

August 2025

PENNSYLVANIA HEALTH CARE COST CONTAINMENT COUNCIL



PHC4

Transparent Health Care Reporting

2024 Annual Report

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Executive Director's Message



Barry D. Buckingham

Looking back at 2024 evokes in me much pride over what has been accomplished by the Council and our staff in working collaboratively to embrace our mission, establish a new 5-year strategic plan, and then achieve early success by quickly meeting some of the objectives set forth. The details of this effort are described in the following pages. I am quite proud of our progress so far.

Although we have continued to operate in an environment of limited resources, PHC4 has once again shown itself to be an example of smart investment that produces meaningful tools, carrying on the legacy of credible data and transparent reporting to empower Pennsylvanians in making informed health care decisions.

More than ever, good health care decisions demand credible data and transparent health care reporting. PHC4 invests significant amounts of time, energy and resources into providing information that can be used by stakeholders to improve quality and restrain costs. Through excellent teamwork, we have successfully navigated challenges to continue providing not only the high-quality reporting expected of PHC4 but have also begun implementing innovations and new tools to benefit the stakeholders we serve.

As we approach PHC4's fortieth anniversary, I am confident that we will successfully meet and exceed the strategic goals articulated by the Council and that we will be well-positioned to respond to the needs of our rapidly changing health care environment, with data and resources that will inform decisions, improve quality and restrain costs.

Strategic Plan 2024 - 2029

During 2024, PHC4 embarked on a journey of strategic planning, identifying goals within three primary focus areas: Quality & Payment Data, Governance, and Communications & Education.

Quality & Payment Data

Within the pursuit of collecting and reporting payment and cost data, the Council adopted their Payment Data Advisory Group's recommendation to collect additional data from providers with the intent to provide the insights needed to report actionable information on the cost of health care in the state. This collection will begin in Q1 of 2026. In support of this initiative, the information technology department developed a beta system to allow facilities an opportunity to begin testing their data submissions in advance of the required deadlines. The Council expects to begin incorporating this data into its reporting within the next several years.

In alignment with current health care delivery trends, the Council set a goal to evaluate procedures performed in the ambulatory/outpatient setting. Staff set out to develop a new public report displaying the volume of specific outpatient procedures for hospitals and ambulatory surgery centers which will be released in 2025. An effort to evaluate subsequent inpatient admissions related to procedures performed in the ambulatory/outpatient setting is anticipated to begin in 2026. Additionally, quality data initiatives include the evaluation of physician-specific volume and outcomes measures. Preparations have begun for verifying physician record assignments and a new tool is being developed to assist hospitals in the verification process. Results will be added to PHC4 reports when sufficient data is available.

Strategic Plan 2024 - 2029

Governance

In the area of governance, the Council committed to prioritizing more time for strategic discussions by designating two meetings annually to set aside time for this purpose. The Council also strengthened its mission statement, and aims to develop a vision statement, work towards securing additional funding and to develop a recommendation for proposed updates to PHC4's enabling legislation in advance of reauthorization in 2030.

Communications & Education

Within communications and education, the Council identified two primary goals, to build PHC4 awareness in its defined stakeholder groups and to advance the understanding of its data client experience, output, and value. To begin addressing these goals, the Education Committee was reconstituted, and established as its mission to assist purchasers, policymakers, and consumers of health care services to make more informed decisions to enhance the value and quality of health care in Pennsylvania by promoting awareness, understanding, use, and sale of data and information collected, developed, and analyzed by PHC4. This committee will evaluate proposed programs aligned with the council's goals. Additionally, staff have expanded outreach efforts and stakeholder engagement opportunities.

About PHC4

Created by the Pennsylvania General Assembly in 1986, the Pennsylvania Health Care Cost Containment Council (PHC4) is an independent council charged with collecting, analyzing, and reporting information that can be used to improve the quality and restrain the cost of health care in the Commonwealth. Today, PHC4 is a recognized national leader in public health care reporting. PHC4 is governed by council members representing business, labor, consumers, health care providers, insurers, health economists, and state government.

Created in 1986 by the
Pennsylvania General
Assembly



Governance

PHC4 is governed by Council members who help oversee and carry out its mission. The Council is comprised of a multidisciplinary team of professionals that represent key stakeholders from across the Commonwealth. PHC4's Executive Committee encompasses Council members who are elected to their positions annually, in accordance with PHC4's statute and bylaws. PHC4's most recent enabling legislation (Act 15 of 2020) added four members of the Pennsylvania General Assembly to the composition of the Council. Council members bring years of medical, research, business, labor, economic, and policy experience to support PHC4's overall goal of providing stakeholders with fact-based reporting to inform decisions. Other groups and subcommittees of the Council provide guidance and oversight of the research and risk-adjustment methodology, statistical expertise and rigor, data collection and dissemination, and approach to public reporting. The ongoing support and leadership PHC4 Council members provide is imperative to the organization's long-term success.

Executive Committee

Karen Groh

CHAIR

Business

Neal Leshner

CHAIR, EDUCATION COMMITTEE

Business

Rob Bair

VICE-CHAIR

Labor

David Kelley, MD

CHAIR, DATA SYSTEMS COMMITTEE

(Designee)

Arthur Steinberg

TREASURER

Labor

Pennsylvania Department of Human Services

Samuel Denisco

PAST CHAIR

Business

Tom Duzak

CHAIR, MANDATED BENEFITS COMMITTEE

Labor

"Pennsylvanians have a right to make informed decisions about their health care. PHC4 makes these difficult decisions easier. It's an honor to serve on this important council."

-KAREN GROH, CHAIR



Additional Council Members

Valerie A. Arkoosh, MD, MPH

Secretary,
Pennsylvania Department of Human Services

Debra L. Bogen, MD

Secretary,
Pennsylvania Department of Health

Representative Bryan Cutler

Legislature

Randall N. DiPalo

Labor

Jodi A. Frantz

(Designee)
Pennsylvania Insurance Department

Senator Aurthur Haywood

Legislature

Muneeza Iqbal, MPH

(Designee)
Pennsylvania Department of Health

Matthew D. McHugh, PhD,

JD, MPH, RN, FAAN

Nurses

Abdoul Aziz Sosseh

Hospitals

Monica Virgilio

Labor

Outgoing Member(s):

Gregory Martino

Insurance (Commercial)

Senator Camera Bartolotta

Legislature

George M. Book, Jr.

Business

Mark Dever

Business

Representative Dan Frankel

Legislature

Martin Gaynor, PhD

Health Economics & Outcomes Research Expert

Michael Humphreys

Insurance Commissioner
Pennsylvania Insurance Department

Brad Klein, MD, MBA, FAAN,

FAHS, FAANEM

Physician

Michael Seim, MD

Rural Hospitals

Adele Towers, MD, MPH FACP

Physicians

Michael Yantis

Insurance

Technical Advisory Group

The Technical Advisory Group brings together professionals like physicians, biostatisticians, and health services researchers to respond to issues related to research methodology, statistical expertise, and risk-adjustment methods. They offer advice, contribute to methodological advancements, and ensure PHC4's reports stay on the cutting edge of health care information.



David B. Nash, MD, MBA, FACP

CHAIR

Founding Dean Emeritus,
Jefferson School of Population Health,
Philadelphia, PA

Paul N. Casale, MD, FACC

Cardiologist
Lancaster, PA

George R. Green, MD

Physician-in-Chief, Division of Allergy & Immunology
Department of Medicine, Abington Memorial Hospital
Abington, PA

Steven Belle, PhD

Professor, Graduate School of Public Health
University of Pittsburgh
Pittsburgh, PA

Daniel J. Glunk, MD, FACP

Chief Quality Officer
Susquehanna Health
Williamsport, PA

Donald Liss, MD

Senior Medical Director of Clinical Programs
and Policy, Independence Blue Cross
Philadelphia, PA

Robert Shipp, III, PhD, BSN, RN, NEA-BC

Vice President, Population Health Strategies
Hospital and Healthsystem Association of PA
Harrisburg, PA

In Memoriam

It is with sadness that we bid farewell to long time Technical Advisory Group (TAG) Member, Dr. George Green, who passed away on January 28, 2024. Dr. Green was among the founding members of TAG, established by the Council in the mid-90s and remained an active member of the advisory group until his death, serving for more than thirty years.

Dr. Green graduated from the University of Pennsylvania School of Medicine in 1962 and, after completing his residency in Internal Medicine at the Mayo Clinic in 1965, returned to Penn and completed a fellowship in allergy and immunology in 1966. Upon completion of his training, he continued as faculty in the department of medicine at the Hospital of the University of Pennsylvania and joined the staff at Abington Memorial Hospital where he practiced in Internal Medicine and his subspecialty of Allergy and Immunology for over 50 years. George was a founding partner of Abington Medical Specialists, a large multispecialty private practice group still thriving today.

Dr. Green was a dedicated servant leader and contributed significantly to the work of TAG and PHC4's Council over the years. He was a loyal and dedicated public servant, and a great representative, he is greatly missed.

George R. Green, MD
(1934-2024)



Payment Data Advisory Group

The Payment Data Advisory Group produces recommendations to the Council surrounding the collection, analysis, and public reporting of payment data. The payment data advisory group includes technical experts and individuals knowledgeable in payment systems and claims data.



"I am very grateful to be a member of the Council at PHC4. As the Chair of the Payment Data Advisory Group (PDAG) I, alongside a talented cohort of health care professionals, support the outstanding team that works diligently to produce meaningful data, while ensuring its mission of helping Pennsylvanian's understand the cost and quality of health care delivery is upheld."

Michael Yantis, CHAIR

Vice President, State Government Affairs, Highmark, Inc.

Robert Bair

**President, Pennsylvania State Building
& Construction Trades Council**

Christy Dure, MHA, MPA

**Assistant Teaching Professor, Program Director
Health Management & Policy
Dornsife School of Public Health
Drexel University**

Karen Groh

**President & CEO
Lebanon Valley Chamber of Commerce**

Iftekhar Kazi

**Chief Architect & VP
Enterprise Architecture, UPMC**

Jaan Sidorov, MD

**Internal Medicine
Geisinger Medical Center**

Abdoul Aziz Sosseh

**Vice President, Enterprise Analytics
Thomas-Jefferson University & Jefferson Health System**

Carl Alberto

**Vice President, Finance
St. Luke's University Health Network**

Ravi Chawla

**Vice President & Chief Analytics Officer
Independence Blue Cross**

Martin Gaynor, PhD

**E.J. Barone Professor of Economics & Public Policy
Carnegie Mellon University**

Joe Huxta

**Retired, Manager of Health & Wellness
Volvo-Mack Trucks**

David Kelley, MD

**Chief Medical Officer
Office of Medical Assistance Programs
PA Department of Human Services**

Jay Solomon

**Director of Network Provider Operations
Capital Blue Cross**

William Van Decker, MD

**Cardiology, Professor, Medicine
Lewis Katz School of Medicine at Temple University**

Education Committee

The mission of the Education Committee is to assist purchasers, policymakers, and consumers of health care services to make more informed decisions to enhance the value and quality of health care in Pennsylvania by promoting awareness, understanding, use, and sale of data and information collected, developed, and analyzed by PHC4.



Neal Leshner

CHAIR, EDUCATION COMMITTEE

**Director, Government Affairs, Pennsylvania
Chamber of Business and Industry**

Data Systems Committee

The Data Systems Committee provides direction to the Council in fulfilling its statutory goals of data collection and dissemination and confers with PHC4's Technical Advisory Group on clinical, statistical and other complicated health issues that will be reflected in the preparation, analysis, and dissemination of health information from PHC4.

"The Data Systems Committee works with dedicated staff and other Committees to assure PHC4's reports are timely, accurate, and pertinent to the ever changing landscape of healthcare, especially as more care is delivered in an outpatient setting."

David Kelley, MD

CHAIR, DATA SYSTEMS COMMITTEE

**Chief Medical Officer, Office of Medical Assistance
Programs, PA Department of Human Services**





Our Team

The Power of PHC4



Barry D. Buckingham

Executive Director

Rob Andersen

Chief Information Officer

Samuel Dedinsky

Statistical Analyst, Research

Patrick Fletcher

Network Administrator, Information Services

Palmer Flipse

Statistical Analyst, Research

Judi Good

Senior Business Analyst, Special Requests

Julia Gottlieb

Descriptive Statistician, Research

Reneé Greenawalt

Deputy Executive Director

George Gugoff

Manager, Financial Reporting

Katie Jordan

Program Analyst, Communications & Education

Jane Keck, PhD

Chief of Health Policy Research

Jiahao Liu

Program Analyst, Financial Reporting

Jared Martin

Statistical Analyst, Research

Jake Muskovitz

Data Analyst, Special Projects

Sue Neidlinger

Director, Administration & Budget

JoAnne Nelson

Manager, Special Requests

Gail Perez

Descriptive Statistician, Information Services

Lakisha Randolph

Administrative Officer, Administration & Budget

Sarah Scholl

Registry Specialist, Research

Abby Weand

Manager, Research

Charles Wentzel

Manager, Research

Our Team

The Power of PHC4

Data Requests

Special Requests, Custom Reports & Specialized Data Analysis

Access to good data is key to making informed health care decisions. PHC4 is very proud to be of value to the Commonwealth of Pennsylvania in providing credible, accurate information, a vital tool for health care consumers, providers, purchasers and policymakers.

PHC4 collects approximately 1.5 million inpatient records from Pennsylvania hospitals and approximately 3.5 million ambulatory/outpatient records from Pennsylvania hospitals and ambulatory surgery centers each year. These records are available for those who wish to analyze detailed inpatient discharge and ambulatory/outpatient procedure data in the form of standard predetermined data files or custom data files. There are more than 70 data fields available, which include utilization and administrative data.

PHC4's comprehensive databases can help answer questions about the care Pennsylvanians receive during their hospitalization and associated charges. PHC4 data and analyses provide invaluable assistance to the Commonwealth's employers, labor organizations, consumers, providers, insurers, and policymakers who are seeking better value for their health care dollars. Between January 1, 2024, and December 31, 2024, PHC4 fulfilled 92 requests for datasets and reports, generating revenue in the amount of \$732,103. Revenue generated from sales of data covers the agency's operating expenses, providing about 20 percent of its annual operating budget.

Data Requests

Special Requests, Custom Reports & Specialized Data Analysis

Non-commercial clients, including hospitals, health systems, health care organizations, purchasers, and insurers comprise the majority of PHC4 data requestors, using the data for quality improvement, strategic planning, needs assessment, market share analyses, surgical outcome analyses and utilization reviews. A portion of requests come from academic health care researchers, both inside and outside the Commonwealth and from the press. Another portion of requests come from commercial clients who are corporations/organizations that repackage and redistribute PHC4 data or analysis.

PHC4 is also a data partner with the Healthcare Cost & Utilization Project (HCUP), sponsored by the Agency for Healthcare Research and Quality. The family of databases, developed through a federal-state-industry partnership, is an essential data source for health researchers across the nation, providing comprehensive, accurate and timely data for use in evaluating cost, quality, and access to health care. A number of state agencies and members of the Pennsylvania General Assembly rely on PHC4 annually for reliable, accurate data, including the Attorney General, Auditor General, Department of Health, Department of Human Services, and the Patient Safety Authority. As an independent council, PHC4 provides data at no charge to Commonwealth of Pennsylvania state agencies, saving time, effort, and tax dollars.

During the calendar year 2024, many entities relied on PHC4 for accurate, reliable health care data. Complete listings of PHC4's special reports and requests for data (applicant & project description) are published in the Pennsylvania Bulletin.

2024 Data Requests

"The PHC4 database has been incredibly helpful in our research, and we are grateful for the access to such valuable data."

-Rie Sakai Bizmark, MD, MPH, PhD, Investigator, The Lundquist Institute
Associate Professor of Pediatrics, David Geffen School of Medicine at UCLA

Agency for Healthcare Research & Quality	New Jersey Hospital Association
Allegheny County Health Department	PA Commission on Crime & Delinquency
Bates White, LLC	PA Department of Health
Capital Health	PA Department of Human Services
Cayuga Health System	PA Department of the Auditor General
Children First	PA Office of Attorney General
Children's Hospital of Philadelphia	PA Patient Safety Authority
Constitution Surgery Alliance	Penn Highlands Healthcare
Evangelical Community Hospital	Penn State Hershey Health System
Geisinger Health System	Philadelphia Department of Public Health
Good Shepherd Rehab Network	Philadelphia Inquirer
Guthrie Clinic Ltd.	Renzi Podiatry/Save Your Soles Campaign
Highmark Health	Roswell Park Comprehensive Cancer Center
Hospital & Healthsystem Association of PA	RWJBarnabas Health System
Independence Health System	Safety-Net Association of PA
Intellimed	Syntellis Performance Solutions, LLC
Jian Strategic Marketing	Temple University Health System
Kaleida Health	The Trustees of the University of PA
Lehigh University	Thomas Jefferson University
Lehigh University College of Health	University of PA School of Nursing
Lehigh Valley Health Network	University of Pittsburgh
LifePoint Health	University of Pittsburgh Medical Center
Los Angeles Biomedical Institute	University of Rochester Medical Center
Main Line Health	Vizient Inc.
McGowan Institute for Regenerative Medicine	Warren General Hospital
Mount Nittany Health	WellSpan Health
Nemours/Alfred I. duPont Hospital for Children	West Virginia University Medicine
NY University Grossman School of Medicine	Wojdak Government Relations

Data Requests

Purchase Customized Data

Discover
what PHC4's
data can do
for you



Review PHC4's Available Data & Data Price Structure



Complete & Submit a Data Requests Application & Confidentiality Data Use Agreement



Application Review & Approval Process



Data Files Produced; Cost Quote & Invoice Issued



When payment is received, data files are securely transferred to client. **It's that easy!**

PHC4 will support you every step of the way. We welcome your questions and look forward to being your trusted data source!

Case Studies

For decades researchers, doctors, health care workers, educators, government agencies, and countless others have used PHC4 data to research various health care outcomes. The PHC4 Special Requests Team provides relevant and accurate data to support this important effort. Annually PHC4 highlights published case studies to illustrate how its data, and teams, are working to make a difference.

Impacts of Recent Payment, Coverage, and Systems Changes on Access to and Quality of Cancer Care

Dr. Lindsay Sabik at the University of Pittsburgh School of Public Health, is a health economist and health services researcher focused on investigating how state and federal policies affect healthcare access, utilization, and health outcomes among low-income populations, with a particular focus on cancer care. Dr. Sabik and her research team utilized Pennsylvania Health Care Cost Containment Council (PHC4) inpatient discharge and ambulatory/outpatient procedure data linked to records from the Pennsylvania Department of Health's Pennsylvania Cancer Registry for a research study entitled, *Impacts of Recent Payment, Coverage, and Systems Changes on Access to and Quality of Cancer Care*. Through these linked datasets, Dr. Sabik's research team was able to confirm cancer cases in the state and track patterns of health care. She shared insights from the study stating, "The Affordable Care Act (ACA) has reduced rates of uninsurance and set standards for coverage that have improved access to care along many dimensions." Explaining further, she noted, "Our findings suggest the ACA is associated with an increase in the quality of colon cancer care for underserved groups, indicating that availability of comprehensive insurance coverage is important for reducing disparities in cancer care and outcomes."

"PHC4 is among the timeliest population-based administrative datasets available, with quality quarterly data released within 9 months."

Lindsay Sabik, PhD
Professor and Vice Chair for Research Department of
Health Policy and Management
University of Pittsburgh School of Public Health



Case Studies

An Interrupted Times Series Analysis of the Cardiovascular Health Benefits of a Coal Coking Operation Closure

Dr. Wuyue Yu, postdoctoral fellow at the New York University Grossman School of Medicine, and Professor George D. Thurston, ScD of Medicine and Population Health at the same university utilized hospitalization data from the Pennsylvania Health Care Cost Containment (PHC4) for a research study entitled, *An Interrupted Time Series Analysis of the Cardiovascular Health Benefits of a Coal Coking Operation Closure*. As part of the research, they evaluated the change in the incidence of adverse health outcomes from the period three years prior, to the period three years after, the January 2016 closure of the Shenango, Inc. coal coke plant in Pittsburgh, Pennsylvania. The analysis tested for a reduction in air pollution exposure as a result of the coke plant closure and a corresponding decrease in adverse health conditions.



George D. Thurston, ScD
Professor of Medicine and Population Health
New York University Grossman School of Medicine
Division of Environmental Medicine



Wuyue Yu, PhD
Post Doctoral Fellow
New York University Langone Health
Grossman School of Medicine
Division of Environmental Medicine

Case Studies

Social Ecological Contexts of Opioid Overdose and Hospitalizations in Pennsylvania

Dr. Jessica Frankeberger, postdoctoral fellow, Department of Pediatrics and Center for Better Beginnings at the University of California San Diego and Dr. Christina Mair, associate professor from the University of Pittsburgh, conducted a study, *Social Ecological Contexts of Opioid Overdose and Hospitalizations in Pennsylvania* using Pennsylvania Health Care Cost Containment (PHC4) data combined with community data from other sources. The study was conducted to identify individual and community risk factors associated with increased susceptibility to postpartum death and hospitalizations among people with an opioid use disorder and aim to prevent further problems during the postpartum period. The structure of PHC4's data allowed the research team to examine spatial patterns of delivery hospitalizations for patients with an opioid use disorder, at the zip code-level, over a period of four years, and assess the ecological and community factors associated with this geographic variation.



Christina Mair, PhD
Associate Professor, Department of Behavioral
and Community Health Sciences at the
University of Pittsburgh School of Public Health

Jessica Frankeberger, PhD
Postdoctoral Fellow, Department of Pediatrics
and Center for Better Beginnings at the
University of California San Diego

Case Studies

Effects of the Pennsylvania Rural Health Model on Potentially Avoidable Utilization

Donald Bourne, MPH, MD-PhD student at the University of Pittsburgh School of Public Health used data from the Pennsylvania Health Care Cost Containment Council (PHC4) for his research dissertation study entitled, *Early Impacts of the Pennsylvania Rural Health Model on Potentially Avoidable Utilization*. Mr. Bourne expressed, “The Pennsylvania Rural Health Model (PARHM) is a payment model focused on the rural community. The model’s goals include improving financial health of rural hospitals, increasing access to high-quality care, improving population health outcomes, and reducing avoidable hospital expenditures. Our results show that PARHM moved the needle on reducing avoidable hospital expenditures for some groups of hospitals, but not all. It may be that a model as large in scope as this takes time for effects to mature, or the model may require changes in how it is structured.”

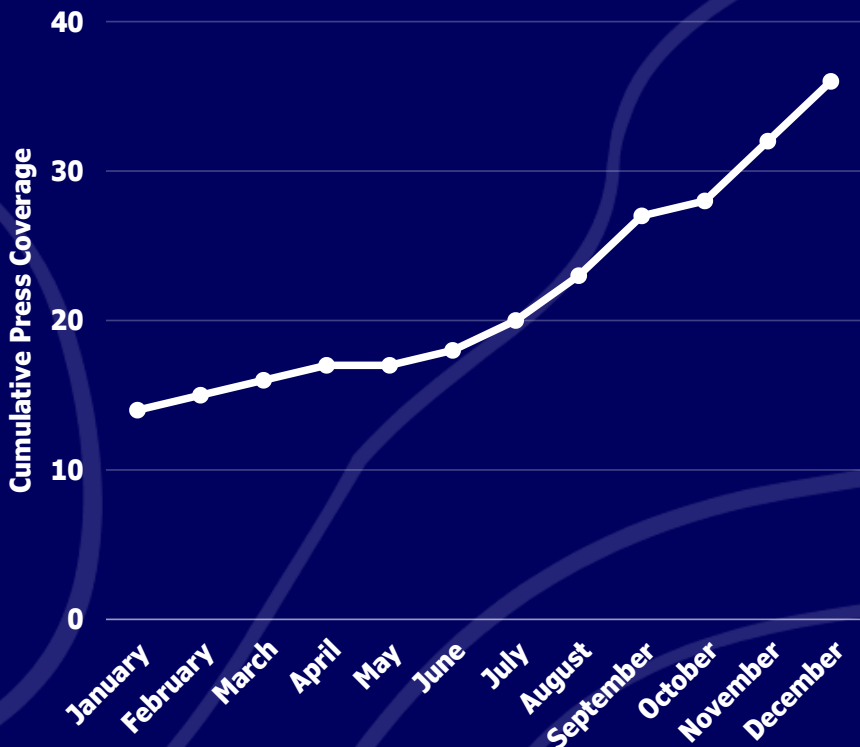
“One of the major benefits of using PHC4 data is that it is among the timeliest population-based data available. We had access to discharge data as soon as 9-months after the quarter in which services occurred. This is much sooner than most other datasets, which can lag by years.”

**Donald Bourne, MPH, MD-PhD Student
Medical Scientist Training Program in
Health Services Research and Policy at the
University of Pittsburgh**



Media Coverage

The Media and PHC4 have a long-standing relationship in the Commonwealth, which provides opportunities for the data being produced to be amplified through various publicly available networks. PHC4's publicly produced data was cited by journalists throughout Pennsylvania more than 35 times in 2024, proving the value placed on publicly available, fact-based data continues to be prevalent.



"Chairing the Education Committee in its first year of reconstitution has been a meaningful opportunity to advance initiatives that benefit all Pennsylvanians. As someone deeply committed to education, I'm especially proud of our support for educational media and developing tools to engage communities in lifelong learning."

-NEAL LESHER
CHAIR, EDUCATION COMMITTEE

Community Outreach & Education

During 2024, in support of the goal to increase awareness of the value of reported data within specific stakeholder groups,

PHC4 invested time and staffing resources into expanding its community engagement and educational outreach through marketing and communication avenues. PHC4 enjoyed the opportunity to engage with the following communities and looks forward to expanding these efforts in the coming years.

- Lions of Carlisle - March 2024
- Professional Coders of Central Pennsylvania, AAPC Chapter of the Harrisburg Region - April 2024
- Pennsylvania Medical Society Bi-Annual Practice Administrator Meeting – May 2024
- Legislative Breakfast - April 2024 (detailed below)

In April, PHC4 shared its value proposition with a group of Pennsylvania House Representatives. At this event, PHC4 displayed how its published reports support informed decisions and serve as trusted, fact-based resources in examining health care in the Commonwealth. When considering the opportunity, Barry D. Buckingham, PHC4's Executive Director, believes it's a part of the organization's responsibility to extend this insight, stating, "By modeling our reporting with a focus on informing decisions, we are better equipping our elected officials in setting priorities for health care in PA."

PHC4 offers education to stakeholders across the Commonwealth as a part of serving its mission and welcomes interested groups to reach out and learn more about all that is publicly available. PHC4 believes each resident deserves a nonpartisan, fact-based data source when seeking information regarding health care. As part of its stated mission, PHC4 proudly provides reporting and data in support of all Pennsylvanians.

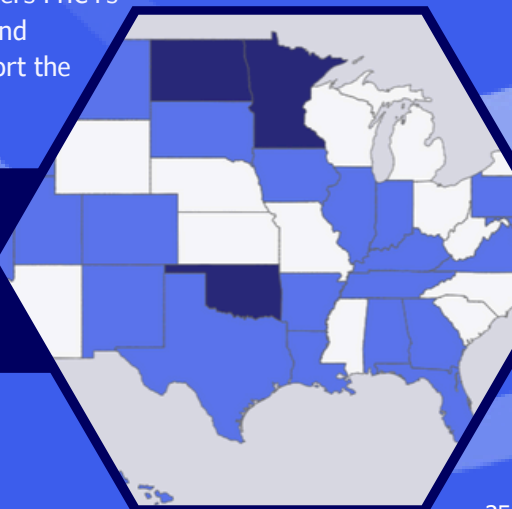
Special Projects

The Special Projects department was created in June 2023 to address any work that came before the Council on an ad-hoc basis. In its first six months, the Special Projects department assisted the Pennsylvania Rare Disease Advisory Council in analyzing survey data and presenting their findings and produced MAPPED 1: the Structure of Pennsylvania Health Care by Type, Owner, and Location.

In 2024, the Special Projects department began preparations for a three-year study on non-compete agreements in Pennsylvania health care. Act 74 of 2024, the Fair Contracting for Health Care Practitioners Act, limits non-compete agreements for certain health care practitioners to a single year after voluntary termination of employment. To inform the design of its study, the Special Projects department collected public comments for a month and consulted with stakeholders, decision makers, and experts. twenty-eight individual comments were received from a variety of commenters. The Act took effect on January 1, 2025. The three-year study report will be submitted to the PA House of Representatives Health Committee and the PA Senate Health and Human Services Committee by January 1, 2028.

In support of the Act 74 study, the Special Projects department produced a Current Events article, published in September, about non-compete agreements and their current usage in health care in Pennsylvania and the United States. The Current Events article series received approval from the Council to be an ongoing publication released sporadically discussing different topics of relevance. This offering bolsters PHC4's already impressive cadre of reports and was developed as a program to support the Council's strategic goals for communications and education.

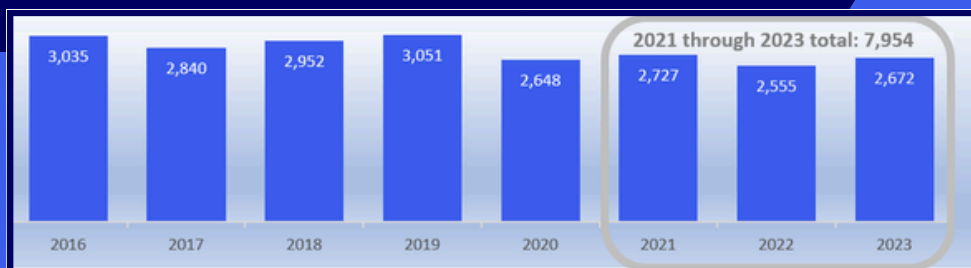
Non-Compete Agreements in Health Care



Research Brief

At PHC4, ensuring that our public reports are accurate, objective, and timely is paramount. In August, *Hospitalizations for Pennsylvania Children with Cancer* was published, examining inpatient

Hospitalizations for Pennsylvania Children with Cancer



hospitalizations for Pennsylvania children (those under 18 years of age) who were admitted to a Pennsylvania general acute care hospital with a diagnosis of cancer. PHC4 believes this work is significant because it provides important information about the impact of cancer on this sensitive age group. Monitoring the number of cancer-related hospitalizations for children in PA is vital for raising awareness about how children, our greatest asset, and their families are affected by this terrible disease. This brief serves as an opportunity to examine change over time and supports PHC4's core principle of reporting timely and transparent information.

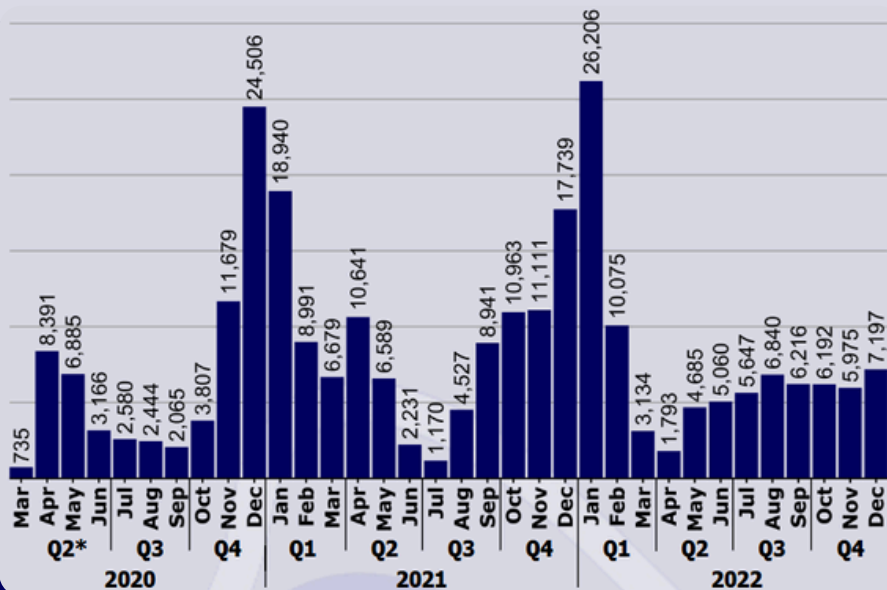
The report shows that between 2016 through 2023, annual inpatient hospitalizations for Pennsylvania children with a diagnosis of cancer ranged from a low of 2,555 hospitalizations, in 2022, to a high of 3,051 hospitalizations, in 2019. Other indicators, like types of cancer, show that 81.3% of the total hospitalizations reported for childhood cancer included only one type of cancer.

Reports

COVID-19, The Impact on Health Care in Pennsylvania

Act 15 of 2020 mandated PHC4 produce quarterly reports on the effect of the COVID-19 disaster emergency on hospitals and health care facilities in the Commonwealth of Pennsylvania by aggregating data related to COVID-19 expenses and lost revenue as reported by hospitals and health care facilities. After the end of the COVID-19 disaster emergency declaration, PHC4 advanced this effort by partnering with The Hospital and Healthsystem Association of Pennsylvania (HAP) to produce a much broader report compiling clinical, financial, and hospital and health system information concerning the impact of COVID-19 on health care in Pennsylvania.

Number of COVID-19 Hospitalizations March 2020 - December 2022, by Month



Since the onset of COVID-19, there were two prominent spikes in the number of monthly COVID-19 hospitalizations in Pennsylvania. The first spike occurred in December 2020 at 24,506 hospitalizations. The volume was highest in the second spike, which occurred in January 2022, at 26,206 hospitalizations.

Reports

COVID-19, The Impact on Health Care in Pennsylvania

This collaboration produced a new report examining how the COVID-19 pandemic affected and changed Pennsylvania and its health care system. The report details the toll that COVID-19 has taken on Pennsylvanians and their communities, as well as the financial impact on the Commonwealth's hospitals. The report examines how Pennsylvania hospitals responded to the pandemic and the challenges being experienced. There are three primary areas of focus within the full report. Within the report, PHC4 examines the clinical and financial effects of the COVID-19 pandemic over time, and HAP focuses on elements related to Pennsylvania's vaccination distribution, hospital workforce, and health care infrastructure.

Total COVID-19 Expenses* January 2020 - December 2022



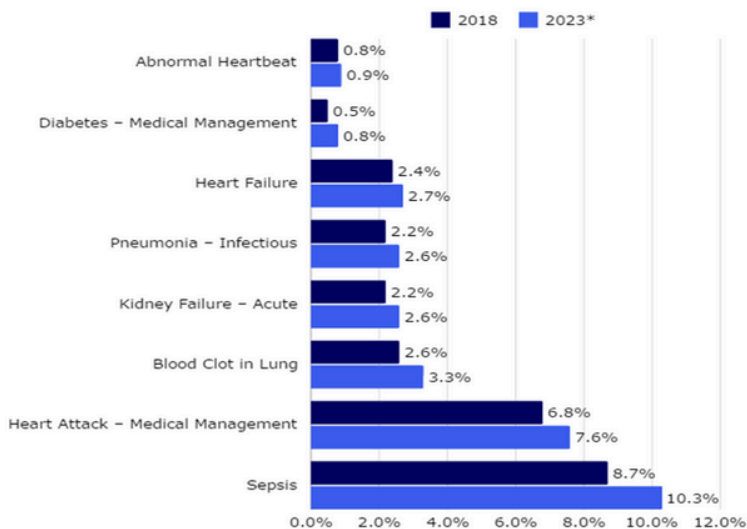
*COVID-19 expenses are dependent on the responsiveness of the hospitals and health systems. Expense categories based on Act 15 requirements. See report [technical notes](#) for more details.

Reports

Hospital Performance Report

The 2023 *Hospital Performance Report* (HPR) provides information about the performance of Pennsylvania hospitals for 17 common medical conditions. Reported are hospital-specific mortality and 30-day readmission ratings, as well as volume of cases and hospital charges for patients discharged from October 1, 2022 through September 30, 2023, which is federal fiscal year (FFY) 2023. Changes in statewide rates across time are also examined.

Notably, amongst the data reported, statewide in-hospital mortality rates showed a statistically significant increase from FFY 2018 to FFY 2023 in eight of the 16 conditions for which mortality rates were reported. The largest increase was in Sepsis, where the mortality rate increased from 8.7% in FFY 2018 to 10.3% in FFY 2023. The HPR also reports that statewide 30-day readmission rates showed a statistically significant decrease from FFY 2018 to FFY 2023 in seven of the 17 conditions for which readmission rates were reported. The largest decrease was in Chest Pain, where the readmission rate decreased from 13.8% in FFY 2018 to 11.3% in FFY 2023. The readmission rate increased in one condition, Blood Clot in Lung, from 11.7% to 13.0%. The chart below displays the in-hospital mortality rates.



*Cases with a COVID-19 diagnosis that was present on admission were excluded in 2023.

Reports

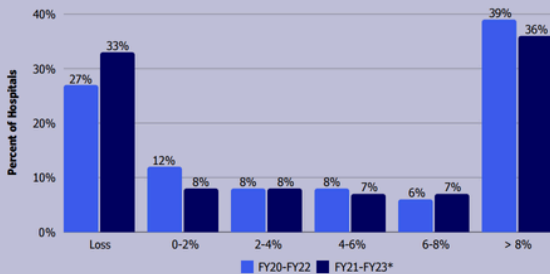
Financial Analysis Report

A high-quality, cost-effective health care delivery system requires financially healthy hospitals and ambulatory surgery centers (ASCs). Since fiscal year 1989, PHC4 has produced a series of financial reports measuring the financial condition and utilization of the Commonwealth's hospitals. Published as a three-part series annually, *Volume One* released in June 2024, presents a financial profile of

Pennsylvania's general acute care (GAC) hospitals for fiscal year 2023. *Volume Two*, released in September 2024, provides insight into the financial health of ASCs in the Commonwealth for fiscal year 2023. *Volume Three*, released in November 2024, focuses on providing information regarding the finances of Pennsylvania's non-general acute care (Non-GAC) hospitals, which include rehabilitation hospitals, psychiatric hospitals, long-term acute care hospitals, and specialty hospitals for fiscal year 2023. These annual reports provide insight into information surrounding uncompensated care, net patient revenue (NPR), operating margin, and total margin. This series of financial reporting provides patients, providers, and policymakers with fact-based, nonpartisan information which supports informed decision-making.

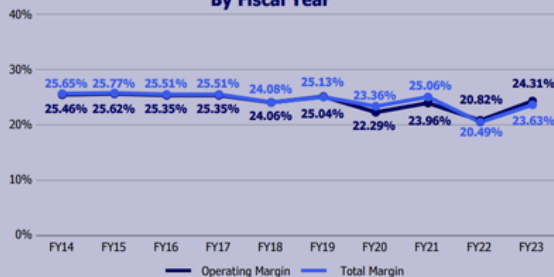
Volume One

Statewide Distribution of 3-Year Average Total Margin



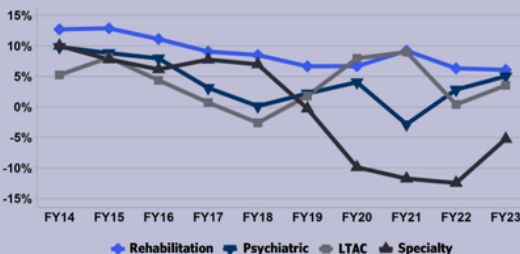
Volume Two

Statewide Average Operating Margin and Total Margin By Fiscal Year



Volume Three

Statewide Average Operating Margin by Fiscal Year and Facility Type



Reports

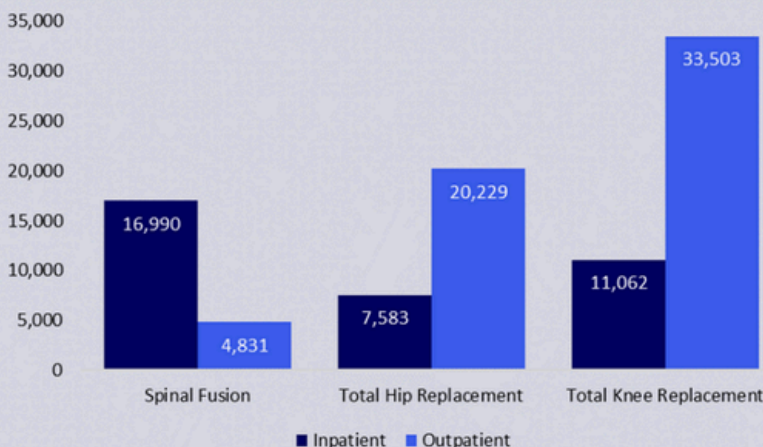
Common Procedures Report

The *Common Procedures Report* displays information about the performance of Pennsylvania facilities for three orthopedic procedures including spinal fusion, total hip replacement, and total knee replacement for inpatient acute care hospital discharges and hospital outpatient department and ambulatory surgery center encounters from October 1, 2022 through September 30, 2023. Hospital-specific ratings for complication and postoperative length of stay as well as statewide Medicare payments are reported for inpatient acute care hospitalizations. The overall volume of cases by the procedure of interest is reported for inpatient stays and outpatient encounters.

Statewide and hospital-specific information are also described in the report and include the following changes in case volume, which occurred from Quarter 4, 2021 to Quarter 3, 2023:

- The number of inpatient spinal fusion cases increased 2.5%, while the number of outpatient cases decreased 6.4%.
- The number of inpatient total hip replacement cases decreased 37.3%, while the number of outpatient cases increased 47.9%.
- The number of inpatient total knee replacement cases decreased 39.4%, while the number of outpatient cases increased 40.4%.

Inpatient and Outpatient Cases by Procedure

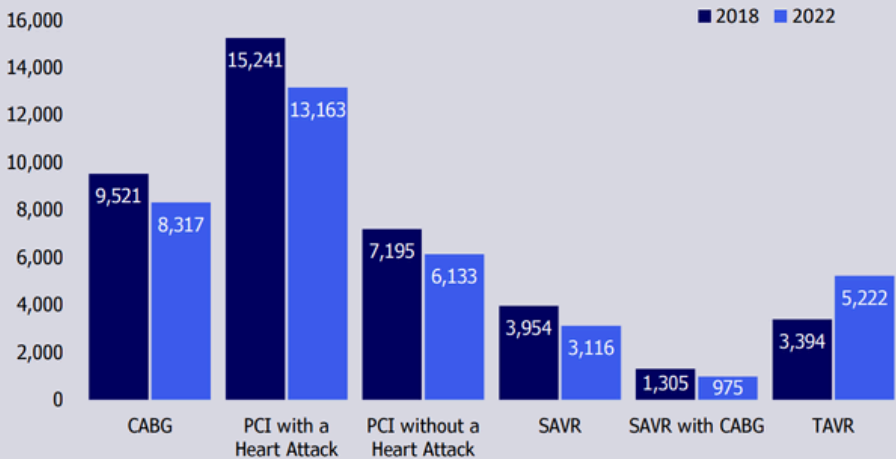


Reports

Cardiac Procedures Report

The *Cardiac Procedures Report* displays information about the performance of Pennsylvania hospitals for six cardiac procedures including coronary artery bypass graft (CABG), percutaneous coronary intervention (PCI) for patients who had a heart attack, PCI for patients who did not have a heart attack, surgical aortic valve replacement (SAVR), the newly added procedure SAVR with CABG, and transcatheter aortic valve replacement (TAVR). Reported are hospital-specific ratings for mortality, readmissions, and postoperative length of stay, as well as volume of cases and statewide Medicare payments for patients discharged from acute care hospitals from 2021 through 2022 (January 1, 2021 through December 31, 2022).

Volume of Cases by Cardiac Procedure



Data for 2018 are displayed for trending purposes only and are not included in the report analyses.

Reports

Cancer Surgery Volume Report

For the first time, the *Cancer Surgery Volume Report* released in March 2024 included ambulatory surgery center (ASC) data. This report provides information about the number of surgeries performed at Pennsylvania hospitals and ASCs. The types of cancer surgery included are bladder, brain, breast, colon, esophagus, liver, lung, pancreas, prostate, rectum, and stomach. Hospital-specific results are shown for all 11 cancer types. Surgeries performed in ASCs and hospital outpatient departments are included for cancers of the bladder, breast, and prostate. The data included is from July 1, 2022, through June 30, 2023 (state fiscal year 2023). The additional outpatient information now included in the *Cancer Surgery Volume Report* provides further insight into the changing landscape of health care in Pennsylvania.

Cancer Surgery Type	Percent of Cancer Surgeries Performed in the Outpatient Setting by Year†				
	2019	2020	2021	2022	2023
Bladder	85%	86%	85%	85%	84%
Breast	87%	88%	91%	93%	94%
Prostate	25%	30%	41%	52%	57%

† Years represented are state fiscal years, which reflect twelve consecutive months beginning in July and ending in June.

“The additional outpatient information now included in our report provides further insight into the changing landscape of health care in Pennsylvania.”

-BARRY D. BUCKINGHAM,
EXECUTIVE DIRECTOR, PHC4



Reports

Utilization & Condition-Specific Reports

PHC4 releases *County-Level Utilization Reports* and *County-Level Condition-Specific Reports* on a regular cadence throughout the calendar year. These reports are produced to supply essential data to support evidence-based decision-making and analysis. *County-Level Utilization Reports* are updated every quarter and show the overall total number of inpatient hospitalizations and ambulatory/outpatient cases for Pennsylvania residents with results displayed by patient age, sex, and payer. These reports shed light on critical health care components and offer valuable insights into public health in Pennsylvania at the county level. *County-Level Condition-Specific Reports* are released twice a year and focus on several high interest conditions displaying county-specific rates of hospitalization for Pennsylvania residents from a four-quarter period. The analysis within these reports is limited to Pennsylvania general acute care hospitals.

Included are raw counts and rates for the following eight conditions:

- Opioid Overdose and Opioid Use Disorder
- Maternal Stays Involving Opioids
- Drug Withdrawal in Newborns
- Breast Cancer Surgery
- Potentially Preventable Hospitalizations
- Diabetes
- Sepsis
- *C. Difficile* Infections (CDI)

Pennsylvania Health Care Cost Containment Council

Celebrating 40 Years



in 2026

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