



OFFICIAL NOTICE AND AMENDED AGENDA

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

Thursday, February 2, 2023 at 3:00 PM
North Central Health Care – Wausau Board Room
1100 Lake View Drive, Wausau WI 54403

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:

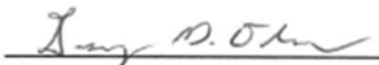
Meeting number: 1-408-418-9388 **Access Code:** 2480 071 0011 **Password:** 1234

AGENDA

1. Call to Order
2. Public Comments (15 Minutes)
3. Approval of January 19, 2023 Executive Committee Meeting Minutes
4. Educational Presentations/Outcome Monitoring Reports
 - a. Executive Director Report – G. Olsen
 - b. Executive Director 2023 Work Plan – G. Olsen
 - c. Managing Director of Community Programs 2023 Work Plan – V. Tylka
 - d. Update Regarding Training, Dietary, Policies & Procedures, and Heather Street Closing – G. Olsen
5. Discussion and Possible Action
 - a. Role of the NCCSP Board of Directors – G. Olsen
 - b. ACTION: Approval of Compensation and Timekeeping Policy – G. Olsen
 - c. ACTION: Update Regarding December Financial Statements and Obtain Direction from Executive Committee on Approaching the Member Counties Regarding Coverage of Certain Program Overages
6. Next Meeting Date & Time, Location, and Future Agenda Items
 - a. Next Meeting: Thursday, February 16, 2023 at 3:00 p.m. in the North Central Health Care Wausau Board Room
7. Adjournment

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.

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



Presiding Officer or Designee

DATE: 02/01/2023 TIME: 12:00 PM BY: D. Osowski

NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

January 19, 2023

3:00 p.m.

Wausau Board Room

Present: X Kurt Gibbs EXC Renee Krueger
X Lance Leonhard X Robin Stowe

Staff: Gary Olsen, Jennifer Peaslee, Jarret Nickel

Others: Dejan Adzic, Deputy Corporation Counsel

Call to Order

- Meeting was called to order by Chair Gibbs at 3:05 p.m.

Public Comments

- There were no public comments.

Approval of December 19, 22, 29, 2022 Executive Committee Meeting Minutes

- **Motion**/second, Leonhard/Stowe, to approve the minutes of the December 19, 22, and 29, 2022 Executive Committee meetings. Motion carried.

Executive Director Report – G. Olsen

- Next agenda will include a presentation of the 2023 Work Plan for the Executive Director as well as the 2023 Work Plan for V. Tylka, Managing Director of Community Programs.
- The Finance Director position has been filled with a start date of February 6.
- V. Tylka has started to work on establishing the Human Services Leadership Team.
- G. Olsen will be visiting each of the three County Boards in the next few months to begin to establish relationships with each of the counties.
- Have had inquiries from staff on the vision of NCHC with the position of Executive Director. To help build relationships and trust, Managers will be updated on the vision of NCHC at their next meeting, Olsen will participate in each new hire orientation again, and rounding by the Senior Leadership Team in each program and service area is being reestablished.
- An announcement will be sent out today on Dr. Gouthro's departure 3/27/2023. He will continue to oversee the MCW program and psychiatry residency program. We are meeting regularly to identify a transition plan.

Financial Update – G. Olsen

- November's financials were better than October. December financials, included in the packet, showed receipt of money from CCS which was more than anticipated, and the Medicaid adjustment for Pine Crest was also more than anticipated. We also had a plan to cover the \$1.1 million loss for Mount View. The CPE funds that were expected had not been received yet so we contacted the State yesterday and were informed that we would not be receiving these funds this year and next year. This amounts to \$730,000 less for Pine Crest and \$892,000 less for Mount View. With this news, we are looking at a \$2 million loss for Mount View and nearly \$1.2 million for Pine Crest. Updated December financials were distributed to reflect this additional information.

- We feel it is important for our legislators to be made aware of this recent information. We would like to meet with the State to relay how devastating this is on county nursing homes. We also learned that other county nursing homes in the State were not yet aware of the latest news about the CPE funds and what is more frustrating is that Rock and Dane Counties have each received millions of dollars more while the other counties have received much less or no funds.
- NCHC is currently looking at a \$1.2 million loss without including the debt payment. While cash on hand improved to 37 days and is trending in a good direction, we are asking for advances in funding from the State to help with our cash on hand.
- K. Gibbs has had conversations with Wisconsin Counties Associations (WCA), and it is understood that legislators were unaware of how the supplemental payments were done.
- The Committee agreed that contacts need to be made to our legislators, so they understand how critical the situation is for nursing homes and the future success of the nursing homes that have been hit hard these past few years. Being a unified voice of county homes with the assistance of WCA will be more impactful to make sure a clear voice is heard.
- We are working with our auditors and Marathon County on finalizing the Facilities Agreement. The Agreement will be brought back to the Executive Committee for approval.

Appointments to the NCCSP Board

- G. Olsen will contact R. Krueger regarding the two vacant Board positions from Lincoln County.
- There is one vacancy for Marathon County with Dr. Ticho's change from Medical Staff President and upcoming retirement in March. Marathon County residents can apply for the position by completing the online form on the Marathon County website.

Closed Session

- **Motion**/second, Stowe/Leonhard, to go into Closed Session (Roll Call Vote Suggested) Pursuant to Wis. Stat. ss. 19.85(1)(c)(f) and (h), for the purpose of “[c]onsidering employment, promotion, compensation or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility”, “considering medical data of specific persons”, “preliminary consideration of specific personnel problems or investigation of charges against specific persons,” and “conferring with counsel” with respect to litigation NCHC is likely to become involved in to wit: Update on Investigative Matters Concerning NCHC Employees and Discuss Program Specific Personnel Issues and Concerns, Discuss Medical Data of Certain Personnel, and Update From Legal Counsel Regarding Likely Employment Law Related Litigation Involving NCHC. G. Olsen, J. Peaslee, J. Nickel, and D. Adzic were asked to remain in Closed Session. Roll call taken. All indicated aye. Motion carried. Meeting convened in closed session at 3:45 p.m.

Reconvene in Open Session Immediately Following Closed Session and Take Action on Matters Discussed in Closed Session

- **Motion**/second, Leonhard/Stowe, to reconvene in Open Session at 4:29 p.m. Motion carried.
- No action taken from Closed Session.

Adjourn

- **Motion**/second, Leonhard/Stowe, to adjourn the meeting at 4:30 p.m. Motion carried.



North Central Health Care

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To: Executive Committee
 From: Gary D. Olsen, MPA, Executive Director
 Date: January 26, 2023
 RE: Reduction in Nursing Home Funding

This memo will explain the revenue that was budgeted for both nursing homes operated by North Central Health Care (NCHC) and what has subsequently been cut by the Department of Human Services (DHS).

Below is a listing of funds that have been cut by DHS:

<u>Mount View Care Center</u>	<u>Pine Crest Nursing Home</u>	<u>Total</u>	<u>Explanation</u>
\$1,084,000	\$833,300	\$1,917,300	Supplemental Payment Decrease
<u>892,341</u>	<u>730,590</u>	<u>1,622,931</u>	Excess CPE Award Decrease
\$1,976,341	\$1,563,890	\$3,540,231	Total

This year each county received a notice that Medicaid rates were going to be increased. This was very welcoming news to county run nursing homes because many of us are not able to break even in our operational budgets. It was our understanding that the legislature understood the issues nursing homes were facing and gave this increase to address those needs. We also believed the Supplemental Payments would continue as the State had \$39.1 million dollars that had to be given to county nursing homes to maintain the State’s Medicaid funding. NCHC budgeted for the increase in Medicaid rates and for the same amount of funding in Supplemental Payments that had been received in the past.

This year, due to the increases in the Medicaid funding, the formula DHS used to calculate direct care expenses for each facility resulted in a decrease for 23 of the 33 county run nursing homes. In previous years, the direct care losses based on Medicaid funding, were more than the funding levels, so each nursing home’s Supplemental Payment stayed about the same. Below is a table detailing the loss of Supplemental Payments to the 23 county run nursing homes:

www.norcen.org

<u>County</u>	<u>Facility</u>	<u>Supplemental Payments Decrease</u>
Clark	Clark Co. H.C.C.	\$ 965,800
Clark	Clark Co. H.C.C. FDD	1,536,700
Columbia	Columbia H.C.C.	576,800
Dodge	Clearview	777,200
Dodge	Clearview FDD	488,300
Dunn	The Neighbors – Central	526,600
Fond Du Lac	Harbor Haven H. & Rehab	369,300
Grant	Orchard Manor	453,200
Grant	Orchard Manor FDD	296,900
Green	Pleasant View N.H.	726,100
La Crosse	Hillview H.C.C.	1,012,900
Lafayette	Lafayette Manor	297,800
Lincoln	Pine Crest N.H.	883,300
Marathon	North Central H.C. (Mount View)	1,084,000
Monroe	Rolling Hills Rehab. Ctr.	751,000
Outagamie	Brewster Village	990,900
Polk	Golden Age Manor	715,400
Richland	Pin Valley H.C. & Rehab.	220,200
Sauk	Sauk Co. H.C.C.	115,000
Sheboygan	Rocky Knoll H.C.F.	892,000
Trempealeau	Pigeon Falls H.C.C.	508,400
Trempealeau	Trempealeau Co. H.C.C.	53,800
Vernon	Vernon Manor	227,900
Washington	Samaritan Health Center	730,700
Wood	Edgewater Haven N.H.	278,000
Kewaunee	Algoma Medical Center	314,400
Trempealeau	Marinuka Manor	331,200
Vernon	Norseland N.H.	<u>289,700</u>
Totals		\$ 16,413,500

There was \$16,413,500 reduced from 23 counties. Two nursing homes, who had larger direct care losses, were given a huge increase in their payments. Dane County's nursing home received an additional \$7,281,600 and Rock County's nursing home received \$2,168,200. As 23 counties incurred a budget deficit, these two counties now have a budget surplus, which we do not believe was the intent of the legislature when they increased Medicaid rates.

County run nursing homes also experienced a loss in funding due to not receiving the excess Certified Public Expenditure (CPE) payments. CPE payments have been made for years to county nursing homes but this year, no excess CPE payments will be received by any of the county nursing homes. We have also been told by DHS that these funds will probably not occur in the future either.

Requested Action by the Legislature:

- Utilize some of State's surplus funds to pay the 23 counties the amount of Supplemental Payments that were decreased totaling \$16,413,500.
- Utilize some of the State's surplus funds to pay all county nursing homes the amount of CPE payments that were paid in 2021 totaling \$11,530,039.
- Change the Supplemental Payment formula to be more consistent in future years to match what was paid in 2021.
- Increase the needed budget to continue paying county nursing homes the amounts they have previously received in CPE funding.

These actions are needed to help save county run nursing homes. Levy limits and the loss of State funding make it very difficult to operate a county nursing home.

Executive Director Work Plan

2023 Work Plan
Goal: Improve Communication and Culture

**Executive Director –
Gary D. Olsen**

Focus	Time	Activity	Progress/Notes
Deliverables			
Financial	First and Second Qrt	Work with Community Treatment to redo CCS contracts/Revenue	This process has begun. We have met with La Crosse County, met with providers, have a meeting scheduled with providers in Feb.
Financial	First and Second Qrt	Work w/Vicki to maximize revenue for her programs	
Financial	First Qrt	Redo Financial Statements	Worked with Bobby to show him how I want this done. He has the health and dental insurance funds set up.
Financial	First Qrt	Redo Compensation Plan	Nic & Jennifer have been assisting with this as members of the Compensation Committee. Meetings with managers have taken place, the plan is close to being ready for Exec. Comm approval.



Human Resources	First and Second Qrt	Create a Performance Evaluation Process and Implement Pay for Performance		
STRATEGIES				
Financial	First and Second Qrt	State Funding for Nursing Homes		
Partners	Ongoing	Improve Connectivity/communication with County Boards by meeting with them twice a year		
Organizational	Ongoing	Rounding to each program		I have started by visiting the residential facilities
Organizational	Ongoing	Quarterly Employee Meetings		We will start these in March
Organizational	Ongoing	Attend first day of employee orientation		This will start on January 30 th
Organizational	Ongoing	Management Team Meetings (all managers)		Held first one on January 26 th
Organizational	Ongoing	Meet with each Director's Team		
Organizational	Ongoing	Senior Leadership Team meetings every other week		These are scheduled
Organizational	Ongoing	Meet with each Senior Leader individually every other week		These are scheduled
Partners	Quarterly	Touch base with Counties DSS/Finance Directors		



Organizational	First and Second Qrt	Create Dashboards from selected relevant performance indicators		
Organizational	Ongoing	Program Evaluations		
Partners	Ongoing	Attend Human Services Leadership Team assist Vicki as needed to get this started, assist in implementing phase 1		
Organizational	Ongoing	Get the organization more involved in WCHSA		Vicki was able to get NCHC to be a member.
Organizational	Ongoing	Meet with members of the Legislature		I have a meeting with Representative Schneider scheduled
IMS	Ongoing	Restructure Department		This has started with new job descriptions for the department.





Behavioral Health Services

2023 Work Plan – First 6 months of the year
Goal: Operationalize the Desired Future State

Managing Director of Community Programs – Vicki Tylka

Focus	Time	Activity	Progress/Notes
Deliverables			
Partnerships	First quarter	Initiate meetings of the Human Services Leadership Team	Define core services, prioritization of services, strengths and gaps, communication plans, measures of success
Partnerships	Second quarter	Support formal communication structure with Marathon County law enforcement Establish connections with Lincoln and Langlade Counties' law enforcement jurisdictions	Create team to plan the event during the first quarter
Partnerships	First quarter	Connect with Marathon County Criminal Justice Coordinating Committee (CJCC)	Gather input to inform priorities
County Boards and committees	First and second quarters	Establish relationships with the three counties' applicable committees and boards	
Executive Committee	Second quarter	Prioritization of program initiatives to support achieving the Desired	Set the course, establish schedule for periodic updates to the committee






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		Future State for remainder of 2023 and 2024.		
STRATEGIES				
Internal	First and second quarters	Learn BHS programs, introduction to staff – engagement, input, emphasis on Desired Future State		
Internal	Ongoing	Employee engagement and enhancing work culture		
Financial	Ongoing	Learn about program revenues, expenses and opportunities for enhancement of core services		
Continuous improvement	Ongoing	Learn from other counties, state agencies and WCHSA		
Quality Assurance	Ongoing	Corporate Compliance, quality improvement initiatives		



Policy Title: Employee Compensation and Timekeeping Policy	 North Central Health Care <small>Person centered. Outcome focused.</small>
Policy #: 205-1100	Program: Human Resources 205 Human Resources 205
Date Issued: 01/01/2023	Policy Contact: Manager of HR

Related Forms

Fair Labor Standards Act; Wis. Stats. 272.12 Interpretation of Hours Worked

1. Purpose

This policy is applicable to all employees of NCHC and contracted staff. The standards of this policy are to be complied with by staff while they are employed in any NCHC facility during regularly scheduled work times unless another agreement such as a contract supersedes this policy.

North Central Health Care's Employee Compensation Policy ensures that pay is established and administered according to competitive, equitable, effective and compliant principles.

2. Definitions

Exempt:

An employee, based on duties performed and manner of compensation is exempt from the Fair Labor Standards Act (FLSA) minimum wage and overtime provisions. Exempt employees are paid on a salary basis and must work full-time (minimum of 0.75 FTE).

Non-Exempt:

All other employees who are subject to FLSA minimum wage and overtime provisions or work part-time are paid on an hourly basis.

Full-Time Equivalent:

~~A full 1.0 FTE is equal to 2,080 hours worked in a year.~~

Regular Full-time:

An employee who works a regular schedule and is expected to normally work at least thirty hours (0.75 FTE) up to forty hours (1.0 FTE) per work week.

Policy Title: Employee Compensation [and](#) Timekeeping Policy

Author(s): [Nic Lotzer & Jarret Nickel](#) **Next Review Date:** 10/01/2023

Owner: [Director of HR](#)

Approver: [Executive Committee](#)

Regular Part-time:

An employee who works a regular schedule and is expected to normally work at least twenty hours (0.50 FTE) but not more than thirty hours (0.75 FTE) per work week.

Limited Part-time:

An employee who works a regular schedule and is expected to normally work up to twenty hours per week (Less than 0.50 FTE).

Occasional:

An employee who works irregular hours on an as-needed basis not to exceed 1,000 hours worked in any 12-month period with a minimum of one shift in a 60 day period.

Student & Seasonal:

An employee who is either a student that will be limited to work hours during their off-school periods and/or weekends or individuals who only work specific periods in the course of a year.

Professional Staff:

Occupations which require specialized and theoretical knowledge which is usually acquired through college training or through work experience, licensure and other training which provides comparable knowledge.

Paraprofessional Staff:

Occupations in which workers perform some of the duties of a professional in a supportive role, which usually require less formal training and/or experience normally required for professional status.

3. Policy

General Procedure

Employee compensation is objectively administered and non-discriminatory in theory, application, and practice.

Time Keeping

Accurately recording hours worked is the responsibility of every employee. Hours worked is all time spent performing assigned duties and does not include paid leave. All non-exempt employees must accurately record time worked for payroll purposes and are required to record their own time within the timekeeping system at the beginning and end of each work period, and the start and end of any unpaid break. No work shall be performed by employees prior to their clocking in at the start of their work day, during lunch, other unpaid breaks, or after clocking out at the end of the day. NCHC does not have the authority to ask, encourage, or insinuate

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Commented [NL1]: Can this be adjusted up to 90? Do most occasional staff meet this requirement currently?

Commented [JN2R1]: Recommend to keep at 60

Commented [NL3]: Can we specify minimum work requirements here similar to Occasional staff? Maybe mention that they must generate a paycheck at least once every 180 days?

Commented [JN4R3]: Yes feel free to add 180 days

that an employee perform work off the clock. Altering, falsifying, tampering with time records, or recording time on another employee's time record may result in disciplinary action, up to and including termination of employment.

Payroll

Employees of NCHC are paid on a bi-weekly basis by direct deposit on alternating Fridays. In the event that a regularly scheduled payday falls on a bank holiday, employees will be paid the day prior to the bank holiday. Each workweek begins on Sunday at 12:00 am (midnight) and ends the following Saturday at 11:59 pm. Each paycheck will include earnings for all hours through the end of the previous payroll period.

Payroll Deductions

North Central Health Care reserves the right to make deductions and/or withhold compensation from an employee's paycheck as long as such action complies with applicable state and federal law. In addition, it may be possible for you to authorize NCHC to make additional deductions from your paycheck for extra income taxes, contributions to retirement savings programs or insurance benefits (if eligible). These deductions will be itemized on your payroll statement. The amount of the deductions may depend on your earnings and the information you furnish on your W-4 form regarding the number of dependents/exemptions you claim. Any change in name, address, telephone number, marital status or number of exemptions must be reported to Human Resources immediately to ensure proper credit for tax purposes. The W-2 form you receive each year indicates precisely how much of your earnings were deducted for these purposes. Any other mandatory deductions to be made from your paycheck, such as court-ordered garnishments, will be explained whenever NCHC is ordered to make such deductions.

Every effort is made to avoid errors in an employee's paycheck. If you believe an error has been made or you have a question about your pay, notify your supervisor immediately. North Central Health Care will take the necessary steps to research the problem and to assure that any necessary correction is made properly and promptly.

Breaks

Employees scheduled to work more than four hours may take reasonable time to rest, however, breaks are not guaranteed. Breaks must be approved by an employee's immediate supervisor. Non-exempt employees who leave NCHC property must punch out for a minimum of 30 minutes. Breaks, including lunch periods, exceeding thirty (30) minutes are unpaid unless specifically authorized by management.

Lunch breaks, which are unpaid, are thirty (30) minutes after six (6) hours worked and an additional thirty (30) minutes after twelve (12) hours worked. Prior approval must be given by an employee's supervisor to exceed a thirty (30) minute unpaid lunch period or to work through lunch. Employees under age 18 may not work more than six (6) hours without a duty free thirty (30) minute break.

Base Pay

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Owner: [Director of HR](#) **Approver:** [Executive Committee](#)

Base compensation is an employee's hourly rate without any differential, overtime, or additional pay factored in. Base compensation is designed to provide competitive and fair compensation to employees for fulfilling the full scope of responsibilities and accountabilities as outlined in the job description. Base compensation salary ranges and market rates for each position are established by researching industry and local salary survey data. Base compensation levels within the established range for the position are determined on the basis of an employee's ability to execute the responsibilities of the position.

Merit Pay

North Central Health Care may award annual pay increases in the form of merit increases. Merit pay is used to reward successful performance and is based on the amount of funding available, the relative position of an individual's current pay to the market rate, and annual performance evaluation factors. Annual merit or cost-of-living (COLA) increases are considered as a part of the budget process each year, communication for any merit adjustments will be shared with employees as appropriate.

Step-Scale Review & Adjustment

North Central Health Care has identified several [critical](#) positions as step-scale positions. These positions have an identified scale with step increases based on years of experience in the role or licensing. Review for step-scale increase will occur at least annually. Years of experience will be based on the first day of the pay period in the month noted for annual review. An example of this would be if the review occurred in January and an employee was at 1 year 11 months experience as of the first date of the pay period they would not move to the next step until the following review period.

Overtime

North Central Health Care will comply with the provisions of the Fair Labor Standard Act and provide for systematic review of exemption status for all employees. All exempt positions will have a documented analysis establishing the basis for the exemption designation of the position. Overtime shall be compensated for non-exempt employees at one and one half (1 ½) times the employee's hourly rate of pay. Overtime is defined as any hours worked in excess of 40 hours per week.

Overtime work is to be held to a minimum consistent with the needs of the program. Prior approval by management must be obtained for all overtime hours worked. It is the responsibility of each program to explore all possible alternatives before a decision is made to require employees to work on an overtime basis. Further, it is the responsibility of each program to ensure that the provisions of overtime pay are administered in the best interest of NCHC services. Each program should develop internal controls that provide a means of reviewing and evaluating the use of overtime.

Shift Differential

[Employees working in programs with established shifts \(i.e., Mount View Care Center, Pine Crest Nursing Home, Residential Services, Inpatient Hospitals, Food Services, Crisis, Crisis Stabilization Programs, and MMT\) are eligible and will be paid shift differentials for any time worked in the shift. All other employees are not eligible for shift differential.](#)

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North Central Health Care pays shift differentials to non-exempt staff for hours worked on:

- Evenings (Monday – Sunday, 2 p.m. until 10 p.m.)
- Nights (Monday – Sunday, 10 p.m. until 6 a.m.)

- Paraprofessional non-exempt employees will be paid shift differential of \$1.00 per hour for evening shifts, \$1.00 per hour for night shifts.
- Professional (licensed) non-exempt employees will be paid shift differential of \$1.50 per hour for evening shifts, \$2.50 per hour for night shifts.

On-Call Pay

On-call pay is for an employee who is scheduled and required to remain available to be called back to work on short notice if the need arises. Employees required to be in official on-call status will be paid \$2.50 per hour served on-call. Employees are not eligible to receive payment for both hours worked and on-call pay for the same hours. If an employee reports to work during on-call status, on-call pay ends when the employee reports to work. If an employee must remain on NCHC property or so near that time cannot be used freely, it is not considered on-call time but is to be recorded as work time. Note: If you are called in you will be paid the greater of two hours of work or actual time worked.

Pick Up Pay

North Central Health Care (NCHC) programs with established shifts have an identified need to incentivize staff to pick up shifts in order to provide cares or meet the needs of the patients served.

1.) Pick Up Pay amounts which are outlined below can only be received by eligible programs and employees within 3 weeks or 21 calendar days of the shift being worked, any shifts picked up prior to 3 weeks or 21 calendar days will not be eligible for Pick Up Pay.

Amounts of Pick Up Pay:

Hours Picked Up:	Pick Up Pay Received for Hourly <u>or Non- Exempt</u> Employees:
3 to 6.75 Hours	1 Hour at Employee's Base Rate of Pay
7 to 11.75 Hours	2 Hours at Employee's Base Rate of Pay
12 to 16 Hours	3 Hours at Employee's Base Rate of Pay

Commented [NL5]: Any FTE considerations for eligibility?
Commented [JN6R5]: Keep at .5

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Double Pick Up Pay: Extreme Staffing Situations:

Program and/or Managing Directors have the ability to double pick up pay when the program is faced with high vacancy rates causing lost revenue or potential regulatory issues with the level/quality of care being provided with the approval of the Senior Leader, Managing Director of Finance/Administration, and Executive Director. It is understood that the Program and/or Managing Director is responsible for the expenses of the program even when enacting double pick up pay. Double pick up pay should be used for defined periods of time to not exceed one month per approving time, salaried employees are not eligible for double pick up pay at any time.

Exempt or Salaried Employees Pick Up Pay Eligibility:

During high vacancy rates or call off periods it may be expected that a salaried or exempt staff pick up a shift in a multiple shift program and as a result of having to pick up these new duties above and beyond their normal duties NCHC offers the following Pick Up Pay scale. Salaried employees will not be granted any “time back” if pick up pay is received.

Hours Picked Up (Per Pay Period):	Pick Up Pay Received for Salaried Employees:
12 to 15.99 Hours	\$50.00
16 to 23.99 Hours	\$100.00
24+ Hours	\$150.00

Salaried employees are not allowed to average more than 39 hours of pick up pay per pay period in a rolling 52 week period.

Exempt or Salaried Physicians Assistants and Nurse Practitioners who fill vacant shifts on weekends will receive their equivalent hourly pay for the time they are in the hospital. They will then receive the equivalent of one hour of pay for the remainder on call time for that day. When a holiday shift is filled the time will be paid at time and a half.

Ineligibility for Pick Up Pay:

- 1.) Programs without established shifts including but not limited to Human Resources, Learning & Development, Accounting, HIM, Business OperationsIMS, Patient Financial Services, Patient Access, Outpatient, Community Treatment, Transportation and Aquatics.
- 2.) Employees who are below a 0.5 FTE in UKG do not qualify for Pick Up Pay
- 3.) Only shifts beyond an employee’s FTE status are eligible for Pick Up Pay within the pay period; scheduled PLT is counted towards FTE status for the pay period in which the PLT is taken.

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- 4.) Employees who are in an “on-call shift” status are not eligible for Pick Up Pay
- 5.) Scheduling up shifts or assigned shifts are not eligible for Pick Up Pay
- 6.) Flex hours or shifts are not eligible for Pick Up Pay
- 7.) Fill in/Swap hours or shifts are not eligible for Pick Up Pay
- 8.) Employees on approved PLT that pick up their own scheduled shift are not eligible for Pick Up Pay

Temporary Appointment Pay

Employees temporarily appointed to positions of a higher classification may be eligible for a pay increase during the temporary appointment period. The supervisor in coordination with Human Resources will review temporary appointment pay rates annually based on approved compensation administration guidelines. Temporary appointment pay should not exceed 90% of the new job pay grade, for those in step positions it may not exceed the 1st step of the new job.

Holiday Pay

Full-time and part-time employees receive the following paid holidays:

New Year's Day	Day After Thanksgiving
Memorial Day	Christmas Eve Day
Independence Day	Christmas Day
Labor Day	New Year's Eve Day
Thanksgiving Day	

For holiday pay purposes, employees subject to seven (7) day a week scheduling are paid on the actual holiday. For employees working a Monday – Friday schedule, when any of these holidays fall on a Saturday or Sunday, the preceding Friday or following Monday are considered the holiday for scheduling purposes. Holiday pay is paid based on an employee's status. Full-time employees will be paid eight (8) hours for each holiday; regular part-time employees will be paid six (6) hours).

Holiday Premium

Any non-exempt employee who works during any paid holiday will be paid at the overtime rate for all hours worked on the actual holiday (12:00 a.m. until 11:59 p.m.) in addition to any holiday pay received. Hours worked on a holiday that may be eligible for overtime are not eligible for holiday premium.

An employee, who fails to work a scheduled holiday, including the scheduled day immediately prior to or following the paid holiday, will forfeit any holiday pay and holiday premium, unless that employee is off work due to a Worker's Compensation incident or approved Family Medical Leave.

Policy Title: Employee Compensation [and](#) Timekeeping Policy
Author(s): [Nic Lotzer & Jarret Nickel](#) **Next Review Date:** 10/01/2023
Owner: [Director of HR](#) **Approver:** [Executive Committee](#)

Funeral Pay

Funeral pay recognizes that employees need time to make arrangements, handle family matters and attend funerals when a death occurs with an immediate member of their family without suffering short-term financial burdens from loss of income. Therefore, in the event of a death in the immediate family of an employee, full-time and regular part-time employees (0.5 FTE and greater) will upon request to their supervisor, be granted up to three (3) days of paid funeral leave not to exceed 24 hours of paid time. Exceptions for additional days in extraordinary situations may be approved at the sole discretion of the ~~Chief Operating Officer~~Executive Director. Funeral leave must be used within a reasonable time of the death with employees solely being eligible to be paid for those days that are scheduled workdays.

Immediate family includes an employee's spouse, child, father, mother, brother, sister, grandparent, grandchild, or counterpart step relatives, in-laws or any person who had resided with the employee immediately preceding the person's death.

If an employee wants to attend a funeral of a person not meeting the requirements of funeral pay, they may, upon supervisor approval, request PLT or make arrangements to trade shifts.

Jury Duty

Employees must inform their direct supervisor or a designated representative when they are notified for jury duty. Upon receipt of appropriate documentation, employees who serve on a jury or are subpoenaed to appear as a witness before a court or administrative tribunal shall be paid their regular earnings for hours served during regular scheduled hours. However, employees will be required to submit payments received for jury duty including mileage reimbursement to NCHC to offset this benefit within 5 days of completing jury duty. When released from jury or witness duties employees shall immediately return to their job and complete the scheduled work day. Employees shall not be entitled to overtime or shift differential under this provision.

4. References

Fair Labor Standards Act; Wis. Stats. 272.12 Interpretation of Hours Worked

Related Policies, Procedures and Documents

- *Compensation Administration Manual*

Policy Title: Employee Compensation and Timekeeping Policy

Author(s): Nic Lotzer & Jarret Nickel **Next Review Date:** 10/01/2023

Owner: Director of HR

Approver: Executive Committee

North Central Health Care
Programs by Service Line
For the Period Ending December 31, 2022

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
BEHAVIORAL HEALTH SERVICES								
Adult Behavioral Health Hospital	6,395,644	6,570,466	(174,821)	6,877,199	6,912,556	35,356	(481,555)	(139,465)
Adult Crisis Stabilization Facility	1,496,948	1,428,627	68,321	1,560,527	1,478,583	(81,944)	(63,579)	(13,623)
Lakeside Recovery MMT	227,040	807,439	(580,400)	222,977	463,452	240,475	4,063	(339,925)
Youth Behavioral Health Hospital	1,802,542	1,740,408	62,134	3,282,895	2,979,969	(302,927)	(1,480,354)	(240,793)
Youth Crisis Stabilization Facility	962,407	1,071,295	(108,887)	876,883	976,233	99,349	85,524	(9,538)
Crisis Services	2,294,604	2,919,997	(625,393)	2,758,300	3,481,931	723,632	(463,696)	98,238
Psychiatry Residency	249,900	354,199	(104,299)	352,282	470,972	118,691	(102,382)	14,391
	<u>13,429,084</u>	<u>14,892,430</u>	<u>(1,463,346)</u>	<u>15,931,063</u>	<u>16,763,695</u>	<u>832,632</u>	<u>(2,501,979)</u>	<u>(630,714)</u>
COMMUNITY SERVICES								
Outpatient Services (Marathon)	5,321,632	5,473,139	(151,507)	5,689,658	6,369,752	680,094	(368,026)	528,587
Outpatient Services (Lincoln)	1,116,258	1,149,585	(33,327)	782,005	910,438	128,433	334,254	95,106
Outpatient Services (Langlade)	898,671	996,000	(97,329)	669,971	705,135	35,164	228,700	(62,165)
Community Treatment Adult (Marathon)	6,373,679	5,560,697	812,981	5,089,160	5,458,234	369,074	1,284,519	1,182,055
Community Treatment Adult (Lincoln)	1,032,063	1,049,350	(17,287)	901,848	940,114	38,266	130,215	20,979
Community Treatment Adult (Langlade)	363,285	699,915	(336,630)	446,775	631,657	184,882	(83,490)	(151,749)
Community Treatment Youth (Marathon)	6,685,893	5,762,463	923,430	5,186,211	5,666,454	480,243	1,499,681	1,403,673
Community Treatment Youth (Lincoln)	2,026,833	1,912,715	114,118	1,671,836	1,798,441	126,605	354,997	240,724
Community Treatment Youth (Langlade)	1,453,280	1,680,426	(227,146)	1,229,847	1,416,814	186,967	223,433	(40,179)
Community Corner Clubhouse	204,921	178,845	26,076	261,937	312,550	50,613	(57,016)	76,690
	<u>25,476,514</u>	<u>24,463,135</u>	<u>1,013,379</u>	<u>21,929,248</u>	<u>24,209,590</u>	<u>2,280,342</u>	<u>3,547,266</u>	<u>3,293,721</u>
COMMUNITY LIVING								
Adult Day Services (Marathon)	757,937	772,377	(14,440)	694,684	694,217	(467)	63,253	(14,907)
Prevocational Services (Marathon)	425,030	574,384	(149,354)	604,701	715,849	111,148	(179,671)	(38,207)
Lincoln Industries	1,060,395	603,732	456,663	1,152,836	1,037,040	(115,796)	(92,441)	340,867
Day Services (Langlade)	477,662	352,439	125,223	365,567	385,193	19,626	112,095	144,849
Andrea St Group Home	627,227	526,386	100,841	552,565	464,475	(88,090)	74,662	12,751
Chadwick Group Home	650,816	515,191	135,624	542,155	491,941	(50,214)	108,661	85,411
Bissell Street Group Home	617,298	648,864	(31,566)	431,449	499,507	68,058	185,850	36,492
Heather Street Group Home	580,992	495,730	85,262	514,156	424,429	(89,727)	66,836	(4,465)
Jelinek Apartments	966,561	873,151	93,410	844,780	803,453	(41,326)	121,782	52,084
River View Apartments	776,501	741,362	35,139	642,494	849,667	207,173	134,007	242,312
Forest Street Apartments	203	-	203	2,603	-	(2,603)	(2,400)	(2,400)
Fulton Street Apartments	233,673	277,190	(43,518)	308,259	321,579	13,320	(74,587)	(30,198)
Riverview Terrace	356,980	356,357	623	412,688	315,786	(96,902)	(55,708)	(96,279)
Hope House (Sober Living Marathon)	9,317	908	8,409	75,914	67,496	(8,418)	(66,596)	(9)
Homelessness Initiative	120	-	120	13,096	28,300	15,204	(12,976)	15,324
Sober Living (Langlade)	42,359	40,736	1,622	59,217	104,551	45,333	(16,859)	46,956
	<u>7,583,071</u>	<u>6,778,809</u>	<u>804,262</u>	<u>7,217,162</u>	<u>7,203,481</u>	<u>(13,681)</u>	<u>365,909</u>	<u>790,581</u>
NURSING HOMES								
Mount View Care Center	21,181,434	22,178,519	(997,085)	22,012,384	21,888,986	(123,397)	(830,950)	(1,120,482)
Pine Crest Nursing Home	12,215,268	11,944,230	271,038	13,413,066	12,988,883	(424,183)	(1,197,798)	(153,145)
	<u>33,396,701</u>	<u>34,122,748</u>	<u>(726,047)</u>	<u>35,425,449</u>	<u>34,877,870</u>	<u>(547,580)</u>	<u>(2,028,748)</u>	<u>(1,273,627)</u>
Pharmacy	8,068,592	8,051,540	17,053	8,377,480	7,297,047	(1,080,433)	(308,887)	(1,063,380)
OTHER PROGRAMS								
Aquatic Services	1,123,357	1,196,130	(72,773)	1,365,836	1,405,098	39,262	(242,479)	(33,511)
Birth To Three	523,728	400,000	123,728	523,600	400,000	(123,600)	129	129
Adult Protective Services	835,640	795,754	39,886	843,954	787,495	(56,459)	(8,314)	(16,573)
Demand Transportation	418,005	507,743	(89,738)	469,960	364,013	(105,947)	(51,955)	(195,684)
	<u>2,900,730</u>	<u>2,899,626</u>	<u>1,104</u>	<u>3,203,350</u>	<u>2,956,606</u>	<u>(246,743)</u>	<u>(302,620)</u>	<u>(245,639)</u>
Total NCHC Service Programs	90,854,693	91,208,289	(353,596)	92,083,751	93,308,289	1,224,538	(1,229,058)	870,942

North Central Health Care
Fund Balance Review
For the Period Ending December 31, 2022

	<u>Marathon</u>	<u>Langlade</u>	<u>Lincoln</u>	<u>Total</u>
YTD Appropriation (Tax Levy) Revenue	4,781,205	230,186	952,556	5,963,947
Total Revenue at Period End	64,611,611	5,412,641	20,830,442	90,854,694
County Percent of Total Net Position	71.1%	6.0%	22.9%	
Total Operating Expenses, Year-to-Date	64,909,707	5,408,264	21,765,781	92,083,752
Share of Operating Cash	6,609,154	553,662	2,130,756	9,293,572
Days Cash on Hand	37	37	36	37
Minimum Target - 20%	12,981,941	1,081,653	4,353,156	18,416,750
Over/(Under) Target	(6,372,787)	(527,991)	(2,222,400)	(9,123,178)

North Central Health Care
Review of Services in Marathon County
For the Period Ending December 31, 2022

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Outpatient Services	5,321,632	5,473,139	(151,507)	5,689,658	6,369,752	680,094	(368,026)	528,587
Community Treatment-Adult	6,373,679	5,560,697	812,981	5,089,160	5,458,234	369,074	1,284,519	1,182,055
Community Treatment-Youth	6,685,893	5,762,463	923,430	5,186,211	5,666,454	480,243	1,499,681	1,403,673
Residential	4,453,271	4,077,875	375,396	3,838,460	3,855,051	16,591	614,811	391,987
Day & Prevocational Services	1,182,967	1,346,761	(163,794)	1,299,385	1,410,066	110,681	(116,418)	(53,113)
Clubhouse	204,921	178,845	26,076	261,937	312,550	50,613	(57,016)	76,690
Homelessness Initiative	120	-	120	13,096	28,300	15,204	(12,976)	15,324
Hope House Sober Living	9,317	908	8,409	75,914	67,496	(8,418)	(66,596)	(9)
Riverview Terrace	356,980	356,357	623	412,688	315,786	(96,902)	(55,708)	(96,279)
Demand Transportation	418,005	507,743	(89,738)	469,960	364,013	(105,947)	(51,955)	(195,684)
Aquatic Services	1,123,357	1,196,130	(72,773)	1,365,836	1,405,098	39,262	(242,479)	(33,511)
Mount View Care Center	21,181,434	22,178,519	(997,085)	22,012,384	21,888,986	(123,397)	(830,950)	(1,120,482)
	47,311,574	46,639,436	672,139	45,714,688	47,141,787	1,427,099	1,596,886	2,099,237
Shared Services								
Adult Behavioral Health Hospital	4,782,013	4,911,788	(129,775)	5,105,142	5,131,388	26,246	(323,129)	(103,529)
Youth Behavioral Health Hospital	1,337,962	1,291,838	46,124	2,436,987	2,212,116	(224,871)	(1,099,026)	(178,748)
Residency Program	185,508	262,932	(77,424)	261,509	349,616	88,107	(76,001)	10,683
Crisis Services	1,868,026	2,201,183	(333,156)	2,047,565	2,584,737	537,172	(179,539)	204,016
Adult Crisis Stabilization Facility	1,111,227	1,060,511	50,717	1,158,424	1,097,594	(60,829)	(47,196)	(10,113)
Youth Crisis Stabilization Facility	714,423	795,253	(80,830)	650,936	724,685	73,750	63,487	(7,080)
Pharmacy	5,989,547	5,976,889	12,659	6,218,843	5,416,807	(802,036)	(229,296)	(789,378)
Lakeside Recovery MMT	168,538	599,385	(430,847)	165,522	344,033	178,511	3,016	(252,336)
Adult Protective Services	619,064	589,455	29,608	626,491	584,580	(41,911)	(7,427)	(12,302)
Birth To Three	523,728	400,000	123,728	523,600	400,000	(123,600)	129	129
	17,300,036	18,089,233	(789,197)	19,195,019	18,845,558	(349,461)	(1,894,983)	(1,138,658)
Excess Revenue/(Expense)	64,611,611	64,728,669	(117,058)	64,909,707	65,987,345	1,077,638	(298,097)	960,579

North Central Health Care
Review of Services in Lincoln County
For the Period Ending December 31, 2022

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Outpatient Services	1,116,258	1,149,585	(33,327)	782,005	910,438	128,433	334,254	95,106
Community Treatment-Adult	1,032,063	1,049,350	(17,287)	901,848	940,114	38,266	130,215	20,979
Community Treatment-Youth	2,026,833	1,912,715	114,118	1,671,836	1,798,441	126,605	354,997	240,724
Lincoln Industries	1,060,395	603,732	456,663	1,152,836	1,037,040	(115,796)	(92,441)	340,867
Pine Crest Nursing Home	12,215,268	11,944,230	271,038	13,413,066	12,988,883	(424,183)	(1,197,798)	(153,145)
	<u>17,450,817</u>	<u>16,659,613</u>	<u>791,205</u>	<u>17,921,590</u>	<u>17,674,916</u>	<u>(246,674)</u>	<u>(470,772)</u>	<u>544,531</u>
Shared Services								
Adult Behavioral Health Hospital	1,025,578	1,052,297	(26,719)	1,051,079	1,056,483	5,404	(25,501)	(21,315)
Youth Behavioral Health Hospital	275,350	265,854	9,496	501,743	455,445	(46,298)	(226,392)	(36,802)
Residency Program	38,194	54,134	(15,941)	53,841	71,981	18,140	(15,648)	2,200
Crisis Services	270,574	427,464	(156,889)	421,566	532,162	110,596	(150,991)	(46,293)
Adult Crisis Stabilization Facility	228,787	218,345	10,442	238,504	225,980	(12,524)	(9,717)	(2,082)
Youth Crisis Stabilization Facility	147,090	163,732	(16,642)	134,019	149,203	15,184	13,071	(1,458)
Pharmacy	1,233,166	1,230,560	2,606	1,280,375	1,115,247	(165,128)	(47,209)	(162,522)
Lakeside Recovery MMT	34,700	123,405	(88,706)	34,079	70,832	36,753	621	(51,953)
Adult Protective Services	126,186	120,090	6,096	128,986	120,357	(8,629)	(2,800)	(2,533)
	<u>3,379,625</u>	<u>3,655,881</u>	<u>(276,256)</u>	<u>3,844,191</u>	<u>3,797,690</u>	<u>(46,502)</u>	<u>(464,566)</u>	<u>(322,758)</u>
Excess Revenue/(Expense)	20,830,442	20,315,493	514,949	21,765,781	21,472,606	(293,175)	(935,339)	221,773

North Central Health Care
Review of Services in Langlade County
For the Period Ending December 31, 2022

	Revenue			Expense			Net Income/ (Loss)	Variance From Budget
	Actual	Budget	Variance	Actual	Budget	Variance		
Direct Services								
Outpatient Services	898,671	996,000	(97,329)	669,971	705,135	35,164	228,700	(62,165)
Community Treatment-Adult	363,285	699,915	(336,630)	446,775	631,657	184,882	(83,490)	(151,749)
Community Treatment-Youth	1,453,280	1,680,426	(227,146)	1,229,847	1,416,814	186,967	223,433	(40,179)
Sober Living	42,359	40,736	1,622	59,217	104,551	45,333	(16,859)	46,956
Day Services	477,662	352,439	125,223	365,567	385,193	19,626	112,095	144,849
	<u>3,235,257</u>	<u>3,769,517</u>	<u>(534,260)</u>	<u>2,771,377</u>	<u>3,243,349</u>	<u>471,971</u>	<u>463,880</u>	<u>(62,288)</u>
Shared Services								
Adult Behavioral Health Hospital	588,053	606,381	(18,328)	720,978	724,685	3,707	(132,924)	(14,621)
Youth Behavioral Health Hospital	189,229	182,716	6,514	344,166	312,408	(31,758)	(154,936)	(25,244)
Residency Program	26,198	37,133	(10,934)	36,932	49,375	12,443	(10,733)	1,509
Crisis Services	156,003	291,350	(135,347)	289,169	365,032	75,863	(133,166)	(59,485)
Adult Crisis Stabilization Facility	156,934	149,772	7,163	163,599	155,009	(8,591)	(6,665)	(1,428)
Youth Crisis Stabilization Facility	100,895	112,310	(11,415)	91,929	102,344	10,415	8,966	(1,000)
Pharmacy	845,879	844,091	1,788	878,261	764,993	(113,268)	(32,383)	(111,481)
Lakeside Recovery MMT	23,802	84,649	(60,847)	23,376	48,586	25,210	426	(35,636)
Adult Protective Services	90,390	86,208	4,181	88,477	82,558	(5,919)	1,913	(1,737)
	<u>2,177,384</u>	<u>2,394,609</u>	<u>(217,226)</u>	<u>2,636,887</u>	<u>2,604,989</u>	<u>(31,897)</u>	<u>(459,503)</u>	<u>(249,123)</u>
Excess Revenue/(Expense)	5,412,641	6,164,126	(751,486)	5,408,264	5,848,338	440,074	4,377	(311,411)