

OFFICIAL NOTICE AND 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 as noted below:

Wednesday, June 5, 2024 at 9:00 AM
North Central Health Care – **NCHC Eagle Board Room**
2400 Marshall Street, Suite A, 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:

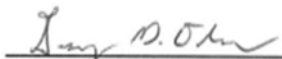
Meeting number: 1-408-418-9388 **Access Code:** 2489 048 4699 **Password:** 1234

AGENDA

1. Call to Order
2. Public Comments (15 Minutes)
3. Approval of May 29, 2024 Executive Committee Meeting Minutes
4. Discussion and Possible Action
 - a. ACTION: 2024 Code of Conduct – J. Peaslee
 - b. ACTION: Compensation and Timekeeping Policy – G. Olsen
5. Motion to go into Closed Session (roll call vote required), pursuant to Wis. Stat. s. 19.85(1)(g), for the purpose of conferring with legal counsel for the governmental body who is rendering oral or written advice concerning strategy to be adopted by the body with respect to litigation in which it is or is likely to become involved, to wit: update and discussion of strategy relative to Department of Labor litigation and claim from Emmerich & Associates.
6. Motion to Return to Open Session (Roll call Vote not required)
7. Discussion and Possible Action Resulting from Closed Session Discussion
8. Next Meeting Date & Time, Location and Future Agenda Items
 - a. Wednesday, June 26, 2024, 1:00 p.m., NCHC Eagle Board Room
9. 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, Tomahawk Leader
Merrill Foto News, Langlade, Lincoln & Marathon County Clerks Offices



Presiding Officer or Designee

DATE: 05/30/2024 TIME: 1:00 PM BY: D. Osowski

NORTH CENTRAL COMMUNITY SERVICES PROGRAM EXECUTIVE COMMITTEE MEETING MINUTES

May 29, 2024

1:00 p.m.

Virtual Only Meeting

Present: X_(WebEx) Kurt Gibbs X_(WebEx) Renee Krueger
EXC Lance Leonhard X_(WebEx) Robin Stowe

Staff: Gary Olsen, Jason Hake

Guest: Christine Voldpagel

Call to Order

- Meeting was called to order by Kurt Gibbs, Chair, at 1:02 p.m.

Public Comments

- None

Approval of April 24, 2024 Executive Committee Meeting Minutes

- **Motion**/second, Krueger/Stowe, to approve the April 24, 2024 Executive Committee meeting minutes. Motion carried.

Recommendations of Medical Staff

- **Motion**/second, Stowe/Krueger, to approve the recommendations of Medical Staff: Initial appointments: Shamim Anwar, M.D., Ridhwi Mukerji, M.D., Bret Stysly, M.D., and amendments for Kessa Erickson, APNP, Heidi Heise, APNP, Theresa Micke, PA-C, Hannah Wenzlick, PA-C, and Kimberly Hoenecke, D.O. Motion carried.

Financial Update – Jason Hake

- April financials were reviewed.
- Department of Health Services (DHS) notified us of a decrease in our expected 2024 supplemental payment of about \$860,000 and believe it is due to a delay by DHS of an updated appraisal of the new nursing home. We are working with DHS and our auditors to remedy the situation and will keep the Committee updated.

2024 Budget Update – J. Hake

- This should read the 2025 Budget Update.
- Process is the same as last year. Budget book will be provided to the Executive Committee in August. Challenges for the 2025 budget will be the transition of Pine Crest Nursing Home, rising health insurance costs, an increase in the debt payment, and potential wage increases with results of a wage and classification study.
- Metrics are being re-worked following feedback from the Committee and results of The Joint Commission Survey resulting in value added information.

Pine Crest Nursing Home Update – G. Olsen

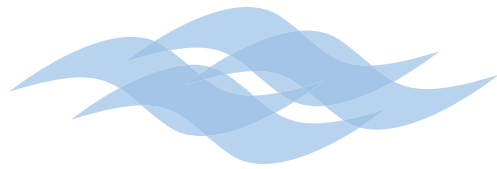
- Will be discussing Accounts Receivable items with Lincoln County and meeting with Pine Crest employees this week.
- Following intensive legal review, PTO banks of Pine Crest employees will be paid directly to the employees due to IRS laws and regulations rather than transferring the PTO banks to the new owner.

Adjourn

- **Motion**/second, Stowe/Krueger, to adjourn the meeting at 1:34 p.m. Motion carried.

Minutes prepared by Debbie Osowski, Senior Executive Assistant

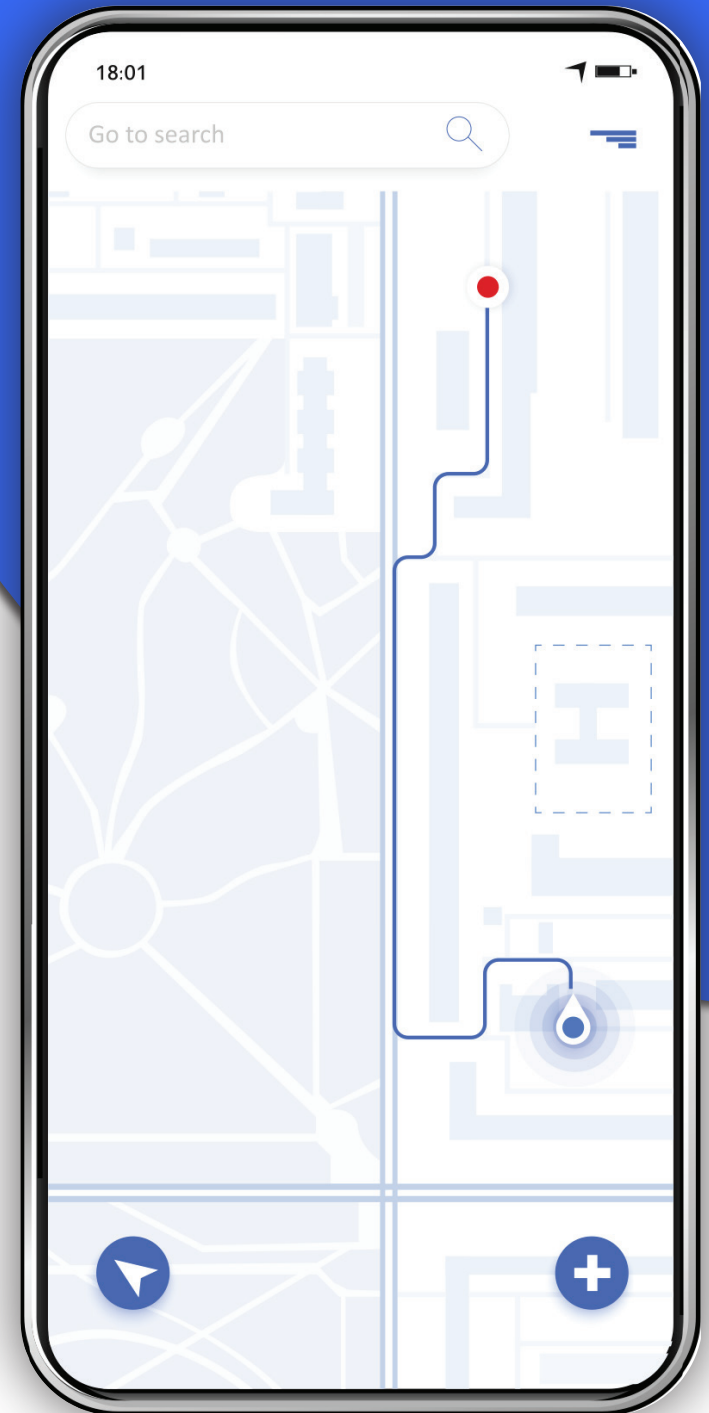
DRAFT



NORTH CENTRAL HEALTH CARE'S

CODE OF CONDUCT

An Employee's Guide to Ethical Behavior



CONTENTS

SECTION ONE Welcome to our Code of Conduct - A Message from Gary

SECTION TWO Our Mission, Vision & Core Values, Compliance Program

SECTION THREE Accountability: We Commit to Positive Outcomes

About the Code
Our Responsibilities
Violations of the Code
How to Make Good Decisions
Speaking Up: Voicing Concerns, Seeking Guidance
Refraining from Retaliation

SECTION FOUR Partnership: Our Commitment to Each Other

Individual Behavior & Ethical Standards in Business
A Workplace that Prioritizes Safety & Health

SECTION FIVE Integrity: We do the Right Things for the Right Reasons

Conflicts of Interest & Gifts
Compliance with Rules & Regulations:

- Fraud, Waste, and Abuse Laws
- Cooperation with Government Inquiries
- Ensuring Financial Integrity
- Wage & Hour Standards

SECTION SIX Dignity: We Honor Everyone's Dignity by Protecting Them

Keeping Information Private: HIPAA & Privacy Reminders
Cybersecurity
Protecting Those We Serve: Caregiver Misconduct

SECTION SEVEN Continuous Improvement

Attestation



WELCOME

to Our Code of Conduct

At North Central Health Care (NCHC) we are entrusted with the responsibility of maintaining the integrity of our organization through compliance and adherence to the code of conduct.

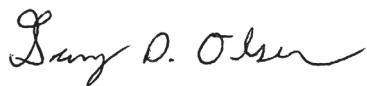
Integrity is one of our Core Values, and it is important to show integrity to the organization but more importantly to those we serve. At NCHC we live by our Core Values: Dignity, Accountability, Partnership, Continuous Improvement, and Integrity. If our Core Values are our compass, then our Code of Conduct is our road map.

Compliance and our Code of Conduct serve as the guiding lights that steer us towards ethical practices, fostering an environment of trust, respect, dignity, and accountability. They form the foundation upon which our organization stands, defining who we are and what we stand for. By embracing and embodying these principles in our daily actions, we not only protect the reputation of our organization but also contribute to its long-term success.

Furthermore, compliance is not merely a set of rules to be followed but a mindset to be embraced. It is about doing what is right, even when no one is watching. It is about taking ownership of our actions and their consequences, understanding that every decision we make has an impact, not just on ourselves but on those individuals we serve.

Similarly, our code of conduct serves as a compass, guiding us towards ethical behavior and decision-making. It outlines the values and expectations that we collectively hold dear, serving as a reminder of the standards we aspire to uphold. By embodying the principles outlined in our code of conduct, we cultivate a culture of integrity, inclusivity, and professionalism, where everyone feels valued and respected.

Thank you for your unwavering dedication to compliance and the code of conduct. Your commitment to doing what is right sets the foundation for our continued success.



Gary Olsen
Executive Director



OUR CORE VALUES



DIGNITY

We are dedicated to providing excellent service with acceptance and respect to every individual, every day.



INTEGRITY

We keep our promises and act in a way where doing the right things for the right reasons is standard.



ACCOUNTABILITY

We commit to positive outcomes and each other's success.



PARTNERSHIP

We are successful by building positive relationships in working towards a system of seamless care as a trusted community and county partner.



CONTINUOUS IMPROVEMENT

We embrace change through purpose-driven data, creativity and feedback in pursuit of the advancement of excellence.

OUR MISSION

Langlade, Lincoln and Marathon Counties partnering together to provide compassionate and high quality care for individuals and families with mental health, recovery and skilled nursing needs.

OUR VISION

Lives Enriched and Fulfilled.

3

ACCOUNTABILITY

Committing to Positive Outcomes and Each Other's Success.



An Introduction to **ACCOUNTABILITY**

North Central Health Care is committed to maintaining the highest standards of integrity and ethical conduct in all aspects of our operations. Our Compliance Program serves as the foundation of this commitment, guiding our employees to understand and adhere to applicable laws, regulations, and internal policies.

OUR COMPLIANCE PROGRAM EMPHASIZES SEVERAL KEY POINTS:

1. **The Compliance Officer:** This individual leads our compliance efforts, ensuring that we meet all necessary requirements.
2. **The Compliance Committee:** This group supports the Compliance Officer, overseeing the effectiveness of our compliance program.
3. **Open Communication:** We encourage open dialogue with the Compliance Officer. Employees are encouraged to raise any compliance questions or concerns without fear of retaliation.
4. **Reporting Mechanisms:** We provide multiple avenues for reporting compliance issues, ensuring that all concerns are addressed promptly and fairly.
5. **Non-Retaliation Policy:** We have a strict policy against retaliation for reporting compliance concerns. We value and protect whistleblowers.
6. **Enforcement:** Our written policies and procedures, including this Code, are enforced equitably and impartially, ensuring consistent adherence to our standards across the organization.

By upholding these principles, we demonstrate our commitment to ethical behavior and regulatory compliance in all aspects of our operations.

ABOUT OUR CODE

North Central Health Care's Code of Conduct guides appropriate conduct and behaviors expected of all North Central Health Care Staff.

By following our Code and acting with integrity, you play an important role in supporting our Mission, Vision, and Core Values. It outlines our commitments and defines our responsibilities for all that we do. We need a Code of Conduct as it reinforces our Core Values which guide our strategies, policies, practices, and behaviors. It is part of our Compliance Program and it helps us make sure that we are complying with the laws and regulations that govern our organization.



WHO FOLLOWS THE CODE OF CONDUCT?

Whatever your role is at North Central Health Care, this Code applies to you. Our organization's Executive Committee is responsible for adopting and approving our Code. The Compliance Officer is accountable for promoting, monitoring, and enforcing it.





OUR RESPONSIBILITIES

Each of us plays an important role in upholding the Code of Conduct

We ALL Share the Responsibility to:

BE VIGILANT ABOUT SAFETY. Never take shortcuts that compromise your safety, that of your teammates, or of those we serve.

DO THE RIGHT THING ALWAYS. Demonstrate an unwavering commitment to doing the right thing in every action you take and in every decision you make, especially when no one's looking.

TREASURE, PROTECT, & PROMOTE OUR REPUTATION. Consider how your actions affect our collective reputation, and be a proud ambassador for North Central Health Care, our team and our services.

EMBRACE DIVERSITY & INCLUSION. We make better decisions when we consider multiple perspectives. North Central Health Care strives to welcome diversity and inclusion.

SPEAK UP! We are ALL required to report any suspected violations or misconduct concerns. If you see something, say something.

DELIVER PERSON-CENTERED CARE. Always put the needs of those we serve first. The best test for every action and every decision is to ask yourself, "Is this what's best for that individual?"

KEEP INFORMATION SECURE. Choose to honor the confidentiality and privacy of those we serve. Protect our patients, clients and residents by keeping their personal health information (PHI) secure.

LEAD BY EXAMPLE. Demonstrate Dignity, Integrity, Accountability, Partnership and Continuous Improvement daily. Always conduct ourselves ethically.



Additional Manager Responsibilities:

- **EDUCATE** staff on how to spot and report misconduct as well as the policies and procedures, rules and regulations that are relevant to your department or program.
- **PROTECT** staff members from retaliation for reporting misconduct.
- **CREATE** a work environment in which concerns can be raised and openly discussed without fear of retaliation.
- **MODEL** and reward integrity.
- **ENFORCE** standards consistently and hold employees accountable for behaviors.
- **LISTEN** and **RESPOND** to employee reports of misconduct.

VIOLATIONS OF THE CODE

The standards outlined in this code are mandatory and must be adhered to.

EXAMPLES OF VIOLATIONS INCLUDE:

1. Participating in or failing to report a violation of law, regulation, or NCHC policy, including this Code of Conduct.
2. Providing care that is unsafe, negligent, or abusive.
3. Falsifying records of any type.
4. Theft or misappropriation of NCHC assets, funds, equipment, supplies, property, or that of any NCHC client/patient/resident.
5. Retaliation towards individuals who report concerns in good faith.
6. Deliberately filing false reports.
7. Engaging in discriminatory, harassing, gossiping or bullying actions.
8. Committing or threatening workplace violence.
9. Intentional, reckless, or careless actions that result in patient/resident/client privacy breaches or the breach of other confidential NCHC information.

* NOT AN EXHAUSTIVE LIST

 **VIOLATIONS WILL BE SUBJECT TO CORRECTIVE ACTION UP TO AND INCLUDING TERMINATION.**

MAKING GOOD DECISIONS

Consider the following chart when confronted with an ethical dilemma or when you want to do the right thing.

1

IDENTIFY THE ETHICAL PROBLEM.

List possible solutions and any obstacles to resolving the problem.

Seek input from a member of management, clinical team, or other consultation.

2

DETERMINE SOLUTIONS & THE BEST APPROACH.

Is it consistent with our NCHC Mission, Vision & Core Values? Is it legal? Does it comply with our policy, regulations, laws?

Would your approach embarrass you or NCHC? How would it look if published in the media?

3

DECIDE WHAT YOU SHOULD DO.

After considering all potential solutions, make a decision. If your path still isn't clear, ask for additional guidance.

4

FOLLOW THROUGH ON YOUR DECISION.

SPEAKING UP: Seeking Guidance & Voicing Concerns

*It is **YOUR** responsibility to ask questions and raise concerns when compliance issues arise.*

Likewise, if you are aware of something that may be a violation of our Code, our policies, or the law, you must speak up and report it so it can be addressed. **We cannot address an issue unless it's brought to our attention. Commit to Speaking Up!**

WHAT HAPPENS WHEN I REPORT A CONCERN?


When a concern is reported a prompt investigation by the appropriate individuals will occur.

INVESTIGATORS WILL:

- Determine facts through interviews and review of documents
- Contact employees who may have knowledge or were involved in the incident
- Recommend corrective action and/or disciplinary measures where appropriate

If asked, you are **REQUIRED** to cooperate fully with any inquiry or investigation.

CONFIDENTIALITY: this is key to ensuring you feel safe to raise concerns or make a report. Therefore, all reports will only be shared with individuals involved in handling the report and follow-up. If someone shares confidential information about a past or ongoing investigation, please contact Compliance.



CHANNELS FOR GUIDANCE You have several channels to seek guidance, voice concerns or make a report within North Central Health Care. Please start with your manager, when possible, as they are most likely to understand your concern and help you. If you feel you cannot speak with your manager, or you have and do not feel it is being addressed appropriately, you may also contact:

COMPLIANCE OFFICER*

715-848-4507 or NCHCcompliance@norcen.org

HUMAN RESOURCES TEAM

SENIOR LEADERSHIP TEAM

SAFETYZONE: COMPLIANCE/HIPAA FORM*

*these are options should you want to report anonymously

WHO TO CALL



CONTACT HUMAN RESOURCES

IF THE SITUATION INVOLVES:

- Workplace Conduct Issues
- Inappropriate Behavior
- Harassment/ Mistreatment
- Discrimination
- Conflicts with Coworkers
- Disciplinary Issues

email: HResources@norcen.org | phone: 715.848.4419

CONTACT COMPLIANCE

IF THE SITUATION INVOLVES:

- Patient Rights Violations
- Privacy Issues/Breaches of Confidentiality
- Medicare/ Medicaid Fraud/Abuse
- Lost or Stolen Electronic Devices Containing PHI
- Fraudulent Billing or Coding
- Bribes or Kickbacks
- Noncompliance with Professional Standards
- Conflicts of Interest
- Ethical Violations

NCHC COMPLIANCE OFFICER

email: NHCcompliance@norcen.org | phone: 715.848.4507 | online: www.norcen.org/Compliance

These are not exhaustive lists.



REFRAINING FROM RETALIATION

Retaliation against any employee for filing a complaint in good faith, or for assisting, testifying, or participating in an investigation, is illegal and prohibited by NCHC. Retaliation constitutes employee misconduct.

WE FOSTER A CULTURE WHERE EVERYONE, IN GOOD FAITH, CAN:

- Communicate about ethics or compliance concerns.
- Report concerns or inappropriate behavior.
- Participate in an investigation.
- Refuse to engage in inappropriate activity.
- Exercise their rights protected by law without fear of retaliation.

BEHAVIORS THAT MAY BE CONSIDERED RETALIATORY INCLUDE:

- **Demotion, Suspension, or Termination:** Taking disciplinary actions against the employee who reported the issue.
- **Harassing the Reporting Employee:** Encouraging others to harass the employee who raised concerns.
- **Unjustifiably Failing to Hire, Promote, or Consider for Hire or Promotion:** Treating the employee unfairly in employment decisions.
- **Adversely Impacting Working Conditions or Denying Employment Benefits:** Withholding entitlements from the employee.
- **Attempting to Identify the Reporting Employee:** Trying to reveal the identity of the employee who reported a concern or participated in an investigation.
- **Filing False Reports Against Someone:** This includes exaggeration of the truth as well as falsifying information.

If you observe, experience, or suspect retaliation, contact Human Resources or the Compliance Officer immediately.



REPORTING IN GOOD FAITH MEANS

When you report an incident “in good faith”, it means that you genuinely believe a violation of the Code, the law, or our policies has occurred. The information you provide is honest and accurate and you are not acting maliciously.



**KNOW YOUR POLICIES:
Non-retaliation Policy**



PARTNERSHIP

Our Commitment to Each Other



INDIVIDUAL BEHAVIOR AND ETHICAL STANDARDS IN BUSINESS

North Central Health Care is committed to fostering an environment where all employees feel safe. We want to ensure an environment free of harassment, workplace violence, safety concerns, and hazardous conditions.

Every employee has the right to work in an environment free of harassment and disruptive behavior. NCHC has a zero tolerance policy for workplace violence or harassment.

HARASSMENT IS: any verbal, written, visual, or physical act that creates a hostile, intimidating or offensive work environment or interferes with an individuals ability to perform their job duties.

UNACCEPTABLE BEHAVIORS INCLUDE:

- Engaging in Gossip/Spreading Rumors
- Derogatory Comments or Jokes/Offensive Language
- Unprofessional or Discriminatory Behavior
- Sexual Harassment

We prohibit discrimination and harassment based on race, color, gender, national origin, age, relation, disability, sexual orientation, gender identity or expression, veteran status or any other characteristic protected by law.



WORKPLACE VIOLENCE INVOLVES

Threatening or intimidating behavior, whether physical or verbal. Causing injury to another, intentionally damaging someone else's property. Acts of vandalism, arson, or other criminal activities.
We will not tolerate violence of any kind.



KNOW YOUR POLICIES: Anti-Harassment Policy, Diversity & Inclusion Policy



A WORKPLACE THAT PRIORITIZES SAFETY & HEALTH

Our commitment is to follow state and federal laws to maintain a safe working and service environment, reporting unsafe acts or conditions without delay.

NCHC staff are expected to cooperate and follow all safety rules and practices, take necessary steps to protect themselves and others, attend required safety training and report all accidents, injuries and unsafe practices or conditions immediately.

BE FAMILIAR WITH AND FOLLOW ANY WORK SAFETY INFORMATION & TRAINING PROVIDED TO YOU & ALWAYS SPEAK UP WHEN:

- A job you think you are not properly trained to perform and that may harm you or others is assigned to you
- Equipment is not operating properly and may be unsafe
- An unsafe condition or a potential danger to yourself, others or the environment comes to your attention



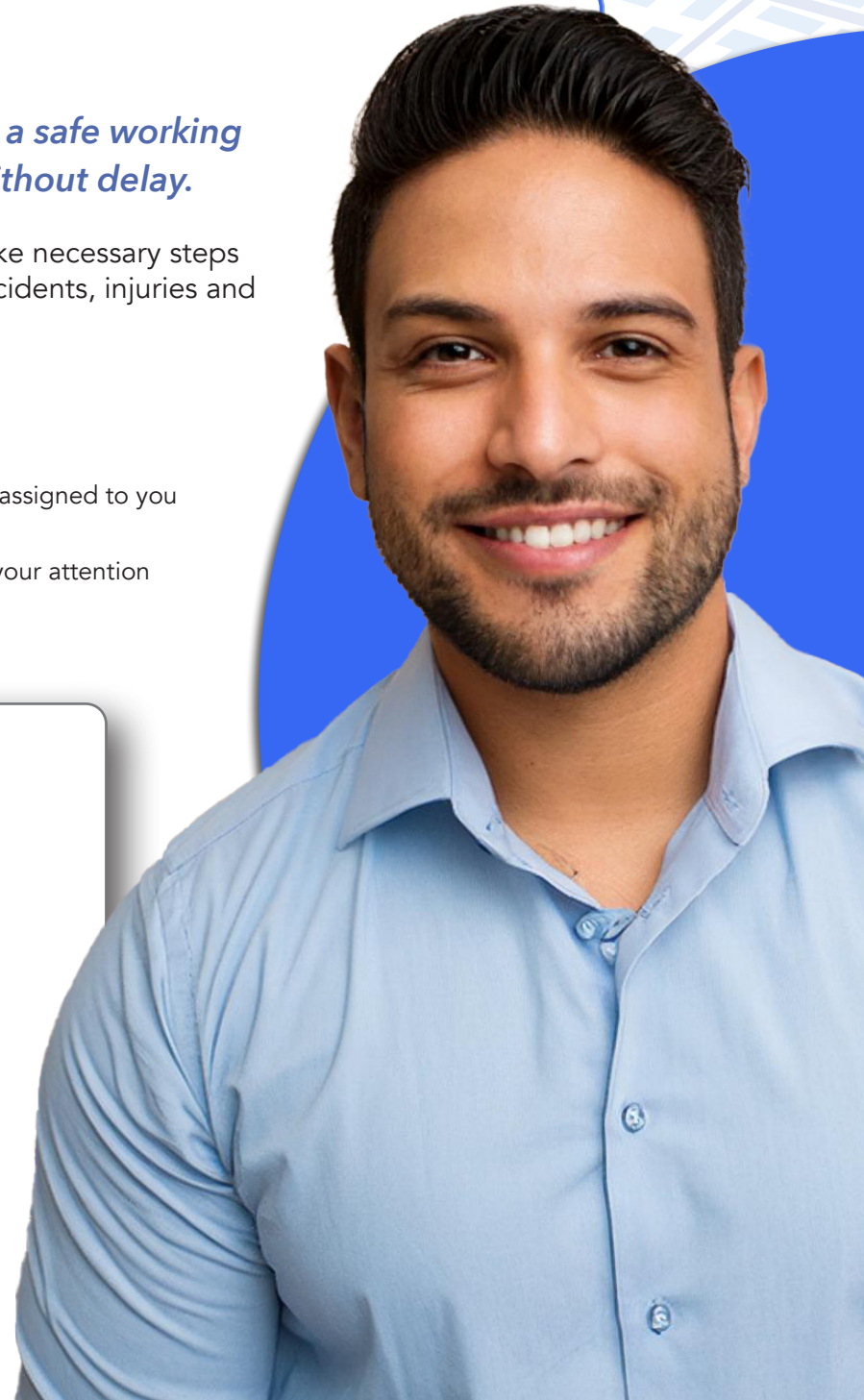
KNOW YOUR POLICIES: General Work Expectations, Tobacco Use Policy, Drug & Alcohol Testing Policy

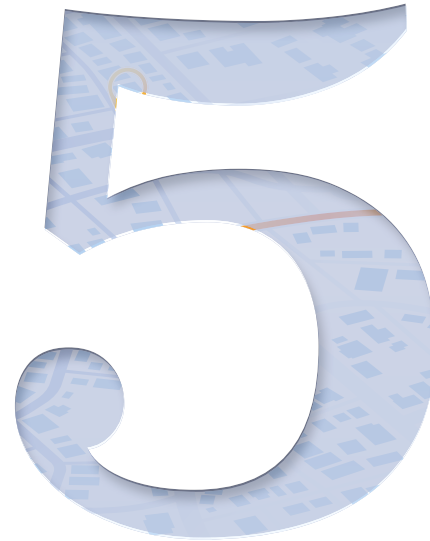
We want everyone within our facilities to be safe and healthy. It's essential that our employees conduct themselves free from substances that might affect skills and judgment, endangering the safety of others.

WE ASK EMPLOYEES COMMIT TO THE FOLLOWING:

- Do not use alcohol or illegal drugs while working or on call. Do not bring illegal drugs, weapons, or other contraband to work.
- We are a smoke free organization. Do not use tobacco products in the workplace.
- Do not perform any job duties while under the influence of alcohol, illegal drugs, or while misusing prescription drugs.

Anyone who appears to be under the influence of alcohol or drugs while working on behalf of the organization, misuses a prescription drug, or is involved in a drug diversion must be immediately reported to your Manager and HR and may be subject to disciplinary action up to and including termination.





INTEGRITY

We do the Right Things for the Right Reasons



CONFLICTS OF INTEREST

We do what's in the best interest of North Central Health Care. Each of us is expected to avoid situations that can lead to even the appearance of a conflict of interest.

A CONFLICT OF INTEREST IS: A situation that can occur when you have a competing interest that may interfere with your ability to make objective decisions for NCHC.

HERE ARE SOME EXAMPLES:

- Reporting relationship between family members
- Using NCHC property, information, or resources, for non-NCHC purposes
- Holding outside jobs/positions that distract from work at NCHC or could potentially share clients or referrals
- Making business decisions that could benefit ourselves, family, or friends
- Issuing testimonials, endorsing, or promoting a vendor, payor, provider, product, or service

BE PROACTIVE: If you believe that an actual or perceived conflict exists, disclose it to your manager. Conflicts of interest can be addressed or avoided as a result.

IF YOU'RE NOT SURE ASK YOURSELF:

- Am I using NCHC resources, relationships, or my position for personal gain?
- Does the activity compete with NCHC interests?
- Could it appear to be a conflict of interest to someone else?
- Does it interfere with the work I do for NCHC?

If you've answered yes, STOP and disclose to your manager who will connect with Compliance. If you're still unsure, seek help.

GIFTS & ENTERTAINMENT

Gifts and entertainment can pose as conflicts of interest when they make it hard to be objective about the company or person that provides them. Seek guidance on gifts in our policy or from Compliance.

Examples include anything of value like: free or discounted tickets to sporting or entertainment events, free products, meals, trips, transportation, gift cards, etc.,

Providers practicing in psychiatry, therapy and social work etc. should also refer to their own discipline's professional code of ethics to make informed decisions based on the benefits and risks of accepting or giving gifts.



KNOW YOUR POLICIES: Conflict of Interest, Gifts

COMPLIANCE WITH LAWS & REGULATIONS

Health Care Law Overview

ZERO TOLERANCE: *We don't accept false claims or payments for referrals. We follow payment rules for all transactions, including Federal Health Care Programs. We monitor relationships with healthcare providers to follow laws and regulations.*

We are committed to satisfying the payment conditions required by payors with which North Central Health Care transacts business, including Federal Health Care Programs. Further, we are committed to monitor and structure North Central Health Care's relationships with physicians and other healthcare providers to be consistent with relevant federal and state laws and regulations.

DEFINITIONS TO KNOW:

FRAUD: Intentionally deceiving to get money or property from Medicaid/Medicare or grants. Includes knowingly submitting false reports or claims to federal or state agencies.

ABUSE: Actions that may cost federally funded programs unnecessarily. This includes paying for items or services when not legally entitled to.

WASTE: Overuse of services or careless spending on healthcare, leading to unnecessary costs for Medicaid or Medicare.

CODING & BILLING: We bill only for services provided, medically necessary, and properly documented. We use accurate billing codes and don't inflate charges for more money.

HEALTH CARE LAWS OVERVIEW:

FALSE CLAIMS ACT: This law says it's illegal to knowingly submit a fake claim to the government to get paid, even if there's no proof of intending to cheat.

CIVIL MONETARY PENALTIES LAW: This law stops certain actions like:

- Getting services or items from someone excluded from healthcare
- Not letting the Office of Inspector General (OIG) see records when needed
- Knowing about overpayments but not reporting or returning them
- Giving money to influence referrals

ANTI-KICKBACK: The Anti-Kickback Statute keeps federal and state healthcare programs honest. It says no one can offer or accept anything in exchange for healthcare business or referrals.

STARK LAWS (PHYSICIAN SELF-REFERRAL): These laws stop doctors from referring patients to businesses they're financially connected to, like ones they own. This helps protect Federal Health Care Programs (like Medicaid and Medicare) and the people who use them.



HEALTH CARE FRAUD EXAMPLES

1. Submitting fake claims for services not given.
2. Exaggerating costs in reports.
3. Stealing prescription drugs.
4. Paying or getting bribes for patient referrals.
5. Giving unnecessary care.
6. Keeping government overpayments.
7. Missing or incomplete documentation.
8. Using the wrong billing codes.
9. Charging separately for services that should be together.
10. Using the wrong location for services.
11. Reporting wrong diagnoses/procedures for more money.
12. Not charging patients their share of costs.

ENSURING FINANCIAL INTEGRITY

Reporting, records, & documentation must be accurate.

Establishing trust with consumers, employees, vendors, shareholders, regulators, and communities is facilitated by maintaining accurate financial records, which enable us to assess our performance with reliability and to practice strong financial stewardship.

THEREFORE: All documents pertaining to revenue, including invoices, purchase orders, payroll, tax records, benefit claims, and regulatory information, must be timely, accurate, and complete.

NEVER: falsify a record or ignore something that is unlawful or unethical. Nobody has the right to force you to act in a way that is against our code.

COOPERATION WITH GOVERNMENT INQUIRIES

We must treat all government auditors, regulators, and investigators with respect. Any requests for information from the government must be brought to the attention of Compliance and Legal as soon as possible. Such requests may include subpoenas, civil investigative demands/suits, audit requests, search warrants or informal requests. Compliance & Legal will review and give you the appropriate guidance in how to respond.

EXAMPLES OF PROHIBITED ACTIONS:

- Deceptively representing the true nature of a transaction
- Concealing or failing to report financial activity
- Circumventing, by-passing, or falsifying financial controls
- Backdating docs; purposefully recording transactions in the incorrect accounting period, under the incorrect account, or under the wrong department
- Billing/manipulating info to get paid for goods or services we haven't delivered



WAGE & HOUR STANDARDS

In accordance with all relevant state and federal laws, NCHC is dedicated to providing its employees with the full compensation to which they are entitled. NCHC has policies regarding pay practices and timekeeping. It is the duty of each NCHC worker to comprehend these guidelines, abide by them, and report any infractions. Additionally, hourly NCHC employees are prohibited from working off the clock.

HOURLY EMPLOYEES SHOULD NOT WORK OFF THE CLOCK FOR SEVERAL IMPORTANT REASONS INCLUDING:

Legal Compliance: Working off the clock can lead to violations of labor laws, such as the Fair Labor Standards Act (FLSA) in the U.S., which mandates payment for all hours worked. Failure to comply with these laws can result in legal consequences for both the employee and the employer.

Fair Compensation: Employees deserve to be compensated for all the time they dedicate to their job. Working off the clock means they are not being paid for their labor, which is unfair and undermines their value. NCHC does not support hourly staff working off the clock in any circumstance.

Work-Life Balance: Encouraging or allowing off-the-clock work can blur the lines between personal and professional life, leading to burnout and decreased overall well-being. It is essential for employees to have clear boundaries to maintain a healthy work-life balance.

Professional Boundaries: Employees who have communication with clients/patients when not clocked in run the risk of violating professional and work boundaries.

Accurate Records: Proper timekeeping ensures accurate payroll records. Off-the-clock work can lead to discrepancies and errors in tracking work hours, which can complicate payroll and other administrative processes.

Employee Morale: When employees feel pressured to work off the clock, it can lead to resentment and low morale. Fair treatment and respect for their time contribute to a positive workplace environment and higher job satisfaction.

By ensuring that all work is performed on the clock, employers uphold legal standards, promote fairness, support employee well-being, and maintain accurate administrative records.

EXAMPLES OF WORKING OFF THE CLOCK INCLUDE BUT ARE NOT LIMITED TO:

Answering Emails or Calls/Texts: Work-related emails or phone calls/texts before clocking in, during breaks, or after clocking out.

Finishing Up Tasks: Staying late to complete a project or task without recording the extra time.

Working Through Breaks: Skipping or cutting short mandated breaks (such as lunch or rest periods) to continue working without logging this time.

Attending Meetings: Participating in meetings or conference calls outside of scheduled work hours without recording the time.

Preparation & Cleanup: Setting up workstations or cleaning up after shifts without clocking in or out for these activities.

Training or Onboarding: Attending training sessions, completing required courses, or onboarding activities without being compensated for the time spent.

Running Work Errands: Performing work-related errands, like picking up supplies or making deliveries, outside of regular working hours without reporting this time.

Remote Work: Completing tasks or working from home without logging the hours spent on these activities. This includes any activity or sign into Cerner.

These examples illustrate how employees might perform work-related duties without proper compensation, leading to potential legal and ethical issues for both the employee and employer. Employees who engage in working off the clock will be subject to disciplinary action up to and including termination.



KNOW YOUR POLICIES: Compensation & Timekeeping

TO PUT IT SIMPLY, CLOCK IN WHILE WORKING.



DIGNITY

We Honor Everyone's Dignity by Protecting Them



KEEPING INFORMATION PRIVATE

We protect the privacy of those that seek help from us and treat their information with care.

We are required by our own policies, as well as by state and federal laws and regulations, to protect the confidentiality, integrity, and availability of Protected Health Information (PHI) and all other confidential information.

DO WHAT'S RIGHT:

- Protect any PHI entrusted to you by keeping it safe and secure
- Collect, access, and use PHI for only authorized, work related reasons
- Only use the minimum amount of information needed
- Never share PHI with anyone who does not have a need to know
- Dispose PHI appropriately; into confidential shred bins
- Sharing or exchanging of PHI must be accompanied by a written consent signed by the individual/decision maker
- It's ok to access a patient/client/resident's record when you are:
 - Providing care to them
 - Providing ancillary services to them (billing, coding, scheduling, registration)
- Never access the record for curiosity sake or to check on a family member, friend or co-worker (past or current)
- It is appropriate to disclose a patient's record to:
 - A team member providing care to the patient
 - The insurance company of the patient in order to receive payment
- Immediately report any breaches of HIPAA Privacy in Safetyzone

HIPAA IDENTIFIERS MAY INCLUDE THE FOLLOWING:

- | | |
|--|---|
| Patient Names | Account Numbers |
| Geographical Elements
(Street Address, City, County or Zip) | Certificate/License Numbers |
| Identifiable Personal Dates
(Date of Admit/Discharge, Birth, Death, or Age) | Vehicle Identifiers |
| Telephone or Fax Numbers | Device Attributes/Serial Numbers |
| Email Address | Digital Identifiers (Web URL's/IP Addresses) |
| Social Security Numbers | Biometric Elements
(Finger, Retinal or Voice Prints) |
| Medical Record Numbers | Identifying Photos/Videos |
| Health Insurance Numbers | Identifying Numbers/Codes |

WHAT IS PROTECTED HEALTH INFORMATION?

PHI is any piece of information about an individual that was created, used, or disclosed during the course of diagnosis or treatment at NCHC that can be used to personally identify them. This includes past, present, or future physical or mental health conditions, the provision of care, or payment for that care to an individual.



ADDITIONAL PRIVACY REMINDERS:

NCHC'S Privacy Program is designed to protect all those we serve and their protected health information (PHI) which includes verbal, written, and electronic information that can identify someone as a recipient of our services. Further, our patients, clients, and residents have a right to have their information kept private.

CAN I VIEW MY OWN MEDICAL RECORDS?

It is not a HIPAA violation to view your own records, however it is NCHC policy that **you must formally request this through HIM**. Please follow the proper procedure to receive your records to avoid disciplinary action leading up to and including termination of employment for improper access.

WHAT IF I'M INVOLVED IN AN ACQUAINTANCE'S TREATMENT, BILLING, OR OTHER ACTIVITY?

If your job requires you to access the person's medical information, then you should **immediately report this to your supervisor**, who will determine whether to assign the task to someone else. Clarify with your supervisor the preferred handling of these situations in the future.

WHAT IF MY CHILD/PARENT IS A PATIENT HERE?

To get copies of your child or parent's medical records, you must **request the records by making a request through Health Information**. You may not access the records directly through the electronic medical record.

WHAT IF I AM DIRECTLY INVOLVED IN THE TREATMENT OR CARE OF AN ACQUAINTANCE?

If you are the patient's treating provider, case manager, crisis professional, nurse, etc.:

- You may only access protected health information (PHI) related to your involvement in the patient's care.
- You may share PHI only with the treatment team as needed for treatment, payment, or operations.
- You may not share info with anyone who does not have a work-related reason to know or without the proper consent of the patient. Working at NCHC does not automatically equal having a right to PHI. You must have a work-related reason or be involved in the person's treatment, payment, or operational functions (i.e., quality audits, DHS surveys).

IF YOU RECOGNIZE ANY PRIVACY BREACHES OR VIOLATIONS, PLEASE FILL OUT AN OCCURRENCE REPORT SO IT CAN BE PROPERLY INVESTIGATED.

TO HELP MAINTAIN PATIENT, CLIENT, RESIDENT PRIVACY AND CONFIDENTIALITY:

- Access patient medical records only when it is required for your job. Just because you have access to medical records and protected health information does not mean you can look at anything or anyone.
- If authorized: access, use and disclose only the minimum protected health information needed to get the job done.
- Do not access medical records of co-workers, friends, family members or others listed unless for a work-related reason or with approval.
- Log off and lock your computer whenever you leave your workspace. Employees who leave their workstations without logging off are responsible if someone else uses their login and password to access medical records.

CONSEQUENCES OF UNAUTHORIZED ACCESS

Consequences could mean termination of your employment and applies to intentionally and inappropriately accessing records, whether for purposes of curiosity, malicious intent, or personal gain of:

- Your spouse/partner
- Your siblings
- Your children/grandchildren
- Co-workers
- Friends/neighbors
- Public figures or those of media interest
- Any patient without a legitimate, authorized, work-related reason



CYBER SECURITY

Storing and transmitting electronic records makes our systems and accessing information more efficient, simpler, and less costly but it also comes with added responsibility to maintain patient privacy by protecting it from hacks, breaches, and other cyber threats.



CYBERSECURITY: DO'S & DON'T'S

DON'T PUT PROTECTED INFO ON PERSONAL COMPUTERS OR DEVICES.

Use only company-approved and encrypted devices when you work with protected information. Never download or copy protected information to your personal computer or to any device that unauthorized people have access to. Never download or back up information about patients/clients/residents, or employees to the cloud without approval.

LOCK YOUR MONITOR WHEN YOU STEP AWAY.

Lock your computer screen by pressing CTRL+ALT+DELETE>LOCK. When working in a patient record, lock your screen even if you are just stepping away for a moment.

STAYING SAFE ON SOCIAL MEDIA.

Don't use social media (TikTok, Snapchat, Facebook, Twitter, Instagram, etc.) to communicate PHI. This includes pictures and video. Please see our Social Media policy for more details on appropriate use of social media while working.

USE STRONG PASSWORDS AND NEVER SHARE THEM.

Make your passwords hard for others to guess, but easy for you to remember so you don't have to write them down.

REPORT MISSING DEVICES IMMEDIATELY.

Report lost or stolen devices to your manager immediately. Don't delay even if you think it will still be found.

SECURE MOBILE DEVICES.

Never leave mobile devices (even encrypted) unlocked or unattended.

SECURE EMAILS WITH PROTECTED INFORMATION.

Never send patient/client/resident, or employee info outside the organization unless you use encrypted email or another NCHC approved security tool (Outlook's Secure Mail, TLS, or e-Transfer). Never send protected information to yours or anyone's personal email, even if you think you are sending securely. Any exceptions must be approved by the HIPAA Privacy Officer.

PROTECT AGAINST VIRUSES.

Don't open emails with attachments or links from unknown and unexpected senders. "Spam" and "phishing" emails and infected files can release a virus into our network or trick you into giving protected info.

ASK IF YOU AREN'T SURE HOW TO KEEP INFO OR DEVICES SECURE.

Talk to your manager, call CCITC, IMS, or get in touch with Compliance. They will get you additional guidance or training.

PROTECTING THOSE WE SERVE

from Caregiver Misconduct

We have zero tolerance for caregiver misconduct as safeguarding those we serve is our top priority.



ABUSE:

- **PHYSICAL** – hitting, slapping, pinching, kicking, or intentionally causing harm
- **VERBAL** – threats of harm, saying things intentionally to frighten the client
- **SEXUAL** – harassment, inappropriate touch, assault
- **MENTAL** – humiliation, harassment, intimidation, threats of punishment, depriving care or possessions



NEGLECT:

Intentionally withholding care; failure to carry out a plan that could reasonably be expected to cause pain, injury or death of a client



MISAPPROPRIATION OF PROPERTY:

Theft of money, identity, credit cards, jewelry, property misuse, such as using a client's phone without consent



EXPLOITATION:

Taking advantage of a resident for personal gain through the use of manipulation, intimidation, threats, or coercion



RESIDENT TO RESIDENT ALTERCATION:

Incidents that occur between residents in the nursing home must also be reported



INJURY OF UNKNOWN ORIGIN:

An injury should be classified as an injury of unknown origin when both of the following conditions are met:

1. The source of the injury was not observed by any person or the source of the injury could not be explained by the resident
2. The injury is suspicious because of the extent or the location (e.g., the injury is located in an area not generally vulnerable to trauma) or the number of injuries observed at one particular point in time or the incidence of injuries over time

IF YOU WITNESS ABUSE

If you witness any of these abuses to a client, resident or patient, it is your responsibility to make sure the following protocol is carried out:

● WITNESS RESPONSIBILITY

- Immediately protect the person
- Notify your manager
- Fill out an occurrence report in SafetyZone

● MANAGER RESPONSIBILITY

- Immediately protect the person
- Investigate all allegations of misconduct
- Document the results of your investigation
- Report allegations/incidents to the Division of Quality Assurance (DQA) as appropriate

● MANAGER/WITNESS RESPONSIBILITY

- For any situation that could include a potential criminal offense, contact law enforcement
- Adult Protective Services (715.841.5160) aids elder adults/adults-at-risk who have been/are currently being abused, neglected or exploited

YOU MAY ALSO LEARN OF AN INCIDENT BY:

- Receiving a verbal/written statement from an individual
- Receiving a verbal or written statement from someone in a position to have knowledge of the incident
- Discovering an incident after it occurred
- Hearing about an incident from others
- Observing physical/emotional/mental injury to an individual
- Observing misappropriation of an individual's property
- Otherwise becoming aware of an incident



CONTINUOUS IMPROVEMENT




ATTESTATION

All employees will complete an acknowledgment form that states they have read and understand our Code of Conduct and agree to abide by its guidelines.

THE ACKNOWLEDGMENT FORM STATES THAT THE EMPLOYEE WILL:

1. I confirm that I have received a copy of the Code of Conduct or know where to find it.
2. I understand that it is my responsibility to read the Code of Conduct and I agree to do so.
3. I also understand that anything that was unclear to me in the Code of Conduct can be clarified by my supervisor or the Compliance Officer.
4. I do not currently know of any violations of the Code of Conduct.
5. I understand that I have a personal duty to bring all (real or suspected) violations of the Code of Conduct to the attention of my supervisor and/ or Compliance Officer. I will utilize the resources listed in the Code to speak up. Retaliation should be reported immediately.
6. I understand that it is against NCHC policy to be retaliated against for upholding the Code of Conduct and for obeying the laws and regulations that apply to my job.

I agree that I have read and understand and will comply with the terms of this Code of Conduct and all applicable policies and procedures. I understand that my failure to comply with the Code of Conduct may result in disciplinary action, up to and including termination of employment.

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
Last Revised: 5/17/2023 <u>6/5/24</u>	Policy Contact: Director of Human Resources

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:

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.

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 workday, 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 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 (4) hours ~~may take reasonable time to rest~~ may take a 15 minute break, 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 thirty (30) minutes. Breaks, including lunch periods, exceeding thirty (30) minutes are unpaid unless specifically authorized by management.

For Non-Exempt employees, Lunch breaks, which are unpaid, are thirty (30) minutes ~~after if an employee is scheduled to work at least six (6) hours worked~~ and an additional thirty (30) minutes ~~after if an employee is scheduled to work at least 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. When an employee is punched out for their lunch break, they cannot eat at their work station.

Base Pay

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. Any changes to Highly Compensated Positions (pay grade 92 and above) or employment offers, must be approved by the Executive Director and confirmed with the Executive Committee Chair prior to making any offers. All positions pay grade 91 and below with an offer at 100% or midpoint and above must be approved by the Executive Director.

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 certain critical positions as step-scale positions. These positions have an identified scale with step increases based on months/years of relevant experience in the role or licensing. Review for step-scale increases will occur at least semi-annually. Months/years of relevant experience will be based on the last day of the pay period in which the step increases go into effect. For example, if the review occurred in January and an employee was at 1 year and 2 months experience (next step noted as 1.5 years) as of the last

date of the effective 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.

Staffing Crisis Situations

The Executive Director has the authority to approve additional compensation during critical staffing situations due to staff shortages (as determined by the Senior Leadership team). The Managing Director of Finance/Administration will be consulted to ensure budget funds are available for the additional compensation prior to approval being given. For example, double pick-up pay could be authorized.

Shift Differential

Employees whose main position is working in programs with established shifts (~~i.e., including but not limited to~~ 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.

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 and 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. Hourly employees required to be in official on-call status will be paid \$2.50 per hour served on-call. Eligible salaried employees (as approved by ~~their~~ Senior Leadership ~~in critical staffing situations~~), will be paid a lump sum of ~~\$100-40~~ per ~~week~~ week day and \$60 a day per weekend and holiday when 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.

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.

Pick Up Pay amounts which are outlined below can only be received by eligible programs and employees no earlier than once their program’s schedule is posted.

Amounts of Pick Up Pay:

Hours Picked Up:	Pick Up Pay Received for Hourly or Non-Exempt 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

Mount View Critical Staffing Pick Up Pay:

If a vacancy rate is above 15% in the nursing home (calculated by taking open FTEs and dividing it by the budgeted FTEs), then Mount View is authorized to pay the following:

<u>Hours Picked Up:</u>	<u>Pick Up Pay Received for Hourly or Non-Exempt Employees:</u>
<u>3 to 6.75 Hours</u>	<u>2 Hour at Employee’s Base Rate of Pay</u>
<u>7 to 11.75 Hours</u>	<u>3 Hours at Employee’s Base Rate of Pay</u>
<u>12 to 16 Hours</u>	<u>4 Hours at Employee’s Base Rate of Pay</u>

Ineligibility for Pick Up Pay:

- 1.) Programs without established shifts including but not limited to Human Resources, Learning & Development, Accounting, HIM, IMS, Patient Financial Services, Patient Access, Outpatient, Community Treatment, Transportation and Aquatics. In cases of emergency, Senior Leadership may make exceptions to eligibility.
- 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 **PLTPTO** is counted towards FTE status for the pay period in which the **PLTPTO** is taken.
- 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/Swapped hours or shifts are not eligible for Pick Up Pay

- 8.) Make-up hours or shifts are not eligible for Pick Up Pay
- 9.) Employees on approved PLTPTO that pick up their own scheduled shift are not eligible for Pick Up Pay
- 10.) An employee who calls in and misses a schedule shift (on the same day as a picked-up shift and day immediately following) will forfeit any pick-up pay.

Management Pick Up Pay for Mount View

As a temporary solution, management RN staff at Mount View can pick up shifts on weekends and holidays in cases of critical staffing shortages (as approved by the Executive Director). The manager cannot be on call. Since these shifts are not related to the job that is normally completed by the management staff, they will be paid their daily rate for an 8 hour shift and half the daily rate for a 4 hour shift.

Temporary Appointment Pay

Employees temporarily appointed by the Executive Director (in writing) to positions of a higher classification or given additional management responsibilities during a vacancy may be eligible for a pay increase (stipend) during the temporary appointment period. Temporary appointment pay shall not exceed midpoint of the new position's pay grade unless otherwise approved by Senior Leadership.

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 Pay

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.~~

A non-exempt 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.

Funeral Pay

Policy Title: Employee Compensation and Timekeeping Policy

Author(s): Senior Leadership

Owner: Human Resources

Next Review Date: 12/1/2023

Approver: Executive Committee

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 twenty-four (24) hours of paid time. Exceptions for additional days in extraordinary situations may be approved at the sole discretion of the 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 PLTPTO 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 five (5) working days of completing jury duty. When released from jury or witness duties employees shall immediately return to their job and complete the scheduled workday. 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