



the difference is *striking*

2015-2016
Annual Report

LeadingAge™
Wisconsin
Better Services for Better Aging

Strategy #1: Guided by our mission, LeadingAge Wisconsin will assist members in developing their futures.



During Fiscal Year 2015-2016, the LeadingAge Wisconsin Board of Directors engaged in an intensive strategic planning process to ensure the Association is well positioned to achieve its mission of membership service. The Board's discussion began by reviewing the highlights of the 2016 Member Satisfaction Survey. The survey documented members' commitment to and support of their Association. It also clearly signaled that workforce challenges are pervasive throughout the membership and, relatedly, documented concerns regarding how changing payment systems (Medicare Advantage, Family Care, bundled payments, ACO, etc.) will impact their organizations. The Board's discussion focused on changes occurring within four areas: Consumers (wants/needs, preferences, and payments); delivery systems with changing payments and incentives; the evolution of LeadingAge Wisconsin members and their organizations; and competition in the marketplace. Discussions also reflected on how to inspire purposefulness to older adults, embrace the missions of member organizations, and bring new technologies to aging services. Based on the pace of change, identified trends, and predictions on how payment and delivery systems will change, the Board of Directors identified five Winning Strategies for moving LeadingAge Wisconsin through 2016 and beyond.

Underlying these five Winning Strategies is a major emphasis focusing on why members do what they do. This passionate commitment to mission throughout the membership, along with members' steadfast allegiance to the association and its goals, is what sets LeadingAge Wisconsin and its members apart. The collective membership fueled the engine of purpose, the Winning Strategies set the direction, the association kept the journey on course and, at year end, the difference we made is, indeed, striking, as demonstrated by the highlights detailed throughout the LeadingAge Wisconsin 2015-2016 Annual Report.

The Association's efforts to assist members in developing their futures continued with a renewed effort to keep top executives informed. LeadingAge Wisconsin strengthened our relationship with the sponsor for the CEO Network, making it possible for the association to grow the network and offer CEO Network meetings at no cost to members and subscribers. Meetings throughout the year focused on issues identified directly by the participating CEOs, assuring the meetings are valuable and insightful. These meetings addressed matters of critical importance to member organizations, such as:

- Successfully operating within changing delivery and payment systems
- How to effectively lower costs and maintain high quality
- Developing relationships with acute care providers
- Managing care versus providing episodic care
- Managing your board
- Scorecard metrics
- Knowing your episodic cost of care

- Nursing home bed competition
- Workforce issues

In addition to the CEO Network meetings, educational offerings throughout the year invited members to participate in high-level discussions that took them beyond the day-to-day operations of the organization and into the realm of possibilities of the future. Members had opportunities to learn about the shifting landscape of American healthcare, managed care and value-based systems, building relationships and partnerships with emerging or non-traditional provider service organizations, and aging services around the world.

While the vision of LeadingAge Wisconsin is set on the future of our members, we are ever vigilant of the day-to-day issues we must resolve to move members into the future. Our strong advocacy efforts successfully carried members' collective voice in a multiple of arenas. LeadingAge Wisconsin staff provided expansive testimony to the Centers for Medicare and Medicaid Services (CMS) questioning many of the dramatic changes proposed to the federal nursing home rule. The Association clearly summarized multiple rule provisions and gave specific guidance on how members should respond to CMS with their own comments.

LeadingAge Wisconsin staff represented members at a six-state meeting with CMS Region V at which we advocated for a survey system focused on quality improvement rather than punishment. Our conversations addressed the proposed HCBS waiver regulations, 5-Star reports, and managed care appeals.

LeadingAge Wisconsin reviewed property appraisals based on the new appraisal firm contracted by the Department of Health Services (DHS) and found significant errors in the calculation of nursing home appraisals. Without the corrections, Wisconsin's nursing home would have received lower Medicaid property allowance payments and DHS would have underpaid nursing homes millions of dollars.

LeadingAge Wisconsin thwarted efforts by a real estate investment company to amend the Resource Allocation Program under Chapter 150, Wis. Stats., to gain a competitive advantage in the transitional care field. We contracted with NorthStar Economics to determine that, over the past five years, Wisconsin's skilled nursing and assisted living providers created over 16,600 construction jobs that generated net tax revenues of \$65 million, averaging 3,327 jobs and \$13 million in tax revenues each year.

With a focus on financing long-term care into the future, LeadingAge Wisconsin increased the visibility of Pathways (national long-term care financing options) and featured a national consultant on this proactive effort at the 2016 Spring Conference.

Strategy #2: LeadingAge Wisconsin will support workforce and leadership development to ensure the success of members.



From the 2016 Member Satisfaction Survey, we learned from every membership group that services related to recruiting, retaining, and training staff are the most sought after new or expanded services from the Association. LeadingAge Wisconsin immediately realigned our efforts to address this pressing need with a variety of programs and services.

To get this new initiative rolling, LeadingAge Wisconsin hosted a special workforce forum. More than 125 individuals attended to share their concerns, strategies, and best practices. Four students from the UW-Eau Claire Health Care Administration program shared their perspective on what draws and keeps young employees in any given position. This special workforce forum was the spring board for numerous programs and projects related to workforce.

One such project is the new LeadingAge Wisconsin workforce website featuring tools, policies, and best practices related to workforce issues. Developed just last fall, the website already has 57 documents on important workforce issues such as: Applicant Screening, Catching, Keeping & Cultivating the Right Employee, CNA Training, Dementia Care Training, Employee Communication, Employee of the Month, In-House Staffing Pools, Internet (Web-based) Resources, Leadership Training, Mentor Programs, Nurse Recruitment, Organizational Recruitment Plans, Orientation Programs, Recognition Programs, Referral Bonus, Retention Programs, Scholarship and Tuition Reimbursement Programs, Sign On Bonus, and Work Schedules.

With many efforts and most groups throughout the Association focusing on workforce, the LeadingAge Wisconsin DON ELITE education and networking program followed suit. This year's participants added recruitment, retention, and team building to their traditional slate of clinical issues discussed throughout the year.

The workforce education piece continued at the 2015 Fall Conference when Christine Mueller from the University of Minnesota School of Nursing talked about becoming a preferred partner with schools of nursing where nursing students can learn about geriatric nursing care, the unique role of registered nurses in long-term care, and strategies to recruit this future nursing workforce. Bryan Bessa from Grace Lutheran Foundation in Eau Claire shared his organization's strategies to build strategic community partners to their organization through measures such as bringing the CNA training program back into the local high school. LeadingAge Wisconsin already is investigating other opportunities that would partner member organizations with schools not only to build a bridge from the school to potential career paths for students, but also to create opportunities for resident engagement.

To keep the momentum rolling, the 2016 Spring Conference featured our first Workforce Summit to help members identify the current and shifting workforce demographics, discuss the evolution of employee expectations over the past decade, analyze how generational differences impact the workforce and why today's youngest generation of workers thinks and acts differently than previous generations, and identify strategies for reducing unnecessary employee turnover and increasing staffing stability.

From both our Assisted Living Survey and our Member Satisfaction Survey, we learned the piece missing in our educational offerings was training for direct care staff. LeadingAge Wisconsin immediately shifted to address this expressed member need. Not only did staff begin presenting in-person training sessions for member organizations, but the association also planned a special two-part presentation for direct care staff at the 2016 Spring Conference (with special pricing) and began offering direct care staff networking forums through Echelon.

The LeadingAge Wisconsin Echelon, designed to assist those who strive for excellence in assisted living, previously had focused heavily on clinical quality initiatives. Throughout Fiscal Year 2015-2016, LeadingAge Wisconsin brought a new dimension to Echelon with an intense focus on developing materials to assist Echelon members with recruitment, hiring, orientation, training, and retention. The Echelon Task Force developed a list of interview questions to consider asking potential employees during their interview. The intent is to ask the questions that will help Echelon members identify those candidates who share our passion for caregiving -- those who believe what we believe. Efforts are underway to develop sample orientation, training, mentoring, and retention programs.

I-LEAD is building leadership skills throughout the LeadingAge Wisconsin membership. Sixteen fellows graduated from I-LEAD in its first year, and additional 18 fellows will be graduating from the program in June. This leadership development program exposes fellows to different thought processes, a variety of learning activities, guided readings, self-reflection, diversity of opinions, new ways of thinking, problem solving, team work, guidance from esteemed leaders, and networking.

With workforce programs and strategies at work at various levels, LeadingAge Wisconsin began working with four other associations to conduct a statewide survey focusing on key workforce issues. The purpose of the survey was to determine vacancy rates and the impact of other workforce woes. Nearly 700 facilities completed the survey. The results of this survey will help LeadingAge Wisconsin draft our policy positions related to workforce going into the next biennial budget planning discussions.

Strategy #3: LeadingAge Wisconsin will help members to operate successfully within changing delivery and payment systems.



In addition to keen interest on workforce issues, the 2016 Member Satisfaction Survey clearly indicated members' number one decision-makers (CEOs) also identified services related to the changing payment and delivery systems and the creation of LeadingChoice Network as valuable new/expanded services. This provided the impetus for the Association to spearhead a number of new initiatives in this area.

LeadingAge Wisconsin created the Managed Care and Alternative Payment Task Force to build a strategic agenda to address rapidly changing payment and delivery systems. The Task Force crafted a three-prong approach: Phase One was conducting an Environmental Scan; Phase Two was developing the Managed Care Toolkit; and Phase Three was coordinating Membership Collaborative Efforts.

During Phase One, LeadingAge Wisconsin developed the Request-for-Proposal, which resulted in bids from 22 companies. The Task Force completed a comprehensive scoring worksheet and conducted interviews that led to the selection of LeadingAge (national) and CliftonLarsonAllen (CLA)/Nellie Johnson. LeadingAge completed a Wisconsin-specific environmental scan that provided members with detailed information on Medicare Advantage plans, bundled payments, ACO developments, commercial insurance and public payors, and then she presented an overview of the scan to the Board of Directors and to members.

As Phase One came to its conclusion, the association already was ramping up for Phase Two. Members received a comprehensive Toolkit and Worksheet document detailing managed care contract provisions, gain-sharing arrangements, troublesome contract provisions, performance metrics and a worksheet template for providers to develop their "value proposition" when negotiating with payors.

The Toolkit generated many intense discussions around the state, leading the Managed Care and Alternative Payment Task Force to consider strategies to best position members in the changing marketplace. After careful and comprehensive deliberations, the Task Force recommended the creation of a provider network designed to collectively/collaboratively raise the bar of quality, thereby creating interest among the payors. The Board of Directors authorized additional resources to bring this recommendation to fruition. Extensive work with CLA/Nellie Johnson and Reinhart Boerner Van Deuren resulted in the completion of the operating agreement, participation agreement, and letter of intent. The LeadingChoice network was born.

While simultaneously navigating the waters of network formation, LeadingAge Wisconsin hosted conference sessions featuring a variety of esteemed presenters who discussed multiple perspectives of the changing delivery and payment systems. Conference sessions featured generative discussion on

topics such as the changing landscape of American healthcare, new steps for dealing with ACOs and managed care, bundled payments for joint replacement surgery, evolutionary business practices for LeadingAge organizations, the hospital's perspective of how health care is evolving – from the way people access care to the way care is delivered, the value of cultivating new relationships, drafting our response to the challenge of financing long-term services and supports, post-acute care and payment reform, and strategies to navigate value-based care.

We enhanced our strong core service of advocacy in our ongoing efforts to represent member interests as the delivery payment systems weathered numerous changes and fluctuations. This was particularly evident in the area of Family Care rates and contracts. LeadingAge Wisconsin staff reviewed 2016 Managed Care Organization (MCO) capitation reports and provided members with DHS-authorized MCO rate adjustments to assist with MCO-provider reimbursement "negotiations." LeadingAge Wisconsin also prepared a summary of changes to the 2016 DHS-MCO contract to ensure members were fully aware of contract revisions. After advocating for separate capitation rates (and accounting) for each client group because of "robbing Peter to pay Paul" concerns, DHS implemented a high cost pool fund to limit the need for MCOs redirect dollars to cover exceptional costs related to certain enrollees with disabilities.

A LeadingAge Wisconsin workgroup developed the Association's positions on Family Care/IRIS, and we shared those positions in testimony before the DHS and in ongoing meetings with DHS representatives. Staff continued to monitor the activities of the Department in anticipation of the April 1, 2016 release of the DHS Family Care/IRIS 2.0 concept paper to the Joint Finance Committee and developed a 29-point comprehensive paper with significant documentation to support our positions.

LeadingAge Wisconsin staff analyzed the 2014-15 DHS data base and Medicaid quarterly rates to determine the Medicaid deficits by Legislative district. The report is the source of Medicaid nursing home expenditure and reimbursement shortfalls. Information from this reports was included in the Legislative Fiscal Bureau (LFB) paper on Nursing Home payments. Also, the LFB used the LeadingAge Wisconsin information to report that nursing homes would receive a rate cut without a rate increase for acuity.

On other payment related fronts, LeadingAge Wisconsin provided members with the detailed information on the October 1, 2015 changes to the Medicare rates, including the impact of sequestration. We trained 112 facilities in ICD-10 and successfully secured a four month delay in DHS 3rd party liability claims edits to get past ICD-10 implementation before members faced additional billing challenges.

Strategy #4: LeadingAge Wisconsin will provide operating, business, and quality tools to help members thrive.



LeadingAge Wisconsin led members through generative discussions, encouraged members to craft their vision for the future, and invited members to pursue creative ventures. Despite the intensity of the shifting directions and juxtapositioning of allegiances and alliances, neither the association nor its members lost sight of the rules, regulations, and realities of the day-to-day business of ensuring quality of life for residents, tenants, and customers. To serve members interests and needs, LeadingAge Wisconsin continued its historical focus of providing innovative and time-tested operating, business, and quality tools to help members thrive.

One striking difference throughout LeadingAge Wisconsin is our commitment to quality. The LeadingAge Wisconsin Assisted Living Quality Improvement Network served the Association well for the past 16 years. Driven by the passion and commendable efforts of the many Network members, LeadingAge Wisconsin has developed and maintains an unparalleled forum for peer networking and sharing, a series of quality improvement initiatives, quality improvement modules, staff training modules, and certification courses for RCAC and CBRF managers. The momentum generated by this Assisted Living Quality Improvement Network catapulted us into a leading role for assisted living facilities when we became the first association to have a program approved for the Wisconsin Coalition for Collaborative Excellence in Assisted Living (WCCEAL). The WCCEAL benchmark reports clearly indicate our participating assisted living communities are working hard to become recognized as the best of the best in assisted living. Given all we have achieved and recognizing our members' unquenchable quest for quality, the LeadingAge Wisconsin Assisted Living Quality Improvement Network evolved into Echelon. With Echelon, LeadingAge Wisconsin is reinventing and expanding what had been the Assisted Living Quality Improvement Network, and we are taking our assisted living professionals to a higher level. We will bring to Echelon more ideas, support for residents and staff, and more quality improvement tools. The purpose of Echelon is to assist each participating assisted living community in its individual quality improvement journey.

Echelon is an approved program of the Wisconsin Coalition for Collaborative Excellent in Assisted Living (WCCEAL). Through Echelon, LeadingAge Wisconsin has 172 assisted living communities participating in WCCEAL. WCCEAL put new systems in place to define WCCEAL membership status and to ensure member participation in the outcome reports and the customer satisfaction surveys. With these new systems in place, LeadingAge Wisconsin has 24 months running of 100 percent participation. To assist members of Echelon in assessing the success of their quality improvement efforts, LeadingAge Wisconsin provided a three-year review of resident/tenant satisfaction results based on information from the WCCEAL satisfaction survey data. This comparison analysis, along with the quarterly outcome reports, are evidence that LeadingAge Wisconsin

members and subscribers are outperforming other WCCEAL participants in customer satisfaction and in most of the measured outcomes.

LeadingAge Wisconsin helped WCCEAL to secure a \$1 million, five-year Community Impact Grant from the Wisconsin Partnership Program. Through this grant, LeadingAge Wisconsin will receive funding through each of the next five years to further develop and grow Echelon as a means to expand the reach of WCCEAL. LeadingAge Wisconsin also secured a five percent insurance premium discount from West Bend Mutual for members enrolled in WCCEAL.

LeadingAge Wisconsin worked with the Bureau of Assisted Living to obtain DHS approval for our CBRF Managers Certification Program. During the nine-month pilot program, The LeadingAge Wisconsin 20-hour DVD course now meets the requirement of DHS 83.15 (assisted living administrator's training course approved by the department or the department's designee) for Echelon participants. This gives Echelon members a time saving, cost effective alternative to the 60-hour, in-person, \$2400 course that previously was the only available approved course.

For our skilled nursing facilities, LeadingAge Wisconsin partnered with other states to provide quarterly reports on the 5-Star reporting system, including data on how changes in survey, staffing, and quality measures would impact facilities' ratings. Wisconsin usage rate is within the highest three in the country.

LeadingAge Wisconsin staff advised members on reducing licensed beds and using the restricted use policies that are available to them. In addition, staff reviewed Medicaid rate calculations and adjustments for members, resulting in an increase in Medicaid rates and providing additional Medicaid funds to members. Staff also provided technical assistance to members on their plans for renovating or replacing their current nursing facilities.

The MDS Innovation Team currently is 90 members strong. Each of the five rounds of meetings throughout Fiscal Year 2015-2016 addressed the MDS interests and questions of more than 180 participants.

Based on our benchmarks (cost studies completed and revenues), Wisconsin's performance of Value First is solid. Throughout the year, Value First promoted discounts of three to twelve percent for members undergoing significant remodeling or new construction projects. We recently added Sherwin-Williams paint discounts, and we currently are reviewing pharmacy options for group purchasing.

For the third consecutive year, in 2016, the Safe Resident Assistance Program awarded grants to members totaling \$25,000.

Strategy #5: LeadingAge Wisconsin will assist members in enriching the lives of those they serve.



LeadingAge Wisconsin staff continued to advocate on behalf of members concerned about the potential negative impact to Wisconsin's assisted living field from the aftereffects of the CMS Medicaid Home- and Community-Based Services (HCBS) settings rule requirements. A LeadingAge Wisconsin workgroup recommended provider responses to the Department of Health Services (DHS) provider self-assessment survey. The workgroup continues to share with DHS and LeadingAge ongoing member concerns with the rule. LeadingAge Wisconsin staff are working with several members planning to build CBRFs, advising them on Family Care payments in light of the CMS rule on waiver funding. It is the goal of LeadingAge Wisconsin is to preserve campus-based options for consumers.

Embedded in one of the four guiding principles of Echelon is the ongoing goal for members to stay engaged with the community and to keep the community engaged with residents/tenants. As we continue to develop Echelon, we will develop and pursue ideas and best practices to guide member efforts in this area. Through one such initiative, we are investigating a new program which would partner high schools with local assisted living communities in a way that puts at risk students on the path for a geriatric career. Such a program not only would provide career direction for the student, it also promises engagement opportunities for the residents.

Julie Cook Downing addressed direct care workers at the 2016 Spring Conference, sharing with them the guidelines her father shared with her on how to live to 90 and beyond. LeadingAge Wisconsin pursues many opportunities such as this to help direct care workers and to provide them tools, resources, and programming to engage residents more fully.

Members of the LeadingAge Wisconsin Echelon continue to share best practices and success stories on how new ideas are building stronger ties between the community and the residents. Members are sharing not only the how-tos, but also the benefits of offering wellness clinics, wellness programs, exercise classes, nutrition planning, weight-loss challenges, and other tips and strategies on healthy aging to the residents and to the community. The LeadingAge Wisconsin I-LEAD program also incorporates lessons on community engagement and the concept of "giving back."

LeadingAge Wisconsin worked with the Center for Health Systems and Research Analysis and WCCEAL to secure a grant to study the use of Music and Memory with iPads in assisted living. Currently, three LeadingAge Wisconsin Echelon members are participating in this study. LeadingAge Wisconsin also supported a grant proposal (CMP Committee) to allow all skilled nursing facilities to participate in the Music and Memory program.

LeadingAge Wisconsin staff testified before the Speaker's Task Force on Alzheimer's and Dementia and monitored the activities of the Task Force,

which included spearheading the creation of a four-association coalition to oppose legislation which would have required CBRFs (not physicians) to obtain a signed acknowledgement form from a CBRF resident with a degenerative brain disorder, or the person acting on behalf of the resident, before administering a psychotropic medication with a black box warning to that resident. In all our advocacy efforts, indeed, in all our efforts, LeadingAge Wisconsin works to ensure residents receive the care they need, the support they desire, in the environment they choose, to live the way they want to live.

2015-2016 Recap

The past twelve months presented LeadingAge Wisconsin with the opportunity to address the interests, needs, and concerns of the members, which led the Board of Directors to identify five strategies to guide the Association. These five strategies shaped the policies, drove the efforts, and resulted in the successes highlighted in this 2015-2016 Annual Report. Working to serve the interests and needs of the members, it is increasingly evident that the association, like its members, must address a number of challenges -- challenges such as succession planning, the changing membership base, provider network operations and participation, and serving those beyond the traditional 501(c)(3)/governmental entities and campus-based organizations. LeadingAge Wisconsin is well-positioned to face these challenges; however, the Association must be more intentional and contemplative about its five year outlook. For this reason, the Board of Directors identified a strategy and related objectives designed to ensure the Association's sustainability.

As the Association prepares to pursue yet another year of aggressive and innovative initiatives to serve members, here is the synopsis of what we have learned on our journey through Fiscal Year 2015-2016:

- LeadingAge Wisconsin is a vibrant and strong Association with deep member support.
- Workforce is the number one issues facing our members today.
- The Association must help members thrive in the changing marketplace.
- Regulatory challenges are real and this environment must change; these are important challenges but they should not prevent the Association from attacking workforce issues.

On behalf of the LeadingAge Wisconsin Board of Directors and staff, we thank every individual who works within any of our long-term care, assisted living, retirement living, or community support program entities. Your work is valuable. Your commitment is commendable. Your results are priceless. You are the difference, and the difference you make is striking! Thank you.

LeadingAge Wisconsin

Income Statement

Projected FY 2016 and Proposed FY 2017 Budget

	2015/16 Budget	Projected 6/30/2016	Variance	Proposed 2016/17 Budget
Member Dues	\$ 764,200	\$ 770,000.00	\$ 5,800	\$ 768,500
Associate Dues	47,000	50,000	3,000	50,700
LeadingAge Dues	50,000	52,000	2,000	52,000
Investment Income	42,000	54,700	12,700	51,200
Conferences/Seminars	490,000	470,500	(19,500)	468,000
Surveys/EO	4,500	5,700	1,200	5,700
Member Services	83,000	72,600	(10,400)	94,000
Value First - Marketing	112,000	112,000	-	118,000
Miscellaneous	1,000	500	(500)	1,000

Total Revenue \$ 1,593,700 \$ 1,588,000 \$ (5,700) \$ 1,609,100

Salaries/Insurance/Temp.	\$ 792,100	\$ 786,000	\$ 6,100	\$ 810,300
Payroll Taxes	44,900	49,680	(4,780)	49,100
Employee Pension / HRA	33,600	35,200	(1,600)	37,000
Value First	112,000	112,000	-	118,000
Staff Travel	31,500	27,000	4,500	31,500
Professional Development	2,000	2,000	-	2,000
Board/Committee	27,300	27,300	-	27,300
Insurance/Taxes	8,000	7,600	400	8,000
Telephone	7,500	5,000	2,500	6,500
Copier	15,500	15,500	-	15,500
Postage	4,500	4,000	500	4,000
Computer Expense	12,000	11,500	500	12,000
Printing	3,000	2,000	1,000	2,500
Supplies/Sub./Memberships	6,000	5,400	600	7,000
Conferences/Seminars	350,000	303,000	47,000	315,800
Legal Counsel	25,000	25,000	-	25,000
Audit	7,600	7,600	-	8,000
Bank Expense/Misc.	1,000	500	500	1,000
Data Base	2,500	2,000	500	2,500
Member Services	58,000	53,000	5,000	59,500
Depreciation	18,500	18,000	500	18,500
Office Building	30,000	25,500	4,500	27,000
Strategic Development	10,000	59,600	(49,600)	20,000

Total Operating Expenses \$ 1,602,500 \$ 1,584,380 \$ 18,120 \$ 1,608,000

Net Revenue/Expenses	\$ (8,800)	\$ 3,620	\$ 12,420	\$ 1,100
Gain(Loss) Investments	\$ -	\$ (10,000)	\$ (10,000)	\$ -

Net Income (Loss) \$ (8,800) \$ (6,380) \$ 2,420 \$ 1,100

Property & Equipment \$ 8,000 \$ 4,000 \$ 4,000 \$ 8,000

LeadingAge Wisconsin -- 2015-2016 Leadership

Executive Committee

Chair Doug Trost St. Francis Home Fond du Lac	Vice Chair/Member Services Terry Snow Pleasant View Nursing Home Monroe	Vice Chair/Operations Renee Anderson Saint John's Communities Milwaukee	Vice Chair/Public Policy Kris Krentz Skaalen Retirement Services Stoughton
Chair Elect Fran Petrick Brookside Care Center Kenosha	Secretary Dan Goodier Christian Community Home Hudson	Treasurer Clark Nordberg Bethel Home & Services Viroqua	LeadingAge Liaison Marion Wozniak Cedar Crest Janesville
Immediate Past Chair Mike Christensen Grace Lutheran Foundation Eau Claire	Senior Advisor Steve Jaberg Cedar Community West Bend		

Directors at Large

Renee Anderson Saint John's Communities Milwaukee	Kris Krentz Skaalen Retirement Services Stoughton	Sondra Norder St. Paul Elder Services Kaukauna	Sue Seegert Presbyterian Homes/Kirkland Crossings Pewaukee
Pauline Darling Bethany Home Waupaca	Vern Larson Linden Grove Mukwonago	Fran Petrick Brookside Care Center Kenosha	Heather Sheehan Hayward Area Mem. Hosp./Water's Edge Hayward
Dan Goodier Christian Community Home Hudson	Dan Meyer Vernon Manor Viroqua	Michelle Putz Jewish Home & Care Center Milwaukee	Doug Trost St. Francis Home Fond du Lac
Jane Hooper Clearview Juneau	Clark Nordberg Bethel Home & Services Viroqua	Mark Radmer Harbor Haven Health & Rehab Fond du Lac	Marion Wozniak Cedar Crest Janesville

Regional Directors

Region I Dennis Ferger Clement Manor Health Center Greenfield	Region II Terry Snow Pleasant View Nursing Home Monroe	Region III Pete Eide Hillview Health Care Center La Crosse	Region IV Tony Manzella Dunn County Health Care Center Menomonie	Region V Steve Seybold Homme Home Wittenberg
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Immediate Past Chair

Mike Christensen
Grace Lutheran Foundation
Eau Claire

Senior Advisor

Steve Jaberg
Cedar Community
West Bend

Staff

John Sauer President/CEO	Janice Mashak VP Member Services/Innovation	Brian Schoeneck VP Financial/Regulatory Services	Tom Ramsey VP Public Policy/Advocacy
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