



ISDH Hospital Service Report
State Form 49476 (R /7-02)
IC 16-21-6

Status: Finalized

I. Hospital Information

Hospital Name: MEMORIAL HOSPITAL OF SOUTH BEND

Provider #: 150058

City: South Bend

County: St. Joseph

Year: 2020

Person Completing the Report: Sally Marker

Email Address: smarker@beaconhealthsystem.org

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 2382

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	24	460	6524	\$29,430,230
ICU Neonatal	30	489	8762	\$26,700,305
ICU Pediatric	12	450	1688	\$6,170,830
Medical/Surgical	78	4197	17000	\$39,469,320
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	16	2152	4004	\$3,868,075
Obstetrics	34	2591	5672	\$11,759,955
Pediatric	23	623	2513	\$6,766,980
Psychiatric	50	2052	12799	\$16,126,500
Rehabilitation	20	306	3596	\$9,661,975
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	160	7790	42063	NA
Total Acute	447	21110	104621	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	0	HIV	0
Neoplasms	0	Endocrine	0
Diseases of Blood	0	Mental Disorders	0
Nervous	0	Circulatory	0
Respiratory	0	Digestive Diseases	0
Genitourinary	0	Pregnancy	0
Skin	0	Musculoskeletal	0
Congenital	0	Perinatal	0
All Injuries	0		
Other/Known	0	Total Encounters	0

V. Number of Outpatient Encounters By Diagnostic Group

Please identify the number of outpatient encounters for your hospital by ICD-10-CM Diagnostic Categories

Diagnostic Categories	Number of Encounters	Diagnostic Categories	Number of Encounters
Certain infectious and parasitic diseases	1209	HIV	7
Neoplasms	9610	Endocrine, nutritional and metabolic diseases	2679
Diseases of blood and blood-forming organs and certain disorders involving the immune mechanism	2135	Mental, Behavioral and Neurodevelopmental disorders	3818
Diseases of the nervous system	5944	Diseases of the circulatory system	9477
Diseases of the eye and adnexa	0	Diseases of the ear and mastoid process	0
Diseases of the respiratory system	7287	Diseases of the digestive Diseases	6039
Diseases of the genitourinary system	7819	Pregnancy, childbirth and the puerperium	4607
Diseases of the skin and	2510	Diseases of the	18981

subcutaneous tissue		musculoskeletal system and connective tissue	
Congenital malformations, deformations and chromosomal abnormalities	741	Certain conditions originating in the perinatal period	384
Injury, poisoning and certain other consequences of external causes	15222		
Other/Known	54390	Total Encounters	152859

Total ED Visits	ED Injury Visits	ED Injury Admissions
53001	14442	3163

Comments

//