306 Bellin Health Oconto Hospital

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

Inpatient Days

342

Preferred Provider

Organization (PPO)

Fiscal Year: Type:

Control:

10/01 to 09/30

Inpatient Days

153

Newborn Days

0

GMS Critical Access Hospital Other Not-For-Profit

County: Analysis Area:

Oconto Northeastern (4)

,		
olume/	Group:	4

		All GMS Hospitals Analysis A		Area	ea Volume Group		FY 2018 vs. 2017		
			·	4		4			
Selected Utilization Statistics	FY 2018	Value	Ratio	Value	Ratio	Value	Ratio	FY 2017	Ratio
Occupancy Rate (%)									
Adult Medical-Surgical	9.4%	55.7%	0.17	50.7%	0.18	39.8%	0.24	10.1%	0.92
Obstetrics	0.0%	41.5%	N/A	35.8%	N/A	28.9%	N/A	0.0%	N/A
Pediatrics	0.0%	52.8%	N/A	16.8%	N/A	7.7%	N/A	0.0%	N/A
Total Hospital	9.4%	57.5%	0.16	47.6%	0.20	42.4%	0.22	10.1%	0.92
Average Census (Patients)									
Adult Medical-Surgical	0.9	26.4	0.04	23.3	0.04	10.7	0.09	1.0	0.92
Obstetrics	0.0	5.6	N/A	4.4	N/A	2.0	N/A	0.0	N/A
Pediatrics	0.0	1.4	N/A	0.5	N/A	0.0	N/A	0.0	N/A
Total Hospital	0.9	49.4	0.02	40.3	0.02	16.6	0.06	1.0	0.92
Average Length of Stay (Days)									
Adult Medical-Surgical	2.7	3.9	0.67	3.6	0.74	3.0	0.88	2.5	1.06
Obstetrics	0.0	2.5	N/A	2.5	N/A	2.2	N/A	0.0	N/A
Pediatrics	0.0	3.5	N/A	3.0	N/A	1.9	N/A	0.0	N/A
Total Hospital	2.7	4.4	0.60	3.6	0.73	3.3	0.81	2.5	1.06
Surgical Operations									
Inpatient	6	1,396	0.00	1,119	0.01	484	0.01	7	0.86
Outpatient	294	4,206	0.07	4,642	0.06	2,045	0.14	280	1.05
Inpatient as % of All Surgeries	2.0%	24.9%	0.08	19.4%	0.10	19.2%	0.10	2.4%	0.82
Outpatient Visits									
Non-Emergency Visits	15,753	136,074	0.12	200,883	0.08	63,222	0.25	15,005	1.05
Emergency Visits	2,199	18,688	0.12	18,216	0.12	12,717	0.17	3,643	0.60
Full-Time Equivalents (FTEs)									
Administrators	6.0	19.3	0.31	19.6	0.31	10.6	0.57	9.1	0.66
Nurses, Licensed	81.8	239.2	0.34	266.6	0.31	104.8	0.78	75.4	1.08
Ancillary Nursing Personnel	3.5	40.0	0.09	32.6	0.11	22.9	0.15	11.9	0.29
All Other Personnel	132.9	480.4	0.28	519.5	0.26	217.2	0.61	108.8	1.22
Total FTEs	224.2	779.0	0.29	838.3	0.27	355.5	0.63	205.3	1.09
FTEs per 100 Patient Census (Adjus	ted)								
Administrators	9.5	14.9	0.64	13.4	0.70	17.1	0.55	20.7	0.46
Nurses, Licensed	128.9	183.7	0.70	183.1	0.70	169.2	0.76	171.1	0.75
Ancillary Nursing Personnel	5.5	30.8	0.18	22.4	0.25	37.0	0.15	27.0	0.20
All Other Personnel	209.4	369.0	0.57	356.8	0.59	350.8	0.60	246.8	0.85
Total FTEs	353.3	598.3	0.59	575.7	0.61	574.1	0.62	465.7	0.76
Total Hospital:	Contract with:			care-certified S			Newborn Nursery:		
Beds Set Up & Staffed 10		Voo		verage Beds Us	sed	2	Bassi	0	
Discharges 129		O) 169	Yes Discharges			18	Total	1	

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*	09/30/2018	Transfers**	of Care	Rate (%)	(Patients)	(Days)
General Medical-Surgical							
Adult Medical-Surgical, Acute	2	10	129	342	9.4%	0.9	2.7
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	4	0	0	0	0.0%	0.0	0.0
Acute Long-Term Care	4	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	4	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 1 = Contracted 5 = Service Not Provided

	Number	Number	Number
Occupation	Full-Time	Part-Time	FTE
Administrators/Assistant Administrators	6	0	6.0
Physicians & Dentists	10	2	11.4
Medical & Dental Residents	0	0	0.0
Dental Hygienists	0	0	0.0
Registered Nurses	27	28	46.8
Certified Nurse Midwives	0	0	0.0
Licensed Practical Nurses	16	8	21.1
Ancillary Nursing Personnel	1	4	3.5
Medical Assistants	14	7	19.7
Physician Assistants	4	2	5.2
Nurse Practitioners	11	2	11.3
Certified Registered Nurse Anesthetists	1	2	2.6
Clinical Nurse Specialists	0	0	0.0
Health Info Mgmt-Administrators/Technicians	1	1	1.7
Pharmacy Personnel	4	1	4.8
Clinical Laboratory Personnel	7	6	11.2

O a supportion	Number	Number	Number
Occupation	Full-Time	Part-Time	<u>FTE</u>
Surgical Personnel	3	4	6.5
Radiological Services Personnel	5	10	11.9
Sonographers	3	1	3.6
Respiratory Therapists	0	0	0.0
Occupational Therapists	0	0	0.0
Occupational Therapy Assistants/Aides	0	0	0.0
Physical Therapists	1	0	1.0
Physical Therapy Assistants/Aides	0	0	0.0
Recreational Therapists	0	0	0.0
Dietitians & Nutritionists	0	0	0.0
Psychologists	0	0	0.0
Social Workers	1	1	1.8
All Other Health Professionals	8	4	10.5
All Other Personnel	34	11	43.4
Т	otal 157	94	224.2

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

Oconto, WI 54153			All GMS Ho	ospitals	Analysis A	\rea	Volume Group		FY 2018 vs. 2017	
			7 (11 0 11 10	opitalo	4	4		or oup		
Selected Financial Statistics		FY 2018	Value	Ratio	Value	Ratio	Value [']	Ratio	FY 2017	Ratio
Gross Revenue as % of Total (
Medicare	\$37,659,867	43.6%	45.7%	0.95	46.7%	0.93	49.2%	0.88	42.7%	1.02
Medical Assistance	\$11,836,676	13.7%	14.0%	0.98	11.9%	1.15	11.3%	1.21	15.0%	0.91
Commercial	\$33,541,504	38.8%	35.8%	1.08	38.0%	1.02	36.3%	1.07	38.0%	1.02
All Other	\$3,431,648	4.0%	4.5%	0.88	3.4%	1.16	3.2%	1.26	4.3%	0.93
Deductions as % of Total Gros										
Medicare	\$23,857,977	27.6%	34.1%	0.81	34.7%	0.80	35.5%	0.78	20.6%	1.34
Medical Assistance	\$8,236,523	9.5%	10.6%	0.90	9.0%	1.06	8.4%	1.14	9.8%	0.97
Commercial	\$8,476,425	9.8%	14.7%	0.67	16.1%	0.61	13.1%	0.75	13.6%	0.72
Charity Care	\$831,715	1.0%	1.0%	0.99	0.9%	1.05	1.3%	0.76	0.6%	1.59
Bad Debt	\$1,233,187	1.4%	1.1%	1.33	1.0%	1.45	1.4%	1.03	1.7%	0.85
All Other	\$652,621	0.8%	2.0%	0.39	1.8%	0.43	1.1%	0.71	1.3%	0.56
Total Deductions	\$43,288,448	50.1%	63.3%	0.79	63.5%	0.79	60.7%	0.83	47.7%	1.05
Other Revenue & Net Gains or										
Other Revenue as % of Total		1.7%	5.5%	0.32	3.5%	0.50	3.5%	0.50	1.0%	1.81
Net Gains/Losses as % of Ne		N/A	2.6%	N/A	8.5%	N/A	18.6%	N/A	N/A	N/A
Expenses as % of Total Expen	ises									
Salary/Fringe Benefits	\$24,388,985	47.1%	44.1%	1.07	45.8%	1.03	44.5%	1.06	50.8%	0.93
Supplies & Services	\$17,513,472	33.8%	49.0%	0.69	46.8%	0.72	46.9%	0.72	32.9%	1.03
Capital Component	\$9,853,371	19.0%	6.9%	2.77	7.4%	2.57	8.5%	2.23	16.3%	1.17
Fiscal Statistics										
Operating Margin (%)		-17.8%	8.4%	N/A	9.4%	N/A	4.8%	N/A	-12.1%	1.47
Total Hospital Net Income (%	5)	-17.8%	8.6%	N/A	10.2%	N/A	5.8%	N/A	-12.1%	1.47
Return on Equity (%)	-,	-18.2%	6.3%	N/A	7.0%	N/A	3.7%	N/A	-8.7%	2.08
Current Ratio		3.0	5.9	0.51	4.3	0.71	5.5	0.55	3.5	0.88
Days in Net Patient Accounts	s Receivable	60.1	51.6	1.16	50.7	1.18	49.4	1.22	83.5	0.72
Average Payment Period	7110001742510	25.3	38.5	0.66	54.9	0.46	40.4	0.62	29.8	0.85
Equity Financing (%)		2.4%	75.1%	0.03	75.6%	0.03	75.7%	0.03	18.6%	0.13
Long-Term Debt to Equity Ra	atio	36.1	0.2	226.29	0.2	208.90	0.2	198.12	3.8	9.51
Times Interest Earned	1110	-3.9	13.4	N/A	14.7	N/A	6.3	N/A	-5.6	0.71
Total Asset Turnover		1.0	0.7	1.39	0.7	1.50	0.6	1.63	0.7	1.41
Average Age of Plant (Years)	1	4.2	9.9	0.43	10.4	0.41	9.1	0.46	4.9	0.85
Increase (Decrease) Total Ne		34.8%	5.4%	6.41	3.9%	8.93	7.2%	4.84	72.4%	0.48
Outpatient Gross Revenue (9		98.5%	61.9%	1.59	71.3%	1.38	72.7%	1.35	97.7%	1.01
Net Revenue Statistics	70 OF TOTAL OF IX)	30.570	01.970	1.59.		1.90	1.4.70	1.99	91.170	
Inpatient Net Revenue per D	iecharge	\$9,375	\$15,830	0.59	\$12,899	0.73	\$11,444	0.82	\$10,107	0.93
Inpatient Net Revenue per D		\$9,373 \$2,727	\$3,538	0.39	\$3,402	0.73	\$3,344	0.82	\$3,435	0.93
Outpatient Net Revenue per		\$2,727	\$686	3.49	\$5,402 \$545	4.39	\$740			1.44
		\$2,395	1		φ0 4 0	4.39	•	3.24	\$1,660	1.44
Income State		Assets		#4.000.03	,	Liabilities & Fund			0.040.740	
Gross Patient Revenue (GPR)	\$86,469,695		sh Equivalents		\$1,922,278 Current Liabilities				3,349,746	
Less Deductions	\$43,288,448	Net Patient Receivables			\$7,110,041 Long-Term Debt			\$36,569,788		
Net Patient Revenue	\$43,181,247	Other Receivables		\$165,000 Other Liabilities				\$2,034,132		
Plus Other Revenue	\$767,091			(/N L 1)	004 400 = 1		ototal		\$4	1,953,666
Total Revenue	\$43,948,338		Land, Buildings & Equipment (Net)		\$31,199,54				4	
Less Expenses	\$51,755,828	Other Asse	ets		\$2,570,80		stricted Fund B			1,014,000
Non-Operating Gains/Losses	\$1,997						icted Fund Bala			\$713,020
Net Income	-\$7,805,493	Total Asset	S		\$42,967,66	6 : Total	Liabilities & Fu	nd Balance	\$42	2,967,666