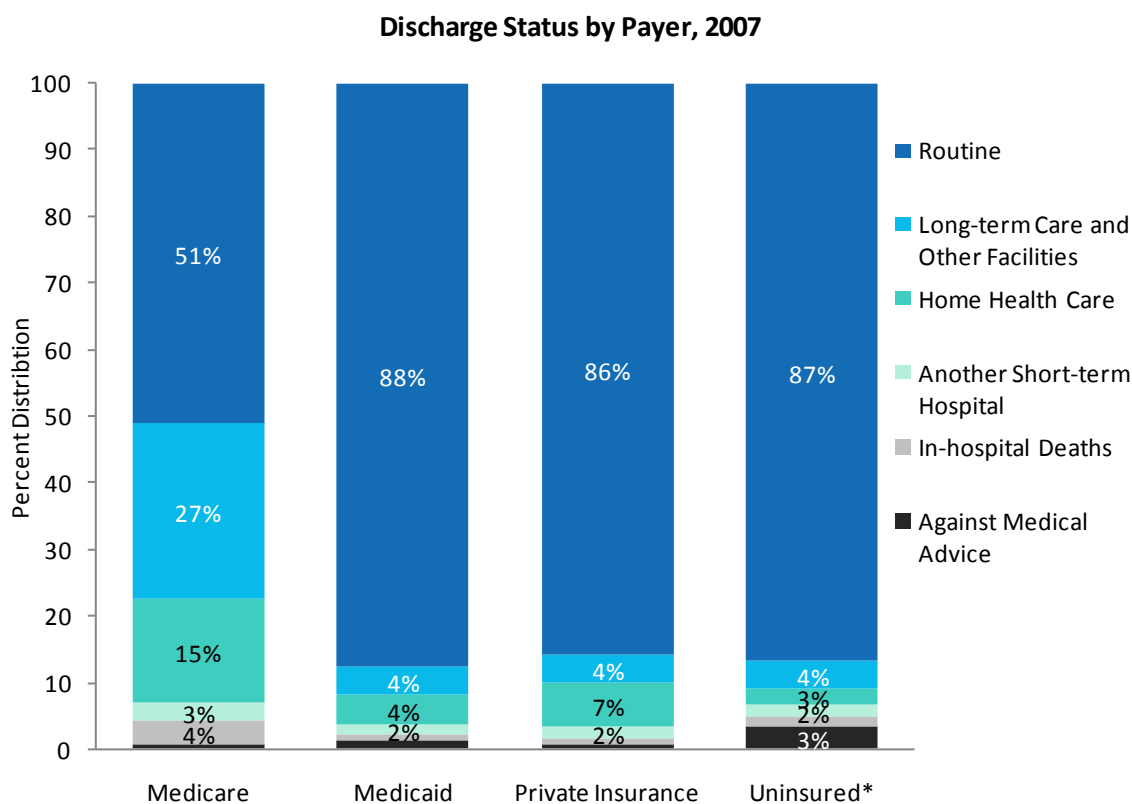


EXHIBIT 5.3 Discharge Status by Payer



*Includes discharges classified as self-pay or no charge.

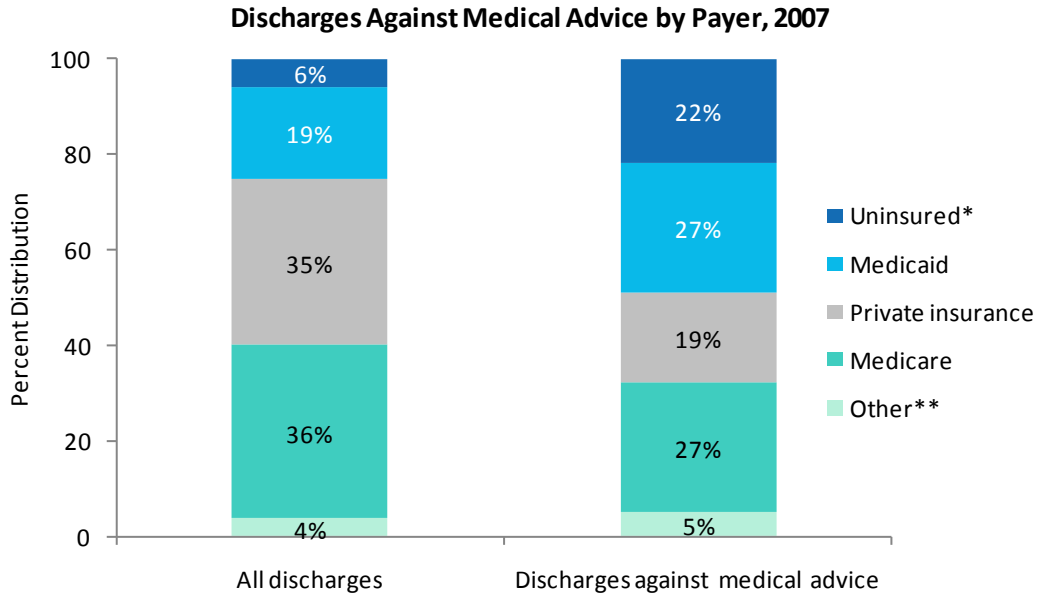
Note: Bar segments representing 1 percent or less have not been labeled.

Source: AHRQ, Center for Delivery, Organization, and Markets, Healthcare Cost and Utilization Project, Nationwide Inpatient Sample, 2007.

Discharge status indicates the circumstances surrounding the discharge or where the patient went after discharge from the hospital. The majority of discharges were routine in nature regardless of expected primary payer, but discharges to follow-on care were also frequent, especially for Medicare patients.

- For Medicare in 2007, almost half of all stays (49 percent) involved other-than-routine discharges. Because these patients are typically older and more likely to be disabled than persons who are covered by other insurance or are uninsured, routine discharges occur for a smaller share of Medicare-covered stays.
 - More than one-quarter (27 percent) of Medicare stays were discharged to long term care or other facilities, such as rehabilitation.
 - Another 15 percent were discharged to home health care, while 3 percent were discharged to another short-term hospital.
 - Four percent of stays resulted in in-hospital deaths and less than 1 percent were discharges against medical advice.
- For all other payers, routine discharges accounted for the vast majority of stays—86 percent or more.
 - Two percent of Medicaid, private insurance, and uninsured stays were discharged to another short-term hospital.
 - Less than 1 percent of Medicaid, private insurance, and uninsured stays resulted in in-hospital deaths. For stays with Medicare as the primary payer, in-hospital deaths occurred in 4 percent of stays.

- Patients discharged against medical advice were more likely to be uninsured. Three percent of uninsured discharges occurred against medical advice, compared to less than 1 percent of discharges billed to Medicare, Medicaid, and private insurance.



*Includes discharges classified as self-pay or no charge.

**"Other" payer includes Workers' Compensation, TRICARE, CHAMPUS, CHAMPVA, Title V, and other government programs.

Source: AHRQ, Center for Delivery, Organization, and Markets, Healthcare Cost and Utilization Project, Nationwide Inpatient Sample, 2007.

- Uninsured stays accounted for 22 percent of discharges against medical advice, but just six percent of discharges overall. Those billed to Medicaid accounted for 27 percent of discharges against medical advice; they represented only 19 percent of all other hospital stays.
- Stays billed to private insurance and Medicare accounted for just under half of discharges against medical advice (46 percent), but close to three quarters of all discharges (71 percent).