

011 Beloit Memorial Hospital Inc
1969 W Hart Rd
Beloit, WI 53511
608-324-5011

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

Overall Hospital Utilization

Total Discharges:	5,448	Average Length of Stay (days):	4.0
Total Patient Days:	21,642	Average Charge per Discharge:	\$13,746

Obstetrical Utilization

Normal Childbirths:	442	Percent of All Childbirths:	64.2%
Cesarean Childbirths:	181	Percent of All Childbirths:	26.3%
Other Childbirths:	65	Percent of All Childbirths:	9.4%
Total Childbirths:	688		
Total Newborns:	695		

Psychiatric Utilization

Discharges:	17	Percent of All Discharges:	0.3%
Patient Days:	82	Percent of All Patient Days:	0.4%

AODA Utilization

Discharges:	19	Percent of All Discharges:	0.3%
Patient Days:	108	Percent of All Patient Days:	0.5%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	80.8%
Other GMS Hospital	2.5%
Skilled Nursing Facility	8.4%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	1.5%
Hospice	1.0%
Other Institution	0.3%
Home Health/Home IV Provider	2.3%
Left Against Medical Advice	0.4%
Expired	2.3%
Other	0.4%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	42.3%
Medicaid/BadgerCare	20.0%
Other Government	0.3%
Commercial or Private Insurance	30.0%
Self-Pay	7.1%
Other or Unknown Insurance	0.2%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	12.8%	6.7%
Under 15	2.8%	1.8%
15 - 19	3.0%	1.8%
20 - 24	5.2%	2.9%
25 - 34	9.2%	5.4%
35 - 44	6.4%	5.1%
45 - 54	10.5%	10.2%
55 - 64	10.9%	12.4%
65 - 74	14.9%	19.4%
75 - 84	15.7%	21.9%
85 & Over	8.5%	12.4%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	39.6%	39.9%
Female	60.4%	60.1%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.2%	0.1%
Asian/Pacific Isl.	0.5%	0.4%
Black	11.2%	11.3%
White	82.0%	84.6%
Other	4.7%	2.7%
Unknown	1.4%	0.9%
Not Asked	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
014 Intracranial Hemorrhage or Cerebral Infarction	69	5.7	4.8	1.18	4.7	1.21	4.7	1.21
088 Chronic Obstructive Pulmonary Disease	138	4.9	4.2	1.16	4.2	1.16	4.0	1.22
089 Simple Pneumonia & Pleurisy Age >17 w CC	155	5.9	4.6	1.28	4.7	1.25	4.5	1.31
127 Heart Failure & Shock	164	5.8	4.4	1.31	4.4	1.31	4.2	1.37
143 Chest Pain	88	1.8	1.4	1.25	1.5	1.17	1.5	1.17
182 G.I. Disorders Age >17 w CC	83	4.8	3.5	1.37	3.8	1.26	3.6	1.33
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	153	4.3	3.7	1.17	3.9	1.11	3.8	1.14
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	66	2.3	1.7	1.34	1.9	1.20	1.8	1.26
371 Cesarean Section w/o CC	148	2.9	3.5	0.82	3.3	0.87	3.5	0.82
373 Vaginal Delivery w/o Complicating Diagnosis	442	1.8	2.0	0.90	2.0	0.90	2.1	0.86
390 Neonate w Other Significant Problems	116	2.2	2.4	0.91	2.4	0.91	2.5	0.87
391 Normal Newborn	535	2.0	2.0	1.00	2.1	0.95	2.0	1.00
430 Psychoses	6	4.5	6.7	0.67	4.9	0.92	5.9	0.76
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	2	*	2.8	*	2.8	*	2.7	*
527 Percut Cardio Proc w Drug-Eluting Stent w/o AMI	89	1.8	1.7	1.05	1.8	0.99	1.7	1.05

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 or Cerebral Infarction	\$16,324	\$15,313	\$16,496	0.93	\$16,389	0.93	\$15,701	0.98
088 Chronic Obstructive Pulmonary Disease	\$11,902	\$10,567	\$10,059	1.05	\$10,350	1.02	\$9,667	1.09
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$13,844	\$11,300	\$10,753	1.05	\$11,221	1.01	\$10,282	1.10
127 Heart Failure & Shock	\$15,567	\$14,317	\$11,586	1.24	\$12,339	1.16	\$11,165	1.28
143 Chest Pain	\$6,051	\$5,605	\$6,115	0.92	\$7,660	0.73	\$6,968	0.80
182 G.I. Disorders Age >17 w CC	\$10,783	\$10,730	\$9,622	1.12	\$11,100	0.97	\$9,826	1.09
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$34,352	\$34,638	\$26,601	1.30	\$29,917	1.16	\$28,681	1.21
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	\$11,624	\$11,792	\$11,314	1.04	\$12,090	0.98	\$12,111	0.97
371 Cesarean Section w/o CC	\$10,443	\$10,128	\$10,425	0.97	\$9,434	1.07	\$10,099	1.00
373 Vaginal Delivery w/o Complicating Diagnosis	\$5,922	\$5,937	\$4,873	1.22	\$4,659	1.27	\$5,075	1.17
390 Neonate w Other Significant Problems	\$2,042	\$2,036	\$2,731	0.75	\$2,588	0.79	\$3,015	0.68
391 Normal Newborn	\$1,635	\$1,672	\$1,576	1.06	\$1,489	1.12	\$1,702	0.98
430 Psychoses	\$8,009	#	#	#	#	#	#	#
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	*	#	#	*	#	*	#	*
527 Percut Cardio Proc w Drug-Eluting Stent w/o AMI	\$28,500	\$31,651	\$28,709	1.10	\$35,716	0.89	\$34,759	0.91

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.