



OFFICIAL NOTICE AND AGENDA

Notice is hereby given that the **Nursing Home Operations Committee of the North Central Community Services Program Board** will hold a meeting at the following date, time and location shown below.

Tuesday, August 24, 2021 at 3:00 PM
North Central Health Care - Wausau Board Room
1100 Lake View Drive, Wausau, WI 54403

The meeting site identified above will be open to the public. However, due to the COVID-19 pandemic and associated public health directives, North Central Health Care encourages the public to attend this meeting remotely. To this end, instead of attendance in person, Committee members and the public may attend this meeting by telephone conference. If Committee members or members of the public cannot attend remotely, North Central Health Care requests that appropriate safety measures, including adequate social distancing, be utilized by all in-person attendees.

Persons wishing to attend the meeting by phone may call into the telephone conference beginning five (5) minutes prior to the start time indicated above using the following number:

Phone Number: 1-408-418-9388 Access Code 146 430 6952

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.

AGENDA

1. CALL TO ORDER
2. PUBLIC COMMENT FOR MATTERS APPEARING ON THE AGENDA
(Limited to 15 Minutes)
3. ACTION: APPROVAL OF MARCH 23, 2021 NURSING HOME OPERATIONS COMMITTEE MINUTES
4. FINANCIAL REPORT – J. Meschke
5. COMMITTEE EDUCATION
 - A. Wisconsin State Budget Impact – J. Nickel & J. Meschke
 - B. Wisconsin Skilled Nursing Bed Licensing – J. Nickel
 - C. Leading Age Overview & Board Involvement Opportunities - Z. Ziesemer
 - D. Mount View Care Center Survey Results & Survey Process - K. Woller
6. NURSING HOME REPORTING CHANGE – J. Nickel & J. Bracken
7. NURSING HOME OPERATIONS REPORTS
 - A. Mount View Care Center – K. Woller and C. Gliniecki
 - B. Pine Crest Nursing Home – Z. Ziesemer and R. Hanson
8. MVCC & PC CONSTRUCTION UPDATE – J. Nickel

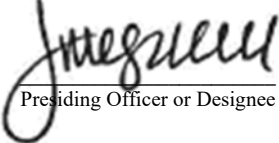
9. BOARD DISCUSSION

10. FUTURE AGENDA ITEMS AND MEETING SCHEDULE

11. ADJOURN

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

DATE: 08/20/2021 TIME: 4:00 PM BY: D. Osowski


Presiding Officer or Designee



NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD NURSING HOME OPERATIONS COMMITTEE

March 23, 2021

3:00 PM

Conference Call

Present:	EXC	Kurt Gibbs	X	Paul Gilk	X	Cindy Rider
	X	Pat Voermans	X	Bob Weaver	X	Cate Wylie

Staff: Jarret Nickel, Jill Meschke, Zach Ziesemer, Ryan Hanson, Kristin Woller, Connie Gliniecki, Kim Rantanen-Day

Others: Dejan Adzic

Call to Order

- Meeting was called to order at 3:03 p.m. by B. Weaver.

Public Comment for Matters Appearing on the Agenda

- None

ACTION: Approval of January 26, 2021 Nursing Home Operations Committee Minutes

- **Motion**/second, Voermans/Rider to approve the January 26, 2021 Nursing Home Operations Committee meeting minutes. Motion carried.

Financial Report – J. Meschke

- The 2020 Financial Audit is in progress; final report scheduled to be reviewed at the April 29, 2021 Board meeting.
- Mount View Care Center year to date ending February is showing a loss of \$307,000. The 2020 budget was constructed with a projected higher census for the first half of 2021 and lower for the 2nd half due to the renovations and anticipated transitions. Revenue shortfalls can mostly be attributed to not meeting payer mix and volume targets. Expenses are also above plan primarily due to staffing expenses. There is no additional Cares Act funding expected at this time.
- Pine Crest is showing a loss of \$384,000 through February. Targeted census was calculated at 100 but is currently averaging in the low 90's. Pine Crest received about \$27,000 in Cares Act funding in February with no significant additional receipts expected at this time. Expenses are above target through February due to staffing and agency staff use.

- Reforecasting efforts are in progress for both nursing homes to include lowering the average census for both facilities and resetting expense targets to match more closely. A scheduling analysis is also in progress to confirm appropriate staffing levels. Both nursing homes continue to face the impact of the pandemic. Higher expenses can be attributed to the cost of personal protective equipment (PPE), while coming down, is still much higher than in the past. No units are currently on enhanced precautions which helps reduce expenses. Technology has replaced much of the staff expense for screening purposes. C. Rider concurred that Aspirus is experiencing similar higher than normal expenses as well as the need for reforecasting.

Committee Education

- Leading Age Overview and Board Involvement Opportunities – Z. Ziesemer
 - Leading Age is a great asset for providing industry updates, education tools and resources. During the pandemic they have provided guidance on visitation and updates from CMS and the State.
 - Conferences are held each year (usually May and September) with one day designated to Board members.
 - Leading Age also helps with advocacy efforts at the Capitol and working with our legislators. John Sauer, Leading Age Executive Director, has been instrumental in working on improvements in Medicaid rates. Current deficits climb in Medicaid losses. Mount View and Pine Crest have two of the highest deficits in the State due to the volume of our Medicaid population.
- Mount View Care Center Survey Results and Survey Process – K. Woller
 - Last year CMS suspended routine inspections due to the pandemic and recently resumed their annual surveys visiting Mount View recently. The survey includes a thorough review of documents on a percentage of residents, interviewing residents, families, and employees, and observing all we do. They also reviewed documents on closed records (those discharged from the facility). The survey team was at Mount View for 4 days and provide a verbal report upon exit. A written report will also be provided.
 - We received just two recommendations compared to the State average of 8.1 and national average of 9.5. Both were low level citations. We are preparing the plans of correction to submit once the written statement of deficiencies is received.

Nursing Home Operations Reports

- Mount View Care Center – K. Woller
 - Highlights include filling the open positions given the challenge with the small number of applicants. Until approval is received for a CNA class, we will be hiring those who have expressed interest in the class as hospitality aides which will give them experience working with CNAs prior to the class.
 - Lower patient experience scores can be directly related to fewer activities for residents during the pandemic. An increase in activities is beginning to occur and residents are ready to move about again.

- Covid Update: last resident who tested positive was in December; staff positivity rate has decreased significantly; we are only required to test once per month as of March. Compassionate care visits continue, window visits began in February and as of March 1 in-person visits are scheduled in the gift shop. Next week we will have designated visiting hours for visiting in resident rooms. Small group activities of 10 or less are occurring and volunteers will be returning soon.
- Pine Crest Nursing Home – Z. Ziesemer
 - Filling the open CNA and nurse positions are a struggle due to a limited applicant pool. Working with NTC to be a site to hold clinicals and waiting for approval to provide CNA classes. We are also working with a management firm to fill our night nurse position.
 - A 30- and 90-day check-in with supervisors is being implemented in an effort to help reduce turnover. We are also rolling out stay interviews for a better snapshot of employee engagement and morale.
 - With the restrictions implemented during the pandemic, Pine Crest received similar feedback from families expressing frustration with the inability to visit. Easing some restrictions should help improve the patient experience.
 - We are working with Lincoln County to obtain a designated tax ID for Pine Crest which would put us in the ANI Network and help improve admissions.
 - Covid Update: We are now testing once per month as community rates are below 5%. No resident cases since December and last employee case was in February. In person visitation in the conference area begins next week. All visitors will be screened. Beautician services have resumed. Small group activities have also started. Vaccination clinics are being offered for residents and staff.

Update on Assessment of a Potential Regional partnership with the Portage County Health Care Center - J. Nickel

- Thanks to J. Meschke who led the initiative. Information gathering has occurred and an in-depth review is being done.
- Next step will be to meet with the Portage County Health Care Center Board in April. The NCCSP Board will be provided an update at their May meeting.

Discussion on Scope of Updating Market Assessments and Operational Assessments for Mount View Care Center and Pine Crest – J. Nickel

- Clifton Larson Allen (CLA) study kicked off with Zach heading it up.
- This is a partnership between NCHC and CLA to understand the ideal size and scope of both skilled nursing facilities and opportunities for other business ventures with the two counties. With the impacts of 2020 and into 2021 our 5–10-year plan was expedited and is good timing to have this study completed. A report is slated to be provided in May.

2021 Dashboard Review and Census Growth – J. Nickel

- The 2021 Dashboard reflects the goals set for programs and approved by the Board.
- The goals were set in the Fall prior to survey and anticipating we were on the better half of Covid. We are in a good recovery and currently trending positively. Reducing turnover is a high priority. We are diving into manager relationships, developing action plans and identifying opportunities outside of compensation to improve engagement and retention. By June we are hopeful to offer an internal CNA class.
- Committee asked about comparing pay for contracted staff vs increasing pay for inhouse staff. The market is analyzed often. We find as soon as our wages are increased other agencies do the same. Another vital issue is increasing reimbursement for Medicaid to help afford a wage increase.

Nursing Tower Construction Update – J. Nickel

- The nursing tower is on track and within budget. We have already anticipated possible delays in delivery of furniture and supplies in the timeline. Projected completion date is July 23 followed by 30-60 days to allow for the state survey to be completed and receive approval. Our target is to be operating by Labor Day.

Board Discussion

- CDC Guidance on Nursing Home Visitation
 - As discussed above, visitation procedures are being modified and facilities will open for modified in person visits soon. One of the main challenges is for staff to cover the screening process for all visitors. As long as community rates stay low we will continue to be able to relax the restrictions and continue to keep the residents safe.

Future Agenda Items and Meeting Schedule

- No additional agenda items noted
- Next meeting: Tues, May 25, 2021 at 3:00 p.m.

Adjourn

- **Motion**/second, Voermans/Gilk, to adjourn the meeting at 4:03 p.m. Motion carried.

MEMORANDUM

DATE: August 18, 2021
TO: Nursing Home Operations Committee
FROM: Jill S. Meschke, Chief Financial Officer
RE: Nursing Home Financial Highlights

The following items are financial highlights through July 2021.

Mount View Care Center:

- MVCC shows a loss through July of (\$559,784) compared to a targeted gain of \$398,910 resulting in an unfavorable variance of (\$958,694).
- MVCC has not received any additional CARES Act funding in 2021. No significant receipts are expected at this time.
- MVCC averaged a census of 125 per day compared for July compared to a target of 145. This census is down two from June.
- The Medicare census averaged 10 per day in July compared to a target of 19. The Medicaid Vent census has averaged 9 per day in July. Revenue shortfalls from plan are a mix of volume and rate by missing targets in both overall census and Medicare.
- Expenses are above plan through July driven by personnel and contracted staff expenses exceeding plan.

Pine Crest Nursing Home:

- Pine Crest shows a loss through July of (\$1,133,150) compared to a targeted loss of (\$656,926) resulting in an unfavorable variance of (\$476,223).
- Pine Crest has received \$26,750 of CARES Act funding through July. No significant additional receipts are expected at this time.
- Pine Crest averaged a census of 92 per day in July respectively compared to a target of 100. This is consistent with the last two months.
- The Medicare census averaged 8 per day in July compared to a target of 16. Revenue shortfalls from plan are a mix of volume and rate by missing targets in both overall census and Medicare.
- Expenses are above plan through July driven by personnel and contracted staff expenses exceeding plan.

Mount View Care Center
Nursing Home Revenue Analysis
July 2021

Current Month:

Location	Payer Source	Actual:				Budget:				Variances:		Reason for Variance:	
		Residents Per Day	Actual Patient Days	Actual Net Revenue	Average Actual Rate	Residents Per Day	Budgeted Patient Days	Budgeted Net Revenue	Average Budget Rate	Days	Revenue	Volume Variance	Rate Variance
Long Term Care													
	Medicaid	30	938			32	992						
	MA Bedhold	0	0				0						
	Medicare	0	10			1	31						
	Self Pay	2	62			2	62						
	Insurance/VA	3	93			1	31						
	SUBTOTAL-LTC	36	1103	\$196,328	\$178	36	1116	\$217,745	\$195	(13)	(\$21,417)	(\$2,536)	(\$18,881)
Post Acute Care													
	Medicaid	8	258			7	217						
	MA Bedhold	0	0				0						
	Medicare	7	220			12	372						
	Self Pay	1	20			1	31						
	Insurance/VA	2	62			3	93						
	SUBTOTAL-PAC	18	560	(\$102,796)	(\$184)	23	713	\$175,858	\$247	(153)	(\$278,654)	(\$37,737)	(\$240,917)
Vent Services													
	Medicaid	4	123			4	124						
	MA-Bedhold	0	0				0						
	Medicaid-Vent	8	257			12	372						
	MA-Vent Bedhold	0	0				0						
	Medicare	2	71			5	155						
	Self Pay	1	31			2	62						
	Insurance/VA	1	31			2	62						
	SUBTOTAL-Vent	17	513	\$175,809	\$343	25	775	\$282,563	\$365	(262)	(\$106,754)	(\$95,525)	(\$11,229)
Legacies													
	Medicaid	46	1436			51	1,581						
	MA Bedhold	0	0				0						
	Private	7	215			8	248						
	Medicare	0	11			1	31						
	Insurance/VA	1	31			1	31						
	SUBTOTAL-Legacies	55	1693	\$267,331	\$158	61	1891	\$381,542	\$202	(198)	(\$114,211)	(\$39,950)	(\$74,261)
	Total	125	3,869	\$536,672	\$139	145	4,495	\$1,057,708	\$235	(626)	(\$521,036)	(\$147,303)	(\$373,733)

Summary:

	Per Day	%	Per Day	%
Residents per Day Medicaid	89	71.21%	94	64.83%
Medicaid Vent	8	6.64%	12	8.28%
Medicare	10	8.06%	19	13.10%
Self	11	8.48%	13	8.97%
Insurance	7	5.61%	7	4.83%
Total	125	100.00%	145	100.00%

Mount View Care Center
Nursing Home Revenue Analysis
July 2021

Year To Date

Location	Payer Source	Actual:				Budget:				Variances:		Reason for Variance:	
		Residents Per Day	Actual Patient Days	Actual Net Revenue	Average Actual Rate	Residents Per Day	Budgeted Patient Days	Budgeted Net Revenue	Average Budget Rate	Days	Revenue	Volume Variance	Rate Variance
Long Term Care													
	Medicaid	30	6358			32	6,784						
	MA Bedhold	0	1				0						
	Medicare	1	161			1	212						
	Self Pay	1	311			2	424						
	Insurance/VA	2	495			1	212						
	SUBTOTAL-LTC	35	7326	\$633,692	\$86	36	7632	\$1,313,728	\$172	(306)	(\$680,036)	(\$52,673)	(\$627,363)
Post Acute Care													
	Medicaid	7	1392			7	1,484						
	MA Bedhold	0	3				0						
	Medicare	8	1783			12	2,544						
	Self Pay	1	203			1	212						
	Insurance/VA	3	570			3	636						
	SUBTOTAL-PAC	19	3951	\$955,890	\$242	23	4876	\$1,067,076	\$219	(925)	(\$111,186)	(\$202,429)	\$91,243
Vent Services													
	Medicaid -No Vent	4	864			4	848						
	MA-Bedhold-No Vent	0	1				0						
	Medicaid-Vent	8	1642			12	2,544						
	MA-Vent Bedhold	0	1				0						
	Medicare	3	722			5	1,060						
	Self Pay	1	212			2	424						
	Insurance/VA	1	228			2	424						
	SUBTOTAL-Vent	17	3670	\$1,373,802	\$374	25	5300	\$1,704,798	\$322	(1630)	(\$330,996)	(\$524,306)	\$193,310
Legacies													
	Medicaid	51	10764			51	10,812						
	MA Bedhold	0	0				0						
	Private	4	913			8	1,696						
	Medicare	1	109			1	212						
	Insurance/VA	1	280			1	212						
	SUBTOTAL-Legacies	57	12066	\$2,422,196	\$201	61	12932	\$2,301,972	\$178	(866)	\$120,224	(\$154,153)	\$274,377
	Total	127	27,013	\$5,385,580	\$199	145	30,740	\$6,387,574	\$208	(3,727)	(\$1,001,994)	(\$774,447)	(\$227,547)

Summary:

	Per Day	%	Per Day	%
Residents per Day Medicaid	91	71.76%	94	64.83%
Medicaid Vent	8	6.08%	12	8.28%
Medicare	13	10.27%	19	13.10%
Self	8	6.07%	13	8.97%
Insurance	7	5.82%	7	4.83%
Total	127	100.00%	145	100.00%

North Central Health Care
Review of Services in Mount View Care Center
For the Period Ending July 31, 2021

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Post-Acute Care	1,476,609	1,394,356	82,252	1,549,713	1,519,567	(30,146)	(73,105)	52,106
Long-Term Care	1,574,573	1,853,865	(279,293)	2,548,527	2,315,487	(233,040)	(973,954)	(512,333)
Memory Care	4,003,375	3,351,363	652,012	3,928,592	3,608,427	(320,165)	74,783	331,848
Vent Unit	2,220,113	2,321,722	(101,610)	2,338,429	2,543,374	204,945	(118,316)	103,336
Nursing Home Ancillary	125,576	33,115	92,461	430,336	21,204	(409,132)	(304,760)	(316,671)
Rehab Services	549,042	1,181,191	(632,149)	588,627	603,645	15,018	(39,585)	(617,131)
Total NCHC Programming	9,949,287	10,135,612	(186,325)	11,384,223	10,611,703	(772,520)	(1,434,936)	(958,845)
County Appropriation	875,000	875,000	-				875,000	-
Excess Revenue/(Expense)	10,824,287	11,010,612	(186,325)	11,384,223	10,611,703	(772,520)	(559,936)	(958,845)

North Central Health Care
Review of Services in Pine Crest Nursing Home
For the Period Ending July 31, 2021

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Post-Acute Care	668,578	1,008,186	(339,607)	1,358,967	1,588,891	229,924	(690,389)	(109,683)
Long-Term Care	4,164,110	3,887,370	276,740	4,714,269	4,428,238	(286,031)	(550,159)	(9,291)
Special Care	921,962	959,075	(37,114)	1,054,586	1,158,416	103,829	(132,625)	66,716
Nursing Home Ancillary	227,498	-	227,498	347,982	-	(347,982)	(120,484)	(120,484)
Rehab Services	517,940	409,739	108,200	414,589	2,894	(411,695)	103,351	(303,495)
Total NCHC Programming	6,500,087	6,264,371	235,717	7,890,393	7,178,439	(711,954)	(1,390,306)	(476,237)
County Appropriation	257,142	257,142	-				257,142	-
Excess Revenue/(Expense)	<u>6,757,230</u>	<u>6,521,513</u>	<u>235,717</u>	<u>7,890,393</u>	<u>7,178,439</u>	<u>(711,954)</u>	<u>(1,133,164)</u>	<u>(476,237)</u>

North Central Health Care
Income Statement
For the Period Ending July 31, 2021
Mount View Care Center

	MTD Actual	MTD Budget	\$ Variance	% Variance	YTD Actual	YTD Budget	\$ Variance	% Variance
Direct Revenues								
Patient Gross Revenues	1,672,890	1,588,151	84,739	5.3%	10,489,602	11,516,279	(1,026,677)	-8.9%
Patient Contractual Adjustments	(599,304)	(394,353)	(204,951)	52.0%	(3,206,156)	(2,922,274)	(283,882)	9.7%
Net Patient Revenue	1,073,586	1,193,798	(120,212)	-10.1%	7,283,447	8,594,005	(1,310,559)	-15.2%
County Revenue	-	-	-	0.0%	-	-	-	0.0%
Contracted Service Revenue	-	-	-	0.0%	-	-	-	0.0%
Grant Revenues and Contractuals	-	-	-	0.0%	-	-	-	0.0%
Appropriations	125,000	125,000	-	0.0%	875,000	875,000	-	0.0%
COVID-19 Relief Funding	-	-	-	0.0%	-	-	-	0.0%
Other Revenue	96,700	96,700	-	0.0%	1,836,012	676,898	1,159,113	171.2%
Allocated Revenue	116,003	121,814	(5,811)	-4.8%	829,981	864,709	(34,728)	-4.0%
Total Operating Revenue	1,411,289	1,537,312	(126,023)	-8.2%	10,824,439	11,010,613	(186,174)	-1.7%
Direct Expenses								
Personnel Expenses	849,301	729,490	(119,812)	-16.4%	5,475,936	5,190,182	(285,754)	-5.5%
Contracted Services Expenses	74,981	70,675	(4,306)	-6.1%	545,374	494,725	(50,649)	-10.2%
Supplies Expenses	30,639	26,425	(4,214)	-15.9%	217,888	206,875	(11,013)	-5.3%
Drugs Expenses	(61,210)	5,500	66,710	1212.9%	378,196	50,500	(327,696)	-648.9%
Program Expenses	1,414	785	(629)	-80.1%	4,350	5,495	1,145	20.8%
Land & Facility Expenses	-	19,612	19,612	100.0%	-	137,286	137,286	100.0%
Equipment & Vehicle Expenses	5,678	22,874	17,196	75.2%	93,168	161,849	68,681	42.4%
Diversions Expenses	-	-	-	0.0%	-	-	-	0.0%
Other Operating Expenses	31,769	28,014	(3,755)	-13.4%	223,080	213,018	(10,062)	-4.7%
Allocated Expense	660,911	650,331	(10,580)	-1.6%	4,446,233	4,151,773	(294,460)	-7.1%
Total Operating Expenses	1,593,483	1,553,706	(39,777)	-2.6%	11,384,224	10,611,703	(772,521)	-7.3%
Metrics								
<i>Indirect Expenses/Direct Expenses</i>	70.9%	72.0%			64.1%	64.3%		
<i>Direct Expense/Gross Patient Revenue</i>	55.7%	56.9%			66.1%	56.1%		
Non-Operating Income/Expense								
Interest Income/Expense	-	-	-	0.0%	-	-	-	0.0%
Donations Income	-	-	-	0.0%	-	-	-	0.0%
Other Non-Operating	-	-	-	0.0%	-	-	-	0.0%
Total Non-Operating	-	-	-	0.0%	-	-	-	0.0%
Net Income (Loss)	(182,194)	(16,394)	(165,800)	1011.4%	(559,784)	398,910	(958,694)	-240.3%
Net Income	-12.9%	-1.1%			-5.2%	3.6%		

North Central Health Care
Income Statement
For the Period Ending July 31, 2021
Pine Crest Nursing Home

	MTD Actual	MTD Budget	\$ Variance	% Variance	YTD Actual	YTD Budget	\$ Variance	% Variance
Direct Revenues								
Patient Gross Revenues	976,554	973,033	3,521	0.4%	6,854,457	6,667,733	186,724	2.8%
Patient Contractual Adjustments	(294,373)	(236,308)	(58,065)	24.6%	(2,065,186)	(1,632,944)	(432,242)	26.5%
Net Patient Revenue	682,182	736,725	(54,544)	-7.4%	4,789,272	5,034,790	(245,518)	-4.9%
County Revenue	-	-	-	0.0%	-	-	-	0.0%
Contracted Service Revenue	-	-	-	0.0%	-	-	-	0.0%
Grant Revenues and Contractuals	-	-	-	0.0%	-	-	-	0.0%
Appropriations	36,735	36,735	-	0.0%	257,142	257,142	-	0.0%
COVID-19 Relief Funding	-	-	-	0.0%	26,750	-	26,750	0.0%
Other Revenue	153,556	153,556	-	0.0%	1,538,251	1,074,891	463,360	43.1%
Allocated Revenue	21,974	21,250	724	3.4%	145,687	154,690	(9,003)	-5.8%
Total Operating Revenue	894,446	948,266	(53,820)	-5.7%	6,757,101	6,521,513	235,589	3.6%
Direct Expenses								
Personnel Expenses	543,525	504,885	(38,640)	-7.7%	3,333,907	3,490,364	156,456	4.5%
Contracted Services Expenses	100,306	2,145	(98,161)	-4576.3%	780,026	15,015	(765,011)	-5095.0%
Supplies Expenses	20,839	12,698	(8,140)	-64.1%	112,849	88,888	(23,961)	-27.0%
Drugs Expenses	(77,577)	16,550	94,127	568.7%	233,617	115,850	(117,767)	-101.7%
Program Expenses	1,040	600	(440)	-73.3%	7,657	4,200	(3,457)	-82.3%
Land & Facility Expenses	(5,809)	-	5,809	0.0%	-	-	-	0.0%
Equipment & Vehicle Expenses	1,245	2,900	1,655	57.1%	24,659	20,300	(4,359)	-21.5%
Diversions Expenses	-	-	-	0.0%	-	-	-	0.0%
Other Operating Expenses	27,429	20,565	(6,864)	-33.4%	192,675	143,955	(48,720)	-33.8%
Allocated Expense	502,537	466,785	(35,752)	-7.7%	3,205,002	3,299,867	94,865	2.9%
Total Operating Expenses	1,113,535	1,027,129	(86,406)	-8.4%	7,890,394	7,178,439	(711,955)	-9.9%
Metrics								
<i>Indirect Expenses/Direct Expenses</i>	82.2%	83.3%			68.4%	85.1%		
<i>Direct Expense/Gross Patient Revenue</i>	62.6%	57.6%			68.4%	58.2%		
Non-Operating Income/Expense								
Interest Income/Expense	-	-	-	0.0%	(142)	-	(142)	0.0%
Donations Income	-	-	-	0.0%	-	-	-	0.0%
Other Non-Operating	-	-	-	0.0%	-	-	-	0.0%
Total Non-Operating	-	-	-	0.0%	(142)	-	(142)	0.0%
Net Income (Loss)	(219,089)	(78,863)	(140,226)	177.8%	(1,133,150)	(656,926)	(476,223)	72.5%
Net Income	-24.5%	-8.3%			-16.8%	-10.1%		

Pine Crest Nursing Home
Nursing Home Revenue Analysis
July 2021

Current Month:		Actual:				Budget:				Variances:		Reason for Variance:	
Location	Payer Source	Residents Per Day	Actual Patient Days	Actual Net Revenue	Average Actual Rate	Residents Per Day	Budgeted Patient Days	Budgeted Net Revenue	Average Budget Rate	Days	Revenue	Volume Variance	Rate Variance
Long Term Care													
	Medicaid	55	1691			58	1,798						
	MA Bedhold	1	18			0	0						
	Medicare	1	44			0	0						
	Self Pay	6	174			6	186						
	Insurance/VA	0	0			0	0						
	SUBTOTAL-LTC	62	1927	\$342,625	\$178	64	1984	\$384,592	\$194	(57)	(\$41,967)	(\$11,049)	(\$30,918)
Post Acute Care													
	Medicaid	3	81			0	0						
	MA Bedhold	0	2			0	0						
	Medicare	6	193			16	496						
	Self Pay	1	34			0	0						
	Insurance/VA	1	28			0	0						
	SUBTOTAL-PAC	11	338	\$71,176	\$211	16	496	\$137,760	\$278	(158)	(\$66,584)	(\$43,883)	(\$22,701)
Special Care													
	Medicaid	17	516			14	434						
	MA-Bedhold	0	0			0	0						
	Medicaid-Vent	0	0			0	0						
	MA-Vent Bedhold	0	0			0	0						
	Medicare	0	0			0	0						
	Self Pay	3	87			6	186						
	Insurance/VA	0	0			0	0						
	SUBTOTAL-SPC	19	603	\$112,980	\$187	20	620	\$132,023	\$213	(17)	(\$19,043)	(\$3,620)	(\$15,423)
	Total	93	2,868	\$526,781	\$184	100	3,100	\$654,375	\$211	(232)	(\$127,594)	(\$48,973)	(\$78,621)
Summary:													
Residents per Day		Per Day	%			Per Day	%						
	Medicaid	74	80.47%			72	72.00%						
	Medicaid Vent	0	0.00%			0	0.00%						
	Medicare	8	8.26%			16	16.00%						
	Self	10	10.29%			12	12.00%						
	Insurance	1	0.98%			0	0.00%						
	Total	93	100.00%			100	100.00%						

Pine Crest Nursing Home
Nursing Home Revenue Analysis
July 2021

Year To Date:		Actual:				Budget:				Variances:		Reason for Variance:	
Location	Payer Source	Residents Per Day	Actual Patient Days	Actual Net Revenue	Average Actual Rate	Residents Per Day	Budgeted Patient Days	Budgeted Net Revenue	Average Budget Rate	Days	Revenue	Volume Variance	Rate Variance
Long Term Care													
	Medicaid	56	11811			58	12,296						
	MA Bedhold	0	65				0						
	Medicare	2	418			0	0						
	Self Pay	4	785			6	1,272						
	Insurance/VA	0	0			0	0						
	SUBTOTAL-LTC	62	13079	\$2,051,302	\$157	64	13568	\$2,320,374	\$171	(489)	(\$269,072)	(\$83,628)	(\$185,444)
Post Acute Care													
	Medicaid	2	528			0	0						
	MA Bedhold	0	24				0						
	Medicare	8	1729			16	3,392						
	Self Pay	0	92			0	0						
	Insurance/VA	0	28			0	0						
	SUBTOTAL-PAC	11	2401	\$481,032	\$200	16	3392	\$831,152	\$245	(991)	(\$350,120)	(\$242,828)	(\$107,292)
Special Care													
	Medicaid	17	3644			14	2,968						
	MA-Bedhold	0	22				0						
	Medicaid-Vent	0	0			0	0						
	MA-Vent Bedhold	0	0				0						
	Medicare	0	103			0	0						
	Self Pay	2	401			6	1,272						
	Insurance/VA	0	0			0	0						
	SUBTOTAL-SPC	20	4170	\$676,300	\$162	20	4240	\$796,539	\$188	(70)	(\$120,239)	(\$13,150)	(\$107,089)
	Total	93	19,650	\$3,208,634	\$163	100	21,200	\$3,948,065	\$186	(1,550)	(\$739,431)	(\$288,656)	(\$450,775)
Summary:													
Residents per Day		Per Day	%			Per Day	%						
	Medicaid	76	81.90%			72	72.00%						
	Medicaid Vent	0	0.00%			0	0.00%						
	Medicare	11	11.45%			16	16.00%						
	Self	6	6.50%			12	12.00%						
	Insurance	0	0.14%			0	0.00%						
	Total	93	100.00%			100	100.00%						



North Central Health Care

Person centered. Outcome focused.

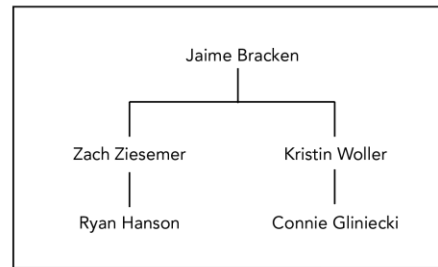
MEMORANDUM

DATE: August 10th, 2021
 TO: NCHC Management Team
 FROM: Jarret Nickel, Operations Executive
 Jaime Bracken, Chief Nursing Officer
 RE: Skilled Nursing Reporting Change

Organizational structure is a responsibility of the executive team, and it is important to continuously review the structure to address new programs, change in operations, or new locations. Over the past two years, all three of these have occurred in our skilled nursing operations. We've added Pine Crest Nursing Home, changed our operations to include system oversight for executives, and by adding Pine Crest increased our number of locations. All these changes have had positive impacts on both our skilled nursing facilities and North Central Health Care as a whole.

To further improve operations, reporting changes will be adjusted **as of August 8th, 2021:**

The Director of Nursing Home Operations for both Mount View Care Center (Kristin Woller) and Pine Crest (Zach Ziesemer) will report directly to Jaime Bracken, Chief Nursing Officer. Jarret Nickel, Operations Executive will continue to oversee all North Central Health Care operations with involvement remaining in both nursing homes. The Director of Nursing for both Mount View Care Center (Connie Gliniecki) and Pine Crest (Ryan Hanson) will report up to the Director of Nursing Home Operations at each location. We believe this structure will support our current operations and allow for continued future growth in our skilled nursing facilities.



Thank you,

Jarret Nickel, Operations Executive

Jaime Bracken, Chief Nursing Officer

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Nursing Home Operations Committee Facility Report

Month(s): July

Mount View Care Center

Employment Status Update:

Department	# of Openings	Hired in July	Discharges in July
LPN/RN	3 FTE	0	0
CNA	5 FTE	3	3
Hospitality Assistants	0	0	2
Life Enrichment	0	0	0
Social Services	0	0	0
Respiratory Therapy	0	0	0
Administrative	0	0	0

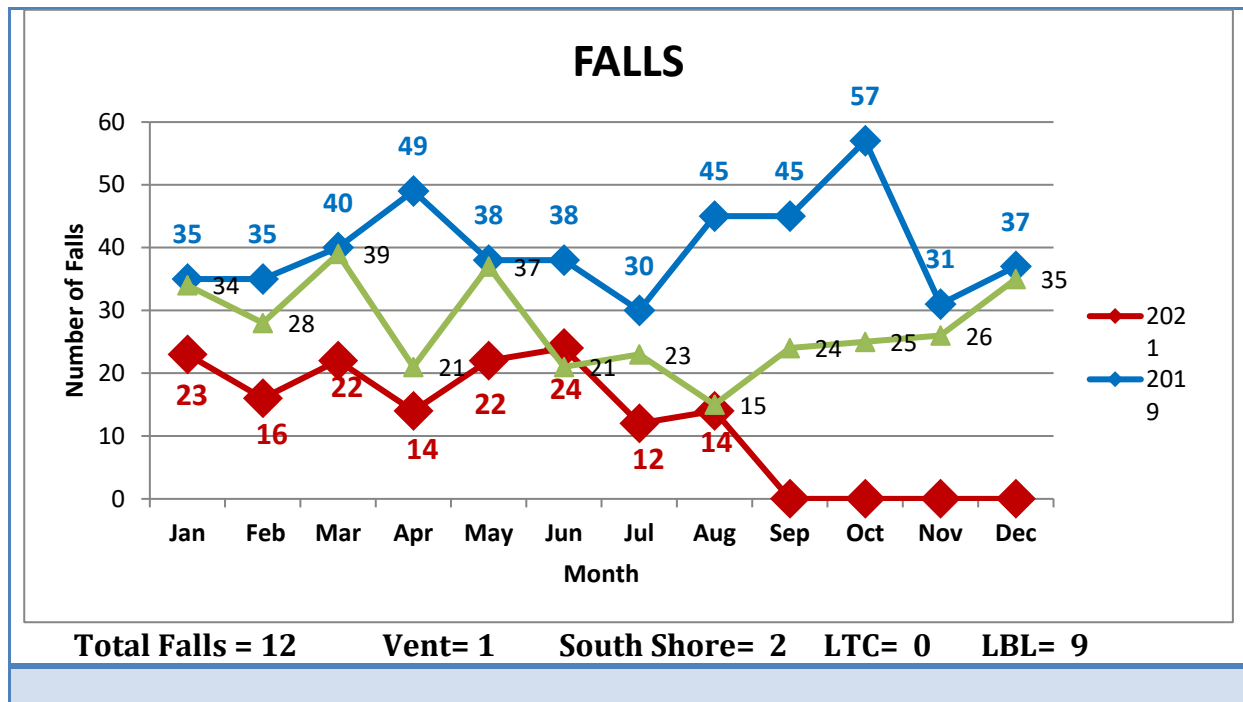
CNA recruitment has taken a shift in a positive direction. The NCHC Board approved CNA wage increases to go into effect on June 13th. The goal of the increase was to be at or above the market with our compensation program and to retain our exceptional staff. We have hired 22 employees since June. We had 2 new CNA's leave in July due to personal issues and one CNA leave because she is going to college out of town. We also had 2 employees in the CNA class that didn't meet the expectations of the class and were involuntary terminations.

Patient Experience:

The scores below reflect responses to the question "likelihood of those to recommend" which was at 83% for July. A total of 26 surveys were sent out in July and 9 were received back completed. The unfavorable comments were related to residents having to share a bathroom, an electric wheelchair being broken and the financial paperwork being difficult to understand upon admission.

	TARGET (Rating 2)	JAN	FEB	MAR	APR	MAY	JUN	JUL	YTD
PATIENT EXPERIENCE - PRESS GANEY SURVEY									
Survey Distribution Response Rate		0.0%	27.1%	18.4%	27.3%	50.0%	37.0%	34.6%	27.8%
MVCC Patient Experience:	81-83	0.0	90.0	89.3	88.9	86.8	82.5	83.3	86.6
PAC Patient Experience:	81-83	~	100.0	90.0	80.0	83.3	75.0	83.3	85.2
LTC Patient Experience:	81-83	~	80.0	~	100.0	85.0	75	75.0	83.0
Legacies Patient Experience:	81-83	~	100.0	87.5	100.0	100.0	90	91.6	94.9
Activities Patient Experience:	81-83	~	87.0	88.9	86.3	64.1	80.6	82.5	81.6
Dietary Patient Experience:	81-83	~	76.7	83.1	85.4	82.9	80.3	85.4	82.3
Housekeeping Patient Experience:	81-83	~	89.5	92.9	91.5	86.0	89.02	83.6	88.7
Laundry Patient Experience:	81-83	~	80.5	85.0	87.5	86.5	80.56	75.0	82.7

Quality:



CURRENT OVERALL STAR RATING (Out of 5): 3	CURRENT QUALITY STAR RATING (Out of 5): 4
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Our quality measure went from a 3 star to a 4 star. A few things that contributed to the improvement was our June 2020 survey when the IJ citation fell off. We also had improvements in residents being able to move about the unit more freely, going to small group activities and getting outside. We also saw improvements in falls with major injury, residents with urinary trach infections and the number of catheters we have in the building.

PRIMARY OUTCOME GOAL	↕	TARGET	JAN	FEB	MAR	APR	MAY	JUN	JUL	2021 YTD	2020
Nursing Home Readmission Rate	↓	10-12%	5.9%	11.5%	5.0%	8.3%	15.4%	5.30%	15.0%	9.4%	13.5%

Readmission Summary: All hospitalizations in July were unavoidable. The month of July showed three hospitalizations within 30 days of admission which brought our rate up to a 15.0% with a target goal of 10-12%. One resident had lethargy and low oxygen levels. He developed COVID in the hospital and is still there. Another resident developed a fever and swollen right arm after one day of being admitted to MV. The final hospitalization was related to a resident that has had a lot of medical complications related to past positive COVID.

Total Acute Care Transfers in July = 18

- 3 – 30-Day hospitalization
 - Lethargy, dyspnea, low O2
 - Fever, edematous right arm
 - Hyperkalemia
- 6- Inpatient, Unplanned
 - Black tarry stools
 - Facial redness, unable to obtain blood
 - Possible aspiration pneumonia
 - Difficult to arouse, low BP
 - Multiple large liquid, foul smelling emesis
 - Low O2, increased involuntary movements
- 7 Emergency Department Visits
- 2 Inpatient Planned
 - PICC line placement
 - Hip replacement d/t hardware failure

Regulatory:

State Survey visits – None

Self-Reports:

Date	Unit	Reason	Follow Up
7/30/21	Northwinds Vent	CNA raised her voice to a resident and told her to, "stop being rude. You have been rude to me all morning." Resident became upset and was crying after event.	Administration was notified. The CNA was removed from direct resident contact pending investigation. All residents and employees on Northwinds Vent were interviewed post occurrence to make sure they all feel safe. Individual education was provided to CNA on standards of behavior, caregiver misconduct, resident rights and how to appropriately interact with the residents. CNA received a disciplinary action for her comment. Ongoing monitoring and observation will continue with CNA and Nurse Manager.

Referrals:

Year	January	February	March	April	May	June	July
Acuity Too High	1	4	4	4	4	11	9
Expired	4	1	4	1	5	2	0
No LTC Beds Available	6	2	3	7	3	3	14
No PAC Beds Available	0	0	3	14	19	0	1
No NWV Beds Available	0	0	7	1	0	0	2
No LBL Beds Available	6	6	10	7	7	19	15
No Payor/Poor Payor Source	4	4	9	3	4	10	9
No Skilled Needs	1	1	0	0	3	0	0
Out of County	14	14	12	8	13	19	23
Out of Network	6	5	12	8	5	6	3
Outstanding A/R	0	0	0	0	0	0	0
Patient Non Compliance	2	3	0	0	0	2	3
Staffing	0	0	2	9	1	22	15
Ventilator Dialysis	1	0	1	2	2	3	0
Ventilator Weaned	2	1	1	4	1	1	0
Went to Competition	22	11	20	5	8	10	13
Went Home	8	7	6	2	3	4	2
Went to Inpatient Rehab	5	1	2	0	1	2	0
MONTHLY TOTAL	82	60	96	75	79	114	109

In July we had 129 referrals with 20 admitted. Limited admissions in July were related to our staffing shortage or not having beds available on our LTC or Legacies programs.

Tower Timeline:

- 8/3-8/18 Safety education and tours to all MV employees
- 8/16 & 9/20 Host community neighborhood meeting/tour
- 8/24, 8/30, 9/2 Tours with EMT, hospice, Physicians, hospital d/c planners, state surveyors, etc.
- 9/7-10/4 Family and resident tours
- 9/22-9/24 Self-guided tours for all NCHC employees
- 10/5 Chamber ribbon cutting and community open house
- 10/11 Move in residents to 4th floor (rehab)
- 10/18 Move in residents to 3rd floor (dementia)
- 10/25 Move in residents to 2nd floor (vent unit and acute rehab)

Nursing Home Report - Month of July 2021

Pine Crest (PC)

EMPLOYEE ENGAGEMENT

For the month of July Pine Crest had experienced a 5.9% vacancy rate, which is under the target of 7%-9%. Turnover for the month was 2.3% on a target of 1.7%-1.9%. 5 positions termed for the following reasons: nurse manager retirement; C.N.A. termed for attendance; diet aide termed for inappropriate behavior; diet aide took another position elsewhere; and new hire C.N.A. took higher paying job at agency.

Department	Current # of Openings	Hired in June	Turnover in June
LPN/RN	3 FTE; 6 positions		1
CNA	3.55 FTE; 6 positions	3	2
Hospitality Assistants	0		0
Life Enrichment	0		0
Social Services	0		0
Respiratory Therapy	0		0
Administrative	0		0
Dietary	0	1	2
Environmental Services	0		0
TOTAL	14 Positions	0 Positions	4 Positions

PATIENT EXPERIENCE

Response rate was for the month of June was 24.4% with 10 surveys being returned. Overall net promoter score was 10 on a target of 55-61. Food service, activities, and general customer service from employees were identified as the areas needing to be attended to. In early June activities has worked towards reintroducing some groups that hadn't been offered since prior to the pandemic. This along with incorporating a monthly versus weekly calendar will assist with perceived activity opportunities. Program will be working with organizational development to work towards all-staff training on the topic of person-centered service and other customer service orientated competencies.

DEPARTMENT: PINECREST NURSING HOME

	TARGET (Rating 2)	JAN	FEB	MAR	APR	MAY	JUN	JUL	YTD
PATIENT EXPERIENCE - PRESS GANEY SURVEY									
Survey Distribution Response Rate		16.7%	31.3%	26.9%	23.3%	22.2%	57.9%	24.4%	23.6%
Pine Crest Patient Experience:	81-83%	66.7	90.0	78.6	85.7	87.5	81.8	72.5	80.4
Long Term Care (107)	81-83%	91.7%	89.2	81.3	91.7	83.3	87.5	65.6	84.3
Special Care Patient Experience: (105)	81-83%	25.0%	~	~	~	100.0	~	100.0	75.0
Rehab Patient Experience: (106)	81-83%	50.0%	91.7	75.0	81.3	~	75.0	100.0	78.8
Housekeeping Patient Experience:		77.1%	89.4	89.2	85.9	79.7	92.6	86.3	85.7
Activities Patient Experience:		70.4%	76.9	66.7	78.3	85.0	64.8	68.8	72.9
Dietary Patient Experience:		76.0%	80.0	68.2	81.3	87.5	78.3	73.3	77.8

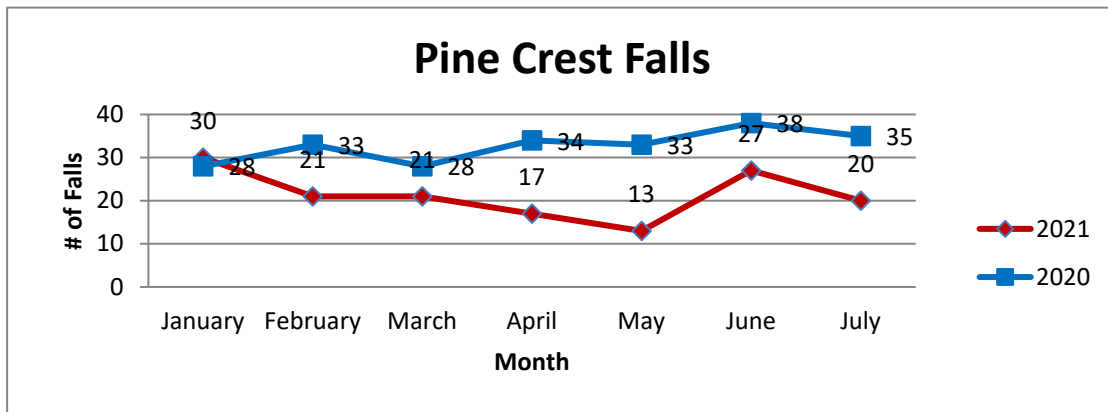
QUALITY

- **Star Rating**

CURRENT OVERALL STAR RATING (Out of 5): 3	CURRENT QUALITY STAR RATING (Out of 5): 3
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- **Observed Data**

- **Falls:** Please reference graph below.



- **Hospital Readmission**

Readmission Rate = 10%

Total Acute Care Transfers: 12

- 7- ED Only
 - 2- 30 Day Hospitalization
 - Elevated white count, dehydration (KE)
 - Elevated HR, Fever
 - 3 Un-Planned Hospitalization
 - Aspiration pneumonia (SF)
 - Pneumonia, duodenum twisting (JA)
 - Cough, fever (GE)
- RTH Summary: One hospitalization was identified as being avoidable as there were no interventions tried following chest pain experienced after a resident's fall that resulted in them being sent out.

REGULATORY

- **State Survey Visits:** No surveys occurred during the month.
- **Self-Reports:** No self-reports during the month.

REFERRAL TREND

- **Commentary:** During the month of July the program experienced 42 referrals. Of these referrals 27 did not admit for the below reasons:
 - Return Home (X1)
 - Insurance Out of Network (X5)
 - No Discharge Plan (X1)
 - No Skilled Need (X1)
 - No LTC Bed (X5)
 - No SCU Bed (X1)
 - Competitor (X2)
 - Aggressive Behaviors (X1)
 - No Dialysis Chair in Town (X2)
 - No Appropriate Bed (X3)
 - Medication Cost (X1)
 - Facility Full (X1)
 - Staffing (X3)
- **Additional Commentary:** Reference Table A.

TABLE A				
Financial Impact of Lost Referrals Due to Out of Network Insurance				
Time Period	Lost Referrals	Average Daily Reimbursement	Average Length of Stay	Lost Revenue
2020 (Q3-Q4)				>\$200,000.00
January	6	\$450.00	20	\$54,000.00
February	5	\$450.00	20	\$45,000.00
March	5	\$450.00	20	\$45,000.00
April	6	\$450.00	20	\$54,000.00
May	3	\$450.00	20	\$27,000.00
June	4	\$450.00	20	\$36,000.00
July	3	\$450.00	20	\$27,000.00
TOTAL (Last 11 Months)				>\$488,000.00
<i>*Average daily reimbursement and average length of stay are conservative estimates given a general patient's rehab stay. It can be expected that lost revenue would exceed the financial impacts that are presented.</i>				
<i>*Additional cost that would be experienced from the additional admissions would be minimal as the largest expense, labor, wouldn't have fluctuated based on the timing of when the referrals were received.</i>				

FINANCIALS

Average occupancy during the month was 92, which trended slightly up from the month prior of 91.

COVID STATUS

Resident Cases: The last positive resident case occurred in December. The dedicated COVID unit was closed following this case in late December.

Employee Cases: No positive cases during the month of July. As of this writing the program is in 'Outbreak' testing, based on two direct care employees testing positive during the month of August. Weekly testing has been occurring for the past few weeks for all staff and residents.

Visitation: Visitation had been suspended following the positive case in August. It has resumed as of Monday, August 16th based on all test results from the prior week coming back as negative.

Vaccination Clinics: Employees can sign-up to receive their vaccine through NCHC.

COVID Testing: Due to Lincoln County's COVID-19 positivity rate being above 5% we are in once per week testing. If all test results from the week of August 16th come back as negative, we can then transition back to 'routine' testing. This will still require weekly testing. However, vaccinated individuals do not need to be tested.

Other Items: We are continuing to make progress on efforts to transition back to communal dining soon.