

043 Aurora Medical Center of Washington County Inc
1032 E Sumner St
Hartford, WI 53027
262-673-2300

Hospital Type: GMS
 County: Washington
 Analysis Area: 2A-Southeastern
 Inpatient Volume Group: 4

Overall Hospital Utilization

Total Discharges:	2,757	Average Length of Stay (days):	3.2
Total Patient Days:	8,782	Average Charge per Discharge:	\$13,776

Obstetrical Utilization

Normal Childbirths:	245	Percent of All Childbirths:	71.2%
Cesarean Childbirths:	76	Percent of All Childbirths:	22.1%
Other Childbirths:	23	Percent of All Childbirths:	6.7%
Total Childbirths:	344		
Total Newborns:	347		

Psychiatric Utilization

Discharges:	7	Percent of All Discharges:	0.3%
Patient Days:	22	Percent of All Patient Days:	0.3%

AODA Utilization

Discharges:	11	Percent of All Discharges:	0.4%
Patient Days:	36	Percent of All Patient Days:	0.4%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	74.5%
Other GMS Hospital	5.1%
Critical Access Hospital (CAH)	0.0%
Skilled Nursing Facility	7.1%
Intermediate Care Facility	1.5%
Inpatient Rehabilitation Facility	0.3%
Hospice	0.8%
Other Institution	0.3%
Home Health/Home IV Provider	5.2%
Left Against Medical Advice	0.1%
Expired	1.3%
Other	3.6%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	39.4%
Medicaid/BadgerCare	13.0%
Other Government	1.3%
Commercial or Private Insurance	44.4%
Self-Pay	1.9%
Other or Unknown Insurance	0.0%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	12.6%	7.9%
Under 15	4.6%	2.4%
15 - 19	1.8%	1.1%
20 - 24	4.3%	2.7%
25 - 34	10.4%	6.9%
35 - 44	8.9%	9.0%
45 - 54	10.3%	10.9%
55 - 64	9.9%	12.2%
65 - 74	12.1%	13.8%
75 - 84	15.6%	20.6%
85 & Over	9.6%	12.6%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	39.2%	40.5%
Female	60.8%	59.5%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.1%	0.1%
Asian/Pacific Isl.	0.0%	0.0%
Black	0.5%	0.3%
White	94.5%	96.5%
Other	1.9%	1.3%
Unknown	3.0%	1.8%
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	30	3.5	4.5	0.77	4.0	0.87	4.5	0.77
088 Chronic Obstructive Pulmonary Disease	41	3.1	4.1	0.77	3.7	0.85	3.8	0.83
089 Simple Pneumonia & Pleurisy Age >17 w CC	94	4.3	4.6	0.93	4.2	1.01	4.3	0.99
127 Heart Failure & Shock	83	4.2	5.2	0.81	3.8	1.11	4.3	0.98
143 Chest Pain	71	1.7	1.4	1.25	1.4	1.25	1.5	1.16
174 G.I. Hemorrhage w CC	27	2.9	3.8	0.77	3.4	0.86	3.6	0.81
182 G.I. Disorders Age >17 w CC	66	3.0	3.7	0.81	3.4	0.88	3.5	0.86
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	73	1.4	1.7	0.85	1.6	0.90	1.8	0.80
371 Cesarean Section w/o CC	65	3.0	3.4	0.89	3.1	0.98	3.5	0.87
373 Vaginal Delivery w/o Complicating Diagnosis	245	2.0	2.1	0.95	1.9	1.05	2.1	0.95
390 Neonate w Other Significant Problems	27	2.3	2.3	0.98	2.2	1.03	2.4	0.94
391 Normal Newborn	292	2.0	2.0	0.98	2.0	0.98	2.0	0.98
430 Psychoses	2	*	6.9	*	4.9	*	5.9	*
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	6	2.0	2.4	0.83	2.7	0.74	2.8	0.71
544 Maj Joint Replace/Reattachment of Lower Extremity	174	3.5	4.0	0.86	3.6	0.96	3.7	0.94

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	
		Average Charge	Average Charge	Average Charge	Ratio	Average Charge	Ratio	Average Charge
014 Intracranial Hemorrhage or Cerebral Infarction	\$13,417	\$12,790	\$15,884	0.81	\$13,448	0.95	\$16,199	0.79
088 Chronic Obstructive Pulmonary Disease	\$11,974	\$10,279	\$11,006	0.93	\$9,808	1.05	\$9,882	1.04
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$15,472	\$11,947	\$10,972	1.09	\$10,255	1.17	\$10,587	1.13
127 Heart Failure & Shock	\$14,347	\$12,068	\$11,808	1.02	\$10,870	1.11	\$11,450	1.05
143 Chest Pain	\$9,276	\$9,034	\$8,572	1.05	\$7,606	1.19	\$7,890	1.15
174 G.I. Hemorrhage w CC	\$11,091	\$8,908	\$12,969	0.69	\$11,594	0.77	\$12,018	0.74
182 G.I. Disorders Age >17 w CC	\$10,069	\$9,978	\$10,683	0.93	\$9,577	1.04	\$10,012	1.00
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	\$14,312	\$14,148	\$14,924	0.95	\$11,698	1.21	\$13,120	1.08
371 Cesarean Section w/o CC	\$13,764	\$13,670	\$10,960	1.25	\$10,041	1.36	\$10,694	1.28
373 Vaginal Delivery w/o Complicating Diagnosis	\$6,829	\$6,745	\$6,098	1.11	\$4,529	1.49	\$5,352	1.26
390 Neonate w Other Significant Problems	\$2,734	\$3,533	\$2,782	1.27	\$2,389	1.48	\$3,053	1.16
391 Normal Newborn	\$2,159	\$2,237	\$1,879	1.19	\$1,721	1.30	\$1,820	1.23
430 Psychoses	*	#	#	*	#	*	#	*
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	\$8,064	#	#	#	#	#	#	#
544 Maj Joint Replace/Reattachment of Lower Extremity	\$36,110	\$37,521	\$33,335	1.13	\$28,634	1.31	\$30,208	1.24

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.