

Community • Independence • Empowerment

Jeffrey W. Patton

Chief Executive Officer

www.iskzoo.org

Administrative Services

610 South Burdick Street Kalamazoo, MI 49007 **Phone: (269) 553-8000**

Access Center

615 East Crosstown Parkway Kalamazoo, MI 49001 **Phone: (269) 373-6000**

(888) 373-6200

Michigan Relay Center: 711

Integrated Health &

Psychiatric Services 615 East Crosstown Parkway

Kalamazoo, MI 49001

Phone (Adulte): (269) 553-7

Phone (Adults): (269) 553-7037 Phone (Youth): (269) 553-7078

Office of Recipient Rights

610 South Burdick Street Kalamazoo, MI 49007 **Phone: (269) 364-6920**

Outpatient Services

2030 Portage Street Kalamazoo, MI 49001 **Phone: (269) 553-7132**

Services for Adults with Mental Illness

2030 Portage Street Kalamazoo, MI 49001 **Phone: (269) 553-8000** (888) 373-6200

Services for Adults with

Developmental Disabilities

418 West Kalamazoo Ave. Kalamazoo, MI 49007 Phone: (269) 553-8060 Michigan Relay Center: 711

Services for Youth

and Families 418 West Kalamazoo Ave.

Kalamazoo, MI 49007 Phone: (269) 553-7120 Substance Use Disorder Services

Phone: (800) 781-0353

Training

418 West Kalamazoo Ave. Kalamazoo, MI 49007 **Phone: (269) 364-6952**

AGENDA

INTEGRATED Services of Kalamazoo BOARD OF DIRECTORS HAS SCHEDULED ITS MEETING FOR MONDAY, <u>August 22, 2022, BEGINNING</u> @ <u>4:00PM</u> via Microsoft TEAMS or in person.

- I. CALL TO ORDER CITY & COUNTY DECLARATION
- II. AGENDA
- III. CITIZEN TIME

IV. RECIPIENT RIGHTS

- a. Recipient Rights Monthly Reports
- b. Recipient Rights SEMI-ANNUAL Report

V. PROGRAM SERVICES REPORT/VERBAL

a. Program Services Report (Youth and Families)
Pat Weighman, ISK, Senior Executive, Youth and Family Services

VI. CONSENT CALENDAR/VERBAL MOTION

- a. Minutes
- b. Budgeting (Policy)
- c. Finance (Policy)
- d. Asset Protection (Policy & Report)

VII. FINANCIAL REPORTS

- a. Financial Condition Report
- b. Utilization Report
- c. July Disbursements/MOTION

VIII. CHIEF EXECUTIVE OFFICER REPORT/VERBAL

a. CEO Report

IX. CITIZEN TIME

X. BOARD MEMBER TIME

a. SWMBH Updates/Erik Krogh

XI. ADJOURNMENT

IV.a.

Office of Recipient Rights
Report to the Mental Health Board
On Complaints/Allegations
Closed in: June 2022

Office of Recipient Rights Report to the Mental Health Board Complaints/Allegations Closed in June 2022

	June 2022	FY 21-22	June 2021	FY 20-21
Total # of Complaints Closed	42	322	31	291
Total # of Allegations Closed	68	531	53	490
Total # of Allegations Substantiated	18	164	25	153

The data below represents the total number of closed allegations and substantiations for the following categories:

Consumer Safety, Dignity/Respect of Consumer, Treatment Issues, and Abuse/Neglect.

ALLEGATIONS	June 2022		June 2021	
Category	TOTAL	SUBSTANTIATED	TOTAL	SUBSTANTIATED
Consumer Safety	10	1	1	0
Dignity/Respect of Consumer	11	2	6	3
Treatment Issues/Suitable Services	13	4	6	3
(Including Person Centered Planning)				
				9
Abuse I	0	0	0	0
Abuse II	4	0	6	2
Abuse III	4	0	4	2
Neglect I	0	0	0	0
Neglect II	1	1	4	4
Neglect III	8	8	5	4
	51	16	32	18

APPEALS	June 2022	FY 21-22	June 2021	FY 20-21
Uphold Investigative Findings & Plan of Action	0	2	1 7	
Return Investigation to ORR;	0	0	0 0	
Reopen or Reinvestigate				
Uphold Investigative Findings but Recommend	0	0	0 0	
Respondent Take Additional or Different Action				
to Remedy the Violation				
Request an External Investigation	0	0	0 0	
by the State ORR				

ABUSE AND NEGLECT DEFINITIONS - SUMMARIZED

Abuse Class I means serious injury to the recipient by staff. Also, sexual contact between a staff and a recipient.

Abuse Class II means non-serious injury or exploitation to the recipient by staff and includes using unreasonable force, even if no injury results.

Abuse Class III means communication by staff to a recipient that is threatening or degrading. (such as; putting down, making fun of, insulting)

<u>Neglect Class I</u> means a <u>serious injury</u> occurred because a staff person DID NOT do something he or she should have done (an omission). It also includes failure to report apparent or suspected abuse I or neglect I of a recipient.

Neglect Class II means a non-serious injury occurred to a recipient because a staff person DID NOT do something he or she should have done (an omission). It also includes failure to report apparent or suspected abuse II or neglect II of a recipient

Neglect Class III means a recipient was put at <u>risk of physical harm or sexual abuse</u> because a staff person DID NOT do something he or she should have done per rule or guideline. It also includes failure to report apparent or suspected abuse III or neglect III of a recipient.

ORR ADDENDUM TO MH BOARD REPORT July 2022

Re: June 2022 Abuse/Neglect Violations

June 1

Abuse Violations

There were no substantiated Abuse violations in June 2022.

Neglect Violations

- There was one substantiated Neglect II violation in June 2022.
 - o The remedial actions for these violations were Written Reprimand (1), Training (1).
- There were eight substantiated Neglect III violations in June 2022.
 - O The remedial actions for these violations were Written Reprimand (9), Training (4), and Employment Termination (5). Three were Failures to Report.

5 of the 8 violations occurred at the same agency and 3 different program sites. 2 of the program sites had 2 violations each. Each of those 2 program sites had a Failure to Report.

IV.a.

Office of Recipient Rights
Report to the Mental Health Board
On Complaints/Allegations
Closed in: July 2022

Office of Recipient Rights Report to the Mental Health Board Complaints/Allegations Closed in July 2022

	July 2022	FY 21-22	July 2021	FY 20-21
Total # of Complaints Closed	38	360	22	302
Total # of Allegations Closed	65	596	43	524
Total # of Allegations Substantiated	18	182	16	167

The data below represents the total number of closed allegations and substantiations for the following categories: Consumer Safety, Dignity/Respect of Consumer, Treatment Issues, and Abuse/Neglect.

ALLEGATIONS	July 2022		July 2021	
Category	TOTAL	SUBSTANTIATED	TOTAL	SUBSTANTIATED
Consumer Safety	5	0	1	0
Dignity/Respect of Consumer	12	3	4	1
Treatment Issues/Suitable Services (Including Person Centered Planning)	15	4	5	2
	()		()	
Abuse I	0	0	0	0
Abuse II	3	0	6	2
Abuse III	5	2	6	0
	()		()	
Neglect I	0	0	0	0
Neglect II	1	0	1	1
Neglect III	6	5	8	6
	47	14	41	12

APPEALS	July 2022	FY 21-22	July 2021	FY 20-21
Uphold Investigative Findings & Plan of Action	0	2	0	7
Return Investigation to ORR;	0	0	0	0
Reopen or Reinvestigate				
Uphold Investigative Findings but Recommend	0	0	0	0
Respondent Take Additional or Different Action				
to Remedy the Violation				
Request an External Investigation	0	0	0	0
by the State ORR				

ABUSE AND NEGLECT DEFINITIONS - SUMMARIZED

Abuse Class I means serious injury to the recipient by staff. Also, sexual contact between a staff and a recipient.

Abuse Class II means non-serious injury or exploitation to the recipient by staff and includes using unreasonable force, even if no injury results.

Abuse Class III means communication by staff to a recipient that is threatening or degrading. (such as; putting down, making fun of, insulting)

<u>Neglect Class I</u> means a <u>serious injury</u> occurred because a staff person DID NOT do something he or she should have done (an omission). It also includes failure to report apparent or suspected abuse I or neglect I of a recipient.

Neglect Class II means a non-serious injury occurred to a recipient because a staff person DID NOT do something he or she should have done (an omission). It also includes failure to report apparent or suspected abuse II or neglect II of a recipient

<u>Neglect Class III</u> means a recipient was put at <u>risk of physical harm or sexual abuse</u> because a staff person DID NOT do something he or she should have done per rule or guideline. It also includes failure to report apparent or suspected abuse III or neglect III of a recipient.

ORR ADDENDUM TO MH BOARD REPORT August 2022

Re: July 2022 Abuse/Neglect Violations

July

Abuse Violations

- There were two substantiated Abuse III violations in July 2022.
 - The remedial actions for these violations are Training (1), Written Reprimand (2).

The 2 violations occurred at different agencies.

Neglect Violations

- There were five substantiated Neglect III violations in July 2022.
 - The remedial actions for these violations are Training (6), Verbal Counseling (1), Staff Transfer (1), Written Reprimand (3), Demotion (1), Suspension (3), Employment Termination (1), and Other* (1).

Two of the five violations occurred at the same agency and same program site.

^{*}Case management agency is contacting AFC agency to receive access to electronic medical records for all case managers.

Office of Recipient Rights Report to the Mental Health Board On Semi-Annual Report

			Rights Office FTEs	Hours/40
		3/31/2022	d CMH	IS LPH
Integrated Services of Kalamazoo	Roann Bonney	g 	# of Consumers Served (unduplicated count) CMH	Number of Admissions
Integrated Se		10/1/2021	5247	
Complaint Data for:	Rights Office Director:	Reporting Period:	СМН	Н

section I: Complaint Data Summary

Part A: Agency Totals

Allegations	348	DO NOT TYPE HERE - IT WILL AUTO PILL
Interventions	104	DO NOT TIPE HERE - IT WILL AUTO FILL
Investigations	244	DO NOT TYPE HERE - IT WILL AUTO FILL
Interventions Substantiated	9	DO NOT TYPE HERE - IT WILL AUTO FILL
Investigations Substantiated	103	DO NOT TYPE HERE - IT WILL AUTO FILL

COMPLAINT SOURCE

Recipient	122	
Staff	10	
ORR	61	
Guardian/Family	20	
Anonymous	1	
Community/General Public	6	
Total Complaints Received	223	DO NOT TYPE HERE - IT WILL AUTO FILL

TIMEFRAMES OF COMPLETED INVESTIGATIONS

Category	Total	< 30	095	290	>90
Abuse I, II, III & Neglect I, II, III	103	g.	42	55	o
All others	144	80	35	76	0

Part B: Detailed Summary

1. Freedom from Abuse

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Reciplent Population	QQ	٥	m	m	٥	0	٥	œ	
8 S	Z	0	п	0	0	0	2	14	1
Investigations Substantiated		0	2	33	0	0	2	12	0
Investigations		0	5	4	0	0	4	34	1
Received		0	S	ধ	0	0	ধ	34	1
Category		Abuse class I	Abuse class II - nonaccidential act	Abuse class II - unreasonable force	Abuse class II - emotional harm	Abuse class II - treating as incompetent	Abuse class II - exploitation	Abuse - class III	Abuse class I - sexual abuse
Code		7221	72221	72222	72223	72224	72225	7223	7224

Code	Category	Received	Investigations	Investigations Substantiated	æ &	Recipient Population	+ €
NAME OF TAXABLE PARTY.					M	8	SED
72251	Neglect class i	2	2	2	2	0	0
72252	Neglect class I - failure to report	0	0	0	0	.0	0
72261	Neglect class II	æ	3	2	2	0	0
72262	Neglect class II - failure to report	e	m	3	1	-2	0
72271	Neglect class III	41	41	33	11	10	a
27777	Neglect class III - failure to report	-	7	7	4	н	0

3. Rights Protection System

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	R &	Recipient Population	, e
				1000年の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の	The state of the s		IM	QQ	SED
7060	Notice/explanation of rights	0	0	0	0	0	0	0	0
7630	Failure to report	4	0	0	ব	4	Ţ	m	0
75.45	Dotalistion (harasement	7			ţ.	2	3	a	0
7750	Acres to rights system	÷ ci	1	0	a	0	1	0	0
7780	Complaint investigation process	4	H	+	0	0	1	٥	0
7840	Appeal process/mediation	0	0	0	0	0	0	۵	0

4. Admission/Discharge/Second Opinion

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	æ 5	Recipient Population	# E
						A STATE OF THE PARTY OF THE PAR	M	DD	SED
4090	Second opinion - denial of hospitalization	0	Q	0	0	0	O	a	0
4190	Termination of voluntary hospitalization (adult)	0	0	0	0	0	0	0	0
4510	admission process	ō	0	0	0	0	٥	0	0
4630	Independent clinical examination	0	0	0	0	0	٥	0	0
4980	Objection to hospitalization (minor)	0	0.	0	0	0	0	0	0
7050	Second opinion - denial of services	0	0	0	0	0	0	0	0

5. Civil Rights

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	% &	Recipient Populatior	
							M	OO	SED
7041	Civil rights: discrimination, accessibility, accommodation, etc	0	0	0.	0	0	0	0	0
7044	Religious practice	0	0	0	0	O	0	0	٥
7045	Voting	0	0	0	0	a	0	o	0
7047	Presumption of competency	0	0	0	0	0	0	o	
7784	Search/seizure	r-1	1	0	0	0	н	0	이

6. Family Rights

Family dignity & respect 6 0 6 2 3 1 Receipt of general education information 0 <th>Code</th> <th>Categony</th> <th>Received</th> <th>Interventions</th> <th>Interventions Substantiated</th> <th>Investigations</th> <th>Investigations Substantiated</th> <th>P. P.</th> <th>Recipient Population</th> <th>٦ L</th>	Code	Categony	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	P. P.	Recipient Population	٦ L
Family dignity & respect								IM	DD	SED
Receipt of general education 0 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7111	Family dignity & respect	٩	0	0	9	2	m	1	2
+	7112	Receipt of general education information	0	0	0	Q	.0	O	0	0
	7113	Opportunity to provide information	0	0	0	0	0	0	٥	0

7. Communication & Visits

Received	Interventions	Interventions	Investigations	Investigations	× 6	Recipient
		Substantiated		natelliteranc	P. I.	2000
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8. Confidentiality/Privileged Communications/Disclosure

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	п.	Recipient Population	H 등
							IM	QQ	SED
7481	Disclosure of confidential information	æ	2	1	4	1	o	a	0
7485	Withholding of information (includes recipient access to records)	· 0	0	0	Q	o	ο,	۵	0
7486	Correction of record	0	0	a	0	0	0	0	0
7487	Access by p & a to records	0	٥	0	0	0	0	٥	0
7501	Privileged communication	0	0	0	0	0	0	0	0

9. Treatment Environment

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	R 7	Recipient Population	t E
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7081	Safe environment	14	2	0	đ	2	12	4	0
7082	Sanitary/humane environment	17	9	0	11	ဗ	21	m	0
7085	Least restrictive setting	1	1	0,	0	0	Н	٥	0

10. Freedom of Movement

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	. ξ.	Recipient Population	
							M	DD	SED
7441	Restrictions/limitations	2	L1	0	6	1	H	1	0
7400	Restraint	0	0	a	O	0	0	0	0
7420	Seclusion	t-4	0	0	Ţ	0	1	0	0

11. Financial Rights

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	% S	Recipient Population	L E
A CARL CARL CARL CARL CARL CARL CARL CAR							MI	DO	SED
7301	Safeguarding money	1	1	0	٥	0	1	0	0
7307	Facility account	a	0	0	0	D	O	0	0
7303	Easy access to money in account	Т	Н	0	0	0	0	0	0
7302	Ability to spend or use as desired	d	0	0	0	0	0	0	0
7305	Delivery of money upon release	0	0	0	0	0	0	0	0
7260	Labor & Compensation	0	0	0	0	0	0	0	0

12. Personal Property

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	% Q	Recipient Population	, c
						The state of the s	MI	QQ	SED
7267	Access to entertainment materials, information, news	e-t	1	0	0	0	1-1	a	۵
7281	Possession and use	ıs	3	0	2	1	m	2	٥
7787	Storage space	0	0	0	0	O	0	a	0
7783	Inspection at reasonable times	0	a	0	0	0	0	٥	0
7785	Exclusions	0	0	0	Q	0	0	٥	0
7286	Limitations	o	0	0	0	0	0	٥	0
7287	Receipts to recipient and to designated individual	0	0	0	0	.0	0	0	.0
7288	Waiver	0	0	0	٥	0	0	0	이
7289	Protection	٥	0	0	0	0	0	0	0

13. Suitable Services

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	~ S	Recipient Population	c
							MI	DD	SED
1708	Dignity and Respect	62	20	2	42	15	38	13	ω
7003	Informed consent	0	0	O	0	0	0	0	0
7079	Information on family planning	0	0	a	0	a	0	0	0
7049	Treatment by spiritual means	0	0	a	0	0	0	0	٥
	Mental health services suited to	20	33	c	0	č	G	2	OC)
7080	condition	±00	35	4 :	1	1	3	1	

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0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0
Physical and mental exams	Choice of physician/mental health professional	Notice of clinical status/progress	Services of mental health professional	Surgery	Electro convulsive therapy (ect)	Psychotropic drugs	Notice of medication side effects
7100	7130	7140	7150	7160	7170	7180	7150

14. Treatment Planning

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations	æ ₽	Recipient Population	ع ند
							M	DD	SED
7171	Person-centered process	vd	0	0	H	1	0	٥	H
5617	Timely development	n	0	0	2	2	2	٥	0
7173	Requests for review	0	0	0	0	0	0	G.	0
7124	Participation by Individual(s) of choice	0	0	0	0	0	0	0	0
7175	Assessment of needs	o	a	0	0	0	0	0	0

15. Photographs, Fingerprints, Audiotapes, One-way Glass

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	ж S	Recipient Population	ם ע
A STATE OF THE PARTY OF THE PAR							M	QQ	SED
7241	Prior consent	0	0	0	0	.0	0	0	0
7242	Identification	O	0	0	0	0	0	0	0
7743	Objection	0	0	0	0	0	0	0	0
7244	Release to others/return	0	0	0	0	0	0	0	0
7245	Storage/destruction	O	0	0	0	0	0	0	0

202 89 17

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TOTALS

17. No Right Involved

Code	Category	Received
-	No right involved	on

18. Outside Provider Jurisdiction

de	Category	Received
1000	Outside provider jurisdiction	18

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Section

Category (from Complaint Data)	Specific Provider Type (select from drop-down)	Specific Remedial Action (select from drop-down)	Specific Remedial Action (select from drop-down)	Specific Remedial Action (select from drop-down)	Specific Remedial Action (select from drop-down)	9	SED SED-W	- CWS	HS//
Abuse class II - exploitation	Residental MI & DD	Employment Termination				: :			
Abuse class II - exploitation	ds	Employment Termination				-	-	_	
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Apusa Class II - noneceperual	Residental MI & DD	Employment Termination	Varbel Counseling	Witten Reprinand			- 5	-	27714
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Abuse - Class III	Rescertist DD	Trairing	Vartal Counseing	Willen Reprinand		-		_	7
Abuse - Class III	Respectful DD	Employment Termhadon	Staff Transfer	Tahrs	Witten Reprimend		_		
Abuse - Chas III	Rescental MI	Trairing	Witter, Reprimend			1	-		_
Abuse - Class III	Residential MI & DD	Trairing	Withen Readmand			+			
Abuse - Class III	Residential MI & DD	Training	Witten Reprimend			+	1		
Abuse - Obes III	Criss Center	Training	Witten Reprimend	-			1		
Abuse - Obes III	Residential MI & CD	Willen Reprinand				٠			÷
Abuse - Obes III	Peddental M & CD	Training	Withen Readmand				_	_	
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exal - azade,	Residentia M & DO	Training	Witten Reprimand.			•	-		
III essi - seuch	Residentia M. & DD	Employment Termination				7		_	
Abuse - Class III	Residentis M & DD	Tahing	Virgin Reprimend				-	4	
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Neglect - Class III	Residental CO	Training	Witten Reprinanc			٠		_	-
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Verbal Courseling	22
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Witten Reprimend	83
Suspension	c
Demotion	-
Staff Transfer	4
Training	77
Employment Termination	33
Employee left the agency, but substantiated	w
Contract Astion	69
Policy Revision/Davidepment	,-
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Plan of Service Revision	Q
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Category (from Complaint Data)	Specific Provider Type [select from drop-down]	Specific Remedial Action (select from drop-down)	Specific Remedial Action (select from drap-down)	Specific Remedial Action	Specific Remedial Action (select from drop-down)	NE DD SED	(1) ≥	DD- HSW
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REMEDIATION TOTALS	ALS
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Pertial Hospitalization	6
SIP	45
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Olubrouse Drop-in Certar	0
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Other	

REMEDIATION TOTALS

Section II: Substantiation data:

Category (from Complaint Data)	Specific Provider Type (select from drop-down)	Specific Remedial Action (select from drop-down)	Specific Remedial Action (select from drap-down)	Specific Remedial Action [select from drop-down]	Specific Remedial Action (select from drop-down)	98 00	9 %	MSM
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REMEDIATION TOTALS

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Section II: Substantiation data:



Community • Independence • Empowerment

Jeffrey W. Patton Chief Executive Officer

www.iskzoo.org

Administrative Services

610 South Burdick Street Kalamazoo, MI 49007 **Phone: (269) 553-8000**

Access Center

615 East Crosstown Parkway Kalamazoo, MI 49001 Phone: (269) 373-6000 (888) 373-6200 Michigan Relay Center: 711

Integrated Health & Psychiatric Services

615 East Crosstown Parkway Kalamazoo, MI 49001

Phone (Adults): (269) 553-7037 Phone (Youth): (269) 553-7078

Office of Recipient Rights

610 South Burdick Street Kalamazoo, MI 49007 **Phone: (269) 364-6920**

Outpatient Services

2030 Portage Street Kalamazoo, MI 49001 **Phone: (269) 553-7132**

Services for Adults with Mental Illness

2030 Portage Street Kalamazoo, MI 49001 **Phone: (269) 553-8000** (888) **373-6200**

Services for Adults with Developmental Disabilities

418 West Kalamazoo Ave. Kalamazoo, MI 49007 Phone: (269) 553-8060 Michigan Relay Center: 711

Services for Youth and Families

418 West Kalamazoo Ave. Kalamazoo, MI 49007 **Phone: (269) 553-7120**

Substance Use Disorder Services Phone: (800) 781-0353

Training

418 West Kalamazoo Ave. Kalamazoo, MI 49007 **Phone: (269) 364-6952**

ISK Board Program Report

August 2022 Youth and Family Department Program Highlight: SAMHSA System of Care Grant

Background:

Integrated of Kalamazoo has received a 3rd 4-year System of Care grant from the Substance Abuse and Mental Health Services Administration (SAMHSA). Grants have been awarded at \$1,000,000 per year and the first two awards stretched into 5 years each. We are in the 2nd year of the 3rd grant. The purpose of the system of care grants are "to establish a spectrum of effective, community-based, family/youth driven services and supports for children and youth with or at risk for mental health or other challenges and their families, that is organized into a coordinated network, builds meaningful partnerships with families and youth, and addresses their cultural and linguistic needs, in order to help them to function better at home, in school, in the community, and throughout life."

V.a.

Project Description:

Grant activities for the 3rd award focuses on building partnerships with the Kalamazoo Department of Health and Human Services to extend the System of Care to youth involved with child welfare through foster care or ongoing protective services. The goals include helping youth stay with their families, return to their families, or break the cycle of repeated out of home placements.

The program has implemented 2 main strategies: (1) provision of evidence-based practices and (2) participation in the Child Welfare planning processes of Family Team Meetings (FTM) and Team Decision Making meetings (TDM). A FTM is an opportunity for parents, extended family members, children (if age appropriate), caregivers and child welfare staff to meet and share ideas that will assist the family in creating and reviewing a plan related to the child(ren)'s safety, stability, well-being, and permanence. A TDM determines what safety measures, services, or other supports are necessary to keep children in their home or to move children to another placement (either out of home or back to the home).

ISK Youth Intake staff attend the FTMs and TDMs. If the youth is not involved in mental health services, an intake for services is offered and can be started at once following the meeting. If the youth/family is already involved in mental health services, the services are reviewed and additional needed services are offered. In the first two years, ISK staff have attended over 500 FTMs and TDMs.

Evidence based services provided through the grant include Parent Management Training Oregon, Parenting Through Change, Trauma Focused Cognitive Behavioral Therapy, Brief Strategic Family Therapy, Motivational Interviewing, Eye Movement Desensitization and Reprocessing (EMDR), Trauma Focused Caregiver Education

Group, Transition to Independence (TIP), Multisystemic Therapy (MST). Mental Health First Aid training is also provided to community partners.

Respectfully Submitted, Patricia J. Weighman, LMSW/ACSW Senior Executive, Youth and Family Services





INTEGRATED Services of Kalamazoo (ISK) Board of Director's Meeting VI.a. August 1, 2022

ISK Board Member	Board Members PRESENT	Declaration of Location City/County	Board Members ABSENT
	X	Kalamazoo/Kalamazoo	ZIDOLIVI
Karen Longanecker, CHAIR			
Michael Seals, VICE CHAIR	X	Kalamazoo/Kalamazoo	
Nkenge Bergan			X
Sarah Carmany	X	Kalamazoo/Kalamazoo	
Patrick Dolly		49	X
Pat Guenther	X	Kalamazoo/Kalamazoo - REMOTE - via Microsoft TEAMS	
Michael Raphelson	X	Kalamazoo/Kalamazoo	
Sharon Spears	X	Kalamazoo/Kalamazoo	*
Erik Krogh	X	Kalamazoo/Kalamazoo	
Melissa Woosley	X	Kalamazoo/Kalamazoo	
Veronica McKissack, COMMISSIONER	X	Kalamazoo/Kalamazoo	

ISK - KCMHSAS Staff Present:

Ieff Patton, CHIEF EXECUTIVE OFFICER

Charlotte Bowser

Wanda Brown

Sheila Hibbs

Beth Ann Meints

Amy Rottman

Michael Schlack, CORPORATE COUNSEL

Dianne Shaffer

Ed Sova

Lisa Brannan

Alecia Pollard

Demeta Wallace

ISK - KCMHSAS Staff Absent:

Roann Bonney Kathy Lentz Pat Weighman

Providers:

Fi Spalvieri

Executive Director

Community Living

Options

Tina Graham

Executive Director

ASK Family Services

Call to Order:

Chair Longanecker welcomed all in attendance to the August 1, 2022, INTEGRATED Services of Kalamazoo Board meeting. The meeting was called to order at 4:01PM.

NTEGRATED Services of Kalamazoo Agenda:

Board members reviewed the agenda for changes. Board members are recommending no changes to the agenda.

Welcome Ms. Melissa Woosley to the ISK Board! "I'm excited about being a part of the ISK Board. I love Kalamazoo & ISK. I've received some wonderful care from ISK & the Kalamazoo community. I'm originally from Battle Creek, MI., but I moved to Kalamazoo. I also volunteer for Recovery Institute."

Citizen Time:

No citizens came forth.

Recipient Rights:

Recipient Rights Advisory Committee MOTION:

Member Raphelson...

Appointments:

"I MOVE TO APPOINT THE FOLLOWING INDIVIDUAL TO THE RECIPIENT RIGHTS ADVISORY COMMITTEE (RRAC): JENNIFER LEIGH FOR A THREE-YEAR TERM (BEGINNING JUNE 1, 2022-JUNE 1, 2025)."

"I MOVE TO RE-APPOINT THE FOLLOWING INDIVIDUALS TO THE RECIPIENT RIGHTS ADVISORY COMMITTEE (RRAC): JEFF GETTING, DENISE MARTINEAU, ERIK KROGH & LINDA REESER FOR A TWO-YEAR TERM (BEGINNING JUNE 1, 2022-JUNE 1, 2024)."

Removal:

"I MOVE TO REMOVE THE FOLLOWING INDIVIDUAL (ROBERT GREEN) FROM THE RECIPIENT RIGHTS ADVISORY COMMITTEE (RRAC). MR. GREEN REQUESTED THAT HIS TERM ON THE RRAC END." Supported by Member Seals. MOTION PASSED.

Program Services Report:

Wanda Brown, ISK, Senior Executive, Integrated Health Clinic, presented the July program services report.

The Integrated Health Services Clinic at ISK provides behavioral health services to individuals/beneficiaries of all ages. Persons experiencing new, existing, relapse or co-occurring behavioral health events are invited to seek services at this facility. According to the Substance Abuse and Mental Health Services Administration (SAMHSA), "behavioral health treatments are ways of helping people with mental illnesses and substance use disorders. For many people the most effective behavioral health approach involves a combination of counseling and medication therapy". Behavioral Health services at the Integrated Services Health Clinic are rendered by highly trained and competent professionals who use evidencedbased practice and person-centered planning to develop an appropriate plan of treatment to address the needs and symptoms of the individual at the time-of-service delivery.

There have been 18,436 documented services provided from the Psychiatric Services Team between October 1, 2021- July 18, 2022.

Completed Evaluation & Management services from 10/01/2021 - 07/18/2022

•	Psychiatric Services	13,707	In Person and Telehealth visits
•	ACT Team 3	288	Documented services provided
•	ACT Team 5	272	Documented services provided
•	Injections Performed	4,169	Documented injection services

ISK has been very fortunate to collaborate with the WMU Homer Stryker School of Medicine -Psychiatry Department. These partnerships have resulted in several collaborative initiatives that benefit both organizations and most importantly the individuals served. One agreement provides Board-Certified Psychiatrist to work with the medical/psychiatry team providing services to the individuals up to forty hours per week. The physician also serves as the primary supervising physician for the ISK/ACT (Assertive Community Teams) teams. Another collaborative initiative results in six of the third-year psychiatry residents along with an attending physician to rotate in the clinic on a biweekly basis. Collaborative Peer Review sessions facilitated by the Director of the WMU Homer Stryker School of Medicine/Psychiatry has led seven interactive sessions focusing on principles of evidenced based practice.

Currently, services are provided via telehealth and/or in person appointments. ISK has a diverse medical/psychiatric team consisting of five physicians, four nurse practitioners, one physician assistant, ten registered nurses covering the clinic and triage, one nurse care manager and one nurse care manager vacancy. Other valuable team members include, health information and operations manager, office manager, receptionists/front desk staff, and a multitude of therapist and social workers that collaborate to provide exceptional service to those served by Integrated Services of Kalamazoo.

Citation: https://www.samhsa.gov/find-helptreatment(Last updated 04/27/2022)

Consent Calendar/MOTION:

Chair Longanecker, "Are there any materials that the ISK Board would like to have removed from the Consent Calendar before we proceed with the verbal motion?" No materials were requested to be removed.

> Minutes (5/23/2022&6/27/2022) VI.a.

VI.b. Chief Executive Officer Performance

Monitoring Executive Performance VI.c.

VI.d. Chief Executive Officer Role

Board Finance and Compliance Committee Report

Member Krogh, "I MOVE TO ACCEPT THE CONSENT CALENDAR MONITORING REPORTS BOTH "AS-IS" OR WITH PROPOSED RECOMMENDED CHANGES." Supported by Member Spears. MOTION PASSED.

Monitoring Reports:

Sheila Hibbs, ISK, Administrator of System Performance and Programs, presented the FY2021-22 Mid-Year Dashboards Report.

Integrated Services of Kalamazoo FY 2021/22 Mid-Year Dashboards Report

This packet contains the Integrated Services of Kalamazoo's (ISK) Dashboards and Outcomes Reports for fiscal year 2021/22 (October 1, 2021 through March 31, 2022). The reports are divided into two sections – Key Performance Indicators (front side of each report) and Service Outcomes (back side of each report). The purpose of this mid-year end report is to identify areas for improvements within our services and administration, and to celebrate successes.

This dashboard report provides a status of FY 2021/22 as it compares to the established goal for each indicator. Dashboard data is inclusive of completed BH TEDS records.

Key Performance Indicators are compiled using data from the Michigan Mission-Based Performance Indicator System (MMBPIS), MDHHS completed Behavioral Health Treatment Episode Dataset (BH TEDS), paid claims and financial report data and reported results from SWMBH Board metrics. "Functional Outcomes of Persons Served" are included in the Key Performance Indicators. These are key measures of individual improvement as a result of ISK services.

The Service Outcomes section of the reports focus on more specific areas of functioning for persons served. Many of the Service Outcomes are reported to the ISK Board on an annual basis and are not included in the Mid-Year dashboard report.

Additional information on specific indicators is included below.

KEY PERFORMANCE INDICATORS

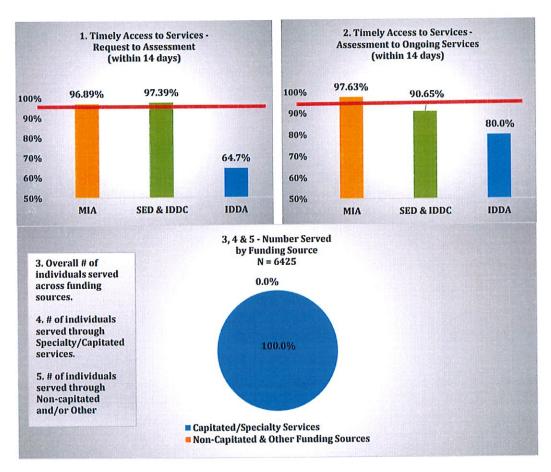
Contract Compliance

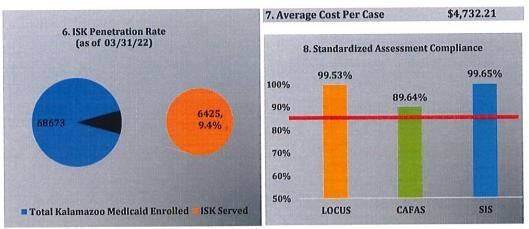
- Indicators 1 and 2 this data is reflective of FY 21/22 1st qtr final data and 2nd qtr consultative data to the state. The 2nd qtr final report has not been uploaded to the MDHHS website; this data will be reported when made available.
- Indicator 3, 4, 5 These indicators represent that total number of persons served through ISK direct run and contracted provider services. The data sources for these indicators include at least one paid claim/encounter completed during the fiscal year and based on identified funding source. The percentage of individuals served through specialty services has increased as a result of Certified Community Behavioral Health Clinic (CCBHC) and the increased availability of service arrays for individuals through the CCBHC.
- Indicator 6 Kalamazoo County reported a Medicaid enrollment of 68,673 individuals as of April 1, 2022. ISK served 6,425 individuals during the first half of the fiscal year.
- Indicator 7 The average cost of service per individual served has decreased compared to past fiscal years based on total expenses and number of individuals served.
- · Indicator 8 goal exceeded
- Indicator 9 The MLR for period ending March 31, 2022 is not available at this time

SERVICE OUTCOMES

• Indicator # 34 - Data is no longer available for this indicator as the Discharge Document was changed within the Electronic Health Record.

Integrated Services of Kalamazoo FY 2021/22 Mid-Year Dashboard Report (October 1, 2021 - March 31, 2022)





Integrated Services of Kalamazoo FY 2021/22 Mid-Year Dashboard Report (October 1, 2021 - March 31, 2022)

9. Medical Loss Ratio (MLR) Data Not Available At This Time 31. # of individuals discharged from SUD services who have completed treatment - 11%32. # of individuals discharged from SUD services who have dropped out of treatment- 89% 33. # of individuals discharged from SUD services with a change in substance use frequency- 22% 34 - # of individuals discharged from SUD services who have met Treatment Plan goals - data no longer available due to change in discharge document

Financial Condition Report:

Charlotte Bowsesr, ISK, Director of Finance, presented the Financial Condition report for the period ending June 30, 2022.

INTEGRATED SERVICES OF KALAMAZOO

Statement of Net Position June 30, 2022		
	June 2021	
	(unaudited)	June 2022
Assets		
Current assets		
Cash and investments	\$ 30,573,463	\$ 28,406,065
Accounts receivable	4,334,898	5,042,417
Due from other governments	10,470	5,297,792
Prepaid Items	796,199	838,839
Total current assets	35,715,030	39,585,114
Non-current assets		
Capital assets, net of accumulated depreciation	9,108,267	9,310,332
Net pension asset, net of deferred outflows	4,937,092	5,722,229
Total non-current assets	14,045,359	15,032,561
Fotal assets	49,760,389	54,617,675
labilities		
Current liabilities		
Accounts payable	\$ 6,887,917	\$ 8,882,166
Due to other governments	11,704,534	1,133,678
Due to providers	298,013	(87,053
Accrued payroll and payroll taxes	1,377,366	916,612
Unearned revenue	4,274,765	572,557
Total current liabilities	24,542,595	11,417,960
Non-current liabilities		
Long-term debt	4,415,779	4,187,668
Fotal liabilities	28,958,374	15,605,628
Net position		No. of the Property of the Pro
Designated	10,010,484	18,979,619
Undesignated	5,323,673	1,569,435
Investment in fixed assets	4,841,804	4,858,748
Previous year close		
Net gain (loss) for period	626,054	14,002,447
Net position	\$ 20,802,015	\$ 39,410,250

Statement of Revenue, Expenses and Change in Net Position October 1, 2021 through June 30, 2022 Percent of Year is 75.00%

	Amended 2022 BUDGET	YTD Totals 6/30/22	Remaining Budget	Percent of Budget - YTD
Operating revenue				
Medicaid:				
Traditional Capitation	\$ 63,305,736	\$ 52,471,937	\$ 10,833,799	82.89%
Healthy Michigan Capitation	10,040,766	8,731,076	1,309,690	86.96%
Autism Captiation	6,474,379	4,427,388	2,046,991	68.38%
Settlement	-	(19,476,129)	19,476,129	0.00%
State General Fund:				
Formula Fundings	3,826,552	2,869,912	956,640	75.00%
PY General Fund Carryforward	173,931	-	173,931	0.00%
Settlement	-			0.00%
CCBHC Demonstration	-	5,261,685	(5,261,685)	0.00%
CCBHC Accrual	-	24,759,122	(24,759,122)	0.00%
County Allocation	1,550,400	1,162,800	387,600	75.00%
Client Fees	439,000	286,318	152,682	65.22%
SUD Block Grant	111,957	83,979	27,978	75.01%
Other grant revenue	21,026,249	15,237,096	5,789,153	72.47%
Other earned contracts	1,371,440	828,803	542,637	60.43%
COFR	28,150	7,064	21,086	25.09%
Interest	69,250	42,675	26,575	61.62%
Local revenue	10,000	1,459	8,541	0.00%
Total operating revenue	\$ 108,427,810	\$ 96,695,185	\$ 11,732,625	89.18%
Operating expenses				
Salaries and wages	\$ 20,765,385	\$ 15,578,107	\$ 5,187,278	75.02%
Employee benefits	7,448,927	4,779,756	2,669,171	64.17%
Staff development	215,589	80,529	135,060	37.35%
Payments to providers	65,841,740	51,088,389	14,753,351	77.59%
Administrative contracts	10,738,004	8,938,915	1,799,089	83.25%
IT software and equipment	296,117	488,797	(192,680)	165.07%
Client transportation	25,410	11,402	14,008	44.87%
Staff travel	376,891	141,549	235,342	37.56%
Office expenses	440,777	319,963	120,814	72.59%
Insurance expense	94,481	105,133	(10,652)	111.27%
Depreciation expense	404,507	344,587	59,920	85.19%
Utilities	838,400	786,827	51,573	93.85%
Facilities	175,879	53,116	122,763	30.20%
Prior year adjustment	-	(24,333)	24,333	0.00%
Total operating expenses	\$ 107,662,107	\$ 82,692,737	\$ 24,969,370	76.81%
Change in net position	765,703	14,002,447	\$ (13,236,745)	
Beginning net position	25,407,802	25,407,802	9	
Ending net position	\$ 26,173,505	\$ 39,410,250	ē.	

Percent of Year is 75.00%	開始	Special	ty Se	rvices		Healthy f	Mich	igan		Aut	sm			SUD Bloc	ck G	irant				Totals	
		YTD Budget		YTD Totals 6/30/22		YTD Budget		6/30/22		YTD Budget		6/30/22		YTD Budget		6/30/22		YTD Budget		YTD Totals 6/30/22	Variance
Operating revenue																					
Medicald:	2								5		5		5		s		e	47,479,302	s	52,471,937	\$ 4,992,63
Traditional Capitation	S	47,479,302	5	52,471,937	\$	7 5 30 5 35	\$	8,731,076	>		>		,		*			7,530,575	•	8,731,076	1.200,50
Healthy Michigan Capitation		•		-		7,530,575		8,731,070		4,855,784		4,427,388						4,855,784		4,427,388	(428,39
Autism Capitation		4,763,944		(13,600,293)		(4,150,483)		(5,838,338)		(394,068)		46,481				(83,979)		219,393		(19,476,129)	(19.695,52
Settlement Estimate Client Fees		329,250		286,318		(4,130,463)		(3,030,330)		(334,000)		40,101				,00,000		329,250		286,318	(42,9)
SUD Block Grant	_	323,130	_				_		_		_	<u> </u>		83,968	_	83,979	_	83,968	_	83,979	1
Total operating revenue	\$	52,572,496	5	39,157,962	\$	3,380,092	5	2,892,738	5	4,461,716	5	4,473,869	\$	83,968	5	0	5	60,498,272	5	46,524,568	\$ (13,973,70
Operating expenses																					
Youth Programs	5	4,828,096	5	1,558,977	S		\$		5	3,986,051	\$	4,250,327	5	•	\$		\$	8,814,146	\$	5,809,304	(3,004,84
MIA Programs		16,508,274		11,850,896		2,763,819		2,649,876						83,968				19,356,061		14,500,772	(4,855,28
IDDA Programs		23,487,200		23,255,070		218,663		30,764										23,705,864		23,285,835	(420,0
Integrated Health Clinic		2,144,143		536,453		37,256		67,559		•				•		-		2,181,398		604,012	(1,577,38
Administration		5,604,783		1,956,567		360,353		144,539	\$	475,666		223,541						6,440,802		2,324,647	(4,116,1
Homeless Shelter								-				-				-					
Non-DCH Activity Expenditures				<u> </u>	_	<u>-</u>	_		_	<u>-</u>	_	<u>·</u>	-	<u>.</u>	_		-		_	<u>-</u>	
Total operating expenses	\$	52,572,496	5	39,157,962	\$	3,380,091	5	2,892,738	\$	4,461,717	\$	4,473,868	\$	83,968	5	<u> </u>	5	60,498,271	\$	46,524,569	\$ (13,973,70
Change in net position		0		(0)		(0)		(0)		(0)		0		(0)		0	5	0		(0)	

Percent of Year is 75.00%		State Gen	eral F	und	CC	внс			Other Fund	ing S	iources				Totals		
		TD dget		D Totals /30/22	YTD Budget		/TD Totals 6/30/22		YTD Budget		/TD Totals 6/30/22		YTD Budget	١	YTD Totals 6/30/22		Variance
Operating revenue																	
General Fund	\$ 2	739,466	Ś	2.869.912	\$	\$		\$		\$		\$	2,739,466	\$	2,869,912	\$	130,446
Projected GF Carryforward		130,448	*					200					130,448				(130,448
CCBHC Demonstration							30,020,807				3 * 3				30,020,807		30,020,807
Other Federal and State Grants									16,367,748		15,237,096		16,367,748		15,237,096		(1,130,652
Earned Revenue		0							1,028,580		828,803		1,028,580		828,803		(199,777
COFR Revenue									21,113		7,064		21,113		7,064		(14,049
		-		979					50,625		42,640		50,625		42,640		(7,985
Interest		•							1,162,800		1,162,800		1,162,800		1,162,800		,,,,,,,,
County Allocation		•					153		7,500		1,459		7,500		1,459		(6,041
Local Revenue		•							1,313		35		1,313		35		(1,278
Restricted Interest									1,313		2,714,300		1,313		2,714,300		2,714,300
Transfer from GF				•	•						2,714,300		(687,006)		2,714,300		687,006
Settlement Revenue (Expense)		(687,006)		<u> </u>	 	-	<u> </u>	_	<u> </u>	-		_	(007,000)	-	<u>_</u>	_	007,000
Total operating revenue	\$ 2	,182,908	\$	2,869,912	\$ •	\$	30,020,807	\$	18,639,678	\$	19,994,197	\$	20,822,586	\$	52,884,916	\$	32,062,330
Operating expenses																	
Youth Programs	\$	179,807	\$	18,056	\$	\$	1,734,868	\$		\$	-	\$	179,807	\$	1,752,924	\$	1,573,117
MIA Programs	1	,217,714		387,732			6,589,129		688,096		518,930		1,905,809		7,495,792		5,589,983
IDDA Programs		218,519		74,877			1,416,207		114,707		129,593		333,226		1,620,677		1,287,451
Integrated Health Clinic		6,326		39,189			2,319,221						6,326		2,358,410		2,352,08
DCO Contracts							3,998,134								3,998,134		3,998,134
Other Federal and State Grants									15,288,587		7,254,849		15,288,587		7,254,849		(8,033,73)
CERA Grant											9,666,008				9,666,008		9,666,00
HUD Grants											767,849				767,849		767,84
Managed Care Administration		193,601		25,280					2,027,272		41,145		2,220,874		66,425		(2,154,448
Homeless Shelter									208,239		262,691		208,239		262,691		54,45
Transfer from GF				2,714,300											2,714,300		2,714,300
Prior year adjustment				.,,			3. . .				(24,333)				(24,333)		(24,333
Non-DCH Activity Expenditures								_	105,442	_	948,744	_	105,442	_	948,744	_	843,30
Total operating expenses	\$ 1	,815,966	\$	3,259,435	\$	\$	16,057,559	\$	18,432,343	\$	19,565,475	\$	20,248,309	\$	38,882,469		18,634,160

ССВНС							
October 1, 2021 through June 30, 2022 Percent of Year is 75.00%							
		CCBHC Medicald	ŀ	CCBHC lealthy MI	No	CCBHC n-Medicald	CCBHC YTD Totals
Operating revenue							
Prepayment	\$	5,261,685	\$	-	\$	-	\$ 5,261,685
Remaining CCBHC revenue due	_	19,648,827		5,110,294			 24,759,122
Total CCBHC Revenue (PPS-1 of \$445.73 x encounters)	\$	24,910,513	\$	5,110,294	\$		\$ 30,020,807
Operating expenses							
Internal services	\$	9,437,040	\$	1,935,972	\$	686,413	\$ 12,059,426
DCO Contracts		3,770,563		641,844		227,571	3,998,134
Total operating expenses	\$	13,207,603	\$	2,577,816	\$	913,984	\$ 16,057,559
Operating change in net position		11,702,909		2,532,478		(913,984)	13,963,248
Reclassification to cover Non-Medicaid		(913,984)	_	-		913,984	•
Total change in net position		10,788,925		2,532,478			

Utilization Reports:

Charlotte Bowser, ISK, Director of Finance, presented the Utilization Report for the period ending June 30, 2022.

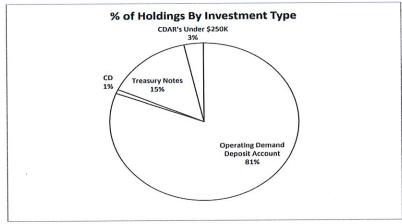
- Youth Community Inpatient Services is unfavorable by \$276,429
- MI Adult Community Inpatient Services is at (717) days and unfavorable at \$788,756
- Community Living Supports, Personal Care, and Crisis Residential is unfavorable at \$2,129,102.

Investment Report:

Charlotte Bowser, ISK, Director of Finance, presented the Investment Report for the period ending June 30, 2022.

Quarterly Cash & Investments Report Quarter Ending June 30, 2022

Financial Institution	Type of Investment	Cost	Maturity Date	% Yield
T manda manatan	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
CASH				
PNC	Operating Demand Deposit Account	\$24,537,848	NA	0.039
	Payroll Account	\$5,000		
	Accrued Leave Reserve	\$117,005		
	Pretax Reimbursement Account	\$43,325		
	Various Pelly Cash Funds	\$630		
	Total Cash Accounts	\$24,703,808		
NVESTMENTS				
CDAR's (via Independent Bank)	CD's Issued Under FDIC Limit of \$250,000	\$524,565	7/15/2022	0.109
CDAR's (via Independent Bank)	CD's Issued Under FDIC Limit of \$250,000	\$489,458	7/15/2022	0.109
Total CDAR's		\$1,014,024		
CD (via Independent Bank)	CD	\$250,507	7/15/2022	0.20
CD (via Independent Bank)	CD	\$2,500,000	7/15/2022	0.20
Total CD's		\$2,750,507		
U.S. Federal Government (via PNC)	Treasury Notes (for bond repayment)	\$4,519,229	3/31/2022	2.42
	Total Investments	\$8,283,759		
TOTAL CASH AND INVESTMENTS		\$32,987,568		
% of Holdings By Institution		% of Holding	s By Investm	ent Type
PNC - Cash	74.89%	Cash		74.89
U.S. Federal Government (via PNC)	13.70%	CD		8.34
CDAR's & CD(via Independent Bank)	11.41%	Treasury Notes		13.70
OD/11 of OD(114 mapparlacm zamy	100.00%	CDAR's		3.07
				100.00
%	of Holdings By Investment Type	2		
	CDAR's Under \$250K 3%			
	3%			



May & June Disbursements/MOTION:

Member Krogh, "BASED PM THE BOARD FINANCE MEETING REVIEW, I MOVE THAT ISK APPROVE THE MAY 2022 VENDOR DISBURSEMENTS OF \$8,893,152.98 AND THE JUNE 2022 VENDOR DISBURSEMENTS OF \$8,456,600.11." Supported by Member Guenther.

MOTION PASSED.

Salary & Wage Increase/MOTION/ROLL CALL VOTE:

Member Krogh, "I MOVE THAT THE ISK BOARD APPROVE AN 11% BASE WAGE INCREASE OR SOMETHING SIMILAR TO ALL ELIGIBLE STAFF EFFECTIVE AUGUST 15, 2022." Supported by Member Raphelson.

ROLL CALL VOTE:

ISK Board Member	Yes	No
Chair Karen Longanecker	X	
Vice Chair Michael Seals	X	
Member Nkenge Bergan		
Member Patrick Dolly		
Member Sarah Carmany	X	
Member Pat Guenther	X	
Member Michael Raphelson	X	
Member Veronica McKissack	X	
Member Sharon Spears	X	
Member Erik Krogh	X	
Member Melissa Woosley	X	
MOTION PASSED	X	

NOTE - Need 7 "YES" votes (2/3 of currently appointed board members) no matter how many members are in attendance.

MOTION PASSED.

Action Items New & Revisited/MOTION:

Member Krogh, "I MOVE THAT THE ISK BOARD GO INTO CLOSED SESSION TO DISCUSS LEGAL ISSUES PURSUANT TO SECTION 8(e) OF THE MICHIGAN OPEN MEETINGS ACT." Supported by Vice Chair Seals.

ROLL CALL VOTE:

ISK Board Member	Yes	No
Chair Karen Longanecker	X	
Vice Chair Michael Seals	X	
Member Nkenge Bergan		
Member Patrick Dolly		
Member Sarah Carmany	X	
Member Pat Guenther	X	
Member Michael Raphelson	X	
Member Veronica McKissack	X	
Member Sharon Spears	X	
Member Erik Krogh	X	
Member Melissa Woosley	X	
MOTION PASSED	X	

NOTE - Need 7 "YES" votes (2/3 of currently appointed board members) no matter how many members are in attendance.

MOTION PASSED.

The ISK Board members went into CLOSED SESSION @ 5:15pm and ended at 5:25pm.

Chief Executive Officer Report:

We are eagerly awaiting to hear back from the Kalamazoo County Government on their awards for the ARP grant. We did send an application, so, in the meantime, I'm preparing myself to begin writing a new grant and will submit that application for consideration to the Irving S. Gilmore Foundation.

Citizen Time:

No citizens came forth.

SWMBH (Southwest Michigan Behavioral Health) Updates/Karen Longanecker.

Chair Longanecker attended the SWMBH meeting and there wasn't anything of great significance to report.

I'm elated about the 11% pay increase for ISK employees and I'm hopeful that the same or close to it increase can occur for the providers and their direct care workers.

Michael Seals:

I encourage everyone to get involved to help curb this teen violence that is haunting our community. Let's get involved!

Pat Guenther:

My preference is to be there in-person with all of you for our meetings. However, until my situation changes, I appreciate the support that you all give me and the flexibility.

Melissa Woosley:

I'm very impressed with the CCBHC. It's exciting work!

Erik Krogh:

I fully support the compensation for the ISK staff. I just hope it is enough to sustain and keep staff employed at ISK. I also want to "thank you" for your tremendous show of support, affection and kindness these past few months. Also, during our loss (my child bride, Mary Ann) my dog who is 15 1/2 years old suffered a stroke. He wasn't doing well at home, so I took him to his veterinarian, and it was like he got a second wind to live at the doctor's office. I've since taken him back home and he is very good, delightful and at home guarding the refrigerator.

Sarah Carmany:

I continue to take part in the IDDA public meetings where we discuss employment, housing, waiting list, state funding and even Ukraine refugees.

Veronica McKissack:

We are still processing the ARP grant applications and hope to have them completed soon. After that the grant award recipients will be announced. We also will be looking at salary increases for staff and look forward to the recommendations that will come from our stakeholders and employees. Interviews will begin soon for the position of Corporate Counselor for Kalamazoo County Government. Our new administrator, Kevin Catlin is performing his new task well.

Meeting ended at 5:45PM.

Demeta J. Wallace Administrative Coordinator INTEGRATED Services of Kalamazoo

BOARD POLICY V.03

AREA:	Governance		
SECTION:	Executive Limitations	PAGE:	1 of 2
		SUPERSEDES:	08/22/2011
SUBJECT:	BUDGETING	REVISED:	09/27/2021

PURPOSE/EXPLANATION

To establish limitations of means regarding the budgeting process.

POLICY

- I. Budgeting any fiscal year or the remaining part of any fiscal year shall not deviate materially from Board Ends priorities, or risk fiscal jeopardy. Accordingly, the Chief Executive Officer may not cause or allow budgeting which:
 - A. Does not provide for a Public Hearing prior to formally adopting the budget consistent with Michigan Compiled Law (MCL) Section 141.412.
 - B. Contains too little information to enable credible projection of revenues and expenses, cash flow, and disclosure of planning assumptions.
 - C. Plans the expenditure in any fiscal year of more funds than are conservatively projected to be received in that period.
 - D. Reduces the current assets at any time to less than a favorable relationship with current liabilities.
 - E. Does not provide for Board prerogatives such as Board development, and Board and committee meetings.
 - F. Endangers the fiscal soundness of future years or ignores the building of organizational capability sufficient to achieve ends in future years.
- II. This policy will be monitored through internal mechanisms on a quarterly basis, and external mechanisms on an annual basis.

SUBJECT: V.03 Budgeting Page: 2 of 2

EXHIBITS

A. MCL Section 141.412.

CHIEF EXECUTIVE OFFICER

Jeff Patton

Chief Executive Officer

APPROVED

Karen Longanecker

Board Chair

BOARD POLICY V.04

AREA:	Governance		
SECTION:	Executive Limitations	PAGE:	1 of 2
CLID ID CO		SUPERSEDS:	08/22/2011
SUBJECT:	FINANCE	REVISED:	09/27/2021

PURPOSE/EXPLANATION

To establish limitations of means regarding the financial condition of the agency.

POLICY

I. With respect to the actual, ongoing condition of the organization's financial health, the Chief Executive Officer (CEO) may not cause or allow the development of fiscal jeopardy or a material deviation of actual expenditures from Board priorities established in Ends policies. Accordingly, the CEO may not:

Expend more funds than have been received in the fiscal year to date, unless the debt guideline (below) is met.

- A. Expenditures can not be authorized that exceed the amount appropriated within the budget or in excess of the available funds as that action creates a debt.
- B. Indebt the organization.
- C. Use any Long-Term Reserves, aside from their intended use, without Board approval.
- D. Fail to settle payroll and debts in a timely manner.
- E. Allow tax payments or other government-ordered payments or filings to be overdue or inaccurately filed.
- F. Acquire, encumber or dispose of real property without Board approval.
- G. Operate without a set of administrative purchasing and procurement guidelines and procedures consistent with current law.
- H. Fail to adhere to generally accepted accounting principles (GAAP) in all accounting activities unless more restrictive requirements exist.
- I. Fail to use a legally defined procurement process to promote effective and equitable purchasing practices.

1 av		20 00
SUBJECT:	Financial Condition	Page: 2 of 2
# CHUDHELLE.	CBIMICIMI CONTRIBOR	I ago. 2 OI 2
,		

II. This policy will be monitored through internal mechanisms annually.

CHIEF EXECUTIVE OFFICER

Chief Executive Officer

APPROVED

Erik Krogh Board Chair

BOARD POLICY V.07

AREA:	Governance		
SECTION:	Executive Limitations	PAGE:	1 of 2
		SUPERSEDES:	08/26/2013
SUBJECT:	ASSET PROTECTION	REVISED:	09/27/2021

PURPOSE/EXPLANATION

To establish limitations of means regarding asset protection.

POLICY

- I. The Chief Executive Officer (CEO) may not allow assets to be unprotected, inadequately maintained nor unnecessarily risked. Accordingly he/she may not:
 - A. Fail to insure against theft and casualty losses to at least 80 percent replacement value and against liability losses to Board members, staff or the organization itself in an amount comparable to other CMH's.
 - B. Allow un-bonded personnel access to material amounts of funds.
 - C. Subject plant and equipment to improper wear and tear or insufficient maintenance.
 - D. Unnecessarily expose the organization, its Board or staff to claims of liability.
 - E. Fail to protect intellectual property, information and files from loss or significant damage.
 - F. Receive, process or disburse funds under controls which are insufficient to meet the Board appointed auditor's standards.
 - G. Endanger the organization's public image or credibility, particularly in ways that would hinder its accomplishment of mission.
- II. This policy will be monitored through a report on an overview of ISK insurance coverage on an annual basis.

SUBJECT:

V.07 Asset Protection

Page:

2 of 2

CHIEF EXECUTIVE OFFICER:

Jeff Patton Chief Executive Officer

APPROVED:

Karen Longaneck Board Chair

ASSET PROTECTION REPORT August 22, 2022

- Our liability/property insurance is through the Michigan Municipal Risk Management Authority ("MMRMA"). MMRMA was created under the authority of the Michigan statutes to provide risk management and risk financing services to local governmental entities such as ISK.
- Liability coverage through MMRMA totals \$15,000,000 per occurrence.
- ISK board members are covered by MMRMA for their official duties performed on behalf of ISK.
- MMRMA pays for the costs of defending certain claims against ISK as well as any damages assessed.
- Workers compensation insurance is purchased through Accident Fund Co of America. We have limits of \$500,000 per accident and \$500,000 per disease claim.
- Our long term and short-term disability coverage is purchased through The Hartford Group. For long term coverage (LTD), employees will receive 60% of their income up to \$130,000 after a 180-day waiting period (maximum benefit of \$6500 per month). For short-term disability (STD), employees will receive 60% of their covered salary up to \$130,000 beginning on the 22nd day after the accident or 22nd day after an illness that causes them to be off work (maximum benefit of \$1500 per week). Maximum duration for STD is 23 weeks or the beginning of LTD benefits, whichever is earlier.
- Group life insurance is through The Hartford Group. Employees receive 0.5 times their salary rounded to the next higher \$1,000 subject to a minimum of \$10,000 and a maximum \$100,000.
- Group accidental death and dismemberment insurance is through The Hartford Group.
- Health care professional liability insurance is through ProNational Insurance Company. Limits are \$1,000,000 per claim and \$3,000,000 aggregate. Our medical doctors and paramedical employees are covered.
- Medical insurance/prescriptions/dependant coverage is purchased through Blue Cross Blue Shield of Michigan for employees working at least 30 hours per week.
- Dental insurance is purchased through ADN for employees working at least 30 hours per week.
- Vision insurance is purchased through NVA for employees working at least 30 hours per week.
- Employees working at least 20 and up to 29 hours per week may purchase ISK's medical insurance/prescriptions/dependent coverage, dental insurance, or vision insurance at the full premium cost.





Period Ended July 31, 2022 Monthly Finance Report

Statement of Net Position

July 31, 2022

	July 2021 (unaudited)	July 2022
		No de la constitución de la cons
Assets		
Current assets		
Cash and investments	\$ 29,758,043	\$ 29,088,023
Accounts receivable	6,391,637	6,586,506
Due from other governments	10,470	5,646,922
Prepaid items	1,228,468	853,744
Total current assets	37,388,618	42,175,195
Non-current assets		
Capital assets, net of accumulated depreciation	9,079,057	9,475,199
Net pension asset, net of deferred outflows	4,937,092	5,722,229
Total non-current assets	14,016,149	15,197,428
Total assets	51,404,767	57,372,623
Liabilities		
Current liabilities	20 NO 100 NO 100 NO	
Accounts payable	\$ 7,170,935	\$ 9,719,642
Due to other governments	13,294,135	1,132,181
Due to providers	98,591	146,704
Accrued payroll and payroll taxes	1,377,366	857,593
Unearned revenue	4,201,925	604,774
Total current liabilities	26,142,952	12,460,896
Non-current liabilities		
Long-term debt	4,415,520	4,187,409
Total liabilities	30,558,472	16,648,305
Net position		
Designated	10,010,491	18,979,584
Undesignated	5,323,673	1,569,435
Investment in fixed assets	4,841,804	4,858,748
Previous year close	-	19
Net gain (loss) for period	670,327	15,316,551
Net position	\$ 20,846,295	\$ 40,724,318

Statement of Revenue, Expenses and Change in Net Position

October 1, 2021 through July 31, 2022 Percent of Year is 83.33%

			n	D
	Amended	YTD Totals	Remaining Budget	Percent of Budget - YTD
	2022 BUDGET	7/31/22	buuget	Buuget - 11D
Operating revenue				
Medicaid:				
Traditional Capitation	\$ 63,305,736	\$ 58,451,800	\$ 4,853,936	92.33%
Healthy Michigan Capitation	10,040,766	9,751,774	288,992	97.12%
Autism Captiation	6,474,379	4,924,848	1,549,531	76.07%
Settlement	-	(21,562,054)	21,562,054	0.00%
State General Fund:		(==,===,===,,	,,	
Formula Fundings	3,826,552	3,188,792	637,760	83.33%
PY General Fund Carryforward	173,931	-	173,931	0.00%
Settlement		_		0.00%
CCBHC Demonstration	_	5,870,040	(5,870,040)	0.00%
CCBHC Accrual	21	27,194,212	(27,194,212)	0.00%
County Allocation	1,550,400	1,292,000	258,400	83.33%
Client Fees	439,000	383,755	55,245	87.42%
SUD Block Grant	111,957	93,298	18,659	83.33%
	21,026,249	16,879,100	4,147,149	80.28%
Other grant revenue Other earned contracts	1,371,440	820,261	551,179	59.81%
	28,150	7,231	20,919	25.69%
COFR	69,250	42,752	26,498	61.74%
Interest	10,000	1,459	8,541	0.00%
Local revenue	10,000	1,433	0,341	0.0070
Total operating revenue	\$ 108,427,810	\$ 107,339,267	\$ 1,088,543	99.00%
Total operating revenue	+ ===,,===			
Operating expenses				
Salaries and wages	\$ 20,765,385	\$ 17,197,330	\$ 3,568,055	82.82%
Employee benefits	7,448,927	5,324,162	2,124,765	71.48%
Staff development	215,589	87,780	127,809	40.72%
Payments to providers	60,615,677	53,040,640	7,575,037	87.50%
Administrative contracts	16,629,895	13,934,045	2,695,850	83.79%
IT software and equipment	296,117	552,651	(256,534)	186.63%
Client transportation	25,410	13,419	11,991	52.81%
Staff travel	376,891	165,831	211,060	44.00%
Office expenses	440,777	353,189	87,588	80.13%
Insurance expense	94,481	106,911	(12,430)	113.16%
Depreciation expense	404,507	381,189	23,318	94.24%
Utilities	838,400	820,725	17,675	97.89%
Facilities	175,879	69,177	106,702	39.33%
Prior year adjustment	-	(24,333)	24,333	0.00%
The year adjasanene				·
Total operating expenses	\$ 108,327,935	\$ 92,022,716	\$ 16,305,219	84.95%
			%.	
Change in net position	99,875	15,316,551	\$ (15,216,676)	
, and a second s				
Beginning net position	25,407,767	25,407,767		
Ending net position	\$ 25,507,642	\$ 40,724,318		

Statement of Revenue, Expenses and Change in Net Position October 1, 2021 through July 31, 2022

Percent of Year is 83.33%								•	40.41			SIID Block Grant	V Grant	NAME OF TAXABLE PARTY.		Totals	<u> </u>	
	Special	Specialty Services			Healthy Michigan	ichigan		Ī	ILISIII		September 1	SOD BIOC	Tip in	The state of the s				
	OLY.	TOTY	YTD Totals	Α.	AT)	YTD Totals	S	TTD	٨	YTD Totals	٨	AT)	E	YTD Totals	OT.	YTD Totals	rtals	
	Budget	7/31	7/31/22	Bu	Budget	7/31/22		Budget		7/31/22	Buk	Budget	7/3	7/31/22	Budget	7/31/22	77	Variance
									•									
Operating revenue																		
Medicaid:													,			4	000	000
Traditional Capitation	\$ 52,754,780	\$	58,451,800	\$		\$,		s		s		s		\$ 52,754,780	s	58,451,800	070'/69'5
Healthy Michigan Capitation	•		10	ω)	8,367,305	9,751,774	74	•				•			8,367,305		9,751,774	1,384,469
Aution Capitation	•							5,395,316		4,924,848		•		•	5,395,316		4,924,848	(470,467)
Sottlement Estimate	5 293 271	(14	(14,888,496)	4	(4.611.648)	(6,631,607)	(205)	(437,853)	_	51,347		r		(93,298)	243,770	_	21,562,054)	(21,805,824)
Settlement Estimate	365 833	į	383 755				,	•				٠		•	365,833		383,755	17,921
CIION Plack Great			,				,	•		•		93,298		93,298	93,298		93,298	0
SOD BIOCK CIRIL																		
Total president revenue	\$ 58.413.884	\$ 43	43.947.059	3	3,755,657	\$ 3,120,167		\$ 4,957,463	s	4,976,195	\$	93,298	\$	(0)	\$ 67,220,302	2 \$ 52,043,421	- 1	\$ (15,176,881)
Otal Operating Comment					:	l												
Operating expenses											7		0.			•		1000
Youth Programs	\$ 5,364,551	\$	2,321,668	s	,	\$		\$ 4,428,945	s	4,726,579	s		S	•	\$ 9,793,496	v	1,048,247	(2,/45,249)
MIA Programs	18,342,527	12	12,481,681	m	3,070,910	2,855,207	207			1				•	21,413,437	000 20	15,336,888	(6,076,549)
DA Programs	26.096.889	26	26.365.104		242,959	31,132	132			•		1		•	26,339,848	26	26,396,236	56,388
Integrated Health Clinic	2.382.381		574,126		41,395	77,313	313	٠		•				•	2,423,776		651,439	(1,772,337)
Administration	6,227,536	.7	2,204,480		400,393	156,514		\$ 528,518		249,617		•		•	7,156,447		2,610,611	(4,545,836)
Homeless Shelter			,		10		•			1		3		•				E
Non-DCH Activity Expenditures	1		•		•		1)		1					•	
Total operating expenses	\$ 58,413,884 \$		43,947,059	\$ 3	3,755,657	\$ 3,120,166	- 1	\$ 4,957,463	S	4,976,196	s	•	s		\$ 67,127,004	S	52,043,421	\$ (15,083,583)
	c		c		0		0	(0)	=	0		93,298		0)	\$ 93,298	86	0	
Change in net position	>		>		2		,	•										

Statement of Revenue, Expenses and Change in Net Position October 1, 2021 through July 31, 2022
Percent of Year is 83.33%

reicell of feat is 63.3370		Designation of the last					The same of the sa	Section of the last								
	State General	enera	Fund		8	ССВНС			Other Funding Sources	g Sources			lotals	S		
	YTD		YTD Totals		YTD		YTD Totals 7/31/22		YTD	YTD Totals 7/31/22		YTD Budget	YTD Totals 7/31/22	tals 22	Variance	
	5								•							
Operating revenue	20000		2 100 702	0	,	v	•	v	,		v	3 043 851	\$ 3.18	3.188.792 \$	144.941	11
General Fund	5 5,045,851	^	2,100,/37			7		}		·	}	100000				! (
Projected GF Carryforward	144,943			,	1		•		ï	•		144,943		r	(144,943)	(5)
CCBHC Demonstration	1				ı		33,064,251		1	1		ì	33,064,251	4,251	33,064,251	51
Other Federal and State Grants	•			1	•		î		18,119,935	16,879,100		18,119,935	16,87	16,879,100	(1,240,835)	32)
Farned Revenue	t				ļ		1		1,142,867	820,261		1,142,867	82	820,261	(322,606)	(90
COER Revenue	1				1		1		23,458	7,231		23,458		7,231	(16,227)	27)
10000	•			ï	•		•		56,250	42,675		56,250	4	42,675	(13,575)	75)
Compty Allocation	1			,	1		7		1,292,000	1,292,000		1,292,000	1,29	1,292,000		1
Local Reventie	•				1		•		8,333	1,459		8,333		1,459	(6,874)	74)
Restricted Interest	•			,	1		X		1,458	77		1,458		11	(1,382)	32)
Transfer from GF	,			ı	•		•		1	2,397,687			2,39	2,397,687	2,397,687	87
Settlement Bevenue (Expense)	(888'969)			,			•		ı	r		(888'969)		•	696,888	88
	3 701 005	v	2 188 707	۷ ا	,	"	33 064 251	٧.	20 644 302	\$ 21.440.490	٧.	23.136.207	\$ 57.69	57.693.533	\$ 34,557,326	56
lotal operating revenue		i		¦ .		}				1			1	i	1	ı
Operating expenses											1	,				
Youth Programs	\$ 199,786	s	89,572	2 \$	3	s	1,695,007	s	•		S	199,786	\$ 1,78		5 1,584,793	93
MIA Programs	1,353,015		434,063	m	٠		902'066'9		764,551	544,754		2,117,566	7,96	7,969,523	5,851,957	27
IDDA Programs	242,798		79,740	0	1		1,633,963		127,453	143,196		370,251	1,85	1,856,899	1,486,648	48
Integrated Health Clinic	7.028		48.100	0	•		2,514,805		,	•		7,028	2,56	2,562,905	2,555,877	1
DCO Contracts				9	1		4,516,699		•	•		i	4,51	4,516,699	4,516,699	66
Other Coderal and State Grants	•				1		•		17,635,473	7,836,438		17,635,473	7,83	7,836,438	(9,799,035)	35)
CERA Grant	i				•		ľ		î.	10,306,682		ŕ	10,30	10,306,682	10,306,682	82
HIID Grants	•				1		1		0	844,163			84	844,163	844,163	93
Managed Care Administration	215.112	-	28,871	⊣	1		916,338		1,219,070	26,787		1,434,182	97	971,997	(462,186)	(98
Homeless Shelter	. '						•		231,377	289,504		231,377	28	289,504	58,127	27
Transfer from GF	,		2,397,687	7	1		,		ī	•		·	2,39	2,397,687	2,397,687	87
Local match expense	•			·	ı		1		1,033,455	974,908		1,033,455	97	974,908	(58,547)	47)
Prior vear adjustment	•			ı	,		ı		•	(24,333)		ř	(2	(24,333)	(24,333)	33)
Non-DCH Activity Expenditures					•		1		117,158	89,332		117,158	80	89,332	(27,826)	26)
Total operating expenses	\$ 2,017,740 \$		3,078,033	× «		⋄	18,267,519	₩	21,128,536	\$ 21,031,431	- ♦	23,146,276	\$ 42,37	42,376,982	19,230,706	9
				20							4	10000	ŗ	i.	, , , , ,	,
Change in net position	474,165		110,759	6			14,796,733		(484,234)	409,059	S	(10,068)	15,31	15,316,551	15,326,619	2

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October 1, 2021 through July 31, 2022 Percent of Year is 83.33%

בורכוור כו וכמו וז ססיסטים								
		ССВНС		ССВНС		ССВНС		ССВНС
	Σ	Medicaid	Ĭ	Healthy MI	8	Non-Medicaid		YTD Totals
Onorating rovonile								
Operating	↔	5,870,040	\$	ľ	Ŷ	ı	Ŷ	5,870,040
Remaining CCBHC revenue due	.	21,624,370		5,569,842		1		27,194,212
Total CCBHC Revenue (PPS-1 of \$445.73 x encounters)	\$ 2	7,494,409	Ş	\$ 27,494,409 \$ 5,569,842 \$	↔	•	Ş	\$ 33,064,251
Operating expenses								
Internal services	\$	\$ 10,761,162	φ.	2,180,006	Ş	809,652	ᠰ	\$ 13,750,819
DCO Contracts		3,534,694		716,061		265,944		4,516,699
Total operating expenses	\$	14,295,855	\$	2,896,067	\$	1,075,596	\$	18,267,519
Operating change in net position	1	13,198,554		2,673,775		(1,075,596)		14,796,733
Reclassification to cover Non-Medicaid		(1,075,596)		t		1,075,596		,
Total change in net position		12,122,958	٠	2,673,775		1		

YOUTH COMMUNITY INPATIENT SERVICES Report Period: October 1st, 2021 through July 31st, 2022

				UTILIZA	ATION C	UTILIZATION COMPARISONS FY 21/22	Y 21/22		
	FY 20	FY 20/21 Actual	FY 21	FY 21/22 Budget	FY 2	FY 21/22 Actual	Days Difference	Cost Difference	Cost
							Favorable	Favorable	Favorable
MONTH	Days	Dollars	Days	Dollars	Days	Dollars	(Unfavorable)	(Unfavorable)	(Unfavorable)
OCTOBER	49	\$51,109	23	\$19,776	22	\$54,045	(32)	(\$34,269)	(\$34,269)
NOVEMBER	29	\$64,640	23	\$19,776	7	\$2,688	16	\$12,088	(\$22,181)
DECEMBER	27	\$24,571	23	\$19,776	29	\$25,836	(9)	(\$6,060)	(\$28,241)
JANUARY	33	\$7,131	23	\$19,776	37	\$34,540	(14)	(\$14,764)	(\$43,005)
FEBRUARY	6	\$8,714	23	\$19,776	73	\$72,274	(20)	(\$52,498)	(\$95,503)
MARCH	41	\$42,617	23	\$19,776	45	\$44,186	(22)	(\$24,410)	(\$119,913)
APRIL	22	\$22,022	23	\$19,776	86	\$88,237	(75)	(\$68,461)	(\$188,374)
MAY	29	\$7,544	23	\$19,776	54	\$45,919	(31)	(\$26,143)	(\$214,517)
JUNE	23	\$25,540	23	\$19,776	74	\$67,193	(51)	(\$47,417)	(\$261,934)
JULY	18	\$16,614	23	\$19,776	26	\$27,928	(3)	(\$8,152)	(\$270,086)
AUGUST	22	\$22,523	23	\$19,776					
SEPTEMBER	29	\$64,966	23	\$19,776					
TOTALS	407	\$357,991	274	\$237,312	498	\$467,846	(268)	(\$270,086)	
MONTHI Y AVERAGES	34		23		50				
GROSS ANNUAL COST		\$357,991		\$237,312		\$467,846		(\$270,086)	

Favorable/(Unfavorable) by Funding Source:

	(279,914)	9,828	(270,086)
iding source:	Medicaid	General Fund	Total

MI ADULT COMMUNITY INPATIENT SERVICES Report Period: October 1st, 2021 through July 31st, 2022

				UTIL	IZATION	UTILIZATION COMPARISONS FY 21/22	NS FY 21/22		
	FY 20	FY 20/21 Actual	FY 21/	FY 21/22 Budget	FY 21/	FY 21/22 Actual	Days Difference	Cost Difference	Cost YTD
							Favorable	Favorable	Favorable
MONTH	Days	Dollars	Days	Dollars	Days	Dollars	(Unfavorable)	(Unfavorable)	(Unfavorable)
OCTOBER	433	\$409,023	395	\$373,807	451	\$439,277	(99)	(\$65,471)	(\$65,471)
NOVEMBER	420	\$401,675	395	\$373,807	438	\$425,335	(43)	(\$51,528)	(\$116,999)
DECEMBER	461	\$440,721	395	\$373,807	503	\$489,863	(108)	(\$116,057)	(\$233,056)
JANUARY	499	\$478,423	395	\$373,807	493	\$477,867	(86)	(\$104,060)	(\$337,116)
FEBRUARY	459	\$439,718	395	\$373,807	406	\$394,694	(11)	(\$20,888)	(\$358,004)
MARCH	370	\$354,552	395	\$373,807	515	\$500,263	(120)	(\$126,457)	(\$484,461)
APRIL	410	\$392,870	395	\$373,807	442	\$429,586	(47)	(\$22,779)	(\$540,240)
MAY	495	\$474,875	395	\$373,807	450	\$437,305	(55)	(\$63,499)	(\$603,739)
JUNE	487	\$467,958	395	\$373,807	523	\$508,312	(128)	(\$134,506)	(\$738,245)
JULY	473	\$453,758	395	\$373,807	558	\$542,730	(163)	(\$168,924)	(\$907,169)
AUGUST	510	\$489,650	395	\$373,807					
SEPTEMBER	521	\$501,420	395	\$373,807					
TOTALS	5,538	\$5,304,644	4,745	\$4,485,679	4,779	\$4,645,234	(829)	(\$907,169)	
MONTHLY AVERAGES	462		395		478				
GROSS ANNUAL COST		\$5,304,644		4,485,679		\$4,645,234		(\$907,169)	

Favorable/(Unfavorable) by Funding Source:

(1,040,584)	221,950	(88,535)	(907,169)
Medicaid	General Fund	Healthy MI	Total

Integrated Services of Kalamazoo COMMUNITY LIVING SUPPORTS (S.R. & SIP), PERSONAL CARE & CRISIS RESIDENTIAL ALL POPULATIONS Report Period: October 1st, 2021 through July 31st, 2022

YOUTH POPULATION (SED/DD)

				ACTUAL YEAR TO DATE	R TO DATE	
		Avg.		Days		Favorable
		Daily	No.	ο	ISK	(Unfavorable)
	Month	Rate	Served	Service	Cost	Budget
PC/CLS(S.R.)	July	\$1,456	-	304	\$442,696	(\$217,525)
CRISIS RES.	July	\$670	2	4	\$2,680	\$48,279
CLS (SIP)	July	A			0\$	
			8	308	445,376	(\$169,246)

MI ADULT POPULATION

			,	ACTUAL YEAR TO DATE	AR TO DATE	
		Avg.		Days		Favorable
		Daily	No.	οę	ISK	(Unfavorable)
	Month	Rate	Served	Service	Cost	Budget
PC/CLS(S.R.)	July	\$220	166	42,345	\$9,319,217	(\$38,931)
CRISIS RES.	July	\$436	52	865	\$376,749	\$287,095
CLS (SIP)	July	AN	64		\$464,595	(\$217,923)
TOTAL			282	43,210	\$10,160,561	\$30,242

Supported Independent Program (SIP)-more independent setting where Personal Care and Community Living Supports occur.

Specialized Residential (S.R.)-Licensed setting where Personal Care

and Community Living Supports occur.

Community Living Supports (CLS)-services to increase or maintain personal self-sufficiency with a goal of community inclusion,

independence and productivity.

Personal Care (P.C.)-hands on of daily personal activities such as laundry, feeding, bathing, etc.

IDD ADULT POPULATION

- 1			ACTUAL YEA	ACTUAL YEAR TO DATE	L
Avg.	6		Days		Favorable
Daily	<u>></u>	No.	of	ISK	(Unfavorable)
Rate	ø	Served	Service	Cost	Budget
\$2	\$249	216	55,823	\$13,913,072	\$1,123,720
	\$0	0	0	0\$	\$9,185
NA		206	0	\$9,017,811	(\$2,492,551)
	Г	422	55,823	\$22,930,883	(\$1,359,646)

TOTAL ALL POPULATIONS

5 3 3 3 3	Month July July	Avg. Daily Rate \$235	No. Served 383 54 54	Days of Service 98,472	Days ISK of ISK Service Cost 98,472 \$23,674,985 869 \$379,429 \$9,482,406	Eavorable (Unfavorable) Budget \$867,265 \$344,559 (\$2,710,474]
) I			707	99.341	\$33,536,820	(\$1,498,650

Nedicaid	IWH		GF		Other		Total
290,441	\$ 118,868	4	457,957	s	•	\$	867,266
335,915	\$ (76,377)	4	85,021	s		8	344,559
,714,655)	\$ 4,039	4	15,884	49	(15,743)	63	(2,710,475
088,299)	\$ 46,530	63	558,862	4	(15,743)	S	(1,498,650

8/16/2022 7:49 AM



VII.c.

Community • Independence • Empowerment

Integrated Services of Kalamazoo

MOTION

Subject:

July 2022 Disbursements

Meeting Date:

August 22, 2022

Approval Date:

Prepared by:

Charlotte Bowser

August 22, 2022

Recommended Motion:

"Based on the Board Finance meeting review, I move that ISK approve the July 2022 vendor disbursements of \$8,112,955.12"

Summary of Request:

As per the July 2022 Vendor Check Register Report dated 8/11/2022 that includes checks issued from 07/01/2022 to 7/31/2022.

I affirm that all payments identified in the monthly summary above are for previously appropriated amounts.

Staff:

C. Bowser, Finance Director

Date of Board

Consideration: August 22, 2022