306 Bellin Health Oconto Hospital

820 Arbutus Avenue Oconto, WI 54153 920-835-1100

Inpatient Days

356

Preferred Provider

Organization (PPO)

Fiscal Year: Type: 10/01 to 09/30 GMS

Inpatient Days

291

Newborn Days

0

GMS An Critical Access Hospital Vol

County: C

Oconto

Analysis Area: Northeastern (4) Volume Group: 5

Control: Other Not-For-Profit

		All GMS Hospitals		Analysis Area		Volume Group		FY 2020 vs. 2019	
				4	4 5		·		
Selected Utilization Statistics	FY 2020	Value	Ratio	Value	Ratio	Value	Ratio	FY 2019	Ratio
Occupancy Rate (%)									
Adult Medical-Surgical	9.7%	52.4%	0.19	50.1%	0.19	44.9%	0.22	9.5%	1.03
Obstetrics	0.0%	36.2%	N/A	30.3%	N/A	25.5%	N/A	0.0%	N/A
Pediatrics	0.0%	53.2%	N/A	19.9%	N/A	98.6%	N/A	0.0%	N/A
Total Hospital	9.7%	53.9%	0.18	46.7%	0.21	52.8%	0.18	9.5%	1.03
Average Census (Patients)									
Adult Medical-Surgical	1.0	25.5	0.04	23.5	0.04	15.7	0.06	0.9	1.03
Obstetrics	0.0	4.7	N/A	3.8	N/A	2.3	N/A	0.0	N/A
Pediatrics	0.0	1.1	N/A	0.5	N/A	4.7	N/A	0.0	N/A
Total Hospital	1.0	47.4	0.02	41.3	0.02	36.1	0.03	0.9	1.03
Average Length of Stay (Days)									
Adult Medical-Surgical	3.0	4.3	0.70	4.0	0.75	3.7	0.82	2.7	1.10
Obstetrics	0.0	2.4	N/A	2.2	N/A	2.2	N/A	0.0	N/A
Pediatrics	0.0	3.5	N/A	3.0	N/A	3.6	N/A	0.0	N/A
Total Hospital	3.0	4.7	0.65	4.1	0.74	4.4	0.68	2.7	1.11
Surgical Operations									
Inpatient	17	1,280	0.01	912	0.02	711	0.02	17	1.00
Outpatient	751	4,115	0.18	4,561	0.16	2,960	0.25	381	1.97
Inpatient as % of All Surgeries	2.2%	23.7%	0.09	16.7%	0.13	19.4%	0.11	4.3%	0.52
Outpatient Visits									
Non-Emergency Visits	18,698	127,898	0.15	178,054	0.11	117,985	0.16	16,844	1.11
Emergency Visits	2,216	15,799	0.14	16,398	0.14	14,651	0.15	2,165	1.02
Full-Time Equivalents (FTEs)									
Administrators	4.0	20.3	0.20	15.2	0.26	17.3	0.23	7.1	0.56
Nurses, Licensed	115.4	255.1	0.45	279.4	0.41	217.2	0.53	100.5	1.15
Ancillary Nursing Personnel	1.8	42.6	0.04	41.9	0.04	30.0	0.06	3.6	0.49
All Other Personnel	148.7	501.2	0.30	501.4	0.30	363.9	0.41	154.9	0.96
Total FTEs	269.8	819.2	0.33	837.9	0.32	628.4	0.43	266.1	1.01
FTEs per 100 Patient Census (Adjusted])				0.57		0.04		
Administrators	5.6	15.7	0.36	9.9	0.57	16.4	0.34	10.7	0.53
Nurses, Licensed	161.3	197.1	0.82	181.6	0.89	206.1	0.78	150.6	1.07
Ancillary Nursing Personnel	2.5	33.0	0.07	27.2	0.09	28.5	0.09	5.4	0.46
All Other Personnel	207.9	387.2	0.54	325.9	0.64	345.3	0.60	232.2	0.90
Total FTEs	377.3	633.0	0.60	544.7	0.69	596.3	0.63	398.9	0.95
Total Hospital:	Contract with:			care-certified S				Nursery:	
Beds Set Up & Staffed 10	Health Maintenance	Voo		verage Beds Us	ed	3	Bassi		0
Discharges 118	Organization (HM	O) 168		ischarges		25	Total		0

Yes

306 Bellin Health Oconto Hospital

Oconto, WI 54153

		Beds Set Up				Average	Average	
	Level of	& Staffed	Discharges &	Patient Days	Occupancy	Census	Length of Stay	
Inpatient Service Area	Service*	09/30/2020	Transfers**	of Care	Rate (%)	(Patients)	(Days)	
General Medical-Surgical								
Adult Medical-Surgical, Acute	2	10	118	356	9.7%	1.0	3.0	
Orthopedic	2	0	0	0	0.0%	0.0	0.0	
Rehabilitation & Physical Medicine	2	0	0	0	0.0%	0.0	0.0	
Hospice	5	0	0	0	0.0%	0.0	0.0	
Acute Long-Term Care	3	0	0	0	0.0%	0.0	0.0	
Other Acute	5	0	0	0	0.0%	0.0	0.0	
Pediatric, acute	3	0	0	0	0.0%	0.0	0.0	
Obstetrics	3	0	0	0	0.0%	0.0	0.0	
Psychiatric	3	0	0	0	0.0%	0.0	0.0	
Alcoholism/chemical dependency	3	0	0	0	0.0%	0.0	0.0	
ICU/CCU								
Medical-Surgical Intensive Care	3	0	0	0	0.0%	0.0	0.0	
Cardiac Intensive Unit	3	0	0	0	0.0%	0.0	0.0	
Pediatric Intensive Care	5	0	0	0	0.0%	0.0	0.0	
Burn Care	5	0	0	0	0.0%	0.0	0.0	
Mixed Intensive Care	3	0	0	0	0.0%	0.0	0.0	
Step-Down (Special Care)	3	0	0	0	0.0%	0.0	0.0	
Neonatal Intensive/Intermediate Care	4	0	0	0	0.0%	0.0	0.0	
Other Intensive Care	5	0	0	0	0.0%	0.0	0.0	
Subacute care	5	0	0	0	0.0%	0.0	0.0	
Other inpatient	5	0	0_	0	0.0%	0.0	0.0	

^{* 1 =} Provided-Distinct Unit, 2 = Provided-Not Distinct Unit, 3 = Available in Network 4 = Contracted, 5 = Service Not Provided

	Number	Number	Number			Number	Number	Number
Occupation	Full-Time	Part-Time	FTE	Occupation		Full-Time	Part-Time	FTE
Administrators/Assistant Administrators	4	0	4.0	Surgical Personnel		3	5	4.4
Physicians & Dentists	11	23	15.9	Radiological Services Personnel		11	7	13.5
Medical & Dental Residents	0	0	0.0	Sonographers		5	1	5.4
Dental Hygienists	0	0	0.0	Respiratory Therapists		0	0	0.0
Registered Nurses	48	33	59.5	Occupational Therapists		0	4	0.4
Certified Nurse Midwives	0	1	0.3	Occupational Therapy Assistants/Aides		0	0	0.0
Licensed Practical Nurses	33	8	37.9	Physical Therapists		0	5	8.0
Ancillary Nursing Personnel	1	2	1.8	Physical Therapy Assistants/Aides		0	2	0.3
Medical Assistants	18	9	21.9	Recreational Therapists		0	0	0.0
Physician Assistants	8	4	9.3	Dietitians & Nutritionists		0	4	1.1
Nurse Practitioners	14	13	16.7	Psychologists		0	0	0.0
Certified Registered Nurse Anesthetists	1	0	1.0	Social Workers		2	1	2.2
Clinical Nurse Specialists	0	0	0.0	All Other Health Professionals		12	10	15.6
Health Info Mgmt-Administrators/Technicians	0	0	0.0	All Other Personnel		43	13	46.6
Pharmacy Personnel	2	1	2.1		Total	223	152	269.8
Clinical Laboratory Personnel	7	6	9.2					

Note: data should be used only in rows; do not summarize columns.

** Transfers, which may be estimated, refer only to those between units.

306 Bellin Health Oconto Hospital

conto, WI 54153		All GMS Hospitals		Analysis Area		Volume Group		FY 2020 vs. 2019		
Selected Financial Statistics		FY 2020	Value	Ratio	4 Value	Ratio	5 Value	Ratio	FY 2019	Ratio
Gross Revenue as % of Total G	Fross Patient Revenue									
Medicare	\$55,374,049	43.4%	46.6%	0.93	47.2%	0.92	41.7%	1.04	46.2%	0.94
Medical Assistance	\$15,534,378	12.2%	13.8%	0.89	11.7%	1.04	18.4%	0.66	14.9%	0.82
Commercial	\$53,389,683	41.9%	34.5%	1.21	36.7%	1.14	36.0%	1.16	38.0%	1.10
All Other	\$3,225,472	2.5%	5.1%	0.49	4.4%	0.57	4.0%	0.63	0.8%	3.07
Deductions as % of Total Gros										
Medicare	\$35,702,931	28.0%	35.0%	0.80	36.0%	0.78	30.1%	0.93	25.9%	1.08
Medical Assistance	\$8,503,785	6.7%	10.4%	0.64	9.0%	0.74	12.3%	0.54	10.2%	0.65
Commercial	\$15,329,481	12.0%	14.5%	0.83	15.2%	0.79	12.1%	1.00	12.3%	0.98
Charity Care	\$1,277,030	1.0%	1.0%	1.04	0.8%	1.32	0.8%	1.22	1.0%	0.99
Bad Debt	\$1,851,124	1.5%	1.2%	1.24	1.1%	1.32	1.1%	1.31	1.7%	0.84
All Other	\$1,197,041	0.9%	2.6%	0.37	2.7%	0.35	2.3%	0.40	0.3%	2.70
Total Deductions	\$63,861,392;	50.1%	64.6%	0.77	64.6%	0.77	58.8%	0.85	51.5%	0.97
Other Revenue & Net Gains or					04.070	9.7.7				0.37
Other Revenue as % of Total		4.3%	8.4%	0.51	6.6%	0.66	6.4%	0.68	1.8%	2.43
Net Gains/Losses as % of Ne		0.0%	13.8%	0.00	12.8%	0.00	N/A	N/A	N/A	N/A
Expenses as % of Total Expens					12.070			! \\//.\		
Salary/Fringe Benefits	\$28,229,551;	44.1%	43.5%	1.01	45.2%	0.97	41.7%	1.06	45.1%	0.98
Supplies & Services	\$25,125,005;	39.2%	49.9%	0.79	47.8%	0.82	50.0%	0.78	37.3%	1.05
Capital Component	\$10,670,821;	16.7%	6.6%	2.54	7.0%	2.39	8.3%	2.01	17.6%	0.95
Fiscal Statistics	Ψ10,070,0211	10.7 /0		2.2	1.070	2.59		4.9!	17.070	0.95
Operating Margin (%)		3.8%	7.5%	0.50	7.5%	0.51	6.6%	0.57	-8.6%	N/A
Total Hospital Net Income (%	\	3.8%	8.6%	0.44	8.5%	0.45	6.2%	0.61	-8.6%	N/A
· · · · · · · · · · · · · · · · · · ·		5.6%	4.1%	1.36	5.4%	1.04	3.0%	1.87	-11.1%	N/A
Return on Equity (%) Current Ratio		2.0	3.9	0.51	3.470	0.57	3.4	0.59	4.5	0.45
Days in Net Patient Accounts Receivable		51.0	71.5	0.71	54.3	0.94	48.8	1.05	4.5 47.5	1.07
Average Payment Period	receivable	54.2	90.1	0.60	79.8	0.68	63.5	0.85	18.2	2.98
Equity Financing (%)		0.0%	63.6%	0.00 N/A	71.2%	N/A	75.1%	0.83 N/A	0.0%	0.29
Long-Term Debt to Equity Ra	tio	-32.0	03.0%	N/A N/A	0.2	N/A	0.2	N/A N/A	-11.2	2.85
Times Interest Earned	lio		12.2		11.3	0.19				
Total Asset Turnover		2.2 1.5	0.5	0.18 3.15	0.6	2.35	7.4 0.5	0.29 3.07	-1.5 1.3	N/A 1.15
		1.5 5.7	14.1	0.41	10.9	2.35 0.53	9.8		4.6	1.15
Average Age of Plant (Years)	t Detient Devenue							0.58		0.70
Increase (Decrease) Total Ne		17.7%	-2.2%	N/A	-1.9%	N/A	-5.0%	N/A	25.3%	
Outpatient Gross Revenue (%	o oi iolai GPR)	98.6%	63.0%	1.57	72.6%	1.36	64.9%	1.52	98.5%	1.00
Net Revenue Statistics		Φ4 <i>E</i> 400	647.050	0.07	#44.250	4.07	¢40.057	0.05	#40.40 F	4 4 4
Inpatient Net Revenue per Di		\$15,400	\$17,652	0.87	\$14,359	1.07	\$18,057	0.85	\$13,465	1.14
Inpatient Net Revenue per Da		\$3,422	\$3,704	0.92	\$3,457	0.99	\$3,961	0.86	\$3,401	1.01
Outpatient Net Revenue per \	/ISIT	\$3,026	\$780	3.88	\$649	4.66	\$669	4.53	\$2,843	1.06
Income Statement			Assets			Liabilities & Fun				
Gross Patient Revenue (GPR)	\$127,523,581	Cash & Cash Equivalents			\$3,180,625	Current Liabilities			\$8,931,314	
_ess Deductions	\$63,861,392	Net Patient Receivables			\$8,872,545	Long-Term Debt			\$36,161,450	
Net Patient Revenue	\$63,662,189	Other Receivables			\$4,476,851		Liabilities	\$776,479		
Plus Other Revenue	\$2,877,211					Sub	ototal		\$45	5,869,243
Total Revenue	\$66,539,398		lings & Equipmer	nt (Net)	\$25,908,806	:				
Less Expenses	\$64,025,377	Other Asse	ets	\$2,301,728		stricted Fund Ba			1,128,688	
Non-Operating Gains/Losses	\$572				Restricted Fund Balance				\$773,438	
Net Income	\$2,514,593	Total Asset	s		\$44,740,555	Total	Liabilities & Fun	d Balance	\$44	1,740,555