

**075 Children's Hospital of Wisconsin**  
**9000 W Wisconsin Ave**  
**Milwaukee, WI 53201**  
**414-266-2000**

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

**Overall Hospital Utilization**

Total Discharges:	12,198	Average Length of Stay (days):	5.2
Total Patient Days:	63,252	Average Charge per Discharge:	\$26,395

**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:	2		

**Psychiatric Utilization**

Discharges:	52	Percent of All Discharges:	0.4%
Patient Days:	177	Percent of All Patient Days:	0.3%

**AODA Utilization**

Discharges:	5	Percent of All Discharges:	0.0%
Patient Days:	8	Percent of All Patient Days:	0.0%

**Patient Discharge Status**

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	83.6%
Other GMS Hospital	1.2%
Skilled Nursing Facility	0.1%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	0.0%
Hospice	0.0%
Other Institution	0.6%
Home Health/Home IV Provider	13.7%
Left Against Medical Advice	0.1%
Expired	0.7%
Other	0.0%

**Expected Pay Source Distribution**

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	0.3%
Medicaid/BadgerCare	42.4%
Other Government	1.0%
Commercial or Private Insurance	55.4%
Self-Pay	0.9%
Other or Unknown Insurance	0.1%

**Age Distribution**

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	0.0%	0.1%
Under 15	85.8%	86.4%
15 - 19	12.9%	12.3%
20 - 24	1.0%	0.9%
25 - 34	0.3%	0.3%
35 - 44	0.0%	0.0%
45 - 54	0.0%	0.0%
55 - 64	0.0%	0.0%
65 - 74	0.0%	0.0%
75 - 84	0.0%	0.0%
85 & Over	0.0%	0.0%

**Sex Distribution**

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	55.4%	55.0%
Female	44.6%	45.0%

**Race Distribution**

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.6%	0.9%
Asian/Pacific Isl.	0.0%	0.0%
Black	26.5%	24.4%
White	56.6%	57.3%
Other	16.3%	17.4%
Unknown	0.0%	0.0%

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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
089 Simple Pneumonia & Pleurisy Age >17 w CC	9	5.4	5.3	1.03	4.9	1.11	4.7	1.16
125 Circulatory Disorders Except AMI, W Cardiac Cath W/O Compl	8	3.1	2.0	1.56	1.9	1.64	1.9	1.64
127 Heart Failure & Shock	12	3.7	4.8	0.76	4.6	0.80	4.3	0.85
143 Chest Pain	7	2.0	1.7	1.18	1.5	1.33	1.5	1.33
182 G.I. Disorders Age >17 w CC	22	6.3	4.0	1.57	3.8	1.65	3.6	1.74
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	4	*	4.2	*	4.0	*	4.0	*
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	10	3.2	2.2	1.45	1.9	1.68	1.9	1.68
371 Cesarean Section w/o CC	0	N/A	4.1	N/A	4.0	N/A	3.6	N/A
372 Vaginal Delivery w Complicating Diagnosis	0	N/A	2.8	N/A	2.8	N/A	2.8	N/A
373 Vaginal Delivery w/o Complicating Diagnosis	0	N/A	2.2	N/A	2.2	N/A	2.1	N/A
390 Neonate w Other Significant Problems	153	2.8	2.7	1.02	2.7	1.02	2.5	1.11
391 Normal Newborn	78	1.5	2.1	0.73	2.1	0.73	2.1	0.73
430 Psychoses	5	2.0	4.8	0.42	6.8	0.29	6.0	0.33
462 Rehabilitation	3	*	10.1	*	10.9	*	10.9	*
527 Percutaneous Cardiovascular Proc W Drug-Eluting Stent W/O	0	N/A	1.9	N/A	1.8	N/A	1.8	N/A

**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	
		Average Charge	Average Charge	Average Charge	Ratio	Average Charge	Ratio	Average Charge
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$23,869	\$25,789	\$14,255	1.81	\$11,680	2.21	\$10,844	2.38
125 Circulatory Disorders Except AMI, W Cardiac Cath W/O Con	\$24,299	\$19,479	\$15,996	1.22	\$13,456	1.45	\$13,456	1.45
127 Heart Failure & Shock	\$14,447	\$19,299	\$14,741	1.31	\$12,418	1.55	\$11,341	1.70
143 Chest Pain	\$7,748	\$8,515	\$8,461	1.01	\$7,194	1.18	\$6,644	1.28
182 G.I. Disorders Age >17 w CC	\$30,941	\$30,897	\$11,833	2.61	\$10,176	3.04	\$9,324	3.31
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	*	*	\$33,555	*	\$27,894	*	\$27,278	*
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$18,038	\$19,008	\$14,386	1.32	\$11,432	1.66	\$11,208	1.70
371 Cesarean Section w/o CC	N/A	N/A	\$12,256	N/A	\$10,292	N/A	\$9,612	N/A
372 Vaginal Delivery w Complicating Diagnosis	N/A	N/A	\$9,907	N/A	\$7,778	N/A	\$7,778	N/A
373 Vaginal Delivery w/o Complicating Diagnosis	N/A	N/A	\$6,726	N/A	\$5,337	N/A	\$4,745	N/A
390 Neonate w Other Significant Problems	\$8,521	\$5,920	\$3,511	1.69	\$3,099	1.91	\$2,790	2.12
391 Normal Newborn	\$3,982	\$2,405	\$1,947	1.24	\$1,686	1.43	\$1,594	1.51
430 Psychoses	\$18,604	#	#	#	#	#	#	#
462 Rehabilitation	*	*	\$19,706	*	\$19,383	*	\$18,679	*
527 Percutaneous Cardiovascular Proc W Drug-Eluting Stent W/	N/A	N/A	\$40,262	N/A	\$33,435	N/A	\$33,435	N/A

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.