

**043 Aurora Medical Center in Hartford**  
**1032 East Sumner Street**  
**Hartford, WI 53027**  
**262-673-2300**

Hospital Type: GMS  
County: Washington  
Analysis Area: 2A-Southeastern  
Inpatient Volume Group: 4

**Overall Hospital Utilization**

Total Discharges:	2,764	Average Length of Stay (days):	3.1
Total Patient Days:	8,505	Average Charge per Discharge:	\$16,772

**Obstetrical Utilization**

Normal Childbirths:	204	Percent of All Childbirths:	75.8%
Cesarean Childbirths:	62	Percent of All Childbirths:	23.0%
Other Childbirths:	3	Percent of All Childbirths:	1.1%
<b>Total Childbirths:</b>	<b>269</b>		
<b>Total Newborns:</b>	<b>269</b>		

**Psychiatric Utilization**

Discharges:	7	Percent of All Discharges:	0.3%
Patient Days:	19	Percent of All Patient Days:	0.2%

**AODA Utilization**

Discharges:	17	Percent of All Discharges:	0.6%
Patient Days:	53	Percent of All Patient Days:	0.6%

**Patient Discharge Status**

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	69.0%
Other GMS Hospital	5.8%
Critical Access Hospital (CAH)	0.0%
Skilled Nursing Facility	13.3%
Intermediate Care Facility	1.2%
Inpatient Rehabilitation Facility	0.2%
Hospice	1.9%
Other Institution	0.1%
Home Health Service	6.1%
Left Against Medical Advice	0.1%
Expired	1.5%
Other	0.9%

**Expected Pay Source Distribution**

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	46.9%
Medicaid/BadgerCare	9.0%
Other Government	1.8%
Commercial or Private Insurance	38.8%
Self-Pay	3.5%
Other or Unknown Insurance	0.0%

**Age Distribution**

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	9.7%	6.3%
Under 15	2.9%	1.6%
15 - 19	2.1%	1.3%
20 - 24	3.0%	2.1%
25 - 34	8.2%	6.4%
35 - 44	7.3%	5.4%
45 - 54	12.0%	11.1%
55 - 64	11.7%	12.1%
65 - 74	13.6%	17.2%
75 - 84	17.5%	21.0%
85 & Over	12.0%	15.5%

**Sex Distribution**

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	39.5%	40.2%
Female	60.5%	59.8%

**Race Distribution**

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Amer.Ind/Alaskan Native	0.1%	0.2%
Asian	0.2%	0.2%
Black/African Amer.	0.5%	0.3%
Native Hawaii/Pac.Isl.	0.1%	0.0%
White	95.3%	96.7%
Other	1.4%	1.0%
Unknown	2.4%	1.6%
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	131	3.7	4.5	0.82	3.9	0.95	4.1	0.90
140 Chronic Obstructive Pulmonary Disease	55	3.8	4.3	0.88	3.9	0.97	4.0	0.95
194 Heart Failure	94	4.3	4.6	0.93	3.9	1.10	4.3	1.00
201 Arrhythmia and Conduction Disorders	74	2.6	2.8	0.93	2.5	1.04	2.7	0.96
221 Major Bowel Procedures	34	7.0	8.8	0.80	8.2	0.85	8.8	0.80
301 Hip Replacement	92	3.5	4.1	0.85	3.8	0.92	4.0	0.88
302 Knee Replacement	116	3.4	3.6	0.94	3.1	1.10	3.4	1.00
383 Cellulitis and Other Bacterial Skin Infections	43	3.7	4.2	0.88	3.8	0.97	3.9	0.95
463 Kidney/Urinary Tract Infection	56	3.4	3.9	0.87	3.5	0.97	3.6	0.94
513 Uterine Procedures without Tumor	40	1.7	1.9	0.89	1.6	1.06	1.9	0.89
540 Cesarean Delivery	62	3.2	3.4	0.94	3.1	1.03	3.8	0.84
560 Vaginal Delivery	204	1.9	2.1	0.90	2.0	0.95	2.2	0.86
640 Normal Newborn, Birthweight 2500g+	255	2.0	2.1	0.95	2.1	0.95	2.2	0.91
720 Septicemia	42	4.2	6.5	0.65	4.9	0.86	6.5	0.65
775 Alcohol Abuse/Dependence	14	3.1	3.4	0.91	3.1	1.00	3.4	0.91

**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 Average Charge	Analysis Area		Inpatient Volume Group		All GMS Hospitals	
		Charge	Charge	Average Charge	Ratio	Average Charge	Ratio	Average Charge
139 Pneumonia	\$16,001	\$16,380	\$15,099	1.08	\$13,755	1.19	\$14,207	1.15
140 Chronic Obstructive Pulmonary Disease	\$17,202	\$18,011	\$14,293	1.26	\$13,820	1.30	\$14,252	1.26
194 Heart Failure	\$18,822	\$18,205	\$15,959	1.14	\$15,151	1.20	\$15,902	1.14
201 Arrhythmia and Conduction Disorders	\$12,199	\$12,444	\$11,906	1.05	\$11,690	1.06	\$11,791	1.06
221 Major Bowel Procedures	\$45,590	\$54,783	\$49,415	1.11	\$44,611	1.23	\$46,922	1.17
301 Hip Replacement	\$42,317	\$43,094	\$39,603	1.09	\$35,618	1.21	\$36,693	1.17
302 Knee Replacement	\$42,272	\$42,373	\$39,239	1.08	\$34,726	1.22	\$34,132	1.24
383 Cellulitis and Other Bacterial Skin Infections	\$12,819	\$12,747	\$12,682	1.01	\$11,361	1.12	\$12,303	1.04
463 Kidney/Urinary Tract Infection	\$13,143	\$12,611	\$12,463	1.01	\$11,215	1.12	\$11,651	1.08
513 Uterine Procedures without Tumor	\$15,864	\$16,693	\$18,349	0.91	\$16,102	1.04	\$17,042	0.98
540 Cesarean Delivery	\$15,373	\$16,501	\$14,084	1.17	\$12,936	1.28	\$13,440	1.23
560 Vaginal Delivery	\$7,983	\$8,186	\$8,159	1.00	\$6,063	1.35	\$6,689	1.22
640 Normal Newborn, Birthweight 2500g+	\$2,793	\$3,038	\$2,564	1.18	\$2,293	1.32	\$2,462	1.23
720 Septicemia	\$20,591	\$24,541	\$29,974	0.82	\$24,296	1.01	\$32,465	0.76
775 Alcohol Abuse/Dependence	\$11,586	#	#	#	#	#	#	#

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.