

Status: Finalized

I. Hospital Information

Hospital Name:	PHYSICIANS HOSPITAL, LLC
Provider #:	150165
City:	Munster
County:	Lake
Year:	2014
Person Completing the Report:	Scott Spencer
Email Address:	scott.spencer@franciscanalliance.org
LICENSURE, ACCREDITATI	ON, OR DESIGNATED UNITS (check all that apply)
State Licensure:	te License LTC Certification
Private Accreditation: ☐ JCA	HO ☑HFAP
CMS Specialized Hosp: □CAH	I □TLC □Rehab
DRG Exempt: □Psyc	h □Rehab □Swing Bed
Number of Total Hospital Full	Time Equivalents 303

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	9	240	1336	\$2,685,487
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	23	731	2648	\$4,778,442
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	0	0	0	\$0
Obstetrics	0	0	0	\$0
Pediatric	0	0	0	\$0

Psychiatric	0	0	0	\$0
Rehabilitation	0	0	0	\$0
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	32	971	3984	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	792	HIV	11
Neoplasms	5709	Endocrine	14570
Diseases of Blood	2172	Mental Disorders	341
Nervous	3095	Circulatory	7057
Respiratory	3906	Digestive Diseases	3205
Genitourinary	6492	Pregnancy	385
Skin	1735	Musculoskeletal	18476
Congenital	168	Perinatal	95
All Injuries	5305		
Other/Known	47835	Total Encounters	121349

Total ED Visits	ED Injury Visits	ED Injury Admissions	
0	0	0	

Comments