



## QA REPORT

**TO:** Bradley A. Hedges, Ph.D.  
Executive Director

**FROM:** Shawna Watts-Shumaker, MBA  
Quality Assurance Coordinator

**SUBJECT:** Quality Assurance Activities for January 2006  
Chart Reviews for November 2005

**SUBMITTED:** June 6, 2006

### I: MAJOR UNUSUAL INCIDENTS

There was one major unusual incident for the month of January. This incident occurred on 1/11/2006. Client #050826C1 was escorted to the local jail by Lancaster Police Department after his bond was revoked by the Fairfield County Mental Health Court judge due to significant change in the client's mental state. The client was assessed in jail on 1/12/2006, however was not transported to Fairfield Medical Center. The client was released from jail on 1/23/2006 and attended a follow up appointment on 1/24/2006 with Dr. Shehata at New Horizons.

### II: TRANSFERS FROM STATE HOSPITALS

There was one discharge from a state hospital in January. Client #02110703 was admitted to Twin Valley Behavioral Health on 12/6/2005 and discharged on 1/13/2006. Joe Dunson saw the client on 1/13/2006.

There were three clients discharged from community hospitalization in January. Client #0601203 was admitted to Fairfield Medical Center on 1/8/2006 and discharged on 1/11/2006. Sonya Slater saw the client for an intake on 1/20/2006.

The second client #03112406 was admitted to Fairfield Medical Center on 12/16/2005 and discharged on 12/18/2005. Jessica Mitchell saw the client on 12/27/2005.

The third client #05052304 was admitted to OSU Medical Center on 12/31/2005 and discharged on 1/5/2006. Jessica Mitchell saw the client on 1/10/2006.



### III: PLANT/PHYSICAL HEALTH AND SAFETY

There were no health and safety issues identified.

### IV: RECORDS COMPLETENESS REVIEW (November)

Clinicians	Percent Compliant With Standard	Chart Included AOD Services	Chart Included CSP Services
<b>Chris Ray's Team</b>			
Dr. Chris Ray	98	NO	NO
Bonnie Daniels	97	NO	YES
Rick Gehlbach	100	NO	NO
Chris Johnson	97	NO	YES
Tricia Ostrander	100	NO	NO
<b>Team Score</b>	<b>98</b>		
<b>Robin Rippeth's Team</b>			
Dr. Robin Rippeth	99	NO	YES
Steve Ford	85*	NO	NO
Mike Selegue	96	NO	NO
Paula Moreland	95	NO	YES
Karis Mason	98	NO	YES
Misty Coleman	96	NO	NO
Jessica Mitchell	96	NO	NO
Ellen Marshall	98	NO	NO
Kimberly Rugg	98	NO	NO
<b>Team Score</b>	<b>96</b>		
<b>Scott Craft's Team</b>			
Dr. Scott Craft	99	NO	YES
Joe Dunson	95	NO	YES
A.J. Bierly	92*	NO	YES
Amanda Moore	98	NO	YES
<b>Team Score</b>	<b>96</b>		
<b>Brad Hedges' Team</b>			
Dr. Brad Hedges	96	NO	NO
Claire Robitaille	98	NO	NO
Dean Bachelor	95	NO	NO
<b>Team Score</b>	<b>96</b>		
<b>Franklin County Team</b>			
Joni Grim	95	NO	YES
Heather Stevens	86*	NO	YES
<b>Team Score</b>	<b>91</b>		

\*Denotes that the clinician did not meet the target threshold of 95% compliance with the standards.

Eighty-two percent of the clinicians met the 95% threshold for the record review.

Reasons that clinicians did not meet the threshold and the percentage of records reviewed are as follows:

- Thirty-two percent of the records reviewed were missing a copy of the current medical card.
- Twenty-three percent of the records reviewed were missing forms or had incomplete forms in the chart.
- Signatures were missing on some forms in the chart for 45% of the clinicians.
- In fifty-nine percent of the records reviewed there was at least one session recorded that did not match the billing record.
- Forty-one percent of the records reviewed had an Individual Service Plan on the chart that needed to be updated.
- Five percent of the records reviewed did not have a reviewed health assessment.
- There were no missing case notes for billed services.

**V: PEER REVIEW (November)**

Clinicians	Percent Compliant With Standard	Chart Included AOD Services	Chart Included CSP Services
<b>Chris Ray's Team</b>			
Dr. Chris Ray	94	NO	NO
Bonnie Daniels	94	NO	YES
Rick Gehlbach	100	NO	NO
Chris Johnson	96	NO	YES
Tricia Ostrander	100	NO	NO
<b>Team Score</b>	<b>97</b>		
<b>Robin Rippeth's Team</b>			
Dr. Robin Rippeth	96	NO	YES
Steve Ford	95	NO	NO
Mike Selegue	90	NO	NO
Paula Moreland	75*	NO	YES
Karis Mason	98	NO	NO
Misty Coleman	90	NO	NO
Jessica Mitchell	98	NO	NO
Ellen Marshall	90	NO	NO
Kimberly Rugg	96	NO	NO
<b>Team Score</b>	<b>92</b>		
<b>Scott Craft's Team</b>			
Dr. Scott Craft	98	NO	YES
Joe Dunson	93	NO	YES
A.J. Bierly	90	NO	YES
Amanda Moore	93	NO	YES
<b>Team Score</b>	<b>94</b>		
<b>Brad Hedges' Team</b>			
Dr. Brad Hedges	97	NO	NO
Claire Robitaille	98	NO	NO
Dean Bachelor	88*	NO	NO
<b>Team Score</b>	<b>94</b>		

<b>Franklin County Team</b>			
Joni Grim	94	NO	YES
Heather Stevens	97	NO	YES
<b>Team Score</b>	<b>96</b>		

\*Denotes that the clinician did not meet the target threshold of 90% compliance with the standards.

Ninety-one percent of the clinicians met the 90% threshold for peer review.

- Forty-one percent of the records reviewed for peer review showed that the clinician did not complete the required forms, or make the necessary referrals.
- Sixty-eight percent of the records were not maintained consistently in that case notes were not completed and not billed for. Also, the client, clinician, and the supervisor have not signed the progress note or other necessary documentation.

### VI: UTILIZATION REVIEW (January)

Clinician	Number of Clients Assigned	Number of Clients Seen	Average Number of Contacts Per Client Seen
Dean Bachelor	36	12	2.33
A.J. Bierly	46	29	3.48
Misty Coleman	64	36	2.50
Dr. Scott Craft	81	21	2.48
Bonnie Daniels	60	15	1.00
Joe Dunson	25	24	3.46
Steve Ford	72	40	2.25
Rick Gehlbach	55	40	1.68
Dr. Joni Grim	84	24	2.50
Dr. Brad Hedges	67	14	1.79
Chris Johnson	92	45	1.84
Ellen Marshall	112	37	2.49
Karis Mason	69	57	1.54
Jessica Mitchell	28	37	2.29
Amanda Moore	45	44	3.14
Paula Moreland	75	52	1.88
Tricia Ostrander	74	41	1.39
Dr. Robin Rippeth	24	13	2.23
Claire Robitaille	42	32	1.97
Kimberly Rugg	51	42	2.50
Mike Selegue	91	55	1.61
Heather Stevens	20	35	2.31
<b>Average</b>	<b>59</b>	<b>32</b>	<b>2.03</b>

The No Show rate for January was 17%. When considering both the no show rate and the cancellation rate, this figure is 27%.

### VII: AOD UTILIZATION REVIEW

There are currently no AOD groups active within the agency. AOD clients continue to be seen on an individual basis following the agency's revised AOD program.

### **VIII: INVOLUNTARY TERMINATIONS**

No involuntary terminations were conducted during the month of January 2006.

### **IX: PROFESSIONAL STAFF ORGANIZATION**

The clinical staff maintains current licensure requirements. However, no one attended CEU training in the month of January.

### **X: REVIEW OF WAITING LIST**

There were a total of 94 new clients seen in the month of January. Sixty-seven percent of these new clients were from Fairfield County. The total number of clients seen in the month of December was 745.

The average time between phone intake and completion of intakes for new clients was 43 days, due to the holiday season. The agency strives to see new clients within 30 days of initial contact.

### **XI: REVIEW OF SERVICES UNDER CONTRACT**

Currently no services are provided under contract to this agency.

### **XII: FOCUSED REVIEW AREA**

The focused area of review for January was to review trends and patterns of service, highlighting gaps of service. A review of services rendered was conducted by county for calendar year 2005, trends in services were reviewed for 2001 through 2005. Overall, we have seen service growth in the following counties; Athens-Hocking-Vinton, Franklin, and Paint Valley County ADAMH Boards. Our agency has a clinic in Franklin County and we have seen consistent growth there. We had a decrease of approximately 17 percent in total overall services for Fairfield County, finishing calendar year 2005 approximately 2 percent below the agency's projected budget.

The following trends have occurred in the agency's services over the past calendar year, diagnostic intakes, individual counseling, medication management, and group services have shown an increase over last year, and CSP services and AOD services have decreased. The CSP services have decreased due to the transition of staff in this department as well as increased accountability for CSP referrals. Decreases in AOD services can be attributed to the agency not conducting any AOD groups.

The second area of review was to complete an annual safety review and forward it to the Board of Directors. This was done and reviewed in the June meeting.

The final area of review was to conduct the quarterly fire drill. The drill was conducted on February 8, 2006 using the telephone intercom system. The evacuation of all three-agency buildings was completed in 1 minute, 1 second. Seven people participated in the drill.

### **XIII: RESPONSE TO LAST MONTHS FOCUS REVIEW**

There was no response to last month's focused review.

### **XIV: CLIENT RIGHTS AND GRIEVANCES**

There were no client rights or grievance issues for January 2006.

### **XV: TREATMENT OUTCOMES REPORTING**

The agency continues to submit outcomes at a higher rate than the other local systems agencies. Starting next month, the agency will start using the data mart provided on the ODMH website to report.

cc:     Fairfield County Mental Health and Recovery Services Board  
       MOPS Board of Directors  
       MOPS Staff  
       QA Minutes Logbook

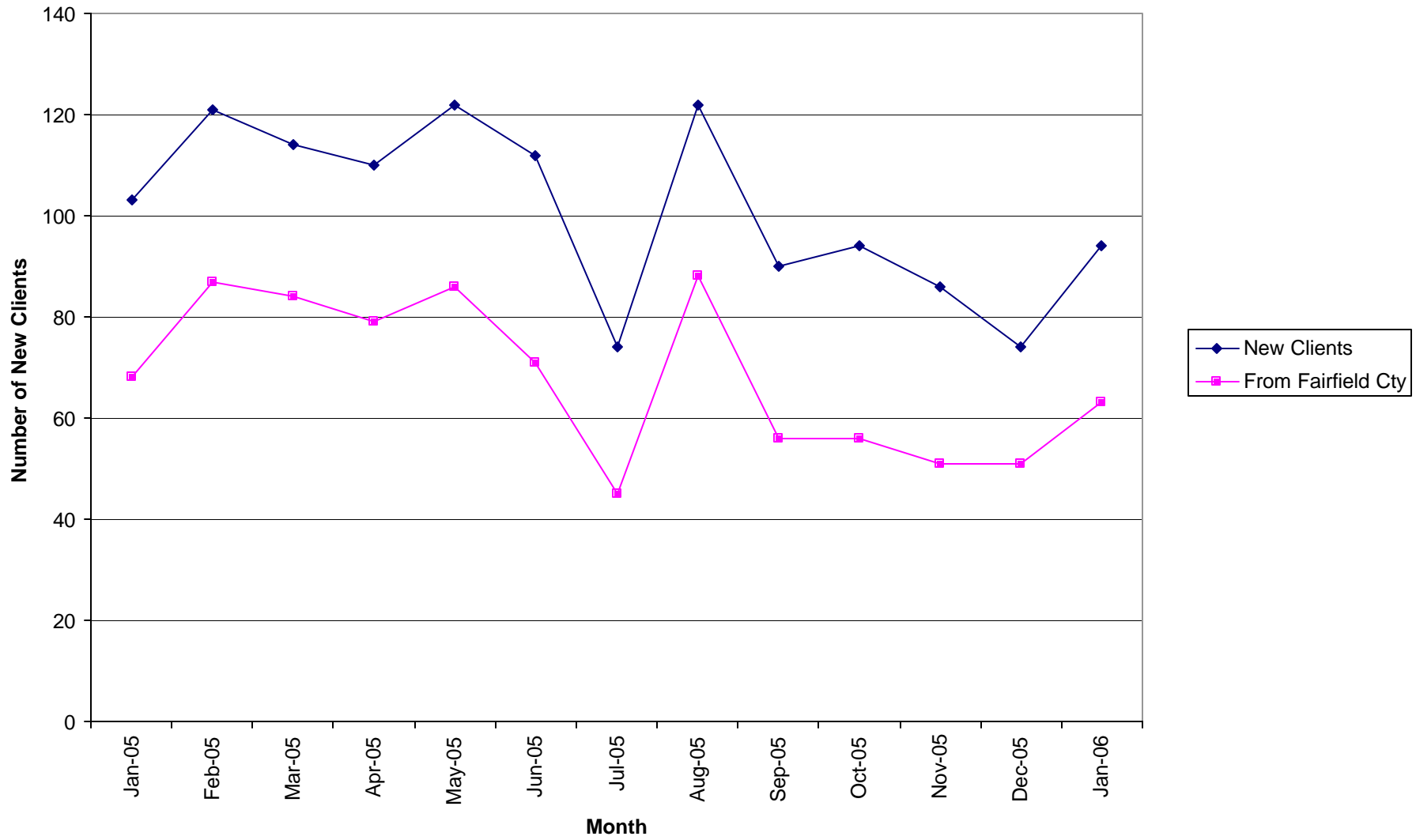
**Agency Service Budget Month of January 2006**

	Service Provided for Month		Budgeted for Month		Fiscal Y-T-D Provided		Fiscal Y-T-D Budgeted		Variance between Budgeted and Provided Y-T-D	
	Total For All of MOPS	Fairfield County Medicaid	Total For All of MOPS	Fairfield County Medicaid	Total For All of MOPS	Fairfield County Medicaid	Total For All of MOPS	Fairfield County Medicaid	Total For All of MOPS	Fairfield County Medicaid
Diagnostic/Assessment	159	107	200	83	1,217	678	1,400	581		
	\$20,681	\$13,870	\$25,998	\$10,789	\$158,159	\$88,159	\$181,986	\$75,524	(\$23,827)	\$12,635
Individual Counseling	1,075	673	962	510	6,644	4,143	6,734	3,570		
	\$96,750	\$60,579	\$86,580	\$45,900	\$597,960	\$372,879	\$606,060	\$321,300	(\$8,100)	\$51,579
Individual CSP	278	226	302	208	1,330	1,462	2,114	1,456		
	\$23,719	\$19,308	\$25,767	\$17,747	\$113,433	\$124,763	\$180,366	\$124,226	(\$66,934)	\$538
Group CSP	0	0	0	0	0	0	0	0		
	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Group	227	44	208	26	1,411	227	1,456	182		
	\$8,942	\$1,741	\$8,212	\$1,026	\$55,687	\$8,966	\$57,483	\$7,185	(\$1,796)	\$1,781
Medication	55	41	53	34	366	265	371	238		
	\$11,514	\$8,561	\$11,176	\$7,170	\$77,157	\$55,775	\$78,233	\$50,187	(\$1,075)	\$5,588
AOD Assessment	0	0	2	2	0	0	14	14		
	\$0	\$0	\$192	\$192	\$0	\$0	\$1,347	\$1,347	(\$1,347)	(\$1,347)
AOD Individual	0	0	2	1	0	0	14	7		
	\$0	\$0	\$131	\$87	\$0	\$0	\$1,221	\$611	(\$1,221)	(\$611)
AOD Group	0	0	12	6	0	0	84	42		
	\$0	\$0	\$457	\$228	\$0	\$0	\$3,199	\$1,599	(\$3,199)	(\$1,599)
Court Diversion	66	0	196	0	408	148	1,372	0		
	\$2,310	\$0	\$6,860	\$0	\$14,284	\$5,177	\$48,020	\$0	(\$33,737)	\$5,177
Forensic Evaluations	7	0	2	0	16	2	14	0		
	\$3,500	\$0	\$1,000	\$0	\$8,000	\$1,000	\$7,000	\$0	\$1,000	\$1,000
Other	0	0	8	0	0	0	56	0		
	\$0	\$0	\$280	\$0	\$0	\$0	\$1,960	\$0	(\$1,960)	\$0
Sum \$	\$163,916	\$104,059	\$165,373	\$83,140	\$1,016,679	\$655,719	\$1,157,916	\$581,980	(\$141,236)	\$73,739

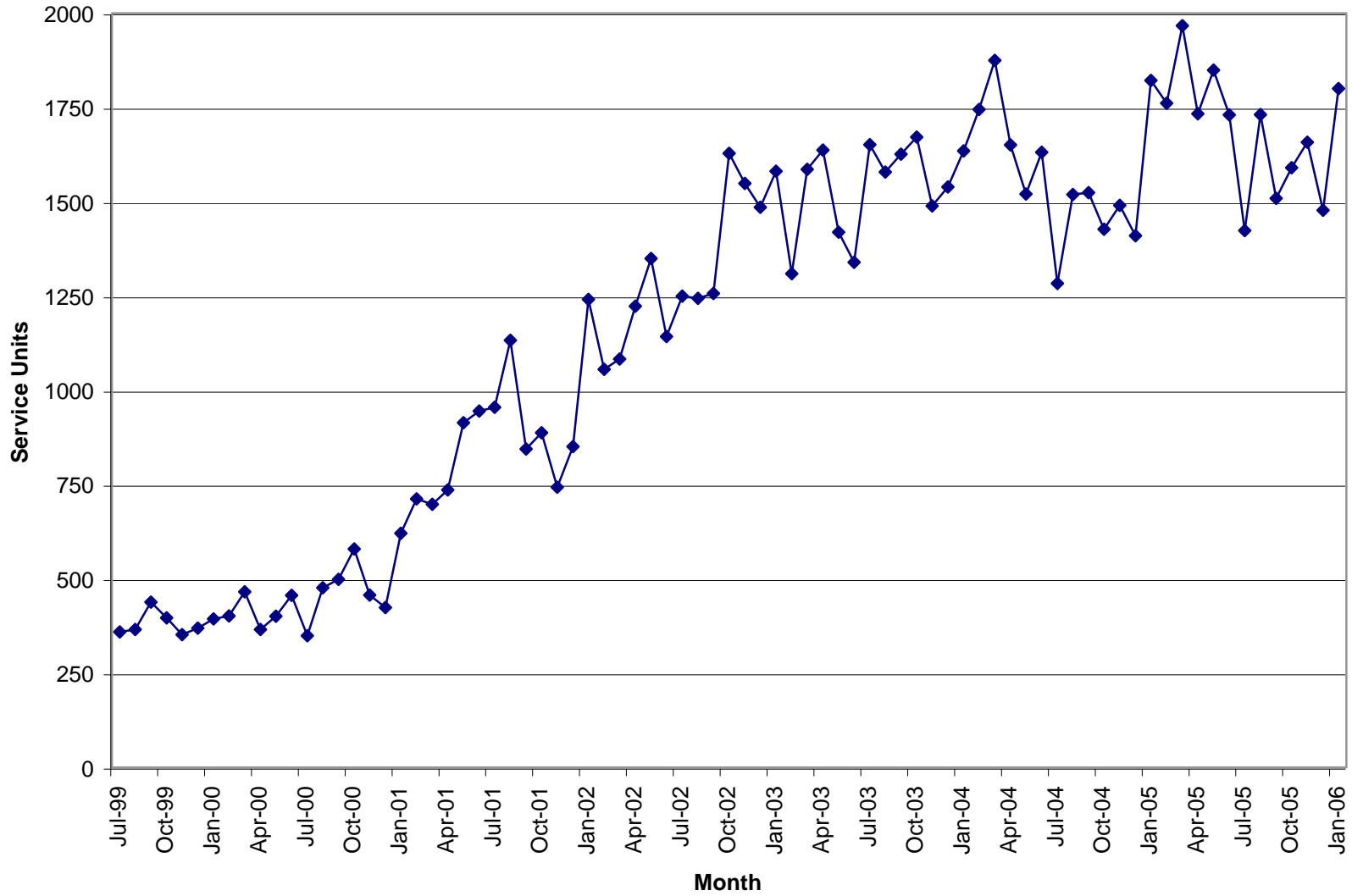
\* ( ) figures indicate that MOPS provided fewer services in this category than budgeted.

63% Percent of Services for Fairfield County  
 12.20% Percent Below Overall MOPS Budget  
 12.60% Percent Over Fairfield County Medicaid

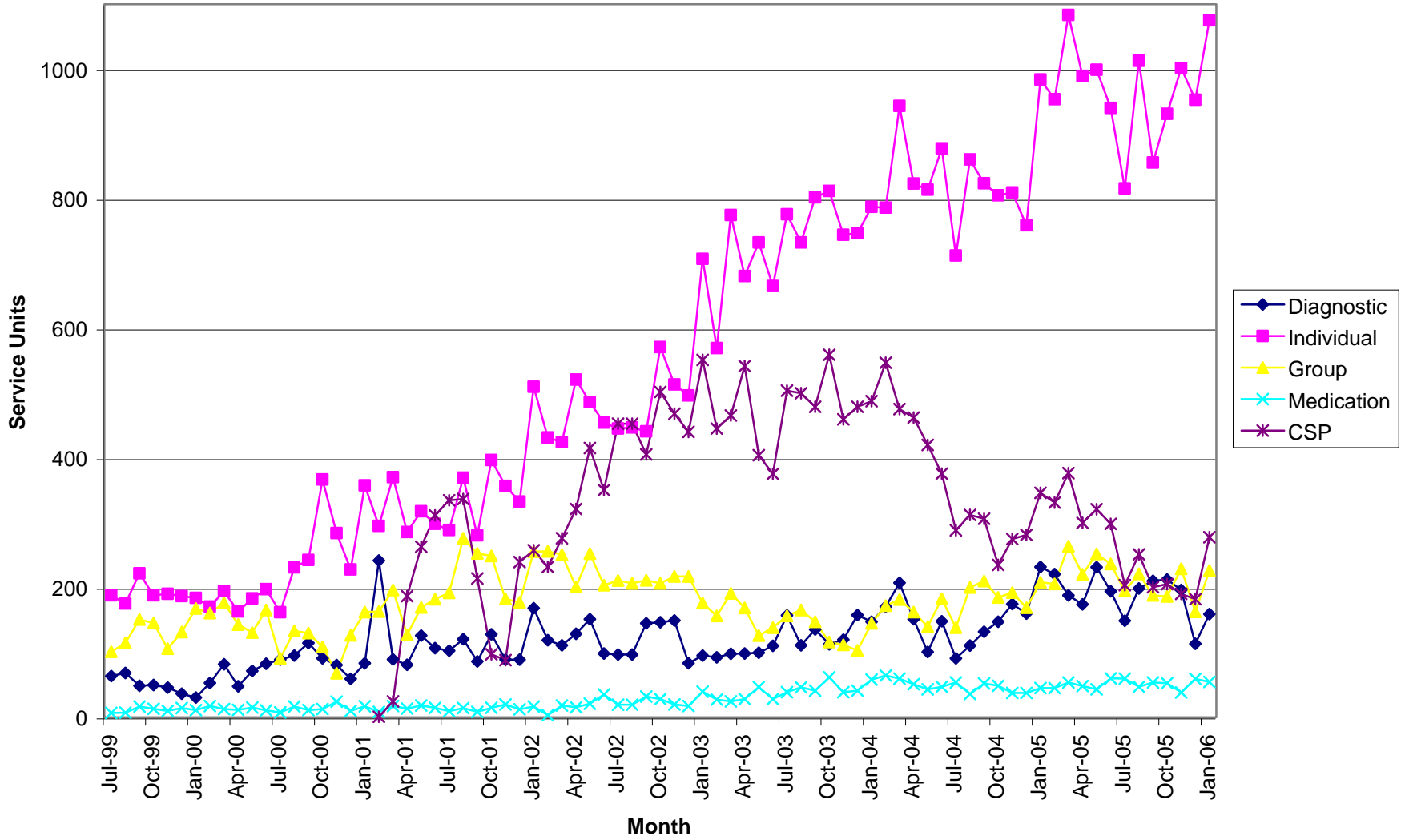
### New Clients



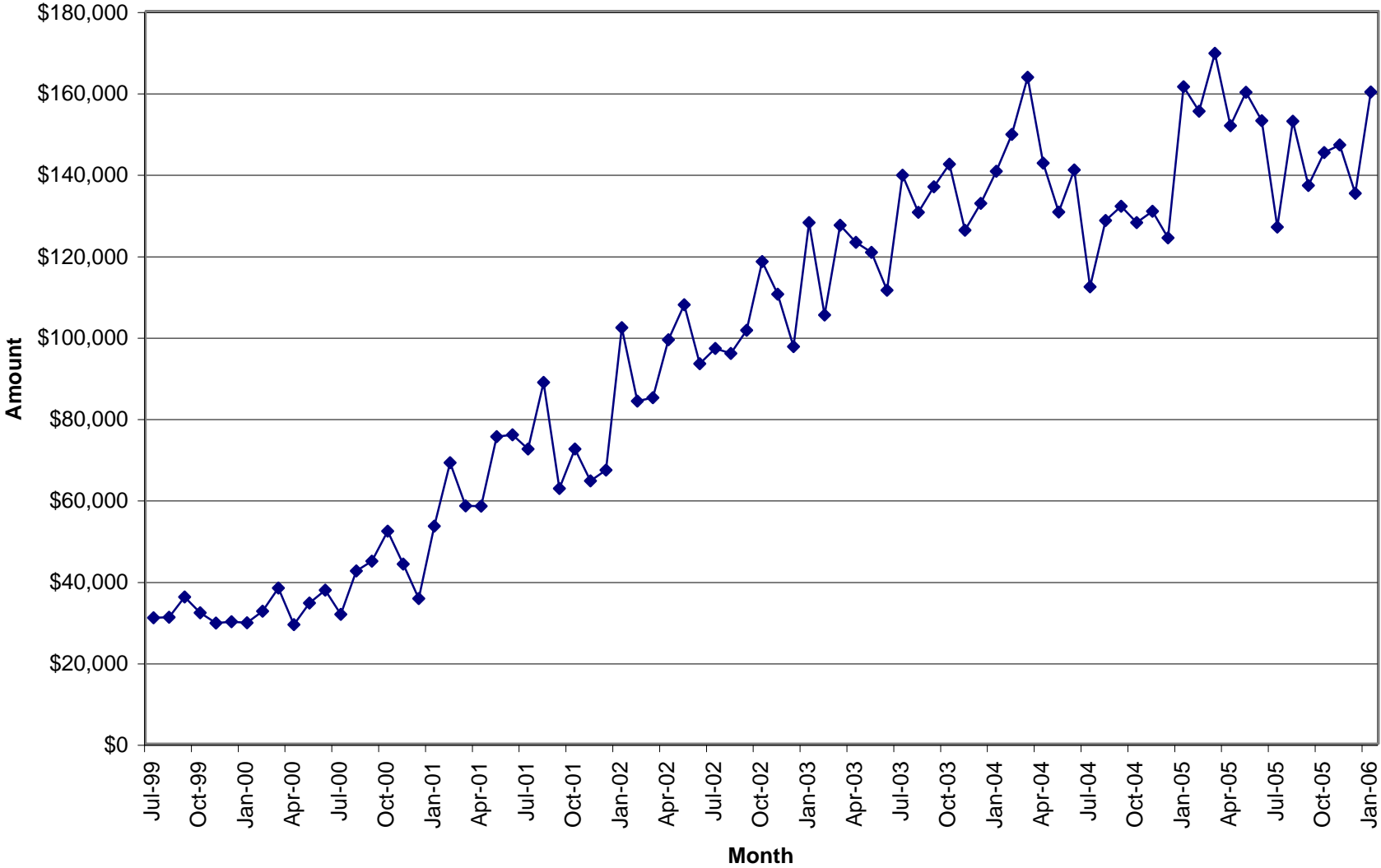
### Total Units of Service



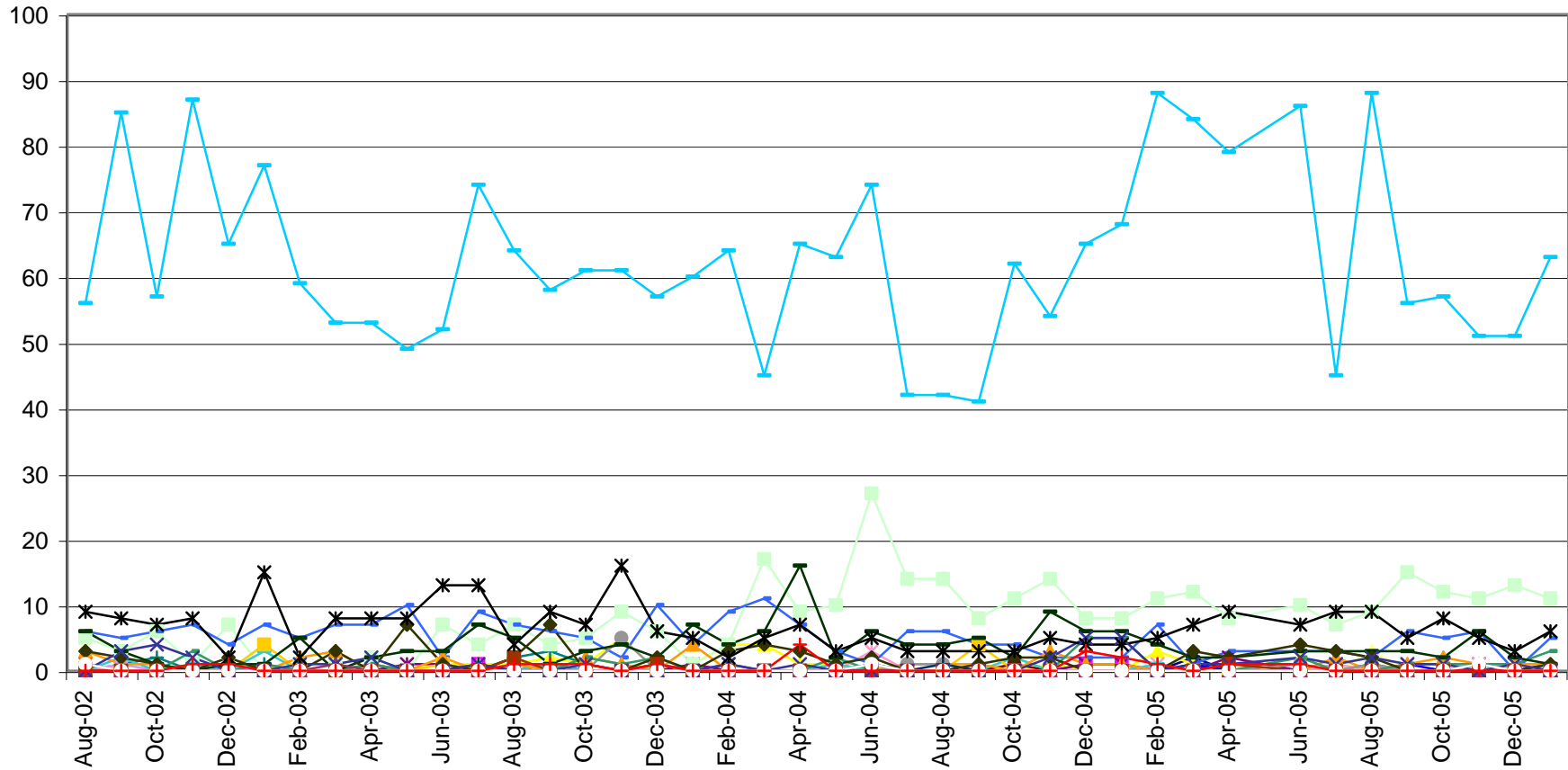
# Units of Service



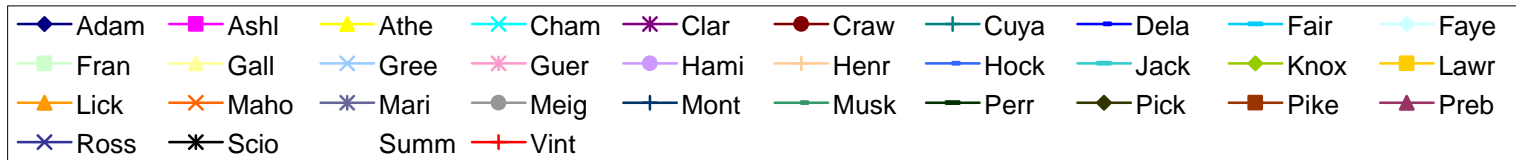
### Total Units \$



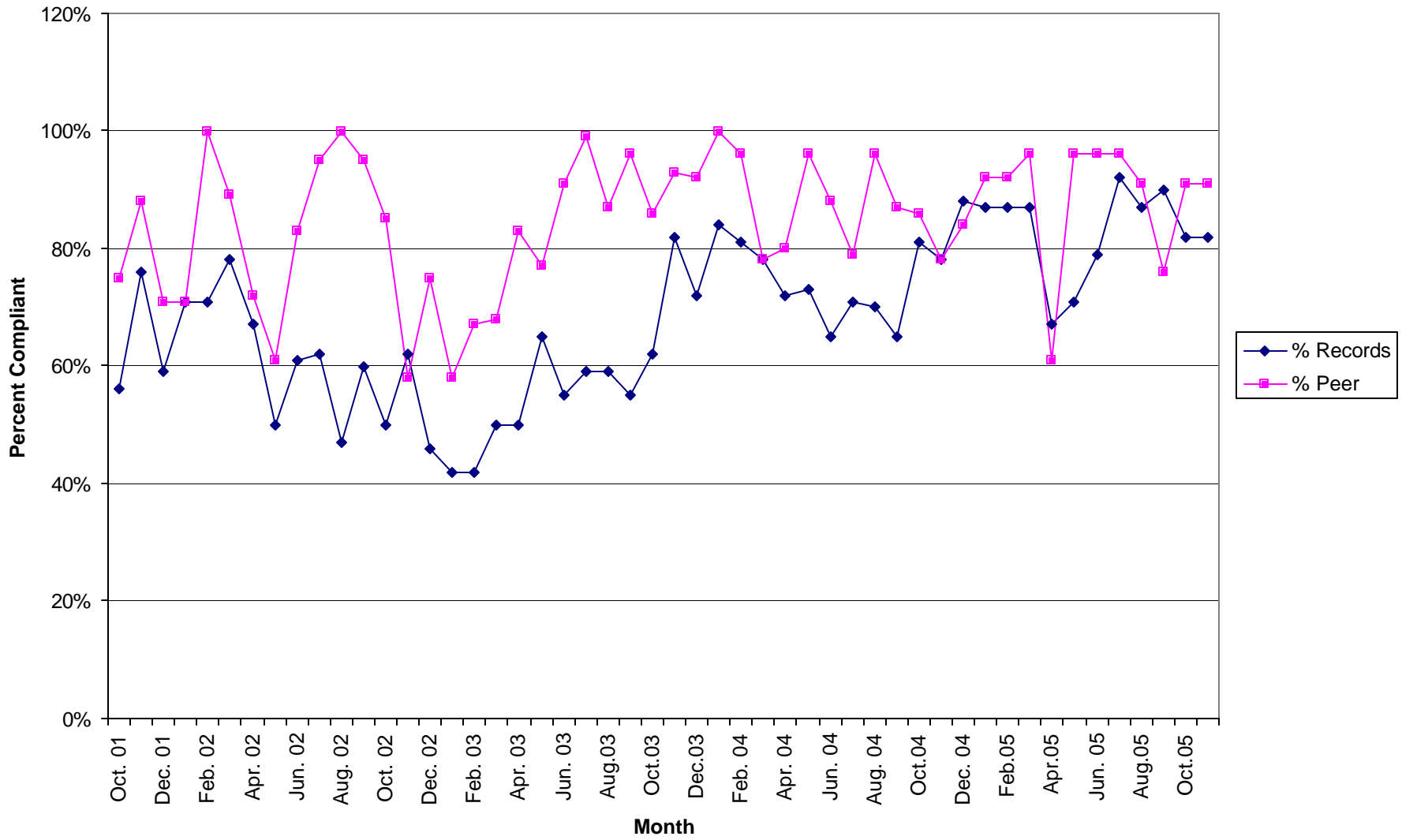
### Number of Intakes by County



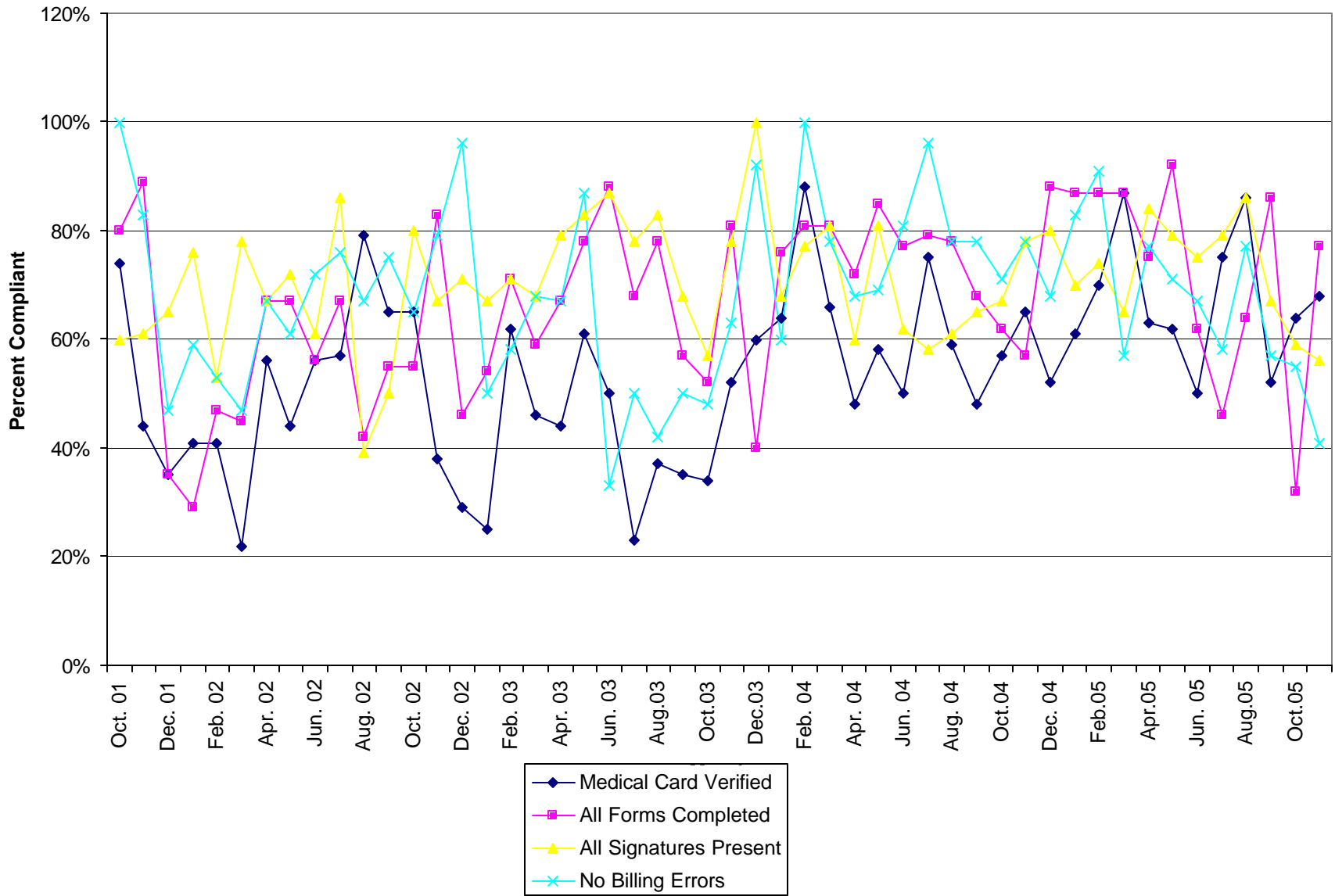
Prior to 9/05 the numbers reported were somewhat inflated due to a report issue that has been corrected.



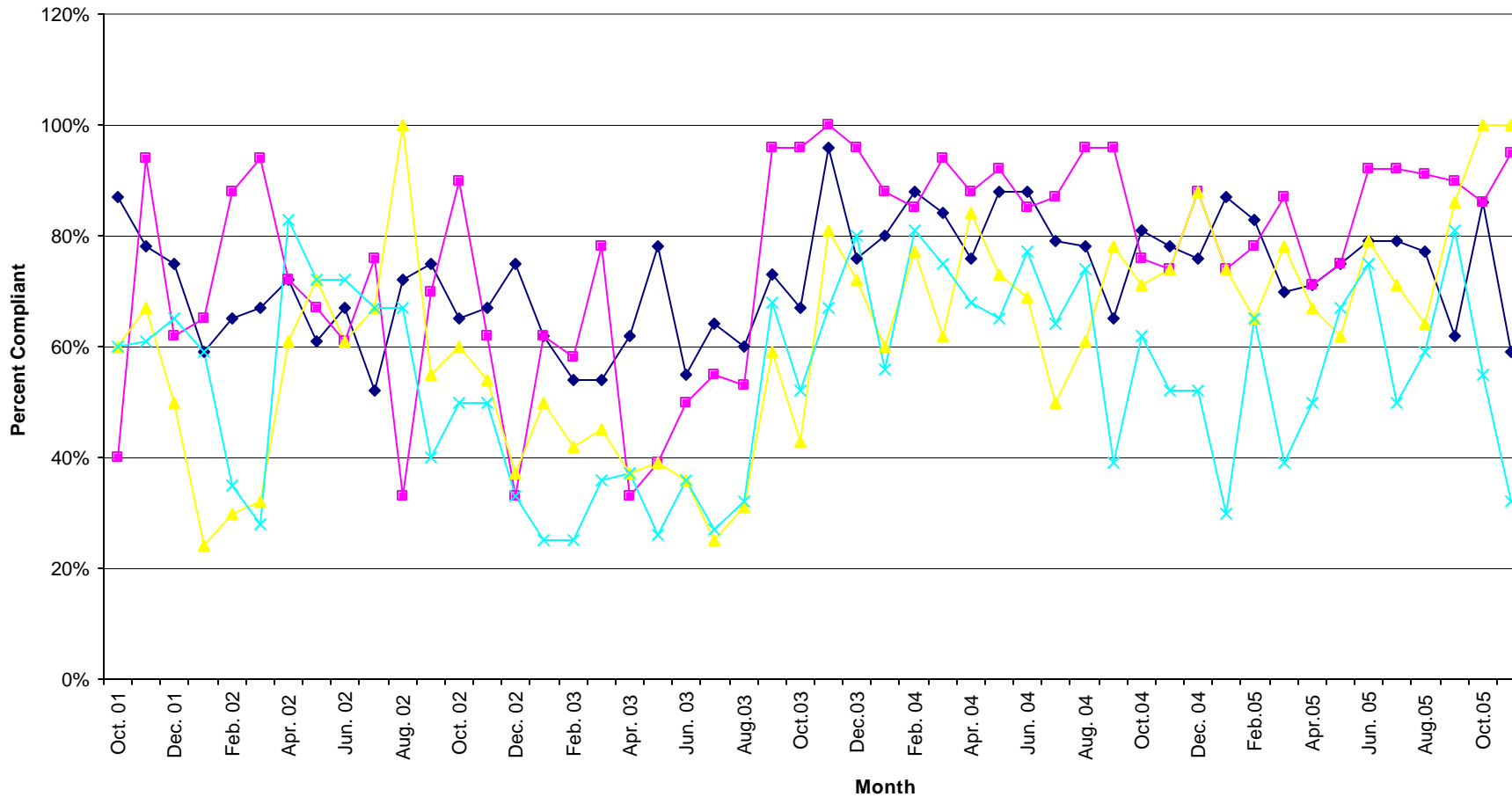
# Compliance Review



### Selected Record Review Issues



### Selected Record Review Issues



- ◆ ISP Completed and Updated
- Health Assessment Completed and Reviewed
- ▲ All Notes Present
- × Record Maintained Consistently

**Unit Production & Scheduling Proficiency by Clinician  
Mid Ohio Psychological Services**

January 2006

	Cancellations	Missed	Diagnostics	Evaluations	AOD Assessments	Individual	Group	Community Support	Medication	Other Units	Total Units	Billable Units	Units Billed+ Missed	Schedule Proficiency	% Canceled	% Missed	Lost Units due to C & M	% of Total Billable Units
<b>Unit Rate</b>			<b>129.99</b>	<b>129.99</b>	<b>96.24</b>	<b>90</b>	<b>39.48</b>	<b>65</b>	<b>195</b>	<b>35</b>								
Dean Bachelor	3	3	1.00	0.00	0.00	9.00	17.00	0.00	0.0		33.00	27.00	30.00	90%	9%	9%	18%	1%
A. J. Bierly*	0	0	0.00	0.00	0.00	0.00	0.00	90.70	0.0		90.70	90.70	90.70	100%	0%	0%	0%	5%
Misty Coleman	52	27	2.00	0.00	0.00	61.00	81.60	0.00	0.0		223.60	144.60	171.60	65%	23%	12%	35%	8%
Scott Craft	6	18	2.00	0.00	0.00	30.20	42.00	0.00	0.0	5.0	103.20	79.20	97.20	77%	6%	17%	23%	4%
Bonnie Daniels	6	18	0.00	0.00	0.00	12.00	0.00	1.80	0.0		37.80	13.80	31.80	37%	16%	48%	63%	1%
Cassie Dille	0	0	0.00	0.00	0.00	0.00	0.00	101.30	0.0		101.30	101.30	101.30	100%	0%	0%	0%	5%
Joe Dunson *	0	0	0.00	0.00	0.00	0.00	0.00	2.60	0.0	61.0	63.60	63.60	63.60	100%	0%	0%	0%	3%
Steve Ford	15	38	1.50	0.00	0.00	80.90	0.00	5.60	0.0		141.00	88.00	126.00	62%	11%	27%	38%	5%
Rick Gehlbach	7	34	14.90	0.00	0.00	46.50	0.00	0.90	0.0		103.30	62.30	96.30	60%	7%	33%	40%	3%
Joni Grim	8	14	2.20	0.00	0.00	53.10	0.00	4.60	0.0		81.90	59.90	73.90	73%	10%	17%	27%	3%
Brad Hedges	2	1	0.00	8.20	0.00	7.00	0.00	1.00	0.0		19.20	16.20	17.20	84%	10%	5%	16%	1%
Chris Johnson	27	30	4.00	0.00	0.00	69.20	0.00	4.90	0.0		135.10	78.10	108.10	58%	20%	22%	42%	4%
Ellen Marshall	12	38	4.80	0.00	0.00	81.90	0.00	6.10	0.0		142.80	92.80	130.80	65%	8%	27%	35%	5%
Karis Mason	13	27	7.80	14.80	0.00	39.00	20.70	0.70	0.0		123.00	83.00	110.00	67%	11%	22%	33%	4%
Jessica Mitchell	11	21	0.00	0.00	0.00	52.20	1.00	1.20	0.0		86.40	54.40	75.40	63%	13%	24%	37%	3%
Amanda Moore	22	22	0.00	0.00	0.00	94.30	0.00	32.30	0.0		170.60	126.60	148.60	74%	13%	13%	26%	7%
Paula Moreland	13	23	14.00	0.00	0.00	71.40	0.00	2.70	0.0		124.10	88.10	111.10	71%	10%	19%	29%	5%
Tricia Ostrander	17	18	23.50	0.00	0.00	40.10	0.00	1.50	0.0		100.10	65.10	83.10	65%	17%	18%	35%	3%
Robin Rippeth	2	8	14.50	0.00	0.00	22.20	0.00	3.60	0.0		50.30	40.30	48.30	0%	0%	0%	0%	2%
Claire Robitaille	8	22	6.00	0.00	0.00	54.70	0.00	0.00	0.0		90.70	60.70	82.70	67%	9%	24%	33%	3%
Kimberly Rugg	21	34	17.00	0.00	0.00	80.10	0.00	8.00	0.0		160.10	105.10	139.10	66%	13%	21%	34%	6%
Mike Selegue	16	33	7.60	0.00	0.00	79.10	0.00	0.60	0.0		136.30	87.30	120.30	64%	12%	24%	36%	5%
Sonya Slater	11	3	20.00	0.00	0.00	55.20	0.00	6.10	0.0		95.30	81.30	84.30	85%	12%	3%	15%	4%
Charles Snyder	53	55	0.00	0.00	0.00	0.00	0.00	0.00	54.6		162.80	54.60	109.80	34%	33%	34%	66%	3%
Heather Stevens	25	23	16.30	0.00	0.00	35.90	64.20	1.80	0.0		166.20	118.20	141.20	0%	0%	0%	0%	6%
<b>Sum Totals</b>	<b>350</b>	<b>510</b>	<b>159.10</b>	<b>23.00</b>	<b>0.00</b>	<b>1075.00</b>	<b>226.50</b>	<b>278.00</b>	<b>54.6</b>	<b>66.0</b>	<b>2742.40</b>	<b>1882.20</b>	<b>2392.40</b>					
<b>Average</b>														<b>65%</b>	<b>10%</b>	<b>17%</b>	<b>27%</b>	<b>4%</b>

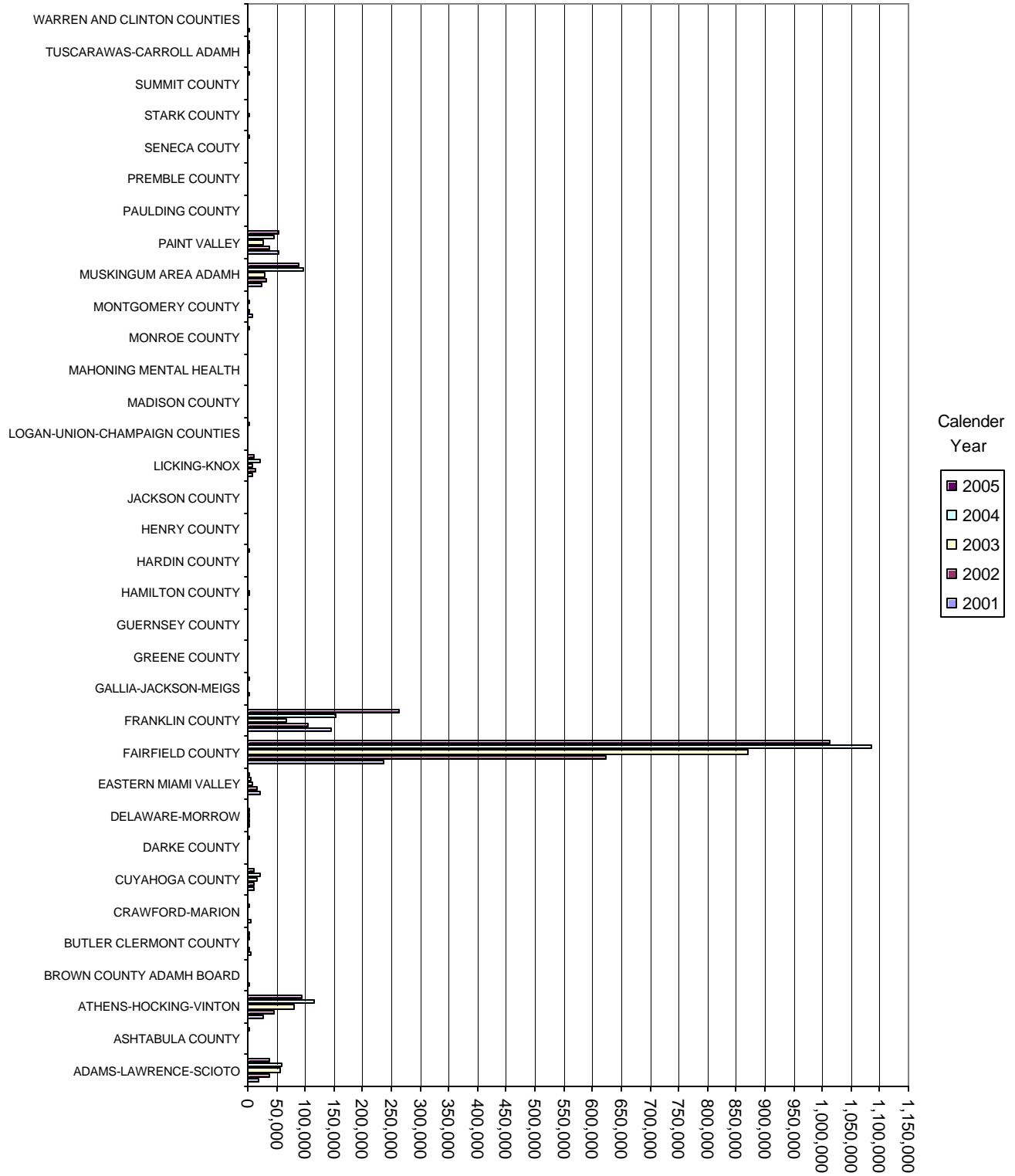
\* These clinicians do not have a daily scheduler therefore their totals are not reported in the missed or cancelled sessions.

**% of Agency \$ Billed by Clinician**

January	2006		Weighted							
	DA	EVAL	AOD	IND	Group	CSP	MED	Other	Tot Units	% of Tot
Unit Rate	\$ 129.99	\$ 129.99	\$ 96.24	\$ 90	\$ 39.48	\$ 65	\$ 195	\$ 35		
Dean Bachelor	1.00	0.00	0.00	0.00	17.00	0.00	0.0	0.0		
	\$130	\$0	\$0	\$0	\$671	\$0	\$0	\$0	\$ 801.15	0.50%
A.J. Bierly	0.00	0.00	0.00	0.00	0.00	90.70	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,895.50	\$0.00	\$0.00	\$ 5,895.50	3.69%
Misty Coleman	2.00	0.00	0.00	61.00	81.60	0.00	0.00	0.00		
	\$259.98	\$0.00	\$0.00	\$5,490.00	\$3,221.57	\$0.00	\$0.00	\$0.00	\$ 8,971.55	5.62%
Scott Craft	2.00	0.00	0.00	30.20	42.00	0.80	0.0	5.0		
	\$259.98	\$0.00	\$0.00	\$2,718.00	\$1,658.16	\$52.00	\$0.00	\$175.00	\$ 4,863.14	3.05%
Bonnie Daniels	0.00	0.00	0.00	12.00	0.00	1.80	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$1,080.00	\$0.00	\$117.00	\$0.00	\$0.00	\$ 1,197.00	0.75%
Cassie Dille	0.00	0.00	0.00	0.00	0.00	101.30	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6,584.50	\$0.00	\$0.00	\$ 6,584.50	4.12%
Joe Dunson	0.00	0.00	0.00	0.00	0.00	2.60	0.00	61.00		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$169.00	\$0.00	\$2,135.00	\$2,304.00	1.44%
Steve Ford	1.50	0.00	0.00	80.90	0.00	5.60	0.00	0.00		
	\$194.99	\$0.00	\$0.00	\$7,281.00	\$0.00	\$364.00	\$0.00	\$0.00	\$ 7,839.99	4.91%
Rick Gehlbach	14.90	0.00	0.00	46.50	0.00	0.90	0.00	0.00		
	\$1,936.85	\$0.00	\$0.00	\$4,185.00	\$0.00	\$58.50	\$0.00	\$0.00	\$ 6,180.35	3.87%
Joni Grim	2.20	0.00	0.00	53.10	0.00	4.60	0.00	0.00		
	\$285.98	\$0.00	\$0.00	\$4,779.00	\$0.00	\$299.00	\$0.00	\$0.00	\$ 5,363.98	3.36%
Brad Hedges	0.00	8.20	0.00	7.00	0.00	1.00	0.00	0.00		
	\$0.00	\$1,065.92	\$0.00	\$630.00	\$0.00	\$65.00	\$0.00	\$0.00	\$ 1,760.92	1.10%
Chris Johnson	4.00	0.00	0.00	69.20	0.00	4.90	0.00	0.00		
	\$519.96	\$0.00	\$0.00	\$6,228.00	\$0.00	\$318.50	\$0.00	\$0.00	\$ 7,066.46	4.43%
Ellen Marshall	4.80	0.00	0.00	81.90	0.00	6.10	0.00	0.00		
	\$623.95	\$0.00	\$0.00	\$7,371.00	\$0.00	\$396.50	\$0.00	\$0.00	\$8,391.45	5.26%
Karis Mason	7.80	14.80	0.00	39.00	20.70	0.70	0.00	0.00		
	\$1,013.92	\$1,923.85	\$0.00	\$3,510.00	\$817.24	\$45.50	\$0.00	\$0.00	\$ 7,310.51	4.58%
Jessica Mitchell	0.00	0.00	0.00	52.20	1.00	1.20	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$4,698.00	\$39.48	\$78.00	\$0.00	\$0.00	\$4,815.48	3.02%
Amanda Moore	0.00	0.00	0.00	94.30	0.00	32.30	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$8,487.00	\$0.00	\$2,099.50	\$0.00	\$0.00	\$10,586.50	6.63%
Paula Moreland	14.00	0.00	0.00	71.40	0.00	2.70	0.0	0.0		
	\$1,819.86	\$0.00	\$0.00	\$6,426.00	\$0.00	\$175.50	\$0.00	\$0.00	\$ 8,421.36	5.28%
Tricia Ostrander	23.50	0.00	0.00	40.10	0.00	1.50	0.0	0.0		
	\$3,054.77	\$0.00	\$0.00	\$3,609.00	\$0.00	\$97.50	\$0.00	\$0.00	\$ 6,761.27	4.24%
Robin Rippeth	14.50	0.00	0.00	22.20	0.00	3.60	0.00	0.00		
	\$1,884.86	\$0.00	\$0.00	\$1,998.00	\$0.00	\$234.00	\$0.00	\$0.00	\$ 4,116.86	2.58%
Claire Robitaille	6.00	0.00	0.00	54.70	0.00	0.00	0.00	0.00		
	\$779.94	\$0.00	\$0.00	\$4,923.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,702.94	3.57%
Kimberly Rugg	17.00	0.00	0.00	80.10	0.00	8.00	0.00	0.00		
	\$2,209.83	\$0.00	\$0.00	\$7,209.00	\$0.00	\$520.00	\$0.00	\$0.00	\$9,938.83	6.23%
Mike Selegue	7.60	0.00	0.00	79.10	0.00	0.60	0.00	0.00		
	\$987.92	\$0.00	\$0.00	\$7,119.00	\$0.00	\$39.00	\$0.00	\$0.00	\$8,145.92	5.10%
Sonya Slater	20.00	0.00	0.00	55.20	0.00	6.10	0.00	0.00		
	\$2,599.80	\$0.00	\$0.00	\$4,968.00	\$0.00	\$396.50	\$0.00	\$0.00	\$7,964.30	4.99%
Charles Snyder	0.00	0.00	0.00	0.00	0.00	0.00	54.60	0.00		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10,647.00	\$0.00	\$10,647.00	6.67%
Heather Stevens	16.30	0.00	0.00	35.90	64.20	1.80	0.00	0.00		
	\$2,118.84	\$0.00	\$0.00	\$3,231.00	\$2,534.62	\$117.00	\$0.00	\$0.00	\$8,001.45	5.01%
Sum Totals	\$20,681.41	\$2,989.77	\$0.00	\$95,940.00	\$8,942.22	\$18,122.00	\$10,647.00	\$2,310.00	\$159,632.40	

This chart represents the percentage of the total dollars billed by clinician in January 2006.

### Total Dollars Paid for Services By County



TOTAL DOLLARS PAID BY FAIRFIELD COUNTY FOR SERVICES

