



Rock County Human Services Department
P. O. Box 1649, 3530 N. County Trunk F
Janesville, Wisconsin 53547-1649
Phone: 608/757-5271
Fax: 608/757-5374

ROCK COUNTY HUMAN SERVICES BOARD
Wednesday, August 27, 2014 – 4:30 p.m.

Rock County Health Care Center – 3rd Floor Conference Room, Janesville

AGENDA

1. Call Meeting to Order
2. Approval of Agenda
3. Approval of Minutes of Human Services Board Meeting of August 13, 2014 *
4. Citizen Participation
5. Approval of Contracts, Transfers, and/or Encumbrances * – Ms. Mooren
6. Approval of Bills * – Mr. Zuehlke
7. Update on Avatar – Mr. Singer
8. Discussion on MA Dental Issues *
10. Director's Report *
 - Alternate Date for December 24th HSD Board Meeting
11. Committee Requests for Future Agenda Items
12. Next Meeting: Wednesday, September 10, 2014 at 4:30 p.m. at the Rock County Health Care Center, 3rd Floor Conference Room, in Janesville, Wisconsin.
13. Adjourn

NOTE TO COMMITTEE MEMBERS: To ensure a quorum, please call the Administrative Secretary at 757-5271 if you are unable to attend the meeting.

* Attachment ** These items may be handed out at the meeting if not available for the mailing.

120

8/13/14

Rock County Human Services Contract Review Cover Sheet

Date: 08/11/14

Contract with: Children's Service Society of Wisconsin

Contract Start Date: 01/01/2014 Expiration Date: 12/31/2014

Executive Summary: This contract with Children's Service Society is for services provided by the Exchange Family Resource Center. Services include: partnering with parents and community resources to strengthen families in Rock County in order to prevent and reduce the incidence of child abuse and neglect. This contract is funded 100% with state Brighter Futures Program Dollars and is part of the County's state-approved Brighter Future's Plan. This amendment is to add in Safe and Stable Family funds for family support. This is also funded 100% with state Safe and Stable Family Dollars.

Contract Amount: BFI \$99,243 (No change from 2013)
PSSF \$3,234 (New)

<u>Service</u>	<u>Rate</u>	<u>Unit</u>	<u>Change From Prior Year</u>
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Contract # HSD_2014_0036_A1 (CPS/BFI) New Contract: No Amendment/Addendum: Yes

E-Contract Location: Year: 2014 Program: CPS Folder Name: BFI
(If different from above)

Expenditure/ Revenue Account Numbers:

36-3641-0000-64604 Brighter Futures
36-3641-5013-64604 Family Support

Contact Person: Sara Mooren Phone: x 8431

Were Bids or Quotations Solicited? No RFP # _____

Covered by State Contract? No State Contract # _____

Was a Resolution Required No Resolution # _____

Contract will be signed by: Human Services Board Chair

If "Other" ~ Who? _____

Rock County Human Services Contract Review Cover Sheet

Date: 8/11/14

Contract with: Community Action, Inc.

Contract Start Date: 01/01/2014 Expiration Date: 12/31/2014

Executive Summary: This contract with Community Action is for administration of the Hub Club/Teen Parent Connections program. Services include: transitional, subsidized housing for homeless participants, case management, goal setting and service plans, home and center visits, group support and skill-building opportunities designed to increase adolescent's family self-sufficiency by encouraging high school/equivalent graduation, vocational preparedness, improved social interpersonal skills, and responsible decision-making. This contract is funded 100% with state Brighter Futures funds and is part of the County's state-approved Brighter Future's Plan. This amendment is to add in Safe and Stable Family funds for family support.

Contract Amount: BFI \$81,113 (No change from 2013)
PSSF \$2,234 (New)

<u>Service</u>	<u>Rate</u>	<u>Unit</u>	<u>Change From Prior Year</u>
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Contract # HSD_2014_0037_A1 (CPS/BFI) New Contract: Amendment/Addendum: Yes

E-Contract Location: Year: 2014 Program: CPS Folder Name:
(If different from above)

Expenditure/ Revenue Account Numbers:
36-3641-0000-64604 Brighter Futures
36-3641-5013-64604 Family Support

Contact Person: Sara Mooren Phone: x8431

Were Bids or Quotations Solicited? No RFP #

Covered by State Contract? No State Contract #

Was a Resolution Required No Resolution #

Contract will be signed by: County Board Chair *Human Services Board Chair*
If "Other" ~ Who?

0AD40701

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt	
36-3700-0000-62119	OTHER SERVICES					
46 36-3700-1326		P1402721	07/31/2014	TELLURIAN UCAN INC	19,880.00	
36-3700-1331		P1402717	07/31/2014	JANESVILLE PSYCHIATRIC CLINIC	980.00	
36-3700-1331		P1402718	07/31/2014	LUTHERAN SOCIAL SERVICES	1,541.00	
36-3700-1331		P1402719	07/31/2014	CROSSROADS COUNSELING CENTER	637.50	
36-3700-1331		P1402822	07/31/2014	BELOIT MEMORIAL HOSPITAL	650.00	
	Budget		YTD Exp	YTD Enc	Pending	Closing Balance
AODA BLOCK GRANT	280,508.00		91,295.67	22,708.46	23,888.50	142,815.37
36-3704-0000-62119	OTHER SERVICES					
48 36-3704-1326			07/31/2014	TELLURIAN UCAN INC	2,800.00	
36-3704-1331		P1402717	07/31/2014	JANESVILLE PSYCHIATRIC CLINIC	2,445.00	
36-3704-1331		P1402718	07/31/2014	LUTHERAN SOCIAL SERVICES	2,176.50	
36-3704-1331		P1402719	07/31/2014	CROSSROADS COUNSELING CENTER	890.00	
36-3704-1331		P1402720	07/31/2014	BELOIT AREA	550.00	
36-3704-1331		P1402822	07/31/2014	BELOIT MEMORIAL HOSPITAL	935.00	
	Budget		YTD Exp	YTD Enc	Pending	Closing Balance
IDP	161,655.00		29,911.00	4,551.46	9,796.50	117,396.04

I have examined the preceding bills and encumbrances in the total amount of **\$33,485.00**

Claims covering the items are proper and have been previously funded. These items are to be treated as follows:

- A. Bills and encumbrances over \$10,000 referred to the Finance Committee and County Board.
- B. Bills under \$10,000 to be paid.
- C. Encumbrances under \$10,000 to be paid upon acceptance by the Department Head.

Date: _____ Dept Head _____
 _____ Committee Chair _____

05540812

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
36-3603-0000-64908 3 36-3603-3015	CONTRIBUTIONS		08/20/2014	ROCK COUNTY HUMAN SERVICES DEP	349.00
SPECIAL HSD	Budget 8,000.00	YTD Exp 3,449.51	YTD Enc 0.00	Pending 349.00	Closing Balance 4,201.49
36-3634-0000-64604 11 36-3634-1814	PROGRAM EXPENSE		08/20/2014	ROCK COUNTY HUMAN SERVICES DEP	150.00
CPS	Budget 105,922.00	YTD Exp 49,725.93	YTD Enc 16,979.66	Pending 150.00	Closing Balance 39,066.41
36-3655-0000-64604 17 36-3655-0000	PROGRAM EXPENSE		08/20/2014	ROCK COUNTY HUMAN SERVICES DEP	102.00
KINSHIP CARE	Budget 2,000.00	YTD Exp 1,133.00	YTD Enc 210.00	Pending 102.00	Closing Balance 555.00
36-3689-0000-64604 40 36-3689-0001	PROGRAM EXPENSE		08/20/2014	ROCK COUNTY HUMAN SERVICES DEP	750.00
CRISIS	Budget 306,325.00	YTD Exp 178,415.56	YTD Enc 3,820.73	Pending 750.00	Closing Balance 123,338.71
36-3706-0000-64604 50 36-3706-0000 36-3706-1206	PROGRAM EXPENSE		08/20/2014 08/20/2014	ROCK COUNTY HUMAN SERVICES DEP ROCK COUNTY HUMAN SERVICES DEP	331.00 645.00
CSP	Budget 635,920.00	YTD Exp 388,782.09	YTD Enc 184.13	Pending 976.00	Closing Balance 245,977.78

I have examined the preceding bills and encumbrances in the total amount of **\$2,327.00**
 Claims covering the items are proper and have been previously funded. These items are to be treated as follows:
 A. Bills and encumbrances over \$10,000 referred to the Finance Committee and County Board.
 B. Bills under \$10,000 to be paid.
 C. Encumbrances under \$10,000 to be paid upon acceptance by the Department Head.

Date: _____ Dept Head _____

Committee Chair _____

OSS40811

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
36-3602-0000-61915	CERT/LIC/OTHER				
36-3602-0000		P1402874	07/22/2014	TRICOR INC	30.00
36-3602-0000		P1402875	08/15/2014	WISCONSIN DEPARTMENT OF FINANC	20.00
OVERHEAD	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	144.00	2,908.00	0.00	50.00	(2,814.00)
36-3602-0000-62119	OTHER SERVICES				
36-3602-0000		P1400648	07/30/2014	OFFICE PRO	134.68
OVERHEAD	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	31,249.00	15,850.53	1,194.33	134.68	14,069.46
36-3602-0000-63100	OFC SUPP & EXP				
36-3602-0000			08/04/2014	STEVENS,LINDSAY	10.43
36-3602-0000		P1400629	08/01/2014	E AND D WATER WORKS INC	17.00
36-3602-0000		P1400648	08/01/2014	WISCONSIN DEPARTMENT OF JUSTIC	100.00
36-3602-0000		P1400667	07/28/2014	AARONS LOCK AND SAFE INC	85.97
OVERHEAD	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	101,080.00	54,856.34	5,601.34	213.40	40,408.92
36-3602-0000-63200	PUBL/SUBCR/DUES				
36-3602-0000		P1402890	07/31/2014	REPORTER CO INC	26.22
OVERHEAD	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	3,002.00	1,994.00	0.00	26.22	981.78
36-3603-0000-64605	NON-REIMB EXP				
36-3603-0000			08/12/2014	WINKLER,GREG	148.50
36-3603-0000		P1400669	08/07/2014	SENTRY FOOD STORE	54.33
SPECIAL HSD	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	6,993.00	901.05	54.33	202.83	5,834.79
36-3603-0000-64908	CONTRIBUTIONS				
36-3603-3012		P1402865	08/14/2014	SCHROEDER,JANET LEE	237.48
36-3603-3015		P1402866	07/25/2014	ACE PORTABLES	316.50
SPECIAL HSD	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	8,000.00	3,244.53	0.00	553.98	4,201.49
36-3610-0000-62119	OTHER SERVICES				
36-3610-0000		P1402894	08/01/2014	O BRIEN AND ASSOCIATES INC	1,400.00
CHILD CARE	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	49,580.00	3,380.68	136.00	1,400.00	44,663.32
36-3634-0000-62119	OTHER SERVICES				
36-3634-5014		P1400641	08/30/2014	ORION FAMILY SERVICES	1,248.60
36-3634-5014		P1400643	08/07/2014	OREGON MENTAL HEALTH SERVICES	1,552.50
36-3634-5015		P1400637	08/11/2014	FOUNDATIONS COUNSELING CENTER	3,508.89
36-3634-5015		P1400641	07/31/2014	ORION FAMILY SERVICES	2,745.02
CPS	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	102,400.00	16,749.93	14,404.96	9,055.01	62,190.10

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt	
36-3634-0000-62503 36-3634-0000	INTERPRETER FEES	P1400645	08/07/2014	SWITS LTD	390.00	
CPS	Budget 1,500.00		YTD Exp 684.00	YTD Enc 390.00	Pending 390.00	Closing Balance 36.00
36-3634-0000-63300 36-3634-0000	TRAVEL		08/04/2014	ARENDR,ILONA	25.76	
CPS	Budget 168,000.00		YTD Exp 114,737.82	YTD Enc 0.00	Pending 25.76	Closing Balance 53,236.42
36-3634-0000-64604	PROGRAM EXPENSE					
36-3634-1803		P1400646	08/01/2014	WISCONSIN DEPARTMENT OF JUSTIC	56.00	
36-3634-1814		P1400674	07/30/2014	GREGG INVESTIGATIONS INC	65.00	
36-3634-1814		P1402713	07/10/2014	HARRIS REPORTING LLC	541.50	
36-3634-5000		P1400646	08/01/2014	WISCONSIN DEPARTMENT OF JUSTIC	69.00	
CPS	Budget 105,922.00		YTD Exp 49,144.43	YTD Enc 16,979.66	Pending 731.50	Closing Balance 39,066.41
36-3636-0000-64604 36-3636-0000	PROGRAM EXPENSE	P1400669	07/30/2014	SENTRY FOOD STORE	21.04	
INDEPEND LIVING	Budget 7,969.00		YTD Exp 2,119.24	YTD Enc 21.04	Pending 21.04	Closing Balance 5,807.68
36-3638-0000-64604	PROGRAM EXPENSE					
36-3638-2900		P1400638	07/29/2014	NORRIS ADOLESCENT CENTER	2,390.40	
36-3638-2900		P1400639	07/29/2014	OCONOMOWOC DEVELOPMENT	59.40	
36-3638-2900		P1400640	07/29/2014	NORTHWEST PASSAGE	870.10	
36-3638-2900		P1400647	07/29/2014	TOMORROWS CHILDREN*	3,744.90	
36-3638-2900		P1400654	07/29/2014	RAWHIDE BOYS RANCH*	873.00	
36-3638-2900		P1402889	07/29/2014	LAD LAKE	855.44	
CPS SUB CARE	Budget 3,716,746.00		YTD Exp 2,298,319.71	YTD Enc 10,673.79	Pending 8,793.24	Closing Balance 1,398,959.26
36-3646-0000-62119 36-3646-5009	OTHER SERVICES	P1400669	07/31/2014	SENTRY FOOD STORE	113.96	
JUVENILE JUSTICE	Budget 176,741.00		YTD Exp 111,969.71	YTD Enc 27,626.16	Pending 113.96	Closing Balance 37,031.17
36-3646-0000-64604	PROGRAM EXPENSE					
36-3646-5016		P1400666	08/05/2014	MENARDS	43.80	
36-3646-5016		P1400669	08/06/2014	SENTRY FOOD STORE	177.32	
36-3646-5016		P1402714	07/17/2014	PIZZA HUT OF SOUTHERN WISCONSI	63.28	
JUVENILE JUSTICE	Budget 8,450.00		YTD Exp 7,380.28	YTD Enc 456.62	Pending 284.40	Closing Balance 328.70
36-3655-0000-64604 36-3655-0000	PROGRAM EXPENSE	P1400646	08/01/2014	WISCONSIN DEPARTMENT OF JUSTIC	210.00	

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt	
KINSHIP CARE		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		2,000.00	1,025.00	210.00	210.00	555.00
36-3664-0000-62119	OTHER SERVICES					
36-3664-0000		P1402637	08/08/2014	INTERIM HEALTHCARE OF WISCONSI		4,067.50
YOUTH SERVICES		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		15,000.00	20,469.75	4,067.50	4,067.50	(13,604.75)
OPERATING SUPPLI						
36-3664-0000			08/05/2014	GERBER,CARRIE		150.75
36-3664-0000		P1400663	07/28/2014	BOB BARKER COMPANY INC		230.09
36-3664-0000		P1400666	07/30/2014	MENARDS		47.08
YOUTH SERVICES		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		42,080.00	19,482.17	6,672.93	427.92	15,496.98
36-3683-0000-62119	OTHER SERVICES					
36-3683-0000		P1402900	06/30/2014	ALZHEIMERS ASSOCIATION		2,661.13
ADRC		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		50,630.00	0.00	0.00	2,661.13	47,968.87
36-3683-0000-64200	TRAINING EXP					
36-3683-0000		P1402754	07/30/2014	UNIVERSITY OF WISCONSIN LACROS		385.00
36-3683-0000		P1402791	08/04/2014	KALAHARI RESORT CONVENTION CEN		99.00
ADRC		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		1,665.00	1,563.50	0.00	484.00	(382.50)
36-3683-0000-64604	PROGRAM EXPENSE					
36-3683-0000		P1400629	08/01/2014	E AND D WATER WORKS INC		24.00
ADRC		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		14,980.00	14,342.04	4,357.07	24.00	(3,743.11)
36-3686-0000-62119	OTHER SERVICES					
36-3686-0000		P1400649	07/31/2014	GENESIS BEHAVIORAL SERVICES IN		6,061.00
DETOX SERVICES		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		237,108.00	113,124.00	109,615.00	6,061.00	8,308.00
36-3689-0000-64604	PROGRAM EXPENSE					
36-3689-0000		P1402893	08/01/2014	ROCK MED LTC PHARMACY		75.33
36-3689-0002			07/22/2014	TURNER, STEWART		880.68
36-3689-0002			08/01/2014	MOTEL 6		385.90
36-3689-0002			07/18/2014	DRIFTWOOD MOTEL		775.00
36-3689-0002		P1400966	07/24/2014	LANNON STONE MOTEL		80.00
36-3689-0002		P1400968	07/10/2014	NORTHERN TOWN MOTEL		385.00
36-3689-0002		P1400971	07/24/2014	SRB PROPERTY MANAGEMENT LLC		125.00
36-3689-0004		P1400965	07/29/2014	HOMECARE PHARMACY LLC		99.49
36-3689-0004		P1400973	07/21/2014	KEALEY PHARMACY		409.15
36-3689-1221		P1402895	08/18/2014	CUNNINGHAM, LORI D		1,471.50
36-3689-1221		P1402896	08/18/2014	MCGUIRE, PAULA		2,257.06
36-3689-1226		P1401238	08/01/2014	ST ELIZABETH MANOR		2,722.09

transfer coming

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt	
CRISIS		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		306,325.00	169,499.36	3,820.73	9,666.20	123,338.71
36-3690-0000-62119	OTHER SERVICES					
36-3690-0000		P1400705	07/31/2014	ADVANCED DISPOSAL SERVICES		22.44
36-3690-0000		P1401416	08/13/2014	NEEDY MEDS INC		62.00
OUTPATIENT SER		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		65,966.00	43,253.16	21,282.99	84.44	1,345.41
36-3690-0000-62170	PHYSICIAN/OTHER					
36-3690-0000		P1400655	08/02/2014	MARCUS,JEFFREY A		720.00
OUTPATIENT SER		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		145,620.00	117,122.43	33,720.00	720.00	(5,942.43)
36-3690-0000-62503	INTERPRETER FEES					
36-3690-0000		P1400645	07/24/2014	SWITS LTD		981.25
OUTPATIENT SER		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		9,000.00	7,146.47	981.25	981.25	(108.97)
36-3706-0000-62119	OTHER SERVICES					
36-3706-0000		P1400705	07/31/2014	ADVANCED DISPOSAL SERVICES		45.56
CSP		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		13,121.00	6,192.60	3,644.90	45.56	3,237.94
36-3706-0000-64604	PROGRAM EXPENSE					
36-3706-0000		P1401417	08/04/2014	MOORE MEDICAL CORP		184.13
36-3706-0000		P1402902	08/17/2014	HAMILTON,CARLETTE		40.00
36-3706-0000		P1402904	08/17/2014	NAJDOWSKI,PAUL		60.00
36-3706-0000		P1402905	08/18/2014	POUNDS,MARY		40.00
36-3706-0000		P1402906	08/17/2014	WITT,MAUREEN		50.00
CSP		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		635,920.00	389,383.96	184.13	374.13	245,977.78
36-3713-0000-64200	TRAINING EXP					
36-3713-2015		P1402898	08/15/2014	EMERGENCY SHELTER OF THE FOX V		375.00
36-3713-2015		P1402899	08/18/2014	BEST WESTERN BRIDGEWOOD RESORT		140.00
36-3713-2015		P1402901	08/15/2014	BEST WESTERN BRIDGEWOOD RESORT		140.00
36-3713-2015		P1402903	08/15/2014	BEST WESTERN BRIDGEWOOD RESORT		140.00
SHELTER PLUS		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		1,000.00	0.00	0.00	795.00	205.00
36-3730-0000-62400	R & M SERV					
36-3730-0000		P1400666	07/28/2014	MENARDS		8.99
36-3730-0000		P1400705	07/31/2014	ADVANCED DISPOSAL SERVICES		115.00
36-3730-0000		P1402891	07/25/2014	LLOYDS PLUMBING AND HEATING		812.62
36-3730-0000		P1402892	07/23/2014	PER MAR SECURITY SERVICES		182.05
JOB CENTER		Budget	YTD Exp	YTD Enc	Pending	Closing Balance
		73,422.00	44,342.71	136.79	1,118.66	27,824.84

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
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I have examined the preceding bills and encumbrances in the total amount of **\$49,716.81**
Claims covering the items are proper and have been previously funded. These items are to be treated as follows:
A. Bills and encumbrances over \$10,000 referred to the Finance Committee and County Board.
B. Bills under \$10,000 to be paid.
C. Encumbrances under \$10,000 to be paid upon acceptance by the Department Head.

Date: _____ Dept Head _____
Committee Chair _____

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COMMITTEE APPROVAL REPORT

08/20/2014

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt	
36-3638-0000-64604 36-3638-1836	PROGRAM EXPENSE	P1402722	08/01/2014	ROCK RIVER ACADEMY AND RES CEN	2,736.00	
CPS SUB CARE	Budget		YTD Exp	YTD Enc	Pending	Closing Balance
	3,716,746.00		2,295,583.71	3,591.43	2,736.00	1,414,834.86
36-3642-0000-64604 36-3642-0000	PROGRAM EXPENSE		08/01/2014	ALLIANT ENERGY	82.66	
REUN SUPPORT	Budget		YTD Exp	YTD Enc	Pending	Closing Balance
	74,200.00		3,619.67	0.00	82.66	70,497.67
36-3646-0000-64604 36-3646-5017 36-3646-5017	PROGRAM EXPENSE		08/01/2014 08/01/2014	KEALEY PHARMACY DAVIS CITGO SERVICE INC	23.95 60.00	
JUVENILE JUSTICE	Budget		YTD Exp	YTD Enc	Pending	Closing Balance
	8,450.00		7,296.33	298.78	83.95	770.94

I have examined the preceding bills and encumbrances in the total amount of **\$2,902.61**
 Claims covering the items are proper and have been previously funded. These items are to be treated as follows:
 A. Bills and encumbrances over \$10,000 referred to the Finance Committee and County Board.
 B. Bills under \$10,000 to be paid.
 C. Encumbrances under \$10,000 to be paid upon acceptance by the Department Head.

Date: _____ Dept Head _____
 Committee Chair _____

Who Can Receive Services from the Community Dental Clinic?

- Individuals or families must have an income of 200% of the Federal Poverty level or less and
- No dental insurance or
- Eligible to receive dental services through the ForwardHealth Insurance Card

Patients must reside in the Jefferson County area in one of the following zip codes:

- 53036 - Ixonia
- 53066 - Oconomowoc
- 53137 - Helenville
- 53178 - Sullivan
- 53523 - Cambridge
- 53538 - Fort Atkinson
- 53551 - Lake Mills
- 53038 - Johnson Creek
- 53094/53098 - Watertown
- 53156 - Palmyra
- 53190 - Whitewater
- 53534 - Edgerton
- 53549 - Jefferson
- 53594 - Waterloo

Individuals who are currently eligible for dental care through the ForwardHealth Insurance Card can call the Community Dental Clinic about dental needs and services available.

Individuals who do not have dental insurance can call the Community Dental Clinic about dental needs and be screened to see if they meet the income guidelines.

Donations/Fees

- Donations are welcomed to assist in clinic expenses.
- Patients with a ForwardHealth Insurance Card are required to pay the appropriate co-pay.
- Patients without insurance will be charged a minimal fee based on services provided.

Clinic Staff

Services are provided by dentists, dental hygienists and dental assistants including paid staff and volunteers. Volunteers are always welcome. Please contact the Clinic Director about volunteering.

Clinic Services

Community Dental Clinic volunteers will provide basic preventive and treatment services such as:

- Examinations
- Routine Cleanings
- Fillings/restorations
- Extractions
- Treatment of abscesses
- Oral hygiene education



COMMUNITY DENTAL CLINIC

520 Handeyside Lane, Fort Atkinson, WI 53538 920-563-4372

2013 ANNUAL REPORT

The Mission of the Community Dental Clinic is to provide basic dental health services to uninsured and ForwardHealth Insurance patients in Jefferson County communities.

2013 BOARD OF DIRECTORS

Brian Turley, DDS, Dental Director

Paul Hable, Chair	Gail Scott, RN, Secretary	Michael Phelps, Treasurer	Liberty Boucher, DDS
Debra Gatzke, RN	Bob Karczewski, DDS	Peter Nysather, DDS	Virgil Simley, DDS
Juliet Slavens, DDS	Joyce Connolly, RN	David Meade, DDS	Kristin Wallace

CLINIC STAFF

Barb Morrison Gudgeon, Clinic Director; Sandy Hasel, Patient Coordinator; Brian Turley, DDS; Liberty Boucher, DDS; Aimee D'Amour, DDS; David Meade, DDS; Heather Campbell, DDS; Chad Boers, DDS

HYGIENISTS

Marilyn Jansen, Tina Nissen, Sarah Landon, Amanda Marcelle

DENTAL ASSISTANT STAFF

Nicole Stark, Lead Dental Assistant
Brenda Mohr, Missy Stark, Janice Wendorf, Heather Moe, Jessie Bienfang, Jenna Allard

VOLUNTEER HYGIENISTS

Deb Randall

VOLUNTEER DENTISTS

Steve Fahsel, DDS; Dan Harvey, DDS; David Meade, DDS;
Pete Nysather, DDS; Virgil Simley, DDS; Oral and Maxillofacial Surgery Associates

Dentist Volunteer Hours = 473 hours or \$56,760 in-kind value
Hygienist Volunteer Hours = 100 hours or \$3,000 in-kind value

CLINIC PATIENTS BY NO INSURANCE OR FORWARDHEALTH INSURANCE

2009	2010	2011	2012	2013
Patients = 1,650	Patients = 2,460	Patients = 3,433	Patients = 4,417	Patients = 4,077
No Insurance = 502 (31%)	No Insurance = 655 (26%)	No Insurance = 1,114 (33%)	No Insurance = 1,139 (26%)	No Insurance = 1,131 (28%)
ForwardHealth = 1,123 (69%)	ForwardHealth = 1,805 (74%)	ForwardHealth = 2,319 (67%)	ForwardHealth = 3,279 (74%)	ForwardHealth = 2,946 (72%)

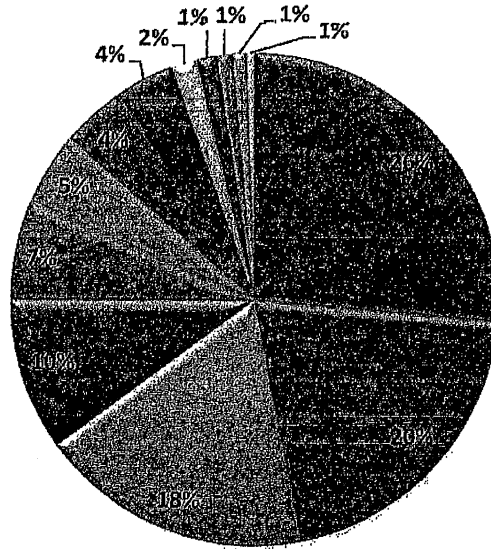
CLINIC PATIENTS BY AGE

AGE	2013	AGE	2013
3 - 5	216	25 - 34	805
6 - 12	674	35 - 54	1,186
13 - 17	396	55 - 64	328
18 - 24	299	65 +	173

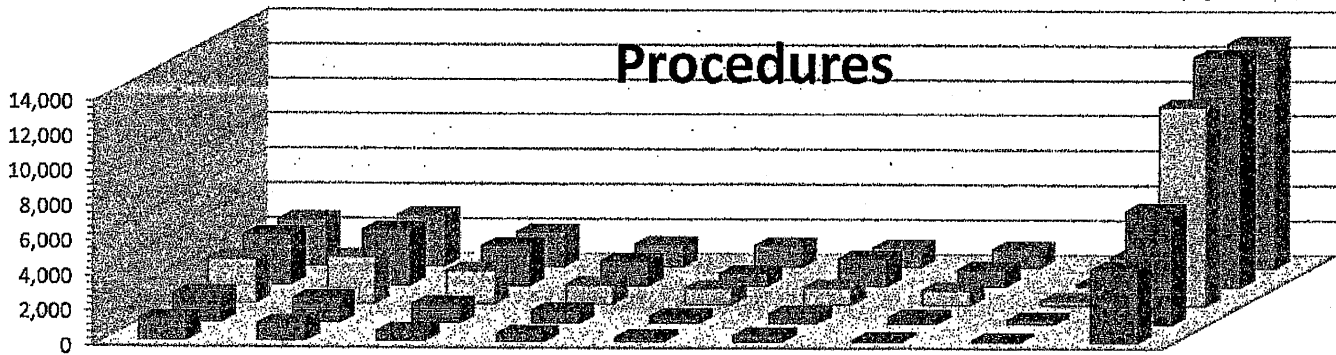
Male Patients	1,733
Female Patients	2,946

CLINIC PATIENTS BY CITY

- Watertown = 1,073 patients
- Fort Atkinson = 836 patients
- Jefferson = 738 patients
- Whitewater = 411 patients
- Lake Mills = 267 patients
- Palmyra = 195 patients
- Johnson Creek = 170 patients
- Waterloo = 159 patients
- Cambridge = 71 patients
- Sullivan = 53 patients
- Helenville = 41 patients
- Oconomowoc = 38 patients
- Ixonia = 25 patients



Procedures



	Fillings	X-Rays	Exams	Extractions	Sealants	Cleanings	Fluoride	Other	Total
■ 2009	1,263	1,025	606	471	246	388	134	110	4,243
■ 2010	1,659	1,400	1,102	732	415	590	365	256	6,519
■ 2011	2,550	2,690	1,923	1,143	941	979	868	303	11,397
■ 2012	2,882	3,170	2,281	1,421	736	1,589	972	145	13,196
■ 2013	2,666	2,939	1,981	1,289	1,217	1,140	1,046	597	12,875

2013 INCOME

Wisconsin Dental Association	\$4,000	Community Donations	\$17,342
United Way of Watertown	\$4,026	Patient Contribution	\$55,167
Other Income	\$5,445	ForwardHealth Insurance	\$273,588
United Way of Jeff & N. Wal Counties	\$14,250		

Total Income \$373,818

2013 EXPENSES

Telephone	\$480	Other	\$13,295
Repairs/Building Maintenance	\$816	Dental Supplies	\$40,511
Insurance	\$5,076	Payroll	\$329,617
Capital Equipment	\$8,285		

Total Expenses \$398,080

Net Profit -\$24,262

ForwardHealth/Private Pay billed out \$1,458,884; Wrote off \$1,077,734.74; Difference = \$381,149.26

The Community Dental Clinic location is generously supported by Fort HealthCare.

**ROCK COUNTY HUMAN SERVICES DEPARTMENT
DIRECTOR'S REPORT
Wednesday, August 27, 2014**

HSD MANAGEMENT TEAM MEETING – August 12, 2014
Meeting cancelled.
