

011 Beloit Memorial Hospital Inc
1969 W Hart Rd
Beloit, WI 53511
608-324-5011

Hospital Type: GMS
County: Rock
Analysis Area: 1-Southern
Inpatient Volume Group: 5

Overall Hospital Utilization

| | | | |
|---------------------|--------|--------------------------------|----------|
| Total Discharges: | 5,772 | Average Length of Stay (days): | 4.1 |
| Total Patient Days: | 23,410 | Average Charge per Discharge: | \$15,991 |

Obstetrical Utilization

| | | | |
|---------------------------|------------|-----------------------------|-------|
| Normal Childbirths: | 477 | Percent of All Childbirths: | 62.8% |
| Cesarean Childbirths: | 225 | Percent of All Childbirths: | 29.6% |
| Other Childbirths: | 58 | Percent of All Childbirths: | 7.6% |
| Total Childbirths: | 760 | | |
| Total Newborns: | 761 | | |

Psychiatric Utilization

| | | | |
|---------------|----|------------------------------|------|
| Discharges: | 21 | Percent of All Discharges: | 0.4% |
| Patient Days: | 87 | Percent of All Patient Days: | 0.4% |

AODA Utilization

| | | | |
|---------------|-----|------------------------------|------|
| Discharges: | 19 | Percent of All Discharges: | 0.3% |
| Patient Days: | 121 | Percent of All Patient Days: | 0.5% |

Patient Discharge Status

| <u>Discharge Status</u> | <u>% Discharges</u> |
|-----------------------------------|---------------------|
| Home or Self-Care | 78.0% |
| Other GMS Hospital | 2.5% |
| Critical Access Hospital (CAH) | 0.0% |
| Skilled Nursing Facility | 9.3% |
| Intermediate Care Facility | 0.0% |
| Inpatient Rehabilitation Facility | 1.7% |
| Hospice | 1.1% |
| Other Institution | 0.0% |
| Home Health/Home IV Provider | 3.6% |
| Left Against Medical Advice | 0.7% |
| Expired | 2.7% |
| Other | 0.4% |

Expected Pay Source Distribution

| <u>Primary Payer</u> | <u>% Discharges</u> |
|---------------------------------|---------------------|
| Medicare | 43.2% |
| Medicaid/BadgerCare | 21.3% |
| Other Government | 0.3% |
| Commercial or Private Insurance | 28.5% |
| Self-Pay | 6.4% |
| Other or Unknown Insurance | 0.3% |

Age Distribution

| <u>Age Group</u> | <u>% Discharges</u> | <u>% Patient Days</u> |
|------------------|---------------------|-----------------------|
| Newborn | 13.2% | 6.6% |
| Under 15 | 2.5% | 1.5% |
| 15 - 19 | 2.7% | 1.6% |
| 20 - 24 | 6.2% | 3.4% |
| 25 - 34 | 9.7% | 5.8% |
| 35 - 44 | 6.8% | 5.1% |
| 45 - 54 | 9.4% | 9.6% |
| 55 - 64 | 10.2% | 12.2% |
| 65 - 74 | 13.4% | 17.8% |
| 75 - 84 | 17.2% | 24.0% |
| 85 & Over | 8.8% | 12.4% |

Sex Distribution

| <u>Sex</u> | <u>% Discharges</u> | <u>% Patient Days</u> |
|------------|---------------------|-----------------------|
| Male | 39.9% | 41.9% |
| Female | 60.1% | 58.1% |

Race Distribution

| <u>Race</u> | <u>% Discharges</u> | <u>% Patient Days</u> |
|--------------------|---------------------|-----------------------|
| Native American | 0.1% | 0.1% |
| Asian/Pacific Isl. | 0.5% | 0.2% |
| Black | 11.3% | 11.5% |
| White | 80.4% | 83.6% |
| Other | 6.3% | 3.7% |
| Unknown | 1.5% | 0.9% |
| 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 | 78 | 6.2 | 4.6 | 1.35 | 4.4 | 1.41 | 4.5 | 1.38 |
| 088 Chronic Obstructive Pulmonary Disease | 130 | 5.0 | 4.0 | 1.24 | 4.0 | 1.24 | 3.8 | 1.31 |
| 089 Simple Pneumonia & Pleurisy Age >17 w CC | 120 | 5.5 | 4.4 | 1.24 | 4.5 | 1.21 | 4.3 | 1.27 |
| 127 Heart Failure & Shock | 132 | 5.7 | 4.3 | 1.34 | 4.4 | 1.31 | 4.3 | 1.34 |
| 143 Chest Pain | 92 | 2.0 | 1.4 | 1.43 | 1.5 | 1.33 | 1.5 | 1.33 |
| 174 G.I. Hemorrhage w CC | 92 | 5.4 | 3.6 | 1.51 | 4.0 | 1.36 | 3.6 | 1.51 |
| 182 G.I. Disorders Age >17 w CC | 95 | 4.4 | 3.6 | 1.22 | 3.6 | 1.22 | 3.5 | 1.25 |
| 359 Uterine & Adnexa Proc for Non-Malignancy w/o CC | 66 | 2.3 | 1.6 | 1.45 | 1.8 | 1.29 | 1.8 | 1.29 |
| 371 Cesarean Section w/o CC | 189 | 2.9 | 3.4 | 0.85 | 3.3 | 0.87 | 3.5 | 0.82 |
| 373 Vaginal Delivery w/o Complicating Diagnosis | 477 | 1.7 | 2.0 | 0.87 | 2.0 | 0.87 | 2.1 | 0.83 |
| 390 Neonate w Other Significant Problems | 163 | 2.1 | 2.4 | 0.87 | 2.4 | 0.87 | 2.4 | 0.87 |
| 391 Normal Newborn | 552 | 2.0 | 2.0 | 0.98 | 2.0 | 0.98 | 2.0 | 0.98 |
| 430 Psychoses | 3 | * | 6.7 | * | 5.3 | * | 5.9 | * |
| 523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC | 2 | * | 2.6 | * | 2.8 | * | 2.8 | * |
| 544 Maj Joint Replace/Reattachment of Lower Extremity | 139 | 4.5 | 3.7 | 1.23 | 3.7 | 1.23 | 3.7 | 1.23 |

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 | \$21,315 | \$18,099 | \$17,504 | 1.03 | \$16,764 | 1.08 | \$16,199 | 1.12 |
| 088 Chronic Obstructive Pulmonary Disease | \$13,849 | \$12,046 | \$10,454 | 1.15 | \$10,866 | 1.11 | \$9,882 | 1.22 |
| 089 Simple Pneumonia & Pleurisy Age >17 w CC | \$16,479 | \$12,663 | \$11,077 | 1.14 | \$11,396 | 1.11 | \$10,587 | 1.20 |
| 127 Heart Failure & Shock | \$18,737 | \$16,298 | \$12,081 | 1.35 | \$12,343 | 1.32 | \$11,450 | 1.42 |
| 143 Chest Pain | \$7,590 | \$7,324 | \$7,224 | 1.01 | \$8,562 | 0.86 | \$7,890 | 0.93 |
| 174 G.I. Hemorrhage w CC | \$18,467 | \$16,783 | \$12,556 | 1.34 | \$13,383 | 1.25 | \$12,018 | 1.40 |
| 182 G.I. Disorders Age >17 w CC | \$11,832 | \$10,473 | \$10,148 | 1.03 | \$10,899 | 0.96 | \$10,012 | 1.05 |
| 359 Uterine & Adnexa Proc for Non-Malignancy w/o CC | \$12,284 | \$12,332 | \$12,428 | 0.99 | \$14,080 | 0.88 | \$13,120 | 0.94 |
| 371 Cesarean Section w/o CC | \$10,982 | \$10,476 | \$11,064 | 0.95 | \$10,584 | 0.99 | \$10,694 | 0.98 |
| 373 Vaginal Delivery w/o Complicating Diagnosis | \$6,415 | \$6,380 | \$5,331 | 1.20 | \$5,287 | 1.21 | \$5,352 | 1.19 |
| 390 Neonate w Other Significant Problems | \$2,121 | \$1,966 | \$2,908 | 0.68 | \$2,979 | 0.66 | \$3,053 | 0.64 |
| 391 Normal Newborn | \$1,755 | \$1,752 | \$1,705 | 1.03 | \$1,739 | 1.01 | \$1,820 | 0.96 |
| 430 Psychoses | * | # | # | * | # | * | # | * |
| 523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC | * | # | # | * | # | * | # | * |
| 544 Maj Joint Replace/Reattachment of Lower Extremity | \$40,088 | \$38,929 | \$29,435 | 1.32 | \$32,161 | 1.21 | \$30,208 | 1.29 |

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.