

003 Appleton Medical Center
1818 N Meade St
Appleton, WI 54911
920-731-4101

Hospital Type: **GMS**
County: **Outagamie**
Analysis Area: **3-Lake Winnebago**
Inpatient Volume Group: **6**

Overall Hospital Utilization

Total Discharges:	8,874	Average Length of Stay (days):	3.9
Total Patient Days:	34,457	Average Charge per Discharge:	\$14,727

Obstetrical Utilization

Normal Childbirths:	743	Percent of All Childbirths:	71.0%
Cesarean Childbirths:	222	Percent of All Childbirths:	21.2%
Other Childbirths:	81	Percent of All Childbirths:	7.7%
Total Childbirths:	1,046		
Total Newborns:	1,052		

Psychiatric Utilization

Discharges:	13	Percent of All Discharges:	0.1%
Patient Days:	45	Percent of All Patient Days:	0.1%

AODA Utilization

Discharges:	17	Percent of All Discharges:	0.2%
Patient Days:	55	Percent of All Patient Days:	0.2%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	74.0%
Other GMS Hospital	0.8%
Skilled Nursing Facility	12.5%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	0.5%
Hospice	2.4%
Other Institution	0.4%
Home Health/Home IV Provider	6.1%
Left Against Medical Advice	0.2%
Expired	2.1%
Other	0.9%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	43.2%
Medicaid/BadgerCare	6.6%
Other Government	0.2%
Commercial or Private Insurance	47.6%
Self-Pay	2.0%
Other or Unknown Insurance	0.5%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	11.9%	6.5%
Under 15	0.4%	0.2%
15 - 19	1.4%	0.9%
20 - 24	3.0%	2.1%
25 - 34	9.7%	6.2%
35 - 44	6.5%	5.9%
45 - 54	8.5%	8.7%
55 - 64	14.3%	17.5%
65 - 74	17.2%	21.2%
75 - 84	18.6%	22.1%
85 & Over	8.5%	8.6%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	44.3%	47.5%
Female	55.7%	52.5%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.8%	0.9%
Asian/Pacific Isl.	1.3%	0.9%
Black	0.4%	0.4%
White	95.2%	96.4%
Other	0.8%	0.6%
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	99	3.2	3.7	0.87	5.0	0.65	4.7	0.69
088 Chronic Obstructive Pulmonary Disease	95	4.4	3.7	1.18	4.1	1.06	4.0	1.09
089 Simple Pneumonia & Pleurisy Age >17 w CC	239	4.2	4.1	1.03	4.7	0.90	4.5	0.94
127 Heart Failure & Shock	193	3.8	3.7	1.03	4.4	0.87	4.2	0.91
143 Chest Pain	24	1.9	1.4	1.37	1.5	1.28	1.5	1.28
182 G.I. Disorders Age >17 w CC	111	3.8	3.5	1.10	3.6	1.07	3.6	1.07
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	537	3.6	3.7	0.96	3.9	0.91	3.8	0.94
371 Cesarean Section w/o CC	191	3.2	3.3	0.96	3.9	0.82	3.5	0.91
372 Vaginal Delivery w Complicating Diagnosis	66	2.1	2.0	1.05	2.9	0.73	2.8	0.75
373 Vaginal Delivery w/o Complicating Diagnosis	743	1.9	2.0	0.96	2.2	0.87	2.1	0.91
390 Neonate w Other Significant Problems	161	2.4	2.4	0.99	2.6	0.91	2.5	0.95
391 Normal Newborn	831	2.0	2.1	0.98	2.1	0.98	2.0	1.02
430 Psychoses	3	*	4.9	*	6.8	*	5.9	*
462 Rehabilitation	0	N/A	N/A	N/A	11.3	N/A	11.3	N/A
527 Percut Cardio Proc w Drug-Eluting Stent w/o AMI	78	1.7	1.4	1.25	1.7	1.03	1.7	1.03

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
014 Intracranial Hemorrhage or Cerebral Infarction	\$10,449	\$9,578	\$10,934	0.88	\$17,162	0.56	\$15,701	0.61
088 Chronic Obstructive Pulmonary Disease	\$9,174	\$7,329	\$7,953	0.92	\$9,611	0.76	\$9,667	0.76
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$9,690	\$7,720	\$8,533	0.90	\$10,618	0.73	\$10,282	0.75
127 Heart Failure & Shock	\$9,336	\$7,678	\$8,989	0.85	\$11,413	0.67	\$11,165	0.69
143 Chest Pain	\$6,699	\$6,226	\$5,720	1.09	\$7,377	0.84	\$6,968	0.89
182 G.I. Disorders Age >17 w CC	\$10,000	\$7,704	\$8,385	0.92	\$9,951	0.77	\$9,826	0.78
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$22,897	\$22,669	\$22,899	0.99	\$28,558	0.79	\$28,681	0.79
371 Cesarean Section w/o CC	\$5,513	\$5,530	\$6,596	0.84	\$10,730	0.52	\$10,099	0.55
372 Vaginal Delivery w Complicating Diagnosis	\$2,756	\$2,802	\$3,044	0.92	\$8,304	0.34	\$7,928	0.35
373 Vaginal Delivery w/o Complicating Diagnosis	\$2,291	\$2,225	\$2,902	0.77	\$5,669	0.39	\$5,075	0.44
390 Neonate w Other Significant Problems	\$1,415	\$1,329	\$1,933	0.69	\$3,425	0.39	\$3,015	0.44
391 Normal Newborn	\$1,096	\$1,036	\$1,093	0.95	\$1,845	0.56	\$1,702	0.61
430 Psychoses	*	#	#	*	#	*	#	*
462 Rehabilitation	N/A	N/A	N/A	N/A	\$20,147	N/A	\$20,147	N/A
527 Percut Cardio Proc w Drug-Eluting Stent w/o AMI	\$30,664	\$31,106	\$31,230	1.00	\$34,532	0.90	\$34,759	0.89

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.