

Minutes

Operating Board of Directors DeKalb County Rehab & Nursing Center May 11, 2016

Present Directors: Ron Klein, Misty Haji-Sheikh, Greg Millburg, Jeff Whelan, Rita Nielsen
Absent Directors: Veronica Casella

Also Present: Bart Becker, Gary Hanson, Gary Winschel

Ron Klein called the meeting to order at 7:00 am.

Motion: Misty Haji-Sheikh moved to approve the agenda, Jeff Whelan seconded the motion.
Voice Vote: Ron Klein asked for a voice vote on the approval of the agenda. All Members voted yea. Motion carried unanimously.

Motion: Jeff Whelan moved to approve the March 2016, Operating Board minutes, Greg Millburg seconded the motion.
Voice Vote: Ron Klein asked for a voice vote on the approval of the minutes. All Members voted yea. Motion carried unanimously.

Public Comments: There were no public comments.

Old Business: None

New Business

Management Report:

Operations and Finance:

Gary Winschel gave a report:

February financial statements reflect a gain of \$86,992, which has the Home \$126,353 above the year-to-date 2016 budget. The following table compares year-to-date actuals to year-to-date budget. As a reminder, please note that IGT Revenue has been moved from Non-Operating Revenue to Operating Revenue. Since the IGT Revenue is part of Medicaid, it was agreed with the Auditors that this move was appropriate.

No major variances in Revenue and Expenses during February, both Revenues and Expenses are better than budget. We are continuing the following entry noted in #1 below:

1. Medicaid revenue adjustment decreasing booked revenue by 5% to account for Medicaid overpayments resulting from a lack of published 2016 rates.
2. Total ADC of 176.8 is 3.8 above budget

The February census had an increase of 2.1, taking the YTD over budget by 2.7; maintained a strong Medicare census (though slightly below budget), a stronger Private Pay census and a lower Medicaid census – both of these are actuals, since there were no conversion days.

The 202 conversion day's year-to-date increases Medicaid by 3.4 and decreases Private pay by the same. Approximately \$9,500 less revenue has been recognized this year. Please note that the conversion affect is based solely on the number of conversion days and does not reflect actual residents in the facility. Conversion days span into past years and, in some cases, are awarded after a resident has departed the facility. The YTD numbers are an accurate reflection of the current census.

Medicare days remain strong and continue to drive revenue generation. Medicare A revenue year-to-date exceeds budgeted year-to-date by \$20,627. Net Revenues were over budget year-to-date by \$26,076. Expenses year-to-date are under budget by \$100,277. Nursing is under budget by \$49,456 and Administrative expenses are down by \$26,665. Net income through February 2016 was \$126,353.

As of Friday, April 29th, the Home's cash balance was \$5,309,056.

The twelve month Historical Statement of Operations (3/2015 – 2/2016) has updated numbers for 12/2015. The Preliminary Net Income reported of \$34,657 has been adjusted to (\$152,645). The major accruals were under Administration - (\$100,000) was accrued to Judgements/Claims, (\$135,000) to IMRF, and a credit of \$33,000 to Workers Compensation. The Judgement/Claims amount was added based on the probability of a settlement (resident claim). The IMRF amount is tied to retiring staff whose current pension balances need to be raised to meet future payments – based on their analysis. In several cases we are appealing their findings. The accrual was made according to GAAP.

Mr. Winschel reminded the Operational Board that Russell Deverell, Operational Board member, resigned and that his seat would need to be filled by a new person.

Bart Becker, Administrator for DCRNC, gave a report:

The Illinois Department of Public Health completed their annual inspection in March. The facility received F373 regarding paid feeding assistants. IDPH (Life Safety) also did their annual inspection and gave ten tags (citations). Plans of correction were implemented and IDPH has cleared all tags retroactively. The facility is back in "substantial compliance." IDPH should be sending the facility's two year license very soon. Census building continues to be a big focus. The Administrator attended a meeting with the Case Manager Director/ Supervisors of the Hospital Discharge Planners/Case Managers at the end of April.

Fourteen resident rooms have been repainted and floors were stripped and waxed. The resident family room "yellow" room was also redone/repainted (green). The "A" West Shower room has been repaired and repainted. CVS/Dementia Unit and hallways will be repainted and wallpaper removed. The facility continues to be improved/enhanced.

The reduction of hospital re-admissions was discussed. The hospital re-admission rates for February, 2016, was 14.3%, March, 2016 was 10.5%, and April, 2016 was 8.3%. The percentages are dropping, which is a good thing. Social Services has now implemented their procedure for follow-up phone calls for discharged residents. When residents have been discharged from the facility to their home, apartment, etc. Social Services calls them several times within a thirty-day period to assure that everything is going well. This has proved to be very beneficial to the residents in their success post-discharge.

Mr. Becker also discussed the Payroll Based Journal (PBJ) which will be required by all Skilled Nursing Facilities in July 2016. PBJ is the submission of staffing hours to the Centers for Medicare and Medicaid Services.

There have been many approved donations from the Nursing Home Foundation: an E-Z stand (for resident transfers), privacy curtains for the Therapy Gym, two digital wall-mount wheelchair scales, and three entertainment centers for the resident dining rooms. The Nursing Home Auxiliary also approved their donation of a new awning/canopy for the CVS/ dementia Unit patio. The efforts to continue to reduce and eliminate agency staff (nurses and C.N.A.'s) continues to be in full force. The Business Office Manager, Doreen Akers, is retiring after many years of service. A new Business Office Manager, Janet George, has been hired and will start on May 16, 2016.

Kris Decker, Clinical Compliance Coordinator for DCRNC, gave a report:

DCRNC is now a five star facility again. DCRNC is the only five star facility within a twenty-five mile radius. The facility five star report was distributed to each attendee. Quality Measures were discussed as well as the improvement throughout the past several months. Mrs. Decker discussed six new Quality Measures that Centers for Medicare and Medicaid Services will be monitoring. A new Performance Improvement Plan/ Committee was created for Oral/Dental Care. Mrs. Decker also gave a Compliance update, stating that there was only a small number of compliance questions/ concerns brought up in the past several months. Each of them is immediately answered/addressed immediately. Mrs. Decker also discusses each compliance concern with Margaret Scavotto, JD, CHC, Director of Compliance Services, from Management Performance Associates.

Executive Session:

No closed session took place

Next Meeting: July 13, 2016 at 7:00 a.m.

Motion: Misty Haji-Sheikh moved to adjourn the meeting, Greg Millburg seconded the motion.

Meeting adjourned at 7:40 a.m.

Respectfully submitted
Bart J. Becker
Recording Secretary