



Annual
REPORT

2021
2022

Fueled by the high energy and highly interactive discussion of the 2022 Board Planning Retreat and guided by the 2021 Member Satisfaction Survey, the LeadingAge Wisconsin Board of Directors adopted a new mission statement and a planning document outlining four strategic directions to guide the association and its members into the future. This 2021-2022 Annual Report documents the milestones we achieved throughout the last twelve months as we pursue the newly adopted strategic directions. Our past is a record of remarkable success. Our present is the momentum of promise and potential. Our future will carry us to new heights as we transform life for the aging and those who serve them.



LeadingAge™
Wisconsin

*Transforming
life for the aging
and those
who serve them*

Strategic Direction #1 *Leverage Core Services to Transform Care and Services (Advocacy, Education and Member Services)*

LeadingAge Wisconsin, working with the other state long-term care associations, embarked on a strategic statewide grassroots advocacy campaign which included a comprehensive outreach and social media effort resulting in the delivery of more than 4,000 signatures to the Joint Finance Committee's Co-Chairs in support of our request for long-term care funding in the 2021-23 state budget. Building off the work of the Governor's Task Force on Caregiving, which influenced the Governor's recommendations for long-term care funding in his proposed budget, LeadingAge Wisconsin successfully worked with the Legislature and the Governor to secure passage of historic Medicaid rate increases for nursing homes (\$252 million) and Family Care (\$104 million).

The final 2021-22 Medicaid Nursing Home Rates provided an overall average increase approaching 17 percent, including the acuity adjustments. The Department of Health Services (DHS) agreed to increase available funding by an additional \$18 million beyond the amount approved in the State Budget. Early estimates projected that 50 percent of the facilities will be paid for their full direct care costs. DHS selected a funding option that placed two-thirds of the dollars into direct care and rejected a push by some to suspend the formula using an across-the-board approach, which would have negatively impacted LeadingAge Wisconsin members.

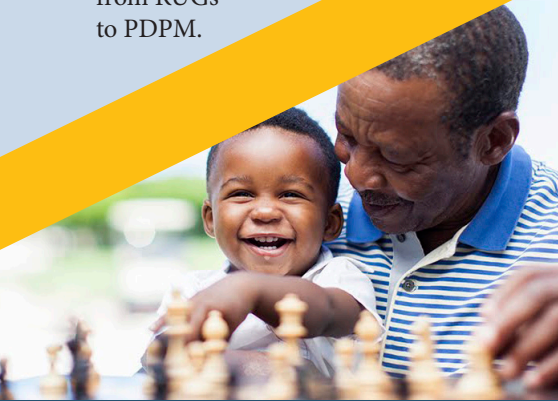
LeadingAge Wisconsin successfully lobbied DHS and Joint Committee on Finance members to increase Family Care funding through Directed Provider Payments, resulting in providers receiving a 4.24 percent increase to their base rates to help offset previous Managed Care organization (MCO) imposed rate payment reductions. As a result, the

MCOs were required to pass-through the increased annualized amount directly to Family Care providers as of June 1, 2021. Funding for this increase was included in the State's cost-to-continue budget. Then, once the federal American Rescue Plan Act (ARPA) Home and Community Based Services (HCBS) funding amounts were made available to DHS, LeadingAge Wisconsin successfully led efforts to support DHS's formal request to the Joint Finance Committee seeking approval of an additional five percent rate increase in additional Directed Provider Payments, effective January 1, 2022. The \$156.3 million increase in all funds will be covered through enhanced federal funding provided by the American Rescue Plan Act.

LeadingAge Wisconsin participated in a working group with the Division of Medicaid Services (DMS) to design and implement the Medicaid payment system transition from Resource Utilization Groups (RUGS) to the Patient Driven Payment Model (PDPM). We created a highly valued and utilized analytical tool for members to assess the financial impacts of Medicaid switching from RUGS to PDPM. LeadingAge Wisconsin then educated members through a fall conference session, as well as through two reimbursement webinars on the Medicaid transition to PDPM, along with guidance on other significant formula changes for 2021-22. LeadingAge Wisconsin guided members on Cost Report Utilization details for 7/1/21 Medicaid rates, including the impact State and Federal COVID-related funding has on rate setting based on costs/revenues.



LeadingAge Wisconsin successfully urged DHS to provide Interim Rate Payments to nursing facilities operating without 7/1/21 Rates. These facilities were facing the possibility of not being paid as Medicaid converted its payment system from RUGs to PDPM.



LeadingAge Wisconsin authored a detailed regulatory reform package proposal which was submitted to the Division of Quality Assurance (DQA) and the DHS Office of the Secretary calling for several specific changes while also urging DQA to change the culture of the regulatory system to practice empathy towards the provider community. Trauma-informed training for all surveyors was suggested along with steps to move the system away from one based on enforcement and punishment to one that embraces quality improvement. Although DQA opined the survey process was largely dictated by the federal government, LeadingAge Wisconsin urged the DHS Secretary's Office to embrace change and pushed for regulatory innovation. As a result, the DHS Secretary created a regulatory system review workgroup that includes three LeadingAge Wisconsin provider representatives. Our relentless goal is to achieve meaningful DQA/DHS culture change and jointly identify changes that would improve the regulatory system (quality improvement).

LeadingAge Wisconsin utilized our extended lobbying team with Husch Blackwell Strategies to navigate the political and legislative process on various pieces of legislation related to vaccine distributions, vaccine mandates, reimbursement for mobility devices, and payments to long-term care facilities. We communicated and consulted with Administration and State Health Department officials to advocate for adequate funding, support, and/or guidance on various federal regulatory measures related to the public health emergency.

LeadingAge Wisconsin established partnerships with key health systems to move towards broader discussions on the root cause of nursing homes' inability to admit hospital patients and urged a collaborative approach to problem solving. We again advanced the idea of a hospital-nursing home pilot project to advance workable strategies that incent providers to admit certain difficult-to-place patients. Working with our partners, we advocated for collecting data on these patients as the first step in developing pilot parameters and supported efforts to organize a summit or other opportunities to advance solution-based changes. LeadingAge Wisconsin also initiated discussions with Wisconsin Association of Medical Directors (WAMD) physicians urging them to share their perspectives on why nursing homes should not be pressured to admit patients for whom staff are not available to provide necessary care and services.

LeadingAge Wisconsin provided data on the significant downsizing of the long-term care provider community, noting this trend further challenges transition of care efforts. We urged DHS to create and fund incentives for post-acute care providers to admit hospital patients, noting that expecting the "system" to fix itself was an unreasonable expectation. In late March, 2022, DHS representatives indicated that the Department intends to contract with a third-party contractor to review the State's long-term care system to advance recommendations on systems improvement. DHS wants the contractor's report completed in time to influence the DHS 2023-25 biennial budget request to the Governor. Hopefully, this effort will help justify the need for further substantial investments in our long-term care system.

DHS presented to the Family Care/Managed Care Forum on a proposed timeline and plans to develop a minimum fee schedule for Medicaid Managed Long-Term Care programs. Shortly thereafter, LeadingAge Minnesota presented on how the State of Minnesota uses a fee schedule with its long-term care managed care programs. LeadingAge Wisconsin is using this information to proactively influence how DHS and its consultants will build rate bands.

LeadingAge Wisconsin coordinated multiple advocacy campaigns for members urging state legislators and administration officials to increase necessary funding for providers to address continued fiscal pressures associated with COVID-19 and the ongoing staffing crisis. We promoted member participation in various LeadingAge (national) Days of Action, encouraging members, their staff, and residents to send emails or make phone calls urging Congress to act on legislation that would provide essential support and relief for the long-term care provider community.

The LeadingAge Wisconsin Dementia Task Force made significant progress on the dementia designation program with the completion of three modules: Supportive and Therapeutic Environment; Information, Education & Support; and Assessments & Care Planning. The Task Force is developing two additional modules – Life Enrichment and Workforce. Next, the Task Force will begin to finalize the ranking and scoring so participating providers can complete the self-assessment to substantiate their level of dementia support/care.

LeadingAge Wisconsin developed tools and resources related to COVID-19 staff vaccine mandates, National Healthcare Safety Network (NHSN) reporting, Occupational Safety and Health Administration (OSHA) Healthcare Emergency Temporary Standard (ETS), visitation, and quarantine. Working with attorneys from Reinhart Boerner Van Deuren, LeadingAge Wisconsin provided a webinar and follow-up guidance to members on the federal vaccine mandate, provided sample policies and procedures, and helped facilities address questions on the process to follow when considering medical and religious exemptions.



Strategic Direction #2

Inspire, Advocate, Navigate and Facilitate a Vibrant Workforce



LeadingAge Wisconsin negotiated and signed an affiliation agreement with Cinematic Health Education securing for members/subscribers a \$175/student discount on the 40-hour, virtual didactic ReadyCNA training program. LeadingAge Wisconsin then partnered with two organizations that offered train-the-trainer sessions for members interested in training options for Primary Instructors for their CNA training programs. To further assist members interested in launching their own training program, LeadingAge Wisconsin developed 138 policies, procedures, checklists, quizzes, posttests, and other supporting documentation to help members as they completed the State's CNA Training Program Application. To date, 22 member organizations have submitted or are working to submit their application.

LeadingAge Wisconsin is partnering with another association to relaunch the WisCaregiver Careers program. The goal is to train 3,000 new CNAs within the next 18 months. The nearly \$6 million grant will cover the cost of CNA training and testing, as well as retention and mentoring bonus in the amount of \$500 each. Through the grant, we will be launching an impactful media campaign about the new program. LeadingAge Wisconsin members claimed the majority of scholarship money available through the previous launch of WisCaregiver Careers.

LeadingAge Wisconsin initiated efforts to identify employee mentor programs that currently exist, what we can learn from them, and what we can do to offer an employee mentor program template and training for members and subscribers so they will qualify for the mentor bonus that will be available through the new WisCaregiver Careers program.

As a follow up to a member survey related to employee satisfaction surveys, LeadingAge Wisconsin signed an affiliation agreement with WeCare Connect. The WeCare Connect platform can help providers drive down turnover, increase employee satisfaction, and gain valuable insights into their workforce through their non-anonymous surveys. Through the affiliation agreement, WeCare Connect will offer LeadingAge Wisconsin members a substantial discount on their system setup fee.

LeadingAge Wisconsin launched the Workforce Network. Nearly 100 individuals participate in these monthly meetings which address issues related to recruitment, retention, mentor programs, technology, and other issues that impact workforce.

Members of the Synergy Network have chosen to shift the focus of future meetings and initiatives to be more clinically driven in order to return to the original intent of the group. With this, Synergy Task Force members felt the need to increase education and networking opportunities to the growing role of Infection Preventionists in long-term care. Therefore, an Infection Preventionist Networking Group is being created to support this important role in our member communities.

The LeadingAge Wisconsin Independent Living (Senior Housing) Network continues to grow in participation and group interaction and has successfully adapted to meeting virtually. Several independent living directors have offered creative ways to share their individual housing offerings during network meetings by offering virtual building tours, sharing activity ideas, and walking through their websites.

Strategic Direction #3

Assist Members to Transform Programs and Services for Member Sustainability

Through the Safe Resident Assistant Program, members secured discounted pricing on lift equipment through Value First. We again were able to disburse \$15,000 of lift equipment through the Safe Resident Assistant Grant. This program has awarded over \$125,000 since its inception.

LeadingAge Wisconsin members accessed \$12,987,000 worth of goods and services through our Value First Group Purchasing Organization in 2021.

Strategic Direction #4

Ensure the Growth and Viability of LeadingAge Wisconsin

LeadingAge Wisconsin conducted a 2021 membership survey that documented a high degree of member satisfaction and deep appreciation of the Association's updates/information, advocacy, education, and networking. The LeadingAge Wisconsin Net Promoter Score was 84.38, reported by LeadingAge (national) to be the highest rated among all states.

The pharmacy partnership with HealthDirect went into effect on April 1, 2021. The overall goal for this VantagePoint program is to bring savings to members while experiencing improved service levels from their pharmacy partner. In less than a year, we have onboarded more than 30 communities and continue to expand the program.



**LeadingAge Wisconsin
Income Statement**

	2021-22 Budget	2021-22 Projected	Variance	2022-23 Budget
Member Dues	\$ 729,478	\$ 759,623	\$ 30,145	\$ 762,600
Associate Dues	\$ 27,518	\$ 35,002	\$ 7,484	\$ 35,000
LeadingAge Dues	\$ 48,700	\$ 52,381	\$ 3,681	\$ 50,000
Conferences/Seminars	\$ 324,675	\$ 351,595	\$ 26,920	\$ 429,275
Member Services	\$ 75,550	\$ 72,139	\$ (3,411)	\$ 73,925
Value First/Vantage Point	\$ 211,267	\$ 249,385	\$ 38,118	\$ 241,267
LeadingChoice Network	\$ 8,400	\$ 4,200	\$ (4,200)	\$ 8,400
Misc Income	\$ -	\$ 6,691	\$ 6,691	\$ -
Interest Income	\$ -	\$ 1,617	\$ 1,617	\$ -
Total Revenue	\$ 1,425,588	\$ 1,532,632	\$ 107,044	\$ 1,600,467
Staff Costs	\$ 940,225	\$ 1,016,914	\$ (76,690)	\$ 933,587
Professional Services	\$ 97,440	\$ 124,091	\$ (26,651)	\$ 112,000
Value First	\$ 27,000	\$ 3,047	\$ 23,953	\$ 12,000
Staff Travel	\$ 25,000	\$ 12,938	\$ 12,062	\$ 25,000
Professional Development	\$ 3,000	\$ 500	\$ 2,500	\$ 3,000
Board/Networking	\$ 23,000	\$ 24,480	\$ (1,480)	\$ 12,000
Office Insurance/Taxes	\$ 11,000	\$ 9,504	\$ 1,496	\$ 11,000
Telephone	\$ 6,000	\$ 6,369	\$ (369)	\$ 6,000
Copier	\$ 15,500	\$ 9,951	\$ 5,549	\$ 15,500
Postage	\$ 4,000	\$ 955	\$ 3,045	\$ 4,000
Computer Expense	\$ 15,200	\$ 20,763	\$ (5,563)	\$ 15,000
Printing	\$ 4,000	\$ 536	\$ 3,464	\$ 4,000
Supplies/Sub./Memberships	\$ 10,000	\$ 13,362	\$ (3,362)	\$ 10,000
Conferences/Seminars	\$ 222,735	\$ 253,766	\$ (31,031)	\$ 296,358
Legal Counsel	\$ 25,000	\$ 28,114	\$ (3,114)	\$ 25,000
Audit	\$ 8,000	\$ 8,000	\$ -	\$ 8,000
Bank Expense/Misc.	\$ 2,000	\$ 3,956	\$ (1,956)	\$ 4,500
Merchant Fees		\$ 16,770	\$ (16,770)	\$ 15,000
Member Services	\$ 32,391	\$ 23,944	\$ 8,447	\$ 25,500
Depreciation	\$ 21,000	\$ 21,000	\$ -	\$ 21,000
Office Building	\$ 28,500	\$ 25,758	\$ 2,742	\$ 28,500
Strategic Development	\$ -	\$ 6,000	\$ (6,000)	\$ -
Misc	\$ -	\$ 1,041	\$ (1,041)	\$ -
Total Operating Expenses	\$ 1,520,991	\$ 1,631,760	\$ 110,769	\$ 1,586,945
Net Revenue/Expenses	\$ (95,403)	\$ (99,128)	\$ (3,726)	\$ 13,522
Gain(Loss) Investments	\$ 65,000	\$ 56,971	\$ (8,029)	\$ 30,000
Net Income (Loss)	\$ (30,403)	\$ (42,158)	\$ (11,755)	\$ 43,522
Property & Equipment	\$ 8,000	\$ 5,286	\$ 2,714	\$ 8,000
Growth and Entrepreneurial fund	\$ 70,000	\$ -	\$ 70,000	\$ 70,000

2021-2022 Executive Committee

Chair: Kris Krentz, Skaalen Retirement Services, Stoughton
Immediate Past Chair & Senior Advisor: Craig Ubbelohde, Bethany St. Joseph Corporation, La Crosse
Chair Elect: David Fulcher, Milwaukee Catholic Home, Milwaukee
Vice Chair of Member Services: Stephanie Chedid, Luther Manor, Wauwatosa
Vice Chair of Operations: Tim Conroy, Capitol Lakes, Madison
Vice Chair of Public Policy: Sondra Norder, St. Paul Elder Services, Inc., Kaukauna
Secretary: Sue Seegert, Villa St. Francis, Milwaukee
Treasurer: Paul Treffert, Sheboygan Senior Community, Sheboygan
LeadingAge Liaison: Michelle Godfrey, Attic Angel, Madison

2021-2022 Directors at Large

Barbara Beardsley, Brookside Care Center, Kenosha
Stephanie Chedid, Luther Manor, Wauwatosa
Tim Conroy, Capitol Lakes, Madison
Amy Duhr, Grace Lutheran Foundation, Eau Claire
David Fulcher, Milwaukee Catholic Home, Milwaukee
Kim Gochanour, Oakwood Village Prairie Ridge, Madison
Michelle Godfrey, Attic Angel, Madison
Sandra Hackenmueller, St. Croix County, New Richmond
Sondra Norder, St. Paul Elder Services, Inc., Kaukauna
Michael Sattell, Ovation Communities, Milwaukee
Kevin Schwab, St. Camillus Health Center, Wauwatosa (formerly)
Sue Seegert, Villa St. Francis, Milwaukee
Patrick Senzig, Bethany Lutheran Homes, Eagle Crest Communities, La Crosse
Frank Soltys, Felician Village, Manitowoc
Paul Treffert, Sheboygan Senior Community, Sheboygan
Jennifer Vosen, Oakwood Lutheran Senior Ministries, Madison
Zach Ziesemer, Pine Crest Nursing Home, Merrill (formerly)

2021-2022 Regional Directors

Region 1: Kathy Cavers, The Lutheran Home, Wauwatosa
Region 2: Erin Francois, New Glarus Home, New Glarus
Region 3: Marissa Janke, Bethany Lutheran Homes, Eagle Crest Communities, La Crosse
Region 4: Ellen Thompson, Heritage of Elmwood, Elmwood (formerly)
Region 5: Justin Cieslewicz, Homme Home of Wittenberg, Wittenberg

LeadingAge Wisconsin Staff

President & CEO: John Sauer
Vice President of Public Policy & Advocacy: Annette Cruz
Vice President of Member Services & Innovation: Janice Mashak
Vice President of Financial & Regulatory Services: Rene Eastman (formerly Brent Rapos)
Director of Business Development: Denise May
Director of Housing & Clinical Services: Robin Wolzenburg
Member Services Assistant: Sarah Paterson
Accounting Services Assistant: Libby Rapos