

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

A meeting of the **North Central Community Services Program Board** will be held at **North Central Health Care, 1100 Lake View Drive, Wausau, WI 54403, Wausau Board Room** at **12:00 PM** on **Thursday, February 25th, 2016**.

(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 24 hours prior to the start time of the meeting for further instructions.)

AGENDA

1. Call to order
2. Roll Call
3. Consent Agenda
 - a. December and January financial statements
 - b. 12/17/15 Finance, Personnel & Property Committee meeting minutes
 - c. 1/28/16 Board meeting minutes
 - d. CEO Report
4. Chairperson's report: J. Zriny
 - a. Action: approve report and minutes of the 01/27/16, 2/9/16, 2/15/16 Executive Committee meetings
5. Quality Committee report
 - a. Action: approve Organizational Quality Dashboard
 - b. Action: approve Hospital Utilization Review Plan
 - c. Action: Approve report and minutes of the 1/21/16 Quality Committee meeting
 - d. Crisis Process Improvement update – B. Schultz, L. Scudiere
6. Financial report: B. Glodowski
7. Finance, Personnel & Property Committee report
8. Human Services Operations Committee (HSOC) report: J. Robinson
 - a. Action: approve report and minutes of the 2/12/16 HSOC meeting
9. Nursing Home Operations Committee (NHOC) report: J. Burgener
 - a. Action: approve minutes of 1/29/16 NHOC meeting
10. Correct Care Solutions presentation by Jean Short, Regional Operations Manager, Michelle Reed, Behavioral Health Manager, Sandra LaDu-Ives, Jail Captain, Marathon County Sheriff's Dept.
11. Review of 51 Statutes – Dean Dietrich
12. Future agenda items for committee consideration
13. Adjourn

- If time permits, beginning discussions may take place on future agenda items.
- 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/Michael Loy
Presiding Officer or His Designee

COPY OF NOTICE DISTRIBUTED TO:

Wausau Daily Herald Antigo Daily Journal
Tomahawk Leader Merrill Foto News
Lincoln & Marathon County Clerk Offices

DATE: 02/19/16 TIME: 11:00 AM
VIA: X FAX X MAIL
BY: D. Osowski

THIS NOTICE POSTED AT:

North Central Health Care
DATE: 02/19/16 TIME: 11:00 AM
By: Debbie Osowski

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.



MEMO

TO: North Central Health Care Finance Committee
FROM: Brenda Glodowski
DATE: January 22, 2016
RE: Attached Financials

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

BALANCE SHEET

As was reviewed at the Finance Committee meeting last month, there is a new guideline, GASB 68: Accounting and Reporting for Pensions, that needs to be incorporated into the audit report. This reporting change has been incorporated into the preliminary Balance Sheet.

STATEMENT OF REVENUE AND EXPENSES

The month of December shows a gain of \$256,529 compared to a budgeted loss of (\$81,995) resulting in a positive variance of \$338,524.

The hospital census averaged just over 11 patients per day, which is lower than previous months. The target for the hospital census is 13 per day. The nursing home census averaged just under 209 per day, which is an improvement over the prior months. The target is 213 per day. The Medicare census also improved, averaging a census of 23 per day. The target is 26 per day.

There were some settlements received in December for prior year cost reports and the annual WIMCR (Wisconsin Medicaid Cost Reporting) program which contributed to approximately \$400,000 of revenue. The third and fourth quarter nursing home Medicaid rate adjustment was received, which results in a receivable of over \$75,000. Also, the yearend settlement is recorded for NCHC's managing the LVPP building. The agreement that is in place with Marathon County for this is to record the revenue in Marathon County Appropriation so the proceeds flow back into their fund balance. This is \$163,000 for 2015.

Overall expenses were significantly over budget for December. Some areas that exceeded budget targets were recruitment by \$45,000, staffing contracts by \$174,000, state institutes by \$136,000, psychiatry contracts by \$57,000, equipment rental by \$19,000, drugs by \$75,000, and contracted services by \$56,000. Other overages, such as supplies, were scattered throughout different programs.

The preliminary year end results show an overall gain \$662,556. These are preliminary financial reports and may change a bit while working through the audit process.

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

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

	<u>51.42/.437</u> <u>PROGRAM</u>	NURSING <u>HOME</u>	<u>TOTAL</u>	<u>TOTAL</u> <u>31-Dec-14</u>
Current Assets:				
Cash and Equivalents	5,659,863	93,078	5,752,942	5,783,548
Short-Term Investments	9,800,000		9,800,000	8,043,885
Cash Approved for Capital Purchases	1,383,364	302,864	1,686,228	1,256,115
Donated Funds	159,689		159,689	183,269
Accounts Receivable:				
Patient - Net	4,125,257	3,719,198	7,844,454	7,829,361
State Grants	106,642		106,642	79,848
Other	1,381,320		1,381,320	577,507
Appropriations Receivable	69,173		69,173	0
Amounts Receivable From Third-Party Reimbursement Programs	475,000		475,000	1,371,000
Inventory	46,880	256,902	303,782	273,822
Other	<u>220,249</u>	<u>64,904</u>	<u>285,153</u>	<u>95,201</u>
Total Current Assets	<u>23,427,438</u>	<u>4,436,945</u>	<u>27,864,383</u>	<u>25,493,555</u>
Noncurrent Assets:				
Capital Assets	31,018,802	14,907,992	45,926,793	43,594,303
Accumulated Depreciation	<u>(22,935,282)</u>	<u>(10,986,415)</u>	<u>(33,921,697)</u>	<u>(32,348,237)</u>
Capital Assets - Net	8,083,520	3,921,577	12,005,097	11,246,066
Restricted Assets - Patient Trust Funds	25,900	40,359	66,259	56,276
Net Pension Assets	<u>4,846,938</u>	<u>0</u>	<u>4,846,938</u>	<u>0</u>
Total Noncurrent Assets	<u>12,956,359</u>	<u>3,961,935</u>	<u>16,918,294</u>	<u>11,302,342</u>
Deferred Outflows of Resources - Related to Pensions	<u>4,851,842</u>	<u>0</u>	<u>4,851,842</u>	<u>0</u>
TOTAL ASSETS AND DEFERRED OUTFLOWS OF RESOURCES:	<u>41,235,638</u>	<u>8,398,881</u>	<u>49,634,519</u>	<u>36,795,897</u>

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

	<u>51.42/.437</u> <u>PROGRAM</u>	<u>NURSING</u> <u>HOME</u>	<u>TOTAL</u>	<u>TOTAL</u> <u>31-Dec-14</u>
Current Liabilities:				
Accounts Payable	3,039,432	0	3,039,432	2,978,855
Third Party Payable	350,000	0	350,000	426,000
Appropriations Advances	0	0	0	0
Accrued Liabilities:				
Salaries and Retirement	1,417,581	0	1,417,581	1,211,993
Payroll Taxes and Withholdings	172,397	0	172,397	155,584
Compensated Absences	1,491,802	0	1,491,802	1,525,752
Other Payables	71,380	0	71,380	72,806
Deferred Revenue - State Grants	<u>1,140,065</u>	<u>0</u>	<u>1,140,065</u>	<u>686,444</u>
Total Current Liabilities	<u>7,682,658</u>	<u>0</u>	<u>7,682,658</u>	<u>7,057,434</u>
Noncurrent Liabilities:				
Patient Trust Funds	<u>25,900</u>	<u>40,359</u>	<u>66,259</u>	<u>56,195</u>
Total Liabilities	<u>7,708,559</u>	<u>40,359</u>	<u>7,748,917</u>	<u>7,113,629</u>
Deferred Inflows of Resources - Related to Pensions	<u>84,873</u>	<u>0</u>	<u>84,873</u>	<u>0</u>
Net Assets:				
Invested in Capital Assets	8,083,520	3,921,577	12,005,097	11,246,066
Unrestricted	14,619,509	4,910,053	19,529,563	17,797,734
Restricted - Pension Benefit	9,603,512	0	9,603,512	0
Operating Income / (Loss)	<u>1,135,665</u>	<u>(473,108)</u>	<u>662,557</u>	<u>638,469</u>
Total Net Assets	<u>33,442,206</u>	<u>8,358,522</u>	<u>41,800,729</u>	<u>29,682,268</u>
TOTAL LIABILITIES, DEFERRED INFLOWS OF RESOURCES, AND NET ASSETS	<u>41,235,638</u>	<u>8,398,881</u>	<u>49,634,519</u>	<u>36,795,897</u>

**NORTH CENTRAL HEALTH CARE
COMBINING STATEMENT OF REVENUES AND EXPENSES
FOR PERIOD ENDING DECEMBER 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>\$4,353,871</u>	<u>\$3,463,264</u>	<u>\$890,607</u>	<u>\$42,503,543</u>	<u>\$41,432,100</u>	<u>\$1,071,443</u>
Other Revenue:						
State Match / Addendum	325,773	325,120	654	3,901,436	3,901,436	(0)
Grant Revenue	236,827	184,111	52,716	2,424,060	2,208,489	215,571
County Appropriations - Net	899,810	730,192	169,618	8,998,367	8,762,305	236,062
Departmental and Other Revenue	<u>177,629</u>	<u>180,659</u>	<u>(3,029)</u>	<u>2,022,525</u>	<u>2,167,900</u>	<u>(145,375)</u>
Total Other Revenue	<u>1,640,040</u>	<u>1,420,081</u>	<u>219,958</u>	<u>17,346,388</u>	<u>17,040,130</u>	<u>306,258</u>
Total Revenue	5,993,910	4,883,346	1,110,565	59,849,930	58,472,230	1,377,700
Expenses:						
Direct Expenses	4,283,967	3,534,585	749,382	44,051,120	41,606,219	2,444,901
Indirect Expenses	<u>1,465,952</u>	<u>1,438,254</u>	<u>27,698</u>	<u>15,279,814</u>	<u>16,956,011</u>	<u>(1,676,197)</u>
Total Expenses	<u>5,749,919</u>	<u>4,972,839</u>	<u>777,080</u>	<u>59,330,934</u>	<u>58,562,230</u>	<u>768,704</u>
Operating Income (Loss)	<u>243,991</u>	<u>(89,493)</u>	<u>333,484</u>	<u>518,996</u>	<u>(90,000)</u>	<u>608,996</u>
Nonoperating Gains (Losses):						
Interest Income	8,469	7,500	969	78,556	90,000	(11,444)
Donations and Gifts	4,069	0	4,069	50,027	0	50,027
Gain / (Loss) on Disposal of Assets	<u>0</u>	<u>0</u>	<u>0</u>	<u>14,977</u>	<u>0</u>	<u>14,977</u>
Total Nonoperating Gains / (Losses)	<u>12,538</u>	<u>7,500</u>	<u>5,038</u>	<u>143,560</u>	<u>90,000</u>	<u>53,560</u>
Operating Income / (Loss)	<u>\$256,529</u>	<u>(\$81,993)</u>	<u>\$338,522</u>	<u>\$662,556</u>	<u>\$0</u>	<u>\$662,556</u>

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

51.42/.437 PROGRAMS	<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>\$1,878,800</u>	<u>\$1,421,583</u>	<u>\$457,217</u>	<u>\$17,874,052</u>	<u>\$17,239,500</u>	<u>\$634,552</u>
Other Revenue:						
State Match / Addendum	325,773	325,120	654	3,901,436	3,901,436	(0)
Grant Revenue	236,827	184,111	52,716	2,424,060	2,208,489	215,571
County Appropriations - Net	758,144	588,525	169,619	7,298,374	7,062,305	236,069
Departmental and Other Revenue	<u>151,942</u>	<u>145,825</u>	<u>6,117</u>	<u>1,521,123</u>	<u>1,749,901</u>	<u>(228,778)</u>
Total Other Revenue	<u>1,472,686</u>	<u>1,243,581</u>	<u>229,105</u>	<u>15,144,993</u>	<u>14,922,131</u>	<u>222,862</u>
Total Revenue	3,351,486	2,665,164	686,322	33,019,045	32,161,631	857,414
Expenses:						
Direct Expenses	2,404,356	1,949,972	454,384	24,142,923	22,909,906	1,233,017
Indirect Expenses	<u>807,828</u>	<u>792,390</u>	<u>15,438</u>	<u>7,877,182</u>	<u>9,341,725</u>	<u>(1,464,543)</u>
Total Expenses	<u>3,212,184</u>	<u>2,742,362</u>	<u>469,822</u>	<u>32,020,105</u>	<u>32,251,631</u>	<u>(231,526)</u>
Operating Income (Loss)	<u>139,303</u>	<u>(77,198)</u>	<u>216,500</u>	<u>998,940</u>	<u>(90,000)</u>	<u>1,088,940</u>
Nonoperating Gains (Losses):						
Interest Income	8,469	7,500	969	78,556	90,000	(11,444)
Donations and Gifts	3,825	0	3,825	43,192	0	43,192
Gain / (Loss) on Disposal of Assets	<u>0</u>	<u>0</u>	<u>0</u>	<u>14,977</u>	<u>0</u>	<u>14,977</u>
Total Nonoperating Gains / (Losses)	<u>12,294</u>	<u>7,500</u>	<u>4,794</u>	<u>136,725</u>	<u>90,000</u>	<u>46,725</u>
Operating Income / (Loss)	<u>\$151,597</u>	<u>(\$69,698)</u>	<u>\$221,294</u>	<u>\$1,135,665</u>	<u>\$0</u>	<u>\$1,135,664</u>

**NORTH CENTRAL HEALTH CARE
COMBINING STATEMENT OF REVENUES AND EXPENSES
FOR PERIOD ENDING DECEMBER 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>\$2,475,071</u>	<u>\$2,041,681</u>	<u>\$433,390</u>	<u>\$24,629,491</u>	<u>\$24,192,600</u>	<u>\$436,891</u>
Other Revenue:						
County Appropriations - Net	141,666	141,667	(1)	1,699,993	1,700,000	(7)
Departmental and Other Revenue	<u>25,687</u>	<u>34,833</u>	<u>(9,146)</u>	<u>501,402</u>	<u>417,999</u>	<u>83,403</u>
Total Other Revenue	<u>167,353</u>	<u>176,500</u>	<u>(9,147)</u>	<u>2,201,395</u>	<u>2,117,999</u>	<u>83,396</u>
Total Revenue	2,642,423	2,218,181	424,243	26,830,886	26,310,599	520,287
Expenses:						
Direct Expenses	1,879,611	1,584,613	294,998	19,908,197	18,696,313	1,211,884
Indirect Expenses	<u>658,124</u>	<u>645,864</u>	<u>12,260</u>	<u>7,402,632</u>	<u>7,614,286</u>	<u>(211,654)</u>
Total Expenses	<u>2,537,735</u>	<u>2,230,477</u>	<u>307,258</u>	<u>27,310,829</u>	<u>26,310,599</u>	<u>1,000,230</u>
Operating Income (Loss)	<u>104,688</u>	<u>(12,296)</u>	<u>116,984</u>	<u>(479,944)</u>	<u>(0)</u>	<u>(479,944)</u>
Nonoperating Gains (Losses):						
Interest Income	0	0	0	0	0	0
Donations and Gifts	244	0	244	6,836	0	6,836
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>244</u>	<u>0</u>	<u>244</u>	<u>6,836</u>	<u>0</u>	<u>6,836</u>
Operating Income / (Loss)	<u>\$104,932</u>	<u>(\$12,296)</u>	<u>\$117,228</u>	<u>(\$473,108)</u>	<u>(\$0)</u>	<u>(\$473,108)</u>

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

BANK	LENGTH	MATURITY DATE	INTEREST RATE	AMOUNT
Abby Bank	183 Days	01/05/2016	0.65%	\$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
People's State Bank	365 Days	08/21/2016	0.50%	\$500,000
BMO Harris	395 Days	08/26/2016	0.50%	\$500,000
Abby Bank	365 Days	08/29/2016	0.75%	\$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
People's State Bank	365 Days	10/30/2016	0.55%	\$500,000
Abby Bank	730 Days	02/25/2017	0.80%	\$500,000
CoVantage Credit Union	455 Days	03/30/2017	1.00%	\$500,000
CoVantage Credit Union	578 Days	05/07/2017	1.05%	\$500,000
CoVantage Credit Union	578 Days	07/28/2017	1.10%	\$300,000
Abby Bank	730 Days	10/29/2017	1.10%	\$500,000
CoVantage Credit Union	730 Days	11/18/2017	1.10%	\$500,000
Abby Bank	730 Days	12/30/2017	1.10%	\$500,000
TOTAL FUNDS AVAILABLE				\$9,800,000
WEIGHTED AVERAGE	483.15 Days		0.786% INTEREST	

NCHC-DONATED FUNDS

Balance Sheet

As of December 31, 2015

ASSETS

Current Assets

Checking/Savings

CHECKING ACCOUNT

Adult Day Services	5,180.38
Adventure Camp	798.41
Birth to 3 Program	2,035.00
Clubhouse	22,254.79
Community Treatment	10,666.86
Fishing Without Boundries	2,663.00
General Donated Funds	69,565.35
Housing - DD Services	1,370.47
Langlade HCC	3,226.33
Legacies by the Lake	
Music in Memory	1,848.25
Legacies by the Lake - Other	4,272.11
Total Legacies by the Lake	6,120.36
Marathon Cty Suicide Prev Task	11,850.53
National Suicide Lifeline Stipe	3,176.37
Northern Valley West	1,966.00
Nursing Home - General Fund	2,639.26
Outpatient Services - Marathon	101.08
Pool	12,201.69
Prevent Suicide Langlade Co.	2,444.55
Resident Council	111.05
United Way	1,159.34

Total CHECKING ACCOUNT 159,530.82

Total Checking/Savings 159,530.82

Total Current Assets 159,530.82

TOTAL ASSETS 159,530.82

LIABILITIES & EQUITY

Equity

Opening Bal Equity	123,523.75
Retained Earnings	59,745.02
Net Income	-23,737.95

Total Equity 159,530.82

TOTAL LIABILITIES & EQUITY 159,530.82

North Central Health Care Budget Revenue/Expense Report

Month Ending December 31, 2015

ACCOUNT DESCRIPTION	CURRENT MONTH ACTUAL	CURRENT MONTH BUDGET	YTD ACTUAL	YTD BUDGET	DIFFERENCE
<u>REVENUE:</u>					
TOTAL NET REVENUE	5,993,910	4,883,346	59,849,930	58,472,230	1,377,700
<u>EXPENSES:</u>					
Salaries and Wages	2,629,608	2,482,220	28,098,458	29,066,697	(968,239)
Fringe Benefits	886,451	1,010,376	10,739,999	11,832,000	(1,092,001)
Departments Supplies	644,401	432,217	6,503,099	5,180,100	1,322,999
Purchased Services	407,053	278,725	4,122,505	3,330,700	791,805
Utilitites/Maintenance Agreements	578,859	320,488	4,254,568	3,766,574	487,994
Personal Development/Travel	43,867	40,350	437,062	484,200	(47,138)
Other Operating Expenses	180,300	172,987	1,590,555	2,075,859	(485,304)
Insurance	38,870	48,258	502,180	579,100	(76,920)
Depreciation & Amortization	180,802	137,216	1,730,582	1,647,000	83,582
Client Purchased Services	<u>159,707</u>	<u>50,000</u>	<u>1,351,927</u>	<u>600,000</u>	<u>751,927</u>
TOTAL EXPENSES	5,749,919	4,972,838	59,330,934	58,562,230	768,704
EXCESS REVENUE (EXPENSE)	243,991	(89,493)	518,996	(90,000)	608,996

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

	<u>Current Month</u>	<u>Current Year To Date</u>	<u>Prior Year To Date</u>
<i>Inpatient:</i>			
Administrative Write-Off	\$12,922	\$174,044	\$26,892
Bad Debt	\$0	\$2,558	\$4,274
<i>Outpatient:</i>			
Administrative Write-Off	\$18,637	\$163,475	\$112,419
Bad Debt	\$713	\$4,489	\$20,291
<i>Nursing Home:</i>			
Daily Services:			
Administrative Write-Off	(\$6,500)	\$33,875	\$16,755
Bad Debt	\$17,987	\$43,296	\$12,626
Ancillary Services:			
Administrative Write-Off	(\$26,772)	\$35,833	\$15,335
Bad Debt	\$978	\$1,393	\$11,128
Pharmacy:			
Administrative Write-Off	\$0	\$0	\$0
Bad Debt	\$0	\$0	\$0
Total - Administrative Write-Off	(\$1,713.11)	\$407,226.15	\$171,401.00
Total - Bad Debt	\$19,676.82	\$51,735.52	\$48,319.00

**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	6,603	6,604	1	88.75%	88.76%
	Hospital	403	436	33	81.25%	87.90%
September	Nursing Home	6,390	6,257	(133)	88.75%	86.90%
	Hospital	390	455	65	81.25%	94.79%
October	Nursing Home	6,603	6,415	(188)	88.75%	86.22%
	Hospital	403	497	94	81.25%	100.20%
November	Nursing Home	6,390	6,227	(163)	88.75%	86.49%
	Hospital	390	439	49	81.25%	91.46%
December	Nursing Home	6,603	6,464	(139)	88.75%	86.88%
	Hospital	403	347	(56)	81.25%	69.96%

**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		61	62	62	60	61	62	60	58	53	54	62	53	61
Operating		48	36	33	47	46	46	40	31	41	43	31	27	31
Total	70	109	98	95	107	107	108	100	89	94	97	93	80	92
Average Daily Census:														
Nursing Home	213	210	215	213	205	203	204	206	213	209	207	207	209	208
Hospital	13	13	16	14	13	14	14	14	14	15	16	14	11	14
Days in Accounts Receivable:**	55-60 days	80	79	75	72	71	67	67	66	63	65	66	68	68
Direct Expense/Gross Patient Revenue**	55%-59%	61%	51%	59%	62%	65%	60%	65%	69%	65%	61%	65%	75%	63%
Write Offs**	.5%-.6%	0.18%	0.27%	0.32%	0.16%	0.59%	0.42%	0.46%	1.20%	1.30%	1.90%	2.10%	0.36%	0.60%
Excess Revenue (Expense):														
Actual		\$10,895	\$590,281	\$28,969	\$107,200	\$287,468	\$550,567	(\$427,189)	(\$385,697)	(\$188,447)	(\$251,721)	\$83,701	\$256,529	\$662,556
Budget		\$56,970	\$117,322	(\$12,015)	\$57,582	(\$82,358)	\$62,582	(\$9,938)	(\$46,385)	(\$687)	(\$22,938)	(\$38,136)	(\$81,994)	\$0
Prior Year-Actual		\$124,183	\$12,296	\$31,615	(\$294,589)	(\$17,820)	\$258,622	(\$46,087)	\$41,912	\$236,191	(\$256,783)	\$228,748	\$320,180	\$638,468

**Dash Board Outcomes

MEMO

TO: North Central Health Care Finance Committee
FROM: Brenda Glodowski
DATE: February 19, 2016
RE: Attached Financials

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

BALANCE SHEET

This area remained consistent with prior months.

STATEMENT OF REVENUE AND EXPENSES

The month of January shows a loss of \$385,756 compared to a budgeted loss of \$11,690 resulting in a negative variance of \$374,067.

Revenue fell below targets in several areas for January. The hospital census averaged 13 patients per day compared to the target of 14. The nursing home census averaged 208 per day compared to the target of 210. The nursing home Medicare census averaged 24 per day compared to the target of 23. This helps improve the nursing home daily revenue. The nursing home ancillary areas, however, fell below targets. Outpatient continues to fall below target due to staff vacancies.

Overall expenses exceeded budget targets. Most of the support programs were below target, but several of the direct areas exceeded targets. Salaries were over budget in the hospital and nursing home. There is also contract staffing in the hospital for January. State institutes are high for January as well as food, drugs, and recruitment.

Leadership will be working through plans to bring expenses back in line with revenues.

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

**NORTH CENTRAL HEALTH CARE
COMBINING STATEMENT OF NET ASSETS
JANUARY 2016**

	<u>51.42/.437 PROGRAM</u>	<u>NURSING HOME</u>	<u>TOTAL</u>	<u>TOTAL 31-Jan-15</u>
Current Assets:				
Cash and Equivalents	6,390,675	(595,552)	5,795,124	7,358,888
Short-Term Investments	9,800,000	0	9,800,000	7,004,735
Cash Approved for Capital Purchases	2,094,854	991,494	3,086,348	2,295,265
Donated Funds	157,725	0	157,725	183,884
Accounts Receivable:				
Patient - Net	3,912,966	3,981,048	7,894,014	8,500,969
State Grants	75,042	0	75,042	74,275
Other	102,774	0	102,774	481,093
Appropriations Receivable	85,299	0	85,299	56,039
Amounts Receivable From				
Third-Party Reimbursement Programs	480,000	150,000	630,000	540,499
Inventory	46,880	256,655	303,535	273,822
Other	<u>903,529</u>	<u>64,904</u>	<u>968,433</u>	<u>479,344</u>
Total Current Assets	<u>24,049,746</u>	<u>4,848,548</u>	<u>28,898,294</u>	<u>27,248,814</u>
Noncurrent Assets:				
Capital Assets	31,069,639	14,925,001	45,994,640	43,762,242
Accumulated Depreciation	<u>(23,036,002)</u>	<u>(11,022,152)</u>	<u>(34,058,153)</u>	<u>(32,485,295)</u>
Capital Assets - Net	8,033,638	3,902,849	11,936,487	11,276,946
Restricted Assets - Patient Trust Funds	25,902	31,956	57,857	<u>56,665</u>
Net Pension Assets	<u>4,846,938</u>	<u>0</u>	<u>4,846,938</u>	<u>0</u>
Total Noncurrent Assets	<u>12,906,477</u>	<u>3,934,805</u>	<u>16,841,282</u>	<u>11,333,612</u>
Deferred Outflows of Resources - Related to Pensions	<u>4,851,842</u>	<u>0</u>	<u>4,851,842</u>	<u>0</u>
TOTAL ASSETS AND DEFERRED OUTFLOWS OF RESOURCES:	<u>41,808,065</u>	<u>8,783,353</u>	<u>50,591,418</u>	<u>38,582,426</u>

**NORTH CENTRAL HEALTH CARE
COMBINING STATEMENT OF NET ASSETS
JANUARY 2016**

	<u>51.42/.437 PROGRAM</u>	<u>NURSING HOME</u>	<u>TOTAL</u>	<u>TOTAL 31-Jan-15</u>
Current Liabilities:				
Accounts Payable	3,104,763	0	3,104,763	3,458,249
Third Party Payable	366,667	0	366,667	390,000
Appropriations Advances	1,299,112	0	1,299,112	1,348,859
Accrued Liabilities:				
Salaries and Retirement	1,684,586	0	1,684,586	1,455,149
Payroll Taxes and Withholdings	178,199	0	178,199	169,991
Compensated Absences	1,497,936	0	1,497,936	1,526,267
Other Payables	71,380	0	71,380	72,806
Deferred Revenue - State Grants	<u>831,850</u>	<u>0</u>	<u>831,850</u>	<u>411,357</u>
Total Current Liabilities	<u>9,034,493</u>	<u>0</u>	<u>9,034,493</u>	<u>8,832,678</u>
Noncurrent Liabilities:				
Patient Trust Funds	<u>25,902</u>	<u>31,956</u>	<u>57,857</u>	<u>56,584</u>
Total Liabilities	<u>9,060,394</u>	<u>31,956</u>	<u>9,092,350</u>	<u>8,889,262</u>
Deferred Inflows of Resources - Related to Pensions	<u>84,873</u>	<u>0</u>	<u>84,873</u>	<u>0</u>
Net Assets:				
Invested in Capital Assets	8,033,638	3,902,849	11,936,487	11,276,946
Unrestricted	15,046,727	5,213,226	20,259,953	18,405,323
Restricted - Pension Benefit	9,603,512	0	9,603,512	<u>0</u>
Operating Income / (Loss)	<u>(21,079)</u>	<u>(364,678)</u>	<u>(385,757)</u>	<u>10,895</u>
Total Net Assets	<u>32,662,797</u>	<u>8,751,397</u>	<u>41,414,195</u>	<u>29,693,165</u>
TOTAL LIABILITIES, DEFERRED INFLOWS OF RESOURCES, AND NET ASSETS	<u>41,808,065</u>	<u>8,783,353</u>	<u>50,591,418</u>	<u>38,582,426</u>

**NORTH CENTRAL HEALTH CARE
COMBINING STATEMENT OF REVENUES AND EXPENSES
FOR PERIOD ENDING JANUARY 31, 2016**

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>\$3,444,072</u>	<u>\$3,598,770</u>	<u>(\$154,698)</u>	<u>\$3,444,072</u>	<u>\$3,598,770</u>	<u>(\$154,698)</u>
Other Revenue:						
State Match / Addendum	324,658	325,120	(462)	324,658	325,120	(462)
Grant Revenue	193,239	190,628	2,610	193,239	190,628	2,610
County Appropriations - Net	740,619	740,566	53	740,619	740,566	53
Departmental and Other Revenue	<u>161,401</u>	<u>200,733</u>	<u>(39,332)</u>	<u>161,401</u>	<u>200,733</u>	<u>(39,332)</u>
Total Other Revenue	<u>1,419,917</u>	<u>1,457,047</u>	<u>(37,130)</u>	<u>1,419,917</u>	<u>1,457,047</u>	<u>(37,130)</u>
Total Revenue	4,863,989	5,055,818	(191,828)	4,863,989	5,055,817	(191,828)
Expenses:						
Direct Expenses	3,937,586	3,639,744	297,842	3,937,586	3,639,744	297,842
Indirect Expenses	<u>1,324,510</u>	<u>1,435,264</u>	<u>(110,753)</u>	<u>1,324,510</u>	<u>1,435,264</u>	<u>(110,753)</u>
Total Expenses	<u>5,262,096</u>	<u>5,075,008</u>	<u>187,088</u>	<u>5,262,096</u>	<u>5,075,008</u>	<u>187,088</u>
Operating Income (Loss)	<u>(398,107)</u>	<u>(19,190)</u>	<u>(378,917)</u>	<u>(398,107)</u>	<u>(19,191)</u>	<u>(378,916)</u>
Nonoperating Gains (Losses):						
Interest Income	9,673	7,500	2,173	9,673	7,500	2,173
Donations and Gifts	2,678	0	2,678	2,678	0	2,678
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>12,351</u>	<u>7,500</u>	<u>4,851</u>	<u>12,351</u>	<u>7,500</u>	<u>4,851</u>
Operating Income / (Loss)	<u>(\$385,756)</u>	<u>(\$11,690)</u>	<u>(\$374,067)</u>	<u>(\$385,756)</u>	<u>(\$11,691)</u>	<u>(\$374,066)</u>

**NORTH CENTRAL HEALTH CARE
COMBINING STATEMENT OF REVENUES AND EXPENSES
FOR PERIOD ENDING JANUARY 31, 2016**

51.42/.437 PROGRAMS	<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>\$1,520,761</u>	<u>\$1,512,397</u>	<u>\$8,363</u>	<u>\$1,520,761</u>	<u>\$1,512,397</u>	<u>\$8,363</u>
Other Revenue:						
State Match / Addendum	324,658	325,120	(462)	324,658	325,120	(462)
Grant Revenue	193,239	190,628	2,610	193,239	190,628	2,610
County Appropriations - Net	598,953	598,899	54	598,953	598,899	54
Departmental and Other Revenue	<u>122,463</u>	<u>169,437</u>	<u>(46,975)</u>	<u>122,463</u>	<u>169,437</u>	<u>(46,975)</u>
Total Other Revenue	<u>1,239,312</u>	<u>1,284,084</u>	<u>(44,772)</u>	<u>1,239,312</u>	<u>1,284,084</u>	<u>(44,772)</u>
Total Revenue	2,760,073	2,796,482	(36,409)	2,760,073	2,796,482	(36,409)
Expenses:						
Direct Expenses	2,089,898	2,012,371	77,527	2,089,898	2,012,371	77,527
Indirect Expenses	<u>703,051</u>	<u>820,667</u>	<u>(117,615)</u>	<u>703,051</u>	<u>820,667</u>	<u>(117,615)</u>
Total Expenses	<u>2,792,949</u>	<u>2,833,037</u>	<u>(40,088)</u>	<u>2,792,949</u>	<u>2,833,037</u>	<u>(40,088)</u>
Operating Income (Loss)	<u>(32,876)</u>	<u>(36,556)</u>	<u>3,679</u>	<u>(32,876)</u>	<u>(36,556)</u>	<u>3,679</u>
Nonoperating Gains (Losses):						
Interest Income	9,673	7,500	2,173	9,673	7,500	2,173
Donations and Gifts	2,125	0	2,125	2,125	0	2,125
Gain / (Loss) on Disposal of Assets	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total Nonoperating Gains / (Losses)	<u>11,797</u>	<u>7,500</u>	<u>4,297</u>	<u>11,797</u>	<u>7,500</u>	<u>4,297</u>
Operating Income / (Loss)	<u>(\$21,079)</u>	<u>(\$29,056)</u>	<u>\$7,977</u>	<u>(\$21,079)</u>	<u>(\$29,056)</u>	<u>\$7,977</u>

**NORTH CENTRAL HEALTH CARE
COMBINING STATEMENT OF REVENUES AND EXPENSES
FOR PERIOD ENDING JANUARY 31, 2016**

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>\$1,923,312</u>	<u>\$2,086,373</u>	<u>(\$163,061)</u>	<u>\$1,923,312</u>	<u>\$2,086,373</u>	<u>(\$163,061)</u>
Other Revenue:						
County Appropriations - Net	141,666	141,667	(1)	141,666	141,667	(1)
Departmental and Other Revenue	<u>38,938</u>	<u>31,296</u>	<u>7,643</u>	<u>38,938</u>	<u>31,296</u>	<u>7,643</u>
Total Other Revenue	<u>180,604</u>	<u>172,962</u>	<u>7,642</u>	<u>180,604</u>	<u>172,962</u>	<u>7,642</u>
Total Revenue	2,103,915	2,259,335	(155,419)	2,103,916	2,259,335	(155,419)
Expenses:						
Direct Expenses	1,847,688	1,627,373	220,315	1,847,688	1,627,373	220,315
Indirect Expenses	<u>621,459</u>	<u>614,597</u>	<u>6,862</u>	<u>621,459</u>	<u>614,597</u>	<u>6,862</u>
Total Expenses	<u>2,469,147</u>	<u>2,241,971</u>	<u>227,176</u>	<u>2,469,147</u>	<u>2,241,971</u>	<u>227,176</u>
Operating Income (Loss)	<u>(\$365,232)</u>	<u>17,365</u>	<u>(\$382,596)</u>	<u>(\$365,231)</u>	<u>17,365</u>	<u>(\$382,596)</u>
Nonoperating Gains (Losses):						
Interest Income	0	0	0	0	0	0
Donations and Gifts	553	0	553	553	0	553
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>553</u>	<u>0</u>	<u>553</u>	<u>553</u>	<u>0</u>	<u>553</u>
Operating Income / (Loss)	<u>(\$364,679)</u>	<u>\$17,365</u>	<u>(\$382,043)</u>	<u>(\$364,678)</u>	<u>\$17,365</u>	<u>(\$382,042)</u>

NORTH CENTRAL HEALTH CARE
 REPORT ON AVAILABILITY OF FUNDS
 January 31, 2016

BANK	LENGTH	MATURITY DATE	INTEREST RATE	AMOUNT
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
People's State Bank	365 Days	08/21/2016	0.50%	\$500,000
BMO Harris	395 Days	08/26/2016	0.50%	\$500,000
Abby Bank	365 Days	08/29/2016	0.75%	\$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
People's State Bank	365 Days	10/30/2016	0.55%	\$500,000
Abby Bank	365 Days	01/06/2017	0.75%	\$500,000
Abby Bank	730 Days	02/25/2017	0.80%	\$500,000
CoVantage Credit Union	455 Days	03/30/2017	1.00%	\$500,000
CoVantage Credit Union	578 Days	05/07/2017	1.05%	\$500,000
CoVantage Credit Union	578 Days	07/28/2017	1.10%	\$300,000
Abby Bank	730 Days	10/29/2017	1.10%	\$500,000
CoVantage Credit Union	730 Days	11/18/2017	1.10%	\$500,000
Abby Bank	730 Days	12/30/2017	1.10%	\$500,000
TOTAL FUNDS AVAILABLE				\$9,800,000
WEIGHTED AVERAGE	473.82 Days		0.763% INTEREST	

NCHC-DONATED FUNDS

Balance Sheet

As of January 31, 2016

ASSETS

Current Assets

Checking/Savings

CHECKING ACCOUNT

Adult Day Services	5,180.38
Adventure Camp	798.41
Birth to 3 Program	2,035.00
Clubhouse	22,723.66
Community Treatment	10,666.86
Fishing Without Boundries	2,663.00
General Donated Funds	69,455.35
Housing - DD Services	1,370.47
Langlade HCC	3,226.33
Legacies by the Lake	
Music in Memory	1,848.25
Legacies by the Lake - Other	4,390.11
Total Legacies by the Lake	6,238.36
Marathon Cty Suicide Prev Task	11,850.53
National Suicide Lifeline Stipe	3,176.37
Northern Valley West	1,966.00
Nursing Home - General Fund	2,541.99
Outpatient Services - Marathon	101.08
Pool	11,001.12
Prevent Suicide Langlade Co.	2,444.55
Resident Council	111.05

Total CHECKING ACCOUNT 157,550.51

Total Checking/Savings 157,550.51

Total Current Assets 157,550.51

TOTAL ASSETS 157,550.51

LIABILITIES & EQUITY

Equity

Opening Bal Equity	123,523.75
Retained Earnings	35,991.07
Net Income	-1,964.31

Total Equity 157,550.51

TOTAL LIABILITIES & EQUITY 157,550.51

North Central Health Care Budget Revenue/Expense Report

Month Ending January 31, 2016

ACCOUNT DESCRIPTION	CURRENT MONTH ACTUAL	CURRENT MONTH BUDGET	YTD ACTUAL	YTD BUDGET	DIFFERENCE
<u>REVENUE:</u>					
TOTAL NET REVENUE	4,863,989	5,055,818	4,863,989	5,055,817	(191,828)
<u>EXPENSES:</u>					
Salaries and Wages	2,667,795	2,584,868	2,667,795	2,584,868	82,927
Fringe Benefits	959,807	957,530	959,807	957,530	2,277
Departments Supplies	480,623	466,527	480,623	466,527	14,096
Purchased Services	353,821	275,981	353,821	275,981	77,840
Utilitites/Maintenance Agreements	366,456	337,097	366,456	337,097	29,360
Personal Development/Travel	34,815	39,229	34,815	39,229	(4,415)
Other Operating Expenses	124,430	153,317	124,430	153,317	(28,887)
Insurance	35,593	47,292	35,593	47,292	(11,699)
Depreciation & Amortization	136,457	138,167	136,457	138,167	(1,710)
Client Purchased Services	<u>102,300</u>	<u>75,000</u>	<u>102,300</u>	<u>75,000</u>	<u>27,300</u>
TOTAL EXPENSES	5,262,096	5,075,008	5,262,096	5,075,008	187,088
EXCESS REVENUE (EXPENSE)	(398,107)	(19,190)	(398,107)	(19,191)	(378,915)

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

	<u>Current Month</u>	<u>Current Year To Date</u>	<u>Prior Year To Date</u>
<i>Inpatient:</i>			
Administrative Write-Off	(\$17,517)	(\$17,517)	\$0
Bad Debt	\$903	\$903	\$0
<i>Outpatient:</i>			
Administrative Write-Off	(\$17,754)	(\$17,754)	\$7,141
Bad Debt	\$690	\$690	\$30
<i>Nursing Home:</i>			
Daily Services:			
Administrative Write-Off	(\$3,477)	(\$3,477)	\$0
Bad Debt	\$2,952	\$2,952	\$2,507
Ancillary Services:			
Administrative Write-Off	(\$1,672)	(\$1,672)	\$0
Bad Debt	\$11	\$11	\$0
<i>Pharmacy:</i>			
Administrative Write-Off	\$0	\$0	\$0
Bad Debt	\$0	\$0	\$0
Total - Administrative Write-Off	(\$40,420.49)	(\$40,420.49)	\$7,141.00
Total - Bad Debt	\$4,554.75	\$4,554.75	\$2,537.00

**North Central Health Care
2016 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	6,510	6,441	(69)	87.50%	86.57%
	Hospital	434	402	(32)	87.50%	81.05%
February	Nursing Home			0	0.00%	0.00%
	Hospital			0	0.00%	0.00%
March	Nursing Home			0	0.00%	0.00%
	Hospital			0	0.00%	0.00%
April	Nursing Home			0	0.00%	0.00%
	Hospital			0	0.00%	0.00%
May	Nursing Home			0	0.00%	0.00%
	Hospital			0	0.00%	0.00%
June	Nursing Home			0	0.00%	0.00%
	Hospital			0	0.00%	0.00%
July	Nursing Home			0	0.00%	0.00%
	Hospital			0	0.00%	0.00%
August	Nursing Home			0	0.00%	0.00%
	Hospital			0	0.00%	0.00%
September	Nursing Home			0	0.00%	0.00%
	Hospital			0	0.00%	0.00%
October	Nursing Home			0	0.00%	0.00%
	Hospital			0	0.00%	0.00%
November	Nursing Home			0	0.00%	0.00%
	Hospital			0	0.00%	0.00%
December	Nursing Home			0	0.00%	0.00%
	Hospital			0	0.00%	0.00%

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

December 17, 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 at 11:00 AM, roll call taken, and a quorum noted.

Minutes

Motion/second, Nye/Robinson, to approve the minutes of the 11/19/15 Finance, Personnel & Property Committee meeting. Motion carried.

Financials

- Investments increased.
- Accounts receivable was up slightly which was anticipated with ICD-10 implementation on 10/1/15.
- NetSmart has been onsite working on the billing system; billing has been caught up through October. NetSmart will return the week of January 18.
- Revenues:
 - Showed a small gain for the month of November; revenues were close to target.
 - Nursing home consistent with 207 census.
 - Medicare census increased to 21 with target of 26; today average is 23.
 - Hospital average is at 14 with a target of 13.
 - Overall revenue is slightly above target.
- Expenses:
 - Expenses were over budget for several months but there has been improvement.
 - Salaries overall are close to budget.
 - Expenses are down in support areas.
 - Expenses overall are below target.
 - Direct areas include additional positions for criminal justice system.
 - Contracted expenses will be finishing up in the nursing home.
- **Motion**/second, Nye/Zriny, to approve the monthly financial statements. Motion carried.

Write-offs

- Anticipate December could be higher as compared to previous two months; much work continues to be done to clean up however, numbers are small.

- Changing from private pay to Medicaid is a challenge in the nursing home; educating families on the process is an important step for a timely transition; one staff member in enrollment services is dedicated to assist families with the applications and process.

CFO report

- Associated Bank is requesting a verification of 'authorized signatures' on our accounts.
- **Motion**/second, Zriny/Weaver, to approve the CFO and CEO as the authorized signers for the NCHC bank accounts. CFO may also designate Business Operations Director on some accounts. Motion carried.
- Working with the IT consultant; anticipating their recommendations in mid-January.

Financial targets for 2016 Dashboard

- Full review of the Dashboard will be provided in the Board meeting today.
- Two target changes for 2016 are being recommended:
 - Direct Expense/Gross Revenue: 58-62. Based on budget, higher than 2015 targets.
 - Days in Accounts Receivable currently is 55-60 days; based on industry standard. Our current target is 66.
- **Motion**/second, Zriny/Weaver, to approve the changes in targets for: Days in AR to 60-65, and 58-62 for Direct Expense/Gross Revenue. Motion carried.

2015 employee incentives

- Incentive program criteria was reviewed and discussed.
- **Motion**/second, Olkowski/Nye, there will not be an employee incentive provided as the criteria has not been met. Motion carried.

2015 Audit Report GASB 68

- Governmental Accounting Standards Board 68 (GASB 68) has a required change regarding pension and reporting.
- Audit report will show 10 years' worth of information.

Drill down data on state institutions

- Defer review and presentation at Board meeting

Future agenda items

- Committee and Board orientation relative to fund balances and appropriations
- Marathon County Board education i.e. 'walk through financials'

Motion/second, Zriny/Weaver, to adjourn at 11:45 a.m. Motion carried.

dko

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

January 28, 2016

12:00 p.m.

NCHC – Wausau Board Room

Present:

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

Also Present: Gary Bezucha, Brenda Glodowski, Kim Gochanour, Michael Loy, Becky Schultz, Laura Scudiere, Craig McEwen, Debbie Osowski, Ashley Williams

Meeting was called to order at 12:01 p.m.

Welcome and introduction of Randy Balk, new board member.

A brief presentation was provided: ‘Telling Our Story’. A method NCHC can use to let the community know about NCHC, provide employer awareness, and engage with staff through this video. The video was developed in collaboration with U.S. Workstories. Staff involved in video were recognized and presented with a Certificate of Appreciation.

Consent agenda

- **Motion/second**, Nye/Matucheski, to approve the consent agenda which includes the December financial statements, 12/17/15 Finance, Personnel & Property Committee meeting minutes, 12/17/15 NCCSP Board meeting minutes, and the CEO Report.
- **Motion/second**, Metter/Burgener, to pull the CEO Report from the consent agenda for discussion on the Psychiatry Residency program. Motion carried.
- Clarification was provided on the financial statement relating to the new requirement from GASB 68. The audit report will provide additional information about this latest requirement.
- Motion carried to approve the consent agenda.

CEO Report

- Concern expressed that the current issues with Marathon County will have an impact on the progress being made with developing the psychiatry residency program.
- NCHC will do everything possible to keep this important program from be stalled. It is important to the community to develop this residency program not only to help fill the need for psychiatry services, but many families stay in the community after completing the residency program. We do not want to jeopardize this valuable resource.

Chairperson’s report

- **Motion/second**, Burgener/Miller, to approve the 1/12/16 Executive Committee meeting minutes.

- Question asked about the purpose of having the Board approve committee minutes. Noted that Executive Committee has been empowered to act between Board meetings however the Board can ratify those actions if necessary.
- A legal opinion on whether the Board is to approve Committee minutes was requested.
- Until a legal opinion is received it was recommended that members of the committee should move and second the motions to approve the minutes of that committee.
- Motion carried to approve the 1/12/16 Executive Committee meeting minutes.
- Marathon County Resolution #R-8-16 passed unanimously by the Marathon Board on 1/19/16.
 - Mr. Zriny met with NCHC Leadership Team and Leadership on 1/20/16; provided a brief presentation; responded to many questions.
 - The commitment of the staff was very apparent; they are not defeated, they are focused on our mission, and they want to know what they can do to demonstrate the success of NCHC.
 - Mr. Zriny and Ms. Burgener are committed to participate in management meetings whenever possible to show support and commitment to the staff, answer questions, etc.
- Marathon County 2016 Work Plan was approved by Marathon County having been identified as the most important issues for Brad Karger to work on in 2016 and include: 1) Support the NCHC Task Force in Defining the Relationship the County wants with NCHC; 2) Oversee the Aquatic Therapy Study Designed to Produce a Cost Estimate Sufficiently Specific and Reliable to Base a Borrowing Resolution Upon; 3) Oversee the Nursing Home remodel; 4) Develop and implement innovative approaches, which improve the adult and juvenile justice systems, as a means to creating Marathon County as the safest county in Wisconsin. Mr. Karger will be involved in the human services model study and the designated resource person.

Quality Committee report

- Organizational Quality Dashboard was reviewed.
 - **Motion**/second, Nye/Burgener, to approve the Organizational Quality Dashboard. Motion carried.
- 2016 Quality Plan was reviewed and recommended for approval by the committee.
 - Structures in the plan have been in place for over 3 years; committee feels structures are serving us well; no recommendations to major changes to the quality structure.
 - Pages 9 -11 are recommendations which mirrors operational priorities previously shared.
 - Recommendations on focus areas to drive results include:
 - Raise our levels of integration of process improvement methodology i.e. trained group of advanced facilitators to drive this process who will be leveraged on key process improvement projects.
 - Patient Experience: Satisfaction Percentile Ranking. Every month all employees will own this item and anticipate it will drive performance for very best experiences.
 - Four community measures are noted – one specific to crisis treatment; one pertaining to criminal justice outcomes-working with Deb Hager to determine specific measure.
 - **Motion**/second, Miller/Nye, to approve the 2016 Quality Plan. Board is ultimately responsible for quality of services which is delegated to the Quality Committee. Targets get changed as we look to improve measures and based on benchmark data; critical to be at state and national targets as a minimum. Motion carried.
- 2016 Compliance Plan
 - Plan specifies how we will monitor plans of NCHC to adhere to professional and licensing requirements, billing standards, etc. A Compliance Plan is required to be reviewed annually.
 - Only minor grammatical changes have been made.

- **Motion**/second, Kelly/Rusch to approve the 2016 Compliance Plan.
- Board members expressed concern with the need to investigate the use of pictures as protected health information following a recent meeting at the county board level with law enforcement. Corporate Counsel determined the picture was taken during the law enforcement visit, and not a health care visit, therefore was not violating HIPAA. Board felt it is important to determine whether this is a reportable incident to the Office of Inspector General. Motion carried.
- Crisis Process Improvement Update
 - Laura Scudiere, Becky Schultz, and Ashley Williams provided an update on the Crisis Process Improvement team meetings.
 - NCHC staff is committed to resolve concerns.
 - Quality Committee recognized the opportunity for improvement in this area last year and launched the process improvement effort.
 - Service delivery model and possible long term solutions are being evaluated; a financial plan would be developed incorporating any changes.
 - Identified that there is an increasing trend of the number of individuals needing mental health services; number of advanced level providers is decreasing.

Nursing Home Operations Committee

- **Motion**/second, Burgener/Metter to approve the 12/18/15 NHOC minutes. Motion carried.

Presentation on Dementia Care

- NCHC staff Cagney Martin, Activity Therapist of 13 years, and Merry Wimmer, Social Worker of 25 years, provided a presentation on dementia care that was also provided to the State Task Force on Dementia Care. The goal is to refocus or change our focus on how we look at dementia care.

Marathon County Agreement for Mental Health Services to Marathon County Offenders

- **Motion**/second, Metter/Rusch, to request the management team and the Executive Committee to work together on recommendations on how to make this agreement better. This document raises concerns that criminal justice takes priority over the mental health needs of the community. Motion carried.

Mr. Zriny asked to change the process and not move into closed session. Executive Committee recommends the following actions based on Marathon County's Resolution R-8-16:

- 1) Pause CEO search with Witt Kieffer
 - 2) Name an interim CEO and negotiate a contract
 - 3) Establish transitional role for Gary Bezucha
 - 4) Establish a 28 week plan to meet needs of three counties while informing them of operational gains and successes
- **Motion**/second, Zriny/Burgener, to approve the recommendations of the Executive Committee. Following discussion motion carried.

Future agenda items

1. Understanding 51.42 system and 3-county contract with Attorney John Fischer
2. Marathon County Sheriff's Dept. RFP for new medical staff in jail

Motion/second, Metter/Matucheski, to adjourn the meeting at 2:28 p.m. Motion carried.

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

January 27, 2016

2:30 PM

NCHC – Wausau Campus

PRESENT: Jeff Zriny, Ron Nye, Jean Burgener

EXCUSED: Bob Weaver

ALSO PRESENT: Gary Bezucha, Michael Loy

AGENDA:

1. The meeting was called to order by Jeff Zriny at 2:34 PM and a quorum was noted.
2. Marathon County Resolution R-8-16: Approving Steps Toward Withdrawal of Marathon County from the Tri-County Joint Contract which creates the North Central Community Services Program Board and Termination of Marathon County's Relationship with NCHC: There was lengthy discussion regarding the resolution and its potential impact on service delivery and costs. The Executive Committee agreed to seek input from the full board at tomorrow's meeting.
3. It was moved by Jean Burgener and seconded by Ron Nye at 3:08 PM to go into closed session pursuant to 19.85(1)(c) Wis. Stats. For the purpose of considering employment, promotion, compensation or performance evaluation of any public employee over which the governmental body has jurisdiction or exercises responsibility, to wit: CEO recruitment and transition plan. Roll call vote was taken and results were as follows:
 - a. Ron Nye: yes
 - b. Jean Burgener: Yes
 - c. Jeff Zriny: Yes
4. At 4:20 PM the committee voted to come out of closed session.
5. Report out of closed session:
 - a. The committee will take to the board in closed session a resolution for a transition plan for an interim CEO.
 - b. The committee will also recommend to the board that the organization undertake a 28 week plan to bring about changes and educate Marathon County board members regarding the potential implications of exiting the Tri-County agreement.
6. It was moved by Jean Burgener and seconded by Ron Nye for adjournment and the meeting was adjourned by Jeff Zriny at 4:33 PM.

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

February 9, 2016

10:30 AM

NCHC – Wausau Campus

PRESENT: Jeff Zriny, Bob Weaver, Jean Burgener, Ron Nye (via phone)

ALSO PRESENT: Gary Bezucha, Michael Loy

AGENDA:

1. The meeting was called to order by Chairman Jeff Zriny at 10:35 AM.
2. All members of the executive committee were present – Ron Nye by phone.
3. A motion was made by Bob Weaver, seconded by Jean Burgener, to approve the minutes from the January 12, 2016 and January 27, 2016 Executive Committee meetings. Motion carried.
4. Gary Bezucha presented the CEO report.
5. The committee discussed the Marathon County Agreement for Mental Health Services to Marathon County Offenders which was approved by the Marathon County board. It was concluded that the executive team review the contract for proposed changes in recommendations to Marathon County. The committee discussed the development of a 32-week work plan for the NCHC executive team. A separate Executive Committee meeting with NCHC leadership will be conducted on Monday, February 15, 2016 to discuss this work plan.
6. A motion was made by Jean Burgener and seconded by Bob Weaver, to go into closed session , pursuant to §19.85(1)(c) Wis. Stats. for the purpose of considering employment, promotion, compensation or performance evaluation of any public employee over which the governmental body has jurisdiction or exercises responsibility, to wit: CEO Recruitment and Transition Plan. Motion carried.
7. A motion was made by Bob Weaver and seconded by Jean Burgener to return to open session. Motion carried.
8. The committee met with Michael Loy to offer him the interim CEO position. After this discussion, the Executive Committee met with Gary Bezucha to discuss the interim CEO transition.
9. At 12:05 PM a motion was made by Jean Burgener and seconded by Bob Weaver to adjourn. Motion carried.

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

February 15, 2016

12:00 PM

NCHC – Wausau Campus

PRESENT: Jeff Zriny, Bob Weaver, Jean Burgener, Ron Nye

ALSO PRESENT: Gary Bezucha, Michael Loy, Laura Scudiere, Brenda Glodowski, Kim Gochanour, Becky Schultz

AGENDA:

1. The meeting was called to order by Vice Chair Jean Burgener at 10:15 PM in Jeff Zriny's absence. Jeff arrived at 1:00 PM from another meeting.
2. The purpose of the meeting is to develop a 30 week plan to address the key issues facing North Central Health Care (NCHC) and to develop a communication strategy to keep the Marathon County board apprised of service enhancements and the scope of service provided by NCHC under the tri-county agreement.
3. A motion was made by Ron Nye and seconded by Bob Weaver to adjourn at 3:20 PM.



North Central Health Care

Person centered. Outcome focused.

QUALITY OUTCOME DASHBOARD

DEPARTMENT: NORTH CENTRAL HEALTH CARE

FISCAL YEAR: 2016

PRIMARY OUTCOME GOAL	Continuous Improvement Target	Benchmark	↑ ↓	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD	2015
PEOPLE																	
Vacancy Rate	6-8%	N/A	↓	8.0%												8.0%	7.6%
Employee Turnover Rate*	20-23%	17%	↓	19.6%												19.6%	
SERVICE																	
Patient Experience: Satisfaction Percentile Ranking	70-84th Percentile	N/A	↑	53rd												53rd	51st
Community Partner Satisfaction	75-80%	N/A	↑	\												\	
CLINICAL																	
Nursing Home Readmission Rate	11-13%	18.2%	↓	13.8%												13.8%	
Psychiatric Hospital Readmission Rate	9-11%	16.1%	↓	19.5%												19.5%	
AODA Relapse Rate	18-21%	40-60%	↓	30.0%												30.0%	
COMMUNITY																	
Crisis Treatment: Collaborative Outcome Rate	90-97%	N/A	↑														
Criminal Justice Outcome Measure-TBD			↑														
Access to Behavioral Health Services	90-95%	NA	↑	58%												58%	
Recidivism Rate for OWI	27-32%	44.7%	↓	22.6%												22.6%	
FINANCE																	
Direct Expense/Gross Patient Revenue	58-62%	N/A	↓	71%												71%	
Days in Account Receivable	60-65	54	↓	70												70	

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.
Employee Turnover Rate	Percent of employee terminations (voluntary and involuntary) of the total workforce. Monthly figures represent an annualized rate. <i>Benchmark: Society of Human Resource Management (SHRM) for the north central region of the U.S.</i>
SERVICE	
Patient Experience: Satisfaction Percentile Ranking	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	Percentage of "Good and Excellent" responses to the Overall Satisfaction question on the survey.
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 Assisted 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>
COMMUNITY	
Crisis Treatment: Collaborative Decision Outcome Rate	Total number of positive responses (agreement with crisis response and plan) on by referring partners on the Crisis Collaboration Summary divided by total cases by referring partners.
Criminal Justice System Service	
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 document: • 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 - within 14 days of referral • Prevocational Services - within 2 weeks of receiving required enrollment document: • 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>



North Central Health Care

Person centered. Outcome focused.

**HOSPITAL
UTILIZATION REVIEW
PLAN**

NORTH CENTRAL HEALTH CARE PSYCHIATRIC HOSPITAL UTILIZATION REVIEW PLAN

SUBJECT: UTILIZATION REVIEW PLAN

PURPOSE: The Utilization Review Plan of North Central Health Care (NCHC) is developed by the Utilization Review Committee to identify trends of under-utilization, over-utilization or lack of continuity between services, and approved for implementation by the Medical Staff, Administration, and the Governing Body. The plan has several purposes:

1. To assure maximum allocation of hospital inpatient services, resources, and optimal patient care regardless of the patient's financial status.
2. To assist in the maintenance of high quality cost effective patient care.
3. To monitor and evaluate the medical necessity and appropriateness of inpatient services and level of care provided.
4. To identify potential utilization-related problems by an ongoing review process for the appropriateness and medical necessary of admissions or continued stays.
5. To monitor that discharge planning is initiated upon admission and is appropriate to the needs of the patient.
6. To support appropriate treatment and discharge decisions are made in response to the identified care required by the patient, regardless of recommendations made by an external agency.
7. To make recommendations to appropriate administration and/or the Medical Director to eliminate inefficient or unnecessary utilization of services.

AUTHORITY: The development and implementation of the Utilization Review Program has been authorized by the Governing Board and approved by the Medical Staff Bylaws.

MISSION: The NCHC programs serve patients who have psychiatric or substance abuse illnesses and whose adaptive functioning is moderately to severely impaired. These patients require continuous nursing supervision for response to treatment and can be expected to benefit from an active treatment designed to improve their adaptive functioning, to prepare the patient for placement in a less restrictive level of care, and/or to prevent further deterioration.

SCOPE OF SERVICE: The Utilization Review Committee of NCHC is a standing Committee of the Hospital with oversight by the Governing Board. Oversight of

Utilization Review is one of the functions provided by the Quality Committee. A summary of the Utilization Review Committee is provided to the Quality Committee on a quarterly basis. The Committee reviews services provided to patients by NCHC medical and professional staff. This includes, but is not limited to, the medical necessity of admissions, duration of continued stay, professional services provided, including medications, discharge planning, and the efficient use of personnel and facilities in order to promote maximum treatment benefit. All admissions are reviewed in accordance with federal and state regulations governing utilization review for Medicare and Medicaid beneficiaries.

CONFLICT OF INTEREST: No member of the Utilization Review Committee participates in the review of a case in which he/she has been directly responsible for the care of the patient.

CONFIDENTIALITY: The proceedings of the Utilization Review Committee and documents are protected under the Wisconsin Peer Review Statutes, 146.37 and 146.38 to assure confidentiality, that patient references will be only a medical record number, and physician references will be only an assigned confidential code number. The Utilization Review Committee follows all HIPAA requirements.

MEMBERSHIP: The Membership of the Utilization Review Committee consists of the following members:

- Chairperson
- Director of Behavioral Health Services
- Senior Executive of Human Service Operations
- Senior Executive of Quality and Compliance
- Registered Nurses
- Social Workers/Case Managers
- Director of Information Services
- Director of Patient Account

The Committee reports to the Quality Committee, Medical Staff, Administration, and the Board of Directors.

FREQUENCY OF MEETINGS: The Utilization Review Committee meetings are held quarterly with the date/time determined by the Chairperson. Additional meetings may be called at the discretion of the Chairperson.

RECORDS AND REPORTS: The following reports are kept:

1. Minutes of each meeting are prepared after each meeting, distributed, reviewed at the next meeting, and approved by the Committee. Minutes will include the

- names of committee members present, date and duration of the meeting, a summary of review of admissions, continued stays, number of avoidable bed days, cases discussed (identified by patient number), any focused reviews, and the recommendations of reviews/actions of the Committee.
2. Quarterly Utilization Review minutes are reviewed at the next meeting of the Quality Committee.

CHAIRPERSON: The Chairperson is a member of the medical staff and is responsible for signing the meeting minutes of the Utilization Review Committee. The Chair also reports back to the Medical Staff Committee.

UTILIZATION REVIEW COORDINATOR: The Director of Behavioral Health Services acts as the Utilization Review Coordinator and is responsible for supervising the screening activities performed by the Utilization Review staff, which includes the social work staff and nursing staff.

UTILIZATION REVIEW ASSESSMENT BY THE UTILIZATION REVIEW COORDINATOR:

The process of measuring and assessing the use of professional care, services, procedures and facilities including the medical necessity and appropriateness of:

- Necessity of admission
- Level of care
- Appropriate utilization of resources
- Continued stay/multiple encounters
- Discharge/post hospital care referrals
- Readmissions
- Evaluation of specific cases, patterns, and trends indicating over-utilization
- Excessive resource use
- Intervention to prevent or resolve utilization problems adversely affecting the balance between quality and minimized risk in care delivery.
- Performance improvement team activities to improve systems and processes associated with inefficient or inappropriate delivery of care and services.

CASE MANAGEMENT/DISCHARGE PLANNING ACTIVITIES:

- Screens patients from time of admission for potential discharge and aftercare needs.
- Assesses the patient's ability to participate after discharge in activities of daily living and maintenance of functional status, and the family's ability to provide assistance
- Develops a post discharge plan that will support the gains made during hospitalization that can be adjusted as appropriate.
- Arranges for post discharge follow-up and continuity of care as needed.

DENIALS: All psychiatric hospital denials will be reviewed by the Utilization Review Committee. Patient accounts will notify the Director of Behavioral Health Services. Denials will be monitored for trends and feedback will be provided to medical staff based on outcomes.

EVALUATION OF THE UTILIZATION REVIEW PROGRAM: The Hospital Utilization Review Program must be reviewed annually and updated, or modified as necessary, based upon ongoing evaluation of the utilization review and quality improvement activities. The evaluation of the Utilization Review Program and its effectiveness in allocating resources must be documented and the results reported to the Quality Committee, Medical Staff, Administration, and the Governing Board.

North Central Health Care

Utilization Review Plan

Date: February 25, 2016

Approved By:

Gary Bezucha, CEO

**Ron Nye, Chair,
Board of Directors**

Dr. Gabriel Ticho, Medical Director

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

January 21, 2016, 10:30 a.m.

NCHC – Wausau Campus

Present: Darren Bienvenue, Holly Matucheski, Dr. Eric Penninman

Excused: Dr. Gabriel Ticho

Also present: Becky Schultz, Michael Loy, Katlyn Coles, Laura Scudiere

The meeting was called to order at 10:37 a.m.; roll call was noted and a quorum declared. Moments of Excellence were shared.

Minutes

- **Motion**/second by Bienvenue /Matucheski to approve the minutes of the September 17, 2015, meeting. Motion carried.

Outcome Data/Safety

- The Committee reviewed organization-wide and program-specific outcome data and safety data. Data measures and opportunities for improvement discussed.
 - Employee turnover rate showing decrease. Areas most affected by high turnover continue to be in the Nursing Home programs with regard to front line staff.
 - Trend noted of not hitting external patient satisfaction rating. A high emphasis will be focused on with regard to patient satisfaction for 2016.
 - Continue to see difficulty with regard to hiring of counselors with AODA certification.
 - Efforts are being made to elevate confidence in Crisis and Community Treatment staff and support educational efforts to grow employees skill set within NCHC.
 - Working on training, developing and organizing clinical supervision team.
 - Continue to focus on decrease of re-hospitalization rate.
 - Analysis conducted, discovered that nurses were not consistently using SBAR (Situation Background Analysis Recommendation) communication with physicians, directly impacting necessity of re-hospitalization rate.
 - All nurses have been re-educated on SBAR usage and its importance.
 - Safety information discussed. No trends noted.
- **Motion**/second by Bienvenue /Matucheski to approve the Outcome Data as presented. Motion carried.
- **Motion**/second by Bienvenue /Matucheski to approve the Safety Information Motion carried.

Closed Session

- **Motion**/second by Bienvenue /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 11:10 a.m. Roll Call taken, Yes=3, No=0.

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

2016 Quality Plan and Policy

- 2016 Quality Plan and Policy discussed.
- Updates discussed.
- Process Improvement Team initiatives discussed.
- 2016 Action Plan discussed. Recommended to Board the three following key operational priorities for 2016; Service Excellence, Behavioral Health Center Excellence, and Electronic Medical Record Operability.
 - Focus on care models for Crisis care to implement improvements.
 - Service Excellence focused on an individual level and as a group for performance-based evaluations.
 - Most critical issue for EMR is in Tier system causing barrier to quality, resulting in approach to fix barrier issues as a primary objective for 2016. Examples of barrier; system kicking providers out when composing progress notes.
 - ECS Infrastructure has been compromised by over customization of system.
 - Goal to eventually convert all patient charts to chartless system.
 - Accountability measure of 75% reduction in paper documents for 2016.
 - Advance process improvement methodology.
 - Advance data measures across service lines.
 - Continue to develop Leadership group to support objectives and excellence in quality plan.
 - Recommended measures for 2016:
 - Employee vacancy 6%-8% initially.
 - Employee turnover rate 20%-23%.
 - Patient experience and satisfaction. 70th-84th percentile.
 - Community partner experience satisfaction. 75%-80%.
 - Nursing Home re-admission rate 11%-13%.
 - Psychiatric Hospital re-admission rate. 9%-11%.
 - AODA Relapse rate. 18%-21%.
 - Crisis services collaborative outcome rate. 90%-97% target.
 - Criminal Justice outcome.
 - Sorting through specific criminal justice measures. Exact measure to be determined. Based off Marathon County recommendation.
 - Access to Behavioral Health services. 90% - 95%.
 - Recidivism rate for OWI. 27%-32%.
 - Direct expense/gross patient revenue. 58%-62%
 - Days in Accounts Receivable. 60-65 Days.
- **Motion** / second by Matucheski/Bienvenue to submit Crisis Services to measure to Board. Motion carried.

Corporate Compliance Plan

- Corporate Compliance Plan approved.
- **Motion**/second by Matucheski/Bienvenue to submit Corporate Compliance Plan to Board.
Motion carried.

Process Improvement Project- Crisis Services

- Process Improvement Project discussed and recommended to be a standing item on agenda.

Committee Membership

- Committee membership state discussed.

Future Agenda Items

- 2016 Action Plan items (Service Excellence, Behavioral Health Center Excellence, and Electronic Medical Record Operability) to be standing items on future agenda for 2016.
- **Motion**/second by Matucheski/Bienvenue to adjourn at 12:10 a.m. Motion carried.

K/C

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

January 12, 2016

10:30 a.m.

NCHC – Wausau Campus

Present:

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

Also Present: Gary Bezucha, Becky Schultz, Laura Scudiere, Brenda Glodowski, Janelle Hintz, Debbie Osowski

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

Introduction of Janelle Hintz, Birth to 3 Director.

Consent Agenda

- **Motion**/second, Kelly/Rusch, to approve the consent agenda which includes the 12/11/15 HSOC meeting minutes and financial update. Motion carried.

Human Services Operations Report

- In light of what is transpiring at the county level, evaluating the human services delivery and the possibility of dissolving the tri-county agreement as of 1/1/18 and moving towards a human service model, the work of this committee is critical.
- The importance of having Sheriff Scott Parks or a designee from law enforcement at this meeting is also critical.
- This committee has organizational responsibility for crisis, psychiatric hospital, etc. in working with county leadership to provide mental health services for the community which includes the criminal justice system.
- Committee members need to be a communication link between community and NCHC.
- We will need to determine what services to provide the criminal justice system to better meet their needs, reduce recidivism, and address mental health. We have already begun making changes in jail services.
- HSO Report revisions:
 - Success stories (continue on quarterly basis)
 - Action plan oriented report with goals and progress (each meeting)
 - Individuals served by program and trends; include referrals received, number served, access by program, etc. definitions

Crisis Process Improvement update

- Crisis Process Improvement team, which consists of Marshfield and Aspirus hospital systems, Marathon and Langlade Sheriff's Departments, Wausau Police Department, Bridge Clinic, and NCHC, has been meeting weekly since October 2015.
- Discussed current state issues, learned each other's 'languages and terminology', identified specific issues to address and improve the system for each county.

- Crisis Intervention Training (CIT) will be completed for law enforcement on how to de-escalate and deal with some mental health issues. Training will be on-going for officers. Training is being coordinated by Marathon County and will reach to three county area.
- An evaluation on the trainings and actions plans will also be developed. Baseline measures have been identified to monitor progress.
- Looking to move the treatment model (currently we have an assessment/triage model) to a care model (no refusal model). We want to be able to monitor the support and progress; reduce the need for additional law enforcement, reduce bouncing between hospital systems; and provide a better experience for patients as well as community partners. NCHC will be the gatekeeper rather than law enforcement; we will be working closely with law enforcement in this endeavor.
- Changes will definitely be needed in how we can accomplish this but feel this will build trust and promote good quality care.
- Marathon County Public Safety Committee will be provided with a presentation on the process improvement effort next week.
- Changes to crisis would include:
 - *From assessment model to care model:*
Example: when an individual comes to NCHC, we will continue to provide crisis assessment to determine appropriate level of care at the least restrictive setting. The change will be that the individual may stay longer in the Crisis Center to receive additional support. To provide the additional care and support:
 - more resources will be required i.e. advanced practice personnel such as physician assistant, nurse practitioner; additional psychiatrist time
 - physical space more conducive to care model i.e. more private rooms
 - ability to provide medical clearance i.e. additional lab testing capabilities
- Transportation is also an issue we are working on with the Sheriff's Department. We are hoping to reduce the time the officers spend transporting individuals to other facilities by possibly utilizing retired officers on an on-call basis.
- Committee requested on update on each of these areas each month; including resources needed, action taken, etc.

Psychiatric bed utilization

- An issue the county has expressed, which also involves law enforcement, is the bed utilization. May need to look at the configuration of the inpatient unit to better provide the services needed in a more effective and efficient manner.
- Report on diversions was provided.
 - Implemented the following rule late last fall: whenever census is above nine we do not admit from other counties. Diversions dropped substantially at the end of last year.
- Marathon County Chair is open to receiving the core needs and a plan of action to better meet the needs of psychiatric services in Marathon County.
- **Motion**/second, Kelly/Shipway, to develop an action plan to address the needs of the psychiatric facility including an education plan for Marathon County leaders and community. Motion carried.

Motion/second, Kelly/Rusch, to adjourn at 11:56 a.m. Motion carried.

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

January 29, 2016

8:00 AM

NCHC – Wausau Campus

Present:	X Jean Burgener X Bill Metter	X John Robinson X John Bandow	X Bill Miller
Also Present:	X Gary Bezucha X Michael Loy X Jeni Wesenick	X Brenda Glodowski X Becky Schultz	X Kim Gochanour X Debbie Osowski

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

Minutes

Motion/second, Metter/Bandow, to approve the 12/18/15 NHOC meeting minutes. Motion carried.

Financial report

- Financial summary was distributed and reviewed.
- There was about \$473,000 loss; figures are preliminary but do not anticipate changes.
- Significant variances include salaries within contracted areas for Administrator, Director of Nursing, nursing education, and equipment rental.
- Revenue came in OK, not because of volume but because of the mix in the rates i.e. Medicaid came in better than the year previously; RUGS reconciliation improved with having MDS coded more accurately.
- Continue to monitor PPD staffing levels and have seen improvement.
- There is an overage of rehab and drugs. Looking at productivity with rehab company and having monthly meetings with rehab director to review RUGS. Concern that rehab company staff need to be made part of our culture.
- Finalized staffing for MVCC.
- Management staff received training on reading financials and payroll variance and other financial report, quality compliance, customer service, dashboards, action plans, disciplinary process, staffing modules, supply management, etc.

Kim's report

- Review of presentation by Brian Schoeneck at WACH conference who presented on the current state of affairs on county homes.
- Committee members felt it would be beneficial for Brian Schoeneck to talk to NHOC committee.
- Wisconsin is 49th of 50 states for under-funding Medicaid program.
- Value based purchasing – snippet each month same as SPE (add as agenda item)?
- With current CNA shortage, retirees are being educated to be CNA's. Article in Sunday newspaper about NTC in partnership with the Senior Academy; first class beginning in February at Pine Crest in Merrill.

Charter Outcome: Regulatory Compliance

- Next week a mock survey will be conducted by Catalyst Health; will see where opportunities are and identify what we can work on.
- Have had a few self reports – nothing to trigger an on-site investigation.
- Internal Nursing Home Quality Committee met this week and staff has done an excellent job of implementing actions, with report outs very succinct. High confidence that we have followed through on identified areas.
- Note: Fiscal responsibility will be done on a quarterly basis.
- Brian Schoeneck is a great resource for providing education for county board; extend formal invite to all board members, Marathon County Health & Human Services Committee, and Marathon County Finance Director. Education to include: concept for value based purchasing, patient satisfaction impacts, etc.

Education/marketing planning subcommittee update

- Subcommittee was established to provide education for new county board members on the nursing home.
- Feel all county board members, have a lack of knowledge and could be better informed.
- Ideas include: Invite small groups over lunch, tour nursing home, talk about issues, explain financing, introduction to Kim and Laura, etc.
- The southeast side home owners met at NCHC recently; was presented a thumbnail sketch of all 40 programs, followed by a tour of NCHC. They did not realize what NCHC is all about.
- If each NCCSP board member (14), contacts 3 county board members that you feel comfortable with, you would be their guide to what is happening at NCHC.
- Families of residents are important as a connection to the county board. How do we engage the community and how does community engage with county board?
- Videos about residents similar to the Workstories video. The emotion from families about the services received need to be at every opportunity rather than a professional presentation.
- Dementia presentation would be beneficial to full county board.
- Subcommittee will continue to focus on nursing home but may be incorporated with overall 28 week plan that Executive Committee is compiling.

Future agenda items

- In-depth discussion on nursing home plan (as presented last year) vs the nursing home needs.
 - What other capital improvement needs are there for the next 5 years?
 - Are we designing the nursing home to meet our needs in the future?
 - Is what we are proposing the appropriate remodel?
- Due to scheduling conflicts, a request was made to change several committee meeting dates to the third Friday of the month for April, June, July, August, and October. Specific information will be forwarded via email to committee members.
- 5-Star review
- CASPER review
- Comparison of local/state/national competitors
- WACH: How to Prepare for the Changing Payment and Delivery Environment (provided by John Sauer, President/CEO, WACH)

Motion/second, Metter/Bandow, to adjourn at 9:31 a.m. Motion carried.