

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:

Wednesday, January 14, 2026, 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=mee70660ae6de3984787e90b27c863011>

Meeting number: 1-408-418-9388 **Access Code:** 2493 212 2269 **Password:** 1234

AGENDA

1. Call to Order
2. Public Comment for Matters Appearing on the Agenda (Limited to 15 Minutes)
3. Approval of December 2, 2025, Executive Committee Meeting Minutes
4. Educational Presentations, Committee Discussion, and Organizational Updates
 - a. Financial Update – J. Hake
 - b. Medical Clearance Update – V. Tylka
5. Discussion and Possible Action
 - a. ACTION: Approval of Clinical Coordinator – V. Tylka
 - b. ACTION: Nursing Home Operations Committee – J. Hake
6. Closed Session
 - a. Motion to go into Closed Session (Roll Call Vote Suggested) Pursuant to Wis. Stat. ss. 19.85(1) (g), for the purpose conferring with counsel with respect to litigation NCHC could become, or is likely to be, involved in, to wit: Kraegenbrink Notice of Claim
 - 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, February 25, 2026, 1:00 p.m., NCHC Eagle Board Room
8. Adjournment

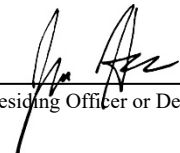
Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call the Administrative Office at 715-848-4405. For TDD telephone service call 715-845-4928.

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: 01/08/2026 TIME: 3:00 PM BY: K. Barbier



Presiding Officer or Designee

NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

December 02, 2025

1:00 p.m.

North Central Health Care

Present: X Kurt Gibbs X Renee Krueger
X Lance Leonhard X_(WebEx) Robin Stowe

Staff Present: Gary Olsen, Jason Hake, Vicki Tylka, Marnie Bredlau, Ben Peterson,
Kari Oliva_(WebEx)

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

October 29, 2025 and November 20, 2025 Executive Committee Minutes

- **Motion**/second, Krueger/Leonhard, to approve the October 29, 2025 and November 20, 2025 Executive Committee meeting minutes. Motion carried.

Financial Update

- Mr. Hake provided an overview of the October financials highlighting a net income of \$207,433. Cash will decrease with the \$2.5 million payment to Marathon County in December; however, the CCS reconciliation payment is expected in late December/early January which should help offset that payment. Notification of rate changes was received including a decrease of 2.77% impacting the adult hospital rates resulting in a potential for \$538,000 less than received in 2025 provided we maintain our budgeted census. The State also notified us that they are making changes in how we can bill for stabilization services. Health insurance saw a loss in October for the first time this year.

2026 Meeting Schedule

- The draft 2026 meeting schedule was provided.
- The Committee moved the January meeting from the 28th to the 14th.

2026 Fee Schedule

- Ms. Oliva provided a review of the proposed 2026 fee schedule.
- **Motion**/second, Leonhard/Stowe, to approve the 2026 fee schedule as submitted. Motion carried.

Grade Order List

- Ms. Bredlau reviewed the proposed updated grade order list. This is the annual compensation review and includes a market adjustment of 1.25% applied to all job grades and steps as approved during the budget process. Fifteen job titles would be removed due to positions exclusive to Pine Crest Nursing Home, which we no longer manage, and positions that have been eliminated through reorganization or program closure. Included is a request for nine positions to be elevated after reevaluation by Total Rewards Consulting. Also requested is to apply these changes on the January 18, 2026 payroll rather than waiting until later in the year as done in previous years. This would help offset higher costs in health insurance premiums and a WRS increase both effective 1/1/26.
- **Motion**/second, Krueger/Leonhard, to approve the proposed wage scale effective on the 1/18/2026 payroll. Motion carried.

Compensation Administration Guide

- The updated Compensation Administration Guide was provided. Ms. Bredlau reviewed the changes to Compensation Upon Demotion and Temporary Pay (pages 10 and 11 of Guide).
- No action necessary. Committee approved the changes at the October 29 meeting and requested the updated document be provided.

Additional Holiday

- Mr. Bredlau provided an overview of the request for an additional holiday as provided in the memo included in the packet.
- **Motion**/second, Krueger/Leonhard, to approve the addition of a Float Holiday thereby increasing the number of holidays from 9 to 10. Motion carried.

Behavioral Health Professional Supervisor Position Request

- Ms. Tylka provided an overview of the position request for a Behavioral Health Professional Supervisor as outlined in the memo provided in the packet.
- **Motion**/second, Leonhard/Krueger, to approve the request for the Behavioral Health Professional Supervisor position as presented. Motion carried.

Clinical Manager for Acute Care Services

- Ms. Tylka provided an overview of the position request for a Clinical Manager for Acute Care Services as outlined in the memo provided in the packet.
- **Motion**/second, Krueger/Leonhard, to approve the request for the 1.0 FTE Clinical Manager for Acute Care Services with the decrease of the 1.0 FTE Social Worker Float position, the .5 FTE Crisis Professional position, and the decrease in the contractual physician position by \$36,000. Motion carried.

Nursing Home Operations Committee

- Mr. Hake stated that additional information has been brought forward which needs further review and consideration by Corporation Counsel before making any changes to the oversight responsibilities of Mount View Care Center, therefore additional discussion and possible action will be moved to the January meeting.

Long-term Sustainability of the Adult Day Services-Langlade County Due to Decreased Funding

- As detailed in the memo in the meeting packet, Mr. Hake provided an overview of the program and financial impact. Administration will continue to review the program's long-term sustainability and provide updates to the committee.

Closed Session

- Mr. Desmond explained that the rationale for a closed session is that the discussion could have reputational effects on the persons being discussed.
- **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. Mr. Olsen and Mr. Hake remained in closed session. Motion carried. Meeting convened in closed session at 1:57 p.m.
- **Motion**/second, Stowe/Leonhard, to return to open session at 2:20 p.m. Motion carried.
- Possible announcements and/or action regarding closed session items
 - Staff will work on the items discussed in closed session.

Adjournment

- **Motion**/second, Krueger/Leonhard, to adjourn the meeting at 2:22 p.m. Motion carried.

Minutes prepared by Debbie Osowski, Senior Executive Assistant

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

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
BEHAVIORAL HEALTH SERVICES								
Adult Behavioral Health Hospital	767,540	667,513	100,027	542,072	492,385	(49,687)	225,469	50,341
Adult Crisis Stabilization Facility	252,120	203,299	48,821	188,206	164,136	(24,070)	63,914	24,751
Lakeside Recovery MMT	96,482	127,935	(31,453)	146,712	131,311	(15,401)	(50,230)	(46,854)
Youth Behavioral Health Hospital	228,005	273,930	(45,925)	362,423	314,065	(48,358)	(134,418)	(94,283)
Youth Crisis Stabilization Facility	79,286	126,847	(47,561)	114,296	109,340	(4,956)	(35,010)	(52,516)
Contracted Services (Out of County Placements)	-	-	-	120,089	153,778	33,689	(120,089)	33,689
Crisis Services	243,760	250,205	(6,444)	217,253	242,262	25,008	26,507	18,564
Psychiatry Residency	7,934	20,171	(12,236)	(40,371)	43,310	83,681	48,305	71,445
	1,675,129	1,669,899	5,229	1,650,681	1,650,587	(94)	24,448	5,135
COMMUNITY SERVICES								
Outpatient Services (Marathon)	492,082	493,727	(1,645)	509,043	532,739	23,697	(16,960)	22,052
Outpatient Services (Lincoln)	107,225	89,548	17,677	74,365	79,192	4,827	32,860	22,504
Outpatient Services (Langlade)	113,794	79,577	34,217	67,849	65,655	(2,194)	45,945	32,023
Community Treatment Adult (Marathon)	557,300	491,794	65,506	529,747	581,271	51,523	27,553	117,029
Community Treatment Adult (Lincoln)	69,556	74,794	(5,238)	59,741	82,177	22,436	9,815	17,199
Community Treatment Adult (Langlade)	38,279	28,560	9,719	47,556	40,522	(7,033)	(9,276)	2,686
Community Treatment Youth (Marathon)	565,365	549,475	15,890	426,720	593,617	166,897	138,645	182,787
Community Treatment Youth (Lincoln)	190,461	157,638	32,823	172,021	169,227	(2,794)	18,440	30,029
Community Treatment Youth (Langlade)	130,363	113,267	17,096	109,710	127,926	18,216	20,653	35,312
Hope House (Sober Living Marathon)	4,059	6,559	(2,499)	6,552	8,895	2,343	(2,493)	(157)
Sober Living (Langlade)	5,113	3,231	1,882	11,371	6,125	(5,246)	(6,258)	(3,364)
Adult Protective Services	73,277	69,680	3,597	84,307	73,408	(10,899)	(11,030)	(7,302)
Jail Meals (Marathon)	-	-	-	-	-	-	-	-
	2,346,876	2,157,850	189,026	2,098,982	2,360,754	261,773	247,894	450,798
COMMUNITY LIVING								
Day Services (Langlade)	16,662	25,254	(8,592)	24,590	25,034	444	(7,927)	(8,147)
Supportive Employment Program	-	22,926	(22,926)	97	26,417	26,320	(97)	3,394
	16,662	48,180	(31,517)	24,687	51,451	26,765	(8,025)	(4,753)
NURSING HOMES								
Mount View Care Center	2,243,599	2,080,135	163,464	1,968,032	1,876,327	(91,705)	275,567	71,759
Pine Crest Nursing Home	36,958	1,245,062	(1,208,103)	65,699	1,202,118	1,136,419	(28,741)	(71,685)
	2,280,557	3,325,197	(1,044,640)	2,033,731	3,078,445	1,044,714	246,826	74
Pharmacy	539,517	597,490	(57,972)	584,202	630,146	45,945	(44,685)	(12,028)
OTHER PROGRAMS								
Aquatic Services	95,172	98,301	(3,130)	80,991	111,584	30,593	14,181	27,464
Birth To Three	-	-	-	-	-	-	-	-
Demand Transportation	34,062	34,982	(920)	41,096	48,931	7,835	(7,034)	6,915
	129,234	133,284	(4,049)	122,087	160,515	38,428	7,147	34,379
Total NCHC Service Programs	6,987,975	7,931,899	(943,924)	6,514,369	7,931,898	1,373,859	473,606	429,935
SELF-FUNDED INSURANCE TRUST FUNDS								
Health Insurance Trust Fund	593,188	754,739	(161,551)	508,945	754,739	245,794	84,243	84,243
Dental Insurance Trust Fund	30,395	34,459	(4,065)	33,987	34,459	472	(3,593)	(3,593)
Total NCHC Self-Funded Insurance Trusts	623,582	789,198	(165,616)	542,932	789,198	246,266	80,650	80,650

North Central Health Care
Programs by Service Line - Year to Date
For the Period Ending November 30, 2025

	Revenue			Expense			Net Income/ (Loss)	Variance
	Actual	Budget	Variance	Actual	Budget	Variance		From Budget
BEHAVIORAL HEALTH SERVICES								
Adult Behavioral Health Hospital	8,717,328	7,342,643	1,374,685	5,950,293	5,416,232	(534,061)	2,767,035	840,624
Adult Crisis Stabilization Facility	3,613,791	2,236,293	1,377,499	1,928,297	1,805,499	(122,798)	1,685,494	1,254,701
Lakeside Recovery MMT	1,343,632	1,407,285	(63,653)	1,579,663	1,444,426	(135,238)	(236,031)	(198,890)
Youth Behavioral Health Hospital	3,527,894	3,013,232	514,662	3,286,380	3,454,713	168,333	241,514	682,995
Youth Crisis Stabilization Facility	1,660,249	1,395,314	264,935	1,512,087	1,202,742	(309,345)	148,162	(44,410)
Contracted Services (Out of County Placements)	-	-	-	1,749,752	1,691,558	(58,194)	(1,749,752)	(58,194)
Crisis Services	2,829,798	2,752,250	77,548	2,347,440	2,664,879	317,439	482,358	394,987
Psychiatry Residency	103,176	221,876	(118,700)	245,209	476,406	231,198	(142,033)	112,498
	21,795,867	18,368,891	3,426,976	18,599,121	18,156,456	(442,665)	3,196,746	2,984,311
COMMUNITY SERVICES								
Outpatient Services (Marathon)	5,043,274	5,430,998	(387,724)	5,415,191	5,860,134	444,943	(371,917)	57,220
Outpatient Services (Lincoln)	1,077,420	985,024	92,396	768,936	871,108	102,172	308,484	194,568
Outpatient Services (Langlade)	1,033,501	875,344	158,157	764,381	722,206	(42,175)	269,120	115,981
Community Treatment Adult (Marathon)	6,501,647	5,409,732	1,091,914	6,295,842	6,393,977	98,135	205,805	1,190,050
Community Treatment Adult (Lincoln)	827,677	822,734	4,943	918,944	903,950	(14,994)	(91,267)	(10,052)
Community Treatment Adult (Langlade)	399,153	314,160	84,993	499,238	445,747	(53,491)	(100,085)	31,502
Community Treatment Youth (Marathon)	7,339,261	6,044,228	1,295,032	6,942,030	6,529,786	(412,244)	397,231	882,788
Community Treatment Youth (Lincoln)	2,266,764	1,734,016	532,748	2,180,040	1,861,493	(318,547)	86,724	214,201
Community Treatment Youth (Langlade)	1,838,998	1,245,940	593,059	1,681,363	1,407,189	(274,174)	157,635	318,884
Hope House (Sober Living Marathon)	53,287	72,149	(18,862)	93,744	97,844	4,101	(40,457)	(14,761)
Sober Living (Langlade)	59,671	35,545	24,127	107,284	67,372	(39,912)	(47,613)	(15,786)
Adult Protective Services	755,750	766,479	(10,729)	1,189,016	807,491	(381,525)	(433,266)	(392,254)
Jail Meals (Marathon)	-	-	-	-	-	-	-	-
	27,196,403	23,736,349	3,460,054	26,856,010	25,968,296	(887,713)	340,394	2,572,341
COMMUNITY LIVING								
Day Services (Langlade)	239,842	277,794	(37,953)	240,137	275,374	35,237	(296)	(2,716)
Supportive Employment Program	96,310	252,184	(155,873)	142,653	290,592	147,939	(46,343)	(7,934)
	336,152	529,978	(193,826)	382,790	565,966	183,176	(46,638)	(10,650)
NURSING HOMES								
Mount View Care Center	26,361,744	22,881,487	3,480,258	22,314,163	20,639,599	(1,674,565)	4,047,581	1,805,693
Pine Crest Nursing Home	8,395,142	13,695,678	(5,300,536)	8,783,993	13,223,294	4,439,301	(388,851)	(861,235)
	34,756,886	36,577,164	(1,820,278)	31,098,156	33,862,893	2,764,736	3,658,730	944,458
Pharmacy	6,283,295	6,572,385	(289,090)	6,436,025	6,931,611	495,586	(152,730)	206,496
OTHER PROGRAMS								
Aquatic Services	1,033,366	1,081,316	(47,950)	929,815	1,227,426	297,611	103,551	249,662
Birth To Three	519,440	-	519,440	519,440	-	(519,440)	-	-
Demand Transportation	458,411	384,803	73,608	457,226	538,240	81,015	1,185	154,622
	2,011,217	1,466,119	545,098	1,906,481	1,765,667	(140,814)	104,736	404,284
Total NCHC Service Programs	92,379,821	87,250,887	5,034,682	85,278,583	87,250,889	2,681,092	7,101,237	7,715,774
SELF-FUNDED INSURANCE TRUST FUNDS								
Health Insurance Trust Fund	7,224,146	8,302,124	(1,077,978)	5,957,337	8,302,124	2,344,786	1,266,808	1,266,808
Dental Insurance Trust Fund	365,388	379,051	(13,663)	343,191	379,051	35,860	22,197	22,197
Total NCHC Self-Funded Insurance Trusts	7,589,534	8,681,174	(1,091,641)	6,300,528	8,681,174	2,380,646	1,289,005	1,289,005

North Central Health Care
Fund Balance Review
For the Period Ending November 30, 2025

	Marathon	Langlade	Lincoln	Total
YTD Appropriation (Tax Levy) Revenue	5,372,600	207,617	970,615	6,550,832
Total Revenue at Period End	69,012,211	6,394,302	16,973,307	92,379,821
County Percent of Total Net Position	74.7%	6.9%	18.4%	
Total Operating Expenses, Year-to-Date *	62,406,448	6,111,051	16,761,085	85,278,583
<i>* Excluding Depreciation Expenses to be allocated at the end of the year</i>				
Share of Operating Cash	23,634,075	2,189,807	5,812,717	31,636,599
Days Cash on Hand	127	120	116	124
Minimum Target - 20%	13,615,952	1,333,320	3,656,964	18,606,236
Over/(Under) Target	10,018,123	856,487	2,155,753	13,030,362
Maximum Target - 35%	23,827,916	2,333,310	6,399,687	32,560,914
Over/(Under) Target	(193,841)	(143,503)	(586,970)	(924,315)
Share of Investments	-	-	-	-
Days Invested Cash	0	0	0	0
Days Invested Cash on Hand Target - 150 Days	27,977,984	2,739,699	7,514,310	38,231,993
Current Percentage of Operating Cash	37.9%	35.8%	34.7%	37.1%
Over/(Under) Minimum Target	10,018,123	856,487	2,155,753	13,030,362
Share of Investments	-	-	-	-
Amount Needed to Fulfill Fund Balance Policy	<u>10,018,123</u>	<u>856,487</u>	<u>2,155,753</u>	<u>13,030,362</u>
Over/(Under) Maximum Target	(193,841)	(143,503)	(586,970)	(924,315)
Share of Investments	-	-	-	-
Amount Needed to Fulfill Fund Balance Policy	<u>(193,841)</u>	<u>(143,503)</u>	<u>(586,970)</u>	<u>(924,315)</u>

North Central Health Care
Review of Services in Marathon County
For the Period Ending November 30, 2025

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Outpatient Services	5,043,274	5,430,998	(387,724)	5,415,191	5,860,134	444,943	(371,917)	57,220
Community Treatment-Adult	6,501,647	5,409,732	1,091,914	6,295,842	6,393,977	98,135	205,805	1,190,050
Community Treatment-Youth	7,339,261	6,044,228	1,295,032	6,942,030	6,529,786	(412,244)	397,231	882,788
Hope House Sober Living	53,287	72,149	(18,862)	93,744	97,844	4,101	(40,457)	(14,761)
Demand Transportation	458,411	384,803	73,608	457,226	538,240	81,015	1,185	154,622
Jail Meals	-	-	-	-	-	-	-	-
Aquatic Services	1,033,366	1,081,316	(47,950)	929,815	1,227,426	297,611	103,551	249,662
Mount View Care Center	26,361,744	22,881,487	3,480,258	22,314,163	20,639,599	(1,674,565)	4,047,581	1,805,693
	46,790,989	41,304,712	5,486,277	42,448,010	41,287,006	(1,161,004)	4,342,979	4,325,273
Shared Services								
Adult Behavioral Health Hospital	6,553,444	5,532,976	1,020,468	4,417,073	4,020,624	(396,449)	2,136,371	624,019
Youth Behavioral Health Hospital	2,620,756	2,238,708	382,048	2,439,574	2,564,533	124,959	181,182	507,007
Residency Program	76,590	164,705	(88,114)	182,026	353,650	171,625	(105,435)	83,510
Supportive Employment Program	71,494	187,203	(115,709)	105,895	215,715	109,820	(34,401)	(5,890)
Crisis Services	2,332,110	2,274,544	57,566	1,742,572	1,978,216	235,644	589,538	293,210
Adult Crisis Stabilization Facility	2,682,621	1,660,064	1,022,557	1,431,430	1,340,274	(91,157)	1,251,191	931,400
Youth Crisis Stabilization Facility	1,232,450	1,035,781	196,669	1,122,465	892,830	(229,635)	109,985	(32,967)
Pharmacy	4,664,270	4,878,870	(214,600)	4,777,646	5,145,534	367,888	(113,376)	153,288
Lakeside Recovery MMT	1,035,258	1,082,509	(47,251)	1,172,629	1,072,238	(100,391)	(137,371)	(147,642)
Adult Protective Services	566,634	574,599	(7,965)	882,641	599,424	(283,217)	(316,006)	(291,181)
Birth To Three	385,595	-	385,595	385,595	-	(385,595)	-	-
Contracted Services (Out of County Placements)	-	-	-	1,298,891	1,255,692	(43,199)	(1,298,891)	(43,199)
	22,221,222	19,629,958	2,591,264	19,958,438	19,438,730	(519,708)	2,262,785	2,071,556
Excess Revenue/(Expense)	69,012,211	60,934,671	8,077,540	62,406,448	60,725,736	(1,680,711)	6,605,764	6,396,829

North Central Health Care
Review of Services in Lincoln County
For the Period Ending November 30, 2025

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Outpatient Services	1,077,420	985,024	92,396	768,936	871,108	102,172	308,484	194,568
Community Treatment-Adult	827,677	822,734	4,943	918,944	903,950	(14,994)	(91,267)	(10,052)
Community Treatment-Youth	2,266,764	1,734,016	532,748	2,180,040	1,861,493	(318,547)	86,724	214,201
Pine Crest Nursing Home	8,395,142	13,695,678	(5,300,536)	8,783,993	13,223,294	4,439,301	(388,851)	(861,235)
	12,567,003	17,237,452	(4,670,449)	12,651,914	16,859,845	4,207,931	(84,911)	(462,518)
Shared Services								
Adult Behavioral Health Hospital	1,348,133	1,138,032	210,100	909,415	827,792	(81,623)	438,717	128,477
Youth Behavioral Health Hospital	537,861	459,203	78,659	502,275	528,002	25,727	35,586	104,386
Residency Program	15,769	33,910	(18,142)	37,477	72,812	35,335	(21,708)	17,194
Supportive Employment Program	14,720	38,543	(23,823)	21,802	44,413	22,610	(7,083)	(1,213)
Crisis Services	345,691	333,839	11,852	358,772	407,288	48,516	(13,081)	60,368
Adult Crisis Stabilization Facility	552,315	341,785	210,531	294,712	275,944	(18,768)	257,603	191,763
Youth Crisis Stabilization Facility	253,745	213,253	40,491	231,100	183,822	(47,279)	22,644	(6,787)
Pharmacy	960,310	1,004,493	(44,183)	983,652	1,059,395	75,743	(23,342)	31,560
Lakeside Recovery MMT	182,909	192,638	(9,728)	241,428	220,759	(20,669)	(58,519)	(30,397)
Adult Protective Services	115,462	117,102	(1,640)	181,724	123,413	(58,310)	(66,262)	(59,950)
Birth To Three	79,389	-	79,389	79,389	-	(79,389)	-	-
Contracted Services (Out of County Placements)	-	-	-	267,424	258,530	(8,894)	(267,424)	(8,894)
	4,406,304	3,872,798	533,506	4,109,171	4,002,170	(107,001)	297,133	426,505
Excess Revenue/(Expense)	16,973,307	21,110,250	(4,136,943)	16,761,085	20,862,015	4,100,930	212,222	(36,013)

North Central Health Care
Review of Services in Langlade County
For the Period Ending November 30, 2025

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Outpatient Services	1,033,501	875,344	158,157	764,381	722,206	(42,175)	269,120	115,981
Community Treatment-Adult	399,153	314,160	84,993	499,238	445,747	(53,491)	(100,085)	31,502
Community Treatment-Youth	1,838,998	1,245,940	593,059	1,681,363	1,407,189	(274,174)	157,635	318,884
Sober Living	59,671	35,545	24,127	107,284	67,372	(39,912)	(47,613)	(15,786)
Adult Day Services	239,842	277,794	(37,953)	240,137	275,374	35,237	(296)	(2,716)
	3,571,165	2,748,783	822,383	3,292,404	2,917,887	(374,517)	278,761	447,866
Shared Services								
Adult Behavioral Health Hospital	815,752	671,635	144,116	623,805	567,816	(55,989)	191,947	88,128
Youth Behavioral Health Hospital	369,277	315,321	53,955	344,531	362,178	17,647	24,746	71,602
Residency Program	10,817	23,261	(12,444)	25,707	49,945	24,238	(14,890)	11,794
Supportive Employment Program	10,097	26,438	(16,341)	14,955	30,465	15,509	(4,858)	(832)
Crisis Services	151,997	143,867	8,130	246,096	279,375	33,279	(94,100)	41,409
Adult Crisis Stabilization Facility	378,855	234,444	144,411	202,155	189,281	(12,874)	176,700	131,538
Youth Crisis Stabilization Facility	174,054	146,279	27,775	158,521	126,091	(32,430)	15,533	(4,656)
Pharmacy	658,715	689,022	(30,307)	674,727	726,682	51,955	(16,012)	21,648
Lakeside Recovery MMT	125,465	132,138	(6,673)	165,606	151,428	(14,178)	(40,141)	(20,851)
Adult Protective Services	73,653	74,778	(1,125)	124,652	84,654	(39,998)	(50,998)	(41,122)
Birth To Three	54,456	-	54,456	54,456	-	(54,456)	-	-
Contracted Services (Out of County Placements)	-	-	-	183,437	177,336	(6,101)	(183,437)	(6,101)
	2,823,137	2,457,183	365,953	2,818,647	2,745,251	(73,396)	4,490	292,557
Excess Revenue/(Expense)	6,394,302	5,205,966	1,188,336	6,111,051	5,663,138	(447,913)	283,251	740,423

North Central Health Care
Summary of Revenue Write-Offs
For the Period Ending November 30, 2025

	<u>MTD</u>	<u>YTD</u>
Behavioral Health Hospitals		
Charity Care	\$ 12,493	\$ 487,090
Administrative Write-Off	\$ 383	\$ 397,904
Bad Debt	\$ -	\$ 422,894
Outpatient & Community Treatment		
Charity Care	\$ 10,238	\$ 199,525
Administrative Write-Off	\$ 185	\$ 57,114
Bad Debt	\$ -	\$ 94,780
Nursing Home Services		
Charity Care	\$ -	\$ -
Administrative Write-Off	\$ -	\$ 115,783
Bad Debt	\$ -	\$ 24,225
Aquatic Services		
Charity Care	\$ -	\$ -
Administrative Write-Off	\$ -	\$ -
Bad Debt	\$ -	\$ -
Pharmacy		
Charity Care	\$ -	\$ -
Administrative Write-Off	\$ -	\$ 164
Bad Debt	\$ -	\$ -
Other Services		
Charity Care	\$ 0	\$ 7,735
Administrative Write-Off	\$ -	\$ 1,447
Bad Debt	\$ -	\$ 372
Grand Total		
Charity Care	\$ 22,731	\$ 694,350
Administrative Write-Off	\$ 568	\$ 572,412
Bad Debt	\$ -	\$ 542,271

FINANCIAL DASHBOARD								FISCAL YEAR: 2025								
DEPARTMENT	Metric	TARGET	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	2025 YTD	2024
BEHAVIORAL HEALTH SERVICES																
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	10.33		9.99	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	11.67		12.36	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	11.50		11.41	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	3.77		4.58	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	4314		4,710	5514
Youth Out of County Placements (WMHI/MMHI)	Days	150 Annual 37 Monthly	4	6	1	10	15	27	4	28	75	38	9		217	129
Adult Out of County Placements (WMHI/MMHI)	Days	547 Annual 45 Monthly	95	49	67	70	75	98	111	37	63	69	88		822	817
Out of County Placements (Trempealeau)	Days	538 Annual 44 Monthly	93	84	93	97	113	75	62	124	62	62	60		925	837
Out of County Placements (Group Home)	Days	1919 Annual 160 Monthly	168	140	155	150	124	151	124	217	155	155	150		1,689	2100
COMMUNITY 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	5.4		4.71	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	2.1		3.03	5.1
NURSING 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	124.5		124.03	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	0.0		48.61	81

To: Executive Committee

From: Vicki Tylka

Date: January 14, 2026

Subject: Proposal for On-site Medical Clearance at North Central Health Care's Behavioral Health Hospitals

Background: Why should this be considered

Medical clearance answers the question: Is the patient ready for psychiatric treatment, or do they have urgent health needs to address in a medical hospital first? This distinction helps make sure people get the right care in the right setting.

There is often confusion about what different kinds of hospitals can do. North Central Health Care (NCHC) is a standalone psychiatric hospital, which means it specializes in treating mental health and substance use crises. It is not a general hospital and does not have the equipment or staff to treat physical health emergencies like heart attacks, strokes, or major injuries. It does not offer emergency medical services such as IV treatment, complex imaging (e.g., CT scans or X-rays), or advanced surgical care. This is by design. As a specialty facility, NCHC focuses entirely on mental health and substance use needs. That focus allows staff to build an environment and skill set tailored to emotional and psychiatric care, rather than trying to cover all types of emergency medicine. Just as a heart hospital specializes in heart care, a psychiatric hospital like NCHC is meant to support people through mental health crises, not physical trauma or complex medical conditions.

It should be noted that medical clearance is a required process for all admissions to the hospital. Voluntary admissions comprise over half of all admissions. Involuntary admissions, or emergency detentions, require involvement of law enforcement to take custody and transport for medical clearance.

People in a mental health crisis often need both physical and mental evaluations, but many of those physical needs are basic and can be safely managed at NCHC. In fact, most patients do not need intensive medical testing or treatments like imaging scans, IV fluids, or emergency surgery. The types of tests that can be done at NCHC, such as basic blood work, heart rhythm checks, or urine drug screens, are often enough to determine if it is safe to begin psychiatric care. By doing these simple tests on-site, NCHC can care for more people without requiring a trip to the emergency room (ER). For anything beyond that, such as someone who is unconscious, has chest pain or serious injury, or who needs fluids or medical scans, the patient needs to be evaluated by a doctor to determine how stable they are.

Right now, people who come to NCHC and need a medical check before being admitted into an inpatient facility must go to a regular hospital first. This takes extra time, causes delays, and makes things harder for local ERs, law enforcement, and the patients themselves. It also makes it harder for people to get the help they need right away.

This plan would let NCHC staff complete basic medical checks right at the psychiatric hospital. That way, people can get care faster and avoid being transported to multiple locations. Medical clearance would be done by nurse practitioners or physician assistants, with help from nurses and support staff and oversight of a physician.

A New Model

A model allowing for internal medical clearance would necessitate a different staffing model, and the implementation of additional medical procedures, with corresponding equipment and supplies.

Operational decisions would have to be made in accordance with regulations and statutes relative to how patients would be evaluated in correlation with admission. Specifically, NCHC will require a legal method for completing the medical clearance prior to or after admission through outpatient clinic or hospital admission procedures; namely, there needs to be a legal status to evaluate.

Basic services that NCHC could provide:

- A simple physical check-up
- Basic medical history
- Vital signs assessments (e.g., temperature and blood pressure)
- Common lab tests
- A heart test (called an EKG)

Please note: It is very important that individuals experiencing a medical emergency still go to the ER. They have specialty equipment and specially trained staff who can manage complex emergency medical situations. This plan reduces, but will not eliminate, the possibility that law enforcement partners or patients themselves would accidentally present to NCHC rather than the ER.

Cost Considerations

Various staffing and operational models have been preliminarily explored; however, final cost estimates would require further refinement before being presented. Any fiscal impact would depend on several factors that require additional analysis and legal review, including the scope of medical services provided, staffing structure, hours of coverage, regulatory requirements, and equipment needs.

Should the Executive Committee wish to proceed with further evaluation, staff would return with a more detailed implementation plan, including cost projections and funding considerations, for future review.

Reimbursement Considerations

At this time, potential reimbursement associated with on-site medical clearance services has not been fully evaluated. Revenue, if any, would depend on payer mix, allowable billing pathways, and regulatory guidance. Any reimbursement realized would be considered as part of a broader cost-benefit analysis during a subsequent phase of review.

Benefits

- Fewer traumatic transports
- Less waiting for care
- Faster access to needed mental health support
- Care delivered in a setting that is safe, respectful, and focused on recovery

Next Steps

- Approval of Executive Committee to continue evaluation
- Legal and/or compliance review of key provisions of this proposal
- Secure funding to support this work
- Update lab contract to reflect expectations around labs
- Establish backup EKG interpretation assistance and overreads
- Recruit new providers
- Secure collaborating physicians for mid-level support
- Buy equipment and start staff training
- Explore EMT involvement in emergency detention
- Train local law enforcement
- Start the program with a small rollout and check results in six (6) months

MEMORANDUM

To: Executive Committee
From: Vicki Tylka
Date: January 6, 2026
Subject: Request to increase FTE status of Clinical Coordinator position

Purpose

Comprehensive Community Services (CCS) are provided by NCHC for youth and adults. Currently, on the team serving adults in Marathon County an existing .8 FTE Clinical Coordinator position is being vacated due to retirement. The request is to increase the FTE allocation to 1.0 FTE to accommodate for the increased need for clinical oversight as caseloads increase. An increase to 1.0 FTE will also assist in recruitment for the open position.

Position Overview

- **Title:** Clinical Coordinator
 - **Program:** CCS
 - **Reports To:** Karissa Nelson, Clinical Manager
 - **Employment Type:** Salary
 - **FTE:** Request to increase by .2 FTE
 - **New or Replacement:** Increase in FTE
-

Justification

Currently the team serving adult consumers in Marathon County is comprised of 1.8 FTE for clinical support for 14 case managers, 2 mental health technicians, 1 peer specialist, and 3 nurses. The standard NCHC has in place is for each 1.0 FTE to oversee 120-130 clients. The current caseload is 231 with 22 people in process of opening for service.

In addition to clinical oversight of clients we serve, the Clinical Coordinators participate in the Dialectical Behavioral Therapy (DBT) program with weekly collaboration, groups, and individual therapy.

Budget Impact

- **Net Impact:** The FTE increase is expected to be budget neutral with costs being recovered through CCS reconciliation.
- **Grade Placement:** Pay Grade 14

Funding Source

The position is funded through CCS and reconciliation.

Organizational Impact

Adding a .2 FTE to this clinical coordinator position will have a broad and lasting impact on organizational performance:

- **Efficiency:** Support opening of new consumers to service
 - **Compliance & Risk Reduction:** Ensure quality clinical oversight
 - **Technology Readiness:**
 - **Operational Resilience:**
 - **Cost Savings:**
-

Recommendation

It is recommended that the Executive Committee approve the creation of an additional .2 FTE for the clinical coordinator position to meet the clinical needs of the CCS program.