



Key Performance Indicators Report:

KPI

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Economic Assistance and Work Services

EAWS Caseload (chart 1):

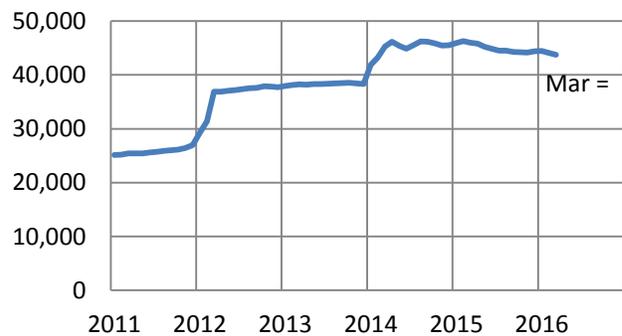
In the 1st quarter of 2016 applications remained steady with caseloads averaging around 44,100.

Call Center Activity (charts 2 and 3):

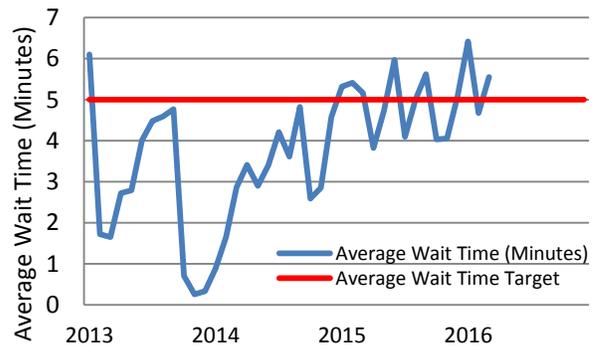
The Call Center serves 8 counties including Dane. Standards of performance have been established. The agency's goal for average wait time for answering the phone is five minutes or less. The goal for the percentage of calls answered by agents is 85% or greater of total calls.

In the 1st quarter of 2016 Call Center volume ranged from a high of 31,484 calls in January to a low of 28,886 in February. The increase in call volume is attributed to the addition of Sheboygan County to the Capital Consortium and calls typically spike during Federally Facilitated Marketplace (FFM) open enrollment periods. Given the increased volume average wait times in January and March exceeded the 5 minute benchmark. Average wait time in the 1st quarter was 5.5 minutes. Chart 3 reflects an answer rate for the 1st quarter that consistently surpasses the 85% benchmark.

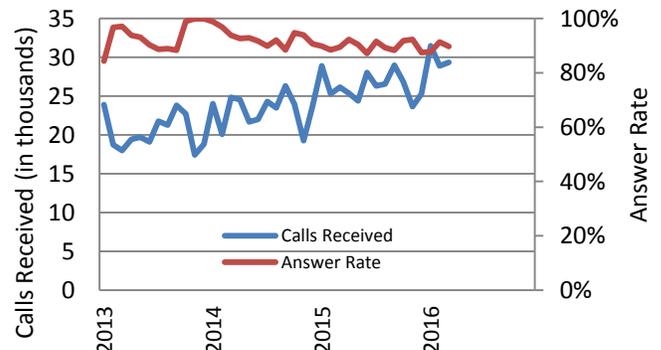
EAWS - Unduplicated Cases



Average Wait Time (Phone)



Calls Received and Answer Rate



Adult Community Services

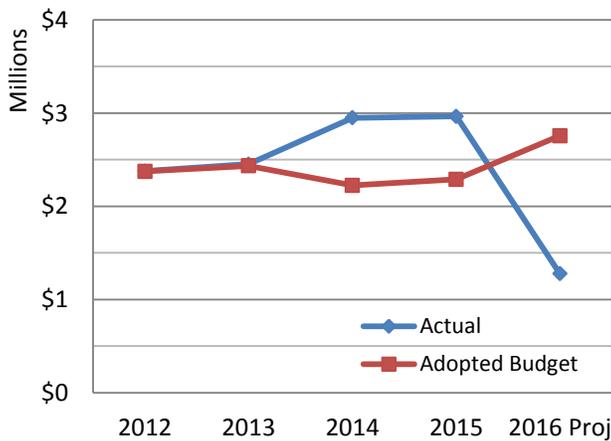
Inpatient utilization: Mendota Mental Health Institute and Community Hospitals

For more than 10 years ACS Division work plans have included a strategic initiative to reduce inpatient utilization for adults in state institutions including adults admitted to the gero-psychiatric treatment unit at Mendota Mental Health Institute (MMHI). Placements cost about \$1,000/day with Medicare, Medicaid and private insurance covering a portion of the cost.

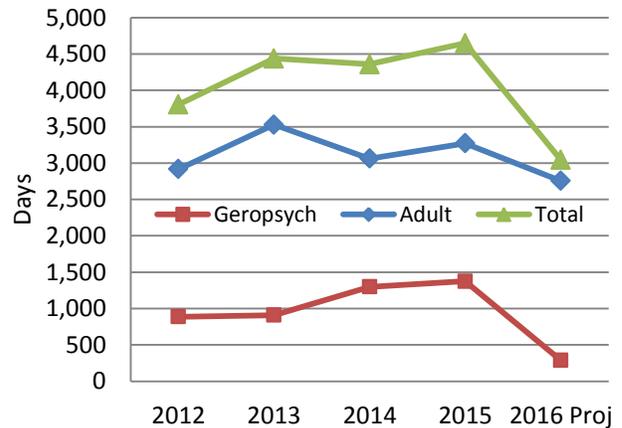
With data through the 1st quarter, inpatient days for the adult mental health population are projected to be 2,755 days. Inpatient days for the gero-psychiatric population are projected at 289 days, a significant drop in comparison to prior years. It is not uncommon that patient days are low in the winter months. First quarter revenues that offset expenses were higher than normal. A projection of 1st quarter data would suggest a possible surplus of \$1.5m as reflected in the 1st graph below. This is not the anticipated trend for the year. It is impossible for future months revenues to remain high if days are low.

Utilization of community hospital beds remains low. This may be attributed to a combination of more people having insurance and hospital admission practices.

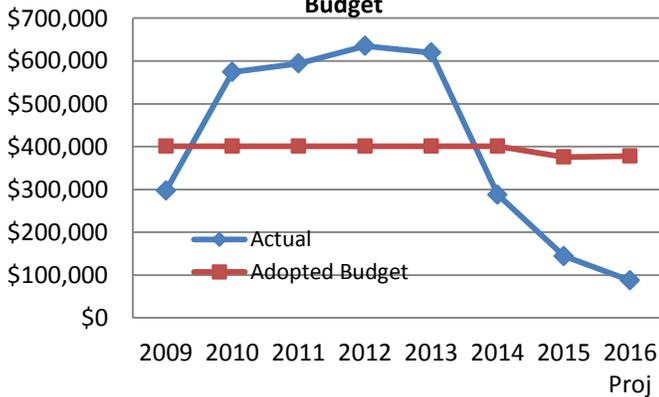
ACS - State Institutional Costs vs Budget



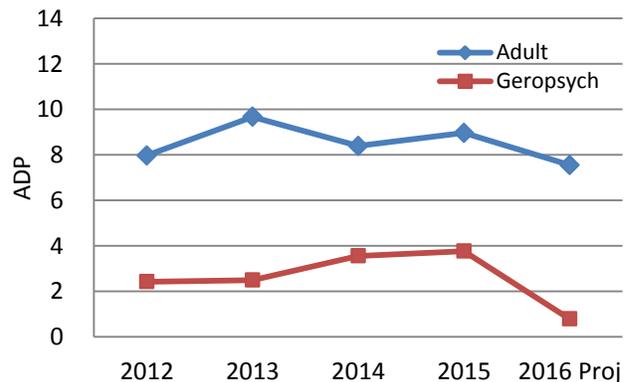
ACS - State Institutional Mental Hospital Days



Community Hospitals - Actual vs Adopted Budget



ACS - State Institutional Mental Hospital Average Daily Population (ADP)



Badger Prairie Health Care Center

Residential Care Costs

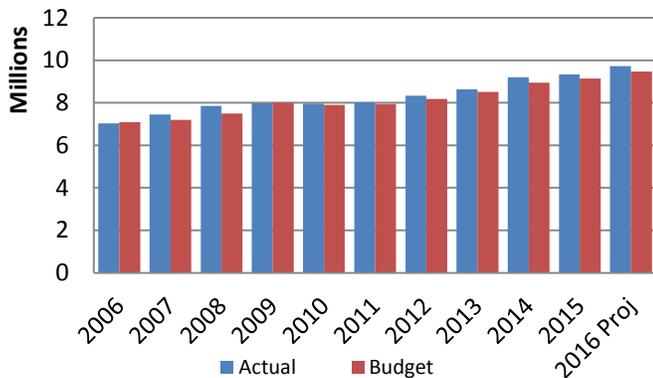
The largest components of service costs at Badger Prairie are personnel related (including staff salaries, overtime, LTE, and agency contracting). Sick leave usage, and leave without pay, including family and medical leave, are key factors contributing to high overtime, LTE and contract costs, and diminish continuity of care. High levels of accrued leave time have a direct result on open shifts needing to be filled and worker's compensation injuries lead to vacated shifts are also contributing factors to overtime use.

The census at the facility or average daily population (ADP) has a significant impact on revenues coming into the facility.

With data through the 1st quarter of 2016 we are projecting salary costs in excess of budget of approximately 3% (\$254,000). Census is budgeted at a population of 115 compared to a current projection of 111 ADP.

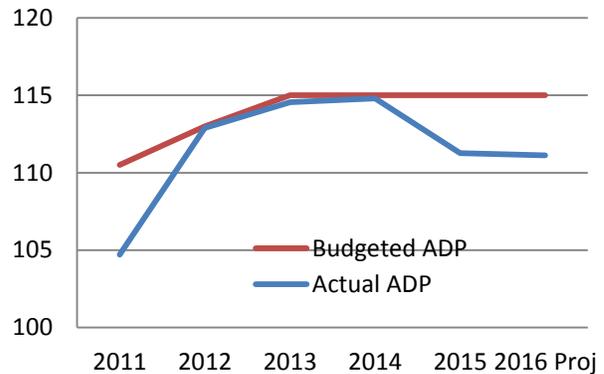
Unplanned absences are projected to rise in 2016 based on 1st quarter data, particularly in the use of vacation and holiday benefit time. Worker's compensation costs have fluctuated over the last 5 years. There was a \$50,000 dollar reduction in claims from 2014 to 2015.

Total Personnel Expenses: BPHCC

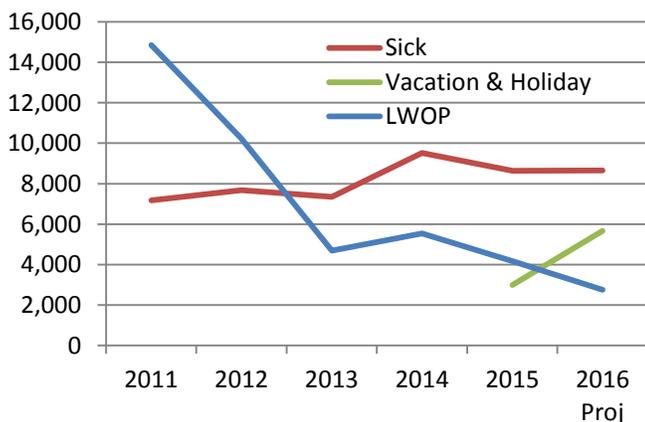


* includes Personnel, Overtime, LTE, & Contract

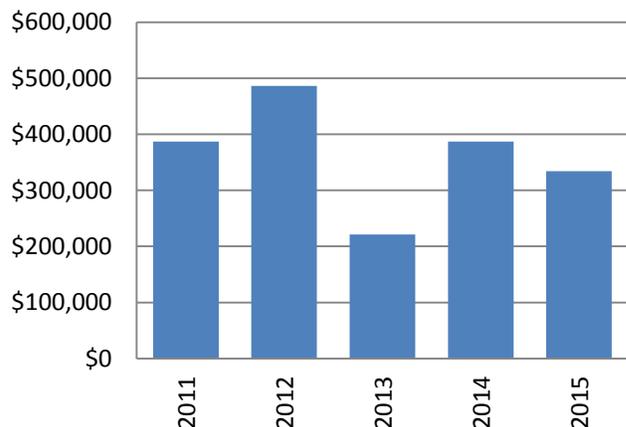
Average Daily Population 2011-2016



Unplanned Absences (in hours) by Type



Worker's Comp. Expenses



Children, Youth and Families

Alternate Care: One of the main variable costs for the Children, Youth and Families (CYF) Division is Alternate Care (AC). Youth are placed in AC when they have been abused, maltreated, committed delinquent acts, or have mental health needs and it is not possible to maintain them in their family homes or in the community. Graphs show the budgeted Average Daily Population (ADP) as the black line along with the Actual ADP's for each type of care. With information through March of 2016, Alternate Care is projected to produce a surplus of roughly \$312,000 mostly due to low Corrections and Group Home Costs.

