



## ISDH Hospital Service Report

State Form 49476 (R /7-02)

IC 16-21-6

### I. Hospital Information

*Hospital Name:* ST. MARY'S MEDICAL CENTER (HOBART)

*Provider #:* 150034

*City:* Hobart

*County:* Lake

*Year:* 2013

#### LICENSURE, ACCREDITATION, OR DESIGNATED UNITS (check all that apply)

*State Licensure:*  Acute License  LTC Certification

*Private Accreditation:*  JCAHO  HFAP

*CMS Specialized Hosp:*  CAH  TLC  Rehab

*DRG Exempt:*  Psych  Rehab  Swing Bed

Number of Total Hospital Full Time Equivalents 1108

### II. Hospital Service Utilization

| Hospital Service Description | Number of Set-up Beds | Number of Discharges | Number of Patient Days | Annual Total Charges |
|------------------------------|-----------------------|----------------------|------------------------|----------------------|
| Burn Care                    | 0                     | 0                    | 0                      | \$0                  |
| Cardiac Intensive            | 0                     | 0                    | 0                      | \$0                  |
| ICU Medical/Surgical         | 12                    | 283                  | 3823                   | \$6,757,600          |
| ICU Neonatal                 | 0                     | 0                    | 0                      | \$0                  |
| ICU Pediatric                | 0                     | 0                    | 0                      | \$0                  |
| Medical/Surgical             | 144                   | 9758                 | 45627                  | \$46,925,677         |
| Neonatal Intermediate        | 0                     | 0                    | 0                      | \$0                  |
| Normal Newborn               | 18                    | 528                  | 1065                   | \$1,373,812          |
| Obstetrics                   | 14                    | 588                  | 1467                   | \$3,122,634          |
| Pediatric                    | 5                     | 189                  | 506                    | \$1,053,337          |
| Psychiatric                  | 0                     | 0                    | 0                      | \$0                  |
| Rehabilitation               | 20                    | 638                  | 6540                   | \$4,687,592          |
| Substance Abuse              | 0                     | 0                    | 0                      | \$0                  |
| Swing Bed Program            | NA                    | 0                    | 0                      | \$0                  |

|                    |     |       |       |     |
|--------------------|-----|-------|-------|-----|
| Extended Care      | 0   | 0     | 0     | \$0 |
| Observation Beds   | 0   | 0     | 0     | \$0 |
| All Other Services | 0   | 0     | 0     | NA  |
| Total Acute        | 213 | 11984 | 59028 | NA  |

### III. Nursing Facility Utilization

|                  | Number of Licensed Beds | Number of Discharges | Number of Patient Days |
|------------------|-------------------------|----------------------|------------------------|
| Nursing Facility | 0                       | 0                    | 0                      |

### IV. Number of Outpatient Encounters By Diagnostic Group

Please identify the number of outpatient encounters for your hospital by ICD-9-CM Diagnostic Categories

| Diagnostic Categories | Number of Encounters | Diagnostic Categories | Number of Encounters |
|-----------------------|----------------------|-----------------------|----------------------|
| Infectious Disease    | 1944                 | HIV                   | 0                    |
| Neoplasms             | 5163                 | Endocrine             | 12251                |
| Diseases of Blood     | 2510                 | Mental Disorders      | 1213                 |
| Nervous               | 4847                 | Circulatory           | 14281                |
| Respiratory           | 6742                 | Digestive Diseases    | 6237                 |
| Genitourinary         | 12122                | Pregnancy             | 3228                 |
| Skin                  | 3222                 | Musculoskeletal       | 14726                |
| Congenital            | 196                  | Perinatal             | 84                   |
| All Injuries          | 11057                |                       |                      |
| Other/Known           | 51624                | Total Encounters      | 151447               |

| Total ED Visits | ED Injury Visits | ED Injury Admissions |
|-----------------|------------------|----------------------|
| 34850           | 6735             | 524                  |

### Comments