

032 Aurora Lakeland Medical Center
W3985 Cty Rd NN
Elkhorn, WI 53121
262-741-2000

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

Overall Hospital Utilization

Total Discharges:	5,628	Average Length of Stay (days):	3.3
Total Patient Days:	18,413	Average Charge per Discharge:	\$11,233

Obstetrical Utilization

Normal Childbirths:	446	Percent of All Childbirths:	60.4%
Cesarean Childbirths:	196	Percent of All Childbirths:	26.5%
Other Childbirths:	97	Percent of All Childbirths:	13.1%
Total Childbirths:	739		
Total Newborns:	745		

Psychiatric Utilization

Discharges:	41	Percent of All Discharges:	0.7%
Patient Days:	117	Percent of All Patient Days:	0.6%

AODA Utilization

Discharges:	46	Percent of All Discharges:	0.8%
Patient Days:	143	Percent of All Patient Days:	0.8%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	73.0%
Other GMS Hospital	6.7%
Skilled Nursing Facility	7.9%
Intermediate Care Facility	1.8%
Inpatient Rehabilitation Facility	2.6%
Hospice	0.9%
Other Institution	0.2%
Home Health/Home IV Provider	4.8%
Left Against Medical Advice	0.4%
Expired	1.1%
Other	0.6%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	43.7%
Medicaid/BadgerCare	16.2%
Other Government	1.1%
Commercial or Private Insurance	35.1%
Self-Pay	3.8%
Other or Unknown Insurance	0.0%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	13.2%	7.7%
Under 15	1.5%	0.8%
15 - 19	2.3%	1.4%
20 - 24	5.7%	3.2%
25 - 34	11.1%	7.0%
35 - 44	8.2%	5.7%
45 - 54	8.7%	7.9%
55 - 64	8.3%	8.8%
65 - 74	11.2%	14.0%
75 - 84	17.9%	25.1%
85 & Over	11.8%	18.4%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	36.2%	36.6%
Female	63.8%	63.4%

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	0.8%	0.8%
White	90.4%	93.3%
Other	7.5%	4.9%
Unknown	1.1%	1.0%
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
088 Chronic Obstructive Pulmonary Disease	106	4.3	4.3	1.00	4.0	1.07	4.0	1.07
089 Simple Pneumonia & Pleurisy Age >17 w CC	183	4.7	5.0	0.94	4.3	1.09	4.5	1.04
127 Heart Failure & Shock	142	3.9	4.8	0.82	3.9	1.00	4.2	0.93
138 Cardiac Arrhythmia & Conduction Dis w CC	68	2.8	2.9	0.95	2.9	0.95	2.9	0.95
143 Chest Pain	159	1.3	1.4	0.93	1.4	0.93	1.5	0.86
174 G.I. Hemorrhage w CC	88	3.5	3.8	0.92	3.5	0.99	3.3	1.05
182 G.I. Disorders Age >17 w CC	102	3.4	4.0	0.85	3.4	1.00	3.6	0.94
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	82	4.9	4.1	1.19	3.9	1.25	3.8	1.28
296 Nutritional & Metabolic Disorders Age >17 w CC	74	4.3	3.9	1.11	3.5	1.23	3.5	1.23
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	111	1.5	1.8	0.86	1.6	0.96	1.8	0.86
371 Cesarean Section w/o CC	154	3.0	3.4	0.87	3.0	0.99	3.5	0.85
373 Vaginal Delivery w/o Complicating Diagnosis	446	1.8	2.1	0.84	1.9	0.93	2.1	0.84
390 Neonate w Other Significant Problems	108	2.0	2.5	0.81	2.2	0.93	2.5	0.81
391 Normal Newborn	604	1.8	2.0	0.91	2.0	0.91	2.0	0.91
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	21	2.4	2.3	1.04	2.5	0.95	2.7	0.88

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
088 Chronic Obstructive Pulmonary Disease	\$12,572	\$11,090	\$9,580	1.16	\$9,867	1.12	\$9,667	1.15
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$13,631	\$11,882	\$10,470	1.13	\$10,285	1.16	\$10,282	1.16
127 Heart Failure & Shock	\$12,491	\$11,568	\$11,541	1.00	\$10,956	1.06	\$11,165	1.04
138 Cardiac Arrhythmia & Conduction Dis w CC	\$9,931	\$10,250	\$10,712	0.96	\$9,769	1.05	\$9,321	1.10
143 Chest Pain	\$7,944	\$8,106	\$7,651	1.06	\$7,274	1.11	\$6,968	1.16
174 G.I. Hemorrhage w CC	\$12,381	\$11,253	\$11,908	0.95	\$11,082	1.02	\$10,180	1.11
182 G.I. Disorders Age >17 w CC	\$10,722	\$10,215	\$10,723	0.95	\$9,809	1.04	\$9,826	1.04
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$40,380	\$39,426	\$32,905	1.20	\$28,059	1.41	\$28,681	1.37
296 Nutritional & Metabolic Disorders Age >17 w CC	\$11,920	\$10,137	\$10,567	0.96	\$8,471	1.20	\$7,870	1.29
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	\$13,604	\$14,279	\$14,680	0.97	\$12,261	1.16	\$12,111	1.18
371 Cesarean Section w/o CC	\$10,440	\$10,479	\$10,555	0.99	\$9,560	1.10	\$10,099	1.04
373 Vaginal Delivery w/o Complicating Diagnosis	\$4,517	\$4,387	\$5,781	0.76	\$4,240	1.03	\$5,075	0.86
390 Neonate w Other Significant Problems	\$2,240	\$2,448	\$2,913	0.84	\$2,346	1.04	\$3,015	0.81
391 Normal Newborn	\$1,995	\$1,892	\$1,852	1.02	\$1,665	1.14	\$1,702	1.11
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	\$5,418	#	#	#	#	#	#	#

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.