

057 Franciscan Skemp Healthcare - La Crosse
700 West Ave S
La Crosse, WI 54601
608-785-0940

Hospital Type: GMS
 County: La Crosse
 Analysis Area: 5B-Southwestern
 Inpatient Volume Group: 5

Overall Hospital Utilization

Total Discharges:	8,092	Average Length of Stay (days):	3.7
Total Patient Days:	29,842	Average Charge per Discharge:	\$16,540

Obstetrical Utilization

Normal Childbirths:	441	Percent of All Childbirths:	56.2%
Cesarean Childbirths:	229	Percent of All Childbirths:	29.2%
Other Childbirths:	115	Percent of All Childbirths:	14.6%
Total Childbirths:	785		
Total Newborns:	793		

Psychiatric Utilization

Discharges:	794	Percent of All Discharges:	9.8%
Patient Days:	4,413	Percent of All Patient Days:	14.8%

AODA Utilization

Discharges:	357	Percent of All Discharges:	4.4%
Patient Days:	1,367	Percent of All Patient Days:	4.6%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	79.4%
Other GMS Hospital	2.1%
Critical Access Hospital (CAH)	0.0%
Skilled Nursing Facility	10.2%
Intermediate Care Facility	0.4%
Inpatient Rehabilitation Facility	0.0%
Hospice	0.0%
Other Institution	0.5%
Home Health/Home IV Provider	3.2%
Left Against Medical Advice	0.9%
Expired	2.0%
Other	1.2%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	36.1%
Medicaid/BadgerCare	14.6%
Other Government	6.5%
Commercial or Private Insurance	39.2%
Self-Pay	3.3%
Other or Unknown Insurance	0.2%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	9.8%	9.2%
Under 15	2.6%	2.1%
15 - 19	2.6%	2.0%
20 - 24	6.2%	5.8%
25 - 34	10.8%	9.1%
35 - 44	10.7%	9.8%
45 - 54	13.6%	13.1%
55 - 64	13.5%	14.6%
65 - 74	11.3%	12.4%
75 - 84	12.4%	14.3%
85 & Over	6.4%	7.6%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	43.0%	44.0%
Female	57.0%	56.0%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.5%	0.6%
Asian/Pacific Isl.	0.7%	0.5%
Black	1.3%	1.1%
White	88.1%	89.0%
Other	0.9%	0.8%
Unknown	0.0%	0.0%
Not Asked	8.4%	8.0%

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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	82	4.0	3.7	1.09	4.4	0.92	4.5	0.90
088 Chronic Obstructive Pulmonary Disease	101	3.6	3.4	1.05	4.0	0.90	3.8	0.94
089 Simple Pneumonia & Pleurisy Age >17 w CC	203	4.0	3.7	1.08	4.5	0.89	4.3	0.93
127 Heart Failure & Shock	85	3.8	3.5	1.10	4.4	0.87	4.3	0.89
143 Chest Pain	93	1.5	1.3	1.12	1.5	0.97	1.5	0.97
174 G.I. Hemorrhage w CC	90	3.2	2.8	1.15	4.0	0.81	3.6	0.90
182 G.I. Disorders Age >17 w CC	84	3.6	3.0	1.20	3.6	1.00	3.5	1.03
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	155	2.1	2.0	1.04	1.8	1.15	1.8	1.15
371 Cesarean Section w/o CC	136	3.9	3.4	1.13	3.3	1.17	3.5	1.10
373 Vaginal Delivery w/o Complicating Diagnosis	441	2.2	2.0	1.12	2.0	1.12	2.1	1.06
390 Neonate w Other Significant Problems	104	3.2	2.6	1.24	2.4	1.34	2.4	1.34
391 Normal Newborn	582	2.2	2.0	1.09	2.0	1.09	2.0	1.09
430 Psychoses	566	6.1	6.2	0.99	5.3	1.16	5.9	1.04
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	212	3.6	3.5	1.02	2.8	1.28	2.8	1.28
544 Maj Joint Replace/Reattachment of Lower Extremity	362	4.1	3.6	1.15	3.7	1.12	3.7	1.12

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	\$19,390	\$16,563	\$12,841	1.29	\$16,764	0.99	\$16,199	1.02
088 Chronic Obstructive Pulmonary Disease	\$12,735	\$11,280	\$9,415	1.20	\$10,866	1.04	\$9,882	1.14
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$13,688	\$11,589	\$9,510	1.22	\$11,396	1.02	\$10,587	1.09
127 Heart Failure & Shock	\$13,595	\$12,048	\$10,311	1.17	\$12,343	0.98	\$11,450	1.05
143 Chest Pain	\$9,253	\$9,335	\$6,978	1.34	\$8,562	1.09	\$7,890	1.18
174 G.I. Hemorrhage w CC	\$15,285	\$13,707	\$11,076	1.24	\$13,383	1.02	\$12,018	1.14
182 G.I. Disorders Age >17 w CC	\$13,458	\$13,355	\$9,576	1.39	\$10,899	1.23	\$10,012	1.33
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	\$12,188	\$12,131	\$12,255	0.99	\$14,080	0.86	\$13,120	0.92
371 Cesarean Section w/o CC	\$10,586	\$10,151	\$12,046	0.84	\$10,584	0.96	\$10,694	0.95
373 Vaginal Delivery w/o Complicating Diagnosis	\$5,653	\$5,490	\$5,404	1.02	\$5,287	1.04	\$5,352	1.03
390 Neonate w Other Significant Problems	\$5,706	\$4,604	\$3,619	1.27	\$2,979	1.55	\$3,053	1.51
391 Normal Newborn	\$1,994	\$1,886	\$1,857	1.02	\$1,739	1.08	\$1,820	1.04
430 Psychoses	\$10,169	#	#	#	#	#	#	#
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	\$6,680	#	#	#	#	#	#	#
544 Maj Joint Replace/Reattachment of Lower Extremity	\$28,149	\$27,820	\$28,540	0.97	\$32,161	0.87	\$30,208	0.92

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.