

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** 

### **AGENDA**

INTEGRATED Services of Kalamazoo BOARD OF DIRECTORS HAS SCHEDULED ITS MEETING FOR MONDAY, <u>September 26, 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. BUDGET PUBLIC HEARING FY2022/2023 MOTION/ROLL CALL
- V. RECIPIENT RIGHTS
  - a. Recipient Rights Monthly Reports
- VI. PROGRAM SERVICES REPORT/VERBAL

  Due to the Budget Public Hearing the Program Services Report will be presented at the meeting on October 24, 2022.
- VII. CONSENT CALENDAR/VERBAL MOTION
  - a. Minutes
  - b. Staff Treatment (Policy & Report)
  - c. Compensation & Benefits (Policy & Report)
- VIII. FINANCIAL REPORTS
  - a. Financial Condition Report
  - b. Utilization Report
  - c. August Disbursements/MOTION
  - d. Budget Amendment #2/MOTION
- IX. CHIEF EXECUTIVE OFFICER REPORT/VERBAL
  - a. CEO Report
- X. CITIZEN TIME
- XI. <u>BOARD MEMBER TIME</u>
  - a. SWMBH Updates/Erik Krogh
- XII. ADJOURNMENT



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Administrative Services 2030 Portage Street Kalamazoo, MI 49001 (269) 553-8000

**Access Center** 

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

Integrated Health & Psychiatric Services 615 East Crosstown Pkwy Kalamazoo, MI 49001 Adults: (269) 553-7037 Youth: (269) 553-7078

Office of Recipient Rights 2030 Portage Street Kalamazoo, MI 49001 (269) 364-6920

Services for Adults with Mental Illness 2030 Portage Street Kalamazoo, MI 49001 (269) 553-8000 (888) 373-6200

Services for Adults with Intellectual and Developmental Disabilities 418 West Kalamazoo Ave Kalamazoo, MI 49007 (269) 553-8060 MI Relay Center: 711

Services for Youth and Families 418 West Kalamazoo Ave Kalamazoo, MI 49007 (269) 553-7120

Substance Use Disorder Services (800) 781-0353

**Training** 2030 Portage Street Kalamazoo, MI 49001 (269) 364-6952

### PUBLIC NOTICE

The Board of Directors of Integrated Services of Kalamazoo will hold their FY2022/2023 Budget Public Hearing on the following:

Date Posted:

September 12, 2022

Project Name:

Integrated Services of Kalamazoo, Board of Directors, FY2022/2023

**Budget Public Hearing** 

Location:

610 S. Burdick Street, Kalamazoo, MI., 49007

(2<sup>nd</sup> Floor – Board Conference Room)

Date/Time:

September 26, 2022 @ 4:00PM

To mitigate the spread of COVID-19 and its variants, and to protect the public health by limiting in-person contact, ISK (Integrated Services of Kalamazoo) will conduct its board meeting by offering two options: Microsoft TEAMS or in-person. By using these two options to conduct this meeting, we will meet the requirements of the Open Meetings Act.

All interested persons may join the remote meeting through the following procedures:

### Microsoft Teams meeting

+1 616-272-5624 United States/Conference ID: 870 664 203#

Once you have joined the meeting, please disable your camera, and silence your microphone.





ISK welcomes and encourages persons to supply input or ask questions on any board business. To communicate with the ISK Board Members or if you have specific needs to take part in the meetings held by the Board. Please contact Demeta J. Wallace at least three (3) business days prior to the scheduled meeting date at <a href="Dwallace@iskzoo.org">Dwallace@iskzoo.org</a> or 269-553-8000.

The ISK Board packet is posted monthly on our website @ www.iskzoo.org.

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

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

	August 2022	FY 21-22	August 2021	FY 20-21
Total # of Complaints Closed	37	397	41	343
Total # of Allegations Closed	72	668	74	597
Total # of Allegations Substantiated	18	200	25	192

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	August 2022	0.5000 0.5000 0.5000 0.5000 0.5000	August 2021	
Category	TOTAL	SUBSTANTIATED	TOTAL	SUBSTANTIATED
Consumer Safety	7	0	2	2
Dignity/Respect of Consumer	10	3	12	3
Treatment Issues/Suitable Services (Including Person Centered Planning)	12	1	14	6
Abuse I	1	0	0	0
Abuse II	5	2	7	2
Abuse III	12	4	7	2
Neglect I	0	0	0	0
Neglect II		1	2	2
Neglect III	7	4	8	5
	55	15	52	22

APPEALS	August 2022	FY 21-22	August 2021	FY 20-21
Uphold Investigative Findings & Plan of Action	1	3	1	7
Return Investigation to ORR;	0	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 September 2022

Re: August 2022 Abuse/Neglect Violations

### <u>August</u>

### **Abuse Violations**

- There were two substantiated Abuse II violations in August 2022.
  - The remedial actions for these violations were Employment Termination (2).

The 2 violations occurred at different agencies.

- There were four substantiated Abuse III violations in August 2022.
  - O The remedial actions for these violations were Employment Terminations (3), Training (1), and Written Reprimand (1).

Two of the violations occurred at the same agency but different program sites. The other 2 were from different agencies.

### Neglect Violations

- There was one substantiated Neglect II violation in August 2022.
  - O The remedial action for this violation was Employment Termination (1), and Training (1). It was a Neglect II, Failure to Report violation.
- There were four substantiated Neglect III violations in August 2022.
  - O The remedial actions for these violations Training (6), and Written Reprimand (6). Two were Neglect III, Failure to Report violations.

Three of the violations occurred at the same agency. Two of these 3 violations occurred at the same program site.



INTEGRATED Services of Kalamazoo (ISK) Board of Director's Meeting August 22, 2022 VII.a.

ISK Board Member	<u>Board</u>	Declaration of Location	Board
	Members	City/County	Members
	PRESENT		ABSENT
Karen Longanecker, CHAIR	X	Kalamazoo/Kalamazoo	
Michael Seals, VICE CHAIR	X	Kalamazoo/Kalamazoo	
Nkenge Bergan	X	Kalamazoo/Kalamazoo	
Sarah Carmany			X
Patrick Dolly			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	
Michael Weekley			X
Veronica McKissack, COMMISSIONER			X

### ISK - KCMHSAS Staff Present:

Jeff Patton, CHIEF EXECUTIVE OFFICER

Roann Bonney

Wanda Brown

Sheila Hibbs

Beth Ann Meints

Amy Rottman

Michael Schlack, CORPORATE COUNSEL

Dianne Shaffer

Ed Sova

Lisa Brannan

Kathy Wait

Alecia Pollard

Demeta Wallace

### ISK - KCMHSAS Staff Absent:

Charlotte Bowser

Kathy Lentz

Pat Weighman

### **Providers**:

Dr. Shenetta Coleman

**CEO** 

Lori Anderson Director of Quality

Residential

Assurance

Opportunities, Inc.

Community Living

Options

### Call to Order:

Chair Longanecker welcomed all in attendance to the August 22, 2022, INTEGRATED Services of Kalamazoo Board meeting. The meeting was called to order at 4:00PM.

Services of Kalamazoo

### Agenda:

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

### Citizen Time:

No citizens came forth.

### **Recipient Rights Monthly Reports:**

Roann Bonney, ISK, ORR Director, presented the complaints/allegations closed in June & July 2022.

### <u> Iune</u>

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

All the ORR case information is forwarded to the ISK Population Directors monthly for any tracking/trending of the RR information in their areas of authority \* (Agencies can include ISK).

### <u>July</u>

### Abuse Violations:

- There were two substantiated Abuse III violations in July 2022.
  - o 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.
  - o 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.

All the ORR case information is forwarded to the ISK Population Directors monthly for any tracking/trending of the RR information in their areas of authority \* (Agencies can include ISK).

Recipient Rights SEMI-Annual Report:

Roann Bonney, ISK, ORR Director, presented the Office of Recipient Rights SEMI-ANNUAL Report for October 1, 2021-March 31, 2022.

This report deals with the status of recipient rights and the data is reported by type/category about the rights of the recipient's receiving services from ISK.

To review the entire Recipient Rights SEMI-ANNUAL Report, please contact Deborah Lanning, ISK, Administrative Assistant, Office of Recipient Rights by email @ DLanning@iskzoo.org or by phone (269)364-6920.

### **Program Services Report:**

Youth and Family Department

Program Highlight: SAMHSA System of Care Grant

Presented by: Patricia J. Weighman, LMSW/ACSW, ISK, Senior Executive, Youth & Families

Background:

Integrated Services 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 2<sup>nd</sup> 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."

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 two 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.





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.

> VI.a. Minutes

VI.b. Budgeting (Policy)

Finance (Policy) VI.c.

VI.d. Asset Protection (Policy & Report)

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

Financial Condition Report:

Amy Rottman, ISK, Chief Financial Officer, presented the Financial Condition report for the period ending July 31, 2022.

### **INTEGRATED SERVICES OF KALAMAZOO**

### Statement of Net Position July 31, 2022

		iγ 2021 audited)	July 2022
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			
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		-	•
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%

	Amended 2022 BUDGET	YTD Totals 7/31/22	Remaining Budget	Percent of Budget - YTD
Operating revenue				
Medicald:				
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 Captilation	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	-	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%
Other grant revenue	21,026,249	16,879,100	4,147,149	80.28%
Other earned contracts	1,371,440	820,261	551,179	59.81%
COFR	28,150	7,231	20,919	25,69%
Interest	69,250	42,752	26,498	61.74%
Local revenue	10,000	1,459	8,541	0.00%
Total operating revenue	\$ 108,427,810	\$ 107,339,267	\$ 1,088,543	99.00%
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%
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)	
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 3, 2021 through July 31, 2022

Percent of Year Is 83.33%	042																				
		Specia	ity S	erykes		Healthy	Mkl	higan		Aut	ism	. ".		SUD Blo	ck Gra	nt		Personal C	٠.,	Totals	
		YTD Budget		YTO Totals 7/31/22		YTO Budget	47	YTD Totals 7/31/22	1	YTD Budget	1	YTO Totals 7/31/22	· i	YTO Budget		D Totals /31/22		YTD Budget	- 5	YTO Totals . 7/31/22	Variance
Operating revenue  Medicald:																					
Traditional Capitation	\$	52,754,780	\$	58,451,800	\$		\$	•	\$	•	\$		\$	•	\$		\$	57,754,780	\$	58,451,800	\$ 5,697,020
Healthy Michigan Capitation						8,367,305		9,751,774				•		•		-		8,367,305		9,751,774	1,384,469
Autism Capitation				•		•		•		5,395,316		4,924,848		•		•		5,395,316		4,924,848	(470,467)
Settlement Estimate		5,293,271		(14,888,496)		(4,611,648)		(5,631,607)		(437,853)		51,347		•		(93,298)		243,770		{21,562,054}	(21,805,824)
Client Fees		365,833		383,755						•				•		•		365,833		383,755	17,921
SUD Block Grant						,								93,298		93,298		93,298		93,298	0
Total operating revenue	\$	58,413,884	<u>\$</u>	43,947,059	\$	3,755,657	\$	3,120,167	\$	4,957,463	<u>\$</u>	4,976,195	\$	93,298	\$	[0]	\$	67,220,302	\$	\$2,043,421	\$ (15,176,881)
Operating expenses																					
Youth Programs	Ś	5,364,551	4	2,321,668	5		s		\$	4,428,945	5	4,726,579	5		s		5	9,793,496	s	7,048,247	(2,745,249)
MIA Programs	•	18,342,527	•	12,481,681	٠	3,070,910	•	2,855,207	•	4,100,1-0	٠	4,124,470	٠		•		Ť	21,413,437	•	15,336,888	(6,076,549)
IDOA Programs		26,095,889		26,365,104		242,959		31,132										26,339,848		26,396,236	\$5,388
Integrated Health Clinic		2,382,381		574,126		41,395		77,313										2,423,776		651,439	(1,772,337)
Administration		6,227,536		2,204,480		400,393		156,514	Ś	528,518		249,617						7,156,447		2,610,611	(4,545,836)
Homeless Shelter		.,,		.,																	
Non-DCH Activity Expenditures							_					7									
Total operating expenses	\$	58,413,884	5	43,947,059	\$	3,755,657	\$	3,120,166	<u> </u>	4,957,463	\$	4,976,196	\$		\$		\$	67,127,004	\$	52,043,421	\$ (15,083,583)
Change in net position		0		0		(0)		0		(0)		(0)		93,298		{0}	\$	93,298		0	

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

Percent of Year is 83,33%	•	_														
	State	Gener	al Fund	11.	CCI	внс	18 47 - 27	Other Fund	ung	Sources		111111	1	Totals	2	
	YTO Budget		YTD Totals 7/31/22		YTD Budget	: 7	YTD Totals 7/31/22	YTD Budget		YTD Totals 7/31/22		YTD Budget		7/31/22		Variance
Operating revenue																
General Fund	\$ 3,043,85		3,188,792	\$		\$	-	\$	\$		\$	3,043,851	\$	3,188,792	\$	_ ,
Projected GF Carrylorward	144,94	3	-		•		-	-		-		144,943				(144,943)
CCBHC Demonstration			-		•		33,064,251	•		-		-		33,064,251		33,064,251
Other Federal and State Grants			•		-		-	18,119,935		16,879,100		18,119,935		16,879,100		(1,240,835)
Earned Revenue			-		-			1,142,867		820,261		1,142,867		820,251		(322,605)
COFR Revenue								23,458		7,231		23,458		7,231		(16,227)
Interest			-		٠		•	55,250		42,675		56,250		42,675		(13,575)
County Allocation					-			1,292,000		1,292,000		1,292,000		1,292,000		•
Local Revenue			-				-	8,333		1,459		8,333		1,459		(6,874)
Restricted Interest								1,458		77		1,45B		77		(1,382)
Transfer from GF								-		2,397,687		-		2,397,687		2,397,687
Settlement Revenue (Expense)	(696,88	8)			<u> </u>			 			_	(696,888)				696,888
Total operating revenue	\$ 2,491,90	5 5	3,188,792	\$	-	<u>\$</u>	33,064,251	\$ 20,644,302	5	21,440,490	\$	23,136,207	_\$_	57,693,533	<u>\$</u>	34,557,326
Operating expenses																
Youth Programs	\$ 199,78	6 5	89,572	\$		\$	1,695,007	\$	\$	-	\$	199,786	\$	1,784,579	\$	1,584,793
MIA Programs	1,353,01	5	434,063		-		6,990,706	764,551		544,754		2,117,566		7,969,523		5,851,957
IDDA Programs	242,79	8	79,740				1,633,963	127,453		143,196		370,251		1,856,899		1,486,648
Integrated Health Clinic	7,02		48,100				2,514,805					7,028		2,562,905		2,555,877
DCO Contracts							4,516,699							4,516,699		4,516,699
Other Federal and State Grants								17,635,473		7,836,438		17,635,473		7,836,43B		(9,799,035)
CERA Grant										10,306,682				10,306,682		10,306,682
HUD Grants	_							_		844,163				844,163		844,163
Managed Care Administration	215,11	2	28,871				916,338	1,219,070		26,787		1,434,182		971,997		(452,186)
Homeless Shelter		-					,	231,377		289,504		231,377		289,504		58,127
Transfer from GF	_		2,397,687					200,000						2,397,687		2,397,687
Local match expense			2,737,001		_			1,033,455		974,908		1,033,455		974,908		(58,547)
Prior year adjustment								1,010,400		(24,333)		.,055,455		(24,333)		(24,333)
Non-DCH Activity Expenditures			:		<u>:</u>			 117,158		89,332	_	117,158		89,332		[27,826]
Total operating expenses	\$ 2,017,74	o \$	3,078,033	\$	*	\$	18,267,519	\$ 21,128,536	\$	21,031,431	\$	23,146,276	\$	42,376,982		19,230,706
Change in net position	474,16	ş	110,759				14,796,733	(484,234)		409,059	\$	(10,068)		15,316,551		15,326,619

### ССВНС

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

		CCBHC Medicald		CCBHC Healthy MI	No	CCBHC on-Medicald	 CCBHC YTD Totals
Operating revenue							
Prepayment	\$	5,870,040	\$	-	\$	•	\$ 5,870,040
Remaining CCBHC revenue due		21,624,370		5,569,842		_	 27,194,212
Total CCBHC Revenue (PPS-1 of \$445.73 x encounters)	\$	27,494,409	\$	5,569,842	\$	*	\$ 33,064,251
Operating expenses							
Internal services	\$	10,761,162	\$	2,180,006	\$	809,652	\$ 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		13,198,554		2,673,775		(1,075,596)	14,796,733
Reclassification to cover Non-Medicaid	_	(1,075,596)		-		1,075,596	-
Total change in net position		12,122,958		2,673,775		7	

**Utilization Reports:** 

Kathy Wait, ISK, Accounting Manager, presented the Utilization Report for the period ending July 31, 2022.

Youth Community Inpatient Services is unfavorable by \$270,086

MI Adult Community Inpatient Services is at (829) days and unfavorable at \$907,169

Community Living Supports, Personal Care, and Crisis Residential is unfavorable at \$1,498,650.

**July Disbursements/MOTION:** 

Member Spears, "BASED ON THE BOARD FINANCE MEETING REVIEW, I MOVE THAT ISK APPROVE THE JULY 2022 VENDOR DISBURSEMENTS OF \$8,112,955.12." Supported by Member Guenther.

### MOTION PASSED.

Chief Executive Officer Report:

The Capital Improvement Bonds for the purpose of acquiring, constructing, furnishing and equipping the 18,000 square foot psychiatric clinic building at 615 East Crosstown Parkway, GREAT NEWS! has been paid in full.

The CCBHC and the plans to build the new 24-hour Behavioral Health Urgent Care and Access Center is moving along well.

Our Budget Public Hearing will take place at the next meeting on September 26th. It is imperative that the ISK Board of Directors are in attendance.

There was an excellent article in MLive about Lindsey O'Neil, ISK, Program Supervisor, about the collaboration between ISK and Public Safety for an innovative program where regular meetings are held to identify those individuals who have police contact but may need additional intervention for mental health support services. The CIT Program can help individuals to get connected to treatment and services and offer hope for recovery.

That concludes my report.

### Citizen Time:

No citizens came forth.

SWMBH (Southwest Michigan Behavioral Health) Updates/Erik Krogh.

They too are looking at regional market rates when it pertains to salaries. Their financial reports were correct along with the PIHP Administrative cost for region 4 which is costly. The 7th Annual Regional Healthcare Policy Forum: Working Together, will take place on Friday, October 7, 2022, from 8:30am-3:00pm at the Four Points by Sheraton Kalamazoo.

### Michael Seals:

On Monday, August 28th, Kalamazoo Public Schools will be back in session. The yellow buses will be back on the roads. Be watchful and mindful for the kiddos!

### <u> Melissa Woosley:</u>

I have taken part in the Kalamazoo Regional Citizens Police Academy with Lindsey O'Neil and the Power Group. These trainings are excellent and give you a broader look into the lives of Public Safety and those suffering from a mental illness or substance use.

### Nkenge Bergan:

"2022 Beyond the Backpack: School Readiness Fair Collaboration" on Saturday, August 13th from 11am-3pm at Bronson Park (Downtown Kalamazoo) was an AMAZING SUCCESS. Over 1100 students were served! We want to prepare our students in any way possible to make their return to school and the entire school year a SUCCESS! Be mindful of the school-zone and if you see students not in school give the gentle reminder that school is back in session.

Interim has removed from my job title at KVCC. Therefore, I am officially the Special Assistant to the Provost and Associate VP for Student Development Services.

### Michael Raphelson:

September is Suicide Prevention month. Gryphon Place 2\*I\*I helps those in conflict or crisis. The Civic Theatre will be doing a production of "Tuesdays with Morrie." Proceeds from opening night will be shared with Centrica Care Navigators.

Meeting ended at 5:25PM.

Demeta J. Wallace Administrative Coordinator INTEGRATED Services of Kalamazoo

### **BOARD POLICY V.02**

AREA:	Governance		
SECTION:	Executive Limitations	PAGE:	1 of 2
SUBJECT:		SUPERSEDES:	09/24/2012
	STAFF TREATMENT	REVISED:	09/27/2021

### PURPOSE/EXPLANATION

To define limitations of means regarding the treatment of staff.

### POLICY

- I. With respect to treatment of paid and volunteer staff, the Chief Executive Officer (CEO) may not cause or allow conditions which are unfair and undignified. Accordingly, he/she may not:
  - A. Operate without written personnel related policies and procedures that:
    - 1. Clarify personnel rules for staff.
    - 2. Provide guidance in the case of an emergency or disaster.
    - 3. Outline clear expectations that employees and candidates for employment may not be judged on other than their own job-relevant qualifications and/or job performance.
    - 4. Protect the right to ethical job-related dissent of employees and provide for effective handling of grievances.
    - 5. Protect against wrongful conditions.
    - 6. Protect health and safety.

### B. Fail to:

- 1. Acquaint staff with personnel related policy and procedure, and their rights under this policy.
- 2. Promote the recruitment and retention of personnel who reflect the cultural/ethnic diversity of the community/population served.
- 3. Provide recognition of personnel, promote employee satisfaction and demonstrate employee involvement in organizational decision making.
- 4. Ensure training and continuing development of all personnel to enhance individual and organizational performance.
- II. This policy will be monitored through internal mechanisms on an annual basis.

SUBJECT:

V.02 Staff Treatment V.02 Staff Treatment

Page:

2 of 2

CHIEF EXECUTIVE OFFICER

Jeff Patton

Chief Executive Officer

APPROVED

Karen Longanecker

Board Chair

### INTEGRATED SERVICES OF KALAMAZOO Compensation & Benefit Report September 26, 2022

### **Executive Limitation Policy:**

With respect to employment, compensation and benefits to employees, consultant, contract workers and volunteers, the Chief Executive Officer may not cause or allow jeopardy to fiscal integrity or public image.

### Accordingly, the Chief Executive Officer may not:

A. Change his or her own compensation and benefits.

Response: The Chief Executive Officer is compensated according to his negotiated contract with the Board. Further, he receives the same benefits as other employees of ISK. No change in the Executive Director's compensation outside of Board approval has occurred, nor has any benefit been changed except any that may have involved changes to all employees.

B. Promise or imply permanent or guaranteed employment.

Response: Specific personnel policies and procedures have been implemented to ensure that all employees are treated equally. The policies clearly set forth the conditions of employment; these include initial offers of employment and continued employment. Supervisors, the Chief Executive Officer and the Human Resource Department all work together to enforce these policies. There have been no promises or implications of permanent or guaranteed employment.

C. Establish current compensation and benefits that deviate materially from the geographic or professional market for the skills employed.

Response: A new salary schedule was implemented in December 2009 that was the result of an evaluation of each position, consultant input and market survey data. In October 2011, a market survey was conducted in conjunction with a consultant which resulted in market adjustments for positions that were identified as greater than 10% below market as well as a modest increase to the salary schedule. A market survey was conducted of key positions in 2012 and resultant salary adjustments were implemented in October 2012. Key positions continue to be reviewed and resulting recommendations for salary adjustments are made. Participation in and review of Community Mental Health salary survey occurs as they are conducted. In September 2016, a market survey was conducted in conjunction with a consultant which resulted in market adjustments for positions that were identified as greater than 10% below market as well as a 10% increase to the lower bands of the salary schedule and a 5% increase to the higher bands of the salary schedule and staff salaries were adjusted accordingly as needed. Also in 2016 a bonus program was developed for agency prescribers (Psychiatrists, Physician Assistants, Nurse Practitioners) and implemented in 2017. In 2017 ITS salaries were all reviewed and adjusted according to recommendations from a consultant. In FY 2018 identified positions were reviewed and resulting recommendations for salary adjustments were made for positions such as Registered Nurse and Supports Coordinator Assistant. In FY 2019 we evaluated Master's level clinician's in salary band C1, Clinical Supervisors and Contingent Direct Care Specialists. While we had some positions slated to be reviewed in FY 2020, the uncertainty that came with COVID-19 usurped that. The salary schedule was increased by 1% at the beginning of FY 2021.

Salary ranges were again increased by 1% at the beginning of FY2022. In May 2021 Master's level clinicians and clinical supervisors received a 9-10% market increase to make our wages more competitive. Agency Peer Family Support Partners and Direct Care Specialists moved up one salary band as well. For FY 2023, we focused on getting salaries more competitive. For retention purposes, we implemented the FY 2023 changes in August, 2022. We were able to provide staff with an 11% increase and increased the salary schedule by 10%. In addition, we moved the following positions up one salary grade: Med Clinic Receptionist, Supports Coordinator Assistants, Community Health Worker, Employment Specialist, Housing Coordinator, Nurse, clinical supervisors, some clinical and non-clinical managers and senior executives, Recipient Rights staff and some IT staff.

D. Establish or change pension benefits.

Response: We participate in the Kalamazoo County Retirement System and as such are bound by its terms and conditions. Quarterly meetings are held with the County to discuss and review the retirement system. Our belief is that the current retirement system is financially very strong and of great benefit to our employees.

### The Chief Executive Officer may not fail to:

A. Ensure education is offered to all staff at least every five (5) years on the pros and cons of opting out of Social Security and conducting a Straw vote after the completion of the education sessions. If the Straw Vote is greater than 50% to opt back into Social Security then an actual vote must be conducted.

Response: A Straw Vote was conducted on August 17, 2011. Only 17% of the eligible voters voted to go back into Social Security. Therefore, a sanctioned vote did not take place. A Straw Vote was conducted on August 11, 2016. Again, only 17% of the eligible voters voted to go back into Social Security. Therefore, a sanctioned vote did not take place. A Straw Vote was held on September 21, 2021. Only 6% of the eligible voters voted to go back into Social Security. Therefore, a sanctioned vote did not take place.

This policy will be monitored through internal and external mechanisms on an annual basis.

Response: The organization follows specific personnel policies pertaining to the status of employment and salary/benefit administration. Through annual bid solicitations on benefits and conducting periodic salary surveys, the organization strives to maintain a fair and competitive overall compensation and benefit package for all employees.

### **BOARD POLICY V.08**

AREA:	Governance		
SECTION:	Executive Limitations	PAGE:	1 of 1
CUDIDOT.	Construction of the Property of the Construction of the Constructi	SUPERSEDES:	09/24/2012
SUBJECT:	COMPENSATION AND BENEFITS	REVISED:	09/27/2021

### PURPOSE/EXPLANATION

To establish limitations of means regarding compensation and benefits.

### POLICY

- I. With respect to employment, compensation and benefits to employees, consultant, contract workers and volunteers, the Chief Executive Officer may not cause or allow jeopardy to fiscal integrity or public image. Accordingly:
  - A. He/she may not:
    - 1. Change his or her own compensation and benefits.
    - 2. Promise or imply permanent or guaranteed employment.
    - 3. Establish current compensation and benefits which deviate materially from the geographic or professional market for the skills employed.
    - 4. Establish or change pension benefits.
  - B. He/she may not fail to:

Ensure education is offered to all staff at least every five (5) years on the pros and cons of opting out of Social Security and conducting a Straw Vote after the completion of the education sessions. If the Straw Vote is greater than 50% to opt back into Social Security then an actual vote must be conducted.

II. This policy will be monitored through internal and/or external mechanisms on an annual basis.

CHIEF EXECUTIVE OFFICER

APPROVED

W Krongh

Jeff Patton/Chief Executive Officer

Board Chair

### Staff Treatment Report September 26, 2022

### **Executive Limitation Policy:**

With respect to treatment of paid and volunteer staff, the Chief Executive Officer may not cause or allow conditions which are unfair and undignified.

### Accordingly, the Chief Executive Officer may not:

- A. Operate without written personnel related policies and procedures that:
  - 1. Clarify personnel rules for staff.
  - 2. Provide guidance in the case of an emergency or disaster.
  - 3. Outline clear expectations that employees and candidates for employment may not be judged on other than their own job-relevant qualifications and/or job performance.
  - 4. Protect the right to ethical job-related dissent of employees and provide for effective handling of grievances.
  - 5. Protect against wrongful conditions.
  - 6. Protect health and safety.

Response: Policies and procedures exist and guide all formal personnel action processes. Department heads, supervisors and employees are aware of these policies. The Human Resource staff provides orientation for new employees, offers training on specific issues and meets with various staff groups. Personnel policies and procedures have been reviewed throughout the year and several have been revised where needed.

The agency experienced power outages in 2014 during which the Chief Executive Officer provided guidance and which led to additional disaster planning/preparedness within the organization. The agency's Organizational Continuity Plan was reviewed and revised by the Senior Executive Team in the fall of 2016. The plan was reviewed again in the spring of 2019. The Organizational Continuity Plan was again reviewed by senior Executive Team in summer of 2022.

Reaching the limits of the in-house maintained annual performance review system, Directive Supervision program, the agency switched to a cloud-based performance development system in 2017. ISK now uses the SilkRoad performance appraisal tool. We have retained a core competency and value-based evaluation system in this transition.

The Employee Code of Ethics (formerly Ethical Code of Conduct) policy and procedure was originally approved in April 2000 and has been updated in March 2003, May 2004, March 2006, June 2006, January 2007, June 2007, April 2008, May 2010, November 2011, August 2012, November 2014, April 2016, June 2016, December 2018, November 2019, and July 2021 upholding employee dignity and allowing employees to express an ethical dissent. There have been no requests for ethical dissent over the past year.

There were no grievances submitted against the Chief Executive Officer this reporting period.

### B. Fail to:

- 1. Acquaint staff with personnel related policy and procedure and their rights under this policy.
- 2. Promote the recruitment and retention of personnel who reflect the cultural/ethnic diversity of the community/population served.
- 3. Provide recognition of personnel, promote employee satisfaction, and demonstrate employee involvement in organizational decision making.
- 4. Ensure training and continuing development of all personnel to enhance individual and organizational performance.

Response: New employees receive orientation, which includes covering information on the personnel policies and procedures. Also, all personnel policies and procedures are provided to staff via the computer network (on-line) and updated as revisions are made. All employees are required to sign a document verifying that they are aware of these policies and procedures and have had an opportunity to read them. Annually employees review the Employee Code of Ethics policy and sign off that they have done so.

Language in job postings to encourage culturally diverse candidates to apply was revised in 2011 based on recommendations from the Manager of Cultural and Linguistic Competency. All job postings that are advertised outside of the organization and beyond free posting resources are placed in the New Opinion newspaper and written in Spanish. During the summer of 2016, we began running a regular ad in the New Opinion newspaper directing those interested in employment with ISK to view our current offerings on our application website ensuring that ISK would have continuous exposure in this publication. Language to encourage culturally diverse candidates to apply was also reviewed and revised in 2016. Job posting language was again reviewed and revised to attract a more diverse applicant pool in 2019. Historical and current demographic data is reviewed annually with ISK leadership.

The organization offers opportunities for not only employee recognition and satisfaction but also training and development. ISK established a Morale Leadership Team and a staff recognition program ("You Make a Difference" cards) in 2005. The staff recognition program has continued, and the Committee has morphed into a Boosting All Agency Morale (BAAM) Committee. Employee surveys have been completed annually since 2006, within these surveys employee satisfaction is garnered along with recommendations for improvement. In 2020 it was decided to begin conducting the employee surveys bi-annually rather than annually, the next survey was completed in 2021. In relation to training and development, a Competency & Training Needs assessment was conducted in November 2010. From the results of this data a training matrix was developed to identify various resources offered to staff to improve competency. In addition, the Regional Workforce Training Committee that was established in January 2012 has become an ISK focused Workforce Training Committee continuing to look at the most cost-effective as well as efficient ways to offer opportunities to staff. In April 2015 an employee development program was approved. The employee development program consists of two parts beginning in June 2015 employees took the DiSC assessment and are encouraged to complete Comparison Reports with co-workers and department training on interpreting and using the results has been ongoing. The second phase is training staff in Crucial Conversations. Two ISK employees were trained as trainers and began to offer classes to agency employees beginning in December 2015. Crucial Conversations has been offered quarterly since its inception through 2019. With Covid, Crucial Conversation classes were put on hiatus, however, they have started up again in spring 2022.

This policy will be monitored through internal and external mechanisms on an annual basis.

Response: The organization follows specific personnel policies pertaining to the treatment of staff. Through the employee survey and exit interviews conducted when an employee resigns, the organization is able to monitor staff opinion regarding their treatment.



Period Ended August 31, 2022 Monthly Finance Report

### **Statement of Net Position**

August 31, 2022

	August 2021 (unaudited)	August 2022
Assets		
Current assets		
Cash and investments	\$ 32,812,646	\$ 28,417,191
Accounts receivable	4,449,380	5,205,614
Due from other governments	· -	14,799
Prepaid items	1,220,086	911,871
Total current assets	38,482,112	34,549,475
Non-current assets		
Capital assets, net of accumulated depreciation	9,049,846	9,520,448
Net pension asset, net of deferred outflows	4,937,092	5,722,229
Total non-current assets	13,986,938	15,242,677
Total assets	52,469,050	49,792,152
Liabilities		
Current liabilities		
Accounts payable	\$ 7,219,687	\$ 10,624,192
Due to other governments	14,270,353	(4,906,690)
Due to providers	96,086	(12,328)
Accrued payroll and payroll taxes	1,377,366	1,475,298
Unearned revenue	4,210,250	611,587
Total current liabilities	27,173,742	7,792,059
Non-current liabilities		
Long-term debt	4,415,261	
Total liabilities	31,589,003	7,792,059
Net position		
Designated	10,010,486	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	704,084	16,592,290
Net position	\$ 20,880,047	\$ 42,000,093

### Statement of Revenue, Expenses and Change in Net Position

October 1, 2021 through August 31, 2022 Percent of Year is 91.67%

	Amended 2022 BUDGET	YTD Totals 8/31/22	Remaining Budget	Percent of Budget - YTD
Operating revenue				
Medicaid:	\$ 63,305,736	\$ 64,395,335	\$ (1,089,599)	101.72%
Traditional Capitation		10,773,746	(732,980)	107.30%
Healthy Michigan Capitation	10,040,766	5,419,863	1,054,516	83.71%
Autism Captiation	6,474,379	(23,884,028)	23,884,028	0.00%
Settlement	-	(23,864,026)	23,004,020	0.0070
State General Fund:	2 026 552	3,507,672	318,880	91.67%
Formula Fundings	3,826,552 173,931	3,307,072	173,931	0.00%
PY General Fund Carryforward	1/3,931	-	175,551	0.00%
Settlement		6,548,909	(6,548,909)	0.00%
CCBHC Demonstration	-	29,919,828	(29,919,828)	0.00%
CCBHC Accrual	1 550 400	1,421,200	129,200	91.67%
County Allocation	1,550,400		78,368	82.15%
Client Fees	439,000	360,632	9,329	91.67%
SUD Block Grant	111,957	102,628	3,059,457	85.45%
Other grant revenue	21,026,249	17,966,792	554,745	59.55%
Other earned contracts	1,371,440	816,695		25.69%
COFR	28,150	7,231	20,919	61.86%
Interest	69,250	42,839	26,411	0.00%
Local revenue	10,000	1,459	8,541	0.00%
Total operating revenue	\$ 108,427,810	\$ 117,400,801	\$ (8,972,991)	108.28%
Operating expenses				
Salaries and wages	\$ 20,765,385	\$ 18,901,054	\$ 1,864,331	91.02%
Employee benefits	7,448,927	5,850,210	1,598,717	78.54%
Staff development	215,589	119,886	95,703	55.61%
Payments to providers	60,615,677	58,466,939	2,148,738	96.46%
Administrative contracts	16,629,895	14,959,898	1,669,997	89.96%
IT software and equipment	296,117	602,867	(306,750)	203.59%
Client transportation	25,410	16,035	9,375	63.10%
Staff travel	376,891	189,011	187,880	50.15%
Office expenses	440,777	397,353	43,424	90.15%
Insurance expense	94,481	108,690	(14,209)	115.04%
Depreciation expense	404,507	279,878	124,629	69.19%
Utilities	838,400	858,307	(19,907)	102.37%
Facilities	175,879	82,716	93,163	47.03%
Prior year adjustment		(24,333)	24,333	0.00%
Total operating expenses	\$ 108,327,935	\$ 100,808,511	\$ 7,519,424	93.06%
Change in net position	99,875	16,592,290	\$ (16,492,415)	
Beginning net position	25,407,802	25,407,802		
Ending net position	\$ 25,507,677	\$ 42,000,093	•	

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

Statement of Revenue, Expenses and Change in Net Position October 1, 2021 through August 31, 2022
Percent of Year is 91.67%

Percent of Year is 91.67%								Checker Sport (Phones and Automobile Sport	-	- Carried Control of Carried Control	The state of the s	The second	TOTAL CASON STATEMENT STAT
	State Ge	State General Fund		8	ССВНС		Other Funding Sources	ng Sources			Totals		
	EL.	YTD Totals		ATD.	YTD Totals	als	Ę	YTD Totals		Ę	YTD Totals		
	Budget	8/31/22	8	Budget	8/31/22	2	Budget	8/31/22	Bu	Budget	8/31/22		Variance
Operating revenue	3 3 4 8 7 3 5	\$ 3,507,672	٠	1	v,	٠,	,	\$	\$	3,348,236	\$ 3,507,672	2 \$	159,436
projected of Campagard						,							(159,437)
COBLO Domontation	101,001			o	36.468.737	3.737	,	,		1	36,468,737	37	36,468,737
Other Federal and State Great						, '	19.872.123	17.966.792	13	19,872,123	17,966,792	35	(1,905,331)
Other rederal and State Grants						,	1 257 153	816.695	,	1.257.153	816,695	35	(440,458)
Earned Kevenue	•						201,107,1	7 231		25,804	7 231		(18 573)
COFR Revenue	1					ı	23,604	152,1		61 875	42 675	4 K	(19,200)
Interest	•					ì	07,075	679,24	,	01,010	144,07	, ,	(007/07)
County Allocation	•			1		•	1,421,200	1,421,200	-	1,421,200	1,421,200	2	
Local Revenue	1		1			1	9,167	1,459		9,167	1,459	60	(7,708)
Restricted Interest	,					1	1,604	164		1,604	16	164	(1,440)
Transfer from GE	•			1		1		2,819,061		•	2,819,061	51	2,819,061
Illansial Holli or	(888 909)					1	1			(8888)		ı	888'969
Settlement Kevenue (Expense)	(000'060)			E		l				(200/200)		 	
Total operating revenue	\$ 2,810,785	\$ 3,507,672	\$ 2		\$ 36,468,737	i	\$ 22,648,926	\$ 23,075,277	\$ 25	25,459,711	\$ 63,051,686	%   %	37,591,976
Operating expenses								85					
Youth Programs	\$ 219,764	\$ 76,955	2	1	\$ 1,79	1,794,627	•	· \$	S	219,764	\$ 1,871,582	32 \$	
MIA Programs	Ţ	440,953	e	1	7,57	7,577,172	841,006	584,547	14	2,329,322	8,602,672	72	6,273,350
IDDA Programs	267,078	97,675	2	•	1,71	1,716,598	140,198	156,833		407,276	1,971,105	25	1,563,829
integrated Health Clinic	7.731		2	,	2,70	2,703,967	•	•		7,731	2,755,509	60	2,747,778
DCO Contracts	'			,	4,90	4,904,628	•	•			4,904,628	28	4,904,628
Other Federal and State Grants	•		,	,	*8		19,399,021	9,001,142	15	19,399,021	9,001,142	45	(10,397,878)
CERA Grapt	•		î			•	1	10,940,685			10,940,685	85	10,940,685
HID Grants	•		3	ā		•	X .	919,341		•	919,341	41	919,341
Managed Care Administration	236 624	29.847	7	ı	66	990,225	1,340,977	50,457	• •	1,577,600	1,070,529	59	(507,071)
Homeless Shelter				1			254,514	311,551		254,514	311,551	51	57,037
Transfer from GE	•	2,819,061				1	•	•		,	2,819,061	61	2,819,061
ממממאס ליזכר ווייטן				•		,	1,136,801	1,211,684	•	1,136,801	1,211,684	84	74,884
Drior year adjustment	,			,		,		(24,333)			(24,333)	33)	(24,333)
Non-DCH Activity Expenditures			,	,		,	128,873	104,238		128,873	104,238	38	(24,635)
				× ×		710 587 217	\$ 72 7/1 389	\$ 23.256.146	۸	25 460 903	\$ 46,459,395	95	20.998.492
Total operating expenses	4 2,219,514	750,015,6	٥ ا		٨	1				200/00/0	1	 	
Change in net position	591,271	(8,360)	(0:		16,78	16,781,520	(592,463)	(180,869)	⋄	(1,193)	16,592,291	91	16,593,483

CCBHC								
October 1, 2021 through August 31, 2022 Percent of Year is 91.67%								
		ССВНС		ССВНС		ССВНС		ССВНС
		Medicaid	Ť	Healthy MI	Non	Non-Medicaid	>	YTD Totals
Operating revenue								
Prepayment	Ş	6,548,909	δ.	- 184 504	↔	, ,	\$	6,548,909
Kemaining CCBnC reveriue uue		430,00,167		100,101,0				22,010,010
Total CCBHC Revenue (PPS-1 of \$445.73 x encounters)	\$	\$ 30,284,233	₩.	6,184,504	٠		45	36,468,737
Operating expenses	Ś	11.612.865	Ś	2,371,525	·O·	798,200	Ş	\$ 14,782,589
DCO Contracts		3,852,964		786,834		264,830	ge .	4,904,628
Total operating expenses	φ.	15,465,829	٠	3,158,359	4	1,063,030	\$	19,687,217
Operating change in net position		14,818,405		3,026,145		(1,063,030)		16,781,520
Reclassification to cover Non-Medicaid		(1,063,030)				1,063,030		
Total change in net position		13,755,375		3,026,145		ť		16,781,520

This financial report is for internal use only. It has not been audited, and no assurance is provided.

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

				UTILIZ	ATION C	UTILIZATION COMPARISONS FY 21/22	Y 21/22		
	EV 20.	EV 20/21 Actual	FY 24	EV 21/22 Budget	. X	FY 21/22 Actual	Days Difference	Cost	Cost
•	71.20	17 I Actual	7	196nng 77/		TIEF Voidal	Favorable	Favorable	Favorable
MONTH	Days	Dollars	Days	Dollars	Days	Dollars	(Unfavorable)	(Unfavorable)	(Unfavorable)
OCTOBER	49	\$51,109	23	\$19,776	22	\$54,195	(32)	(\$34,419)	(\$34,419)
NOVEMBER	29	\$64,640	23	\$19,776	7	\$2,688	16	\$12,088	(\$22,331)
DECEMBER	27	\$24,571	23	\$19,776	29	\$25,836	(9)	(\$6,060)	(\$28,391)
JANUARY	33	\$7,131	23	\$19,776	37	\$34,540	(14)	(\$14,764)	(\$43,155)
FEBRUARY	6	\$8,714	23	\$19,776	73	\$72,274	(20)	(\$52,498)	(\$95,653)
MARCH	14	\$42,617	23	\$19,776	45	\$44,186	(22)	(\$24,410)	(\$120,063)
APRIL	22	\$22,022	23	\$19,776	62	\$88,237	(68)	(\$68,461)	(\$188,524)
MAY	29	\$7,544	23	\$19,776	54	\$46,668	(31)	(\$26,892)	(\$215,416)
JUNE	23	\$25,540	23	\$19,776	74	\$67,193	(51)	(\$47,417)	(\$262,833)
JULY	18	\$16,614	23	\$19,776	26	\$27,928	(3)	(\$8,152)	(\$270,985)
AUGUST	22	\$22,523	23	\$19,776	24	\$24,651	(1)	(\$4,875)	(\$275,860)
SEPTEMBER	29	\$64,966	23	\$19,776					
TOTALS	407	\$357,991	274	\$237,312	486	\$493,396	(233)	(\$275,860)	
MONTHLY AVERAGES	34		23		44				
GROSS ANNUAL COST		\$357,991		\$237,312		\$493,396		(\$275,860)	

Favorable/(Unfavorable) by Funding Source:

(286,669)	10,809	(275,860)
Medicaid	General Fund	Total

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

				UTIL	IZATION	COMPARIS	UTILIZATION COMPARISONS FY 21/22		
	FY 20	FY 20/21 Actual	FY 21/	FY 21/22 Budget	FY 21	FY 21/22 Actual	Days	Cost	Cost
		200					Favorable	Favorable	Favorable
MONTH	Days	Dollars	Days	Dollars	Days	Dollars	(Unfavorable)	(Unfavorable)	(Unfavorable)
OCTOBER	433	\$409,023	395	\$373,807	453	\$442,464	(28)	(\$68,657)	(\$68,657)
NOVEMBER	420	\$401,675	395	\$373,807	398	\$388,237	(3)	(\$14,431)	(\$83,088)
DECEMBER	461	\$440,721	395	\$373,807	481	\$470,016	(88)	(\$96,209)	(\$179,297)
JANUARY	499	\$478,423	395	\$373,807	492	\$477,867	(16)	(\$104,060)	(\$283,357)
FEBRUARY	459	\$439,718	395	\$373,807	406	\$394,694	(11)	(\$20,888)	(\$304,245)
MARCH	370	\$354,552	395	\$373,807	515	\$500,263	(120)	(\$126,457)	(\$430,702)
APRIL	410	\$392,870	395	\$373,807	442	\$429,586	(47)	(\$55,779)	(\$486,481)
MAY	495	\$474,875	395	\$373,807	451	\$437,305	(99)	(\$63,499)	(\$549,980)
JUNE	487	\$467,958	395	\$373,807	522	\$508,312	(127)	(\$134,506)	(\$684,486)
JULY	473	\$453,758	395	\$373,807	559	\$542,730	(164)	(\$168,924)	(\$853,410)
AUGUST	510	\$489,650	395	\$373,807	496	\$482,335	(101)	(\$108,529)	(\$961,939)
SEPTEMBER	521	\$501,420	395	\$373,807					
							-		
TOTALS	5 538	\$5 304 644	4 745	\$4 485 679	5215	\$5.073.811	(870)	(\$961,939)	
200	3		:						
MONTHLY AVERAGES	462		395		474				
GROSS ANNUAL COST		\$5,304,644		4,485,679		\$5,073,811		(\$961,939)	

Favorable/(Unfavorable) by Funding Source:

(1,235,993)	247,333	26,721	(961,939)
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 August 31st, 2022

## YOUTH POPULATION (SED/DD)

			,	ACTUAL YEAR TO DATE	R TO DATE	
		Avg.		Days		Favorable
		Daily	No.	oę	ISK	(Unfavorable)
	Month	Rate	Served	Service	Cost	Budget
PC/CLS(S.R.)	Aug	\$1,261	1	341	\$430,026	(\$182,337)
CRISIS RES.	Ang	\$670	4	16	\$10,719	\$45,335
CLS (SIP)	Aug	NA			\$0	
TOTAL			5	357	440,744	(\$137,001)

### MI ADULT POPULATION

DATE	Favorable	ISK (Unfavorable)	Cost Budget	\$10,270,275 (\$61,961)	\$465,188 \$265,041	\$510,777 (\$239,437)	\$11,246,240 (\$36,357)
ACTUAL YEAR TO DATE	Days	of	Service	47,720	888		48,608
A		No.	Served	167	54	64	285
	Avg.	Daily	Rate	\$215	\$524	NA	
			Month	Aug	Aug	Aug	
				PC/CLS(S.R.)	CRISIS RES.	CLS (SIP)	TOTAL

**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

				ACTUAL YEAR TO DATE	IR TO DATE	
		Avg.		Days		Favorable
		Daily	No.	οĘ	ISK	(Unfavorable)
	Month	Rate	Served	Service	Cost	Budget
PC/CLS(S.R.)	Aug	\$228	216	67,994	\$15,516,793	\$1,023,679
CRISIS RES.	Aug	0\$	0	0	\$0	\$10,104
CLS (SIP)	Aug	NA	207	0	\$9,969,738	(\$2,791,952)
			423	67,994	\$25,486,531	(\$1,758,169)

### **TOTAL ALL POPULATIONS**

	-	-				-	_
	Favorable	(Unfavorable)	Budget	\$779,382	\$320,480	(\$3,031,389)	(\$1,931,527)
IR TO DATE		ISK	Cost	\$26,217,093	\$475,907	\$10,480,515	\$37,173,515
ACTUAL YEAR TO DATE	Days	of	Service	116,055	904		116,959
A		No.	Served	384	28	271	713
	Avg.	Daily	Rate	\$222	\$526	AN	
			Month	Aug	Aug	Aug	
				PC/CLS(S.R.)	CRISIS RES.	CLS (SIP)	TOTAL

Other	1		
	77 0	555,068	
4		93,967	(123,322) \$ 93,967
\$ (16,635)		15,943	6,344 \$ 15,943
\$ (16 635	100	664.978	2.248 \$ 664.978

9/20/2022 2:06 PM

VIII.c.



Community • Independence • Empowerment

### Integrated Services of Kalamazoo MOTION

Subject:

August 2022 Disbursements

Meeting Date: Prepared by:

**September 26, 2022** 

Charlotte Bowser

Approval Date:

September 26, 2022

### Recommended Motion:

"Based on the Board Finance meeting review, I move that ISK approve the August 2022 vendor disbursements of \$12,808,848.31."

### Summary of Request:

As per the August 2022 Vendor Check Register Report dated 9/14/2022 that includes checks issued from 08/01/2022 to 8/31/2022.

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: September 26, 2022

VIII.d.



Community • Independence • Empowerment

### Integrated Services of Kalamazoo MOTION

Subject:

**Budget Amendment (#2)** 

Meeting Date: Prepared by:

September 26, 2022

Amy Rottman

**Approval Date:** 

<u>September 26, 2022</u>

### **Recommended Motion:**

"This amendment is to increase the revenue budget by \$13,000,000 and reclassify revenue budgets between Medicaid and CCBHC."

### **Summary of Request:**

This amendment will reclassify revenue earned based on the CCBHC funding changes. This will update the budget to reflect the Medicaid & Healthy Michigan settlement amount and the earned CCBHC revenue. There is no expense impact, so the increase in revenue will result in a budgeted net position increase. See below:

**Traditional Capitation** 

\$ (17,000,000)

**Healthy Michigan Capitation** 

(8,000,000)

ССВНС

38,000,000

Net position increase

\$ 13,000,000

**Budget:** 

FY2022/2023

Staff:

**Amy Rottman** 

Date of Board

Consideration: September 26, 2022