that is used to account for high-risk patients. Even though two patients may be admitted to the hospital with the same illness, there may be differences in the seriousness of their conditions. In order to report fair comparisons among hospitals, PHC4 uses a complex mathematical formula to risk adjust the mortality and readmission data included in this report, meaning that hospitals receive “extra credit” for treating patients who are more seriously ill or at a greater risk than others. Risk adjusting the data is important because sicker patients may be more likely to die or be readmitted.

PHC4 uses clinical laboratory data, patient characteristics such as age and gender, and billing codes that describe the patient’s medical conditions such as the presence of cancer, heart failure, etc., to calculate risk for the patients in this report.

About the Report

PHC4 uses clinical laboratory data, patient characteristics such as age and gender, and billing codes that describe the patient's medical conditions such as the presence of cancer, heart failure, etc., to calculate risk for the patients in this report. A comprehensive description of the risk-adjustment techniques used for this report can be found in the Technical Notes on PHC4's website at www.phc4.org.

What is measured in this report and why is it important?

In the hospital results section of the report are the following measures, reported for each hospital:

- **Total Number of Cases.** For each hospital, the number of cases for each condition, after exclusions, is reported. This can give a patient or a purchaser an idea of the experience each facility has in treating such patients. Studies have suggested that, in at least some areas, the volume of cases treated by a physician or hospital can be a factor in the success of the treatment. The number of cases represents separate hospital admissions, not individual patients. A patient admitted several times would be included each time in the number of cases. Outcome data are not reported for hospitals that have fewer than five cases evaluated for a measure; such low volume cannot be considered meaningful and, as such, the outcome data are not displayed. Not Reported (NR) appears in the table when this occurs. Note that small or specialty hospitals may report low volume due to the unique patient population they serve or geographic location.
- **Risk-Adjusted Mortality.** This measure is reported as a statistical rating that represents the number of patients who died during the hospital stay. To determine the mortality rating, PHC4 compares the number of patients one could reasonably expect to die in a given hospital for a given condition, after accounting for patient risk, with the actual number of deaths. (Please see "Understanding the Symbols" box on this page.) PHC4 has used risk-

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to what is expected after accounting for patient risk.

- **Hospital's rate was significantly lower than expected.** Fewer patients died or were readmitted than could be attributed to patient risk and random variation.
- ◉ **Hospital's rate was not significantly different than expected.** The number of patients who died or were readmitted was within the range anticipated based on patient risk and random variation.
- **Hospital's rate was significantly higher than expected.** More patients died or were readmitted than could be attributed to patient risk and random variation.

About the Report

adjusted mortality statistics as a measure of quality since it began publishing reports in 1989. The mortality analysis includes Do Not Resuscitate (DNR) cases. Because DNR is defined and utilized differently across Pennsylvania hospitals, such records are retained in the analysis to avoid potential biases in mortality ratings.

- **Risk-Adjusted 30-Day Readmissions.** This measure is reported as a statistical rating that represents the number of patients who are readmitted following their initial hospital stay. A readmission is defined as a subsequent acute care hospitalization, for any reason to any Pennsylvania general and specialty general acute care hospital, where the admit date is within 30 days of the discharge date of the original hospitalization. To determine the risk-adjusted readmission rating, PHC4 compares the number of patients one could reasonably expect to be readmitted, after accounting for patient risk, with the actual number of readmissions. (Please see “Understanding the Symbols” box on the previous page.) While some re-hospitalizations can be expected, high quality care may lessen the need for subsequent hospitalizations. For conditions or procedures that are likely to result in a high number of planned readmissions, either the readmission measure is not reported or the potentially planned readmissions are excluded from the analysis (based on methods developed by the CMS for identifying potentially planned readmissions; please refer to the Technical Notes at www.phc4.org).
- **Case Mix Adjusted Average Hospital Charge.** This report also includes the average hospital charge for each of the 16 conditions and procedures. The average hospital charge represents the entire length of the hospital stay. It does not include professional fees (e.g., physician fees) or other additional post-discharge costs, such as rehabilitation treatment, long-term care and/or home health care. The average charge is adjusted for the mix of cases that are specific to each hospital. (For more information, please refer to the Technical Notes at www.phc4.org). While charges are what the hospital reports on the billing form, they may not accurately represent the amount a hospital receives in payment for the services it delivers. Hospitals usually receive less in actual payments than the listed charge.

In the payments section of the report is information about Medicare payments:

- **Medicare Payments.** This section of the report displays the average payments made by Medicare fee-for service for the 16 medical conditions/surgical procedures included in this report. This information is also broken down by the MS-DRGs associated with each condition. The most recent payment data available to PHC4 is for calendar year 2015.

About the Report

Uses of this report

This report can be used as a tool to examine hospital performance in specific treatment categories. It is not intended to be a sole source of information for making decisions about health care, nor should it be used to generalize about the overall quality of care provided by a hospital. Readers of this report should use it in discussions with their physicians who can answer specific questions and concerns about their care.

- **Patients/Consumers** can use this report as an aid in making decisions about where to seek treatment for the conditions detailed in this report. This report should be used in conjunction with a physician or other health care provider when making health care decisions.
- **Group Benefits Purchasers/Insurers** can use this report as part of a process in determining where employees, subscribers, members, or participants should go for their health care.
- **Health Care Providers** can use this report as an aid in identifying opportunities for quality improvement and cost containment.
- **Policymakers/Public Officials** can use this report to enhance their understanding of health care issues, to ask provocative questions, to raise public awareness of important issues, and to help constituents identify health care options.
- **Everyone** can use this information to raise important questions about why differences exist in the quality and efficiency of care.

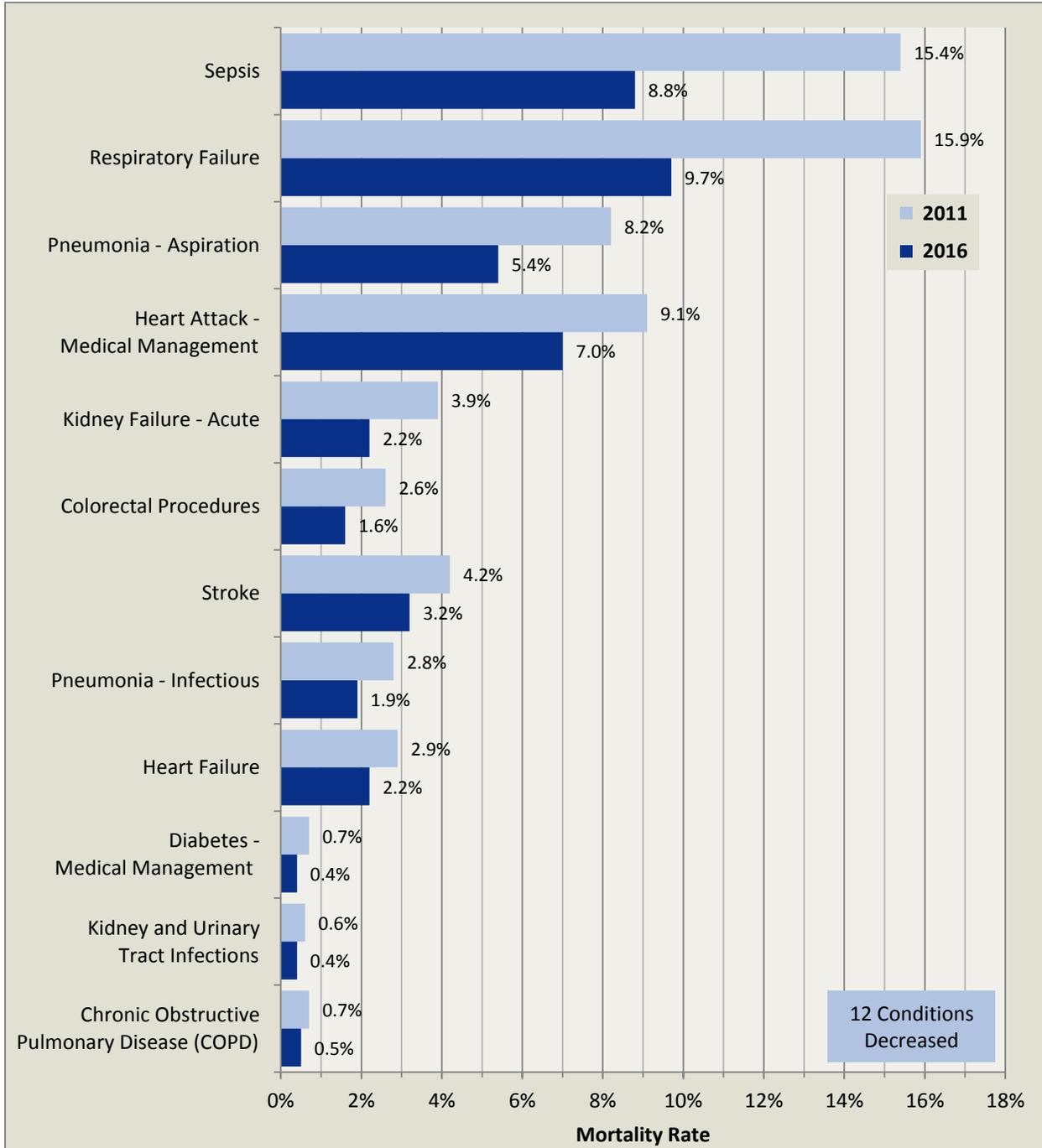
The measurement of quality is highly complex, and the information used to capture such measures is limited. A hospital death or a readmission is sometimes an unavoidable consequence of a patient's medical condition. Hospitals and physicians may do everything right, and the patient may still die or need to be readmitted. However, the statistical methods used for this report eliminate many of the clinical and medical differences among the patients in different hospitals, thereby allowing us to explore the real differences in the measures presented. The pursuit of these issues can play an important and constructive role in raising the quality while restraining the cost of health care in the Commonwealth of Pennsylvania.

Key Findings

Mortality Rates

Statewide in-hospital mortality rates showed a statistically significant decrease from federal fiscal year 2011 to federal fiscal year 2016 in 12 of the 15 conditions reported. The largest decrease was in Sepsis, where the mortality rate decreased from 15.4% in 2011 to 8.8% in 2016.

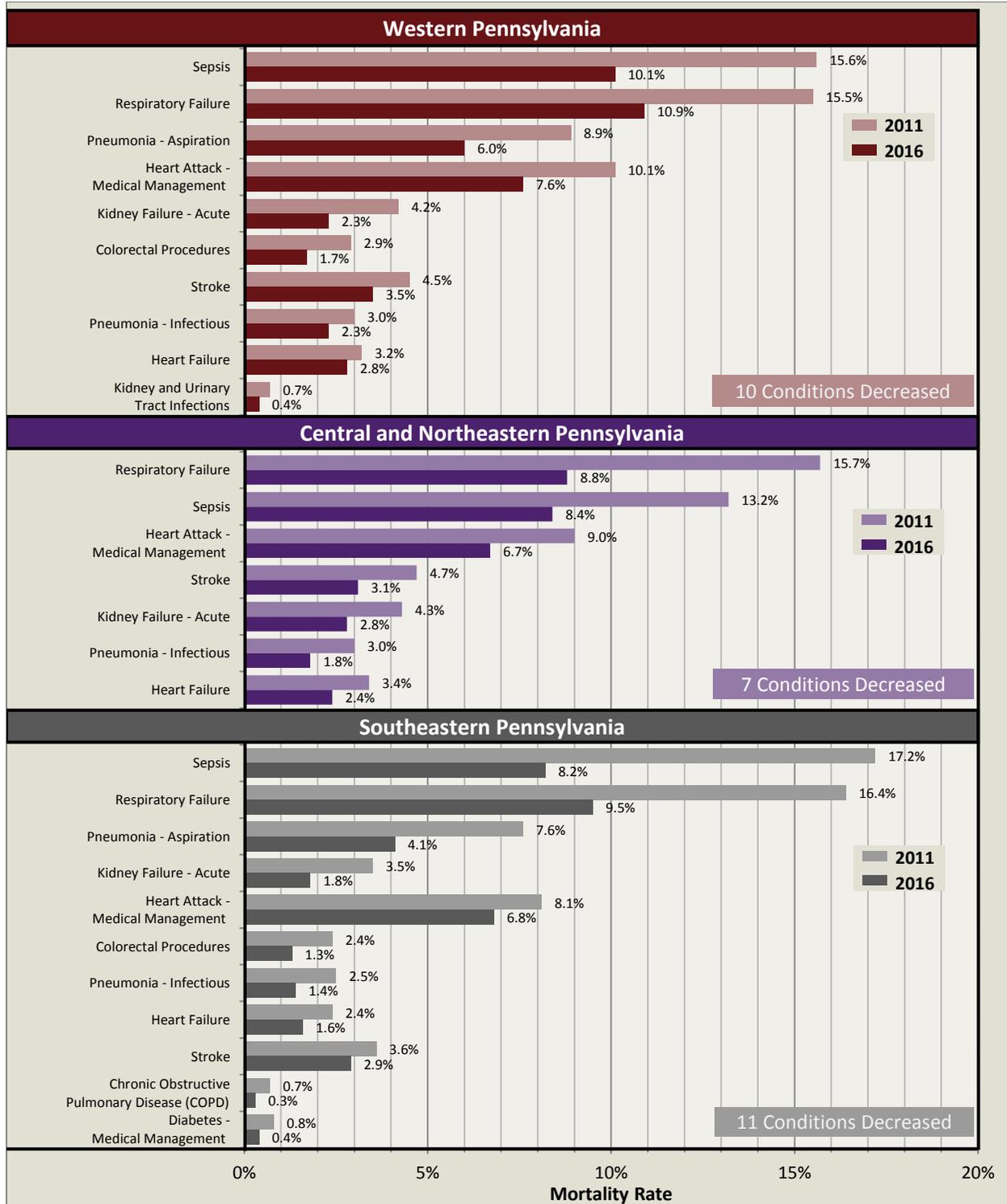
No condition showed a statistically significant increase in in-hospital mortality rate during this time period.



Key Findings

Mortality Rates

Across different areas of the state, in-hospital mortality rates showed statistically significant differences in the following conditions from federal fiscal year 2011 to federal fiscal year 2016.



Mortality Rates

Taking patient risk into account, the following in-hospital mortality rates across the different areas of the state were significantly higher or lower than expected in federal fiscal year 2016.

| | Conditions with Mortality Rates Statistically <u>Lower</u> than Expected | Conditions with Mortality Rates Statistically <u>Higher</u> than Expected |
|----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Western Pennsylvania | <ul style="list-style-type: none"> • None | <ul style="list-style-type: none"> • Heart Attack – Medical Management • Heart Failure • Pneumonia – Infectious • Respiratory Failure • Sepsis • Stroke |
| Central and Northeastern Pennsylvania | <ul style="list-style-type: none"> • None | <ul style="list-style-type: none"> • Chronic Obstructive Pulmonary Disease (COPD) • Kidney and Urinary Tract Infections • Kidney Failure – Acute • Pneumonia – Aspiration |
| Southeastern Pennsylvania | <ul style="list-style-type: none"> • Chronic Obstructive Pulmonary Disease (COPD) • Heart Attack – Medical Management • Heart Failure • Kidney Failure – Acute • Pneumonia – Aspiration • Pneumonia – Infectious • Respiratory Failure • Sepsis • Stroke | <ul style="list-style-type: none"> • None |

Western Pennsylvania:

- After accounting for patient risk, hospitals in Western Pennsylvania as a whole had in-hospital mortality rates that were significantly higher than expected for six conditions, the greatest difference occurring in Sepsis (10.1% actual, 8.6% expected).

Central and Northeastern Pennsylvania:

- After accounting for patient risk, hospitals in Central and Northeastern Pennsylvania as a whole had in-hospital mortality rates that were significantly higher than expected for four conditions, the greatest difference occurring in Pneumonia – Aspiration (6.7% actual, 5.1% expected).

Southeastern Pennsylvania:

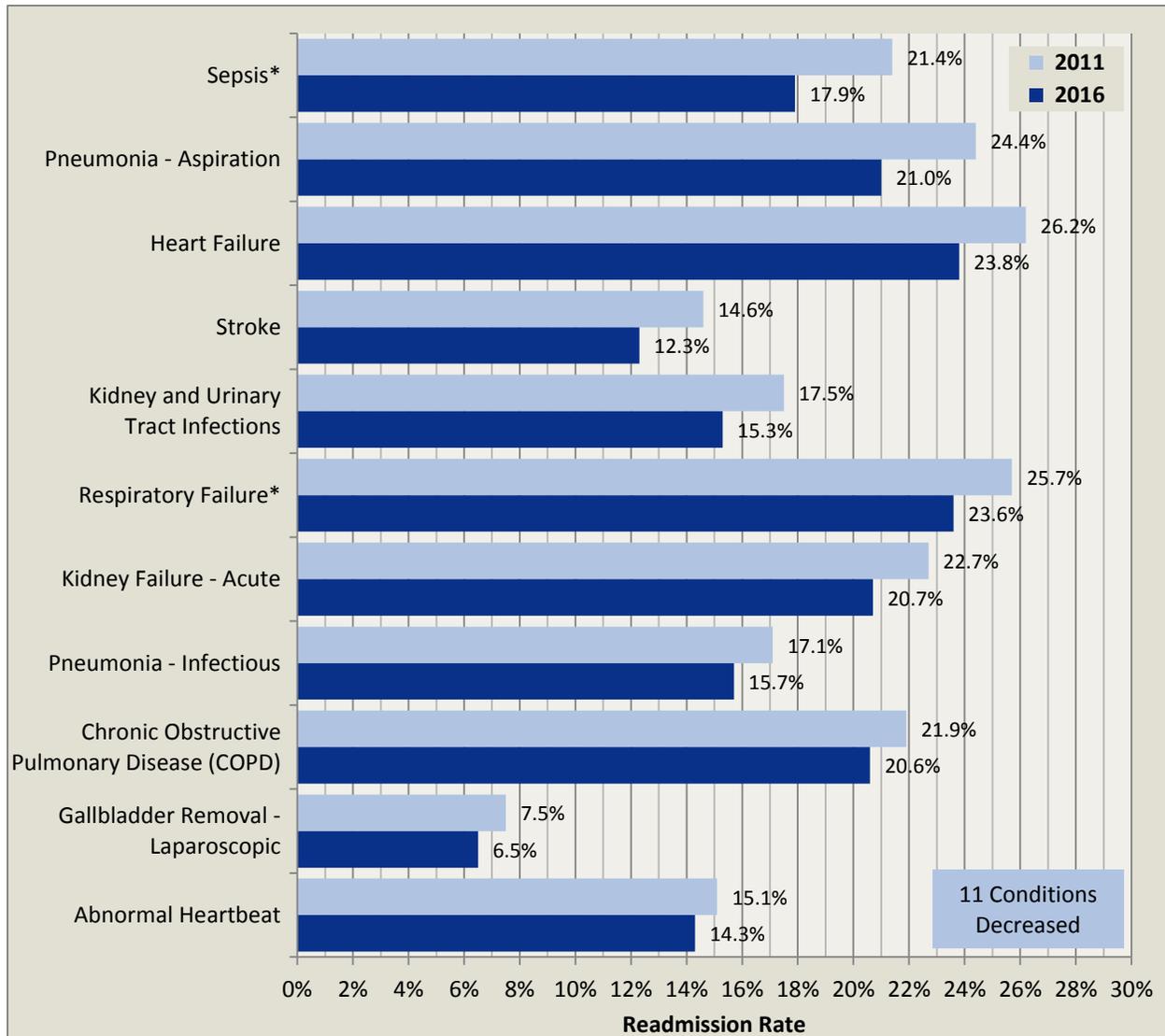
- After accounting for patient risk, hospitals in Southeastern Pennsylvania as a whole had in-hospital mortality rates that were significantly lower than expected for nine conditions, the greatest difference occurring in Pneumonia – Aspiration (4.1% actual, 5.5% expected).

Key Findings

Readmission Rates

Statewide 30-day readmission rates showed a statistically significant decrease from federal fiscal year 2011 to federal fiscal year 2016 in 11 of the 13 conditions reported. The largest decrease was in Sepsis, where the readmission rate decreased from 21.4% in 2011 to 17.9% in 2016.

No condition showed a statistically significant increase in 30-day readmission rate during this time period.

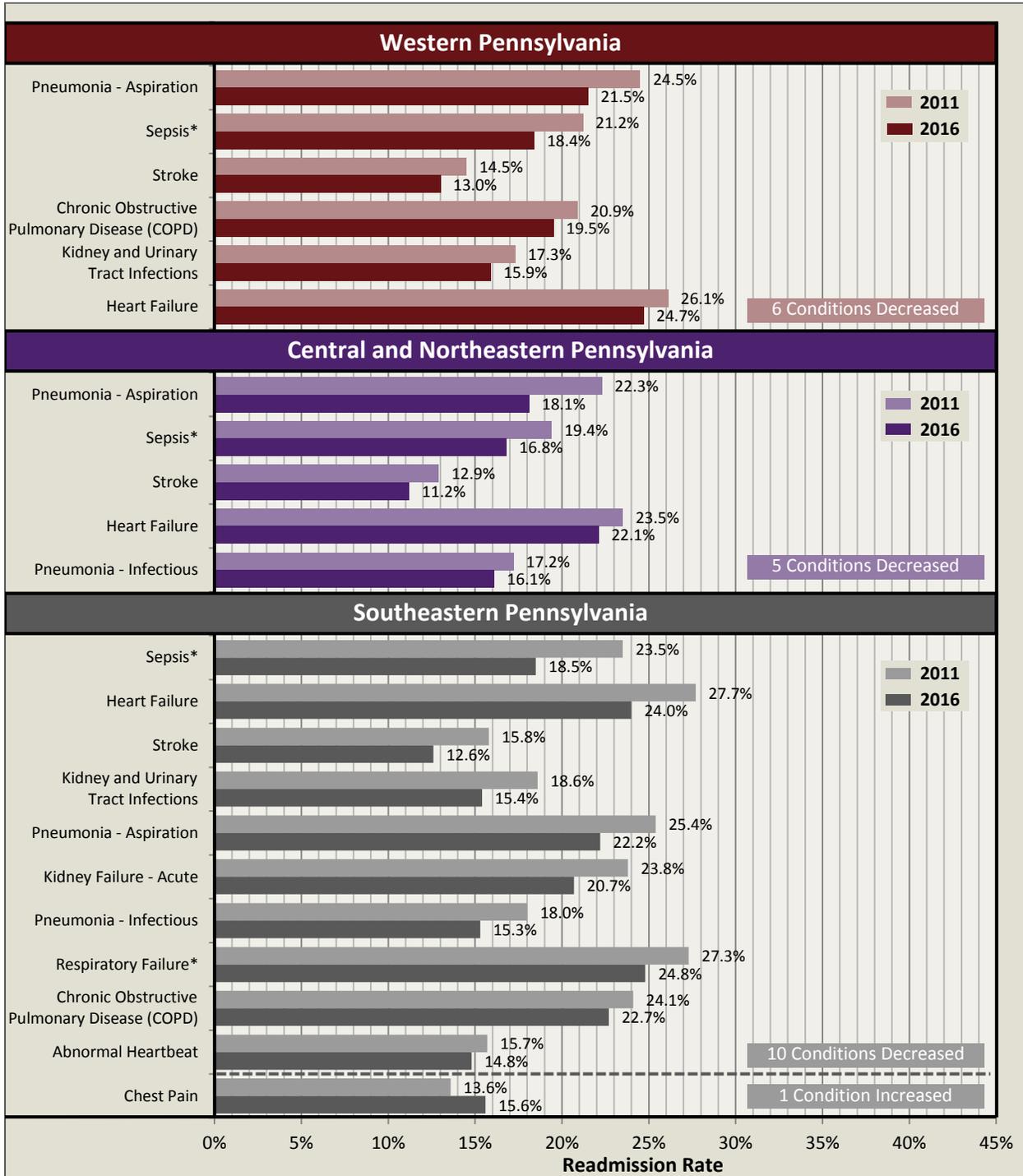


* Readmission rates for these conditions were based on "unplanned" readmissions only; patients readmitted for reasons defined as typically planned were not counted. Readmission rates for all other conditions were based on all readmissions for any reason.

Key Findings

Readmission Rates

Across different areas of the state, 30-day readmission rates showed statistically significant differences in the following conditions from federal fiscal year 2011 to federal fiscal year 2016.



* Readmission rates for these conditions were based on "unplanned" readmissions only; patients readmitted for reasons defined as typically planned were not counted. Readmission rates for all other conditions were based on all readmissions for any reason.

Readmission Rates

Taking patient risk into account, the following 30-day readmission rates across the different areas of the state were significantly higher or lower than expected in federal fiscal year 2016.

| | Conditions with Readmission Rates Statistically <u>Lower</u> than Expected | Conditions with Readmission Rates Statistically <u>Higher</u> than Expected |
|----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Western Pennsylvania | <ul style="list-style-type: none"> • None | <ul style="list-style-type: none"> • Heart Failure • Kidney Failure – Acute • Respiratory Failure • Sepsis* • Stroke |
| Central and Northeastern Pennsylvania | <ul style="list-style-type: none"> • Abnormal Heartbeat • Chest Pain • Chronic Obstructive Pulmonary Disease (COPD) • Diabetes – Medical Management • Heart Failure • Kidney Failure – Acute • Pneumonia – Aspiration • Respiratory Failure* • Sepsis* | <ul style="list-style-type: none"> • None |
| Southeastern Pennsylvania | <ul style="list-style-type: none"> • None | <ul style="list-style-type: none"> • Chest Pain • Chronic Obstructive Pulmonary Disease (COPD) |

* Readmission rates for these conditions were based on “unplanned” readmissions only; patients readmitted for reasons defined as typically planned were not counted. Readmission rates for all other conditions were based on all readmissions for any reason.

Western Pennsylvania:

- After accounting for patient risk, hospitals in Western Pennsylvania as a whole had 30-day readmission rates that were significantly higher than expected for five conditions, the greatest difference occurring in Respiratory Failure (24.8% actual, 23.2% expected).

Central and Northeastern Pennsylvania:

- After accounting for patient risk, hospitals in Central and Northeastern Pennsylvania as a whole had 30-day readmission rates that were significantly lower than expected for nine conditions, the greatest difference occurring in Pneumonia – Aspiration (18.1% actual, 20.2% expected).

Southeastern Pennsylvania:

- After accounting for patient risk, hospitals in Southeastern Pennsylvania as a whole had 30-day readmission rates that were significantly higher than expected for two conditions, the greatest difference occurring in Chest Pain (15.6% actual, 14.2% expected).

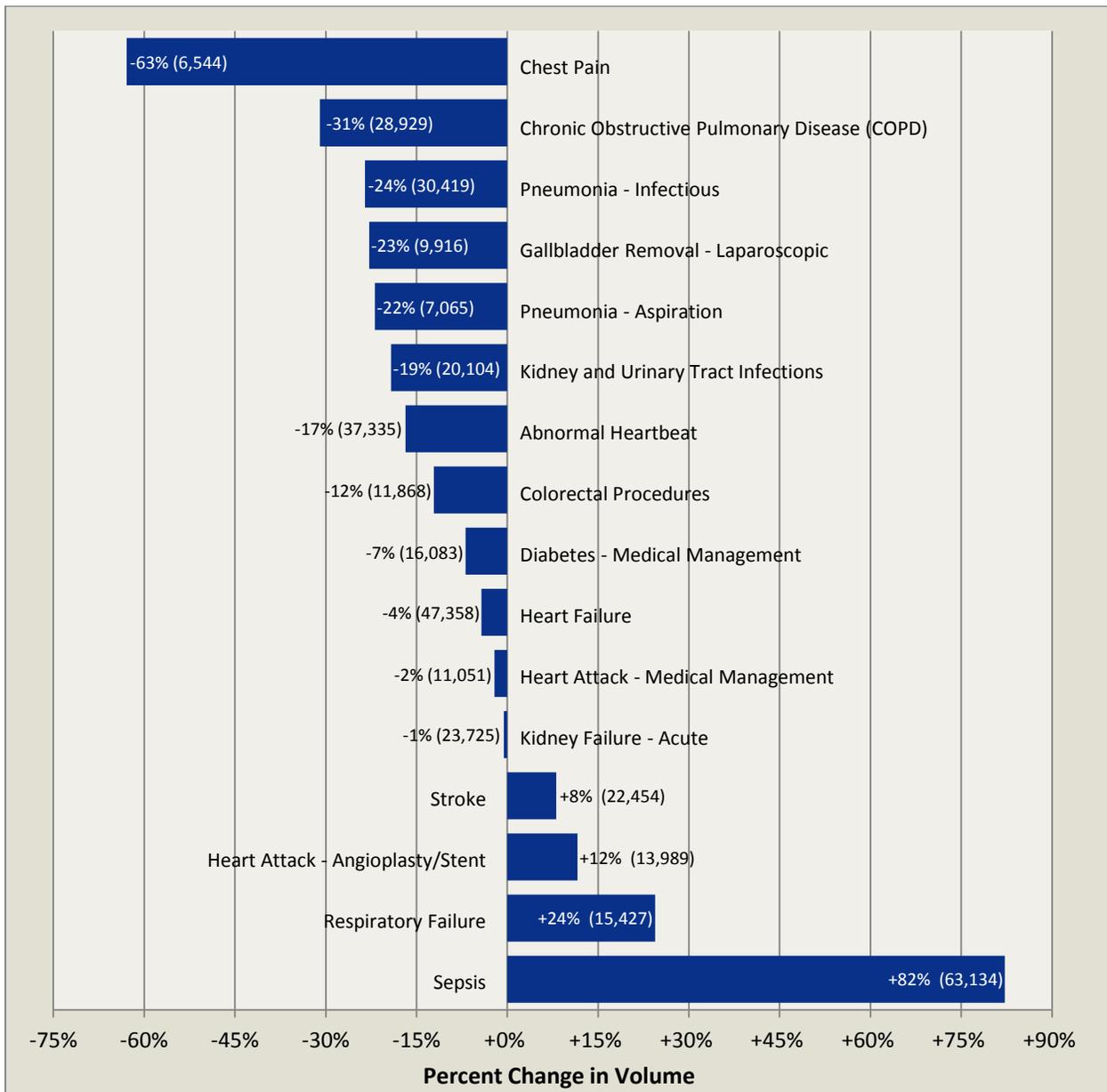
Key Findings

Volume of Hospital Admissions

The following chart shows the statewide percent change in volume, from federal fiscal year 2011 to federal fiscal year 2016, for each of the 16 conditions and procedures included in this report (admission totals from federal fiscal year 2016 are shown in parentheses).

Chest Pain had the largest percentage decrease in volume (-63%), from 17,635 discharges in 2011 to 6,544 in 2016.

Sepsis had the largest percentage increase in volume (+82%), from 34,655 discharges in 2011 to 63,134 in 2016.



Medicare Fee-for-Service Payments

Calendar Year 2015 Data for Pennsylvania Residents

- Medicare fee-for-service was the primary payer for 36.9% of the statewide admissions for Pennsylvania residents in 2015 for the conditions and procedures in this report, for a total of nearly \$1.05 billion (\$1,048,941,367).
 - For Western Pennsylvania, Medicare fee-for-service was the primary payer for 28.5% of admissions in this report, for a total of over \$243 million.
 - For Central and Northeastern Pennsylvania, Medicare fee-for-service was the primary payer for 45.1% of admissions in this report, for a total of nearly \$336 million.
 - For Southeastern Pennsylvania, Medicare fee-for-service was the primary payer for 38.2% of admissions in this report, for a total of nearly \$470 million.

- The condition with the lowest statewide average Medicare fee-for-service payment in 2015 was Chest Pain, at \$3,691 per hospitalization. The condition with the highest statewide average Medicare fee-for-service payment in 2015 was Colorectal Procedures, at \$17,896 per hospitalization.

| | Condition or Procedure with <u>Lowest</u> Average Payment | Condition or Procedure with <u>Highest</u> Average Payment |
|----------------------------------------------|-----------------------------------------------------------|------------------------------------------------------------|
| Statewide | <i>Chest Pain: \$3,691</i> | <i>Colorectal Procedures: \$17,896</i> |
| Western Pennsylvania | Chest Pain: \$3,316 | Colorectal Procedures: \$17,611 |
| Central and Northeastern Pennsylvania | Chest Pain: \$3,252 | Colorectal Procedures: \$16,979 |
| Southeastern Pennsylvania | Chest Pain: \$4,321 | Colorectal Procedures: \$18,784 |

Abnormal Heartbeat

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|--------------------------------------|-----------------------|-------------|--------------|-------------------------|
| Statewide | 37,335 | 0.9% | 14.3% | \$41,457 |
| Central & Northeastern PA | 9,505 | 1.0% | 13.4% | \$31,186 |
| Barnes-Kasson County | 15 | ⊖ | ⊖ | \$12,590 |
| Berwick | 36 | ⊖ | ⊖ | \$56,917 |
| Bucktail | 0 | NR | NR | NR |
| Carlisle Regional | 98 | ● | ⊖ | \$34,793 |
| Chambersburg | 437 | ⊖ | ⊖ | \$29,078 |
| Endless Mountains | 10 | ⊖ | ● | \$8,085 |
| Ephrata Community | 160 | ⊖ | ⊖ | \$33,296 |
| Evangelical Community | 180 | ⊖ | ⊖ | \$21,319 |
| Fulton County | 40 | ⊖ | ⊖ | \$24,942 |
| Geisinger Bloomsburg | 45 | ⊖ | ⊖ | \$26,856 |
| Geisinger Community | 342 | ⊖ | ⊖ | \$41,999 |
| Geisinger Danville | 535 | ⊖ | ⊖ | \$39,120 |
| Geisinger Lewistown | 172 | ⊖ | ⊖ | \$22,106 |
| Geisinger Wyoming Valley | 368 | ⊖ | ⊖ | \$44,814 |
| Gettysburg | 150 | ⊖ | ⊖ | \$23,701 |
| Good Samaritan Lebanon | 168 | ⊖ | ⊖ | \$27,304 |
| Guthrie Towanda Memorial | 21 | ⊖ | ⊖ | \$22,521 |
| Hanover | 217 | ⊖ | ⊖ | \$26,508 |
| Heart of Lancaster | 40 | ⊖ | ⊖ | \$45,434 |
| Holy Spirit | 285 | ⊖ | ○ | \$27,182 |
| J C Blair Memorial | 42 | ⊖ | ⊖ | \$12,122 |

Abnormal Heartbeat

Includes abnormalities in the heart rate (how fast or slow the heart beats) and/or the heart rhythm (how regular/steady the heart beats). Common examples include tachycardia (too fast), bradycardia (too slow) and atrial fibrillation (too fast and irregular).

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Abnormal Heartbeat

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|------------------------|-----------------------|-----------|-------------|-------------------------|
| Jersey Shore | 21 | ⊖ | ⊖ | \$20,107 |
| Lancaster General | 811 | ⊖ | ⊖ | \$30,954 |
| Lancaster Regional | 83 | ⊖ | ⊖ | \$48,270 |
| Lehigh Valley Hazleton | 147 | ⊖ | ⊖ | \$30,581 |
| Lock Haven | 19 | ⊖ | ⊖ | \$53,744 |
| Memorial York | 131 | ⊖ | ⊖ | \$27,755 |
| Milton S Hershey | 337 | ⊖ | ⊖ | \$31,875 |
| Moses Taylor | 74 | ⊖ | ⊖ | \$49,453 |
| Mount Nittany | 379 | ● | ⊖ | \$26,452 |
| Muncy Valley | 15 | ⊖ | ⊖ | \$10,953 |
| Pinnacle Health | 887 | ⊖ | ⊖ | \$21,684 |
| Pocono | 360 | ⊖ | ⊖ | \$30,348 |
| Regional Scranton | 360 | ⊖ | ⊖ | \$40,841 |
| Robert Packer | 624 | ⊖ | ⊖ | \$23,413 |
| Soldiers & Sailors | 42 | ⊖ | ⊖ | \$15,753 |
| Sunbury Community | 26 | ⊖ | ⊖ | \$36,806 |
| Troy Community | 5 | ⊖ | ⊖ | \$19,972 |
| Tyler Memorial | 11 | ⊖ | ⊖ | \$20,999 |
| Wayne Memorial | 92 | ⊖ | ⊖ | \$18,910 |
| Waynesboro | 61 | ⊖ | ⊖ | \$27,858 |
| Wilkes-Barre General | 521 | ⊖ | ⊖ | \$56,609 |
| Williamsport Regional | 324 | ⊖ | ⊖ | \$25,424 |
| York | 814 | ⊖ | ⊖ | \$25,236 |

Abnormal Heartbeat

Includes abnormalities in the heart rate (how fast or slow the heart beats) and/or the heart rhythm (how regular/steady the heart beats). Common examples include tachycardia (too fast), bradycardia (too slow) and atrial fibrillation (too fast and irregular).

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Chest Pain

| Hospital | Total Number of Cases | Readmission | Average Hospital Charge |
|--------------------------------------|-----------------------|--------------|-------------------------|
| Statewide | 6,544 | 13.6% | \$23,888 |
| Central & Northeastern PA | 1,679 | 10.4% | \$17,916 |
| Barnes-Kasson County | 23 | ⊖ | \$4,687 |
| Berwick | 0 | NR | NR |
| Bucktail | 0 | NR | NR |
| Carlisle Regional | 11 | ⊖ | \$29,621 |
| Chambersburg | 31 | ⊖ | \$15,960 |
| Endless Mountains | 10 | ⊖ | \$6,552 |
| Ephrata Community | 27 | ⊖ | \$26,453 |
| Evangelical Community | 31 | ⊖ | \$16,988 |
| Fulton County | 2 | NR | NR |
| Geisinger Bloomsburg | 15 | ⊖ | \$13,644 |
| Geisinger Community | 160 | ⊖ | \$21,539 |
| Geisinger Danville | 93 | ⊖ | \$21,377 |
| Geisinger Lewistown | 17 | ⊖ | \$15,460 |
| Geisinger Wyoming Valley | 124 | ⊖ | \$24,530 |
| Gettysburg | 10 | ⊖ | \$12,491 |
| Good Samaritan Lebanon | 14 | ⊖ | \$19,798 |
| Guthrie Towanda Memorial | 2 | NR | NR |
| Hanover | 16 | ⊖ | \$12,905 |
| Heart of Lancaster | 1 | NR | NR |
| Holy Spirit | 27 | ⊖ | \$20,682 |
| J C Blair Memorial | 8 | ⊖ | \$7,211 |

Chest Pain

Pain in the chest that is usually not related to the heart (non-cardiac chest pain). Common causes for this type of chest pain include gastric reflux (“heartburn”), pleurisy (inflammation of the membrane around the lungs) and problems with the ribs and muscles of the chest.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital’s actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Mortality ratings were not reported for Chest Pain because the number of mortalities statewide was less than 10.

Chest Pain

| Hospital | Total Number of Cases | Readmission | Average Hospital Charge |
|------------------------|-----------------------|-------------|-------------------------|
| Jersey Shore | 4 | NR | NR |
| Lancaster General | 41 | ⊖ | \$19,808 |
| Lancaster Regional | 7 | ⊖ | \$18,152 |
| Lehigh Valley Hazleton | 41 | ⊖ | \$20,036 |
| Lock Haven | 4 | NR | NR |
| Memorial York | 59 | ⊖ | \$14,757 |
| Milton S Hershey | 36 | ⊖ | \$15,036 |
| Moses Taylor | 40 | ⊖ | \$26,705 |
| Mount Nittany | 94 | ⊖ | \$16,283 |
| Muncy Valley | 12 | ⊖ | \$7,981 |
| Pinnacle Health | 138 | ⊖ | \$9,690 |
| Pocono | 46 | ⊖ | \$23,918 |
| Regional Scranton | 88 | ⊖ | \$19,876 |
| Robert Packer | 171 | ⊖ | \$13,100 |
| Soldiers & Sailors | 2 | NR | NR |
| Sunbury Community | 7 | ⊖ | \$30,420 |
| Troy Community | 0 | NR | NR |
| Tyler Memorial | 5 | ⊖ | \$18,106 |
| Wayne Memorial | 11 | ⊖ | \$13,226 |
| Waynesboro | 2 | NR | NR |
| Wilkes-Barre General | 92 | ⊖ | \$26,908 |
| Williamsport Regional | 26 | ⊖ | \$11,860 |
| York | 131 | ⊖ | \$15,072 |

Chest Pain

Pain in the chest that is usually not related to the heart (non-cardiac chest pain). Common causes for this type of chest pain include gastric reflux (“heartburn”), pleurisy (inflammation of the membrane around the lungs) and problems with the ribs and muscles of the chest.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital’s actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Mortality ratings were not reported for Chest Pain because the number of mortalities statewide was less than 10.

Chronic Obstructive Pulmonary Disease (COPD)

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge | COPD |
|--------------------------------------|-----------------------|-------------|--------------|-------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Statewide | 28,929 | 0.5% | 20.6% | \$30,458 | |
| Central & Northeastern PA | 6,872 | 0.7% | 18.6% | \$24,774 | |
| Barnes-Kasson County | 78 | ⊖ | ⊖ | \$11,156 | <p>Group of chronic respiratory diseases with persistent inflammation and damage leading to reduced airflow in the lungs. Included are common diseases such as emphysema and chronic obstructive bronchitis as well as chronic obstructive asthma.</p> <p>Understanding the Symbols</p> <p>The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).</p> <ul style="list-style-type: none"> ⊖ Rate was significantly lower than expected. ⊕ Rate was not significantly different than expected. ● Rate was significantly higher than expected. NR Not reported. Too few cases after exclusions. |
| Berwick | 81 | ⊖ | ⊖ | \$42,775 | |
| Bucktail | 7 | ● | ⊖ | \$13,178 | |
| Carlisle Regional | 81 | ⊖ | ⊖ | \$25,315 | |
| Chambersburg | 148 | ⊖ | ⊖ | \$15,682 | |
| Endless Mountains | 51 | ⊖ | ⊖ | \$8,233 | |
| Ephrata Community | 143 | ⊖ | ⊖ | \$28,883 | |
| Evangelical Community | 81 | ⊖ | ⊖ | \$17,027 | |
| Fulton County | 37 | ⊖ | ⊖ | \$20,243 | |
| Geisinger Bloomsburg | 53 | ● | ⊖ | \$23,795 | |
| Geisinger Community | 318 | ⊖ | ⊖ | \$33,164 | |
| Geisinger Danville | 247 | ⊖ | ⊖ | \$35,610 | |
| Geisinger Lewistown | 132 | ⊖ | ⊖ | \$20,780 | |
| Geisinger Wyoming Valley | 258 | ⊖ | ⊖ | \$37,018 | |
| Gettysburg | 104 | ⊖ | ⊖ | \$18,805 | |
| Good Samaritan Lebanon | 165 | ⊖ | ⊖ | \$22,385 | |
| Guthrie Towanda Memorial | 37 | ⊖ | ⊖ | \$20,697 | |
| Hanover | 176 | ⊖ | ⊖ | \$24,549 | |
| Heart of Lancaster | 46 | ⊖ | ⊖ | \$26,365 | |
| Holy Spirit | 189 | ⊖ | ⊖ | \$26,078 | |
| J C Blair Memorial | 82 | ⊖ | ⊖ | \$8,181 | |

Chronic Obstructive Pulmonary Disease (COPD)

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge | COPD |
|------------------------|-----------------------|-----------|-------------|-------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Jersey Shore | 71 | ⊖ | ⊖ | \$14,242 | <p>Group of chronic respiratory diseases with persistent inflammation and damage leading to reduced airflow in the lungs. Included are common diseases such as emphysema and chronic obstructive bronchitis as well as chronic obstructive asthma.</p> <p>Understanding the Symbols</p> <p>The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).</p> <ul style="list-style-type: none"> ⊖ Rate was significantly lower than expected. ⊕ Rate was not significantly different than expected. ● Rate was significantly higher than expected. NR Not reported. Too few cases after exclusions. |
| Lancaster General | 358 | ⊖ | ⊖ | \$22,842 | |
| Lancaster Regional | 109 | ⊖ | ⊖ | \$35,848 | |
| Lehigh Valley Hazleton | 201 | ⊖ | ⊖ | \$23,211 | |
| Lock Haven | 57 | ⊖ | ⊖ | \$42,291 | |
| Memorial York | 192 | ⊖ | ⊖ | \$16,938 | |
| Milton S Hershey | 139 | ⊖ | ⊖ | \$25,995 | |
| Moses Taylor | 129 | ● | ⊖ | \$38,972 | |
| Mount Nittany | 277 | ⊖ | ⊖ | \$25,399 | |
| Muncy Valley | 50 | ⊖ | ⊖ | \$13,943 | |
| Pinnacle Health | 418 | ⊖ | ⊖ | \$16,033 | |
| Pocono | 383 | ⊖ | ⊖ | \$22,793 | |
| Regional Scranton | 220 | ⊖ | ⊖ | \$36,107 | |
| Robert Packer | 232 | ⊖ | ⊖ | \$19,753 | |
| Soldiers & Sailors | 143 | ⊖ | ⊖ | \$17,406 | |
| Sunbury Community | 108 | ⊖ | ⊖ | \$26,666 | |
| Troy Community | 49 | ⊖ | ⊖ | \$15,194 | |
| Tyler Memorial | 26 | ⊖ | ⊖ | \$28,506 | |
| Wayne Memorial | 82 | ⊖ | ⊖ | \$14,508 | |
| Waynesboro | 87 | ⊖ | ⊖ | \$15,117 | |
| Wilkes-Barre General | 421 | ⊖ | ⊖ | \$41,377 | |
| Williamsport Regional | 127 | ⊖ | ⊖ | \$13,594 | |
| York | 479 | ⊖ | ⊖ | \$17,469 | |

Colorectal Procedures

| Hospital | Total Number of Cases | Mortality | Average Hospital Charge |
|--------------------------------------|-----------------------|-------------|-------------------------|
| Statewide | 11,868 | 1.6% | \$91,514 |
| Central & Northeastern PA | 3,165 | 1.9% | \$74,565 |
| Barnes-Kasson County | 1 | NR | NR |
| Berwick | 4 | NR | NR |
| Bucktail | 0 | NR | NR |
| Carlisle Regional | 44 | ⊖ | \$100,744 |
| Chambersburg | 90 | ⊖ | \$42,818 |
| Endless Mountains | 0 | NR | NR |
| Ephrata Community | 36 | ⊖ | \$60,434 |
| Evangelical Community | 55 | ⊖ | \$48,626 |
| Fulton County | 0 | NR | NR |
| Geisinger Bloomsburg | 15 | ⊖ | \$71,111 |
| Geisinger Community | 135 | ⊖ | \$95,138 |
| Geisinger Danville | 316 | ⊖ | \$133,800 |
| Geisinger Lewistown | 36 | ⊖ | \$41,147 |
| Geisinger Wyoming Valley | 129 | ⊖ | \$127,411 |
| Gettysburg | 41 | ⊖ | \$63,800 |
| Good Samaritan Lebanon | 77 | ⊖ | \$54,688 |
| Guthrie Towanda Memorial | 0 | NR | NR |
| Hanover | 44 | ⊖ | \$49,298 |
| Heart of Lancaster | 9 | ⊖ | \$68,990 |
| Holy Spirit | 68 | ⊖ | \$59,246 |
| J C Blair Memorial | 17 | ⊖ | \$36,195 |

Colorectal Procedures

Surgical procedure performed on the colon (large intestine) and rectum (last section of the large intestine). Reasons for colorectal procedures include cancer and diverticulitis (severe inflammation of large intestine). Common procedures include removal of the rectum or part or all of the large intestine. Does not include patients with abdominal trauma.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

- Rate was significantly lower than expected.
- ⊖ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR Not reported. Too few cases after exclusions.

Readmission ratings were not reported for Colorectal Procedures to avoid counting readmissions that may have been planned.

Colorectal Procedures

| Hospital | Total Number of Cases | Mortality | Average Hospital Charge |
|------------------------|-----------------------|-----------|-------------------------|
| Jersey Shore | 8 | ⊙ | \$33,507 |
| Lancaster General | 277 | ⊙ | \$52,587 |
| Lancaster Regional | 27 | ⊙ | \$93,034 |
| Lehigh Valley Hazleton | 70 | ⊙ | \$75,322 |
| Lock Haven | 2 | NR | NR |
| Memorial York | 39 | ⊙ | \$51,990 |
| Milton S Hershey | 350 | ⊙ | \$63,775 |
| Moses Taylor | 55 | ⊙ | \$118,251 |
| Mount Nittany | 61 | ⊙ | \$65,945 |
| Muncy Valley | 0 | NR | NR |
| Pinnacle Health | 338 | ⊙ | \$40,428 |
| Pocono | 67 | ⊙ | \$61,887 |
| Regional Scranton | 88 | ⊙ | \$117,023 |
| Robert Packer | 141 | ● | \$59,308 |
| Soldiers & Sailors | 14 | ⊙ | \$41,182 |
| Sunbury Community | 15 | ⊙ | \$74,928 |
| Troy Community | 1 | NR | NR |
| Tyler Memorial | 11 | ⊙ | \$104,898 |
| Wayne Memorial | 28 | ⊙ | \$43,299 |
| Waynesboro | 8 | ⊙ | \$50,587 |
| Wilkes-Barre General | 141 | ⊙ | \$116,173 |
| Williamsport Regional | 68 | ⊙ | \$64,442 |
| York | 239 | ⊙ | \$67,602 |

Colorectal Procedures

Surgical procedure performed on the colon (large intestine) and rectum (last section of the large intestine). Reasons for colorectal procedures include cancer and diverticulitis (severe inflammation of large intestine). Common procedures include removal of the rectum or part or all of the large intestine. Does not include patients with abdominal trauma.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

- Rate was significantly lower than expected.
- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR Not reported. Too few cases after exclusions.

Readmission ratings were not reported for Colorectal Procedures to avoid counting readmissions that may have been planned.

Diabetes – Medical Management

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|--------------------------------------|-----------------------|-------------|--------------|-------------------------|
| Statewide | 16,083 | 0.4% | 21.1% | \$29,292 |
| Central & Northeastern PA | 4,009 | 0.4% | 19.7% | \$21,022 |
| Barnes-Kasson County | 20 | ⊖ | ● | \$5,476 |
| Berwick | 19 | ⊖ | ⊖ | \$44,252 |
| Bucktail | 1 | NR | NR | NR |
| Carlisle Regional | 53 | ⊖ | ⊖ | \$20,909 |
| Chambersburg | 149 | ⊖ | ⊖ | \$14,832 |
| Endless Mountains | 4 | NR | NR | NR |
| Ephrata Community | 53 | ⊖ | ⊖ | \$21,867 |
| Evangelical Community | 47 | ⊖ | ⊖ | \$15,445 |
| Fulton County | 16 | ⊖ | ⊖ | \$13,025 |
| Geisinger Bloomsburg | 58 | ⊖ | ○ | \$21,099 |
| Geisinger Community | 134 | ⊖ | ⊖ | \$30,828 |
| Geisinger Danville | 217 | ⊖ | ⊖ | \$33,870 |
| Geisinger Lewistown | 77 | ⊖ | ⊖ | \$17,768 |
| Geisinger Wyoming Valley | 231 | ⊖ | ⊖ | \$36,626 |
| Gettysburg | 62 | ⊖ | ⊖ | \$15,196 |
| Good Samaritan Lebanon | 92 | ⊖ | ⊖ | \$17,345 |
| Guthrie Towanda Memorial | 13 | ⊖ | ⊖ | \$12,462 |
| Hanover | 73 | ⊖ | ⊖ | \$15,511 |
| Heart of Lancaster | 20 | ⊖ | ⊖ | \$16,963 |
| Holy Spirit | 100 | ⊖ | ⊖ | \$25,734 |
| J C Blair Memorial | 35 | ⊖ | ⊖ | \$8,163 |

Diabetes – Medical Management

The body is unable to make enough insulin or it does not use the insulin properly. Diabetes can lead to acute complications such as a coma from too much or too little glucose (blood sugar) and long-term complications such as kidney disease and damage to blood vessels and nerves.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Diabetes – Medical Management

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|------------------------|-----------------------|-----------|-------------|-------------------------|
| Jersey Shore | 6 | ⊖ | ⊖ | \$10,580 |
| Lancaster General | 318 | ⊖ | ⊖ | \$18,910 |
| Lancaster Regional | 42 | ⊖ | ⊖ | \$23,920 |
| Lehigh Valley Hazleton | 66 | ⊖ | ⊖ | \$20,932 |
| Lock Haven | 21 | ⊖ | ⊖ | \$31,238 |
| Memorial York | 97 | ⊖ | ⊖ | \$15,042 |
| Milton S Hershey | 152 | ⊖ | ⊖ | \$21,649 |
| Moses Taylor | 81 | ⊖ | ⊖ | \$41,434 |
| Mount Nittany | 138 | ⊖ | ⊖ | \$20,196 |
| Muncy Valley | 5 | ⊖ | ⊖ | \$7,712 |
| Pinnacle Health | 483 | ⊖ | ⊖ | \$13,244 |
| Pocono | 159 | ⊖ | ⊖ | \$20,326 |
| Regional Scranton | 69 | ⊖ | ⊖ | \$27,315 |
| Robert Packer | 147 | ⊖ | ⊖ | \$19,974 |
| Soldiers & Sailors | 22 | ⊖ | ⊖ | \$12,227 |
| Sunbury Community | 13 | ⊖ | ⊖ | \$12,287 |
| Troy Community | 38 | ⊖ | ⊖ | \$11,338 |
| Tyler Memorial | 2 | NR | NR | NR |
| Wayne Memorial | 47 | ⊖ | ⊖ | \$14,648 |
| Waynesboro | 41 | ⊖ | ⊖ | \$11,775 |
| Wilkes-Barre General | 171 | ⊖ | ⊖ | \$31,222 |
| Williamsport Regional | 99 | ⊖ | ⊖ | \$16,961 |
| York | 318 | ● | ⊖ | \$16,688 |

Diabetes – Medical Management

The body is unable to make enough insulin or it does not use the insulin properly. Diabetes can lead to acute complications such as a coma from too much or too little glucose (blood sugar) and long-term complications such as kidney disease and damage to blood vessels and nerves.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Gallbladder Removal – Laparoscopic

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge | Gallbladder Removal – Laparoscopic Removal of the gallbladder using several small incisions and a laparoscope (small camera on the end of an instrument) inserted into the abdomen. This type of procedure is sometimes referred to as “minimally invasive” surgery. Common reasons for laparoscopic gallbladder removal include cholelithiasis (stones in the gallbladder) and cholecystitis (inflammation of the gallbladder). Understanding the Symbols The symbols displayed in this report represent a comparison of a hospital’s actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report). ○ Rate was significantly lower than expected. ⊙ Rate was not significantly different than expected. ● Rate was significantly higher than expected. NR Not reported. Too few cases after exclusions. |
|---------------------------|-----------------------|-----------|-------------|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Statewide | 9,916 | 0.2% | 6.5% | \$50,967 | |
| Central & Northeastern PA | 2,535 | 0.1% | 6.5% | \$45,204 | |
| Barnes-Kasson County | 1 | NR | NR | NR | |
| Berwick | 13 | ⊙ | ⊙ | \$117,450 | |
| Bucktail | 0 | NR | NR | NR | |
| Carlisle Regional | 21 | ⊙ | ⊙ | \$67,296 | |
| Chambersburg | 89 | ⊙ | ⊙ | \$29,312 | |
| Endless Mountains | 2 | NR | NR | NR | |
| Ephrata Community | 50 | ⊙ | ⊙ | \$37,345 | |
| Evangelical Community | 16 | ⊙ | ⊙ | \$31,504 | |
| Fulton County | 1 | NR | NR | NR | |
| Geisinger Bloomsburg | 23 | ⊙ | ⊙ | \$29,093 | |
| Geisinger Community | 112 | ⊙ | ⊙ | \$55,371 | |
| Geisinger Danville | 206 | ⊙ | ⊙ | \$80,637 | |
| Geisinger Lewistown | 27 | ⊙ | ⊙ | \$23,572 | |
| Geisinger Wyoming Valley | 64 | ⊙ | ⊙ | \$77,723 | |
| Gettysburg | 19 | ⊙ | ⊙ | \$28,477 | |
| Good Samaritan Lebanon | 50 | ⊙ | ⊙ | \$44,710 | |
| Guthrie Towanda Memorial | 0 | NR | NR | NR | |
| Hanover | 48 | ⊙ | ⊙ | \$29,817 | |
| Heart of Lancaster | 18 | ⊙ | ⊙ | \$58,862 | |
| Holy Spirit | 51 | ⊙ | ⊙ | \$34,530 | |
| J C Blair Memorial | 25 | ⊙ | ⊙ | \$21,437 | |

Gallbladder Removal – Laparoscopic

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge | Gallbladder Removal – Laparoscopic |
|------------------------|-----------------------|-----------|-------------|-------------------------|------------------------------------|
| Jersey Shore | 12 | ⊖ | ⊖ | \$21,135 | |
| Lancaster General | 200 | ⊖ | ⊖ | \$34,731 | |
| Lancaster Regional | 17 | ⊖ | ⊖ | \$61,534 | |
| Lehigh Valley Hazleton | 99 | ⊖ | ⊖ | \$46,396 | |
| Lock Haven | 12 | ⊖ | ⊖ | \$105,968 | |
| Memorial York | 71 | ⊖ | ⊖ | \$27,851 | |
| Milton S Hershey | 78 | ⊖ | ⊖ | \$44,917 | |
| Moses Taylor | 81 | ⊖ | ⊖ | \$83,464 | |
| Mount Nittany | 126 | ⊖ | ⊖ | \$38,661 | |
| Muncy Valley | 0 | NR | NR | NR | |
| Pinnacle Health | 229 | ⊖ | ⊖ | \$22,237 | |
| Pocono | 124 | ⊖ | ⊖ | \$39,023 | |
| Regional Scranton | 80 | ⊖ | ⊖ | \$75,482 | |
| Robert Packer | 70 | ⊖ | ⊖ | \$31,192 | |
| Soldiers & Sailors | 2 | NR | NR | NR | |
| Sunbury Community | 7 | ⊖ | ⊖ | \$50,818 | |
| Troy Community | 4 | NR | NR | NR | |
| Tyler Memorial | 6 | ⊖ | ⊖ | \$66,561 | |
| Wayne Memorial | 38 | ⊖ | ⊖ | \$32,418 | |
| Waynesboro | 15 | ⊖ | ● | \$29,715 | |
| Wilkes-Barre General | 113 | ⊖ | ⊖ | \$64,491 | |
| Williamsport Regional | 81 | ⊖ | ⊖ | \$37,790 | |
| York | 234 | ⊖ | ⊖ | \$33,760 | |

Heart Attack – Angioplasty/Stent

| Hospital | Total Number of Cases | Mortality | Average Hospital Charge |
|--------------------------------------|-----------------------|-------------|-------------------------|
| Statewide | 13,989 | 1.4% | \$91,462 |
| Central & Northeastern PA | 3,807 | 1.2% | \$77,210 |
| Barnes-Kasson County | 0 | NR | NR |
| Berwick | 0 | NR | NR |
| Bucktail | 0 | NR | NR |
| Carlisle Regional | 0 | NR | NR |
| Chambersburg | 158 | ⊖ | \$58,914 |
| Endless Mountains | 0 | NR | NR |
| Ephrata Community [†] | 41 | ⊖ | \$81,605 |
| Evangelical Community | 83 | ⊖ | \$63,319 |
| Fulton County | 0 | NR | NR |
| Geisinger Bloomsburg | 0 | NR | NR |
| Geisinger Community | 147 | ⊖ | \$75,257 |
| Geisinger Danville | 344 | ⊖ | \$101,743 |
| Geisinger Lewistown | 0 | NR | NR |
| Geisinger Wyoming Valley | 128 | ⊖ | \$125,127 |
| Gettysburg | 0 | NR | NR |
| Good Samaritan Lebanon | 88 | ⊖ | \$62,379 |
| Guthrie Towanda Memorial | 0 | NR | NR |
| Hanover | 120 | ⊖ | \$55,397 |
| Heart of Lancaster | 0 | NR | NR |
| Holy Spirit | 103 | ⊖ | \$56,742 |
| J C Blair Memorial | 0 | NR | NR |

[†] The data shown for this hospital is not representative of a full year; this facility began performing these procedures in March 2016.

Heart Attack – Angioplasty/Stent

Procedures are used to open narrowed or blocked coronary (heart) arteries to restore blood flow to the heart muscle by inserting a catheter (thin tube) through the skin of the upper thigh or arm. An angioplasty is performed by inflating a small balloon at the end of the catheter to widen the narrowed or blocked area in the artery. Angioplasty procedures are often combined with the placement of a stent (permanent metallic mesh tube) to prevent the artery from narrowing again. Only patients who had a myocardial infarction (heart attack) are included.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Readmission ratings were not reported for Heart Attack – Angioplasty/Stent to avoid counting readmissions that may have been planned.

Heart Attack – Angioplasty/Stent

| Hospital | Total Number of Cases | Mortality | Average Hospital Charge |
|-----------------------------|-----------------------|-----------|-------------------------|
| Jersey Shore | 0 | NR | NR |
| Lancaster General | 396 | ⊖ | \$67,096 |
| Lancaster Regional | 64 | ⊖ | \$117,271 |
| Lehigh Valley Hazleton | 0 | NR | NR |
| Lock Haven | 0 | NR | NR |
| Memorial York | 100 | ⊖ | \$65,919 |
| Milton S Hershey | 181 | ⊖ | \$65,840 |
| Moses Taylor | 0 | NR | NR |
| Mount Nittany | 113 | ⊖ | \$70,492 |
| Muncy Valley | 0 | NR | NR |
| Pinnacle Health | 264 | ⊖ | \$64,006 |
| Pocono | 220 | ⊖ | \$76,149 |
| Regional Scranton | 200 | ⊖ | \$111,773 |
| Robert Packer | 243 | ⊖ | \$36,279 |
| Soldiers & Sailors | 0 | NR | NR |
| Sunbury Community | 0 | NR | NR |
| Troy Community | 0 | NR | NR |
| Tyler Memorial | 0 | NR | NR |
| Wayne Memorial [‡] | 19 | ⊖ | \$96,172 |
| Waynesboro | 0 | NR | NR |
| Wilkes-Barre General | 167 | ● | \$154,351 |
| Williamsport Regional | 245 | ⊖ | \$77,182 |
| York | 383 | ⊖ | \$65,656 |

Heart Attack – Angioplasty/Stent

Procedures are used to open narrowed or blocked coronary (heart) arteries to restore blood flow to the heart muscle by inserting a catheter (thin tube) through the skin of the upper thigh or arm. An angioplasty is performed by inflating a small balloon at the end of the catheter to widen the narrowed or blocked area in the artery. Angioplasty procedures are often combined with the placement of a stent (permanent metallic mesh tube) to prevent the artery from narrowing again. Only patients who had a myocardial infarction (heart attack) are included.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Readmission ratings were not reported for Heart Attack – Angioplasty/Stent to avoid counting readmissions that may have been planned.

[‡] The data shown for this hospital is not representative of a full year; this facility began performing these procedures in June 2016.

Heart Attack – Medical Management

| Hospital | Total Number of Cases | Transfer to Acute Care | Mortality | Average Hospital Charge |
|--------------------------------------|-----------------------|------------------------|-------------|-------------------------|
| Statewide | 11,051 | 16.1% | 7.0% | \$40,234 |
| Central & Northeastern PA | 3,422 | 14.8% | 6.7% | \$32,821 |
| Barnes-Kasson County | 4 | NR | NR | NR |
| Berwick | 22 | 32.3% | ⊖ | \$56,649 |
| Bucktail | 0 | NR | NR | NR |
| Carlisle Regional | 20 | 74.6% | ⊖ | \$26,777 |
| Chambersburg* | 235 | 24.8% | ⊖ | \$26,183 |
| Endless Mountains | 3 | NR | NR | NR |
| Ephrata Community [†] | 31 | 49.1% | ⊖ | \$37,947 |
| Evangelical Community* | 74 | 42.7% | ⊖ | \$23,900 |
| Fulton County | 4 | NR | NR | NR |
| Geisinger Bloomsburg | 7 | 45.5% | ⊖ | \$18,556 |
| Geisinger Community* | 119 | 5.3% | ⊖ | \$43,799 |
| Geisinger Danville* | 275 | 1.2% | ⊖ | \$52,311 |
| Geisinger Lewistown | 27 | 35.0% | ⊖ | \$20,280 |
| Geisinger Wyoming Valley* | 99 | 4.2% | ⊖ | \$44,932 |
| Gettysburg | 18 | 67.3% | ⊖ | \$21,340 |
| Good Samaritan Lebanon* | 76 | 8.1% | ⊖ | \$27,998 |
| Guthrie Towanda Memorial | 1 | NR | NR | NR |
| Hanover* | 95 | 24.1% | ⊖ | \$21,974 |
| Heart of Lancaster | 8 | 71.4% | ⊖ | \$31,483 |
| Holy Spirit* | 52 | 4.0% | ⊖ | \$33,488 |
| J C Blair Memorial | 8 | 46.2% | ⊖ | \$10,107 |

Heart Attack – Medical Management

Occurs when there is blockage or obstruction in a blood vessel (coronary artery) causing damage or death to an area of the heart (myocardial infarction). Patients who are treated with a balloon (angioplasty)/stent procedure or open heart surgery are not included.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

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

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

[†] This facility began providing advanced cardiac services effective March 2016.

Heart Attack – Medical Management

| Hospital | Total Number of Cases | Transfer to Acute Care | Mortality | Average Hospital Charge |
|-----------------------------|-----------------------|------------------------|-----------|-------------------------|
| Jersey Shore | 5 | 50.0% | ⊖ | \$15,200 |
| Lancaster General* | 333 | 0.6% | ⊖ | \$30,891 |
| Lancaster Regional* | 23 | 8.7% | ⊖ | \$47,401 |
| Lehigh Valley Hazleton | 74 | 28.7% | ⊖ | \$31,599 |
| Lock Haven | 16 | 28.6% | ⊖ | \$42,327 |
| Memorial York* | 64 | 19.2% | ⊖ | \$28,802 |
| Milton S Hershey* | 193 | 0.0% | ○ | \$33,274 |
| Moses Taylor | 11 | 59.3% | ⊖ | \$51,239 |
| Mount Nittany* | 125 | 22.7% | ⊖ | \$30,613 |
| Muncy Valley | 5 | 33.3% | ⊖ | NR |
| Pinnacle Health* | 344 | 0.9% | ⊖ | \$29,829 |
| Pocono* | 142 | 3.5% | ⊖ | \$31,916 |
| Regional Scranton* | 94 | 4.3% | ⊖ | \$48,315 |
| Robert Packer* | 191 | 0.6% | ⊖ | \$23,724 |
| Soldiers & Sailors | 10 | 43.8% | ⊖ | \$12,412 |
| Sunbury Community | 6 | 58.3% | ⊖ | \$38,652 |
| Troy Community | 0 | NR | NR | NR |
| Tyler Memorial | 3 | NR | NR | NR |
| Wayne Memorial [†] | 21 | 52.3% | ⊖ | \$22,457 |
| Waynesboro | 30 | 51.7% | ⊖ | \$20,078 |
| Wilkes-Barre General* | 136 | 8.0% | ⊖ | \$51,201 |
| Williamsport Regional* | 253 | 2.4% | ⊖ | \$24,454 |
| York* | 165 | 0.6% | ⊖ | \$27,503 |

Heart Attack – Medical Management

Occurs when there is blockage or obstruction in a blood vessel (coronary artery) causing damage or death to an area of the heart (myocardial infarction). Patients who are treated with a balloon (angioplasty)/stent procedure or open heart surgery are not included.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

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

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

[†] This facility began providing advanced cardiac services effective June 2016.

Heart Failure

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|--------------------------------------|-----------------------|-------------|--------------|-------------------------|
| Statewide | 47,358 | 2.2% | 23.8% | \$39,631 |
| Central & Northeastern PA | 12,208 | 2.4% | 22.1% | \$29,876 |
| Barnes-Kasson County | 56 | ⊙ | ⊙ | \$12,622 |
| Berwick | 55 | ⊙ | ⊙ | \$55,801 |
| Bucktail | 0 | NR | NR | NR |
| Carlisle Regional | 104 | ⊙ | ⊙ | \$28,690 |
| Chambersburg | 444 | ⊙ | ○ | \$22,025 |
| Endless Mountains | 35 | ⊙ | ⊙ | \$8,339 |
| Ephrata Community | 216 | ⊙ | ○ | \$33,718 |
| Evangelical Community | 164 | ⊙ | ⊙ | \$20,056 |
| Fulton County | 38 | ⊙ | ⊙ | \$25,746 |
| Geisinger Bloomsburg | 88 | ⊙ | ⊙ | \$28,144 |
| Geisinger Community | 443 | ⊙ | ⊙ | \$39,643 |
| Geisinger Danville | 945 | ⊙ | ⊙ | \$45,444 |
| Geisinger Lewistown | 210 | ○ | ⊙ | \$23,619 |
| Geisinger Wyoming Valley | 577 | ○ | ⊙ | \$39,869 |
| Gettysburg | 169 | ⊙ | ⊙ | \$19,785 |
| Good Samaritan Lebanon | 232 | ⊙ | ⊙ | \$25,460 |
| Guthrie Towanda Memorial | 20 | ⊙ | ⊙ | \$20,272 |
| Hanover | 288 | ⊙ | ⊙ | \$21,783 |
| Heart of Lancaster | 48 | ⊙ | ⊙ | \$35,401 |
| Holy Spirit | 395 | ⊙ | ○ | \$31,109 |
| J C Blair Memorial | 75 | ● | ⊙ | \$10,124 |

Heart Failure

Inability of the heart to pump enough blood to meet the needs of the body leading to swelling of the legs and shortness of breath from fluid build-up in the lungs.

Common causes of heart failure include heart disease (e.g., coronary artery disease and heart valve problems) and long-standing hypertension (high blood pressure).

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

- Rate was significantly lower than expected.
- ⊙ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR Not reported. Too few cases after exclusions.

Heart Failure

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|------------------------|-----------------------|-----------|-------------|-------------------------|
| Jersey Shore | 52 | ⊖ | ⊖ | \$17,816 |
| Lancaster General | 1,143 | ⊖ | ○ | \$26,730 |
| Lancaster Regional | 109 | ⊖ | ⊖ | \$39,520 |
| Lehigh Valley Hazleton | 242 | ⊖ | ● | \$28,818 |
| Lock Haven | 56 | ⊖ | ⊖ | \$44,426 |
| Memorial York | 159 | ⊖ | ⊖ | \$23,541 |
| Milton S Hershey | 586 | ⊖ | ⊖ | \$31,874 |
| Moses Taylor | 152 | ⊖ | ⊖ | \$46,085 |
| Mount Nittany | 382 | ⊖ | ⊖ | \$29,286 |
| Muncy Valley | 20 | ● | ⊖ | \$17,005 |
| Pinnacle Health | 1,080 | ⊖ | ⊖ | \$23,074 |
| Pocono | 558 | ⊖ | ⊖ | \$30,143 |
| Regional Scranton | 455 | ⊖ | ⊖ | \$38,349 |
| Robert Packer | 385 | ● | ⊖ | \$24,099 |
| Soldiers & Sailors | 67 | ⊖ | ⊖ | \$20,903 |
| Sunbury Community | 37 | ⊖ | ⊖ | \$29,266 |
| Troy Community | 45 | ⊖ | ⊖ | \$14,136 |
| Tyler Memorial | 35 | ⊖ | ⊖ | \$26,706 |
| Wayne Memorial | 117 | ⊖ | ⊖ | \$18,538 |
| Waynesboro | 120 | ⊖ | ⊖ | \$21,875 |
| Wilkes-Barre General | 439 | ⊖ | ⊖ | \$45,747 |
| Williamsport Regional | 330 | ⊖ | ○ | \$20,378 |
| York | 1,037 | ⊖ | ⊖ | \$23,390 |

Heart Failure

Inability of the heart to pump enough blood to meet the needs of the body leading to swelling of the legs and shortness of breath from fluid build-up in the lungs.

Common causes of heart failure include heart disease (e.g., coronary artery disease and heart valve problems) and long-standing hypertension (high blood pressure).

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Kidney and Urinary Tract Infections

| Hospital | Total Number of Cases | Mortality | Readmissions (for any reason) | Average Hospital Charge |
|--------------------------------------|-----------------------|-------------|-------------------------------|-------------------------|
| Statewide | 20,104 | 0.4% | 15.3% | \$25,752 |
| Central & Northeastern PA | 4,891 | 0.6% | 14.3% | \$20,862 |
| Barnes-Kasson County | 31 | ⊙ | ● | \$11,933 |
| Berwick | 32 | ⊙ | ⊙ | \$39,874 |
| Bucktail | 2 | NR | NR | NR |
| Carlisle Regional | 52 | ⊙ | ⊙ | \$24,013 |
| Chambersburg | 139 | ⊙ | ⊙ | \$15,013 |
| Endless Mountains | 28 | ⊙ | ⊙ | \$5,519 |
| Ephrata Community | 84 | ⊙ | ⊙ | \$24,552 |
| Evangelical Community | 54 | ⊙ | ⊙ | \$15,993 |
| Fulton County | 26 | ⊙ | ⊙ | \$15,068 |
| Geisinger Bloomsburg | 46 | ⊙ | ⊙ | \$18,397 |
| Geisinger Community | 211 | ● | ⊙ | \$29,247 |
| Geisinger Danville | 237 | ⊙ | ⊙ | \$30,327 |
| Geisinger Lewistown | 88 | ⊙ | ⊙ | \$16,216 |
| Geisinger Wyoming Valley | 276 | ⊙ | ⊙ | \$29,416 |
| Gettysburg | 62 | ⊙ | ⊙ | \$15,007 |
| Good Samaritan Lebanon | 90 | ⊙ | ⊙ | \$18,670 |
| Guthrie Towanda Memorial | 22 | ⊙ | ⊙ | \$14,567 |
| Hanover | 118 | ⊙ | ⊙ | \$15,389 |
| Heart of Lancaster | 44 | ⊙ | ⊙ | \$21,695 |
| Holy Spirit | 109 | ⊙ | ⊙ | \$20,530 |
| J C Blair Memorial | 60 | ⊙ | ⊙ | \$6,916 |

Kidney and Urinary Tract Infections

Infections of the urinary tract, which includes the kidneys (pyelonephritis) and bladder (cystitis). These infections can be acute or chronic.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Kidney and Urinary Tract Infections

| Hospital | Total Number of Cases | Mortality | Readmissions (for any reason) | Average Hospital Charge |
|------------------------|-----------------------|-----------|-------------------------------|-------------------------|
| Jersey Shore | 30 | ⊙ | ⊙ | \$12,004 |
| Lancaster General | 278 | ⊙ | ○ | \$19,958 |
| Lancaster Regional | 52 | ● | ⊙ | \$26,417 |
| Lehigh Valley Hazleton | 165 | ⊙ | ⊙ | \$18,249 |
| Lock Haven | 30 | ⊙ | ⊙ | \$32,672 |
| Memorial York | 86 | ⊙ | ⊙ | \$15,877 |
| Milton S Hershey | 158 | ⊙ | ⊙ | \$23,469 |
| Moses Taylor | 127 | ⊙ | ⊙ | \$34,815 |
| Mount Nittany | 260 | ⊙ | ⊙ | \$19,135 |
| Muncy Valley | 16 | ⊙ | ⊙ | \$10,694 |
| Pinnacle Health | 366 | ⊙ | ⊙ | \$12,940 |
| Pocono | 189 | ⊙ | ⊙ | \$21,977 |
| Regional Scranton | 153 | ⊙ | ⊙ | \$29,774 |
| Robert Packer | 121 | ⊙ | ⊙ | \$18,271 |
| Soldiers & Sailors | 45 | ⊙ | ⊙ | \$12,273 |
| Sunbury Community | 27 | ⊙ | ⊙ | \$20,183 |
| Troy Community | 38 | ⊙ | ⊙ | \$11,342 |
| Tyler Memorial | 16 | ⊙ | ⊙ | \$16,775 |
| Wayne Memorial | 75 | ⊙ | ⊙ | \$15,639 |
| Waynesboro | 31 | ⊙ | ⊙ | \$13,522 |
| Wilkes-Barre General | 299 | ● | ⊙ | \$31,780 |
| Williamsport Regional | 91 | ⊙ | ⊙ | \$12,144 |
| York | 427 | ⊙ | ⊙ | \$14,915 |

Kidney and Urinary Tract Infections

Infections of the urinary tract, which includes the kidneys (pyelonephritis) and bladder (cystitis). These infections can be acute or chronic.

Understanding the Symbols

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

Kidney Failure – Acute

| Hospital | Total Number of Cases | Mortality | Readmissions (for any reason) | Average Hospital Charge |
|--------------------------------------|-----------------------|-------------|-------------------------------|-------------------------|
| Statewide | 23,725 | 2.2% | 20.7% | \$32,891 |
| Central & Northeastern PA | 6,145 | 2.8% | 19.2% | \$26,505 |
| Barnes-Kasson County | 4 | NR | NR | NR |
| Berwick | 13 | ⊖ | ⊖ | \$50,019 |
| Bucktail | 0 | NR | NR | NR |
| Carlisle Regional | 106 | ⊖ | ⊖ | \$26,148 |
| Chambersburg | 291 | ⊖ | ⊖ | \$18,867 |
| Endless Mountains | 14 | ● | ⊖ | \$9,438 |
| Ephrata Community | 80 | ⊖ | ⊖ | \$27,683 |
| Evangelical Community | 84 | ⊖ | ⊖ | \$16,856 |
| Fulton County | 3 | NR | NR | NR |
| Geisinger Bloomsburg | 35 | ⊖ | ⊖ | \$19,018 |
| Geisinger Community | 244 | ⊖ | ⊖ | \$38,395 |
| Geisinger Danville | 465 | ⊖ | ⊖ | \$36,246 |
| Geisinger Lewistown | 73 | ⊖ | ⊖ | \$19,425 |
| Geisinger Wyoming Valley | 376 | ⊖ | ⊖ | \$38,105 |
| Gettysburg | 118 | ● | ⊖ | \$17,787 |
| Good Samaritan Lebanon | 119 | ⊖ | ⊖ | \$19,666 |
| Guthrie Towanda Memorial | 1 | NR | NR | NR |
| Hanover | 135 | ⊖ | ⊖ | \$19,258 |
| Heart of Lancaster | 41 | ⊖ | ● | \$27,581 |
| Holy Spirit | 157 | ⊖ | ○ | \$28,893 |
| J C Blair Memorial | 12 | ⊖ | ⊖ | \$8,221 |

Kidney Failure – Acute

A sudden and rapid loss of kidney function resulting in a build-up of waste products that are normally filtered by the kidneys and removed from the body through urine. Because these waste products are toxic, acute kidney failure can be life-threatening. Acute kidney failure may be caused by trauma, surgery, dehydration, medication or other conditions.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Kidney Failure – Acute

| Hospital | Total Number of Cases | Mortality | Readmissions (for any reason) | Average Hospital Charge | <h3>Kidney Failure – Acute</h3> <p>A sudden and rapid loss of kidney function resulting in a build-up of waste products that are normally filtered by the kidneys and removed from the body through urine. Because these waste products are toxic, acute kidney failure can be life-threatening. Acute kidney failure may be caused by trauma, surgery, dehydration, medication or other conditions.</p> <p>Understanding the Symbols</p> <p>The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).</p> <ul style="list-style-type: none"> ○ Rate was significantly lower than expected. ◉ Rate was not significantly different than expected. ● Rate was significantly higher than expected. NR Not reported. Too few cases after exclusions. |
|------------------------|-----------------------|-----------|-------------------------------|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Jersey Shore | 15 | ○ | ○ | \$11,902 | |
| Lancaster General | 483 | ○ | ○ | \$23,516 | |
| Lancaster Regional | 46 | ○ | ○ | \$33,736 | |
| Lehigh Valley Hazleton | 160 | ○ | ○ | \$24,291 | |
| Lock Haven | 48 | ○ | ○ | \$40,196 | |
| Memorial York | 101 | ○ | ○ | \$21,339 | |
| Milton S Hershey | 286 | ○ | ○ | \$31,045 | |
| Moses Taylor | 161 | ○ | ○ | \$43,515 | |
| Mount Nittany | 286 | ○ | ○ | \$22,242 | |
| Muncy Valley | 1 | NR | NR | NR | |
| Pinnacle Health | 366 | ○ | ○ | \$19,388 | |
| Pocono | 183 | ○ | ○ | \$27,614 | |
| Regional Scranton | 156 | ● | ○ | \$38,032 | |
| Robert Packer | 215 | ○ | ● | \$22,571 | |
| Soldiers & Sailors | 79 | ○ | ○ | \$18,845 | |
| Sunbury Community | 51 | ○ | ○ | \$25,235 | |
| Troy Community | 14 | ○ | ○ | \$13,419 | |
| Tyler Memorial | 4 | NR | NR | NR | |
| Wayne Memorial | 46 | ○ | ○ | \$17,646 | |
| Waynesboro | 53 | ○ | ○ | \$15,670 | |
| Wilkes-Barre General | 262 | ○ | ○ | \$41,791 | |
| Williamsport Regional | 230 | ○ | ○ | \$15,316 | |
| York | 528 | ○ | ○ | \$19,917 | |

Pneumonia – Aspiration

| Hospital | Total Number of Cases | Mortality | Readmissions (for any reason) | Average Hospital Charge |
|--------------------------------------|-----------------------|-------------|-------------------------------|-------------------------|
| Statewide | 7,065 | 5.4% | 21.0% | \$42,712 |
| Central & Northeastern PA | 1,478 | 6.7% | 18.1% | \$34,664 |
| Barnes-Kasson County | 3 | NR | NR | NR |
| Berwick | 3 | NR | NR | NR |
| Bucktail | 2 | NR | NR | NR |
| Carlisle Regional | 24 | ⊙ | ⊙ | \$45,904 |
| Chambersburg | 71 | ⊙ | ⊙ | \$23,644 |
| Endless Mountains | 3 | NR | NR | NR |
| Ephrata Community | 26 | ⊙ | ⊙ | \$30,168 |
| Evangelical Community | 2 | NR | NR | NR |
| Fulton County | 11 | ⊙ | ⊙ | \$30,832 |
| Geisinger Bloomsburg | 9 | ⊙ | ⊙ | \$34,289 |
| Geisinger Community | 37 | ⊙ | ⊙ | \$58,198 |
| Geisinger Danville | 54 | ⊙ | ⊙ | \$50,151 |
| Geisinger Lewistown | 27 | ⊙ | ⊙ | \$23,617 |
| Geisinger Wyoming Valley | 50 | ⊙ | ⊙ | \$55,131 |
| Gettysburg | 25 | ⊙ | ⊙ | \$22,197 |
| Good Samaritan Lebanon | 46 | ⊙ | ⊙ | \$30,841 |
| Guthrie Towanda Memorial | 3 | NR | NR | NR |
| Hanover | 31 | ⊙ | ⊙ | \$26,404 |
| Heart of Lancaster | 5 | ⊙ | NR | \$45,880 |
| Holy Spirit | 44 | ⊙ | ⊙ | \$36,228 |
| J C Blair Memorial | 30 | ⊙ | ⊙ | \$13,288 |

Pneumonia – Aspiration

Caused by inhaling food, drink, mucus or vomit into the lungs leading to inflammation and/or infection. Common causes of aspiration pneumonia include coma, problems with swallowing and decreased mental alertness from medication or alcohol.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Pneumonia – Aspiration

| Hospital | Total Number of Cases | Mortality | Readmissions (for any reason) | Average Hospital Charge |
|------------------------|-----------------------|-----------|-------------------------------|-------------------------|
| Jersey Shore | 4 | NR | NR | NR |
| Lancaster General | 171 | ⊖ | ○ | \$29,806 |
| Lancaster Regional | 17 | ⊖ | ⊖ | \$56,269 |
| Lehigh Valley Hazleton | 66 | ⊖ | ⊖ | \$35,308 |
| Lock Haven | 5 | ⊖ | ⊖ | \$37,691 |
| Memorial York | 11 | ⊖ | ⊖ | \$29,436 |
| Milton S Hershey | 28 | ⊖ | ⊖ | \$34,753 |
| Moses Taylor | 24 | ⊖ | ⊖ | \$50,063 |
| Mount Nittany | 101 | ⊖ | ⊖ | \$36,289 |
| Muncy Valley | 1 | NR | NR | NR |
| Pinnacle Health | 67 | ⊖ | ⊖ | \$27,555 |
| Pocono | 115 | ⊖ | ⊖ | \$37,047 |
| Regional Scranton | 48 | ⊖ | ⊖ | \$44,427 |
| Robert Packer | 53 | ⊖ | ● | \$29,267 |
| Soldiers & Sailors | 17 | ⊖ | ⊖ | \$23,974 |
| Sunbury Community | 19 | ⊖ | ⊖ | \$42,289 |
| Troy Community | 6 | ⊖ | ⊖ | \$17,044 |
| Tyler Memorial | 2 | NR | NR | NR |
| Wayne Memorial | 12 | ⊖ | ⊖ | \$20,796 |
| Waynesboro | 16 | ⊖ | ⊖ | \$24,446 |
| Wilkes-Barre General | 58 | ● | ⊖ | \$62,382 |
| Williamsport Regional | 32 | ⊖ | ⊖ | \$20,636 |
| York | 99 | ⊖ | ⊖ | \$25,892 |

Pneumonia – Aspiration

Caused by inhaling food, drink, mucus or vomit into the lungs leading to inflammation and/or infection. Common causes of aspiration pneumonia include coma, problems with swallowing and decreased mental alertness from medication or alcohol.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Pneumonia – Infectious

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|--------------------------------------|-----------------------|-------------|--------------|-------------------------|
| Statewide | 30,419 | 1.9% | 15.7% | \$31,849 |
| Central & Northeastern PA | 8,091 | 1.8% | 16.1% | \$27,671 |
| Barnes-Kasson County | 69 | ● | ● | \$16,140 |
| Berwick | 40 | ○ | ○ | \$49,522 |
| Bucktail | 8 | ○ | ○ | \$13,857 |
| Carlisle Regional | 135 | ○ | ○ | \$31,070 |
| Chambersburg | 272 | ○ | ○ | \$18,486 |
| Endless Mountains | 50 | ○ | ○ | \$7,784 |
| Ephrata Community | 170 | ○ | ○ | \$33,073 |
| Evangelical Community | 100 | ○ | ○ | \$16,619 |
| Fulton County | 79 | ○ | ○ | \$23,602 |
| Geisinger Bloomsburg | 79 | ○ | ○ | \$23,833 |
| Geisinger Community | 345 | ○ | ○ | \$41,521 |
| Geisinger Danville | 308 | ○ | ○ | \$39,641 |
| Geisinger Lewistown | 175 | ○ | ○ | \$22,337 |
| Geisinger Wyoming Valley | 366 | ○ | ○ | \$41,038 |
| Gettysburg | 83 | ○ | ○ | \$20,557 |
| Good Samaritan Lebanon | 256 | ○ | ○ | \$23,823 |
| Guthrie Towanda Memorial | 97 | ○ | ○ | \$19,965 |
| Hanover | 242 | ○ | ○ | \$24,912 |
| Heart of Lancaster | 54 | ○ | ○ | \$29,500 |
| Holy Spirit | 231 | ○ | ○ | \$27,626 |
| J C Blair Memorial | 75 | ○ | ○ | \$9,423 |

Pneumonia – Infectious

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

Understanding the Symbols

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- Rate was significantly lower than expected.
- Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR Not reported. Too few cases after exclusions.

Pneumonia – Infectious

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|------------------------|-----------------------|-----------|-------------|-------------------------|
| Jersey Shore | 68 | ⊖ | ⊖ | \$15,497 |
| Lancaster General | 540 | ⊖ | ⊖ | \$25,447 |
| Lancaster Regional | 93 | ⊖ | ⊖ | \$38,644 |
| Lehigh Valley Hazleton | 300 | ⊖ | ⊖ | \$29,948 |
| Lock Haven | 39 | ⊖ | ⊖ | \$43,394 |
| Memorial York | 130 | ⊖ | ⊖ | \$21,151 |
| Milton S Hershey | 244 | ⊖ | ⊖ | \$27,324 |
| Moses Taylor | 174 | ⊖ | ⊖ | \$43,979 |
| Mount Nittany | 317 | ⊖ | ⊖ | \$25,930 |
| Muncy Valley | 68 | ⊖ | ⊖ | \$15,897 |
| Pinnacle Health | 432 | ⊖ | ⊖ | \$16,236 |
| Pocono | 361 | ⊖ | ⊖ | \$27,437 |
| Regional Scranton | 247 | ● | ⊖ | \$37,560 |
| Robert Packer | 265 | ⊖ | ⊖ | \$23,943 |
| Soldiers & Sailors | 107 | ⊖ | ⊖ | \$18,582 |
| Sunbury Community | 29 | ⊖ | ⊖ | \$32,260 |
| Troy Community | 76 | ⊖ | ⊖ | \$17,533 |
| Tyler Memorial | 60 | ⊖ | ⊖ | \$26,786 |
| Wayne Memorial | 193 | ⊖ | ⊖ | \$18,275 |
| Waynesboro | 73 | ⊖ | ⊖ | \$17,721 |
| Wilkes-Barre General | 423 | ⊖ | ⊖ | \$47,964 |
| Williamsport Regional | 193 | ⊖ | ⊖ | \$18,236 |
| York | 425 | ⊖ | ⊖ | \$19,736 |

Pneumonia – Infectious

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

Understanding the Symbols

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- ⊖ Rate was significantly lower than expected.
- ⊕ Rate was not significantly different than expected.
- Rate was significantly higher than expected.

NR Not reported. Too few cases after exclusions.

Respiratory Failure

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|--------------------------------------|-----------------------|-------------|--------------|-------------------------|
| Statewide | 15,427 | 9.7% | 23.6% | \$56,530 |
| Central & Northeastern PA | 4,879 | 8.8% | 21.0% | \$46,405 |
| Barnes-Kasson County | 2 | NR | NR | NR |
| Berwick | 5 | ⊖ | NR | \$68,965 |
| Bucktail | 0 | NR | NR | NR |
| Carlisle Regional | 116 | ⊖ | ⊖ | \$42,292 |
| Chambersburg | 261 | ⊖ | ⊖ | \$26,036 |
| Endless Mountains | 1 | NR | NR | NR |
| Ephrata Community | 41 | ⊖ | ⊖ | \$56,908 |
| Evangelical Community | 201 | ⊖ | ⊖ | \$30,467 |
| Fulton County | 8 | ⊖ | ⊖ | \$34,388 |
| Geisinger Bloomsburg | 31 | ⊖ | ⊖ | \$44,796 |
| Geisinger Community | 152 | ⊖ | ⊖ | \$67,589 |
| Geisinger Danville | 347 | ⊖ | ⊖ | \$77,620 |
| Geisinger Lewistown | 194 | ⊖ | ⊖ | \$36,474 |
| Geisinger Wyoming Valley | 335 | ⊖ | ⊖ | \$70,956 |
| Gettysburg | 53 | ⊖ | ⊖ | \$30,049 |
| Good Samaritan Lebanon | 141 | ⊖ | ⊖ | \$41,236 |
| Guthrie Towanda Memorial | 25 | ⊖ | ⊖ | \$37,559 |
| Hanover | 75 | ⊖ | ⊖ | \$41,202 |
| Heart of Lancaster | 11 | ⊖ | ⊖ | \$61,710 |
| Holy Spirit | 77 | ⊖ | ⊖ | \$46,096 |
| J C Blair Memorial | 2 | NR | NR | NR |

Respiratory Failure

Failure of the lungs to support the exchange of oxygen and carbon dioxide causing impairment of critical body functions. Treatment depends on the severity of the condition. Included are both acute (short-term illness that is treated as a medical emergency) and chronic (develops over time and may require long-term treatment) forms. In some cases, a mechanical ventilator (“breathing machine”) may be necessary to assist with breathing.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital’s actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Readmission ratings were based on “unplanned” readmissions only; patients readmitted for reasons defined as typically planned were not counted as having a readmission.

Respiratory Failure

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|------------------------|-----------------------|-----------|-------------|-------------------------|
| Jersey Shore | 1 | NR | NR | NR |
| Lancaster General | 463 | ⊖ | ⊖ | \$39,036 |
| Lancaster Regional | 15 | ⊖ | ⊖ | \$51,516 |
| Lehigh Valley Hazleton | 146 | ⊖ | ⊖ | \$45,908 |
| Lock Haven | 12 | ⊖ | ⊖ | \$70,329 |
| Memorial York | 40 | ⊖ | ⊖ | \$25,594 |
| Milton S Hershey | 307 | ⊖ | ⊖ | \$46,209 |
| Moses Taylor | 78 | ⊖ | ⊖ | \$74,919 |
| Mount Nittany | 113 | ⊖ | ⊖ | \$42,645 |
| Muncy Valley | 4 | NR | NR | NR |
| Pinnacle Health | 327 | ⊖ | ⊖ | \$36,745 |
| Pocono | 165 | ⊖ | ⊖ | \$40,797 |
| Regional Scranton | 64 | ⊖ | ⊖ | \$61,782 |
| Robert Packer | 271 | ⊖ | ⊖ | \$42,768 |
| Soldiers & Sailors | 18 | ⊖ | ⊖ | \$39,854 |
| Sunbury Community | 7 | ⊖ | ⊖ | \$81,144 |
| Troy Community | 17 | ⊖ | ⊖ | \$25,091 |
| Tyler Memorial | 0 | NR | NR | NR |
| Wayne Memorial | 84 | ○ | ⊖ | \$26,816 |
| Waynesboro | 62 | ⊖ | ○ | \$25,685 |
| Wilkes-Barre General | 199 | ⊖ | ⊖ | \$69,149 |
| Williamsport Regional | 258 | ○ | ⊖ | \$29,282 |
| York | 150 | ⊖ | ⊖ | \$30,819 |

Respiratory Failure

Failure of the lungs to support the exchange of oxygen and carbon dioxide causing impairment of critical body functions. Treatment depends on the severity of the condition. Included are both acute (short-term illness that is treated as a medical emergency) and chronic (develops over time and may require long-term treatment) forms. In some cases, a mechanical ventilator (“breathing machine”) may be necessary to assist with breathing.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital’s actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Readmission ratings were based on “unplanned” readmissions only; patients readmitted for reasons defined as typically planned were not counted as having a readmission.

Sepsis

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|--------------------------------------|-----------------------|-------------|--------------|-------------------------|
| Statewide | 63,134 | 8.8% | 17.9% | \$51,898 |
| Central & Northeastern PA | 19,727 | 8.4% | 16.8% | \$39,121 |
| Barnes-Kasson County | 17 | ⊙ | ⊙ | \$14,911 |
| Berwick | 77 | ⊙ | ⊙ | \$63,946 |
| Bucktail | 0 | NR | NR | NR |
| Carlisle Regional | 188 | ● | ⊙ | \$42,576 |
| Chambersburg | 1,154 | ⊙ | ○ | \$26,693 |
| Endless Mountains | 3 | NR | NR | NR |
| Ephrata Community | 443 | ⊙ | ⊙ | \$38,564 |
| Evangelical Community | 497 | ⊙ | ⊙ | \$22,927 |
| Fulton County | 11 | ⊙ | ⊙ | \$31,426 |
| Geisinger Bloomsburg | 164 | ⊙ | ⊙ | \$31,708 |
| Geisinger Community | 643 | ⊙ | ⊙ | \$61,478 |
| Geisinger Danville | 1,389 | ⊙ | ⊙ | \$62,152 |
| Geisinger Lewistown | 220 | ⊙ | ⊙ | \$28,142 |
| Geisinger Wyoming Valley | 741 | ○ | ○ | \$69,687 |
| Gettysburg | 449 | ⊙ | ⊙ | \$24,823 |
| Good Samaritan Lebanon | 572 | ○ | ○ | \$32,599 |
| Guthrie Towanda Memorial | 90 | ⊙ | ⊙ | \$26,384 |
| Hanover | 275 | ⊙ | ⊙ | \$27,064 |
| Heart of Lancaster | 59 | ⊙ | ⊙ | \$49,018 |
| Holy Spirit | 618 | ⊙ | ⊙ | \$38,437 |
| J C Blair Memorial | 75 | ⊙ | ⊙ | \$11,844 |

Sepsis

A system-wide inflammatory response to infection that can worsen and include life-threatening acute organ dysfunction.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Readmission ratings were based on "unplanned" readmissions only; patients readmitted for reasons defined as typically planned were not counted as having a readmission.

Sepsis

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge | Sepsis |
|------------------------|-----------------------|-----------|-------------|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Jersey Shore | 12 | ⊖ | ⊖ | \$17,625 | <p>A system-wide inflammatory response to infection that can worsen and include life-threatening acute organ dysfunction.</p> <p>Understanding the Symbols</p> <p>The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).</p> <ul style="list-style-type: none"> ⊖ Rate was significantly lower than expected. ⊙ Rate was not significantly different than expected. ● Rate was significantly higher than expected. <p>NR Not reported. Too few cases after exclusions.</p> <p>Readmission ratings were based on "unplanned" readmissions only; patients readmitted for reasons defined as typically planned were not counted as having a readmission.</p> |
| Lancaster General | 1,057 | ⊖ | ⊖ | \$36,526 | |
| Lancaster Regional | 92 | ⊖ | ⊖ | \$51,589 | |
| Lehigh Valley Hazleton | 327 | ⊖ | ○ | \$41,350 | |
| Lock Haven | 157 | ⊖ | ⊖ | \$47,817 | |
| Memorial York | 297 | ⊖ | ⊖ | \$27,002 | |
| Milton S Hershey | 1,546 | ⊖ | ⊖ | \$45,835 | |
| Moses Taylor | 386 | ⊖ | ⊖ | \$69,781 | |
| Mount Nittany | 649 | ⊖ | ⊖ | \$37,238 | |
| Muncy Valley | 22 | ⊖ | ⊖ | \$15,788 | |
| Pinnacle Health | 2,515 | ⊖ | ○ | \$26,680 | |
| Pocono | 482 | ⊖ | ● | \$45,219 | |
| Regional Scranton | 494 | ● | ⊖ | \$54,709 | |
| Robert Packer | 368 | ⊖ | ⊖ | \$40,492 | |
| Soldiers & Sailors | 130 | ⊖ | ⊖ | \$24,496 | |
| Sunbury Community | 41 | ⊖ | ⊖ | \$36,289 | |
| Troy Community | 14 | ⊖ | ⊖ | \$18,480 | |
| Tyler Memorial | 36 | ⊖ | ⊖ | \$30,073 | |
| Wayne Memorial | 116 | ⊖ | ⊖ | \$25,950 | |
| Waynesboro | 408 | ○ | ⊖ | \$22,702 | |
| Wilkes-Barre General | 476 | ● | ⊖ | \$64,310 | |
| Williamsport Regional | 703 | ○ | ⊖ | \$26,471 | |
| York | 1,714 | ● | ⊖ | \$29,805 | |

Sepsis

A system-wide inflammatory response to infection that can worsen and include life-threatening acute organ dysfunction.

Understanding the Symbols

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- ⊖ Rate was significantly lower than expected.
 - ⊙ Rate was not significantly different than expected.
 - Rate was significantly higher than expected.
- NR** Not reported. Too few cases after exclusions.

Readmission ratings were based on "unplanned" readmissions only; patients readmitted for reasons defined as typically planned were not counted as having a readmission.

Stroke

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|--------------------------------------|-----------------------|-------------|--------------|-------------------------|
| Statewide | 22,454 | 3.2% | 12.3% | \$46,132 |
| Central & Northeastern PA | 5,993 | 3.1% | 11.2% | \$35,285 |
| Barnes-Kasson County | 19 | ● | ⊖ | \$13,832 |
| Berwick | 12 | ⊖ | ⊖ | \$66,887 |
| Bucktail | 2 | NR | NR | NR |
| Carlisle Regional | 80 | ⊖ | ⊖ | \$29,803 |
| Chambersburg | 235 | ⊖ | ⊖ | \$27,069 |
| Endless Mountains | 8 | ⊖ | ⊖ | \$11,064 |
| Ephrata Community | 134 | ⊖ | ⊖ | \$31,364 |
| Evangelical Community | 146 | ⊖ | ⊖ | \$27,602 |
| Fulton County | 11 | ⊖ | ⊖ | \$25,717 |
| Geisinger Bloomsburg | 15 | ⊖ | ⊖ | \$39,503 |
| Geisinger Community | 259 | ⊖ | ⊖ | \$48,188 |
| Geisinger Danville | 484 | ⊖ | ⊖ | \$55,802 |
| Geisinger Lewistown | 82 | ⊖ | ⊖ | \$21,859 |
| Geisinger Wyoming Valley | 314 | ⊖ | ⊖ | \$53,745 |
| Gettysburg | 92 | ⊖ | ⊖ | \$21,553 |
| Good Samaritan Lebanon | 124 | ⊖ | ⊖ | \$21,880 |
| Guthrie Towanda Memorial | 4 | NR | NR | NR |
| Hanover | 139 | ⊖ | ⊖ | \$26,420 |
| Heart of Lancaster | 37 | ⊖ | ⊖ | \$33,202 |
| Holy Spirit | 156 | ⊖ | ⊖ | \$33,043 |
| J C Blair Memorial | 8 | ⊖ | ⊖ | \$11,896 |

Stroke

An ischemic stroke occurs when there is an obstruction (blockage) in a blood vessel in the brain or neck causing damage or death to an area of the brain. Not included are patients who are treated with a balloon (angioplasty)/stent procedure or other surgery to remove the obstruction responsible for the stroke, or patients admitted with a rupture (break) in a blood vessel in the brain (hemorrhagic stroke) unless the hemorrhage occurs after the ischemic stroke but during the hospitalization.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Stroke

| Hospital | Total Number of Cases | Mortality | Readmission | Average Hospital Charge |
|------------------------|-----------------------|-----------|-------------|-------------------------|
| Jersey Shore | 5 | ⊙ | ⊙ | \$26,645 |
| Lancaster General | 532 | ⊙ | ⊙ | \$25,535 |
| Lancaster Regional | 38 | ⊙ | ⊙ | \$36,032 |
| Lehigh Valley Hazleton | 73 | ⊙ | ⊙ | \$34,453 |
| Lock Haven | 11 | ⊙ | ⊙ | \$53,279 |
| Memorial York | 63 | ⊙ | ⊙ | \$22,175 |
| Milton S Hershey | 464 | ○ | ○ | \$44,481 |
| Moses Taylor | 131 | ⊙ | ⊙ | \$56,541 |
| Mount Nittany | 215 | ● | ⊙ | \$31,647 |
| Muncy Valley | 3 | NR | NR | NR |
| Pinnacle Health | 537 | ⊙ | ⊙ | \$23,145 |
| Pocono | 252 | ⊙ | ⊙ | \$37,617 |
| Regional Scranton | 146 | ⊙ | ● | \$47,194 |
| Robert Packer | 162 | ⊙ | ⊙ | \$32,406 |
| Soldiers & Sailors | 33 | ⊙ | ⊙ | \$16,460 |
| Sunbury Community | 6 | ⊙ | ⊙ | \$32,041 |
| Troy Community | 6 | ⊙ | ⊙ | \$16,381 |
| Tyler Memorial | 0 | NR | NR | NR |
| Wayne Memorial | 63 | ⊙ | ⊙ | \$24,540 |
| Waynesboro | 57 | ⊙ | ⊙ | \$23,284 |
| Wilkes-Barre General | 229 | ⊙ | ⊙ | \$50,731 |
| Williamsport Regional | 185 | ⊙ | ⊙ | \$19,056 |
| York | 421 | ⊙ | ⊙ | \$26,452 |

Stroke

An ischemic stroke occurs when there is an obstruction (blockage) in a blood vessel in the brain or neck causing damage or death to an area of the brain. Not included are patients who are treated with a balloon (angioplasty)/stent procedure or other surgery to remove the obstruction responsible for the stroke, or patients admitted with a rupture (break) in a blood vessel in the brain (hemorrhagic stroke) unless the hemorrhage occurs after the ischemic stroke but during the hospitalization.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual rate of mortality or readmission to its expected rate, which takes into account varying illness levels among patients (see Accounting for High Risk Patients in About the Report).

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

Medicare Payments

The following table includes information about payments made by Medicare for the 16 medical conditions/surgical procedures included in this *Hospital Performance Report*. This analysis is based on data from calendar year 2015, which is the most recent payment data available to PHC4. Displayed are the average amounts paid by Medicare fee-for-service for inpatient hospitalizations of Pennsylvania residents only. Payments from Medicare Advantage plans (e.g., Medicare HMOs) are not included, nor are patient liabilities (e.g., coinsurance and deductible dollar amounts).

The average Medicare fee-for-service payment is calculated using the claim payment amount based on data provided by the Centers for Medicare and Medicaid Services (CMS). The average payment is calculated by summing the payment amounts for the cases in a particular medical condition/surgical

procedure and dividing the sum by the number of cases in that condition/procedure group.

The payments analysis is based on data from 2015, the most recent information available to PHC4. The data reflects the average amounts paid by Medicare fee-for-service for inpatient hospitalizations of Pennsylvania residents only.

Most of the medical conditions and surgical procedures included in this report are defined using ICD-10-CM/PCS (International Classification of Diseases, Tenth Revision, Clinical Modification/Procedure Coding System) diagnosis and procedure codes, with a secondary requirement that they be limited to particular MS-DRGs (Medicare Severity – Diagnosis-Related Groups) – information available from the discharge data that PHC4 receives from Pennsylvania hospitals. One condition (Chest Pain) is comprised of a single MS-DRG.

In this section, average payments are displayed for the 16 medical conditions/surgical procedures included in this report – broken down by the MS-DRGs included within each condition/procedure. While the 16 conditions/procedures have been defined using diagnosis and procedure codes that represent a clinically cohesive population, the payment data is displayed by the individual MS-DRGs included within each condition to account for variations in case mix.

Medicare Payments

| Medicare Fee-for-Service Payments – 2015 Statewide Data | | | |
|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|--------------------------|-----------------|
| For the 16 medical conditions/surgical procedures included in this Hospital Performance Report | | | |
| MS-DRG | MS-DRG Descriptions by Medical Condition/Surgical Procedure | Medicare Fee-for-Service | |
| | | Cases | Average Payment |
| Abnormal Heartbeat | | 13,453 | \$7,421 |
| 242 | Permanent Cardiac Pacemaker Implant w/ MCC | 596 | \$22,226 |
| 243 | Permanent Cardiac Pacemaker Implant w/ CC | 888 | \$15,692 |
| 244 | Permanent Cardiac Pacemaker Implant w/o CC/MCC | 758 | \$12,491 |
| 246 | Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents* | 18 | \$20,623 |
| 247 | Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/o MCC* | 20 | \$12,617 |
| 248 | Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents* | 5 | NR |
| 249 | Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/o MCC* | 3 | NR |
| 250 | Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/ MCC* | 120 | \$19,582 |
| 251 | Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/o MCC* | 342 | \$13,863 |
| 258 | Cardiac Pacemaker Device Replacement w/ MCC | 9 | NR |
| 259 | Cardiac Pacemaker Device Replacement w/o MCC | 19 | \$12,765 |
| 260 | Cardiac Pacemaker Revision Except Device Replacement w/ MCC | 5 | NR |
| 261 | Cardiac Pacemaker Revision Except Device Replacement w/ CC | 12 | \$11,345 |
| 262 | Cardiac Pacemaker Revision Except Device Replacement w/o CC/MCC | 13 | \$8,508 |
| 273 | Percutaneous Intracardiac Procedures w/ MCC† | 43 | \$25,505 |
| 274 | Percutaneous Intracardiac Procedures w/o MCC† | 93 | \$17,614 |
| 286 | Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC | 183 | \$13,200 |
| 287 | Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC | 253 | \$6,653 |
| 308 | Cardiac Arrhythmia and Conduction Disorders w/ MCC | 3,020 | \$7,170 |
| 309 | Cardiac Arrhythmia and Conduction Disorders w/ CC | 3,805 | \$4,471 |
| 310 | Cardiac Arrhythmia and Conduction Disorders w/o CC/MCC | 3,248 | \$2,798 |
| Chest Pain | | 1,706 | \$3,691 |
| 313 | Chest Pain | 1,706 | \$3,691 |
| Chronic Obstructive Pulmonary Disease (COPD) | | 11,182 | \$5,597 |
| 190 | Chronic Obstructive Pulmonary Disease w/ MCC | 4,494 | \$6,678 |
| 191 | Chronic Obstructive Pulmonary Disease w/ CC | 4,329 | \$5,361 |
| 192 | Chronic Obstructive Pulmonary Disease w/o CC/MCC | 2,359 | \$3,968 |

* Cases with this MS-DRG were only included if they were discharged before October 2015.

† This MS-DRG did not exist before October 2015.

NR = Not Reported (10 or fewer cases)

CC = Complication or Comorbidity

MCC = Major Complication or Comorbidity

Medicare Payments

| Medicare Fee-for-Service Payments – 2015 Statewide Data | | | |
|------------------------------------------------------------------------------------------------|--------------------------------------------------------------|--------------------------|-----------------|
| For the 16 medical conditions/surgical procedures included in this Hospital Performance Report | | | |
| MS-DRG | MS-DRG Descriptions by Medical Condition/Surgical Procedure | Medicare Fee-for-Service | |
| | | Cases | Average Payment |
| Colorectal Procedures | | 2,779 | \$17,896 |
| 329 | Major Small and Large Bowel Procedures w/ MCC | 717 | \$29,508 |
| 330 | Major Small and Large Bowel Procedures w/ CC | 1,264 | \$15,781 |
| 331 | Major Small and Large Bowel Procedures w/o CC/MCC | 610 | \$9,724 |
| 332 | Rectal Resection w/ MCC | 18 | \$27,043 |
| 333 | Rectal Resection w/ CC | 97 | \$15,197 |
| 334 | Rectal Resection w/o CC/MCC | 73 | \$10,067 |
| Diabetes - Medical Management | | 3,741 | \$5,918 |
| 073 | Cranial and Peripheral Nerve Disorders w/ MCC | 134 | \$8,625 |
| 074 | Cranial and Peripheral Nerve Disorders w/o MCC | 395 | \$5,612 |
| 299 | Peripheral Vascular Disorders w/ MCC | 30 | \$10,494 |
| 300 | Peripheral Vascular Disorders w/ CC | 77 | \$5,515 |
| 301 | Peripheral Vascular Disorders w/o CC/MCC | 5 | NR |
| 637 | Diabetes w/ MCC | 744 | \$8,802 |
| 638 | Diabetes w/ CC | 1,751 | \$5,024 |
| 639 | Diabetes w/o CC/MCC | 466 | \$3,611 |
| 698 | Other Kidney and Urinary Tract Diagnoses w/ MCC | 39 | \$9,635 |
| 699 | Other Kidney and Urinary Tract Diagnoses w/ CC | 81 | \$6,268 |
| 700 | Other Kidney and Urinary Tract Diagnoses w/o CC/MCC | 19 | \$4,636 |
| Gallbladder Removal - Laparoscopic | | 1,834 | \$9,869 |
| 411 | Cholecystectomy with Common Duct Exploration (C.D.E.) w/ MCC | 3 | NR |
| 412 | Cholecystectomy with C.D.E. w/ CC | 5 | NR |
| 413 | Cholecystectomy with C.D.E. w/o CC/MCC | 5 | NR |
| 417 | Laparoscopic Cholecystectomy without C.D.E. w/ MCC | 398 | \$14,756 |
| 418 | Laparoscopic Cholecystectomy without C.D.E. w/ CC | 806 | \$9,663 |
| 419 | Laparoscopic Cholecystectomy without C.D.E. w/o CC/MCC | 617 | \$6,913 |

NR = Not Reported (10 or fewer cases)
 CC = Complication or Comorbidity
 MCC = Major Complication or Comorbidity

Medicare Payments

| Medicare Fee-for-Service Payments – 2015 Statewide Data | | | |
|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|--------------------------|-----------------|
| For the 16 medical conditions/surgical procedures included in this Hospital Performance Report | | | |
| MS-DRG | MS-DRG Descriptions by Medical Condition/Surgical Procedure | Medicare Fee-for-Service | |
| | | Cases | Average Payment |
| Heart Attack - Angioplasty/Stent | | 3,100 | \$14,894 |
| 246 | Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents | 725 | \$20,969 |
| 247 | Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/o MCC | 1,705 | \$12,469 |
| 248 | Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents | 198 | \$20,124 |
| 249 | Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/o MCC | 306 | \$11,204 |
| 250 | Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/ MCC | 49 | \$19,091 |
| 251 | Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/o MCC | 117 | \$11,645 |
| Heart Attack - Medical Management | | 4,333 | \$7,711 |
| 280 | Acute Myocardial Infarction, Discharged Alive w/ MCC | 1,961 | \$10,005 |
| 281 | Acute Myocardial Infarction, Discharged Alive w/ CC | 1,374 | \$5,842 |
| 282 | Acute Myocardial Infarction, Discharged Alive w/o CC/MCC | 663 | \$4,203 |
| 283 | Acute Myocardial Infarction, Expired w/ MCC | 258 | \$10,280 |
| 284 | Acute Myocardial Infarction, Expired w/ CC | 61 | \$4,289 |
| 285 | Acute Myocardial Infarction, Expired w/o CC/MCC | 16 | \$4,092 |
| Heart Failure | | 20,033 | \$7,026 |
| 286 | Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC | 508 | \$14,499 |
| 287 | Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC | 720 | \$7,232 |
| 291 | Heart Failure and Shock w/ MCC | 7,908 | \$8,921 |
| 292 | Heart Failure and Shock w/ CC | 8,212 | \$5,766 |
| 293 | Heart Failure and Shock w/o CC/MCC | 2,685 | \$3,830 |
| Kidney and Urinary Tract Infections | | 8,211 | \$4,973 |
| 689 | Kidney and Urinary Tract Infections w/ MCC | 2,581 | \$6,231 |
| 690 | Kidney and Urinary Tract Infections w/o MCC | 5,630 | \$4,396 |
| Kidney Failure - Acute | | 9,139 | \$6,460 |
| 682 | Renal Failure w/ MCC | 2,943 | \$9,075 |
| 683 | Renal Failure w/ CC | 5,313 | \$5,505 |
| 684 | Renal Failure w/o CC/MCC | 883 | \$3,491 |

NR = Not Reported (10 or fewer cases)
 CC = Complication or Comorbidity
 MCC = Major Complication or Comorbidity

Medicare Payments

| Medicare Fee-for-Service Payments – 2015 Statewide Data | | | |
|------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------|-----------------|
| For the 16 medical conditions/surgical procedures included in this Hospital Performance Report | | | |
| MS-DRG | MS-DRG Descriptions by Medical Condition/Surgical Procedure | Medicare Fee-for-Service | |
| | | Cases | Average Payment |
| Pneumonia - Aspiration | | 3,265 | \$9,383 |
| 177 | Respiratory Infections and Inflammations w/ MCC | 1,762 | \$11,012 |
| 178 | Respiratory Infections and Inflammations w/ CC | 1,213 | \$7,942 |
| 179 | Respiratory Infections and Inflammations w/o CC/ MCC | 290 | \$5,517 |
| Pneumonia - Infectious | | 12,640 | \$6,327 |
| 177 | Respiratory Infections and Inflammations w/ MCC | 391 | \$11,187 |
| 178 | Respiratory Infections and Inflammations w/ CC | 310 | \$7,952 |
| 179 | Respiratory Infections and Inflammations w/o CC/ MCC | 43 | \$5,039 |
| 193 | Simple Pneumonia and Pleurisy w/ MCC | 4,390 | \$8,157 |
| 194 | Simple Pneumonia and Pleurisy w/ CC | 5,493 | \$5,395 |
| 195 | Simple Pneumonia and Pleurisy w/o CC/MCC | 2,013 | \$3,712 |
| Respiratory Failure | | 5,325 | \$10,289 |
| 189 | Pulmonary Edema and Respiratory Failure | 3,971 | \$7,366 |
| 207 | Respiratory System Diagnosis with Ventilator Support > 96 Hours | 303 | \$33,979 |
| 208 | Respiratory System Diagnosis with Ventilator Support <= 96 Hours | 1,051 | \$14,506 |
| Sepsis | | 23,380 | \$10,756 |
| 870 | Septicemia or Severe Sepsis with Mechanical Ventilation > 96 Hours | 866 | \$37,734 |
| 871 | Septicemia or Severe Sepsis without Mechanical Ventilation > 96 Hours w/ MCC | 16,740 | \$10,961 |
| 872 | Septicemia or Severe Sepsis without Mechanical Ventilation > 96 Hours w/o MCC | 5,774 | \$6,118 |
| Stroke | | 7,690 | \$6,913 |
| 061 | Acute Ischemic Stroke with Use of Thrombolytic Agent w/ MCC | 117 | \$16,411 |
| 062 | Acute Ischemic Stroke with Use of Thrombolytic Agent w/ CC | 240 | \$11,056 |
| 063 | Acute Ischemic Stroke with Use of Thrombolytic Agent w/o CC/MCC | 71 | \$8,693 |
| 064 | Intracranial Hemorrhage or Cerebral Infarction w/ MCC | 1,777 | \$10,532 |
| 065 | Intracranial Hemorrhage or Cerebral Infarction w/ CC or tPA in 24 Hours | 3,655 | \$5,987 |
| 066 | Intracranial Hemorrhage or Cerebral Infarction w/o CC/MCC | 1,830 | \$4,027 |

NR = Not Reported (10 or fewer cases)
 CC = Complication or Comorbidity
 MCC = Major Complication or Comorbidity



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For More Information

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