

087 Aurora St Luke's Medical Center
2900 W Oklahoma Ave
Milwaukee, WI 53215
414-649-6000

Hospital Type: GMS
 County: Milwaukee
 Analysis Area: 2B-Milwaukee County
 Inpatient Volume Group: 6

Overall Hospital Utilization

Total Discharges:	38,870	Average Length of Stay (days):	4.9
Total Patient Days:	191,464	Average Charge per Discharge:	\$37,475

Obstetrical Utilization

Normal Childbirths:	0	Percent of All Childbirths:	0.0%
Cesarean Childbirths:	0	Percent of All Childbirths:	0.0%
Other Childbirths:	0	Percent of All Childbirths:	0.0%
Total Childbirths:	0		
Total Newborns:	0		

Psychiatric Utilization

Discharges:	912	Percent of All Discharges:	2.3%
Patient Days:	4,330	Percent of All Patient Days:	2.3%

AODA Utilization

Discharges:	466	Percent of All Discharges:	1.2%
Patient Days:	1,515	Percent of All Patient Days:	0.8%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	65.5%
Other GMS Hospital	0.8%
Critical Access Hospital (CAH)	0.0%
Skilled Nursing Facility	11.2%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	2.8%
Hospice	1.1%
Other Institution	0.0%
Home Health/Home IV Provider	13.6%
Left Against Medical Advice	0.6%
Expired	2.5%
Other	1.8%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	58.0%
Medicaid/BadgerCare	6.8%
Other Government	2.2%
Commercial or Private Insurance	30.6%
Self-Pay	2.1%
Other or Unknown Insurance	0.4%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	0.0%	0.0%
Under 15	0.1%	0.1%
15 - 19	0.7%	0.4%
20 - 24	1.4%	0.8%
25 - 34	4.1%	3.0%
35 - 44	8.8%	7.2%
45 - 54	15.2%	14.2%
55 - 64	17.6%	17.5%
65 - 74	19.3%	20.0%
75 - 84	23.2%	26.0%
85 & Over	9.6%	10.7%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	49.9%	49.3%
Female	50.1%	50.7%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.2%	0.3%
Asian/Pacific Isl.	0.6%	0.7%
Black	6.3%	6.5%
White	86.9%	86.9%
Other	5.2%	4.6%
Unknown	0.8%	1.0%
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	574	5.2	5.0	1.03	4.8	1.08	4.5	1.15
089 Simple Pneumonia & Pleurisy Age >17 w CC	968	4.8	4.6	1.05	4.5	1.08	4.3	1.13
127 Heart Failure & Shock	965	4.8	4.6	1.05	4.6	1.05	4.3	1.13
143 Chest Pain	682	1.9	1.6	1.16	1.6	1.16	1.5	1.24
182 G.I. Disorders Age >17 w CC	869	4.1	3.8	1.07	3.7	1.10	3.5	1.16
371 Cesarean Section w/o CC	0	N/A	4.1	N/A	3.9	N/A	3.5	N/A
372 Vaginal Delivery w Complicating Diagnosis	0	N/A	2.6	N/A	2.7	N/A	2.7	N/A
373 Vaginal Delivery w/o Complicating Diagnosis	0	N/A	2.2	N/A	2.2	N/A	2.1	N/A
390 Neonate w Other Significant Problems	0	N/A	2.5	N/A	2.5	N/A	2.4	N/A
391 Normal Newborn	0	N/A	2.1	N/A	2.1	N/A	2.0	N/A
430 Psychoses	684	4.9	4.6	1.06	6.5	0.75	5.9	0.82
462 Rehabilitation	957	12.2	12.2	1.00	11.8	1.04	11.8	1.04
544 Maj Joint Replace/Reattachment of Lower Extremity	1184	3.8	3.8	1.00	3.7	1.03	3.7	1.03
557 Percut Cardio Procs w Drug-Eluting Stent w MCV Dx	716	3.6	3.5	1.02	3.1	1.15	3.1	1.15
558 Percut Cardio Procs w Drug-Eluting Stent w/o MCV Dx	1754	1.5	1.5	0.99	1.4	1.06	1.4	1.06

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	\$28,228	\$21,738	\$20,565	1.06	\$17,258	1.26	\$16,199	1.34
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$20,100	\$13,525	\$12,727	1.06	\$11,065	1.22	\$10,587	1.28
127 Heart Failure & Shock	\$20,373	\$14,543	\$14,015	1.04	\$11,955	1.22	\$11,450	1.27
143 Chest Pain	\$11,072	\$9,925	\$9,567	1.04	\$8,535	1.16	\$7,890	1.26
182 G.I. Disorders Age >17 w CC	\$17,764	\$13,136	\$11,837	1.11	\$10,512	1.25	\$10,012	1.31
371 Cesarean Section w/o CC	N/A	N/A	\$13,410	N/A	\$11,061	N/A	\$10,694	N/A
372 Vaginal Delivery w Complicating Diagnosis	N/A	N/A	\$10,486	N/A	\$8,295	N/A	\$7,954	N/A
373 Vaginal Delivery w/o Complicating Diagnosis	N/A	N/A	\$7,117	N/A	\$5,750	N/A	\$5,352	N/A
390 Neonate w Other Significant Problems	N/A	N/A	\$3,692	N/A	\$3,358	N/A	\$3,053	N/A
391 Normal Newborn	N/A	N/A	\$2,256	N/A	\$1,922	N/A	\$1,820	N/A
430 Psychoses	\$11,264	#	#	#	#	#	#	#
462 Rehabilitation	\$37,406	\$27,880	\$24,904	1.12	\$21,852	1.28	\$21,852	1.28
544 Maj Joint Replace/Reattachment of Lower Extremity	\$33,200	\$31,493	\$35,514	0.89	\$29,794	1.06	\$30,208	1.04
557 Percut Cardio Procs w Drug-Eluting Stent w MCV Dx	\$54,181	\$41,155	\$41,087	1.00	\$33,621	1.22	\$33,621	1.22
558 Percut Cardio Procs w Drug-Eluting Stent w/o MCV Dx	\$41,348	\$43,623	\$43,619	1.00	\$36,296	1.20	\$36,296	1.20

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.