

STATISTICAL NEWS

PA Department of Health ♦ Bureau of Health Statistics and Research ♦ Vol. 26 No. 4 ♦ July 2003

Fewer Home Health Agencies; More Patients

While Number of Agencies Decline Patient Caseload Increases

Pennsylvania's home health agencies displayed little change between 2000 and 2001, based on data collected from the Pennsylvania Department of Health's "Annual Data Collection Report" for Pennsylvania's home health agencies. The total number of home health agencies in Pennsylvania decreased from 322 to 314 between 2000 and 2001. The proportion of different types of home health agencies varied slightly from 2000 to 2001, with proprietary and Visiting Nurse Association (VNA) home health agencies increasing slightly and hospital-based private non-profit and other home health agencies decreasing slightly (see Table 1 on page 8).

However, even though the number of home health agencies decreased slightly in 2001, need for home health services did not decrease, with total patient caseload increasing from 352,989 to 362,572 between 2000 and 2001. Proprietary home health agencies increased their portion of total patient caseload from 23.9% to 28.2% between 2000 and 2001. All other specific types of home health agencies, in

Proprietary home health agencies increased their portion of patient caseload from 24% to 28%...

Pennsylvania, saw their portion of the total patient caseload remain the same or decrease somewhat. In 2001, hospital-based home health agencies continued to maintain the largest portion of the total patient caseload at 45.4% (see Table 2 on page 8).

Pennsylvanians who utilized home health services experienced slight or no increase in the fee they were charged for those services, based on comparison of the median actual fee per visit in 2000 and 2001. The median actual fee per visit increased slightly for skilled nursing, physical therapy, speech therapy, occupational therapy and home health aide type services. Medical social services median actual fee remained unchanged in 2001, compared to 2000, but was still the most expensive at \$150 per visit (see Table 3 on page 8).

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Pregnancies Continue Decline in 2001

2001 Number and Rate Are Second Lowest Ever Recorded

There were 179,915 pregnancies reported among female residents of Pennsylvania in 2001, a decrease of 1,406 or 0.8 percent, from the 181,321 reported for 2000. The 2001 figure was the second lowest annual number of reported pregnancies ever recorded for the state since 1980 when the data were first compiled.

The 2001 reported pregnancy rate of 70.9 per 1,000 females ages 15-44 was similar to the 2000 rate of 70.8. Figure 1 on page 3 depicts the rate of reported pregnancies for all Pennsylvania residents from 1990 through 2001. This Figure also shows the teenage (15-19) reported pregnancy rate for the same years. The teen rate has declined considerably, from 73.6 in 1990 to an all-time low of 46.0 in 2001 (a 37.5 percent drop).

On page 2 is a data table (Table 1) showing 2001 reported pregnancy statistics by woman's age group and outcome for the state. In 2001, 79.7 percent of the reported pregnancies resulted in a live birth, 19.5 percent in an induced abortion, and only 0.8 percent in a fetal death (non-induced termination of 16

The teen rate has declined considerably... to an all-time low in 2001...

weeks or more gestation).

Women in the age group 20-29 accounted for almost 50 percent or 89,360 of all re-

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DEPARTMENT OF HEALTH
... in pursuit of good health

Edward G. Rendell, Governor
Calvin B. Johnson, M.D., M.P.H.
Secretary of Health

Pregnancies Continue Decline in 2001.....

ported pregnancies in 2001; those under 20 years of age, for 11.3 percent or 20,355; and, women 30 years of age and older accounted for 39.0 percent or 70,200.

In 2001, 79.7 percent of the reported pregnancies resulted in a live birth, 19.5 percent in an induced abortion, and only 0.8 percent in a fetal death...

In 2001, just under 68 percent of all reported pregnancies to teenage residents under 20 years of age resulted in a live birth, compared to 77.5 percent for women 20-29 years of age and 86 percent for those women 30 years of age and older.

Table 2 on the right shows the number of 2001 reported pregnancies by age, race and Hispanic origin of woman for Pennsylvania residents. Pregnancies to white women in 2001 accounted for 77.1 percent or 138,672 of all reported pregnancies; black women accounted for 19.6 percent of all reported pregnancies or 35,258; and Asian/Pacific Islander women accounted for only 2.8 percent or 5,097 of all reported pregnancies. Reported pregnancies to women of Hispanic origin accounted for 5.6 percent. Please note that persons of Hispanic origin can be of any race.

Continued on next page...

TABLE 1
Reported Pregnancies by Woman's Age Group and Outcome
Pennsylvania Residents, 2001

Age of Woman	Reported Pregnancies	Live Births	Fetal Deaths	Induced Abortions
All Ages	179,915	143,404	1,486	35,025
Under 15	537	261	8	268
15-17	6,370	4,390	59	1,921
18-19	13,448	9,171	108	4,169
20-29*	89,360	69,219	684	19,457
30 & Older	70,200	60,363	627	9,210

*Unknown age included in age group 20-29.

TABLE 2
Reported Pregnancies by Age, Race/Ethnicity of Woman
Pennsylvania Residents, 2001

Age of Woman	All Races	White*	Black	Asian/PI**	Hispanic
All Ages	179,915	138,672	35,258	5,097	10,023
Under 15	537	191	339	5	58
15-17	6,370	3,724	2,566	45	721
18-19	13,448	9,057	4,140	175	1,321
20-29***	89,360	66,787	19,716	2,347	5,778
30 & Older	70,200	58,913	8,497	2,525	2,145

* Unknown race included in the white category.

**Pacific Islander

***Unknown age included in age group 20-29.

Note: Hispanic can be of any race.

2001 PA Vital Statistics on Web Site

Annual Report of Births, Deaths, Pregnancies, etc.

Data tables from the Department's 2001 official annual report of birth, death, induced abortion, pregnancy, and population statistics (*Pennsylvania Vital Statistics 2001*) for the state, all counties, and selected major municipalities is now avail-

able on the Health Statistics web page at www.health.state.pa.us/stats (select Vital Statistics).

There are approximately 200 pages of data tables including rates with 95% confidence intervals (a new addition). You can access a com-

plete set of tables for each type of data (births, deaths, population, induced abortions or reported pregnancies) or access data tables for only a specific geographic area (state, county or municipality) within each type of data.

Pregnancies.....

During 2001, among Hispanic and black women, 21 and 20 percent (respectively) of the reported pregnancies were to teenagers (under 20 years of age). Among white and Asian/Pacific Islander females, only 9.4 and 4.4 percent (respectively) were to teenagers of those ages.

In 2001, 85.8 percent of the reported pregnancies to white women resulted in a live birth and 13.5 percent in an induced abortion. Among Asian/Pacific Islander women, 75 percent of the reported pregnancies resulted in a live birth and 24.3 percent in an induced abortion. Only 56.1 percent of the reported pregnancies among black women resulted in a live birth and 42.7 percent resulted in an induced abortion. The percentages of live births and induced abortions for Hispanic women were similar to those for white women at 81.2 and 17.8, respectively. (See Figure 2 on the right).

Three components were used to calculate the reported pregnancies (live births, non-induced fetal deaths, and induced abortions). Please note the following qualifications of the reported pregnancy statistics as released by the Bureau of Health Statistics and Research – fetal deaths exclude those less than 16 weeks of gestation and induced abortions exclude those performed outside the state to residents.

If you have any questions about the data presented here, please contact the Bureau at 717-783-2548.

FIGURE 1
Reported Pregnancy Rate, All Ages and Teens 15-19
Pennsylvania Residents, 1990-2001

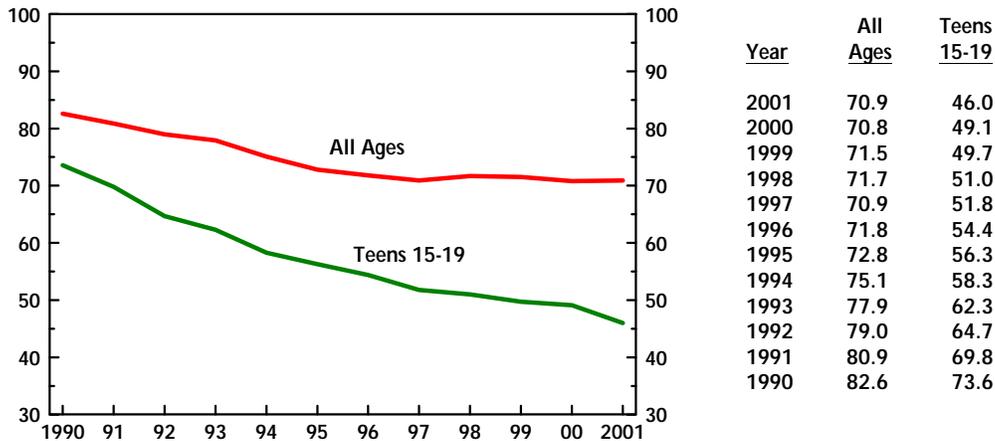
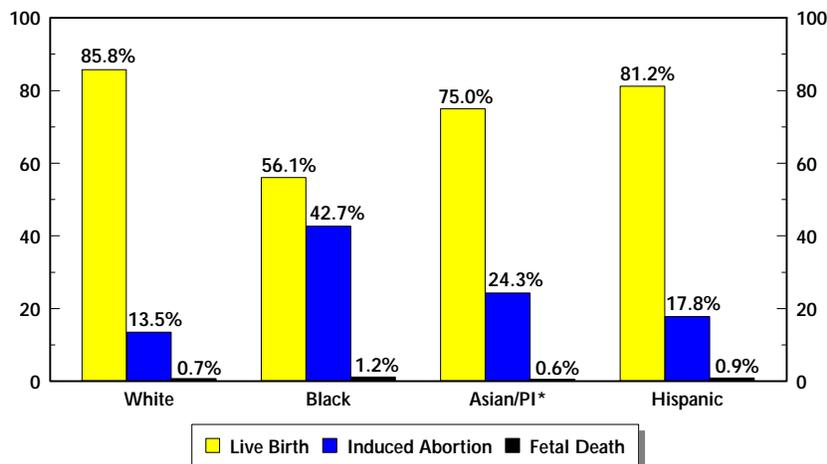


FIGURE 2
Reported Pregnancies, Percent Outcome by Race/Ethnicity
Pennsylvania Residents, 2001



NOTES: Hispanic origin can be of any race.
Rows may not total 100.0 percent due to rounding.

*Pacific Islander

Cancer Reports and Health Status Indicators Updated and Now Available on Web Site:

2000 Cancer Report and Cancer Facts & Figures 2003 on Web Site

Two newly updated cancer reports, *Pennsylvania Cancer Incidence and Mortality 2000* and *Cancer Facts and Figures Pennsylvania 2003*, have been added to the Health Statistics web pages at www.health.state.pa.us/stats/ (select Cancer Incidence and Mortality). Hard copies of these reports should be available by August or September.

PA Cancer Incidence and Mortality 2000:

This report is organized into 25 sections: an all sites section, 23 sections for each major cancer site, and a section for 2000 summary data by site.

The overall number of invasive cancer cases for 2000 is the highest recorded during the ten-year period of 1991-2000.

These 23 major cancer sites represent approximately 93 percent of the male and female invasive cancer cases diagnosed among residents in 2000 and reported to the Pennsylvania Cancer Registry (PCR). A summary of descriptive incidence and mortality analyses along with listings of the major risk factors and early detection methods are included in each of the 23 cancer sites sections and the all sites section.

In 2000, a total of 69,065 new invasive (and in situ urinary bladder) cancer cases were diagnosed among the enumerated 12,281,054 Pennsylvania residents and reported to the PCR. This resulted in an age-adjusted cancer incidence rate of 488.8 per 100,000 (2000 U.S. standard million population). The additional 4,204 cases of non-invasive (in situ) cancers diagnosed among residents in 2000 are not included, unless otherwise noted, in the report.

The overall number of invasive cancer cases for 2000 is the highest recorded during the ten-year period of 1991-2000. However, the 2000 annual age-adjusted rate was lower than the 1999 rate, 488.8 per 100,000 compared to 496.5.

Black males had the highest average annual age-adjusted incidence rate among the four sex/race groups...while white females had the lowest rate...

This lower rate in 2000 could be reflection of the population difference, 2.4 percent increase between 1999 estimates and 2000 census data. Staging data for 2000 presented by sex and race show that approximately

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MCH & Health Status Indicators Updated with 2001 Statistics

The two annual reports of health status indicators, *Health Status Indicators for Pennsylvania Counties and Health Districts* and *Maternal and Child Health Status Indicators for Pennsylvania and Major Municipalities*, have been updated with 2001 data and are now accessible on the Department's Health Statistics web page at www.health.state.pa.us/stats (select Vital Statistics). The MCH report now includes three additional municipalities – Hazleton, Lebanon and West Mifflin. This report is only available in electronic format but can be easily downloaded from the website. Printed copies of the county/health district report are available upon request.

Health Status Indicators for Pennsylvania Counties and Health Districts – 2003 Report:

This report contains health status indicators for the United States, Pennsylvania, counties and Department health districts. It includes 95% confidence intervals and the results of significance testing which are graphically depicted by county outline maps. Thus, the report provides descriptive and analytical statistics at the county and health district level in one convenient publication for health data users.

The health status indicators were developed by the Centers for Disease Control

The percentages of low birth weight infants and mothers not having prenatal care in the first trimester increased between 2000 and 2001 for Pennsylvania...

and Prevention in response to Objective 22.1 of *Healthy People 2000* and again are cited in Objectives 23-2 and 23-5 of *Healthy People 2010*. They are to be used for assessing and comparing the health status of state and local areas.

The latest birth data in the 2003 report are for 2001. The latest death and disease incidence rates are average annual rates covering the three-year period of 1999-2001. Three year average annual rates were used primarily because of the small annual numbers for selected diseases and for deaths due to specific causes in many counties of the state.

The percentages of low birth weight infants and mothers not having prenatal care in the first trimester increased between 2000 and 2001 for Pennsylvania while the percentage of births to teen mothers (less than 18) decreased between 2000 and 2001. Age-adjusted death rates for all causes of death listed in the

Continued on next page...

Cancer Reports...

43 percent of the staged primary cancer cases (excluding lymphomas) among white males and among white females were diagnosed in the regional or distant stages, compared to 46 percent for black males and 51 percent for black females.

The average annual age-adjusted incidence rates for all invasive cancers covering the five-year period of 1996 through 2000 was nearly 36 percent higher among males (579.3 per 100,000), compared to females (426.3). Black males had the highest average annual age-adjusted incidence rate among the four sex/race

The 2000 age-adjusted mortality rate... for all cancers among all residents was the lowest recorded between 1991 and 2000.

groups, with 721.3 cases per 100,000, while white females had the lowest rate of 421.1.

In 2000, there were 29,989 cancer deaths among Pennsylvania residents. The 2000 age-adjusted mortality rate (205.0 per 100,000) for all cancers among all residents was the lowest recorded between 1991 and 2000. The average annual age-adjusted mortality rate for 1996-2000 among males was almost fifty percent higher than the rate for females (261.2 versus 174.5 per 100,000). Among the four sex/race groups, black males had the highest average annual age-adjusted death rate (381.4 per

100,000) while white females had the lowest rate (170.7).

Average annual age-specific and age-adjusted rates for five-year periods, 1996-2000 in this report, can provide more reliable figures since they are based on larger numbers of events. This is especially helpful in reviewing data for those cancer sites with relatively small numbers of annual occurrences and in reviewing county level data. In addition, this is the third year that 95% confidence intervals for the age-adjusted rates were added to this publication.

Age-adjusted rates are point estimates and should only be used for comparison purposes and only if the same standard population was used in the calculation. In this report, all age-adjusted rates are calculated using the direct method and are adjusted to the 2000 U.S. standard million population. Age-adjusted cancer rates in the *Pennsylvania Cancer Incidence and Mortality 1994-1998* and previous reports in this series were adjusted to the 1970 U.S. standard million population.

We hope this updated edition continues to help provide a more complete description of the cancer burden among Pennsylvania's residents. This publication, and many others, can be found on the Pennsylvania Department of Health's web site at www.health.state.pa.us/stats/. Please contact the Bureau of Health Statistics and Research with any questions, comments or requests for additional data at (717) 783-2548.

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Health Status Indicators...

report declined between 1998-2000 and 1999-2001 except for stroke and homicide both of which slightly increased. Infant death rates remained the same between 1998-2000 and 1999-2001 as did the incidence rate for syphilis. However, the AIDS and tuberculosis incidence rates decreased.

The data in the report shows differences in the birth and infant death statistics among whites, blacks, Hispanics, and Asians. Blacks and Hispanics have much higher percentages of teenage births and no prenatal care in the first trimester, as well as higher infant death rates compared to whites and Asians. For infant deaths, the rates for blacks are especially higher.

Standard errors were calculated for many of the rates and percentages and 95% confidence intervals are shown. Significance or comparison testing was performed on most objectives to determine which county or Health District indicator was significantly higher or lower than the state figure and which state indicator was significantly higher or lower than the United States figure. Confidence intervals were not calculated and testing was not conducted for disease incidence rates, work-related injury death rates, single-year infant death rates and any rates dealing with race/ethnicity mainly due to the small numbers associated with these rates. The report also shows county-outlined state maps depicting the results of the significance tests.

Another special feature of the health status indicator re-

port is the Technical Notes section. There, the user can find various statistical formulas used to compute the standard errors and confidence intervals that were used for significance or comparison testing. This section also contains a discussion about the reliability of the data as well as definitions of terms used throughout the report.

The (health status indicator) report also shows county-outlined state maps depicting the results of significance tests (of rates and percents).

The appendix in the report lists additional statistics available at the city, borough or township level that can be requested in order to compute local health status indicators. Most of the data can be obtained by going to our website at www.health.state.pa.us/stats (select Vital Statistics and then Birth and Death Statistics 1990-2001). These data have been updated over the years to provide trend figures.

You can view and print copies of *Health Status Indicators for Pennsylvania Counties and Health Districts - 2003 Report* at the Health Statistics web page (www.health.state.pa.us/stats) and select Vital Statistics). If you would like to receive a hard copy of this report, please contact the Bureau of Health Statistics and Research at (717) 783-2548.

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Cancer Reports....

Cancer Facts and Figures Pennsylvania 2003:

This brochure is now available on the Department's web site at www.health.state.pa.us/stats (select Cancer Incidence and Mortality). This is the seventh annual publication to present projected cancer incidence and mortality statistics.

This report contains 2003 projected cancer cases and cancer deaths by primary site and sex and 2003 projected cancer cases and cancer deaths by county of residence. Trends on age-adjusted incidence and mortality rates dating back to 1990 are discussed and are graphed for all cancers and the top four cancer sites (breast, lung, prostate, and colon/rectum). The percent of cancer cases by stage of disease at diagnosis for 1990 and 2000 are compared for all cancers by sex and race. A section on selected behavioral risk factors by race is based on the Pennsylvania BRFSS sample

**Cancer Facts and
Figures 2003...
contains 2003
projected cancer
cases and deaths
by primary site and sex
...(and by county)...**

survey conducted in 2001. Also included are the American Cancer Society guidelines for early detection of cancer in asymptomatic people and information on the Cancer Control Program initiatives of the Department. A new section compares Pennsylvania's age-adjusted incidence and mortality rate trends to the United States.

According to the report, the number of invasive cancer cases among Pennsylvania residents is projected to increase by 4.2 percent between 2000 and 2003 – from 69,065 to 71,960. Almost 64 percent

of this increase is projected to occur among four sites – female breast, prostate, thyroid, and melanoma of the skin. The number of male invasive cancer cases is expected to increase 3.3 percent between 2000 and 2003 – from 35,428 to 36,580. The number of female invasive cancer cases is expected to increase 5.2 percent between 2000 and 2003 – from 33,635 to 35,375. One of the biggest differences between male and female projections by site occurs with invasive lung/bronchus cancer. Males are expected to have 185 less lung/bronchus cancer cases in 2003 than in 2000 (when there were 5,645) while females are expected to have 186 more such cancer cases in 2003 than in 2000 (when there were 4,259)

Cancer deaths among Pennsylvania residents in 2003 (29,955) are expected to be similar to the 2001 number (29,853). In 2003, male cancer deaths are expected to number 14,975, compared to 15,058 in 2001. Female cancer deaths are expected to be 14,750 in 2003, compared to 14,795 in 2001.

The age-adjusted incidence rates for invasive cancer have been on the increase. The 2000 rate (488.8) was 10.3 percent higher than the 1990 rate (443.2). Rates among men and women also increased. Among whites, the 2000 rate was 9.6 percent higher and the rate for blacks was 7.4 percent higher.

In contrast, age-adjusted mortality rates for cancer have been on the decline. The 2001 rate of 202.2 was almost 10 percent lower among residents, compared to the 1990 rate (223.8). Among males, the 2001 rate was over 13 percent lower; and, the rate among women, 7.3 percent lower. The age-adjusted rates by race were also lower. For blacks, the 2001 rate was 3.4 percent lower and the white rate was 8.6 percent lower than the 1990 rate.

The majority of cancers are diagnosed at the local stage of the disease. In 2000, 47.4 percent of diagnosed cancers were discovered at this stage (down from 48.7 percent in 1990). In 2000, local stage diagnoses were made in at least 44 percent of the cases among males, females, whites, and blacks. Local stage diagnoses among blacks had the largest increase, from 40.5 percent in 1990 to 44.4 percent in 2000.

Of the four different major stages of cancer, the in situ stage accounted for the smallest percentage of diagnoses. However, in 2000, 8.5 percent of diagnoses were made at the in situ stage, up from 5.3 percent in 1990. Overall, regional and distant stage diagnoses decreased from 46.0 percent in 1990 to 44.1 percent in 2000. Regional and distant stage diagnoses also decreased for males, females, whites, and blacks between 1990 and 2000.

Printed copies of this brochure should be available in August.

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Health Status Indicators...

Maternal and Child Health Status Indicators for Pennsylvania and Major Municipalities – 2003 Report:

This report shows birth, death, infant death, childhood poverty, and disease incidence statistics for 22 municipalities as well as for Pennsylvania. This year, three municipalities (Hazleton, Lebanon and West Mifflin) were added to the report. These one-page profiles

provide those concerned with maternal and child health with a perspective of the types of urban health problems facing the state's major cities. Much of the data are shown by race (white, black and Asian/Pacific Islander) and for Hispanics.

The report includes leading causes of death among residents ages 1 to 17 during 1997-2001, infant death rates, children below poverty level, low birth weight, mothers with no

prenatal care in first trimester, teen births, and reported cases of vaccine-preventable diseases among residents under age 20.

The 20 cities and two boroughs included in the report are Allentown, Altoona, Bethlehem, Chester, Easton, Erie, Harrisburg, Hazleton, Johnstown, Lancaster, Lebanon, McKeesport, New Castle, Norristown, Philadelphia, Pittsburgh, Reading, Scranton, West Mifflin, Wilkes-Barre, Williamsport, and York.

As stated previously, this report is only available in electronic format on our website at www.health.state.pa.us/stats.

Update: Healthy People 2010 Objectives

Focus Area 15 - Injury and Violence Prevention

15-3 - Reduce firearm-related deaths.

2010 Target: 4.1

All Persons, Males, and Females:

The age-adjusted death rate for firearm-related deaths among Pennsylvania residents has declined from 11.4 in 1997 to 9.5 in 2001. Annual rates among males were approximately seven times higher than the rates for females. In 2001, the rate for males was 17.0, compared to only 2.5 for females. However, the rates for males have declined since 1997 while the rates for females have remained about the same.

Only the rate for females appears to have any chance of meeting the national 2010 national objective of 4.1. Even if the rates for males continue to decline as they have in the past, they will still not come close to meeting the 2010 national goal.

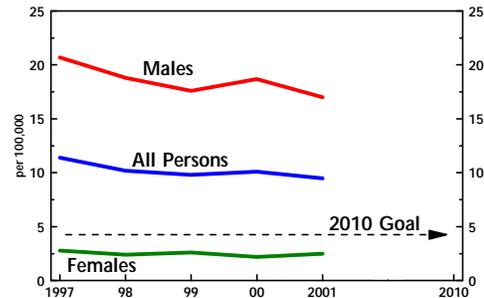
Race and Hispanic Origin:

Between 1997 and 2001, the annual rates for black residents have been three to four times higher than those for whites and, for Hispanics, about 40-50 percent higher. However, the rates for all three groups have been declining but are still far from the 2010 goal.

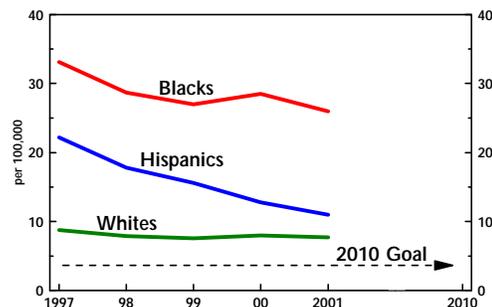
Suicides, Homicides, and Accidents:

The age-adjusted rate for firearm-related suicides have been higher than those for firearm-related homicides and much higher than the rates for accidental deaths involving firearms. The rates for suicides have been declining and the rates for homicides and accidents are already below the 2010 objective. However, the rate for suicides must decline by another 24 percent by the year 2010.

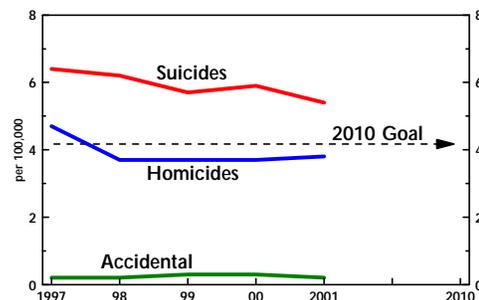
Firearm-Related Deaths, Age-Adjusted Rates*
Total and by Sex, Pennsylvania Residents, 1997-2001



By Race and Hispanic Origin, Pennsylvania, 1997-2001



By Type, Pennsylvania, 1997-2001



*age-adjusted to 2000 standard million U.S. population

Firearm-Related Deaths, Age-Adjusted Rate*
By Sex, Race, and Type, Pennsylvania Residents 1997-01

	2001	2000	1999	1998	1997
All Persons	9.5	10.1	9.8	10.2	11.4
Males	17.0	18.7	17.6	18.8	20.7
Females	2.5	2.2	2.6	2.4	2.8
Whites	7.7	8.0	7.6	7.9	8.8
Blacks	26.0	28.5	27.0	28.7	33.1
Hispanics**	11.0	12.8	15.6	17.8	22.2
Homicides	3.8	3.7	3.7	3.7	4.7
Suicides	5.4	5.9	5.7	6.2	6.4
Accidental	0.2	0.3	0.3	0.2	0.2

*age-adjusted to 2000 standard million U.S. population

**Hispanics can be of any race.

HP2010 State and County Data on the Web

To access the Department of Health's web page of Healthy People 2010 statistics for the state and counties, go to www.health.state.pa.us/stats. The latest available statistics as well as trend data are shown. You can view data for the state, all counties, a specific demographic element (age, sex, race, etc.) or just for a specific county. Complete data sets for the state and counties can be downloaded. There is also a link to the national HP2010 web site.

Home Health Agencies.....

TABLE 1
Home Health Agencies, Total Number and Percent by Type, Pennsylvania, 2000 and 2001

<u>TYPE of HOME HEALTH AGENCY</u>	<u>2000</u>	<u>2001</u>
HOSPITAL-BASED PROGRAM	25%	23%
PRIVATE NON-PROFIT	8%	7%
PROPRIETARY	52%	55%
SKILLED NURSING FACILITY BASED	1%	1%
VISITING NURSE ASSOCIATION	11%	13%
OTHER	2%	1%
TOTAL NUMBER	322	314

TABLE 2
Home Health Agency Caseload, Total Number and Percent by Type, Pennsylvania, 2000 and 2001

<u>TYPE of HOME HEALTH AGENCY</u>	<u>2000</u>	<u>2001</u>
HOSPITAL-BASED PROGRAM	47.0%	45.4%
PRIVATE NON-PROFIT	4.8%	4.0%
PROPRIETARY	23.9%	28.2%
SKILLED NURSING FACILITY BASED	0.2%	0.2%
VISITING NURSE ASSOCIATION	22.2%	20.1%
OTHER	1.9%	2.1%
TOTAL NUMBER	352,989	362,572

NOTE: Percentages may not total 100.0 due to rounding.

TABLE 3
Home Health Agencies, Mean Actual Fee Per Visit by Type of Service, Pennsylvania, 2000 and 2001

<u>TYPE of SERVICE</u>	<u>2000</u>	<u>2001</u>
SKILLED NURSING	\$108.00	\$110.00
PHYSICAL THERAPY	\$115.00	\$120.00
SPEECH THERAPY	\$118.00	\$120.00
OCCUPATIONAL THERAPY	\$118.00	\$120.00
MEDICAL/SOCIAL	\$150.00	\$150.00
HOME HEALTH AIDE	\$64.50	\$65.00

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