



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

Status: Finalized

I. Hospital Information

Hospital Name: KOSCIUSKO COMMUNITY HOSPITAL

Provider #: 150133

City: Warsaw

County: Kosciusko

Year: 2016

Person Completing the Report: Nikki Harter

Email Address: nharter@kch.com

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 0

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         | 14                    | 473                  | 1632                   | \$7,355,317          |
| ICU Neonatal                 | 0                     | 0                    | 0                      | \$0                  |
| ICU Pediatric                | 0                     | 0                    | 0                      | \$0                  |
| Medical/Surgical             | 50                    | 2323                 | 7920                   | \$23,659,871         |
| Neonatal Intermediate        | 0                     | 0                    | 0                      | \$0                  |
| Normal Newborn               | 10                    | 463                  | 73                     | \$1,456,933          |
| Obstetrics                   | 14                    | 476                  | 1064                   | \$3,148,336          |
| 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        | 88 | 3735 | 10689 | 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   | 656                  | HIV  | 14                   |
| Neoplasms   | 4367                 | Endocrine, nutritional and metabolic diseases                | 9072                 |
| Diseases of blood and blood-forming organs and certain disorders involving the immune mechanism | 3426                 | Mental, Behavioral and Neurodevelopmental disorders          | 791                  |
| Diseases of the nervous system  | 2245                 | Diseases of the circulatory system                           | 7995                 |
| Diseases of the respiratory system  | 3900                 | Diseases of the digestive Diseases                           | 3527                 |
| Diseases of the genitourinary system  | 4592                 | Pregnancy, childbirth and teh puerperium                     | 1352                 |
| Diseases of the skin and subcutaneous tissue  | 1612                 | Diseases of the musculoskeletal system and connective tissue | 11737                |

|  |       |  |       |
|--|-------|--|-------|
| Congenital malformations, deformations and chromosomal abnormalities | 165   | Certain conditions originating in the perinatal period | 22    |
| Injury, poisoning and certain other consequences of external causes  | 6723  |  |       |
| Other/Known  | 13821 | Total Encounters                                       | 76017 |

| Total ED Visits | ED Injury Visits | ED Injury Admissions |
|-----------------|------------------|----------------------|
| 20051           | 3990             | 183                  |

Comments