

070 Hess Memorial Hospital Inc/Mile Bluff Medical Center
1050 Division St
Mauston, WI 53948
608-847-6161

Hospital Type: GMS
County: Juneau
Analysis Area: 6-North Central
Inpatient Volume Group: 4

Overall Hospital Utilization

Total Discharges:	2,449	Average Length of Stay (days):	3.2
Total Patient Days:	7,759	Average Charge per Discharge:	\$9,455

Obstetrical Utilization

Normal Childbirths:	114	Percent of All Childbirths:	56.7%
Cesarean Childbirths:	57	Percent of All Childbirths:	28.4%
Other Childbirths:	30	Percent of All Childbirths:	14.9%
Total Childbirths:	201		
Total Newborns:	203		

Psychiatric Utilization

Discharges:	16	Percent of All Discharges:	0.7%
Patient Days:	59	Percent of All Patient Days:	0.8%

AODA Utilization

Discharges:	10	Percent of All Discharges:	0.4%
Patient Days:	34	Percent of All Patient Days:	0.4%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	75.3%
Other GMS Hospital	6.1%
Skilled Nursing Facility	10.1%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	0.0%
Hospice	0.8%
Other Institution	0.5%
Home Health/Home IV Provider	4.5%
Left Against Medical Advice	0.7%
Expired	1.9%
Other	0.0%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	46.1%
Medicaid/BadgerCare	18.6%
Other Government	0.7%
Commercial or Private Insurance	30.5%
Self-Pay	3.8%
Other or Unknown Insurance	0.4%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	8.3%	5.3%
Under 15	3.9%	2.3%
15 - 19	2.7%	1.8%
20 - 24	5.9%	4.0%
25 - 34	9.1%	5.9%
35 - 44	8.6%	7.2%
45 - 54	9.6%	8.2%
55 - 64	10.1%	10.8%
65 - 74	13.6%	16.8%
75 - 84	17.0%	22.1%
85 & Over	11.2%	15.6%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	39.8%	39.9%
Female	60.2%	60.1%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.4%	0.3%
Asian/Pacific Isl.	0.4%	0.5%
Black	0.2%	0.2%
White	98.8%	99.0%
Other	0.1%	0.1%
Unknown	0.1%	0.1%

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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	56	3.8	3.9	0.96	4.0	0.94	4.2	0.89
089 Simple Pneumonia & Pleurisy Age >17 w CC	80	4.6	4.6	0.99	4.6	0.99	4.8	0.95
127 Heart Failure & Shock	76	4.2	3.9	1.09	4.1	1.03	4.4	0.96
143 Chest Pain	54	1.6	1.4	1.11	1.5	1.04	1.5	1.04
174 G.I. Hemorrhage w CC	45	3.9	3.6	1.07	3.6	1.07	3.8	1.02
182 G.I. Disorders Age >17 w CC	62	3.2	3.5	0.92	3.5	0.92	3.6	0.90
183 G.I. Disorders Age >17 w/o CC	78	2.0	2.1	0.94	2.2	0.90	2.4	0.82
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	57	5.1	3.9	1.30	4.4	1.15	4.2	1.21
296 Nutritional & Metabolic Disorders Age >17 w CC	27	4.4	3.9	1.14	3.8	1.17	4.1	1.08
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	79	2.4	2.0	1.18	1.8	1.31	2.0	1.18
371 Cesarean Section w/o CC	39	2.9	3.6	0.80	3.2	0.91	3.7	0.78
373 Vaginal Delivery w/o Complicating Diagnosis	114	1.9	2.0	0.96	1.9	1.01	2.1	0.91
390 Neonate w Other Significant Problems	13	2.3	2.6	0.89	2.3	1.00	2.5	0.92
391 Normal Newborn	182	2.1	2.1	0.98	2.0	1.03	2.0	1.03
523 Alcohol/Drug Abuse or Dependence w/o Rehab w/o CC	1	*	3.5	*	2.4	*	2.8	*

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	\$9,686	\$8,747	\$7,601	1.15	\$8,454	1.03	\$8,935	0.98
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$11,075	\$10,399	\$9,136	1.14	\$9,910	1.05	\$10,412	1.00
127 Heart Failure & Shock	\$11,846	\$11,352	\$8,639	1.31	\$9,583	1.18	\$10,503	1.08
143 Chest Pain	\$7,108	\$6,590	\$5,156	1.28	\$5,755	1.15	\$6,214	1.06
174 G.I. Hemorrhage w CC	\$10,657	\$10,081	\$9,199	1.10	\$10,064	1.00	\$10,746	0.94
182 G.I. Disorders Age >17 w CC	\$8,146	\$7,330	\$7,102	1.03	\$7,869	0.93	\$8,548	0.86
183 G.I. Disorders Age >17 w/o CC	\$5,215	\$5,221	\$5,024	1.04	\$5,866	0.89	\$6,351	0.82
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$26,999	\$25,141	\$22,412	1.12	\$25,172	1.00	\$25,023	1.00
296 Nutritional & Metabolic Disorders Age >17 w CC	\$8,727	\$8,806	\$7,229	1.22	\$7,853	1.12	\$8,890	0.99
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$11,238	\$11,382	\$8,569	1.33	\$9,859	1.15	\$10,344	1.10
371 Cesarean Section w/o CC	\$9,986	\$9,719	\$7,277	1.34	\$8,293	1.17	\$8,934	1.09
373 Vaginal Delivery w/o Complicating Diagnosis	\$4,243	\$4,184	\$3,482	1.20	\$3,752	1.11	\$4,407	0.95
390 Neonate w Other Significant Problems	\$1,832	\$1,943	\$2,813	0.69	\$1,964	0.99	\$2,468	0.79
391 Normal Newborn	\$1,493	\$1,585	\$1,527	1.04	\$1,406	1.13	\$1,476	1.07
523 Alcohol/Drug Abuse or Dependence w/o Rehab w/o CC	*	#	#	*	#	*	#	*

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.