

071 Memorial Health Center Inc  
 135 S Gibson St  
 Medford, WI 54451  
 715-748-8100

Hospital Type: GMS  
 County: Taylor  
 Analysis Area: 6-North Central  
 Inpatient Volume Group: 2

**Overall Hospital Utilization**

Total Discharges:	1,233	Average Length of Stay (days):	2.8
Total Patient Days:	3,416	Average Charge per Discharge:	\$5,431

**Obstetrical Utilization**

Normal Childbirths:	103	Percent of All Childbirths:	58.9%
Cesarean Childbirths:	44	Percent of All Childbirths:	25.1%
Other Childbirths:	28	Percent of All Childbirths:	16.0%
Total Childbirths:	175		
Total Newborns:	178		

**Psychiatric Utilization**

Discharges:	5	Percent of All Discharges:	0.4%
Patient Days:	10	Percent of All Patient Days:	0.3%

**AODA Utilization**

Discharges:	4	Percent of All Discharges:	0.3%
Patient Days:	20	Percent of All Patient Days:	0.6%

**Patient Discharge Status**

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	78.7%
Other GMS Hospital	4.2%
Skilled Nursing Facility	7.5%
Intermediate Care Facility	1.1%
Inpatient Rehabilitation Facility	0.0%
Hospice	0.3%
Other Institution	0.3%
Home Health/Home IV Provider	2.1%
Left Against Medical Advice	0.2%
Expired	1.2%
Other	4.5%

**Expected Pay Source Distribution**

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	47.0%
Medicaid/BadgerCare	10.1%
Other Government	0.3%
Commercial or Private Insurance	40.7%
Self-Pay	1.8%
Other or Unknown Insurance	0.0%

**Age Distribution**

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	14.4%	11.2%
Under 15	3.4%	2.2%
15 - 19	2.9%	2.3%
20 - 24	4.4%	3.5%
25 - 34	12.1%	10.0%
35 - 44	5.8%	5.5%
45 - 54	6.1%	5.6%
55 - 64	7.0%	7.7%
65 - 74	10.4%	12.4%
75 - 84	18.5%	22.0%
85 & Over	15.0%	17.7%

**Sex Distribution**

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	40.6%	40.2%
Female	59.4%	59.8%

**Race Distribution**

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.0%	0.0%
Asian/Pacific Isl.	0.0%	0.0%
Black	0.0%	0.0%
White	99.7%	99.8%
Other	0.3%	0.2%
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	40	3.3	3.9	0.84	4.4	0.74	4.2	0.78
089 Simple Pneumonia & Pleurisy Age >17 w CC	50	4.3	4.6	0.93	4.4	0.98	4.8	0.90
127 Heart Failure & Shock	51	3.5	3.9	0.88	4.0	0.86	4.4	0.78
143 Chest Pain	48	1.4	1.4	0.98	1.4	0.98	1.5	0.92
174 G.I. Hemorrhage w CC	38	3.0	3.6	0.83	3.0	0.99	3.8	0.78
182 G.I. Disorders Age >17 w CC	20	2.9	3.5	0.81	3.0	0.95	3.6	0.79
183 G.I. Disorders Age >17 w/o CC	16	2.1	2.1	0.98	1.9	1.09	2.4	0.86
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	3	*	3.9	*	3.8	*	4.2	*
243 Medical Back Problems	31	2.7	3.4	0.81	3.1	0.88	3.7	0.74
296 Nutritional & Metabolic Disorders Age >17 w CC	21	3.0	3.9	0.77	3.2	0.94	4.1	0.73
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	13	2.6	2.0	1.31	2.0	1.31	2.0	1.31
371 Cesarean Section w/o CC	38	3.4	3.6	0.95	3.3	1.04	3.7	0.92
373 Vaginal Delivery w/o Complicating Diagnosis	103	2.0	2.0	1.01	2.0	1.01	2.1	0.97
390 Neonate w Other Significant Problems	16	2.2	2.6	0.84	2.4	0.91	2.5	0.88
391 Normal Newborn	148	2.1	2.1	0.98	2.0	1.03	2.0	1.03

**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	\$7,078	\$6,174	\$7,601	0.81	\$8,810	0.70	\$8,935	0.69
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$8,371	\$8,030	\$9,136	0.88	\$9,115	0.88	\$10,412	0.77
127 Heart Failure & Shock	\$6,787	\$6,677	\$8,639	0.77	\$8,617	0.77	\$10,503	0.64
143 Chest Pain	\$3,875	\$3,499	\$5,156	0.68	\$4,037	0.87	\$6,214	0.56
174 G.I. Hemorrhage w CC	\$6,763	\$7,000	\$9,199	0.76	\$7,321	0.96	\$10,746	0.65
182 G.I. Disorders Age >17 w CC	\$6,083	\$5,254	\$7,102	0.74	\$6,104	0.86	\$8,548	0.61
183 G.I. Disorders Age >17 w/o CC	\$5,284	\$4,635	\$5,024	0.92	\$4,803	0.96	\$6,351	0.73
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	*	*	\$22,412	*	\$20,450	*	\$25,023	*
243 Medical Back Problems	\$4,854	\$4,263	\$6,501	0.66	\$5,585	0.76	\$7,634	0.56
296 Nutritional & Metabolic Disorders Age >17 w CC	\$5,681	\$5,688	\$7,229	0.79	\$6,581	0.86	\$8,890	0.64
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$9,476	\$9,187	\$8,569	1.07	\$10,322	0.89	\$10,344	0.89
371 Cesarean Section w/o CC	\$6,305	\$6,286	\$7,277	0.86	\$8,915	0.71	\$8,934	0.70
373 Vaginal Delivery w/o Complicating Diagnosis	\$2,801	\$2,703	\$3,482	0.78	\$4,265	0.63	\$4,407	0.61
390 Neonate w Other Significant Problems	\$1,268	\$1,242	\$2,813	0.44	\$2,385	0.52	\$2,468	0.50
391 Normal Newborn	\$971	\$1,023	\$1,527	0.67	\$1,439	0.71	\$1,476	0.69

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.