

OFFICIAL NOTICE AND AGENDA

of a meeting of the **North Central Community Services Program Board** to be held at **Westwood Conference Center**
1800 Westwood Center Blvd, Wausau, WI 54401, Room 106 at **12:00 pm** on **Thursday, June 29th, 2017**

In addition to attendance in person at the location described above, Board members and the public are invited to attend by telephone conference. Persons wishing to attend the meeting by phone should contact Debbie Osowski at 715-848-4405 24 hours prior to the start time of the meeting for further instructions. Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call the Administrative Office at 715-848-4405.

For TDD telephone service call 715-845-4928.

A QUORUM OF THE RETAINED COUNTY AUTHORITY COMMITTEE, COMPRISED OF APPOINTEES FROM LANGLADE, LINCOLN, AND MARATHON COUNTIES, MAY BE PRESENT AT THE NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD MEETING; HOWEVER, NO VOTE OR ACTION WILL BE TAKEN BY THE RETAINED COUNTY AUTHORITY COMMITTEE.

1. Call to Order
2. Public Comment for Matters Appearing on the Agenda
3. Chairman's Report and Announcements– J. Zriny
4. ACTION: Approval of 5/25/17 NCCSP Board Meeting Minutes
5. Committee Reports
 - a. Executive Committee Report – J. Zriny
 - i. Review Draft Minutes of the 6/8/17 Meeting
 - b. Finance, Personnel & Property Committee Report – B. Weaver
 - i. Review Draft Minutes of 5/25/17 Meeting
 - ii. Overview of 6/29/17 Meeting
 - iii. May Financials – B. Glodowski
 1. CFO Report
 2. ACTION: Accept the May Financial Report and Financial Statements
 - c. Nursing Home Operations Committee Report – J. Burgener
 - i. Review Draft Minutes of the 5/24/17 Meeting
 - ii. Overview of 6/23/17 Meeting
 - d. Quality Committee Report – M. Loy
 - i. Organizational Outcomes
 1. ACTION: Accept the Quality Dashboard as Presented
6. Medical Staff Credentialing – M. Loy
 - a. ACTION: Motion to Approve Appointment of Anne Dibala, M.D., Michael Lance, M.D., Robert Vickrey, M.D., and the Reappointments of Jean Baribeau-Anaya, PAC, Terry Gander, PA-C, Debra Knapp, APNP, Debra Sanfilippo, PAC, Jennifer Svencer, PA-C, Shae Wheeler, PA-C,
7. Chief Executive Officer Recruitment Plan and Timeline– J. Zriny
8. CEO Work Plan Update and Report – M. Loy
 - a. Update on Nursing Home Operational Assessment and Strategic Plan
 - b. Retained County Authority Committee Update
 - c. Medical College of Wisconsin Psychiatry Residency Program
 - d. Retained County Authority Performance Expectations
9. Discussion of Future Agenda Items for Board Consideration or Committee Assignment
10. Board Retreat (Anticipated 1:00 PM start time) – Policy Governance Discussion
11. Adjourn

NOTICE POSTED AT: North Central Health Care

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

DATE: 06/23/17 TIME: 4:00 p.m. BY: D. Osowski



Presiding Officer or Designee

NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD MEETING MINUTES

May 25, 2017

12:00 p.m.

North Central Health Care-Wausau

Present:

X	Randy Balk	X	Steve Benson	EXC	Ben Bliven
X	Jean Burgener	X Video	Holly Matucheski	X	Bill Metter
X	Bill Miller	X ^{Conf.}	Corrie Norrbom	X	Greta Rusch
X	Rick Seefeldt	X	Robin Stowe	X	Bob Weaver
EXC	Theresa Wetzsteon	EXC	Jeff Zriny		

Also Present: Michael Loy, Brenda Glodowski, Kim Gochanour, Sue Matis, Sheila Zblewski, Lance Leonhard

Call to Order

- The meeting was called to order at 12:00 p.m. by Vice-Chair Burgener.

Public Comment for Matters Appearing on the Agenda

- No public comments made.

Education: Annual Report Presentation – M. Loy

- The draft 2016 Annual Report was provided and reviewed. M. Loy thanked Jessica Meadows for her exceptional work along with Tom Dowe, Terry Szews, and Brenda Glodowski for their assistance with data and financial information to better understand our organization's operations.
- Highlights include a combined introductory letter from Jeff Zriny and Michael Loy focusing on the positive rather than adversities, what has been done in the communities to help create a positive path for the future, an Executive Insight was included for each major service area, and over 11,000 individuals were served last year.
- Once finalized the Annual Report will be distributed to each County Board member in the three counties, community partners, media, etc.
- Any comments on the annual report can be provided to M. Loy by end of the day tomorrow.
- Motion**/second, Weaver/Balk, to accept the Annual Report. Motion carried.

Chairman's Report and Announcements – J. Burgener

- Health and Human Services Committee of Marathon County took action at their May meeting to move the vote on the pool's construction to the Marathon County Board in June. Suggested the Board think how we can work collaboratively with the North Central Health Foundation, Warm Water Works, etc. in fundraising the anticipated \$3 million that the County will request.

Approval of 4/27/17 NCCSP Board Meeting Minutes

- Motion**/second, Weaver/Rusch to approve the NCCSP Board Minutes of 4/27/17. Motion carried.

Executive Committee Report – J. Burgener

- Board Retreat is scheduled for June 29 from 12-5 p.m. Location to be determined.

- Executive Committee has met with the Retained County Authority Committee (RCA) regarding moving forward with the CEO selection process and expressed that it would be in the best interest of North Central Health Care to select a CEO sooner than later. A job description is being finalized by Sue Matis and Brad Karger. The RCA will participate but the Executive Committee is driving the selection process once the description and compensation is settled.
- We are actively recruiting psychiatrists. There are three psychiatrists in Wisconsin considering a move to this area. One psychiatrist mentioned he was encouraged by the direction our organization is headed after reading the Board minutes on our website. Having the psychiatry residency program and the Medical College of Wisconsin involved is also more attractive for physicians.

Finance, Personnel & Property Committee – B. Weaver

- There was a positive variance year to date of \$525,000. Significant improvement has been seen in health insurance and state institutes.
- In the nursing home our budget indicates a loss for the year but our goal is for the nursing home to break even. The census is off slightly but is typical for this time of year. The Medicare census has improved in May and Legacies census is at 101 with a budget of 100.
- Anticipate a 2% increase in the state budget which will help improve the nursing home financials.
- Strategic planning may include providing services in the home. Anticipate the nursing home consultants will be including this and other strategic opportunities in their report (due July 1).
- **Motion/second, Weaver/Metter, to approve the April Financial Report and Financial Statements. Motion carried.**

Nursing Home Operations Committee Report – J. Burgener

- Connie Gliniecke has accepted the position of DON and will begin June 12. She has over 20 years of experience in LTC including as DON of Mount View Care Center about 5 years ago. Kristin Woller, Asst. Administrator, finished the Nursing Home Administrator's course.
- We were awarded a \$23,000 grant from the State to provide the Stop Starting It dementia training program developed by Cagney Martin and Merry Wimmer. The program was presented to the Board recently and will be presented at 12 locations throughout Wisconsin over the next 18 months. In the future we hope to be able to offer this training program tailored to individual facilities.

Quality Committee Report - M. Loy

- Dashboard highlights indicate areas are holding steady or making improvements. Patient experience continues to improve. Refer to the Executive Summary for an overview of the Dashboard.
- **Motion/second, Benson/Norrbom to accept the Quality Dashboard as presented. Motion carried.**

Approve 2018 Marathon County Capital Improvement Requests – M. Loy

- Summary of the requests are in the Board packet. Have met with Facilities Management to determine the high priorities and risk items. The approved requests will be presented to the Health & Human Services Committee who will submit approved items to the County Capital Improvement Committee for ranking and possible funding. If items are not funded by the County they may be considered for funding by this Board in the current budget.
- Requests were reviewed and approved by the Finance, Personnel & Property Committee today.
- Two items are needing amending: 1) #7 – Rolling Stock Replacements from \$160,000 to \$164,000, and 2) #8 – Rolling Stock – New Vehicles from \$48,000 – \$50,000.
- **Motion/second, Miller/Balk, to approve and forward requests to the Health & Human Services Committee for consideration. Motion carried.**

Approve County Complaint Resolution Policy – M. Loy

- Policy was introduced last month in an effort to resolve complaints at the lowest level possible; and when appropriate the concern would be forwarded to the Collaborative Care Committee process so that quality of care issues can be addressed in an appropriate manner rather than on the county board floor.
- In checking with the three counties we have an opportunity to restructure the process to integrate with the RCA rather than managing the Collaborative Care Committee as another distinct entity.
- No action needed at this time.

Overview of 2018 Budget Priorities – M. Loy

- The RCA is to provide NCCSP with 2018 Budget Priorities by June 1 of every year. The NCCSP Board will vote on the budget in August. Then, the RCA will review for any final adjustments and to make recommendations to the three counties.
- Each of the 2018 Budget Priorities was reviewed.

NCCSP Board Input on CEO Job Description – S. Matis

- A draft CEO job description has been sent to the RCA, NCCSP Board, NCHC Executives, and NCHC Leadership for feedback. RCA met and provided input from the current description and from what Witt Kieffer provided in 2016. Brad Karger and Sue Matis are gathering compensation information including data from the state, county, and non-county institutions.

Retained County Authority Committee Update – M. Loy

- Today's agenda includes budget priorities and guidelines.

CEO Work Plan Update and Report – M. Loy

- Main focus currently is recruiting psychiatrists and the start of the psychiatry residency program.
- June 29 NCCSP Board Retreat agenda tentatively will include: Policy Governance and Committee Structure, Overview of Medical College/Relationship, Performance Standards, Update on State Budget.
- We are in the process of moving programs within the facility and working with facility maintenance.
- Congratulations to Dr. Corrie Norrbom for a successful Substance Abuse Conference that had over 300 attendees and exceptional speakers, to help build awareness throughout the community. A recording of the program can be accessed at: wipps.org.
- Communication had been sent that Lynn Westermeyer unexpectedly passed away. She had been with NCHC for 23 years and will be missed by many. Several residents from the vent unit will be attending her funeral. All staff from Food Service who want to go to the service will be able to go as other staff have offered to step in to assist during this time.
- There is a Brat Fry at Mount View Care Center tomorrow from 10:30 – 2.
- In regard to the ADRC space usage, we agreed that those programs could use the space through 2017. A letter will be sent out next week notifying the groups of anticipated changes in 2018.

Adjourn

Motion/second, Metter/Seefeldt to adjourn the meeting at 1:45 p.m. Motion carried.

dko

NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD EXECUTIVE COMMITTEE

June 8, 2017 4:00 PM North Central Health Care – Board Room

Present: X Jeff Zriny X Jean Burgener
 X Robin Stowe X Bob Weaver
 via phone

Others present: Michael Loy

Chairman Zriny called the meeting to order at 4:00 p.m.

Public Comment for Matters Appearing on the Agenda

- No public comment(s) made.

ACTION: Approval of 4/27/17 and 5/18/17 Executive Committee Meeting Minutes

- **Motion**/second, Weaver/Burgener, to approve the 4/27/17 and 5/18/17 Executive Committee meeting minutes; motion passed 4-0.

Board Retreat

- Details are being worked on for the Board Retreat June 29 from 12-5 p.m. with Finance Committee meeting at the usual 11:00 time and the regular Board agenda from 12-1. Itinerary will include Policy Governance and Committee Structure, what it's meant to be working with the Medical College of Wisconsin in establishing the Psychiatry Residency Program and how it will operate, the investment we are making, etc, may include performance expectations depending on the progress of the RCA discussions, Board calendar for 2018.
- Committee suggested an opportunity for a social time following the meeting with hors d'oeuvres and a cash bar.

CEO Selection Process

- Brad Karger and Sue Matis have been working together developing the CEO Job description with the input from stakeholders, compiling compensation information, and identifying a recruitment process. Witt Kieffer had started to prepare for CEO search including a compensation analysis from 3-4 years ago.
- A Joint meeting of the Executive Committee and RCA is scheduled for June 21 where it is anticipated the RCA will review and request the Executive Committee to begin the recruitment process based on their guidelines.
- The Tri-County Agreement clearly identifies the process in which the Executive Committee leads the recruitment process for CEO and all three county boards approve the final selection.
- It will be important to understand the parallels and responsibilities of the position especially that running a health care organization is different than a county department not only in the functionality, but the size and scale, the clinical and medical components, federal and state regulations, compensation, benefits, etc.

CEO Report

- An anonymous letter has been sent for each board member. J. Zriny shared the letter with M. Loy which outlines several concerns. Legal counsel reviewed the letter and was not concerned as there were no issues of quality expressed. The Committee recommended the letter be distributed to the rest of the Board at the June 29 Board Meeting which will be included as part of the Executive Committee Report. It was also noted that M. Loy will also have a conversation with the NCHC Leadership Group regarding the letter, will reinforce the Complaint Resolution and Non-Retaliation Policy, and review how leaders can either stop or perpetuate and be part of rumors.
- We are working very hard with the Medical College of Wisconsin on the Psychiatry Residency Program which will begin at the end of June. Orientation manuals are being prepared in anticipation of the program. An Open House to welcome the residents is planned for June 26 from 4-6 p.m. Supervising the residency program has a cost but there is too much cost and risk not to make this a successful and excellent program. This is a shift to a teaching hospital which is completely different for us but NCHC is clearly poised to benefit and it is important to play a key role in its success. Additional detail will be provided at the Board Retreat.
- Budget process is under way.
- One of the priorities we are working on based on the direction from the RCA Committee is a Youth Crisis Stabilization Group Home. After hearing from the State, we are not able to pursue opening a youth crisis stabilization group home at this time. Current state budget includes legislation to allow licensure for this type of group home. Dept. of Health Services understands our interest in developing this home and the earliest possibility to see additional development is July 2018.
- Tomorrow we will be reviewing the draft of the nursing home study and will have additional information following that discussion. There are good suggestions including reduction in licensed beds.
- Marathon County has expressed that they would like to see \$3 million raised in support of the new pool construction. The North Central Health Foundation Board will be meeting next week and will include discussion on their assistance and support of raising funds. Marathon County has delayed their vote on the pool until September.
- Very busy and active with psychiatry recruitment. A child psychiatrist will be interviewing next week and another coming the week after, both for the Outpatient Department.

Agenda for 6/29/17 Board Meeting

- Short business meeting followed by discussion on Policy Governance and Committee Structure, Medical College of Wisconsin, Performance Standards, etc.

Discussion and Future Agenda Items for Board Consideration or Committee Assignment

- Matt Barnes and Chad Billeb have been invited to provide an update on a new trial program includes a mental health therapist riding with Wausau Police. Presentation planned for July.

Adjourn

- **Motion**/second, Stowe/Weaver, to adjourn at 4:43 p.m. Motion carried.

dka

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

May 25, 2017

11:00 AM

North Central Health Care – Wausau

Present: X Randy Balk X Bill Miller X Robin Stowe
 X Bob Weaver

Others Present: Michael Loy, Brenda Glodowski

Meeting was called to order at 11:01 a.m.

Public Comment for Matters Appearing on the Agenda

- No public comment(s) made.

ACTION: Approval of 04/27/17 Finance, Personnel & Property Committee Meeting Minutes

- **Motion**/second, Stowe/Weaver, to approve the 04/27/17 Finance, Personnel & Property Committee meeting minutes. Motion carried.

April Financials – B. Glodowski

- The receivable for the supplemental payment is high due to the timing of when the State sends our payment. In 2016 the payments were received three times and in 2017 the payments will be received twice.
- There was a gain of almost \$114,000. Nursing home census averaged 182. Medicare census was down but are seeing an improvement in May. The Hospital had an average census of 16.
- Expenses are down and being managed well. Health insurance is back in line along with overall benefits. We received a credit from Medicaid for the state institutes in May. On a year to date basis we are only \$64,000 off budget with the state institutes. It is felt that the improvement can be directly attributed to assigning a nurse case manager to each case that is transferred to the state institutes which has significantly reduced the length of stays. The case manager works closely to know the care plan for each individual. Effectively we have stopped admitting youth onto the inpatient unit which opens more beds for adults. Youth stays at the state institutes usually have insurance which produces a revenue source and reduces the expense to the County. The State Institute seems to have a better care environment for youth also. Length of stays for youth are reducing compared to last year.
- In the nursing home we are at the readjusted target for 2017 after reducing the number of licensed beds. Expenses for purchase services, mostly with Community Treatment, are due to increasing volumes. There is revenue to help offset these contracts with Medicaid as a primary payer. Clients enrolled in Community Treatment have the option of receiving services at NCHC or with a provider in their community. We contract with the community providers and process the invoices for the providers which amounts to over \$1 million/year. We anticipate adding additional staff to manage the increasing volume of participants in all three counties. Currently there are over 400 clients in the program.
- Year to date the organization is showing a gain of \$521,965, which is \$525,472 ahead of target.

- Committee discussed donated funds. Donations received vary from families to fund raisers. Some donations are identified for specific areas or items and others are given to the general fund. A Policy is established for the use of these funds and are not used for operating program expenses.
- **Motion/second**, Balk/Stowe, to accept the Financial Report and April Financial Statements. Motion carried.
- No discussion or questions regarding write-off's.

Budget Update - B. Glodowski

- Internal budget process is under way.
- What is different this year is the involvement of the RCA. The RCA is to provide guidelines for us by June 1. Following Board approval, the budget will be presented to the RCA prior to each of the three County Boards.

Approval of 2018 Marathon County Capital Requests – B. Glodowski/M. Loy

- Our capital improvement requests for building and major capital projects are due in June. After the Board approves the requests they are given to the Health and Human Services Committee of Marathon County and then referred to the County's Capital Improvement Committee who then determines whether to fund the project(s) or not. If approved Marathon County funds the project. If a project is not approved the NCCSP Board can decide whether to provide funding which would then become part of our budget.
- Rolling stock is handled separately and are usually replacement vehicles. Any new or additional vehicle requests are submitted to Mr. Karger, County Administrator.
- M. Loy reviewed each capital request.
- Committee discussed options for borrowing other than through the counties i.e. directly from the State of Wisconsin or through direct lending as long as it doesn't affect the tax levy. It was noted that the most efficient way would be to borrow from the county's cash reserves.
- **Motion/second**, Miller/Weaver, to approve the 2018 Capital Requests. Motion carried.

RFP Process for Audit Firm – B. Glodowski

- RCA was provided a draft RFP which was approved. The RFP will be released tomorrow. RCA indicated NCHC will interview the respondents, summarize the findings, and make 2-3 recommendations to the RCA for final selection. RCA will be provided with a summary of all responses to the RFP.

CFO Report

- There will be an external revenue cycle review in the mental health system.

Discussion and Future Agenda Items

- None

Adjourn

- **Motion/second**, Miller/Weaver, to adjourn the Finance, Personnel and Property Committee meeting at 11:51 a.m. Motion carried.

dko

MEMO

TO: North Central Health Care Finance Committee
FROM: Brenda Glodowski
DATE: June 23, 2017
RE: Attached Financials

Attached please find a copy of the May Financial Statements for your review. To assist in your review, the following information is provided:

BALANCE SHEET

The nursing home supplemental payment has a larger balance due to timing of payments in prior years. The payments were made in April, June, and December. This year, the payments are scheduled for June and December. The State receivable is also high due to scheduling of payments from the State. The timing of this can vary from year to year. Usually this is current by July.

STATEMENT OF REVENUE AND EXPENSES

The month of May shows a gain of \$334,180 compared to a budgeted gain of \$1,608, resulting in a positive variance of \$332,572.

Overall revenue was only slightly below targets. The hospital census decreased from the prior month but still averaged 14 per day which is the target. The nursing home census improved from the prior month, showing an average of 184 per day. The target is 203. The Medicare census improved significantly from prior months, showing an average of 18 per day. The target is 20 per day. Outpatient areas also saw improvements with most areas meeting targets.

Overall expenses were below target for May by (\$327,374). Salaries and benefits remain below targets as do many other areas. The State institutes remain below targets again for May, which continues to close the gap between actual and target.

Year to date the organization continues to improve, showing an overall gain of \$856,145, resulting in an overall positive variance of \$858,043.

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

Thank you.

**NORTH CENTRAL HEALTH CARE
COMBINING STATEMENT OF NET POSITION
MAY 2017**

	<u>Human Services</u>	<u>Nursing Home</u>	<u>Total</u>	<u>Prior Year Combined</u>
Current Assets:				
Cash and cash equivalents	1,538,095	1,949,332	3,487,427	5,280,300
Accounts receivable:				
Patient - Net	3,190,245	2,001,309	5,191,553	6,753,600
Outpatient - WIMCR	657,500	0	657,500	500,000
Nursing home - Supplemental payment program	0	750,000	750,000	294,100
Marathon County	78,639	0	78,639	189,754
Appropriations receivable	0	0	0	0
Net state receivable	1,974,572	0	1,974,572	114,552
Other	840,088	0	840,088	286,046
Inventory	0	305,373	305,373	303,535
Other	<u>647,457</u>	<u>478,751</u>	<u>1,126,209</u>	<u>1,118,150</u>
Total current assets	<u>8,926,596</u>	<u>5,484,766</u>	<u>14,411,361</u>	<u>14,840,037</u>
Noncurrent Assets:				
Investments	10,800,000	0	10,800,000	9,800,000
Assets limited as to use	1,973,256	400,139	2,373,396	2,830,798
Contingency funds	500,000	0	500,000	0
Restricted assets - Patient trust funds	15,679	35,412	51,091	70,391
Net pension asset	0	0	0	4,846,938
Nondepreciable capital assets	189,109	872,720	1,061,829	774,190
Depreciable capital assets - Net	<u>6,860,010</u>	<u>3,178,259</u>	<u>10,038,268</u>	<u>10,925,701</u>
Total noncurrent assets	<u>20,338,054</u>	<u>4,486,531</u>	<u>24,824,584</u>	<u>29,248,018</u>
Deferred outflows of resources - Related to pensions	<u>10,070,362</u>	<u>7,446,358</u>	<u>17,516,720</u>	<u>4,851,842</u>
TOTAL ASSETS AND DEFERRED OUTFLOWS OF RESOURCES	<u>39,335,012</u>	<u>17,417,654</u>	<u>56,752,666</u>	<u>48,939,897</u>

**NORTH CENTRAL HEALTH CARE
COMBINING STATEMENT OF NET POSITION
MAY 2017**

	<u>Human Services</u>	<u>Nursing Home</u>	<u>Total</u>	<u>Prior Year Combined</u>
Current Liabilities:				
Current portion of related-party note payable	0	0	0	151,257
Accounts payable - Trade	728,860	538,943	1,267,804	1,603,831
Appropriations advances	497,593	141,667	639,259	717,561
Accrued liabilities:				
Salaries and retirement	825,602	610,478	1,436,080	1,371,814
Compensated absences	796,887	589,244	1,386,131	1,673,291
Health and dental insurance	458,770	339,230	798,000	857,000
Other Payables	209,729	155,080	364,809	410,383
Amounts payable to third-party reimbursement programs	135,920	0	135,920	433,333
Unearned revenue	<u>98,773</u>	<u>0</u>	<u>98,773</u>	<u>135,130</u>
Total current liabilities	<u>3,752,133</u>	<u>2,374,642</u>	<u>6,126,775</u>	<u>7,353,600</u>
Noncurrent Liabilities:				
Net pension liability	1,797,930	1,329,449	3,127,379	0
Related-party note payable	0	0	0	636,181
Patient trust funds	<u>15,679</u>	<u>35,412</u>	<u>51,091</u>	<u>70,318</u>
Total noncurrent liabilities	<u>1,813,609</u>	<u>1,364,861</u>	<u>3,178,470</u>	<u>706,499</u>
Total liabilities	<u>5,565,742</u>	<u>3,739,503</u>	<u>9,305,245</u>	<u>8,060,099</u>
Deferred inflows of resources - Related to pensions	<u>3,821,383</u>	<u>2,825,657</u>	<u>6,647,040</u>	<u>84,873</u>
Net Position:				
Net investment in capital assets	7,049,119	4,050,979	11,100,098	11,699,889
Unrestricted:				
Board designated for contingency	500,000	0	500,000	0
Board designated for capital assets	1,973,256	872,720	2,845,977	0
Undesignated	19,481,965	6,016,196	25,498,161	30,218,429
Operating Income / (Loss)	<u>943,546</u>	<u>(87,401)</u>	<u>856,145</u>	<u>(1,123,393)</u>
Total net position	<u>29,947,886</u>	<u>10,852,494</u>	<u>40,800,380</u>	<u>40,794,925</u>
TOTAL LIABILITIES, DEFERRED INFLOWS OF RESOURCES, AND NET POSITION	<u>39,335,012</u>	<u>17,417,654</u>	<u>56,752,666</u>	<u>48,939,897</u>

**NORTH CENTRAL HEALTH CARE
COMBINING STATEMENT OF REVENUES AND EXPENSES
FOR PERIOD ENDING MAY 31, 2017**

TOTAL	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>\$3,755,353</u>	<u>\$3,766,404</u>	<u>(\$11,051)</u>	<u>\$18,288,102</u>	<u>\$18,405,527</u>	<u>(\$117,424)</u>
Other Revenue:						
State Match / Addendum	324,504	325,120	(616)	1,622,518	1,625,598	(3,080)
Grant Revenue	201,097	197,183	3,913	993,099	985,917	7,183
County Appropriations - Net	639,260	639,260	0	3,196,299	3,196,299	0
Departmental and Other Revenue	<u>288,953</u>	<u>285,602</u>	<u>3,351</u>	<u>1,511,812</u>	<u>1,428,010</u>	<u>83,803</u>
Total Other Revenue	<u>1,453,813</u>	<u>1,447,165</u>	<u>6,648</u>	<u>7,323,728</u>	<u>7,235,824</u>	<u>87,905</u>
Total Revenue	5,209,166	5,213,569	(4,402)	25,611,831	25,641,350	(29,520)
Expenses:						
Direct Expenses	3,620,259	3,895,918	(275,660)	18,591,508	19,103,598	(512,090)
Indirect Expenses	<u>1,272,661</u>	<u>1,324,375</u>	<u>(51,715)</u>	<u>6,255,785</u>	<u>6,581,318</u>	<u>(325,533)</u>
Total Expenses	<u>4,892,919</u>	<u>5,220,294</u>	<u>(327,374)</u>	<u>24,847,293</u>	<u>25,684,915</u>	<u>(837,623)</u>
Operating Income (Loss)	<u>316,247</u>	<u>(6,725)</u>	<u>322,972</u>	<u>764,538</u>	<u>(43,565)</u>	<u>808,103</u>
Nonoperating Gains (Losses):						
Interest Income	13,173	8,333	4,840	60,520	41,667	18,854
Donations and Gifts	4,760	0	4,760	26,164	0	26,164
Gain / (Loss) on Disposal of Assets	<u>0</u>	<u>0</u>	<u>0</u>	<u>4,923</u>	<u>0</u>	<u>4,923</u>
Total Nonoperating Gains / (Losses)	<u>17,933</u>	<u>8,333</u>	<u>9,600</u>	<u>91,607</u>	<u>41,667</u>	<u>49,940</u>
Income / (Loss)	<u>\$334,180</u>	<u>\$1,608</u>	<u>\$332,572</u>	<u>\$856,145</u>	<u>(\$1,898)</u>	<u>\$858,043</u>

**NORTH CENTRAL HEALTH CARE
COMBINING STATEMENT OF REVENUES AND EXPENSES
FOR PERIOD ENDING MAY 31, 2017**

51.42/.437 PROGRAMS	CURRENT MONTH ACTUAL	CURRENT MONTH BUDGET	CURRENT MONTH VARIANCE	YTD ACTUAL	YTD BUDGET	YTD VARIANCE
Revenue:						
Net Patient Service Revenue	<u>\$2,009,475</u>	<u>\$1,950,343</u>	<u>\$59,132</u>	<u>\$9,826,676</u>	<u>\$9,500,388</u>	<u>\$326,288</u>
Other Revenue:						
State Match / Addendum	324,504	325,120	(616)	1,622,518	1,625,598	(3,080)
Grant Revenue	201,097	197,183	3,913	993,099	985,917	7,183
County Appropriations - Net	497,594	497,593	1	2,487,969	2,487,966	3
Departmental and Other Revenue	<u>134,656</u>	<u>149,059</u>	<u>(14,402)</u>	<u>750,476</u>	<u>745,294</u>	<u>5,182</u>
Total Other Revenue	<u>1,157,851</u>	<u>1,168,955</u>	<u>(11,104)</u>	<u>5,854,062</u>	<u>5,844,775</u>	<u>9,287</u>
Total Revenue	<u>3,167,326</u>	<u>3,119,298</u>	<u>48,028</u>	<u>15,680,738</u>	<u>15,345,163</u>	<u>335,576</u>
Expenses:						
Direct Expenses	2,231,302	2,407,174	(175,871)	11,706,131	11,807,005	(100,874)
Indirect Expenses	<u>657,366</u>	<u>658,413</u>	<u>(1,047)</u>	<u>3,118,309</u>	<u>3,271,902</u>	<u>(153,593)</u>
Total Expenses	<u>2,888,668</u>	<u>3,065,587</u>	<u>(176,919)</u>	<u>14,824,440</u>	<u>15,078,907</u>	<u>(254,467)</u>
Operating Income (Loss)	<u>278,658</u>	<u>53,711</u>	<u>224,947</u>	<u>856,298</u>	<u>266,256</u>	<u>590,042</u>
Nonoperating Gains (Losses):						
Interest Income	13,173	8,333	4,840	60,520	41,667	18,854
Donations and Gifts	4,289	0	4,289	21,805	0	21,805
Gain / (Loss) on Disposal of Assets	<u>0</u>	<u>0</u>	<u>0</u>	<u>4,923</u>	<u>0</u>	<u>4,923</u>
Total Nonoperating Gains / (Losses)	<u>17,462</u>	<u>8,333</u>	<u>9,129</u>	<u>87,247</u>	<u>41,667</u>	<u>45,581</u>
Income / (Loss)	<u>\$296,120</u>	<u>\$62,045</u>	<u>\$234,075</u>	<u>\$943,546</u>	<u>\$307,923</u>	<u>\$635,623</u>

**NORTH CENTRAL HEALTH CARE
COMBINING STATEMENT OF REVENUES AND EXPENSES
FOR PERIOD ENDING MAY 31, 2017**

NURSING HOME	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>\$1,745,878</u>	<u>\$1,816,061</u>	<u>(\$70,183)</u>	<u>\$8,461,426</u>	<u>\$8,905,139</u>	<u>(\$443,713)</u>
Other Revenue:						
County Appropriations - Net	141,666	141,667	(1)	708,330	708,333	(3)
Departmental and Other Revenue	<u>154,296</u>	<u>136,543</u>	<u>17,753</u>	<u>761,336</u>	<u>682,715</u>	<u>78,621</u>
Total Other Revenue	<u>295,962</u>	<u>278,210</u>	<u>17,753</u>	<u>1,469,666</u>	<u>1,391,049</u>	<u>78,617</u>
Total Revenue	2,041,840	2,094,271	(52,430)	9,931,092	10,296,188	(365,095)
Expenses:						
Direct Expenses	1,388,957	1,488,745	(99,788)	6,885,377	7,296,593	(411,216)
Indirect Expenses	<u>615,295</u>	<u>665,962</u>	<u>(50,668)</u>	<u>3,137,475</u>	<u>3,309,416</u>	<u>(171,940)</u>
Total Expenses	<u>2,004,251</u>	<u>2,154,707</u>	<u>(150,456)</u>	<u>10,022,852</u>	<u>10,606,008</u>	<u>(583,156)</u>
Operating Income (Loss)	<u>37,589</u>	<u>(60,436)</u>	<u>98,025</u>	<u>(91,760)</u>	<u>(309,821)</u>	<u>218,061</u>
Nonoperating Gains (Losses):						
Interest Income	0	0	0	0	0	0
Donations and Gifts	471	0	471	4,359	0	4,359
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>471</u>	<u>0</u>	<u>471</u>	<u>4,359</u>	<u>0</u>	<u>4,359</u>
Income / (Loss)	<u>\$38,060</u>	<u>(\$60,436)</u>	<u>\$98,496</u>	<u>(\$87,401)</u>	<u>(\$309,821)</u>	<u>\$222,420</u>

**NORTH CENTRAL HEALTH CARE
REPORT ON AVAILABILITY OF FUNDS
May 31, 2017**

BANK	LENGTH	MATURITY DATE	INTEREST RATE	AMOUNT	Insured/ Collateralized
Abby Bank	365 Days	7/19/2017	0.85%	\$500,000	X
CoVantage Credit Union	578 Days	7/28/2017	0.85%	\$300,000	X
People's State Bank	365 Days	8/21/2017	0.75%	\$500,000	X
BMO Harris	365 Days	8/26/2017	0.80%	\$500,000	X
Abby Bank	365 Days	8/29/2017	0.85%	\$500,000	X
Abby Bank	365 Days	9/1/2017	0.85%	\$500,000	X
Abby Bank	730 Days	10/29/2017	1.10%	\$500,000	X
CoVantage Credit Union	730 Days	11/18/2017	1.10%	\$500,000	X
PFM Investments	365 Days	11/29/2016	1.13%	\$500,000	X
Abby Bank	730 Days	12/30/2017	1.10%	\$500,000	X
CoVantage Credit Union	487 Days	1/1/2018	1.10%	\$500,000	X
Abby Bank	365 Days	2/25/2018	1.10%	\$500,000	X
Abby Bank	730 Days	3/15/2018	1.20%	\$400,000	X
People's State Bank	395 Days	3/28/2018	1.05%	\$250,000	X
CoVantage Credit Union	365 Days	3/30/2018	1.10%	\$500,000	X
PFM Investments	365 Days	4/3/2018	1.16%	\$500,000	x
PFM Investments	517 Days	4/30/2018	1.12%	\$500,000	X
Abby Bank	730 Days	5/3/2018	1.20%	\$500,000	X
BMO Harris	365 Days	5/28/2018	1.20%	\$500,000	X
Abby Bank	730 Days	1/6/2019	1.30%	\$500,000	X
CoVantage Credit Union	679 Days	3/7/2019	1.61%	\$500,000	X
People's State Bank	730 Days	5/29/2019	1.20%	\$350,000	X
People's State Bank	730 Days	5/30/2019	1.20%	\$500,000	X
TOTAL FUNDS AVAILABLE				\$10,800,000	
WEIGHTED AVERAGE	525.57 Days		1.086% INTEREST		

NCHC-DONATED FUNDS**Balance Sheet****As of May 31, 2017****ASSETS****Current Assets****Checking/Savings****CHECKING ACCOUNT**

Adult Day Services	4,570.81
Adventure Camp	1,425.79
Birth to 3 Program	2,035.00
Clubhouse	31,535.60
Community Treatment	8,647.07
Fishing Without Boundries	5,439.00
General Donated Funds	60,811.09
Housing - DD Services	1,370.47
Langlade HCC	3,172.02
Legacies by the Lake	
Music in Memory	1,958.25
Legacies by the Lake - Other	3,805.15
Total Legacies by the Lake	5,763.40
Marathon Cty Suicide Prev Task	14,474.40
National Suicide Lifeline Stipe	3,176.37
Northern Valley West	2,921.82
Nursing Home - General Fund	3,894.42
Outpatient Services - Marathon	101.08
Pool	8,915.44
Prevent Suicide Langlade Co.	2,444.55
Resident Council	771.05
United Way	440.20

Total CHECKING ACCOUNT	161,909.58
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Total Checking/Savings	161,909.58
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Total Current Assets	161,909.58
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TOTAL ASSETS	<u>161,909.58</u>
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LIABILITIES & EQUITY**Equity**

Opening Bal Equity	123,523.75
Retained Earnings	53,757.13
Net Income	-15,371.30

Total Equity	161,909.58
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TOTAL LIABILITIES & EQUITY	<u>161,909.58</u>
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North Central Health Care Budget Revenue/Expense Report

Month Ending May 31, 2017

ACCOUNT DESCRIPTION	CURRENT MONTH ACTUAL	CURRENT MONTH BUDGET	YTD ACTUAL	YTD BUDGET	DIFFERENCE
<u>REVENUE:</u>					
Total Operating Revenue	<u>5,209,166</u>	<u>5,213,569</u>	<u>25,611,831</u>	<u>25,641,350</u>	<u>(29,520)</u>
<u>EXPENSES:</u>					
Salaries and Wages	2,272,176	2,589,553	11,435,159	12,613,615	(1,178,456)
Fringe Benefits	822,681	988,411	4,521,219	4,814,652	(293,433)
Departments Supplies	561,041	492,235	2,361,420	2,461,176	(99,756)
Purchased Services	481,131	364,450	2,518,372	1,867,249	651,123
Utilitites/Maintenance Agreements	371,863	372,653	1,969,438	1,863,263	106,176
Personal Development/Travel	26,772	37,985	143,196	189,924	(46,728)
Other Operating Expenses	111,357	108,966	565,996	544,828	21,169
Insurance	37,162	37,708	195,094	188,542	6,553
Depreciation & Amortization	135,926	139,583	681,522	697,917	(16,394)
Client Purchased Services	<u>72,812</u>	<u>88,750</u>	<u>455,876</u>	<u>443,750</u>	<u>12,126</u>
TOTAL EXPENSES	4,892,919	5,220,294	24,847,293	25,684,915	(837,623)
Nonoperating Income	<u>17,933</u>	<u>8,333</u>	<u>91,607</u>	<u>41,667</u>	<u>49,940</u>
EXCESS REVENUE (EXPENSE)	<u>334,180</u>	<u>1,608</u>	<u>856,145</u>	<u>(1,898)</u>	<u>858,043</u>

**North Central Health Care
Write-Off Summary
May 2016**

	<u>Current Month</u>	<u>Current Year To Date</u>	<u>Prior Year To Date</u>
<i>Inpatient:</i>			
Administrative Write-Off	\$39,010	\$66,981	\$91,934
Bad Debt	\$112	\$1,202	\$8,244
<i>Outpatient:</i>			
Administrative Write-Off	\$24,146	\$80,411	\$44,578
Bad Debt	\$110	\$1,486	\$3,904
<i>Nursing Home:</i>			
Daily Services:			
Administrative Write-Off	(\$401)	\$724	(\$4,189)
Bad Debt	\$0	\$11,970	\$5,394
Ancillary Services:			
Administrative Write-Off	\$0	\$14,216	\$4,727
Bad Debt	\$0	\$321	(\$126)
Pharmacy:			
Administrative Write-Off	\$0	\$0	\$0
Bad Debt	\$0	\$0	\$0
Total - Administrative Write-Off	\$62,755	\$162,332	\$137,050
Total - Bad Debt	\$222	\$14,979	\$17,416

**North Central Health Care
2017 Patient Days**

<u>Month</u>		<u>Budget</u>	<u>Actual</u>	<u>Variance</u>	<u>Budgeted Occupancy</u>	<u>Actual Occupancy</u>
January	Nursing Home	6,293	5,784	(509)	84.58%	77.74%
	Hospital	434	502	68	87.50%	101.21%
February	Nursing Home	5,684	5,267	(417)	84.58%	85.50% ***
	Hospital	392	441	49	87.50%	98.44%
March	Nursing Home	6,293	5,703	(590)	84.58%	83.62%
	Hospital	434	462	28	87.50%	93.15%
April	Nursing Home	6,090	5,453	(637)	84.58%	82.62%
	Hospital	420	480	60	87.50%	100.00%
May	Nursing Home	6,293	5,698	(595)	84.58%	83.55%
	Hospital	434	432	(2)	87.50%	87.10%
June	Nursing Home					
	Hospital					
July	Nursing Home					
	Hospital					
August	Nursing Home					
	Hospital					
September	Nursing Home					
	Hospital					
October	Nursing Home					
	Hospital					
November	Nursing Home					
	Hospital					
December	Nursing Home					
	Hospital					
YTD	Nursing Home	30,653	27,905	(2,748)	84.58%	82.46%
	Hospital	2,114	2,317	203	87.50%	95.90%

*** Licensed beds decreased from 240 to 220

NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD NURSING HOME OPERATIONS COMMITTEE

May 24, 2017 7:30 AM North Central Health Care – Board Room

Present: X Jean Burgener X Margaret Donnelly
 X Bill Metter X Bill Miller

Also Present: Michael Loy, Kim Gochanour, Brenda Glodowski, Sue Matis

Meeting was called to order at 7:34 a.m.

Public Comment for Matters Appearing on the Agenda

- No public comment(s) made.

Approval of 04/26/17 Nursing Home Operations Committee Meeting Minutes

- **Motion**/second, Miller/Donnelly, to approve the 04/26/17 Nursing Home Operations Committee meeting minutes. Motion carried.

Financial Report – B. Glodowski

- April ended with a positive gain of \$15,000.
- Census was 182 from our target of 203. Average Medicare census was 14 compared to our target of 20.
- Expenses including salaries, benefits, and indirect expenses are down.
- We are \$75,480 ahead of target for the month and \$123,920 ahead of target year to date. Our goal continues to strive to bring the deficit down each month so that it is zero by end of year.
- During April we did not utilize contract labor but will have some contract labor expense in May due to several open positions on Post-Acute Care. With vacations during the summer and orientation of new employees we may see additional contract labor expense during the next several months. We are actively interviewing to fill open positions including reaching out to previous employees to explore interest in returning. CNA's have responded well when asked each to pick up an additional 4 hours per week of their choosing. Nurses are being asked to do the same.
- In May there will be an unanticipated expense of \$23,000 for the nursing home consultant, Clifton, Larson, Allen. This expense is incurred at the direction of the County and was approved by the NCCSP Board.

Senior Executive Nursing Home Operations and Quality Report – K. Gochanour

- March and April are trending high with referrals compared to 2015 and 2016. Continuing to receive vent referrals. Some bed availability constraints due to several with longer rehab stays.
- Successfully submitted the quarterly payroll based journal system electronically. Working to submit on a monthly basis.
- On the CMS website we now have a value based readmission rate report which was shared with the committee. Our rates for the last 2 quarters are below the national readmission rate.

- Connie Glienecke will begin June 12 as the Director of Nursing at Mount View Care Center. Connie had previously been the DON a few years ago. She brings over 20 years of experience and is already gathering data and developing a plan for when she starts.
- Received a grant from CMS for the Stop Starting It Dementia Training program and are beginning to set up dates and locations.
- Have been celebrating National Nursing Home Week. Last week's theme was Yellow Brick Road with many staff participating. This week began with a Kickball Tournament on the front lawn. Tomorrow is a talent show at 2 p.m. A Brat Fry on Friday will finish the week. Staff and residents have been enjoying each activity.
- One of our long term cooks, Lynn Westermeyer, passed away unexpectedly on Sunday. This has affected both staff and residents a great deal. On Friday, staff will be filling in for many food service staff so they can attend the funeral. Staff are also planning a memorial for Lynn on the patio by the nursing home. She will be missed greatly.
- We are working on preparing for our upcoming annual survey. Our staff educator has created new audits and is working to prepare staff. Terry Szews is working on the Mega Rule implementation, updating policies, etc.
- We were notified recently by Security Health that we are one of their preferred providers.

Nursing Home Readmission Rate – K. Gochanour

- The Skilled Nursing Facility Value-Based Purchasing Program. Our Standardized Readmission Rate for the first quarter of 2017 was 15.88 compared to the national average of 19.31. Our second quarter rate was 17.60 compared to the national average of 19.09.
- As part of the Aspirus Readmission Group (six facilities) Mount View Care Center's First Quarter data indicated 8.96% readmission rate compared to the group average rate of 22.76%. Mount View had a 12.5% rate for avoidable hospitalizations compared to the group average of 47.82%. We are pleased with the comparable data but continue to strive to make improvements.
- It was suggested that we share our readmission rates with admitting physicians.

Nursing Home Compare Five-Star Ratings Report – K. Gochanour

- An improvement in our Five Star Ratings is anticipated with the next Quality Measure Data update in September.

Update on Mount View Care Center Committee Discussion

- Clifton, Allen, Larson completed a clinical visit recently interviewing staff, reviewing MDS, etc. Feedback indicated staffing ratios are good, expressed concerned about connectivity with our electronic health record and understands we are working with IT to remedy these issues. A written report will be provided. Financial review is also being finalized.
- Next meeting will be May 31.

Discussion and Future Agenda Items

- Aspirus is tracking excess days in the hospital. The most frequent reason for excess days was due to no available SNF beds. More details will be provided at a future meeting.
- Patient Overall Satisfaction scores are 85% and trending to date in May at 82.5%. We are celebrating with all staff today by providing ice cream treats.
- June 23 meeting of the Committee will begin at 7:30 a.m.

Motion/second, Metter/Miller, to adjourn the Nursing Home Operations Committee meeting at 8:18 a.m. Motion carried.



QUALITY OUTCOME DASHBOARD

DEPARTMENT: NORTH CENTRAL HEALTH CARE

FISCAL YEAR: 2017

PRIMARY OUTCOME GOAL	Continuous Improvement Target	Benchmark	↑ ↓	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD	2016
PEOPLE																	
Vacancy Rate	5-7%	N/A	↓	13.1%	13.1%	10.3%	10.6%	13.2%								13.2%	7.1%
Retention Rate	75-80%	N/A	↑	98.0%	95.3%	93.6%	90.2%	87.0%								87.0%	\
SERVICE																	
Patient Experience: % Top Box Rate	77-88%	N/A	↑	69.0%	70.6%	76.7%	77.2%	79.7%								75.7%	\
CLINICAL																	
Nursing Home Readmission Rate	11-13%	17.3%	↓	15.2%	14.8%	0.0%	13.3%	12.5%								11.3%	11.5%
Psychiatric Hospital Readmission Rate	9-11%	15.5%	↓	4.8%	21.8%	11.3%	10.4%	12.3%								12.1%	10.9%
AODA Relapse Rate	36-40%	40-60%	↓	20.0%	12.5%	11.1%	0.0%	0.0%								6.9%	\
COMMUNITY																	
Access to Behavioral Health Services	90-95%	NA	↑	73%	61%	67%	72%	69%								68%	80%
FINANCE																	
*Direct Expense/Gross Patient Revenue	60-64%	N/A	↓	66%	62%	62%	59%	56%								61%	65%

KEY: ↑ Higher rates are positive

↓ Lower rates are positive

* Monthly Rates are Annualized

Target is based on a 10%-25% improvement from previous year performance or industry benchmarks.

NCHC OUTCOME DEFINITIONS

PEOPLE	
Vacancy Rate	Total number of vacant positions as of month end divided by total number of authorized positions as of month end.
Retention Rate	Number of employees onboard on January 1st who remain employed divided the number of employees onboard on January 1st.
SERVICE	
Patient Experience: % Top Box Rate	Percent of level 9 and 10 responses to the Overall satisfaction rating question on the survey. <i>Benchmark: HealthStream 2016 Top Box Data</i>
CLINICAL	
Nursing Home Readmission Rate	Number of residents re-hospitalized within 30 days of admission to nursing home / total admissions. <i>Benchmark: American Health Care Association/National Center for Assistive Living (AHCA/NCAL) Quality Initiative</i>
Psychiatric Hospital Readmission Rate	Percent of patients who are readmitted within 30 days of discharge from the Inpatient Behavioral Health hospital for Mental Health primary diagnosis. <i>Benchmark: Medicare Psychiatric Patients & Readmissions in Inpatient Psychiatric Facility Prospective Payment System, May, 2013, The Moran Company</i>
AODA Relapse Rate	Percent of patients graduated from Lakeside Recovery MMT program and/or Day Treatment program that relapse within 7 days post discharge. <i>Benchmark: National Institute of Drug Abuse: Drugs, Brains, and Behavior: The Science of Addiction</i>
COMMUNITY	
NCHC Access	<p>% of clients obtaining services within the Best Practice timeframes in NCHC programs.</p> <ul style="list-style-type: none"> • Adult Day Services - within 2 weeks of receiving required enrollment documents • Aquatic Services - within 2 weeks of referral or client phone requests • Birth to 3 - within 45 days of referral • Community Corner Clubhouse - within 2 weeks • Community Treatment - within 60 days of referral • Outpatient Services <ul style="list-style-type: none"> * within 4 days following screen by referral coordinator for counseling or non-hospitalized patients, * within 4 days following discharge for counseling/post-discharge check, and * 14 days from hospital discharge to psychiatry visit • Prevocational Services - within 2 weeks of receiving required enrollment documents • Residential Services - within 1 month of referral
FINANCE	
Direct Expense/Gross Patient Revenue	Percentage of total direct expense compared to gross revenue.

Quality Executive Summary
June 2017

Organizational Outcomes

People

❖ **Vacancy Rate**

The vacancy rate has increased to 13.2% for the month of May. We did have 18 new employee's start in the June orientation so this number should come back down for the month of June.

❖ **Employee Retention Rate**

Employee Retention Rate is currently at 87.0% which is exceeding the NCHC target of 75-80%. Retention rate continues to decrease at the same rate of about 2.5% per month. In the month of May there were four retirements, cleaned up some employee's that were not working so we eliminated them from payroll and some normal retention decrease with people completing and graduating school in May.

Service

❖ **Patient Experience**

Improvement was made in the percent of patients ranking their overall experience at a 9 or 10 (10 point scale) at 79.7 % in May which achieves NCHC's target. Individual programs achieving the target of 77-88% in April included: Lakeside Recovery (MMT), Crisis CBRF, Crisis Services, Antigo Outpatient and Telepsychiatry, Wausau Outpatient and Psychiatry, Aquatic, Birth to Three, Community Corner Clubhouse, Community Treatment, Residential Services, and Nursing Home. Programs continue to integrate specific actions based on the priority analysis data specific to the program and it is showing improvement. Year to date data is just short of the target at 75.7%.

Clinical

❖ **Nursing Home Readmissions**

The rate of readmissions to the hospital within 30 days in May was 12.5% bringing YTD rate to 11.3%, within target and benchmark. All acute care transfers are reviewed to identify areas for improvement

❖ **Hospital Readmissions**

The rate of readmissions within 30 days is slightly above the target range for the month of May. Year to date is about 1% above target at 12.1%. All readmissions continue to be reviewed as we continue to strive to make this decrease. Readmission within the 0-10 day range has decreased but will continue to be monitored as the Outpatient and Community Treatment teams continue to work on best practices for continuum of care standards and to avoid readmission to the hospital within the first ten days.

❖ **AOD Relapse Rate**

The rate of patients who complete treatment programing in either our AODA Day Treatment or Medically Monitored 21 Day program who reuse substances within 7 days in the month of May was 0% which is the best possible scenario and year-to-date is 10% which is significantly better than industry benchmark 36-40%.

Community

❖ **Access Rate for Behavioral Health Services**

Access rates remain below target year-to-date. Analysis indicates Outpatient and Community Treatment programs did not meet target. Both programs have initiated process improvement teams to identify specific strategies for improvement. Community Treatment continues working on getting new staff trained to be able to start their case load and open people to services. Outpatient services continues to recruit in Lincoln and Langlade Counties who are struggling to meet the measure.

Finance

❖ **Direct Expense/Gross Patient Revenue**

Year to date expense to revenue ratio improved to 61% with a goal of 60-64%. The month of May was at 56% which is exceeding target. Extreme focus this year on cost management by individual departments has been the impact.

Safety Outcomes

Patient/Resident Adverse Events

Rates for May are 3.7 adverse events/1000 patient days/visits. Year to date rate is 4.1 /1000 patient days/visits remains below 2016 overall rate. Noted improvement in the overall number of falls in the month, the Nursing Home decreased number was the contributing factor.

Employee Adverse Events

Rates for May are .05 adverse events/1000 employee hours. May had significantly less adverse events at 5, compare to previous 4 months average of 12 per month.

Program-Specific Outcomes-items not addressed in analysis above

The following elements reported are highlights of focus elements at the program-specific level. They do not represent all data elements monitored by a given department/program.

Human Service Operations

❖ **Outpatient Services:**

Initiated monitoring of immediate follow-up for post-hospital patients to ensure smooth transition and reduce risk of readmission. Improvement has decreased during the month of May to a 67.6% success rate has been achieved which remains well below target of 90-95%. A collaborative action team to revise discharge planning and ensure smooth transition has been established which included both Outpatient Services and BHS Hospital Leaders.

❖ **Inpatient Behavioral Health:**

This is a shared measure with Outpatient Services. The concentration is on items such as trying to work on making appointments as soon as staff know an approximate discharge date, to ensure this is a short and smooth transition to Outpatient from the Hospital.

❖ **Community Treatment:**

Access within best practice timeframes continues to be significantly below target. A process improvement team has been established to address this. To help reduce the wait time for entering the Community Treatment Program, they have increased staffing to ensure all those who need services are able to receive those services.

❖ **Lakeside Recovery (MMT):**

The rate of patients who complete the treatment program who reuse substances within 7 days year-to-date is 10.5%, significantly better than industry benchmark 36-40%. The month of May showed 0% relapse rate.

❖ **Aquatic:**

Year to date currently is at 90.9% which is within their target of 90-95%.

❖ **Birth-3:**

A system to measure availability for early intervention was established to ensure access and positive financial productivity. May was below target at 411 with their goal of 481-491 per month. They are continuing to look at opportunities to increase this number the number of appointments and increase access to clients.

❖ **Residential and Pre-Vocational Services:**

It has been identified that employee vacancy rate in residential services is a critical issue. The year-to-date is above the targeted goal at 18.4% with a target of 6-9% or below. Actions being taken include improvements in recruiting strategies, onboarding and retention. Human Resources staff have met with all employees to identify specific barriers to employee engagement with action plans being developed. Leadership is temporarily controlling admissions of new residents and relocating residents to reduce the total number of facilities in response to current staffing shortages. All residents are being assessed for care requirements and staffing needs.

Nursing Home

Occupancy Rate based on a 220 licensed beds is at 85.4 %. Some impacts on census include: In February, Long Term Care decreased its available beds due to staffing issues and low LTC referrals. This did cause a bed lock when residents on Post-Acute Care needed to transfer residents to LTC. Reviews of long term bed needs are being discussed. Also the nursing home is looking at the financial burden, it is scrutinizing referral payer sources ensuring payer plans cover cost of stay and ordered medications costs are not exceedingly high.

Support Departments

❖ **Communication and Marketing:**

Year-to-date, a 9.4 % increase in the number of “hits” on the NCHC employment page has been achieved with a target of 15%.

❖ **Health Information:**

Health Information has achieved a 92.1 % completion of health records within 25 days post-discharge exceeding target set at 80-85%.

❖ **Nutritional Services:**

Nutritional Services is exceeding their target of 90-95% with a score year to date of 96% of patient/resident satisfaction rating with food temperatures year-to-date.

❖ **Pharmacy:**

Dispensing error rates are below target at .09% with a target of .081-.90%.

❖ **Volunteers:**

Continues to progress toward target to recruit 35 or more new volunteers in 2017. They currently have a total of 19 new volunteer's year to date through May.

❖ **Adult Protective Services:**

The percent of at-risk investigations completed and closed within 30 days is currently at 64% year to date. This is below their target of 70-80%. Process improvements continue.

❖ **Demand Transportation:**

Double occupancy per trip did not meet target of 44-50. The month of May they had 43 and an average year to date of 38 per month. Continued process improvements are underway.



Anne C. Dibala, M.D.

Enhanced Credentialing Activity

Primary Address

1100 Lake View Drive
Wausau, WI 54403-6785
(715) 848-4600

Other Provider Information

ID#: _____
SSN: _____
Date of Birth: _____
Provider Specialties: Psychiatry, Family Medicine

NPI: 1487614301

UPIN: _____

Medicare#: _____

Medicaid#: _____

Application

Application Sent Date: 04/04/2017
Attestation Date: 04/06/2017
Received Date: 05/02/2017

Most Recent Query

Query Type: _____
Query Date: _____

**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 04/17/2017 To 10/31/2018

Information Upon Credentialing Completion

Status: NCHC Application in Process
Category: NCHC Active
Category Applied For: NCHC Active
Network: _____
Cred Activity Notes: _____

Committee Progress

Started: _____
Status: _____

Issues: ☐

**Activity
Completed:** ☒

Completed 05/16/2017
Date: _____

Rutgers University

Program: Medical School

Dept./Specialty:

Start Date: 08/01/1971

End Date: 05/01/1973

Graduated/Completed: ☒

University of Texas

Program: Medical School

Dept./Specialty:

Start Date: 08/01/1973

End Date: 05/24/1975

Graduated/Completed: ☒

Mount Sinai Medical Center

Program: Internship

Dept./Specialty: General Surgery

Start Date: 07/01/1975

End Date: 06/30/1976

Graduated/Completed: ☒

Fayetteville Area Health Education Center

Program: Residency

Dept./Specialty: Family Medicine

Start Date: 07/01/1981

End Date: 06/30/1983

Graduated/Completed: ☒

Eastern Virginia Medical School

Program: Residency

Dept./Specialty: Psychiatry

Start Date: 07/01/1989

End Date: 08/31/1992

Graduated/Completed: ☒

Verified: ☒

Verified Date: 05/02/2017

Verified By: Christine D Chase

Verified How: O-FYI Only

Notes: Transferred to University of TX (SouthWestern)

Verified: ☒

Verified Date: 05/02/2017

Verified By: Christine D Chase

Verified How: E-AMA Website-Medical School

Notes: MD

Verified: ☒

Verified Date: 05/02/2017

Verified By: Christine D Chase

Verified How: E-AMA Website-Medical School

Notes:

Verified: ☒

Verified Date: 05/02/2017

Verified By: Christine D Chase

Verified How: E-AMA Website-Medical School

Notes:

Verified: ☒

Verified Date: 05/02/2017

Verified By: Christine D Chase

Verified How: E-AMA Website-Medical School

Notes:

License Type: Out of State background
Check

State:

License Number:

Status:

Expiration Date:

License Type: State License

State: WI

License Number: 67131

Status: Active

Expiration Date: 10/31/2017

License Type: Federated State Medical
Boards

State:

License Number:

Status:

Expiration Date:

License Type: DEA Certificate

State: WI

License Number: BD3008833

Status: Active

Expiration Date: 06/30/2018

License Type: Government Issued Photo ID

State: VA

License Number:

Status:

Expiration Date:

License Type: WI Caregiver Background
Check

State: WI

License Number:

Status:

Expiration Date: 05/03/2021

Verified: ☒

Verified Date: 05/05/2017

Verified By: Christine D Chase

Verified How: L-Out of State Caregiver
Bckgrd Ck Website

Notes: NC, SC, VA

Verified: ☒

Verified Date: 05/02/2017

Verified By: Christine D Chase

Verified How: L-WI DRL Website

Notes:

Verified: ☒

Verified Date: 05/02/2017

Verified By: Christine D Chase

Verified How: L-FSMB Website

Notes: AK, NY, NC, SC, VT, VA,
WI

Verified: ☒

Verified Date: 05/02/2017

Verified By: Christine D Chase

Verified How: L-DEA Website

Notes: source date: 05/01/2017

Verified: ☒

Verified Date: 04/19/2017

Verified By: Christine D Chase

Verified How: O-FYI Only

Notes:

Verified: ☒

Verified Date: 05/03/2017

Verified By: Christine D Chase

Verified How: L-Out of State Caregiver
Bckgrd Ck Website

Notes:

ProAssurance Companies

Policy Number: MP66573

Coverage Type:

Expiration Date: 01/01/2018

Letter Description: Verify Malpractice Insurance
DOC

Letter Sent Date: 05/02/2017

Letter Sent By: Christine D Chase

Verified: ☒

Verified Date: 05/10/2017

Verified By: Christine D Chase

Verified How: I-Verification from Carrier

Notes: \$1M / \$3M No claims

Mountain States Health Alliance

Policy Number: SELF-INSURED

Coverage Type:

Expiration Date: 11/25/2016

Letter Description: Verify Malpractice Insurance
DOC

Letter Sent Date: 05/10/2017

Letter Sent By: Christine D Chase

Verified: ☒

Verified Date: 05/16/2017

Verified By: Christine D Chase

Verified How: I-NCS-Insurance Verif Ltr

Notes: \$2.25M / \$6.75M
No claims

HPSO

Policy Number: 0427970508

Coverage Type:

Expiration Date: 01/29/2017

Letter Description: Verify Malpractice Insurance
DOC

Letter Sent Date: 05/19/2017

Letter Sent By: Christine D Chase

Verified: ☒

Verified Date: 05/19/2017

Verified By: Christine D Chase

Verified How: O-Unable to Verify

Notes: See base file

Professional Risk Management Services Inc

Policy Number: IN-FCO02-033318789

Coverage Type:

Expiration Date: 11/06/2017

Letter Description: Verify Malpractice Insurance
DOC

Letter Sent Date: 05/10/2017

Letter Sent By: Christine D Chase

Verified: ☒

Verified Date: 05/12/2017

Verified By: Christine D Chase

Verified How: I-Verification from Carrier

Notes: \$1M / \$3M No claims
Various policy #'s under
this insurance, see base
file.
Future practice insurance

Am Bd Psyc&Neur

Board Status: Certified

Cert Number:

Expiration Date: 12/31/2019

Verified: ☒

Verified Date: 05/02/2017

Verified By: Christine D Chase

Verified How: B-ABMS Website-Board
Certification

Notes:

Am Bd Family Medicine

Board Status: Not Renewed

Cert Number:

Expiration Date: 12/31/1990

Verified: ☒

Verified Date: 05/02/2017

Verified By: Christine D Chase

Verified How: B-ABMS Website-Board
Certification

Notes:

Am Bd Addiction Medicine

Board Status: Certified

Cert Number: 000025

Expiration Date: 03/12/2019

Verified: ☒

Verified Date: 06/13/2017

Verified By: Christine D Chase

Verified How: O-Primary Source
Verification

Notes: abam.net

Anne Dibala, MD PA Consulting

Affiliation Type: Employee

Category: Not Provided

Dept./Specialty: Psychiatry

Start Date: 01/01/2006

End Date:

Letter Description: Verify Affiliations & Employment*

Letter Sent Date: 05/10/2017

Letter Sent By: Christine D Chase

Verified: ☒

Verified Date: 05/11/2017

Verified By: Christine D Chase

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

Notes:

North Central Health Care

Affiliation Type: Medical Staff

Category:

Dept./Specialty: Psychiatry

Start Date: 04/10/2017

End Date:

Letter Description: Verify Affiliations & Employment*

Letter Sent Date: 05/02/2017

Letter Sent By: Christine D Chase

Verified: ☒

Verified Date: 05/02/2017

Verified By: Christine D Chase

Verified How: O-FYI Only

Notes: future practice location

Piedmont Medical Center*

Affiliation Type: Medical Staff

Category: Active

Dept./Specialty: Psychiatry

Start Date: 10/21/2013

End Date: 07/01/2014

Letter Description: Verify Affiliations & Employment*

Letter Sent Date: 05/02/2017

Letter Sent By: Christine D Chase

Verified: ☒

Verified Date: 05/08/2017

Verified By: Christine D Chase

Verified How: A-Health Care Facility Verif
Ltr Online

Notes:

Russell County Medical Center

Affiliation Type: Medical Staff

Category: Active

Dept./Specialty: Psychiatry

Start Date: 04/08/2014

End Date:

Letter Description: Verify Affiliations & Employment*

Letter Sent Date: 05/02/2017

Letter Sent By: Christine D Chase

Verified: ☒

Verified Date: 05/09/2017

Verified By: Christine D Chase

Verified How: A-Health Care Facility Verif
Ltr

Notes:

SpringBrook Behavioral Health System

Affiliation Type: Medical Staff

Category: Not Provided

Dept./Specialty: Psychiatry

Start Date: 04/01/2013

End Date: 07/01/2013

Letter Description: Verify Affiliations & Employment*

Letter Sent Date: 05/10/2017

Letter Sent By: Christine D Chase

Verified: ☒

Verified Date: 05/08/2017

Verified By: Christine D Chase

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

Notes:

South Carolina Department of Mental Health

Affiliation Type: Medical Staff

Category: Not Provided

Dept./Specialty: Psychiatry

Start Date: 07/02/2009

End Date: 02/03/2010

Letter Description: Verify Affiliations & Employment*

Letter Sent Date: 05/10/2017

Letter Sent By: Christine D Chase

Verified: ☒

Verified Date: 05/12/2017

Verified By: Christine D Chase

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

Notes:

East Tennessee Counseling

Affiliation Type: Medical Staff

Category:

Dept./Specialty: Psychiatry

Start Date: 05/01/2015

End Date: 04/01/2017

Letter Description: Verify Affiliations & Employment*

Letter Sent Date: 05/19/2017

Letter Sent By: Christine D Chase

Verified: ☒

06/12/2017

Christine D Chase

O-Unable to Verify

3 attempts made to verify,
no response.**Mary Catherine Olmsted, MD**

Affiliation Type: Reference

Category:

Dept./Specialty:

Start Date:

End Date:

Letter Description: Verify Refs - Initial/Affiliate *

Letter Sent Date: 05/10/2017

Letter Sent By: Christine D Chase

Verified: ☒

05/12/2017

Christine D Chase

A-NCS-Professional Ref
Verif Ltr

Henrike Brinker, MD

Affiliation Type: Reference

Category:

Dept./Specialty:

Start Date:

End Date:

Letter Description: Verify Refs - Initial/Affiliate *

Letter Sent Date: 05/10/2017

Letter Sent By: Christine D Chase

Verified: ☒

06/01/2017

Christine D Chase

A-NCS-Professional Ref

Verif Ltr

Michael Ulrich, DO

Affiliation Type: Reference

Category:

Dept./Specialty:

Start Date:

End Date:

Letter Description: Verify Refs - Initial/Affiliate *

Letter Sent Date: 05/19/2017

Letter Sent By: Christine D Chase

Verified: ☒

05/30/2017

Christine D Chase

A-NCS-Professional Ref

Verif Ltr

Review of Work History & Explanation of Gaps	<i>Date & Initials</i> 06/12/2017 cdc	<i>Comments</i> No gaps
SAM Website	<i>Date & Initials</i> 05/02/2017 & 06/13/2017 cdc	<i>Comments</i>
NPDB Website query through Cactus	<i>Date & Initials</i> Aspirus Network, Inc. 6/12/2017 North Central Healthcare 6/12/2017	<i>Comments</i>
OIG Website	<i>Date & Initials</i> Source date: 06/07/2017 Conducted date: 06/13/2017 cdc	<i>Comments</i>
WI Circuit Court	<i>Date & Initials</i> 05/02/2017 & 06/13/2017 cdc	<i>Comments</i> No matches
Medicare Opt Out Website	<i>Date & Initials</i> Report run 05/22/2017 cdc Reviewed 06/12/2017 cdc	<i>Comments</i>
Consent Form	<i>Sign Date & Initials</i> 04/27/2017 cdc	<i>Comments</i>
Health Requirements Met	<i>Date & Initials</i> 06/12/2017 cdc	<i>Y/N & Comments</i> Yes
Privilege Form	<i>Sign Date & Initials</i> 04/06/2017 cdc	<i>Comments</i>
Verifications within 180 days	<i>Date & Initials</i> 06/12/2017 cdc	<i>Comments</i> Yes
CVO Review	<i>Date</i> 06/13/2017	<i>Signature</i> Electronically signed by Christine Chase
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 ____		

PRIVILEGE AND APPOINTMENT RECOMMENDATION

Appointee Michael D. Lance, M.D. Appoint/Reappoint 06-29-2017 to 10-31-2018
Time Period

Requested Privileges ☐ Medical (Includes Family Practice, Internal Medicine)
☒ Psychiatry ☐ Medical Director
☐ Mid-Level Practitioner

Medical Staff Status ☒ Courtesy ☐ Active

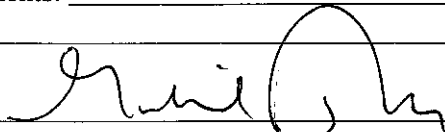
Provider Type ☐ Employee
☒ Locum
☐ Contract

Locum Agency: Barton Associates
Contract Name: _____

MEDICAL EXECUTIVE COMMITTEE

The Credentials file of this staff member contains data and information demonstrating current competence in the clinical privileges requested. After review of this information, I recommend that the clinical privileges be granted as indicated with any exceptions or conditions documented.

Comments: _____

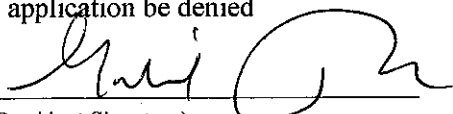

(Medical Executive Committee Signature)

6-12-17
(Signature Date)

MEDICAL STAFF

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 President Signature)

6-15-17
(Signature Date)

GOVERNING BOARD

Reviewed by Governing Board: _____
(Date)

Response: ☐ Concur
☐ Recommend further reconsideration

(Governing Board Signature)

(Signature Date)

(Chief Executive Officer Signature)

(Signature Date)



Michael D. Lance, M.D.

Enhanced Credentialing Activity

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: 1073855304

UPIN:

Medicare#:

Medicaid#:

Application

Application Sent Date: 03/16/2017
Attestation Date: 03/16/2017
Received Date: 03/28/2017

Most Recent Query

Query Type:
Query Date:

Credentialing

Completed: ☒

Issues: ☐

Aspirus Network, Inc.

Information Upon Credentialing Completion

Status: ANI Application in Process
Category: ANI Locum Tenens
Category Applied For: ANI Locum Tenens
Network:
Cred Activity Notes:

Committee Progress

Started:
Status:

Issues: ☐

Activity

Completed: ☒

North Central Healthcare

From 04/03/2017 To 10/31/2018

Information Upon Credentialing Completion

Status: NCHC Current
Category: NCHC Locum Tenens
Category Applied For: NCHC Locum Tenens
Network:
Cred Activity Notes:

Committee Progress

Started:
Status:

Issues: ☐

Activity

Completed: ☒

Completed Date: 05/16/2017

G. Wash. Univ. Sch. of Med. & H.S.

Program: Medical School
Dept./Specialty:
Start Date: 08/01/1999
End Date: 05/18/2003
Graduated/Completed: ☒

Verified: ☒

Verified Date: 03/27/2017

Verified By: Jill A. Patraw

Verified How: E-AMA Website-Medical
School

Notes: MD

Milton S. Hershey Medical Center

Program: Residency
Dept./Specialty: Psychiatry
Start Date: 07/01/2003
End Date: 06/30/2007
Graduated/Completed: ☒

Verified: ☒

Verified Date: 03/27/2017

Verified By: Jill A. Patraw

Verified How: E-AMA Website-Medical
School

Notes:

License Type: Federated State Medical
Boards
State:
License Number:
Status:
Expiration Date:

Verified: ☒
Verified Date: 03/27/2017
Verified By: Jill A. Patraw
Verified How: L-FSMB Website
Notes: ID, MT, ND, PA, WA and WI

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

Verified: ☒
Verified Date: 03/22/2017
Verified By: Jill A. Patraw
Verified How: O-FYI Only
Notes:

License Type: DEA Certificate
State: WI
License Number: BL9399280
Status: Active
Expiration Date: 03/31/2020

Verified: ☒
Verified Date: 03/27/2017
Verified By: Jill A. Patraw
Verified How: L-DEA Website
Notes: source date 3/20/17

License Type: State License
State: WI
License Number: 63557
Status: Active
Expiration Date: 10/31/2017

Verified: ☒
Verified Date: 03/27/2017
Verified By: Jill A. Patraw
Verified How: L-WI DRL Website
Notes:

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

Verified: ☒
Verified Date: 03/27/2017
Verified By: Jill A. Patraw
Verified How: L-Out of State Caregiver
Bckgrd Ck Website
Notes: PA, WA

License Type: WI Caregiver Background
Check
State: WI
License Number:
Status:
Expiration Date: 03/28/2021

Verified: ☒
Verified Date: 03/28/2017
Verified By: Jill A. Patraw
Verified How: L-WI Caregiver
Background Ck Website
Notes:

Markel American Insurance Company

Policy Number: MM826718

Coverage Type:

Expiration Date: 01/01/2018

Letter Description: Verify Malpractice Insurance
DOC

Letter Sent Date: 03/27/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

Verified Date: 03/29/2017

Verified By: Jill A. Patraw

Verified How: I-Verification from Carrier

Notes: future insurance
\$1M / \$3M - No claims**American Home Assurance Company**

Policy Number: 018498639

Coverage Type:

Expiration Date: 05/01/2013

Letter Description: Verify Malpractice Insurance
DOC

Letter Sent Date: 04/21/2017

Letter Sent By: Sammy Chojnowski

Verified: ☒

Verified Date: 05/09/2017

Verified By: Jill A. Patraw

Verified How: I-Verification from Carrier

Notes: \$1M / \$3M per COI
no claims**Caduceus Liability Solutions**

Policy Number: EO000021058-01

Coverage Type:

Expiration Date: 11/05/2013

Letter Description: Verify Malpractice Insurance
DOC

Letter Sent Date: 05/23/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

Verified Date: 05/25/2017

Verified By: Jill A. Patraw

Verified How: O-No Response

Notes: Refer to NPDB

Caduceus Liability Solutions

Policy Number: GH-LOC-001-141105

Coverage Type:

Expiration Date: 11/05/2015

Letter Description: Verify Malpractice Insurance
DOC

Letter Sent Date: 05/23/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

Verified Date: 05/25/2017

Verified By: Jill A. Patraw

Verified How: O-No Response

Notes: refer to NPDB

Caduceus Liability Solutions

Policy Number: GH-LOC-001-151105

Coverage Type:

Expiration Date: 11/05/2018

Letter Description: Verify Malpractice Insurance
DOC

Letter Sent Date: 05/23/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

Verified Date: 05/25/2017

Verified By: Jill A. Patraw

Verified How: O-No Response

Notes: refer to NPDB

Caduceus Liability Solutions

Policy Number: LTM-198535-1112

Coverage Type:

Expiration Date: 11/05/2012

Letter Description: Verify Malpractice Insurance
DOC

Letter Sent Date: 05/23/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

Verified Date: 05/25/2017

Verified By: Jill A. Patraw

Verified How: O-No Response

Notes: refer to NPDB

No Certification

Board Status: Not Applicable

Cert Number:

Expiration Date:

Verified: ☒

Verified Date: 03/27/2017

Verified By: Jill A. Patraw

Verified How: O-FYI Only

Notes:

North Central Health Care

Affiliation Type: Medical Staff
 Category:
 Dept./Specialty:
 Start Date:
 End Date:

Verified: ☒
 Verified Date: 03/27/2017
 Verified By: Jill A. Patraw
 Verified How: O-FYI Only
 Notes: future practice location

St. Alexius Medical Center*

Affiliation Type: Medical Staff
 Category: Courtesy
 Dept./Specialty:
 Start Date: 12/16/2013
 End Date:

Verified: ☒
 Verified Date: 03/27/2017
 Verified By: Jill A. Patraw
 Verified How: A-Health Care Facility Verif
 Ltr Online
 Notes: Neuroscience

Swedish Medical Center - Edmonds*

Affiliation Type: Medical Staff
 Category: Resigned
 Dept./Specialty: Psychiatry
 Start Date: 01/25/2012
 End Date: 02/11/2013

Verified: ☒
 03/27/2017
 Jill A. Patraw
 A-Health Care Facility Verif
 Ltr Online

Eastern Idaho Regional Medical Ctr.

Affiliation Type: Medical Staff
 Category: Not Provided
 Dept./Specialty: Psychiatry
 Start Date: 11/22/2015
 End Date:

Letter Description: Verify Affiliations &
 Employment*
 Letter Sent Date: 04/10/2017
 Letter Sent By: Jill A. Patraw

Verified: ☒
 Verified Date: 04/05/2017
 Verified By: Jill A. Patraw
 Verified How: A-NCS-Health Care
 Affiliation Verif Ltr
 Notes:

Prairie St. John's Hospital

Affiliation Type: Medical Staff
 Category: Not Provided
 Dept./Specialty: Psychiatry
 Start Date: 08/01/2014
 End Date: 12/01/2016

Letter Description: Verify Affiliations &
 Employment*
 Letter Sent Date: 04/21/2017
 Letter Sent By: Sammy Chojnowski

Verified: ☒
 Verified Date: 04/28/2017
 Verified By: Jill A. Patraw
 Verified How: A-NCS-Health Care
 Affiliation Verif Ltr
 Notes:

Philhaven Behavioral Healthcare

Affiliation Type: Medical Staff
 Category: Locum Tenens
 Dept./Specialty: Psychiatry
 Start Date: 04/01/2016
 End Date: 07/01/2016

Letter Description: Verify Affiliations &
 Employment*
 Letter Sent Date: 05/23/2017
 Letter Sent By: Jill A. Patraw

Verified: ☒
 Verified Date: 05/23/2017
 Verified By: Jill A. Patraw
 Verified How: O-Telephone Verif
 Notes:

Montana State Hospital

Affiliation Type: Medical Staff
 Category: Not Provided
 Dept./Specialty: Psychiatry
 Start Date: 06/09/2014
 End Date: 03/11/2016

Letter Description: Verify Affiliations &
 Employment*
 Letter Sent Date: 04/21/2017
 Letter Sent By: Sammy Chojnowski

Verified: ☒
 Verified Date: 04/28/2017
 Verified By: Jill A. Patraw
 Verified How: A-NCS-Health Care
 Affiliation Verif Ltr
 Notes:

Douglas Hess, DO

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

Letter Description: Verify Refs - Initial/Affiliate*
 Letter Sent Date: 04/10/2017
 Letter Sent By: Jill A. Patraw

Verified: ☒
 04/10/2017
 Jill A. Patraw
 A-NCS-Professional Ref
 Verif Ltr

Mary Beth Ostrom, MD

Affiliation Type: Reference

Category:

Dept./Specialty:

Start Date:

End Date:

Letter Description: Verify Refs - Initial/Affiliate *

Letter Sent Date: 05/09/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

05/15/2017

Jill A. Patraw

A-NCS-Professional Ref

Verif Ltr

Michael Capan, M.D.

Affiliation Type: Reference

Category:

Dept./Specialty:

Start Date:

End Date:

Letter Description: Verify Refs - Initial/Affiliate *

Letter Sent Date: 05/09/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

05/19/2017

Jill A. Patraw

A-NCS-Professional Ref

Verif Ltr

Feith Akgul, M.D

Affiliation Type: Reference

Category:

Dept./Specialty:

Start Date:

End Date:

Letter Description: Verify Refs - Initial/Affiliate *

Letter Sent Date: 05/09/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

05/23/2017

Jill A. Patraw

O-No Response

Matthew Larsen, DO

Affiliation Type: Reference

Category:

Dept./Specialty:

Start Date:

End Date:

Letter Description: Verify Refs - Initial/Affiliate *

Letter Sent Date: 05/09/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

05/23/2017

Jill A. Patraw

O-No Response

Review of Work History & Explanation of Gaps	<i>Date & Initials</i> 5/25/2017 jap	<i>Comments</i> 10/2008 to 2/2013 private practice
SAM Website	<i>Date & Initials</i> 3/27/2017 jap	<i>Comments</i>
NPDB Website query through Cactus	<i>Date & Initials</i> 3/27/2017 jap	<i>Comments</i>
OIG Website	<i>Date & Initials</i> Source date 3/7/17 conducted date 3/27/17 jap	<i>Comments</i>
WI Circuit Court	<i>Date & Initials</i> 3/27/2017 jap	<i>Comments</i> No matches
Medicare Opt Out Website	<i>Date & Initials</i> Report ran 5/22/2017 reviewed 5/25/2017 jap	<i>Comments</i>
Consent Form	<i>Sign Date & Initials</i> 3/23/2017 jap	<i>Comments</i>
Health Requirements Met	<i>Date & Initials</i> 3/27/2017 jap	<i>Y/N & Comments</i> Yes
Privilege Form	<i>Sign Date & Initials</i> 3/16/2017 jap	<i>Comments</i>
Verifications within 180 days	<i>Date & Initials</i> 5/25/2017 jap	<i>Comments</i> Yes
CVO Review	<i>Date</i> 05/30/2017	<i>Signature</i> Electronically signed by Jill Patraw
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 ____		



Robert J. Vickrey, 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: 1659320331
UPIN: _____
Medicare#: _____
Medicalid#: _____

Credentialing Activity

Application

Application Sent Date: 04/18/2017
Attestation Date: 04/15/2017
Received Date: 05/04/2017

Most Recent Query

Query Type: _____
Query Date: _____

Credentialing

Completed: ☐

Issues: ☐

Aspirus Network, Inc.

Information Upon Credentialing Completion

Status: ANI Application in Process
Category: ANI Locum Tenens
Category Applied For: ANI Locum Tenens
Network: _____
Cred Activity Notes: _____

Committee Progress

Started: _____
Status: _____

Issues: ☐

Activity

Completed: ☐

North Central Healthcare

Information Upon Credentialing Completion

Status: NCHC Application in Process
Category: NCHC Locum Tenens
Category Applied For: NCHC Locum Tenens
Network: _____
Cred Activity Notes: _____

Committee Progress

Started: _____
Status: _____

Issues: ☐

Activity

Completed: ☐

Education

Robert J. Vickrey, M.D.

University of Illinois College of Medicine

Program: Medical School

Dept./Specialty:

Start Date: 08/01/1998

End Date: 12/15/2002

Graduated/Completed: ☒

Verified: ☒

Verified Date: 05/01/2017

Verified By: Christine D Chase

Verified How: E-AMA Website-Medical School

Notes: MD

University of Wisconsin Madison

Program: Internship

Dept./Specialty: Psychiatry

Start Date: 06/01/2003

End Date: 05/31/2004

Graduated/Completed: ☒

Verified: ☒

Verified Date: 05/01/2017

Verified By: Christine D Chase

Verified How: E-AMA Website-Medical School

Notes:

University of Wisconsin Madison

Program: Residency

Dept./Specialty: Psychiatry

Start Date: 06/01/2004

End Date: 06/30/2007

Graduated/Completed: ☒

Verified: ☒

Verified Date: 05/01/2017

Verified By: Christine D Chase

Verified How: E-AMA Website-Medical School

Notes:

Medical College of Wisconsin

Program: Fellowship

Dept./Specialty:

Start Date: 07/01/2007

End Date: 06/30/2008

Graduated/Completed: ☒

Verified: ☒

Verified Date: 05/01/2017

Verified By: Christine D Chase

Verified How: E-AMA Website-Medical School

Notes: Forensic Psychiatry

Licenses

Robert J. Vickrey, M.D.

License Type: Federated State Medical
Boards
State:
License Number:
Status:
Expiration Date:

Verified: ☒
Verified Date: 05/01/2017

Verified By: Christine D Chase
Verified How: L-FSMB Website
Notes: IL, WI

License Type: DEA Certificate
State: WI
License Number: BV7439335
Status: Active
Expiration Date: 05/31/2019

Verified: ☒
Verified Date: 05/01/2017
Verified By: Christine D Chase
Verified How: L-DEA Website
Notes: source date: 04/24/2017

License Type: State License
State: WI
License Number: 47319
Status: Active
Expiration Date: 10/31/2017

Verified: ☒
Verified Date: 05/01/2017
Verified By: Christine D Chase
Verified How: L-WI DRL Website
Notes: MD

License Type: State License
State: WI
License Number: 1056
Status: Expired
Expiration Date: 06/30/2005

Verified: ☒
Verified Date: 05/01/2017
Verified By: Christine D Chase
Verified How: L-WI DRL Website
Notes: Temporary Education
Training Permit

License Type: WI Caregiver Background
Check
State: WI
License Number:
Status:
Expiration Date: 05/01/2021

Verified: ☒
Verified Date: 05/01/2017
Verified By: Christine D Chase
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: 05/02/2017
Verified By: Christine D Chase
Verified How: O-FYI Only
Notes:

Insurance

ProAssurance

Policy Number: MP72494
Coverage Type:
Expiration Date: 02/18/2018

Verified: ☒
Verified Date: 06/02/2017
Verified By: Christine D Chase
Verified How: O-Unable to Verify
Notes: Physically signed consent
from provider was never
received after multiple
requests. ProAssurance
will not verify their policies
without it. NCHC will
accept the NPDB, see email
in correspondence.

Boards

Robert J. Vickrey, M.D.

Am Bd Psyc&Neur (CAQ: Forensic)

Board Status: Certified

Cert Number:

Expiration Date: 03/01/2018

Verified: ☒

Verified Date: 05/01/2017

Verified By: Christine D Chase

Verified How: B-ABMS Website-Board
Certification

Notes:

Am Bd Psyc&Neur

Board Status: Certified

Cert Number:

Expiration Date: 12/31/2021

Verified: ☒

Verified Date: 05/01/2017

Verified By: Christine D Chase

Verified How: B-ABMS Website-Board
Certification

Notes:

Affiliations

Robert J. Vickrey, M.D.

North Central Health Care

Affiliation Type: Medical Staff
Category:
Dept./Specialty: Psychiatry
Start Date:
End Date:

Verified: ☒
Verified Date: 05/01/2017
Verified By: Christine D Chase
Verified How: O-FYI Only
Notes: future practice location

Ministry Health Care / St. Mary's Hospital*

Affiliation Type: Medical Staff
Category: Locum Tenens
Dept./Specialty: Psychiatry
Start Date: 12/31/2015
End Date: 04/30/2017

Letter Description: Verify Affiliations & Employment*
Letter Sent Date: 05/01/2017
Letter Sent By: Christine D Chase

Verified: ☒
Verified Date: 05/01/2017
Verified By: Christine D Chase
Verified How: A-Health Care Facility Verif Ltr Online
Notes: 11/20/2007 to 08/06/2012
Limited Clinical Privileges

Central Wisconsin Center

Affiliation Type: Medical Staff
Category: Not Provided
Dept./Specialty: Psychiatry
Start Date: 08/01/2015
End Date:

Letter Description: Verify Affiliations & Employment*
Letter Sent Date: 05/01/2017
Letter Sent By: Christine D Chase

Verified: ☒
Verified Date: 05/04/2017
Verified By: Christine D Chase
Verified How: A-NCS-Health Care Affiliation Verif Ltr
Notes:

Mendota Mental Health Institute

Affiliation Type: Medical Staff
Category: Not Provided
Dept./Specialty: Psychiatry
Start Date: 03/01/2005
End Date:

Letter Description: Verify Affiliations & Employment*
Letter Sent Date: 05/01/2017
Letter Sent By: Christine D Chase

Verified: ☒
Verified Date: 05/04/2017
Verified By: Christine D Chase
Verified How: A-NCS-Health Care Affiliation Verif Ltr

Human Services Center

Affiliation Type: Medical Staff
Category: Not Provided
Dept./Specialty: Psychiatry
Start Date: 01/01/2016
End Date:

Letter Description: Verify Affiliations & Employment*
Letter Sent Date: 05/04/2017
Letter Sent By: Christine D Chase

Verified: ☒
Verified Date: 05/05/2017
Verified By: Christine D Chase
Verified How: A-NCS-Health Care Affiliation Verif Ltr

Unified Community Services

Affiliation Type: Medical Staff
Category: Not Provided
Dept./Specialty: Psychiatry
Start Date: 01/01/2017
End Date:

Letter Description: Verify Affiliations & Employment*
Letter Sent Date: 05/08/2017
Letter Sent By: Christine D Chase

Verified: ☒
Verified Date: 05/08/2017
Verified By: Christine D Chase
Verified How: A-NCS-Health Care Affiliation Verif Ltr

Northern Wisconsin Center

Affiliation Type: Medical Staff
Category: Not Provided
Dept./Specialty: Psychiatry
Start Date: 05/01/2009
End Date:

Letter Description: Verify Affiliations & Employment*
Letter Sent Date: 05/08/2017
Letter Sent By: Christine D Chase

Verified: ☒
Verified Date: 05/10/2017
Verified By: Christine D Chase
Verified How: A-NCS-Health Care Affiliation Verif Ltr
Notes:

Wisconsin Department of Corrections

Affiliation Type: Medical Staff
Category:
Dept./Specialty: Psychiatry
Start Date: 06/01/2008
End Date:

Letter Description: Verify Affiliations & Employment*
Letter Sent Date: 05/19/2017
Letter Sent By: Christine D Chase


Verified: ☒
Verified Date: 05/26/2017
Verified By: Christine D Chase
Verified How: O-Unable to Verify
Notes: no response after 3 attempts to verify

Kevin Kallas, MD

Affiliation Type: Reference
Category:
Dept./Specialty:

Start Date:
End Date:

Letter Description: Verify Refs - Initial/Affiliate *
Letter Sent Date: 05/01/2017
Letter Sent By: Christine D Chase


Verified: 
Verified Date: 05/01/2017
Verified By: Christine D Chase
Verified How: A-NCS-Professional Ref
Verif Ltr
Notes:

Jeffrey Anders, MD

Affiliation Type: Reference
Category:
Dept./Specialty:

Start Date:
End Date:

Letter Description: Verify Refs - Initial/Affiliate *
Letter Sent Date: 05/02/2017
Letter Sent By: Christine D Chase


Verified: 
05/02/2017
Christine D Chase
A-NCS-Professional Ref
Verif Ltr

Jeffrey Marcus, M.D.

Affiliation Type: Reference
Category:
Dept./Specialty:

Start Date:
End Date:

Letter Description: Verify Refs - Initial/Affiliate *
Letter Sent Date: 05/02/2017
Letter Sent By: Christine D Chase


Verified: 
05/03/2017
Christine D Chase
A-NCS-Professional Ref
Verif Ltr

University of Illinois

Affiliation Type: Teaching Appointment/Adjunct
Category: Faculty
Dept./Specialty: Psychiatry

Start Date: 10/01/2007
End Date:

Letter Description: Verify Affiliations &
Employment*
Letter Sent Date: 05/08/2017
Letter Sent By: Christine D Chase

Verified: 
05/09/2017
Christine D Chase
A-Health Care Facility Verif
Ltr
Clinical Assistant
Professor

Review of Work History & Explanation of Gaps	<i>Date & Initials</i> 06/02/2017 cdc	<i>Comments</i> No gaps (Per CV, provider was employed with the University of IL for the time between his medical school and start of internship.
SAM Website	<i>Date & Initials</i> 05/01/2017 cdc	<i>Comments</i>
NPDB Website query through Cactus	<i>Date & Initials</i> 05/19/2017 cdc	<i>Comments</i>
OIG Website	<i>Date & Initials</i> Source date: 04/06/2017 cdc Conducted date: 05/01/2017 cdc	<i>Comments</i>
WI Circuit Court	<i>Date & Initials</i> 05/01/2017 cdc	<i>Comments</i> No matches
Medicare Opt Out Website	<i>Date & Initials</i> Report run 05/22/2017 cdc Reviewed 06/02/2017 cdc	<i>Comments</i>
Consent Form	<i>Sign Date & Initials</i> 04/24/2017 cdc	<i>Comments</i>
Health Requirements Met	<i>Date & Initials</i> 06/02/2017 cdc	<i>Y/N & Comments</i> Yes
Privilege Form	<i>Sign Date & Initials</i> 04/20/2017 cdc	<i>Comments</i>
Verifications within 180 days	<i>Date & Initials</i> 06/02/2017 cdc	<i>Comments</i> Yes
CVO Review	<i>Date</i> 06/02/2017	<i>Signature</i> Electronically signed by Christine Chase
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 ____		



Appointee Jean L. Baribeau-Anaya PAC Appoint/Reappoint 07-01-2017 to 06-30-2019
Time Period

Requested Privileges _____ Medical (Includes Family Practice, Internal Medicine)
 _____ Psychiatry _____ Medical Director
☒ Mid-Level Practitioner

Provider Type X Employee
 Locum
 Contract

Locum Agency: _____
Contract Name: _____

The Credentials file of this staff member contains data and information demonstrating current competence in the clinical privileges requested. After review of this information, I recommend that the clinical privileges be granted as indicated with any exceptions or conditions documented.

(Medical Executive Committee Signature)

5-9-17.

(Signature Date)

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 President Signature)

6-15-77
(Signature Date)

Reviewed by Governing Board: _____
(Date)

Response: _____ Concur
Recommend further reconsideration

(Governing Board Signature)

(Signature Date)

(Chief Executive Officer Signature)

(Signature Date)

Jean L. Baribeau-Anaya, 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#: 14297
SSN:
Date of Birth:
Provider Specialties: Physician Assistant

NPI: 1952464885
UPIN:
Medicare#: 004090144
Medicaid#: 1952464885

Credentialing Activity

Application

Application Sent Date: 01/03/2017
Attestation Date:
Received Date: 02/01/2017

Most Recent Query

Query Type: Claims Processing
Query Date: 01/06/2016

Credentialing

Completed: ☐

Issues: ☐

Aspirus Network, Inc.

From 07/01/2015 To 06/30/2017

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 06/30/2016 To 06/30/2017

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: ☐

Payor Credentialing

Information Upon Credentialing Completion

Status:
Category:
Category Applied For:
Network:
Cred Activity Notes:

Committee Progress

Started:
Status:


Issues: ☐

Activity


Completed: ☐

Licenses


License Type: DEA Certificate
 State: WI
 License Number: MB2598297
 Status: Active
 Expiration Date: 07/31/2017

Verified: 
 Verified Date: 02/01/2017
 Verified By: Sammy Chojnowski
 Verified How: L-DEA Website
 Notes: Source Date: 1/30/2017


License Type: State License
 State: WI
 License Number: 2905
 Status: Active
 Expiration Date: 02/28/2018

Verified: 
 Verified Date: 02/01/2017
 Verified By: Sammy Chojnowski
 Verified How: L-WI DRL Website
 Notes:

License Type: WI Caregiver Background
 Check
 State: WI
 License Number:
 Status:
 Expiration Date: 03/07/2020

Verified: 
 Verified Date: 02/01/2017
 Verified By: Sammy Chojnowski
 Verified How: O-Verified Previously
 Notes:

License Type: Basic Life Support
 State:
 License Number:
 Status:
 Expiration Date: 07/31/2015

Verified: 
 Verified Date: 03/22/2017
 Verified By: Sammy Chojnowski
 Verified How: O-Clean Up
 Notes:

Insurance**ProAssurance Companies**

Policy Number: MP66573

Letter Description: Verify Malpractice Insurance
 AHP*

Verified: 
 Verified Date: 02/15/2017


Coverage Type:
 Expiration Date: 01/01/2018

Letter Sent Date: 02/09/2017
 Letter Sent By: Jill A. Patraw

Verified By: Sammy Chojnowski
 Verified How: I-Verification from Carrier
 Notes: \$1M / \$3M
 No claims

Boards**National Commission on Certification of Phys Assts**

Board Status: Certified
 Cert Number: 1029922
 Expiration Date: 12/31/2018

Verified: 
 Verified Date: 02/01/2017
 Verified By: Sammy Chojnowski
 Verified How: B-NCCPA Website
 Notes:

Affiliations**Advanced Care Providers***Affiliation Type:* Allied Health Staff*Category:* Not Provided*Dept./Specialty:* Physician Assistant*Start Date:* 04/30/2015*End Date:**Letter Description:* Verify Affiliations & Employment Reappt**Letter Sent Date:* 02/09/2017*Letter Sent By:* Jill A. Patraw*Verified:* *Verified Date:* 02/12/2017*Verified By:* Sammy Chojnowski*Verified How:* A-NCS-Health Care
Affiliation Verif Ltr*Notes:***Aspirus Langlade Hospital***Affiliation Type:* Allied Health Staff*Category:* Allied Health Practitioner*Dept./Specialty:* Physician Assistant*Start Date:* 06/26/2012*End Date:* 11/22/2016*Letter Description:* Verify Affiliations & Employment Reappt**Letter Sent Date:* 02/09/2017*Letter Sent By:* Jill A. Patraw*Verified:* *Verified Date:* 02/13/2017*Verified By:* Sammy Chojnowski*Verified How:* A-Health Care Facility Verif
Ltr*Notes:***North Central Health Care***Affiliation Type:* Allied Health Staff*Category:* Not Provided*Dept./Specialty:* Physician Assistant*Start Date:* 06/22/2015*End Date:**Letter Description:* Verify Affiliations & Employment Reappt**Letter Sent Date:* 02/09/2017*Letter Sent By:* Jill A. Patraw*Verified:* *Verified Date:* 02/13/2017*Verified By:* Sammy Chojnowski*Verified How:* A-NCS-Health Care
Affiliation Verif Ltr*Notes:***Peggy Christianson, APNP***Affiliation Type:* Reference*Category:**Dept./Specialty:**Start Date:**End Date:**Letter Description:* Verify Refs - Reappointment **Letter Sent Date:* 03/22/2017*Letter Sent By:* Sammy Chojnowski*Verified:* 

03/22/2017

Sammy Chojnowski

A-NCS-Professional Ref
Verif Ltr**David Tange, M.D.***Affiliation Type:* Sponsoring Physician*Category:**Dept./Specialty:**Start Date:**End Date:**Letter Description:* Verify Refs - Reappointment **Letter Sent Date:* 02/27/2017*Letter Sent By:* Jill A. Patraw*Verified:* *Verified Date:* 03/06/2017*Verified By:* Sammy Chojnowski*Verified How:* A-NCS-Professional Ref
Verif Ltr*Notes:*

NPDB Website query through Cactus	Date & Initials	Comments
	Report Run: ANI 3/3/2017	
	NCHC 3/15/2017	
OIG Website	Report Reviewed: 3/22/2017 sjc	
	Date & Initials	Comments
	Last Report Cleared 3/15/2017 sjc	
SAM Website	Date & Initials	Comments
	Last Report Cleared 3/15/2017 sjc	
	Date & Initials	Comments
Medicare Opt Out Website	Report Run Date: 2/20/2017	
	Reviewed Date: 3/22/2017 sjc	
	Date & Initials	Comments
Supervising Physician Form	Sign Date & Initials	Comments
	1/30/2017 sjc	David Tange, MD
	Sign Date & Initials	Comments
Collaborative Agreement	N/A	N/A
	Sign Date & Initials	Comments
	1/16/2017 sjc	
Consent Form	Sign Date & Initials	Comments
	1/30/2017 sjc	
	Date & Initials	Comments
Privilege Form	Date & Initials	Comments
	Date & Initials	Comments
	Date & Initials	Comments
Quality Improvement Activities (payor requirement)	Date & Initials	Comments
	Date & Initials	Comments
	Date & Initials	Comments
Patient Complaints (payor requirement)	Date & Initials	Comments
	Date & Initials	Comments
	Date & Initials	Comments
CVO Review	Date	Signature
	3/27/2017	Jean L. Baribeau-Anaya
	Date	Signature
Entity Review	Date	Signature
	Date	Signature
	Date	Signature
ANI Only - All Disclosure Questions Answered	YES___ NO___	
	YES___ NO___	
	YES___ NO___	
ANI Only - Issues Identified	YES___ NO___	
	YES___ NO___	
	YES___ NO___	



Terry A. Gander, PAC

Enhanced Credentialing Activity

General Profile

Primary Address

Aspirus Langlade Hospital
Walk In
112 East Fifth Avenue
Antigo, WI 54409
(715) 823-2331

Other Provider Information

ID#: 14298
SSN:
Date of Birth:
Provider Specialties: Physician Assistant

NPI: 1528391539

UPIN:

Medicare#: K400269490

Medicald#: 1528391539

Credentialing Activity

Application

Application Sent Date: 01/03/2017

Attestation Date:

Received Date: 02/01/2017

Most Recent Query

Query Type: Claims Processing

Query Date: 02/24/2016

Credentialing

Completed: ☐

Issues: ☐

Aspirus Langlade Hospital

From 02/25/2016 To 06/30/2017

Information Upon Credentialing Completion

Status: ALH Current

Category: ALH Allied Health 2yr

Category Applied For: ALH Allied Health 2yr

Network:

Cred Activity Notes:

Committee Progress

Started:

Status:

Issues: ☐

Activity

Completed: ☐

Aspirus Network, Inc.

From 03/16/2016 To 06/30/2017

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

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: ☐

Payor Credentialing

Information Upon Credentialing Completion

Status: PC Resigned

Category:

Category Applied For:

Network:

Cred Activity Notes:

Committee Progress

Started:

Status:


Issues: ☐

Activity


Completed: ☐

Licenses


License Type: DEA Certificate
 State: WI
 License Number: MG3237561
 Status: Active
 Expiration Date: 09/30/2017

Verified: 
 Verified Date: 02/01/2017
 Verified By: Sammy Chojnowski
 Verified How: L-DEA Website
 Notes: Source Date: 1/30/2017


License Type: State License
 State: WI
 License Number: 2500
 Status: Active
 Expiration Date: 02/28/2018

Verified: 
 Verified Date: 02/01/2017
 Verified By: Sammy Chojnowski
 Verified How: L-WI DRL Website
 Notes:


License Type: WI Caregiver Background
 Check
 State: WI
 License Number:
 Status:
 Expiration Date: 12/18/2019

Verified: 
 Verified Date: 02/01/2017
 Verified By: Sammy Chojnowski
 Verified How: O-Verified Previously
 Notes:


License Type: Basic Life Support
 State:
 License Number:
 Status:
 Expiration Date: 03/26/2016

Verified: 
 Verified Date: 04/05/2017
 Verified By: Sammy Chojnowski
 Verified How: O-Clean Up
 Notes:

License Type: Pediatric Advanced Life
 Support
 State:
 License Number:
 Status:
 Expiration Date: 10/23/2015

Verified: 
 Verified Date: 04/05/2017
 Verified By: Sammy Chojnowski
 Verified How: O-Clean Up
 Notes:


License Type: Advanced Cardiac Life
 Support
 State:
 License Number:
 Status:
 Expiration Date: 02/03/2019

Verified: 
 Verified Date: 04/05/2017
 Verified By: Sammy Chojnowski
 Verified How: O-FYI Only
 Notes:

Insurance**ProAssurance (Advanced Care Providers)**


Policy Number: AFC9116116
 Coverage Type:
 Expiration Date: 11/02/2017

Letter Description: Verify Malpractice Insurance
 AHP*
 Letter Sent Date: 02/09/2017
 Letter Sent By: Jill A. Patraw

Verified: 
 Verified Date: 02/22/2017
 Verified By: Sammy Chojnowski
 Verified How: I-Verification from Carrier
 Notes: No Claims
 No Limits Listed

Boards**National Commission on Certification of Phys Assts**

Board Status: Certified
 Cert Number: 1082574
 Expiration Date: 12/31/2017

Verified: 
 Verified Date: 02/01/2017
 Verified By: Sammy Chojnowski
 Verified How: B-NCCPA Website
 Notes:

Affiliations

North Central Health Care

Affiliation Type: Allied Health Staff

Category: Not Provided

Dept./Specialty: Physician Assistant

Start Date: 03/01/2016

End Date:

Letter Description: Verify Affiliations & Employment
Reappt*

Letter Sent Date: 02/09/2017

Letter Sent By: Jill A. Patraw

Verified:

Verified Date: 02/13/2017

Verified By: Sammy Chojnowski

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

Notes:

Monroe Clinic & Hospital

Affiliation Type: Allied Health Staff

Category: Affiliate

Dept./Specialty: Physician Assistant

Start Date: 02/05/2016

End Date:

Letter Description: Verify Affiliations & Employment
Reappt*

Letter Sent Date: 02/27/2017

Letter Sent By: Jill A. Patraw

Verified:

03/02/2017

Sammy Chojnowski

A-Health Care Facility Verif
Ltr**Dean Clinic - Wisconsin Dells**

Affiliation Type: Allied Health Staff

Category: Locum Tenens

Dept./Specialty: Physician Assistant

Start Date: 09/02/2015

End Date: 01/15/2016

Letter Description: Verify Affiliations & Employment
Reappt*

Letter Sent Date: 03/13/2017

Letter Sent By: Jill A. Patraw

Verified:

Verified Date: 03/13/2017

Verified By: Sammy Chojnowski

Verified How: A-Health Care Facility Verif
Ltr

Notes:

Aspirus Langlade Hospital

Affiliation Type: Allied Health Staff

Category: Allied Health Practitioner

Dept./Specialty: Physician Assistant

Start Date: 02/25/2016

End Date:

Verified:

Verified Date: 04/05/2017

Verified By: Sammy Chojnowski

Verified How: A-Health Care Facility Verif
Ltr

Notes:

Advanced Care Providers

Affiliation Type: Employee

Category: Not Provided

Dept./Specialty: Physician Assistant

Start Date: 03/24/2011

End Date:

Letter Description: Verify Affiliations & Employment
Reappt*

Letter Sent Date: 02/09/2017

Letter Sent By: Jill A. Patraw

Verified:

Verified Date: 02/12/2017

Verified By: Christine D Chase

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

Notes:

Melee Thao PA

Affiliation Type: Reference

Category:

Dept./Specialty:

Start Date:

End Date:

Letter Description: Verify Refs - Reappointment *

Letter Sent Date: 03/13/2017

Letter Sent By: Jill A. Patraw

Verified:

Verified Date: 04/04/2017

Verified By: Sammy Chojnowski

Verified How: A-NCS-Professional Ref
Verif Ltr

Notes:

M. Scott Moore, M.D.

Affiliation Type: Sponsoring Physician

Category:

Dept./Specialty:

Start Date:

End Date:

Letter Description: Verify Refs - Reappointment *

Letter Sent Date: 02/09/2017

Letter Sent By: Jill A. Patraw

Verified:

Verified Date: 02/19/2017

Verified By: Sammy Chojnowski

Verified How: A-NCS-Professional Ref
Verif Ltr

Notes:

Steve Hubbard, M.D.

Affiliation Type: Sponsoring Physician

Category:

Dept./Specialty:

Start Date:

End Date:

Letter Description: Verify Refs - Reappointment *

Letter Sent Date: 03/13/2017

Letter Sent By: Jill A. Patraw

Verified:

03/24/2017

Sammy Chojnowski

A-NCS-Professional Ref
Verif Ltr

Affiliations - continued**Terry A. Gander, PAC****David Tange, M.D.**

Affiliation Type: Sponsoring Physician

Category:

Dept./Specialty:

Start Date:

End Date:

Letter Description: Verify Refs - Reappointment *

Letter Sent Date: 04/07/2017

Letter Sent By: Sammy Chojnowski

Verified: ☒

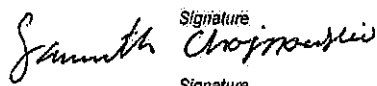
04/10/2017

Sammy Chojnowski

A-NCS-Professional Ref

Verif Ltr

Worksheet

	Date & Initials	Comments
NPDB Website query through Cactus	Report Run Date: ANI 3/3/2017 ALH 3/8/2017 NCHC 3/15/2017 Report Reviewed: 3/29/2017 sjc	
OIG Website	Date & Initials Last Report Cleared 3/15/2017 sjc	Comments
SAM Website	Date & Initials Last Report Cleared 3/15/2017 sjc	Comments
Medicare Opt Out Website	Date & Initials Report Run Date: 2/20/2017 Reviewed Date: 3/29/2017 sjc	Comments
Supervising Physician Form	Sign Date & Initials 4/13/2017 sjc	Comments David Tange, MD
Collaborative Agreement	Sign Date & Initials N/A	Comments N/A
Consent Form	Sign Date & Initials 1/31/2017 sjc	Comments
Privilege Form	Sign Date & Initials NCHC 4/13/2017 sjc ALH 4/27/2017 sjc	Comments
Quality Improvement Activities (payor requirement)	Date & Initials	Comments
Patient Complaints (payor requirement)	Date & Initials	Comments
CVO Review	Date 4/27/17	Signature 
Entity Review	Date	Signature
ANI Only - All Disclosure Questions Answered YES___ NO___		
ANI Only - Issues Identified YES___ NO___		

PRIVILEGE AND APPOINTMENT RECOMMENDATION

Appointee Debra A. Knapp, APNP Appoint/Reappoint 07-01-2017 to 06-30-2019
Time Period

Requested Privileges ☐ Medical (Includes Family Practice, Internal Medicine)
 ☐ Psychiatry ☐ Medical Director
 ☒ Mid-Level Practitioner


Medical Staff Status ☐ Courtesy ☒ Active

Provider Type ☒ Employee
 ☐ Locum Locum Agency: _____
 ☐ Contract Contract Name: _____

MEDICAL EXECUTIVE COMMITTEE

The Credentials file of this staff member contains data and information demonstrating current competence in the clinical privileges requested. After review of this information, I recommend that the clinical privileges be granted as indicated with any exceptions or conditions documented.

Comments: _____



(Medical Executive Committee Signature)

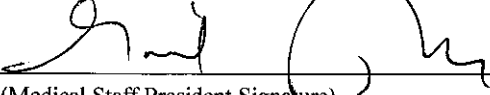
5-5-17

(Signature Date)

MEDICAL STAFF

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 President Signature)

6-15-17

(Signature Date)

GOVERNING BOARD

Reviewed by Governing Board: _____
(Date)

Response: ☐ Concur
 ☐ Recommend further reconsideration

(Governing Board Signature)

(Signature Date)

(Chief Executive Officer Signature)

(Signature Date)

Northcentral Credentialing Services

A service of



ASPIRUS™

Passion for excellence.
Compassion for people.

Debra A. Knapp, 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#: 11585
SSN:
Date of Birth:
Provider Specialties: Nurse Practitioner

NPI: 1376570374

UPIN:

Medicare#:

Medicaid#:

Credentialing Activity

Application

Application Sent Date: 01/03/2017
Attestation Date:
Received Date: 02/21/2017

Most Recent Query

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

Credentialing
Completed: ☐

Issues: ☐

Aspirus Network, Inc.

From 07/01/2015 To 06/30/2017

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 07/01/2015 To 06/30/2017

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

Debra A. Knapp, APNP

License Type: State License
State: WI
License Number: 68381
Status: Active
Expiration Date: 02/28/2018

Verified: ☒
Verified Date: 02/01/2017
Verified By: Christine D Chase
Verified How: L-WI DRL Website
Notes: RN
Multi-state

License Type: State License
State: WI
License Number: 460
Status: Active
Expiration Date: 09/30/2018

Verified: ☒
Verified Date: 02/01/2017
Verified By: Christine D Chase
Verified How: L-WI DRL Website
Notes: APNP

License Type: DEA Certificate
State: WI
License Number: MK1141415
Status: Active
Expiration Date: 12/31/2018

Verified: ☒
Verified Date: 02/01/2017
Verified By: Christine D Chase
Verified How: L-DEA Website
Notes: Source date: 01/30/2017

License Type: Basic Life Support
State:
License Number:
Status:
Expiration Date: 06/03/2018

Verified: ☒
Verified Date: 02/02/2017
Verified By: Christine D Chase
Verified How: O-FYI Only
Notes:

License Type: WI Caregiver Background
Check
State: WI
License Number:
Status:
Expiration Date: 03/15/2020

Verified: ☒
Verified Date: 02/02/2017
Verified By: Christine D Chase
Verified How: O-Verified Previously
Notes:

Insurance

Pro Assurance

Policy Number: MP66573
Coverage Type:
Expiration Date: 01/01/2018

Letter Description: Verify Malpractice Insurance
AHP*
Letter Sent Date: 02/09/2017
Letter Sent By: Jill A. Patraw

Verified: ☒
Verified Date: 02/15/2017
Verified By: Christine D Chase
Verified How: I-Verification from Carrier
Notes: \$1M / \$3M No claims

Advanced Pain Management

Policy Number: MCL001166
Coverage Type:
Expiration Date: 01/01/2017

Letter Description: Verify Malpractice Insurance
AHP*
Letter Sent Date: 02/27/2017
Letter Sent By: Jill A. Patraw

Verified: ☒
Verified Date: 02/28/2017
Verified By: Christine D Chase
Verified How: I-Verification from Carrier
Notes: limits not listed, no claims

Boards

Am Nurses Credentialing Center

Board Status: Certified
Cert Number: 0240357
Expiration Date: 08/31/2020

Verified: ☒
Verified Date: 02/01/2017
Verified By: Christine D Chase
Verified How: B-ANCC Website
Notes:

Affiliations**Debra A. Knapp, APNP****Advanced Pain Management***Affiliation Type:* Allied Health Staff*Category:* Not Provided*Dept./Specialty:* Nurse Practitioner*Start Date:* 06/01/2016*End Date:**Letter Description:* Verify Affiliations & Employment
Reappt**Letter Sent Date:* 02/09/2017*Letter Sent By:* Jill A. Patraw**Verified:** ☒*Verified Date:* 02/10/2017*Verified By:* Christine D Chase*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:* 02/09/2017*Letter Sent By:* Jill A. Patraw**Verified:** ☒*Verified Date:* 02/13/2017*Verified By:* Christine D Chase*Verified How:* A-NCS-Health Care
Affiliation Verif Ltr*Notes:***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:* 03/24/2017*Letter Sent By:* Christine D Chase**Verified:** ☒*Verified Date:* 03/30/2017*Verified By:* Christine D Chase*Verified How:* O-Unable to Verify*Notes:* several attempts made,
however no response
was received.**Ministry St. Michael's Hospital****Affiliation Type:* Allied Health Staff*Category:* Not Provided*Dept./Specialty:* Nurse Practitioner*Start Date:* 06/26/2006*End Date:* 06/27/2014*Letter Description:* Verify Affiliations & Employment
Reappt**Letter Sent Date:* 04/11/2017*Letter Sent By:* Christine D Chase**Verified:** ☒*Verified Date:* 04/12/2017*Verified By:* Christine D Chase*Verified How:* A-NCS-Health Care
Affiliation Verif Ltr*Notes:* Advance Practice Clinician**Tyler Laber, PAC***Affiliation Type:* Reference*Category:**Dept./Specialty:**Start Date:**End Date:**Letter Description:* Verify Refs - Reappointment **Letter Sent Date:* 03/24/2017*Letter Sent By:* Christine D Chase**Verified:** ☒*04/02/2017**Christine D Chase**A-NCS-Professional Ref
Verif Ltr***David Tange, M.D.***Affiliation Type:* Sponsoring Physician*Category:**Dept./Specialty:**Start Date:**End Date:**Letter Description:* Verify Refs - Reappointment **Letter Sent Date:* 02/27/2017*Letter Sent By:* Jill A. Patraw**Verified:** ☒*Verified Date:* 03/06/2017*Verified By:* Christine D Chase*Verified How:* A-NCS-Professional Ref
Verif Ltr*Notes:*

Worksheet

Debra A. Knapp, APNP

NPDB Website query through Cactus	Date & Initials	Comments
	ANI report run 03/03/2017 cdc	
	NCHC report run 03/15/2017 cdc	
	Reviewed 04/12/2017 cdc	
OIG Website	Date & Initials	Comments
	Last report cleared 03/15/2017 cdc	
SAM Website	Date & Initials	Comments
	Last report cleared 03/15/2017 cdc	
Medicare Opt Out Website	Date & Initials	Comments
	Report run 02/20/2017 cdc	
	Reviewed 04/12/2017 cdc	
Supervising Physician Form	Sign Date & Initials	Comments
	01/30/2017 cdc	David Tange, MD
Collaborative Agreement	Sign Date & Initials	Comments
	01/30/2017 cdc	David Tange, MD
Consent Form	Sign Date & Initials	Comments
	01/11/2017 cdc	
Privilege Form	Sign Date & Initials	Comments
	01/30/2017 cdc	
Quality Improvement Activities (payor requirement)	Date & Initials	Comments
Patient Complaints (payor requirement)	Date & Initials	Comments
CVO Review	Date	Signature
	4/13/17	Christine Chase
Entity Review	Date	Signature
ANI Only - All Disclosure Questions Answered		
YES___ NO___		
ANI Only - Issues Identified		
YES___ NO___		



Appointee Debra J. Sanfilippo, PA-C Appoint/Reappoint 07-01-2017 to 06-30-2019
Time Period
Requested Privileges _____ Medical (Includes Family Practice, Internal Medicine)
 _____ Psychiatry _____ Medical Director
 X Mid-Level Practitioner

Medical Staff Status X Courtesy _____ Active

Provider Type _____ Employee
 X Locum Locum Agency: Advanced Care Providers
 _____ Contract Contract Name: _____

The Credentials file of this staff member contains data and information demonstrating current competence in the clinical privileges requested. After review of this information, I recommend that the clinical privileges be granted as indicated with any exceptions or conditions documented.


Comments: _____


(Medical Executive Committee Signature)

5-9-17.
(Signature Date)

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

The application be denied



(Medical Staff President Signature)

6-15-17
(Signature Date)

Reviewed by Governing Board: _____
(Date)

Response: _____ Concur
 _____ Recommend further reconsideration

(Governing Board Signature)

(Signature Date)

(Chief Executive Officer Signature)

(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: 01/03/2017
Attestation Date: _____
Received Date: 01/31/2017

Most Recent Query

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

Credentialing

Completed: ☐

Issues: ☐

Aspirus Network, Inc.

From 07/01/2015 To 06/30/2017

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 07/01/2015 To 06/30/2017

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

Debra J. Sanfilippo, PAC

License Type: DEA Certificate
State: WI
License Number: MS1095048
Status: Active
Expiration Date: 02/28/2019

Verified: ☒
Verified Date: 01/16/2017
Verified By: Jill A. Patraw
Verified How: L-DEA Website
Notes: source date 1/9/2017

License Type: State License
State: WI
License Number: 296
Status: Active
Expiration Date: 02/28/2018

Verified: ☒
Verified Date: 01/16/2017
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: 06/03/2019

Verified: ☒
Verified Date: 01/18/2017
Verified By: Jill A. Patraw
Verified How: O-Verified Previously
Notes:

License Type: Basic Life Support
State:
License Number:
Status:
Expiration Date: 04/30/2017

Verified: ☒
Verified Date: 01/24/2017
Verified By: Jill A. Patraw
Verified How: O-FYI Only
Notes:

Insurance

ProAssurance (Advanced Care Providers)

Policy Number: AFC9116116
Coverage Type: Claims Made
Expiration Date: 11/02/2017

Letter Description: Verify Malpractice Insurance
AHP*
Letter Sent Date: 02/09/2017
Letter Sent By: Jill A. Patraw

Verified: ☒
Verified Date: 02/22/2017
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: 12/31/2017

Verified: ☒
Verified Date: 01/18/2017
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:

Verified: 
Verified Date: 01/18/2017
Verified By: Jill A. Patraw
Verified How: A-Health Care Facility Verif Ltr Online
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: 03/06/2015

Verified: 
Verified Date: 01/18/2017
Verified By: Jill A. Patraw
Verified How: A-Health Care Facility Verif Ltr Online
Notes:

Ministry Good Samaritan Health Center*

Affiliation Type: Allied Health Staff
Category: Not Provided
Dept/Specialty: Physician Assistant


Start Date: 02/01/2007
End Date:

Verified: 
Verified Date: 01/18/2017
Verified By: Jill A. Patraw
Verified How: A-Health Care Facility Verif Ltr Online
Notes:

Ministry Eagle River Memorial Hospital*

Affiliation Type: Allied Health Staff
Category: Not Provided
Dept/Specialty: Physician Assistant

Start Date: 09/07/1999
End Date:

Verified: 
Verified Date: 01/18/2017
Verified By: Jill A. Patraw
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: 05/23/2011
End Date:

Letter Description: Verify Affiliations & Employment Reappt*
Letter Sent Date: 02/09/2017
Letter Sent By: Jill A. Patraw


Verified: 
Verified Date: 02/13/2017
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: 02/09/2017
Letter Sent By: Jill A. Patraw


Verified: 
Verified Date: 02/14/2017
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: 02/27/2017
Letter Sent By: Jill A. Patraw

Verified: 
Verified Date: 03/06/2017
Verified By: Jill A. Patraw
Verified How: A-NCS-Professional Ref Verif Ltr
Notes:

NPDB Website query through Cactus	Date & Initials Report run 3/3/17 ANI 3/15/17 NCHC reviewed 3/22/2017 jap	Comments
OIG Website	Date & Initials Last report cleared 3/15/17 jap	Comments
SAM Website	Date & Initials Last report cleared 3/15/17 jap	Comments
Medicare Opt Out Website	Date & Initials Report run 2/20/17 reviewed 3/22/17 jap	Comments
Supervising Physician Form	Sign Date & Initials 1/30/2017 jap	Comments David Tange, M.D.
Collaborative Agreement	Sign Date & Initials N/A	Comments N/A
Consent Form	Sign Date & Initials 1/16/2017 jap	Comments
Privilege Form	Sign Date & Initials 1/30/2017 jap	Comments
Quality Improvement Activities (payor requirement)	Date & Initials	Comments
Patient Complaints (payor requirement)	Date & Initials	Comments
CVO Review	Date 3/27/17 Date	Signature  Signature
Entity Review		
ANI Only - All Disclosure Questions Answered YES___ NO___		
ANI Only - Issues Identified YES___ NO___		

PRIVILEGE AND APPOINTMENT RECOMMENDATION

Appointee Jennifer L. Svencer, PA-C Appoint/Reappoint 07-01-2017 to 06-30-2019
Time Period

Requested Privileges ☐ Medical (Includes Family Practice, Internal Medicine)
☐ Psychiatry ☐ Medical Director
☒ Mid-Level Practitioner

Medical Staff Status ☒ Courtesy ☐ Active

Provider Type ☐ Employee
☒ Locum Locum Agency: Advanced Care Providers
☐ Contract Contract Name: _____

MEDICAL EXECUTIVE COMMITTEE

The Credentials file of this staff member contains data and information demonstrating current competence in the clinical privileges requested. After review of this information, I recommend that the clinical privileges be granted as indicated with any exceptions or conditions documented.

Comments: _____



(Medical Executive Committee Signature)


5-9-17.

(Signature Date)

MEDICAL STAFF

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 President Signature)

6-15-17

(Signature Date)

GOVERNING BOARD

Reviewed by Governing Board: _____
(Date)

Response: ☐ Concur
☐ Recommend further reconsideration

(Governing Board Signature)

(Signature Date)

(Chief Executive Officer Signature)

(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#: 14324

SSN:

Date of Birth:

Provider Specialties: Physician Assistant

NPI: 1285928283

UPIN:

Medicare#:

Medicaid#:

Credentialing Activity

Application

Application Sent Date: 01/03/2017

Attestation Date:

Received Date: 02/06/2017

Most Recent Query

Query Type: Claims Processing

Query Date: 01/06/2015

Credentialing

Completed: ☒

Issues: ☒

Aspirus Network, Inc.

From 07/01/2015 To 06/30/2017

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 07/01/2015 To 06/30/2017

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

Jennifer L. Svencer, PAC

License Type: State License
State: WI
License Number: 2745
Status: Active
Expiration Date: 02/28/2018

Verified: ☒
Verified Date: 02/03/2017
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: 10/22/2019

Verified: ☒
Verified Date: 02/06/2017
Verified By: Jill A. Patraw
Verified How: O-Verified Previously
Notes:

License Type: DEA Certificate
State: WI
License Number: MS2504404
Status: Active
Expiration Date: 02/29/2020

Verified: ☒
Verified Date: 02/27/2017
Verified By: Jill A. Patraw
Verified How: L-DEA Website
Notes:

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

Verified: ☒
Verified Date: 03/07/2017
Verified By: Jill A. Patraw
Verified How: O-FYI Only
Notes:

Insurance

ProAssurance (Advanced Care Providers)

Policy Number: AFC9116116
Coverage Type:
Expiration Date: 11/02/2017

Letter Description: Verify Malpractice Insurance
AHP*
Letter Sent Date: 02/09/2017
Letter Sent By: Jill A. Patraw


Verified: ☒
Verified Date: 02/22/2017
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: 1098730
Expiration Date: 12/31/2017

Verified: ☒
Verified Date: 02/03/2017
Verified By: Jill A. Patraw
Verified How: B-NCCPA Website
Notes:

NPDB Website query through Cactus	<i>Date & Initials</i> Report run 3/3/17 ANI 3/15/17 NCHC reviewed 3/23/17 jap	<i>Comments</i>
OIG Website	<i>Date & Initials</i> Last report cleared 3/15/17 jap	<i>Comments</i>
SAM Website	<i>Date & Initials</i> Last report cleared 3/15/17 jap	<i>Comments</i>
Medicare Opt Out Website	<i>Date & Initials</i> Report run 2/20/17 reviewed 3/22/17 jap	<i>Comments</i>
Supervising Physician Form	<i>Sign Date & Initials</i> 1/30/2017 jap	<i>Comments</i> David Tange, M.D.
Collaborative Agreement	<i>Sign Date & Initials</i> N/A	<i>Comments</i> N/A
Consent Form	<i>Sign Date & Initials</i> 2/1/2017 jap	<i>Comments</i>
Privilege Form	<i>Sign Date & Initials</i> 1/30/2017 jap	<i>Comments</i>
Quality Improvement Activities (payor requirement)	<i>Date & Initials</i>	<i>Comments</i>
Patient Complaints (payor requirement)	<i>Date & Initials</i>	<i>Comments</i>
CVO Review	<i>Date</i> 3/24/17 <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___		

Shae M. Wheeler, 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#: _____ NPI: 1356524870
SSN: _____ UPIN: _____
Date of Birth: _____ Medicare#: _____
Provider Specialties: Physician Assistant Medicaid#: 1356524870

Credentialing Activity

Application

Application Sent Date: 01/03/2017
Attestation Date: _____
Received Date: 02/01/2017

Most Recent Query

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

Credentialing

Completed: ☐

Issues: ☐

Aspirus Network, Inc.

From 07/01/2015 To 06/30/2017

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: _____

Activity

Completed: ☐

Issues: ☐

North Central Healthcare

From 07/01/2015 To 06/30/2017

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: _____

Activity

Completed: ☐

Issues: ☐

Education

University of Wisconsin Madison

Program: Other Medical Professional
School
Dept / Specialty: _____
Start Date: 07/06/2015

End Date: 08/28/2016
Graduated/Completed: ☒

Verified: ☒

Verified Date: 02/02/2017

Verified By: Jill A. Patraw

Verified How: E-Student Clearinghouse
Website

Notes: Master of PA

Licenses

Shae M. Wheeler, PAC

License Type: DEA Certificate
State: WI
License Number: ME2386236
Status: Active
Expiration Date: 05/31/2017

Verified: ☒
Verified Date: 02/01/2017
Verified By: Jill A. Patraw
Verified How: L-DEA Website
Notes: source date 1/30/2017

License Type: State License
State: WI
License Number: 2741
Status: Active
Expiration Date: 02/28/2018

Verified: ☒
Verified Date: 02/01/2017
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: 07/24/2019

Verified: ☒
Verified Date: 02/02/2017
Verified By: Jill A. Patraw
Verified How: O-Verified Previously
Notes:

Insurance

ProAssurance (Advanced Care Providers)

Policy Number: AFC9116116
Coverage Type: Claims Made
Expiration Date: 11/02/2017

Letter Description: Verify Malpractice Insurance
AHP*
Letter Sent Date: 02/09/2017
Letter Sent By: Jill A. Patraw

Verified: ☒
Verified Date: 02/22/2017
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: 1096464
Expiration Date: 12/31/2017

Verified: ☒
Verified Date: 02/01/2017
Verified By: Jill A. Patraw
Verified How: B-NCCPA Website
Notes:

Affiliations

Shae M. Wheeler, PAC

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: 02/09/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

Verified Date: 02/13/2017

Verified By: Jill A. Patraw

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

Notes:

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: 02/09/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

Verified Date: 02/14/2017

Verified By: Jill A. Patraw

Verified How: A-Health Care Facility Verif Ltr Online

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: 02/09/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

Verified Date: 02/01/2017

Verified By: Jill A. Patraw

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

Notes:

Mark Evqns, PAC

Affiliation Type: Reference

Category:

Dept/Specialty:

Start Date:

End Date:

Letter Description: Verify Refs - Reappointment *

Letter Sent Date: 03/13/2017

Letter Sent By: Jill A. Patraw

Verified: ☒

Verified Date: 03/17/2017

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: 02/27/2017

Letter Sent By: Jill A. Patraw


Verified: ☒

Verified Date: 03/06/2017

Verified By: Jill A. Patraw

Verified How: A-NCS-Professional Ref Verif Ltr

Notes:

NPDB Website query through Cactus	<i>Date & Initials</i> Report run 3/3/17 ANI 3/15/17 NCHC reviewed 3/23/2017 jap	<i>Comments</i>
OIG Website	<i>Date & Initials</i> Last report cleared 3/15/17 jap	<i>Comments</i>
SAM Website	<i>Date & Initials</i> Last report cleared 3/15/17 jap	<i>Comments</i>
Medicare Opt Out Website	<i>Date & Initials</i> Report run 2/20/17 reviewed 3/23/17 jap	<i>Comments</i>
Supervising Physician Form	<i>Sign Date & Initials</i> 1/30/2017 jap	<i>Comments</i> David Tange, M.D.
Collaborative Agreement	<i>Sign Date & Initials</i> N/A	<i>Comments</i> N/A
Consent Form	<i>Sign Date & Initials</i> 1/15/2017 jap	<i>Comments</i>
Privilege Form	<i>Sign Date & Initials</i> 1/30/2017 jap	<i>Comments</i>
Quality Improvement Activities (payor requirement)	<i>Date & Initials</i>	<i>Comments</i>
Patient Complaints (payor requirement)	<i>Date & Initials</i>	<i>Comments</i>
CVO Review	<i>Date</i> 3/24/17	<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___		

<u>Plan of Action Tactics</u>	<u>Accountability</u>	<u>Start Date</u>	<u>Measures of Success</u>	<u>Interim Updates</u>	<u>Completed</u>	<u>Status</u>	<u>Jan</u>	<u>Feb</u>	<u>Mar</u>	<u>Apr</u>	<u>May</u>	<u>Jun</u>	<u>Jul</u>	<u>Aug</u>	<u>Sep</u>	<u>Oct</u>	<u>Nov</u>	<u>Dec</u>
Appointment of RCA Members	Counties	Dec-16	Appointment	Appointments - Marathon County: Supervisor E.J. Stark, Deputy Administrator Lance Leonard, Lincoln County: Nancy Bergstrom Corporation Counsel, Langlade County: Robin Stowe. E.J. Stark resigned and Marathon County appointed Chief Deputy Chad Billeb. Meeting dates are set for 2017.	2/14	Closed												
Appointment of NCCSP Board Members	Counties	Jan-17	Appointment	Marathon County Appointments have been recommended and confirmation. Sheriff Parks and County Supervisor Robinson resigned from the NCCSP Board in early 2017. Marathon County has appointed Theresa Wetzsteon, Marathon County's District Attorney in place of Sheriff Parks. The seat vacated by Supervisor Robinson was filled by Supervisor Rick Seefeldt.		Closed												
Annual Audit	NCCSP	Jan-17	Acceptance of annual audit by NCCSP Board and Counties	The audit was presented to the March 30, 2017 NCCSP Board meeting. Members of the RCA were invited to the audit presentation and provide copies of the audit documents. The RCA accepted the audit at their April 27th agenda to formally close the annual audit process.		Closed												
Policy Governance for the NCCSP Board	NCCSP	Jan-17	Policy Governance Document	A policy governance approach is recommended for the NCCSP Board to consider to delineate authorities of the NCCSP Board delegated to the CEO and decisions vested with the NCCSP Board. This approach will also provide a definition of Board end statements which align with the direction from the RCA. The Board will need to reconsider the Committee structure, especially as it relates to any potential governance change with Mount View Care Center. The Board held an Educational Presentation on policy governance at the March meeting and endorsed moving forward with exploring a Policy Governance approach. The Board will be digging into this endeavor as part of the June retreat.		Open Task												
Prepare Local Plan	NCCSP	Jan-17	Adopted 3 Year Local Plan	The Agreement requires the NCCSP Board to develop a 3 Year Local Plan to meet the needs of the Communities it serves. This project will have to be done in coordination with the RCA to establish a vision for an end product. At this time the work on this item has not begun.		Open Task												
Nursing Home Governance	NCCSP	Jan-17	Decision by Marathon County of the future of MVCC and a decision by both Marathon County and NCCSP on a management agreement with NCCSP	Marathon County has created a Mount View Care Center Committee to oversee the Strategic Plan development and Operational study of the nursing home. The Committee has been appointed by Marathon County with Supervisor Robinson as the Chair and meets monthly. The consultants have been hired and have been on site on two separate occasions for multiple days. Key individuals from Marathon County and NCHC have met to review and discuss some preliminary information with additional follow-up information and clarifications being worked on at this point. The assessment is being drafted and both deliverables appear to be on target for the July 1 deadline.		Open Task												

Plan of Action Tactics	Accountability	Start Date	Measures of Success	Interim Updates	Completed	Status	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Pool Management Governance	NCCSP	Jan-17	Decision by Marathon County of the future of the pool and by both Marathon County and NCCSP on a future management agreement with NCCSP	The NCCSP Board reviewed the pool project and endorsed a resolution in support of building a new pool to the Marathon County Board. The resolution expressed continued interest in managing a new facility if built. The North Central Health Foundation, Inc. offered to provide Leadership on gathering \$1.5M in support of the project from the community. The Marathon County Health & Human Services Committee recommended building a new pool at their May meeting with \$3M requirement of community support for the project. The full County Board will vote in September and there will be 4-6 months to line up community support before the final bonding vote later this year or in early 2018.		Open Task												
Create "arms-length" financial relationship between NCHC and MVCC	NCCSP	Jan-17	Separate financial statements and legal status	The CFO is currently working on the financial statement piece to enable 2017 financials to be completely separate between the 51.42 program and MVCC. Further consideration will be made on doing the same for the developmental disability programs.		Open Task												
Review of Bylaws	NCCSP	Jan-17	Adopted Amended Bylaws	The Board adopted an update to the Bylaws to make them contemporary with the new Tri-County Agreement at their January meeting.		Completed												
Develop Training Plan for each County	NCCSP	Feb-17	Adopted Annual Training Plan	Administration contacted each of the three County administrations to identify training needs on accessing and using NCHC services along with general support for skill enhancement for individual county departments sharing in the responsibility for our managed population. The process was initiated in a request to each County's Corporation Counsels. No requests were made at this time but NCHC will be open and willing to fulfill any future requests not contemplated at this time.		Closed												
CEO Selection Plan and Recommendation	NCCSP	Feb-17	Adopted Recruitment Plan	The RCA adopted a motion to start the CEO selection process by having the NCCSP Board appoint the selection committee and inviting them to attend the April RCA meeting to discuss the selection process. The NCCSP Board appointed the NCCSP Executive Committee as the selection committee. The RCA is set to discussed the process with the NCHC Executive Committee members at their April 27th meeting. Sue Matis has been assigned as the staff resource for the selection committee and RCA and is currently working with Brad Karger to develop the position description and compensation. The description is being sent to stakeholders for input and the next meeting on the topic will be June 9th. The RCA has provided input into the job description and forwarded it to the NCHC Executive Committee to finalize the recruitment and compensation plan for the RCA to approve. The NCHC Executive Committee meets to discuss this issue on June 28 and the RCA will meet again on July 14th.		Open Task												
Facility Use Agreements	NCCSP	Mar-17	Signed agreements with each of the three Counties	This initiative has not begun.		Open Task												
Develop Conflict Resolution Protocol	NCCSP	Apr-17	Board adoption of Conflict Resolution Protocol	The NCCSP Board reviewed the draft policy at their April meeting. Once reviewed it will be forwarded to County Administrations for each of the three Counties for input prior to final adoption of the NCCSP Board in May. Input from the three stakeholders will be received by the day prior to the Board meeting. The policy is slated for action at the May NCCSP meeting but is currently still be drafted with County input.		Open Task												
County Fund Balance Reconciliation	NCCSP	Apr-17	Fund Balance Presentation	Presented to the NCCSP Board for acceptance on March 30th.		Closed												

Plan of Action Tactics	Accountability	Start Date	Measures of Success	Interim Updates	Completed	Status	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Annual Report	NCCSP	May-17	Annual Report Release	The Annual Report will be presented to the NCCSP Board and will be prepared for release following the May meeting. Presented the annual report to Langlade County. Hard copies were sent to all three county board members.		Closed												
Review of Personnel Policies	NCCSP	Sep-17	Appropriate Policies Identified and Adopted	The NCCSP Board reviewed the Employee Compensation Policy and Administration Manual at their April meeting. The Employee Compensation Policy is the only personnel policy identified at this time to be reviewed and adopted by the NCCSP Board as a recommendation for approval by the RCA. The NCCSP Board adopted the policy and forwarded it to the RCA for consideration before the August 15th deadline. The RCA will now have to review and adopt the policy, with an recommended changes, prior to August 15th, and send the adopted policy back to the NCCSP Board for implementation.		Open Task												
Programs and Services Report	NCCSP	Bi-annually	RCA Accepts Report	The RCA will need to define the structure, substance and timing of this report.		Open Task												
Financial Review	NCCSP	Bi-annually	Meeting held between the County Finance Directors and CFO and follow-up items addressed	The CFO has reached out to each of the Finance Directors in the time before and following the audit to check-in. Nothing of significance to report.		Completed												
Annual Budget	RCA	Feb-17	Adopted Budget within Budgetary Direction of the RCA and NCCSP Board	The RCA has provided the 2018 budget guidelines and priorities. These were shared with the NCCSP Board and will be incorporated into the 2018 Budget development.		Open Task												
CEO Annual Work Plan	RCA	Feb-17	Adopted Work Plan	This documet serves as the work plan document.		Closed												
CEO Compensation Plan	RCA	Jun-17	Adopted Plan	To coincide with the CEO recruitment process but is required at least annually. The RCA will review this plan in July.		Open Task												
Bylaws of the RCA	RCA	Feb-17	Adopted Bylaws	Finalized at the February meeting		Closed												
Determine "Substantially Modify" Criteria and Application Structure	RCA	Feb-17	Agreed upon guidelines and Application process	Definition and adoption done at the February RCA meeting. The CEO and committee members will brief each of their committees/boards on the resolution of this item. The NCCSP Board reviewed this policy and guideline at their March meeting.		Closed												
Non-CEO Employee Compensation Plan	RCA	Mar-17	Adopted Plan	Compensation plan and policies sent to the RCA members for review and consideration. Will review in July and forward back to the NCCSP Board in August for Implementation.		Open Task												
Capital Improvement Policy	RCA	Mar-17	Develop comprehensive CIP Policy for NCCSP and RCA adoption	No activity on this initiative to report.		Open Task												
CEO Appraisal Process Design	RCA	Mar-17	Written Assessment Process and Documents	No activity on this initiative to report.		Open Task												
Performance Standards	RCA	Mar-17	Adopted Annual Performance Standards	There has been work with the RCA on the performance standards over the last 6 weeks. NCHC staff will present a final list based on the discussion for the RCA to review and approve.		Open Task												
Reserve Policy Review	RCA	Apr-17	CFO will have County Finance Directors review, NCCSP and RCA approval	No activity on this initiative to report.		Open Task												
Selection of NCCSP Auditor	RCA	Apr-17	RFP and selecion of auditing firm	The RCA approved the RFP for auditing services at their May 19th meeting and it will be released the week of May 22nd. Proposals are due back at the end of June. The RCA will receive an analysis and recommendation from NCHC staff in July and will make a decision on the selection of the auditing firm at their July 27th meeting.		Open Task												
Tri-County Contral Annual Review	RCA	Oct-17	Revision Recommendation to County Boards if necessary	No activity on this initiative to report.		Open Task												