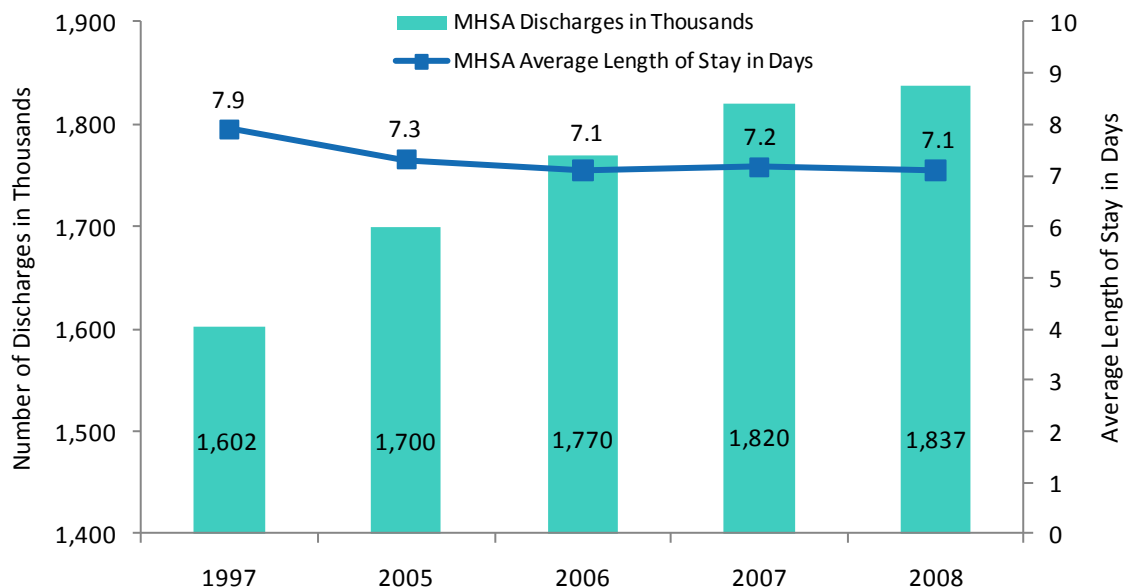


EXHIBIT 5.3 MHPA Hospitalizations and Average Length of Stay

Number of Inpatient Hospital Stays and Average Length of Stay for Discharges with a Principal MHPA Diagnosis, 1997-2008

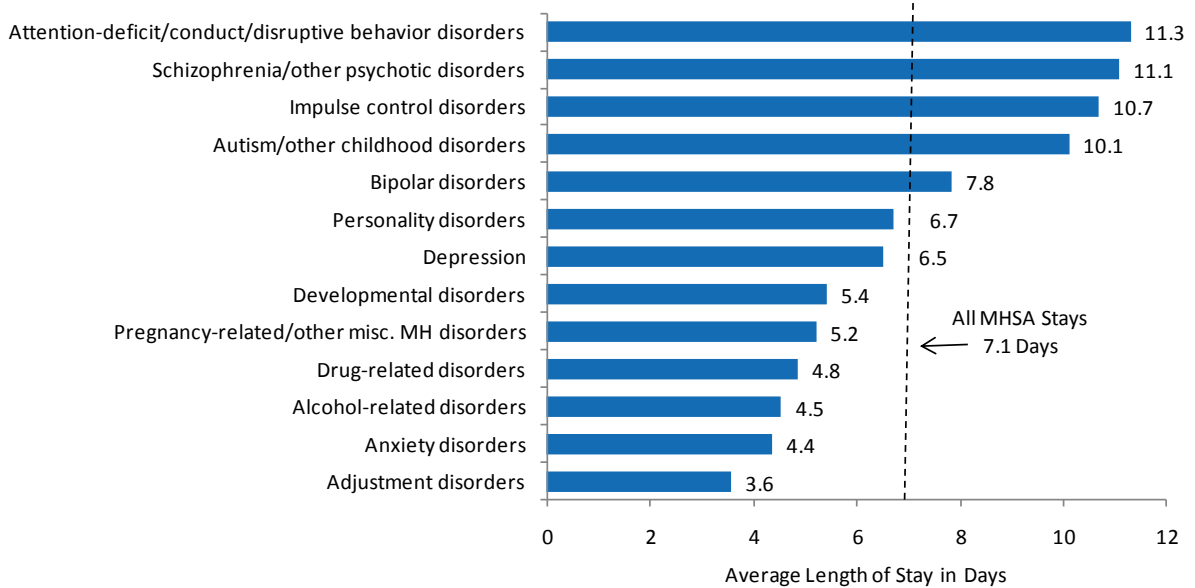


Source: AHRQ, Center for Delivery, Organization, and Markets, Healthcare Cost and Utilization Project, Nationwide Inpatient Sample, 1997, 2005, 2006, 2007 and 2008.

The average length of stay (ALOS) for all discharges in U.S. community hospitals in 2008 was 4.6 days (Exhibit 1.2). In contrast, the ALOS for discharges with a principal diagnosis of a MHPA disorder was much longer—7.1 days.

- From 1997 to 2008, the number of discharges for all conditions and for MHPA conditions each rose by 15 percent (increasing by 5.2 million discharges for all conditions (Exhibit 1.2) and by 0.2 million discharges for MHPA conditions).
- The ALOS for all hospital stays declined by 4 percent from 1997 to 2008 (from 4.8 days in 1997 to 4.6 days in 2008, Exhibit 1.2). The ALOS for MHPA hospital stays fell at more than twice the rate of all hospital stays, or 10 percent (from 7.9 days in 1997 to 7.1 days in 2008).

Average Length of Stay by Principal Reason for MHSA Stay, 2008



Source: AHRQ, Center for Delivery, Organization, and Markets, Healthcare Cost and Utilization Project, Nationwide Inpatient Sample, 2008.

Although the average length of stay (ALOS) for all MHSA stays in community hospitals was 7.1 days, ALOS varied considerably by MHSA condition.

- Attention-deficit/conduct/disruptive behavior disorders and schizophrenia/other psychotic disorders each had an ALOS that was greater than 11 days, or 4 days more than the average MHSA stay in 2008.
- The ALOS was 7.8 days for bipolar disorders and 6.5 days for depression.
- The ALOS for both drug- and alcohol-related disorders in community hospitals was less than 5 days—4.8 and 4.5 days, respectively.