

CHAMPAIGN COUNTY NURSING HOME BOARD OF DIRECTORS AGENDA

County of Champaign, Urbana, Illinois

Monday, January 8, 2018 - 6:00 p.m.

In-Service Training Room

Champaign County Nursing Home, 500 S. Art Bartell Road, Urbana

Committee Members:

Jack Anderson – Chair Sam Banks Catherine Emanuel

Josh Hartke Mary Hodson Edmund Sutton

| l. | Call to Order | |
|-------|--|---------|
| II. | Roll Call | |
| 111. | Approval of Agenda/Addenda | |
| IV. | Approval of Minutes | |
| | A. December 7, 2017 | 1-2 |
| ٧. | Public Participation | |
| VI. | Communications | |
| VII. | Approve 2018 Calendar of Meetings | 3 |
| /III. | Management Update | |
| | A. November Financials | 4 - 18 |
| | B. Marketing Update & Plan | 19 - 30 |
| | C. Perception of Care Discharge QA Protocol & Discharge Survey | 31 - 33 |

IX. Chair's Report

- A. Discussion of assignment and content for the February 13, 2018 6:30 pm Nursing Home Board of Directors quarterly report presentation to the County Board for the quarter ending 12/31/17
- B. Status of IDPH's December 2017 inspection of CCNH
- X. Next Meeting Date & Time
 - A. Monday, February 5, 2018 at 6:00 p.m.
- XI. Adjournment

Board of Directors Champaign County Nursing Home (CCNH) –Minutes Urbana, Illinois December 11, 2017

Directors Present: Anderson, Busey, Emanuel, Hartke, Hodson, Sutton

Directors Absent/Excused: Banks

Also Present: Asplund, Colbrook, Ciyou, Koenig, Petrie, Reznik, Weibel

I. Call to Order

Chair Anderson called the meeting to order at 6:00 p.m.

II. Roll Call

Asplund called the roll of Directors. A quorum was established.

III. Approval of Agenda

The board approved the agenda as distributed (motion by Hodson, second by Hartke, unanimous).

IV. Approval of Minutes

The board approved the minutes from November 13, 2017, as distributed (motion by Hartke, second by Hodson, unanimous).

V. Public Participation

David Laker stated he is not a fan of the use of paper plates and plastic utensils. He noted he objects to the use of no-name products. He explained he believes these products come from overseas and those products are not held to the same quality standards as US products. Mr. Laker does not like "mystery meat" and does not want his wife to eat it. He requested additional assistance to feed residents. He noted dietary is understaffed on weekends.

Pattsi Petrie complimented all involved with the holiday open house at the Nursing Home yesterday.

VI. Communications

Ms. Hodson provided copies of the call for artists for the Art Fare in February.

VII. Management Update

A. October Financials

Suzanne Koenig stated in October, Medicare increased by five. According to Ms. Koenig, census is up overall. She stated the door issue was resolved in November. Ms. Koenig noted today is the first day of the annual survey. She anticipates the auditors will finish next week Tuesday.

Joyce Ciyou stated there are new processes in place for the annual survey. She stated the new regulations require positions dedicated to risk management and infectious disease prevention. She explained auditors will provide a survey report one to ten days from the completion of the audit. SAK agreed to provide a summary report of the audit findings at the next meeting.

Nursing Home Board of Directors December 11, 2017 Page 2

VIII. Chair's Report

Mr. Anderson encouraged all to attend or watch (via livestream) the Committee of the Whole meeting. He informed everyone there are a few items concerning the Nursing Home on the agenda.

In response to a question from Mr. Hartke, Ms. Koenig stated she believes if the County Board decides to issue an RFP for the sale of the Nursing Home, it will hamper the ability to hire nursing staff.

Mr. Anderson stated the dissolution of this Board of Directors is an item on the agenda for discussion. The committee discussed the costs associated with this board meeting. The board approved a recommendation to the County Board to forego compensation of the members of the Nursing Home Board of Directors (motion by Emanuel, second by Hartke, unanimous).

IX. Next Meeting Date & Time

Monday, January 8, 2018 at 6:00 p.m.

X. Adjournment

Mr. Anderson declared the meeting adjourned 6:44 p.m.

Respectfully submitted: Tammy Asplund Recording Secretary

C. Pius Weibel

Chair cweibel@co.champaign.il.us

Giraldo Rosales Vice-Chair



Brookens Administrative Center 1776 East Washington Street Urbana, Illinois 61802 Phone (217) 384-3772 Fax (217) 384-3896

Office of County Board Champaign County, Illinois

CHAMPAIGN COUNTY NURSING HOME BOARD of DIRECTORS 2018 CALENDAR OF MEETINGS

All Meetings held in the In-Service Classroom, Champaign County Nursing Home, 500 Art Bartell Drive, Urbana, IL

January 8, 2018 - 6pm

February 12, 2018 - 6pm

March 12, 2018 - 6pm

April 9, 2018 – 6pm

May 8, 2018 - 6pm

June 11, 2018 – 6pm

July 9, 2018 – 6pm

August 13, 2018 – 6pm

September 10, 2018 – 6pm

October 1, 2018 - 6pm

November 12, 2018 - 6pm

December 10, 2018 – 6pm

Calendar of Nursing Home Board of Directors Presentations to the County Board OUARTERY REPORTS:

February 13, 2018 – 6:30pm – for the quarter ending 12/31/2017 May 15, 2018 – 6:30pm – for the quarter ending 3/31/2018 August 14, 2018 – 6:30pm – for the quarter ending 6/30/2018 November 13, 2018 – 6:30pm – for the quarter ending 9/31/2018

Champaign County Nursing Home Financial Statement Summary August - September - October - November 2017 Actual Results

HEADLINE - Facility is reporting Net Income 1st time this year!

| | | August'17 | S | eptember'17 | October'17 | ٨ | lovember'17 | Comments |
|--|----|-----------|----|-------------|-----------------|----|-------------|--|
| Census | | 132 | | 132 | 137 | | 138 | Census continued to slowly build up by overall increase by 1 |
| Net Revenue | \$ | 853,047 | \$ | 845,867 | \$ 983,658 | \$ | 1,076,374 | Net revenue stayed consistent on per day basis, is up \$92,716 primarily due to true up of IGT revenue for first 10 months of the year |
| Operating Expenses | \$ | 1,077,042 | \$ | 1,069,868 | \$ 1,151,866 | \$ | 1,147,152 | Operating expenses stayed consistent on a monthly basis but were \$1.1k per day higher primarily due to increase in nursing payroll expense |
| Net Operating Income | \$ | (223,995) | \$ | (223,789) | \$ (168,208) | \$ | (70,778) | Steady Improvement by \$97,430 |
| Non Operating Income | \$ | 104,540 | \$ | 100,834 | \$ 101,633 | \$ | 100,796 | Non operating income consisent |
| Net Income (Loss) | s | (123,199) | \$ | (122,954) | \$ (66,574) | \$ | 30,018 | Net Results continued to improve and showed \$96,592 increase to prior month |
| | | | | | | | | |
| Operating Expenses Detail: Administration | s | 274,867 | \$ | 289,508 | \$ 302,390 | \$ | 276,237 | Admin. Expenses are \$26, 153 lower mostly due to decrease in Attorney and Legal fees by \$18,323 and Finance charges by \$5,167 |
| Environmental Services | \$ | 96,381 | \$ | 83,274 | \$ 96,848 | \$ | 108,076 | Environmental Services are \$9,853 higher in Gas category, season related |
| Maintenance | \$ | 9,730 | \$ | 21,337 | \$ 18,363 | \$ | 13,422 | Building Repairs are down by \$4,347 |
| Nursing Services | \$ | 461,945 | \$ | 449,749 | \$ 494,626 | \$ | 517,740 | Nursing expenses increased slightly due to orientation and necessary OT to provide adequate care |
| Food Services | \$ | 89,119 | \$ | 94,027 | \$ 99,072 | \$ | 106,086 | Dietary Supplies are \$9,232 due to prior period expenses recognized in Nov'17 |

| | Champaign County Nursing Home | |
|----------------|-------------------------------|-----------------|
| 11/30/17 | Balance Sheet | |
| | ASSETS | |
| Current Asse | ets | |
| Cash | | \$21,550.76 |
| Rec. Net of t | Incollectible Amounts | \$3,361,288,82 |
| Rec., Net of U | Incollectible Amounts | (\$788,180.89) |
| Accrued Inter | est | \$169,075,78 |
| 478 | , Net of Uncollectibi | \$2,772,179.91 |
| Prepaid Expe | | (\$46,320.52) |
| Long-Term In | | \$15,829,52 |
| Total Curr | ent Assets | \$5,505,423.38 |
| Fixed Assets | | |
| Fixed Assets | | \$18,116,007,22 |
| Total / | ASSETS | \$23,621,430.60 |
| | LIABILITIES & EQUITY | |
| Current Liab | lities | |
| Current Liabil | ities | \$5,623,443,89 |
| Non-Current | Liabilities | \$2,706,310.01 |
| Total Curr | ent Liebilities | \$8,329,753.90 |
| Equity | | · |
| Equity | | \$15,291,676.70 |
| Total I | LIABILITIES & EQUITY | \$23,621,430.60 |

Champaign County Nursing Home Statement of Cash Receipts and Disbursements For the Period Ended November 30, 2017

| | | | Opera | iting Account | Petty Ca | sh Account | - AS | Total |
|------------------------|----------------------------|-----------------------------|-------|---------------|----------|------------|------|---------|
| Beginning Cash Balance | | | \$ | 31,082 | \$ | 300 | \$ | 31,382 |
| bbA | : | | | | | | | |
| | Receipts deposited | | \$ | 575,366 | \$ | - | \$ | 575,366 |
| | Other (identify source) | Real Estate Tax Collections | \$ | 32,107 | \$ | | \$ | 32,107 |
| | Other (identify source) | General Fund Loan | \$ | 150,000 | 5 | | \$ | 150,000 |
| | Total Cash Receipts | | \$ | 757,473 | \$ | | \$ | 757,473 |
| Subtract | : | | | | | | | |
| | A/P Disbursements by check | | \$ | 250,255 | \$ | • | \$ | 250,255 |
| | Payroll Disbursements | | \$ | 517,050 | \$ | - | \$ | 517,050 |
| | Other (identify source) | | \$ | - | \$ | [8] | \$ | - |
| | Total Disbursements | | \$ | 767,305 | \$ | | \$ | 767,305 |
| Ending Cash Balance | | | - | 21,251 | 5 | 300 | - | 21,551 |

Champaign County Nursing Home Statement of Cash Flows (Indirect Method) For the Period of

January 2017 to November 2017

CASH FLOW FROM OPERATING ACTIVITIES:

| Net Income | e (Loss) YTĐ | | (\$1,229,861.96) |
|---|---------------------------------|-----|------------------|
| Depreciation | on Expense | | 706,545.02 |
| | r. In Accounts Receivable | | (\$561,359.66) |
| A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 | r. In Prepaid Expenses | | \$67,517.51 |
| | r. In Inventory | | - |
| (Incr.)/Dec | r. In Patient Trust | | \$5,677.02 |
| Incr./(Decr | .) in Accounts Payable | | \$1,266,698.84 |
| Incr./(Decr | .) in Salaries and Wages Payal | ole | (\$42,135.74) |
| Incr./(Decr | .) in Interest Payable | | \$39,132.37 |
| Incr./(Decr | .) in Accrued Com. Absences | | (\$80,380.06) |
| Incr./(Decr | .) in Other Liabilities | | (\$11,110.21) |
| Net Cash P | rovided by Operating Activit | es | 160,723.13 |
| CASH FLOW FROM IN | VESTING ACTIVITIES: | | |
| Purchase o | f Equipment | | (\$12,430.52) |
| Improvement | ents / (CIP) | | \$4,644.13 |
| Net Cash F | rovided by Investing Activities | 25 | (7,786.39) |
| CASH FLOW FROM FIR | NANCING ACTIVITIES: | | |
| | Tax Anticipation Note | | (\$892,821.98) |
| | able - Medicaid | | |
| | Due to General Corp. Fund | | \$444,000.00 |
| 15 | in Bonds Payable | | \$0.00 |
| Increase in | Equity Adjustment | | \$4,430.66 |
| Net Cash F | Provided by Financing Activity | es | (444,391.32) |
| TOTAL CASH FLOW | | | (291,454.58) |
| BEGINNING CASH, | 01/01/17 | | 313,005.34 |
| ENDING CASH, | 11/30/17 | | \$ 21,550.76 |

Champaign County Nursing Home Statement of Operations 11/30/17 Year-to-Date **Current Activity** Description Operating Income \$1,686.38 Miscellaneous Revenue \$10.00 \$1,615,010.35 \$163,421.89 Medicare A Revenue \$9,703.29 \$160,494.43 Medicare B Revenue \$549,320.30 \$5,146,834.08 Medicaid Revenue Private Pay Revenue \$341,185.18 \$2,989,968,81 \$180,160.20 \$12,733.07 Adult Day Care Revenue \$10,093,154.25 Total Income \$1,076,373.73 Operating Expenses \$276,236.65 \$3,097,950.95 Administration \$1,041,569,00 Environmental Services \$108,076.23 \$14,556.20 \$145,865.69 Laundry Maintenance \$13,421.59 \$167,316.29 \$517,740.43 \$5,414,010.36 **Nursing Services** Activities \$16,356.07 \$215,130.75 \$18,896.16 \$207,177.38 Social Services Physical Therapy \$15,776,90 \$276,253.77 Occupational Therapy \$15,475.96 \$212,718.16 \$53,285.18 Speech Therapy \$1,965.79 \$16,658.77 Respiratory Therapy \$390.00 Total This Department \$2,355.79 \$69,943.95 Food Services \$106,036.32 \$1,074,073.86 \$4,058.34 \$66,702.75 Barber & Beauty \$165,904.89 Adult Day Care \$15,239.76 \$281,959.02 Alzheimers and Related Disorders \$22,925.75 \$1,147,152.15 \$12,436,676.82 Total Expenses (\$70,778.42) [\$2,343,522.57] NonOperating Income Local Taxes \$100,796.26 \$1,108,796.41 Miscellaneous NI Revenue \$0.00 \$4,864.20

Total NonDperating Income

NET INCOME (LOSS)

\$1,113,660.61

(\$1,229,861.96)

\$100,796.26

\$30,017.84

| 11/30/17 | | | | | | rtvNusin rent d'Ob | 1000 | | | | | | н |
|-----------------------------|--------------|-----------|----------|----------|-----------|-----------------------|-----------|-----------|--------------|-----------|-----------|-------------------|------------|
| | | | | | | | 1000 100 | | W17 | min = | 1017 | 11/57 | Tal |
| Description | 12/16 | 01/17 | 02/17 | 09/17 | 04/17 | 05/17 | 06717 | 07/17 | 09/17 | 0917 | 1017 | 11/17 | Tota |
| Operating Income | | | | | | | | | | | | | |
| Medianenis Pavenue | | 112 | 64 | (113) | 57 | 1,068 | (166) | 345 | 27 | 281 | | 10 | 1,666 |
| Madcare A Revenue | | 172451 | 25010 | 145345 | 115410 | 102:594 | 141,201 | 132930 | 125033 | 115570 | 196026 | 163422 | 1,615010 |
| Medicare B Paverus | | 2335 | 10072 | 23955 | 17,972 | 21,305 | 13258 | 18,827 | 922 | 9811 | 2992 | 9708 | 160,494 |
| Madkaid Paverue | | 425618 | 50639 | 533,839 | 455,811 | 431,742 | 457,092 | 466019 | 419997 | 471,442 | 3624 | 54330 | 5145834 |
| Rivate Pay Revenue | | 343926 | 1523 | 255933 | 277,659 | 22:25 | 216809 | 210686 | 287,155 | 23800 | 3926 | 341,185 | 29899 |
| Adult Day Care Peverue | | 18025 | 18796 | 25090 | 14988 | 17,153 | 16749 | 15000 | 11,672 | 9954 | 18991 | 12733 | 180,160 |
| Total Income | | 983517 | 3580 | 950,115 | 822,833 | 835,116 | 841943 | 843.797 | 853047 | 8/5,858 | 933658 | 1,076,374 | 10,000,154 |
| Operating Experses | | | | | | | | | | | | | |
| Achinistration | | 25,410 | 256529 | 2667 | 265388 | 339,491 | 277,973 | 22533 | 274867 | 289508 | 372390 | 26237 | 3097,951 |
| Environmental Services | | 90,505 | 85609 | 97,021 | 67,156 | 124200 | 100,693 | 91,904 | 96382 | 83274 | 96849 | 108076 | 1,041,669 |
| landy | | 13782 | 10616 | 12879 | 13,522 | 11,732 | 12982 | 12,544 | 16115 | 132B | 13808 | 14555 | 145886 |
| Maintenence | | 13555 | 13550 | 14636 | 21,336 | 7,975 | 23186 | 10215 | 9731 | 21,337 | 18363 | 13,422 | 167,316 |
| Nusing Sevices | | 5332 | 477,285 | 490,406 | 45555 | 485234 | 518541 | 489606 | 461,945 | 44974B | 494666 | 517,740 | 5414010 |
| Activities | | 21,908 | 19613 | 20521 | 20,916 | 23049 | 19000 | 18098 | 18617 | 18,595 | 1833 | 16356 | 215131 |
| Social Savices | | 24080 | 24018 | 17,851 | 14016 | 18,879 | 18,653 | 12767 | 19155 | 17,841 | 21,019 | 18895 | 207,177 |
| Physical Therapy | | 2888 | 32645 | 32814 | 29849 | 29663 | 23020 | 20091 | 18451 | 20133 | 24939 | 15777 | 26254 |
| Oscipational Therapy | | 23243 | 23512 | 21,475 | 15351 | 14334 | 15211 | 22305 | 23981 | 20529 | 17,312 | 15476 | 212718 |
| Speech Therapy | | 9046 | 5056 | 8775 | 6619 | 5696 | 5280 | 4856 | 2541 | 1,474 | 1,996 | 1,936 | 5326 |
| Respiratory Therapy | | | | | | | | | | | | | |
| Repiratory Therapy | | 2101 | 2104 | 1,611 | 1,246 | 1,953 | 2425 | 1,363 | 1,479 | 852 | 1,125 | 390 | 1666 |
| Total Tris Department | | 11,147 | 7,161 | 10,386 | 7,865 | 7,659 | 7,695 | 6219 | 4019 | 2326 | 3120 | 2356 | 62944 |
| FoodSevices | | 108,279 | 110907 | 101,839 | 92035 | 95288 | 82,277 | 95,150 | £ 119 | 94027 | 99,075 | 106036 | 1,074074 |
| Bather & Beenly | | 8075 | 6320 | 6860 | 6636 | 7,313 | 7,942 | 4864 | 5674 | 4751 | 424 | 40 5 8 | 66708 |
| Adit Day Care | | 16141 | 13:554 | 14523 | 15514 | 16029 | 16620 | 15251 | 14429 | 1299 | 15635 | 15240 | 165905 |
| Abhainesard Related Deoctes | | 26,916 | 24180 | 28003 | 24634 | 27,305 | 33,254 | 26,684 | 24547 | 21,361 | 22151 | 22,926 | 281,989 |
| Total Expenses | 7.55 | 1,216299 | 1,105490 | 1,115871 | 1,079,823 | 1208129 | 1,157,128 | 1,118220 | 1,077,043 | 1,059,655 | 1,151,886 | 1,147,152 | 12436677 |
| Nt Chestinghome | - Harris har | (222,782) | (152670) | (15573) | (196925) | (3:5013) | (312184) | (274424) | (22399) | (223789) | (168.23) | (70778) | (234352 |
| Northperating Income | | | | | | | | | | | | | |
| Local Taxes | | 100172 | 100,172 | 100,172 | 100172 | 100,172 | 100172 | 104540 | 100,796 | 100,834 | 100,755 | 100,796 | 1,108,795 |
| Mendarena N Peerus | | 300 | 1,039 | 592 | 136 | 913 | 50 | 976 | | | 837 | | 486 |
| Tdd No Qualing Income | | 100,472 | 101,232 | 100,764 | 100,308 | 101,085 | 100,222 | 105517 | 100796 | 100,834 | 101,534 | 100796 | 1,11365 |
| National (Los) | | (122310) | (51,433) | (54991) | (95,616) | (240,999) | (211,952) | (168,907) | (123:199) | (122,933) | (6554) | 30018 | (1,22986 |

Champaign County Nursing Home Avg Daily Census Summary Report For Nov-17

| | | Jul-17 | Aug-17 | Sep-17 | Oct-17 | Nov-17 |
|----------------|------------------|-------------|--------|--------|--------|--------|
| Actual: | | ADC | ADC | ADC | ADC | ADC |
| | Medicare A | 7.77 | 7.42 | 6.57 | 13.16 | 11.87 |
| | Medicaid | 95.23 | 85.74 | 83.33 | 82.06 | 77.93 |
| | Medicaid Pending | 3.52 | 12.35 | 15.40 | 14.19 | 21.00 |
| | Managed Care | // = | • | 0.20 | 0.23 | |
| | Private Pay | 23.19 | 21.06 | 21,67 | 22.26 | 21.83 |
| | Veterans | 5.00 | 5.00 | 5.00 | 5.00 | 4.93 |
| | Total | 134.71 | 131.58 | 132.17 | 136.90 | 137.57 |
| | | Jul-17 | Aug-17 | Sep-17 | Oct-17 | Nov-17 |
| <u>Budget:</u> | | ADC | ADC | ADC | ADC | ADC |
| | Medicare A | 6.00 | 3.00 | 3.00 | 5.00 | 6.00 |
| | Medicaid | 83.00 | 87.00 | 89.00 | 91.00 | 93.00 |
| | Medicaid Pending | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| | Managed Care | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| | Private Pay | 21.00 | 21.00 | 21.00 | 21.00 | 21.00 |
| | Veterans | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| | Total | 129.00 | 130.00 | 132.00 | 136.00 | 139.00 |
| Varinace: | | | | | | |
| | Over/(Under) | 5.71 | 1.58 | 0.17 | 0.90 | (1.43) |

Champaign County Nursing Home Census Summary Report For Nov-17

| Nov-17 | | | | | | | | |
|------------------|------------|-----------|------------|-----------|------------|-----------|------------|-----------|
| | Au | Aug-17 | Sel | Sep-17 | ŏ | Oct-17 | S | Nov-17 |
| | Total Days | Occupancy | Total Days | Occupancy | Total Days | Осспрансу | Total Days | Occupancy |
| Medicare A | 230 | 3.05% | 197 | 2.70% | 408 | 5.42% | 356 | 4.88% |
| Medicaid | 2,658 | 35.28% | 2,500 | 34.29% | 2,544 | 33.77% | 2,338 | 32.07% |
| Medicaid Pending | 383 | 5.08% | 462 | 6.34% | 440 | 5.84% | 930 | 8.64% |
| Managed Care | | 0.00% | 9 | 0.08% | 7 | 0.09% | ī | 0.00% |
| Private Pay | 653 | 8.67% | 650 | 8.92% | 069 | 9.16% | 655 | 8.98% |
| Veterans | 155 | 2.06% | 150 | 2.06% | 155 | 2.06% | 148 | 2.03% |
| Total | 4,079 | 54.15% | 3,965 | 54.39% | 4,244 | 56.34% | 4,127 | 56.61% |

Champaign County Nursing Home A/R Aging Summary As of November 2017

| Payer Type Summary | 2 | Section 1 | | | Nov-17 | | | W | |
|----------------------|-------------------|------------|--------------|------------|------------|------------|------------|--------------|----------------------|
| Service Period | November | October | September | August | yluk | June | May | >=April | Total as of 11/30/17 |
| Commercial Insurance | 12,248.76 | 12,165.59 | \$6,603.82 | 5,856.66 | 6,951.86 | 6,960.23 | 1,841.14 | 295,714.28 | 348,342 |
| Hospice | 20,194.18 | 21,147.00 | \$4,037.05 | 422.75 | 35.90 | 1,699.41 | 8,026.80 | 54,249.87 | 109,813 |
| Like Med A | 45,891.94 | 63,728.97 | \$6,964.33 | (7,651.01) | 26,521.67 | 15,078.05 | 587.79 | 246,592.42 | 397,714 |
| Like Med B | 3,604.02 | (5,010.50) | \$6,529.41 | 3,739.47 | 5,487.03 | 4,027.95 | 2,389.63 | 361,987.69 | 382,755 |
| Medicaid | 278,641.68 | 178,884.34 | \$144,196.58 | 17,535.95 | (3,384.25) | 12,198.14 | 6,969.21 | 346,801.41 | 981,843 |
| Med A | 90,836.42 | 44,846.85 | \$20,238.20 | 17,104.56 | 9,282.81 | 1,527.65 | 11,368.11 | 6,107.80 | 201,312 |
| Med B | 6,623.62 | 308.86 | \$2,344.98 | 2,467.32 | 3,864,71 | 1,415,63 | 817.55 | 55,851.23 | 73,694 |
| Pvt | 162,321.77 | 99,203.83 | \$111,840.44 | 67,278.36 | 96,675.17 | 97,727,96 | 88,594,09 | 1,479,346.22 | 2,202,988 |
| A'A | 28,375.00 | 38,788.68 | \$1,041.36 | 2,848.95 | 3,645.03 | 58.80 | 12,554.52 | 215,159,46 | 302,472 |
| | 648,737.39 | 454,063.62 | 303,796.17 | 109,603.01 | 149,079.93 | 140,693.82 | 133,148,84 | 3,061,810.38 | |
| Total | 1,297,474.78 908, | 908,127.24 | 607,592.34 | 219,206.02 | 298,159.86 | 281,387.64 | 266,297.68 | 6,123,620.76 | 5,000,933 |

Champaign County Nursing Home A/R Aging Summary As of November 2017

| Payer Type Summary | Nov-17 | | | |
|----------------------|----------------------|----------|---------------------|---|
| Service Period | Total as of 11/30/17 | % to TTL | +(-) to prior month | Reason |
| Commercial Insurance | 348,342 | 6.97% | (18,492) | |
| Hospice | 109,813 | 2.20% | 7,604 | |
| Like Med A | 397,714 | 7.95% | 36,405 | current, census increase |
| Like Med B | 382,755 | 7.65% | (14,578) | |
| Medicaid | 981,843 | 19.63% | 137,027 | molina, pmnt issued 11/20/17, deposited 12/4/17 |
| Med A | 201,312 | 4.03% | (39,258) | |
| Med B | 73,694 | 1.47% | (11,802) | |
| Pvt | 2,202,988 | 44.05% | 170,328 | pending related increase |
| VA | 302,472 | 6.05% | (9,145) | |
| Total | 5,000,933 | 100.00% | 258,088 | |

Champaign County Nursing Home A/P Aging Summary As of November 2017

| | 71' ylul | August'17 | September'17 | October'17 | October'17 November'17 |
|--------------------------------------|--------------|--------------|--------------|--------------|------------------------|
| Accounts Payable | 3,672,636.42 | 3,556,274.72 | 3,692,597.50 | 3,829,529.83 | 3,855,067.86 |
| Variance to Prior Month | 27,155 | (89,207) | 136,323 | 136,932 | 25,538 |
| % Increase/(Decrease) To Piror Month | 0.74% | -2.43% | 3.83% | 3.71% | 0.67% |

Age Through Date: 11/30/2017 Cash Thru Date: 11/30/2017

Report Type: Summary Include Zero Balance Residents: No

Include Payer Undistributed Cash: No Current Status: All

Pull By Date/Age By Date: Service Sort By: Name

Select Payers By: Payer Type(s) Include Prebills?: No

Run as of Responsible Date: No

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| | | | | | | | Section 1997 | | |
|---------------------------|------------------------|-----------|------------|-----------|------------|----------|--------------|----------|------------|
| | Outstanding Balance | November | October | September | August | July | June | Мау | >=April |
| | | 3 | | | | | | | |
| Payer Summary | 57-10 | | | | Tanta Pier | | | | |
| AARP CO INS A | 56,066.00 | 4,770.50 | 2,467.50 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 48,828.00 |
| AARP CO INS B | 18,580.03 | 00.0 | 00.0 | 00.00 | 0.00 | 0.00 | 0.00 | 00.0 | 18,580.03 |
| ADVANTRA FREEDOM B | 2,277.06 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 00.00 | 2,277.06 |
| ADVANTRA SILVER A | 39,035.71 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 39,035.71 |
| AETNA A | 17,897.02 | 00.0 | 8,382.20 | 00.0 | 00'0 | 00.0 | 0.00 | 0.00 | 9,514.82 |
| AETNA B | (3,236.20) | 00.00 | (8,203.11) | 1,639.93 | 0.00 | 00.0 | 0.00 | 00.0 | 3,326.98 |
| AETNA CO INS A | 17,092.22 | 00.0 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 00.00 | 17,092.22 |
| AETNA CO INS B | 7,360.74 | 00.0 | 0.00 | 00.00 | 0.00 | 00.0 | 0.00 | 00.0 | 7,360.74 |
| AFLAC CO INS B | (1,298.04) | 00.0 | 0.00 | 0.00 | 00'0 | 0.00 | 0.00 | 00.0 | (1,298.04) |
| AMERICAN REPUBLI CO INS A | 157.50 | 00.0 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 00'0 | 157.50 |
| AMERICAN REPUBLI CO INS B | 83.81 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 00.00 | 83.81 |
| APWU CO INS A | 1,941.68 | 0.00 | 0.00 | 0.00 | 0.00 | 2,303.00 | 0.00 | (361.32) | 00.0 |
| APWU CO INS B | 347.76 | 00.00 | 0.00 | 0.00 | 00.00 | 46.65 | 15.55 | 293.22 | (7.66) |
| BANKERS LIFE CO INS B | 1,171.72 | 00.0 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 1,171.72 |
| BCBS IL CO INS A | 44,012.10 | 6,909.00 | 6,744.50 | 1,974.00 | 0.00 | 0.00 | 0.00 | 658.00 | 27,726.60 |
| BCBS IL CO INS B | 16,250.13 | 569.26 | 20.26 | 00'0 | 261.79 | 332.41 | 114.27 | 98.24 | 14,853.90 |
| BCBS PRIMARY | 12,762.18 | 00.00 | 0.00 | 00.0 | 0.00 | 0.00 | 0.00 | 0.00 | 12,762.18 |
| BCBS REPL A | 13,074.97 | 00:00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 13,074.97 |
| Carle Hospice Medicaid | 70,515.12 | 15,476.38 | 16,146.88 | (777.95) | 422.75 | 35.90 | (4.95) | 0.00 | 39,216.11 |
| CHAMP VA CO INS B | 181.35 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 181.35 |
| CIGNA CO INS A | 4,531.18 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 4,531.18 |
| CIGNA CO INS B | 3,183.18 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 3,183.18 |
| CIGNA HEALTH SPRING MMAI | 6,258.90 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 6,258.90 |
| CIGNA PRIMARY | 2,536.86 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 2,536.86 |
| CONSECO WSH NATL CO INS B | 364.92 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 364.92 |
| CONSTITUTION LIFE COINS A | (30.21) | 00'0 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | (30.21) |
| COUNTRY LIFE CO INS A | (292.00) | 00.00 | 00.0 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | (292.00) |
| COUNTRY LIFE CO INS B | 1,402.83 | 0.00 | 28.33 | 00.00 | (34.22) | 0.00 | 0.00 | 0.00 | 1,408.72 |
| COV HOSPICE MEDICAID | 5,107.15 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 5,107.15 |
| COVENTRY ADVANT PPO/HMO B | 9,300.97 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 9,300.97 |
| COVENTRY ADVANTRA PPO/HMO | 607.99 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 66.209 |
| COVENTRY HEALTH CO INS A | 157.50 | 00.0 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 0.00 | 157.50 |
| | | | | | | | | | |

Age Through Date: 11/30/2017 **Cash Thru Date:** 11/30/2017

Payer A/R Aging

Report Type: Summary Include Zero Balance Residents: No

Include Payer Undistributed Cash: No Current Status: All Pull By Date/Age By Date: Service Sort By: Name

Select Payers By: Payer Type(s) Include Prebills?: No

Run as of Responsible Date: No

| COVENTRY HEALTH CO INS B DORS GEHA COMMERCIAL B | Balance 88 24 | November | October | September | Amonst | July | June | May | >=April |
|---|--------------------|------------|--|--------------|-------------------------------|------------|------------|------------|--|
| COVENTRY HEALTH CO INS B DORS GEHA COMMERCIAL B | 88 24 | | - The Party of the | • | na C | | | | |
| DORS GEHA COMMERCIAL B | C3:00 | 0.00 | 0.00 | 00'0 | 0.00 | 0.00 | 00.00 | 00:00 | 88.24 |
| GEHA COMMERCIAL B | 3,571.67 | 1,156.14 | 1,093.00 | 1,145.68 | 0.00 | 00.0 | 1,213.42 | 391.94 | (1,428.51) |
| | 13,416.49 | 0.00 | 0.00 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 13,416.49 |
| HA CONNECT ADC | 13,905.28 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 13,905.28 |
| HA CONNECT MMAI B | 78,442.52 | 0.00 | 00.0 | 00.0 | 0.00 | 00.0 | 0.00 | 0.00 | 78,442.52 |
| HARBOR LIGHT MEDICAID | 34,093.78 | 4,717.80 | 5,000.12 | 4,815.00 | 0.00 | 0.00 | 1,704.36 | 8,026.80 | 9,829.70 |
| HEALTH ALLIANCE CO INS A | 12,198.05 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 12,198.05 |
| HEALTH ALLIANCE CO INS B | 5,924.53 | 0.00 | 0.00 | 179.66 | 167.45 | 304.07 | 221.01 | 0.00 | 5,052.34 |
| HEALTH ALLIANCE COMM B | 28,367.58 | 0.00 | 0.00 | 168.82 | 549.68 | 506.45 | 0.00 | 0.00 | 27,142.63 |
| HFALTH ALLTANCE COMMER | 7,403.00 | 0.00 | 2,905.00 | 2,490.00 | 0.00 | 00.0 | 1,245.00 | 0.00 | 763.00 |
| HEALTH ALLTANCE CONNECT | 92,947.40 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 92,947.40 |
| HEALTH ALLTANCE CONNECT A | 36,014.38 | 0.00 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 0.00 | 36,014.38 |
| HEALTH DESGN PLS CO INS A | 2,334.16 | 0.00 | 0.00 | 00.0 | 0.00 | 00.00 | 0.00 | 0.00 | 2,334.16 |
| HFAI THI TAK | 12,188.01 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 12,188.01 |
| HEALTHSCOPE CO INS A | 1,156.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 1,156.00 |
| HOSPICE MEDICAID PENDING | 3,135.06 | 3,135.06 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 0.00 | 0.00 |
| HIMANA CO INS B | (1.52) | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | (1.52) |
| HIMANA GOLD A | 30,790,57 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 30,790.57 |
| HIMANA GOOD B | 5,967.70 | 0.00 | 0.00 | 0.00 | 00.0 | 00.0 | 00.00 | 00'0 | 5,967.70 |
| TOHER | 227,438,02 | 129,579.80 | 7,618.75 | 2,220.00 | 503.32 | (2,906.94) | (1,114.62) | (1,403.13) | 92,940.84 |
| TORES DENDING | 994,053.01 | 81,722.57 | 61,395.60 | 60,057.60 | 43,585.12 | 37,094.80 | 64,594.60 | 47,350.00 | 598,252.72 |
| TERESON NATIONS B | (500.67) | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | (500.67) |
| - OVAL AMEDICAN CO TAK B | 1 099 82 | 0.00 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 0.00 | 1,099.82 |
| MED ADVANTAGE A (MED ADVANTAGE | (18 374 06) | 2 120 41 | 6.816.84 | 6.284.72 | 8,218.48 | 2,496.77 | 9,292.63 | 0.00 | (53,603.91) |
| AL ADVANTAGE A (MED ADVANTAGE | (00:1-10:01) | 11.021/2 | 200 | | | | | | THE STATE OF THE S |
| MED ADVANTAGE B | 104,411.54 | 919.87 | 646.27 | 2,551.68 | 226.30 | 4,468.90 | 2,515.31 | 1,352.25 | 91,730.96 |
| MEDICARE A | 201,312.40 | 90,836.42 | 44,846.85 | 20,238.20 | 17,104.56 | 9,282.81 | 1,527.65 | 11,368.11 | 6,107.80 |
| MEDICARE | 73,693,90 | 6,623.62 | 308.86 | 2,344.98 | 2,467.32 | 3,864.71 | 1,415.63 | 817.55 | 55,851.23 |
| MEDICO CO INS A | 2,312,00 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 2,312.00 |
| MEDICO CO INS B | (0.49) | 0.00 | 0.00 | 00.0 | 0.00 | 00.00 | 00'0 | 0.00 | (0.49) |
| MOLTNA A | 79,066.98 | 15,718.65 | 12,992.41 | 437.89 | 00'0 | 00'0 | 0.00 | 0.00 | 49,918.03 |
| MOLINA ADC | 2,825.42 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 00.00 | 0.00 | 2,825.42 |
| MOLTNA MMATE | 69,142,33 | 0.03 | 54.35 | 1,163.80 | 1,240.60 | 540.32 | 785.51 | 661.81 | 64,695.91 |
| MOLINA OF ILLINOIS | 571,280.13 | 141,287.19 | 162,635.52 | 132,322.47 | 9,002.98 | (477.31) | 5,064.39 | (897.56) | 122,342.45 |
| MONIMENTAL LIFE CO INS B | 199.86 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 00.00 | 0.00 | 199.86 |
| MITTIAL OF OMAHA CO INS A | 2,664.00 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 2,664.00 |
| MITTIAL OF OMAHA CO INS B | 4,692.80 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 00.00 | 0.00 | 4,692.80 |
| MWC + | 2,315,29 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 2,315.29 |
| | 3 619 00 | 000 | 000 | 000 | 0.00 | 00'0 | 0.00 | 987.00 | 2,632.00 |
| NALC CO INS A | 3,619.00 | 0.00 | 0.00 | 0.0 | 9 | 2000 | | | |
| MatrixCare Report Us | User: Flora Rezník | | | Run Date: 1. | Run Date: 12/27/2017 13:43:48 | 13:48 | | | Page 2 of 4 |
| 16 | | | | | | | | | |

Cash Thru Date: 11/30/2017

Payer A/R Aging

Age Through Date: 11/30/2017

Report Type: Summary Include Zero Balance Residents: No Include Payer Undistributed Cash: No

Current Status: All

Pull By Date/Age By Date: Service Sort By: Name

Select Payers By: Payer Type(s) Include Prebills?: No

Run as of Responsible Date: No

| | Outstanding | | | ŕ | | | | | |
|---------------------------|-------------|-----------|------------|-----------|-------------|-----------|-----------|-----------|------------|
| | Balance | November | October | September | August | July | June | May | >=April |
| NALC CO INS B | 1,596.73 | 0.00 | 00.0 | 0.00 | 141.46 | 169.28 | 84.40 | 166.00 | 1,035.59 |
| PEKIN CO INS B | 70.44 | 0.00 | 0.00 | 00'0 | 0.00 | 0.00 | 0.00 | 0.00 | 70.44 |
| PERSONAL CARE CO INS A | 66.02 | 0.00 | 0.00 | 0.00 | 0.00 | 00'0 | 0.00 | 0.00 | 66.02 |
| PERSONAL CARE CO INS B | 2,968.22 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 2,968.22 |
| PERSONAL CARE DIEM | 0.10 | 00.00 | 0.00 | 00.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.10 |
| PRESENCE HOSPICE MEDICAID | 96.91 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 96.91 |
| PRIVATE - CARLE HOSPICE | 141,315.03 | 15,159.90 | 9,193.80 | 7,408.10 | 7,139.30 | 7,139.30 | 6,909.00 | 6,293.00 | 82,072.63 |
| PRIVATE - HRBR LT HOSPICE | 18,375.78 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 18,375.78 |
| PRIVATE PAY | 750,431.24 | 49,205.95 | 33,586.91 | 35,803.00 | 27,322.98 | 47,054.93 | 26,645.60 | 25,444.46 | 505,367.41 |
| PRIVATE-TRANSITIONS HOSP | 9,828.00 | 7,560.00 | 2,268.00 | 00.00 | 0.00 | 00'0 | 0.00 | 0.00 | 0.00 |
| PYRAMID CO INS B | (31.92) | 0.00 | 00.0 | 00.00 | 0.00 | 00.00 | 0.00 | 00'0 | (31.92) |
| REGENCE BLUESHLD CO INS 8 | 589.57 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 0.00 | 0.00 | 589.57 |
| RESIDENT LIABILITY | 284,616.77 | 5,538.29 | (7,240.48) | 8,571.74 | (10,769.04) | 5,386.14 | (421.24) | 9,506.63 | 274,044.73 |
| RESPITE CARLE | 1,232.95 | 0.00 | 0.00 | 0.00 | 00.00 | 00.00 | 0.00 | 0.00 | 1,232.95 |
| RIGHT CHOICE CO INS A | 278.49 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 0.00 | 0.00 | 278.49 |
| ROYAL NEIGHBORS CO INS B | 1.90 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 0.00 | 1.90 |
| SECURE HORIZON DIRECT A | 4,989.55 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 4,989.55 |
| STANDARD LIFE CO INS B | 394.83 | 0.00 | 00.0 | 0.00 | 00.00 | 0.00 | 0.00 | 00.0 | 394.83 |
| STATE FARM CO INS A | 630.00 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 0.00 | 00.0 | 630.00 |
| STATE FARM CO INS B | 1,357.04 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 1,357.04 |
| STERLING LIFE CO INS A | 550.00 | 0.00 | 0.00 | 0.00 | 00.00 | 00.0 | 0.00 | 0.00 | 550.00 |
| TITLE XX ADC | 69,875,14 | 6,618.55 | 7,537.07 | 8,508.43 | 8,029.65 | 00.0 | 7,034.95 | 8,877.96 | 23,268.53 |
| TRI CARE CO INS A | 11,086.00 | 0.00 | 0.00 | 1,809.50 | 4,770.50 | 3,290.00 | 0.00 | 0.00 | 1,216.00 |
| TOT CARE CO TNS B | 2.196.40 | 0.00 | 0.00 | (18.16) | 00'0 | 00.0 | 0.00 | 00.00 | 2,214.56 |
| IIHC MEDICARE ADVANTAGE A | 183,868,17 | 28,052,88 | 35,537,52 | 241.72 | (15,869.49) | 24,024.90 | 11,065.42 | 587.79 | 100,227.43 |
| IIHC MEDICARE ADVANTAGE B | 110,754.44 | 2.684.12 | 2,491.99 | 1,174.00 | 2,272.57 | 136.85 | 0.00 | 375.57 | 101,619.34 |
| a wall | 8,551.39 | 00'0 | 0.00 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 8,551.39 |
| INTCARE A | 1,557.30 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 1,557.30 |
| INTTED AMERICAN CO INS A | 2,093,00 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 0.00 | 00.0 | 2,093.00 |
| UNITED AMERICAN CO INS B | 296.70 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 0.00 | 00.0 | 296.70 |
| UNITED HEALTHCR CO INS A | 3,551.50 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 00.0 | 3,551.50 |
| UNITED HEALTHCR CO INS B | 09.696'9 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 00.00 | 6,969.60 |
| INTTED MINE WORKERS CO A | 4.277.00 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 0.00 | 00.0 | 4,277.00 |
| UNITED TEACHERS CO INS A | 1,589.50 | 0.00 | 0.00 | 0.00 | 00.00 | 0.00 | 0.00 | 00.0 | 1,589.50 |
| INITED TEACHERS CO INS B | 106.31 | 0.00 | 0.00 | 0.00 | 00.0 | 0.00 | 0.00 | 0.00 | 106.31 |
| VA ADC | 56,905.85 | 3,370.00 | 3,900.00 | 0.00 | 3,844.84 | 3,642.02 | 0.00 | 24.18 | 42,124.81 |
| VA NIIDCING HOME | 27.835.20 | 0.00 | 0.00 | 0.00 | 0.00 | 00.0 | 00'0 | 00.00 | 27,835.20 |
| VA BASTC | 93,997.46 | 19,140.00 | 34,615.77 | 1,041.36 | (892.89) | 3.01 | 535.63 | 13,502.26 | 26,155.32 |
| | | | |)3 % | | | | | |

Age Through Date: 11/30/2017 Cash Thru Date: 11/30/2017

Report Type: Summary Include Zero Balance Residents: No Include Payer Undistributed Cash: No

Current Status: All

Pull By Date/Age By Date: Service Sort By: Name

Run as of Responsible Date: No

Select Payers By: Payer Type(s)

Include Prebills?: No

Payer A/R Aging

| | Outstanding | | | | | | | | |
|------------------------------|--------------|------------|------------|------------|------------|------------|------------|------------|--------------|
| | Balance | November | October | September | August | July | June | May | >=April |
| VA CLINICALLY COMPLEX | 7,801.81 | 5,865.00 | 00.0 | 00.00 | 00.00 | 00.0 | 00.00 | (1,087.26) | 3,024.07 |
| VA HEAVY REHAB | 75,154.84 | 0.00 | 272.91 | 00.0 | 00.0 | 0.00 | 0.00 | 115.34 | 74,766.59 |
| VA NH THERAPY | 3,833.29 | 0.00 | 0.00 | 00'0 | 0.00 | 0.00 | 0.00 | 0.00 | 3,833.29 |
| VA SPECIAL CARE | 40,776.64 | 00.0 | 0.00 | 00'0 | 0.00 | 0.00 | (476.83) | 00.0 | 41,253.47 |
| WELLCARE FEE SERVICE A | 10,440.46 | 00'0 | 0.00 | 00.00 | 0.00 | 0.00 | 00.00 | 00.00 | 10,440.46 |
| WELLCARE FEE SERVICE B | 5,694.34 | 00.0 | 0.00 | 00.00 | 00.00 | 340.96 | 727.13 | 0.00 | 4,626.25 |
| WORKMENS COMPENSATION | 2,066.86 | 0.00 | 0.00 | 0.00 | 00.00 | 00.00 | 0.00 | 0.00 | 2,066.86 |
| Payer Total | 5,000,933.16 | 648,737.39 | 454,063.62 | 303,796.17 | 109,603.01 | 149,079.93 | 140,693.82 | 133,148.84 | 3,061,810.38 |

| Payer Type Summaty | The Wallet | | | The state of the s | | | THE PARTY OF | Section 1 | - Contraction |
|--------------------------|--------------|------------|------------|--|------------|------------|--------------|------------|---------------|
| Commercial Insurance | 348,342.34 | 12,248.76 | 12,165.59 | \$6,603.82 | 5,856.66 | 6,951.86 | 6,960.23 | 1,841.14 | 295,714.28 |
| Hospice | 109,812.96 | 20,194.18 | 21,147.00 | \$4,037.05 | 422.75 | 35.90 | 1,699.41 | 8,026.80 | 54,249.87 |
| Like Medicare Part A | 397,714.16 | 45,891.94 | 63,728.97 | \$6,964.33 | (7,651.01) | 26,521.67 | 15,078.05 | 587.79 | 246,592.42 |
| Like Medicare Part B | 382,754.70 | 3,604.02 | (5,010.50) | \$6,529.41 | 3,739.47 | 5,487.03 | 4,027.95 | 2,389.63 | 361,987.69 |
| Medicald (State) | 981,843.06 | 278,641.68 | 178,884.34 | \$144,196.58 | 17,535.95 | (3,384.25) | 12,198.14 | 6,969.21 | 346,801.41 |
| Medicare Part A | 201,312.40 | 90,836.42 | 44,846.85 | \$20,238.20 | 17,104.56 | 9,282.81 | 1,527.65 | 11,368.11 | 6,107.80 |
| Medicare Part B | 73,693.90 | 6,623.62 | 308.86 | \$2,344.98 | 2,467.32 | 3,864.71 | 1,415.63 | 817.55 | 55,851.23 |
| Private | 2,202,987.84 | 162,321.77 | 99,203.83 | \$111,840.44 | 67,278.36 | 96,675.17 | 97,727.96 | 88,594.09 | 1,479,346.22 |
| Veteran's Administration | 302,471.80 | 28,375.00 | 38,788.68 | \$1,041.36 | 2,848.95 | 3,645.03 | 58.80 | 12,554.52 | 215,159.46 |
| Payer Type Total | 5,000,933.16 | 648,737.39 | 454,063.62 | 303,796.17 | 109,603.01 | 149,079.93 | 140,693.82 | 133,148.84 | 3,061,810.38 |

User: Flora Reznik

Champaign County Nursing Home Marketing Update

With much work to be done at CCNH in the area of Marketing, Admissions and Customer Relations we thought it we could cover more ground through a team approach. The new Marketing Team is comprised of various department heads who have different areas of expertise. The team's leader is Alicia McCoy, Director of Community Relations. Kay Bronston, SAK Marketing, Admissions and Customer Relations Director provides guidance and direction to the team.

The idea of marketing and networking was new to this group. Framework was needed in an effort to provide guidance, direction and accountability to the team. This was accomplished through the creation of a Quarterly Marketing Plan. A copy is attached to this report. The group meets weekly to discuss what they have done, results and next plan of action. Each team member has been assigned to different people and/or groups in an effort to cover more ground and to provide a more strategic approach to our networking efforts.

On-going to date

- Daily Rounds at area hospitals to check for discharges and meet with case managers
- Daily check with Epic Program on Hospital discharges and pending discharges
- · Weekly Marketing Meeting with Team
- Face Book Updates on events at CCNH
- Monthly networking one-on-one visits with:
 - < All area Assisted Living Facilities
 - < Select area Home Health Agencies
 - < Select area Hospice Organizations: Harbor Light, Carl and
 - < Transition Hospice.
 - < Alzheimer's association
 - < VA Hospital
 - < Area Clinics
 - < Independent Living Apartments
 - < Senior Centers in area
 - < Sunset Funeral Home
 - < Home and Medical Supply Companies
 - < Ambulance Companies
 - < Dialysis Centers

Activity and Events Held

Attended Dine with a Doc. This is held monthly

Participated in Vendor Fair at Carl Hospital

Established and conduct monthly Family Council meetings

Hosted Halloween Party for area children and residents Area Magician Hired to entertain the group.

Hosted Veterans Day Social

Increased Adult Day Care Center outings

Alzheimer's Walk at CCNH

Activity and Events Scheduled

Committee on Aging meeting and luncheon to be held at CCNH in November

Thanksgiving Dinner for Residents and guests

Enchanted Forest at CCNH (12 trees donated to date) Goal is 20 starts 12-1-17

Christmas Tea for residents and families December 6th

Holiday Open House to view enchanted Forest and meet Santa 12-10-17

Angel Tree for residents 12-1-17 through 12-23-17

Six Week Senior Health Series, New Year-New You starts January 15th 2018

February Healthy Heart Program

CCNH 1st Annual Art Fair Sunday February 25th 1-5 pm

Miscellaneous Contacts Currently Working With

Meeting with John from Pel VIP for marketing respiratory therapy
Working with therapy department to promote patient outcomes from therapy
Parkland College
U of I University
Humane society

Internal Marketing

In addition to external marketing and networking we have begun the internal marking piece in an effort to improve the admissions process, improve the quality of resident's care, improve communications with families and build staff morale.

To date we have met as a group several times to improve the timeliness of getting back to our referral sources in an effort to improve our chances of getting referrals to become admissions. We have discussed and implemented changes to the actual admission process, thus improving the overall admission experience for the resident as well as the nursing staff.

We have put together The Perception of Care Admission Protocol and Discharge Protocol. An in service will be schedule by the end of the month to get this program up and running. A copy of the program is submitted with this report.

Housekeeping is playing a vibrant role in cleaning and staging rooms for all admissions and discharges. They are doing a great job.

I make a point of visiting with family members during my weekly trips to CCNH I am happy to say that the families I have spoken with are pleased with the care and services family members are receiving.

Months September Through December 2017 Monthly Marketing Plan

Objectives:

- 1. To increase census to 144 paid beds including 7 Medicare Units by the end of the year
- To increase the Adult Day Care daily participation average to 25
 - networking program, generate a greater referral base and design new programs to build community confidence and Create a new Marketing Team to establish a solid support 3 5
 - enhance internal/external marketing events & programs, Host facility/community events to improve relationships, generate a buzz in the community and improve image 4.

| Outcome | To be used to establish daily, weekly, monthly & quarterly contacts |
|----------------|---|
| Date | Update weekly |
| Responsible | Marketing Team |
| Approaches | Create and keep updated Master Contact Lists. Lists to include: Type of contact, Name, address, telephone, email address Comprehensive lists will be discussed at weekly marketing meetings |
| Marketing Task | Research: |

| Establishes a Master contact lists for future mailings to events/activities. | Improve quality and efficiency of admission process | To assure all admissions are treated with dignity, respect and a warm welcome to CCNH and the families are reassured that their loved one is in good hands | To monitor the outcome of the Marketing Plan | To assure that any/all admissions needs or concerns are addressed in a timely manner which will enhance care and improve perception of CCNH | ! |
|--|--|--|--|---|---|
| Update Monthly | September 30,2017 | On-going | Every Friday by end of the day | With each new admission | |
| Social Service Directors on each unit | Administrator & admission team | Administrator, DON, & Social Services | Director of Community Relations with input from | Marketing Team Specific staff as designated in the Quality Assurance Plan | |
| Develop a list containing the information on all discharged residents home for this year | Review, revise and improve current inquiry and Admissions Policy & Procedure | Monitor admission procedures | Submit Weekly Marketing, and Networking Summaries including: what was done, results and next plan of action | Implement New Perception of Care Quality Assurance | |
| | | WII | | | |

| Improve customer service and increase return admissions. To know what is being offered by our competition, to better understand what need, if any, is not being met in the community and to hopefully find a "hook" That will fill a need in the marketplace | Improve Medicare census by maximizing Medicare days. |
|--|--|
| With each discharge By: 10-13-17 | On-going |
| Specific staff as designated in the Quality Assurance Plan Marketing Team | DON, ADON |
| Implement New Perception of Care Discharge Quality Assurance Evaluate the scope & diversity of resident care and program services being offered in relation to the local market and the need for such services. Consider the introduction of specialty care programs to promote facility | Increase the facility Medicare census by following the marketing programs designed to attract ALL Payor Mix of Residents. When current residents are discharged to the hospital and return to the facility, max out coverage 14-days for all readmit that have been in the hospital for 3 days depending on the circumstances at the hospital. |
| | |

| Assist staff with resident acuity level care while continuing to provide quality care to residents & help to control cost Improve revenue flow and assist family with the daunting paperwork process | In-services will educate & train employees, improve skills, create a better connection with their jobs. To provide an area where families can get a cup of coffee and take a break if needed |
|--|---|
| On-going | Monthly 9-30-17 |
| DON, ADON & Administrator Person responsible for processing Medicaid application paperwork | Administrator Marketing Team |
| Assess each new Part-A Medicare for costs in relation to providing resident care before admission. Some residents' care may be cost prohibitive representing a losing proposition. When accepting Medicaid residents, pre-determine the likelihood of the resident becoming eligible for Medicaid and require that the facility control the application process to the extent possible. | Monthly Staff In-services to be held. Topics to be determined by Administrator. Consider Establishing a welcome area for visitors, family members. |
| | Customer Service/Internal Marketing: |

| Improve employee morale and retention. | Welcome to our facility. | To show our appreciation to the family for choosing CCNH to care for their loved one. | Outreach to family members/ to show what a caring facility CCNH is | Say Thanks you and continue to build relationships |
|---|---|--|--|--|
| ON HOLD | On-going | On-going | As needed | October 11, 2017 |
| ON HOLD | Director of Community Relations | Director of Community Relations | Social Services | Marketing Team |
| Consider Creating Employee Committee to help promote positive staff attitudes through fun programs, events and acknowledgment programs | Make up welcome gift bags and cards to welcome new residents to our facility. | Send out thank you notes to families of newly admitted residents/ to thank the family for entrusting us to care for their family member. | Send out Sympathy cards to family of resident. | Emergency Room Nurses' Day |
| | | | | |

| | Fire Prevention Week | Marketing Team | October 8-14 | Say Thanks and continue to build relationships |
|-------------------------|---|----------------|--|---|
| Strategic Networking | Visit hospitals as allowed by their policies for luncheons and presentations to educate, inform and reassure that we are open for business and doing well. | Marketing Team | Weekly | Ongoing |
| | Attend monthly, quarterly and annual networking and educational meetings to keep up with old contacts and also create new ones and establish CCNH in the market place | Marketing Team | Discuss the effectiveness of groups and who, if anyone should attend | Continue to build a strong presence in the community, educate and build networking contacts and increase referral sources |
| | Contact Discharge Planners: • 1-1 visit • By phone • By email • Mailings | Marketing Team | Weekly | To establish a solid presence, provide assurances and reaffirm CCNH'S commitment to providing services and care. |

| Contact Doctors: 1-1 visits By Phone By email Mailings Educational lunch in their office | Marketing Team | Monthly | To establish a solid presence, provide assurances and reaffirm CCNH'S commitment to providing services and care. |
|---|---|--|--|
| Invite to events Thank for referral or informing them resident has returned home Contact groups listed on the Referral Sources for Nursing Homes and Talk to them about: Medicare Beds Therapy Services | Marketing Team | Weekly, Monthly And/or Quarterly | To establish a solid presence, provide assurances and reaffirm CCNH'S commitment to providing services and care. |
| Hospice Beds LTC beds Adult Day Care Home Marketing Team Assisted Living Adult Family Homes Adult Protective Services AARP Adult Day Care | Marketing Team to review, discuss and divide list among the group Alicia Sue Sue Alicia Shay & Tori | Weekly, monthly and/or quarterly | To establish a solid presence in the community and to build referral source base. |
| | | | |

| ALZ Support Groups Alzheimer's Association Alzheimer's Association Alzheimer's Association Area Agency on Aging Hearing Aid centers Banks/Trust Officers Banks/Trust Officers Case managers Community Centers Community Centers Fire Department Handicapped Transportation Drivers & Providers Handicapped Transportation Drivers & Providers Home Health Equipment Suppliers Hospital Discharge Planners Ombudswan Other SNF Private Nursing Services Shay Sue Alicia A | | | | | | | | | | | | | | | | | | | | | | 100 | | | | | | | | | | | |
|--|-------------|-------------|--------------|------|--------|--------|------|-------|--------|--------|------------------|-----------------|--------------|---------------|--------|-----|--------------|--------|-------------|---|------------------|-----|---------------|----------------------|--------------|--------|--------|---------|----------------|-----------------|--------|--|--|
| upport Groups mer's Association mer's Support Groups ance Services can Legion sency on Aging g Aid centers Trust Officers rement Counselors logists nanagers Clubs Churches unity Centers il on Aging Care resources spartment ency Room Staff capped Transportation s & Providers Equipment Suppliers Health Agencies e Agencies al Discharge Planners Isman SNF ians ists | | | | | | 2 | | | | я | হ ক্রমে গ্র | | | | | | | | 12 | | | | | | | 2.1. | | | | | | | |
| upport Groups mer's Association mer's Support Groups ance Services can Legion sgency on Aging g Aid centers Trust Officers rement Counselors logists nanagers Clubs Churches unity Centers il on Aging Care resources spartment ency Room Staff capped Transportation s & Providers Equipment Suppliers Health Agencies e Agencies al Discharge Planners Isman SNF ians ists | Shay & Tori | Shay & Tori | Alicia & Sue | Shaw | Alicia | Alicin | Than | Sildy | Alicia | Alicia | Kay to follow-up | On civic groups | Shay & Kim H | Alicia & Shay | Alicia | Sue | Alicia & Sue | Alicia | Shay & Tori | | Therapy & Alicia | sue | oue Alicia | Alicia & Cua | Alicia & sue | Alicia | Alicia | all cla | | Shay | | | |
| | | | | | | 8 0 | in T | | | | | | | | | | | | | • | liers | | | Discharge Planners ' | | | | | reing Corvices | Nulsing Scivics | Police | | |
| | • | • | • | • | • | • | • | • | - | • | • | • | • | • | • | • | • | • | • | | • | • | • | • | • | • | • | • | 4 | | • | | |

| Keep FB page current. Update no less than ¾ times a week with uplifting, stories, photos, activities and events. Plan Halloween Party for residents, staff and area school children. Celebrate Veteran's Day Create Festival of Trees Host Holiday Party Open House for Residents, Families, staff and community | | Retired Teaches Retired Nurses Senior Apartments Salvation Army Senior Centers Urgent Care Centers VA Hospitals VFW | Alicia Alicia Shay Shay Alicia Alicia & Shay Shay | | |
|--|-----------------|--|---|-------------|--|
| Plan Halloween Party for residents, staff and area school children. Celebrate Veteran's Day Create Festival of Trees Host Holiday Party Open House for Residents, Families, staff and community | mmunity ations: | Keep FB page current. Update no less than ¾ times a week with uplifting, stories, photos, activities and events. | Alicia | 3 334490. 3 | |
| Create Festival of Trees Host Holiday Party Open House for Residents, Families, staff and community | | Plan Halloween Party for residents, staff and area school children. | | | |
| Host Holiday Party Open House for Residents, Families, staff and community | | Create Festival of Trees | | | |
| | | Host Holiday Party Open House for Residents, Families, staff and community | | | |

Perception of Care Discharge Quality Assurance Protocol

- 1. Upon discharge to home, Social Services will be contacting the resident, his/her family or legal representative to see how things are going.
- 2. With-in 24 hours the Social Services is to contact the resident, his/her family, or legal representative to see how he/she is doing.
- 3. With-in 72 hours the Social Services is to contact the resident, his/her family or legal representative to see how he/she is doing.
- 4. With-in 5-7 days the Social Services is to contact the resident, his/her family or legal representative to see how he/she is doing. At the end of the discussion the Concierge will advise them that she will be sending a Post Discharge Survey to them and would appreciate it if they would complete it and send back to her.
- 5. With-in 24 hours of discussion the survey should be mailed along with a brief cover letter and a self addressed stamped envelope.
- 6. Upon receipt, review the Post Discharge Survey @ the regularly scheduled department head meeting. Be sure to address any negative feedback immediately either through a telephone call, letter or email.
- 7. After review and discussion, the Post Discharge Survey is to be kept in a 3-ring binder in the Social Service office.
- 8. The Final call is to made on the 25th day to assure resident is doing well and if not recommend readmitting in an effort to recapture and use rest of Medicare days he/she are entitled to.
- 9. It is the responsibility of the Social service to implement all follow-up and communication with staff and family.

Discharge Survey

Please take a few minutes to complete the following survey. This survey will be used to help measure the quality of Champaign County Nursing Home and identify where changes can be made. Your opinion is very important to us and we would like to thank you for your time and cooperation.

How do you feel about each of the following matters? Please circle the one number for the appropriate response.

| | Strongly | Strongly | Agree | Disagree | Neutral |
|---------------------------------|----------|----------|--------------|----------|---------|
| | Disagree | Agree | 2722 0 0 0 0 | 101 0 00 | |
| | | | | | |
| 1.Overall, I was satisfied with | 1 | 2 | 3 | 4 | 5 |
| Champaign Co. Nursing Home | | | | | |
| | | | | | |
| 2. My family member and/or | 1 | 2 | 3 | 4 | 5 |
| I was treated with respect. | | | | | |
| | | | | | |
| 3. I was able to attend and | 1 | 2 | 3 | 4 | 5 |
| Participate in the Care Plan | | | | | |
| Conference. | | | | | |
| | | | | | |
| 4. My questions and concerns | 1 | 2 | 3 | 4 | 5 |
| Were handled appropriately | | | | | |
| And in a timely manner. | | | | | |
| | | | | | |
| 5. We received proper | 1 | 2 | 3 | 4 | 5 |
| Notification that continual | | | | | |
| Progress was being made. | | | | | |

| 6. The activity programs | 1 | 2 | 3 | 4 | 5 |
|----------------------------------|---------|---------------|---------|---|---|
| Were enjoyable and entertaining | ıg. | | | | |
| | | | | | |
| 7. The meals and snacks were | 1 | 2 | 3 | 4 | 5 |
| Tasteful and nutritious. | | | | | |
| | | | | | |
| 8. I was given notification | 1 | 2 | 3 | 4 | 5 |
| Of discharge plans in a timely m | anner. | | | | |
| | | | | | |
| 9. The discharge process was | 1 | 2 | 3 | 4 | 5 |
| Explained to me and handled | | | | | |
| Appropriately. | | | | | |
| | | | | | |
| 10. The individual departments | 1 | 2 | 3 | 4 | 5 |
| Provided me with proper educa | tion | | | | |
| that was needed for the return | home. | | | | |
| I was made aware of the resour | ces | | | | |
| That were available to meet our | needs | | | | |
| | | | | | |
| What could Champaign County | Nursing | Home do to in | nprove? | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Person Completing the survey: | *** | | | | |
| Relationship to resident: | | | | | |
| Date: | | | | | |