

079 Froedtert Memorial Lutheran Hospital
9200 W Wisconsin Ave
Milwaukee, WI 53226
414-805-3000

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

Overall Hospital Utilization

Total Discharges:	23,817	Average Length of Stay (days):	5.2
Total Patient Days:	123,497	Average Charge per Discharge:	\$23,083

Obstetrical Utilization

Normal Childbirths:	828	Percent of All Childbirths:	60.0%
Cesarean Childbirths:	343	Percent of All Childbirths:	24.9%
Other Childbirths:	209	Percent of All Childbirths:	15.1%
Total Childbirths:	1,380		
Total Newborns:	1,393		

Psychiatric Utilization

Discharges:	124	Percent of All Discharges:	0.5%
Patient Days:	365	Percent of All Patient Days:	0.3%

AODA Utilization

Discharges:	129	Percent of All Discharges:	0.5%
Patient Days:	494	Percent of All Patient Days:	0.4%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	71.5%
Other GMS Hospital	0.8%
Skilled Nursing Facility	6.3%
Intermediate Care Facility	0.1%
Inpatient Rehabilitation Facility	2.7%
Hospice	1.1%
Other Institution	2.4%
Home Health/Home IV Provider	11.5%
Left Against Medical Advice	0.7%
Expired	2.4%
Other	0.5%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	33.8%
Medicaid/BadgerCare	16.5%
Other Government	1.6%
Commercial or Private Insurance	43.6%
Self-Pay	3.1%
Other or Unknown Insurance	1.3%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	5.8%	2.8%
Under 15	0.2%	0.2%
15 - 19	2.2%	2.0%
20 - 24	5.2%	4.6%
25 - 34	12.0%	10.5%
35 - 44	15.1%	14.3%
45 - 54	17.7%	18.3%
55 - 64	15.7%	17.6%
65 - 74	12.6%	14.4%
75 - 84	9.7%	11.3%
85 & Over	3.8%	3.9%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	46.6%	51.1%
Female	53.4%	48.9%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.3%	0.2%
Asian/Pacific Isl.	1.0%	1.0%
Black	23.9%	22.3%
White	69.2%	71.0%
Other	4.9%	4.7%
Unknown	0.6%	0.7%

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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	336	4.4	5.3	0.83	4.9	0.90	4.7	0.94
125 Circulatory Disorders Except AMI, W Cardiac Cath W/O Compl	162	2.3	2.0	1.13	1.9	1.19	1.9	1.19
127 Heart Failure & Shock	398	4.3	4.8	0.90	4.6	0.93	4.3	1.00
143 Chest Pain	320	1.7	1.7	0.99	1.5	1.13	1.5	1.13
182 G.I. Disorders Age >17 w CC	467	3.3	4.0	0.83	3.8	0.87	3.6	0.92
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	493	4.5	4.2	1.07	4.0	1.13	4.0	1.13
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	103	2.3	2.2	1.03	1.9	1.19	1.9	1.19
371 Cesarean Section w/o CC	244	4.4	4.1	1.08	4.0	1.10	3.6	1.23
372 Vaginal Delivery w Complicating Diagnosis	156	3.1	2.8	1.10	2.8	1.10	2.8	1.10
373 Vaginal Delivery w/o Complicating Diagnosis	828	2.5	2.2	1.15	2.2	1.15	2.1	1.21
390 Neonate w Other Significant Problems	401	2.7	2.7	1.01	2.7	1.01	2.5	1.09
391 Normal Newborn	710	2.2	2.1	1.05	2.1	1.05	2.1	1.05
430 Psychoses	23	2.7	4.8	0.56	6.8	0.40	6.0	0.45
462 Rehabilitation	603	14.7	10.1	1.45	10.9	1.35	10.9	1.35
527 Percutaneous Cardiovascular Proc W Drug-Eluting Stent W/O	160	2.3	1.9	1.20	1.8	1.27	1.8	1.27

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	\$12,894	\$11,228	\$14,255	0.79	\$11,680	0.96	\$10,844	1.04
125 Circulatory Disorders Except AMI, W Cardiac Cath W/O Con	\$14,457	\$12,592	\$15,996	0.79	\$13,456	0.94	\$13,456	0.94
127 Heart Failure & Shock	\$12,727	\$11,350	\$14,741	0.77	\$12,418	0.91	\$11,341	1.00
143 Chest Pain	\$7,676	\$6,691	\$8,461	0.79	\$7,194	0.93	\$6,644	1.01
182 G.I. Disorders Age >17 w CC	\$9,397	\$8,755	\$11,833	0.74	\$10,176	0.86	\$9,324	0.94
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$39,974	\$37,091	\$33,555	1.11	\$27,894	1.33	\$27,278	1.36
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$15,492	\$15,114	\$14,386	1.05	\$11,432	1.32	\$11,208	1.35
371 Cesarean Section w/o CC	\$9,413	\$8,936	\$12,256	0.73	\$10,292	0.87	\$9,612	0.93
372 Vaginal Delivery w Complicating Diagnosis	\$7,521	\$6,878	\$9,907	0.69	\$7,778	0.88	\$7,778	0.88
373 Vaginal Delivery w/o Complicating Diagnosis	\$5,393	\$5,158	\$6,726	0.77	\$5,337	0.97	\$4,745	1.09
390 Neonate w Other Significant Problems	\$2,417	\$2,274	\$3,511	0.65	\$3,099	0.73	\$2,790	0.81
391 Normal Newborn	\$1,763	\$1,618	\$1,947	0.83	\$1,686	0.96	\$1,594	1.02
430 Psychoses	\$8,447	#	#		#		#	
462 Rehabilitation	\$28,762	\$25,791	\$19,706	1.31	\$19,383	1.33	\$18,679	1.38
527 Percutaneous Cardiovascular Proc W Drug-Eluting Stent W/	\$31,307	\$31,390	\$40,262	0.78	\$33,435	0.94	\$33,435	0.94

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.