

OFFICIAL NOTICE AND AGENDA

Notice is hereby given that the **North Central Community Services Program Board** will hold a meeting at the following date, time, and location shown below.

Thursday, February 24, 2022 at 3:00 pm

North Central Health Care, Wausau Board Room, 1100 Lake View Drive, Wausau WI 54403

The meeting site identified above will be open to the public. However, due to the COVID-19 pandemic and associated public health directives, North Central Health Care encourages the public to attend this meeting remotely. To this end, instead of attendance in person, the public may attend this meeting by telephone conference. If Board members or members of the public cannot attend remotely, North Central Health Care requests that appropriate safety measures, including adequate social distancing, be utilized by all in-person attendees.

Persons wishing to attend the meeting by phone may call into the telephone conference beginning five (5) minutes prior to the start time indicated above using the following number:

Meeting number: 1-408-418-9388 Access Code: 2486 260 6378

Our Mission

Langlade, Lincoln, and Marathon Counties partnering together to provide compassionate and high-quality care for individuals and families with mental health, recovery, and long-term care needs.

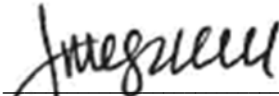
AGENDA

1. CALL TO ORDER
2. CHAIRMAN'S ANNOUNCEMENTS
3. PUBLIC COMMENT FOR MATTERS APPEARING ON THE AGENDA (Limited to 15 Minutes)
4. CONSENT AGENDA AND MONITORING REPORTS
 - A. Board Minutes and Committee Reports
 - i. ACTION: *Motion to Approve the January 27, 2021, NCCSP Board Minutes*
 - ii. FOR INFORMATION: Minutes of the January 26, 2022 and January 31, 2022 Executive Committee Meeting
 - B. Policy Governance Monitoring Reports
 - i. Recent State, Federal, and Accreditation Reports
 1. Regulatory Survey Update
5. BOARD DISCUSSION AND ACTION
 - A. CEO Report (5 Minutes) – J. Meschke
 - B. ACTION: *Motion to Accept Dashboards* (5 Minutes) – J. Meschke
 - C. ACTION: *Motion to Accept the Preliminary January Financials* (5 Minutes) – J. Meschke

6. UPDATE ON THE POTENTIAL TRI-COUNTY AGREEMENT REVISIONS – K. Gibbs
7. BOARD CALENDAR AND FUTURE AGENDA ITEMS
8. ADJOURN

Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call the Administrative Office at 715-848-4405. For TDD telephone service call 715-845-4928.

NOTICE POSTED AT: North Central Health Care
COPY OF NOTICE DISTRIBUTED TO:
Wausau Daily Herald, Antigo Daily Journal, Tomahawk Leader,
Merrill Foto News, Langlade, Lincoln & Marathon County Clerks Offices



Presiding Officer or Designee

DATE: 02/18/2022 TIME: 2:00 PM BY: D. Osowski

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

January 27, 2022

3:00 p.m.

North Central Health Care

X	Eric Anderson	X _(WebEx)	Randy Balk	X	Tom Bauknecht
X	Chad Billeb	X	Kurt Gibbs	X _(WebEx)	Deb Hager
X	Lance Leonhard	EXC	Dave Oberbeck	X	Robin Stowe
X	Gabe Ticho	X	Pat Voermans	X _(WebEx)	Bob Weaver
X _(WebEx)	Cate Wylie				

Staff Present: Jill Meschke, Jarret Nickel, Dr. Rob Gouthro, Tom Boutain, Jennifer Peaslee, Bobby Splinter, Tammy Buchberger

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

- Welcome Tom Bauknecht, new NCCSP Board member from Langlade County. Thank you for your interest in serving North Central Health Care and the Tri-County citizens.
- J. Meschke submitted her resignation last week. The Executive Committee discussed with her yesterday about the possibility of staying. The Committee is looking to the Executive Management Team to help plan for the next steps for the CEO and CFO and concerns that the Committee needs to have buy-in by this entity and leadership. Executive Committee meets again 1/31/22 to hear these recommendations and will report back to the Board. There may be another meeting of the Board regarding next steps. At minimum, J. Meschke will stay until 3/31/22 and we thank her for all of her efforts as she has been instrumental these past two years during a difficult time of the Covid pandemic.

Public Comment for Matters Appearing on the Agenda

- None

Consent Agenda and Monitoring Reports

- **Motion**/second, Billeb/Ticho, to approve the December 16, 2021 NCCSP Board Minutes. Motion carried.

- **Motion**/second, Leonhard/Anderson, to approve the recommendations of the Medical Executive Committee for Initial Appointments for Jean Vogel, MD, and Hannah Wenzlick, PA-C, and Reappointments for Gabriella Hangiandreou, MD, Kimberly Hoenecke, DO, Tiffany Pluger, APNP. Motion carried.

Board Discussion and Action

- CEO Report – J. Meschke
 - NCHC is well prepared with the CMS vaccine mandate moving forward again.
 - Medicaid rate increases, as part of the biennium budget, are moving through. Fee for service rates increased on 1/1/2022 with a 7.5% increase. An annual review of rates will be implemented to verify we meet market competitive gross charges.
- Dashboards – J. Meschke
 - A challenging year for turnover but with an increase in direct care rates last summer we received a good response and did not lose many staff due to the mandate.
 - Employee Engagement scores were largely strong with manager relationships making significant progress.
 - Nursing Home Star rating is up to a 4-Star rating that both nursing homes continue to strive to maintain.
 - In discussion with the Executive Committee, the number of diversions has improved greatly but does not relate to a favorable budget. We will be aligning these in the coming year.
 - Direct expenses were related to staffing.
 - Financial information for year end is preliminary until the audit is complete in March.
 - **Motion**/second, Ticho/Billeb, to accept the Dashboards as presented. Motion carried.
- December Financials – J. Meschke
 - Fiscal year ending in December is showing a net loss of \$4.8 million. Contributing factors relate to net patient revenue shortages and staffing exceeding plan due to Covid and staff shortages. Hospital diversions exceeded plan by \$678,000. Diversions have been improving but an aggressive target was set with \$750,000 in diversions for the year.
 - Areas of favorability were one time revenue sources of \$1.5 million in Covid Relief Funds and over \$3 million in nursing home supplemental funding. We are favorable in support costs by \$1.6 million and saved \$1.2 million in contracted provider costs with physicians on staff in the inpatient hospitals.
 - Acute behavioral health loss is attributed to diversions and variability in hospital census throughout the year. Both nursing homes exceeded annual revenue targets but staffing shortages and related costs provided problems.
 - Liquid cash flow remains an operating challenge. With additional higher payment reimbursement rates, we were able to keep cash stable from November but additional cash reserves in short-term investments have depleted.

- Renovations in the inpatient hospital will assist with diversions and census with the change from double to single room occupancy. Substantial completion is expected in April, with July as the target to be operational.
- Auditors will be on site in March. We are confident financials are a fair representation of the organization and do not anticipate large swings in financial performance to be different. The audit presentation is currently slated for May.
- Low cash reserves and how to address this is very concerning. The current Risk Reserve Policy does not have specific trigger points for capital contributions. The Executive Committee is reviewing this while working through the revisions to the Tri-County Agreement. K. Gibbs announced that the Marathon County Board this week approved its ARPA request process and form and brought it to the attention of NCHC to submit a request.
- **Motion**/second, Balk/Billeb, to accept the December financials. Motion carried.

Motion to Reconsider Compensation Administration Manual and Pay Grades

- If the Motion to Reconsider is passed, the Board will consider action on the Compensation Administration Manual and Pay Grades item originally considered at the Board's December 2021 meeting.
 - L. Leonhard requested this item be added to the agenda but will talk further with the Executive Committee before bringing back to the Board.

MOTION TO MOVE INTO CLOSED SESSION

- **Motion** by Stowe that pursuant to Section 19.85(1) (c) and (f) Wis. Stats. for the purpose of considering employment and performance evaluation of any public employee over which the governmental body exercises responsibility, and preliminary consideration of specific personnel problems, which if discussed in public, would likely have a substantial adverse effect upon the reputation of any person referred to in such problems, including specific review of performance of employees and providers of service and review of procedures for providing services by Agency, to wit: *Report of Investigations related to Corporate Compliance Activities and Significant Events*. Second by Leonhard. Roll call vote taken with all indicating 'aye'. Motion carried.
- **Motion**/second, Voermans/Stowe, to reconvene in open session at 4:07 p.m. Motion carried unanimously.

Future Agenda Items

- None

Adjourn

- **Motion**/second, Stowe/Billeb, to adjourn the meeting. Motion carried. Meeting adjourned at 4:08 p.m.

NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

January 26, 2022

2:00 p.m.

Wausau Board Room

Present: X Kurt Gibbs X^(WebEx) Deb Hager X Lance Leonhard
X Robin Stowe X Cate Wylie

Staff Present: Jill Meschke, Dr. Rob Gouthro, Jennifer Peaslee, Jarret Nickel, Bobby Splinter, Janelle Hintz, Marne Schroeder, Tom Boutain (Phone)

Others Present: Dejan Adzic, Deputy Corporation Counsel, Stacey Morache (Phone)

Call to Order

- Meeting was called to order at 2:04 p.m. by Chair Gibbs.

Public Comment

- No public comment

Approval of the December 7, 2021, December 20, 2021, and January 10, 2022 Executive Committee Meeting Minutes

- **Motion**/second, Stowe/Wylie, to approve the December 7, 2021, December 20, 2021, and January 10, 2022 Executive Committee Meeting Minutes. Motion carried.

Operational Functions Required by Statute, Ordinance, or Resolution

- None

Educational Presentations/Outcome Monitoring Reports

- CEO Report – J. Meschke
 - The Medicaid rate increases (about 15%) for the biennial budget have been approved and are moving through financial statements. Medicaid rate adjustments for Mount View Care Center are in process. With these rate adjustments we are anticipating approximately \$55,000 additional this year. Increases will also be seen in residential services as well as behavioral health services. We also had a gross charge rate increase across the board.
 - The CMS vaccination mandate is effective January 27, 2022. We have only a few new employees to verify vaccination status with and do not anticipate issues with staffing at this time.
- Organizational and Program Dashboards – J. Meschke
 - Targets that are appropriate for 2022 are being identified. Input to any changes in the data provided on the Dashboards from the Committee is welcomed. Leonhard noted that year to date turnover was approximately one-third of the staff and complimented staff for managing through those challenges.

- December Financials – J. Meschke
 - December financials are preliminary and may be revised following the 2021 audit. Preliminary loss in December is \$754,000 with a year-to-date loss of \$4.8 million. Net patient revenue shortages and staffing costs exceeded plan for several reasons i.e., unplanned absences due to Covid made up by overtime and agency expense, several approved market adjustments relating to increased wages across direct care positions, and hospital diversions. Noted is that the number of diversions has improved however, the cost of diversions continues to exceed plan. We are working on adjusting this dashboard measure to reconcile with budget.
 - Several one-time revenue sources were received i.e., \$1.5 million in Covid Relief Funding and \$3 million in nursing home supplemental payment.
 - Financial review by program was also provided.
 - Cash balances have decreased about \$170,000 since November with several large cash outlays occurring in January i.e., first half of HSA payments
 - K. Gibbs noted that the Marathon County Board approved the process to request ARPA funding and encourage NCHC to complete the online request form.

- Discussion and Next Steps for Recruitment of Chief Executive Officer and Chief Financial Officer
 - Press release was sent on Fri, January 21 after receipt of J. Meschke’s resignation effective March 31, 2022.
 - The Committee asked Meschke and the Executive Management Team to provide their recommendations, along with any challenges they see, to the Committee on moving forward to fill each of these roles. The Executive Committee will meet with the Executive Management Team on Mon, January 31 at 1:00 p.m. to discuss.
 - Leonhard noted an anticipated revised Tri-County Agreement will be approved by March; recruitment with revised job duties would follow. The Committee needs to understand reasonable expectations of financial performance which the counties have not matched for a number of years and include a conversation about replenishing reserves.
 - Meschke added that knowing and understanding expectations of the Committee is important in looking at what the role will be and having someone be successful especially as it relates to financial performance. Having unclear expectations in the role of CEO comes with a lot of risk.

Discussions of Potential Revisions to Tri-County Agreement

- **Motion** by Stowe to go into closed session, pursuant to Wis. Stat. Sections 19.85 (c), (e) and (f), for the purpose of considering performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility, for conducting other specified public business, whenever competitive or bargaining reasons require a closed session, and for preliminary consideration of specific personnel problems which, if discussed in public, would be likely to have a substantial adverse effect upon the reputation of any person involved in such problems, to wit: consideration of specific NCHC employees and personnel data in the context of potential revisions to the Tri-County Agreement. Second by Wylie. Roll call taken. All indicated aye. Motion carried. Meeting convened in closed session at 2:30 p.m.
- **Motion**/second, Leonhard/Stowe, to reconvene in open session at 6:16 p.m. Motion carried unanimously.
- **Motion**/second, Stowe/Leonhard, to continue with Attorney Andy Phillips at the new law firm of Attolles Law, S.C. understanding that he was the individual who helped the Committee at Von Briesen and is assisting with redrafting of the Tri-County Agreement. Motion carried unanimously.

Announcements

- Committee will continue with the redrafting of the potential Tri-County Agreement.
- Next meeting is Monday, January 31, 2022 at 1:00 p.m.

Adjournment

- **Motion**/second, Wylie/Stowe, to adjourn the meeting at 6:20 p.m. Motion carried.

NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

January 31, 2022

1:00 p.m.

Wausau Board Room

Present: X Kurt Gibbs X Deb Hager X Lance Leonhard
X Robin Stowe X Cate Wylie

Staff Present: Jill Meschke, Dr. Rob Gouthro, Jennifer Peaslee, Jarret Nickel, Tom Boutain
Others Present: Dejan Adzic, Deputy Corporation Counsel

Call to Order

- Meeting was called to order at 1:00 p.m. by Chair Gibbs.

Closed Session

- **Motion/second**, Stowe/Leonhard, to go into closed session, pursuant to Wis. Stat. Sections 19.85 (c), for the purpose of considering employment, promotion, compensation, or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility, to wit: considering staff recommendations relative to open management positions at NCHC
- All indicated aye. Motion carried.
- **Motion/second**, Wylie/Leonhard, to move into Open Session at 2:40 p.m. Motion carried.

Discussions of Potential Revisions to Tri-County Agreement

- **Motion/second**, Wylie/Stowe, to go into closed session, pursuant to Wis. Stat. Sections 19.85 (c), (e) and (f), for the purpose of considering performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility, for conducting other specified public business, whenever competitive or bargaining reasons require a closed session, and for preliminary consideration of specific personnel problems which, if discussed in public, would be likely to have a substantial adverse effect upon the reputation of any person involved in such problems, to wit: consideration of specific NCHC employees and personnel data in the context of potential revisions to the Tri-County Agreement.
- All indicated aye. Motion carried. Meeting convened in closed session at 2:42 p.m.
- **Motion/second**, Stowe/Wylie, to reconvene in open session at 4:50 p.m. Motion carried.
- **Motion/second**, Stowe/Leonhard, to forward the final draft of the proposed Tri-County Agreement to Atty. Andy Phillips for legal review and possible presentation to county boards in February. Motion carried.

Adjournment

- **Motion/second**, Wylie/Stowe, to adjourn the meeting at 4:54 p.m. Motion carried.



North Central Health Care

Person centered. Outcome focused.

MEMORANDUM

DATE: 2/18/2022
TO: North Central Community Services Program Board
FROM: Jennifer Peaslee, Compliance Officer
RE: Regulatory Survey Update

The Department of Health Services (DHS) conducted an unannounced onsite complaint investigation on January 19, 2022. This visit was in response to a complaint received by DHS regarding our Crisis Center. A patient felt that the assessment process was not properly completed. Two client records were reviewed, staff involved were interviewed, and medical record documentation was examined in addition to policy and procedure relative to the assessment process.

The surveyor found the complaint to be unsubstantiated, however one deficiency unrelated to the complaint was identified. Pursuant to DHS 34.23(5) if someone needs emergency mental health services, staff of the program shall prepare and initiate a response plan consisting of services and referral necessary to reduce or eliminate the crisis and help them return to a safe and more stable level of functioning. The response plan should be approved as medically necessary by a mental health professional and is documented through a required signature by the clinician.

In the documentation reviewed for both clients, the response plan did not include an approval signature resulting in the deficiency and requiring a plan of correction. Correction will include re-education of staff on the process of ensuring signature in the medical record and establishes a schedule of audit and monitoring of the clinician signature process to ensure compliance.



North Central Health Care

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MEMORANDUM

DATE: February 16, 2022
TO: North Central Community Services Program Board Executive Committee
FROM: Jill S. Meschke, Interim Chief Executive Officer, Chief Financial Officer
RE: CEO Report – February 2022

Below are updates since our last meeting.

Since Our Last Meeting

The number of employees out due to Covid-19 has reduced quite dramatically from our latest peak in mid-January where number of employees out reached 75 (ten percent of NCHC employees). As of February 15, 15 staff were out due to Covid-19 (six positive).

COVID-19 hospitalizations in the state have fallen to their lowest levels since early November, according to data released by the Wisconsin Hospital Association last week.

Additionally, The CMS Vaccination Mandate paused in December 2021 is now moving forward. Several NCHC employees continue working through the HR-led process of compliance with the mandate.

Industry News

LeadingAge Wisconsin, of which NCHC is a member, says seven Wisconsin nursing homes have announced closures since last year and staffing shortages have led others to shutter some beds for a total loss of more than 2,000 licensed beds — the equivalent of 29 nursing homes — since the COVID-19 pandemic began. That group is asking the state for financial help to improve staffing. They note that the \$356.6 million increase for long-term care in the 2021-23 budget is insufficient to keep pace with rising costs.

“We’re in a precarious position right now,” said John Sauer, CEO of LeadingAge Wisconsin. The budget increase “didn’t have the significant financial relief that people thought it would because our cost increases escalated beyond what people were projecting when the budget was being developed and passed,” he said. The group is asking the state Department of Health Services for assistance like a \$50 million staffing shortage fund in Minnesota.

Children's Wisconsin is set to open a walk-in urgent-care clinic that treats mental health at the same level as physical wellbeing. It is a response to a growing need in the community. Staff is still being hired to run the clinic with the goal to be available to families seven days a week between 3 p.m. and 11 p.m.

The Wisconsin Office of Children’s Mental Health released their 2021 annual report last week. Part of the 20-page document included a variety of indicators for childhood wellbeing. Wisconsin is trending in the right direction for some, but not others.

Positive-Trending Factors

- Cyberbullying
- Perception of risk using alcohol
- High school graduation
- Low income youth
- Parents attending child's activities
- Positive adult mentor
- Count of mental health professionals
- Teen birth rate
- Eighth grade math proficiency
- Four-year old kindergarten attendance
- Mothers with higher education degrees
- Access to mental health services
- Untreated mental conditions/concerns
- Mental health hospitalizations

Negatively-Trending Factors

- Sleeping < 8 hours per night
- Electronics use 3+ hours daily
- Experiences of sexual dating violence
- Employment for young adults
- School connectedness
- Early development screening
- Adolescents experiencing a major depressive episode
- Children with emotional, behavioral, or developmental concerns
- Teens considering suicide
- Suicide attempts
- Difficulty with social skills
- School suspensions
- High school students feeling sad or hopeless

Dashboards

Vacancy and turnover rates remain high affecting the ability to increase census in programs and overtime. Quality measures have started strong in 2022 with low hospital and nursing home readmission rates and four-star quality scores for both Mount View and Pine Crest.

Financial Highlights

January 2022 financial statements are in preliminary form until after completion of the 2021 financial audit. 2021 audit fieldwork is scheduled for the week of March 14.

To date, NCHC has experienced a loss of (\$712,963) for January. Net income performance is the area of greatest concern with a budget variance (\$1,477,477) or (27.6%).

Acute care behavioral health services experienced a net income shortfall of (\$314,011) or (48.9%) driven by census results.

- Adult hospital averaged a census of 8.25 versus a budget of 11
- Youth hospital averaged a census of 3.2 versus a budget of 4
- Adult crisis stabilization averaged a census of 6.25 versus a budget of 6
- Youth crisis stabilization averaged a census of 2 versus a budget of 3

Community-based behavioral health services experienced a net income shortfall of (\$852,442) or (61.0%) driven by the following programs.

- Community Treatment Adult (\$204,274) or (43.9%)
- Community Treatment Youth (\$535,036) or (81.6%)
- Outpatient (\$125,725) or (46.3%)

The skilled nursing facilities experienced a net income shortfall of (\$392,374) or (18.0%) driven by census. Mount View averaged a census of 115.25 versus a budget of 137 and Pine Crest averaged a census of 83.6 versus a budget of 99.

Community Living experienced favorable net income performance to plan by \$17,360 or 3.8%.

All other revenues were short plan by (\$96,690) or (4.3%). In total, January revenue was (\$1,574,165) or (20.9%) short of budget.

Direct Expenses are favorable \$438,430 or 8.1%, due to \$437,362 provider contracted services. Invoices and revenue for contracted providers generally arrive one month in arrears and therefore accruals for both are being added to January, which will increase both revenue and expense in community treatment netting a positive additional income of \$100,000.

Indirect Expenses \$614,385 or 26.1%, driven by \$235,488 depreciation and \$176,661 personnel expense. After 2021 is closed, the existing depreciation accrual will be reversed, and the depreciation calculation will occur in January with a closer to budget outcome.

Current Challenges

The primary challenge for NCHC remains recruiting and retaining staff. The result of staffing shortages is experienced in both revenue shortages and overages in costs in addition to reduced engagement and employee burnout.

Considerations and Decisions

I ask that the Executive Committee consider several changes to the dashboards. I recommend the following:

- Limit the dashboard to one page and eliminate the dashboards by program
- Add the number of open FTEs in addition to the vacancy and turnover rates
- Include the average monthly census for Mount View Care Center, Pine Crest Nursing Home, and Adult and Youth Crisis Stabilization Facilities
- Incorporate access metrics related to outpatient (i.e., average days for initial counseling/psychiatry appointment post-hospital discharge)
- Add net income performance to the financial measures
- Review and realign all the targets to the budget

Conclusion

Progress continues for a variety of important initiatives at NCHC. We appreciate the time and commitment of the Board of Directors. Thank you.

Update February 17, 2022

Since authoring this report, there have been changes to the financial results for January 2022, which are still considered preliminary. Changes are highlighted below.

To date, NCHC has experienced a loss of (\$415,450) for January. Net income performance is the area of greatest concern with a budget variance (\$817,334) or (15.3%).

Acute care behavioral health services experienced a net income shortfall of (\$175,808) or (27.4%) driven by census results.

- Adult hospital averaged a census of 8.25 versus a budget of 11
- Youth hospital averaged a census of 3.2 versus a budget of 4
- Adult crisis stabilization averaged a census of 6.25 versus a budget of 6
- Youth crisis stabilization averaged a census of 2 versus a budget of 3

Community-based behavioral health services experienced a net income shortfall of (\$333,247) or (23.9%) driven by the following programs.

- Community Treatment Adult (\$65,044) or (14.0%)
- Community Treatment Youth (\$180,371) or (27.5%)
- Outpatient (\$69,331) or (25.5%)

The skilled nursing facilities experienced a net income shortfall of (\$392,374) or (18.0%) driven by census. Mount View averaged a census of 115.25 versus a budget of 137 and Pine Crest averaged a census of 83.6 versus a budget of 99.

Community Living experienced favorable net income performance to plan by \$18,958 or 4.2%.

All other revenues were short plan by (\$96,690) or (4.3%). In total, January revenue was (\$914,022) or (12.1%) short of budget.

Direct Expenses are favorable \$75,800 or 1.4%. Indirect Expenses \$614,385 or 26.1%, driven by \$235,488 depreciation and \$176,661 personnel expense. After 2021 is closed, the existing depreciation accrual will be reversed, and the depreciation calculation will occur in January with a closer to budget outcome.

DEPARTMENT: NORTH CENTRAL HEALTH CARE

FISCAL YEAR: 2022

PRIMARY OUTCOME GOAL	↑↓	TARGET	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	2022 YTD	2021
PEOPLE																
Vacancy Rate	↘	7-9%	9.7%												9.7%	7.3%
Turnover Rate	↘	20-23% (1.7%-1.95%)	2.5%												2.5%	31.8%
Organization Diversity Composite Index	↗	Monitoring	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	0.66
SERVICE																
Patient Experience (Net Promoter Score)	↗	55-61	71.0%												71.0%	64.4
QUALITY																
Hospital Readmission Rate	↘	10-12%	9.47%												9.47%	10.3%
Nursing Home Readmission Rate	↘	10-12%	7.1%												7.1%	12.7%
Nursing Home Star Rating	↗	★★★★	★★★★★												★★★★★	★★★
Zero Harm - Patients	↘	Monitoring	5.05												5.05	0.80
Zero Harm - Employees	↘	Monitoring	1.11												1.11	3.14
COMMUNITY																
Out of County Placements	↘	230-250	178												178	151
Client Diversity Composite Index	↗	Monitoring	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	0.45
FINANCE																
Direct Expense/Gross Patient Revenue	↘	64-67%	79.2%												79.2%	78.2%
Indirect Expense/Direct Expense	↘	44-47%	35.1%												35.1%	37.6%
Net Income	↗	2-3%	-12.0%												-12.0%	-5.7%

↗ Higher rates are positive
 ↘ Lower rates are positive

2022 - Primary Dashboard Measure List

↗ Higher rates are positive

↘ Lower rates are positive

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD	2021
North Central Health Care	People	Vacancy Rate	↘	7-9%	9.7%	9.7%	7.8%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	2.5%	2.5%	N/A
		Organization Diversity Composite Index	↗	Monitoring	N/A	N/A	N/A
	Service	Patient Experience (Net Promoter Score)	↗	55-61	71.0%	71.0%	61.0
	Quality	Hospital Readmission Rate	↘	10-12%	9.5%	9.5%	11.8%
		Nursing Home Readmission Rate	↘	10-12%	10.7%	10.7%	13.5%
		Nursing Home Star Rating	↗	★★★★	★★★★★	★★★★★	★★★
		Zero Harm - Patients	↘	Monitoring	5.05	5.05	0.74
		Zero Harm - Employees	↘	Monitoring	1.11	1.11	2.84
	Community	Out of County Placements	↘	230-250	178	178	269
		Client Diversity Composite Index	↗	Monitoring	N/A	N/A	/
	Finance	Direct Expense/Gross Patient Revenue	↘	64-67%			72.4%
		Indirect Expense/Direct Expense	↘	44-47%			39.0%
		Net Income	↗	2-3%			0.4%

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Adult Community Treatment	People	Vacancy Rate	↘	7-9%	4.3%	4.3%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	0.0%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	50.0%	50.0%
	Quality	Zero Harm - Patients	↘	Monitoring	0.38	0.38
		% of Treatment Plans Completed within Required Timelines	↗	96-98%	63%45/72	63.0%
		Employment rate of Individual Placement and Support (IPS) Clients	↗	46-50%	57.1%	57.1%
	Community	% of Eligible CCS and CSP Clients Admitted within 60 Days of Referral	↗	60-70%	0.0%0/2	0.0%
		Average Days from Referral to Initial Appointment	↘	55-60 days	108 days	108 days
		Hospitalization Rate of Active Patients	↘	Monitoring	1.83%	1.83%
	Finance	Direct Expense/Gross Patient Revenue	↘	86.7-90.2%		
Net Income		↗	\$10,457-\$15,686 Per Month			

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Adult Crisis Stabilization CBRF	People	Vacancy Rate	↘	5-7%	0.0%	0.0%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	0.0%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	0.0%	0.0%
	Quality	Zero Harm - Patients	↘	Monitoring	107.14	107.14
		% of Patients who kept their Follow-up Appointment	↗	90-95%	100% 5/5	100.0%
	Community	% of Patients Admitted within 24 hours of Referral	↗	90-95%	100% 20/20	100.00%
	Finance	Direct Expense/Gross Patient Revenue	↘	30.9-32.2%		
		Net Income	↗	\$1,747-\$2,620 Per Month		

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Adult Inpatient Psychiatric Hospital	People	Vacancy Rate	↘	7-9%	6.3%	6.3%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	0.0%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	0.0	0.0%
	Quality	Zero Harm - Patients	↘	Monitoring	145.83	145.83
		Hospital Readmission Rate	↘	10-12%	9.4%	9.4%
		Average Days for Initial Counseling Appointment Post-Hospital Discharge	↘	8-10 days	15 days	15 days
		Average Days for Initial Psychiatry Appointment Post-Hospital Discharge	↘	8-10 days	10.2 days	10.2 days
		Average Days since previous Detox Admission	↗	330-360 days	700 days	700 days
	Community	Out of County Placements	↘	150-170	129	129
	Finance	Direct Expense/Gross Patient Revenue	↘	78.2-81.4%		
Net Income		↗	\$13,382-\$20,073 Per Month			

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Aquatic	People	Vacancy Rate	↘	5-7%	0.0%	0.0%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	0.0%
	Service	Patient Experience (Net Promoter Score)	↗	83-87	85.71%	85.71%
	Quality	Zero Harm - Patients	↘	Monitoring	34.48	34.48
	Finance	Direct Expense/Gross Patient Revenue	↘	43.8-45.6%		
		Net Income	↗	\$2,174-\$3,261 Per Month		

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Clubhouse	People	Vacancy Rate	↘	5-7%	0.0%	0.0%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	0.0%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	0.65	64.7%
	Quality	Average Attendance Per Work Day	↗	20-25	13.0%	13.0%
		% of Members Working 15 or More Hours Per Month	↗	80-85%	34% 21/61	34.0%
	Community	Active Members Per Month	↗	110-120	99	99
	Finance	Direct Expense/Gross Patient Revenue	↘	58.6-61.0%		
		Net Income	↗	\$536-\$804 Per Month		

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Crisis and Emergency Services	People	Vacancy Rate	↘	7-9%	9.4%	9.4%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	0.0%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	0.0%	0.0%
	Quality	Zero Harm - Patients	↘	Monitoring	11.88	11.88
		% of Crisis Assessments with Documented Linkage and Follow-up within 24 hours	↗	70-75%	67.1%	67.1%
		Avoid Hospitalizations (NCHC and Diversions) with a length of stay of less than 72 hours	↘	5-10%	0.0%	0.0%
	Community	Out of County Placements Days	↘	230-250	178	178
		Court Liasion: % of Eligible Individuals with Commitment and Settlement Agreements who are Enrolled in CCS or CSP withn 60 days	↗	80-85%	N/A	N/A
	Finance	Direct Expense/Gross Patient Revenue	↘	167.6-174.4%		
		Net Income	↗	\$5,370-\$8,055 Per Month		

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Day Services	People	Vacancy Rate	↘	7-9%	11.1%	11.1%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	0.0%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	100.0%	100.0%
	Quality	Zero Harm - Patients	↘	Monitoring	3.65	3.65
	Finance	Direct Expense/Gross Patient Revenue	↘	89.3-92.9%		
		Net Income	↗	\$5,103-\$7,654 Per Month		

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Group Homes	People	Vacancy Rate	↘	7-9%	12.5%	12.5%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	3.7%	3.7%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	50.0%	50.0%
	Quality	Zero Harm - Patients	↘	Monitoring	3.08	3.08
	Finance	Direct Expense/Gross Patient Revenue	↘	66.3-69.0%		
		Net Income	↗	\$2,939-\$4,408 Per Month		

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Mount View Care Center	People	Vacancy Rate	↘	7-9%	14.1%	14.1%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	3.8%	3.8%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	80.0%	80.0%
	Quality	Nursing Home Readmission Rate	↘	10-12%	9.5%	9.5%
		Zero Harm - Residents	↘	Monitoring	5.52	5.52
		Nursing Home Quality Star Rating	↗	★★★★	★★★★	★★★★
	Community	Referral Conversion Rate	↗	N/A	N/A	N/A
	Finance	Direct Expense/Gross Patient Revenue	↘	55.5-57.7%		
Net Income		↗	\$30,636-\$45,954 Per Month			

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Outpatient Services	People	Vacancy Rate	↘	7-9%	12.2%	12.2%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	2.8%	2.8%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	61.9%	61.9%
	Quality	Zero Harm - Patients	↘	Monitoring	0.92	0.92
		Average Days for Initial Counseling Appointment Post-Hospital Discharge	↘	8-10 days	13.4 days	13.4 days
		Average Days for Initial Psychiatry Appointment Post-Hospital Discharge	↘	8-10 days	10.2 days	10.2 days
		Day Treatment Program Completion Rate	↗	40-50%	N/A	N/A
		OWI - 5 Year Recidivism Rate	↘	13-15%	10.7%	10.7%
		Same Day Cancellation and No-Show Rate	↘	15-18%	11.8%	11.8%
	Community	% of Patients Offered an Appointment within 4 Days of Screening by a Referral Coordinator	↗	20-25%	19.4%	19.4%
		Post-Jail Release Access Rate (Within 4 Days of Release)	↗	20-25%	N/A	N/A
		Average Number of Days from Referral to Start of Day Treatment	↘	16-20 days	N/A	N/A
		Hospitalization Rate of Active Patients	↘	Monitoring	0.73%	0.73%
		Direct Expense/Gross Patient Revenue	↘	93.4-97.2%		
	Finance	Net Income	↗	\$12,534-\$18,802 Per Month		

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Pine Crest Nursing Home	People	Vacancy Rate	↘	7-9%	12.4%	12.4%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	2.4%	2.4%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	0.0%	0.0%
	Quality	Zero Harm - Residents	↘	Monitoring	8.41	8.41
		Nursing Home Readmission Rate	↘	10-12%	14.3%	14.3%
		Nursing Home Quality Star Rating	↗	★★★★	★★★★	★★★★
	Community	Referral Conversion Rate	↗	N/A	N/A	N/A
	Finance	Direct Expense/Gross Patient Revenue	↘	57.0-59.3%		
		Net Income	↗	\$20,559-\$30,839 Per Month		

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Riverview Terrace (RCAC)	People	Vacancy Rate	↘	7-9%	0.0%	0.0%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	0.0%
	Quality	Zero Harm - Patients	↘	Monitoring	N/A	N/A
	Finance	Direct Expense/Gross Patient Revenue	↘	N/A		
		Net Income	↗	\$582-\$873 Per Month		

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Supported Apartments	People	Vacancy Rate	↘	7-9%	12.9%	12.9%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	7.1%	7.1%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	100.0%	100.0%
	Quality	Zero Harm - Patients	↘	Monitoring		
	Finance	Direct Expense/Gross Patient Revenue	↘	38.5-41.0%		
		Net Income	↗	\$3,364-\$5,046 Per Month		

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Youth Community Treatment	People	Vacancy Rate	↘	7-9%	7.9%	7.9%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	0.0%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	100.0%	100.0%
	Quality	Zero Harm - Patients	↘	Monitoring	0.00	0.00
		% of Treatment Plans Completed within Required Timelines	↗	96-98%	40%17/45	40.0%
		% of Eligible CCS and CSP Clients Admitted within 60 Days of Referral	↗	60-70%	67%2/3	67.0%
	Community	Average Days from Referral to Initial Appointment	↘	55-60 days	133 days	133 days
		Hospitalization Rate of Active Patients	↘	Monitoring	2.38%	2.38%
		Finance	Direct Expense/Gross Patient Revenue	↘	77.2-80.4%	
	Net Income		↗	\$14,139-\$21,208 Per Month		

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Youth Crisis Stabilization Facility	People	Vacancy Rate	↘	5-7%	22.2%	22.2%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	25.0%	25.0%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	N/A	N/A
	Quality	Zero Harm - Patients	↘	Monitoring	8.51	8.51
		% of Patients who kept their Follow-up Outpatient Appointment	↗	90-95%	N/A	N/A
	Community	% of Patients Admitted within 24 hours of Referral	↗	90-95%	100%10/10	100.0%
	Finance	Direct Expense/Gross Patient Revenue	↘	127-130%		
		Net Income	↗	\$1,692-\$2,538 Per Month		

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Youth Psychiatric Hospital	People	Vacancy Rate	↘	7-9%	16.7%	16.7%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	12.5%	12.5%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	0.0	0.0%
	Quality	Zero Harm - Patients	↘	Monitoring	15.33	15.33
		Hospital Readmission Rate	↘	10-12%	9.7%	9.7%
		Average Days for Initial Counseling Appointment Post-Hospital Discharge	↘	8-10 days	7.3 days	7.3 days
		Average Days for Initial Psychiatry Appointment Post-Hospital Discharge	↘	8-10 days	10.1 days	10.1 days
	Community	Out of County Placements	↘	50-60		
	Finance	Direct Expense/Gross Patient Revenue	↘	61.8-64.4%		
		Net Income	↗	\$4,973-\$7,459 Per Month		

North Central Health Care
Income Statement
For the Period Ending January 31, 2022

	MTD Actual	MTD Budget	\$ Variance	% Variance	YTD Actual	YTD Budget	\$ Variance	% Variance
Direct Revenues								
Patient Gross Revenues	6,865,334	7,606,233	(740,899)	-9.7%	6,865,334	7,606,233	(740,899)	-9.7%
Patient Contractual Adjustments	(2,330,575)	(2,254,141)	(76,434)	3.4%	(2,330,575)	(2,254,141)	(76,434)	3.4%
Net Patient Revenue	4,534,759	5,352,093	(817,334)	-15.3%	4,534,759	5,352,093	(817,334)	-15.3%
County Revenue	418,500	425,885	(7,385)	-1.7%	418,500	425,885	(7,385)	-1.7%
Contracted Service Revenue	77,510	99,769	(22,259)	-22.3%	77,510	99,769	(22,259)	-22.3%
Grant Revenues and Contractuals	364,086	276,784	87,301	31.5%	364,086	276,784	87,301	31.5%
Appropriations	510,045	510,045	-	0.0%	510,045	510,045	-	0.0%
COVID-19 Relief Funding	-	-	-	0.0%	-	-	-	0.0%
Other Revenue	520,477	642,061	(121,584)	-18.9%	520,477	642,061	(121,584)	-18.9%
Total Direct Revenue	6,425,377	7,306,637	(881,260)	-12.1%	6,425,377	7,306,637	(881,260)	-12.1%
Indirect Revenues								
County Revenue	169,609	170,209	(600)	-0.4%	169,609	170,209	(600)	-0.4%
Contracted Service Revenue	2,250	2,500	(250)	-10.0%	2,250	2,500	(250)	-10.0%
Grant Revenues and Contractuals	-	-	-	0.0%	-	-	-	0.0%
Appropriations	-	-	-	0.0%	-	-	-	0.0%
Other Revenue	19,742	52,083	(32,342)	-62.1%	19,742	52,083	(32,342)	-62.1%
Allocated Revenue	-	(3,858)	3,858	-100.0%	-	(3,858)	3,858	-100.0%
Total Indirect Revenue	188,172	220,934	(32,763)	-14.8%	188,172	220,934	(32,763)	-14.8%
Total Operating Revenue	6,613,549	7,527,571	(914,022)	-12.1%	6,613,549	7,527,571	(914,022)	-12.1%
Direct Expenses								
Personnel Expenses	3,630,591	3,706,216	75,625	2.0%	3,630,591	3,706,216	75,625	2.0%
Contracted Services Expenses	631,435	706,168	74,733	10.6%	631,435	706,168	74,733	10.6%
Supplies Expenses	49,841	71,697	21,855	30.5%	49,841	71,697	21,855	30.5%
Drugs Expenses	591,048	492,826	(98,222)	-19.9%	591,048	492,826	(98,222)	-19.9%
Program Expenses	62,442	65,515	3,072	4.7%	62,442	65,515	3,072	4.7%
Land & Facility Expenses	17,686	93,118	75,432	81.0%	17,686	93,118	75,432	81.0%
Equipment & Vehicle Expenses	28,230	50,762	22,532	44.4%	28,230	50,762	22,532	44.4%
Diversions Expenses	67,362	62,500	(4,862)	-7.8%	67,362	62,500	(4,862)	-7.8%
Other Operating Expenses	230,668	136,303	(94,365)	-69.2%	230,668	136,303	(94,365)	-69.2%
Total Direct Expenses	5,309,304	5,385,104	75,800	1.4%	5,309,304	5,385,104	75,800	1.4%
Indirect Expenses								
Personnel Expenses	1,075,975	1,252,637	176,661	14.1%	1,075,975	1,252,637	176,661	14.1%
Contracted Services Expenses	10,252	8,500	(1,752)	-20.6%	10,252	8,500	(1,752)	-20.6%
Supplies Expenses	53,765	75,466	21,701	28.8%	53,765	75,466	21,701	28.8%
Drugs Expenses	516	2,500	1,984	79.4%	516	2,500	1,984	79.4%
Program Expenses	14,730	23,654	8,925	37.7%	14,730	23,654	8,925	37.7%
Land & Facility Expenses	180,202	415,691	235,488	56.6%	180,202	415,691	235,488	56.6%
Equipment & Vehicle Expenses	1,133	125,950	124,817	99.1%	1,133	125,950	124,817	99.1%
Diversions Expenses	-	-	-	0.0%	-	-	-	0.0%
Other Operating Expenses	401,007	453,626	52,620	11.6%	401,007	453,626	52,620	11.6%
Allocated Expense	-	(6,057)	(6,057)	100.0%	-	(6,057)	(6,057)	100.0%
Total Indirect Expenses	1,737,581	2,351,966	614,385	26.1%	1,737,581	2,351,966	614,385	26.1%
Total Operating Expenses	7,046,885	7,737,070	690,185	8.9%	7,046,885	7,737,070	690,185	8.9%
Metrics								
Indirect Expenses/Direct Expenses	32.7%	43.7%			32.7%	43.7%		
Direct Expense/Gross Patient Revenue	77.3%	70.8%			77.3%	70.8%		
Non-Operating Income/Expense								
Interest Income	3,427	5,833	(2,406)	-41.2%	3,427	5,833	(2,406)	-41.2%
Donations Income	14,459	-	14,459	0.0%	14,459	-	14,459	0.0%
Other Non-Operating	-	-	-	0.0%	-	-	-	0.0%
Total Non-Operating	17,886	5,833	12,053	206.6%	17,886	5,833	12,053	206.6%
Net Income (Loss)	(415,450)	(203,666)	(211,784)	100.0%	(415,450)	(203,666)	(211,784)	100.0%
Net Income	-6.3%	-2.7%			-6.3%	-2.7%		

North Central Health Care
Programs by Service Line
For the Period Ending January 31, 2022

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
BEHAVIORAL HEALTH SERVICES								
Adult Behavioral Health Hospital	444,424	547,539	(103,114)	524,550	582,090	57,540	(80,126)	(45,575)
Adult Crisis Stabilization Facility	94,066	119,052	(24,986)	83,932	124,605	40,673	10,134	15,687
Lakeside Recovery MMT	11,508	-	11,508	(3,089)	-	3,089	14,597	14,597
Youth Behavioral Health Hospital	109,376	145,034	(35,658)	230,718	251,111	20,392	(121,342)	(15,266)
Youth Crisis Stabilization Facility	32,028	89,275	(57,247)	47,900	82,367	34,467	(15,873)	(22,780)
Crisis Services	219,757	243,333	(23,576)	283,232	292,723	9,491	(63,475)	(14,085)
Psychiatry Residency	23,052	29,517	(6,464)	29,714	39,248	9,534	(6,662)	3,070
	<u>934,212</u>	<u>1,173,749</u>	<u>(239,537)</u>	<u>1,196,958</u>	<u>1,372,144</u>	<u>175,186</u>	<u>(262,746)</u>	<u>(64,351)</u>
COMMUNITY SERVICES								
Outpatient Services (Marathon)	396,281	456,095	(59,814)	564,053	536,524	(27,529)	(167,772)	(87,343)
Outpatient Services (Lincoln)	99,070	95,799	3,271	51,283	76,753	25,470	47,787	28,741
Outpatient Services (Langlade)	83,827	83,000	827	57,114	59,403	2,289	26,713	3,116
Community Treatment Adult (Marathon)	388,547	463,391	(74,844)	387,946	460,274	72,328	601	(2,516)
Community Treatment Adult (Lincoln)	66,919	87,446	(20,527)	57,213	79,254	22,042	9,706	1,514
Community Treatment Adult (Langlade)	37,733	58,326	(20,593)	31,286	53,206	21,921	6,447	1,327
Community Treatment Youth (Marathon)	357,493	480,205	(122,712)	358,286	477,891	119,605	(793)	(3,107)
Community Treatment Youth (Lincoln)	115,135	159,393	(44,258)	101,359	151,679	50,320	13,776	6,061
Community Treatment Youth (Langlade)	91,117	140,036	(48,919)	78,763	119,485	40,722	12,354	(8,197)
Community Corner Clubhouse	(2,177)	14,904	(17,081)	21,494	26,332	4,838	(23,671)	(12,243)
	<u>1,633,944</u>	<u>2,038,595</u>	<u>(404,651)</u>	<u>1,708,796</u>	<u>2,040,801</u>	<u>332,005</u>	<u>(74,853)</u>	<u>(72,646)</u>
COMMUNITY LIVING								
Adult Day Services (Marathon)	45,792	64,365	(18,573)	36,336	58,347	22,011	9,456	3,438
Prevocational Services (Marathon)	40,040	47,865	(7,826)	59,517	60,363	847	(19,477)	(6,979)
Lincoln Industries	69,059	50,311	18,748	90,961	87,419	(3,542)	(21,902)	15,206
Day Services (Langlade)	35,170	29,370	5,800	33,432	32,410	(1,023)	1,738	4,778
Andrea St Group Home	54,423	43,866	10,557	36,506	39,164	2,658	17,917	13,216
Chadwick Group Home	52,564	42,933	9,631	40,818	41,481	663	11,746	10,294
Bissell Street Group Home	45,839	54,072	(8,233)	38,579	42,119	3,540	7,260	(4,693)
Heather Street Group Home	45,668	41,311	4,357	42,658	35,786	(6,872)	3,010	(2,515)
Jelinek Apartments	71,012	72,763	(1,750)	63,095	67,754	4,659	7,917	2,909
River View Apartments	63,194	61,780	1,414	55,424	71,618	16,194	7,770	17,608
Forest Street Apartments	0	-	0	174	-	(174)	(174)	(174)
Fulton Street Apartments	21,486	23,099	(1,614)	35,019	27,109	(7,909)	(13,533)	(9,523)
Riverview Terrace	28,641	29,696	(1,055)	22,253	26,600	4,347	6,389	3,292
Hope House (Sober Living Marathon)	2,332	76	2,257	7,427	5,682	(1,745)	(5,095)	511
Homelessness Initiative	10	-	10	2,209	2,358	149	(2,199)	159
Sober Living (Langlade)	2,122	3,395	(1,273)	6,587	8,782	2,196	(4,465)	923
	<u>577,352</u>	<u>564,901</u>	<u>12,451</u>	<u>570,994</u>	<u>606,993</u>	<u>35,999</u>	<u>6,358</u>	<u>48,450</u>
NURSING HOMES								
Mount View Care Center	1,468,316	1,848,210	(379,894)	1,539,791	1,760,569	220,777	(71,475)	(159,117)
Pine Crest Nursing Home	967,651	995,352	(27,702)	961,602	1,091,897	130,295	6,049	102,593
	<u>2,435,967</u>	<u>2,843,562</u>	<u>(407,596)</u>	<u>2,501,393</u>	<u>2,852,465</u>	<u>351,072</u>	<u>(65,427)</u>	<u>(56,524)</u>
Pharmacy	720,527	670,962	49,566	759,939	616,019	(143,920)	(39,412)	(94,354)
OTHER PROGRAMS								
Aquatic Services	85,589	99,677	(14,089)	70,831	118,252	47,421	14,758	33,333
Birth To Three	129,899	33,333	96,566	129,899	33,333	(96,566)	-	-
Adult Protective Services	77,247	66,313	10,934	70,098	66,343	(3,755)	7,148	7,179
Demand Transportation	35,599	42,312	(6,713)	33,422	30,719	(2,702)	2,178	(9,415)
	<u>328,334</u>	<u>241,636</u>	<u>86,699</u>	<u>304,250</u>	<u>248,648</u>	<u>(55,602)</u>	<u>24,084</u>	<u>31,096</u>
Total NCHC Service Programs	6,631,435	7,533,404	(901,969)	7,046,885	7,737,070	690,185	(415,450)	(211,784)

North Central Health Care
Fund Balance Review
For the Period Ending January 31, 2022

	<u>Marathon</u>	<u>Langlade</u>	<u>Lincoln</u>	<u>Total</u>
Total Net Position at Period End	4,764,438	379,370	1,494,275	6,638,084
County Percent of Total Net Position	71.8%	5.7%	22.5%	
Total Operating Expenses, Year-to-Date	5,204,431	362,276	1,475,624	7,042,330
Share of Operating Cash	1,042,725	83,027	327,031	1,452,783
Days Cash on Hand	6	7	7	6
Share of Investments	4,163,047	331,485	1,305,661	5,800,192
Days Invested Cash	24	28	27	25

PRELIMINARY

North Central Health Care
Review of Services in Marathon County
For the Period Ending January 31, 2022

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Outpatient Services	396,281	456,095	(59,814)	564,053	536,524	(27,529)	(167,772)	(87,343)
Community Treatment-Adult	388,547	463,391	(74,844)	387,946	460,274	72,328	601	(2,516)
Community Treatment-Youth	357,493	480,205	(122,712)	358,286	477,891	119,605	(793)	(3,107)
Day Services	85,832	112,230	(26,399)	95,853	118,710	22,857	(10,022)	(3,541)
Clubhouse	(9,844)	7,237	(17,081)	21,494	26,332	4,838	(31,338)	(12,243)
Homelessness Initiative	10	-	10	2,209	2,358	149	(2,199)	159
Hope House Sober Living	2,332	76	2,257	7,427	5,682	(1,745)	(5,095)	511
Riverview Terrace	28,641	29,696	(1,055)	22,253	26,600	4,347	6,389	3,292
Demand Transportation	35,599	42,312	(6,713)	33,422	30,719	(2,702)	2,178	(9,415)
Aquatic Services	57,060	71,149	(14,089)	70,831	118,252	47,421	(13,770)	33,333
Pharmacy	720,527	670,962	49,566	759,939	616,019	(143,920)	(39,412)	(94,354)
Mount View Care Center	1,343,316	1,723,210	(379,894)	1,539,791	1,760,569	220,777	(196,475)	(159,117)
	<u>3,405,795</u>	<u>4,056,563</u>	<u>(650,768)</u>	<u>3,863,504</u>	<u>4,179,930</u>	<u>316,426</u>	<u>(457,709)</u>	<u>(334,342)</u>
Shared Services								
Adult Behavioral Health Hospital	256,197	332,741	(76,545)	389,389	432,102	42,713	(133,192)	(33,831)
Youth Behavioral Health Hospital	78,100	104,570	(26,470)	171,269	186,407	15,138	(93,169)	(11,332)
Residency Program	17,112	21,911	(4,799)	22,057	29,135	7,077	(4,945)	2,279
Crisis Services	41,600	59,101	(17,501)	210,252	217,297	7,045	(168,652)	(10,456)
Adult Crisis Stabilization Facility	69,828	88,376	(18,548)	62,305	92,498	30,193	7,523	11,645
Youth Crisis Stabilization Facility	23,775	66,271	(42,496)	35,558	61,144	25,586	(11,783)	(16,910)
Lakeside Recovery MMT	8,543	-	8,543	(2,293)	-	2,293	10,836	10,836
Residential	344,021	330,071	13,951	303,310	315,703	12,394	40,711	26,344
Adult Protective Services	23,988	15,872	8,116	52,036	49,248	(2,788)	(28,048)	5,329
Birth To Three	97,045	24,903	72,142	97,045	24,903	(72,142)	-	-
	<u>960,209</u>	<u>1,043,815</u>	<u>(83,606)</u>	<u>1,340,927</u>	<u>1,408,436</u>	<u>67,509</u>	<u>(380,718)</u>	<u>(16,097)</u>
County Appropriations	398,434	398,434	-				398,434	-
Excess Revenue/(Expense)	<u>4,764,438</u>	<u>5,498,812</u>	<u>(734,374)</u>	<u>5,204,431</u>	<u>5,588,366</u>	<u>(383,935)</u>	<u>(439,993)</u>	<u>(1,118,309)</u>

North Central Health Care
Review of Services in Lincoln County
For the Period Ending January 31, 2022

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Outpatient Services	99,070	95,799	3,271	51,283	76,753	25,470	47,787	28,741
Community Treatment-Adult	66,919	87,446	(20,527)	57,213	79,254	22,042	9,706	1,514
Community Treatment-Youth	115,135	159,393	(44,258)	101,359	151,679	50,320	13,776	6,061
Lincoln Industries	69,059	50,311	18,748	90,961	87,419	(3,542)	(21,902)	15,206
Pine Crest Nursing Home	930,916	958,618	(27,702)	961,602	1,091,897	130,295	(30,686)	102,593
	<u>1,281,098</u>	<u>1,351,566</u>	<u>(70,468)</u>	<u>1,262,418</u>	<u>1,487,002</u>	<u>224,584</u>	<u>18,681</u>	<u>154,116</u>
Shared Services								
Adult Behavioral Health Hospital	52,747	68,507	(15,760)	80,170	88,964	8,794	(27,422)	(6,965)
Youth Behavioral Health Hospital	16,080	21,530	(5,450)	35,262	38,379	3,117	(19,182)	(2,333)
Residency Program	3,523	4,511	(988)	4,541	5,998	1,457	(1,018)	469
Crisis Services	8,565	12,168	(3,603)	43,288	44,738	1,451	(34,723)	(2,153)
Adult Crisis Stabilization Facility	14,377	18,195	(3,819)	12,828	19,044	6,216	1,549	2,398
Youth Crisis Stabilization Facility	4,895	13,644	(8,749)	7,321	12,589	5,268	(2,426)	(3,482)
Lakeside Recovery MMT	1,759	-	1,759	(472)	-	472	2,231	2,231
Residential	-	-	-	-	-	-	-	-
Adult Protective Services	4,939	3,268	1,671	10,713	10,140	(574)	(5,775)	1,097
Birth To Three	19,555	5,018	14,537	19,555	5,018	(14,537)	-	-
	<u>126,439</u>	<u>146,841</u>	<u>(20,402)</u>	<u>213,206</u>	<u>224,870</u>	<u>11,664</u>	<u>(86,767)</u>	<u>(8,738)</u>
County Appropriations	86,738	86,738	-				86,738	-
Excess Revenue/(Expense)	<u>1,494,275</u>	<u>1,585,145</u>	<u>(90,870)</u>	<u>1,475,624</u>	<u>1,711,871</u>	<u>236,248</u>	<u>18,652</u>	<u>145,378</u>

North Central Health Care
Review of Services in Langlade County
For the Period Ending January 31, 2022

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Outpatient Services	83,827	83,000	827	57,114	59,403	2,289	26,713	27,540
Community Treatment-Adult	37,733	58,326	(20,593)	31,286	53,206	21,921	6,447	(14,146)
Community Treatment-Youth	91,117	140,036	(48,919)	78,763	119,485	40,722	12,354	(36,565)
Sober Living	2,122	3,395	(1,273)	6,587	8,782	2,196	(4,465)	(5,738)
Day Services	35,170	29,370	5,800	33,432	32,410	(1,023)	1,738	7,538
	<u>249,968</u>	<u>314,126</u>	<u>(64,158)</u>	<u>207,181</u>	<u>273,287</u>	<u>66,105</u>	<u>42,787</u>	<u>(21,371)</u>
Shared Services								
Adult Behavioral Health Hospital	36,182	46,992	(10,810)	54,992	61,024	6,032	(18,810)	(29,620)
Youth Behavioral Health Hospital	11,030	14,768	(3,738)	24,188	26,325	2,138	(13,158)	(16,896)
Residency Program	10,165	3,094	7,070	3,115	4,115	999	7,049	14,120
Crisis Services	5,875	8,347	(2,472)	29,693	30,688	995	(23,818)	(26,290)
Adult Crisis Stabilization Facility	9,862	12,481	(2,619)	8,799	13,063	4,264	1,062	(1,557)
Youth Crisis Stabilization Facility	3,358	9,359	(6,002)	5,022	8,635	3,613	(1,664)	(7,666)
Lakeside Recovery MMT	1,206	-	1,206	(324)	-	324	1,530	2,737
Residential	10,165	9,752	412	8,962	9,328	366	1,203	1,615
Adult Protective Services	3,388	2,242	1,146	7,349	6,955	(394)	(3,961)	(2,815)
Birth To Three	13,300	3,413	9,887	13,300	3,413	(9,887)	-	9,887
	<u>104,528</u>	<u>110,447</u>	<u>(5,919)</u>	<u>155,094</u>	<u>163,546</u>	<u>8,451</u>	<u>(50,566)</u>	<u>(56,485)</u>
County Appropriations	24,874	24,874	-				24,874	-
Excess Revenue/(Expense)	<u>379,370</u>	<u>449,447</u>	<u>(70,077)</u>	<u>362,276</u>	<u>436,833</u>	<u>74,557</u>	<u>17,095</u>	<u>(52,982)</u>

North Central Health Care
 Report on the Availability of Invested Funds
 For the Period Ending January 31, 2022

Bank	Length	Maturity Date	Interest Rate	Amount
Abby Bank	365 Days	1/6/2022	0.30%	500,000
CoVantage Credit Union	365 Days	1/29/2022	0.50%	308,192
PFM Investments	365 Days	2/18/2022	0.25%	248,000
PFM Investments	365 Days	2/18/2022	0.18%	248,000
CoVantage Credit Union	365 Days	2/19/2022	0.50%	500,000
Abby Bank	546 Days	3/1/2022	0.65%	500,000
CoVantage Credit Union	365 Days	3/3/2022	0.50%	500,000
PFM Investments	365 Days	4/5/2022	0.20%	248,000
PFM Investments	365 Days	7/13/2022	0.25%	248,000
People's State Bank	365 Days	8/21/2022	0.40%	500,000
Abby Bank	365 Days	8/29/2022	0.30%	500,000
Abby Bank	730 Days	2/25/2023	0.40%	500,000
CoVantage Credit Union	730 Days	3/8/2023	0.60%	500,000
Abby Bank	730 Days	7/19/2023	0.40%	500,000
PFM Investments	365 Days	7/19/2023	0.40%	500,870
Invested Funds				6,301,062
Weighted Average	397 Days		0.53%	

PRELIMINARY

North Central Health Care
 Summary of Revenue Write-Offs
 For the Period Ending January 31, 2022

	<u>MTD</u>	<u>YTD</u>
Behavioral Health Hospitals		
Administrative Write-Off	(14,859)	(14,859)
Bad Debt	-	-
Outpatient & Community Treatment		
Administrative Write-Off	1,796	1,796
Bad Debt	-	-
Nursing Home Services		
Administrative Write-Off	4,165	4,165
Bad Debt	7,373	7,373
Aquatic Services		
Administrative Write-Off	2,642	2,642
Bad Debt	-	-
Pharmacy		
Administrative Write-Off	32	32
Bad Debt	-	-
Other Services		
Administrative Write-Off	978	978
Bad Debt	-	-
Grand Total		
Administrative Write-Off	(5,245)	(5,245)
Bad Debt	7,373	7,373