



Annual Report

Choosing our Tomorrow

2006-2007

Wisconsin Association of Homes and Services for the Aging

President's Report

It is not easy to predict the future for the individuals in our organization who face the challenges of today's complicated health care provider system. Wouldn't it be wonderful if we could use the vision of a psychic to peer into a crystal ball for the answers? Life just isn't that easy.

What I know to be true is that the caring and compassion that radiates from our members is as strong as ever. This profession gives back as much or more to those of us who have chosen long term care as our career than we ever will give. We make such a difference in the lives of others by providing the physical structures for the elderly to live in and the emotional and hands-on care for the residents and their families whom we serve. The future has never been brighter in this area.

This year, the board of directors began to spend more time at each meeting discussing and strategically thinking about the future. In a past *President's Report*, Kyran Clark made an interesting observation. He stated, "Whenever two or more are gathered in the name of long term care, the mood almost instantaneously turns to panic or frustration or depression or concern." However, through discussion and active participation in the future direction of our organization, we

can ease that underlying fear of the unknown and shape our destiny.

We, through our association, will continue to make a difference in the future. I am confident that what we have done successfully in the past will continue to grow and thrive in the future. In the words of Mahatma Gandhi, "We must become the change we want to see."

"We must become the change we want to see."

~ Mahatma Gandhi

WAHSA's list of successes is long. Together, we successfully have:

- Developed a positive relationship with the Office of Quality Assurance and with the current director, Otis Woods.
- Provided training opportunities to our members through the Spring and Fall Conferences as well as various seminars during the year.
- Maintained a respected voice with the Division of Health Care Financing and provided our members with valuable information on the complex Medicaid and Medicare systems.
- Maintained and updated the information available to our members through the WAHSA website. It is a premiere source of information ranging from long-term practices to how to contact your legislator.

- Maintained a continued presence at the State Capital through personal contacts and position papers.
- Been an active participant in the Long Term Care Reform Council.
- Developed and nurtured the members who have RCACs through a supportive network providing direction, training, and quality standards.

WAHSA has been extremely blessed to have a talented staff. John Sauer, Janice Mashak, Tom Ramsey, Brian Schoeneck, Pam Walker, and Linda Rose are top quality individuals who continue to use their skills to make this organization strong and dynamic.

We have the continued challenge of providing innovative and quality health care under a regulated system that doesn't reimburse us for our costs, but we also have the will and determination as an organization to move forward and to be the best that we can be. I love the quote by Dale Carnegie that states, "Flaming enthusiasm, backed by common sense and persistence, is the quality that most frequently makes for success."

Respectfully submitted,



Miriam Ownby
WAHSA President

Executive Director's Report

I am both intrigued with and mystified by futurists. Although I'm sure, at times, we all have yearned to know what the future holds, writing about the future simply is not as black and white as ruminating about the past. Thus, my fascination with futurists is tinged with a bit of skepticism.

I know futurists analyze societal trends, economic fluctuations, human behavior patterns, and the often cyclical nature of history to put together plausible scenarios for the future, but I'm still skeptical. Every time I am presented with yet another "likely scenario," I can't help but think back to those *Back to the Future* movies, in which a seemingly slight twist of fate has a potentially dramatic impact on the future. So when we listen to the most highly respected futurist present an impressive depiction about what the future holds, I can't help thinking, "Yes, but what if..."

What if the facility does not close, Baby Boomers moderate their expectations, reimbursement rates increase, or obsession with regulatory enforcement gives way to quality improvement? Granted, some of those are more realistic than others, but what if? Any one of these, plus at least a million other likely or unlikely scenarios, could dramatically change our future in any number of ways. Clearly, the future is still unwritten.

That is both promising and exciting. Consider this: What if fifteen years ago, state regulators had granted WAHSA's request and eliminated the nursing home capital expenditure limitation, thereby allowing organizations to build

smaller, more home-like settings in which private rooms were the norm? People from around the globe today might be visiting the Green Houses of Tupelo, Mississippi **and** Wisconsin venues to learn about innovative skilled care facilities. Since the fate of our future is not cast in stone, we still have today to change it. We have all the todays of the rest of our lives to shape the future we want and the future our residents and tenants deserve. While this might seem to be an open-ended opportunity, we must proceed carefully, for, as already noted, even the slightest twist of fate can have a dramatic impact on the future.

I try to guide your association keeping that thought in the back of my mind, right beside all the concepts espoused by Jim Collins in his book *Good to Great*. In writing this book, Mr. Collins set out to answer the question, "Can a good company become a great company and, if so, how?" Collins identified only 11 companies that met his criteria for successfully making the good-to-great transition. These 11 companies shared a number of key guiding principles but two are particularly noteworthy. First is what Collins calls the Hedgehog Concept, a product or service that leads a company to outshine all worldwide competitors, that drives a company's economic engine, and that a company is passionate about. Second, at the heart of those rare and truly great companies was a corporate culture that rigorously found and promoted disciplined people to think and act in a disciplined manner.

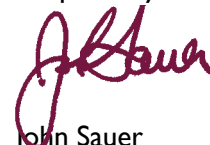
The goal of WAHSA's Board of Directors and staff is that our

organization transition from good to great. Our goal to provide excellence in advocacy, education, and member services drives our economic engine and ignites our passion. Further, we are blessed with disciplined people who think and act in a disciplined manner. But we can and must do more.

I believe that any true transition from good to great is an incremental journey. While overnight success might be exciting and sensational, it often is fleeting. True success is built over time, one step at a time, with a solid foundation and a strong structure. Each layer of success is well-planned and well-positioned to pave the way for the new plans, initiatives, programs, services, and successes that will follow. While each level of success stands on its own, it also complements, balances, and enhances both the levels that came before it and those that will come after it.

That is WAHSA's journey to greatness. We are a disciplined team that moves ahead strategically. The "futurists" that guide our efforts are named Mission and Passion. Even when navigating through uncharted waters, they have yet to steer us wrong. As we move forward, remember – today's efforts will help establish our legacies. When the history of long term care in Wisconsin is written, let's give them something to talk about!

Respectfully submitted,



John Sauer
Executive Director

Annual Report

Throughout fiscal year 2006-2007, WAHSA continued efforts to work strategically to build the success of the association and its members. Through the collective efforts of the dedicated members and staff, we ended the year with an impressive slate of successes in operations, public policy, and member services. These successes open the doors for new initiatives and point the direction for continued growth in the days, weeks, months, and years ahead.

Renovation

The look of WAHSA is changing, and that is most evident in the headquarters of our association. In the last year, the association completed the full renovation of the WAHSA office building. The building, located one block from the State Capitol, now is more handicapped-accessible, energy efficient, pleasing in appearance, and conducive to enhanced staff productivity.

As an association, we not only changed the look of our office, we also renovated a number of our business practices. After completing a detailed budget analysis, WAHSA developed a modified dues millage system with a phase-in implementation schedule. To further augment the association's budget and service benefits for members, WAHSA put its support behind the Group Purchasing Program of the American Association of Homes and Services for the Aging (AAHSA). To continue reaching into the future, WAHSA staff and members participated in the AAHSA Leadership Circle's strategic positioning session to help the association plan for the likely future long term care scenarios.

With physical and philosophical changes reshaping the association, it also was time to review the very function of WAHSA. The Board of Directors analyzed the association's strategic positioning efforts back to 1980. Using regional and member feedback and Jim Collins's *Good to Great* principles as a framework, the Board of Directors concluded that the core functions of this association are Advocacy, Education, and Member Services and Support. Driven by these core services, and in response to the membership needs, WAHSA's efforts are targeted at Biennial Budget Advocacy, Family Care/Managed Care Developments, Advancing Housing with Services, Quality Improvement, Regulations Assistance, Education, and Development of Member Services.

The work of the association was best summarized by AAHSA CEO Larry Minnix at the annual retreat of WAHSA's Board of Directors. Minnix

complimented WAHSA, noting that our association is "as good a state association as there is. I never worry about Wisconsin – you folks get it."

Biennial Budget Advocacy

WAHSA continues to represent member interests in the State's Biennial Budget process, especially in terms of helping government officials "get it" when it comes to ensuring members are adequately reimbursed for providing quality care and services for the frailest of the frail.

WAHSA developed our 2007-09 legislative advocacy agenda, calling for increases to improve direct care targets, fund downsizing/converting to private rooms, and payment for higher fuel and utility expenses. These funding needs later became the basis of the WAHSA request for a 5% Medicaid rate increase for nursing homes. WAHSA became an active member of the Wisconsin Long Term Care Workforce Alliance which is seeking a 5% Medicaid rate increase for all Medical Assistance (MA) providers and the Community Aids program. The Alliance has met with Senate and Assembly leadership to make our case for additional funding.

WAHSA completed a detailed analysis of the Governor's 2007-2009 biennial budget recommendations related to the nursing home bed tax increase and a 2% Medicaid rate adjustment. Facility-specific projections were produced for the members.

WAHSA's 2007 Public Policy Seminar provided members with a timely summary of the major budget provisions and featured a diverse group of speakers on federal issues, managed care reforms, and regulatory concerns.

Your association successfully lobbied Governor Doyle to oppose a Department of Health and Family Services (DHFS) recommendation to convert the Medicaid direct care payments to a "price-based" system. An alliance with AFSCME, CWAG, WCA, and the Survival Coalition helped ensure that this policy was not included in the Governor's 2007-09 Budget Bill.

Working together, staff and members convinced the DHFS to modify its new Medicaid eligibility determination process based on the long term care functional screen. WAHSA's efforts ensured that this system will not be used to set residents' level of care or otherwise determine Medicaid payments.

WAHSA staff and members continuously pointed to the shortcomings with the DHFS Pay-for-Performance initiative, which later was renamed "Recognition-for Performance." We frequently noted that since DHFS refuses to pay for facilities' current staffing levels or increasing fuel costs, it is difficult to view this as a sincere initiative by DHFS. WAHSA did convince DHFS to heavily weigh staffing levels and low turnover rates as the basis for positive recognition, factors that are truer measures of quality and would result in positive scores for most WAHSA member facilities.

WAHSA convinced DHFS to update Resource Utilization Group (RUG) scores twice/year instead of quarterly, which would have made for an extremely unstable payment year for providers. Further, we urged DHFS to provide facilities with resident information utilized to set the overall RUGs score for each home.

WAHSA's 2006 Reimbursement Seminar provided detailed information on the new RUGs-based Medicaid payment system. To further enhance members' understanding of the new system, WAHSA contracted with the Center for Health Systems Research and Analysis (CHSRA) to provide detailed acuity scores for each facility and provided operational insights on how the RUGs system would impact direct care payments. DHFS adopted a "stop-loss" provision to minimize negative rate adjustments for facilities with higher costs and somewhat lower acuity.

As for other reimbursement-related issues, WAHSA provided assistance to members struggling with the implementation of the Medicare Part D drug benefit program. WAHSA submitted a list of detailed questions on Part D implementation to the Centers for Medicare & Medicaid Services (CMS). The agency's responses were shared with members and DHFS staff. WAHSA also partnered with the ElderLaw Center to publish additional information on this program. Staff worked to clarify which party is financially liable for a Medicaid resident's prescription drug costs that are not covered by a prescription drug plan (PDP).

WAHSA worked diligently throughout the year to represent the financial interests of members in discussions related to the biennial budget and the reimbursement system. That, however, was not the only arena for intense lobbying on behalf of members.

Family Care/Managed Care Developments

WAHSA has developed a positive working relationship with new DHFS Secretary Kevin Hayden. He was a featured speaker at the 2007 Public Policy Seminar at which he acknowledged WAHSA's commitment to high quality long term care services and our expertise on public policy issues. WAHSA continues to advocate for a more integrated long term care system (acute, primary and long term care) and question the DHFS assumptions that Family Care can be expanded statewide without additional long term care funding.

WAHSA is the voice for nursing homes and non-profit long term care providers on the Wisconsin Council on Long Term Care Reform and the Comprehensive Systems Change Committee. The Council passed a WAHSA motion to support increased funding for Medicaid nursing home direct care costs to reflect rising acuity levels of nursing facility residents. WAHSA members Tim Steller, Bonnie Zabel, and Bob Schaefer presented at a DHFS Comprehensive Systems Change Committee meeting on the appropriate roles of skilled nursing homes. The public committee members were especially thankful for their insightful presentations.

Advancing Housing with Services

Senior housing professionals came together in October 2006 for the annual planning meeting. As a result of this meeting, WAHSA identified new project priorities designed to serve the issues, needs, and concerns of member RCACs, CBRFs, and Independent Living Facilities.

The RCAC Quality Improvement Network is now in place. Although implemented less than one year ago, we already have nearly half of the member RCACs signed up for the network. WAHSA has Quality Initiatives developed for Medication Management, Health Monitoring, Tenant Satisfaction, and Dementia. The goal is to develop about three new initiatives each year. Otis Woods, Director of the DHFS Office of Quality Assurance, had this to say about WAHSA's Quality Improvement Network: *"I think (the RCAC Quality Improvement Network) is excellent information that, according to the website, has goals geared toward improving the quality of life and quality of care for RCAC tenants....As the assisted living industry continues its growth, this initiative provides proof of the 'out-side the box' thinking on quality improvement programs underway*

within the industry. WAHSA's continued education and quality improvement focus for its members is a positive example of good care and services provided in Wisconsin's assisted living communities."

Twenty-four senior housing organizations participated in the 2006 edition of the Senior Housing Sharing Program, which included policies and procedures related to Admissions Policies, Risk Agreements, Health Monitoring, Change of Condition, Falls/Medication Administration, Annual Review/Assessment, Discharge Criteria, Wellness Models, Scooter Policies, Staff Training, Service Agreements, and Outside Services.

WAHSA's senior housing edition of the Community Education Program is a grass-roots approach to reach out to the community in an effort to provide information to seniors and to acquaint prospective residents and family members with WAHSA member senior housing facilities. This education and communication program is designed to allow WAHSA senior housing members to share their expertise with the community and to create recognition for members. This program consists of a series of twelve topics of interests to seniors yearning to better understand the options and issues related to senior housing and assisted living. Each topic includes an agenda, a free report, and a PowerPoint presentation. These materials are available for members to download and to incorporate into community presentations.

WAHSA published and began marketing *The Gratitude Attitude in Senior Housing*. The goals of this program are to promote positive attitudes within each and every tenant in senior housing facilities and to encourage the independent tenants to take ownership of their own activity program. The *Gratitude Attitude* guidebook features twelve themes with activity ideas for each of the themes. With more than 250 activity ideas, this new publication promises something to interest every senior housing tenant from independent living to assisted living.

The networking meetings for nurses in senior housing rapidly are becoming as popular as the Senior Housing Network Meetings. The senior housing nurses now meet four times each year to network, share issues and concerns, offer peer support, and provide feedback to WAHSA on programs and services.

The newly formed Task Force on Education for RCACs is working to determine the feasibility and practicality of developing interactive, regional

staff training modules that would be offered on-site through an area-specific rotation. Topics which might be addressed through these training sessions include customer service, resident rights, senior sexuality, dining service and nutrition, stress relief, and caring for the caregiver.

The new Task Force on Independent Living Policies and Procedures is working to develop a policy and procedure manual that would deal with issues such as unit transfers, feuding residents, preventative maintenance, dietary services, and other issues that are common to all independent living facilities.

While we work aggressively to develop new products and services to address the interests and needs of senior housing providers, we also continue to keep members informed on the DHFS rewrite of HFS 83 (CBRFs). DHFS regulation of assisted living facilities targets "problem" facilities and this method of survey and enforcement is now viewed by the DHFS Office of Quality Assurance (OQA) as the preferred method. WAHSA's Legal Counsel prepared a five-page summary on the legal requirements related to medication management/administration in nursing homes, CBRFs, and RCACs. The association routinely provides membership updates on the DHFS Assisted Living Forum meetings. Further, we developed a survey to assess members' position on extending the authority of State ombudsman to include RCACs as well as whether Chapter 50 nursing home and CBRF resident rights should be extended to RCAC tenants.

Quality Improvement

The OQA has awarded WAHSA and the Wisconsin Health Care Association (WHCA) a joint grant of \$85,000/year from the Civil Monetary Penalty (CMP) fund to assist facilities with their quality improvement efforts. The grant will fund activities related to standards of practice and clinical competencies. Administration of the grant will be WAHSA's responsibility. The grant is for two years; OQA has the discretion of awarding third year funding. With the grant, WAHSA hopes to:

1. Create a simple web-based program providing information on clinical standards of practice with training materials for several areas OQA would recognize as appropriate standards of practice.

Annual Report

2. Develop training programs based on troubled areas resulting in additional cites using a cost effective approach such as teleconference, web-based programs, or regional programs.
3. Help identify the cause of pressure sores, performing root-cause analyses of cites, and provide additional clinical expertise to fully assess resident needs prior to admission.

WAHSA is a member of the Local Area Networks for Excellence (LANE) whose purpose is to promote and facilitate Wisconsin's efforts related to the Advancing Excellence in America's Nursing Homes program. In Wisconsin, 35% of the State's nursing homes have joined the program, compared to 23% nationally. WAHSA helped develop and present information on the Advancing Excellence program during a February 2007 webinar.

WAHSA is an active member of the Wisconsin Nurse Educator Shortage Task Force which will issue its recommendations by May 2007. The recommendations will address the waiting lists for Registered Nurse (RN) programs throughout the State and the need to increase available nurse faculty. WAHSA also is active on the Department of Workforce Development's Select Committee on Health Care Workforce Development.

Regulations Assistance

The association continues to work on preserving members' property tax exemption. Legislative efforts to impose property taxes on non-low income, not-for-profit independent living facilities were thwarted last session, and any efforts to reintroduce similar legislation this session both will be closely monitored and reacted to immediately.

WAHSA pushed the OQA to improve the Informal Dispute Resolution (IDR) process by allowing facilities more time to request an IDR hearing and providing that the citing surveyor not be present during this hearing unless requested. The Governor's biennial budget bill will provide nursing homes with 60 days, rather than the current 10 days, to appeal a notice of violation(s) and/or a forfeiture assessment.

The Health Issues Committee completed its recommendations to create Section S under the MDS in order to more fully capture resident acuity data related to unstable medical conditions. Our recommendations have been submitted to DHFS for its consideration.

Education

F.Y. 2006-07 can be hailed as the most successful year to date in terms of the quality and financial success of the association's educational offerings.

- The July 2006 Senior Housing Seminar featured a member marketing professional who discussed the practice and benefits of developing and implementing a long-term marketing plan for senior housing communities. This seminar drew 43 participants.
- The 2006 Fall Conference attracted 474 registrants for the conference, 94 companies participating in the tradeshow, and a record level of conference sponsorships.
- The 2006 Reimbursement Seminar drew an attendance of 446 and realized unprecedented revenues.
- The 2007 Public Policy Seminar provided updates on the national and state legislative and regulatory issues of concern, including detailed overviews of the Governor's budget.
- The 2007 Spring Conference featured an impressive slate of presenters and addressed topics such as person-directed care, leadership, board development, clinical care standards of practice, growing a successful business in the future world of long term care, senior housing issues and concerns, and the second edition of the CFO workshop.

Development of Member Services

WAHSA began offering *Checkpoints*, a newsletter that is e-mailed to member executive directors, administrators, assistant administrators, and directors of nursing. This newsletter features articles on clinical issues, regulatory concerns, hands-on-care strategies, and other relevant topics. *Checkpoints* joins *Beyond the Boundaries*, *Legends in Leadership*, *Board Briefings*, and *Legal FAQs* as regularly issued newsletters featuring articles written by guest professionals on topics of interest to WAHSA members.

Building on the success of the 2006 gala awards celebration, WAHSA's Awards Committee put together another celebration for the 2007 Awards

Banquet and recognized the winners of the following award categories: Best Performance in a Leading Role, Best Performance in a Supporting Role, Best Performance by a Community Member, and Outstanding New Production. In addition, the committee introduced the first inductee into WAHSA's Hall of Fame.

WAHSA's website continues to grow and develop to serve the interests and needs of members. The most recent enhancements to the website include:

- Links related to Emergency Preparedness
- A section devoted to Valuable Resources
- A link to Medicare Changes
- A special page dedicated to the RCAC Quality Improvement Network
- A new section for the Senior Housing Community Education Program with downloadable agendas, reports, and PowerPoint presentations.
- The 2006-07 Virtual Tradeshow
- Ongoing fine tuning and enhancements for the member listserve.

Year End Summary

With the writing of this report, the association wraps up the 47th year of our history. As our journey continues on the road from good to great, we thank the many individuals who work day after day to build the many successes that make our journey worthwhile. This association is shaped by our mission which holds us accountable for pursuing the highest quality of life and greatest independence for each individual served. The passion of our members, staff, and leadership ensure that this association will uphold that mission with determination and pride.

Undoubtedly, we all have seen our share of struggles and challenges in the past twelve months, but we also have enjoyed our share of opportunities. Working collaboratively towards our common mission, we have realized many successes throughout the year. These successes not only complement the layers of success of our 47-year history, but they also pave the way for all the successes and milestones that lie ahead of us. United through our common mission, the work we do today will shape the future that the historians eventually will write.

2007-08 Proposed Budget

	Projected 6/30/2007	2006/07 Budget	Variance	2007/08 Budget
Member Dues	\$ 585,000	\$ 583,000	\$ 2,000	\$ 613,000
Associate Dues	38,600	38,600	-	40,000
AAHSA Dues	38,600	37,800	800	40,000
Investment Income	45,800	36,100	9,700	38,500
Conferences/Seminars	333,900	318,000	15,900	336,500
Nursing Home Week	27,500	33,000	(5,500)	27,500
Surveys/EO	10,600	2,000	8,600	3,000
Member Services	11,500	16,000	(4,500)	10,900
Miscellaneous	-	1,500	(1,500)	4,000
Total Revenue	\$ 1,091,500	\$ 1,066,000	\$ 25,500	\$ 1,113,400
Salaries/Insurance/Temp.	\$ 535,000	\$ 543,400	\$ 8,400	\$ 561,700
Payroll Taxes	34,500	34,500	-	35,900
Employee Pension	24,800	24,900	100	26,000
Staff Travel	17,500	18,000	500	18,000
Professional Development	1,500	1,500	-	2,000
Board/Committee	18,100	20,000	1,900	20,000
Insurance/Taxes	6,600	6,500	(100)	6,900
Telephone	9,000	9,000	-	9,000
Copier	18,200	17,000	(1,200)	18,300
Postage	11,400	11,700	300	11,900
Computer Expense	2,000	2,500	500	2,500
Printing	6,500	8,000	1,500	8,000
Supplies/Sub./Memberships	7,100	7,500	400	6,400
Conferences/Seminars	228,000	219,000	(9,000)	234,500
Legal Counsel	22,200	23,400	1,200	23,400
Audit	4,500	4,800	300	4,800
Bank Expense/Misc.	2,100	2,100	-	2,500
Data Base	5,800	8,000	2,200	6,000
Member Services	5,000	9,000	4,000	6,700
Nursing Home Week	24,000	27,000	3,000	24,000
Depreciation	22,000	24,000	2,000	27,200
Office Building	22,000	21,000	(1,000)	24,000
Strategic Development	11,300	20,000	8,700	20,000
Total Operating Expenses	\$ 1,039,100	\$ 1,062,800	\$ 23,700	\$ 1,099,700
Net Revenue/Expenses	\$ 52,400	\$ 3,200	\$ 49,200	\$ 13,700
Gain(Loss) Investments-Mkt. Value	8,000	-	8,000	-
Net Income (Loss)	\$ 60,400	\$ 3,200	57,200	\$ 13,700
Office Building Renovation	\$ 269,000	\$ 275,000	\$ 6,000	
Capital Improvements	\$ 8,000	\$ 8,000	\$0	\$ 8,000

WAHSA *Leadership*

2006-2007

Executive Committee

* Denotes AAHSA Delegate

President Elect
Craig Ubbelohde
Lutheran Homes of Oshkosh
Oshkosh

V.P. of Operations
Marion Wozniak*
Cedar Crest
Janesville

Secretary
Roger Goepfert*
New Glarus Home
New Glarus

President
Miriam Ownby
Markesan Resident Home
Markesan

Immediate Past President
Tim Steller
North Central HC Facilities
Wausau

V.P. of Member Services
Fran Petrick
Ridgewood Care Center
Racine

Treasurer
Lynn Binnie*
Fairhaven Corporation
Whitewater

AAHSA Delegate Liaison
Jim Fett*
St. Paul Elder Services
Kaukauna

V.P. of Public Policy
The Rev. Daniel Risch
Lincoln Lutheran of Racine
Racine

Senior Advisor
David Keller
Luther Manor
Wauwatosa

2006-2007

Board of Directors
Directors at Large

Michael Christensen
Grace Lutheran Foundation
Eau Claire

Matt Furno
East Castle Place
Milwaukee

Fran Petrick
Ridgewood Care Center
Racine

David Rothmann
Brewster Village
Appleton

Todd Wilson*
Bethany Lutheran Homes
La Crosse

Mary Ann Drescher
Attic Angel Association
Madison

Roger Goepfert*
New Glarus Home
New Glarus

Wanda Plachecki
Lakeview Health Center
West Salem

Robert Schaefer*
LindenGrove
New Berlin

Marion Wozniak*
Cedar Crest
Janesville

David Fulcher
Presbyterian Homes
Waukesha

Miriam Ownby
Markesan Resident Home
Markesan

The Rev. Daniel Risch
Lincoln Lutheran of Racine
Racine

Steve Seybold*
Homme Home
Wittenberg

Bonnie Zabel
Marquardt Memorial Manor
Watertown

2006-2007

Board of Directors
Regional Directors

Region I
Lynn Binnie*
Fairhaven Corporation
Whitewater

Region IV
Gary Taxdahl
Golden Age Manor
Amery

Region II
Bill Bender
St. Mary's Care Center
Madison

Region V
Jim Fett*
St. Paul Elder Services
Kaukauna

Region III
Dean Eide
Trempealeau County HCC
Whitehall

Region VI
Craig Ubbelohde
Lutheran Homes of Oshkosh
Oshkosh

2006-2007

Immediate
Past President

Tim Steller
North Central HC Facilities
Wausau

WAHSA Staff

John Sauer
Executive Director

Brian Schoeneck
Director of Financial Services

Janice Mashak
Director of Member Services

Pam Walker
Executive Secretary

Tom Ramsey
Director of Government Relations

Linda Rose
Project Assistant