

076 Columbia Hospital
2025 E Newport Ave
Milwaukee, WI 53211
414-961-3300

Hospital Type: GMS
 County: Milwaukee
 Analysis Area: 2B-Milwaukee County
 Inpatient Volume Group: 6

Overall Hospital Utilization

Total Discharges:	8,442	Average Length of Stay (days):	4.6
Total Patient Days:	38,612	Average Charge per Discharge:	\$19,074

Obstetrical Utilization

Normal Childbirths:	0	Percent of All Childbirths:	0.0%
Cesarean Childbirths:	0	Percent of All Childbirths:	0.0%
Other Childbirths:	0	Percent of All Childbirths:	0.0%
Total Childbirths:	0		
Total Newborns:	0		

Psychiatric Utilization

Discharges:	616	Percent of All Discharges:	7.3%
Patient Days:	3,265	Percent of All Patient Days:	8.5%

AODA Utilization

Discharges:	88	Percent of All Discharges:	1.0%
Patient Days:	366	Percent of All Patient Days:	0.9%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	65.7%
Other GMS Hospital	0.9%
Skilled Nursing Facility	11.1%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	0.5%
Hospice	0.1%
Other Institution	8.6%
Home Health/Home IV Provider	10.7%
Left Against Medical Advice	0.3%
Expired	2.1%
Other	0.0%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	46.5%
Medicaid/BadgerCare	5.4%
Other Government	0.9%
Commercial or Private Insurance	46.2%
Self-Pay	0.7%
Other or Unknown Insurance	0.2%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	0.0%	0.0%
Under 15	0.1%	0.0%
15 - 19	0.7%	0.5%
20 - 24	1.4%	0.8%
25 - 34	4.4%	2.8%
35 - 44	8.3%	6.0%
45 - 54	13.3%	11.6%
55 - 64	17.1%	16.4%
65 - 74	20.0%	21.9%
75 - 84	22.9%	26.7%
85 & Over	11.9%	13.4%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	41.0%	41.2%
Female	59.0%	58.8%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.2%	0.2%
Asian/Pacific Isl.	0.5%	0.5%
Black	15.9%	16.5%
White	77.0%	76.3%
Other	3.3%	3.2%
Unknown	3.2%	3.4%

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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	81	4.6	4.7	0.98	4.4	1.04	4.2	1.09
089 Simple Pneumonia & Pleurisy Age >17 w CC	132	5.2	5.4	0.95	5.1	1.01	4.8	1.07
127 Heart Failure & Shock	183	5.0	5.2	0.97	4.8	1.05	4.4	1.14
143 Chest Pain	117	1.5	1.8	0.83	1.6	0.93	1.5	1.00
182 G.I. Disorders Age >17 w CC	111	3.7	4.1	0.89	3.8	0.96	3.6	1.02
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	883	3.9	4.3	0.91	4.2	0.94	4.2	0.94
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	140	2.2	2.3	0.95	2.0	1.09	2.0	1.09
371 Cesarean Section w/o CC	0	N/A	4.2	N/A	4.0	N/A	3.7	N/A
372 Vaginal Delivery w Complicating Diagnosis	0	N/A	3.0	N/A	2.9	N/A	2.7	N/A
373 Vaginal Delivery w/o Complicating Diagnosis	0	N/A	2.2	N/A	2.1	N/A	2.1	N/A
390 Neonate w Other Significant Problems	0	N/A	2.6	N/A	2.6	N/A	2.5	N/A
391 Normal Newborn	0	N/A	2.1	N/A	2.1	N/A	2.0	N/A
430 Psychoses	412	5.5	6.4	0.87	6.9	0.80	6.3	0.88
462 Rehabilitation	571	7.4	9.8	0.76	10.6	0.70	10.8	0.69
517 Percutaneous Cardio Procedure w Stent w/o AMI	89	2.5	2.2	1.12	2.0	1.23	2.0	1.23

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	\$11,701	\$10,978	\$11,740	0.94	\$9,399	1.17	\$8,935	1.23
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$13,112	\$11,778	\$14,315	0.82	\$11,362	1.04	\$10,412	1.13
127 Heart Failure & Shock	\$13,319	\$12,452	\$13,935	0.89	\$11,521	1.08	\$10,503	1.19
143 Chest Pain	\$7,880	\$7,253	\$8,318	0.87	\$6,757	1.07	\$6,214	1.17
182 G.I. Disorders Age >17 w CC	\$10,616	\$9,452	\$11,250	0.84	\$9,365	1.01	\$8,548	1.11
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$23,533	\$23,342	\$30,201	0.77	\$25,729	0.91	\$25,023	0.93
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$10,952	\$11,017	\$13,819	0.80	\$10,656	1.03	\$10,344	1.07
371 Cesarean Section w/o CC	N/A	N/A	\$11,852	N/A	\$9,525	N/A	\$8,934	N/A
372 Vaginal Delivery w Complicating Diagnosis	N/A	N/A	\$9,198	N/A	\$7,176	N/A	\$6,254	N/A
373 Vaginal Delivery w/o Complicating Diagnosis	N/A	N/A	\$6,314	N/A	\$4,879	N/A	\$4,407	N/A
390 Neonate w Other Significant Problems	N/A	N/A	\$3,008	N/A	\$2,726	N/A	\$2,468	N/A
391 Normal Newborn	N/A	N/A	\$1,824	N/A	\$1,567	N/A	\$1,476	N/A
430 Psychoses	\$7,609	#	#		#		#	
462 Rehabilitation	\$13,625	\$14,757	\$17,567	0.84	\$17,355	0.85	\$16,900	0.87
517 Percutaneous Cardio Procedure w Stent w/o AMI	\$31,338	\$30,304	\$33,349	0.91	\$27,459	1.10	\$27,329	1.11

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.