

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM  
BOARD MEETING MINUTES**

**October 28, 2021**

**3:00 p.m.**

**North Central Health Care**

X	Eric Anderson	X <sub>(WebEx)</sub>	Randy Balk	X <sub>(WebEx)</sub>	Chad Billeb
X	Kurt Gibbs	X <sub>(WebEx)</sub>	Deb Hager	X	Lance Leonhard
X	Dave Oberbeck	X	Robin Stowe	X	Gabe Ticho
X	Pat Voermans	X <sub>(WebEx)</sub>	Bob Weaver	X	Cate Wylie

Staff Present: Jill Meschke, Jarret Nickel, Dr. Rob Gouthro, Tom Boutain, Jaime Bracken, Jennifer Peaslee, Marne Schroeder

Others Present: Dejan Adzic, Deputy Corp. Counsel

Call to Order

- Meeting was called to order at 3:00 p.m. by Chair Gibbs.

Chairman's Announcements

- The Executive Committee met and will take the recommendation from counsel that the Board authorized in January, to review and recommend changes to the 3 county boards for consideration and clarification of the Tri-County Agreement. From an operational standpoint, the mission clearly won't change for North Central Health Care (NCHC).

Public Comment for Matters Appearing on the Agenda

- None

Consent Agenda and Monitoring Reports

- There were no questions or comments on the Consent Agenda and Monitoring Reports.
- **Motion**/second, Leonhard/Wylie, to approve the Consent Agenda and Monitoring Reports. Motion carried.

Board Education

- Complaints and Grievances Policy
  - This policy comes to the Board for review and approval related to structure in place to handle complaints and grievances from patients, clients, and residents or on their behalf.
  - **Motion**/second, Leonhard/Stowe, to adopt the revised Complaints and Grievances Policy as presented. Dr. Ticho recommended removing the word 'generally' on page 2, #3 Policy, 2<sup>nd</sup> sentence. Motion carried.

- Employee Grievance Policy
  - **Motion**/second, Leonhard/Voermans, to approve the Employee Grievance Policy as presented. Motion carried.
- Occurrence Reporting Policy
  - Occurrences are reported on an ongoing basis. Request made to remove the word ‘generally’ on page 1, Purpose, in red-lined language.
  - **Motion**/second, Leonhard/Ticho, to approve the Occurrence Reporting Policy with the additional revision noted above. Motion carried.
- Utilization Review Plan
  - The Utilization Review Plan is in place to ensure quality of inpatient care. Last year the UR Plan that was approved had a significant number of revisions. There are no changes being recommended at this time.
  - **Motion**/second, Voermans/Wylie, to approve the Utilization Review Plan as presented. Motion carried.

#### Board Discussion and Action

- CEO Report and Board Work Plan – J. Meschke
  - Covid 19 vaccine booster shots are being offered to residents and will expand to all direct care staff when additional vaccine is received.
  - With the State approved Medicaid increases, we should experience a \$20+ daily rate increase in both nursing homes starting July 1, 2021. Some other smaller programs will receive 4.2% increase in rates also.
  - A Diversion Coordinator manages Out of County Placements and stays in regular contact with the facilities, participates in discharge planning which helps to remind the facility of our interest in effective efficient care; providers are also consulted regularly.
  - Significant challenges are with worker shortages in direct care positions. Workers have not returned to the workplace as anticipated. Concern is that a vaccine mandate would be a tremendous detriment to our workforce and care of our residents, but we won’t have a choice, it is either be vaccinated or bill CMS.
  - Our weakened cash position relates heavily to having difficulties with Cerner in billing. Accounts Receivable increased nearly \$2 million from August to September. Multiple factors are involved from staff entering information incorrectly to difficulties with Cerner’s development and training teams. Meetings occur regularly to resolve issues and fine tune workflows. Cerner is the #2 electronic medical record in the nation, yet we have recently learned that 2/3 of those who have implemented Cerner are unhappy with the product. Corporation Counsel is writing a letter to Cerner to address issues.
  - No additional comments or discussion on the Board Work Plan.
- Dashboards – J. Meschke
  - **Motion**/second, Wylie/Ticho, to accept the Dashboards as presented. Motion carried.

- September Financials – J. Meschke
  - Financial performance boils down to staffing issues and census variability in the acute care hospitals and crisis stabilization. Outpatient and psychiatry experienced a small loss in September driven by revenue not meeting target. October is looking better for outpatient. Productivity reports are now available in Cerner and will be a great tool for measuring performance standards. With a new provider in Antigo group therapy and individual appointments are being filled. Anticipate opening outpatient psychiatry to the community soon.
  - Community Living had some losses with the Forest/Jackson apartments. We have transitioned clients from those apartments and will be exiting that property.
  - Adult Day Services and PreVoc programs have experienced many consumers not rejoining the program after Covid. By end of year, we will be out of Lincoln Industries.
  - Year to date loss for Mount View Care Center is \$860,000. Supplemental payments have kept revenue meeting budget. Suite A (Tower) is now open, and residents successfully moved. Referrals are being received for rehab services. Personnel costs are the biggest issues with Covid exposures i.e., sending staff home and the need to fill those positions typically with staff picking up extra shifts that often results in overtime.
  - Pine Crest Nursing Home has a year-to-date loss of \$1.4 million which can be attributed to use of agency staffing. Staff at Pine Crest are less willing to pick up shifts, so utilization of agency is much higher. CNA training is provided to help alleviate agency use. Making progress on the ANI contract.
  - The Youth Hospital contract with counties outside of the tri-county area is available. One contract has been fully executed to date. We are ready to receive youth for the Youth Crisis Stabilization Facility once out of county contracts are executed.
  - **Motion**/second, Leonhard/Balk, to accept the September Financial Statements. Motion carried.
- Recommendation for Selection of 2021 Financial Audit Firm – J. Meschke
  - Executive Committee discussed and agreed with recommending our current audit firm, Wipfli, for the 2021 audit and conduct an RFP process for the 2022 audit.
  - **Motion**/second, Leonhard/Wylie, to recommend the selection of the current audit firm, Wipfli, for the 2021 audit and conduct an RFP process for the 2022 audit firm selection in Spring 2022. Motion carried.
- 2022 Budget Proposal – J. Meschke
  - The Executive Management Team reviewed every line item of the 2022 proposed budget and identified \$450,000 of revenue opportunities and expense savings measures decreasing the budget loss to \$2.1 million.
  - A request was made to the counties for a 10% increase in 2022 levy (approximately \$450,000) which would be applied to getting the Medically Monitored Treatment program (MMT) online and establish Targeted Case Management (a cost of \$200,000) which is a priority of the Board. The counties

did not approve the request for an increase in levy, therefore, the 2022 budget projection is at a \$2.75 million loss. The cost of getting new services up and running is costly. With additional details of the expenses, Marathon County may be able to use ARPA funds to help cover expenses.

- The Board requested additional explanation, detail/itemization, and specific strategies relative to how the significant gain from 2021's anticipated loss of \$5 million to 2022's \$2.75 anticipated loss will be accomplished. Detail should include anticipated increased revenue for youth hospital and youth crisis stabilization (capacity and need), expectation for overcoming staffing challenges, etc. A 3–5-year strategic plan on how we will achieve the goals would be helpful.
- The Board will need to determine the size and scope of programs like MMT and Targeted Case Management. We also received the \$5 million grant to provide behavioral health services to the additional 3 counties.
- We are working with legal counsel to increase our rates as they have not been adjusted in several years.
- NCHC provides services in the jail, CART, etc. which in turn helps law enforcement, social services, drug court, etc. NCHC holds the expense, but for many, not the revenue.
- **Motion**/second, Leonhard/Wylie, to delay approval of the 2022 budget until December and after additional details on the 2022 budget as discussed are received and reviewed. Motion carried.
- Board Policy
  - Physician Compensation Policy was presented last month for review.
  - D. Adzic, reviewed section 4.1, Fair Market Value Determination.
  - Additional information on pay ranges and compensation were requested.
  - **Motion**/second, Leonhard/Anderson, to postpone action on the Physician Compensation Policy and Compensation Administration Manual and Pay Grades to the December 2021 Board meeting. Motion carried.
- **Motion**/second, Wylie/Leonhard, to delay action on items G, H, and 7 i.e., Review Diversity, Equity, and Inclusion Plan, Discussion and Direction of the North Central Health Foundation, and Closed Session for a Report of Investigations related to Corporate Compliance Activities and Significant Events. Motion carried.

#### Board Calendar and Future Agenda Items

- Next Board meeting is scheduled for Thursday, December 16, 2021.

#### Adjourn

- **Motion**/second, Stowe/Voermans, to adjourn the meeting at 5:00 p.m. Motion carried.