



Western Pennsylvania

HOSPITAL PERFORMANCE REPORT

16 Common Medical Conditions and Surgical Procedures • 2012 Data



Pennsylvania Health Care Cost Containment Council
December 2013



About PHC4

The Pennsylvania 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. It was created in the mid-1980s when Pennsylvania businesses and labor unions, in collaboration with other key stakeholders, joined forces to enact market-oriented health care reforms. As a result of their years of effort, the General Assembly passed legislation (Act 89 of 1986) creating PHC4.

The primary goal is to empower purchasers of health care benefits, such as businesses and labor unions, as well as other stakeholders, with information they can use to improve quality and restrain costs. Nearly 100 organizations and individuals annually utilize PHC4's special requests process to access and use data. More than 840,000 public reports on patient treatment results are downloaded from the PHC4 website annually. Today, PHC4 is a recognized national leader in public health care reporting.

It is governed by a 25-member board of directors representing business, labor, consumers, health care providers, insurers, and state government.

Additional Information on the PHC4 Website

Hospitals may have commented on this report. Comments are available on the PHC4 website at www.phc4.org or by request.

Technical information about the methodology and the calculations used for this report is detailed in a supplement, the *Technical Notes*, which is accessible from the website.

Hospital specific data details for each of the three regional versions of this report are available in a collective format, as **Downloadable Data Sets**, which can be accessed from the website.

Scan this Quick Response Code with your smartphone (using a QR code reader app) or visit www.phc4.org to learn more about PHC4.



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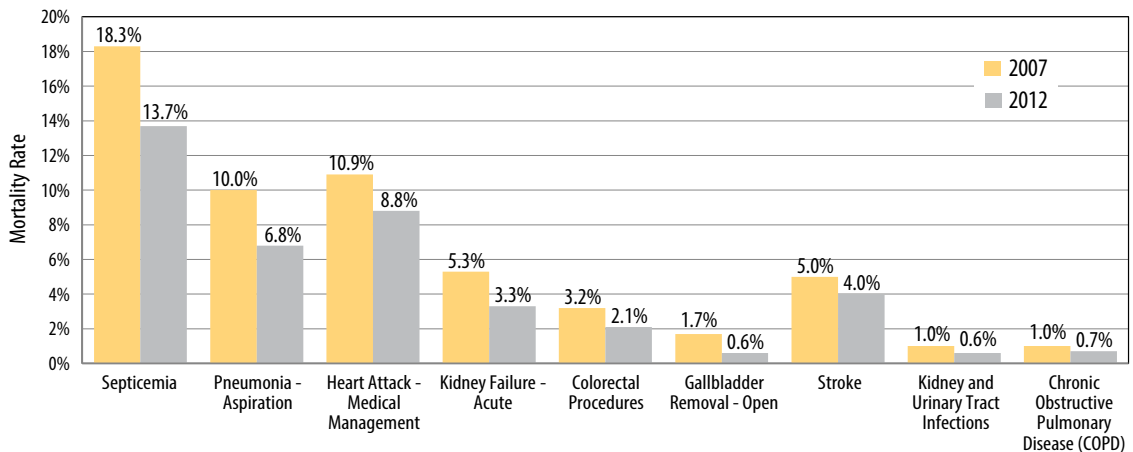
Counties included in this Report:

- 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

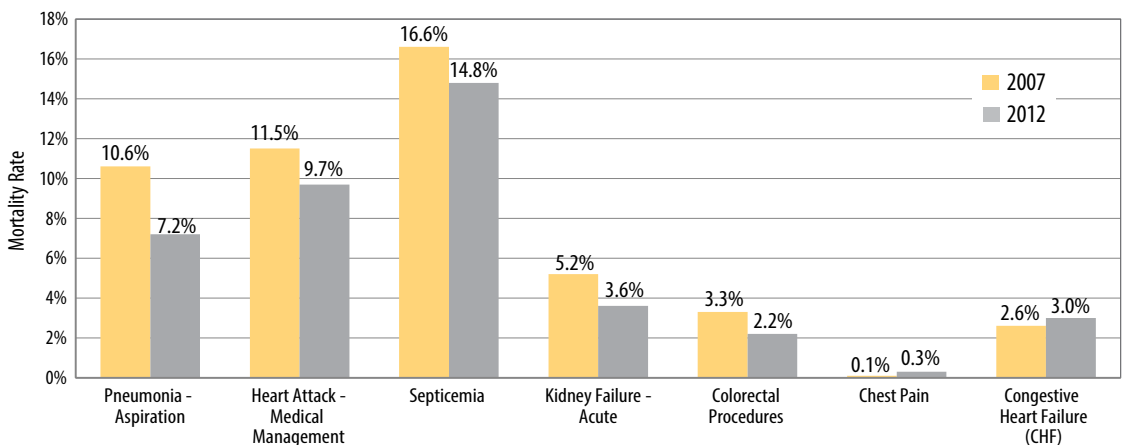
Key Findings

Mortality Rates

- Statewide in-hospital mortality rates showed a statistically significant decrease in nine of the 16 conditions between 2007 and 2012 (as graphed below). Of these, the largest decrease was in Septicemia, where the mortality rate decreased from 18.3% in 2007 to 13.7% in 2012. The only statistically significant increase was in Chest Pain, where the mortality rate increased from 0.04% in 2007 to 0.10% in 2012 (not graphed due to scale).



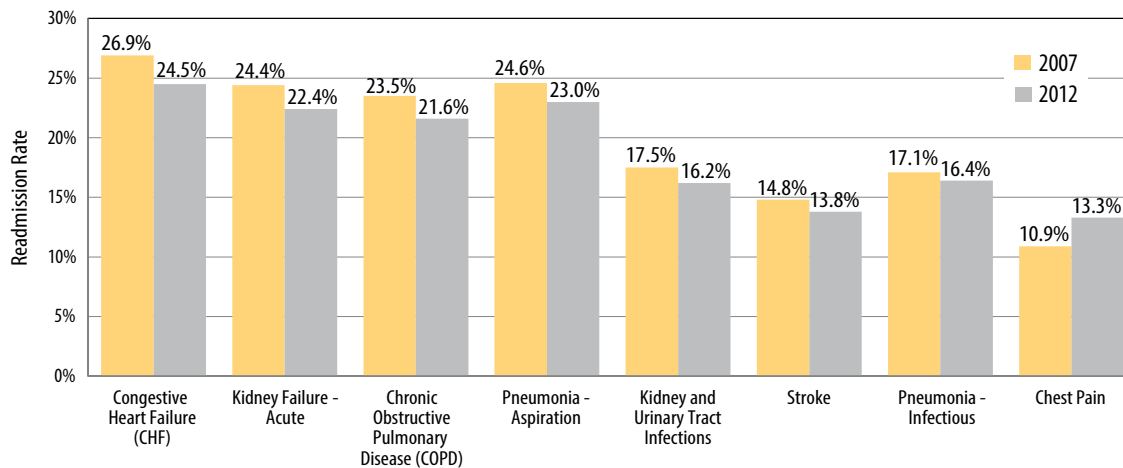
- In Western Pennsylvania, mortality rates showed a statistically significant decrease in five of the 16 conditions between 2007 and 2012. Of these, the largest decrease was in Pneumonia - Aspiration, where the mortality rate decreased from 10.6% in 2007 to 7.2% in 2012. Statistically significant increases were seen in two conditions, with the largest increase in Congestive Heart Failure (CHF), where the mortality rate increased from 2.6% in 2007 to 3.0% in 2012.



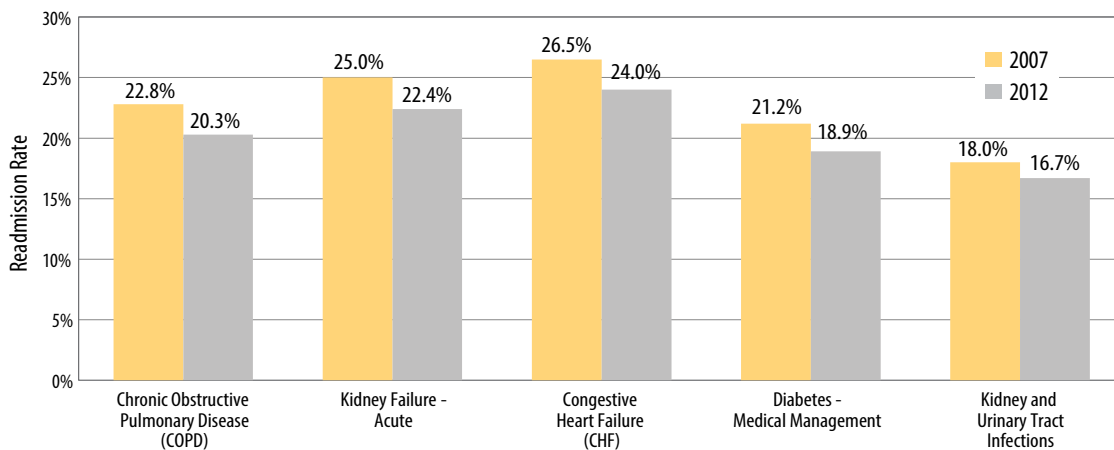
- After accounting for patient risk, hospitals in the Western Pennsylvania region as a whole had a significantly higher mortality rate than the rest of the state for Chest Pain, Kidney and Urinary Tract Infections, Pneumonia - Infectious, Septicemia, and Stroke.

Readmission Rates

- Statewide patient readmission rates showed a statistically significant decrease in seven of the 13 conditions for which readmissions were reported between 2007 and 2012. Of these, the largest decrease was in Congestive Heart Failure (CHF), where the readmission rate decreased from 26.9% in 2007 to 24.5% in 2012. The only increase was in Chest Pain, where the readmission rate increased from 10.9% in 2007 to 13.3% in 2012.



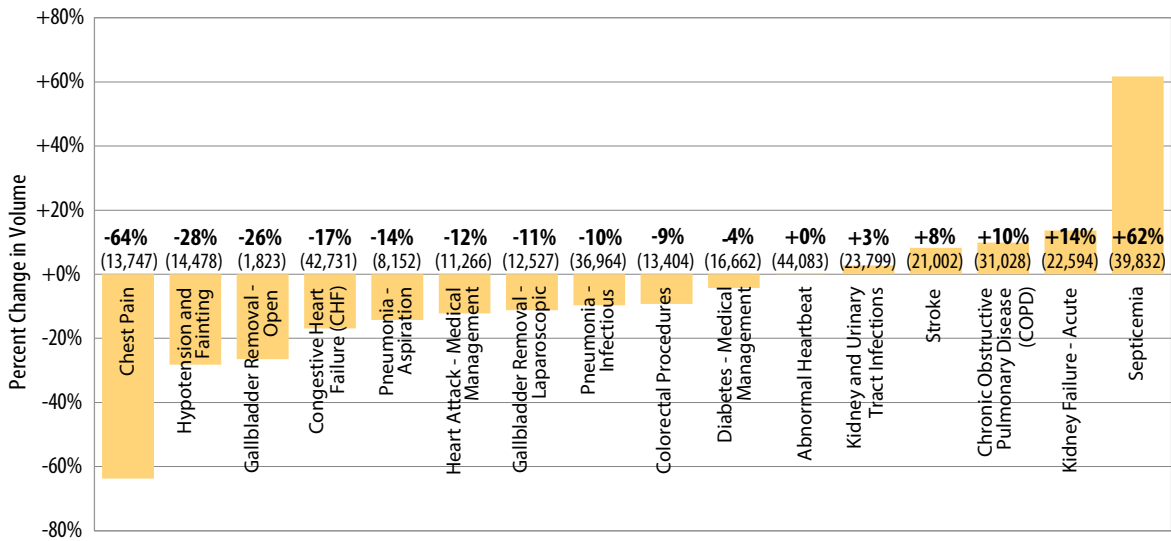
- In Western Pennsylvania, patient readmission rates showed a statistically significant decrease in five of the 13 conditions for which readmissions were reported between 2007 and 2012. Of these, the largest decrease was in Chronic Obstructive Pulmonary Disease (COPD), where the readmission rate decreased from 22.8% in 2007 to 20.3% in 2012. No condition in Western Pennsylvania showed a statistically significant increase in readmission rate between 2007 and 2012.



- After accounting for patient risk, hospitals in the Western Pennsylvania region as a whole had a significantly lower readmission rate than the rest of the state for Chronic Obstructive Pulmonary Disease (COPD) and Diabetes - Medical Management. They also had a significantly higher readmission rate than the rest of the state for Kidney and Urinary Tract Infections.

Volume of Hospital Admissions

- The following chart shows the statewide percent change in volume, from 2007 to 2012, for each of the 16 conditions and procedures included in this report (admission totals in 2012 are shown in parentheses). Chest Pain had the largest percentage decrease in volume (-63.7%), from 37,868 admissions in 2007 to 13,747 in 2012. Septicemia had the largest percentage increase in volume (+61.6%), from 24,642 admissions in 2007 to 39,832 in 2012.



Medicare and Medicaid Payments (2011 data)

Medicare Fee-for-Service

- Medicare fee-for-service was the primary payer for 44.5% of the Pennsylvania admissions in 2011 for the conditions and procedures in this report, for a total of nearly \$1.12 billion.
- The condition with the highest average Medicare fee-for-service payment in 2011 was Colorectal Procedures, at \$18,806 per hospitalization. The condition with the lowest average Medicare fee-for-service payment in 2011 was Chest Pain, at \$2,774 per hospitalization.

Medicaid Fee-for-Service

- Medicaid fee-for-service was the primary payer for 3.0% of the Pennsylvania admissions in 2011 for the conditions and procedures in this report, for a total of nearly \$99 million.
- The condition with the highest average Medicaid fee-for-service payment in 2011 was Colorectal Procedures, at \$18,099 per hospitalization. The condition with the lowest average Medicaid fee-for-service payment in 2011 was Chest Pain, at \$3,599 per hospitalization.

Medicaid Managed Care

- Medicaid managed care was the primary payer for 4.9% of the Pennsylvania admissions in 2011 for the conditions and procedures in this report, for a total of \$125 million.
- The condition with the highest average Medicaid managed care payment in 2011 was Colorectal Procedures, at \$16,782 per hospitalization. The condition with the lowest average Medicaid managed care payment in 2011 was Chest Pain, at \$3,799 per hospitalization.

Note: Differences in the approaches used by Medicare and Medicaid in determining payments may account for some of the variation seen across these payers for a given condition.

Understanding this 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* can help to fill the information vacuum and assist consumers and purchasers in making more informed health care decisions. This report can also serve as an aid to providers in highlighting additional opportunities for quality improvement and cost containment. It should not be used in emergency situations.



About this report

- This report includes hospital-specific outcomes for 16 medical conditions and surgical procedures, as defined by ICD-9-CM (International Classification of Diseases, Ninth Revision, Clinical Modification) codes and/or Diagnosis-Related Groups (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 calendar year 2012.
- This report is divided into three regional versions: Western PA, Central and Northeastern PA, and Southeastern PA.
- All Pennsylvania general acute care and most specialty general acute care hospitals are included. Children's hospitals and some specialty hospitals are not reported because they 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 timeframe of the report.



- The hospital names have been shortened in many cases for formatting purposes. Hospital names may be different today than during the time period covered in this report due to mergers and name changes. A list of changes can be found on the PHC4 website at www.phc4.org.

Where does the data come from?

The 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 Medicare fee-for-service payment data was obtained from the Centers for Medicare and Medicaid Services. Medicaid payment data (fee-for-service and managed care) was obtained from the Pennsylvania Department of Public Welfare.

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

PHC4 uses clinical laboratory data, patient characteristics such as age and gender, and billing codes that describe the patient’s medical conditions such as the presence of cancer, diabetes, 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 the report and why is it important?

PHC4's mission is to provide the public with information that will help to improve the quality of health care services while also providing opportunities to restrain costs. The measurement of quality in health care is not an exact science. There may be a number of ways to define quality; however, for the purposes of this report, the following measures are suggested.

- ***Volume of Cases*** – For each hospital, the number of cases for each condition, after exclusions, is reported. This can give a patient or a purchaser an idea of the experience each facility has in treating such patients. Studies have suggested that,

in at least some areas, the volume of cases treated by a physician or hospital can be a factor in the success of the treatment. The number of cases represents separate hospital admissions, not individual patients. A patient admitted several times would be included each time in the number of cases. Outcome data are not reported for hospitals that had fewer than five cases evaluated for a measure; such low volume cannot be considered meaningful and, as such, the outcome data are not displayed. Not Reported (NR) appears in the table when this occurs.

Note: Small or specialty hospitals may report low volume due to the unique patient population they serve or geographic location.

- Risk-Adjusted Mortality** – 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 in a given condition, after accounting for patient risk, with the actual number of deaths. (Please see “Understanding the Symbols” box on this page.) PHC4 has used risk-adjusted mortality statistics as a measure of quality since it began publishing reports in 1989. The mortality analysis includes Do Not Resuscitate (DNR) cases. Since DNR is defined and utilized differently across Pennsylvania hospitals, such records are retained in the analysis to avoid potential biases in mortality ratings.

- Risk-Adjusted Readmissions** – This measure is reported as a statistical rating that represents the number of patients who were readmitted following their initial hospital stay. A readmission is defined as a subsequent acute care hospitalization, for any reason in any Pennsylvania hospital, where the admit date is within 30 days of the discharge date of the

original hospitalization. To determine the risk-adjusted readmission rating, PHC4 compares the number of patients one could reasonably expect to be readmitted, after accounting for patient risk, with the actual number of readmissions. (Please see “Understanding the Symbols” box on this page.) The readmission measure is not reported for conditions or procedures that are likely to result in a high number of planned readmissions. While some re-hospitalizations can be expected, high quality care may lessen the need for subsequent hospitalizations.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital’s actual rate 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.



- ***Case-Mix Adjusted Hospital Charges*** – This report also includes the average hospital charge for each of the 16 conditions and procedures. The average charge reported is for 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 was adjusted for the mix of cases that was 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.

- ***Medicare and Medicaid Payments*** – In a separate section, payments are displayed separately for Medicare fee-for-service, Medicaid fee-for-service, and Medicaid managed care for the 16 medical conditions/surgical procedures included in this report. This information is also broken down by the MS-DRGs (Medicare Severity – Diagnosis-Related Group) associated with each condition/procedure. The most recent payment data available to PHC4 was for calendar year 2011.

How to use this report

- ***Patients/Consumers*** can use this report as an aid in making decisions about where to seek treatment for the conditions detailed in this report. As with any health care decision, PHC4 urges the reader to use this report in conjunction with a physician or other health care provider when making a health care decision.
- ***Group Benefits Purchasers/Insurers*** can use this report as part of a process in determining where employees, subscribers, members, or participants should go for their health care.
- ***Health Care Providers*** can use this report as an aid in identifying opportunities for quality improvement and cost containment.
- ***Policymakers/Public Officials*** can use this report to enhance their understanding of health care issues, to ask provocative questions, to raise public awareness of important issues and to help constituents identify quality health care options.
- All of the previously mentioned groups can use this information to raise important questions about why differences exist in the quality and efficiency of care.

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






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 page 9.

-  Rate significantly lower than expected.
 -  Rate not significantly different than expected.
 -  Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Abnormal Heartbeat

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	44,083	0.9%	14.8%	\$38,850
Western Pennsylvania	14,541	0.9%	14.6%	\$24,201
ACMH	130			\$17,908
Allegheny General	639			\$28,932
Allegheny Valley	290			\$19,540
Altoona Regional	560			\$19,206
Bradford Regional	49			\$12,912
Brookville	27			\$13,113
Butler Memorial	500			\$24,380
Canonsburg General	77			\$24,341
Charles Cole Memorial	39			\$12,580
Clarion	73			\$10,579
Clearfield	71			\$14,694
Conemaugh Valley Memorial	671			\$16,624
Corry Memorial	4	NR	NR	NR
DuBois Regional	217			\$13,505
Elk Regional	61			\$15,575
Ellwood City	68			\$11,633
Excelsa Hlth Westmoreland	630			\$22,020
Forbes Regional	470			\$19,961
Frick	135			\$16,401
Grove City	75			\$18,865
Heritage Valley Beaver	539			\$14,402
Heritage Valley Sewickley	221			\$14,381
Highlands	46			\$19,264
Indiana Regional	228			\$17,473
Jameson Memorial	189			\$15,360
Jefferson Regional	640			\$18,874
Kane Community	14			\$13,535
Latrobe Area	246			\$16,820

Abnormal Heartbeat

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	60	⊙	⊙	\$34,172
Meadville	167	⊙	⊙	\$18,436
Meyersdale Community	11	⊙	⊙	\$15,905
Millcreek Community	48	⊙	⊙	\$21,085
Miners	6	⊙	⊙	\$20,709
Monongahela Valley	187	⊙	⊙	\$20,915
Nason	45	⊙	⊙	\$11,877
Ohio Valley General	101	⊙	⊙	\$28,550
Punxsutawney Area	35	⊙	⊙	\$11,155
Saint Vincent Health	533	⊙	⊙	\$35,587
Sharon Regional	319	⊙	⊙	\$20,824
Somerset	92	⊙	⊙	\$18,904
Southwest Regional MC	75	⊙	⊙	\$16,358
St Clair Memorial	623	●	⊙	\$21,201
Titusville Area	28	⊙	⊙	\$9,189
Tyrone	22	⊙	⊙	\$13,560
Uniontown	283	⊙	⊙	\$11,081
UPMC Bedford	51	⊙	⊙	\$13,318
UPMC Hamot	650	⊙	⊙	\$34,023
UPMC Horizon	211	⊙	⊙	\$19,521
UPMC McKeesport	223	⊙	⊙	\$24,920
UPMC Mercy	475	⊙	⊙	\$28,593
UPMC Northwest	146	⊙	⊙	\$17,112
UPMC Passavant	709	⊙	⊙	\$29,600
UPMC Presby Shadyside	1,429	⊙	⊙	\$43,401
UPMC St Margaret	411	⊙	⊙	\$27,481
Warren General	54	⊙	⊙	\$20,998
Washington	482	⊙	⊙	\$16,219
Western Pennsylvania	35	⊙	⊙	\$26,279
Windber	40	⊙	⊙	\$13,946

Chest Pain

Pain in the chest that is not related to the heart (non-cardiac chest pain). Common causes for this type of chest pain include gastric reflux ("heart-burn"), 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 page 9.

- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Chest Pain				
Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	13,747	0.1%	13.3%	\$20,464
Western Pennsylvania	2,724	0.3%	12.0%	\$12,262
ACMH	11	○	○	\$6,556
Allegheny General	63	○	○	\$16,655
Allegheny Valley	39	○	○	\$14,350
Altoona Regional	102	○	○	\$10,954
Bradford Regional	4	NR	NR	NR
Brookville	0	NR	NR	NR
Butler Memorial	38	○	○	\$15,041
Canonsburg General	9	○	○	\$16,063
Charles Cole Memorial	5	○	○	\$9,496
Clarion	3	NR	NR	NR
Clearfield	4	NR	NR	NR
Conemaugh Valley Memorial	236	○	○	\$9,241
Corry Memorial	3	NR	NR	NR
DuBois Regional	17	○	○	\$8,534
Elk Regional	9	○	○	\$6,558
Ellwood City	10	○	○	\$9,831
Excelsa Hlth Westmoreland	216	○	○	\$10,836
Forbes Regional	61	○	○	\$14,701
Frick	34	○	○	\$9,746
Grove City	4	NR	NR	NR
Heritage Valley Beaver	66	○	○	\$7,649
Heritage Valley Sewickley	45	○	○	\$7,431
Highlands	12	○	○	\$11,018
Indiana Regional	39	○	○	\$11,010
Jameson Memorial	76	○	○	\$8,600
Jefferson Regional	87	○	○	\$11,763
Kane Community	1	NR	NR	NR
Latrobe Area	47	○	○	\$9,886

Chest Pain

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	16	⊙	⊙	\$19,693
Meadville	6	⊙	⊙	\$12,870
Meyersdale Community	1	NR	NR	NR
Millcreek Community	17	⊙	⊙	\$10,667
Miners	4	NR	NR	NR
Monongahela Valley	39	⊙	⊙	\$12,288
Nason	13	●	⊙	\$5,805
Ohio Valley General	14	⊙	⊙	\$16,552
Punxsutawney Area	14	⊙	⊙	\$5,445
Saint Vincent Health	35	⊙	⊙	\$19,182
Sharon Regional	192	⊙	⊙	\$10,555
Somerset	14	⊙	⊙	\$12,575
Southwest Regional MC	8	⊙	⊙	\$10,256
St Clair Memorial	48	⊙	⊙	\$13,100
Titusville Area	6	⊙	⊙	\$3,093
Tyrone	2	NR	NR	NR
Uniontown	120	⊙	⊙	\$5,876
UPMC Bedford	7	⊙	⊙	\$7,931
UPMC Hamot	34	⊙	⊙	\$18,845
UPMC Horizon	29	⊙	⊙	\$10,386
UPMC McKeesport	90	⊙	⊙	\$14,249
UPMC Mercy	112	⊙	⊙	\$16,791
UPMC Northwest	46	⊙	⊙	\$7,841
UPMC Passavant	66	⊙	⊙	\$15,194
UPMC Presby Shadyside	245	⊙	⊙	\$23,198
UPMC St Margaret	81	⊙	⊙	\$15,978
Warren General	8	⊙	⊙	\$13,637
Washington	191	●	⊙	\$8,325
Western Pennsylvania	11	⊙	⊙	\$14,948
Windber	3	NR	NR	NR

Chronic Obstructive Pulmonary Disease (COPD)


Chronic damage, inflammation, and narrowing of the airways in the lungs. Common COPD diseases include emphysema and chronic obstructive bronchitis.

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 page 9.

- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	31,028	0.7%	21.6%	\$26,969
Western Pennsylvania	11,583	0.7%	20.3%	\$15,773
ACMH	111	◉	◉	\$11,648
Allegheny General 	197	●	◉	\$22,608
Allegheny Valley	209	◉	◉	\$13,372
Altoona Regional	358	◉	◉	\$14,812
Bradford Regional	91	◉	◉	\$10,411
Brookville	48	◉	◉	\$9,903
Butler Memorial	352	◉	◉	\$15,633
Canonsburg General	158	◉	◉	\$16,382
Charles Cole Memorial	79	◉	◉	\$9,101
Clarion	79	◉	◉	\$9,648
Clearfield	94	◉	◉	\$11,747
Conemaugh Valley Memorial	447	◉	◉	\$12,175
Corry Memorial	58	◉	◉	\$12,992
DuBois Regional	139	◉	◉	\$10,231
Elk Regional	143	◉	◉	\$10,032
Ellwood City	78	◉	◉	\$7,328
Excelsa Hlth Westmoreland	600	◉	●	\$15,809
Forbes Regional	292	◉	◉	\$16,324
Frick	209	◉	◉	\$12,725
Grove City	103	◉	◉	\$17,711
Heritage Valley Beaver	392	◉	◉	\$10,888
Heritage Valley Sewickley	192	◉	◉	\$11,804
Highlands	114	◉	◉	\$12,967
Indiana Regional	134	◉	◉	\$9,950
Jameson Memorial	390	◉	◉	\$11,127
Jefferson Regional	664	◉	●	\$16,170
Kane Community	53	◉	◉	\$11,416
Latrobe Area	294	◉	●	\$12,487

 This hospital has submitted comments specific to this condition. These comments are posted on PHC4's website at <http://www.phc4.org/reports/hpr/12/comments.htm>.

Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	81	⊙	⊙	\$29,067
Meadville	186	⊙	⊙	\$15,616
Meyersdale Community	20	⊙	⊙	\$9,284
Millcreek Community	81	⊙	⊙	\$14,222
Miners	44	⊙	⊙	\$12,036
Monongahela Valley	250	⊙	⊙	\$14,315
Nason	29	⊙	⊙	\$8,480
Ohio Valley General	132	⊙	⊙	\$15,528
Punxsutawney Area	75	⊙	⊙	\$9,696
Saint Vincent Health	169	⊙	⊙	\$21,926
Sharon Regional	173	⊙	⊙	\$13,834
Somerset	77	⊙	⊙	\$15,602
Southwest Regional MC	144	⊙	⊙	\$10,309
St Clair Memorial	325	⊙	⊙	\$14,541
Titusville Area	52	⊙	⊙	\$6,022
Tyrone	28	⊙	⊙	\$10,484
Uniontown	331	⊙	⊙	\$9,699
UPMC Bedford	38	⊙	⊙	\$9,965
UPMC Hamot	251	⊙	⊙	\$25,537
UPMC Horizon	203	⊙	⊙	\$15,148
UPMC McKeesport	326	⊙	⊙	\$18,515
UPMC Mercy	332	⊙	⊙	\$22,416
UPMC Northwest	295	⊙	⊙	\$13,870
UPMC Passavant	419	⊙	⊙	\$24,940
UPMC Presby Shadyside	510	⊙	⊙	\$33,260
UPMC St Margaret	333	⊙	⊙	\$23,412
Warren General	133	⊙	⊙	\$15,559
Washington	339	⊙	⊙	\$11,293
Western Pennsylvania	55	⊙	⊙	\$18,488
Windber	33	⊙	⊙	\$12,589

Colorectal Procedures

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

Understanding the Symbols

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- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Colorectal Procedures			
Hospital	Cases	Mortality	Average Hospital Charge
TOTAL: Statewide	13,404	2.1%	\$78,579
Western Pennsylvania	4,478	2.2%	\$60,398
ACMH	45	◉	\$31,866
Allegheny General	144	◉	\$59,516
Allegheny Valley	31	◉	\$48,818
Altoona Regional	205	◉	\$41,028
Bradford Regional	26	◉	\$25,208
Brookville	11	◉	\$27,968
Butler Memorial	87	◉	\$60,630
Canonsburg General	45	◉	\$34,539
Charles Cole Memorial	12	◉	\$34,310
Clarion	10	◉	\$37,170
Clearfield	44	◉	\$26,375
Conemaugh Valley Memorial	156	◉	\$36,951
Corry Memorial	6	◉	\$34,487
DuBois Regional	68	◉	\$34,073
Elk Regional	15	◉	\$28,424
Ellwood City	16	◉	\$32,131
Excelsa Hlth Westmoreland	120	◉	\$37,653
Forbes Regional	127	◉	\$44,347
Frick	27	◉	\$31,917
Grove City	11	◉	\$30,527
Heritage Valley Beaver	145	◉	\$32,070
Heritage Valley Sewickley	85	◉	\$32,900
Highlands	26	◉	\$37,528
Indiana Regional	48	◉	\$37,222
Jameson Memorial	63	◉	\$29,688
Jefferson Regional	248	◉	\$37,559
Kane Community	3	NR	NR
Latrobe Area	79	◉	\$39,465

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

Colorectal Procedures

Hospital	Cases	Mortality	Average Hospital Charge
Magee Womens/UPMC	38	⊙	\$67,707
Meadville	58	⊙	\$53,633
Meyersdale Community	0	NR	NR
Millcreek Community	10	⊙	\$44,842
Miners	7	⊙	\$25,037
Monongahela Valley	91	⊙	\$42,661
Nason	36	⊙	\$23,285
Ohio Valley General	30	⊙	\$45,610
Punxsutawney Area	20	⊙	\$24,365
Saint Vincent Health	128	⊙	\$84,231
Sharon Regional	48	⊙	\$41,932
Somerset	38	⊙	\$39,428
Southwest Regional MC	19	⊙	\$35,445
St Clair Memorial	189	⊙	\$55,801
Titusville Area	5	⊙	NR
Tyrone	3	NR	NR
Uniontown	100	⊙	\$22,335
UPMC Bedford	9	⊙	\$38,086
UPMC Hamot	146	⊙	\$104,420
UPMC Horizon	59	⊙	\$58,834
UPMC McKeesport	36	⊙	\$52,895
UPMC Mercy	96	⊙	\$84,771
UPMC Northwest	37	⊙	\$30,958
UPMC Passavant	414	⊙	\$70,081
UPMC Presby Shadyside	622	⊙	\$125,359
UPMC St Margaret	139	⊙	\$77,194
Warren General	17	⊙	\$43,920
Washington	101	⊙	\$28,318
Western Pennsylvania	8	⊙	\$92,165
Windber	58	⊙	\$36,190




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

Congestive Heart Failure (CHF)

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

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

NR Not reported. Fewer than five cases evaluated.

Congestive Heart Failure (CHF)

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	42,731	2.8%	24.5%	\$33,169
Western Pennsylvania	14,584	3.0%	24.0%	\$21,389
ACMH	93			\$12,577
Allegheny General	557			\$26,755
Allegheny Valley	392			\$19,719
Altoona Regional 	541			\$17,159
Bradford Regional	68			\$11,608
Brookville	36			\$9,928
Butler Memorial	293			\$20,734
Canonsburg General	148			\$21,450
Charles Cole Memorial	45			\$13,284
Clarion	61			\$8,747
Clearfield	115			\$12,857
Conemaugh Valley Memorial	669			\$15,496
Corry Memorial	47			\$15,763
DuBois Regional	238			\$12,099
Elk Regional	124			\$12,065
Ellwood City	125			\$10,618
Excelsa Hlth Westmoreland	645			\$19,070
Forbes Regional	447			\$19,422
Frick	150			\$16,182
Grove City	72			\$20,190
Heritage Valley Beaver	611			\$13,771
Heritage Valley Sewickley	213			\$14,780
Highlands	71			\$16,165
Indiana Regional	218			\$13,817
Jameson Memorial	291			\$12,774
Jefferson Regional	526			\$19,192
Kane Community	70			\$17,236
Latrobe Area	249			\$19,583

 This hospital has submitted comments specific to this condition. These comments are posted on PHC4's website at <http://www.phc4.org/reports/hpr/12/comments.htm>.

Congestive Heart Failure (CHF)

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	70	⊙	⊙	\$34,814
Meadville	162	⊙	⊙	\$18,312
Meyersdale Community	20	⊙	⊙	\$11,567
Millcreek Community	99	⊙	⊙	\$17,926
Miners	49	⊙	●	\$13,162
Monongahela Valley	285	⊙	⊙	\$18,793
Nason	94	⊙	⊙	\$10,862
Ohio Valley General	118	⊙	⊙	\$26,826
Punxsutawney Area	78	⊙	⊙	\$11,276
Saint Vincent Health	422	⊙	⊙	\$29,533
Sharon Regional	201	●	⊙	\$18,222
Somerset	128	⊙	⊙	\$18,347
Southwest Regional MC	120	⊙	⊙	\$13,141
St Clair Memorial	588	⊙	⊙	\$18,075
Titusville Area	45	⊙	⊙	\$8,581
Tyrone	50	⊙	⊙	\$12,778
Uniontown	369	●	⊙	\$11,459
UPMC Bedford	49	⊙	⊙	\$9,520
UPMC Hamot	422	⊙	⊙	\$37,524
UPMC Horizon	229	⊙	⊙	\$18,265
UPMC McKeesport	337	⊙	⊙	\$22,676
UPMC Mercy	357	⊙	⊙	\$26,447
UPMC Northwest	159	●	⊙	\$16,171
UPMC Passavant	544	⊙	⊙	\$26,804
UPMC Presby Shadyside	1,159	⊙	⊙	\$41,424
UPMC St Margaret	512	⊙	⊙	\$28,392
Warren General	114	⊙	⊙	\$17,335
Washington	483	⊙	⊙	\$13,506
Western Pennsylvania	63	⊙	⊙	\$28,309
Windber	83	⊙	⊙	\$14,000

Diabetes – Medical Management

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

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 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Diabetes - Medical Management

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	16,662	0.6%	21.0%	\$26,649
Western Pennsylvania	4,799	0.5%	18.9%	\$15,446
ACMH	50	○	○	\$9,985
Allegheny General	210	○	○	\$20,079
Allegheny Valley	106	○	○	\$13,061
Altoona Regional	162	○	○	\$13,012
Bradford Regional	23	○	○	\$8,791
Brookville	6	○	○	\$6,785
Butler Memorial	100	○	○	\$14,940
Canonsburg General	45	○	○	\$12,166
Charles Cole Memorial	17	○	○	\$9,104
Clarion	45	○	○	\$6,879
Clearfield	24	○	○	\$9,465
Conemaugh Valley Memorial	275	○	○	\$11,842
Corry Memorial	4	NR	NR	NR
DuBois Regional	79	○	○	\$11,642
Elk Regional	51	○	○	\$7,294
Ellwood City	10	○	○	\$7,764
Excelsior Health Westmoreland	203	○	○	\$13,722
Forbes Regional	165	○	○	\$12,815
Frick	56	○	○	\$10,672
Grove City	24	○	○	\$13,376
Heritage Valley Beaver	130	○	○	\$9,732
Heritage Valley Sewickley	94	○	○	\$11,859
Highlands	29	○	○	\$9,221
Indiana Regional	76	○	○	\$10,376
Jameson Memorial	91	○	○	\$9,759
Jefferson Regional	149	○	○	\$12,178
Kane Community	14	○	○	\$10,952
Latrobe Area	73	○	○	\$10,421

Diabetes - Medical Management

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	60	⊙	⊙	\$23,979
Meadville	41	⊙	⊙	\$14,086
Meyersdale Community	5	⊙	NR	\$6,087
Millcreek Community	14	⊙	⊙	\$13,654
Miners	7	⊙	⊙	\$14,441
Monongahela Valley	92	⊙	⊙	\$13,034
Nason	12	⊙	⊙	\$7,094
Ohio Valley General	51	⊙	⊙	\$12,379
Punxsutawney Area	22	⊙	⊙	\$7,152
Saint Vincent Health	154	⊙	⊙	\$22,763
Sharon Regional	90	⊙	⊙	\$11,773
Somerset	21	⊙	⊙	\$13,709
Southwest Regional MC	30	⊙	⊙	\$9,798
St Clair Memorial	116	⊙	⊙	\$12,228
Titusville Area	21	⊙	⊙	\$4,734
Tyrone	8	⊙	⊙	\$9,852
Uniontown	143	⊙	⊙	\$8,753
UPMC Bedford	18	⊙	⊙	\$9,489
UPMC Hamot	125	⊙	⊙	\$25,338
UPMC Horizon	80	⊙	⊙	\$16,249
UPMC McKeesport	142	⊙	⊙	\$17,183
UPMC Mercy	189	⊙	⊙	\$18,170
UPMC Northwest	71	⊙	⊙	\$10,972
UPMC Passavant	121	⊙	⊙	\$19,505
UPMC Presby Shadyside	435	⊙	⊙	\$31,436
UPMC St Margaret	138	⊙	⊙	\$18,927
Warren General	27	⊙	⊙	\$15,005
Washington	131	⊙	⊙	\$9,973
Western Pennsylvania	64	⊙	⊙	\$16,418
Windber	27	⊙	⊙	\$10,333

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).

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- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Gallbladder Removal - Laparoscopic

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	12,527	0.3%	6.9%	\$42,427
Western Pennsylvania	4,149	0.2%	7.3%	\$29,001
ACMH	113	◉	◉	\$16,463
Allegheny General	84	◉	◉	\$36,780
Allegheny Valley	86	◉	◉	\$28,318
Altoona Regional	209	◉	◉	\$26,562
Bradford Regional	2	NR	NR	NR
Brookville	3	NR	NR	NR
Butler Memorial	149	◉	●	\$26,889
Canonsburg General	108	◉	●	\$22,541
Charles Cole Memorial	14	◉	◉	\$21,017
Clarion	17	◉	◉	\$18,932
Clearfield	18	◉	◉	\$23,076
Conemaugh Valley Memorial	111	◉	◉	\$21,453
Corry Memorial	7	◉	NR	\$11,250
DuBois Regional	25	◉	◉	\$25,374
Elk Regional	24	◉	◉	\$22,415
Ellwood City	19	◉	◉	\$12,759
Excelsa Hlth Westmoreland	144	◉	◉	\$21,243
Forbes Regional	123	◉	◉	\$30,563
Frick	26	◉	◉	\$20,694
Grove City	7	◉	◉	\$21,671
Heritage Valley Beaver	175	◉	◉	\$16,019
Heritage Valley Sewickley	125	◉	◉	\$15,358
Highlands	53	◉	◉	\$18,796
Indiana Regional	65	◉	◉	\$25,345
Jameson Memorial	97	◉	●	\$19,493
Jefferson Regional	216	◉	◉	\$22,829
Kane Community	2	NR	NR	NR
Latrobe Area	45	◉	◉	\$20,758

Gallbladder Removal - Laparoscopic

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	20	⊙	⊙	\$41,953
Meadville	28	⊙	⊙	\$27,853
Meyersdale Community	0	NR	NR	NR
Millcreek Community	17	⊙	⊙	\$21,519
Miners	7	⊙	⊙	\$19,749
Monongahela Valley	95	⊙	⊙	\$20,981
Nason	32	⊙	⊙	\$11,713
Ohio Valley General	36	⊙	⊙	\$26,696
Punxsutawney Area	14	⊙	⊙	\$14,806
Saint Vincent Health	136	⊙	⊙	\$43,904
Sharon Regional	39	⊙	⊙	\$28,250
Somerset	40	⊙	⊙	\$23,355
Southwest Regional MC	15	⊙	⊙	\$21,666
St Clair Memorial	202	⊙	⊙	\$29,264
Titusville Area	10	⊙	⊙	\$10,248
Tyrone	3	NR	NR	NR
Uniontown	143	⊙	⊙	\$12,486
UPMC Bedford	9	⊙	⊙	\$16,702
UPMC Hamot	131	⊙	⊙	\$53,369
UPMC Horizon	77	⊙	⊙	\$32,514
UPMC McKeesport	74	⊙	⊙	\$34,294
UPMC Mercy	103	⊙	⊙	\$40,357
UPMC Northwest	41	⊙	⊙	\$17,901
UPMC Passavant	199	⊙	⊙	\$40,197
UPMC Presby Shadyside	243	⊙	⊙	\$58,550
UPMC St Margaret	177	⊙	⊙	\$43,031
Warren General	9	⊙	⊙	\$30,263
Washington	114	⊙	⊙	\$19,569
Western Pennsylvania	17	⊙	⊙	\$37,696
Windber	30	⊙	⊙	\$20,125

Gallbladder Removal – Open

Removal of the gallbladder using one large incision rather than several small incisions as is used in laparoscopic gallbladder removal. This type of open procedure is sometimes referred to as “traditional” gallbladder removal. Common reasons for open gallbladder removal include cholelithiasis (stones in the gallbladder), cholecystitis (inflammation of the gallbladder), and cancer.

Understanding the Symbols

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- Rate significantly lower than expected.
 - ◉ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Gallbladder Removal - Open

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	1,823	0.6%	10.4%	\$66,455
Western Pennsylvania	563	0.7%	9.1%	\$47,448
ACMH	5	◉	◉	NR
Allegheny General	32	◉	◉	\$49,433
Allegheny Valley	5	◉	◉	\$36,558
Altoona Regional	20	◉	◉	\$24,692
Bradford Regional	0	NR	NR	NR
Brookville	3	NR	NR	NR
Butler Memorial	2	NR	NR	NR
Canonsburg General	7	◉	◉	\$28,387
Charles Cole Memorial	2	NR	NR	NR
Clarion	9	◉	◉	\$19,097
Clearfield	7	◉	◉	\$28,591
Conemaugh Valley Memorial	19	◉	◉	\$20,674
Corry Memorial	4	NR	NR	NR
DuBois Regional	2	NR	NR	NR
Elk Regional	5	◉	◉	\$22,770
Ellwood City	5	◉	◉	\$19,430
Excelsa Hlth Westmoreland	24	◉	◉	\$36,915
Forbes Regional	10	◉	◉	\$30,350
Frick	1	NR	NR	NR
Grove City	2	NR	NR	NR
Heritage Valley Beaver	21	◉	◉	\$25,513
Heritage Valley Sewickley	2	NR	NR	NR
Highlands	4	NR	NR	NR
Indiana Regional	2	NR	NR	NR
Jameson Memorial	8	◉	◉	\$26,545
Jefferson Regional	27	◉	◉	\$32,570
Kane Community	0	NR	NR	NR
Latrobe Area	1	NR	NR	NR

Gallbladder Removal - Open

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	0	NR	NR	NR
Meadville	14	⊙	⊙	\$38,747
Meyersdale Community	0	NR	NR	NR
Millcreek Community	1	NR	NR	NR
Miners	0	NR	NR	NR
Monongahela Valley	20	⊙	⊙	\$27,730
Nason	5	⊙	⊙	\$11,403
Ohio Valley General	5	⊙	⊙	\$50,589
Punxsutawney Area	0	NR	NR	NR
Saint Vincent Health	34	⊙	⊙	\$64,083
Sharon Regional	12	⊙	⊙	\$42,229
Somerset	3	NR	NR	NR
Southwest Regional MC	4	NR	NR	NR
St Clair Memorial	11	⊙	⊙	\$38,389
Titusville Area	4	NR	NR	NR
Tyrone	0	NR	NR	NR
Uniontown	5	⊙	⊙	\$14,688
UPMC Bedford	1	NR	NR	NR
UPMC Hamot	42	⊙	⊙	\$64,379
UPMC Horizon	8	⊙	⊙	\$57,994
UPMC McKeesport	21	⊙	⊙	\$49,827
UPMC Mercy	15	⊙	⊙	\$54,509
UPMC Northwest	11	⊙	⊙	\$24,075
UPMC Passavant	10	⊙	⊙	\$57,832
UPMC Presby Shadyside	61	⊙	⊙	\$102,855
UPMC St Margaret	13	⊙	⊙	\$72,568
Warren General	2	NR	NR	NR
Washington	20	⊙	⊙	\$28,128
Western Pennsylvania	2	NR	NR	NR
Windber	6	⊙	⊙	NR

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 page 9.

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

NR Not reported. Fewer than five cases evaluated.

Heart Attack - Medical Management

Hospital	Cases	Transfer to Acute Care %	Mortality	Average Hospital Charge
TOTAL: Statewide	11,266	17.6	8.8%	\$38,227
Western Pennsylvania	3,955	18.8	9.7%	\$26,833
ACMH*	42	33.3	◉	\$15,590
Allegheny General*	190	1.1	◉	\$36,991
Allegheny Valley	139	36.9	◉	\$22,150
Altoona Regional*	234	4.9	◉	\$24,108
Bradford Regional	24	34.6	◉	\$12,493
Brookville	16	58.3	◉	\$8,146
Butler Memorial*	93	2.2	○	\$30,650
Canonsburg General	16	59.0	◉	\$15,140
Charles Cole Memorial	10	50.0	◉	\$11,045
Clarion	17	37.5	◉	\$7,613
Clearfield	7	64.7	◉	\$9,346
Conemaugh Valley Memorial*	259	4.8	◉	\$19,061
Corry Memorial	6	25.0	◉	\$12,467
DuBois Regional*	73	16.7	◉	\$18,324
Elk Regional	12	43.8	◉	\$17,267
Ellwood City	4	NR	NR	NR
Excelsa Hlth Westmoreland*	205	14.6	◉	\$24,500
Forbes Regional*	78	4.0	◉	\$26,932
Frick	33	15.8	◉	\$15,832
Grove City	5	0.0	◉	\$23,451
Heritage Valley Beaver*	127	4.1	◉	\$14,594
Heritage Valley Sewickley	46	38.5	◉	\$15,213
Highlands	4	NR	NR	NR
Indiana Regional	71	29.2	◉	\$14,953
Jameson Memorial*	58	36.7	◉	\$18,175
Jefferson Regional*	77	2.8	◉	\$26,022
Kane Community	7	60.0	◉	\$24,212
Latrobe Area	69	32.3	◉	\$15,584

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

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

Heart Attack - Medical Management

Hospital	Cases	Transfer to Acute Care %	Mortality	Average Hospital Charge
Magee Womens/UPMC	9	38.5	⊙	\$48,390
Meadville*	21	51.4	⊙	\$18,736
Meyersdale Community	5	20.0	⊙	\$10,559
Millcreek Community	6	62.5	⊙	\$27,258
Miners	13	7.7	⊙	\$18,043
Monongahela Valley*	128	23.6	⊙	\$22,997
Nason	5	58.3	⊙	\$17,026
Ohio Valley General	13	44.4	●	\$19,979
Punxsutawney Area	27	44.4	⊙	\$11,153
Saint Vincent Health*	130	0.8	⊙	\$43,226
Sharon Regional*	64	10.0	⊙	\$24,039
Somerset*	38	42.2	⊙	\$23,936
Southwest Regional MC	8	72.0	⊙	\$14,652
St Clair Memorial*	142	0.8	⊙	\$21,515
Titusville Area	7	41.7	⊙	\$8,276
Tyrone	19	20.8	⊙	\$11,142
Uniontown*	80	39.5	●	\$13,811
UPMC Bedford	11	65.0	⊙	\$13,392
UPMC Hamot*	220	1.0	⊙	\$46,463
UPMC Horizon	39	46.9	⊙	\$18,528
UPMC McKeesport*	115	20.9	⊙	\$32,594
UPMC Mercy*	134	1.7	⊙	\$31,916
UPMC Northwest	27	54.5	⊙	\$17,529
UPMC Passavant*	184	1.1	⊙	\$29,536
UPMC Presby Shadyside*	305	1.4	⊙	\$53,055
UPMC St Margaret	89	42.6	⊙	\$29,808
Warren General	10	33.3	⊙	\$18,811
Washington*	150	4.1	⊙	\$16,313
Western Pennsylvania	9	65.4	⊙	\$26,111
Windber	16	45.8	⊙	\$16,495

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

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

Hypotension and Fainting

Hypotension is an abnormally low blood pressure with effects ranging from dizziness to fainting. Dehydration is an example of a condition that can cause hypotension. Fainting (syncope) is a temporary loss of consciousness. Syncope may also be referred to as "passing out" or "blacking out."

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 page 9.

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

NR Not reported. Fewer than five cases evaluated.

Hypotension and Fainting

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	14,478	0.3%	11.8%	\$23,243
Western Pennsylvania	4,067	0.3%	11.6%	\$14,240
ACMH	25	●	○	\$8,716
Allegheny General	143	○	○	\$19,232
Allegheny Valley	122	○	○	\$15,244
Altoona Regional	115	○	○	\$15,555
Bradford Regional	11	○	○	\$7,342
Brookville	5	○	○	\$8,488
Butler Memorial	89	○	○	\$15,312
Canonsburg General	36	○	○	\$13,791
Charles Cole Memorial	8	○	○	\$4,895
Clarion	3	NR	NR	NR
Clearfield	13	○	○	\$9,774
Conemaugh Valley Memorial	237	○	○	\$11,139
Corry Memorial	4	NR	NR	NR
DuBois Regional	12	○	○	\$9,459
Elk Regional	22	○	○	\$10,004
Ellwood City	22	○	○	\$7,744
Excelsior Health Westmoreland	247	○	○	\$13,105
Forbes Regional	160	○	○	\$13,307
Frick	36	○	○	\$12,670
Grove City	15	○	○	\$12,866
Heritage Valley Beaver	114	○	○	\$8,845
Heritage Valley Sewickley	79	○	○	\$8,331
Highlands	11	○	○	\$8,868
Indiana Regional	64	○	○	\$10,359
Jameson Memorial	81	○	○	\$10,883
Jefferson Regional	213	○	○	\$13,092
Kane Community	3	NR	NR	NR
Latrobe Area	79	○	○	\$10,162

Hypotension and Fainting




Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	30	⊙	⊙	\$17,884
Meadville	22	⊙	⊙	\$12,298
Meyersdale Community	3	NR	NR	NR
Millcreek Community	30	⊙	⊙	\$10,632
Miners	2	NR	NR	NR
Monongahela Valley	71	⊙	⊙	\$14,615
Nason	11	⊙	⊙	\$6,093
Ohio Valley General	39	⊙	⊙	\$14,767
Punxsutawney Area	23	⊙	⊙	\$5,648
Saint Vincent Health	73	⊙	⊙	\$23,943
Sharon Regional	135	⊙	⊙	\$11,661
Somerset	27	⊙	⊙	\$15,254
Southwest Regional MC	15	⊙	⊙	\$9,985
St Clair Memorial	130	⊙	⊙	\$10,967
Titusville Area	13	⊙	⊙	\$6,162
Tyrone	7	●	⊙	\$9,484
Uniontown	82	⊙	⊙	\$8,053
UPMC Bedford	8	⊙	⊙	\$7,095
UPMC Hamot	63	⊙	⊙	\$22,399
UPMC Horizon	52	⊙	⊙	\$10,416
UPMC McKeesport	141	⊙	⊙	\$12,543
UPMC Mercy	205	⊙	⊙	\$18,446
UPMC Northwest	72	⊙	⊙	\$9,195
UPMC Passavant	149	⊙	⊙	\$15,486
UPMC Presby Shadyside	352	⊙	⊙	\$26,538
UPMC St Margaret	154	⊙	⊙	\$17,895
Warren General	18	⊙	⊙	\$14,318
Washington	117	⊙	⊙	\$8,874
Western Pennsylvania	18	⊙	⊙	\$22,992
Windber	16	⊙	⊙	\$11,964

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 page 9.

-  Rate significantly lower than expected.
 -  Rate not significantly different than expected.
 -  Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Kidney and Urinary Tract Infections

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	23,799	0.6%	16.2%	\$23,661
Western Pennsylvania	8,047	0.8%	16.7%	\$14,302
ACMH	114			\$9,706
Allegheny General	174			\$19,731
Allegheny Valley	151			\$11,264
Altoona Regional 	222			\$14,285
Bradford Regional	38			\$7,485
Brookville	67			\$9,080
Butler Memorial	151			\$15,341
Canonsburg General	62			\$10,758
Charles Cole Memorial	52			\$6,788
Clarion	41			\$6,175
Clearfield	59			\$7,837
Conemaugh Valley Memorial	291			\$11,992
Corry Memorial	43			\$9,878
DuBois Regional	38			\$9,278
Elk Regional	90			\$8,255
Ellwood City	62			\$7,984
Excelsa Hlth Westmoreland	357			\$12,507
Forbes Regional	352			\$13,292
Frick	80			\$11,160
Grove City	70			\$12,902
Heritage Valley Beaver	280			\$9,752
Heritage Valley Sewickley	142			\$9,772
Highlands	51			\$11,488
Indiana Regional	176			\$9,605
Jameson Memorial	160			\$9,332
Jefferson Regional	368			\$12,610
Kane Community	15			\$10,196
Latrobe Area	133			\$11,144

 This hospital has submitted comments specific to this condition. These comments are posted on PHC4's website at <http://www.phc4.org/reports/hpr/12/comments.htm>.

Kidney and Urinary Tract Infections

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	133	⊙	⊙	\$22,340
Meadville	56	⊙	⊙	\$13,721
Meyersdale Community	7	⊙	⊙	\$8,025
Millcreek Community	71	⊙	⊙	\$12,022
Miners	6	⊙	⊙	\$10,585
Monongahela Valley	137	⊙	⊙	\$11,233
Nason	70	⊙	⊙	\$7,234
Ohio Valley General	74	⊙	⊙	\$11,948
Punxsutawney Area	111	⊙	⊙	\$6,987
Saint Vincent Health	74	⊙	⊙	\$20,020
Sharon Regional	98	⊙	⊙	\$10,912
Somerset	65	⊙	⊙	\$12,806
Southwest Regional MC	76	⊙	⊙	\$8,548
St Clair Memorial	370	⊙	⊙	\$14,691
Titusville Area	23	⊙	⊙	\$5,243
Tyrone	38	⊙	⊙	\$9,578
Uniontown	174	●	⊙	\$7,923
UPMC Bedford	86	⊙	⊙	\$8,058
UPMC Hamot	170	⊙	⊙	\$23,057
UPMC Horizon	123	⊙	⊙	\$14,469
UPMC McKeesport	178	⊙	⊙	\$16,309
UPMC Mercy	290	⊙	⊙	\$20,421
UPMC Northwest	180	⊙	⊙	\$10,702
UPMC Passavant	337	⊙	⊙	\$19,307
UPMC Presby Shadyside	597	⊙	●	\$31,034
UPMC St Margaret	331	⊙	⊙	\$20,298
Warren General	59	⊙	⊙	\$12,351
Washington	174	⊙	⊙	\$8,439
Western Pennsylvania	40	⊙	⊙	\$17,430
Windber	17	⊙	⊙	\$9,552

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

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- Rate significantly lower than expected.
 - ⊙ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Kidney Failure - Acute

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	22,594	3.3%	22.4%	\$31,287
Western Pennsylvania	7,949	3.6%	22.4%	\$21,468
ACMH	61	●	⊙	\$15,499
Allegheny General	253	⊙	⊙	\$28,902
Allegheny Valley	210	⊙	⊙	\$15,910
Altoona Regional	302	⊙	⊙	\$18,998
Bradford Regional	51	⊙	⊙	\$8,707
Brookville	16	⊙	⊙	\$9,516
Butler Memorial	266	⊙	⊙	\$20,375
Canonsburg General	49	⊙	⊙	\$16,234
Charles Cole Memorial	31	⊙	⊙	\$9,911
Clarion	32	⊙	⊙	\$10,618
Clearfield	40	⊙	○	\$9,657
Conemaugh Valley Memorial	472	●	●	\$15,959
Corry Memorial	7	⊙	NR	\$12,662
DuBois Regional	121	⊙	⊙	\$14,650
Elk Regional	43	⊙	⊙	\$11,340
Ellwood City	23	⊙	○	\$7,671
Excelsa Hlth Westmoreland	166	⊙	⊙	\$18,300
Forbes Regional	206	⊙	⊙	\$17,439
Frick	64	⊙	⊙	\$16,227
Grove City	19	⊙	⊙	\$19,009
Heritage Valley Beaver	296	⊙	⊙	\$13,592
Heritage Valley Sewickley	62	⊙	⊙	\$16,250
Highlands	24	⊙	⊙	\$21,551
Indiana Regional	165	⊙	⊙	\$13,228
Jameson Memorial	137	⊙	⊙	\$12,821
Jefferson Regional	209	⊙	⊙	\$18,004
Kane Community	23	⊙	⊙	\$12,484
Latrobe Area	148	⊙	⊙	\$14,942

Kidney Failure - Acute

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	73	⊙	⊙	\$29,429
Meadville	125	⊙	⊙	\$20,068
Meyersdale Community	9	⊙	⊙	\$9,921
Millcreek Community	49	⊙	⊙	\$15,391
Miners	9	⊙	⊙	\$17,896
Monongahela Valley	173	⊙	⊙	\$16,062
Nason	6	⊙	⊙	\$10,638
Ohio Valley General	33	⊙	⊙	\$20,620
Punxsutawney Area	43	⊙	⊙	\$10,119
Saint Vincent Health	210	⊙	⊙	\$27,764
Sharon Regional	130	⊙	⊙	\$17,148
Somerset	93	⊙	⊙	\$16,289
Southwest Regional MC	36	⊙	⊙	\$9,183
St Clair Memorial	230	⊙	⊙	\$20,094
Titusville Area	23	⊙	⊙	\$6,744
Tyrone	6	⊙	NR	\$6,942
Uniontown	142	⊙	⊙	\$9,929
UPMC Bedford	13	⊙	⊙	\$14,627
UPMC Hamot	308	⊙	⊙	\$33,310
UPMC Horizon	225	⊙	⊙	\$17,872
UPMC McKeesport	259	⊙	●	\$21,322
UPMC Mercy	239	⊙	⊙	\$29,064
UPMC Northwest	147	⊙	⊙	\$14,338
UPMC Passavant	449	⊙	⊙	\$26,969
UPMC Presby Shadyside	828	⊙	⊙	\$43,055
UPMC St Margaret	243	⊙	⊙	\$26,539
Warren General	14	⊙	⊙	\$14,989
Washington	192	⊙	⊙	\$12,278
Western Pennsylvania	58	⊙	⊙	\$29,596
Windber	46	⊙	⊙	\$14,157


Pneumonia – Aspiration

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

Understanding the Symbols

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- Rate significantly lower than expected.
 - Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Pneumonia - Aspiration				
Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	8,152	6.8%	23.0%	\$41,274
Western Pennsylvania	3,086	7.2%	23.6%	\$27,688
ACMH	43	○	○	\$20,480
Allegheny General	119	○	○	\$34,259
Allegheny Valley	80	○	○	\$21,720
Altoona Regional 	102	●	○	\$23,699
Bradford Regional	11	●	○	\$9,753
Brookville	22	○	○	\$15,046
Butler Memorial	73	○	○	\$21,219
Canonsburg General	20	○	○	\$18,113
Charles Cole Memorial	8	○	○	\$22,487
Clarion	14	○	○	\$10,603
Clearfield	19	○	○	\$16,369
Conemaugh Valley Memorial	109	○	○	\$17,791
Corry Memorial	3	NR	NR	NR
DuBois Regional	20	○	○	\$16,739
Elk Regional	14	○	○	\$15,656
Ellwood City	13	○	○	\$12,511
Excelsa Hlth Westmoreland	132	○	●	\$22,011
Forbes Regional	102	○	○	\$24,516
Frick	59	○	○	\$20,657
Grove City	9	○	○	\$20,333
Heritage Valley Beaver	80	○	○	\$15,840
Heritage Valley Sewickley	26	○	○	\$17,715
Highlands	6	○	○	\$17,797
Indiana Regional	148	●	○	\$14,974
Jameson Memorial	34	○	○	\$18,150
Jefferson Regional	68	○	○	\$24,896
Kane Community	10	○	○	\$21,335
Latrobe Area	85	○	○	\$17,872

 This hospital has submitted comments specific to this condition. These comments are posted on PHC4's website at <http://www.phc4.org/reports/hpr/12/comments.htm>.

Pneumonia - Aspiration

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	16	⊙	⊙	\$40,392
Meadville	70	⊙	⊙	\$26,233
Meyersdale Community	3	NR	NR	NR
Millcreek Community	1	NR	NR	NR
Miners	4	NR	NR	NR
Monongahela Valley	46	⊙	⊙	\$22,273
Nason	4	NR	NR	NR
Ohio Valley General	10	⊙	⊙	\$21,189
Punxsutawney Area	17	⊙	⊙	\$11,030
Saint Vincent Health	26	⊙	⊙	\$32,747
Sharon Regional	63	⊙	⊙	\$20,408
Somerset	20	⊙	⊙	\$25,722
Southwest Regional MC	16	⊙	⊙	\$19,152
St Clair Memorial	137	⊙	⊙	\$20,625
Titusville Area	13	⊙	⊙	\$8,123
Tyrone	6	⊙	⊙	\$22,105
Uniontown	85	●	⊙	\$13,380
UPMC Bedford	14	⊙	⊙	\$15,579
UPMC Hamot	53	⊙	⊙	\$41,259
UPMC Horizon	41	⊙	⊙	\$19,730
UPMC McKeesport	31	⊙	⊙	\$24,939
UPMC Mercy	72	⊙	⊙	\$33,960
UPMC Northwest	107	⊙	⊙	\$23,910
UPMC Passavant	141	⊙	⊙	\$33,031
UPMC Presby Shadyside	357	⊙	⊙	\$60,301
UPMC St Margaret	198	⊙	⊙	\$41,396
Warren General	19	⊙	⊙	\$19,507
Washington	42	⊙	⊙	\$16,010
Western Pennsylvania	18	⊙	⊙	\$41,445
Windber	7	⊙	⊙	\$13,812

Pneumonia – Infectious


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

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 page 9.

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

NR Not reported. Fewer than five cases evaluated.

Pneumonia - Infectious				
Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	36,964	2.5%	16.4%	\$29,766
Western Pennsylvania	13,340	2.7%	16.2%	\$18,981
ACMH	198	●	○	\$14,968
Allegheny General	229	○	●	\$25,900
Allegheny Valley	277	○	○	\$14,705
Altoona Regional	547	○	○	\$17,378
Bradford Regional	148	○	○	\$10,776
Brookville	99	○	○	\$12,814
Butler Memorial	333	○	○	\$20,119
Canonsburg General	126	○	○	\$14,996
Charles Cole Memorial	96	○	○	\$14,570
Clarion	101	○	○	\$10,122
Clearfield	101	○	○	\$12,787
Conemaugh Valley Memorial	495	●	○	\$14,639
Corry Memorial	91	○	○	\$14,272
DuBois Regional	125	○	○	\$11,865
Elk Regional	140	○	○	\$11,051
Ellwood City	98	○	○	\$10,862
Excelsa Hlth Westmoreland	624	○	●	\$19,708
Forbes Regional	304	○	○	\$19,015
Frick	163	○	○	\$17,114
Grove City	100	●	○	\$21,369
Heritage Valley Beaver	334	○	○	\$13,105
Heritage Valley Sewickley	290	○	○	\$12,841
Highlands	84	○	○	\$15,979
Indiana Regional	174	○	○	\$11,298
Jameson Memorial	442	○	●	\$14,913
Jefferson Regional 	504	●	○	\$19,232
Kane Community	73	○	○	\$16,642
Latrobe Area	229	○	○	\$14,213

 This hospital has submitted comments specific to this condition. These comments are posted on PHC4's website at <http://www.phc4.org/reports/hpr/12/comments.htm>.

Pneumonia - Infectious




Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	102	⊙	⊙	\$31,936
Meadville	144	⊙	⊙	\$18,789
Meyersdale Community	29	●	⊙	\$12,496
Millcreek Community	77	⊙	⊙	\$17,001
Miners	85	●	⊙	\$13,700
Monongahela Valley	202	⊙	⊙	\$16,898
Nason	120	⊙	⊙	\$11,132
Ohio Valley General	166	⊙	⊙	\$21,608
Punxsutawney Area	98	⊙	⊙	\$10,774
Saint Vincent Health	190	⊙	⊙	\$24,930
Sharon Regional	221	⊙	⊙	\$14,795
Somerset	87	⊙	⊙	\$15,445
Southwest Regional MC	200	⊙	⊙	\$12,113
St Clair Memorial	637	⊙	⊙	\$18,302
Titusville Area	83	⊙	⊙	\$6,513
Tyrone	75	⊙	⊙	\$12,750
Uniontown	353	●	⊙	\$10,240
UPMC Bedford	102	⊙	⊙	\$10,214
UPMC Hamot	415	⊙	⊙	\$26,813
UPMC Horizon	229	⊙	⊙	\$18,552
UPMC McKeesport	239	⊙	⊙	\$22,593
UPMC Mercy	343	⊙	⊙	\$26,310
UPMC Northwest	240	●	⊙	\$17,274
UPMC Passavant	433	⊙	⊙	\$28,925
UPMC Presby Shadyside	838	⊙	⊙	\$41,029
UPMC St Margaret	397	⊙	⊙	\$27,563
Warren General	94	⊙	⊙	\$16,992
Washington	394	⊙	⊙	\$11,656
Western Pennsylvania	58	⊙	●	\$28,399
Windber	100	⊙	⊙	\$13,467

Septicemia






























An infection in the bloodstream sometimes referred to as blood poisoning. Also includes patients in which septicemia progresses to a severe life-threatening infection known as sepsis. Sepsis occurs when there is system-wide inflammation as the body responds to the severe infection, resulting in further illness and injury.

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 page 9.

-  Rate significantly lower than expected.
 -  Rate not significantly different than expected.
 -  Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Septicemia

Hospital	Cases	Mortality	Average Hospital Charge
TOTAL: Statewide	39,832	13.7%	\$51,257
Western Pennsylvania	12,911	14.8%	\$36,859
ACMH	90		\$24,429
Allegheny General	571		\$55,654
Allegheny Valley	355		\$29,248
Altoona Regional 	562		\$25,968
Bradford Regional	183		\$15,243
Brookville	13		\$15,613
Butler Memorial	308		\$37,115
Canonsburg General	77		\$21,276
Charles Cole Memorial	37		\$16,499
Clarion	131		\$13,486
Clearfield	108		\$16,544
Conemaugh Valley Memorial	626		\$22,272
Corry Memorial	22		\$22,047
DuBois Regional	296		\$18,682
Elk Regional	109		\$14,980
Ellwood City	49		\$14,841
Excelsa Hlth Westmoreland	402		\$32,419
Forbes Regional	412		\$32,476
Frick	191		\$24,446
Grove City	22		\$24,520
Heritage Valley Beaver	281		\$23,181
Heritage Valley Sewickley	92		\$25,458
Highlands	27		\$25,957
Indiana Regional	290		\$17,954
Jameson Memorial	322		\$19,952
Jefferson Regional	192		\$32,852
Kane Community	62		\$21,867
Latrobe Area	366		\$23,639

Readmission ratings were not reported for Septicemia to avoid counting readmissions that may have been planned for cancer treatment.

 This hospital has submitted comments specific to this condition. These comments are posted on PHC4's website at <http://www.phc4.org/reports/hpr/12/comments.htm>.

Septicemia

Hospital	Cases	Mortality	Average Hospital Charge
Magee Womens/UPMC	83	⊙	\$60,136
Meadville	202	⊙	\$27,290
Meyersdale Community	15	⊙	\$15,782
Millcreek Community	62	⊙	\$17,664
Miners	61	⊙	\$16,256
Monongahela Valley	248	⊙	\$28,884
Nason	13	⊙	\$14,117
Ohio Valley General	16	●	\$36,928
Punxsutawney Area	15	⊙	\$12,066
Saint Vincent Health	449	⊙	\$41,744
Sharon Regional	282	⊙	\$27,386
Somerset	192	⊙	\$20,972
Southwest Regional MC	64	⊙	\$21,614
St Clair Memorial	237	●	\$30,502
Titusville Area	131	⊙	\$9,269
Tyrone	5	⊙	\$23,899
Uniontown	288	●	\$16,900
UPMC Bedford	121	⊙	\$14,582
UPMC Hamot	727	⊙	\$47,601
UPMC Horizon	182	⊙	\$26,891
UPMC McKeesport	390	⊙	\$42,403
UPMC Mercy	271	⊙	\$45,916
UPMC Northwest	193	⊙	\$23,883
UPMC Passavant	355	⊙	\$48,427
UPMC Presby Shadyside	1,074	●	\$89,024
UPMC St Margaret	222	⊙	\$47,359
Warren General	170	⊙	\$23,935
Washington	456	⊙	\$20,337
Western Pennsylvania	75	⊙	\$51,161
Windber	65	⊙	\$18,095

Readmission ratings were not reported for Septicemia to avoid counting readmissions that may have been planned for cancer treatment.

Stroke

An ischemic stroke occurs when there is a blockage or obstruction in a blood vessel in the brain (cerebral artery) or neck (carotid artery) 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 blockage or obstruction, or patients admitted with a rupture or break in an artery (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 page 9.

- Rate significantly lower than expected.
 - ⊙ Rate not significantly different than expected.
 - Rate significantly higher than expected.
- NR Not reported. Fewer than five cases evaluated.

Stroke				
Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
TOTAL: Statewide	21,002	4.0%	13.8%	\$40,240
Western Pennsylvania	6,868	4.6%	13.8%	\$31,476
ACMH	68	●	⊙	\$14,871
Allegheny General	561	⊙	⊙	\$43,222
Allegheny Valley	107	⊙	⊙	\$21,944
Altoona Regional	292	⊙	⊙	\$20,880
Bradford Regional	16	⊙	⊙	\$11,295
Brookville	10	⊙	⊙	\$7,757
Butler Memorial	171	○	⊙	\$25,738
Canonsburg General	41	⊙	⊙	\$18,183
Charles Cole Memorial	17	⊙	⊙	\$13,681
Clarion	22	⊙	⊙	\$9,851
Clearfield	29	⊙	⊙	\$12,870
Conemaugh Valley Memorial	320	⊙	⊙	\$18,148
Corry Memorial	10	⊙	⊙	\$11,900
DuBois Regional	94	⊙	⊙	\$16,275
Elk Regional	22	⊙	⊙	\$17,384
Ellwood City	23	●	⊙	\$11,914
Excelsa Hlth Westmoreland	184	⊙	⊙	\$20,617
Forbes Regional	266	⊙	●	\$20,389
Frick	53	⊙	⊙	\$18,815
Grove City	14	⊙	⊙	\$18,653
Heritage Valley Beaver	155	●	⊙	\$15,520
Heritage Valley Sewickley	104	⊙	⊙	\$18,500
Highlands	8	⊙	⊙	\$11,710
Indiana Regional	102	⊙	⊙	\$14,738
Jameson Memorial	106	⊙	⊙	\$14,875
Jefferson Regional	204	⊙	⊙	\$21,515
Kane Community	14	⊙	⊙	\$13,767
Latrobe Area	91	⊙	⊙	\$18,073

Stroke

Hospital	Cases	Mortality	Readmission (for any reason)	Average Hospital Charge
Magee Womens/UPMC	19	⊙	⊙	\$34,304
Meadville	82	⊙	⊙	\$21,605
Meyersdale Community	2	NR	NR	NR
Millcreek Community	12	⊙	⊙	\$18,441
Miners	5	⊙	NR	\$19,821
Monongahela Valley	104	⊙	⊙	\$22,217
Nason	27	⊙	⊙	\$9,016
Ohio Valley General	33	⊙	⊙	\$23,271
Punxsutawney Area	23	⊙	⊙	\$9,334
Saint Vincent Health	299	⊙	⊙	\$37,653
Sharon Regional	90	⊙	⊙	\$21,522
Somerset	55	⊙	●	\$19,990
Southwest Regional MC	17	⊙	⊙	\$17,165
St Clair Memorial	220	⊙	⊙	\$20,819
Titusville Area	18	⊙	●	\$10,216
Tyrone	5	⊙	NR	\$12,610
Uniontown	72	●	⊙	\$14,380
UPMC Bedford	10	⊙	⊙	\$12,575
UPMC Hamot	370	⊙	⊙	\$36,440
UPMC Horizon	86	⊙	⊙	\$19,119
UPMC McKeesport	93	⊙	⊙	\$23,473
UPMC Mercy	371	⊙	⊙	\$38,413
UPMC Northwest	81	⊙	⊙	\$17,115
UPMC Passavant	186	⊙	⊙	\$29,056
UPMC Presby Shadyside	1,017	⊙	⊙	\$64,837
UPMC St Margaret	193	⊙	⊙	\$29,552
Warren General	37	⊙	⊙	\$17,408
Washington	179	⊙	⊙	\$16,204
Western Pennsylvania	32	⊙	⊙	\$30,782
Windber	12	⊙	⊙	\$12,713

Medicare and Medicaid Payments – 2011 Statewide Data

Medicare fee-for-service (FFS), Medicaid FFS, and Medicaid managed care organization (MCO) payments for the 16 medical conditions/surgical procedures included in this Hospital Performance Report

Displayed separately are the average amounts paid by Medicare fee-for-service, Medicaid fee-for-service, and Medicaid managed care organizations for inpatient hospitalizations. Payments from Medicare Advantage plans (e.g., Medicare HMOs) are not included, nor are patient liabilities (e.g., coinsurance and deductible dollar amounts). The most recent payment data available to PHC4 is for calendar year 2011.

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 Medicaid fee-for-service and managed care organization payments are calculated separately and are based on the claim-payment amounts obtained from the Pennsylvania Department of Public Welfare. The average payment for each payer category 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 for the given payer.

Most of the medical conditions and surgical procedures included in this report are defined using ICD.9.CM (International Classification of Diseases, Ninth Revision, Clinical Modification) diagnosis and procedure codes, with a secondary requirement that they be limited to particular MS-DRGs (Medicare Severity – Diagnosis-Related Group) – information available from the discharge data that PHC4 receives from Pennsylvania hospitals. Two conditions (Chest Pain and Hypotension and Fainting) are comprised of single MS-DRGs.

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 and Medicaid Payments – 2011 Statewide Data

For the 16 medical conditions/surgical procedures included in this Hospital Performance Report

MS-DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
		Cases	Average Payment	Cases	Average Payment	Cases	Average Payment
Abnormal Heartbeat		18,792	\$7,263	653	\$7,710	948	\$7,159
242	Permanent Cardiac Pacemaker Implant w/ MCC	729	\$21,507	12	\$19,928	12	\$20,412
243	Permanent Cardiac Pacemaker Implant w/ CC	1,452	\$15,588	23	\$18,214	18	\$17,603
244	Permanent Cardiac Pacemaker Implant w/o CC/MCC	1,452	\$11,710	23	\$13,512	33	\$15,643
246	Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	28	\$18,465	0	NR	0	NR
247	Percutaneous Cardiovascular Procedure with Drug-Eluting Stent w/o MCC	46	\$12,393	2	NR	1	NR
248	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/ MCC or 4+ Vessels/Stents	14	\$16,978	0	NR	0	NR
249	Percutaneous Cardiovascular Procedure with Non Drug-Eluting Stent w/o MCC	17	\$12,937	6	NR	0	NR
250	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/ MCC	189	\$21,344	11	\$18,260	11	\$15,505
251	Percutaneous Cardiovascular Procedure without Coronary Artery Stent w/o MCC	1,084	\$12,495	46	\$11,228	94	\$10,607
258	Cardiac Pacemaker Device Replacement w/ MCC	5	NR	0	NR	0	NR
259	Cardiac Pacemaker Device Replacement w/o MCC	13	\$10,352	3	NR	2	NR
260	Cardiac Pacemaker Revision Except Device Replacement w/ MCC	5	NR	0	NR	0	NR
261	Cardiac Pacemaker Revision Except Device Replacement w/ CC	9	NR	0	NR	1	NR
262	Cardiac Pacemaker Revision Except Device Replacement w/o CC/MCC	5	NR	0	NR	0	NR
286	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC	181	\$12,490	19	\$12,404	10	NR
287	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC	426	\$6,032	38	\$8,994	34	\$5,937
308	Cardiac Arrhythmia and Conduction Disorders w/ MCC	3,098	\$7,037	93	\$9,782	123	\$6,759
309	Cardiac Arrhythmia and Conduction Disorders w/ CC	4,809	\$4,426	161	\$5,730	293	\$6,200
310	Cardiac Arrhythmia and Conduction Disorders w/o CC/MCC	5,230	\$2,615	216	\$3,805	316	\$4,862
Chest Pain		4,139	\$2,774	247	\$3,599	1,463	\$3,799
313	Chest Pain	4,139	\$2,774	247	\$3,599	1,463	\$3,799

Note: Differences in the approaches used by Medicare and Medicaid in determining payments may account for some of the variation seen across these payers for a given condition.

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

Medicare and Medicaid Payments – 2011 Statewide Data

For the 16 medical conditions/surgical procedures included in this Hospital Performance Report

MS-DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
		Cases	Average Payment	Cases	Average Payment	Cases	Average Payment
Chronic Obstructive Pulmonary Disease (COPD)		14,848	\$5,183	1,031	\$5,864	2,180	\$6,447
190	Chronic Obstructive Pulmonary Disease w/ MCC	5,105	\$6,489	302	\$7,617	459	\$6,782
191	Chronic Obstructive Pulmonary Disease w/ CC	5,378	\$5,206	324	\$5,888	846	\$6,565
192	Chronic Obstructive Pulmonary Disease w/o CC/MCC	4,365	\$3,626	405	\$4,538	875	\$6,156
Colorectal Procedures		3,908	\$18,806	424	\$18,099	445	\$16,782
329	Major Small and Large Bowel Procedures w/ MCC	1,129	\$31,560	130	\$27,911	94	\$21,521
330	Major Small and Large Bowel Procedures w/ CC	1,665	\$15,146	190	\$15,408	191	\$17,888
331	Major Small and Large Bowel Procedures w/o CC/MCC	744	\$9,527	75	\$9,212	120	\$11,948
332	Rectal Resection w/ MCC	55	\$28,457	6	NR	4	NR
333	Rectal Resection w/ CC	193	\$14,742	15	\$11,492	25	\$15,544
334	Rectal Resection w/o CC/MCC	122	\$9,395	8	NR	11	\$12,902
Congestive Heart Failure (CHF)		22,998	\$6,274	779	\$9,164	1,575	\$8,011
286	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/ MCC	330	\$14,727	28	\$23,909	29	\$8,964
287	Circulatory Disorders Except Acute Myocardial Infarction, with Cardiac Catheterization w/o MCC	844	\$7,024	124	\$10,725	132	\$8,791
291	Heart Failure and Shock w/ MCC	6,847	\$8,462	142	\$12,699	307	\$8,107
292	Heart Failure and Shock w/ CC	10,448	\$5,702	360	\$7,390	833	\$8,127
293	Heart Failure and Shock w/o CC/MCC	4,529	\$3,531	125	\$5,407	274	\$7,074
Diabetes - Medical Management		4,918	\$5,166	1,320	\$6,207	2,340	\$5,348
073	Cranial and Peripheral Nerve Disorders w/ MCC	202	\$7,848	15	\$8,671	38	\$6,321
074	Cranial and Peripheral Nerve Disorders w/o MCC	629	\$4,863	99	\$6,771	327	\$5,675
299	Peripheral Vascular Disorders w/ MCC	44	\$8,425	3	NR	3	NR
300	Peripheral Vascular Disorders w/ CC	105	\$5,449	13	\$8,213	10	NR
301	Peripheral Vascular Disorders w/o CC/MCC	5	NR	0	NR	4	NR
637	Diabetes w/ MCC	825	\$8,445	162	\$11,583	202	\$6,257
638	Diabetes w/ CC	2,153	\$4,525	591	\$5,920	997	\$5,350
639	Diabetes w/o CC/MCC	827	\$2,751	414	\$4,035	709	\$4,799
698	Other Kidney and Urinary Tract Diagnoses w/ MCC	25	\$8,813	6	NR	7	NR
699	Other Kidney and Urinary Tract Diagnoses w/ CC	94	\$5,957	12	\$7,039	31	\$6,815
700	Other Kidney and Urinary Tract Diagnoses w/o CC/MCC	9	NR	5	NR	12	\$4,772

Note: Differences in the approaches used by Medicare and Medicaid in determining payments may account for some of the variation seen across these payers for a given condition.

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

Medicare and Medicaid Payments – 2011 Statewide Data

For the 16 medical conditions/surgical procedures included in this Hospital Performance Report

MS-DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
		Cases	Average Payment	Cases	Average Payment	Cases	Average Payment
Gallbladder Removal - Laparoscopic		2,323	\$9,776	786	\$6,933	1,002	\$7,655
411	Cholecystectomy with Common Duct Exploration (C.D.E.) w/ MCC	2	NR	1	NR	0	NR
412	Cholecystectomy with C.D.E. w/ CC	3	NR	2	NR	1	NR
413	Cholecystectomy with C.D.E. w/o CC/MCC	2	NR	2	NR	1	NR
417	Laparoscopic Cholecystectomy without C.D.E. w/ MCC	547	\$15,360	104	\$11,379	97	\$9,788
418	Laparoscopic Cholecystectomy without C.D.E. w/ CC	926	\$9,558	217	\$7,511	300	\$8,571
419	Laparoscopic Cholecystectomy without C.D.E. w/o CC/MCC	843	\$6,345	460	\$5,677	603	\$6,855
Gallbladder Removal - Open		614	\$14,356	117	\$11,883	108	\$9,711
411	Cholecystectomy with C.D.E. w/ MCC	15	\$25,974	1	NR	2	NR
412	Cholecystectomy with C.D.E. w/ CC	29	\$13,742	2	NR	3	NR
413	Cholecystectomy with C.D.E. w/o CC/MCC	11	\$9,226	2	NR	2	NR
414	Cholecystectomy Except by Laparoscope without C.D.E. w/ MCC	181	\$22,191	19	\$24,401	11	\$11,909
415	Cholecystectomy Except by Laparoscope without C.D.E. w/ CC	240	\$11,794	34	\$12,589	47	\$10,118
416	Cholecystectomy Except by Laparoscope without C.D.E. w/o CC/MCC	138	\$7,811	59	\$7,699	43	\$8,103
Heart Attack - Medical Management		5,600	\$8,110	274	\$11,071	222	\$11,719
280	Acute Myocardial Infarction, Discharged Alive w/ MCC	2,543	\$10,467	89	\$17,209	65	\$13,556
281	Acute Myocardial Infarction, Discharged Alive w/ CC	1,623	\$6,471	98	\$8,837	91	\$11,889
282	Acute Myocardial Infarction, Discharged Alive w/o CC/MCC	896	\$4,099	75	\$5,771	60	\$9,435
283	Acute Myocardial Infarction, Expired w/ MCC	402	\$10,147	6	NR	6	NR
284	Acute Myocardial Infarction, Expired w/ CC	95	\$4,506	5	NR	0	NR
285	Acute Myocardial Infarction, Expired w/o CC/MCC	41	\$2,866	1	NR	0	NR
Hypotension and Fainting		7,178	\$3,673	250	\$4,489	551	\$4,432
312	Syncope and Collapse	7,178	\$3,673	250	\$4,489	551	\$4,432
Kidney and Urinary Tract Infections		11,993	\$4,777	690	\$5,991	1,204	\$5,705
689	Kidney and Urinary Tract Infections w/ MCC	3,235	\$6,563	118	\$10,223	191	\$7,246
690	Kidney and Urinary Tract Infections w/o MCC	8,758	\$4,118	572	\$5,118	1,013	\$5,414

Note: Differences in the approaches used by Medicare and Medicaid in determining payments may account for some of the variation seen across these payers for a given condition.

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

Medicare and Medicaid Payments – 2011 Statewide Data

For the 16 medical conditions/surgical procedures included in this Hospital Performance Report

MS-DRG	MS-DRG Descriptions by Medical Condition/Surgical Procedure	Medicare Fee-for-Service		Medicaid Fee-for-Service		Medicaid Managed Care	
		Cases	Average Payment	Cases	Average Payment	Cases	Average Payment
Kidney Failure - Acute		11,270	\$6,689	623	\$10,316	1,004	\$7,680
682	Renal Failure w/ MCC	3,589	\$9,484	196	\$15,605	239	\$8,616
683	Renal Failure w/ CC	6,567	\$5,723	353	\$8,041	612	\$7,523
684	Renal Failure w/o CC/MCC	1,114	\$3,375	74	\$7,160	153	\$6,846
Pneumonia - Aspiration		5,053	\$9,414	183	\$15,380	267	\$10,298
177	Respiratory Infections and Inflammations w/ MCC	2,325	\$11,486	83	\$21,482	93	\$10,482
178	Respiratory Infections and Inflammations w/ CC	2,152	\$8,292	87	\$10,768	137	\$10,509
179	Respiratory Infections and Inflammations w/o CC/MCC	576	\$5,240	13	\$7,285	37	\$9,051
Pneumonia - Infectious		17,950	\$6,117	1,180	\$6,687	1,998	\$7,289
177	Respiratory Infections and Inflammations w/ MCC	485	\$11,649	37	\$17,310	40	\$13,440
178	Respiratory Infections and Inflammations w/ CC	450	\$8,624	27	\$10,838	29	\$10,870
179	Respiratory Infections and Inflammations w/o CC/MCC	74	\$5,466	10	NR	4	NR
193	Simple Pneumonia and Pleurisy w/ MCC	5,378	\$8,198	232	\$9,525	354	\$8,270
194	Simple Pneumonia and Pleurisy w/ CC	8,126	\$5,399	572	\$5,861	1,100	\$7,186
195	Simple Pneumonia and Pleurisy w/o CC/MCC	3,437	\$3,462	302	\$4,372	471	\$6,053
Septicemia		17,030	\$11,235	1,448	\$16,695	1,295	\$10,851
870	Septicemia or Severe Sepsis with Mechanical Ventilation 96+ Hours	957	\$37,207	195	\$29,020	116	\$22,233
871	Septicemia or Severe Sepsis without Mechanical Ventilation 96+ Hours w/ MCC	11,318	\$11,156	840	\$17,578	767	\$10,212
872	Septicemia or Severe Sepsis without Mechanical Ventilation 96+ Hours w/o MCC	4,755	\$6,197	413	\$9,081	412	\$8,835
Stroke		8,951	\$7,089	738	\$9,849	616	\$10,354
061	Acute Ischemic Stroke with Use of Thrombolytic Agent w/ MCC	138	\$18,868	12	\$25,165	4	NR
062	Acute Ischemic Stroke with Use of Thrombolytic Agent w/ CC	198	\$11,471	19	\$10,513	11	\$14,828
063	Acute Ischemic Stroke with Use of Thrombolytic Agent w/o CC/MCC	63	\$8,881	6	NR	9	NR
064	Intracranial Hemorrhage or Cerebral Infarction w/ MCC	1,962	\$11,127	126	\$18,855	95	\$12,034
065	Intracranial Hemorrhage or Cerebral Infarction w/ CC	4,165	\$6,267	341	\$8,323	292	\$9,948
066	Intracranial Hemorrhage or Cerebral Infarction w/o CC/MCC	2,425	\$4,160	234	\$6,477	205	\$9,760

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