

086 St Joseph Regional Medical Center
5000 W Chambers St
Milwaukee, WI 53210
414-447-2000

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

Overall Hospital Utilization

Total Discharges:	19,368	Average Length of Stay (days):	5.2
Total Patient Days:	101,507	Average Charge per Discharge:	\$18,204

Obstetrical Utilization

Normal Childbirths:	2,388	Percent of All Childbirths:	64.6%
Cesarean Childbirths:	924	Percent of All Childbirths:	25.0%
Other Childbirths:	385	Percent of All Childbirths:	10.4%
Total Childbirths:	3,697		
Total Newborns:	3,781		

Psychiatric Utilization

Discharges:	52	Percent of All Discharges:	0.3%
Patient Days:	226	Percent of All Patient Days:	0.2%

AODA Utilization

Discharges:	42	Percent of All Discharges:	0.2%
Patient Days:	151	Percent of All Patient Days:	0.1%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	79.9%
Other GMS Hospital	1.3%
Skilled Nursing Facility	7.8%
Intermediate Care Facility	0.1%
Inpatient Rehabilitation Facility	1.8%
Hospice	0.4%
Other Institution	0.6%
Home Health/Home IV Provider	4.7%
Left Against Medical Advice	0.6%
Expired	2.4%
Other	0.5%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	31.8%
Medicaid/BadgerCare	12.6%
Other Government	2.1%
Commercial or Private Insurance	51.4%
Self-Pay	2.0%
Other or Unknown Insurance	0.2%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	19.5%	20.1%
Under 15	0.8%	1.2%
15 - 19	3.1%	1.9%
20 - 24	5.7%	3.7%
25 - 34	14.8%	9.7%
35 - 44	9.8%	7.4%
45 - 54	8.5%	7.9%
55 - 64	8.4%	9.4%
65 - 74	9.4%	11.9%
75 - 84	12.8%	17.6%
85 & Over	7.1%	9.2%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	33.5%	36.9%
Female	66.5%	63.1%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.2%	0.2%
Asian/Pacific Isl.	1.7%	1.3%
Black	35.4%	33.8%
White	58.1%	60.3%
Other	4.3%	4.1%
Unknown	0.3%	0.4%

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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	206	4.2	4.7	0.89	4.4	0.95	4.2	0.99
089 Simple Pneumonia & Pleurisy Age >17 w CC	246	4.9	5.4	0.90	5.1	0.96	4.8	1.02
127 Heart Failure & Shock	494	5.0	5.2	0.97	4.8	1.05	4.4	1.14
143 Chest Pain	248	1.7	1.8	0.95	1.6	1.07	1.5	1.15
182 G.I. Disorders Age >17 w CC	195	3.7	4.1	0.90	3.8	0.97	3.6	1.02
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	234	5.4	4.3	1.25	4.2	1.28	4.2	1.28
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	285	2.4	2.3	1.04	2.0	1.19	2.0	1.19
371 Cesarean Section w/o CC	664	5.0	4.2	1.19	4.0	1.25	3.7	1.35
372 Vaginal Delivery w Complicating Diagnosis	373	3.7	3.0	1.22	2.9	1.26	2.7	1.35
373 Vaginal Delivery w/o Complicating Diagnosis	2388	2.4	2.2	1.08	2.1	1.13	2.1	1.13
390 Neonate w Other Significant Problems	521	2.8	2.6	1.08	2.6	1.08	2.5	1.12
391 Normal Newborn	2585	2.3	2.1	1.10	2.1	1.10	2.0	1.15
430 Psychoses	9	3.1	6.4	0.49	6.9	0.45	6.3	0.49
462 Rehabilitation	889	13.1	9.8	1.33	10.6	1.23	10.8	1.21
517 Percutaneous Cardio Procedure w Stent w/o AMI	228	2.9	2.2	1.32	2.0	1.45	2.0	1.45

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	\$12,170	\$11,077	\$11,740	0.94	\$9,399	1.18	\$8,935	1.24
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$14,420	\$13,129	\$14,315	0.92	\$11,362	1.16	\$10,412	1.26
127 Heart Failure & Shock	\$15,775	\$14,275	\$13,935	1.02	\$11,521	1.24	\$10,503	1.36
143 Chest Pain	\$9,351	\$8,617	\$8,318	1.04	\$6,757	1.28	\$6,214	1.39
182 G.I. Disorders Age >17 w CC	\$11,734	\$11,006	\$11,250	0.98	\$9,365	1.18	\$8,548	1.29
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$36,080	\$34,763	\$30,201	1.15	\$25,729	1.35	\$25,023	1.39
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$14,726	\$14,470	\$13,819	1.05	\$10,656	1.36	\$10,344	1.40
371 Cesarean Section w/o CC	\$12,515	\$11,815	\$11,852	1.00	\$9,525	1.24	\$8,934	1.32
372 Vaginal Delivery w Complicating Diagnosis	\$12,465	\$11,406	\$9,198	1.24	\$7,176	1.59	\$6,254	1.82
373 Vaginal Delivery w/o Complicating Diagnosis	\$6,275	\$6,141	\$6,314	0.97	\$4,879	1.26	\$4,407	1.39
390 Neonate w Other Significant Problems	\$3,283	\$3,397	\$3,008	1.13	\$2,726	1.25	\$2,468	1.38
391 Normal Newborn	\$2,132	\$2,122	\$1,824	1.16	\$1,567	1.35	\$1,476	1.44
430 Psychoses	\$9,592	#	#		#		#	
462 Rehabilitation	\$23,542	\$20,514	\$17,567	1.17	\$17,355	1.18	\$16,900	1.21
517 Percutaneous Cardio Procedure w Stent w/o AMI	\$42,896	\$41,091	\$33,349	1.23	\$27,459	1.50	\$27,329	1.50

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.