



North Central Health Care

Person centered. Outcome focused.



CONSTRUCTING A COMPELLING FUTURE

2019 FINAL BUDGET

2019 FINAL BUDGET

TABLE OF CONTENTS

Letter to NCCSP Program Board of Directors	3-5
Master Facilities Plan, 5 to 50 Vision	
Executive Summary	6-7
Mission, Vision and Values	8-9
NCCSP Board of Directors	10
NCHC Executive Management Team & Organizational Chart	11
Looking Back – 2017 Individuals Served by County	12
Budget Priorities and Guidelines	13
2019 County Appropriations (Levy) Requests	14
2019 RCA Performance Expectations & Guidelines	15-19
2019 Budget & Financial Statements	21-36
Definition of Terms	
Human Services Operations 2019 Budget by Program	37-67
Nursing Home Operations 2019 Budget by Program	68-77
Support Services 2019 Budget by Program	79-99
Capital Budget	101-103



North Central Community Services Program Board of Directors,

There is an evolutionary force upon this organization as we move into our 2nd year of our 5 to 50 Vision. The Marathon County Asylum for the Insane may have been our roots 125 years ago, but we are steadfastly focused on *Constructing a Compelling Future*. Our 5 to 50 Vision, to identify and operationalize all the necessary elements to organizational viability, to get NCHC to our 50th Anniversary (March 23, 2022) and to set ourselves up for the next 50 years **is firmly in motion**. The fundamental question of our strategic work is: What will our world look like when we change it? The future looks good from my current vantage point.

Our core operational strategy as an organization is to be a regional platform designed to take care of people others are unwilling or unable to care for and to do it better than anyone else with:

- 1) Unequaled competence and quality in delivering behavioral health and skilled nursing services;
- 2) Community presence through partnership and relationships;
- 3) Leadership and advocacy for behavioral health and skilled nursing advancement;
- 4) Convenient access to NCHC services throughout the region; and
- 5) Physician leadership and professional management.

Our 2019 budget achieves so much in pursuit of these strategic elements.

A budget is a plan to achieve some stated objective. *Viability and Choice* are our overarching financial objectives and a major aspect of the 5 to 50 Vision. To achieve both, we need growth. In 2017, the Executive Management team committed to the following financial objectives as part of our 5 to 50 Vision:

- 1) 3-5% Compound Annual Growth Rate
- 2) Reduce the Ratio of % Indirect to Direct Expenses
- 3) Reduce the Ratio of % Direct Expense to Gross Patient Revenue

The projection of these goals and our performance so far is as follows:

	2017 Baseline	2018 Target	2018 Budget	2019 Target	2019 Budget	2020 Target	2021 Target	2022 Target
(1)	\$60M	\$62M	\$66.7M	\$63.7M	\$70.1M	\$65.5M	\$67.7M	\$70M
(2)	42.5%	41%	38.3%	40%	39.4%	39%	38%	37%
(3)	64%	63.5%	66%	63%	64.7%	62%	61%	60%

I am proud to report that the 2019 Budget has achieved our 2022 target for growth by crossing the \$70M threshold – three years ahead of schedule. Our other two financial ratios are at target or on track to hit our 2022 objectives. We have had unprecedented growth in our first two years of our 5 to 50 Vision, the dust will start to settle in 2019. Future growth will have to come outside of our main campus operations. Further, with our upcoming campus investments, we will have to realign our cost structure to achieve our core financial objectives. With all this forward progress, we are also making up ground on some other key financial targets:

Contingency Funding

The 2019 Budget achieves our target of having contingency funding equal to or greater than 1.5% of the annual operating budget. With \$1,882,000 (2.68%) in contingency funding and Board designated reserves, we can anticipate unforeseen revenue or expense swings. This is an improvement over the 2018 budget which had 1.21% contingency funding after all contingency was depleted following 2016. With our cash position improving and a healthy contingency, we are well prepared heading into our major capital project on our main campus.

Tax Levy Funding

Tax levy funding for 2019 is 8.99% of total funding, down from 11.44% in 2018. In 2019, we are eliminating \$1,125,287 in Marathon County tax levy funding from our budget. When the State of Wisconsin transitioned Counties to Family Care, all Counties were given an annual liability responsibility to pay for these services they were previously

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responsible for. Prior to Family Care, NCHC provided these services on behalf of the County. The annual liability payment is \$1,125,287 for Marathon County and is intended to remain in perpetuity and not change.

Each year the County has given NCHC tax levy for the family care liability, for which the County then receives the bill for the liability, and NCHC uses the tax levy from the County to pay the bill.

We are giving Marathon County back the tax levy, dollar for dollar, to pay this liability directly. It does not make sense to move these funds back and forth. Langlade and Lincoln County both pay the liability directly and this would equalize the approach within the partnership. Plus, the current payment mechanism artificially inflates Marathon County tax levy support for programming when none of the tax levy is used for current programming but instead is used to pay the County's liability.

Capital Funding

In 2019 we will begin our first phase of our \$73M main campus renovation. We are actively working to invest in future growth through our capital funding while also maintaining our important physical assets. Targeted annual capital expense (combination of new capital spending and depreciation) is currently set at 5% of the annual operating budget. The 2018 budget was finalized with a 4.28% rate. In 2019, we have the capital funding rate set at 3.82% (\$2,675,647 total; \$1,743,000 in depreciation expense and \$932,647 in new capital spending). While we are below our target, we are clearing room in our capital and operating budgets to absorb the annual debt service related to our upcoming main campus renovation. These expenses should take us well over our 5% target and will be phased in over the next 2-4 years.

Key Priorities for 2019

Both the North Central Community Services Program Board and the Retained County Authority Committee have given priorities for the 2019 budget, which we are prepared to deliver with the 2019 budget that we are submitting to you. Here are our priorities for 2019:

Develop NCHC into a Learning Organization

A learning organization has five core elements, cultivated by and within the organization. We have made a large investment in our Organizational Development program to operationalize this strategy in 2019. This includes converting our Learning Management Software and Competency systems, funding for new Instructional Designer and Director of Medical Staff Relations positions, and a complete overhaul to our budgeting for professional development. The Director of Medical Staff Relations position will be primarily engaged in the coordination of Graduate Medical Education here at NCHC, a very important investment for NCHC. We have also dedicated training resources towards enhanced suicide awareness and prevention, de-escalation, and a robust management training program in 2019.

Build Medical Staff and Physician Leadership Capacity

The 2019 Budget achieves our objective of funding 8.0 FTE's of employed Psychiatrists. We have 6.0 FTE's filled currently with employed Psychiatrists and are confident our positions will all be filled by this time next year. We will have achieved our objective of building our Medical Staff to 8 Psychiatrists, and we are two to three years ahead of schedule. Our 2019 budget also supports our scaling of the Central Wisconsin Psychiatry Residency program to support the 9 residents we will have next year and our build out of PGY3. In 2019, investments in Physician Leadership and support will continue as we become a Physician led organization.

Refresh our Information Services Platform

Moving into 2019 we will have our new nursing home electronic medical records system come online and will transition into implementing our new Human Resources Information System platform. We will complete these two projects in 2019 and start into our major refresh of our electronic medical records system for our behavioral health programs. By the end of 2021, we will have refreshed our five core systems and put them into an ongoing five year review cycle going forward. Major achievements await us.

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Create a Comprehensive Community-Based Substance Abuse Strategy

The 2019 Budget includes \$25,000 in consulting services to start to develop a framework to have a broad-based community-based substance abuse strategy. Similar projects have been deployed across the United States. The NCCSP Board will have this project as a major initiative in 2019.

Develop a Comprehensive Youth Crisis Stabilization Service Continuum

We remain committed to building an 8-bed unit here on our main campus in 2019. The unit was approved in the Master Facility Plan and will be one of the first phases in construction. It remains our best strategy. The unit will be built to be easily convertible between a Community-Based Rehabilitation Facility (CBRF) and Hospital licensure. We continue to pursue building out our Child & Adolescent Psychiatry services for this purpose as well as with general Outpatient needs. Our main objective is to develop a comprehensive 24/7 Youth Crisis stabilization program that meets our partners' needs. We will continue to work with RCA on developing this strategy into 2019.

Clarification and Communication of Services Provided and Access

Point of access improvements are in store for 2019. We are updating our switchboard operations away from the current automated call attendant experience. During key business and after-hour time slots, we will have a live person answer our main number. High level training will be provided to get people connected to services quicker and more accurately. Along with the switchboard investments, NCHC will have a completely overhauled website going into 2019. The website will improve access and experience by being mobile responsive and capable. Our Marketing and Communications team will focus on updating all of our program materials along with coordinating more targeted outreach in 2019.

Improved Data Sharing between NCHC and County Sheriff's Offices, Social Service Departments, and Schools

We are committed to improving data sharing between NCHC and our partners. This is a complicated issue but the intention is pure. We will overcome the hurdles to improve care coordination through data sharing initiatives in 2019. A main focus of our efforts here will be to coordinate data to improve care for individuals in crisis or who are high utilizers.

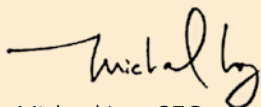
Research and Develop a Proposal to Meet County Needs for Housing

Our intention for 2019 will be to work with each of our three County partners to perform a needs assessment and proposal for housing solutions. Some County partners have described this as a transitional housing need from the Criminal Justice System, others have described the need as Sober Living. We will participate in the discovery and needs assessment on a full-continuum of options to address specific housing gaps and needs. Through the process we will establish recommendations for program development and implementation.

In summary and to put it simply, there is nothing at NCHC that is not moving or changing. We continue to mold our changing organization around a strong culture. There is a lot going on in order for us to become the best version of ourselves. We are becoming more and more encouraged by our progress despite knowing there is a lot ahead of us. Going into and throughout 2019, we will work with both the NCCSP Board and RCA Committee to bring these priorities to life. I have great faith in our ability to deliver, as we have delivered on all of 2018 Budget Priorities we committed to, and we intend to keep our promises.

Lastly, this year's budget is another impressive representation of our management team's ability and as always, Brenda Glodowski, our Chief Financial Officer's expertise. Brenda has continued to deliver on our enhanced budgeting process and document we introduced two years ago. Countless hours of planning and review go into delivering a budget with results I've only begun to highlight. As a Board, I can assure you that you represent a community who is receiving great services from the people who have the privilege and opportunity to work at North Central Health Care every day. We truly appreciate what we get to do on your behalf.

Here is to *Constructing a Compelling Future* together!



Michael Loy, CEO
North Central Health Care

EXECUTIVE SUMMARY

Brenda Glodowski
Chief Financial Officer

The 2019 budget reflects another year of operational growth. The increase from 2018 budget to 2019 budget is \$3,411,682, which reflects a 5.1% increase. The 5 to 50 Vision targets a 3 to 5% annual growth for achieving financial viability and growth. This budget anticipates growth beyond the annual target and the level of this budget is comparable to the 2022 projection. This is a reflection of growth at a more rapid pace than what had been targeted. The growth is being achieved with no additional request of county levy. An overview of general budget assumptions and other service line highlights are provided in this summary.

GENERAL BUDGET ASSUMPTIONS

The budget includes 2.5% again this year for employee merit increases, which equates to \$728,000. The second phase of the nursing wage adjustments is also included, which is equal to \$162,000. This was approved in 2018; with phase one being implemented in 2018. These adjustments were needed to bring the nursing wages back in line with the market. A 5% salary vacancy factor is in place for programs with over 20 FTE's and \$1,000,000 of salaries. There are 10 programs that fall into these criteria, with a combined dollar impact of \$882,000. The overall FTE's for the organization increases from 699 in 2018 to 714 for 2019, or an overall increase of 15 FTE's.

Employee benefits increase overall 7.22% compared to the 2018 budget. The majority of this increase is in health insurance, which increases \$600,000. With the addition of staff over the past two years, the enrollment in the insurance plan has increased in addition to health care costs continuing to increase. The WI Retirement System rate is decreasing again for 2019, going from 13.4% to 13.10%. The employer and employee both share in the decrease, with each seeing a .15% decrease. This has an impact of about \$70,000 to the organization. Unemployment claims have been decreasing over the past two years. A decrease of \$10,000 is included in unemployment for 2019. FICA and retirement are based on salaries, which also increase as salaries increase.

As the organization moves towards being a learning organization, organizational development is centralized for staff developments. Staff development funds are being moved from program budgets into organizational development to be centrally managed. Additional funding is going to organizational development with the addition of a position and educational software to enhance development opportunities for employees.

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EXECUTIVE SUMMARY

SERVICE LINE HIGHLIGHTS

The setup of Program Service Lines was introduced with the 2018 budget. The service lines represented are Behavioral Health Services, Community Behavioral Health Services, Community Living Services, Other Services, Mount View Care Center, and Pharmacy.

Behavioral Health Services includes Inpatient and the State Institutes, Crisis CBRF, the Medically Monitored Treatment (MMT) Program, and Crisis Services. Additional nursing and an advanced practice registered nurse (APNP) are being added to the hospital due to the complexity of the patients coming into the hospital. In addition, more Crisis Professionals are being added to Crisis. There is revenue to offset some of the additional expenses. The revenue will come from billable services as well as an increase in WIMCR (WI Medicaid Cost Reporting). The stipend support and psychiatry supervision for the residency program increases in 2019. However, there is a Graduate Medical Education payment (GME) from Medicare included to offset these costs.

Community Behavioral Health Services includes Outpatient, Psychiatry Services, Community Treatment and Clubhouse. This service line sees significant growth again for 2019. Community Treatment and Clubhouse do see some additional growth again, mostly provided by contract providers. As Community Treatment grows, so does the funding. Changes in this area are usually offset by new revenue. The most significant increase in this budget is with Psychiatry Services. There is an increase of 3.0 Psychiatrists and a 1.0 Nurse Practitioner. Some of the expense is being offset by a reduction in contracted provider services and additional billable services.

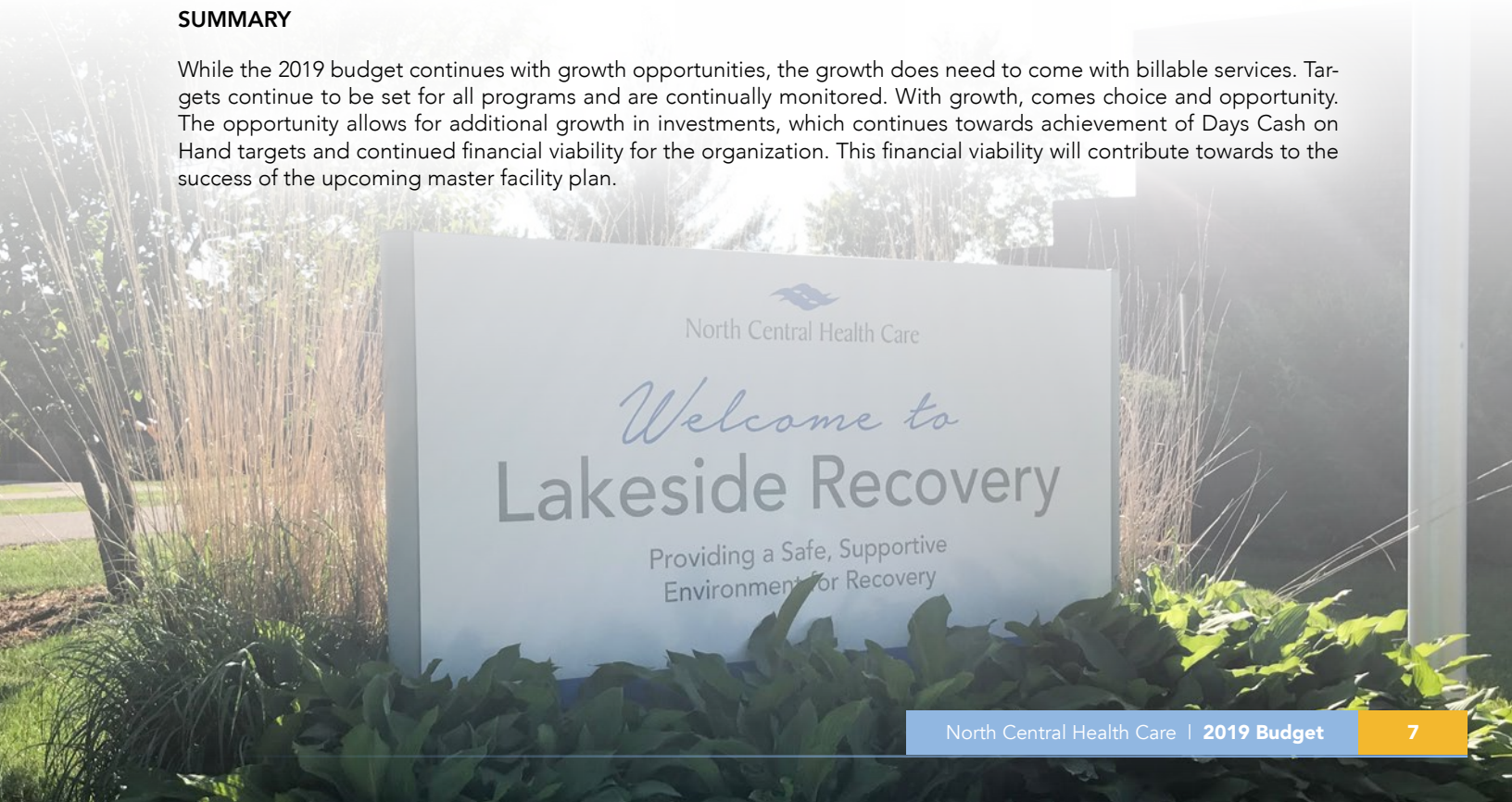
Community Living Services includes Day Services and Residential. Day Services is seeing some decrease in services as more clients are moving to community-based services. Residential Services is pretty consistent with the prior year. No tax levy is utilized in this service line.

Other Services includes Birth to Three, Adult Protective Services, Demand Transportation and Aquatic Services. Birth to Three reduced a Speech Therapist position, so there is some decrease in billable revenue. In addition, the required Maintenance of Effort (MOE) that is set by the State has decreased for this program. The MOE is a required amount the program is to contribute in order to utilize the grant funding. This contribution comes from tax levy. Aquatic Services is seeing an increase of reliance on tax levy. It is still anticipated that when the new pool is built, the reliance on tax levy will decrease.

Mount View Care Center and the Pharmacy are both seeing growth. The growth in these programs is offset with increased revenue. The nursing home rates are more favorable than they have been in many years. The Medicaid reimbursement formula is expected to add significant additional funding, which will improve the Medicaid rates. Pharmacy continues to see an increase in the number of prescriptions being filled.

SUMMARY

While the 2019 budget continues with growth opportunities, the growth does need to come with billable services. Targets continue to be set for all programs and are continually monitored. With growth, comes choice and opportunity. The opportunity allows for additional growth in investments, which continues towards achievement of Days Cash on Hand targets and continued financial viability for the organization. This financial viability will contribute towards the success of the upcoming master facility plan.



MISSION, VISION & CORE VALUES

Our purpose and beliefs aren't simply words on a page or aspirations we are unwilling to achieve.

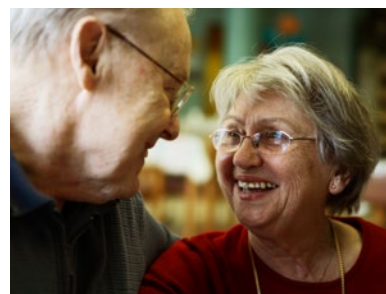
As the dawn of a new day began in 2017, it was time for a reboot on our Mission, Vision and Core Values. Our prior work in this regard was not fundamentally flawed as to require us to start over, but rather an externally focused perspective needed to be incorporated. As we listened to our community more closely in 2016, our Mission, Vision and Core Values became simpler, they more clearly define who we are, what we stand for, how we interact with people, and why every one of us works at North Central Health Care – because we can make a difference in the lives of individuals in our community.

Our Mission: **Langlade, Lincoln and Marathon Counties partnering together to provide compassionate and specialized care for people with complex behavioral and skilled nursing needs.**

North Central Health Care has a deep history and relationship with our Central Wisconsin community. We are committed to our partnership with our three counties as we continually seek to provide the highest levels of accessible and specialized care for those we serve. Our person-centered service approach to the complex needs of those we serve and those we partner with are identical – we will meet you where you are at and walk with you on the journey together. Our programs and services provide compassionate and specialized care that is designed around each individual's abilities and challenges – creating a path to move forward together.

Our Vision: **Lives Enriched and Fulfilled.**

Each interaction we have with those we serve, our community partners and each other, will lead to lives that are more enriched and fulfilled. We face the world with undeterred optimism and hope of possibility. Every day a new chance to make people's lives better. The vast potential to make a difference in each individual's life is our greatest inspiration and measure of success.



Our Core Values

The Core Values we share at NCHC guide us in each interaction we have and allow us to carry out our Mission and Vision. Embodying our Core Values will allow North Central Health Care to:

- ...become the very best place for residents and clients to receive care,
- ...become the very best place for employees to work...*A Career of Opportunity*,
- ...continue to grow in our contributions to the communities we serve.

DIGNITY

We are dedicated to providing excellent service with acceptance and respect to every individual, every day.

INTEGRITY

We keep our promises and act in a way where doing the right things for the right reasons is standard.

ACCOUNTABILITY

We commit to positive outcomes and each other.

PARTNERSHIP

We are successful by building positive relationships by working across the organization and as a trusted County partner.

CONTINUOUS IMPROVEMENT

We embrace change, value feedback, creativity and the advancement of excellence



CULTURE

There is a lot of talk about culture out there. Culture is about creating the right environment and structures for success. Culture at NCHC starts with the foundation of our Mission, Vision and Core Values. Culture at North Central Health Care focuses on three key elements for success:

Do the right thing, work to the best of your ability and care about people.

We experience the presence of our culture each day, good or bad. We want to create a culture to influence people in a positive way, a culture where if people are willing to violate the statement above they will feel very uncomfortable. In late 2016, a team from North Central Health Care was charged with developing our approach to building our culture around Person Centered Service. The development of the model allowed NCHC to create a customer service approach distinctly our own.



Person-Centered Service is about serving others through effective communication, listening to understand and building meaningful relationships. The Person-Centered Service model provides a framework and common language for everyone across NCHC, regardless of where they work. The model helps make NCHC a great place to work, an organization we are all proud of, that has a great reputation.

A few key points of emphasis in the Person-Centered Service model:

- ★ The model is surrounded by a ring of communication – a lack of communication is the first thing that breaks down between people and teams. We have to ensure we are excellent communicators.
- ★ The Service Excellence Star connects with our service excellence vision of quality and connects Person-Centered Service with our dashboard results.
- ★ The graphic of the four individuals represents that we are family and we are serving people as if they are *our* family.
- ★ Our Core Values hold together our Person-Centered Service approach and we serve others based on the following service-focused concepts:
 - Proactive Approach & Caring Attitude
 - Culture of Trust & Safety
 - Values & Respect Based
 - Choice, Input & Involvement

Our NCHC team has been using the Person-Centered Service model as the support structure to continue to develop our culture. So far there has been some amazing momentum created to carry us into 2018 and beyond.



NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD OF DIRECTORS

The North Central Community Services Program is a governmental organization established by the counties of Langlade, Lincoln, and Marathon, and is governed by a Board of Directors under Wisconsin State Statutes 51.42/.437 to provide services for individuals with mental illness, alcohol or drug dependency, and developmental disabilities. The Program operates North Central Health Care, with its main campus in Wausau, and centers and offices located in Merrill, Tomahawk, and Antigo.



Jeff Zriny, Board Chair

- Marathon County
- Joined April 2014
- Retired President/CEO, Wausau Region Chamber of Commerce
- Retired, Health Insurance Executive
- Marathon County Board Supervisor



Norbert Ashbeck

- Lincoln County
- Joined April 2018
- Retired Director of Radiology for Good Samaritan Hospital, Merrill
- Lincoln County Board Supervisor



Ben Bliven

- Marathon County
- Joined February 2016
- Chief, Wausau Police Department



Randy Balk

- Marathon County
- Joined February 2016
- President/CEO Intercity State Bank



Dr. Steve Benson

- Marathon County
- Joined May 2016
- Clinical and Consulting Psychologist



John Breske

- Langlade County
- Joined April 2018
- Construction
- Langlade County Board Supervisor



Meghan Mattek

- Langlade County
- Joined January 2018
- Community Health Improvement Specialist/Executive Assistant to CEO
- Aspirus Langlade Hospital



William Metter

- Marathon County
- Joined October 2010
- Retired, Information Technology
- Retired, Clergy



Dr. Corrie Norrbom

- Marathon County
- Joined October 2016
- Primary Care Physician
- WIPPS Health Policy Fellow
- Medical College of WI Faculty Navigator



Rick Seefeldt

- Marathon County
- Joined March 2017
- Marathon County Board Supervisor
- Former Dairy Farmer (42 years) and current Cash Crop Farmer



Romey Wagner

- Marathon County
- Joined April 2018
- Manager, Entrepreneurial & Education Center
- Marathon County Board Supervisor



Robert Weaver

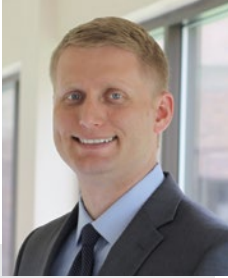
- Lincoln County
- Joined April 2012
- Retired Plumbing Contractor
- Lincoln County Board Supervisor



Theresa Wetzsteon

- Marathon County
- Joined February 2017
- Marathon County District Attorney

NORTH CENTRAL HEALTH CARE EXECUTIVE MANAGEMENT TEAM



Michael Loy
Chief Executive Officer



Kim Gochanour
Nursing Home
Operations



Laura Scudiere
Human Services
Operations

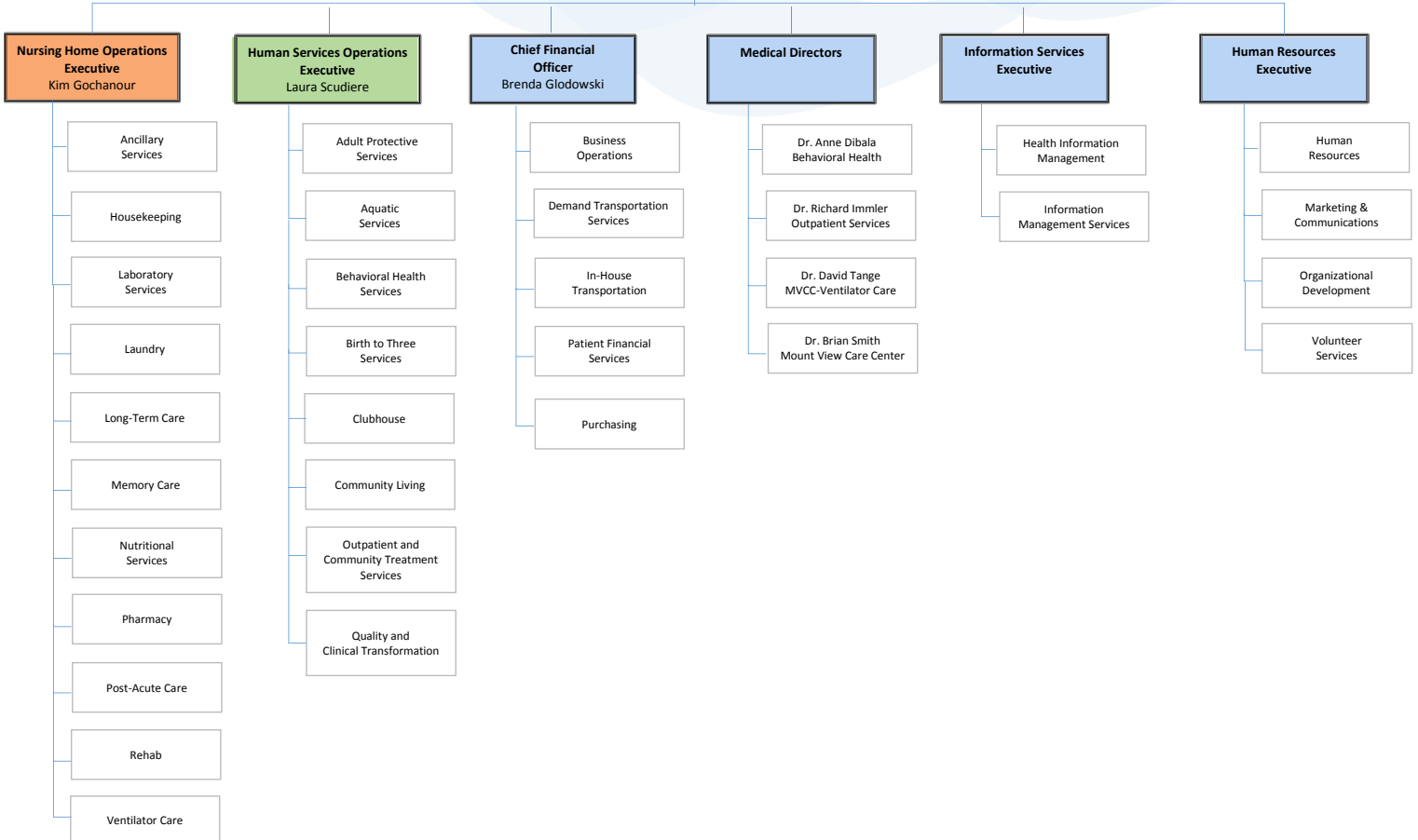


Brenda Glodowski
Chief Financial Officer

ORGANIZATIONAL CHART

NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD

Chief Executive Officer
Michael Loy



LOOKING BACK – 2017 INDIVIDUALS SERVED BY COUNTY

SERVICES	MARATHON	LINCOLN	LANGLADE	2016 TOTAL*	2017 TOTAL*
Inpatient Psychiatric Care	521	85	73	787	739 people
Community Treatment	524	138	102	680	764 people
Community Corner Clubhouse	184	7	1	170	208 people
Outpatient Services Counseling	1,084	309	475	1,756	1,926 people
Outpatient Psychiatric Care	1,181	237	163	1,769	1,631 people
Outpatient Services Substance Abuse	1,515	336	406	1,845	2,291 people
Residential Supported Apartments	102	/	/	87	102 people
Residential CBRF	50	/	/	34	50 people
Substance Abuse Day Treatment	63	9	11	64	85 people
Medically Monitored Treatment for Drug & Alcohol Addiction	96	11	14	120	123 people
OWI Assessments	612	93	99	885	804 assessments
Driving with Care	16	/	/	9	16 people
Inpatient Detoxification	86	5	2	326	100 people
Crisis Stabilization	101	5	7	176	123 people
Mobile Crisis Care (Adult/Youth)	1,872	358	321	1,902	2,765 assessments
Adult	938	199	154	1,019	1,426 adults
Youth	327	40	51	379	442 youth
Adult Day Services	61	/	41	107	107 people
Birth to Three	300	56	40	446	400 people
Children's Long Term Support	/	44	21	47	65 people
Prevocational Services	108	3	32	165	147 people
Demand Transportation	590	18	5	725	657 people
Adult Protective Services	316	44	76	492 596	436 people 578 Adult/Elder At-Risk Investigations
Aquatic Services	431	23	5	604	490 people
Post-Acute Rehabilitation	187	4	5	239	229 people
Dementia Care	142	4	3	162	155 people
Long Term Care	46	/	/	92	54 people

*The Annual Total columns on far right reflect the total number of people served for the program including residents from other counties.

BUDGET PRIORITIES & GUIDELINES

The Agreement for the Joint Sponsorship of Community Programs between Langlade, Lincoln and Marathon Counties requires the Retained County Authority (RCA) Committee to provide budget guidelines and priorities to the NCCSP Board prior to the development of each year's budget by June 1st. The RCA approved the budget guidelines and priorities listed below at their May 31, 2018 meeting and presented these priorities to the NCCSP Board the same day. The budget guidelines were unchanged by the RCA. The 2019 Budget is being presented in a similar format as the 2018 budget which was inclusive of all prior budget guidelines.

2019 RETAINED COUNTY AUTHORITY COMMITTEE BUDGET PRIORITIES

The RCA did develop three new budget priorities for 2019. North Central Health Care is presenting a 2019 budget that includes the following priorities, in the order of importance, in addition to a maintenance of effort in all other programs.

1) Develop a Comprehensive Youth Crisis Stabilization Service Continuum

Departments of Social Services, law enforcement, and other stakeholders within each of the three member counties continue to express significant need for a comprehensive continuum of care related to youth crisis, including improving the timeliness of youth crisis assessments; improving the staffing of youth crisis stabilization chairs, developing increased capacity for local crisis stabilization, and educating the member counties and local partners on these services and how to access them.

2) Clarification and Communication of Services Provided and How They Can Be Accessed

As NCHC programs and services have expanded and have been modified to improve quality and access, member county stakeholders and community partners have expressed a lack of clarity on the nature of the services/programs, what populations the services/programs are intended to serve, and how the services/programs can be accessed. Member county departments and stakeholders would benefit from a clear, easy-to-use resource and an education plan.

3) Improved Data Sharing Between NCHC and County Sheriff's Offices, Social Service Departments, and Schools

Ongoing efforts within Marathon County to identify and develop strategies to more effectively case manage "high utilizers" within its County Jail and the NCHC Psychiatric Hospital, have highlighted the need for more effective sharing of information between NCHC and member county departments. Improved data sharing processes and procedures between NCHC and the member counties can also be built upon to create similar processes and procedures for other community organizations, such as schools and medical providers.

4) Research and Develop a Proposal to Meet County Needs for Housing

Our intention for 2019 will be to work with each of our three County partners to perform a needs assessment and proposal for housing solutions. Some County partners have described this as a transitional housing need from the Criminal Justice System, others have described the need as Sober Living. We will participate in the discovery and needs assessment on a full-continuum of options to address specific housing gaps and needs. Through the process we will establish recommendations for program development and implementation.

The 2019 Budget includes support to operationalize all of the budget priorities identified by the Retained County Authority Committee.



2019 COUNTY APPROPRIATIONS (LEVY) REQUESTS

A key Budget Guideline is to itemize levy requests versus having one bundled levy request per County. The detailed itemization will also now be reflected in each County budget to ensure transparency of taxpayer support. The following is the levy request detail for each program by county for 2019.

DIRECT SERVICES

Direct Services programs have specific locations in each County therefore the revenues and expenses can be directly reported to these programs. There is no tax levy support for Direct Services.

SHARED SERVICES

Shared Services programs requiring levy are detailed below. Shared Services programs are based in Marathon County but each County has equal access to their use. All revenues and expenses for these programs are proportionately allocated based on population with the exception of Birth to Three. Birth to Three is based on the number of children enrolled in each County as they are served in the homes of County residents. Allocations based on population are reviewed every five years per the Agreement between the counties. Most recently this was reviewed in 2015. Currently this equates to an allocation of 11% for Langlade County, 15% for Lincoln and 74% for Marathon County. Levy numbers below may not represent these percentages precisely as the grants and base county allocations from the State vary by County.

SHARED SERVICES	LANGLADE	LINCOLN	MARATHON	TOTAL
Inpatient Hospital	\$ -	\$88,324	\$208,852	\$297,176
Lakeside Recovery (MMT)	\$ -	\$-	\$218,116	\$218,116
Crisis	\$52,159	\$296,224	\$1,356,802	\$1,705,185
Protective Services	\$59,310	\$80,876	\$398,991	\$539,177
Birth to Three	\$88,297	\$112,378	\$513,729	\$714,404
Contract Services	\$98,717	\$134,614	\$664,096	\$897,427
TOTAL	\$298,483	\$712,416	\$3,360,586	\$4,371,486

MARATHON COUNTY ONLY PROGRAMS

North Central Health Care operates a number of programs directly for Marathon County that require tax levy support to operations. The largest program is Mount View Care Center (MVCC).

Community Corner Clubhouse	\$92,000
Aquatic Therapy Pool	\$342,345
MVCC - Long Term Care	\$428,000
MVCC - Legacies Dementia Care	\$1,072,000
TOTAL	\$1,934,345

TOTAL TAX LEVY REQUEST FOR 2019

	LANGLADE	LINCOLN	MARATHON	TOTAL
TOTAL 2019 LEVY	\$298,483	\$712,416	\$5,294,932	\$6,305,831

RETAINED COUNTY AUTHORITY (RCA) 2019 PERFORMANCE EXPECTATIONS & OUTCOMES

With the creation of the Retained County Authority (RCA) Committee, a key aspect of the RCA's accountability was to articulate their performance expectations for NCHC on behalf of the Counties. There are two elements to creating performance expectations:

Program Standards: General expectations of performance for each program that are either not easily measurable or the measurement of performance would be administratively burdensome. Program Standards are still of great importance in NCHC's accountability to our County partners when we do not meet these expectations on a consistent basis.

Outcomes: Are a measurable result of activities within a program. Outcomes are the level of performance or achievement that occurred because of the activity or services as compared to merely reporting on an organization's activities or busyness.

As the RCA worked to define the performance expectations and outcomes the Committee decided to keep the Program Standards as standalone items and imbed the Program Outcomes into NCHC's Service Excellence Dashboard system.

PROGRAM EXPECTATIONS

Behavioral Health Services Program Expectations

All BHS staff, including Physicians, will have mandatory training on admission laws and court procedures and rights associated on an annual basis.

Program/Function Specific Expectations

Crisis & Suicide Prevention Hotline

All callers to the hotline will be offered face to face evaluation and/or intervention with the expectation to link the caller with services within 72 hours; callers offered opportunity for voluntary admission if applicable.

Mobile Crisis

Connection will be made within 15 minutes with the referral agency (specifically, law enforcement, school and/or the Department of Social Services) regarding the plan for immediate response and ongoing plan (contingent on active release of information consent); Crisis workers must be:

- Educated annually on admission laws in the State of Wisconsin;
- Offer each patient resource literature during every Crisis assessment; and
- If applicable, provide patients the opportunity for voluntary admission.

Youth Crisis Stabilization

Connection will be made within 15 minutes with the referral agency (specifically, law enforcement, school and/or the Department of Social Services) regarding the plan for immediate response and ongoing plan (contingent on active release of information consent).

Court Liaison

Adhere to a policy created with the assistance of Corporation Counsels that outlines clear expectations for communication between NCHC and Corporation Counsels, with respect to:

- Probable Cause Hearings, Settlement Agreements, Commitments, etc.;
- To set standard for notification of admission to Corporate Counsels;
- Manage admission to other facilities;
- Manage transition of care to outpatient providers;
- Case management of patients under settlement agreements;
- Managed timelines and requisite paperwork to proactively initiate recommitments; and
- Staff will have mandatory training on admission laws and court procedures and rights associated on an annual basis.

Inpatient Hospital, Detox, Community Based Rehabilitation Facility (CBRF) and Medically Monitored Treatment Programs

- A comprehensive discharge plan will continue to be completed prior to discharge.



RETAINED COUNTY AUTHORITY (RCA) 2019 PERFORMANCE EXPECTATIONS & OUTCOMES

PROGRAM EXPECTATIONS

Community Behavioral Health Services Program Expectations

All staff, including Physicians, will have mandatory training on admission laws and court procedures and rights associated on an annual basis.

There should be an increased case monitoring for all patients and clients under commitments and settlement agreements.

All patients and clients screened for services will receive information on services available and how to access them.

Enhance community engagement through ongoing outreach activities to increase knowledge of referral process, especially Community Corner Clubhouse.

Program/Function Specific Expectations

Children's Long-Term Services

NCHC staff will work closely with the Department of Social Services to coordinate service delivery and care plans as applicable.

Outpatient Services

NCHC will be an active participant in youth counseling consortium in the schools.

PROGRAM OUTCOME EXPECTATIONS

The Program Outcome Expectations set by the RCA fit nicely into NCHC's Dashboard system which is a cascading measurement system where all program's share outcomes and have individual program accountabilities in five domains of excellence established by the NCCSP Board several years ago. Every employee at NCHC is aligned in achieving results in the Dashboard system through our performance based compensation, process improvement and performance evaluation systems. The Dashboard has the following five pillars where outcome measures fall into:

People – This pillar demonstrates NCHC's commitment to create a values-driven culture that attracts, retains and promotes people who are committed to NCHC's mission, vision and values.

Service – This pillar demonstrates NCHC's commitment to providing an excellent experience and service to the people we serve directly or as referral sources.

Quality – This pillar demonstrates how NCHC improves clinical excellence to set industry standards and exceed expectations.

Community – This pillar demonstrates NCHC's commitment to be an exemplary public citizen by making a difference in the community and being accessible.

Finance – The pillar demonstrates NCHC's commitment to achieve financial results to ensure NCHC's viability to provide quality health care services and investment in the organization.

The NCCSP Board has defined the end statements for success in each of these domains while the RCA has defined specific program expectations and outcomes in each relevant domain.

The RCA determined that the NCCSP Board's outcomes in People and Finance are sufficient in meeting the needs of the Counties. For Service indicators there were two outcome measures applicable for all programs to be fully implemented in 2019.

Patient Experience: Mean percentage of level 5 responses to the overall satisfaction rating question on the survey.

Referral Sources Experience: Mean percentage of level 5 responses to the overall satisfaction rating question on the survey.

RETAINED COUNTY AUTHORITY (RCA) 2019 PERFORMANCE EXPECTATIONS & OUTCOMES

In addition to the specific outcome measures below, the RCA instructed NCHC leadership to continue to develop quality of life indicators for patients and clients in 2019 as a way to measure the success of treatment. Once developed, these indicators will be included in the Clinical Indicators, as applicable.

BEHAVIORAL HEALTH SERVICES

	<i>Clinical Indicators</i>	<i>Community Indicators</i>
Mobile Crisis		Ratio of voluntary to involuntary commitments; % of crisis assessments with documented linkage and follow-up within 24 hours of service; % of referrals from law enforcement, schools and Department of Social Services who have a release of information
Youth Crisis	Number of diversions and average length of stay for out of county diversions of adolescents (13-17 years old); % of youth diversions with a length of stay of less than 72 hours	% of crisis assessments with documented linkage and follow-up within 72 hours of discharge; % of referrals from law enforcement, schools and Department of Social Services who have a release of information
Court Liaison (Linkage & Follow-Up)	% of settlement agreements and commitments extended	Compliance rate with court liaison policy; % of individuals with commitments and settlement agreements enrolled in CCS or CSP programs for eligible individuals within 60 days of referral
Inpatient Hospital	% of patients who have a post-discharge counseling appointment within 4 days of discharge; % of patients who have a post-discharge psychiatry appointment within 14 days of discharge	Ratio of adult patient days at NCHC vs. Diversions
Detox	% of Detox Patients who are readmitted within 1 year of discharge and the average length since previous admission, if applicable; % of detox patients are admitted to substance abuse programming within 4 days of discharge	
CBRF	% of Patients who kept their follow-up outpatient appointment, if applicable	% of referred patients admitted within 24 hours
MMT	Successful program completion rate; compliance rate with discharge plan 60 days post-discharge	% of MMT clients who are case managed by CCS
Community Treatment	% of Treatment plan completed within thirty (30) days of admission into the program; % of Treatment plans is reviewed every six (6) months; % of Individual Placement and Support (IPS) clients who are employed	% of Eligible CCS and CSP clients admitted within 60 days of referral; same day cancellation and no-show rate; average days from referral to initial appointment
Outpatient	% of hospital patients who have a post-discharge counseling appointment within 4 days of discharge; % of patients who have a post-discharge psychiatry appointment within 14 days of discharge; OWI Recidivism Rate (5 year recidivism assessment)	% of patients offered an appointment within 4 days of screening by a referral coordinator; hospitalization rate of active patients; same day cancellation and no-show rate; Criminal Justice Post-Jail Release Access Rate (within 4 days of release)
Day Treatment	Successful program completion rate	% of eligible patients are admitted within 24 hours
Adult Protective Services	% of at-risk investigations closed within 30 days; comprehensive evaluation completed within 24 hours of date the report is sent to the initial parties, % of at-risk cases re-opened within one (1) month of closure	
Birth to Three		Eligible clients are admitted within 45 days of referral; same day cancellation and no-show rate; average days from referral to initial appointment



ORGANIZATION DASHBOARD

Excellence in quality can only be achieved when all levels of the organization share the same goals, effectively measure performance against those goals and consistently perform their work in a way that contributes to those goals. The **purpose** of measurement is to:

- ✓ Assess the stability of processes and outcomes to determine whether there is an undesirable degree of variation or a failure to perform at an expected level,
- ✓ Identify problems and opportunities to improve the performance of processes,
- ✓ Assess the outcome of the care provided, and/or
- ✓ Assess whether a new or improved process produces improved outcomes.

Setting clear quality outcome goals provides the focus and clear direction that is necessary for the efficient and effective achievement of those goals. This is achieved through the following:

- ✓ Clearly defined Organizational Goals in each of the Quality domains (Service, Clinical, Financial, People, Community),
- ✓ A system for cascading the Organizational Goals to clearly defined and measurable goals pertaining to the individual functional responsibility at all levels of the organization,
- ✓ The incorporation of comparative data to effectively assess current performance, and
- ✓ A performance system that holds individuals accountable to the achievement of these goals.

2019 APPROVED ORGANIZATION DASHBOARD

DEPARTMENT: **NORTH CENTRAL HEALTH CARE**

FISCAL YEAR: **2019**

PRIMARY OUTCOME GOAL	TARGET (Rating 2)	↑ ↓	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	2019 YTD	2018 YTD
PEOPLE																
Vacancy Rate	5-7%	↓														
Retention Rate	78-82%	↑														
SERVICE																
Patient Experience	TBD	↑														
CLINICAL																
Readmission Rate	8-10%	↓														
Nursing Home Star Rating	4+ Stars	↑														
Adverse Event Rate	2.9 events per 1000 days	↓														
Total Hospital Days	735 or less per month	↓														
COMMUNITY																
Access to NCHC programs	90-95%	↑														
FINANCE																
Direct Expense/Gross Patient Revenue	60-64%	↓														
Indirect Expense/Direct Expense	36-38%	↓														
Net Income	2-3%	↑														

KEY: ↑ Higher rates are positive
↓ Lower rates are positive

* Monthly Rates are Annualized

DASHBOARD MEASUREMENT OUTCOME DEFINITIONS AND DETAILS

PEOPLE

Vacancy Rate

Total number of vacant positions as of month end divided by total number of authorized positions as of month end.

Retention Rate

Annualized number of employees onboard on January 1st who remain employed divided the number of employees onboard on January 1st.

SERVICE

Patient Experience

Mean percentage of level 5 responses to the overall satisfaction rating question on the survey.

CLINICAL

Readmission Rate

Number of residents re-hospitalized within 30 days of admission to nursing home / total admissions. Percent of patients who are readmitted within 30 days of discharge from the Inpatient Behavioral Health hospital for Mental Health primary diagnosis. *Benchmark: American Health Care Association/ National Center for Assisted Living (AHCA/NCAL) Quality Initiative*

Nursing Home Star Rating

Star rating as determined by CMS Standards.

Adverse Event Rate

Adverse event rate for all NCHC programs including the Nursing Home and HSO programming.

Total Hospital Days

Total days that all patients spend hospitalized for psychiatric stabilization or evaluation either in the inpatient unit or at external diversion sites

COMMUNITY

NCHC Access

Percent of clients obtaining services within the Best Practice timeframes in NCHC programs.

- Adult Day Services - within 2 weeks of receiving required enrollment documents
- Aquatic Services - within 2 weeks of referral or client phone requests
- Birth to Three - within 45 days of referral
- Community Corner Clubhouse - within 2 weeks
- Community Treatment - within 60 days of referral
- Outpatient Services - * within 4 days following screen by referral coordinator for counseling or non-hospitalized patients,
* within 4 days following discharge for counseling/post-discharge check,
and * 14 days from hospital discharge to psychiatry visit
- Prevocational Services - within 2 weeks of receiving required enrollment documents
- Residential Services - within 1 month of referral
- Post Acute Care - % of eligible referred residents admitted within 48 hours
- Long Term Care - % of eligible referred residents admitted within 2 weeks

FINANCE

Direct Expense/Gross Patient Revenue

Percentage of total direct expense compared to gross revenue.

Indirect Expense/Direct Expense

Percentage of total indirect expenses compared to direct expenses.

Net Income

Percentage of total indirect expenses compared to direct expenses.





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BUDGET & FINANCIAL STATEMENTS

Definition of Terms	21-22
2019 Combining Statement of Revenue & Expenses	23
2019 Budget to Budget Comparison	24
2019 Budget by County	25
2019 Budget with County Appropriation (Tax Levy)	26
2019 Budget by Funding	27
2019 Revenue & Expense Budget Comparisons	28
2019 Revenue & Expense Overview	29
2019 Revenue & Expense Detail	30
2019 Grant Funding	31
2019 Funding by Other Sources	32
2019-2020 Forecast	33-34
2019 Units Costs	35



DEFINITION OF TERMS

Self-Pay: Funding received from the patient.

Medicare: Medicare is a federal governmental program, providing funding for the elderly and qualified disabilities.

Medicaid: Medicaid is a state governmental program, providing funding for those with lower income. Medicaid may include care services and also managed care, such as Family Care.

Insurance: Funding from commercial insurance.

WIMCR (WI Medicaid Cost Reporting)/CCS Reconciliations: Additional Medicaid funding available for specific programs intended to offset some of the Medicaid deficits in governmental organizations. This funding is available for certified programs in governmental organizations.

Supplemental Payment: Additional funding available for nursing homes intended to offset some of the Medicaid deficit. This funding is only available to governmental nursing homes.

AODA Block Grant (Alcohol and Other Drug Abuse): Funding used for alcohol and substance abusers, prevention and intervention programs, and programs and services for women and youth; 20% of funds must be used for prevention programming and at least 10% must be expended on programs and services designed for women. It is also known as SAPTG (Substance Abuse Prevention and Treatment Block Grant).

MH Block Grant (Mental Health Block Grant): Funding used in mental health priority program areas, which may include Community Support Programs, Supported Housing, Jail Diversion, Crisis Intervention, Family and Consumer Peer Support and Self-Help, Programs for Persons with Mental Illness and Substance Abuse Problems, and Community Mental Health Data Set Development.

IDP Funds (Intoxicated Driver Program): Funding used to cover costs resulting in unanticipated deficits in the county's IDP funding.

CST Expansion (Coordinated Service Teams): Funding used to expand mental health services to youth and families.

Certified MH Program (Certified Mental Health):

Funding used for the purpose of matching funds to federal financial participation for Medicaid-covered services provided by a program that is certified by the department under DHS 34, Subpart III (Crisis Intervention); DHS 36 (Comprehensive Community Services); or DHS 63 (Community Support Services).

85.21 Transportation Grant: Funding used to provide transportation to elderly and disabled residents of Marathon County.

Children's LTS (Children's Long Term Support):

Funding used to provide a range of different services for children who are living at home or in the community and have substantial limitations in multiple daily activities as the result of developmental disabilities, severe emotional disturbances, and/or physical disabilities.

Family Support (Family Support for Families Who Have a Child with Severe Disabilities-FSP):

Funding used for families of a child with severe disabilities to purchase goods or services not funded through other sources that will enable the child to reside with his/her parent(s), reduce stress in the family, and avoid out-of-home placement. This is limited to \$3,000 per family annually.

APS Grant (Adult Protective Services): Funding used for Adults-At-Risk (AAR) programming and Adult Protective Services (APS), encompassing core services such as response and reporting of alleged abuse, neglect, or exploitation; short term protective interventions, court-required reviews, and longer term case management if required by certain circumstances. Also includes Elder Abuse/Neglect Funding (EAN) which provides funding for direct services to victims of elder abuse, neglect, self-neglect, and/or financial exploitation through the provision of early intervention services for individuals being identified as being at risk.

Birth To Three Grant: Funding used for development administration and provision of early intervention services to eligible infants and toddlers with disabilities and their families.

OWI Surcharges (Operating While Intoxicated):

Funding received for providing court-ordered assessments to OWI offenders.

COP (Community Option Program): Funding of last resort to conduct assessments, develop care plans, and to provide community-based services to individuals who otherwise would be at risk of institutional care.

IMD-OBRA (Institute for Mental Disease/Special Relocation Funds): Funding used to pay for the cost of community-based care and services to any person who has a mental illness and is 22 through 64 years of age at the time the person is relocated from an Institution for Mental Disease (IMD) or a Medicaid-certified nursing facility (NF) in accordance with the requirements of s. 46.268 Stats.

DVR (Division of Vocational Rehabilitation): Funding used to coordinate supported employment services for individuals with mental illness.

Contracted Services: Funding provided through a contract. This could be a contract with an organization, another county, a provider, etc.

Other: Other sources of funding included in direct service programs related to their programs. This could include such items as donations, reimbursement for meals provided in programs such as Day Services, or other funding related to a specific program.

Allocated Revenue: Revenue received in overhead programs and allocated to revenue generating programs. This includes such items as medical record sales, rebates, purchasing discounts, cafeteria sales, interest income, etc.

Base County Allocation: This is also referred to as Community Aids. This is funding from the State as additional funding for programs providing services to those funded by Medicaid. This may be used as required Medicaid Match and/or to help offset Medicaid deficits.

County Appropriations (Tax Levy): Funding received directly from the sponsoring counties.



2019 COMBINING STATEMENT OF REVENUE & EXPENSES

	2019 BUDGET:			2018 BUDGET:		
	TOTAL	HUMAN SERVICES OPERATIONS	NURSING HOME	TOTAL	HUMAN SERVICES OPERATIONS	NURSING HOME
REVENUE						
Net Patient Service Revenue	\$51,821,900	\$31,939,900	\$19,882,000	\$48,948,800	\$29,965,800	\$18,983,000
Other Revenue						
State Match/Addendum	\$2,242,500	\$2,242,500	\$0	\$2,130,700	\$2,130,700	\$0
State Grant-in-Aid	\$5,017,805	\$5,017,805	\$0	\$3,901,436	\$3,901,436	\$0
Department and Other Revenue	\$4,472,623	\$3,141,324	\$1,331,299	\$3,936,924	\$2,581,644	\$1,355,280
Counties' Appropriations	\$6,305,832	\$4,805,832	\$1,500,000	\$7,631,118	\$5,931,118	\$1,700,000
Total Other Revenue	\$18,038,760	\$15,207,461	\$2,831,299	\$17,600,178	\$14,544,898	\$3,055,280
TOTAL REVENUE	\$69,860,660	\$47,147,361	\$22,713,299	\$66,548,978	\$44,510,698	\$22,038,280
EXPENSES						
Direct Expenses	\$50,287,727	\$36,961,585	\$13,326,142	\$48,249,430	\$34,749,521	\$13,499,909
Indirect Expenses	\$19,822,933	\$10,435,776	\$9,387,157	\$18,449,548	\$9,911,177	\$8,538,371
TOTAL EXPENSES	\$70,110,660	\$47,397,361	\$22,713,299	\$66,698,978	\$44,660,698	\$22,038,280
Operating Income (Loss)	(\$250,000)	(\$250,000)	\$0	(\$150,000)	(\$150,000)	\$0
Nonoperating Gains /(Losses)						
Interest Income	\$250,000	\$250,000	\$0	\$150,000	\$150,000	\$0
Gain/(loss) Disposal of Assets						
Total Nonoperating Gains (Loss)	\$250,000	\$250,000	\$0	\$150,000	\$150,000	\$0
Income (Loss)	\$0	\$0	\$0	\$0	\$0	\$0

2019 BUDGET TO BUDGET COMPARISON

	2019 BUDGET REVENUE	2019 BUDGET EXPENSE	VARIANCE FUNDED BY STATE BCA/ APPROPRIATION	2018 BUDGET REVENUE	2018 BUDGET EXPENSE	VARIANCE FUNDED BY STATE BCA/ APPROPRIATION
BEHAVIORAL HEALTH SERVICES						
Inpatient	\$5,073,412	\$6,665,985	(\$1,592,573)	\$4,653,828	\$6,029,616	(\$1,375,788)
Contract Services (State Institutes)	\$0	\$897,427	(\$897,427)	\$0	\$905,919	(\$905,919)
CBRF	\$867,893	\$867,893	\$0	\$1,011,583	\$1,011,583	\$0
Crisis Services	\$565,559	\$2,686,454	(\$2,120,895)	\$349,047	\$2,670,983	(\$2,321,936)
Lakeside Recovery (MMT)	\$505,192	\$799,943	(\$294,751)	\$506,645	\$998,688	(\$492,043)
Subtotal: Behavioral Health Services	\$7,012,056	\$11,917,702	(\$4,905,646)	\$6,521,103	\$11,616,789	(\$5,095,686)
COMMUNITY SERVICES						
Outpatient Services	\$4,263,717	\$7,645,780	(\$3,382,063)	\$2,746,925	\$5,786,650	(\$3,039,725)
Community Treatment	\$11,893,649	\$11,991,650	(\$98,001)	\$11,624,623	\$11,791,362	(\$166,739)
Clubhouse	\$504,099	\$596,099	(\$92,000)	\$399,251	\$491,251	(\$92,000)
Subtotal: Community Services	\$16,661,465	\$20,233,529	(\$3,572,064)	\$14,770,799	\$18,069,263	(\$3,298,464)
COMMUNITY LIVING SERVICES						
Day Services	\$1,816,254	\$1,816,254	\$0	\$2,080,254	\$2,080,254	\$0
Residential Services-Group Homes	\$2,000,000	\$2,000,000	\$0	\$1,937,000	\$1,937,000	\$0
Residential Services-Apartments	\$2,384,000	\$2,384,000	\$0	\$2,317,000	\$2,317,000	\$0
Subtotal: Community Living	\$6,200,254	\$6,200,254	\$0	\$6,334,254	\$6,334,254	\$0
OTHER SERVICES						
Birth To Three	\$847,654	\$1,562,058	(\$714,404)	\$950,625	\$1,785,737	(\$835,112)
Protective Services	\$234,710	\$773,887	(\$539,177)	\$241,379	\$780,556	(\$539,177)
Demand Transportation	\$438,235	\$438,235	\$0	\$431,235	\$431,235	\$0
Aquatic Services	\$801,463	\$1,143,809	(\$342,346)	\$792,100	\$1,006,215	(\$214,115)
Subtotal: Other Services	\$2,322,062	\$3,917,989	(\$1,595,927)	\$2,415,339	\$4,003,743	(\$1,588,404)
NURSING HOME						
Daily Services	\$18,793,781	\$21,361,335	(\$2,567,554)	\$18,314,067	\$20,942,719	(\$2,628,652)
Rehab and Ancillary Services	\$2,419,518	\$1,351,964	\$1,067,554	\$2,024,213	\$1,095,561	\$928,652
Subtotal: Nursing Home	\$21,213,299	\$22,713,299	(\$1,500,000)	\$20,338,280	\$22,038,280	(\$1,700,000)
Pharmacy	\$5,127,887	\$5,127,887	\$0	\$4,636,649	\$4,636,649	\$0
TOTALS	\$58,537,024	\$70,110,660	(\$11,573,637)	\$55,016,424	\$66,698,978	(\$11,682,554)
Base County Allocation	\$5,017,805		\$5,017,805	\$3,901,436		\$3,901,436
County Appropriation	\$6,305,831		\$6,305,831	\$7,631,118		\$7,631,118
Nonoperating Revenue	\$250,000		\$250,000	\$150,000		\$150,000
TOTAL REVENUE/EXPENSE	\$70,110,660	\$70,110,660	\$0	\$66,698,978	\$66,698,978	\$0



2019 BUDGET BY COUNTY

HUMAN SERVICES OPERATIONS

	LANGLADE	LINCOLN	MARATHON	TOTAL
PROGRAM REVENUE				
Direct Services	\$2,878,785	\$2,790,759	\$12,791,663	\$18,461,207
Shared Services	\$1,234,782	\$1,408,785	\$11,091,063	\$13,734,630
Base County Allocation	\$798,531	\$829,977	\$3,389,298	\$5,017,806
TOTAL PROGRAM REVENUE	\$4,912,098	\$5,029,521	\$27,272,024	\$37,213,643
PROGRAM EXPENSES				
Direct Services	\$3,008,008	\$3,022,334	\$13,654,431	\$19,684,773
Shared Services	\$2,218,003	\$2,741,513	\$17,625,185	\$22,584,701
TOTAL COST OF SERVICES	\$5,226,011	\$5,763,847	\$31,279,616	\$42,269,474
Excess Revenue/(Expenses)	(\$313,913)	(\$734,326)	(\$4,007,592)	(\$5,055,831)
Non-Operating Revenue	\$15,430	\$21,910	\$212,660	\$250,000
County Appropriations	\$298,483	\$712,416	\$3,794,932	\$4,805,831
Excess Revenue/(Expenses) After County Appropriation	\$0	\$0	\$0	\$0

NURSING HOME

PROGRAM REVENUE				
Nursing Home Revenue			\$18,793,781	\$18,793,781
Nursing Home Ancillary Revenue			\$2,419,518	\$2,419,518
TOTAL PROGRAM REVENUE			\$21,213,299	\$21,213,299
PROGRAM EXPENSES				
Nursing Home Expenses			\$21,361,335	\$21,361,335
Nursing Home Ancillary Expense			\$1,351,964	\$1,351,964
TOTAL PROGRAM EXPENSES			\$22,713,299	\$22,713,299
Excess Revenue/(Expenses)			(\$1,500,000)	(\$1,500,000)
Non-Operating Revenue				
County Appropriation			\$1,500,000	\$1,500,000
Excess Revenue/(Expenses) After County Appropriation			\$0	\$0

PHARMACY

Direct Services Revenue			\$5,127,887	\$5,127,887
Direct Services Expense			\$5,127,887	\$5,127,887
Excess Revenue/(Expenses)			\$0	\$0

2019 BUDGET WITH COUNTY APPROPRIATION (TAX LEVY)

	2019 BUDGET EXPENSES	NET BILLED REVENUE	GRANT FUNDING	SUPPL. PAY/ CCS/ WIMCR	OTHER FUNDING	MARATHON CO MATCH	BASE CO ALLOCATION	COUNTY LEVY	2019 BUDGET REVENUE	% OF PROGRAM FUNDED BY LEVY
BEHAVIORAL HEALTH SERVICES										
Inpatient	\$4,950,409	\$3,752,000			\$366,384	\$111,186	\$423,664	\$297,175	\$4,950,409	6.00%
Hospital Psychiatry	\$1,715,576	\$500,000			\$333,104	\$10,738	\$871,734	\$0	\$1,715,576	0.00%
Contract Services (State Institutes)	\$897,427	\$0			\$0		\$0	\$897,427	\$897,427	100.00%
CBRF	\$867,893	\$653,000		\$200,000	\$7,151	\$7,742	\$0	\$0	\$867,893	0.00%
Crisis Services	\$2,686,454	\$156,000		\$320,000	\$317,513	\$22,046	\$165,710	\$1,705,185	\$2,686,454	63.47%
Lakeside Recovery (MMT)	\$799,943	\$395,000		\$100,000	\$1,290	\$8,902	\$76,635	\$218,116	\$799,943	27.27%
Subtotal: Behavioral Health Services	\$11,917,702	\$5,456,000	\$0	\$620,000	\$1,025,442	\$160,614	\$1,537,743	\$3,117,903	\$11,917,702	26.16%
COMMUNITY SERVICES										
Outpatient Services	\$3,698,727	\$1,980,000	\$515,000	\$25,000	\$423,087	\$64,420	\$691,220	\$0	\$3,698,727	0.00%
Outpatient Psychiatry	\$3,947,053	\$884,000	\$0	\$125,000	\$236,472	\$10,738	\$2,690,843	\$0	\$3,947,053	0.00%
Community Treatment-Adult	\$5,305,629	\$3,946,000	\$266,000	\$948,000	\$27,538	\$20,091	\$98,000	\$0	\$5,305,629	0.00%
Community Treatment-Youth	\$6,686,021	\$5,933,000	\$480,000	\$192,000	\$60,939	\$20,081		\$0	\$6,686,020	0.00%
Clubhouse	\$596,099	\$381,000			\$123,099			\$92,000	\$596,099	15.43%
Subtotal: Community Services	\$20,233,529	\$13,124,000	\$1,261,000	\$1,290,000	\$871,135	\$115,330	\$3,480,063	\$92,000	\$20,233,528	0.45%
COMMUNITY LIVING SERVICES										
Day Services	\$1,816,254	\$1,526,000			\$215,000	\$75,254			\$1,816,254	0.00%
Residential Services-Group Homes	\$2,000,000	\$2,000,000							\$2,000,000	0.00%
Residential Services-Apartments	\$2,384,000	\$2,384,000							\$2,384,000	0.00%
Subtotal: Community Living	\$6,200,254	\$5,910,000	\$0	\$0	\$215,000	\$75,254	\$0	\$0	\$6,200,254	0.00%
OTHER SERVICES										
Birth To Three	\$1,562,058	\$233,000	\$519,000	\$50,000	\$12,000	\$33,654		\$714,404	\$1,562,058	45.73%
Protective Services	\$773,887	\$400	\$225,000		\$0	\$9,310		\$539,177	\$773,887	69.67%
Demand Transportation	\$438,235	\$29,500	\$237,500		\$170,000	\$1,235			\$438,235	0.00%
Aquatic Services	\$1,143,809	\$527,000			\$135,315	\$139,148		\$342,345	\$1,143,808	29.93%
Subtotal: Other Services	\$3,917,989	\$789,900	\$981,500	\$50,000	\$317,315	\$183,347	\$0	\$1,595,926	\$3,917,988	40.73%
MOUNT VIEW CARE CENTER										
Long Term Care	\$4,213,343	\$2,662,000		\$503,000	\$43,705	\$412,750		\$428,000	\$4,049,455	10.16%
Legacies Dementia Care	\$9,482,458	\$6,918,000		\$1,039,000	\$42,318	\$411,140		\$1,072,000	\$9,482,458	11.31%
Post Acute Care	\$3,047,189	\$1,935,000		\$141,000	\$27,153	\$137,891			\$2,241,044	0.00%
Ventilator Care	\$4,618,345	\$3,879,000		\$417,000	\$86,932	\$137,892			\$4,520,824	0.00%
Rehab and Ancillary Services	\$1,351,964	\$2,388,000			\$0	\$31,518			\$2,419,518	0.00%
Subtotal: Mount View Care Center	\$22,713,299	\$17,782,000	\$0	\$2,100,000	\$200,108	\$1,131,191	\$0	\$1,500,000	\$22,713,299	6.60%
Pharmacy	\$5,127,887	\$4,700,000	\$0	\$0	\$408,000	\$19,887	\$0	\$0	\$5,127,887	0.00%
TOTALS	\$70,110,660	\$47,761,900	\$2,242,500	\$4,060,000	\$3,037,000	\$1,685,623	\$5,017,806	\$6,305,831	\$70,110,660	8.99%
PERCENT OF TOTAL FUNDING		68.12%	3.20%	5.79%	4.33%	2.40%	7.16%	8.99%	100.00%	



2019 BUDGET BY FUNDING

	GROSS CHARGES	%	EXPENSES	FUNDING BY PAYER	%	FUNDED BY OTHER SOURCES	%
PAYER							
Self Pay	\$6,853,800	9%	\$6,309,959	\$2,673,900	42%	(\$3,636,059)	58%
Medicare	\$18,699,000	24%	\$16,826,558	\$9,898,000	59%	(\$6,928,558)	41%
Medicaid	\$48,108,000	62%	\$43,468,610	\$36,684,000	84% **	(\$6,784,610)	16%
Insurance	\$4,064,000	5%	\$3,505,533	\$2,566,000	73%	(\$939,533)	27%
TOTAL	\$77,724,800	100%	\$70,110,660	\$51,821,900	74%	(\$18,288,760)	26%

FUNDING	AMOUNT	%	
Self Pay	\$2,673,900	3.8%	
Medicare	\$9,898,000	14.1%	
Medicaid	\$32,624,000	46.5%	**
Insurance	\$2,566,000	3.7%	
Supplemental Pay.	\$2,100,000	3.0%	**
WIMCR	\$660,000	0.9%	**
CCS Reconciliation	\$1,300,000	1.9%	\$51,821,900
State Addendums	\$2,242,500	3.2%	
Community Aids	\$5,017,805	7.2%	
County Appropriation	\$6,305,831	9.0%	
All Other	\$4,722,624	6.7%	\$18,288,760
	\$70,110,660	100.0%	\$70,110,660

2019 REVENUE BUDGET COMPARISONS

DESCRIPTION	2016 BUDGET	2017 BUDGET	2018 BUDGET	2019 BUDGET	2018-2019 % OF CHANGE
Nursing Home Gross Revenue	\$28,256,000	\$25,808,000	\$24,342,000	\$25,859,000	
Nursing Home Contractual Adj's	(\$7,541,000)	(\$7,767,000)	(\$7,343,000)	(\$8,077,000)	
Net Nursing Home Revenue	\$20,715,000	\$18,041,000	\$16,999,000	\$17,782,000	4.61%
Outpatient Gross Revenue	\$23,343,100	\$26,722,000	\$31,642,000	\$32,405,800	
Outpatient Contractual Adj's	(\$8,548,100)	(\$10,474,200)	(\$11,696,200)	(\$11,377,900)	
Net Outpatient Revenue	\$14,795,000	\$16,247,800	\$19,945,800	\$21,027,900	5.43%
Inpatient Gross Revenue	\$7,205,000	\$7,653,000	\$8,050,000	\$8,600,000	
Inpatient Contractual Adj's	(\$3,365,000)	(\$3,753,000)	(\$3,675,000)	(\$4,348,000)	
Net Inpatient Revenue	\$3,840,000	\$3,900,000	\$4,375,000	\$4,252,000	-2.81%
Pharmacy Gross Revenue	\$9,652,000	\$8,996,000	\$8,847,000	\$10,860,000	
Pharmacy Contractual Adj's	(\$5,455,000)	(\$4,948,000)	(\$4,747,000)	(\$6,160,000)	
Net Pharmacy Revenue	\$4,197,000	\$4,048,000	\$4,100,000	\$4,700,000	14.63%
Net Patient Revenue	\$43,547,000	\$42,236,800	\$45,419,800	\$47,761,900	5.16%
State Addendums	\$2,512,000	\$2,132,700	\$2,130,700	\$2,242,500	5.25%
State Grant-In-Aid	\$3,901,436	\$3,901,436	\$3,901,436	\$5,017,805	28.61%
County Appropriations	\$8,924,688	\$7,671,118	\$7,631,118	\$6,305,831	-17.37%
Other Income	\$1,851,000	\$5,928,723	\$7,615,924	\$8,782,624	15.32%
TOTAL REVENUE	\$60,736,124	\$61,870,777	\$66,698,978	\$70,110,660	5.12%

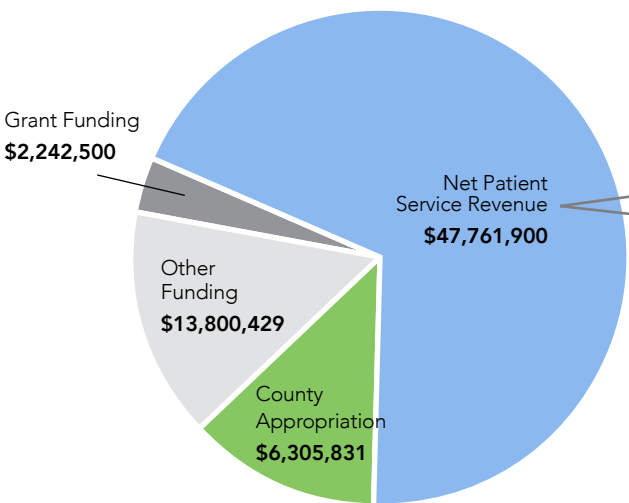
2019 EXPENSE BUDGET COMPARISONS

DESCRIPTION	2016 BUDGET	2017 BUDGET	2018 BUDGET	2019 BUDGET	2018-2019 % OF CHANGE
Salaries and Wages	\$30,972,254	\$30,474,824	\$32,738,156	\$34,459,665	5.26%
Employee Benefits	\$11,480,000	\$11,626,000	\$11,938,000	\$12,800,000	7.22%
Program Supplies and Expense	\$8,329,670	\$8,781,340	\$9,212,902	\$11,029,065	19.71%
Purchased & Contracted Services	\$5,643,600	\$6,907,349	\$8,795,473	\$7,744,683	-11.95%
Utilities	\$874,850	\$611,447	\$611,447	\$611,447	0.00%
Education and Travel	\$419,750	\$351,817	\$428,000	\$467,800	9.30%
Depreciation and Insurance	\$2,216,000	\$2,118,000	\$2,175,000	\$2,198,000	1.06%
State Institutes	\$800,000	\$1,000,000	\$800,000	\$800,000	0.00%
TOTAL EXPENSES	\$60,736,124	\$61,870,777	\$66,698,978	\$70,110,660	5.12%

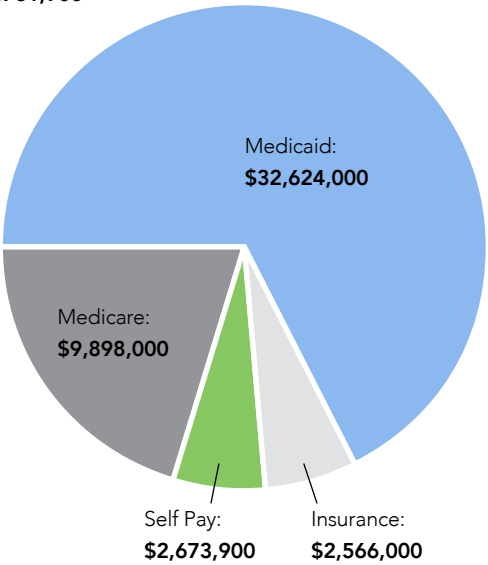


2019 REVENUE & EXPENSE OVERVIEW

2019 Total Revenue: **\$70,110,660**



2019 Net Patient Service Revenue by Payer Source
\$47,761,900



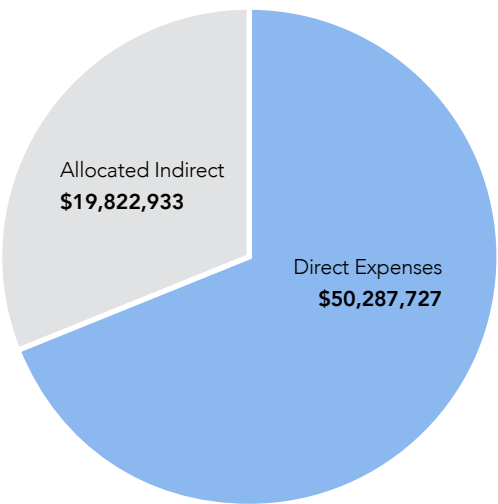
Medicaid: Medicaid is a state governmental program, providing funding for those with lower income. Medicaid may include care services and also managed care such as Family Care.

Medicare: Medicare is a federal governmental program providing funding for the elderly and qualified disabilities.

Self-Pay: Funding received from the patient.

Insurance: Funding received from commercial insurance.

2019 Total Expense: **\$70,110,660**



2019 REVENUE & EXPENSE DETAIL

	REVENUE: NET PATIENT SERVICE REV	GRANT FUNDING	OTHER FUNDING	TOTAL REVENUE	EXPENSE: DIRECT EXPENSES	ALLOCATED INDIRECT EXP	TOTAL EXPENSES
MARATHON COUNTY-DIRECT SERVICES							
Outpatient Services	\$1,276,000	\$355,000	\$618,284	\$2,249,284	\$1,626,433	\$622,851	\$2,249,284
Community Treatment-Adult	\$3,187,000	\$211,000	\$593,057	\$3,991,057	\$3,158,324	\$832,733	\$3,991,057
Community Treatment-Youth	\$3,457,000	\$220,000	\$68,694	\$3,745,694	\$2,940,494	\$805,200	\$3,745,694
Day Services	\$1,257,000	\$0	\$233,254	\$1,490,254	\$1,042,826	\$447,428	\$1,490,254
Clubhouse	\$381,000	\$0	\$215,099	\$596,099	\$492,666	\$103,433	\$596,099
Aquatic Services	\$527,000	\$0	\$616,808	\$1,143,808	\$623,952	\$519,856	\$1,143,808
Demand Transportation	\$29,500	\$237,500	\$171,235	\$438,235	\$379,256	\$58,979	\$438,235
Subtotals	\$10,114,500	\$1,023,500	\$2,516,431	\$13,654,431	\$10,263,951	\$3,390,480	\$13,654,431
LANGLADE COUNTY-DIRECT SERVICES							
Outpatient Services	\$424,000	\$67,000	\$307,212	\$798,212	\$603,845	\$194,367	\$798,212
Community Treatment-Adult	\$356,000	\$22,000	\$228,293	\$606,293	\$454,617	\$151,676	\$606,293
Community Treatment-Youth	\$1,043,000	\$99,000	\$135,503	\$1,277,503	\$923,981	\$353,522	\$1,277,503
Day Services	\$269,000	\$0	\$57,000	\$326,000	\$285,417	\$40,583	\$326,000
Subtotals	\$2,092,000	\$188,000	\$728,008	\$3,008,008	\$2,267,860	\$740,148	\$3,008,008
LINCOLN COUNTY-DIRECT SERVICES							
Outpatient Services	\$280,000	\$93,000	\$278,231	\$651,231	\$518,738	\$132,493	\$651,231
Community Treatment-Adult	\$403,000	\$33,000	\$272,279	\$708,279	\$559,402	\$148,877	\$708,279
Community Treatment-Youth	\$1,433,000	\$161,000	\$68,823	\$1,662,823	\$1,296,179	\$366,644	\$1,662,823
Subtotals	\$2,116,000	\$287,000	\$619,333	\$3,022,333	\$2,374,319	\$648,014	\$3,022,333
SHARED SERVICES							
Inpatient	\$3,752,000	\$0	\$1,198,409	\$4,950,409	\$3,789,141	\$1,161,268	\$4,950,409
Hospital Psychiatry	\$500,000	\$0	\$1,215,576	\$1,715,576	\$1,439,517	\$276,059	\$1,715,576
Contract Services (State Institute)	\$0	\$0	\$897,427	\$897,427	\$800,000	\$97,427	\$897,427
CBRF	\$653,000	\$0	\$214,893	\$867,893	\$606,854	\$261,039	\$867,893
Crisis Services	\$156,000	\$0	\$2,530,454	\$2,686,454	\$1,869,395	\$817,059	\$2,686,454
Lakeside Recovery (MMT)	\$395,000	\$0	\$404,943	\$799,943	\$524,062	\$275,881	\$799,943
Outpatient Psychiatry	\$884,000	\$0	\$3,063,053	\$3,947,053	\$3,259,159	\$687,894	\$3,947,053
Birth To Three	\$233,000	\$519,000	\$810,058	\$1,562,058	\$1,256,715	\$305,343	\$1,562,058
Protective Services	\$400	\$225,000	\$548,487	\$773,887	\$573,177	\$200,710	\$773,887
Residential-Group Homes	\$2,000,000	\$0	\$0	\$2,000,000	\$1,526,187	\$473,813	\$2,000,000
Residential-Apartments	\$2,384,000	\$0	\$0	\$2,384,000	\$1,910,508	\$473,492	\$2,384,000
Subtotals	\$10,957,400	\$744,000	\$10,883,300	\$22,584,700	\$17,554,715	\$5,029,985	\$22,584,700
NURSING HOME SERVICES							
Long Term Care	\$2,662,000	\$0	\$1,387,455	\$4,049,455	\$1,939,168	\$2,274,175	\$4,213,343
Legacies Dementia Care	\$6,918,000	\$0	\$2,564,458	\$9,482,458	\$5,354,638	\$4,127,820	\$9,482,458
Post Acute Care	\$1,935,000	\$0	\$306,044	\$2,241,044	\$1,850,412	\$1,196,777	\$3,047,189
Ventilator Care	\$3,879,000	\$0	\$641,824	\$4,520,824	\$3,149,924	\$1,468,421	\$4,618,345
Rehab and Ancillary Services	\$2,388,000	\$0	\$31,518	\$2,419,518	\$1,032,000	\$319,964	\$1,351,964
Subtotals	\$17,782,000	\$0	\$4,931,299	\$22,713,299	\$13,326,142	\$9,387,157	\$22,713,299
Pharmacy	\$4,700,000	\$0	\$427,887	\$5,127,887	\$4,500,738	\$627,149	\$5,127,887
Total NCHC	\$47,761,900	\$2,242,500	\$20,106,258	\$70,110,660	\$50,287,725	\$19,822,933	\$70,110,660



2019 GRANT FUNDING

	AODA BLOCK GRANT	MH BLOCK GRANT	IDP FUNDS	COORD. SERV. TEAM	CERTIFIED MH PROGRAM	85.21 GRANT	CHILDREN'S LTS	APS GRANT	BIRTH TO THREE FUNDING	TOTAL GRANT
MARATHON COUNTY-DIRECT SERVICES										
Outpatient Services	\$212,000		\$143,000							\$355,000
Community Treatment-Adult		\$51,000			\$160,000					\$211,000
Community Treatment-Youth				\$60,000	\$160,000					\$220,000
Day Services										\$0
Clubhouse										\$0
Aquatic Services										\$0
Demand Transportation						\$237,500				\$237,500
Subtotals	\$212,000	\$51,000	\$143,000	\$60,000	\$320,000	\$237,500	\$0	\$0	\$0	\$1,023,500
LANGLADE COUNTY-DIRECT SERVICES										
Outpatient Services	\$35,000		\$32,000							\$67,000
Community Treatment-Adult		\$8,000			\$14,000					\$22,000
Community Treatment-Youth				\$60,000	\$14,000		\$25,000			\$99,000
Day Services										\$0
Subtotals	\$35,000	\$8,000	\$32,000	\$60,000	\$28,000	\$0	\$25,000	\$0	\$0	\$188,000
LINCOLN COUNTY-DIRECT SERVICES										
Outpatient Services	\$50,000		\$43,000							\$93,000
Community Treatment-Adult		\$12,000			\$21,000					\$33,000
Community Treatment-Youth				\$60,000	\$21,000		\$80,000			\$161,000
Subtotals	\$50,000	\$12,000	\$43,000	\$60,000	\$42,000	\$0	\$80,000	\$0	\$0	\$287,000
SHARED SERVICES										
Inpatient										\$0
Contract Services (State Institute)										\$0
CBRF										\$0
Crisis Services										\$0
Lakeside Recovery (MMT)										\$0
Birth To Three									\$519,000	\$519,000
Protective Services								\$225,000		\$225,000
Residential-Group Homes										\$0
Residential-Apartments										\$0
Subtotals	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$225,000	\$519,000	\$744,000
NURSING HOME SERVICES										
Long Term Care										\$0
Legacies Dementia Care										\$0
Post Acute Care										\$0
Ventilator Care										\$0
Rehab and Ancillary Services									\$0	\$0
Subtotals	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Pharmacy										\$0
Total NCHC	\$297,000	\$71,000	\$218,000	\$180,000	\$390,000	\$237,500	\$105,000	\$225,000	\$519,000	\$2,242,500

2019 FUNDING BY OTHER SOURCES

	OWI SURCHARGES	COP	DVR	CONTRACT SERVICES	WIMCR	CCS RECONCILE	SUPPL. PAYMENT	OTHER	ALLOCATED REVENUE	MARATHON CO. MATCH (MAINT.)	BASE COUNTY ALLOCATION	COUNTY APPRO- PRIATION	TOTAL OTHER FUNDING
MARATHON COUNTY-DIRECT SERVICES													
Outpatient Services	\$110,000				\$5,000			\$10,000	\$80,441	\$64,420	\$348,423		\$618,284
Community Treatment-Adult				\$10,000		\$30,000	\$448,000			\$4,966	\$20,091	\$80,000	\$593,057
Community Treatment-Youth				\$5,000			\$40,000			\$3,613	\$20,081		\$68,694
Day Services/Prevocational				\$50,000					\$108,000		\$75,254		\$233,254
Clubhouse			\$37,000					\$85,000	\$1,099			\$92,000	\$215,099
Aquatic Services				\$10,000				\$100,000	\$25,315	\$139,148		\$342,345	\$616,808
Demand Transportation					\$170,000						\$1,235		\$171,235
Subtotals:	\$110,000	\$0	\$102,000	\$180,000	\$35,000	\$488,000	\$0	\$303,000	\$115,434	\$320,229	\$428,423	\$434,345	\$2,516,431
LANGLADE COUNTY-DIRECT SERVICES													
Outpatient Services	\$20,000				\$10,000				\$156,989		\$120,223		\$307,212
Community Treatment-Adult			\$3,000		\$5,000	\$210,000			\$1,293		\$9,000		\$228,293
Community Treatment-Youth	\$20,000					\$112,000			\$3,503				\$135,503
Day Services			\$42,000					\$15,000					\$57,000
Subtotals:	\$20,000	\$20,000	\$45,000	\$0	\$15,000	\$322,000	\$0	\$15,000	\$161,785	\$0	\$129,223	\$0	\$728,008
LINCOLN COUNTY-DIRECT SERVICES													
Outpatient Services	\$22,000				\$10,000			\$20,000	\$3,657		\$222,574	\$0	\$278,231
Community Treatment-Adult			\$5,000		\$5,000	\$250,000			\$3,279		\$9,000	\$0	\$272,279
Community Treatment-Youth	\$25,000					\$40,000			\$3,823			\$0	\$68,823
Subtotals:	\$22,000	\$25,000	\$5,000	\$0	\$15,000	\$290,000	\$0	\$20,000	\$10,759	\$0	\$231,574	\$0	\$619,333
SHARED SERVICES													
Inpatient								\$300,000	\$66,384	\$111,186	\$423,664	\$297,175	\$1,198,409
Hospital Psychiatry				\$270,000				\$50,000	\$13,104	\$10,738	\$871,734		\$1,215,576
Contract Services (State Institute)											\$0	\$897,427	\$897,427
CBRF					\$200,000				\$7,151	\$7,742			\$214,893
Crisis Services				\$40,000	\$320,000			\$250,000	\$27,513	\$22,046	\$165,710	\$1,705,185	\$2,530,454
Lakeside Recovery (MMT)						\$100,000			\$1,290	\$8,902	\$76,635	\$218,116	\$404,943
Outpatient Psychiatry				\$180,000	\$25,000	\$100,000			\$56,472	\$10,738	\$2,690,843		\$3,063,053
Birth To Three				\$12,000	\$50,000					\$33,654		\$714,404	\$810,058
Protective Services									\$9,310			\$539,177	\$548,487
AODA Day Treatment									\$0			\$0	\$0
Residential-Group Homes													\$0
Residential-Apartments													\$0
Subtotals:	\$0	\$0	\$0	\$502,000	\$595,000	\$200,000	\$0	\$600,000	\$171,914	\$214,316	\$4,228,586	\$4,371,484	\$10,883,300
NURSING HOME SERVICES													
Long Term Care							\$503,000		\$43,705	\$412,750		\$428,000	\$1,387,455
Legacies Dementia Care							\$1,039,000		\$42,318	\$411,140		\$1,072,000	\$2,564,458
Post Acute Care							\$141,000		\$27,153	\$137,891			\$306,044
Ventilator Care							\$417,000		\$86,932	\$137,892			\$641,824
Rehab and Ancillary Services										\$0	\$31,518		\$31,518
Subtotals	\$0	\$0	\$0	\$0	\$0	\$0	\$2,100,000	\$0	\$200,108	\$1,131,191	\$0	\$1,500,000	\$4,931,299
Pharmacy				\$400,000		\$0			\$8,000	\$19,887	\$0	\$0	\$427,887
TOTAL NCHC	\$152,000	\$45,000	\$152,000	\$1,082,000	\$660,000	\$1,300,000	\$2,100,000	\$938,000	\$668,000	\$1,685,623	\$5,017,805	\$6,305,831	\$20,106,258



2020 – 2021 FORECAST

The 2020 and 2021 Budget Forecasts are continuations of the 2019 budget. Some revenue growth can be projected within some programs due to rate increases. These forecasts also anticipate tax levy and base county allocation funding to remain level. To maintain service levels at the 2019 level, other revenue growth and expense management opportunities will need to continue to be explored in order to close the gaps.

2020 BUDGET FORECAST	TOTAL REVENUE	TOTAL EXPENSE	EXCESS REVENUE (EXPENSE)	BASE COUNTY ALLOCATION	COUNTY LEVY	EXCESS REVENUE (EXPENSE)
BEHAVIORAL HEALTH SERVICES						
Hospital	\$4,259,570	\$5,209,735	\$(950,165)	\$423,664	\$297,175	\$(229,326)
Hospital Psychiatry	\$853,842	\$1,744,690	\$(890,848)	\$871,734	\$-	\$(19,114)
Contract Services (State Institutes)	\$-	\$899,531	\$(899,531)	\$-	\$897,427	\$(2,104)
MMT	\$535,192	\$829,943	\$(294,751)	\$76,635	\$218,116	\$(0)
Crisis	\$565,559	\$2,717,283	\$(2,151,724)	\$165,710	\$1,705,185	\$(280,829)
CBRF	\$897,893	\$897,893	\$(0)	\$-	\$-	\$(0)
Subtotal	\$7,112,056	\$12,299,076	\$(5,187,020)	\$1,537,743	\$3,117,903	\$(531,374)
COMMUNITY SERVICES						
Outpatient	\$3,007,507	\$3,926,338	\$(918,831)	\$691,220	\$-	\$(227,611)
Day Treatment	\$-	\$-	\$-	\$-	\$-	\$-
Psychiatry	\$1,256,210	\$4,055,087	\$(2,798,877)	\$2,690,843	\$-	\$(108,034)
Community Treatment-Adult	\$5,207,629	\$5,305,629	\$(98,000)	\$98,000	\$-	\$0
Community Treatment-Youth	\$6,686,020	\$6,686,020	\$0	\$-	\$-	\$0
Clubhouse	\$521,099	\$613,099	\$(92,000)	\$-	\$92,000	\$(0)
Subtotal	\$16,678,465	\$20,586,173	\$(3,907,708)	\$3,480,063	\$92,000	\$(335,645)
COMMUNITY LIVING						
Day Services	\$1,834,254	\$1,932,601	\$(98,347)	\$-	\$-	\$(98,347)
Residential Services-Apartment	\$2,384,000	\$2,384,000	\$0	\$-	\$-	\$0
Residential Services-Group Homes	\$2,000,000	\$2,000,000	\$(0)	\$-	\$-	\$(0)
Subtotal	\$6,218,254	\$6,316,601	\$(98,347)	\$-	\$-	\$(98,347)
MOUNT VIEW CARE CENTER:						
Daily Services	\$18,975,781	\$21,771,925	\$(2,796,144)	\$-	\$1,500,000	\$(1,296,144)
Rehab and Ancillary Services	\$2,534,518	\$1,238,374	\$1,296,144	\$-	\$-	\$1,296,144
Subtotal	\$21,510,299	\$23,010,299	\$(1,500,000)	\$-	\$1,500,000	\$0
Pharmacy	\$5,183,887	\$5,183,887	\$-	\$-	\$-	\$-
OTHER SERVICES						
Birth To Three	\$847,654	\$1,606,639	\$(758,985)	\$-	\$714,404	\$(44,581)
Protective Services	\$234,710	\$781,372	\$(546,662)	\$-	\$539,177	\$(7,485)
Demand Transportation	\$445,235	\$445,235	\$(0)	\$-	\$-	\$(0)
Aquatic	\$801,463	\$1,164,291	\$(362,828)	\$-	\$342,345	\$(20,483)
Subtotal	\$2,329,062	\$3,997,537	\$(1,668,475)	\$-	\$1,595,926	\$(72,548)
TOTALS	\$59,032,023	\$71,393,572	\$(12,361,549)	\$5,017,806	\$6,305,829	\$(1,037,913)
Interest Income						\$275,000
Excess Revenue (Expense)						\$(762,913)

2020 – 2021 FORECAST

2021 BUDGET FORECAST	TOTAL REVENUE	TOTAL EXPENSE	EXCESS REVENUE (EXPENSE)	BASE COUNTY ALLOCATION	COUNTY LEVY	EXCESS REVENUE (EXPENSE)
BEHAVIORAL HEALTH SERVICES						
Hospital	\$4,274,570	\$5,310,178	\$(1,035,608)	\$423,664	\$297,175	\$(314,769)
Hospital Psychiatry	\$858,842	\$1,776,557	\$(917,715)	\$871,734	\$-	\$(45,981)
Contract Services (State Institutes)	\$-	\$901,416	\$(901,416)	\$-	\$897,427	\$(3,989)
MMT	\$535,192	\$835,097	\$(299,905)	\$76,635	\$218,116	\$(5,154)
Crisis	\$565,559	\$2,804,254	\$(2,238,695)	\$165,710	\$1,705,185	\$(367,800)
CBRF	\$897,893	\$905,639	\$(7,746)	\$-	\$-	\$(7,746)
Subtotal	\$7,132,056	\$12,533,141	\$(5,401,085)	\$1,537,743	\$3,117,903	\$(745,439)
COMMUNITY SERVICES						
Outpatient	\$3,007,507	\$4,107,891	\$(1,100,384)	\$691,220	\$-	\$(409,164)
Day Treatment	\$-	\$-	\$-	\$-	\$-	\$-
Psychiatry	\$1,266,210	\$4,135,780	\$(2,869,570)	\$2,690,843	\$-	\$(178,727)
Community Treatment-Adult	\$5,317,629	\$5,415,629	\$(98,000)	\$98,000	\$-	\$0
Community Treatment-Youth	\$6,686,020	\$6,686,020	\$(0)	\$-	\$-	\$(0)
Clubhouse	\$533,099	\$625,099	\$(92,000)	\$-	\$92,000	\$(0)
Subtotal	\$16,810,465	\$20,970,420	\$(4,159,955)	\$3,480,063	\$92,000	\$(587,892)
COMMUNITY LIVING						
Day Services	\$1,849,254	\$1,997,914	\$(148,660)	\$-	\$-	\$(148,660)
Residential Services-Apartment	\$2,384,000	\$2,449,120	\$(65,120)	\$-	\$-	\$(65,120)
Residential Services-Group Homes	\$2,000,000	\$2,000,000	\$(0)	\$-	\$-	\$(0)
Subtotal	\$6,233,254	\$6,447,034	\$(213,780)	\$-	\$-	\$(213,780)
MOUNT VIEW CARE CENTER:						
Daily Services	\$19,116,781	\$22,240,472	\$(3,123,691)	\$-	\$1,500,000	\$(1,623,691)
Rehab and Ancillary Services	\$2,634,518	\$1,242,546	\$1,391,972	\$-	\$-	\$1,391,972
Subtotal	\$21,751,299	\$23,483,018	\$(1,731,719)	\$-	\$1,500,000	\$(231,719)
Pharmacy	\$5,288,887	\$5,288,887	\$(0)	\$-	\$-	\$(0)
OTHER SERVICES						
Birth To Three	\$847,654	\$1,642,491	\$(794,837)	\$-	\$714,404	\$(80,433)
Protective Services	\$234,710	\$792,936	\$(558,226)	\$-	\$539,177	\$(19,049)
Demand Transportation	\$450,235	\$450,235	\$(0)	\$-	\$-	\$(0)
Aquatic	\$801,463	\$1,189,794	\$(388,331)	\$-	\$342,345	\$(45,986)
Subtotal	\$2,334,062	\$4,075,456	\$(1,741,394)	\$-	\$1,595,926	\$(145,467)
TOTALS	\$59,550,023	\$72,797,956	\$(13,247,933)	\$5,017,806	\$6,305,829	\$(1,924,297)
Interest Income						\$300,000
Excess Revenue (Expense)						\$(1,624,297)



2019 UNIT COSTS

The following is additional information showing the total cost per unit for each program, which is direct cost and overhead. In the event that a program is not included, the total unit cost for all other programs would increase as overhead would be reallocated.

	TOTAL EXPENSES	BILLABLE UNIT	UNIT HOURS/DAYS	UNIT TOTAL EXP	COUNTY (LEVY) APPROPRIATION	APPROPRIATION (LEVY) PER UNIT
BEHAVIORAL HEALTH SERVICES						
Hospital (without Residency Costs)	\$5,992,985	5,110	Days	\$1,172.80	\$297,175	\$58.16
CBRF	\$867,893	32,850	Hours	\$26.42	\$0	\$0.00
Crisis Services	\$2,686,454	6,600	Hours	\$407.04	\$1,705,185	\$258.36
Medically Monitored Treatment (MMT)	\$799,943	33,215	Hours	\$24.08	\$218,116	\$6.57
COMMUNITY SERVICES						
Wausau Outpatient	\$2,249,284	19,620	Hours	\$114.64	\$0	\$0.00
Merrill Outpatient	\$651,231	4,800	Hours	\$135.67	\$0	\$0.00
Antigo Outpatient	\$798,212	9,300	Hours	\$85.83	\$0	\$0.00
Psychiatry Services	\$3,947,053	6,600	Hours	\$598.04	\$0	\$0.00
Wausau Community Treatment	\$7,736,751	80,593	Hours	\$96.00	\$0	\$0.00
Merrill Community Treatment	\$2,371,102	20,400	Hours	\$116.23	\$0	\$0.00
Antigo Community Treatment	\$1,883,796	15,406	Hours	\$122.28	\$0	\$0.00
Clubhouse	\$596,099	8,290	Hours	\$71.91	\$92,000	\$11.10
COMMUNITY LIVING SERVICES						
Wausau ADS	\$608,120	58,800	Hours	\$10.34	\$0	\$0.00
Wausau PreVoc	\$882,133	69,000	Hours	\$12.78	\$0	\$0.00
Antigo ADS	\$326,000	29,000	Hours	\$11.24	\$0	\$0.00
Residential-Andrea	\$494,694	2,890	Days	\$171.17	\$0	\$0.00
Residential-Chadwick	\$498,518	2,529	Days	\$197.12	\$0	\$0.00
Residential-Bissell	\$504,758	2,890	Days	\$174.66	\$0	\$0.00
Residential-Heather	\$502,030	2,529	Days	\$198.51	\$0	\$0.00
Residential-Riverview	\$623,189	9,394	Days	\$66.34	\$0	\$0.00
Residential-Jelinek	\$774,982	7,226	Days	\$107.25	\$0	\$0.00
Residential-Forest St	\$608,090	3,252	Days	\$186.99	\$0	\$0.00
Residential-Fulton	\$377,739	2,888	Days	\$130.80	\$0	\$0.00
OTHER SERVICES						
Birth To Three	\$1,562,058	10,420	Hours	\$149.91	\$714,404	\$68.56
Demand Transportation	\$438,235	13,700	Trips	\$31.99	\$0	\$0.00
Aquatic Services	\$1,143,808	4,400	Hours	\$259.96	\$342,345	\$77.81
NURSING HOME SERVICES						
Long Term Care	\$4,213,343	14,600	Days	\$288.59	\$428,000	\$29.32
Legacies	\$9,482,458	35,405	Days	\$267.83	\$1,072,000	\$30.28
Post Acute Care	\$3,047,189	8,395	Days	\$362.98	\$0	\$0.00
Ventilator Services	\$4,618,345	9,125	Days	\$506.12	\$0	\$0.00



HUMAN SERVICES OPERATIONS

2019 BUDGET BY PROGRAM

North Central Health Care's Human Services Operations include shared and direct community services programs. These services are the core services for which North Central Health Care was created. The State of Wisconsin offers direction on programming on varying levels in discharging the counties' delegated primary responsibility for the prevention or amelioration of mental disabilities, including but not limited to mental illness, developmental disabilities, alcoholism and drug abuse. There are a number of programs contained within the Human Services Operations grouped into broad departments to deliver community services programs.

Human Services Operations Management38

Human Services Operations Administration39

Behavioral Health Services

Emergency and Crisis Services 40-42
 Inpatient Psychiatric Hospital 43-44
 Contracted Services.....45
 Crisis Community-Based Rehabilitation Facility (CBRF)46
 Lakeside Recovery Medically Monitored Treatment (MMT).....47

Community Behavioral Health Services

Clubhouse 48-49
 Community Treatment Adult – (CCS, CSP, IPS) 50-51, 53
 Community Treatment Youth – (CCS, CLTS) 52-53
 Outpatient Services 54-56

Community Living

Administration.....57
 Day Services 58-59
 Residential – Community-Based Rehabilitation Facilities (CBRF).....60
 Residential – Supported Apartments.....61

Other Human Services Operations

Adult Protective Services 62-63
 Aquatic Therapy.....64
 Birth to Three 65-66
 Demand Transportation67



HUMAN SERVICES OPERATIONS

■ MANAGEMENT TEAM



Laura Scudiere
Human Services
Operations Executive



Kim Moore
Behavioral Health
Services and Crisis
Clinical Manager



Trina Sorce
Inpatient
Nurse Manager



Kathleen Buckli
Crisis CBRF Manager



Daniel Shine
Lakeside Recovery
Manager



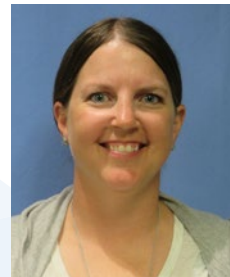
Michelle Hazuka
Community Corner
Clubhouse Director



Janelle Hintz
Outpatient and
Community Treatment
Director



Michelle Carr
Community
Treatment Manager -
Marathon County



Haley Ellenbecker
Community
Treatment Manager -
Langlade/Lincoln County



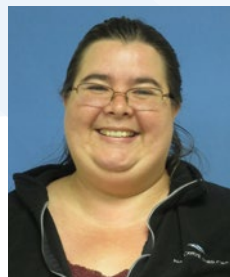
Gina Lenz
Community
Treatment Manager -
Youth Services



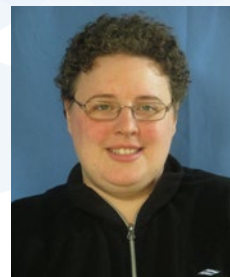
Kim Van Ermen
Outpatient Clinical
Operations Manager



Toni Kellner
Director of
Community Living



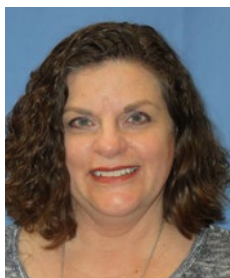
Jessica Pyke
Adult Day Services/
Prevocational Services
Coordinator -
Langlade County



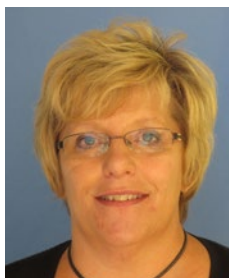
Jennifer Rothmeyer
Adult Day Services/
Prevocational Services
Coordinator -
Marathon County



Cheryl Zeinert
Group Homes
Manager



Brenda Christian
Adult Protective
Services Director



Brenda Budnik
Aquatic Services
Director



Jennifer McKenzie
Transportation
Manager

HUMAN SERVICES OPERATIONS

■ HUMAN SERVICES OPERATIONS ADMINISTRATION

DESCRIPTION

The overall administrative oversight for all Human Services Operations is consolidated into a separate program and is allocated out to each program based on direct expenses. Human Service Operations oversight includes all developmental disability, mental health, and aquatic programming.

KEY ACCOMPLISHMENTS

- Structured operations for 2018 programmatic growth in Community Treatment, Crisis Assessment Response Team, Linkage and Follow up, MMT, CBRF, and Outpatient services.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Human Services Operations			
Executive	1.0	1.0	1.0
Quality Director	0.0	1.0	0.0
TOTAL	1.0	2.0	1.0

BUDGET HIGHLIGHTS

The Human Services Operations Administration budget reflects the Human Services Operations Executive position. The Quality Director position has been reclassified and moved back to Quality. The program also reflects a decreases in contract services and a Medical Staff Relations Director is being added to the Psychiatry budget.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Other Revenue	-	-	-
State Addendum Grants	-	-	-
TOTAL REVENUE	-	-	-
Salaries	144,999	253,540	153,957
Benefits	55,316	92,454	57,187
Other Direct Expenses	37,641	371,800	258,323
TOTAL DIRECT EXPENSES	237,956	717,794	469,467



HUMAN SERVICES OPERATIONS

BEHAVIORAL HEALTH SERVICES

Behavioral Health Services includes Emergency and Crisis Services, Inpatient Psychiatric Hospital, Contract Services (Diversion), Psychiatry Residency Program, Community Based Rehabilitation Facility (CBRF) and Lakeside Recovery Medically Monitored Treatment (MMT). These programs are some of the most important and needed services in our community. Demand for these services has grown considerably and has created many financial and system pressures.

BEHAVIORAL HEALTH SERVICES

■ *Emergency and Crisis Services*

DESCRIPTION

North Central Health Care Emergency & Crisis Services is a state certified program offering services to residents of Marathon, Langlade and Lincoln Counties. Services include a 24-hour Crisis Center, a 24-hour Hotline, Mobile Crisis response team and Youth Crisis Stabilization. Individualized services are provided in the least restrictive manner utilizing natural and peer supports whenever possible. The focus of the program is to prevent and de-escalate crisis situations, while also offering community-based treatment and support options. The program is equipped with resources to assess clients and determine their needs, which ranges from community supports and outpatient counselor to inpatient hospitalization.

Crisis Center: 24-hour specialized assistance with urgent mental health, developmental disability or substance abuse needs and may also act as an in-house, short-term Crisis Stabilization Unit. Support will be provided to stabilize the conditions of acute mental health symptoms. Acting as a triage center, much of what the Crisis Center does is get the individual to the location or access to services that they need to alleviate their crisis.

Crisis & Suicide Prevention Hotline: The Crisis & Suicide Prevention Hotline is confidential and anonymous. Specially trained staff provide emergency and crisis counseling over the phone, including intervention. Assistance is provided 24 hours a day, 7 days a week for emotional, mental health, suicide prevention or substance abuse situations.

Mobile Crisis: The staff of Crisis Services are trained as a state certified Mobile Crisis Unit that travels to avert crises and de-escalate situations. Assessments and interventions by the Crisis Team are available on-site at the North Central Health Care offices in Wausau, Antigo and Merrill, or out in the community. The Crisis teams are made up of trained personnel in the area of crisis intervention and utilize physicians, nurses, law enforcement personnel, psychiatrists, mental health technicians, and other specially trained

staff. The team offers an assessment and assists with the disposition of the crisis situation. Disposition may include, but is not limited to, the following: inpatient psychiatric treatment, crisis bed placement, youth crisis bed, and other community placements. The team can also provide linkage and follow-up services with other community providers and agencies to ensure continuity of care.

Youth Crisis Stabilization: The Youth Crisis Services serves children and adolescents under the age of 18. Support is provided to stabilize the conditions of acute mental health symptoms, as well as short-term respite and one-on-one counseling. Monitoring and support is provided in a separate area designated for youth on the Wausau Campus.

Crisis Assessment Response Team (CART): This new program teams North Central Health Care crisis workers with law enforcement partners to respond to community needs of mental health concern. Two teams serve Marathon County through this innovative partnership model.

Linkage and Follow-up: Individuals who are on commitments or settlement agreements are case monitored by Linkage Coordinators to ensure that they receive the best supportive care and are able to meet the terms of their legal agreements. This program also works closely with Comprehensive Community Services to assign case managers to eligible participants.

POPULATION SERVED

All ages and legal status are served by the Crisis Center Services. Anyone and everyone who is having a crisis related to mental illness, substance abuse or suicide may be served in some capacity. Elderly, developmentally disabled individuals, families, children, and adults may all be served in the Crisis Center. The Crisis Center also provides referrals to other organizations when needs are related to situations such as job loss, spousal abuse, housing and other life issues.

BEHAVIORAL HEALTH SERVICES

■ Emergency and Crisis Services

REGULATIONS

Crisis Services are certified by the Department of Health Services, Chapter DHS 34.

HOURS/DAYS OF SERVICE

Mobile Crisis Services are available for residents in: Lincoln, Langlade and Marathon Counties: 24 hours/day, 7 days/week, 365 days/year

KEY ACCOMPLISHMENTS

- Established Crisis Assessment Response Team and as of June 2018 the teams have responded to 304 crisis calls
- Established Linkage and Follow up Program providing services to over 100 clients on commitment and settlement agreements
- Addition of psychiatric nurse practitioner to crisis services
- Year to date June 2018 crisis has seen an increase of 200 clients over the same time in 2017.

BUDGET HIGHLIGHTS

The 2019 budget for Emergency and Crisis Services includes an additional 2.4 FTEs for Crisis Professionals due to the continued increase in demand. The Security Officer position is taken out as this service and is provided through a contract.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Manager	1.0	1.0	1.0
Court Liaison	1.0	1.0	1.0
Crisis Service Professionals	13.6	17.6	20.0
RN Case Manager	1.0	1.0	1.0
Law Enforcement Liaison	0.5	0.5	0.5
Transportation Staff	4.60	1.0	1.0
Youth Crisis Workers	4.20	4.2	4.2
Security Officer	-	0.8	-
TOTAL	25.90	27.10	28.7



BEHAVIORAL HEALTH SERVICES

■ Emergency and Crisis Services

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	100,000	128,000	156,000
WIMCR	100,000	120,000	320,000
Base County Allocation	896,071	946,476	165,710
County Appropriation	1,154,066	1,225,461	1,705,185
Allocated Revenue	15,652	28,000	27,512
Contract Services	51,000	51,000	40,000
Other Revenue	-	150,000	250,000
Marathon County Match (Maintenance)	10,145	22,046	22,046
TOTAL REVENUE	\$2,326,934	\$2,670,983	\$2,686,454
Salaries	1,116,572	1,262,254	1,303,787
Benefits	425,967	460,282	484,290
Other Direct Expenses	37,580	85,130	81,318
TOTAL DIRECT EXPENSES	\$1,580,119	\$1,807,666	\$1,869,395

HUMAN SERVICES OPERATIONS

BEHAVIORAL HEALTH SERVICES

■ *Inpatient Psychiatric Hospital*

DESCRIPTION

North Central Health Care provides inpatient behavioral health services through our **Inpatient Psychiatric Hospital** for individuals who have severe psychiatric and detoxification needs. The Inpatient Psychiatric Hospital is an adult unit that provides assessment, evaluation and treatment of mental health and psychiatric needs in addition to medication management to ensure stabilization of an acute mental health crisis. The Inpatient Psychiatric Hospital offers psychiatric and alcohol detoxification services on both a voluntary and involuntary basis in a 16-bed unit located on the Wausau Campus.

Within the umbrella of inpatient service offerings, NCHC also has **Contracted Services** and the Ambulatory Detoxification Program. Contracted Services includes the expenses related to inpatient hospitalization in other institutes for several reasons including but not limited to: unit capacity limits, age and stability of patients.

The North Central Health Care **Ambulatory Detoxification Program** is an outpatient model for individuals requiring detoxification from drugs and alcohol. The program is unique in that it provides many of the benefits of inpatient detoxification but in a setting that is more cost effective and less restrictive. While the program is technically an Outpatient Program, it is housed within the Inpatient Psychiatric Hospital because of the cross utilization of staff between both programs to achieve maximum efficiency.

The Ambulatory Detoxification Program consists of a medically managed, monitored and structured detoxification services provided on an outpatient, voluntary basis and delivered by a physician or other service personnel acting under the supervision of a physician. Management and monitoring of intoxication withdrawal will be performed by nursing staff, including assessment and dispensing of medications to assist with withdrawal and referrals for ongoing addiction and substance abuse treatment. The service will generally be limited to 48 hours or less but may extend in duration for specific cases.

Psychiatric Residency Program: North Central Health Care continues its educational partnership with the Medical College of Wisconsin to provide an inpatient and crisis experience for the psychiatric residency program. North Central Health Care is one partner out of various site rotations located in

central Wisconsin, which is charged with providing experiences attached to certain programs or patient populations. In 2018, three new residents began their residency with Inpatient and Emergency rotations within the Behavioral Health Services Department. Rotations are four months long and give each participating resident the ability to experience the service under the supervision of an attending physician. Residents are chosen from hundreds of applicants during a challenging interview process with Medical College of Wisconsin Faculty and supervising physicians. After the interview, residents are “matched” with the sites that will provide them the best educational opportunity.

POPULATION SERVED

All individuals in Marathon, Lincoln and Langlade Counties with severe psychiatric and detoxification needs are served. The Inpatient Psychiatric Hospital provides care for those 18 and older. For those under the age of 18, or other individuals we are unable to serve locally, appropriate placement and inpatient care services can be arranged through the Crisis Center as needed using Contracted Services.

NCHC's Ambulatory Detoxification Program provides care for individuals age 18 and older from Marathon, Lincoln and Langlade Counties in need of detoxification for alcohol and opiate withdrawal in an ambulatory outpatient setting, and who do not require general hospital services for alcohol poisoning or who are not severely medically compromised.

REGULATIONS

The hospital is licensed by the State of Wisconsin. Additionally, the hospital is certified by the Department of Health Services, Chapter DHS 124 & Chapter DHS 75 (medical detoxification). Compliance with the Center for Medicare/Medicaid Services Conditions of Participation is also required.

Ambulatory Detoxification services are certified by the Department of Health Services under Chapter DHS 75.

HOURS/DAYS OF SERVICE

24 hours/day, 7 days/week, 365 days/year



BEHAVIORAL HEALTH SERVICES

■ Inpatient Psychiatric Hospital

KEY ACCOMPLISHMENTS

- One full year of the residency program was completed, with three residents successfully completing rotations in Emergency and Inpatient Psychiatry
- Addition of full time psychologist in 2018 to assist with additional therapy and programing development on the Inpatient unit.

BUDGET HIGHLIGHTS

The Psychiatry Residency Program continues to grow as the program moves into another year. Additional stipend support is being added as well as additional Psychiatry Supervision. A 1.0 FTE APNP is being added to provide additional services to the Hospital. In addition, 3.6 FTE's for RN's are being added to provide more nursing in the Hospital. An Administrative Support position is also being added to assist the Hospital staff.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Director	1.0	1.0	1.0
Master Social Worker	1.0	1.0	1.0
Bachelor Social Worker	1.0	1.0	1.0
Nurse Practitioner/APNP	1.4	1.4	2.4
Psychiatrist	1.0	2.0	2.0
Occupational Therapist			
Assistant	1.0	1.4	1.0
Nurse Manager	1.0	1.0	1.0
RN	9.77	9.77	13.37
LPN	1.0	1.0	1.0
Behavioral Health Tech	6.3	6.3	6.3
Medical Scribe	0.5	1.0	1.0
Substance Abuse Counselor	-	1.0	1.0
Psychologist	-	.80	.80
Administrative Support	-	-	1.0
Medical Staff Relations Director -		-	0.5
TOTAL	25.97	28.67	34.37

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	4,000,000	4,375,000	4,252,000
Base County Allocation	400,000	1,097,236	1,295,398
County Appropriation	367,684	278,552	297,175
Allocated Revenue	28,094	31,904	79,488
Other Revenue	-	125,000	620,000
Marathon County Match (Maintenance)	100,589	121,924	121,924
TOTAL REVENUE	\$4,896,367	\$6,029,616	\$6,665,985
Salaries	2,044,163	2,494,360	2,784,384
Benefits	779,838	909,571	1,034,256
Other Direct Expenses	860,219	1,064,645	1,410,018
TOTAL DIRECT EXPENSES	\$3,684,220	\$4,468,576	\$5,228,658

HUMAN SERVICES OPERATIONS

BEHAVIORAL HEALTH SERVICES

■ Contracted Services

DESCRIPTION

For all individuals in Marathon, Lincoln and Langlade Counties under the age of 18, or other individuals NCHC is unable to serve locally for inpatient care, appropriate placement and inpatient care services can be arranged through the Crisis Center as needed using Contracted Services.

BUDGET HIGHLIGHTS

The budget remains consistent with 2018.

HOURS/DAYS OF SERVICE

24 hours/day, 7 days/week, 365 days/year

KEY ACCOMPLISHMENTS

- Continued to provide a transportation program serving individuals in a trauma-informed setting for transport between facilities.
- Creation of a diversion task force consisting of a multi-disciplinary team to look at current diversion processes and aid in decreasing the number of individuals placed out of county.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	-	-	
Base County Allocation	-	99,651	-
County Appropriation	1,118,839	806,268	897,427
TOTAL REVENUE	\$1,118,839	\$905,919	\$897,427
Other Direct Expenses	1,065,000	800,000	800,000
TOTAL DIRECT EXPENSES	\$1,065,000	\$800,000	\$800,000



HUMAN SERVICES OPERATIONS

BEHAVIORAL HEALTH SERVICES

■ Crisis Community Based Residential Facility (CBRF)

DESCRIPTION

Crisis CBRF is a therapeutic mental health and substance abuse stabilization program operated 24-hours a day in a voluntary setting. This 12 bed program provides observation, medication monitoring, basic case management and planned activities under the supervision of specially trained CBRF staff.

POPULATION SERVED

This program serves the needs of individuals with mental health or substance abuse disorders as an alternative for those who do not meet criteria for emergency inpatient admission or as a step down from emergency inpatient services.

REGULATIONS

The Crisis CBRF is licensed under Wisconsin Chapter 83 CBRF Regulations with a Class C Semi-ambulatory Status. A Class C Semi-ambulatory CBRF may serve only residents who are ambulatory or semi-ambulatory, but one or more of whom are not physically or mentally capable of responding to an electronic fire alarm and exiting the facility without help or verbal or physical prompting.

HOURS OF SERVICE

24 hours/day, 7 days/week, 365 days/year

KEY ACCOMPLISHMENTS

- Expanded in 2018 from 6 beds to 12.
- Successful separation of MMT and Crisis CBRF units to allow for an additional 6 CBRF beds.
- Addition of CBRF Nurse to assist in discharge planning as well as skill development and programming for clients staying on the Crisis CBRF.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Manager	0.5	1.0	1.0
Crisis Tech	1.86	4.0	5.75
Behavioral Health Tech	1.86	.80	.80
Master Social Worker	0.0	2.0	1.0
RN	0.0	.80	.80
TOTAL	4.22	8.6	9.35

BUDGET HIGHLIGHTS

The 2019 budget reflects the conversion of a social worker to 1.75 additional Crisis Techs. The program has expanded to 12 beds.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	638,000	860,000	653,000
WIMCR	100,000	140,000	200,000
County Appropriation	-	-	-
Allocated Revenue	4,636	3,841	7,151
Marathon County Match (Maintenance)	46,600	7,742	7,742
TOTAL REVENUE	\$789,236	\$1,011,583	\$867,893
Salaries	153,753	399,659	408,406
Benefits	58,656	145,736	151,702
Other Direct Expenses	17,829	40,875	46,746
TOTAL DIRECT EXPENSES	\$230,238	\$586,270	\$606,854

HUMAN SERVICES OPERATIONS

BEHAVIORAL HEALTH SERVICES

■ Lakeside Recovery Medically Monitored Treatment (MMT)

DESCRIPTION

Lakeside Recovery Medically Monitored Treatment is a 21-day substance abuse recovery program operated 24-hours a day in a community-based setting. This 14 bed program provides observation, medication monitoring, and treatment by a multi-disciplinary team under the supervision of a physician.

POPULATION SERVED

This program serves the needs of clients that meet a high level criteria for substance abuse and dependence under Wisconsin Chapter 75.11 regulations for Medically Monitored Treatment.

REGULATIONS

The MMT program is licensed under Wisconsin Chapter 83 CBRF Regulations with a Class C Semi-ambulatory Status. A Class C Semi-ambulatory CBRF may serve only residents who are ambulatory or semi-ambulatory, but one or more of whom are not physically or mentally capable of responding to an electronic fire alarm and exiting the facility without help or verbal or physical prompting.

HOURS OF SERVICE

24 hours/day, 7 days/week, 365 days/year

KEY ACCOMPLISHMENTS

- Expanded from a 6-bed unit to a 14-bed capacity in 2018
- Enhanced programming and medication oversight with the addition of a psychiatric nurse practitioner to BHS services

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Manager	0.5	1.0	1.0
Counselor	1.0	1.0	1.0
Registered Nurse	0.2	0.2	0.2
Behavioral Health Tech	1.86	.80	.80
Crisis Tech	1.86	4.8	4.8
Referral Coordinator	0.0	1.0	1.0
TOTAL	5.42	8.8	8.8

BUDGET HIGHLIGHTS

The 2019 budget includes the program being at 14 beds. This expansion occurred during 2018. The staffing was expanded during 2018 to meet the program expansion. Contract services has decreased as the services needed from advanced providers can be done internally.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Base County Allocation		54,124	76,635
Net Patient Services Revenue	165,000	486,000	395,000
County Appropriation	277,688	437,919	218,116
Allocated Revenue	2,325	1,743	1,290
Other Revenue	-	-	-
Marathon County Match (Maintenance)	46,600	8,902	8,902
CCS Reconciliation		10,000	10,000
TOTAL REVENUE	\$491,613	\$998,688	\$799,943
Salaries	217,164	428,007	356,004
Benefits	82,847	156,073	132,237
Other Direct Expenses	10,572	132,125	35,821
TOTAL DIRECT EXPENSES	\$310,583	\$716,205	\$524,062



HUMAN SERVICES OPERATIONS

COMMUNITY BEHAVIORAL HEALTH SERVICES

Community Behavioral Health Services includes Community Corner Clubhouse, Community Treatment-Adult (CCS, CSP, IPS), Community Treatment Youth (CCS, CLTS), Day Treatment and Outpatient Mental Health & Substance Abuse Services.

COMMUNITY BEHAVIORAL HEALTH SERVICES

■ Community Corner Clubhouse

DESCRIPTION

Community Corner Clubhouse assists adults with persistent mental illness and substance abuse challenges to realize their potential by providing them with a Clubhouse where they can meet friends, build self-confidence, learn valuable life skills and discover untapped talents. Community Corner Clubhouse is an internationally certified, psychosocial rehabilitation community that provides accessible, low cost services in a supportive environment. Clubhouse membership is voluntary and without time limits — offering members to choose the services they need when they need them.

The Clubhouse helps empower members by offering:

- Vocational support helping members' return to competitive employment by offering a variety of opportunities.
- Transitional Employment: Competitive, part-time employment that lasts 6-9 months.
- Supported Employment: Job development, job coaching, and long term support for members.
- Independent Employment: Assistance in sustaining long term employment.
- Educational opportunities: We partner with community adult educators to offer a variety of classes for members.
- Housing assistance: We help members find safe, affordable housing.
- Hope House is a local recovery residence that is a social, not medical, model for recovery living. This is different from a traditional transitional or halfway house. Hope House is a voluntary, time limited-term, residential program for Community Corner Clubhouse members experiencing psychiatric illness and/or psychological distress not requiring hospitalization who also have recovery needs. The end goal is to help develop life-long strategies to support recovery that will lead to independent living.

POPULATION SERVED

Marathon County Adults 18 and older with severe or persistent mental illness or a history of substance abuse.

REGULATIONS

The Clubhouse is accredited by Clubhouse International. Accredited Clubhouses are recognized as operating with a high level of compliance with the International Standards for Clubhouse Programs.

HOURS OF SERVICE

Monday: – Thursday: 8:00 am – 4:00 pm

Tuesday: 8:00 – 6:00 pm

Friday: 8:00 am – 3:00 pm

Holidays: 10:00 am – 2:00 pm

Monthly Evening Hours

KEY ACCOMPLISHMENTS

- Celebrated its 2nd year anniversary of Hope House, and had two successful graduates.
- Clubhouse served a total of 201 members last year.
- Community Corner Clubhouse completed 5 health screens per month, which amounts to over 60 per year. Health screens assess level of need and support additional service coordination.
- Clubhouse provided 565 hours per month (6,780 hours per year) in service coordination which includes mental health, employment, or recovery coordination.
- Clubhouse provided supported employment for 40 members (2017).
- 87% of Clubhouse members worked an average of 15 hours / week.

COMMUNITY BEHAVIORAL HEALTH SERVICES

■ Community Corner Clubhouse

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Manager	1.0	1.0	1.0
Employment Specialist	1.0	1.0	1.0
Clubhouse Generalist	3.0	3.0	3.0
Recovery Coach	0.0	.5	1.0
Case Manager	-	-	1.0
TOTAL	5.0	5.5	7.0

BUDGET HIGHLIGHTS

The 2019 budget includes the addition of a 1.0 FTE Case manager and a 0.5 Clubhouse Generalist. Additional revenue supports the addition of those positions.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	208,000	284,000	381,000
DVR	20,000	20,000	37,000
County Appropriation	95,000	92,000	92,000
Allocated Revenue	2,597	751	1,099
Other Revenue	121,500	94,500	85,000
Marathon County Match (Maintenance)	-	-	-
TOTAL REVENUE	\$447,097	\$491,251	\$596,099
Salaries	220,397	246,203	309,892
Benefits	84,080	89,778	115,109
Other Direct Expenses	59,918	62,543	67,665
TOTAL DIRECT EXPENSES	\$364,395	\$398,524	\$492,666



COMMUNITY BEHAVIORAL HEALTH PROGRAMS

■ Community Treatment Adult (CCS, CSP, IPS)

The descriptions on pages 50-51 include information for Community Treatment Adult Services. Community Treatment Youth Services are described separately on page 52. The Budget Highlights, Staffing and Budget Summary information shown on page 53 contains data that is combined back into one overall Community Treatment program. In future years, the budget information will be separated to reflect the separate programs.

COMPREHENSIVE COMMUNITY SERVICES
ADULT DESCRIPTION

Comprehensive Community Services (CCS) helps individuals with substance abuse, mental health issues or co-occurring disorders achieve their potential and establish a meaningful life within the community by providing individualized services that fit a person’s lifestyle, are recovery-oriented, flexible and empowering.

POPULATION SERVED

Comprehensive Community Services Adult serves adults, who are coping with substance abuse, mental health issues or co-occurring disorders. Treatment, rehabilitation and support services have been specifically designed for adults and individuals with high-intensity needs or co-occurring disorders.

REGULATIONS

Comprehensive Community Services is a certified program and operates under the Department of Health Services, DHS Chapter 36, Comprehensive Community Services for Persons with Mental Disorders and Substance-Use Disorders.

HOURS OF SERVICE

Monday – Friday, 8:00 am – 4:30 pm

COMMUNITY SUPPORT PROGRAM (CSP)
DESCRIPTION

Community Support Program (CSP) helps individuals with mental health issues build a path to recovery that is accessible, unique to the individual and flexible – one that provides support, treatment and rehabilitation in settings that best suit the individual – be it a community, home or work setting. We also provide a Supported Apartment Program that offers individuals the opportunity to reside in their own apartment while receiving 24/7 access to our Community Support services.

POPULATION SERVED

The Community Support Program serves individuals 18 years and older, who are coping with substance abuse, mental health issues or co-occurring disorders. Treatment, rehabilitation and support services have been specifically designed for adults and individuals with high-intensity needs or co-occurring disorders.

REGULATIONS

CSP is a certified program and operates under the Wisconsin Department of Health Services, Chapter

DHS 63, Community Support Programs for Chronically Mentally Ill Persons.

HOURS OF SERVICE

Monday – Friday, 8:00 am – 4:30 pm

COMMUNITY BEHAVIORAL HEALTH SERVICES

■ Community Treatment Adult (CCS, CSP, IPS)

INDIVIDUAL PLACEMENT & SUPPORT (IPS) DESCRIPTION

Individual Placement & Support (IPS) or Supported Employment was developed to help promote the recovery of people who have a mental illness by helping them find and keep jobs that allow them to utilize their skills. Employment is a primary goal of most people with serious mental illness. It has been proven that finding suitable work can help people with mental illness feel empowered, value themselves more, and drastically reduce mental health symptoms. IPS employment specialists offer long-term, ongoing support to employers and their new employee, either on- or off-site. On-site job coaching for orientation, training, or job tasks can be utilized until the employee and employer are both comfortable.

POPULATION SERVED

Individual Placement & Support serves adults 18 and older in Marathon, Lincoln and Langlade Counties with mental illness.

REGULATIONS

Individual Placement & Support does not have any specific regulatory requirements. It follows best practice for such services and any contractual requirements.

HOURS OF SERVICE

Monday – Friday, 8:00 am – 4:30 pm

KEY ACCOMPLISHMENTS OF COMMUNITY TREATMENT ADULT (CCS, CSP, IPS)

- Improved and added case management staff, enhancing the management structure to meet increasing client volumes.
- Restructured by adding two managers and four team leads to support the increase of 24 FTE in case management.
- In 2017 the average number of admissions each quarter was 38 individuals. In 2018, there have been 36 admissions in the first quarter and 57 admissions in the second quarter.

STAFFING, BUDGET HIGHLIGHTS & SUMMARY

See page 53.



COMMUNITY BEHAVIORAL HEALTH PROGRAMS

■ Community Treatment Youth (CCS, CLTS)

COMPREHENSIVE COMMUNITY SERVICES YOUTH DESCRIPTION

Comprehensive Community Services (CCS) helps individuals with substance abuse, mental health issues or co-occurring disorders achieve their potential and establish a meaningful life within the community by providing individualized services that fit a person's lifestyle, are recovery-oriented, flexible and empowering.

POPULATION SERVED

Comprehensive Community Services Youth serves individuals under 18 years of age who are coping with substance abuse, mental health issues or co-occurring disorders. Treatment, rehabilitation and support services have been specifically designed for youth and individuals with high-intensity needs or co-occurring disorders.

REGULATIONS

Comprehensive Community Services is a certified program and operates under the Department of Health Services, DHS Chapter 36, Comprehensive Community Services for Persons with Mental Disorders and Substance-Use Disorders.

HOURS OF SERVICE

Monday – Friday, 8:00 am – 4:30 pm

CHILDREN'S LONG TERM SUPPORT (CLTS) DESCRIPTION

North Central Health Care Children's Long Term Support (CLTS) provides case management and funding for children who have severe developmental, physical or emotional disabilities. Funding through CLTS provides skilled professionals who work with families to provide adaptive aids, day services, teach daily living skills and offer in-home treatment therapies that help each child realize their greatest potential. CLTS provides support in identifying services and maximizing resources, assistance in securing supplies, and help in building natural supports by connecting with other families with similar life experiences. These services are only provided in Langlade and Lincoln Counties.

POPULATION SERVED

To participate in Children's Long Term Support and Family Support Programs children must be under 22 years of age and MA eligible along with various other additional requirements to qualify for certain types of funding. Eligibility is established on an annual basis. These services are only provided in Langlade and Lincoln Counties.

REGULATIONS

The Children's Long Support Waiver is overseen through Administrative Rule making by the Department of Health Services in Wisconsin.

HOURS OF SERVICE

Monday – Friday: 8:00 am – 4:30 pm

KEY ACCOMPLISHMENTS

- CLTS is working on a state-wide initiative to eliminate the CLTS waitlist. So far in 2018, 19 youth have been opened to CLTS programming.
- The Youth Team continues to grow based on demand. In 2017, there were 255 youth referrals for Marathon, Lincoln and Langlade County. There have been 199 youth referrals in 2018.

STAFFING, BUDGET HIGHLIGHTS & SUMMARY

See page 53.

HUMAN SERVICES OPERATIONS

COMMUNITY BEHAVIORAL HEALTH SERVICES

■ Community Treatment Adult (CCS,CSP, IPS) & Youth (CCS, CLTS)

BUDGET HIGHLIGHTS

The 2019 Budget reflects some decreases in staffing. The Psychiatrist and Medical Assistant positions have transferred to Outpatient Psychiatry. The program is now being reported separately between Adult and Youth. These programs have stabilized and the wait list has been reduced.

COMMUNITY TREATMENT STAFFING (ADULT & YOUTH PROGRAMS)

Position	2017 FTE's	2018 FTE's	2019 FTE's
Director	1.0	1.0	.5
Clinical Coordinator	1.0	3.0	4.0
Manager	2.0	3.8	4.0
Referral Coordinator	2.0	3.0	3.0
Case Manager	33.55	54.2	51.8
Clerical	2.0	2.0	1.0
RN Manager	1.0	1.0	.75
Register Nurse	3.0	4.0	4.5
Occupational Therapy Assistant	3.0	2.8	3.0
Community Treatment Tech	4.2	6.8	6.8
Employment Supervisor	1.0	1.0	1.0
Employment Specialist	3.6	3.6	6.0
Peer Specialist	1.0	1.0	1.0
Psychiatrist	1.0	.80	-
Medical Assistant	0.0	.80	-
AODA Counselor	0.0	1.0	-
Lead	0.0	5.5	4.0
QA Spec	0.0	1.0	1.0
TOTAL	59.35	96.3	92.35

BUDGET SUMMARY (COMMUNITY TREATMENT ADULT & YOUTH PROGRAMS)

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	5,375,000	9,352,000	9,879,000
Grant Funding	749,000	747,000	746,000
COP	65,000	45,000	45,000
DVR	64,000	34,000	23,000
WIMCR	175,000	100,000	40,000
Allocated Revenue	116,212	206,451	20,477
Base County Allocation	805,365	102,000	98,000
County Appropriation	254,198	64,739	-
Other Revenue	-	-	-
Marathon County Match (Maintenance)	14,417	40,172	40,172
CCS Reconciliation	-	1,100,000	1,100,000
TOTAL REVENUE	\$7,618,197	\$11,791,362	\$11,991,649
Salaries	3,242,624	4,806,063	4,526,437
Benefits	1,237,046	1,752,535	1,681,339
Other Direct Expenses	1,354,711	3,192,267	3,195,249
TOTAL DIRECT EXPENSES	\$5,834,381	\$9,750,865	\$9,403,025



COMMUNITY BEHAVIORAL HEALTH SERVICES

■ *Outpatient Services*

DESCRIPTION

Outpatient Mental Health Services offers outpatient treatment, counseling and assessment for mental, emotional and substance abuse challenges to residents in Marathon, Lincoln and Langlade Counties. Individual, family and group treatment and counseling options are available for people of all ages.

Outpatient Services are non-residential treatment services totaling less than 12 hours of counseling per individual per week, which provides a variety of evaluation, diagnostic, crisis and treatment services.

Services include individual counseling and intervention and may include group therapy and referral to substance abuse services that may occur over an extended period.

Treatment options are available for individuals, couples, families, and groups and provided in varying locations including the Wausau Campus, Antigo Center, Merrill Center, Tomahawk Office and in participating school districts through a Counseling in the Schools Program.

Intensive Outpatient (IOP) provides a group setting for clients who need more intensive substance abuse treatment than typical outpatient services, but do not meet the level of care for Day Treatment. The Matrix Model curriculum focuses on skills needed to be successful in recovery, whether the individual is new to recovery or has a knowledge base but experienced a relapse. IOP can be part of a step-down program involving Lakeside Recovery, Day Treatment, and Relapse Prevention groups.

Outpatient Substance Abuse & Addiction Services offers outpatient treatment, counseling and assessment for substance abuse and addictions to residents in Marathon, Lincoln and Langlade Counties. Individual, family and group treatment and counseling options are available for people of all ages.

Outpatient services are non-residential treatment services totaling less than 12 hours of counseling per individual per week, which provides a variety of evaluation, diagnostic, crisis and treatment services.

Treatment may incorporate counseling, training and educational services with a variety of treatment approaches and techniques. The length of each person's treatment is flexible and based on their need and rate of progress. North Central Health Care has developed several levels of programming to best meet the individual needs of persons in treatment.

Driving with Care Program offers an educational and therapeutic Driving with Care Program for people who have had four or more OWI convictions or OWI convictions involving serious accident or injury. Our objectives are to reduce the frequency of drinking and driving, and to assist individuals to break their chemical dependence.

Driving with Care consists of 33 group sessions held twice a week over four months. Each two-hour group meeting is facilitated by two substance abuse counselors who teach clients to examine and confront their own patterns of thinking and drinking. Once an individual has completed Driving with Care, it is expected they will continue individual counseling for an additional five to eight months to ensure what they have learned is applied to daily living.

Outpatient Psychiatry serves patients from all of our Outpatient locations including Wausau, Antigo, Merrill, and Tomahawk. Patients meet with physicians who are skilled in psychiatric care, and the physicians provide treatment and medication management.

Substance Abuse Day Treatment provides a more structured and intensive recovery program and requires a significant amount of support while individuals are obtaining treatment. Substance Abuse Day Treatment utilizes a multi-disciplinary approach in treating chemically dependent individuals. Techniques and interventions aiding recovery include group and individual therapies as well as education directed by a team of skilled individuals trained in multiple disciplines.

This team works together to review and assess the individual's progress and to adjust the individual care plan as needed. Each client is set up with appropriate aftercare treatment with a substance abuse counselor as well as an introduction to the recovery community.

POPULATION SERVED

Outpatient Mental Health Services provides support and treatment to residents of all ages in Marathon, Lincoln and Langlade Counties for a multitude of diverse situations including, but not limited to:

- Anxiety
- Abuse/Trauma
- Depression & Mood Disorders
- Stress
- Addiction
- Relationship Challenges
- Schizophrenia
- Grief & Loss
- Personality Disorders
- Major Life Changes

COMMUNITY BEHAVIORAL HEALTH SERVICES

■ Outpatient Services

- Behavioral Disorders
- Conflict Resolution

Outpatient Substance Abuse & Addiction Services are available for individuals, couples, families, and groups and is provided in several locations including the Wausau Campus, Antigo Center, Merrill Center and Tomahawk Office for a multitude of diverse situations including, but not limited to:

- Alcohol Abuse
- Drug Abuse
- Gambling
- Smoking
- Behavioral Addictions

Intensive Outpatient is available on the Wausau Campus and Antigo Center to residents of Marathon, Lincoln and Langlade Counties.

Driving with Care only accepts referrals from Probation and Parole for Marathon County residents.

Substance Abuse Day Treatment is available on the Wausau Campus to residents of Marathon, Lincoln and Langlade Counties.

Outpatient Psychiatry serves patients experiencing a need for psychiatric evaluation, medication management, or acute assistance.

REGULATIONS

Outpatient Mental Health Services: clinics are all certified by the Department of Health Services under the following regulations: Chapter DHS 35 (mental health counseling).

Intensive Outpatient is certified by the Department of Health Services, Chapter DHS 75.

Outpatient Substance Abuse & Addiction Services: The substance abuse and addiction services at all NCHC locations are certified by the Department of Health Services, Chapter DHS 75.

Driving with Care Program: NCHC works with the State of Wisconsin Department of Transportation and the Wisconsin Department of Health Services to deliver the Intoxicated Driver Program.

Substance Abuse Day Treatment is certified by the Department of Health Services, Chapter DHS 75.

Outpatient Psychiatry services are regulated by the Department of Health Services under Chapter DHS 35 and Chapter DHS 75.

HOURS OF SERVICE

Outpatient Services Monday – Friday: 8:00 am – 4:30 pm.

Intensive Outpatient Monday, Wednesday, and Friday: 10:00 am – 12:00 pm at Wausau Campus and Antigo Center.

Substance Abuse Day Treatment is a six-week structured program offered on Monday, Tuesday, Thursday and Friday from 9:00 a.m. until 12:15 p.m. Individual therapy appointments are scheduled weekly.

KEY ACCOMPLISHMENTS

- Established new Day Treatment offering in Antigo, accessible by residents of Lincoln, Langlade, and Marathon Counties
- Intensive Outpatient offered in Langlade and Marathon Counties.
- Outpatient combined programming with Community Treatment in 2018 to provide patients with a more comprehensive and seamless experience. This integration also created consistency between medical and administrative staff.
- Outpatient Psychiatry had four new physicians joined the NCHC team in 2018.
- Residents participating in the psychiatric residency program began their second year by providing outpatient services.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Director	1.0	1.0	.5
Clinical Coordinator	1.0	.5	1.0
Operations Manager	2.0	2.0	2.0
RN Manger	-	-	.25
Referral Coordinator	1.8	1.8	1.8
OWI Scheduler	1.0	1.0	1.0
Registration Specialist	7.4	7.4	9.6
Psychiatrist	1.0	1.2	5.0
RN	2.4	2.8	4.5
Medical Assistant	3.2	3.0	3.8
Psychologist	1.0	1.2	2.0
Therapist	17.8	16.8	17.1
AODA Counselor	3.0	3.0	2.0
OWI Assessor	1.0	1.0	1.0
Nurse Practitioner	-	-	1.0
Medical Staff Relations			
Director	-	-	0.5
TOTAL	43.6	42.7	53.05



COMMUNITY BEHAVIORAL HEALTH SERVICES

■ Outpatient Services

BUDGET HIGHLIGHTS

Outpatient Services is seeing a significant increase in 2019 with the addition of 3.0 FTE Psychiatrists and 1.0 FTE Nurse Practitioner. More Psychiatry time is provided with staff and less with Locums. There is additional revenue to offset some of the additional expenses.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	1,922,000	1,835,000	2,864,000
Grant	402,000	402,000	515,000
OWI Surcharges	170,000	147,000	152,000
Contract Services	14,000	-	180,000
WIMCR	25,000	24,000	50,000
CCS Reconciliation	-	-	100,000
Base County Allocation	1,800,000	1,601,949	3,382,063
County Appropriation	1,167,536	1,422,472	-
Allocated Revenue	120,220	188,416	122,559
Other Revenue	-	5,000	30,000
Marathon County Match (Maintenance)	-65,129	71,635	75,158
County Match	175,000	175,000	175,000
TOTAL REVENUE	\$5,860,885	\$5,872,472	\$7,645,180
Salaries	2,598,568	2,524,013	3,998,390
Benefits	991,342	920,384	1,485,197
Other Direct Expenses	1,155,322	1,158,555	968,857
TOTAL DIRECT EXPENSES	\$4,754,232	\$4,602,952	\$6,452,444

HUMAN SERVICES OPERATIONS

COMMUNITY LIVING

Community Living represents traditional adult physical, mental and developmental disability services including Adult Day Services, Prevocational Services and Residential Services. The program name reflects the transition that Adult Day and Prevocational Services are undertaking in moving to be more community based and inclusive. Adult Day and Prevocational Services are both offered in Langlade and Marathon Counties (Lincoln County administers their programs separately), and Residential Services is a shared service among the three counties.

COMMUNITY LIVING

■ Community Living Administration

DESCRIPTION

The administrative leadership and management of Residential, Prevocational Services and Adult Day Services is consolidated into a separate program and allocated out to each program based on direct expenses. The manager positions for residential are allocated only to the 9 residential sites.

KEY ACCOMPLISHMENTS

- Reduced employee vacancy rates from a high of 20% in 2017 to the current rate of 7%.
- Expanded cross training of a pool of staff into all community living program departments to provide more fluent coverage options, decrease overtime, and ensure employee work force work life balance.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Director	1.0	1.0	1.0
Residential Manager	2.0	1.0	1.0
Registered Nurse	.80	.8	.8
Scheduler	0.0	1.0	1.0
TOTAL	3.8	3.8	3.8

BUDGET HIGHLIGHTS

The 2019 budget is consistent with 2018.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Salaries	232,016	210,055	224,337
Benefits	88,513	76,597	83,330
Other Direct Expenses	10,890	12,590	17,814
TOTAL DIRECT EXPENSES	\$331,419	\$299,242	\$325,481



HUMAN SERVICES OPERATIONS

COMMUNITY LIVING

■ Day Services

DESCRIPTION

Day Services includes both the **Adult Day Services** and **Prevocational Services** programs in Langlade and Marathon Counties. North Central Health Care Adult Day Services (ADS) helps individuals with developmental and physical disabilities, who are 18 and older, reach their greatest social, educational, cognitive, life and community potential by offering them a variety of activities that stimulate their interest and growth. ADS works with individuals to assess their strengths and needs, helps them choose programs that will help them progress, and tracks their regression or progress in the program. ADS programs emphasize activities designed for low levels of functional ability and for clients who have retired from prevocational services.

Prevocational Services at North Central Health Care offers adults 18 and older with developmental disabilities, the opportunity to learn good work skills while promoting self-worth through paid work, as well as advancement in wage, work habits, productivity and skill level. Individuals participate in paid work tasks that could lead to a referral to the Supported Employment Program and employment in the community. Individualized programs focus on work activities, vocational orientation and training and transitional employment. Each participant receives an entry assessment, and upon being qualified, is assigned a prevocational case worker for on-going assessment and goal identification for skill development. Basic Life Training Sessions offer individuals opportunities to learn and develop skills, knowledge and motivation within a group or classroom setting. This provides participants with the knowledge to improve overall work skills required to progress to competitive employment.

POPULATION SERVED

Adult Day and Prevocational Services provides services to individuals, 18 and older, with developmental and physical disabilities in Marathon and Langlade Counties.

REGULATIONS

Adult Day Services does not have any specific regulatory requirements. It follows best practice for such services. The supported employment program works with the Department of Vocational Rehabilitation and must meet requirements set forth by the State of Wisconsin Department of Workforce Development.

HOURS OF SERVICE

Adult Day Services: Wausau Campus:
8:15 am – 3:45 pm
Antigo Center:
8:00 am – 4:00 pm

Prevocational Services: Wausau Northern Valley
West and Antigo Center:
8:00 am – 3:00pm

KEY ACCOMPLISHMENTS

- Expanded Prevocational Services options with Community-Based. The first club which is a fitness option to promote physical activity was rolled out in January for individuals to enroll. Club currently serves 6 members daily 4 days a week.
- Prevocational Services successfully transitioned and discharged 8 Prevocational members from Prevocational Services to community-based employment.
- Prevocational Services successfully transitioned 39% of the consumers served in Prevocational Services to community-based prevocational options over the past few years.
- Adult Day Services sustained 100% satisfaction rates for all of 2017 and 2018 year to date.

COMMUNITY LIVING

■ Day Services

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Coordinator	3.0	3.0	2.0
Vocational Consultant	2.46	2.46	2.65
D.D. Workers	10.56	9.31	7.0
D.D. Aides	12.59	12.59	12.65
TOTAL	28.61	27.36	24.3

BUDGET HIGHLIGHTS

The 2019 budget reflects additional decreases in FTE's due to the decreased demand in services as more consumers continue to move to community-based programs.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	1,940,000	1,785,000	1,526,000
DVR	80,000	88,000	92,000
Contract Services	20,000	20,000	15,000
Base County Allocation	-	-	-
Allocated Revenue	49,658	-	-
Other Revenue	122,000	112,000	108,000
Marathon County Match (Maintenance)	71,481	75,254	75,254
TOTAL REVENUE	\$2,283,139	\$2,080,254	\$1,816,254
Salaries	896,392	871,909	776,732
Benefits	341,970	317,942	288,515
Other Direct Expenses	326,461	312,854	262,995
TOTAL DIRECT EXPENSES	\$1,564,823	\$1,502,705	\$1,328,242



HUMAN SERVICES OPERATIONS

COMMUNITY LIVING

■ Residential – Community-Based Residential Facilities (CBRFs)

DESCRIPTION

Residential Services operates four Community-Based Residential Facilities (CBRFs) that are congregate living settings, licensed by the State of Wisconsin. Four homes are licensed as a CBRF, serving developmentally disabled individuals who are ambulatory, semi-ambulatory or non-ambulatory, but may not be capable of exiting the property without assistance. These four homes are:

- Bissell Street serves eight residents.
- Chadwick Street has seven residents.
- Andrea Street can serve eight residents.
- Heather Street can serve seven residents.

POPULATION SERVED

Community-Based Residential Facilities provide support and care to individuals, 18 and older, with developmental disabilities, mental illness, addiction issues or physical disabilities in Marathon County.

REGULATIONS

All group homes are certified by the Wisconsin Department of Health Services, Chapter DHS 83-Community-Based Residential Facilities.

HOURS OF SERVICE

24 hours/day, 7 days/week, 365 days/year

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	2,424,000	1,937,000	2,000,000
Allocated Revenue	24,300	-	-
TOTAL REVENUE	\$2,448,300	\$1,937,000	\$2,000,000
Salaries	1,017,506	876,749	903,819
Benefits	388,174	319,708	335,722
Other Direct Expenses	363,462	277,907	286,646
TOTAL DIRECT EXPENSES	\$1,769,142	\$1,474,364	\$1,526,187

KEY ACCOMPLISHMENTS

- Reduced employee vacancy rates from a high of 20% in 2017 to the current rate of 7%.
- Expanded cross training of a pool of staff into all community living program departments to provide more fluent coverage options, decrease overtime, and ensure employee work force work life balance.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Care Coordinator	5.0	4.0	4.0
Residential Care Assistants	27.95	23.62	23.62
TOTAL	32.95	27.62	27.62

BUDGET HIGHLIGHTS

The 2019 budget remains consistent with 2018 activity.

HUMAN SERVICES OPERATIONS

COMMUNITY LIVING

■ Residential – Supported Apartments

DESCRIPTION

Residential Services operates five supported apartment settings:

Jelinek Supported Apartments offer individual apartments for adults with developmental disabilities in two separate building locations. Apartments may be rented as a single unit, or shared by two residents.

Forest Street Supported Apartments has 12 units and serves both individuals with developmental disabilities and chronic mental illness in separate apartments. Support staff is on-site 24 hours.

Fulton Street Apartments offer individual apartments for men and women with developmental disabilities.

Riverview Towers offers multiple units based on need and serves both individuals with developmental disabilities and chronic mental illness in separate apartments. Support staff is on-site 24 hours.

POPULATION SERVED

Supported Apartments provide support and care to individuals, 18 and older, with developmental disabilities, mental illness, addiction issues or physical disabilities in Marathon County.

REGULATIONS

Supported apartments do not have any specific regulatory requirements. It follows best practice for such services and any contractual requirements.

HOURS OF SERVICE

24 hours/day, 7 days/week, 365 days/year

KEY ACCOMPLISHMENTS

- Re-categorized all CBRFs from category 4 homes to category 5 homes. The primary funder stems a higher reimbursement rate per member, per new admission, will increase revenue.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Care Coordinator	6.0	6.8	6.8
Residential Care Asst.	36.89	34.48	34.48
TOTAL	42.86	41.28	41.28

BUDGET HIGHLIGHTS

The 2019 budget remains consistent with 2018 activity. There is some increase in revenue due to some CCS Services being provided.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	2,337,000	2,317,000	2,384,000
Allocated Revenue	23,896	-	-
Other Revenue	-	-	-
TOTAL REVENUE	\$2,360,896	\$2,317,000	\$2,384,000
Salaries	1,267,272	1,253,241	1,279,912
Benefits	483,458	456,995	475,422
Other Direct Expenses	242,737	147,453	155,174
TOTAL DIRECT EXPENSES	\$1,993,467	\$1,857,689	\$1,910,508



HUMAN SERVICES OPERATIONS

■ ADULT PROTECTIVE SERVICES

DESCRIPTION

North Central Health Care's Adult Protective Services (APS) help protect individuals 18 years of age and older who, due to mental retardation, mental illness, a degenerative brain disorder or other cognitive disability, are vulnerable and unable to make decisions or advocate for themselves. Screenings are conducted to determine the needs and vulnerabilities of adults. Based on professional observations, APS will make referrals for evaluations and services. Adult Protective Services can intervene and provide emergency protective services or placement orders, help petition for guardianship and protective placement for qualified individuals, and complete necessary court reports and evaluations for all protective placements. Adult Protective Services also provides ongoing reviews of protective placements and can assist with locating guardian resources.

Adult Protective Services receives and screens reports of possible elder abuse, neglect (self or by others) and exploitation and then conducts investigations and makes referrals to the appropriate agencies to ensure individuals receive the assistance they need. At times, this may involve honoring a competent adult's right to make a poor decision. If necessary, APS can help protect the individual by assisting with protective placement and guardianship actions through the court.

POPULATION SERVED

Adult Protective Services serves all adults age 18 and older in Marathon, Lincoln and Langlade Counties. Population served may include individuals with mental retardation, mental illness, a degenerative brain disorder, dementia, or a cognitive disability who are vulnerable and unable to make decisions or advocate for themselves.

REGULATIONS

Wisconsin Statute Chapters 54, 55 and 46.90. Each county is required to name a responsible agency to make reports for suspected abuse and neglect and to provide a response. As well, each county is required to name an adult protective services agency.

HOURS OF SERVICE

8:00 am – 4:30 pm with special accommodations to meet needs of families.

KEY ACCOMPLISHMENTS

- Managed caseload of client cases that continue to have increased complexity.
- Continued focus to identify emergency placement options for community at risk individuals – especially for those with dementia care needs.
- Led a campaign to increase community awareness of elder abuse through Elder Abuse Awareness Day.
- APS staff participation on state workgroup on financial abuse led by the Department of Justice.
- Focus on awareness and understanding of self-determination and Supported Decision Making – (State of WI passed new legislation regarding this in April).

■ ADULT PROTECTIVE SERVICES

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Manager	1.0	1.0	1.0
Protective Services Rep.	4.0	5.0	5.0
Administrative Assistant	1.0	1.0	0.8
TOTAL	6.0	7.0	6.8

BUDGET HIGHLIGHTS

The 2019 budget reflects a .2 FTE reduction in administrative support. The position was filled with a 0.8 FTE and this is working.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	500	500	400
Grant	225,000	225,000	225,000
County Appropriation	435,223	539,177	539,177
Allocated Revenue	8,339	6,569	-
Marathon County Match (Maintenance)	4,731	9,310	9,310
TOTAL REVENUE	\$673,793	\$780,556	\$773,887
Salaries	301,122	357,575	367,707
Benefits	114,877	130,390	136,584
Other Direct Expenses	72,964	76,414	68,886
TOTAL DIRECT EXPENSES	\$488,963	\$564,379	\$573,177



HUMAN SERVICES OPERATIONS

AQUATIC SERVICES

DESCRIPTION

North Central Health Care Aquatic Services offers warm water aquatic physical therapy, water exercise programs and community and family swim programs that help individuals manage pain and maintain or reclaim their independence. The therapy pool is maintained at a 90 degree temperature. Under the direction of a physician, North Central Health Care's licensed physical therapist devises a treatment plan using water as both a supporting, gravity-reducing environment and a conditioning medium. Upon discharge, the therapist provides each patient with a self-directed exercise program for pool and home use. Warm water therapy can bring relief from pain, spur recovery and improve range of motion, balance, strength and coordination.

POPULATION SERVED

Aquatic Services serves those who have physical disabilities, are recovering from surgeries, or have musculoskeletal conditions such as fibromyalgia, arthritis and lower back pain. All those served are under the referral of a physician.

REGULATIONS

The operation of the pool is regulated by the Department of Health Services, Chapter DHS 172: Safety, Maintenance and Operation of Public Pools and Water Attractions.

HOURS OF SERVICE

Monday: 6:30 am – 6:00 pm
 Tuesday: 7:30 am – 7:00 pm
 Wednesday: 6:30 am – 6:00 pm
 Thursday: 7:30 am – 6:00 pm
 Friday: 6:30 am – 4:00 pm
 Saturday: 9:00 am – 12:00 pm

KEY ACCOMPLISHMENTS

- The community raised over \$3.25 million dollars for a new aquatic therapy pool

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Manager	1.0	1.0	1.0
Physical Therapy Assistant	1.4	1.4	1.0
Physical Therapist	1.2	1.2	2.2
Lifeguard / PT Aide	2.0	2.6	2.6
TOTAL	5.6	6.2	6.8

BUDGET HIGHLIGHTS

The 2019 budget reflects the addition of therapy time due to increased demand for services. The recruitment process for additional staff continues to be a struggle, but efforts continue.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	551,000	550,000	527,000
Contract Services	-	-	10,000
Other Revenue		100,000	100,000
Allocated Revenue	3,904	2,952	25,315
Marathon County Match (Maintenance)	137,725	139,148	139,148
County Appropriation	150,327	214,115	342,345
TOTAL REVENUE	\$941,956	\$1,006,215	\$1,143,808
Salaries	319,022	342,338	438,874
Benefits	121,705	124,834	163,019
Other Direct Expenses	36,524	37,824	22,059
TOTAL DIRECT EXPENSES	\$477,251	\$504,996	\$623,952

■ BIRTH TO THREE

DESCRIPTION

North Central Health Care's Birth to Three is part of Wisconsin's statewide program providing support and services to infants and toddlers, ages birth to three with developmental disabilities, and their families. As an early intervention program, Birth to Three staff is trained in assessing the developmental strengths and needs of very young children to determine eligibility for the program. Once a child is determined to be eligible, services to support the family's ability to nurture and enhance their child's development are provided.

Birth to Three core services include screening and evaluation, family education, developmental education services, service coordination, speech therapy, physical therapy, special instruction, occupational therapy, and assistive technology. Birth to Three can also help access psychological services, counseling services, nutrition services, medical services (for diagnostic or evaluative purposes only), health services if needed (to help the child benefit from other early intervention services, including hearing and vision services), transportation and assistive technology.

Parents play a primary role in the Birth to Three Program, guiding the Birth to Three staff toward the understanding of their child, identifying daily routines and activities in which their child learns best, and helping determine the setting in which services will be provided. Referral for services may come from parents, family members, physicians, social workers, therapists, daycare providers or others concerned with a child's development.

POPULATION SERVED

Infants and toddlers, ages birth to three, with developmental disabilities and their families who reside in Marathon, Lincoln, and Langlade Counties.

REGULATIONS

The Birth to Three program is regulated federally by the Individuals with Disabilities Education Act (IDEA). The IDEA act ensures services to children with disabilities and governs how states and public agencies provide early intervention, special education and related services. The Department of Health Services oversees the Birth to Three program in Wisconsin.

HOURS OF SERVICE

8:00 am – 4:30 pm, Monday – Friday, with special accommodations to meet needs of families.

KEY ACCOMPLISHMENTS

- Birth to Three has incorporated knowledge of Adverse Childhood Events (ACEs) and how these events affect the ability of children and their parents to receive information and to respond to parent coaching.
- Birth to Three has partnered with the Antigo Unified School District to educate schools and families about the importance of early intervention and parental coaching. Out of this partnership a county-wide community alliance for early intervention is developing and will begin in the fall of 2018.
- Birth to Three is an active supporter of the Lena Project which serves as a program to educate parents about the importance of verbal interaction with their children. The program uses technology to measure the length and amount of verbal interactions a child has, along with 13 weeks of parent classes aimed at analyzing the data gathered and increasing these interactions as well as speech and brain development.
- Birth to Three has begun using a standardized tool that is universal in administration to evaluate all children to determine eligibility to the program. This tool further provides an accurate flow of information to families, other care providers, and schools when needed.



■ BIRTH TO THREE

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Manager	1.0	1.0	1.0
Service Coordinator	5.0	5.0	5.0
Teacher	1.0	1.0	1.0
Physical Therapist	0.8	1.0	1.0
Occupational Therapist	1.5	1.6	1.6
Speech Therapist	4.0	3.6	3.0
Administrative Assistant	1.0	1.0	1.0
TOTAL	14.30	14.20	13.6

BUDGET HIGHLIGHTS

The 2019 budget reflects a decrease of a 0.6 FTE Speech Therapist. The Maintenance of Effort (MOE) has decreased. The MOE requirement is funded by levy, so the result is a decrease of levy for the program.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	379,000	318,000	233,000
Grant	519,000	519,000	519,000
WIMCR	50,000	50,000	50,000
County Appropriation	835,112	835,112	714,404
Allocated Revenue	9,219	6,971	-
Marathon County Match (Maintenance)	23,895	33,654	33,654
Contract	-	23,000	12,000
TOTAL REVENUE	\$1,816,226	\$1,785,737	\$1,562,058
Salaries	928,489	922,623	864,642
Benefits	354,214	336,435	321,170
Other Direct Expenses	101,430	138,620	70,903
TOTAL DIRECT EXPENSES	\$1,384,133	\$1,397,678	\$1,256,715

HUMAN SERVICES OPERATIONS

■ DEMAND TRANSPORTATION

DESCRIPTION

The North Central Health Care Demand Transportation Program offers transportation for Marathon County residents who are 60 years of age and older, or individuals of any age who are non-ambulatory (unable to walk). Transportation is for medical, employment, or nutritional needs (including grocery shopping) only. Co-payments vary depending on distance. A personal care attendant or service animal may accompany a rider at no additional charge.

The North Central Health Care Demand Transportation Program also coordinates volunteer drivers for the Disabled American Veterans (DAV) van, to transport veterans to Tomah or Madison on an on-call basis. Rides are at no charge and veterans using this service are ineligible for VA travel reimbursement.

POPULATION SERVED

The North Central Health Care Demand transportation Program serves Marathon County residents of any age who are non-ambulatory, or any individual ages 60 and over.

REGULATIONS

85.21 WI DOT requirements

HOURS OF SERVICE

Service Hours: Monday – Friday, 8:00 am – 4:30 pm
Office Hours: Monday through Friday, 7:00 am – 5:00 pm

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	57,300	24,300	29,500
Grant	237,700	237,700	237,500
DVR	-	-	-
Contracted Services	110,000	168,000	170,000
Allocated Revenue	4,178	-	-
Other Revenue	-	-	-
Marathon County Match (Maintenance)	466	1,235	1,235
TOTAL REVENUE	\$409,644	\$431,235	\$438,235
Salaries	134,906	137,760	139,961
Benefits	51,466	50,234	51,988
Other Direct Expenses	164,147	187,747	187,307
TOTAL DIRECT EXPENSES	\$350,519	\$375,741	\$379,256

KEY ACCOMPLISHMENTS

- Produced and collaborated a facility-wide ROADeo to assess and manage vehicular risk.
- Leveraged labor to increase efficiencies and collaboration between In-house and Demand services
- All Transportation employees are engaged in monthly Safety and Patient Experience training.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Manager	0.75	.75	.75
Logistics Worker	2.3	2.3	2.3
Administrative Assistant	1.0	1.0	1.0
TOTAL	4.05	4.05	4.05

BUDGET HIGHLIGHTS

The 2019 budget remains comparable to the 2018 budget.





NURSING HOME OPERATIONS

2019 BUDGET BY PROGRAM

North Central Health Care's Nursing Home Operations include Mount View Care Center, a skilled nursing facility located on the main campus in Wausau. With a licensed capacity of 200 residents, Mount View Care Center's neighborhoods serve individuals in need of short term rehabilitation, post acute care with complex physical needs, ventilator dependent care, long term skilled nursing care, and those in need of specialized nursing care for dementia, psychiatric and neurological diseases, or behavioral needs. The following programs are the consolidated service areas for NCHC's Nursing Home Operations.

Nursing Home Management	69
Nursing Home Administration	70
Ancillary	71
Reflections Long-Term Care	72
Legacies by the Lake Memory Care	73-74
Southshore Post-Acute Care	75
Northwinds Ventilator Care	76
Rehab	77

NURSING HOME OPERATIONS

MANAGEMENT TEAM



Kim Gochanour
Nursing Home
Operations



Kristin Woller
Nursing Home
Assistant Administrator



Connie Gliniecki
Director of Nursing



Cheryl Rye
Post Acute and
Long Term Care
Nurse Manager



Natasha Sayles
Legacies by the Lake
Nurse Manager



NURSING HOME OPERATIONS

NURSING HOME OPERATIONS ADMINISTRATION

DESCRIPTION

The overall administrative oversight functions for all Nursing Home Operations are consolidated into a separate program and are allocated out to each program based on direct expenses.

KEY ACCOMPLISHMENTS

- In the past year we have continued to focus on reducing turnover of our certified nursing assistants and have improved the turnover rate from 74.26% in 2016 to 32.2% in 2017. This is significantly below the state and national levels. By implementing a more robust onboarding program and creating a more interactive competency day with input from the staff, we have continued to improve overall Mount View staff retention numbers.
- Another highlight for 2018 was our increased focus on our bed management and increasing our short term rehab residents from 17 average daily census in 2017 to 20 in 2018. In late 2018 we will be implementing a new electronic medical record that is web based and will further enhance our ability to effectively document and share data with our referral sources.
- A final accomplishment, but not the least important change that occurred in the past year, is the implementation of the facility-wide resource assessment and roll out of our updated nursing home regulations and new survey process with a successful survey result.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Nursing Home Operations			
Executive	1.0	1.0	1.0
Director of Nursing	1.0	1.0	1.0
Assistant Administrator	1.0	1.0	1.0
Central Scheduler	0.9	1.0	1.5
Executive Assistant	1.0	1.0	1.0
Social Services Supervisor	1.0	1.0	1.0
Restorative RN	0.0	0.0	0.8
Logistics Worker	1.0	1.0	1.0
Staff Education Specialist	1.0	1.0	1.0
Asst. Administrative Coord.	0.0	0.5	0.5
Performance Imp. Specialist	0.0	1.0	1.0
Enrollment Specialist	0.0	1.0	1.0
Billing Specialist	0.0	1.0	1.0
TOTAL	10.2	11.5	12.8

BUDGET HIGHLIGHTS

The overall census for Mount View Care Center will remain at 185 for 2019. The Nursing Home Operations Administration budget reflects an increase in FTE time for scheduling.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Other Revenue	10,000	10,000	14,000
Donations	-	-	-
TOTAL REVENUE	\$10,000	\$10,000	\$14,000
Salaries	678,806	799,534	812,969
Benefits	258,961	291,551	301,976
Other Direct Expenses	288,599	367,749	423,293
TOTAL DIRECT EXPENSES	\$1,226,366	\$1,458,834	\$1,538,238

NURSING HOME OPERATIONS

■ ANCILLARY

DESCRIPTION

Ancillary services are services or items that are not included in our daily rates. Some examples of these items are transportation, durable medical equipment, oxygen, laboratory test and vaccinations that are required to be administered through our Federal and State Regulations.

BUDGET HIGHLIGHTS

We continue to explore options for better pricing on ancillary services. Revenue for 2019 will remain consistent. There is some decrease in expense, comparable to actual activity.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	140,000	86,000	88,000
Allocated Revenue	123	82	-
Marathon County Match (Maintenance)	-	-	-
TOTAL REVENUE	\$140,123	\$86,082	\$88,000
Other Direct Expenses	114,000	153,000	78,000
TOTAL DIRECT EXPENSES	\$114,000	\$153,000	\$78,000



NURSING HOME OPERATIONS

REFLECTIONS LONG-TERM CARE

DESCRIPTION

Mount View Care Center's Long Term Care units were consolidated in early 2017 into one unit, Northern Reflections totaling 40 licensed beds. Northern Reflections provides 24 hour skilled nursing services that are adapted to helping residents, assisting with the tasks of daily living, physical therapy, transitioning to dementia care, comfort/hospice care, or the management of chronic illness. Each individual care plan is structured around the resident's life pattern.

POPULATION SERVED

Reflections Long Term Care provides services to adults of all ages in need of skilled nursing care for assistance with daily living, physical therapy, transitioning to dementia care, comfort/hospice care or for management of a chronic illness.

REGULATIONS

State of Wisconsin Dept. Of Health Services - DHS 132; Center for Medicare/Medicaid Services - Conditions of Participation; and Federal Regulations for Skilled Nursing Facilities.

HOURS/DAYS OF SERVICE

24 hours/day, 7 days/week, 365 days/year. To access our admissions phone is available 24 hours/7 days a week. The number to get more information is 715.581.3422.

KEY ACCOMPLISHMENTS

Reflections Long Term Care continues to provide quality long term services for our residents. We currently have a 3.7% overall hospital readmission rate which is below the state and federal rates of 17%. Reflections continues to focus on individualized medical care and promotes independence in a resident directed environment.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Nurse Manager	1.0	0.3	0.3
MDS Coordinator	1.0	1.0	0.5
Registered Nurse	7.5	5.0	7.3
Certified Nursing Assistant	26.2	14.0	14.0
Unit Clerk	1.0	0.5	0.5
Social Worker	1.0	0.5	0.5
Life Enrichment Coordinator	2.0	2.0	2.0
Medical Technician	0.0	2.15	-
TOTAL	42.05	25.45	25.10

BUDGET HIGHLIGHTS

The census for 2019 has been increased from 37 to 40 beds. Expenses are not really impacted, but revenue will increase. Additional rooms that had been taken off will remain open.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	3,978,000	2,344,000	2,662,000
Supplemental Payment	647,000	713,000	503,000
Other Revenue	-	-	-
County Appropriation	291,000	483,000	428,000
Allocated Revenue	49,951	54,472	43,705
Marathon County Match (Maintenance)	396,543	412,750	412,750
TOTAL REVENUE	\$5,362,494	\$4,007,222	\$4,049,455
Salaries	1,937,880	1,276,774	1,276,442
Benefits	739,292	465,577	474,133
Other Direct Expenses	365,710	192,980	188,593
TOTAL DIRECT EXPENSES	\$3,042,882	\$1,935,331	\$1,939,168

NURSING HOME OPERATIONS

■ LEGACIES BY THE LAKE MEMORY CARE

DESCRIPTION

Mount View Care Center's innovative dementia care program, Legacies by the Lake, consists of three units with 107 licensed beds. Units include Gardenside Crossing, Evergreen Place, and Lakeview Heights.

These units specialize in caring for people in varying stages of dementia, neurological, psychiatric and behavior disabilities. Gardenside Crossing accommodates residents with moderate memory loss who need assistance with their daily routines. Lakeview Heights is designed specifically for residents with mild memory loss who still function somewhat independently. Evergreen Place cares for residents with severe memory loss and a high level of dependency.

POPULATION SERVED

Legacies by the Lake Dementia Care specializes in caring for adults of all ages in varying stages of dementia, neurological, psychiatric and behavior disabilities.

REGULATIONS

State of Wisconsin Dept. Of Health Services - DHS 132; Center for Medicare/Medicaid Services - Conditions of Participation; and Federal Regulations for Skilled Nursing Facilities.

HOURS/DAYS OF SERVICE

24 hours/day, 7 days/week, 365 days/year. To access our admissions phone is available 24 hours/7 days a week. The number to get more information is 715.581.3422.

KEY ACCOMPLISHMENTS

- Legacies by the Lake is recognized regionally and in the State of Wisconsin for its innovative dementia care and specialized training. In 2017 and 2018, we have been presenting *Stop, Starting It!* Training to nursing homes throughout Wisconsin. We were also selected as a speaker at the 2018 Focus Conference.
- Legacies continues to participate in the music and memory program and have over 50 residents enjoying individualized music through iPods. From a clinical area of excellence, we have a very low re-hospitalization rate.
- Legacies by the Lake and all of NCHC is a contributing partner in the Walk to End Alzheimer's, an initiative of the Alzheimer's Association.
- Legacies by the Lake has been recognized as a contributor in education on dementia through our Family Forums, collaboration with local law enforcement and support of the Memory Café.
- In 2018, we have focused on our quality outcomes and have reduced falls by 10%.



■ LEGACIES BY THE LAKE MEMORY CARE

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Nurse Manager	1.0	1.0	1.0
MDS Coordinator	1.0	1.0	1.5
Registered Nurse	13.65	10.9	13.8
Certified Nursing Assistant	59.0	55.0	56.3
Unit Clerk	1.0	1.0	1.0
Social Worker	1.6	1.5	1.5
Life Enrichment Coordinator	1.9	2.0	1.0
Medical Technician	0.0	8.4	0.0
Hospitality Aide	-	-	3.4
TOTAL	82.3	80.8	79.5

BUDGET HIGHLIGHTS

The census for 2019 will move to 97, which is comparable to actual. There has been some restructuring in staffing to better meet the needs of the program.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	6,418,000	6,616,000	6,918,000
Supplemental Payment	734,000	809,000	1,039,000
Contract Services	100,000	-	-
Other Revenue	-	-	-
County Appropriation	803,000	1,217,000	1,072,000
Allocated Revenue	80,812	89,652	42,318
Marathon County Match (Maintenance)	374,012	411,140	411,140
TOTAL REVENUE	\$8,509,824	\$9,142,792	\$9,482,458
Salaries	3,698,275	3,808,487	3,594,584
Benefits	1,410,874	1,388,769	1,335,204
Other Direct Expenses	441,352	447,846	424,850
TOTAL DIRECT EXPENSES	\$5,550,501	\$5,645,102	\$5,354,638

NURSING HOME OPERATIONS

■ SOUTHSORE POST ACUTE CARE & NORTHWINDS VENTILATOR CARE

DESCRIPTION

Southshore Short-Term Rehabilitation offers post-acute care for short term rehabilitation in Southshore, a 25-bed skilled nursing community. Southshore specializes in complex physical problems associated with aging and operates as a transitional unit for short-term rehabilitation and convalescent stays.

The most extensive rehabilitative care opportunities available in Central Wisconsin are provided, even for the most medically complex situations – all delivered on-site. Numerous rehabilitation techniques, from warm water physical therapy to complex respiratory care only found at Mount View Care Center, give our teams the ability to uniquely approach each resident’s recovery.

Northwinds Vent Community is a 27-bed unit within the Post-Acute Care area that specializes in care for adults with a ventilator dependency. Our team provides 24/7 on-site respiratory therapy and nursing services with reliable, personal care for each individual. Northwinds focuses on ventilator dependent rehabilitation, recovery and liberation. Northwinds is 1 of only 5 care facilities in Wisconsin with approved dedicated units for the care of ventilator-dependent residents. Our highly trained team help residents adjust to ventilator-dependent lifestyles.

POPULATION SERVED

Southshore Short-Term Rehabilitation serves adults of all ages with complex physical problems associated with aging and operates as a transitional unit for short-term rehabilitation and convalescent stays.

Northwinds Vent serves adults of all ages with ventilator dependency needs.

REGULATIONS

Both programs are subject to the State of Wisconsin Dept. Of Health Services - DHS 132; Center for Medicare/Medicaid Services - Conditions of Participation; and Federal Regulations for Skilled Nursing Facilities.

HOURS/DAYS OF SERVICE

Both programs operate 24 hours/day, 7 days/week, 365 days/year.

KEY ACCOMPLISHMENTS

- Southshore and Northwinds pride themselves on high quality care for the residents we serve. In 2017 we had no pneumonia acquired ventilator dependent resident infections and have continued to lead the surrounding area for the second year in a row with one of the lowest rehospitalization rates that are lower than the national and state average. We continue to focus on strong quality outcomes for those we serve.



■ SOUTHSHORE POST ACUTE CARE & NORTHWINDS VENTILATOR CARE

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Nurse Manager	1.0	0.7	0.7
MDS Coordinator	1.0	1.0	1.0
Registered Nurse	12.90	14.5	16.4
Respiratory Therapist	9.25	8.8	9.4
Certified Nursing Assistant	30.30	30.3	25.65
Unit Clerk	1.9	1.5	2.0
Social Worker	1.2	1.5	1.5
Music Therapist	1.0	1.0	1.0
Activity Therapist	1.0	0.9	1.0
Hospitality Aide	-	-	1.4
TOTAL	59.55	60.2	60.05

BUDGET HIGHLIGHTS

The census for Southshore Post Acute Care is targeted for 23 and the census for Northwinds Vent Community is targeted for 25. These are comparable to 2018 targets. There have been some restructuring in staffing to better meet the needs of the programs.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	5,528,000	6,053,000	5,814,000
Supplemental Payment	419,000	462,000	558,000
Other Revenue	-	-	-
County Appropriation	606,000	-	-
Allocated Revenue	46,017	73,270	114,085
Marathon County Match (Maintenance)	328,449	275,783	275,783
TOTAL REVENUE	\$6,927,466	\$6,864,053	\$6,761,868
Salaries	3,117,959	3,284,812	3,272,279
Benefits	1,189,486	1,197,810	1,215,484
Other Direct Expenses	603,273	538,554	512,573
TOTAL DIRECT EXPENSES	\$4,910,718	\$5,021,176	\$5,000,336

NURSING HOME OPERATIONS

■ REHAB

DESCRIPTION

Rehab services are a contract provider of physical, occupational and speech therapy for residents and patients of Mount View Care Center to enhance them to their highest possible activities of daily living.

POPULATION SERVED

Residents and patients of Mount View Care Center. Some outpatient services provided for the Inpatient Hospital and Outpatient therapy for recently discharged residents.

REGULATIONS

Both programs are subject to the State of Wisconsin Dept. Of Health Services - DHS 132; Center for Medicare/Medicaid Services - Conditions of Participation; and Federal Regulations for Skilled Nursing Facilities.

HOURS/DAYS OF SERVICE

Monday – Friday: 8:00 – 4:30, with 7-day coverage as needed. To access our admissions phone is available 24 hours/7 days a week. The number to get more information is 715.581.3422.

BUDGET HIGHLIGHTS

Revenues and expenses are increasing as the demand increases.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Services Revenue	1,977,000	1,900,000	2,300,000
Allocated Revenue	8,217	6,613	-
Marathon County Match (Maintenance)	46,330	31,518	31,518
TOTAL REVENUE	\$2,031,547	\$1,938,131	\$2,331,518
Salaries	-	-	-
Benefits	-	-	-
Other Direct Expenses	1,069,450	823,000	954,000
TOTAL DIRECT EXPENSES	\$1,069,450	\$823,000	\$954,000





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SUPPORT SERVICES

2019 BUDGET BY PROGRAM

Support Services has many different operations to support the people, financial, clinical and service success of North Central Health Care operations. Total Indirect Expenses, including the Support Services decreased by over \$650,000 from 2016 to 2017. Operational efficiencies and changing the way Support Services operates adds value to NCHC programs and is always top of mind.

Support Services Management	80
Business Operations	81
Corporate Administration	82
Employee Benefits	83
Environmental Services	84
Health Information	85
Housekeeping	86
Information Management Services	87
In-House Transportation	88
Laundry	89
Marketing & Communications	90
Nursing Home Housekeeping	91
Nutrition Services	92
Patient Financial Services	93
Pharmacy	94
Purchasing	95
Quality & Infection Control	96
Talent Development	97-98
Volunteer Services	99



SUPPORT SERVICES

■ MANAGEMENT TEAM



Brenda Glodowski
Chief Financial Officer



Kim Wieloch
Business Operations
Director



Carol Rich
Health Information
Manager



Cherie Mattson
Environmental Services
Leader - Housekeeping



Jenny McKenzie
Transportation
Manager



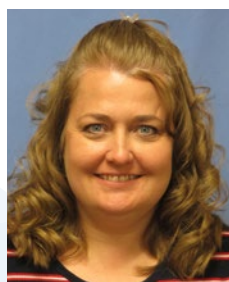
Chad Adams
Environmental Services
Leader - Laundry



Jessica Meadows
Communications &
Marketing Manager



Jen Gorman
Dietary Services
Director



Tammy Buchberger
Patient Financial
Services Director



Scott Van Ermen
Pharmacy Director



Kelly Henke-Kaiser
Purchasing Manager



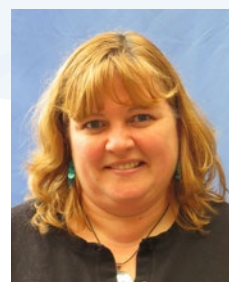
Jennifer Peaslee
Quality & Clinical
Transformation
Director



Chris Bleck
Human Resources
Manager



Judy Rannow
Organizational
Development
Manager



Laural Harder
Volunteer Services
Coordinator

SUPPORT SERVICES

BUSINESS OPERATIONS

DESCRIPTION

Business Operations includes accounting, payroll, accounts payable, cashiers/cash receiving and mailroom functions.

KEY ACCOMPLISHMENTS

- Annual financial and compliance audit FYE 12/31/17 resulted in no findings and no adjustments.
- Completing of monthly financial statements earlier.
- Additional financial tools are being provided to programs for better budget management.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Business Operations			
Director	1.0	1.0	1.0
Accounting Assistant	1.0	1.0	0.9
Accountant	1.0	1.0	1.0
Accounts Payable Rep.	1.0	0.8	0.8
Administrative Assistant	4.35	3.35	1.95
Payroll Specialist	1.0	1.0	1.0
TOTAL	9.15	8.15	6.65

BUDGET HIGHLIGHTS

Business Operations has a 1.5 FTE decrease from 2018 as the Switchboard oversight is being transferred to Marketing & Communications.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Contracted Services Revenue	-	-	-
Other Revenue	17,000	10,000	12,000
TOTAL REVENUE	\$17,000	\$10,000	\$12,000
Salaries	400,299	376,794	332,977
Benefits	152,712	137,398	123,684
Other Direct Expenses	256,159	263,098	264,118
TOTAL DIRECT EXPENSES	\$809,170	\$777,290	\$720,779



SUPPORT SERVICES

CORPORATE ADMINISTRATION

DESCRIPTION

Corporate Administration provides overall administrative leadership for the organization and is home to both Executive support and contracting functions. This program is allocated based on program direct expense.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Chief Executive Officer	1.0	1.0	1.0
Chief Financial Officer	1.0	1.0	1.0
Contract and Credentialing Specialist	1.0	1.0	1.0
Executive Assistant	2.0	2.0	2.0
Corporate Counsel	-	-	1.0
TOTAL	5.0	5.0	6.0

BUDGET HIGHLIGHTS

A position for Corporation Counsel has been added. The expense has been transferred from contracted legal expense to staff.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Salaries	498,635	513,793	654,664
Benefits	190,227	187,355	243,174
Other Direct Expenses	153,647	244,469	184,321
TOTAL DIRECT EXPENSES	\$842,509	\$945,617	\$1,082,159

■ EMPLOYEE BENEFITS

DESCRIPTION

The Employee Benefits program consolidates all of the employee benefit programs and costs to be allocated out to programs based on FTEs. Included in the Employee Benefits consolidation are employee health, disability, life, dental and vision insurance along with FICA, unemployment, workers compensation and retirement expenses. These expenses are allocated in the program budgets and are reported again solely for informational purposes.

BUDGET HIGHLIGHTS

Overall benefits have increased over 7% from 2018 to 2019 budget. Health insurance makes up the majority of the increase, with an increase of \$600,000. This represents 70% of the total increase. The WI Retirement System rate decreased for 2019, which is approximately a \$70,000 savings for the organization.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Salaries-	-	-	-
Benefits	11,626,000	11,938,000	12,800,000
Other Direct Expenses-	-	-	-
TOTAL DIRECT EXPENSES	\$11,626,000	\$11,938,000	\$12,800,000



SUPPORT SERVICES

■ ENVIRONMENTAL SERVICES

DESCRIPTION

Environmental Services has traditionally included Maintenance, Systems Maintenance, Housekeeping, Nursing Home Housekeeping, Laundry and Grounds. In 2017, Maintenance, Systems Maintenance and Grounds employees have been transferred to Marathon County. Housekeeping, Nursing Home Housekeeping and Laundry remain stand-alone programs with NCHC staff but now report to the Assistant Nursing Home Administrator.

BUDGET HIGHLIGHTS

North Central Health Care contracts for Environmental Services from Marathon County. There is no change in this line item for 2019. The cost of these support services is listed in each program as an in-kind, non-cash based revenue under "Marathon County Match (Maintenance)" and is included in their indirect allocation expense. Within each program these costs are allocated based on square footage occupied by the program. The reporting mechanism allows reimbursement of these costs to occur.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Other Revenue	-	-	-
TOTAL REVENUE			
Salaries	-	-	-
Benefits	-	-	-
Other Direct Expenses	1,685,623	1,685,623	1,685,623
TOTAL DIRECT EXPENSES	\$1,685,623	\$1,685,623	\$1,685,623

■ HEALTH INFORMATION

DESCRIPTION

Health Information Management (HIM) is responsible for maintaining NCHC's medical record. The record is the "bridge" between patients, regulators, consumers, payors and clinicians. NCHC has both paper and electronic records. The department helps our clinicians provide quality care to our patients.

KEY ACCOMPLISHMENTS

- Implemented offline solution for completing documentation for non-traditional BHS programs
- Optimized chart deficiency reporting by working with our Data Quality Specialist
- Implemented the capability to fax medical records to outside providers and insurance companies
- Developed a process to electronically sweep hundreds of outside provider records directly into our document imaging system thereby saving staff and paper costs

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Supervisor	1.0	1.0	1.0
RHIT	0.0	0.0	1.0
Administrative Assistant	5.2	5.6	5.6
TOTAL	6.2	6.6	7.6

BUDGET HIGHLIGHTS

The 2018 budget includes an additional 1.0 FTE for Registration Health Informational Technician (RHIT).

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Other Revenue	20,000	20,000	20,000
TOTAL REVENUE	\$20,000	\$20,000	\$20,000
Salaries	233,376	260,234	308,936
Benefits	89,032	94,895	114,754
Other Direct Expenses	19,789	15,489	16,933
TOTAL DIRECT EXPENSES	\$342,197	\$370,618	\$440,623



SUPPORT SERVICES

■ HOUSEKEEPING

DESCRIPTION

Housekeeping has two programs in Support Services. The Housekeeping program provides services to all non-nursing home areas while the Nursing Home Housekeeping program provides housekeeping services to Mount View Care Center. These two programs are separated for cost reporting purposes but are under the same management structure. This program is allocated based on square footage.

KEY ACCOMPLISHMENTS

- Housekeeping did not receive any improvement recommendations in our 2018 Joint Commission Accreditation Survey.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Supervisor	0.5	0.5	0.5
Lead Housekeeper	0.5	0.5	0.5
Housekeeping Aides	6.6	6.6	7.10
TOTAL	7.6	7.6	8.1

BUDGET HIGHLIGHTS

The 2019 Housekeeping budget again includes \$90,000 of contract revenue from payments related to services provided to the organizations leasing space on the NCHC campus as part of their rental costs. Marathon County receives the full rent payment for these spaces and reimburses NCHC on an actual cost basis for these services. An additional 0.5 FTE position is being added to provide services to the new Employee Health & Wellness Center (clinic). Some of the cost is offset by a reduction in contract services.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Contracted Services	-	90,000	90,000
TOTAL REVENUE		\$90,000	\$90,000
Salaries	233,565	238,506	257,465
Benefits	89,104	86,971	95,635
Other Direct Expenses	101,124	105,055	78,954
TOTAL DIRECT EXPENSES	\$423,793	\$430,532	\$432,054

■ INFORMATION MANAGEMENT SERVICES

DESCRIPTION

Information Management Services (IMS) is responsible for the oversight of the organization's overall information systems application portfolio. They support 27 different solutions with help from the City County Information Technology Commission. Some key tasks that IMS routinely provides to over 700 employees are training, production support, system enhancements and break-fix.

KEY ACCOMPLISHMENTS

- Automation of the final save function within our electronic health record (EHR). This will save hundreds of hours for our employees and psychiatrists. This will ultimately benefit our clients because clinicians will spend less time documenting.
- Developed new training opportunities for new employee orientation and onboarding.
- Developed forms and/or workflows in our EHR to satisfy new Joint Commission requirements. In addition, developed audit capabilities to verify ongoing compliance.
- Established 38 new measurable quality metrics.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Senior Executive	1.0	1.0	1.0
Project Manager	-	0.0	1.0
Information Services Manager	1.0	0.0	-
Business Analyst Lead	1.0	1.0	1.0
Programming Systems Assistant	2.0	3.0	2.0
Clinical System Analyst	1.0	1.0	1.0
Business Analyst	2.0	0.0	1.0
Quality Data Specialist	0.0	1.0	1.0
TOTAL	8.0	7.0	8.0

BUDGET HIGHLIGHTS

The 2019 budget reflects the addition of a 1.0 FTE Project Manager. IT service agreements also increase due to anticipated price increases and the addition of other softwares.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Other Revenue	-	-	-
TOTAL REVENUE	-	-	-
Salaries	498,846	491,807	566,969
Benefits	190,307	179,338	210,600
Other Direct Expenses	1,654,474	1,548,783	1,637,439
TOTAL DIRECT EXPENSES	\$2,343,627	\$2,219,928	\$2,415,008



SUPPORT SERVICES

■ IN-HOUSE TRANSPORTATION

DESCRIPTION

In-House Transportation maintains the NCHC fleet, which includes cars, buses and vans used for client transportation. This program also provides courier services, which may include trips to the Antigo and Merrill Centers, bank, lab and hospitals.

POPULATION SERVED

Employees and clients of NCHC.

HOURS OF SERVICE

Monday – Friday, 7:00 am – 5:00 pm

KEY ACCOMPLISHMENTS

- Produced and collaborated on a facility-wide ROAD-eo to assess and manage vehicular risk.
- Leveraged labor to increase efficiencies and collaboration between In-house and Demand services.
- All Transportation employees are engaged in monthly safety and patient experience training.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Salaries	103,420	105,608	107,185
Benefits	39,454	38,510	39,814
Other Direct Expenses	(109,063)	(108,450)	(122,266)
TOTAL DIRECT EXPENSES	\$33,811	\$35,668	\$24,733

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Manager	0.25	.25	.25
Coordinator	1.0	1.0	1.0
Logistics Worker	1.5	1.5	1.5
TOTAL	2.75	2.75	2.75

BUDGET HIGHLIGHTS

The 2019 budget is comparable to the 2018 budget.

SUPPORT SERVICES

■ LAUNDRY

DESCRIPTION

Laundry provides laundry services for the nursing home, hospital, CBRF and MMT programs. The service includes linen as well as personal laundry. Laundry is also done for housekeeping and food service. This program is allocated based on pounds of laundry processed.

KEY ACCOMPLISHMENTS

- Laundry continues to work on patient satisfaction and timely return of personal laundry.
- Laundry continues to assist the local warming center with their linen during the winter months of operation.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Team Coordinator	1.0	1.0	1.0
Laundry Worker	6.0	5.0	5.0
TOTAL	7.0	6.0	6.0

BUDGET HIGHLIGHTS

The 2019 budget reflects a consistency with staffing. Savings are being generated from a decrease in supplies and linen.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Other Revenue	-	-	-
TOTAL REVENUE	-	-	-
Salaries	218,942	193,361	190,179
Benefits	83,525	70,509	70,642
Other Direct Expenses	74,019	83,600	68,930
TOTAL DIRECT EXPENSES	\$376,486	\$347,470	\$329,751



SUPPORT SERVICES

■ MARKETING & COMMUNICATIONS

DESCRIPTION

Marketing and Communications is the central communication area for NCHC's internal and external communications. This includes working with staff communications internally, and media communications externally. The marketing of services is also provided through this program. This program is allocated based on direct expense.

KEY ACCOMPLISHMENTS

- Produced and launched a brand new responsive design website on a modern platform.
- Increased engagement and feedback on social media from those who utilize services to use in marketing efforts as well as use for internal communication to engage and retain staff.
- Hired a specialist to add to the Communications team to be able to quickly respond to communication needs and meet the increasing need for communication pieces and advanced technology.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Coordinator	1.0	1.0	1.0
Specialist	0.0	1.0	1.0
Switchboard Operator	-	-	1.95
TOTAL	1.0	2.0	3.95

BUDGET HIGHLIGHTS

The 2019 budget reflects a 1.95 FTE increase due to the transfer of switchboard operator functions transferred to this program. The oversight and budget of the organizational general advertisement is also being transferred here.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Salaries	73,382	117,839	186,976
Benefits	27,995	42,970	69,452
Other Direct Expenses	75,361	111,312	133,307
TOTAL DIRECT EXPENSES	\$176,738	\$272,121	\$389,735

SUPPORT SERVICES

■ NURSING HOME HOUSEKEEPING

DESCRIPTION

Housekeeping has two programs in Support Services. The Housekeeping program provides services to all non-nursing home areas while the Nursing Home Housekeeping program provides housekeeping services to Mount View Care Center. These two programs are separated for cost reporting purposes but are under the same management structure. This program is allocated based on square footage.

KEY ACCOMPLISHMENTS

- In the past 4 years during our annual inspection we have had no environmental citations. The Housekeeping staff practice patient directed care by consistent assignment and do the added extra touches to make our residents feel welcome.
- In the last year, we have implemented a new cleaning system for our deep cleaning of rooms that has reduced our labor time in room cleaning.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Supervisor	1.0	1.0	0.5
Housekeeping Aides	11.0	10.5	14.65
Lead Housekeeper	0.0	0.0	0.5
Homemaker	3.85	3.85	0
TOTAL	15.85	15.35	15.65

BUDGET HIGHLIGHTS

A 0.3 FTE is being added back due to the reopening rooms in Long Term Care. The cost is offset by other reductions in the supply and contract services budget lines.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Salaries	472,471	471,492	477,901
Benefits	180,245	171,930	177,516
Other Direct Expenses	108,355	102,177	73,663
TOTAL DIRECT EXPENSES	\$761,071	\$745,599	\$729,080



SUPPORT SERVICES

NUTRITION SERVICES

DESCRIPTION

Nutrition Services provides meal service for the Nursing Home, Inpatient Hospital, CBRF, MMT and Adult Day Programs. Required Dietitian consulting is also provided to these locations based on regulatory requirements. This area provides service for the cafeteria, which is also a revenue generating function. This program is allocated based on number of meals served.

KEY ACCOMPLISHMENTS

- Continued to enhance the dining experience by establishing consistent assignment to our neighborhoods. This aids in patient satisfaction.
- Rolled out a new meal delivery system to our Inpatient, MMT and CBRF programs.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Director	1.0	1.0	1.0
Dieticians	1.6	1.6	1.6
Supervisor	1.0	1.0	1.0
Administrative Assistant	1.0	1.0	1.0
Cooks	8.8	8.8	8.0
Dietary Aides	21.0	20.0	20.95
TOTAL	34.4	33.4	33.55

BUDGET HIGHLIGHTS

A 0.8 FTE for a Cook is being transferred to a 0.95 Dietary Aide. A 5% increase in food is anticipated.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Other Revenue	120,000	150,000	180,000
TOTAL REVENUE	\$120,000	\$150,000	\$180,000
Salaries	1,181,731	1,182,845	1,151,341
Benefits	450,825	431,326	427,664
Other Direct Expenses	933,129	725,303	741,745
TOTAL DIRECT EXPENSES	\$2,565,685	\$2,339,474	\$2,320,750

PATIENT FINANCIAL SERVICES

DESCRIPTION

Patient Financial Services enrolls and verifies all clients admitted into NCHC programs. This includes demographic and benefit verification including prior authorization. Patient Financial Services provides all billing of services for all revenue programs of NCHC, which equates to approximately 10,000 bills per month. This program is allocated based on the number of clients in NCHC programs.

KEY ACCOMPLISHMENTS

- NCHC is an approved CAC (Certified Application Counselor) organization to help patients understand, apply and enroll for health insurance coverage through the Marketplace to assist our patients in obtaining health insurance coverage.
- A Revenue Cycle Committee has been formed to improve the process which will increase collections.
- Days in Accounts Receivable continued to improve and is at 35-38 days. This is the best the organization has had.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Director	1.0	1.0	1.0
Billing Analyst	1.0	1.0	1.0
Patient Account Rep.	5.0	4.0	4.0
Administrative Assistant	1.3	1.3	1.3
Provider Credentialing	1.0	1.0	-
Information Systems Analyst	0.0	1.0	2.0
Benefits Specialist	0.0	1.0	1.0
Enrollment Specialist	4.0	4.0	4.0
Prior Authorization Rep.	1.9	1.9	0.9
TOTAL	15.2	16.2	15.2

BUDGET HIGHLIGHTS

A 1.0 FTE is being reduced. Changes in collection expenses are anticipated with changing to a different collection agency during 2018.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Other Revenue	90,000	90,000	70,000
TOTAL REVENUE	\$90,000	\$90,000	\$70,000
Salaries	584,228	645,290	611,737
Benefits	222,881	235,305	227,229
Other Direct Expenses	88,020	119,120	86,087
TOTAL DIRECT EXPENSES	\$895,129	\$999,715	\$925,053



SUPPORT SERVICES

■ PHARMACY

DESCRIPTION

Pharmacy fills prescriptions for the nursing home, hospital, some of the residential locations, Community Treatment and employees who are enrolled in NCHC's employee health insurance plan.

KEY ACCOMPLISHMENTS

- Continued focus on streamlining of the packaging system as well as an increased focus on medication reconciliation on our Inpatient Hospital.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Director	1.0	1.0	1.0
Pharmacist	2.25	2.25	2.4
Pharmacy Tech.	5.0	5.0	5.0
Billing Specialist	1.0	0.0	1.0
TOTAL	9.25	9.25	9.4

BUDGET HIGHLIGHTS

Pharmacist time is increasing by .15 FTE due to increasing prescriptions. Pharmacy revenue continues to increase also due to volume increases.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Net Patient Revenue	4,048,000	4,100,000	4,700,000
Contracted Services Revenue	279,800	500,000	400,000
Allocated Revenue	16,390	16,762	8,000
Cash Discounts and Rebates	-	-	-
County Appropriation	115,445	-	-
Marathon County Match (Maintenance)	17,571	19,887	19,887
TOTAL REVENUE	\$4,491,206	\$4,636,649	\$5,127,887
Salaries	649,319	668,662	694,994
Benefits	247,712	243,828	258,155
Drugs	2,975,000	2,975,000	3,547,589
Other Direct Expenses	160,263	213,347	-
TOTAL DIRECT EXPENSES	\$4,032,294	\$4,100,837	\$4,500,738

SUPPORT SERVICES

■ PURCHASING

DESCRIPTION

Purchasing is the central purchasing service for all of NCHC. This area orders and delivers purchases to all programs. This area is also responsible for monitoring proper purchasing based on the contract with the buying group that NCHC belongs to. This program is allocated based on number of requisitions.

KEY ACCOMPLISHMENTS

- Focus on continued efficiencies of deliverables.
- Improved internal customer satisfaction scores.
- Implement a standardized product list.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Manager	1.0	1.0	1.0
Administrative Assistant	0.2	0.2	0.2
Storekeeper	2.0	2.0	2.0
TOTAL	3.35	3.2	3.2

BUDGET HIGHLIGHTS

The 2019 Purchasing budget reflects a status quo in operations.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Other Revenue	60,000	50,000	55,000
TOTAL REVENUE	\$60,000	\$50,000	\$55,000
Salaries	131,402	134,937	137,746
Benefits	50,129	49,205	51,166
Other Direct Expenses	45,837	48,437	45,989
TOTAL DIRECT EXPENSES	\$227,368	\$232,579	\$234,901



■ QUALITY & INFECTION CONTROL

DESCRIPTION

Quality at North Central Health Care is responsible for providing care and services that are: safe, effective, person-centered, timely, efficient, equitable and ethical. Passion to do the best for those we serve is combined with the deliberate and effective integration of evidence-based strategies to drive outcomes in all dimensions of quality: People Engagement, Service Excellence, Clinical Effectiveness, Community Impact, and Financial Efficiency.

KEY ACCOMPLISHMENTS

- Onboarding of the new Clinical Quality and Transformation Director.
- Achieved Joint Commission Re-accreditation through successful leadership across the organization.
- Patient Experience Monitoring and Improvement: focus on effective survey processes with transition to new survey vendor, Press Ganey.
- Implementation of Retained County Authority (RCA) Performance Standards and Outcomes
- Recruitment and Onboarding of new Safety & Environmental Coordinator.
- Suicide Prevention Initiatives to improve our practice and care of high risk individuals.
- Restructuring of Quality Committees to take a more integrated approach to improving safety, quality, experience and engagement to influence performance.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Quality & Clinical			
Transformation Director	1.0	1.0	1.0
Quality Data Analyst	2.0	0.0	0.0
Safety & Environmental			
Coordinator	1.0	1.0	1.0
Infection & Prevention			
Specialist	1.0	0.0	1.0
Phlebotomist	0.5	1.0	0.5
TOTAL	5.5	2.0	3.5

BUDGET HIGHLIGHTS

Safety and Lab Services are being restructured to Quality and Infection Control. The prior Quality Director position is being transferred back and is reclassified to Quality and Clinical Transformation Director. An Infection Preventionist is being added and the 1.0 FTE Phlebotomist is being reduced to 0.5 FTE.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Salaries	437,570	117,819	264,194
Benefits	166,931	42,963	98,134
Other Direct Expenses	168,435	127,115	54,178
TOTAL DIRECT EXPENSES	\$772,936	\$287,897	\$416,506

■ TALENT DEVELOPMENT

The Talent Development Team consists of professionals in Human Resources and Organizational Development. Both programs are allocated based on FTE's in each program.

HUMAN RESOURCES DESCRIPTION

The Human Resource department provides knowledge, administrative support, advice and talent management oversight to ensure organizational success. Human Resource staff partner with and support employees from recruitment to retirement in the following areas:

- Recruitment
- Hiring
- Employee Relations
- Performance Management
- Benefits and Insurance Administration
- Compensation
- Retirement Contributions
- Paid Leave Time (PLT)
- Employee Health

KEY ACCOMPLISHMENTS

- 12-month average retention was 87.4% with target rate of 78 - 82%
- 12-month average vacancy rate of 8.4% even with program expansion, which is down over 10% from a year ago.
- Implementation of Income Continuation Insurance reducing projected benefit budget.

ORGANIZATIONAL DEVELOPMENT DESCRIPTION

Organizational Development increases collaboration, efficiency and effectiveness across the organization by providing support, standards, processes, expectations, and professional development in the following areas:

- Orientation & Onboarding
- Competency & Skill Development
- Education & Training
- Management & Leadership Development
- Interpersonal Skill Development
- Team Building
- Process Improvement
- Change Management
- Employee Engagement

KEY ACCOMPLISHMENTS

- Expanded organizational orientation to include diversity, understanding the populations we serve, dementia, trauma-informed care and clinical orientation.
- Established Learning Council at NCHC.
- Developed updated nurse competencies with Nurse Practice Council.
- Worked with areas to be prepared for and provided support during surveys.
- Worked with managers to update job descriptions.
- Audited and finalized competencies for all job titles and began assigning job specific checklists to validate competencies.
- Increased consistency and quality of professional development tracking.
- Implemented organization wide clinical supervision checklists.
- Added new professional development sessions for managers and began offering sessions to staff.



■ TALENT DEVELOPMENT

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Human Resources			
Executive	1.0	1.0	1.0
HR Manager	1.0	1.0	1.0
HR Generalist	2.0	2.0	1.0
HRIS Analyst	1.0	1.0	0.0
Human Resources			
Assistant	1.0	1.0	1.0
Employee Health			
Specialist	0.0	1.0	1.0
Recruiter	-	-	1.0
Compensation &			
Benefit Analyst	-	-	1.0
Organizational			
Development Manager	1.0	1.0	1.0
Development Specialist	1.0	1.0	1.0
Instructional Designer	-	-	1.0
TOTAL	8.0	9.0	10.0

BUDGET HIGHLIGHTS

The 2019 budget includes the addition of a 1.0 FTE Instructional Designer. For 2019, Human Resources and Organizational Development will be split into two separate programs. Staff development oversight for the organizational development funding will move to Organizational Development.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Other Revenue	-	-	-
TOTAL REVENUE			
Salaries	476,798	596,885	655,136
Benefits	181,896	217,655	243,350
Other Direct Expenses	259,840	322,050	600,102
TOTAL DIRECT EXPENSES	\$918,534	\$1,136,589	\$1,498,588

VOLUNTEER SERVICES

DESCRIPTION

Volunteers play a very important role at North Central Health Care as part of our team. They offer clients, patients, residents, families and staff members their compassion, skills, talent and time. In so doing, North Central's professionals are able to devote more time to direct patient care and recovery.

KEY ACCOMPLISHMENTS

- In 2017, 211 volunteers donated 11,323 hours of service.
- Recruited 38 new volunteers in 2017.
- Installation of a new Point of Sale (POS) system in the Gift Shop allows for credit card payments and for staff to use their badge as a form of payment, thus increasing sales.
- Established NCHC as a community-based prevocational work site for a partnering agency.
- Continued operation of the Canteen after the departure of the community senior programs.
- Coordinate the annual Holiday "gift" program. Work with local organizations and donors to provide over 400 gifts to the residents of Mount View and clients being served by our programs that would not otherwise receive a gift during the Holidays.

STAFFING

Position	2017 FTE's	2018 FTE's	2019 FTE's
Manager	1.0	1.0	1.0
Administrative Assistant	0.55	0.55	.55
TOTAL	1.55	1.55	1.55

BUDGET HIGHLIGHTS

Additional revenue is added for increased operations of the canteen in the former ADRC space.

BUDGET SUMMARY

	2017 Budget	2018 Budget	2019 Budget
Gift Shop	-	22,000	25,000
TOTAL REVENUE	-	\$22,000	\$25,000
Salaries	64,955	66,329	67,750
Benefits	24,780	24,187	25,166
Other Direct Expenses	18,186	27,966	26,193
TOTAL DIRECT EXPENSES	\$107,921	\$118,482	\$119,109





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CAPITAL BUDGET

North Central Health Care has a multi-faceted process for capital budgeting and funding with each of our county partners. Capital budgeting is a process that involves the identification of potentially desirable projects for capital expenditures, the subsequent evaluation of capital expenditure proposals, and the selection of certain proposals that meet certain criteria. North Central Health Care's threshold to capitalize an asset and depreciate its use requires the purchase to be \$2,500 or more and have a useful life of two or more years. Straight-line depreciation methods are used and funding for capital assets are available for the approved year and two consecutive years. Equipment with a value of less than \$2,500 are budgeted separately and expensed within a program's budget. Movable equipment of any cost is considered an operational expense and is budgeted for and approved as either an expense or when eligible a capitalized asset.

Generally, the use of capital can be summarized in the following categories:

- 1) Replacement: needed to continue current operations
- 2) Replacement: cost reduction
- 3) Expansion of current services
- 4) Expansion into new services
- 5) Safety and/or environmental projects
- 6) Other projects

CAPITAL BUDGETING PROCESSES

Marathon County CIP

All anticipated building renovation projects, regardless of price, must be submitted to Marathon County Facilities & Capital Maintenance by May 1st of each year so the projects can be designed, scoped and priced for the following year. Any building alteration of more than \$30,000 must be submitted by June of each year to be considered for funding by the Marathon County for the following year. There is a detailed ranking and funding process for all projects submitted.

NCHC Capital Budget

If a project is ranked (approved) but does not get funded, NCHC can budget for and pay for these projects using NCHC's available capital funding, even if the project exceeds \$30,000. Building projects under \$30,000 are considered operational projects and are exclusively funded by NCHC through the NCHC capital budgeting process. These projects still must be approved by the County in advance.

All asset acquisition which can be capitalized must be submitted and approved as part of NCHC's capital budget regardless of funding source.

Rolling Stock

Rolling stock includes vehicles, buses, and small equipment intended for NCHC programs. Rolling stock purchase for use in programs serving Marathon County fall under Marathon County's policy and procedures on rolling stock in determining need and replacement schedule. Rolling stock intended for Marathon County programs that are more than \$5,000 must be approved by Marathon County. Purchases under \$5,000 are considered operational expenses and are funded by NCHC.

Any rolling stock request that is requested for funding but does not receive funding approval by Marathon County may be funded by NCHC if it receives approval by the NCHC Board. All rolling stock purchases for use in Langlade and Lincoln County, regardless of price, are included in NCHC's budget.



CAPITAL IMPROVEMENT REQUESTS SUBMITTED TO MARATHON COUNTY

For the 2019 Budget, NCHC only submitted eligible Rolling Stock replacement requests to Marathon County in anticipation of the \$73 Million NCHC Main Campus renovation approved under the Master Facility Plan adopted by the Marathon County Board in June 2018.

CAPITAL REQUEST	DESCRIPTION OF REQUEST	ESTIMATED COST
Rolling Stock - Replacement	1 – Mini Van (\$27,000)	\$197,000
	2 – Passenger Sedans (\$25,000 each)	
	2 – Small Buses w/Wheel Chair Lifts (\$60,000 each)	

CAPITAL FUNDED IN NCHC 2019 BUDGET

PROGRAM NUMBER	PROGRAM	DESCRIPTION OF REQUEST	COST OF REQUEST	REASON FOR REQUEST
10-100-0205	Human Resources	Office Chairs (4)	\$1,460	Replacement Item*
10-100-0205	Human Resources	HRIS Replacement	\$136,000	Replacement Item
10-100-0210	Organizational Development	Office Chairs (4)	\$1,460	Replacement Item*
10-100-0300	Business Operations	Sit to stand workstations (7)	\$3,850	Additional Item
10-100-0300	Business Operations	Office Chairs (2)	\$730	Replacement Item*
10-100-0500	Information Technology Services	Replace DVR in BHS	\$11,200	Replacement Item
10-100-0500	Information Technology Services	Safety Buttons	\$112,000	New
10-100-0500	Information Technology Services	NCHC data center upgrades	\$70,000	Replacement Item
10-100-0500	Information Technology Services	Laptop replacement devices	\$100,000	Replacement Item
10-100-0600	Patient Financial Services	Sit to stand workstations (10)	\$5,550	Additional Item
10-100-0600	Patient Financial Services	Office chairs (10)	\$3,650	Replacement Item*
10-100-0720	Laundry	Small piece folder-return to feed, G.A. Braun Precision Series	\$13,000	Replacement Item
10-100-0740/0745	Housekeeping/NH Housekeeping	Burnisher (2)	\$4,000	Replacement Item
10-100-0740/0745	Housekeeping/NH Housekeeping	Tornado roam battery backpack vacuum with extra battery pack (3)	\$6,000	Additional Item
10-100-0740	Housekeeping	Windsor Armanda BRC 40/22 carpet extractor	\$4,200	Additional Item
10-100-0745	NH Housekeeping	2710 Rider burnisher w/420H wet batteries on board charger	\$20,500	Replacement Item
20-100-0805	Residential Admin	Washers (4) (Andrea, Chadwick, Bissell, Heather)	\$3,800	Replacement Item
20-100-0805	Residential Admin	Dryers (4) (Andrea, Chadwick, Bissell, Heather)	\$3,000	Replacement Item
20-100-2000	Outpatient-Marathon	Badge reader for three double doors to increase safety	\$22,372	Additional Item
20-100-2375	Clubhouse	Office Chairs (6)	\$2,190	Replacement Item*
20-100-2375	Clubhouse	Purchase Clubhouse Building	\$319,000	Purchase building
20-115-1400	Jelinek	Office Chairs (2)	\$730	Replacement Item*
20-120-1400	Forest Street	Office Chairs (2)	\$730	Replacement Item*
25-100-0900	NH Administration	Office chairs for all nursing stations (15)	\$5,475	Replacement Item*
25-100-3000	Post Acute Care	Hover mat pumps (5)	\$4,750	Reduce staff time
25-100-3000	Post Acute Care	Regular air mattresses (2)	\$6,000	Replacement Item
25-100-3100	Long Term Care	Regular air mattresses (2)	\$6,000	Replacement Item
25-100-3100	Long Term Care	Power wheel chair assist device	\$10,000	Reduce staff time
25-100-3200	Legacies	Regular air mattresses (2)	\$6,000	Replacement Item
25-100-3200	Legacies	Recliners for common areas (12)	\$18,000	Replacement Item
25-100-3800	Vent Services	Ice machine	\$3,000	Additional Item
25-100-3800	Vent Services	IV pumps (3)	\$15,000	Replacement Item
30-250-0105	Tomahawk Administration	Workstations (4)	\$13,000	Replacement Item
TOTALS			\$932,647	

* Purchase Together





North Central Health Care

Person centered. Outcome focused.

Wausau Campus

1100 Lake View Drive
Wausau, Wisconsin 54403
715.848.4600

Mount View Care Center

2400 Marshall Street
Wausau, Wisconsin 54403
715.848.4300

Merrill Center

607 N. Sales Street, Suite 309
Merrill, Wisconsin 54452
715.536.9482

Antigo Center

1225 Langlade Road
Antigo, Wisconsin 54409
715.627.6694

*Langlade, Lincoln and Marathon Counties partnering together
to provide compassionate and specialized care for people with
complex behavioral and skilled nursing needs.*

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Administration Office at 715.848.4405.*