

PA Health Care Cost Containment Council

Central and Northeastern
Pennsylvania



Hospital Performance Report

October 2016 – September 2017
Data



November 2018

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 2016 through September 2017. 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 Results**
- ⇒ **Medicare Payments**
- ⇒ **Hospital Comments**
- ⇒ **Technical Notes**
- ⇒ **Downloadable Data**

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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, 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 2016 through September 2017.
- 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 federal fiscal year 2017.

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, gender, race/ethnicity, and socioeconomic status, 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, gender, race/ethnicity, and socioeconomic status, 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

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.

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deaths. (Please see “Understanding the Symbols” box on this page.) PHC4 has used risk-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 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 most conditions and procedures in this report, potentially planned readmissions were excluded from the analysis (noted in the results where this occurs). Identifying readmissions that were potentially planned was 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 federal fiscal year 2017.

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.

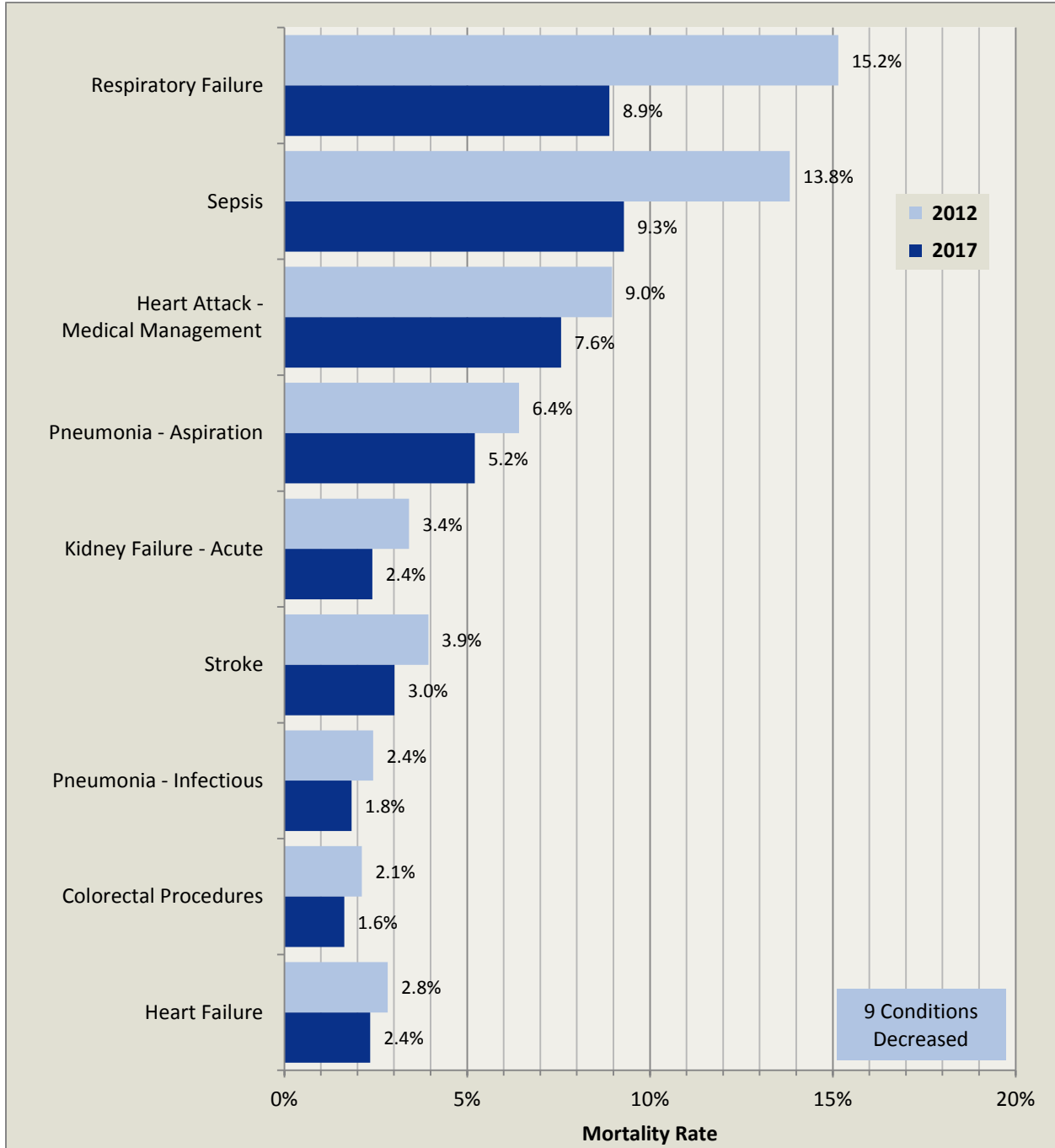
The measurement of quality is highly complex, and the information used to capture such measures is limited. A hospital death or a readmission is sometimes an unavoidable consequence of a patient's medical condition. Hospitals and physicians may do everything right, and the patient may still die or need 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 2012 to 2017 in nine of the 15 conditions reported. The largest decrease was in Respiratory Failure, where the mortality rate decreased from 15.2% in federal fiscal year 2012 to 8.9% in federal fiscal year 2017.

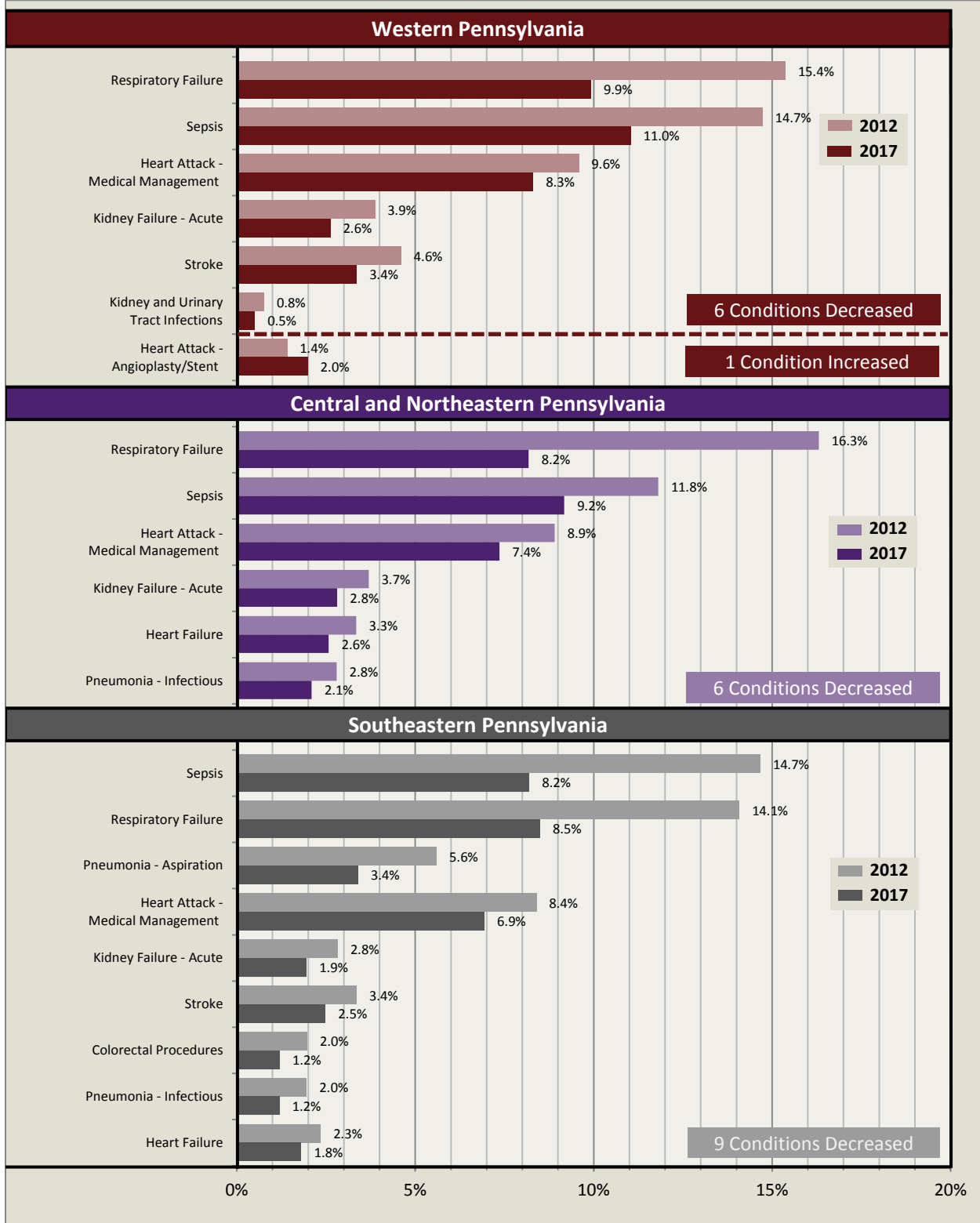
No condition showed a statistically significant increase in the in-hospital mortality rate during this time period.



Key Findings

Mortality Rates

Across different areas of the state, there were statistically significant differences in the in-hospital mortality rates from federal fiscal year 2012 to federal fiscal year 2017 for the conditions below.



Key Findings

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 2017.

	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"> • Chronic Obstructive Pulmonary Disease (COPD) • Heart Attack – Angioplasty/Stent • Heart Attack – Medical Management • Heart Failure • Pneumonia – Aspiration • Pneumonia – Infectious • Respiratory Failure • Sepsis • Stroke
Central and Northeastern Pennsylvania	<ul style="list-style-type: none"> • None 	<ul style="list-style-type: none"> • Abnormal Heartbeat • Kidney Failure – Acute • Sepsis • Stroke
Southeastern Pennsylvania	<ul style="list-style-type: none"> • Abnormal Heartbeat • Colorectal Procedures • Heart Attack – Medical Management • Heart Failure • Kidney and Urinary Tract Infections • 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 nine conditions, the greatest difference occurring in Pneumonia – Aspiration (6.7% actual, 5.2% 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 Kidney Failure – Acute (2.8% actual, 2.4% expected).

Southeastern Pennsylvania:

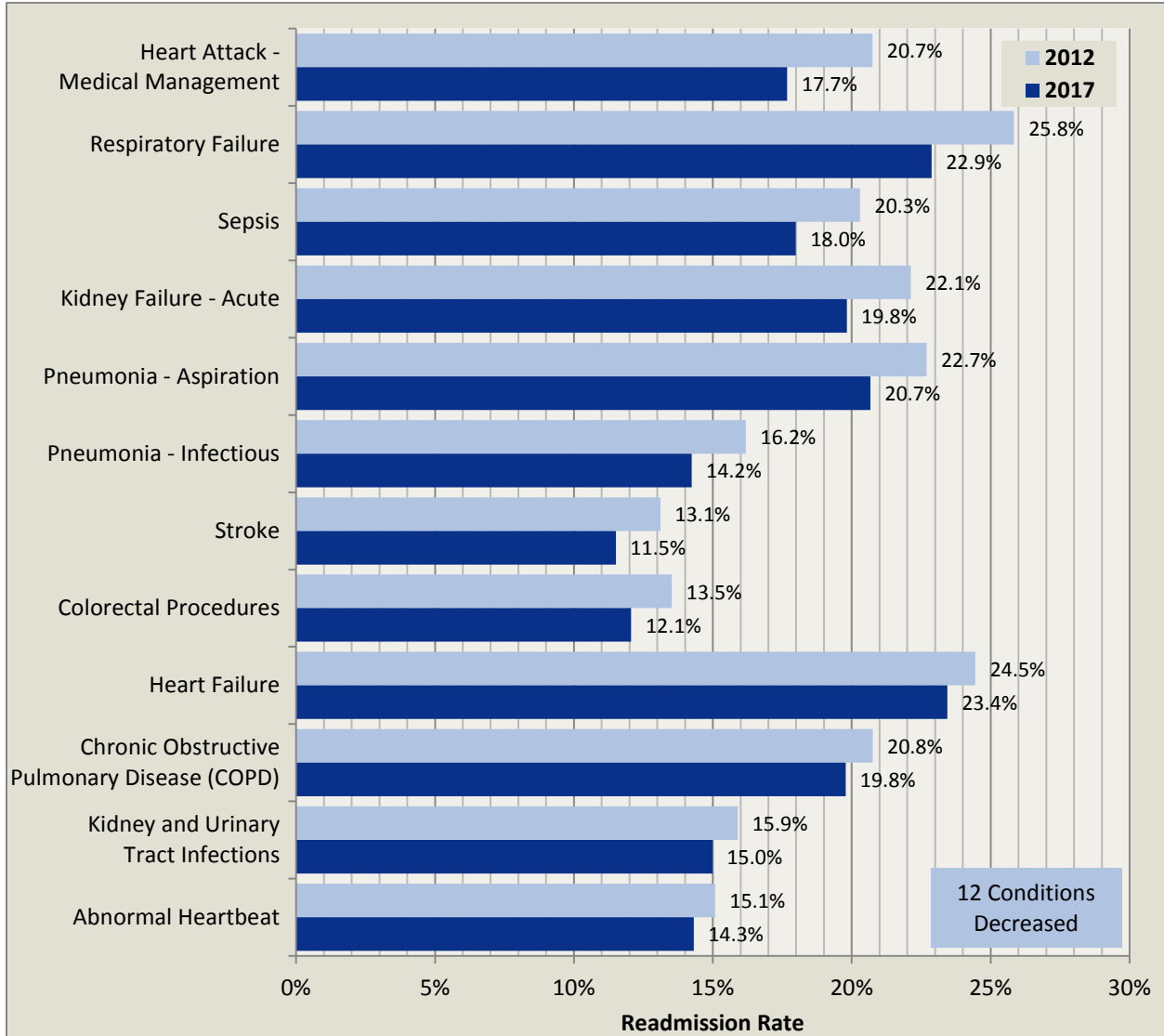
- After accounting for patient risk, hospitals in Southeastern Pennsylvania as a whole had in-hospital mortality rates that were significantly lower than expected for eleven conditions, the greatest difference occurring in Pneumonia – Aspiration (3.4% actual, 5.4% expected).

Key Findings

Readmission Rates

Statewide 30-day readmission rates* showed a statistically significant decrease in twelve of the 16 conditions reported. The largest decrease was in Heart Attack – Medical Management, where the readmission rate decreased from 20.7% in federal fiscal year 2012 to 17.7% in federal fiscal year 2017.

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

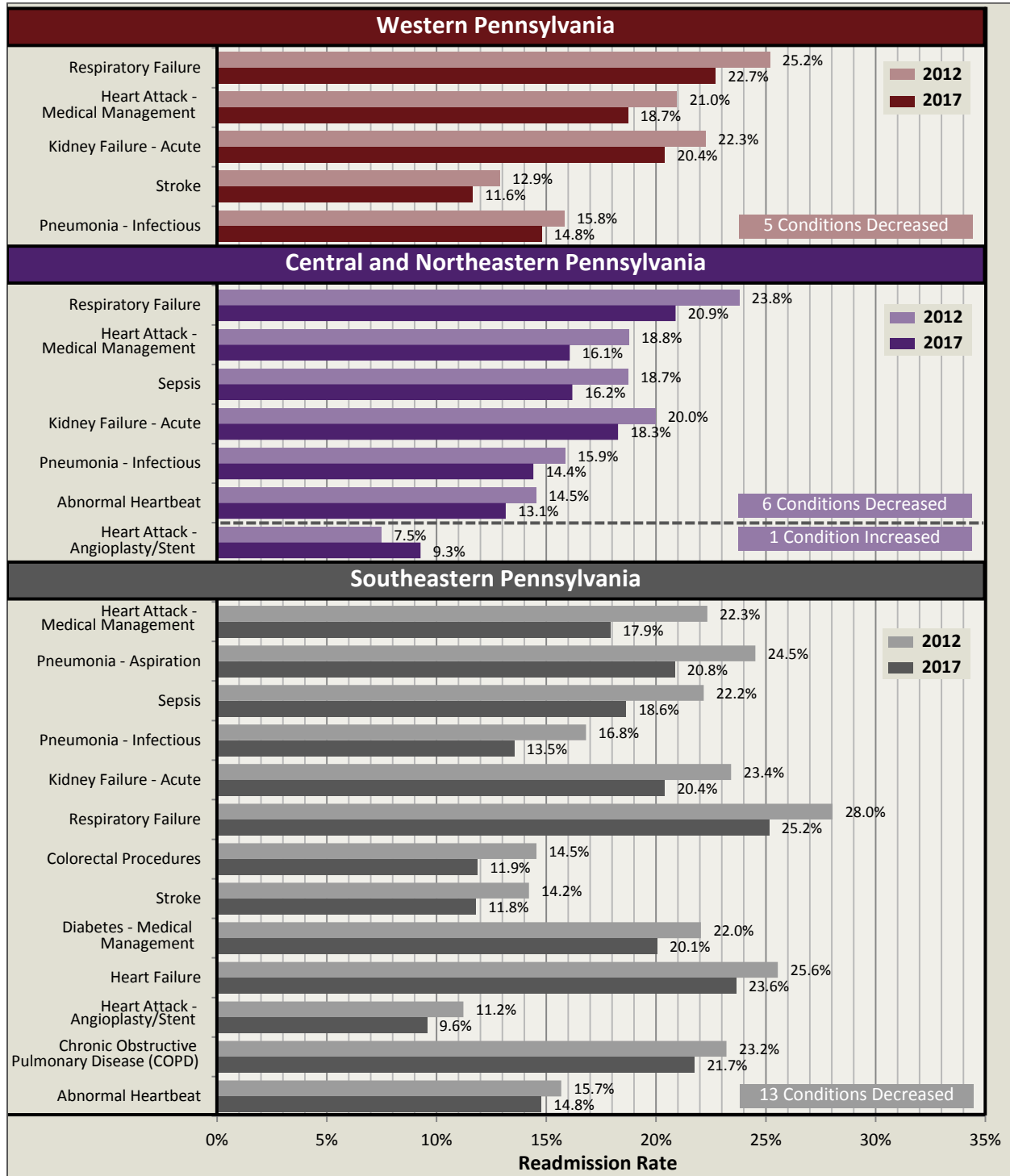


* Potentially planned readmissions were excluded from the analysis (for all conditions except Abnormal Heartbeat).

Key Findings

Readmission Rates

Across different areas of the state, there were statistically significant differences in the 30-day readmission rates* from federal fiscal year 2012 to federal fiscal year 2017 for the conditions below.



* Potentially planned readmissions were excluded from the analysis (for all conditions except Abnormal Heartbeat).

Key Findings

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 2017.

	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"> • Abnormal Heartbeat • Diabetes – Medical Management • Heart Failure • Kidney and Urinary Tract Infections • Pneumonia – Infectious • Sepsis
Central and Northeastern Pennsylvania	<ul style="list-style-type: none"> • Abnormal Heartbeat • Heart Attack – Medical Management • Heart Failure • Kidney and Urinary Tract Infections • Kidney Failure – Acute • 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) • Diabetes – Medical Management • Kidney and Urinary Tract Infections • Kidney Failure – Acute • Respiratory Failure • Sepsis

* Potentially planned readmissions were excluded from the analysis (for all conditions except Abnormal Heartbeat).

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 six conditions, the greatest difference occurring in Diabetes – Medical Management (20.3% actual, 18.2% 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 seven conditions, the greatest difference occurring in Kidney and Urinary Tract Infections (13.1% actual, 15.0% 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 seven conditions, the greatest difference occurring in COPD (21.7% actual, 20.5% expected).

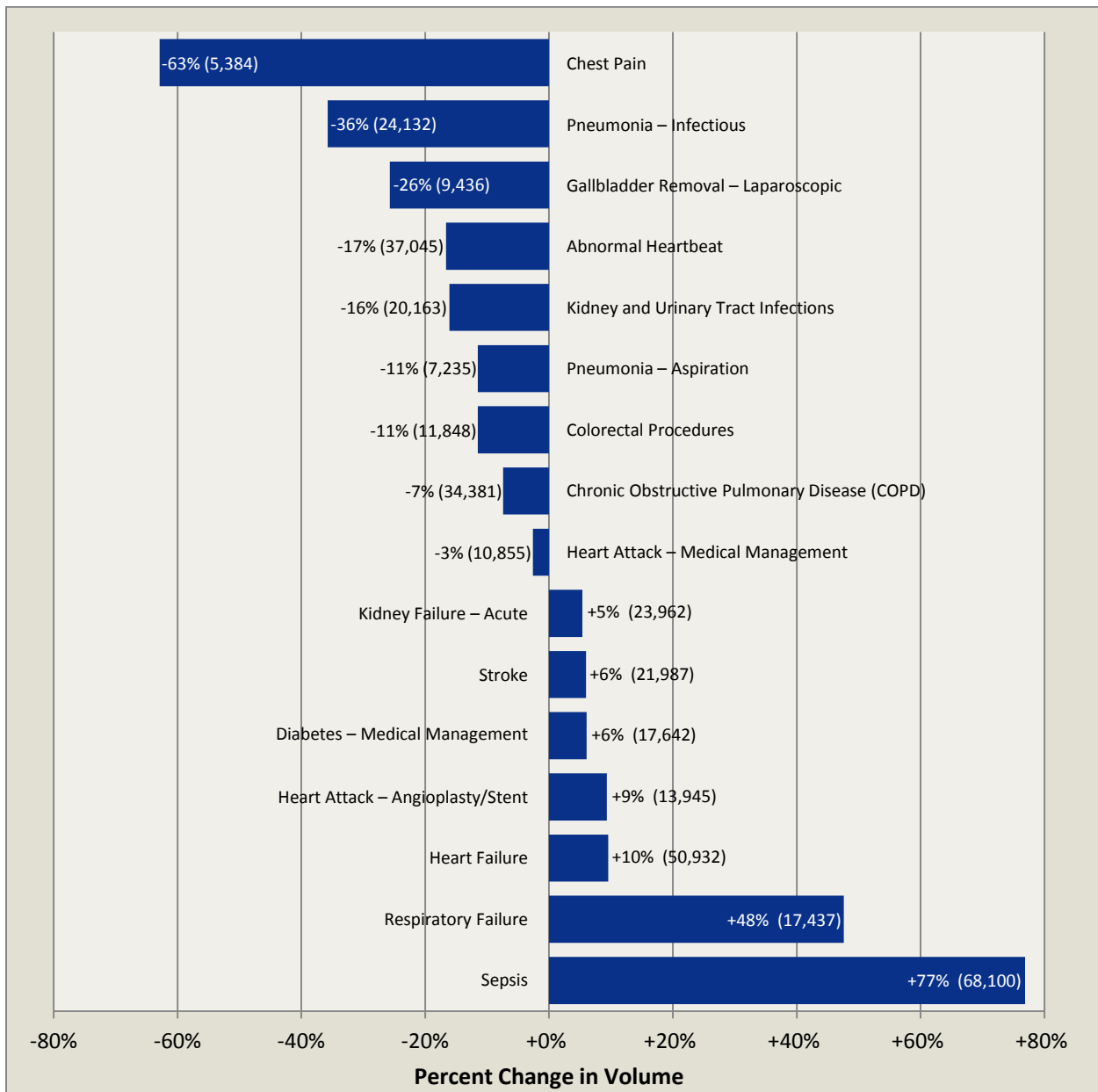
Key Findings

Volume of Hospital Admissions

The following chart shows the statewide percent change in volume*, from federal fiscal year 2012 to federal fiscal year 2017, for each of the 16 conditions and procedures included in this report (admission totals from federal fiscal year 2017 are shown in parentheses).

Chest Pain had the largest percentage decrease in volume (-63%), from 14,510 discharges in federal fiscal year 2012 to 5,384 in federal fiscal year 2017.

Sepsis had the largest percentage increase in volume (+77%), from 38,502 discharges in federal fiscal year 2012 to 68,100 in federal fiscal year 2017.



* Changes in coding requirements or usage may have influenced the variations in volume observed over time.

Key Findings

Medicare Fee-for-Service Payments

Federal Fiscal Year 2017 Data for Pennsylvania Residents

- Medicare fee-for-service was the primary payer for 38.1% of the statewide admissions for Pennsylvania residents in federal fiscal year 2017 for the conditions and procedures in this report, for a total of nearly \$1.14 billion (\$1,137,792,875).
 - For Western Pennsylvania, Medicare fee-for-service was the primary payer for 30.0% of admissions in this report, for a total of over \$266 million.
 - For Central and Northeastern Pennsylvania, Medicare fee-for-service was the primary payer for 44.9% of admissions in this report, for a total of over \$346 million.
 - For Southeastern Pennsylvania, Medicare fee-for-service was the primary payer for 40.4% of admissions in this report, for a total of over \$525 million.

- The condition with the lowest statewide average Medicare fee-for-service payment in federal fiscal year 2017 was Chest Pain, at \$3,873 per hospitalization. The condition with the highest statewide average Medicare fee-for-service payment in federal fiscal year 2017 was Colorectal Procedures, at \$18,320 per hospitalization.

	Condition or Procedure with <u>Lowest</u> Average Payment	Condition or Procedure with <u>Highest</u> Average Payment
Statewide	<i>Chest Pain: \$3,873</i>	<i>Colorectal Procedures: \$18,320</i>
Western Pennsylvania	Chest Pain: \$3,568	Colorectal Procedures: \$19,560
Central and Northeastern Pennsylvania	Chest Pain: \$3,374	Colorectal Procedures: \$16,359
Southeastern Pennsylvania	Chest Pain: \$4,389	Colorectal Procedures: \$19,142

Abnormal Heartbeat

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge
Statewide	37,045	0.9%	14.3%	\$43,683
Central & Northeastern	9,739	1.2%	13.1%	\$35,612
Barnes-Kasson County	2	NR	NR	NR
Berwick	34	⊖	⊖	\$63,296
Bucktail	0	NR	NR	NR
Chambersburg	398	⊖	⊖	\$37,615
Endless Mountains	10	●	⊖	\$8,662
Ephrata Community	187	●	⊖	\$36,229
Evangelical Community	193	⊖	⊖	\$24,257
Fulton County	26	⊖	⊖	\$26,571
Geisinger Bloomsburg	41	⊖	⊖	\$29,513
Geisinger Community	310	⊖	⊖	\$48,270
Geisinger Danville	522	⊖	⊖	\$41,972
Geisinger Jersey Shore	16	⊖	⊖	\$18,411
Geisinger Lewistown	135	⊖	⊖	\$22,983
Geisinger Wyoming Valley	429	⊖	⊖	\$59,394
Gettysburg	146	⊖	⊖	\$28,504
Good Samaritan Lebanon	219	⊖	⊖	\$29,210
Guthrie Towanda Memorial	11	⊖	⊖	\$28,437
Holy Spirit	340	⊖	⊖	\$32,865
JC Blair Memorial	59	⊖	⊖	\$17,592
Lancaster General	797	⊖	⊖	\$35,774
Lehigh Valley Hazleton	152	⊖	⊖	\$31,400

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
Lehigh Valley Pocono	274	○	○	\$35,233
Lock Haven	16	●	○	\$52,773
Milton S Hershey	392	○	○	\$39,960
Moses Taylor	78	○	○	\$59,220
Mount Nittany	400	○	○	\$26,911
Muncy Valley	7	○	○	\$16,986
Regional Scranton	405	●	●	\$46,039
Robert Packer	632	○	○	\$23,072
Soldiers & Sailors	48	○	○	\$19,999
Sunbury Community	22	○	○	\$40,813
Troy Community	6	○	○	\$10,509
Tyler Memorial	16	○	○	\$23,252
UPMC Pinnacle Carlisle	93	○	○	\$40,365
UPMC Pinnacle Hanover	224	○	○	\$29,386
UPMC Pinnacle Hospitals	926	○	○	\$25,732
UPMC Pinnacle Lancaster	65	○	○	\$51,403
UPMC Pinnacle Lititz	51	○	○	\$43,446
UPMC Pinnacle Memorial	109	○	○	\$35,485
Wayne Memorial	112	○	○	\$29,873
Waynesboro	42	○	●	\$32,486
Wilkes-Barre General	441	●	○	\$66,769
Williamsport Regional	346	○	○	\$26,955
York	974	○	○	\$29,891

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	5,384	13.1%	\$25,097
Central & Northeastern	1,325	10.4%	\$19,860
Barnes-Kasson County	16	⊖	\$4,440
Berwick	2	NR	NR
Bucktail	0	NR	NR
Chambersburg	22	⊖	\$18,662
Endless Mountains	11	⊖	\$8,832
Ephrata Community	14	⊖	\$22,869
Evangelical Community	15	⊖	\$18,729
Fulton County	3	NR	NR
Geisinger Bloomsburg	4	NR	NR
Geisinger Community	89	⊖	\$23,640
Geisinger Danville	87	⊖	\$20,645
Geisinger Jersey Shore	6	⊖	\$11,636
Geisinger Lewistown	28	⊖	\$16,093
Geisinger Wyoming Valley	104	⊖	\$28,854
Gettysburg	7	⊖	\$15,440
Good Samaritan Lebanon	20	⊖	\$14,834
Guthrie Towanda Memorial	0	NR	NR
Holy Spirit	56	⊖	\$19,351
JC Blair Memorial	11	⊖	\$9,860
Lancaster General	16	⊖	\$21,529
Lehigh Valley Hazleton	30	⊖	\$20,197

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.

Potentially planned readmissions were excluded from the readmission analysis.

Chest Pain

Hospital	Total Number of Cases	Readmission	Average Hospital Charge
Lehigh Valley Pocono	43	⊖	\$26,455
Lock Haven	0	NR	NR
Milton S Hershey	34	⊖	\$16,033
Moses Taylor	19	⊖	\$24,801
Mount Nittany	85	○	\$16,023
Muncy Valley	1	NR	NR
Regional Scranton	104	⊖	\$19,448
Robert Packer	90	⊖	\$15,342
Soldiers & Sailors	1	NR	NR
Sunbury Community	3	NR	NR
Troy Community	1	NR	NR
Tyler Memorial	2	NR	NR
UPMC Pinnacle Carlisle	4	NR	NR
UPMC Pinnacle Hanover	14	⊖	\$15,871
UPMC Pinnacle Hospitals	95	⊖	\$16,522
UPMC Pinnacle Lancaster	6	⊖	NR
UPMC Pinnacle Lititz	1	NR	NR
UPMC Pinnacle Memorial	26	⊖	\$16,362
Wayne Memorial	9	⊖	\$18,228
Waynesboro	4	NR	NR
Wilkes-Barre General	87	⊖	\$29,492
Williamsport Regional	35	⊖	\$15,876
York	106	⊖	\$16,543

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.

Potentially planned readmissions were excluded from the readmission analysis.

Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	COPD
Statewide	34,381	0.6%	19.8%	\$32,941	
Central & Northeastern	8,175	0.6%	18.3%	\$29,036	
Barnes-Kasson County	60	⊖	⊖	\$10,980	
Berwick	60	⊖	⊖	\$46,986	
Bucktail	12	⊖	⊖	\$7,743	
Chambersburg	214	⊖	⊖	\$19,259	
Endless Mountains	52	⊖	⊖	\$6,959	
Ephrata Community	234	⊖	⊖	\$31,948	
Evangelical Community	69	⊖	⊖	\$20,772	
Fulton County	54	⊖	⊖	\$19,430	
Geisinger Bloomsburg	66	⊖	⊖	\$28,131	
Geisinger Community	349	⊖	⊖	\$40,389	
Geisinger Danville	396	⊖	⊖	\$41,894	
Geisinger Jersey Shore	61	⊖	⊖	\$15,740	
Geisinger Lewistown	153	⊖	⊖	\$23,136	
Geisinger Wyoming Valley	520	○	⊖	\$40,156	
Gettysburg	127	⊖	⊖	\$21,791	
Good Samaritan Lebanon	307	⊖	⊖	\$21,960	
Guthrie Towanda Memorial	40	⊖	⊖	\$19,078	
Holy Spirit	301	⊖	⊖	\$28,097	
JC Blair Memorial	80	⊖	⊖	\$13,351	
Lancaster General	262	⊖	⊖	\$23,925	
Lehigh Valley Hazleton	269	⊖	⊖	\$27,187	

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.

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.

Potentially planned readmissions were excluded from the readmission analysis.

Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	COPD
Lehigh Valley Pocono	316	⊖	⊖	\$28,992	
Lock Haven	54	⊖	⊖	\$44,959	
Milton S Hershey	184	⊖	⊖	\$29,523	
Moses Taylor	163	⊖	⊖	\$43,991	
Mount Nittany	245	⊖	⊖	\$31,928	
Muncy Valley	33	⊖	⊖	\$14,072	
Regional Scranton	306	⊖	⊖	\$36,198	
Robert Packer	255	⊖	⊖	\$24,628	
Soldiers & Sailors	133	⊖	○	\$19,551	
Sunbury Community	132	⊖	⊖	\$32,666	
Troy Community	42	⊖	⊖	\$16,193	
Tyler Memorial	40	⊖	⊖	\$28,881	
UPMC Pinnacle Carlisle	96	⊖	⊖	\$27,412	
UPMC Pinnacle Hanover	269	⊖	⊖	\$26,224	
UPMC Pinnacle Hospitals	503	⊖	⊖	\$23,387	
UPMC Pinnacle Lancaster	78	⊖	⊖	\$38,009	
UPMC Pinnacle Lititz	34	⊖	⊖	\$24,476	
UPMC Pinnacle Memorial	185	⊖	⊖	\$18,067	
Wayne Memorial	84	⊖	⊖	\$17,022	
Waynesboro	97	⊖	⊖	\$16,651	
Wilkes-Barre General	429	⊖	⊖	\$45,910	
Williamsport Regional	161	⊖	⊖	\$17,755	
York	611	●	⊖	\$20,457	

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.

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.

Potentially planned readmissions were excluded from the readmission analysis.

Colorectal Procedures

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	Colorectal Procedures
Statewide	11,848	1.6%	12.1%	\$93,096	
Central & Northeastern	3,267	1.9%	11.5%	\$77,611	
Barnes-Kasson County	3	NR	NR	NR	<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>
Berwick	7	○	○	\$178,962	
Bucktail	0	NR	NR	NR	
Chambersburg	89	○	○	\$45,094	
Endless Mountains	0	NR	NR	NR	
Ephrata Community	38	○	○	\$62,780	
Evangelical Community	44	○	●	\$46,770	
Fulton County	0	NR	NR	NR	
Geisinger Bloomsburg	13	○	○	\$54,946	
Geisinger Community	174	○	○	\$96,471	
Geisinger Danville	334	○	●	\$127,394	
Geisinger Jersey Shore	4	NR	NR	NR	
Geisinger Lewistown	42	○	●	\$35,097	
Geisinger Wyoming Valley	154	○	○	\$135,188	
Gettysburg	67	○	○	\$69,932	
Good Samaritan Lebanon	84	○	○	\$61,324	
Guthrie Towanda Memorial	0	NR	NR	NR	
Holy Spirit	60	○	○	\$64,414	
JC Blair Memorial	11	○	○	\$45,557	
Lancaster General	293	○	○	\$49,482	
Lehigh Valley Hazleton	49	○	○	\$78,081	

Potentially planned readmissions were excluded from the readmission analysis.

Colorectal Procedures

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	Colorectal Procedures
Lehigh Valley Pocono	64	⊖	⊖	\$84,103	
Lock Haven	6	⊖	⊖	\$136,473	
Milton S Hershey	355	⊖	○	\$72,459	
Moses Taylor	48	●	⊖	\$124,699	
Mount Nittany	47	⊖	⊖	\$64,985	
Muncy Valley	0	NR	NR	NR	
Regional Scranton	61	●	⊖	\$103,035	
Robert Packer	167	⊖	⊖	\$65,715	
Soldiers & Sailors	11	⊖	⊖	\$58,674	
Sunbury Community	10	⊖	⊖	\$69,607	
Troy Community	4	NR	NR	NR	
Tyler Memorial	2	NR	NR	NR	
UPMC Pinnacle Carlisle	31	⊖	⊖	\$119,824	
UPMC Pinnacle Hanover	49	⊖	⊖	\$49,671	
UPMC Pinnacle Hospitals	328	⊖	⊖	\$40,303	
UPMC Pinnacle Lancaster	24	⊖	⊖	\$106,861	
UPMC Pinnacle Lititz	16	⊖	⊖	\$103,508	
UPMC Pinnacle Memorial	39	●	⊖	\$44,877	
Wayne Memorial	20	⊖	⊖	\$40,266	
Waynesboro	11	⊖	⊖	\$55,553	
Wilkes-Barre General	158	⊖	⊖	\$112,325	
Williamsport Regional	69	⊖	⊖	\$68,543	
York	275	⊖	●	\$72,433	

Potentially planned readmissions were excluded from the readmission analysis.

Diabetes – Medical Management

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	Diabetes – Medical Management
Statewide	17,642	0.5%	20.4%	\$31,258	
Central & Northeastern	4,334	0.5%	21.0%	\$23,705	
Barnes-Kasson County	18	○	○	\$7,822	<p>Potentially planned readmissions were excluded from the readmission analysis.</p>
Berwick	25	○	○	\$36,925	
Bucktail	1	NR	NR	NR	
Chambersburg	171	○	○	\$17,467	
Endless Mountains	0	NR	NR	NR	
Ephrata Community	66	○	○	\$24,058	
Evangelical Community	66	○	○	\$18,836	
Fulton County	19	○	○	\$18,732	
Geisinger Bloomsburg	26	○	●	\$22,128	
Geisinger Community	161	○	●	\$31,021	
Geisinger Danville	230	○	○	\$39,265	
Geisinger Jersey Shore	9	○	●	\$11,114	
Geisinger Lewistown	88	○	○	\$19,684	
Geisinger Wyoming Valley	267	○	○	\$39,185	
Gettysburg	75	○	○	\$16,641	
Good Samaritan Lebanon	81	○	○	\$14,393	
Guthrie Towanda Memorial	3	NR	NR	NR	
Holy Spirit	146	○	○	\$25,703	
JC Blair Memorial	38	○	○	\$9,238	
Lancaster General	308	○	○	\$21,359	
Lehigh Valley Hazleton	73	○	○	\$21,083	

Diabetes – Medical Management

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	Diabetes – Medical Management
Lehigh Valley Pocono	153	⊖	⊖	\$28,057	
Lock Haven	25	⊖	⊖	\$32,183	
Milton S Hershey	197	⊖	⊖	\$23,922	
Moses Taylor	94	⊖	⊖	\$37,411	
Mount Nittany	143	⊖	⊖	\$20,265	
Muncy Valley	10	⊖	⊖	\$10,984	
Regional Scranton	87	⊖	●	\$33,295	
Robert Packer	164	⊖	⊖	\$22,992	
Soldiers & Sailors	22	⊖	⊖	\$9,821	
Sunbury Community	14	⊖	⊖	\$14,372	
Troy Community	23	⊖	⊖	\$10,949	
Tyler Memorial	4	NR	NR	NR	
UPMC Pinnacle Carlisle	69	●	⊖	\$25,757	
UPMC Pinnacle Hanover	109	●	⊖	\$19,915	
UPMC Pinnacle Hospitals	517	⊖	⊖	\$17,742	
UPMC Pinnacle Lancaster	35	⊖	⊖	\$29,645	
UPMC Pinnacle Lititz	14	⊖	⊖	\$25,682	
UPMC Pinnacle Memorial	75	⊖	⊖	\$18,921	
Wayne Memorial	56	⊖	⊖	\$15,346	
Waynesboro	46	⊖	⊖	\$15,683	
Wilkes-Barre General	146	⊖	⊖	\$31,572	
Williamsport Regional	103	⊖	⊖	\$17,521	
York	332	⊖	⊖	\$17,829	

Gallbladder Removal – Laparoscopic

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge
Statewide	9,436	0.2%	6.4%	\$53,624
Central & Northeastern	2,529	0.2%	6.7%	\$48,905
Barnes-Kasson County	2	NR	NR	NR
Berwick	14	⊙	⊙	\$109,322
Bucktail	0	NR	NR	NR
Chambersburg	104	⊙	⊙	\$32,098
Endless Mountains	0	NR	NR	NR
Ephrata Community	58	⊙	⊙	\$43,534
Evangelical Community	15	⊙	⊙	\$33,276
Fulton County	1	NR	NR	NR
Geisinger Bloomsburg	16	⊙	⊙	\$40,668
Geisinger Community	117	⊙	⊙	\$60,782
Geisinger Danville	218	⊙	⊙	\$83,737
Geisinger Jersey Shore	2	NR	NR	NR
Geisinger Lewistown	31	⊙	⊙	\$27,449
Geisinger Wyoming Valley	107	⊙	⊙	\$76,852
Gettysburg	28	⊙	⊙	\$31,063
Good Samaritan Lebanon	65	⊙	⊙	\$39,202
Guthrie Towanda Memorial	0	NR	NR	NR
Holy Spirit	60	⊙	⊙	\$41,959
JC Blair Memorial	14	⊙	⊙	\$21,514
Lancaster General	237	⊙	⊙	\$38,265
Lehigh Valley Hazleton	68	⊙	⊙	\$44,662

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

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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.

Potentially planned readmissions were excluded from the readmission analysis.

Gallbladder Removal – Laparoscopic

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	Gallbladder Removal – Laparoscopic
Lehigh Valley Pocono	68	⊖	⊖	\$44,152	
Lock Haven	7	⊖	⊖	\$125,161	
Milton S Hershey	100	⊖	⊖	\$50,998	
Moses Taylor	52	⊖	⊖	\$82,269	
Mount Nittany	129	⊖	⊖	\$40,871	
Muncy Valley	1	NR	NR	NR	
Regional Scranton	49	⊖	⊖	\$78,193	
Robert Packer	72	⊖	⊖	\$37,855	
Soldiers & Sailors	8	⊖	⊖	\$29,618	
Sunbury Community	3	NR	NR	NR	
Troy Community	1	NR	NR	NR	
Tyler Memorial	5	⊖	⊖	\$79,378	
UPMC Pinnacle Carlisle	37	⊖	⊖	\$59,983	
UPMC Pinnacle Hanover	39	⊖	⊖	\$35,132	
UPMC Pinnacle Hospitals	239	⊖	⊖	\$24,041	
UPMC Pinnacle Lancaster	14	⊖	⊖	\$64,941	
UPMC Pinnacle Lititz	13	⊖	⊖	\$60,713	
UPMC Pinnacle Memorial	73	⊖	⊖	\$29,701	
Wayne Memorial	22	⊖	⊖	\$35,420	
Waynesboro	15	⊖	⊖	\$36,147	
Wilkes-Barre General	94	⊖	⊖	\$78,528	
Williamsport Regional	89	⊖	⊖	\$44,133	
York	224	⊖	⊖	\$40,130	

Potentially planned readmissions were excluded from the readmission analysis.

Heart Attack – Angioplasty/Stent

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge
Statewide	13,945	1.6%	9.5%	\$94,612
Central & Northeastern	3,952	1.3%	9.3%	\$81,509
Barnes-Kasson County	0	NR	NR	NR
Berwick	0	NR	NR	NR
Bucktail	0	NR	NR	NR
Chambersburg	182	⊙	⊙	\$60,975
Endless Mountains	0	NR	NR	NR
Ephrata Community	70	⊙	⊙	\$84,828
Evangelical Community	74	⊙	⊙	\$71,018
Fulton County	0	NR	NR	NR
Geisinger Bloomsburg	0	NR	NR	NR
Geisinger Community	142	⊙	⊙	\$79,633
Geisinger Danville	357	⊙	⊙	\$115,969
Geisinger Jersey Shore	0	NR	NR	NR
Geisinger Lewistown	0	NR	NR	NR
Geisinger Wyoming Valley	162	⊙	⊙	\$128,501
Gettysburg	0	NR	NR	NR
Good Samaritan Lebanon	143	⊙	⊙	\$64,078
Guthrie Towanda Memorial	0	NR	NR	NR
Holy Spirit	142	●	⊙	\$55,792
JC Blair Memorial [†]	12	⊙	●	\$51,109
Lancaster General	370	⊙	⊙	\$71,276
Lehigh Valley Hazleton	0	NR	NR	NR

[†] The data shown for this hospital is not representative of a full year; this facility began performing these procedures in July 2017.

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

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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.

Potentially planned readmissions were excluded from the readmission analysis.

Heart Attack – Angioplasty/Stent

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge
Lehigh Valley Pocono	133	⊖	⊖	\$78,457
Lock Haven	0	NR	NR	NR
Milton S Hershey	162	⊖	⊖	\$81,814
Moses Taylor	1	NR	NR	NR
Mount Nittany	130	⊖	⊖	\$67,728
Muncy Valley	0	NR	NR	NR
Regional Scranton	183	⊖	⊖	\$108,701
Robert Packer	249	⊖	⊖	\$36,684
Soldiers & Sailors	0	NR	NR	NR
Sunbury Community	0	NR	NR	NR
Troy Community	0	NR	NR	NR
Tyler Memorial	0	NR	NR	NR
UPMC Pinnacle Carlisle	0	NR	NR	NR
UPMC Pinnacle Hanover	82	⊖	⊖	\$59,861
UPMC Pinnacle Hospitals	361	⊖	⊖	\$58,385
UPMC Pinnacle Lancaster	56	⊖	⊖	\$118,504
UPMC Pinnacle Lititz	0	NR	NR	NR
UPMC Pinnacle Memorial	71	⊖	⊖	\$71,414
Wayne Memorial	59	⊖	⊖	\$122,740
Waynesboro	0	NR	NR	NR
Wilkes-Barre General	145	⊖	⊖	\$173,107
Williamsport Regional	213	⊖	⊖	\$76,323
York	430	⊖	⊖	\$74,840

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

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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.

Potentially planned readmissions were excluded from the readmission analysis.

Heart Attack – Medical Management

Hospital	Total Number of Cases	Transfer to Acute Care	Mortality	Readmission	Average Hospital Charge
Statewide	10,855	16.9%	7.6%	17.7%	\$42,058
Central & Northeastern	3,153	15.0%	7.4%	16.1%	\$34,506
Barnes-Kasson County	2	NR	NR	NR	NR
Berwick	17	30.4%	⊙	⊙	\$44,654
Bucktail	0	NR	NR	NR	NR
Chambersburg*	208	18.6%	⊙	○	\$28,033
Endless Mountains	2	NR	NR	NR	NR
Ephrata Community*	39	31.4%	⊙	⊙	\$37,690
Evangelical Community*	71	39.8%	⊙	⊙	\$25,193
Fulton County	1	NR	NR	NR	NR
Geisinger Bloomsburg	1	NR	NR	NR	NR
Geisinger Community*	103	2.1%	⊙	⊙	\$48,160
Geisinger Danville*	255	0.8%	⊙	⊙	\$57,539
Geisinger Jersey Shore	2	NR	NR	NR	NR
Geisinger Lewistown	25	56.0%	⊙	⊙	\$19,251
Geisinger Wyoming Valley*	76	1.4%	⊙	⊙	\$54,628
Gettysburg	21	67.9%	⊙	⊙	\$19,303
Good Samaritan Lebanon*	90	7.9%	⊙	⊙	\$28,660
Guthrie Towanda Memorial	2	NR	NR	NR	NR
Holy Spirit*	101	0.0%	⊙	⊙	\$29,840
JC Blair Memorial [†]	20	10.5%	⊙	⊙	\$11,229
Lancaster General*	310	0.3%	⊙	⊙	\$32,134
Lehigh Valley Hazleton	69	46.2%	⊙	⊙	\$27,702

[†] This facility began performing advanced cardiac services effective July 2017.

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.

Potentially planned readmissions were excluded from the readmission analysis.

Heart Attack – Medical Management

Hospital	Total Number of Cases	Transfer to Acute Care	Mortality	Readmission	Average Hospital Charge
Lehigh Valley Pocono*	106	5.7%	⊙	⊙	\$40,275
Lock Haven	17	23.8%	⊙	⊙	\$45,157
Milton S Hershey*	153	0.7%	⊙	⊙	\$34,461
Moses Taylor	15	50.0%	⊙	⊙	\$42,869
Mount Nittany*	85	32.5%	⊙	⊙	\$32,200
Muncy Valley	6	14.3%	⊙	⊙	\$12,879
Regional Scranton*	116	1.8%	⊙	⊙	\$42,914
Robert Packer*	172	1.2%	⊙	⊙	\$26,948
Soldiers & Sailors	20	35.7%	⊙	⊙	\$17,466
Sunbury Community	9	33.3%	⊙	⊙	\$48,435
Troy Community	9	30.8%	⊙	⊙	\$12,125
Tyler Memorial	0	NR	NR	NR	NR
UPMC Pinnacle Carlisle	21	72.1%	●	⊙	\$32,379
UPMC Pinnacle Hanover*	70	29.9%	●	○	\$24,024
UPMC Pinnacle Hospitals*	209	1.5%	⊙	⊙	\$30,901
UPMC Pinnacle Lancaster*	30	0.0%	⊙	⊙	\$39,840
UPMC Pinnacle Lititz	9	53.3%	⊙	⊙	\$32,561
UPMC Pinnacle Memorial*	74	17.2%	⊙	⊙	\$28,033
Wayne Memorial*	46	10.0%	⊙	⊙	\$28,785
Waynesboro	20	60.4%	⊙	⊙	\$22,143
Wilkes-Barre General*	108	13.3%	⊙	⊙	\$53,317
Williamsport Regional*	258	2.1%	⊙	○	\$26,252
York*	174	0.6%	⊙	⊙	\$30,542

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.

Potentially planned readmissions were excluded from the readmission analysis.

Heart Failure

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge
Statewide	50,932	2.4%	23.4%	\$41,394
Central & Northeastern	12,900	2.6%	22.1%	\$32,754
Barnes-Kasson County	41	⊖	⊖	\$14,800
Berwick	37	⊖	⊖	\$63,664
Bucktail	5	⊖	NR	\$10,202
Chambersburg	457	⊖	⊖	\$23,592
Endless Mountains	29	●	⊖	\$9,595
Ephrata Community	248	⊖	⊖	\$35,517
Evangelical Community	209	⊖	⊖	\$24,359
Fulton County	30	⊖	⊖	\$26,319
Geisinger Bloomsburg	63	⊖	⊖	\$27,241
Geisinger Community	521	⊖	⊖	\$43,288
Geisinger Danville	1,006	⊖	⊖	\$49,613
Geisinger Jersey Shore	30	⊖	⊖	\$18,286
Geisinger Lewistown	273	⊖	⊖	\$26,018
Geisinger Wyoming Valley	756	⊖	⊖	\$40,705
Gettysburg	193	⊖	⊖	\$24,952
Good Samaritan Lebanon	244	⊖	⊖	\$21,482
Guthrie Towanda Memorial	18	⊖	⊖	\$19,078
Holy Spirit	378	⊖	⊖	\$31,772
JC Blair Memorial	80	⊖	⊖	\$12,141
Lancaster General	1,076	⊖	⊖	\$28,868
Lehigh Valley Hazleton	247	⊖	⊖	\$30,526

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.

Potentially planned readmissions were excluded from the readmission analysis.

Heart Failure

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	Heart Failure
Lehigh Valley Pocono	450	⊖	⊖	\$33,145	
Lock Haven	72	⊖	⊖	\$47,208	
Milton S Hershey	587	⊙	⊖	\$34,380	
Moses Taylor	216	⊖	⊖	\$54,837	
Mount Nittany	466	⊖	⊖	\$32,423	
Muncy Valley	22	⊖	⊖	\$15,966	
Regional Scranton	516	●	⊖	\$35,405	
Robert Packer	362	⊖	⊖	\$25,773	
Soldiers & Sailors	65	⊖	⊖	\$22,435	
Sunbury Community	34	⊖	⊖	\$30,039	
Troy Community	23	⊖	⊖	\$10,284	
Tyler Memorial	18	⊖	⊖	\$26,058	
UPMC Pinnacle Carlisle	166	⊖	●	\$29,139	
UPMC Pinnacle Hanover	258	⊖	⊖	\$22,881	
UPMC Pinnacle Hospitals	1,104	⊖	⊖	\$27,731	
UPMC Pinnacle Lancaster	103	⊖	⊖	\$39,133	
UPMC Pinnacle Lititz	53	⊖	⊖	\$33,742	
UPMC Pinnacle Memorial	131	⊖	⊖	\$25,125	
Wayne Memorial	129	⊖	⊖	\$18,889	
Waynesboro	124	⊖	⊖	\$23,317	
Wilkes-Barre General	504	⊖	⊖	\$48,576	
Williamsport Regional	385	⊖	⊖	\$22,664	
York	1,122	⊖	⊖	\$26,137	

Potentially planned readmissions were excluded from the readmission analysis.

Kidney and Urinary Tract Infections

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge
Statewide	20,163	0.5%	15.0%	\$27,171
Central & Northeastern	5,123	0.6%	13.1%	\$22,693
Barnes-Kasson County	27	⊖	●	\$8,414
Berwick	20	⊖	⊖	\$37,122
Bucktail	3	NR	NR	NR
Chambersburg	149	⊖	⊖	\$17,650
Endless Mountains	29	●	⊖	\$4,587
Ephrata Community	92	⊖	⊖	\$23,477
Evangelical Community	54	⊖	⊖	\$16,397
Fulton County	27	⊖	⊖	\$17,272
Geisinger Bloomsburg	43	⊖	⊖	\$19,651
Geisinger Community	213	⊖	⊖	\$33,908
Geisinger Danville	257	●	⊖	\$31,462
Geisinger Jersey Shore	21	⊖	⊖	\$11,985
Geisinger Lewistown	65	⊖	⊖	\$15,314
Geisinger Wyoming Valley	254	⊖	⊖	\$34,133
Gettysburg	88	⊖	⊖	\$16,163
Good Samaritan Lebanon	87	⊖	○	\$15,097
Guthrie Towanda Memorial	14	⊖	⊖	\$15,251
Holy Spirit	160	⊖	⊖	\$22,776
JC Blair Memorial	58	⊖	⊖	\$8,475
Lancaster General	254	⊖	○	\$19,672
Lehigh Valley Hazleton	154	⊖	⊖	\$19,282

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).

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- NR Not reported. Too few cases after exclusions.

Potentially planned readmissions were excluded from the readmission analysis.

Kidney and Urinary Tract Infections

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge
Lehigh Valley Pocono	162	⊖	⊖	\$25,579
Lock Haven	22	⊖	⊖	\$33,560
Milton S Hershey	299	⊖	⊖	\$25,510
Moses Taylor	145	⊖	⊖	\$39,556
Mount Nittany	249	⊖	⊖	\$19,886
Muncy Valley	17	⊖	⊖	\$9,083
Regional Scranton	179	⊖	⊖	\$29,230
Robert Packer	143	⊖	⊖	\$21,298
Soldiers & Sailors	39	⊖	⊖	\$11,020
Sunbury Community	25	⊖	⊖	\$27,412
Troy Community	32	⊖	⊖	\$11,092
Tyler Memorial	17	⊖	⊖	\$20,057
UPMC Pinnacle Carlisle	57	⊖	⊖	\$26,947
UPMC Pinnacle Hanover	136	⊖	⊖	\$14,571
UPMC Pinnacle Hospitals	401	⊖	⊖	\$18,418
UPMC Pinnacle Lancaster	31	⊖	⊖	\$26,761
UPMC Pinnacle Lititz	36	⊖	⊖	\$22,340
UPMC Pinnacle Memorial	80	⊖	⊖	\$16,727
Wayne Memorial	66	⊖	⊖	\$15,532
Waynesboro	28	⊖	⊖	\$15,922
Wilkes-Barre General	272	⊖	⊖	\$32,263
Williamsport Regional	99	⊖	⊖	\$13,999
York	484	⊖	⊖	\$16,093

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).

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- NR Not reported. Too few cases after exclusions.

Potentially planned readmissions were excluded from the readmission analysis.

Kidney Failure – Acute

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge
Statewide	23,962	2.4%	19.8%	\$33,737
Central & Northeastern	6,403	2.8%	18.3%	\$28,217
Barnes-Kasson County	14	●	⊖	\$12,730
Berwick	16	⊖	⊖	\$36,006
Bucktail	0	NR	NR	NR
Chambersburg	323	⊖	⊖	\$19,003
Endless Mountains	7	●	NR	\$3,752
Ephrata Community	74	●	⊖	\$31,934
Evangelical Community	77	⊖	⊖	\$20,039
Fulton County	11	⊖	⊖	\$17,315
Geisinger Bloomsburg	59	●	⊖	\$18,727
Geisinger Community	292	⊖	⊖	\$41,437
Geisinger Danville	496	⊖	⊖	\$37,008
Geisinger Jersey Shore	12	⊖	⊖	\$12,904
Geisinger Lewistown	71	⊖	⊖	\$19,691
Geisinger Wyoming Valley	398	⊖	⊖	\$41,311
Gettysburg	120	⊖	⊖	\$18,015
Good Samaritan Lebanon	99	⊖	⊖	\$19,562
Guthrie Towanda Memorial	13	⊖	⊖	\$17,172
Holy Spirit	145	⊖	⊖	\$29,551
JC Blair Memorial	15	⊖	⊖	\$9,929
Lancaster General	584	⊖	⊖	\$22,816
Lehigh Valley Hazleton	164	⊖	⊖	\$26,422

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.

Potentially planned readmissions were excluded from the readmission analysis.

Kidney Failure – Acute

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	Kidney Failure – Acute
Lehigh Valley Pocono	113	⊖	⊖	\$34,394	
Lock Haven	51	⊖	⊖	\$32,998	
Milton S Hershey	331	⊖	⊖	\$30,375	
Moses Taylor	142	⊖	○	\$45,491	
Mount Nittany	280	⊖	⊖	\$23,013	
Muncy Valley	3	NR	NR	NR	
Regional Scranton	169	●	○	\$37,162	
Robert Packer	205	⊖	⊖	\$24,923	
Soldiers & Sailors	76	⊖	○	\$14,233	
Sunbury Community	37	⊖	⊖	\$27,286	
Troy Community	4	NR	NR	NR	
Tyler Memorial	2	NR	NR	NR	
UPMC Pinnacle Carlisle	90	⊖	⊖	\$29,023	
UPMC Pinnacle Hanover	119	⊖	⊖	\$19,374	
UPMC Pinnacle Hospitals	397	⊖	⊖	\$22,174	
UPMC Pinnacle Lancaster	42	⊖	⊖	\$31,503	
UPMC Pinnacle Lititz	43	⊖	⊖	\$24,361	
UPMC Pinnacle Memorial	87	⊖	⊖	\$18,209	
Wayne Memorial	62	⊖	⊖	\$16,431	
Waynesboro	53	⊖	⊖	\$16,796	
Wilkes-Barre General	333	●	⊖	\$46,255	
Williamsport Regional	201	⊖	⊖	\$17,915	
York	529	⊖	⊖	\$21,505	

Potentially planned readmissions were excluded from the readmission analysis.

Pneumonia – Aspiration

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	<h2>Pneumonia – Aspiration</h2> <p>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.</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. <p>Potentially planned readmissions were excluded from the readmission analysis.</p>
Statewide	7,235	5.2%	20.7%	\$43,950	
Central & Northeastern	1,572	5.9%	19.6%	\$36,262	
Barnes-Kasson County	1	NR	NR	NR	
Berwick	5	○	NR	\$57,294	
Bucktail	1	NR	NR	NR	
Chambersburg	71	○	◉	\$24,744	
Endless Mountains	2	NR	NR	NR	
Ephrata Community	34	◉	◉	\$40,373	
Evangelical Community	10	◉	◉	\$23,699	
Fulton County	2	NR	NR	NR	
Geisinger Bloomsburg	7	◉	◉	\$33,743	
Geisinger Community	41	◉	◉	\$56,210	
Geisinger Danville	78	●	◉	\$55,724	
Geisinger Jersey Shore	2	NR	NR	NR	
Geisinger Lewistown	20	◉	◉	\$22,712	
Geisinger Wyoming Valley	55	◉	◉	\$59,504	
Gettysburg	39	◉	◉	\$26,822	
Good Samaritan Lebanon	30	◉	◉	\$26,037	
Guthrie Towanda Memorial	1	NR	NR	NR	
Holy Spirit	30	◉	◉	\$38,276	
JC Blair Memorial	18	◉	◉	\$13,721	
Lancaster General	217	●	◉	\$29,416	
Lehigh Valley Hazleton	46	◉	◉	\$30,139	

Pneumonia – Aspiration

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	<h2>Pneumonia – Aspiration</h2> <p>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.</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. <p>Potentially planned readmissions were excluded from the readmission analysis.</p>
Lehigh Valley Pocono	74	○	○	\$42,612	
Lock Haven	3	NR	NR	NR	
Milton S Hershey	52	○	○	\$42,679	
Moses Taylor	38	○	○	\$67,408	
Mount Nittany	127	●	○	\$32,757	
Muncy Valley	1	NR	NR	NR	
Regional Scranton	43	○	●	\$43,833	
Robert Packer	65	○	○	\$31,916	
Soldiers & Sailors	11	○	○	\$26,749	
Sunbury Community	19	○	○	\$47,150	
Troy Community	1	NR	NR	NR	
Tyler Memorial	1	NR	NR	NR	
UPMC Pinnacle Carlisle	28	●	○	\$35,504	
UPMC Pinnacle Hanover	33	○	○	\$29,903	
UPMC Pinnacle Hospitals	55	○	○	\$31,954	
UPMC Pinnacle Lancaster	16	○	○	\$42,933	
UPMC Pinnacle Lititz	5	○	NR	\$29,064	
UPMC Pinnacle Memorial	18	○	○	\$31,083	
Wayne Memorial	28	○	○	\$23,187	
Waynesboro	15	○	○	\$24,350	
Wilkes-Barre General	47	○	○	\$55,308	
Williamsport Regional	52	○	○	\$22,062	
York	126	○	○	\$30,206	

Pneumonia – Infectious

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge
Statewide	24,132	1.8%	14.2%	\$31,557
Central & Northeastern	6,720	2.1%	14.4%	\$27,904
Barnes-Kasson County	72	●	⊖	\$13,967
Berwick	45	⊖	⊖	\$51,950
Bucktail	11	⊖	⊖	\$13,542
Chambersburg	225	⊖	⊖	\$20,610
Endless Mountains	42	⊖	⊖	\$7,096
Ephrata Community	107	⊖	○	\$32,338
Evangelical Community	111	⊖	⊖	\$20,947
Fulton County	61	⊖	⊖	\$25,416
Geisinger Bloomsburg	62	⊖	⊖	\$26,333
Geisinger Community	263	⊖	⊖	\$41,822
Geisinger Danville	238	⊖	⊖	\$40,955
Geisinger Jersey Shore	72	⊖	⊖	\$15,431
Geisinger Lewistown	231	⊖	⊖	\$23,086
Geisinger Wyoming Valley	297	⊖	⊖	\$40,882
Gettysburg	97	⊖	⊖	\$19,808
Good Samaritan Lebanon	196	⊖	⊖	\$22,532
Guthrie Towanda Memorial	92	⊖	⊖	\$19,175
Holy Spirit	223	●	⊖	\$28,816
JC Blair Memorial	69	⊖	⊖	\$12,318
Lancaster General	520	⊖	⊖	\$24,449
Lehigh Valley Hazleton	155	⊖	⊖	\$28,070

Pneumonia – Infectious

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

Understanding the Symbols

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

Potentially planned readmissions were excluded from the readmission analysis.

Pneumonia – Infectious

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	Pneumonia – Infectious
Lehigh Valley Pocono	231	⊖	⊖	\$30,509	
Lock Haven	37	⊖	⊖	\$39,103	
Milton S Hershey	351	○	⊖	\$30,744	
Moses Taylor	96	⊖	⊖	\$45,852	
Mount Nittany	325	⊖	⊖	\$29,026	
Muncy Valley	44	⊖	⊖	\$15,881	
Regional Scranton	190	⊖	⊖	\$38,524	
Robert Packer	254	⊖	⊖	\$25,389	
Soldiers & Sailors	87	⊖	⊖	\$19,429	
Sunbury Community	33	●	⊖	\$37,096	
Troy Community	69	⊖	⊖	\$13,851	
Tyler Memorial	48	⊖	⊖	\$23,953	
UPMC Pinnacle Carlisle	121	⊖	⊖	\$30,561	
UPMC Pinnacle Hanover	157	⊖	⊖	\$23,542	
UPMC Pinnacle Hospitals	333	⊖	⊖	\$21,509	
UPMC Pinnacle Lancaster	53	⊖	⊖	\$36,452	
UPMC Pinnacle Lititz	56	⊖	⊖	\$34,640	
UPMC Pinnacle Memorial	110	⊖	⊖	\$20,951	
Wayne Memorial	149	⊖	⊖	\$19,184	
Waynesboro	48	⊖	⊖	\$19,128	
Wilkes-Barre General	225	⊖	⊖	\$44,811	
Williamsport Regional	112	⊖	⊖	\$18,617	
York	372	⊖	⊖	\$21,344	

Respiratory Failure

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge
Statewide	17,437	8.9%	22.9%	\$55,602
Central & Northeastern	5,663	8.2%	20.9%	\$44,606
Barnes-Kasson County	2	NR	NR	NR
Berwick	5	⊖	NR	\$77,217
Bucktail	0	NR	NR	NR
Chambersburg	358	⊖	⊖	\$29,866
Endless Mountains	1	NR	NR	NR
Ephrata Community	52	⊖	○	\$44,328
Evangelical Community	202	⊖	⊖	\$31,713
Fulton County	7	⊖	⊖	\$20,916
Geisinger Bloomsburg	52	⊖	⊖	\$51,967
Geisinger Community	175	⊖	⊖	\$65,673
Geisinger Danville	334	●	⊖	\$72,674
Geisinger Jersey Shore	10	⊖	⊖	\$16,602
Geisinger Lewistown	139	⊖	⊖	\$36,756
Geisinger Wyoming Valley	189	○	⊖	\$73,221
Gettysburg	49	⊖	⊖	\$33,717
Good Samaritan Lebanon	143	⊖	⊖	\$31,751
Guthrie Towanda Memorial	21	⊖	⊖	\$33,872
Holy Spirit	64	⊖	⊖	\$39,922
JC Blair Memorial	4	NR	NR	NR
Lancaster General	705	⊖	○	\$37,088
Lehigh Valley Hazleton	189	⊖	⊖	\$43,435

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

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

Potentially planned readmissions were excluded from the readmission analysis.

Respiratory Failure

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge
Lehigh Valley Pocono	136	⊖	⊖	\$45,999
Lock Haven	2	NR	NR	NR
Milton S Hershey	459	⊖	⊖	\$48,499
Moses Taylor	56	⊖	⊖	\$87,211
Mount Nittany	174	⊖	⊖	\$44,994
Muncy Valley	5	⊖	⊖	\$26,498
Regional Scranton	63	●	⊖	\$53,690
Robert Packer	311	⊖	●	\$42,530
Soldiers & Sailors	75	⊖	⊖	\$39,603
Sunbury Community	3	NR	NR	NR
Troy Community	27	⊖	⊖	\$21,373
Tyler Memorial	1	NR	NR	NR
UPMC Pinnacle Carlisle	135	●	⊖	\$40,549
UPMC Pinnacle Hanover	63	⊖	⊖	\$38,597
UPMC Pinnacle Hospitals	436	⊖	⊖	\$34,804
UPMC Pinnacle Lancaster	23	⊖	⊖	\$49,488
UPMC Pinnacle Lititz	11	⊖	⊖	\$57,128
UPMC Pinnacle Memorial	51	⊖	⊖	\$27,668
Wayne Memorial	105	○	⊖	\$25,725
Waynesboro	95	⊖	⊖	\$26,680
Wilkes-Barre General	268	⊖	⊖	\$69,096
Williamsport Regional	255	⊖	○	\$31,834
York	188	○	⊖	\$35,505

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.

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

Potentially planned readmissions were excluded from the readmission analysis.

Sepsis

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	Sepsis
Statewide	68,100	9.3%	18.0%	\$55,811	
Central & Northeastern	20,053	9.2%	16.2%	\$43,715	
Barnes-Kasson County	13	○	○	\$12,724	<p>Potentially planned readmissions were excluded from the readmission analysis.</p>
Berwick	86	○	○	\$67,779	
Bucktail	3	NR	NR	NR	
Chambersburg	1,080	○	○	\$30,231	
Endless Mountains	7	●	●	\$5,793	
Ephrata Community	517	○	○	\$40,914	
Evangelical Community	512	○	○	\$26,328	
Fulton County	15	○	○	\$22,948	
Geisinger Bloomsburg	123	○	○	\$35,884	
Geisinger Community	821	○	○	\$67,454	
Geisinger Danville	1,291	○	○	\$67,790	
Geisinger Jersey Shore	10	○	○	\$17,854	
Geisinger Lewistown	332	○	○	\$32,363	
Geisinger Wyoming Valley	829	○	○	\$77,650	
Gettysburg	380	○	○	\$29,546	
Good Samaritan Lebanon	708	○	○	\$28,344	
Guthrie Towanda Memorial	62	○	○	\$28,104	
Holy Spirit	717	○	○	\$40,984	
JC Blair Memorial	70	○	○	\$15,153	
Lancaster General	1,340	○	○	\$40,005	
Lehigh Valley Hazleton	323	○	●	\$41,524	

Sepsis

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	Sepsis
Lehigh Valley Pocono	319	⊖	⊖	\$51,607	
Lock Haven	188	⊖	⊙	\$52,000	
Milton S Hershey	868	⊙	⊖	\$54,452	
Moses Taylor	430	⊖	⊖	\$79,451	
Mount Nittany	726	⊖	⊖	\$38,655	
Muncy Valley	10	⊖	⊖	\$27,022	
Regional Scranton	528	●	⊖	\$56,302	
Robert Packer	417	●	⊖	\$42,816	
Soldiers & Sailors	118	⊖	⊖	\$27,853	
Sunbury Community	37	⊖	⊖	\$37,878	
Troy Community	19	⊖	⊖	\$16,247	
Tyler Memorial	33	⊖	⊖	\$27,950	
UPMC Pinnacle Carlisle	150	●	⊖	\$50,070	
UPMC Pinnacle Hanover	181	⊖	⊙	\$25,948	
UPMC Pinnacle Hospitals	2,635	⊙	⊖	\$32,337	
UPMC Pinnacle Lancaster	181	⊖	⊖	\$52,024	
UPMC Pinnacle Lititz	87	⊖	⊖	\$43,973	
UPMC Pinnacle Memorial	214	⊖	⊖	\$29,438	
Wayne Memorial	107	⊙	⊖	\$28,006	
Waynesboro	359	⊖	⊙	\$25,787	
Wilkes-Barre General	655	●	⊖	\$67,168	
Williamsport Regional	732	⊖	⊙	\$29,982	
York	1,740	●	⊖	\$32,702	

Stroke

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge
Statewide	21,987	3.0%	11.5%	\$47,958
Central & Northeastern	5,934	3.4%	10.9%	\$38,119
Barnes-Kasson County	5	⊙	NR	\$12,656
Berwick	7	⊙	⊙	\$83,505
Bucktail	0	NR	NR	NR
Chambersburg	251	⊙	⊙	\$28,117
Endless Mountains	6	⊙	⊙	\$5,083
Ephrata Community	137	⊙	⊙	\$35,508
Evangelical Community	139	⊙	⊙	\$28,652
Fulton County	10	⊙	⊙	\$32,966
Geisinger Bloomsburg	21	⊙	⊙	\$42,236
Geisinger Community	211	⊙	⊙	\$56,737
Geisinger Danville	476	⊙	●	\$58,596
Geisinger Jersey Shore	3	NR	NR	NR
Geisinger Lewistown	89	⊙	⊙	\$24,470
Geisinger Wyoming Valley	315	⊙	⊙	\$58,977
Gettysburg	107	⊙	⊙	\$24,093
Good Samaritan Lebanon	123	⊙	⊙	\$22,588
Guthrie Towanda Memorial	9	⊙	⊙	\$20,783
Holy Spirit	191	⊙	⊙	\$35,943
JC Blair Memorial	4	NR	NR	NR
Lancaster General	578	⊙	⊙	\$25,894
Lehigh Valley Hazleton	97	⊙	⊙	\$35,225

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.

Potentially planned readmissions were excluded from the readmission analysis.

Stroke

Hospital	Total Number of Cases	Mortality	Readmission	Average Hospital Charge	Stroke
Lehigh Valley Pocono	177	⊖	⊖	\$44,088	<p>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.</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>
Lock Haven	18	⊖	⊖	\$59,904	
Milton S Hershey	483	⊖	⊖	\$45,532	
Moses Taylor	79	●	⊖	\$59,717	
Mount Nittany	191	●	⊖	\$33,770	
Muncy Valley	2	NR	NR	NR	
Regional Scranton	153	⊖	●	\$44,735	
Robert Packer	159	●	●	\$38,053	
Soldiers & Sailors	26	⊖	⊖	\$21,270	
Sunbury Community	10	⊖	⊖	\$33,434	
Troy Community	7	⊖	⊖	\$18,764	
Tyler Memorial	0	NR	NR	NR	
UPMC Pinnacle Carlisle	109	●	⊖	\$34,502	
UPMC Pinnacle Hanover	125	⊖	⊖	\$26,783	
UPMC Pinnacle Hospitals	480	⊖	⊖	\$30,862	
UPMC Pinnacle Lancaster	50	⊖	⊖	\$40,179	
UPMC Pinnacle Lititz	42	⊖	⊖	\$36,243	
UPMC Pinnacle Memorial	65	⊖	⊖	\$25,452	
Wayne Memorial	67	⊖	⊖	\$25,229	
Waynesboro	48	⊖	⊖	\$25,499	
Wilkes-Barre General	212	⊖	⊖	\$51,294	
Williamsport Regional	205	⊖	⊖	\$20,747	
York	426	⊖	⊖	\$31,090	

Potentially planned readmissions were excluded from the readmission analysis.

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 federal fiscal year (FFY) 2017, 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 federal fiscal year 2017. This information, provided by CMS, 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 – FFY 2017 Statewide Data <i>For the 16 medical conditions/surgical procedures included in this Hospital Performance Report</i>			
MS-DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Medicare Fee-for-Service	
		Cases	Average Payment
Abnormal Heartbeat		13,224	\$7,910
242	Permanent Cardiac Pacemaker Implant w/ MCC	655	\$22,527
243	Permanent Cardiac Pacemaker Implant w/ CC	931	\$16,124
244	Permanent Cardiac Pacemaker Implant w/o CC/MCC	717	\$12,700
258	Cardiac Pacemaker Device Replacement w/ MCC	14	\$18,713
259	Cardiac Pacemaker Device Replacement w/o MCC	17	\$11,793
260	Cardiac Pacemaker Revision Except Device Replacement w/ MCC	10	NR
261	Cardiac Pacemaker Revision Except Device Replacement w/ CC	28	\$12,964
262	Cardiac Pacemaker Revision Except Device Replacement w/o CC/MCC	16	\$9,612
273	Percutaneous Intracardiac Procedures w/ MCC	167	\$26,445
274	Percutaneous Intracardiac Procedures w/o MCC	588	\$16,998
286	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC	205	\$13,781
287	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC	235	\$6,658
308	Cardiac Arrhythmia and Conduction Disorders w/ MCC	2,876	\$7,160
309	Cardiac Arrhythmia and Conduction Disorders w/ CC	3,831	\$4,400
310	Cardiac Arrhythmia and Conduction Disorders w/o CC/MCC	2,934	\$2,818
Chest Pain		1,700	\$3,873
313	Chest Pain	1,700	\$3,873
Chronic Obstructive Pulmonary Disease (COPD)		13,227	\$5,858
190	Chronic Obstructive Pulmonary Disease w/ MCC	7,691	\$6,598
191	Chronic Obstructive Pulmonary Disease w/ CC	3,846	\$5,216
192	Chronic Obstructive Pulmonary Disease w/o CC/MCC	1,690	\$3,951
Colorectal Procedures		3,044	\$18,320
329	Major Small and Large Bowel Procedures w/ MCC	718	\$34,073
330	Major Small and Large Bowel Procedures w/ CC	1,512	\$15,170
331	Major Small and Large Bowel Procedures w/o CC/MCC	747	\$9,992
332	Rectal Resection w/ MCC	7	NR
333	Rectal Resection w/ CC	28	\$15,203
334	Rectal Resection w/o CC/MCC	32	\$9,344

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

Medicare Payments

Medicare Fee-for-Service Payments – FFY 2017 Statewide Data <i>For the 16 medical conditions/surgical procedures included in this Hospital Performance Report</i>			
MS-DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Medicare Fee-for-Service	
		Cases	Average Payment
Diabetes - Medical Management		4,542	\$6,074
073	Cranial and Peripheral Nerve Disorders w/ MCC	143	\$8,816
074	Cranial and Peripheral Nerve Disorders w/o MCC	306	\$5,603
299	Peripheral Vascular Disorders w/ MCC	66	\$10,423
300	Peripheral Vascular Disorders w/ CC	75	\$6,207
301	Peripheral Vascular Disorders w/o CC/MCC	5	NR
637	Diabetes w/ MCC	1,096	\$8,506
638	Diabetes w/ CC	2,246	\$5,091
639	Diabetes w/o CC/MCC	461	\$3,582
698	Other Kidney and Urinary Tract Diagnoses w/ MCC	40	\$9,305
699	Other Kidney and Urinary Tract Diagnoses w/ CC	91	\$6,557
700	Other Kidney and Urinary Tract Diagnoses w/o CC/MCC	13	\$4,600
Gallbladder Removal - Laparoscopic		1,852	\$10,079
411	Cholecystectomy with Common Duct Exploration (C.D.E.) w/ MCC	3	NR
412	Cholecystectomy with C.D.E. w/ CC	3	NR
413	Cholecystectomy with C.D.E. w/o CC/MCC	2	NR
417	Laparoscopic Cholecystectomy without C.D.E. w/ MCC	449	\$14,559
418	Laparoscopic Cholecystectomy without C.D.E. w/ CC	809	\$9,643
419	Laparoscopic Cholecystectomy without C.D.E. w/o CC/MCC	586	\$7,165
Heart Attack - Angioplasty/Stent		3,519	\$15,267
246	Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	943	\$21,100
247	Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/o MCC	2,100	\$12,915
248	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	108	\$19,443
249	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/o MCC	186	\$11,842
250	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/ MCC	74	\$18,047
251	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/o MCC	108	\$9,886

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

Medicare Payments

Medicare Fee-for-Service Payments – FFY 2017 Statewide Data			
<i>For the 16 medical conditions/surgical procedures included in this Hospital Performance Report</i>			
MS-DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Medicare Fee-for-Service	
		Cases	Average Payment
Heart Attack - Medical Management		4,127	\$7,666
280	Acute Myocardial Infarction, Discharged Alive w/ MCC	1,880	\$9,887
281	Acute Myocardial Infarction, Discharged Alive w/ CC	1,337	\$5,746
282	Acute Myocardial Infarction, Discharged Alive w/o CC/MCC	553	\$3,906
283	Acute Myocardial Infarction, Expired w/ MCC	275	\$10,532
284	Acute Myocardial Infarction, Expired w/ CC	61	\$4,049
285	Acute Myocardial Infarction, Expired w/o CC/MCC	21	\$3,193
Heart Failure		21,422	\$7,912
286	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC	907	\$15,254
287	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC	485	\$7,437
291	Heart Failure and Shock w/ MCC	13,561	\$8,803
292	Heart Failure and Shock w/ CC	4,726	\$5,569
293	Heart Failure and Shock w/o CC/MCC	1,743	\$3,644
Kidney and Urinary Tract Infections		8,475	\$4,992
689	Kidney and Urinary Tract Infections w/ MCC	2,963	\$6,106
690	Kidney and Urinary Tract Infections w/o MCC	5,512	\$4,393
Kidney Failure - Acute		9,423	\$6,458
682	Renal Failure w/ MCC	3,182	\$9,060
683	Renal Failure w/ CC	5,528	\$5,351
684	Renal Failure w/o CC/MCC	713	\$3,425
Pneumonia - Aspiration		3,330	\$9,378
177	Respiratory Infections and Inflammations w/ MCC	2,001	\$10,761
178	Respiratory Infections and Inflammations w/ CC	1,103	\$7,702
179	Respiratory Infections and Inflammations w/o CC/MCC	226	\$5,301

NR = Not Reported (10 or fewer cases)
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Medicare Payments

Medicare Fee-for-Service Payments – FFY 2017 Statewide Data			
<i>For the 16 medical conditions/surgical procedures included in this Hospital Performance Report</i>			
MS-DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Medicare Fee-for-Service	
		Cases	Average Payment
Pneumonia - Infectious		9,249	\$6,360
177	Respiratory Infections and Inflammations w/ MCC	432	\$10,784
178	Respiratory Infections and Inflammations w/ CC	170	\$7,612
179	Respiratory Infections and Inflammations w/o CC/MCC	37	\$5,108
193	Simple Pneumonia and Pleurisy w/ MCC	3,472	\$7,957
194	Simple Pneumonia and Pleurisy w/ CC	3,806	\$5,288
195	Simple Pneumonia and Pleurisy w/o CC/MCC	1,332	\$3,699
Respiratory Failure		6,507	\$9,843
189	Pulmonary Edema and Respiratory Failure	5,155	\$7,310
207	Respiratory System Diagnosis with Ventilator Support > 96 Hours	293	\$35,449
208	Respiratory System Diagnosis with Ventilator Support <= 96 Hours	1,059	\$15,089
Sepsis		26,194	\$10,642
870	Septicemia or Severe Sepsis with Mechanical Ventilation > 96 Hours	857	\$38,712
871	Septicemia or Severe Sepsis without Mechanical Ventilation > 96 Hours w/ MCC	19,404	\$10,829
872	Septicemia or Severe Sepsis without Mechanical Ventilation > 96 Hours w/o MCC	5,933	\$5,978
Stroke		7,817	\$7,193
061	Acute Ischemic Stroke with Use of Thrombolytic Agent w/ MCC	156	\$17,328
062	Acute Ischemic Stroke with Use of Thrombolytic Agent w/ CC	275	\$11,331
063	Acute Ischemic Stroke with Use of Thrombolytic Agent w/o CC/MCC	52	\$8,940
064	Intracranial Hemorrhage or Cerebral Infarction w/ MCC	1,924	\$10,806
065	Intracranial Hemorrhage or Cerebral Infarction w/ CC or tPA in 24 Hours	4,072	\$5,879
066	Intracranial Hemorrhage or Cerebral Infarction w/o CC/MCC	1,338	\$3,895

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