101 St Clare Memorial Hospital 855 South Main Street Oconto Falls, WI 54154 920-846-3444			Fiscal Type: Contro	GI Cr	//01 to 06/30 MS itical Access Ho eligious Organiz	•	County: Analysis A Volume G		onto theastern (4)	
			All GMS Hospitals		Analysis Area 4		Volume Group 2		FY 2022 vs. 2021	
Selected Utilization Statistics		FY 2022	Value	Ratio	Value	Ratio	Value	Ratio	FY 2021	Ratio
Occupancy Rate (%)										
Adult Medical-Surgical		11.2%	60.7%	0.18	62.0%	0.18	20.4%	0.55	8.1%	1.38
Obstetrics		0.0%	37.3%	N/A	34.4%	N/A	19.3%	N/A	0.0%	N/A
Pediatrics		0.0%	67.4%	N/A	14.3%	N/A	0.0%	N/A	0.0%	N/A
Total Hospital		11.2%	61.9%	0.18	56.6%	0.20	21.1%	0.53	8.1%	1.38
Average Census (Patients)										
Adult Medical-Surgical		2.2	27.3	0.08	27.3	0.08	3.3	0.69	1.6	1.38
Obstetrics		0.0	4.7	N/A	3.8	N/A	0.8	N/A	0.0	N/A
Pediatrics		0.0	1.7	N/A	0.3	N/A	0.0	N/A	0.0	N/A
Total Hospital		2.2	50.5	0.04	46.9	0.05	3.9	0.58	1.6	1.38
Average Length of Stay (Days)										
Adult Medical-Surgical		4.2	4.9	0.85	4.6	0.92	4.1	1.02	3.3	1.28
Obstetrics		0.0	2.4	N/A	2.3	N/A	1.9	N/A	0.0	N/A
Pediatrics		0.0	4.0	N/A	2.6	N/A	0.0	N/A	0.0	N/A
Total Hospital		4.1	5.3	0.78	4.8	0.87	3.5	1.18	3.3	1.27
Surgical Operations					700	0.05	404			
Inpatient		42	990	0.04	796	0.05	181	0.23	44	0.95
Outpatient		787	4,017	0.20	5,614	0.14	1,361	0.58	780	1.01
Inpatient as % of All Surgeries		5.1%	19.8%	0.26	12.4%	0.41	11.7%	0.43	5.3%	0.95
Outpatient Visits					000.004	0.07	40 407			
Non-Emergency Visits		14,092	141,022	0.10	209,631	0.07 0.28	43,437 4,927	0.32	14,361	0.98
Emergency Visits		5,188	17,305	0.30	18,500	0.20	4,927	1.05	4,654	1.11
Full-Time Equivalents (FTEs)			10.0		04.0	0.34	7.2	1.00		
Administrators		7.3	18.9	0.39	21.3	0.34	7.3	1.00	3.0	2.44
Nurses, Licensed		37.2	234.4	0.16	265.2	0.14	46.6 9.1	0.80	37.6	0.99
Ancillary Nursing Personnel		6.3	38.1	0.17	40.3	0.10	9.1 110.7	0.70	6.5	0.98
All Other Personnel		57.2	466.6	0.12	448.1	0.13	173.6	0.52	57.5	1.00
Total FTEs	·	108.1	758.0	0.14	775.0	0.14	173.0	0.62	104.6	1.03
FTEs per 100 Patient Census (A Administrators	djusted)	40.4	12.6	3.21	11.2	3.61	33.5	1.21	18.1	2.23
Nurses, Licensed		205.3	12.0	1.31	139.6	1.47	213.4	0.96	226.7	2.23 0.91
Ancillary Nursing Personnel		205.3	25.4	1.31	21.2	1.47	213.4 41.6	0.90	39.2	0.91
All Other Personnel		315.9	25.4 310.9	1.02	235.8	1.03	507.2	0.62	39.2 346.6	0.89
Total FTEs		596.6	505.0	1.18	407.8	1.46	795.7	0.02	630.6	0.91
Total Hospital:		Contract with:	000.0				135.1			0.33
Beds Set Up & Staffed	20	Health Maintenance		Medicare-certified Swing Beds Average Beds Used					Nursery:	0
Discharges	198		Yes	Discharges		00	152	Bassinets Total Births		0
Inpatient Days	819	Organization (HMO)	1		Inpatient Days		2,732		Newborn Days	
inpatient Days	010	Preferred Provider	Yes		patient Days		2,102	INCANDO	un Days	0
		Organization (PPO)	100							

101 St Clare Memorial Hospital Oconto Falls, WI 54154

	Level of	Beds Set Up & Staffed	Discharges &	Patient Days	Occupancy	Average Census	Average Length of Stay	
Inpatient Service Area	Service*	06/30/2022	Transfers**	of Care	Rate (%)	(Patients)	(Days)	
General Medical-Surgical								
Adult Medical-Surgical, Acute	1	20	195	819	11.2%	2.2	4.2	
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	5	0	0	0	0.0%	0.0	0.0	
Other Acute	5	0	0	0	0.0%	0.0	0.0	
Pediatric, acute	2	0	0	0	0.0%	0.0	0.0	
Obstetrics	5	0	0	0	0.0%	0.0	0.0	
Psychiatric	5	0	0	0	0.0%	0.0	0.0	
Alcoholism/chemical dependency	5	0	0	0	0.0%	0.0	0.0	
ICU/CCU								
Medical-Surgical Intensive Care	5	0	0	0	0.0%	0.0	0.0	
Cardiac Intensive Unit	5	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	5	0	0	0	0.0%	0.0	0.0	
Step-Down (Special Care)	5	0	0	0	0.0%	0.0	0.0	
Neonatal Intensive/Intermediate Care	5	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	

Note: data should be used only in rows; do not summarize columns. ** Transfers, which may be estimated, refer only to those between units.

* 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	5	10	7.3	Surgical Personnel		0	3	1.8
Physicians & Dentists	0	0	0.0	Radiological Services Personnel		3	4	5.1
Medical & Dental Residents	0	0	0.0	Sonographers		0	6	1.7
Dental Hygienists	0	0	0.0	Respiratory Therapists		2	4	5.4
Registered Nurses	13	29	28.9	Occupational Therapists		0	2	1.1
Certified Nurse Midwives	0	0	0.0	Occupational Therapy Assistants/Aides		0	0	0.0
Licensed Practical Nurses	0	0	0.0	Physical Therapists		0	4	1.3
Ancillary Nursing Personnel	2	9	6.3	Physical Therapy Assistants/Aides		0	1	0.1
Medical Assistants	0	0	0.0	Recreational Therapists		0	0	0.0
Physician Assistants	0	1	0.8	Dietitians & Nutritionists		0	1	0.1
Nurse Practitioners	3	5	5.0	Psychologists		0	0	0.0
Certified Registered Nurse Anesthetists	3	1	3.3	Social Workers		0	0	0.0
Clinical Nurse Specialists	0	0	0.0	All Other Health Professionals		1	8	4.1
Health Info Mgmt-Administrators/Technicians	0	0	0.0	All Other Personnel		7	16	15.9
Pharmacy Personnel	7	5	8.9		Total	53	115	108.1
Clinical Laboratory Personnel	7	6	11.1				-	

Oconto Falls, WI 54154		All GMS Hospitals		Analysis Area		Volume G	roup	FY 2022 vs. 2021		
Salastad Einansial Statistics		FY 2022	Value	Ratio	4 Value	Ratio	2 Value	Ratio	FY 2021	Potio
Selected Financial Statistics Gross Revenue as % of Total	Gross Patient Povenue	FT 2022	Value	Ralio	value	Ralio	Value	Ralio	FT 2021	Ratio
Medicare	\$35,755,354	47.9%	47.3%	1.01	47.8%	1.00	47.2%	1.01	46.1%	1.04
Medical Assistance	\$19,767,531	26.5%	14.4%	1.84	12.4%	2.14	12.9%	2.06	25.9%	1.04
Commercial	\$16,399,679	22.0%	32.9%	0.67	34.5%	0.64	35.1%	0.63	24.2%	0.91
All Other	\$2,680,526	3.6%	5.4%	0.66	5.3%	0.68	4.8%	0.03	3.9%	0.93
Deductions as % of Total Gro		0.070		0.00	0.070		7.070		0.070	0.50
Medicare	\$19,911,093	26.7%	36.1%	0.74	36.7%	0.73	29.4%	0.91	25.0%	1.07
Medical Assistance	\$12,460,892	16.7%	11.3%	1.48	9.9%	1.69	9.6%	1.75	15.8%	1.0
Commercial	\$7,802,593	10.5%	14.8%	0.71	15.4%	0.68	13.1%	0.80	11.2%	0.94
Charity Care	\$707,401	0.9%	0.7%	1.31	0.8%	1.26	0.6%	1.58	1.0%	0.98
Bad Debt	\$1,168,741	1.6%	0.9%	1.79	0.9%	1.20	1.1%	1.37	1.4%	1.14
All Other	\$1,829,306	2.5%	3.0%	0.81	3.5%	0.71	3.3%	0.75	2.8%	0.89
Total Deductions	\$43,880,025	58.8%	66.8%	0.88	67.1%	0.88	57.1%	1.03	57.1%	1.0
Other Revenue & Net Gains o		50.070	00.070		07.170	0.00			57.170	
Other Revenue as % of Tota		17.7%	5.7%	3.07	3.6%	4.96	4.1%	4.26	13.4%	1.3 ⁻
Net Gains/Losses as % of N		N/A	N/A	0.07 N/A	N/A	4.90 N/A	4.1% N/A	4.20 N/A	35.7%	N/A
Expenses as % of Total Expen						!!!/:			00.770	
Salary/Fringe Benefits	\$10,454,401	31.6%	41.8%	0.76	43.8%	0.72	46.6%	0.68	31.9%	0.99
Supplies & Services	\$20,941,123	63.3%	52.2%	1.21	50.3%	1.26	47.2%	1.34	62.0%	1.02
Capital Component	\$1,695,111	5.1%	6.0%	0.85	5.9%	0.87	6.2%	0.82	6.1%	0.84
Fiscal Statistics	ψ1,033,111	5.170	0.070		0.070	0.07	0.270	0.02	0.170	0.0-
Operating Margin (%)		11.3%	5.7%	1.98	6.7%	1.68	11.8%	0.96	12.5%	0.90
Total Hospital Net Income (%)		7.0%	3.5%	2.00	4.5%	1.56	11.1%	0.63	18.2%	0.38
Return on Equity (%)		6.3%	1.4%	4.41	2.9%	2.13	0.8%	7.70	15.6%	0.40
Current Ratio		0.3	3.9	0.07	5.4	0.05	1.6	0.17	0.3	1.10
Days in Net Patient Account	s Receivable	67.5	91.7	0.74	52.8	1.28	569.1	0.12	49.0	1.38
Average Payment Period		326.9	91.7	3.57	47.9	6.83	772.8	0.42	379.1	0.8
Equity Financing (%)		14.6%	59.1%	0.25	77.7%	0.19	39.2%	0.37	9.7%	1.5
Long-Term Debt to Equity R	atio	0.9	0.4	2.07	0.1	6.56	1.1	0.78	1.3	0.6
Times Interest Earned		28.3	5.7	4.95	6.8	4.14	17.1	1.66	61.2	0.46
Total Asset Turnover		0.9	0.4	2.26	0.7	1.39	0.1	12.75	0.8	1.17
Average Age of Plant (Years	2)	12.3	18.1	0.68	10.8	1.14	99.6	0.12	11.4	1.09
Increase (Decrease) Total N		5.0%	3.5%	1.41	3.1%	1.61	2.2%	2.26	19.3%	0.26
Outpatient Gross Revenue (87.6%	66.2%	1.32	74.8%	1.17	81.7%	1.07	90.2%	0.97
Net Revenue Statistics		07.070			7 1.0 /0					
Inpatient Net Revenue per D	Discharge	\$19,238	\$19,849	0.97	\$15,277	1.26	\$21,242	0.91	\$16,777	1.15
Inpatient Net Revenue per D		\$1,850	\$3,697	0.50	\$3,088	0.60	\$4,286	0.43	\$2,201	0.84
Outpatient Net Revenue per		\$1,287	\$819	1.57	\$666	1.93	\$728	1.77	\$1,286	1.00
		φ1,207			4000	;			d Balances	1.00
Income Statement		Cach & Ca	Assets		-\$252,687 Cu				200 336	
Gross Patient Revenue (GPR) \$74,603,090		Cash & Cash Equivalents Net Patient Receivables			\$5,682,468	Current Liabilities Long-Term Debt			\$28,389,33 \$5,006,00	
Less Deductions \$43,880,025		,	Other Receivables			-			\$5,006,00 \$353 11	
Net Patient Revenue \$30,723,065						\$544,625 Other Liabilities Subtotal			\$353,11 \$33,748,44	
Plus Other Revenue Total Revenue	\$6,585,350 \$37,308,414	Land Ruik	lings & Equipmer	at (Net)	\$10,412,226	Sub	lotal		φοσ	,740,440
					\$23,150,137	llores	tricted Fund Po	lance	<u> </u>	788 201
Less Expenses \$33,090,636			Other Assets			Unrestricted Fund Balance Restricted Fund Balance			ቅር	5,788,323 ¢
Non-Operating Gains/Losses	-\$1,737,445	Total Assat	· •		¢20 526 760				¢.20	\$(536.760
Net Income	\$2,480,333	Total Asset	.5		\$39,536,769	Total	Liabilities & Fur	u palance	\$35	9,536,769