

**018 Memorial Hospital of Burlington**  
**252 McHenry St**  
**Burlington, WI 53105**  
**262-767-6271**

Hospital Type: GMS  
 County: Racine  
 Analysis Area: 2A-Southeastern  
 Inpatient Volume Group: 4

**Overall Hospital Utilization**

Total Discharges:	3,752	Average Length of Stay (days):	3.6
Total Patient Days:	13,334	Average Charge per Discharge:	\$13,929

**Obstetrical Utilization**

Normal Childbirths:	234	Percent of All Childbirths:	59.5%
Cesarean Childbirths:	97	Percent of All Childbirths:	24.7%
Other Childbirths:	62	Percent of All Childbirths:	15.8%
<b>Total Childbirths:</b>	<b>393</b>		
<b>Total Newborns:</b>	<b>392</b>		

**Psychiatric Utilization**

Discharges:	9	Percent of All Discharges:	0.2%
Patient Days:	28	Percent of All Patient Days:	0.2%

**AODA Utilization**

Discharges:	24	Percent of All Discharges:	0.6%
Patient Days:	54	Percent of All Patient Days:	0.4%

**Patient Discharge Status**

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	71.9%
Other GMS Hospital	5.7%
Skilled Nursing Facility	7.5%
Intermediate Care Facility	0.8%
Inpatient Rehabilitation Facility	3.1%
Hospice	1.2%
Other Institution	0.1%
Home Health/Home IV Provider	7.1%
Left Against Medical Advice	0.5%
Expired	2.1%
Other	0.2%

**Expected Pay Source Distribution**

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	46.1%
Medicaid/BadgerCare	11.4%
Other Government	0.8%
Commercial or Private Insurance	38.7%
Self-Pay	3.0%
Other or Unknown Insurance	0.0%

**Age Distribution**

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	10.4%	6.0%
Under 15	1.9%	1.0%
15 - 19	2.5%	1.5%
20 - 24	4.1%	3.0%
25 - 34	9.7%	6.7%
35 - 44	8.2%	5.8%
45 - 54	9.1%	8.5%
55 - 64	9.9%	10.8%
65 - 74	13.4%	17.4%
75 - 84	20.0%	25.6%
85 & Over	10.7%	13.8%

**Sex Distribution**

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	40.2%	41.3%
Female	59.8%	58.7%

**Race Distribution**

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.0%	0.0%
Asian/Pacific Isl.	0.2%	0.1%
Black	0.5%	0.3%
White	96.9%	97.4%
Other	1.3%	1.3%
Unknown	1.1%	0.8%

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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	65	3.6	4.6	0.77	3.9	0.91	4.0	0.89
089 Simple Pneumonia & Pleurisy Age >17 w CC	99	4.7	4.9	0.96	4.5	1.05	4.7	1.01
127 Heart Failure & Shock	140	4.6	4.6	1.00	4.1	1.12	4.3	1.07
138 Cardiac Arrhythmia & Conduction Dis w CC	52	2.8	3.0	0.95	2.9	0.98	3.1	0.92
143 Chest Pain	82	1.2	1.5	0.80	1.4	0.85	1.5	0.80
174 G.I. Hemorrhage w CC	36	3.6	3.6	1.01	3.5	1.04	3.4	1.07
182 G.I. Disorders Age >17 w CC	76	4.4	4.0	1.10	3.5	1.26	3.6	1.22
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	177	4.5	4.3	1.05	4.0	1.13	4.0	1.13
296 Nutritional & Metabolic Disorders Age >17 w CC	71	4.2	4.2	0.99	3.7	1.13	3.6	1.16
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	93	1.8	1.9	0.96	1.7	1.07	1.9	0.96
371 Cesarean Section w/o CC	91	3.4	3.5	0.98	3.1	1.10	3.6	0.95
373 Vaginal Delivery w/o Complicating Diagnosis	234	1.8	2.1	0.86	1.9	0.95	2.1	0.86
390 Neonate w Other Significant Problems	18	2.4	2.4	1.00	2.3	1.04	2.5	0.96
391 Normal Newborn	349	2.0	2.0	1.01	2.0	1.01	2.1	0.96
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	11	1.1	2.3	0.47	3.0	0.36	2.9	0.38

**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	\$9,928	\$9,749	\$9,972	0.98	\$9,018	1.08	\$9,110	1.07
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$13,059	\$12,241	\$10,500	1.17	\$10,282	1.19	\$10,844	1.13
127 Heart Failure & Shock	\$14,111	\$13,620	\$11,625	1.17	\$10,750	1.27	\$11,341	1.20
138 Cardiac Arrhythmia & Conduction Dis w CC	\$10,606	\$10,321	\$10,222	1.01	\$9,090	1.14	\$8,423	1.23
143 Chest Pain	\$6,962	\$6,989	\$7,011	1.00	\$6,475	1.08	\$6,644	1.05
174 G.I. Hemorrhage w CC	\$13,675	\$13,395	\$12,238	1.09	\$10,926	1.23	\$10,197	1.31
182 G.I. Disorders Age >17 w CC	\$12,100	\$10,778	\$10,138	1.06	\$8,648	1.25	\$9,324	1.16
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$40,659	\$40,711	\$31,607	1.29	\$26,721	1.52	\$27,278	1.49
296 Nutritional & Metabolic Disorders Age >17 w CC	\$10,807	\$10,621	\$10,801	0.98	\$8,331	1.27	\$7,794	1.36
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$12,282	\$12,596	\$12,830	0.98	\$10,542	1.19	\$11,208	1.12
371 Cesarean Section w/o CC	\$11,668	\$12,137	\$10,024	1.21	\$8,824	1.38	\$9,612	1.26
373 Vaginal Delivery w/o Complicating Diagnosis	\$4,816	\$4,829	\$5,264	0.92	\$3,937	1.23	\$4,745	1.02
390 Neonate w Other Significant Problems	\$2,780	\$2,506	\$2,508	1.00	\$2,183	1.15	\$2,790	0.90
391 Normal Newborn	\$2,154	\$2,074	\$1,812	1.14	\$1,497	1.38	\$1,594	1.30
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	\$4,191	#	#		#		#	

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.