

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 as noted below:

> Friday, April 4, 2025 at 9:00 AM North Central Health Care – NCHC Eagle Board Room 2400 Marshall Street, Suite A, 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:

Meeting number: 1-408-418-9388 Access Code: 2494 789 6413 Password: 1234

AGENDA

- 1. Call to Order
- 2. Public Comment for Matters Appearing on the Agenda (Limited to 15 Minutes)
- 3. Approval of January 29, February 20, and March 21, 2025 Executive Committee Meeting Minutes
- 4. Introduction of Ben Petersen, Director of Compliance & Quality G. Olsen
- 5. Educational Presentations, Committee Discussion, and Organizational Updates
 - a. Financial Update J. Hake
 - b. Guidance Regarding Sections IV.C. 6 & 7 of Joint County Agreement G. Olsen
- 6. Discussion and Possible Action
 - a. ACTION: Step Scale Adjustment for Equity, Education, and Recruitment Needs J. Hake/G. Olsen
 - b. ACTION: Acute Care Services Restructure J. Hake/V. Tylka
 - c. ACTION: Proposed One Time Payment J. Hake/M. Bredlau
 - d. ACTION: Budget Policy J. Hake/G. Olsen
- 7. CLOSED SESSION
 - a. Motion to go into Closed Session (Roll Call Vote Suggested) Pursuant to Wis. Stat. ss. 19.85(1)(c), for the purpose of "[c]onsidering employment, promotion, compensation or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility" and pursuant to Wis. Stat. s. 19.85(1)(g), for the purpose of "[c]onferring with legal counsel for the governmental body who is rendering oral or written advice concerning strategy to be adopted by the body with respect to litigation in which it is or is likely to become involved", to wit: discussion with counsel relative to direction and strategy as to an employment matter over which the committee exercises responsibility.
 - b. Motion to Return to Open Session (Roll Call Vote Unnecessary) and Possible Announcements and/or Action Regarding Closed Session items

- c. Motion to go into Closed Session (Roll Call Vote Suggested) Pursuant to Wis. Stat. ss. 19.85(1)(c), for the purpose of "[c]onsidering employment, promotion, compensation or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility" and pursuant to Wis. Stat. s. 19.85(1)(g), for the purpose of "[c]onferring with legal counsel for the governmental body who is rendering oral or written advice concerning strategy to be adopted by the body with respect to litigation in which it is or is likely to become involved", to wit:
 - i. Conferring with Counsel Regarding Recent Department of Labor ("DOL") Settlement Communications and Strategy Relative to DOL Litigation;
 - Executive Director's Performance Evaluation; ii.
 - iii. Setting 2025 Wages for Executive Director, Deputy Executive Director, and Senior Director of Behavioral Health Services.
- d. Motion to Return to Open Session (Roll Call Vote Unnecessary) and Possible Announcements and/or Action Regarding Closed Session items
- 8. Next Meeting Date & Time, Location and Future Agenda Items
 - a. Wednesday, April 30, 2025, 1:00 p.m., NCHC Eagle Board Room
- 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: 04/03/2025 TIME: 8:30 AM BY: D. Osowski



NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

January 29, 2025		1:00 p.m.	North Central Health Care
Present:	X(WebEx) Kurt Gibbs	Х	Renee Krueger
	X Lance Leonha	rd X	Robin Stowe

Staff Present: Gary Olsen, Jason Hake, Vicki Tylka, Marnie Bredlau

Others Present: Dejan Adzic, Deputy Corporation Counsel, Jenna Bidwell, Cottingham & Butler

Call to Order

• At the request of Chair Gibbs, Mr. Leonhard called the meeting to order at 1:00 p.m.

Public Comment for Matters Appearing on the Agenda

• None

Approval of December 12, 2024 Executive Committee Meeting Minutes

• **Motion**/second, Stowe/Krueger, to approve the December 12, 2024 Executive Committee Meeting minutes. Motion carried.

Financial Update

• December 2024 financials were reviewed by J. Hake. Highlights included an explanation of the loss in Community Services, much of which will be covered through Comprehensive Community Services (CCS) reconciliation, and higher expenses for provider/staffing mostly due to coverage for the holidays. A one-time payment from the State was received, however, after the State completes their management reports, we expect a large portion of that payment will be returned; until then our cash will show higher than usual. Moving forward write-offs will be reviewed with the committee each month. One area of focus in 2025 will be to reduce administrative write-offs.

Update on Director of Compliance and Quality Recruitment

• We have an accepted offer from an excellent candidate for the position of Director of Compliance and Quality and believe he will be a great addition to the team. He is expected to begin March 10.

Presentation by Cottingham & Butler on North Central Health Care Compensation Project Overview

- Jenna Bidwell was introduced and reviewed the results and recommendations of the compensation project.
- Committee discussed the proposed step scale at length and requested additional information be provided before considering approval.

Approval of Proposed Step Scale

• Postponed to February.

Recommendations of the Medical Staff

• **Motion**/second, Krueger/Stowe to approve the following recommendations of the Medical Staff: reappointments for Jean Vogel, M.D., Gbolahan Oyinloye, M.D., Sabrina Spets, APNP, and Hannah Wenzlick, PA-C. Motion carried.

Closed Session

- **Motion**/second, Krueger/Stowe, to go into Closed Session pursuant to Wis. Stat. ss. 19.85 (1)(c), for the purpose of "[c]onsidering employment, promotion, compensation or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercised responsibility: to wit: Review Executive Director's performance appraisal data. Roll call vote taken. All indicating Aye. Motion carried. Meeting convened in closed session at 2:54 P.M.
- **Motion**/second, Store/Krueger, to return to open session. Motion carried unanimously. Meeting returned to open session at 3:55 p.m.

Announcements and/or Action Regarding Closed Session Items

• No action was taken in closed session.

Next Meeting Date & Time, Location and Future Agenda Items

• Wednesday, February 26, 2025, 1:00 p.m., NCHC Eagle Board Room

Adjournment

• **Motion**/second, Stowe/Krueger, to adjourn the meeting at 3:56 p.m. Motion carried unanimously.

Minutes prepared by Debbie Osowski, Senior Executive Assistant



NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

February 20, 2025		1:30 p.m	1:30 p.m.			
Present:	Х	Kurt Gibbs	Х	Renee Krueger		
	Х	Lance Leonhard	Х	Robin Stowe		

Staff Present: Gary Olsen, Jason Hake, Vicki Tylka, Marnie Bredlau

Others Present: Dejan Adzic, Deputy Corporation Counsel, Jenna Bidwell, Cottingham & Butler

Call to Order

• The meeting was called to order by Chair Gibbs at 2:30 p.m.

Public Comment for Matters Appearing on the Agenda

• None

Continued Discussion with Cottingham & Butler on North Central Health Care Compensation Project Overview

- Gary Olsen, Executive Director, provided an overview of the purpose for the compensation review which includes keeping NCHC competitive within the market. At the request of the Committee during the January meeting, the meeting packet includes the pay ranges for 60th, 65th, and 70th market percentile rankings. The salmon-colored columns indicate the 50th percentile and the gray columns indicate market.
- Total cost to implement the 60th percentile this year, included giving credit for years of service in the position up to step 6, is approximately \$64,000 less than what is budgeted for salary increases in the 2025 budget. If the 65th percentile is approved, the 2025 budget would have a shortfall of about \$20,000.
- Two minor changes have been made to the position listing that was provided at the January meeting according to Jason Hake, Deputy Executive Director. Those changes are: adjusting the Mount View Care Center registered nurse pay grade from 13 to 14 to be consistent with the registered nurse positions in Behavioral Health Services, and moving the nurse manager of Acute Care Services from pay grade 15 to 16 for consistency purposes with other nurse manager positions.

Proposed Step Scale

• **Motion**/second, Leonhard/Stowe, to adopt the step scale with the 60th percentile as contained in the packet as the guide, all the positions that were previously circulated in our January meeting would be put on that scale as set forth in our meeting packet with the exceptions referenced by the Deputy Executive Director, and with an effective implementation date of April 18, 2025. Motion carried.

Closed Session

- **Motion**/second, Stowe/Krueger, to go into Closed Session pursuant to Wis. Stat. ss. 19.85 (1)(c), for the purpose of "[c]onsidering employment, promotion, compensation or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercised responsibility: to wit: Review Executive Director's performance appraisal data. Roll call vote taken. All indicating Aye. Motion carried. Meeting convened in closed session at 2:50 P.M.
- **Motion**/second, Leonhard/Krueger, to return to open session. Motion carried unanimously. Meeting returned to open session at 3:54 p.m.

Announcements and/or Action Regarding Closed Session Items

• None

Next Meeting Date & Time, Location and Future Agenda Items

• Wednesday, March 26, 2025, 1:00 p.m., NCHC Eagle Board Room

Adjournment

• **Motion**/second, Leonhard/Stowe, to adjourn the meeting at 3:55 p.m. Motion carried unanimously.

Minutes prepared by Debbie Osowski, Senior Executive Assistant



NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

March 21, 2025		8:30 a.m.	8:30 a.m.		
Present:	X X	Kurt Gibbs Lance Leonhard		Renee Krueger Robin Stowe	

Staff Present: Gary Olsen

Call to Order

• The meeting was called to order by Chair Gibbs at 8:33 a.m.

Medical Staff Recommendations

• **Motion**/second, Leonhard/Krueger, to approve the following Medical Staff recommendations: Initial Appointment of David McMahon, D.O., Reappointments of Daniel Hoppe, M.D. and Bababo Opaneye, M.D., Amendment for Kessa Erickson, APNP

Adjournment

• Motion/second, Leonhard/Krueger, to adjourn the meeting at 8:36 a.m. Motion carried unanimously.

Minutes prepared by Debbie Osowski, Senior Executive Assistant

North Central Health Care Programs by Service Line - Current Month February-25

		Revenue			Expense		Net Income/	Variance
	Actual	Budget	Variance	Actual	Budget	Variance	(Loss)	From Budget
BEHAVIORAL HEALTH SERVICES		5			5			5
Adult Behavioral Health Hospital	831,136	667,513	163,623	477,471	492,385	14,914	353,666	178,537
Adult Crisis Stabilization Facility	591,115	203,299	387,816	178,862	164,136	(14,725)	412,253	373,090
Lakeside Recovery MMT	142,547	127,935	14,612	119,307	131,311	12,004	23,239	26,616
Youth Behavioral Health Hospital	315,916	273.930	41,986	301,903	314,065	12,162	14,013	54,148
Youth Crisis Stabilization Facility	95,076	126,847	(31,771)	98,720	109,340	10,620	(3,644)	(21,150)
Contracted Services (Out of County Placements)	-	-	-	204,425	153,778	(50,647)	(204,425)	(50,647)
Crisis Services	262,114	250,205	11,909	181,068	242,262	61,194	81,045	73,103
Psychiatry Residency	15,883	20,171	(4,288)	2,720	43,310	40,590	13,163	36,302
. ojomaci ji toolaonoj	2,253,787	1,669,899	583,888	1,564,476	1,650,587	86,111	689,311	669,999
COMMUNITY SERVICES			(00.00.0)				((= = = = = = = = = = = = = = = = = =	(0 = (0)
Outpatient Services (Marathon)	459,826	493,727	(33,901)	501,354	532,739	31,386	(41,528)	(2,516)
Outpatient Services (Lincoln)	104,864	89,548	15,316	58,175	79,192	21,016	46,689	36,333
Outpatient Services (Langlade)	87,992	79,577	8,415	62,708	65,655	2,947	25,283	11,362
Community Treatment Adult (Marathon)	584,357	491,794	92,563	541,795	581,271	39,476	42,562	132,039
Community Treatment Adult (Lincoln)	76,393	74,794	1,599	82,365	82,177	(187)	(5,972)	1,411
Community Treatment Adult (Langlade)	33,257	28,560	4,697	38,506	40,522	2,017	(5,249)	6,713
Community Treatment Youth (Marathon)	632,363	549,475	82,888	604,678	593,617	(11,061)	27,686	71,827
Community Treatment Youth (Lincoln)	191,802	157,638	34,164	183,903	169,227	(14,677)	7,899	19,487
Community Treatment Youth (Langlade)	156,325	113,267	43,058	153,723	127,926	(25,797)	2,602	17,261
Hope House (Sober Living Marathon)	2,805	6,559	(3,754)	7,381	8,895	1,514	(4,576)	(2,240)
Sober Living (Langlade)	2,300	3,231	(931)	4,685	6,125	1,439	(2,385)	509
Adult Protective Services	72,771	69,680	3,091	82,165	73,408	(8,757)	(9,394)	(5,666)
Jail Meals (Marathon)	-	-	-	-	-	-	-	-
	2,405,055	2,157,850	247,205	2,321,438	2,360,754	39,316	83,617	286,521
COMMUNITY LIVING								
Day Services (Langlade)	20,030	25,254	(5,224)	19,081	25,034	5,953	950	730
Supportive Employment Program	15.318	22,926	(7,608)	18,693	26,417	7,725	(3,374)	117
	35,349	48,180	(12,831)	37,773	51,451	13,678	(2,425)	847
NURSING HOMES	0 4 4 4 070	0 000 405	04 544	4 000 005	4 070 007	(04.007)	040 454	0.040
Mount View Care Center	2,111,676	2,080,135	31,541	1,898,225	1,876,327	(21,897)	213,451	9,643
Pine Crest Nursing Home	1,105,849	1,245,062	(139,213)	1,087,068	1,202,118	115,050	18,781	(24,163)
	3,217,525	3,325,197	(107,672)	2,985,292	3,078,445	93,153	232,233	(14,519)
Pharmacy	513,959	597,490	(83,530)	526,440	630,146	103,706	(12,481)	20,176
OTHER PROGRAMS								
Aquatic Services	74,060	98,301	(24,242)	75,549	111,584	36,035	(1,489)	11,793
Birth To Three	129.860	50,501	129.860	129.860	-	(129,860)	(1,+00)	-
Demand Transportation	35,447	34,982	465	33,105	48,931	15,826	2,343	16,292
	239,367	133,284	106,084	238,514	160,515	(77,999)	853	28,085
	200,001	100,201	100,001	200,011	100,010	(11,000)	000	20,000
Total NCHC Service Programs	8,665,041	7,931,899	722,643	7,673,933	7,931,898	275,067	991,108	997,710
SELF-FUNDED INSURANCE TRUST FUNDS								
Health Insurance Trust Fund	681,632	754,739	(73,107)	541,209	754,739	213,529	140,422	140,422
Dental Insurance Trust Fund	35,590	34,459	1,131	36,420	34,459	(1,960)	(829)	(829)
Total NCHC Self-Funded Insurance Trusts	717,222	789,198	(71,975)	577,629	789,198	211,569	139,593	139,593
	, -	-, -,		,	-, -,	,		,

North Central Health Care Programs by Service Line - Year to Date For the Period Ending February 28, 2025

		Revenue			Expense		Net Income/	Variance
	Actual	Budget	Variance	Actual	Budget	Variance	(Loss)	From Budget
BEHAVIORAL HEALTH SERVICES		5			5			
Adult Behavioral Health Hospital	1,642,038	1,335,026	307,012	1,027,454	984,770	(42,685)	614,584	264,327
Adult Crisis Stabilization Facility	825,755	406,599	419,156	363,228	328,273	(34,955)	462,527	384,201
Lakeside Recovery MMT	232,135	255,870	(23,734)	255,882	262,623	6,741	(23,746)	(16,993)
Youth Behavioral Health Hospital	618,560	547,860	70,700	543,278	628,130	84,851	75,281	155,551
Youth Crisis Stabilization Facility	197,143	253,693	(56,550)	214,753	218,680	3,928	(17,610)	(52,623)
Contracted Services (Out of County Placements)	-	-	-	295,896	307,556	11.660	(295,896)	11,660
Crisis Services	520,714	500,409	20,305	375,761	484,523	108,762	144,953	129,067
Psychiatry Residency	31,766	40,341	(8,575)	5,621	86,619	80,998	26,145	72,423
	4,068,111	3,339,798	728,313	3,081,874	3,301,174	219,300	986,238	947,613
COMMUNITY SERVICES								
Outpatient Services (Marathon)	882.862	987.454	(104,592)	926.088	1.065.479	139.391	(43,225)	34,799
Outpatient Services (Lincoln)	194,566	179,095	15,470	127,306	158,383	31,078	67,260	46,548
Outpatient Services (Langlade)	174,513	159,154	15,360	126,083	131,310	5,228	48,430	20,587
Community Treatment Adult (Marathon)	1,027,079	983,588	43,492	1,021,650	1,162,541	140,891	5,429	184,383
Community Treatment Adult (Lincoln)	141.109	149,588	(8,479)	170.217	164,355	(5,863)	(29,108)	(14,342)
Community Treatment Adult (Langlade)	65,371	57,120	8,251	81,144	81,045	(99)	(15,773)	8,151
Community Treatment Youth (Marathon)	1,059,042	1,098,951	(39,908)	1,074,595	1,187,234	112,639	(15,553)	72,730
Community Treatment Youth (Lincoln)	345,926	315,276	30,651	343,161	338,453	(4,708)	2,765	25,943
Community Treatment Youth (Langlade)	278.785	226.534	52,251	286.922	255,853	(31,070)	(8,137)	21,181
Hope House (Sober Living Marathon)	9,811	13,118	(3,307)	13,879	17,790	3,911	(4,068)	604
Sober Living (Langlade)	9,403	6,463	2,940	9,877	12,250	2,373	(4,008)	5,313
Adult Protective Services	151,646	139,360	12,286	168,016	146,817	(21,199)	(16,369)	(8,912)
Jail Meals (Marathon)	-	-	-	-	-	(21,199)	(10,309)	-
	4,340,114	4,315,700	24,414	4,348,937	4,721,508	372,571	(8,823)	396,985
COMMUNITY LIVING								
Day Services (Langlade)	46,127	50,508	(4,381)	41,889	50,068	8,179	4,239	3,798
Supportive Employment Program	28,118	45,852	(17,733)	38,045	52,835	14,790	(9,927)	(2,943)
	74,245	96,360	(22,114)	79,933	102,903	22,970	(5,688)	855
NURSING HOMES								
Mount View Care Center	4,273,320	4,160,270	113,050	3,792,152	3,752,654	(39,498)	481,168	73,552
Pine Crest Nursing Home	2,333,815	2,490,123	(156,308)	2,298,010	2,404,235	106,225	35,805	(50,083)
	6,607,136	6,650,393	(43,258)	6,090,162	6,156,890	66,727	516,973	23,469
Pharmacy	1,115,992	1,194,979	(78,987)	1,047,797	1,260,293	212,496	68,195	133,509
OTHER PROGRAMS								
Aquatic Services	174,959	196,603	(21,644)	157,886	223,168	65,283	17,073	43,639
Birth To Three	129,860	-	129,860	129,860	-	(129,860)	-	-
Demand Transportation	70,039	69,964	74	73,028	97,862	24,834	(2,989)	24,908
Domana Hanoportation	374,858	266,567	108,290	360,774	321,030	(39,743)	14,084	68,547
Total NCHC Service Programs	16,580,456	15,863,798	716,657	15,009,477	15,863,797	854,320	1,570,979	1,570,978
SELF-FUNDED INSURANCE TRUST FUNDS								
Health Insurance Trust Fund	1,438,498	1,509,477	(70,979)	1,352,801	1,509,477	156,676	85,697	85,697
Dental Insurance Trust Fund	71,333	68,918	2,415	65,684	68,918	3,235	5,649	5,649
Total NCHC Self-Funded Insurance Trusts	1,509,831	1,578,395	(68,564)	1,418,484	1,578,395	159,911	91,346	91,346
	1,003,001	1,070,000	(00,004)	1,410,404	1,070,090	100,011	31,040	31,340

North Central Health Care Fund Balance Review For the Period Ending February 28, 2025

	Marathon	Langlade	Lincoln	Total
YTD Appropriation (Tax Levy) Revenue	976,836	39,415	176,476	1,192,727
Total Revenue at Period End County Percent of Total Net Position	11,639,327 70.2%	1,103,567 6.7%	3,837,562 23.1%	16,580,456
Total Operating Expenses, Year-to-Date * * Excluding Depreciation Expenses to be allocated at the	10,374,213 e end of the year	1,014,069	3,621,195	15,009,477
Share of Operating Cash Days Cash on Hand	19,638,846 115	1,862,030 112	6,475,055 109	27,975,932 113
Minimum Target - 20% Over/(Under) Target	12,449,056 7,189,790	1,216,883 645,148	4,345,434 2,129,622	18,011,372 9,964,560
Share of Investments Days Invested Cash Days Invested Cash on Hand Target - 90 Days	- 0 15,348,151	- 0 1,500,266	- 0 5,357,384	- 0 22,205,801
Current Percentage of Operating Cash	189.3%	183.6%	178.8%	186.4%
Over/(Under) Target Share of Investments Amount Needed to Fulfill Fund Balance Policy	7,189,790 7,189,790	645,148 645,148	2,129,622	9,964,560 - 9,964,560
	1,100,100		2,120,022	0,001,000

North Central Health Care Review of Services in Marathon County For the Period Ending February 28, 2025

	Revenue				Expense		Net Income/	Variance
	Actual	Budget	Variance	Actual	Budget	Variance	(Loss)	From Budget
Direct Services								
Outpatient Services	882,862	987,454	(104,592)	926,088	1,065,479	139,391	(43,225)	34,799
Community Treatment-Adult	1,027,079	983,588	43,492	1,021,650	1,162,541	140,891	5,429	184,383
Community Treatment-Youth	1,059,042	1,098,951	(39,908)	1,074,595	1,187,234	112,639	(15,553)	72,730
Hope House Sober Living	9,811	13,118	(3,307)	13,879	17,790	3,911	(4,068)	604
Demand Transportation	70,039	69,964	74	73,028	97,862	24,834	(2,989)	24,908
Jail Meals	-	-	-	-	-	-	-	-
Aquatic Services	174,959	196,603	(21,644)	157,886	223,168	65,283	17,073	43,639
Mount View Care Center	4,273,320	4,160,270	113,050	3,792,152	3,752,654	(39,498)	481,168	73,552
	7,497,112	7,509,948	(12,835)	7,059,278	7,506,728	447,451	437,835	434,615
Shared Services								
Adult Behavioral Health Hospital	1,233,900	1,005,996	227,904	762,709	731,023	(31,686)	471,191	196,218
Youth Behavioral Health Hospital	459,520	407,038	52,482	403,291	466,279	62,988	56,229	115,470
Residency Program	23,581	29,946	(6,365)	4,173	64,300	60,127	19,408	53,762
Supportive Employment Program	20,873	34,037	(13,164)	28,242	39,221	10,979	(7,369)	(2,185)
Crisis Services	428,626	413,553	15,073	278,938	359,676	80,737	149,688	95,810
Adult Crisis Stabilization Facility	612,981	301,830	311,152	269,634	243,686	(25,948)	343,347	285,203
Youth Crisis Stabilization Facility	146,345	188,324	(41,979)	159,417	162,333	2,916	(13,072)	(39,063)
Pharmacy	828,433	887,067	(58,635)	777,809	935,552	157,742	50,623	99,108
Lakeside Recovery MMT	179,201	196,820	(17,619)	189,948	194,952	5,004	(10,747)	(12,615)
Adult Protective Services	112,356	103,235	9,121	124,723	108,986	(15,737)	(12,367)	(6,616)
Birth To Three	96,399	-	96,399	96,399	-	(96,399)	-	-
Contracted Services (Out of County Placements)		-	-	219,652	228,308	8,655	(219,652)	8,655
	4,142,215	3,567,846	574,368	3,314,936	3,534,315	219,379	827,279	793,747
Excess Revenue/(Expense)	11,639,327	11,077,794	561,533	10,374,213	11,041,043	666,829	1,265,114	1,228,363

North Central Health Care Review of Services in Lincoln County For the Period Ending February 28, 2025

	Revenue				Expense		Net Income/	Variance
	Actual	Budget	Variance	Actual	Budget	Variance	(Loss)	From Budget
Direct Services								
Outpatient Services	194,566	179,095	15,470	127,306	158,383	31,078	67,260	46,548
Community Treatment-Adult	141,109	149,588	(8,479)	170,217	164,355	(5,863)	(29,108)	(14,342)
Community Treatment-Youth	345,926	315,276	30,651	343,161	338,453	(4,708)	2,765	25,943
Pine Crest Nursing Home	2,333,815	2,490,123	(156,308)	2,298,010	2,404,235	106,225	35,805	(50,083)
-	3,015,417	3,134,082	(118,666)	2,938,694	3,065,426	126,732	76,722	8,066
Shared Services								
Adult Behavioral Health Hospital	253,837	206,915	46,922	157,031	150,508	(6,524)	96,806	40,399
Youth Behavioral Health Hospital	94,297	83,491	10,805	83,032	96,000	12,968	11,265	23,774
Residency Program	4,855	6,166	(1,311)	859	13,238	12,379	3,996	11,069
Supportive Employment Program	4,297	7,008	(2,710)	5,815	8,075	2,260	(1,517)	(450)
Crisis Services	63,801	60,698	3,103	57,430	74,052	16,623	6,372	19,726
Adult Crisis Stabilization Facility	126,205	62,143	64,062	55,514	50,172	(5,342)	70,690	58,719
Youth Crisis Stabilization Facility	30,130	38,773	(8,643)	32,822	33,422	600	(2,691)	(8,043)
Pharmacy	170,563	182,635	(12,072)	160,140	192,617	32,477	10,423	20,405
Lakeside Recovery MMT	31,398	35,025	(3,627)	39,108	40,138	1,030	(7,710)	(2,597)
Adult Protective Services	22,914	21,037	1,878	25,679	22,439	(3,240)	(2,764)	(1,362)
Birth To Three	19,847	-	19,847	19,847	-	(19,847)	-	-
Contracted Services (Out of County Placements)	-	-	-	45,223	47,005	1,782	(45,223)	1,782
	822,145	703,890	118,255	682,500	727,667	45,167	139,645	163,422
Excess Revenue/(Expense)	3,837,562	3,837,973	(411)	3,621,195	3,793,094	171,899	216,367	171,488

North Central Health Care Review of Services in Langlade County For the Period Ending February 28, 2025

	Revenue				Expense		Net Income/	Variance
	Actual	Budget	Variance	Actual	Budget	Variance	(Loss)	From Budget
Direct Services								
Outpatient Services	174,513	159,154	15,360	126,083	131,310	5,228	48,430	20,587
Community Treatment-Adult	65,371	57,120	8,251	81,144	81,045	(99)	(15,773)	8,151
Community Treatment-Youth	278,785	226,534	52,251	286,922	255,853	(31,070)	(8,137)	21,181
Sober Living	9,403	6,463	2,940	9,877	12,250	2,373	(474)	5,313
Adult Day Services	46,127	50,508	(4,381)	41,889	50,068	8,179	4,239	3,798
-	574,199	499,779	74,420	545,914	530,525	(15,389)	28,285	59,031
Shared Services								
Adult Behavioral Health Hospital	154,301	122,115	32,186	107,714	103,239	(4,475)	46,587	27,711
Youth Behavioral Health Hospital	64,743	57,331	7,412	56,955	65,851	8,895	7,788	16,307
Residency Program	3,330	4,229	(899)	589	9,081	8,492	2,741	7,593
Supportive Employment Program	2,948	4,807	(1,859)	3,988	5,539	1,551	(1,041)	(309)
Crisis Services	28,286	26,158	2,129	39,393	50,795	11,402	(11,107)	13,531
Adult Crisis Stabilization Facility	86,569	42,626	43,943	38,079	34,415	(3,665)	48,489	40,278
Youth Crisis Stabilization Facility	20,668	26,596	(5,928)	22,514	22,926	412	(1,846)	(5,517)
Pharmacy	116,996	125,277	(8,281)	109,847	132,124	22,277	7,149	13,997
Lakeside Recovery MMT	21,537	24,025	(2,488)	26,826	27,532	707	(5,289)	(1,781)
Adult Protective Services	16,376	15,088	1,288	17,614	15,392	(2,222)	(1,238)	(934)
Birth To Three	13,614	-	13,614	13,614	-	(13,614)	-	-
Contracted Services (Out of County Placements)	-	-	-	31,021	32,243	1,222	(31,021)	1,222
	529,368	448,253	81,116	468,155	499,136	30,982	61,214	112,098
Excess Revenue/(Expense)	1,103,567	948,031	155,536	1,014,069	1,029,661	15,593	89,498	171,128

North Central Health Care Summary of Revenue Write-Offs For the Period Ending February 28, 2025

		MTD		YTD
Debewierel Lleelth Lleepitele				
Behavioral Health Hospitals	¢	41,436	¢	184,507
Charity Care Administrative Write-Off	\$ \$	52,781	\$ \$	105,291
Bad Debt	э \$	56,507	ф \$	100,151
Dad Debt	Ψ	50,507	Ψ	100,101
Outpatient & Community Treatment				
Charity Care	\$	60,338	\$	63,751
Administrative Write-Off	\$	3,352	\$	6,935
Bad Debt	\$	18,833	\$	28,687
Nursing Home Services				
Nursing Home Services Charity Care	\$		¢	
Administrative Write-Off	э \$	- 1,459	\$ \$ \$	- 10,166
Bad Debt	Ψ \$	-	Ψ \$	1,200
Dad Debt	Ψ		Ψ	1,200
Aquatic Services				
Charity Care	\$	-	\$	-
Administrative Write-Off	\$ \$	-	\$	-
Bad Debt	\$	-	\$	-
Pharmacy				
Charity Care	¢		¢	
Administrative Write-Off	\$ ¢	-	\$ \$	-
Bad Debt	\$ \$	-	φ \$	-
Dad Debt	Ψ	-	Ψ	-
Other Services				
Charity Care	\$	0	\$	-
Administrative Write-Off	\$	211	\$	794
Bad Debt	\$	(0)	\$	276
Grand Total				
Charity Care	\$	101,774	\$	248,259
Administrative Write-Off	э \$	57,802	φ \$	123,185
Bad Debt	э \$	75,341	φ \$	130,313
	Ψ	10,041	Ψ	100,010



To: Executive Committee
From: Gary D. Olsen, MPA, Executive Director
Date: March 28, 2025
RE: Guidance Regarding Sections IV.C. 6 & 7 of the Joint County Agreement

With the completion of the wage classification study, we are now in the process of updating the Employee Compensation and Timekeeping Policy. As part of this effort, I would like to seek guidance from the Committee regarding Sections IV.C.6 and IV.C.7 of the Joint County Agreement, which states:

IV.C.6. <u>Approval of Compensation Pay Ranges.</u> The Executive Committee shall approve all pay ranges within the organization on an annual basis.

IV.C.7. <u>Approval of New or Additional Allocated Positions and Position</u> <u>Reclassification.</u> The Executive Committee shall approve the addition of all new or additional positions within the organization and shall approve any reclassification of an existing position to the extent that the reclassification results in material change in duties, responsibilities, or compensation.

Given the complexity of NCHC and the ongoing efforts by Senior Leadership to adjust program structures, I want to ensure that we are adhering to both policy requirements and the Executive Committee's expectations regarding approvals for new positions and position reclassifications. Your guidance on this matter would be greatly appreciated.

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To:Executive CommitteeFrom:Jason Hake, Deputy Executive DirectorDate:3/28/2025Subject:Step Scale Adjustments for Equity, Education, and Recruitment Needs

During the implementation of the approved step scale, we identified circumstances that require leadership to adjust employee placement within their approved pay grades—specifically, further along the step scale. These adjustments are necessary to maintain fairness, consistency, and our ability to recruit and retain talent. Below are the three circumstances under consideration, along with our recommendations:

1. Internal Equity

To address clear discrepancies in pay among staff in similar roles and similar time in job that do not result in material financial changes.

Recommendation:

Grant the Senior Director of Human Resources the authority to adjust step placement—up to three steps above the recommended step—to correct internal equity concerns and promote fairness and consistency across the organization.

2. Leveled Positions Based on Education

For roles with identical job descriptions but differing education levels (e.g., BHPI, BHP II, BHP III or Case Manager I, Case Manager II), prior practice placed them in separate job grades based solely on education level. We are transitioning to a single job description and the same pay grade for these roles based on recommendations from the consultant.

Recommendation:

Allow the Senior Director of Human Resources to:

- Move current employees further along the step scale within their approved pay grade based on education level.
- Set appropriate starting steps for new hires based on education to maintain internal equity.

3. Hard-to-Fill Roles

For positions that are difficult to recruit for (e.g., CNAs and BHPs), we seek the flexibility to start new hires above step one, which requires adjusting current employees' placement to remain equitable.

Recommendation:

Authorize the Senior Director of Human Resources to adjust current employees' placement within the approved job grade—up to three steps higher—to align with the starting steps offered to new hires in hard-to-fill roles.

Thank you for your consideration and continued support in ensuring our compensation structure remains competitive, equitable, and responsive to organizational needs.

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To:Executive CommitteeFrom:Vicki Tylka, Senior Director of Behavioral Health ServicesDate:4/4/2025Subject:Acute Care Services Restructure Proposal

The Acute Care Services programs include NCHC's 24-7 behavioral health programs such as the Crisis Center, Crisis Stabilization Facilities, Behavioral Health Hospitals, and Lakeside Residential Treatment. Barriers to reach optimal performance include lack of key clinical and nursing positions and operational leadership, while supporting a consistent **increased census**. By updating the structure of the program leadership, we can improve our overall quality of care, compliance, and ability to meet our financial goals.

This restructuring proposal is **budget and FTE neutral** by eliminating a vacant clinical manager position and repurposing vacant nursing positions. This aligns resources in areas with the greatest demand and provides additional clinical and operational support to all 24/7 programs.

The new positions are:

Assistant Director of Acute Care Operations

Key duties include grant writing and reporting, liaison for quality program initiatives, and lead for patient care concerns. The position will oversee the operations managers for all 24/7 programs, and work in tandem with the Assistant Director of Acute Care Clinical Services.

Two FTE PM Floor Nurse Supervisors

Provide management support on evenings and most weekends with oversight of all 24/7 programs, resolving operational issues of nursing and staff patient care duties. Emphasis on ensuring quality standards of care including medication management, documentation and staff schedules.

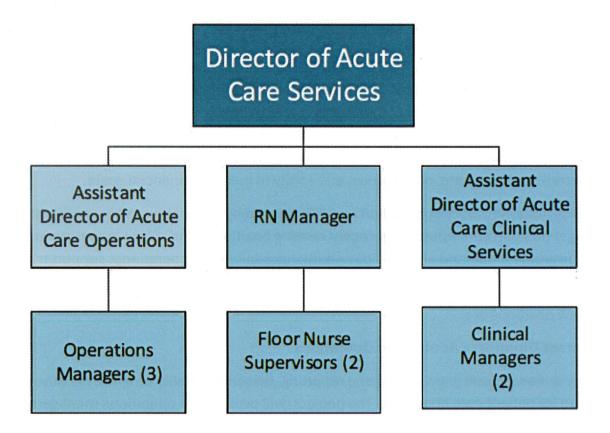
Through this revised structure, we will improve quality and compliance metrics and increase our ability to retain and grown internal clinicians. The ultimate goal is to build a sustainable system to deliver programs that support our Desired Future State.

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To:	Executive Committee
From:	Marnie Bredlau, Senior Director of Human Resources
Date:	3/28/2025
Subject:	Proposal for Approval of Employee One-Time Payment - Step Scale

Introduction:

We respectfully submit this proposal for the Executive Committee's consideration and approval to grant a one-time payment of up to 3% to employees who are above the step scale in their respective grades. This initiative aims to recognize and reward the contributions of long-serving employees who no longer receive step increases but continue to demonstrate dedication and excellence in their roles.

Background:

Currently, employees who have reached the top of their respective step scales do not receive step increases, which may impact morale and retention. To maintain competitive compensation and recognize valuable contributions, we propose a one-time payment of up to 3% based on performance and tenure.

Rationale for Approval:

- 1. **Retention and Morale** Providing a one-time payment to employees who are above their step scale will help retain experienced and skilled staff, thereby reducing turnover and recruitment costs.
- 2. **Performance Recognition** Rewarding employees who have demonstrated consistent excellence fosters a culture of high performance and engagement.
- 3. **Competitive Compensation** Ensuring employees receive financial recognition helps maintain the organization's competitiveness in attracting and retaining top talent.
- 4. **Budget Feasibility** The proposed 3% payment can be accommodated within existing budget allocations and will be awarded based on available resources and performance.

Implementation:

- Payment will be granted on a discretionary basis, up to a maximum of 3% of the employee's current salary.
- Payment will be granted on a discretionary basis to employees on Step 16, who did not receive a full 3% increase. The bonus would be the difference between the base pay increase and 3%.
- The Senior Director of Human Resources and Deputy Executive Director will oversee the implementation and allocation of these bonuses to ensure transparency and fairness.

Request for Approval:

We seek the Executive Committee's approval to implement this initiative. Your support will reinforce our commitment to employee recognition and retention.

Thank you for your consideration. We welcome any feedback or recommendations to refine this proposal further.

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Policy Title: Budget	North Central Health Care Person centered. Outcome focused.
Policy #: 105-300	Program: Administration 105
Date Issued: 04/29/2021	Policy Contact: Chief Financial OfficerDeputy Executive Director

Related Forms

None

1. Purpose

The annual budget provides financial direction and operational priorities for program management. The lindividual program budgets provide an serve as accountability tools to ensure responsible resource utilization review how resources are being utilized. AThe budget is designed to protect the resources of the safeguard organizational resources, ensure maintainenance of accurate financial records records and guide operational decision-making in alignment with North Central Health Care's (NCHC) mission and strategic plan. of the organization's financial activities, and provide a frame-work for operational decision making.

2. Definitions

Budget: an estimation of revenues and expenditures over a specified period of time.

Generally Accepted Accounting Principles (GAAP): the common set of accounting principles, standards, and procedures issued by the Financial Accounting Standards Board (FASB).

Operating Budget: the annual budget stated in terms of classifications such as programs which contains estimates of resources required for the operations and is stated in categories by revenue and expense accounts.

Capital Budget: the budget for long term investments such as building and equipment. Capital investments meet a dollar and a useful life threshold as set by policy.

3. Policy

It is the policy of North Central Health Care (NCHC) to establish an annual budget that maintains control of the use of resources and provides direction of how the resources will be utilized based on the mission of the organization and the strategic plan. The annual budget includes an operating budget and a capital budget which are approved by the <u>Board of DirectorsExecutive Committee</u>. The budget is prepared in accordance with Generally Accepted Accounting Principles (GAAP). Throughout the fiscal year, the CFO leadership will report to the Executive

<u>Committee and the NCHCSP</u> Board of Directors the status of the budget compared to actual results. Program directors are responsible throughout the year to manage their budgets <u>effectively</u>.

4. General Procedure

4.1. Budget Development

Prior to the May NCCSP Board Meeting, the Executive Committee meets to discuss and direct staff on budget guidelines, priorities, and objectives. March of every year, the Board will discuss with the Executive Director if there are any 51.42 program changes they would like to see considered in the next budget. These suggestions would then be taken to the NCCSP Executive Committee for final consideration and approval.

The Executive Committee shall provide budget guidelines and priorities, as well as a budget development calendar, to direct development to the Executive Director no later than June 1st.

4.2. The <u>Chief Financial Officer (CFO) Deputy Executive Director</u> works together with the <u>Chief Executive Officer (CEO) Executive Director</u>, NCHC <u>Executive Senior Leadership</u> Team, and Program Management to develop an annual Budget that is an accurate reflection of the Executive Committee's direction.

4.3. The Budget is developed using the organization's standard revenue recognition and cost allocation procedures. The cost allocation methods are approved by the **Board-Executive Committee** annually.

4.2. Budget Approval

A proposed Budget will be presented to the <u>NCHC Board Executive Committee</u> no later than August 1 of each year in <u>September</u> for approval. <u>The Executive</u> <u>Committee shall take action on the Director's proposed budget.</u>

Once adopted by the Executive Committee, the Executive Committee shall transmit the budget to the county boards of supervisors of Langlade, Lincoln, and Marathon counties.

The Budget is then forwarded to each of the partner counties for approval through each Retained County Official. Once approved by each of the partner County Boards, the proposed Budget will become the final approved Budget and will be distributed to Management for implementation.

Once approved by the Executive Committee, the proposed budget becomes the final approved budget and is distributed to Management for implementation.

September of every year, the approved budget will be presented to the board. At this meeting, a motion will be required to approve the Executive Director to forward the submitted final approved budget to the Department of Health Services in accordance with s. 46.031(1) for authorized services.

4.4.4.3. Budget Amendment

Budget amendments may be proposed by program directors if operational needs change. Amendments must not create a budget deficit or require an increase in tax levy.

The Deputy Executive Director must review and approve all proposed amendments.

5. References

- 5.1. CMS:
- 5.2. Joint Commission:
- 5.3. Other:

Related Policies, Procedures, and Documents