

**004 St Elizabeth Hospital**  
**1506 S Oneida St**  
**Appleton, WI 54915**  
**920-738-2000**

Hospital Type: GMS  
 County: Outagamie  
 Analysis Area: 3-Lake Winnebago  
 Inpatient Volume Group: 5

**Overall Hospital Utilization**

Total Discharges:	8,360	Average Length of Stay (days):	3.7
Total Patient Days:	31,126	Average Charge per Discharge:	\$10,593

**Obstetrical Utilization**

Normal Childbirths:	898	Percent of All Childbirths:	71.4%
Cesarean Childbirths:	243	Percent of All Childbirths:	19.3%
Other Childbirths:	116	Percent of All Childbirths:	9.2%
<b>Total Childbirths:</b>	<b>1,257</b>		
<b>Total Newborns:</b>	<b>1,269</b>		

**Psychiatric Utilization**

Discharges:	745	Percent of All Discharges:	8.9%
Patient Days:	3,594	Percent of All Patient Days:	11.5%

**AODA Utilization**

Discharges:	251	Percent of All Discharges:	3.0%
Patient Days:	784	Percent of All Patient Days:	2.5%

**Patient Discharge Status**

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	83.2%
Other GMS Hospital	1.0%
Skilled Nursing Facility	9.8%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	0.3%
Hospice	0.4%
Other Institution	1.8%
Home Health/Home IV Provider	0.9%
Left Against Medical Advice	0.9%
Expired	1.5%
Other	0.2%

**Expected Pay Source Distribution**

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	32.4%
Medicaid/BadgerCare	14.8%
Other Government	0.8%
Commercial or Private Insurance	47.6%
Self-Pay	4.3%
Other or Unknown Insurance	0.1%

**Age Distribution**

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	15.2%	16.2%
Under 15	5.0%	6.0%
15 - 19	4.2%	3.5%
20 - 24	5.4%	4.0%
25 - 34	13.2%	9.3%
35 - 44	9.1%	8.4%
45 - 54	9.6%	9.8%
55 - 64	9.6%	9.5%
65 - 74	10.0%	11.7%
75 - 84	12.2%	14.8%
85 & Over	6.6%	7.0%

**Sex Distribution**

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	41.1%	44.2%
Female	58.9%	55.8%

**Race Distribution**

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.3%	0.3%
Asian/Pacific Isl.	2.4%	1.9%
Black	0.8%	0.7%
White	93.7%	94.7%
Other	2.7%	2.1%
Unknown	0.0%	0.2%
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	82	3.2	3.7	0.85	4.7	0.67	4.7	0.67
088 Chronic Obstructive Pulmonary Disease	79	3.2	3.7	0.87	4.2	0.77	4.0	0.80
089 Simple Pneumonia & Pleurisy Age >17 w CC	158	3.3	4.1	0.81	4.7	0.71	4.5	0.74
127 Heart Failure & Shock	117	3.5	3.7	0.95	4.4	0.80	4.2	0.84
143 Chest Pain	49	1.3	1.4	0.92	1.5	0.86	1.5	0.86
182 G.I. Disorders Age >17 w CC	72	3.0	3.5	0.85	3.8	0.78	3.6	0.83
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	198	3.2	3.7	0.87	3.9	0.83	3.8	0.85
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	85	2.0	1.7	1.16	1.9	1.04	1.8	1.10
371 Cesarean Section w/o CC	185	3.4	3.3	1.02	3.3	1.02	3.5	0.96
373 Vaginal Delivery w/o Complicating Diagnosis	898	2.0	2.0	1.00	2.0	1.00	2.1	0.95
390 Neonate w Other Significant Problems	101	2.8	2.4	1.16	2.4	1.16	2.5	1.11
391 Normal Newborn	1034	2.0	2.1	0.97	2.1	0.97	2.0	1.02
430 Psychoses	473	5.2	4.9	1.06	4.9	1.06	5.9	0.88
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	156	3.2	2.4	1.34	2.8	1.15	2.7	1.19
527 Percut Cardio Proc w Drug-Eluting Stent w/o AMI	114	1.4	1.4	1.00	1.8	0.78	1.7	0.83

**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	\$9,033	\$8,557	\$10,934	0.78	\$16,389	0.52	\$15,701	0.54
088 Chronic Obstructive Pulmonary Disease	\$7,160	\$6,599	\$7,953	0.83	\$10,350	0.64	\$9,667	0.68
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$7,378	\$6,318	\$8,533	0.74	\$11,221	0.56	\$10,282	0.61
127 Heart Failure & Shock	\$7,923	\$7,852	\$8,989	0.87	\$12,339	0.64	\$11,165	0.70
143 Chest Pain	\$4,824	\$4,660	\$5,720	0.81	\$7,660	0.61	\$6,968	0.67
182 G.I. Disorders Age >17 w CC	\$6,986	\$7,245	\$8,385	0.86	\$11,100	0.65	\$9,826	0.74
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$23,048	\$23,947	\$22,899	1.05	\$29,917	0.80	\$28,681	0.83
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	\$8,054	\$7,920	\$9,759	0.81	\$12,090	0.66	\$12,111	0.65
371 Cesarean Section w/o CC	\$5,865	\$5,667	\$6,596	0.86	\$9,434	0.60	\$10,099	0.56
373 Vaginal Delivery w/o Complicating Diagnosis	\$2,740	\$2,679	\$2,902	0.92	\$4,659	0.58	\$5,075	0.53
390 Neonate w Other Significant Problems	\$1,753	\$1,733	\$1,933	0.90	\$2,588	0.67	\$3,015	0.57
391 Normal Newborn	\$711	\$659	\$1,093	0.60	\$1,489	0.44	\$1,702	0.39
430 Psychoses	\$4,988	#	#	#	#	#	#	
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	\$2,060	#	#	#	#	#	#	
527 Percut Cardio Proc w Drug-Eluting Stent w/o AMI	\$25,622	\$28,137	\$31,230	0.90	\$35,716	0.79	\$34,759	0.81

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.