

**189 Aurora Medical Center - Kenosha**  
**10400 75th St**  
**Kenosha, WI 53142**  
**262-948-5600**

Hospital Type: **GMS**  
County: **Kenosha**  
Analysis Area: **2A-Southeastern**  
Inpatient Volume Group: **5**

**Overall Hospital Utilization**

Total Discharges:	6,758	Average Length of Stay (days):	2.9
Total Patient Days:	19,303	Average Charge per Discharge:	\$12,966

**Obstetrical Utilization**

Normal Childbirths:	817	Percent of All Childbirths:	64.7%
Cesarean Childbirths:	290	Percent of All Childbirths:	23.0%
Other Childbirths:	156	Percent of All Childbirths:	12.4%
Total Childbirths:	1,263		
Total Newborns:	1,268		

**Psychiatric Utilization**

Discharges:	24	Percent of All Discharges:	0.4%
Patient Days:	82	Percent of All Patient Days:	0.4%

**AODA Utilization**

Discharges:	39	Percent of All Discharges:	0.6%
Patient Days:	117	Percent of All Patient Days:	0.6%

**Patient Discharge Status**

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	83.7%
Other GMS Hospital	3.5%
Critical Access Hospital (CAH)	0.0%
Skilled Nursing Facility	7.3%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	0.3%
Hospice	1.1%
Other Institution	0.0%
Home Health/Home IV Provider	2.2%
Left Against Medical Advice	0.7%
Expired	0.8%
Other	0.4%

**Expected Pay Source Distribution**

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	27.3%
Medicaid/BadgerCare	33.4%
Other Government	2.7%
Commercial or Private Insurance	32.9%
Self-Pay	3.7%
Other or Unknown Insurance	0.0%

**Age Distribution**

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	18.8%	11.1%
Under 15	6.1%	4.8%
15 - 19	3.4%	2.4%
20 - 24	8.3%	5.7%
25 - 34	13.4%	10.2%
35 - 44	10.4%	9.5%
45 - 54	9.8%	11.6%
55 - 64	8.1%	10.8%
65 - 74	7.5%	11.3%
75 - 84	9.5%	14.9%
85 & Over	4.7%	7.8%

**Sex Distribution**

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	35.2%	38.9%
Female	64.8%	61.1%

**Race Distribution**

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Native American	0.0%	0.0%
Asian/Pacific Isl.	0.7%	0.6%
Black	11.3%	10.8%
White	74.1%	77.9%
Other	12.7%	10.0%
Unknown	1.2%	0.7%
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	40	3.7	4.5	0.82	4.4	0.84	4.5	0.82
088 Chronic Obstructive Pulmonary Disease	122	4.0	4.1	0.99	4.0	1.01	3.8	1.06
089 Simple Pneumonia & Pleurisy Age >17 w CC	153	4.2	4.6	0.92	4.5	0.94	4.3	0.98
127 Heart Failure & Shock	93	4.2	5.2	0.80	4.4	0.95	4.3	0.97
143 Chest Pain	196	1.6	1.4	1.14	1.5	1.07	1.5	1.07
174 G.I. Hemorrhage w CC	60	4.4	3.8	1.16	4.0	1.10	3.6	1.22
182 G.I. Disorders Age >17 w CC	137	3.9	3.7	1.06	3.6	1.08	3.5	1.12
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	239	1.5	1.7	0.89	1.8	0.84	1.8	0.84
371 Cesarean Section w/o CC	246	2.4	3.4	0.72	3.3	0.74	3.5	0.70
373 Vaginal Delivery w/o Complicating Diagnosis	817	1.8	2.1	0.84	2.0	0.89	2.1	0.84
390 Neonate w Other Significant Problems	310	1.8	2.3	0.79	2.4	0.76	2.4	0.76
391 Normal Newborn	931	1.6	2.0	0.81	2.0	0.81	2.0	0.81
430 Psychoses	12	3.6	6.9	0.52	5.3	0.68	5.9	0.61
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	13	2.0	2.4	0.83	2.8	0.71	2.8	0.71
544 Maj Joint Replace/Reattachment of Lower Extremity	105	3.3	4.0	0.82	3.7	0.89	3.7	0.89

**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	\$21,108	\$18,750	\$15,884	1.18	\$16,764	1.12	\$16,199	1.16
088 Chronic Obstructive Pulmonary Disease	\$14,704	\$11,527	\$11,006	1.05	\$10,866	1.06	\$9,882	1.17
089 Simple Pneumonia & Pleurisy Age >17 w CC	\$16,155	\$12,084	\$10,972	1.10	\$11,396	1.06	\$10,587	1.14
127 Heart Failure & Shock	\$16,663	\$12,632	\$11,808	1.07	\$12,343	1.02	\$11,450	1.10
143 Chest Pain	\$10,545	\$9,938	\$8,572	1.16	\$8,562	1.16	\$7,890	1.26
174 G.I. Hemorrhage w CC	\$17,983	\$12,812	\$12,969	0.99	\$13,383	0.96	\$12,018	1.07
182 G.I. Disorders Age >17 w CC	\$14,879	\$11,893	\$10,683	1.11	\$10,899	1.09	\$10,012	1.19
359 Uterine & Adnexa Proc for Non-Malignancy w/o CC	\$19,081	\$19,019	\$14,924	1.27	\$14,080	1.35	\$13,120	1.45
371 Cesarean Section w/o CC	\$11,582	\$11,648	\$10,960	1.06	\$10,584	1.10	\$10,694	1.09
373 Vaginal Delivery w/o Complicating Diagnosis	\$5,691	\$5,681	\$6,098	0.93	\$5,287	1.07	\$5,352	1.06
390 Neonate w Other Significant Problems	\$2,601	\$2,590	\$2,782	0.93	\$2,979	0.87	\$3,053	0.85
391 Normal Newborn	\$2,224	\$2,059	\$1,879	1.10	\$1,739	1.18	\$1,820	1.13
430 Psychoses	\$14,401	#	#	#	#	#	#	#
523 Alcohol/Drug Abuse/Dependence w/o Rehab w/o CC	\$7,073	#	#	#	#	#	#	#
544 Maj Joint Replace/Reattachment of Lower Extremity	\$41,124	\$41,678	\$33,335	1.25	\$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.