

OFFICIAL NOTICE AND 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 and time as noted below:

Tuesday, December 2, 2025 at 1:00 PM

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 Link: https://ccitc.webex.com/ccitc/j.php?MTID=mdc9bf42f6bf98d1096b0c5e09bb639b0
Meeting number: 1-408-418-9388 Access Code: 2497 696 5351 Password: 1234

AGENDA

- 1. Call to Order
- 2. Public Comment for Matters Appearing on the Agenda (Limited to 15 Minutes)
- 3. Approval of October 29, 2025 and November 20, 2025 Executive Committee Meeting Minutes
- 4. Educational Presentations, Committee Discussion, and Organizational Updates
 - a. Financial Update J. Hake
 - b. 2026 Meeting Schedule J. Hake
- 5. Discussion and Possible Action
 - a. ACTION: Approval of 2026 Fee Schedule K. Oliva
 - b. ACTION: Approval of Grade Order List J. Hake/M. Bredlau
 - c. ACTION: Approval of Updated Compensation Administration Guide M. Bredlau
 - d. ACTION: Approval of Additional Holiday M. Bredlau
 - e. ACTION: Approval of Behavioral Health Professional Supervisor V. Tylka
 - f. ACTION: Approval of Clinical Manager for Acute Care Services V. Tylka
 - g. ACTION: Nursing Home Operations Committee J. Hake
 - h. ACTION: Long-term Sustainability of the Adult Day Services-Langlade County Due to Decreased Funding J. Hake

6. Closed Session

- a. Motion to go into Closed Session (Roll Call Vote Suggested) Pursuant to Wis. Stat. ss. 19.85(1)(c),(f) and (g), 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", "considering medical data of specific persons", "preliminary consideration of specific personnel problems or investigation of charges against specific persons," and "conferring with counsel" with respect to litigation NCHC could become, or is likely to be, involved in to wit: Update on Investigative Matters Concerning NCHC Employees and Survey Results and Discuss Program Specific Personnel Issues and Concerns, Discuss Medical Data of Certain Individuals, and Update From Legal Counsel Regarding Potential Claims Associated with Employee Actions
- b. Motion to return to Open Session (Roll Call Vote Unnecessary) and possible announcements and/or action regarding Closed Session items

7. Next Meeting Date & Time, Location and Future Agenda Items

a. Wednesday, January 28, 2026, 1:00 p.m., NCHC Eagle Board Room

8. 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

DATE: <u>11/25/2025</u> TIME: 4:00 PM BY: <u>D. Osowski</u>

Presiding Officer or Designee



NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

October 29, 2025 1:00 p.m. North Central Health Care

Present: X Kurt Gibbs $X_{(WebEx)}$ Renee Krueger

X Lance Leonhard X Robin Stowe

Staff Present: Gary Olsen, Jason Hake, Vicki Tylka, Marnie Bredlau, Steven St. Louis

Others Present: Brian Desmond, Marathon County Corporation Counsel

Call to Order

• The meeting was called to order by Chair Gibbs at 1:00 p.m.

Public Comment for Matters Appearing on the Agenda

None

Approval of September 24 and September 30, 2025 Executive Committee Meeting Minutes

• **Motion**/second, Leonhard/Stowe, to approve September 24, 2025 and September 30, 2025 Executive Committee meeting minutes. Motion carried.

Introduction of Steven St. Louis

• Mr. Hake introduced Steven St. Louis as Interim Nursing Home Administrator and Mr. St. Louis provided an overview of his background.

Financial Update

- Mr. Hake noted that September had net income of \$109,000. Pine Crest Nursing Home saw a loss as we continue to see invoices come in from months prior to transition. Mount View saw net income which was driven by a slight increase in census. We will see a substantial loss in revenue in the adult day services area due to Lakeland Care, one of the MCO's we contract with, discontinuing the majority of their clients. They determined these services should be supported within the residential setting. We anticipate Inclusa to be following in the same direction. We currently serve 29 clients in the ADS program in Langlade County. Health insurance continues to do well and cash on hand is strong, but we will see a slight dip in January after paying the sick leave balances for Pine Crest.
- Additionally, Vicki Tylka and her team are being recognized for an award after being nominated by the Children Come First Advisory Committee. NCHC will receive the Wisconsin Children's System of Care Champion award for dedication and hard work in supporting the health and well-being of children, young adults, and families.
- It was also noted that NCHC contracts with 32 other counties for our adult and youth acute care services.

Compensation Administration Guide

- The Compensation Administration Guide was provided to the committee for review and feedback. The following changes were requested by the committee:
 - o Compensation Upon Involuntary Demotion (pg. 9): remove this section
 - o Compensation Upon Voluntary Demotion (pg. 9): remove 'voluntary'
 - O Complexity of Tasks/Scope of Responsibility (pg. 10): add language specifically identifying the complexity of the tasks/scope of responsibility i.e. the work that recognizes a higher level; and include anticipated duration of additional responsibility
 - O Determining Pay for New Hires (pg. 4): Change last sentence to include reference to market adjustment section
- Motion/second, Stowe/Leonhard, to approve the Compensation Administration Guide with the changes mentioned during this discussion and for staff to provide a final document that includes these changes for review at the next meeting. Motion carried.

Nursing Home Operations Committee

• The Committee agreed with Mr. Hake's request to move the discussion about the continuation of the Nursing Home Operations Committee to the next meeting.

Medical Staff Recommendations

• Motion/second, Stowe/Krueger, to approve the recommendations of the Medical Staff for Susan Brust, APNP, Tria Danz, MD, Richard Immler, MD, and Susan Tran, MD. Mr. Hake referred to the Medical Staff meeting minutes granting temporary privileges to Dr. Danz 10/27-28/2025 so she could begin working on 10/27. Mr. Stowe moved, and Ms. Krueger seconded, to include the additional context of temporary privileges for Dr. Danz to the approval of the Medical Staff recommendations in the motion. Motion carried.

Closed Session

- Mr. Desmond explained the purpose of the closed session relates to an investigative matter that could have reputational interests of harm depending on the outcome of the matter, therefore it is important that the Board discuss the status of this matter in closed session, at least up until the point in time that the matter has been resolved.
- Motion/second, Leonhard/Stowe, to go into Closed Session (Roll Call Vote Suggested) pursuant to Wis. Stat. ss. 19.85(1)(c),(f) and (g), 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", "considering medical data of specific persons", "preliminary consideration of specific personnel problems or investigation of charges against specific persons," and "conferring with counsel" with respect to litigation NCHC could become, or is likely to be, involved in to wit: Update on Investigative Matters Concerning NCHC Employees and Survey Results and Discuss Program Specific Personnel Issues and Concerns, Discuss Medical Data of Certain Individuals, and Update From Legal Counsel Regarding Potential Claims Associated with Employee Actions. Roll call vote taken; all indicating aye. Staff remained in closed session. Motion carried. Meeting convened in closed session at 1:55 p.m.

- Motion/second, Stowe/Leonhard, to return to open session at 2:56 p.m. Motion carried.
- Possible Announcements and/or Action Regarding Closed Session items
 - o None

Next Meeting Date & Time, Location and Future Agenda Items

• Tuesday, December 2, 2025 at 1:00 p.m. in the NCHC Eagle Board Room.

Adjournment

• Motion/second, Leonhard/Stowe, to adjourn the meeting at 2:57 p.m. Motion carried.

Minutes prepared by Debbie Osowski, Senior Executive Assistant





NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

November 20, 2025 3:00 p.m. North Central Health Care

Present: X Kurt Gibbs $X_{(WebEx)}$ Renee Krueger

X Lance Leonhard X Robin Stowe

Staff Present: Jason Hake

Others Present: Brian Desmond, Marathon County Corporation Counsel

Call to Order

• The meeting was called to order by Chair Gibbs at 3:02 p.m.

Closed Session

- Mr. Desmond explained that the rationale for a closed session is because the committee will be discussing a personnel matter that could affect the reputation of the individuals being discussed and it is proper to discuss those matters in closed session as to not incur any liability at this point by making statements in a public meeting.
- Motion/second, Stowe/Leonhard, to go into Closed Session (Roll Call Vote Suggested) pursuant to Wis. Stat. ss. 19.85(1)(c),(f) and (g), 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", "considering medical data of specific persons", "preliminary consideration of specific personnel problems or investigation of charges against specific persons," and "conferring with counsel" with respect to litigation NCHC could become, or is likely to be, involved in to wit: Update on Investigative Matters Concerning NCHC Employees and Survey Results and Discuss Program Specific Personnel Issues and Concerns, Discuss Medical Data of Certain Individuals, and Update From Legal Counsel Regarding Potential Claims Associated with Employee Actions. Roll call vote taken; all indicating aye. Staff remained in closed session. Motion carried. Meeting convened in closed session at 3:05 p.m.
- Motion/second, Leonhard/Stowe, to return to open session at 4:29 p.m. Motion carried.
- Possible announcements and/or action regarding closed session items
 - O Staff will work on the items discussed in closed session

Adjournment

• Motion/second, Stowe/Leonhard, to adjourn the meeting at 4:30 p.m. Motion carried.

Minutes prepared by Debbie Osowski, Senior Executive Assistant

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

		Revenue		Г		Expense		Net Income/	Variance
	Actual	Budget	Variance	_	Actual	Budget	Variance	(Loss)	From Budget
BEHAVIORAL HEALTH SERVICES		<u> </u>		_		J			
Adult Behavioral Health Hospital	671,133	667,513	3,620		499,981	492,385	(7,597)	171,152	(3,977)
Adult Crisis Stabilization Facility	257,482	203,299	54,183		194,061	164,136	(29,924)	63,421	24,258
Lakeside Recovery MMT	119,399	127,935	(8,536)		171,037	131,311	(39,726)	(51,638)	(48,261)
Youth Behavioral Health Hospital	338,237	273,930	64,307		251,027	314,065	63,038	87,210	127,345
Youth Crisis Stabilization Facility	155,309	126,847	28,462		146,136	109,340	(36,796)	9,172	(8,334)
Contracted Services (Out of County Placements)	-	-	-		82,897	153,778	70,881	(82,897)	70,881
Crisis Services	247,271	250,205	(2,933)		225,569	242,262	16,692	21,702	13,759
Psychiatry Residency	7,934	20,171	(12,236)		34,779	43,310	8,531	(26,844)	(3,705)
	1,796,765	1,669,899	126,866	_	1,605,488	1,650,587	45,099	191,278	171,965
COMMUNITY SERVICES									
Outpatient Services (Marathon)	478,174	493,727	(15,553)		473,683	532,739	59,056	4,491	43,504
Outpatient Services (Lincoln)	97,214	89,548	7,666		69,855	79,192	9,337	27,359	17,003
Outpatient Services (Langlade)	95,503	79,577	15,926		63,290	65,655	2,365	32,213	18,291
Community Treatment Adult (Marathon)	652,555	491,794	160,761		700,533	581,271	(119,263)	(47,978)	41,499
Community Treatment Adult (Lincoln)	75,104	74,794	310		83,344	82,177	(1,167)	(8,240)	(857)
Community Treatment Adult (Langlade)	49,066	28,560	20,506		61,284	40,522	(20,761)	(12,218)	(256)
Community Treatment Youth (Marathon)	780,034	549,475	230,559		786,882	593,617	(193,265)	(6,848)	37,294
Community Treatment Youth (Lincoln)	248,353	157,638	90,715		267,554	169,227	(98,328)	(19,201)	(7,612)
Community Treatment Youth (Langlade)	166,454	113,267	53,187		176,005	127,926	(48,079)	(9,551)	5,108
Hope House (Sober Living Marathon)	3,653	6,559	(2,906)		8,276	8,895	619	(4,623)	(2,287)
Sober Living (Langlade)	4,326	3,231	1,095		13,473	6,125	(7,348)	(9,147)	(6,254)
Adult Protective Services	66,018	69,680	(3,662)		97,614	73,408	(24,205)	(31,596)	(27,867)
Jail Meals (Marathon)	-	-	(0,002)		-		(= 1,200)	(01,000)	(2.,00.)
Can mean (managemy)	2,716,454	2,157,850	558,605	-	2,801,793	2,360,754	(441,039)	(85,339)	117,566
COMMUNITY LIVING									
Day Services (Langlade)	20,536	25,254	(4,718)		17,174	25,034	7,860	3,361	3,141
Supportive Employment Program	-	22,926	(22,926)		(2,307)	26,417	28,725	2,307	5,799
	20,536	48,180	(27,644)	_	14,867	51,451	36,584	5,668	8,940
NURSING HOMES									
Mount View Care Center	2,362,423	2,080,135	282,288		2,158,170	1,876,327	(281,843)	204,253	445
Pine Crest Nursing Home	36,735	1,245,062	(1,208,327)		61,302	1,202,118	1,140,815	(24,568)	(67,512)
, me crock rationly riothe	2,399,158	3,325,197	(926,039)	-	2,219,472	3,078,445	858,972	179,686	(67,066)
Pharmacy	584,936	597,490	(12,554)		661,695	630,146	(31,549)	(76,760)	(44,103)
OTHER PROGRAMS									
Aguatic Services	91,480	98,301	(6,821)		88,790	111,584	22,795	2,690	15,973
Birth To Three	129,860	90,301	129,860		129,860	111,504	(129,860)	2,090	15,975
Demand Transportation	35,352	34,982	370		45,143	48,931	3,788	(9,791)	- 4,158
Demand Transportation	256,692	133,284	123,409	-	263,793	160,515	(103,278)	(7,101)	20,131
	230,092	133,204	123,409		203,793	100,515	(103,270)	(7,101)	20,131
Total NCHC Service Programs	7,774,541	7,931,899	(163,254)	=	7,567,108	7,931,898	387,035	207,433	223,782
SELF-FUNDED INSURANCE TRUST FUNDS									
Health Insurance Trust Fund	721,768	754,739	(32,971)		797,326	754,739	(42,587)	(75,558)	(75,558)
Dental Insurance Trust Fund	30,517	34,459	(3,942)		35,770	34,459	(1,311)	(5,253)	(5,253)
Total NCHC Self-Funded Insurance Trusts	752,284	789,198	(36,913)	_	833,096	789,198	(43,898)	(80,811)	(80,811)
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North Central Health Care Programs by Service Line - Year to Date For the Period Ending October 31, 2025

		Revenue			Expense		Net Income/	Variance
	Actual	Budget	Variance	Actual	Budget	Variance	(Loss)	From Budget
BEHAVIORAL HEALTH SERVICES					J			
Adult Behavioral Health Hospital	7,949,788	6,675,130	1,274,657	5,409,019	4,923,848	(485,172)	2,540,768	789,485
Adult Crisis Stabilization Facility	3,361,671	2,032,993	1,328,678	1,740,091	1,641,363	(98,728)	1,621,580	1,229,950
Lakeside Recovery MMT	1,247,150	1,279,350	(32,199)	1,432,951	1,313,114	(119,837)	(185,801)	(152,037)
Youth Behavioral Health Hospital	3,299,888	2,739,302	560,587	2,923,159	3,140,649	217,490	376,729	778,076
Youth Crisis Stabilization Facility	1,580,963	1,268,467	312,496	1,397,791	1,093,402	(304,389)	183,172	8,107
Contracted Services (Out of County Placements)	-	-	-	1,629,663	1,537,780	(91,882)	(1,629,663)	(91,882)
Crisis Services	2,586,037	2,502,045	83,992	2,130,187	2,422,617	292,431	455,851	376,423
Psychiatry Residency	95,241	201,705	(106,464)	285,580	433,097	147,517	(190,339)	41,053
. Systmany . tostasticy	20,120,739	16,698,992	3,421,747	16,948,440	16,505,869	(442,571)	3,172,298	2,979,175
COMMUNITY SERVICES								
Outpatient Services (Marathon)	4,551,192	4,937,271	(386,079)	4,906,148	5,327,395	421,247	(354,957)	35,167
Outpatient Services (Marathorn) Outpatient Services (Lincoln)	970,195	895,477	74,719	694,572	791,917	97,345	275,624	172,064
Outpatient Services (Langlade)	919,707	795,768	123,940	696,532	656,551	(39,982)	223,175	83,958
Community Treatment Adult (Marathon)	5,944,347	4,917,939	1,026,408	5,766,094	5,812,706	(39,962) 46,612	178,253	1,073,020
Community Treatment Adult (Marathon) Community Treatment Adult (Lincoln)	, ,		, ,		, ,	,	,	
	758,121 360.874	747,940	10,180	859,203	821,773 405.224	(37,431)	(101,083)	(27,251)
Community Treatment Adult (Langlade)	, -	285,600	75,274	451,682	/	(46,458)	(90,808)	28,816
Community Treatment Youth (Marathon)	6,773,895	5,494,753	1,279,142	6,515,310	5,936,169	(579,141)	258,585	700,001
Community Treatment Youth (Lincoln)	2,076,304	1,576,378	499,925	2,008,019	1,692,266	(315,753)	68,284	184,172
Community Treatment Youth (Langlade)	1,708,635	1,132,672	575,963	1,571,653	1,279,263	(292,390)	136,982	283,572
Hope House (Sober Living Marathon)	49,227	65,590	(16,362)	87,191	88,950	1,758	(37,964)	(14,604)
Sober Living (Langlade)	54,558	32,313	22,245	95,913	61,248	(34,666)	(41,356)	(12,421)
Adult Protective Services	682,473	696,799	(14,326)	1,104,709	734,083	(370,626)	(422,236)	(384,952)
Jail Meals (Marathon)	24,849,528	21,578,499	3,271,028	24,757,028	23,607,542	(1,149,486)	92,500	2,121,543
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COMMUNITY LIVING								
Day Services (Langlade)	223,179	252,540	(29,361)	215,548	250,340	34,792	7,631	5,431
Supportive Employment Program	96,310	229,258	(132,948)	142,556	264,175	121,619	(46,245)	(11,329)
	319,490	481,798	(162,309)	358,104	514,515	156,411	(38,614)	(5,897)
NURSING HOMES								
Mount View Care Center	24,118,146	20,801,351	3,316,794	20,346,131	18,763,272	(1,582,860)	3,772,014	1,733,934
Pine Crest Nursing Home	8,358,184	12,450,616	(4,092,432)	8,718,294	12,021,176	3,302,882	(360,111)	(789,550)
	32,476,329	33,251,967	(775,638)	29,064,425	30,784,448	1,720,022	3,411,904	944,384
Pharmacy	5,743,778	5,974,896	(231,117)	5,851,823	6,301,465	449,641	(108,045)	218,524
OTHER PROGRAMS								
Aguatic Services	938,329	983,014	(44,685)	848,824	1,115,842	267,018	89,505	222,333
Birth To Three	519,440	-	519,440	519,440	1,110,042	(519,440)	-	-
Demand Transportation	424,349	349.821	74,527	416,130	489,310	73,180	8,219	147,707
Demand Transportation	1,882,118	1,332,835	549,282	1,784,394	1,605,152	(179,242)	97,724	370,040
Total NCHC Service Programs	85,391,981	79,318,988	5,978,740	78,764,214	79,318,991	1,263,562	6,627,767	7,242,303
SELF-FUNDED INSURANCE TRUST FUNDS								
Health Insurance Trust Fund	6,630,958	7,547,385	(916,427)	5,448,393	7,547,385	2,098,992	1,182,565	1,182,565
Dental Insurance Trust Fund	334,993	344,592	(9,598)	309,204	344,592	35,388	25,789	25,789
Total NCHC Self-Funded Insurance Trusts	6,965,951	7,891,977	(926,025)	5,757,597	7,891,977	2,134,380	1,208,354	1,208,354
Total NOTTO Gen-1 unueu maurance musts	0,900,901	1,051,571	(920,023)	3,737,397	7,001,077	2,104,000	1,200,334	1,200,334

North Central Health Care Fund Balance Review For the Period Ending October 31, 2025

	Marathon	Langlade	Lincoln	Total
YTD Appropriation (Tax Levy) Revenue	4,884,182	188,743	882,378	5,955,302
Total Revenue at Period End County Percent of Total Net Position	63,289,666 74.1%	5,874,265 6.9%	16,228,050 19.0%	85,391,981
Total Operating Expenses, Year-to-Date * * Excluding Depreciation Expenses to be allocated at the	57,122,593 e end of the year	5,606,831	16,034,791	78,764,214
Share of Operating Cash Days Cash on Hand	24,163,050 129	2,242,707 122	6,195,627 118	32,601,384 126
Minimum Target - 20% Over/(Under) Target	13,709,422 10,453,628	1,345,639 897,067	3,848,350 2,347,277	18,903,411 13,697,973
Maximum Target - 35% Over/(Under) Target	23,991,489 171,561	2,354,869 (112,162)	6,734,612 (538,985)	33,080,970 (479,586)
Share of Investments Days Invested Cash Days Invested Cash on Hand Target - 150 Days	- 0 28,170,046	- 0 2,765,012	- 0 7,907,568	- 0 38,842,626
Current Percentage of Operating Cash	42.3%	40.0%	38.6%	41.4%
Over/(Under) Minimum Target Share of Investments Amount Needed to Fulfill Fund Balance Policy	10,453,628	897,067 - 897,067	2,347,277 - 2,347,277	13,697,973 - 13,697,973
Over/(Under) Maximum Target Share of Investments	171,561 	(112,162) 	(538,985)	(479,586)
Amount Needed to Fulfill Fund Balance Policy	171,561	(112,162)	(538,985)	(479,586)

North Central Health Care Review of Services in Marathon County For the Period Ending October 31, 2025

		Revenue			Expense		Net Income/	Variance
	Actual	Budget	Variance	Actual	Budget	Variance	(Loss)	From Budget
Direct Services								
Outpatient Services	4,551,192	4,937,271	(386,079)	4,906,148	5,327,395	421,247	(354,957)	35,167
Community Treatment-Adult	5,944,347	4,917,939	1,026,408	5,766,094	5,812,706	46,612	178,253	1,073,020
Community Treatment-Youth	6,773,895	5,494,753	1,279,142	6,515,310	5,936,169	(579,141)	258,585	700,001
Hope House Sober Living	49,227	65,590	(16,362)	87,191	88,950	1,758	(37,964)	(14,604)
Demand Transportation	424,349	349,821	74,527	416,130	489,310	73,180	8,219	147,707
Jail Meals	-	-	-	-	-	-	-	-
Aquatic Services	938,329	983,014	(44,685)	848,824	1,115,842	267,018	89,505	222,333
Mount View Care Center	24,118,146	20,801,351	3,316,794	20,346,131	18,763,272	(1,582,860)	3,772,014	1,733,934
	42,799,484	37,549,739	5,249,746	38,885,828	37,533,642	(1,352,186)	3,913,656	3,897,559
Shared Services								
Adult Behavioral Health Hospital	5,976,193	5,029,978	946,215	4,015,270	3,655,113	(360,157)	1,960,923	586,058
Youth Behavioral Health Hospital	2,451,328	2,035,189	416,139	2,169,945	2,331,393	161,449	281,383	577,588
Residency Program	70,700	149,731	(79,031)	211,994	321,500	109,506	(141,294)	30,475
Supportive Employment Program	71,494	170,185	(98,691)	105,823	196,105	90,281	(34,329)	(8,410)
Crisis Services	2,130,117	2,067,767	62,350	1,581,299	1,798,378	217,080	548,818	279,430
Adult Crisis Stabilization Facility	2,495,465	1,509,149	986,316	1,291,719	1,218,431	(73,289)	1,203,745	913,027
Youth Crisis Stabilization Facility	1,173,594	941,619	231,975	1,037,620	811,664	(225,957)	135,974	6,018
Pharmacy	4,263,771	4,435,336	(171,565)	4,343,976	4,677,758	333,782	(80,205)	162,217
Lakeside Recovery MMT	960,197	984,099	(23,903)	1,063,721	974,762	(88,958)	(103,524)	(112,861)
Adult Protective Services	511,728	522,363	(10,634)	820,057	544,931	(275,126)	(308,329)	(285,761)
Birth To Three	385,595	-	385,595	385,595	-	(385,595)	-	-
Contracted Services (Out of County Placements)		-		1,209,745	1,141,538	(68,207)	(1,209,745)	(68,207)
	20,490,182	17,845,417	2,644,765	18,236,765	17,671,573	(565,192)	2,253,417	2,079,573
Excess Revenue/(Expense)	63,289,666	55,395,155	7,894,511	57,122,593	55,205,215	(1,917,378)	6,167,073	5,977,133

North Central Health Care Review of Services in Lincoln County For the Period Ending October 31, 2025

		Revenue		Expense			Net Income/	Variance
	Actual	Budget	Variance	Actual	Budget	Variance	(Loss)	From Budget
Direct Services			_					
Outpatient Services	970,195	895,477	74,719	694,572	791,917	97,345	275,624	172,064
Community Treatment-Adult	758,121	747,940	10,180	859,203	821,773	(37,431)	(101,083)	(27,251)
Community Treatment-Youth	2,076,304	1,576,378	499,925	2,008,019	1,692,266	(315,753)	68,284	184,172
Pine Crest Nursing Home	8,358,184	12,450,616	(4,092,432)	8,718,294	12,021,176	3,302,882	(360,111)	(789,550)
	12,162,803	15,670,411	(3,507,608)	12,280,089	15,327,132	3,047,043	(117,286)	(460,565)
Shared Services								
Adult Behavioral Health Hospital	1,229,388	1,034,575	194,813	826,690	752,538	(74,151)	402,698	120,661
Youth Behavioral Health Hospital	503,135	417,457	85,677	446,762	480,002	33,240	56,373	118,918
Residency Program	14,556	30,828	(16,271)	43,647	66,192	22,546	(29,090)	6,274
Supportive Employment Program	14,720	35,039	(20,319)	21,788	40,375	18,588	(7,068)	(1,731)
Crisis Services	316,327	303,490	12,837	325,568	370,262	44,694	(9,241)	57,531
Adult Crisis Stabilization Facility	513,782	310,713	203,069	265,947	250,858	(15,089)	247,835	187,980
Youth Crisis Stabilization Facility	241,627	193,867	47,760	213,632	167,110	(46,521)	27,995	1,239
Pharmacy	877,853	913,175	(35,323)	894,366	963,087	68,721	(16,513)	33,398
Lakeside Recovery MMT	170,204	175,125	(4,921)	219,006	200,690	(18,315)	(48,802)	(23,237)
Adult Protective Services	104,267	106,456	(2,189)	168,839	112,194	(56,645)	(64,572)	(58,834)
Birth To Three	79,389	-	79,389	79,389	-	(79,389)	-	-
Contracted Services (Out of County Placements)		-		249,070	235,027	(14,043)	(249,070)	(14,043)
	4,065,247	3,520,725	544,521	3,754,702	3,638,337	(116,365)	310,545	428,156
Excess Revenue/(Expense)	16,228,050	19,191,136	(2,963,087)	16,034,791	18,965,468	2,930,678	193,259	(32,409)

North Central Health Care Review of Services in Langlade County For the Period Ending October 31, 2025

		Revenue				Expense		Net Income/	Variance
	Actual	Budget	Variance		Actual	Budget	Variance	(Loss)	From Budget
Direct Services									
Outpatient Services	919,707	795,768	123,940		696,532	656,551	(39,982)	223,175	83,958
Community Treatment-Adult	360,874	285,600	75,274		451,682	405,224	(46,458)	(90,808)	28,816
Community Treatment-Youth	1,708,635	1,132,672	575,963		1,571,653	1,279,263	(292,390)	136,982	283,572
Sober Living	54,558	32,313	22,245		95,913	61,248	(34,666)	(41,356)	(12,421)
Adult Day Services	223,179	252,540	(29,361)		215,548	250,340	34,792	7,631	5,431
	3,266,953	2,498,893	768,060	-	3,031,329	2,652,625	(378,704)	235,624	389,356
Shared Services									
Adult Behavioral Health Hospital	744,207	610,577	133,630		567,060	516,196	(50,863)	177,148	82,766
Youth Behavioral Health Hospital	345,426	286,656	58,770		306,452	329,253	22,801	38,973	81,570
Residency Program	9,985	21,146	(11,161)		29,939	45,404	15,465	(19,954)	4,304
Supportive Employment Program	10,097	24,034	(13,938)		14,945	27,695	12,750	(4,848)	(1,188)
Crisis Services	139,593	130,788	8,805		223,320	253,977	30,657	(83,727)	39,463
Adult Crisis Stabilization Facility	352,424	213,131	139,293		182,424	172,074	(10,350)	170,000	128,943
Youth Crisis Stabilization Facility	165,742	132,981	32,761		146,539	114,628	(31,911)	19,203	850
Pharmacy	602,155	626,384	(24,229)		613,482	660,620	47,139	(11,327)	22,909
Lakeside Recovery MMT	116,750	120,125	(3,376)		150,225	137,662	(12,563)	(33,475)	(15,939)
Adult Protective Services	66,478	67,980	(1,502)		115,813	76,958	(38,855)	(49,335)	(40,357)
Birth To Three	54,456	-	54,456		54,456	-	(54,456)	-	-
Contracted Services (Out of County Placements)		-			170,847	161,215	(9,633)	(170,847)	(9,633)
	2,607,312	2,233,803	373,509		2,575,502	2,495,682	(79,820)	31,810	293,689
Excess Revenue/(Expense)	5,874,265	4,732,696	1,141,569		5,606,831	5,148,307	(458,523)	267,434	683,045

North Central Health Care Summary of Revenue Write-Offs For the Period Ending October 31, 2025

		MTD		YTD
B				
Behavioral Health Hospitals	ф	05 400	ф	474 507
Charity Care Administrative Write-Off	\$	25,499	\$	474,597
Bad Debt	\$ \$	47,701	\$ \$	397,521
Bad Dept	Ф	-	Ф	422,894
Outpatient & Community Treatment				
Charity Care	\$	13,386	\$	189,287
Administrative Write-Off	\$	4,359	\$	56,929
Bad Debt	\$	-	\$	94,780
Nursing Home Services				
Charity Care	\$	-	\$	-
Administrative Write-Off	\$ \$	-	\$	115,783
Bad Debt	\$	-	\$	24,225
Aquatic Services				
Charity Care	¢		Ф	
Administrative Write-Off	\$ \$	-	\$ \$	-
Bad Debt	\$ \$	<u>-</u>	\$ \$	_
Dau Debi	Ψ	-	Ψ	_
Pharmacy				
Charity Care	\$	_	\$	_
Administrative Write-Off	\$	_	\$	164
Bad Debt	\$	_	\$	-
	·		•	
Other Services				
Charity Care	\$	0	\$	7,735
Administrative Write-Off	\$	75	\$	1,447
Bad Debt	\$	-	\$	372
Grand Total				
Charity Care	\$	38,885	\$	671,619
Administrative Write-Off	\$ \$	52,135	\$	571,844
Bad Debt	\$	-	\$	542,271

		FINA	NCIAL D	ASHBOAF	RD					F	ISCAL YE	AR: 20	25			
DEPARTMENT	Metric	TARGET	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ОСТ	NOV	DEC	2025 YTD	2024
				_	1	l	BEHAVIORAL F	IEALTH SERVI	CES		l .	1	_			
Adult Hospital	Average Daily Census	9.00	11.19	10.21	10.39	10.30	7.87	9.43	11.51	9.55	11.37	7.71			9.95	8.8
Adult Crisis Stabilization Facility	Average Daily Census	9.00	14.35	13.96	13.48	12.53	9.68	9.17	12.87	14.32	13.07	10.90			12.43	9.0
Lakeside Recovery MMT	Average Daily Census	13.00	11.32	12.00	10.26	8.53	9.98	12.43	10.58	13.48	13.67	11.74			11.40	9.0
Youth Hospital	Average Daily Census	4.50	4.35	4.85	4.23	6.47	4.55	4.33	3.90	5.13	4.00	4.84			4.67	4.4
Youth Crisis Stabilization Facility	Billable Units	5,840	3,784	2,946	4,251	5,606	5,210	5,769	4,124	6,140	4037	5634			4,750	5514
Youth Out of County Placements (WMHI/MMHI)	Days	150 Annual 37 Monthly	4	6	1	10	15	27	4	28	75	38			208	129
Adult Out of County Placements (WMHI/MMHI)	Days	547 Annual 45 Monthly	95	49	67	70	75	98	111	37	63	69			734	817
Out of County Placements (Trempealeau)	Days	538 Annual 44 Monthly	93	84	93	97	113	75	62	124	62	62			865	837
Out of County Placements (Group Home)	Days	1919 Annual 160 Monthly	168	140	155	150	124	151	124	217	155	155			1,539	2100
							COMMUN	TY SERVICES								
Hope House - Marathon	Average Daily Census	7.00	5.20	4.90	4.00	6.10	5.50	5.00	4.2	5.0	3.7	2.87			4.65	6.8
Hope House - Langlade	Average Daily Census	3.00	2.70	1.90	1.20	2.50	2.48	4.20	7.0	4.8	2.3	2.1			3.12	5.1
							NURSIN	IG HOMES								
Mount View Care Center	Average Daily Census	128.00	126.35	126.71	126.45	124.17	124.00	124.97	119.61	119.77	123.37	124.42			123.98	123
Pine Crest	Average Daily Census	82.00	78.00	75.80	77.2	76.2	74.2	77.2	76.2	0.0	0.0	0.0			53.48	81

2026 NCCSP Meeting Schedule

Executive Committee

NCCSP Board

JANUARY

Wednesday, January 28 1:00 p.m.

Thursday, January 29 3:00 p.m.

FEBRUARY

Wednesday, February 25 1:00 p.m.

MARCH

Wednesday, March 25

Thursday, March 26 3:00 p.m.

APRIL

Wednesday, April 29 1:00 p.m.

1:00 p.m.

MAY

Wednesday, May 27 1:00 p.m.

Thursday, May 28 3:00 p.m.

IUNE

Wednesday, June 24 1:00 p.m.

JULY

Wednesday, July 29 1:00 p.m.

Thursday, July 30 3:00 p.m.

AUGUST

Wednesday, August 26 1:00 p.m.

SEPTEMBER

Wednesday, September 30 1:00 p.m.

Thursday, September 24 3:00 p.m.

OCTOBER

Wednesday, October 28 1:00 p.m.

NOVEMBER

Wednesday, November 18 1:00 p.m.

Thursday, November 19 3:00 p.m.

DECEMBER

Wednesday, December 16 1:00 p.m.

Last Updated: 11/3/2025

To: Executive Committee

From: Kari Oliva, Director of Revenue Cycle

Date: December 2, 2025

RE: Approval of 2026 Fee Schedule

As required by Wisconsin Statues §§ 46.03(18) and 46.10 and DHS 1.03, §§ 46.03(18) and 46.10 and DHS 1.03, this memo seeks your approval of the proposed 2026 Fee Schedule for services provided by North Central Health Care (NCHC).

Overview

The fee schedule has been developed in compliance with state law and the Department of Health Services (DHS) Chapter 1, which outlines uniform guidelines for determining fees for services, client liability, billing, and collections. These fees represent the gross amounts for services provided by NCHC.

It is important to note:

- 1. Reimbursement Variability: The gross fees in the schedule may not always be fully reimbursed. Reimbursement depends on factors such as:
 - a. Insurer agreements and payment limits.
 - b. Clients' assessed ability to pay, as determined under DHS 1.04.
- 2. No Denial of Service: In alignment with our mission and DHS 1.06, no individual will be denied services based on their ability to pay.

Request

In compliance with DHS 1.03(2), I respectfully request the Executive Committee's approval of the 2026 Fee Schedule to ensure alignment with statutory requirements and to support NCHC's commitment to providing essential health services to all individuals in our community.

Your approval will enable NCHC to implement these fees effectively in the upcoming year while ensuring we meet our financial and operational goals.

CHARGEMASTER Effective 01/01/2026

DISCIPLINES	SERVICES PROVIDED	2025	2026	% CHANGE
MD'S - PSYCHIATRIST	PSYCHIATRIC/MEDICAL EVALUATION – New Pt	\$ 540.00	\$ 554.00	2.6%
	PSYCHOTHERAPY 30 MINUTES	\$206.00	\$211.00	2.4%
	PSYCHOTHERAPY 45 MINUTES	\$248.00	\$ 254.00	2.4%
	PSYCHOTHERAPY 60+ MINUTES	\$289.00	\$ 296.00	2.4%
	EVALUATION AND MANAGEMENT- Straight Forward - Est Pt	\$162.00	\$ 166.00	2.5%
	EVALUATION AND MANAGEMENT- Low Intensity- Est Pt	\$227.00	\$ 233.00	2.6%
	EVALUATION AND MANAGEMENT - Moderate Intensity - Est Pt	\$ 399.00	\$ 409.00	2.5%
	EVALUATION AND MANAGEMENT - High Intensity - Est Pt	\$548.00	\$ 562.00	2.6%
	EVALUATION AND MANAGEMENT - Straight forward - New Pt	\$ 181.00	\$ 186.00	2.8%
	EVALUATION AND MANAGEMENT- Low Intensity- New Pt	\$ 275.00	\$ 282.00	2.5%
	EVALUATION AND MANAGEMENT- Moderate Intensity- New Pt	\$ 471.00	\$ 483.00	2.5%
	EVALUATION AND MANAGEMENT- High Intensity- New Pt	\$ 617.00	\$ 632.00	2.4%
	PROLONGED SERVICE 15 MINUTES (ADD ON CODE)	\$63.00	\$ 64.00	1.6%
	TELEPHONE ONLY - AUDIO ONLY E & M 5-10 MIN	\$ 55.00	\$ 56.50	2.7%
	TELEPHONE ONLY - AUDIO ONLY E & M 11-20 MIN	\$105.00	\$ 107.50	2.4%
	TELEPHONE ONLY - AUDIO ONLY E & M 21-30 MIN	\$ 157.00	\$ 161.00	2.5%
	AUDIO ONLY E&M – Straight Forward – New Pt	\$162.00	\$ 166.00	2.5%
	AUDIO ONLY E&M – Low Intensity – New Pt	\$227.00	\$ 233.00	2.6%
	AUDIO ONLY E&M – Moderate Intensity – New Pt	\$399.00	\$ 409.00	2.5%
	AUDIO ONLY E&M – High Intensity – New Pt	\$548.00	\$ 562.00	2.6%
	AUDIO ONLY E&M – Straight Forward – Est Pt	\$181.00	\$ 186.00	2.8%
	AUDIO ONLY E&M – Low Intensity – Est Pt	\$275.00	\$ 282.00	2.5%
	AUDIO ONLY E&M – Moderate Intensity – Est Pt	\$ 471.00	\$ 483.00	2.5%
	AUDIO ONLY E&M – High Intensity – Est Pt	\$617.00	\$632.00	2.4%
	AUDIO-VISUAL E&M – Straight Forward – New Pt	\$181.00	\$ 186.00	2.8%
	AUDIO-VISUAL E&M – Low Intensity – New Pt	\$ 275.00	\$ 282.00	2.5%
	AUDIO-VISUAL E&M – Moderate Intensity – New Pt	\$ 471.00	\$ 483.00	2.5%
	AUDIO-VISUAL E&M – High Intensity – New Pt	\$617.00	\$ 633.00	2.6%
	AUDIO-VISUAL E&M – Straight Forward – Est Pt	\$162.00	\$ 166.00	2.5%
	AUDIO-VISUAL E&M – Low Intensity – Est Pt	\$227.00	\$ 233.00	2.6%
	AUDIO-VISUAL E&M – Moderate Intensity – Est Pt	\$399.00	\$ 409.00	2.5%
	AUDIO-VISUAL E&M – High Intensity – Est Pt	\$548.00	\$ 562.00	2.6%
	CCS INDIVIDUAL SERVICE	\$540.00	\$ 554.00	2.6%
	INITIAL HOSPITAL CARE – Low Intensity	\$319.00	\$ 327.00	2.5%
	INITIAL HOSPITAL CARE – Moderate Intensity	\$ 422.00	\$ 433.00	2.6%
	INITIAL HOSPITAL CARE – High Intensity	\$ 609.00	\$ 624.00	2.5%
	SUBSEQUENT HOSPITAL CARE – Low Intensity	\$ 122.00	\$ 125.00	2.5%

	SUBSEQUENT HOSPITAL CARE – Moderate Intensity	\$ 224.00	\$ 230.00	2.7%
	SUBSEQUENT HOSPITAL CARE – High Intensity	\$ 322.00	\$ 330.00	2.5%
	HOSPITAL DISCHARGE <30 MINUTES	\$ 265.00	\$ 272.00	2.6%
	HOSPITAL DISCHARGE 30+ MINUTES	\$ 394.00	\$ 404.00	2.5%
	CRISIS ASSESSMENT UP TO 60 MIN - MD	\$529.00	\$ 542.00	2.5%
	CRISIS ASSESSMENT ADD'L 30 MIN – MD	\$ 265.00	\$ 272.00	2.6%
	CRISIS LINKAGE/FOLLOW-UP - MD	\$ 217.00	\$ 223.00	2.8%
	CSP PSYCHIATRIC EVALUATION/MED EVAL - MD	\$ 540.00	\$ 554.00	2.6%
	CSP MEDICATION MANAGEMENT – Straight Forward	\$ 162.00	\$ 166.00	2.5%
	CSP MEDICATION MANAGEMENT - Low Intensity	\$ 227.00	\$ 233.00	2.6%
	CSP MEDICATION MANAGEMENT – Moderate Intensity	\$ 399.00	\$ 409.00	2.5%
	CSP MEDICATION MANAGEMENT – High Intensity	\$ 548.00	\$562.00	2.6%
RESIDENTS	PSYCHIATRIC/MEDICAL EVALUATION - New Pt	\$ 540.00	\$ 554.00	2.6%
	30 MIN INDIVIDUAL COUNSELING - RES	\$ 206.00	\$ 211.00	2.4%
	45 MIN INDIVIDUAL COUNSELING - RES	\$ 248.00	\$ 254.00	2.4%
	60 MIN INDIVIDUAL COUNSELING - RES	\$ 289.00	\$ 296.00	2.4%
	EVALUATION AND MANAGEMENT- Straight Forward - Est Pt	\$ 162.00	\$ 166.00	2.5%
	EVALUATION AND MANAGEMENT- Low Intensity- Est Pt	\$ 227.00	\$ 233.00	2.6%
	EVALUATION AND MANAGEMENT - Moderate Intensity - Est Pt	\$ 399.00	\$ 409.00	2.5%
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	EVALUATION AND MANAGEMENT- Moderate Intensity- New Pt	\$ 471.00	\$ 483.00	2.5%
	EVALUATION AND MANAGEMENT- High Intensity- NewPt	\$617.00	\$632.00	2.4%
	INITIAL HOSPITAL CARE – Low Intensity	\$319.00	\$ 327.00	2.5%
	INITIAL HOSPITAL CARE – Moderate Intensity	\$ 422.00	\$ 433.00	2.6%
	INITIAL HOSPITAL CARE – High Intensity	\$609.00	\$625.00	2.6%
	SUBSEQUENT HOSPITAL CARE – Low Intensity	\$122.00	\$ 125.00	2.5%
	SUBSEQUENT HOSPITAL CARE – Moderate Intensity	\$ 224.00	\$ 230.00	2.7%
	SUBSEQUENT HOSPITAL CARE – High Intensity	\$322.00	\$ 330.00	2.5%
	HOSPITAL DISCHARGE <30 MINUTES	\$ 265.00	\$ 272.00	2.6%
	HOSPITAL DISCHARGE 30+ MINUTES	\$ 394.00	\$ 404.00	2.5%
	CRISIS ASSESSMENT UP TO 60 MIN - RES	\$ 540.00	\$ 554.00	2.6%
	CRISIS ASSESSMENT ADD'L 30 MIN – RES	\$ 270 .00	\$ 277.00	2.6%
	CRISIS LINKAGE/FOLLOW-UP - RES	\$ 221.00	\$ 227.00	2.7%
	CSP PSYCHIATRIC EVALUATION/MED EVAL - RES	\$540.00	\$ 554.00	2.6%
	CSP MEDICATION MANAGEMENT – Straight Forward	\$162.00	\$ 166.00	2.5%
	CSP MEDICATION MANAGEMENT - Low Intensity	\$227.00	\$ 233.00	2.6%
	CSP MEDICATION MANAGEMENT - Moderate Intensity	\$399.00	\$ 409.00	2.5%
	CSP MEDICATION MANAGEMENT – High Intensity	\$548.00	\$ 562.00	2.6%
PA	INITIAL HOSPITAL CARE – Low Intensity	\$ 288.00	\$ 296.00	2.8%
	INITIAL HOSPITAL CARE – Moderate Intensity	\$ 391.00	\$ 401.00	2.6%

	INITIAL HOSPITAL CARE – High Intensity	\$ 277.00	\$ 284.00	2.5%
	SUBSEQUENT HOSPITAL CARE – Low Intensity	\$116.00	\$ 119.00	2.6%
	SUBSEQUENT HOSPITAL CARE – Moderate Intensity	\$ 213.00	\$ 219.00	2.8%
	SUBSEQUENT HOSPITAL CARE – High Intensity	\$ 305.00	\$ 313.00	2.6%
	HOSPITAL DISCHARGE <30 MINUTES	\$ 252.00	\$ 259.00	2.8%
	HOSPITAL DISCHARGE 30+ MINUTES	\$ 372.00	\$ 382.00	2.7%
APNP	PSYCHIATRIC/MEDICAL EVALUATION – New Pt	\$511.00	\$ 524.00	2.5%
	EVALUATION AND MANAGEMENT- Straight Forward - Est Pt	\$114.00	\$ 117.00	2.6%
	EVALUATION AND MANAGEMENT- Low Intensity- Est Pt	\$ 216.00	\$ 222.00	2.8%
	EVALUATION AND MANAGEMENT - Moderate Intensity - Est Pt	\$ 377.00	\$ 387.00	2.7%
	EVALUATION AND MANAGEMENT - High Intensity - Est Pt	\$519.00	\$ 532.00	2.5%
	EVALUATION AND MANAGEMENT - Straight forward - New Pt	\$ 162.00	\$ 166.00	2.5%
	EVALUATION AND MANAGEMENT- Low Intensity- New Pt	\$ 248.00	\$ 255.00	2.8%
	EVALUATION AND MANAGEMENT- Moderate Intensity- New Pt	\$ 424.00	\$ 435.00	2.6%
	EVALUATION AND MANAGEMENT- High Intensity NewPt	\$ 556.00	\$ 570.00	2.5%
	CCS INDIVIDUAL SERVICE	\$511.00	\$ 524.00	2.5%
	CRISIS ASSESSMENT/THERAPY UP TO 60 MIN – APNP	\$511.00	\$ 524.00	2.5%
	CRISIS ASSESSMENT ADD'L 30 MIN – APNP	\$ 256.00	\$ 263.00	2.7%
	CRISIS LINKAGE/FOLLOW-UP – APNP	\$ 230.00	\$ 203.00	2.7%
	CRISIS STABILIZATION - APNP	\$511.00	\$ 524.00	2.5%
				2.6%
	CSP MEDICATION MANAGEMENT – Straight Forward	\$ 114.00	\$ 117.00	2.8%
	CSP MEDICATION MANAGEMENT – Low Intensity	\$ 216.00	\$ 222.00	
	CSP MEDICATION MANAGEMENT – Moderate Intensity	\$ 377.00	\$387.00	2.7%
	CSP MEDICATION MANAGEMENT – High Intensity	\$519.00	\$ 532.00	2.5%
	INITIAL LICENTAL CARE – Low Intensity	\$ 288.00	\$ 296.00	2.8%
	INITIAL HOSPITAL CARE – Moderate Intensity	\$ 391.00	\$ 401.00	2.6%
	INITIAL HOSPITAL CARE – High Intensity	\$ 577.00	\$ 592.00	2.6%
	SUBSEQUENT HOSPITAL CARE – Low Intensity	\$ 116.00	\$ 119.00	2.6%
	SUBSEQUENT HOSPITAL CARE – Moderate Intensity	\$ 213.00	\$ 219.00	2.8%
	SUBSEQUENT HOSPITAL CARE – High Intensity	\$ 305.00	\$ 313.00	2.6%
	HOSPITAL DISCHARGE <30 MINUTES	\$ 252.00	\$ 259.00	2.8%
	HOSPITAL DISCHARGE 30+ MINUTES	\$ 372.00	\$ 382.00	2.7%
	TELEPHONE ONLY - AUDIO ONLY E & M 5-10 MIN	\$ 55.00	\$ 56.50	2.7%
	TELEPHONE ONLY - AUDIO ONLY E & M 11-20 MIN	\$ 105.00	\$ 107.50	2.4%
	TELEPHONE ONLY - AUDIO ONLY E & M 21-30 MIN	\$ 157.00	\$ 161.00	2.5%
	PROLONGED SERVICE 15 MINUTES (ADD ON CODE)	\$ 63.00	\$ 64.00	2.4%
	AUDIO ONLY E&M – Straight Forward – New Pt	\$ 114.00	\$ 117.00	2.6%
	AUDIO ONLY E&M – Low Intensity – New Pt	\$ 216.00	\$ 222.00	2.8%
	AUDIO ONLY E&M – Moderate Intensity – New Pt	\$ 377.00	\$ 387.00	2.7%
	AUDIO ONLY E&M – High Intensity – New Pt	\$519.00	\$ 532.00	2.5%
	AUDIO ONLY E&M – Straight Forward – Est Pt	\$ 162.00	\$ 166.00	2.5%
	AUDIO ONLY E&M – Low Intensity – Est Pt	\$ 248.00	\$ 255.00	2.8%

	AUDIO ONLY E&M – Moderate Intensity – Est Pt	\$ 424.00	\$ 435.00	2.6%
	AUDIO ONLY E&M – High Intensity – Est Pt	\$ 556.00	\$ 570.00	2.5%
	AUDIO-VISUAL E&M – Straight Forward – New Pt	\$162.00	\$ 166.00	2.5%
	AUDIO-VISUAL E&M – Low Intensity – New Pt	\$ 248.00	\$ 255.00	2.8%
	AUDIO-VISUAL E&M – Moderate Intensity – New Pt	\$ 424.00	\$ 435.00	2.6%
	AUDIO-VISUAL E&M – High Intensity – New Pt	\$ 556.00	\$ 570.00	2.5%
	AUDIO-VISUAL E&M – Straight Forward – Est Pt	\$114.00	\$ 117.00	2.6%
	AUDIO-VISUAL E&M – Low Intensity – Est Pt	\$216.00	\$ 222.00	2.8%
	AUDIO-VISUAL E&M – Moderate Intensity – Est Pt	\$ 377.00	\$ 387.00	2.7%
	AUDIO-VISUAL E&M – High Intensity – Est Pt	\$519.00	\$ 532.00	2.5%
HOSPITAL	INPATIENT DAY/SEMI-PRIVATE MH	\$ 2520.00	\$ 2450.00	(-2.8%)
	INPATIENT DAY/SEMI-PRIVATE SU	\$ 2520.00	\$ 2450.00	(-2.8%)
	IP DISCHARGE CONSULT (Cenpatico Only 11/1/12)	\$ 53.00	\$ 54.50	2.8%
PHARMACY	PHARMACY - INPATIENT	PER CASE	PER CASE	-
MMT	MEDICALLY MONITORED TREATMENT	\$ 578.00	\$ 593.00	2.6%
OP/PHDs	INITIAL EVALUATION – PHD	\$469.00	\$ 481.00	2.6%
	30 MIN INDIVIDUAL COUNSELING - PHD	\$112.00	\$ 115.00	2.7%
	45 MIN INDIVIDUAL COUNSELING – PHD	\$316.00	\$ 324.00	2.5%
	60 MIN INDIVIDUAL COUNSELING - PHD	\$ 461.00	\$ 473.00	2.6%
	GROUP COUNS/PSYCHOTHERAPY – PHD	\$75.00	\$ 77.00	2.7%
	FAMILY THERAPY WITHOUT CLIENT PRESENT – PHD	\$ 360.00	\$ 369.00	2.5%
	FAMILY THERAPY WITH CLIENT PRESENT – PHD	\$360.00	\$ 369.00	2.5%
	PSYCHOLOGICAL TESTING EVAL (FIRST 60 MIN) - PHD	\$731.00	\$ 749.00	2.5%
	PSYCHOLOGICAL TESTING EVAL (ADD'L 60 MIN) – PHD	\$518.00	\$ 531.00	2.5%
	PSYCHOLOGICAL TESTING ADM & SCORING (FIRST 30 MIN) – PHD	\$ 259.00	\$ 266.00	2.7%
	PSYCHOLOGICAL TESTING ADM & SCORING (ADD'L 30 MIN) – PHD	\$ 259.00	\$ 266.00	2.7%
	PSYCHOLOGICAL TESTING ADM & SCORING BY TECH - 2+ TESTS (30 MIN) – PHD	\$ 259.00	\$ 266.00	2.7%
	PSYCHOLOGICAL TESTING ADM & SCORING BY TECH - 2+ TESTS (ADD'L 30 MIN) – PHD	\$ 259.00	\$ 266.00	2.7%
	NEURO-BEHAVIORAL STATUS EXAM (FIRST 60 MIN) – PHD	\$601.00	\$616.00	2.5%
	NEURO-BEHAVIORAL STATUS EXAM (ADD'L 60 MIN) – PHD	\$601.00	\$ 616.00	2.5%
	NEUROPSYCH TESTING EVAL (FIRST 60 MIN) – PHD	\$731.00	\$ 749.00	2.5%
	NEUROPSYCH TESTING EVAL (ADD'L 60 MIN) – PHD	\$ 731.00	\$ 749.00	2.5%
	CCS INDIVIDUAL SERVICE - PHD	\$ 469.00	\$ 481.00	2.6%
	CCS GROUP SERVICE – PHD	\$75.00	\$ 77.00	2.7%
	CRISIS ASSESSMENT/THERAPY UP TO 60 MIN – PHD	\$ 469.00	\$ 481.00	2.6%
	CRISIS ASSESSMENTS ADD'L 30 MIN - PHD	\$ 235.00	\$ 241.00	2.6%
OP/MASTERS	INITIAL ASSESSMENT - MASTERS	\$221.00	\$ 227.00	2.7%
	30 MIN INDIVIDUAL COUNSELING - MASTERS	\$96.00	\$ 98.00	2.1%
	45 MIN INDIVIDUAL COUNSELING - MASTERS	\$301.00	\$ 309.00	2.7%
	60 MIN INDIVIDUAL COUNSELING - MASTERS	\$ 446.00	\$ 457.00	2.5%
	GROUP COUNSELING - MASTERS	\$65.00	\$ 66.00	1.5%

	FAMILY COUNSELING WITHOUT CLIENT PRESENT - MASTERS	\$ 360.00	\$ 369.00	2.5%
	FAMILY COUNSELING WITH CLIENT PRESENT - MASTERS	\$ 360.00	\$ 369.00	2.5%
	CCS INDIVIDUAL SERVICE – MASTERS	\$ 446.00	\$ 457.00	2.5%
	CCS GROUP SERVICE – MASTERS	\$ 65.00	\$ 66.00	1.5%
	CRISIS ASSESSMENT – MASTERS	\$ 221.00	\$ 227.00	2.7%
	CRISIS ASSESSMENT – PHONE – MASTERS	\$85.00	\$ 87.00	2.4%
	CRISIS LINKAGE/FOLLOW-UP - MASTERS	\$ 221.00	\$ 227.00	2.7%
	CRISIS STABILIZATION – MASTERS	\$ 446.00	\$ 457.00	2.5%
	CRISIS SERVICES – JAIL CONTRACT (NON-BILLABLE) - MASTERS	\$ 446.00	\$ 457.00	2.5%
	CSP ASSESSMENT – MASTERS	\$ 221.00	\$ 227.00	2.7%
	CSP TRANSITION TO COMM LIVING – MASTERS	\$ 446.00	\$ 457.00	2.5%
	CSP 30 MIN INDIVIDUAL COUNSELING - MASTERS	\$ 96.00	\$ 98.00	2.1%
	CSP 45 MIN INDIVIDUAL COUNSELING - MASTERS	\$ 301.00	\$ 309.00	2.7%
	CSP 60 MIN INDIVIDUAL COUNSELING - MASTERS	\$ 446.00	\$ 457.00	2.5%
	CSP GROUP SERVICE – MASTERS	\$65.00	\$ 66.00	1.5%
	CSP TREATMENT SERVICE - MASTERS	\$ 446.00	\$ 457.00	2.5%
OP/LPC – IT	INITIAL ASSESSMENT - LPC-IT	\$ 221.00	\$ 227.00	2.7%
	30 MIN INDIVIDUAL COUNSELING – LPC-IT	\$ 96.00	\$ 98.00	2.1%
	45 MIN INDIVIDUAL COUNSELING – LPC-IT	\$301.00	\$ 309.00	2.7%
	60 MIN INDIVIDUAL COUNSELING – LPC-IT	\$ 446.00	\$ 457.00	2.5%
	GROUP COUNSELING - LPC-IT	\$65.00	\$ 66.00	1.5%
	FAMILY COUNSELING WITHOUT CLIENT PRESENT - LPC-IT	\$ 360.00	\$ 369.00	2.5%
	FAMILY COUNSELING WITH CLIENT PRESENT - LPC-IT	\$ 360.00	\$ 369.00	2.5%
	CCS INDIVIDUAL SERVICE - LPC-IT	\$ 446.00	\$ 457.00	2.5%
	CCS GROUP SERVICE – LPC-IT	\$65.00	\$ 66.00	1.5%
OP/SAC - AODA ONLY	INITIAL ASSESSMENT – SAC	\$ 221.00	\$227.00	2.7%
	30 MIN INDIVIDUAL COUNSELING – SAC	\$ 96.00	\$ 98.00	2.1%
	45 MIN INDIVIDUAL COUNSELING – SAC	\$ 301.00	\$309.00	2.7%
	60 MIN INDIVIDUAL COUNSELING – SAC	\$ 446.00	\$ 457.00	2.25%
	GROUP COUNSELING – SAC	\$ 58.00	\$ 59.00	1.7%
	OWI ASSESSMENT – MARATHON COUNTY	\$ 350.00	\$ 350.00	0%
	OWI ASSESSMENT - LINCOLN COUNTY	\$ 275.00	\$ 275.00	0%
	OWI ASSESSMENT – LANGLADE COUNTY	\$ 275.00	\$ 275.00	0%
	OWI ASSESSMENT - CIRCUIT COURT	\$ 350.00	\$ 350.00	0%
	OWI ASSESSMENT – NO SHOW FEE	\$100.00	\$100.00	0%
	OWI AMENDMENT	\$ 75.00	\$ 75.00	0%
	CCS INDIVIDUAL SERVICE - SAC	\$ 221.00	\$ 227.00	2.7%
	CCS GROUP SERVICE – SAC	\$58.00	\$ 59.00	1.7%
OP/SAC - IT	CCS INDIVIDUAL SERVICE - SAC-IT	\$ 221.00	\$ 227.00	2.7%
	CCS GROUP SERVICE - SAC-IT	\$58.00	\$ 59.00	1.7%
OP/BACHELORS	CRISIS ASSESSMENT – BACHELORS	\$ 221.00	\$ 227.00	2.7%

	CRISIS ASSESSMENT - PHONE – BACHELORS	\$85.00	\$ 87.00	2.4%
	CRISIS LINKAGE/FOLLOW-UP – BACHELORS	\$221.00	\$ 227.00	2.7%
	CRISIS STABILIZATION – BACHELORS	\$ 221.00	\$ 227.00	2.7%
	CRISIS SERVICES – JAIL CONTRACT (NON-BILLABLE) - BACHELORS	\$ 221.00	\$ 227.00	2.7%
	CRISIS SERVICES – ASPIRUS CONTRACT – BACHELORS	\$ 221.00	\$ 227.00	2.7%
	CCS INDIVIDUAL SERVICE – BACHELORS	\$ 221.00	\$ 227.00	2.7%
	CCS GROUP SERVICE - BACHELORS	\$ 45.00	\$ 46.00	2.2%
	CSP TRANSITION TO COMM LIVING – BACHELORS	\$221.00	\$ 227.00	2.7%
	CSP TREATMENT SERVICE – BACHELORS	\$221.00	\$ 227.00	2.7%
	CSP GROUP THERAPY - BACHELORS	\$45.00	\$ 46.00	2.2%
OP/MHT	CCS INDIVIDUAL SERVICE - MHT	\$ 158.00	\$ 162.00	2.5%
	CCS GROUP SERVICE - MHT	\$ 35.00	\$ 35.00	0%
	CRISIS ASSESSMENT – MHT	\$ 221.00	\$ 227.00	2.7%
	CRISIS ASSESSMENT – PHONE – MHT	\$85.00	\$ 87.00	2.4%
	CRISIS LINKAGE/FOLLOW-UP – MHT	\$221.00	\$ 227.00	2.7%
	CRISIS STABILIZATION – MHT	\$ 158.00	\$ 162.00	2.5%
	CRISIS SERVICES – JAIL CONTRACT (NON-BILLABLE) – MHT	\$ 158.00	\$ 162.00	2.5%
	CRISIS SERVICES – ASPIRUS CONTRACT – MHT	\$ 158.00	\$ 162.00	2.5%
	CSP TREATMENT SERVICE – MHT	\$ 158.00	\$ 162.00	2.5%
OP/COTA	CCS INDIVIDUAL SERTVICE - COTA	\$ 158.00	\$ 162.00	2.5%
	CCS GROUP SERVICE – COTA	\$ 35.00	\$ 35.00	0%
OP/RN	CCS INDIVIDUAL SERVICE - RN	\$ 221.00	\$ 227.00	2.7%
	CCS GROUP SERVICE – RN	\$ 45.00	\$ 46.00	2.2%
	CRISIS ASSESSMENT – RN	\$ 221.00	\$ 227.00	2.7%
	CRISIS ASSESSMENT - PHONE - RN	\$85.00	\$ 87.00	2.4%
	CRISIS LINKAGE/FOLLOW-UP – RN	\$221.00	\$ 227.00	2.7%
	CRISIS STABILIZATION – RN	\$221.00	\$ 227.00	2.7%
	CRISIS SERVICES – JAIL CONTRACT (NON-BILLABLE) – RN	\$221.00	\$ 227.00	2.7%
	INJECTION ADMINISTRATION - RN	\$89.00	\$ 91.00	2.2%
	INJECTION ADMINISTARTION - NO MD ON SITE - RN	\$123.00	\$126.00	2.4%
	MEDICATION MANAGEMENT - RN	\$123.00	\$ 126.00	2.4%
	ESKETAMINE (CHARGE GIVEN BY PHARMACY) - RN	Given by Pharmacy	Given by Pharmacy	-
	INVEGA SUSTENA (CHARGE GIVEN BY PHARMACY) - RN	Given by Pharmacy	Given by Pharmacy	-
	PROLONGED CLINICAL STAFF SERVICES (60 MIN) – RN	\$ 16.00	\$ 16.00	0%
	PROLONGED CLINICAL STAFF SERVICE (ADD'L 30 MIN) – RN	\$8.00	\$8.00	0%
	CSP MED MANAGEMENT (CLOZAPINE) - RN	\$ 221.00	\$ 227.00	2.7%
	CSP TREATMENT SERVICE - RN	\$221.00	\$ 227.00	2.7%
OP/PEER SPECIALIST	CCS INDIVIDUAL SERVICE – PEER SPECIALIST	\$158.00	\$ 162.00	2.5%
	CCS GROUP SERVICE - PEER SPECIALIST	\$ 35.00	\$ 35.00	0%
AODA DAY				
TREATMENT	DAY HOSPITAL	\$ 221.00	\$ 227.00	2.7%

	ASSESSMENT – AODA DAY TREATMENT – LPC-IT	\$308.00	\$316.00	2.6%
	ASSESSMENT - AODA DAY TREATMENT - SAC	\$308.00	\$316.00	2.6%
AQUATICS PT/PTA	LOW COMPLEX ASSESSMENT	\$412.00	\$ 423.00	2.7%
	MODERATE COMPLEX ASSESSMENT	\$ 412.00	\$ 423.00	2.7%
	HIGH COMPLEX ASSESSMENT	\$ 412.00	\$ 423.00	2.7%
	RE-ASSESSMENT	\$ 268.00	\$ 275.00	2.6%
	AQUATIC THERAPY PT	\$ 333.00	\$342.00	2.7%
	AQUATIC THERAPY PTA	\$ 333.00	\$342.00	2.7%
	THERAPEUTIC EXERCISE LAND	\$ 216.00	\$ 222.00	2.8%
	AQUATIC MAINTENANCE THERAPY – FAMILY CARE ONLY	\$ 54.00	\$ 55.00	1.9%
	DRY NEEDLING (1-2 MUSCLES)	\$ 42.00	\$ 43.00	2.4%
	DRY NEEDLING (3 OR MORE MUSCLES)	\$62.00	\$ 63.00	1.6%
	NEUROMUSCULAR RE-EDUCATION OR ADD-ON	\$ 54.00	\$ 55.00	1.9%
	MANUAL THERAPY TECHNIQUES	\$ 54.00	\$ 55.00	1.9%
OPEN SWIM	SWIM THERAPY – INDIVIDUAL	\$ 11.00	\$ 11.00	0%
	SWIM THERAPY – FAMILY	\$ 16.00	\$ 16.00	0%
	PREPAID SWIM THERAPY - YEARLY - INDIVIDUAL	\$ 405.00	\$415.00	2.5%
	PREPAID SWIM THERAPY - YEARLY - COUPLES	\$ 709.00	\$ 727.00	2.5%
	PREPAID SWIM THERAPY - MONTHLY - INDIVIDUAL	\$48.00	\$49.00	2.1%
	PREPAID SWIM THERAPY - MONTHLY - COUPLES	\$ 73.00	\$ 75.00	2.7%
DEMAND TRANSPORT	MED TRANSPORT TO APPT (1-10 MILES)		\$ 6.00	-
	MED TRANSPORT FROM APPT (1-10 MILES)		\$ 6.00	-
	NON-MED TRANSPORTATION (1-10 MILES)		\$ 6.00	-
	MED TRANSPORT TO APPT (11-20 MILES)		\$12.00	-
	MED TRANSPORT FROM APPT (11-20 MILES)		\$ 12.00	-
	NON-MED TRANSPORTATION (11-20 MILES)		\$ 12.00	-
	MED TRANSPORT TO APPT (21-30 MILES)		\$ 18.00	-
	MED TRANSPORT FROM APPT (21-30 MILES)		\$ 18.00	-
	NON-MED TRANSPORTATION (21-30 MILES)		\$ 18.00	-
	MED TRANSPORT TO APPT (31-40 MILES)		\$ 24.00	-
	MED TRANSPORT FROM APPT (31-40 MILES)		\$ 24.00	-
	NON-MED TRANSPORTATION (31-40 MILES)		\$ 24.00	-
	MED TRANSPORT TO APPT (41-50 MILES)		\$ 30.00	-
	MED TRANSPORT FROM APPT (41-50 MILES)		\$ 30.00	-
	NON-MED TRANSPORTATION (41-50 MILES)		\$ 30.00	-
	MED TRANSPORT TO APPT (51-60 MILES)		\$ 36.00	-
	MED TRANSPORT FROM APPT (51-60 MILES)		\$ 36.00	-
	NON-MED TRANSPORTATION (51-60 MILES)		\$ 36.00	-
	MED TRANSPORT TO APPT (OVER 60 MILES)		\$ 1/MILE + \$ 25/HR	-
	MED TRANSPORT FROM APPT (OVER 60 MILES)		\$ 1/MILE +	-
	NON-MED TRANSPORTATION (OVER 60 MILES)		\$ 25/HR \$ 1/MILE + \$ 25/HR	-

	BASE RATE MVCC	\$ 50.00	\$ 71.00	42%
	MILEAGE MVCC TO MED APPT	\$ 2.00	\$ 2.00	0%
	MILEAGE MVCC FROM MED APPT	\$ 2.00	\$ 2.00	0%
	BLOCK GRANT TRANS – COUNSELING			
	YOUTH GRANT TRANS - COUNSELING			
	BLOCK GRANT TRANS - COURT/SECURE DETENTION			
	YOUTH GRANT TRANS - COURT/SECURE DETENTION			
	BLOCK GRANT TRANS - HOME/SUPERVISED VISIT			
	YOUTH GRANT TRANS - HOME/SUPERVISED VISIT			
	BLOCK GRANT TRANS – SCHOOL			
	YOUTH GRANT TRANS - SCHOOL			
ADS	COMMUNITY ADULT DAY SERVICES	\$ 15.00	\$ 15.00	0%
	FACILITY BASED ADULT DAY SERVICES	\$ 15.00	\$ 15.00	0%
	ADULT DAY/PREVOC SERVICE LEVEL 3	\$ 24.00	\$ 24.00	0%
	JOB COACHING - IRIS	\$ 36.00	\$ 36.00	0%
	FAMILY CARE TRANSPORTATION	\$ 26.00	\$ 26.00	0%
RESIDENTIAL	HOPE HOUSE ROOM & BOARD	\$ 575.00	\$ 575.00	0%
UNIVERSAL	INTERACTIVE COMPLEXITY	\$ 44.00	\$ 45.00	2.3%
	TELEHEALTH FACILITY FEE	\$61.00	\$ 62.00	1.6%
	URINE DRUG SCREEN	\$ 36.00	\$ 37.00	2.8%
APS	GUARDIANSHIP PLACEMENT	\$ 255.00	\$ 261.00	2.4%
	GUARDIANSHIP PLACEMENT WITH COURT HEARING	\$357.00	\$ 366.00	2.5%
	ELDER EPP	\$ 57.00	\$ 58.00	1.8%
	ADULT EPP	\$ 57.00	\$ 58.00	1.8%
	CONVERSION 51 – 55	\$ 57.00	\$ 58.00	1.8%
	GUARDIAN CHANGE	\$ 57.00	\$ 58.00	1.8%
NURSING HOME - MVCC				
DAYS	STANDARD ROOM FEE	9/1/24	1/1/25	19%
	SPECIAL CARE ROOM FEE/VENT	\$ 400.00 9/1/24	\$ 476.00 1/1/25	9.7%
NILIBOINIO LIONE		\$ 975.00	\$1070.00	
NURSING HOME REHAB				
ОТ	OT LOW COMPLEX EVALUATION	\$ 222.00	\$ 222.00	0%
	OT MOD COMPLEX EVALUATION	\$ 222.00	\$ 222.00	0%
	OT HIGH COMPLEX EVALUATION	\$ 222.00	\$ 222.00	0%
	OT PARAFFIN BATH	\$ 177.00	\$177.00	0%
	OT SHORTWAVE DIATHERMY	\$ 183.00	\$ 183.00	0%
	OT ULTRASOUND	\$ 177.00	\$177.00	0%
	OT STRENGTH/ENDURANCE	\$ 177.00	\$177.00	0%
	OT NEUROMUSCULAR	\$ 177.00	\$177.00	0%
	OT MASSAGE	\$ 177.00	\$177.00	0%

OT RE-EVALUATION OT SENSORY MOTOR SKILLS OT WHEELCHAIR MANAGEMENT NH OT ORTHOTICS FIRTRAIN, INITAL (STAFF TIME) OT ORTHOTICS MOTOR MOTOR SKILLS OT OR SKILLS OT ORTHOTICS MOTOR MOTOR SKILLS OT GROUP THERAPY OT CANALITH REPOSITIONING PROC OT GELECTRICAL STIMULATION OT ELECTRICAL STIMULATION OT STATE OF		OT JOINT MOBILIZATION	\$ 177.00	\$ 177.00	0%
OT SENSORY MOTOR SKILLS \$ 177.00 \$ 177.00 0% OT SENSORY INTEGRATION TECH \$ 177.00 \$ 177.00 0% OT PHYSICAL DAILY LIVING SKILLS NH \$ 177.00 \$ 177.00 0% OT PHYSICAL DAILY LIVING SKILLS NH \$ 177.00 \$ 177.00 0% OT PHYSICAL CALLY LIVING SKILLS NH \$ 177.00 \$ 177.00 0% OT OF CHALL STIMULATION \$ 177.00 \$ 177.00 0% OF PROSTHETICS TRAINING, INITIAL (STAFF TIME) \$ 177.00 \$ 177.00 0% OT GROUP THERAPY \$ 177.00 \$ 177.00 0% OT GROUP THERAPY \$ 177.00 \$ 177.00 0% OT ELECTRICAL SIMMULATION \$ 177.00 \$ 177.00 0% OT ASSISTIVE TECHNOLOGY ASSESSMENT \$ 177.00 \$ 177.00 0% OT ELECTRICAL SIMULATION \$ 226.00 \$ 226.00 0%					0%
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OT ORTHOTICS FIT/TRAIN, INITIAL (STAFF TIME) \$177.00 \$177.00 0%					0%
OT PROSTHETICS TRAINING, INITIAL OT ORTHOTICS MGMIT/TRAINING OT GROUP THERAPY OT CANALITH REPOSITIONING PROC OT ELECTRICAL STIMULATION OT SUBJECT STORMS STORM					0%
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	ST SPEECH EVAL - SOUND/COMPR/EXPRESS	\$ 351.00	\$ 351.00	0%
	ST SPEECH EVAL - VOICE RESONANCE	\$301.00	\$301.00	0%
	ST SWALLOW TREATMENT	\$180.00	\$ 180.00	0%
	ST SPEECH/LANGUAGE THERAPY	\$ 180.00	\$ 180.00	
	ST EVAL USE/FITTING OF VC PROSTHETIC	\$180.00	\$180.00	0%
	ST EVAL OF SPEECH GEN DEVICE, FIRST HOUR	\$301.00	\$ 301.00	0%
	ST EVAL OF SPEECH GEN DEVICE, ADD'L 30M	\$ 75.00	\$ 75.00	0%
	ST THERAPUETIC USE OF SPEECH GEN DEVICE	\$180.00	\$ 180.00	0%
	ST SWALLOW/FEED ASSESSMENT	\$351.00	\$ 351.00	0%
	ST COGNITIVE PERFORMANCE TEST	\$ 180.00	\$ 180.00	0%
	ST PURE TONE AUDIOMETRY	\$ 180.00	\$ 180.00	0%
	ST DEVELOPMENT OF COGNATIVE SKILLS	\$180.00	\$ 180.00	0%
	ST GROUP THERAPY	\$ 180.00	\$ 180.00	0%
	ST TREATMENT OF SPEECH, LANGUAGE, ETC	\$180.00	\$ 180.00	0%
OXYGEN CHARGES/NURSING HOME				
	OXYGEN CHARGES - PORTABLE	\$7.00	\$ 7.00	0%
	OXYGEN CHARGES - CONCENTRATOR	\$7.00	\$ 7.00	0%
NURSING HOME - PINE CREST				
DAYS	STANDARD ROOM FEE	9/1/24 \$ 400.00		
NURSING HOME REHAB				
OT	OT LOW COMPLEX EVALUATION	\$ 222.00	\$ 222.00	0%
	OT MOD COMPLEX EVALUATION	\$ 222.00	\$222.00	0%
	OT HIGH COMPLEX EVALUATION	\$ 222.00	\$ 222.00	0%
	OT PARAFFIN BATH	\$ 177.00	\$ 177.00	0%
	OT SHORTWAVE DIATHERMY	\$ 183.00	\$ 183.00	0%
	OT ULTRASOUND	\$ 177.00	\$ 177.00	0%
	OT STRENGTH/ENDURANCE	\$ 177.00	\$ 177.00	0%
	OT NEUROMUSCULAR	\$ 177.00	\$ 177.00	0%
	OT MASSAGE	\$177.00 \$177.00	\$ 177.00 - \$ 177.00	0%
	OT JOINT MOBILIZATION	\$177.00 \$177.00	\$177.00 \$177.00	0%
	OT RE-EVALUATION	\$ 177.00 \$ 222.00	\$ 222.00	0%
	OT SENSORY MOTOR SKILLS	\$ 177.00	•	0%
			\$177.00	0%
	OT SENSORY INTEGRATION TECH	\$177.00	\$ 177.00	0%
	OT PHYSICAL DAILY LIVING SKILLS NH	\$177.00	\$ 177.00	0%
	OT WHEELCHAIR MANAGEMENT NH	\$177.00	\$177.00	0%
		4	4	
	OT ORTHOTICS FIT/TRAIN, INITIAL (STAFF TIME)	\$177.00	\$177.00	
	OT ORTHOTICS FIT/TRAIN, INITIAL (STAFF TIME) OT PROSTHETICS TRAINING, INITIAL OT ORTHOTICS MGMT/TRAINING	\$177.00 \$183.00 \$177.00	\$177.00 \$183.00 \$177.00	0%

				0%
	OT GROUP THERAPY	\$177.00	\$ 177.00	0%
	OT CANALITH REPOSITIONING PROC	\$ 177.00	\$ 177.00	0%
	OT ELECTRICAL STIMULATION	\$ 177.00	\$ 177.00	0%
	OT ELECTRICAL STIMULATION	\$ 177.00	\$177.00	0%
	OT ELECTRICAL STIMULATION	\$ 177.00	\$177.00	0%
	OT ELECTRO MAGNETIC THERAPY	\$ 177.00	\$177.00	0%
LPT	OT ASSISTIVE TECHNOLOGY ASSESSMENT	\$177.00	\$177.00	0%
	PT LOW COMPLEX EVALUATION	\$ 226.00	\$ 226.00	0%
	PT MOD COMPLEX EVALUATION	\$ 226.00	\$226.00	0%
	PT HIGH COMPLEX EVALUATION	\$ 226.00	\$226.00	
	PT RE-EVALUATION	\$ 226.00	\$226.00	0%
	PT CANALITH REPOSITIONING	\$ 183.00	\$183.00	0%
	PT SHORTWAVE DIATHERMY	\$ 183.00	\$183.00	0%
	PT ELECTRICAL STIMULATION	\$183.00	\$183.00	0%
	PT ULTRASOUND	\$ 183.00	\$ 183.00	0%
	PT EXERCISE	\$ 183.00	\$ 183.00	0%
	PT NEUROMUSCULAR RE-ED	\$ 183.00	\$183.00	0%
	PT GAIT TRAINING	\$ 183.00	\$183.00	0%
	PT MASSAGE	\$ 183.00	\$183.00	0%
	PT JOINT MOBILIZATION	\$ 183.00	\$183.00	0%
	PT TRANSFERS	\$ 183.00	\$ 183.00	0%
	PT POSITIONING	\$ 183.00	\$ 183.00	0%
	PT WHEELCHAIR MANAGEMENT	\$ 183.00	\$ 183.00	0%
	PT DEBRIDEMENT, FIRST 20 SQ CM	\$ 183.00	\$ 183.00	0%
	PT ORTHOTICS FIT/TRAIN, INITIAL (STAFF TIME)	\$ 183.00	\$ 183.00	0%
	PT PROSTHETICS TRAINING, INITIAL	\$ 183.00	\$ 183.00	0%
	PT ELECTRIC STIMULATION - ULCER	\$ 183.00	\$ 183.00	0%
	PT ELECTROMAGNETIC THERAPY - ULCER			0%
		\$ 183.00	\$ 183.00	0%
	PT ELECTRICAL STIMULATION	\$183.00	\$183.00	0%
	PT GROUP THERAPY	\$ 183.00	\$ 183.00	0%
SPEECH	PT AQUATIC THERAPY EXERCIES	\$183.00	\$ 183.00	0%
	ST SPEECH EVAL - FLUENCY	\$301.00	\$ 301.00	0%
	ST SPEECH EVAL - SOUND PRODUCTION	\$301.00	\$301.00	0%
	ST SPEECH EVAL - SOUND/COMPR/EXPRESS	\$351.00	\$351.00	0%
	ST SPEECH EVAL - VOICE RESONANCE	\$ 301.00	\$ 301.00	0%
	ST SWALLOW TREATMENT	\$ 180.00	\$ 180.00	0%
	ST SPEECH/LANGUAGE THERAPY	\$ 180.00	\$ 180.00	0%
	ST EVAL USE/FITTING OF VC PROSTHETIC	\$ 180.00	\$ 180.00	
	ST EVAL OF SPEECH GEN DEVICE, FIRST HOUR	\$301.00	\$301.00	0%
	ST EVAL OF SPEECH GEN DEVICE, ADD'L 30M	\$ 75.00	\$ 75.00	0%
	ST THERAPUETIC USE OF SPEECH GEN DEVICE	\$ 180.00	\$ 180.00	0%
	ST SWALLOW/FEED ASSESSMENT	\$351.00	\$351.00	0%

	ST COGNITIVE PERFORMANCE TEST	\$ 180.00	\$ 180.00	0%
	ST PURE TONE AUDIOMETRY	\$ 180.00	\$ 180.00	0%
	ST DEVELOPMENT OF COGNATIVE SKILLS	\$180.00	\$ 180.00	0%
	ST GROUP THERAPY	\$180.00	\$ 180.00	0%
	ST TREATMENT OF SPEECH, LANGUAGE, ETC	\$ 180.00	\$ 180.00	0%
OXYGEN CHARGES/NURSING HOME	0. M.E.W. 0. 0. E.E.M., E.W. 0. 0.E., E.O			
TIONE	OXYGEN CHARGES - PORTABLE	\$ 7.00	\$ 7.00	0%
	OXYGEN CHARGES - CONCENTRATOR	\$ 7.00	\$ 7.00	0%
LAB/X-RAY	COVID TESTING	\$ 110.00	\$110.00	0%
	BASIC METABOLIC PANEL IP	\$ 90.00	\$ 90.00	0%
	E-LYTE PANEL IP	\$ 49.00	\$ 49.00	0%
	COMPREHENSIVE METABOLIC PN IP	\$ 87.00	\$87.00	0%
	LIPID PROFILE IP	\$82.00	\$82.00	0%
	RENAL PANEL IP	\$ 77.00	\$ 77.00	0%
	ACUTE HEPATITIS PANEL	\$71.00	\$ 71.00	0%
	HEPATIC PANEL IP	\$ 117.00	\$ 117.00	0%
	AMIODARONE, SERUM	\$ 30.00	\$ 30.00	0%
	TEGRETOL IP	\$ 49.00	\$ 49.00	0%
	CLOZAPINE ASSAY IP	\$ 57.00	\$ 57.00	0%
	DIGOXIN IP	\$ 49.00	\$ 49.00	0%
	VALPROIC ACID, TOTAL IP	\$ 27.00	\$ 27.00	0%
	GABEPENTIN ASSAY IP	\$ 49.00	\$ 49.00	0%
	HALDOL IP	\$ 47.00	\$ 47.00	0%
	LAMOTRIGINE	\$ 25.00	\$ 25.00	0%
	LEVETIRACETAM IP	\$ 30.00	\$ 30.00	0%
	LITHIUM IP	\$ 33.00	\$ 33.00	0%
	OXCARBAZEPINE DRUG ASSAY IP	\$ 35.00	\$ 35.00	0%
	PHENOBARBITAL IP	\$ 25.00	\$ 25.00	0%
	DILANTIN IP	\$ 55.00	\$ 55.00	0%
	TOPIRAMATE (TOPI) IP	\$ 50.00	\$ 50.00	0%
	VANCOMYCIN ASSAY IP	\$ 30.00	\$ 30.00	0%
	LACOSAMIDE (777)	\$ 104.00	\$104.00	0%
	DRUG SCREEN RAPID URINE	\$31.00	\$31.00	0%
	ALCOHOLS / ETHANOL CONFIRM IP	\$ 25.00	\$ 25.00	0%
	AMPHETAMINES, 3 OR 4	\$ 35.00	\$ 35.00	0%
	ANALGESICS (NON-OPIOID), 1 OR 2	\$ 30.00	\$ 30.00	0%
	FLUOXETINE SERUM	\$ 105.00	\$ 105.00	0%
	CLOMIPRAMINE, SERA	\$ 122.00	\$ 122.00	0%
	ANTIPSYCHOTICS, SERUM IP	\$ 129.00	\$129.00	0%
	PREGABALIN, SERUM(PGN)	\$ 64.00	\$ 64.00	0%
	URINALYSIS IP	\$ 26.00	\$ 26.00	0%

URINE PREGNANCY IP	\$30.00	\$ 30.00	0%
ALBUMIN IP	\$29.00	\$ 29.00	0%
MICRO ALBUMINURIA IP	\$24.00	\$ 24.00	0%
ALPHA FETOPROTEIN TUMOR	\$ 16.75	\$ 16.75	0%
AMMONIA IP	\$34.00	\$ 34.00	0%
AMYLASE IP	\$39.00	\$ 39.00	0%
ANGIOTENSIN CONV ENZYME	\$22.00	\$ 22.00	0%
ARSENIC (ASB) BLOOD IP	\$41.25	\$ 41.25	0%
BILIRUBIN, DIRECT IP	\$9.00	\$9.00	0%
FECAL IMMUNOCHEMICAL TEST (FIT) IP	\$ 26.00	\$ 26.00	0%
VITAMIN D (25 HYDROXY) IP	\$53.00	\$ 53.00	0%
CALCIUM IP	\$34.00	\$ 34.00	0%
CALCIUM, IONIZED IP	\$21.00	\$ 21.00	0%
CALCIUM, URINE QUANT, TIMED IP	\$9.00	\$9.00	0%
CALCIUM ANALYSIS	\$30.00	\$ 30.00	0%
CEAIP	\$61.00	\$61.00	0%
COPPER SERUM	\$35.00	\$ 35.00	0%
CORTISOL TOTAL IP	\$44.00	\$ 44.00	0%
CANNABINOIDS CONFIRM & QUANT IP	\$60.00	\$ 60.00	0%
CPKIP	\$39.00	\$ 39.00	0%
CREATININE, BLOOD IP	\$35.00	\$ 35.00	0%
CREATININE, OTHER IP	\$10.00	\$ 10.00	0%
CREATININE CLEARANCE IP	\$16.00	\$ 16.00	0%
VITAMIN B12 % FOLATE	\$55.00	\$ 55.00	0%
VTIAMIN D	\$40.00	\$ 40.00	0%
ESTRADIOL, SERUM IP	\$ 44.00	\$ 44.00	0%
FERRITIN IP	\$55.00	\$ 55.00	0%
FOLATE SERUM	\$ 53.00	\$ 53.00	0%
BLOOD GASES, ANY COMB IP	\$31.00	\$ 31.00	0%
GLUCOSE FASTING IP	\$32.00	\$ 32.00	0%
GAMMA GT IP	\$ 25.00	\$ 25.00	0%
HEMOGLOBIN A1C	\$55.00	\$ 55.00	0%
FREE LIGHT CLAIMS SERUM	\$ 130.00	\$130.00	0%
IRON AND IBC % S AT	\$39.00	\$ 39.00	0%
LIPASE IP	\$ 44.00	\$ 44.00	0%
LIPOPROTEIN A BASIC PANEL	\$ 20.00	\$ 20.00	0%
LDL CHOLESTEROL IP	\$14.00	\$ 14.00	0%
MAGNESIUM IP	\$ 27.00	\$ 27.00	0%
B-NUTRIURETIC PEPTID IP	\$ 128.00	\$128.00	0%
METHYLMALONIC (ORGANIC) ACID, QUANT	\$28.00	\$ 28.00	0%
OXALATE 24 HR URINE	\$40.00	\$ 40.00	0%
PARATHORMONE ASSAY IP	\$71.00	\$ 71.00	0%

PETION CONTE CONTE	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	
RETICULOCYTE COUNT	\$10.00	\$ 10.00	0%
ALKALINE PHOSPHATE IP	\$ 23.00	\$ 23.00	0%
PHOSPHORUS IP	\$ 30.00	\$ 30.00	0%
POTASSIUM S AND P	\$ 27.00	\$ 27.00	0%
PREALBUMIN IP	\$ 53.00	\$ 53.00	0%
PROCALCITONIN (PCT) IP	\$ 44.00	\$ 44.00	0%
PROLACTIN ASSAY IP	\$ 32.00	\$ 32.00	0%
PSA TOTAL ASSAY IP	\$ 32.00	\$ 32.00	0%
PROTEIN ASSAY, URINE IP	\$60.00	\$ 60.00	0%
PYRIDOXAL PHOSPHATE (VIT B-6) IP	\$48.00	\$ 48.00	0%
SODIUM IP	\$ 27.00	\$ 27.00	0%
TESTOSTERONE FREE	\$ 27.00	\$ 27.00	0%
TESTOSTERONE; TOTAL IP	\$41.00	\$ 41.00	0%
THYROXINE ASSAY, TOTAL IP	\$12.00	\$ 12.00	0%
THYROXINE FREE	\$ 55.00	\$ 55.00	0%
TSH IP	\$ 65.00	\$ 65.00	0%
AST (SGOT) IP	\$ 33.00	\$ 33.00	0%
ALT IP	\$ 35.00	\$ 35.00	0%
T3 RIA IP	\$ 28.00	\$ 28.00	0%
T3 FREE IP	\$ 201.00	\$ 201.00	0%
TROPONIN I QUANTI IP	\$ 16.00	\$ 16.00	0%
BUNIP	\$ 33.00	\$ 33.00	0%
URIC ACID IP	\$ 34.00	\$ 34.00	0%
URIC ACID URINE 24 HOURS	\$ 35.00	\$ 35.00	0%
VITAMIN K1 IP	\$ 45.00	\$ 45.00	0%
ZINC SERUM	\$ 22.00	\$ 22.00	0%
GONADOTROPIN, CHORIONIC (HCG) QUANT IP	\$ 28.00	\$ 28.00	0%
GONADOTROPIN (HCG), QUALITATIVE IP	\$11.00	\$ 11.00	0%
HEMATOCRIT IP	\$ 20.00	\$ 20.00	0%
HEMOGLOBIN IP	\$ 20.00	\$ 20.00	0%
CBC WITH AUTO DIFF IP	\$ 42.00	\$ 42.00	0%
HEMOGRAM (CBC W/O DIFF) IP	\$ 44.00	\$ 44.00	0%
,			0%
WBC IP	\$ 20.00	\$ 20.00	
PLATELET COUNT, AUTO IP	\$ 20.00	\$ 20.00	0%
D-DIMER QUANTITATIVE IP	\$13.00	\$ 13.00	0%
FIBRINOGEN ASSAY	\$ 15.00	\$ 15.00	0%
PROTHROMBIN TIME IP	\$ 27.00	\$ 27.00	0%
ERYTHRACYTE SED RATE IP	\$ 10.00	\$ 10.00	0%
PTT IP	\$ 10.00	\$ 10.00	0%
ANA PROFILE	\$4.00	\$4.00	0%
C-REACTIVE PROTEIN IP	\$8.00	\$8.00	0%
COMPLEMENT C3 AND/OR C4 (C-3/C-4) IP	\$ 19.00	\$ 19.00	0%

COMPLEMENT TOTAL SERUM (COMSO) IP	\$ 33.00	\$ 33.00	0%
SM-RNP ANTIBODIES (SMRNP) IP	\$ 29.00	\$ 29.00	0%
AMTI-NEUTROPHIL CYTOPLASMIC	\$30.00	\$ 30.00	0%
THYROID MICROSOMAL AB IP	\$ 22.00	\$ 22.00	0%
RHEUMATOID FACTOR (RA) IP	\$ 9.00	\$ 9.00	0%
LYMES IP	\$ 34.00	\$ 34.00	0%
HIVIP	\$ 75.00	\$ 75.00	0%
HSV 1,2 ANTIBODIES IgG	\$ 34.00	\$ 34.00	0%
HIV 4TH GEN CONFIMATORY	\$ 90.00	\$ 90.00	0%
HEPATITIS B IP	\$ 46.00	\$ 46.00	0%
HEPATITIS A IGM ANTIBODY IP	\$ 17.00	\$ 17.00	0%
RUBELLA IP	\$ 35.00	\$ 35.00	0%
COVID -19 SEMIQUANT ANTI	\$ 50.00	\$ 50.00	0%
TOXOPLASMA, IgG IP	\$40.00	\$ 40.00	0%
SYPHILIS (TREPONEMA PALLIDUM) SCRN IP	\$30.00	\$ 30.00	0%
HEPATITIS C AB IP	\$47.00	\$ 47.00	0%
BLOOD CULTURES IP	\$87.00	\$ 87.00	0%
RAPID STREP	\$ 29.00	\$ 29.00	0%
CULTURE, BACTERIAL, ANAEROBIC IP	\$30.00	\$ 30.00	0%
CULTURE (MRSA/STREP), PRESUMP PATH IP	\$ 45.00	\$ 45.00	0%
URINE CULTURE- QUANT IP	\$ 35.00	\$ 35.00	0%
CULTURE FUNGUS DERMAL	\$ 20.00	\$ 20.00	0%
CULTURE FUNGUS GENERAL	\$ 20.00	\$ 20.00	0%
OVA & PARASITE, CRYPTOSPORIDIUM	\$ 50.00	\$ 50.00	0%
HELICOBACTER PYLORI AG IP	\$ 24.00	\$ 24.00	0%
HEPATIS B SURFACE ANTIGEN	\$ 25.00	\$ 25.00	0%
CANDIDA SPECIES, DIRECT IP	\$ 75.00	\$ 75.00	0%
CHLAMYDIA TRACHOMATIS	\$80.00	\$ 80.00	0%
C DIFFICILE IP	\$ 53.00	\$ 53.00	0%
INFLUENZA A&B, MULTIPLE TYPES	\$ 117.00	\$117.00	0%
FECAL BAC PATHOGENS, NAT IP	\$ 192.00	\$192.00	0%
HCV PCR QUANTITAVE	\$80.00	\$ 80.00	0%
HIV-1 RNA DETACT/QUANT (HIVQN) IP	\$ 180.00	\$ 180.00	0%
GC BY NUCLEIC PROBE IP	\$60.00	\$60.00	0%
INFUENZA A & B W RSV	\$ 160.00	\$160.00	0%
SARS COV-2 AND FLU A	\$ 160.00	\$ 160.00	0%
SARS COV-2 FLU A & B	\$ 160.00	\$ 160.00	0%
BULLOUS PEMPHIGOID	\$ 650.00	\$ 650.00	0%
LEUKOCYTES FECAL IP	\$7.00	\$ 7.00	0%
VENIPUNCTURE IP	\$ 20.00	\$ 20.00	0%
ELBOW - 2 VIEWS -IP	\$ 25.00	\$ 25.00	0%
CHEST 1V	\$82.00	\$ 82.00	0%

CHEST 2V	\$99.00	\$ 99.00	0%
CHEST, 4 VIEWS	\$ 102.00	\$ 102.00	0%
CHEST, TWO VIEWS IP	\$ 22.00	\$ 22.00	0%
RIBS, UNILAT W CXR	\$ 128.00	\$ 128.00	0%
SPINE, CERVICAL, 3 VIEWS OR LESS IP	\$ 24.00	\$ 24.00	0%
SPINE, THORACIC, 2 VIEW	\$21.00	\$ 21.00	0%
SPINE, THORACOLUMBAR, 2 VIEW	\$ 23.00	\$ 23.00	0%
L SPINE AP / LATERAL	\$99.00	\$ 99.00	0%
PELVIS, AP	\$ 78.00	\$ 78.00	0%
PELVIS, MIN	\$99.00	\$ 99.00	0%
SHOULDER, COMPLETE	\$82.00	\$82.00	0%
HUMERUS, 2+ VIEWS	\$ 37.00	\$ 37.00	0%
WRIST, 4V	\$80.00	\$ 80.00	0%
HAND, MIN 3V	\$80.00	\$80.00	0%
FINGER (S), 2 VIEWS IP	\$ 29.00	\$ 29.00	0%
HIP, UNILATERAL, SINGLE VIEW	\$19.00	\$ 19.00	0%
HIP, COMPLETE	\$ 97.00	\$ 97.00	0%
FEMUR	\$80.00	\$80.00	0%
KNEE, 2V	\$ 78.00	\$ 78.00	0%
KNEE, COMPLETE 4 OR MORE VIEWS	\$ 29.00	\$ 29.00	0%
ANKLE, AP / LATERAL	\$ 74.00	\$ 74.00	0%
ANKLE, MIN 3V	\$80.00	\$80.00	0%
FOOT, COMPLETE	\$80.00	\$80.00	0%
CALCANEUS	\$61.00	\$61.00	0%
ABDOMEN, AP	\$82.00	\$82.00	0%
ABDOMEN, TWO VIEWS IP	\$ 25.00	\$ 25.00	0%
ABDOMEN, W/ ERECT OR DECUBITUS	\$ 118.00	\$ 118.00	0%
US ABDOMINAL W/IMAGE DOC, COMPLETE	\$ 160.00	\$ 160.00	0%
DUPLEX SCAN, VEINS, UNI EXT, LIMITED	\$ 210.00	\$ 210.00	0%
X-RAY EQUIP TRANSPORTATION, SINGLE	\$ 144.00	\$ 144.00	0%
X-RAY EQUIP TRANSPORTATION, MULTIPLE	\$ 144.00	\$ 144.00	0%
Adult Crisis Stabilization Per Diem	\$0.00	\$520.00	New
Youth Crisis Stabilization Per Diem	\$0.00	\$1,676.58	New

Pay Grade	North Central Health Care Job Title	Department	Exemption Status	Step 1 90%	Step 2 92%	Step 3 94%	Step 4 96%	Step 5 98%	Step 6 100%	Step 7 101.5%	Step 8 103.0%	Step 9 104.5%	Step 10 106.0%	Step 11 107.5%	Step 12 109.0%	Step 13 110.5%	Step 14 112.0%	Step 15 113.5%	Step 16 115.0%
25	Psychiatrist									Ва	sed on fair	market val	ue						
23	Executive Director	Corporate Administration	Exempt	\$182,312 \$87.65	\$186,368 \$89.60	\$190,424 \$91.55	\$194,480 \$93.50	\$198,515 \$95.44	\$202,576 \$97.39										\$ \$232,960 \$112.00
22	Deputy Executive Director	Corporate Administration	Exempt	\$167,898 \$80.72	\$171,621 \$82.51	\$175,365 \$84.31	\$179,088 \$86.10	\$182,811 \$87.89	\$186,549 \$89.69	\$189,342 \$91.03	\$192,150 \$92.38	\$194,938 \$93.72		\$200,533 \$96.41	\$203,341 \$97.76				\$214,531 \$103.14
21	Director of Pharmacy Services Senior Director of Behavioral Health Services	Pharmacy Corporate Administration	Exempt Exempt	\$154,419 \$74.24	\$157,851 \$75.89	\$161,283 \$77.54	\$164,715 \$79.19	\$168,147 \$80.84	\$171,576 \$82.49	\$174,158 \$83.73	\$176,717 \$84.96	\$179,296 \$86.20	\$181,875 \$87.44	\$184,454 \$88.68	\$187,013 \$89.91	\$189,592 \$91.15	\$192,171 \$92.39	\$194,730 \$93.62	\$197,309 \$94.86
20	Director of Acute Care Services Manager of Pharmacy Services	Acute Care Admin Pharmacy	Exempt Exempt	\$141,939 \$68.24		\$148,262 \$71.28		\$154,565 \$74.31	\$157,718 \$75.83		\$162,448 \$78.10	\$164,819 \$79.24		\$169,541 \$81.51		\$174,283 \$83.79	\$176,654 \$84.93	\$179,005 \$86.06	\$181,376 \$87.20
19	Director of Nursing Home Operations Director of Finance Clinical Pharmacist Senior Director of Human Resources	Nursing Home Admin Accounting Pharmacy Corporate Administration	Exempt Exempt Exempt Exempt	\$130,333 \$62.66	\$133,224 \$64.05	\$136,115 \$65.44	\$139,006 \$66.83	\$141,918 \$68.23	\$144,809 \$69.62	\$146,973 \$70.66		\$151,320 \$72.75		\$155,667 \$74.84	\$157,851 \$75.89	\$160,014 \$76.93		\$164,362 \$79.02	
18	Assistant Director of Acute Care Services Director of Community Treatment Director of Compliance & Quality (Moved from Grade 17 per Consultant Re-Evaluation) Nurse Practitioner Physician Assistant	Acute Care Admin Community Tx Admin Compliance Outpatient Adult Behavior Hith Hosp	Exempt Exempt Exempt Exempt Exempt	\$119,538 \$57.47	\$122,200 \$58.75			\$130,166 \$62.58		\$134,826 \$64.82			\$140,795 \$67.69	\$142,792 \$68.65	\$144,789 \$69.61				3 \$152,755 \$73.44
17	Director of Nursing (Remove Pine Crest Only Job/Dept) Director of Nursing Director of Outpatient Director of Revenue Cycle	Nursing Home Admin Post-Acute Care Outpatient Corporate Administration	Exempt Exempt Exempt Exempt		\$111,925 \$53.81	\$114,358 \$54.98	\$116,792 \$56.15	\$119,226 \$57.32	\$121,664 \$58.49		\$125,320 \$60.25	\$127,130 \$61.12		\$130,790 \$62.88	\$132,621 \$63.76	\$134,430 \$64.63		\$138,091 \$66.39	
16	Assistant Director of Acute Care Operational Services Clinical Manager Manager of Information Services Manager of Crisis Clinical Services Manager of Nursing Services Manager of Nursing Services Manager of Inpatient & Youth Clinical Services Manager of Islanding Services Manager of Stabilization and Recovery Clinical Services	Acute Care Admin Community Tx Admin IMS Crisis Post-Acute Care Adult Behavior Hlth Hosp Adult Behavior Hlth Hosp Crisis	Exempt Exempt Exempt Exempt Exempt Exempt Exempt Exempt Exempt		\$102,315 \$49.19			\$108,992 \$52.40	\$111,218 \$53.47	\$112,882 \$54.27	\$114,546 \$55.07	\$116,230 \$55.88	\$117,894 \$56.68	\$119,558 \$57.48	\$121,222 \$58.28	\$122,886 \$59.08		\$126,235 \$60.69	5 \$127,899 \$61.49
15	Director of Nutritional & Environmental Services Manager of Accounting Manager of Communications Manager of Safety & Security (Remove Position Reallocated to Supervisor Role) Manager of Outpatient Nursing Operations Manager of Respiratory Services (Moved from Grade 14 per Consultant Re-Evaluation) Nurse Supervisor Shift Supervisor-RN (Moved from Grade 14 per Consultant Re-Evaluation) Physical Therapist	Food Services Accounting Marketing & Communication Safety & Security Outpatient Post-Acute Care Adult Behavior Hith Hosp Post-Acute Care Aquatic Services	Exempt Exempt Exempt Exempt Exempt Exempt Exempt Non-Exempt Non-Exempt	\$91,333 \$43.91	\$93,371 \$44.89	\$95,389 \$45.86	\$97,427 \$46.84	\$99,466 \$47.82	\$101,488 \$48.79			\$106,059 \$50.99			\$110,614 \$53.18		\$113,672 \$54.65		\$116,709 \$56.11

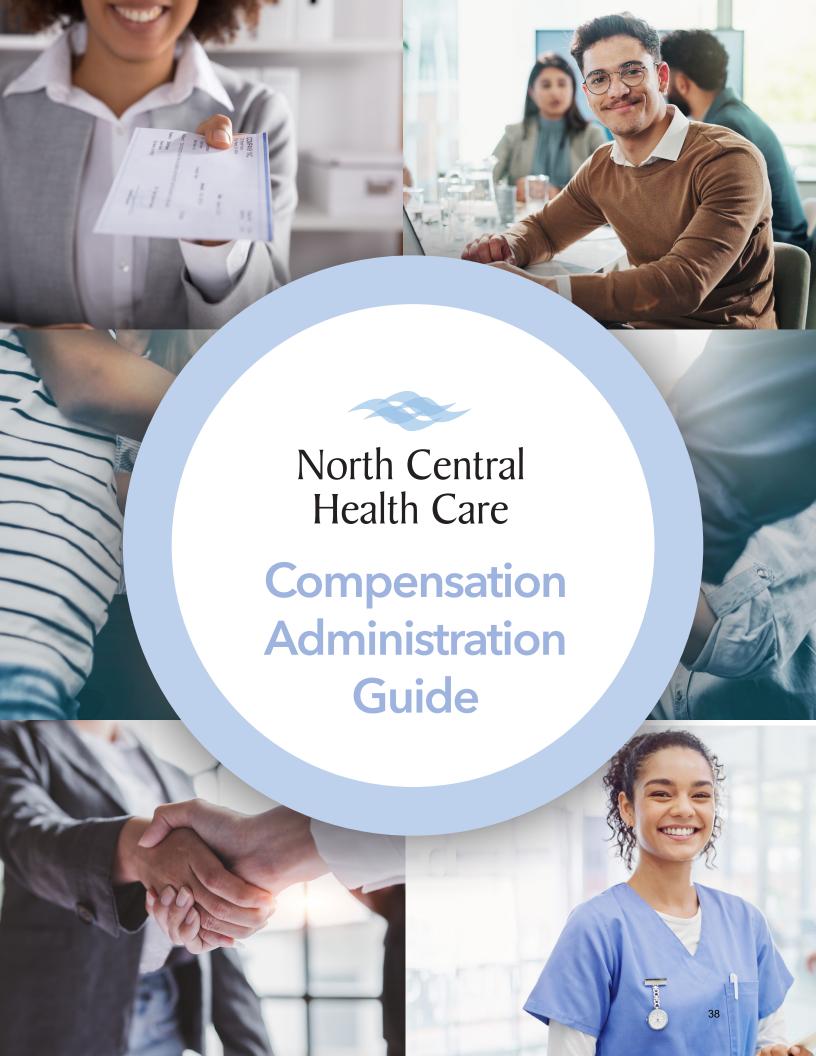
				Sten 1	Sten 2	Sten 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9	Step 10	Sten 11	Step 12	Step 13	Sten 14	Step 15	Step 16
Pay Grade	North Central Health Care Job Title	Department	Exemption Status	90%	92%	94%	96%	98%	100%	101.5%	103.0%	104.5%	106.0%	107.5%	109.0%	110.5%	112.0%	113.5%	115.0%
				\$83,242	\$85,093	\$86,944	\$88,795	\$90,646	\$92,496	\$93,891	\$95,264	\$96,658	\$98,051		\$100,818		\$103,605	\$104,978	\$106,371
14	Clinical Coordinator	Community Tx - Adult	Exempt	\$40.02	\$40.91	\$41.80	\$42.69	\$43.58	\$44.47	\$45.14	\$45.80	\$46.47	\$47.14	\$47.80	\$48.47	\$49.14	\$49.81	\$50.47	\$51.14
	Clinical Coordinator	Community Tx - Youth	Exempt																
	Infection Preventionist	Adult Behavior Hlth Hosp	Non-Exempt																
	Infection Preventionist	Post-Acute Care	Non-Exempt																
	Lead Clinical Therapist	Outpatient	Non-Exempt																
	Manager of Community Treatment	Community Tx - Adult	Exempt																
	Manager of Community Treatment	Community Tx - Youth	Exempt																
	Manager of Health Information Management	Health Information	Exempt																
	Manager of Learning & Development	Human Resources	Exempt																
	Manager of Adult Protective Services	Protective Services	Exempt																
	Manager of Crisis Operational Services	Crisis	Exempt																
	Manager of Inpatient Operational Services	Adult Behavior Hlth Hosp	Exempt																
	Manager of Patient Access	Revenue Cycle	Exempt																
	Manager of Patient Finance	Patient Financial Svcs	Exempt																
	Manager of Procurement	Accounting	Exempt																
	Manager of Stabilization and Recovery Operational Services	Adult Crisis Stabil Facil	Exempt																
	Manager of Quality	Compliance	Exempt																
	MDS Coordinator (Moved from Grade 13 per Consultant Re-Evaluation)	Post-Acute Care	Exempt																
	Registered Nurse	Post-Acute Care	Non-Exempt																
	Registered Nurse Lead- Community Treatment	Community Tx Admin	Non-Exempt																
	Registered Nurse-Hospital	Adult Behavior HIth Hosp	Non-Exempt																
	Registered Nurse-Hospital	Adult Crisis Stabil Facil	Non-Exempt																
	Registered Nurse-Hospital Shift Supervisor-LPN (Remove Pine Crest Only Position)	Youth Behav Hlth Hospital Post-Acute Care	Non-Exempt Exempt																
	Wound Restorative-RN (Moved from Grade 13 per Consultant Re-Evaluation)	Post-Acute Care	Non-Exempt																
	wound Restorative-RN (Moved from Grade 13 per Consultant Re-Evaluation)	Post-Acute Care	Non-Exempt																
				\$75.712	\$77,376	\$79,061	\$80,746	\$82,430	\$84,114	\$85,384	\$86,632	\$87,901	\$89,170	\$90,418	\$91,686	\$92,955	\$94,203	\$95,472	\$96,741
13	MDS Coordinator (Remove Pine Crest Only Position/Dept)	Nursing Home Admin	Exempt	\$36.40	\$37.20	\$38.01	\$38.82	\$39.63	\$40.44	\$41.05	\$41.65	\$42.26	\$42.87	\$43.47	\$44.08	\$44.69	\$45.29	\$45.90	\$46.51
	Mental Health Professional	Crisis	Exempt																
	Mental Health Therapist	Outpatient	Exempt																
	Mental Health Therapist	Adult Behavior Hlth Hosp	Exempt																
	Mental Health Therapist	Outpatient	Exempt																
	Registered Nurse-Community Treatment	Community Tx - Adult	Non-Exempt																
	Registered Nurse-Outpatient	Outpatient	Non-Exempt																
	Senior Accountant	Accounting	Exempt																
	Solutions Analyst	IMS	Exempt																
	Utilization Review Case Manager	Adult Behavior Hlth Hosp	Non-Exempt																
				\$68,640	\$70,158	\$71,677	\$73,216	\$74,734	\$76,258	\$77,397	\$78,541	\$79,685	\$80,829	\$81,973	\$83,117	\$84,261	\$85,405	\$86,549	\$87,693
12	Community Treatment Lead	Community Tx Admin	Non-Exempt	\$33.00	\$33.73	\$34.46	\$35.20	\$35.93	\$36.66	\$37.21	\$37.76	\$38.31	\$38.86	\$39.41	\$39.96	\$40.51	\$41.06	\$41.61	\$42.16
	Crisis Professional- Masters	Crisis	Non-Exempt																
	Dietitian	Food Services	Non-Exempt																
	Employee Health Nurse- RN	Human Resources	Exempt																
	Environmental Health & Safety Specialist	Compliance	Exempt																
	Human Resources Business Partner	Human Resources	Exempt																
	Human Resources Specialist	Human Resources	Exempt																
	Learning & Development Clinical Specialist	Human Resources	Exempt																
	Quality Data Analyst	Compliance	Exempt																
	Respiratory Therapist	Post-Acute Care	Non-Exempt																
	Social Worker- MSW	Youth Behav Hlth Hospital	Non-Exempt																
	Talent Acquisition Specialist	Human Resources	Exempt																

Grade	North Central Health Care Job Title	Department	Exemption Status	90%	Step 2 92%	94%	96%	98%	Step 6 100%	Step 7 101.5%	Step 8 103.0%	Step 9 104.5%	Step 10 106.0%	Step 11 107.5%	Step 12 109.0%	Step 13 110.5%	Step 14 112.0%	Step 15 113.5%	%
11	Accountant	Accounting	Exempt	\$62,067 \$29.84	\$63,461 \$30.51	\$64,834 \$31.17	\$66,206 \$31.83	\$67,600 \$32.50	\$68,972 \$33.16	\$70,013 \$33.66	\$71,032 \$34.15	\$72,072 \$34.65	\$73,112 \$35.15	\$74,152 \$35.65	\$75,171 \$36.14	\$76,211 \$36.64	\$77,251 \$37.14		
11	AODA Counselor	Lakeside Recovery MMT	Non-Exempt	\$29.04	φ30.51	\$31.17	φ31.03	\$32.50	\$33.10	\$33.00	\$34.15	\$34.00	ф35.15	\$33.03	\$30.14	\$30.04	φ37.14	\$37.04	+
	Communication Coordinator		Exempt Exempt																
		Marketing & Communication																	
	Graduate Nurse	Post-Acute Care	Non-Exempt																
	Human Resources Technology Specialist (Change Title- HRIS Analyst)	Human Resources	Exempt																
	Intoxicated Driver Assessor	Outpatient	Non-Exempt																
	In-Training Therapist	Outpatient	Exempt																
	In-Training Therapist	Lakeside Recovery MMT	Exempt																
	Learning & Development Specialist	Human Resources	Exempt																
	Manager Environmental Services	Housekeeping	Exempt																
	Manager of Aquatic Services	Aquatic Services	Exempt																
	Manager of Nutritional Services	Food Services	Exempt																
	Manager Transportation Services	Demand Transportation	Exempt																
	Medical Staff Relations Coordinator	•																	
		Outpatient	Non-Exempt																
	Manager of Life Enrichment & Guest Services	Post-Acute Care	Exempt																
	Protective Services Representative	Protective Services	Non-Exempt																
	Social Worker-BSW	Adult Behavior Hlth Hosp	Non-Exempt																
	Social Worker-BSW	Adult Crisis Stabil Facil	Non-Exempt																
	Social Worker-BSW	Youth Behav Hlth Hospital	Non-Exempt																
	Social Worker-BSW	Post-Acute Care	Non-Exempt																
	Senior Executive Assistant	Corporate Administration	Exempt																
	Substance Abuse Counselor	Adult Behavior Hlth Hosp	Non-Exempt																
	Substance Abuse Counselor	Outpatient	Non-Exempt																
	Supervisor of Community Treatment Quality Assurance	Community Tx Admin	Exempt																
	Supervisor of Community Employment Services	Community Tx Admin	Exempt																
	Supervisor of Community Employment Services	Community IX Admini	Exempt																
,	Care Coordinator	Adult Behavior Hlth Hosp	Non-Exempt		\$57,242 \$27.52	\$58,469 \$28.11	\$59,717 \$28.71	\$60,965 \$29.31	\$62,211 \$29.91	\$63,149 \$30.36	\$64,085 \$30.81	\$65,021 \$31.26	\$65,936 \$31.70	\$66,872 \$32.15	\$67,808 \$32.60	\$68,744 \$33.05	\$69,680 \$33.50	\$70,616 \$33.95	
	Care Coordinator	Youth Crisis Stabil Facil	Non-Exempt	\$20.02	Ψ L 7.10 L	Ψ20.11	QL 0.7 I	Q20.01	420.02	Ψ00.00	400.01	401.20	ψ01.70	Ψ02.10	ψ02.00	φου.σο	Ψ00.00	ψ00.00	
	Case Manager- Masters	Community Tx - Youth	Non-Exempt																
	Case Manager- Bachelors	Community Tx - Adult	Non-Exempt																
	Community Treatment Intake Specialist	Community Tx - Adult	Non-Exempt																
	Community Treatment Intake Specialist	Community Tx - Youth	Non-Exempt																
	Compliance Auditor	Compliance	Non-Exempt																
	Crisis Professional- Bachelors (Moved from Grade 9 Per Consultant Re-evaluation)	Crisis	Non-Exempt																
	Crisis Professional (Moved from Grade 9 per Consultant Re-Evaluation)	Crisis	Non-Exempt																
	Linkage Coordinator	Crisis	Non-Exempt																
	Licensed Practical Nurse- Hospital	Adult Behavior Hlth Hosp	Non-Exempt																
	Licensed Practical Nurse	Post-Acute Care	Non-Exempt																
	Manager of Adult Day Services	Adult Day Services	Exempt																
	Outpatient Operations Specialist	Outpatient	Non-Exempt																
		Aquatic Services	Non-Exempt																
	Physical Therapy Assistant																		
	Quality Assurance Specialist Lead	Community Tx Admin	Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator	Community Tx Admin Sober Living	Non-Exempt Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician	Community Tx Admin	Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator	Community Tx Admin Sober Living	Non-Exempt Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position)	Community Tx Admin Sober Living IMS Post-Acute Care	Non-Exempt Non-Exempt Non-Exempt Exempt		\$51,501	\$52,624	\$53,747		\$55,977			\$58,490	\$59,342			\$61,859			
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator	Community Tx Admin Sober Living IMS Post-Acute Care	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt		\$51,501 \$24.76	\$52,624 \$25.30	\$53,747 \$25.84	\$54,850 \$26.37	\$55,977 \$26.91	\$56,826 \$27.32	\$57,658 \$27.72	\$58,490 \$28.12	\$59,342 \$28.53	\$60,174 \$28.93	\$61,006 \$29.33	\$61,859 \$29.74	\$62,691 \$30.14	\$63,544 \$30.55	
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator Billing Analyst	Community Tx Admin Sober Living IMS Post-Acute Care Nursing Home Admin Patient Financial Svcs	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator	Community Tx Admin Sober Living IMS Post-Acute Care	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator Billing Analyst	Community Tx Admin Sober Living IMS Post-Acute Care Nursing Home Admin Patient Financial Svcs	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator Billing Analyst Coding Specialist Court Lisison	Community Tx Admin Sober Living IMS Post-Acute Care Nursing Home Admin Patient Financial Svcs Health Information Crisis	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator Billing Analyst Coding Specialist Court Liaison Executive Assistant	Community Tx Admin Sober Living IMS Post-Acute Care Nursing Home Admin Patient Financial Svcs Health Information Crisis Corporate Administration	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator Billing Analyst Coding Specialist Court Liaison Executive Assistant Payroll Specialist	Community Tx Admin Sober Living IMS Post-Acute Care Nursing Home Admin Patient Financial Svcs Health Information Crisis Corporate Administration Accounting	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator Billing Analyst Coding Specialist Court Liaison Executive Assistant Payroll Specialist Performance Improvement Specialist	Community Tx Admin Sober Living IMS Post-Acute Care Nursing Home Admin Patient Financial Svcs Health Information Crisis Corporate Administration Accounting Nursing Home Admin	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Exempt Exempt Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator Billing Analyst Coding Specialist Court Liaison Executive Assistant Payroll Specialist Parmacy Operations Specialist Pharmacy Operations Specialist Pharmacy Operations Specialist	Community Tx Admin Sober Living IMS Post-Acute Care Nursing Home Admin Patient Financial Svcs Health Information Crisis Corporate Administration Accounting Nursing Home Admin Pharmacy	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator Billing Analyst Coding Specialist Court Liaison Executive Assistant Payroll Specialist Performance Improvement Specialist Performance Improvement Specialist Quality Assurance Specialist Quality Assurance Specialist	Community Tx Admin Sober Living IMS Post-Acute Care Nursing Home Admin Patient Financial Svcs Health Information Crisis Corporate Administration Accounting Nursing Home Admin Pharmacy Community Tx Admin	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator Billing Analyst Coding Specialist Court Liaison Executive Assistant Payroll Specialist Parmacy Operations Specialist Pharmacy Operations Specialist Pharmacy Operations Specialist	Community Tx Admin Sober Living IMS Post-Acute Care Nursing Home Admin Patient Financial Svcs Health Information Crisis Corporate Administration Accounting Nursing Home Admin Pharmacy	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt																
	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator Billing Analyst Coding Specialist Court Liaison Executive Assistant Payroll Specialist Performance Improvement Specialist Performance Improvement Specialist Quality Assurance Specialist Quality Assurance Specialist	Community Tx Admin Sober Living IMS Post-Acute Care Nursing Home Admin Patient Financial Svcs Health Information Crisis Corporate Administration Accounting Nursing Home Admin Pharmacy Community Tx Admin	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt Non-Exempt																
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•	Quality Assurance Specialist Lead Sober Living Coordinator IMS Support Technician Supervisor of Life Enrichment (Remove Pine Crest Only Position) Admissions Coordinator Billing Analyst Coding Specialist Court Liaison Executive Assistant Payroll Specialist Parformance Improvement Specialist Pharmacy Operations Specialist Quality Assurance Specialist Recovery Support Coordinator Senior Administrative & Program Specialist Senior Administrative & Program Specialist	Community Tx Admin Sober Living IMS Post-Acute Care Nursing Home Admin Patient Financial Svcs Health Information Crisis Corporate Administration Accounting Nursing Home Admin Pharmacy Community Tx Admin Lakeside Recovery MMT Nursing Home Admin	Non-Exempt Non-Exempt Non-Exempt Exempt Non-Exempt																

Account Publish Discription Acco	Pay Grade	North Central Health Care Job Title	Department	Exemption Status	Step 1 90%	Step 2 92%	Step 3 94%	Step 4 96%	Step 5 98%	Step 6 100%	Step 7 101.5%	Step 8 103.0%	Step 9 104.5%	Step 10 106.0%	Step 11 107.5%	Step 12 109.0%	Step 13 110.5%	Step 14 112.0%	Step 15 113.5%	Step 16 115.0%
Marche Marche Michael Michae	8	•			\$21.73	\$22.22	\$22.70	\$23.18	\$23.67	\$24.15	\$24.51	\$24.87	\$25.23	\$25.60	\$25.96	\$26.32	\$26.68	\$27.05	\$27.41	\$27.77
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Processor Proc			Nursing Home Admin																	
Part		Administrative Assistant II-(Remove Pine Crest Only Position)	Nursing Home Admin	Non-Exempt																
Controlling Specials		Administrative Assistant II	Protective Services	Non-Exempt																
Hand Information Secondarial Hand Information Secondarial Hand Resource Cooperation List Franciscon Confidence Hand Resource Cooperation List Franciscon Confidence Plant		Billing Account Specialist	Nursing Home Admin	Non-Exempt																
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Marie National Controlled		Health Information Specialist II	Health Information	Non-Exempt																
Marie National Controlled		Health Information Specialist II	Nursing Home Admin	Non-Exempt																
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North Central Health Care - effective 1/18/2026

				Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9	Step 10	Step 11	Step 12	Step 13	Step 14	Step 15	Step 16
Pay Grade	North Central Health Care Job Title	Department	Exemption Status	90%	92%	94%	96%	98%	100%	101.5%	103.0%	104.5%	106.0%	107.5%	109.0%	110.5%	112.0%	113.5%	115.0%
6	Central Supply Clerk	Accounting	Non-Exempt	\$17.21	\$17.60	\$17.98	\$18.36	\$18.74	\$19.13	\$19.41	\$19.70	\$19.99	\$20.27	\$20.56	\$20.85	\$21.13	\$21.42	\$21.71	\$22.00
	Central Supply Coordinator (Remove Pine Crest Only Position)	Post-Acute Care	Non-Exempt																
	Crisis Technician	Crisis	Non-Exempt																
	EVS Coordinator (Remove Pine Crest Only Position)	Environmental Svcs	Non-Exempt																
	Housekeeping Coordinator	Housekeeping	Non-Exempt																
	Laundry Team Coordinator	Laundry	Non-Exempt																
	Logistics Worker	In-House Transportation	Non-Exempt																
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	Nutritional Services Dietary Clerk	Food Services	Non-Exempt																
	OWI Intake Coordinator	Patient Access Services	Non-Exempt																
	Peer Specialist	Lakeside Recovery MMT	Non-Exempt																
	Peer Specialist	Adult Crisis Stabil Facil	Non-Exempt																
	Peer Specialist	Community Tx - Adult	Non-Exempt																
	Physical Therapy Aide	Aquatic Services	Non-Exempt																
	Prior Authorization Representative (Remove Position Reallocated)	Patient Access Services	Non-Exempt																
	Registration Specialist	Patient Access Services	Non-Exempt																
	Registration Specialist	Aquatic Services	Non-Exempt																
5	Dietary Aide	Food Services	Non-Exempt	\$15.18	\$15.52	\$15.86	\$16.19	\$16.53	\$16.87	\$17.12	\$17.37	\$17.63	\$17.88	\$18.13	\$18.39	\$18.64	\$18.89	\$19.15	\$19.40
	Guest Services Representative	Volunteer Services	Non-Exempt																
	Hospitality Assistant	Post-Acute Care	Non-Exempt																
	Housekeeping Aide	Housekeeping	Non-Exempt																
	Housekeeping Aide (Remove Pine Crest Only Position)	Environmental Svcs	Non-Exempt																
	Laundry Worker	Laundry	Non-Exempt																
	Life Enrichment Aide (Remove Pine Crest Only Position)	Post-Acute Care	Non-Exempt																
	Lifeguard	Aquatic Services	Non-Exempt																
	Mailroom Clerk	Marketing & Communications	Non-Exempt																
	Medical Records Destruction Specialist	Health Information	Non-Exempt																
	Pharmacy Youth Apprentice (Remove Position Not Valid)	Pharmacy	Non-Exempt																
	Personal Care Worker	Adult Day Services	Non-Exempt																



CONTENTS

Overview
Objectives of the Program3
Pay Structure: Design & Maintenance4
Pay Structure4
Grade Levels4
Step Structure Ranges4
Structure Maintenance4
Pay Structure Increases4
Pay Administration: Step Structure System 5
Determining Pay for New Hires5
Employee Annual Pay Increases6
Recommending Pay Adjustments7
Compensation Policies & Procedures8
Responsibility for Administration8
Compensation Review of Current Position8
Pay Grades for New or Impacted Positions8
Compensation upon Promotion9
Compensation upon Lateral Transfer 10
Compensation upon Demotion10
Temporary Pay 11



OVERVIEW

The purpose of this guide is to provide rationale and direction in the establishment and administration of the Classification & Compensation Program at North Central Health Care.

As an overview, North Central Health Care has implemented a new 16-step pay structure to remain competitive in both the private and public health care sectors. Following a thorough analysis of the total rewards package, including compensation, benefits, and cross-industry competition, the step structure was designed to be competitive at the 60th percentile of the market. The pay system has the minimum set at 90% of the control point and the maximum set to 115% of the control point. These pay ranges and structures were developed through an objective process by a professional compensation consulting firm and subsequently adopted by North Central Health Care.

Compensation system design determines pay ranges based on combining principles of objective job evaluation and accurate market measurement.

Job Evaluation

The objective job evaluation process involved the application of a Point Factor Job Evaluation System using current job documentation and leadership input. Job Evaluation is a systematic method of determining the internal relationships of positions within an organization. This process involves detailed analysis of a position to determine its requirements, assigned responsibilities and influence on the organization's operations. Evaluation factors are:

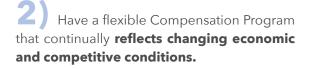
- Formal Preparation and Experience
- Decision Making (Impact)
- Thinking Challenges/Problem Solving
- Interactions and Communications
- Work Environment

Market Analysis

Market analysis was inclusive of compensation practices for similar positions at comparable organizations, as well as organizations in the competitive geographic market. This market analysis was completed using published compensation surveys and sources where the market data is provided by employers matching their information. In addition, a custom survey was utilized through the consultant's survey. The survey sources utilized through the consultant's survey library provide data that is administered on a recurring basis which ensures we can repeat the study using consistent methodology in the future.

PROGRAM OBJECTIVES

Develop and maintain a pay structure that will enable North Central Health Care to attract and retain qualified personnel.



Maintain pay relationships among positions that are **internally consistent** and by recognizing important relative differences in position responsibilities and requirements.

Establish and maintain pay levels that will compare favorably with salaries paid by other employers in North Central Health Care's employment area, for positions of similar responsibility.

Follow the principles of equal employment opportunity (EEO), basing differentials in pay solely on qualifications, position responsibilities and meeting performance expectations without regard to non-position related attributes such as race, color, religion, sex, age, national origin, marital status or any disability which does not preclude the effective performance of position accountabilities.

The Guide is not a contract and is subject to periodic revision and update as organizational circumstances dictate.









PAY STRUCTURE: Design & Maintenance

Pay Structure

To facilitate effective administration of the Program, a pay structure has been established for all employees including the Executive Director.

Grade Levels

The pay structure consists of a set of levels of responsibility, or grades. A sufficient number of grades have been established to recognize important relative differences in position responsibilities and requirements, from the lowest to the highest-level position in the structure.

Assignment of positions to grades is accomplished through the evaluation of each position and the matching of certain positions to applicable employment market rates. The placement of

positions to grades is consistent across exempt and non-exempt roles.

Step Structure Ranges

Each pay grade is assigned an appropriate Step Range, based upon market pay data for the positions in that grade. The control points for these step ranges are derived from the 60th percentile market measurement.

In the step structure, the percentage spread within the step range reflects the increasing complexity and autonomy of the roles assigned to each structure. Additionally, the range width is designed to represent a reasonable progression, with steps calculated at 2% of the control point up to the control point, and a 1.5% step progression thereafter. The pay grades have a minimum of 90% and a maximum of 115% of the control point. All pay ranges consist of 16 step increments, with step 6 representing the control point.

Structure Maintenance

The salary structures should be measured against market data approximately every three years and adjusted as necessary to ensure that competitive salary ranges are maintained. This process will also allow North Central Health Care to respond to individual benchmark positions that may be moving in the market at a faster pace than other roles. North Central Health Care may contract this review out to a professionally qualified external compensation consultant.

PAY ADMINISTRATION:Step Structure System

In terms of pay delivery for all staff, North Central Health Care has adopted a 16-step pay structure design. The steps are intended to provide a consistent pathway for employees to progress through the structure. This system ensures transparency and fairness in compensation, aligning with market standards and rewarding employees for their experience and performance. Each step increment is designed to reflect the increasing complexity and autonomy of roles, with a structured progression from the minimum to the control point and beyond.

Determining Pay for New Hires

North Central Health Care (NCHC) aims to offer competitive and equitable pay to new hires while maintaining internal consistency.

The following guidelines outline how step placement should be determined at time of hire:

General Step Placement Philosophy

For individuals who demonstrate full qualifications but have little or no on-the-job experience in the role, near the minimum is an appropriate hiring target (typically Step 1 to Step 3). Those with demonstrated experience in a "substantially comparable" role, either externally or internally, may be offered a higher step, potentially at or beyond the Control Point of Step 6 or Control Point for a tiered position, if justified and approved by Human Resources and Executive Director. Note a tiered position (I, II or III) is position within the same job grade that reflects education or certification differences.

All offers must consider internal equity. New hires with education and experience similar to existing staff should not be brought in at a higher step than those similarly situated. If a higher wage is required to secure a candidate, equity adjustments for current staff should be considered. Refer to the Market Adjustments section on page 7.

"North Central Health Care aims to offer competitive and equitable pay to new hires while maintaining internal consistency."





Pay Structure and Employee Annual Pay Increases

On an annual basis, Human Resources will share with the leadership team and Executive Committee evidence of how comparable employers are adjusting their pay structures for the same period to maintain their competitive postion. Human Resources will also annually present the Executive Committee with a recommendation for a total annual increase to be applied to employees' base compensation. This increase will be in the form of a step adjustment. The combined increase of structural adjustment and step increase will be the number that is measured and assessed each year by Human Resources through this process.

The amount of the annual pay structure increases and base compensation adjustments will be determined by a review of what comparable institutions and other competitive employers are granting as total annual increases for the same period. North Central Health Care may contract out this review to a professional qualified external compensation consultant.

Some sources of information to be utilized in making this determination may include:

- Annual published surveys (e.g., "World-at-Work"; formerly American Compensation Association, Total Rewards Consulting, Mercer, Willis Towers Watson)
- Established economic indicators, such as the Consumer Price Index (CPI)
- The financial condition of North Central Health Care and the organization's ability to fund increases in pay for the coming year.

The Executive Committee shall consider this information in determining what, if any, pay increase adjustment is necessary so North Central Health Care may maintain its competitive market position and progress employees through their pay ranges. The pay structure will be adjusted each year if the market dictates a need to adjust the pay structure. The annual increase amount for the salary structure shall be applied to the range control points. Adjustments to steps will be calculated from the new range control points. This

process is to keep pace with the external target market. The structure adjustments and the employee increase typically occur simultaneously. When approved, staff on steps will move to the next step, provided they meet performance expectations.

Employees are not to progress beyond the maximum rate of pay for their pay range. An employee at the maximum is typically eligible for any structural adjustment, maintaining their position at the range maximum. Employees paid above the maximum range may be eligible for a one-time lump sum payment at the beginning of the fiscal year equivalent to the rate of the structure adjustment as approved by the Executive Committee.

Annually, per Section IV.C.6 of the Amended and Restated Intergovernmental Agreement Establishing a Multicounty Department of Community Programs (Tri-County Agreement) "The Executive Committee shall approve all pay ranges within the organization on an annual basis" during the process described above.



Procedure for Recommending Pay Adjustments

Pay Adjustments beyond the annual step increases, but not to exceed step increases 2 steps above employees' current step, must be recommended by the Employee's Supervisor and approved through a consensus review with the Senior Leadership Team and Human Resources. HR is responsible for ensuring that all adjustments are in compliance with this policy. Employees should be promptly informed of their pay increases. Retroactive pay adjustment recommendations will not be considered except under highly extenuating circumstances and with the approval of HR and Senior Leadership.

Market Adjustments

North Central Health Care's Compensation Program has provided a methodology for determining pay rates that recognize not only the worth of positions in the market, but also the worth of positions within the organization. **Market adjustments should generally be considered in the future under only one or more of the following circumstances:**

- North Central Health Care has documented problems recruiting and/or selecting employees within the assigned pay range (for example, a position is advertised several times resulting in few or no qualified applicants) and the hiring manager/HR has exhausted all proactive avenues for recruitment.
- North Central Health Care has an unacceptable rate of turnover in a position and exit interview information indicates pay is a significant issue.
- An ad-hoc market measurement conducted by a third-party compensation consultant shows the control point of the pay range is more than 10% lower than the market target rate of pay shown for the position in the market analysis.

In situations where the market demands higher pay rates, at North Central Health Care's discretion, one of two actions will be available:

- Adjust the employee's pay upward in the existing pay range (move to a higher step)
- Move the position into a higher pay range (grade adjustment), temporarily, and only while market conditions are still causing the problem. Consider an individual adjustment to current incumbents in the new pay range.

North Central Health Care will utilize the first option whenever possible. However, when North Central Health Care utilizes the second option, the appropriate pay range will be determined by Human Resources (with consultation from a compensation expert, if possible), and the position will be placed in a higher range. Further, all documents and communications are retained to reflect the temporary assignment of these positions to a higher pay range. Human Resources will check market conditions annually, and if conditions change, these positions will move back into their initially assigned pay range.

North Central Health Care recognizes that the allowance of market adjustments does disrupt some of the internal equity in its Compensation Program because there are positions that are of higher internal value that may be paid less than a position of lower internal value. This is why North Central Health Care intends to utilize market adjustments sparingly.

All market adjustments must receive approval from the Executive Committee. If a position under a market adjustment is reclassified to a lower pay range, the procedure for Compensation upon Involuntary Demotion (see later section) will apply in regard to pay for the affected employee.



Policies & Procedures

Responsibility for Administration

The North Central Health Care Classification & Compensation Program will be coordinated under the direction of Human Resources with the approval of the Executive Director.



Requests for Compensation Review of Current Positions

Requests for a compensation and pay grade assignment review of a current position whose main responsibilities and functionality have gradually evolved with time may be made once per year with approval from the appropriate leadership team member. A current job description with redline updates and written input from the manager will be needed to conduct the review. The updated documentation must be submitted through the annual budget process. HR, in collaboration with an external compensation consultant, will review the changes in job documentation to determine if a grade change is warranted. If a change in grade is necessary, HR and external consultants will recommend an individual adjustment for the current incumbent to be applied with the annual increases at the start of the following fiscal year.

Off-cycle requests may be made by a leadership team member with approval from Human Resources and the Executive Director, based on business demand but should be limited. Proactive, planned reviews will prevent frequent off-cycle requests.

Pay Grade Assignment for New Positions or Positions Impacted by Significant Organizational Change

When new positions are created or existing positions undergo substantial change which can be due to addition or reduction of job duties due to employee attrition, or significant process/job change, North Central Health Care has established a process to review and assign the new/changed position to the pay structures. In these situations, with the input and analysis of the compensation consultant, the organization will utilize the Job Evaluation and/or Market Analysis process to add the new/changed position to the Compensation Plan and assign it to a pay range contained in the Plan. Considerations for range placement will include internal consistency and market considerations.

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 only if the reclassification results in the allocation of FTEs to other departments and involves a substantial change in job duties or places the position in a higher pay grade per Section IV.C.7 of the Tri-County Agreement.



Compensation Upon Promotion

A promotion is defined as a movement to a position that has a higher pay grade than the present grade assigned to an employee. A pay adjustment may be made in connection with promotion, even though the promoted employee may already be at or above the minimum rate of the new pay range. Such an adjustment would normally be made at the time of promotion or, under very rare circumstances, within a reasonable period (six months, for example) if there is a question as to the new incumbent's qualification for the position.

The adjustment amount should consider:

- The pay range for the new position.
- The time elapsed since the employees' last increase.
- The employee's qualifications and experience relative to those required for the new position.
- The employee's current pay relative to the salaries of other incumbents in the new position.
- Salaries of employees to be supervised, if any.

Wage adjustments will be determined on a case-by-case basis upon a thorough review of the specific circumstances. In no case will a promotional increase allow the employee to earn a pay rate above the established maximum of the new pay range. Promotional increases are separate from the annual pay increase cycle.

Consideration must be given to the current compensation of other employees in the same classification (if this is applicable) to maintain internal pay equity.

Promotional increases that exceed these guidelines will need the approval of Human Resources and the Executive Director.







Compensation Upon Lateral Transfer

Employees who transfer to a new position with the same pay grade as their old position will typically not receive a base pay adjustment.

Compensation Upon Demotion

A demotion is a transfer to a position with a lower pay grade than the employee's previous role. When an employee is demoted, they will receive a decrease in pay, the amount of which is to be determined given the facts and individual circumstances. In no case shall the employee compensation ratio in their new pay range assignment exceed that of the old pay range. Compensation ratio is defined as the percentage figure determined by dividing the employee's current base pay by the pay range control point.





Temporary Pay

Due to extenuating circumstances, staff will occasionally be asked to cover for others who are on leave or while filling vacancies. Managers should work with HR to determine when temporary pay is appropriate. Human Resources will apply an objective approach to determine whether temporary pay is warranted.

There are two situations that have been identified as warranting temporary pay. The first situation is related to the workload of the individual employee. The workload temporary pay is meant to provide employees with recognition for the additional hours required to complete their normal tasks. This increase in worktime demand should be significant and ongoing. This increase in workload must be directly related to vacancies on the team.

WORKLOAD:

Non-Exempt: Non-Exempt staff covering for others in a similar role to their own should be compensated for the additional workload through the allowance of overtime.

Exempt: Exempt staff that are experiencing a significant and ongoing increase in required work hours will receive a bi-weekly stipend. The amount of the stipend will be determined by HR and Senior Leadership. This bi-weekly stipend will be paid while the required increased hours are transpiring. The stipend will be reviewed quarterly by the manager and HR. When the increase in hours is no longer required, the employee's pay stipend will end.

The second situation that qualifies for temporary pay is when an employee takes on duties from a position with a higher pay grade.

SCOPE OF RESPONSIBILITY:

Non-Exempt: If a non-exempt employee is asked to take on additional responsibilities of a role at a higher pay grade than what is normally expected from their role, a temporary pay differential should be applied to the employee. The differential amount will be determined by HR & Senior Leadership. This differential would be paid for all the hours worked while the employee is asked to take on these additional tasks. When those tasks are removed from the employee's scope of responsibility, the employee's pay differential will end. The differential will be reviewed quarterly by the manager and HR.

Exempt: An exempt employee asked to take on additional responsibilities of a higher pay grade than what is normally expected from their role will be compensated with a bi-weekly stipend. The amount of the stipend will be determined by HR and Senior Leadership. When these higher-level tasks are removed from the employee's scope of responsibility, the monthly stipend will end. The stipend will be reviewed quarterly by the manager and HR.

If it is decided that the higher-level tasks will not be removed from the employee's scope of responsibility, the position description should be updated, and the role should be re-evaluated for appropriate grade placement. The temporary pay will end, and any compensation adjustment will follow the existing process for reclassifications.



Questions regarding this guide?

Contact Human Resources.



Questions regarding this guide?

Contact Human Resources.



TO: Executive Committee

FROM: Marnie Bredlau, Senior Director of Human Resources

DATE: 12/2/2025

SUBJECT: Add of a Float Holiday

Background

- North Central Health Care currently offers nine (9) paid holidays to eligible employees. To enhance overall competitiveness, flexibility, and employee well-being, it is recommended that NCHC add one (1) additional paid holiday in the form of a Float Holiday, increasing the total number of paid holidays to ten (10).
- Marathon County currently has 9 holidays and in 2026 will have 10 holidays; Lincoln County currently has 10 holidays; Langlade County currently has 11 holidays

Discussion/Analysis

- Our leadership group (Directors and Senior Leadership) discussed both options of adding a designated Spring Holiday or implementing a Float Holiday. We concluded that a Float Holiday would deliver the greatest value to our staff while also best supporting our operational needs.
- Given that North Central Health Care operates 24/7 programs, a Float Holiday provides greater flexibility than a fixed-date holiday. It allows employees to use the time in a way that aligns with their personal needs, while leaders can continue to manage appropriate staffing levels across departments and shifts.
- This approach supports employee choice, strengthens work-life balance, and allows us to maintain consistent service delivery without disruption to critical operations.
- The Float Holiday would be administered in a manner similar to requesting PTO, with established guidelines to ensure consistent and fair use across the organization.

Recommendation

- It is recommended that North Central Health Care add one additional paid holiday in the form of a **Float Holiday**, increasing the total number of paid holidays from nine (9) to ten (10).



MEMORANDUM

To: Executive Committee

From: Vicki Tylka Date: 12.2.25

Subject: Behavioral Health Professional Supervisor New Position Request

Purpose

NCHC employs 24/7 staff in our acute care services programs: Youth and Adult Crisis Stabilization Facilities, Youth and Adult Behavioral Health Hospitals, and Lakeside Recovery. A key position providing daily care to patients and residents is our behavioral health professional. Operational duties are similar to those of a CNA and mental health technician. In addition, our 24/7 crisis center is staffed by Crisis Professionals with oversight of an operational supervisor and clinician.

Our current staffing model is in line with our regulations; however, it does not provide regular management support and oversight during after-hours and weekend shifts. A change in the staffing model will enhance quality.

Position Overview

- Title: Behavioral Health Professional Supervisor
- Program: Acute Care Services
- Reports To: Assistant Director of Acute Care Operations
- Employment Type: Hourly
- FTE: 2.0
- New or Replacement: New

Justification

The Executive Committee has previously approved the creation of 2.0 FTE for a new RN supervisor position for off-hour shifts to improve continuous quality initiatives. The positions have proven to be difficult to fill. The ideal plan is to have all off hours covered by one supervisor, whether it be a nurse or BHP supervisor. Therefore, the request is to create a new position that will fill the following duties:

The Behavioral Health Professional (BHP) Supervisor is a lead role within Acute Care Services responsible for providing on-site leadership, guidance, and operational support to BHPs across all units providing direct care and services for individuals needing support, care, and treatment for mental health and/or substance use concerns. The BHP Supervisor fosters a safe, trauma-informed care environment by modeling best practices, supporting staff during high-risk



interventions, and ensuring adherence to regulatory and organizational standards. In addition to oversight responsibilities, the BHP Supervisor may work regular BHP shifts and provides direct coverage when open shifts or emergent staffing needs arise.

Budget Impact

- Net Impact: No additional funding requested as we would pause on filling the RN PM Supervisor positions.
- Grade Placement: Grade level 10 \$183,459 with benefits

Funding Source:

This position would be funded through holding on the recruitment of two RN PM Supervisor positions.

Organizational Impact

The addition of these positions will increase the 24/7 operations performance:

- Efficiency: Observe and address gaps and needs in real time
- Compliance & Risk Reduction: Increased oversight and support to ensure compliance and safe and effective care and supervisor.
- Quality: Improve the overall operations of the program related to quality and safe patient and resident care.
- Staff Retention: Provide additional employee support and resources, reduce the frequency of calls for on call staff.

Recommendation

It is recommended that the Executive Committee approve the creation of 2.0 FTE Behavioral Health Supervisor positions to support the operations of Acute Care Services 24/7 programming.

This role will exceed minimal required staffing in the programs, and the investment will enhance our quality of care and compliance and quality metrics.



MEMORANDUM

To: Executive Committee

From: Vicki Tylka Date: 12.2.25

Subject: Clinical Manager for Acute Care Services

Purpose

There is a documented shortage of licensed therapeutic clinicians in Wisconsin and increasingly in central Wisconsin. NCHC has been challenged with hiring the required number of clinical supervisors needed to oversee clinical programming, decision making, and provision of clinical supervision of staff as required by regulation. Recruitment is further challenged given the provision of 24/7 services in Acute Care programs. NCHC's strategy for recruitment must include resources to support our own internal advancement of clinicians. This requires additional management support to supervise clinicians in addition to regulatorily required supervision of staff. In addition, clinical management is required to provide oversight of programs, such as individual and group therapy and approval of crisis assessment notes for all crisis staff.

For all 7 programs: two hospitals, two crisis stabilization facilities, a residential treatment program, crisis center, and sober living programs, NCHC currently only has two clinical managers (one is deployed) and one assistant director who continues to serve in part as a clinical manager. The position request is to fill an identified gap in clinical leadership initially focusing on existing gaps in youth services and substance use treatment at NCHC.

Position Overview

- Title: Clinical manager for Acute Care Services
- Program: Acute Care Services, primarily Adult Behavioral Health Hospital
- Reports To: Assistant Director of Acute Care Clinical Services
- Employment Type: Salary
- FTE: 1.0
- New or Replacement: New FTE of existing position description



Justification

NCHC has been successful in recruiting two child and adolescent psychiatrists for the youth behavioral health hospital and for the outpatient clinic. With those specialties, and the planned enhancement of quality programming in our youth settings, additional clinical oversight is needed. In addition to the regulations for required programming by specified credentialed clinical staff, NCHC has embarked on the inclusion of specialized curriculum for youth which will sustain and improve our overall quality of care and census.

NCHC's census for all programs has increased exponentially since 2023, however, clinical oversight has not increased. It is important to note that although clinical managers have primary assignments, they all cover all programs as necessary. With frequent vacancies and approved leaves within the small team of clinical managers, the new position will be flexible as needed. NCHC has evaluated our need to pivot quickly in response to changing priorities and capacities within our acute care services. To ensure quality outcomes, we need to invest in clinical leadership for our programs.

Budget Impact

- Net Impact: The net impact will result in an overall savings of \$21,547
- Grade Placement: Level 16 \$141,426 Annual salary with benefits

Funding Source:

The position can be funded through abolishment of two currently vacant positions:

- Social Worker- Float 1.0 FTE Grade 11 Annual salary with benefits = \$98,588
- Crisis Professional .5 FTE Grade 9- Annual salary with benefits = \$28,384
- Decrease in contracted physician contracts \$36,000

Organizational Impact

Adding a clinical manager position will have a broad and lasting impact on organizational performance:

- Compliance & Risk Reduction: An additional clinical manager will ensure increased oversight of our clinical staff resulting in improved compliance and lower risk reduction. This includes ensuring that required clinical hours of supervision can be met to maintain licensure of staff and programs.
- Quality: Additional oversight supports the clinical programming enhancements planned and the provision of required clinical services within programs
- Efficiency and recruitment: Supports "growing our own" clinicians
- Operational Resilience: An additional manager will add to the pool of on-call responders, decreasing burnout and increasing quality response.

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• Staff Retention: Staff will be better supported and guided in their practice and increased capacity will ensure proper training and work satisfaction.

Recommendation

It is recommended that the Executive Committee approve the creation of a 1.0 FTE Clinical Manager for Acute Care Services position.

This role will be flexible in focus especially initially and then likely focus on the Adult Behavioral Hospital – one of our largest programs with our most acute care needs.

This investment will ensure NCHC meets regulatory compliance and ensures quality of care with the growth of census in our programs.

Positions For Executive Committee Approval

Position Title	Program	Senior Leader	Location	FTE	Budgeted	Funding Source	Total Cost of Position	Type of Position	Job Grade	Additional Information
Clinical Manager for Acute Care Services	Acute Care Services	Vicki Tylka	Wausau	1.0	No	This position can be funded through abolishment of two currently vacant positions: Social Worker & Crisis Professional; In addition a decrease in contracted physician contract	Cost Savings \$21,547	Permanent	Current Grade - 16	Adding a clinical manager position will have a broad and lasting impact on organizational performance: Compliance & Risk Reduction: An additional clinical manager will ensure increased oversight of our clinical staff resulting in improved compliance and lower risk reduction. This includes ensuring that required clinical hours of supervision can be met to maintain licensure of staff and programs. Quality: Additional oversight supports the clinical programming enhancements planned and the provision of required clinical services within programs. Efficiency and recruitment: Supports "growing our own" clinicians. Operational Resilience: An additional manager will add to the pool of on-call responders, decreasing burnout and increasing quality response. Staff Retention: Staff will be better supported and guided in their practice and increased capacity will ensure proper training and work satisfaction.
Behavioral Health Professional Supervisor	Acute Care Services	Vicki Tylka	Wausau	2.0	No	This position would be founded through holding the recruitment on the 2.0 FTE PM Nurse Supervisor positions	None	Permanent	Current Grade - 10	The addition of these positions will increase the 24/7 operations performance: Efficiency: Observe and address gaps and needs in real time. Compliance & Risk Reduction: Increased oversight and support to ensure compliance and safe and effective care and supervisor. Quality: Improve the overall operations of the program related to quality and safe patient and resident care. Staff Retention: Provide additional employee support and resources, reduce the frequency of calls for on call staff.



TO: Executive Committee

FROM: Jason Hake, Acting Executive Director

DATE: 12/2/25

SUBJECT: Nursing Home Operations Committee

Background

At the request of leadership, Corporation Counsel reviewed federal and state regulatory requirements for skilled nursing facility governance. Counsel concluded that the current Nursing Home Operations Committee structure does not meet the statutory definition of a governing body:

"The current structure of the Nursing Home Operations Committee has not been compliant with the required structure of an oversight body as required under state and federal statutes... This is not to say that we are not compliant overall, as we may have different bodies carrying out these responsibilities; it's just to say that the Nursing Home Operations Committee in its current form is more a formality than an actual oversight body."

Regulatory Requirements and Compliance Alignment

This section integrates the legal and regulatory requirements provided by Corporation Counsel and how North Central Health Care either already satisfies them or will satisfy them under the recommended structure.

Wisconsin Requirements

Wisconsin DHS Chapter 132 outlines Nursing Home regulations for the State of Wisconsin. Under DHS 132.46, titled "Quality Assessment and Assurance", the statute outlines the following requirements for Nursing Home oversight:

- (1) Committee maintenance and composition. A facility shall maintain a quality assessment and assurance committee for the purpose of identifying and addressing quality of care issues. The committee shall be comprised of at least all the following individuals:
 - (a) The director of nursing services.
 - (b) The medical director or a physician designated by the facility.
 - (c) At least 3 other members of the facility's staff.
 - (2) Committee responsibilities. The quality assessment and assurance committee shall do all of the following:
 - (a) Meet at least quarterly to identify quality of care issues with respect to which quality assessment and assurance activities are necessary.
 - (b) Identify, develop and implement appropriate plans of action to correct identified quality deficiencies.



Current Compliance

Mount View's existing QAPI Committee fully satisfies these state-level requirements. It includes the required membership, meets quarterly, evaluates quality concerns, and ensures follow-up and corrective planning. Any future governance adjustments would retain the QAPI Committee as the facility's internal quality oversight body, with reporting lines aligned to whichever entity is formally designated as the governing authority.

Federal Requirements

Because NCHC, and Mount View, receive federal Medicare/Medicaid funding, in addition to Wisconsin requirements, we must also be compliant with federal regulations and more specifically 42 CFR 483 titled "Requirements for State and Long-Term Care Facilities". Under Section 42 CFR 483.70(d), Subpart B – which focuses on requirements for long term care facilities, the oversight requirements are as follows:

(d) Governing body.

- (1) The facility must have a governing body, or designated persons functioning as a governing body, that is legally responsible for establishing and implementing policies regarding the management and operation of the facility; and
- (2) The governing body appoints the administrator who is—
 - (i) Licensed by the State, where licensing is required;
 - (ii) Responsible for management of the facility; and
 - (iii) Reports to and is accountable to the governing body.
- (3) The governing body is responsible and accountable for the QAPI program, in accordance with § 483.75(f).

Recommended Compliance

Federal regulations require the facility to identify a governing body, or designated persons functioning as a governing body, that holds legal responsibility and accountability for facility operations. A compliant structure would require a clearly identified entity to fulfill this role. Under the approach being considered, the Executive Committee could be designated as the governing body for Mount View Care Center, with operational responsibilities carried out by the Nursing Home Administrator and oversight retained by the Executive Director. This model is consistent with CMS's allowance for "designated persons" to function as a governing body.

Additionally, as outlined by Section 483.72, titled "Quality Assurance and Performance Improvement" the oversight requirement for quality is as follows:

- (f) **Governance and leadership**. The governing body and/or executive leadership (or organized group or individual who assumes full legal authority and responsibility for operation of the facility) is responsible and accountable for ensuring that
 - (1) An ongoing QAPI program is defined, implemented, and maintained and addresses identified priorities.
 - (2) The QAPI program is sustained during transitions in leadership and staffing;
 - (3) The QAPI program is adequately resourced, including ensuring staff time, equipment, and technical training as needed;

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- (4) The QAPI program identifies and prioritizes problems and opportunities that reflect organizational process, functions, and services provided to residents based on performance indicator data, and resident and staff input, and other information.
- (5) Corrective actions address gaps in systems, and are evaluated for effectiveness; and
- (6) Clear expectations are set around safety, quality, rights, choice, and respect.

(g) Quality assessment and assurance.

- (1) A facility must maintain a quality assessment and assurance committee consisting at a minimum of:
 - (i) The director of nursing services;
 - (ii) The Medical Director or his or her designee;
 - a. At least three other members of the facility's staff, at least one of who must be the administrator, owner, a board member or other individual in a leadership role; and
 - b. The infection preventionist.
- (2) The quality assessment and assurance committee reports to the facility's governing body, or designated person(s) functioning as a governing body regarding its activities, including implementation of the QAPI program required under paragraphs (a) through (e) of this section. The committee must:
 - (i) Meet at least quarterly and as needed to coordinate and evaluate activities under the QAPI program, such as identifying issues with respect to which quality assessment and assurance activities, including performance improvement projects required under the QAPI program, are necessary; and
 - (ii) Develop and implement appropriate plans of action to correct identified quality deficiencies; and
 - (iii) Regularly review and analyze data, including data collected under the QAPI program and data resulting from drug regimen reviews, and act on available data to make improvements.

Recommended Compliance

Federal regulations also require that the QAPI Committee report to the facility's identified governing body or designated persons functioning as that body. Any governance structure adopted would therefore need to establish a reporting relationship between the QAPI Committee and the designated governing authority. Routing quarterly QAPI reports to the entity identified as the governing body would fulfill this requirement and ensure a compliant oversight relationship.



Recommendation

That the Executive Committee approve dissolving the Nursing Home Operations Committee and designate the Executive Committee as the Governing Body for Mount View Care Center pursuant to 42 CFR § 483.70(d) and DHS 132.46, with delegation of authority as follows:

- Operational responsibilities for the day-to-day management of the facility are carried out by the Nursing Home Administrator; and
- Oversight responsibilities are retained by the Executive Director, who is accountable to the Executive Committee

Nursing Home Management Agreement (1998)

The Nursing Home Management Agreement between Marathon County and North Central Community Services Program (NCCSP) clearly outlines NCCSP's responsibilities for operating Mount View Care Center and does not create or require a Nursing Home Operations Committee. The Agreement expressly designates NCCSP as the entity responsible for operating the nursing home facility. Specifically, Section 3 of the Agreement states that "NCCSP will provide management and operating services for the FACILITY" and enumerates those responsibilities, including care and services, rates and collections, personnel management, maintenance and capital expenditures, utilities and supplies, and regulatory compliance.

Additionally, the Agreement assigns NCCSP responsibility for appointing and supervising the Administrator. On page 1, under Section 2 ("Designation of Administrator/Manager"), the Agreement states that "The COUNTY has designated NCCSP as administrator and manager of its county nursing home program provided through the FACILITY. NCCSP accepts that designation and agrees to manage the entire operation of the COUNTY'S nursing home FACILITY." This language affirms NCCSP's delegated authority for facility operations and supervision of the Administrator.

The Agreement contains no reference to a Nursing Home Operations Committee and provides no governance authority to any such body. All operational authority is vested in NCCSP, which acts on behalf of the County under the terms of the Agreement. Therefore, designating the Executive Committee as the Governing Body for Mount View Care Center is fully consistent with the structure, authority, and operational responsibilities established in the 1998 Management Agreement.



Tri-County Agreement

The Tri-County Agreement contains no reference to a Nursing Home Operations Committee, nor does it require the creation of any committee relating specifically to nursing home governance or operations. Article III ("Purpose") and Article V ("North Central Community Services Program Board") outline all governance bodies contemplated by the Agreement, and none include or imply a Nursing Home Operations Committee.

Article V further clarifies that the Board is the policy-making and oversight authority, stating that the Board "shall exercise powers and duties in a manner consistent with such role" and that it retains "full discretion as it pertains to the extent that it receives advice from the committees" (p. 11). The Agreement also provides that "The NCCSP Board may create a committee comprised of residents of the Counties to advise it when necessary" (Art. V, §1(a), p. 11), confirming that committee creation is permissive rather than mandatory.

Given these provisions, designating the Executive Committee as the governing body for Mount View Care Center is consistent with the Tri-County Agreement. Because the Agreement neither requires nor references a Nursing Home Operations Committee, dissolving that committee and formalizing the Executive Committee's role in facility governance aligns the organization's structure with both the Agreement and federal long-term-care governance requirements.



To: Executive Committee

From: Jason Hake, Acting Executive Director

Date: 12/2/25

Subject: Adult Day Services – Program Sustainability and Funding Loss

Purpose

The purpose of this memo is to provide the Executive Committee with an update on the financial outlook of Adult Day Services and to seek the Committee's guidance to continue evaluating the program's long-term sustainability in light of recent funding changes.

Background

In recent communication from one of our Managed Care Organization (MCO) partners, we were informed that Adult Day Services would no longer be authorized at current levels because the MCO believes these supports should instead be provided within the Adult Family Home (AFH) setting. The MCO specifically cited "Community Integration" requirements within AFH contracts, noting that AFH providers are responsible for planning activities, supporting social engagement, and facilitating participation in cultural, religious, political, social, and intellectual activities within the home and community. This interpretation stating that community integration is already included in the AFH rate was the basis for their decision to reduce ADS authorizations.

Initial estimates expect a revenue reduction totaling approximately \$60,000 annually, which reflects a best-case scenario. This loss has required a thorough review of the program's long-term sustainability and our ability to maintain service quality without compromising other critical areas.

Adult Day Services in both Lincoln and Marathon Counties were previously discontinued for similar reasons including declining funding and a misalignment with the long-term desired future state of our regional human-services system.

Strategic Alignment Considerations

As the Committee is aware, our collective future-state vision outlines the shared approach between North Central Health Care and the Marathon, Lincoln, and Langlade County Departments of Social Services:



"North Central Health Care and Marathon, Lincoln, and Langlade County Departments of Social Services work seamlessly together in delivering human services to vulnerable individuals in our communities. Together we provide services and treatment that are focused on supporting individuals in the least restrictive setting in the community.

Target population: mental health and substance use disorder, child welfare, adult protective services, and the criminal justice system.

- This positively impacts the work of our partners: law enforcement, the courts, schools, and our medical providers.
- Community-focused services are the optimal models for successful outcomes for those we serve, are cost-effective, and are also in the best interest of all residents of our counties."

Although the program provides meaningful social and daily-living support for participants, the oversight required to operate ADS falls outside our primary service lines. As a result, staff time and administrative resources dedicated to ADS reduce the capacity available for programs that align directly with county priorities and the collaborative system model.

Financial Impact

The reduction in MCO funding comes at a time when NCHC is experiencing broader financial pressures. Federal and state reimbursement changes, projected declines in acute-care revenue, and rising operational costs are creating a more constrained environment for all programs.

Given these pressures, our ability to support services that do not have stable funding becomes increasingly limited. As we assess the future of ADS, we need to understand how continued deficits in this program may affect our capacity to maintain core mission and statutory services.

We also anticipate that our remaining MCO partner may adopt a similar authorization approach, which could further reduce funding and affect the long-term viability of ADS.

Request of the Committee

At this time, I am seeking the Committee's support to continue our careful review of the program's long-term sustainability in light of the revenue loss. As part of this work, we will evaluate all possibilities, including the potential discontinuation of Adult Day Services. Once this analysis is completed, we will bring back a formal recommendation for the Committee's review.