



GREEN LAKE COUNTY

571 County Road A, Green Lake, WI 54941

Original Post Date: 5/6/2026
Amended Post Date: 5/6/2026

The following documents are included in the packet for the Health & Human Services Committee Meeting on May 11th, 2026:

- 1) Agenda
- 2) *Minutes: 03/09/2026 and 4/13/2026
- 3) Unit Reports



GREEN LAKE COUNTY OFFICE OF THE COUNTY CLERK

Samantha Stobbe
County Clerk

Office: 920-294-4005
FAX: 920-294-4009

Health & Human Services Committee Meeting Notice

Date: Monday, May 11th, 2026 Time: 5:00 PM
The Green Lake County Government Center, County Board Room
571 County Road A, Green Lake WI

* Amended AGENDA

Committee Members

Joe Gonyo
Mike Skivington
Andy Brendemihl
Christine Schapfel
Mary Hess
Nancy Hoffmann
Sarah Allen
Vacant
Vacant

Samantha Stobbe,
Secretary

Virtual attendance at meetings is optional. If technical difficulties arise, there may be instances when remote access may be compromised. If there is a quorum attending in person, the meeting will proceed as scheduled.

This agenda gives notice of a meeting of the Health & Human Services Committee. It is possible that individual members of other governing bodies of Green Lake County government may attend this meeting for informative purposes. Members of the Green Lake County Board of Supervisors or its committees may be present for informative purposes but will not take any formal action. A majority or a negative quorum of the members of the Green Lake County Board of Supervisors and/or any of its committees may be present at this meeting. See State ex rel. Badke v. Vill. Bd. of Vill. of Greendale, 173 Wis.2d 553, 578, 494 N.W. 2d 408 (1993).

1. Call to Order
2. Certification of Open Meeting Law
3. Pledge of Allegiance
4. Election of Chair
5. Election of Vice Chair
6. Public Comment
7. *Minutes: 03/09/2026 and 04/13/2026
8. Appearances
 - Medicare Open Enrollment – Kristine Biesenthal
9. Director's Report
10. VSO Report
11. Unit Reports
12. Committee Discussion
 - Future Meeting Dates: June 8th, 2026
 - Future Agenda items for action & discussion
13. Adjourn

Microsoft Teams meeting

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Meeting ID: 234 001 844 313 86

Passcode: Z6Gh97gJ

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Phone conference ID: 864 249 010#

For organizers: [Meeting options](#) | [Reset dial-in PIN](#)

Please accept at your earliest convenience. Thank you!

[Org help](#) | [Privacy and security](#)

Kindly arrange to be present, if unable to do so, please notify our office.
Samantha Stobbe, County Clerk

Please note: Meeting area is accessible to the physically disabled. Anyone planning to attend who needs visual or audio assistance, should contact the County Clerk's Office, 294-4005, not later than 3 days before date of the meeting.

HEALTH & HUMAN SERVICES COMMITTEE MEETING

March 9, 2026

The meeting of the Health & Human Services Committee was called to order by Chair Joe Gonyo at 5:00 PM on Monday, March 9, 2026 in person and via remote access at the Government Center, 571 County Road A, Green Lake, WI. The requirements of the open meeting law were certified as being met. The pledge of allegiance was recited.

Present: Joe Gonyo
Mike Skivington
Christine Schapfel
Nancy Hoffman
Mary Hess

Absent: Brian Floeter

Other County Employees Present: Samantha Stobbe, County Clerk; Jason Jerome, HHS Director/County Manager; Kayla Yonke, HHS Financial Manager; Rachel Prellwitz, Health Officer (remote); Lisa Schiessl, Children & Family Unit Manager; Jon Vandeyacht, Veterans Service Office; Ryan Bamberg, Aging Unit Manager; Dawn Brantley, Fox River Industries Unit Manager

PUBLIC COMMENT – none

APPROVAL OF MINUTES – 01/12/2026 MINUTES

Motion/second (Schapfel/Skivington) to approve the minutes of the 01/12/2026 meeting as presented with a change of Schapfel's last name spelt correctly in the motions. Motion carried with no negative vote.

ANNUAL REPORTS

- Health and Human Services
- VSO

Each annual report was discussed individually. The available department heads gave an overview of their department's annual report.

Motion/second (Hoffman/Schapfel) to accept the Health and Human Services and VSO Annual report. Motion carried with no negative vote.

DIRECTOR'S REPORT

Jason Jerome, HHS Director/County Manager, did not have any updates for the committee. Discussion was held on open Health & Human Services positions.

VSO REPORT

VSO report was discussed in the Annual Reports.

UNIT REPORTS

None.

FUTURE AGENDA ITEMS FOR ACTION AND DISCUSSION

- Next meeting date – April 13, 2026 @ 5:00 PM
- Future agenda items for action and discussion -

ADJOURNMENT

Chair Gonyo adjourned the meeting at 5:58PM.

Submitted by,
Samantha Stobbe
Samantha Stobbe

HEALTH & HUMAN SERVICES COMMITTEE MEETING

April 13th, 2026

The meeting of the Health & Human Services Committee was called to order by Chair Joe Gonyo at 5:00 PM on Monday, April 13th, 2026 in person and via remote access at the Government Center, 571 County Road A, Green Lake, WI. The requirements of the open meeting law were certified as being met. The pledge of allegiance was recited.

Present: Joe Gonyo
Mike Skivington
Christine Schapfel
Nancy Hoffman
Mary Hess

Absent: Brian Floeter

Other County Employees Present: Karissa Rohde, Deputy County Clerk; Jason Jerome, HHS Director/County Manager; Kayla Yonke, HHS Financial Manager; Rachel Prellwitz, Health Officer; Lisa Schiessl, Children & Family Unit Manager; Jon Vandeyacht, Veterans Service Office; Dawn Brantley, Fox River Industries Unit Manager; Lauren Olson, HHS, Lisa Rollin, HHS

PUBLIC COMMENT - none

APPROVAL OF MINUTES – 03/09/2026 MINUTES

Could not approve minutes as there was no quorum. They will be approved at the next meeting.

APPEARANCES

- GLC United for Prevention Coalition – Lauren Olson and Lisa Rollin

Lauren and Lisa gave a presentation on united for prevention found in the packet. Discussion held.

DIRECTOR'S REPORT

The HHS department is still looking to fill the Community Support position. Jason will continue to schedule presenters for the HHS meetings. Lastly, Jason thanked the committee members for their service over the last two years, and he hopes to see them back.

VSO REPORT

Student Government Day is on April 21st. Jon Vandeyacht is still looking for speakers.

UNIT REPORTS

No discussion.

FUTURE AGENDA ITEMS FOR ACTION AND DISCUSSION

- Next meeting date – May 11th, 2026 @ 5:00 PM
- Future agenda items for action and discussion -

ADJOURNMENT

Chair Gonyo adjourned the meeting at 5:34pm.

Submitted by,

Karissa Rohde
Deputy County Clerk

Behavioral Health Unit— April 2026 (March Data)

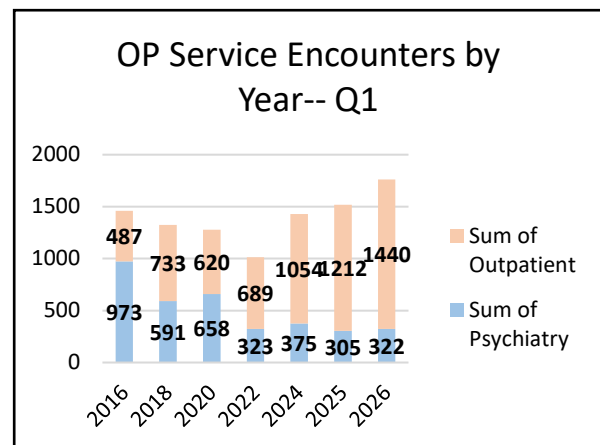
Currently, the Behavioral Health Unit receives the following grants:

- The **State Opioid Response (SOR-4)** funding is used to support unmet treatment needs for individuals with opioid and stimulant use disorders. We are in year 2 of three years of this funding. **To date funding has provided support with case management and recovery housing for 10 clients, uninsured inpatient costs for 2 clients, case management for 13 clients, and peer support for 2 clients.**
- We receive an allotment of state opioid settlement funding which is designated to be used for **room and board costs for Medicaid recipients receiving residential treatment for opioid use disorder.**
- We have received \$75,000 in **Rural Crisis Enhancement funding** through WI Dept of Health Services. This funding begins in March 2026 and the award lasts through 2/28/2027. This funding will support improved collaboration between crisis services and housing supports, criminal justice system involved clients, and local school systems. **Since this grant began in March, we have provided team-based crisis response in partnership with ADVOCAP to 6 individuals and families.**

Outpatient Mental Health (MH) & Substance Abuse (SUD) Programs-

Month at a Glance (March Data)

New Outpatient Therapy Intakes	23
New Psychiatry Admissions	1
IDP Assessments Completed	7



Over the past several years, although case volume has increased, we have been able to reduce the wait time for initial appointments. Structural changes in crisis have freed up therapists' time for direct therapy services. A robust internship program has also helped to ease caseloads. On the chart above, services were lower in 2022 due to a full time therapist role being unfilled for the majority of the calendar year. The internship program has also assisted with being able to more efficiently recruit and hire therapists. Over the past 6 months, clinicians net a caseload gain of 5 clients per month, meaning, that they are taking on new clients more quickly than clients are ready for discharge.

A robust internship program has also helped to ease caseloads. On the chart above, services were lower in 2022 due to a full time therapist role being unfilled for the majority of the calendar year. The internship program has also assisted with being able to more efficiently recruit and hire therapists. Over the past 6 months, clinicians net a caseload gain of 5 clients per month, meaning, that they are taking on new clients more quickly than clients are ready for discharge.

1. **Intoxicated Driver Program (IDP):** Our agency serves as an assessor facility for state-mandated IDP assessments. Individuals are either referred to traffic safety school or treatment. Individuals who receive a court order for an IDP are given 30 days to complete the assessment. **We currently have no waitlist for an IDP.**
2. **School-based offices:** BHU has school-based offices in 3 school districts in the county to increase youth access to therapy. Overall, these offices help to improve collaboration with school partners, decrease both missed therapy appointments and missed school, and reduce barriers to therapy for youth. **These**

OUTPATIENT PROGRAM GOALS:

- Increase use of the patient portal feature of EHR
- Increase availability of evidence-based therapy models for county residents
- Decrease wait time for intakes and first follow up visit to 14 days or less
- Reduce missed visit rate to 20% or less, and no-show rate to 6% or less

Wrap-around Program Goals

- Increase program capacity for serving substance use/ dual diagnosis clients
- Improve group skill development and social engagement opportunities within Community Support Program
- Meet admission timeline requirements for CLTS programming as caseload continues to grow

offices continue to operate at full capacity, with a waitlist for school-based services. Waitlisted students are offered services at the main office, but many are not able to utilize this due to the barriers listed above. We have had requests for additional school-based service hours from two school offices as well as increased mental health consultation for Head Start sites, and a request for an additional school-based office at Princeton School.

Wrap-Around Services- *BHU provides three tiers of wrap-around services, allowing us to match individuals with a program that meets the level of need based on their unique situation.*

1. Targeted Case Management (TCM)— *Less intensive case management for clients in Behavioral Health treatment or for vulnerable adults to offer follow up or prevent future contact with Adult Protective Services. **It presently serves 30 individuals.***

2. Comprehensive Community Services (CCS)— *Recovery-focused support for clients who may benefit from an intensive level of services for a shorter period of time. **This program presently serves 30 individuals.***

3. Community Support Program (CSP)- *Intensive community-based support for individuals with chronic mental illness. This support is intended to be long-term and supports clients to maintain psychiatric stability in the community and to reduce hospitalizations. **This program presently serves 25 adults.***

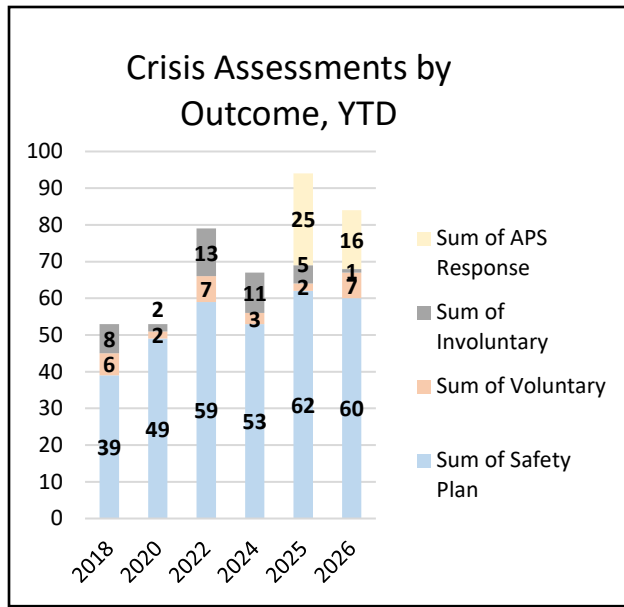
4. Children's Long Term Support Waiver (CLTS)— *Medicaid waiver program provides funding for families of children with long-term disabilities (developmental, physical, and/or severe emotional disturbance) to access services such as respite care and service coordination which are otherwise not covered by Medicaid insurance. When an eligible youth is screened for services, the waiver program must open their case within 30 days. **Our current program census is at 79 youth and continuing to grow.***

Crisis Services- *Crisis services are available 24/7 including weekends/ holidays for psychiatric and substance use disorder emergencies*

Crisis call volumes have increased over the past 5 years, a more dramatic increase this year, due to the addition of Adult Protective Services (APS) responsibilities. APS calls have now been added to monthly data that will be reported going forward. The data represent new crisis calls each month. The crisis team provides additional follow up to most contacts. This may include case management, supportive counseling, service linkage/ referral, discharge planning, court work (including civil commitment and/or guardianship), or APS investigation.

CRISIS PROGRAM GOALS:

- Follow up contact with every client
- Follow up within 48 hours for each client discharging from a county-facilitated psychiatric inpatient stay.
- Increase visibility of mobile response and crisis debriefing



Despite rising call volume, hospitalizations have remained relatively consistent over the past several years. *We have received notice that Winnebago County Mental Health Institute (WMHI) will be increasing their daily rate by an additional 10% for 2026. The work that our crisis team does ensures that WMHI is utilized only when no other less restrictive option is available. So far in 2026, Green Lake County's crisis team has not needed to place any clients at Winnebago Mental Health, however 2 Green Lake County residents were placed there by other counties. This means that a county resident experienced a crisis while they were physically located in another county. In this circumstance, the responsibility for their care after the first 72 hours is transferred back to the county of residence.*

Adult Protective Services: In the first year of handling APS calls, the Crisis Team responded to

118 calls. The most prevalent reported topics included self-neglect, caregiver burnout or inability to continue care, financial abuse, and scams.

Zero Suicide Initiative: Zero Suicide is a collaborative team approach to reducing fatalities due to suicide by focusing on the entire system, not just individuals who have already entered crisis services. Our team meets monthly, and sometimes jointly with teams in Waushara and Marquette counties. Accomplishments include annual awareness campaigns, QPR training, and implementation of caring contact cards sent to crisis service recipients. The team is reviewing processes for early identification, as we identify that almost all deaths by suicide and near-lethal attempts involved individuals who had no contact with crisis or DHHS prior to attempting suicide. *We hope many will join us in wearing green to show awareness and support for mental health recovery on May 12th.*

Housing Subcommittee: In Spring 2024, BHU initiated a community partnership engaging a variety of professionals as well as interested community members on the subject of homelessness and housing insecurity in Green Lake County. This began after a number of contacts to our crisis line that involved primary need being housing. The group now operates as a subcommittee of the Winnebagoland Housing Coalition with an immediate, short term focus to increase awareness and understanding of the unique issues around homelessness/ housing issues in rural communities. The group meets monthly. Accomplishments include awareness efforts such as a large town-hall style event and follow up community conversation.

I-Team: This team meets monthly with a focus on awareness and reduction of elder abuse as well as shared understanding of available community resources that might help prevent elder abuse. This year, the team has heard presentations on housing, Senior Helpers, scam prevention, Longterm Care Ombudsman, and more.

May 2026

Economic Support Unit Quarterly Report

	Number of Active Cases	Applications Processed	Renewals Processed	Six Month Report Form Processed	Number of calls received in the Call Center
January	2,354	145	170	42	15,427
February	2,329	127	51	39	13,183
March	2,290	88	45	40	13,412

2025 Budget Reconciliation – One Big Beautiful Bill Act and the shift of FoodShare/SNAP costs to Wisconsin

The impact to Wisconsin with the 2025 Budget Reconciliation – One Big Beautiful Bill Act will reduce the administrative costs to run FoodShare (SNAP). Currently, local agencies are not reimbursed 100% of administrative costs to run FoodShare/SNAP. Any costs over base contract allocations are currently reimbursed at 50%. The new reimbursement under the new bill will be reduced to 25% with Wisconsin and local counties picking up 75% of the cost to run FoodShare (SNAP), a Federally mandated program. (Effective: October 2026)

Also, included in the One Big Beautiful Bill is the shift on who is responsible for benefits paid to members on FoodShare (SNAP). Currently benefit costs are paid 100% federally. FoodShare (SNAP) benefits paid to members will shift to State responsibility based upon Quality Control error rates over 6%. This shift will cost Wisconsin taxpayers between \$68-\$200 million per year.

March 2026, Wisconsin passed Assembly Bill 180. This bill included \$32.3 million for FY26-27 for State and local administrative and benefit costs related to FoodShare (SNAP) decreases in Federal reimbursement. The bill also included \$16.1 million for State and local Quality Control positions.

East Central Income Maintenance Consortia are currently in discussion on how to utilize the funds given to satisfy the Quality Control positions required.

Child Support Unit Quarterly Report

The current caseload for Child Support is 811. Caseload is stable from last quarter.

As of March 2026, Green Lake County Child Support collected \$729,668.74 in current Child Support for the Federal Fiscal Year 2026. This is a 10% decrease than last year at this time.

Shelby Jensen
Green Lake County DHHS
Economic & Child Support Unit Manager

GREEN LAKE COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES

HEALTH & HUMAN SERVICES

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March 2026 Health Unit Monthly Report to the Health & Human Services Board

Public Health Update:

- Rachel attended the Wisconsin Owns Wellness (WOW) Regional Summit in DePere on March 4th. The WOW (Wisconsin Owns Wellbeing) Collaborative brings together safety net partners to spur and mature partnerships and create a more coordinated system of care, informed by and tailored to local perspectives. The goal is to be proactive about developing or deepening collaborative systems that leverage the unique assets of each partner, allowing the most vulnerable populations to continue getting their health and wellbeing needs met, rather than waiting by the sidelines and taking a back seat.



- Allison, Nancy and Lisa attended the We Heart You event held in Oshkosh. The 2026 We Heart You: Recovery in Our Community event focused on bridging the recovery community with the broader community to break the silence, reduce stigma, and save lives.



- Lauren attended the first meeting of the SYNC (Supporting Youth Nurturing Connection) Coalition on March 4th. This coalition was formed to support the work of CHAT (Community Health Action Team) in Youth Mental Health and social media which was brought forward in our most recent plunges. Princeton School District was chosen to be a pilot community to start the work of SYNC starting with student and parent surveys.
 - CHAT meeting held on March 9th to go over SYNC initiative and discuss data collection and next steps.
- Nancy attended the 2026 Wisconsin Stroke Coalition meeting on March 10th.
- Lauren attended the March Community of Practice meeting for Maternal Child Health (MCH) on March 10th. This Community of Practice meeting is a grant requirement. Our selected objective for MCH is Adolescent Mental Health.
- Health Unit Staff assisted the Sheriff's Office with their active shooter drill on March 12th. These types of exercises/drills are beneficial not only for Law Enforcement officers, but also for staff at the GLC Government Center.



- Allison attended the PHEP coordinators and FV-HERC meetings on March 17th.
- Allison, Rachel and Lauren attended the PHEP tabletop exercise held on March 18th. The full-scale exercise to be held in summer/fall of 2026. Health dept. will be planning a Family Reunification Center after a wildfire incident.



- 4 CPR classes, with a total of 28 participants, were held by Allison in the month of March:
- 2026 Community Day and Sports Camp planning meeting held on March 18th. Those helping to plan the event are GLC Health Dept, Terrace Shores Church and Fellowship of Christian Athletes (FCA). Event to be held on July 8th at Princeton School. In addition to the Sports Camp, we will again be hosting a community meal and offering free haircuts, vision screenings, sports physicals and oral health screenings.
- Health Department staff met with HR Coordinator Sophia on March 18th to continue discussing forming a Wellness Committee/Coalition and planning of health focused initiatives for all County employees. We will be sending out an employee survey to gauge interest in health-related activities and challenges.
- Lauren and Lisa met with Berlin school district SRO (School Resource Officer) to discuss youth substance use. They are working on scheduling with other schools.
- Allison provided puberty education to 5th grade girls at Clay Lamberton Elementary School in Berlin on March 20th.
- Lauren assisted with the Stigma Campaign on March 20th at the Berlin Public Library for video and print production of campaign. Planning to highlight personal stories of recovery from residents of Green Lake County.
- Opioid Task Force met on March 30th to discuss process for writing and issuing checks to approved grant recipients. We have received one application so far that will be reviewed in June.

- All Health Unit staff attended a Narrative Training on March 31st provided by Brie Lentz (Public Health Strategist) with the Office of Policy and Practice Alignment (OPPA) Division of Public Health. Narrative training in public health teaches professionals to translate complex research into actionable stories that drive policy, equity, and behavioral change. This training focused on crafting compelling narratives, leveraging lived experiences, and shifting harmful, dominant narratives to advance health in our rural community.



- DPP Update-provided by Nancy:
 - Two (year-long) classes currently in session. Enrolling for another (virtual), which hopefully can start before summer.
 - We will receive continued grant support of \$25,000 for the period of July 2026- June 2027.
 - Submitted our 7th dataset to CDC in March. We are required to do this every 6 months. We have again maintained Full Plus status (the highest recognition level), and have very good results:
 - Average weight lost per participant is 12.6 pounds
 - Retention rate is 90.6% (well above CDC's acceptable cutoff of 30%)
 - Additionally, Green Lake Co. DPP surpasses the national levels for the risk reduction goal work that is set by the CDC.

Risk Reduction Goals	GLC DPP	National
5% wt Loss	63%	48%
4% wt loss + 150 min/wk of physical activity	50%	39%
4% wt loss and 17 sessions attended	63	51%

- Continue to explore options to provide this program to a local employer.

Respectfully submitted,

Rachel Prellwitz, Health Officer

Aging / ADRC March

ADRC – local ADRC can help decide if someone is eligible for publicly funded long-term care.

In addition, the ADRC will provide:

Information about Wisconsin’s long-term care programs and help with local resources.

Information on living options, the kind of help you or your loved one needs, where to receive care, and how to pay for it.

One-on-one counseling to determine the best options based on personal needs, values, and preference

Total Served		125
Age		
	Under 60	15
	60 - 74	38
	75 - 84	25
	85+	24
	Date of Birth Missing	23

Service Type	# of Customers Receiving Service
Disenroll Couns-Leaving Program	1
Disenroll Couns-Transf/Re-enroll	4
Enrollment Counseling	6
Functional Screen	5
Medicaid Application Assistance	4
Options Counseling	13
Other ADR Spec	2
Short Term Service Coordination	9

Disability Benefit Specialist- Disability benefit specialists are available to help adults ages 18 to 59 who have a disability. Elder benefit specialists are on-hand to help adults over age 60 who have a disability.

Specialists can answer your questions related to benefits, such as:

- FoodShare
- Medicaid
- Medicare
- Private health insurance
- Social Security

- Total Served Consumers 60

Service Areas:

Income - SSA programs	48
Medicaid	7
Medicare	6
Nutrition	4
Other	2

Elder Benefit Specialist- Elder benefit specialists are on-hand to help adults over age 60 who have a disability. Specialists can answer your questions related to benefits, such as:

- FoodShare
- Medicaid
- Medicare
- Private health insurance
- Social Security

- Total Served Consumers 29

Healthcare	1
Income - SSA programs	1
Medicaid	17
Medicare	4
Utilities	1

Food Pantry –

- Total Households = 212
- Total People served = 435
- a. -Seniors = 165
- b. -Adults under 60 =174
- c. -Children = 96

Nutrition Program (2 sites Berlin and Markesan)– Senior dining centers (congregate) give older adults a place to enjoy a fresh, healthy meal with others. Centers offer a space for community, friendship, and a place to receive resources / education. Home-delivered meals are for older adults who must stay at home or have limited ability to leave the home. It may be hard to travel due to health or other reason.

- Home – Delivered Meals – 1,552 total for March – YTD AVG 1,515
- Congregate – 395 total for March – YTD AVG 380
- Carry Out – Discontinued in 2026

Caregiver Support Programs- 3 programs (National Family Caregiver Support Program, Alzheimer’s Family and Caregiver Support Program and Title IIIB). The purpose of the National Family Caregiver

Support Program (NFCSP) is to assist families and other informal caregivers in caring for loved ones at home for as long as possible. Research shows that caregivers experience high levels of emotional, physical, and financial stress which often leads to diminished health of the caregiver.

Alzheimer's Family and Caregiver Support program is available to individuals with a diagnosis of Alzheimer's disease or other dementia and their caregiver when the person with dementia

Title IIIB These funds are for legal services, access assistance and in-home services.

- National Family Caregiver Support Program – 2 New Referral
- Alzheimer's Family and Caregiver Support Program – 2 New Referral
- Title IIIB – 0 new referrals

Dementia Care Specialist – Provide free information and support to adults with dementia and caregivers. Help create places where people with Dementia can remain active and safe.

- No Update