

**057 Franciscan Skemp Healthcare - La Crosse**  
**700 West Ave S**  
**La Crosse, WI 54601**  
**608-785-0940**

Hospital Type: GMS  
 County: La Crosse  
 Analysis Area: 5B-Southwestern  
 Inpatient Volume Group: 5

**Overall Hospital Utilization**

Total Discharges:	7,658	Average Length of Stay (days):	4.1
Total Patient Days:	31,402	Average Charge per Discharge:	\$12,911

**Obstetrical Utilization**

Normal Childbirths:	424	Percent of All Childbirths:	60.1%
Cesarean Childbirths:	181	Percent of All Childbirths:	25.7%
Other Childbirths:	100	Percent of All Childbirths:	14.2%
<b>Total Childbirths:</b>	<b>705</b>		
<b>Total Newborns:</b>	<b>720</b>		

**Psychiatric Utilization**

Discharges:	610	Percent of All Discharges:	8.0%
Patient Days:	4,246	Percent of All Patient Days:	13.5%

**AODA Utilization**

Discharges:	384	Percent of All Discharges:	5.0%
Patient Days:	2,127	Percent of All Patient Days:	6.8%

**Patient Discharge Status**

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	78.1%
Other GMS Hospital	2.4%
Skilled Nursing Facility	11.1%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	0.0%
Hospice	0.0%
Other Institution	4.5%
Home Health/Home IV Provider	2.8%
Left Against Medical Advice	0.8%
Expired	0.0%
Other	0.3%

**Expected Pay Source Distribution**

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	36.9%
Medicaid/BadgerCare	12.8%
Other Government	6.3%
Commercial or Private Insurance	41.2%
Self-Pay	2.8%
Other or Unknown Insurance	0.0%

**Age Distribution**

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	9.4%	8.5%
Under 15	2.8%	2.2%
15 - 19	3.1%	2.9%
20 - 24	5.6%	4.9%
25 - 34	11.1%	9.9%
35 - 44	11.4%	11.1%
45 - 54	12.3%	12.0%
55 - 64	11.3%	12.2%
65 - 74	11.6%	12.3%
75 - 84	14.4%	16.6%
85 & Over	6.9%	7.3%

**Sex Distribution**

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	43.5%	45.5%
Female	56.5%	54.5%

**Race Distribution**

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.2%	0.2%
Asian/Pacific Isl.	0.6%	0.5%
Black	1.1%	0.9%
White	96.5%	97.0%
Other	0.8%	0.6%
Unknown	0.7%	0.7%

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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	88	4.2	3.2	1.30	4.3	0.97	4.2	0.99
089 Simple Pneumonia & Pleurisy Age >17 w CC	207	4.1	3.8	1.09	4.7	0.88	4.8	0.86
127 Heart Failure & Shock	97	4.4	3.4	1.30	4.4	1.01	4.4	1.01
143 Chest Pain	149	1.6	1.3	1.25	1.6	1.02	1.5	1.09
174 G.I. Hemorrhage w CC	82	3.3	3.1	1.07	3.8	0.88	3.8	0.88
182 G.I. Disorders Age >17 w CC	87	3.0	2.9	1.03	3.6	0.83	3.6	0.83
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	280	4.5	4.3	1.05	4.1	1.10	4.2	1.08
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	146	2.2	1.8	1.19	2.0	1.08	2.0	1.08
371 Cesarean Section w/o CC	129	4.1	3.4	1.19	3.5	1.16	3.7	1.10
373 Vaginal Delivery w/o Complicating Diagnosis	424	2.1	1.9	1.13	2.0	1.07	2.1	1.02
390 Neonate w Other Significant Problems	69	3.2	2.5	1.29	2.4	1.35	2.5	1.29
391 Normal Newborn	564	2.2	2.0	1.10	2.0	1.10	2.0	1.10
430 Psychoses	397	8.1	8.1	1.00	5.6	1.44	6.3	1.28
462 Rehabilitation	21	15.8	13.5	1.17	11.2	1.41	10.8	1.46
523 Alcohol/Drug Abuse or Dependence w/o Rehab w/o CC	182	4.0	2.9	1.39	2.8	1.44	2.8	1.44

**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	\$11,299	\$10,583	\$7,748	1.37	\$8,744	1.21	\$8,935	1.18
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$10,486	\$10,053	\$8,977	1.12	\$10,105	0.99	\$10,412	0.97
127 Heart Failure & Shock	\$11,044	\$10,356	\$9,175	1.13	\$10,195	1.02	\$10,503	0.99
143 Chest Pain	\$7,771	\$7,521	\$5,853	1.28	\$6,350	1.18	\$6,214	1.21
174 G.I. Hemorrhage w CC	\$11,376	\$10,539	\$10,077	1.05	\$10,694	0.99	\$10,746	0.98
182 G.I. Disorders Age >17 w CC	\$8,869	\$9,104	\$7,592	1.20	\$8,524	1.07	\$8,548	1.06
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$24,773	\$24,622	\$23,472	1.05	\$24,105	1.02	\$25,023	0.98
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$9,794	\$9,684	\$9,947	0.97	\$10,121	0.96	\$10,344	0.94
371 Cesarean Section w/o CC	\$8,333	\$8,045	\$9,548	0.84	\$8,196	0.98	\$8,934	0.90
373 Vaginal Delivery w/o Complicating Diagnosis	\$3,895	\$3,797	\$4,251	0.89	\$3,960	0.96	\$4,407	0.86
390 Neonate w Other Significant Problems	\$3,938	\$3,092	\$2,410	1.28	\$2,155	1.43	\$2,468	1.25
391 Normal Newborn	\$1,537	\$1,588	\$1,384	1.15	\$1,361	1.17	\$1,476	1.08
430 Psychoses	\$10,654	#	#		#		#	
462 Rehabilitation	\$25,584	\$22,039	\$19,777	1.11	\$15,310	1.44	\$16,900	1.30
523 Alcohol/Drug Abuse or Dependence w/o Rehab w/o CC	\$5,987	#	#		#		#	

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.