

178 Holy Family Memorial Medical Center
 2300 Western Ave
 Manitowoc, WI 54220
 920-686-3470

Hospital Type: GMS
 County: Manitowoc
 Analysis Area: 4-Northeastern
 Inpatient Volume Group: 5

Overall Hospital Utilization

Total Discharges:	5,279	Average Length of Stay (days):	3.7
Total Patient Days:	19,388	Average Charge per Discharge:	\$12,813

Obstetrical Utilization

Normal Childbirths:	266	Percent of All Childbirths:	63.9%
Cesarean Childbirths:	106	Percent of All Childbirths:	25.5%
Other Childbirths:	44	Percent of All Childbirths:	10.6%
Total Childbirths:	416		
Total Newborns:	415		

Psychiatric Utilization

Discharges:	394	Percent of All Discharges:	7.5%
Patient Days:	1,696	Percent of All Patient Days:	8.7%

AODA Utilization

Discharges:	305	Percent of All Discharges:	5.8%
Patient Days:	773	Percent of All Patient Days:	4.0%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	70.8%
Other GMS Hospital	2.8%
Skilled Nursing Facility	10.3%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	3.2%
Hospice	0.5%
Other Institution	1.4%
Home Health/Home IV Provider	8.1%
Left Against Medical Advice	0.7%
Expired	2.0%
Other	0.3%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	49.9%
Medicaid/BadgerCare	10.5%
Other Government	0.8%
Commercial or Private Insurance	36.1%
Self-Pay	2.7%
Other or Unknown Insurance	0.0%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	7.9%	4.7%
Under 15	2.4%	1.7%
15 - 19	2.6%	1.8%
20 - 24	4.4%	2.8%
25 - 34	8.9%	6.4%
35 - 44	9.2%	7.8%
45 - 54	10.3%	9.8%
55 - 64	8.8%	9.1%
65 - 74	14.1%	15.9%
75 - 84	19.6%	24.7%
85 & Over	11.7%	15.4%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	41.2%	40.5%
Female	58.8%	59.5%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.0%	0.0%
Asian/Pacific Isl.	1.4%	0.9%
Black	0.3%	0.2%
White	96.7%	98.1%
Other	1.3%	0.7%
Unknown	0.2%	0.1%

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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
014 Intracranial Hemorrhage & Stroke W Infarction	51	4.7	3.8	1.23	4.7	1.00	4.7	1.00
088 Chronic Obstructive Pulmonary Disease	78	3.8	3.8	1.01	4.2	0.92	4.0	0.96
089 Simple Pneumonia & Pleurisy Age >17 w CC	123	4.4	4.5	0.97	4.7	0.93	4.7	0.93
127 Heart Failure & Shock	156	4.6	4.1	1.11	4.3	1.06	4.3	1.06
143 Chest Pain	106	1.7	1.5	1.12	1.5	1.12	1.5	1.12
182 G.I. Disorders Age >17 w CC	110	3.3	3.2	1.03	3.7	0.89	3.6	0.91
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	161	4.2	3.7	1.14	3.9	1.08	4.0	1.06
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	52	2.2	1.8	1.23	1.9	1.16	1.9	1.16
371 Cesarean Section w/o CC	65	3.8	3.8	0.99	3.4	1.10	3.6	1.04
373 Vaginal Delivery w/o Complicating Diagnosis	266	2.1	2.1	0.98	2.0	1.03	2.1	0.98
390 Neonate w Other Significant Problems	71	2.2	2.4	0.90	2.4	0.90	2.5	0.86
391 Normal Newborn	307	2.2	2.1	1.04	2.0	1.10	2.1	1.04
430 Psychoses	310	4.6	5.4	0.85	5.3	0.86	6.0	0.76
462 Rehabilitation	189	8.7	9.7	0.89	10.8	0.80	10.9	0.79
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	228	2.3	2.8	0.83	2.9	0.80	2.9	0.80

DRG Specific Data - Average Charge per Discharge (Actual & Risk-Adjusted^)

DRG # and Description	This Facility		Risk Adjusted Group Averages					
	Average Charge	Risk Adjusted	Analysis Area		Inpatient Volume Group		All GMS Hospitals	
		Average Charge	Average Charge	Average Charge	Ratio	Average Charge	Ratio	Average Charge
014 Intracranial Hemorrhage & Stroke W Infarction	\$13,366	\$13,951	\$11,760	1.19	\$13,840	1.01	\$13,840	1.01
088 Chronic Obstructive Pulmonary Disease	\$10,408	\$10,254	\$9,591	1.07	\$9,569	1.07	\$9,110	1.13
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$12,109	\$11,713	\$10,777	1.09	\$10,879	1.08	\$10,844	1.08
127 Heart Failure & Shock	\$13,263	\$13,058	\$10,632	1.23	\$11,199	1.17	\$11,341	1.15
143 Chest Pain	\$8,528	\$8,134	\$6,309	1.29	\$6,913	1.18	\$6,644	1.22
182 G.I. Disorders Age >17 w CC	\$8,658	\$9,809	\$8,420	1.16	\$9,462	1.04	\$9,324	1.05
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$36,179	\$36,343	\$27,028	1.34	\$27,134	1.34	\$27,278	1.33
359 Uterine/Adnexa Proc for Non-Malignancy w/o CC	\$15,539	\$15,548	\$9,271	1.68	\$11,260	1.38	\$11,208	1.39
371 Cesarean Section w/o CC	\$11,704	\$11,366	\$8,045	1.41	\$8,800	1.29	\$9,612	1.18
373 Vaginal Delivery w/o Complicating Diagnosis	\$4,235	\$4,079	\$3,397	1.20	\$4,234	0.96	\$4,745	0.86
390 Neonate w Other Significant Problems	\$1,901	\$2,185	\$2,103	1.04	\$2,370	0.92	\$2,790	0.78
391 Normal Newborn	\$1,523	\$1,475	\$1,369	1.08	\$1,511	0.98	\$1,594	0.93
430 Psychoses	\$7,076	#	#		#		#	
462 Rehabilitation	\$13,730	\$14,521	\$15,402	0.94	\$16,701	0.87	\$18,679	0.78
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	\$3,805	#	#		#		#	

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.