

WAUSAU 54403 Phone:(715) 842-2028
 Operated from 1/1 To 12/31 Days of Operation: 366
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/04): 147
 Total Licensed Bed Capacity (12/31/04): 150
 Number of Residents on 12/31/04: 146

Ownership: Limited Liability Partnership
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 146

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	44.5	
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years	37.0	
Supp. Home Care-Household Services	No	Developmental Disabilities	2.1	Under 65	6.8	More Than 4 Years	18.5	
Day Services	No	Mental Illness (Org./Psy)	13.7	65 - 74	12.3	-----	-----	
Respite Care	No	Mental Illness (Other)	2.7	75 - 84	37.7	-----	100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.7	85 - 94	35.6	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.7	95 & Over	7.5	Full-Time Equivalent		
Congregate Meals	No	Cancer	5.5	-----	-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	14.4	-----	100.0	(12/31/04)		
Other Meals	No	Cardiovascular	23.3	65 & Over	93.2	-----		
Transportation	No	Cerebrovascular	4.1	-----	-----	RNs	12.9	
Referral Service	No	Diabetes	19.2	Gender	%	LPNs	3.9	
Other Services	Yes	Respiratory	11.6	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	24.7	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	75.3	39.6		
Provide Day Programming for		-----	100.0	-----	-----	-----		
Developmentally Disabled	No	-----	-----	-----	100.0	-----		

Method of Reimbursement

Level of Care	Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care		Per Diem (\$)	Total Resi-dents	% Of All					
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%								
Int. Skilled Care	0	0.0	7	7.0	139	0	0.0	0	0	0.0	0	0	0	0	0.0	7	4.8			
Skilled Care	27	100.0	241	90	90.0	120	0	0.0	0	17	100.0	183	0	0.0	0	2	100.0	376	136	93.2
Intermediate	---	---	---	1	1.0	100	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.7
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	2	2.0	176	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	1.4
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	27	100.0	100	100.0	0	0.0	0	0.0	17	100.0	0	0.0	2	100.0	0	146	100.0	146	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
		Activities of		% Needing Assistance of		Total
		Daily Living (ADL)	% Independent	One Or Two Staff	% Totally Dependent	Number of Residents
Percent Admissions from:						
Private Home/No Home Health	3.8	Bathing	0.0	94.5	5.5	146
Private Home/With Home Health	1.7	Dressing	21.9	75.3	2.7	146
Other Nursing Homes	0.4	Transferring	33.6	54.1	12.3	146
Acute Care Hospitals	94.1	Toilet Use	30.8	54.1	15.1	146
Psych. Hosp.-MR/DD Facilities	0.0	Eating	78.1	13.0	8.9	146
Rehabilitation Hospitals	0.0	*****				
Other Locations	0.0	Continence		%	Special Treatments	%
Total Number of Admissions	236	Indwelling Or External Catheter	8.9		Receiving Respiratory Care	11.0
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	41.1		Receiving Tracheostomy Care	0.0
Private Home/No Home Health	33.9	Occ/Freq. Incontinent of Bowel	23.3		Receiving Suctioning	0.0
Private Home/With Home Health	8.5	Mobility			Receiving Ostomy Care	4.8
Other Nursing Homes	7.6	Physically Restrained	1.4		Receiving Tube Feeding	3.4
Acute Care Hospitals	17.8	Other Resident Characteristics			Receiving Mechanically Altered Diets	32.9
Psych. Hosp.-MR/DD Facilities	0.4	With Pressure Sores	4.8		Have Advance Directives	100.0
Rehabilitation Hospitals	0.0	With Rashes	3.4		Medications	
Other Locations	7.6				Receiving Psychoactive Drugs	65.8
Deaths	24.2					
Total Number of Discharges (Including Deaths)	236					

 Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group		Bed Size: 100-199 Peer Group		Licensure: Skilled Peer Group		All Facilities	
		%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.3	88.5	1.10	90.2	1.08	90.5	1.08	88.8	1.10
Current Residents from In-County	89.0	80.0	1.11	82.9	1.07	82.4	1.08	77.4	1.15
Admissions from In-County, Still Residing	25.8	17.8	1.45	19.7	1.31	20.0	1.29	19.4	1.33
Admissions/Average Daily Census	161.6	184.7	0.88	169.5	0.95	156.2	1.04	146.5	1.10
Discharges/Average Daily Census	161.6	188.6	0.86	170.5	0.95	158.4	1.02	148.0	1.09
Discharges To Private Residence/Average Daily Census	68.5	86.2	0.79	77.4	0.88	72.4	0.95	66.9	1.02
Residents Receiving Skilled Care	97.9	95.3	1.03	95.4	1.03	94.7	1.03	89.9	1.09
Residents Aged 65 and Older	93.2	92.4	1.01	91.4	1.02	91.8	1.01	87.9	1.06
Title 19 (Medicaid) Funded Residents	68.5	62.9	1.09	62.5	1.10	62.7	1.09	66.1	1.04
Private Pay Funded Residents	11.6	20.3	0.57	21.7	0.54	23.3	0.50	20.6	0.57
Developmentally Disabled Residents	2.1	0.9	2.32	0.9	2.18	1.1	1.83	6.0	0.34
Mentally Ill Residents	16.4	31.7	0.52	36.8	0.45	37.3	0.44	33.6	0.49
General Medical Service Residents	0.0	21.2	0.00	19.6	0.00	20.4	0.00	21.1	0.00
Impaired ADL (Mean)	38.2	48.6	0.79	48.8	0.78	48.8	0.78	49.4	0.77
Psychological Problems	65.8	56.4	1.17	57.5	1.14	59.4	1.11	57.7	1.14
Nursing Care Required (Mean)	7.5	6.7	1.13	6.7	1.12	6.9	1.09	7.4	1.01