

011 Beloit Memorial Hospital Inc
1969 W Hart Rd
Beloit, WI 53511
608-364-5104

Hospital Type: GMS
County: Rock
Analysis Area: 1-Southern
Inpatient Volume Group: 5

Overall Hospital Utilization

Total Discharges:	5,671	Average Length of Stay (days):	4.1
Total Patient Days:	23,149	Average Charge per Discharge:	\$13,051

Obstetrical Utilization

Normal Childbirths:	506	Percent of All Childbirths:	70.9%
Cesarean Childbirths:	158	Percent of All Childbirths:	22.1%
Other Childbirths:	50	Percent of All Childbirths:	7.0%
Total Childbirths:	714		
Total Newborns:	717		

Psychiatric Utilization

Discharges:	15	Percent of All Discharges:	0.3%
Patient Days:	51	Percent of All Patient Days:	0.2%

AODA Utilization

Discharges:	25	Percent of All Discharges:	0.4%
Patient Days:	103	Percent of All Patient Days:	0.4%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	78.9%
Other GMS Hospital	2.7%
Skilled Nursing Facility	8.0%
Intermediate Care Facility	0.3%
Inpatient Rehabilitation Facility	2.0%
Hospice	0.6%
Other Institution	0.7%
Home Health/Home IV Provider	3.3%
Left Against Medical Advice	0.6%
Expired	2.6%
Other	0.4%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	41.4%
Medicaid/BadgerCare	20.7%
Other Government	0.2%
Commercial or Private Insurance	32.0%
Self-Pay	5.7%
Other or Unknown Insurance	0.1%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	12.6%	6.3%
Under 15	2.7%	1.4%
15 - 19	3.5%	1.9%
20 - 24	5.2%	2.8%
25 - 34	10.3%	6.3%
35 - 44	8.1%	6.5%
45 - 54	9.2%	9.3%
55 - 64	10.5%	12.3%
65 - 74	13.9%	19.4%
75 - 84	15.3%	20.8%
85 & Over	8.7%	13.0%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	39.2%	39.7%
Female	60.8%	60.3%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.1%	0.1%
Asian/Pacific Isl.	0.2%	0.1%
Black	10.7%	10.8%
White	82.3%	84.3%
Other	4.7%	3.3%
Unknown	2.0%	1.4%

011 Beloit Memorial Hospital Inc
Beloit, WI 53511

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
014 Intracranial Hemorrhage & Stroke W Infarction	78	6.9	5.6	1.23	4.7	1.46	4.7	1.46
088 Chronic Obstructive Pulmonary Disease	115	4.8	4.0	1.21	4.2	1.15	4.0	1.21
089 Simple Pneumonia & Pleurisy Age >17 w CC	106	5.8	4.8	1.21	4.7	1.24	4.7	1.24
127 Heart Failure & Shock	158	6.2	4.4	1.41	4.3	1.44	4.3	1.44
143 Chest Pain	107	1.8	1.3	1.37	1.5	1.19	1.5	1.19
182 G.I. Disorders Age >17 w CC	86	4.7	3.5	1.34	3.7	1.27	3.6	1.30
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	117	4.8	3.7	1.30	3.9	1.23	4.0	1.20
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	60	2.7	1.7	1.58	1.9	1.41	1.9	1.41
371 Cesarean Section w/o CC	136	2.9	3.6	0.82	3.4	0.87	3.6	0.82
373 Vaginal Delivery w/o Complicating Diagnosis	506	1.8	2.0	0.90	2.0	0.90	2.1	0.86
390 Neonate w Other Significant Problems	114	2.2	2.5	0.87	2.4	0.91	2.5	0.87
391 Normal Newborn	547	1.9	2.0	0.97	2.0	0.97	2.1	0.93
430 Psychoses	4	*	6.9	*	5.3	*	6.0	*
462 Rehabilitation	128	8.9	13.3	0.67	10.8	0.82	10.9	0.81
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	10	4.1	3.0	1.37	2.9	1.41	2.9	1.41

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
014 Intracranial Hemorrhage & Stroke W Infarction	\$14,450	\$13,080	\$12,873	1.02	\$13,840	0.95	\$13,840	0.95
088 Chronic Obstructive Pulmonary Disease	\$11,679	\$10,000	\$9,054	1.10	\$9,569	1.05	\$9,110	1.10
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$12,973	\$11,406	\$11,047	1.03	\$10,879	1.05	\$10,844	1.05
127 Heart Failure & Shock	\$15,611	\$12,867	\$11,122	1.16	\$11,199	1.15	\$11,341	1.13
143 Chest Pain	\$6,400	\$5,986	\$5,822	1.03	\$6,913	0.87	\$6,644	0.90
182 G.I. Disorders Age >17 w CC	\$11,082	\$9,498	\$8,692	1.09	\$9,462	1.00	\$9,324	1.02
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$30,775	\$29,638	\$25,285	1.17	\$27,134	1.09	\$27,278	1.09
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$10,892	\$10,914	\$10,337	1.06	\$11,260	0.97	\$11,208	0.97
371 Cesarean Section w/o CC	\$10,288	\$9,864	\$9,631	1.02	\$8,800	1.12	\$9,612	1.03
373 Vaginal Delivery w/o Complicating Diagnosis	\$5,664	\$5,676	\$4,518	1.26	\$4,234	1.34	\$4,745	1.20
390 Neonate w Other Significant Problems	\$1,875	\$1,989	\$2,544	0.78	\$2,370	0.84	\$2,790	0.71
391 Normal Newborn	\$1,485	\$1,563	\$1,449	1.08	\$1,511	1.03	\$1,594	0.98
430 Psychoses	*	#	#	*	#	*	#	*
462 Rehabilitation	\$12,753	\$13,674	\$20,810	0.66	\$16,701	0.82	\$18,679	0.73
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	\$9,284	#	#		#		#	

N/A - Zero Discharges reported for DRG

* - 1 through 4 Discharges reported for DRG

^ Risk-Adjusted Charges calculated using Medstat Disease Staging Software® Version 5.22.1 licensed through Thomson Medstat, Inc.

Risk-Adjusted Charges not calculated for DRGs related to Mental Diseases/Disorders and/or Alcohol/Drug Use/Abuse/Dependence.