

The Future of Ridgewood Care Center



Ridgewood's Changing Purpose



Past County Responsibility

- Prior to 2008, Racine County was responsible for the long-term care services of the indigent (Medicaid population)
- The County was obligated to fund 40% of these costs
- Waiting lists were common and long
- Nursing homes filled the gap created by waiting lists





Family Care

- In 2008, Family Care shifted the responsibility from the County to the State to provide services to the elderly, the physically disabled, and the developmentally disabled
- Family Care eliminated wait lists and created more community options to provide services to these populations
- Residents have different and more long-term care choices
- Family Care has the goal to keep patients at home rather than in nursing homes





Changes in Long Term Care

- Today, most Family Care members do not reside in Nursing Homes
- Community Based Long Term Care caseloads have doubled in the past 10 years due to nursing home diversion and increased community options
- Patients who do need nursing homes will have a high acuity (severity) rate (i.e., Medicaid may not cover their care)





Role of Ridgewood

- Nursing homes are no longer needed to fill gap (no waiting lists)
- Nursing homes have expanded to include more rehabilitative services
- Ridgewood was established as a for profit enterprise fund to compete in the market
- This was a fundamental change approved by the County Board





Ridgewood's Mission Statement

Ridgewood Care Center is a county-owned multi-specialty long-term care facility. We are dedicated to providing high quality skilled nursing care and rehabilitation services to Racine County residents. In partnership with the Human Services department, we provide a competitive continuum of long-term care and community based services in the most appropriate settings ensuring choice, dignity, and quality of life.





Question

How does Racine County guarantee access to "high quality skilled nursing care and rehabilitation services" for Racine County residents and maintain financial sustainability?



Ridgewood Today



Successful Payer Mix

- In order to compete in this business, Medicare, Private Pay, Rehab Services, and other non-Medicaid services are needed
- Successful providers are selective in their admission process
- To attract this profitable population, Ridgewood must compete against community partners



Competition in Area

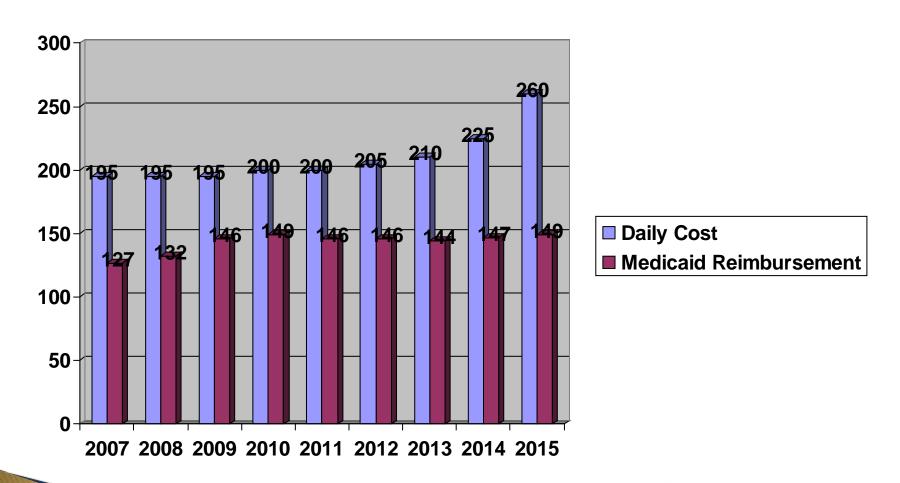
- Lakeshore Manor: 50 bed facility- holds 50% Medicare census
- Siena on the Lake: Looking to obtain nursing home bed licenses- may take another 20-25 Medicare
- Becker Shoop: 20% Medicare or 14 beds
- ▶ The Villa: 9% Medicare or 11 beds

Current Ridgewood Medicare Census: 25 beds or 14% (Numbers can vary)





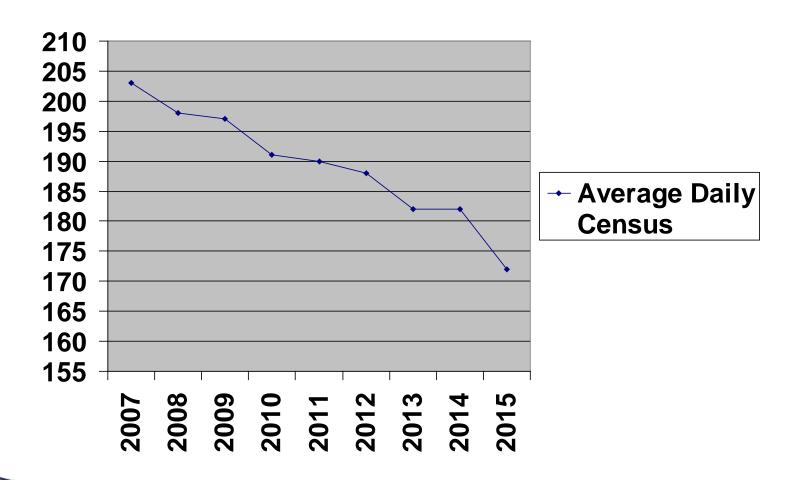
Ridgewood Daily Cost vs. Medicaid Reimbursement







Average Daily Census







Current Capital Budget

RACINE COUNTY										
FIVE YEAR CAPITAL IMPROVEM	ENTS PLAN		3205	Wood Ro	ad - Ridge	wood Car	e Center			
	PRIOR PERIODS APPROVED			CAPITAL 5 YEAR PROPOSED PROJECT						
									TOTAL	FUNDING
Description	2014	2015	FN.	2016	2017	2018	2019	2020	2016-2020	2016-2020
Yearly Painting & Wood Finishing	15,000	20,000	3,6,7	20,000	20,000	20,000	20,000	20,000	100,000	(100,000)
Beds & Bariatric Beds	15,165	24,796	5,6	7,777	30,900	31,827	32,782	33,765	129,274	(129,274)
Flooring	15,000	30,000	6,7	30,000	25,000	25,000	25,000	30,000	135,000	(135,000)
Pow er Optimizer	,	9,500	3,4					,	0	0
Yearly Mechanical Repairs		7,000	6		14,000	7,000	7,000	7,000	35,000	(35,000)
Lifts		10,046	6		24,360	12,731	13,113	13,506	63,710	(63,710)
Yearly Electrical Compenent Maintenance		15,000	3	15,000	15,000	15,000	15,000	15,000	75,000	(75,000)
Tub		19,195	5		23,928	24,646	25,385	26,147	100,106	(100,106)
Replacement of Nurse Call System		130,000	5						0	0
Replace Kitchen Cabinets on units		80,000	5		95,500				95,500	(95,500)
Yearly Air Duct System Cleaning		35,000	3	35,000	35,000	35,000	35,000	35,000	175,000	(175,000)
Upgrade Florescent Lighting to LED			5	22,000	22,000				44,000	(44,000)
Burner Replacement			5	180,000	180,000				360,000	(360,000)
Replace RN Station /Med Room					78,000	59,740	61,532	63,378	262,650	(262,650)
ITEMS UNDER \$20,000 COMBINED	26,826	2,500	5,6	16,500	1,500	1,500	1,500	1,500	22,500	(22,500)
TOTALS	71,991	383,037		318,500	565,188	232,444	236,312	245,296	1,597,740	(1,597,740)
Funding Sources:										
Service & User Fees		(112,000)							0	
Proceeds From Bonds	(15,165)	(229,195)		(180,000)	(377,425)	(84,386)	(86,917)	(89,525)	(818,253)	
General Reserves	(22,746)	(41,842)		(138,500)	(187,763)	(148,058)	(149,395)	(155,771)	(779,487)	
Tax Levy	(34,080)	· · · · · · · · · · · · · · · · · · ·							0	
									0	
TOTAL FUNDING SOURCES	(71,991)	(383,037)		(318,500)	(565,188)	(232,444)	(236,312)	(245,296)	(1,597,740)	





Debt Service for Ridgewood

CAPITAL BUDGET APPROVED BY COUNTY EXECUTIVE	
2016	318,500
2015	383,037
2014	71,991
2013	385,136
2012	444,011
2011	902,455
2010	456,313
2009	353,559
2008	303,300
2007	196,250



Ridgewood Financial Future

Future Projections

- According to the 2016 WIPFLI study, Ridgewood is projected to experience major revenue deficits in the future.
- We are currently losing money.
- Ridgewood stays afloat financially with transfers from county reserves and tax levy. *This is not a permanent solution.*
- By 2020, we anticipate an estimated \$2.65 million shortfall.



WIPFLI 2016

 Updated analysis of Net income loss for 2016–2020

	2016	2017	2018	2019	2020
Income* (loss)	\$2.2 million	\$2.3 million	\$2.4 million	2.5 million	2.6 million

^{*} Includes capital projects, general fund transfers, depreciation, and operating expenses/revenues





Intergovernmental Transfers

- We are dependent on intergovernmental transfers of approximately \$1.3M per year to absorb some Medicaid loss
- If we change our payer mix, we will lose a percentage of the IGT funds
- This is not guaranteed funding each year
- Medicaid losses continue to grow, IGT money remains flat



Medicare Payments Changes

- Medicare bundle payment pilot program in the State of Wisconsin in the Milwaukee and Madison area
 - reduced nursing home admissions by 36%
 - reduced rehab days from 21 to 8
- Milwaukee Journal Sentinel Article Sunday, April 17, 2016

http://www.jsonline.com/business/payment-model-shows-potential-to-lower-costs-and-improve-quality-b99706511z1-375951591.html





Medicare Bundle Payments

- Medicare Reimbursement Bundle Payments are the future.
- The Federal Government is going to a pay for performance. What does this mean?
- Hospitals are going to be directing care coordination through detailed case management.



Nursing Home Realities



Changing Demographics with Dwindling Resources

- Responsibility for the most vulnerable population has already been removed from the County nursing home care
 - Mental Illness
 - Developmentally Disabled
 - TBI
 - Vent Care

(Note: County Board voted for this change when Ridgewood opened in 1986)





Ridgewood Not Unique

- All seven nursing homes in Racine County admit Medicaid
- Only 5% of our County's 300 protectively placed individuals are at Ridgewood



Strong State Regulations

- Excellent regulatory environment specific to nursing homes
 - Blind to ownership type
 - Poorly run facilities are quickly addressed and issues rectified by Department of Quality Assurance
 - Appropriate Staffing Levels Required



Consumer Protections

- For residents of all payment sources
 - > Payer source only matters upon initial admission
 - >Any operator will continue to have Medicaid
 - Regional and National data shows that Medicaid will continue to be an integral payer source for all Skilled Nursing Facilities



Employee Protection

- All prospective buyers have to recruit from the same talented labor force market
 - Competitive marketplace
 - Need talented staff
 — we have them
 - Highly improbable that new owner will cut wages
 - In order to be competitive, prospective buyers will offer benefit packages to employees
 - All interested parties in other brokered offers have had market-based benefits



Benefits of Large Regional Operators

Economies of Scale in Health Care Corporations

- Able to have a corporate team of specialists to deploy to regional operations including
 - Quality assurance
 - Admissions
 - Personnel management/recruitment
 - Finance and budget analysis
 - Technology
- Pool of employees to fill shortages avoiding overtime and service gaps



Additional Efficiencies with Regional Operators

Bulk Purchasing

- Health care supplies, food service and other programmatic services
- Reduce expenses and overhead

Superior Software

 Enables operators to attract and simulate payments, and discharge at a more efficient rate than single operators



Racine County Feeder Hospitals

- Racine County's unique hospital network
- One major hospital east of I-94 with a proprietary nursing home



County-wide Services?

- Ridgewood by standard is not a county wide service to our taxpayers.
- ▶ We currently have less than 5 residents West of I-94.
- In fact, we are subsidizing more residents out of state than we are West of I-94.



Task Force Recommendation: Engaging a Broker



Ridgewood Market Value

- High demand for skilled nursing facilities
- Excellent market at the moment
 - Low interest rate environment
 - Consolidating services

Attractive Qualities

Large Facility

Young/Old Physical Plant

Metropolitan Area





Competitive Process

- Only through competition can we achieve our goals:
 - Reputable Lessee/Owner
 - Commitment to Patient Care
 - Commitment to Legacy
 - Commitment to Mission Statement
 - Potential to Expand
 - Current Position of Strength (occupancy/quality mix)
 - Property Taxes (Pass through)





Due Diligence

- Due diligence means to explore all the available options.
- The engagement of a broker taps into the knowledge necessary to determine these options.
- Our common goal is to determine the best path forward for Ridgewood and for Racine County.

