Hospital Outcomes Program Year Three Report to the Pennsylvania General Assembly March 1, 2022

Commonwealth of Pennsylvania Department of Human Services





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Introduction and Background

The Act of June 22, 2018 (P.L. 258, No. 40) (Act 40) contained provisions, hereinafter, referred to as the Health Care Outcomes provisions¹, that required the Department of Human Services (Department) to establish Medicaid outcomes-based programs within the Commonwealth of Pennsylvania's Medical Assistance (MA) program to provide hospitals and MA managed care organizations (MCOs) with information to reduce potentially avoidable events (PAEs) and further increase efficiency in Medicaid hospital services.

The Health Care Outcomes provisions define PAEs, as consisting of the following:

- Potentially avoidable readmissions (PAR).
- · Potentially avoidable admissions (PAA).
- Potentially avoidable complications (PAC).
- · Potentially avoidable emergency visits (PAV).
- A combination of the events listed above.

This report is intended to provide an overview of the Hospital Outcomes program to the General Assembly. As this is the third year of the program, a year over year comparison of the two most recent years is provided. This report is delivered in a detailed graphical format to allow hospitals and the Department to gain greater insight into the current findings in order to take necessary action to improve performance in the future. The findings for CY 2019 also capture the Department's Community HealthChoices (CHC) program, which was not included in previous

¹ 62 P.S. §§ 501-a–536-a.

years (described further in Section 4). The findings are presented by geographical zone as defined in the Department's Physical Health (PH) HealthChoices and CHC programs.

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Overview of Legislative Requirements

The Health Care Outcomes provisions include several requirements. One of the requirements is for the Department to conduct an analysis of the Medicaid Program and produce a report describing how hospitals and MCOs can improve efficiency and outcomes by reducing PAEs. The Department conducted the required analysis and produced a report titled "Comprehensive Analysis Health Care Outcomes Report to the Pennsylvania General Assembly". This report, which provides a detailed description of the legislative requirements and the methodology used to select PAEs, the results of the analysis, and recommendations, was delivered to the General Assembly on December 31, 2019. A revised report was delivered to the General Assembly on February 28, 2020. For more information regarding the Comprehensive analysis, please refer to the full report which can be found at the following location:

https://www.dhs.pa.gov/docs/Publications/Documents/Highlighted%20Reports/Health%20Care%20Outcomes Final 20200228.pdf

A second requirement in the Health Care Outcomes provisions is that the Department provide a progress report to the General Assembly by March 1, 2020 and each March 1 thereafter. This document titled "Hospital Outcomes Program — Year Three" serves as the third year report.

The Health Care Outcomes provisions provide that the requirements of the Hospital Outcomes Program apply to all general acute care hospitals participating in the Medicaid program and specify that the PAEs to be used are PAR and PAC. As this is the third year of the analysis, a year over year comparison of the two most recent years is included. An MCO outcomes program report is also required and will be provided as a separate report titled "Managed Care Organization Outcomes Program — Year Three."

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Potentially Avoidable Event Methodology

The Department is required to select a clinical categorical PAE methodology that will provide performance information at both the aggregate and case level. The methodology must include risk adjustment scoring to account for patient severity of illness and the population's chronic illness burden. Mercer Government Human Services Consulting (Mercer), part of Mercer Health & Benefits LLC, the Commonwealth's independent actuary who prepared this analysis, has developed the suite of clinical efficiencies which were selected as the methodology for identifying the PAE of PAR. Mercer worked under the direction of the Department to leverage the clinical efficiencies consistent with managed care rate setting to meet the requirements of the Health Care Outcomes provisions.

The methodology selected to determine PAC is consistent with the Centers for Medicare & Medicaid Services (CMS) definition related to provider preventable conditions (PPC). PPCs include both health care acquired conditions (HCAC) and other provider preventable conditions (OPPC), representing injuries or illnesses, or never events, that occurred while in the hospital.

The methodology utilized in year three of this analysis is consistent with the methodology used in the prior two years and consistent with the methodology utilized in managed care rate setting to adjust for inpatient inefficiencies. Mercer utilizes the most current version of the applicable software. In some instances, this may result in changes to the identification of certain PAEs as code sets are retired or replaced.

Data Sources

Mercer utilized PH HealthChoices and CHC encounter data for beneficiaries served through the managed care program and fee-for-service (FFS) claims data for beneficiaries served through the FFS program. In order to align with the data utilized in the development of calendar year (CY) 2022 PH HealthChoices and CHC managed care capitation rates, the data used in this analysis includes services provided to MCO members and FFS beneficiaries for service dates January 1, 2019 through December 31, 2019. As with the 2021 PAE analysis, data utilized for the PAE analysis include inpatient services.

The CY 2019 CHC encounter data utilized in the current analysis is limited to the Southwest and Southeast zones, as the CHC program was implemented in a multi-year regional phase-in. CHC was implemented in the remainder of the Commonwealth in CY 2020.

The following should be considered when reviewing the results of the analysis:

- 1. All data considered in this analysis was submitted by either FFS providers, PH HealthChoices MCOs, or CHC-MCOs through Provider Reimbursement and Operations Management Information System (PROMISe^{TM)}. No adjustments were made to account for misreporting or underreporting of data.
- Identified PAEs and associated dollars within Mercer's analyses are not intended to express an opinion on the medical necessity of an event or imply a particular event is avoidable in a particular instance. Instead, the analysis serves to identify and quantify opportunities for improvement, which may exist within the Medicaid delivery system.
- 3. Costs associated with PAEs are displayed in total prior to adjustments applied as part of the managed care rate-setting process.
- 4. Hospitals included in the analysis are identified using a list of general acute care hospitals provided by the Department to Mercer, and are included in Appendix H.
- 5. The PAC analysis is specific to inpatient facilities and does not consider long-term care facilities.
- 6. FFS claims data includes beneficiaries who received services through the FFS delivery system during CY 2019 and exclude members who are dually eligible (eligible for both Medicare and Medicaid).
- 7. The Department grouped results for the MA hospitals by PH HealthChoices and CHC zones.

Potentially Avoidable Event Process

Each PAE is identified following an established process that is described below.



Medically necessary treatment and services are services or supplies that are needed to diagnose or treat a patient's condition, disease, or its symptoms. A condition that is medically necessary can also be potentially avoidable. See 55 Pa. Code § 1101.21.

Example: If an individual with a history of asthma is admitted to a hospital because of intense shortness of breath and bluish lips, the admission is likely medically necessary. If the individual had received appropriate medication and evidence-based treatment in an outpatient setting, the asthma symptoms may not have progressed to the point at which the individual needed to be hospitalized. In other words, the admission was potentially avoidable even though it may have been medically necessary.

Potentially Avoidable Readmissions (PARs)

PARs are return hospitalizations within a 30-day period that may have resulted from a deficiency in the care or treatment provided to the beneficiary during a previous hospital stay or from a deficiency in post-hospital discharge follow up. The readmission analysis for both FFS and managed care considers all hospital readmissions within 30 days of a previous discharge for the same beneficiary at any facility and any diagnosis-related group (DRG). Mercer applied exclusionary criteria for certain conditions referred to as clinical global exclusions (e.g., indications of trauma, cancer, burns, HIV/AIDS). These clinical global exclusions are made for conditions and situations that may require more complex treatment for beneficiaries. Any beneficiary identified as having a clinical global exclusion is excluded from PAR analyses.

After clinical global exclusions are considered, Mercer clinicians review all remaining readmissions to determine if the readmission should be considered potentially avoidable. Readmissions are not considered potentially avoidable when:

- Readmissions are for conditions unrelated to the previous admission.
- Beneficiaries chose to leave against medical advice.
- Beneficiaries were three years of age and under or 85 years of age and older.
- There is evidence of transition of care as reflected by the presence of a claim for a visit to a primary care provider, specialist, or a clinic such as a federally qualified health center after the hospital discharge and prior to the readmission.
- Beneficiaries were discharged due to death or placement into hospice.

Potentially Avoidable Complications (PACs)

PACs are harmful events or negative outcomes, including an infection or surgical complication, which occur after the beneficiary's admission to a hospital or may have resulted from the care, lack of care, or treatment provided during the hospital stay, rather than from a natural progression of an underlying illness.

The complications analysis is consistent with the conditions defined as PPCs by CMS and includes both HCACs and OPPCs. CMS has published a list of HCACs and their specifications, which is available on the CMS website.²

HCACs are medical complications or conditions that were not present when the patient was admitted to the hospital and develop during the hospitalization. Examples of HCACs include hospital acquired infections and injuries due to falls. If the condition was present when the individual was admitted to the hospital, it is considered present on admission (POA). When the condition is POA it is not considered a HCAC.

Federal law, as well as the Department's policy, precludes payment for HCACs. The Department has evaluated its policy and surveyed its MCOs and determined that processes are in place and effective to prevent payment to providers related to HCACs. The Department has concluded that there is no cost to MA related to PPCs. Therefore, this analysis includes an examination of the numbers and types of PPCs as an indicator of the quality of care provided by hospitals. However, the analysis does not include a process to evaluate cost.

In addition to not paying for HCACs, federal law precludes Medicaid programs from paying for the following OPPCs, which are also referred to as "never-events"³.

- Wrong surgical or other invasive procedure performed on a patient.
- Surgical or other invasive procedure performed on the wrong body part.
- Surgical or other invasive procedure performed on the wrong patient.

No utilization related to OPPCs was identified in the PH HealthChoices, CHC, or FFS utilization data; therefore, no further analysis regarding OPPCs is included in this analysis.

 $^{^2 \} CMS. Gov, \ ICD-10 \ HAC \ List, \ available \ at: \ \underline{https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/icd10_hacs.html}.$

³ Medicaid.gov. Provider Preventable Conditions. Available at: https://www.medicaid.gov/medicaid/finance/provider-preventable-conditions/index.html.

Zone Criteria

For purposes of this analysis, the results are calculated on a statewide basis and by geographical zone as defined in the Department's PH HealthChoices and CHC programs. Hospital results are assigned to a geographical zone based on the physical location of the hospital based on county.

Each zone will reflect its own unique member and hospital composition as well as a rural and urban mix. All results should be reviewed in consideration of these potential zone variations (i.e., there may be more PAEs identified as a proportion of overall admits/visits based on geography).

Risk Adjustment

The Health Care Outcomes provisions require risk adjustment scoring to account for severity of illness and population chronic illness burden. To account for the acuity differences inherent in the data, Mercer calculated the acuity utilizing all patient refined-diagnosis related groups (APR-DRG) relative value weights from the inpatient encounter and claims data. These acuity factors were not directly applied within the results but are, instead, intended to inform the overall acuity level of the events being analyzed. The risk-adjustment approach for each PAE is as follows:

- 1. **PAR** An average APR-DRG relative value weight (case mix index [CMI]) was calculated by hospital for all admissions. APR-DRGs classify patients according to their reason of admission. Each APR-DRG is assigned a value weight for severity of illness and risk of mortality. The CMI is calculated by aggregating all assigned value weights and dividing by the number of admissions.
- 2. PAC Because PACs were not paid for in the Medicaid program, no risk-adjustment analysis was performed.

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Hospital Results

An evaluation of the year three data suggests opportunities exist to improve the efficiency of how care and services are delivered.

The accompanying information is provided in graphical format by geographical zone to assist the Department and hospitals in the identification of opportunities to develop interventions that will improve patient care and decrease avoidable cost.

The table and figure below display the statewide results of the PAEs applicable to hospitals. The following should be noted for each Health Care Outcomes data year:

- CY 2018 data:
 - Data includes PH HealthChoices MCOs.
 - Data includes FFS beneficiaries.
 - CHC-MCO data was excluded from the CY 2018 results due to known data validation and credibility issues stemming from it being the first year of the program.
- CY 2019 data:
 - Data includes PH HealthChoices MCOs.
 - Data includes FFS beneficiaries.
 - Data includes CHC-MCOs for applicable zones.
 - As the CHC program was implemented with a multi-year regional phase-in, CY 2019 CHC results are limited to the Southwest and Southeast zones. CHC was implemented in the remainder of the Commonwealth in CY 2020.

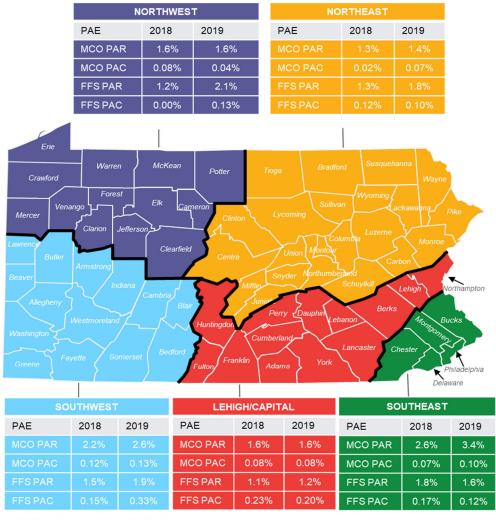
Table 1 — Hospital Results for PAEs and Cost for Both MCO and FFS Beneficiaries

Description of PAEs	Number of PAEs	Number of PAEs	% of Admits	% of Admits	Cost Associated With PAEs*	Cost Associated With PAEs*	% of Inpatient Cost	% of Inpatient Cost
	CY 2018	CY 2019	CY 2018 CY 2019		CY 2018	CY 2019	CY 2018	CY 2019
			Medica	id MCO Benefi	ciaries			
PAR	5,143	6,384	2.1%	2.5%	\$52,628,726	\$68,062,985	2.3%	2.7%
PAC	204	252	0.1%	0.1%	\$0	\$0	0.0%	0.0%
			Medica	aid FFS Benefic	ciaries			
PAR	545	537	1.5%	1.6%	\$8,692,523	\$8,104,725	2.0%	2.0%
PAC	62	58	0.2%	0.2%	\$0	\$0	0.0%	0.0%
Total	5,954	7,231	2.1%	2.5%	\$61,321,248	\$76,167,710	2.3%	2.6%

^{*} Costs in the table may differ from results provided directly to the MCOs as part of rate setting, as costs associated with PAEs are displayed prior to replacement costs, other adjustments, and/or rounding.

PAR cost amounts are separate from any recoupment activities that may have occurred by either the MCOs or through the FFS program.

Figure 1 — PAE (as a percent of total admits) Hospital Results by PH HealthChoices and CHC Program Zones



> PAR – Potentially Avoidable Readmission

> PAC - Potentially Avoidable Complications

Overall, combined PAEs across MCO and FFS beneficiaries increased by 1,277 PAEs from 5,954 in CY 2018 to 7,231 in CY 2019. Similarly, the total dollars increased slightly by \$14.8 million from \$61.3 million in CY 2018 to \$76.2 million in CY 2019.

MCO Beneficiary Results

PARs as a percent of admissions has increased from 2.1% to 2.5% for MCO beneficiaries. This was primarily driven by the inclusion of CHC beneficiaries in the CY 2019 data (i.e., Southwest and Southeast zones), as it was noted that these beneficiaries tend to experience a higher PAR rate (8.1%) compared to PH HealthChoices beneficiaries (2.2%).

The cost associated with PARs increased about \$15.4 million from approximately \$52.6 million to \$68.1 million. The increased dollars were driven by the addition of the CHC population in CY 2019, who on average had a higher PAR rate when compared to the PH HealthChoices population. In addition, it was also noted that the average cost per PAR for CHC beneficiaries was higher as compared to PH HealthChoices beneficiaries. A cost increase would be anticipated as the CHC population generally have more complex needs and can be more costly to treat. The increase in cost and complexity is demonstrated by the increase in the statewide Hospital CMI for MCO beneficiaries, from 1.072 in CY 2018 to 1.155 in CY 2019 (approximately a 7.7% increase), indicating an overall statewide increase in patient acuity.

Table 2 below displays the 20 most frequent APR-DRGs for PARs. In addition, a comparison to the prior year is displayed including the percentage change in both occurrence and identified cost.

The following APR-DRGs had the most notable increases in occurrence:

- SEPTICEMIA & DISSEMINATED INFECTIONS
- RESPIRATORY FAILURE
- HEART FAILURE
- CHRONIC OBSTRUCTIVE PULMONARY DISEASE

The following APR-DRGs had the most notable decreases in occurrence:

- CELLULITIS & OTHER SKIN INFECTIONS
- OTHER PNEUMONIA
- ASTHMA
- ALCOHOLIC LIVER DISEASE

Table 2 — PAR by APR-DRG MCO Beneficiaries

APR-DRG Number	APR-DRG Description	Number of PAEs	Number of PAEs	PAE % Change	Cost Associated With PAEs	Cost Associated With PAEs	Cost % Change
		CY 2018	CY 2019		CY 2018	CY 2019	
420	DIABETES	372	427	15%	\$2,340,504	\$3,201,832	37%
662	SICKLE CELL ANEMIA CRISIS	360	408	13%	\$2,547,882	\$2,835,348	11%
720	SEPTICEMIA & DISSEMINATED INFECTIONS	214	347	62%	\$3,197,444	\$4,793,082	50%
140	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	207	280	35%	\$1,764,696	\$2,345,440	33%
194	HEART FAILURE	197	272	38%	\$2,164,721	\$3,046,870	41%
775	ALCOHOL ABUSE & DEPENDENCE	183	237	30%	\$795,839	\$1,176,796	48%
282	DISORDERS OF PANCREAS EXCEPT MALIGNANCY	149	207	39%	\$1,183,157	\$1,353,984	14%

APR-DRG Number	APR-DRG Description	Number of PAEs	Number of PAEs	PAE % Change	Cost Associated With PAEs	Cost Associated With PAEs	Cost % Change
		CY 2018	CY 2019		CY 2018	CY 2019	
133	RESPIRATORY FAILURE	60	192	220%	\$808,010	\$2,296,656	184%
53	SEIZURE	53	115	117%	\$534,560	\$1,296,412	143%
280	ALCOHOLIC LIVER DISEASE	109	106	-3%	\$1,306,135	\$1,065,694	-18%
469	ACUTE KIDNEY INJURY	90	103	14%	\$962,318	\$947,567	-2%
425	OTHER NONHYPOVOLEMIC ELECTROLYTE DISORDERS	85	98	15%	\$608,469	\$1,223,188	101%
141	ASTHMA	101	94	-7%	\$705,210	\$591,896	-16%
201	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS	54	90	67%	\$712,027	\$1,108,889	56%
383	CELLULITIS & OTHER SKIN INFECTIONS	128	84	-34%	\$1,188,656	\$741,981	-38%
710	INFECTIOUS & PARASITIC DISEASES INCLUDING HIV W O.R. PROCEDURE	43	82	91%	\$522,711	\$1,320,956	153%
139	OTHER PNEUMONIA	88	80	-9%	\$1,425,686	\$958,474	-33%
816	TOXIC EFFECTS OF NON-MEDICINAL SUBSTANCES	65	78	20%	\$397,333	\$575,323	45%
254	OTHER DIGESTIVE SYSTEM DIAGNOSES	72	71	-1%	\$656,165	\$661,720	1%

APR-DRG Number	APR-DRG Description	Number of PAEs	Number of PAEs		Cost Associated With PAEs	Associated	
		CY 2018	CY 2019		CY 2018	CY 2019	
137	MAJOR RESPIRATORY INFECTIONS & INFLAMMATIONS	30	67	123%	\$380,622	\$1,285,375	238%

PACs increased from 208 to 256 for MCO beneficiaries. A portion of the increase is due to the inclusion of CHC experience in the Year Three analysis. Of the 256 PACs, 28 were associated with CHC. Overall, the MCO experience of PACs remains flat year over year at 0.1% of total admits.

FFS Beneficiary Results

PARs as a percent of admissions has increased from 1.5% in CY 2018 to 1.6% in CY 2019 for those served through the FFS delivery system. The cost associated with PARs decreased from approximately \$8.7 million in CY 2018 to \$8.1 million in CY 2019, which may be driven by the implementation of CHC in the Southeast zone in CY 2019. The statewide Hospital CMI for FFS beneficiaries increased marginally from CY 2018 (1.393) to CY 2019 (1.399) indicating overall consistent patient acuity.

Table 3 below displays the 20 most frequent APR-DRGs for PARs. In addition, a comparison to the prior year is displayed including the percentage change in both occurrence and identified cost.

The following APR-DRGs had the most notable increases in occurrence:

- SKIN ULCERS
- DIABETES
- OTHER NON-HYPOVOLEMIC ELECTROLYTE DISORDERS
- KIDNEY & URINARY TRACT INFECTIONS

The following APR-DRGs had the most notable decreases in occurrence:

- CARDIAC CATHETERIZATION FOR OTHER NON-CORONARY CONDITIONS
- HEART FAILURE
- SEPTICEMIA & DISSEMINATED INFECTIONS
- ALCOHOLIC LIVER DISEASE

Table 3 — PAR by APR-DRG FFS Beneficiaries

APR-DRG Number	APR-DRG Description	Number of PAEs	Number of PAEs	PAE % Change	Cost Associated With PAEs	Cost Associated With PAEs	Cost % Change
		CY 2018	CY 2019		CY 2018	CY 2019	
720	SEPTICEMIA & DISSEMINATED INFECTIONS	53	49	-8%	\$1,291,583	\$930,652	-28%
194	HEART FAILURE	29	24	-17%	\$537,983	\$358,164	-33%
420	DIABETES	13	20	54%	\$126,111	\$219,452	74%
775	ALCOHOL ABUSE & DEPENDENCE	17	20	18%	\$71,722	\$109,113	52%
280	ALCOHOLIC LIVER DISEASE	18	15	-17%	\$317,604	\$152,620	-52%
469	ACUTE KIDNEY INJURY	8	13	63%	\$81,020	\$201,094	148%
192	CARDIAC CATHETERIZATION FOR OTHER NON- CORONARY CONDITIONS	18	12	-33%	\$308,666	\$431,923	40%
710	INFECTIOUS & PARASITIC DISEASES INCLUDING HIV W O.R. PROCEDURE	12	12	0%	\$131,393	\$258,359	97%
425	OTHER NON-HYPOVOLEMIC ELECTROLYTE DISORDERS	6	12	100%	\$44,424	\$166,741	275%
466	MALFUNCTION, REACTION, COMPLIC OF GENITOURINARY DEVICE OR PROC	7	11	57%	\$114,650	\$188,277	64%

APR-DRG Number	APR-DRG Description	Number of PAEs	Number of PAEs	PAE % Change	Cost Associated With PAEs	Cost Associated With PAEs	Cost % Change
		CY 2018	CY 2019		CY 2018	CY 2019	
253	OTHER & UNSPECIFIED GASTROINTESTINAL HEMORRHAGE	6	10	67%	\$74,205	\$151,391	104%
139	OTHER PNEUMONIA	9	10	11%	\$114,561	\$125,029	9%
133	RESPIRATORY FAILURE	11	10	-9%	\$132,790	\$121,753	-8%
463	KIDNEY & URINARY TRACT INFECTIONS	4	10	150%	\$29,280	\$117,040	300%
662	SICKLE CELL ANEMIA CRISIS	10	10	0%	\$58,156	\$81,389	40%
53	SEIZURE	7	9	29%	\$41,517	\$81,359	96%
380	SKIN ULCERS	0	8	0%	\$0	\$116,421	0%
241	PEPTIC ULCER & GASTRITIS	2	8	300%	\$15,555	\$100,624	547%
383	CELLULITIS & OTHER SKIN INFECTIONS	8	8	0%	\$130,026	\$83,962	-35%
254	OTHER DIGESTIVE SYSTEM DIAGNOSES	5	8	60%	\$46,060	\$62,371	35%

PACs decreased from 64 to 59 for FFS beneficiaries. This represents fairly consistent performance in CY 2019 as compared to CY 2018.

Overall

The Department's efficiency adjustments, which are part of the PH HealthChoices and CHC rate-setting process, took into account the \$68.1 million of PARs for MCO beneficiaries.

In order to provide the data in a format that will provide the most descriptive information the year two results are graphically displayed by PAE and by zone in Appendices A–D. Appendices A–B relate to beneficiaries enrolled in MCOs while Appendices C–D relate to beneficiaries served in the FFS program.

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Next Steps

The analyses included in this report address the requirements of Health Care Outcomes provisions regarding development of a Hospital Outcomes Program. The hospital level analyses will be completed and ready for distribution to each hospital in the second calendar quarter of 2022. A template of the analysis that will be provided to each hospital is included as Appendices F and G.

In order to identify opportunities for the hospitals to reduce PAEs, the Department is focusing on the following efforts. In addition, the Department released the 2019–2022 Strategic Plan⁴ and continues to strengthen the strategies included in the document through the efforts below.

Effective CY 2020, the mandatory managed care program for dually eligible individuals and individuals with physical disabilities, CHC, was implemented statewide, and the MCOs manage most hospital utilizations. At the same time, the Department will continue to identify opportunities to work with the Pennsylvania hospital community directly and through the Hospital and Healthsystem Association of Pennsylvania.

- 1. In the FFS delivery system, the following payment policy is in place for readmissions for the same beneficiaries for the same facility, which is provided in MA Bulletin 01-11-44 Revised Payment Policy for Hospital Readmissions. It establishes the Department's payment policy for readmissions as below:
 - A. If the readmission is for the treatment of conditions that could or should have been treated during the previous admission, the Department shall make no payment in addition to the hospital's original DRG payment. If the combined hospital stay qualifies as an outlier, an outlier payment shall be made.

⁴ Pennsylvania Department of Human Services Strategic Plan 2019–2022 available at https://www.dhs.pa.gov/about/DHS-Information/Pages/Learn-About-DHS.aspx

- B. If the readmission is due to complications of the original diagnosis and the result is a different DRG with a higher payment, the Department shall pay the higher DRG payment rather than the original DRG payment.
- C. If the readmission is due to conditions unrelated to the previous admission, the Department shall consider the readmission as a new admission for payment purposes.
- 2. The Department's Bureau of Program Integrity continues its efforts to identify inappropriate admissions and readmissions in the FFS program. If the inpatient admissions are deemed to be related for the same provider, the provider is notified and payment may be adjusted or recouped. MCOs are responsible for the review of admissions and readmissions of their members. The MCOs establish their own readmission payment policy. Mercer reviews inpatient readmission encounters for annual efficiency adjustments as part of PH HealthChoices rate setting. The Department has increased the amount of rate reduction applied for these inefficiencies to encourage the MCOs to reduce the number of PARs in future rate setting years.
- 3. As part of the strategy, MA providers, including hospitals, are encouraged to focus on Social Determinates of Health (SDOH), which include elements such as access to food, access to health services, education and employment, environmental conditions, income, housing, and relationships, among others are considered responsible for approximately 80% of a person's health outcomes. The focus on improvement of SDOH addresses the whole person's health rather than focusing on specific body systems, diagnoses, or conditions, and to reduce health disparities based on age, race, ethnicity, sex, primary language, and disability status. Through SDOH, the Department will explore the opportunities to reduce health care costs including PAEs.
- 4. The Department administers the Hospital Quality Incentive Program (HQIP), which awards inpatient acute care hospitals serving MA beneficiaries for reducing PAAs which includes readmission as well. Results for CY 2019 of HQIP show 133 out of 168 eligible hospitals achieved reduction in preventable admission rates when compared to the initial year of the program. The information on the program is available at https://www.dhs.pa.gov/providers/Providers/Pages/Hospital-Assessment-Initiative-.aspx. The Department is aligning the methodology for this HQIP with the methodology of the Health Care Outcomes reporting beginning with CY 2022 hospital performance.
- 5. Beginning in CY 2022, the Department will be adding a new HQIP focused on reducing health disparities within the PAAs. The initial year of the incentive payment will provide funding for eligible hospitals to develop and implement data driven policies to reduce inequities in health care provided to MA beneficiaries with race or ethnicity identified as Latino/Hispanic or Non-Hispanic African American.

6. The Department continues to explore options for addressing SDOH through the use of a resource and referral tool. Additionally, the Department has continued to work with the both the PH-MCOs and the Hospital and Healthsystem Association of Pennsylvania on establishing the Regional Accountable Health Councils (RAHCs). Additional information regarding the RAHCs can be found on the Department's website at Health Innovations Resources (pa.gov) (Health Innovations Resources (pa.gov) (https://www.dhs.pa.gov/HealthInnovation/Pages/Health-Innovations-Resources.aspx).

Potentially Avoidable Readmissions — MCO Beneficiaries

Contents

Table Number	Table Title
1	Total Events
2	Total Dollars
3	APR-DRG Case Mix Index
4	Events and Dollars by Age Band and Gender
5	Events and Dollars by Top 10 APR-DRG

The tables identified above are included for each zone. Zone results are displayed in the following order: Southeast, Southwest, Lehigh/Capital, Northeast, and Northwest. This is the third year of the analysis; therefore, both CY 2019 and CY 2018 results are available and displayed as applicable.

Detailed Description of Tables

Table 1 — displays the total number of PAR as a percent of total inpatient hospital admissions. This value is displayed at both the zone and statewide level.

Table 2 — displays the total expenditures related to PAR as a percent of total inpatient hospital expenditures. This value is displayed at both the zone and statewide level.

Table 3 — displays the average APR-DRG CMI for those admissions identified as PARs at the zone and statewide level.⁵ Also displays the APR-DRG average CMI for all admissions at the zone and statewide level.

Table 4 — displays the total number of PAR as a percent of total inpatient hospital admissions by age band and gender. These values are displayed at both the zone and statewide level.

Table 5 — displays the 10 most frequent diagnosis (APR-DRG) in the zone that result in PAR within the zone. These values are displayed at both the zone and statewide level.

Additional Notes Regarding Data

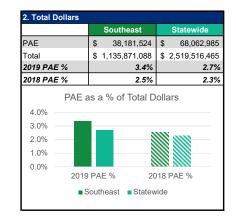
- 1. Admits and Dollars for CY 2019 service dates are based on PH HealthChoices MCO encounter data submitted through September 30, 2020 and CHC-MCO encounter data submitted through December 31, 2020.
- 2. Inpatient is defined as acute inpatient hospital admissions.
- 3. APR-DRGs are assigned by PROMISe system and represent a mix of APR-DRG version 36 and version 37 depending on discharge date. CMI reflects the average APR-DRG relative value weight of all admissions. If APR-DRG relative value weight was not present on the claim, an average relative value weight was assigned. These average relative value weights were calculated at the hospital level.
- 4. There are always at least two admissions related to a PAR. The first admission is referred to as the "anchor admission". When the beneficiary is discharged and admitted again within 30 days, the subsequent admission is referred to as a "readmission". The PAR APR-DRG is assigned based on the anchor admission.

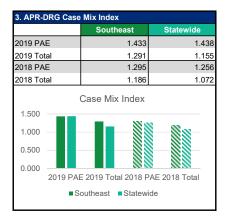
⁵APR-DRGs classify patients according to their reason of admission. Each APR-DRG is assigned a value weight for severity of illness and risk of mortality. The CMI is calculated by aggregating all assigned value weights and dividing by the number of admissions.

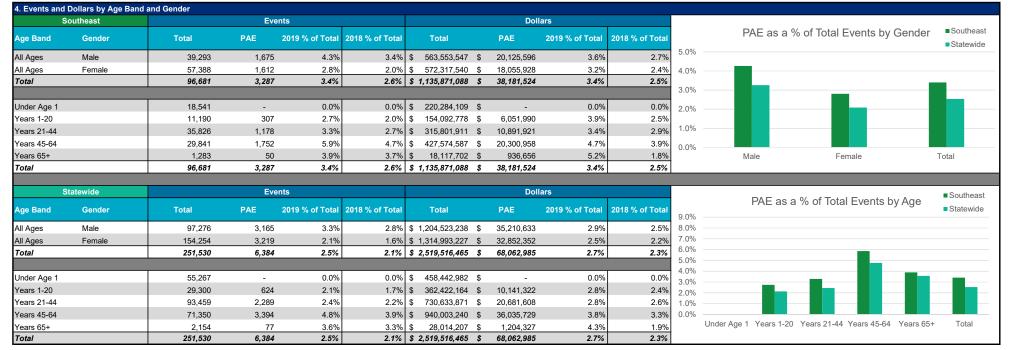
- 5. Replacement costs, which are the costs that would have been incurred to care for the beneficiary in an appropriate setting, are not considered in this analysis.
- 6. Age and gender are assigned using eligibility files provided by the Department.
- 7. Encounters with revenue code 0762 and no room and board code, indicating an observation stay, were excluded from PAR analysis.
- 8. Readmissions are defined as inpatient hospital admissions within 30 days of an admission for the same beneficiary with any DRG at any facility. Not all readmissions within 30 days are considered potentially avoidable. Therefore, Mercer clinicians review readmissions (line by line) to determine if the readmission should be considered potentially avoidable. An admission is not considered potentially avoidable when:
 - A. Beneficiary has a qualifying clinical global exclusion diagnosis (examples include trauma and malignancies).
 - B. Beneficiary is three years of age and under or 85 years of age and older.
 - C. Beneficiary has a qualifying outpatient encounter between admissions.
 - D. Beneficiary was discharged due to death or to hospice.
- 9. PAR values displayed are post clinical global exclusions and clinical review (as described in number 8 above). Targeted efficiency levels are not applied.

PAE Analysis:	Potentially Avoidable Readmissions
Program Type:	Managed Care
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Southeast

	Southeas	t	Statewide
PAE	3,	287	6,384
Total	96,	681	251,530
2019 PAE %	3	.4%	2.5%
2018 PAE %	2	.6%	2.1%
4.0%			ents
4.0%			
3.0%		888	N.
3.0% ——			
3.0%			
3.0% ————————————————————————————————————			
3.0% ————————————————————————————————————	2019 PAE %		8 PAE %



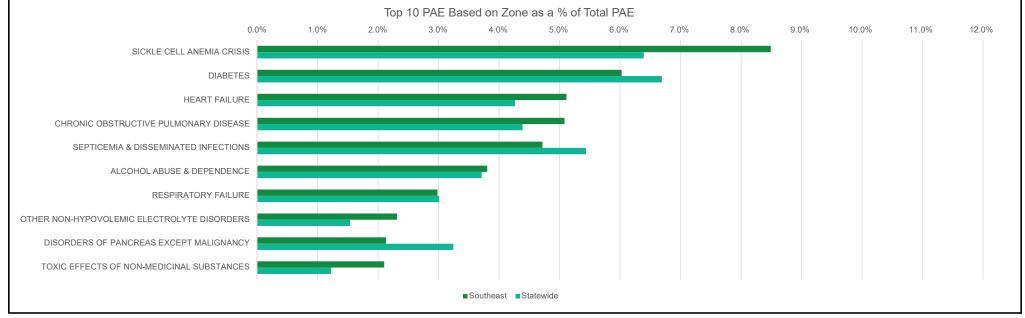






PAE Analysis:	Potentially Avoidable Readmissions
Program Type:	Managed Care
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Southeast

5. Event	ts and Do	llars by Top 10 APR-DRG										
		Top 10 PAE by Zone		Southeast						State	wide	
Zone Rank	APR DRG	Description	PAE	Р	PAE Dollars	2019 % of Total PAE	2018 % of Total PAE	PAE	١	PAE Dollars	2019 % of Total PAE	2018 % of Total PAE
1	0662	SICKLE CELL ANEMIA CRISIS	279	\$	2,022,591	8.5%	10.1%	408	\$	2,835,348	6.4%	7.0%
2	0420	DIABETES	198	\$	1,628,942	6.0%	6.9%	427	\$	3,201,832	6.7%	7.2%
3	0194	HEART FAILURE	168	\$	1,752,812	5.1%	4.7%	272	\$	3,046,870	4.3%	3.8%
4	0140	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	167	\$	1,478,852	5.1%	5.1%	280	\$	2,345,440	4.4%	4.0%
5	0720	SEPTICEMIA & DISSEMINATED INFECTIONS	155	\$	2,291,612	4.7%	3.7%	347	\$	4,793,082	5.4%	4.2%
6	0775	ALCOHOL ABUSE & DEPENDENCE	125	\$	765,095	3.8%	4.0%	237	\$	1,176,796	3.7%	3.6%
7	0133	RESPIRATORY FAILURE	98	\$	1,499,814	3.0%	0.9%	192	\$	2,296,656	3.0%	1.2%
8	0425	OTHER NON-HYPOVOLEMIC ELECTROLYTE DISORDERS	76	\$	1,076,312	2.3%	1.8%	98	\$	1,223,188	1.5%	1.7%
9	0282	DISORDERS OF PANCREAS EXCEPT MALIGNANCY	70	\$	527,764	2.1%	1.3%	207	\$	1,353,984	3.2%	2.9%
10	0816	TOXIC EFFECTS OF NON-MEDICINAL SUBSTANCES	69	\$	518,865	2.1%	2.4%	78	\$	575,323	1.2%	1.3%
		All Else	1,882	\$	24,618,866	57.3%	59.0%	3,838	\$	45,214,466	60.1%	63.2%
		Total	3,287	\$	38,181,524	100.0%	100.0%	6,384	\$	68,062,985	100.0%	100.0%





PAE Analysis:	Potentially Avoidable Readmissions
Program Type:	Managed Care
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Southwest

2018 PAE %

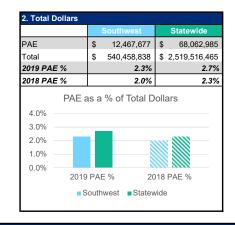
1. Total Events		
	Southwest	Statewide
PAE	1,413	6,384
Total	53,496	251,530
2019 PAE %	2.6%	2.5%
2018 PAE %	2.2%	2.1%
PAE 8	as a % of Total E	vents
3.0%		

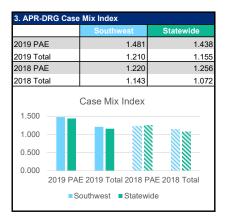
■ Southwest ■ Statewide

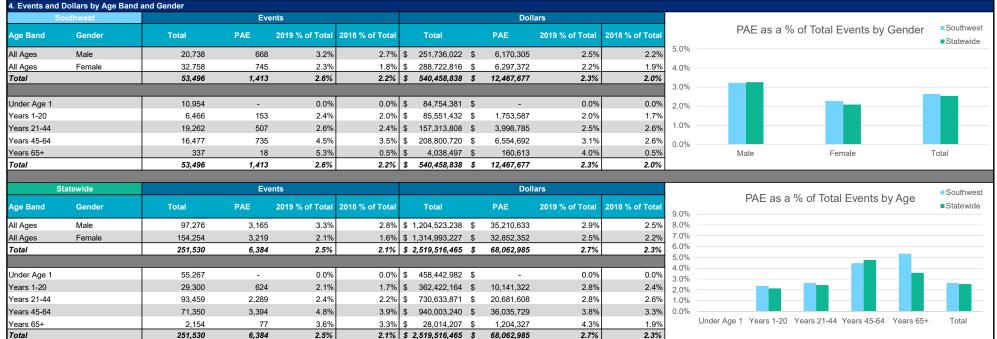
2019 PAE %

1.0%

0.0%



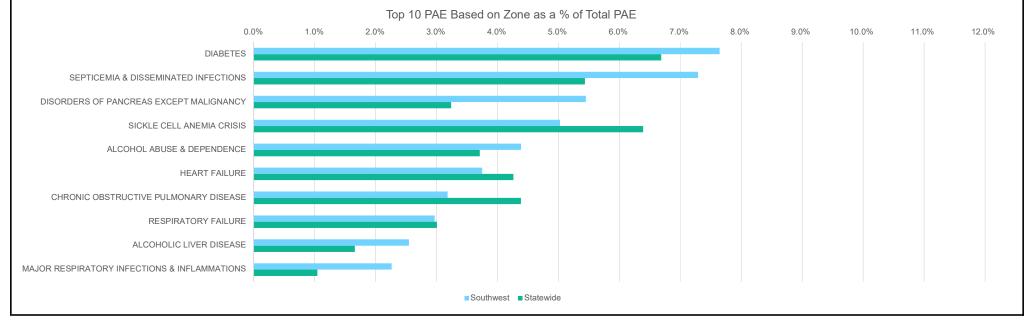






PAE Analysis:	Potentially Avoidable Readmissions
Program Type:	Managed Care
Service Dates:	January 1, 2019 - December 31, 2019
Zono:	Southwest

5. Event	ts and Dol	lars by Top 10 APR-DRG										
		Top 10 PAE by Zone			Sout	nwest				State	wide	
Zone Rank	APR DRG	Description	PAE	Р	AE Dollars	2019 % of Total PAE	2018 % of Total PAE	PAE	Р	AE Dollars	2019 % of Total PAE	2018 % of Total PAE
1	0420	DIABETES	108	\$	746,474	7.6%	6.7%	427	\$	3,201,832	6.7%	7.2%
2	0720	SEPTICEMIA & DISSEMINATED INFECTIONS	103	\$	1,212,873	7.3%	4.9%	347	\$	4,793,082	5.4%	4.2%
3	0282	DISORDERS OF PANCREAS EXCEPT MALIGNANCY	77	\$	414,186	5.4%	5.0%	207	\$	1,353,984	3.2%	2.9%
4	0662	SICKLE CELL ANEMIA CRISIS	71	\$	457,626	5.0%	5.9%	408	\$	2,835,348	6.4%	7.0%
5	0775	ALCOHOL ABUSE & DEPENDENCE	62	\$	208,136	4.4%	3.1%	237	\$	1,176,796	3.7%	3.6%
6	0194	HEART FAILURE	53	\$	696,096	3.8%	3.4%	272	\$	3,046,870	4.3%	3.8%
7	0140	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	45	\$	237,162	3.2%	2.2%	280	\$	2,345,440	4.4%	4.0%
8	0133	RESPIRATORY FAILURE	42	\$	312,104	3.0%	1.3%	192	\$	2,296,656	3.0%	1.2%
9	0280	ALCOHOLIC LIVER DISEASE	36	\$	329,375	2.5%	3.1%	106	\$	1,065,694	1.7%	2.1%
10	0137	MAJOR RESPIRATORY INFECTIONS & INFLAMMATIONS	32	\$	597,539	2.3%	0.9%	67	\$	1,285,375	1.0%	0.6%
		All Else	784	\$	7,256,106	55.5%	63.5%	3,841	\$	44,661,909	60.2%	63.4%
		Total	1,413	\$	12,467,677	100.0%	100.0%	6,384	\$	68,062,985	100.0%	100.0%

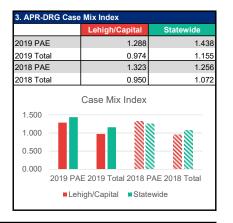


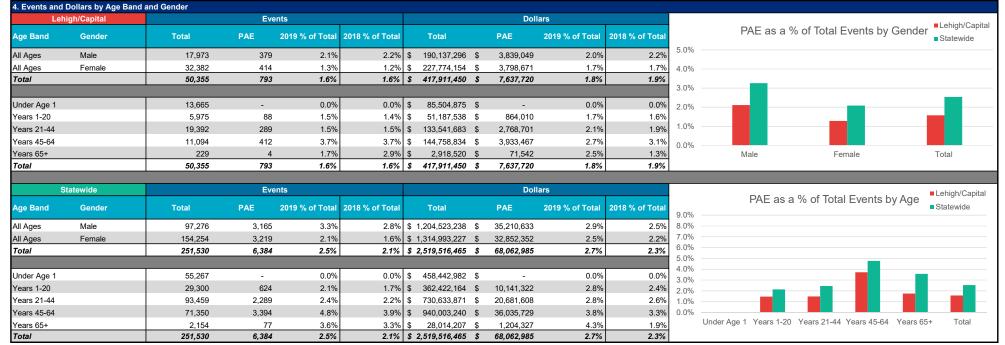




	Lehigh/Ca	apital	Statewide
PAE		793	6,384
Total	5	0,355	251,530
2019 PAE %		1.6%	2.5%
2018 PAE %		1.6%	2.1%

		Le	high/Capital		Statewide
PAE		\$	7,637,720	\$	68,062,985
Total		\$	417,911,450	\$	2,519,516,465
2019 PAE	%		1.8%		2.7%
2018 PAE	%		1.9%		2.3%
2.0% — 1.0% —		Н			
0.0%	2019	PAI	Ξ% 20	18	PAE %

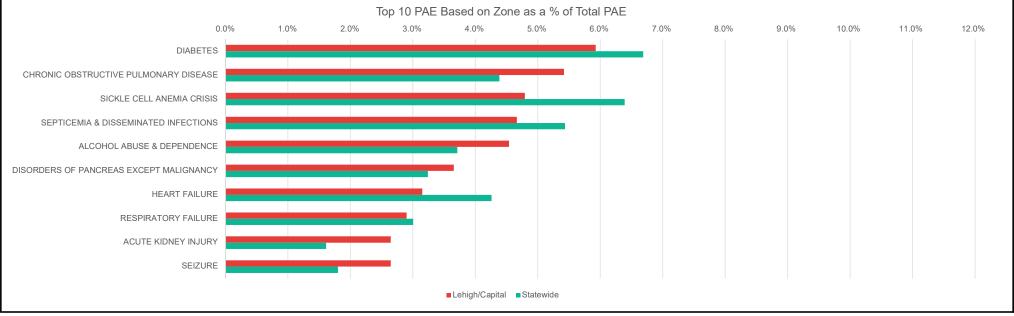






PAE Analysis:	Potentially Avoidable Readmissions
Program Type:	Managed Care
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Lehigh/Capital

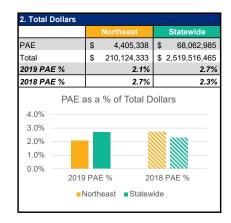
2018 % of Total PAE
% 7.2%
% 4.0%
% 7.0%
% 4.2%
% 3.6%
% 2.9%
% 3.8%
% 1.2%
% 1.7%
% 1.0%
63.3%
6 100.0%
1.6% 1.8% 59.5%

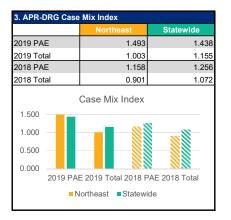


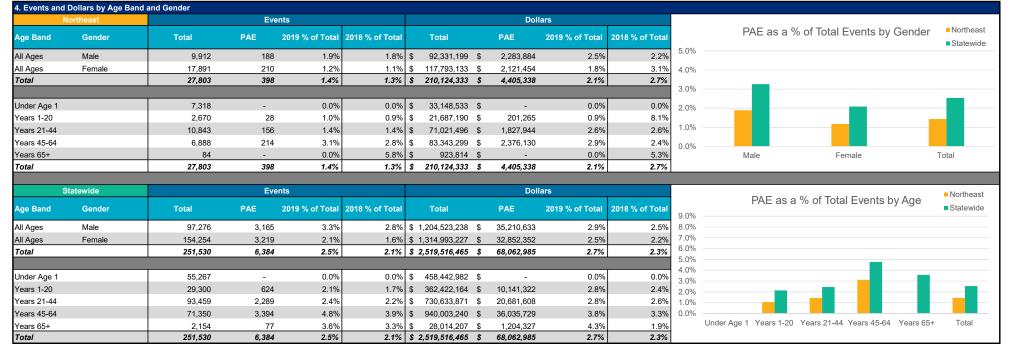




1. Total Eve	nts	North	annot.	Statewide
		Norti		
PAE			398	6,384
Total			27,803	251,530
2019 PAE %	,		1.4%	2.5%
2018 PAE %	•		1.3%	2.1%
3.0% —				
2.0% —				
1.0%			8	
0.0% —	0040	D45.0/	N 01	MO DATA
	2019	PAE %	20)18 PAE %
	<u> </u>	Vortheast	Statew	ride



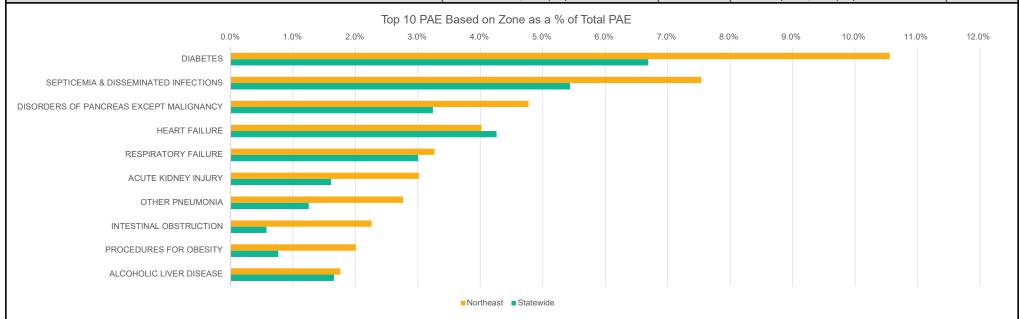






PAE Analysis:	Potentially Avoidable Readmissions
Program Type:	Managed Care
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Northeast

s and Dol	lars by Top 10 APR-DRG										
	Top 10 PAE by Zone				heast				State	wide	
APR DRG	Description	PAE	P	PAE Dollars	2019 % of Total PAE	2018 % of Total PAE	PAE	Р	PAE Dollars	2019 % of Total PAE	2018 % of Total PAE
0420	DIABETES	42	\$	340,873	10.6%	5.6%	427	\$	3,201,832	6.7%	7.2%
0720	SEPTICEMIA & DISSEMINATED INFECTIONS	30	\$	487,984	7.5%	3.1%	347	\$	4,793,082	5.4%	4.2%
0282	DISORDERS OF PANCREAS EXCEPT MALIGNANCY	19	\$	130,923	4.8%	4.5%	207	\$	1,353,984	3.2%	2.9%
0194	HEART FAILURE	16	\$	190,385	4.0%	3.1%	272	\$	3,046,870	4.3%	3.8%
0133	RESPIRATORY FAILURE	13	\$	147,819	3.3%	0.3%	192	\$	2,296,656	3.0%	1.2%
0469	ACUTE KIDNEY INJURY	12	\$	99,736	3.0%	2.0%	103	\$	947,567	1.6%	1.7%
0139	OTHER PNEUMONIA	11	\$	111,118	2.8%	3.4%	80	\$	958,474	1.3%	1.7%
0247	INTESTINAL OBSTRUCTION	9	\$	76,673	2.3%	0.0%	37	\$	284,424	0.6%	0.6%
0403	PROCEDURES FOR OBESITY	8	\$	52,601	2.0%	1.4%	49	\$	315,006	0.8%	0.7%
0280	ALCOHOLIC LIVER DISEASE	7	\$	76,853	1.8%	3.7%	106	\$	1,065,694	1.7%	2.1%
	All Else	231	\$	2,690,372	58.0%	73.0%	4,564	\$	49,799,396	71.5%	73.8%
	Total	398	\$	4,405,338	100.0%	100.0%	6,384	\$	68,062,985	100.0%	100.0%
	APR DRG 0420 0720 0282 0194 0133 0469 0139 0247 0403	APR DRG Description 0420 DIABETES 0720 SEPTICEMIA & DISSEMINATED INFECTIONS 0282 DISORDERS OF PANCREAS EXCEPT MALIGNANCY 0194 HEART FAILURE 0133 RESPIRATORY FAILURE 0469 ACUTE KIDNEY INJURY 0139 OTHER PNEUMONIA 0247 INTESTINAL OBSTRUCTION 0403 PROCEDURES FOR OBESITY 0280 ALCOHOLIC LIVER DISEASE All Else	APR Description	APR Description PAE PA	APR Description PAE Description PAE PAE Dollars	APR Description PAE Description PAE PAE Dollars 2019 % of Total PAE	APR Description PAE PAE Dollars 2019 % of Total PAE PAE Dollars 2018 % of Total PAE PAE Dollars 2018 % of Total PAE PAE Dollars PA	APR DRG Description PAE PAE Dollars 2019 % of Total PAE PAE Dollars PAE PAE Dollars PAE PAE Dollars PAE PAE PAE Dollars PAE	APR DBSCription PAE PAE Dollars 2019 % of Total PAE PAE PAE Dollars 2018 % of Total PAE PAE DBSCRIPTION PAE PAE DBSCRIPTION PAE PAE DBSCRIPTION PAE PAE DBSCRIPTION PAE DBSCRIPTION	PAE PAE Dollars PAE Doll	PAE Description PAE PAE Dollars 2019 % of Total PAE PAE Dollars PAE 2019 % of Total PAE PAE Dollars PAE 2019 % of Total PAE PAE Dollars PAE 2019 % of Total PAE PAE Dollars

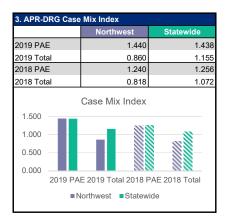


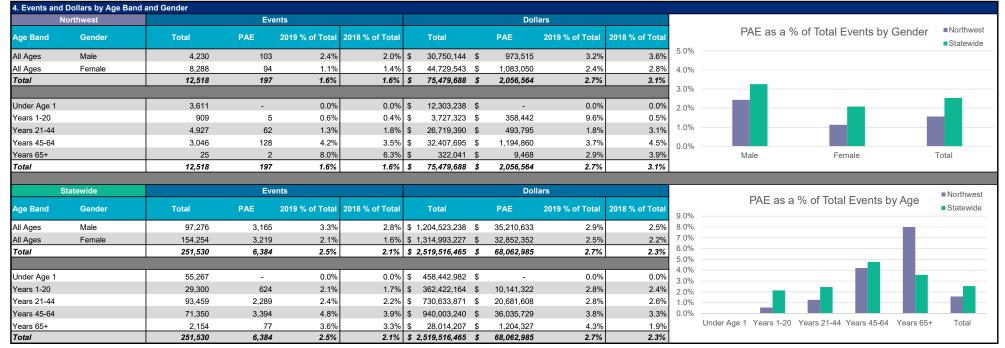




	Northwest	Statewide
PAE	197	6,384
Total	12,518	251,530
2019 PAE %	1.6%	2.5%
2018 PAE %	1.6%	2.1%
4.0%		
3.0%	_	
3.0% ———		
3.0% 2.0% 1.0% 0.0%	19 PAE % 20	018 PAE %

		N	orthwest	Statewide				
PAE		\$	2,056,564	\$	68,062,985			
Total		\$	75,479,688	\$ 2,519,516,46				
2019 PAE %			2.7%	2.				
2018 PAE	%		3.1%	2.3%				
2.0% —								







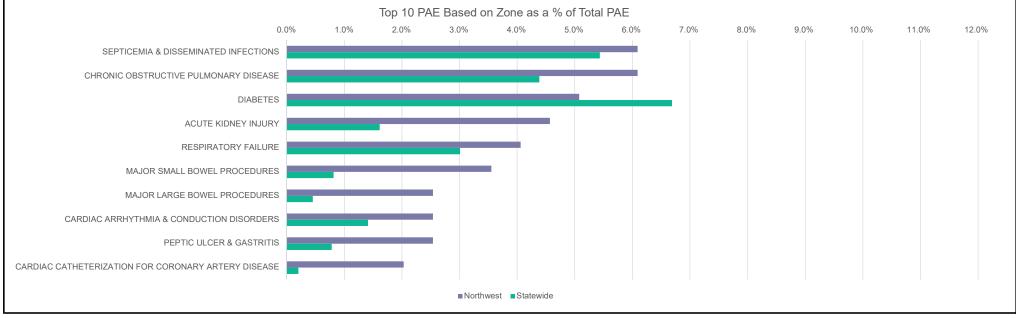
PAE Analysis: Potentially Avoidable Readmissions

Program Type: Managed Care

Service Dates: January 1, 2019 - December 31, 2019

Zone: Northwest

5. Event	5. Events and Dollars by Top 10 APR-DRG												
	Top 10 PAE by Zone			Northwest				Statewide					
Zone Rank	APR DRG	Description	PAE PAE Dollars		2019 % of Total PAE	2018 % of Total PAE	PAE		AE Dollars	2019 % of Total PAE	2018 % of Total PAE		
1	0720	SEPTICEMIA & DISSEMINATED INFECTIONS	12	\$	184,180	6.1%	6.3%	347	\$	4,793,082	5.4%	4.2%	
2	0140	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	12	\$	84,045	6.1%	4.8%	280	\$	2,345,440	4.4%	4.0%	
3	0420	DIABETES	10	\$	49,022	5.1%	15.9%	427	\$	3,201,832	6.7%	7.2%	
4	0469	ACUTE KIDNEY INJURY	9	\$	80,109	4.6%	2.4%	103	\$	947,567	1.6%	1.7%	
5	0133	RESPIRATORY FAILURE	8	\$	54,225	4.1%	1.4%	192	\$	2,296,656	3.0%	1.2%	
6	0230	MAJOR SMALL BOWEL PROCEDURES	7	\$	52,829	3.6%	0.5%	52	\$	664,849	0.8%	0.7%	
7	0231	MAJOR LARGE BOWEL PROCEDURES	5	\$	80,183	2.5%	0.0%	29	\$	300,839	0.5%	0.3%	
8	0201	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS	5	\$	40,521	2.5%	0.5%	90	\$	1,108,889	1.4%	1.0%	
9	0241	PEPTIC ULCER & GASTRITIS	5	\$	16,210	2.5%	1.4%	50	\$	376,129	0.8%	1.0%	
10	0191	CARDIAC CATHETERIZATION FOR CORONARY ARTERY DISEASE	4	\$	57,162	2.0%	0.5%	13	\$	215,834	0.2%	0.2%	
		All Else	120	\$	1,358,079	60.9%	66.3%	4,801	\$	51,811,867	75.2%	78.4%	
		Total	197	\$	2,056,564	100.0%	100.0%	6,384	\$	68,062,985	100.0%	100.0%	





Appendix B

Potentially Avoidable Complications — MCO Beneficiaries

Contents

Table Number	Table Title
1	Events by Potentially Avoidable Complication

The table identified above is included for each zone. Zone results are displayed in the following order: Southeast, Southwest, Lehigh/Capital, Northeast, and Northwest. This is the third year of the analysis; therefore, both CY 2019 and CY 2018 results are available and displayed as applicable.

Detailed Description of Tables

Table 1 — displays the total number and types of PACs. This value is displayed at both the zone and statewide level.

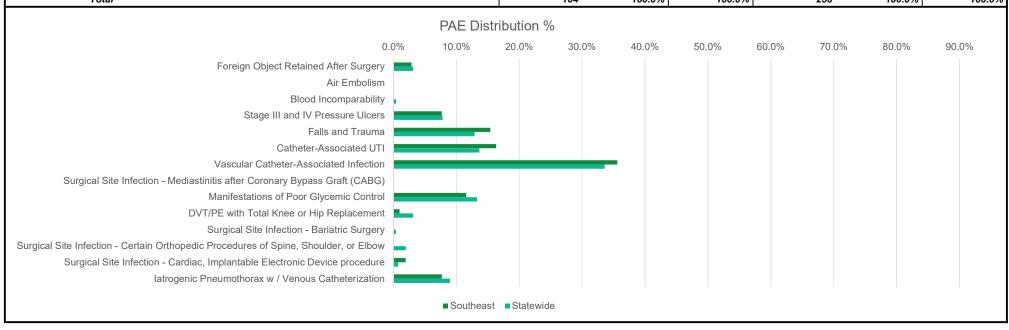
Additional Notes Regarding Data

- 1. Admits and Dollars for CY 2019 service dates are based on PH HealthChoices MCO encounter data submitted through September 30, 2020 and CHC-MCO encounter data submitted through December 31, 2020.
- 2. Inpatient is defined as acute inpatient hospital admissions.
- 3. HCACs are identified using the following process:

- A. HCACs are identified using publicly available CMS diagnosis and procedure code criteria for fiscal year (FY) 2019.
- B. Identified HCACs are then reviewed using POA criteria included on PH HealthChoices MCO and CHC-MCO submitted encounter data.
- 4. PAEs exclude claims with provider types other than "01" (Acute Care Hospital).

PAE Analysis:	Potentially Avoidable Complications
Program Type:	Managed Care
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Southeast

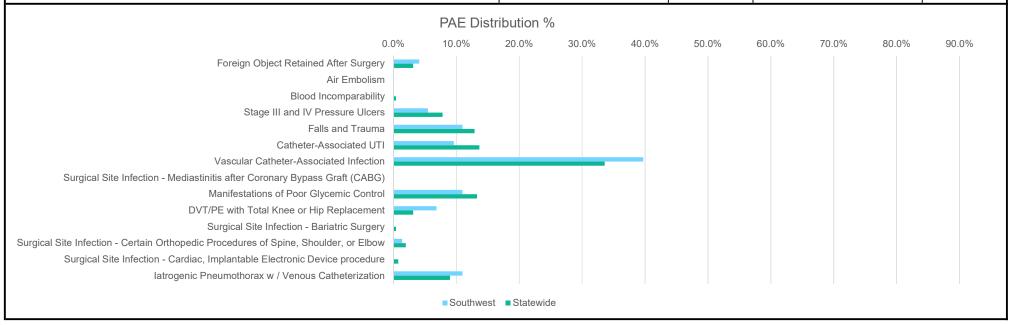
1. Events b	Events by Potentially Avoidable Complication							
			Southeast			Statewide	Statewide	
PAC#	PAC Description	PAE	2019 % of Total PAE	2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE	
1	Foreign Object Retained After Surgery	3	3 2.9%	1.6%	8	3.1%	1.4%	
2	Air Embolism	-	0.0%	0.0%	-	0.0%	0.0%	
3	Blood Incomparability	-	0.0%	0.0%	1	0.4%	0.0%	
4	Stage III and IV Pressure Ulcers	8	7.7%	9.7%	20	7.8%	10.1%	
5	Falls and Trauma	16	15.4%	14.5%	33	12.9%	13.5%	
6	Catheter-Associated UTI	17	7 16.3%	21.0%	35	13.7%	14.9%	
7	Vascular Catheter-Associated Infection	37	35.6%	35.5%	86	33.6%	36.5%	
8	Surgical Site Infection - Mediastinitis after Coronary Bypass Graft (CABG)	-	0.0%	0.0%	-	0.0%	0.0%	
9	Manifestations of Poor Glycemic Control	12	11.5%	3.2%	34	13.3%	9.6%	
10	DVT/PE with Total Knee or Hip Replacement	1	1.0%	4.8%	8	3.1%	4.3%	
11	Surgical Site Infection - Bariatric Surgery	-	0.0%	0.0%	1	0.4%	0.5%	
12	Surgical Site Infection - Certain Orthopedic Procedures of Spine, Shoulder, or Elbow	-	0.0%	1.6%	5	2.0%	1.4%	
13	Surgical Site Infection - Cardiac, Implantable Electronic Device procedure	2	2 1.9%	0.0%	2	0.8%	0.0%	
14	latrogenic Pneumothorax w / Venous Catheterization	8	3 7.7%	8.1%	23	9.0%	7.7%	
	Total	104	100.0%	100.0%	256	100.0%	100.0%	





PAE Analysis:	Potentially Avoidable Complications
Program Type:	Managed Care
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Southwest

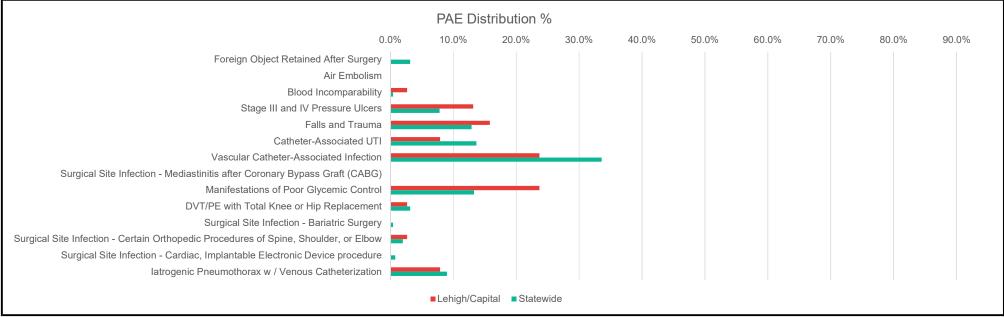
1. Events b	Events by Potentially Avoidable Complication						
			Southwest Statewide				
PAC#	PAC Description	PAE	2019 % of Total PAE	2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE
1	Foreign Object Retained After Surgery	(3 4.1%	1.5%	8	3.1%	1.4%
2	Air Embolism	-	0.0%	0.0%	-	0.0%	0.0%
3	Blood Incomparability	-	0.0%	0.0%	1	0.4%	0.0%
4	Stage III and IV Pressure Ulcers	4	5.5%	9.2%	20	7.8%	10.1%
5	Falls and Trauma	8	11.0%	10.8%	33	12.9%	13.5%
6	Catheter-Associated UTI	-	9.6%	12.3%	35	13.7%	14.9%
7	Vascular Catheter-Associated Infection	29	39.7%	46.2%	86	33.6%	36.5%
8	Surgical Site Infection - Mediastinitis after Coronary Bypass Graft (CABG)	-	0.0%	0.0%	-	0.0%	0.0%
9	Manifestations of Poor Glycemic Control	3	11.0%	9.2%	34	13.3%	9.6%
10	DVT/PE with Total Knee or Hip Replacement		6.8%	4.6%	8	3.1%	4.3%
11	Surgical Site Infection - Bariatric Surgery	-	0.0%	1.5%	1	0.4%	0.5%
12	Surgical Site Infection - Certain Orthopedic Procedures of Spine, Shoulder, or Elbow		1.4%	0.0%	5	2.0%	1.4%
13	Surgical Site Infection - Cardiac, Implantable Electronic Device procedure	-	0.0%	0.0%	2	0.8%	0.0%
14	latrogenic Pneumothorax w / Venous Catheterization	3	3 11.0%	4.6%	23	9.0%	7.7%
	Total	7:	100.0%	100.0%	256	100.0%	100.0%





PAE Analysis:	Potentially Avoidable Complications
Program Type:	Managed Care
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Lehigh/Capital

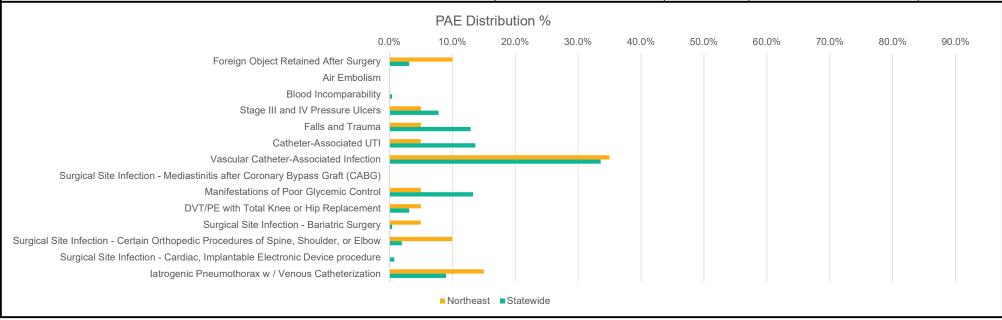
1. Events by	Events by Potentially Avoidable Complication						
			Lehigh/Capital		Statewide		
PAC#	PAC Description	PAE	2019 % of Tota PAE	I 2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE
1	Foreign Object Retained After Surgery	-	0.0	% 0.0%	8	3.1%	1.4%
2	Air Embolism	-	0.0	% 0.0%	-	0.0%	0.0%
3	Blood Incomparability		1 2.6	% 0.0%	1	0.4%	0.0%
4	Stage III and IV Pressure Ulcers		5 13.2	% 13.3%	20	7.8%	10.1%
5	Falls and Trauma		6 15.8	% 11.1%	33	12.9%	13.5%
6	Catheter-Associated UTI		3 7.9	% 13.3%	35	13.7%	14.9%
7	Vascular Catheter-Associated Infection		9 23.7	% 35.6%	86	33.6%	36.5%
8	Surgical Site Infection - Mediastinitis after Coronary Bypass Graft (CABG)	-	0.0	% 0.0%	-	0.0%	0.0%
9	Manifestations of Poor Glycemic Control		9 23.7	% 13.3%	34	13.3%	9.6%
10	DVT/PE with Total Knee or Hip Replacement		1 2.6	% 4.4%	8	3.1%	4.3%
11	Surgical Site Infection - Bariatric Surgery	-	0.0	% 0.0%	1	0.4%	0.5%
12	Surgical Site Infection - Certain Orthopedic Procedures of Spine, Shoulder, or Elbow		1 2.6	% 0.0%	5	2.0%	1.4%
13	Surgical Site Infection - Cardiac, Implantable Electronic Device procedure	-	0.0	% 0.0%	2	0.8%	0.0%
14	latrogenic Pneumothorax w / Venous Catheterization		3 7.9	% 8.9%	23	9.0%	7.7%
	Total		38 100.0	% 100.0%	256	100.0%	100.0%





PAE Analysis:	Potentially Avoidable Complications
Program Type:	Managed Care
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Northeast

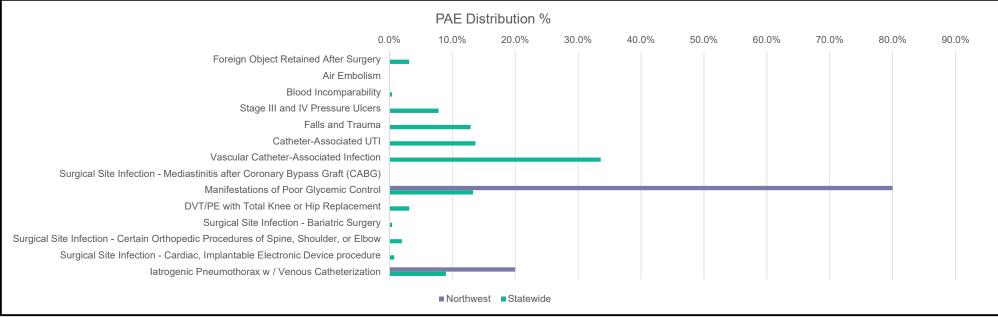
i. Events by	Potentially Avoidable Complication		N. (1				01.4	
			North	east		Statewide		
PAC#	PAC Description	PAE	2019 % c		2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE
1	Foreign Object Retained After Surgery		2	10.0%	0.0%	8	3.1%	1.4%
2	Air Embolism	-		0.0%	0.0%	-	0.0%	0.0%
3	Blood Incomparability	-		0.0%	0.0%	1	0.4%	0.0%
4	Stage III and IV Pressure Ulcers		1	5.0%	14.3%	20	7.8%	10.1%
5	Falls and Trauma		1	5.0%	0.0%	33	12.9%	13.5%
6	Catheter-Associated UTI		1	5.0%	0.0%	35	13.7%	14.9%
7	Vascular Catheter-Associated Infection		7	35.0%	28.6%	86	33.6%	36.5%
8	Surgical Site Infection - Mediastinitis after Coronary Bypass Graft (CABG)	-		0.0%	0.0%	-	0.0%	0.0%
9	Manifestations of Poor Glycemic Control		1	5.0%	0.0%	34	13.3%	9.6%
10	DVT/PE with Total Knee or Hip Replacement		1	5.0%	14.3%	8	3.1%	4.3%
11	Surgical Site Infection - Bariatric Surgery		1	5.0%	0.0%	1	0.4%	0.5%
12	Surgical Site Infection - Certain Orthopedic Procedures of Spine, Shoulder, or Elbow		2	10.0%	0.0%	5	2.0%	1.4%
13	Surgical Site Infection - Cardiac, Implantable Electronic Device procedure	-		0.0%	0.0%	2	0.8%	0.0%
14	latrogenic Pneumothorax w / Venous Catheterization		3	15.0%	42.9%	23	9.0%	7.7%
	Total	2	0	100.0%	100.0%	256	100.0%	100.0%





PAE Analysis:	Potentially Avoidable Complications
Program Type:	Managed Care
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Northwest

1. Events by	. Events by Potentially Avoidable Complication							
			Northwest			Statewide		
PAC#	PAC Description	PAE	2019 % of Total PAE	2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE	
1	Foreign Object Retained After Surgery	-	0.0%	0.0%	8	3.1%	1.4%	
2	Air Embolism	-	0.0%	0.0%	-	0.0%	0.0%	
3	Blood Incomparability	-	0.0%	0.0%	1	0.4%	0.0%	
4	Stage III and IV Pressure Ulcers	-	0.0%	10.0%	20	7.8%	10.1%	
5	Falls and Trauma	-	0.0%	10.0%	33	12.9%	13.5%	
6	Catheter-Associated UTI	-	0.0%	0.0%	35	13.7%	14.9%	
7	Vascular Catheter-Associated Infection	-	0.0%	10.0%	86	33.6%	36.5%	
8	Surgical Site Infection - Mediastinitis after Coronary Bypass Graft (CABG)	-	0.0%	0.0%	-	0.0%	0.0%	
9	Manifestations of Poor Glycemic Control	4	80.0%	60.0%	34	13.3%	9.6%	
10	DVT/PE with Total Knee or Hip Replacement	-	0.0%	0.0%	8	3.1%	4.3%	
11	Surgical Site Infection - Bariatric Surgery	-	0.0%	0.0%	1	0.4%	0.5%	
12	Surgical Site Infection - Certain Orthopedic Procedures of Spine, Shoulder, or Elbow	-	0.0%	0.0%	5	2.0%	1.4%	
13	Surgical Site Infection - Cardiac, Implantable Electronic Device procedure	-	0.0%	0.0%	2	0.8%	0.0%	
14	latrogenic Pneumothorax w / Venous Catheterization	1	20.0%	10.0%	23	9.0%	7.7%	
	Total	5	100.0%	100.0%	256	100.0%	100.0%	





Potentially Avoidable Readmissions — FFS Beneficiaries

Contents

Table Number	Table Title
1	Total Events
2	Total Dollars
3	APR-DRG Case Mix Index
4	Events and Dollars by Age Band and Gender
5	Events and Dollars by Top 10 APR-DRG

The tables identified above are included for each zone. Zone results are displayed in the following order: Southeast, Southwest, Lehigh/Capital, Northeast, and Northwest. This is the third year of the analysis; therefore, both CY 2019 and CY 2018 results are available and displayed as applicable.

Detailed Description of Tables

Table 1 — displays the total number of PAR as a percent of total inpatient hospital admissions. This value is displayed at both the zone and statewide level.

Table 2 — displays the total expenditures related to PAR as a percent of total inpatient hospital expenditures. This value is displayed at both the zone and statewide level.

Table 3 — displays the average APR-DRG CMI for those admissions identified as PARs at the zone and statewide level. Also displays the APR-DRG average CMI for all admissions at the zone and statewide level.

Table 4 — displays the total number of PAR as a percent of total inpatient hospital admissions by age band and gender. These values are displayed at both the zone and statewide level.

Table 5 — displays the 10 most frequent diagnosis (APR-DRG) in the zone that result in PARs within the zone. These values are displayed at both the zone and statewide level.

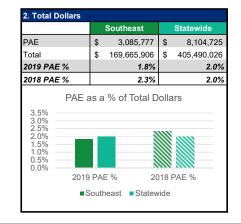
Additional Notes Regarding Data

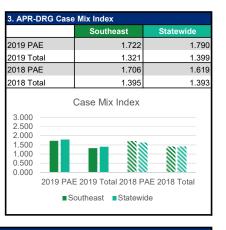
- 1. Admits and dollars for CY 2019 service dates are based on FFS claims data submitted through September 30, 2020.
- 2. Inpatient is defined as acute inpatient hospital admissions.
- 3. APR-DRGs are assigned by PROMISe system and represent a mix of APR-DRG version 36 and version 37 depending on discharge date. CMI reflects the average APR-DRG relative value weight across all admissions as established by the Department. If APR-DRG relative value weight was not present on the claim, an average relative value weight was assigned. These average relative value weights were calculated at the hospital level.
- 4. There are always at least two admissions related to a PAR. The first admission is referred to as the "anchor admission". When the beneficiary is discharged and admitted again within 30 days, the subsequent admission is referred to as a "readmission". The PAR APR-DRG is assigned based on the anchor admission.
- 5. Replacement costs are not considered in this analysis.
- 6. Age and gender are assigned using eligibility files provided by the Department.
- 7. Claims with revenue code 0762 and no room and board code, indicating an observation stay, were excluded from PAR analysis.

- 8. Readmissions are defined as inpatient hospital admissions within 30 days of an admission for the same beneficiary with any DRG at any facility. Not all readmissions within 30 days are considered potentially avoidable. Therefore, Mercer clinicians review readmissions (line by line) to determine if the readmission should be considered potentially avoidable. An admission is not considered potentially avoidable when:
 - A. Beneficiary has a qualifying clinical global exclusion diagnosis (examples include trauma and malignancies).
 - B. Beneficiary is three years of age and under or 85 years of age and older.
 - C. Beneficiary has a qualifying outpatient encounter between admissions.
 - D. Beneficiary was discharged due to death or to hospice.
- 9. Beneficiaries eligible for Medicare Part D or Medicare Advantage are excluded from analysis.
- 10. PAR values displayed are post clinical global exclusions and clinical review (as described in number 8 above). Targeted efficiency levels are not applied.

PAE Analysis:	Potentially Avoidable Readmissions
Program Type:	Fee-For-Service
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Southeast

Zone:	Southeast	
1. Total Events		
	Southeast	Statewide
PAE	225	537
Total	13,683	33,612
2019 PAE %	1.6%	1.6%
2018 PAE %	1.8%	1.5%
	D PAE % 20 Southeast ■ Statew	018 PAE %



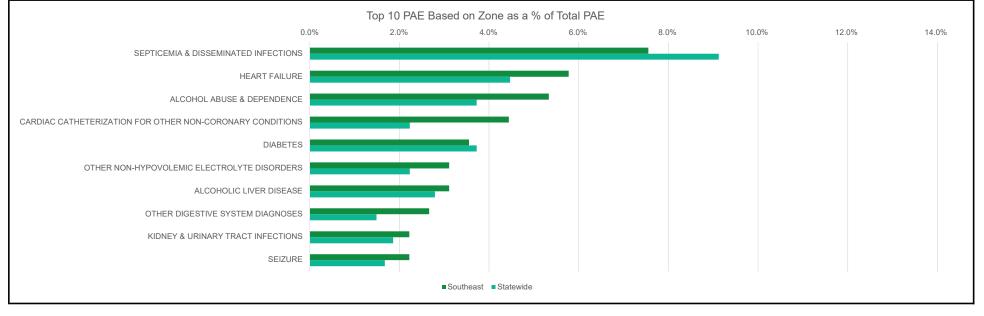


	Dollars by Age Bar	nd and Gender										
S	Southeast		Events					ars				
Age Band	Gender	Total	PAE	2019 % of Total	2018 % of Total	Total	PAE	2019 % of Total	2018 % of Total		PAE as a % of Total Events by Gender	■Southeas ■Statewide
All Ages	Male	6,779	154	2.3%	2.0%	\$ 106,536,544 \$	1,827,272	1.7%	2.1%	3.5%		
All Ages	Female	6,904	71	1.0%	1.5%	\$ 63,129,362 \$	1,258,505	2.0%	2.6%	3.0%		
Total		13,683	225	1.6%	1.8%	\$ 169,665,906 \$	3,085,777	1.8%	2.3%	2.5%	<u> </u>	
										2.0%	6	
Jnder Age 1		3,084	-	0.0%	0.0%	\$ 31,666,659 \$	-	0.0%	0.0%	1.5%	6	
ears 1-20		554	6	1.1%	0.7%	\$ 5,798,877 \$	56,098	1.0%	0.7%	1.0%	6	
Years 21-44		5,557	87	1.6%	1.6%	\$ 57,466,171 \$	1,163,296	2.0%	2.0%	0.5%		
ears 45-64		3,709	118	3.2%	3.1%	\$ 61,356,277 \$	1,601,840	2.6%	3.2%	0.0%		
Years 65+		779	14	1.8%	1.8%	\$ 13,377,922 \$	264,543	2.0%	3.0%	0.070	Male Female	Total
Total		13,683	225	1.6%	1.8%	\$ 169,665,906 \$	3,085,777	1.8%	2.3%			
S	Statewide		Eve	ents			Doll	ars				Southea
Age Band	Gender	Total	PAE	2019 % of Total	2018 % of Total	Total	PAE	2019 % of Total	2018 % of Total	5.0%	PAE as a % of Total Events by Age	Statewid
All Ages	Male	17,610	341	1.9%	1.7%	\$ 255,584,781 \$	5,229,981	2.0%	1.7%	4.5%	0	
All Ages	Female	16,002	196	1.2%	1.3%	\$ 149,905,246 \$	2,874,744	1.9%	2.4%	4.0% 3.5%		
Total		33,612	537	1.6%	1.5%	\$ 405,490,026 \$	8,104,725	2.0%	2.0%	3.0%		
										2.5%		
Jnder Age 1		7,051	-	0.0%	0.0%	\$ 69,082,773 \$	-	0.0%	0.0%	2.0%		
Years 1-20		1,466	12	0.8%	0.5%	\$ 14,352,243 \$	118,814	0.8%	0.5%	1.5% 1.0%		
Years 21-44		12,591	182	1.4%	1.4%		2,394,903	1.9%	2.1%	0.5%		
Years 45-64		10,716	303	2.8%	2.6%	\$ 165,160,172 \$	4,770,144	2.9%	2.5%	0.0%		
Years 65+		1,788	40	2.2%	1.5%		820,864	3.0%	2.3%		Under Age 1 Years 1-20 Years 21-44 Years 45-64 Years 65+	Total
Total		33,612	537	1.6%	1.5%	\$ 405,490,026 \$	8,104,725	2.0%	2.0%	l		



PAE Analysis:	Potentially Avoidable Readmissions
Program Type:	Fee-For-Service
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Southeast

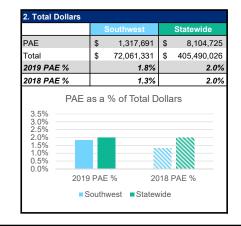
5. Even	. Events and Dollars by Top 10 APR-DRG												
		Top 10 PAE by Zone			Sout	heast		Statewide					
Zone Rank	APR DRG	Description	PAE	P	AE Dollars	2019 % of Total PAE	2018 % of Total PAE	PAE	P	AE Dollars	2019 % of Total PAE	2018 % of Total PAE	
1	0720	SEPTICEMIA & DISSEMINATED INFECTIONS	17	\$	223,955	7.6%	11.0%	49	\$	930,652	9.1%	9.7%	
2	0194	HEART FAILURE	13	\$	174,619	5.8%	7.1%	24	\$	358,164	4.5%	5.3%	
3	0775	ALCOHOL ABUSE & DEPENDENCE	12	\$	69,948	5.3%	1.4%	20	\$	109,113	3.7%	3.1%	
4	0192	CARDIAC CATHETERIZATION FOR OTHER NON-CORONARY CONDITIONS	10	\$	424,841	4.4%	2.8%	12	\$	431,923	2.2%	3.3%	
5	0420	DIABETES	8	\$	78,505	3.6%	3.5%	20	\$	219,452	3.7%	2.4%	
6	0425	OTHER NON-HYPOVOLEMIC ELECTROLYTE DISORDERS	7	\$	124,473	3.1%	1.4%	12	\$	166,741	2.2%	1.1%	
7	0280	ALCOHOLIC LIVER DISEASE	7	\$	62,077	3.1%	4.6%	15	\$	152,620	2.8%	3.3%	
8	0254	OTHER DIGESTIVE SYSTEM DIAGNOSES	6	\$	33,536	2.7%	0.0%	8	\$	62,371	1.5%	0.9%	
9	0463	KIDNEY & URINARY TRACT INFECTIONS	5	\$	65,370	2.2%	0.4%	10	\$	117,040	1.9%	0.7%	
10	0053	SEIZURE	5	\$	41,816	2.2%	1.8%	9	\$	81,359	1.7%	1.3%	
		All Else	135	\$	1,786,639	60.0%	66.1%	358	\$	5,475,290	66.7%	68.8%	
		Total	225	\$	3,085,777	100.0%	100.0%	537	\$	8,104,725	100.0%	100.0%	

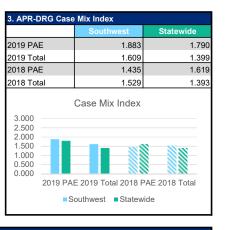






1. Total Events								
	Southwest	Statewide						
PAE	99	537						
Total	5,440	33,612						
2019 PAE %	1.8%	1.6%						
2018 PAE %	1.5%	1.5%						
3.0% 2.5% 2.0% 1.5% 1.0% 0.5% 0.0% 2019 PAE % 2018 PAE %								



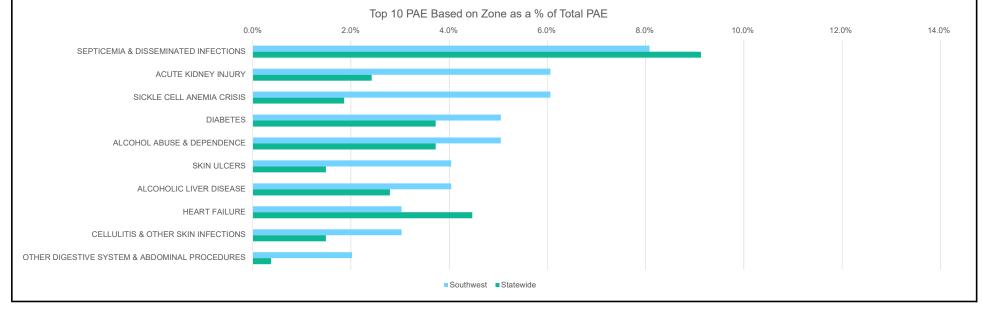


	Dollars by Age Ban	d and Gender											
S	outhwest		Eve	nts			Dol	llars					
Age Band	Gender	Total	PAE	2019 % of Total	2018 % of Total	Total	PAE	2019 % of Total	2018 % of Total		PAE as a % of Total	Events by Gende	Southwest Statewide
All Ages	Male	3,215	67	2.1%	1.5%	\$ 46,476,819	\$ 1,033,455	2.2%	1.2%	3.5%			
All Ages	Female	2,225	32	1.4%	1.5%	\$ 25,584,511	\$ 284,236	1.1%	1.7%	3.0%			
Total		5,440	99	1.8%	1.5%	\$ 72,061,331	\$ 1,317,691	1.8%	1.3%	2.5%			
										2.0%			
Jnder Age 1		928	-	0.0%	0.0%	\$ 12,029,500	\$ -	0.0%	0.0%	1.5%			
Years 1-20		307	3	1.0%	0.3%	\$ 4,013,449	\$ 32,745	0.8%	0.1%	1.0%			
Years 21-44		2,090	39	1.9%	1.4%	\$ 23,791,477	\$ 441,839	1.9%	1.1%	0.5%			
Years 45-64		1,925	53	2.8%	2.5%	\$ 29,482,979	\$ 731,235	2.5%	2.1%	0.0%			
Years 65+		190	4	2.1%	0.0%	\$ 2,743,925	\$ 111,873	4.1%	0.0%			emale	Total
Total		5,440	99	1.8%	1.5%	\$ 72,061,331	\$ 1,317,691	1.8%	1.3%				
S	Statewide		Eve	ents			Dol	llars					Southwest
Age Band	Gender	Total	PAE	2019 % of Total	2018 % of Total	Total	PAE	2019 % of Total	2018 % of Total	5.0%	PAE as a % of Tota	al Events by Age	Statewide
All Ages	Male	17,610	341	1.9%	1.7%	\$ 255,584,781	\$ 5,229,981	2.0%	1.7%	4.5%			
All Ages	Female	16,002	196	1.2%	1.3%	\$ 149,905,246	\$ 2,874,744	1.9%	2.4%	4.0% 3.5%			
Total		33,612	537	1.6%	1.5%	\$ 405,490,026	\$ 8,104,725	2.0%	2.0%	3.0%			
										2.5%			
Under Age 1		7,051	-	0.0%	0.0%	\$ 69,082,773	\$ -	0.0%	0.0%	2.0%			
Years 1-20		1,466	12	0.8%	0.5%	\$ 14,352,243	\$ 118,814	0.8%	0.5%	1.5% 1.0%			
Years 21-44		12,591	182	1.4%	1.4%	\$ 129,320,812	\$ 2,394,903	1.9%	2.1%	0.5%			
Years 45-64		10,716	303	2.8%	2.6%	\$ 165,160,172	\$ 4,770,144	2.9%	2.5%	0.0%			
Years 65+		1,788	40	2.2%	1.5%	\$ 27,574,027	\$ 820,864	3.0%	2.3%		Under Age 1 Years 1-20 Years 21-44	Years 45-64 Years 6	65+ Total
Total		33,612	537	1.6%	1.5%	\$ 405,490,026	\$ 8,104,725	2.0%	2.0%	I			



PAE Analysis:	Potentially Avoidable Readmissions
Program Type:	Fee-For-Service
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Southwest

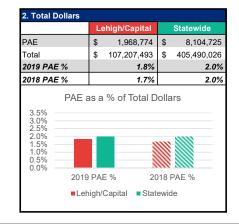
5. Event	Events and Dollars by Top 10 APR-DRG											
		Top 10 PAE by Zone					Statewide					
Zone Rank	APR DRG	Description	PAE	PAE PAE Dollars PAE PAE PAE		2018 % of Total PAE	PAE	PAE Dollars		2019 % of Total PAE	2018 % of Total PAE	
1	0720	SEPTICEMIA & DISSEMINATED INFECTIONS	8	\$	201,047	8.1%	5.7%	49	\$	930,652	9.1%	9.7%
2	0469	ACUTE KIDNEY INJURY	6	\$	131,179	6.1%	0.0%	13	\$	201,094	2.4%	1.5%
3	0662	SICKLE CELL ANEMIA CRISIS	6	\$	47,844	6.1%	4.6%	10	\$	81,389	1.9%	1.8%
4	0420	DIABETES	5	\$	36,984	5.1%	1.1%	20	\$	219,452	3.7%	2.4%
5	0775	ALCOHOL ABUSE & DEPENDENCE	5	\$	20,526	5.1%	8.0%	20	\$	109,113	3.7%	3.1%
6	0380	SKIN ULCERS	4	\$	76,000	4.0%	0.0%	8	\$	116,421	1.5%	0.0%
7	0280	ALCOHOLIC LIVER DISEASE	4	\$	56,008	4.0%	2.3%	15	\$	152,620	2.8%	3.3%
8	0194	HEART FAILURE	3	\$	75,105	3.0%	2.3%	24	\$	358,164	4.5%	5.3%
9	0383	CELLULITIS & OTHER SKIN INFECTIONS	3	\$	46,162	3.0%	2.3%	8	\$	83,962	1.5%	1.5%
10	0229	OTHER DIGESTIVE SYSTEM & ABDOMINAL PROCEDURES	2	\$	31,892	2.0%	0.0%	2	\$	31,892	0.4%	0.0%
		All Else	53	\$	594,942	53.5%	73.6%	368	\$	5,819,965	68.5%	71.4%
		Total	99	\$	1,317,691	100.0%	100.0%	537	\$	8,104,725	100.0%	100.0%

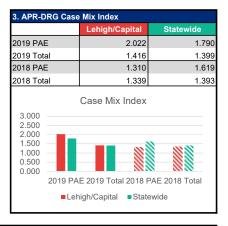


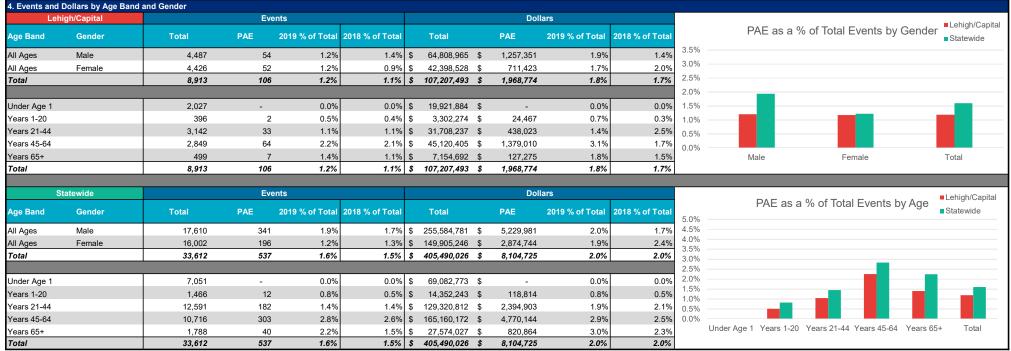




Zone:	Lenign/Capital							
1. Total Events								
	Lehigh/Capital	Statewide						
PAE	106	537						
Total	8,913	33,612						
2019 PAE %	1.2%	1.6%						
2018 PAE %	1.1%	1.5%						
	D PAE % 20 nigh/Capital ■Stat	018 PAE % ewide						



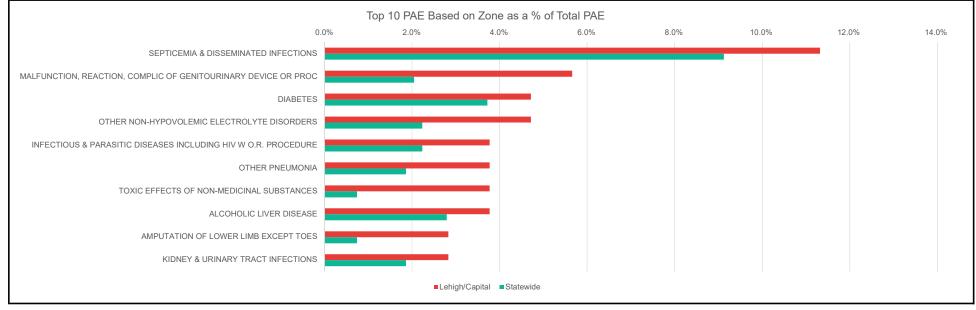






PAE Analysis:	Potentially Avoidable Readmissions
Program Type:	Fee-For-Service
Service Dates:	January 1, 2019 - December 31, 2019
Zono:	Lehigh/Capital

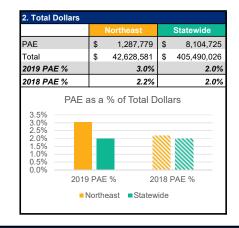
5. Even	. Events and Dollars by Top 10 APR-DRG											
		Top 10 PAE by Zone		Lehigh	/Capital		Statewide Statewide					
Zone Rank	APR DRG	Description	PAE	F	PAE Dollars	2019 % of Total PAE	2018 % of Total PAE	PAE	PAI	E Dollars	2019 % of Total PAE	2018 % of Total PAE
1	0720	SEPTICEMIA & DISSEMINATED INFECTIONS	12	\$	218,278	11.3%	12.6%	49	\$	930,652	9.1%	9.7%
2	0466	MALFUNCTION, REACTION, COMPLIC OF GENITOURINARY DEVICE OR PROC	6	\$	117,733	5.7%	1.9%	11	\$	188,277	2.0%	1.3%
3	0420	DIABETES	5	\$	93,862	4.7%	1.9%	20	\$	219,452	3.7%	2.4%
4	0425	OTHER NON-HYPOVOLEMIC ELECTROLYTE DISORDERS	5	\$	42,268	4.7%	1.9%	12	\$	166,741	2.2%	1.1%
5	0710	INFECTIOUS & PARASITIC DISEASES INCLUDING HIV W O.R. PROCEDURE	4	\$	68,972	3.8%	3.9%	12	\$	258,359	2.2%	2.2%
6	0139	OTHER PNEUMONIA	4	\$	39,949	3.8%	1.9%	10	\$	125,029	1.9%	1.7%
7	0816	TOXIC EFFECTS OF NON-MEDICINAL SUBSTANCES	4	\$	37,440	3.8%	1.0%	4	\$	37,440	0.7%	1.5%
8	0280	ALCOHOLIC LIVER DISEASE	4	\$	34,535	3.8%	1.0%	15	\$	152,620	2.8%	3.3%
9	0305	AMPUTATION OF LOWER LIMB EXCEPT TOES	3	\$	34,121	2.8%	0.0%	4	\$	52,945	0.7%	0.9%
10	0463	KIDNEY & URINARY TRACT INFECTIONS	3	\$	22,116	2.8%	1.0%	10	\$	117,040	1.9%	0.7%
		All Else	56	\$	1,259,499	52.8%	72.8%	390	\$	5,856,170	72.6%	75.2%
		Total	106	\$	1,968,774	100.0%	100.0%	537	\$	8,104,725	100.0%	100.0%

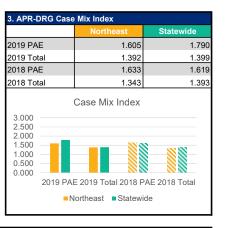


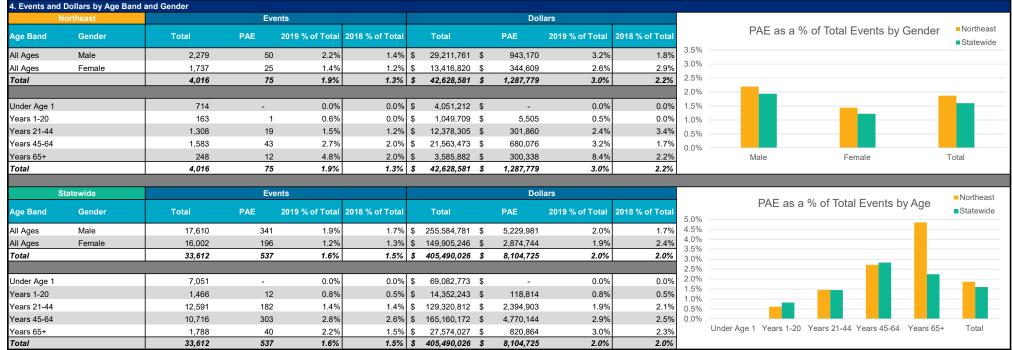




Zone.	Northeast	
1. Total Events		
	Northeast	Statewide
PAE	75	537
Total	4,016	33,612
2019 PAE %	1.9%	1.6%
2018 PAE %	1.3%	1.5%
	PAE % 20 Northeast ■Statew	018 PAE %



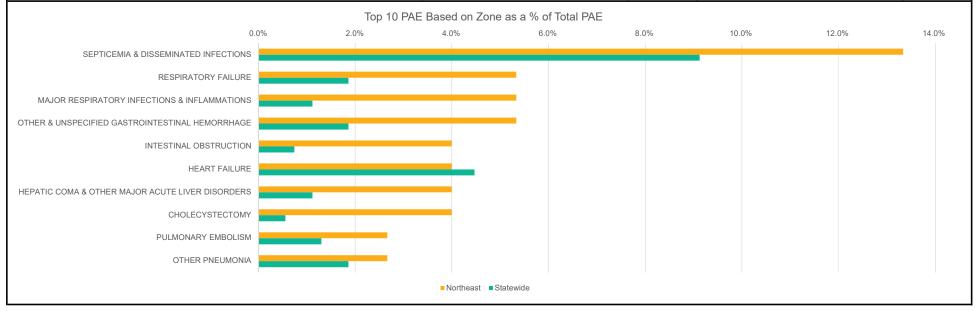






PAE Analysis:	Potentially Avoidable Readmissions
Program Type:	Fee-For-Service
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Northeast

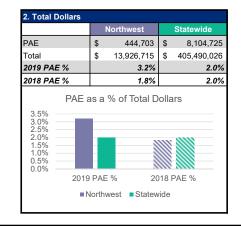
5. Even	s and Dol	llars by Top 10 APR-DRG											
		Top 10 PAE by Zone		Northeast					Statewide				
Zone Rank	APR DRG	Description	PAE	F	PAE Dollars	2019 % of Total PAE	2018 % of Total PAE	PAE	P	AE Dollars	2019 % of Total PAE	2018 % of Total PAE	
1	0720	SEPTICEMIA & DISSEMINATED INFECTIONS	10	\$	263,516	13.3%	5.8%	49	\$	930,652	9.1%	9.7%	
2	0133	RESPIRATORY FAILURE	4	\$	74,743	5.3%	9.6%	10	\$	121,753	1.9%	2.0%	
3	0137	MAJOR RESPIRATORY INFECTIONS & INFLAMMATIONS	4	\$	62,646	5.3%	0.0%	6	\$	83,017	1.1%	0.7%	
4	0253	OTHER & UNSPECIFIED GASTROINTESTINAL HEMORRHAGE	4	\$	29,066	5.3%	0.0%	10	\$	151,391	1.9%	1.1%	
5	0247	INTESTINAL OBSTRUCTION	3	\$	100,510	4.0%	0.0%	4	\$	108,333	0.7%	0.0%	
6	0194	HEART FAILURE	3	\$	49,327	4.0%	3.8%	24	\$	358,164	4.5%	5.3%	
7	0279	HEPATIC COMA & OTHER MAJOR ACUTE LIVER DISORDERS	3	\$	36,327	4.0%	3.8%	6	\$	61,929	1.1%	1.8%	
8	0263	CHOLECYSTECTOMY	3	\$	13,236	4.0%	0.0%	3	\$	13,236	0.6%	0.4%	
9	0134	PULMONARY EMBOLISM	2	\$	40,150	2.7%	0.0%	7	\$	106,702	1.3%	0.4%	
10	0139	OTHER PNEUMONIA	2	\$	34,659	2.7%	1.9%	10	\$	125,029	1.9%	1.7%	
		All Else	37	\$	583,599	49.3%	75.0%	408	\$	6,044,519	76.0%	76.9%	
		Total	75	\$	1,287,779	100.0%	100.0%	537	\$	8,104,725	100.0%	100.0%	

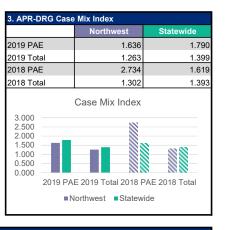






1. Total Events		
	Northwest	Statewide
PAE	32	537
Total	1,560	33,612
2019 PAE %	2.1%	1.6%
2018 PAE %	1.2%	1.5%
	PAE % 20)118 PAE %



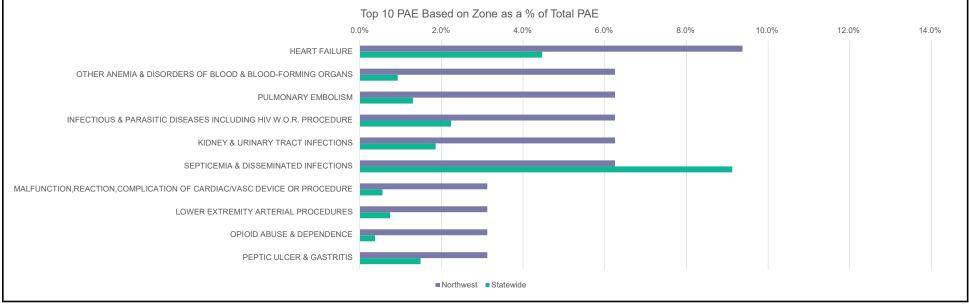


	Dollars by Age Ban	d and Gender											
N	lorthwest		Eve	ents			Dol	lars					
Age Band	Gender	Total	PAE	2019 % of Total	2018 % of Total	Total	PAE	2019 % of Total	2018 % of Total			a % of Total Events by G	ender Northwe Statewid
All Ages	Male	850	16	1.9%	1.3%	\$ 8,550,691	\$ 168,733	2.0%	1.3%	3.5%			
All Ages	Female	710	16	2.3%	1.0%	\$ 5,376,025	\$ 275,970	5.1%	2.9%	3.0%			
Total		1,560	32	2.1%	1.2%	\$ 13,926,715	\$ 444,703	3.2%	1.8%	2.5%			
										2.0%			
Jnder Age 1		298	-	0.0%	0.0%	\$ 1,413,518	\$ -	0.0%	0.0%	1.5%			
/ears 1-20		46	-	0.0%	2.0%	\$ 187,933	\$ -	0.0%	5.6%	1.0%			
Years 21-44		494	4	0.8%	0.8%	\$ 3,976,622	\$ 49,884	1.3%	0.9%	0.5%			
Years 45-64		650	25	3.8%	2.1%	\$ 7,637,038	\$ 377,984	4.9%	2.6%	0.0%			
Years 65+		72	3	4.2%	1.2%	\$ 711,605	\$ 16,835	2.4%	0.8%		Male	Female	Total
Total		1,560	32	2.1%	1.2%	\$ 13,926,715	\$ 444,703	3.2%	1.8%				
S	Statewide		Eve	ents			Dol	lars					■ Northwes
Age Band	Gender	Total	PAE	2019 % of Total	2018 % of Total	Total	PAE	2019 % of Total	2018 % of Total	5.0%		s a % of Total Events by <i>i</i>	Age Statewid
All Ages	Male	17,610	341	1.9%	1.7%	\$ 255,584,781	\$ 5,229,981	2.0%	1.7%	4.5%			
All Ages	Female	16,002	196	1.2%	1.3%	\$ 149,905,246	\$ 2,874,744	1.9%	2.4%	4.0% 3.5%			
Total		33,612	537	1.6%	1.5%	\$ 405,490,026	\$ 8,104,725	2.0%	2.0%	3.0%			
										2.5%			
Jnder Age 1		7,051	-	0.0%	0.0%	\$ 69,082,773	\$ -	0.0%	0.0%	2.0%			
Years 1-20		1,466	12	0.8%	0.5%	\$ 14,352,243	\$ 118,814	0.8%	0.5%	1.5% 1.0%			
Years 21-44		12,591	182	1.4%	1.4%	\$ 129,320,812	\$ 2,394,903	1.9%	2.1%	0.5%			
Years 45-64		10,716	303	2.8%	2.6%	\$ 165,160,172	\$ 4,770,144	2.9%	2.5%	0.0%			
Years 65+		1,788	40	2.2%	1.5%	\$ 27,574,027	\$ 820,864	3.0%	2.3%		Under Age 1 Years 1	-20 Years 21-44 Years 45-64 Y	ears 65+ Total
Total		33,612	537	1.6%	1.5%	\$ 405,490,026	\$ 8,104,725	2.0%	2.0%				



PAE Analysis:	Potentially Avoidable Readmissions
Program Type:	Fee-For-Service
Service Dates:	January 1, 2019 - December 31, 2019
Zono:	Northwest

5. Event	s and Dol	lars by Top 10 APR-DRG										
		Top 10 PAE by Zone			Norti	nwest		Statewide				
Zone Rank	APR DRG	Description	PAE		PAE Dollars	2019 % of Total PAE	2018 % of Total PAE	PAE	F	PAE Dollars	2019 % of Total PAE	2018 % of Total PAE
1	0194	HEART FAILURE	:	3 \$	23,485	9.4%	10.0%	24	\$	358,164	4.5%	5.3%
2	0663	OTHER ANEMIA & DISORDERS OF BLOOD & BLOOD-FORMING ORGANS	:	2 \$	50,334	6.3%	0.0%	5	\$	102,994	0.9%	0.4%
3	0134	PULMONARY EMBOLISM		2 \$	36,161	6.3%	5.0%	7	\$	106,702	1.3%	0.4%
4	0710	INFECTIOUS & PARASITIC DISEASES INCLUDING HIV W O.R. PROCEDURE	:	2 \$	32,780	6.3%	0.0%	12	\$	258,359	2.2%	2.2%
5	0463	KIDNEY & URINARY TRACT INFECTIONS		2 \$	29,554	6.3%	0.0%	10	\$	117,040	1.9%	0.7%
6	0720	SEPTICEMIA & DISSEMINATED INFECTIONS	:	2 \$	23,855	6.3%	5.0%	49	\$	930,652	9.1%	9.7%
7	0206	MALFUNCTION, REACTION, COMPLICATION OF CARDIAC/VASC DEVICE OR PROCEDURE		1 \$	85,279	3.1%	0.0%	3	\$	107,778	0.6%	0.0%
8	0181	LOWER EXTREMITY ARTERIAL PROCEDURES		1 \$	23,762	3.1%	0.0%	4	\$	78,803	0.7%	0.4%
9	0773	OPIOID ABUSE & DEPENDENCE		1 \$	19,302	3.1%	0.0%	2	\$	21,243	0.4%	0.4%
10	0241	PEPTIC ULCER & GASTRITIS		1 \$	15,703	3.1%	0.0%	8	\$	100,624	1.5%	0.4%
		All Else	1	5 \$	104,488	46.9%	80.0%	413	\$	5,922,366	76.9%	80.2%
		Total	3.	2 \$	444,703	100.0%	100.0%	537	\$	8,104,725	100.0%	100.0%





Potentially Avoidable Complications — FFS Beneficiaries

Contents

Table #	Table Title
1	Events by Potentially Avoidable Complication

The table identified above is included for each zone. Zone results are displayed in the following order: Southeast, Southwest, Lehigh/Capital, Northeast, and Northwest. This is the third year of the analysis; therefore, both CY 2019 and CY 2018 results are available and displayed as applicable.

Detailed Description of Tables

Table 1 — displays the total number and types of PACs. This value is displayed at both the zone and statewide level.

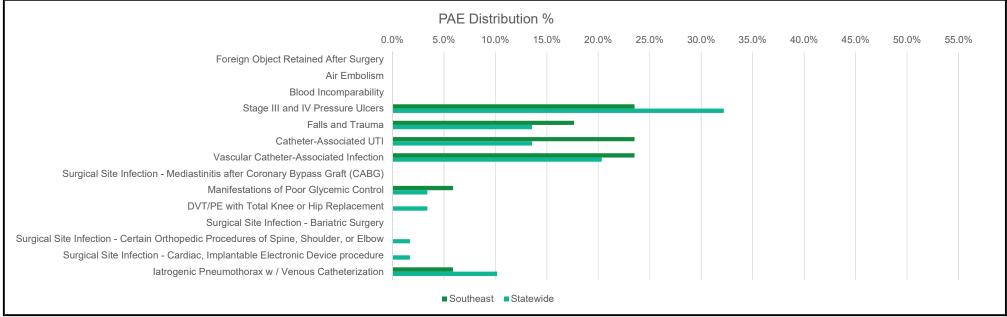
Additional Notes Regarding Data

- 1. Admits and Dollars for CY 2019 service dates are based on FFS claims data submitted through September 30, 2020.
- 2. Inpatient is defined as acute inpatient hospital admissions.
- 3. HCACs are identified using the following process:
 - A. HCAC are identified using publicly available CMS diagnosis and procedure code criteria for FY 2019.

- B. Identified HCACs are then reviewed using POA criteria included on FFS claim data.
- 4. PAEs do not include claims with provider types other than "01" (Acute Care Hospital).
- 5. Beneficiaries eligible for Medicare Part D or Medicare Advantage are excluded from analysis.

PAE Analysis:	Potentially Avoidable Complications
Program Type:	Fee-For-Service
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Southeast

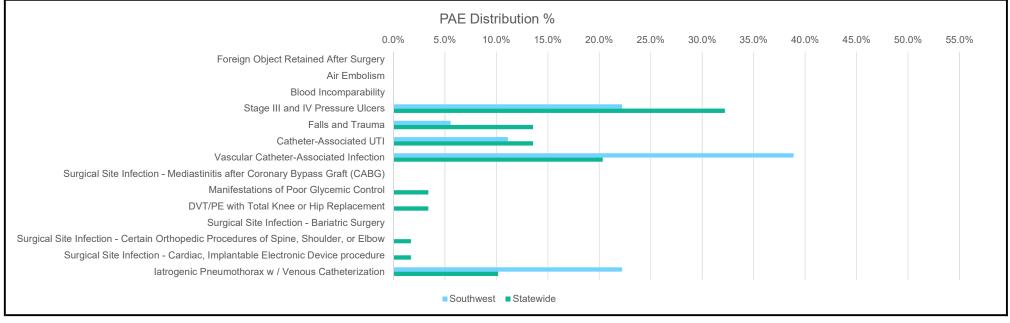
1. Events by	Potentially Avoidable Complication							
			Southeast		Statewide			
PAC#	PAC Description	PAE	2019 % of Total PAE	2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE	
1	Foreign Object Retained After Surgery	-	0.0%	0.0%	-	0.0%	0.0%	
2	Air Embolism	-	0.0%	0.0%	-	0.0%	0.0%	
3	Blood Incomparability	-	0.0%	0.0%	-	0.0%	1.6%	
4	Stage III and IV Pressure Ulcers		4 23.5%	32.1%	19	32.2%	21.9%	
5	Falls and Trauma		3 17.6%	7.1%	8	13.6%	12.5%	
6	Catheter-Associated UTI		4 23.5%	21.4%	8	13.6%	25.0%	
7	Vascular Catheter-Associated Infection		4 23.5%	35.7%	12	20.3%	26.6%	
8	Surgical Site Infection - Mediastinitis after Coronary Bypass Graft (CABG)	-	0.0%	0.0%	-	0.0%	0.0%	
9	Manifestations of Poor Glycemic Control		1 5.9%	0.0%	2	3.4%	4.7%	
10	DVT/PE with Total Knee or Hip Replacement	-	0.0%	3.6%	2	3.4%	1.6%	
11	Surgical Site Infection - Bariatric Surgery	-	0.0%	0.0%	-	0.0%	0.0%	
12	Surgical Site Infection - Certain Orthopedic Procedures of Spine, Shoulder, or Elbow	-	0.0%	0.0%	1	1.7%	0.0%	
13	Surgical Site Infection - Cardiac, Implantable Electronic Device procedure	-	0.0%	0.0%	1	1.7%	0.0%	
14	latrogenic Pneumothorax w / Venous Catheterization		1 5.9%	0.0%	6	10.2%	6.3%	
	Total	1	7 100.0%	100.0%	59	100.0%	100.0%	





PAE Analysis:	Potentially Avoidable Complications
Program Type:	Fee-For-Service
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Southwest

1. Events by	Potentially Avoidable Complication							
			Southwest		Statewide			
PAC#	PAC Description	PAE	2019 % of Total PAE	2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE	
1	Foreign Object Retained After Surgery	-	0.0%	0.0%	-	0.0%	0.0%	
2	Air Embolism	-	0.0%	0.0%	-	0.0%	0.0%	
3	Blood Incomparability	-	0.0%	0.0%	-	0.0%	1.6%	
4	Stage III and IV Pressure Ulcers		4 22.2%	11.1%	19	32.2%	21.9%	
5	Falls and Trauma		1 5.6%	11.1%	8	13.6%	12.5%	
6	Catheter-Associated UTI		2 11.1%	33.3%	8	13.6%	25.0%	
7	Vascular Catheter-Associated Infection		7 38.9%	22.2%	12	20.3%	26.6%	
8	Surgical Site Infection - Mediastinitis after Coronary Bypass Graft (CABG)	-	0.0%	0.0%	-	0.0%	0.0%	
9	Manifestations of Poor Glycemic Control	-	0.0%	11.1%	2	3.4%	4.7%	
10	DVT/PE with Total Knee or Hip Replacement	-	0.0%	0.0%	2	3.4%	1.6%	
11	Surgical Site Infection - Bariatric Surgery	-	0.0%	0.0%	-	0.0%	0.0%	
12	Surgical Site Infection - Certain Orthopedic Procedures of Spine, Shoulder, or Elbow	-	0.0%	0.0%	1	1.7%	0.0%	
13	Surgical Site Infection - Cardiac, Implantable Electronic Device procedure	-	0.0%	0.0%	1	1.7%	0.0%	
14	latrogenic Pneumothorax w / Venous Catheterization		4 22.2%	11.1%	6	10.2%	6.3%	
	Total		18 100.0%	100.0%	59	100.0%	100.0%	





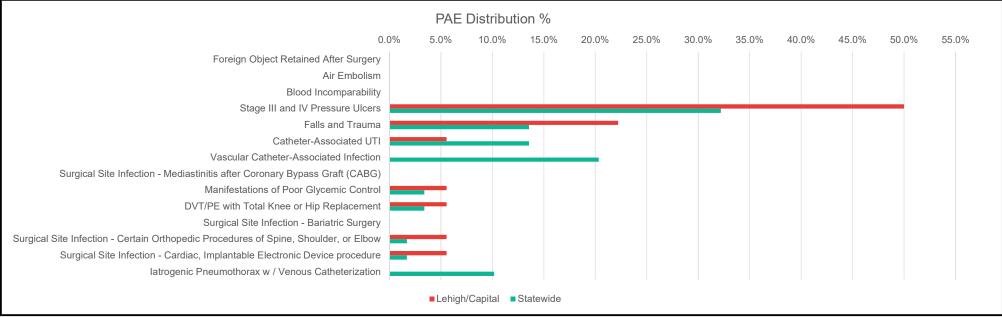
PAE Analysis: Potentially Avoidable Complications

Program Type: Fee-For-Service

Service Dates: January 1, 2019 - December 31, 2019

Zone: Lehigh/Capital

			Lehigh/Capital			Statewide	
PAC#	PAC Description	PAE	2019 % of Total PAE	2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE
1	Foreign Object Retained After Surgery	-	0.0%	0.0%	-	0.0%	0.0%
2	Air Embolism	-	0.0%	0.0%	-	0.0%	0.0%
3	Blood Incomparability	-	0.0%	4.5%	-	0.0%	1.6%
4	Stage III and IV Pressure Ulcers	9	50.0%	13.6%	19	32.2%	21.9%
5	Falls and Trauma	4	22.2%	13.6%	8	13.6%	12.5%
6	Catheter-Associated UTI	1	5.6%	27.3%	8	13.6%	25.0%
7	Vascular Catheter-Associated Infection	-	0.0%	22.7%	12	20.3%	26.6%
8	Surgical Site Infection - Mediastinitis after Coronary Bypass Graft (CABG)	-	0.0%	0.0%	-	0.0%	0.0%
9	Manifestations of Poor Glycemic Control	1	5.6%	9.1%	2	3.4%	4.7%
10	DVT/PE with Total Knee or Hip Replacement	1	5.6%	0.0%	2	3.4%	1.6%
11	Surgical Site Infection - Bariatric Surgery	-	0.0%	0.0%	-	0.0%	0.0%
12	Surgical Site Infection - Certain Orthopedic Procedures of Spine, Shoulder, or Elbow	1	5.6%	0.0%	1	1.7%	0.0%
13	Surgical Site Infection - Cardiac, Implantable Electronic Device procedure	1	5.6%	0.0%	1	1.7%	0.0%
14	latrogenic Pneumothorax w / Venous Catheterization	-	0.0%	9.1%	6	10.2%	6.3%
	Total	18	100.0%	100.0%	59	100.0%	100.0%





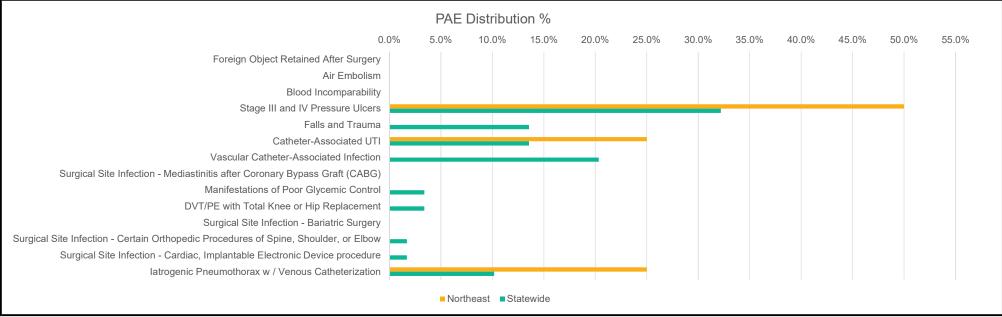
PAE Analysis: Potentially Avoidable Complications

Program Type: Fee-For-Service

Service Dates: January 1, 2019 - December 31, 2019

Zone: Northeast

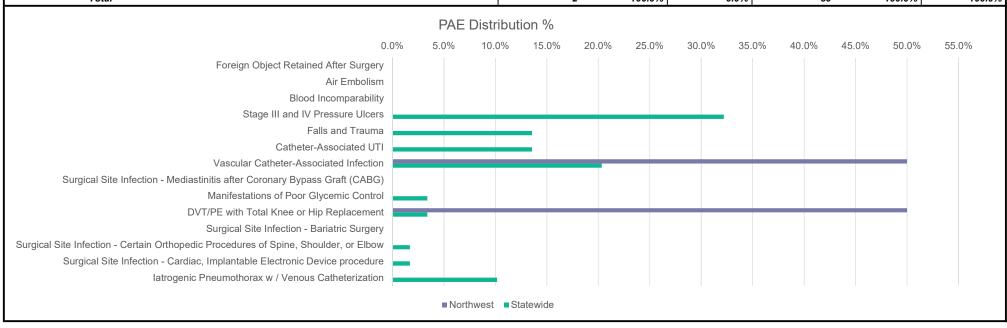
1. Events b	y Potentially Avoidable Complication						
			Northeast			Statewide	
PAC#	PAC Description	PAE	2019 % of Total PAE	2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE
1	Foreign Object Retained After Surgery	-	0.0%	0.0%	-	0.0%	0.0%
2	Air Embolism	-	0.0%	0.0%	-	0.0%	0.0%
3	Blood Incomparability	-	0.0%	0.0%	-	0.0%	1.6%
4	Stage III and IV Pressure Ulcers		2 50.0%	20.0%	19	32.2%	21.9%
5	Falls and Trauma	-	0.0%	40.0%	8	13.6%	12.5%
6	Catheter-Associated UTI		1 25.0%	20.0%	8	13.6%	25.0%
7	Vascular Catheter-Associated Infection	-	0.0%	0.0%	12	20.3%	26.6%
8	Surgical Site Infection - Mediastinitis after Coronary Bypass Graft (CABG)	-	0.0%	0.0%	-	0.0%	0.0%
9	Manifestations of Poor Glycemic Control	-	0.0%	0.0%	2	3.4%	4.7%
10	DVT/PE with Total Knee or Hip Replacement	-	0.0%	0.0%	2	3.4%	1.6%
11	Surgical Site Infection - Bariatric Surgery	-	0.0%	0.0%	-	0.0%	0.0%
12	Surgical Site Infection - Certain Orthopedic Procedures of Spine, Shoulder, or Elbow	-	0.0%	0.0%	1	1.7%	0.0%
13	Surgical Site Infection - Cardiac, Implantable Electronic Device procedure	-	0.0%	0.0%	1	1.7%	0.0%
14	latrogenic Pneumothorax w / Venous Catheterization		1 25.0%	20.0%	6	10.2%	6.3%
	Total		4 100.0%	100.0%	59	100.0%	100.0%





PAE Analysis:	Potentially Avoidable Complications
Program Type:	Fee-For-Service
Service Dates:	January 1, 2019 - December 31, 2019
Zone:	Northwest

1. Events by	y Potentially Avoidable Complication						
			Northwest			Statewide	
PAC#	PAC Description	PAE	2019 % of Total PAE	2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE
1	Foreign Object Retained After Surgery	-	0.0%	0.0%	-	0.0%	0.0%
2	Air Embolism	-	0.0%	0.0%	-	0.0%	0.0%
3	Blood Incomparability	-	0.0%	0.0%	-	0.0%	1.6%
4	Stage III and IV Pressure Ulcers	-	0.0%	0.0%	19	32.2%	21.9%
5	Falls and Trauma	-	0.0%	0.0%	8	13.6%	12.5%
6	Catheter-Associated UTI	-	0.0%	0.0%	8	13.6%	25.0%
7	Vascular Catheter-Associated Infection	1	50.0%	0.0%	12	20.3%	26.6%
8	Surgical Site Infection - Mediastinitis after Coronary Bypass Graft (CABG)	-	0.0%	0.0%	-	0.0%	0.0%
9	Manifestations of Poor Glycemic Control	-	0.0%	0.0%	2	3.4%	4.7%
10	DVT/PE with Total Knee or Hip Replacement	1	50.0%	0.0%	2	3.4%	1.6%
11	Surgical Site Infection - Bariatric Surgery	-	0.0%	0.0%	-	0.0%	0.0%
12	Surgical Site Infection - Certain Orthopedic Procedures of Spine, Shoulder, or Elbow	-	0.0%	0.0%	1	1.7%	0.0%
13	Surgical Site Infection - Cardiac, Implantable Electronic Device procedure	-	0.0%	0.0%	1	1.7%	0.0%
14	latrogenic Pneumothorax w / Venous Catheterization	-	0.0%	0.0%	6	10.2%	6.3%
	Total	2	100.0%	0.0%	59	100.0%	100.0%





Appendix E Glossary

APR-DRGs	All Patient Refined-Diagnosis Related Groups. A version of DRGs that further subdivide the DRGs into four severity-of-illness and four risk-of-mortality subclasses within each DRG.
Beneficiary	A person eligible to receive services in the MA Program of the Commonwealth of Pennsylvania.
CHC	Community HealthChoices. A mandatory managed care program that uses MCOs to coordinate and pay for PH care and long-term services and supports for beneficiaries who are dually eligible for Medicare and Medicaid and those who require a nursing facility level of care.
Claim Data	An invoice for services or goods rendered by a provider or supplier to a beneficiary and presented by the provider, supplier, or his/her/its representative directly to the state (or an administrative services only claims processing vendor) for reimbursement because the service is not (or is at least not known at the time to be) covered under a managed care arrangement under the authority of 42 CFR § 438.
CMS	Centers for Medicare & Medicaid Services. The federal agency within the Department of Health and Human Services responsible for oversight of Medicaid Programs.
Department	The Department of Human Services of the Commonwealth of Pennsylvania.

patients into clinically meaningful groups. A record submitted by the MCO to the Department of a covered health care service provided to a MCO member. FES Fee-For-Service. The delivery system in which the Department pays providers on a per-service basis for health care services provided to beneficiaries. Gender Gender identified within the Department's eligibility system. HCAC Health Care Acquired Condition. A condition occurring in any inpatient hospital setting, identified as a Hospital Acquired Condition by the Secretary of Health and Human Services for purposes of the Medicare program. This includes medical complications or conditions that were not present when the patient was admitted to the hospital. Hospital A public or private institution licensed as a hospital under the laws of the Commonwealth that participates in the MA program. Hospital Outcomes Program A program designed to provide a hospital with information to reduce PAEs and further increase efficiency in the delivery of MA hospital services. MA Medical Assistance. The acronym by which the Commonwealth's Medicaid program, authorized under Article IV of the Public Welfare Code (62 P. S. §§ 401–488), is known.		
Service provided to a MCO member. FES Fee-For-Service. The delivery system in which the Department pays providers on a per-service basis for health care services provided to beneficiaries. Gender Gender identified within the Department's eligibility system. HCAC Health Care Acquired Condition. A condition occurring in any inpatient hospital setting, identified as a Hospital Acquired Condition by the Secretary of Health and Human Services for purposes of the Medicare program. This includes medical complications or conditions that were not present when the patient was admitted to the hospital. Hospital A public or private institution licensed as a hospital under the laws of the Commonwealth that participates in the MA program. Hospital Outcomes Program A program designed to provide a hospital with information to reduce PAEs and further increase efficiency in the delivery of MA hospital services. MA Medical Assistance. The acronym by which the Commonwealth's Medicaid program, authorized under Article IV of the Public Welfare Code (62 P. S. §§ 401–488), is known. MCO Managed Care Organization. A licensed MCO with whom the Department has	Diagnostic Related Groups	· · · · · · · · · · · · · · · · · · ·
providers on a per-service basis for health care services provided to beneficiaries. Gender Gender identified within the Department's eligibility system. HCAC Health Care Acquired Condition. A condition occurring in any inpatient hospital setting, identified as a Hospital Acquired Condition by the Secretary of Health and Human Services for purposes of the Medicare program. This includes medical complications or conditions that were not present when the patient was admitted to the hospital. Hospital A public or private institution licensed as a hospital under the laws of the Commonwealth that participates in the MA program. Hospital Outcomes Program A program designed to provide a hospital with information to reduce PAEs and further increase efficiency in the delivery of MA hospital services. MA Medical Assistance. The acronym by which the Commonwealth's Medicaid program, authorized under Article IV of the Public Welfare Code (62 P. S. §§ 401–488), is known. MCO Managed Care Organization. A licensed MCO with whom the Department has	Encounter Data	·
Health Care Acquired Condition. A condition occurring in any inpatient hospital setting, identified as a Hospital Acquired Condition by the Secretary of Health and Human Services for purposes of the Medicare program. This includes medical complications or conditions that were not present when the patient was admitted to the hospital. Hospital A public or private institution licensed as a hospital under the laws of the Commonwealth that participates in the MA program. Hospital Outcomes Program A program designed to provide a hospital with information to reduce PAEs and further increase efficiency in the delivery of MA hospital services. MA Medical Assistance. The acronym by which the Commonwealth's Medicaid program, authorized under Article IV of the Public Welfare Code (62 P. S. §§ 401–488), is known. MCO Managed Care Organization. A licensed MCO with whom the Department has	FFS	providers on a per-service basis for health care services provided to
hospital setting, identified as a Hospital Acquired Condition by the Secretary of Health and Human Services for purposes of the Medicare program. This includes medical complications or conditions that were not present when the patient was admitted to the hospital. Hospital A public or private institution licensed as a hospital under the laws of the Commonwealth that participates in the MA program. Hospital Outcomes Program A program designed to provide a hospital with information to reduce PAEs and further increase efficiency in the delivery of MA hospital services. MA Medical Assistance. The acronym by which the Commonwealth's Medicaid program, authorized under Article IV of the Public Welfare Code (62 P. S. §§ 401–488), is known. MCO Managed Care Organization. A licensed MCO with whom the Department has	Gender	Gender identified within the Department's eligibility system.
Commonwealth that participates in the MA program. Hospital Outcomes Program A program designed to provide a hospital with information to reduce PAEs and further increase efficiency in the delivery of MA hospital services. MA Medical Assistance. The acronym by which the Commonwealth's Medicaid program, authorized under Article IV of the Public Welfare Code (62 P. S. §§ 401–488), is known. MCO Managed Care Organization. A licensed MCO with whom the Department has	HCAC	hospital setting, identified as a Hospital Acquired Condition by the Secretary of Health and Human Services for purposes of the Medicare program. This includes medical complications or conditions that were not present when the
and further increase efficiency in the delivery of MA hospital services. MA Medical Assistance. The acronym by which the Commonwealth's Medicaid program, authorized under Article IV of the Public Welfare Code (62 P. S. §§ 401–488), is known. MCO Managed Care Organization. A licensed MCO with whom the Department has	Hospital	· · · · · · · · · · · · · · · · · · ·
program, authorized under Article IV of the Public Welfare Code (62 P. S. §§ 401–488), is known. MCO Managed Care Organization. A licensed MCO with whom the Department has	Hospital Outcomes Program	
\mathbf{J}	MA	program, authorized under Article IV of the Public Welfare Code (62 P. S.
	MCO	

Medicaid Program	The joint federal and state program through which health care services are provided to eligible beneficiaries in conformation with Title XIX of the Social Security Act (42 U.S.C.A. §§ 1396–1396q) and regulations issued under it.
OPPC	 Other Provider Preventable Conditions. A condition occurring in any health care setting that meets the following criteria: Is identified in the State plan. Has been found by the State, based upon a review of medical literature by qualified professionals, to be reasonably preventable through the application of procedures supported by evidence-based guidelines. Has a negative consequence for the beneficiary. Is auditable. Includes, at a minimum, the following: Wrong surgical or other invasive procedure performed on a patient. Surgical or other invasive procedure performed on the wrong body part. Surgical or other invasive procedure performed on the wrong patient.
PAA	Potentially Avoidable Admission. An admission of an individual to a hospital or long-term care facility, which may have reasonably been prevented with adequate access to ambulatory care or health care coordination.
PAC	Potentially Avoidable Complication. A harmful event or negative outcome with respect to an individual, including an infection or surgical complication, that: Occurs after the person's admission to a hospital or long-term care facility.

 May have resulted from the care, lack of care, or treatment provided during the hospital or long-term care facility stay, rather than from a natural progression of an underlying disease.
 Potentially Avoidable Event. Any of the following: A potentially avoidable admission. A potentially avoidable complication. A potentially avoidable emergency visit. A potentially avoidable readmission. A combination of the events listed under this definition.
Potentially Avoidable Readmission. A return hospitalization of an individual within a period specified by the Department that may have resulted from a deficiency in the care or treatment provided to the individual during a previous hospital stay or from a deficiency in post hospital discharge follow up. The term does not include a hospital readmission necessitated by the occurrence of unrelated events after the discharge. The term includes the readmission of an individual to a hospital for:
 The same condition or procedure for which the individual was previously admitted.
• An infection or other complication resulting from care previously provided.
 A condition or procedure indicating that a surgical intervention performed during a previous admission was unsuccessful in achieving the anticipated outcome.

PAV	Potentially Avoidable Emergency Visit. Treatment of an individual in a hospital emergency room or freestanding emergency medical care facility for a condition that may not require emergency medical attention because the condition could be or could have been treated or prevented by a physician or other health care provider in a nonemergency setting.
PH HealthChoices	The mandatory managed care program that uses MA MCOs to coordinate and pay for PH services.
POA	Present on Admission. POA is a condition that is present at the time the order for inpatient admission occurs.
PPC	Provider Preventable Condition. A condition that meets the definition of a health care-acquired condition or other provider-preventable condition as defined in 42 CFR § 447.26(b).
PROMISe	Provider Reimbursement and Operations Management Information System. The Department's Medicaid Management Information System which is the CMS certified information system.

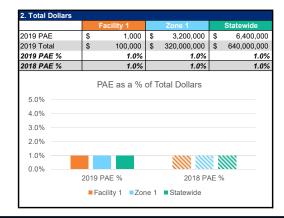
Hospital Report Template — MCO Beneficiaries

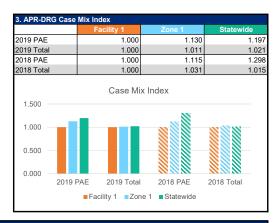
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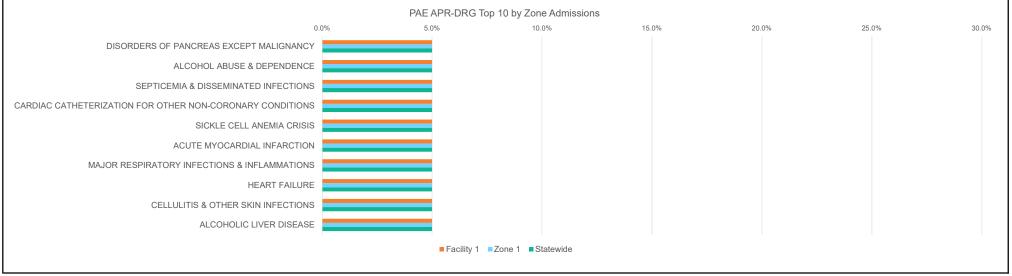




Template for Demonstration Only

		_	-
PAE Analysis:	Potentially Avoidable Readmissions		
Program Type:	Managed Care		
Service Dates:	January 1, 2019 - December 31, 2019		
Facility:	Facility 1		

5. Event	s and Doll	ars by Top 10 APR-DRG												
		Top 10 PAE by Zone		Facili	ty 1			Zone	1			Statew	ride	
Zone Rank	APR DRG	Description	PAE	PAE Dollars	2019 % of Total PAE	2018 % of Total PAE	PAE	PAE Dollars	2019 % of Total PAE	2018 % of Total PAE	PAE	PAE Dollars	2019 % of Total PAE	2018 % of Total PAE
1	0282	DISORDERS OF PANCREAS EXCEPT MALIGNANCY	2	\$ 50	5.0%	5.0%	10 9	\$ 160,000	5.0%	5.0%	20 \$	320,000	5.0%	5.0%
2	0775	ALCOHOL ABUSE & DEPENDENCE	2	\$ 50	5.0%	5.0%	10 \$	\$ 160,000	5.0%	5.0%	20 \$	320,000	5.0%	5.0%
3	0720	SEPTICEMIA & DISSEMINATED INFECTIONS	2	\$ 50	5.0%	5.0%	10 8	\$ 160,000	5.0%	5.0%	20 \$	320,000	5.0%	5.0%
4	0192	CARDIAC CATHETERIZATION FOR OTHER NON-CORONARY CONDITIONS	2	\$ 50	5.0%	5.0%	10 9	\$ 160,000	5.0%	5.0%	20 \$	320,000	5.0%	5.0%
5	0662	SICKLE CELL ANEMIA CRISIS	2	\$ 50	5.0%	5.0%	10 9	\$ 160,000	5.0%	5.0%	20 \$	320,000	5.0%	5.0%
6	0190	ACUTE MYOCARDIAL INFARCTION	2	\$ 50	5.0%	5.0%	10 \$	\$ 160,000	5.0%	5.0%	20 \$	320,000	5.0%	5.0%
7	0137	MAJOR RESPIRATORY INFECTIONS & INFLAMMATIONS	2	\$ 50	5.0%	5.0%	10 \$	\$ 160,000	5.0%	5.0%	20 \$	320,000	5.0%	5.0%
8	0194	HEART FAILURE	2	\$ 50	5.0%	5.0%	10 \$	\$ 160,000	5.0%	5.0%	20 \$	320,000	5.0%	5.0%
9	0383	CELLULITIS & OTHER SKIN INFECTIONS	2	\$ 50	5.0%	5.0%	10 \$	\$ 160,000	5.0%	5.0%	20 \$	320,000	5.0%	5.0%
10	0280	ALCOHOLIC LIVER DISEASE	2	\$ 50	5.0%	5.0%	10 5	\$ 160,000	5.0%	5.0%	20 \$	320,000	5.0%	5.0%
		All Else	20	\$ 500	50.0%	50.0%	100 \$	\$ 1,600,000	50.0%	50.0%	200 \$	3,200,000	50.0%	50.0%
		Total	40	\$ 1,000	100.0%	100.0%	200	\$ 3,200,000	100.0%	100.0%	400 \$	6,400,000	100.0%	100.0%





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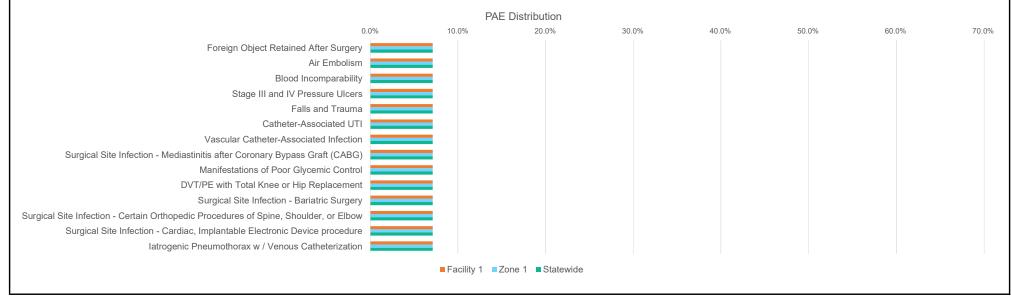
PAE Analysis: Potentially Avoidable Complications

Program Type: Managed Care

Service Dates: January 1, 2019 - December 31, 2019

Facility: Facility 1

1. Events by	Potentially Avoidable Complication									
			Facility 1			Zone 1			Statewide	
PAC#	PAC Description	PAE	2019 % of Total PAE	2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE
1	Foreign Object Retained After Surgery		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
2	Air Embolism		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
3	Blood Incomparability		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
4	Stage III and IV Pressure Ulcers		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
5	Falls and Trauma		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
6	Catheter-Associated UTI		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
7	Vascular Catheter-Associated Infection		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
8	Surgical Site Infection - Mediastinitis after Coronary Bypass Graft (CABG)		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
9	Manifestations of Poor Glycemic Control		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
10	DVT/PE with Total Knee or Hip Replacement		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
11	Surgical Site Infection - Bariatric Surgery		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
12	Surgical Site Infection - Certain Orthopedic Procedures of Spine, Shoulder, or Elbow		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
13	Surgical Site Infection - Cardiac, Implantable Electronic Device procedure		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
14	latrogenic Pneumothorax w / Venous Catheterization		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%
	Total	1	4 100.0%	100.0%	28	100.0%	100.0%	42	100.0%	100.0%





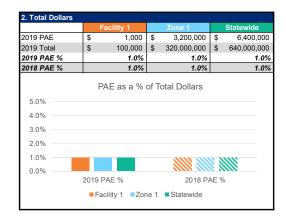
Hospital Report Template — FFS Beneficiaries

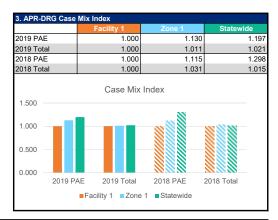
Data labeled as "Facility 1" does not represent actual individual hospital results, and is for demonstration purposes only of the information that will be provided to each hospital.

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Facility:	Facility 1		
1. Total Events			
	Facility 1	Zone 1	Statewide
2019 PAE	40	200	400
2019 Total	4,000	20,000	40,000
2019 PAE %	1.0%	1.0%	1.0%
2018 PAE %	1.0%	1.0%	1.0%
4.0% ————————————————————————————————————			
1.0%			
0.0%	2019 PAE %	2018 PA	E %
	■Facility 1 ■Zon	e 1 Statewide	





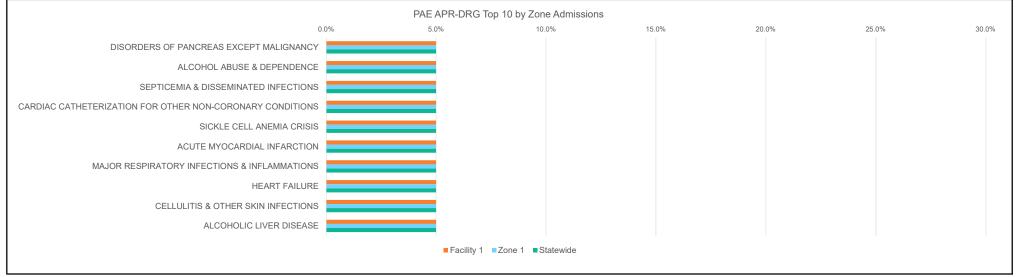




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PAE Analysis: Potentially Avoidable Readmissions
Program Type: Fee-For-Service
Service Dates: January 1, 2019 - December 31, 2019
Facility: Facility 1

5. Events and Dollars by Top 10 APR-DRG														
		Top 10 PAE by Zone	Facility 1			Zone 1				Statewide				
Zone Rank	APR DRG	Description	PAE	PAE Dollars	2019 % of Total PAE	2018 % of Total PAE	PAE	PAE Dol	ars 2019 % of Total PAE	2018 % of Total PAE	PAE	PAE Dollars	2019 % of Total PAE	2018 % of Total PAE
1	0282	DISORDERS OF PANCREAS EXCEPT MALIGNANCY	2	\$ 50	5.0%	5.0%	10	\$ 16	0,000 5.0%	5.0%	20 \$	32,000,000	5.0%	5.0%
2	0775	ALCOHOL ABUSE & DEPENDENCE	2	\$ 50	5.0%	5.0%	10	\$ 16	0,000 5.0%	5.0%	20 \$	32,000,000	5.0%	5.0%
3	0720	SEPTICEMIA & DISSEMINATED INFECTIONS	2	\$ 50	5.0%	5.0%	10	\$ 16	0,000 5.0%	5.0%	20 \$	32,000,000	5.0%	5.0%
4	0192	CARDIAC CATHETERIZATION FOR OTHER NON-CORONARY CONDITIONS	2	\$ 50	5.0%	5.0%	10	\$ 16	0,000 5.0%	5.0%	20 \$	32,000,000	5.0%	5.0%
5	0662	SICKLE CELL ANEMIA CRISIS	2	\$ 50	5.0%	5.0%	10	\$ 16	0,000 5.0%	5.0%	20 \$	32,000,000	5.0%	5.0%
6	0190	ACUTE MYOCARDIAL INFARCTION	2	\$ 50	5.0%	5.0%	10	\$ 16	0,000 5.0%	5.0%	20 \$	32,000,000	5.0%	5.0%
7	0137	MAJOR RESPIRATORY INFECTIONS & INFLAMMATIONS	2	\$ 50	5.0%	5.0%	10	\$ 16	0,000 5.0%	5.0%	20 \$	32,000,000	5.0%	5.0%
8	0194	HEART FAILURE	2	\$ 50	5.0%	5.0%	10	\$ 16	0,000 5.0%	5.0%	20 \$	32,000,000	5.0%	5.0%
9	0383	CELLULITIS & OTHER SKIN INFECTIONS	2	\$ 50	5.0%	5.0%	10	\$ 16	0,000 5.0%	5.0%	20 \$	32,000,000	5.0%	5.0%
10	0280	ALCOHOLIC LIVER DISEASE	2	\$ 50	5.0%	5.0%	10	\$ 16	0,000 5.09	5.0%	20 \$	32,000,000	5.0%	5.0%
		All Else	20	\$ 500	50.0%	50.0%	100	\$ 1,60	0,000 50.0%	50.0%	200 \$	320,000,000	50.0%	50.0%
		Total	40	\$ 1,000	100.0%	100.0%	200	\$ 3,20	0,000 100.0%	100.0%	400 \$	640,000,000	100.0%	100.0%





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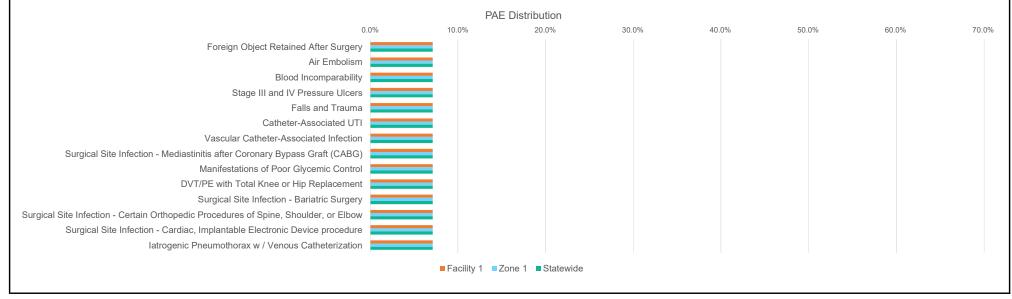
PAE Analysis: Potentially Avoidable Complications

Program Type: Fee-For-Service

Service Dates: January 1, 2019 - December 31, 2019

Facility: Facility 1

	PAC Description		Facility 1			Zone 1			Statewide		
PAC#		PAE	2019 % of Total PAE	2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE	PAE	2019 % of Total PAE	2018 % of Total PAE	
1	Foreign Object Retained After Surgery		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
2	Air Embolism		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
3	Blood Incomparability		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
4	Stage III and IV Pressure Ulcers		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
5	Falls and Trauma		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
6	Catheter-Associated UTI		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
7	Vascular Catheter-Associated Infection		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
8	Surgical Site Infection - Mediastinitis after Coronary Bypass Graft (CABG)		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
9	Manifestations of Poor Glycemic Control		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
10	DVT/PE with Total Knee or Hip Replacement		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
11	Surgical Site Infection - Bariatric Surgery		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
12	Surgical Site Infection - Certain Orthopedic Procedures of Spine, Shoulder, or Elbow		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
13	Surgical Site Infection - Cardiac, Implantable Electronic Device procedure		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
14	latrogenic Pneumothorax w / Venous Catheterization		1 7.1%	7.1%	2	7.1%	7.1%	3	7.1%	7.1%	
	Total	1.	4 100.0%	100.0%	28	100.0%	100.0%	42	100.0%	100.0%	





Appendix H Hospital List

	Health Care Outcomes Facility List			
Facility Name	Group Name	Medicare ID	Billing MPI	Service Location
ABINGTON MEMORIAL HOSPITAL	ABINGTON MEMORIAL HOSP	390231	100769186	0184
ADVANCED SURGICAL HOSPITAL	ADVANCED SURGICAL HOSPITAL	390323	102535275	0002
ALBERT EINSTEIN MEDICAL CENTER	ALBERT EINSTEIN MED CTR	390142	100754414	0015
AEMC-ELKINS PARK	ALBERT EINSTEIN MED CTR	390142	100754414	0116
ALLE KISKI MEDICAL CENTER	ALLE KISKI MEDICAL CENTER	390032	100744768	0001
AUMC CANONSBURG	ALLEGHENY UNIVERSITY MEDICAL CENTER-CANONSBURG	390160	100727730	0001
AMERICAN ONCOLOGIC HOSPITAL	AMERICAN ONCOLOGIC HOSPITAL	390196	100773699	0004
ARIA HEALTH HOSPITAL FRANKFORD	ARIA HEALTH	390115	100770525	0010
ARIA HEALTH	ARIA HEALTH	390115	100770525	0011
ARIA HEALTH BUCKS COUNTY CAMPUS	ARIA HEALTH	390115	100770525	0041
ARMSTRONG COUNTY MEMORIAL HOSPITAL	ARMSTRONG COUNTY MEM HOSP	390163	100745907	0002
BARNES-KASSON COUNTY HOSPITAL	BARNES KASSON HOSPITAL	391309	100727622	0007
BERWICK HOSPITAL COMPANY LLC	BERWICK HOSPITAL CENTER	390072	100756259	0006
BRADFORD REGIONAL MEDICAL CENTER	BRADFORD REGIONAL MEDICAL CENTER	390118	100775503	0022
BRADFORD REGIONAL MEDICAL CENTER	BRADFORD REGIONAL MEDICAL CENTER	390118	100750765	0005
BRANDYWINE HOSPITAL	BRANDYWINE HOSPITAL	390076	103442072	0001
BRANDYWINE HOSPITAL	BRANDYWINE HOSPITAL	390076	100775129	0005
PENN HIGHLANDS BROOKVILLE	BROOKVILLE HOSPITAL	391312	100773125	0004
BRYN MAWR HOSPITAL	BRYN MAWR HOSPITAL	390139	100775576	0026
BUCKTAIL MEDICAL CENTER	BUCKTAIL MEDICAL CENTER	391304	100753428	0002
BUTLER MEMORIAL HOSPITAL	BUTLER MEMORIAL HOSPITAL	390168	100704439	0002
THE CHAMBERSBURG HOSPITAL	CHAMBERSBURG HOSPITAL	390151	100775100	0009
CHESTER COUNTY HOSPITAL	CHESTER COUNTY HOSPITAL	390179	100743970	0009
CHESTNUT HILL HOSPITAL	CHESTNUT HILL HOSPITAL CHESTNUT HILL HOSPITAL	390026	103432933	0001 0002
CHESTNUT HILL HOSPITAL CHILDRENS HOSPITAL OF PHILADELPHIA		390026	101315197	
	CHILDRENS HOSPITAL OF PHILADELPHIA	393303	100770991	0056
CLARION HOSPITAL	CLARION HOSPITAL	390093	100233767	0005
PENN HIGHLANDS CLEARFIELD	CLEARFIELD HOSPITAL	390052	100747400	0032
CONEMAUGH MINERS MEDICAL CENTER	CONEMAUGH MINERS MEDICAL CENTER	390130	102976378	0001
CONEMAUGH MEMORIAL MEDICAL CENTER	CONEMAUGH VALLEY MEM HOSP	390110	102976289	0001
CH HOSPITAL OF ALLENTOWN LLC	COORDINATED HEALTH HOSPITAL OF ALLENTOWN LLC	390321	102374924	0001
COORDINATED HEALTH ORTHOPEDIC HOSPITAL LLC	COORDINATED HEALTH ORTHOPEDIC HOSPITAL	390314	102210574	0001
CORRY MEMORIAL HOSPITAL	CORRY MEMORIAL HOSP	391308	100769990	0022
CROZER-CHESTER MEDICAL CENTER	CROZER CHESTER MEDICAL CENTER-TAYLOR	390180	103115130	0001
CROZER-CHESTER MEDICAL CENTER SPRINGFIELD	CROZER CHESTER MEDICAL CENTER-TAYLOR	390180	103115130	0002
CROZER-CHESTER MEDICAL CENTER TAYLOR	CROZER CHESTER MEDICAL CENTER-TAYLOR	390180	103115130	0003
CURAHEALTH HERITAGE VALLEY	CURAHEALTH HERITAGE VALLEY	392043	103229042	0001
CURAHEALTH PITTSBURGH	CURAHEALTH PITTSBURGH	392028	103229051	0001
DELAWARE COUNTY MEMORIAL HOSPITAL	DELAWARE COUNTY MEM HOSP	390081	103106893	0001
DOYLESTOWN HOSPITAL	DOYLESTOWN HOSPITAL	390203	100125732	0003
PENN HIGHLANDS DUBOIS	DUBOIS REGIONAL MED CTR	390086	100774088	0070
EASTON HOSPITAL	ST. LUKE'S HOSPITAL EASTON CAMPUS (EASTON HOSPITAL)	390162	103379540	0001
EASTON HOSPITAL	ST. LUKE'S HOSPITAL EASTON CAMPUS (EASTON HOSPITAL)	390162	100752590	0001
EINSTEIN MEDICAL CENTER MONTGOMERY	EINSTEIN MEDICAL CENTER MONTGOMERY	390329	102743527	0001
ELLWOOD MEDICAL CENTER LLC	ELLWOOD MEDICAL CENTER LLC	390008	103462790	0001
ELLWOOD MEDICAL CENTER LLC	ELLWOOD MEDICAL CENTER LLC	390008	100771854	0006
ENDLESS MOUNTAINS HEALTH SYSTEMS	ENDLESS MOUNTAIN HEALTH SYSTEMS	391306	100737306	0011
EPHRATA COMMUNITY HOSPITAL	EPHRATA COMMUNITY HOSPITAL	390225	100746468	0006
EVANGELICAL COMMUNITY HOSPITAL	EVANGELICAL COMM HOSPITAL	390013	100773151	8000
FRICK HOSPITAL	FRICK HOSPITAL	390217	100727963	0007



	Health Care Outcomes I acinty List			Health Care Outcomes Facility List								
Facility Name	Group Name	Medicare ID	Billing MPI	Service Location								
FULTON COUNTY MEDICAL CENTER	FULTON COUNTY MEDICAL CENTER	391303	100742763	0011								
GEISINGER-BLOOMSBURG HOSPITAL	GEISINGER BLOOMSBURG HOSPITAL	390003	100774041	0009								
GEISINGER COMMUNITY MEDICAL CENTER	GEISINGER COMMUNITY MEDICAL CENTER	390001	100745676	0006								
GEISINGER-LEWISTOWN HOSPITAL	GEISINGER LEWISTOWN HOSPITAL	390048	100750676	0004								
GEISINGER MEDICAL CENTER	GEISINGER MEDICAL CENTER	390006	100747886	0069								
GEISINGER-SHAMOKIN AREA COMMUNITY HOSPITAL	GEISINGER MEDICAL CENTER	390006	100747886	0097								
GSL HOSPITAL	GEISINGER ST. LUKE'S HOSPITAL	390332	103727386	0001								
GEISINGER WYOMING VALLEY MEDICAL CENTER	GEISINGER-WYOMING MED CTR	390270	100758478	0002								
THE GOOD SAMARITAN HOSPITAL	GOOD SAMARITAN HOSPITAL	390066	100773278	0004								
GOOD SHEPHERD PENN PTNRS SPEC HOSP AT RITTENHOUSE	GOOD SHEPHERD PENN PTNRS SPEC HOSP AT RITTENHOUSE	390320	102381123	0001								
ALLENTOWN SPECIALTY HOSPITAL	GOOD SHEPHERD SPECIALTY HOSPITAL	392033	102981028	0001								
GRAND VIEW HOSPITAL	GRAND VIEW HOSPITAL	390057	100125741	0007								
GROVE CITY MEDICAL CENTER HOSPITAL	GROVE CITY MEDICAL CENTER	390266	100725747	0007								
GUTHRIE TOWANDA MEMORIAL HOSPITAL	GUTHRIE TOWANDA MEMORIAL HOSPITAL	390236	100770347	0000								
HAHNEMANN UNIVERSITY HOSPITAL	HAHNEMANN UNIVERSITY HOSPITAL	390230	100771320	0001								
		390290										
HAHNEMANN UNIVERSITY HOSPITAL	HAHNEMANN UNIVERSITY HOSPITAL		100756393	0015								
HERITAGE VALLEY BEAVER	HERITAGE VALLEY BEAVER	390036	100003355	0174								
HERITAGE VALLEY BEAVER	HERITAGE VALLEY BEAVER	390036	100003355	0175								
HERITAGE VALLEY SEWICKLEY	HERITAGE VALLEY SEWICKLEY	390037	100003355	0179								
HIGHLANDS HOSPITAL	HIGHLANDS HOSPITAL & HLTH CTR	390184	100776921	0010								
HOLY REDEEMER HOSPITAL	HOLY REDEEMER HOSPITAL	390097	100126453	0009								
HOLY SPIRIT HOSPITAL	HOLY SPIRIT HOSPITAL	390004	100771881	0081								
NDIANA REGIONAL MEDICAL CENTER	INDIANA REGIONAL MEDICAL CENTER	390173	100771353	0001								
PENN HIGHLANDS HUNTINGTON	J C BLAIR HOSPITAL	390056	100768376	0041								
JEANES HOSPITAL	JEANES HOSPITAL	390080	100506111	8000								
JEFFERSON REGIONAL MEDICAL CENTER	JEFFERSON HEALTH SERVICES	390265	100744347	0018								
JENNERSVILLE HOSPITAL	JENNERSVILLE HOSPITAL	390220	103442063	0001								
JENNERSVILLE HOSPITAL	JENNERSVILLE HOSPITAL	390220	100731240	0006								
JERSEY SHORE HOSPITAL	JERSEY SHORE HOSPITAL	391300	100770356	0003								
KENSINGTON HOSPTAL	KENSINGTON HOSPITAL	390025	100771729	0006								
KINDRED HOSPITAL PHILADELPHIA-HAVERTOWN	KINDRED HOSPITAL	392027	001759216	0005								
KINDRED HOSPITAL OF PHILADELPHIA	KINDRED HOSPITAL	392027	001759216	0009								
KINDRED HOSPITAL PHILADELPHIA SOUTH	KINDRED HOSPITAL PHILADELPHIA SOUTH	392046	102688579	0001								
LANCASTER GENERAL HOSPITAL	LANCASTER GENERAL HOSP	390100	100771175	0051								
WOMEN AND BABIES HOSPITAL	LANCASTER GENERAL HOSP	390100	100771175	0081								
LANSDALE HOSPITAL CORPORATION	LANSDALE HOSPITAL CORPORATION	390012	102256789	0001								
LATROBE AREA HOSPITAL	LATROBE AREA HOSPITAL	390219	100761052	0083								
LEHIGH VALLEY HOSPITAL	LEHIGH VALLEY HOSPITAL	390133	100766021	0018								
LEHIGH VALLEY HOSPITAL	LEHIGH VALLEY HOSPITAL	390133	100766021	0023								
LEHIGH VALLEY HOSPITAL	LEHIGH VALLEY HOSPITAL	390133	100766021	0057								
LEHIGH VALLEY REILLY CHILDRENS HOSPITAL	LEHIGH VALLEY HOSPITAL	390133	100766021	0106								
LEHIGH VALLEY HOSPITAL HAZLETON	LEHIGH VALLEY HOSPITAL HAZLETON	390185		0004								
LEHIGH VALLEY HOSPITAL MUHLENBERG	LEHIGH VALLEY HOSPITAL MUHLENBERG	390263	100726719	0004								
LEHIGH VALLEY HOSPITAL MUHLENBERG	LEHIGH VALLEY HOSPITAL MUHLENBERG	390263	100786021	0076								
LEHIGH VALLEY HOSPITAL MUNILENBERG LEHIGH VALLEY HOSPITAL SCHUYLKILL	LEHIGH VALLEY HOSPITAL MORLENDERG	390263	100730000	0001								
		390030										
LEHIGH VALLEY HOSPITAL SCHUYLKILL	LEHIGH VALLEY HOSPITAL S OF MECHANGISPURG		100760725	0031								
LIFECARE HOSPITALS OF MECHANCISBURG	LIFECARE HOSPITALS OF MECHANCISBURG	BBBBBB	102904510	0001								
	LIFECARE HOSPITALS OF PITTSBURGH-ALLE KISKI	392204	102904459	0003								
LIFECARE HOSPITALS OF PITTSBURGH-ALLE KISKI LIFECARE HOSPITALS OF PITTSBURGH-MAIN	LIFECARE HOSPITALS OF PITTSBURGH-MAIN	392204	102904459	0002								



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Facility Name	Group Name	Medicare ID	Billing MPI	Service Location				
PRIME HEALTHCARE SERVICES LOWER BUCKS LLC	LOWER BUCKS HOSPITAL	390070	102862484	0001				
MCMC MERCY FITZGERALD CAMPUS	M.C.M.C. FITZGERALD MERCY DV	390156A	100730682	0001				
MAIN LINE HOSPITAL LANKENAU	MAIN LINE HOSPITAL LANKENAU	390195	100735428	0039				
MEADVILLE MEDICAL CENTER	MEADVILLE MEDICAL CENTER	390113	100752115	0043				
MCMC MERCY PHILADELPHIA CAMPUS	MERCY HOSPITAL OF PHILADELPHIA	390156	100730682	0068				
SUBURBAN COMMUNITY HOSPITAL	MERCY SUBURBAN HOSPITAL	390116	103075750	0001				
CONEMAUGH MEYERSDALE MEDICAL CENTER	MEYERSDALE COMMUNITY HOSP	391302	102976322	0001				
MILLCREEK COMMUNITY HOSPITAL	MILLCREEK COMMUNITY HOSPITAL	390198	100771120	0008				
THE MILTON S HERSHEY MEDICAL CENTER	MILTON S. HERSHEY MEDICAL CTR, THE	390256	100765310	0005				
MONONGAHELA VALLEY HOSPITAL INC	MONONGAHELA VALLEY HOSP, INC	390147	100738887	0002				
SCRANTON QUINCY HOSPITAL COMPANY LLC	MOSES TAYLOR HOSPITAL	390119	102705188	0001				
MOUNT NITTANY MEDICAL CENTER	MOUNT NITTANY MEDICAL CENTER	390268	100746655	0003				
CONEMAUGH NASON MEDICAL CENTER	NASON HOSPITAL	390062	102998929	0001				
NAZARETH HOSPITAL	NAZARETH HOSPITAL	390204	100765472	0011				
NEW LIFECARE HOSPITALS OF CHESTER COUNTY LLC	NEW LIFECARE HOSPITALS OF CHESTER COUNTY LLC	392048	102904495	0001				
OHIO VALLEY GENERAL HOSPITAL	OHIO VALLEY GENERAL HOSPITAL	390157	100750282	0003				
OSS ORTHOPAEDIC HOSPITAL	OSS ORTHOPAEDIC HOSPITAL	390325	102569451	0001				
POST ACUTE MEDICAL AT NANTICOKE LLC	PAM SPECIALTY HOSPITAL	392025	103067848	0002				
POST ACUTE MEDICAL AT NANTICOKE LLC	PAM SPECIALTY HOSPITAL	392025	103067848	0001				
PAOLI MEMORIAL HOSPITAL	PAOLI MEMORIAL HOSPITAL	390153	100735428	0036				
PENN HIGHLANDS ELK	PENN HIGHLANDS ELK	390154	100733420	0030				
PENN PRESBYTERIAN MEDICAL CENTER	PENN PRESBYTERIAN MEDICAL CENTER	390223	100729200	0008				
PENNSYLVANIA HOSPITAL/UPHS	PENNSYLVANIA HOSPITAL/UPHS	390226	100023707	0007				
PHOENIXVILLE HOSPITAL	PHOENIXVILLE HOSPITAL	390127	103441333	0007				
PHOENIXVILLE HOSPITAL	PHOENIXVILLE HOSPITAL	390127	101095315	0001				
PHYSICIANS CARE SURGICAL HOSPITAL	PHYSICIANS CARE SURGICAL HOSPITAL	390324	101093315	0001				
			102569415	0001				
PINNACLE HEALTH LANCASTER REGIONAL MEDICAL CENTER	PINNACLE HEALTH LANCASTER REGIONAL MEDICAL CEN	390061						
PINNACLE HEALTH LANCASTER REGIONAL MEDICAL CENTER	PINNACLE HEALTH LANCASTER REGIONAL MEDICAL CEN	390061	100006713	0006				
POCONO MEDICAL CENTER	POCONO HOSPITAL	390201	100772397	0001				
POTTSTOWN HOSPITAL	POTTSTOWN HOSPITAL	390123	103441692	0001				
POTTSTOWN HOSPITAL	POTTSTOWN HOSPITAL	390123	100751744	0003				
PUNXSUTAWNEY AREA HOSPITAL	PUNXSUTAWNEY AREA HOSPITAL	390199	100771264	0007				
READING HOSPITAL	READING HOSPITAL-MED CTR	390044	100286591	0069				
SCRANTON HOSPITAL COMPANY LLC	REGIONAL HOSPITAL OF SCRANTON	390237	102607329	0001				
RIDDLE MEMORIAL HOSPITAL	RIDDLE MEMORIAL HOSPITAL	390222	100741229	0004				
ROBERT PACKER HOSPITAL	ROBERT PACKER HOSPITAL	390079	100770614	0003				
ROXBOROUGH MEMORIAL HOSPITAL	ROXBOROUGH MEMORIAL HOSPITAL	390304	102685791	0001				
SACRED HEART HOSPITAL	SACRED HEART HOSPITAL	390197	100727542	0012				
ST MARY MEDICAL CENTER	SAINT MARY MEDICAL CENTER	390258	100773142	0004				
SAINT VINCENT HEALTH CENTER	SAINT VINCENT HEALTH CENTER	390009	100162520	0025				
SCHUYLKILL MEDICAL CENTER EAST NORWEGIAN STREET	SCHUYLKILL MEDICAL CNT E NORWEGIAN ST	390031	100760449	0031				
SELECT SPECIALTY HOSPITAL CENTRAL PA LP CAMP HILL	SELECT SPECIALTY HOSPITAL CENTRAL PA LP	392039		0001				
SELECT SPECIALTY HOSPITAL CENTRAL PA LP	SELECT SPECIALTY HOSPITAL CENTRAL PA LP	392039	102770936	0003				
SELECT SPECIALTY HOSPITAL CENTRAL PA LP	SELECT SPECIALTY HOSPITAL CENTRAL PA LP	392039	102770936	0004				
SELECT SPECIALTY HOSPITAL DANVILLE INC	SELECT SPECIALTY HOSPITAL DANVILLE INC	392047	102770847	0001				
SELECT SPECIALTY HOSPITAL JOHNSTOWN	SELECT SPECIALTY HOSPITAL JOHNSTOWN	392031	102717376	0001				
SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS INC	SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS INC	392036	102740946	0001				
SELECT SPECIALTY HOSPITAL MCKEESPORT INC	SELECT SPECIALTY HOSPITAL MCKEESPORT INC	392045	102741166	0001				
SELECT SPECIALTY HOSPITAL-ERIE	SELECT SPECIALTY HOSPITAL-ERIE	392037	102717465	0001				
SELECT SPECIALTY HOSPTIAL PITTSBURGH UPMC INC	SELECT SPECIALTY HOSPTIAL PITTSBURGH UPMC INC	392044	102741110	0001				



	Health Care Outcomes Facility List			
Facility Name	Group Name	Medicare ID	Billing MPI	Service Location
SELECT SPECIALTY HOSPITAL PITTSBURGH/UPMC INC	SELECT SPECIALTY HOSPTIAL PITTSBURGH UPMC INC	392044	102741110	0002
SHARON REGIONAL MEDICAL CENTER	SHARON REGIONAL MEDICAL CENTER	390211	103377288	0001
SHARON REGIONAL MEDICAL CENTER	SHARON REGIONAL MEDICAL CENTER	390211	102905788	0001
SHRINERS HOSPITALS FOR CHILDREN	SHRINERS HOSPITAL FOR CHILDREN	393309	102588878	0001
SOMERSET COMMUNITY HOSPITAL	SOMERSET COMMUNITY HOSPITAL	390039	100208666	0009
ST CHRISTOPHERS HOSPITAL FOR CHILDREN	ST CHRISTOPHERS HOSPITAL FOR CHILDREN	393307	103466163	0001
ST CHRISTOPHERS HOSPITAL FOR CHILDREN	ST CHRISTOPHERS HOSPITAL FOR CHILDREN	393307	103728409	0001
ST CHRISTOPHERS HOSPITAL FOR CHILDREN	ST CHRISTOPHERS HOSPITAL FOR CHILDREN	393307	100729672	0002
ST JOSEPH REGIONAL HEALTH NETWORK	ST JOSEPH REGIONAL HEALTH NETWORK	390096	100754497	0057
ST CLAIR MEMORIAL HOSPITAL	ST. CLAIR MEMO HOSPITAL	390228	100755206	0019
ST LUKES HOSP OF BETHLEHEM	ST. LUKE'S HOSP OF BETHLEHEM/ALLENTOWN	390049	100755251	0051
ST LUKES HOSP ALLENTOWN	ST. LUKE'S HOSP OF BETHLEHEM/ALLENTOWN	390049	100755251	0086
ST LUKES HOSP OF BETHLEHEM	ST. LUKE'S HOSP OF BETHLEHEM/ALLENTOWN	390049	100755251	0053
ST LUKES HOSPITAL ANDERSON CAMPUS	ST. LUKE'S HOSPITAL ANDERSON CAMPUS	390326	102809290	0001
ST LUKES HOSPITAL MONROE CAMPUS	ST. LUKE'S HOSPITAL MONROE CAMPUS	390330	103220010	0001
BLUE MOUNTAIN HOSPITAL	ST. LUKE'S HOSPITAL-GNADEN HUETTEN CAMPUS	390194	100495831	0036
ST LUKES HOSPITAL-PALMERTON CAMPUS	ST. LUKE'S HOSPITAL-GNADEN HUETTEN CAMPUS	390019	100495831	0047
ST LUKES MINERS MEMORIAL HOSPITAL	ST. LUKE'S MINERS MEMORIAL HOSPITAL	390183	100493631	0008
ST LUKES HOSPITAL QUAKERTOWN	ST. LUKE'S QUAKERTOWN HOSPITAL	390035	100745470	0000
ST LUKES HOSPITAL QUAKERTOWN ST LUKES HOSPITAL UPPER BUCKS CAMPUS	ST. LUKE'S QUAKERTOWN HOSPITAL ST. LUKE'S QUAKERTOWN HOSPITAL	390035	100745700	0001
SURGERY CENTER AT EDGEWOOD PLACE	SURGERY CENTER AT EDGEWOOD PLACE	390307	101009710	0002
SURGICAL INSTITUTE OF READING LLC	SURGICAL INSTITUTE OF READING LLC	390316	102075470	0001
TEMPLE UNIVERSITY HOSPITAL INC	TEMPLE UNIVERSITY HOSPITAL	390027	100735114	8000
TEMPLE UNIVERSITY HOSPITAL EPISCOPAL CAMPUS	TEMPLE UNIVERSITY HOSPITAL	390027	100735114	0022
TEMPLE UNIVERSITY HOSPITAL BONE MARROW TRANSPLANT	TEMPLE UNIVERSITY HOSPITAL	390027	100735114	0023
THOMAS JEFFERSON UNIVERSITY HOSPITAL	THOMAS JEFFERSON UNIV & HOSP	390174	100750854	0018
THOMAS JEFFERSON UNIVERSITY HOSPITAL METHODIST	THOMAS JEFFERSON UNIV & HOSP	390174	100750854	0022
TITUSVILLE HOSPITAL	TITUSVILLE HOSPITAL	390122	100746065	0002
TITUSVILLE HOSPITAL	TITUSVILLE HOSPITAL	390122	100746065	0003
TROY COMMUNITY HOSPITAL	TROY COMMUNITY HOSPITAL	391305	100750578	0019
TUNKHANNOCK HOSPITAL COMPANY LLC	TYLER MEMORIAL HOSPITAL	390192	102607436	0001
TYRONE HOSPITAL	TYRONE HOSPITAL	391307	100773400	0002
UNIONTOWN HOSPITAL	UNIONTOWN HOSP ASSOC	390041	100763075	0018
UNIVERSITY OF PENNSYLVANIA HOSPITAL	UNIVERSITY OF PENNA HOSPITAL	390111	100125877	0069
UNIVERSITY OF PENNSYLVANIA HOSPITAL	UNIVERSITY OF PENNA HOSPITAL	390111	100125877	0100
UPMC ALTOONA	UPMC ALTOONA	390073	100727829	0085
UPMC CARLISLE	UPMC CARLISLE (CARLISLE REGIONAL MEDICAL CENTER)	390058	103355781	0001
CARLISLE REGIONAL MEDICAL CENTER	UPMC CARLISLE (CARLISLE REGIONAL MEDICAL CENTER)	390058	100775085	0022
UPMC CHILDRENS HOSPITAL OF PITTSBURGH	UPMC CHILDRENS HOSPITAL OF PITTSBURGH	393302	100734799	0059
CHARLES COLE MEMORIAL HOSPITAL	UPMC COLE	391313	100001127	0106
UPMC EAST	UPMC EAST	390328	102726544	0001
UPMC HAMOT	UPMC HAMOT	390063	100728657	0033
UPMC HANOVER	UPMC HANOVER	390233	100744033	0006
UPMC HORIZON	UPMC HORIZON	390178	100728236	0025
UPMC HORIZON	UPMC HORIZON	390178	100728236	0032
UPMC JAMESON	UPMC JAMESON	390016	100002189	0007
KANE COMMUNITY HOSPITAL	UPMC KANE	390104	100745774	0004
UPMC LITITZ	UPMC LITITZ (HEART LANCASTER REGIONAL MEDICAL CENTER)	390068	103360084	0001
HEART LANCASTER REGIONAL MEDICAL CENTER	UPMC LITITZ (HEART LANCASTER REGIONAL MEDICAL CENTER)	390068	100734135	0023
UPMC LOCK HAVEN HOSPITAL	UPMC LOCK HAVEN HOSPITAL (LOCK HAVEN HOSPITAL)	390071		0023



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Facility Name	Group Name	Medicare ID	Billing MPI	Service Location				
UPMC LOCK HAVEN HOSPITAL	UPMC LOCK HAVEN HOSPITAL (LOCK HAVEN HOSPITAL)	390071	100755091	0001				
UPMC MAGEE-WOMENS HOSPITAL	UPMC MAGEE-WOMENS HOSPITAL	390114	100771157	0045				
PINNACLE HEALTH MEMORIAL HOSPITAL	UPMC MEMORIAL (MEMORIAL HOSPITAL, YORK)	390101	103360870	0001				
UPMC MEMORIAL	UPMC MEMORIAL (MEMORIAL HOSPITAL, YORK)	390101	103360870	0007				
UPMC MEMORIAL	UPMC MEMORIAL (MEMORIAL HOSPITAL, YORK)	390101	102732050	0001				
UPMC MERCY	UPMC MERCY	390028	100138089	0017				
UPMC MERCY	UPMC MERCY	390028	100138089	0044				
UPMC MUNCY	UPMC MUNCY	391301	100760780	0008				
UPMC NORTHWEST	UPMC NORTHWEST	390091	100775791	0056				
UPMC PASSAVANT HOSPITAL	UPMC PASSAVANT HOSPITAL	390107	100191335	0005				
UPMC PASSAVANT CRANBERRY	UPMC PASSAVANT HOSPITAL	390107	100191335	0013				
UPMC PINNACLE	UPMC PINNACLE HOSPITALS	390067	100002563	0043				
UPMC PINNACLE COMMUNITY GENERAL	UPMC PINNACLE HOSPITALS	390206	100002563	0059				
UPMC PINNACLE WEST SHORE	UPMC PINNACLE HOSPITALS	390067	100002563	0166				
UPMC PRESBYTERIAN SHADYSIDE	UPMC PRESBYTERIAN SHADYSIDE	390164	100001904	0029				
UPMC SUNBURY COMMUNITY HOSPITAL	UPMC SUNBURY COMMUNITY HOSPITAL (SUNBURY COMMUNITY HOSPITAL)	390084	103453058	0001				
UPMC SUNBURY COMMUNITY HOSPITAL	UPMC SUNBURY COMMUNITY HOSPITAL (SUNBURY COMMUNITY HOSPITAL)	390084	101423612	0002				
UPMC WILLIAMSPORT	UPMC SUSQUEHANNA WILLIAMSPORT	390045	100754835	0019				
UPMC WELLSBORO	UPMC WELLSBORO	390043	100003767	0010				
DIVINE PROVIDENCE HOSPITAL	UPMC WILLIAMSPORT DIVINE PROVIDENCE	394048	100756375	0014				
UPMC-BEDFORD MEMORIAL	UPMC-BEDFORD MEMORIAL	390117	100746047	0003				
UPMC MCKEESPORT	UPMC-MCKEESPORT	390002	100764340	0014				
UPMC-ST MARGARET	UPMC-ST.MARGARET	390102	100759920	0016				
VALLEYFORGE MEDICAL CENTER & HOSPITAL	VALLEY FORGE MED CTR & HOSP	390272	100735203	0001				
WARREN GENERAL HOSPITAL	WARREN GENERAL HOSPITAL	390146	100728497	0027				
WASHINGTON HEALTH SYSTEM GREENE	WASHINGTON HEALTH SYSTEM GREENE	390150	103005569	0001				
THE WASHINGTON HOSPITAL	WASHINGTON HOSPITAL	390042	100738911	0009				
WAYNE MEMORIAL HOSPITAL	WAYNE MEM HOSPITAL	390125	100738359	0002				
WAYNESBORO HOSPITAL	WAYNESBORO HOSPITAL	390138	100742487	0006				
WELLSPAN GETTYSBURG HOSPITAL	WELLSPAN GETTYSBURG HOSPITAL	390065	100759018	8000				
WELLSPAN SURGERY AND REHAB HOSPITAL ACUTE CARE	WELLSPAN SURGERY AND REHABILITATION HOSPITAL	390327	102704903	0001				
WEST PENN-ALLEGHENY GENERAL HOSPITAL	WEST PENN-ALLEGHENY GENERAL HOSPITAL	390050	100727720	0094				
WESTERN PENN HOSP-FORBES REGIONAL CAMPUS	WESTERN PENN HOSP-FORBES REGIONAL CAMPUS	390267	100727720	0082				
WESTERN PENN HOSPITAL	WESTERN PENN HOSPITAL	390090	100727720	0061				
WESTMORELAND REGHOSP	WESTMORELAND REG.HOSP.	390145	100774847	0028				
WILKES BARRE HOSPITAL COMPANY LLC	WILKES BARRE GENERAL HOSPITAL	390137	102372966	0001				
WILLS EYE HOSPITAL	WILLS EYE HOSPITAL	390024	100763825	0023				
WINDBER HOSPITAL	WINDBER HOSPITAL	390112	100770374	0004				
YORK HOSPITAL	YORK HOSPITAL	390046	100196547	0059				
All Other Hospitals	All Other Hospitals	N/A	N/A	N/A				





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