### **ROCK COUNTY, WISCONSIN**



Rock Haven P.O. Box 920 Janesville, Wisconsin 53547-0920 Phone 608-757-5000 Fax 608-757-5010

### HEALTH SERVICES COMMITTEE Wednesday, February 13, 2013 at 8 A.M. Rock Haven Ground Floor Social Room

#### **AGENDA**

- 1. Call to Order/Approval of Agenda
- 2. Approval of Minutes January 24, 2013
- 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 Replacement Facility Update
  - b. Information Item: Resident Council Minutes (copies will be provided)
  - c. Information Item: Complaint Survey of January 14, 2013
- 8. New Business
  - a. Action Item: Consulting Service Agreement with Dr. Ram Rao
  - b. Information Item: Annual Employee Wellness Screens will be held the week of February 11<sup>th</sup>.
- 9. Information Item: Reports
  - a. Census
  - b. Activities
    - 1) Senior Management Team
      - a. Planning for Move Day
      - b. Survey Readiness

Health Services Committee February 13, 2013 Page 2

- 2) Staff Education for February 2013
  - a. Mandatory AED (defibrillator) Training For RNs and LPNs
  - b. General Orientation For New Employees February 4 and 18
  - c. Mandatory CPR For RNs and LPNs
  - d. Mandatory Post Survey Meetings For All Staff
  - e. Mandatory Survey Readiness Inservices For All Staff
  - f. Mandatory Infection Control Inservices For All Staff
  - g. Quarterly Medical Staff Meeting
  - h. Quarterly Quality Assurance Committee Meeting
  - Quarterly Nurse Meetings With An Introduction to the New Welch Allen Vital Sign Machines
- 3) Conferences and Meetings Sherry Gunderson's Meetings for Leading Age Wisconsin Include:
  - a. Leading Age Region Meeting February 8 in Sun Prairie
  - b. Leading Age Board Budget and Finance Meeting February 27 in Deforest
  - c. Leading Age Region Meeting March 8 in Sun Prairie
  - d. Leading Age Board Meeting Wednesday, March 13 in Madison
  - e. Leading Age Budget and Finance Committee April 3 in Deforest
  - f. Leading Age Executive Committee- April 3 in Deforest
  - g. Leading Age Board Meeting April 4 in Deforest
  - h. Leading Age Region Meeting April 12 in Sun Prairie
  - i. Leading Age Spring Conference and Annual Meeting May1-3 in Waukesha
- 4) Resident Council Meeting Tuesday, February 12 at 10:15 am.
- c. Finance Dave Sudmeier
- 10. Next Meeting Date The next regular meeting of the Health Services Committee is scheduled for Wednesday, March 13 at 8 a.m.
- 11. Adjournment

SRG/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.

							(Secondary Common Commo	0 & 1. st. 7/4	
Rock County - Prod	duction	02/07/13		COMMITTEE	APPROVAL R	EPORT			Page 1
Account Number	Name	Approp	Yearly Pr riation Sp	rent bent Exp	YTD enditure		Unencumb Balance	Inv/Enc Amount	Total
3272607400-62171	AMBULANCE	7 P1202119-P0#	.000.00 3 12/31/12	34.6% -VN#02843	7,596.12 9 ACC	-5,169.09 ESS TRANSIT	4,572.97	251.90	
					CLOSING BA	LANCE	4.321.07		251.90
3272607400-62176		P1203012-P0#	.500.00 9 12/31/12	99.9% -VN#01455	11,738.43 0 MER	-242.50 CY HEALTH SYSTEM	4.07	308.07	
*** OVERDRAFT ***	transfer i	REGUIRED			CLOSING BA	LANCE	-304.00		308.07
3272607400-62189	OTHER MED SE	P1201234-P0#	12/31/12	-VN#04774	7 MOB	-11.348.01 ILEXUSA N HEALTH SYSTEMS	12,499.94	534.34 299,62	
					CLOSING BA	LANCE	11,665.98		833.96
3280008100-63109	OTHER SUPP/E	XP 11 P1200786-PO#	.400.00 2 12/31/12	25.6% -VN#02368	8,513.67 4 SUP	-5,591.11 PLY COMPANY	8,477.44	114.21	
					CLOSING BA	LANCE	8,363.23		114.21
3280008100-64000	MEDICAL SUPP	LIES 132 P1203103-P0#	.052.00 9 12/31/12	92.2% 12 -VN#05228	25,021.83 7 OMN	-3,202.09 ICARE MEDICAL SUPP	10,232.26 PLY SVCS	192.24	
					CLOSING BA	LANCE .	10.040.02		192.24
3280009300-64409	FURNISHINGS	11 P1203444-P0#	.000.00 4 12/31/12	3.0% -VN#01967	7,906.64 7 PHO	-3.170.95 ENIX TEXTILE CORP	6,264.31	4,992.39	
					CLOSING BA	LANCE	1,271.92		4.992.39
3280009500-64424						-223.90 ICS NATURAL FOOD N		193.95	
					CLOSING BA	LANCE	353.97		193.95
3280009700-62174	INTERNIST	91  P1201478-PO#	000.00 6 12/31/12			-7,680.02 SEY MD,H R	29,009.11	666,67	
					CLOSING BA	LANCE	28,342,44		666.67
3290009940-61920	PHYSICALS		500.00 1 12/31/12			-2,246.39 UPATIONAL HEALTH (		92.00	
					CLOSING BA	LANCE .	1,233,99		92.00

2012...

Rock County - Production

02/07/13

COMMITTEE APPROVAL REPORT

Page 2

Account Number

Name

Yearly Pront Appropriation Spent YTD Expenditure Encumb Amount Unencumb Balance Inv/Enc Amount

Total

ROCK HAVEN

PROG-TOTAL-PO

7,645.39

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$7,645.39 INCURRED BY ROCK HAVEN. 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 COUNTY BOARD.

B. BILLS UNDER \$10,000 TO BE PAID.

C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

HEALTH SERVICES

COMMITTEE APPROVES THE ABOVE. COM-APPROVAL

DEPT-HEAD

FEB 1 3 2013

DATE

CHAIR

Rock County - Pro	duction 02/07/13	3 COMMITTEE .	APPROVAL REPORT	2013	Page 1
Account Number	Name Approp	Yearly Pront priation Spent Expe	YTD Encur nditure Amoun	mb Unencumb nt Balance	Inv/Enc Amount Total
3232500000-64904	SUNDRY EXPENSE EP1301112-PO	5,000.00 0.0% # 01/31/13 -VN#015763	0.00 0 ROCK COUNTY HEA	.03 4,999.97 ALTH CARE CENTER	306.40
			CLOSING BALANCE	4,693,57	306.40
3272607400-62189	OTHER MED SERV { P1300691-P0	5,500.00 0.0% # 01/31/13 -VN#042658	0.00 0 DEAN HEALTH SYS	.03 5,499.97 STEMS	60.05
		•	CLOSING BALANCE	5,439.92	60.05
3275007350-63109	OTHER SUPP/EXP 2 P13011110-P0 <del>/</del> P1301111-P0 <del>/</del>	2,500,00 0.0% # 02/06/13 -VN#022671 # 02/06/13 -VN#010233	0.00 0 CREATIVE FOREC, GARY GRIMM AND	.03 2.499.97 ASTING INC ASSOCIATES	60.00 35.95
		1	CLOSING BALANCE	2,404.02	95.95
3280008100-63100	OFC SUPP & EXP 5	5,000.00 12.0% # 01/31/13 -VN#044443	0.00 600 CRESCENT ELECTI	.01 4,399.99 RIC SUPPLY CO	764.81
			CLOSING BALANCE	3,635.18	764.81
3280008100-63109	OTHER SUPP/EXP 10 P1300694-PO4 P1300700-PO4 P1300712-PO4 P1300715-PO4	0,000.00 50.0% # 01/31/13 -VN#013780 # 01/31/13 -VN#025202 # 01/31/13 -VN#015764 # 01/31/13 -VN#016117	95.06 4,904 KMART CORP #429 MULLIGAN'S CELI ROCK COUNTY HEA SHOPKO INC #130	.97 4,999.97 55 LULAR AND PAGING ALTH CARE CENTER O	19.60 351.00 55.61 31.70
		ı	CLOSING BALANCE	4,542.06	457.91
3280008100-64000	MEDICAL SUPPLIES 125 P1300704-P0# P1300716-P0#	5,000.00 92,0% 1 # 01/31/13 -VN#052287 # 01/31/13 -VN#044709	6,140.06 98,860 OMNICARE MEDICA STRYKER MEDICA	.05 9,999.89 AL SUPPLY SVCS -	132.27 67.24
		1	CLOSING BALANCE	9,800.38	199.51
3280009200-62420	MACH & EQUIP RM 25 P1300688-P0#	5,000.00 0.0% # 01/31/13 -VN#010028		.02 24,999,98	2,001.08
		1	CLOSING BALANCE	22.998.90	2,001.08
3280009300-63109	OTHER SUPP/EXP 6 P1300715-P0#		0.00 2,000 SHOPKO INC #130		49.97
		J	CLOSING BALANCE	3,949.95	49.97
3280009300-63111	PAPER PRODUCTS 14 P1300980-P0#	4,000.00 92.8% # 01/31/13 -VN#039612	2,391.04 10,608 MESSNER INC	.96 1,000.00	437.55
		١	CLOSING BALANCE	562,45	437.55
3280009500-64200	TRAINING EXP	3,000.00 25.0%	0.00 2,000	.01 5,999,99	
				HS-ROCK HAVEN	DEPT, PAGE 1

Rock County - Production	02/07/13	COMMITTEE APP	ROVAL REPORT	2013	) ·	Page 2
Account Number Name	Yearl Appropriatio	y Prcnt YTD on Spent Expendi		Unencumb Balance	Inv/Enc Amount	Total
	P1301051-P0# 01/31 P1301086-P0# 02/06 P1301112-P0# 01/31	5/13 -VN#010953	COVE OF LAKE GENEVA, ARMSTRONG MEDICAL IN ROCK COUNTY HEALTH (	NDUSTRIES I	712.00 278.54 120.00	
		CLO:	SING BALANCE	4,889.45		1,110.54
3280009700-62174 INTERNI	ST 91,000.0 P1300711-PO# 01/31	00 76.9% 19.30 ./13 -VN#036794		21,000.00	1,400.00	
		CLO:	SING BALANCE	19,600.00		1,400.00
	ROCK	HAVEN PROG	G-TOTAL-PO		6,883.77	
B. BILLS UNDER \$10,000	LAIMS COVERING THE ITEMS FUNDED. THESE ITEMS ARE ES OVER \$10,000 REFERRED	S ARE PROPER TO BE TREATED AS TO THE COUNTY BOX	FOLLOWS ARD.			
HEALTH SERVICES FEB 1 3	2013 COMMITTEE APPRO	OVES THE ABOVE. CO	M-APPROVAL	- Harrison		EPT-HEAD

# Rock County Transfer Request - Over \$500

IIa	ilisiei Kequ	lest - Over \$500								
TO: FINANCE DIRECTOR Date	01/28/2013	Transfer No. 13-03								
Requested By Rock Haven		Sherry Gunderson								
Depart	tment	Department Head								
FROM:	AMOUNT	TO:	AMOUNT							
Account #: 32-8000-9700-61101		Account #: 32-8000-9700-62174								
Description: Medical Staff Prod Wages	\$105,988	Description: Medical Staff Internist	\$138,746							
Current Balance: \$105,988 SB 01/28/13										
Account #: 32-9000-9940-61400		Account #:								
Description: Employee Benefits FICA	\$7,823	Description:								
Current Balance: \$587,990 SB 1/28/13										
Account #: 32-9000-9940-61510		Account #:								
Description: Employee Benefits Retirement	\$10,415	Description:								
Current Balance: \$502,768 SB 1/28/13										
Account #: 32-9000-9940-61610		Account #:								
Description: Employee Benefits Health Ins	\$14,520	Description:								
Current Balance: \$2,881,526 SB1/28/13										
REASON FUNDS ARE AVAILABLE F	OR TRANSFE	R - <u>BE SPECIFIC</u>								
· · · · · · · · · · · · · · · · · · ·	alaried physici	oudgeted as a salaried physician in the a an, thus the remaining funds after his pa	_							
REASON TRANSFER IS NECESSAR										
With the retirement of Doctor Rao ther funding of more consultant internist tin		more funds in the internist budget to all medical needs of Rock Haven.	low for the							
Tanana or more concurrent intermet the		The state of the s								
FISCAL NOTE:		ADMINISTRATIVE NOTE:								
Sufficient funds are available for trans	fer.	Recommended.								

**DATE** 

Revised: 12/07/12

**COMMITTEE CHAIR** 

**REQUIRED APPROVAL** 

☑ Finance Committee

## CONSULTIVE SERVICE AGREEMENT ROCK HAVEN

This agreement is made is entered into between Rock Haven and Ram Rao, 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 provider of service 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 50 percent of this cost.
- (c) Maintain membership on the Medical, Dental and Podiatry Staff of the Rock Haven.
- (d) Before commencing provision of service, the named physician will provide results of recent TB skin testing. Provider will provide annual documentation thereafter.
- (e) Account for on-duty time on forms and according to procedure established by the County.
- (f) Cooperate in recovery of third party payments including assignment of claims as necessary.
- (g) Bill the County on letterhead stationery or as prescribed by the County. Such bills shall be signed.
- (h) Private practice is permitted; however, physician shall avoid conflicts of interest. The Medical, Dental, and Podiatry Staff may review possible conflicts of interest and recommend resolutions of them. Physicians are to file required conflict of interest statements.

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 providers 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 provider.

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. Provider shall furnish on-site consulting services for a maximum of 150 hours annually with an anticipated average of 15 hours per week as relief physician for Dr. West.

Provider 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 <u>\$150</u> per evening. Holiday and weekend call reimbursement at the rate of <u>\$275</u> per day.

In connection with the performance of work under this contract, the Provider agrees not to discriminate against any patient or resident in the provision of service. The Provider 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 Provider further agrees to take affirmative action to ensure equal employment opportunities. The Provider agrees to post in a conspicuous place, available to employees and applicant for employment, notices to be provided by the Provider setting forth the provisions of the non-discrimination clause.

Provider, in the conduct of its responsibilities under this Agreement, may have access to information which 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 March 1, 2013 and remain in effect until December 31, 2013 at which time it will automatically renew for one-year, ending December 31, 2014. Termination of this agreement shall occur upon thirty (30) days written notice by either party.

SIGNED F	OR ROCK HAVEN	SIGNED FOR THE SERVICE PROVIDER
Sherry R. O	Gunderson ome Administrator	Ram Rao, M.D.
Date:	· :	Date:
Address:	P.0. Box 920 Janesville, WI 53547-0920	Address:  Janesville, WI
O		

RAO 2013

# Rock Haven Admissions/Discharges/Census - 2012

		ADMISSIONS			1
	CCU	Dementia	CMI/GP	Total	1
January	3	1	4	8	1
February	6	1	6	13	1
March	8	4	4	16	1
April	2	5	8	15	1
May	7	5	3	15	1
June	2	5	3	10	1
July	5	5	3	13	1
August	5	3	6	14	1
September	8	2	2	12	1
October	8	4	2	14	1
November	3	5	5	13	1
December	4	3	2	9	1
Total	61	43	48	152	1

DISCHARGES/DEATHS										
	CCU	Dementia	CMI/GP	Total						
January	4	2	2	8						
February	6	2	3	11						
March	10	4	4	18						
April	1	5	6	12						
May	6	7	2	15						
June	4	6	6	16						
July	4	3	4	11						
August	6	3	3 7							
September	8	2	2	12						
October	7	6	4	16	1					
November	2	3	2	7.	1					
December	7	4	6	17	1					
Total	65	46	48	159						

1/31/2012 2/29/2012	•
<del>-3/31/2012</del> 4/30/2012	•
5/31/2012	
6/30/2012 7/31/2012	•
8/31/2012	•
9/30/2012	•
10/31/2012 11/30/2012	
12/31/2012	

		CENSUS		
	Total			
January	39	44	43	126
February	42	43	43	128
March	40	43	43	126
April	41	44	44	129
Мау	42	44	43	129
June	41	41	41	123
July	42	42	42	126
August-	40	41	42	123
September	40	41	42	123
October	41	40	40	121
November	42	43	42	127
December	40	40	39	119
Budget	41	43	43	127
Capacity*	42	43	43	128

2/29/2012 3/31/2012 4/30/2012 5/31/2012 6/30/2012 7/31/2012 8/31/2012 10/31/2012 11/30/2012 12/31/2012

1/31/2012

<sup>\*</sup>Downsize from 156 to 130 occurred 6/1/07

<sup>\*</sup>Downsize from 130 to 128 occurred 10/1/2012

December 2012			2012 PATIE	2012 PATIENT DAYS FOR ROCK HAVEN	ROCK HA	VEN				
			۵	DATIENT DAVS			۵	DATIENT DAVE		
-			ACTUAL MTD		OVER/ -UNDER	% OVER/ -UNDER	ACTUAL YTD	BUDGET YTD	OVER/ -UNDER	% OVER/ -UNDER
MEADOW PLACE	MEDICARE	SNF	104	217	-113	-52.07	1986	2562	-576	-22.48
	· · · · · ·	TOTAL	104	217	-113	-52.07	1986	2562	-576	-22.48
	HOSPICE	SNF					6		တ	
		TOTAL				<del> </del>	Ø		G	
	MEDICAL ASSISTANCE	E SNF	1071	930	141	15.16	11395	10980	415	3.78
	191	TOTAL	1071	930	141	15.16	11395	10980	415	3.78
	PRIVATE PAY	SNF	79	69	4	-15.05	1487	1098	389	35,43
. •		TOTAL	79	8	4-	-15.05	1487	1098	389	35.43
TOTAL MEADOW PLACE	* #.	· · · .	1254	1240	4	1.13	14877	14640	237	1.62
HARBOR WAY	MEDICARE	SNF	63	31	32	103.23	764	366	398	108.74
	·••	TOTAL	63	31	32	103.23	764	366	398	108.74
	HOSPICE	SNF		. 31	-33	-100.00	245	366	-121	-33.06
e de la companya de l		TOTAL		31	<del>လ</del> ု	-100.00	245	366	-121	-33.06
,	MEDICAL ASSISTANCE	E SNF	1231	1209	52	1.82	13958	14274	-316	-2.21
۰۰.		TOTAL	1231	1209	52	1.82	13958	14274	-316	-2.21
	PRIVATE PAY	SNF		63	-63	-100.00	462	1098	-636	-57.92
•	•	TOTAL		66	နှ	-100.00	462	1098	-636	-57.92
TOŢAL HĄRBOR WAY			1294	1364	-70	-5.13	15429	16104	-675	4.19
				·						
	·			Page 1 of 2	2					

	<b>.</b>													• •							
	% OVER/		:	-72.54	-72.54	-1.06	-1.06	-30.69	-30.69	-1.09	22.78	22.78	-58.56	-58.56	-0.13	-0.13	-17.73	-17.73	-1.31		
	OVER/ -UNDER	845	845	-531	-531	-148	-148	-337	-337	-171	299	299	-643	-643	-49	49	-584	-584	609-		
	PATIENT DAYS BUDGET YTD			732	732	13908	13908	1098	1098	15738	2928	2928	1098	1098	39162	39162	3294	3294	46482		
	ACTUAL YTD	845	845	201	201	13760	13760	761	761	15567	3595	3595	455	455	39113	39113	2710	2710	45873		
			· .					• •				Sec.		No.	•	٠.					
Ē	% OVER/ -UNDER		1111 × 11	-100.00	-100.00	-11.38	-11.38	81.72	81.72	-3.00	-0.40	-0.40	-100.00	-100.00	0.87	0.87	-11.11	-11.11	-2.44		
ROCK HAN	OVER/ -UNDER	8	. 8	-62	-62	-134	-134	9/	76	-40	<del>\</del> 7	<b>\frac{\frac{1}{1}}{1}</b>	<b>€6</b> -33	<b>£6−</b> 30	29	29	-31	34	96-		
2012 PATIENT DAYS FOR ROCK HAVEN	PATIENT DAYS BUDGET MTD			62	62	1178	1178	93	93	1333	248	248	88	66	3317	3317	279	279	3937		Page 2 of 2
2012 PATI	ACTUAL MTD	8	80			1044	1044	169	169	1293	247	247			3346	3346	248	248	3841		
		SNF	TOTAL	SNF	TOTAL	SNF	TOTAL	SNF	TOTAL		SNF	TOTAL	SNF	TOTAL	SNF	TOTAL	SNF	TOTAL			
						SISTANC			•			· · ·			SISTANCE					•	
		MEDICARE		HOSPICE		MEDICAL ASSISTANCE		PRIVATE PAY			MEDICARE		HOSPICE		MEDICAL ASSISTANCE		PRIVATE PAY				
December 2012		· -	·						:	ANE	HAVEN	r titi			٠.٠	÷		٠.	1AVEN		
Decemi		GLEN LANE								TOTAL GLEN LANE	TOTAL ROCK HAVEN								TOTAL ROCK HAVEN		
				•					•	,		٠									

	TS % OVER/ -UNDER	-22.48	-22.48			3.78	3.78	35.43	35.43	1.62	·	108.74	108.74	-33.06	-33.06	-2.21	-2.21	-57.92	-57.92	4.19		
	Y PATIENT OVER/ -UNDER	-1.57	-1.57	0.02	0.02	1.13	1.13	1.06	1.06	0.65		1.09	1.09	-0.33	-0.33	-0.86	-0.86	-1.74	-1.74	-1.84		
	AVERAGE DAILY PATIENTS AL BUDGET OVER/ % TD YTD -UNDER -(	7.00	2.00			30.00	30.00	3.00	3.00	40.00		1.00	1.00	1.00	1.00	39.00	39.00	3.00	3.00	44.00		
	AVEF ACTUAL YTD	5.43	5.43	0.02	0.02	31.13	31.13	4.06	4.06	40.65		2.09	2.09	0.67	0.67	38.14	38.14	1.26	1.26	42.16		
										÷		· ·.			7.11		٠.					
2012 PATIENT DAYS FOR ROCK HAVEN	rs % over/ -under	-52.07	-52.07			15.16	15.16	-15.05	-15.05	1.13		103.23	103.23	-100.00	-100.00	1.82	1.82	-100.00	-100.00	-5.13	 	
	AVERAGE DAILY PATIENTS AL BUDGET OVER/ % TD MTD -UNDER -L	-3.65	-3.65			4.55	4.55	-0.45	-0.45	0.45		1.03	1.03	-1.00	-1.00	0.71	0.71	-3.00	-3.00	-2.26		Page 1 of 2
IENT DAY	RAGE DAII. BUDGET MTD	7.00	7.00			30.00	30.00	3.00	3.00	40.00		1.00	1.00	1.00	1.00	39.00	39.00	3.00	3.00	44.00		Page
2012 PAT	AVE ACTUAL MTD	3.35	3.35			34.55	34.55	2.55	2.55	40.45		2.03	2.03			39.71	39.71			41.74		
		SNF	TOTAL	SNF	TOTAL	CE SNF	TOTAL	SNF	TOTAL			SNF	TOTAL	SNF	TOTAL	CE SNF	TOTAL	SNF	TOTAL			
		MEDICARE		HOSPICE		MEDICAL ASSISTANCE		PRIVATE PAY	÷			MEDICARE		HOSPICE		MEDICAL ASSISTANCE		PRIVATE PAY				
December 2012		MEADOW PLACE								TOTAL MEADOW PLACE		HARBOR WAY	** : 				9 a			TOTAL HARBOR WAY	 ·	