

**011 Beloit Memorial Hospital Inc**  
**1969 W Hart Rd**  
**Beloit, WI 53511**  
**608-364-5011**

Hospital Type: GMS  
County: Rock  
Analysis Area: 1-Southern  
Inpatient Volume Group: 5

**Overall Hospital Utilization**

Total Discharges:	5,805	Average Length of Stay (days):	4.2
Total Patient Days:	24,454	Average Charge per Discharge:	\$12,345

**Obstetrical Utilization**

Normal Childbirths:	483	Percent of All Childbirths:	68.8%
Cesarean Childbirths:	176	Percent of All Childbirths:	25.1%
Other Childbirths:	43	Percent of All Childbirths:	6.1%
<b>Total Childbirths:</b>	<b>702</b>		
<b>Total Newborns:</b>	<b>708</b>		

**Psychiatric Utilization**

Discharges:	19	Percent of All Discharges:	0.3%
Patient Days:	115	Percent of All Patient Days:	0.5%

**AODA Utilization**

Discharges:	25	Percent of All Discharges:	0.4%
Patient Days:	107	Percent of All Patient Days:	0.4%

**Patient Discharge Status**

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	78.5%
Other GMS Hospital	3.4%
Skilled Nursing Facility	7.6%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	1.5%
Hospice	0.0%
Other Institution	1.9%
Home Health/Home IV Provider	4.0%
Left Against Medical Advice	0.4%
Expired	2.7%
Other	0.0%

**Expected Pay Source Distribution**

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	42.9%
Medicaid/BadgerCare	17.4%
Other Government	0.2%
Commercial or Private Insurance	34.1%
Self-Pay	5.3%
Other or Unknown Insurance	0.0%

**Age Distribution**

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	12.2%	6.0%
Under 15	2.7%	1.3%
15 - 19	2.9%	1.6%
20 - 24	5.4%	3.1%
25 - 34	9.8%	6.1%
35 - 44	8.0%	6.2%
45 - 54	9.0%	9.0%
55 - 64	10.0%	11.6%
65 - 74	14.5%	19.5%
75 - 84	16.8%	23.0%
85 & Over	8.7%	12.6%

**Sex Distribution**

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	38.6%	39.4%
Female	61.4%	60.6%

**Race Distribution**

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.3%	0.2%
Asian/Pacific Isl.	0.4%	0.3%
Black	10.6%	11.3%
White	83.6%	85.4%
Other	3.4%	1.8%
Unknown	1.7%	1.1%

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**DRG Specific Data - Average Length of Stay (ALOS)**

DRG # and Description	This Facility		Group Averages					
	Discharges	ALOS	Analysis Area		Inpatient Volume Group		All GMS Hospitals	
			ALOS	Ratio	ALOS	Ratio	ALOS	Ratio
088 Chronic Obstructive Pulmonary Disease	127	5.3	4.4	1.21	4.3	1.24	4.2	1.27
089 Simple Pneumonia & Pleurisy Age >17 w CC	138	5.5	4.7	1.17	4.7	1.17	4.8	1.15
127 Heart Failure & Shock	167	5.7	4.5	1.26	4.4	1.29	4.4	1.29
143 Chest Pain	106	1.9	1.4	1.36	1.6	1.19	1.5	1.27
174 G.I. Hemorrhage w CC	82	5.3	3.7	1.44	3.8	1.40	3.8	1.40
182 G.I. Disorders Age >17 w CC	99	3.9	3.4	1.16	3.6	1.09	3.6	1.09
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	153	5.0	4.0	1.25	4.1	1.22	4.2	1.19
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	93	2.7	1.8	1.48	2.0	1.33	2.0	1.33
371 Cesarean Section w/o CC	143	3.0	3.6	0.83	3.5	0.85	3.7	0.80
373 Vaginal Delivery w/o Complicating Diagnosis	483	1.9	2.0	0.93	2.0	0.93	2.1	0.89
390 Neonate w Other Significant Problems	103	2.1	2.4	0.88	2.4	0.88	2.5	0.85
391 Normal Newborn	552	2.0	2.0	1.01	2.0	1.01	2.0	1.01
430 Psychoses	5	6.2	7.1	0.87	5.6	1.11	6.3	0.98
462 Rehabilitation	96	9.2	13.4	0.69	11.2	0.82	10.8	0.85
523 Alcohol/Drug Abuse or Dependence w/o Rehab w/o CC	8	2.3	2.8	0.80	2.8	0.80	2.8	0.80

**DRG Specific Data - Average Charge per Discharge (Actual & Risk-Adjusted^)**

DRG # and Description	This Facility		Risk Adjusted Group Averages					
	Average Charge	Risk Adjusted	Analysis Area		Inpatient Volume Group		All GMS Hospitals	
		Average Charge	Average Charge	Average Charge	Ratio	Average Charge	Ratio	Average Charge
088 Chronic Obstructive Pulmonary Disease	\$11,242	\$10,538	\$8,847	1.19	\$8,744	1.21	\$8,935	1.18
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$12,316	\$11,481	\$10,155	1.13	\$10,105	1.14	\$10,412	1.10
127 Heart Failure & Shock	\$14,912	\$13,065	\$10,128	1.29	\$10,195	1.28	\$10,503	1.24
143 Chest Pain	\$5,390	\$5,127	\$5,189	0.99	\$6,350	0.81	\$6,214	0.83
174 G.I. Hemorrhage w CC	\$14,176	\$12,755	\$10,194	1.25	\$10,694	1.19	\$10,746	1.19
182 G.I. Disorders Age >17 w CC	\$8,641	\$8,143	\$7,884	1.03	\$8,524	0.96	\$8,548	0.95
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$29,269	\$29,005	\$23,734	1.22	\$24,105	1.20	\$25,023	1.16
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$10,123	\$10,098	\$9,479	1.07	\$10,121	1.00	\$10,344	0.98
371 Cesarean Section w/o CC	\$9,542	\$9,171	\$8,886	1.03	\$8,196	1.12	\$8,934	1.03
373 Vaginal Delivery w/o Complicating Diagnosis	\$5,334	\$5,417	\$4,080	1.33	\$3,960	1.37	\$4,407	1.23
390 Neonate w Other Significant Problems	\$1,608	\$1,578	\$2,211	0.71	\$2,155	0.73	\$2,468	0.64
391 Normal Newborn	\$1,345	\$1,411	\$1,357	1.04	\$1,361	1.04	\$1,476	0.96
430 Psychoses	\$11,877	#	#		#		#	
462 Rehabilitation	\$12,568	\$13,141	\$18,499	0.71	\$15,310	0.86	\$16,900	0.78
523 Alcohol/Drug Abuse or Dependence w/o Rehab w/o CC	\$7,262	#	#		#		#	

N/A - Zero Discharges reported for DRG

\* - 1 through 4 Discharges reported for DRG

^ Risk-Adjusted Charges calculated using Medstat Disease Staging Software® Version 5.21.3 licensed through Thomson Medstat, Inc.

# Risk-Adjusted Charges not calculated for DRGs related to Mental Diseases/Disorders and/or Alcohol/Drug Use/Abuse/Dependence.