



# Key Performance Indicators Report:

# KPI

Volume 4, Issue 2

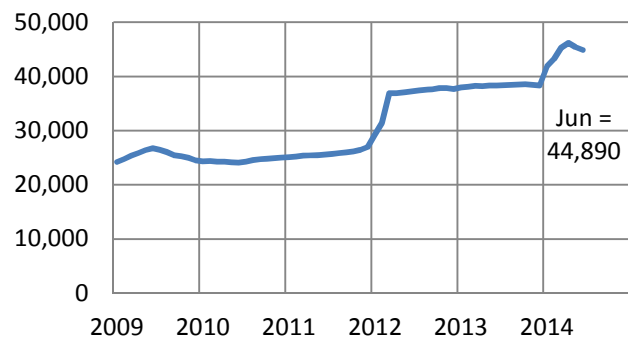
August, 2014

## Economic Assistance and Work Services

### EAWS Caseload (chart 1):

Dane County will be completing all of the Federally Facilitated Marketplace (FFM) applications for the Capitol Consortium. Application volume peaked in April with the receipt of 4,081 applications. Another 917 were received in May and June for a total of 4,998 for the 2nd quarter. May and June activity is more representative of what should occur between open enrollment periods. Caseloads continued to rise in April then tapered slightly in May and June with a total caseload of 44,890.

EAWS - Unduplicated Cases

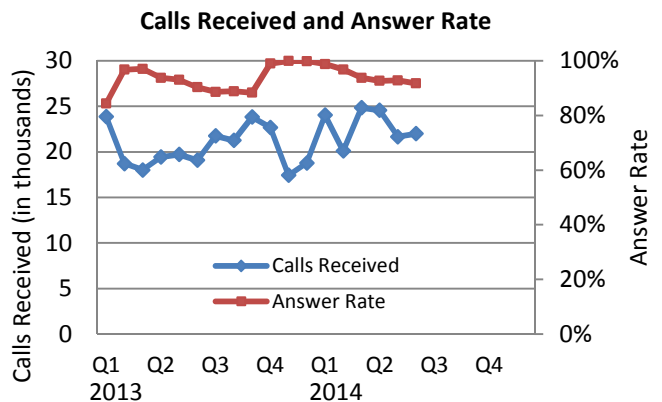
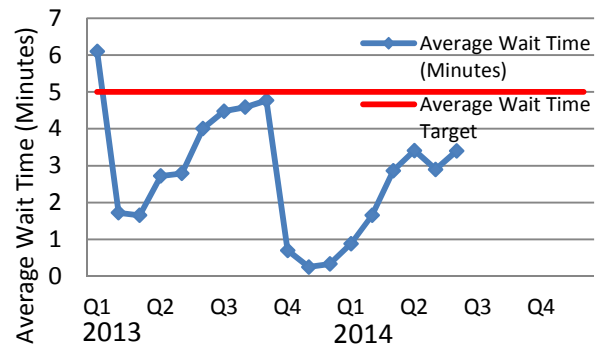


### Call Center Activity (charts 2 and 3):

The Call Center serves 7 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.

Call Center volume began to decrease in the second quarter of the year with 21,993 calls in June, which is an 11% decrease from the call volume at the end of the 1st quarter. Wait time in the 2nd quarter remained below the 5 minutes benchmark. Chart 3 reflects the decrease in call volume and an answer rate that remains above 90% for the quarter.

Average Wait Time (Phone)



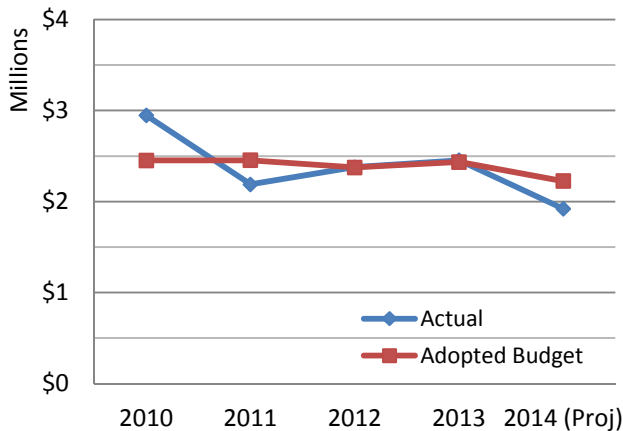
# Adult Community Services

## Inpatient utilization: Mendota Mental Health Institute and Community Hospitals

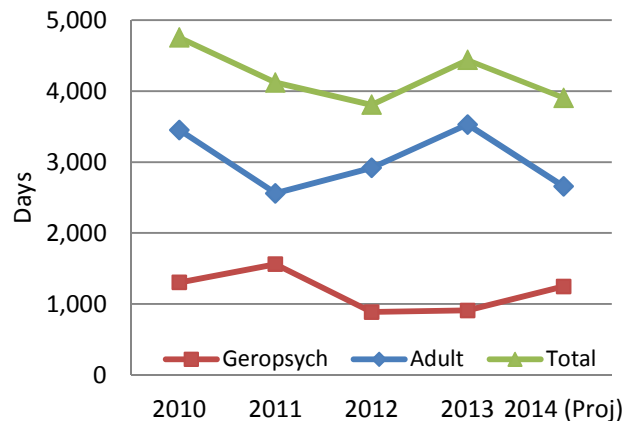
For more than 10 years ACS Division work plans have included a strategic initiative to reduce inpatient utilization for adults in state institutions including adults admitted to the gero-psychiatric treatment unit at Mendota Mental Health Institute. Placements cost about \$1,000/day with Medicare, Medicaid and private insurance covering a portion of the cost. The 2nd quarter of 2014 saw a drop in inpatient days for the adult mental health population while gero-psychiatric days have remained steady. With the 2nd quarter drop in inpatient days, Mendota Mental Health Institute/Winnebago Mental Health Institute inpatient costs are currently within budget.

At the end of the 2nd quarter, community hospital days continue to remain lower than they have been in recent years. If this trend continues, end of year expenses will be well under budget.

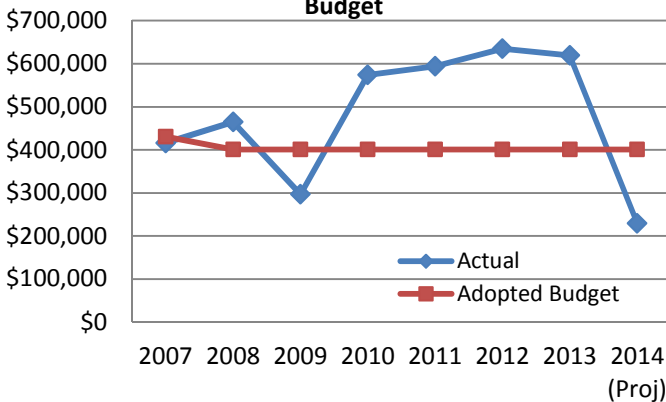
ACS - State Institutional Costs vs Budget



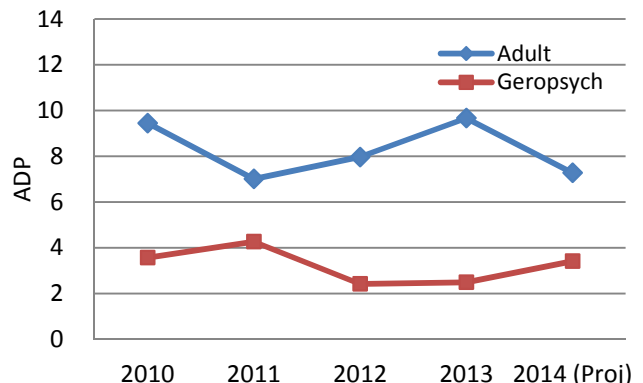
ACS - State Institutional Mental Hospital Days



Community Hospitals - Actual vs Adopted Budget



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



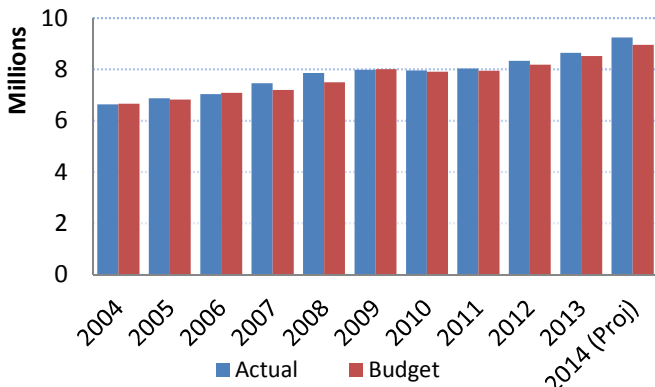
# Badger Prairie Health Care Center

## Residential Care Costs

The largest component 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.

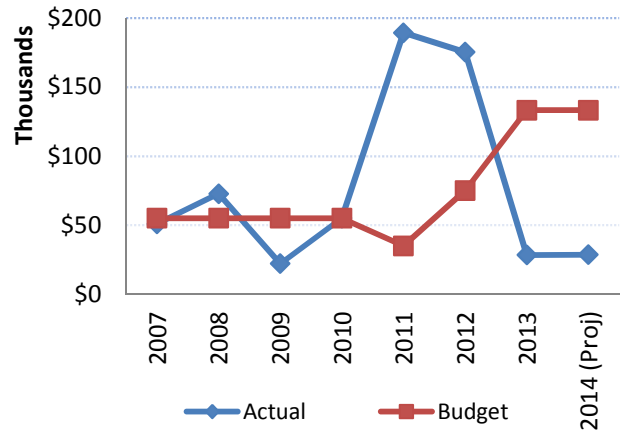
Data through the 2nd quarter continues to show Salary and LTE costs exceeding budget. One factor responsible for the increase in LTE costs is a pilot project underway in the Dementia Care Unit that has increased staffing patterns on the unit. The increase in expenses is partially offset by savings in the contract and overtime expense lines. Overall personnel expenses are projected to be 3% or roughly \$288,000 over budget.

**Total Personnel Expenses: BPHCC**

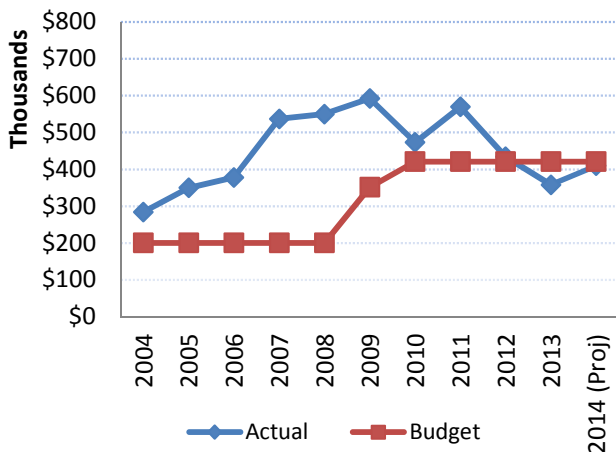


2006-2014 Projected includes Personnel, Overtime, LTE, & Contract

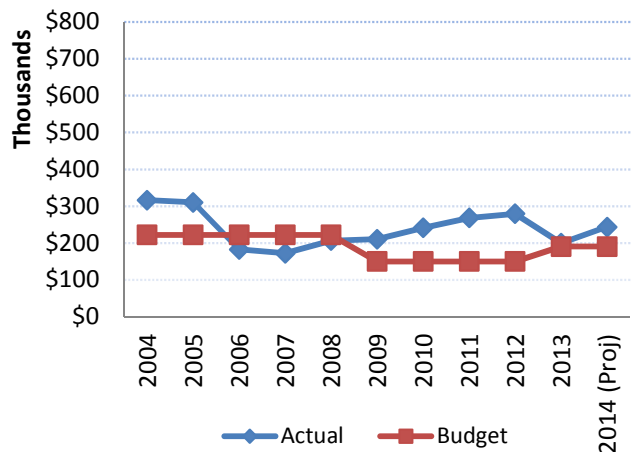
**Contract Expenses: BPHCC**



**Overtime Expenses: BPHCC**



**LTE Expenses: BPHCC**



# 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 June of 2014, Alternate Care is projected to produce a surplus of roughly \$81,000 mostly due to a low ADP in Youth Corrections.

