

APPENDIX A**Designated Health Planning Areas in Wisconsin
Under 42 USC 300L
[HSS 123.03 (19)]***Health Service Area #1*

Columbia, Dane, Dodge, Grant, Green, Iowa, Jefferson, Lafayette,
Richland, Rock, Sauk counties

Health Service Area #2

Kenosha, Milwaukee, Ozaukee, Racine, Walworth, Washington,
Waukesha counties

Health Service Area #3

Calumet, Fond du Lac, Green Lake, Marquette, Outagamie,
Waupaca, Waushara, Winnebago counties

Health Service Area #4

Brown, Door, Kewaunee, Manitowoc, Marinette, Menominee, Oconto,
Shawano, Sheboygan counties

Health Service Area #5

Barron, Buffalo, Chippewa, Clark, Crawford, Dunn, Eau Claire,
Jackson, La Crosse, Monroe, Pepin, Pierce, Polk, Rusk, St. Croix,
Trempealeau, Vernon counties

Health Service Area #6

Adams, Florence, Forest, Juneau, Langlade, Lincoln, Marathon,
Oneida, Portage, Taylor, Vilas, Wood counties

Health Service Area #7

Ashland, Bayfield, Burnett, Douglas, Iron, Price, Sawyer, Washburn
counties

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TABLE C-3: FORMULA FOR PROJECTING NEED FOR CHEMICAL DEPENDENCY BEDS

[s. HSS 123.27(4)(c)2.]
SERVICE AREA XX

Use Rate/ 1,000	x Length of stay	x 199X Population (in 1,000's)	= 199X Projected Patient Days	÷ 365	= 199X Projected Average Daily Census	+ Occupancy Standard (%)	= Unadjusted 199X Bed Need	199X Bed Need	- Approved Beds	= 199X Bed Excess or Need
x.x (1)	xx.x (2)	xxx.xxx (3)	= xxxxx (4)	÷	xxx.xx (5)	xx	= xx.x (6)	xx (7)	- xx (8)	= xx (9)

(1) Use Rate = $\frac{\text{Total number of admissions to chemical dependency services in the service area}^*}{\text{Current service area population}}$

OR, IF SMALLER,

= $\frac{\text{Total number of admissions to chemical dependency services in Wisconsin}^* + 1 \text{ Standard deviation above the statewide average use rate}}{\text{Current Wisconsin population}}$ using the poisson distribution
 ✓ Standard average use rate

(2) Length of stay = $\frac{\text{Total patient days in chemical dependency services in the service area}^*}{\text{Total number of admissions to short-term inpatient chemical dependency services in the service area}^*}$

(3) Projected population in 199X for the service area, based upon information provided by the University of Wisconsin Applied Population Laboratory and the State Department of Administration.

(4) (1) x (2) x (3)

(5) (4) ÷ 365 (number of days in the year)

(6) (5) ÷ Occupancy standard in Appendix D for the bed complement in the service area.

(7) (6) rounded to the nearest whole number

(8) Total number of approved chemical dependency beds in the service area.

(9) (7) - (8)

*Information on patient days and admissions from the Annual Survey of Hospitals.

APPENDIX D
HOSPITAL SERVICE OCCUPANCY STANDARDS [HSS 123.27(3)(c)]

Medical/Surgical Services

<u>Number of beds in service area</u>	<u>Occupancy standard</u>
1-25	61%
26-50	69%
51-75	74%
76-100	78%
101-150	80%
151-250	82%
251+	85%

Pediatric Services

<u>Number of beds in service area</u>	<u>Occupancy standard</u>
1-10	50%
11-15	52%
16-20	57%
21-25	60%
26-75	65%
76-100	78%
101-150	80%
151-200	82%

Obstetric Services

<u>Number of beds in service area</u>	<u>Occupancy standard</u>
1-10	50%
11-15	51%
16-20	59%
21-25	62%
26-30	64%
31+	70%

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ICU/CCU Services

<u>Number of beds in service area</u>	<u>Occupancy standard</u>
1-10	50%
11-15	56%
16+	66%

Psychiatric/Chemical Dependency Services

<u>Number of beds in service area</u>	<u>Occupancy standard</u>
1-20	80%
21+	85%

Long-Term Psychiatric Services

<u>Number of beds in service area</u>	<u>Occupancy standard</u>
1+	90%

APPENDIX E: PROPORTIONATE SHARE OF EXCESS BEDS BY HOSPITAL
 [s. HSS 123.27(10)]
 ACUTE CARE SERVICE AREA XX

Current Share of Excess

Hospital	Patient Days	Total Beds	Occupancy (%)	SMFP Expected Occupancy (%)	Current Hospital Excess
A	xxx,xxx (1)	xxx (2)	xx.x (3)	xx (4)	xx (5)
B*	xxx,xxx	xxx	xx.x	xx	xx
C*	xx,xxx	xx	xx.x	xx	xx

199X Share of Excess

Hospital	Current Hospital Excess	199X ACSA Excess	199X Proportionate Share of Hospital Excess
A	xx (5)		xx (8)
B*	xx (5a)		xx (8a)
C*	xx (5b)		xx (8b)
	<u>xx</u>		<u>xx</u>
	xx (6)	xx (7)	xx (7)

*Same calculation as performed on hospital A performed on all hospitals in the service area.

APPENDIX E: NOTES

(1) Total patient days from the Wisconsin Annual Survey of Hospitals excluding patient days for psychiatric and chemical dependency (AODA) services and from neonatal intensive and intermediate care.

(2) Total approved beds excluding psychiatric, chemical dependency (AODA), neonatal intensive and intermediate care.

(3) [(1) + 365] + (2)

(4) Sum of (a) + (b) + (c) + (d):

(a) Medical/surgical service bed complement (all other beds excluding psychiatric, chemical dependency and neonatal intensive/intermediate)	+	Total approved beds (excluding psychiatric, chemical dependency, and neonatal intensive/intermediate)	+	Medical/surgical occupancy standard for the hospital's medical/surgical bed complement from Appendix D.
(b) Pediatric service bed complement	+	Total approved beds (excluding psychiatric, chemical dependency, and neonatal intensive/intermediate)	+	Pediatric occupancy standard in Appendix D unless the unit is less than 10 beds for which the medical/surgical occupancy rate in (4a) is used.
(c) Obstetrics service bed complement	+	Total approved beds (excluding psychiatric, chemical dependency, and neonatal intensive/intermediate)	+	Obstetrics occupancy standard in Appendix D.
(d) ICU/CCU bed complement	+	Total approved beds (excluding psychiatric, chemical dependency, and neonatal intensive/intermediate)	+	ICU/CCU occupancy standard in Appendix D.

$$(5) \quad (2) - \left[\frac{(1) + (4)}{365} \right]$$

(6) Sum of current hospital excess for all hospitals in ACSA [(5) + (5a) + (5b)]

(7) Total projected ACSA as stated in the SMFP and as calculated in Appendix C-1.

(8) (5) × (7) + (6)

(8a) (5a) × (7) + (6)

(8b) (5b) × (7) + (6)

If (5), (5a) or (5b) are negative, the numbers are excluded from the calculation to determine (6) and therefore in the calculation of 199X proportionate share of hospital excess.

Note: (5a) and (5b) represent current hospital excess for the other hospitals in the ACSA XX.

APPENDIX F

**METHODOLOGY FOR DETERMINING THE NUMBER OF
CLINICALLY-APPLICABLE MRI DISCHARGES**

[s. HSS 123.24 (3) (a) and (b)]

Major ICD-9-CM Groupings		Inpatient MRI Utilization Weights
001-139	Infectious and parasitic diseases	6.25%
140-239	Neoplasms	20.93%
290-319	Mental disorders	.11%
320-389	Diseases of the nervous system and sense organs	11.46%
390-459	Diseases of the circulatory system and connective tissue	15.29%
710-739	Diseases of the musculoskeletal system and connective tissue	7.78%
740-759	Congenital anomalies	1.99%
800-999	Injury and poisoning	.56%

The methodology to determine the number of inpatient clinically-applicable MRI discharges is as follows:

1. Count the number of principal diagnosis inpatient discharges that correspond to each major grouping of ICD-9-CM codes listed above; and
2. Multiply the number for each major grouping by the corresponding inpatient MRI utilization weight and add the products together to produce the number of inpatient clinically-applicable MRI discharges.

Note: ICD-9-CM codes refer to the standard disease codes and nomenclature found in the *International Classification of Diseases - 9th Revision - Clinical Modification*, prepared by the Commission on Professional and Hospital Activities for the U.S. National Center for Health Statistics. The major ICD-9-CM groupings and inpatient MRI utilization weights are based on the work of a panel of experts and high correlation averages as reported in the American Hospital Association's publication, *NMR - Issues for 1985 and Beyond*.