



Community • Independence • Empowerment

Jeffrey W. Patton
Chief Executive Officer

www.iskzoo.org

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 board meeting on the following:

Date Posted: October 17, 2022

Project Name: Integrated Services of Kalamazoo, Board of Directors, board meeting

Location: 610 S. Burdick Street, Kalamazoo, MI.,
(2nd Floor – Board Conference Room)

Date/Time: October 24, 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 utilizing 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.

See example.



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 Dwallace@iskzoo.org or 269-553-8000.

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



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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, October 24, 2022, BEGINNING @ 4:00PM 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
- V. PROGRAM SERVICES REPORT/VERBAL
 - a. Program Services Report (Facilities and Housing)
David Anderson, Director of Facilities & Housing Resource Center
- VI. CONSENT CALENDAR/VERBAL MOTION
 - a. Minutes
 - b. Board Purpose and Business Description (Policy)
 - c. Treatment of Persons Served *with Substantiated Complaints* (Policy & Report)
 - d. ENDS Development Process (Policy)
 - e. ENDS for Individuals Served (Policy)
 - f. Guidelines for Board Member Appointments (Policy)
 - g. Customer Services (Report)
 - h. Customer Advisory Council Annual (Report)
- VII. FINANCIAL REPORTS
 - a. Financial Condition Report
 - b. Utilization Report
 - c. Investment Report
 - d. September 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: September 2022

Office of Recipient Rights Report to the Mental Health Board

Complaints/Allegations Closed in September 2022

	September 2022	FY 21-22	September 2021	FY 20-21
Total # of Complaints Closed	24	421	40	383
Total # of Allegations Closed	39	707	63	660
Total # of Allegations Substantiated	14	214	16	208

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	September 2022		September 2021	
Category	TOTAL	SUBSTANTIATED	TOTAL	SUBSTANTIATED
Consumer Safety	1	0	2	1
Dignity/Respect of Consumer	5	2	17	4
Treatment Issues/Suitable Services (Including Person Centered Planning)	11	4	12	2
Abuse I	0	0	0	0
Abuse II	2	0	5	2
Abuse III	0	0	5	1
Neglect I	0	0	0	0
Neglect II	0	0	5	1
Neglect III	3	2	6	4
	22	8	52	15

APPEALS	September 2022	FY 21-22	September 2021	FY 20-21
Uphold Investigative Findings & Plan of Action	0	3	1	10
Return Investigation to ORR; Reopen or Reinvestigate	0	0	0	0
Uphold Investigative Findings but Recommend Respondent Take Additional or Different Action to Remedy the Violation	0	0	0	0
Request an External Investigation by the State ORR	0	0	0	0

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)

Neglect Class I means a serious injury 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 risk of physical harm or sexual abuse 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

October 2022

Re: September 2022 Abuse/Neglect Violations

September

Neglect Violations

- There were two substantiated Neglect III violations in September 2022.
 - The remedial actions for these violations were Employment Termination (1), Training (1), Policy Revision/Development (1), and Written Reprimand (2). There was one staff involved in each of three citations.

The 2 violations occurred at 2 different agencies.



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October Program Services Report

Jeffrey W. Patton
Chief Executive Officer

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Date: October 24, 2022

To: ISK Board of Directors

From: David Anderson/ISK, Director of Facilities & Housing Resource Center

	Street Outreach for Kalamazoo	Lantern House	Rapid Re-housing	Shelters	Oakland House	Step-Up	HERS	Keystone-Veterans		CERA	SOAR	PSH
Total Assisted	179	12	128			161	119	57	32			183
Self-Identified												
Mental Health	153	10	70			116	15	42	12			183
Substance Use Disorder	49	6	25			66	1	27	2			33
Developmental Disability	14	1	6			15	2	7	1			12
Domestic Violence	84	2	39			62	11	24	1			66
										Applications in process	251	14
										Approved Applications	1751	6
										Subsequent Applications	1785	
										\$13,909,564.03		
Total Funds Assisted			\$407,044.98									
Street Outreach	The street outreach team covers 7 counties. They worked with individuals who are living in places not meant for human habitation.											
Lantern House	The Lantern House program was to assist a small amount of individuals during COVID, who had extreme barriers.											
Rapid Re-Housing	The Rapid Re-housing program was additional funding during COVID to assist with move in cost and short term rental assistance.											
Shelters												
Oakland House	Oakland House assists up to 18 single individuals with shelter.											
Step-Up	Step-Up assists families with shelter. We can assist up to 10 families depending on size.											
HERS (Homeless Emergency Response System)	HERS assist individuals who have been staying in places not meant for human habitation and frequent the emergency rooms.											
Keystone-Veterans	Keystone assist Veterans with shelter and can accommodate up to 12 individuals.											
CERA (Covid Emergency Relief Assistance)	CERA assist individuals/families who are behind on rent and utilities due to COVID related issues.											
SOAR (SSI/SSDI Outreach Access & Recovery)	SOAR is an expedited process for Social Security benefits.											
PSH (Permanent Supportive Housing)	Permanent supportive housing is an intervention that combines affordable housing assistance with voluntary support services to address the needs of homeless people.											



Lantern House





INTEGRATED Services of Kalamazoo (ISK) Board of Director's Meeting September 26, 2022 VI.a.

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

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
 Alecia Pollard
 Demeta Wallace

ISK - KCMHSAS Staff Absent:

Kathy Lentz
 Pat Weighman

Providers:

Dr. Shenetta Coleman
 CEO
 Residential
 Opportunities, Inc.

Tina Graham
 Executive Director
 ASK Family Services

Fi Spalvieri
 Executive Director
 Community Living
 Options

Call to Order:

Chair Longanecker welcomed all in attendance to the September 26, 2022, INTEGRATED Services of Kalamazoo Board meeting. The meeting was called to order at 4:00PM.



Agenda:

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

Citizen Time:

No citizens came forth.

BUDGET PUBLIC HEARING FY 2022/2023/Motion/Roll Call:

- a) Chairwoman (Karen Longanecker) will say: "The Public Hearing on the *Integrated Services of Kalamazoo*, Proposed FY22/23 Budget is now open." Call on Chief Executive Officer, Jeff Patton.
- b) The Chief Executive Officer (Jeff Patton) will say: "Act 43 of the 1963 Public Acts, as amended, requires the Authority to hold a public hearing on its proposed FY 22/23 budget prior to its final adoption."

"In accordance with the statutes, notice of this public hearing was published in the Kalamazoo Gazette, a newspaper of general circulation within the community on September 16, 2022, and copies of the proposed budget have been available at the Administrative Offices and County Board of Commissioners Office for inspection by the public. Copies of the proposed budget are now available for any persons present who desire to have a copy."

- c) Chairwoman (Karen Longanecker): Call on the Chief Financial Officer, Amy Rottman, to present the budget.
- d) The Chief Financial Officer presents the budget.



Community • Independence • Empowerment

**FY 2022/2023 BUDGET PRESENTATION
PUBLIC HEARING AND BOARD ADOPTION
SEPTEMBER 26, 2022**

EXECUTIVE SUMMARY – BUDGET FY 22/23

- **State of the System – Current year funding**
 - Unable to use all Medicaid/HMP dollars received this year
 - Funds targeted for specific purposes i.e., DCW codes
 - Medicaid enrollees being protected from dropping off Medicaid roles
 - Many services previously covered under capitation are now covered by CCBHC model
 - CCBHC funding exceeding expenses
- **State of the System – MDHHS Statewide Systemic Changes**
 - CCBHC Demonstration Yr 2
 - MDHHS HCPCS/CPT code and Modifier expansion
 - MDHHS Consideration of mid-year rate adjustments
 - MDHHS Standard Cost Allocation process

BUDGET OVERVIEW

- Direct Care wage enhancement continued
- 5% increases for most providers
- 15% increase for Designated Collaborating Organizations
- 11% increase for ISK staff
- ABA rates at legislated capped levels
- Decrease in Medicaid & HMP funding due to projected decrease in enrollment
- CCBHC revenues at a reduced PPS-1 rate

	Amended 2022 BUDGET	Proposed 2023 BUDGET	Remaining Difference
Operating revenue			
Medicaid:			
Traditional Capitation	\$ 63,309,236	\$ 62,588,107	\$ 721,129
Healthy Michigan Capitation	10,040,766	10,155,033	(114,267)
Autism Capitation	6,474,379	5,722,701	751,678
Settlement	(71,052)	(11,458,363)	11,387,311
State General Fund:			
Formula Fundings	3,826,552	3,900,517	(73,965)
PR General Fund Carryforward	173,931	-	173,931
CCBHC Demonstration	-	33,381,000	(33,381,000)
County Allocation	1,550,400	1,550,400	-
Client Fees	435,500	426,000	9,500
SUD Block Grant	111,957	-	111,957
Other grant revenue	21,306,287	7,354,156	13,952,131
Other earned contracts	1,162,454	909,829	252,625
COFR	28,150	(6,250)	34,400
Interest	69,250	1,000	68,250
Local revenue	10,000	10,000	-
Total operating revenue	\$ 108,427,810	\$ 114,534,130	\$ (6,106,320)

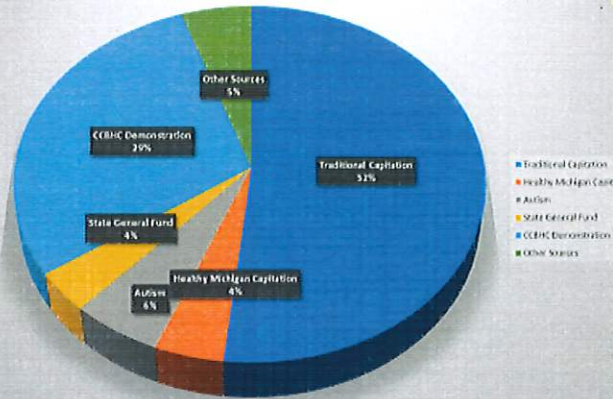
OPERATING REVENUE

	Amended 2022 BUDGET	Proposed 2023 BUDGET	Remaining Difference
Operating expenses			
Salaries and wages	\$ 20,765,385	\$ 24,113,672	\$ (3,348,287)
Employee benefits	7,448,927	8,670,498	(1,221,571)
Staff development	215,589	223,625	(8,036)
Payments to providers	60,615,677	68,968,243	(8,352,566)
Administrative contracts	16,629,895	7,789,466	8,840,429
IT software and equipment	296,117	765,010	(468,893)
Client transportation	25,410	29,260	(3,850)
Staff travel	376,891	316,812	60,079
Office expenses	440,777	415,023	25,754
Insurance expense	94,481	97,505	(3,024)
Depreciation expense	404,507	560,142	(155,635)
Utilities	838,400	306,573	531,827
Facilities	175,879	124,379	51,500
Total operating expenses	\$ 108,327,935	\$ 112,380,208	\$ (4,052,273)
Change in net position	99,875	2,153,922	\$ (2,054,047)

OPERATING EXPENSE

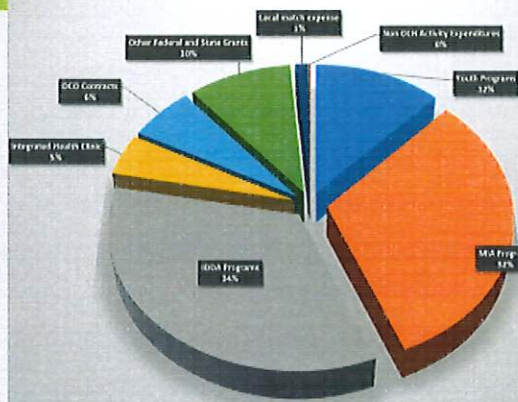
MAJOR FUNDING SOURCES AS % OF BUDGET

Major Funding Sources as of % of Budget

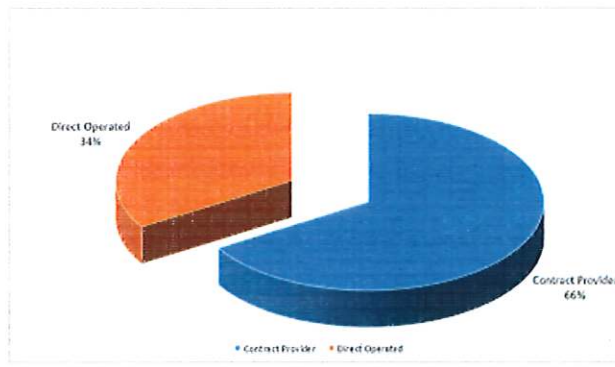
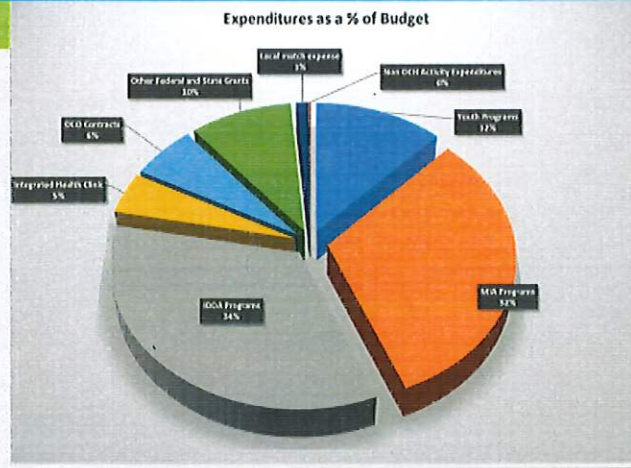


EXPENDITURE AS % OF BUDGET

Expenditures as a % of Budget



EXPENDITURE AS % OF BUDGET



PROVIDER & DIRECT OPERATED AS % OF BUDGET

SWMBH FUNDING REVIEW

	Specialty Services	Healthy Michigan	Autism	SUD Block Grant	Totals
Operating revenue					
Medicaid:					
Traditional Capitation	\$ 62,588,107	\$ -	\$ -	\$ -	\$ 62,588,107
Healthy Michigan Capitation	-	10,155,033	-	-	10,155,033
Autism Capitation	-	-	5,722,701	-	5,722,701
Settlement Estimate	(6,508,133)	(5,444,013)	493,813	-	(11,458,363)
Client Fees	426,000	-	-	-	426,000
Total operating revenue	\$ 56,505,974	\$ 4,710,990	\$ 6,216,514	\$ -	\$ 67,433,478
Operating expenses					
Youth Programs	\$ 3,462,670	\$ -	\$ 5,887,140	\$ -	\$ 9,349,810
MIA Programs	15,690,794	4,046,536	-	-	19,737,330
IDDA Programs	33,462,197	294,136	-	-	33,756,333
Integrated Health Clinic	896,416	120,713	-	-	1,017,129
Delegated Managed Care Administration	2,993,897	249,606	329,374	-	3,572,876
Total operating expenses	\$ 56,505,974	\$ 4,710,990	\$ 6,216,514	\$ -	\$ 67,433,478
Change in net position	(0)	(0)	(0)	-	(0)

	State General Fund	CCBHC	Other Funding Sources	Totals
Operating revenue				
General Fund	\$ 3,900,517	\$ -	\$ -	\$ 3,900,517
CCBHC Demonstration	-	33,381,000	-	33,381,000
Other Federal and State Grants	-	-	7,354,156	7,354,156
Earned Revenue	-	-	909,829	909,829
COFR Revenue	-	-	(6,250)	(6,250)
Interest	-	-	1,000	1,000
County Allocation	-	-	1,550,400	1,550,400
Local Revenue	-	-	10,000	10,000
Transfer from GF	-	-	2,261,779	2,261,779
Total operating revenue	\$ 3,900,517	\$ 33,381,000	\$ 12,000,914	\$ 49,362,431
Operating expenses				
Youth Programs	\$ 165,919	\$ 3,438,404	\$ -	\$ 3,605,323
MIA Programs	830,009	13,117,909	330,750	14,268,668
IDDA Programs	316,272	2,413,890	178,386	2,908,549
Integrated Health Clinic	75,101	3,926,510	-	4,001,612
OCO Contracts	-	6,600,784	-	6,600,784
Other Federal and State Grants	-	-	8,309,877	8,309,877
HUJ Grants	-	-	1,634,174	1,634,174
Managed Care Administration	66,411	1,650,887	39,131	1,756,430
Homeless Shelter	-	-	436,749	436,749
Transfer from GF	2,261,779	-	-	2,261,779
Local match expense	-	-	1,274,975	1,274,975
Non-DOH Activity Expenditures	-	-	140,589	140,589
Total operating expenses	\$ 3,705,492	\$ 31,158,385	\$ 12,344,632	\$ 47,208,509
Change in net position	195,025	2,222,615	(263,718)	\$ 2,153,922

ISK "AT RISK" FUNDING REVIEW

QUESTIONS & ANSWERS

- e) Chairwoman (Karen Longanecker) will say: "Is there anyone present who desires to ask any questions, or to make any comments?"
- f) Chairwoman (Karen Longanecker) will say after comments (if any): "I hereby declare that the Public Hearing for *Integrated Services of Kalamazoo*, Proposed FY 22/23 Budget closed."
- g) Chairwoman (Karen Longanecker) will call for MOTION.

Member Krogh, "I MOVE APPROVAL OF THE INTEGRATED SERVICES OF KALAMAZOO FY2022/2023 BUDGET WHICH BEGINS OCTOBER 1, 2022, IN THE AMOUNT OF \$112,380,208."
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	X	
Member Sarah Carmany	X	
Member Patrick Dolly	X	
Member Pat Guenther	X	
Member Erik Krogh	X	
Member Veronica McKissack		
Member Michael Raphelson		
Member Sharon Spears	X	
Member Michael Weekley		
Member Melissa Woolsey	X	

MOTION PASSED.

Recipient Rights Monthly Reports:

Roann Bonney, ISK, ORR Director, presented the complaints/allegations closed in August 2022.

August

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.
 - 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.
 - 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.
 - 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.

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).

Program Services Report/VERBAL:

Due to the Budget Public Hearing the Program Services Report will be presented at the meeting on October 24, 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.

- VI.a. Minutes
- VI.b. Staff Treatment (Policy & Report)
- VI.c. Compensation & Benefits (Policy & Report)

Member Krogh, "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 August 31, 2022.

INTEGRATED SERVICES OF KALAMAZOO

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	-	6,050,600
Prepaid items	1,220,086	911,871
Total current assets	38,482,112	40,585,275
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	55,827,952
Liabilities		
Current liabilities		
Accounts payable	\$ 7,219,687	\$ 10,624,192
Due to other governments	14,270,353	1,129,110
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	13,827,860
Non-current liabilities		
Long-term debt	4,415,261	-
Total liabilities	31,589,003	13,827,860
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

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

INTEGRATED SERVICES OF KALAMAZOO

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:				
Traditional Capitation	\$ 63,305,736	\$ 64,395,335	\$ (1,089,599)	101.72%
Healthy Michigan Capitation	10,040,766	10,773,746	(732,980)	107.30%
Autism Capitation	6,474,379	5,419,863	1,054,516	83.71%
Settlement	-	(23,884,028)	23,884,028	0.00%
State General Fund:				
Formula Fundings	3,826,552	3,507,672	318,880	91.67%
PY General Fund Carryforward	173,931	-	173,931	0.00%
Settlement	-	-	-	0.00%
CCBHC Demonstration	-	6,548,909	(6,548,909)	0.00%
CCBHC Accrual	-	29,919,828	(29,919,828)	0.00%
County Allocation	1,550,400	1,421,200	129,200	91.67%
Client Fees	439,000	360,632	78,368	82.15%
SUD Block Grant	111,957	102,628	9,329	91.67%
Other grant revenue	21,026,249	17,966,792	3,059,457	85.45%
Other earned contracts	1,371,440	816,695	554,745	59.55%
COFR	28,150	7,231	20,919	25.69%
Interest	69,250	42,839	26,411	61.86%
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		

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

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

	Specialty Services		Healthy Michigan		Autism		SUD Block Grant		Totals		
	YTD Budget	YTD Totals 8/31/22	YTD Budget	YTD Totals 8/31/22	YTD Budget	YTD Totals 8/31/22	YTD Budget	YTD Totals 8/31/22	YTD Budget	YTD Totals 8/31/22	Variance
Operating revenue											
Medicaid:											
Traditional Capitation	\$ 58,030,258	\$ 64,395,335	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 58,030,258	\$ 64,395,335	\$ 6,365,077
Healthy Michigan Capitation	-	-	9,204,036	10,773,746	-	-	-	-	9,204,036	10,773,746	1,569,711
Autism Capitation	-	-	-	-	5,934,847	5,419,863	-	-	5,934,847	5,419,863	(514,985)
Settlement Estimate	5,822,598	(16,400,034)	(5,072,813)	(7,406,094)	(481,638)	24,728	-	(102,628)	268,147	(23,884,028)	(24,152,175)
Client Fees	402,417	360,632	-	-	-	-	-	-	402,417	360,632	(41,785)
SUD Block Grant	-	-	-	-	-	-	102,627	102,628	102,627	102,628	0
Total operating revenue	\$ 64,255,273	\$ 48,355,933	\$ 4,131,223	\$ 3,367,652	\$ 5,453,209	\$ 5,444,591	\$ 102,627	\$ (0)	\$ 73,942,332	\$ 57,168,175	\$ (16,774,156)
Operating expenses											
Youth Programs	\$ 5,901,006	\$ 2,150,435	\$ -	\$ -	\$ 4,871,840	\$ 5,170,740	\$ -	\$ -	\$ 10,772,845	\$ 7,321,175	(3,451,671)
MIA Programs	20,176,779	13,944,217	3,378,001	3,038,910	-	-	-	-	23,554,780	16,983,127	(6,571,654)
IDDA Programs	28,706,578	29,193,190	267,255	69,473	-	-	-	-	28,973,833	29,262,663	288,830
Integrated Health Clinic	2,620,619	635,891	45,535	89,884	-	-	-	-	2,666,153	725,775	(1,940,378)
Administration	6,850,290	2,432,200	440,432	169,386	\$ 581,370	273,851	-	-	7,872,092	2,875,436	(4,996,655)
Homeless Shelter	-	-	-	-	-	-	-	-	-	-	-
Non-DCH Activity Expenditures	-	-	-	-	-	-	-	-	-	-	-
Total operating expenses	\$ 64,255,272	\$ 48,355,933	\$ 4,131,222	\$ 3,367,653	\$ 5,453,209	\$ 5,444,591	\$ -	\$ -	\$ 73,839,704	\$ 57,168,176	\$ (16,671,528)
Change in net position	0	(0)	(0)	(0)	0	(0)	102,627	(0)	\$ 102,628	(1)	

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INTEGRATED SERVICES OF KALAMAZOO

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

	State General Fund		CCBHC		Other Funding Sources		Totals		
	YTD Budget	YTD Totals 8/31/22	YTD Budget	YTD Totals 8/31/22	YTD Budget	YTD Totals 8/31/22	YTD Budget	YTD Totals 8/31/22	Variance
Operating revenue									
General Fund	\$ 3,348,236	\$ 3,507,672	\$ -	\$ -	\$ -	\$ -	\$ 3,348,236	\$ 3,507,672	\$ 159,436
Projected GF Carryforward	159,437	-	-	-	-	-	159,437	-	(159,437)
CCBHC Demonstration	-	-	-	36,468,737	-	-	-	36,468,737	36,468,737
Other Federal and State Grants	-	-	-	-	19,872,123	17,966,792	19,872,123	17,966,792	(1,905,331)
Earned Revenue	-	-	-	-	1,257,153	816,695	1,257,153	816,695	(440,458)
COFR Revenue	-	-	-	-	25,804	7,231	25,804	7,231	(18,573)
Interest	-	-	-	-	61,875	42,675	61,875	42,675	(19,200)
County Allocation	-	-	-	-	1,421,200	1,421,200	1,421,200	1,421,200	-
Local Revenue	-	-	-	-	9,167	1,459	9,167	1,459	(7,708)
Restricted Interest	-	-	-	-	1,604	164	1,604	164	(1,440)
Transfer from GF	-	-	-	-	-	2,819,061	-	2,819,061	2,819,061
Settlement Revenue (Expense)	(696,888)	-	-	-	-	-	(696,888)	-	696,888
Total operating revenue	\$ 2,810,785	\$ 3,507,672	\$ -	\$ 36,468,737	\$ 22,648,926	\$ 23,075,277	\$ 25,459,711	\$ 63,051,686	\$ 37,591,976
Operating expenses									
Youth Programs	\$ 219,764	\$ 76,955	\$ -	\$ 1,794,627	\$ -	\$ -	\$ 219,764	\$ 1,871,582	\$ 1,651,817
MIA Programs	1,488,317	440,953	-	7,577,172	841,006	584,547	2,329,322	8,602,672	6,273,350
IDDA Programs	267,078	97,675	-	1,716,598	140,198	156,833	407,276	1,971,105	1,563,829
Integrated Health Clinic	7,731	51,542	-	2,703,967	-	-	7,731	2,755,509	2,747,778
DCO Contracts	-	-	-	4,904,628	-	-	-	4,904,628	4,904,628
Other Federal and State Grants	-	-	-	-	19,399,021	9,001,142	19,399,021	9,001,142	(10,397,878)
CERA Grant	-	-	-	-	-	10,940,685	-	10,940,685	10,940,685
HUD Grants	-	-	-	-	-	919,341	-	919,341	919,341
Managed Care Administration	236,624	29,847	-	990,225	1,340,977	50,457	1,577,600	1,070,529	(507,071)
Homeless Shelter	-	-	-	-	254,514	311,551	254,514	311,551	57,037
Transfer from GF	-	2,819,061	-	-	-	-	-	2,819,061	2,819,061
Local match expense	-	-	-	-	1,136,801	1,211,684	1,136,801	1,211,684	74,884
Prior year adjustment	-	-	-	-	-	(24,333)	-	(24,333)	(24,333)
Non-DCH Activity Expenditures	-	-	-	-	128,873	104,238	128,873	104,238	(24,635)
Total operating expenses	\$ 2,219,514	\$ 3,516,032	\$ -	\$ 19,687,217	\$ 23,241,389	\$ 23,256,146	\$ 25,460,903	\$ 46,459,395	20,998,492
Change in net position	591,271	(8,360)	-	16,781,520	(592,463)	(180,869)	\$ (1,193)	16,592,291	16,593,483

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INTEGRATED SERVICES OF KALAMAZOO

CCBHC

October 1, 2021 through August 31, 2022

Percent of Year is 91.67%

	CCBHC Medicaid	CCBHC Healthy MI	CCBHC Non-Medicaid	CCBHC YTD Totals
Operating revenue				
Prepayment	\$ 6,548,909	\$ -	\$ -	\$ 6,548,909
Remaining CCBHC revenue due	23,735,324	6,184,504	-	29,919,828
Total CCBHC Revenue (PPS-1 of \$445.73 x encounters)	\$ 30,284,233	\$ 6,184,504	\$ -	\$ 36,468,737
Operating expenses				
Internal services	\$ 11,612,865	\$ 2,371,525	\$ 798,200	\$ 14,782,589
DCO Contracts	3,852,964	786,834	264,830	4,904,628
Total operating expenses	\$ 15,465,829	\$ 3,158,359	\$ 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	-	16,781,520

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Utilization Reports:

Charlotte Bowser, ISK, Accounting Manager, presented the Utilization Report for the period ending August 31, 2022.

- Youth Community Inpatient Services is unfavorable by \$275,860
- MI Adult Community Inpatient Services is at (870) days and unfavorable at \$961,939
- Community Living Supports, Personal Care, and Crisis Residential is unfavorable at \$1,931,527.

August Disbursements/MOTION:

Member Krogh, "BASED ON THE BOARD FINANCE MEETING REVIEW, I MOVE THAT ISK APPROVE THE AUGUST 2022 VENDOR DISBURSEMENTS OF \$12,808,848.31." Supported by Member Guenther.

MOTION PASSED.Budget Amendment #2/MOTION:

Member Krogh, "THIS AMENDMENT IS TO INCREASE THE REVENUE BUDGET BY \$13,000,000 AND RECLASSIFY REVENUE BUDGETS BETWEEN MEDCAID AND CCBHC." Supported by Member Raphelson.

MOTION PASSED.Chief Executive Officer Report:

My report will be quick, and I have only three bullet points to highlight:

- ✚ Special thank you to Veronica McKissack and the Kalamazoo County Board of Commissioners for awarding ISK the American Plan Rescue Funding of \$2M. These funds will allow us to build the NEW Behavioral Health Urgent Care and Access Center. The groundbreaking ceremony will take place on Wednesday, October 5th at 2:00pm. Construction is scheduled to begin in Jan-Feb 2023.
- ✚ I am pleased to announce that we have been awarded a four-year SAMHSA expansion grant for our Certified Community Behavioral Health Clinic (CCBHC). We will receive \$1 million for each of the four years.
- ✚ Effective Oct 1, 2022, ISK will be moving from Streamline to PCE (Peter Chang Enterprises) K.A.R.E., Kalamazoo Access and Records Environment for our health records. I've been extremely impressed with PCE, and the training provided by their staff to ISK staff through the migration process.

That concludes my report.

Citizen Time:

No citizens came forth.

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

As previously reported, SWMBH approved their operating budget, and all departments are functioning as they should. SWMBH, Chief Financial Officer, Tracy Dawson will be retiring. Garyl Guidry will become the new Chief Financial Officer. It's great to be in attendance at the board meeting on this evening.

Sarah Carmany:

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:

Lighthouse Autism Center Kalamazoo (East) 3744 Gull Road will be having their Open House on September 29, 2022. I visited the facility to welcome them on the eastside. My daughter got engaged. I've unfortunately lost many friends due to death. Thank you, ISK, for your great work!

Melissa Woosley:

I will be taking part in the SWMBH Public Recovery Festival and at an event in October about domestic violence.

Veronica McKissack:

The Kalamazoo County has approved its budget for FY22-23. Also, I'm happy to announce that I'm a new grandmother. There are some adjustments to the added new life, indeed.

Nkenge Bergan:

Congratulations to Veronica on becoming a grandmother. My son will be attending the University of Oregon to experience DUCK LIFE. He is officially a "DUCK." KVCC is partnering with ISK for the 1st Aid Mental Health training. Project Connect is happening on Wednesday, Oct 12th from 12N-3pm at the Kalamazoo County Fairgrounds. We want those in need to connect to services for, education, food, clothing, medical, finance, housing and employment.

Karen Longanecker:

I have been hearing tremendous comments about ISK the work that is being done, and the progress being made to supply access to services.

Meeting ended at 5:25PM.

Demeta J. Wallace
Administrative Coordinator
INTEGRATED Services of Kalamazoo



INTEGRATED Services of Kalamazoo (ISK) Board of Director's Meeting September 29, 2022 VI.a.

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

ISK - KCMHSAS Staff Present:

Jeff Patton, *CHIEF EXECUTIVE OFFICER*
Charlotte Bowser
Amy Rottman
Michael Schlack, *CORPORATE COUNSEL*
Alecia Pollard
Demeta Wallace

Call to Order:

Chair Longanecker welcomed all in attendance to the September 29, 2022, INTEGRATED Services of Kalamazoo Board meeting. The meeting was called to order at 4:01PM.

Agenda:

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

Citizen Time:

No citizens came forth.



Budget Amendment #3 (MOTION):

Member Krogh, "THIS AMENDMENT IS TO INCREASE THE REVENUE AND EXPENDITURES BUDGET BY \$3,031,389 TO TOTAL A NEW EXPENDITURE BUDGET OF \$111,359,324." Supported by Vice Chair Seals.

MOTION PASSED

Meeting ended at 4:11PM.

Demeta J. Wallace

Administrative Coordinator

INTEGRATED Services of Kalamazoo

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY II.01

AREA:	Governance		
SECTION:	Board Governance Process	PAGE:	1 of 2
SUBJECT:	BOARD PURPOSE AND BUSINESS DESCRIPTION	SUPERSEDES:	01/23/2012
		REVISED:	10/28/2019

PURPOSE/EXPLANATION

To identify the purpose and business description of the Board.

POLICY

The purpose of governance is that the Board, on behalf of the citizens of Kalamazoo County, guarantees the accountability of Integrated Services of Kalamazoo (ISK) by assuring that it (a) achieves appropriate results for the appropriate persons at an appropriate cost and (b) avoids unacceptable activities, conditions and decisions. In fulfillment of this charge the Board is committed to rigorous, continual improvement of its capability to define values and vision, seeking out community input.

To distinguish the Board's own unique business from the business of its staff, the Board will concentrate its efforts on the following business "outcomes" or outputs:

- A. The link between the organization and the citizens of Kalamazoo County.
- B. Written governing policies which, at the broadest levels, address:
 - 1. *Ends*
The outcomes, impacts, benefits of services provided for the persons served and their relative worth (what good for which needs and within the budget).
 - 2. *Executive Limitations*
Constraints on executive authority that establish the prudence and ethics boundaries within which all executive activity and decisions must take place.
 - 3. *Governance Process*
Specification of how the board conceives, carries out and monitors its own task.
 - 4. *Board-Chief Executive Officer Relationship*
How power is delegated and its proper use monitored; the Chief Executive Officer role, authority and accountability.


- C. The assurance of Chief Executive Officer (CEO) performance (against policies in B.1. and B.2.).

CHIEF EXECUTIVE OFFICER:



Jeff Patton
Chief Executive Officer

APPROVED:



Erik Krogh
Board Chair

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY V.01

AREA: Governance		
SECTION: Executive Limitations	PAGE: 1 of 3	
SUBJECT: TREATMENT OF PERSONS SERVED	SUPERSEDES: 10/26/2015	REVISED: 10/29/2018

PURPOSE/EXPLANATION

To define limitations of means regarding the treatment of persons served.

POLICY

- I. With respect to interactions with persons served or individuals applying to receive services, the Chief Executive Officer (CEO) shall not cause or allow conditions, procedures or decisions which are unsafe, disrespectful, unduly undignified, unnecessarily intrusive or which fail to provide appropriate confidentiality and privacy. According, he/she may not:
 - A. Use application forms or procedures that elicit information for which there is no clear necessity.
 - B. Use methods of collecting, reviewing, or storing information on persons served that fail to protect against improper access to the information elicited.
 - C. Maintain facilities that fail to provide a reasonable level of privacy, both audio and visual.
 - D. Fail to provide procedural safeguards for the transmission of information.
 - E. Fail to inform persons served of their options, choices, and conditions.
 - F. Fail to clearly communicate with persons served what may be expected and what may not be expected from the service offered.
 - G. Fail to provide persons served with grievance processes which they understand and feel free to use without fear of direct or indirect, intended or unintended retaliation or retribution when they believe that they have not been accorded a reasonable interpretation of their rights under this policy.

- H. Fail to provide a state-certified Recipient Rights System.
 - I. Fail to acknowledge and respect the right of competent persons served, the parent of a minor, or other properly designated surrogates to decline any, and all, forms of medical intervention, including life-saving or life-prolonging treatment for the person served. To the greatest extent possible, ISK will honor those decisions or the desires stated in properly executed advanced directives such as do-not-resuscitate orders and durable powers of attorney (see ISK administrative policy 31.03 [Decision Making Power of Attorney and Guardianship], procedure 31.03 01 [Advance Directives for Health Care Decisions] and procedure 31.01 02 [Guardianship and Alternatives to Guardianship for Adults Served]).
 - J. Fail to administer a person-centered process for persons receiving mental health services based on the principles within the Michigan Mental Health Code (MMHC) and the Michigan Department of Health and Human Services (MDHHS) Person-Centered Planning Best Practice Guidelines.
 - K. Fail to administer an Individual Treatment and Recovery Planning process for persons receiving substance use disorder services based on the principles within the Michigan Office of Recovery Oriented Systems of Care Policy #P-T-06 on Individualized Treatment and Recovery Planning.
 - L. Fail to include families in the planning and delivery of services using the principles from the MDHHS Family-Driven and Youth-Guided Policy & Practice Guideline.
- II. This policy will be monitored through internal mechanisms on a semi-annual basis.

REFERENCES


- Public Act 258 of 1974 (Mental Health Code) supplemented through Act 152 of 1996: Sec. 232
- Person-Centered Planning Practice Guideline Attachment P3.4.1.1 to MDHHS contract PIHP's (most current published version)
- MDHHS, Behavioral Health and Developmental Disabilities Administration, TREATMENT POLICY #06 on Individualized Treatment and Recovery Planning
- Family-Driven and Youth-Guided Policy & Practice Guideline, Attachment P6.8.6.1 to MDHHS contract PIHP's (most current published version)

CHIEF EXECUTIVE OFFICER



Jeff Patton
Chief Executive Officer

BOARD CHAIR



Erik Krogh
Board Chair



Community • Independence • Empowerment

TREATMENT OF PERSONS SERVED

October 2022

FY22 Data April 1, 2022-September 30, 2022

**Integrated Services of Kalamazoo
Treatment of Persons Served Report
October 2022**

EXECUTIVE LIMITATION POLICY:

“With respect to interactions with persons served, or individuals applying to receive services, the Chief Executive Officer shall not cause or allow conditions, procedures, or decisions which are unsafe, disrespectful, unduly undignified, unnecessarily intrusive, or which fail to provide appropriate confidentiality and privacy.”

ACCORDINGLY, THE CHIEF EXECUTIVE OFFICER MAY NOT:

- A. Use application forms or procedures that elicit information for which there is no clear necessity.**

Response:

Forms (paper and electronic) are based on the Michigan Department of Health and Human Services requirements and accreditation standards. Each element of the clinical record has been cross referenced with external requirements/standards to help ensure that Integrated Services of Kalamazoo (ISK) expectations are set on necessity.

Integrated Services of Kalamazoo (ISK) is compliant with this requirement.

- B. Use methods of collecting, reviewing, or storing information on persons served that fails to protect against improper access to the information elicited.**

Response:

All information of persons served is managed by provider contract, business associate agreements, and policy boundaries; these include recipient rights, compliance, and quality management policies. Information on persons served is safeguarded and limited only to those with a need to access the information. ISK has processes in place to monitor appropriate access to protected health information of persons served in the electronic health record. ISK also holds a Breach Notification policy that outlines expectations and processes to follow in the occurrence of a potential or actual breach.

ISK is compliant with this requirement.

- C. Maintain facilities that fail to provide a reasonable level of privacy, both audio and visual.**

Response:

All business conducted with persons served is done in private areas or in places determined by the individual. If complaints occur in this area, the

Office of Recipient Rights and/or the Privacy Officer will investigate and recommend corrective action(s) as needed.

ISK is compliant with this requirement.

D. Fail to provide procedural safeguards for the transmission of information.

Response:

Recipient Rights, Compliance, and Information Management policies are in place in order to protect the confidentiality of persons served. All clinicians working out in the community have been supplied with computers that have safeguards against security breaches. ISK Compliance and Information Management takes steps to ensure the HIPAA compliant platforms are utilized for telehealth appointments. Other devices that have access to confidential information of persons served are encrypted for security and protection. ISK also holds a Breach Notification policy that outlines expectations and processes to follow in the occurrence of a potential or actual breach. ISK has implemented two-factor authentication to safeguard against outside threats and access into the ISK system. ISK staff receive training and ongoing reminders related to external threats, including phishing attempts, and protection of protected health information of persons served.

ISK is compliant with this requirement.

E. Fail to inform persons served of their options, choices and conditions.

Response:

Intake admission procedures, recipient rights policies and person-centered planning, all work toward informing the individual of their options and choices.

ISK is compliant with this requirement.

F. Fail to establish with persons served, a clear contract of what may be expected and what may not be expected from the services offered.

Response:

When starting services, individuals are given the Customer Services Handbook, which provides extensive information on services and expectations. Individuals are provided information on services, the person-centered planning process, and program expectations. The signature of each person served is obtained on relevant documents to help ensure that all required information is clearly and adequately provided to each individual.

ISK is compliant with this requirement.

- G. Fail to provide persons served with grievance processes which they understand and feel free to use without fear of direct or indirect, intended or unintended retaliation or retribution when they believe that they have not been accorded a reasonable interpretation of their rights under this policy.**

Response

Each person served of mental health services is informed of their rights under the Michigan Mental Health Code, as well as their right to access the grievance and appeal process. The Office of Recipient Rights notifies the recipient/complainant of their right to appeal the findings of each Recipient Rights investigation. ISK policy and the Mental Health Code include provisions that forbid retaliation/harassment in conjunction with rights activity.

ISK is compliant with these requirements.

- H. Fail to provide a state-certified recipient rights system.**

Response

The Michigan Department of Health and Human Services Office of Recipient Rights found ISK to be in full compliance with recipient rights systems standards in December 2021. ISK is certified through the fall of 2024.

ISK is compliant with this requirement.

- I. Fail to acknowledge that competent persons served, or their surrogates have the right to decline any and all forms of medical intervention, including lifesaving or life-prolonging treatment...**

Response

General information about Advance Directives is included in the Customer Handbook, which is given to each individual at the time of starting ISK funded services. Advance Directives information is again offered to person served, as appropriate, whenever an individual plan of service is completed.

ISK is compliant with these requirements.

- J. Fail to administer a Person-centered Process for persons receiving mental health services**

- K. Fail to include families in the planning and delivery of services.**

Response

ISK operates under the Person/family-centered Planning Process Policy for all mental health. The ISK Quality Monitoring Review process continually reviews a sampling of plans to ensure that plans are follow the applicable policies and guidelines.

ISK is compliant with these requirements.

OFFICE OF RECIPIENT RIGHTS

SUBSTANTIATED COMPLAINTS - DATA

April 1, 2022-September 30, 2022

TOTAL FOR ALL CATEGORIES: 101

CATEGORY:	#	CATEGORY	#
<u>Abuse/Neglect</u>		<u>Civil Rights</u>	
Abuse I	0	Religion Practice	0
Abuse II	4	Search & Seizure	2
Abuse III	9		
Neglect I	1		
Neglect II	4		
Neglect III	31		
Sexual Abuse	0		
<u>Admission/Discharge</u>		<u>Photographs, Fingerprints,</u>	
Second Opinion/denial of	0	Audiotapes, One-Way Glass	0
Hospitalization			
<u>Communications/Visits</u>		<u>Rights Protection System</u>	
Access to Phone	0	Access to Rights System	0
Visitation	0	Comp. Investigation Process	0
Uncensored mail	0	Failure to Report	0
		Retaliation/Harassment	1
<u>Confidentiality</u>		<u>Suitable Services</u>	
Disclosure of Confidential Info.	5	MH Services Suited to Condition	18
Withholding of Information	0	Informed Consent	2
		Services of MH Professional	0
<u>Family Rights</u>		<u>Treatment Environment</u>	
Dignity and Respect	3	Safe Environment	2
		Sanitary/Humane Environment	2
		Dignity/Respect	11
		Nutrition	0
<u>Financial</u>		<u>Treatment Planning</u>	
Safeguarding money	0	Person-Centered Planning	1
		Timely Development of Plan	2
		Treatment Planning: Other	0
<u>Freedom of Movement</u>		<u>Labor and Compensation</u>	
Seclusion	1	Prior Consent	0
Restrictions/Limitations	1		
Restraint	0		
<u>Personal Property</u>			
Possession and Use	1		

All substantiated complaints result in remedial action, per the Michigan Mental Health Code.

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY II.06

AREA:	Governance		
SECTION:	Board Governance Process	PAGE:	1 of 1
SUBJECT:	ENDS DEVELOPMENT PROCESS	SUPERSEDES:	10/22/2012
		REVISED:	10/28/2019

PURPOSE/EXPLANATION


To define the Board's process for the development of Ends.

POLICY

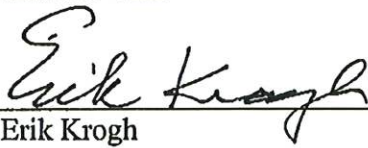
The Board is responsible to develop Ends policies that define the needs that the organization will satisfy, for who and within the budget. In order to promote the development of appropriate and meaningful Ends policies, the following steps will be taken:

- A. Gather information and build knowledge regarding an identified topic through research and the exploration of current and state of the art practices, trends, etc.
- B. Gather input from the community and stakeholders, including:
 1. ownership (citizens)
 2. persons served and their families
 3. advocates
 4. providers
- C. Board discussion, development and approval of the Ends for each population.
- D. Request the Chief Executive Officer (CEO) and his/her staff to develop and propose to the Board a means to measure each of the Ends statements for each of the populations. The proposed means to measure will be presented to the Board for their approval.
- E. Review and assess current information regarding the population and stakeholder expectation on outcomes input and update the ends statements when needed.

CHIEF EXECUTIVE OFFICER


 Jeff Patton
 Chief Executive Officer

APPROVED


 Erik Krogh
 Board Chair

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY IV.01

AREA: Governance	
SECTION: System Governance	PAGE: 1 of 2
SUBJECT: ENDS FOR INDIVIDUALS SERVED	SUPERSEDES: 05/23/2016 REVISED: 10/29/2018

PURPOSE/EXPLANATION

To identify the ends which the Board desires to achieve for Integrated Services of Kalamazoo (ISK) populations served, which include:

- Children with Serious Emotional Disturbances
- Children with Intellectual/Developmental Disabilities
- Adults with Mental Illness
- Adults with Intellectual/Developmental Disabilities
- Individuals with Substance Use Disorders

These ends consist of *what benefits* for *what people* at *what cost*. Achievement of these ends will promote an effective service delivery system, which fulfills the mission of the agency and is consistent with the requirements of the Michigan Department of Health and Human Services (MDHHS) and Certified Community Behavioral Health Clinic (CCBHC).

POLICY

- I. Individuals will receive services and supports which enables them to be healthy, safe, and to reach their full potential. Each individual will experience services and supports that are individualized, strength-based, culturally & linguistically competent, home, community and school based, effective, sustainable, and continuously improving in quality. Services and supports will be delivered in the least restrictive, most natural settings possible.
- II. To accomplish these ends, goals and objectives will be set in the following domain areas for each population listed above:
 - A. Employment and Education
 - B. Living Arrangements
 - C. Recovery / Self-Determination
 - D. Health and Wellness

E. Family and Community Life

III. The Board established ends will be monitored on an ongoing basis by ISK staff and through semi-annual reports from the "Dashboard and Outcomes Reporting System".

REFERENCES

A. Public Act 258 of 1974 (Mental Health Code) supplemented through ACT 152 of 1996: Sections 206 and 208

CHIEF EXECUTIVE OFFICER



Jeff Pagon
Chief Executive Officer

APPROVED



Erik Krogh
Board Chair

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY I.03

AREA:	Governance	
SECTION:	Mission/Vision/Values & Bylaws	PAGE: 1 of 3
SUBJECT:	GUIDELINES FOR BOARD MEMBER APPOINTMENTS	SUPERSEDES: 10/31/2019 REVISED: 10/28/2019

PURPOSE/EXPLANATION

To outline the process in assisting the Kalamazoo County Board of Commissioners for the appointment of ISK Board members.

POLICY

- I. ISK desires broad community representation on its Board and it shall be the policy of this organization to actively seek members who will represent the individuals being served by ISK, in terms of geographic area (within Kalamazoo County), race, ethnicity, sex, gender identity, disability, age, sexual orientation and types of disorders for which ISK provides services (mental illness, serious emotional disorders, substance use disorders and developmental/intellectual disorders).
- II. When a vacancy occurs on the ISK Board, due to the resignation of a County Commissioner, the County Board of Commissioners may appoint a member from the Board of Commissioners.
- III. All other vacancies will be handled with the following process:
 - A. During a regularly scheduled board meeting the ISK Board will appoint a selection committee.
 - B. ISK will notify the County Board of Commissioners of the vacancy and its beginning of the candidate selection process.
 - C. The candidate selection committee will oversee the solicitation and collection of applications from interested individuals. All applications will be delivered to the Executive Assistant for processing.
 - D. The candidate selection committee will review the applications and select up to three candidates who are qualified under state law and who the committee determines would be likely to be a strong addition to the ISK Board. The applications of those individuals will be submitted to the County Board of Commissioners to continue the County interview process.

- E. The candidate selection committee will consider the following requirements, pursuant to section 222 of the Michigan Mental Health Code (MCL 330.1222), Federal Rules 42 CFR 455.104-106 and desired demographic factors pursuant to the ISK stated goals of representing all individuals served by ISK, when reviewing applications:
1. The composition of the Board must be representative of providers of behavioral health services, recipients or primary consumers of behavioral health services, agencies and occupations having a working involvement with behavioral health services and the general public. At least 51% of the Board must be primary consumers or family members, at least two members must be primary consumers.
 2. Not more than four members of the Board may be Kalamazoo County Commissioners and not more than half of the total board members may be state, county or local public officials (defined as an individual serving in an elected or appointed public office or employed more than 20 hours per week by an agency of federal, state, city or local government).
 3. No more than half (50%) of Board members may derive more than 10% of their annual income from the health care industry.
 4. Board members must be able to meet the requirements of Federal Rules 42 CFR 455.104-106, which detail disclosure requirements for the purpose of monitoring and determining fraud, waste and abuse of Medicaid funds.
 5. Board members shall have their primary place of residence in Kalamazoo County.
 6. No person employed by the Michigan Department of Health and Human Services (MDHHS) or Integrated Services of Kalamazoo (ISK) is eligible to serve on the Board.
 7. No person who is a party to a contract with ISK or administering or benefiting financially from a contract with ISK is eligible to serve on the Board.
 8. No person serving in a policy-making position with an agency under contract with ISK is eligible to serve on the Board.
 9. To the extent possible, individuals appointed to the ISK Board should include people who represent all individuals being served by ISK. Therefore, demographic factors such as geographic area, race, ethnicity, sex, gender identity, disability, age, sexual orientation and type of disorders for which ISK provides services will be considered.
- F. One or more of the members of the candidate selection committee will attend the County Board of Commissioners interviews.
- G. The County Board of Commissioners appoints the selected individual as a member of the ISK Board.

- IV. It shall be a requirement of serving on the ISK Board that upon appointment, and when requested from time to time, Board members will confidentially provide their name, address, date of birth, Social Security number and other information as necessary to comply with federal or state laws and regulations.

REFERENCE

- Michigan Mental Health Code (MCL 330.1222)

CHIEF EXECUTIVE OFFICER



Jeff Patton
Chief Executive Officer

APPROVED



Erik Krogh
Board Chair

Integrated Services of Kalamazoo (ISK)
Customer Services Report to the Board for Q 3 and 4 of FY 2021-2022

ISK committee/project participation:

Committee/Project
Quality Improvement Committee
Provider Quality Monitoring Reviews/Audits
Policy Development/Review
Management Team
JETT Committee (ad-hoc)
Customer Advisory Council (<i>see separate report</i>)
PCE medical record conversion (ad-hoc)

SWMBH committee/project participation:

Committee/Project
Customer Services
Coordination of Customer Notices for MI Health Link
Quality Improvement Committee (ad hoc)
Annual Customer Survey project liaison
Preparation for ISK's SWMBH Delegation Review

Customer Services Duties/assignments:

ISK 2022 Planned Accreditation Review with CARF International: The CARF Audit was held virtually April 20-22. ISK received a 3-year accreditation as a result of the process. The ISK Quality Improvement Plan (QIP) – to ensure continued compliance with standards - was due to CARF 9/12/22 and on 10/3, ISK learned it had been accepted by CARF. Next steps are to ensure that the commitments ISK made in the POC are carried out as outlined. Most parts are slated for 12/1/22 or before.
Root Cause Analyses for Sentinel Events: Within this fiscal year, ISK has identified 11 events as Sentinel. Per internal, SWMBH and MDHHS protocols, Utilization Management review of each case is conducted, and Root Cause Analysis of each case is completed to identify any improvement opportunities ISK can undertake to reduce the likelihood of similar incident from occurring in future. After each RCA team meets, the ISK Oversight Committee (mostly senior management members) reviews a summary of each case for management support of the improvement plans.
ISK Endowment Fund. For FY 20-21, ISK granted a total of 6 full year awards totaling \$23,500. Additionally, ISK awarded 33 emergency funding requests totaling \$10,264. For FY 22-23, ISK has reviewed and approved 9 full year applications for awards totaling \$38,000. Emergency awards are anticipated to be reviewed/granted as the full awards for each ISK department/provider agency utilize their full-year awards and more dollars may be needed to fund customer needs outside of ISK services and insurance covered care, as well as needs that community resources can cover.
Trauma-Informed Care Team: Continue to be trainer for administrative staff for "Step 2" classes. CS Manager participated in 4 total sessions in this FY.
Suicide Prevention Planning Team: CS Manager continues membership on the planning committee. ISK has continued to offer both Mental Health First Aid and safeTALK educational sessions for our community. For this fiscal year, CS Manager has co-taught in 18 Adult MHFA classes along with 1 Youth MHFA class and co-taught 1 safeTALK class.
MDHHS data request of CMH/PIHP system: ISK (and the other CMH's in Michigan) remains responsible to submit data to MDHHS (through the PIHP) identifying all customer Grievances and Appeals as well as service "denials". Within the new medical record product, it is anticipated that the CS office can pull data without IT intervention moving forward and will be able to access the same data as the other users of the PCE product. <i>ISK FY 21-22 Grievance and Appeal data summary is an attachment to this report.</i>

State-wide meetings/committees:

Committee	Activity
Customer Services	<ul style="list-style-type: none"> Continued to participate in meetings and peer collaboration. Advocate for enhancements to the new ISK medical record system – PCE through state-wide work group.

Integrated Services of Kalamazoo (ISK)
Customer Services Report to the Board for Q 3 and 4 of FY 2021-2022

Community Education Activities

- Community event scheduling and participation continue to be altered by the continuing challenges of COVID-19. However, we were able to participate in a few of our traditional events such as:
 - Project Connect
 - Wellness and Recovery Fair
 - Gryphon Place Suicide Prevention/Awareness Walk
 - KVCC Vibe Fest
- Customer Services has enlisted the assistance of the Policy Planning and Innovation for direction on ISK participation in community events as well as securing public-facing materials.

Questions about this report can be sent to Teresa Lewis, LBSW at 553-7000 or tlewis@iskzoo.org.

Southwest Michigan Behavioral Health
Customer Grievance and Appeal Data
FY 2021-22

KALAMAZOO OVERALL TOTALS

Activity	Outcome	Q1	Q2	Q3	Q4	Total Events:
Local Appeals Including: Termination Reduction Suspension of current services and Denial of additional services	Withdrawn					0
	Decision Upheld/Affirmed		4	3	3	10
	Decision Overturned	1		1	1	3
	Settled/Resolved		1	1		2
Access 2nd Opinions	Withdrawn					0
	Decision Upheld/Affirmed					0
	Decision Overturned					0
	Settled/Resolved					0
Hospital 2nd Opinions	Withdrawn					0
	Decision Upheld/Affirmed		1			1
	Decision Overturned					0
	Settled/Resolved					0
State-level Appeal intervention	Withdrawn					0
	Decision Affirmed					0
	Decision Overturned					0
	Split Resolution					0
	Settled/Resolved					0
Grievances	Withdrawn	1				1
	Information only					0
	Settled/Resolved		5	1	3	9
	Recipient Rights Referral					0
TOTAL events:		2	11	6	7	26

Data Review and Recommendations

Type of Data: Customer Grievances and Appeals and Person-Centered Planning survey feedback

Time Period of data reviewed: FY 21-22 data is on the December 2022 meeting agenda.

Summary of findings: unable to determine at this time.

Recommendations for Board: Board will be updated if there are recommendations from CAC data review.

Consultations

Topic: ISK CCBHC Implementation

Requesting Department: CCBHC Project Management

Recommendations/Discussion Points of CAC:

- Members invested in how new ISK assessments are rolling out.
- Members reviewed the new Emergency/Access building plans and offered suggestions regarding open hours, staffing numbers.

CCBHC remains in the agenda 3-4 times this fiscal year.

Topic: ISK Suicide Prevention Grants/Projects

Requesting Department: MIA/Youth Grants

Recommendations/Discussion Points of CAC:

- Members remain invested how the care pathways will be developed and shared personal recommendations for how staff can be encouraged to ask questions and guide suicide-prevention plans on individual bases.
- Staff training is an interest of the CAC members. And they have shared personal experiences of staff who they have felt were not fully aware of best practices for how to address their stated suicidal ideation.

Suicide Prevention has been discussed at least 2 times in this fiscal year. Next scheduled conversation is January 2023. Members are looking forward to updates on topics discussed thus far.

Project Plans

Project: Identifying how to connect with appropriate medical and mental health services and supports.

Status Update: While still in the works, members have generated a document they hope to share with ISK staff and providers regarding when it is most practical to contact primary care, emergency medical care, mental health care and emergency mental health care. Members are modeling their work on that of several primary care offices who have information for patients about contacting primary/urgent/emergency care.

Community Activities

Unfortunately, the CAC members were unable to participate in activities as we have in past years. ISK was unable to identify staff to support the Walk-A-Mile this fiscal year due to the event timing and staff member commitments. Members have requested that WAM be a focus for the new year as they enjoy representing ISK at the event when it is held.

Members do continue to discuss local events and activities such as the Wellness and Recovery Fair and Gryphon Place Suicide Awareness/Prevention Walk and we share the details of “how to” become involved in these activities at meetings.

Other

During this fiscal year, the CAC has been able to increase membership. We have gained 5 new active members. Our meeting location also changed from the 418 location to 610 Burdick. And we have been able to maintain availability of phone-in participation for members who need/want to continue to remotely participate in the meeting discussions.

For more information

- If board members would like to more information about the CAC, please contact Teresa Lewis at 269-553-7000 or TLewis@iskzoo.org

INTEGRATED
SERVICES OF
KALAMAZOO



Period Ended
September 30,
2022

Monthly Finance
Report

INTEGRATED SERVICES OF KALAMAZOO

Statement of Net Position

September 30, 2022

	September 2021 (unaudited)	September 2022
Assets		
Current assets		
Cash and investments	\$ 33,724,239	\$ 27,241,982
Accounts receivable	5,279,807	8,795,177
Due from other governments	357,261	7,001,457
Prepaid items	1,258,697	838,468
Total current assets	<u>40,620,004</u>	<u>43,877,084</u>
Non-current assets		
Capital assets, net of accumulated depreciation	9,117,905	9,549,060
Net pension asset, net of deferred outflows	4,937,092	5,722,229
Total non-current assets	<u>14,054,997</u>	<u>15,271,289</u>
Total assets	<u>54,675,001</u>	<u>59,148,373</u>
Liabilities		
Current liabilities		
Accounts payable	\$ 1,571,174	\$ 3,467,898
Due to other governments	17,443,520	1,476,243
Due to providers	4,750,623	7,040,169
Accrued payroll and payroll taxes	1,392,318	2,822,607
Unearned revenue	4,085,509	597,509
Total current liabilities	<u>29,243,144</u>	<u>15,404,426</u>
Non-current liabilities		
Long-term debt	4,415,002	-
Total liabilities	<u>33,658,146</u>	<u>15,404,426</u>
Net position		
Designated	10,010,489	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	840,889	18,336,144
Net position	<u>\$ 21,016,855</u>	<u>\$ 43,743,946</u>

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

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2021 through September 30, 2022

Percent of Year is 100.00%

	Amended 2022 BUDGET	YTD Totals 9/30/22	Remaining Budget	Percent of Budget - YTD
Operating revenue				
Medicaid:				
Traditional Capitation	\$ 66,337,125	\$ 70,461,401	\$ (4,124,276)	106.22%
Healthy Michigan Capitation	10,040,766	11,810,742	(1,769,976)	117.63%
Autism Captiation	6,474,379	5,929,041	545,338	91.58%
Settlement	-	(25,624,046)	25,624,046	0.00%
State General Fund:				
Formula Fundings	3,826,552	3,826,552	-	100.00%
PY General Fund Carryforward	173,931	173,931	-	100.00%
Settlement	-	(210,582)	210,582	0.00%
CCBHC Demonstration	-	7,260,905	(7,260,905)	0.00%
CCBHC Accrual	-	32,472,804	(32,472,804)	0.00%
County Allocation	1,550,400	1,550,400	-	100.00%
Client Fees	439,000	467,420	(28,420)	106.47%
SUD Block Grant	111,957	111,957	(0)	100.00%
Other grant revenue	21,026,249	18,980,772	2,045,477	90.27%
Other earned contracts	1,371,440	948,085	423,355	69.13%
COFR	28,150	7,231	20,919	25.69%
Interest	69,250	53,845	15,405	77.75%
Local revenue	10,000	1,459	8,541	0.00%
Total operating revenue	\$ 111,459,199	\$ 128,221,918	\$ (16,762,719)	115.04%
Operating expenses				
Salaries and wages	\$ 20,765,385	\$ 20,897,235	\$ (131,850)	100.63%
Employee benefits	7,443,411	6,377,871	1,065,540	85.68%
Staff development	219,413	127,705	91,708	58.20%
Payments to providers	60,615,677	63,985,607	(3,369,930)	105.56%
Administrative contracts	15,333,349	15,747,740	(414,391)	102.70%
IT software and equipment	298,497	654,525	(356,028)	219.27%
Client transportation	25,410	17,855	7,555	70.27%
Staff travel	376,557	207,006	169,551	54.97%
Office expenses	429,647	428,528	1,119	99.74%
Insurance expense	94,481	112,656	(18,175)	119.24%
Depreciation expense	321,183	309,753	11,430	96.44%
Utilities	761,710	882,099	(120,389)	115.81%
Facilities	1,248,520	88,978	1,159,542	7.13%
Prior year adjustment	-	48,217	(48,217)	0.00%
Total operating expenses	\$ 107,933,240	\$ 109,885,774	\$ (1,952,534)	101.81%
Change in net position	3,525,959	18,336,144	\$ (14,810,185)	
Beginning net position	25,407,802	25,407,802		
Ending net position	\$ 28,933,761	\$ 43,743,946		

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

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2021 through September 30, 2022

Percent of Year is 100.00%

	Specialty Services			Healthy Michigan			Autism			SUD Block Grant			Totals		
	YTD Budget	YTD Totals 9/30/22		YTD Budget	YTD Totals 9/30/22		YTD Budget	YTD Totals 9/30/22		YTD Budget	YTD Totals 9/30/22		YTD Budget	YTD Totals 9/30/22	Variance
Operating revenue															
Medicaid:															
Traditional Capitation	\$ 66,337,125	\$ 70,461,401	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 66,337,125	\$ 70,461,401	\$ 4,124,276	
Healthy Michigan Capitation	-	-	-	10,040,766	11,810,742	-	-	-	-	-	-	10,040,766	11,810,742	1,769,976	
Autism Capitation	-	-	-	-	-	-	6,474,379	5,929,041	-	-	-	-	-	5,929,041	(545,338)
Settlement Estimate	6,351,925	(17,559,241)	(5,533,977)	(5,533,977)	(8,156,111)	(525,424)	203,263	(111,957)	-	-	-	292,524	(25,624,046)	(25,916,570)	
Client Fees	439,000	467,420	-	-	-	-	-	-	-	-	-	439,000	467,420	28,420	
SUD Block Grant	-	-	-	-	-	-	-	-	-	111,957	111,957	111,957	111,957	0	
Total operating revenue	\$ 73,128,050	\$ 53,369,581	\$ 4,506,789	\$ 4,506,789	\$ 3,654,631	\$ 5,948,955	\$ 6,132,304	\$ 111,957	\$ 111,957	\$ 0	\$ 83,695,751	\$ 63,156,516	\$ (20,539,235)		
Operating expenses															
Youth Programs	\$ 6,437,461	\$ 2,703,423	\$ -	\$ -	\$ -	\$ 5,314,734	\$ 5,818,720	\$ -	\$ -	\$ -	\$ 11,752,195	\$ 8,522,143	(3,230,052)		
MIA Programs	22,250,469	15,319,153	3,685,092	291,551	3,315,268	-	-	-	-	-	25,935,561	18,634,421	(7,301,140)		
IDDA Programs	34,108,219	31,916,837	2,911,551	49,674	58,524	-	-	-	-	-	34,399,770	31,975,361	(2,424,409)		
Integrated Health Clinic	2,858,857	701,036	479,285	479,285	93,955	-	-	-	-	-	2,908,531	794,991	(2,113,540)		
Administration	7,815,452	2,729,130	-	-	186,885	\$ 632,656	313,584	-	-	-	8,927,393	3,229,599	(5,697,794)		
Homeless Shelter	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Non-DCH Activity Expenditures	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Total operating expenses	\$ 73,470,458	\$ 53,369,580	\$ 4,505,602	\$ 4,505,602	\$ 3,654,631	\$ 5,947,390	\$ 6,132,304	\$ -	\$ -	\$ -	\$ 83,923,450	\$ 63,156,515	\$ (20,766,935)		
Change in net position	(342,408)	0	1,186	1,186	(0)	1,565	0	111,957	0	0	(227,699)	1			

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2021 through September 30, 2022

Percent of Year is 100.00%

	State General Fund			CCBHC			Other Funding Sources			Totals		
	YTD	YTD Totals	9/30/22	YTD	YTD Totals	9/30/22	YTD	YTD Totals	9/30/22	YTD	YTD Totals	9/30/22
	Budget	Budget		Budget	Budget		Budget	Budget		Budget	Budget	
Operating revenue												
General Fund	\$ 3,652,621	\$ 3,826,552	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,652,621	\$ 3,826,552	\$ 173,931
Projected GF Carryforward	173,931	173,931	-	-	-	-	-	-	-	173,931	173,931	-
CCBHC Demonstration	-	-	39,733,709	-	39,733,709	-	-	-	-	-	39,733,709	39,733,709
Other Federal and State Grants	-	-	-	-	-	-	21,624,310	18,980,772	-	21,624,310	18,980,772	(2,643,538)
Earned Revenue	-	-	-	-	-	-	1,371,440	948,085	-	1,371,440	948,085	(423,355)
COFR Revenue	-	-	-	-	-	-	28,150	7,231	-	28,150	7,231	(20,919)
Interest	-	-	-	-	-	-	67,500	53,599	-	67,500	53,599	(13,901)
County Allocation	-	-	-	-	-	-	1,550,400	1,550,400	-	1,550,400	1,550,400	-
Local Revenue	-	-	-	-	-	-	10,000	1,459	-	10,000	1,459	(8,541)
Restricted Interest	-	-	-	-	-	-	1,750	246	-	1,750	246	(1,504)
Transfer from GF	-	-	-	-	-	-	-	2,855,972	-	-	2,855,972	2,855,972
Settlement Revenue (Expense)	(696,888)	(210,582)	-	-	-	-	-	(696,888)	-	(696,888)	(210,582)	486,306
Total operating revenue	\$ 3,129,664	\$ 3,789,901	\$ -	\$ -	\$ 39,733,709	\$ 24,653,550	\$ 24,397,764	\$ 27,783,214	\$ 67,921,374	\$ 27,783,214	\$ 67,921,374	\$ 40,138,160
Operating expenses												
Youth Programs	\$ 239,743	\$ 93,044	\$ -	\$ -	\$ 1,903,203	\$ -	\$ -	\$ -	\$ -	\$ 239,743	\$ 1,996,247	\$ 1,756,504
MIA Programs	1,623,618	459,562	-	-	8,429,556	-	917,461	814,530	-	2,541,079	9,703,648	7,162,569
IDDA Programs	291,358	101,183	-	-	1,884,071	-	152,943	169,095	-	444,301	2,154,349	1,710,048
Integrated Health Clinic	8,434	57,360	-	-	2,978,851	-	-	-	-	8,434	3,036,212	3,027,778
DCO Contracts	-	-	-	-	5,317,665	-	-	-	-	-	5,317,665	5,317,665
Other Federal and State Grants	-	-	-	-	-	-	21,162,568	9,120,580	-	21,162,568	9,120,580	(12,041,988)
CERA Grant	-	-	-	-	-	-	-	11,327,731	-	-	11,327,731	11,327,731
HUD Grants	-	-	-	-	-	-	-	1,015,230	-	-	1,015,230	1,015,230
Managed Care Administration	257,498	31,453	-	-	1,105,511	-	1,456,213	33,105	-	1,713,711	1,170,070	(543,641)
Homeless Shelter	-	-	-	-	-	-	277,652	337,662	-	277,652	337,662	60,010
Transfer from GF	-	2,855,972	-	-	-	-	-	-	-	-	2,855,972	2,855,972
Local match expense	-	-	-	-	-	-	1,240,146	1,389,551	-	1,240,146	1,389,551	149,405
Prior year adjustment	-	-	-	-	-	-	-	48,217	-	-	48,217	48,217
Non-DCH Activity Expenditures	-	-	-	-	-	-	140,589	112,097	-	140,589	112,097	(28,492)
Total operating expenses	\$ 2,420,651	\$ 3,598,574	\$ -	\$ -	\$ 21,618,857	\$ 25,347,572	\$ 24,367,799	\$ 27,768,223	\$ 49,585,230	\$ 27,768,223	\$ 49,585,230	\$ 21,817,007
Change in net position	709,013	191,327	-	-	18,114,852	(694,022)	29,965	\$ 14,991	18,336,144	18,336,144	18,336,144	18,321,152

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

INTEGRATED SERVICES OF KALAMAZOO

CCBHC

October 1, 2021 through September 30, 2022
Percent of Year is 100.00%

	CCBHC Medicaid	CCBHC Healthy MI	CCBHC Non-Medicaid	CCBHC YTD Totals
Operating revenue				
Prepayment	\$ 7,260,905	\$ -	\$ -	\$ 7,260,905
Remaining CCBHC revenue due	25,730,247	6,742,558	-	32,472,804
Total CCBHC Revenue (PPS-1 of \$445.73 x encounters)	\$ 32,991,152	\$ 6,742,558	\$ -	\$ 39,733,709
Operating expenses				
Internal services	\$ 12,765,553	\$ 2,608,956	\$ 926,682	\$ 16,301,192
DCO Contracts	4,164,292	851,076	302,296	5,317,665
Total operating expenses	\$ 16,929,846	\$ 3,460,033	\$ 1,228,978	\$ 21,618,857
Operating change in net position	16,061,306	3,282,525	(1,228,978)	18,114,853
Reclassification to cover Non-Medicaid	(1,228,978)	-	1,228,978	-
Total change in net position	14,832,328	3,282,525	-	18,114,853

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YOUTH COMMUNITY INPATIENT SERVICES
Report Period: October 1st, 2021 through September 30th, 2022

UTILIZATION COMPARISONS FY 21/22										
MONTH	FY 20/21 Actual		FY 21/22 Budget		FY 21/22 Actual		Days Difference (Unfavorable)	Cost Difference (Unfavorable)	Cost YTD (Unfavorable)	
	Days	Dollars	Days	Dollars	Days	Dollars				
OCTOBER	49	\$51,109	23	\$19,776	55	\$54,195	(32)	(\$34,419)	(\$34,419)	
NOVEMBER	67	\$64,640	23	\$19,776	7	\$7,688	16	\$12,088	(\$22,331)	
DECEMBER	27	\$24,571	23	\$19,776	29	\$25,836	(6)	(\$6,060)	(\$28,391)	
JANUARY	33	\$7,131	23	\$19,776	37	\$34,540	(14)	(\$14,764)	(\$43,155)	
FEBRUARY	9	\$8,714	23	\$19,776	69	\$88,647	(46)	(\$48,871)	(\$92,026)	
MARCH	41	\$42,617	23	\$19,776	48	\$46,874	(25)	(\$27,098)	(\$119,124)	
APRIL	22	\$22,022	23	\$19,776	56	\$82,861	(33)	(\$63,085)	(\$182,209)	
MAY	29	\$7,544	23	\$19,776	54	\$46,668	(31)	(\$26,892)	(\$209,101)	
JUNE	23	\$25,540	23	\$19,776	74	\$67,193	(51)	(\$47,417)	(\$256,518)	
JULY	18	\$16,614	23	\$19,776	29	\$31,468	(6)	(\$11,692)	(\$268,210)	
AUGUST	22	\$22,523	23	\$19,776	26	\$27,842	(3)	(\$8,066)	(\$276,276)	
SEPTEMBER	67	\$64,966	23	\$19,776	19	\$22,420	4	(\$2,644)	(\$278,920)	
TOTALS	407	\$357,991	274	\$237,312	503	\$516,232	(227)	(\$278,920)		
MONTHLY AVERAGES	34		23		42					
GROSS ANNUAL COST		\$357,991		\$237,312		\$516,232		(\$278,920)		

Favorable/(Unfavorable) by Funding Source:

Medicaid	(288,067)
General Fund	9,147
Total	(278,920)

VII.b.

MI ADULT COMMUNITY INPATIENT SERVICES
Report Period: October 1st, 2021 through September 30th, 2022

UTILIZATION COMPARISONS FY 21/22										
MONTH	FY 20/21 Actual		FY 21/22 Budget		FY 21/22 Actual		Days Difference Favorable (Unfavorable)	Cost Difference Favorable (Unfavorable)	Cost YTD Favorable (Unfavorable)	
	Days	Dollars	Days	Dollars	Days	Dollars				
OCTOBER	433	\$409,023	395	\$373,807	334	\$325,468	61	\$48,338	\$48,338	
NOVEMBER	420	\$401,675	395	\$373,807	448	\$435,562	(53)	(\$61,755)	(\$13,417)	
DECEMBER	461	\$440,721	395	\$373,807	506	\$491,368	(111)	(\$117,562)	(\$130,979)	
JANUARY	499	\$478,423	395	\$373,807	503	\$488,401	(108)	(\$114,594)	(\$245,573)	
FEBRUARY	459	\$439,718	395	\$373,807	406	\$394,694	(11)	(\$20,888)	(\$266,461)	
MARCH	370	\$354,552	395	\$373,807	515	\$500,263	(120)	(\$126,457)	(\$392,918)	
APRIL	410	\$392,870	395	\$373,807	441	\$429,586	(46)	(\$55,779)	(\$448,697)	
MAY	495	\$474,875	395	\$373,807	450	\$437,305	(55)	(\$63,499)	(\$512,196)	
JUNE	487	\$467,958	395	\$373,807	523	\$508,312	(128)	(\$134,506)	(\$646,702)	
JULY	473	\$453,758	395	\$373,807	558	\$542,730	(163)	(\$168,924)	(\$815,626)	
AUGUST	510	\$489,650	395	\$373,807	496	\$482,335	(101)	(\$108,529)	(\$924,155)	
SEPTEMBER	521	\$501,420	395	\$373,807	589	\$572,644	(194)	(\$198,837)	(\$1,122,992)	
TOTALS	5,538	\$5,304,644	4,745	\$4,485,679	5,769	\$5,608,670	(1,029)	(\$1,122,992)		
MONTHLY AVERAGES	462		395		481					
GROSS ANNUAL COST		\$5,304,644		4,485,679		\$5,608,670		(\$1,122,992)		

Favorable/(Unfavorable) by Funding Source:

Medicaid	(1,464,007)
General Fund	303,697
Healthy MI	37,318
Total	(1,122,992)

Integrated Services of Kalamazoo
COMMUNITY LIVING SUPPORTS (S.R. & SIP), PERSONAL CARE & CRISIS RESIDENTIAL
ALL POPULATIONS
 Report Period: October 1st, 2021 through September 30th, 2022

YOUTH POPULATION (SED/DD)

ACTUAL YEAR TO DATE					
	Avg. Daily Rate	No. Served	Days of Service	ISK Cost	Favorable (Unfavorable) Budget
Month					
Sept	\$1,239	1	371	\$459,509	(\$189,303)
Sept	\$670	4	4	\$2,680	\$58,471
Sept	NA			\$0	
		5	375	462,189	(\$130,833)

PC/CLS(S.R.)

CRISIS RES.

CLS (SIP)

TOTAL

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

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

Specialized Residential (S.R.)-Licensed setting where Personal Care and Community Living Supports occur.

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

MI ADULT POPULATION

ACTUAL YEAR TO DATE					
	Avg. Daily Rate	No. Served	Days of Service	ISK Cost	Favorable (Unfavorable) Budget
Month					
Sept	\$215	170	52,100	\$11,212,727	(\$76,384)
Sept	\$524	58	981	\$513,907	\$282,706
Sept	NA	65		\$563,986	(\$267,979)
TOTAL		293	53,081	\$12,290,620	(\$61,657)

IDD ADULT POPULATION

ACTUAL YEAR TO DATE					
	Avg. Daily Rate	No. Served	Days of Service	ISK Cost	Favorable (Unfavorable) Budget
Month					
Sept	\$238	216	74,024	\$17,612,895	\$431,256
Sept	\$0	0	0	\$0	\$11,022
Sept	NA	210	0	\$10,944,342	(\$3,114,030)
TOTAL		426	74,024	\$28,557,237	(\$2,671,752)

PC/CLS(S.R.)

CRISIS RES.

CLS (SIP)

TOTAL

TOTAL ALL POPULATIONS

ACTUAL YEAR TO DATE						
	Avg. Daily Rate	No. Served	Days of Service	ISK Cost	Favorable (Unfavorable) Budget	
Month						
Sept	\$227	387	126,495	\$29,285,131		\$165,569
Sept	\$524	62	985	\$516,587		\$352,199
Sept	NA	275		\$11,508,328		(\$3,382,009)
		724	127,480	\$41,310,046		(\$2,864,241)
PC/CLS(S.R.)						
CRISIS RES.						
CLS (SIP)						
TOTAL						

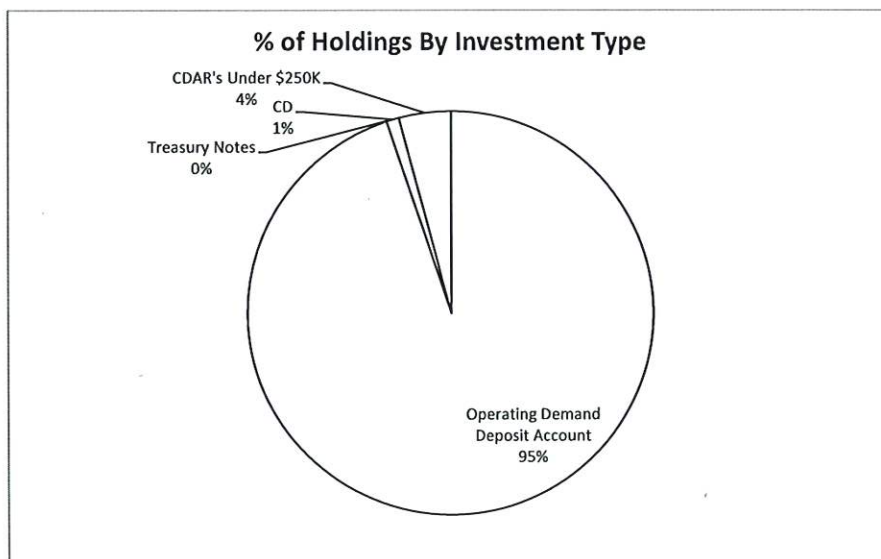
Variance By Funding Source					
Medicaid	HMI	GF	Other	Total	
\$ (580,770)	\$ 151,606	\$ 594,733	\$ -	\$	\$ 165,569
\$ 399,153	\$ (149,629)	\$ 102,675	\$ -	\$	\$ 352,199
\$ (3,392,641)	\$ 9,302	\$ 17,482	\$ (16,152)	\$	\$ (3,382,009)
\$ (3,574,258)	\$ 11,279	\$ 714,890	\$ (16,152)	\$	\$ (2,864,241)

Quarterly Cash & Investments Report
Quarter Ending September 30, 2022

Financial Institution	Type of Investment	Cost Basis	Maturity Date	% Yield
CASH				
PNC	Operating Demand Deposit Account	\$23,303,583	NA	0.03%
	Payroll Account	\$5,000		
	Accrued Leave Reserve	\$117,134		
	Pretax Reimbursement Account	\$51,105		
	Various Petty Cash Funds	\$630		
	Total Cash Accounts	\$23,477,452		
INVESTMENTS				
CDAR's (via Independent Bank)	CD's Issued Under FDIC Limit of \$250,000	\$524,565		
CDAR's (via Independent Bank)	CD's Issued Under FDIC Limit of \$250,000	\$489,458		
	Total CDAR's	\$1,014,024		
CD (via Independent Bank)	CD	\$250,507		
CD (via Independent Bank)	CD	\$2,500,000		
	Total CD's	\$2,750,507		
U.S. Federal Government (via PNC)	Treasury Notes (for bond repayment)	\$0		
	Total Investments	\$3,764,530		
TOTAL CASH AND INVESTMENTS		\$27,241,982		

% of Holdings By Institution	
PNC - Cash	86.18%
U.S. Federal Government (via PNC)	0.00%
CDAR's & CD(via Independent Bank)	13.82%
	100.00%

% of Holdings By Investment Type	
Cash	86.18%
CD	10.10%
Treasury Notes	0.00%
CDAR's	3.72%
	100.00%





Community • Independence • Empowerment

Integrated Services of Kalamazoo

MOTION

Subject:	<u>September 2022 Disbursements</u>	Approval Date:
Meeting Date:	October 24, 2022	<u>October 24, 2022</u>
Prepared by:	Charlotte Bowser	

Recommended Motion:

“Based on the Board Finance meeting review, I move that ISK approve the September 2022 vendor disbursements of \$11,265,542.62.”

Summary of Request:

As per the September 2022 Vendor Check Register Report dated 10/12/2022 that includes checks issued from 09/01/2022 to 9/30/2022.

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: **October 24, 2022**