

056 Gundersen Lutheran Medical Center Inc
1910 South Ave
La Crosse, WI 54601
608-785-0530

Hospital Type: **GMS**
County: **La Crosse**
Analysis Area: **5B-Southwestern**
Inpatient Volume Group: **6**

Overall Hospital Utilization

| | | | |
|---------------------|--------|--------------------------------|----------|
| Total Discharges: | 16,938 | Average Length of Stay (days): | 3.9 |
| Total Patient Days: | 66,820 | Average Charge per Discharge: | \$15,534 |

Obstetrical Utilization

| | | | |
|---------------------------|--------------|-----------------------------|-------|
| Normal Childbirths: | 1,047 | Percent of All Childbirths: | 67.8% |
| Cesarean Childbirths: | 296 | Percent of All Childbirths: | 19.2% |
| Other Childbirths: | 201 | Percent of All Childbirths: | 13.0% |
| Total Childbirths: | 1,544 | | |
| Total Newborns: | 1,582 | | |

Psychiatric Utilization

| | | | |
|---------------|-------|------------------------------|------|
| Discharges: | 939 | Percent of All Discharges: | 5.5% |
| Patient Days: | 6,569 | Percent of All Patient Days: | 9.8% |

AODA Utilization

| | | | |
|---------------|-----|------------------------------|------|
| Discharges: | 369 | Percent of All Discharges: | 2.2% |
| Patient Days: | 991 | Percent of All Patient Days: | 1.5% |

Patient Discharge Status

| <u>Discharge Status</u> | <u>% Discharges</u> |
|-----------------------------------|---------------------|
| Home or Self-Care | 80.5% |
| Other GMS Hospital | 0.8% |
| Skilled Nursing Facility | 9.0% |
| Intermediate Care Facility | 0.9% |
| Inpatient Rehabilitation Facility | 0.1% |
| Hospice | 0.6% |
| Other Institution | 2.6% |
| Home Health/Home IV Provider | 3.1% |
| Left Against Medical Advice | 0.4% |
| Expired | 2.0% |
| Other | 0.0% |

Expected Pay Source Distribution

| <u>Primary Payer</u> | <u>% Discharges</u> |
|---------------------------------|---------------------|
| Medicare | 39.7% |
| Medicaid/BadgerCare | 4.6% |
| Other Government | 1.6% |
| Commercial or Private Insurance | 51.0% |
| Self-Pay | 2.9% |
| Other or Unknown Insurance | 0.3% |

Age Distribution

| <u>Age Group</u> | <u>% Discharges</u> | <u>% Patient Days</u> |
|------------------|---------------------|-----------------------|
| Newborn | 9.3% | 8.1% |
| Under 15 | 4.6% | 3.8% |
| 15 - 19 | 3.2% | 2.9% |
| 20 - 24 | 4.3% | 3.2% |
| 25 - 34 | 10.3% | 8.0% |
| 35 - 44 | 9.6% | 8.7% |
| 45 - 54 | 10.8% | 10.8% |
| 55 - 64 | 11.6% | 12.9% |
| 65 - 74 | 14.6% | 16.2% |
| 75 - 84 | 15.4% | 18.7% |
| 85 & Over | 6.3% | 6.7% |

Sex Distribution

| <u>Sex</u> | <u>% Discharges</u> | <u>% Patient Days</u> |
|------------|---------------------|-----------------------|
| Male | 45.2% | 47.8% |
| Female | 54.8% | 52.2% |

Race Distribution

| <u>Race</u> | <u>% Discharges</u> | <u>% Patient Days</u> |
|--------------------|---------------------|-----------------------|
| Native American | 0.6% | 1.1% |
| Asian/Pacific Isl. | 1.1% | 0.8% |
| Black | 0.6% | 0.5% |
| White | 97.3% | 97.3% |
| Other | 0.4% | 0.3% |
| Unknown | 0.0% | 0.0% |

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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 | 2.6 | 3.2 | 0.82 | 4.4 | 0.60 | 4.2 | 0.62 |
| 089 Simple Pneumonia & Pleurisy Age >17 w CC | 223 | 3.3 | 3.8 | 0.87 | 5.1 | 0.65 | 4.8 | 0.69 |
| 127 Heart Failure & Shock | 276 | 3.3 | 3.4 | 0.98 | 4.8 | 0.70 | 4.4 | 0.76 |
| 143 Chest Pain | 237 | 1.3 | 1.3 | 0.97 | 1.6 | 0.79 | 1.5 | 0.84 |
| 182 G.I. Disorders Age >17 w CC | 201 | 3.0 | 2.9 | 1.03 | 3.8 | 0.79 | 3.6 | 0.83 |
| 209 Maj Joint/Limb Reattachment Procs-Lower Extremity | 571 | 4.3 | 4.3 | 0.99 | 4.2 | 1.02 | 4.2 | 1.02 |
| 359 Uterine/Adnexa Proc for Non-Malignancy w/o CC | 304 | 1.7 | 1.8 | 0.97 | 2.0 | 0.87 | 2.0 | 0.87 |
| 371 Cesarean Section w/o CC | 178 | 3.4 | 3.4 | 0.99 | 4.0 | 0.84 | 3.7 | 0.91 |
| 372 Vaginal Delivery w Complicating Diagnosis | 154 | 2.4 | 2.4 | 1.01 | 2.9 | 0.84 | 2.7 | 0.90 |
| 373 Vaginal Delivery w/o Complicating Diagnosis | 1047 | 1.9 | 1.9 | 1.00 | 2.1 | 0.90 | 2.1 | 0.90 |
| 390 Neonate w Other Significant Problems | 186 | 2.4 | 2.5 | 0.94 | 2.6 | 0.91 | 2.5 | 0.94 |
| 391 Normal Newborn | 1222 | 2.0 | 2.0 | 1.01 | 2.1 | 0.96 | 2.0 | 1.01 |
| 430 Psychoses | 634 | 8.2 | 8.1 | 1.02 | 6.9 | 1.19 | 6.3 | 1.31 |
| 462 Rehabilitation | 148 | 13.3 | 13.5 | 0.98 | 10.6 | 1.25 | 10.8 | 1.23 |
| 517 Percutaneous Cardio Procedure w Stent w/o AMI | 123 | 1.8 | 1.8 | 0.98 | 2.0 | 0.88 | 2.0 | 0.88 |

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

| DRG # and Description | This Facility | | Risk Adjusted Group Averages | | | | | |
|---|----------------|------------------------------|------------------------------|----------------|------------------------|----------------|-------------------|----------------|
| | Average Charge | Risk Adjusted Average Charge | Analysis Area | | Inpatient Volume Group | | All GMS Hospitals | |
| | | Charge | Charge | Average Charge | Ratio | Average Charge | Ratio | Average Charge |
| 088 Chronic Obstructive Pulmonary Disease | \$7,750 | \$6,421 | \$7,748 | 0.83 | \$9,399 | 0.68 | \$8,935 | 0.72 |
| 089 Simple Pneumonia & Pleurisy Age >17 w CC | \$9,280 | \$7,955 | \$8,977 | 0.89 | \$11,362 | 0.70 | \$10,412 | 0.76 |
| 127 Heart Failure & Shock | \$10,946 | \$9,505 | \$9,175 | 1.04 | \$11,521 | 0.83 | \$10,503 | 0.90 |
| 143 Chest Pain | \$5,931 | \$5,341 | \$5,853 | 0.91 | \$6,757 | 0.79 | \$6,214 | 0.86 |
| 182 G.I. Disorders Age >17 w CC | \$8,964 | \$8,157 | \$7,592 | 1.07 | \$9,365 | 0.87 | \$8,548 | 0.95 |
| 209 Maj Joint/Limb Reattachment Procs-Lower Extremity | \$22,327 | \$21,881 | \$23,472 | 0.93 | \$25,729 | 0.85 | \$25,023 | 0.87 |
| 359 Uterine/Adnexa Proc for Non-Malignancy w/o CC | \$10,363 | \$10,043 | \$9,947 | 1.01 | \$10,656 | 0.94 | \$10,344 | 0.97 |
| 371 Cesarean Section w/o CC | \$11,276 | \$11,444 | \$9,548 | 1.20 | \$9,525 | 1.20 | \$8,934 | 1.28 |
| 372 Vaginal Delivery w Complicating Diagnosis | \$7,561 | \$7,492 | \$6,087 | 1.23 | \$7,176 | 1.04 | \$6,254 | 1.20 |
| 373 Vaginal Delivery w/o Complicating Diagnosis | \$5,211 | \$5,001 | \$4,251 | 1.18 | \$4,879 | 1.03 | \$4,407 | 1.13 |
| 390 Neonate w Other Significant Problems | \$2,441 | \$2,270 | \$2,410 | 0.94 | \$2,726 | 0.83 | \$2,468 | 0.92 |
| 391 Normal Newborn | \$1,491 | \$1,289 | \$1,384 | 0.93 | \$1,567 | 0.82 | \$1,476 | 0.87 |
| 430 Psychoses | \$12,998 | # | # | | # | | # | |
| 462 Rehabilitation | \$24,902 | \$19,456 | \$19,777 | 0.98 | \$17,355 | 1.12 | \$16,900 | 1.15 |
| 517 Percutaneous Cardio Procedure w Stent w/o AMI | \$26,788 | \$26,959 | \$26,491 | 1.02 | \$27,459 | 0.98 | \$27,329 | 0.99 |

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.