

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

A meeting of the North Central Community Services Program Board will be held at NCHC – Wausau Board Room, 1100 Lake View Drive, Wausau, WI, at 12:00 p.m., on Thursday, August 27, 2015.

(In addition to attendance in person at the location described above, Committee 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 by 24 hours prior to the meeting start time for further instructions.)

AGENDA

1. Call to order
2. Roll call
3. Consent Agenda
 - a. July financial statements
 - b. 7/30/15 Finance, Personnel & Property Committee meeting minutes
 - c. 7/30/15 Board meeting minutes
4. Chairperson's report: R. Nye
 - a. Action: approve report and minutes of the 8/3/15 Executive Committee meeting
5. Quality Committee report: L. Scudiere
 - a. Organizational Quality Dashboard
 - b. Action: approve report and minutes of the 7/23/15 Quality Committee meeting
 - c. Joint Commission update
6. Financial report: B. Glodowski
7. Finance, Personnel & Property Committee report: L. Olkowski
 - a. Action: approve pharmacy packaging system
 - b. Action: approve report
8. Human Services Operations Committee (HSOC) report: J. Robinson
 - a. Action: approve report and minutes of the 7/16/15 HSOC meeting
9. Nursing Home Operations Committee (NHOC) report: J. Robinson
 - a. Action: approve report and minutes of the 7/24/15 NHOC meeting
10. Medical Staff
 - a. Action: approve appointments for:
 - Brian D. Smith, M.D., Medical Director
 - Jean Lee Baribeau-Anaya, PA-C, Mid-Level Provider, Locum Tenens
11. Mental health services to the criminal justice system update
12. Psychiatry residency program update
13. Strategic Planning - finalize strategies: G. Bezucha
14. Discussion: Developing formal process for communication with Marathon, Lincoln and Langlade Counties
15. Discussion: Access to services
16. Future meeting agendas
17. Adjourn

- Action may be taken on any agenda item.
- In the event that any individuals attending this meeting may constitute a quorum of another governmental body, the existence of the quorum shall not constitute a meeting as no action by such body is contemplated.

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

COPY OF NOTICE DISTRIBUTED TO:

Wausau Daily Herald Antigo Daily Journal
Tomahawk Leader Merrill Foto News
Langlade, Lincoln & Marathon County Clerk Offices
DATE 08/21/15 TIME 4:00 PM
VIA: FAX MAIL BY: D. Osowski

THIS NOTICE POSTED AT NORTH CENTRAL HEALTH CARE

DATE 08/21/15 Time 4:00 PM By D. Osowski
Anyone attending this meeting who needs some type of special accommodation in order to participate should call Administration at 715-848-4405. For TDD telephone service, call 715-845-4928.



MEMO

TO: North Central Health Care Finance Committee
FROM: Brenda Glodowski
DATE: August 21, 2015
RE: Attached Financials

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

BALANCE SHEET

The Balance Sheet items continue to remain consistent with prior months.

STATEMENT OF REVENUE AND EXPENSES

The month of July shows a loss of (\$427,189) compared to a budgeted loss of (\$9,938) resulting in a negative variance of (\$417,252).

The hospital census decreased a bit from the prior month, averaging just under 14 per day. This still exceeds the target of 13 per day. The nursing home census improved over the prior month averaging 206 per day. The target is 213. The Medicare census also showed improvement averaging 21 per day. The target for this is 26. Outpatient areas showed some improvement, but some are still below targets.

Revenues, overall, for July were close to target. The expenses, however, exceeded budget targets, which is 'causing' the loss for July. Health insurance and State institutes are the two largest areas of variance. Health insurance exceeded target by \$214,000 and the State institutes exceeded target by about \$150,000. There were additional expenses added in July to assist with the jail services. The estimate of these additional expenses is \$20,000. Other areas that were high are food, drugs, and contract services. Contract services are running high due to increased maintenance agreements and contracted staff in the nursing home due to management changes.

Through July, the overall organization shows a gain of \$1,148,191 compared to a targeted gain of \$190,142. Overall, the organization is ahead of target by \$958,049.

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

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

	<u>51.42/.437</u> <u>PROGRAM</u>	NURSING <u>HOME</u>	<u>TOTAL</u>	<u>TOTAL</u> <u>31-Jul-14</u>
CURRENT ASSETS:				
CASH AND EQUIVALENTS	5,730,146	(1,485)	5,728,661	4,896,348
SHORT-TERM INVESTMENTS	9,300,000		9,300,000	6,647,178
CASH FOR APPROVED CAPITAL PURCHASES	1,747,239	397,427	2,144,665	1,652,823
DONATED FUNDS	231,481		231,481	126,803
ACCOUNTS RECEIVABLE:				
PATIENT (NET)	3,479,071	4,175,882	7,654,953	6,767,754
STATE GRANTS	1,681,643		1,681,643	152,035
OTHER	979,647		979,647	495,644
APPROPRIATIONS RECEIVABLE	56,039		56,039	2,758,020
AMOUNTS RECEIVABLE FROM THIRD-PARTY REIMBURSEMENT PROGRAMS	426,833	69,257	496,090	714,545
INVENTORY	16,920	256,902	273,822	331,005
OTHER	<u>432,792</u>	<u>64,904</u>	<u>497,696</u>	<u>509,495</u>
TOTAL CURRENT ASSETS	<u>24,081,810</u>	<u>4,962,887</u>	<u>29,044,697</u>	<u>25,051,650</u>
CAPITAL ASSETS				
CAPITAL ASSETS	30,301,158	14,682,894	44,984,052	42,892,226
ACCUMULATED DEPRECIATION	<u>(22,515,493)</u>	<u>(10,805,775)</u>	<u>(33,321,268)</u>	<u>(31,677,750)</u>
CAPITAL ASSETS - NET	<u>7,785,665</u>	<u>3,877,119</u>	<u>11,662,784</u>	<u>11,214,476</u>
OTHER ASSETS - DEFERRED CHARGES	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
RESTRICTED ASSETS - PATIENT TRUST FUNDS	<u>21,415</u>	<u>55,514</u>	<u>76,930</u>	<u>255,568</u>
TOTAL ASSETS	<u>31,888,891</u>	<u>8,895,521</u>	<u>40,784,410</u>	<u>36,521,693</u>

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

	<u>51.42/.437 PROGRAM</u>	<u>NURSING HOME</u>	<u>TOTAL</u>	<u>TOTAL 31-Jul-14</u>
CURRENT LIABILITIES:				
ACCOUNTS PAYABLE	3,914,789	0	3,914,789	3,485,642
THIRD PARTY PAYABLE	425,214	0	425,214	538,860
APPROPRIATIONS ADVANCES	1,348,858	0	1,348,858	33,213
ACCRUED LIABILITIES:				
SALARIES & RETIREMENT	1,382,673	0	1,382,673	1,374,283
PAYROLL TAXES AND WITHHOLDING	161,981	0	161,981	170,683
COMPENSATED ABSENCES	1,595,729	0	1,595,729	1,592,062
OTHER PAYABLES	72,806	0	72,806	74,611
DEFERRED REVENUE - STATE GRANTS	<u>188,560</u>	<u>0</u>	<u>188,560</u>	<u>271,761</u>
TOTAL CURRENT LIABILITIES	<u>9,090,611</u>	<u>0</u>	<u>9,090,611</u>	<u>7,541,115</u>
PATIENT TRUST FUNDS	<u>21,415</u>	<u>55,514</u>	<u>76,930</u>	<u>255,348</u>
NET ASSETS:				
INVESTED IN CAPITAL ASSETS	7,785,665	3,877,119	11,662,784	11,214,476
UNRESTRICTED	13,851,505	4,954,391	18,805,896	17,442,533
OPERATING INCOME(LOSS)	<u>1,139,694</u>	<u>8,497</u>	<u>1,148,191</u>	<u>68,219</u>
TOTAL NET ASSETS	<u>22,776,864</u>	<u>8,840,007</u>	<u>31,616,871</u>	<u>28,725,229</u>
TOTAL LIABILITIES AND NET ASSETS	<u>31,888,891</u>	<u>8,895,521</u>	<u>40,784,410</u>	<u>36,521,693</u>

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

TOTAL	<u>CURRENT MONTH ACTUAL</u>	<u>CURRENT MONTH BUDGET</u>	<u>CURRENT MONTH VARIANCE</u>	<u>YTD ACTUAL</u>	<u>YTD BUDGET</u>	<u>YTD VARIANCE</u>
REVENUE						
Net Patient Service Revenue	<u>\$3,482,658</u>	<u>\$3,526,150</u>	<u>(\$43,492)</u>	<u>\$23,941,664</u>	<u>\$24,122,254</u>	<u>(\$180,590)</u>
OTHER REVENUE						
State Match / Addendum	325,060	325,120	(59)	2,275,422	2,275,838	(416)
Grant Revenue	196,564	184,113	12,451	1,342,270	1,288,173	54,097
County Appropriations - Net	736,232	730,192	6,040	5,153,627	5,111,345	42,283
Departmental and Other Revenue	<u>182,161</u>	<u>180,658</u>	<u>1,502</u>	<u>1,232,118</u>	<u>1,264,608</u>	<u>(32,491)</u>
Total Other Revenue	<u>1,440,017</u>	<u>1,420,083</u>	<u>19,935</u>	<u>10,003,436</u>	<u>9,939,964</u>	<u>63,473</u>
TOTAL REVENUE	4,922,676	4,946,234	(23,557)	33,945,101	34,062,218	(117,117)
EXPENSES						
Direct Expenses	3,919,124	3,544,633	374,491	24,165,762	24,070,458	95,304
Indirect Expenses	<u>1,445,812</u>	<u>1,419,039</u>	<u>26,774</u>	<u>8,703,617</u>	<u>9,854,117</u>	<u>(1,150,500)</u>
Total Expenses	<u>5,364,936</u>	<u>4,963,671</u>	<u>401,265</u>	<u>32,869,379</u>	<u>33,924,575</u>	<u>(1,055,196)</u>
Operating Income (Loss)	<u>(442,261)</u>	<u>(17,438)</u>	<u>(424,823)</u>	<u>1,075,721</u>	<u>137,642</u>	<u>938,079</u>
Nonoperating Gains (Losses):						
Interest Income	6,679	7,500	(821)	42,438	52,500	(10,062)
Donations and Gifts	5,392	0	5,392	27,032	0	27,032
Gain / (Loss) on Disposal of Assets	<u>3,000</u>	<u>0</u>	<u>3,000</u>	<u>3,000</u>	<u>0</u>	<u>3,000</u>
Total Nonoperating Gains / (Losses)	<u>15,071</u>	<u>7,500</u>	<u>7,571</u>	<u>72,470</u>	<u>52,500</u>	<u>19,970</u>
Operating Income / (Loss)	<u>(\$427,189)</u>	<u>(\$9,938)</u>	<u>(\$417,252)</u>	<u>\$1,148,191</u>	<u>\$190,142</u>	<u>\$958,049</u>

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

	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>
51.42/.437 PROGRAMS						
REVENUE						
Net Patient Service Revenue	<u>\$1,417,993</u>	<u>\$1,484,469</u>	<u>(\$66,475)</u>	<u>\$9,982,222</u>	<u>\$10,050,181</u>	<u>(\$67,958)</u>
OTHER REVENUE						
State Match / Addendum	325,060	325,120	(59)	2,275,422	2,275,838	(416)
Grant Revenue	196,564	184,113	12,451	1,342,270	1,288,173	54,097
County Appropriations - Net	594,566	588,525	6,041	4,161,964	4,119,678	42,286
Departmental and Other Revenue	<u>141,358</u>	<u>145,825</u>	<u>(4,467)</u>	<u>931,928</u>	<u>1,020,776</u>	<u>(88,847)</u>
Total Other Revenue	<u>1,257,549</u>	<u>1,243,583</u>	<u>13,966</u>	<u>8,711,584</u>	<u>8,704,464</u>	<u>7,120</u>
TOTAL REVENUE	2,675,543	2,728,052	(52,509)	18,693,807	18,754,645	(60,838)
EXPENSES						
Direct Expenses	2,209,195	1,960,546	248,648	13,196,739	13,221,372	(24,634)
Indirect Expenses	<u>778,628</u>	<u>781,803</u>	<u>(3,176)</u>	<u>4,425,436</u>	<u>5,429,016</u>	<u>(1,003,580)</u>
Total Expenses	<u>2,987,823</u>	<u>2,742,350</u>	<u>245,473</u>	<u>17,622,175</u>	<u>18,650,388</u>	<u>(1,028,213)</u>
Operating Income (Loss)	<u>(312,280)</u>	<u>(14,298)</u>	<u>(297,982)</u>	<u>1,071,632</u>	<u>104,257</u>	<u>967,375</u>
Nonoperating Gains (Losses):						
Interest Income	6,679	7,500	(821)	42,438	52,500	(10,062)
Donations and Gifts	4,468	0	4,468	22,624	0	22,624
Gain / (Loss) on Disposal of Assets	<u>3,000</u>	<u>0</u>	<u>3,000</u>	<u>3,000</u>	<u>0</u>	<u>3,000</u>
Total Nonoperating Gains / (Losses)	<u>14,147</u>	<u>7,500</u>	<u>6,647</u>	<u>68,062</u>	<u>52,500</u>	<u>15,562</u>
Operating Income / (Loss)	<u>(\$298,133)</u>	<u>(\$6,798)</u>	<u>(\$291,335)</u>	<u>\$1,139,694</u>	<u>\$156,757</u>	<u>\$982,937</u>

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

NURSING HOME	<u>CURRENT MONTH ACTUAL</u>	<u>CURRENT MONTH BUDGET</u>	<u>CURRENT MONTH VARIANCE</u>	<u>YTD ACTUAL</u>	<u>YTD BUDGET</u>	<u>YTD VARIANCE</u>
REVENUE						
Net Patient Service Revenue	<u>\$2,064,665</u>	<u>\$2,041,681</u>	<u>\$22,983</u>	<u>\$13,959,442</u>	<u>\$14,072,073</u>	<u>(\$112,632)</u>
OTHER REVENUE						
County Appropriations - Net	141,666	141,667	(1)	991,663	991,667	(4)
Departmental and Other Revenue	<u>40,802</u>	<u>34,833</u>	<u>5,969</u>	<u>300,189</u>	<u>243,833</u>	<u>56,356</u>
Total Other Revenue	<u>182,468</u>	<u>176,500</u>	<u>5,968</u>	<u>1,291,852</u>	<u>1,235,499</u>	<u>56,353</u>
TOTAL REVENUE	2,247,132	2,218,181	28,952	15,251,294	15,307,573	(56,279)
EXPENSES						
Direct Expenses	1,709,929	1,584,086	125,843	10,969,024	10,849,086	119,938
Indirect Expenses	<u>667,184</u>	<u>637,235</u>	<u>29,949</u>	<u>4,278,181</u>	<u>4,425,101</u>	<u>(146,920)</u>
Total Expenses	<u>2,377,114</u>	<u>2,221,322</u>	<u>155,792</u>	<u>15,247,205</u>	<u>15,274,187</u>	<u>(26,983)</u>
Operating Income (Loss)	<u>(129,982)</u>	<u>(3,140)</u>	<u>(126,840)</u>	<u>4,089</u>	<u>33,385</u>	<u>(29,296)</u>
Nonoperating Gains (Losses):						
Interest Income	0	0	0	0	0	0
Donations and Gifts	925	0	925	4,408	0	4,408
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>925</u>	<u>0</u>	<u>925</u>	<u>4,408</u>	<u>0</u>	<u>4,408</u>
Operating Income / (Loss)	<u>(\$129,057)</u>	<u>(\$3,140)</u>	<u>(\$125,917)</u>	<u>\$8,497</u>	<u>\$33,385</u>	<u>(\$24,889)</u>

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

BANK	LENGTH	MATURITY DATE	INTEREST RATE	AMOUNT
People's State Bank	365 Days	08/21/2015	0.45%	\$500,000
Abby Bank	365 Days	08/29/2015	0.45%	\$500,000
CoVantage Credit Union	456 Days	10/01/2015	0.65%	\$500,000
People's State Bank	365 Days	10/30/2015	0.50%	\$500,000
Abby Bank	365 Days	10/29/2015	0.55%	\$500,000
River Valley Bank	365 Days	12/27/2015	0.50%	\$500,000
CoVantage Credit Union	365 Days	12/28/2015	0.599%	\$300,000
Abby Bank	365 Days	12/30/2015	0.55%	\$500,000
Abby Bank	183 Days	01/05/2016	0.65%	\$500,000
Abby Bank	730 Days	02/25/2017	0.80%	\$500,000
People's State Bank	365 Days	02/28/2016	0.45%	\$250,000
Abby Bank	365 Days	03/15/2016	0.65%	\$400,000
People's State Bank	365 Days	04/29/2016	0.50%	\$350,000
People's State Bank	365 Days	04/30/2016	0.50%	\$500,000
Abby Bank	365 Days	05/03/2016	0.50%	\$500,000
BMO Harris	395 Days	05/28/2016	0.30%	\$500,000
Abby Bank	365 Days	07/19/2016	0.75%	\$500,000
BMO Harris	395 Days	08/26/2016	0.50%	\$500,000
Abby Bank	456 Days	09/01/2016	0.95%	\$500,000
CoVantage Credit Union	456 Days	09/01/2016	1.00%	\$500,000
TOTAL FUNDS AVAILABLE				\$9,300,000
WEIGHTED AVERAGE	392.74 Days		0.594% INTEREST	

NCHC-DONATED FUNDS

Balance Sheet

As of July 31, 2015

ASSETS

Current Assets

Checking/Savings

CHECKING ACCOUNT

Adult Day Services	4,567.35
Adventure Camp	896.14
AODA Day Services	-754.62
Birth to 3 Program	2,035.00
Clubhouse	105,790.10
Community Services - M/H	1,807.10
CSP	-492.15
Fishing Without Boundries	2,913.00
General Donated Funds	71,001.99
Housing - DD Services	1,370.47
Langlade HCC	3,103.80
Legacies by the Lake	
Music in Memory	1,922.90
Legacies by the Lake - Other	4,199.12
Total Legacies by the Lake	6,122.02
Lincoln County CSP	-175.00
Marathon Cty Suicide Prev Task	5,348.02
National Suicide Lifeline Stipe	3,176.37
Northern Valley West	1,966.00
Northwoods Alliance	8,752.92
Nursing Home - General Fund	3,050.33
Outpatient Services - Marathon	101.08
Pool	8,107.72
Prevent Suicide Langlade Co.	1,543.55
Suicide Prevention Walk	750.00
United Way	350.05

Total CHECKING ACCOUNT 231,331.24

Total Checking/Savings 231,331.24

Accounts Receivable

Accounts Receivable 166.00

Total Accounts Receivable 166.00

Total Current Assets 231,497.24

TOTAL ASSETS 231,497.24

LIABILITIES & EQUITY

Equity

Opening Bal Equity 123,523.75

Retained Earnings 59,745.02

Net Income 48,228.47

Total Equity 231,497.24

TOTAL LIABILITIES & EQUITY 231,497.24

North Central Health Care Budget Revenue/Expense Report

Month Ending July 31, 2015

ACCOUNT DESCRIPTION	CURRENT MONTH ACTUAL	CURRENT MONTH BUDGET	YTD ACTUAL	YTD BUDGET	DIFFERENCE
<u>REVENUE:</u>					
TOTAL NET REVENUE	4,922,676	4,946,234	33,945,101	34,062,218	(117,117)
<u>EXPENSES:</u>					
Salaries and Wages	2,351,234	2,489,055	15,924,055	16,788,825	(864,770)
Fringe Benefits	1,135,772	1,013,181	6,164,428	6,834,202	(669,774)
Departments Supplies	537,877	432,217	3,393,030	3,019,017	374,013
Purchased Services	369,489	273,725	2,170,697	1,957,075	213,622
Utilitites/Maintenance Agreements	420,406	306,644	2,143,063	2,183,509	(40,446)
Personal Development/Travel	27,227	40,350	218,392	282,450	(64,058)
Other Operating Expenses	136,547	172,988	789,215	1,210,918	(421,703)
Insurance	45,242	48,258	294,966	337,808	(42,842)
Depreciation & Amortization	138,592	137,253	1,001,719	960,771	40,948
Client Purchased Services	<u>199,549</u>	<u>50,000</u>	<u>769,814</u>	<u>350,000</u>	<u>419,814</u>
TOTAL EXPENSES	5,361,936	4,963,671	32,869,379	33,924,575	(1,055,197)
EXCESS REVENUE (EXPENSE)	(439,261)	(17,438)	1,075,721	137,642	938,079

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

	<u>Current Month</u>	<u>Current Year To Date</u>	<u>Prior Year To Date</u>
<i>Inpatient:</i>			
Administrative Write-Off	\$10,016	\$21,289	\$2,900
Bad Debt	\$443	\$1,718	\$2,983
<i>Outpatient:</i>			
Administrative Write-Off	\$9,500	\$50,474	\$5,815
Bad Debt	\$775	\$5,558	\$19,450
<i>Nursing Home:</i>			
Daily Services:			
Administrative Write-Off	\$1,163	\$3,646	\$6,860
Bad Debt	(\$806)	\$22,494	\$1,662
Ancillary Services:			
Administrative Write-Off	\$3,615	\$25,287	\$3,320
Bad Debt	\$120	\$120	\$676
Pharmacy:			
Administrative Write-Off		\$0	\$0
Bad Debt		\$0	\$0
Total - Administrative Write-Off	\$24,294.28	\$100,697.15	\$18,895.00
Total - Bad Debt	\$532.51	\$29,889.38	\$24,771.00

**North Central Health Care
2015 Patient Days**

<u>Month</u>		<u>Budget</u>	<u>Actual</u>	<u>Variance</u>	<u>Budgeted Occupancy</u>	<u>Actual Occupancy</u>
January	Nursing Home	6,603	6,500	(103)	88.75%	87.37%
	Hospital	403	403	0	81.25%	81.25%
February	Nursing Home	5,964	6,007	43	88.75%	89.39%
	Hospital	364	446	82	81.25%	99.55%
March	Nursing Home	6,603	6,607	4	88.75%	88.80%
	Hospital	403	439	36	81.25%	88.51%
April	Nursing Home	6,390	6,162	(228)	88.75%	85.58%
	Hospital	390	403	13	81.25%	83.96%
May	Nursing Home	6,603	6,301	(302)	88.75%	84.69%
	Hospital	403	440	37	81.25%	88.71%
June	Nursing Home	6,390	6,115	(275)	88.75%	84.93%
	Hospital	390	420	30	81.25%	87.50%
July	Nursing Home	6,603	6,380	(223)	88.75%	85.75%
	Hospital	403	428	25	81.25%	86.29%
August	Nursing Home Hospital					
September	Nursing Home Hospital					
October	Nursing Home Hospital					
November	Nursing Home Hospital					
December	Nursing Home Hospital					

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

	Target	January	February	March	April	May	June	July	August	September	October	November	December	YTD
Days Cash On Hand:														
Invested	70	61	62	62	60	61	62	60						61
Operating		48	36	33	47	46	46	40						44
Total		109	98	95	107	107	108	100						105
Average Daily Census:														
Nursing Home	213	210	215	213	205	203	204	206						208
Hospital	13	13	16	14	13	14	14	14						14
Days in Accounts Receivable:**	55-60 days	80	79	75	72	71	67	67						67
Direct Expense/Gross Patient Revenue**	55%-59%	61%	51%	59%	62%	65%	60%	65%						60%
Write Offs**	.5%-.6%	0.18%	0.27%	0.32%	0.16%	0.59%	0.42%	0.46%						0.34%
Excess Revenue (Expense):														
Actual		\$10,895	\$590,281	\$28,969	\$107,200	\$287,468	\$550,567	(\$427,189)						\$1,148,191
Budget		\$56,970	\$117,322	(\$12,015)	\$57,582	(\$82,354)	\$62,582	(\$9,938)						\$190,144
Prior Year-Actual		\$124,183	\$12,296	\$31,615	(\$294,589)	(\$17,820)	\$258,622	(\$46,087)						\$68,220

**Dash Board Outcomes

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

July 30, 2015

11:00 a.m.

NCHC – Wausau Campus

Present:

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

Also Present: Gary Bezucha, Brenda Glodowski, Michael Loy, Debbie Osowski

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

Minutes

Motion/second, Nye/Zriny, to approve the minutes of the 6/25/15 Finance, Personnel & Property Committee meeting. Motion carried.

Financials

- Revenues:
 - Overall the organization shows a gain of approximately \$551,000; both nursing home and human services operations have a year to date gain of over \$1.5 million.
 - Cash is doing well.
 - Hospital average census was over 14; target is 13
 - Nursing Home picked up slightly to 204; target is 213
 - Medicare census averaged 19 per day
 - Picked up \$125,000 of revenue due to Jan-May review/reconciliation; have excellent reports coming together finally with all systems talking to one another.
 - Have noticed a change in payer mix which has increased revenue; slight increase in the rehab area due to the change in rehab services
- Expenses:
 - Expenses were down overall
 - Health insurance had a good month in June with a slight spike noticed so far for July.
 - Expenses for state institutes are high
- Write-off's spiked slightly but are still below target
- Committee members would like to provide information to County Board members so they may have a better understanding of NCHC and the financial operations. John Robinson will provide quarterly reports to the Health & Human Services Committee.

Motion/second, Zriny/Nye to approve the June financial statements. Motion carried.

CFO Report

- Items are included below

Accounts Receivable Update

- Days in Accounts Receivable dropped by three days.

Budget Update

- Wisconsin Retirement System mandatory contributions will be dropping by .2% for employees and employers.
- Received early estimates for supplemental payment for a potential decrease of \$260,000.
- Several new items will be included in budget i.e. the pilot of services for the jail, expansion of mobile crisis in all three counties.
- Committee suggested preparing a 'status quo' budget until more definitive decisions are received by counties.
- Budget must be completed early October.

Overview of Changes to Paid Leave Time Policy

- Proposed changes to current Paid Leave Time (PLT) policy include:
 - Offering a pay-out annually (in Sept.) of 16-40 hours of PLT leaving a PLT bank of not below 80 hours; eliminating the PLT maximum during the year (currently 240 hours) allowing for more versatility in using PLT however, a maximum of 240 hours would be carried from one year to the next (the last payroll of the year)
 - Employees, while on PLT and then being called into work, would receive PLT pay and pay for working.
- **Motion**/second, Robinson/Weaver, to approve changes to the Paid Leave Time policy. Motion carried.

Potential settlement on lease dispute

- A summary of the history for the lease dispute was provided.
- Has been in legal dispute for two years.
- Potential exposure is \$175,000.

2016 Employee Health Insurance Options

- Health Insurance Consortium will not be an option for next year.
- Reviewing long term strategies (3-5 years) for managing costs and continuing to provide an excellent benefit to employees.
- Changes will have minor impact, similar costs, and will streamline the plan i.e. 3-tier to 2-tier plan; HSA rather than HRA, etc.
- Final plan changes will be brought back to Committee for approval.

Future Agendas

- Education to county board
- Education to other service organizations and community awareness

Motion/second, Zriny/Weaver, to adjourn the meeting at 12:00 p.m. Motion carried.

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

July 30, 2015

12:00 p.m.

NCHC – Wausau Board Room

Present:

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

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

Consent Agenda

- **Motion**/second, Zriny/Penniman, to approve the consent agenda which includes the May and June financial statements, 5/28/15 and 6/25/15 Finance, Personnel & Property Committee meeting minutes, 5/28/15, 6/25/15, and 7/9/15 Board meeting minutes, 6/9/15 Executive Committee meeting minutes, 5/21/15 Quality Committee meeting minutes, 4/24/15 and 5/22/15 Nursing Home Operations Committee meeting minutes, and the CEO report. Motion carried.

Final Strategies Report

- It was agreed that #4 Final Strategies Report with Schafer Consulting would begin at 12:30 p.m.

Chairperson's report

- There was no quorum at the most recent Executive Committee meeting

Quality Committee report

- Committee discussed outcome data i.e. due to an outbreak of norovirus-like symptom there was an uptick in adverse events, committee felt appropriate action was taken on the sentinel events, emergency operations plan was reviewed, discussed compliance auditing to verify timely documentation and appropriate billing which will be monitored for the committee's review.
- Jean Burgener and Laura Scudiere met with the Joint Commission reviewers during the survey. Joint Commission reviewers shared that staff were informative, enthusiastic, agreed with the mission of NCHC, and are innovative. This is a high commendation as Joint Commission is a leader in quality care for health care.
 - Two reports must now be completed and filed; one is due in 45 days and the other in 60 days. The 45 day reports have been completed and the 60 day reports should be submitted by 7/31/15.

- Joint Commission engineer returned last week and verified the corrections on the physical findings
- Organizational Quality Dashboard was reviewed
 - Days in accounts receivable are improving.
 - NCHC Access Measure has dropped due to staff vacancies affecting the ability to meet timelines on first appointments. Recruitment efforts are diligent.
 - Concern expressed about the declining percentile rank on client/patient/resident satisfaction. Senior Executive Team is working with the external vendor to better understand the survey results, how to put actions into place to drive improvement, and has launched a process improvement plan around service excellent to drive this process. Leadership has also been asked for input.
 - Quality Committee will continue to review the data, the process, the format data is being presented in, etc.
- **Motion**/second, Olkowski/Rusch, to approve the Quality Committee report. Motion carried.

Final Strategies Report with Schafer Consulting

- Steve Schafer and Neil Shapiro presented the Final Strategies Report
- The Board was asked to review the findings of the report and be prepared for in-depth discussion at the August 27 meeting of the Board i.e. align the strategies for the management team to pursue, create a 3-5 year work plan, identify strengths and weaknesses, etc.
- Schafer Consulting to provide:
 - information about how Sentara Healthcare, Virginia, uses telemedicine almost exclusively
 - All detail reports that support findings

Financial report

- June showed a gain over \$550,000.
- Revenues exceeded targets; increased \$125,000 due to reconciliation process; and revenue from hospital exceeded targets.
- Nursing home improved slightly from prior month.
- June expenses remain below target.
- Year to date shows \$1.6 million ahead of target.

Finance, Personnel & Property Committee report

- Days in Accounts Receivable continues to decrease.
- The county is changing expectations around budgeting but we will complete the budget based on historical practice and revise later if needed.
- Approved changes to the Paid Leave Time (PLT) policy i.e. currently employees have a PLT limit enforced bi-weekly which will be moved to an annual limit.
- Potential 2016 employee health insurance options were discussed. Action by the Committee will be considered with a final proposal.

Human Services Operation Committee Report

- A presentation of the Community Corner Clubhouse was provided; services provided collaboratively with staff and consumers.
- Sheriff Parks mentioned the jail has seen a benefit from services NCHC is providing and has a better understanding of NCHC services.
- Due to a system breakdown at the federal level receipt of the approved J1 Visa, necessary for our new psychiatric to begin working, has been delayed.
- Construction of a new aquatic therapy pool went through CIP last week, will be considered by the Health & Human Services Committee next. Effort is to move the design component into the CIP budget for next year. Concern expressed with the timing of the process with contingencies on several donations.

Nursing Home Operations Committee Report

- Committee is focusing on the 5 Star Rating, upcoming survey, working diligently with transparency with the county board, and the replacement of leadership staff.
- A sincere thank you to Gretchen for her time and service to the organization.
- DON vacancy will be filled following the hire of an administrator to allow the new administrator's involvement in the selection of a very important individual on their team.
- **Motion**/second, Burgener/Scudiere, to approve the 6/26/15 and 7/9/15 Nursing Home Operations Committee minutes and report. Motion carried.
- A contract with Catalyst Health care has been signed; Lori Koepfel will assist with management of the nursing home, preparations for the anticipated annual survey, etc.

Mental health services to the criminal justice system update

- Following the criticisms NCHC received several months ago over the services provided to the jail, resources have been applied in an effort to improve the services.
- Feedback provided by the Marathon County Sheriff's department has indicated they have a high satisfaction with NCHC. He indicated we have such a comprehensive array of services for inmates that probably can't be found anywhere else in the State.
- All parties have indicated we are truly making a difference and impact in this patient population and are providing services at an entirely new level.
- Being a pilot project, continued assessment will be completed, and if successful the same type of services will be provided in Langlade and Lincoln Counties as well.
- If project is to continue, costs will need to be built into the 2016 budget for all three counties.
- Mobile Crisis services will be increased in each of the counties which will also increase costs for 2016.
- It was suggested to invite Jail and Sheriff's Dept. personnel to a board meeting as a means of positive communication between organizations.
- Marathon County Board members were asked if they have heard feedback about the changes to services to the jail. Only one of three members indicated they have heard positive feedback.

- Important to note that NCHC responded immediately to concerns. Since this issue came to light in the media, it was mentioned that we also need to say what work has been accomplished.

Psychiatry residency program update

- All required stipends have been identified.
- A summit meeting of all partners is being organized for the end of August.
- Application being submitted in September.
- A site visit should occur before the end of 2015 with accreditation early 2016 in order to participate in a match in 2016.
- On track to accept the first three residents in July 2017.

Motion/second, Scudiere/Olkowski, to adjourn the meeting at 2:11 p.m. Motion carried.

Minutes prepared by Debbie Osowski, Executive Assistant

NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD EXECUTIVE COMMITTEE MEETING MINUTES

August 3, 2015

10:30 AM

NCHC – Wausau Campus

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

ALSO PRESENT: Gary Bezucha

AGENDA:

1. The meeting was called to order by Ron Nye at 10:36 AM and a quorum was noted.
2. Minutes of 6/9/15 meeting of the Executive Committee: moved by Bob Weaver for approval, second by Laura Scudiere, and the minutes were approved unanimously without changes.
3. CEO Report: Deferred as all issues to be covered are on the agenda
4. Parliamentary procedure: Discussion regarding board approval of minutes of standing committees before they are approved by the standing committees. Recommendation: minutes of standing committees will continue to be approved by the board without prior approval by the standing committee. They may be amended at the board meeting.
5. Positive Communications to the community: Recommended that a formal communications plan be developed that provides the community with an accurate picture of NCHC and the work that we do.
6. Update on Nursing Home renovation project: No update
7. Update on mental health services to jails: Pilot program in Marathon County jail going very well; Sheriff's Department and jail staff are very satisfied. Working on development of a plan to expand the pilot to permanent service in all three counties. Acknowledged that expansion of the pilot to a permanent service in all three counties will have a cost associated with it that will likely result in increased need for tax levy from all three counties.
8. Follow up meeting with Marathon County Health and Human Services Committee: Need was identified to continue such a dialogue and expand it to all three counties.
9. Follow up on strategic plan: One hour at next board meeting will be set aside for discussion to get consensus on which elements of the draft strategic plan will be supported over the next 3-5 years. Gary to facilitate the discussion.
10. Moved for adjournment by Bob Weaver, seconded by Laura Scudiere. The meeting was adjourned by Ron Nye at 11:45 AM.

QUALITY OUTCOME DASHBOARD

DEPARTMENT: NORTH CENTRAL HEALTH CARE

FISCAL YEAR: 2015

PRIMARY OUTCOME GOAL	Continuous Improvement Target	Benchmark	↑ ↓	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD	2014
CLINICAL																	
Nursing Home Readmission Rate	11-13%	18.2%	↓	24.2%	13.8%	9.1%	11.1%	16.1%	18.5%	0.0%						13.8%	11.5%
Psychiatric Hospital Readmission Rate	9-11%	16.1%	↓	11.0%	9.3%	12.7%	7.1%	17.2%	10.7%	12.8%						11.6%	10.0%
AODA Relapse Rate	18-21%	40-60%	↓	17.9%	25.0%	26.7%	15.4%	30.0%	20.8%	26.3%						22.7%	20.8%
NCHC Adverse Event Rate	3.8-4.0	4.1	↓	3.5	4.1	4.3	4.0	3.8	3.7	4.8						4.0	4.1
PEOPLE																	
Injury Claims*	50-60	78.95	↓	24	18	24	24	22	20	22						22	n/a
Employee Turnover Rate*	20-23%	17%	↓	21.0%	20.2%	18.4%	19.4%	20.3%	22.6%	23.4%						23.4%	25.5%
SERVICE																	
Client/Patient/ Resident Satisfaction Percentile Rank	58-66 Percentile	58-66 Percentile	↑	66th	70th	39th	41st	67th	44th	65th						54th	59th
Community Partner Satisfaction Percent Good/Excellent	75-80%	N/A	↑	\	68%	\	\	79%	\	\		\	\		\	73%	71%
COMMUNITY																	
Community Employment Rate	15.8-18%	17.8%	↑	27.2%	25.2%	22.9%	24.7%	24.4%	23.6%	26.3%						24.8%	n/a
NCHC Access Measure	90-95%	NA	↑	98%	98%	91%	83%	70%	59%	59%						79%	n/a
Recidivism Rate for OWI	27-32%	44.7%	↓	31.37%	26.32%	24.40%	36.60%	23.50%	20%	12.80%						25.50%	31.30%
FINANCE																	
Direct Expense/Gross Patient Revenue	55-59%	N/A	↓	61%	51%	59%	62%	65%	60%	65%						60%	59.7%
Days in Account Receivable	55-60	54	↓	80	79	75	72	71	67	67						67	79
Write-Off Percent of Gross Revenue	.5-.6%	N/A	↓	0.18%	0.27%	0.32%	0.16%	0.59%	0.42%	0.46%						0.34%	n/a

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

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 Assisive 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. <i>Benchmark: Medicare Psychiatric Patients & Readmissions in Inpatient Psychiatric Facility Prospective Payment System, May, 2013, The Moran Company</i>
AODA Relapse Rate	Percent for patients admitted to Ambulatory Detoxification or the Behavioral Health hospital for detoxification then readmitted within 30 days of discharge for repeat detoxification. <i>Benchmark: National Institute of Drug Abuse: Drugs, Brains, and Behavior: The Science of Addiction</i>
NCHC Adverse Event Rate	Rate of client/patient/resident occurrences that are considered adverse events per 1000 patient days/visits. Adverse events are occurrences with a high potential for harm, injury or adverse outcome due to human error, process failure or environmental factors. <i>Benchmark: Improvement from 2014 NCHC Rate</i>
PEOPLE	
Injury Claims	The number of employee injuries with associated worker's compensation claims. Monthly figures represent an annualized rate. <i>Benchmark: U.S. Bureau of Labor Statistics, U.S. Department of Labor 2013</i>
Employee Turnover Rate	Percent of employee terminations (voluntary and involuntary) of the total workforce. Monthly figures represent an annualized rate. <i>Benchmark: Society of Humance Resource Management (SHRM) for the north central region of the U.S.</i>
SERVICE	
Client/Patient/Resident Satisfaction Percentile Rank	Comparison rate (to other organizations in the Health Stream database) of the percent of level 9 and 10 responses to the Overall rating question on the survey. <i>Benchmark: HealthStream 2015 Top Box Percentile</i>
Community Partner Satisfaction Percent Good/Excellent	Percentage of "Good and Excellent" responses to the Overall Satisfaction question on the survey.
COMMUNITY	
Community Employment Rate	Percent of Community Treatment, Prevocational, and Community Corner Clubhouse clients receiving vocational support/services who are employed. <i>Benchmark: National Alliance on Mental Illness (NAMI)</i>
NCHC Access Measure	% of clients obtaining services within the Best Practice timeframes in NCHC programs. <ul style="list-style-type: none"> • Adult Day Services - within 2 weeks of receiving required enrollment documents <ul style="list-style-type: none"> • Aquatic Services - within 2 weeks of refferal or client phone requests <ul style="list-style-type: none"> • Birth to 3 - within 45 days of referral • Community Corner Clubhouse - within 2 weeks • Community Treatment - within 60 days of referral • Outpatient Services - within 14 days of referral • Prevocational Services - within 2 weeks of receiving required enrollment documents <ul style="list-style-type: none"> • Residential Services - within 1 month of referral
Recidivism Rate for OWI	Percentage of AODA clients who receive treatment at NCHC that have 2 or more OWI convictions. <i>Benchmark: 2012-OWI Related Convictions by Violation County and Repeat Offender Status, State of Wisconsin DOT, Bureau of Driver Service, Alcohol & Drug Review Unit</i>
FINANCE	
Direct Expense/Gross Patient Revenue	Percentage of total direct expense compared to gross revenue.
Days in Account Receivable	Average number of days for collection of accounts. <i>Benchmark: WIPFLI, sources 2015 Almanac of Hospital Financial and Operating Indicators published by Optum-Psychiatric Hospitals, 2013 data.</i>

Write-Off percent	Write-offs as a percent of gross revenue
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**NORTH CENTRAL COMMUNITY SERVICES PROGRAM
QUALITY COMMITTEE MEETING MINUTES**

July 23, 2015, 8:30 a.m.

NCHC – Wausau Campus

Present: Darren Bienvenue, Bill Miller, Jean Burgener, Laura Scudiere, Holly Matucheski

Excused: Dr. Eric Penniman

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

The meeting was called to order at 8:31 a.m.; roll call was noted and a quorum declared. Moments of Excellence were shared.

Minutes

- **Motion**/second by Burgener/Bienvenue to approve the minutes of the May 21, 2015, meeting. Motion carried.

Outcome Data/Safety

- The Committee reviewed organization-wide and program-specific outcome data and safety data.
- Nursing home readmission rates have trended outside of the target range; a Plan, Do, Check, Act (PDCA) process improvement project has been initiated. Staff will report progress at next meeting.
- Access measures were not met due to an increase in referrals in Aquatic Therapy and staff vacancies in Outpatient Services. New staff is being recruited.
- Discussed external/partner satisfaction surveys and possible strategies to improve outcomes. Particular concern was shared regarding Crisis Services. A PDCA process improvement project will be initiated; staff will report back to the committee.
- Patient/client/resident satisfaction is not hitting target ranges. Staff shared actions taken to date, including an in-service provided to leaders by NCHC's company. A PDCA process improvement project is being initiated and staff will report progress at the next meeting.
- **Motion**/second by Bievenue/Matucheski to approve the Outcome Data as presented. Motion carried.
- Adverse event and safety data was reviewed. A continued positive trend in results was noted. No specific negative variations have been identified.
- **Motion**/second by Burgener/Bienvenue to approve the Safety Information and Adverse Events graphs as presented. Motion carried.

Closed Session

- **Motion**/second by Burgener/Matucheski to adjourn into Closed Session, pursuant to Section 19.85(1)(c) and (f) Wis. Stats. for the purpose of considering employment and performance evaluation of any public employee over which the governmental body exercises responsibility, and preliminary consideration of specific personnel problems, which if discussed in public, would likely have a substantial adverse effect upon the reputation of any person referred to in such problems, including specific review of performance of employees and providers of service

and review of procedures for providing services by Agency and to allow staff to remain. Motion carried and moved into closed session at 9:18 a.m. Roll Call taken, Yes=5, No=0.

- **Motion**/second by Bienvenue/Burgener to come out of closed session. Motion carried.
- The Committee reviewed and approved the Corporate Compliance and Ethics and Sentinel Events Investigations.

Medical Equipment and Utility Systems Management Plans

- The Committee reviewed the Medical Equipment and Utility Systems Management Plans as presented.
- **Motion**/second by Matucheski/Bienvenue to approve the Medical Equipment and Utility Systems Management Plans. Motion carried.

Auditing Report

- Information is being gathered and will be provided to the Committee at the next meeting.

Joint Commission Update

- The Joint Commission has accepted the 45-day report submitted by NCHC. A 60-day report will be submitted by August 14th.
- The engineer is anticipated to return for a follow-up inspection at any time.
- During leadership meeting with the Joint Commission, staff was commended for the preparation and information provided to Joint Commission.
- Reports on the Requirements for Improvement will be a standing agenda item moving forward.

Future Agenda Items

- Continued discussion regarding Crisis.
- **Motion**/second by Miller/Burgener to adjourn at 9:31 a.m. Motion carried.

dls



August 18, 2015

On behalf of Gary Bezucha, CEO of North Central Health Care, it is my honored privilege to announce that North Central Health Care has been awarded **Behavioral Health Accreditation from the Joint Commission** by demonstrating continuous compliance with its performance standards. The Gold Seal of Approval® is a symbol of quality that reflects an organization's **commitment to providing safe and effective care**. More importantly, this award signifies the commitment to quality and safety by our staff at North Central Health Care. In our 4-year journey toward elevating the standards of care, staff from across the organization collaboratively worked together to develop and implement approaches and strategies that improve care for those in the communities we serve. It is this continuous journey, coupled with evidence-based practice and dedication to positive outcomes for those we serve, that have made this national-level accreditation possible.

Founded in 1951, The Joint Commission is the premier health care quality improvement and accrediting body in the nation. The Joint Commission's behavioral health care standards are developed in consultation with health care experts and providers, quality improvement measurement experts, and individuals and their families. The standards are informed by scientific literature and expert consensus to help organizations measure, assess and improve performance.

As part of the accreditation process, North Central Health Care's programs underwent a rigorous four-day, on-site survey in June 2015, conducted by four surveyors, with expertise in behavioral health, environmental safety, and care/treatment standards. All North Central Health Care Behavioral Health sites were surveyed including Inpatient Behavioral Health, Crisis Services, Crisis Community Based Residential Facility, Ambulatory Detoxification, Community Treatment, Substance Abuse Day Treatment, Outpatient Mental Health and Substance Abuse Services, Developmental Disabilities Services (Adult Day and Prevocational Services), Community Corner Clubhouse, Birth to Three, Residential Services and Aquatic Services. During the review, compliance with behavioral health care standards related to several areas, including care, treatment, and services; environment of care; leadership; and screening procedures for the early detection of imminent harm was evaluated. On-site observations and interviews were also conducted with staff, residents and clients.

We are honored to share this news with you, and proud that the dedication and commitment to quality and safety by our staff has been validated by the leading healthcare accrediting agency in the United States.

Sincerely,

Becky Schultz
Senior Executive Quality & Compliance
North Central Health Care

www.norcen.org

PROPOSAL FOR MULTI-DOSE MEDICATION PACKAGER PHARMACY

Proposal: Purchase of a multi-dose compliance packager for medications would benefit all programs that dispense medication at North Central Health Care.

Current state: 30-day medication cards; one card dispensed for each medication dose dispense time.

Proposed state: Multi-dose envelope; all medications in the same envelope per dose dispense time. Dispensed medications are 1, 3 or 7 days, customizable to each program.

Nurse wins:

1. Reduced administration time in medication preparation and administration
2. Storage footprint greatly reduced in medication carts/rooms in programs
3. Less medication errors – all medications in one pouch per dispense time
4. Less waste – current waste is \$5,000 - \$10,000 per month
5. Medication can travel with residents (especially Residential Program)

Pharmacy wins:

1. Reduce errors – automation implemented
2. Inventory optimization – eliminate \$20,000 inventory in prepackaged cards
3. Increase efficiency of staff from labor-intense process to automated process
4. Audit trail of each medication – image captured of each envelope that is easily retrieved
5. Capture more business, improved revenue – Community Treatment clients

Resident/Client/Employee wins:

1. Packaging improves compliance
2. Medications are not exposed to heat and therefore retain potency

Background:

Number of Beds:

Nursing Home:	215
Group Homes:	69
Behavior Health:	18
Community Treatment:	40
Community Treatment potential clients*:	50
Community Treatment current caseload:	216
Current Pharmacy Patients Served:	661
Current Number of Residents receiving 30-day cards:	325

***Potential clients include clients that were being managed from mail-order in order to obtain multi-dose packaging.**

Equipment: See costs attached

Installation: Ease of adoption; IT assistance is minimal – involves only moving of data ports and approval of system connecting before the organization’s firewall; 90 days (attached implementation plan)

Renovations: Moving of modular shelving that is in place.

ROI: based on current profit level of Community Treatment clients

Immediate growth of 50 clients from community treatment

Gross Revenue of 50 clients: 64,164/MO 769,969/YR

Net Revenue of 50 clients: 27,194/MO 326,331/YR

Net revenue minus medication expense – net profit: 6,337/MO 76,038/YR

Potential net revenue minus expense in Capture of **all CT clients:** **\$210,565/year**

Net profit of 50 new clients: 76,038 Inventory savings: \$20,000 per year **Total: \$96,038/year**

TCG complete package:	\$479,730
Shipping	5,000
Medication Cart Conversion: \$700 x 21 =	\$14,700
QS/1 Interfaces: \$5,000	
Yearly maintenance fees beginning year 2: \$16,990	
Total Cost:	\$503,430
ROI –	5.24 years
Amount Previously Budgeted =	\$210,000 (did not include automated checker)
Additional amount requested:	\$293,430

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM
HUMAN SERVICES OPERATIONS COMMITTEE
MEETING MINUTES**

July 16, 2015

3:00 p.m.

NCHC – Wausau Campus

Present:

X	John Robinson	X	(via phone) Holly Matucheski	X	Joanne Kelly
EXC	Greta Rusch	X	Nancy Bergstrom	X	Lee Shipway
X	Linda Haney	X	Scott Parks		

Also Present: Toni Simonson, Brenda Glodowski, Gary Bezucha, Debbie Osowski, Michelle Hazuka, Marlene Patton, Brenda Budnik

The meeting was called to order, roll call was noted and a quorum declared.

Welcome and introductions were made.

Consent Agenda

- **Motion**/second, Bergstrom/Kelly, to approve the consent agenda, which includes the minutes of the 1/21/15 meeting and the financial reports. Motion carried.

Human Services Operations Report

- Aquatic Services
 - Due to increased volumes of individuals seeking services in Aquatic Therapy, a contract for a physical therapist has been initiated and recruitment is underway.
- Medically Management Treatment (MMT) – previously known as ‘residential treatment’
 - We are waiting for the on-site survey from DHS.
 - The survey was scheduled for last week; however, the surveyor for this area is no longer with DHS.
 - We are contacting the Director of Certification to see how we can expedite the survey process.
 - Program is ready to open as soon as it is certified.
 - Robin Stowe, Langlade County has been informed of delay; Nancy Bergstrom will take info back to Lincoln County; will contact Craig McEwen, Public Safety Committee of delay
 - MMT will have 6 beds
 - Anticipate eventual expansion of the program due to the high number of inquiries and current wait list
- Marathon County Jail
 - Currently recruiting for positions to provide 24/7 coverage throughout entire region with availability of our staff to go into the jail to provide services.
 - Expanding these services to the Lincoln and Langlade County jails also by Sept. 1.
 - Staff currently being trained to work with forensic population; recruiting for individual with forensic background.

- Day Treatment
 - Opened April, 2015
 - Capacity of 8 filled during first week
 - Waiting list of 8-10 since program opened
 - Hoping to add an additional clinician for next year
 - Working with transportation system so individuals in Lincoln and Langlade Counties can make use of the program easier

Educational Session – Clubhouse – Michelle Hazuka

- Marlene Patton, consumer, provided overview of Clubhouse
- Clubhouse program relocated in May to 811 North Third Avenue, Wausau
- Clubhouse is an internationally certified program; 1 of 6 in Wisconsin
- Accredited since 2006; services have existed since 1996
- 117 active members; 5 staff
- Clubhouse Overview and Mission Statement were distributed
- All are welcome to stop in at any time
- Strategic planning is a priority including marketing and a better understanding on how to access services including: establishing focus groups with probation/parole, Sheriff's Dept., etc. Additional suggestions were to send out brochures to private therapy offices in an effort to improve knowledge of program and access to services.

Mental Health Services to the jail

- Sheriff Parks commented that with the 8 hours of tele-psychiatry, up to 40 hours/week of forensic counseling, additional access to crisis staff, open dialogue and communication, that we are showing progress and making a difference for those housed at the jail. He feels this could be a pilot for the State.
- A Workgroup has been meeting weekly (or more often as needed) to develop a process flow including screening for mental health and substance abuse disorders using Stepping Up tools, established forensic counselor and tele-psychiatry, recruitment for another forensic counselor for additional coverage, recruitment of additional crisis workers which will help with deploying individuals as necessary, and establishing services in Langlade and Lincoln Counties also.
- These initiatives are being funded through the NCHC Innovation Fund which is used for unanticipated innovative programs. The fund was developed several years ago at the request of the Board.
- This is a pilot program which will continue through 2015 and if successful (evidenced based) will move into the other Counties. Langlade County has requested 24/7 crisis services now which we are working.
- NCHC is pleased with the collaboration with the Sheriff's Dept. and thrilled about the positive impact on the inmates of the jail, the jailer(s), personal lives of employees, spouses, and families of all involved – inmates and staff alike.
- Committee would like to continue to be brought up to date, tracking community support, transition into the community, etc.

Psychiatry update

- New psychiatrist, Dr. Brigitte Espinoza, will be joining us soon. Processing of her J1Visa paperwork has been delayed due to a system failure at the federal level. She is excited to start.

- Psychiatry residency program has obtained the number of stipends needed for the program. In process of writing the application which must be completed in September and then anticipate a site visit before the end of the year. The program is on target to begin with three residents in July 2017 with graduation in 2021.

Aquatic update

- The Capital Improvement request is going to committee for ranking next week which will include the pool.

Future agenda items for consideration

- ADHD program
- Early childhood/intervention services
- Mental health program updates

Motion/second, Bergstrom/Kelly, to adjourn the meeting at 4:25 p.m. Motion carried.

dko

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

July 24, 2015

8:00 AM

NCHC – Wausau Campus

Present:	X Jean Burgener(via phone) X Bill Metter	EXC Lee Olkowski X John Bandow	X John Robinson X Bill Miller
Also Present:	X Brenda Glodowski X Gretchen Brown	X Gary Bezucha X Vicki McBride	X Michael Loy X Debbie Osowski

The meeting was called to order at 8:00 a.m.

Per Board policy as it relates to a potential conflict of interest, Jean Burgener shared that her daughter is an owner with Catalyst Health where Lori Koeppel has been retained as interim administrator.

Minutes

- **Motion** / second, Miller / Metter, to approve the 6/26/15 minutes of the Nursing Home Operating Committee meeting. Motion carried.
- **Motion** / second, Metter / Bandow, to approve the 7/9/15 minutes of the Nursing Home Operating Committee meeting. Motion carried.

Financial Report

- Census for June improved slightly over May averaging 204 per day; target is 213.
- Medicare census went down, 19; target is 26.
- Overall expenses were under budget; revenues holding well.
- Overall there is a gain just over \$37,000; target was just over \$5,000 so we have exceeded target.
- Year to date there is a gain just under \$138,000 with a year to date target of \$36,000.

Nursing Home Operations and Quality Report

- Vicki McBride was introduced as the Interim DON.
- Amy Ruttinger, audited MDS and case mix index for us, will be returning in August to provide an inservice for staff. Inservice will be taped to allow all staff the opportunity to learn from this inservice.
- Rehospitalization within 30 days of admission is above target; we are actively looking at each readmission to do all we can to avoid readmissions in the future. So far in July there have been no readmissions.
- Improvement in external customer satisfaction scores were seen in June. Continue to work on this metric with all staff and is our main initiative for the next six months.
- Vicki noted they are working on wounds and falls; reviewing Casper report which identifies areas from the MDS that are potential triggers above the norm. Weekly meetings being established with CCIT for improvements to the ECS documentation system.

- Transition/Interim Management Plan:
 - Vicki will provide leadership to the nursing home on an indefinite basis until a permanent DON is hired. The hiring of a permanent DON will be delayed until after successful recruitment of an Administrator to provide the opportunity for the new Administrator to be involved in the hiring of that position.
 - As of August 3, the administrator of record will be Gary Bezucha.
 - Lori Koeppel has been hired, through her consulting business, as interim leadership. Lori will focus her involvement on management operations of the nursing home and survey preparation. We are currently in our window for annual survey.
 - Dietary will report to Michael Loy, Sr. Exec. of Human Services during this interim.
 - Scheduled listening sessions will be held with staff in the nursing home to provide opportunities for them to ask questions and be reassured that their job and the future of the nursing home are safe.
 - Currently working with a recruiting firm in addition to traditional channels.

Communication/transparency with Health & Human Services Committee (HHSC)

- Changes in administration are included on the next agenda of the HHSC.
- NCHC Board Report was provided to the committee. Committee felt the report was well done. Report has been shared with the Deputy County Administrator for distribution to the HHSC and the entire County board.

Staff turnover

- 2014 CNA Turnover Analysis by Nurse Case Manager and 2015 CNA Turnover Analysis by Program were reviewed. Several highlights include:
 - Cost of overtime vs. contracted staff
 - Continuity of care by employees vs contracted staff
 - Often times staff will change to occasional status before resigning position leaving one foot in the door should their other job opportunity not work out.
 - Highest turnover is seen in the CNA category then food service; licensed staff is very stable.
 - Insights for terminations include: 1) not showing for work and/or coming in late; 2) work/life balance and personal issues i.e. child care; 3) other jobs (higher level careers in nursing)
 - NCHC onboarding perspective was provided including a mentoring incentive program

Master Facility Plan Update

- No update at this time

Future agenda items

- Bundle payments education

Motion / second, Bandow / Miller, to adjourn the meeting at 9:03 a.m. Motion carried.

dko

PRIVILEGE AND APPOINTMENT RECOMMENDATION

Appointee Brian D. Smith, M.D. Appointment/
Reappointment 11-01-2014 to 10-31-2016
Time Period

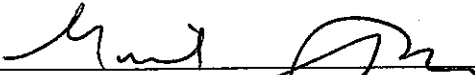
Requested Privileges Medical (Includes Family Practice, Internal Medicine)
 Psychiatry Medical Director
 Mid-Level Practitioner Psychologist

Locum Provider? Locum Agency: _____

MEDICAL DIRECTOR

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 Director Signature)

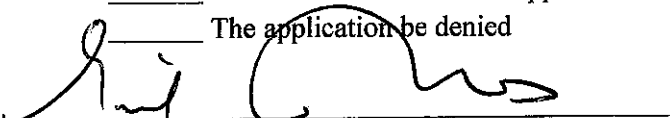
7-16-15

(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)

8-20-15

(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)



Brian D. Smith, M.D.

Enhanced Credentialing Activity

General Profile

Primary Address

Aspirus Wausau Hospital
dba Aspirus Family Physicians
212 Sturgeon Eddy Road
Wausau, WI 54403-6672
(715) 842-0491

Other Provider Information

ID#: 0189
SSN
Date of Birth:
Provider Specialties: Family Medicine

NPI: 1891729380
UPIN: B56689
Medicare#: 000139275/ 390450052
Medicaid#: 1891729380

Credentialing Activity

Application

Application Sent Date: 05/05/2014
Attestation Date:
Received Date: 05/15/2014

Most Recent Query

Query Type: Claims Processing
Query Date: 05/07/2014

Credentialing
Completed:

Issues: |

Aspirus Network, Inc.

From 10/30/2012 To 10/31/2014

Information Upon Credentialing Completion

Status: ANI Current
Category: ANI Primary Care Provider
Category Applied For: ANI Primary Care Provider
Network:
Cred Activity Notes:

Committee Progress

Started:
Status:

Issues: |

Activity
Completed:

Aspirus Wausau Hospital

From 11/01/2012 To 10/31/2014

Information Upon Credentialing Completion

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

Committee Progress

Started:
Status:

Issues: |

Activity
Completed:

Licenses

License Type: WI Caregiver Background Check

State:

License Number:

Status:

Expiration Date: 11/23/2015

Verified: OK
Verified Date: 05/20/2014
Verified By: Jill A. Patraw
Verified How: O-Verified Previously
Notes:

License Type: DEA Certificate

State: WI

License Number: AS2175328

Status: Active

Expiration Date: 02/29/2016

Verified: OK
Verified Date: 05/20/2014
Verified By: Jill A. Patraw
Verified How: L-DEA Website
Notes: source date 5/19/2014

License Type: State License

State: WI

License Number: 26492

Status: Active

Expiration Date: 10/31/2015

Verified: OK
Verified Date: 05/20/2014
Verified By: Jill A. Patraw
Verified How: L-WI DRL Website
Notes:

Insurance

MMIC (ACI)

Policy Number: MCL001317

Letter Description: Verify Malpractice Insurance
DOC

Verified: OK
Verified Date: 06/16/2014

Coverage Type:
Expiration Date: 05/01/2015 ²⁰¹⁶ JSP

Letter Sent Date: 06/11/2014
Letter Sent By: Jill A. Patraw

Verified By: Dana Amacher
Verified How: I-Verification from Carrier
Notes: \$1M / \$3M - No Claims

Boards

Am Bd Family Medicine

Board Status: Certified

Cert Number:

Expiration Date: 12/31/2016

Verified: OK
Verified Date: 05/20/2014
Verified By: Jill A. Patraw
Verified How: B-ABMS Website-Board Certification
Notes:

Affiliations

Aspirus Family Physicians

Affiliation Type: Medical Staff

Letter Description: Verify Affiliations & Employment Reappt*

Verified:

Verified Date: 06/24/2014

Category: Not Provided

Letter Sent Date: 06/23/2014

Verified By: Dana Amacher

Dept/Specialty: Family Medicine

Letter Sent By: Jill A. Patraw

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

Start Date: 07/01/1986

Notes:

End Date:

Aspirus Wausau Hospital *

Affiliation Type: Medical Staff

Verified:

Verified Date: 05/23/2014

Category: Active

Verified By: Jill A. Patraw

Dept/Specialty: Family Medicine

Verified How: A-Health Care Facility Verif Ltr

Start Date: 06/25/1986

Notes: online verification

End Date:

Robert Kaupie, M.D.

Affiliation Type: Reference

Letter Description: Verify Refs - Reappointment *

Verified:

Verified Date: 06/25/2014

Category:

Letter Sent Date: 06/23/2014

Verified By: Dana Amacher

Dept/Specialty:

Letter Sent By: Jill A. Patraw


Verified How: A-NCS-Professional Ref Verif Ltr

Start Date:

Notes:

End Date:

Worksheet

	Date & Initials	Comments
SAM Website	5/20/2014 jap	
NPDB Website query through Cactus	5/7/2014 jap	
OIG Website	source date 5/7/2014 jap conducted date 5/8/2014 jap	
Medicare Opt Out List Website	report run date 5/12/2014 jap reviewed date 5/20/2014 jap	
Consent Form	Sign Date & Initials 5/8/2014 jap	
Privilege Form	Sign Date & Initials 5/8/2014 jap	
Quality Improvement Activities (payor requirement)	Date & Initials	
Patient Complaints (payor requirement)	Date & Initials	
Previous ANI Committee/Recredentialing Date	Date	
CVO Review	Date 7/14/14	Signature 
Entity Committee Review	Date	Signature
ANI Only - All Disclosure Questions Answered		
YES ___ NO ___		
ANI Only - Issues Identified		
YES ___ NO ___		

North Central Health Care

APPOINTMENT RECOMMENDATION FLOW SHEET

Appointee Jean Lee Baribeau-Anaya, PA-C ^{Appointment/} Reappointment 06/01/2015 to 06/30/2016
Time Period

Staff Category Active Locum Tenens
 Courtesy Delegation
 Mid-Level Practitioner

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

Special Conditions: _____

MEDICAL DIRECTOR

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

Comments: _____

[Signature]
(Medical Director Signature)

6-10-15
(Date)

MEDICAL STAFF CHAIRPERSON

Medical Staff recommends that:

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

[Signature]
(Medical Staff Chairperson Signature)

8-20-15
(Date)

GOVERNING BOARD

Reviewed by Governing Board: _____
(Date)

Response: Concur
 Recommend further reconsideration

Reason: _____

Completion date: _____

(Chief Executive Officer Signature)

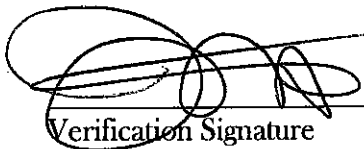
(Date)

North Central Health Care

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

PROVIDER PROFILE SUMMARY APPOINTMENT/REAPPOINTMENT VERIFICATION CHECKLIST

Provider: Jean Baribeau-Anaya, PAC	Initials	Date Verified
SSN: On file	jip	06/10/2015
Wisconsin Licenses #: 2905 Expiration Date: 02/29/2016	jip	06/10/2015
Board Certification (only if new or renewed) ok	jip	06/10/2015
DEA Certification #: MB2598297 Expiration Date: 07/31/2017	jip	06/10/2015
Practice Affiliation: North Central Health Care 1100 Lake View Drive Wausau, WI 54403	jip	06/10/2015
Malpractice Carriers: ProAssurance, AFC9116114 Coverage Dates: 11/02/2014 to 11/02/2015	jip	06/10/2015
National Practitioner Data Bank: ok Disciplinary Actions/Sanctions: No reports found.	jip	06/10/2015
Wisconsin Background Check: ok	Jip	06/10/2015


Verification Signature

6-10-2015
Date



Jean L. Baribeau-Anaya, PAC

Enhanced Credentialing Activity

General Profile

Primary Address

Langlade Hospital
Walk In
112 East Fifth Avenue
Antigo, WI 54409
(715) 623-2331

Other Provider Information

ID#: 14297
SSN: -
Date of Birth:
Provider Specialties: Physician Assistant

NPI: 1952464885
UPIN:
Medicare#:
Medicaid#:

OK

Credentialing Activity

Application

Application Sent Date: 01/02/2015
Attestation Date:
Received Date: 01/28/2015

Most Recent Query

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

Credentialing

Completed:

Issues:

Aspirus Network, Inc.

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

Information Upon Credentialing Completion

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

Committee Progress

Started:
Status:

Issues:

Activity

Completed:

Langlade Hospital

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

Information Upon Credentialing Completion

Status: LH Current
Category: LH Allied Health 2yr
Category Applied For: LH Allied Health 2yr
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: 02/03/2015
 Verified By: Christa L Darnell
 Verified How: L-DEA Website
 Notes: Source date 2/3/2015

License Type: State License
 State: WI
 License Number: 2905
 Status: Active
 Expiration Date: 02/29/2016

Verified:
 Verified Date: 02/03/2015
 Verified By: Christa L Darnell
 Verified How: L-WI DRL Website
 Notes:

License Type: WI Caregiver Background Check
 State: WI
 License Number:
 Status:
 Expiration Date: 03/08/2016

Verified:
 Verified Date: 02/03/2015
 Verified By: Christa L Darnell
 Verified How: O-Verified Previously
 Notes:

License Type: Basic Life Support
 State:
 License Number:
 Status:
 Expiration Date: 07/29/2015

Verified:
 Verified Date: 03/09/2015
 Verified By: Christa L Darnell
 Verified How: O-FYI Only
 Notes:

License Type: Pediatric Advanced Life Support
 State:
 License Number:
 Status:
 Expiration Date: 08/06/2013

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

Insurance

MHA Ins Co (Langlade Hospital)
 Policy Number: 01-WI10009
 Coverage Type: Claims Made
 Expiration Date: 02/01/2016

Letter Description: Verify Malpractice Insurance AHP*
 Letter Sent Date: 02/27/2015
 Letter Sent By: Christa L Darnell

Verified: *ok*
 Verified Date: 02/27/2015
 Verified By: Christa L Darnell
 Verified How: I-NCS-Insurance Verif Ltr
 Notes: \$1M / \$3M - No Claims

Boards

National Commission on Certification of Phys Assts
 Board Status: Certified
 Cert Number: 1029922
 Expiration Date: 12/31/2016


Verified: *ok*
 Verified Date: 02/03/2015
 Verified By: Christa L Darnell
 Verified How: B-NCCPA Website
 Notes:

Affiliations

Jean L. Baribeau-Anaya, PAC

Langlade Hospital*Affiliation Type:* Allied Health Staff*Category:* Allied Health Practitioner*Dept/Specialty:* Physician Assistant*Start Date:* 06/26/2012*End Date:**Letter Description:* Verify Affiliations & Employment Reappt**Letter Sent Date:* 02/06/2015*Letter Sent By:* Jill A. Patraw**Verified:** *Verified Date:* 02/18/2015*Verified By:* Christa L Darnell*Verified How:* A-Health Care Facility Verif Ltr*Notes:***Langlade Hospital Walk In***Affiliation Type:* Employee*Category:* Allied Health Practitioner*Dept/Specialty:* Physician Assistant*Start Date:* 06/26/2012*End Date:**Letter Description:* Verify Affiliations & Employment Reappt**Letter Sent Date:* 02/27/2015*Letter Sent By:* Christa L Darnell**Verified:** *Verified Date:* 03/04/2015*Verified By:* Christa L Darnell*Verified How:* A-Health Care Facility Verif Ltr*Notes:***Stacie Valukas, APNP***Affiliation Type:* Reference*Category:**Dept/Specialty:**Start Date:**End Date:**Letter Description:* Verify Refs - Reappointment **Letter Sent Date:* 02/06/2015*Letter Sent By:* Jill A. Patraw**Verified:** *Verified Date:* 02/12/2015*Verified By:* Christa L Darnell*Verified How:* A-NCS-Professional Ref Verif Ltr*Notes:***Scott Moore, M.D.***Affiliation Type:* Sponsoring Physician*Category:**Dept/Specialty:**Start Date:**End Date:**Letter Description:* Verify Refs - Reappointment **Letter Sent Date:* 02/27/2015*Letter Sent By:* Christa L Darnell**Verified:** *Verified Date:* 03/06/2015*Verified By:* Christa L Darnell*Verified How:* A-NCS-Professional Ref Verif Ltr*Notes:*

Worksheet

	<i>Date & Initials</i>	<i>Comments</i>
NPDB Website query through Cactus	1/6/2015 CLD	
OIG Website	<i>Date & Initials</i> Source date 1/7/2015 CLD Conducted date 1/14/2015 CLD	<i>Comments</i>
SAM Website	<i>Date & Initials</i> 1/5/2015 CLD	<i>Comments</i>
Medicare Opt Out Website	<i>Date & Initials</i> Report date 1/12/2015 CLD Review date 2/3/2015 CLD	<i>Comments</i>
Supervising Physician Form	<i>Sign Date & Initials</i> 1/17/2015 CLD	<i>Comments</i> Scott Moore M.D.
Collaborative Agreement	<i>Sign Date & Initials</i> N/A	<i>Comments</i> N/A
Consent Form	<i>Sign Date & Initials</i> 1/16/2015 CLD	<i>Comments</i>
Privilege Form	<i>Sign Date & Initials</i> 1/17/2015 CLD	<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> 3-12-15 <i>Date</i>	<i>Signature</i>  <i>Signature</i>
Entity Review		
ANI Only - All Disclosure Questions Answered YES___ NO___		
ANI Only - Issues Identified YES___ NO___		