IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

COMMONWEALTH OF PENNSYLVANIA, 2 : CV = 94 = 772

1 14411

PROVIDENCE HEALTH SYSTEM, INC. AND NORTH CENTRAL PENNSYLVANIA HEALTH SYSTEM,

Defendants.

CIVIL ACTION NO.

FILED

MAY 26 1994

ANCES, WILSON
DEPLITY CLERK

FINAL JUDGMENT

WHEREAS the Commonwealth of Pennsylvania ("Commonwealth") filed a Complaint in this matter on May 24, 1994, as a direct purchaser of inpatient acute-care hospital services in Lycoming County and as parens patriae to protect its general economy, pursuant to section 7 of the Clayton Act, 15 U.S.C. § 18;

WHEREAS Providence Health System, Inc. ("PHS") and North
Central Pennsylvania Health System ("NCPHS") announced on
September 23, 1993, that they intended to enter into an Agreement
to establish a single corporation, the Susquehanna Regional
Healthcare Alliance ("Alliance"), to manage their delivery of
health-care services to residents of north central Pennsylvania;

WHEREAS the Alliance will coordinate the delivery of healthcare services in north central Pennsylvania provided by Divine

Providence Hospital, whose corporate parent is PHS; The
Williamsport Hospital & Medical Center, whose corporate parent is

NCPHS; and Muncy Valley Hospital, a subsidiary of Divine

Providence Hospital;

WHEREAS the Alliance is expected to generate a net cost savings of at least \$40 million in 1994 dollars over the first five-year period following implementation and annual savings thereafter of about \$12 million;

WHEREAS the Attorney General of the Commonwealth ("Attorney General") is responsible for enforcement of the federal antitrust laws and is authorized to bring suit on behalf of the Commonwealth as a direct purchaser of inpatient acute-care hospital services or as parens patriae to protect its general economy;

WHEREAS PHS and NCPHS have cooperated fully with the Attorney General's investigation of the Alliance;

WHEREAS the Attorney General has concluded its investigation of the Alliance and believes that, without this Final Judgment, it may raise anticompetitive concerns under the federal antitrust laws;

whereas PHS and NCPHS desire to assure the Attorney General and the community that they intend to operate the hospitals within the Alliance in accordance with their ministry and mission and continue their commitment of providing quality, affordable health care to the community;

WHEREAS the Commonwealth, PHS and NCPHS, desiring to resolve the Attorney General's concerns without trial or adjudication of any issue of fact or law, have consented to entry of this Final Judgment; and

WHEREAS this Final Judgment is not an admission of liability by PHS, NCPHS or the Alliance as to any issue of fact or law and may not be offered or received into evidence in any action as an admission of liability; it is hereby ORDERED:

I. Jurisdiction

1. This Court has jurisdiction over the subject matter of this action and each of the parties consenting to this Final Judgment. The Complaint states a claim upon which relief may be granted.

II. Definitions

As used in this Final Judgment:

- 2. "Providence Health System, Inc." ("PHS") means the nonprofit corporation organized under the laws of the Commonwealth of Pennsylvania that is the corporate parent of Divine Providence Hospital ("DPH"), a nonprofit hospital located at 1100 Grampian Boulevard, Williamsport, Pennsylvania. DPH is the corporate parent of Muncy Valley Hospital ("MVH"), a nonprofit hospital located at 215 East Water Street, Muncy, Pennsylvania.
- 3. "North Central Pennsylvania Health System" ("NCPHS")
 means the nonprofit corporation organized under the laws of the
 Commonwealth of Pennsylvania that is the corporate parent of The
 Williamsport Hospital & Medical Center ("WHMC"), a nonprofit
 hospital located at 777 Rural Avenue, Williamsport, Pennsylvania.

- means the nonprofit corporation that PHS and NCPHS have created and that will manage their delivery of health-care services. PHS and NCPHS will be the sole corporate members of the Alliance and responsible for ensuring that the Alliance complies with this Final Judgment. The Alliance's corporate address will be 1001 Grampian Boulevard, Williamsport, Pennsylvania. The "Alliance" includes any member hospital acting individually or with any other member hospital.
- 5. "Member" means PHS and NCPHS and all of their subsidiaries and affiliates, except Providence Foundation and Williamsport Hospital Foundation, the fund-raising organizations of DPH and WHMC; Providence Ventures, Inc.; and Providence Imaging, Inc.
 - "Member Hospital" means DPH, WHMC or MVH.
- 7. "Managed-Care Plan" means a health maintenance organization, preferred provider organization, or other health-service purchasing program which uses financial or other incentives to prevent unnecessary services and includes some form of utilization review.
- 8. "Health Plans" mean all types of organized healthservice purchasing programs, including but not limited to
 managed-care plans, offered by third-party payors, health-care
 providers or any other person.
- 9. "Health-Care Provider" means physicians, hospitals, laboratories and physician networks.
- 10. "Acquire" means to purchase the whole or any part of the assets, stock, equity, capital or other interest of a

corporation or other business entity, or to receive the right or ability to designate directors or trustees or otherwise control the management of a corporation or other business entity.

11. "Net Cost Savings" means the difference between the total expenditures that PHS and NCPHS would have incurred absent the Alliance and their total expenditures actually made, minus the total expenditures incurred to implement the Alliance. As a guide to help calculate net cost savings, the parties will use Appendix 2 of the "White Paper" dated March 9, 1994.

III. Terms

- 12. Anticipated Savings and Price Reductions. The Alliance intends to reconfigure and consolidate services, increase efficiency, and reduce the cost of delivering health-care services so that the cost to the community of those services will be lower than they would have been absent the Alliance.
 - 12.1 The Alliance shall achieve at least \$40 million in net cost savings by June 30, 1999. At least 60% of the net cost savings the Alliance achieves in the first year and at least 80% of the net cost savings it achieves in each of the following four years shall be passed on to consumers or other purchasers of health-care services in the form of low-cost or no-cost health-care programs for the community or by reducing prices or limiting actual price increases for existing services. At a minimum, the following cumulative net cost savings shall be passed on: \$1.2 million by June 30, 1995; \$8.2 million by June 30, 1996; \$14.3 million by June 30, 1997; \$23.5 million by June 30, 1998; and \$31.5 million by June 30, 1999. These savings shall be documented

in the annual report described in Paragraph 25. If the Alliance fails to meet the targeted net cost savings in any given fiscal year, the shortfall amount shall be carried forward into subsequent fiscal years until the full net cost savings amount has been realized by the Alliance, including the portion to be passed on as described above. If the Alliance exceeds the targeted net cost savings in any given year, the excess amount shall be credited towards the Alliance's target for the next fiscal year.

- achieved \$40 million in cost savings, the Alliance shall pay in cash an amount equal to \$40 million less the amount of savings actually achieved into a fund established by the Attorney General. The Attorney General shall use this money to fund low-cost or no-cost health-care services to Lycoming County residents, such as child immunizations, mammograms, drug and alcohol abuse treatment programs, or other health-care services needed by the community for which adequate resources are not available. The Attorney General shall select a charitable organization to administer these funds.
- 12.3 The Alliance's case-mix.adjusted net inpatient revenue per admission for all inpatients treated during the fiscal year under consideration at member hospitals (hereinafter "Revenue"), in fiscal years subsequent to 1993-94, shall not exceed the combined Revenue of the member hospitals for 1993-94, as adjusted pursuant to Subparagraph 12.4, and excluding the effects of New Services, as defined in Subparagraph 12.5, and externally imposed requirements,

including but not limited to changes in payment or reimbursement methods imposed or implemented by state or federal regulations.

- 12.4 In determining compliance with Subparagraph 12.3, Revenue shall be adjusted (up or down) for changes in the American Hospital Association's Hospital Market Basket Index ("HMBI"). If the Alliance develops an index from publicly available or other reliable sources that measures the rate of change in net inpatient revenue per admission for Lycoming County hospitals, this index shall be used instead of the HMBI.
- listed on Exhibits 1-A, 1-B or 1-C (copies of which are appended hereto), which list services provided at each of the member hospitals as of entry of this Final Judgment; or (b) material changes in community need, technology, or sophistication of treatment which either (i) require a certificate of need or (ii) require a combination of new capital, personnel and supply expenditures in excess of \$100,000 in any fiscal year. Upon request by the Attorney General, the Alliance shall provide all information and documentation reasonably necessary to support the application of this subparagraph. If new services are provided, they shall be described in the yearly report to the Attorney General, required by Paragraph 25.
- 12.6 If the Alliance fails to comply with Subparagraph 12.3, it shall reimburse the excess by lowering its rates in the next fiscal year in an amount equal to the excess. If

the Alliance exceeds the targeted Revenue savings in any given year, the savings amount shall be credited towards the Alliance's target for the next fiscal year. In the verified annual report described in Paragraph 25, the Alliance shall describe its compliance with this subparagraph.

12.7 Subparagraphs 12.3, 12.4, 12.5 and 12.6 shall apply only during those fiscal years when the Commonwealth of Pennsylvania or the federal government does not fully regulate hospital rates.

13. Nonexclusivity.

- 13.1 The Alliance shall not enter into any provider contract with any health plan on terms that prohibit the Alliance from entering into a provider contract with any other health plan.
- 13.2 The Alliance shall not require managed-care plans to contract with its employed doctors as a precondition to contracting with its hospitals.
- ability to provide services or procedures outside the member hospitals unless such physician is employed by the Alliance or performance of duties outside the member hospitals would impair or interfere with the safe and effective treatment of a patient.

14. Nondiscrimination.

14.1 The Alliance shall not enter into any exclusive contracts with any health-care provider by which it permits that provider to render services only at a member hospital or by which it permits only one physician or group of

physicians to provide particular services at a member hospital. The Alliance may enter into exclusive contracts with anesthesiologists, radiologists, nuclear medicine physicians, pathologists, physiatrists and emergency-room physicians. The Alliance may require its employed physicians to render services only at member hospitals.

- 14.2 Other than as provided in Paragraph 14.1, the Alliance shall provide an open staff, ensuring equal access to all qualified physicians in Lycoming County according to the criteria of the Joint Commission on Accreditation of Health Care Organizations and the medical staff by-laws.
- 14.3 The Alliance shall negotiate in good faith with all health plans with a licensed service area within Lycoming County which approach it seeking a provider contract. This provision, however, shall not be construed to require the Alliance to enter into a provider contract with any particular health plan.
- 14.4 The Alliance shall not enter into provider contracts with any licensed health plan operated by the Alliance itself, in existence now or which may be created, on terms available to that plan solely because it is sponsored by the Alliance, where doing so would place other comparable licensed health plans at a competitive disadvantage, because of any market power the Alliance may have rather than from efficiencies resulting from its integration with its health plan.
- 14.5 The Alliance will not use employment, the location of a physician or group practice, or the location

where patients will receive any necessary follow-up care to determine referrals from the emergency room. The Alliance may consider quality of care in determining referrals. The referral policy used to inform unassigned patients of the availability of follow-up care shall be provided to the Attorney General within thirty days from entry of this Final Judgment. Should the Attorney General object to this policy, the parties shall attempt to reach a mutually satisfactory resolution. This subparagraph shall not preclude any managed-care plan operated by the Alliance from limiting referrals to providers with provider contracts with that plan.

- 14.6 If the Alliance establishes or sponsors its own health plan, it shall not base credentialing decisions or other decisions affecting a physician's access to, or working conditions at, a member hospital on whether that physician enters into a provider contract with either the Alliance's plan or with a competing plan.
- 14.7 In utilizing, purchasing, or referring patients for nonemergency transport services, the Alliance's selection of a provider shall not be based on whether the provider is owned by, or affiliated with, the Alliance.

15. <u>Health Plans</u>.

- 15.1 The Alliance will not terminate any provider contracts to which its member hospitals are parties as of the date of entry of this Final Judgment.
- 15.2 The Alliance shall attempt, in good faith, to contract with all health plans operating in its service area

which offer commercially-reasonable terms on a fullycapitated basis, a percentage of premium revenue basis, or
on other terms that require the Alliance to assume risk.

The Alliance shall not refuse to contract with a health plan
solely because such plan proposes a capitated contractual
reimbursement methodology. This provision, however, does
not require the Alliance to enter into a provider contract
with any particular health plan or with all health plans.

16. Employment of Physicians.

- more than 40% of the physicians in Lycoming County practicing in any of the following areas: family medicine, internal medicine, pediatrics, obstetrics, gynecology, general surgery or orthopedic surgery, except as provided in Subparagraphs 16.2 and 16.3. In calculating this percentage and that in Paragraph 16.3, full-time residency faculty members employed by the Alliance shall be counted as one half each. The Alliance will not employ any additional full-time faculty members beyond the number it has at the time of entry of this Final Judgment.
- 16.2 The 40% limitation shall not apply to physicians employed by the Alliance as of entry of this Final Judgment or which shall be approved by the Attorney General after such date as described in Subparagraph 16.6.
- 16.3 The Alliance may employ a physician to replace any currently-employed physician covered by Subparagraph 16.1 so long as it does not employ more than 50% of the physicians in the area of practice of the newly-employed

physician at the time of hiring.

- 16.4 In determining the Alliance's compliance with Subparagraphs 16.1 and 16.3, up to 21 residents employed by the Alliance shall be excluded. Additional residents beyond 21 shall be counted at one half each.
- 16.5 The Alliance shall not solicit the employment of any physician or group practice if such employment would cause the Alliance to exceed the limitations imposed by Subparagraphs 16.1 or 16.3.
- 16.6 The Alliance may petition the Attorney General in writing for an exception to Subparagraphs 16.1, 16.3, 16.4 and 16.5. The Attorney General will respond to the petition within thirty days from the receipt of all necessary information from the Alliance to analyze the petition.
- of available operating and Endoscopy Room Scheduling. At least 20% of available operating room scheduling times, including 7:30 a.m. start times, shall be made available on a first-come, first-served basis, subject only to adjustment for emergency cases. Endoscopy room scheduling times shall be made available on a first-come, first-served basis, subject only to adjustment for emergency cases and major endoscopic cases requiring significantly longer-than-average endoscopy room time. Within thirty days from entry of this Final Judgment, the Alliance shall provide to the Attorney General the proposed schedules for all operating rooms within the Alliance with the non-blocked times clearly indicated. If historic use is used to calculate the amount and location on the schedule of a physician's or group practice's block time, the calculation shall include, on an equal

basis, that physician's or group practice's historic use of both DPH and WHMC. The Alliance shall attempt, in good faith, to accommodate scheduling conflicts, such as office hours, when assigning block times. The parties will attempt to resolve any concerns of the Attorney General with the proposed operating room schedules.

- "Most-Favored-Nation" Provisions in Contracts With 18. The Alliance shall not enter into any provider Health Plans. contract with any health plan on terms which include a mostfavored-nation clause to the benefit of the Alliance or any health-care plan. A most-favored-nation clause is any term in a provider contract that allows the buyer to receive the benefit of any better payment rate, term or condition that the seller gives another provider for the same service. In the case of any existing most-favored-nation clause to the benefit of the Alliance or any health-care plan in current provider contracts, the Alliance agrees not to renew or extend such contracts without deleting that term. The Alliance shall inform the Attorney General of the presence of a most-favored-nation clause in any existing provider contracts by providing a list of such contracts to the Attorney General not more than sixty days from entry of this Final Judgment.
 - 19. Ancillary Services. The Alliance shall not require any health-care purchaser or patient to purchase durable medical equipment, nonemergency transportation or home health services from any entity affiliated with the Alliance and shall affirmatively inform patients and providers needing durable medical equipment, nonemergency transportation or home health-

care services of the availability of such equipment and services from companies not related to the Alliance.

- certificates of Need. The Alliance shall not oppose certificates-of-need applications filed by other hospitals or other health-care providers with the Pennsylvania Department of Health unless it notifies the Attorney General in writing, as soon as practicable but at least seven days prior to filing any opposition, and provides a copy of any opposition to the Attorney General when it is filed with the Department.
- 21. Future Sales and Acquisitions of Hospital Assets. The Alliance shall not, without the prior approval of the Attorney General, acquire any health plan or hospital in Lycoming County or permit any health plan or hospital in Lycoming County to acquire the Alliance or any portion thereof. The Alliance may not enter into any joint ventures with any health plan or hospital, or acquire any health plan or hospital outside of Lycoming County, or permit any health plan or hospital outside Lycoming County to acquire the Alliance or any portion thereof, without first giving at least one-hundred twenty days' notice to the Attorney General.
- 22. <u>Delicensing</u>. The Alliance will delicense at least 148 beds within twelve months from entry of this Final Judgment.
- 23. Tertiary Services. The Alliance shall not expand the tertiary services it currently offers or offer new tertiary services, including but not limited to Level I neonatal services, heart transplant services or a burn-victim treatment unit for a period of five years. "Tertiary services" means the current list of clinical health services which require a certificate of need

as found in 28 Pa. Code § 401.12(b). After five years, the Alliance shall transmit copies of certificate-of-need applications for tertiary services to the Attorney General when they are filed with the Department of Health. For purposes of this paragraph, expansion shall not include expenditures reasonably necessary for the treatment of an increased volume of patients for existing tertiary services. Notwithstanding the above, the Alliance may provide to the Attorney General, within 180 days from entry of this Final Judgment, a list of all new tertiary services it would like to offer within the next five years, and if approved by the Attorney General, such list or portions thereof shall become an exception to this paragraph.

Pinal Judgment are binding on the Alliance and its directors, officers, managers and employees, successors and assigns, including but not limited to any person or entity to whom the Alliance may be sold, leased or otherwise transferred, during the term of its duration, and all persons who are in active concert or participation with them and who have actual or constructive notice thereof. The Alliance shall not permit any substantial part of the Alliance to be acquired by any other person unless that person agrees in writing to be bound by the provisions of this Final Judgment.

25. Reporting Mechanism.

25.1 Within 150 days from the close of each fiscal year during which this Final Judgment is in effect, the Alliance shall submit to the Attorney General a verified annual report describing its compliance with this Final

Judgment. This report shall include a discussion of the steps taken by the Alliance to comply with the efficiencies and services reconfiguration plans and the estimated savings from these steps. The Attorney General will provide notice to the Alliance of any concerns raised by the annual compliance report within a reasonable time after its issuance. The Alliance will meet with the Attorney General to attempt to resolve any concerns that the Attorney General may raise from its review of the report. The Alliance will provide this report to the general public upon request and payment of reasonable copying charges.

- for expenses, including the payment of any expert fees, incurred in analyzing and verifying this report, in an amount not to exceed \$10,000 per year. Within sixty days from entry of this Final Judgment, the Alliance will pay the Attorney General \$5,000 to establish a model to be used to analyze compliance. This amount shall be deducted from the first year's reimbursement requirement. The Alliance will cooperate with any expert hired by the Attorney General, including but not limited to providing any additional requested information reasonably necessary to complete the analysis and verification of the compliance report.
- prepare, subject to the Attorney General's approval, a condensed version of its efficiency report to be released to the general public within fourteen days from entry of the Final Judgment.

- 27. <u>Compliance</u>. To determine or secure compliance with this Final Judgment, any duly authorized representative of the Attorney General shall be permitted:
 - 27.1 Upon reasonable notice, access during normal business hours to all non-privileged books, ledgers, accounts, correspondence, memoranda, and other records and documents, in the possession or under the control of the Alliance, relating to any matters contained in this Final Judgment; and
 - 27.2 Upon reasonable notice, access during normal business hours to interview officers, managers or employees regarding any matters contained in this Final Judgment.
- 28. Complaint Procedure. Any person, including health-care providers, health plans, or consumers of medical services, who wishes to report a possible violation of this Final Judgment shall send a written description of the possible violation to Carl S. Hisiro, Chief Deputy Attorney General, Antitrust Section, Office of Attorney General, 14th Floor, Strawberry Square, Harrisburg, Pennsylvania 17120 and to the Alliance's President, 1001 Grampian Boulevard, Williamsport, Pennsylvania 17701. The Alliance shall respond in writing to the complainant and to the Attorney General within thirty days from receipt of the complaint. If the complaint is still unresolved, the Attorney General will attempt to negotiate a satisfactory resolution.
- 29. <u>Board Membership</u>. The West Branch Manufacturers
 Association and the Williamsport/Lycoming County Chamber of
 Commerce may each present to the Alliance the name of a potential
 nominee to the Alliance's board of directors to represent the

interests of businesses and consumers. PHS and NCPHS shall not unreasonably withhold appointment of such persons to the Alliance's board of directors.

Judgment, PHS and NCPHS shall jointly pay \$10,000 to reimburse the Attorney General's costs incurred to conduct its investigation, which payment shall be used for future antitrust enforcement purposes.

31. <u>Enforcement</u>.

- 31.1 If the Attorney General believes that there has been a violation of this Final Judgment, it shall promptly notify the Alliance thereof. The Attorney General may thereafter undertake any remedial action it deems appropriate. The Attorney General will, when reasonable and appropriate, permit the Alliance a reasonable opportunity to cure any violation without instituting legal action.
- 31.2 In any action or proceeding brought by the Attorney General to enforce this Final Judgment or otherwise arising out of or relating hereto, the Attorney General, if it is the prevailing party, shall recover its costs and expenses, including a reasonable sum for attorneys' fees.
- 32. <u>Legal Exposure</u>. No provision of this Final Judgment shall be interpreted or construed to require the Alliance to take any action, or to prohibit the Alliance from taking any action, if that requirement or prohibition would expose the Alliance to significant risk of liability for any type of negligence (including negligent credentialing or negligence in making referrals) or malpractice.

33. <u>Notices</u>. All notices required by this Final Judgment shall be sent by certified or registered mail, return receipt requested, postage prepaid, or by hand delivery, to:

If to the Attorney General:

Carl S. Hisiro
Chief Deputy Attorney General
Antitrust Section
Office of Attorney General
14th Floor, Strawberry Square
Harrisburg, PA 17120

If to the Alliance:

Donald R. Creamer, President Susquehanna Regional Healthcare Alliance 1001 Grampian Boulevard Williamsport, PA 17701

- 34. Averment of Truth. The Alliance avers that the information it has provided to the Attorney General in connection with this Final Judgment, to the best of its knowledge, is true and represents the most recent and comprehensive data available, and that no material information has been withheld.
- 35. <u>Termination</u>. This Final Judgment shall expire on the tenth anniversary of its date of entry if it has not terminated prior to that time as provided in Paragraph 36.
- 36. <u>Early Expiration</u>. After July 1, 1999, the Alliance may request the Attorney General in writing to concur in the Alliance's application to this Court for an order terminating this Final Judgment. The Attorney General shall not unreasonably withhold its concurrence in any such application if the Alliance has complied with the provisions of this Final Judgment.
- 37. <u>Modification</u>. If either the Attorney General or the Alliance should believe that modification of the Final Judgment would be in the public interest because of changed or unforeseen

circumstances or for other reasons, that party shall give notice to the other, and the parties shall attempt to agree on a modification. If the parties agree on a modification, they shall jointly petition the Court to modify the Final Judgment. If the parties cannot agree on a modification, the party seeking modification may petition the Court for modification and shall bear the burden of persuasion that the requested modification is in the public interest.

38. Retention of Jurisdiction. Unless this Final Judgment is terminated pursuant to Paragraph 36, jurisdiction is retained by this Court for ten years after entry to enable any party to apply to this Court for such further orders and directions as may be necessary and appropriate for the interpretation, modification and enforcement of this Final Judgment.

DATED this 24th day of May, 1994.

ERNEST D. PREATE, JR.
Attorney General
Commonwealth of Pennsylvania

By: (all S. / Yusus

Carl S. Hisiro
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President

Kirby O. Smith Executive Vice

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Operating Officer

Attest

NORTH CENTRAL
PENNSYLVANIA HEALTH
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By:

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Attorneys for Providence
Health System, Inc. and
North Central
Pennsylvania Health
System

SO ORDERED:

5/26/94

United States District Judge

DIVINE PROVIDENCE HOSPITAL

Services as of May 5, 1994.

Anesthesiology

Pain Management

Blood Bank

Autologous Donor Program

Cancer Treatment Center - In/Out Patient

Linear Accelerator
Ortho Voltage
Hyperthermia
Brachytherapy
Chemotherapy
Tumor Registry
Pharmacy (Chemo Therapy Drugs only)
Psychosocial Support Services
Dietitian Services

Cardiology Services - In/Out Patient (ICU,CCU,PCU)

Cardiac Rehab

Invasive:

Cardiac Cath (Right & Left)

Special Procedures

Pacemakers

Non-invasive:

Echos

Stress Tests

Holter Monitor

Child Care

Sick Bay

Community Services

Guthrie Transport
Speakers Bureau
Guest Program
Health Screenings
Cancer Treatment Van
Support Groups

• Dental (OR Procedures)

- Diabetes Center
- Dialysis Center (full service)
- Education Department

Community Education Quality Improvement

- Emergency Department (24 Hours)
- Endocrinology
- Eye Laser Center
- Family Diagnostic Center

Breast Exams Mammography Ultrasound

- Gastroenterology: In/Out Patient
- Gynecology Services (No sterilization)
- Home Health Care Regional Home Health (Affiliate)

DME IV Infusion

• Industrial Medicine

Physical exams Health Risk Appraisals Worker's Compensation Immunizations

- Infectious Disease
- Laboratory Services
- Laser Services
- Mental Health: In/Out Patient

Counseling Services Group Therapy Drug & Alcohol Counseling

- MRI Center
- Non-Emergency Patient Transport Services
- Nuclear Medicine: In/Out Patient
 Diagnostic
 Therapeutic
 RIA
- Nursing Services

Critical Care
Nursery
Obstetrics
Med/Surg
Orthopedics
Case Management

Nutrition Services (Marriott)

Counseling Education

- OB Clinic (Healthy Beginnings)
- Orthopedics
- Operating Rooms: (6) (Full service)

Ear, Nose, Throat
General
Gynecological (No Sterilization)
Laser
Microsurgery
Neurologic
Ophthalmology
Orthopedics
Outpatient
Peripheral/Vascular
Same Day Surgery Unit

- Ostomy Services
- Pastoral Care
- Pediatric Services
- Pre-Admission Testing Services

- Pharmacy: In/Out Patient
- Pulmonary Medicine/Pulmonary Rehab
- Radiology: In/Out Patient (Full Service)

Mammography
Ultrasound
CT Scanning
Stereotactic Biopsy

Rehabilitation Services: In/Out-Patient

Physical Therapy Occupational Therapy

- Same Day Services
- Sleep Disorder Center
- Social Services
- Volunteer Services (Adult/Teen)

WILLIAMSPORT HOSPITAL & MEDICAL CENTER

HOSPITAL SERVICE MATRIX - 1994

AIDS/HIV Treatment - Inpatient	• Allergy Treatment:	- Testing	- Treatment	• Ambulatory Care:	- Mulernity	- Occupational Therapy	- Physical Therapy	- Prosthetic Therapy	- Respiratory Therapy	. Short Procedure Unit	- Speech Therapy	Anesthesiology	• Audiology	- Hearing Testing/Diagnostic	- Oral Rehabilitation	- Hearing Aids	- Industrial Testing	• Blood Bank:	- Autologous Donor Program	
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• Cancer Program:	
- Inputient	
- Linear Accelerator +	
- Radiation Therapy +	•
- Respite Care	
• Cardiac Care Unit - Inputient:	
- Acute	
- Step-down/ Intermediate	
- Telemetry	
· Cardiac Catheterization:	-
- Balloon Angioplasty	
- PT CA	
• Cardiology:	
- Diagnostic Clinic	
- Echocurdiology	
- Inpatient	
- Nuclear	
- Outputient	
• Cardiac Rehabilitation:	
- Cardio-pulmonary Clinic	
- Inputient	
- Outpatient	

Chemotherapy:	
- Inputient	
- Outpatient	
• CT Scanner	
Dental Services	
Dermutology	
Dietary Services	
Digital Angioplasty	
• Emergency Services:	*
- 24 hour Emergency Ro	Room
- Advance Life Support	
- Basic Life Support	
- Paramedics	
Endocrinology	
• Ear, Nose and Throat	
• Family Practice:	
- Clinic	
- Department	
- Off-site Center(s) ++	
• Filness Center	
• Family Planning Services	

+ = Contracted Services ++ = Provided by Affiliated Organization

WILLIAMSPORT HOSPITAL & MEDICAL CENTER

HOSPITAL SERVICES MATRIX - 1994 (Cont.)

- Chickenson faces	7
- Inputient	
- Lab-Endoscopy	
- Outpatient	
• Genetic Counseling +	
· Gynecology Services - Inpatient:	
- Amniocentesis	
- Clinic	
• Health Promotion Services	
• Hemodialysis	
• Hematology	
• Home Care:	
- DME ++	_
- Infusion Therapy ++	
· IV Therapy ++	
- Oxygen Therapy ++	
• Intensive Care Unit	
_	

Immunizutions	• Oncology:
Infectious Disease	- Clinic
Laboratory	- Medical
Lithotripter (ESWL - Mobile) +	- Radiation
Magnetic Resonance Imaging +	- Tumor Registry
Маттодгарћу	Ophthalmology
Medical/Surgical Acute Care	- Cornen
Neurology:	· Lens
- Testing Department	- Orbit
Non-Emergent Putient Transport ++	- Plastic
Nuclear Medicine	- Retina
Nursery - Normal Newborn	- Vitreous
Obstetrics - Inpatient	Orthopedics - Inpatient
Occupational Medicine:	• Pain Clinic
- Back to Work	• Pediatrics - Inpatient
- Screening	• Pharmacy:
Occupational Medicine:	- Inpatient
- Back to Work	- Outpatient
- Screening	Physical Therapy
Occupational Therapy:	• Podiatry Surgery
- Inpatient	• Psychiatry - Inpatient
- Outpatient	

WILLIAMSPORT HOSPITAL & MEDICAL CENTER

HOSPITAL SERVICES MATRIX - 1994 (Cont.)

Psychological Services (clinical)	
• Pulmonary Rehabilitation:	
- Clinic	
- Inpatient	
- Outpulient	
• Radiology	
• Kehabilitation:	
- Head Trauma Unit	
- Inpatient	
- Outpatient	
- Pain Clinic	
- Recreational Therapy	
- Spinal Cord Injury Unit	
• Respiratory Therapy	
• Rheumatology:	
Clinic - Arthritis Treatment	
Social Work Services	
• Speech Pathology	
• Sports Medicine Clinic	
• Urology	
• Ultrasound	

• Surgery:
- Ear, Nose & Throat
- General
- Gynecological
- Cardiac/Open Heart
- Microsurgery
- Neurologic
- Ophthalmology
- Orthopedic
- Outpatient
- Peripheral/Vascular
- Same Day Surgery Unit
• Surgery, Laser
• Women's Health Center

MUNCY VALLEY HOSPITAL

Services as of May 5, 1994

- Anesthesiology
- Blood Bank

Autologous Donor Program

- Community Services (DPH/MVH combined)
- Child Care
- Dental (OR Procedures)
- Emergency Department (24 Hours)
- Gastroenterology: In/Out Patient
- Gynecology Services (No sterilization)
- Industrial Medicine

Physical exams Health Risk Appraisals Worker's Compensation Immunizations

- Laboratory Services
- Non-Emergency Patient Transport Services
- Nuclear Medicine: In/Out Patient
 Diagnostic
 Therapeutic

RIA

Nursing Services

Critical Care Med/Surg Orthopedics Case Management • Nutrition Services (Marriott)

Counseling Education

- Orthopedics
- Operating Rooms: (3) (Full service)

Ear, Nose, Throat
General
Gynecological (No Sterilization)
Laser
Microsurgery
Neurologic
Ophthalmology
Orthopedics
Outpatient
Peripheral/Vascular
Same Day Surgery Unit

- Pastoral Care
- Pre-Admission Testing Services
- Pharmacy: In/Out Patient
- Pulmonary Medicine/Pulmonary Rehab
- Radiology: In/Out Patient (Full Service)
 Mammography
 ultrasound
 CT Scanning
 Stereotactic Biopsy
- Rehabilitation Services: In/Out-Patient

Physical Therapy Occupational Therapy

- Same Day Services
- Secured Medical Unit (5 beds)
- Skilled Nursing Facility (69) beds

- Social Services
- Volunteer Services (Adult/Teen)