

**092 Theda Clark Medical Center**  
**130 Second Street, PO Box 2021**  
**Neenah, WI 54956**  
**920-729-3100**

Hospital Type: GMS  
 County: Winnebago  
 Analysis Area: 3-Lake Winnebago  
 Inpatient Volume Group: 6

**Overall Hospital Utilization**

Total Discharges:	9,518	Average Length of Stay (days):	3.8
Total Patient Days:	36,076	Average Charge per Discharge:	\$13,790

**Obstetrical Utilization**

Normal Childbirths:	839	Percent of All Childbirths:	67.1%
Cesarean Childbirths:	402	Percent of All Childbirths:	32.1%
Other Childbirths:	10	Percent of All Childbirths:	0.8%
<b>Total Childbirths:</b>	<b>1,251</b>		
<b>Total Newborns:</b>	<b>1,292</b>		

**Psychiatric Utilization**

Discharges:	685	Percent of All Discharges:	7.2%
Patient Days:	3,027	Percent of All Patient Days:	8.4%

**AODA Utilization**

Discharges:	277	Percent of All Discharges:	2.9%
Patient Days:	672	Percent of All Patient Days:	1.9%

**Patient Discharge Status**

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	76.2%
Other GMS Hospital	1.2%
Critical Access Hospital (CAH)	0.0%
Skilled Nursing Facility	9.1%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	1.5%
Hospice	1.0%
Other Institution	2.2%
Home Health Service	5.0%
Left Against Medical Advice	0.3%
Expired	1.7%
Other	1.7%

**Expected Pay Source Distribution**

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	33.4%
Medicaid/BadgerCare	9.7%
Other Government	0.5%
Commercial or Private Insurance	49.9%
Self-Pay	3.3%
Other or Unknown Insurance	3.1%

**Age Distribution**

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	13.6%	7.3%
Under 15	0.3%	0.2%
15 - 19	2.3%	2.7%
20 - 24	4.9%	4.9%
25 - 34	14.6%	12.9%
35 - 44	11.4%	11.5%
45 - 54	13.2%	13.8%
55 - 64	11.8%	13.2%
65 - 74	11.4%	13.8%
75 - 84	10.9%	13.1%
85 & Over	5.4%	6.6%

**Sex Distribution**

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	40.8%	44.3%
Female	59.2%	55.7%

**Race Distribution**

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Amer.Ind/Alaskan Native	0.5%	0.7%
Asian	0.8%	1.1%
Black/African Amer.	0.6%	0.5%
Native Hawaii/Pac.Isl.	0.0%	0.0%
White	95.9%	95.2%
Other	0.9%	1.1%
Unknown	0.8%	0.6%
Not Asked	0.5%	0.7%

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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	126	4.2	3.6	1.17	4.3	0.98	4.1	1.02
140 Chronic Obstructive Pulmonary Disease	73	4.2	3.6	1.17	4.1	1.02	3.9	1.08
175 Angioplasty without Heart Attack	15	2.5	1.7	1.47	2.0	1.25	1.9	1.32
194 Heart Failure	124	3.6	3.7	0.97	4.6	0.78	4.3	0.84
201 Arrhythmia and Conduction Disorders	75	3.2	2.7	1.19	2.9	1.10	2.7	1.19
221 Major Bowel Procedures	85	8.8	8.5	1.04	9.8	0.90	9.2	0.96
301 Hip Replacement	123	3.5	3.9	0.90	4.0	0.88	4.0	0.88
302 Knee Replacement	179	3.4	3.5	0.97	3.5	0.97	3.5	0.97
383 Cellulitis and Other Bacterial Skin Infections	69	4.8	4.1	1.17	3.9	1.23	3.9	1.23
460 Renal Failure	84	4.8	4.5	1.07	5.2	0.92	5.0	0.96
540 Cesarean Delivery	402	3.9	3.5	1.11	4.2	0.93	3.8	1.03
560 Vaginal Delivery	839	2.3	2.2	1.05	2.3	1.00	2.2	1.05
640 Normal Newborn, Birthweight 2500g+	1070	2.2	2.1	1.05	2.2	1.00	2.2	1.00
720 Septicemia	80	6.7	5.8	1.16	6.9	0.97	6.3	1.06
860 Rehabilitation	148	14.9	13.7	1.09	12.7	1.17	12.6	1.18

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

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	\$11,993	\$11,430	\$10,061	1.14	\$14,796	0.77	\$13,336	0.86
140 Chronic Obstructive Pulmonary Disease	\$10,309	\$10,328	\$10,055	1.03	\$13,844	0.75	\$12,805	0.81
175 Angioplasty without Heart Attack	\$28,343	\$24,517	\$29,798	0.82	\$37,519	0.65	\$37,099	0.66
194 Heart Failure	\$10,194	\$9,914	\$10,278	0.96	\$15,682	0.63	\$14,564	0.68
201 Arrhythmia and Conduction Disorders	\$8,078	\$7,736	\$8,384	0.92	\$11,645	0.66	\$11,074	0.70
221 Major Bowel Procedures	\$33,050	\$32,477	\$32,100	1.01	\$46,340	0.70	\$44,919	0.72
301 Hip Replacement	\$23,464	\$23,718	\$27,188	0.87	\$34,902	0.68	\$34,651	0.68
302 Knee Replacement	\$25,511	\$25,281	\$25,944	0.97	\$31,977	0.79	\$32,340	0.78
383 Cellulitis and Other Bacterial Skin Infections	\$10,743	\$9,589	\$8,978	1.07	\$12,104	0.79	\$11,328	0.85
460 Renal Failure	\$14,212	\$13,025	\$13,819	0.94	\$19,583	0.67	\$18,178	0.72
540 Cesarean Delivery	\$7,361	\$6,992	\$8,078	0.87	\$12,660	0.55	\$12,405	0.56
560 Vaginal Delivery	\$3,230	\$3,154	\$3,478	0.91	\$6,459	0.49	\$6,144	0.51
640 Normal Newborn, Birthweight 2500g+	\$1,333	\$1,377	\$1,495	0.92	\$2,406	0.57	\$2,293	0.60
720 Septicemia	\$24,458	\$22,834	\$20,639	1.11	\$32,114	0.71	\$29,043	0.79
860 Rehabilitation	\$24,825	\$23,700	\$24,603	0.96	\$30,454	0.78	\$29,678	0.80

N/A - Zero Discharges reported for APR-DRG

^ 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.