



**OFFICIAL NOTICE AND AGENDA** of a meeting of the Board or a Committee:

A meeting of the North Central Community Services Program Board will be held at Langlade Health Services Center, 1225 Langlade Rd, Antigo WI, Health Services Center Board Room at **12:00 p.m.**, on **Thursday, April 30<sup>th</sup>, 2015.**

**AGENDA**

1. Call to order
  2. Roll call
  3. Consent Agenda
    - a. 2/26/15 and 3/26/15 Finance, Personnel & Property Committee meeting minutes
    - b. 2/26/15, 3/26/15 and 4/1/15 Board meeting minutes
    - c. CEO's report
  4. Chairperson's report: R. Nye
    - a. Action: approve report and minutes of the 2/5/15, 3/10/15, 3/31/15 and 4/14/15 Executive Committee meetings
  5. Quality Committee Report: L. Scudiere
    - a. Organizational Quality Dashboard
    - b. Action: approve report and minutes of 3/23/15
  6. Financial report: B. Glodowski
  7. Finance, Personnel & Property Committee: L. Olkowski
    - a. Action: approve February and March financials
    - b. Action: approve report
  8. Nursing Home Operations Committee (NHOC) Report: J. Burgener
    - a. Action: approve report and minutes of 3/13/15
  9. Medical Staff
    - a. Action: approve appointments of Courtesy privileges for:
      - John D. Franzen, M.D.
    - b. Action: approve reappointments for:
      - Shae Ellefson-Wheeler, PA-C, Mid-Level Provider, Locum Tenens
      - Jennifer L. Svencer, PA-C, Mid-Level Provider, Locum Tenens
      - Debra J. Sanfilippo, PA-C, Mid-Level Provider, Locum Tenens
      - Ellen C. Barker, APNP, Mid-Level Practitioner
      - Debra Knapp, APNP, Mid-Level Practitioner
  10. Mental health services to the criminal justice system discussion
  11. Nursing home renovation update: G. Bezucha
  12. Aquatic Therapy Program update: G. Bezucha
  13. Employee Healthcare Consortium update: M. Loy
  14. Future meeting agendas
  15. Adjourn
- Action may be taken on any agenda item.
- In the event that any individuals attending this meeting may constitute a quorum of another governmental body, the existence of the quorum shall not constitute a meeting as no action by such body is contemplated.

Signed: /s/Gary Bezucha  
Presiding Officer or His Designee

COPY OF NOTICE DISTRIBUTED TO:  
Wausau Daily Herald      Antigo Daily Journal  
Tomahawk Leader      Merrill Foto News  
Langlade, Lincoln & Marathon County Clerk Offices  
DATE 04/24/15 TIME 4:00 PM  
VIA:  FAX  MAIL BY: D. Osowski

THIS NOTICE POSTED AT NORTH CENTRAL HEALTH CARE  
DATE 04/24/15 Time 4:00 PM By D. Osowski  
Anyone attending this meeting who needs some type of special accommodation in order to participate should call Administration at 715-848-4405. For TDD telephone service, call 715-845-4928.

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM  
FINANCE, PERSONNEL & PROPERTY COMMITTEE MEETING MINUTES**

February 26, 2015

11:00 a.m.

NCHC – Wausau Campus

Present:

X	Ron Nye	X	Jeff Zriny	X	Lee Olkowski
	Bob Weaver		John Robinson		

Also Present: Gary Bezucha, Brenda Glodowski, Michael Loy, Darla Opper

The meeting was called to order at 11:00 AM, roll call taken, and a quorum noted.

Minutes

**Motion**/second Nye/Zriny to approve the minutes of the 01/22/14 Finance, Personnel & Property Committee meeting. Motion carried.

Financials

- Expenses:
  - Overall expenses were below targets for January.
  - State Institutions and Food exceeded budget targets.
  - Salaries were higher in January due to 3 holidays being paid.
  - Payment to consulting firm working on our strategic planning.
- Revenues:
  - Hospital census was at target of 13, nursing home census averaged 210 compared to the target of 213. Medicare census averaged 27, which was above budgeted target of 26.
  - Outpatient revenue was low in January.
  - Both programs show a small gain for January.
  - Cash remains level compared to January of last year.
- **Motion**/second Zriny/Nye to approve the January financial statements. Motion carried.

CFO Report

- New report – Target vs Actual Summary Analysis to become part of monthly reporting.
- Accounts Receivable Action Plan – updated and report out monthly.
  - Number of open items need to be addressed, we are working with the vendor.
  - These items need to be resolved to get billing out the door, have set 3-31-15 as the due date for completion.
  - Several insurance companies require electronic billing, we need this to be up and running as paper claims are not accepted.
  - Aging by Payor by Program reporting is good, client reporting is not workable.
  - We are internally working the system; we may be able to resolve some issues but also requesting same of the vendor.

- CCS claims update – latest test cleared; now sending weekly batches.
- Audit report next month.

#### Employee Incentive for 2014

- Discussion
- Motion/second Zriny/Nye NCHC will not provide incentive for 2014 due to limited measurable gain. Motion carried.

#### Year End Analysis of Lease Agreements

- Reviewed year end information of current lease agreements.

#### Pharmacy Report

- Summary of pharmacy services for 2014, not too far off from target.
- Nursing Home is bulk of revenue; Community Treatment and Residential clients to begin utilizing our Pharmacy.

#### Investment Policy

- Committee reviewed the Investment Policy.
- **Motion**/second Zriny/Nye to concur and approve the Investment Policy. Motion carried.

#### Future Agendas

- Accounts Receivable

**Motion**/second Nye/Zriny to adjourn at 11:50 a.m. Motion carried.

*ddo*

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM  
FINANCE, PERSONNEL & PROPERTY COMMITTEE MEETING MINUTES**

March 26, 2015

11:00 a.m.

NCHC – Wausau Campus

Present:

X	Ron Nye		Jeff Zriny	Lee Olkowski
	Bob Weaver	X	John Robinson	

Also Present: Gary Bezucha, Brenda Glodowski, Debbie Osowski

The meeting was called to order at 11:30 AM, roll call taken, a quorum was not present, and therefore the meeting will be discussion only.

Financials

- Expenses:
  - Overall expenses were well below targets for February.
  - Overall employee benefits were below budget targets.
  - A credit was received from the state institutions helping to reduce this expense for February.
  - A number of vacant positions contributed to salaries being below targets, however as they are filled the salary expense will increase.
- Revenues:
  - Saw improvements in the hospital, nursing home and CBRF census in February.
  - Medicare census is above target for the nursing home in February.

Accounts Receivable Update

- Received a check in excess of \$400,000 for the CCS program; all billing for CCS will be completed through December and submitted in April; January and February billing will be submitted in April.
- Documentation must first be completed before billing can be done for January. Working with staff to get documentation completed.
- Have identified some problems with the aging report which is being reviewed today.
- Every program will be tested, case studies completed, and comparisons made.
- Medicaid biller position will be filled.

Future Agendas

- Budget for April agenda
- Review Accounts Receivable

*dko*

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM  
BOARD MEETING MINUTES**

February 26, 2015

12:00 p.m.

NCHC – Wausau Campus

Present:

X	Jean Burgener	X	Joanne Kelly	EXC	Holly Matucheski
X	Bill Metter	X	Bill Miller	X	Ron Nye
X	Lee Olkowski	EXC	Dr. Eric Penniman	EXC	John Robinson
X	Greta Rusch	EXC	Laura Scudiere	EXC	Dr. David Tange
EXC	Bob Weaver	X	Jeff Zriny		

Also Present: Gary Bezucha, Brenda Glodowski, Becky Schultz, Toni Simonson, Michael Loy, Debbie Osowski

The meeting was called to order 12:04 p.m. Roll call was taken and a quorum declared.

Consent Agenda

- **Motion** Zriny, 2<sup>nd</sup> Olkowski to approve the 01/29/15 Finance, Personnel & Property Committee minutes and the 01/29/15 Board meeting minutes. Motion carried.
- A brief review of the anticipated impacts of the Governor’s budget was provided as an addendum to the CEO report. Information in the budget is vague and confusing.
  - Increase in funding for elderly and transportation aides
  - Mental health crisis programs unable to determine due to confusing information
  - Streamlining mental health funding – unsure if this is positive or negative
  - Substance abuse treatment – expands Medicaid coverage
  - Family Care has substantial changes to the program as outlined in the memo from Mark Hillikier that was included in the Board packet
  - CMO’s will cease to exist and become an HMO which would move them from the Dept. of Long Term care to the Commissioner of Insurance
- **Motion** Olkowski, 2<sup>nd</sup> Metter to approve the CEO report. Motion carried.

Chairperson’s Report

- Committee had a phone conference with the Strategic Planning consultants to review all program areas, goals, concerns, etc. All areas are on the table for discussion.
- **Motion** Kelly, 2<sup>nd</sup> Olkowski to approve the 2/10/15 Executive Committee minutes. Motion carried.

Quality Committee Report

- Organizational Quality Dashboard was reviewed.
- **Motion** Olkowski, 2<sup>nd</sup> Zriny to approve the report. Motion carried.

Financial Report

- There was a small gain for the month in both nursing home and human services programs; are slightly behind target, but anticipate improvement by end of February.

- Census in the hospital and nursing home are doing well and above targets for February.
- Accounts receivables were discussed at length in the Finance Committee meeting. Action plan is in place to make improvements in this area by 4<sup>th</sup> quarter. Working with vendor in getting the billing system working better which includes resolving 37 cases by 3/31/15.

#### Finance, Personnel & Property Committee Report

- January financials were reviewed.
- Significant discussion surrounding system conversion. Expectation is to see improvement in days in Accounts Receivable; will continue to monitor closely.
- Completed the annual review of the lease agreements with tenants. No changes noted.
- Reviewed profitability of pharmacy from 2014.
- Committee took action to not provide an employee incentive bonus this year due to low profitability. Will consider the incentive bonus again next year based on 2015 outcomes.
- **Motion** Olkowski, 2<sup>nd</sup> Burgener to approve report. Motion carried.

#### Nursing Home Operations Committee (NHOC) Report

- Committee meetings are looking to move from the 2<sup>nd</sup> Friday to the 4<sup>th</sup> Friday of the month mainly to provide time for financials to be completed and available for review prior to meetings.
- Census remains high in the nursing home.
- An Aspirus affiliation with Mount View Care Center has been approved. We are one of four area nursing homes with this affiliation.
- Tracking the impact Navi Health is having on the average length of stay is important. Length of stay has decreased by 25% with Navi Health and by 47% with Security Health. We will continue to work to increase census.
- Master Facility Plan was discussed. Staff was complimented on the planning so that residents would only be moved once during the construction phase.
- Committee will meet March 13 from 8 a.m. – Noon for strategic planning. Potential change in monthly meeting date would occur in April.
- **Motion** Burgener, 2<sup>nd</sup> Metter to approve the report and the minutes of the 02/13/15. Motion carried.

#### Medical Staff

- **Motion** Burgener, 2<sup>nd</sup> Rusch to approve the appointment of Mid-Level Practitioner privileges for:
  - Ruth Nelson-Lau, APNP
  - Betsy Bittman, M.D.
  - Leandrea Lamberton, M.D.

#### Strategic Planning Consultant

- Board felt it is important the consultants have awareness of the state budget prior to the Board Retreat and as much information be provided to them in advance.
- Board Retreat has been moved to **Wed, April 1, from 12:00 – 8:00 p.m.** at the Westwood Center.

Brian Schoeneck, Leading Age Wisconsin

- Presentation provided on Long Term Services and Supports: The Changing Landscape

**Motion** Metter, 2<sup>nd</sup> Miller to adjourn at 1:50 p.m. Motion carried.

*Minutes prepared by Debbie Osowski, Executive Assistant*

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM  
BOARD MEETING MINUTES**

March 26, 2015

12:00 p.m.

NCHC – Wausau Campus

Present:

EXC	Jean Burgener	EXC	Joanne Kelly	EXC	Holly Matucheski
X	Bill Metter	X	Bill Miller	X	Ron Nye
EXC	Lee Olkowski	X	Dr. Eric Penniman	X	John Robinson
X	Greta Rusch	X	Laura Scudiere	EXC	Dr. David Tange
EXC	Bob Weaver	EXC	Jeff Zriny		

Also Present: Gary Bezucha, Brenda Glodowski, Becky Schultz, Toni Simonson, Michael Loy, Debbie Osowski

Guests: Kristi Kordus, Gary Olsen

The meeting was called to order 12:01 p.m. Roll call was taken, a quorum was not present, therefore the meeting will be for discussion only with no action taken.

2014 Annual Audit presentation (Joint with Finance, Personnel & Property Committee)

- Kim Heller, Wipfli, presented the audit to a joint meeting of the Finance, Personnel & Property Committee and the full NCCSP Board.
- There were no adjustments posted during the audit and no uncorrected misstatements identified in the audit.
- Brenda, Kim and their staff have done an excellent job in all aspects of the audit.
- The implementation of a new accounts receivable and billing system in 2014 had an impact on billing and payments being collected and posted.
- It was recommended that management consider limiting user access to various information technology systems, if possible, for several individuals including the CFO and the Senior Executive Human Resources.
- Approval of 2014 Annual Audit will be delayed until the next meeting of the NCCSP Board.

Consent Agenda

- No questions or comments.

Chairperson's Report

- No questions or comments.

Quality Committee Report

- Organizational Quality Dashboard was reviewed.
- It was noted that some of the goals have been reestablished and we anticipate it may take time for the process improvement plans to show positive results.
- Committee met on 3/23/15 and reviewed Outcome Data/Safety.



- The Committee also met in closed session to review Corporate Compliance and Ethics.
- Compliance Auditing will be completed with reports provided to the Corporate Compliance Committee and the Quality Committee.
- Michael Loy provided an overview on how we ensure and validate staff competency.
- Safety plans were reviewed.
- Committee discussed the Joint Commission process in preparation for the upcoming survey.

#### Financial Report

- February was a good month; showed a gain of about \$590,000 exceeding target.
- Saw improvements in the hospital, nursing and CBRF census in February.
- Received a credit from the state institutions helping to reduce this expense for February.
- We are ahead of target by \$427,000.

#### Nursing Home Operations Committee (NHOC) Report

- Discussion primarily centered on the nursing home renovation project.
- Bids received were higher than expected which allowed us to include just one alternate project for Legacies by the Lake.
- The project, including soft costs, is at budget and ready to proceed.

#### Resolution Supporting Family Care

- A communication from Mark Hilliker was provided.
- Current state budget has relatively devastating language regarding the Family Care programs.
- Requesting action by the Board in support of the resolution; in the absence of a quorum no action was taken.

#### State Budget

- State budget remains vague; nothing new.
- It was noted that on the federal level a resolution on the Sustainable Growth Rate, put together by House Speaker John Boehner and Minority Leader Nancy Pelosi, was passed by the House of Representatives. This has a positive effect on post-acute care in the nursing home and includes 1% improvement for nursing homes and a 2-year extension on therapy caps.

#### Strategic Planning Update

- An agenda was distributed for the April 1 Strategic Planning Board Retreat at the Westwood Center beginning at 12:30 p.m.
- The retreat will be facilitated by Steve Schafer and Neil Schapiro of Schafer Consulting.

#### Future agendas

Meeting adjourned at 1:08 p.m.

*Minutes prepared by Debbie Osowski, Executive Assistant*

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM  
BOARD MEETING MINUTES**

April 1, 2015

12:00 p.m.

NCHC – Wausau Campus

Present:

X	Jean Burgener	X	Joanne Kelly	EXC	Holly Matucheski
X	Bill Metter	X	Bill Miller	X	Ron Nye
X	Lee Olkowski	EXC	Dr. Eric Penniman	X	John Robinson
X	Greta Rusch	EXC	Laura Scudiere	X	Dr. David Tange
X	Bob Weaver	EXC	Jeff Zriny		

Also Present: Gary Bezucha, Brenda Glodowski, Becky Schultz, Toni Simonson, Michael Loy, Gretchen Brown

Guests: Steve Schafer and Neil Shapiro of Schafer Consulting

The meeting was called to order by Ron Nye at 12:30 p.m. and a quorum was noted.

2014 Fiscal Year Financial Audit

- **Motion** by Olkowski, second by Miller to accept and approve the 2014 Financial Audit prepared by Wipfli. Motion was approved unanimously.

Strategic Planning Presentation

- A very detailed presentation was provided by Steve Schafer and Neil Schapiro (attached) which followed by extensive discussion. The strategic planning consultants (Steve Schafer and Neil Shapiro) will prepare a report of the discussion and submit it to the board for review within the next 30-40 days.

Meeting adjourned at 6:45 p.m.

*GB/dko*

## **NCHC Board Planning Retreat Agenda: Wednesday, April 1 2015**

1. 12:30 – 1:15 Lunch and Introductions:
  - a. Purpose of the engagement
  - b. Purpose for today
  - c. A little about Schafer Consulting
  - d. Board of Directors introduce themselves – who they are, organizations/companies, what they see coming out of this retreat, number one concern and their approach to addressing it
  
2. 1:30 – 3:00 Schafer Consulting Internal Assessment Report & Presentation
  - a. Internal Survey
  - b. External Stakeholders Survey
  - c. Internal Assessment Snapshot
  - d. Discussion

Break 3:00 – 3:30

3. 3:30 – 5:00 Mission and Vision Discussion Facilitated by Schafer Consulting - Changing the mission based on changing needs, external forces, and new opportunities
  - a. Areas for Consideration:
    - i. Financially Sustainable Enterprises – New and Existing
    - ii. Geographic Market Regionalization
    - iii. Scope of Program and Services
      1. Health
      2. Human & Social Services
    - iv. Strategic Affiliations
    - v. Behavioral Health Integration
    - vi. Some Ideas (see Suggested Strategy / Core Objectives List)

5:00 – 5:30 Break

5:30 - 7:00 Discussion and Dinner

Suggested Strategy / Core Objectives List:

- Sustainability: developing alternative revenue sources and alternative services
- Decrease reliance on tax support
- Structural Alignment and Integration with the broader healthcare and social services arenas
- Operating Efficiency and Financial Performance Improvement: Self-Assessment of the Agency's existing human resources, structure, financial capabilities to deal with change
- Management Metrics: implementing a system to measure/track how we are doing against our plans for change on an ongoing basis and to be able to adjust

4. 7:00 Next Steps for Change Discussion



# North Central Health Care

Person centered. Outcome focused.



**BOARD PLANNING RETREAT  
INTERNAL ASSESSMENT REPORT SUMMARY  
APRIL 1, 2015**

# About the Internal Assessment



- The Internal Assessment looks at NCHC from the inside. Except for the External Stakeholder survey, it examines staff perspectives, financial trends, utilization in select programs, and client origin, i.e. where, geographically, do our people come from that NCHC helps.
- In the External Assessment, we will study market forces and opportunities.
- *A summary of findings from the Internal Assessment will be informed and completed based on input at the Board Retreat and on-site meetings*

# Contents



- Internal Survey
- External Survey
- Utilization Trends: Inpatient Behavioral Health & Nursing Home
- Financial Trends by Program 2014-2015
- Audited Financial Trends
- Client Origin

# Internal Survey Results



**STAFF, MANAGEMENT, AND BOARD SURVEY**



# Internal Staff Survey



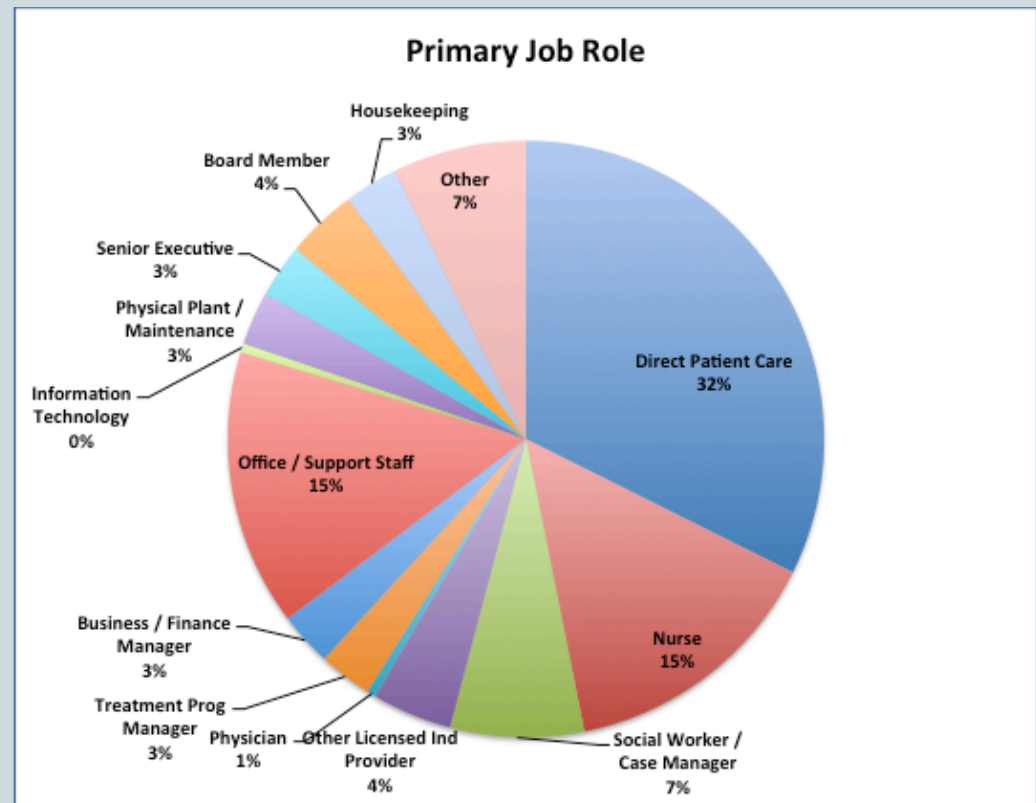
- **Background**
  - An email was sent from the CEO to all staff and Board Members via email with a link to an online survey
  - The goal was to obtain key input on a number of planning related questions from those within the organization
  - Of the approximate 850 invitations, 208 took the survey, for a 24% response rate
  - There were 10 questions
  - The “Response Rate” indicates the percent of times a particular option was chosen – these may not “add up” to 100% because more than one answer could be chosen for some questions
  - Some questions included an “Other” option with space for a comment



# Question One: What is Your Primary Job?

Direct Patient / Client Care staff had the highest number of responses to the survey

Answer Options	Response Percent	Response Count
Direct Patient Care	32%	67
Office / Support Staff	15%	31
Nurse	14%	30
Social Worker / Case Manager	7%	15
Other	7%	15
Other Licensed Ind Provider	4%	9
Board Member	4%	8
Treatment Prog Manager	3%	6
Business / Finance Manager	3%	6
Physical Plant / Maintenance	3%	6
Senior Executive	3%	6
Housekeeping	3%	6
Physician	0%	1
Information Technology	0%	1
Total	100%	207

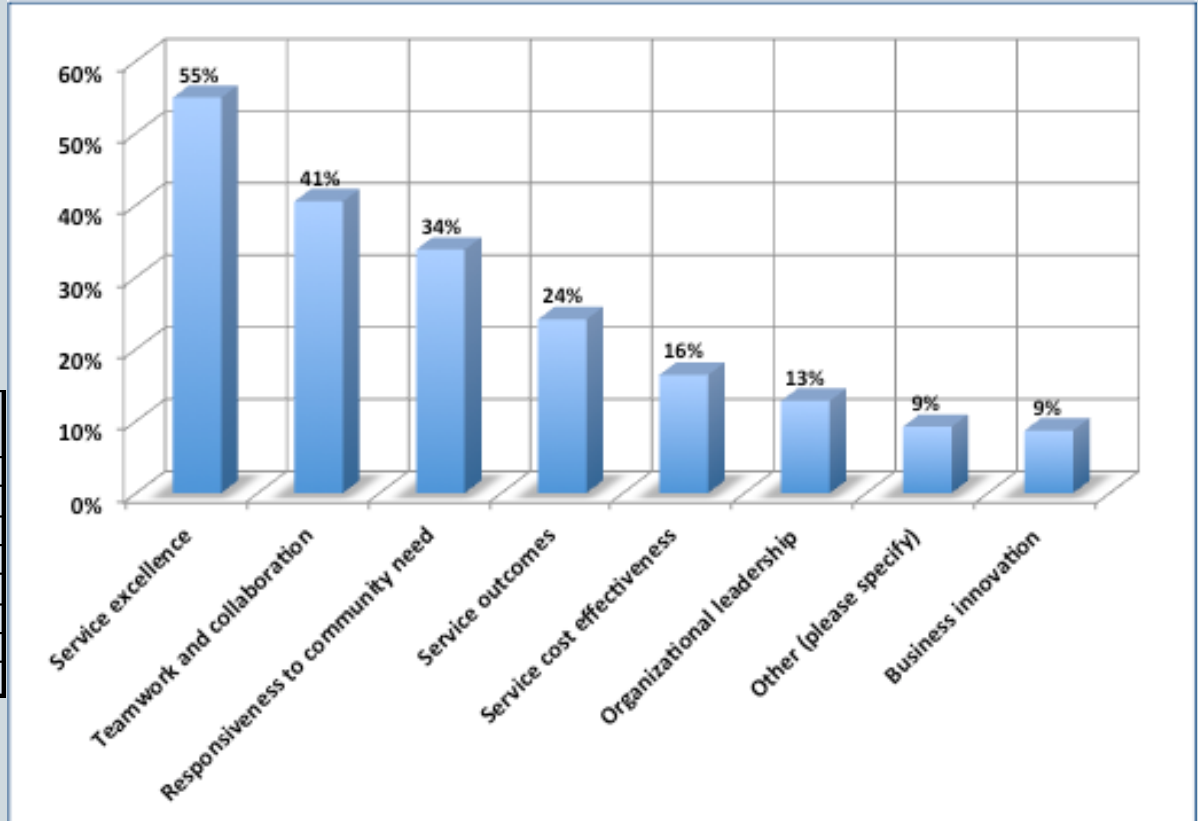


# Question 2: What Are NCHC's Greatest Strengths?

- Service Excellence is the greatest perceived strength followed by
- Teamwork
- Business innovation was ranked last

Answer Options	Response Percent	Response Count
Service excellence	55%	107
Teamwork and collaboration	41%	79
Responsiveness to community need	34%	66
Service outcomes	24%	47
Service cost effectiveness	16%	32
Organizational leadership	13%	25
Other (please specify)	9%	18
<b>Business innovation</b>	<b>9%</b>	<b>17</b>

"Other" Responses
Employees
Full Continuum



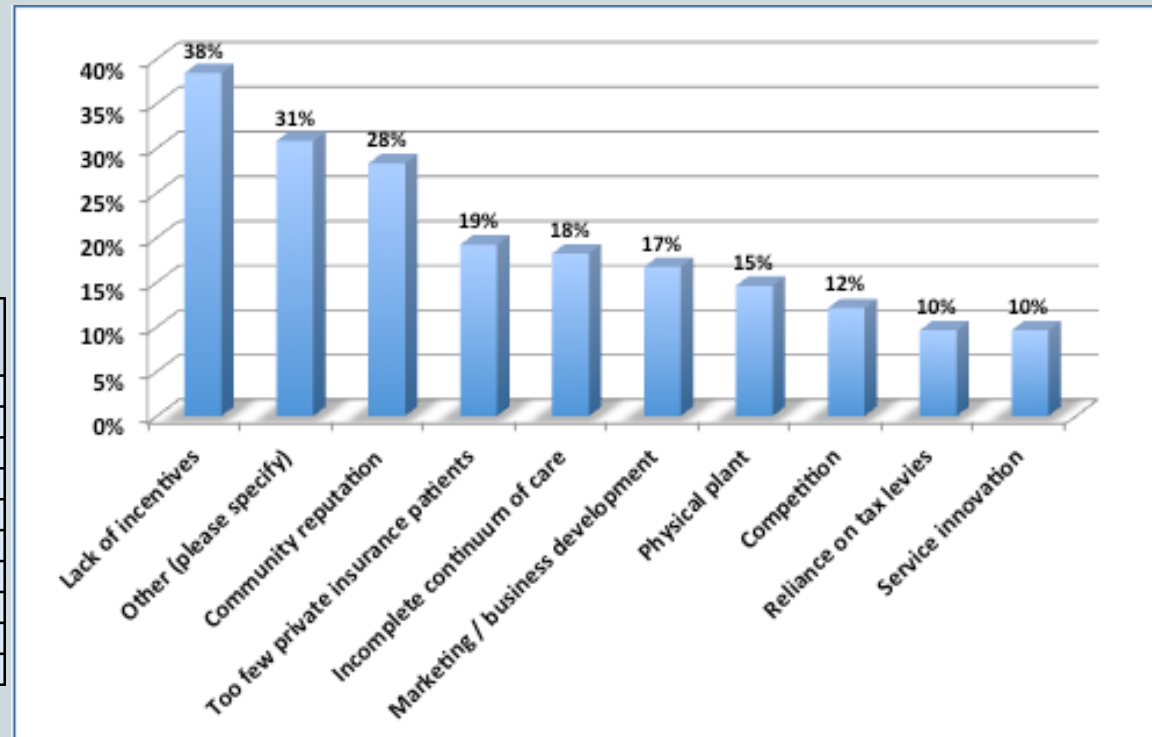
# Question 3: What are NCHC's Greatest Weaknesses?

A lack of financial incentives for staff was the most frequent response. This issue is repeated in later questions

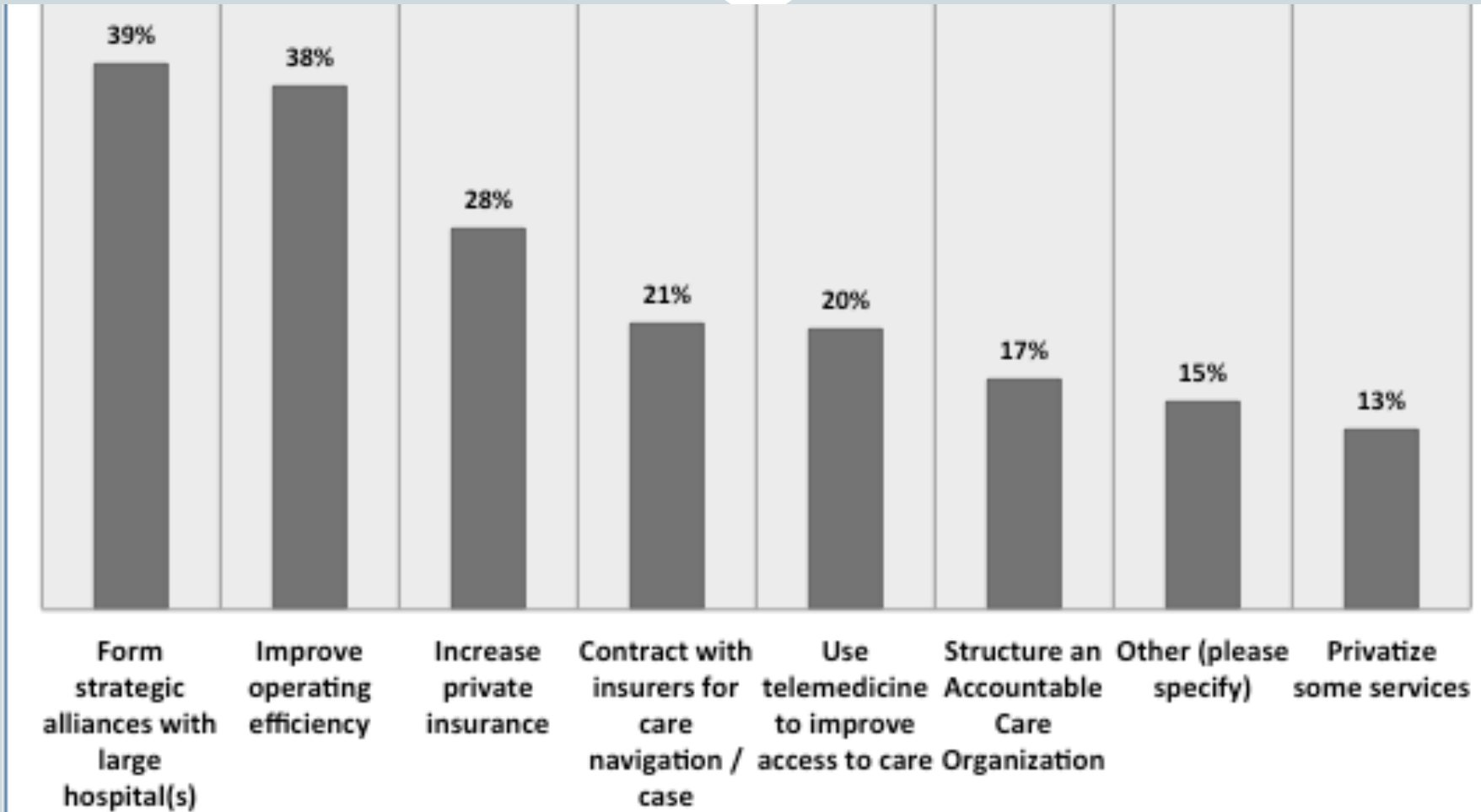
Answer Options	Response Percent	Response Count
Lack of incentives	38%	76
Other (please specify)	31%	61
Community reputation	28%	56
Too few private insurance	19%	38
Incomplete continuum of care	18%	36
Marketing / business	17%	33
Physical plant	15%	29
Competition	12%	24
Reliance on tax levies	10%	19
Service innovation	10%	19

## Other

Inadequate Staffing / Staff Turnover  
 Management  
 Cost Cuts



## Question 4: What Opportunities do you think NCHC has to Improve Long Term Financial Viability?



# Question 4 Comments

## Summarized: Other Comments

More profitable services

Slow down expansion

Improve patient care

Diversify funding streams

Too many managers

Improve billing

Improve reputation

Improve staff morale

Hire staff to work with insurance Cos

Add a pharmacy here

Please don't privatize

Update nursing home facility

More access to profitable services

- Responses are varied and sometimes contradictory, but the “take away” is that staff *are* concerned about financial stability in the future and have many ideas and some fears about what management will do

# Question 5: What Most Threatens NCHC's mission?

Answer Options	Response Percent	Response Count
Getting / keeping qualified staff	71%	145
Internal politics and bureaucracy	38%	77
Old technology	19%	39
Regional economy	17%	35
Other (please specify)	17%	35
Competitors	13%	26
Cost of maintaining old buildings	12%	24

## Summarized: Other Comments

No Vision for the future

Core values not followed

Long term resistance to change

External politics

Management communication

Too many managers

Lack of on site psychiatrists & MDs

Communication between depts

- There is consistent concern in survey responses about:
  - Having enough staff
  - Keeping qualified staff
  - Bureaucracy
  - Communication from and with Management as well as between departments

# Question 6: What do you think about these ideas?



Answer Options	Poor idea = 1	Just ok idea = 2	Good idea = 3	Great idea = 4	Rating Average
Provide integrated behavioral health services to area health system medical groups	8	36	99	49	3.0
Develop "Centers of Clinical Excellence" to improve the payer mix	3	51	105	31	2.9
Partner with a hospital system Accountable Care Organization	10	48	95	32	2.8
Develop a state-wide tele-medicine service in psychiatry, geriatrics or other area	20	52	74	44	2.8
Expand existing services beyond the North Central area	29	44	93	33	2.7
Structure a single access and assessment center for all NCHC programs	20	65	75	29	2.6
Create productivity incentives for licensed independent practitioners	20	60	76	27	2.6
Divest services that compromise the organization's viability and future	33	48	76	30	2.6
Leverage our care management capability into a business unit providing case management and UR	20	74	74	15	2.5

More than 55 responses

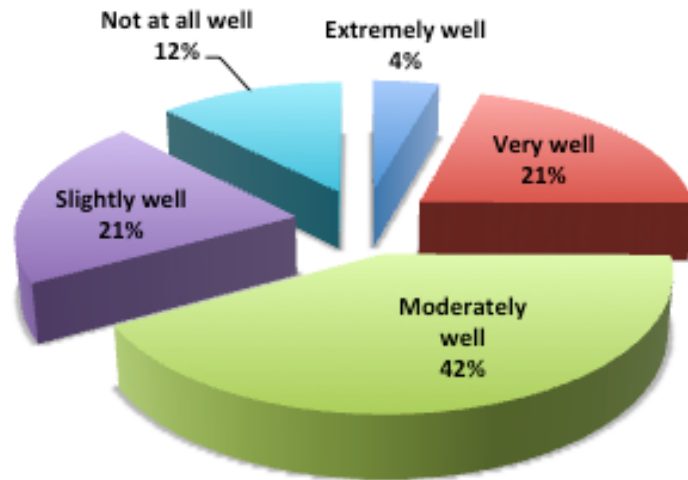
# Question 6 Other Comments



- Develop an internal system to reward managers who develop new leaders. There is currently no incentive to train someone to advance. The only thing that would currently result is the loss of a quality employee to another department or opportunity. If the management would be rewarded for training people and the newly trained candidate will be a quality and experience level that we currently do not have here. It would likely result in less turnover, and a higher job satisfaction as well for managers and new leaders.
- Contract additional psychiatrists and mental health professionals to assist the Inpatient hospital program.
- Center of Excellence idea I think depends on the center Aquatic Services would be a great idea going after more contracts that North Central and the staff could support
- Market to and grow our strength - Mental Health Services and really "go after" the private insured market
- More employee incentives i.e: bonuses for no call-ins, no injuries, etc. develop education and skills labs for staff
- We need to provide services to those in need regardless of their ability to pay.
- Hire more BILLABLE staff support. There is a significant opportunity for NCHC to be viewed as a leader in core areas where it provides services: geriatric and AODA services.
- There is significant need for expertise in understanding and providing emergency geriatric mental health care services and additional AODA programs. As well, there are significant resources for grant funds and opportunities to partner with UW-Madison geriatric psychiatrists and pharmacists.



## Question 7: How well do you think NCHC understands what you need to be successful?



- The most frequent choice was “Moderately Well”
- 33% selected “Slightly well” or “Not at all well”
- Communication between management and staff may be an area for improvement – see the next question for more about this opportunity

# Question 8 Slide One: What does Management need to do to Improve their Overall Effectiveness?



## **Communication**

- Clearer communication from management to staff r/e policies and procedures and changes to these.
- More input needed from staff (especially front-line) r/e ideas, approaches to problems, clinical needs.

## **Management**

- Too top down. Needs to be more collaborative. Give greater voice to those involved in direct, front-line care.
- Too removed, especially from front-line operations. Management needs to be more immersed in programs to gain better understanding of demands of direct care.
- Too concerned with productivity / outcomes rather than quality of care / understanding of clinical processes and nuances.
- Better match needed between schedules of management and front-line staff (weekends, 3rd shift).
- Be more responsive to requests from staff for support

# Question 8 Slide Two: What does Management need to do to Improve their Overall Effectiveness?



## **Staff Needs**

- More staff needed. Stress caused by critical staff shortages.
- Reduce turnover.
- Staff sometimes forced to work while ill to maintain call time.
- Greater recognition of and reward for good performance (individual and team). Staff often feel under-valued.
- More team-orientation. Networking. More equal recognition of team members.
- Better pay and benefits: insurance, time off, vacations. Financial incentives.
- Training in policy and procedures for new staff and continuing education for experienced staff.

## **External Relations**

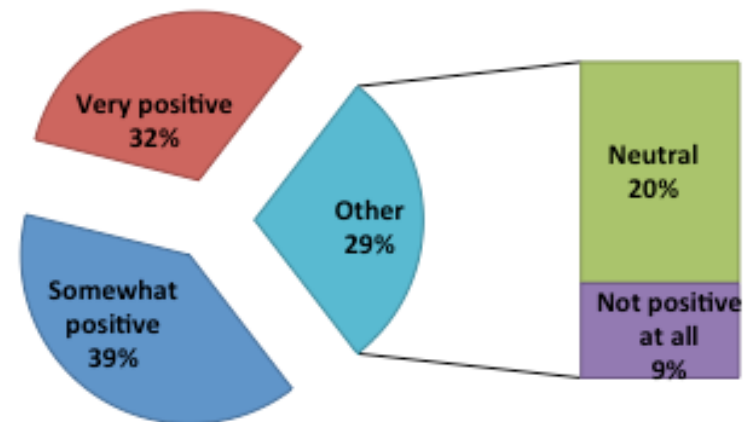
- Concern expressed about image (if we are a hospital, we ought to look like one).
- Too concerned with politics of community, counties, and medical community.
- Educate county board r/e needs and concerns.
- Build trust with local organizations.

## Question 9: How do you feel about NCHC's future?

### Comments:

- About a third of staff are not optimistic about the future.
- This can be due to low morale, insufficient communication, or sometimes a lack of leadership's accessibility, visibility and engagement in the front line programs and services
- NCHC Board and Management may want to discuss ways to improve the bland outlook of these 247 staff members (29% X 850 staff)

- Overall, 71% of those surveyed feel positive about the future
- While 29% feel neutral or negative about the future for NCHC



# Question 10: What suggestions do you have to improve NCHC?

## Actual Comments by Category

Quality of Care Comments	Financial Comments
More & Happy Staff	Increase salaries
Stop Mandations	More Marketing
Staff incentives	Add Programming
More Marketing	Staff incentives
Focus on treatment quality not productivity	Too money centered
Too money centered	Increase private insurance
Get Joint Commission accreditation	Cut programs losing too much
Faster Computers	Improve billing
Staff Comments	Buildings / Furnishings Comments
Keep qualified staff	Update buildings
Hire more qualified staff	Remodel and new colors
Stop Mandation	New furnitnure
Staff incentives	
Dept Heads work with staff	
Management doesn't care	
Dead end job for most staff	
Offer more training	

## Summary of Responses by Category



### Observations:

- Staff were very engaged in the survey, spending significant time on this question.
- Getting feedback to them could be an important step in improving communication
- Some successful organizations develop small short term focus teams that “take on” issues and develop ideas with and for management; NCHC may want to consider a mechanism like this to support greater communication, morale, and innovation going forward

# External Stakeholder Survey



**COUNTY OFFICIALS**



# External Stakeholder Survey

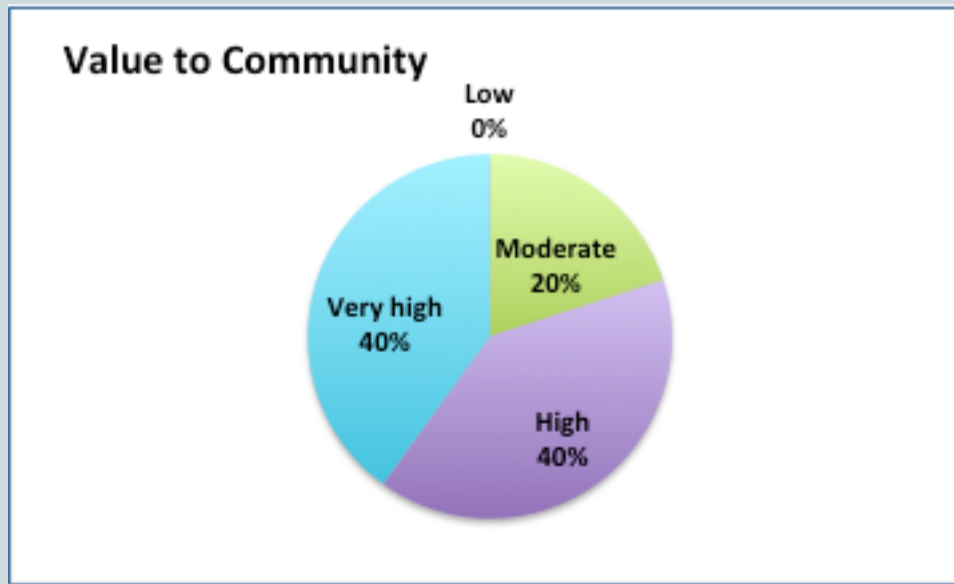


- An 11 question online survey was sent to Langlade, Lincoln, and Marathon Counties officials, a total of eight individuals
- Five responded to the survey, for a return rate of 63%, a very good response
- Typically external stakeholders input is gathered as part of the External Assessment but it is included here to help inform some of the thinking during the planning retreat

# Stakeholder Questions 1-3



1. How long have you been in your current position? **Answers:** Three over 10 years, one 3-6 years, one under 2 years
2. How well do you know NCHC? **Answers:** 80% know it very well, 20% know it somewhat
3. Considering the tax levy funding and the services provided, how would you rate the overall value to the community? **Answers Graph:**

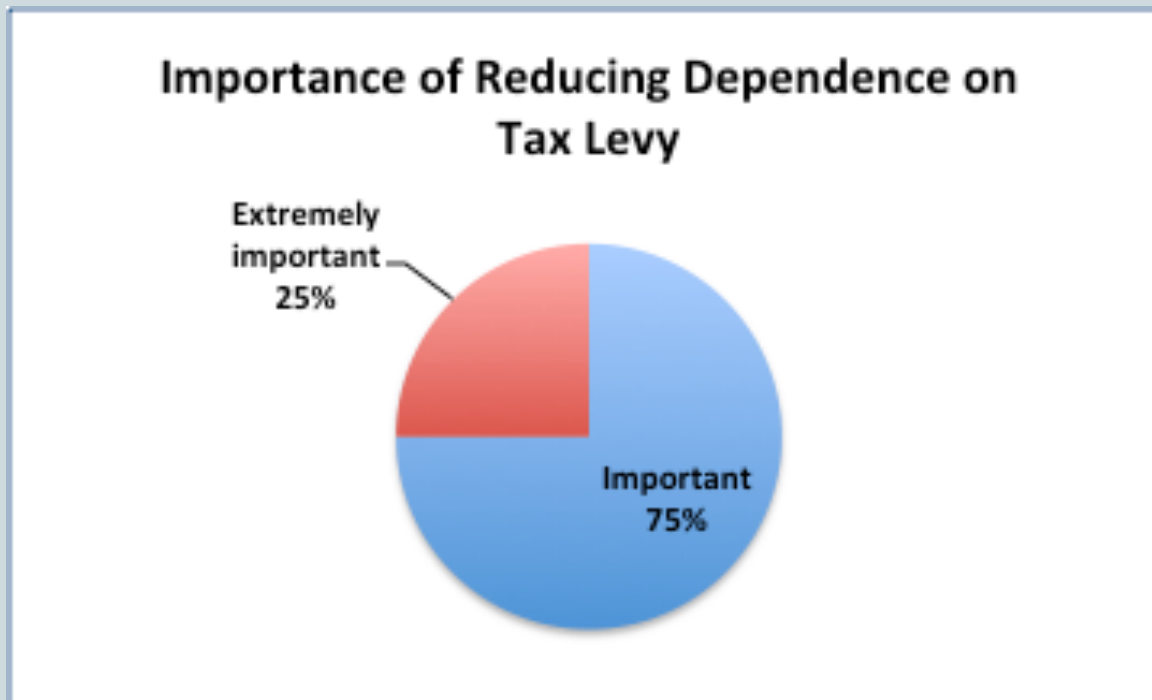




# Stakeholder Question 4



How important is it for NCHC to reduce its dependence on tax levies over the next 3-5 years?





## Stakeholder Question 5

- What NCHC services are most important to the community?
- Critically Important:
- Inpatient Psych
- MH Crisis
- Inpatient detox

### Services Rated Critically and Very Important

Service	Critically important
Inpatient psychiatric	80%
Mental health crisis services	80%
Inpatient detox	60%
Services for persistent mental illness	60%
Outpatient counseling	40%
Adult protective services	40%
Birth to Three	40%
Nursing Home	20%
DD adult day services	20%
DD prevocation services	20%
DD community residential	20%
Aquatic therapy services	0%

Service	Very important
Outpatient counseling	67%
Services for persistent mental illness	67%
Adult protective services	67%
DD adult day services	67%
DD prevocation services	67%
DD community residential	67%
Inpatient psychiatric	33%
Inpatient detox	33%
Birth to Three	33%
Nursing Home	0%
Mental health crisis services	0%
Aquatic therapy services	0%

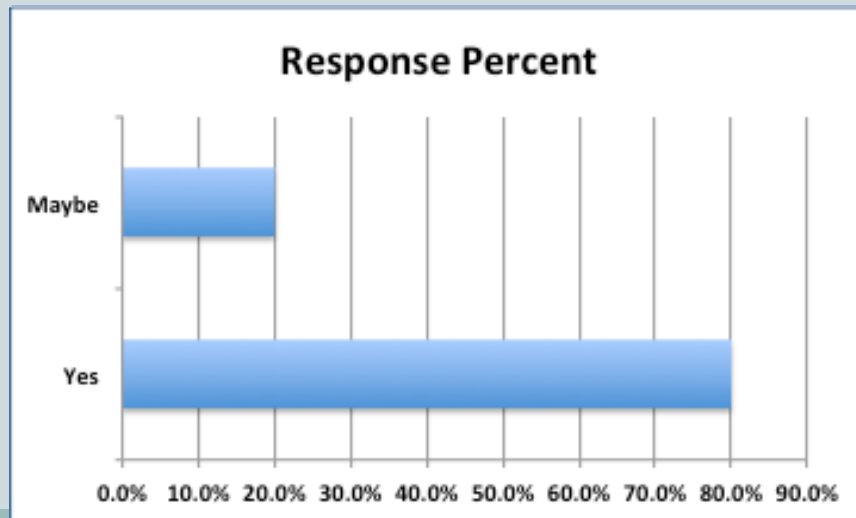
# Stakeholder Questions 6 & 7



6. How would you rate the quality of care at NCHC?

Answer Options	Response Percent
Very high	40.0%
High	40.0%
Average	20.0%
Low	0.0%

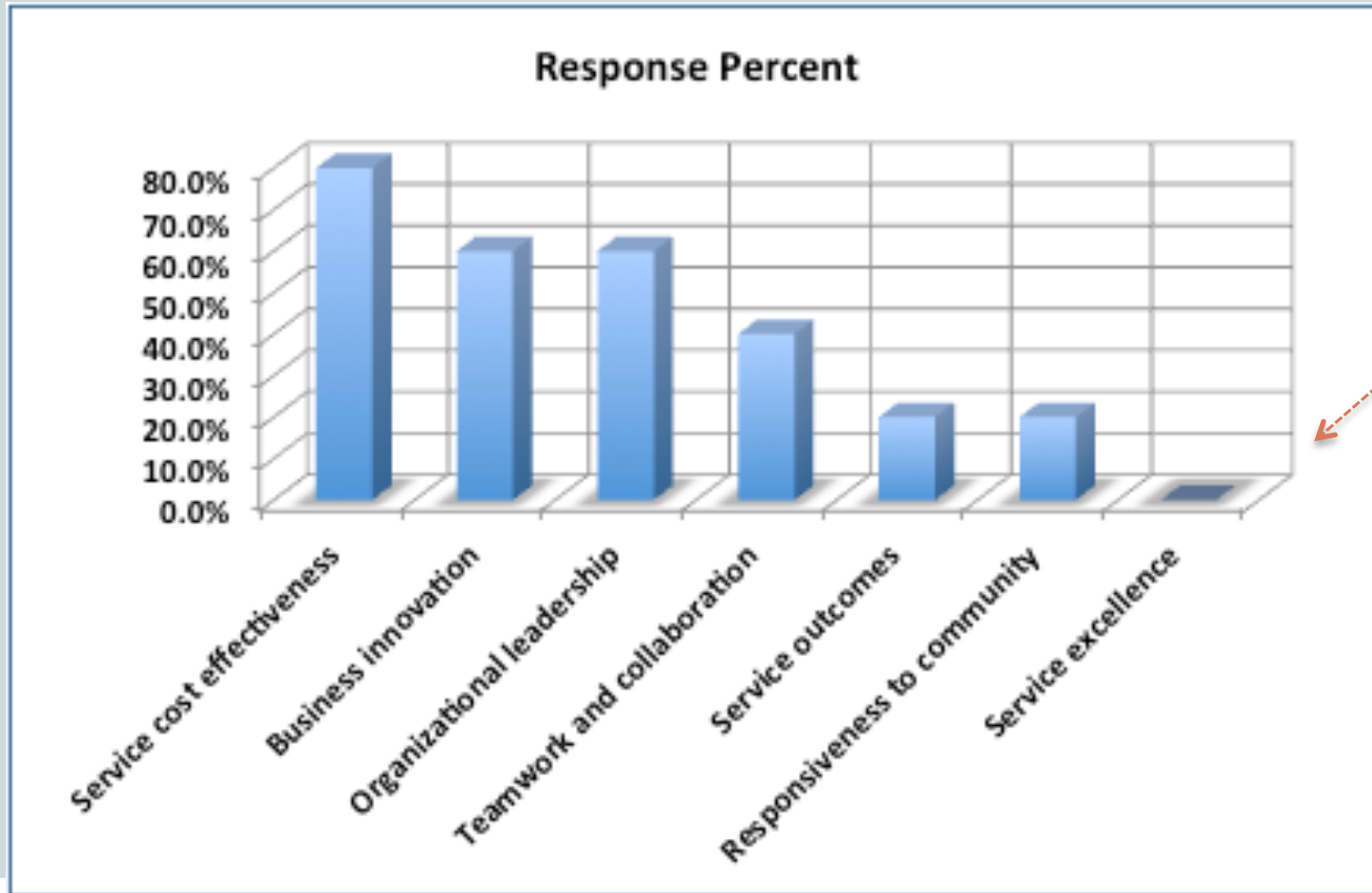
7. Would you support NCHC developing services outside the three county region if doing so would bring more commercial and private payer sources?



Answer Options	Response Percent
Yes	80.0%
Maybe	20.0%
No	0.0%

# Stakeholder Question 8

What are NCHC's greatest strengths?



Service excellence received no responses

# Stakeholder Questions 9 & 10



9. What most threatens NCHC's mission?

Answer Options	Response Percent
Getting / keeping qualified staff	60.0%
Regional economy	40.0%
Other: The freeze on the tax levy by the state	40.0%
Internal politics and bureaucracy	20.0%
Old technology	0.0%
Cost of maintaining old buildings	0.0%
Competitors	0.0%

9. What opportunities do you think NCHC has to improve long term financial viability?

Answer Options	Response Percent
<b>Increase private insurance</b>	60.0%
Other: More Collaboration with County programs and services	40.0%
Improve operating efficiency	20.0%
Contract with insurers for care navigation / case management	20.0%
Privatize some services	0.0%
Form strategic alliances with large hospital(s)	0.0%
Structure an Accountable Care Organization	0.0%
Use telemedicine to improve access to care	0.0%

# Utilization Trends



**INPATIENT BEHAVIORAL HEALTH  
OUTPATIENT PSYCHIATRY  
NURSING HOME**



## Patient Days, Average Daily Census, and Occupancy

### Inpatient Behavioral Health

Based on Patient Days:

- MH patient volume is up, especially for age 65+
- Substance abuse patient volume is down
- Average Daily Census (ADC) is increasing
- Occupancy is increasing

#### Mental Health Patients

Age Group	Yr2012	Yr2013	Yr2014	Change	% Change
13-17	182	188	324	142	78%
18-64	3135	3322	3706	571	18%
65+	247	314	526	279	113%
Total Pt Days	3564	3824	4556	992	28%
ADC	9.8	10.5	12.5	2.7	28%

#### Substance Abuse Patients

Age Group	Yr2012	Yr2013	Yr2014	Change	% Change
13-17	2	0	0	-2	-100%
18-64	571	455	392	-179	-31%
65+	26	38	13	-13	-50%
Total Pt Days	599	493	405	-194	-32%
ADC	1.6	1.4	1.1	-0.5	-32%

#### Mental Health & Substance Abuse Patients

Age Group	Yr2012	Yr2013	Yr2014	Change	% Change
13-17	184	188	324	140	76%
18-64	3706	3777	4098	392	11%
65+	273	352	539	266	97%
Total Pt Days	4163	4317	4961	798	19%
ADC	11.4	11.8	13.6	2.2	19%
Occupancy	71%	74%	85%		14%



## Outpatient Visits

- Although the number of clients is about the same in 2012, 2013, and 2014, the number of visits declines by 116,964 visits, a 31% drop
- This is very unusual in an outpatient service but may be due to increasing no shows, cancellations, and lower staff productivity

Outpatient 2012-2014	Volume
2012 Clients	8,011
2012 Visits	377,833
2013 Clients	8,457
2013 Visits	330,596
2014 Clients	8,027
2014 Visits	260,869

## Outpatient Clients and Visits

### Outpatient Visits Trend 2012-2014

Yr2012	Yr2013	Yr2014	Change	% Change
377,833	330,596	260,869	- 116,964	-31%



### Nursing Home

Based on Patient Days:

- Overall volume is down by 10%
- The largest decrease is for traditional nursing home patients, age 65+
- In 2014, occupancy is down 11% from 2012, from 102% to 92%

Age Group	Yr2012	Yr2013	Yr2014	Change	% Change
18-64	10,125	11,255	9,823	-302	-3%
65+	79,662	73,236	70,664	-8998	-11%
<b>Total Pt Days</b>	89,787	84,491	80,487	-9300	-10%
ADC	246	231	221	-25.5	-10%
Occupancy	102%	96%	92%	-11%	-10%

# Financial



## TRENDS



" I DON'T KNOW WHAT IT MEANS IN THE STOCK MARKET, BUT  
IN THE MEDICAL PROFESSION IT MEANS YOU'RE DEAD ! "

# Financial Overview



- Medicaid is the primary payer, accounting for 31% of net revenue in 2015; private insurance is a very small payer, at 3%
- Human Service programs lose \$10.7M in 2015. 22% of the service line is funded through tax levies. The Inpatient Psychiatric Unit accounts for 19% of operating losses in this service line
- The Nursing Home loses \$1.7M in 2014 and 2015. Billing for Ancillary Services accounts for 25% of revenue in 2014 and 26 in 2015. Losses on Daily Services increase by 7% in 2015 compared to 2014. The Nursing Home requires a 7% tax levy to offset losses in 2015.
- Other Service programs lose \$375K in 2015 compared to \$363K in 2014, led by Protective Services which is expected to lose \$334K in 2015, a 9% increase in losses over 2014
- Collectively, NCHC expects to lose \$12.8M on Program Operations in 2015, about the same as in 2014. In 2015, the percent of program operations funded by Levies is 15%

# Payer Mix Trend



Payor	2014 Percent	2014 Net Revenue	2015 Percent	2015 Net Revenue	Change	Percent Change
MEDICAL ASSISTANCE	33%	19,208,000	31%	18,341,900	(866,100)	<b>-1.5%</b>
MEDICARE	15%	8,696,000	15%	8,809,100	113,100	0.2%
COUNTY APPROPRIATION	15%	8,762,305	15%	8,762,305	-	0.0%
FAMILY CARE	12%	6,792,000	11%	6,411,000	(381,000)	<b>-0.7%</b>
SELF PAY / OTHER COUNTY	5%	3,171,000	7%	4,172,300	1,001,300	1.7%
BASE COUNTY ALLOCATION	7%	3,900,000	7%	3,901,436	1,436	0.0%
SUPPLEMENTAL PAYMENT	3%	2,000,000	3%	2,000,000	-	0.0%
INSURANCE	3%	1,991,800	3%	1,980,800	(11,000)	0.0%
STATE ADDENDUMS	3%	1,570,000	3%	1,710,000	140,000	0.2%
DEPARTMENT / OTHER	2%	1,328,050	3%	1,474,389	146,339	0.2%
OTHER GRANTS	2%	1,008,200	2%	906,000	(102,200)	<b>-0.2%</b>
INTEREST INCOME	0%	100,000	1%	90,000	(10,000)	0.8%
	100%	58,527,355	101%	58,559,230	31,875	

Comparing 2014 and budgeted 2015: Medical Assistance declined significantly while Family Care and Other Grants declined slightly. Self Pay / Other County increased significantly.

# 2015 Budget by Program: Human Services



Human Services	2015	2015	Variance	2014	2014	Variance
	Budget	Budget	Funded by	Budget	Budget	Funded by
	Revenue	Expense	State BCA/ Appropriation	Revenue	Expense	State BCA/ Appropriation
Inpatient Behavioral Health	\$3,103,000	\$5,148,101	(\$2,045,101)	\$2,644,600	\$4,071,290	(\$1,426,690)
CBRF	\$386,000	\$803,749	(\$417,749)	\$421,000	\$583,735	(\$162,735)
AODA Day Hospital	\$108,000	\$186,768	(\$78,768)	\$142,600	\$273,320	(\$130,720)
AODA Residential	\$73,000	\$284,685	(\$211,685)	\$73,000	\$362,121	(\$289,121)
Outpatient Services	\$2,118,975	\$3,869,880	(\$1,750,905)	\$1,902,937	\$3,585,114	(\$1,682,177)
Psychiatry Services	\$397,648	\$2,316,022	(\$1,918,374)	\$612,711	\$2,811,558	(\$2,198,847)
Crisis Services	\$151,900	\$1,063,398	(\$911,498)	\$168,900	\$1,110,744	(\$941,844)
Community Treatment	\$4,864,240	\$6,371,550	(\$1,507,310)	\$3,458,650	\$5,593,794	(\$2,135,144)
Day Services	\$2,332,405	\$2,300,075	\$32,330	\$2,441,921	\$2,368,826	\$73,095
Clubhouse	\$293,847	\$448,847	(\$155,000)	\$227,034	\$442,034	(\$215,000)
Birth To Three	\$890,277	\$1,725,389	(\$835,112)	\$799,950	\$1,568,434	(\$768,484)
Group Homes	\$2,264,100	\$2,366,878	(\$102,778)	\$2,273,700	\$2,368,328	(\$94,628)
Supported Apartments	\$2,474,400	\$2,340,220	\$134,180	\$2,288,100	\$2,262,280	\$25,820
Children's Long Term Sup	\$146,181	\$354,939	(\$208,758)	\$153,878	\$332,890	(\$179,012)
Contracted Services		\$701,807	(\$701,807)	\$120,000	\$694,013	(\$574,013)
Aquatic Services	\$685,900	\$685,900	\$0	\$661,475	\$661,475	\$0
<b>Subtotal</b>	<b>\$20,289,873</b>	<b>\$30,968,208</b>	<b>(\$10,678,335)</b>	<b>\$18,390,456</b>	<b>\$29,089,956</b>	<b>(\$10,699,500)</b>

Human Service programs are expected to lose \$10.7M in 2015, led by the Inpatient Psychiatric Unit at \$2M

# 2014-2015 Budget by Program Comparison



Human Services Operations	Yr2014 Budget Operating Profit or (Loss)	Yr2015 Budget Operating Profit or (Loss)	Yr2014-2015 Change	Yr 2014-2015 Percent Change: Decrease or Increase in Loss	Note
Inpatient Behavioral Health	(\$1,426,690)	(\$2,045,101)	(\$618,411)	5.8%	Loss Increases
CBRF	(\$162,735)	(\$417,749)	(\$255,014)	2.4%	Loss Increases
AODA Day Hospital	(\$130,720)	(\$78,768)	\$51,952	0.5%	Loss Decreases
AODA Residential	(\$289,121)	(\$211,685)	\$77,436	1.0%	Loss Decreases
Outpatient Services	(\$1,682,177)	(\$1,750,905)	(\$68,728)	0.6%	Loss Increases
Psychiatry Services	(\$2,198,847)	(\$1,918,374)	\$280,473	3.0%	Loss Decreases
Crisis Services	(\$941,844)	(\$911,498)	\$30,346	0.3%	Loss Decreases
Community Treatment	(\$2,135,144)	(\$1,507,310)	\$627,834	6.0%	Loss Decreases
Day Services	\$73,095	\$32,330	(\$40,765)	0.4%	Profit Decreases
Clubhouse	(\$215,000)	(\$155,000)	\$60,000	1.0%	Loss Decreases
Birth To Three	(\$768,484)	(\$835,112)	(\$66,628)	0.6%	Loss Increases
Group Homes	(\$94,628)	(\$102,778)	(\$8,150)	0.1%	Loss Increases
Supported Apartments	\$25,820	\$134,180	\$108,360	1.0%	Profit Increases
Children's Long Term Sup	(\$179,012)	(\$208,758)	(\$29,746)	0.3%	Loss Increases
Contracted Services	(\$574,013)	(\$701,807)	(\$127,794)	1.2%	Loss Increases
Aquatic Services	\$0	\$0	\$0	0.0%	
<b>Subtotal</b>	<b>(\$10,699,500)</b>	<b>(\$10,678,335)</b>	<b>\$21,165</b>	<b>0.02%</b>	Loss Decreases

Inpatient Psychiatric increases losses by \$618K compared to 2014, a 6% increase in loss

# 2015 Budget by Program & Comparison 2014-2015: Nursing Home



## Nursing Home 2015 Budget

Nursing Home	Yr2014 Budget Revenue	Yr2014 Budget Expense	* Yr2014 Operating Profit or (Loss)	Percent of Total Nursing Home Profit (Loss)
Daily Services	\$19,987,157	\$22,600,166	(\$2,613,009)	-13%
Ancillary Services	\$6,488,700	\$5,575,691	\$913,009	5%
<b>Subtotal</b>	<b>\$26,475,857</b>	<b>\$28,175,857</b>	<b>(\$1,700,000)</b>	<b>-9%</b>

## Nursing Home 2014-2015 Budget Comparison

Nursing Home Operations	Yr2014 Budget Operating Profit or (Loss)	Yr2015 Budget Operating Profit or (Loss)	Yr2014-2015 Change	Yr 2014-2015 Percent Change: Decrease or Increase in Loss	Note
Daily Services	(\$2,613,009)	(\$2,797,686)	(\$184,677)	7%	Loss Increases
Ancillary Services	\$913,009	\$1,097,686	\$184,677	20%	Profit Increases
<b>Subtotal</b>	<b>(\$1,700,000)</b>	<b>(\$1,700,000)</b>	<b>\$0</b>	<b>0.0%</b>	<b>No Change</b>

Nursing Home losses on Daily Services increases \$185K between 2014 and 2015



# 2015 Budget by Program & Comparison 2014-2015: Other Services



## Other Services 2015 Budget

Other	2015 Budget Revenue	2015 Budget Expense	Variance Funded by State BCA / Appropriation	2014 Budget Revenue	2014 Budget Expense	Variance Funded by State BCA / Appropriation
Protective Services	\$227,000	\$560,664	(\$333,664)	\$228,500	\$534,602	(\$306,102)
Demand Transportation	\$438,718	\$438,718	\$0	\$423,238	\$423,238	\$0
Leased Space	\$239,300	\$281,040	(\$41,740)	\$247,000	\$303,703	(\$56,703)
<b>Subtotal</b>	<b>\$905,018</b>	<b>\$1,280,422</b>	<b>(\$375,404)</b>	<b>\$898,738</b>	<b>\$1,261,543</b>	<b>(\$362,805)</b>

## Other Services 2014-2015 Budget Comparison

Other	* Yr2014 Budget Operating Profit or (Loss)	* Yr2015 Budget Operating Profit or (Loss)	Yr2014-2015 Change	Yr 2014-2015 Percent Change: Decrease or Increase in Loss	Note
Protective Services	(\$306,102)	(\$333,664)	(\$27,562)	9.0%	Loss Increases
Demand Transportation	\$0	\$0	\$0	0.0%	No Change
Leased Space	(\$56,703)	(\$41,740)	\$14,963	26.4%	Loss Decreases
<b>Subtotal</b>	<b>(\$362,805)</b>	<b>(\$375,404)</b>	<b>(\$12,599)</b>	<b>3.5%</b>	Loss Increases

Protective Services increases it's loss by \$27.5K or by 9%



## 2015 Budget by Program: % of Program Funded by Tax Levies

- Human Services requires the greatest tax levy to offset operating losses
- The Inpatient Behavioral Health program loses the most of any NCHC program (\$2M) on operations

Service Line	2015 % of Program Funded by Levy
<b>Human Services</b>	
Inpatient Behavioral Health	39.24%
CBRF	51.48%
AODA Day Hospital	20.76%
AODA Residential	74.36%
Outpatient Services	12.37%
Psychiatry Services	31.15%
Crisis Services	40.01%
Community Treatment	7.48%
Day Services	0%
Clubhouse	34.53%
Birth To Three	48.40%
Group Homes	0%
Supported Apartments	0%
Children's Long Term Sup	58.82%
Contracted Services	100%
Aquatic Services	0%
<b>Subtotal</b>	<b>21.59%</b>
<b>Nursing Home</b>	
Daily Services	8.51%
Ancillary Services	
<b>Subtotal</b>	<b>6.46%</b>
<b>Other</b>	
Protective Services	59.51%
Demand Transportation	0%
Leased Space	14.85%
<b>Subtotal</b>	<b>29.32%</b>
<b>Total</b>	<b>14.96%</b>

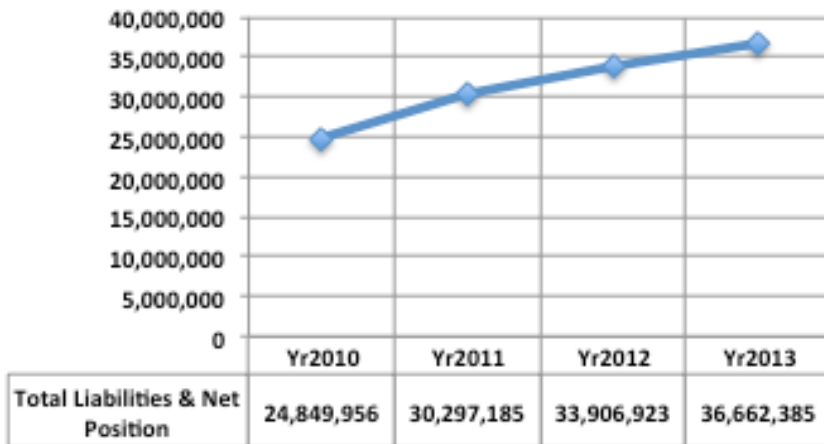
# Audited Financials



**2010 - 2013**

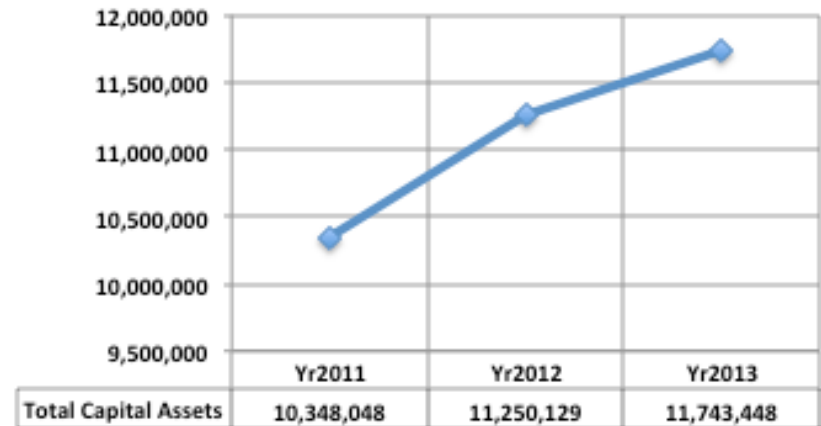
# Audited Financial Trends

## Total Liabilities & Net Position



Total Liabilities & Net Position increased by \$11.8M from 2010 to 2013, a 48% increase

## Total Capital Assets



Capital Assets (net of Accumulated Depreciation) increased \$1.4M from 2011 through 2013, a 13% increase (2010 was not available)

# Audited Financial Revenue & Expenses



## Revenue, Expenses, Changes in Net Position

Category	Yr2010	Yr2011	Yr2012	Yr2013	Change	Percent
Revenue:						
Net patient service	33,868,643	37,605,773	40,069,519	39,011,629	5,142,986	15%
Other	22,314,508	18,756,967	18,217,415	18,495,204	-3,819,304	-17%
<b>Total Revenue</b>	<b>56,183,151</b>	<b>56,362,740</b>	<b>58,286,934</b>	<b>57,506,833</b>	<b>1,323,682</b>	<b>2%</b>
Expenses:						
Health care services	41,239,688	39,679,472	40,131,889	39,937,170	-1,302,518	-3%
General & administrative	14,161,007	14,007,208	15,662,276	15,700,180	1,539,173	11%
<b>Total Expenses</b>	<b>55,400,695</b>	<b>53,686,680</b>	<b>55,794,165</b>	<b>55,637,350</b>	<b>236,655</b>	<b>0%</b>
<b>Operating Income</b>	<b>782,456</b>	<b>2,676,060</b>	<b>2,492,769</b>	<b>1,869,483</b>	<b>1,087,027</b>	<b>139%</b>
Non-Operating Income	80,130	104,295	95,588	97,697	17,567	22%
Income before contributed capital	862,586	2,780,355	2,588,357	1,967,180	1,104,594	128%
Contributions from counties for capital assets	74,086	113,533	1,890,451	792,215	718,129	969%
Change in net position	936,672	2,893,888	4,478,808	2,759,395	1,822,723	195%
Net Position at beginning	17,430,654	18,367,326	21,261,214	25,740,022	8,309,368	48%
<b>Net Position at end</b>	<b>18,367,326</b>	<b>21,261,214</b>	<b>25,740,022</b>	<b>28,499,417</b>	<b>10,132,091</b>	<b>55%</b>

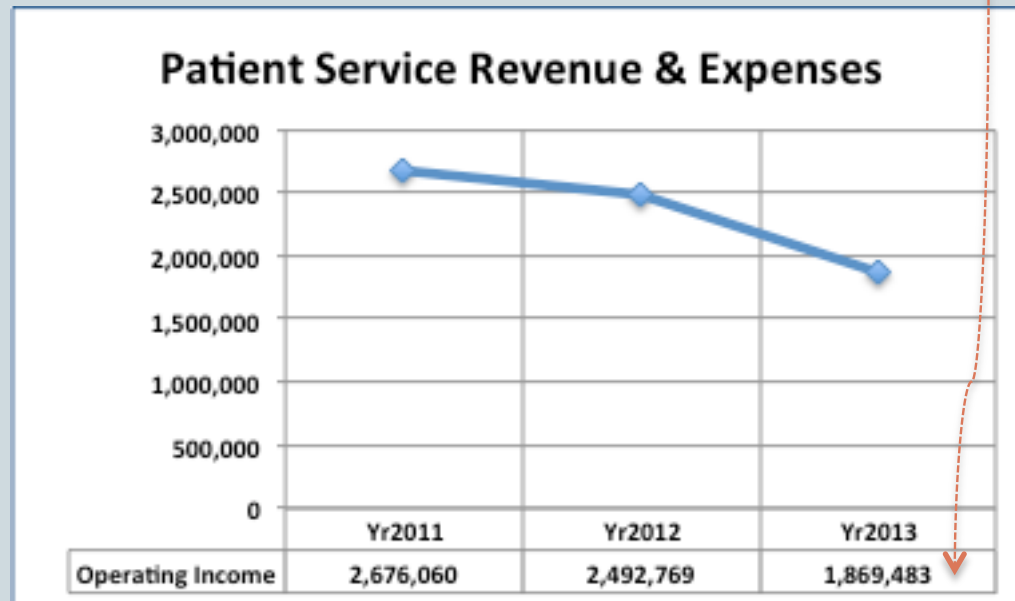
Net position improves by \$10.1M over the four year period, a 55%.

# Audited Financials: Patient Service Revenue & Expenses



- Patient Service Revenues & Expenses decline from 2011 through 2013

Patient Service Revenue & Expenses	Yr2011	Yr2012	Yr2013	Change	Percent
Net Patient Service Revenue	37,605,773	40,069,519	39,011,629	1,405,856	4%
Other Revenue	18,756,967	18,217,415	18,495,204	-261,763	-1%
Total Revenue	56,362,740	58,286,934	57,506,833	1,144,093	2%
Total Expenses	53,686,680	55,794,165	55,637,350	1,950,670	4%
Operating Income	2,676,060	2,492,769	1,869,483	-806,577	<b>-30%</b>

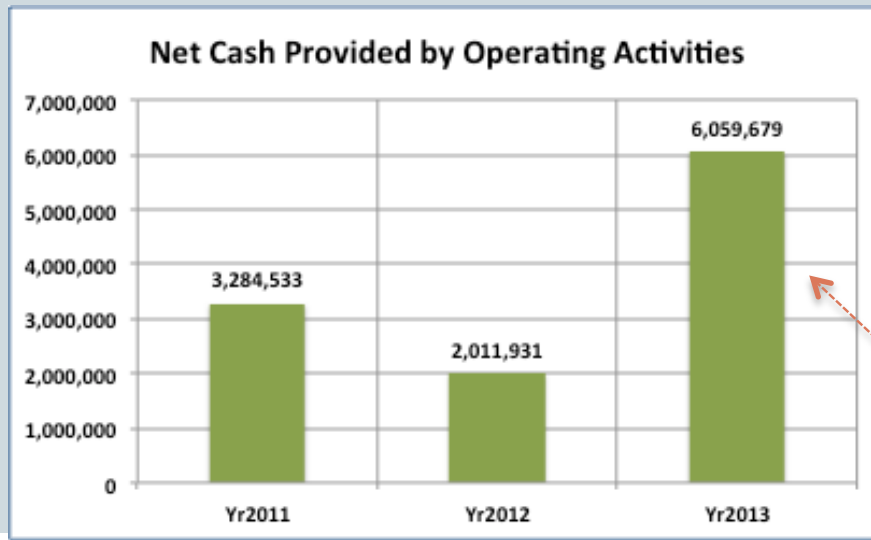


- During this time total revenue increased 2% while expenses increased 4%
- The drop in operating income is significant at **30%**

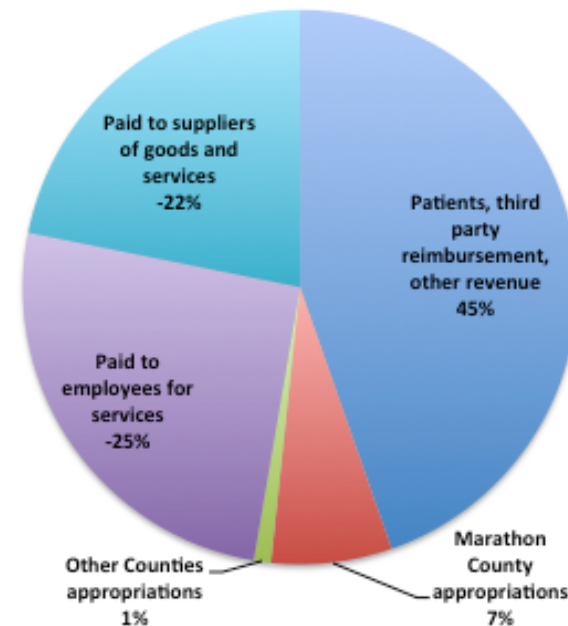
# Audited Financial Cash Flow

Patient Service Revenue & Expenses	Yr2012	Yr2013
Patients, third party reimbursement, other revenue	47,854,468	50,873,381
Marathon County appropriations	7,747,995	8,021,804
Other Counties appropriations	911,918	1,132,713
Paid to employees for services	-28,817,891	-29,045,513
Paid to suppliers of goods and services	-25,653,959	-24,891,806
Net cash provided by operating activities	2,011,931	6,059,679

- In 2013, 48% of cash revenue comes from patient and third party payers
- Payments to employees account for 25% of cash expenditures



**Patient Service Revenues & Expenses Cash, Percent of Total by Source Yr2013**



Net Cash from operations increased 200% between 2011 and 2013

# Client Origin



**GEOGRAPHICAL SOURCE OF NCHC CLIENTS  
FOR INPATIENT BEHAVIORAL HEALTH AND  
NURSING HOME PROGRAMS**



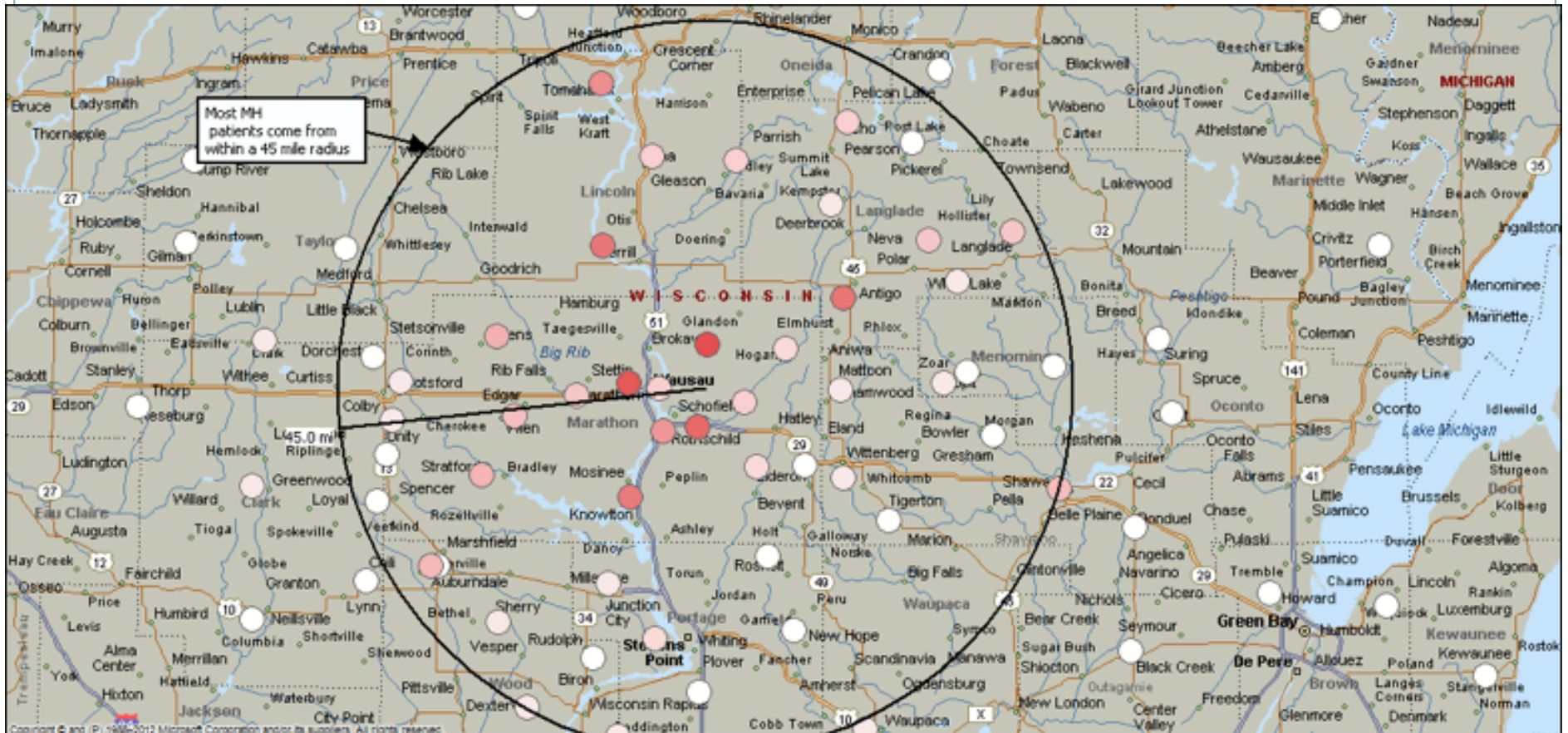
# Patient Origin Summary



- **Inpatient Behavioral Health:**
  - Most mental health patients come from within a 45 mile radius, although some come from up to a 100 miles away
  - Most substance abuse patients come from within a 25 mile radius, with some from up to 40 miles away
- **Nursing Home:**
  - Most nursing home patients come from within a 40 mile radius, although quite a few come from as far away as Green Bay
- **These two services may benefit from some sub specialization, alignment with health care systems, and targeted marketing / referral development**

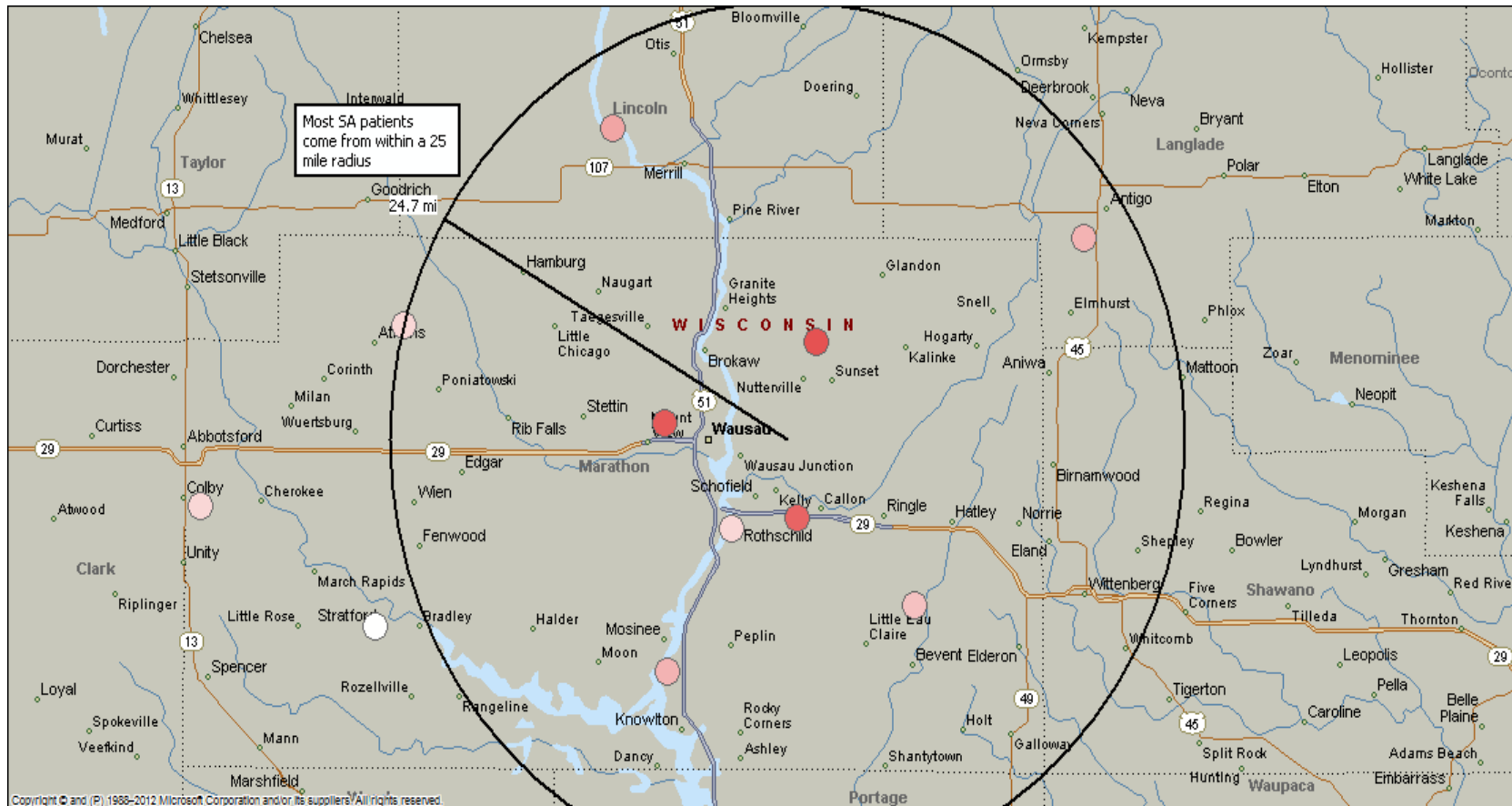


# Inpatient Behavioral Health: MH Patient Origin



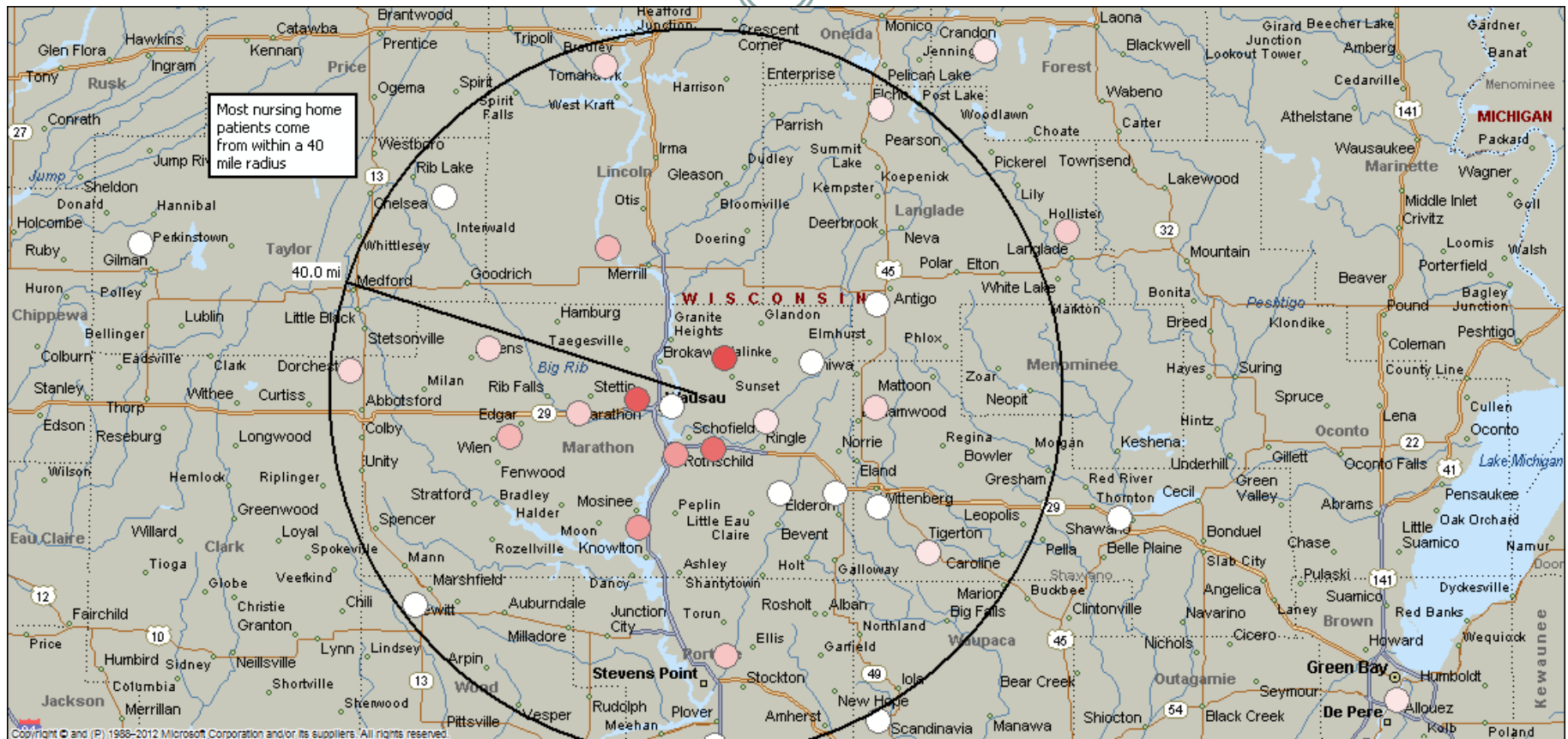
Most mental health patients come from within a 45 mile radius of Wausau but some come from upwards of a 100 miles away.

# Inpatient Behavioral Health: Substance Abuse Patients Origin



Most substance abuse patients come from within a 25 mile radius of Wausau but some come from upwards of a 40 miles away.

# Nursing Home Patients Origin



Most Nursing Home patients come from within a 40 mile radius, although some come from as far away as Green Bay

# Discussion



# NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD EXECUTIVE COMMITTEE MEETING MINUTES

February 05, 2015

10:00 AM

NCHC – Wausau Campus

PRESENT: Ron Nye, Lee Olkowski, Laura Scudiere (via phone)

ALSO PRESENT: Bill Metter, Jeff Zriny (via phone), Michael Loy, Gary Bezucha, Steve Schafer and Neil Shapiro of Schafer Consulting (via phone)

EXCUSED: Bob Weaver

## AGENDA:

1. The meeting was called to order by Ron Nye at 10:00 AM and a quorum was noted.
2. Strategic planning discussion consisted of:
  - Review/discussion of attached agenda.

Several items were noted/discussed:

- Getting out of the nursing home business is not on the table; financial performance of nursing home should be reviewed
  - Substance abuse services are critical to maintain
  - Residential AODA program is critical to establish
  - Must maintain expected services as stated in state statutes
  - Interested in exploring expansion into 'new territory'
  - Involvement with forming Accountable Care Organizations (ACOs)
  - Explore affiliations with other governmental functions to focus on community behavioral issues and improved relationships with justice system
  - Establish/improve working relationship with area hospitals/emergency rooms
  - The retreat will include reviewing the mission and vision of the organization
3. Adjourn: **Motion** by Olkowski, second by Nye to adjourn. Motion carried. Meeting adjourned at 10:40 AM.

*dko*

## NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD EXECUTIVE COMMITTEE MEETING MINUTES

March 10, 2015

10:30 AM

NCHC – Wausau Campus

PRESENT: Ron Nye, Laura Scudiere, Lee Olkowski

ALSO PRESENT: Gary Bezucha

EXCUSED: Bob Weaver

### AGENDA:

1. The meeting was called to order by Ron Nye at 10:35 AM and a quorum was noted.
2. Minutes of 2/05/15 and 2/10/15 Executive Committee meetings: moved for approval by Laura Scudiere, seconded by Lee Olkowski and approved unanimously without changes.
3. CEO Report:
  - a. Aquatic Therapy Program: Final report from USA Aquatics should be available for April NCHC Board meeting. Fund raising committee has obtained commitments on \$275,000 for the project.
  - b. Nursing Home Renovation Project: Bids will be opened on 3/12/15 and will be able to report out on this to Nursing Home Operations Committee on Friday. Marathon County is working on the bond issue and we still anticipate that it will go to the County Board at the April meeting for final vote.
4. Contracts developed by Marathon County Governance Task Force: Three contracts have been developed by the governance task force and these will go to the NCHC Board for approval in either April or May. They include: 1) revised Joint County Contract, 2) revised Nursing Home Management Agreement and, 3) revised Marathon County Use Agreement. Drafts of these agreements are being reviewed next week by the Task Force.
5. Items to be included on agenda for 3/26/15 NCHC Board meeting:
  - a. Audit: for action
  - b. Update on state budget: information only
6. **Motion** for adjournment by Lee Olkowski, seconded by Laura Scudiere. The meeting was adjourned by Ron Nye at 11:15 AM

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD  
EXECUTIVE COMMITTEE MEETING MINUTES**

**March 31, 2015**

**11:30 AM**

**NCHC – Wausau Campus**

PRESENT: Ron Nye, Laura Scudiere, Lee Olkowski, Bob Weaver

AGENDA:

1. The meeting was called to order by Ron Nye at 10:40 AM and a quorum was noted.
2. Strategic Planning Discussion: Steve Schafer and Neil Shapiro facilitated a discussion on the strategic planning process and provided an overview of the discussion anticipated to take place at tomorrow's board retreat.
3. **Motion** for adjournment by Laura Scudiere, seconded by Lee Olkowski. The meeting was adjourned by Ron Nye at 12:30 PM.



**NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD  
EXECUTIVE COMMITTEE MEETING MINUTES**

**April 14, 2015**

**10:30 AM**

**NCHC – Wausau Campus**

Present: Ron Nye, Bob Weaver, Laura Scudiere, Lee Olkowski

Also present: Gary Bezucha

**AGENDA:**

1. The meeting was called to order by Ron Nye at 10:30 AM and a quorum was noted.
2. Minutes of 3/10/15 and 3/31/15 meetings: Moved for approval of both sets of minutes by Bob Weaver, seconded by Laura Scudiere, and approved unanimously without any changes.
3. CEO Report:
  - a. Marathon County Governance Task Force Update: The Marathon County Governance Task Force has completed its recommendations for changes to the current Three-County Agreement. The proposed changes will be reviewed by a committee of the corporation counsels of all three counties and legal counsel for NCHC prior to going to the NCHC board for approval and eventually to the boards of all three counties.
  - b. Wood County: We have had some very informal discussions with representatives from Wood County on potential opportunities for collaboration on in-patient mental health.
  - c. JCAHO Preparation: We are anticipating our JCAHO accreditation survey in June. We will provide education for the board at the May board meeting.
  - d. Mental Health Services to the Marathon County Jail: Discussed current efforts underway to improve the level of mental health service to the Marathon County Jail and the establishment of an independent task force. Recommendation from Executive Committee to put this on the agenda for the next board meeting as this is an issue that impacts all three counties.
  - e. Just Like Us: the Executive Committee is encouraging the entire board to support this fund-raiser sponsored by the North Central Health Foundation.
4. Update on Aquatic Therapy Program: USA Aquatics presented their final report to the Marathon County Health and Human Services Committee. That committee will make a decision on a recommendation at its April meeting.
5. Update on Strategic Planning: Schafer Consulting will be making their preliminary report around the first of May.
6. Update on Nursing Home Renovation Project: Marathon County board will be voting on an issuance resolution at its April meeting. We anticipate construction will start in late May or early June.
7. Items to be included on the agenda for 4/30/15 NCCSP Board meeting:
  - a. Mental Health Services to the criminal justice system: Discussion
  - b. Nursing Home Renovation: Update
  - c. Aquatic Therapy Program: Update
8. Moved to adjourn by Lee Olkowski, seconded by Laura Scudiere, meeting was adjourned by Ron Nye at 11:15 AM.



QUALITY OUTCOME DASHBOARD

DEPARTMENT: NORTH CENTRAL HEALTH CARE

FISCAL YEAR: 2015

PRIMARY OUTCOME GOAL	TARGET (Rating 2)	↑ ↓	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD	2014
<b>CLINICAL</b>																
Nursing Home Readmission Rate	5-7%	↓	24.2%	13.8%	9.1%										19.4%	4.8%
Psychiatric Hospital Readmission Rate	9-11%	↓	11.0%	9.3%	13.9%										11.4%	10.0%
AODA Relapse Rate	18-21%	↓	17.9%	25.0%	31.3%										24.7%	10.8%
NCHC Adverse Event Rate	3.8-4.0	↓	3.5	4.1	4.3										4	4.1
<b>PEOPLE</b>																
Injury Claims*	50-60	↓	24	18	24										24	n/a
Employee Turnover Rate*	20-23%	↓	21.0%	20.2%	18.4%										18.4%	25.5%
<b>SERVICE</b>																
Client/Patient/ Resident Satisfaction Percentile Rank	58-66 Percentile	↑	66th	70th	39th										58th	59th
Community Partner Satisfaction Percent Good/Excellent	75-80%	↑	\	68%	\										68%	71%
<b>COMMUNITY</b>																
Community Employment Rate	15.8-18%	↑	27.2%	25.2%	22.9%										25.0%	n/a
NCHC Access Measure	90-95%	↑	98%	98%	91%										96%	n/a
Recidivism Rate for OWI	27-32%	↓	31.37%	26.32%	24.40%										28.90%	31.30%
<b>FINANCE</b>																
Direct Expense/Gross Patient Revenue	55-59%	↓	61%	51%	59%										57%	59.7%
Days in Account Receivable	55-60	↓	80	79	75										75	79
Write-Off Percent of Gross Revenue	.5-.6%	↓	0.18%	0.27%	0.32%										0.26%	n/a

KEY: ↑ Higher rates are positive

↓ Lower rates are positive

\* Monthly Rates are Annualized

## NCHC OUTCOME DEFINITIONS

### CLINICAL

<b>Nursing Home Readmission Rate</b>	Percent of Nursing Home Medicare residents rehospitalized within 30 days of admission to the Nursing Home.
<b>Psychiatric Hospital Readmission Rate</b>	Percent of patients who are readmitted within 30 days of discharge from the Inpatient Behavioral Health hospital.
<b>AODA Relapse Rate</b>	Percent for patients admitted to Ambulatory Detoxification or the Behavioral Health hospital for detoxification then readmitted within 30 days of discharge for repeat detoxification.
<b>NCHC Adverse Event Rate</b>	Rate of client/patient/resident occurrences that are considered adverse events per 1000 patient days/visits. Adverse events are occurrences with a high potential for harm, injury or adverse outcome due to human error, process failure or environmental factors.

### PEOPLE

<b>Injury Claims</b>	The number of employee injuries with associated worker's compensation claims. Monthly figures represent an annualized rate.
<b>Employee Turnover Rate</b>	Percent of employee terminations (voluntary and involuntary) of the total workforce. Monthly figures represent an annualized rate.

### SERVICE

<b>Client/Patient/Resident Satisfaction Percentile Rank</b>	Comparison rate (to other organizations in the Health Stream database) of the percent of level 9 and 10 responses to the Overall rating question on the survey.
<b>Community Partner Satisfaction Percent Good/Excellent</b>	Percentage of "Good and Excellent" responses to the Overall Satisfaction question on the survey.

### COMMUNITY

<b>Community Employment Rate</b>	Percent of Community Treatment, Prevocational, and Community Corner Clubhouse clients receiving vocational support/services who are employed.
<b>NCHC Access Measure</b>	% of clients obtaining services within the Best Practice timeframes in NCHC programs.
<b>Recidivism Rate for OWI</b>	Percentage of AODA clients who receive treatment at NCHC that have 2 or more OWI convictions.

### FINANCE

<b>Direct Expense/Gross Patient Revenue</b>	Percentage of total direct expense compared to gross revenue.
<b>Days in Account Receivable</b>	Average number of days for collection of accounts.
<b>Write-Off percent</b>	Write-offs as a percent of gross revenue

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM  
QUALITY COMMITTEE MEETING MINUTES**

**March 23, 2015, 8:00 a.m.**

**NCHC – Wausau Campus**

Present: Darren Bienvenue, Dr. Eric Penniman, Bill Miller, Laura Scudiere

Excused: Jean Burgener, Holly Matucheski

Also present: Gary Bezucha, Becky Schultz, Gretchen Brown, Michael Loy, Toni Simonson, Dianna Schlicher

The meeting was called to order at 8:01 a.m.; roll call was noted and a quorum declared. Moments of excellence were shared.

Minutes

- **Motion**/second by Penniman/Miller to approve the minutes of the January 15, 2015, meeting. Motion carried.

Outcome Data/Safety

- Discussion was held on the nursing home readmission rate. Hospitals and national benchmarks are moving to calculating readmissions within 30 days to hospital over total admissions.
- **Motion**/second by Penniman/Bienvenue to change the calculation method for nursing home readmission rate to readmissions within 30 days to hospital over total admissions, recalculate the previous two (2) months and revise the target to 11-13 (Level 2). Motion carried.
- **Motion**/second by Penniman/Bienvenue to approve the Outcome Data and Safety information as presented. Motion carried.
- Discussion about mental health services provided for the jail population. Staff is working with the jail administrator to develop a workflow and will continue to report back on the progress.

Closed Session

- **Motion**/second by Penniman/Bienvenue to adjourn into Closed Session, pursuant to Section 19.85(1)(c) and (f) Wis. Stats. for the purpose of considering employment and performance evaluation of any public employee over which the governmental body exercises responsibility, and preliminary consideration of specific personnel problems, which if discussed in public, would likely have a substantial adverse effect upon the reputation of any person referred to in such problems, including specific review of performance of employees and providers of service and review of procedures for providing services by Agency and to allow staff to remain. Motion carried and moved into closed session at a.m. Roll Call taken, Yes=4, No=0.
- **Motion**/second by Penniman/Bienvenue to approve the closed session minutes of January 15, 2015.
- **Motion**/second by Penniman/Bienvenue to come out of closed session. Motion carried.
- No announcements from closed session.

Compliance Auditing

- A Corporate Compliance Committee Workgroup was developed to define proactive auditing to be completed, including the timeliness on histories/physicals, progress notes and treatment plans and questionable billing issues.

- Reports will be provided to the Corporate Compliance Committee and also the Quality Committee of the Board.

#### Staff Competency Validation

- At the Quality Committee's request, Human Resources staff provided an overview of steps taken to ensure and validate staff competency.

#### Annual Review of Safety Plans

- Plans were previously reviewed, no changes have been made to either.
- **Motion**/second by Penniman/Bienvenue to approve the Safety Plans; motion carried.

#### Joint Commission Education

- Reviewed common questions of Joint Commission and the Joint Commission process.
- Protecting the rights of patients/clients/residents is critical component of NCHC.
- Three (3) key process improvement teams are in place for the year. As outcome measures are not being met, staff also uses an action plan to investigate and focus on improvement.

#### Future Agenda Items

None proposed.

- **Motion**/second by Penniman/Miller to adjourn at 9:21 a.m. Motion carried.

*dls*



## MEMO

**TO:** North Central Health Care Finance Committee  
**FROM:** Brenda Glodowski  
**DATE:** March 17, 2015  
**RE:** Attached Financials

Attached please find a copy of the February financial statements for your review. To assist you in your review, the following information is provided.

### **BALANCE SHEET**

Accounts Receivable will continue to be a priority through this year. Progress is being made with reducing this area. Cash continues to remain adequate for operations.

### **STATEMENT OF REVENUE AND EXPENSES**

The month of February shows a gain of \$590,280 compared to a budgeted gain of \$117,322, resulting in a positive variance of \$472,958.

The hospital had a busy month, averaging almost 16 patients per day, compared to the target of 13. The CBRF has also had an increase in volume, resulting in increased revenue. The nursing home also exceeded targets for February, averaging almost 215 per day. The target is 213. The Medicare census averaged 34 per day, compared to the target of 26. Outpatient areas also had an improvement in revenue compared to January.

Overall expenses for February were well below targets. Overall employee benefits were below budget targets, with health insurance being a significant contributor to this. A credit was received from the state institutions, which helped reduce this expense for February. Utilities were under budget in February due to the milder weather. There are also a number of vacant positions, which contributed to salaries being below targets. Some of these have been filled, and will be reflected in the coming months.

Through February, the overall organization shows a gain of \$601,174 compared to the targeted gain of \$174,290. The Human Services Program shows a gain of \$531,238 and the Nursing Home shows a gain of \$69,936.

If you have any questions, please feel free to contact me.

**NORTH CENTRAL HEALTH CARE  
COMBINING STATEMENT OF NET ASSETS  
FEBRUARY 2015**

	<u>51.42/.437</u> <u>PROGRAM</u>	NURSING <u>HOME</u>	<u>TOTAL</u>	<u>TOTAL</u> <u>28-Feb-14</u>
<b>CURRENT ASSETS:</b>				
CASH AND EQUIVALENTS	6,019,661	(106,124)	5,913,537	7,343,572
SHORT-TERM INVESTMENTS	7,029,482		7,029,482	6,495,769
CASH FOR APPROVED CAPITAL PURCHASES	1,768,453	502,066	2,270,518	1,804,231
DONATED FUNDS	184,015		184,015	131,489
<b>ACCOUNTS RECEIVABLE:</b>				
PATIENT (NET)	4,547,277	4,443,155	8,990,432	5,258,427
STATE GRANTS	410,742		410,742	289,970
OTHER	254,315		254,315	320,776
APPROPRIATIONS RECEIVABLE	0		0	1,321,698
AMOUNTS RECEIVABLE FROM				
THIRD-PARTY REIMBURSEMENT PROGRAMS	382,667	333,332	715,999	833,499
INVENTORY	16,920	256,902	273,822	331,005
OTHER	<u>476,777</u>	<u>64,904</u>	<u>541,681</u>	<u>662,384</u>
<b>TOTAL CURRENT ASSETS</b>	<u>21,090,308</u>	<u>5,494,235</u>	<u>26,584,543</u>	<u>24,792,820</u>
<b>CAPITAL ASSETS</b>				
CAPITAL ASSETS	29,477,229	14,560,773	44,038,002	42,621,186
ACCUMULATED DEPRECIATION	<u>(21,986,874)</u>	<u>(10,635,389)</u>	<u>(32,622,262)</u>	<u>(31,142,946)</u>
<b>CAPITAL ASSETS - NET</b>	<u>7,490,355</u>	<u>3,925,385</u>	<u>11,415,740</u>	<u>11,478,240</u>
<b>OTHER ASSETS - DEFERRED CHARGES</b>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
<b>RESTRICTED ASSETS - PATIENT TRUST FUNDS</b>	<u>9,633</u>	<u>36,975</u>	<u>46,608</u>	<u>334,745</u>
<b>TOTAL ASSETS</b>	<u>28,590,297</u>	<u>9,456,595</u>	<u>38,046,891</u>	<u>36,605,804</u>

**NORTH CENTRAL HEALTH CARE  
COMBINING STATEMENT OF NET ASSETS  
FEBRUARY 2015**

	<u>51.42/.437 PROGRAM</u>	<u>NURSING HOME</u>	<u>TOTAL</u>	<u>TOTAL 28-Feb-14</u>
<b>CURRENT LIABILITIES:</b>				
ACCOUNTS PAYABLE	3,179,004	0	3,179,004	2,981,002
THIRD PARTY PAYABLE	415,000	0	415,000	466,000
APPROPRIATIONS ADVANCES	713,175	0	713,175	80,993
<b>ACCRUED LIABILITIES:</b>				
SALARIES & RETIREMENT	1,428,493	0	1,428,493	2,134,100
PAYROLL TAXES AND WITHHOLDING	155,832	0	155,832	235,870
COMPENSATED ABSENCES	1,564,169	0	1,564,169	1,549,250
OTHER PAYABLES	72,806	0	72,806	0
DEFERRED REVENUE - STATE GRANTS	<u>188,442</u>		<u>188,442</u>	<u>188,167</u>
<b>TOTAL CURRENT LIABILITIES</b>	<u>7,716,921</u>		<u>7,716,921</u>	<u>7,635,382</u>
PATIENT TRUST FUNDS	<u>9,633</u>	<u>36,894</u>	<u>46,527</u>	<u>334,526</u>
<b>NET ASSETS:</b>				
INVESTED IN CAPITAL ASSETS	7,490,355	3,925,385	11,415,740	11,478,240
UNRESTRICTED	12,842,149	5,424,380	18,266,530	17,021,177
OPERATING INCOME(LOSS)	<u>531,238</u>	<u>69,936</u>	<u>601,174</u>	<u>136,478</u>
<b>TOTAL NET ASSETS</b>	<u>20,863,742</u>	<u>9,419,701</u>	<u>30,283,444</u>	<u>28,635,896</u>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<u>28,590,297</u>	<u>9,456,595</u>	<u>38,046,891</u>	<u>36,605,804</u>

**NORTH CENTRAL HEALTH CARE  
COMBINING STATEMENT OF REVENUES AND EXPENSES  
FOR PERIOD ENDING FEBRUARY 28, 2015**

<b>51.42/.437 PROGRAMS</b>	<u>CURRENT MONTH ACTUAL</u>	<u>CURRENT MONTH BUDGET</u>	<u>CURRENT MONTH VARIANCE</u>	<u>YTD ACTUAL</u>	<u>YTD BUDGET</u>	<u>YTD VARIANCE</u>
<b>REVENUE</b>						
Net Patient Service Revenue	<u>\$1,429,437</u>	<u>\$1,342,889</u>	<u>\$86,548</u>	<u>\$2,702,046</u>	<u>\$2,815,191</u>	<u>(\$113,145)</u>
<b>OTHER REVENUE</b>						
State Match / Addendum	325,060	325,120	(59)	650,120	650,239	(119)
Grant Revenue	170,072	183,743	(13,671)	343,897	367,856	(23,959)
County Appropriations - Net	594,566	588,525	6,041	1,189,132	1,177,051	12,082
Departmental and Other Revenue	<u>106,984</u>	<u>145,825</u>	<u>(38,841)</u>	<u>233,351</u>	<u>291,650</u>	<u>(58,299)</u>
Total Other Revenue	<u>1,196,682</u>	<u>1,243,213</u>	<u>(46,531)</u>	<u>2,416,500</u>	<u>2,486,796</u>	<u>(70,295)</u>
<b>TOTAL REVENUE</b>	<b>2,626,119</b>	<b>2,586,102</b>	<b>40,017</b>	<b>5,118,546</b>	<b>5,301,987</b>	<b>(183,441)</b>
<b>EXPENSES</b>						
Direct Expenses	1,582,422	1,748,569	(166,147)	3,384,264	3,646,633	(262,369)
Indirect Expenses	<u>533,073</u>	<u>750,816</u>	<u>(217,743)</u>	<u>1,222,235</u>	<u>1,537,017</u>	<u>(314,782)</u>
Total Expenses	<u>2,115,495</u>	<u>2,499,385</u>	<u>(383,890)</u>	<u>4,606,499</u>	<u>5,183,650</u>	<u>(577,151)</u>
Operating Income (Loss)	<u>510,624</u>	<u>86,717</u>	<u>423,907</u>	<u>512,047</u>	<u>118,337</u>	<u>393,710</u>
<b>Nonoperating Gains (Losses):</b>						
Interest Income	5,930	7,500	(1,570)	11,770	15,000	(3,230)
Donations and Gifts	5,497	0	5,497	7,421	0	7,421
Gain / (Loss) on Disposal of Assets	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total Nonoperating Gains / (Losses)	<u>11,427</u>	<u>7,500</u>	<u>3,927</u>	<u>19,191</u>	<u>15,000</u>	<u>4,191</u>
Operating Income / (Loss)	<u>\$522,051</u>	<u>\$94,217</u>	<u>\$427,834</u>	<u>\$531,238</u>	<u>\$133,337</u>	<u>\$397,901</u>



**NORTH CENTRAL HEALTH CARE  
COMBINING STATEMENT OF REVENUES AND EXPENSES  
FOR PERIOD ENDING FEBRUARY 28, 2015**

<b>NURSING HOME</b>	CURRENT MONTH <u>ACTUAL</u>	CURRENT MONTH <u>BUDGET</u>	CURRENT MONTH <u>VARIANCE</u>	YTD <u>ACTUAL</u>	YTD <u>BUDGET</u>	YTD <u>VARIANCE</u>
REVENUE						
Net Patient Service Revenue	<u>\$1,928,679</u>	<u>\$1,909,865</u>	<u>\$18,814</u>	<u>\$3,965,688</u>	<u>\$3,951,547</u>	<u>\$14,142</u>
OTHER REVENUE						
County Appropriations - Net	141,666	141,667	(1)	283,333	283,333	(0)
Departmental and Other Revenue	<u>31,268</u>	<u>34,833</u>	<u>(3,565)</u>	<u>62,974</u>	<u>69,666</u>	<u>(6,692)</u>
Total Other Revenue	<u>172,934</u>	<u>176,500</u>	<u>(3,566)</u>	<u>346,307</u>	<u>353,000</u>	<u>(6,693)</u>
TOTAL REVENUE	2,101,613	2,086,365	15,248	4,311,996	4,304,547	7,449
EXPENSES						
Direct Expenses	1,425,875	1,451,283	(25,409)	3,074,297	3,010,796	63,501
Indirect Expenses	<u>607,737</u>	<u>611,978</u>	<u>(4,241)</u>	<u>1,168,364</u>	<u>1,252,797</u>	<u>(84,433)</u>
Total Expenses	<u>2,033,611</u>	<u>2,063,261</u>	<u>(29,650)</u>	<u>4,242,660</u>	<u>4,263,593</u>	<u>(20,933)</u>
Operating Income (Loss)	<u>68,001</u>	<u>23,104</u>	<u>44,898</u>	<u>69,335</u>	<u>40,953</u>	<u>28,382</u>
Nonoperating Gains (Losses):						
Interest Income						
Donations and Gifts	0	0	0	0	0	0
Gain / (Loss) on Disposal of Assets	227	0	227	601	0	601
	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total Nonoperating Gains / (Losses)	<u>227</u>	<u>0</u>	<u>227</u>	<u>601</u>	<u>0</u>	<u>601</u>
Operating Income / (Loss)	<u>\$68,228</u>	<u>\$23,104</u>	<u>\$45,124</u>	<u>\$69,936</u>	<u>\$40,953</u>	<u>\$28,982</u>

**NORTH CENTRAL HEALTH CARE  
COMBINING STATEMENT OF REVENUES AND EXPENSES  
FOR PERIOD ENDING FEBRUARY 28, 2015**

<b>TOTAL</b>	CURRENT MONTH <u>ACTUAL</u>	CURRENT MONTH <u>BUDGET</u>	CURRENT MONTH <u>VARIANCE</u>	YTD <u>ACTUAL</u>	YTD <u>BUDGET</u>	YTD <u>VARIANCE</u>
REVENUE						
Net Patient Service Revenue	<u>\$3,358,116</u>	<u>\$3,252,754</u>	<u>\$105,362</u>	<u>\$6,667,734</u>	<u>\$6,766,738</u>	<u>-\$99,003</u>
OTHER REVENUE						
State Match / Addendum	325,060	325,120	(59)	650,120	650,239	(119)
Grant Revenue	170,072	183,743	(13,671)	343,897	367,856	(23,959)
County Appropriations - Net	736,232	730,192	6,040	1,472,465	1,460,384	12,081
Departmental and Other Revenue	<u>138,252</u>	<u>180,658</u>	<u>(42,406)</u>	<u>296,325</u>	<u>361,317</u>	<u>(64,991)</u>
Total Other Revenue	<u>1,369,617</u>	<u>1,419,713</u>	<u>(50,096)</u>	<u>2,762,808</u>	<u>2,839,796</u>	<u>(76,988)</u>
TOTAL REVENUE	4,727,733	4,672,468	55,266	9,430,542	9,606,533	(175,991)
EXPENSES						
Direct Expenses	3,008,297	3,199,853	(191,556)	6,458,561	6,657,429	(198,868)
Indirect Expenses	<u>1,140,810</u>	<u>1,362,794</u>	<u>(221,984)</u>	<u>2,390,599</u>	<u>2,789,814</u>	<u>(399,215)</u>
Total Expenses	<u>4,149,107</u>	<u>4,562,646</u>	<u>(413,539)</u>	<u>8,849,160</u>	<u>9,447,243</u>	<u>(598,083)</u>
Operating Income (Loss)	<u>578,626</u>	<u>109,822</u>	<u>468,804</u>	<u>581,382</u>	<u>159,290</u>	<u>422,092</u>
Nonoperating Gains (Losses):						
Interest Income	5,930	7,500	(1,570)	11,770	15,000	(3,230)
Donations and Gifts	5,724	0	5,724	8,022	0	8,022
Gain / (Loss) on Disposal of Assets	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total Nonoperating Gains / (Losses)	<u>11,654</u>	<u>7,500</u>	<u>4,154</u>	<u>19,792</u>	<u>15,000</u>	<u>4,792</u>
Operating Income / (Loss)	<u>\$590,280</u>	<u>\$117,322</u>	<u>\$472,958</u>	<u>\$601,174</u>	<u>\$174,290</u>	<u>\$426,884</u>



North Central Health Care

Person centered. Outcome focused.

NORTH CENTRAL HEALTH CARE  
REPORT ON AVAILABILITY OF FUNDS

February 28, 2015

FUNDS REQUIRED TO MEET CURRENT OPERATIONAL NEEDS:

BANK	LENGTH	MATURITY DATE	INTEREST RATE	AMOUNT
BMO Harris	395 Days	04/28/2015	0.35%	\$500,000
People's State Bank	365 Days	04/29/2015	0.50%	\$350,000
People's State Bank	365 Days	04/30/2015	0.50%	\$500,000
Abby Bank	365 Days	05/03/2015	0.55%	\$500,000
CoVantage Credit Union	365 Days	05/28/2015	0.55%	\$500,000
Abby Bank	365 Days	05/30/2015	0.55%	\$500,000
BMO Harris	395 Days	07/26/2015	0.30%	\$500,000
Abby Bank	365 Days	07/05/2015	0.55%	\$500,000
Abby Bank	365 Days	07/19/2015	0.55%	\$500,000
People's State Bank	365 Days	08/21/2015	0.45%	\$500,000
Abby Bank	365 Days	08/29/2015	0.45%	\$500,000
CoVantage Credit Union	456 Days	10/01/2015	0.65%	\$500,000
People's State Bank	365 Days	10/30/2015	0.50%	\$500,000
Abby Bank	365 Days	10/29/2015	0.55%	\$500,000
River Valley Bank	365 Days	12/27/2014	0.50%	\$500,000
CoVantage Credit Union	365 Days	12/28/2015	0.599%	\$300,000
Abby Bank	365 Days	12/30/2015	0.55%	\$500,000
Abby Bank	730 Days	02/25/2017	0.80%	\$500,000
People's State Bank	365 Days	02/28/2016	0.45%	\$250,000
Abby Bank	365 Days	03/15/2016	0.65%	\$400,000

TOTAL FUNDS AVAILABLE \$9,300,000

WEIGHTED AVERAGE 392.74 Days 0.527% INTEREST

**NCHC-DONATED FUNDS****Balance Sheet**

As of February 28, 2015

**ASSETS****Current Assets****Checking/Savings****CHECKING ACCOUNT**

Adult Day Services	5,124.11
Adventure Camp	693.99
AODA Day Services	-754.62
Birth to 3 Program	2,035.00
Clubhouse	57,242.51
Community Services - M/H	1,679.00
CSP	-492.15
Fishing Without Boundries	1,510.00
General Donated Funds	71,558.04
Housing - DD Services	1,370.47
Langlade HCC	3,034.78
Legacies by the Lake	
Music in Memory	3,702.65
Legacies by the Lake - Other	<u>3,950.01</u>
Total Legacies by the Lake	7,652.66

Lincoln County CSP	-175.00
Marathon Cty Suicide Prev Task	5,798.02
National Suicide Lifeline Stipe	1,926.37
Northern Valley West	1,616.00
Northwoods Alliance	8,752.92
Nursing Home - General Fund	2,139.89
Outpatient Services - Marathon	101.08
Pool	9,646.27
Prevent Suicide Langlade Co.	1,543.55
Suicide Prevention Walk	750.00
United Way	<u>1,262.34</u>

**Total CHECKING ACCOUNT** 184,015.23**Total Checking/Savings** 184,015.23**Accounts Receivable**

Accounts Receivable	<u>16.00</u>
<b>Total Accounts Receivable</b>	<u>16.00</u>

**Total Current Assets** 184,031.23**TOTAL ASSETS** 184,031.23**LIABILITIES & EQUITY****Equity**

Opening Bal Equity	123,523.75
Retained Earnings	59,745.02
Net Income	<u>762.46</u>
<b>Total Equity</b>	<u>184,031.23</u>

**TOTAL LIABILITIES & EQUITY** 184,031.23

**North Central Health Care  
Budget Revenue/Expense Report**

**Month Ending February 28, 2015**

<b>ACCOUNT DESCRIPTION</b>	<b>CURRENT MONTH ACTUAL</b>	<b>CURRENT MONTH BUDGET</b>	<b>YTD ACTUAL</b>	<b>YTD BUDGET</b>	<b>DIFFERENCE</b>
<b><u>REVENUE:</u></b>					
TOTAL NET REVENUE	4,727,733	4,672,468	9,430,542	9,606,533	(175,991)
<b><u>EXPENSES:</u></b>					
Salaries and Wages	2,024,459	2,182,700	4,489,096	4,599,250	(110,154)
Fringe Benefits	767,564	888,594	1,613,588	1,872,289	(258,701)
Departments Supplies	455,572	431,133	888,442	862,267	26,175
Purchased Services	286,692	295,725	541,651	578,450	(36,799)
Utilitites/Maintenance Agreements	298,708	315,644	599,848	637,288	(37,441)
Personal Development/Travel	29,758	40,350	54,148	80,700	(26,552)
Other Operating Expenses	92,518	172,988	192,220	345,977	(153,757)
Insurance	38,330	48,258	80,197	96,517	(16,320)
Depreciation & Amortization	136,967	137,253	274,026	274,506	(480)
Client Purchased Services	<u>18,539</u>	<u>50,000</u>	<u>115,946</u>	<u>100,000</u>	<u>15,946</u>
<b>TOTAL EXPENSES</b>	<b>4,149,107</b>	<b>4,562,646</b>	<b>8,849,160</b>	<b>9,447,243</b>	<b>(598,083)</b>
<b>EXCESS REVENUE (EXPENSE)</b>	<b>578,626</b>	<b>109,822</b>	<b>581,382</b>	<b>159,290</b>	<b>422,092</b>

**North Central Health Care  
Write-Off Summary  
February 2015**

	<u>Current Month</u>	<u>Current Year To Date</u>	<u>Prior Year To Date</u>
<b><i>Inpatient:</i></b>			
Administrative Write-Off	\$2,554	\$2,554	\$0
Bad Debt	\$213	\$213	\$20
<b><i>Outpatient:</i></b>			
Administrative Write-Off	\$8,290	\$15,431	(\$320)
Bad Debt	\$715	\$745	\$18,665
<b><i>Nursing Home:</i></b>			
Daily Services:			
Administrative Write-Off	\$0	\$0	\$58
Bad Debt	\$2,988	\$5,495	(\$1,461)
Ancillary Services:			
Administrative Write-Off	\$141	\$141	\$520
Bad Debt	\$0	\$0	\$0
<b>Pharmacy:</b>			
Administrative Write-Off	\$0	\$0	\$0
Bad Debt	\$0	\$0	\$0
<b>Total - Administrative Write-Off</b>	<b>\$10,984.61</b>	<b>\$18,125.61</b>	<b>\$258.00</b>
<b>Total - Bad Debt</b>	<b>\$3,916.07</b>	<b>\$6,453.07</b>	<b>\$17,224.00</b>

**North Central Health Care  
2015 Patient Days**

<u>Month</u>		<u>Budget</u>	<u>Actual</u>	<u>Variance</u>	<u>Budgeted Occupancy</u>	<u>Actual Occupancy</u>
<b>January</b>	Nursing Home	6,603	6,500	(103)	88.75%	87.37%
	Hospital	403	403	0	81.25%	81.25%
<b>February</b>	Nursing Home	5,964	6,007	43	88.75%	89.39%
	Hospital	364	446	82	81.25%	99.55%
<b>March</b>	Nursing Home Hospital					
<b>April</b>	Nursing Home Hospital					
<b>May</b>	Nursing Home Hospital					
<b>June</b>	Nursing Home Hospital					
<b>July</b>	Nursing Home Hospital					
<b>August</b>	Nursing Home Hospital					
<b>September</b>	Nursing Home Hospital					
<b>October</b>	Nursing Home Hospital					
<b>November</b>	Nursing Home Hospital					
<b>December</b>	Nursing Home Hospital					

**North Central Health Care  
Finance Committee-Analysis  
Calendar Year: 2015**

	Target	January	February	March	April	May	June	July	August	September	October	November	December	YTD
<b>Days Cash On Hand:</b>														
Invested	70	61	62											62
Operating		48	39											47
Total		109	101											109
<b>Average Daily Census:</b>														
Nursing Home	213	210	215											212
Hospital	13	13	16											14
<b>Days in Accounts Receivable:**</b>	55-60 days	80	79											79
<b>Direct Expense/Gross Patient Revenue**</b>	55%-59%	61.00%	51.00%											56.00%
<b>Write Offs**</b>	.5%-.6%	0.18%	0.27%											0.22%
<b>Excess Revenue (Expense):</b>														
Actual		\$10,895	\$590,280											\$601,175
Budget		\$56,970	\$117,322											\$174,292
Prior Year-Actual		\$124,183	\$12,296											\$136,479

\*\*Dash Board Outcomes





## MEMO

**TO:** North Central Health Care Finance Committee  
**FROM:** Brenda Glodowski  
**DATE:** April 17, 2015  
**RE:** Attached Financials

Attached please find a copy of the March financial statements for your review. To assist you in your review, the following information is provided.

### **BALANCE SHEET**

Accounts Receivable is seeing some improvement as this area continues to be a priority. Cash continues to remain adequate, and is increasing as some of the accounts receivable is getting caught up.

### **STATEMENT OF REVENUE AND EXPENSES**

The month of March shows a gain of \$28,969 compared to a budgeted loss of (\$12,015), resulting in a positive variance of \$40,984.

The hospital census averaged 14 patients per day, compared to the target of 13. The nursing home census averaged 213 per day, which is the target. The Medicare census continues to exceed targets, averaging just over 28 per day. The target is 26. Outpatient areas overall were below targets, but are improving.

Overall expenses for March were below targets. Salaries and benefits continue to remain below targets. Health insurance continues to do well, which is a significant contributor to benefits remaining below target. There are vacant positions which is contributing to salaries being below targets. A number of these positions are starting to be filled, so it is likely that the significant positive salary variance will start to decrease.

Through March, the overall organization shows a gain of \$630,144 compared to the targeted gain of \$162,274. Through the first quarter, the organization has a positive variance of \$467,870. Both programs are showing a gain through the first quarter. The Human Services Program shows a gain of \$548,389 and the Nursing Home shows a gain of \$81,755.

If you have any questions, please feel free to contact me.

**NORTH CENTRAL HEALTH CARE  
COMBINING STATEMENT OF NET ASSETS  
MARCH 2015**

	<u>51.42/.437</u> <u>PROGRAM</u>	NURSING <u>HOME</u>	<u>TOTAL</u>	<u>TOTAL</u> <u>31-Mar-14</u>
<b>CURRENT ASSETS:</b>				
CASH AND EQUIVALENTS	5,355,755	(38,539)	5,317,216	6,245,474
SHORT-TERM INVESTMENTS	7,084,905		7,084,905	6,502,198
CASH FOR APPROVED CAPITAL PURCHASES	1,780,615	434,481	2,215,096	1,797,802
DONATED FUNDS	182,759		182,759	127,704
<b>ACCOUNTS RECEIVABLE:</b>				
PATIENT (NET)	5,025,856	3,002,830	8,028,686	5,524,575
STATE GRANTS	1,024,722		1,024,722	770,188
OTHER	284,806		284,806	420,701
APPROPRIATIONS RECEIVABLE	34,586		34,586	1,982,426
AMOUNTS RECEIVABLE FROM				
THIRD-PARTY REIMBURSEMENT PROGRAMS	391,500	499,998	891,498	1,016,248
INVENTORY	16,920	256,902	273,822	331,005
OTHER	<u>450,393</u>	<u>64,904</u>	<u>515,297</u>	<u>633,198</u>
<b>TOTAL CURRENT ASSETS</b>	<u>21,632,817</u>	<u>4,220,576</u>	<u>25,853,393</u>	<u>25,351,519</u>
<b>CAPITAL ASSETS</b>				
CAPITAL ASSETS	29,904,255	14,644,335	44,548,590	42,645,221
ACCUMULATED DEPRECIATION	<u>(22,117,041)</u>	<u>(10,669,683)</u>	<u>(32,786,723)</u>	<u>(31,243,618)</u>
<b>CAPITAL ASSETS - NET</b>	<u>7,787,214</u>	<u>3,974,652</u>	<u>11,761,867</u>	<u>11,401,603</u>
<b>OTHER ASSETS - DEFERRED CHARGES</b>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
<b>RESTRICTED ASSETS - PATIENT TRUST FUNDS</b>	<u>15,475</u>	<u>35,828</u>	<u>51,302</u>	<u>290,707</u>
<b>TOTAL ASSETS</b>	<u>29,435,506</u>	<u>8,231,056</u>	<u>37,666,561</u>	<u>37,043,828</u>

**NORTH CENTRAL HEALTH CARE  
COMBINING STATEMENT OF NET ASSETS  
MARCH 2015**

	<u>51.42/.437 PROGRAM</u>	<u>NURSING HOME</u>	<u>TOTAL</u>	<u>TOTAL 31-Mar-14</u>
<b>CURRENT LIABILITIES:</b>				
ACCOUNTS PAYABLE	3,263,261	0	3,263,261	3,113,172
THIRD PARTY PAYABLE	315,000	0	315,000	491,000
APPROPRIATIONS ADVANCES	0	0	0	0
<b>ACCRUED LIABILITIES:</b>				
SALARIES & RETIREMENT	1,658,285	0	1,658,285	2,363,592
PAYROLL TAXES AND WITHHOLDING	177,005	0	177,005	245,646
COMPENSATED ABSENCES	1,628,106	0	1,628,106	1,622,115
OTHER PAYABLES	72,806	0	72,806	74,611
DEFERRED REVENUE - STATE GRANTS	<u>188,466</u>		<u>188,466</u>	<u>188,191</u>
<b>TOTAL CURRENT LIABILITIES</b>	<u>7,302,929</u>		<u>7,302,929</u>	<u>8,098,327</u>
PATIENT TRUST FUNDS	<u>35,746</u>	<u>15,475</u>	<u>51,221</u>	<u>290,487</u>
<b>NET ASSETS:</b>				
INVESTED IN CAPITAL ASSETS	7,787,214	3,974,652	11,761,867	11,401,603
UNRESTRICTED	13,761,228	4,159,174	17,920,402	17,085,317
OPERATING INCOME (LOSS)	<u>548,389</u>	<u>81,755</u>	<u>630,144</u>	<u>168,093</u>
<b>TOTAL NET ASSETS</b>	<u>22,096,831</u>	<u>8,215,581</u>	<u>30,312,413</u>	<u>28,655,014</u>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<u>29,435,506</u>	<u>8,231,056</u>	<u>37,666,561</u>	<u>37,043,828</u>

**NORTH CENTRAL HEALTH CARE  
COMBINING STATEMENT OF REVENUES AND EXPENSES  
FOR PERIOD ENDING MARCH 31, 2015**

<b>51.42/.437 PROGRAMS</b>	<u>CURRENT MONTH ACTUAL</u>	<u>CURRENT MONTH BUDGET</u>	<u>CURRENT MONTH VARIANCE</u>	<u>YTD ACTUAL</u>	<u>YTD BUDGET</u>	<u>YTD VARIANCE</u>
<b>REVENUE</b>						
Net Patient Service Revenue	<u>\$1,358,403</u>	<u>\$1,472,302</u>	<u>(\$113,899)</u>	<u>\$4,060,451</u>	<u>\$4,287,493</u>	<u>(\$227,042)</u>
<b>OTHER REVENUE</b>						
State Match / Addendum	325,060	325,120	(59)	975,181	975,359	(178)
Grant Revenue	184,855	184,113	742	528,751	551,968	(23,217)
County Appropriations - Net	594,566	588,525	6,041	1,783,699	1,765,576	18,123
Departmental and Other Revenue	<u>151,166</u>	<u>145,825</u>	<u>5,341</u>	<u>384,517</u>	<u>437,475</u>	<u>(52,958)</u>
Total Other Revenue	<u>1,255,647</u>	<u>1,243,583</u>	<u>12,064</u>	<u>3,672,148</u>	<u>3,730,379</u>	<u>(58,231)</u>
<b>TOTAL REVENUE</b>	<b>2,614,050</b>	<b>2,715,885</b>	<b>(101,835)</b>	<b>7,732,598</b>	<b>8,017,872</b>	<b>(285,273)</b>
<b>EXPENSES</b>						
Direct Expenses	1,843,573	1,928,963	(85,390)	5,227,837	5,575,596	(347,759)
Indirect Expenses	<u>763,964</u>	<u>794,823</u>	<u>(30,859)</u>	<u>1,986,199</u>	<u>2,331,840</u>	<u>(345,641)</u>
Total Expenses	<u>2,607,537</u>	<u>2,723,786</u>	<u>(116,249)</u>	<u>7,214,036</u>	<u>7,907,437</u>	<u>(693,400)</u>
Operating Income (Loss)	<u>6,513</u>	<u>(7,902)</u>	<u>14,415</u>	<u>518,562</u>	<u>110,435</u>	<u>408,127</u>
<b>Nonoperating Gains (Losses):</b>						
Interest Income	5,984	7,500	(1,516)	17,754	22,500	(4,746)
Donations and Gifts	4,652	0	4,652	12,074	0	12,074
Gain / (Loss) on Disposal of Assets	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total Nonoperating Gains / (Losses)	<u>10,636</u>	<u>7,500</u>	<u>3,136</u>	<u>29,827</u>	<u>22,500</u>	<u>7,327</u>
Operating Income / (Loss)	<u>\$17,150</u>	<u>(\$402)</u>	<u>\$17,551</u>	<u>\$548,389</u>	<u>\$132,935</u>	<u>\$415,454</u>

**NORTH CENTRAL HEALTH CARE  
COMBINING STATEMENT OF REVENUES AND EXPENSES  
FOR PERIOD ENDING MARCH 31, 2015**

<b>NURSING HOME</b>	CURRENT MONTH <u>ACTUAL</u>	CURRENT MONTH <u>BUDGET</u>	CURRENT MONTH <u>VARIANCE</u>	YTD <u>ACTUAL</u>	YTD <u>BUDGET</u>	YTD <u>VARIANCE</u>
REVENUE						
Net Patient Service Revenue	<u>\$1,939,710</u>	<u>\$2,041,681</u>	<u>(\$101,971)</u>	<u>\$5,905,399</u>	<u>\$5,993,228</u>	<u>(\$87,829)</u>
OTHER REVENUE						
County Appropriations - Net	141,666	141,667	(1)	424,999	425,000	(1)
Departmental and Other Revenue	<u>40,430</u>	<u>34,833</u>	<u>5,597</u>	<u>103,404</u>	<u>104,500</u>	<u>(1,095)</u>
Total Other Revenue	<u>182,096</u>	<u>176,500</u>	<u>5,596</u>	<u>528,403</u>	<u>529,500</u>	<u>(1,096)</u>
TOTAL REVENUE	2,121,805	2,218,181	(96,375)	6,433,802	6,522,728	(88,926)
EXPENSES						
Direct Expenses	1,575,801	1,581,948	(6,148)	4,650,097	4,592,744	57,353
Indirect Expenses	<u>534,385</u>	<u>647,847</u>	<u>(113,462)</u>	<u>1,702,749</u>	<u>1,900,645</u>	<u>(197,896)</u>
Total Expenses	<u>2,110,186</u>	<u>2,229,796</u>	<u>(119,610)</u>	<u>6,352,846</u>	<u>6,493,389</u>	<u>(140,543)</u>
Operating Income (Loss)	<u>11,620</u>	<u>(11,614)</u>	<u>23,235</u>	<u>80,956</u>	<u>29,339</u>	<u>51,617</u>
Nonoperating Gains (Losses):						
Interest Income	0	0	0	0	0	0
Donations and Gifts	199	0	199	799	0	799
Gain / (Loss) on Disposal of Assets	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total Nonoperating Gains / (Losses)	<u>199</u>	<u>0</u>	<u>199</u>	<u>799</u>	<u>0</u>	<u>799</u>
Operating Income / (Loss)	<u>\$11,818</u>	<u>(\$11,614)</u>	<u>\$23,433</u>	<u>\$81,755</u>	<u>\$29,339</u>	<u>\$52,416</u>

**NORTH CENTRAL HEALTH CARE  
COMBINING STATEMENT OF REVENUES AND EXPENSES  
FOR PERIOD ENDING MARCH 31, 2015**

<b>TOTAL</b>	CURRENT MONTH <u>ACTUAL</u>	CURRENT MONTH <u>BUDGET</u>	CURRENT MONTH <u>VARIANCE</u>	YTD <u>ACTUAL</u>	YTD <u>BUDGET</u>	YTD <u>VARIANCE</u>
REVENUE						
Net Patient Service Revenue	<u>\$3,298,113</u>	<u>\$3,513,983</u>	<u>(\$215,870)</u>	<u>\$9,965,849</u>	<u>\$10,280,721</u>	<u>(\$314,872)</u>
OTHER REVENUE						
State Match / Addendum	325,060	325,120	(59)	975,181	975,359	(178)
Grant Revenue	184,855	184,113	742	528,751	551,968	(23,217)
County Appropriations - Net	736,232	730,192	6,040	2,208,698	2,190,576	18,122
Departmental and Other Revenue	<u>191,596</u>	<u>180,658</u>	<u>10,938</u>	<u>487,921</u>	<u>541,975</u>	<u>(54,054)</u>
Total Other Revenue	<u>1,437,743</u>	<u>1,420,083</u>	<u>17,661</u>	<u>4,200,551</u>	<u>4,259,878</u>	<u>(59,327)</u>
TOTAL REVENUE	4,735,856	4,934,067	(198,210)	14,166,400	14,540,599	(374,199)
EXPENSES						
Direct Expenses	3,419,374	3,510,912	(91,538)	9,877,935	10,168,341	(290,406)
Indirect Expenses	<u>1,298,349</u>	<u>1,442,671</u>	<u>(144,322)</u>	<u>3,688,948</u>	<u>4,232,485</u>	<u>(543,537)</u>
Total Expenses	<u>4,717,723</u>	<u>4,953,582</u>	<u>(235,859)</u>	<u>13,566,883</u>	<u>14,400,825</u>	<u>(833,943)</u>
Operating Income (Loss)	<u>18,134</u>	<u>(19,515)</u>	<u>37,649</u>	<u>599,518</u>	<u>139,774</u>	<u>459,744</u>
Nonoperating Gains (Losses):						
Interest Income	5,984	7,500	(1,516)	17,754	22,500	(4,746)
Donations and Gifts	4,851	0	4,851	12,873	0	12,873
Gain / (Loss) on Disposal of Assets	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total Nonoperating Gains / (Losses)	<u>10,835</u>	<u>7,500</u>	<u>3,335</u>	<u>30,627</u>	<u>22,500</u>	<u>8,127</u>
Operating Income / (Loss)	<u>\$28,969</u>	<u>(\$12,015)</u>	<u>\$40,984</u>	<u>\$630,144</u>	<u>\$162,274</u>	<u>\$467,870</u>

NORTH CENTRAL HEALTH CARE  
 REPORT ON AVAILABILITY OF FUNDS  
 March 31, 2015

INVESTED FUNDS:

BANK	LENGTH	MATURITY DATE	INTEREST RATE	AMOUNT
BMO Harris	395 Days	04/28/2015	0.35%	\$500,000
People's State Bank	365 Days	04/29/2015	0.50%	\$350,000
People's State Bank	365 Days	04/30/2015	0.50%	\$500,000
Abby Bank	365 Days	05/03/2015	0.55%	\$500,000
CoVantage Credit Union	365 Days	05/28/2015	0.55%	\$500,000
Abby Bank	365 Days	05/30/2015	0.55%	\$500,000
BMO Harris	395 Days	07/26/2015	0.30%	\$500,000
Abby Bank	365 Days	07/05/2015	0.55%	\$500,000
Abby Bank	365 Days	07/19/2015	0.55%	\$500,000
People's State Bank	365 Days	08/21/2015	0.45%	\$500,000
Abby Bank	365 Days	08/29/2015	0.45%	\$500,000
CoVantage Credit Union	456 Days	10/01/2015	0.65%	\$500,000
People's State Bank	365 Days	10/30/2015	0.50%	\$500,000
Abby Bank	365 Days	10/29/2015	0.55%	\$500,000
River Valley Bank	365 Days	12/27/2014	0.50%	\$500,000
CoVantage Credit Union	365 Days	12/28/2015	0.599%	\$300,000
Abby Bank	365 Days	12/30/2015	0.55%	\$500,000
Abby Bank	730 Days	02/25/2017	0.80%	\$500,000
People's State Bank	365 Days	02/28/2016	0.45%	\$250,000
Abby Bank	365 Days	03/15/2016	0.65%	\$400,000
TOTAL FUNDS AVAILABLE				\$9,300,000

Average 12 month yield	4.82%
Certificate of Deposit 6 Month Rate	4.59%

**NCHC-DONATED FUNDS****Balance Sheet**

As of March 31, 2015

**ASSETS****Current Assets****Checking/Savings****CHECKING ACCOUNT**

Adult Day Services	5,124.11
Adventure Camp	693.99
AODA Day Services	-754.62
Birth to 3 Program	2,035.00
Clubhouse	57,688.60
Community Services - M/H	1,600.12
CSP	-492.15
Fishing Without Boundries	1,510.00
General Donated Funds	71,425.37
Housing - DD Services	1,370.47
Langlade HCC	3,034.78
Legacies by the Lake	
Music in Memory	3,702.65
Legacies by the Lake - Other	4,378.17
<b>Total Legacies by the Lake</b>	<b>8,080.82</b>

Lincoln County CSP	-175.00
Marathon Cty Suicide Prev Task	5,798.02
National Suicide Lifeline Stipe	1,926.37
Northern Valley West	1,816.00
Northwoods Alliance	8,752.92
Nursing Home - General Fund	3,456.29
Outpatient Services - Marathon	101.08
Pool	7,277.82
Prevent Suicide Langlade Co.	1,543.55
Suicide Prevention Walk	750.00
United Way	195.60

**Total CHECKING ACCOUNT** 182,759.14**Total Checking/Savings** 182,759.14**Accounts Receivable**

Accounts Receivable	16.00
<b>Total Accounts Receivable</b>	<b>16.00</b>

**Total Current Assets** 182,775.14**TOTAL ASSETS** 182,775.14**LIABILITIES & EQUITY****Equity**

Opening Bal Equity	123,523.75
Retained Earnings	59,745.02
Net Income	-493.63
<b>Total Equity</b>	<b>182,775.14</b>

**TOTAL LIABILITIES & EQUITY** 182,775.14



## North Central Health Care Budget Revenue/Expense Report

Month Ending March 31, 2015

ACCOUNT DESCRIPTION	CURRENT MONTH ACTUAL	CURRENT MONTH BUDGET	YTD ACTUAL	YTD BUDGET	DIFFERENCE
<b><u>REVENUE:</u></b>					
TOTAL NET REVENUE	4,735,856	4,934,067	14,166,400	14,540,599	(374,199)
<b><u>EXPENSES:</u></b>					
Salaries and Wages	2,287,335	2,464,882	6,776,432	7,064,132	(287,700)
Fringe Benefits	878,623	1,003,348	2,492,210	2,875,637	(383,427)
Departments Supplies	511,488	431,133	1,399,930	1,293,400	106,530
Purchased Services	319,906	283,725	861,557	862,175	(618)
Utilitites/Maintenance Agreements	314,727	321,644	914,575	958,933	(44,358)
Personal Development/Travel	25,689	40,350	79,836	121,050	(41,214)
Other Operating Expenses	131,869	172,988	324,088	518,965	(194,877)
Insurance	45,528	48,258	125,725	144,775	(19,050)
Depreciation & Amortization	164,460	137,253	438,486	411,759	26,727
Client Purchased Services	<u>38,097</u>	<u>50,000</u>	<u>154,043</u>	<u>150,000</u>	<u>4,043</u>
<b>TOTAL EXPENSES</b>	<b>4,717,722</b>	<b>4,953,582</b>	<b>13,566,882</b>	<b>14,400,825</b>	<b>(833,944)</b>
<b>EXCESS REVENUE (EXPENSE)</b>	<b>18,134</b>	<b>(19,515)</b>	<b>599,518</b>	<b>139,774</b>	<b>459,744</b>

**North Central Health Care  
Write-Off Summary  
March 2015**

	<u>Current Month</u>	<u>Current Year To Date</u>	<u>Prior Year To Date</u>
<b><i>Inpatient:</i></b>			
Administrative Write-Off	\$3,771	\$6,325	\$1,475
Bad Debt	\$229	\$442	\$64
<b><i>Outpatient:</i></b>			
Administrative Write-Off	\$12,298	\$27,728	\$3,640
Bad Debt	\$156	\$901	\$18,918
<b><i>Nursing Home:</i></b>			
Daily Services:			
Administrative Write-Off	\$0	\$0	\$608
Bad Debt	\$0	\$5,495	(\$1,277)
Ancillary Services:			
Administrative Write-Off	\$386	\$527	\$1,461
Bad Debt	\$0	\$0	\$0
<b>Pharmacy:</b>			
Administrative Write-Off	\$0	\$0	\$0
Bad Debt	\$0	\$0	\$0
<b>Total - Administrative Write-Off</b>	<b>\$16,455.49</b>	<b>\$34,580.81</b>	<b>\$7,184.00</b>
<b>Total - Bad Debt</b>	<b>\$384.78</b>	<b>\$6,837.55</b>	<b>\$17,705.00</b>

**North Central Health Care  
2015 Patient Days**

<u>Month</u>		<u>Budget</u>	<u>Actual</u>	<u>Variance</u>	<u>Budgeted Occupancy</u>	<u>Actual Occupancy</u>
<b>January</b>	Nursing Home	6,603	6,500	(103)	88.75%	87.37%
	Hospital	403	403	0	81.25%	81.25%
<b>February</b>	Nursing Home	5,964	6,007	43	88.75%	89.39%
	Hospital	364	446	82	81.25%	99.55%
<b>March</b>	Nursing Home	6,603	6,607	4	88.75%	88.80%
	Hospital	403	439	36	81.25%	88.51%
<b>April</b>	Nursing Home Hospital					
<b>May</b>	Nursing Home Hospital					
<b>June</b>	Nursing Home Hospital					
<b>July</b>	Nursing Home Hospital					
<b>August</b>	Nursing Home Hospital					
<b>September</b>	Nursing Home Hospital					
<b>October</b>	Nursing Home Hospital					
<b>November</b>	Nursing Home Hospital					
<b>December</b>	Nursing Home Hospital					

**North Central Health Care  
Finance Committee-Analysis  
Calendar Year: 2015**

	Target	January	February	March	April	May	June	July	August	September	October	November	December	YTD
<b>Days Cash On Hand:</b>														
Invested	70	61	62	62										62
Operating		48	36	33										33
Total		109	98	95										95
<b>Average Daily Census:</b>														
Nursing Home	213	210	215	213										212
Hospital	13	13	16	14										14
<b>Days in Accounts Receivable:**</b>	55-60 days	80	79	75										75
<b>Direct Expense/Gross Patient Revenue**</b>	55%-59%	61.00%	51.00%	59.00%										57.40%
<b>Write Offs**</b>	.5%-.6%	0.18%	0.27%	0.32%										0.26%
<b>Excess Revenue (Expense):</b>														
Actual		\$10,895	\$590,280	\$28,969										\$630,144
Budget		\$56,970	\$117,322	(\$12,015)										\$162,277
Prior Year-Actual		\$124,183	\$12,296	\$31,615										\$168,094

\*\*Dash Board Outcomes

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM  
NURSING HOME OPERATIONS COMMITTEE MEETING MINUTES**

**March 13, 2015**

**8:00AM**

**NCHC – Wausau Campus**

Present:	X Jean Burgener	X Lee Olkowski	X John Robinson
	X Bill Metter	X John Bandow	X Bill Miller
Also Present:	X Brenda Glodowski	X Gary Bezucha	X Gretchen Brown
	X Terry Kaiser	X JoAnn Pemble	

The meeting was called to order to 8:02 a.m.

Monthly Meeting Change

It was the consensus of this committee to change the meeting day from the 2<sup>nd</sup> Friday of the month to the 4<sup>th</sup> Friday of the month beginning in April. Therefore, the next meeting will be Friday, April 24, 2015.

Minutes

- **Motion** / second, Metter / Olkowski to approve minutes of the February 13, 2015 meeting. Motion carried.

Financial Report

- All budget targets were met or exceeded in February.
- Average census for February was 214, exceeding the 213 target.
- February Medicare was 34, exceeding target of 26.
- Revenues for February also exceeded target. Expenses fell below target.
- An overall gain of \$68,000 was realized for February, which results in a YTD excess of \$29,000.
- Direct expenses and write-offs were also below target.
- At this point, we are ahead of where we were a year ago.
- RUG mix has been more favorable than budget.
- March has been at or above targets as of this date.

Nursing Home Update

- Mount View was one of four care communities chosen by Aspirus for an affiliation agreement with them. Gretchen will be meeting with Aspirus on March 26 to review contract details.
- We continue to reach out to St. Clare's, but have not yet been able to meet formally with them, mainly due to their internal changes.
- Affiliation agreements are the way of the future for hospitals. They basically are saying they have confidence in your ability to care for their patients and to ensure treatment modalities and plan of care are not fragmented from the hospital to the referred care community. They also ask for certain criteria to be met regarding quality measures. Hospitals want quality nursing homes to work with because nursing home outcomes will affect hospital Medicare reimbursement.
- Suggested to get the clinical outcomes of the other three care communities chosen by Aspirus for comparison.

- We have heard that North Ridge in Manitowoc has put their plans to open a 10-bed vent unit on hold.
- We are continuing to recruit for the open nurse manager positions on Long Term Care and Legacies. There are three good candidates and a decision is anticipated within the next few weeks.
- We have officially terminated our contract with RehabCare and are finalizing the contract for therapy services with Aegis Therapies. Transition will begin in May. One of the goals for the change is to enhance our Outpatient therapy services, which will result in additional revenue growth.
- We are in preliminary meetings with Bridge Community Clinic for a potential partnership with them for dental services for our residents. There may also be potential for dental services for our CBRF and Community Treatment clients as well as possible medical access.
- On February 25, the nursing home had a complaint survey concerning overall quality of care that was found to be unsubstantiated.

#### Master Facility Plan / Phasing Update

- No new information on construction phasing at this time. Are getting close to formalizing a plan to send to our providers, residents and their families, and staff.
- Because some residents now in private rooms will be moving into semi-private rooms during the construction phase, they will have to downsize somewhat. The small gym will be cleared out to store extra resident furniture so families will not have to move anything.
- Bids were submitted on March 12 and came in high. Target for the bids was \$10 million. Three general managers that bid on the total project were:
  - Ellis Stone \$12,830,000
  - Scherrer Construction - \$13,824,000
  - Altmann - \$14,252,000
  - These bids include five alternates that could be pulled from the renovation. These include a new roof for MVCC (\$365,000) renovation of the Legacies units (\$1,700,000), windows (\$380,000), main generator plant and steam plant upgrade (\$920,000), and upgrade for fire system (\$176,000). These upgrades could be put off for approximately five years.
  - If the bids for the alternates are removed, it would bring the lowest bid to \$10,989,000.
  - Would then have to add in Construction Manager and design work costs.
  - There is also \$1.5 million for softs costs and \$700,000 for contingency.
  - Individual bids have not been looked at yet, but if any of them are lower than the GM, money could be saved that way. Not seeing a huge dollar difference at this point.
  - Total construction budget is \$13.5 million, which was approved by the Board.
  - A second resolution is needed to approve the issuance of the bonds. The bids will go to Health and Human Services on March 19. The Finance Committee will want to look at it before it goes to the County Board on April 21<sup>st</sup>.
  - Next step is to run another RFP for the Construction Manager. The first bid came in at \$720,000. When run the second time, it came in at \$537,000. It will be an 18-month project.

- **Motion** / second, Olkowski / Metter to make a resolution to the Health and Human Services Board to move forward with a maximum budget of \$13.8 million, which includes cost for bond issuance. Motion carried with one in opposition.
  - Terry will have more concrete numbers and a report on the scope of the construction by Thursday, March 19 for the Health and Human Services Board.
  - Terry was commended for all the work and the great job he has done.
- Awards of contracts will be after the April 21<sup>st</sup> Board meeting.

#### Education – Impact Act – Jean Burgener

- Jean had presented this information at the LeadingAge Winter Symposium the first week of March and she reviewed highlights with this committee (refer to PowerPoint handout).

#### Strategic Plan Objectives Discussion

- Gretchen reviewed challenges and success in 2014 and 2015 Operational Objectives (refer to PowerPoint handout).
- Identified three focus items for 2015 strategic planning.
  1. Recruiting and maintaining adequate staffing for the nursing home:
    - a. Our Senior Executive of Human Resources, Michael Loy, will be joining the next NHOC meeting on April 24<sup>th</sup>. He will be addressing some of the issues CNAs have with the mandatory pension and other benefits taken from their salaries. The added cost of child care is also a drain on their take-home pay.
    - b. We are not just competing with other area nursing homes, but also with Starbucks, Walmart, etc. They have raised their minimum wage rate and working at Starbucks or Walmart is much easier physically than being a CNA.
    - c. Suggestions to counter obstacles:
      - Tap into baby boomers. Are they physically strong enough to assist with resident transfers, etc.?
      - Consider increasing compensation for CNAs.
      - Provide education on the benefits of saving for retirement.
    - d. **Action:** Provide a demographic of those being hired and why, and those leaving and why.
    - e. A shortage of registered nurses is also predicted. One reason for the shortage is that schools require a Masters' level teacher and there are not enough teachers with those credentials so they cannot keep up the demand to train nurses.
    - f. Regulatory codes are not changing with the shift in professional people available to provide the services they are requiring.
    - g. Focus should be on retention and being the preferred place to work.
  2. Marketing and branding of nursing home:
    - a. Suggested to hire a consultant to assist with appropriate branding process.
    - b. The right marketing / branding will also pull in the right employees.
  3. Revenue enhancement:
    - a. Suggested to become consultants for some of the services we provide such as dementia care and dietary services.
      - We have tried to do consulting but it requires pulling personnel from our clinical resources.
      - Consulting is not part of our mission/vision; we are not a teaching institution.

- b. We are already set up to enhance our Outpatient therapies with a new therapy provider and renovated gym.
  - c. Research revenue options with potential to identify 2-3 potential new revenue streams.
  - d. Inventory our strengths; out of strengths come opportunities. Branding process could help in this area.
  - e. Don't want to get stuck in what already exists, but identify where focus should be, what people are really looking for, what would position us to be better than other nursing homes.
  - f. Have to remember that we are a county nursing home that is here primarily for the protectively placed and dementia / Alzheimer's residents. This is our anchor and is what keeps the county tie.
- Concluded strategic planning discussion.

#### Future Agenda Items

- Add three strategic planning focus items: 1) staffing, 2) marketing / branding, and 3) new revenue streams
- Educational presentations on current trends / changes in what is happening in the Medicare and regulatory world
- Continue format with financials with addition of Nursing Home Monthly Information sheet.
- Action plan items
- Master facility plan / phasing
- Federal budget impact

**Motion** / second, Olkowski / Bandow to adjourn. Motion carried. Meeting adjourned at 11:00am.

*jhp*



North Central Health Care

APPOINTMENT RECOMMENDATION FLOW SHEET

Appointee John D. Franzen, M.D.

Appointment/  
Reappointment 10-21-2014 to 10-31-2016  
Time Period

Staff Category

- Active
- Courtesy
- Mid-Level Practitioner

- Locum Tenens
- Delegation

Clinical Privileges

- Medical (Includes Family Practice, Internal Medicine)
- Psychiatry
- Mid-Level Practitioner
- Dentistry
- Psychologist

Special Conditions: \_\_\_\_\_

**MEDICAL DIRECTOR**

I have reviewed this physician's/practitioner's file and find that this appointee meets the criteria for appointment/reappointment to the Medical Staff of North Central Health Care.

Comments: \_\_\_\_\_

[Signature]  
(Medical Director Signature)

3-2-15  
(Date)

**MEDICAL STAFF CHAIRPERSON**

Medical Staff recommends that:

- He/she be appointed/reappointed to the Medical Staff as requested
- Action be deferred on the application
- The application be denied

[Signature]  
(Medical Staff Chairperson Signature)

4-21-15  
(Date)

**GOVERNING BOARD**

Reviewed by Governing Board: \_\_\_\_\_  
(Date)

Response:  Concur  
 Recommend further reconsideration

Reason: \_\_\_\_\_

Completion date: \_\_\_\_\_

\_\_\_\_\_  
(Chief Executive Officer Signature)

\_\_\_\_\_  
(Date)



**John D. Franzen, M.D.**

**Enhanced Credentialing Activity**

**General Profile**

**Primary Address**

North Central Health Care  
1100 Lake View Drive  
Wausau, WI 54403-6785  
(715) 848-4600

**Other Provider Information**

ID#: \_\_\_\_\_  
SSN: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Provider Specialties: Psychiatry

NPI: 1952577249  
UPIN: \_\_\_\_\_  
Medicare#: \_\_\_\_\_  
Medicaid#: \_\_\_\_\_

**Credentialing Activity**

**Application**

Application Sent Date: 09/25/2014  
Attestation Date: 09/28/2014  
Received Date: 10/01/2014

**Most Recent Query**

Query Type: Claims Processing  
Query Date: 10/14/2014

Credentialing  
Completed:

Issues:

Aspirus Network, Inc.

**Information Upon Credentialing Completion**

Status: ANI Application in Process  
Category: ANI Specialty Provider  
Category Applied For: ANI Specialty Provider  
Network:  
Cred Activity Notes:

**Committee Progress**

Started:  
Status:

Issues:

Activity  
Completed:

North Central Healthcare

From 10/21/2014 To 10/31/2016

**Information Upon Credentialing Completion**

Status: NCHC Current  
Category: NCHC Active  
Category Applied For: NCHC Active  
Network:  
Cred Activity Notes:

**Committee Progress**

Started:  
Status:

Issues:

Activity  
Completed:   
Completed Date: 11/12/2014

**Education****John D. Franzen, M.D.****University of Nebraska Medical Center School of Medicine***Program:* Medical School*Letter Description:* Verify Primary Professional Edu  
Doc \**Verified:* *Verified Date:* 10/23/2014*Dept./Specialty:**Letter Sent Date:* 10/14/2014*Verified By:* Joyce L. Kluck*Start Date:* 08/23/2004*Letter Sent By:* Joyce L. Kluck*Verified How:* E-Student Clearinghouse  
Website.*End Date:* 05/02/2008*Notes:* MD*Graduated/Completed:* **University of Hawaii***Program:* Internship*Letter Description:* Verify Intern / Res / Fellowship  
Doc\**Verified:* *Verified Date:* 10/14/2014*Dept./Specialty:* Psychiatry*Letter Sent Date:* 10/02/2014*Verified By:* Joyce L. Kluck*Start Date:* 07/01/2008*Letter Sent By:* Joyce L. Kluck*Verified How:* E-AMA Website-Medical  
School*End Date:* 06/30/2010*Notes:* used ama-u of hi \$50 fee &  
notarized sig*Graduated/Completed:* **University of Nebraska Medical Center School of Medicine***Program:* Residency*Letter Description:* Verify Intern / Res / Fellowship  
Doc\**Verified:* *Verified Date:* 10/14/2014*Dept./Specialty:* Psychiatry*Letter Sent Date:* 10/14/2014*Verified By:* Joyce L. Kluck*Start Date:* 07/01/2010*Letter Sent By:* Joyce L. Kluck*Verified How:* E-AMA Website-Medical  
School*End Date:* 07/31/2012*Notes:**Graduated/Completed:*

**Licenses**

John D. Franzen, M.D.

*License Type:* State License  
*State:* NE  
*License Number:* 25841  
*Status:* Active  
*Expiration Date:* 10/01/2016

**Verified:**   
*Verified Date:* 10/01/2014  
*Verified By:* Joyce L. Kluck  
*Verified How:* L-State License  
*Notes:* NE state web site

*License Type:* DEA Certificate  
*State:* WI  
*License Number:* FF2103339  
*Status:* Active  
*Expiration Date:* 09/30/2016

**Verified:**   
*Verified Date:* 10/01/2014  
*Verified By:* Joyce L. Kluck  
*Verified How:* L-DEA Website  
*Notes:* source date 09/29/14 jk

*License Type:* State License  
*State:* WI  
*License Number:* 61209  
*Status:* Active  
*Expiration Date:* 10/31/2015

**Verified:**   
*Verified Date:* 10/01/2014  
*Verified By:* Joyce L. Kluck  
*Verified How:* L-WI DRL Website  
*Notes:*

*License Type:* WI Caregiver Background  
Check  
*State:* WI  
*License Number:*  
*Status:*  
*Expiration Date:* 10/01/2018

**Verified:**   
*Verified Date:* 10/01/2014  
*Verified By:* Joyce L. Kluck  
*Verified How:* L-WI Caregiver  
Background Ck Website  
*Notes:*

*License Type:* Government Issued Photo ID  
*State:* WI  
*License Number:*  
*Status:*  
*Expiration Date:*

**Verified:**   
*Verified Date:* 10/01/2014  
*Verified By:* Joyce L. Kluck  
*Verified How:* O-FYI Only  
*Notes:*

*License Type:* Out of State background Check  
*State:* NE  
*License Number:*  
*Status:*  
*Expiration Date:*

**Verified:**   
*Verified Date:* 10/14/2014  
*Verified By:* Joyce L. Kluck  
*Verified How:* L-Out of State Caregiver  
Bckgrd Ck Website  
*Notes:*

**Insurance**

**ProAssurance**

Policy Number: MP66582

Letter Description: Verify Malpractice Insurance  
DOC

Verified:   
Verified Date: 10/08/2014

Coverage Type:

Letter Sent Date: 10/02/2014

Verified By: Joyce L. Kluck

Expiration Date: 09/01/2015

Letter Sent By: Joyce L. Kluck

Verified How: I-Verification from Carrier  
Notes: \$1M / \$3M no claims /  
future insurance

**MMIC**

Policy Number: ICL0000941

Letter Description: Verify Malpractice Insurance  
DOC

Verified:   
Verified Date: 11/20/2014

Coverage Type:

Letter Sent Date: 11/14/2014

Verified By: Joyce L. Kluck

Expiration Date: 07/29/2013

Letter Sent By: Joyce L. Kluck

Verified How: I-Verification from Carrier  
Notes: \$1M / \$3M no claims

**MMIC**

Policy Number: IXC000009

Letter Description: Verify Malpractice Insurance  
DOC

Verified:   
Verified Date: 11/20/2014

Coverage Type:

Letter Sent Date: 11/14/2014

Verified By: Joyce L. Kluck

Expiration Date: 07/07/2012

Letter Sent By: Joyce L. Kluck

Verified How: I-Verification from Carrier  
Notes: \$6M / \$8M no claims

**Hawaii Residency Program**

Policy Number: SELF INSURED

Letter Description: Verify Malpractice Insurance  
DOC

Verified:   
Verified Date: 12/02/2014

Coverage Type:

Letter Sent Date: 11/14/2014

Verified By: Joyce L. Kluck

Expiration Date: 06/30/2010

Letter Sent By: Joyce L. Kluck

Verified How: I-Verification from Carrier  
Notes: \$1m / \$3m no claims

**ProAssurance**

Policy Number: MP84946

Letter Description: Verify Malpractice Insurance  
DOC

Verified:   
Verified Date: 11/12/2014

Coverage Type:

Letter Sent Date: 11/10/2014

Verified By: Joyce L. Kluck

Expiration Date: 05/23/2013

Letter Sent By: Joyce L. Kluck

Verified How: I-Verification from Carrier  
Notes: \$1M / \$3M no claims

**Boards**

**Am Bd Psyc&Neur-Psychiatry**

Board Status: Certified

Cert Number:

Expiration Date: 03/01/2015

Verified:   
Verified Date: 11/07/2014  
Verified By: Joyce L. Kluck  
Verified How: B-ABMS Website-Board  
Certification  
Notes:

**Am Bd Psyc&Neur (CAQ: Addict)**

Board Status: In Process-Initiating

Cert Number:

Expiration Date:

Verified:   
Verified Date: 12/03/2014  
Verified By: Joyce L. Kluck  
Verified How: O-FYI Only  
Notes:



**Worksheet**

**John D. Franzen, M.D.**

	<i>Date &amp; Initials</i>	<i>Comments</i>
Review of Work History & Explanation of Gaps	11/14/14 jk	no gaps found
SAM Website	<i>Date &amp; Initials</i> 10/01/14 jk	<i>Comments</i>
NPDB Website query through Cactus	<i>Date &amp; Initials</i> 10/14/14 - jk	<i>Comments</i>
OIG Website	<i>Date &amp; Initials</i> source date 09/09/14 jk conducted date 10/01/14 jk	<i>Comments</i>
WI Circuit Court	<i>Date &amp; Initials</i> 10/01/14 jk	<i>Comments</i>
Medicare Opt Out Website	<i>Date &amp; Initials</i> report run date 08/15/14 jk review date 11/14/14 jk	<i>Comments</i>
Consent Form	<i>Sign Date &amp; Initials</i> 09/26/14 jk	<i>Comments</i>
Health Requirements Met	<i>Date &amp; Initials</i>	<i>Y/N &amp; Comments</i> pending-email to Jess
Privilege Form	<i>Sign Date &amp; Initials</i> N/A	<i>Comments</i> N/A
Verifications within 180 days	<i>Date &amp; Initials</i> 12/09/14 jk	<i>Comments</i> yes
CVO Review	<i>Date</i> 12/09/2014	<i>Signature</i> electronically signed by joyce kluck
ANI Provisional Approval (if applicable)	<i>Date</i>	<i>Signature</i>
Entity Committee Review	<i>Date</i>	<i>Signature</i>
ANI Only - All Disclosure Questions Answered YES ___ NO ___		
ANI Only - Issues Identified YES___ NO___		

North Central Health Care

APPOINTMENT RECOMMENDATION FLOW SHEET

Appointee Shae M. Ellefson-Wheeler, PAC Appointment/  
Reappointment 07-01-2015 to 06-30-2017  
Time Period

Staff Category  Active  Locum Tenens  
 Courtesy  Delegation  
 Mid-Level Practitioner

Clinical Privileges  Medical (Includes Family Practice, Internal Medicine)  
 Psychiatry  Dentistry  
 Mid-Level Practitioner  Psychologist

Special Conditions: \_\_\_\_\_

**MEDICAL DIRECTOR**

I have reviewed this physician's/practitioner's file and find that this appointee meets the criteria for appointment/reappointment to the Medical Staff of North Central Health Care.

Comments: \_\_\_\_\_

\_\_\_\_\_  
(Medical Director Signature) 4-8-15  
(Date)

**MEDICAL STAFF CHAIRPERSON**

Medical Staff recommends that:

- He/she be appointed/reappointed to the Medical Staff as requested
- Action be deferred on the application
- The application be denied

\_\_\_\_\_  
(Medical Staff Chairperson Signature) 4-21-15  
(Date)

**GOVERNING BOARD**

Reviewed by Governing Board: \_\_\_\_\_  
(Date)

Response:  Concur  
 Recommend further reconsideration

Reason: \_\_\_\_\_

Completion date: \_\_\_\_\_

\_\_\_\_\_  
(Chief Executive Officer Signature) (Date)





**Shae M. Ellefson, PAC**

**Enhanced Credentialing Activity**

**General Profile**

**Primary Address**

North Central Health Care  
1100 Lake View Drive  
Wausau, WI 54403-6785  
(715) 848-4800

**Other Provider Information**

ID#:	NPI: 1356524870
SSN:	UPIN:
Date of Birth:	Medicare#:
Provider Specialties: Physician Assistant	Medicaid#: 1356524870

**Credentialing Activity**

**Application**

Application Sent Date: 01/02/2015  
Attestation Date:  
Received Date: 02/04/2015

**Most Recent Query**

Query Type: Claims Processing  
Query Date: 01/06/2015

Credentialing Completed:

Issues:

**Aspirus Network, Inc.**

From 07/01/2013 To 06/30/2015

**Information Upon Credentialing Completion**

Status: ANI Current  
Category: ANI Allied Health Practitioner 2yr  
Category Applied For: ANI Allied Health Practitioner 2yr  
Network:  
Cred Activity Notes:

**Committee Progress**

Started:  
Status:

Issues:

Activity Completed:

**North Central Healthcare**

From 07/01/2013 To 06/30/2015

**Information Upon Credentialing Completion**

Status: NCHC Current  
Category: NCHC Allied Health 2yr  
Category Applied For: NCHC Allied Health 2yr  
Network:  
Cred Activity Notes:

**Committee Progress**

Started:  
Status:

Issues:

Activity Completed:

**Licenses**

License Type: State License  
 State: WI  
 License Number: 2741  
 Status: Active  
 Expiration Date: 02/29/2016

Verified:   
 Verified Date: 02/02/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: L-WI DRL Website  
 Notes:

License Type: DEA Certificate  
 State: WI  
 License Number: ME2386236  
 Status: Active  
 Expiration Date: 08/31/2017

Verified:   
 Verified Date: 02/02/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: L-DEA Website  
 Notes: source date 1/28/2015

License Type: WI Caregiver Background Check  
 State: WI  
 License Number:  
 Status:  
 Expiration Date: 08/17/2015

Verified:   
 Verified Date: 02/02/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: O-Verified Previously  
 Notes:

**Insurance**

**ProAssurance Indemnity Co**

Policy Number: MP68016 Letter Description: Verify Malpractice Insurance AHP\*  
 Coverage Type: Occurrence Letter Sent Date: 02/06/2015  
 Expiration Date: 01/01/2016 Letter Sent By: Jill A. Patraw

Verified:   
 Verified Date: 02/10/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: I-Verification from Carrier  
 Notes: \$1M / \$3M - No Claims

**ProAssurance (Advanced Care Providers)**

Policy Number: AFC9116114 Letter Description: Verify Malpractice Insurance AHP\*  
 Coverage Type: Claims Made Letter Sent Date: 02/06/2015  
 Expiration Date: 11/02/2015 Letter Sent By: Jill A. Patraw

Verified:   
 Verified Date: 02/10/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: I-Verification from Carrier  
 Notes: No limits listed - No claims

**Boards**

**National Commission on Certification of Phys Assts**

Board Status: Certified  
 Cert Number: 1096464  
 Expiration Date: 12/31/2015

Verified:   
 Verified Date: 02/02/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: B-NCCPA Website  
 Notes:

**Affiliations**

**Infinity Health Care / Sacred Heart**

*Affiliation Type:* Allied Health Staff  
*Category:* Allied Health Practitioner  
*Dept/Specialty:* Emergency Medicine  
  
*Start Date:* 04/11/2011  
*End Date:*

*Letter Description:* Verify Affiliations & Employment Reappt\*  
*Letter Sent Date:* 02/06/2015  
*Letter Sent By:* Jill A. Patraw

**Verified:**   
*Verified Date:* 02/11/2015  
*Verified By:* Christa L Darnell  
*Verified How:* A-Health Care Facility Verif Ltr Online  
  
*Notes:*

**North Central Health Care**

*Affiliation Type:* Allied Health Staff  
  
*Category:* Not Provided  
*Dept/Specialty:* Physician Assistant  
  
*Start Date:* 08/01/2011  
*End Date:*

*Letter Description:* Verify Affiliations & Employment Reappt\*  
*Letter Sent Date:* 02/18/2015  
*Letter Sent By:* Jill A. Patraw

**Verified:**   
*Verified Date:* 02/18/2015  
*Verified By:* Christa L Darnell  
*Verified How:* A-NCS-Health Care Affiliation Verif Ltr  
  
*Notes:*

**Advanced Care Providers**

*Affiliation Type:* Employee  
  
*Category:* Not Provided  
*Dept/Specialty:* Physician Assistant  
  
*Start Date:* 07/01/2011  
*End Date:*

*Letter Description:* Verify Affiliations & Employment Reappt\*  
*Letter Sent Date:* 02/18/2015  
*Letter Sent By:* Jill A. Patraw

**Verified:**   
*Verified Date:* 02/18/2015  
*Verified By:* Christa L Darnell  
*Verified How:* A-NCS-Health Care Affiliation Verif Ltr  
  
*Notes:*

**James Sacquitne PAC**

*Affiliation Type:* Reference  
  
*Category:*  
*Dept/Specialty:*  
  
*Start Date:*  
*End Date:*

*Letter Description:* Verify Refs - Reappointment \*  
*Letter Sent Date:* 02/27/2015  
*Letter Sent By:* Christa L Darnell

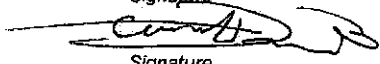
**Verified:**   
*Verified Date:* 03/04/2015  
*Verified By:* Christa L Darnell  
*Verified How:* A-NCS-Professional Ref Verif Ltr  
  
*Notes:*

**David Tange, M.D.**

*Affiliation Type:* Sponsoring Physician  
  
*Category:*  
*Dept/Specialty:*  
  
*Start Date:*  
*End Date:*

*Letter Description:* Verify Refs - Reappointment \*  
*Letter Sent Date:* 02/27/2015  
*Letter Sent By:* Christa L Darnell

**Verified:**   
*Verified Date:* 03/03/2015  
*Verified By:* Christa L Darnell  
*Verified How:* A-NCS-Professional Ref Verif Ltr  
  
*Notes:*

	<i>Date &amp; Initials</i>	<i>Comments</i>
NPDB Website query through Cactus	1/6/2015 CLD	
OIG Website	<i>Date &amp; Initials</i> Source date 1/7/2015 CLD Conducted date 1/14/2015 CLD	<i>Comments</i>
SAM Website	<i>Date &amp; Initials</i> 1/5/2015 CLD	<i>Comments</i>
Medicare Opt Out Website	<i>Date &amp; Initials</i> Report run date 1/12/2015 CLD Reviewed date 2/2/2015 CLD	<i>Comments</i>
Supervising Physician Form	<i>Sign Date &amp; Initials</i> 2/4/2015 CLD	<i>Comments</i> David Tange M.D.
Collaborative Agreement	<i>Sign Date &amp; Initials</i> N/A	<i>Comments</i> N/A
Consent Form	<i>Sign Date &amp; Initials</i> 1/24/2015 CLD	<i>Comments</i>
Privilege Form	<i>Sign Date &amp; Initials</i> N/A	<i>Comments</i> N/A
Quality Improvement Activities (payor requirement)	<i>Date &amp; Initials</i>	<i>Comments</i>
Patient Complaints (payor requirement)	<i>Date &amp; Initials</i>	<i>Comments</i>
CVO Review	<i>Date</i> 3-12-15	<i>Signature</i> 
Entity Review	<i>Date</i>	<i>Signature</i>
ANI Only - All Disclosure Questions Answered YES___ NO___		
ANI Only - Issues Identified YES___ NO___		

North Central Health Care

APPOINTMENT RECOMMENDATION FLOW SHEET

Appointee Jennifer L. Svencer, PA-C

Appointment/  
Reappointment 07-01-2015 to 06-30-2017

Time Period

Staff Category       Active       Locum Tenens  
                          Courtesy       Delegation  
                          Mid-Level Practitioner

Clinical Privileges       Medical (Includes Family Practice, Internal Medicine)  
                          Psychiatry       Dentistry  
                          Mid-Level Practitioner       Psychologist

Special Conditions: \_\_\_\_\_

**MEDICAL DIRECTOR**

I have reviewed this physician's/practitioner's file and find that this appointee meets the criteria for appointment/reappointment to the Medical Staff of North Central Health Care.

Comments: \_\_\_\_\_

\_\_\_\_\_  
(Medical Director Signature)

4-8-15  
(Date)

**MEDICAL STAFF CHAIRPERSON**

Medical Staff recommends that:

- He/she be appointed/reappointed to the Medical Staff as requested
- Action be deferred on the application
- The application be denied

\_\_\_\_\_  
(Medical Staff Chairperson Signature)

4-21-15  
(Date)

**GOVERNING BOARD**

Reviewed by Governing Board: \_\_\_\_\_  
(Date)

Response:       Concur  
                          Recommend further reconsideration

Reason: \_\_\_\_\_

Completion date: \_\_\_\_\_

\_\_\_\_\_  
(Chief Executive Officer Signature)

\_\_\_\_\_  
(Date)



**Jennifer L. Svencer, PAC**

**Enhanced Credentialing Activity**

**General Profile**

**Primary Address**

North Central Health Care  
Wausau Behavioral Health  
1100 Lakeview Drive  
WAUSAU, WI 54403  
(715) 848-4600

**Other Provider Information**

ID#: 44224  
SSN:  
Date of Birth:  
Provider Specialties: Physician Assistant

NPI: 1285928283  
UPIN:  
Medicare#:  
Medicaid#:

**Credentialing Activity**

**Application**

Application Sent Date: 01/02/2015  
Attestation Date:  
Received Date: 01/27/2015

**Most Recent Query**

Query Type: Claims Processing  
Query Date: 01/06/2015

Credentialing  
Completed:

Issues:

**Aspirus Network, Inc.**

From 07/01/2013 To 08/30/2015

**Information Upon Credentialing Completion**

Status: ANI Current  
Category: ANI Allied Health Practitioner 2yr  
Category Applied For: ANI Allied Health Practitioner 2yr  
Network:  
Cred Activity Notes:

**Committee Progress**

Started:  
Status:

Issues:

Activity  
Completed:

**North Central Healthcare**

From 07/01/2013 To 06/30/2015

**Information Upon Credentialing Completion**

Status: NCHC Current  
Category: NCHC Allied Health 2yr  
Category Applied For: NCHC Allied Health 2yr  
Network:  
Cred Activity Notes:

**Committee Progress**

Started:  
Status:

Issues:

Activity  
Completed:

**Licenses**

License Type: DEA Certificate  
 State: WI  
 License Number: MS2504404  
 Status: Active  
 Expiration Date: 02/28/2017

Verified:   
 Verified Date: 01/28/2015  
 Verified By: Jill A. Patraw  
 Verified How: L-DEA Website  
 Notes: source date 1/26/2015

License Type: State License  
 State: WI  
 License Number: 2745  
 Status: Active  
 Expiration Date: 02/29/2016

Verified:   
 Verified Date: 01/28/2015  
 Verified By: Jill A. Patraw  
 Verified How: L-WI DRL Website  
 Notes:

License Type: WI Caregiver Background Check  
 State: WI  
 License Number:  
 Status:  
 Expiration Date: 11/14/2015

Verified:   
 Verified Date: 01/28/2015  
 Verified By: Jill A. Patraw  
 Verified How: O-Verified Previously  
 Notes:

License Type: Basic Life Support  
 State:  
 License Number:  
 Status:  
 Expiration Date: 01/08/2017

Verified:   
 Verified Date: 02/11/2015  
 Verified By: Jill A. Patraw  
 Verified How: O-FYI Only  
 Notes:

License Type: Advanced Cardiac Life Support  
 State:  
 License Number:  
 Status:  
 Expiration Date: 01/11/2015

Verified:   
 Verified Date: 03/06/2015  
 Verified By: Jill A. Patraw  
 Verified How: O-FYI Only  
 Notes:

**Insurance**

**ProAssurance (Advanced Care Providers)**

Policy Number: AFC9116114  
 Coverage Type:  
 Expiration Date: 11/02/2015

Letter Description: Verify Malpractice Insurance AHP\*  
 Letter Sent Date: 02/06/2015  
 Letter Sent By: Jill A. Patraw

Verified:   
 Verified Date: 02/10/2015  
 Verified By: Jill A. Patraw  
 Verified How: I-Verification from Carrier  
 Notes: limits not listed no claims

**ProAssurance**

Policy Number: MP67607  
 Coverage Type: Claims Made  
 Expiration Date: 02/01/2014

Letter Description: Verify Malpractice Insurance AHP\*  
 Letter Sent Date: 02/06/2015  
 Letter Sent By: Jill A. Patraw

Verified:   
 Verified Date: 02/10/2015  
 Verified By: Jill A. Patraw  
 Verified How: I-Verification from Carrier  
 Notes: \$1M / \$3M - No Claims

**Boards**

**National Commission on Certification of Phys Assts**

Board Status: Certified  
 Cert Number: 1098730  
 Expiration Date: 12/31/2015

Verified:   
 Verified Date: 01/28/2015  
 Verified By: Jill A. Patraw  
 Verified How: B-NCCPA Website  
 Notes:

**Affiliations**

**Northwoods Surgery Center**  
 Affiliation Type: Allied Health Staff  
 Category: Non-Provider  
 Dept/Specialty: Physician Assistant  
 Start Date: 07/23/2014  
 End Date: 02/23/2015

Letter Description: Verify Affiliations & Employment Reappt\*  
 Letter Sent Date: 02/18/2015  
 Letter Sent By: Jill A. Patraw

Verified:   
 Verified Date: 02/23/2015  
 Verified By: Jill A. Patraw  
 Verified How: A-NCS-Health Care Affiliation Verif Ltr  
 Notes:

**Northern WI Bone & Joint Center**  
 Affiliation Type: Employee  
 Category: Non-Provider  
 Dept/Specialty: Physician Assistant  
 Start Date: 07/23/2014  
 End Date: 02/17/2015

Letter Description: Verify Affiliations & Employment Reappt\*  
 Letter Sent Date: 02/06/2015  
 Letter Sent By: Jill A. Patraw

Verified:   
 Verified Date: 02/17/2015  
 Verified By: Jill A. Patraw  
 Verified How: A-NCS-Health Care Affiliation Verif Ltr  
 Notes:

**North Central Health Care**  
 Affiliation Type: Employee  
 Category: Non-Provider  
 Dept/Specialty: Physician Assistant  
 Start Date: 07/23/2014  
 End Date: 02/18/2015

Letter Description: Verify Affiliations & Employment Reappt\*  
 Letter Sent Date: 02/18/2015  
 Letter Sent By: Jill A. Patraw

Verified:   
 Verified Date: 02/18/2015  
 Verified By: Jill A. Patraw  
 Verified How: A-NCS-Health Care Affiliation Verif Ltr  
 Notes:

**Ann Chizek-Liermann, APRN**  
 Affiliation Type: Registered Nurse  
 Category: Registered Nurse  
 Dept/Specialty: Registered Nurse  
 Start Date: 02/27/2015  
 End Date:

Letter Description: Verify Refs - Reappointment \*  
 Letter Sent Date: 02/27/2015  
 Letter Sent By: Christa L Darnell


Verified:   
 Verified Date: 03/04/2015  
 Verified By: Jill A. Patraw  
 Verified How: A-NCS-Professional Ref Verif Ltr  
 Notes:

**David Tange, M.D.**  
 Affiliation Type: Specialist - Physician  
 Category: Specialist - Physician  
 Dept/Specialty: Specialist - Physician  
 Start Date:  
 End Date:

Letter Description: Verify Refs - Reappointment \*  
 Letter Sent Date: 02/27/2015  
 Letter Sent By: Christa L Darnell

Verified:   
 Verified Date: 03/03/2015  
 Verified By: Jill A. Patraw  
 Verified How: A-NCS-Professional Ref Verif Ltr  
 Notes:



	<i>Date &amp; Initials</i>	<i>Comments</i>
NPDB Website query through Cactus	1/6/2015 jap	
OIG Website	<i>Date &amp; Initials</i> source date 12/3/2014 jap conducted date 1/5/2015 jap	<i>Comments</i>
SAM Website	<i>Date &amp; Initials</i> 1/5/2015 jap	<i>Comments</i>
Medicare Opt Out Website	<i>Date &amp; Initials</i> report run date 1/12/2015 jap reviewed date 1/28/2015 jap	<i>Comments</i>
Supervising Physician Form	<i>Sign Date &amp; Initials</i> 1/26/2015 jap	<i>Comments</i> David Tange, MD
Collaborative Agreement	<i>Sign Date &amp; Initials</i> N/A	<i>Comments</i> N/A
Consent Form	<i>Sign Date &amp; Initials</i> 1/15/2015 jap	<i>Comments</i>
Privilege Form	<i>Sign Date &amp; Initials</i> N/A	<i>Comments</i> N/A
Quality Improvement Activities (payor requirement)	<i>Date &amp; Initials</i>	<i>Comments</i>
Patient Complaints (payor requirement)	<i>Date &amp; Initials</i>	<i>Comments</i>
CVO Review	<i>Date</i> 3/11/15 <i>Date</i>	<i>Signature</i>  <i>Signature</i>
Entity Review		
ANI Only - All Disclosure Questions Answered YES___ NO___		
ANI Only - Issues Identified YES___ NO___		

North Central Health Care

APPOINTMENT RECOMMENDATION FLOW SHEET

Appointee Debra J. Sanfilippo, PA-C

Appointment/ Reappointment 07-01-2015 to 06-30-2017  
Time Period

Staff Category  Active  Locum Tenens  
 Courtesy  Delegation  
 Mid-Level Practitioner

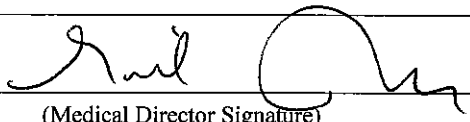
Clinical Privileges  Medical (Includes Family Practice, Internal Medicine)  
 Psychiatry  Dentistry  
 Mid-Level Practitioner  Psychologist

Special Conditions: \_\_\_\_\_

**MEDICAL DIRECTOR**

I have reviewed this physician's/practitioner's file and find that this appointee meets the criteria for appointment/reappointment to the Medical Staff of North Central Health Care.

Comments: \_\_\_\_\_

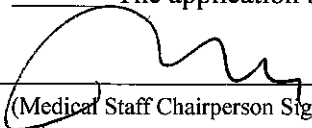
  
(Medical Director Signature)

4-8-15  
(Date)

**MEDICAL STAFF CHAIRPERSON**

Medical Staff recommends that:

- He/she be appointed/reappointed to the Medical Staff as requested
- Action be deferred on the application
- The application be denied

  
(Medical Staff Chairperson Signature)

4.21.15  
(Date)

**GOVERNING BOARD**

Reviewed by Governing Board: \_\_\_\_\_  
(Date)

Response:  Concur  
 Recommend further reconsideration

Reason: \_\_\_\_\_

Completion date: \_\_\_\_\_

\_\_\_\_\_  
(Chief Executive Officer Signature)

\_\_\_\_\_  
(Date)



**Debra J. Sanfilippo, PAC**

**Enhanced Credentialing Activity**

**General Profile**

**Primary Address**

North Central Health Care  
1100 Lake View Drive  
Wausau, WI 54403-6785  
(715) 848-4600

**Other Provider Information**

ID#: \_\_\_\_\_  
SSN: \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Provider Specialties: Physician Assistant

NPI: 1922035898  
UPIN: S85203  
Medicare#: 1922035898  
Medicaid#: 42939600

**Credentialing Activity**

**Application**

Application Sent Date: 01/02/2015  
Attestation Date: \_\_\_\_\_  
Received Date: 01/27/2015

**Most Recent Query**

Query Type: Claims Processing  
Query Date: 01/06/2015

**Credentialing**

Completed:

Issues:

**Aspirus Network, Inc.**

From 07/01/2013 To 06/30/2015

**Information Upon Credentialing Completion**

Status: ANI Current  
Category: ANI Allied Health Practitioner 2yr  
Category Applied For: ANI Allied Health Practitioner 2yr  
Network: \_\_\_\_\_  
Cred Activity Notes: \_\_\_\_\_

**Committee Progress**

Started: \_\_\_\_\_  
Status: \_\_\_\_\_

Issues:

**Activity**

Completed:

**North Central Healthcare**

From 07/01/2013 To 06/30/2015

**Information Upon Credentialing Completion**

Status: NCHC Current  
Category: NCHC Allied Health 2yr  
Category Applied For: NCHC Allied Health 2yr  
Network: \_\_\_\_\_  
Cred Activity Notes: \_\_\_\_\_

**Committee Progress**

Started: \_\_\_\_\_  
Status: \_\_\_\_\_

Issues:

**Activity**

Completed:

**Licenses**

License Type: WI Caregiver Background  
Check  
State: WI  
License Number:  
Status:  
Expiration Date: 07/11/2015

Verified:   
Verified Date: 01/23/2015  
Verified By: Jill A. Patraw  
Verified How: O-Verified Previously  
Notes:

License Type: DEA Certificate  
State: WI  
License Number: MS1095048  
Status: Active  
Expiration Date: 02/29/2016

Verified:   
Verified Date: 01/23/2015  
Verified By: Jill A. Patraw  
Verified How: L-DEA Website  
Notes: source date 1/19/2015 jap

License Type: State License  
State: WI  
License Number: 296  
Status: Active  
Expiration Date: 02/29/2016

Verified:   
Verified Date: 01/23/2015  
Verified By: Jill A. Patraw  
Verified How: L-WI DRL Website  
Notes:

**Insurance**

**ProAssurance (Advanced Care Providers)**

Policy Number: AFC9116114  
Coverage Type: Claims Made  
Expiration Date: 11/02/2015

Letter Description: Verify Malpractice Insurance  
AHP\*  
Letter Sent Date: 02/06/2015  
Letter Sent By: Jill A. Patraw

Verified:   
Verified Date: 02/10/2015  
Verified By: Jill A. Patraw  
Verified How: I-Verification from Carrier  
Notes: limits not listed  
no claims

**Boards**

**National Commission on Certification of Phys Assts**

Board Status: Certified  
Cert Number: 1009401  
Expiration Date: 12/31/2015

Verified:   
Verified Date: 01/23/2015  
Verified By: Jill A. Patraw  
Verified How: B-NCCPA Website  
Notes:

**Affiliations****Debra J. Sanfilippo, PAC****Howard Young Medical Center**

*Affiliation Type:* Allied Health Staff  
*Category:* Not Provided  
*Dept/Specialty:* Physician Assistant  
  
*Start Date:* 08/11/1999  
*End Date:*

*Letter Description:* Verify Affiliations & Employment Reappt\*  
*Letter Sent Date:* 02/06/2015  
*Letter Sent By:* Jill A. Patraw

**Verified:**   
*Verified Date:* 02/11/2015  
  
*Verified By:* Jill A. Patraw  
*Verified How:* A-NCS-Health Care Affiliation Verif Ltr  
  
*Notes:*

**Good Samaritan Health Center**

*Affiliation Type:* Allied Health Staff  
  
*Category:* Not Provided  
*Dept/Specialty:* Physician Assistant  
  
*Start Date:* 02/01/2007  
*End Date:*

*Letter Description:* Verify Affiliations & Employment Reappt\*  
*Letter Sent Date:* 02/06/2015  
*Letter Sent By:* Jill A. Patraw

**Verified:**   
*Verified Date:* 02/17/2015  
  
*Verified By:* Jill A. Patraw  
*Verified How:* A-NCS-Health Care Affiliation Verif Ltr  
  
*Notes:*

**North Central Health Care**

*Affiliation Type:* Allied Health Staff  
  
*Category:* Not Provided  
*Dept/Specialty:* Physician Assistant  
  
*Start Date:* 05/23/2011  
*End Date:*

*Letter Description:* Verify Affiliations & Employment Reappt\*  
*Letter Sent Date:* 02/18/2015  
*Letter Sent By:* Jill A. Patraw

**Verified:**   
*Verified Date:* 02/18/2015  
  
*Verified By:* Jill A. Patraw  
*Verified How:* A-NCS-Health Care Affiliation Verif Ltr  
  
*Notes:*

**Sacred Heart - Saint Mary's Hospital**

*Affiliation Type:* Allied Health Staff  
  
*Category:* Allied Health Practitioner  
*Dept/Specialty:* Physician Assistant  
  
*Start Date:* 03/21/2006  
*End Date:*

*Letter Description:* Verify Affiliations & Employment Reappt\*  
*Letter Sent Date:* 02/18/2015  
*Letter Sent By:* Jill A. Patraw

**Verified:**   
*Verified Date:* 02/20/2015  
  
*Verified By:* Jill A. Patraw  
*Verified How:* A-Health Care Facility Verif Ltr  
  
*Notes:*

**Eagle River Memorial Hospital**

*Affiliation Type:* Allied Health Staff  
  
*Category:* Not Provided  
*Dept/Specialty:* Physician Assistant  
  
*Start Date:* 09/07/1999  
*End Date:*

*Letter Description:* Verify Affiliations & Employment\*  
*Letter Sent Date:* 03/06/2015  
*Letter Sent By:* Jill A. Patraw

**Verified:**   
*Verified Date:* 03/10/2015  
  
*Verified By:* Jill A. Patraw  
*Verified How:* A-NCS-Health Care Affiliation Verif Ltr  
  
*Notes:*

**Mike Tonne, PAC**

*Affiliation Type:* Reference  
  
*Category:*  
*Dept/Specialty:*  
  
*Start Date:*  
*End Date:*

*Letter Description:* Verify Refs - Reappointment \*  
*Letter Sent Date:* 02/18/2015  
*Letter Sent By:* Jill A. Patraw


**Verified:**   
*Verified Date:* 02/15/2015  
  
*Verified By:* Jill A. Patraw  
*Verified How:* A-NCS-Professional Ref Verif Ltr  
  
*Notes:*

**David Tange, M.D.**

*Affiliation Type:* Sponsoring Physician  
  
*Category:*  
*Dept/Specialty:*  
  
*Start Date:*  
*End Date:*

*Letter Description:* Verify Refs - Reappointment \*  
*Letter Sent Date:* 02/27/2015  
*Letter Sent By:* Christa L Darnell

**Verified:**   
*Verified Date:* 03/03/2015  
  
*Verified By:* Jill A. Patraw  
*Verified How:* A-NCS-Professional Ref Verif Ltr  
  
*Notes:*

	Date & Initials	Comments
NPDB Website query through Cactus	1/6/2015 jap	
OIG Website	Date & Initials source date 12/3/2014 jap conducted date 1/5/2015 jap	Comments
SAM Website	Date & Initials 1/5/2015 jap	Comments
Medicare Opt Out Website	Date & Initials report run date 1/12/2015 jap reviewed date 1/23/2015 jap	Comments
Supervising Physician Form	Sign Date & Initials 1/26/2015 jap	Comments David Tange, MD
Collaborative Agreement	Sign Date & Initials N/A	Comments N/A
Consent Form	Sign Date & Initials 1/21/2015 jap	Comments
Privilege Form	Sign Date & Initials N/A	Comments N/A
Quality Improvement Activities (payor requirement)	Date & Initials	Comments
Patient Complaints (payor requirement)	Date & Initials	Comments
CVO Review	Date 3/19/15 Date	Signature  Signature
Entity Review		
ANI Only - All Disclosure Questions Answered		
YES___ NO___		
ANI Only - Issues Identified		
YES___ NO___		





**Ellen C. Barker, APNP**

**Enhanced Credentialing Activity**

**General Profile**

**Primary Address**

North Central Health Care  
1100 Lake View Drive  
Wausau, WI 54403-6785  
(715) 848-4600

**Other Provider Information**

ID#: 14102  
SSN: [REDACTED]  
Date of Birth: [REDACTED]  
Provider Specialties: Nurse Practitioner

NPI: 1558644955  
UPIN:  
Medicare#:  
Medicaid#:

**Credentialing Activity**

**Application**

Application Sent Date: 01/02/2015  
Attestation Date:  
Received Date: 02/13/2015

**Most Recent Query**

Query Type: Claims Processing  
Query Date: 01/06/2015

Credentialing  
Completed:

Issues:

**Aspirus Network, Inc.**

From 07/01/2013 To 06/30/2015

**Information Upon Credentialing Completion**

Status: ANI Current  
Category: ANI Allied Health Practitioner 2yr  
Category Applied For: ANI Allied Health Practitioner 2yr  
Network:  
Cred Activity Notes:

**Committee Progress**

Started:  
Status:

Issues:

Activity  
Completed:

**North Central Healthcare**

From 09/23/2013 To 06/30/2015

**Information Upon Credentialing Completion**

Status: NCHC Current  
Category: NCHC Allied Health 2yr  
Category Applied For: NCHC Allied Health 2yr  
Network:  
Cred Activity Notes:

**Committee Progress**

Started:  
Status:

Issues:

Activity  
Completed:



**Licenses**

License Type: DEA Certificate  
 State: WI  
 License Number: MB2504911  
 Status: Active  
 Expiration Date: 07/31/2017

Verified:   
 Verified Date: 01/26/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: L-DEA Website  
 Notes: Source date 1/19/2015

License Type: State License  
 State: WI  
 License Number: 4673  
 Status: Active  
 Expiration Date: 09/30/2016

Verified:   
 Verified Date: 01/26/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: L-WI DRL Website  
 Notes: APNP

License Type: State License  
 State: WI  
 License Number: 181016  
 Status: Active  
 Expiration Date: 02/29/2016

Verified:   
 Verified Date: 01/26/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: L-WI DRL Website  
 Notes: Multi state RN

License Type: WI Caregiver Background Check  
 State: WI  
 License Number:  
 Status:  
 Expiration Date: 09/11/2017

Verified:   
 Verified Date: 01/26/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: O-Verified Previously  
 Notes:

License Type: Basic Life Support  
 State:  
 License Number:  
 Status:  
 Expiration Date: 06/29/2013

Verified:   
 Verified Date: 03/09/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: O-Clean Up  
 Notes:

**Insurance**

**ProAssurance Companies**

Policy Number: MP66573  
 Coverage Type:  
 Expiration Date: 01/01/2016

Letter Description: Verify Malpractice Insurance AHP\*  
 Letter Sent Date: 02/06/2015  
 Letter Sent By: Jill A. Patraw

Verified:   
 Verified Date: 02/10/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: I-Verification from Carrier  
 Notes: \$1M / \$3M - No Claims

**ProAssurance**

Policy Number: MP67600  
 Coverage Type:  
 Expiration Date: 02/01/2014

Letter Description: Verify Malpractice Insurance AHP\*  
 Letter Sent Date: 02/06/2015  
 Letter Sent By: Jill A. Patraw

Verified:   
 Verified Date: 02/10/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: I-Verification from Carrier  
 Notes: \$1M / \$3M - No Claims

**Columbia Casualty/Philadelphia Indemnity (NCHC)**

Policy Number: HMH1064395509  
 Coverage Type:  
 Expiration Date: 01/01/2015

Letter Description: Verify Malpractice Insurance AHP\*  
 Letter Sent Date: 02/18/2015  
 Letter Sent By: Jill A. Patraw

Verified:   
 Verified Date: 02/18/2015 ✓  
 Verified By: Christa L Darnell  
 Verified How: I-Verification from Carrier  
 Notes: \$1M / \$3M - No Claims

**Boards**

**Am Nurses Credentialing Center-Mental Health**

Board Status: Certified  
Cert Number: 2011012480  
Expiration Date: 09/12/2016

Verified:   
Verified Date: 01/26/2015  
Verified By: Christa L Darnell ✓  
Verified How: B-ANCC Website  
Notes:

**Affiliations**

**Bridge Community Health Clinic**

Affiliation Type: Allied Health Staff  
Category: Not Provided  
Dept/Specialty: Nurse Practitioner  
Start Date: 11/07/2011  
End Date: 12/31/2013

Letter Description: Verify Affiliations & Employment Reappt\*  
Letter Sent Date: 02/18/2015  
Letter Sent By: Jill A. Patraw

Verified:   
Verified Date: 02/18/2015  
Verified By: Christa L Darnell ✓  
Verified How: A-NCS-Health Care Affiliation Verif Ltr  
Notes:

**North Central Health Care**

Affiliation Type: Allied Health Staff  
Category: Not Provided  
Dept/Specialty: Nurse Practitioner  
Start Date: 01/06/2013  
End Date:

Letter Description: Verify Affiliations & Employment Reappt\*  
Letter Sent Date: 02/18/2015  
Letter Sent By: Jill A. Patraw

Verified:   
Verified Date: 02/17/2015  
Verified By: Christa L Darnell ✓  
Verified How: A-NCS-Health Care Affiliation Verif Ltr  
Notes:

**Maureen MacConnell APNP**

Affiliation Type: Reference  
Category:  
Dept/Specialty:  
Start Date:  
End Date:

Letter Description: Verify Refs - Reappointment \*  
Letter Sent Date: 03/09/2015  
Letter Sent By: Christa L Darnell


Verified:   
Verified Date: 03/09/2015 ✓  
Verified By: Christa L Darnell  
Verified How: A-NCS-Professional Ref Verif Ltr  
Notes:

**Gabriel Ticho, MD**

Affiliation Type: Sponsoring Physician  
Category:  
Dept/Specialty:  
Start Date:  
End Date:

Letter Description: Verify Refs - Reappointment \*  
Letter Sent Date: 02/27/2015  
Letter Sent By: Christa L Darnell

Verified:   
Verified Date: 02/20/2015 ✓  
Verified By: Christa L Darnell  
Verified How: A-NCS-Professional Ref Verif Ltr  
Notes:

	<i>Date &amp; Initials</i>	<i>Comments</i>
NPDB Website query through Cactus	1/6/2015 CLD	
OIG Website	<i>Date &amp; Initials</i> Source date 1/7/2015 CLD Conducted date 1/14/2015 CLD	<i>Comments</i>
SAM Website	<i>Date &amp; Initials</i> 1/5/2015 CLD	<i>Comments</i>
Medicare Opt Out Website	<i>Date &amp; Initials</i> Report run date 1/12/2015 CLD Review date 1/26/2015 CLD	<i>Comments</i>
Supervising Physician Form	<i>Sign Date &amp; Initials</i> N/A	<i>Comments</i> N/A
Collaborative Agreement	<i>Sign Date &amp; Initials</i> 1/19/2015 CLD	<i>Comments</i> Gabriel Ticho M.D.
Consent Form	<i>Sign Date &amp; Initials</i> 1/14/2015 CLD	<i>Comments</i>
Privilege Form	<i>Sign Date &amp; Initials</i> N/A	<i>Comments</i> N/A
Quality Improvement Activities (payor requirement)	<i>Date &amp; Initials</i>	<i>Comments</i>
Patient Complaints (payor requirement)	<i>Date &amp; Initials</i>	<i>Comments</i>
CVO Review	<i>Date</i> 3-19-15	<i>Signature</i> 
Entity Review	<i>Date</i>	<i>Signature</i>
ANI Only - All Disclosure Questions Answered YES___ NO___		
ANI Only - Issues Identified YES___ NO___		



**Debra A. Knapp, APNP**

**Enhanced Credentialing Activity**

**General Profile**

<b>Primary Address</b> North Central Health Care 1100 Lake View Drive Wausau, WI 54403-6785 (715) 848-4600	<b>Other Provider Information</b> ID#: 11585 Date of Birth: Provider Specialties: Nurse Practitioner	NPI: 1376570374 UPIN: Medicare#: Medicaid#:
--	---	--

**Credentialing Activity**

<b>Application</b> Application Sent Date: 01/02/2015 Affestation Date: Received Date: 01/27/2015	<b>Most Recent Query</b> Query Type: Claims Processing Query Date: 01/06/2015 Issues: <input type="checkbox"/>	<b>Credentialing Completed:</b> <input checked="" type="checkbox"/>
<b>Aspirus Network, Inc.</b> From 07/01/2013 To 06/30/2015		
<b>Information Upon Credentialing Completion</b> Status: ANI Current Category: ANI Allied Health Practitioner 2yr Category Applied For: ANI Allied Health Practitioner 2yr Network: Cred Activity Notes:	<b>Committee Progress</b> Started: Status: Issues: <input type="checkbox"/>	<b>Activity Completed:</b> <input checked="" type="checkbox"/>
<b>North Central Healthcare</b> From 07/01/2013 To 06/30/2015		
<b>Information Upon Credentialing Completion</b> Status: NCHC Current Category: NCHC Allied Health 2yr Category Applied For: NCHC Allied Health 2yr Network: Cred Activity Notes:	<b>Committee Progress</b> Started: Status: Issues: <input type="checkbox"/>	<b>Activity Completed:</b> <input checked="" type="checkbox"/>

**Licenses**

License Type: WI Caregiver Background  
Check  
State: WI  
License Number:  
Status:  
Expiration Date: 03/07/2016

Verified:   
Verified Date: 01/28/2015 ✓

Verified By: Jennifer L. Apfel  
Verified How: O-Verified Previously  
Notes:

**United States Department of Justice**

License Type: DEA Certificate  
State: WI  
License Number: MK1141415  
Status: Active  
Expiration Date: 12/31/2015

Verified:   
Verified Date: 01/28/2015

Verified By: Jennifer L. Apfel ✓  
Verified How: L-DEA Website  
Notes: source date 1/26/2015

**Medical Examining Board**

License Type: State License  
State: WI  
License Number: 68381  
Status: Active  
Expiration Date: 02/29/2016

Verified:   
Verified Date: 01/28/2015

Verified By: Jennifer L. Apfel ✓  
Verified How: L-WI DRL Website  
Notes: RN  
Multi state

**Medical Examining Board**

License Type: State License  
State: WI  
License Number: 460  
Status: Active  
Expiration Date: 09/30/2016

Verified:   
Verified Date: 01/28/2015

Verified By: Jennifer L. Apfel ✓  
Verified How: L-WI DRL Website  
Notes: APNP

**Insurance**

**Pro Assurance**

Policy Number: MP66573  
Coverage Type: Occurrence  
Expiration Date: 01/01/2016

Letter Description: Verify Malpractice Insurance  
AHP\*  
Letter Sent Date: 02/06/2015  
Letter Sent By: Jill A. Patraw

Verified:   
Verified Date: 02/10/2015 ✓

Verified By: Jennifer L. Apfel  
Verified How: I-Verification from Carrier  
Notes: \$1M/\$3M  
no claims

**Boards**

**Am Nurses Credentialing Center**

Board Status: Certified  
Cert Number: 0240357  
Expiration Date: 08/31/2015

Verified:   
Verified Date: 01/28/2015 ✓

Verified By: Jennifer L. Apfel  
Verified How: B-ANCC Website  
Notes:

**Affiliations**

**St. Clare's Hospital**

*Affiliation Type:* Allied Health Staff

*Category:* Not Provided

*Dept/Specialty:* Nurse Practitioner

*Start Date:* 06/22/2006

*End Date:* 06/27/2014

*Letter Description:* Verify Affiliations & Employment Reappt\*

*Letter Sent Date:* 02/06/2015

*Letter Sent By:* Jill A. Patraw

**Verified:**

*Verified Date:* 02/17/2015

*Verified By:* Jennifer L. Apfel

*Verified How:* A-NCS-Health Care Affiliation Verif Ltr

*Notes:*

**North Central Health Care**

*Affiliation Type:* Allied Health Staff

*Category:* Not Provided

*Dept/Specialty:* Nurse Practitioner

*Start Date:* 11/01/2001

*End Date:*

*Letter Description:* Verify Affiliations & Employment Reappt\*

*Letter Sent Date:* 02/18/2015

*Letter Sent By:* Jill A. Patraw

**Verified:**

*Verified Date:* 02/18/2015

*Verified By:* Jennifer L. Apfel

*Verified How:* A-NCS-Health Care Affiliation Verif Ltr

*Notes:*

**St. Michael's Hospital**

*Affiliation Type:* Allied Health Staff

*Category:* Not Provided

*Dept/Specialty:* Nurse Practitioner

*Start Date:* 06/26/2006

*End Date:*

*Letter Description:* Verify Affiliations & Employment Reappt\*

*Letter Sent Date:* 02/18/2015

*Letter Sent By:* Jill A. Patraw

**Verified:**

*Verified Date:* 02/18/2015

*Verified By:* Jennifer L. Apfel

*Verified How:* O-Unable to Verify

*Notes:* per letter not credentialed at MSMH

**Matrix Medical Network**

*Affiliation Type:* Allied Health Staff

*Category:*

*Dept/Specialty:*

*Start Date:* 08/01/2014

*End Date:*

*Letter Description:* Verify Affiliations & Employment Reappt\*

*Letter Sent Date:* 03/30/2015

*Letter Sent By:* Jennifer L. Apfel

**Verified:**

*Verified Date:* 04/20/2015

*Verified By:* Jennifer L. Apfel

*Verified How:* O-Unable to Verify

*Notes:* 3 attempts no response

**Ana Holiday PA**

*Affiliation Type:* Reference

*Category:*

*Dept/Specialty:*

*Start Date:*

*End Date:*

*Letter Description:* Verify Refs - Reappointment \*

*Letter Sent Date:* 03/30/2015

*Letter Sent By:* Jennifer L. Apfel

**Verified:**

*Verified Date:* 04/16/2015

*Verified By:* Jennifer L. Apfel

*Verified How:* A-NCS-Professional Ref Verif Ltr

*Notes:*

**David Tange, M.D.**

*Affiliation Type:* Sponsoring Physician

*Category:*

*Dept/Specialty:*

*Start Date:*

*End Date:*

*Letter Description:* Verify Refs - Reappointment \*

*Letter Sent Date:* 02/27/2015

*Letter Sent By:* Christa L Darnell


**Verified:**

*Verified Date:* 03/03/2015

*Verified By:* Jennifer L. Apfel

*Verified How:* A-NCS-Professional Ref Verif Ltr

*Notes:*

	Date & Initials	Comments
NPDB Website query through Cactus	1/6/2015 jla	
OIG Website	Date & Initials source date 12/3/2014 conducted 1/5/2015 jla	Comments
SAM Website	Date & Initials 1/5/2015 jla	Comments
Medicare Opt Out Website	Date & Initials report ran 1/12/2015 reviewed 1/28/2015 jla	Comments
Supervising Physician Form	Sign Date & Initials N/A	Comments N/A
Collaborative Agreement	Sign Date & Initials 1/26/2015 jla	Comments David Tange MD
Consent Form	Sign Date & Initials 1/17/2015 jla	Comments
Privilege Form	Sign Date & Initials N/A	Comments N/A
Quality Improvement Activities (payor requirement)	Date & Initials	Comments
Patient Complaints (payor requirement)	Date & Initials	Comments
CVO Review	Date 4/20/15 Date	Signature  Signature
Entity Review		
ANI Only - All Disclosure Questions Answered		
YES___ NO___		
ANI Only - Issues Identified		
YES___ NO___		



XXXXXXXXXXXXXXXXXXXXXXXXXX

Below are some of the issues which need to be resolved before the County moves ahead with large commitments such as the addition/remodeling to Mount View. Unless otherwise indicated, the below items are taken from information presented in North Central's audited financial statements. If you need further confirmation of any of these issues, Kristi Kordus told me she would be happy to verify the accuracy of these statements with you.

**UNDERSTATEMENT OF FUNDS NEEDED TO OPERATE MOUNT VIEW**

Through various presentations by North Central Health Care (NCHC) and its auditors we have been told that County resources used for Mount View were tax levies. Nothing could be further from the truth. During the last two operating years the County has paid to NCHC the following for operating the nursing home:

	2013 <sup>4</sup>	2014 <sup>3</sup>
<b>Tax Levy</b>	<b>\$1,700,000</b>	<b>\$1,700,000</b>
<b>CIP Contributions</b>	<b>225,341</b>	<b>19,644</b>
<b>Amounts transferred to nursing home by NCHC meant for mental health, Dev Disabilities and alcohol/drug treatment</b>	<b>2,432,656</b>	<b>701,666</b>

In addition, Marathon County continues to pay property and liability insurance on the nursing home building. That cost is estimated at approximately \$30,000 annually and would easily double in a new remodeled structure.

During the last 4 operating years NCHC has transferred County funds--in excess of budgeted tax levy requests- -totaling \$11,359,868 to nursing home operations. These transfers were made by NCHC and not reviewed or approved by any Marathon County committee or it's Board. This is a relevant issue as these dollars represent amounts which should have gone to traditional mental health, developmental disabilities and alcohol/drug treatment programs as was the intent in the County budgets. This figure is in addition to \$357,129 of Capital Improvement (CIP) funds the County allocated to Mount View during this same period.

**EMPLOYEE PROFIT SHARING**

In 2011 North Central Health Care initiated an "EMPLOYEE INCENTIVE PLAN"

which provided for bonuses to employee. This plan was not budgeted by NCHC and is based on excess profits. During the last four years \$2.4 million was distributed to NCHC employees for this benefit.

Why is this relevant? During this period Marathon County was struggling with the State mandated restraints of ACT 10 which limit benefits and employee compensation. Yet NCHC (and Mount View) was able to reward its employees with non-budgeted bonuses by utilizing Marathon County funds. In addition, currently NCHC lacks a long-term alcohol treatment program and discussions are currently taking place to determine why mental health services are not provided to incarcerated individuals in the County. **WERE THESE NOT THE INTENT OF COUNTY APPROPRIATIONS INSTEAD OF NON-BUDGETED EMPLOYEE BONUSES?**

#### WHERE WE ARE NOW

Marathon County is not a county with excess resources- -annual per capita and family income in our County lags below behind both the State and Federal levels. Should we be burdening our tax payers by duplicating services the private sector already provides? And our 5-STAR ranking at Mount View- -NO MORE. We can only brag about 4-STARS along with a number of other nursing homes in central Wisconsin. The difference is the others achieve this and still require no tax dollars from the County and they pay both income and property taxes.

Over the last 6 years Mount View resident occupancy has gone from 270 to 216 per day- -a 25% drop. The main reason for this drop is that more people are in their homes or similar settings much later in life. This trend is expected to continue.

When Marathon County put its 2015 budget together we were limited to the amount we could increase our operating levy by about \$800,000. Significant cuts to programs were made and enhancements were put on hold. Based on past financial performance by Mount View, we cannot afford to move forward with this project UNLESS we can identify where other program cuts would be made and/or **WE ARE READY FOR A REFERENDUM ALLOWING US TO EXCEED STATE MANDATED LEVY LIMITS.**

From

Bill Miller

## CEO Report: April, 2015

- 1. Strategic Planning:** The consultants from Schafer Consulting have completed the data acquisition phase of the engagement including an external environmental analysis. They are working on the preparation of a first draft of a strategic planning document that they will go over with us in early May. To keep this process moving forward, it may be necessary to try to schedule an additional board meeting in May rather than wait until the end of the month when we have our regular board meeting. It would be useful to use that meeting for review of a second iteration of the plan which will move it closer to completion.
- 2. Inpatient Collaboration:** We are continuing to explore potential options for collaboration on provision of inpatient services with Wood County. Potential areas for collaborative effort include: adolescent services, inpatient hospitalization and physician recruitment. These discussions are still at a very conceptual level but we are continuing to meet and have formed a work group to investigate opportunities for collaboration on adolescent services.
- 3. Psychiatry Residency Program:** We now have a commitment from Ministry Healthcare to support the program. We have secured commitments on 11 of the necessary 12 stipends. We are continuing to seek a part-time training director.
- 4. JCAHO Survey:** Preparations continue for an accreditation survey in June or early July. We will be providing education to board members at the May board meeting on the survey process. Some board members will likely be asked to participate in the survey process.