

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, March 31, 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: 2490 624 5078

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

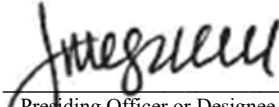
1. CALL TO ORDER
2. CHAIRMAN'S ANNOUNCEMENTS
3. PUBLIC COMMENT FOR MATTERS APPEARING ON THE AGENDA (Limited to 15 Minutes)
4. CONSENT AGENDA AND MONITORING REPORTS
 - A. Board Minutes and Committee Reports
 - i. ACTION: Motion to Approve the February 24, 2021, NCCSP Board Minutes
 - ii. FOR INFORMATION: Minutes of the February 22, 2022, March 14, 2022, and March 17, 2022 Executive Committee Meetings and February 22, 2022 Nursing Home Operations Committee Meeting
 - B. ACTION: Motion to Approve the Recommendations of the Medical Executive Committee for Reappointments for Laurence Gordon, DO, Patrick Helfenbein, MD, Gregory Varhely, MD
 - C. Policy Governance Monitoring Reports
 - i. Recent State, Federal, and Accreditation Reports
 1. The Joint Commission – J. Peaslee

5. BOARD DISCUSSION AND ACTION
 - A. CEO Report (5 Minutes) – J. Meschke
 - B. Dashboard Recommendations – J. Meschke
 - C. ACTION: *Motion to Accept Dashboards* (5 Minutes) – J. Meschke
 - D. ACTION: *Motion to Accept the February Financials* (5 Minutes) – J. Meschke
6. PRESENTATION ON EXPECTATIONS MOVING FORWARD WITH POSSIBLE ANNOUNCEMENT OF INTERIM CEO AFTER MARCH 31, 2022
7. MOTION TO MOVE INTO CLOSED SESSION
 - A. 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* (20 Minutes) – J. Peaslee
8. BOARD CALENDAR AND FUTURE AGENDA ITEMS
9. 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

DATE: 03/25/2022 TIME: 11:00 AM BY: D. Osowski



Presiding Officer or Designee

NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD MEETING MINUTES

February 24, 2022

3:00 p.m.

North Central Health Care

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

Staff Present: Jill Meschke, Jarret Nickel, Dr. Rob Gouthro, Tom Boutain, Jennifer Peaslee, Bobby Splinter, Tammy Buchberger, Kim Van Ermen, Pam Hoff, Marne Schroeder, Nic Lotzer

Others Present: Dejan Adzic, Deputy Corp. Counsel, Feng Lo, NCHC Intern

Others Present by WebEx: Dave Bailey, Mickala Meyer

Call to Order

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

Chairman's Announcements

- Thanks to all for participating in today's meeting and for the dedication to North Central Health Care and for the staff dedicated to the constituents of the three counties.

Public Comment for Matters Appearing on the Agenda

- None

Consent Agenda and Monitoring Reports

- January 27, 2022 NCCSP Board Minutes
 - **Motion**/second, Wylie/Ticho, to approve the January 27, 2022 NCCSP Board Minutes. Motion carried.
- Policy Governance Monitoring Reports – J. Peaslee
 - The Department of Health Services (DHS) conducted an on-site unannounced complaint investigation on 1/19/22. DHS received a complaint from someone who received an assessment at the Crisis Center. Per the usual survey process, they reviewed client records, staff involved, documentation in the medical record, as well as policies and procedures, and found the complaint to be unsubstantiated. However, during the investigation surveyors can site the facility for anything they find that is not in compliance. The surveyors found that a required signature was missing in a chart they reviewed and as a result issued a citation. A Plan of Correction has been submitted.

Board Discussion and Action

- CEO Report – J. Meschke
 - We reach our peak in mid-January with Covid-related absences with 75 staff out which is approximately 10% of our workforce. As of today, we have 8 staff out.
 - Last Fall we had paused any action against employees due to the CMS mandate but are now working through the new mandate requirements and timeline. We do not anticipate an interruption in service.
 - LeadingAge this week announced the loss of 2,000 licensed skilled nursing home beds which is equivalent to about 29 nursing homes.
 - Children's Wisconsin is set to open a walk-in urgent care clinic that treats mental health at the same level as physical wellbeing.
- Dashboards – J. Meschke
 - Financial measures were not completed for the program level dashboards as we work through preliminary financials until the 2021 audit is complete.
 - Continue to experience high vacancy and turnover.
 - Quality measures in January are strong.
 - Executive Committee suggested changes to the Dashboard i.e., average census, total open FTE positions, etc. Potential changes will be presented to the Committee in March. K. Gibbs would welcome input and ideas from all Board members on information that is critical to their understanding. It was noted that access to services is an area of interest.
 - **Motion**/second, Voermans/Oberbeck, to accept the Dashboards. Motion carried.
- January Financials – J. Meschke
 - Reference the update to the financials dated February 17, 2022. Net income should read net patient revenue.
 - January experienced a net loss of \$415,000. The greatest concern is the net patient revenue (gross charges less contractual discounts) shortfall of 15% from budget. Acute care behavioral health services shortfall relates directly to lower census from budget. Much had to do with capping census due to the large number of staff out with Covid or Covid-related absences. Community Living had a favorable net patient revenue performance of 4.2%. Both direct and indirect expenses were favorable.
 - Several Youth Hospital contracts have been executed with neighboring counties and we continue to reach out to other counties for additional contracts.
 - Significant concern was expressed with having only 6 days cash on hand. J. Meschke explained that rates have been increased in 2022 after several years of no rate adjustments. NCHC will be submitting a request to Marathon County for ARPA funds. Lincoln and Langlade Counties are aware of the financial situation and are reviewing financial policies for backfilling the shortfall.
 - **Motion**/second, Balk/Stowe, to accept the preliminary January financials. Motion carried.

Update on the Potential Tri-County Agreement Revisions – K. Gibbs

- At the request of the Board in January 2021, Atty. Phillips was asked to provide an update and recommendations on improving the Agreement. The Executive Committee was charged with the review and finalized the recommendations which were sent to the three counties for consideration. Marathon County Board took action on Tues, Feb. 22 and approved the agreement. Lincoln and Langlade County Boards will consider the revised agreement on Mon, Feb. 28, 2022. If they approve, the revised agreement will go to DHS to determine if the new structure is approved.
- The revisions help provide clarify to roles and responsibilities as had been presented by the former CEO that role clarity wasn't clear and that you can't serve 5 masters i.e., the NCHC Executive Committee, the three county boards, and in some cases departments from the counties. The former Retained County Authority Committee (RCA) is now the NCHC Executive Committee which consists of the three administrative officials of the counties (or their designee) plus one additional Marathon County member.
- If the revised agreement is approved by all three counties and DHS, the Executive Committee will meet to draft a job description for the next Administrative Director and begin recruitment.
- The current NCCSP Board will then be limited to policymaking and the decision-making authority rests with the NCHC Executive Committee.

Board Calendar and Future Agenda Items

- Relay any questions, concerns, requests to K. Gibbs for inclusion on agendas.

Adjourn

- **Motion**/second, Wylie/Anderson, to adjourn the meeting. Motion carried. Meeting adjourned at 3:46 p.m.

NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

February 22, 2022

12:00 p.m.

Wausau Board Room

Present: X Kurt Gibbs X_(Webex) Deb Hager X Lance Leonhard
X_(Webex) Robin Stowe X_(Webex) Cate Wylie

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

Others Present: Dejan Adzic, Deputy Corp. Counsel, Atty, Andy Phillips, Attolles Law

Call to Order

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

Public Comment

- Thanks to all committee members and Atty. Phillips for joining the meeting today.

Approval of January 26, 2022 and January 31, 2022 Executive Committee Meeting Minutes

- **Motion**/second, Wylie/Leonhard, to approve the January 26, 2022 and January 31, 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
 - In mid-January we were struggling with a high number of employees out, about 75 or 10%, due to Covid. Today the number of employees out is significantly lower, about 9, with county positivity ratings currently below 10% in all three counties. Human Resources is managing the Covid mandate making sure we are in compliance by February 28. We anticipate losing 5-6 employees due to the mandate.
 - LeadingAge, a lobbying group for skilled nursing facilities, of which NCHC is a member, is requesting assistance from the Wisconsin Legislature as the industry has been hit hard since the pandemic began and losing more than 2,000 licensed beds (the equivalent to 29 nursing homes).
 - We are currently recruiting for 72 FTE positions (10% of our overall workforce). Some positions are being absorbed into other areas with the biggest need in the nursing homes (20 at MVCC and 12 at Pine Crest). Other areas impacted include Community Living, Crisis, and Dietary. Earlier this year the State had 600 people identified to help with health care staffing shortage, however, we did not receive any assistance from the application we submitted.

- We had been staffing at a higher level than required but have had to reduce the staffing level due to the staffing shortage. We are managing our day-to-day census based on staffing level which can limit admissions due to lack of staffing.
- Organizational and Program Dashboards – J. Meschke
 - Highlights of the report included in the meeting packet:
 - Vacancy and turnover rates are high which affects census and overtime
 - Quality measures started strong in readmission rates and quality scores for both hospitals and nursing homes
 - Recommendations for changes to the 2022 Dashboard:
 - Reduce to one-page (eliminate the program dashboards)
 - Add: FTE's
 - Add: Census
 - Add: Access i.e., number of days from discharge to appointment
 - Add: Net patient revenue
 - Revise targets to match budget
 - Committee expressed need for performance measures as set forth in budget, good financial indicators, quality measures as recommended by staff; suggested obtaining feedback from communities on how programs are working, possibly looking at a past, present, and future aspect
 - Staff will provide a revised Dashboard in March for Committee consideration
- January Preliminary Financials – J. Meschke
 - Refer to February 17, 2022 memo with updated information.
 - January ended with a \$415,000 loss. Greatest concern is the budget variance of \$817,000 in net patient revenue line item. Acute Care services had a loss of \$175,000, community services were behind in net patient revenue target by \$300,000 and the skilled nursing facilities were short \$392,000 which was mostly driven by census.
 - Census at Mount View is up from a January census of 116; Pine Crest was 84 in January and is between 85-88 in February. All other revenues were short of plan.
 - Based on net position we have about 6 days cash on hand in the bank for accounts payable and payroll. We have about \$6 million in CD's which is 25 days of additional cash.
 - Committee asked the Executive Management Team to identify a plan to get back on target for cash on hand and more aggressive measures taken to offset these losses. May need to discuss services, service levels, operational needs along with financial impact with three counties especially if any are outside the core services as policy decisions are driven by the owners of NCHC and not staff.
- NCHC will be completing the ARPA application and submitting to Marathon County for consideration.

Discussion of Potential Revisions to Tri-County Agreement

- **Motion**/second, Leonhard/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.
- **Motion**/second, Wylie/Stowe, to move into open session at 1:30 p.m. Motion carried.

Announcements

- **Motion**/second, Leonhard/Stowe, to recommend the completed new Tri-County Agreement be forwarded to the three county boards for consideration. Motion carried.

Adjournment

- **Motion**/second, Leonhard/Stowe, to adjourn the meeting at 1:34 p.m. Motion carried.

Minutes prepared by Debbie Osowski, Executive Assistant to CEO

NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

March 14, 2022

12:30 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, Tom Boutain, Jarret Nickel

Call to Order

- Meeting was called to order at 12:35 p.m. by Chair Gibbs.
- Request made to take the agenda item Follow-up Update on the Tri-County Agreement out of order to allow staff present to hear update. Committee agreed.

Follow-up Update on the Tri-County Agreement

- Marathon County approved the updated Tri-County Agreement on 2/24/2022. Lincoln and Langlade Counties approved the updated Tri-County Agreement on 2/28/2022. As of today, we are waiting on the Department of Health Services' legal to provide Atty. Phillips with the procedure for submitting the new contract.

Motion to go into Closed Session

- **Motion**/second, Stowe/Wylie, to move into Closed Session pursuant to Wis. Stat. s. 19.85(1)(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: consideration of NCHC interim chief executive officer term and position
- Roll call vote taken; all indicated aye. Motion carried. Meeting convened in Closed Session at 12:40 p.m.

Motion to Return to Open Session

- **Motion**/second, Stowe/Wylie, to return to open session at 3:00 p.m. Motion carried

Announcements and Possible Action on Matters Discussed in Closed Session

- None

Adjournment

- **Motion**/second, Wylie/Stowe, to adjourn the meeting at 3:01 p.m. Motion carried.

NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

March 17, 2022

10:00 a.m.

Virtual Meeting

Present: X_(WebEx) Kurt Gibbs EXC Deb Hager X_(WebEx) Lance Leonhard
 X_(WebEx) Robin Stowe X_(WebEx) Cate Wylie

Others Present: Dejan Adzic, Deputy Corp. Counsel

Call to Order

- Meeting was called to order at 10:00 a.m. by Chair Gibbs.

Motion to go into Closed Session

- **Motion**/second, Leonhard/Stowe, to move into Closed Session pursuant to Wis. Stat. s. 19.85(1)(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: consideration of NCHC interim chief executive officer term and Wis. Stat. s. 19.85(1)(e) for the purpose of considering employment or compensation of any public employee over which the governmental body has jurisdiction or exercised responsibility, and for the purpose of conducting other specified public business, whenever competitive reasons require a closed session, to wit: negotiation of potential agreements with service providers
- Roll call vote taken; all indicated aye. Motion carried. Meeting convened in Closed Session at 10:02 a.m.

Motion to Return to Open Session

- **Motion**/second, Leonhard/Wylie, to return to open session at 12:44 p.m. Motion carried.

Announcements and Possible Action on Matters Discussed in Closed Session

- None

Adjournment

- **Motion**/second, Wylie/Stowe, to adjourn the meeting at 12:48 p.m. Motion carried.

NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD NURSING HOME OPERATIONS COMMITTEE

February 22, 2022

10:00 AM

NCHC Wausau Board Room

Present: X Kurt Gibbs X(WebEx) Paul Gilk X(WebEx) Cindy Rider
X(WebEx) Pat Voermans EXC Bob Weaver X(WebEx) Cate Wylie

Staff: Jill Meschke, Jarret Nickel, Tom Boutain, Jennifer Peaslee, Ryan Hanson, Kristin Woller, Bobby Splinter

Others: Dejan Adzic, Deputy Corp. Counsel

Call to Order

- Meeting was called to order at 10:03 a.m.

Public Comment for Matters Appearing on the Agenda

- None

Approval of December 7, 2021 Nursing Home Operations Committee Minutes

- **Motion**/second, Voermans/Rider, to approve the December 7, 2021 Nursing Home Operations Committee Minutes. Motion carried.

Financial Report – J. Meschke

- Financials for December and January are *preliminary* until the audit is complete.
- Mount View is ending the 2021 calendar year with patient net revenue short of plan of about 13%, however, due to one-time funding payments we are over plan by \$375,000 (2%) on revenue projections. Personnel expenses were particularly challenging for 2021 with \$1.5 million over budget due to overtime and payments due to Covid. Drug expenses were higher than plan also. Mount View is expecting a preliminary loss of \$1.7 million. January revenues are starting behind budget but expect CPE and supplemental payments. Expenses are on target. Currently we are slightly behind breakeven at a loss of \$72,000 for January.
- Pine Crest is ending 2021 about 1% behind net patient revenue target. They also had strong performance in other revenues but still ending 2021 about \$1.5 million (13%) over budget for the calendar year. Pine Crest experienced staffing struggles during 2021 but rather than overtime, they had high agency use. With \$1.6 million over budget for direct services, the year ended with a \$1 million loss, slightly better than the planned budget projected loss of \$1.1 million. January revenues are 3% behind plan however are 3% favorable in expenses with a \$6,000 net income.
- The challenge with meeting budgeted census at both facilities and how it is reflected in the net patient review was discussed.

- The Covid variant in January had a significant impact limiting admissions at both nursing homes periodically. We have been able to mitigate most of the outbreak to a unit to maintain census in February. With county positivity ratings declining recently, we anticipate census to improve.
- Another impact on budget is the number of open positions with 20 full-time equivalent positions at Mount View and 12 at Pine Crest. If staffing is limited, admissions could be limited.
- Strategies that have been implemented to mitigate the cost over budget include significantly reducing agency use at Pine Crest, closely monitoring and adjusting staffing in all departments based on census and evaluating contracts on fixed costs. Rates were also increased for both facilities which will continue to be reviewed annually. With the Covid ratings dropping in recent weeks census should recover with not having to close admissions due to outbreak. Staffing has been the main challenge. We continue to advertise and recruit for the 32 FTE open positions.

Preliminary Pine Crest Nursing Home Annual Survey Results – J. Nickel

- Pine Crest concluded their annual survey. Surveys usually occur every 9-15 months, however the last survey at Pine Crest was on 2/20/2020. The delay in the on-site survey was directly related to the Covid pandemic. Typically, there are 3-6 surveys on site for 3-5 days and may return if there is a finding for recertification. The average number of citations in the United States is 8.1 and 6.7 in Wisconsin. Pine Crest was one of the first facilities to be surveyed under the CMS vaccine mandate focus. Pine Crest received 1 citation relating to Infection Prevention & Control on personal protective equipment (PPE) usage related to N95 masks. A Plan of Correction has been submitted.
- The Life Safety Survey also occurred where one surveyor, an engineer, was on site for one day, and focuses on facility/building items. We anticipate 8 citations, but they will not impact the Star Rating. According to Wylie, all items have been reviewed with Lincoln County and completed by the maintenance department.

Nursing Home Operations Reports

- Mount View Care Center – K. Woller
 - The report was reviewed. Human Resources (HR) is working on creative ways to increase the number of applicants to fill the significant number of open positions. HR also tries to interview employees when they leave to understand reasons for leaving. NCHC conducts periodic surveys of staff including a new hire survey, engagement survey, and exit survey which is completed by a third party.
 - We may lose 5-7 staff due to the vaccine mandate compliance deadline of 2/28/22.
- Pine Crest Nursing Home – R. Hanson
 - The report was reviewed. The CMS Quality Star Rating should improve from the recent survey results. The 700-wing has transitioned to Lincoln Industries and is going well. R. Hanson and S. Barnett are transitioning into their new roles as Administrator and Director of Nursing respectfully.

- Approximately 60% of the Pine Crest staff are fully vaccinated. Testing continues for staff and varies depending on vaccination status. Currently all testing materials are being covered under a waiver.
- Recently Pine Crest held a CNA class of which 2 of the 6 students were Pine Crest employees.

MVCC and PC Construction Update – J. Meschke

- The Bistro in the new MVCC Tower opened in January and is receiving positive reviews from staff and community.
- The Gift Shop also opened and is available to the community as intended.
- Renovation plans of MVCC Suite A ('old' MVCC) is progressing with anticipated construction to begin in April. We continue to partner with Miron on the contract.
- The second floor will have a memory care unit and a long-term care unit. Gardenside Crossing will then be closed as operations are moved to the renovated units.

Board Discussion

- None

Future Agenda Items and Meeting Schedule

- The Charter for the Nursing Home Operations Committee will be reviewed once the revised Tri-County Agreement is finalized.

Adjourn

- **Motion**/second, Gilk/Voermans, to adjourn the meeting at 11:12 a.m. Motion carried.

Minutes prepared by Debbie Osowski, Executive Assistant to CEO

PRIVILEGE AND APPOINTMENT RECOMMENDATION

Appointee Patrick Helfenbein, M.D. Appoint/Reappoint 04-222 to 03-31-2024
Time Period

Requested Privileges ☐ Medical ☐ Mid-Level Practitioner
 ☒ Psychiatry ☐ Medical Director

Medical Staff Category ☒ Courtesy ☐ Active
 ☐ Provisional ☐ Consulting

Staff Type ☐ Employee
 ☒ Locum Locum Agency: VISTA
 ☐ Contract Contract Name: _____

CMO PRIVILEGE RECOMMENDATION

The Credentials file of this staff member contains data and information demonstrating current competence in the clinical privileges requested. After review of this information, I recommend that the clinical privileges be granted as indicated with any exceptions or conditions documented.

Comments: _____

(Chief Medical Officer or Designee Signature) 3/17/22
(Signature Date)

MEC ACTION

MEC recommends that:

- ☒ He/she be appointed/reappointed to the Medical Staff as requested
☐ Action be deferred on the application
☐ The application be denied

M. B. 3-17-22
(MEC Committee or Designee Signature) (Signature Date)

GOVERNING BOARD ACTION

Reviewed by Governing Board: _____
(Date)

Response: ☐ Concur
 ☐ Recommend further reconsideration

(Governing Board Signature) _____
(Signature Date)

(Chief Executive Officer Signature) _____
(Signature Date)

PRIVILEGE AND APPOINTMENT RECOMMENDATION

Appointee Gregory Varhely, MD. Appoint/Reappoint 05-01-2022 to 04-30-2024
Time Period

Requested Privileges ☐ Medical ☐ Mid-Level Practitioner
 ☒ Psychiatry ☐ Medical Director

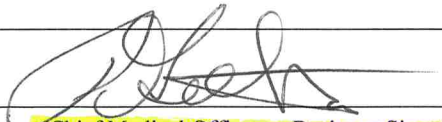
Medical Staff Category ☐ Courtesy ☒ Active
 ☐ Provisional ☐ Consulting

Staff Type ☐ Employee Locum Agency: _____
 ☐ Locum Contract Name: Varhely + Associates, LLC
 ☒ Contract

CMO PRIVILEGE RECOMMENDATION

The Credentials file of this staff member contains data and information demonstrating current competence in the clinical privileges requested. After review of this information, I recommend that the clinical privileges be granted as indicated with any exceptions or conditions documented.

Comments: _____

 3/17/22
(Chief Medical Officer or Designee Signature) (Signature Date)

MEC ACTION

MEC recommends that:

- ☒ He/she be appointed/reappointed to the Medical Staff as requested
☐ Action be deferred on the application
☐ The application be denied

 3-17-22
(MEC Committee or Designee Signature) (Signature Date)

GOVERNING BOARD ACTION

Reviewed by Governing Board: _____
(Date)

Response: ☐ Concur
 ☐ Recommend further reconsideration

(Governing Board Signature) (Signature Date)

(Chief Executive Officer Signature) (Signature Date)



MEMORANDUM

DATE: 3/24/22
TO: North Central Community Services Program Board
FROM: Jennifer Peaslee, Compliance Officer
RE: Regulatory Survey Update

On 3/15/22, we welcomed The Joint Commission (TJC) for our much-anticipated Medicare Deficiency survey. This survey was conducted for the purposes of assessing compliance with the Medicare conditions for hospitals, as well as the special conditions for psychiatric hospitals, through The Joint Commission's deemed status survey process. Healthcare organizations that achieve accreditation through a Joint Commission "deemed status" survey are determined to meet or exceed Medicare and Medicaid requirements. As a result of achieving deemed status, we are therefore not subject to the Medicare (CMS) survey and certification process because we have been surveyed by an accrediting organization.

We had one Life Safety Engineer onsite for approximately two hours. As a review, these findings were mostly related to the environment of care & facilities, and most were completed prior to exit in August. Based upon the submission of our plan of correction on November 3, 2021, and the successful unannounced Medicare Deficiency follow-up event conducted on March 15, 2022, all areas of deficiency were removed. Therefore, The Joint Commission has granted our organization an accreditation decision of "Accredited" with an effective date of August 6, 2021. The Joint Commission has also recommended our organization for continued Medicare certification effective August 6, 2021. Our accreditation status continues for 18-36 months post exit, until the next survey occurs.

MEMORANDUM

DATE: March 17, 2022
TO: North Central Community Services Program Board Executive Committee
FROM: Jill S. Meschke, Interim Chief Executive Officer, Chief Financial Officer
RE: CEO Report – March 2022

Below are updates since our last meeting.

Since Our Last Meeting

In March NCHC leadership began an exercise to identify and eliminate \$1.5 million of planned expenditures from the 2022 budget. Results will be available soon.

Dashboard Highlights

Employee Measures

- Improvements made in turnover rate and open FTEs in February
- Overtime rate reduced from January, but still over plan and approximating prior year
- Agency usage rate over plan, but improved from prior year

Operational Metrics

- Significant drop in out of county placement days in February
- Census improvements were made in both skilled nursing facilities
- Hospitals experienced a slight census reduction and stabilization facilities experienced an increase
- Outpatient no show rate improved in February
- Development of appropriate operational metrics that relate to revenue production continues

Financial Performance

- Direct expense/gross patient revenue rate improved in February
- Indirect expenses increased from 2021 partially due to interest payments on debt service
- Days cash on hand improved from February

Quality Measures

- Net promoter score dropped in February, but remains within target
- Readmission rates increased in February
- Zero harm measure for patients had significant improvement in February

Access Metrics

- Outpatient average days for initial appointment exceeds target
- Community treatment average days for referral exceeds target

Financial Performance

February 2022 financial statements are in preliminary form until after completion of the 2021 financial audit. 2021 audit fieldwork is in progress.

NCHC has experienced a loss of (\$386,236) for February and (\$1,452,364) year-to-date. Net patient revenue performance is the area of greatest concern with a budget variance (\$1,026,660) or (19.2%).

Acute care behavioral health services experienced a net patient revenue shortfall of (\$252,850) or (39.4%) driven by census results. Other revenue is approximating targets year-to-date.

Community-based behavioral health services experienced a net patient revenue shortfall of (\$427,435) or (30.6%) driven by the following programs.

- Community Treatment Adult (\$137,828) or (29.6%)
- Community Treatment Youth (\$191,767) or (29.3%)
- Outpatient (\$83,091) or (30.6%)

Additionally, other revenue is (\$119,114) unfavorable year-to-date due to the determination that the CCS settlement accrual calculation was too high after completion of the budget.

Mount View Care Center experienced a net patient revenue shortfall of (\$367,395) or (25.0%) in February and (\$733,129) or (24.9%) year-to-date due to average February census of 124.32 versus a budget of 137. All other revenues approximate budget.

Pine Crest Nursing Home experienced net patient revenue favorability of \$27,966 or 4.0% in February and has approximated budget year-to-date due to receiving a higher Medicaid rate than planned. Census is 84.93 versus a budget of 99. All other revenues approximate budget.

Community Living experienced unfavorable net patient revenue performance to plan by (\$14,541) or (3.2%) in February but is favorable to plan year-to-date. All other revenues approximate budget year-to-date.

Other direct care service programs experienced favorable net patient revenue of \$7,595 or 1.1% in February and \$71,585 or 5.2% year-to-date. Other revenues are (\$71,017) unfavorable to plan due to reduced internal transfers related to Pharmacy service fees.

Acute care behavioral health services direct expenses approximated target in February and is (\$39,677) or (2.1%) unfavorable year-to-date driven by personnel expenses and diversion expenses, but partially offset by favorability in facility expenses.

Community-based behavioral health services direct expenses are favorable to plan \$479,794 or 15.1% year-to-date driven by personnel expenses and contracted CCS provider expenses.

Mount View Care Center direct expenses are \$89,214 or 4.5% favorable to plan year-to-date driven by personnel expenses and drugs expenses.

Pine Crest Nursing Home direct expenses are \$18,661 or 1.4% favorable to plan year-to-date driven by drugs expenses and personnel expenses, but partially offset by agency employee costs.

Community Living direct expenses are (\$19,990) or (2.2%) unfavorable to plan year-to-date due to equipment purchased for Lincoln Industries consumers.

Other direct care service programs direct expenses are (\$19,359) or (1.3%) unfavorable to plan due to drugs expense and partially offset by personnel expense.

Indirect expenses are \$444,226 or 9.4% favorable to plan year-to-date, driven by \$372,209 of favorability from health insurance expenses.

Year-to-Date Financial Performance Summary

- Net patient revenue (\$1,878,524) or (17.5%)
- Other revenue (\$129,518) or (3.0%)
- Direct care expenses \$445,370 or 4.1%
- Indirect expenses \$444,226 or 9.4%
- Net loss (\$1,452,364) or (11.1%)

Conclusion

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

[illegible]

North Central Health Care
For the Period Ending February 28, 2022
Net Patient Revenue Targets

	MTD Net Patient Revenue	YTD Net Patient Revenue
BEHAVIORAL HEALTH SERVICES		
Adult Behavioral Health Hospital	113,220	314,226
Adult Crisis Stabilization Facility	101,755	167,351
Lakeside Recovery MMT	(207)	(414)
Youth Behavioral Health Hospital	79,244	162,848
Youth Crisis Stabilization Facility	62,615	94,419
Crisis Services	14,626	42,306
COMMUNITY SERVICES		
Outpatient Services (Marathon)	116,683	240,209
Outpatient Services (Lincoln)	33,510	61,496
Outpatient Services (Langlade)	37,041	73,745
Community Treatment Adult (Marathon)	256,848	578,331
Community Treatment Adult (Lincoln)	51,891	106,051
Community Treatment Adult (Langlade)	20,974	43,067
Community Treatment Youth (Marathon)	341,016	670,118
Community Treatment Youth (Lincoln)	68,245	149,846
Community Treatment Youth (Langlade)	55,897	120,302
Community Corner Clubhouse	(11,113)	(26,885)
COMMUNITY LIVING		
Adult Day Services (Marathon)	38,518	74,815
Prevocational Services (Marathon)	26,544	52,565
Lincoln Industries	32,868	62,823
Day Services (Langlade)	31,630	57,425
Andrea St Group Home	42,235	96,242
Chadwick Group Home	44,100	95,149
Bissell Street Group Home	45,739	91,132
Heather Street Group Home	42,769	87,723
Jelinek Apartments	65,440	136,065
River View Apartments	55,786	118,631
Fulton Street Apartments	19,622	40,889
NURSING HOMES		
Mount View Care Center	950,506	1,860,196
Pine Crest Nursing Home	675,052	1,292,353
Pharmacy	641,060	1,330,252
OTHER PROGRAMS		
Aquatic Services	19,902	34,636
Adult Protective Services	532	12,658
Demand Transportation	4,018	6,938
Total NCHC	4,078,565	8,247,504

North Central Health Care
For the Period Ending February 28, 2022
Direct Expense / Gross Revenue Ratio

	YTD Actual Direct Expense	YTD Actual Gross Revenue	Actual Direct Exp/Gross Rev	Exp/Gross Rev Target
BEHAVIORAL HEALTH SERVICES				
Adult Behavioral Health Hospital	859,763	951,641	90.35%	72.40%
Adult Crisis Stabilization Facility	160,143	391,123	40.94%	53.20%
Lakeside Recovery MMT	11,428	-	0.00%	144.80%
Youth Behavioral Health Hospital	421,569	319,748	131.84%	91.60%
Youth Crisis Stabilization Facility	82,731	130,305	63.49%	71.00%
Crisis Services	383,116	99,431	385.31%	368.70%
Psychiatry Residency	59,713	-	0.00%	0.00%
COMMUNITY SERVICES				
Outpatient Services (Marathon)	809,302	459,631	176.08%	98.70%
Outpatient Services (Lincoln)	90,201	122,379	73.71%	104.70%
Outpatient Services (Langlade)	89,368	138,655	64.45%	62.80%
Community Treatment Adult (Marathon)	604,618	784,472	77.07%	81.20%
Community Treatment Adult (Lincoln)	96,163	133,321	72.13%	81.60%
Community Treatment Adult (Langlade)	49,862	51,434	96.94%	106.90%
Community Treatment Youth (Marathon)	646,914	812,242	79.65%	72.40%
Community Treatment Youth (Lincoln)	157,547	181,692	86.71%	83.30%
Community Treatment Youth (Langlade)	120,658	144,555	83.47%	80.70%
Community Corner Clubhouse	35,204	22,873	153.91%	93.40%
COMMUNITY LIVING				
Adult Day Services (Marathon)	42,223	80,102	52.71%	62.70%
Prevocational Services (Marathon)	104,956	83,735	125.34%	100.90%
Lincoln Industries	180,164	67,350	267.50%	194.40%
Day Services (Langlade)	40,317	58,187	69.29%	79.30%
Andrea St Group Home	63,057	84,738	74.41%	83.60%
Chadwick Group Home	72,645	83,174	87.34%	86.80%
Bissell Street Group Home	59,751	84,179	70.98%	90.00%
Heather Street Group Home	69,169	85,553	80.85%	76.10%
Jelinek Apartments	106,727	198,240	53.84%	47.30%
River View Apartments	85,222	240,744	35.40%	50.60%
Forest Street Apartments	340	-	0.00%	0.00%
Fulton Street Apartments	55,150	65,800	83.82%	61.60%
Riverview Terrace	34,543	-	0.00%	0.00%
Hope House (Sober Living Marathon)	11,532	-	0.00%	0.00%
Homelessness Initiative	4,084	-	0.00%	0.00%
Sober Living (Langlade)	8,151	-	0.00%	0.00%
NURSING HOMES				
Mount View Care Center	1,876,854	2,738,030	68.55%	62.30%
Pine Crest Nursing Home	1,274,395	1,733,836	73.50%	68.20%
Pharmacy	1,146,498	2,716,112	42.21%	39.10%
OTHER PROGRAMS				
Aquatic Services	129,200	181,304	71.26%	72.60%
Birth To Three	129,938	-	0.00%	0.00%
Adult Protective Services	89,776	13,405	669.71%	0.00%
Demand Transportation	61,844	6,845	903.49%	786.60%
Total NCHC	10,324,837	13,264,835	77.84%	71.00%

North Central Health Care
For the Period Ending February 28, 2022
Net Income Targets

	Budgeted	Budget	YTD Net Income Target		
	Net Income	Expense	Budget	Budget + 1%	YTD
BEHAVIORAL HEALTH SERVICES					
Adult Behavioral Health Hospital	-6.3%	6,985,079	(73,343)	(72,610)	(308,385)
Adult Crisis Stabilization Facility	-4.7%	1,495,264	(11,713)	(11,596)	(36)
Lakeside Recovery MMT	0.0%	463,452	-	-	11,526
Youth Behavioral Health Hospital	-73.1%	3,013,330	(367,124)	(363,453)	(307,647)
Youth Crisis Stabilization Facility	7.7%	988,408	12,685	12,811	74,532
Crisis Services	-20.3%	3,512,676	(118,846)	(117,657)	(144,669)
Psychiatry Residency	-33.0%	470,972	(25,903)	(25,644)	(13,609)
COMMUNITY SERVICES					
Outpatient Services (Marathon)	-17.6%	6,438,283	(188,856)	(186,968)	(288,675)
Outpatient Services (Lincoln)	19.9%	921,030	30,548	30,853	89,247
Outpatient Services (Langlade)	28.4%	712,841	33,741	34,079	49,470
Community Treatment Adult (Marathon)	0.7%	5,523,293	6,444	6,508	(20,419)
Community Treatment Adult (Lincoln)	9.4%	951,051	14,900	15,049	12,766
Community Treatment Adult (Langlade)	8.8%	638,478	9,364	9,458	3,864
Community Treatment Youth (Marathon)	0.5%	5,734,696	4,779	4,827	(36,029)
Community Treatment Youth (Lincoln)	4.8%	1,820,144	14,561	14,707	26,889
Community Treatment Youth (Langlade)	14.7%	1,433,817	35,129	35,480	25,687
Community Corner Clubhouse	-76.7%	315,979	(40,393)	(39,989)	(44,842)
COMMUNITY LIVING					
Adult Day Services (Marathon)	9.3%	700,163	10,853	10,961	22,582
Prevocational Services (Marathon)	-26.1%	724,361	(31,510)	(31,195)	(46,513)
Lincoln Industries	-73.8%	1,049,032	(129,031)	(127,741)	(49,841)
Day Services (Langlade)	-10.3%	388,916	(6,676)	(6,610)	16,321
Andrea St Group Home	10.7%	469,972	8,381	8,465	20,427
Chadwick Group Home	3.4%	497,768	2,821	2,849	10,545
Bissell Street Group Home	22.1%	505,424	18,616	18,803	19,311
Heather Street Group Home	13.4%	429,431	9,591	9,687	5,326
Jelinek Apartments	6.9%	813,053	9,350	9,444	8,720
River View Apartments	-15.9%	859,415	(22,775)	(22,547)	12,287
Forest Street Apartments	0.0%	-	-	-	(95)
Fulton Street Apartments	-17.4%	325,313	(9,434)	(9,340)	(25,645)
Riverview Terrace	10.4%	319,198	5,533	5,588	12,019
Hope House (Sober Living Marathon)	0.0%	68,184	-	-	(12,261)
Homelessness Initiative	0.0%	28,300	-	-	(4,437)
Sober Living (Langlade)	-150.0%	105,389	(26,347)	(26,084)	(10,572)
NURSING HOMES					
Mount View Care Center	4.7%	21,126,822	165,493	167,148	(623,885)
Pine Crest Nursing Home	-9.7%	13,102,760	(211,828)	(209,710)	(70,785)
Aquatic Services	-18.6%	1,419,024	(44,070)	(43,629)	(18,517)
Pharmacy	8.2%	7,392,225	101,027	102,037	128,397
OTHER PROGRAMS					
Adult Protective Services	0.0%	796,118	-	-	27,910
Demand Transportation	27.4%	368,631	16,834	17,002	(3,330)
Birth-to-Three	0.0%	-	-	-	-
	-2.3%	92,908,292	(356,148)	(352,587)	(1,452,366)

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%											9.7%	7.3%
Turnover Rate	↘	20-23% (1.7%-1.95%)	2.5%	2.0%											26.7%	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	71.4%	60.0%											60.0%	64.4
QUALITY																
Hospital Readmission Rate	↘	10-12%	9.47%	10.39%											9.93%	10.3%
Nursing Home Readmission Rate	↘	10-12%	7.1%	8.8%											8.0%	12.7%
Nursing Home Star Rating	↗	★★★★	★★★★★	★★★★★											★★★★★	★★★
Zero Harm - Patients	↘	Monitoring	5.05	1.87											3.46	0.80
Zero Harm - Employees	↘	Monitoring	1.11	2.72											1.91	3.14
COMMUNITY																
Out of County Placements	↘	230-250	369	101											235	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%	81.8%	75.8%											79.0%	78.2%
Indirect Expense/Direct Expense	↘	44-47%	33.9%	41.8%											39.2%	37.6%
Net Income	↗	-2.7%	-12.0%	-6.0%											-11.1%	-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%)	2.0%	26.7%	N/A
		Organization Diversity Composite Index	↗	Monitoring	N/A	N/A	N/A
	Service	Patient Experience (Net Promoter Score)	↗	55-61	60.0%	60.0%	61.0
	Quality	Hospital Readmission Rate	↘	10-12%	10.4%	9.9%	11.8%
		Nursing Home Readmission Rate	↘	10-12%	8.8%	8.0%	13.5%
		Nursing Home Star Rating	↗	★★★★	★★★★★	★★★★★	★★★
		Zero Harm - Patients	↘	Monitoring	1.87	3.46	0.74
		Zero Harm - Employees	↘	Monitoring	2.72	1.91	2.84
	Community	Out of County Placements	↘	230-250	101	235	269
		Client Diversity Composite Index	↗	Monitoring	N/A	N/A	/
	Finance	Direct Expense/Gross Patient Revenue	↘	64-67%	75.8%	79.0%	72.4%
		Indirect Expense/Direct Expense	↘	44-47%	41.8%	39%	39.0%
		Net Income	↗	2-3%	-6.0%	-11.1%	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	0.43	0.41
		% of Treatment Plans Completed within Required Timelines	↗	96-98%	71%42/59	63.0%
		Employment rate of Individual Placement and Support (IPS) Clients	↗	46-50%	51.2%	57.1%
	Community	% of Eligible CCS and CSP Clients Admitted within 60 Days of Referral	↗	60-70%	11%3/27	5.5%
		Average Days from Referral to Initial Appointment	↘	55-60 days	136 days	122 days
		Hospitalization Rate of Active Patients	↘	Monitoring	2.91%	2.37%
	Finance	Direct Expense/Gross Patient Revenue	↘	86.7-90.2%	73.4%	96.9%
		Net Income	↗	\$10,457-\$15,686 Per Month	\$14,282	(\$1,895)

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	0.00	6.38
		% of Patients who kept their Follow-up Appointment	↗	90-95%	100%4/4	100.0%
	Community	% of Patients Admitted within 24 hours of Referral	↗	90-95%	100%17/17	100.00%
	Finance	Direct Expense/Gross Patient Revenue	↘	30.9-32.2%	37.8%	40.9%
		Net Income	↗	\$1,747-\$2,620 Per Month	\$17,438	(\$18)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Adult Inpatient Psychiatric Hospital	People	Vacancy Rate	↘	7-9%	2.2%	4.2%
		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	13.76	145.83
		Hospital Readmission Rate	↘	10-12%	13.0%	11.2%
		Average Days for Initial Counseling Appointment Post-Hospital Discharge	↘	8-10 days	15.1 days	15 days
		Average Days for Initial Psychiatry Appointment Post-Hospital Discharge	↘	8-10 days	8.4 days	9.3 days
		Average Days since previous Detox Admission	↗	330-360 days	435.5 days	567.75 days
	Community	Out of County Placements	↘	150-170	73	162
	Finance	Direct Expense/Gross Patient Revenue	↘	78.2-81.4%	106.9%	90.3%
		Net Income	↗	\$13,382-\$20,073 Per Month	(\$185,680)	(\$154,193)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Aquatic	People	Vacancy Rate	↘	5-7%	10.0%	5.0%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	0.0%
	Service	Patient Experience (Net Promoter Score)	↗	83-87	90.0%	89.7%
	Quality	Zero Harm - Patients	↘	Monitoring	0.00	17.24
	Finance	Direct Expense/Gross Patient Revenue	↘	43.8-45.6%	66.3%	71.3%
		Net Income	↗	\$2,174-\$3,261 Per Month	(\$3,883)	(\$9,259)

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	72.7%	71.6%
	Quality	Average Attendance Per Work Day	↗	20-25	15.0%	14.0%
		% of Members Working 15 or More Hours Per Month	↗	80-85%	34% 23/68	34.0%
	Community	Active Members Per Month	↗	110-120	88	94
	Finance	Direct Expense/Gross Patient Revenue	↘	58.6-61.0%	190.6%	153.9%
		Net Income	↗	\$536-\$804 Per Month	-\$18,533	(\$22,421)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Crisis and Emergency Services	People	Vacancy Rate	↘	7-9%	9.7%	9.5%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	0.0%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	100.0%	99.0%
	Quality	Zero Harm - Patients	↘	Monitoring	4.22	8.05
		% of Crisis Assessments with Documented Linkage and Follow-up within 24 hours	↗	70-75%	73.2%	70.2%
		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	101	235
		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%	385.4%	385.3%
		Net Income	↗	\$5,370-\$8,055 Per Month	(\$61,962)	(\$72,335)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Day Services	People	Vacancy Rate	↘	7-9%	12.0%	11.6%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	8.7%	52.2%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	83.3%	84.3%
	Quality	Zero Harm - Patients	↘	Monitoring	0.59	2.12
	Finance	Direct Expense/Gross Patient Revenue	↘	89.3-92.9%	129.0%	127.1%
		Net Income	↗	\$5,103-\$7,654 Per Month	(\$18,585)	(\$28,726)

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%)	0.0%	22.2%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	0.0%	50.0%
	Quality	Zero Harm - Patients	↘	Monitoring	0.00	1.54
	Finance	Direct Expense/Gross Patient Revenue	↘	66.3-69.0%	78.0%	78.4%
		Net Income	↗	\$2,939-\$4,408 Per Month	\$25,608	\$27,805

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Mount View Care Center	People	Vacancy Rate	↘	7-9%	13.4%	13.7%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	1.9%	34.1%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	52.4%	52.8%
	Quality	Nursing Home Readmission Rate	↘	10-12%	8.7%	9.1%
		Zero Harm - Residents	↘	Monitoring	2.01	3.77
		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%	74.8%	74.2%
		Net Income	↗	\$30,636-\$45,954 Per Month	(\$262,631)	(\$228,832)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Outpatient Services	People	Vacancy Rate	↘	7-9%	15.0%	13.6%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	2.9%	34.0%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	33.3%	36.1%
	Quality	Zero Harm - Patients	↘	Monitoring	1.45	1.18
		Average Days for Initial Counseling Appointment Post-Hospital Discharge	↘	8-10 days	13.8 days	13.6 days
		Average Days for Initial Psychiatry Appointment Post-Hospital Discharge	↘	8-10 days	10.3 days	10.2 days
		Day Treatment Program Completion Rate	↗	40-50%	N/A	N/A
		OWI - 5 Year Recidivism Rate	↘	13-15%	0.0%	7.0%
	Community	Same Day Cancellation and No-Show Rate	↘	15-18%	11.2%	11.5%
		% of Patients Offered an Appointment within 4 Days of Screening by a Referral Coordinator	↗	20-25%	13.3%	16.4%
		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	0.76%	0.75%
	Finance	Direct Expense/Gross Patient Revenue	↘	93.4-97.2%	124.4%	137.2%
		Net Income	↗	\$12,534-\$18,802 Per Month	(\$17,557)	(\$74,979)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Pine Crest Nursing Home	People	Vacancy Rate	↘	7-9%	13.1%	12.8%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	1.6%	23.7%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	0.0%	100.0%
	Quality	Zero Harm - Residents	↘	Monitoring	2.52	5.47
		Nursing Home Readmission Rate	↘	10-12%	9.1%	4.6%
		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%	72.0%	73.5%
		Net Income	↗	\$20,559-\$30,839 Per Month	\$25,202	(\$35,393)

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	N/A	N/A
		Net Income	↗	\$582-\$873 Per Month	\$6,834	\$6,010

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Supported Apartments	People	Vacancy Rate	↘	7-9%	22.9%	17.9%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	3.6%	64.7%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	0.0%	100.0%
	Quality	Zero Harm - Patients	↘	Monitoring	2.42	3.10
	Finance	Direct Expense/Gross Patient Revenue	↘	38.5-41.0%	48.4%	49.0%
		Net Income	↗	\$3,364-\$5,046 Per Month	\$1,175	(\$2,367)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Youth Community Treatment	People	Vacancy Rate	↘	7-9%	5.3%	6.6%
		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	1.44	0.00
		% of Treatment Plans Completed within Required Timelines	↗	96-98%	81%44/54	61.6%
	Community	% of Eligible CCS and CSP Clients Admitted within 60 Days of Referral	↗	60-70%	11%2/18	67.0%
		Average Days from Referral to Initial Appointment	↘	55-60 days	126 days	129.5 days
		Hospitalization Rate of Active Patients	↘	Monitoring	0.61%	1.50%
	Finance	Direct Expense/Gross Patient Revenue	↘	77.2-80.4%	76.8%	81.3%
		Net Income	↗	\$14,139-\$21,208 Per Month	\$37,021	\$8,274

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Youth Crisis Stabilization Facility	People	Vacancy Rate	↘	5-7%	0.0%	11.1%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	150.0%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	0.0%	0.0%
	Quality	Zero Harm - Patients	↘	Monitoring	17.24	44.33
		% of Patients who kept their Follow-up Outpatient Appointment	↗	90-95%	100%1/1	91.0%
	Community	% of Patients Admitted within 24 hours of Referral	↗	90-95%	100%9/9	100.0%
	Finance	Direct Expense/Gross Patient Revenue	↘	127-130%	45.48%	63.5%
		Net Income	↗	\$1,692-\$2,538 Per Month	\$44,860	\$37,266

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Youth Psychiatric Hospital	People	Vacancy Rate	↘	7-9%	11.8%	14.2%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	6.7%	115.0%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	0.0	0.0%
	Quality	Zero Harm - Patients	↘	Monitoring	24.10	32.88
		Hospital Readmission Rate	↘	10-12%	4.6%	7.1%
		Average Days for Initial Counseling Appointment Post-Hospital Discharge	↘	8-10 days	8.8 days	8.1 days
		Average Days for Initial Psychiatry Appointment Post-Hospital Discharge	↘	8-10 days	21 days	15.6 days
	Community	Out of County Placements	↘	50-60	28	73
	Finance	Direct Expense/Gross Patient Revenue	↘	61.8-64.4%	144.6%	131.8%
		Net Income	↗	\$4,973-\$7,459 Per Month	(\$159,472)	(\$153,824)

North Central Health Care
Income Statement
For the Period Ending February 28, 2022

	MTD Actual	MTD Budget	\$ Variance	% Variance	YTD Actual	YTD Budget	\$ Variance	% Variance
Direct Revenues								
Patient Gross Revenues	6,397,844	7,606,233	(1,208,389)	-15.9%	13,263,178	15,212,467	(1,949,289)	-12.8%
Patient Contractual Adjustments	(2,072,411)	(2,254,141)	181,730	-8.1%	(4,437,516)	(4,508,281)	70,765	-1.6%
Net Patient Revenue	4,325,433	5,352,093	(1,026,660)	-19.2%	8,825,661	10,704,185	(1,878,524)	-17.5%
County Revenue	418,500	425,885	(7,385)	-1.7%	837,001	851,771	(14,770)	-1.7%
Contracted Service Revenue	68,951	99,769	(30,818)	-30.9%	146,461	199,538	(53,076)	-26.6%
Grant Revenues and Contractuals	278,558	276,784	1,774	0.6%	690,544	553,569	136,975	24.7%
Appropriations	510,045	510,045	-	0.0%	1,020,090	1,020,090	-	0.0%
COVID-19 Relief Funding	-	-	-	0.0%	-	-	-	0.0%
Other Revenue	541,189	642,061	(100,872)	-15.7%	1,061,666	1,284,122	(222,456)	-17.3%
Total Direct Revenue	6,142,677	7,306,637	(1,163,960)	-15.9%	12,581,424	14,613,275	(2,031,851)	-13.9%
Indirect Revenues								
County Revenue	169,609	170,209	(600)	-0.4%	339,217	340,417	(1,200)	-0.4%
Contracted Service Revenue	2,250	2,500	(250)	-10.0%	4,500	5,000	(500)	-10.0%
Grant Revenues and Contractuals	423	-	423	0.0%	423	-	423	0.0%
Appropriations	-	-	-	0.0%	-	-	-	0.0%
Other Revenue	101,794	52,083	49,711	95.4%	121,536	104,167	17,369	16.7%
Allocated Revenue	-	(3,858)	3,858	-100.0%	-	(7,717)	7,717	-100.0%
Total Indirect Revenue	274,738	220,934	53,805	24.4%	462,910	441,867	21,043	4.8%
Total Operating Revenue	6,417,415	7,527,571	(1,110,156)	-14.7%	13,044,334	15,055,142	(2,010,808)	-13.4%
Direct Expenses								
Personnel Expenses	3,292,543	3,706,216	413,673	11.2%	7,187,080	7,412,432	225,353	3.0%
Contracted Services Expenses	548,830	706,168	157,338	22.3%	1,180,265	1,412,336	232,070	16.4%
Supplies Expenses	58,234	71,697	13,462	18.8%	108,076	143,393	35,318	24.6%
Drugs Expenses	413,354	492,826	79,472	16.1%	1,004,402	985,652	(18,750)	-1.9%
Program Expenses	120,450	65,515	(54,935)	-83.9%	182,892	131,030	(51,862)	-39.6%
Land & Facility Expenses	86,566	93,118	6,552	7.0%	164,285	186,235	21,950	11.8%
Equipment & Vehicle Expenses	46,121	50,762	4,640	9.1%	86,270	101,523	15,253	15.0%
Diversions Expenses	76,043	62,500	(13,543)	-21.7%	143,405	125,000	(18,405)	-14.7%
Other Operating Expenses	127,088	136,303	9,215	6.8%	268,161	272,606	4,444	1.6%
Total Direct Expenses	4,769,230	5,385,104	615,874	11.4%	10,324,837	10,770,207	445,370	4.1%
Indirect Expenses								
Personnel Expenses	1,066,574	1,252,637	186,063	14.9%	2,220,732	2,505,273	284,541	11.4%
Contracted Services Expenses	47,422	58,579	11,157	19.0%	93,471	117,158	23,687	20.2%
Supplies Expenses	45,763	25,387	(20,376)	-80.3%	63,731	50,773	(12,957)	-25.5%
Drugs Expenses	580	2,500	1,920	76.8%	1,096	5,000	3,904	78.1%
Program Expenses	15,662	23,654	7,992	33.8%	30,391	47,308	16,917	35.8%
Land & Facility Expenses	414,917	415,691	773	0.2%	831,743	831,381	(361)	0.0%
Equipment & Vehicle Expenses	119,906	125,950	6,044	4.8%	241,429	251,900	10,471	4.2%
Diversions Expenses	-	-	-	0.0%	-	-	-	0.0%
Other Operating Expenses	393,558	453,626	60,069	13.2%	777,114	907,253	130,139	14.3%
Allocated Expense	-	(6,057)	(6,057)	100.0%	-	(12,114)	(12,114)	100.0%
Total Indirect Expenses	2,104,381	2,351,966	247,585	10.5%	4,259,707	4,703,933	444,226	9.4%
Total Operating Expenses	6,873,611	7,737,070	863,459	11.2%	14,584,544	15,474,140	889,596	5.7%
Metrics								
Direct Expense/Gross Patient Revenue	74.5%	70.8%			77.8%	70.8%		
Write-Offs/Gross Patient Revenue	1.5%	0.0%			1.0%	0.0%		
Indirect Expenses/Direct Expenses	44.1%	43.7%			41.3%	43.7%		
Overtime/Total Wages	4.7%	3.3%			5.0%	3.3%		
Agency Staffing/Total Wages	1.7%	0.2%			1.5%	0.2%		
Non-Operating Income/Expense								
Interest Income	2,709	5,833	(3,125)	-53.6%	6,136	11,667	(5,531)	-47.4%
Donations Income	67,251	-	67,251	0.0%	81,710	-	81,710	0.0%
Other Non-Operating	-	-	-	0.0%	-	-	-	0.0%
Total Non-Operating	69,960	5,833	64,127	1099.4%	87,846	11,667	76,179	652.9%
Net Income (Loss)	(386,236)	(203,666)	(182,570)	89.6%	(1,452,364)	(407,331)	(1,045,033)	100.0%
Net Income	-6.0%	-2.7%			-11.1%	-2.7%		

North Central Health Care
Balance Sheet
For the Period Ending February 28, 2022

	<u>Current YTD</u>	<u>Prior YTD</u>
ASSETS		
Current Assets		
Cash and Cash Equivalents	1,815,248	2,813,466
Contingency Funds	1,000,000	1,000,000
Accounts Receivable		
Net Patient Receivable	9,994,534	4,937,386
Outpatient WIMCR & CCS	1,419,386	2,499,699
Nursing Home Supplemental Payment	716,667	500,511
County Appropriations Receivable	(510,044)	707,442
Net State Receivable	289,297	305,394
Other Accounts Receivable	426,612	186,092
Inventory	516,828	429,330
Prepaid Expenses	689,595	1,252,102
Total Current Assets	<u>15,358,123</u>	<u>13,631,423</u>
Noncurrent Assets		
Investments	5,304,192	10,625,550
Patient Trust Funds	54,335	81,267
Pool Project Receivable	-	1,727,376
Net Pension Assets	14,388,349	7,280,177
Nondepreciable Capital Assets	5,480,557	21,223,875
Net Depreciable Capital Assets	<u>66,348,740</u>	<u>30,473,975</u>
Total Noncurrent Assets	92,576,173	72,412,219
Deferred Outflows of Resources (Pensions)	<u>25,608,896</u>	<u>18,262,408</u>
TOTAL ASSETS	<u><u>133,543,193</u></u>	<u><u>104,306,050</u></u>

	Current YTD	Prior YTD
LIABILITIES		
Current Liabilities		
Current Portion of Capital Lease Liability	27,987	27,987
Trade Accounts Payable	564,668	811,907
Accrued Liabilities		
Salaries and Retirement	1,711,961	2,031,429
Compensated Absences	2,313,279	2,367,962
Health and Dental Insurance	780,312	503,000
Bonds	395,000	-
Interest Payable	292,819	65,513
Other Payables and Accruals	1,764,675	781,571
Payable to Reimbursement Programs	100,000	100,000
Unearned Revenue	(1,671,752)	(2,606,733)
Total Current Liabilities	6,278,948	4,082,636
Noncurrent Liabilities		
Net Pension Liability	3,028,071	2,506,809
Long-Term Portion of Capital Lease Liability	15,200	43,280
Long-Term Projects in Progress	48,947,145	28,137,786
Long-Term Debt and Bond Premiums	8,400,140	9,132,884
Patient Trust Funds	4,173	50,620
Total Noncurrent Liabilities	60,394,728	39,871,379
Deferred Inflows of Resources (Pensions)	32,104,400	22,225,906
TOTAL LIABILITIES	98,778,076	66,179,921
NET POSITION		
Net Investment in Capital Assets	71,829,297	51,697,850
Pool Project Restricted Capital Assets	-	1,727,376
Unrestricted		
Board Designated for Contingency	1,000,000	1,000,000
Board Designated for Capital Assets	-	990,604
Undesignated	(36,611,816)	(16,352,478)
Net Income / (Loss)	(1,452,364)	(937,222)
TOTAL NET POSITION	34,765,117	38,126,130
TOTAL LIABILITIES AND NET POSITION	133,543,193	104,306,050

North Central Health Care
Statement of Cash Flows
For Month Ending February 28, 2022

Cash, Beginning of Period (January 31)		538,264
Operating Activities		
Net Income (Loss)	(386,236)	
Adjustments to Reconcile Net Income		
Depreciation	530,320	
Interest Expense	95,479	
(Increase) or Decrease in Current Assets		
Inventories	-	
Accounts Receivable	665,157	
Prepaid Expenses	111,519	
Increase or (Decrease) in Current Liabilities		
Accounts Payable	(501,074)	
Accrued Current Liabilities	159,515	
Net Change in Patient Trust Funds	530	
Unearned Revenue	319,257	
Net Cash from Operating Activities		994,467
Investing Activities		
Net Change in Contingency Funds	-	
Purchases of Property and Equipment	703,229	
Disposal of Assets	79,282	
Net Change in Undesignated Equity	(99,398)	
Net Cash from Investing Activities		683,113
Financing Activities		
Bonds and Interest	95,403	
Net Change in Purchase/Sale of Investments	(496,000)	
Net Cash from Financing Activities		(400,597)
Net Increase (Decrease) in Cash During Period		<u>1,276,984</u>
Cash, End of Period (February 28)		1,815,248

North Central Health Care
Programs by Service Line
For the Period Ending February 28, 2022

	Revenue			Expense			Net Income/	Variance
	Actual	Budget	Variance	Actual	Budget	Variance	(Loss)	From Budget
BEHAVIORAL HEALTH SERVICES								
Adult Behavioral Health Hospital	769,011	1,095,078	(326,067)	1,077,395	1,164,180	86,785	(308,385)	(239,282)
Adult Crisis Stabilization Facility	216,409	238,105	(21,695)	216,445	249,211	32,766	(36)	11,071
Lakeside Recovery MMT	34,872	-	34,872	23,346	-	(23,346)	11,526	11,526
Youth Behavioral Health Hospital	216,160	290,068	(73,908)	523,807	502,222	(21,585)	(307,647)	(95,493)
Youth Crisis Stabilization Facility	171,826	178,549	(6,723)	97,294	164,735	67,441	74,532	60,717
Crisis Services	425,785	486,666	(60,881)	570,454	585,446	14,992	(144,669)	(45,889)
Psychiatry Residency	46,104	59,033	(12,929)	59,713	78,495	18,782	(13,609)	5,853
	1,880,168	2,347,499	(467,331)	2,568,454	2,744,288	175,834	(688,287)	(291,497)
COMMUNITY SERVICES								
Outpatient Services (Marathon)	773,316	912,190	(138,874)	1,061,991	1,073,047	11,056	(288,675)	(127,818)
Outpatient Services (Lincoln)	202,620	191,598	11,023	113,373	153,505	40,132	89,247	51,155
Outpatient Services (Langlade)	165,896	166,000	(104)	116,425	118,807	2,381	49,470	2,277
Community Treatment Adult (Marathon)	713,017	926,783	(213,766)	733,436	920,549	187,112	(20,419)	(26,653)
Community Treatment Adult (Lincoln)	133,106	174,892	(41,786)	120,340	158,509	38,169	12,766	(3,617)
Community Treatment Adult (Langlade)	73,393	116,653	(43,260)	69,529	106,413	36,884	3,864	(6,375)
Community Treatment Youth (Marathon)	730,818	960,410	(229,593)	766,847	955,783	188,935	(36,029)	(40,657)
Community Treatment Youth (Lincoln)	218,199	318,786	(100,587)	191,310	303,357	112,047	26,889	11,461
Community Treatment Youth (Langlade)	174,385	280,071	(105,686)	148,699	238,969	90,271	25,687	(15,415)
Community Corner Clubhouse	1,407	29,807	(28,400)	46,249	52,663	6,414	(44,842)	(21,986)
	3,186,158	4,077,189	(891,031)	3,368,200	4,081,602	713,403	(182,041)	(177,628)
COMMUNITY LIVING								
Adult Day Services (Marathon)	93,902	128,729	(34,828)	71,319	116,694	45,375	22,582	10,547
Prevocational Services (Marathon)	79,867	95,731	(15,864)	126,380	120,727	(5,653)	(46,513)	(21,517)
Lincoln Industries	168,333	100,622	67,711	218,174	174,839	(43,336)	(49,841)	24,376
Day Services (Langlade)	74,940	58,740	16,200	58,618	64,819	6,201	16,321	22,401
Andrea St Group Home	97,415	87,731	9,684	76,989	78,329	1,340	20,427	11,024
Chadwick Group Home	98,585	85,865	12,719	88,040	82,961	(5,079)	10,545	7,641
Bissell Street Group Home	92,313	108,144	(15,831)	73,002	84,237	11,235	19,311	(4,596)
Heather Street Group Home	89,504	82,622	6,882	84,178	71,572	(12,606)	5,326	(5,724)
Jelinek Apartments	137,415	145,525	(8,110)	128,695	135,509	6,814	8,720	(1,297)
River View Apartments	119,716	123,560	(3,845)	107,429	143,236	35,807	12,287	31,962
Forest Street Apartments	582	-	582	677	-	(677)	(95)	(95)
Fulton Street Apartments	41,596	46,198	(4,602)	67,241	54,219	(13,022)	(25,645)	(17,624)
Riverview Terrace	57,800	59,393	(1,593)	45,781	53,200	7,419	12,019	5,826
Hope House (Sober Living Marathon)	2,444	151	2,293	14,705	11,364	(3,341)	(12,261)	(1,048)
Homelessness Initiative	43	-	43	4,480	4,717	237	(4,437)	280
Sober Living (Langlade)	3,950	6,789	(2,840)	14,522	17,565	3,043	(10,572)	203
	1,158,403	1,129,802	28,601	1,180,229	1,213,987	33,758	(21,826)	62,359
NURSING HOMES								
Mount View Care Center	2,993,448	3,696,420	(702,972)	3,617,334	3,677,023	59,689	(623,885)	(643,283)
Pine Crest Nursing Home	1,999,898	1,990,705	9,193	2,070,683	2,183,793	113,110	(70,785)	122,303
	4,993,347	5,687,125	(693,778)	5,688,017	5,860,816	172,799	(694,670)	(520,979)
Pharmacy	1,397,750	1,341,923	55,826	1,269,353	1,232,038	(37,315)	128,397	18,511
OTHER PROGRAMS								
Aquatic Services	175,868	199,355	(23,487)	194,385	236,504	42,119	(18,517)	18,632
Birth To Three	129,938	66,667	63,272	129,938	66,667	(63,272)	-	-
Adult Protective Services	144,266	132,626	11,641	116,356	132,686	16,330	27,910	27,971
Demand Transportation	66,282	84,624	(18,342)	69,612	61,438	(8,173)	(3,330)	(26,515)
	516,355	483,271	33,084	510,291	497,295	(12,996)	6,064	20,088
Total NCHC Service Programs	13,132,180	15,066,809	(1,934,629)	14,584,544	15,474,140	889,596	(1,452,364)	(1,045,033)

North Central Health Care
Fund Balance Review
For the Period Ending February 28, 2022

	Marathon	Langlade	Lincoln	Total
Total Net Position at Period End	9,354,616	736,438	3,055,725	13,146,779
County Percent of Total Net Position	71.2%	5.6%	23.2%	
Total Operating Expenses, Year-to-Date	10,720,235	720,534	3,143,776	14,584,544
Share of Operating Cash	2,003,195	157,701	654,352	2,815,248
Days Cash on Hand	11	13	13	12
Minimum Target - 20%	12,864,282	864,640	3,772,531	17,501,453
Over/(Under) Target	(10,861,086)	(706,940)	(3,118,178)	(14,686,204)

North Central Health Care
Review of Services in Marathon County
For the Period Ending February 28, 2022

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Outpatient Services	773,316	912,190	(138,874)	1,061,991	1,073,047	11,056	(288,675)	(127,818)
Community Treatment-Adult	713,017	926,783	(213,766)	733,436	920,549	187,112	(20,419)	(26,653)
Community Treatment-Youth	730,818	960,410	(229,593)	766,847	955,783	188,935	(36,029)	(40,657)
Day Services	173,768	224,460	(50,692)	197,699	237,421	39,722	(23,931)	(10,970)
Clubhouse	(13,926)	14,474	(28,400)	46,249	52,663	6,414	(60,175)	(21,986)
Homelessness Initiative	43	-	43	4,480	4,717	237	(4,437)	280
Hope House Sober Living	2,444	151	2,293	14,705	11,364	(3,341)	(12,261)	(1,048)
Riverview Terrace	57,800	59,393	(1,593)	45,781	53,200	7,419	12,019	5,826
Demand Transportation	66,282	84,624	(18,342)	69,612	61,438	(8,173)	(3,330)	(26,515)
Aquatic Services	118,811	142,297	(23,487)	194,385	236,504	42,119	(75,574)	18,632
Pharmacy	1,397,750	1,341,923	55,826	1,269,353	1,232,038	(37,315)	128,397	18,511
Mount View Care Center	2,743,448	3,446,420	(702,972)	3,617,334	3,677,023	59,689	(873,885)	(643,283)
	6,763,571	8,113,126	(1,349,555)	8,021,872	8,515,745	493,874	(1,258,301)	(855,681)
Shared Services								
Adult Behavioral Health Hospital	423,434	665,483	(242,049)	799,781	864,204	64,423	(376,348)	(177,626)
Youth Behavioral Health Hospital	154,276	209,140	(54,864)	388,837	372,814	(16,023)	(234,561)	(70,887)
Residency Program	34,225	43,822	(9,597)	44,327	58,269	13,943	(10,102)	4,345
Crisis Services	73,007	123,663	(50,656)	423,465	434,593	11,129	(350,457)	(39,527)
Adult Crisis Stabilization Facility	160,647	176,752	(16,105)	160,673	184,996	24,323	(26)	8,218
Youth Crisis Stabilization Facility	127,551	132,542	(4,991)	72,224	122,287	50,063	55,327	45,072
Lakeside Recovery MMT	25,887	-	25,887	17,330	-	(17,330)	8,556	8,556
Residential	657,692	660,141	(2,449)	608,277	631,407	23,130	49,415	20,681
Adult Protective Services	40,385	31,744	8,641	86,374	98,497	12,122	(45,989)	20,764
Birth To Three	97,074	49,805	47,269	97,074	49,805	(47,269)	-	-
	1,794,178	2,093,092	(298,914)	2,698,363	2,816,873	118,510	(904,185)	(180,404)
County Appropriations	796,868	796,868	-				796,868	-
Excess Revenue/(Expense)	9,354,616	11,003,085	(1,648,469)	10,720,235	11,332,618	(612,383)	(1,365,618)	(2,260,852)

North Central Health Care
Review of Services in Lincoln County
For the Period Ending February 28, 2022

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Outpatient Services	202,620	191,598	11,023	113,373	153,505	40,132	89,247	51,155
Community Treatment-Adult	133,106	174,892	(41,786)	120,340	158,509	38,169	12,766	(3,617)
Community Treatment-Youth	218,199	318,786	(100,587)	191,310	303,357	112,047	26,889	11,461
Lincoln Industries	168,333	100,622	67,711	218,174	174,839	(43,336)	(49,841)	24,376
Pine Crest Nursing Home	1,926,429	1,917,236	9,193	2,070,683	2,183,793	113,110	(144,254)	122,303
	2,648,688	2,703,133	(54,445)	2,713,881	2,974,003	260,122	(65,193)	205,677
Shared Services								
Adult Behavioral Health Hospital	87,179	137,014	(49,835)	164,664	177,928	13,264	(77,485)	(36,571)
Youth Behavioral Health Hospital	31,763	43,059	(11,296)	80,056	76,757	(3,299)	(48,293)	(14,595)
Residency Program	7,046	9,022	(1,976)	9,126	11,997	2,871	(2,080)	895
Crisis Services	15,031	25,461	(10,429)	87,186	89,477	2,291	(72,154)	(8,138)
Adult Crisis Stabilization Facility	33,075	36,391	(3,316)	33,080	38,088	5,008	(5)	1,692
Youth Crisis Stabilization Facility	26,261	27,289	(1,028)	14,870	25,177	10,307	11,391	9,280
Lakeside Recovery MMT	5,330	-	5,330	3,568	-	(3,568)	1,762	1,762
Residential	-	-	-	-	-	-	-	-
Adult Protective Services	8,315	6,536	1,779	17,783	20,279	2,496	(9,469)	4,275
Birth To Three	19,561	10,036	9,525	19,561	10,036	(9,525)	-	-
	233,561	294,807	(61,245)	429,895	449,739	19,845	(196,333)	(41,401)
County Appropriations	173,476	173,476	-				173,476	-
Excess Revenue/(Expense)	3,055,725	3,171,415	(115,690)	3,143,776	3,423,743	279,967	(88,051)	164,277

North Central Health Care
Review of Services in Langlade County
For the Period Ending February 28, 2022

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Outpatient Services	165,896	166,000	(104)	116,425	118,807	2,381	49,470	49,366
Community Treatment-Adult	73,393	116,653	(43,260)	69,529	106,413	36,884	3,864	(39,395)
Community Treatment-Youth	174,385	280,071	(105,686)	148,699	238,969	90,271	25,687	(79,999)
Sober Living	3,950	6,789	(2,840)	14,522	17,565	3,043	(10,572)	(13,412)
Day Services	74,940	58,740	16,200	58,618	64,819	6,201	16,321	32,521
	492,564	628,253	(135,689)	407,793	546,573	138,780	84,771	(50,919)
Shared Services								
Adult Behavioral Health Hospital	59,800	93,983	(34,184)	112,950	122,048	9,098	(53,150)	(87,334)
Youth Behavioral Health Hospital	21,788	29,536	(7,748)	54,914	52,651	(2,263)	(33,126)	(40,874)
Residency Program	19,432	6,189	13,244	6,260	8,229	1,969	13,172	26,416
Crisis Services	10,311	17,464	(7,154)	59,804	61,376	1,572	(49,494)	(56,647)
Adult Crisis Stabilization Facility	22,687	24,962	(2,274)	22,691	26,126	3,435	(4)	(2,278)
Youth Crisis Stabilization Facility	18,014	18,718	(705)	10,200	17,270	7,070	7,814	7,109
Lakeside Recovery MMT	3,656	-	3,656	2,448	-	(2,448)	1,208	4,864
Residential	19,432	19,505	(72)	17,972	18,656	683	1,460	1,388
Adult Protective Services	5,703	4,483	1,220	12,198	13,910	1,712	(6,495)	(5,274)
Birth To Three	13,304	6,826	6,478	13,304	6,826	(6,478)	-	6,478
	194,127	221,666	(27,539)	312,741	327,092	14,351	(118,614)	(146,153)
County Appropriations	49,747	42,389	7,358				49,747	7,358
Excess Revenue/(Expense)	736,438	892,308	(155,871)	720,534	873,665	153,132	15,904	(139,967)

North Central Health Care
Report on the Availability of Invested Funds
For the Period Ending February 28, 2022

Bank	Length	Maturity Date	Interest Rate	Amount
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
CoVantage Credit Union	365 Days	1/29/2023	0.70%	307,323
Invested Funds				4,804,192
Weighted Average	397 Days		0.53%	

Received in March

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North Central Health Care
Summary of Revenue Write-Offs
For the Period Ending February 28, 2022

	<u>MTD</u>	<u>YTD</u>
Behavioral Health Hospitals		
Administrative Write-Off	74,268	82,562
Bad Debt	-	-
Outpatient & Community Treatment		
Administrative Write-Off	24,853	38,027
Bad Debt	-	-
Nursing Home Services		
Administrative Write-Off	-	4,165
Bad Debt	-	7,373
Aquatic Services		
Administrative Write-Off	135	2,777
Bad Debt	-	-
Pharmacy		
Administrative Write-Off	50	83
Bad Debt	-	-
Other Services		
Administrative Write-Off	(1,791)	(813)
Bad Debt	-	-
Grand Total		
Administrative Write-Off	<u>97,515</u>	<u>126,801</u>
Bad Debt	-	7,373