

WALA ADVOCATE

WISCONSIN ASSISTED LIVING ASSOCIATION • SUMMER 2026 VOL. 31 • NO. 2



A SENIOR LIVING RESOURCE



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MISSION STATEMENT

The Wisconsin Assisted Living Association (WALA) is the largest trade association in Wisconsin representing the assisted living profession. Our mission is to support assisted living communities, staff, and residents through advocacy, education, and service.

WISCONSIN ASSISTED LIVING ASSOCIATION

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CHAIRPERSON'S CORNER

By Jill Kreider, WALA Board Chairperson

Dear WALA Members,

As President of the Wisconsin Assisted Living Association Board, I am continually inspired by the dedication, compassion, and unwavering resilience you demonstrate every day in our communities across the state. In the world of senior care, resilience isn't just a buzzword—it is the quiet strength that carries us through staffing challenges, regulatory complexities, economic pressures, and the deeply personal stories we witness within our walls. Whether navigating post-pandemic recovery, advocating for better reimbursement rates, or supporting families through transitions into memory care or assisted living, we rise because our residents and teams depend on us.

Wisconsin's healthcare heroes—our administrators, caregivers, nurses, and support team—embody this resilience daily. We adapt, innovate, and lean on one another, much like the "Azura family" culture so many of us cultivate. Recent initiatives, such as enhanced change-in-condition communication training and efforts toward age-friendly care models, remind us that progress comes from collaboration. Together, we transform challenges into opportunities to deliver higher-quality, more person-centered care. I encourage each of you to celebrate the small victories: a resident's joyful outing, a team member going above and beyond, or a family expressing gratitude for the dignity we provide. Your work matters.

As I write this, we are deep in the heart of another Wisconsin summer—one of our state's greatest gifts, yet one that always feels too brief. The warm days invite us outdoors to lakeshores, parks, and backyard gatherings. The vibrant greens of our forests, the golden sunsets over the water, and the simple pleasure of a Friday fish fry remind us why we call this home. Summers here are fleeting, much like the seasons of life we observe so intimately in our settings. Let's make a conscious effort this year to step away from the desk, close the laptop, and soak it in—whether it's a morning walk, an evening boat ride, or simply sitting on the porch with a cool drink. These moments recharge our spirits and fuel the empathy we bring back to our residents.

In our daily work, we are reminded constantly that time is fleeting. We see it in the laughter shared during a resident's 90th birthday celebration, the tender goodbyes in hospice care, and the quiet wisdom passed between generations. Families entrust us with their loved ones during some of life's most vulnerable chapters, and we walk alongside them, bearing witness to both joy and loss. This perspective sharpens our appreciation for what truly counts. It calls us to prioritize presence over perfection—to make time for family dinners, grandkid outings, or long conversations with aging parents. As leaders in senior living, we model the very balance we encourage for others: caring deeply for those we serve while safeguarding our own cherished relationships.

This summer, I urge you to embrace these truths. Plan that family reunion. Take the long way home to watch the fireflies. Say "I love you" more often. In the end, it's these connections that define a life well-lived, both for our residents and for ourselves.



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CEO CORNER

By Mike Pochowski, WALA
President & CEO

I hope everyone is having a great summer. For WALA, it continues to be a busy summer as we are preparing for the upcoming elections by meeting with elected officials to discuss all of the challenges you continue to face. This includes workforce issues, Family Care, and regulatory matters.

In addition, we are hosting legislative visits at our member communities all across the state. If you are interested in hosting a legislative visit with your elected representative(s), please let me know.

Also, we are continuing to promote our partnership with the American Senior Housing Association (ASHA) on WhereYouLiveMatters.org (WYLM) where we are investing \$300,000 to drive leads directly to providers. The goal of WYLM is to disrupt the \$400 million referral agency market. In Wisconsin, communities spend on average \$28,400 in referral agency fees.

Where You Live Matters is a strong alternative to paid referral agencies offering:

- Unbiased guidance to consumers
- Credible industry insights
- Direct consumer access to assisted living communities

Our marketing efforts include digital marketing through Google Paid Searches and Search Engine Optimization. We are also promoting Where You Live Matters through traditional media outlets such as paid radio ads on 620WTMJ and during Milwaukee Brewers home games. In addition, during television segments on The Morning Blend which airs on TMJ4.

You can find all of our marketing efforts for Where You Live Matters here: [Where You Live Matters Initiative - Wisconsin Assisted Living Association](https://WhereYouLiveMatters.org)

Participating WALA member communities on WYLM will receive:

- Listings on an unbiased platform to support consumer decision-making
- FREE leads to WALA members; NO COST per referral
- Direct delivery of leads to your community
- No contracts or required agreements
- A strong alternative to paid referral agencies

If you have not already signed up for Where You Live Matters, it only takes a few minutes and you can find more information at www.wheretheyoulivematters.org/manage-your-listing.

If you have any questions about getting your account setup you can contact admin@wheretheyoulivematters.org. You can also contact info@ewala.org.

Thank you for your continued support and membership in WALA, we greatly appreciate it.



CHAIRPERSON'S CORNER

continued

Finally, a friendly but important reminder: ensure your community is fully signed up and visible on the ****Where You Live Matters**** website (www.wherelivematters.org). Through our partnership with the American Seniors Housing Association, this free, unbiased platform connects families directly with high-quality assisted living options across Wisconsin—without the influence of paid referral agencies. It empowers consumers with transparent information and drives meaningful leads to our member communities. If you haven't yet claimed or updated your profile, visit the site today or

reach out to WALA staff for assistance. Greater visibility means more families discovering the exceptional care we provide.

Thank you for all you do to elevate assisted living in Wisconsin. Your resilience inspires me, your commitment strengthens our association, and your compassion changes lives. Here's to a restorative summer filled with sunshine, family, and renewed purpose. I look forward to seeing many of you at upcoming WALA events.



WALA Members Earn Prestigious Recognition

Several WALA members have recently been recognized for their outstanding leadership, professional achievements, and contributions to the senior living industry.

McKnight's, a national media brand covering senior housing, assisted living, memory care, and long-term care, has announced its 2026 Women of Distinction honorees. Recipients are recognized for their inspiring work, significant contributions to the industry, and positive impact on the people they serve.

Angie Graham, President and CEO of Our House Senior Living, was named a 2026 Hall of Honor honoree. Amy Fouts, Vice President of Operations at Capri Communities, was recognized as a 2026 Veteran VIP honoree.

Sara Kekula Named a 2026 Wisconsin Insurance Power Player

Sara Kekula, Director of Senior Living and Social Services Practice Partner at M3 Insurance, was named a 2026 Wisconsin Insurance Power Player.

Sara received this honor for her innovation, leadership, and dedication to advancing the insurance profession. Through her work, she helps organizations navigate risk while remaining focused on what matters most: caring for vulnerable populations.

Congratulations to Angie, Amy, and Sara on these well-deserved honors!



Is there someone or something in your community you would like to recognize for a job well done? [Contact WALA](mailto:info@ewala.org) to share your story, celebrate meaningful connections, and highlight the positive impact of assisted living.



THE LEGAL EDGE

The Legal Edge is a regular feature column authored by the Assisted Living and Long Term Care Group at the [Reinhart Boerner Van Deuren law firm](#) featuring Bob Lightfoot, RN. Bob Lightfoot can be reached at 608-229-2257 or rlightfoot@reinhartlaw.com.

AVAILABILITY OF RECORDS DURING SURVEY

As part of DHS's Survey Collaborative, and as discussed at last month's Assisted Living Forum, the issue of the surveyors' access to records arose. In some instances, DHS says surveyors are having an issue getting records needed for their survey activities, on a timely basis. There has always been a "2-hour rule" in place. That rule, while not in DHS 83, DHS 88, or DHS 89, has operated in effect that once records are requested by a surveyor at survey, a facility generally has two hours to get copies of those records to surveyors. In my practice, I've never seen real penalties assessed against facilities for non-compliance with this "rule", but I have seen the survey process protracted by untimely delivery of requested records, sometimes a week or two after being requested.

There are a few strategies you can deploy to make sure this issue doesn't adversely affect the survey at your facility. First and foremost, have a survey binder at the ready for a surveyor when they enter your facility. A survey binder could contain such records as evacuation and drill logs, maintenance logs, resident roster, furnace inspections, menus, activity calendars, employee roster, and any corrections from prior surveys. Second, if you have electronic medical records, work with your vendor to be able to provide "read-only" or "surveyor-access" permissions of resident records to help free staff time. Third, if you must, assign a staff to be available to the surveyor to print requested

records – be sure to print 2 copies of all requested records, one copy for the surveyor and one copy for you so you know what it is the surveyor took with them. Finally, issues like what to disclose out of an employee file and incident reports invariably arise as to "should I disclose them"? In those situations, a quick call to your legal counsel or consultant can be useful because one size does not always fit all when it comes to those thorny issues.

Hopefully by utilizing some of these strategies, your surveys will go more smoothly and cause less angst for everyone at the facility.

Reinhart
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COPPERSTONE EARNS DIAMOND ACCREDITATION THROUGH A COMMITMENT TO QUALITY

CopperStone Assisted Living & Memory Care in Neenah has earned WALA Diamond Accreditation, recognizing the community's dedication to continuous quality improvement, person-centered care, and positive resident outcomes.

Family-owned and operated since opening in 2021, CopperStone includes 41 assisted living apartments and a 20-unit secured memory care neighborhood. Three full-time licensed nurses help the community serve residents with a wide range of care needs, including individuals who require catheter, ostomy, or wound care support.

At the heart of CopperStone's approach is a close-knit culture that brings residents, families, staff, and leadership together around a shared commitment to quality.

Building a Strong Quality Improvement Program

CopperStone's accreditation journey began with the development of a comprehensive quality improvement program. The leadership team established a structured quality committee, adopted policies and procedures to guide improvement efforts, and created systems for identifying, prioritizing, and addressing areas of concern.

The community routinely reviews incident reports, medication management trends, service response times, satisfaction surveys, and other performance measures. This information helps the team identify patterns, understand the causes of recurring concerns, and develop practical solutions.

For CopperStone, quality improvement is closely connected to the resident experience.

"Our projects directly link to resident satisfaction and quality of life," the CopperStone team shared. "Any transition to a long-term care community can be extremely difficult, and we



strive to create the best possible home-like environment for our residents."

Turning Data Into Better Resident Outcomes

CopperStone's quality improvement efforts have produced measurable results.

One of the community's proudest projects focused on reducing resident hospitalizations. Through multiple interventions, ongoing monitoring, and continued problem-solving, CopperStone achieved a 50 percent reduction in resident hospitalizations from 2024 to 2025.

The team also used data to address an increase in resident falls during a specific evening timeframe. After reviewing fall trends, CopperStone added another caregiver during those hours. Falls decreased by 30 percent within the first month following the change.

Another initiative focused on urinary tract infections. Through detailed data collection, trend analysis, and intervention planning, the team developed a more proactive approach to supporting resident health.

These projects demonstrate how careful analysis and targeted changes can strengthen resident safety while protecting dignity and independence.

Residents and Families Help Guide Improvement

Residents and their loved ones play an important role in CopperStone's quality improvement efforts. Their feedback helps the team identify operational concerns, evaluate services, and determine where changes may be needed.

Residents also remain actively involved in care planning and decision-making. Individual preferences related to daily routines, dining, activities, and support services are

incorporated into care plans and reviewed regularly.

Feedback is collected through resident surveys, council meetings, and ongoing conversations with residents and families. This helps ensure that improvement efforts remain focused on the needs and goals of the people CopperStone serves.

A Team-Wide Accomplishment

Quality improvement at CopperStone is not limited to one department. Leaders encourage employees throughout the organization to identify challenges, participate in root-cause analysis, and help develop solutions.

When CopperStone received Diamond Accreditation, employees across all departments celebrated the achievement and took pride in the role they played.

The accreditation also provides additional reassurance to current and prospective residents and their families.

CopperStone pursued accreditation to demonstrate that the community holds itself to high standards and is committed to providing excellent care. Earning WALA's recognition offers

families added confidence when choosing a community for someone they love.

Looking Toward the Future

CopperStone is already preparing for its next chapter. The organization plans to open a new community in August 2026 and has set a goal of earning Diamond Accreditation for that location within its first year of operation.

For providers interested in quality improvement but unsure where to begin, the CopperStone team recommends starting with the information already available within the community.

"Develop a baseline of resident and staff satisfaction, identify recurring areas of dissatisfaction, and brainstorm several ideas that could improve their experience," the team advised.

By combining strong leadership, employee participation, resident and family feedback, and thoughtful use of data, CopperStone has created a culture in which quality improvement is part of everyday operations. Congratulations to the entire CopperStone team on earning WALA Diamond Accreditation and demonstrating what is possible when an organization works together to improve the lives of residents.

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BUILDING STRONGER HEALTHCARE PARTNERSHIPS IN SENIOR LIVING

Senior living communities have always been centered around relationships — relationships between residents, families, caregivers, and the broader team supporting each individual. As the senior living industry continues to evolve, one of the most important relationships to strengthen is the partnership between communities and healthcare providers.

The needs of today's older adults are becoming increasingly complex. Residents are living longer, managing more chronic conditions, and often require a coordinated approach to support their health and quality of life. This creates an opportunity for senior living organizations and healthcare partners to rethink how they collaborate.

The Shift Toward Proactive Care

Healthcare has traditionally been built around responding when a concern arises. While timely response remains critical, senior living communities are increasingly focused on proactive approaches that identify concerns earlier and support overall wellness.

Proactive care can include regular health assessments, prevention strategies, chronic condition management, medication oversight, and meaningful conversations about a resident's goals and preferences.

The most effective care often begins with noticing the small changes — a resident who is eating less, becoming less engaged, experiencing a change in mobility, or showing a difference in behavior. These observations provide valuable

information that can help care teams intervene sooner.

Senior living professionals play an essential role in this process because they know residents best. They understand their routines, personalities, and baseline behaviors. When healthcare teams value these insights and incorporate them into care decisions, residents benefit from a more complete picture of their health.

Communication Creates Continuity

One of the greatest opportunities for improvement in senior living healthcare is communication.

A resident's care team may include community staff, healthcare providers, specialists, pharmacies, therapy teams, and family members. Without clear communication, important details can be missed or delayed.

Technology can support these processes by making communication faster and more organized. However, the foundation remains the same: people working together with a shared commitment to the resident.

A communication process should not only support urgent needs but also create opportunities for ongoing collaboration and relationship building.

The Importance of Shared Goals

Every senior living community has its own culture, priorities,

and approach to resident care. Healthcare partnerships are strongest when both organizations understand and respect those differences.

When teams are aligned, care becomes less fragmented. Residents experience a smoother healthcare journey, families have greater confidence, and staff members have stronger support when navigating complex situations.

Preparing for the Future of Senior Care

The future of senior living will require continued collaboration across the healthcare continuum. As expectations around quality, transparency, and resident-centered care increase, partnerships will become even more important.

At its core, senior living is about people. Healthcare partnerships are most successful when they reflect that same purpose: supporting residents in living healthier, more fulfilling lives.

Author Bio:

Kandace Peterson is the Director of Business Development for Oak Medical. She serves as the link between senior living organizations and our clinical and provider teams, helping ensure strong communication and aligned, resident-focused care.

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WISCONSIN'S NEW WIS. STAT. § 50.06 AND PRACTICAL IMPACTS OF WISCONSIN'S PATIENT REPRESENTATIVE LEGISLATION

By [Sumeeta A. Krishnaney](#), Attorney, von Briesen & Roper, s.c. and [Avery J. Mayne](#), Attorney, von Briesen & Roper, s.c.

Effective June 1, 2026, 2025 Wisconsin Act 115 substantially revised Wis. Stat. § 50.06, which generally governs how hospital discharge to residential long-term care admissions can be accomplished for incapacitated individuals who lack a legal decisionmaker. The updated Wis. Stat. § 50.06 creates a new role, "patient's representative," who may authorize certain incapacitated hospital patients' admission directly to a nursing home or community-based residential facility (CBRF) without first filing guardianship and protective-placement petitions. Since its effective date, and as of the date of this article, nineteen patient representative matters have been filed with various Registers in Probate across Wisconsin¹.

The stated purpose of the updated Wis. Stat. § 50.06 is to combat discharge delays created by the previous requirement for a guardianship and protective placement case to have been filed for the individual, prior to discharge. In practicality, it shifts much of the risk and oversight of the patient representative downstream to the receiving facility. A lawful admission may occur more quickly, but the facility must decide whether the paperwork is sufficient, recognize the representative's limits, monitor changes in authority, and address funding for care issues that the new role does not necessarily solve.

When a Patient Representative Can be Appointed

For a patient representative to be appointed, three requirements must be met: first, the individual requiring discharge from the hospital setting to long-term care cannot have previously executed a valid health-care power of attorney, such that there is a health care agent willing and able to act on behalf of the individual, nor have a court-appointed guardian of the person acting on their behalf. Second, the individual cannot be diagnosed at the time of admission with a developmental disability or mental illness². Finally, the individual cannot verbally object or otherwise actively protest the discharge, and more specifically, admission to a residential long-term care facility.

If the above requirements are met, the individual's level of

capacity must then be reviewed and documented. Under the updated Wis. Stat. § 50.06, prior to the appointment of a patient representative and discharge from the hospital, the individual must be deemed incapacitated by two physicians (or one physician and one advanced practice clinician) who have personally examined the individual and completed Wisconsin Department of Health Services' ("DHS") Form F-03435 "Medical Certification of Capacity for Determining a Patient's Representative Authority to Act".³

Selection of Patient Representative

The updated Wis. Stat. § 50.06 establishes a priority of relation to the individual requiring discharge in order to locate and select the patient representative. The order is as follows: First, spouse or domestic partner; Second, adult child; Third, parent; Fourth, adult sibling; Fifth, grandparent; Sixth, adult grandchild; and then, Finally, close friend. Utilizing this list of relations, a patient representative can be selected when identified as the closest "next of kin" to the individual.

Once identified, the representative must sign DHS Form F-03436 Patient Representative's Declaration under oath. Among other things, the representative agrees to act with ordinary prudence, care, diligence, and good faith; make decisions about admission, care, and treatment; and authorize health-care-related expenditures.

Upon signing, the representative is charged with providing the declaration to the hospital, to the accepting facility and to county adult protective services agency, as well as to reasonably contactable family members and the register in probate for the patient's county of residence.

Once properly established, the representative may make health-care decisions to the same extent as a guardian of the person, apply for Medicaid for the individual, and authorize the use of the individual's resources for their health-care-related expenditures. The representative may also request the required functional screen and options counseling and

¹ According to an advanced CCAP search conducted by this author on July 19, 2026.

² "mental illness" as defined in s. 51.01(13)(a)

³ DHS' Form F-03435 "Medical Certification of Capacity for Determining a Patient's Representative Authority to Act" can be found here: <https://www.dhs.wisconsin.gov/forms/advdirectives/f03435.pdf>



enroll the individual in Wisconsin Medicaid's waiver benefit – Family Care.

The Representative's authority ends when either a guardian is appointed, the patient is discharged to a setting that is not a residential long-term care facility, a previously unidentified health-care power of attorney is found, or the patient is medically determined to have regained capacity.

Patient Representative's Limited Authority

The stated purpose and use of a patient representative are intended to be limited, and it is the limited nature of the patient representative's role that is the largest operational challenge of the new law. Specifically, the representative can authorize the use of the individual's resources for their health-care-related expenditures and sign a Medicaid application on the individual's behalf, but the representative is not legally authorized to access and utilize the individual's assets and income. Additionally, the representative is not authorized to have related records released to them in order to effectuate actual payment for care, to complete a spend-down, or to respond to the Medicaid Agency's verification requests. Facilities should therefore avoid treating a patient representative as the equivalent of a financial agent or guardian of estate.

Advice for Receiving Facilities

- Facilities should adopt intake and internal policies for individuals admitted by a patient representative including: (1) an admission checklist confirming the requirements of Wis. Stat. § 50.06 have been met and that copies of the Declaration and Medical certification are provided; (2) policies and protocols to be implemented by the administration in the event previously unknown family members, legal decision-makers, or objections arise; (3) policies and protocols to

ensure the availability of funding for care after Medicare coverage ceases.

- The availability and use of guardianship and protective placement actions remains available. Court involvement may still be required (in fact, we believe may become more prevalent at the facility level) when: the patient protests placement in residential long-term care; there is family conflict; actual access to the individual's assets and income is needed to protect the individual's estate and secure funding for care; and when there is a threat of an unsafe departure by the individual.
- While the updated Wis. Stat. § 50.06 may reduce delays in discharging the individual from the hospital setting to facilitate appropriate post-acute care, it does not eliminate family conflict, funding barriers, or the need for court action. We recommend that facilities which accept admissions by patient representatives complete a legal and operational review to accommodate and anticipate the changes to the overall administration of the facility and admission process that this new law will impact.

Sources

- [Wis. Stat. § 50.06, "Certain admissions to facilities".](#)
- [2025 Wisconsin Act 115.](#)
- [Wisconsin DHS Form F-03435, Medical Certification of Capacity for Determining a Patient's Representative Authority to Act.](#)
- [Wisconsin DHS Form F-03436, Patient's Representative Declaration.](#)

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WORKFORCE UPDATES

By Jennifer Hoffman, WALA, *Director, Workforce Development*



As summer begins to wind down, many assisted living providers are taking a closer look at their workforce needs- not only for today, but for the months and years ahead. While recruiting remains a priority, the conversations we're having with members increasingly focus on retention, leadership development, and building

sustainable talent pipelines. This month's newsletter explores how the workforce continues to evolve, what we're hearing from members across Wisconsin, and practical resources to help strengthen your organization's workforce for the future.

Listening to Our Members

Thank you to everyone who participated in WALA's first Workforce Pulse Survey.

Your feedback confirmed what many of us hear every day: workforce challenges haven't gone away- they've evolved.

Recruiting remains difficult, but many of you also shared concerns about finding dependable employees, managing schedule coverage, improving retention, and helping new hires develop the workplace skills needed to succeed.

The encouraging news is that many of these challenges can be improved by investing in long-term workforce strategies while continuing to strengthen onboarding, leadership, and workplace culture.

Over the coming months, we'll use your feedback to shape newsletter topics, webinars, and workforce resources designed to support your teams.

The Workforce Isn't Just Smaller-It's Different

If you've found yourself saying, "Hiring just isn't what it used to be," you're not alone.

Throughout Wisconsin, assisted living providers continue to report difficulty not only in finding applicants, but finding candidates who are dependable, motivated, and committed to building a career. In WALA's recent Workforce Pulse

Survey, members shared concerns ranging from schedule coverage and employee retention to finding applicants who are willing to learn and stay long enough to become valued team members.

It is easy to assume the problem is, "people don't want to work anymore." The environment of hiring today is much more complex.

The workforce itself has changed.

Wisconsin's labor market remains highly competitive. According to the Wisconsin Department of Workforce Development, that state's unemployment rate declined to 3.3% in June 2026-well below the national rate of 4.2%, yet Wisconsin's labor force participation rate remained strong at <https://dwd.wisconsin.gov/press/unemployment/2026/260716-june-state.pdf>

What does this mean for assisted living operators? There are fewer available job seekers and employers across multiple industries that are competing for the same talent pool that sometimes offer remote or hybrid opportunities. Now more than ever, attracting employees requires more than an open position. It requires telling a story about the organization's mission and or culture, career growth, creative benefits, and the meaningful impact employees can make every day.

So What Can Providers Do?

While there is no single answer to today's workforce challenges, there are several steps you can take as an organization to become a more competitive employer. Ask yourself:

- Do our job postings explain why someone would want to work here-not just what they will do?
- Is our on-boarding experience set up for employees to succeed?
- Are our managers/leaders equipped to coach, mentor, and engage employees?
- How are we engaging with students and job seekers to assisted living before they choose another industry?

Organizations that invest in their people, strengthen workplace culture, and build relationships with future employees will be better positioned to attract and retain talent in today's competitive labor market.





One of the best investments you can make is in developing your current leaders. Supervisors and managers play a critical role in employee engagement, retention, and workplace culture. WALA offers a variety of professional development opportunities, including WALA Management Essentials, designed to help leaders strengthen communication, coaching, and management skills. Learn more at <https://www.ewala.org/wala-management-essentials>.

In the coming months, WALA will continue sharing practical strategies, resources, and member success stories to help providers strengthen their workforce and prepare for the future.

Workforce in the news: Building Tomorrow's Workforce Starts Today

National conversations about workforce readiness are reinforcing what many assisted living providers already know—building a strong workforce begins long before a position is posted. Discover how emerging workforce initiatives align with WALA's efforts to strengthen career pathways, expand school partnerships, and prepare the next generation of assisted living professionals. <https://jobs.ewala.org/blog/hearing-recap-workforce-rewired-modern-apprenticeships-for-a-modern-economy/>

August–October: College & University Recruiting (via Handshake)

Register your organization on Handshake to recruit at career fairs and post jobs, internships, and part-time positions at colleges and universities across Wisconsin. Most campus recruiting events require employer registration through Handshake.

Create your free employer account:

https://app.joinhandshake.com/employer_registrations/new

Schools you can expect to see include:

- UW–Madison
- UW–Milwaukee
- UW–Eau Claire
- UW–Green Bay
- UW–Whitewater
- UW–Oshkosh
- UW–La Crosse
- UW–Stevens Point
- UW–Stout
- Marquette University
- Wisconsin Technical Colleges, including Madison College, MATC, Waukesha County Technical College, Gateway Technical College, Fox Valley Technical College, Northeast Wisconsin Technical College, Moraine Park Technical College, Chippewa Valley Technical College, Blackhawk Technical College, and others.

Recruit Beyond Nursing

Assisted living organizations can connect with students pursuing careers in business, healthcare administration, human resources, marketing, social work, recreation, culinary arts, finance, maintenance, information technology, communications, and healthcare—helping build a strong pipeline for both clinical and non-clinical positions.

MOMENTUM: AN M3 EMPLOYER BENEFITS TREND REPORT 2026

By [Brian Meyer](#), Senior Director of Analytics & Underwriting Partner



M3 has produced an annual employee benefits trend report for over 20 years — and each year, **the story gets more complex**. Last year, we reframed this report around a simple truth: the old playbook isn't enough anymore. This year, that truth has only deepened.

In 2026, employers aren't just watching costs rise, they're fighting back. The data shows it. The strategies show it. The results, while still challenging, show early signs that active, informed employers are beginning to bend the curve. But "beginning to bend" is not the same as "under control." **Health care costs remain at elevated levels of increase**, and the forces driving them — cancer, behavioral health, specialty drugs, musculoskeletal conditions, and chronic



disease — are not retreating. They are evolving. And so must your strategy.

In this year's Momentum Report, we'll show you exactly what's driving costs in 2026, what innovative employers are doing about it, and where the market is heading as we prepare for 2027 and beyond.

[Click here to read the full report.](#)

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TaylorMade Care LLC.....	Milwaukee
Compassionate Care Home LLC	Madison
Roofs of Hope LLC.....	Waunakee
Matthew Garcia AFH.....	Oconomowoc
KC Devoted AFH Corp	Milwaukee
Assured Living LLC.....	Milwaukee
Newleaf Services LLC.....	Whitewater
Marshall's Wellness & Care.....	Mequon
Precious family care LLC	Appleton
Backus Building Services LLC	Green Bay
Sky Investments 2023 LLC	Menomonie
Legacy Living	Union Grove
Affectionate Hands adult family home LLC.....	Milwaukee
Lighting Care.....	La Crosse
Harmony care house llc	Milwaukee
Michael's Blessings LLC	Green Bay
Haven Heritage Adult Family Home LLC	Kaukauna
Compassion Living AFH LLC	Menasha
My Life Inspiration Adult family home LLC	Elm Grove
Love Comfort Peace LLC	Milwaukee
Eunoia Care.....	Milwaukee
Jano Care LLC.....	Madison
GMS Divine House of Care.....	Milwaukee
Birtukan Chalke and Eshetu Zatu.....	Verona
Mercy Home Care LLC.....	Plover
Lakeville Care Homes LLC	Madison
Oce Adult Family Homes.....	Milwaukee
Connecting Hearts Adult Family Home LLC	Madison
OasisHomeCare	Milwaukee
Alahnu Health Services LLC	Milwaukee
Two Hearts One Love LLC	Madison
Waldoch Home LLC.....	Appleton

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Adore Adult Family Home	Milwaukee
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North Haven Care LLC.....	Neenah
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Reaching Hands Family Home.....	Milwaukee
Guided Path LLC.....	New Richmond
Mariah's Family Care Home, LLC.....	Milwaukee
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THE GAP BETWEEN DEMAND AND DOORS

By Connor Emmel, Business Development, Iconica

Wisconsin's senior living market is full and almost nothing is being built.

If you run an assisted living community in Wisconsin right now, you're probably living one half of a strange contradiction. Your building is full. Your competitors' buildings are full. Families are calling with a parent who needed a spot last month, and the honest answer is often a waitlist. By every measure that matters to an operator, demand has never been stronger.

That's the paradox of senior living in 2026: demand is at a historic peak, and new construction has all but stopped. Understanding why those two facts coexist and what the timeline underneath them looks like is one of the most useful pieces of strategic thinking an operator or owner can do this year. The gap between them isn't a problem to wait out; it's a window.

The demand side is no longer a forecast.

For a decade, industry talked about the "silver tsunami" the way you talk about weather that's still a few counties away. That framing is now retired. The oldest baby boomers turn 80 in 2026, the age at which senior living demand truly accelerates, and the cohort behind them is larger still. The demographic wave everyone has been anticipating has stopped being future tense.

Wisconsin sits squarely inside this trend, and in many markets, ahead of it. The state's 75-and-older population is expanding meaningfully through 2030, and the growth isn't confined to Milwaukee and Madison. Some of the sharpest increases show up in mid-size and rural markets that have seen little to no new development in years, places where the existing licensed bed count simply wasn't built for the population that's arriving. The pattern is consistent across the state: this isn't a shortage of demand; it's a shortage of modern product to meet it.

The supply side has quietly gone dark.

Here's the half of the contradiction that surprises people. With demand this strong, you'd expect a building boom. Instead, the development pipeline has thinned to levels not seen in years. Construction costs remain elevated, financing is available but selective, and labor, materials, and longer approval timelines all add friction. The result is that even developers who want to build are moving cautiously through predevelopment and holding at the funding decision.

None of this is a secret. What gets missed is what it does to timing.

The timeline reality: the part that matters.

Development cycles in senior living have stretched considerably in recent years, with industry estimates now putting the average construction timeline at close to two and a half years. Add predevelopment (site control, market study, entitlements, design, financing) and the full arc from "we should look into this" to "we're accepting residents" is comfortably three to four years.

A project that breaks ground in early 2026 doesn't open until 2028 at the earliest. A project still a conversation in a conference room today is a 2029 or 2030 delivery. The buildings that will serve the peak of the demand wave — leasing up into a market with almost no competing new supply — are being decided on right now by operators willing to start while everyone else waits for conditions to feel more comfortable.

They won't feel more comfortable in time. That's the trap. By the time financing loosens and construction feels "safe" again, the developers who moved early will already be topping out, and latecomers will be starting a multi-year clock into a market

others reached first. In real estate, the reward has always gone to the group that underwrites carefully and moves before the crowd.

What this means for a Wisconsin operator.

None of this is an argument to overbuild, and it's not a case for putting a shovel in the ground on optimism. The lesson of the last cycle was that strong demographics alone don't make a project work. A well-located community in a weak market, or a great market with the wrong product or price point, will still struggle. Precision beats scale here. The operators who win match the right product to the right market at the right price and start early enough to hit the window.

So, the productive move for 2026 isn't "build something." It's "do the math now" in three specific ways.

1. Know your own market cold. What does the 75-plus growth curve look like in your catchment through 2030? What's the real demand gap once you account for existing beds, including supply in adjacent ZIP codes a surface-level look would miss? This is analysis you can do this year, before committing a dollar to development.

2. Weigh repositioning alongside new construction. A meaningful share of the industry operates out of aging buildings

that no longer match what today's residents expect. If your market has demand but your building is dated, a renovation or expansion may capture that demand faster and cheaper than a ground-up project.

3. Take the middle market seriously. Middle-income seniors are an increasingly large share of the market, and it's the segment least served by the luxury product that dominated the last building wave. Tools like tax increment financing and public-private structuring can help value-oriented products pencil out, but those deals take time to assemble, which again points back to starting early.

The through-line is simple. The demand is here and prepaid by demography. The supply isn't coming fast, and the timeline to add it is long. That's not a reason to wait for a clearer signal. The signal is the gap itself.

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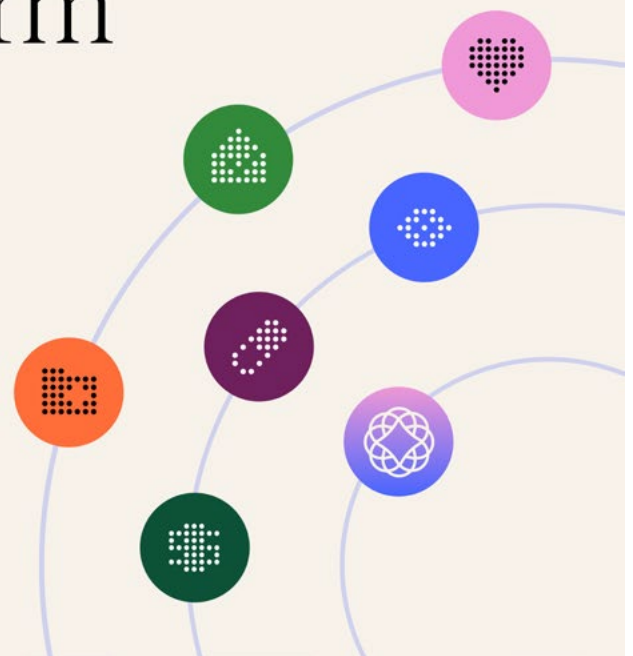
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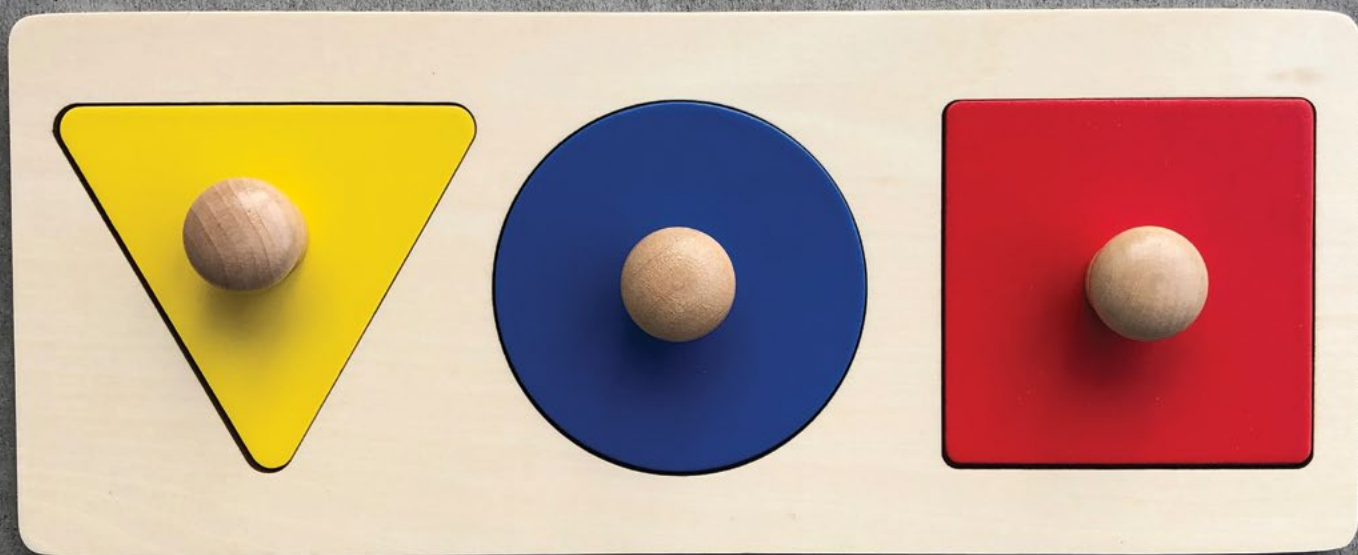
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