



**Central & Northeastern  
Pennsylvania**

# **HOSPITAL PERFORMANCE REPORT**

**31 Common Medical Procedures and Treatments • FFY 2008**



**Pennsylvania Health Care Cost Containment Council  
September 2009**

# Table of Contents

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

<b>Key Findings</b> .....	1
<b>Understanding this Report</b> .....	3
<b>Descriptions</b> .....	8
<b>Diagnoses</b>	
Abnormal Heartbeat .....	10
Blood Clot in Extremities .....	12
Blood Clot in Lung .....	14
Chronic Obstructive Pulmonary Disease (COPD) .....	16
Congestive Heart Failure (CHF).....	18
Diabetes with Amputation .....	20
Diabetes – Medical Management.....	22
Heart Attack – Medical Management .....	24
Intestinal Obstruction .....	26
Kidney Failure – Acute .....	28
Kidney and Urinary Tract Infections .....	30
Pneumonia – Aspiration .....	32
Pneumonia – Infectious .....	34
Respiratory Failure with Mechanical Ventilation .....	36
Respiratory Failure without Mechanical Ventilation.....	38
Septicemia.....	40
Stomach and Intestinal Bleeding .....	42
Stroke – Hemorrhagic .....	44
Stroke – Non-Hemorrhagic.....	46
<b>Procedures</b>	
Abdominal Aortic Aneurysm Repair – Endovascular .....	48
Abdominal Aortic Aneurysm Repair – Open.....	50
Colorectal Procedures .....	52
Gallbladder Removal – Laparoscopic.....	54
Gallbladder Removal – Open .....	56
Heart Attack – Angioplasty/Stent.....	58
Hip Fracture – Surgical Repair.....	60
Hysterectomy – Abdominal.....	62
Hysterectomy – Vaginal.....	64
Prostatectomy – Radical.....	66
Prostatectomy – Transurethral.....	68
Removal of Blockage of Neck Vessels.....	70

The following hospitals have commented on this report:

- Community/Scranton
- Hazleton General
- Mount Nittany

Copies of their comments are available on the [PHC4 Web site](#) or by request.

# Key Findings

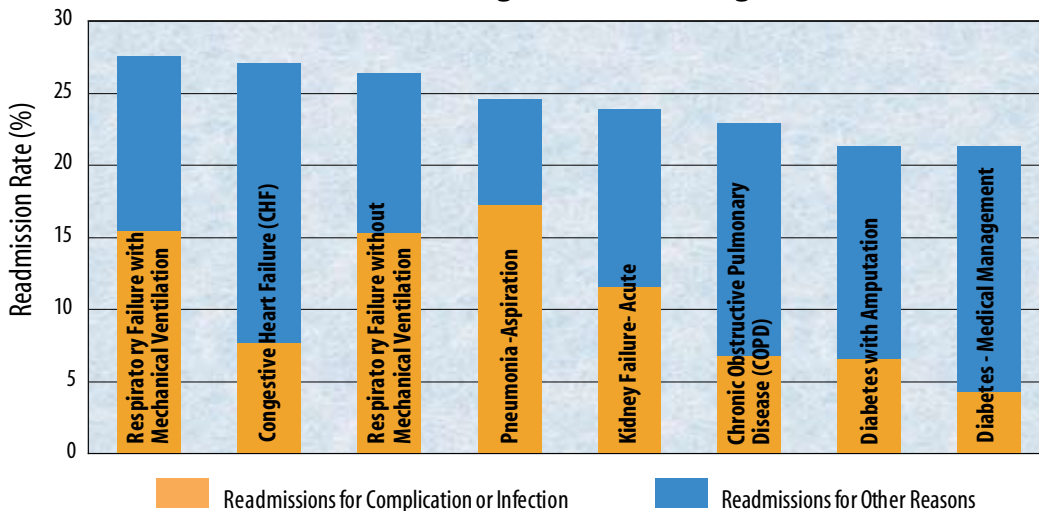
## Mortality Rates

- The overall mortality rate for the 20 conditions consistently reported in 2002 through 2008 showed a statistically significant decrease, from 5.1% in 2002 to 4.2% in 2008.
- Patient mortality rates showed a statistically significant decrease in 14 of these 20 conditions between 2002 and 2008. The largest statistically significant decline was in Stroke - Hemorrhagic, where the mortality rate decreased from 33.7% in 2002 to 26.2% in 2008.
- Among the conditions reported in 2008, Respiratory Failure with Mechanical Ventilation had the highest mortality rate at 29.5%. Hysterectomy - Abdominal had the lowest rate at 0.1%.

## Readmissions for Any Reason

- There were 57,852 readmissions for any reason in 2008 (for the 21 categories for which readmission ratings were reported). These readmissions amounted to approximately \$2.5 billion in charges and 350,000 hospital days.
- Eight of the conditions had readmission rates for any reason that exceeded the overall rate of 18.9% (based on all 21 conditions for which readmissions were reported in 2008).

**Rates of Readmission for Any Reason:  
Conditions Exceeding the 2008 Average Rate\***



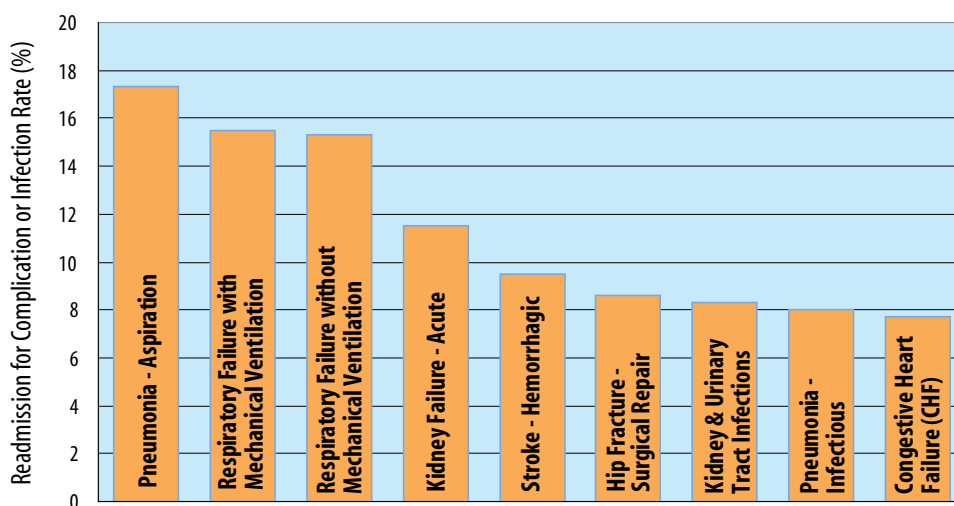
\* The overall rate for the 21 conditions for which readmissions for any reason were reported in 2008 was 18.9%.

- The overall readmission rate for the 15 conditions reported consistently in 2002 through 2008 showed a statistically significant increase from 18.3% in 2002 to 19.1% in 2008. However, it is important to note this rate reached a plateau in recent years: the 2008 rate was not significantly different from the 2004 rate of 19.0%. The largest significant increase over this time period was in Diabetes - Medical Management, where the readmission rate increased from 19.4% in 2002 to 21.3% in 2008.
- Among the conditions reported in 2008, Respiratory Failure with Mechanical Ventilation had the highest readmission rate at 27.6%. Hysterectomy - Vaginal had the lowest rate at 3.0%.

## Readmissions for Complication or Infection

- There were 22,094 readmissions for complication or infection in 2008 (for the 21 categories for which these rates were reported in 2008). These readmissions amounted to approximately \$1.1 billion in charges and 157,000 hospital days.
- Nine of the conditions had readmission rates for complication or infection that exceeded the overall rate of 7.2% (based on all 21 conditions for which these rates were reported in 2008).

**Rates of Readmission for Complication or Infection:  
Conditions Exceeding the 2008 Average Rate\***



\* The overall rate for the 21 conditions for which readmissions for complication or infection were reported in 2008 was 7.2%.

- The condition with the highest readmission rate for complication or infection in 2008 was Pneumonia - Aspiration (17.3%). The condition with the lowest rate was Hysterectomy - Vaginal (2.1%).

## Length of Stay

- There was wide variation in length of stay among hospitals in 2008. The condition with the most variation was Diabetes with Amputation, where hospitals' average length of stay ranged from 4.1 to 16.1 days after taking patient risk factors into account.
- The average length of stay showed a statistically significant decrease in 17 of the 24 conditions for which length of stay was consistently reported between 2002 and 2008. The largest decline was in Prostatectomy - Radical, where the average length of stay decreased from 3.3 days in 2002 to 2.3 days in 2008. The average length of stay also increased significantly in two conditions during this time period. The largest increase was in Gallbladder Removal - Laparoscopic, where the average length of stay increased from 3.2 days in 2002 to 3.6 days in 2008.

# Understanding this Report

# PHC4

## Foreword

The Pennsylvania Health Care Cost Containment Council (PHC4) was established as an independent state agency by the General Assembly and the Governor of the Commonwealth of Pennsylvania in 1986. To help improve the quality and restrain the cost of health care, PHC4 promotes health care competition through the collection, analysis and public dissemination of uniform cost and quality-related information. Thanks to the vision of its General Assembly, Pennsylvania has begun to build a new health care marketplace where purchasers, consumers, providers, payors, and policymakers can make more informed decisions about the delivery of health care. This *Hospital Performance Report* is one of a series of public reports designed to achieve this goal. Information about additional treatment and surgical categories is posted on the PHC4 Web site at [www.phc4.org](http://www.phc4.org).

## What is the purpose of the 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 quality product for the best possible price. It should be the same with 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 31 conditions based on ICD-9-CM (International Classification of Diseases, Ninth Revision, Clinical Modification) codes, which specify the clinical reason(s) for a patient's hospitalization. Of the 31 code-based conditions, there are 19 diagnoses and 12

procedures. Descriptions of these conditions are on pages 8 and 9.

- This report covers inpatient hospital discharges during Federal Fiscal Year (FFY) 2008, which includes data from October 1, 2007 through September 30, 2008.



- This report is divided into three regional versions and is hospital-specific.
- All Pennsylvania general acute care and most specialty general acute care hospitals, regardless of size, are included.
- 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 Web site at [www.phc4.org](http://www.phc4.org).

### Where does the data come from?

The data compiled for the purpose of this publication is reported as it was submitted to PHC4 by Pennsylvania hospitals. The data was subject to standard verification processes by PHC4. In addition, hospitals submit data indicating, in simple terms, “how sick the patient was” or, in technical jargon, a “severity score.” The data is then risk-adjusted.

### Accounting 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, length of stay and readmission data, meaning that hospitals receive “extra credit” for treating patients that 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, stay in the hospital longer, or be readmitted.

A sophisticated patient risk classification system called Atlas Outcomes™ is used to collect clinical information about hospital patients and to predict each patient’s probability of mortality and expected length of stay. Atlas Outcomes™ is a clinical information system

developed by MediQual™ services, a business of CareFusion Corporation. This system uses electronically available admit/discharge/transfer and laboratory data to calculate risk for patients in this report. PHC4 also independently adjusts for other relevant patient risk factors, such as poverty level, the presence of cancer, diabetes, etc.

A comprehensive description of the risk-adjustment techniques used for this report can be found in the Technical Notes on PHC4’s Web site at [www.phc4.org](http://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, six measures are suggested. With the exception of volume of cases, each of these measures has been adjusted for patient risk. (For more information, see the previous section titled, Accounting for high-risk patients.)

- **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 readmitted 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 vol-



ume due to the unique patient population they serve or geographic location.

- **Risk-Adjusted Mortality** – PHC4 has used risk-adjusted mortality statistics as a measure of quality since it began publishing reports in 1989. 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 with the actual number of deaths.
- **Risk-Adjusted Length of Stay** – The length of time a patient stays in the hospital can reflect how successful the hospital is in providing treatment and has an impact on the resources used in delivering treatment.
- **Risk-Adjusted Length of Stay Outliers** – Length of stay “outliers” are abnormally short or long hospitalizations – those individual hospitalizations where the difference between the actual and expected length of stay was in the top (long length of stay outliers) or bottom (short length of stay outliers) 5% of all state-wide hospitalizations. They are the hospitalizations where the difference between the actual and expected length of stay was above or below the normal range for all hospitalizations in the state. For any one hospital, the outlier rate is the number of outliers divided by the total number of hospitalizations. Length of stay may be an important quality of care indicator; however, many factors affect length of stay, some of which are beyond the hospital’s control. Abnormally short or long hospital stays may result from factors, such as payor expectations, complications, clinical treatment advancements, or avoidable admissions due to inadequate health and social support in the community. Reported ratings should be interpreted cautiously and do not necessarily indicate high or low quality care.
- **Risk-Adjusted Readmissions** – 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 in a given hospital in a given condition with the actual number of readmissions. The methodology was designed to limit planned readmissions; however, some may still be included. While some re-hospitalizations can be expected, high quality care may lessen the need for subsequent hospitalizations.

- **Risk-Adjusted Readmissions for Complication/Infection** – The risk-adjusted readmission rating (discussed above) takes into consideration all subsequent hospitalizations within 30 days of the discharge date of the original hospitalization. However, this measure includes only readmissions with a principal diagnosis of a complication/infection (see the Technical Notes on the PHC4 Web site, [www.phc4.org](http://www.phc4.org), for a detailed description).

## Other data issues

- **Do Not Resuscitate Cases** – 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.
- Not all data is reported for all measures. For example, readmission rates are not reported for Heart Attack – Medical Management because subsequent admissions are often planned.

## Hospital charges

This report also includes the average hospital charge for each of the 31 code-based conditions. 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.

A look at the financial data submitted by hospitals to PHC4 can shed some light on the relationship between the amount hospitals charge or bill for inpatient services, and the amount they receive in Net Patient Revenue (NPR). Pennsylvania hospitals received, on average statewide, \$.26 in NPR for every dollar that they charged in Fiscal Year 2008 (for most hospitals 7/1/2007 through 6/30/2008).

Within the geographic area covered in this report, hospitals received, on average, \$.41 in NPR for every dollar charged. Broken down even further, hospitals within Northcentral Pennsylvania received, on average, \$.35 in NPR for every dollar charged, Southcentral Pennsylvania hospitals received an average of \$.47 on the dollar, and hospitals in Northeastern Pennsylvania received an average of \$.36 on the dollar.

These regional figures are aggregate only and cannot be applied to individual hospitals or individual average charges for conditions to calculate actual payment figures. This is due to substantial variation in hospital charges from hospital to hospital and from insurance product line to product line. There is also substantial variation

in actual payments that hospitals receive for specific services. Actual payments to hospitals are imposed by Medicare and Medicaid, or result from negotiations with insurance companies, other third-party payors, and even individual patients.

## Hospitals not included

Hospitals are required under Pennsylvania law (Act 89 of 1986 as reenacted and amended as Act 3 of 2009) to submit timely, accurate health care data to PHC4. PHC4, acting upon the advice of its Technical Advisory Group, a panel of physicians and other health care experts, has determined that hospitals missing Uniform Billing (UB) data or patient severity scores in excess of or equal to 10% of all records for which severity scores are to be reported are excluded from this report. These hospitals are listed below. Although hospitalization data specific to these hospitals is not shown in this report, these records have been included in the overall analysis for the measures included in this report (unless noted otherwise), and thus are reflected in the statewide and regional totals.

### Hospitals not included:

- Bucktail
- Montrose General
- Mid-Valley

### Hospital with revenue data errors:

- Jersey Shore: NA (not available) is reported for this facility under the charges columns of the report.



## Understanding the Symbols

Symbols representing ratings for risk-adjusted mortality, readmissions, and length of stay outliers are displayed in the report. These symbols reflect a comparison of a hospital's actual rate and what is expected.

- Significantly higher than expected.
- ◉ Not significantly different than expected.
- Significantly lower than expected.



## 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. It should not be used to generalize about the overall quality of care at a hospital, but instead to examine hospital performance in specific treatment categories. 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 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 in this report. 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.

## Code-based Diagnosis Descriptions

**Abnormal Heartbeat:** Abnormal heart rate or rhythm including tachycardia, bradycardia, fibrillation, flutter and heart block. Does not include heart attack, congenital heart defects, or heart valve disorders.

**Blood Clot in Extremities:** Inflammation of a blood vessel with the formation of a thrombus (blood clot) in a deep or superficial vein involving the legs, arms, and other parts of the body. Includes deep vein thrombosis (DVT).

**Blood Clot in Lung:** The formation of a thrombus (blood clot) and/or infarction (damage or death) of the lung tissue. Often called pulmonary embolism or pulmonary infarct.

**Chronic Obstructive Pulmonary Disease (COPD):** Chronic lung disease where breathing is difficult due to airway narrowing, excess mucus production or inflammation. It is caused most frequently by bronchitis, asthma, or emphysema.

**Congestive Heart Failure (CHF):** Heart failure occurs when the heart loses its ability to pump enough blood through the body. Heart failure usually worsens over time as the heart gradually loses its pumping ability and works less efficiently, resulting in high blood pressure and fluid collection in the lungs.

**Diabetes with Amputation:** Includes patients who have diabetes and undergo an amputation of the arm, leg, or toe.

**Diabetes – Medical Management:** Includes patients hospitalized for control of blood sugar. Conditions include coma, high blood sugar crisis, and fluid imbalances. Kidney, eye, nerve, or blood vessel damage related to diabetes are included.

### **Heart Attack – Medical Management:**

A heart attack (myocardial infarction) occurs when there is blockage or obstruction in the blood vessels that supply oxygen to the heart muscle causing an infarction (damage or death) to an area of the heart. Included are heart attack patients who were treated without a balloon (angioplasty) procedure or open heart surgery.

**Intestinal Obstruction:** Partial or complete blockage of the intestine often caused by scar tissue, tumors, twisting and kinking, or decreased blood supply that prevents the contents in the intestine from passing beyond the blockage.

**Kidney Failure – Acute:** A sudden and rapid loss of kidney function resulting in a build up of waste products that are normally 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.

**Kidney and Urinary Tract Infections:** Acute and chronic infections of the kidney and urinary tract. Does not include urinary stone or urinary symptoms, such as frequency, bleeding, or pain.

**Pneumonia – Aspiration:** Inflammation of the lungs and bronchial tubes caused by inhaling foreign material, such as food, drink, vomit, or secretions from the mouth into the lungs. Does not include infectious pneumonia.

**Pneumonia – Infectious:** Simple pneumonia (inflammation of the lung) includes viral and bacterial pneumonia, as well as pleurisy, an inflammation of the membrane surrounding the lungs.

**Respiratory Failure with Mechanical Ventilation:** Failure of the lungs to support the exchange of essential gases (oxygen and carbon dioxide), making the use of mechanical ventilation necessary. A mechanical ventilator (“breathing machine”) delivers oxygen through a tube placed in the mouth or nose into the trachea (windpipe). The breathing machine can be set to help or completely control breathing.

**Respiratory Failure without Mechanical Ventilation:** Inability of the lungs to support the exchange of essential gases (oxygen and carbon dioxide) without the need for mechanical ventilation.

**Stomach and Intestinal Bleeding:** Bleeding from ulcers or areas of inflammation in the stomach, small or large intestine, rectum, or esophagus (muscular tube that connects the mouth to the stomach).

**Septicemia:** Also known as blood poisoning, is a system-wide infection of the patient’s blood. Does not include post-operative or post-injury infections.

**Stroke – Hemorrhagic:** Stroke is a cardiovascular disease that affects the blood vessels supplying blood to the brain. In hemorrhagic strokes, a blood vessel in the brain breaks or ruptures and causes bleeding (hemorrhage) within or around the brain.

**Stroke – Non-hemorrhagic:** In ischemic (non-hemorrhagic) strokes, a blood clot blocks a blood vessel in the brain or an artery leading to the brain. This is the most common type of stroke. Transient ischemic attack (temporary stroke symptoms) is not included.

## Code-based Procedure Descriptions

### **Abdominal Aortic Aneurysm Repair**

**– Endovascular (EVAR):** An abdominal aortic aneurysm (AAA) is a bulging or weakened area of the aorta (the aorta is the main blood vessel coming from the heart that supplies blood to all organs) in the abdomen. This procedure repairs the aneurysm in a minimally invasive manner. A covered stent (mesh tube) or 'endograft' is inserted through small incisions in the groin and advanced through the blood vessels to the weakened or bulging area of the abdominal aorta using X rays to guide the placement. This endograft reinforces the weakened area of the aorta and prevents rupture of the aneurysm.

### **Abdominal Aortic Aneurysm Repair**

**– Open:** An abdominal aortic aneurysm (AAA) is a bulging or weakened area of the aorta (the aorta is the main blood vessel coming from the heart that supplies blood to all organs) in the abdomen. This 'open' procedure is performed through an incision in the abdomen. A synthetic graft is sutured (sewn) into the aorta to replace the weakened section.

**Colorectal Procedures:** The majority of colorectal procedures are performed in relation to the presence of cancer or diverticulitis (inflammation of part of the lower digestive tract). Does not include patients with abdominal trauma.

### **Gallbladder Removal – Laparoscopic:**

Cholecystectomy is the operation for removal of the gallbladder. Included are patients who underwent this type of surgery carried out with a laparoscope (microscopic camera) through three or four small incisions.

**Gallbladder Removal – Open:** Traditional gallbladder removal surgery that is carried out through an incision in the right side of the upper abdomen.

### **Heart Attack – Angioplasty/Stent:**

Treatment (called percutaneous transluminal coronary angioplasty or PTCA) of a heart attack using special balloons to open up obstructed arteries and increase blood flow to the heart. Often, a stent (a mesh tube) is inserted in the blocked or narrowed artery to open it wider and prevent re-narrowing or recurring blockage. Does not include coronary artery bypass graft surgery (CABG).

### **Hip Fracture – Surgical Repair:**

Fracture ("broken bone") of the hip involves the top portion of the femur (thigh bone). Surgical repair includes inserting a pin, rod or screw into the bone to hold the fracture together for healing or may also include a partial or total hip joint replacement.

**Hysterectomy – Abdominal:** An operation to remove the uterus (womb), either the upper part of the uterus only or the entire uterus and cervix. An abdominal hysterectomy can be performed either through a large incision into the abdomen or through a smaller abdominal incision with the assistance of an instrument called a laparoscope (a thin tube with a very small light and camera so the doctor can see into the abdomen).

**Hysterectomy – Vaginal:** An operation to remove the uterus (womb) through the vagina. A vaginal hysterectomy is performed either with or without the assistance of an instrument called a laparoscope (a thin tube with a very small



light and camera so the doctor can see into the abdomen), which is inserted into the abdomen through small incisions.

**Prostatectomy – Radical:** Radical prostatectomy is the surgical removal of the entire prostate. This type of surgery is usually performed when localized cancer is present.

**Prostatectomy – Transurethral:** This type of surgery involves the surgical removal of part of the prostate gland and is usually done to relieve urinary symptoms caused by benign (non cancerous) enlargement of the prostate.

### **Removal of Blockage of Neck Vessels:**

This procedure, also known as a carotid endarterectomy, is performed to prevent strokes. It involves removal of blockages, complete or partial, in the two arteries (carotid arteries) that supply the brain with blood and oxygen.

**Information about additional treatment and surgical categories is posted on the Web site at [www.phc4.org](http://www.phc4.org)**

## Abnormal Heartbeat

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Barnes Kasson County	29	⊖	2.4	6.9	⊖	0.0	⊖	⊖	\$11,955	
Berwick	99	⊖	3.4	5.2	⊖	3.1	⊖	⊖	\$33,401	
Bloomsburg	71	⊖	2.6	7.1	⊖	0.0	⊖	⊖	\$19,244	
Carlisle Regional	158	⊖	3.4	5.7	⊖	4.5	⊖	⊖	\$29,129	
Chambersburg	413	⊖	3.2	10.0	●	3.2	⊖	⊖	\$20,705	
Community/Scranton	336	⊖	3.9	3.9	⊖	7.8	●	⊖	\$21,623	
Ephrata Community	222	⊖	3.3	7.2	⊖	2.3	⊖	⊖	\$23,037	
Evangelical Community	216	⊖	2.9	10.6	●	1.4	○	○	\$10,751	
Fulton County	27	⊖	3.3	7.4	⊖	0.0	⊖	⊖	\$17,483	
Geisinger Wilkes-Barre	101	⊖	4.7	2.0	⊖	13.0	●	⊖	\$30,471	
Geisinger Wyoming Valley	277	⊖	3.3	5.1	⊖	3.3	⊖	○	\$32,803	
Geisinger/Danville	384	⊖	3.0	13.0	●	2.6	○	⊖	\$26,085	
Gettysburg	125	⊖	3.3	4.8	⊖	4.0	⊖	⊖	\$17,058	
Good Samaritan/Lebanon	315	⊖	3.5	4.8	⊖	4.8	⊖	○	\$22,436	
Hanover	172	⊖	3.1	4.7	⊖	2.9	⊖	⊖	\$11,913	
Hazleton General	189	⊖	3.7	8.0	⊖	5.3	⊖	⊖	\$25,502	
Heart of Lancaster	49	⊖	4.5	0.0	⊖	8.2	⊖	○	\$31,826	
Holy Spirit	547	⊖	3.3	3.1	○	3.9	⊖	○	\$21,478	
J C Blair Memorial	57	⊖	3.0	3.6	⊖	1.8	⊖	⊖	\$12,120	
Jersey Shore	38	⊖	2.8	0.0	⊖	0.0	⊖	⊖	NA	
Lancaster General	1,426	⊖	4.1	3.1	○	9.2	●	○	\$27,196	
Lancaster Regional	77	⊖	3.6	1.3	⊖	3.9	⊖	⊖	\$28,623	
Lewistown	168	⊖	3.0	3.6	⊖	1.8	⊖	⊖	\$11,954	
Lock Haven	59	⊖	2.0	6.8	⊖	0.0	⊖	⊖	\$21,240	

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

<sup>†</sup>While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Abnormal Heartbeat

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Marian Community	59	⊖	4.0	3.4	⊖	8.6	⊖	⊖	\$13,918	
Memorial York	156	⊖	2.9	10.9	●	1.3	⊖	⊖	\$18,949	
Memorial/Towanda	24	⊖	3.1	4.2	⊖	0.0	⊖	⊖	\$17,497	
Mercy/Scranton	427	⊖	3.1	5.0	⊖	2.8	⊖	⊖	\$25,866	
Milton S Hershey	392	⊖	3.5	6.1	⊖	4.6	⊖	⊖	\$17,967	
Moses Taylor	201	⊖	4.0	3.6	⊖	5.6	⊖	⊖	\$22,732	
Mount Nittany	260	⊖	3.5	5.1	⊖	8.2	●	⊖	\$17,906	
Muncy Valley	24	⊖	2.8	4.2	⊖	4.2	⊖	⊖	\$10,144	
Pinnacle Health	746	⊖	3.5	3.8	⊖	3.4	⊖	⊖	\$22,761	
Pocono	433	⊖	3.1	8.9	●	2.6	⊖	⊖	\$24,951	
Robert Packer	741	⊖	3.0	6.0	⊖	2.6	⊖	⊖	\$16,011	
Shamokin Area Community	113	⊖	3.4	1.8	⊖	0.9	⊖	●	\$8,806	
Soldiers & Sailors	50	⊖	2.5	10.0	⊖	0.0	⊖	⊖	\$11,442	
Sunbury Community	63	⊖	2.6	6.5	⊖	0.0	⊖	⊖	\$18,710	
Troy Community	11	⊖	2.2	18.2	⊖	0.0	⊖	⊖	\$7,627	
Tyler Memorial	64	⊖	3.3	4.7	⊖	3.1	⊖	⊖	\$18,860	
Wayne Memorial	126	⊖	3.1	6.3	⊖	4.0	⊖	●	\$14,486	
Waynesboro	84	⊖	2.4	15.5	●	0.0	⊖	⊖	\$21,362	
Williamsport	310	⊖	2.9	9.4	●	3.6	⊖	⊖	\$19,161	
WVHCS	491	⊖	3.9	4.1	⊖	7.6	●	⊖	\$21,889	
York	621	⊖	3.5	5.0	⊖	4.9	⊖	⊖	\$16,405	
Central & Northeastern	10,988		3.4	5.6		4.6			\$21,756	
TOTAL: Statewide	44,947		3.5	5.0		5.0			\$32,586	

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

<sup>†</sup>While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊖ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Blood Clot in Extremities

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating†	%	Rating†	
Barnes Kasson County	5	○	3.3	20.0	○	0.0	○	\$6,088
Berwick	23	○	5.1	4.3	○	4.3	○	\$16,392
Bloomsburg	12	○	3.5	0.0	○	0.0	○	\$11,899
Carlisle Regional	31	○	4.8	3.2	○	3.2	○	\$13,624
Chambersburg	78	○	3.7	11.5	●	3.8	○	\$10,184
Community/Scranton	46	○	5.2	0.0	○	8.7	○	\$13,696
Ephrata Community	40	○	3.9	2.6	○	2.6	○	\$11,957
Evangelical Community	12	○	3.1	0.0	○	0.0	○	\$4,664
Fulton County	9	○	4.0	0.0	○	0.0	○	\$10,954
Geisinger Wilkes-Barre	28	○	3.9	7.1	○	7.1	○	\$13,974
Geisinger Wyoming Valley	31	○	4.1	9.7	○	6.5	○	\$18,366
Geisinger/Danville	24	○	3.6	13.0	○	4.3	○	\$18,194
Gettysburg	27	○	4.1	0.0	○	0.0	○	\$8,694
Good Samaritan/Lebanon	37	○	3.9	10.8	○	5.4	○	\$16,357
Hanover	35	○	3.9	0.0	○	0.0	○	\$7,242
Hazleton General	38	○	3.6	10.5	○	0.0	○	\$11,701
Heart of Lancaster	7	○	2.7	0.0	○	0.0	○	\$8,657
Holy Spirit	74	○	3.3	8.2	○	1.4	○	\$11,037
J C Blair Memorial	9	○	5.2	0.0	○	0.0	○	\$7,701
Jersey Shore	9	○	3.6	0.0	○	0.0	○	NA
Lancaster General	140	○	4.7	2.2	○	7.2	○	\$13,119
Lancaster Regional	14	○	4.8	0.0	○	7.1	○	\$12,591
Lewistown	33	○	4.3	6.1	○	9.1	○	\$8,242
Lock Haven	11	○	3.6	0.0	○	0.0	○	\$13,633

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Blood Clot in Extremities

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating†	%	Rating†	
Marian Community	9	○	4.0	0.0	○	11.1	○	\$6,851
Memorial York	59	○	4.3	5.1	○	0.0	○	\$8,004
Memorial/Towanda	5	○	5.8	0.0	○	0.0	○	\$7,984
Mercy/Scranton	81	○	4.3	3.7	○	1.2	○	\$12,300
Milton S Hershey	79	○	4.3	6.3	○	7.6	○	\$12,741
Moses Taylor	48	○	5.4	2.1	○	6.4	○	\$13,040
Mount Nittany	56	○	4.6	3.6	○	16.1	●	\$12,284
Muncy Valley	9	○	4.7	0.0	○	11.1	○	\$10,446
Pinnacle Health	100	○	3.7	5.1	○	3.0	○	\$12,074
Pocono	67	○	3.8	3.0	○	1.5	○	\$14,371
Robert Packer	26	○	3.9	4.0	○	4.0	○	\$9,686
Shamokin Area Community	48	○	4.4	0.0	○	6.3	○	\$5,714
Soldiers & Sailors	14	○	3.5	14.3	○	0.0	○	\$6,793
Sunbury Community	11	○	3.3	9.1	○	0.0	○	\$9,660
Troy Community	1	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	17	○	4.8	5.9	○	5.9	○	\$10,009
Wayne Memorial	18	○	3.9	0.0	○	5.6	○	\$6,784
Waynesboro	25	○	2.9	16.0	●	0.0	○	\$7,955
Williamsport	47	○	3.5	4.3	○	0.0	○	\$10,751
WVHCS	75	○	4.7	2.7	○	6.8	○	\$13,093
York	115	○	4.7	3.5	○	7.0	○	\$9,540
Central & Northeastern	1,694		4.2	4.6		4.5		\$11,506
TOTAL: Statewide	7,741		4.2	5.0		5.0		\$18,496

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Blood Clot in Lung

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating†	%	Rating†	
Barnes Kasson County	0	NR	NR	NR	NR	NR	NR	NR
Berwick	10	○	7.0	0.0	○	10.0	○	\$33,684
Bloomsburg	11	○	4.0	9.1	○	0.0	○	\$23,019
Carlisle Regional	28	○	4.8	3.6	○	7.1	○	\$16,384
Chambersburg	76	○	4.9	6.6	○	1.3	○	\$18,505
Community/Scranton	24	○	6.3	4.3	○	4.3	○	\$26,810
Ephrata Community	52	○	4.6	1.9	○	0.0	○	\$19,610
Evangelical Community	72	○	4.1	9.7	○	0.0	○	\$10,095
Fulton County	8	○	5.3	12.5	○	0.0	○	\$14,146
Geisinger Wilkes-Barre	12	○	6.1	0.0	○	0.0	○	\$27,403
Geisinger Wyoming Valley	32	○	4.3	9.7	○	3.2	○	\$27,965
Geisinger/Danville	107	○	3.3	26.9	●	1.9	○	\$25,742
Gettysburg	43	○	5.2	4.8	○	2.4	○	\$15,438
Good Samaritan/Lebanon	74	○	5.5	5.4	○	6.8	○	\$23,136
Hanover	43	○	5.2	4.7	○	2.3	○	\$11,100
Hazleton General	56	○	4.7	7.4	○	1.9	○	\$23,946
Heart of Lancaster	10	○	5.2	0.0	○	0.0	○	\$20,578
Holy Spirit	81	○	4.5	10.1	○	3.8	○	\$19,645
J C Blair Memorial	10	○	5.9	0.0	○	0.0	○	\$12,050
Jersey Shore	10	○	6.0	0.0	○	0.0	○	NA
Lancaster General	168	○	5.4	4.9	○	4.9	○	\$20,350
Lancaster Regional	13	○	5.6	0.0	○	8.3	○	\$20,318
Lewistown	52	○	4.8	9.6	○	1.9	○	\$11,238
Lock Haven	11	○	4.6	9.1	○	0.0	○	\$24,628

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.



Blood Clot in Lung								
Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating†	%	Rating†	
Marian Community	1	NR	NR	NR	NR	NR	NR	NR
Memorial York	46	⊙	4.7	0.0	⊙	2.2	⊙	\$12,041
Memorial/Towanda	2	NR	NR	NR	NR	NR	NR	NR
Mercy/Scranton	25	⊙	5.1	4.0	⊙	0.0	⊙	\$18,845
Milton S Hershey	104	⊙	4.0	14.6	●	6.8	⊙	\$15,798
Moses Taylor	36	⊙	6.2	0.0	⊙	0.0	⊙	\$21,909
Mount Nittany	75	⊙	6.0	2.7	⊙	5.5	⊙	\$18,826
Muncy Valley	1	NR	NR	NR	NR	NR	NR	NR
Pinnacle Health	164	⊙	5.1	4.3	⊙	3.7	⊙	\$20,922
Pocono	49	⊙	4.5	6.3	⊙	0.0	⊙	\$24,047
Robert Packer	58	⊙	5.1	10.7	⊙	5.4	⊙	\$18,501
Shamokin Area Community	25	⊙	4.4	8.3	⊙	0.0	⊙	\$9,083
Soldiers & Sailors	11	⊙	5.5	0.0	⊙	0.0	⊙	\$13,996
Sunbury Community	11	⊙	5.3	0.0	⊙	0.0	⊙	\$15,968
Troy Community	2	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	11	⊙	6.5	0.0	⊙	9.1	⊙	\$23,298
Wayne Memorial	11	⊙	4.9	27.3	●	0.0	⊙	\$14,409
Waynesboro	28	⊙	4.7	7.4	⊙	0.0	⊙	\$17,710
Williamsport	44	⊙	4.4	2.3	⊙	2.3	⊙	\$16,898
WVHCS	53	⊙	6.0	5.9	⊙	9.8	⊙	\$22,660
York	123	⊙	6.1	0.8	⊙	4.1	⊙	\$14,211
Central & Northeastern	1,887		5.0	7.0		3.3		\$18,844
TOTAL: Statewide	6,937		5.3	5.0		5.0		\$28,880

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Barnes Kasson County	76	○	4.2	1.3	○	1.3	○	○	\$9,906	
Berwick	232	○	4.7	2.6	○	3.9	○	○	\$23,572	
Bloomsburg	67	○	3.9	4.5	○	1.5	○	○	\$17,688	
Carlisle Regional	154	○	4.6	5.3	○	8.6	○	○	\$17,438	
Chambersburg	302	○	3.6	11.7	●	1.7	○	○	\$13,700	
Community/Scranton	215	●	5.1	3.3	○	4.8	○	○	\$16,620	
Ephrata Community	123	○	3.7	9.0	○	0.8	○	○	\$17,088	
Evangelical Community	81	○	3.2	7.4	○	0.0	○	○	\$6,602	
Fulton County	33	○	3.5	3.0	○	0.0	○	○	\$10,519	
Geisinger Wilkes-Barre	165	○	5.0	1.8	○	5.5	○	○	\$18,702	
Geisinger Wyoming Valley	197	○	5.0	4.6	○	8.6	●	○	\$21,331	
Geisinger/Danville	123	○	3.5	11.8	●	2.5	○	○	\$24,010	
Gettysburg	80	○	4.8	1.3	○	6.3	○	○	\$12,043	
Good Samaritan/Lebanon	305	○	4.4	7.0	○	4.0	○	○	\$17,314	
Hanover	134	○	4.5	2.3	○	4.5	○	○	\$9,991	
Hazleton General	202	○	4.5	1.0	○	2.5	○	○	\$17,955	
Heart of Lancaster	54	○	4.5	0.0	○	3.7	○	○	\$17,092	
Holy Spirit	205	○	4.1	9.4	●	4.9	○	○	\$19,869	
J C Blair Memorial	45	○	4.9	2.3	○	2.3	○	○	\$10,302	
Jersey Shore	68	○	4.0	2.9	○	0.0	○	○	NA	
Lancaster General	462	○	4.9	3.7	○	8.5	●	○	\$18,052	
Lancaster Regional	77	○	4.9	2.6	○	7.9	○	○	\$18,378	
Lewistown	247	○	4.2	2.0	○	5.3	○	○	\$10,879	
Lock Haven	143	○	3.2	6.3	○	0.0	○	○	\$15,867	

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Chronic Obstructive Pulmonary Disease (COPD)

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Marian Community	95	●	5.6	0.0	○	8.8	○	○	\$12,512	
Memorial York	193	○	4.2	6.3	○	4.2	○	○	\$11,383	
Memorial/Towanda	47	○	4.4	0.0	○	2.1	○	○	\$15,206	
Mercy/Scranton	177	○	4.5	9.0	●	4.5	○	○	\$16,399	
Milton S Hershey	154	○	4.5	7.1	○	8.4	○	○	\$14,898	
Moses Taylor	161	○	5.0	3.7	○	5.0	○	○	\$12,604	
Mount Nittany	226	●	5.6	3.2	○	14.2	●	○	\$17,452	
Muncy Valley	28	○	4.0	3.6	○	0.0	○	○	\$8,465	
Pinnacle Health	327	○	4.3	5.6	○	4.3	○	○	\$17,636	
Pocono	388	○	4.2	9.9	●	4.7	○	○	\$16,911	
Robert Packer	194	○	4.5	6.3	○	6.3	○	○	\$14,913	
Shamokin Area Community	114	●	4.1	4.6	○	0.9	○	○	\$7,517	
Soldiers & Sailors	118	●	4.2	7.0	○	1.8	○	○	\$10,533	
Sunbury Community	117	○	4.1	0.9	○	0.9	○	○	\$14,957	
Troy Community	40	○	3.5	5.0	○	0.0	○	○	\$6,758	
Tyler Memorial	107	○	4.3	2.8	○	3.7	○	○	\$11,882	
Wayne Memorial	101	○	4.4	6.9	○	4.0	○	○	\$11,683	
Waynesboro	143	○	4.1	10.6	●	3.5	○	○	\$14,268	
Williamsport	170	○	4.3	4.8	○	2.4	○	○	\$14,542	
WVHCS	320	○	5.1	4.7	○	6.6	○	○	\$17,620	
York	377	○	4.0	7.5	●	3.7	○	○	\$10,362	
Central & Northeastern	7,474		4.4	5.4		4.7			\$15,408	
TOTAL: Statewide	32,007		4.5	5.0		5.0			\$22,517	

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Congestive Heart Failure (CHF)

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Barnes Kasson County	53	⊖	4.4	0.0	⊖	2.0	⊖	⊖	⊖	\$9,682
Berwick	162	⊖	5.1	1.9	⊖	4.5	⊖	●	⊖	\$25,952
Bloomsburg	90	●	3.7	3.6	⊖	0.0	⊖	⊖	⊖	\$17,661
Carlisle Regional	161	⊖	4.6	7.1	⊖	3.2	⊖	⊖	⊖	\$19,216
Chambersburg	369	⊖	3.9	13.5	●	1.4	⊖	⊖	⊖	\$17,655
Community/Scranton	270	⊖	5.4	6.9	⊖	5.7	⊖	⊖	⊖	\$17,823
Ephrata Community	185	⊖	4.2	7.3	⊖	1.1	⊖	⊖	⊖	\$21,884
Evangelical Community	152	⊖	3.2	6.0	⊖	0.0	⊖	⊖	⊖	\$8,061
Fulton County	57	⊖	5.6	0.0	⊖	7.0	⊖	⊖	⊖	\$16,498
Geisinger Wilkes-Barre	212	⊖	4.9	6.0	⊖	3.0	⊖	⊖	⊖	\$22,319
Geisinger Wyoming Valley	200	⊖	5.6	2.1	⊖	7.8	⊖	⊖	⊖	\$24,666
Geisinger/Danville	358	⊖	3.9	13.3	●	2.3	⊖	⊖	⊖	\$20,999
Gettysburg	128	⊖	4.6	0.8	⊖	1.6	⊖	⊖	⊖	\$12,829
Good Samaritan/Lebanon	272	●	5.0	4.7	⊖	4.3	⊖	⊖	⊖	\$19,691
Hanover	162	⊖	4.3	4.4	⊖	1.9	⊖	⊖	⊖	\$10,434
Hazleton General	243	⊖	5.3	6.5	⊖	5.7	⊖	⊖	⊖	\$21,169
Heart of Lancaster	51	⊖	4.6	4.0	⊖	2.0	⊖	⊖	⊖	\$19,344
Holy Spirit	391	●	4.6	9.3	●	4.6	⊖	⊖	⊖	\$20,362
J C Blair Memorial	85	⊖	4.3	3.6	⊖	3.6	⊖	⊖	⊖	\$9,408
Jersey Shore	91	⊖	4.5	2.2	⊖	3.4	⊖	⊖	⊖	NA
Lancaster General	846	⊖	5.8	4.4	⊖	9.4	●	⊖	⊖	\$22,470
Lancaster Regional	93	⊖	6.2	2.2	⊖	8.8	⊖	⊖	⊖	\$21,134
Lewistown	334	⊖	4.1	4.5	⊖	2.1	⊖	⊖	⊖	\$10,604
Lock Haven	103	⊖	3.8	3.0	⊖	0.0	⊖	⊖	⊖	\$19,277

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊖ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Congestive Heart Failure (CHF)

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Marian Community	109	○	5.9	1.9	○	8.5	○	○	\$13,494	
Memorial York	170	○	5.1	3.6	○	6.6	○	○	\$14,968	
Memorial/Towanda	60	○	4.7	1.7	○	1.7	○	○	\$16,638	
Mercy/Scranton	436	○	4.6	7.9	●	2.8	○	○	\$17,080	
Milton S Hershey	489	○	5.2	3.8	○	7.2	●	●	\$16,776	
Moses Taylor	233	○	5.4	2.2	○	4.0	○	○	\$14,792	
Mount Nittany	324	●	6.4	2.3	○	15.7	●	○	\$19,850	
Muncy Valley	31	○	4.4	6.5	○	3.2	○	○	\$9,442	
Pinnacle Health	691	○	5.0	5.2	○	5.1	○	○	\$20,149	
Pocono	419	○	4.5	4.4	○	2.2	○	○	\$19,905	
Robert Packer	309	○	4.0	10.5	●	3.0	○	○	\$14,114	
Shamokin Area Community	202	○	4.5	0.5	○	0.5	○	○	\$7,010	
Soldiers & Sailors	122	○	4.1	5.1	○	2.5	○	○	\$11,095	
Sunbury Community	131	○	3.8	3.1	○	0.0	○	○	\$14,253	
Troy Community	33	○	4.0	6.3	○	0.0	○	○	\$7,281	
Tyler Memorial	79	○	5.0	2.7	○	6.8	○	○	\$16,220	
Wayne Memorial	105	○	5.2	3.9	○	5.8	○	○	\$13,268	
Waynesboro	109	○	3.9	13.9	●	0.9	○	○	\$18,259	
Williamsport	265	○	4.3	9.4	●	2.4	○	○	\$15,617	
WVHCS	528	○	5.7	5.6	○	6.4	○	○	\$19,941	
York	788	●	5.0	3.8	○	5.7	○	○	\$13,437	
Central & Northeastern	10,777		4.8	5.5		4.7			\$17,507	
TOTAL: Statewide	48,294		5.0	5.0		5.0			\$27,600	

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

<sup>†</sup>While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Diabetes with Amputation

Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Barnes Kasson County	0	NR	NR	NR	NR	NR
Berwick	14	○	8.1	○	○	\$34,564
Bloomsburg	2	NR	NR	NR	NR	NR
Carlisle Regional	12	○	8.2	○	○	\$44,618
Chambersburg	22	○	8.2	○	○	\$34,568
Community/Scranton	17	○	9.5	○	○	\$30,543
Ephrata Community	9	○	8.8	○	○	\$27,483
Evangelical Community	15	○	4.1	○	○	NR
Fulton County	0	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	16	○	10.6	○	○	\$40,607
Geisinger Wyoming Valley	8	○	9.3	○	○	NR
Geisinger/Danville	28	○	6.5	○	○	\$46,745
Gettysburg	5	○	7.3	NR	NR	NR
Good Samaritan/Lebanon	7	○	10.1	○	○	NR
Hanover	5	○	7.0	○	○	\$20,978
Hazleton General	13	○	11.4	○	○	\$37,385
Heart of Lancaster	4	NR	NR	NR	NR	NR
Holy Spirit	18	○	8.0	○	○	\$33,067
J C Blair Memorial	1	NR	NR	NR	NR	NR
Jersey Shore	1	NR	NR	NR	NR	NA
Lancaster General	43	●	14.0	○	○	\$60,396
Lancaster Regional	4	NR	NR	NR	NR	NR
Lewistown	3	NR	NR	NR	NR	NR
Lock Haven	0	NR	NR	NR	NR	NR

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

Diabetes with Amputation						
Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Marian Community	5	●	NR	NR	NR	NR
Memorial York	7	○	11.0	○	○	\$20,673
Memorial/Towanda	0	NR	NR	NR	NR	NR
Mercy/Scranton	14	○	8.3	○	○	\$27,191
Milton S Hershey	25	○	12.2	○	○	\$40,850
Moses Taylor	7	○	11.0	○	○	NR
Mount Nittany	5	○	10.1	○	○	NR
Muncy Valley	0	NR	NR	NR	NR	NR
Pinnacle Health	24	○	8.1	○	○	\$39,940
Pocono	9	○	9.7	○	○	NR
Robert Packer	19	○	6.9	○	○	\$17,222
Shamokin Area Community	7	○	7.2	○	●	NR
Soldiers & Sailors	2	NR	NR	NR	NR	NR
Sunbury Community	5	○	7.2	○	○	\$32,192
Troy Community	0	NR	NR	NR	NR	NR
Tyler Memorial	0	NR	NR	NR	NR	NR
Wayne Memorial	8	○	5.8	○	○	\$14,483
Waynesboro	4	NR	NR	NR	NR	NR
Williamsport	17	○	9.0	○	○	\$32,995
WVHCS	24	○	10.5	○	○	\$33,857
York	47	○	8.8	○	○	\$18,618
Central & Northeastern	477		9.1			\$34,696
TOTAL: Statewide	2,015		9.5			\$68,378

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Diabetes - Medical Management

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Barnes Kasson County	16	○	2.8	0.0	○	0.0	○	○	\$5,911	
Berwick	59	○	3.7	0.0	○	5.2	○	○	\$18,084	
Bloomsburg	23	○	3.0	4.3	○	0.0	○	○	\$13,004	
Carlisle Regional	56	○	3.6	3.6	○	7.3	○	○	\$13,804	
Chambersburg	121	○	3.2	9.1	○	3.3	○	○	\$11,246	
Community/Scranton	85	○	4.4	2.4	○	8.2	○	○	\$14,898	
Ephrata Community	93	○	3.1	5.4	○	1.1	○	○	\$14,973	
Evangelical Community	34	○	3.3	12.1	○	0.0	○	○	\$7,374	
Fulton County	18	○	3.8	0.0	○	0.0	○	○	\$9,714	
Geisinger Wilkes-Barre	63	●	4.0	3.3	○	5.0	○	○	\$15,675	
Geisinger Wyoming Valley	77	○	4.3	3.9	○	9.2	○	○	\$17,973	
Geisinger/Danville	120	○	3.1	9.2	○	4.2	○	○	\$20,567	
Gettysburg	47	○	3.7	4.3	○	2.1	○	○	\$11,378	
Good Samaritan/Lebanon	110	○	3.4	3.7	○	4.6	○	○	\$13,119	
Hanover	48	○	4.1	2.1	○	6.3	○	○	\$9,274	
Hazleton General	94	○	3.6	1.1	○	4.3	○	○	\$13,970	
Heart of Lancaster	26	○	3.2	0.0	○	4.0	○	○	\$11,529	
Holy Spirit	129	○	3.5	5.5	○	3.1	○	○	\$16,845	
J C Blair Memorial	29	○	4.2	3.4	○	3.4	○	○	\$7,819	
Jersey Shore	10	○	3.2	0.0	○	0.0	○	○	NA	
Lancaster General	283	○	4.4	3.6	○	6.4	○	○	\$14,266	
Lancaster Regional	62	○	4.4	1.6	○	4.8	○	○	\$14,541	
Lewistown	70	○	3.6	1.4	○	2.9	○	○	\$8,016	
Lock Haven	19	○	2.5	0.0	○	0.0	○	○	\$13,026	

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.



## Diabetes - Medical Management

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Marian Community	29	○	4.1	0.0	○	10.3	○	○	\$9,627	
Memorial York	83	○	3.5	3.7	○	1.2	○	○	\$10,733	
Memorial/Towanda	13	○	3.1	0.0	○	0.0	○	○	\$9,730	
Mercy/Scranton	76	○	4.3	2.6	○	7.9	○	○	\$15,352	
Milton S Hershey	111	○	4.1	3.6	○	6.4	○	○	\$14,923	
Moses Taylor	110	○	4.3	4.6	○	11.9	●	○	\$14,218	
Mount Nittany	75	○	4.3	1.3	○	5.3	○	○	\$14,031	
Muncy Valley	5	○	3.2	0.0	○	0.0	○	○	\$7,026	
Pinnacle Health	255	○	3.6	6.4	○	4.0	○	○	\$13,689	
Pocono	151	○	3.6	5.3	○	4.6	○	●	\$18,336	
Robert Packer	67	○	3.2	14.9	●	4.5	○	○	\$11,711	
Shamokin Area Community	38	○	3.8	5.6	○	8.3	○	●	\$5,392	
Soldiers & Sailors	19	○	3.0	0.0	○	0.0	○	○	\$7,566	
Sunbury Community	24	○	3.1	0.0	○	4.2	○	○	\$11,462	
Troy Community	14	○	3.9	0.0	○	7.1	○	○	\$6,921	
Tyler Memorial	20	○	3.2	15.0	○	0.0	○	○	\$11,348	
Wayne Memorial	61	○	3.7	11.5	●	6.6	○	○	\$10,917	
Waynesboro	31	○	2.8	9.7	○	0.0	○	○	\$8,682	
Williamsport	86	○	3.5	5.9	○	0.0	○	○	\$10,765	
WVHCS	175	●	4.1	5.8	○	7.0	○	○	\$14,213	
York	220	○	3.8	5.0	○	9.6	●	○	\$10,592	
Central & Northeastern	3,374		3.8	4.8		5.1			\$13,435	
TOTAL: Statewide	17,278		3.7	5.0		5.0			\$21,463	

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Heart Attack - Medical Management

Hospital	Cases	Transfer to Acute Care	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
					Short Length of Stay		Long Length of Stay		
					%	Rating†	%	Rating†	
Barnes Kasson County	2	NR	NR	NR	NR	NR	NR	NR	NR
Berwick	34	37.7	⊙	6.7	0.0	⊙	9.7	⊙	\$43,431
Bloomsburg	17	51.7	⊙	3.9	0.0	⊙	0.0	⊙	\$20,286
Carlisle Regional	39	51.5	⊙	5.2	6.5	⊙	9.7	⊙	\$23,621
Chambersburg*	202	28.7	⊙	4.2	12.9	●	1.1	⊙	\$22,602
Community/Scranton*	77	3.9	⊙	5.7	1.4	⊙	4.3	⊙	\$22,499
Ephrata Community	46	60.0	⊙	4.2	9.5	⊙	4.8	⊙	\$21,495
Evangelical Community	99	27.6	⊙	3.4	12.0	●	0.0	⊙	\$8,103
Fulton County	2	NR	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre*	49	26.3	⊙	5.6	0.0	⊙	2.4	⊙	\$28,718
Geisinger Wyoming Valley*	64	10.0	⊙	4.8	11.1	⊙	5.6	⊙	\$32,175
Geisinger/Danville*	205	0.0	⊙	4.2	10.3	●	1.1	⊙	\$35,401
Gettysburg	55	40.5	⊙	4.9	8.5	⊙	0.0	⊙	\$15,572
Good Samaritan/Lebanon*	84	6.5	⊙	5.0	4.2	⊙	4.2	⊙	\$22,160
Hanover	115	50.5	⊙	5.3	8.2	⊙	3.1	⊙	\$12,192
Hazleton General	57	43.0	⊙	6.1	0.0	⊙	4.4	⊙	\$26,163
Heart of Lancaster	15	27.8	⊙	6.1	0.0	⊙	7.7	⊙	\$23,248
Holy Spirit*	159	3.4	⊙	5.0	3.5	⊙	2.1	⊙	\$22,583
J C Blair Memorial	20	69.0	⊙	7.9	0.0	⊙	11.1	⊙	\$13,377
Jersey Shore	12	45.0	⊙	5.1	0.0	⊙	0.0	⊙	NA
Lancaster General*	307	0.7	⊙	5.9	5.2	⊙	8.7	●	\$27,030
Lancaster Regional*	26	0.0	⊙	6.3	0.0	⊙	8.0	⊙	\$26,308
Lewistown	117	28.0	⊙	4.9	1.9	⊙	3.9	⊙	\$13,050
Lock Haven	20	50.0	⊙	4.1	0.0	⊙	0.0	⊙	\$20,843

\* 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.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Heart Attack - Medical Management

Hospital	Cases	Transfer to Acute Care	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
					Short Length of Stay		Long Length of Stay		
					%	Rating†	%	Rating†	
Marian Community	32	39.6	⊙	6.4	3.6	⊙	10.7	⊙	\$15,312
Memorial York	22	67.9	⊙	6.2	0.0	⊙	0.0	⊙	\$20,506
Memorial/Towanda	3	NR	NR	NR	NR	NR	NR	NR	NR
Mercy/Scranton*	116	4.2	⊙	4.8	7.5	⊙	1.9	⊙	\$23,441
Milton S Hershey*	180	2.9	⊙	4.8	4.7	⊙	7.1	⊙	\$22,063
Moses Taylor	48	31.8	⊙	6.1	0.0	⊙	6.7	⊙	\$19,696
Mount Nittany*	70	33.0	⊙	5.8	3.3	⊙	11.5	●	\$27,331
Muncy Valley	14	11.1	⊙	4.0	7.7	⊙	0.0	⊙	\$10,309
Pinnacle Health*	320	1.7	⊙	5.3	3.5	⊙	4.5	⊙	\$24,786
Pocono*	105	9.8	⊙	5.6	6.5	⊙	7.6	⊙	\$28,955
Robert Packer*	141	1.6	⊙	3.9	8.1	⊙	0.0	⊙	\$18,086
Shamokin Area Community	93	21.0	⊙	5.4	1.2	⊙	2.4	⊙	\$10,932
Soldiers & Sailors	14	38.1	⊙	4.3	15.4	⊙	0.0	⊙	\$10,379
Sunbury Community	22	28.0	⊙	4.2	5.6	⊙	0.0	⊙	\$17,824
Troy Community	2	NR	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	9	63.6	⊙	5.3	12.5	⊙	12.5	⊙	\$13,951
Wayne Memorial	47	52.3	⊙	4.9	2.5	⊙	0.0	⊙	\$13,579
Waynesboro	32	64.9	⊙	4.8	3.8	⊙	0.0	⊙	\$19,428
Williamsport*	123	3.3	⊙	4.3	5.1	⊙	1.7	⊙	\$19,843
WVHCS*	169	4.0	⊙	5.7	7.0	⊙	4.9	⊙	\$23,004
York*	287	0.8	●	5.7	2.4	⊙	8.0	●	\$16,768
Central & Northeastern	3,681	20.8		5.1	5.5		4.4		\$21,896
TOTAL: Statewide	12,941	21.7		5.3	5.0		5.0		\$34,378

\* 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.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

Intestinal Obstruction								
Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>	
Barnes Kasson County	8	○	3.5	0.0	○	0.0	○	\$9,121
Berwick	15	○	4.2	14.3	○	0.0	○	\$24,651
Bloomsburg	11	○	2.6	0.0	○	0.0	○	\$11,987
Carlisle Regional	37	○	4.7	0.0	○	8.1	○	\$13,827
Chambersburg	62	○	3.8	6.5	○	1.6	○	\$9,325
Community/Scranton	84	○	4.9	7.1	○	8.3	○	\$16,074
Ephrata Community	53	○	4.0	7.5	○	3.8	○	\$13,502
Evangelical Community	70	○	3.7	2.9	○	1.4	○	\$7,033
Fulton County	5	○	2.8	0.0	○	0.0	○	\$7,598
Geisinger Wilkes-Barre	31	○	5.0	3.4	○	6.9	○	\$18,968
Geisinger Wyoming Valley	54	○	4.1	1.9	○	1.9	○	\$18,748
Geisinger/Danville	101	○	3.7	5.1	○	2.0	○	\$21,619
Gettysburg	25	○	4.3	0.0	○	0.0	○	\$11,756
Good Samaritan/Lebanon	68	○	4.2	7.4	○	0.0	○	\$15,809
Hanover	43	○	3.7	5.0	○	0.0	○	\$9,199
Hazleton General	49	○	4.4	4.3	○	2.2	○	\$17,656
Heart of Lancaster	15	○	3.9	0.0	○	6.7	○	\$14,253
Holy Spirit	106	○	4.7	5.7	○	6.7	○	\$17,343
J C Blair Memorial	34	○	3.9	8.8	○	0.0	○	\$10,311
Jersey Shore	19	○	2.8	0.0	○	0.0	○	NA
Lancaster General	163	○	4.3	6.3	○	5.7	○	\$13,316
Lancaster Regional	8	○	3.5	0.0	○	0.0	○	\$12,802
Lewistown	37	○	3.9	2.7	○	5.4	○	\$10,094
Lock Haven	23	○	4.2	4.8	○	4.8	○	\$19,254

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

<sup>†</sup>While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Intestinal Obstruction

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating†	%	Rating†	
Marian Community	7	○	3.6	0.0	○	0.0	○	\$7,004
Memorial York	50	○	3.9	4.1	○	0.0	○	\$8,820
Memorial/Towanda	21	○	4.3	5.0	○	5.0	○	\$10,727
Mercy/Scranton	73	○	5.0	5.6	○	8.5	○	\$16,935
Milton S Hershey	95	○	4.5	3.2	○	7.4	○	\$13,350
Moses Taylor	77	●	4.5	2.7	○	4.1	○	\$12,674
Mount Nittany	87	○	5.1	2.4	○	10.6	●	\$14,545
Muncy Valley	13	○	3.9	0.0	○	0.0	○	\$8,072
Pinnacle Health	112	○	4.5	3.6	○	7.2	○	\$16,942
Pocono	66	○	3.8	4.5	○	4.5	○	\$15,907
Robert Packer	66	○	4.2	4.6	○	6.2	○	\$12,386
Shamokin Area Community	22	○	3.6	9.5	○	0.0	○	\$6,133
Soldiers & Sailors	14	○	3.2	15.4	○	0.0	○	\$5,981
Sunbury Community	21	○	3.1	0.0	○	0.0	○	\$11,554
Troy Community	9	○	2.8	11.1	○	0.0	○	\$6,054
Tyler Memorial	2	NR	NR	NR	NR	NR	NR	NR
Wayne Memorial	35	○	3.9	5.7	○	5.7	○	\$9,849
Waynesboro	28	○	3.5	17.9	●	0.0	○	\$10,180
Williamsport	68	○	4.5	6.0	○	0.0	○	\$10,648
WVHCS	126	○	5.3	5.7	○	8.2	○	\$15,545
York	157	○	4.6	2.0	○	7.8	○	\$10,501
Central & Northeastern	2,281		4.3	4.7		4.7		\$13,708
TOTAL: Statewide	9,357		4.3	5.0		5.0		\$21,216

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Kidney Failure - Acute

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Barnes Kasson County	5	○	NR	NR	NR	NR	NR	NR	NR	\$8,293
Berwick	22	○	7.3	0.0	○	4.8	○	○	○	\$29,702
Bloomsburg	16	○	4.5	6.7	○	0.0	○	○	○	\$16,139
Carlisle Regional	143	○	5.7	5.2	○	3.7	○	○	○	\$21,437
Chambersburg	155	○	3.9	11.5	●	1.4	○	○	○	\$15,364
Community/Scranton	112	○	6.0	10.9	●	4.5	○	●	○	\$21,944
Ephrata Community	145	○	4.3	11.1	●	0.0	○	○	○	\$19,941
Evangelical Community	58	○	4.4	5.8	○	0.0	○	○	○	\$8,433
Fulton County	3	NR	NR	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	74	○	6.9	1.4	○	7.2	○	○	○	\$28,137
Geisinger Wyoming Valley	121	○	6.4	3.4	○	11.0	●	○	○	\$27,610
Geisinger/Danville	305	○	4.6	9.6	●	2.4	○	○	○	\$30,472
Gettysburg	71	○	5.7	2.9	○	2.9	○	○	○	\$16,032
Good Samaritan/Lebanon	118	○	6.3	8.8	○	6.1	○	○	○	\$21,077
Hanover	113	○	5.0	2.9	○	2.0	○	○	○	\$11,114
Hazleton General	129	○	5.9	6.8	○	7.7	○	○	○	\$23,412
Heart of Lancaster	69	○	5.4	0.0	○	1.4	○	○	○	\$18,380
Holy Spirit	244	○	5.1	4.3	○	3.0	○	○	○	\$20,275
J C Blair Memorial	21	○	4.5	5.6	○	0.0	○	○	○	\$9,938
Jersey Shore	3	NR	NR	NR	NR	NR	NR	NR	NR	NA
Lancaster General	421	○	6.1	2.0	○	6.5	○	○	○	\$22,655
Lancaster Regional	83	○	6.8	1.3	○	3.8	○	○	○	\$22,559
Lewistown	55	●	5.2	10.9	○	6.5	○	○	○	\$11,629
Lock Haven	37	○	4.9	2.9	○	0.0	○	○	○	\$19,595

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Kidney Failure - Acute

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Marian Community	60	○	5.0	6.9	○	0.0	○	○	\$12,865	
Memorial York	85	○	5.6	6.2	○	3.7	○	○	\$13,935	
Memorial/Towanda	0	NR	NR	NR	NR	NR	NR	NR	NR	
Mercy/Scranton	147	○	5.3	6.3	○	3.5	○	○	\$19,147	
Milton S Hershey	271	○	5.9	3.2	○	8.7	●	○	\$19,563	
Moses Taylor	163	○	6.3	3.2	○	4.5	○	○	\$19,338	
Mount Nittany	37	○	7.6	2.8	○	16.7	●	○	\$19,035	
Muncy Valley	5	○	4.1	0.0	○	0.0	○	○	\$7,566	
Pinnacle Health	358	○	5.4	6.2	○	4.2	○	○	\$21,237	
Pocono	148	○	4.9	6.4	○	2.1	○	○	\$22,160	
Robert Packer	143	○	4.3	15.2	●	2.9	○	○	\$15,792	
Shamokin Area Community	52	○	4.6	4.2	○	0.0	○	○	\$6,820	
Soldiers & Sailors	34	○	4.3	6.3	○	3.1	○	○	\$12,531	
Sunbury Community	33	○	4.5	3.2	○	0.0	○	○	\$13,198	
Troy Community	2	NR	NR	NR	NR	NR	NR	NR	NR	
Tyler Memorial	8	○	5.2	0.0	○	0.0	○	○	\$14,319	
Wayne Memorial	40	○	4.8	2.6	○	0.0	○	○	\$12,955	
Waynesboro	80	○	4.3	9.1	○	0.0	○	○	\$14,967	
Williamsport	133	○	5.1	4.7	○	2.4	○	○	\$20,745	
WVHCS	202	○	7.2	4.3	○	10.3	●	○	\$25,023	
York	599	○	5.2	7.0	●	2.5	○	○	\$13,141	
Central & Northeastern	5,142		5.4	5.9		4.1			\$19,408	
TOTAL: Statewide	20,371		5.6	5.0		5.0			\$29,457	

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Kidney and Urinary Tract Infections

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Barnes Kasson County	13	○	5.3	0.0	○	15.4	○	○	○	\$8,982
Berwick	56	○	4.1	0.0	○	0.0	○	○	●	\$21,156
Bloomsburg	39	○	3.7	5.1	○	2.6	○	○	○	\$15,608
Carlisle Regional	62	○	3.6	9.7	○	4.8	○	○	○	\$13,544
Chambersburg	144	○	3.6	8.5	○	2.1	○	○	○	\$11,281
Community/Scranton	180	○	4.3	3.4	○	5.6	○	○	○	\$13,570
Ephrata Community	86	○	3.3	3.5	○	2.3	○	○	○	\$12,262
Evangelical Community	38	○	2.9	5.3	○	0.0	○	○	○	\$6,235
Fulton County	29	○	3.4	10.3	○	0.0	○	○	○	\$10,557
Geisinger Wilkes-Barre	93	○	4.3	5.4	○	5.4	○	○	○	\$15,535
Geisinger Wyoming Valley	109	○	5.1	2.8	○	12.1	●	○	○	\$18,492
Geisinger/Danville	138	○	3.3	16.1	●	5.1	○	○	○	\$21,036
Gettysburg	66	○	3.7	1.5	○	0.0	○	○	○	\$9,765
Good Samaritan/Lebanon	198	○	4.3	7.6	○	6.1	○	○	○	\$13,996
Hanover	39	○	4.8	0.0	○	5.3	○	○	○	\$8,468
Hazleton General	136	●	3.9	4.5	○	8.3	○	○	○	\$14,946
Heart of Lancaster	80	○	4.1	5.0	○	1.3	○	○	○	\$13,743
Holy Spirit	142	○	3.7	6.5	○	2.2	○	●	●	\$14,575
J C Blair Memorial	41	○	4.1	2.4	○	2.4	○	○	○	\$7,707
Jersey Shore	26	○	2.9	4.0	○	4.0	○	○	○	NA
Lancaster General	402	○	5.2	2.0	○	10.6	●	○	○	\$15,914
Lancaster Regional	54	○	4.9	0.0	○	11.3	●	○	○	\$16,675
Lewistown	126	○	4.0	3.2	○	2.4	○	○	○	\$8,229
Lock Haven	58	○	3.3	1.7	○	0.0	○	○	○	\$15,472

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

<sup>†</sup>While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.



## Kidney and Urinary Tract Infections

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Marian Community	79	⊖	4.6	2.5	⊖	1.3	⊖	⊖	●	\$8,722
Memorial York	114	⊖	4.6	6.2	⊖	7.1	⊖	⊖	⊖	\$10,331
Memorial/Towanda	29	⊖	3.8	3.4	⊖	10.3	⊖	⊖	⊖	\$13,011
Mercy/Scranton	154	⊖	3.9	8.4	⊖	1.9	⊖	⊖	⊖	\$14,431
Milton S Hershey	181	⊖	4.0	3.9	⊖	6.1	⊖	●	●	\$13,271
Moses Taylor	129	⊖	4.2	7.0	⊖	2.3	⊖	⊖	⊖	\$13,461
Mount Nittany	162	●	5.2	5.1	⊖	13.9	●	⊖	⊖	\$14,517
Muncy Valley	20	⊖	4.5	0.0	⊖	5.3	⊖	⊖	⊖	\$7,876
Pinnacle Health	237	⊖	4.2	5.5	⊖	6.4	⊖	⊖	⊖	\$14,597
Pocono	191	⊖	4.3	6.4	⊖	6.9	⊖	⊖	⊖	\$16,699
Robert Packer	80	⊖	3.0	11.3	●	0.0	⊖	⊖	⊖	\$12,107
Shamokin Area Community	57	⊖	4.5	5.5	⊖	3.6	⊖	⊖	⊖	\$6,115
Soldiers & Sailors	18	⊖	3.9	0.0	⊖	0.0	⊖	⊖	⊖	\$8,294
Sunbury Community	44	⊖	3.9	2.3	⊖	2.3	⊖	⊖	⊖	\$11,428
Troy Community	27	⊖	3.2	7.4	⊖	0.0	⊖	⊖	⊖	\$5,311
Tyler Memorial	46	⊖	5.1	2.2	⊖	6.5	⊖	⊖	⊖	\$12,041
Wayne Memorial	83	⊖	3.5	6.0	⊖	2.4	⊖	⊖	⊖	\$9,438
Waynesboro	52	⊖	3.1	3.8	⊖	0.0	⊖	⊖	⊖	\$9,917
Williamsport	101	⊖	4.0	6.1	⊖	1.0	⊖	⊖	⊖	\$12,059
WVHCS	204	⊖	4.9	4.5	⊖	10.9	●	⊖	⊖	\$14,698
York	381	⊖	4.3	4.0	⊖	5.0	⊖	⊖	⊖	\$9,485
Central & Northeastern	4,789		4.2	5.1		5.4				\$13,194
TOTAL: Statewide	23,419		4.2	5.0		5.0				\$20,730

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

<sup>†</sup>While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊖ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Pneumonia - Aspiration

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Barnes Kasson County	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Berwick	97	⊖	5.7	2.2	⊖	1.1	⊖	⊖	⊖	\$27,716
Bloomsburg	11	⊖	4.9	0.0	⊖	0.0	⊖	⊖	⊖	\$21,740
Carlisle Regional	30	⊖	5.7	8.0	⊖	0.0	⊖	⊖	⊖	\$24,845
Chambersburg	68	⊖	5.2	5.0	⊖	0.0	⊖	⊖	⊖	\$17,098
Community/Scranton	22	⊖	6.6	0.0	⊖	0.0	⊖	⊖	⊖	\$20,958
Ephrata Community	48	⊖	5.6	11.4	⊖	4.5	⊖	⊖	⊖	\$23,154
Evangelical Community	59	●	4.8	6.5	⊖	0.0	⊖	⊖	⊖	\$10,363
Fulton County	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	33	⊖	6.4	17.2	●	0.0	⊖	⊖	⊖	\$27,349
Geisinger Wyoming Valley	40	●	6.8	3.2	⊖	9.7	⊖	⊖	⊖	\$30,120
Geisinger/Danville	63	⊖	5.8	13.0	●	11.1	●	⊖	⊖	\$31,627
Gettysburg	40	⊖	6.6	0.0	⊖	2.6	⊖	⊖	⊖	\$18,320
Good Samaritan/Lebanon	51	⊖	7.2	2.1	⊖	2.1	⊖	⊖	⊖	\$28,133
Hanover	33	⊖	6.7	0.0	⊖	7.4	⊖	⊖	⊖	\$16,288
Hazleton General	46	⊖	7.3	7.5	⊖	7.5	⊖	⊖	⊖	\$29,432
Heart of Lancaster	45	⊖	6.1	16.7	●	2.8	⊖	⊖	⊖	\$23,716
Holy Spirit	72	⊖	5.8	3.3	⊖	0.0	⊖	⊖	⊖	\$25,538
J C Blair Memorial	13	⊖	8.0	0.0	⊖	7.7	⊖	⊖	⊖	\$14,121
Jersey Shore	1	NR	NR	NR	NR	NR	NR	NR	NR	NA
Lancaster General	199	⊖	7.5	5.1	⊖	10.7	●	⊖	⊖	\$28,761
Lancaster Regional	43	⊖	7.5	5.3	⊖	0.0	⊖	⊖	⊖	\$31,672
Lewistown	25	⊖	5.4	8.3	⊖	4.2	⊖	⊖	⊖	\$11,742
Lock Haven	14	⊖	7.2	0.0	⊖	0.0	⊖	⊖	⊖	\$34,320

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊖ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Pneumonia - Aspiration

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Marian Community	13	○	6.7	10.0	○	0.0	○	○	\$14,321	
Memorial York	34	○	7.1	0.0	○	0.0	○	○	\$17,554	
Memorial/Towanda	8	○	4.5	0.0	○	0.0	○	○	\$19,077	
Mercy/Scranton	44	○	7.9	9.3	○	7.0	○	○	\$22,934	
Milton S Hershey	85	○	5.8	5.5	○	4.1	○	○	\$20,162	
Moses Taylor	34	○	5.4	3.0	○	0.0	○	○	\$15,094	
Mount Nittany	56	○	8.3	2.0	○	12.0	●	○	\$24,052	
Muncy Valley	2	NR	NR	NR	NR	NR	NR	NR	NR	
Pinnacle Health	100	○	6.6	3.4	○	4.5	○	○	\$26,589	
Pocono	163	○	6.4	5.8	○	2.6	○	○	\$29,269	
Robert Packer	82	○	5.4	11.4	●	5.7	○	○	\$18,387	
Shamokin Area Community	12	○	5.0	0.0	○	0.0	○	○	\$8,467	
Soldiers & Sailors	5	○	10.8	20.0	○	20.0	○	○	\$25,239	
Sunbury Community	55	○	5.8	4.4	○	2.2	○	○	\$21,195	
Troy Community	8	○	5.7	0.0	○	0.0	○	○	\$9,624	
Tyler Memorial	9	○	7.0	0.0	○	0.0	○	○	\$17,524	
Wayne Memorial	32	○	6.8	3.3	○	0.0	○	○	\$18,388	
Waynesboro	22	○	6.3	0.0	○	0.0	○	○	\$20,577	
Williamsport	39	○	6.5	5.7	○	5.7	○	○	\$19,544	
WVHCS	115	○	8.1	4.9	○	11.7	●	○	\$28,562	
York	128	○	7.3	3.6	○	7.3	○	○	\$17,395	
Central & Northeastern	2,109		6.6	5.4		4.8			\$23,532	
TOTAL: Statewide	9,442		6.8	5.0		4.8			\$34,248	

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

<sup>†</sup>While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Pneumonia - Infectious

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Barnes Kasson County	66	●	4.7	3.3	○	0.0	○	○	\$10,697	
Berwick	84	○	4.6	1.2	○	4.8	○	○	\$23,137	
Bloomsburg	98	○	4.2	2.1	○	1.0	○	○	\$18,775	
Carlisle Regional	213	○	5.3	6.0	○	10.9	●	○	\$20,796	
Chambersburg	292	○	4.2	7.0	○	1.4	○	○	\$14,547	
Community/Scranton	256	○	5.5	3.2	○	5.6	○	○	\$18,447	
Ephrata Community	244	○	4.1	8.4	●	2.1	○	○	\$18,392	
Evangelical Community	209	○	3.1	36.4	●	0.0	○	○	\$8,093	
Fulton County	75	○	4.6	4.1	○	0.0	○	○	\$14,828	
Geisinger Wilkes-Barre	198	○	4.9	6.7	○	2.6	○	○	\$20,569	
Geisinger Wyoming Valley	250	○	5.1	9.8	●	4.9	○	○	\$24,095	
Geisinger/Danville	255	○	3.6	11.3	●	1.6	○	○	\$22,806	
Gettysburg	143	○	4.8	5.7	○	2.1	○	○	\$12,700	
Good Samaritan/Lebanon	298	○	5.2	2.4	○	5.9	○	○	\$19,942	
Hanover	138	○	4.9	2.9	○	5.1	○	○	\$10,608	
Hazleton General	362	○	5.3	2.0	○	8.2	●	○	\$20,617	
Heart of Lancaster	90	○	4.5	4.5	○	4.5	○	○	\$18,974	
Holy Spirit	318	○	4.9	5.5	○	5.2	○	○	\$21,271	
J C Blair Memorial	118	○	5.0	6.8	○	6.8	○	○	\$10,773	
Jersey Shore	100	○	4.5	3.1	○	1.0	○	○	NA	
Lancaster General	634	○	5.4	4.7	○	8.0	●	○	\$20,399	
Lancaster Regional	113	○	5.0	1.8	○	6.3	○	○	\$22,091	
Lewistown	312	○	4.5	5.9	○	3.6	○	○	\$11,171	
Lock Haven	79	○	3.7	5.1	○	2.6	○	○	\$18,850	

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Pneumonia - Infectious

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating <sup>†</sup>	%	Rating <sup>†</sup>			
Marian Community	149	○	5.1	4.1	○	5.5	○	○	●	\$11,149
Memorial York	206	○	4.7	6.9	○	3.9	○	○	○	\$12,742
Memorial/Towanda	119	○	5.4	7.8	○	8.7	○	○	○	\$17,612
Mercy/Scranton	234	○	5.4	4.4	○	4.4	○	○	○	\$18,177
Milton S Hershey	311	○	4.6	5.3	○	6.9	○	●	●	\$15,895
Moses Taylor	232	○	5.4	3.9	○	6.5	○	○	○	\$14,368
Mount Nittany	358	○	6.4	1.7	○	13.8	●	○	○	\$18,797
Muncy Valley	50	○	4.5	6.1	○	0.0	○	○	○	\$9,545
Pinnacle Health	446	○	5.5	2.8	○	6.9	○	○	○	\$20,064
Pocono	389	○	4.6	6.6	○	4.2	○	○	○	\$20,461
Robert Packer	248	○	4.1	10.2	●	2.0	○	○	●	\$13,685
Shamokin Area Community	238	●	5.1	2.2	○	3.1	○	○	○	\$8,685
Soldiers & Sailors	135	●	4.6	4.9	○	4.1	○	○	○	\$10,513
Sunbury Community	181	○	4.0	5.7	○	0.0	○	●	○	\$16,080
Troy Community	78	○	3.8	6.9	○	0.0	○	○	○	\$7,404
Tyler Memorial	182	○	4.9	7.7	○	5.0	○	○	○	\$13,703
Wayne Memorial	235	○	4.8	3.1	○	2.6	○	○	○	\$11,890
Waynesboro	137	○	4.3	8.9	○	0.0	○	○	○	\$14,194
Williamsport	268	○	4.5	6.5	○	1.9	○	○	○	\$15,422
WVHCS	432	○	5.3	7.7	●	4.9	○	○	○	\$20,027
York	538	○	4.7	6.2	○	5.6	○	○	○	\$12,516
Central & Northeastern	10,172		4.8	6.0		4.8				\$16,650
TOTAL: Statewide	39,707		4.9	5.0		5.0				\$24,313

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

<sup>†</sup>While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Respiratory Failure with Mechanical Ventilation

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Barnes Kasson County	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Berwick	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Bloomsburg	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Carlisle Regional	15	⊖	7.7	11.1	⊖	0.0	⊖	⊖	⊖	\$46,965
Chambersburg	30	⊖	8.2	4.5	⊖	0.0	⊖	⊖	⊖	\$41,888
Community/Scranton	46	⊖	7.5	10.0	⊖	0.0	⊖	⊖	⊖	\$43,695
Ephrata Community	16	⊖	9.5	0.0	⊖	11.1	⊖	⊖	⊖	\$45,621
Evangelical Community	23	⊖	5.8	20.0	●	0.0	⊖	⊖	⊖	\$20,418
Fulton County	0	NR	NR	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	20	⊖	8.5	13.3	⊖	0.0	⊖	⊖	⊖	\$64,359
Geisinger Wyoming Valley	33	⊖	10.0	0.0	⊖	5.0	⊖	⊖	⊖	\$51,080
Geisinger/Danville	60	⊖	9.0	10.9	⊖	6.5	⊖	⊖	⊖	\$94,334
Gettysburg	10	⊖	8.7	0.0	⊖	0.0	⊖	⊖	⊖	\$33,260
Good Samaritan/Lebanon	15	⊖	9.1	0.0	⊖	0.0	⊖	⊖	⊖	\$56,330
Hanover	29	⊖	11.0	5.0	⊖	5.0	⊖	⊖	⊖	\$32,651
Hazleton General	42	⊖	8.7	3.4	⊖	0.0	⊖	⊖	⊖	\$56,624
Heart of Lancaster	4	NR	NR	NR	NR	NR	NR	NR	NR	NR
Holy Spirit	57	●	10.5	8.7	⊖	0.0	⊖	⊖	⊖	\$60,334
J C Blair Memorial	5	⊖	NR	NR	NR	NR	NR	NR	NR	\$21,856
Jersey Shore	2	NR	NR	NR	NR	NR	NR	NR	NR	NA
Lancaster General	87	⊖	10.1	3.0	⊖	9.0	⊖	⊖	⊖	\$57,605
Lancaster Regional	13	⊖	10.6	0.0	⊖	0.0	⊖	⊖	⊖	\$80,099
Lewistown	12	⊖	7.0	0.0	⊖	0.0	⊖	⊖	⊖	\$25,759
Lock Haven	1	NR	NR	NR	NR	NR	NR	NR	NR	NR

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊖ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Respiratory Failure with Mechanical Ventilation

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Marian Community	16	○	10.3	7.1	○	0.0	○	○	\$33,911	
Memorial York	31	○	8.2	0.0	○	4.8	○	○	\$40,147	
Memorial/Towanda	2	NR	NR	NR	NR	NR	NR	NR	NR	
Mercy/Scranton	33	○	8.6	0.0	○	4.0	○	○	\$51,735	
Milton S Hershey	73	○	9.2	13.0	●	4.3	○	○	\$54,957	
Moses Taylor	60	○	9.3	5.6	○	2.8	○	●	\$44,546	
Mount Nittany	25	○	12.5	0.0	○	10.5	○	○	\$47,504	
Muncy Valley	0	NR	NR	NR	NR	NR	NR	NR	NR	
Pinnacle Health	117	●	9.3	1.5	○	4.5	○	○	\$57,501	
Pocono	59	○	8.9	6.5	○	0.0	○	○	\$55,724	
Robert Packer	48	○	9.6	3.3	○	10.0	○	○	\$38,190	
Shamokin Area Community	2	NR	NR	NR	NR	NR	NR	NR	NR	
Soldiers & Sailors	4	NR	NR	NR	NR	NR	NR	NR	NR	
Sunbury Community	13	○	6.6	0.0	○	0.0	○	●	\$46,613	
Troy Community	0	NR	NR	NR	NR	NR	NR	NR	NR	
Tyler Memorial	3	NR	NR	NR	NR	NR	NR	NR	NR	
Wayne Memorial	19	○	10.0	7.1	○	14.3	○	○	\$33,967	
Waynesboro	16	○	9.3	0.0	○	0.0	○	○	\$45,303	
Williamsport	39	○	9.4	3.1	○	6.3	○	○	\$51,993	
WVHCS	125	○	7.7	2.4	○	0.0	○	○	\$41,172	
York	121	○	9.4	3.2	○	5.4	○	○	\$35,040	
Central & Northeastern	1,335		9.0	4.8		3.8			\$49,851	
TOTAL: Statewide	6,122		9.4	5.0		5.0			\$79,603	

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Respiratory Failure without Mechanical Ventilation

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Barnes Kasson County	1	NR	NR	NR	NR	NR	NR	NR	NR	NR
Berwick	18	○	6.8	0.0	○	0.0	○	○	○	\$39,232
Bloomsburg	20	○	5.4	5.9	○	0.0	○	○	○	\$23,488
Carlisle Regional	23	●	6.1	6.3	○	0.0	○	○	○	\$23,505
Chambersburg	138	○	5.1	6.1	○	1.5	○	○	○	\$19,728
Community/Scranton	73	○	6.1	5.8	○	2.9	○	●	○	\$21,580
Ephrata Community	50	○	5.5	8.9	○	2.2	○	○	○	\$25,667
Evangelical Community	82	○	4.4	3.9	○	0.0	○	○	○	\$11,109
Fulton County	3	NR	NR	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	33	○	6.2	3.2	○	3.2	○	○	○	\$29,005
Geisinger Wyoming Valley	64	○	6.6	1.8	○	10.9	○	○	○	\$27,480
Geisinger/Danville	55	●	5.7	6.5	○	4.3	○	○	○	\$37,034
Gettysburg	53	○	6.4	2.1	○	2.1	○	○	○	\$19,733
Good Samaritan/Lebanon	13	○	5.7	11.1	○	0.0	○	○	○	\$19,314
Hanover	114	○	6.1	1.9	○	3.7	○	○	○	\$13,728
Hazleton General	182	○	6.2	2.5	○	4.4	○	○	○	\$26,612
Heart of Lancaster	15	○	5.2	7.1	○	0.0	○	○	○	\$29,819
Holy Spirit	235	○	6.0	6.2	○	5.2	○	○	○	\$30,553
J C Blair Memorial	19	●	5.3	15.4	○	0.0	○	○	○	\$12,343
Jersey Shore	1	NR	NR	NR	NR	NR	NR	NR	NR	NA
Lancaster General	111	○	7.0	2.1	○	8.4	○	○	○	\$30,247
Lancaster Regional	26	○	5.8	0.0	○	0.0	○	○	○	\$24,368
Lewistown	28	○	5.6	4.2	○	4.2	○	○	○	\$15,007
Lock Haven	12	○	4.9	0.0	○	0.0	○	○	○	\$29,080

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.



## Respiratory Failure without Mechanical Ventilation

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Marian Community	23	○	7.6	0.0	○	4.8	○	○	\$20,419	
Memorial York	42	●	5.1	12.5	○	0.0	○	○	\$18,834	
Memorial/Towanda	8	○	5.2	0.0	○	0.0	○	○	\$14,962	
Mercy/Scranton	74	○	5.3	5.7	○	4.3	○	○	\$19,352	
Milton S Hershey	48	○	7.1	4.9	○	7.3	○	○	\$29,331	
Moses Taylor	153	○	6.0	3.7	○	2.9	○	○	\$17,049	
Mount Nittany	82	○	7.4	2.8	○	8.5	○	○	\$26,001	
Muncy Valley	2	NR	NR	NR	NR	NR	NR	NR	NR	
Pinnacle Health	261	○	5.9	5.1	○	7.3	○	○	\$26,506	
Pocono	43	○	6.1	7.1	○	7.1	○	○	\$28,113	
Robert Packer	138	○	5.8	8.1	○	6.5	○	○	\$21,628	
Shamokin Area Community	24	○	4.7	0.0	○	0.0	○	○	\$10,463	
Soldiers & Sailors	9	○	4.2	11.1	○	0.0	○	●	\$10,958	
Sunbury Community	5	○	NR	NR	NR	NR	NR	NR	\$24,588	
Troy Community	0	NR	NR	NR	NR	NR	NR	NR	NR	
Tyler Memorial	8	○	6.3	0.0	○	0.0	○	○	\$19,556	
Wayne Memorial	37	○	7.2	3.2	○	12.9	○	●	\$18,139	
Waynesboro	26	○	5.6	9.1	○	4.5	○	○	\$21,849	
Williamsport	152	○	4.9	10.6	●	2.3	○	○	\$17,184	
WVHCS	97	○	6.5	4.9	○	6.2	○	○	\$22,912	
York	52	●	7.6	5.3	○	13.2	●	○	\$18,926	
Central & Northeastern	2,674		5.9	5.2		4.6			\$22,890	
TOTAL: Statewide	9,884		6.0	5.0		5.0			\$28,676	

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

Septicemia								
Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating†	%	Rating†	
Barnes Kasson County	5	○	5.4	0.0	○	0.0	○	\$15,015
Berwick	65	○	6.2	3.6	○	3.6	○	\$41,440
Bloomsburg	39	○	5.1	2.9	○	0.0	○	\$22,718
Carlisle Regional	150	●	7.2	9.4	○	3.8	○	\$31,834
Chambersburg	193	○	5.1	8.8	●	1.8	○	\$22,953
Community/Scranton	153	○	7.1	3.7	○	3.0	○	\$28,952
Ephrata Community	74	○	6.7	5.2	○	5.2	○	\$33,032
Evangelical Community	250	○	4.5	3.9	○	0.4	○	\$10,730
Fulton County	10	○	4.1	20.0	○	0.0	○	\$17,575
Geisinger Wilkes-Barre	87	○	7.0	2.7	○	1.4	○	\$34,359
Geisinger Wyoming Valley	145	○	7.2	4.3	○	0.9	○	\$36,598
Geisinger/Danville	558	○	6.2	8.0	●	5.0	○	\$46,238
Gettysburg	112	○	5.9	5.2	○	1.0	○	\$19,923
Good Samaritan/Lebanon	161	○	6.9	8.2	○	4.5	○	\$31,401
Hanover	272	○	6.8	1.2	○	2.9	○	\$16,787
Hazleton General	303	○	7.7	3.3	○	6.1	○	\$31,531
Heart of Lancaster	25	○	6.4	11.8	○	0.0	○	\$25,888
Holy Spirit	560	○	6.6	2.7	○	3.8	○	\$29,003
J C Blair Memorial	40	○	6.2	2.8	○	5.6	○	\$18,940
Jersey Shore	9	○	4.1	0.0	○	0.0	○	NA
Lancaster General	308	●	8.3	2.9	○	7.9	○	\$33,533
Lancaster Regional	69	○	7.8	3.6	○	3.6	○	\$35,051
Lewistown	61	○	5.4	3.9	○	3.9	○	\$19,216
Lock Haven	35	○	5.2	3.1	○	0.0	○	\$24,845

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

Septicemia								
Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating†	%	Rating†	
Marian Community	90	○	7.2	2.7	○	2.7	○	\$16,630
Memorial York	81	○	6.9	5.6	○	2.8	○	\$22,072
Memorial/Towanda	21	○	5.7	10.5	○	5.3	○	\$20,626
Mercy/Scranton	367	○	7.3	3.5	○	2.5	○	\$29,802
Milton S Hershey	368	○	8.2	3.0	○	9.5	●	\$33,590
Moses Taylor	254	○	8.3	4.1	○	7.8	○	\$29,171
Mount Nittany	62	○	8.5	3.6	○	9.1	○	\$33,718
Muncy Valley	8	○	5.1	0.0	○	0.0	○	\$15,265
Pinnacle Health	662	○	6.9	4.7	○	2.6	○	\$31,484
Pocono	190	○	8.2	2.5	○	10.0	●	\$38,762
Robert Packer	203	○	5.7	10.0	●	2.7	○	\$23,194
Shamokin Area Community	31	○	6.3	0.0	○	0.0	○	\$14,586
Soldiers & Sailors	38	○	5.7	3.0	○	0.0	○	\$18,035
Sunbury Community	76	○	5.5	4.8	○	0.0	○	\$24,507
Troy Community	4	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	46	○	7.6	2.6	○	7.7	○	\$21,913
Wayne Memorial	87	○	7.1	7.4	○	4.4	○	\$21,814
Waynesboro	114	○	5.7	6.9	○	1.0	○	\$21,259
Williamsport	82	○	6.1	12.7	●	2.8	○	\$27,706
WVHCS	196	○	7.4	5.3	○	4.6	○	\$32,100
York	586	○	7.6	4.6	○	6.1	○	\$20,981
Central & Northeastern	7,259		6.9	4.8		4.3		\$29,150
TOTAL: Statewide	26,171		7.2	5.0		5.0		\$43,160

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Stomach and Intestinal Bleeding

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Barnes Kasson County	17	○	4.8	0.0	○	11.8	○	○	\$13,334	
Berwick	54	○	4.8	1.9	○	5.8	○	○	\$33,048	
Bloomsburg	16	○	3.1	12.5	○	0.0	○	○	\$15,755	
Carlisle Regional	120	○	3.8	7.8	○	1.7	○	○	\$21,277	
Chambersburg	201	○	3.7	10.8	●	2.6	○	○	\$13,300	
Community/Scranton	129	○	5.2	1.6	○	5.6	○	○	\$20,629	
Ephrata Community	108	○	3.8	7.4	○	1.9	○	○	\$18,299	
Evangelical Community	83	○	3.2	9.8	○	2.4	○	○	\$8,228	
Fulton County	20	○	4.2	0.0	○	0.0	○	○	\$12,019	
Geisinger Wilkes-Barre	100	●	4.2	1.1	○	3.2	○	○	\$21,186	
Geisinger Wyoming Valley	136	○	4.8	3.8	○	9.0	●	○	\$26,009	
Geisinger/Danville	185	●	3.5	14.3	●	1.1	○	○	\$27,064	
Gettysburg	56	○	4.4	0.0	○	3.6	○	○	\$13,405	
Good Samaritan/Lebanon	120	○	4.9	1.7	○	5.1	○	○	\$20,173	
Hanover	101	○	4.4	2.0	○	4.1	○	○	\$11,812	
Hazleton General	195	○	4.9	4.8	○	7.4	○	○	\$21,122	
Heart of Lancaster	36	○	4.4	0.0	○	5.6	○	○	\$19,467	
Holy Spirit	268	○	4.3	7.7	○	7.3	○	○	\$18,398	
J C Blair Memorial	27	○	4.9	4.0	○	0.0	○	○	\$17,808	
Jersey Shore	16	○	3.2	13.3	○	0.0	○	○	NA	
Lancaster General	396	○	4.6	3.6	○	5.4	○	○	\$21,566	
Lancaster Regional	36	○	3.9	8.3	○	0.0	○	○	\$20,775	
Lewistown	118	○	4.1	3.4	○	2.6	○	●	\$9,266	
Lock Haven	51	○	3.1	4.0	○	2.0	○	○	\$15,014	

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Stomach and Intestinal Bleeding

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Marian Community	67	○	5.3	0.0	○	7.9	○	○	\$10,972	
Memorial York	107	○	4.6	6.7	○	8.7	○	○	\$14,573	
Memorial/Towanda	23	○	3.9	8.7	○	0.0	○	○	\$16,268	
Mercy/Scranton	185	○	5.2	1.1	○	6.0	○	○	\$19,174	
Milton S Hershey	167	○	4.7	2.5	○	8.6	●	○	\$19,854	
Moses Taylor	167	○	5.0	4.2	○	6.0	○	○	\$16,224	
Mount Nittany	124	○	4.6	0.8	○	6.7	○	○	\$16,609	
Muncy Valley	24	○	4.0	8.3	○	4.2	○	○	\$9,003	
Pinnacle Health	342	○	4.2	4.5	○	2.4	○	○	\$18,346	
Pocono	199	○	4.0	8.2	○	6.1	○	○	\$21,595	
Robert Packer	161	○	3.3	13.4	●	1.9	○	○	\$12,675	
Shamokin Area Community	56	○	3.6	9.4	○	0.0	○	○	\$8,484	
Soldiers & Sailors	45	○	3.8	2.3	○	0.0	○	○	\$12,135	
Sunbury Community	38	○	4.0	5.4	○	2.7	○	○	\$16,081	
Troy Community	18	○	2.9	16.7	○	0.0	○	○	\$6,747	
Tyler Memorial	32	○	4.5	6.3	○	6.3	○	○	\$14,758	
Wayne Memorial	70	○	4.1	2.9	○	4.3	○	○	\$12,507	
Waynesboro	44	○	3.1	14.0	●	2.3	○	○	\$11,945	
Williamsport	159	○	3.9	7.6	○	1.3	○	○	\$14,811	
WVHCS	319	○	4.5	4.5	○	6.1	○	○	\$18,687	
York	284	○	4.1	6.1	○	3.9	○	○	\$12,266	
Central & Northeastern	5,248		4.3	5.5		4.5			\$17,564	
TOTAL: Statewide	19,810		4.4	5.0		5.0			\$26,111	

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Stroke - Hemorrhagic

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Barnes Kasson County	1	NR	NR	NR	NR	NR	NR	NR	NR	NR
Berwick	1	NR	NR	NR	NR	NR	NR	NR	NR	NR
Bloomsburg	3	NR	NR	NR	NR	NR	NR	NR	NR	NR
Carlisle Regional	7	⊙	NR	NR	NR	NR	NR	NR	NR	\$20,475
Chambersburg	29	⊙	5.0	15.8	⊙	0.0	⊙	⊙	⊙	\$15,966
Community/Scranton	36	⊙	6.8	0.0	⊙	7.4	⊙	⊙	⊙	\$26,419
Ephrata Community	9	⊙	4.6	0.0	⊙	0.0	⊙	⊙	⊙	\$22,355
Evangelical Community	7	⊙	4.8	0.0	⊙	0.0	⊙	⊙	⊙	\$13,112
Fulton County	1	NR	NR	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	7	⊙	3.1	0.0	⊙	0.0	⊙	⊙	⊙	\$17,164
Geisinger Wyoming Valley	16	⊙	7.9	6.7	⊙	6.7	⊙	⊙	⊙	\$32,203
Geisinger/Danville	127	⊙	5.3	4.5	⊙	2.3	⊙	⊙	⊙	\$38,662
Gettysburg	7	⊙	6.5	0.0	⊙	14.3	⊙	⊙	⊙	\$15,394
Good Samaritan/Lebanon	5	⊙	NR	NR	NR	NR	NR	NR	NR	\$12,116
Hanover	13	⊙	5.5	0.0	⊙	0.0	⊙	⊙	⊙	\$9,904
Hazleton General	8	⊙	NR	NR	NR	NR	NR	NR	NR	\$18,442
Heart of Lancaster	2	NR	NR	NR	NR	NR	NR	NR	NR	NR
Holy Spirit	28	⊙	7.8	0.0	⊙	13.6	⊙	⊙	⊙	\$25,858
J C Blair Memorial	5	⊙	NR	NR	NR	NR	NR	NR	NR	\$12,056
Jersey Shore	1	NR	NR	NR	NR	NR	NR	NR	NR	NA
Lancaster General	125	⊙	6.2	6.5	⊙	3.3	⊙	⊙	⊙	\$24,686
Lancaster Regional	7	⊙	4.5	0.0	⊙	0.0	⊙	NR	NR	\$18,158
Lewistown	1	NR	NR	NR	NR	NR	NR	NR	NR	NR
Lock Haven	0	NR	NR	NR	NR	NR	NR	NR	NR	NR

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- ⊙ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Stroke - Hemorrhagic

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Marian Community	5	⊖	NR	NR	NR	NR	NR	NR	\$8,567	
Memorial York	5	⊖	3.1	20.0	⊖	0.0	⊖	⊖	\$11,125	
Memorial/Towanda	4	NR	NR	NR	NR	NR	NR	NR	NR	
Mercy/Scranton	26	⊖	4.9	15.0	⊖	0.0	⊖	⊖	\$21,382	
Milton S Hershey	51	⊖	4.7	0.0	⊖	2.5	⊖	⊖	\$26,104	
Moses Taylor	31	⊖	5.4	13.0	⊖	4.3	⊖	⊖	\$16,765	
Mount Nittany	12	⊖	7.3	11.1	⊖	11.1	⊖	⊖	\$21,788	
Muncy Valley	1	NR	NR	NR	NR	NR	NR	NR	NR	
Pinnacle Health	73	⊖	5.3	13.3	●	4.4	⊖	⊖	\$23,176	
Pocono	5	⊖	NR	NR	NR	NR	NR	NR	\$29,806	
Robert Packer	36	⊖	5.7	0.0	⊖	8.0	⊖	⊖	\$15,601	
Shamokin Area Community	1	NR	NR	NR	NR	NR	NR	NR	NR	
Soldiers & Sailors	5	⊖	NR	NR	NR	NR	NR	NR	\$8,316	
Sunbury Community	1	NR	NR	NR	NR	NR	NR	NR	NR	
Troy Community	0	NR	NR	NR	NR	NR	NR	NR	NR	
Tyler Memorial	1	NR	NR	NR	NR	NR	NR	NR	NR	
Wayne Memorial	8	⊖	4.6	0.0	⊖	0.0	⊖	NR	\$13,600	
Waynesboro	5	⊖	NR	NR	NR	NR	NR	NR	NR	
Williamsport	27	⊖	4.7	0.0	⊖	4.2	⊖	⊖	\$19,162	
WVHCS	52	⊖	7.8	0.0	⊖	11.4	⊖	⊖	\$23,692	
York	55	⊖	5.9	10.3	⊖	5.1	⊖	⊖	\$16,182	
Central & Northeastern	852		5.8	5.7		4.7			\$23,756	
TOTAL: Statewide	3,634		5.9	4.8		4.8			\$44,142	

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊖ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

## Stroke - Non-Hemorrhagic

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Barnes Kasson County	5	⊖	6.8	0.0	⊖	20.0	⊖	⊖	⊖	\$13,139
Berwick	39	⊖	5.1	0.0	⊖	5.4	⊖	⊖	⊖	\$30,382
Bloomsburg	28	⊖	3.9	7.1	⊖	0.0	⊖	⊖	⊖	\$18,955
Carlisle Regional	92	●	4.6	2.4	⊖	4.8	⊖	⊖	⊖	\$20,314
Chambersburg	154	⊖	3.9	6.2	⊖	1.4	⊖	⊖	⊖	\$18,180
Community/Scranton	140	⊖	5.3	5.1	⊖	1.5	⊖	⊖	⊖	\$20,947
Ephrata Community	131	⊖	4.2	6.3	⊖	2.4	⊖	⊖	⊖	\$21,858
Evangelical Community	107	⊖	3.2	15.5	●	1.0	⊖	⊖	⊖	\$11,239
Fulton County	19	⊖	4.9	0.0	⊖	0.0	⊖	⊖	⊖	\$15,145
Geisinger Wilkes-Barre	69	⊖	4.4	4.5	⊖	1.5	⊖	⊖	⊖	\$24,945
Geisinger Wyoming Valley	121	⊖	5.9	3.4	⊖	11.2	●	⊖	⊖	\$28,371
Geisinger/Danville	297	⊖	4.5	6.9	⊖	4.0	⊖	⊖	⊖	\$33,170
Gettysburg	65	⊖	4.0	4.8	⊖	0.0	⊖	⊖	⊖	\$14,119
Good Samaritan/Lebanon	74	⊖	5.6	5.7	⊖	7.1	⊖	⊖	⊖	\$18,325
Hanover	133	⊖	4.6	7.8	⊖	3.9	⊖	⊖	⊖	\$12,879
Hazleton General	77	⊖	4.6	8.3	⊖	2.8	⊖	⊖	⊖	\$24,738
Heart of Lancaster	33	⊖	4.4	12.9	⊖	0.0	⊖	⊖	⊖	\$20,665
Holy Spirit	155	⊖	4.0	5.9	⊖	2.0	⊖	⊖	●	\$20,987
J C Blair Memorial	31	⊖	5.6	10.0	⊖	13.3	⊖	⊖	⊖	\$15,821
Jersey Shore	21	⊖	3.4	0.0	⊖	0.0	⊖	⊖	⊖	NA
Lancaster General	386	●	6.1	3.4	⊖	9.6	●	⊖	⊖	\$22,568
Lancaster Regional	32	⊖	4.8	3.3	⊖	3.3	⊖	⊖	⊖	\$22,716
Lewistown	81	⊖	4.5	3.9	⊖	2.6	⊖	⊖	⊖	\$13,490
Lock Haven	14	⊖	4.0	0.0	⊖	0.0	⊖	⊖	⊖	\$19,111

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊕ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.



## Stroke - Non-Hemorrhagic

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Readmission Rating		Average Charge
				Short Length of Stay		Long Length of Stay		For Any Reason	For Complication or Infection	
				%	Rating†	%	Rating†			
Marian Community	35	⊖	5.7	2.9	⊖	5.9	⊖	⊖	\$12,176	
Memorial York	92	⊖	4.2	8.3	⊖	1.2	⊖	⊖	\$14,326	
Memorial/Towanda	15	⊖	6.5	0.0	⊖	8.3	⊖	⊖	\$18,919	
Mercy/Scranton	118	⊖	5.0	5.1	⊖	3.4	⊖	⊖	\$20,965	
Milton S Hershey	167	●	4.7	3.3	⊖	2.6	⊖	⊖	\$26,506	
Moses Taylor	116	⊖	5.5	3.5	⊖	6.1	⊖	⊖	\$19,549	
Mount Nittany	139	⊖	4.8	4.7	⊖	8.6	⊖	⊖	\$19,757	
Muncy Valley	4	NR	NR	NR	NR	NR	NR	NR	NR	
Pinnacle Health	390	⊖	4.8	5.6	⊖	5.6	⊖	⊖	\$23,684	
Pocono	203	⊖	5.4	3.5	⊖	4.5	⊖	⊖	\$26,788	
Robert Packer	110	⊖	4.2	8.1	⊖	3.0	⊖	⊖	\$18,942	
Shamokin Area Community	59	⊖	5.2	1.8	⊖	3.5	⊖	⊖	\$8,015	
Soldiers & Sailors	35	⊖	4.1	3.0	⊖	0.0	⊖	⊖	\$11,671	
Sunbury Community	42	⊖	3.9	7.9	⊖	2.6	⊖	⊖	\$12,961	
Troy Community	4	NR	NR	NR	NR	NR	NR	NR	NR	
Tyler Memorial	26	●	5.6	10.0	⊖	0.0	⊖	⊖	\$13,517	
Wayne Memorial	63	⊖	4.5	3.2	⊖	1.6	⊖	⊖	\$15,646	
Waynesboro	60	⊖	4.4	5.2	⊖	1.7	⊖	⊖	\$17,947	
Williamsport	134	⊖	4.7	5.5	⊖	5.5	⊖	⊖	\$16,513	
WVHCS	251	⊖	6.0	2.9	⊖	7.9	⊖	⊖	\$21,334	
York	328	●	4.9	4.6	⊖	6.5	⊖	⊖	\$17,315	
Central & Northeastern	4,721		4.9	5.2		4.7			\$20,899	
TOTAL: Statewide	18,770		4.9	5.0		4.9			\$34,134	

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊖ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The facilities listed below are those that performed Abdominal Aortic Aneurysm Repair (Endovascular) during the report period.

<b>Abdominal Aortic Aneurysm Repair - Endovascular</b>						
Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Berwick	2	NR	NR	NR	NR	NR
Carlisle Regional	18	⊖	2.7	⊖	⊖	\$84,189
Chambersburg	10	⊖	3.3	⊖	⊖	\$40,260
Community/Scranton	8	⊖	3.5	⊖	⊖	\$97,408
Ephrata Community	4	NR	NR	NR	NR	NR
Evangelical Community	11	⊖	2.1	⊖	⊖	\$36,728
Geisinger Wilkes-Barre	4	NR	NR	NR	NR	NR
Geisinger Wyoming Valley	12	⊖	3.7	⊖	⊖	\$80,816
Geisinger/Danville	43	⊖	1.7	⊖	⊖	\$120,456
Good Samaritan/Lebanon	1	NR	NR	NR	NR	NR
Hazleton General	2	NR	NR	NR	NR	NR
Holy Spirit	56	⊖	1.7	⊖	⊖	\$57,310
Lancaster General	26	⊖	3.6	⊖	⊖	\$51,364
Lancaster Regional	2	NR	NR	NR	NR	NR
Lewistown	7	⊖	2.1	⊖	⊖	\$50,162
Mercy/Scranton	14	⊖	2.1	⊖	⊖	\$80,409
Milton S Hershey	22	⊖	2.2	⊖	⊖	\$57,415
Mount Nittany	1	NR	NR	NR	NR	NR
Pinnacle Health	13	⊖	1.4	⊖	⊖	\$46,445
Pocono	23	⊖	1.6	⊖	⊖	\$56,016
Robert Packer	26	⊖	2.9	⊖	⊖	\$66,650
Williamsport	5	⊖	NR	NR	NR	NR
WVHCS	27	⊖	2.5	⊖	⊖	\$80,147
York	38	⊖	1.9	⊖	⊖	\$49,259
Central & Northeastern	375		2.4			\$68,527
TOTAL: Statewide	1,682		2.8			\$95,135

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊕ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

This page is intentionally left blank.

The facilities listed below are those that performed Abdominal Aortic Aneurysm Repair (Open) during the report period.

Abdominal Aortic Aneurysm Repair - Open						
Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Carlisle Regional	1	NR	NR	NR	NR	NR
Chambersburg	1	NR	NR	NR	NR	NR
Community/Scranton	1	NR	NR	NR	NR	NR
Ephrata Community	3	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	1	NR	NR	NR	NR	NR
Geisinger Wyoming Valley	1	NR	NR	NR	NR	NR
Geisinger/Danville	16	⊙	5.0	⊙	⊙	NR
Good Samaritan/Lebanon	9	⊙	8.1	⊙	⊙	\$54,833
Hanover	1	NR	NR	NR	NR	NR
Holy Spirit	5	⊙	9.7	⊙	⊙	NR
Lancaster General	36	⊙	8.2	⊙	⊙	\$58,156
Mercy/Scranton	9	⊙	8.5	⊙	⊙	NR
Milton S Hershey	17	⊙	7.5	⊙	⊙	\$50,231
Moses Taylor	1	NR	NR	NR	NR	NR
Mount Nittany	1	NR	NR	NR	NR	NR
Pinnacle Health	3	NR	NR	NR	NR	NR
Pocono	1	NR	NR	NR	NR	NR
Robert Packer	3	NR	NR	NR	NR	NR
Williamsport	4	NR	NR	NR	NR	NR
WVHCS	2	NR	NR	NR	NR	NR
York	23	⊙	7.0	⊙	⊙	\$45,411
Central & Northeastern	139		7.7			\$52,348
TOTAL: Statewide	485		8.0			\$88,988

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

This page is intentionally left blank.

Colorectal Procedures				
Hospital	Cases	Mortality Rating	Length of Stay	Average Charge
Barnes Kasson County	4	NR	NR	NR
Berwick	8	⊙	11.7	\$98,674
Bloomsburg	24	⊙	5.8	\$42,052
Carlisle Regional	64	⊙	8.6	\$61,710
Chambersburg	130	⊙	10.0	\$34,024
Community/Scranton	96	⊙	8.0	\$34,991
Ephrata Community	82	⊙	7.7	\$34,186
Evangelical Community	71	⊙	7.4	\$19,435
Fulton County	0	NR	NR	NR
Geisinger Wilkes-Barre	43	⊙	9.6	\$53,297
Geisinger Wyoming Valley	84	⊙	8.8	\$61,547
Geisinger/Danville	233	⊙	6.7	\$65,856
Gettysburg	75	⊙	7.7	\$35,071
Good Samaritan/Lebanon	112	⊙	9.4	\$54,041
Hanover	86	⊙	9.3	\$28,543
Hazleton General	81	⊙	9.5	\$52,527
Heart of Lancaster	43	⊙	8.3	\$52,760
Holy Spirit	148	⊙	8.4	\$43,194
J C Blair Memorial	29	⊙	12.1	\$38,056
Jersey Shore	30	⊙	6.4	NA
Lancaster General	325	⊙	9.4	\$44,080
Lancaster Regional	26	⊙	8.3	\$45,103
Lewistown	69	⊙	7.6	\$28,166
Lock Haven	1	NR	NR	NR

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

Colorectal Procedures				
Hospital	Cases	Mortality Rating	Length of Stay	Average Charge
Marian Community	6	⊖	8.9	\$22,610
Memorial York	80	⊖	7.8	\$28,993
Memorial/Towanda	8	⊖	7.8	\$44,015
Mercy/Scranton	135	⊖	7.3	\$36,656
Milton S Hershey	266	⊖	8.0	\$34,475
Moses Taylor	107	⊖	10.5	\$35,763
Mount Nittany	108	⊖	8.4	\$33,308
Muncy Valley	2	NR	NR	NR
Pinnacle Health	337	⊖	8.0	\$42,954
Pocono	101	⊖	8.9	\$44,098
Robert Packer	138	⊖	8.6	\$39,155
Shamokin Area Community	22	⊖	6.5	\$16,702
Soldiers & Sailors	23	⊖	6.1	\$26,031
Sunbury Community	23	⊖	7.3	\$35,993
Troy Community	8	⊖	4.8	\$20,902
Tyler Memorial	15	⊖	7.6	\$37,331
Wayne Memorial	30	⊖	7.9	\$29,834
Waynesboro	25	⊖	7.7	\$35,600
Williamsport	110	⊖	8.9	\$36,032
WVHCS	208	⊖	10.2	\$45,269
York	255	⊖	8.9	\$31,011
Central & Northeastern	3,871		8.5	\$40,691
TOTAL: Statewide	14,418		8.6	\$65,597

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊕ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

Gallbladder Removal - Laparoscopic						
Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Barnes Kasson County	6	⊖	4.0	⊖	⊖	\$13,694
Berwick	35	⊖	3.9	⊖	⊖	\$43,033
Bloomsburg	16	⊖	1.9	⊖	⊖	\$19,387
Carlisle Regional	68	●	3.5	⊖	⊖	\$39,290
Chambersburg	240	⊖	3.3	⊖	⊖	\$19,142
Community/Scranton	107	⊖	4.0	⊖	⊖	\$26,906
Ephrata Community	70	⊖	3.3	⊖	⊖	\$22,145
Evangelical Community	56	⊖	3.3	⊖	⊖	\$14,306
Fulton County	0	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	25	⊖	4.9	⊖	⊖	\$33,707
Geisinger Wyoming Valley	61	⊖	4.2	⊖	●	\$42,609
Geisinger/Danville	83	⊖	3.1	⊖	⊖	\$39,731
Gettysburg	77	⊖	3.1	⊖	⊖	\$19,793
Good Samaritan/Lebanon	83	⊖	4.6	⊖	⊖	\$26,532
Hanover	31	⊖	3.6	⊖	⊖	\$19,254
Hazleton General	91	⊖	4.6	⊖	⊖	\$33,910
Heart of Lancaster	46	⊖	3.6	⊖	⊖	\$30,707
Holy Spirit	135	⊖	3.7	⊖	⊖	\$25,759
J C Blair Memorial	34	⊖	4.4	⊖	⊖	\$18,470
Jersey Shore	26	⊖	2.8	⊖	⊖	NA
Lancaster General	355	⊖	4.0	⊖	⊖	\$24,005
Lancaster Regional	34	⊖	3.0	⊖	⊖	\$29,880
Lewistown	89	⊖	2.9	⊖	⊖	\$16,500
Lock Haven	7	⊖	2.6	⊖	⊖	\$33,258

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊕ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.



Gallbladder Removal - Laparoscopic						
Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Marian Community	12	○	3.8	○	○	\$16,150
Memorial York	58	○	3.8	○	○	\$16,784
Memorial/Towanda	5	○	2.8	○	○	\$30,884
Mercy/Scranton	68	○	4.1	○	○	\$26,111
Milton S Hershey	92	○	3.7	○	○	\$19,604
Moses Taylor	81	○	4.8	○	○	\$26,808
Mount Nittany	113	○	3.8	○	○	\$19,528
Muncy Valley	1	NR	NR	NR	NR	NR
Pinnacle Health	197	○	3.7	○	○	\$22,570
Pocono	106	○	3.4	○	○	\$27,374
Robert Packer	78	○	2.9	○	○	\$19,119
Shamokin Area Community	38	○	3.6	○	○	\$12,702
Soldiers & Sailors	19	○	2.8	●	○	\$17,993
Sunbury Community	32	●	3.2	●	●	\$23,417
Troy Community	2	NR	NR	NR	NR	NR
Tyler Memorial	14	○	3.9	○	○	\$19,893
Wayne Memorial	22	○	3.6	○	○	\$15,427
Waynesboro	32	○	3.8	○	○	\$22,076
Williamsport	53	○	3.5	○	○	\$21,951
WVHCS	120	○	4.5	○	○	\$25,175
York	201	○	3.6	○	○	\$14,539
Central & Northeastern	3,119		3.7			\$23,603
TOTAL: Statewide	13,636		3.6			\$32,671

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

Gallbladder Removal - Open						
Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Barnes Kasson County	2	NR	NR	NR	NR	NR
Berwick	2	NR	NR	NR	NR	NR
Bloomsburg	14	⊙	5.2	⊙	⊙	\$30,258
Carlisle Regional	18	⊙	6.8	⊙	⊙	\$52,047
Chambersburg	17	⊙	6.0	⊙	⊙	\$23,719
Community/Scranton	9	⊙	8.1	⊙	⊙	\$35,813
Ephrata Community	13	⊙	6.0	⊙	⊙	\$33,358
Evangelical Community	34	⊙	4.6	⊙	⊙	\$15,265
Fulton County	0	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	4	NR	NR	NR	NR	NR
Geisinger Wyoming Valley	19	⊙	7.0	⊙	⊙	\$52,412
Geisinger/Danville	35	⊙	5.7	⊙	⊙	\$55,014
Gettysburg	4	NR	NR	NR	NR	NR
Good Samaritan/Lebanon	36	⊙	8.2	⊙	⊙	\$36,051
Hanover	15	⊙	3.9	⊙	⊙	\$18,602
Hazleton General	12	⊙	8.0	⊙	⊙	\$33,800
Heart of Lancaster	16	⊙	4.5	⊙	⊙	\$33,184
Holy Spirit	22	⊙	7.3	⊙	⊙	\$27,787
J C Blair Memorial	22	⊙	7.9	⊙	⊙	\$24,999
Jersey Shore	4	NR	NR	NR	NR	NA
Lancaster General	53	⊙	7.3	⊙	⊙	\$35,977
Lancaster Regional	7	⊙	4.3	⊙	⊙	\$41,429
Lewistown	7	⊙	8.0	⊙	⊙	NR
Lock Haven	6	⊙	3.6	⊙	⊙	\$44,095

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

Gallbladder Removal - Open						
Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Marian Community	2	NR	NR	NR	NR	NR
Memorial York	3	NR	NR	NR	NR	NR
Memorial/Towanda	3	NR	NR	NR	NR	NR
Mercy/Scranton	11	⊙	7.0	⊙	⊙	\$31,583
Milton S Hershey	32	⊙	7.3	⊙	⊙	\$29,934
Moses Taylor	20	⊙	6.4	⊙	⊙	\$24,521
Mount Nittany	11	⊙	9.1	⊙	⊙	\$39,713
Muncy Valley	3	NR	NR	NR	NR	NR
Pinnacle Health	33	⊙	6.3	⊙	⊙	\$35,635
Pocono	25	⊙	6.3	⊙	⊙	\$32,352
Robert Packer	36	⊙	4.7	⊙	⊙	\$24,116
Shamokin Area Community	3	NR	NR	NR	NR	NR
Soldiers & Sailors	5	⊙	NR	NR	NR	\$16,463
Sunbury Community	3	NR	NR	NR	NR	NR
Troy Community	1	NR	NR	NR	NR	NR
Tyler Memorial	3	NR	NR	NR	NR	NR
Wayne Memorial	11	⊙	6.5	⊙	⊙	\$24,335
Waynesboro	7	⊙	5.3	⊙	⊙	\$18,785
Williamsport	15	⊙	5.4	⊙	⊙	\$26,398
WVHCS	31	⊙	6.8	⊙	⊙	\$27,827
York	73	⊙	7.1	⊙	⊙	\$24,176
Central & Northeastern	704		6.5			\$31,207
TOTAL: Statewide	2,365		6.7			\$54,051

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The facilities listed below are those that provided advanced cardiac services (angioplasty/stent for heart attack) during the report period.

Heart Attack - Angioplasty/Stent								
Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating†	%	Rating†	
Chambersburg	175	○	3.3	10.9	●	1.1	○	\$40,621
Community/Scranton	100	○	4.3	7.0	○	10.0	●	\$42,962
Geisinger Wyoming Valley	84	○	2.9	7.5	○	1.3	○	\$68,692
Geisinger/Danville	369	○	3.4	5.1	○	3.0	○	\$76,811
Good Samaritan/Lebanon	105	○	3.8	3.9	○	1.9	○	\$53,804
Holy Spirit	144	○	3.9	2.2	○	5.8	○	\$39,356
Lancaster General	293	○	4.0	3.5	○	7.3	○	\$49,022
Lancaster Regional	35	○	3.1	8.6	○	2.9	○	\$75,123
Mercy/Scranton	207	○	3.6	4.9	○	2.0	○	\$55,978
Milton S Hershey	201	○	3.2	10.6	●	2.5	○	\$32,761
Mount Nittany	64	○	3.2	6.3	○	3.2	○	\$47,775
Pinnacle Health	364	○	3.7	3.0	○	3.0	○	\$45,708
Pocono	97	○	3.5	5.2	○	0.0	○	\$52,419
Robert Packer	180	○	3.0	7.8	○	1.7	○	\$30,733
Williamsport	116	○	3.4	6.1	○	1.7	○	\$41,895
WVHCS	141	○	4.0	3.6	○	5.7	○	\$50,650
York	276	○	3.9	1.8	○	3.3	○	\$40,125
Central & Northeastern	2,960		3.6	5.2		3.5		\$49,312
TOTAL: Statewide	11,314		3.7	5.0		5.0		\$71,601

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

This page is intentionally left blank.

Hip Fracture - Surgical Repair						
Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Barnes Kasson County	0	NR	NR	NR	NR	NR
Berwick	26	○	6.9	○	○	\$61,001
Bloomsburg	23	○	4.7	○	○	\$30,581
Carlisle Regional	91	○	5.3	○	○	\$46,183
Chambersburg	138	○	5.9	○	○	\$26,431
Community/Scranton	100	○	6.6	○	○	\$40,057
Ephrata Community	99	○	5.7	○	○	\$28,557
Evangelical Community	119	○	4.5	○	○	\$15,717
Fulton County	0	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	79	○	4.3	○	○	\$36,543
Geisinger Wyoming Valley	71	○	6.8	○	○	\$46,683
Geisinger/Danville	105	○	5.2	○	○	\$50,334
Gettysburg	65	○	5.3	○	○	\$28,414
Good Samaritan/Lebanon	113	○	7.3	○	○	\$33,425
Hanover	67	●	5.0	○	○	\$20,138
Hazleton General	77	○	5.9	○	○	\$47,359
Heart of Lancaster	30	○	6.2	○	○	\$42,586
Holy Spirit	140	○	5.3	○	○	\$30,270
J C Blair Memorial	0	NR	NR	NR	NR	NR
Jersey Shore	9	○	5.2	○	○	NA
Lancaster General	318	○	6.1	○	○	\$34,899
Lancaster Regional	48	●	6.2	○	○	\$45,552
Lewistown	73	○	4.9	○	○	\$19,988
Lock Haven	3	NR	NR	NR	NR	NR

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

Hip Fracture - Surgical Repair						
Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Marian Community	49	⊖	5.7	⊖	⊖	\$21,150
Memorial York	66	⊖	5.3	⊖	⊖	\$21,205
Memorial/Towanda	5	⊖	8.0	⊖	⊖	\$29,840
Mercy/Scranton	92	⊖	5.8	⊖	⊖	\$30,293
Milton S Hershey	112	⊖	5.8	⊖	⊖	\$32,656
Moses Taylor	114	⊖	5.9	⊖	⊖	\$25,637
Mount Nittany	120	⊖	6.2	⊖	⊖	\$32,488
Muncy Valley	0	NR	NR	NR	NR	NR
Pinnacle Health	249	⊖	5.6	⊖	⊖	\$32,920
Pocono	97	⊖	6.8	⊖	⊖	\$42,658
Robert Packer	105	⊖	5.3	⊖	⊖	\$25,702
Shamokin Area Community	60	⊖	5.6	⊖	⊖	\$15,747
Soldiers & Sailors	24	⊖	4.9	⊖	⊖	\$20,246
Sunbury Community	19	⊖	5.6	⊖	⊖	\$39,486
Troy Community	0	NR	NR	NR	NR	NR
Tyler Memorial	13	⊖	6.4	⊖	⊖	\$33,488
Wayne Memorial	49	⊖	5.9	⊖	⊖	\$27,879
Waynesboro	12	⊖	5.6	⊖	⊖	\$25,661
Williamsport	143	⊖	4.9	⊖	⊖	\$25,557
WVHCS	194	⊖	5.8	⊖	⊖	\$31,430
York	238	⊖	5.4	⊖	⊖	\$19,619
Central & Northeastern	3,582		5.7			\$31,122
TOTAL: Statewide	12,926		5.9			\$43,929

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊖ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

Hysterectomy - Abdominal								
Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating†	%	Rating†	
Barnes Kasson County	4	NR	NR	NR	NR	NR	NR	NR
Berwick	42	○	3.6	0.0	○	4.8	○	\$35,153
Bloomsburg	14	○	2.0	14.3	○	0.0	○	\$12,209
Carlisle Regional	49	○	1.7	8.2	○	0.0	○	\$25,519
Chambersburg	131	○	2.6	1.5	○	3.8	○	\$11,363
Community/Scranton	20	○	1.6	10.0	○	0.0	○	\$16,774
Ephrata Community	124	○	2.4	4.0	○	1.6	○	\$12,567
Evangelical Community	112	○	1.6	11.6	●	0.9	○	\$7,800
Fulton County	0	NR	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	80	○	2.8	2.5	○	3.8	○	\$20,835
Geisinger Wyoming Valley	72	○	2.4	5.6	○	0.0	○	\$22,028
Geisinger/Danville	223	○	2.7	5.4	○	7.2	○	\$27,756
Gettysburg	93	○	2.9	1.1	○	4.3	○	\$14,369
Good Samaritan/Lebanon	172	○	2.3	5.2	○	0.6	○	\$15,536
Hanover	84	○	2.5	2.4	○	1.2	○	\$12,584
Hazleton General	56	○	2.9	0.0	○	1.8	○	\$14,918
Heart of Lancaster	50	○	2.2	2.0	○	0.0	○	\$25,455
Holy Spirit	52	○	2.6	3.8	○	3.8	○	\$13,731
J C Blair Memorial	78	○	1.4	16.7	●	1.3	○	\$11,057
Jersey Shore	0	NR	NR	NR	NR	NR	NR	NA
Lancaster General	444	○	2.4	6.1	○	3.6	○	\$14,531
Lancaster Regional	8	○	2.7	0.0	○	0.0	○	\$20,600
Lewistown	101	○	2.3	1.0	○	1.0	○	\$9,048
Lock Haven	10	○	2.5	0.0	○	0.0	○	\$19,073

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.



## Hysterectomy - Abdominal

Hospital	Cases	Mortality Rating	Length of Stay	Outlier Cases				Average Charge
				Short Length of Stay		Long Length of Stay		
				%	Rating†	%	Rating†	
Marian Community	1	NR	NR	NR	NR	NR	NR	NR
Memorial York	130	⊖	2.4	3.8	⊖	2.3	⊖	\$10,786
Memorial/Towanda	3	NR	NR	NR	NR	NR	NR	NR
Mercy/Scranton	27	⊖	2.3	11.1	⊖	3.7	⊖	\$16,372
Milton S Hershey	516	⊖	1.9	14.4	●	2.7	○	\$11,538
Moses Taylor	188	⊖	3.3	1.6	○	9.0	●	\$12,911
Mount Nittany	119	⊖	2.4	1.7	⊖	1.7	⊖	\$14,142
Muncy Valley	0	NR	NR	NR	NR	NR	NR	NR
Pinnacle Health	410	⊖	2.5	5.4	⊖	2.9	⊖	\$14,718
Pocono	46	⊖	3.2	0.0	⊖	2.2	⊖	\$16,458
Robert Packer	60	⊖	2.4	5.0	⊖	0.0	⊖	\$13,083
Shamokin Area Community	0	NR	NR	NR	NR	NR	NR	NR
Soldiers & Sailors	33	⊖	2.8	0.0	⊖	6.1	⊖	\$9,488
Sunbury Community	3	NR	NR	NR	NR	NR	NR	NR
Troy Community	3	NR	NR	NR	NR	NR	NR	NR
Tyler Memorial	18	⊖	2.7	0.0	⊖	5.6	⊖	\$12,455
Wayne Memorial	97	⊖	3.2	0.0	○	2.1	⊖	\$13,554
Waynesboro	58	⊖	2.8	1.7	⊖	6.9	⊖	\$11,918
Williamsport	166	⊖	2.8	2.4	⊖	3.6	⊖	\$11,137
WVHCS	161	⊖	2.6	8.7	●	3.7	⊖	\$11,394
York	367	⊖	2.8	2.2	○	5.4	⊖	\$12,583
Central & Northeastern	4,425		2.5	5.4		3.3		\$14,156
TOTAL: Statewide	15,323		2.6	5.0		5.0		\$26,125

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
  - ⊖ Not significantly different than expected.
  - Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.  
NA Not available. Not reported due to missing/incomplete data.

Hysterectomy - Vaginal					
Hospital	Cases	Length of Stay	Readmission Rating		Average Charge
			For Any Reason	For Complication or Infection	
Barnes Kasson County	1	NR	NR	NR	NR
Berwick	14	2.9	⊙	⊙	\$27,099
Bloomsburg	33	1.2	⊙	⊙	\$12,758
Carlisle Regional	46	1.2	⊙	⊙	\$25,493
Chambersburg	174	1.3	⊙	⊙	\$9,235
Community/Scranton	0	NR	NR	NR	NR
Ephrata Community	30	1.6	⊙	⊙	\$13,572
Evangelical Community	199	1.1	⊙	⊙	\$6,504
Fulton County	0	NR	NR	NR	NR
Geisinger Wilkes-Barre	27	1.5	⊙	⊙	\$27,276
Geisinger Wyoming Valley	11	2.7	⊙	⊙	\$27,546
Geisinger/Danville	105	1.5	⊙	⊙	\$26,054
Gettysburg	18	1.8	⊙	⊙	\$12,068
Good Samaritan/Lebanon	47	1.7	⊙	⊙	\$13,857
Hanover	23	1.6	⊙	⊙	\$13,000
Hazleton General	22	1.7	⊙	⊙	\$14,187
Heart of Lancaster	18	1.7	⊙	⊙	\$23,507
Holy Spirit	28	1.4	⊙	⊙	\$12,604
J C Blair Memorial	8	1.0	⊙	⊙	\$9,833
Jersey Shore	0	NR	NR	NR	NA
Lancaster General	143	1.6	⊙	⊙	\$14,815
Lancaster Regional	0	NR	NR	NR	NR
Lewistown	27	1.1	⊙	⊙	\$11,008
Lock Haven	3	NR	NR	NR	NR

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

Hysterectomy - Vaginal					
Hospital	Cases	Length of Stay	Readmission Rating		Average Charge
			For Any Reason	For Complication or Infection	
Marian Community	0	NR	NR	NR	NR
Memorial York	17	1.6	⊖	⊖	\$9,923
Memorial/Towanda	14	1.7	⊖	⊖	\$14,224
Mercy/Scranton	9	1.6	●	●	\$15,676
Milton S Hershey	85	1.2	⊖	⊖	\$9,345
Moses Taylor	15	2.1	⊖	⊖	\$11,681
Mount Nittany	59	1.4	⊖	⊖	\$15,037
Muncy Valley	0	NR	NR	NR	NR
Pinnacle Health	212	1.5	⊖	⊖	\$12,547
Pocono	8	1.5	⊖	⊖	\$15,423
Robert Packer	28	1.1	●	●	\$11,541
Shamokin Area Community	1	NR	NR	NR	NR
Soldiers & Sailors	7	1.0	⊖	⊖	\$17,864
Sunbury Community	8	1.7	⊖	⊖	\$21,490
Troy Community	0	NR	NR	NR	NR
Tyler Memorial	1	NR	NR	NR	NR
Wayne Memorial	12	2.6	⊖	⊖	\$14,880
Waynesboro	27	1.6	⊖	⊖	\$12,381
Williamsport	32	1.7	⊖	⊖	\$10,274
WVHCS	92	1.4	⊖	⊖	\$10,505
York	73	1.5	⊖	⊖	\$9,498
Central & Northeastern	1,677	1.4			\$13,212
TOTAL: Statewide	6,158	1.6			\$19,766

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊕ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

Prostatectomy - Radical							
Hospital	Cases	Length of Stay	Outlier Cases				Average Charge
			Short Length of Stay		Long Length of Stay		
			%	Rating†	%	Rating†	
Barnes Kasson County	0	NR	NR	NR	NR	NR	NR
Berwick	3	NR	NR	NR	NR	NR	NR
Bloomsburg	9	3.2	0.0	⊖	10.0	⊖	\$25,486
Carlisle Regional	4	NR	NR	NR	NR	NR	NR
Chambersburg	43	2.3	0.0	⊖	2.3	⊖	\$14,977
Community/Scranton	0	NR	NR	NR	NR	NR	NR
Ephrata Community	9	3.1	0.0	⊖	11.1	⊖	\$15,947
Evangelical Community	20	2.8	0.0	⊖	0.0	⊖	\$8,911
Fulton County	0	NR	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	9	1.4	11.1	⊖	0.0	⊖	\$29,789
Geisinger Wyoming Valley	2	NR	NR	NR	NR	NR	NR
Geisinger/Danville	98	1.2	7.1	⊖	0.0	⊖	\$46,965
Gettysburg	0	NR	NR	NR	NR	NR	NR
Good Samaritan/Lebanon	40	3.1	5.0	⊖	10.0	⊖	\$26,991
Hanover	3	NR	NR	NR	NR	NR	NR
Hazleton General	8	3.7	0.0	⊖	0.0	⊖	\$17,694
Heart of Lancaster	1	NR	NR	NR	NR	NR	NR
Holy Spirit	9	3.5	0.0	⊖	0.0	⊖	\$21,166
J C Blair Memorial	0	NR	NR	NR	NR	NR	NR
Jersey Shore	0	NR	NR	NR	NR	NR	NA
Lancaster General	47	2.7	2.1	⊖	6.4	⊖	\$18,556
Lancaster Regional	137	1.5	3.6	⊖	2.9	⊖	\$41,584
Lewistown	0	NR	NR	NR	NR	NR	NR
Lock Haven	6	3.8	0.0	⊖	16.7	⊖	\$45,086

- Significantly higher than expected.
- ⊖ Not significantly different than expected.
- ⊖ Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

\*While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

## Prostatectomy - Radical

Hospital	Cases	Length of Stay	Outlier Cases				Average Charge
			Short Length of Stay		Long Length of Stay		
			%	Rating†	%	Rating†	
Marian Community	0	NR	NR	NR	NR	NR	NR
Memorial York	1	NR	NR	NR	NR	NR	NR
Memorial/Towanda	0	NR	NR	NR	NR	NR	NR
Mercy/Scranton	73	1.9	8.1	○	1.4	○	\$26,714
Milton S Hershey	40	2.4	4.9	○	7.3	○	\$21,318
Moses Taylor	7	2.5	0.0	○	0.0	○	\$14,710
Mount Nittany	12	2.8	0.0	○	0.0	○	\$21,606
Muncy Valley	0	NR	NR	NR	NR	NR	NR
Pinnacle Health	72	3.4	1.4	○	8.2	○	\$29,048
Pocono	9	3.3	0.0	○	0.0	○	\$22,160
Robert Packer	19	3.9	0.0	○	15.0	○	\$30,944
Shamokin Area Community	0	NR	NR	NR	NR	NR	NR
Soldiers & Sailors	0	NR	NR	NR	NR	NR	NR
Sunbury Community	2	NR	NR	NR	NR	NR	NR
Troy Community	0	NR	NR	NR	NR	NR	NR
Tyler Memorial	0	NR	NR	NR	NR	NR	NR
Wayne Memorial	4	NR	NR	NR	NR	NR	NR
Waynesboro	0	NR	NR	NR	NR	NR	NR
Williamsport	38	2.9	0.0	○	5.1	○	\$18,928
WVHCS	22	3.5	4.5	○	18.2	●	\$20,943
York	17	2.6	5.9	○	0.0	○	\$14,692
Central & Northeastern	764	2.4	3.5		4.8		\$29,529
TOTAL: Statewide	3,979	2.3	5.0		5.0		\$41,968

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

†While lower-than-expected and higher-than-expected ratings for mortality or readmissions may suggest good performance or opportunities for improvement, respectively, similar ratings for the short or long length of stay outlier measures are meant to be a tool to help hospitals identify variation in utilization patterns.

- Significantly higher than expected.
- Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

Prostatectomy - Transurethral				
Hospital	Cases	Mortality Rating	Length of Stay	Average Charge
Barnes Kasson County	0	NR	NR	NR
Berwick	6	⊙	2.0	\$19,856
Bloomsburg	9	⊙	1.8	\$15,788
Carlisle Regional	16	⊙	1.0	\$18,933
Chambersburg	29	⊙	1.9	\$12,318
Community/Scranton	7	⊙	1.9	\$10,206
Ephrata Community	10	⊙	2.1	\$9,811
Evangelical Community	14	⊙	2.2	\$6,774
Fulton County	0	NR	NR	NR
Geisinger Wilkes-Barre	4	NR	NR	NR
Geisinger Wyoming Valley	6	●	2.3	NR
Geisinger/Danville	2	NR	NR	NR
Gettysburg	2	NR	NR	NR
Good Samaritan/Lebanon	30	⊙	2.6	\$14,835
Hanover	4	NR	NR	NR
Hazleton General	12	⊙	3.2	\$11,784
Heart of Lancaster	8	⊙	2.7	\$17,061
Holy Spirit	42	⊙	2.4	\$11,176
J C Blair Memorial	10	⊙	2.4	\$9,627
Jersey Shore	0	NR	NR	NA
Lancaster General	34	⊙	2.1	\$13,318
Lancaster Regional	6	⊙	1.2	\$16,689
Lewistown	3	NR	NR	NR
Lock Haven	7	⊙	2.2	\$17,783

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

Prostatectomy - Transurethral				
Hospital	Cases	Mortality Rating	Length of Stay	Average Charge
Marian Community	0	NR	NR	NR
Memorial York	27	⊙	3.5	\$8,589
Memorial/Towanda	3	NR	NR	NR
Mercy/Scranton	22	⊙	2.4	\$12,292
Milton S Hershey	11	●	1.7	\$12,401
Moses Taylor	7	⊙	2.1	\$11,342
Mount Nittany	26	⊙	2.3	\$12,538
Muncy Valley	0	NR	NR	NR
Pinnacle Health	65	⊙	2.6	\$12,043
Pocono	70	⊙	2.4	\$11,226
Robert Packer	18	⊙	1.5	\$9,158
Shamokin Area Community	43	⊙	1.6	\$6,592
Soldiers & Sailors	16	⊙	2.8	\$9,403
Sunbury Community	29	⊙	1.3	\$13,765
Troy Community	0	NR	NR	NR
Tyler Memorial	0	NR	NR	NR
Wayne Memorial	6	⊙	2.4	NR
Waynesboro	0	NR	NR	NR
Williamsport	43	⊙	2.4	\$12,576
WVHCS	36	⊙	2.7	\$13,293
York	68	⊙	2.4	\$8,066
Central & Northeastern	751		2.3	\$11,658
TOTAL: Statewide	3,446		2.6	\$18,499

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.

Removal of Blockage of Neck Muscles						
Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Barnes Kasson County	0	NR	NR	NR	NR	NR
Berwick	5	⊙	3.6	●	⊙	\$43,592
Bloomsburg	0	NR	NR	NR	NR	NR
Carlisle Regional	50	⊙	2.8	○	⊙	\$36,081
Chambersburg	30	●	2.7	⊙	⊙	\$17,762
Community/Scranton	83	⊙	2.6	⊙	⊙	\$19,392
Ephrata Community	32	⊙	2.3	⊙	⊙	\$16,281
Evangelical Community	41	⊙	1.0	⊙	⊙	\$9,452
Fulton County	0	NR	NR	NR	NR	NR
Geisinger Wilkes-Barre	24	⊙	2.4	⊙	⊙	\$23,916
Geisinger Wyoming Valley	61	⊙	1.5	⊙	⊙	\$25,147
Geisinger/Danville	106	⊙	1.3	⊙	⊙	\$25,938
Gettysburg	0	NR	NR	NR	NR	NR
Good Samaritan/Lebanon	48	⊙	2.9	●	●	\$21,258
Hanover	27	⊙	2.0	⊙	⊙	\$14,934
Hazleton General	2	NR	NR	NR	NR	NR
Heart of Lancaster	0	NR	NR	NR	NR	NR
Holy Spirit	64	⊙	2.3	⊙	⊙	\$16,220
J C Blair Memorial	0	NR	NR	NR	NR	NR
Jersey Shore	0	NR	NR	NR	NR	NA
Lancaster General	162	⊙	2.8	⊙	⊙	\$17,836
Lancaster Regional	14	⊙	1.7	⊙	⊙	\$30,992
Lewistown	10	⊙	2.2	⊙	⊙	\$8,127
Lock Haven	0	NR	NR	NR	NR	NR

● Significantly higher than expected.  
 ⊙ Not significantly different than expected.  
 ○ Significantly lower than expected.  
 NR Not reported. Had fewer than five cases evaluated.  
 NA Not available. Not reported due to missing/incomplete data.

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.



Removal of Blockage of Neck Muscles						
Hospital	Cases	Mortality Rating	Length of Stay	Readmission Rating		Average Charge
				For Any Reason	For Complication or Infection	
Marian Community	15	⊙	2.5	⊙	⊙	\$11,403
Memorial York	0	NR	NR	NR	NR	NR
Memorial/Towanda	0	NR	NR	NR	NR	NR
Mercy/Scranton	48	⊙	1.9	⊙	⊙	\$17,971
Milton S Hershey	43	⊙	1.5	⊙	⊙	\$20,908
Moses Taylor	9	⊙	3.0	⊙	⊙	\$19,860
Mount Nittany	31	⊙	2.7	⊙	⊙	\$15,279
Muncy Valley	0	NR	NR	NR	NR	NR
Pinnacle Health	47	⊙	2.4	⊙	⊙	\$17,289
Pocono	56	⊙	1.5	⊙	⊙	\$15,082
Robert Packer	44	⊙	1.6	⊙	⊙	\$17,959
Shamokin Area Community	0	NR	NR	NR	NR	NR
Soldiers & Sailors	0	NR	NR	NR	NR	NR
Sunbury Community	1	NR	NR	NR	NR	NR
Troy Community	0	NR	NR	NR	NR	NR
Tyler Memorial	0	NR	NR	NR	NR	NR
Wayne Memorial	0	NR	NR	NR	NR	NR
Waynesboro	0	NR	NR	NR	NR	NR
Williamsport	67	⊙	2.0	⊙	⊙	\$15,623
WVHCS	81	⊙	2.1	⊙	⊙	\$15,285
York	79	⊙	1.7	⊙	⊙	\$11,182
Central & Northeastern	1,280		2.1			\$18,876
TOTAL: Statewide	4,823		2.3			\$28,652

The mortality, length of stay and readmission figures account for varying illness levels among patients. See page 4.

- Significantly higher than expected.
- ⊙ Not significantly different than expected.
- Significantly lower than expected.
- NR Not reported. Had fewer than five cases evaluated.
- NA Not available. Not reported due to missing/incomplete data.



## **Pennsylvania Health Care Cost Containment Council**

**David Wilderman, Acting Executive Director**

**225 Market Street, Suite 400, Harrisburg, PA 17101**

**Phone: 717-232-6787 • Fax: 717-232-3821**

**[www.phc4.org](http://www.phc4.org)**

Hospitals may have commented on this report. Copies of their comments are available on the PHC4 Web site or by request.