

092 Theda Clark Medical Center
130 2nd St
Neenah, WI 54956
920-729-3100

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

Overall Hospital Utilization

Total Discharges:	9,474	Average Length of Stay (days):	3.5
Total Patient Days:	33,151	Average Charge per Discharge:	\$11,381

Obstetrical Utilization

Normal Childbirths:	719	Percent of All Childbirths:	56.2%
Cesarean Childbirths:	409	Percent of All Childbirths:	32.0%
Other Childbirths:	151	Percent of All Childbirths:	11.8%
Total Childbirths:	1,279		
Total Newborns:	1,306		

Psychiatric Utilization

Discharges:	686	Percent of All Discharges:	7.2%
Patient Days:	2,161	Percent of All Patient Days:	6.5%

AODA Utilization

Discharges:	237	Percent of All Discharges:	2.5%
Patient Days:	474	Percent of All Patient Days:	1.4%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	78.6%
Other GMS Hospital	1.1%
Skilled Nursing Facility	8.4%
Intermediate Care Facility	0.1%
Inpatient Rehabilitation Facility	1.7%
Hospice	0.9%
Other Institution	2.5%
Home Health/Home IV Provider	3.5%
Left Against Medical Advice	0.5%
Expired	1.6%
Other	1.2%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	29.6%
Medicaid/BadgerCare	9.4%
Other Government	0.4%
Commercial or Private Insurance	56.5%
Self-Pay	3.0%
Other or Unknown Insurance	1.0%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	13.8%	8.1%
Under 15	0.2%	0.1%
15 - 19	2.0%	2.8%
20 - 24	5.2%	5.3%
25 - 34	14.8%	12.8%
35 - 44	12.7%	11.6%
45 - 54	12.6%	13.0%
55 - 64	11.4%	12.2%
65 - 74	10.5%	13.7%
75 - 84	11.6%	14.5%
85 & Over	5.1%	5.9%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	40.3%	43.0%
Female	59.7%	57.0%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.6%	0.8%
Asian/Pacific Isl.	0.7%	1.0%
Black	0.4%	0.3%
White	93.0%	93.9%
Other	0.6%	0.6%
Unknown	4.8%	3.4%
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	174	3.8	3.7	1.02	4.7	0.81	4.7	0.81
088 Chronic Obstructive Pulmonary Disease	76	3.3	3.7	0.88	4.2	0.77	4.0	0.81
089 Simple Pneumonia & Pleurisy Age >17 w CC	126	3.8	4.1	0.93	4.7	0.81	4.5	0.84
127 Heart Failure & Shock	141	3.7	3.7	0.99	4.4	0.83	4.2	0.87
143 Chest Pain	33	1.3	1.4	0.93	1.5	0.87	1.5	0.87
182 G.I. Disorders Age >17 w CC	96	2.7	3.5	0.76	3.8	0.70	3.6	0.74
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	293	3.5	3.7	0.95	3.9	0.90	3.8	0.92
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	60	1.8	1.7	1.05	1.9	0.94	1.8	0.99
371 Cesarean Section w/o CC	292	3.6	3.3	1.10	3.3	1.10	3.5	1.04
373 Vaginal Delivery w/o Complicating Diagnosis	719	2.2	2.0	1.08	2.0	1.08	2.1	1.03
390 Neonate w Other Significant Problems	144	2.3	2.4	0.95	2.4	0.95	2.5	0.91
391 Normal Newborn	931	2.2	2.1	1.04	2.1	1.04	2.0	1.09
430 Psychoses	377	3.3	4.9	0.67	4.9	0.67	5.9	0.55
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	160	1.8	2.4	0.76	2.8	0.65	2.7	0.67
527 Percut Cardio Proc w Drug-Eluting Stent w/o AMI	27	1.6	1.4	1.11	1.8	0.86	1.7	0.92

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	\$12,210	\$11,799	\$10,934	1.08	\$16,389	0.72	\$15,701	0.75
088 Chronic Obstructive Pulmonary Disease	\$7,281	\$6,337	\$7,953	0.80	\$10,350	0.61	\$9,667	0.66
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$8,611	\$7,284	\$8,533	0.85	\$11,221	0.65	\$10,282	0.71
127 Heart Failure & Shock	\$8,165	\$7,240	\$8,989	0.81	\$12,339	0.59	\$11,165	0.65
143 Chest Pain	\$5,313	\$4,762	\$5,720	0.83	\$7,660	0.62	\$6,968	0.68
182 G.I. Disorders Age >17 w CC	\$7,157	\$7,448	\$8,385	0.89	\$11,100	0.67	\$9,826	0.76
209 Maj Joint/Limb Reattachment Procs-Lower Extremity	\$23,094	\$22,964	\$22,899	1.00	\$29,917	0.77	\$28,681	0.80
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	\$9,108	\$8,633	\$9,759	0.88	\$12,090	0.71	\$12,111	0.71
371 Cesarean Section w/o CC	\$6,182	\$6,249	\$6,596	0.95	\$9,434	0.66	\$10,099	0.62
373 Vaginal Delivery w/o Complicating Diagnosis	\$2,751	\$2,635	\$2,902	0.91	\$4,659	0.57	\$5,075	0.52
390 Neonate w Other Significant Problems	\$1,372	\$1,364	\$1,933	0.71	\$2,588	0.53	\$3,015	0.45
391 Normal Newborn	\$1,173	\$1,077	\$1,093	0.99	\$1,489	0.72	\$1,702	0.63
430 Psychoses	\$4,335	#	#	#	#	#	#	
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	\$2,654	#	#	#	#	#	#	
527 Percut Cardio Proc w Drug-Eluting Stent w/o AMI	\$23,200	\$23,081	\$31,230	0.74	\$35,716	0.65	\$34,759	0.66

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.