



HEALTH SERVICES COMMITTEE
Wednesday, November 13, 2013 at 8 a.m.
Rock Haven Classroom in the Village Commons

AGENDA

1. Call to Order/Approval of Agenda
2. Approval of Minutes – October 9, 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. Family Council Meetings – Invites for November 19, 2013
8. New Business
 - a. Action Item: Waste Summary for Waste Collection Services
 - b. Action Item: Proposal Summary for Laundry Services
9. Information Item: Reports
 - a. Census
 - b. Activities
 - 1) Staff Education for November 2013
 - a. Responding to Behavioral Disturbances in Dementia Patients
 - b. Use of Psychotropic Medication
 - 2) Resident Council Meeting – Tuesday, October 8, 2013
 - c. Finance - Dave Sudmeier
10. Next Meeting Date - The next regular meeting of the Health Services Committee is scheduled for Wednesday, December 11, 2013 in the Classroom in the Village Commons.
11. Adjournment

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
32-3250-0000-64904	SUNDRY EXPENSE				
		P1301112	10/24/2013	ROCK COUNTY HEALTH CARE CENTE	75.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	5,000.00	3,942.42	75.00	75.00	907.58
				ROCK HAVEN PROG TOTAL	75.00
32-7260-7400-62189	OTHER MED SERV				
		P1300691	09/30/2013	DEAN HEALTH SYSTEMS	870.39
		P1300699	09/13/2013	MOBILEXUSA	1,203.35
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	5,500.00	5,685.39	2,073.74	2,073.74	(4,332.87)
				RH CONTRACT SERVICES T-18 PROG TOTAL	2,073.74
32-7500-7350-63109	OTHER SUPP/EXP				
		P1300715	11/01/2013	SHOPKO INC #130	106.79
		P1301112	10/24/2013	ROCK COUNTY HEALTH CARE CENTE	100.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	2,500.00	864.24	975.02	206.79	453.95
32-7500-7350-64005	REHAB SUPPLIES				
		P1300710	10/08/2013	PATTERSON MEDICAL	202.42
		P1303377	10/22/2013	S AND S WORLDWIDE	245.89
		P1303378	10/22/2013	NASCO	156.05
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	3,200.00	0.00	202.41	604.36	2,393.23
				RH-PROGRAM SERVICE ADMIN. PROG TOTAL	811.15
32-8000-8100-63109	OTHER SUPP/EXP				
		P1300712	10/09/2013	ROCK COUNTY HEALTH CARE CENTE	70.55
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	10,000.00	2,056.41	1,316.65	70.55	6,556.39
32-8000-8100-64000	MEDICAL SUPPLIES				
		P1300698	09/13/2013	MERCY ASSISTED CARE INC	32.61
		P1301612	09/26/2013	GULF SOUTH MEDICAL SUPPLY	2,685.49
		P1301949	10/16/2013	GRAINGER	27.36
		P1302396	10/22/2013	MEDLINE INDUSTRIES INC	1,235.87
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	125,000.00	112,202.92	10,989.55	3,981.33	(2,173.80)
				SUPPORT SERVICE MATERIALS PROG TOTAL	4,051.88
32-8000-9100-64105	GROCERIES				

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
		P1300712	10/14/2013	ROCK COUNTY HEALTH CARE CENTE	23.21
		P1303250	10/03/2013	TROPIC JUICES INC	1,527.75
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	160,727.00	132,819.41	24,991.23	1,550.96	1,365.40
SUPPORT SERVICE FOOD SERVICE PROG TOTAL				1,550.96	
32-8000-9200-62420	MACH & EQUIP RM				
		P1300202	09/25/2013	ASC1	147.63
		P1300693	10/11/2013	EZ WAY INC	659.35
		P1302078	10/08/2013	AMSAN LLC	98.00
		P1302825	09/30/2013	SELECT SOUND SERVICE INC	120.00
		P1303175	09/30/2013	GRAINGER	152.28
		P1303407	10/29/2013	FELIX STORCH INC	95.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	25,000.00	13,093.01	904.98	1,272.26	9,729.75
32-8000-9200-62450	GROUNDS IMPR R&M				
		P1302938	10/16/2013	DVORAK LANDSCAPE SUPPLY LLC	301.35
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	4,000.00	428.44	0.00	301.35	3,270.21
32-8000-9200-62463	FIRE ALARM				
		P1303178	10/21/2013	ABSOLUTE FIRE PROTECTION	1,620.00
		P1303343	10/10/2013	ABC FIRE AND SAFETY INC	347.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	1,600.00	3,093.89	1,620.00	1,967.00	(5,080.89)
32-8000-9200-62470	BLDG R & M				
		P1300237	09/23/2013	STATE ELECTRICAL SUPPLY INC	572.44
		P1302779	10/08/2013	SANIMAX LLC	480.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	800.00	10,323.19	572.44	1,052.44	(11,148.07)
32-8000-9200-63109	OTHER SUPP/EXP				
		P1300223	10/17/2013	JACK AND DICKS FEED AND GARDEN	234.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	0.00	2,196.35	980.99	234.00	(3,411.34)
SUPPORT SERVICE MAINTENANCE PROG TOTAL				4,827.05	
32-8000-9300-62164	DISPOSAL SERV				
		P1302698	09/30/2013	SHERMAN SANITATION SERVICES LL	511.40
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	20,500.00	15,342.85	2,723.54	511.40	1,922.21

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
32-8000-9300-63109	OTHER SUPP/EXP	P1300712	10/24/2013	ROCK COUNTY HEALTH CARE CENTE	6.33
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	6,000.00	3,600.98	1,270.68	6.33	1,122.01
32-8000-9300-63111	PAPER PRODUCTS	P1301612	10/17/2013	GULF SOUTH MEDICAL SUPPLY	599.10
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	21,000.00	16,240.40	4,442.93	599.10	(282.43)
32-8000-9300-63404	JANITOR/CLEANING	P1302078	09/30/2013	AMSAN LLC	1,415.55
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	15,000.00	12,920.68	1,432.82	1,415.55	(769.05)
32-8000-9300-64409	FURNISHINGS	P1301612	09/26/2013	GULF SOUTH MEDICAL SUPPLY	62.91
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	3,000.00	939.69	62.91	62.91	1,934.49
SUPPORT SERVICE ENVIRONMENTAL PROG TOTAL				2,595.29	
32-8000-9700-62174	INTERNIST	P1300711	10/31/2013	RAMSEY MD,H R	2,100.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	229,746.00	192,932.00	9,768.00	2,100.00	24,946.00
SUPPORT SERVICE MEDICAL STAFF PROG TOTAL				2,100.00	
32-9000-9930-62210	TELEPHONE	P1303383	10/01/2013	ABILITY NETWORK INC	681.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	21,000.00	13,594.03	680.99	681.00	6,043.98
GENERAL SERVICE TELEPHONE PROG TOTAL				681.00	
32-9000-9940-61920	PHYSICALS	P1300703	09/30/2013	OCCUPATIONAL HEALTH CENTER	567.10
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	1,500.00	1,685.00	567.10	567.10	(1,319.20)
GENERAL SERVICE EMP BENEFITS PROG TOTAL				567.10	

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 **\$19,333.17**

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: **NOV 13 2013**

Dept Head _____

Committee Chair _____

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/25/2013 Transfer No. 13-59
 Requested By Rock Haven Department Sue Prostko Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 32-8000-9500-62451 Description: Sup Serv Admin - Spec Assess Current Balance: \$2,500 SB	\$2,500	Account #: 32-8000-9500-64416 Description: Sup Serv Admin - Licenses	\$1,000
Account #: 32-9000-9940-61610 Description: Gen Serv Emp Ben - Health Ins Current Balance: \$1,149,249 SB	\$127,000	Account #: 32-9000-9940-61710 Description: Gen Serv Emp Ben - Wrk Comp	\$120,000
Account #: 32-9000-9940-61915 Description: Gen Serv Emp Ben - Certs/Lic Current Balance: \$3,000 SB	\$3,000	Account #: 32-9000-9940-61720 Description: Gen Serv Emp Ben - Unemploy	\$10,000
Account #: Description: Current Balance:		Account #: 32-9000-9940-63406 Description: Gen Serv Emp Ben - Uniforms	\$1,500

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Budgeted to cover State fines and we will not have any in 2013
 Budgeted vacant positions with family plans and more employees taking single or no insurance at all
 No charge to this account with licensing being charged to administration

REASON TRANSFER IS NECESSARY - BE SPECIFIC

All licenses charged here with none to employee benefits
 Account had been going down year to year, but has reversed for 2013 with more and higher Workers Compensation claims
 Terminated employees being able to collect unemployment
 All nursing, dietary, environment and materials employees receive uniform allowance as well as new hires upon hire and more turnover.

FISCAL NOTE:

Sufficient funds are available for transfer. *SB 10/25/13*

ADMINISTRATIVE NOTE:

Recommended. *SR 10-29-13*

REQUIRED APPROVAL

DATE

COMMITTEE CHAIR

Governing Committee _____
 Finance Committee _____

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/25/2013 Transfer No. 13-60
 Requested By Rock Haven Department Sue Prostko Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 32-9000-9940-61610 Description: Gen Serv Emp Ben - Health Ins Current Balance: \$1,022,249 SB	\$50,000	Account #: 32-8000-9700-62174 Description: Sup Serv Med Staff - Internist	\$50,000
Account #: Description: Current Balance:		Account #: Description:	
Account #: Description: Current Balance:		Account #: Description:	
Account #: Description: Current Balance:		Account #: Description:	

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Budgeted vacant positions with family plans and more employees taking single or no insurance at all

REASON TRANSFER IS NECESSARY - BE SPECIFIC

More need for physician coverage

FISCAL NOTE:

Sufficient funds are available for transfer. *SB 10/25/13*

ADMINISTRATIVE NOTE:

Recommended. *[Signature] 10-29-13*

REQUIRED APPROVAL

Governing Committee _____

Finance Committee _____

DATE

COMMITTEE CHAIR

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/25/2013 Transfer No. 13-61
 Requested By Rock Haven Department Sue Prostko Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 32-7260-7400-62179 Description: RH Contract Serv - Pharmacy Current Balance: \$50,000(see fiscal note) SB	\$50,000	Account #: 32-7260-7400-62176 Description: RH Contract Serv - Laboratory	\$4,000
Account #: 32-7260-7400-62171 Description: RH Contract Serv - Ambulance Current Balance: \$5,502 SB	\$2,500	Account #: 32-7260-7400-62180 Description: RH Contract Serv - P. Therapy	\$19,500
Account #: Description: Current Balance:		Account #: 32-7260-7400-62185 Description: RH Contract Serv - O. Therapy	\$19,500
Account #: Description: Current Balance:		Account #: 32-7260-7400-62186 Description: RH Contract Serv - S. Therapy	\$9,500

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Pharmacy expenses for Medicare A patients have been less than expected and budgeted.
 Ambulance expenses have been less than expected and budgeted.

REASON TRANSFER IS NECESSARY - BE SPECIFIC

Laboratory expenses for Medicare A patients have been higher than expected.
 Therapy expenses have been more than expected for Medicare A patients and have increased for Medicare B patients with the move to the new building.

FISCAL NOTE:

Sufficient funds available. There is a \$50,000 encumbrance decrease pending for 32-7260-7400-62179. *SB 10/28/13*

ADMINISTRATIVE NOTE:

Recommended. *[Signature]* 10-29-13

REQUIRED APPROVAL

DATE

COMMITTEE CHAIR

Governing Committee _____

Finance Committee _____

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/25/2013 Transfer No. 13-62
 Requested By Rock Haven Department Sue Prostko Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 32-7500-7350-64005 Description: RH Prog Serv - Rehab Supplies Current Balance: \$2,796 SB	\$2,000	Account #: 32-7260-7400-62189 Description: RH Cont Serv - Other Med Supl	\$3,500
Account #: 32-7500-7350-64300 Description: RH Prog Serv - Rec Therapy Current Balance: \$1,400 (see fiscal note) SB	\$1,400	Account #: 32-8000-8100-63100 Description: Sup Serv Mat - Office Supplies	\$2,000
Account #: 32-8000-8100-63109 Description: Sup Serv Mat - Other Supplies Current Balance: \$6,697(see fiscal note) SB	\$5,000	Account #: 32-8000-8100-64003 Description: Sup Serv Mat - Oxygen Supply	\$3,000
Account #: 32-8000-8200-63109 Description: Sup Serv Phar - Other Supplies Current Balance: \$5,100 SB	\$5,100	Account #: 32-8000-8100-64408 Description: Sup Serv Mat - Disposables	\$5,000

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Less need for rehab supplies with department realignment
 Cable TV cost less than budgeted
 Using supplies from inventory after move
 Pharmacy supplies less than budgeted

REASON TRANSFER IS NECESSARY - BE SPECIFIC

More requests for x-rays from physicians
 Higher office supply usage
 More medicare patients requiring oxygen
 More need for disposable diapers, wash cloths and such

FISCAL NOTE:

Encumbrance decreases pending. Sufficient funds will be available for transfer. *SB 10/24/13*

ADMINISTRATIVE NOTE:

Recommended. *BR 6-29-13*

REQUIRED APPROVAL

DATE

COMMITTEE CHAIR

Governing Committee _____

Finance Committee _____

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/25/2013 Transfer No. 13-63
 Requested By Rock Haven Department Sue Prostko Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 32-8000-8100-63101 Description: Sup Serv Mat - Postage Current Balance: \$2,590 SB	\$500	Account #: 32-8000-9200-63109 Description: Sup Serv Maint - Other Supply	\$5,500
Account #: 32-8000-9300-62163 Description: Sup Serv Env - Laundry Service Current Balance: \$10,000 (fiscal note) SB	\$10,000	Account #: 32-8000-9300-62110 Description: Sup Serv Env - Pest Control	\$1,000
Account #: 32-8000-9300-64409 Description: Sup Serv Env - Furnishings Current Balance: \$2,060 SB	\$1,500	Account #: 32-8000-9500-61300 Description: Sup Serv Admin - Per Diem	\$1,000
Account #: Description: Current Balance:		Account #: 32-8000-9500-63200 Description: Sup Serv Admin - Pub/Sub/Due	\$4,500

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Only use UPS as needed when called, versus old method of paying \$20 every two weeks to have them stop
 Sending less to be laundered at Aramark
 Replacing less furniture with move to new facility

REASON TRANSFER IS NECESSARY - BE SPECIFIC

Underestimated need for maintenance supplies with move to new facility
 Higher pest control due to need in two buildings prior to 5/13/2013
 More per diem with additional meetings related to new building
 More need to keep up with changing health care environment

FISCAL NOTE:

Sufficient funds available for transfer. An encumbrance decrease is pending for 32-8000-9300-62163 for \$10,000. *AB 10/25/13*

ADMINISTRATIVE NOTE:

Recommended. *SPK 10-29-13*

REQUIRED APPROVAL

DATE

COMMITTEE CHAIR

Governing Committee _____

Finance Committee _____

PURCHASE ORDER NUMBER P1300524 PEID 036664

PRE-APPROVED ENCUMBRANCE AMENDMENT FORM

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DATE 10/25/2013

DEPARTMENT Rock Haven

COMMITTEE Health Services

VENDOR NAME Safeway Pest Control

ACCOUNT NUMBER 32-8000-9300-62110

FUNDS DESCRIPTION Support Service Environmental Pest Control Services

AMOUNT OF INCREASE \$ 1,000

INCREASE FROM \$ 1,500 TO \$ 2,500

ACCOUNT BALANCE AVAILABLE \$ 1,100 (after transfer in of \$1,000) SB 10/28/13

REASON FOR AMENDMENT Higher pest control due to need in new building as well as continuation in old building until May 13, 2013 move.

APPROVALS

GOVERNING COMMITTEE _____
Chair _____ Date _____

FINANCE COMMITTEE _____
(If over \$10,000) Chair _____ Date _____

COUNTY BOARD _____
(If over \$10,000) Resolution # _____ Adoption Date _____

PURCHASE ORDER NUMBER P1300528 PEID 042015

PRE-APPROVED ENCUMBRANCE AMENDMENT FORM

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DATE 10/25/2013

DEPARTMENT Rock Haven

COMMITTEE Health Services

VENDOR NAME Sherman Sanitation Services

ACCOUNT NUMBER 32-8000-9300-62164

FUNDS DESCRIPTION Support Service Environmental Disposal Services

AMOUNT OF INCREASE \$ 2,500

INCREASE FROM \$ 13,500 TO \$ 16,000

ACCOUNT BALANCE AVAILABLE \$ 2,944 SB 11/05/13

REASON FOR AMENDMENT Higher disposal usage with new building and cleaning out of old building.

APPROVALS

GOVERNING COMMITTEE _____
Chair _____ Date _____

FINANCE COMMITTEE _____
(If over \$10,000) Chair _____ Date _____

COUNTY BOARD _____
(If over \$10,000) Resolution # _____ Adoption Date _____

PURCHASE ORDER NUMBER P1300523 PEID 035138

PRE-APPROVED ENCUMBRANCE AMENDMENT FORM

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DATE 10/25/2013

DEPARTMENT Rock Haven

COMMITTEE Health Services

VENDOR NAME Centrad Health Care Inc

ACCOUNT NUMBER 32-8000-8100-64003

FUNDS DESCRIPTION Support Service Materials Oxygen Supplies

AMOUNT OF INCREASE \$ 3,000

INCREASE FROM \$ 6,500 TO \$ 9,500

ACCOUNT BALANCE AVAILABLE \$ 3,000 (after transfer in of \$3,000) SB10/28/13

REASON FOR AMENDMENT Higher oxygen usage

APPROVALS

GOVERNING COMMITTEE _____
Chair Date

FINANCE COMMITTEE _____
(If over \$10,000) Chair Date

COUNTY BOARD _____
(If over \$10,000) Resolution # Adoption Date

PURCHASE ORDER NUMBER P1300509 PEID 014550

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DATE 10/25/2013

DEPARTMENT Rock Haven

COMMITTEE Health Services

VENDOR NAME Mercy Health Systems

ACCOUNT NUMBER 32-7260-7400-62176

FUNDS DESCRIPTION RH Contract Services T-18 Laboratory

AMOUNT OF INCREASE \$ 4,000

INCREASE FROM \$ 10,000 TO \$ 14,000

ACCOUNT BALANCE AVAILABLE \$ 4000 (after transfer in of \$4,000) SB 10/31/13

REASON FOR AMENDMENT Higher lab usage for T-18 patients

APPROVALS

GOVERNING COMMITTEE _____
Chair _____ Date _____

FINANCE COMMITTEE _____
(If over \$10,000) Chair _____ Date _____

COUNTY BOARD _____
(If over \$10,000) Resolution # _____ Adoption Date _____

PURCHASE ORDER NUMBER P1300511 PEID 015393

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DATE 10/25/2013

DEPARTMENT Rock Haven

COMMITTEE Health Services

VENDOR NAME Gulf South Medical Supply

ACCOUNT NUMBER 32-8000-8100-64408

FUNDS DESCRIPTION Support Service Materials Disposals

AMOUNT OF INCREASE \$ 5,000

INCREASE FROM \$ 70,000 TO \$ 75,000

ACCOUNT BALANCE AVAILABLE \$ 5,050 (after transfer in of \$5,000) SB 10/29/13

REASON FOR AMENDMENT Higher disposal usage

APPROVALS

GOVERNING COMMITTEE _____
Chair Date

FINANCE COMMITTEE _____
(If over \$10,000) Chair Date

COUNTY BOARD _____
(If over \$10,000) Resolution # Adoption Date

PURCHASE ORDER NUMBER P1301606 PEID 043983

PRE-APPROVED ENCUMBRANCE AMENDMENT FORM

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DATE 10/25/2013

DEPARTMENT Rock Haven

COMMITTEE Health Services

VENDOR NAME Rao, Ramachandra

ACCOUNT NUMBER 32-8000-9700-62174

FUNDS DESCRIPTION Support Service Medical Staff

AMOUNT OF INCREASE \$ 5,000

INCREASE FROM \$ 25,000 TO \$ 30,000

ACCOUNT BALANCE AVAILABLE \$ 64,145 (after transfer of \$50,000) SB 11/05/13

REASON FOR AMENDMENT Higher need for physician coverage

APPROVALS

GOVERNING COMMITTEE _____
Chair _____ Date _____

FINANCE COMMITTEE _____
(If over \$10,000) Chair _____ Date _____

COUNTY BOARD _____
(If over \$10,000) Resolution # _____ Adoption Date _____

PURCHASE ORDER NUMBER P1300520 PEID 032178

PRE-APPROVED ENCUMBRANCE AMENDMENT FORM

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DATE 10/25/2013

DEPARTMENT Rock Haven

COMMITTEE Health Services

VENDOR NAME Professional Medical Inc

ACCOUNT NUMBER 32-8000-8100-64000

FUNDS DESCRIPTION Support Service Materials Medical Supplies

AMOUNT OF INCREASE \$ 5,500

INCREASE FROM \$ 26,250 TO \$ 35,250

ACCOUNT BALANCE AVAILABLE \$ 5,788 SB 11/05/13

REASON FOR AMENDMENT Higher usage of medical supplies

APPROVALS

GOVERNING COMMITTEE _____
Chair _____ Date _____

FINANCE COMMITTEE _____
Chair _____ Date _____
(If over \$10,000)

COUNTY BOARD _____
Resolution # _____ Adoption Date _____
(If over \$10,000)

PURCHASE ORDER NUMBER P1300522 PEID 035083

PRE-APPROVED ENCUMBRANCE AMENDMENT FORM

This form must be used when adding funds to or changing an account number of a previously approved encumbrance. Please complete this form and e-mail to Susan Balog in Accounting (balog@co.rock.wi.us), Cheryl Mikrut in Accounting (mikrut@co.rock.wi.us) **and** Jodi Millis in Purchasing (jodi@co.rock.wi.us). Susan or Cheryl will forward on to your governing committee for approval. The Encumbrance and Purchase Order will be updated upon approval of all necessary committees and County Board (if amendment is over \$10,000).

DATE 10/25/2013

DEPARTMENT Rock Haven

COMMITTEE Health Services

VENDOR NAME MJ Care Inc

ACCOUNT NUMBER 32-7260-7400-62186

FUNDS DESCRIPTION RH Contract Services T-18 Speech Therapy

AMOUNT OF INCREASE \$ 9,500

INCREASE FROM \$ 40,000 TO \$ 49,500

ACCOUNT BALANCE AVAILABLE \$ 9,500 (after transfer in of \$9,500) SB 10/31/13

REASON FOR AMENDMENT Higher ST usage for T-18 patients

APPROVALS

GOVERNING COMMITTEE _____
Chair _____ Date _____

FINANCE COMMITTEE _____
(If over \$10,000) Chair _____ Date _____

COUNTY BOARD _____
(If over \$10,000) Resolution # _____ Adoption Date _____

PURCHASE ORDER NUMBER P1300521 PEID 032926

PRE-APPROVED ENCUMBRANCE AMENDMENT FORM

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DATE 10/25/2013

DEPARTMENT Rock Haven

COMMITTEE Health Services

VENDOR NAME Kalamber MD, Robert L

ACCOUNT NUMBER 32-8000-9700-62174

FUNDS DESCRIPTION Support Service Medical Staff

AMOUNT OF INCREASE \$ 15,000

INCREASE FROM \$ 40,000 TO \$ 55,000

ACCOUNT BALANCE AVAILABLE \$ 79,145 (after transfer of \$50,000) SB 11/05/13

REASON FOR AMENDMENT Higher need for physician coverage

APPROVALS

GOVERNING COMMITTEE _____
Chair Date

FINANCE COMMITTEE _____
(If over \$10,000) Chair Date

COUNTY BOARD _____
(If over \$10,000) Resolution # Adoption Date

PURCHASE ORDER NUMBER P1300522 PEID 035083

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DATE 10/25/2013

DEPARTMENT Rock Haven

COMMITTEE Health Services

VENDOR NAME MJ Care Inc

ACCOUNT NUMBER 32-7260-7400-62185

FUNDS DESCRIPTION RH Contract Services T-18 Occupational Therapy

AMOUNT OF INCREASE \$ 19,500

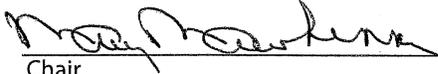
INCREASE FROM \$ 90,000 TO \$ 109,500

ACCOUNT BALANCE AVAILABLE \$ 19,500 (after transfer of \$19,500) SB 10/31/13

REASON FOR AMENDMENT Higher OT usage for T-18 patients

APPROVALS

GOVERNING COMMITTEE _____
Chair Date

FINANCE COMMITTEE  11-7-13
(If over \$10,000) Chair Date

COUNTY BOARD _____
(If over \$10,000) Resolution # Adoption Date

PURCHASE ORDER NUMBER P1300522 PEID 035083

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DATE 10/25/2013

DEPARTMENT Rock Haven

COMMITTEE Health Services

VENDOR NAME MJ Care Inc

ACCOUNT NUMBER 32-7260-7400-62180

FUNDS DESCRIPTION RH Contract Services T-18 Physical Therapy

AMOUNT OF INCREASE \$ 19,500

INCREASE FROM \$ 105,000 TO \$ 124,500

ACCOUNT BALANCE AVAILABLE \$ 19,500 (after transfer of \$19,500) SB 10/31/13

REASON FOR AMENDMENT Higher PT usage for T-18 patients

APPROVALS

GOVERNING COMMITTEE _____
Chair _____ Date _____

FINANCE COMMITTEE _____
Chair  Date 11-7-13
(If over \$10,000)

COUNTY BOARD _____
Resolution # _____ Adoption Date _____
(If over \$10,000)

PURCHASE ORDER NUMBER P1300530 PEID 044418

PRE-APPROVED ENCUMBRANCE AMENDMENT FORM

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DATE 10/25/2013

DEPARTMENT Rock Haven

COMMITTEE Health Services

VENDOR NAME West MD, William Peter

ACCOUNT NUMBER 32-8000-9700-62174

FUNDS DESCRIPTION Support Service Medical Staff

AMOUNT OF INCREASE \$ 30,000

INCREASE FROM \$ 130,000 TO \$ 160,000

ACCOUNT BALANCE AVAILABLE \$ 59,145 (after transfer of \$50,000) SB 11/05/13

REASON FOR AMENDMENT Higher need for physician coverage

APPROVALS

GOVERNING COMMITTEE _____
Chair _____ Date _____

FINANCE COMMITTEE _____
Chair _____ Date _____
(If over \$10,000)

COUNTY BOARD _____
Resolution # _____ Adoption Date _____
(If over \$10,000)

ROCK HAVEN ADMISSIONS/DISCHARGES/CENSUS - 2013

ADMISSIONS					
	Limestone	Limestone	Sandstone	Sandstone	Total
	East	West	West	East	
January	3	4	4	6	17
February	3	3	2	1	9
March	4	9	1	4	18
April	4	3	1	2	10
May	2	4	0	1	7
June	4	5	1	1	11
July	4	8	1	2	15
August	4	4	1	5	14
September	1	4	3	3	11
October	3	7	1	3	14
November	2	4	3	3	12
December	3	2	3	1	9
Total	37	57	21	32	147

1/31/2013
2/28/2013
3/31/2013
4/30/2013
5/31/2013
6/30/2013
7/31/2013
8/31/2013
9/30/2013
10/31/2012
11/30/2012
12/31/2012

DISCHARGES/DEATHS					
	Limestone	Limestone	Sandstone	Sandstone	Total
	East	West	West	East	
January	3	2	5	2	12
February	3	4	0	1	8
March	5	6	2	5	18
April	3	3	0	0	6
May	2	2	2	0	6
June	3	5	1	1	10
July	4	7	2	3	16
August	4	5	1	4	14
September	2	1	2	5	10
October	4	5	3	4	16
November	2	3	1	1	7
December	4	4	4	5	17
Total	39	47	23	31	140

1/31/2013
2/28/2013
3/31/2013
4/30/2013
5/31/2013
6/30/2013
7/31/2013
8/31/2013
9/30/2013
10/31/2012
11/30/2012
12/31/2012

CENSUS					
	Limestone	Limestone	Sandstone	Sandstone	Total
	East	West	West	East	
January	31	32	30	31	124
February	31	31	32	31	125
March	32	31	31	29	123
April	31	31	32	31	125
May	31	30	32	32	125
June	32	31	32	32	127
July	31	33	30	31	125
August	32	31	31	32	126
September	32	32	32	31	127
October	32	29	30	30	121
November	32	31	32	32	127
December	30	31	31	27	119
Budget	32	31	32	31	126
Capacity*	32	32	32	32	128

1/31/2013
2/28/2013
3/31/2013
4/30/2013
5/31/2013
6/30/2013
7/31/2013
8/31/2013
9/30/2013
10/31/2012
11/30/2012
12/31/2012

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

		PATIENT DAYS			PATIENT DAYS			% OVER/ -UNDER	OVER/ -UNDER	% OVER/ -UNDER
		ACTUAL MTD	BUDGET MTD	OVER/ -UNDER	ACTUAL YTD	BUDGET YTD	OVER/ -UNDER			
LIMESTONE COURT	MEDICARE	SNF	222	180	42	23.33	1648	1638	10	0.61
	TOTAL		222	180	42	23.33	1648	1638	10	0.61
	HOSPICE	SNF	68	60	8	13.33	356	546	-190	-34.80
	TOTAL		68	60	8	13.33	356	546	-190	-34.80
MEDICAL ASSISTANCE	SNF	1372	1530	-158	-10.33	13158	13923	-765	-765	-5.49
	TOTAL	1372	1530	-158	-10.33	13158	13923	-765	-765	-5.49
	PRIVATE PAY	SNF	243	120	123	102.50	1783	1092	691	63.28
	TOTAL	243	120	123	102.50	1783	1092	691	691	63.28
TOTAL LIMESTONE COURT		1905	1890	15	0.79	16945	17199	-254	-254	-1.48
SANDSTONE COURT	MEDICARE	SNF	102	210	-108	-51.43	793	1911	-1118	-58.50
	TOTAL	102	210	-108	-51.43	793	1911	-1118	-1118	-58.50
	HOSPICE	SNF	91	60	31	51.67	554	546	8	1.47
	TOTAL	91	60	31	51.67	554	546	8	8	1.47
MEDICAL ASSISTANCE	SNF	1538	1500	38	2.53	14622	13650	972	972	7.12
	TOTAL	1538	1500	38	2.53	14622	13650	972	972	7.12
	PRIVATE PAY	SNF	164	120	44	36.67	1187	1092	95	8.70
	TOTAL	164	120	44	36.67	1187	1092	95	95	8.70
TOTAL SANDSTONE COURT		1895	1890	5	0.26	17156	17199	-43	-43	-0.25

		ACTUAL		PATIENT DAYS		OVER/		PATIENT DAYS		OVER/		% OVER/		
		MTD	MTD	BUDGET	MTD	UNDER	UNDER	BUDGET	YTD	UNDER	UNDER	YTD	UNDER	
TOTAL ROCK HAVEN	MEDICARE	SNF	324	390	390	-66	-66	2441	3549	-1108	-1108	2441	3549	-31.22
		TOTAL	324	390	390	-66	-66	2441	3549	-1108	-1108	2441	3549	-31.22
	HOSPICE	SNF	159	120	120	39	39	910	1092	-182	-182	910	1092	-16.67
		TOTAL	159	120	120	39	39	910	1092	-182	-182	910	1092	-16.67
	MEDICAL ASSISTANCE	SNF	2910	3030	3030	-120	-120	27780	27573	207	207	27780	27573	0.75
		TOTAL	2910	3030	3030	-120	-120	27780	27573	207	207	27780	27573	0.75
	PRIVATE PAY	SNF	407	240	240	167	167	2970	2184	786	786	2970	2184	35.99
		TOTAL	407	240	240	167	167	2970	2184	786	786	2970	2184	35.99
TOTAL ROCK HAVEN			3800	3780	3780	20	20	34101	34398	-297	-297	34101	34398	-0.86

		AVERAGE DAILY PATIENTS			AVERAGE DAILY PATIENTS					
		ACTUAL MTD	BUDGET MTD	% OVER/UNDER	ACTUAL YTD	BUDGET YTD	% OVER/UNDER			
LIMESTONE COURT	MEDICARE	SNF	7.40	6.00	1.40	23.33	6.04	6.00	0.04	0.61
		TOTAL	7.40	6.00	1.40	23.33	6.04	6.00	0.04	0.61
		SNF	2.27	2.00	0.27	13.33	1.30	2.00	-0.70	-34.80
		TOTAL	2.27	2.00	0.27	13.33	1.30	2.00	-0.70	-34.80
	MEDICAL ASSISTANCE	SNF	45.73	51.00	-5.27	-10.33	48.20	51.00	-2.80	-5.49
		TOTAL	45.73	51.00	-5.27	-10.33	48.20	51.00	-2.80	-5.49
	PRIVATE PAY	SNF	8.10	4.00	4.10	102.50	6.53	4.00	2.53	63.28
		TOTAL	8.10	4.00	4.10	102.50	6.53	4.00	2.53	63.28
TOTAL LIMESTONE COURT			63.50	63.00	0.50	0.79	62.07	63.00	-0.93	-1.48
SANDSTONE COURT	MEDICARE	SNF	3.40	7.00	-3.60	-51.43	2.90	7.00	-4.10	-58.50
		TOTAL	3.40	7.00	-3.60	-51.43	2.90	7.00	-4.10	-58.50
	HOSPICE	SNF	3.03	2.00	1.03	51.67	2.03	2.00	0.03	1.47
		TOTAL	3.03	2.00	1.03	51.67	2.03	2.00	0.03	1.47
	MEDICAL ASSISTANCE	SNF	51.27	50.00	1.27	2.53	53.56	50.00	3.56	7.12
		TOTAL	51.27	50.00	1.27	2.53	53.56	50.00	3.56	7.12
	PRIVATE PAY	SNF	5.47	4.00	1.47	36.67	4.35	4.00	0.35	8.70
		TOTAL	5.47	4.00	1.47	36.67	4.35	4.00	0.35	8.70
TOTAL SANDSTONE COURT			63.17	63.00	0.17	0.26	62.84	63.00	-0.16	-0.25

	AVERAGE DAILY PATIENTS				AVERAGE DAILY PATIENTS				
	ACTUAL	BUDGET	OVER/	% OVER/	ACTUAL	BUDGET	OVER/	% OVER/	
	MTD	MTD	-UNDER	-UNDER	YTD	YTD	-UNDER	-UNDER	
TOTAL ROCK HAVEN									
MEDICARE	SNF	10.80	13.00	-2.20	-16.92	8.94	13.00	-4.06	-31.22
	TOTAL	10.80	13.00	-2.20	-16.92	8.94	13.00	-4.06	-31.22
HOSPICE	SNF	5.30	4.00	1.30	32.50	3.33	4.00	-0.67	-16.67
	TOTAL	5.30	4.00	1.30	32.50	3.33	4.00	-0.67	-16.67
MEDICAL ASSISTANCE	SNF	97.00	101.00	-4.00	-3.96	101.76	101.00	0.76	0.75
	TOTAL	97.00	101.00	-4.00	-3.96	101.76	101.00	0.76	0.75
PRIVATE PAY	SNF	13.57	8.00	5.57	69.58	10.88	8.00	2.88	35.99
	TOTAL	13.57	8.00	5.57	69.58	10.88	8.00	2.88	35.99
TOTAL ROCK HAVEN		126.67	126.00	0.67	0.53	124.91	126.00	-1.09	-0.86