

069 Saint Joseph's Hospital
611 St Joseph Ave
Marshfield, WI 54449
715-387-1713

Hospital Type: GMS
 County: Wood
 Analysis Area: 6-North Central
 Inpatient Volume Group: 6

Overall Hospital Utilization

Total Discharges:	19,603	Average Length of Stay (days):	5.1
Total Patient Days:	99,016	Average Charge per Discharge:	\$17,534

Obstetrical Utilization

Normal Childbirths:	703	Percent of All Childbirths:	61.2%
Cesarean Childbirths:	371	Percent of All Childbirths:	32.3%
Other Childbirths:	75	Percent of All Childbirths:	6.5%
Total Childbirths:	1,149		
Total Newborns:	1,176		

Psychiatric Utilization

Discharges:	388	Percent of All Discharges:	2.0%
Patient Days:	2,269	Percent of All Patient Days:	2.3%

AODA Utilization

Discharges:	534	Percent of All Discharges:	2.7%
Patient Days:	3,282	Percent of All Patient Days:	3.3%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	80.1%
Other GMS Hospital	0.8%
Skilled Nursing Facility	6.6%
Intermediate Care Facility	0.7%
Inpatient Rehabilitation Facility	2.3%
Hospice	0.7%
Other Institution	0.4%
Home Health/Home IV Provider	5.7%
Left Against Medical Advice	0.6%
Expired	2.2%
Other	0.1%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	43.2%
Medicaid/BadgerCare	11.6%
Other Government	1.3%
Commercial or Private Insurance	40.7%
Self-Pay	3.3%
Other or Unknown Insurance	0.1%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	6.0%	6.6%
Under 15	7.1%	6.9%
15 - 19	2.9%	3.1%
20 - 24	3.5%	2.6%
25 - 34	7.6%	5.7%
35 - 44	9.0%	8.2%
45 - 54	11.1%	10.5%
55 - 64	12.5%	13.0%
65 - 74	17.0%	18.2%
75 - 84	16.1%	17.8%
85 & Over	7.2%	7.4%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	47.6%	49.9%
Female	52.4%	50.1%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.8%	1.2%
Asian/Pacific Isl.	0.4%	0.6%
Black	0.2%	0.2%
White	97.1%	96.6%
Other	0.6%	0.5%
Unknown	0.8%	0.9%

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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	185	3.9	3.9	1.01	4.4	0.90	4.2	0.94
089 Simple Pneumonia & Pleurisy Age >17 w CC	359	4.4	4.6	0.97	5.1	0.87	4.8	0.93
127 Heart Failure & Shock	319	3.9	3.9	1.00	4.8	0.81	4.4	0.89
143 Chest Pain	213	1.6	1.4	1.17	1.6	1.02	1.5	1.09
182 G.I. Disorders Age >17 w CC	270	3.7	3.5	1.06	3.8	0.97	3.6	1.03
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	690	4.2	3.9	1.08	4.2	1.00	4.2	1.00
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	222	2.2	2.0	1.11	2.0	1.11	2.0	1.11
371 Cesarean Section w/o CC	307	4.5	3.6	1.24	4.0	1.11	3.7	1.20
372 Vaginal Delivery w Complicating Diagnosis	69	2.8	2.3	1.22	2.9	0.96	2.7	1.04
373 Vaginal Delivery w/o Complicating Diagnosis	703	2.3	2.0	1.14	2.1	1.09	2.1	1.09
390 Neonate w Other Significant Problems	99	3.1	2.6	1.17	2.6	1.17	2.5	1.22
391 Normal Newborn	902	2.3	2.1	1.07	2.1	1.07	2.0	1.13
430 Psychoses	195	7.3	5.5	1.34	6.9	1.06	6.3	1.17
462 Rehabilitation	404	10.2	9.7	1.05	10.6	0.96	10.8	0.94
517 Percutaneous Cardio Procedure w Stent w/o AMI	391	1.8	1.8	1.01	2.0	0.91	2.0	0.91

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	\$8,968	\$7,575	\$7,601	1.00	\$9,399	0.81	\$8,935	0.85
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$10,330	\$9,380	\$9,136	1.03	\$11,362	0.83	\$10,412	0.90
127 Heart Failure & Shock	\$8,624	\$7,959	\$8,639	0.92	\$11,521	0.69	\$10,503	0.76
143 Chest Pain	\$5,208	\$4,753	\$5,156	0.92	\$6,757	0.70	\$6,214	0.76
182 G.I. Disorders Age >17 w CC	\$8,428	\$7,581	\$7,102	1.07	\$9,365	0.81	\$8,548	0.89
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$27,099	\$25,869	\$22,412	1.15	\$25,729	1.01	\$25,023	1.03
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$8,769	\$8,525	\$8,569	0.99	\$10,656	0.80	\$10,344	0.82
371 Cesarean Section w/o CC	\$7,317	\$7,076	\$7,277	0.97	\$9,525	0.74	\$8,934	0.79
372 Vaginal Delivery w Complicating Diagnosis	\$4,471	\$4,342	\$4,239	1.02	\$7,176	0.61	\$6,254	0.69
373 Vaginal Delivery w/o Complicating Diagnosis	\$3,703	\$3,648	\$3,482	1.05	\$4,879	0.75	\$4,407	0.83
390 Neonate w Other Significant Problems	\$5,588	\$4,916	\$2,813	1.75	\$2,726	1.80	\$2,468	1.99
391 Normal Newborn	\$1,897	\$1,983	\$1,527	1.30	\$1,567	1.27	\$1,476	1.34
430 Psychoses	\$11,172	#	#		#		#	
462 Rehabilitation	\$16,381	\$16,707	\$14,810	1.13	\$17,355	0.96	\$16,900	0.99
517 Percutaneous Cardio Procedure w Stent w/o AMI	\$24,137	\$25,253	\$23,145	1.09	\$27,459	0.92	\$27,329	0.92

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.