

085 Wheaton Franciscan Healthcare-St Francis, Inc
3237 S 16th St
Milwaukee, WI 53215
414-647-5000

Hospital Type: GMS
 County: Milwaukee
 Analysis Area: 2B-Milwaukee County
 Inpatient Volume Group: 5

Overall Hospital Utilization

| | | | |
|---------------------|--------|--------------------------------|----------|
| Total Discharges: | 9,958 | Average Length of Stay (days): | 3.9 |
| Total Patient Days: | 39,279 | Average Charge per Discharge: | \$22,385 |

Obstetrical Utilization

| | | | |
|-----------------------|-------|-----------------------------|-------|
| Normal Childbirths: | 803 | Percent of All Childbirths: | 66.7% |
| Cesarean Childbirths: | 267 | Percent of All Childbirths: | 22.2% |
| Other Childbirths: | 134 | Percent of All Childbirths: | 11.1% |
| Total Childbirths: | 1,204 | | |
| Total Newborns: | 1,208 | | |

Psychiatric Utilization

| | | | |
|---------------|-------|------------------------------|------|
| Discharges: | 317 | Percent of All Discharges: | 3.2% |
| Patient Days: | 1,267 | Percent of All Patient Days: | 3.2% |

AODA Utilization

| | | | |
|---------------|-----|------------------------------|------|
| Discharges: | 213 | Percent of All Discharges: | 2.1% |
| Patient Days: | 786 | Percent of All Patient Days: | 2.0% |

Patient Discharge Status

| <u>Discharge Status</u> | <u>% Discharges</u> |
|-----------------------------------|---------------------|
| Home or Self-Care | 74.4% |
| Other GMS Hospital | 0.7% |
| Critical Access Hospital (CAH) | 0.0% |
| Skilled Nursing Facility | 11.5% |
| Intermediate Care Facility | 0.0% |
| Inpatient Rehabilitation Facility | 1.4% |
| Hospice | 0.8% |
| Other Institution | 0.0% |
| Home Health/Home IV Provider | 6.9% |
| Left Against Medical Advice | 1.0% |
| Expired | 1.7% |
| Other | 1.5% |

Expected Pay Source Distribution

| <u>Primary Payer</u> | <u>% Discharges</u> |
|---------------------------------|---------------------|
| Medicare | 42.0% |
| Medicaid/BadgerCare | 27.4% |
| Other Government | 1.9% |
| Commercial or Private Insurance | 26.2% |
| Self-Pay | 2.4% |
| Other or Unknown Insurance | 0.0% |

Age Distribution

| <u>Age Group</u> | <u>% Discharges</u> | <u>% Patient Days</u> |
|------------------|---------------------|-----------------------|
| Newborn | 12.1% | 7.9% |
| Under 15 | 0.2% | 0.1% |
| 15 - 19 | 3.1% | 2.1% |
| 20 - 24 | 5.8% | 4.1% |
| 25 - 34 | 9.3% | 7.0% |
| 35 - 44 | 8.8% | 7.6% |
| 45 - 54 | 11.6% | 11.3% |
| 55 - 64 | 11.3% | 13.0% |
| 65 - 74 | 12.2% | 14.4% |
| 75 - 84 | 16.6% | 20.7% |
| 85 & Over | 8.9% | 11.8% |

Sex Distribution

| <u>Sex</u> | <u>% Discharges</u> | <u>% Patient Days</u> |
|------------|---------------------|-----------------------|
| Male | 38.9% | 40.2% |
| Female | 61.1% | 59.8% |

Race Distribution

| <u>Race</u> | <u>% Discharges</u> | <u>% Patient Days</u> |
|--------------------|---------------------|-----------------------|
| Native American | 0.5% | 0.5% |
| Asian/Pacific Isl. | 1.3% | 1.0% |
| Black | 6.9% | 7.0% |
| White | 68.3% | 72.0% |
| Other | 22.8% | 19.4% |
| Unknown | 0.1% | 0.1% |
| 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 | 112 | 5.0 | 5.0 | 0.99 | 4.4 | 1.13 | 4.5 | 1.10 |
| 088 Chronic Obstructive Pulmonary Disease | 152 | 3.7 | 4.5 | 0.82 | 4.0 | 0.92 | 3.8 | 0.97 |
| 089 Simple Pneumonia & Pleurisy Age >17 w CC | 157 | 4.5 | 4.6 | 0.98 | 4.5 | 1.00 | 4.3 | 1.05 |
| 127 Heart Failure & Shock | 225 | 4.7 | 4.6 | 1.03 | 4.4 | 1.07 | 4.3 | 1.10 |
| 143 Chest Pain | 125 | 1.6 | 1.6 | 1.00 | 1.5 | 1.07 | 1.5 | 1.07 |
| 174 G.I. Hemorrhage w CC | 155 | 4.3 | 3.9 | 1.09 | 4.0 | 1.06 | 3.6 | 1.18 |
| 182 G.I. Disorders Age >17 w CC | 244 | 3.9 | 3.8 | 1.03 | 3.6 | 1.09 | 3.5 | 1.12 |
| 359 Uterine & Adnexa Proc for Non-Malignancy w/o CC | 109 | 2.1 | 2.1 | 0.98 | 1.8 | 1.15 | 1.8 | 1.15 |
| 371 Cesarean Section w/o CC | 187 | 3.5 | 4.1 | 0.86 | 3.3 | 1.07 | 3.5 | 1.01 |
| 373 Vaginal Delivery w/o Complicating Diagnosis | 803 | 2.2 | 2.2 | 1.00 | 2.0 | 1.10 | 2.1 | 1.05 |
| 390 Neonate w Other Significant Problems | 383 | 2.4 | 2.5 | 0.95 | 2.4 | 0.99 | 2.4 | 0.99 |
| 391 Normal Newborn | 696 | 2.1 | 2.1 | 1.02 | 2.0 | 1.07 | 2.0 | 1.07 |
| 430 Psychoses | 241 | 4.0 | 4.6 | 0.88 | 5.3 | 0.76 | 5.9 | 0.68 |
| 523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC | 83 | 3.6 | 2.9 | 1.25 | 2.8 | 1.30 | 2.8 | 1.30 |
| 544 Maj Joint Replace/Reattachment of Lower Extremity | 275 | 3.8 | 3.8 | 1.01 | 3.7 | 1.04 | 3.7 | 1.04 |

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 | \$22,671 | \$19,909 | \$20,565 | 0.97 | \$16,764 | 1.19 | \$16,199 | 1.23 |
| 088 Chronic Obstructive Pulmonary Disease | \$13,649 | \$11,738 | \$13,576 | 0.86 | \$10,866 | 1.08 | \$9,882 | 1.19 |
| 089 Simple Pneumonia & Pleurisy Age >17 w CC | \$16,779 | \$12,596 | \$12,727 | 0.99 | \$11,396 | 1.11 | \$10,587 | 1.19 |
| 127 Heart Failure & Shock | \$18,583 | \$15,694 | \$14,015 | 1.12 | \$12,343 | 1.27 | \$11,450 | 1.37 |
| 143 Chest Pain | \$10,074 | \$10,143 | \$9,567 | 1.06 | \$8,562 | 1.18 | \$7,890 | 1.29 |
| 174 G.I. Hemorrhage w CC | \$19,362 | \$16,163 | \$15,263 | 1.06 | \$13,383 | 1.21 | \$12,018 | 1.34 |
| 182 G.I. Disorders Age >17 w CC | \$15,464 | \$13,443 | \$11,837 | 1.14 | \$10,899 | 1.23 | \$10,012 | 1.34 |
| 359 Uterine & Adnexa Proc for Non-Malignancy w/o CC | \$18,084 | \$17,709 | \$15,154 | 1.17 | \$14,080 | 1.26 | \$13,120 | 1.35 |
| 371 Cesarean Section w/o CC | \$11,412 | \$11,138 | \$13,410 | 0.83 | \$10,584 | 1.05 | \$10,694 | 1.04 |
| 373 Vaginal Delivery w/o Complicating Diagnosis | \$7,317 | \$7,198 | \$7,117 | 1.01 | \$5,287 | 1.36 | \$5,352 | 1.35 |
| 390 Neonate w Other Significant Problems | \$3,028 | \$2,989 | \$3,692 | 0.81 | \$2,979 | 1.00 | \$3,053 | 0.98 |
| 391 Normal Newborn | \$2,231 | \$2,075 | \$2,256 | 0.92 | \$1,739 | 1.19 | \$1,820 | 1.14 |
| 430 Psychoses | \$5,657 | # | # | # | # | # | # | # |
| 523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC | \$6,070 | # | # | # | # | # | # | # |
| 544 Maj Joint Replace/Reattachment of Lower Extremity | \$42,006 | \$41,410 | \$35,514 | 1.17 | \$32,161 | 1.29 | \$30,208 | 1.37 |

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.