



## ISDH Hospital Service Report

State Form 49476 (R /7-02)

IC 16-21-6

### I. Hospital Information

*Hospital Name:* JASPER COUNTY HOSPITAL

*Provider #:* 151324

*City:* Rensselaer

*County:* Jasper

*Year:* 2010

#### 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 254.7

### 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            | 3                     | 169                  | 697                    | \$372,976            |
| ICU Medical/Surgical         | 2                     | 73                   | 379                    | \$200,830            |
| ICU Neonatal                 | 0                     | 0                    | 0                      | \$0                  |
| ICU Pediatric                | 0                     | 0                    | 0                      | \$0                  |
| Medical/Surgical             | 13                    | 714                  | 3384                   | \$2,607,197          |
| Neonatal Intermediate        | 0                     | 0                    | 0                      | \$0                  |
| Normal Newborn               | 7                     | 126                  | 231                    | \$133,020            |
| Obstetrics                   | 5                     | 128                  | 238                    | \$424,664            |
| 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             |                       |                      |                        |                      |

|                    |    |      |      |             |
|--------------------|----|------|------|-------------|
|                    | 2  | 808  | 1487 | \$1,609,085 |
| All Other Services | 0  | 0    | 0    | NA          |
| Total Acute        | 32 | 2018 | 6416 | NA          |

### III. Nursing Facility Utilization

|                  | Number of Licensed Beds | Number of Discharges | Number of Patient Days |
|------------------|-------------------------|----------------------|------------------------|
| Nursing Facility | 21                      | 15                   | 6565                   |

### 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    | 524                  | HIV                   | 3                    |
| Neoplasms             | 1906                 | Endocrine             | 3076                 |
| Diseases of Blood     | 1116                 | Mental Disorders      | 525                  |
| Nervous               | 1698                 | Circulatory           | 3315                 |
| Respiratory           | 1619                 | Digestive Diseases    | 1343                 |
| Genitourinary         | 2371                 | Pregnancy             | 297                  |
| Skin                  | 1092                 | Musculoskeletal       | 5154                 |
| Congenital            | 62                   | Perinatal             | 25                   |
| All Injuries          | 2960                 |                       |                      |
| Other/Known           | 6143                 | Total Encounters      | 33229                |

| Total ED Visits | ED Injury Visits | ED Injury Admissions |
|-----------------|------------------|----------------------|
| 8751            | 2441             | 38                   |

### Comments

financials will be provided by the Vice President of Financial Services