

**079 Froedtert Memorial Lutheran Hospital**  
**9200 W Wisconsin Ave, PO Box 26099**  
**Milwaukee, WI 53226**  
**414-805-3000**

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

**Overall Hospital Utilization**

Total Discharges:	27,180	Average Length of Stay (days):	4.9
Total Patient Days:	134,226	Average Charge per Discharge:	\$26,446

**Obstetrical Utilization**

Normal Childbirths:	1,198	Percent of All Childbirths:	70.5%
Cesarean Childbirths:	412	Percent of All Childbirths:	24.2%
Other Childbirths:	90	Percent of All Childbirths:	5.3%
<b>Total Childbirths:</b>	<b>1,700</b>		
<b>Total Newborns:</b>	<b>1,734</b>		

**Psychiatric Utilization**

Discharges:	193	Percent of All Discharges:	0.7%
Patient Days:	596	Percent of All Patient Days:	0.4%

**AODA Utilization**

Discharges:	93	Percent of All Discharges:	0.3%
Patient Days:	341	Percent of All Patient Days:	0.3%

**Patient Discharge Status**

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	72.0%
Other GMS Hospital	0.5%
Critical Access Hospital (CAH)	0.0%
Skilled Nursing Facility	6.5%
Intermediate Care Facility	0.1%
Inpatient Rehabilitation Facility	2.2%
Hospice	1.2%
Other Institution	1.3%
Home Health Service	11.2%
Left Against Medical Advice	0.8%
Expired	2.0%
Other	2.2%

**Expected Pay Source Distribution**

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	35.1%
Medicaid/BadgerCare	19.0%
Other Government	5.8%
Commercial or Private Insurance	35.1%
Self-Pay	4.4%
Other or Unknown Insurance	0.6%

**Age Distribution**

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	6.4%	3.1%
Under 15	0.2%	0.2%
15 - 19	2.3%	2.1%
20 - 24	5.8%	5.9%
25 - 34	11.7%	10.3%
35 - 44	13.5%	12.8%
45 - 54	18.1%	18.8%
55 - 64	17.3%	19.2%
65 - 74	11.5%	13.2%
75 - 84	9.4%	10.5%
85 & Over	3.8%	3.8%

**Sex Distribution**

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	46.2%	50.6%
Female	53.8%	49.4%

**Race Distribution**

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Amer.Ind/Alaskan Native	0.4%	0.4%
Asian	1.2%	1.0%
Black/African Amer.	28.0%	25.1%
Native Hawaii/Pac.Isl.	0.0%	0.0%
White	63.9%	66.9%
Other	5.4%	5.5%
Unknown	1.1%	1.1%
Not Asked	0 %	0 %

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**APR-DRG Specific Data - Average Length of Stay (ALOS)**

APR-DRG # and Description	This Facility		Group Averages					
	Discharges	ALOS	Analysis Area		Inpatient Volume Group		All GMS Hospitals	
			ALOS	Ratio	ALOS	Ratio	ALOS	Ratio
139 Pneumonia	423	3.9	4.3	0.91	4.3	0.91	4.1	0.95
140 Chronic Obstructive Pulmonary Disease	301	3.1	3.8	0.82	4.1	0.76	3.9	0.79
175 Angioplasty without Heart Attack	210	2.9	2.1	1.38	2.0	1.45	1.9	1.53
194 Heart Failure	501	3.9	4.5	0.87	4.6	0.85	4.3	0.91
201 Arrhythmia and Conduction Disorders	324	2.9	3.0	0.97	2.9	1.00	2.7	1.07
221 Major Bowel Procedures	278	11.8	10.3	1.15	9.8	1.20	9.2	1.28
301 Hip Replacement	233	4.3	4.1	1.05	4.0	1.08	4.0	1.08
302 Knee Replacement	316	3.8	3.7	1.03	3.5	1.09	3.5	1.09
383 Cellulitis and Other Bacterial Skin Infections	331	3.4	3.7	0.92	3.9	0.87	3.9	0.87
460 Renal Failure	349	4.3	5.3	0.81	5.2	0.83	5.0	0.86
540 Cesarean Delivery	412	5.5	4.5	1.22	4.2	1.31	3.8	1.45
560 Vaginal Delivery	1198	2.6	2.4	1.08	2.3	1.13	2.2	1.18
640 Normal Newborn, Birthweight 2500g+	1299	2.5	2.3	1.09	2.2	1.14	2.2	1.14
720 Septicemia	266	8.5	7.1	1.20	6.9	1.23	6.3	1.35
860 Rehabilitation	554	14.8	12.8	1.16	12.7	1.17	12.6	1.17

**APR-DRG Specific Data - Average Charge per Discharge (Actual & Risk-Adjusted<sup>^</sup>)**

APR-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
139 Pneumonia	\$14,739	\$13,393	\$16,904	0.79	\$14,796	0.91	\$13,336	1.00
140 Chronic Obstructive Pulmonary Disease	\$11,882	\$11,364	\$15,317	0.74	\$13,844	0.82	\$12,805	0.89
175 Angioplasty without Heart Attack	\$37,674	\$35,464	\$44,741	0.79	\$37,519	0.95	\$37,099	0.96
194 Heart Failure	\$13,870	\$13,863	\$17,710	0.78	\$15,682	0.88	\$14,564	0.95
201 Arrhythmia and Conduction Disorders	\$11,692	\$11,111	\$13,134	0.85	\$11,645	0.95	\$11,074	1.00
221 Major Bowel Procedures	\$49,617	\$47,792	\$49,341	0.97	\$46,340	1.03	\$44,919	1.06
301 Hip Replacement	\$45,111	\$43,471	\$40,447	1.07	\$34,902	1.25	\$34,651	1.25
302 Knee Replacement	\$38,247	\$37,037	\$37,532	0.99	\$31,977	1.16	\$32,340	1.15
383 Cellulitis and Other Bacterial Skin Infections	\$10,792	\$10,011	\$13,521	0.74	\$12,104	0.83	\$11,328	0.88
460 Renal Failure	\$14,862	\$15,549	\$21,821	0.71	\$19,583	0.79	\$18,178	0.86
540 Cesarean Delivery	\$14,641	\$12,661	\$14,737	0.86	\$12,660	1.00	\$12,405	1.02
560 Vaginal Delivery	\$6,795	\$6,307	\$7,739	0.81	\$6,459	0.98	\$6,144	1.03
640 Normal Newborn, Birthweight 2500g+	\$2,547	\$1,931	\$2,753	0.70	\$2,406	0.80	\$2,293	0.84
720 Septicemia	\$41,867	\$34,177	\$35,514	0.96	\$32,114	1.06	\$29,043	1.18
860 Rehabilitation	\$34,806	\$31,931	\$33,493	0.95	\$30,454	1.05	\$29,678	1.08

N/A - Zero Discharges reported for APR-DRG

<sup>^</sup> Risk-Adjusted Charges calculated using 3M™ APR DRG Software Version 25.0 licensed through 3M Health Information Systems.

\* - 1 through 4 Discharges reported for APR-DRG

# Risk-Adjusted Charges not calculated for APR-DRGs related to Mental Diseases/Disorders and/or Alcohol/Drug Use/Abuse/Dependence.