



North Central Health Care
Person centered. Outcome focused.

OFFICIAL NOTICE AND AMENDED AGENDA

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

Thursday, October 21, 2021 at 3:00 PM
North Central Health Care – **Board Room**
1100 Lake View Drive, Wausau, WI 54403

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

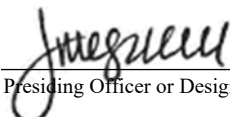
Phone Number: 1-408-418-9388 **Access Code:** 2487 364 7130 **Meeting Password:** 1234

AGENDA

- 1. Call to Order**
- 2. Public Comment (15 Minutes)**
- 3. Approval of the September 23, 2021, Executive Committee Meeting Minutes**
- 4. Review of Draft NCCSP Board Agenda for October 28, 2021**
- 5. Operational Functions Required by Statute, Ordinance, or Resolution**
 - A. Discussion and Possible Recommendation for Selection of 2021 Financial Audit Firm
 - B. Discussion and Possible Recommendation for Community Corner Clubhouse
 - C. Discussion and Possible Recommendation for Location of Adult Day Services Program in Marathon County
 - D. Discussion and Possible Recommendation for the Homelessness Initiative
- 6. Educational Presentations/Outcome Monitoring Reports**
 - A. CEO Report
 - B. Organizational and Program Dashboards
 - C. September Financials
 - D. Board Work Plan
- 7. Next Meeting Date & Time, Location, and Future Agenda Items**
 - A. NCCSP Board of Directors Meeting October 28, 2021
 - B. Committee members are asked to bring ideas for future discussion and educational presentations to the NCCSP Board
 - C. Next Meeting: **Thursday, November 18, 2021**, in the North Central Health Care Assembly Room
- 8. Announcements**
- 9. Adjournment**

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

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



Presiding Officer or Designee

DATE: 10/20/2021 TIME: 9:00 AM BY: D. Osowski

NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

September 23, 2021

3:00 p.m.

Wausau Board Room

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

Staff Present: Jarret Nickel, Jennifer Peaslee, Marne Schroeder, Jaime Bracken and Bobby Splinter (via phone)

Others Present: Dejan Adzic, Deputy Corporation Counsel

Call to Order

- Meeting was called to order at 3:07 p.m. by Chair Gibbs.

Public Comment

- None

Approval of September 10, 2021 Executive Committee Meeting Minutes

- **Motion**/second, Leonard/Stowe, to approve the September 10, 2021 Executive Committee Meeting Minutes. Motion carried.

Review of Draft NCCSP Board Agenda for September 30, 2021

- Add: Discussion and possible action on Draft 2022 Budget for NCHC
- Notify Chair Gibbs by Friday, 9/24/21 with any additional agenda items.

Operational Functions Required by Statute, Ordinance, or Resolution

- Discussion and Possible Recommendation for Change in Bed Licenses Held for Mount View Care Center and Pine Crest Nursing Home – J. Nickel
 - Recommendations as outlined in the memo in the meeting packet were reviewed.
 - Having more licensed beds for Mount View Care Center (MVCC) than could be physically in the building is not needed or we would need to have the ability to convert to semi-private rooms. Reducing beds from 188 to 154 will save \$69,360 annually.
 - Pine Crest census was around 130 prior to Covid and is currently in the mid-90s. Anticipate some recovery but not to justify the current number of licensed beds. Also, considering the recent CliftonLarsonAllen market study as well as factoring in Aspirus recently acquiring a local hospital, we anticipate stronger referrals may be forthcoming. Reducing beds to 120 would yield an annual savings of \$81,600 and allow for post-Covid census recovery.

- MVCC nursing tower will have 96 beds with an additional 58 on the 2nd floor of the current MVCC. Memory care continues to increase and the 2nd floor could expand with more memory care if needed.
 - Once licensed beds are reduced the opportunity to acquire additional beds is difficult i.e., buying beds from other nursing homes that are closing.
 - If approved, the recommendation will be presented to the NCCSP Board and if approved, the recommendation will be presented to each County Board.
 - Committee recommended the skilled nursing bed licensure recommendations be presented to the NCCSP Board for consideration.
- Discussion and Possible Direction on the Nursing Home Operations Committee
 - Initially one Nursing Home Operations Committee (NHOC) was established and includes membership from Marathon and Lincoln Counties. NHOC looks at the operations. The physical plant is the responsibility of each county.
 - Discussion has focused on whether there should be a separate NHOC for each county.
 - Lincoln County Board and community members are passionate about Pine Crest Nursing Home. While they are not interested in discontinuing the management of the nursing home, they would like more specifics about the operations and the opportunity to ask more informal questions rather than high level i.e., dashboard.
 - The Committee charter indicates the purpose is to align the nursing homes together and benefit on efficiencies i.e., pharmacy, CCIT, strategic planning, performance expectations, etc.
 - Operational reports and discussion can be adjusted to include more personal detail. Committee members will be asked what they would like to include and adjust meetings accordingly.

Discussion on the Direction of the North Central Health Foundation

- North Central Health Foundation (NCHF) has recently struggled to find footing and gain ability to raise funds in community. There was an attempt to revitalize the Foundation through a shared Executive Director position, but were unsuccessful in filling the position and then Covid hit. Funds are limited and mostly undesignated. Given the nature of the organization we are recommending consideration to move the NCHF to the Community Foundation and no longer operate NCHF through NCHC leadership. The intent is not to change its use but be managed by the Community Foundation.
- **Motion**/second, Leonhard/Stowe, to have NCHC staff and Corporation Counsel Office continue to evaluate how to affect a transfer of funds from NCHF to the Community Foundation for ongoing management and collection. Motion carried.

Educational presentations/Outcome Monitoring Reports

- CEO Report
 - As of today, there are 3 staff with symptoms and a total of 33 staff out. We continually monitor the Covid rate in our counties and follow CDC guidelines. When the rate is above 10% which significantly impacts operations. Currently Langlade and Lincoln counties are above 10% positivity rate. No direction yet on a mandated vaccine from CDC and OSHA.

- Nursing tower has been under construction since October 2020. We received DHS final approval yesterday. We anticipate the City of Wausau to give us occupancy approval soon and have plans to occupy the new tower with residents beginning on October 11. A Ribbon Cutting event is being planned for October 5.
- 2022 budget planning is progressing which includes updating our operational plan and verifying resources are identified.
- Organizational Dashboard was reviewed. Highlights included the vacancy rate trending below target and positively impacting the year-to-date score. In June and July 90 new hires were onboarded. Patient experience has been a focus of staff and is seeing positive results. Both MVCC and Pine Crest have received a 4 Star Rating (of 5 Stars). Out of County placements are doing well even with challenges to our physical building and anticipate improvement with the new facility in 2022.
- August Financials
 - Month to date actual has a positive variance to revenue of 3.2%. Much has come with efficiencies gained with Cerner. Expenses are under budget. We are working on why contracted services and drug expenses have increased and looking into efficiencies in physician services and bringing in new hires. Financials are stable overall with a slight uptick in supplies especially for Covid-related items.
 - The Adult Behavioral Health Hospital variance is related to a budget based on a higher census than current experience. Youth Behavioral Health Hospital has full occupancy, 8, today for the first time. In Community Living we are making changes to Lincoln Industries by moving Adult Day Services to the community by year end and moving pre-vocational services out of the space also. We will no longer be providing operations in the Forest Street Apartments after identifying that services provided did not match the offerings and clientele. Residents will be moving out by end of month.
 - Both MVCC and Pine Crest continue to experience challenges with inability to admit new residents. Funding comes through Medicare which is most impacted by enhanced precautions. Aquatics had a strong month but also have challenges due to impact on referral services due to Covid.
- Board Work Plan
 - We are back on track with most of the items.

Discuss the NCHC 2022 Budget and Priorities from the Executive Committee and Possible Recommendations

- Staff continue to work through the 2022 budget process. Our budget request is a 10% increase in levy from each county.
- The request for increased levy is a result of several factors. The growth in program operations continues to be challenged with small operating margins, our master facility plan has caused operational challenges with shutting down programs for months at a time, there have been no increases in levy for a number of years and yet NCHC has consistently asked to provide more, and wages continue to be a challenge.
- 2022 will be a year of building and setting up the operations for success.

- Committee agreed that no increases for years has made a significant impact in addition to the challenges from Covid and related high expenses and understands the reasons for the request for increase in levy. Marathon County will see if ARPA funds could be utilized for costs associated with the pandemic on NCHC and help find a solution.
- Additional detail on what is driving costs would be helpful as the 2022 budget is reviewed.

Next Meeting Date & Time, Location and Future Agenda Items

- NCCSP Board of Directors Meeting, September 30, 2021, 3:00 p.m. at North Central Health Care Wausau Board Room.
- Ideas for future discussion and educational presentations to the NCCSP Board – None

Announcements

- None

Adjournment

- **Motion**/second, Stowe/Leonhard, to adjourn the meeting at 4:48 p.m. Motion carried.

Minutes prepared by Debbie Osowski, Executive Assistant to CEO

OFFICIAL NOTICE AND AGENDA

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

Thursday, October 28, 2021 at 3:00 pm

North Central Health Care, Assembly Room, 2400 Marshall Street, Wausau WI 54403

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

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

*Meeting number: 1-408-418-9388 Access Code: **XXXXXXXX***

Our Mission

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

AGENDA

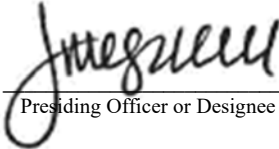
1. CALL TO ORDER
2. CHAIRMAN'S ANNOUNCEMENTS
3. PUBLIC COMMENT FOR MATTERS APPEARING ON THE AGENDA (Limited to 15 Minutes)
4. CONSENT AGENDA AND MONITORING REPORTS
 - A. Board Minutes and Committee Reports
 - i. ACTION: *Motion to Approve the September 30, 2021, NCCSP Board Minutes*
 - ii. FOR INFORMATION: Minutes of the September 23, 2021, Executive Committee Meeting
 - B. Executive Operational Reports
 - C. Policy Governance Monitoring Reports
 - i. Recent State, Federal, and Accreditation Reports
5. BOARD EDUCATION
 - A. Complaint and Grievance Policy (5 Minutes) – J. Peaslee
 - B. Employee Grievance Policy (5 Minutes) – J. Peaslee/J. Nickel
 - C. Occurrence Reporting Policy (5 Minutes) – J. Peaslee
 - D. Utilization Review Plan (5 Minutes) – J. Peaslee/Dr. Gouthro

6. BOARD DISCUSSION AND ACTION
 - A. CEO Report and Board Work Plan (5 Minutes) – J. Meschke
 - B. ACTION: *Motion to Accept Dashboards* (5 Minutes) – J. Meschke
 - C. ACTION: *Motion to Accept the September Financials* (5 Minutes) – J. Meschke
 - D. ACTION: *Motion for Approval of 2022 Budget Proposal* (20 Minutes) – J. Meschke
 - E. ACTION: *Motion for Approval of Board Policy:*
 - i. Physician Compensation Policy (5 Minutes) – Dr. Gouthro/J. Peaslee/D. Adzic
 - ii. Compensation Administration Manual and Pay Grades (5 Minutes) – J. Nickel
 - F. Review Diversity, Equity, and Inclusion Plan (10 Minutes) – J. Nickel
 - G. Discussion and Direction of the North Central Health Foundation (10 Minutes) – J. Meschke
7. MOTION TO MOVE INTO CLOSED SESSION
 - A. Pursuant to Section 19.85(1) (c) and (f) Wis. Stats. for the purpose of considering employment and performance evaluation of any public employee over which the governmental body exercises responsibility, and preliminary consideration of specific personnel problems, which if discussed in public, would likely have a substantial adverse effect upon the reputation of any person referred to in such problems, including specific review of performance of employees and providers of service and review of procedures for providing services by Agency, to wit: *Report of Investigations related to Corporate Compliance Activities and Significant Events* (20 Minutes) – J. Peaslee
8. BOARD CALENDAR AND FUTURE AGENDA ITEMS
9. ADJOURN

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

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

DATE: 10/22/2021 TIME: 4:00 PM BY: D. Osowski



Presiding Officer or Designee



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MEMORANDUM

DATE: October 18, 2021
TO: North Central Community Services Program Board Executive Committee
FROM: Jill S. Meschke, Interim Chief Executive Officer, Chief Financial Officer
RE: Community Corner Clubhouse Considerations

Community Corner Clubhouse is a program that is loved by its members, staff, and community residents. The services provided are valuable to the members that frequent the location, and they speak passionately about the help they receive. There are over 300 Clubhouse locations world-wide. Most are operated through a grass-roots community supported model.

Clubhouse has a steady group of approximately two dozen members that are active and engaged.

Program Summary and Purpose

We help adults with persistent mental illness and AODA issues 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.

Clubhouse aims to provide a space where genuine support and connection are coupled with access to resources and education to help members realize and access their full potential. Located at 811 North 3rd Avenue in Wausau, Clubhouse is also a place for members to meet socially and provides a space to meet friends, deepen connection, build self-confidence, learn valuable life skills, and discover untapped talents.

Clubhouse offers members:

- Vocational Support. Helping members return to competitive employment.
- Transitional Employment. Part-time employment that lasts six to nine months.
- Supported Employment. Job development, job coaching, and long-term support.
- Independent Employment. Assistance in sustaining long-term employment.
- Educational Opportunities. Partnering with community adult educators to offer a variety of classes to members.
- Housing Assistance. Helping members find safe, affordable housing.

Financial Analysis

Employees at Clubhouse bill for services provided. Through September, net billing revenue has totaled \$29,000; \$40,000 is a reasonable forecast for 2021. 63 percent of billed revenue is self-pay; the remainder is Medicaid. A grant of \$33,840 annual from the United Way is received and Clubhouse receives levy support of \$92,000 annually from Marathon County to aid in reducing losses. Revenues for 2021 are forecasted to total approximately \$165,840.

Clubhouse employs three dedicated and long-term employees. Mike Frankel, Clubhouse Manager, has 33 years of service to North Central Health Care. Mike runs a lean program and has connections in the community that support the work of the Clubhouse with donations. Costs to operation the program are forecasted to be approximately \$207,000 in 2021.

North Central Health Care owns the property in which Clubhouse is operating. Facility costs and depreciation will be approximately \$25,000 for 2021.

In total, Clubhouse is projected to experience a net loss of approximately (\$65,000) in 2021. Efforts have been made over several years to increase membership and to find additional revenue producing opportunities with limited success.

From Marathon County, North Central Health Care receives \$4.8 million in levy support annually. Nearly two percent of those dollars support the Clubhouse. In 2019, Clubhouse served 95 individuals, which is just under one percent of all patients and consumers served by North Central Health Care's behavioral health programs in that year.

Question for Consideration

Is North Central Health Care making best use of finite resources in supporting Clubhouse with levy dollars and net losses?

Are there effective ways to serve Clubhouse members within other program offerings at North Central Health Care?



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MEMORANDUM

DATE: October 18, 2021
TO: North Central Community Services Program Board Executive Committee
FROM: Jill S. Meschke, Interim Chief Executive Officer, Chief Financial Officer
RE: Marathon County Adult Day Services Program Location

The Adult Day Services program in Marathon County is currently housed at 1000 Lake View Drive on the Wausau campus in a space that needs to be vacated by the end of 2021 for construction to proceed. That space has been identified for use by Marathon County. As a result, North Central Health Care needs to locate a different space to continue to provide Adult Day Services in Marathon County.

Program Summary and Purpose

Every individual is unique — we all have different strengths, challenges, and interests. And most of us flourish when we can learn and grow while doing something that truly interests us. North Central Health Care's Adult Day Services are structured around those tenets — we help 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.

We work with individuals to assess their strengths and needs, help them choose programs that will help them progress, and track their regression or progress in the program. Monday through Friday, 7:45 am to 3:15 pm, Adult Day Services provide a diverse range of programs, including:

- Learning through leisure. Participants work on social interaction, basic educational, fine, and gross motor, hand-eye coordination, cognitive, community integration and daily living skills within a relaxed, entertaining, and leisurely environment.
- Computer skills build personal skills. Participants learn basic computer skills and then learn to use computers to foster collaboration and social interactions that build self-confidence, interpersonal and communication skills. Participants work in teams of two or three on a variety of organizational, seek and search and problem-solving challenges. The key is working together on a task that they may not be able to complete on their own. We provide a variety of adaptive devices that enable individuals with physical limitations to use the equipment as independently as possible.
- Keeping up with current events. Our Current Events Group meets on a weekly basis to discuss current events within the local area. This group promotes socialization, builds awareness of community activities, and events and promotes peer relationships.
- Kitchen as a classroom. Our Cooking Club Option meets bi-weekly to learn about nutrition, meal planning, and cooking equipment. Each month the Club plans a lunch, then shops for supplies, prepares the meal, and enjoys their meal in a family-style setting.
- Healthy body for a healthy mind. Participants choose from a variety of physical activities to improve mobility and stamina, lose weight, and improve overall health.

Space Requirements

The following requirements are what ADS staff and management believe are the necessary components to effectively run the program:

- Approximately 5,000 square feet of overall space
- Minimum of four bathrooms
- Two large common spaces
- Sensory room with at least 200 square feet and open layout
- Computer/library space around 150 square feet
- Fit room approximately 200 square feet
- Four to five small spaces for offices and lockers
- Outdoor space for garden and games preferable
- Full kitchen
- Laundry
- Storage space
- Parking for two or three buses and community activities

Options for Consideration

- Purchase new building: 1204 Weston Avenue, Rothschild, WI 54476
 - Asking price \$295,000 (listed at \$399,900 on May 27)
 - 4,823 square feet
 - Former CBRF with ten bedrooms, five bathrooms, full kitchen, laundry, and multiple common areas
 - Courtyard and paved parking
 - Requires Rothschild to update zoning ordinance to include day care for adults, which they are in support of doing if NCHC purchases the property
 - Building would require minor renovation (removal of two walls to combine bedrooms into larger spaces) and some potential parking lot renovations
- Utilize Community Corner Clubhouse building
 - If Clubhouse were to close, NCHC could repurpose the building for ADS
 - The building includes large common spaces, a full kitchen, space for offices and storage, and a parking lot that would be usable by small buses
 - Some renovations would be required, particularly in the bathrooms and ensure client accessibility
 - Limited outdoor space



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MEMORANDUM

DATE: October 18, 2021
TO: North Central Community Services Program Board Executive Committee
FROM: Jill S. Meschke, Interim Chief Executive Officer, Chief Financial Officer
RE: Homelessness Initiative Program Considerations

In 2020, the NCCSP Board of Directors approved a trial program to aid in addressing the homelessness issue in Wausau. North Central Health Care dedicated a full-time Peer Specialist, and the Wausau Police Department dedicated a full-time Officer to the initiative. NCHC's employee was promoted to a manager role and oversees the homelessness initiative and both sober living properties. The Wausau Police Officer tasked on the Homelessness Initiative has since joined the CART team.

Unlike many other options for supported housing in the community, the NCHC homelessness initiative allows residents to continue to use alcohol.

NCHC leased a property at 620 McClellan Street for a one-year non-automatically renewable term set to expire November 30, 2021. Monthly rent is \$1,425 and NCHC is responsible for telephone, cable TV, internet, gas, electricity, snow removal, and lawn care for the property.

The program experienced initial successful transitions for several clients including:

- 1 client joined the NCHC Sober Living house
- 4 clients found employment
- 1 client has applied for disability
- 2 clients are open to treatment services to sustain stable mental health

Currently, five residents are living at the property. These residents were early to move to the home and have not had success in retaining employment, sustainable housing, or sobriety. They are actively applying for housing, but experience challenges with lack of rental history and criminal backgrounds.

Other community organizations involved in combatting the homelessness issue in Marathon County include the United Way, Wausau Police Department, Greater Wausau Chamber of Commerce, The Salvation Army of Wausau, and Catholic Charities.

Financial Analysis

The Greenheck Foundation donated \$10,000 in support of the Homelessness Initiative November 2020. These funds were used to purchase furniture and supplies for the house.

The Homelessness Initiative does not generate revenue. In 2021, the program is forecasted to lose approximately \$35,000.

Options for Consideration

- Discontinue program operation as of November 30, 2021. Existing residents interested in proceeding with sobriety could join NCHC sober living program.
- Change the target population to women. To date, the homelessness program has only served community males.
- If the program were to continue, NCHC would set up a more structured agreement with residents in which they would have a period rent-free and then would be required to pay rent. At the time of successful program completion, they would receive back a portion of their rents paid to use for a deposit on self-sustaining housing.



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MEMORANDUM

DATE: October 18, 2021
TO: North Central Community Services Program Board Executive Committee
FROM: Jill S. Meschke, Interim Chief Executive Officer, Chief Financial Officer
RE: CEO Report – October 2021

The following is an updated format for the CEO report normally provided to the Board. My hope is that it addresses the high-level updates at NCHC, but I would be pleased to take suggestions as to the content below.

Moment of Excellence

Mount View Care Center began transitioning into Suite B, the new nursing home tower. Residents from Lakeview Heights and Southern Reflections moved into the third-floor last week. This week Northwinds Vent residents will move and South Shore residents will follow next week. This has been a massive undertaking and has required partnership across not only NCHC, but also with Marathon County Maintenance and Facilities, CCIT, and many other people.

Since Our Last Meeting

Dejan Adzic and I have been working with the Wisconsin Department of Administration to apply and contract for the \$5 million included in the state budget to aid in the construction and renovation of NCHC's acute care behavioral health spaces. The Building Commission meets Wednesday, October 20 and will hopefully be approving our request at that time.

Related to the new acute care behavioral health spaces, contracts have been presented, and some executed, to provide inpatient services to adults and youth in counties outside of the tri-county area. There has been strong interest in potential admissions into crisis stabilization facilities and drafting of those contract terms are beginning.

Design has been largely completed for the first floor of Suite A (old Mount View Care Center). This space will include the following programs: Outpatient Therapy and Psychiatry, Community Treatment workspaces, Pharmacy, Lab, the Medical College of Wisconsin Residency program, Administration, and several conferences rooms for group therapy and other meeting needs.

Industry News

Much discussion continues related to Covid-19 vaccination. Our residents at Mount View Care Center and Pine Crest Nursing Home have been provided the Moderna vaccine if they have decided to be vaccinated. If Moderna boosters are approved for people 65 and older we will make those available to those residents. If they approve boosters for all Moderna recipients, we will make them available to our employees also.

NCHC is applying for phase four of the Provider Relief Fund. In addition, this application includes the potential for ARP rural distributions. This is a new opportunity for NCHC being that our primary address is not considered rural, but patients we serve do live in rural areas.

The State of Wisconsin budget has approved Medicaid rate increases for several populations served by NCHC including skilled nursing facilities, group homes, and supported apartments. Increases for skilled nursing facilities will average 12 percent, which will occur first in 2021 and then again in 2022. Residential rates are expected to increase by approximately 4 percent.

Dashboards

NCHC continues to have strong performance in vacancy rate but has seen turnovers move back up. Efforts continue to improve employee engagement and satisfaction. Turnover rate is unfavorable to targets in the Hospitals, the Group Homes, Outpatient, Pine Crest, and in Youth Community Treatment. In the Hospitals, a structural change to the managers of the programs is allowing for greater sharing of staff resources. Something similar is being evaluated for the nursing homes. In the other programs, unfavorable performance is due to a few resignations.

September shows some good progress in most quality measures. Hospital and nursing home readmissions remain low, and the nursing home star rating has increased to four. Employee injuries experienced a spike in September

Out of county placements outperform prior years; however, NCHC has several clients with lengthy stays out of county. These cases are those that NCHC is not able to support with internal resources. Being that diversions with short lengths of stay has dramatically decreased demonstrates strong progress in this measure.

The zero-harm measure for employees experienced a large unfavorable increase in September. This is due to Covid-19 exposures and symptom cases now being reportable to OSHA and the increase in those cases NCHC has experienced in September.

Financial Highlights

NCHC experienced a loss of (\$764,000) in September bringing the year-to-date loss to (\$4,100,000). The key drivers affecting the losses are as follows and are addressed in greater detail in the financial/CFO memo.

- Revenue in the skilled nursing facilities is comparable to plan due largely to one-time payments received earlier in the year. In the acute care behavioral health programs, revenue performance has been unpredictable due to unusual census swings. Contracts with neighboring counties will help to stabilize these numbers as they are implemented.
- The ability to maintain consistent and reliable staffing is a driving factor contributing to losses. Costs for overtime, call-time, and agency staff are far above plan and have further increased due to a spike in Covid-related absences in September.
- Favorability trends seen in benefit costs through the early part of the year are reversing. Although NCHC has strong financial performance compared to the market, self-funded costs are rising. We did explore changing from a self-funded model in 2022, but it was a far more expensive option.
- Long-term diversions continue to exceed plan. Due to the state-owned facilities' accounting methods, we expect some payback at the end of the year.
- Some additional expense lines were higher than expected due to the need to expend grant funding prior to the end of the grant period on September 30.
- NCHC's cash position worsened in September, and we had to use contingency cash reserves. These reserves are held as liquid cash in the bank.

NCHC is going to be raising our rates in several key areas including the skilled nursing facilities, hospitals and crisis stabilization facilities, and outpatient. We have not raised rates for several years. Analysis is underway to determine the most appropriate market-competitive rates for these services. Notification process rules apply that we are working through.

Current Challenges

The national worker shortage trend has impacted NCHC as we have trouble filling positions directly affecting patient care. During the pandemic, workers had to stay home with quarantined children who were in-home learning. This has given rise to the need for additional flexibility, the embrace of alternative careers, and single-income households. NCHC has experienced a high rate of retirements, which matches the national trend. Finally, employees out of work with Covid-related restrictions have impacted us. Remaining employees are experiencing burnout. To keep them, NCHC is forced to compete with other local organizations with pay, benefits, and improved working conditions.

A weakened cash position caused by sustained net losses and the timing of cash inflows and outflows have created new challenges. Cash is being monitored closely and two investments reaching maturity will be brought back to liquid at the end of the month.

Considerations and Decisions

Leaders at NCHC have been working to plan for 2022 operations and financials through the budget process. During those conversations, we have determined the need for the Board to weigh in on the future of the Community Corner Clubhouse and the Homelessness Initiative. Additionally, Marathon County's Adult Day Service program loses its current space at the end of the year, and I am asking the Board to consider options for the location of this program.

The Board will revisit the budget in October's meeting. Additional presentation information will be available for that conversation.

Conclusion

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

DEPARTMENT: NORTH CENTRAL HEALTH CARE

FISCAL YEAR: 2021

PRIMARY OUTCOME GOAL	↑	TARGET	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	2021 YTD	2020
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PEOPLE

Vacancy Rate	↘	7-9%	6.1%	6.1%	8.6%	10.1%	6.9%	5.8%	5.3%	6.1%	6.5%				6.8%	7.8%
Turnover Rate	↘	20-23% (1.7%-1.95%)	2.8%	2.4%	3.3%	2.9%	2.3%	3.0%	3.3%	1.4%	2.5%				32.0%	N/A
Organization Diversity Composite Index	↗	Monitoring	0.69	0.66	0.67	0.63	0.65	0.68	0.67						0.66	N/A

SERVICE

Patient Experience (Net Promoter Score)	↗	55-61	52.2	73.8	65.6	59.6	60.4	59.6	56.7	61.2	57.0				63.4	61.0
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QUALITY

Hospital Readmission Rate	↘	10-12%	10.8%	14.3%	14.4%	14.4%	9.1%	2.1%	4.8%		5.0%				9.4%	11.8%
Nursing Home Readmission Rate	↘	10-12%	10.5%	17.8%	12.8%	10.3%	12.5%	10.0%	12.5%	12.0%	7.7%				12.5%	13.5%
Nursing Home Star Rating	↗	★★★★	★★★	★★★	★★★	★★★	★★★	★★★	★★★	★★★	★★★★				★★★	★★★
Zero Harm - Patients	↘	Monitoring	0.84	1.06	0.84	0.85	1.19			0.62	0.57				0.90	0.74
Zero Harm - Employees	↘	Monitoring	2.26	2.97	5.94	3.08	3.18	1.21	1.98	1.14	6.97				3.19	2.84

COMMUNITY

Out of County Placements	↘	230-250	236	140	169	96	143	192	109	126	127				149	269
Client Diversity Composite Index	↗	Monitoring	0.31	0.46	0.47	0.45	0.43	0.00							0.45	N/A

FINANCE

Direct Expense/Gross Patient Revenue	↘	64-67%	76.8%	70.2%	70.0%	72.0%	73.8%	80.5%	73.7%	82.1%	81.0%				75.6%	72.4%
Indirect Expense/Direct Expense	↘	44-47%	41.3%	34.7%	38.6%	36.9%	37.2%	40.5%	44.7%	31.0%	34.6%				37.4%	39.0%
Net Income	↗	2-3%	-15.7%	0.1%	-6.9%	-5.1%	-7.6%	1.1%	-15.5%	-4.0%	-11.0%				-6.7%	0.4%

↗ Higher rates are positive
 ↘ Lower rates are positive

DASHBOARD MEASUREMENT OUTCOME DEFINITIONS AND DETAILS

PEOPLE

Vacancy Rate

Monthly calculation: total number of vacant FTE at month end divided by the total authorized FTE as of month end.
YTD calculation: Average of each monthly vacancy rate.

Turnover Rate

The monthly rate is determined by the number of separations divided by the average number of employees multiplied by 100. The YTD is the sum of the monthly percentages.

Diversity Composite Index

Monthly calculation: A weighted composite of the diversity of NCHC's workforce, management and Board, relative to the demographics of Marathon Count
YTD calculation: Weighted average of each month's Diversity Composite Index rate.

SERVICE

Patient Experience (Net Promoter Score)

Monthly calculation: A weighted average of Net Promoter Score. YTD calculation: Weighted average of each month's Net Promoter Score.

QUALITY

Hospital Readmission Rate

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 Assistive Living (AHCA/NCAL) Quality Initiative

Nursing Home Readmission Rate

Number of residents re-hospitalized within 30 days of admission to nursing home / total admissions.
Benchmark: American Health Care Association/Centers for Medicare & Medicaid Services (AHCA/CMS)

Nursing Home Star Rating

Star rating as determined by CMS Standards for both Pine Crest and MVCC.

Zero Harm Patients

Patient Adverse Event Rate: # of actual harm events that reached patients/number of patient days x1000

Zero Harm Employee

Monthly calculation: # of OSHA reportables in the month x 200,000/payroll hours paid within the month.
YTD calculation: # of OSHA reportables YTD x 200,000/payroll hours paid YTD.

COMMUNITY

Out of County Placement

Number of involuntary days that patients spend in out of county placements who have discharged in month of report.

Diversity, Equity, and Inclusion Access Equity Gap

Identify number of consumers served and index their demographics against the demographics of service area. An access equity gap will be established base on the variability in matching the community to our service population.

FINANCE

Direct Expense/Gross Patient Revenue

Percentage of total direct expense compared to gross revenue.

Indirect Expense/Direct Revenue

Percentage of total indirect expenses compared to direct expenses.

Net Income

Net earnings after all expenses have been deducted from revenue.

2021 - Primary Dashboard Measure List

↗ Higher rates are positive

↘ Lower rates are positive

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD	2020
North Central Health Care	People	Vacancy Rate	↘	7-9%	6.5%	6.8%	7.8%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	2.5%	32.0%	N/A
		Organization Diversity Composite Index	↗	Monitoring		0.66	N/A
	Service	Patient Experience (Net Promoter Score)	↗	55-61	57.0	63.4	61.0
	Quality	Hospital Readmission Rate	↘	10-12%	5.0%	9.4%	11.8%
		Nursing Home Readmission Rate	↘	10-12%	7.7%	12.5%	13.5%
		Nursing Home Star Rating	↗	★★★★	★★★★	★★★	★★★
		Zero Harm - Patients	↘	Monitoring	0.57	0.90	0.74
		Zero Harm - Employees	↘	Monitoring	6.97	3.19	2.84
	Community	Out of County Placements	↘	230-250	127	149	269
		Client Diversity Composite Index	↗	Monitoring		0.45	/
	Finance	Direct Expense/Gross Patient Revenue	↘	64-67%	81.0%	75.6%	72.4%
		Indirect Expense/Direct Expense	↘	44-47%	34.6%	37%	39.0%
Net Income		↗	2-3%	-11.0%	-6.7%	0.4%	

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Adult Community Treatment	People	Vacancy Rate	↘	7-9%	0.0%	3.9%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	18.7%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	100.0*	71.9%
	Quality	Zero Harm - Patients	↘	Monitoring	0.09	0.18
		% of Treatment Plans Completed within Required Timelines	↗	96-98%		92.7%
		Employment rate of Individual Placement and Support (IPS) Clients	↗	46-50%	60.3%(44/73)	55.9%
	Community	% of Eligible CCS and CSP Clients Admitted within 60 Days of Referral	↗	60-70%		35.6%
		Average Days from Referral to Initial Appointment	↘	55-60 days		69.9 days
		Hospitalization Rate of Active Patients	↘	Monitoring	1.99%	3.24%
	Finance	Direct Expense/Gross Patient Revenue	↘	86.7-90.2%	84.1%	78.3%
Net Income		↗	\$10,457-\$15,686 Per Month	\$18,722	\$65,711	

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Adult Crisis Stabilization CBRF	People	Vacancy Rate	↘	5-7%	0.0%	0.7%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	22.1%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	50.0*	46.3%
	Quality	Zero Harm - Patients	↘	Monitoring	10.64	7.40
		% of Patients who kept their Follow-up Appointment	↗	90-95%	100 (3/3)	92.7%
	Community	% of Patients Admitted within 24 hours of Referral	↗	90-95%	100% (25/25)	100.00%
	Finance	Direct Expense/Gross Patient Revenue	↘	30.9-32.2%	123.1%	60.9%
		Net Income	↗	\$1,747-\$2,620 Per Month	(\$84,255)	(\$17,461)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Adult Inpatient Psychiatric Hospital	People	Vacancy Rate	↘	7-9%	4.4%	6.2%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	6.9%	39.1%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	60.0	41.3%
	Quality	Zero Harm - Patients	↘	Monitoring	0.00	3.42
		Hospital Readmission Rate	↘	10-12%	5.9%	9.2%
		Average Days for Initial Counseling Appointment Post-Hospital Discharge	↘	8-10 days		24.2 days
		Average Days for Initial Psychiatry Appointment Post-Hospital Discharge	↘	8-10 days		16.7 days
		Average Days since previous Detox Admission	↗	330-360 days		571.8 days
	Community	Out of County Placements	↘	150-170	71	119
	Finance	Direct Expense/Gross Patient Revenue	↘	78.2-81.4%	114.3%	102.1%
Net Income		↗	\$13,382-\$20,073 Per Month	(\$178,449)	(\$166,408)	

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Aquatic	People	Vacancy Rate	↘	5-7%	9.1%	5.9%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	38.9%
	Service	Patient Experience (Net Promoter Score)	↗	83-87	/	85.9
	Quality	Zero Harm - Patients	↘	Monitoring	0.00	6.21
	Finance	Direct Expense/Gross Patient Revenue	↘	43.8-45.6%	65.6%	67.3%
		Net Income	↗	\$2,174-\$3,261 Per Month	(\$24,085)	(\$16,198)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Clubhouse	People	Vacancy Rate	↘	5-7%	0.0%	0.0%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	0.0%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	57.1*	79.0
	Quality	Average Attendance Per Work Day	↗	20-25	18	19
		% of Members Working 15 or More Hours Per Month	↗	80-85%	38% (28/74)	23.8%
	Community	Active Members Per Month	↗	110-120	74	89
	Finance	Direct Expense/Gross Patient Revenue	↘	58.6-61.0%	151.0%	88.1%
		Net Income	↗	\$536-\$804 Per Month	(\$22,953)	(\$10,207)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Crisis and Emergency Services	People	Vacancy Rate	↘	7-9%	0.0%	5.7%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	31.7%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	/	36.4
	Quality	Zero Harm - Patients	↘	Monitoring	0.00	9.45
		% of Crisis Assessments with Documented Linkage and Follow-up within 24 hours	↗	70-75%		59.4%
		Avoid Hospitalizations (NCHC and Diversions) with a length of stay of less than 72 hours	↘	5-10%	28.6%	4.4%
	Community	Out of County Placements Days	↘	230-250	127	149
		Court Liasion: % of Eligible Individuals with Commitment and Settlement Agreements who are Enrolled in CCS or CSP withn 60 days	↗	80-85%		47.3%
	Finance	Direct Expense/Gross Patient Revenue	↘	167.6-174.4%	489.6%	252.6%
		Net Income	↗	\$5,370-\$8,055 Per Month	(\$47,807)	(\$25,039)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Day Services	People	Vacancy Rate	↘	7-9%	3.6%	2.4%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	9.7%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	92.9*	92.1
	Quality	Zero Harm - Patients	↘	Monitoring	0.00	0.52
	Finance	Direct Expense/Gross Patient Revenue	↘	89.3-92.9%	93.9%	99.0%
		Net Income	↗	\$5,103-\$7,654 Per Month	(\$18,996)	(\$28,766)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Group Homes	People	Vacancy Rate	↘	7-9%	6.7%	5.1%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	3.5%	42.0%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	100.0*	84.2
	Quality	Zero Harm - Patients	↘	Monitoring	2.15	1.74
	Finance	Direct Expense/Gross Patient Revenue	↘	66.3-69.0%	87.4%	76.6%
		Net Income	↗	\$2,939-\$4,408 Per Month	\$6,781	\$26,436

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Mount View Care Center	People	Vacancy Rate	↘	7-9%	5.0%	10.6%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	1.7%	31.6%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	00.0*	48.6
	Quality	Nursing Home Readmission Rate	↘	10-12%	4.2%	9.5%
		Zero Harm - Residents	↘	Monitoring	4.21	3.25
		Nursing Home Quality Star Rating	↗	★★★★	★★★★	★★★★
	Community	Referral Conversion Rate	↗	N/A	N/A	N/A
	Finance	Direct Expense/Gross Patient Revenue	↘	55.5-57.7%	76.7%	70.3%
Net Income		↗	\$30,636-\$45,954 Per Month	(\$102,862)	(\$95,475)	

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Outpatient Services	People	Vacancy Rate	↘	7-9%	5.4%	3.4%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	2.8%	14.7%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	42.9*	58.1
	Quality	Zero Harm - Patients	↘	Monitoring	0.00	1.09
		Average Days for Initial Counseling Appointment Post-Hospital Discharge	↘	8-10 days		21.8 days
		Average Days for Initial Psychiatry Appointment Post-Hospital Discharge	↘	8-10 days		16.1 days
		Day Treatment Program Completion Rate	↗	40-50%	N/A	N/A
		OWI - 5 Year Recidivism Rate	↘	13-15%	14.8%	13.9%
		Same Day Cancellation and No-Show Rate	↘	15-18%		17.3%
	Community	% of Patients Offered an Appointment within 4 Days of Screening by a Referral Coordinator	↗	20-25%		16.2%
		Post-Jail Release Access Rate (Within 4 Days of Release)	↗	20-25%		19.7%
		Average Number of Days from Referral to Start of Day Treatment	↘	16-20 days	N/A	N/A
		Hospitalization Rate of Active Patients	↘	Monitoring	0.97%	1.06%
	Finance	Direct Expense/Gross Patient Revenue	↘	93.4-97.2%	135.1%	122.0%
		Net Income	↗	\$12,534-\$18,802 Per Month	(\$114,671)	(\$26,000)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Pine Crest Nursing Home	People	Vacancy Rate	↘	7-9%	11.0%	10.2%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	3.8%	38.2%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	50.0*	50.0
	Quality	Zero Harm - Residents	↘	Monitoring	2.19	3.43
		Nursing Home Readmission Rate	↘	10-12%	13.3%	14.8%
		Nursing Home Quality Star Rating	↗	★★★★	★★★	★★★
	Community	Referral Conversion Rate	↗	N/A	N/A	N/A
	Finance	Direct Expense/Gross Patient Revenue	↘	57.0-59.3%	80.1%	69.9%
Net Income		↗	\$20,559-\$30,839 Per Month	(\$230,240)	(\$155,970)	

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Riverview Terrace (RCAC)	People	Vacancy Rate	↘	7-9%	0.0%	5.2%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	91.2%
	Quality	Zero Harm - Patients	↘	Monitoring	0.00	0.00
	Finance	Direct Expense/Gross Patient Revenue	↘	N/A	0.0%	0.0%
		Net Income	↗	\$582-\$873 Per Month	\$5,349	\$5,655

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Supported Apartments	People	Vacancy Rate	↘	7-9%	5.3%	7.8%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	0.0%	18.2%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	0.0*	77.8
	Quality	Zero Harm - Patients	↘	Monitoring	0.47	0.70
	Finance	Direct Expense/Gross Patient Revenue	↘	38.5-41.0%	59.3%	45.4%
		Net Income	↗	\$3,364-\$5,046 Per Month	(\$66,706)	(\$29,158)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Youth Community Treatment	People	Vacancy Rate	↘	7-9%	8.1%	7.8%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	5.9%	35.5%
	Service	Patient Experience (Net Promoter Score)	↗	55-61	50.0*	85.7
	Quality	Zero Harm - Patients	↘	Monitoring	0.00	0.05
		% of Treatment Plans Completed within Required Timelines	↗	96-98%		96.3%
		% of Eligible CCS and CSP Clients Admitted within 60 Days of Referral	↗	60-70%		27.4%
	Community	Average Days from Referral to Initial Appointment	↘	55-60 days		97.6 days
		Hospitalization Rate of Active Patients	↘	Monitoring	1.99%	0.46%
	Finance	Direct Expense/Gross Patient Revenue	↘	77.2-80.4%	77.6%	74.6%
		Net Income	↗	\$14,139-\$21,208 Per Month	\$28,242	\$43,816

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Youth Crisis Stabilization Facility	People	Vacancy Rate	↘	5-7%	9.1%	8.4%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	9.1%	22.7%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	N/A	N/A
	Quality	Zero Harm - Patients	↘	Monitoring	0.00	0.00
		% of Patients who kept their Follow-up Outpatient Appointment	↗	90-95%		
	Community	% of Patients Admitted within 24 hours of Referral	↗	90-95%		
	Finance	Direct Expense/Gross Patient Revenue	↘	127-130%	65.09%	710.5%
		Net Income	↗	\$1,692-\$2,538 Per Month	(\$7,579)	(\$7,579)

Department	Domain	Outcome Measure	↕	Target Level	Current Month	Current YTD
Youth Psychiatric Hospital	People	Vacancy Rate	↘	7-9%	13.3%	7.2%
		Turnover Rate	↘	20-23% (1.7%-1.9%)	6.9%	37.8%
	Service	Patient Experience (Net Promoter Score)	↗	42-47	100.0*	80.0
	Quality	Zero Harm - Patients	↘	Monitoring	0.00	9.20
		Hospital Readmission Rate	↘	10-12%	3.0%	12.5%
		Average Days for Initial Counseling Appointment Post-Hospital Discharge	↘	8-10 days		16.2 days
		Average Days for Initial Psychiatry Appointment Post-Hospital Discharge	↘	8-10 days		12.9 days
	Community	Out of County Placements	↘	50-60	56	29
	Finance	Direct Expense/Gross Patient Revenue	↘	61.8-64.4%	86.9%	91.6%
		Net Income	↗	\$4,973-\$7,459 Per Month	(\$81,993)	(\$84,701)

North Central Health Care
Income Statement
For the Period Ending September 30, 2021

	<u>MTD Actual</u>	<u>MTD Budget</u>	<u>\$ Variance</u>	<u>% Variance</u>	<u>YTD Actual</u>	<u>YTD Budget</u>	<u>\$ Variance</u>	<u>% Variance</u>
Direct Revenues								
Patient Gross Revenues	7,085,194	8,113,388	(1,028,194)	-12.7%	63,453,893	74,294,062	(10,840,168)	-14.6%
Patient Contractual Adjustments	(2,447,250)	(2,847,556)	400,306	-14.1%	(22,768,948)	(26,064,734)	3,295,786	-12.6%
Net Patient Revenue	4,637,944	5,265,832	(627,888)	-11.9%	40,684,945	48,229,327	(7,544,382)	-15.6%
County Revenue	409,215	427,764	(18,549)	-4.3%	3,831,328	3,849,877	(18,549)	-0.5%
Contracted Service Revenue	79,242	99,888	(20,645)	-20.7%	805,799	918,206	(112,407)	-12.2%
Grant Revenues and Contractuals	271,630	333,635	(62,005)	-18.6%	2,663,905	3,004,918	(341,012)	-11.3%
Appropriations	568,910	502,687	66,223	13.2%	4,590,406	4,524,183	66,223	1.5%
COVID-19 Relief Funding	-	-	-	0.0%	26,750	-	26,750	0.0%
Other Revenue	782,843	552,481	230,361	41.7%	7,203,781	4,973,833	2,229,948	44.8%
Total Direct Revenue	6,749,784	7,182,288	(432,503)	-6.0%	59,806,915	65,500,344	(5,693,429)	-8.7%
Indirect Revenues								
County Revenue	170,209	171,802	(1,593)	-0.9%	1,531,878	1,546,217	(14,339)	-0.9%
Contracted Service Revenue	2,290	3,000	(710)	-23.7%	20,290	27,000	(6,710)	-24.9%
Grant Revenues and Contractuals	-	-	-	0.0%	31,900	-	31,900	0.0%
Appropriations	-	-	-	0.0%	-	-	-	0.0%
Other Revenue	35,445	38,967	(3,522)	-9.0%	309,085	398,030	(88,945)	-22.3%
Allocated Revenue	-	-	-	0.0%	-	(1)	1	-100.0%
Total Indirect Revenue	207,944	213,769	(5,825)	-2.7%	1,883,736	1,971,246	(87,510)	-4.4%
Total Operating Revenue	6,957,728	7,396,056	(438,328)	-5.9%	61,690,651	67,471,590	(5,780,939)	-8.6%
Direct Expenses								
Personnel Expenses	3,823,234	3,360,070	(463,164)	-13.8%	30,552,386	31,090,898	538,513	1.7%
Contracted Services Expenses	819,328	850,815	31,487	3.7%	7,528,601	7,944,047	415,445	5.2%
Supplies Expenses	128,376	56,150	(72,227)	-128.6%	722,077	512,749	(209,328)	-40.8%
Drugs Expenses	508,481	479,307	(29,174)	-6.1%	4,679,355	4,588,705	(90,650)	-2.0%
Program Expenses	116,259	70,847	(45,412)	-64.1%	682,775	654,138	(28,637)	-4.4%
Land & Facility Expenses	68,757	71,658	2,900	4.0%	600,212	633,468	33,256	5.2%
Equipment & Vehicle Expenses	59,238	61,979	2,741	4.4%	450,135	602,071	151,936	25.2%
Diversions Expenses	51,869	79,500	27,631	34.8%	1,210,473	715,500	(494,973)	-69.2%
Other Operating Expenses	164,669	169,341	4,671	2.8%	1,531,334	1,552,499	21,165	1.4%
Total Direct Expenses	5,740,212	5,199,666	(540,546)	-10.4%	47,957,349	48,294,076	336,727	0.7%
Indirect Expenses								
Personnel Expenses	1,141,365	1,098,846	(42,519)	-3.9%	9,894,976	10,301,300	406,324	3.9%
Contracted Services Expenses	6,604	3,500	(3,104)	-88.7%	74,000	31,500	(42,500)	-134.9%
Supplies Expenses	75,077	71,440	(3,636)	-5.1%	698,640	727,362	28,722	3.9%
Drugs Expenses	9,209	-	(9,209)	0.0%	20,420	-	(20,420)	0.0%
Program Expenses	11,901	15,663	3,762	24.0%	194,452	180,560	(13,892)	-7.7%
Land & Facility Expenses	289,619	351,110	61,491	17.5%	2,871,929	2,676,530	(195,400)	-7.3%
Equipment & Vehicle Expenses	102,270	85,313	(16,957)	-19.9%	948,233	806,132	(142,101)	-17.6%
Diversions Expenses	-	-	-	0.0%	-	-	-	0.0%
Other Operating Expenses	350,040	571,385	221,346	38.7%	3,252,969	4,615,996	1,363,027	29.5%
Allocated Expense	-	-	-	0.0%	-	-	-	0.0%
Total Indirect Expenses	1,986,084	2,197,257	211,173	9.6%	17,955,620	19,339,380	1,383,760	7.2%
Total Operating Expenses	7,726,296	7,396,923	(329,372)	-4.5%	65,912,968	67,633,456	1,720,488	2.5%
Metrics								
Indirect Expenses/Direct Expenses	34.6%	42.3%			37.4%	40.0%		
Direct Expense/Gross Patient Revenue	81.0%	64.1%			75.6%	65.0%		
Non-Operating Income/Expense								
Interest Income/Expense	(3,651)	(30,833)	27,182	-88.2%	(53,207)	(277,500)	224,293	-80.8%
Donations Income	(1,090)	-	(1,090)	0.0%	(55,267)	-	(55,267)	0.0%
Other Non-Operating	-	-	-	0.0%	(4,095)	-	(4,095)	0.0%
Total Non-Operating	(4,741)	(30,833)	26,092	-84.6%	(112,570)	(277,500)	164,930	-59.4%
Net Income (Loss)	(763,826)	29,966	(793,793)	-2649.0%	(4,109,748)	115,634	(4,225,382)	-3654.1%
Net Income	-11.0%	0.4%			-6.7%	0.2%		

North Central Health Care
Programs by Service Line
For the Period Ending September 30, 2021

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
BEHAVIORAL HEALTH SERVICES								
Adult Behavioral Health Hospital	4,707,508	5,156,662	(449,155)	6,205,177	6,142,192	(62,985)	(1,497,669)	(512,140)
Adult Crisis Stabilization Facility	728,299	1,111,107	(382,807)	885,453	785,191	(100,262)	(157,153)	(483,069)
Lakeside Recovery MMT	136,388	763,111	(626,723)	99,749	797,643	697,893	36,639	71,170
Youth Behavioral Health Hospital	1,149,779	1,619,047	(469,268)	1,912,447	2,254,051	341,604	(762,668)	(127,664)
Youth Crisis Stabilization Facility	312,039	572,589	(260,550)	414,831	760,629	345,798	(102,792)	85,248
Crisis Services	2,170,639	2,286,345	(115,706)	2,395,993	2,417,076	21,082	(225,355)	(94,624)
Psychiatry Residency	227,457	340,434	(112,978)	269,258	210,148	(59,111)	(41,802)	(172,088)
	<u>9,432,108</u>	<u>11,849,295</u>	<u>(2,417,188)</u>	<u>12,182,908</u>	<u>13,366,929</u>	<u>1,184,021</u>	<u>(2,750,801)</u>	<u>(1,233,167)</u>
COMMUNITY SERVICES								
Outpatient Services (Marathon)	3,214,396	3,189,558	24,838	3,732,087	3,544,397	(187,691)	(517,691)	(162,853)
Outpatient Services (Lincoln)	783,280	989,407	(206,127)	580,260	990,910	410,650	203,020	204,523
Outpatient Services (Langlade)	609,579	1,387,482	(777,903)	528,912	1,151,657	622,745	80,667	(155,158)
Community Treatment Adult (Marathon)	3,764,336	3,964,949	(200,613)	3,450,923	3,664,118	213,196	313,413	12,583
Community Treatment Adult (Lincoln)	764,570	776,361	(11,791)	604,071	610,172	6,102	160,499	(5,689)
Community Treatment Adult (Langlade)	448,439	507,134	(58,695)	330,949	424,336	93,387	117,490	34,692
Community Treatment Youth (Marathon)	4,085,312	4,255,117	(169,805)	4,048,906	3,918,821	(130,085)	36,406	(299,890)
Community Treatment Youth (Lincoln)	1,308,739	1,959,114	(650,375)	1,143,810	1,409,869	266,060	164,929	(384,315)
Community Treatment Youth (Langlade)	1,123,726	1,320,449	(196,724)	930,717	1,036,492	105,775	193,000	(90,949)
Community Corner Clubhouse	123,748	224,171	(100,423)	215,612	241,095	25,483	(91,864)	(74,940)
	<u>16,226,125</u>	<u>18,573,743</u>	<u>(2,347,618)</u>	<u>15,566,246</u>	<u>16,991,867</u>	<u>1,425,621</u>	<u>659,879</u>	<u>(921,997)</u>
COMMUNITY LIVING								
Adult Day Services (Marathon)	523,073	600,806	(77,733)	420,817	447,562	26,745	102,256	(50,988)
Prevocational Services (Marathon)	392,424	400,462	(8,038)	455,613	605,936	150,323	(63,189)	142,284
Lincoln Industries	532,882	956,429	(423,547)	807,241	1,004,487	197,246	(274,359)	(226,302)
Day Services (Langlade)	259,907	223,101	36,806	283,510	235,981	(47,529)	(23,603)	(10,723)
Prevocational Services (Langlade)	-	-	-	-	-	-	-	-
Andrea St Group Home	404,113	392,136	11,977	353,879	307,384	(46,495)	50,234	(34,519)
Chadwick Group Home	438,741	481,185	(42,444)	363,430	361,496	(1,934)	75,310	(44,378)
Bissell Street Group Home	442,683	424,411	18,272	319,048	341,064	22,016	123,635	40,288
Heather Street Group Home	348,515	343,223	5,292	359,765	310,364	(49,401)	(11,250)	(44,109)
Jelinek Apartments	562,833	589,098	(26,265)	535,229	533,977	(1,252)	27,604	(27,518)
River View Apartments	545,676	498,099	47,577	487,546	409,397	(78,150)	58,130	(30,573)
Forest Street Apartments	117,086	264,242	(147,155)	344,944	354,655	9,711	(227,858)	(137,444)
Fulton Street Apartments	174,653	189,408	(14,754)	294,950	214,028	(80,922)	(120,297)	(95,676)
Riverview Terrace	265,171	268,909	(3,739)	214,263	261,273	47,010	50,908	43,271
Hope House (Sober Living Marathon)	3,514	4,682	(1,168)	49,822	37,297	(12,525)	(46,308)	(13,693)
Homelessness Initiative	10,364	403	9,961	21,211	4,982	(16,228)	(10,847)	(6,267)
Sober Living (Langlade)	35,899	38,757	(2,858)	67,123	96,512	29,389	(31,223)	26,531
	<u>5,057,534</u>	<u>5,675,352</u>	<u>(617,818)</u>	<u>5,378,391</u>	<u>5,526,394</u>	<u>148,003</u>	<u>(320,857)</u>	<u>(469,815)</u>
NURSING HOMES								
Mount View Care Center	14,094,098	14,050,840	43,258	14,953,376	13,723,040	(1,230,336)	(859,278)	(1,187,078)
Pine Crest Nursing Home	8,752,946	8,398,618	354,329	10,156,674	9,233,894	(922,779)	(1,403,727)	(568,451)
	<u>22,847,044</u>	<u>22,449,457</u>	<u>397,587</u>	<u>25,110,050</u>	<u>22,956,934</u>	<u>2,153,116</u>	<u>(2,263,005)</u>	<u>2,550,703</u>
Pharmacy	6,135,018	6,524,996	(389,978)	5,529,603	6,207,764	678,161	605,415	288,183
OTHER PROGRAMS								
Aquatic Services	806,263	1,136,552	(330,289)	952,045	959,461	7,416	(145,782)	(322,872)
Birth To Three	433,713	577,397	(143,684)	391,989	577,397	185,408	41,724	41,724
Adult Protective Services	596,152	604,743	(8,591)	567,007	758,436	191,429	29,145	182,837
Demand Transportation	265,168	357,555	(92,387)	230,633	288,273	57,640	34,535	(34,748)
	<u>2,101,296</u>	<u>2,676,248</u>	<u>(574,951)</u>	<u>2,141,675</u>	<u>2,583,567</u>	<u>441,893</u>	<u>(40,378)</u>	<u>(133,059)</u>
Total NCHC Service Programs	61,799,125	67,749,090	(5,949,965)	65,908,873	67,633,456	1,724,583	(4,109,748)	(4,225,382)

North Central Health Care
Balance Sheet
For the Period Ending September 30, 2021

	Current YTD	Prior YTD
ASSETS		
Current Assets		
Cash and Cash Equivalents	(96,455)	2,081,270
Accounts Receivable		
Net Patient Receivable	7,844,102	5,822,922
Outpatient WIMCR & CCS	3,832,499	4,463,750
Nursing Home Supplemental Payment	691,617	1,236,450
County Appropriations Receivable	66,223	457,755
Net State Receivable	419,089	462,727
Other Accounts Receivable	405,759	1,007,737
Inventory	429,333	446,283
Prepaid Expenses	601,094	860,123
Total Current Assets	14,193,261	16,839,017
Noncurrent Assets		
Investments	8,044,192	12,093,552
Contingency Funds	1,000,000	1,000,000
Patient Trust Funds	85,982	91,756
Pool Project Receivable	-	1,732,590
Net Pension Assets	7,280,177	-
Nondepreciable Capital Assets	33,700,131	22,105,243
Net Depreciable Capital Assets	28,382,009	20,278,515
Total Noncurrent Assets	78,492,492	57,301,656
Deferred Outflows of Resources (Pensions)	18,262,408	22,152,585
TOTAL ASSETS	110,948,160	96,293,257

	<u>Current YTD</u>	<u>Prior YTD</u>
LIABILITIES		
Current Liabilities		
Current Portion of Capital Lease Liability	27,987	29,249
Trade Accounts Payable	517,746	407,120
Accrued Liabilities		
Salaries and Retirement	1,828,044	2,264,864
Compensated Absences	2,318,457	2,787,908
Health and Dental Insurance	503,000	670,000
Bonds	-	360,000
Interest Payable	87,350	209,013
Other Payables and Accruals	669,707	1,736,432
Payable to Reimbursement Programs	100,000	220,000
Unearned Revenue	(1,941,859)	(190,772)
Total Current Liabilities	<u>4,110,431</u>	<u>8,493,813</u>
Noncurrent Liabilities		
Net Pension Liability	2,506,809	9,445,451
Long-Term Portion of Capital Lease Liability	26,968	53,553
Long-Term Projects in Progress	38,289,521	19,674,794
Long-Term Debt and Bond Premiums	9,115,076	9,148,147
Patient Trust Funds	47,423	62,038
Total Noncurrent Liabilities	<u>49,985,797</u>	<u>38,383,983</u>
Deferred Inflows of Resources (Pensions)	<u>22,225,906</u>	<u>11,508,078</u>
TOTAL LIABILITIES	76,322,134	58,385,875
NET POSITION		
Net Investment in Capital Assets	62,082,140	42,383,757
Pool Project Restricted Capital Assets	-	1,732,590
Unrestricted		
Board Designated for Contingency	1,000,000	1,000,000
Board Designated for Capital Assets	-	1,480,891
Undesignated	(24,346,366)	(8,957,552)
Net Income / (Loss)	(4,109,748)	267,697
TOTAL NET POSITION	34,626,027	37,907,383
TOTAL LIABILITIES AND NET POSITION	<u>110,948,160</u>	<u>96,293,257</u>

North Central Health Care
Fund Balance Review
For the Period Ending September 30, 2021

	<u>Marathon</u>	<u>Langlade</u>	<u>Lincoln</u>	<u>Total</u>
Total Operating Expenses, Year-to-Date	46,973,705	3,671,617	15,263,551	65,908,873
General Fund Balance Targets				
Minimum (20% Operating Expenses)	9,394,741	734,323	3,052,710	13,181,775
Maximum (35% Operating Expenses)	16,440,797	1,285,066	5,342,243	23,068,106
Risk Reserve Fund	250,000	250,000	250,000	
Total Fund Balance				
Minimum Target	9,644,741	984,323	3,302,710	13,931,775
Maximum Target	16,690,797	1,535,066	5,592,243	23,818,106
Total Net Position at Period End	44,497,717	3,560,789	13,740,619	61,799,125
Fund Balance Above/(Below)				
Minimum Target	34,852,976	2,576,465	10,437,909	47,867,350
Maximum Target	27,806,920	2,025,723	8,148,376	37,981,020
<i>County Percent of Total Net Position</i>	<i>72.0%</i>	<i>5.8%</i>	<i>22.2%</i>	
Share of Cash Reserves and Investments	6,442,711	515,558	1,989,469	8,947,737
<i>Days Invested Cash on Hand</i>	<i>38</i>	<i>38</i>	<i>36</i>	<i>37</i>
<i>Targeted Days Invested Cash on Hand</i>	<i>90</i>	<i>90</i>	<i>90</i>	<i>90</i>
Required Invested Cash to Meet Target	15,443,410	1,207,107	5,018,154	21,668,671
Invested Cash Reserves Above/(Below) Target	(9,000,699)	(691,549)	(3,028,685)	(12,720,933)

2021 Board Work Plan

Objective	Accountability	Start Date	Measure(s) of Success	Interim Updates	Status	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Establish Facility Use Agreements	Board	Jan-20	Signed Facility Use and/or Lease Agreements with each of the three counties	Legacy agreements are in place. The updated base Lease Agreement for Marathon County is near finalization. Supporting Exhibits to the Agreement are still in development.	Open												
Prepare Local Plan	Board	Jan-20	Adopt a 3 Year Local Plan at the Annual Board Retreat	The Human Services Research Institute report completion and community engagement will continue to be on hold into 2021 due to COVID-19.	Open												
Facilitated Discussion on Diversity and Inclusion	Board	Jul-20	Adopted Diversity, Equity, and Inclusion Plan	An internal employee directed committee will be formed to develop recommendations and a plan to the Board in 2021.	Open												
Annual Review of Board Policies	Board	Jan-21	Board reviews and approves all Board Policies by December 31	Ongoing, policies are distributed across the 2021 calendar.	Open												
Approve Training Plan for Counties	Board	Jan-21	Conduct quarterly stakeholder meetings with each of the three county partners	CEO is working to setup quarterly stakeholder meetings with each of the three county partners to provide program updates and seek feedback on service needs.	Open												
CEO Appraisal	Executive Committee	Jan-21	Executive Committee reviews appraisal with CEO		Closed												
Annual Report	Board	Mar-21	Annual Report released and presentations made to County Boards		Open												
Accept the Annual Audit	Board	Apr-21	Acceptance of the annual audit by the NCCSP Board in April	Completed June 24	Closed												
County Fund Balance Reconciliation	Board	Apr-21	Fund balance presentation and Adoption by NCCSP Board	Completed June 24	Closed												
Determine Budget Guidelines and Priorities	Executive Committee	Apr-21	Budget guidelines and priorities of the member Counties are communicated to the Board by June 1st	Completed June 24	Closed												
Nomination and Election of Board Officers	Board	Apr-21	The Governance Committee will send a slate of Officers to the Board to be elected at the Annual Meeting in May	Completed June 24	Closed												
Recommend Annual Budget to Counties	Board	May-21	Budget recommendation to the Counties by October 1st	The draft budget will be presented to the NCHC Board at the October 28 meeting. Recommendations to Counties to occur following that meeting.	Open												
Annual Review of Board End Statements	Board	May-21	Adoption of End Statements with any modifications by June 1st	Completed June 24	Closed												
Selection of Independent Certified Public Accounting Firm	Executive Committee	May-21	Engagement Letter approved by Executive Committee by October 1st	For review in October.	Open												
Evaluate NCCSP Board Effectiveness	Board	Aug-21	Conduct annual review of the effectiveness of Board's Policy Governance Model and provide recommendations to the Board		Open												
Review and Approve Policy Governance Manual	Board	Aug-21	Approve Policy Governance manual at the September Board meeting		Open												
Review and Approve Board Development and Recruitment Plan	Governance Committee	Aug-21	Board Development and Recruitment Plan reviewed and approved by the NCCSP Board		Open												

2021 Board Work Plan

Objective	Accountability	Start Date	Measure(s) of Success	Interim Updates	Status	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Review and Approve Performance Standards	Executive Committee	Sep-21	Adopt Annual Performance Standards		Open												
Approve Annual Quality and Safety Plan	Board	Oct-21	Approve plan in December	Scheduled for the December 16 meeting	Open												
Review CEO Succession Plan	Board	Oct-21	Review and update CEO succession plan		Open												
Review and Approve CEO Compensation Plan	Executive Committee	Nov-21	Approve CEO Compensation Plan for the upcoming year by December		Open												
Approve Utilization Review Plan	Board	Nov-21	Approve plan in December	Scheduled for the December 16 meeting	Open												
Board Development Plan and Calendar	Governance Committee	Nov-21	Approve Board Development Plan and Calendar for the upcoming year at the December meeting		Open												