

006 Memorial Medical Center
1615 Maple Ln
Ashland, WI 54806
715-685-5500

Hospital Type: GMS
County: Ashland
Analysis Area: 7-Western Lake Superior
Inpatient Volume Group: 4

Overall Hospital Utilization

Total Discharges:	3,294	Average Length of Stay (days):	3.8
Total Patient Days:	12,639	Average Charge per Discharge:	\$9,086

Obstetrical Utilization

Normal Childbirths:	152	Percent of All Childbirths:	52.2%
Cesarean Childbirths:	83	Percent of All Childbirths:	28.5%
Other Childbirths:	56	Percent of All Childbirths:	19.2%
Total Childbirths:	291		
Total Newborns:	291		

Psychiatric Utilization

Discharges:	407	Percent of All Discharges:	12.4%
Patient Days:	2,040	Percent of All Patient Days:	16.1%

AODA Utilization

Discharges:	222	Percent of All Discharges:	6.7%
Patient Days:	1,419	Percent of All Patient Days:	11.2%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	77.7%
Other GMS Hospital	4.3%
Critical Access Hospital (CAH)	0.0%
Skilled Nursing Facility	12.8%
Intermediate Care Facility	0.2%
Inpatient Rehabilitation Facility	0.5%
Hospice	0.5%
Other Institution	0.1%
Home Health/Home IV Provider	1.0%
Left Against Medical Advice	0.7%
Expired	1.9%
Other	0.4%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	40.7%
Medicaid/BadgerCare	25.3%
Other Government	4.8%
Commercial or Private Insurance	24.6%
Self-Pay	4.6%
Other or Unknown Insurance	0.0%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	8.8%	5.1%
Under 15	2.9%	1.5%
15 - 19	4.0%	3.3%
20 - 24	5.5%	4.1%
25 - 34	11.6%	11.1%
35 - 44	11.1%	12.4%
45 - 54	11.5%	12.9%
55 - 64	9.1%	9.6%
65 - 74	11.7%	11.9%
75 - 84	13.3%	15.8%
85 & Over	10.4%	12.2%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	39.5%	40.4%
Female	60.5%	59.6%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	15.1%	13.7%
Asian/Pacific Isl.	0.1%	0.1%
Black	0.3%	0.3%
White	83.5%	84.8%
Other	0.5%	0.4%
Unknown	0.6%	0.8%
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	40	4.6	4.2	1.10	4.0	1.15	4.5	1.02
088 Chronic Obstructive Pulmonary Disease	36	4.6	3.8	1.21	3.7	1.25	3.8	1.21
089 Simple Pneumonia & Pleurisy Age >17 w CC	107	4.9	4.2	1.16	4.2	1.16	4.3	1.14
127 Heart Failure & Shock	65	4.6	3.7	1.23	3.8	1.20	4.3	1.06
143 Chest Pain	71	1.7	1.3	1.29	1.4	1.20	1.5	1.12
174 G.I. Hemorrhage w CC	40	3.4	3.3	1.03	3.4	1.00	3.6	0.94
182 G.I. Disorders Age >17 w CC	85	3.4	2.9	1.16	3.4	0.99	3.5	0.96
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	22	2.6	2.6	1.00	1.6	1.62	1.8	1.44
371 Cesarean Section w/o CC	53	3.5	3.2	1.09	3.1	1.13	3.5	1.00
373 Vaginal Delivery w/o Complicating Diagnosis	152	2.0	1.9	1.05	1.9	1.05	2.1	0.95
390 Neonate w Other Significant Problems	35	2.5	2.4	1.05	2.2	1.14	2.4	1.05
391 Normal Newborn	241	2.2	2.1	1.03	2.0	1.09	2.0	1.09
430 Psychoses	286	5.3	5.2	1.01	4.9	1.07	5.9	0.89
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	86	3.2	3.1	1.02	2.7	1.17	2.8	1.13
544 Maj Joint Replace/Reattachment of Lower Extremity	111	5.2	5.1	1.02	3.6	1.44	3.7	1.40

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	\$13,009	\$11,949	\$11,168	1.07	\$13,448	0.89	\$16,199	0.74
088 Chronic Obstructive Pulmonary Disease	\$10,242	\$8,076	\$8,428	0.96	\$9,808	0.82	\$9,882	0.82
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$11,891	\$9,003	\$9,140	0.99	\$10,255	0.88	\$10,587	0.85
127 Heart Failure & Shock	\$10,486	\$8,547	\$8,852	0.97	\$10,870	0.79	\$11,450	0.75
143 Chest Pain	\$5,739	\$5,251	\$4,354	1.21	\$7,606	0.69	\$7,890	0.67
174 G.I. Hemorrhage w CC	\$10,536	\$8,246	\$10,613	0.78	\$11,594	0.71	\$12,018	0.69
182 G.I. Disorders Age >17 w CC	\$8,307	\$7,862	\$7,103	1.11	\$9,577	0.82	\$10,012	0.79
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	\$10,935	\$10,700	\$12,587	0.85	\$11,698	0.91	\$13,120	0.82
371 Cesarean Section w/o CC	\$9,629	\$9,378	\$10,340	0.91	\$10,041	0.93	\$10,694	0.88
373 Vaginal Delivery w/o Complicating Diagnosis	\$3,461	\$3,417	\$4,149	0.82	\$4,529	0.75	\$5,352	0.64
390 Neonate w Other Significant Problems	\$2,008	\$2,114	\$2,085	1.01	\$2,389	0.88	\$3,053	0.69
391 Normal Newborn	\$1,505	\$1,521	\$1,750	0.87	\$1,721	0.88	\$1,820	0.84
430 Psychoses	\$6,820	#	#	#	#	#	#	#
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	\$4,393	#	#	#	#	#	#	#
544 Maj Joint Replace/Reattachment of Lower Extremity	\$27,830	\$26,070	\$26,070	1.00	\$28,634	0.91	\$30,208	0.86

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.