

178 Holy Family Memorial Medical Center
 2300 Western Ave
 Manitowoc, WI 54220
 920-320-2011

Hospital Type: GMS
 County: Manitowoc
 Analysis Area: 4-Northeastern
 Inpatient Volume Group: 5

Overall Hospital Utilization

Total Discharges:	4,711	Average Length of Stay (days):	3.4
Total Patient Days:	15,820	Average Charge per Discharge:	\$16,416

Obstetrical Utilization

Normal Childbirths:	201	Percent of All Childbirths:	60.7%
Cesarean Childbirths:	92	Percent of All Childbirths:	27.8%
Other Childbirths:	38	Percent of All Childbirths:	11.5%
Total Childbirths:	331		
Total Newborns:	334		

Psychiatric Utilization

Discharges:	262	Percent of All Discharges:	5.6%
Patient Days:	925	Percent of All Patient Days:	5.8%

AODA Utilization

Discharges:	200	Percent of All Discharges:	4.2%
Patient Days:	552	Percent of All Patient Days:	3.5%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	69.3%
Other GMS Hospital	3.2%
Critical Access Hospital (CAH)	0.0%
Skilled Nursing Facility	13.9%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	1.0%
Hospice	0.5%
Other Institution	0.0%
Home Health/Home IV Provider	9.0%
Left Against Medical Advice	0.7%
Expired	1.8%
Other	0.5%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	51.9%
Medicaid/BadgerCare	10.9%
Other Government	1.0%
Commercial or Private Insurance	32.7%
Self-Pay	3.4%
Other or Unknown Insurance	0.0%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	7.1%	4.7%
Under 15	1.7%	1.3%
15 - 19	2.1%	1.5%
20 - 24	4.2%	3.3%
25 - 34	8.3%	6.3%
35 - 44	8.0%	6.4%
45 - 54	10.0%	8.6%
55 - 64	10.7%	10.6%
65 - 74	14.6%	17.1%
75 - 84	20.1%	23.7%
85 & Over	13.2%	16.6%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	41.9%	42.8%
Female	58.1%	57.2%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.3%	0.2%
Asian/Pacific Isl.	1.6%	1.0%
Black	0.6%	0.4%
White	95.4%	96.5%
Other	1.9%	1.7%
Unknown	0.2%	0.2%
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	59	3.3	4.2	0.78	4.4	0.75	4.5	0.73
088 Chronic Obstructive Pulmonary Disease	85	3.8	3.7	1.04	4.0	0.96	3.8	1.01
089 Simple Pneumonia & Pleurisy Age >17 w CC	130	4.3	4.3	1.00	4.5	0.96	4.3	1.00
127 Heart Failure & Shock	137	3.8	3.9	0.98	4.4	0.87	4.3	0.89
143 Chest Pain	56	1.7	1.8	0.96	1.5	1.15	1.5	1.15
174 G.I. Hemorrhage w CC	81	3.3	3.5	0.95	4.0	0.83	3.6	0.93
182 G.I. Disorders Age >17 w CC	104	3.9	3.5	1.12	3.6	1.08	3.5	1.12
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	47	2.1	1.6	1.30	1.8	1.16	1.8	1.16
371 Cesarean Section w/o CC	65	3.6	3.6	1.01	3.3	1.10	3.5	1.04
373 Vaginal Delivery w/o Complicating Diagnosis	201	2.0	2.1	0.98	2.0	1.02	2.1	0.98
390 Neonate w Other Significant Problems	58	2.7	2.4	1.11	2.4	1.11	2.4	1.11
391 Normal Newborn	257	2.1	2.0	1.05	2.0	1.05	2.0	1.05
430 Psychoses	235	3.6	5.2	0.69	5.3	0.68	5.9	0.61
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	134	2.4	2.6	0.93	2.8	0.87	2.8	0.87
544 Maj Joint Replace/Reattachment of Lower Extremity	181	2.3	3.4	0.69	3.7	0.63	3.7	0.63

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	\$12,211	\$12,943	\$14,258	0.91	\$16,764	0.77	\$16,199	0.80
088 Chronic Obstructive Pulmonary Disease	\$12,237	\$11,289	\$9,548	1.18	\$10,866	1.04	\$9,882	1.14
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$13,850	\$12,045	\$10,253	1.17	\$11,396	1.06	\$10,587	1.14
127 Heart Failure & Shock	\$14,244	\$13,154	\$10,693	1.23	\$12,343	1.07	\$11,450	1.15
143 Chest Pain	\$11,407	\$11,229	\$7,761	1.45	\$8,562	1.31	\$7,890	1.42
174 G.I. Hemorrhage w CC	\$15,101	\$13,721	\$11,827	1.16	\$13,383	1.03	\$12,018	1.14
182 G.I. Disorders Age >17 w CC	\$12,969	\$11,473	\$9,400	1.22	\$10,899	1.05	\$10,012	1.15
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	\$17,712	\$17,575	\$11,829	1.49	\$14,080	1.25	\$13,120	1.34
371 Cesarean Section w/o CC	\$12,169	\$12,139	\$9,141	1.33	\$10,584	1.15	\$10,694	1.14
373 Vaginal Delivery w/o Complicating Diagnosis	\$4,436	\$4,418	\$3,838	1.15	\$5,287	0.84	\$5,352	0.83
390 Neonate w Other Significant Problems	\$2,560	\$2,854	\$2,502	1.14	\$2,979	0.96	\$3,053	0.93
391 Normal Newborn	\$1,776	\$1,640	\$1,637	1.00	\$1,739	0.94	\$1,820	0.90
430 Psychoses	\$7,078	#	#	#	#	#	#	#
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	\$4,094	#	#	#	#	#	#	#
544 Maj Joint Replace/Reattachment of Lower Extremity	\$40,141	\$41,779	\$31,727	1.32	\$32,161	1.30	\$30,208	1.38

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.