



HEALTH SERVICES COMMITTEE
Thursday January 15, 2015 at 10:00 a.m.
Rock Haven Conference Room in Village Commons

Amended:
01/09/15

AGENDA

Note: Date
and Time

1. Call to Order/Approval of Agenda
2. Approval of Minutes – December 10, 2014
3. Introductions, Citizen Participation, Communications and Announcements
4. **Action Item:** Bills
5. **Action Item:** Budget Transfers
6. **Action Item:** Pre-Approved Encumbrances/Encumbrances
7. Old Business
 - a. Information Item: Rock Haven Building Update
8. New Business
 - a. **Action Item:** Resolution Recognizing Ok-Cha Elliott for Years of Service at Rock Haven
 - b. **Action Item:** Centrad Healthcare Contract Addendum
 - c. **Action Item:** Resolution Recognizing Sandra Balas for Years of Service at Rock Haven
 - d. **Action Item:** Contract with Dr. William West
 - e. Information Item: Resident Council Minutes for November
 - f. Information Item: Division of Quality Control
 - g. **Information Item: Survey Preparedness**
9. Information Item: Reports
 - a. Census
 - b. Activities
 - 1) Staff Education for January 2015
 - a. Preventing Sexual Harassment
 - b. CPR
 - c. Resident Safety

2) Resident Council Meeting – December 16, 2014 at 10:15 am.

3) Family Council Meeting – December 16, 2014 at 6:00 pm.

c. Finance - Dave Sudmeier

10. Next Meeting Date - The next regular meeting of the Health Services Committee is scheduled for Wednesday February 11, 2015 at 8 A.M. in the Rock Haven Classroom of the Village Commons

11. Adjournment

SP/ML

*Note to Committee Members: To ensure a quorum is present, please call the Administrative Secretary at 757-5076 if you are unable to attend the meeting.

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
32-8000-8100-63109	OTHER SUPP/EXP	P1500266	01/05/2015	MENARDS	24.54
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	6,000.00	0.00	2,524.53	24.54	3,450.93
SUPPORT SERVICE MATERIALS PROG TOTAL					24.54
32-8000-9200-62463	FIRE ALARM				
		P1500351	01/01/2015	PROTECTION TECHNOLOGIES	9,985.00
		P1500391	01/01/2015	PER MAR SECURITY SERVICES	1,159.20
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	15,640.00	0.00	0.00	11,144.20	4,495.80
32-8000-9200-62470	BLDG R & M				
		P1500241	01/02/2015	FIRST SUPPLY MADISON LLC	247.73
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	13,750.00	0.00	1,667.72	247.73	11,834.55
SUPPORT SERVICE MAINTENANCE PROG TOTAL					11,391.93
32-8000-9300-63109	OTHER SUPP/EXP				
		P1500266	01/05/2015	MENARDS	20.75
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	6,000.00	0.00	20.74	20.75	5,958.51
SUPPORT SERVICE ENVIRONMENTAL PROG TOTAL					20.75

I have examined the preceding bills and encumbrances in the total amount of **\$11,437.22**
 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: **JAN 14 2015**

Dept Head _____

Committee Chair _____

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
32-3250-0000-64904	SUNDRY EXPENSE	P1400361	12/16/2014	LIVING DESIGN INC	250.23
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	5,000.00	1,086.44	250.19	250.23	3,413.14
ROCK HAVEN PROG TOTAL				250.23	
32-7260-7400-62189	OTHER MED SERV	P1400364	11/12/2014	MOBILEXUSA	128.43
		P1400382	05/21/2014	UNIVERSITY OF WISCONSIN HOSPIT	262.75
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	15,500.00	14,508.69	14,899.80	391.18	(14,299.67)
RH CONTRACT SERVICES T-18 PROG TOTAL				391.18	
32-8000-8100-63100	OFC SUPP & EXP	P1400347	12/10/2014	CARSTENS HEALTH INDUSTRIES INC	15.04
		P1400349	12/11/2014	CRESCENT ELECTRIC SUPPLY CO	107.58
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	7,500.00	5,337.71	786.82	122.62	1,252.85
32-8000-8100-63101	POSTAGE	P1400380	12/06/2014	UNITED PARCEL SERVICE	11.91
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	3,500.00	1,988.63	233.90	11.91	1,265.56
32-8000-8100-63109	OTHER SUPP/EXP	P1400386	12/09/2014	ROCK COUNTY HEALTH CARE CENTE	33.08
		P1400387	12/11/2014	ROCK COUNTY HEALTH CARE CENTE	146.60
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	6,000.00	5,966.57	131.69	179.68	(277.94)
32-8000-8100-64000	MEDICAL SUPPLIES	P1402269	12/02/2014	GULF SOUTH MEDICAL SUPPLY	2,595.42
		P1402657	12/02/2014	MEDLINE INDUSTRIES INC	650.96
		P1402658	12/01/2014	PROFESSIONAL MEDICAL INC	4,847.53
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	135,000.00	139,448.94	12,175.29	8,093.91	(24,718.14)
32-8000-8100-64408	DISPOSABLES	P1402269	12/11/2014	GULF SOUTH MEDICAL SUPPLY	29.97
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	73,000.00	72,631.84	391.26	29.97	(53.07)
SUPPORT SERVICE MATERIALS PROG TOTAL				8,438.09	

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
32-8000-8200-63109	OTHER SUPP/EXP	P1402269	12/02/2014	GULF SOUTH MEDICAL SUPPLY	169.10
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	52,000.00	52,150.15	309.07	169.10	(628.32)
SUPPORT SERVICE PHARMACY PROG TOTAL				169.10	
32-8000-9100-64105	GROCERIES	P1402729	12/09/2014	REINHART FOODSERVICE INC	1,778.84
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	170,727.00	160,408.78	(500.74)	1,778.84	9,040.12
32-8000-9100-64107	MEAT	P1402729	12/09/2014	REINHART FOODSERVICE INC	649.49
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	66,000.00	56,817.37	(836.59)	649.49	9,369.73
SUPPORT SERVICE FOOD SERVICE PROG TOTAL				2,428.33	
32-8000-9200-62420	MACH & EQUIP RM	P1400231	12/03/2014	ASC1	36.64
		P1400237	12/16/2014	LAND AND WHEELS	331.96
		P1400341	11/26/2014	AMSAN LLC	30.80
		P1403492	12/15/2014	HOBART SALES AND SERVICE	24.08
		P1403803	12/17/2014	BOELTER COMPANIES	1,360.74
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	25,000.00	42,610.92	423.48	1,784.22	(19,818.62)
32-8000-9200-62460	BLDG SERV R&M	P1400250	12/29/2014	TAS COMMUNICATIONS INC	60.60
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	14,700.00	13,928.88	60.60	60.60	649.92
32-8000-9200-62461	ELEVATOR	P1403940	12/18/2014	STATE OF WISCONSIN	50.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	4,500.00	4,919.22	0.00	50.00	(469.22)
32-8000-9200-62463	FIRE ALARM	P1400217	12/30/2014	ABC FIRE AND SAFETY INC	108.00
		P1400219	12/08/2014	JF AHERN COMPANY	2,450.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	17,400.00	29,857.01	2,558.00	2,558.00	(17,573.01)
32-8000-9200-62470	BLDG R & M	P1400251	12/11/2014	WERNER ELECTRIC SUPPLY COMPAN	329.16

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
		P1403800	12/16/2014	LA FORCE HARDWARE AND MANUFAC	1,692.01
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	12,500.00	14,704.08	329.16	2,021.17	(4,554.41)
32-8000-9200-63109	OTHER SUPP/EXP				
		P1400230	12/22/2014	HARRIS ACE HARDWARE	11.97
		P1403200	12/03/2014	AMERICAN INDUSTRIAL STEEL AND	37.50
		P1403695	12/31/2014	CJ AND ASSOCIATES INC	112.20
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	2,500.00	5,810.08	5,602.25	161.67	(9,074.00)
SUPPORT SERVICE MAINTENANCE PROG TOTAL				6,635.66	
32-8000-9300-62164	DISPOSAL SERV				
		P1400622	12/10/2014	OFFICE PRO	12.14
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	20,500.00	14,018.85	3,405.60	12.14	3,063.41
32-8000-9300-63109	OTHER SUPP/EXP				
		P1400341	12/05/2014	AMSAN LLC	122.54
		P1400377	12/10/2014	SUPPLY COMPANY	98.60
		P1400378	12/02/2014	THERMOPATCH CORPORATION	245.78
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	6,000.00	5,368.13	547.77	466.92	(382.82)
32-8000-9300-63111	PAPER PRODUCTS				
		P1402269	12/02/2014	GULF SOUTH MEDICAL SUPPLY	2,217.50
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	25,000.00	25,075.98	2,745.02	2,217.50	(5,038.50)
32-8000-9300-63404	JANITOR/CLEANING				
		P1400341	12/01/2014	AMSAN LLC	1,908.40
		P1402729	12/09/2014	REINHART FOODSERVICE INC	356.34
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	19,000.00	21,119.57	2,475.54	2,264.74	(6,859.85)
32-8000-9300-64409	FURNISHINGS				
		P1402269	12/02/2014	GULF SOUTH MEDICAL SUPPLY	581.76
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	3,000.00	187.43	725.92	581.76	1,504.89
SUPPORT SERVICE ENVIRONMENTAL PROG TOTAL				5,543.06	
32-8000-9500-62104	CONSULTING SERV				
		P1403860	11/30/2014	WIPFLI LLP	2,000.56

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	3,000.00	14,183.36	625.00	2,000.56	(13,808.92)
32-8000-9500-64424	EMPLOYEE RECOGN.				
		P1400373	12/01/2014	SENTRY FOODS INC STORE #375	127.38
		P1403697	12/06/2014	BASICS NATURAL FOOD MARKET	301.94
		P1403831	12/03/2014	SYSCO FOODS OF BARABOO LLC	476.13
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	2,500.00	1,058.43	(16.57)	905.45	552.69
SUPPORT SERVICE ADMINISTRATION PROG TOTAL				2,906.01	
32-8000-9700-62174	INTERNIST				
		P1403451	11/30/2014	KALEMBER MD,ROBERT L	6,225.00
		P1403452	12/12/2014	WEST MD,WILLIAM PETER	7,200.00
		P1403971	12/01/2014	RAO,RAMACHANDRA	2,365.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	248,000.00	224,364.75	13,425.00	15,790.00	(5,579.75)
SUPPORT SERVICE MEDICAL STAFF PROG TOTAL				15,790.00	
32-9000-9940-61920	PHYSICALS				
		P1400367	11/30/2014	OCCUPATIONAL HEALTH CENTER	60.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	2,000.00	2,657.00	60.00	60.00	(777.00)
GENERAL SERVICE EMP BENEFITS PROG TOTAL				60.00	

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 **\$42,611.66**

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: **JAN 14 2015**

Dept Head _____

Committee Chair _____

RESOLUTION

ROCK COUNTY BOARD OF SUPERVISORS

Health Services Committee
INITIATED BY



Sue Prostko
DRAFTED BY

Health Services Committee
SUBMITTED BY

December 17, 2014
DATE DRAFTED

RECOGNIZING OK-CHA ELLIOTT FOR SERVICE TO ROCK HAVEN

- 1 **WHEREAS**, Ok-Cha Elliott has served the citizens of Rock County over the past 24 years, 6 months as a
- 2 dedicated and valued employee of Rock County; and,
- 3
- 4 **WHEREAS**, Ok-Cha Elliott began her career with Rock Haven as a Certified Nursing Assistant on June 5,
- 5 1990; and
- 6
- 7 **WHEREAS**, Ok-Cha Elliott has worked diligently in that position until her retirement on December 23, 2014;
- 8 and,
- 9
- 10 **WHEREAS**, the Rock County Board of Supervisors, representing the citizens of Rock County, wishes to
- 11 commend Ok-Cha Elliott for her long and faithful service.
- 12
- 13 **NOW, THEREFORE, BE IT RESOLVED**, that the Rock County Board of Supervisors duly assembled this
- 14 _____ day of _____, 2015 does hereby recognize Ok-Cha Elliott for her 24 years, 6 months of service
- 15 and extend their best wishes to her in her future endeavors; and,
- 16
- 17 **BE IT FURTHER RESOLVED**, that the County Clerk be authorized and directed to furnish a copy of this
- 18 resolution to Ok-Cha Elliott.

COUNTY BOARD STAFF COMMITTEE

Respectfully submitted,

HEALTH SERVICES COMMITTEE

Billy Bob Grahn, Chair

Norvain Pleasant, Vice Chair

Terry Fell

Brenton Driscoll

Linda Garrett

J. Russell Podzilni, Chair

Sandra Kraft, Vice Chair

Eva Arnold

Henry Brill

Betty Jo Bussie

Mary Mawhinney

Louis Peer

Alan Sweeney

Terry Thomas

ADDENDUM
To the
SUPPLIER AGREEMENT
By and Between
CENTRAD HEALTHCARE, LLC & ROCK HAVEN NURSING HOME

This Addendum ("Addendum") is written for the existing Supplier Agreement ("Agreement") by and between Centrad Healthcare, LLC, ("Centrad") and Rock Haven Nursing Home. This Addendum will be effective January 1st, 2015.

This Addendum will add Pricing Exhibits for Wound Care- Exhibit B to the existing Supplier Agreement (Attached). Pricing will be in effect for the facilities listed on Exhibit A.

This Addendum will also include payment terms for the Billing and Payment for Non Covered Wound Care Supplies:

Billing and Payment for Residents Other than 3rd Party Payer Residents. CENTRAD shall bill CUSTOMER and CUSTOMER shall pay CENTRAD for Supplies furnished for any resident who is not a 3rd Party Payer Resident, according to the price lists in the applicable Exhibits. CENTRAD reserves the right to change the price lists upon ninety (90) days prior written notice to CUSTOMER. CENTRAD shall bill CUSTOMER on a monthly basis on or before the fourth (4th) working day of each month for Supplies furnished during the past month. CUSTOMER shall pay CENTRAD within thirty (30) days of receipt of an invoice from CENTRAD. CUSTOMER agrees to pay a service charge on balances thirty (30) days and more past due, which will be computed at a rate of one half (1/2) percent per month, which is an annual percentage rate of six percent (6%).

This Addendum shall become part of the original Agreement. Once this Addendum (considered to be an instrument in writing) is signed by both parties (Centrad and Rock Haven Nursing Home) the addendum will be considered valid and binding.

I have read and approved this Addendum and allow this addendum to be added to the
aforementioned Agreement, effective January 1st, 2015:

CENTRAD HEALTHCARE, LLC

Signature: _____

Printed Name: Michelle C. Korslin

Title: Senior VP Sales & Marketing

Date: _____

ROCK HAVEN NURSING HOME

Signature: _____

Printed Name: _____

Title: _____

Date: _____

RESOLUTION

ROCK COUNTY BOARD OF SUPERVISORS



Health Services Committee
INITIATED BY

Sue Prostko
DRAFTED BY

Health Services Committee
SUBMITTED BY

January 5, 2015
DATE DRAFTED

RECOGNIZING SANDRA BALAS FOR SERVICE TO ROCK HAVEN

- 1 **WHEREAS**, Sandra Balas has served the citizens of Rock County over the past 35 years as a dedicated and
- 2 valued employee of Rock County; and,
- 3
- 4 **WHEREAS**, Sandra Balas began her career with Rock Haven as a Certified Nursing Assistant on January 2,
- 5 1980; and
- 6
- 7 **WHEREAS**, Sandra Balas has worked diligently in that position until her retirement on January 2, 2015; and,
- 8
- 9 **WHEREAS**, the Rock County Board of Supervisors, representing the citizens of Rock County, wishes to
- 10 commend Sandra Balas for her long and faithful service.
- 11
- 12 **NOW, THEREFORE, BE IT RESOLVED**, that the Rock County Board of Supervisors duly assembled this
- 13 _____ day of _____, 2015 does hereby recognize Sandra Balas for her 35 years of service and extend
- 14 their best wishes to her in her future endeavors; and,
- 15
- 16 **BE IT FURTHER RESOLVED**, that the County Clerk be authorized and directed to furnish a copy of this
- 17 resolution to Sandra Balas.

COUNTY BOARD STAFF COMMITTEE

Respectfully submitted,

HEALTH SERVICES COMMITTEE

Billy Bob Grahn, Chair

Norvain Pleasant, Vice Chair

Terry Fell

Brenton Driscoll

Linda Garrett

J. Russell Podzilni, Chair

Sandra Kraft, Vice Chair

Eva Arnold

Henry Brill

Betty Jo Bussie

Mary Mawhinney

Louis Peer

Alan Sweeney

Terry Thomas

CONSULTIVE SERVICE AGREEMENT
ROCK HAVEN

This agreement is made is entered into between Rock Haven and William P. West, M.D. for the purpose of providing physician consulting services.

Services provided under this agreement shall be at the request of the Nursing Home Administrator at times and for periods mutually agreed upon. The physician agrees to the following:

The named physician shall:

- (a) Hold, and provide documentation of, a current license to practice general medicine in the State of Wisconsin.
- (b) Hold, and provide documentation of, adequate malpractice liability insurance in accordance with State law. Rock County will reimburse consultant 100 percent of the malpractice insurance and Injured Patients and Families Compensation costs.
- (c) Act as Rock Haven Medical Director. Provide guidance to the nursing staff for all resident care issues. Participate in the Medical Staff meetings and the Quality Assurance program
- (d) Assist Administration in planning for Medical, Psychiatric, Dental, Podiatry and Vision Services of the Rock Haven.
- (e) Assist Administration to monitor medical staff practice for professional performance and adherence to professional standards.
- (f) Before commencing provision of service, the named physician will provide results of recent TB skin testing. Physician will provide annual documentation thereafter.
- (h) Assist Administration with billing issues in recovery of third party payments including providing physician documentation related to resident status warranting the services as necessary.
- (i) Bill the County on letterhead stationery or as prescribed by the County. Such bills shall be signed.
- (j) Private practice is permitted; however, physician shall avoid conflicts of interest. Physicians are to file required conflict of interest forms if holding more than one position.

The compensation hereinafter provided shall be the entire compensation and shall include all services of any nature rendered as consultant to Rock Haven, and physician shall not be entitled to additional compensation from any source for such services.

The management of the Rock Haven is reserved to the County, including the right to plan and schedule service, to determine what constitutes good and efficient service, and all other functions of management and direction not expressly limited by the terms of this agreement. Rock Haven assumes professional and administrative responsibility for the services rendered.

It is the understanding of the parties to the Agreement that when this Agreement provides: "Rock Haven assumes professional and administrative responsibility for the services rendered," what is meant is that Rock Haven will provide general administrative supervision and accountability control for the service physician while performing services for the facility.

Rock Haven does not assume responsibility for technical professional supervision of the actual services provided. The professional liability, technical professional supervision, and quality of services remain the responsibility of the physician.

Fees for professional services shall be at the rate of \$140 per hour. On-site emergency consultation services will also be provided at the rate of \$140 dollars per hour. Physician shall furnish on-site consulting services for a maximum of 780 hours annually with an anticipated average of 15 hours per week.

Physician shall assure professional service availability for emergency medical and/or psychiatric services as assigned by the Medical Director with evening call reimbursable at the rate of \$150 per evening. Holiday and weekend call reimbursement at the rate of \$275 per day.

In connection with the performance of work under this contract, the Physician agrees not to discriminate against any patient or resident in the provision of service. The Physician also agrees not to discriminate against any employee or applicant for employment because of age, race, religion, color, handicap, sex, physical condition, sexual orientation, developmental disability as defined in s.51.01(5), Wis. Stat., or national origin, marital status, ancestry, arrest record, or any reserve component of the military forces of the United States or this State.

This provision shall include, but not be limited to, the following: employment, upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The Physician further agrees to take affirmative action to ensure equal employment opportunities. The Physician agrees to post in a conspicuous place, available to employees and applicant for employment, notices to be provided by the Physician setting forth the provisions of the non-discrimination clause.

Physician, in the conduct of its responsibilities under this Agreement, may have access to information that is classified as "protected health information" (PHI) (as such term is defined under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") medical privacy regulations). During the term of this Agreement (and for such additional term as

required by law), any PHI which is accessed by or provided to the vendor shall be held in confidence, in accordance with the HIPAA medical privacy regulations as if the vendor were a "Business Associate" (as such term is defined under the HIPAA medical privacy regulations). Any disclosure of such information will be limited as required by law. The failure of vendors to satisfy the obligations of this paragraph shall entitle the County to indemnification for any damages, costs or expenses sustained (including actual attorneys' fees).

This agreement shall be in effect January 1, 2015 and remain in effect until December 31, 2015, after which this contract will be renegotiated. Termination of this agreement shall occur upon 60 days written notice by either party. A Business Associate Agreement is attached as Appendix I.

SIGNED FOR ROCK HAVEN

SIGNED FOR THE SERVICE PROVIDER

Sue L. Prostko
Nursing Home Administrator

William P. West, M.D.

Date: _____

Date: _____

Address: P.O. Box 920
Janesville, WI 53547-0920

Address: _____
Janesville, WI _____

WEST
2015



HIPAA COW
BUSINESS ASSOCIATE ADDENDUM

This Addendum ("Addendum" amends and is hereby incorporated into the existing agreement known as the Confidentiality Agreement ("Agreement"), entered into by and between Dr. William West (hereinafter "Business Associate") and Rock Haven Nursing Home (hereinafter "Covered Entity") on January 1, 2015.

Covered Entity and Business Associate mutually agree to modify the Agreement to incorporate the terms of this Addendum to comply with the requirements of the Health Insurance Portability and Accountability Act of 1996. If any conflict exists between the terms of the original Agreement and this Addendum, the terms of this Addendum shall govern.

RECITALS

- A. Covered Entity and Business Associate entered into an agreement (the "Underlying Agreement") pursuant to which Business Associate agrees to perform certain services on behalf of Covered Entity.
- B. In performing services on behalf of the Covered Entity, Business Associate may create, access, receive, maintain or transmit Covered Entity's Protected Health Information (defined below).
- C. The parties wish to enter into this Agreement to set forth their understanding with regard to Business Associate's Use and Disclosure of Protected Health Information (defined below) in accordance with the business associate agreement requirements of the Health Insurance Portability and Accountability Act of 1996, as amended by the Health Information Technology for Economic and Clinical Health Act, as incorporated in the American Recovery and Reinvestment Act of 2009 ("HITECH"), and all applicable implementing regulations, including, without limitation, the Standards for Privacy of Individually Identifiable Health Information (the "Privacy Rule"), Notification in the Case of Breach of Unsecured Protected Health Information ("Breach Notification Rule"), and the Security Standards for the Protection of Electronic Protected Health Information (the "Security Rule") found at Title 45, Parts 160 and 164 of the Code of Federal Regulations, dealing with the security, confidentiality, integrity and availability of protected health or health-related information, as well as breach notifications (all such laws and regulations shall be collectively referred to herein as "HIPAA").



AGREEMENTS

In consideration of the Recitals and the mutual agreements which follow, Covered Entity and Business Associate agree as follows:

1. Definitions. Capitalized terms used in this Agreement, but not otherwise defined, shall have the same meaning as those terms in the Privacy Rule or the Security Rule.

(a) Breach means the acquisition, access, Use, or Disclosure of protected health information (PHI) in a manner not permitted under the Privacy Rule which compromises the security or privacy of the PHI. PHI is presumed to be compromised unless Covered Entity or Business Associate, as applicable, documents that there is a low probability that the PHI has been compromised based on a risk assessment of at least the following factors:

- (i) The nature and extent of the PHI involved, including the types of identifiers and the likelihood of re-identification;
- (ii) The unauthorized person who used the PHI or to the Disclosure was made;
- (iii) Whether the PHI was actually acquired or viewed; and
- (iv) The extent to which the risk to the PHI has been mitigated.

Breach excludes:

- (i) Any unintentional acquisition, access or Use of PHI by a workforce member or person acting under the authority of a Covered Entity or Business Associate if such acquisition, access, or Use was made in good faith and within the scope of authority and does not result in further Use or Disclosure in a manner not permitted under the Privacy Rule.
- (ii) Any inadvertent Disclosure by a person who is authorized to access PHI at a Covered Entity or Business Associate to another person authorized to access PHI at the same Covered Entity or Business Associate, or organized health care arrangement in which the Covered Entity participates, and the information received as a result of such Disclosure is not further used or disclosed in a manner not permitted under the Privacy Rule.
- (iii) A Disclosure of PHI where a Covered Entity or Business Associate has a good faith belief that an unauthorized person to whom the Disclosure was made would not reasonably have been able to retain such information.

(b) Protected Health Information or "PHI" means that individually identifiable health information (including ePHI as defined below) of the Covered Entity that is created, used, disclosed, maintained, or received by the Business Associate, including demographic



information, that identifies an individual, or provides a reasonable basis to believe the information can be used to identify an individual, and relates to:

- (i) Past, present or future physical or mental health or condition of an individual
- (ii) The provision of health care to an individual
- (iii) The past, present, or future payment for the provision of health care to an individual excluding:
 - [a] Regarding a person who has been deceased for more than 50 years;
 - [b] Employment records held by Covered Entity in its role as employer;
 - [c] Education records covered by the Family Educational Rights and Privacy Act (FERPA), as amended, 20 U.S.C. 1232g and student records described at 20 U.S.C. 1232g(a)(4)(B)(iv).
- (c) Electronic Protected Health Information or "ePHI" means that PHI of Covered Entity which is transmitted by Electronic Media (as defined in the HIPAA Privacy and Security Rule) or maintained in Electronic Media.
- (d) Individual means the person who is the subject of PHI, and shall include a person who qualifies under the Privacy Rule as a personal representative of the Individual.
- (e) Unsecured Protected Health Information means PHI that is not rendered unusable, unreadable, or indecipherable to unauthorized persons through the use of a technology or methodology specified by the Secretary in the guidance issued under section 13402(h)(2) of Pub. L. 111-5 on the HHS website.

2. Responsibilities of Business Associate.

- (a) Prohibition on Unauthorized Use or Disclosure of PHI. Business Associate shall not use or disclose any PHI received from or on behalf of Covered Entity except as permitted or required by the Agreement or this Agreement, as Required by Law, or as otherwise authorized in writing by Covered Entity.
- (b) Minimum Necessary. Business Associate shall not request, use or disclose more than the minimum amount of PHI necessary to accomplish the purpose of the Use, Disclosure, or request.
- (c) Use and Disclosure of PHI. Except as described in Section 4, Business Associate may access, transmit, maintain, retain, modify, record, store, destroy or otherwise hold, use or disclose PHI only for the following purposes(s):



- (i) *[List Business Associate's permitted uses and disclosures here, or incorporate by reference an attached Exhibit where the uses and disclosures are described.]*
- (d) Use of PHI for Business Associate's Operations. Business Associate may use and/or disclose PHI it creates for, or receives from, Covered Entity to the extent necessary for Business Associate's proper management and administration, or to carry out Business Associate's legal responsibilities, only if:
- (i) The Disclosure is Required by Law; or
 - (ii) Business Associate obtains reasonable assurances, evidenced by written contract, from any person or organization to which Business Associate shall disclose such PHI that such person or organization shall:
 - [a] hold such PHI in confidence and use or further disclose it only for the purpose for which Business Associate disclosed it to the person or organization, or as Required by Law; and
 - [b] notify Business Associate, who shall in turn promptly notify Covered Entity, of any occurrence which the person or organization becomes aware of in which there was a privacy or security incident and/or the confidentiality of such PHI was breached.
- (e) De-identification of PHI.
- (i) Creation and Use of De-identified Data. In the event Business Associate wishes to de-identify PHI, it must first submit its proposed plan for accomplishing the conversion to Covered Entity for Covered Entity's approval, which shall not be unreasonably withheld provided such conversion meets the requirements of 45 CFR § 164.514. Business Associate may use de-identified PHI only as directed or otherwise agreed to by Covered Entity.
 - (ii) Re-identification Prohibited. Unless otherwise agreed upon by the parties, in the event that Covered Entity provides Business Associate with de-identified PHI, Business Associate shall not be given access to, nor shall Business Associate attempt to develop on its own, any keys or codes that can be used to re-identify the data.
- (f) Safeguarding of PHI.
- (i) Business Associate shall use appropriate safeguards and comply with Subpart C of 45 CFR Part 164, Security Standards for the protection of Electronic Protected Health Information, with respect to ePHI, to prevent access, use, or disclosure of ePHI other than as provided for by this Agreement.



- (ii) To the extent the Business Associate is to carry out one or more of Covered Entity's obligation(s) under the Privacy Rule, Business Associate shall comply with the requirements of Subpart E that apply to the Covered Entity in the performance of such obligation(s). This includes using appropriate safeguards to prevent inappropriate and/or unauthorized access, use, or disclosure of PHI.
- (iii) Business Associate shall review and modify its privacy and security safeguarding measures as needed to continue providing reasonable and appropriate protection of PHI.
- (iv) Business Associate shall maintain documentation of privacy and security safeguarding measures as required by HIPAA.
- (v) Business Associate shall cooperate in good faith in response to any reasonable requests from Covered Entity to discuss, review, inspect, or audit Business Associate's safeguards.
- (g) Subcontractors. Business Associate agrees that it will require each of its subcontractors who have access to the PHI of Rock County clients to enter into a business associate agreement drafted by the Business Associate to ensure that the subcontractor fully complies with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Business Associate shall ensure that all such Subcontractors that create, receive, maintain, or transmit PHI will implement reasonable and appropriate safeguards to protect such PHI.
- (h) No Off-Shore Activities. Absent prior written approval of Covered Entity, Business Associate shall neither provide nor transmit Covered Entity's PHI, for any purpose, to any person or entity located outside the geographic boundaries of the United States, including employees, agents or other representatives of that person or entity. Absent prior written approval of Covered Entity, Business Associate shall neither provide nor facilitate access to Covered Entity's PHI for any person or entity located outside the geographic boundaries of the United States including employees, agents or other representatives of that person or entity.
 - (i) Compliance with Electronic Transactions and Code Set Standards. If Business Associate conducts any Standard Transaction for, or on behalf, of Covered Entity, Business Associate shall comply, and shall require any Subcontractor conducting such Standard Transaction to comply, with each applicable requirement of Title 45, Part 162 of the Code of Federal Regulation. Business Associate shall not enter into, or permit its Subcontractors to enter into, any Agreement in connection with the conduct of Standard Transactions for or on behalf of Covered Entity that:
 - (ii) Changes the definition, Health Information condition, or use of a Health Information element or segment in a Standard;



- (iii) Adds any Health Information elements or segments to the maximum defined Health Information Set;
 - (iv) Uses any code or Health Information elements that are either marked "not used" in the Standard's Implementation Specification(s) or are not in the Standard's Implementation Specifications(s); or
 - (v) Changes the meaning or intent of the Standard's Implementations Specification(s).
- (i) Access to PHI. At the direction of Covered Entity or an Individual, Business Associate agrees to provide access to any PHI held by Business Associate, which Covered Entity has determined to be part of Covered Entity's Designated Record Set, in the time and manner designated by Covered Entity. Further, Business Associate shall grant Individuals access to an electronic copy of PHI maintained electronically in that Individual's Designated Record Set in accordance with 45 CFR § 164.524(c). Business Associate also shall provide or transmit the copy of PHI to a third party if directed in writing to do so by the Individual or Covered Entity. This access will be provided to the Individual, Covered Entity or, as directed by Covered Entity, to an Individual, in order to meet the requirements under the Privacy Rule.
- (j) Amendment or Correction to PHI. At the direction of Covered Entity, Business Associate agrees to amend or correct PHI held by Business Associate, which Covered Entity has determined to be part of Covered Entity's Designated Record Set, in the time and manner designated by Covered Entity.
- (k) Reports of Nonpermitted Uses or Disclosures, Security Incidents or Breaches.
- (i) Reports of Nonpermitted Use or Disclosure. Business Associate agrees to promptly report to Covered Entity any Use or Disclosure of the PHI not provided for by this Agreement and cooperate with Covered Entity in its investigation of such event.
 - (ii) Reports of Security Incidents. For purposes of this Section, "Security Incident" shall have the same meaning as "Security Incident" in 45 CFR § 164.304. Business Associate agrees to promptly notify Covered Entity of any Security Incident involving PHI of which it becomes aware and cooperate with Covered Entity in the investigation. Business Associate will report attempted but unsuccessful Security Incidents that do not result in any unauthorized access, Use, Disclosure, modification or destruction of PHI, or interference with an information system at Covered Entity's request, at least annually even in the absence of the Covered Entity's request.
 - (iii) Reports Related to Potential Breach of Unsecured PHI.

[a] Following the discovery of a Breach of Unsecured PHI, Business Associate shall notify Covered Entity of the Breach. Such notification shall be made



without unreasonable delay after discovering the Breach, but no later than sixty (60) calendar days after its discovery.

[b] Business Associate's notice shall include, to the extent possible, the identification of each Individual whose Unsecured PHI has been, or is reasonably believed by the Business Associate to have been, accessed, acquired, used, or disclosed during or as a result of the Breach. Business Associate shall also provide Covered Entity with at least the following information: a description of the Breach, including the date of Breach and the date of discovery of the Breach, if known; a description of the types of Unsecured PHI involved in the Breach; any steps Individuals should take to protect themselves from potential harm resulting from the Breach; a brief description of what Business Associate is doing to investigate the Breach, to mitigate harm to Individuals, and to protect against any further Breaches; and any other information requested by Covered Entity related to the Breach. Business Associate shall promptly supplement such notice with additional information as it becomes available, even if such information becomes available after Individuals have been notified of the Breach.

[c] Business Associate agrees to cooperate with Covered Entity in the investigation of a Breach of Unsecured PHI and to cooperate with and participate in, to the extent requested by Covered Entity, the notification of Individuals, the media, and the Secretary of any Breach of Unsecured PHI.

[d] In the event that: (i) a Breach of Unsecured PHI occurs because of the action or inaction of Business Associate, its employees, agents, representatives, or Subcontractors; or (ii) a Breach occurs involving Unsecured PHI in Business Associate's possession, or PHI created, maintained, transmitted, or received by Business Associate or its employees, agents, representatives, or Subcontractors, Business Associate agrees that Covered Entity may, in its sole discretion, require Business Associate to provide such notification as may be required of Covered Entity by 45 CFR §§ 164.404, 164.406, and 164.408. Covered Entity shall have the right to review, direct, and approve or reject the contents or manner of such notification.

(l) Mitigation. Business Associate agrees to mitigate, to the extent practicable, any harmful effect that is known to Business Associate of a Use or Disclosure of PHI by Business Associate in violation of the requirements of this Agreement.

(m) Tracking and Accounting of Disclosures. So that Covered Entity may meet its accounting obligations under the Privacy Rule, Business Associate agrees to document such disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 CFR § 164.528. For each Disclosure of PHI that Business Associate makes to Covered Entity or to a third party that is subject to Disclosure under



45 CFR § 164.528, Business Associate will record (i) the Disclosure date, (ii) the name and (if known) address of the person or entity to whom Business Associate made the Disclosure, (iii) a brief description of the PHI disclosed, and (iv) a brief statement of the purpose of the Disclosure. For repetitive disclosures which Business Associate makes to the same person or entity, including the Covered Entity, for a single purpose, Business Associate may provide (i) the Disclosure information for the first of these repetitive disclosures, (ii) the frequency, duration or number of these repetitive disclosures, and (iii) the date of the last of these repetitive disclosures. Business Associate will make this log of Disclosure information available to the Covered Entity within five (5) business days of the Covered Entity's request. Business Associate must retain the Disclosure information for the six-year period preceding Covered Entity's request for the Disclosure information.

- (n) Audit. For purposes of determining Business Associate's or Covered Entity's compliance with HIPAA, upon request of Covered Entity or the Secretary of Health and Human Services, Business Associate shall: (i) make its HIPAA policies and procedures, related documentation, records maintained, and any other relevant internal practices and books relating to the Use and Disclosure of PHI, available to the Secretary of Health and Human Services or to Covered Entity and (ii) provide reasonable access to Business Associate's facilities, equipment, hardware and software used for the maintenance or processing of PHI. Business Associate shall promptly notify Covered Entity of communications with the Secretary regarding PHI and shall provide Covered Entity with copies of any information Business Associate has made available to the Secretary under this Section 2 of the Agreement.
- (o) Response to Subpoena. In the event Business Associate receives a subpoena or similar notice or request from any judicial, administrative or other party which would require the production of PHI received from, or created for, Covered Entity, Business Associate shall promptly forward a copy of such subpoena, notice or request to Covered Entity to afford Covered Entity the opportunity to timely respond to the demand for its PHI as Covered Entity determines appropriate according to its state and federal obligations.

3. Covered Entity's Obligations.

- (a) Notice of Privacy Practices. Covered Entity shall notify Business Associate of any limitation in its Notice of Privacy Practices, to the extent such limitation affects Business Associate's permitted Uses or Disclosures.
- (b) Individual Permission. Covered Entity shall notify Business Associate of changes in, or revocation of, permission by an Individual to Use or disclose PHI, to the extent such changes affect Business Associate's permitted Uses or Disclosures.
- (c) Restrictions. Covered Entity shall notify Business Associate of any restriction in the Use or Disclosure of PHI to which Covered Entity has agreed, to the extent such restriction affects Business Associate's permitted Uses or Disclosures.



- (d) Requests. Covered Entity shall not request Business Associate to Use or disclose PHI in any manner that would not be permissible under the Privacy Rule if used or disclosed by the Covered Entity.

4. Term and Termination; Effect of Termination.

- (a) Term. This Agreement shall take effect upon the Effective Date and shall remain in effect until all PHI is returned to Covered Entity or destroyed in accordance with the terms of this Agreement.

- (b) Termination. If either party reasonably determines in good faith that the other party has materially breached any of its obligations under this Agreement, the nonbreaching party shall have the right to:

- (i) Exercise any of its rights to reports, access and inspection under this Agreement;
- (ii) Require the breaching party to submit to a plan of monitoring and reporting, as the nonbreaching party may determine necessary to maintain compliance with this Agreement;
- (iii) Provide the breaching party with a 30 day period to cure the breach; and/or
- (iv) Terminate this Agreement immediately.

- (c) Before exercising any of these options, nonbreaching party Entity shall provide written notice to breaching party describing the violation and the action it intends to take.

- (d) Effect of Termination; Return or Destruction of PHI. Upon termination, cancellation, expiration, or other conclusion of the Agreement, Business Associate shall, and shall ensure its Subcontractors that possess PHI or data derived from PHI ("Related Data") chose and fulfill one of the following options with respect to such PHI and Related Data:

- (i) Return PHI, and any Related Data, to Covered Entity in whatever form or medium that Business Associate received from or created on behalf of Covered Entity. In such case, no copies of such PHI and Related Data shall be retained. PHI and Related Data shall be returned as promptly as possible, but not more than thirty (30) days after the effective date of the conclusion of this Agreement or the underlying Agreement. Within such thirty (30) day period, Business Associate shall certify on oath in writing to Covered Entity that such return has been completed.
- (ii) Destroy the PHI, and any Related Data, using technology or a methodology that renders the PHI, or Related Data, unusable, unreadable, or undecipherable to unauthorized individuals as specified by HHS in its guidance at <http://www.hhs.gov/ocr/privacy/hipaa/administrative/breachnotificationrule/brguidance.html>. Acceptable methods for destroying PHI or Related Data include:



(A) paper, film, or other hard copy media shredded or destroyed in order that PHI or Related Data cannot be read or reconstructed; and (B) electronic media cleared, purged or destroyed consistent with the standards of the National Institute of Standards and Technology (NIST). Redaction as a method of destruction of PHI or Related Data is specifically excluded.

- (iii) If Business Associate believes that the return or destruction of PHI or Related Data is not feasible, Business Associate shall provide written notification of the conditions that make return or destruction infeasible. If the Covered Entity agrees that return or destruction is not feasible, Business Associate shall extend the protections of this Agreement to PHI and Related Data received from or created on behalf of Covered Entity, and limit further uses and disclosures of such PHI and Related Data, for so long as Business Associate maintains the PHI. If the Covered Entity does not agree that destruction is infeasible, the Business Associate must either return or destroy the PHI.

5. Miscellaneous.

- (a) Automatic Amendment. Upon the effective date of any amendment to HIPAA, the Privacy Rule or the Security Rule promulgated by HHS with regard to PHI, this Agreement shall automatically amend so that the obligations imposed on Business Associate remain in compliance with such regulations.
- (b) Interpretation. Any ambiguity in this Agreement shall be resolved in favor of a meaning that permits Covered Entity and Business Associate to comply with HIPAA.
- (c) Independent Contractor Status. The parties agree that in performing the Services and satisfying the obligations of this Agreement, Business Associate shall at all times be an independent contractor for Covered Entity and nothing in this Agreement shall be construed as creating an agency, employment, joint venture, partnership or other relationship. Covered Entity shall neither have nor exercise any control or direction over Business Associate. Business Associate shall avoid taking any action or making any representation or warranty whatsoever with respect to its relationship with Covered Entity which is inconsistent with its independent contractor status.
- (d) Conflicts. Any provision of the Underlying Agreement that is directly contradictory to one or more terms of this Agreement ("Contradictory Term") shall be superseded by the terms of this Agreement only to the extent of the contradiction, as necessary for the parties' compliance with HIPAA and to the extent that it is reasonably impossible to comply with both the Contradictory Term and the terms of this Agreement.
- (e) Integration. This Agreement contains the entire understanding between the parties hereto relating to the subject matter herein and shall supersede any other oral or written agreements, discussions and understandings of every kind and nature, including any provision in any services agreement.



- (f) Waiver. No delay or failure of either party to exercise any right or remedy available hereunder, at law or in equity, shall act as a waiver of such right or remedy, and any waiver shall not waive any subsequent right, obligation, or default.
- (g) Indemnification. Business Associate agrees that it will defend, indemnify and hold Rock County harmless against all claims brought against Rock County arising out of the negligent or intentional violation of HIPAA by Business Associate's subcontractors, their officers, agents, and employees.

IN WITNESS WHEREOF, each of the undersigned has caused this Addendum to be duly executed in its name and on its behalf.

COVERED ENTITY

BUSINESS ASSOCIATE

By: _____

By: _____

Title: _____

Title: _____

Date: _____

Date: _____

**Rock Haven
RESIDENT COUNCIL MEETING
November 18, 2014**

Members Present:

Ramon Ojeda
Tom Hahn
Beulah Rudolph

Wandalee Heimel
Sharon Barnes
Delores Geogens

Jean Dean
Lillian Frayer
Ruth Dahl

Maxine Rockstead

Others: Theresa Talbert SW
Gail Sullivan, SW

Sue Lewiston AD
Jim Haseman Volunteer
Ombudsmen

BTC Student

Meeting called to order – Beulah Rudolph

Pledge of Allegiance Recited – All Members

Reading of Last Meeting Minutes –Tom Hahn

Treasurer's Report – Ramon Ojeda

Deposits– Nov. \$625.31

Expenses – \$139.00

Balance -- \$4975.79

General Announcements: There were no new members to introduce to the group

Old Business: There was none.

New Business:

- Health Services Committee Report: There was no update to share as the group was meeting the next day.
- Maintenance concerns: There were none.
- Upcoming special events for the month were announced to the group.
- Educational Topic: Results of the Satisfaction Survey was shared with those present.
- Nomination of Officers: Jean Dean withdrew her name prior to voting. The following were elected: President: Beulah R., Vice President Sheila T, Secretary Tom H. & Treasurer Lillian F.
- There were no additional questions or concerns & meeting was adjourned to play bingo.

Next meeting: Tuesday, Dec 16 @ 10:15 am –in the Social Room & Officers will meet on Friday, Dec. 12 in the conference room on Limestone Court @ 10:00 am

2014 PATIENT DAYS FOR ROCK COUNTY HEALTH CARE CENTER

		ACTUAL		PATIENT DAYS BUDGET		OVER/UNDER		% OVER/UNDER		ACTUAL		PATIENT DAYS BUDGET		OVER/UNDER		% OVER/UNDER	
		MTD	YTD	MTD	YTD	MTD	YTD	MTD	YTD	MTD	YTD	MTD	YTD	MTD	YTD	MTD	YTD
LIMESTONE COURT	MEDICARE	42	3148	210	2338	-168	810	-80.00	34.64	42	3148	210	2338	-168	810	-80.00	34.64
	TOTAL	42	3148	210	2338	-168	810	-80.00	34.64	42	3148	210	2338	-168	810	-80.00	34.64
	HOSPICE	42	673	60	668	-18	5	-30.00	0.75	42	673	60	668	-18	5	-30.00	0.75
	TOTAL	42	673	60	668	-18	5	-30.00	0.75	42	673	60	668	-18	5	-30.00	0.75
	MEDICAL ASSISTANCE	1261	14037	1530	17034	-269	-2997	-17.58	-17.59	1261	14037	1530	17034	-269	-2997	-17.58	-17.59
	TOTAL	1261	14037	1530	17034	-269	-2997	-17.58	-17.59	1261	14037	1530	17034	-269	-2997	-17.58	-17.59
	PRIVATE PAY	142	2068	120	1336	22	732	18.33	54.79	142	2068	120	1336	22	732	18.33	54.79
	TOTAL	142	2068	120	1336	22	732	18.33	54.79	142	2068	120	1336	22	732	18.33	54.79
TOTAL LIMESTONE COURT		1487	19926	1920	21376	-433	-1450	-22.55	-6.78	1487	19926	1920	21376	-433	-1450	-22.55	-6.78
SANDSTONE COURT	MEDICARE	94	1213	210	2338	-116	-1125	-55.24	-48.12	94	1213	210	2338	-116	-1125	-55.24	-48.12
	TOTAL	94	1213	210	2338	-116	-1125	-55.24	-48.12	94	1213	210	2338	-116	-1125	-55.24	-48.12
	HOSPICE	71	989	60	668	11	321	18.33	48.05	71	989	60	668	11	321	18.33	48.05
	TOTAL	71	989	60	668	11	321	18.33	48.05	71	989	60	668	11	321	18.33	48.05
	MEDICAL ASSISTANCE	1438	16764	1500	16700	-62	64	-4.13	0.38	1438	16764	1500	16700	-62	64	-4.13	0.38
	TOTAL	1438	16764	1500	16700	-62	64	-4.13	0.38	1438	16764	1500	16700	-62	64	-4.13	0.38
	PRIVATE PAY	102	1613	90	1002	12	611	13.33	60.98	102	1613	90	1002	12	611	13.33	60.98
	TOTAL	102	1613	90	1002	12	611	13.33	60.98	102	1613	90	1002	12	611	13.33	60.98
TOTAL SANDSTONE COURT		1705	20579	1860	20708	-155	-129	-8.33	-0.62	1705	20579	1860	20708	-155	-129	-8.33	-0.62

2014 PATIENT DAYS FOR ROCK COUNTY HEALTH CARE CENTER

	ACTUAL			PATIENT DAYS BUDGET			% OVER/UNDER			PATIENT DAYS BUDGET			% OVER/UNDER		
	MTD	MTD	MTD	MTD	MTD	MTD	YTD	YTD	YTD	YTD	YTD	YTD	YTD	YTD	YTD
TOTAL ROCK HAVEN															
MEDICARE	136	420	-284	420	-284	-67.62	4361	4676	-315	-6.74					
	SNF														
TOTAL	136	420	-284	420	-284	-67.62	4361	4676	-315	-6.74					
HOSPICE	113	120	-7	120	-7	-5.83	1662	1336	326	24.40					
	SNF														
TOTAL	113	120	-7	120	-7	-5.83	1662	1336	326	24.40					
MEDICAL ASSISTANCE	2699	3030	-331	3030	-331	-10.92	30801	33734	-2933	-8.69					
	SNF														
TOTAL	2699	3030	-331	3030	-331	-10.92	30801	33734	-2933	-8.69					
PRIVATE PAY	244	210	34	210	34	16.19	3681	2338	1343	57.44					
	SNF														
TOTAL	244	210	34	210	34	16.19	3681	2338	1343	57.44					
TOTAL ROCK HAVEN	3192	3780	-588	3780	-588	-15.56	40505	42084	-1579	-3.75					

2014 PATIENT DAYS FOR ROCK COUNTY HEALTH CARE CENTER

		AVERAGE DAILY PATIENTS				AVERAGE DAILY PATIENTS				
		ACTUAL MTD	BUDGET MTD	OVER/UNDER	% OVER/UNDER	ACTUAL YTD	BUDGET YTD	OVER/UNDER	% OVER/UNDER	
LIMESTONE COURT	MEDICARE	SNF	1.40	7.00	-5.60	-80.00	9.43	7.00	2.43	34.64
	TOTAL		1.40	7.00	-5.60	-80.00	9.43	7.00	2.43	34.64
	HOSPICE	SNF	1.40	2.00	-0.60	-30.00	2.01	2.00	0.01	0.75
	TOTAL		1.40	2.00	-0.60	-30.00	2.01	2.00	0.01	0.75
	MEDICAL ASSISTANCE	SNF	42.03	51.00	-8.97	-17.58	42.03	51.00	-8.97	-17.59
	TOTAL		42.03	51.00	-8.97	-17.58	42.03	51.00	-8.97	-17.59
	PRIVATE PAY	SNF	4.73	4.00	0.73	18.33	6.19	4.00	2.19	54.79
	TOTAL		4.73	4.00	0.73	18.33	6.19	4.00	2.19	54.79
TOTAL LIMESTONE COURT			49.57	64.00	-14.43	-22.55	59.66	64.00	-4.34	-6.78
SANDSTONE COURT	MEDICARE	SNF	3.13	7.00	-3.87	-55.24	3.63	7.00	-3.37	-48.12
	TOTAL		3.13	7.00	-3.87	-55.24	3.63	7.00	-3.37	-48.12
	HOSPICE	SNF	2.37	2.00	0.37	18.33	2.96	2.00	0.96	48.05
	TOTAL		2.37	2.00	0.37	18.33	2.96	2.00	0.96	48.05
	MEDICAL ASSISTANCE	SNF	47.93	50.00	-2.07	-4.13	50.19	50.00	0.19	0.38
	TOTAL		47.93	50.00	-2.07	-4.13	50.19	50.00	0.19	0.38
	PRIVATE PAY	SNF	3.40	3.00	0.40	13.33	4.83	3.00	1.83	60.98
	TOTAL		3.40	3.00	0.40	13.33	4.83	3.00	1.83	60.98
TOTAL SANDSTONE COURT			56.83	62.00	-5.17	-8.33	61.61	62.00	-0.39	-0.62

2014 PATIENT DAYS FOR ROCK COUNTY HEALTH CARE CENTER

		AVERAGE DAILY PATIENTS			AVERAGE DAILY PATIENTS					
		ACTUAL MTD	BUDGET MTD	OVER/UNDER	% OVER/UNDER	ACTUAL YTD	BUDGET YTD	OVER/UNDER	% OVER/UNDER	
TOTAL ROCK HAVEN	MEDICARE	SNF	4.53	14.00	-9.47	-67.62	13.06	14.00	-0.94	-6.74
		TOTAL	4.53	14.00	-9.47	-67.62	13.06	14.00	-0.94	-6.74
	HOSPICE	SNF	3.77	4.00	-0.23	-5.83	4.98	4.00	0.98	24.40
		TOTAL	3.77	4.00	-0.23	-5.83	4.98	4.00	0.98	24.40
	MEDICAL ASSISTANCE	SNF	89.97	101.00	-11.03	-10.92	92.22	101.00	-8.78	-8.69
		TOTAL	89.97	101.00	-11.03	-10.92	92.22	101.00	-8.78	-8.69
	PRIVATE PAY	SNF	8.13	7.00	1.13	16.19	11.02	7.00	4.02	57.44
		TOTAL	8.13	7.00	1.13	16.19	11.02	7.00	4.02	57.44
TOTAL ROCK HAVEN			106.40	126.00	-19.60	-15.56	121.27	126.00	-4.73	-3.75

ROCK HAVEN ADMISSIONS/DISCHARGES/CENSUS - 2014

ADMISSIONS					
	Limestone	Limestone	Sandstone	Sandstone	Total
	East	West	West	East	
January	6	8	1	5	20
February	5	3	2	1	11
March	5	6	3	4	18
April	8	10	3	3	24
May	8	6	2	3	19
June	8	5	0	5	18
July	8	7	2	3	20
August	6	6	2	4	18
September	11	10	3	3	27
October	1	2	0	0	3
November	2	2	0	0	4
December	5	6	0	4	15
Total	73	71	18	35	197

1/31/2014
2/28/2014
3/31/2014
4/30/2014
5/31/2014
6/30/2014
7/31/2014
8/31/2014
9/30/2014
10/31/2014
11/30/2014
12/31/2013

DISCHARGES/DEATHS					
	Limestone	Limestone	Sandstone	Sandstone	Total
	East	West	West	East	
January	4	3	2	6	15
February	4	3	2	1	10
March	6	9	4	3	22
April	8	9	2	4	23
May	7	7	2	3	19
June	8	4	1	5	18
July	7	6	1	2	16
August	6	7	3	4	20
September	6	6	4	3	19
October	2	6	1	2	11
November	3	2	2	0	7
December	5	6	0	4	15
Total	66	68	24	37	195

1/31/2014
2/28/2014
3/31/2014
4/30/2014
5/31/2014
6/30/2014
7/31/2014
8/31/2014
9/30/2014
10/31/2014
11/30/2014
12/31/2013

CENSUS					
	Limestone	Limestone	Sandstone	Sandstone	Total
	East	West	West	East	
January	32	32	32	31	127
February	32	32	32	31	127
March	30	29	31	32	122
April	29	30	32	30	121
May	30	29	32	30	121
June	30	30	31	30	121
July	31	31	32	31	125
August	31	29	32	31	123
September	32	31	31	31	125
October	28	25	30	29	112
November	28	23	28	29	108
December	32	32	31	31	126
Budget	32	31	32	31	126
Capacity*	32	32	32	32	128

1/31/2014
2/28/2014
3/31/2014
4/30/2014
5/31/2014
6/30/2014
7/31/2014
8/31/2014
9/30/2014
10/31/2014
11/30/2014
12/31/2013

*Downsize from 130 to 128 occurred 10/1/2012

Data as of 12:00pm on dates indicated