

**074 Good Samaritan Health Center**  
**601 S Center Ave**  
**Merrill, WI 54452**  
**715-536-5511**

Hospital Type: **GMS**  
County: **Lincoln**  
Analysis Area: **6-North Central**  
Inpatient Volume Group: **3**

**Overall Hospital Utilization**

Total Discharges:	1,289	Average Length of Stay (days):	3.2
Total Patient Days:	4,187	Average Charge per Discharge:	\$5,898

**Obstetrical Utilization**

Normal Childbirths:	63	Percent of All Childbirths:	51.2%
Cesarean Childbirths:	45	Percent of All Childbirths:	36.6%
Other Childbirths:	15	Percent of All Childbirths:	12.2%
<b>Total Childbirths:</b>	<b>123</b>		
<b>Total Newborns:</b>	<b>120</b>		

**Psychiatric Utilization**

Discharges:	10	Percent of All Discharges:	0.8%
Patient Days:	44	Percent of All Patient Days:	1.1%

**AODA Utilization**

Discharges:	11	Percent of All Discharges:	0.9%
Patient Days:	37	Percent of All Patient Days:	0.9%

**Patient Discharge Status**

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	65.7%
Other GMS Hospital	5.4%
Skilled Nursing Facility	6.5%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	0.0%
Hospice	3.1%
Other Institution	0.3%
Home Health/Home IV Provider	4.3%
Left Against Medical Advice	0.4%
Expired	3.2%
Other	11.0%

**Expected Pay Source Distribution**

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	46.1%
Medicaid/BadgerCare	9.2%
Other Government	3.3%
Commercial or Private Insurance	37.2%
Self-Pay	4.0%
Other or Unknown Insurance	0.2%

**Age Distribution**

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	9.3%	7.1%
Under 15	2.7%	1.5%
15 - 19	2.8%	2.3%
20 - 24	4.4%	3.1%
25 - 34	8.2%	6.2%
35 - 44	7.2%	6.0%
45 - 54	6.7%	5.9%
55 - 64	7.5%	6.3%
65 - 74	13.7%	15.7%
75 - 84	20.6%	23.3%
85 & Over	16.8%	22.6%

**Sex Distribution**

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	38.5%	39.3%
Female	61.5%	60.7%

**Race Distribution**

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.3%	0.2%
Asian/Pacific Isl.	0.1%	0.0%
Black	0.2%	0.2%
White	98.8%	99.1%
Other	0.4%	0.3%
Unknown	0.2%	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	31	4.7	5.0	0.94	3.5	1.34	4.7	1.00
088 Chronic Obstructive Pulmonary Disease	44	4.4	3.9	1.12	3.7	1.18	4.0	1.09
089 Simple Pneumonia & Pleurisy Age >17 w CC	60	4.3	4.3	1.00	4.1	1.05	4.5	0.96
127 Heart Failure & Shock	48	3.8	3.8	0.99	3.8	0.99	4.2	0.90
143 Chest Pain	23	1.3	1.4	0.93	1.3	1.00	1.5	0.87
174 G.I. Hemorrhage w CC	14	4.1	3.3	1.23	3.1	1.31	3.3	1.23
182 G.I. Disorders Age >17 w CC	33	3.0	3.2	0.95	3.2	0.95	3.6	0.84
183 G.I. Disorders Age >17 w/o CC	19	2.3	2.2	1.03	2.1	1.08	2.1	1.08
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	56	3.8	3.7	1.03	3.6	1.06	3.8	1.01
296 Nutritional & Metabolic Disorders Age >17 w CC	17	4.2	3.3	1.28	3.3	1.28	3.5	1.21
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	22	1.6	1.9	0.86	2.1	0.78	1.8	0.91
371 Cesarean Section w/o CC	27	3.9	3.6	1.07	3.3	1.17	3.5	1.10
372 Vaginal Delivery w Complicating Diagnosis	15	2.5	2.7	0.91	2.2	1.12	2.8	0.88
373 Vaginal Delivery w/o Complicating Diagnosis	63	2.2	2.1	1.03	2.0	1.08	2.1	1.03
391 Normal Newborn	97	2.5	2.0	1.26	2.0	1.26	2.0	1.26

**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	\$5,840	\$5,431	\$12,810	0.42	\$8,770	0.62	\$15,701	0.35
088 Chronic Obstructive Pulmonary Disease	\$5,926	\$4,676	\$8,290	0.56	\$8,821	0.53	\$9,667	0.48
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$5,985	\$4,924	\$8,951	0.55	\$8,457	0.58	\$10,282	0.48
127 Heart Failure & Shock	\$5,066	\$4,340	\$9,300	0.47	\$9,001	0.48	\$11,165	0.39
143 Chest Pain	\$2,865	\$2,679	\$5,898	0.45	\$4,847	0.55	\$6,968	0.38
174 G.I. Hemorrhage w CC	\$6,840	\$6,085	\$9,328	0.65	\$8,690	0.70	\$10,180	0.60
182 G.I. Disorders Age >17 w CC	\$3,692	\$3,494	\$9,026	0.39	\$7,754	0.45	\$9,826	0.36
183 G.I. Disorders Age >17 w/o CC	\$3,295	\$2,766	\$4,094	0.68	\$5,524	0.50	\$5,417	0.51
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$18,999	\$18,570	\$25,570	0.73	\$27,061	0.69	\$28,681	0.65
296 Nutritional & Metabolic Disorders Age >17 w CC	\$4,976	\$4,721	\$6,376	0.74	\$7,397	0.64	\$7,870	0.60
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	\$10,127	\$10,017	\$11,134	0.90	\$11,678	0.86	\$12,111	0.83
371 Cesarean Section w/o CC	\$7,627	\$7,539	\$8,661	0.87	\$9,332	0.81	\$10,099	0.75
372 Vaginal Delivery w Complicating Diagnosis	\$3,985	\$3,960	\$5,398	0.73	\$4,975	0.80	\$7,928	0.50
373 Vaginal Delivery w/o Complicating Diagnosis	\$3,230	\$3,146	\$4,076	0.77	\$3,955	0.80	\$5,075	0.62
391 Normal Newborn	\$1,434	\$1,499	\$1,788	0.84	\$1,568	0.96	\$1,702	0.88

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.