

110 St Mary's Hospital - Ozaukee
 13111 N Port Washington Rd
 Mequon, WI 53097
 262-243-7300

Hospital Type: GMS
 County: Ozaukee
 Analysis Area: 2A-Southeastern
 Inpatient Volume Group: 5

Overall Hospital Utilization

Total Discharges:	6,754	Average Length of Stay (days):	3.8
Total Patient Days:	25,731	Average Charge per Discharge:	\$11,702

Obstetrical Utilization

Normal Childbirths:	596	Percent of All Childbirths:	75.2%
Cesarean Childbirths:	130	Percent of All Childbirths:	16.4%
Other Childbirths:	67	Percent of All Childbirths:	8.4%
<u>Total Childbirths:</u>	<u>793</u>		
Total Newborns:	800		

Psychiatric Utilization

Discharges:	307	Percent of All Discharges:	4.5%
Patient Days:	1,616	Percent of All Patient Days:	6.3%

AODA Utilization

Discharges:	248	Percent of All Discharges:	3.7%
Patient Days:	809	Percent of All Patient Days:	3.1%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	74.4%
Other GMS Hospital	3.1%
Skilled Nursing Facility	10.6%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	0.0%
Hospice	0.2%
Other Institution	5.7%
Home Health/Home IV Provider	3.5%
Left Against Medical Advice	0.1%
Expired	2.2%
Other	0.0%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	39.1%
Medicaid/BadgerCare	4.4%
Other Government	1.5%
Commercial or Private Insurance	53.2%
Self-Pay	1.9%
Other or Unknown Insurance	0.0%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	11.8%	6.8%
Under 15	0.4%	0.2%
15 - 19	1.4%	0.9%
20 - 24	2.5%	1.8%
25 - 34	11.2%	8.2%
35 - 44	10.9%	8.7%
45 - 54	9.3%	9.5%
55 - 64	9.7%	11.0%
65 - 74	12.7%	15.8%
75 - 84	19.6%	24.2%
85 & Over	10.5%	12.9%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	38.7%	39.2%
Female	61.3%	60.8%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.1%	0.1%
Asian/Pacific Isl.	0.4%	0.4%
Black	2.2%	2.0%
White	91.0%	92.2%
Other	1.4%	1.5%
Unknown	4.9%	3.8%

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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	100	4.6	4.7	0.98	4.3	1.07	4.2	1.10
089 Simple Pneumonia & Pleurisy Age >17 w CC	178	5.1	5.3	0.95	4.7	1.08	4.8	1.05
127 Heart Failure & Shock	226	4.5	4.8	0.94	4.4	1.02	4.4	1.02
143 Chest Pain	108	1.4	1.6	0.90	1.6	0.90	1.5	0.96
174 G.I. Hemorrhage w CC	94	3.6	4.3	0.85	3.8	0.96	3.8	0.96
182 G.I. Disorders Age >17 w CC	117	3.6	4.1	0.87	3.6	0.99	3.6	0.99
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	241	4.6	4.6	1.00	4.1	1.13	4.2	1.10
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	76	2.1	2.0	1.06	2.0	1.06	2.0	1.06
371 Cesarean Section w/o CC	120	3.7	3.5	1.06	3.5	1.06	3.7	1.01
373 Vaginal Delivery w/o Complicating Diagnosis	596	2.2	2.1	1.03	2.0	1.08	2.1	1.03
390 Neonate w Other Significant Problems	86	2.5	2.5	1.00	2.4	1.04	2.5	1.00
391 Normal Newborn	690	2.1	2.0	1.07	2.0	1.07	2.0	1.07
430 Psychoses	208	6.4	6.7	0.95	5.6	1.14	6.3	1.01
462 Rehabilitation	0	N/A	12.4	N/A	11.2	N/A	10.8	N/A
523 Alcohol/Drug Abuse or Dependence w/o Rehab w/o CC	189	2.8	2.7	1.04	2.8	1.00	2.8	1.00

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	\$11,503	\$10,584	\$8,846	1.20	\$8,744	1.21	\$8,935	1.18
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$12,218	\$11,495	\$10,728	1.07	\$10,105	1.14	\$10,412	1.10
127 Heart Failure & Shock	\$11,566	\$11,109	\$10,896	1.02	\$10,195	1.09	\$10,503	1.06
143 Chest Pain	\$7,383	\$7,312	\$6,498	1.13	\$6,350	1.15	\$6,214	1.18
174 G.I. Hemorrhage w CC	\$12,726	\$12,502	\$11,432	1.09	\$10,694	1.17	\$10,746	1.16
182 G.I. Disorders Age >17 w CC	\$10,287	\$9,663	\$9,336	1.04	\$8,524	1.13	\$8,548	1.13
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$25,981	\$26,367	\$29,369	0.90	\$24,105	1.09	\$25,023	1.05
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$10,763	\$11,269	\$11,649	0.97	\$10,121	1.11	\$10,344	1.09
371 Cesarean Section w/o CC	\$9,889	\$9,918	\$9,123	1.09	\$8,196	1.21	\$8,934	1.11
373 Vaginal Delivery w/o Complicating Diagnosis	\$5,994	\$5,745	\$4,903	1.17	\$3,960	1.45	\$4,407	1.30
390 Neonate w Other Significant Problems	\$2,455	\$3,177	\$2,639	1.20	\$2,155	1.47	\$2,468	1.29
391 Normal Newborn	\$1,696	\$1,763	\$1,670	1.06	\$1,361	1.30	\$1,476	1.19
430 Psychoses	\$8,242	#	#		#		#	
462 Rehabilitation	N/A	N/A	\$16,878	N/A	\$15,310	N/A	\$16,900	N/A
523 Alcohol/Drug Abuse or Dependence w/o Rehab w/o CC	\$4,152	#	#		#		#	

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.