

**305 United Hospital System Inc**  
**6308 8th Ave**  
**Kenosha, WI 53143**  
**262-656-3011**

Hospital Type: GMS  
 County: Kenosha  
 Analysis Area: 2A-Southeastern  
 Inpatient Volume Group: 5

**Overall Hospital Utilization**

Total Discharges:	9,817	Average Length of Stay (days):	4.3
Total Patient Days:	42,411	Average Charge per Discharge:	\$18,092

**Obstetrical Utilization**

Normal Childbirths:	376	Percent of All Childbirths:	52.4%
Cesarean Childbirths:	235	Percent of All Childbirths:	32.7%
Other Childbirths:	107	Percent of All Childbirths:	14.9%
<b>Total Childbirths:</b>	<b>718</b>		
<b>Total Newborns:</b>	<b>729</b>		

**Psychiatric Utilization**

Discharges:	39	Percent of All Discharges:	0.4%
Patient Days:	185	Percent of All Patient Days:	0.4%

**AODA Utilization**

Discharges:	100	Percent of All Discharges:	1.0%
Patient Days:	385	Percent of All Patient Days:	0.9%

**Patient Discharge Status**

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	77.2%
Other GMS Hospital	2.4%
Skilled Nursing Facility	12.4%
Intermediate Care Facility	0.1%
Inpatient Rehabilitation Facility	0.4%
Hospice	0.9%
Other Institution	0.1%
Home Health/Home IV Provider	3.2%
Left Against Medical Advice	0.8%
Expired	2.2%
Other	0.4%

**Expected Pay Source Distribution**

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	48.7%
Medicaid/BadgerCare	8.6%
Other Government	0.8%
Commercial or Private Insurance	37.7%
Self-Pay	4.3%
Other or Unknown Insurance	0.0%

**Age Distribution**

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	7.4%	4.0%
Under 15	0.1%	0.0%
15 - 19	1.3%	0.8%
20 - 24	2.8%	1.6%
25 - 34	8.7%	5.4%
35 - 44	9.6%	7.7%
45 - 54	12.6%	11.5%
55 - 64	12.9%	12.9%
65 - 74	14.8%	17.1%
75 - 84	20.1%	25.0%
85 & Over	9.7%	13.8%

**Sex Distribution**

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	41.8%	43.0%
Female	58.2%	57.0%

**Race Distribution**

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.0%	0.1%
Asian/Pacific Isl.	0.4%	0.3%
Black	5.9%	5.6%
White	89.1%	90.2%
Other	4.1%	3.5%
Unknown	0.4%	0.3%
Not Asked	0.0%	0.0%

**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	120	6.2	4.9	1.27	4.7	1.32	4.7	1.32
088 Chronic Obstructive Pulmonary Disease	228	5.0	4.3	1.17	4.2	1.20	4.0	1.26
089 Simple Pneumonia & Pleurisy Age >17 w CC	332	5.7	5.0	1.13	4.7	1.20	4.5	1.26
127 Heart Failure & Shock	286	5.2	4.8	1.08	4.4	1.17	4.2	1.23
143 Chest Pain	326	1.7	1.4	1.22	1.5	1.13	1.5	1.13
182 G.I. Disorders Age >17 w CC	247	4.3	4.0	1.08	3.8	1.14	3.6	1.20
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	259	4.5	4.1	1.10	3.9	1.15	3.8	1.18
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	155	2.5	1.8	1.40	1.9	1.33	1.8	1.40
371 Cesarean Section w/o CC	175	3.3	3.4	0.96	3.3	0.99	3.5	0.94
373 Vaginal Delivery w/o Complicating Diagnosis	376	2.1	2.1	0.98	2.0	1.03	2.1	0.98
390 Neonate w Other Significant Problems	101	2.6	2.5	1.05	2.4	1.09	2.5	1.05
391 Normal Newborn	565	2.3	2.0	1.13	2.1	1.07	2.0	1.13
430 Psychoses	7	3.4	6.9	0.50	4.9	0.70	5.9	0.58
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	43	2.9	2.3	1.24	2.8	1.02	2.7	1.06
527 Percut Cardio Proc w Drug-Eluting Stent w/o AMI	119	2.0	1.8	1.13	1.8	1.13	1.7	1.20

**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 or Cerebral Infarction	\$19,907	\$19,917	\$14,827	1.34	\$16,389	1.22	\$15,701	1.27
088 Chronic Obstructive Pulmonary Disease	\$11,524	\$10,604	\$9,580	1.11	\$10,350	1.02	\$9,667	1.10
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$14,504	\$12,569	\$10,470	1.20	\$11,221	1.12	\$10,282	1.22
127 Heart Failure & Shock	\$14,793	\$14,660	\$11,541	1.27	\$12,339	1.19	\$11,165	1.31
143 Chest Pain	\$7,848	\$7,658	\$7,651	1.00	\$7,660	1.00	\$6,968	1.10
182 G.I. Disorders Age >17 w CC	\$12,614	\$12,850	\$10,723	1.20	\$11,100	1.16	\$9,826	1.31
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$36,274	\$36,235	\$32,905	1.10	\$29,917	1.21	\$28,681	1.26
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	\$14,783	\$14,877	\$14,680	1.01	\$12,090	1.23	\$12,111	1.23
371 Cesarean Section w/o CC	\$13,870	\$13,936	\$10,555	1.32	\$9,434	1.48	\$10,099	1.38
373 Vaginal Delivery w/o Complicating Diagnosis	\$6,374	\$6,243	\$5,781	1.08	\$4,659	1.34	\$5,075	1.23
390 Neonate w Other Significant Problems	\$1,759	\$1,847	\$2,913	0.63	\$2,588	0.71	\$3,015	0.61
391 Normal Newborn	\$1,256	\$1,192	\$1,852	0.64	\$1,489	0.80	\$1,702	0.70
430 Psychoses	\$9,618	#	#	#	#	#	#	#
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	\$6,528	#	#	#	#	#	#	#
527 Percut Cardio Proc w Drug-Eluting Stent w/o AMI	\$44,043	\$48,697	\$32,378	1.50	\$35,716	1.36	\$34,759	1.40

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.