INTEGRATED Services of Kalamazoo
Community • Independence • Empowerment

Administrative Services
610 South Burdick Street
Kalamazoo, MI 49007
www.iskzoo.org
(269) 553-8000

24-HOUR CRISIS HOTLINE or NON-EMERGENCY CLINICAL SERVICES: (269) 373-6000

AGENDA

August 24, 2026

Name: INTEGRATED Services of Kalamazoo Board of Directors
Commencement Time: 4:30PM
Location: 610 South Burdick Street/Kalamazoo, MI., 2nd Floor/ ISK Boardroom #220

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

IV. ACTION ITEMS DEFERRED/VERBAL MOTION
- a. Minutes *June 22, 2026*
- b. Chief Executive Officer Performance (111.03)(Policy)
- c. Monitoring Executive Performance (111.04)(Policy)
- d. Chief Executive Officer Role (111.01)(Policy)
- e. Delegation to the Chief Executive Officer (111.02)(Policy)
- f. Board Finance Committee (11.10)(Policy & Report)
- g. Conflict of Interest (11.11)(Attachment – Board Member Disclosure Statement)

V. RECIPIENT RIGHTS
- a. Recipient Rights Monthly Report

VI. PROGRAM SERVICE REPORT
- a. *Wanda Brown,* Senior Executive, Integrated Health Services (Clinic)

VII. CONSENT CALENDAR/VERBAL MOTION
- a. Minutes *July 27, 2026*
- b. Budgeting (V.03)(Policy)
- c. Finance (V.04)(Policy)
- d. Asset Protection (V.07)(Policy & Report)

VIII. MONITORING REPORTS/ VERBAL MOTION
- a. None!

IX. FINANCIAL REPORTS
- a. Financial Condition Report
- b. Utilization Report
- c. *June & July* 2026 Disbursement/MOTION

X. CHIEF EXECUTIVE OFFICER VERBAL REPORT

XI. CITIZEN TIME

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XII. ACKNOWLEDGEMENT of MERITORIOUS STATUS
   a. None!

XIII. BOARD MEMBER TIME
   a. SWMBH (Southwest Michigan Behavioral Health) Updates/Michael Seals

XIV. ADJOURNMENT

INTEGRATED
Services of Kalamazoo
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Integrated Services of Kalamazoo
MOTION

Subject:	ACTION ITEMS DEFERRED
Meeting Date:	August 24, 2026 Approval Date: August 24, 2026
Prepared by:	Beth Ann Meints

Recommended Motion:

I MOVE TO APPROVE THE DEFERRED AGENDA ITEMS THAT WERE POSTPONED DUE TO THE LACK OF A QUORUM AT THE PREVIOUS MEETING ON MONDAY, JULY 27, 2026, BOARD OF DIRECTORS MEETING, INCLUDING:

ACTION ITEMS DEFERRED

a. Minutes *June 22, 2026*
b. Chief Executive Officer Performance (111.03)(Policy)
c. Monitoring Executive Performance (111.04)(Policy)
d. Chief Executive Officer Role (111.01)(Policy)
e. Delegation to the Chief Executive Officer (111.02)(Policy)
f. Board Finance Committee (11.10)(Policy & Report)
g. Conflict of Interest (11.11)(Attachment – Board Member Disclosure Statement)

Summary of Request

Action items must be approved at an ISK Board of Directors Meeting with a quorum present.

Budget:_____
Staff: BAM

Date of Board
Consideration: August 24, 2026

V.a.

Office of Recipient Rights
Report to the Mental Health Board
On Complaints/Allegations
Closed in: July 2026

Office of Recipient Rights Report to the Mental Health Board
Complaints/Allegations Closed in July 2026

	July 2026	FY 25-26	July 2025	FY 24-25
Total # of Complaints Closed	**57**	**407**	**32**	**330**
Total # of Allegations Closed	**73**	**547**	**42**	**534**
Total # of Allegations Substantiated	**21**	**189**	**18**	**182**

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

ALLEGATIONS	**July 2026**		**July 2025**	
Category	**TOTAL**	**SUBSTANTIATED**	**TOTAL**	**SUBSTANTIATED**
Consumer Safety	3	0	2	0
Dignity/Respect of Consumer	13	4	5	2
Treatment Issues/Suitable Services (Including Person Centered Planning)	15	3	12	2
Abuse I	1	0	0	0
Abuse II	3	0	3	3
Abuse III	8	4	3	2
Neglect I	1	0	0	0
Neglect II	0	0	1	1
Neglect III	14	9	9	6
	58	**2**	**35**	**16**

APPEALS	**July 2026**	**FY 25-26**	**July 2025**	**FY 24-25**
Uphold Investigative Findings & Plan of Action	0	4	0	2
Return Investigation to ORR; Reopen or Reinvestigate	0	0	0	1
Uphold Investigative Findings but Recommend Respondent Take Additional or Different Action to Remedy the Violation	0	0	0	1
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
July 2026

Re: July 2026 Abuse/Neglect Violations

July

Abuse Violations

- There were four substantiated Abuse III violations in July 2026
    - The remedial actions for these violations are Employee Termination (2), Contract Action (1), and Written Reprimand (1).

      The 2 violations occurred at the same agency, but different programs.

Neglect Violations

- There were nine substantiated Neglect III violations in July 2026. Two were Neglected III, Failure to Report.
    - The remedial actions for these violations are Employee Termination (7), Written Counseling (1), Written Reprimand (3), Training (5), and Pending (3).

      One of the violations had 4 staff involved. Four of the nine violations occurred at the same agency but two different program sites, each program site having two violations. Two of the nine violations occurred at the same agency but two different program sites. The other three violations occurred at different agencies.

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

Integrated Health Services Clinic

Board Report VI.a.

The Integrated Health Services Clinic (IHSC) continues to strive for excellence by providing exceptional, person-centered care and experience for every individual we serve. Our focus remains on continuous quality improvement, strengthening access to care, enhancing clinical services, and supporting an environment in which both individuals and staff can thrive.

Since the last board report from the clinic the Reconnect Clinic hours continue to make positive strides at reducing no-shows and last-minute cancellations increasing appointment availability for new and established patients. The Reconnect Clinic hours which is staffed by the IHSC midlevel practitioners, improves medication safety through consistent follow-up practices, and strengthens communication and trust between individuals' and their clinical team.

2026 has been a year of retirement celebrations and transitioning into new roles for several team members. Dr. Bedi, Chief Medical Officer, retired after over 24 years of service, Margot Chadwick, PMHNP, retired after 12 years of service, and Jeff Patton, CEO, retired after 25 years of service to ISK. Two nurses have completed nurse practitioner programs, one of which will be transitioning into the role of nurse practitioner for ISK in September 2026.

Prior to retiring, Mr. Patton commissioned Dr. Achtyes, Interim CMO, to conduct the first comprehensive assessment of IHSC. From November 2025 through February 2026 approximately 46 staff members participated in structured listening sessions. Staff were asked consistent questions regarding what is working well, areas for improvement, reducing no-shows, improving clinic efficiency and communication, the benefit of smaller teams or pods, and what changes would most improve the clinic and the experience for those we serve.

Feedback was compiled across stakeholders' responses; recommendations were placed into categories based on the order of feasibility (high impact, low barrier to implementation and then ordered by proposed timing) **immediate (0 – 6 months), short-term (6 – 24 months), and long-term priorities (2 – 5) years.** Several of the recommendations have been initiated: first 615 full staff meeting was held on June 11, 2026, at the KVCC Culinary School at 7:00am, going forward the meetings will be scheduled quarterly. 49 recommendations were identified at the beginning of this initiative and currently 44 have been addressed. A few recommendations that have been addressed include, purchasing a new vital signs machine and wheelchair scale combined totaling over $8,000 for the clinic;

Integrated Health Services Clinic

Board Report VI.a.

615 intercom system updated, designated laptops available for use by the residents when seeing patients in the clinic; confidential shred boxed placed strategically throughout the clinic, revised the residents training process updated and orientation location changed to 615 E. Crosstown, the actual location they will work from weekly; this occurred on July 30, 2026. The long-term recommendation is the creation of clinic pods/teams with the goal of improving communication among team members, providing coverage for team when one of the prescribers on the team is out of the office, creating trusting relationships for all of the team members and patients alike by being able to identify with members of your team cuts out the middleman.

Why the change?

To support our common goal/mission – providing consistent, high-quality services to assist individuals within their recovery, to protect the work you already do well and to make it more sustainable, creating balanced workloads, clear path of communication and free up more time to be with the patients. The ultimate goal remains to strive for excellence by providing exceptional, person-centered care and experience for every individual we serve.

INTEGRATED Services of Kalamazoo

Community • Independence • Empowerment

INTEGRATED Services of Kalamazoo (*ISK*) Board of Director's Meeting

INTEGRATED Services of Kalamazoo
610 South Burdick Street
Kalamazoo MI 49007

July 27, 2026 VII.a.

ISK Board Member	Board Members PRESENT	Declaration of Location City/County	Board Members ABSENT
Karen Longanecker, *CHAIR*	X	Kalamazoo/Kalamazoo	
Michael Seals, *VICE CHAIR*	X	Kalamazoo/Kalamazoo	
Nkenge Bergan	X	Kalamazoo/Kalamazoo	
Patrick Dolly			X
Ramona Lumpkin			X
Sharon Price			X
Michael Raphelson	X	Kalamazoo/Kalamazoo	
Caelynn Uhlmann	X	Portage/Kalamazoo	
Melissa Woosley	X	Kalamazoo/Kalamazoo	
Abigail Wheeler, *COMMISSIONER*			X

ISK - Staff Present:
Beth Ann Meints, *CEO*
Sheila Hibbs
Dianne Shaffer
Michael Schlack, *Corporate Counsel*
Rosalind Adams
Charlotte Bowser
Chantel Graham
Tammy Natho
Amy Rottman
Ed Sova
Alecia Pollard
Demeta Wallace, *Board Liaison*

Guests Present:
Tammy Niedzielski, Community Member
Brian M. Harrison, Executive Director of Therapy Services, AdvisaCare Home Health
Fiorella Spalvieri, CEO/CLO
Sean Harris, CEO/Recovery Institute
Dr. Shenetta Coleman, CEO/ROI

Call to Order

The Board of Directors (Integrated Services of Kalamazoo) held their meeting on *Monday, July 27, 2026*. It began @ 4:34PM and was presided over by the Chair, *Karen Longanecker.*

Agenda

MOTION

The board did not have a quorum so they could not move on to approval of the agenda.

Absence of a Quorum

Due to the absence of a quorum, the Board was unable to conduct official business. As a result, no board actions were taken, and all action items requiring a vote were deferred to the Monday, August 24, 2026, meeting when a quorum is present.

a. Minutes *June 22, 2026*
b. Chief Executive Officer Performance (111.03)(Policy)
c. Monitoring Executive Performance (111.04)(Policy)
d. Chief Executive Officer Role (111.01)(Policy)
e. Delegation to the Chief Executive Officer (111.02)(Policy)
f. Board Finance Committee (11.10)(Policy & Report)
g. Conflict of Interest (11.11)(Attachment – Board Member Disclosure Statement)
h. June 2026 Disbursements

Citizen Time

Tammy Niedzielski

Tammy Niedzielski, a former Kalamazoo County Environmental Health Compliance Inspector (specializing in lakes, streams and rivers) who was forced to leave work in 2005 due to a traumatic brain injury, called into the Board as a representative of a citizen of the community, her partner and a recipient of services through ISK, whom she claims has disappeared from Kalamazoo County. She desperately wanted to find him and called into this meeting to see if ISK could help find him. She said that she has tried speaking with several people at ISK and has received many written responses. She believes that they were all coming to the conclusion that her partner was asking for help cleaning his home, which Tammy emphatically denies. Due to one of the letters, she received from ISK being signed by Jeff Patton, likely the response to her recipient rights complaint, she decided to appeal to the board and Jeff directly, which is why she called into tonight's meeting. She proceeded to give details of what led to his disappearance and the misconduct she believes is also occurring. Since Jeff retired, she appealed to the new CEO, Beth Ann Meints.

Ms. Niedzielski claims that her partner, Dennis Vankruiningen, was taken from his home by force and institutionalized in another county for the period of one year but was mentally and physically fine before he was forcefully removed. She claimed that the physical and mental change she observed in him upon seeing him was extremely drastic and he was in obvious distress the last time she saw him, which was April 17, 2024. She alleges that on Friday, January 27, 2023, Dennis decided to take his dying dog back to the farmhouse at 7912 East U Avenue, in order to care for her during her last days, which Ms. Niedzielski asserts was a huge mistake. On Saturday, January 28, 2023, while at the farmhouse, his estranged daughter, Susan McCoy, who had not been in contact with her father for so long she didn't know the basic layout of the farmhouse, took him to Hastings with nothing, no packed clothes, no personal items, nothing, and had him institutionalized by force and Robert Brothers became his attorney.

Prior to being taken to Hasting, the couple resided together at Ms. Niedzielski's residence at 609 Adams Street, along with her foreign exchange student. Dennis wanted to hide from his sister due to his belief that his sister was going to try to get him institutionalized in order to gain possession of their father's land after their father passed away.

Tammy claims that it was insinuated that Dennis' living conditions at the farmhouse were so bad that he needed to be institutionalized for a year. They were under the impression that there was an order from the county out on him, which they found upon investigation, was not true. There was no such order. At some point, Dennis' case worker thought he was seeking assistance with improving his living conditions at the farmhouse and they were expecting a home visit. According to Ms. Niedzielski, her and Dennis were attempting to tidy up his home to prepare for a Friday, January 27, 2023, home visit from his ISK caseworker, Anna Pascoe, who never showed up for the appointment. She was going to set up a portal for Dennis.

Tammy also alleges that Dennis' land is being stolen. She broke down a timeline of events that led to this happening. On Wednesday, January 25, 2023, they met with attorneys, Mr. Dombos and Robert Brothers, to stop Jeff Fisher, the power of attorney for Dennis' brother, from allegedly changing the legal document numbers on the title in order to steal Dennis and his family's land. Thursday, January 26, 2023, Tammy and Dennis went to the farmhouse to prepare for the home visit from Anna Pascoe.

Karen Longanecker, Chair, assured Tammy that her concerns were taken seriously and her message was heard. However, in an open board meeting the members can only listen and not provide any comments. Therefore, someone from ISK would hopefully be contacting her soon.

<u>Brian M. Harrison/Executive Director of Therapy Services, AdvisaCare Home Health</u>
Mr. Harrison is the Executive Director of Therapy Services for AdvisaCare Companies, Inc (which includes Rebound Home and Community Therapy).

They are an ABA provider with a single case agreement with ISK and have had multiple conversations over the years with ISK in regard to expanding their service agreement. Their ABA program specializes in helping kids with ABA services after school as their standard business hours are 8 am to 8 pm, M-F with other appointments able to be scheduled on the weekends.

They have great compassion for the families currently waiting for ABA afterschool programs and are open to investing in a clinical space, home based services, or whatever ISK would recommend in helping to remove families from the waiting list.

They are currently contracted with 16 CMH across Michigan and each of the CMHs within the SWMBH region.

He thanked the Board for the opportunity to give comments and introduce himself and his organization.

Recipient Rights

Lisa Smith ISK, Director of ORR, was not present at this meeting, so Beth Ann Meints, ISK/CEO, presented the complaints/allegations closed in June 2026

June 2026

Abuse Violations

- There was one substantiated Abuse II violation in June 2026.
    - The remedial actions for this violation was Written Reprimand (1), and Training (1).
- There were two substantiated Abuse III violations in June 2026.
    - The remedial actions for these violations were Employment Termination (2).

The 2 violations occurred at different agencies.

Neglect Violations

- There was one substantiated Neglect II violation in June 2026. It was a Neglect II Failure to Report Violation.
    - The remedial actions for this violation were Written Reprimand (1), and Training (1).
- There were three substantiated Neglect III violations in June 2026.
    - The remedial actions for these violations were Written Reprimand (3), Training (1), and Pending (1).

The three violations occurred at different agencies.

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

Recipient Rights Semi-Annual Report

The Recipient Rights SEMI-ANNUAL Report covering October 1, 2025, through March 31, 2026, was presented by Beth Ann Meints, ISK/CEO.

This comprehensive report details the activities throughout the preceding year. Its purpose is to provide users, such as our ISK Board of Directors, with information about the operations of the Office of Recipient Rights about Abuse, Neglect, Dignity, Respect and other key indicators.

To review the ORR reports, please use the following link: https://iskzoo.org/about-us/board/.

Program Service Report

Tammie Natho, Housing Supervisor & *Rosalind Adams*, Shelter Supervisor from the ISK Housing Department presented the Housing Report.

The Housing Report provided the board with a comprehensive overview of the organization's housing programs, current operations, and future priorities. The presentation clearly demonstrated the organization's commitment to providing safe, stable, and supportive housing for individuals served.

Highlights of the report included: Occupancy and Utilization, Resident Outcomes with success stories, program performance and property safety with sound fiscal stewardship.

To review the Housing report, please use the following link: https://iskzoo.org/about-us/board/.

Consent Calendar

MOTION

The board did not have a quorum so they could not move on to approval of the consent calendar.

Monitoring Reports

MOTION

The board did not have a quorum so they could not move on to approval of the monitoring reports.

Sheila Hibbs, ISK/Chief Operating Officer, presented the ENDS: All Populations and Strategic Plan Reports to the board. Sheila introduced a new format for reporting the ENDS data to the board that will be beneficial in sharing key indicators and information. The Strategic Plan outlin progress toward key goals and objectives, significant milestones achieved, ongoing initiatives, and areas of continued focus or improvement.

To review the monitoring reports, please use the following link: https://iskzoo.org/about-us/board/

Financial Reports/Financial Condition Reports

Amy Rottman, ISK, Chief Financial Officer, presented the Financial Condition Reports for June 30, 2026.

To review the financial reports, please use the following link: https://iskzoo.org/about-us/board/

Utilization Reports

Charlotte Bowser, ISK, Director of Finance, presented the Utilization Report for the period ending June 30, 2026.

- Autism Services is at (171) clients and is favorable at $1,468,128.
- Youth Community Inpatient Services is at (143) days and is favorable at $140,186.
- MI Adult Community Inpatient Services is at (307) days and is favorable at $593,933. Community Living Supports, Personal Care, and Crisis Residential are favorable at $108,180.

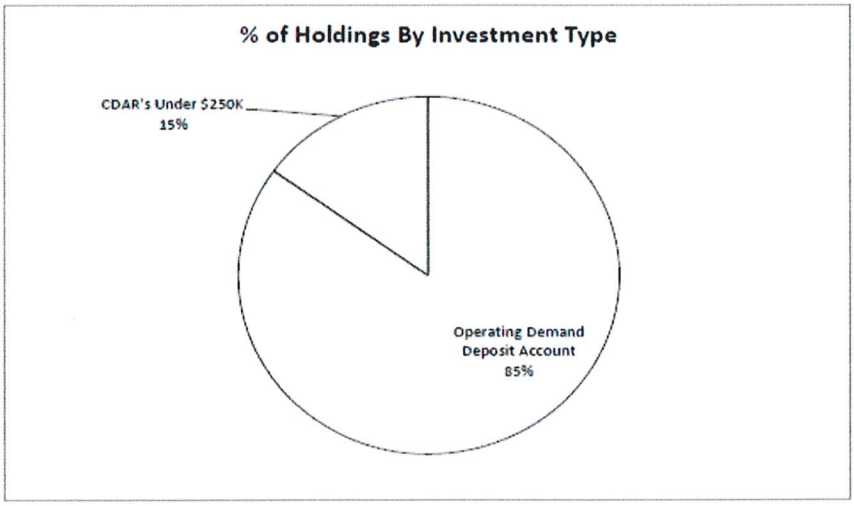
Investment Report

Charlotte Bowser, ISK, Director of Finance, presented the Investment Report for the period ending **June 30, 2026**.

Quarterly Cash & Investments Report
Quarter Ending June 30th, 2026

Financial Institution	Type of Investment	Cost Basis	Maturity Date	% Yield
CASH				
PNC	Operating Demand Deposit Account	$24,387,907	NA	0.03%
	Payroll Account	$5,000		
	Accrued Leave Reserve	$2,088,587		
	Pretax Reimbursement Account	$69,999		
	Various Petty Cash Funds	$780		
	Total Cash Accounts	**$26,552,272**		
INVESTMENTS				
CDAR's (via Independent Bank)	CD's Issued Under FDIC Limit of $250,000	$4,320,488		3.23%
Total CDAR's		$4,320,488		
	Total Investments	**$4,320,488**		
TOTAL CASH AND INVESTMENTS		**$30,872,760**		

% of Holdings By Institution		% of Holdings By Investment Type	
PNC - Cash	86.01%	Cash	86.01%
CDAR's (via Independent Bank)	13.99%	CDAR's	13.99%
	100.00%		100.00%



June Disbursements

MOTION

The board did not have a quorum so they could not move on with approval of the June Disbursements and will bring them back next month.

Chief Executive Officer Report
Beth Ann Meints, CEO, gave her verbal report at this time.

She expressed that it is an honor to present her first CEO report. She appreciates the confidence the ISK Board of Directors placed in her and the opportunity to lead the organization during this important period of transition. She is grateful for the warm welcome she has received from staff, leadership, community partners, and each member of the ISK Board.

Over the next several weeks, she will continue to remain focused on the state and the pending release of the next MDHHS RFP and the state plan for the CCBHCs. Speaking of CCBHCs, she would like to propose to the ISK Board of Directors that we begin reporting updates every quarter starting in January 2027. Dianne Shaffer will handle this update on the agenda in 2027.

The organization continues to watch revenues and expenditures closely. We stay committed to responsible fiscal stewardship while supporting high-quality services.

Beth Ann stated that she looks forward to working alongside each of the Board's members as ISK continues building an organization that is innovative, accountable, compassionate, and responsive to our community's needs.

One last thing, Beth Ann extended a special thank you to all the staff who worked diligently on the retirement celebration for our former CEO, Jeff Patton. It was OUTSTANDING!!!!

That concludes the CEO report.

Citizen Time No citizens came forth.

ACKNOWLEDGEMENT of MERITORIOUS STATUS
Congratulations to Jeffrey Wilson Patton for retiring from ISK on July 10, 2026.

SWMBH (Southwest Michigan Behavioral Health) Updates/Michael Seals
Michael Seals, Vice Chair, said that he's excited to announce that Mila Todd has received and accepted her contract for the position Chief Executive Officer of SWMBH.

SWMBH board has worked on a plan to pay the seven CMHs if the state says no, they will try to figure out how to get them that money anyway. They are trying to figure out where SWMBH is going to be throughout the new RFP process should it come out. The seven counties are owed money bar one who is surviving on the advancements they get from SWMBH, who tries to pay them as they go in order to keep them open.

That concludes the SWMBH report.

Meeting adjourned at 5:44PM.
MOTION PASSED

Demeta J. Wallace
Board Liaison
Office of the CEO

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY V.03

AREA:	Governance		
SECTION:	Executive Limitations	PAGE:	1 of 2
SUBJECT:	**BUDGETING**	SUPERSEDES:	09/27/2021
		REVISED:	08/25/2025

PURPOSE/EXPLANATION

To establish limitations of means regarding the budgeting process.

POLICY

I. Budgeting any fiscal year or the remaining part of any fiscal year shall not deviate materially from Board Ends priorities, or risk fiscal jeopardy. Accordingly, the Chief Executive Officer may not cause or allow budgeting which:

A. Does not provide for a Public Hearing prior to formally adopting the budget consistent with Michigan Compiled Law (MCL) Section 141.412.

B. Contains too little information to enable credible projection of revenues and expenses, cash flow, and disclosure of planning assumptions.

C. Plans the expenditure in any fiscal year of more funds than are conservatively projected to be received in that period, plus unrestricted net position. Net position should be managed as required by the Net Position Management policy.

D. Reduces the current assets at any time to less than a favorable relationship with current liabilities.

E. Does not provide for Board prerogatives such as Board development, and Board and committee meetings.

F. Endangers the fiscal soundness of future years or ignores the building of organizational capability sufficient to achieve ends in future years.

II. This policy will be monitored through internal mechanisms on a quarterly basis, and external mechanisms on an annual basis.

EXHIBITS

A. MCL Section 141.412.

CHIEF EXECUTIVE OFFICER

Jeff Patton
Chief Executive Officer

APPROVED

Karen Longanecker
Board Chair

BUDGET HEARINGS OF LOCAL GOVERNMENTS (EXCERPT)
Act 43 of 1963 (2nd Ex. Sess.)

141.412 Local unit of government; public hearing on proposed budget; notice.

Sec. 2. A local unit shall hold a public hearing on its proposed budget. The local unit shall give notice of the hearing by publication in a newspaper of general circulation within the local unit at least 6 days before the hearing. The notice shall include the time and place of the hearing and shall state the place where a copy of the budget is available for public inspection. The notice shall also include the following statement printed in 11-point boldfaced type: "The property tax millage rate proposed to be levied to support the proposed budget will be a subject of this hearing.".

History: 1963, 2nd Ex. Sess., Act 43, Imd. Eff. Dec. 27, 1963;—Am. 1995, Act 40, Imd. Eff. May 22, 1995.

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY V.04

AREA:	Governance		
SECTION:	Executive Limitations	PAGE:	1 of 2
SUBJECT:	**FINANCE**	SUPERSEDS:	09/27/2021
		REVISED:	08/26/2024

PURPOSE/EXPLANATION

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

POLICY

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

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

A. Expenditures cannot be authorized that exceed the amount appropriated within the budget. Appropriated budgeted expenditures must be balanced with budgeted revenue or available net position.

B. Enter into long term debt agreements, without board approval.

C. Use any Long-Term Reserves, aside from their intended use, without Board approval.

D. Fail to settle payroll and debts in a timely manner.

E. Allow tax payments or other government-ordered payments or filings to be overdue or inaccurately filed.

F. Acquire, encumber or dispose of real property without Board approval.

G. Operate without a set of administrative purchasing and procurement guidelines and procedures consistent with current law.

H. Fail to adhere to generally accepted accounting principles (GAAP) in all accounting activities unless more restrictive requirements exist.

I. Fail to use a legally defined procurement process to promote effective and equitable purchasing practices.

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

CHIEF EXECUTIVE OFFICER

Jeff Patton
Chief Executive Officer

APPROVED

Karen Longanecker
Board Chair

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY V.07

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

PURPOSE/EXPLANATION

To establish limitations of means regarding asset protection.

POLICY

I. The Chief Executive Officer (CEO) may not allow assets to be unprotected, inadequately maintained nor unnecessarily risked. Accordingly he/she may not:

A. Fail to insure against theft and casualty losses to at least 80 percent replacement value and against liability losses to Board members, staff or the organization itself in an amount comparable to other CMH's.

B. Allow un-bonded personnel access to material amounts of funds.

C. Subject plant and equipment to improper wear and tear or insufficient maintenance.

D. Unnecessarily expose the organization, its Board or staff to claims of liability.

E. Fail to protect intellectual property, information and files from loss or significant damage.

F. Receive, process or disburse funds under controls which are insufficient to meet the Board appointed auditor's standards.

G. Endanger the organization's public image or credibility, particularly in ways that would hinder its accomplishment of mission.

II. This policy will be monitored through a report on an overview of ISK insurance coverage on an annual basis.

CHIEF EXECUTIVE OFFICER:

Jeff Patton
Chief Executive Officer

APPROVED:

Karen Longanecker
Board Chair

INSURANCE OVERVIEW FOR ASSET PROTECTION REPORT

August 14, 2026

- Our liability/property insurance is through the Michigan Municipal Risk Management Authority ("MMRMA"). MMRMA was created under the authority of the Michigan statutes to provide risk management and risk financing services to local governmental entities such as ISK.

- Liability coverage through MMRMA totals $15,000,000 per occurrence.

- ISK board members are covered by MMRMA for their official duties performed on behalf of ISK.

- MMRMA pays for the costs of defending certain claims against ISK as well as any damages assessed.

- Workers compensation insurance is purchased through Accident Fund Co of America. We have limits of $500,000 per accident and $500,000 per disease claim.

- Our long term and short-term disability coverage is purchased through The Hartford Group. For long term coverage (LTD), employees will receive 60% of their income up to $200,000 after a 180-day waiting period (maximum benefit of $10,000 per month). For short-term disability (STD), employees will receive 60% of their covered salary up to $208,000 beginning on the 15th day after the accident or 15th day after an illness that causes them to be off work (maximum benefit of $2,400 per week). Maximum duration for STD is 26 weeks (only 24 are paid due to the 14-day waiting period).

- Group life insurance is through The Hartford Group. Employees receive 0.5 times their salary rounded to the next higher $1,000 subject to a minimum of $10,000 and a maximum $100,000.

- Group accidental death and dismemberment insurance is through The Hartford Group.

- Health care professional liability insurance is through Pro Assurance Casualty Company. Limits are $1,000,000 per claim and $3,000,000 aggregate. Our employed prescribers are covered.

- Medical insurance/prescriptions coverage is purchased through Blue Cross Blue Shield of Michigan for employees working at least 30 hours per week.

- Dental insurance is purchased through ADN for employees working at least 30 hours per week.

- Vision insurance is purchased through Blue Cross Blue Shield using the VSP network for employees working at least 30 hours per week.

- Employees working at least 20 and up to 29 hours per week may purchase ISK's medical insurance/prescriptions coverage, dental insurance, or vision insurance at the full premium cost.

Background:

Insurance plays a critical role in safeguarding our company's assets against various risks and uncertainties. It is essential to understand the types of insurance we have in place and how they contribute to protecting our assets.

Overview:

1. **Property Insurance:**
    - This insurance covers our physical assets such as buildings, equipment, and inventory against risks such as fire, theft, and natural disasters.
2. **Liability Insurance:**
    - Liability insurance protects the company from legal claims and lawsuits that arise due to bodily injury, property damage, or negligence claims. This coverage is crucial for protecting our financial interests in case of unforeseen circumstances.
3. **Business Interruption Insurance:**
    - In the event of a disaster or other covered incident that disrupts our business operations, business interruption insurance helps cover lost income and ongoing expenses, ensuring continuity and financial stability.
4. **Cyber Insurance:**
    - As digital threats become more prevalent, cyber insurance protects against losses related to data breaches, cyberattacks, and other digital risks that could impact our operations and assets.
5. **Directors and Officers (D&O) Insurance:**
    - D&O insurance provides protection to directors and officers against legal claims alleging wrongful acts in their roles. It helps attract and retain talent by offering personal liability protection.

Conclusion:

Understanding our insurance coverage is essential for maintaining effective asset protection strategies. If you have any further questions or need additional details, please don't hesitate to contact me.

Thank you.

INTEGRATED SERVICES OF KALAMAZOO

Period Ended
July 31, 2026

Monthly Finance Report

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

INTEGRATED SERVICES OF KALAMAZOO

Statement of Net Position

July 31, 2026

	July 2025 (unaudited)	July 2026
Assets		
Current assets		
Cash and investments	$ 26,465,171	$ 27,936,378
Accounts receivable	6,312,268	8,683,245
Due from other governments	9,652,865	12,722,181
Prepaid items	1,444,289	1,538,783
Total current assets	43,874,593	50,880,587
Non-current assets		
Capital assets, net of accumulated depreciation	14,879,639	14,333,362
Net pension asset, net of deferred outflows	8,442,339	8,070,705
Total non-current assets	23,321,978	22,404,067
Total assets	$ 67,196,571	$ 73,284,654
Liabilities		
Current liabilities		
Accounts payable	$ 9,485,046	$ 9,739,701
Due to other governments	182,131	7,338,569
Due to providers	65,614	-
Accrued payroll and payroll taxes	3,117,864	2,663,017
Unearned revenue	153,390	127,294
Total current liabilities	13,004,045	19,868,582
Net position		
Designated	8,654,636	8,722,022
Undesignated	24,523,412	31,389,003
Investment in fixed assets	13,277,168	14,125,075
Net gain (loss) for period	7,737,310	(820,027)
Net position	$ 54,192,526	$ 53,416,073

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2025 through July 31, 2026
Percent of Year is 83.33%

	Original 2026 Budget	YTD Totals 7/31/26	Remaining Budget	Percent of Budget - YTD
Operating revenue				
Medicaid:				
Traditional Capitation	$ 86,641,701	70,172,437	$ 16,469,264	80.99%
Healthy Michigan Capitation	9,119,193	5,088,836	4,030,357	55.80%
State General Fund:				
Formula Fundings	3,900,516	3,250,430	650,086	83.33%
PY General Fund Carryforward	-	-	-	0.00%
Settlement	-	-	-	0.00%
CCBHC Demonstration	34,258,759	28,449,947	5,808,812	83.04%
CCBHC Quality Bonus	1,326,190	2,347,457	(1,021,267)	0.00%
CCBHC Accrual	-	-	-	0.00%
County Allocation	1,550,400	1,292,000	258,400	83.33%
Client Fees	1,069,711	746,210	323,501	69.76%
SUD Block Grant	-	(0)	0	0.00%
Other grant revenue	6,780,003	4,757,885	2,022,118	70.18%
Other earned contracts	1,958,805	1,909,968	48,837	97.51%
COFR	-	-	-	0.00%
Interest	157,232	132,381	24,851	84.19%
Local revenue	508,606	11,277	497,329	2.22%
Total operating revenue	$ 147,271,116	$ 118,158,827	$ 29,112,290	80.23%
Operating expenses				
Salaries and wages	$ 32,403,237	24,850,637	7,552,600	76.69%
Employee benefits	12,643,544	9,086,504	3,557,039	71.87%
Staff development	300,933	127,538	173,395	42.38%
Payments to providers	93,008,476	74,489,909	18,518,567	80.09%
Administrative contracts	8,262,621	7,554,906	707,715	91.43%
IT software and equipment	928,129	755,523	172,606	81.40%
Client transportation	52,900	35,485	17,415	67.08%
Staff travel	386,676	286,112	100,564	73.99%
Office expenses	685,668	475,409	210,259	69.34%
Insurance expense	168,769	157,095	11,674	93.08%
Depreciation expense	585,704	494,323	91,381	84.40%
Utilities	363,874	328,182	35,692	90.19%
Facilities	36,265	82,974	(46,709)	228.80%
Local match	305,108	254,257	50,851	83.33%
Total operating expenses	$ 150,131,903	$ 118,978,854	$ 31,153,050	79.25%
Change in net position	(2,860,787)	(820,027)	$ (2,040,760)	
Beginning net position	54,236,100	54,236,100		
Ending net position	$ 51,375,313	$ 53,416,073		

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2025 through July 31, 2026

Percent of Year is 83.33%

	Specialty Services		Healthy Michigan		SUD Block Grant		Totals		
	Budget	YTD Totals 7/31/26	YTD Budget	YTD Totals 7/31/26	YTD Budget	YTD Totals 7/31/26	YTD Budget	YTD Totals 7/31/26	Variance
Operating revenue									
Medicaid:									
Traditional Capitation	$ 72,201,418	$ 76,275,105	$ -	$ -	$ -	$ (0)	$ 72,201,418	$ 76,275,105	$ 4,073,687
Healthy Michigan Capitation	-	-	7,599,328	6,172,763	-	-	7,599,328	6,172,763	(1,426,565)
Settlement Estimate	3,689,524	(6,102,668)	(2,557,482)	(1,083,927)	-	0	1,132,042	(7,186,595)	(8,318,637)
Client Fees	6,058	2,031	69	-	-	-	6,127	2,031	(4,096)
Total operating revenue	$ 75,897,000	$ 70,174,468	$ 5,041,914	$ 5,088,836	$ -	$ -	$ 80,938,914	$ 75,263,304	$ (5,675,610)
Operating expenses									
Internal services	$ 1,887,986	$ 1,754,391	$ 11,630	$ 8,933	$ -	$ -	$ 1,899,616	$ 1,763,325	(136,292)
External services	63,537,608	60,247,917	4,334,658	4,487,283	-	-	67,872,266	64,735,200	(3,137,066)
Delegated managed care	10,471,406	8,172,159	695,626	592,620	-	-	11,167,032	8,764,779	(2,402,253)
Total operating expenses	$ 75,897,000	$ 70,174,467	$ 5,041,914	$ 5,088,836	$ -	$ -	$ 80,938,914	$ 75,263,303	$ (5,675,611)
Change in net position	-	0	-	-	-	-	-	-	

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2025 through July 31, 2026

Percent of Year is 83.33%

	State General Fund		CCBHC		Other Funding Sources		Totals		
	YTD Budget	YTD Totals 7/31/26	YTD Budget	YTD Totals 7/31/26	YTD Budget	YTD Totals 7/31/26	YTD Budget	YTD Totals 7/31/26	Variance
Operating revenue									
General Fund	$ 3,250,430	$ 3,250,430	$ -	$ -	$ -	$ -	$ 3,250,430	$ 3,250,430	$ -
CCBHC Demonstration	-	-	31,092,088	30,797,404	-	-	31,092,088	30,797,404	(294,683)
Other Federal and State Grants	-	-	-	557,812	5,046,567	4,757,885	5,046,567	5,315,697	269,130
Earned Revenue	-	-	-	-	887,075	#REF!	887,075	#REF!	#REF!
COFR Revenue	-	-	-	-	-	-	-	-	-
Interest	-	-	-	-	131,027	132,381	131,027	132,381	1,354
County Allocation	-	-	-	-	1,292,000	1,292,000	1,292,000	1,292,000	-
Local Revenue	5,936	1,344	-	702,382	423,838	50,226	429,774	753,952	324,178
Transfer from GF	-	-	61,583	748,915	-	-	61,583	748,915	687,333
Total operating revenue	$ 3,256,366	$ 3,251,774	$ 31,153,670	$ 32,806,513	$ 7,780,507	#REF!	$ 42,190,542	#REF!	#REF!
Operating expenses									
Internal Programs	$ 738,773	$ 590,607	$ 31,941,772	$ 33,387,438	$ 2,318	$ 3,771	$ 32,682,862	$ 33,981,817	$ 1,298,954
External Programs	2,025,003	1,628,079	-	-	547,083	755,654	2,572,087	2,383,733	(188,353)
Other Federal and State Grants	-	-	-	-	5,598,447	4,069,141	5,598,447	4,069,141	(1,529,306)
HUD Grants	-	-	-	-	1,518,225	1,448,094	1,518,225	1,448,094	(70,130)
Managed Care Administration	431,007	284,173	-	-	-	-	431,007	284,173	(146,834)
Homeless Shelter	-	-	-	-	321,264	274,327	321,264	274,327	(46,937)
Transfer from GF	61,583	748,915	-	-	-	-	61,583	748,915	687,333
Local match expense	-	-	-	-	254,257	254,257	254,257	254,257	0
Non-DCH Activity Expenditures	-	-	-	-	47,594	66,665	47,594	65,344	17,750
Total operating expenses	$ 3,256,366	$ 3,251,775	$ 31,941,772	$ 33,387,438	$ 8,289,187	$ 6,871,909	$ 43,487,325	$ 43,509,801	22,476
Change in net position	0	(0)	(788,102)	(580,926)	(508,681)	#REF!	$ (1,296,782)	#REF!	#REF!

INTEGRATED SERVICES OF KALAMAZOO

CCBHC

October 1, 2025 through July 31, 2026
Percent of Year is 83.33%

	CCBHC Medicaid	CCBHC Healthy MI	CCBHC Non-Medicaid	CCBHC YTD Totals
Operating revenue				
CCBHC revenue	$ 21,287,967	$ 6,904,924	$ 2,604,513	$ 30,797,404
FFS Revenue	352,656	58,795	290,930	702,382
CCBHC SAMSHA Grant	-	-	557,812	557,812
Total CCBHC Revenue (PPS-1 of $303.92 x encounters)	$ 21,640,624	$ 6,963,719	$ 3,453,255	$ 32,057,598
Operating expenses				
Internal services	$ 17,016,351	$ 5,297,411	$ 3,219,196	$ 25,532,957
DCO Contracts	5,065,890	1,726,337	1,062,254	7,854,481
Total operating expenses	$ 22,082,241	$ 7,023,748	$ 4,281,450	$ 33,387,438
Operating change in net position	(441,617)	(60,029)	(828,195)	(1,329,841)
General Fund Reclassification to cover Non-Medicaid	-	-	748,915	748,915
Total change in net position	$ (441,617)	$ (60,029)	$ (79,280)	$ (580,926)

CCBHC Cost per daily visit

	2023	FY 2024	FY 2025	7/31/26
Total CCBHC Cost	$ 27,687,187	$ 31,777,786	$ 35,393,270	$ 33,387,438
Daily Visits	99,802	110,326	125,458	106,974
Cost per daily visit	277.42	288.04	282.11	312.11

AUTISM SERVICES
Report Period: October 1st, 2025 through July 31st, 2026

	UTILIZATION COMPARISONS FY 25/26									
	FY 24/25 Actual		FY 25/26 Budget		FY 25/26 Actual			Clients Served Difference	Cost Difference	Cost YTD
		Dollars	Clients Served	Dollars	Clients Served			Favorable (Unfavorable)	Favorable (Unfavorable)	Favorable (Unfavorable)
OCTOBER	187	$944,462	194	$1,098,509	168	$979,255		26	$119,254	$119,254
NOVEMBER	175	$899,151	194	$1,098,509	171	$794,516		23	$303,993	$423,247
DECEMBER	170	$801,707	194	$1,098,509	188	793,941		6	$304,568	$727,815
JANUARY	190	$943,870	194	$1,098,509	196	762,474		(2)	$336,035	$1,063,850
FEBRUARY	197	$898,764	194	$1,098,509	192	1,080,095		2	$18,414	$1,082,264
MARCH	193	$1,054,656	194	$1,098,509	193	966,400		1	$132,109	$1,214,373
APRIL	189	$1,160,440	194	$1,098,509	188	925,806		6	$172,703	$1,387,076
MAY	188	$1,027,319	194	$1,098,509	184	1,089,435		10	$9,074	$1,396,150
JUNE	192	$1,048,980	194	$1,098,509	178	1,026,531		16	$71,978	$1,468,128
JULY	184	$1,018,918	194	$1,098,509	191	920,352		3	$178,157	$1,646,285
AUGUST	187	$934,104	194	$1,098,509		-				
SEPTEMBER	187	$1,120,200	194	$1,098,509		-				
TOTALS	2,239	$11,852,571	2,328	$13,182,110	1,849	$9,338,805		91	$1,646,285	
MONTHLY AVERAGES	187		194		185					
GROSS ANNUAL COST		$11,852,571		$13,182,110		$9,338,805			$1,646,285	

Favorable/(Unfavorable): Total 1,646,285

8/14/2026 3:45 PM

YOUTH COMMUNITY INPATIENT SERVICES
Report Period: October 1st, 2025 through July 31st, 2026

	UTILIZATION COMPARISONS FY 25/26									
	FY 24/25 Actual		FY 25/26 Budget		FY 25/26 Actual			Days Difference	Cost Difference	Cost YTD
		Dollars	Clients Served	Dollars	Days			Favorable (Unfavorable)	Favorable (Unfavorable)	Favorable (Unfavorable)
OCTOBER	111	$96,759	85	$84,863	101	$101,060		(16)	($16,197)	($16,197)
NOVEMBER	117	$114,545	85	$84,863	98	$98,100		(13)	($13,237)	($13,237)
DECEMBER	52	$51,318	85	$84,863	74	$74,090		11	$10,773	$10,773
JANUARY	97	$95,247	85	$84,863	61	$62,291		24	$22,572	$22,572
FEBRUARY	100	$97,792	85	$84,863	31	$31,030		54	53,833	53,833
MARCH	77	$75,342	85	$84,863	95	$94,860		(10)	(9,997)	(9,997)
APRIL	80	$78,400	85	$84,863	22	$22,000		63	62,863	62,863
MAY	82	$80,360	85	$84,863	48	$48,050		37	36,813	36,813
JUNE	42	$41,160	85	$84,863	92	$92,100		(7)	(7,237)	(7,237)
JULY	47	$46,178	85	$84,863	61	$61,070		24	23,793	23,793
AUGUST	35	$34,329	85	$84,863						
SEPTEMBER	50	$48,608	85	$84,863						
TOTALS	890	$860,038	1,020	$1,018,350	683	$684,651		167	$163,979	$163,979
MONTHLY AVERAGES	74		85		68					
GROSS ANNUAL COST		$860,038		$1,018,350		$684,651			$163,979	

Favorable/(Unfavorable): Total 163,979

8/14/2026 3:45 PM

COMMUNITY INPATIENT SERVICES
Report Period: October 1st, 2025 through July 31st, 2026

	UTILIZATION COMPARISONS FY 25/26									
	FY 24/25 Actual		FY 25/26 Budget		FY 25/26 Actual			Days Difference	Cost Difference	Cost YTD
		Dollars	Clients Served	Dollars	Days			Favorable (Unfavorable)	Favorable (Unfavorable)	Favorable (Unfavorable)
OCTOBER	637	$551,635	608	$702,343	566	$558,002		42	$144,341	$144,341
NOVEMBER	640	$702,827	608	$702,343	681	$753,747		(73)	($51,404)	($51,404)
DECEMBER	708	$777,481	608	$702,343	572	$633,057		36	$69,286	$69,286
JANUARY	577	$635,283	608	$702,343	652	$732,357		(44)	($30,014)	($30,014)
FEBRUARY	405	$447,214	608	$702,343	489	$545,573		119	156,770	156,770
MARCH	640	$706,244	608	$702,343	578	$645,456		30	56,887	56,887
APRIL	525	$577,375	608	$702,343	510	$566,743		98	135,600	135,600
MAY	503	$552,904	608	$702,343	499	$560,235		109	142,108	142,108
JUNE	618	$680,211	608	$702,343	609	$682,142		(1)	20,201	20,201
JULY	810	$890,502	608	$702,343	466	$518,280		142	184,063	184,063
AUGUST	662	$725,577	608	$702,343						
SEPTEMBER	675	$739,152	608	$702,343						
TOTALS	7,400	$7,986,405	7,296	$8,428,119	5,622	$6,195,592		458	$827,838	$827,838
MONTHLY AVERAGES	617		608		562					
GROSS ANNUAL COST		$7,986,405		$8,428,119		$6,195,592			$827,838	

Favorable/(Unfavorable): Total 827,838

8/14/2026 3:45 PM

COMMUNITY LIVING SUPPORTS (CLS), PERSONAL CARE (PC) & CRISIS RESIDENTIAL
ALL POPULATIONS
Report Period: October 1st, 2025 through July 31st, 2026

					YTD		
					FY 25/26 Budget	FY 25/26 Actual	
SERVICE	Month	Avg. Daily Rate	No. Served	Days of Service	Dollars	Dollars	Favorable / (Unfavorable)
PC/CLS	July	$299	408	116,264	$34,141,418	34,723,491	($582,073)
CRISIS RES.		$603	57	787	$830,083	$474,235	$355,848
CLS (SIP)	July	NA	370		$11,870,827	11,702,987	$167,840
Annual Cost							($58,385)

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.

INTEGRATED
Services of Kalamazoo

Community • Independence • Empowerment

Integrated Services of Kalamazoo

MOTION

Subject:	June & July 2026 Disbursements	
Meeting Date:	**August 24, 2026**	**Approval Date:**
Prepared by:	Charlotte Bowser	**August 24, 2026**

Recommended Motion:

"Based on the Board Finance meeting review, I move that ISK approve the June 2026 vendor disbursements of $11,534,273.64 and the July 2026 vendor disbursements of $12,848,676.16."

Summary of Request:

As per the June 2026 Vendor Check Register Report dated 7/14/2026 that includes checks issued from 06/01/2026 to 06/30/2026 and the July 2026 Vendor Check Register Report dated 08/10/2026 that includes checks issued from 07/1/2026 to 07/31/2026.

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

Staff: **C. Bowser, Director of Finance**

Date of Board Consideration: **August 24, 2026**

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Services of Kalamazoo

Community • Independence • Empowerment

Administrative Services
610 South Burdick Street
Kalamazoo, MI 49007

www.iskzoo.org
(269) 553-8000

Board Report from the CEO

Beth Ann Meints

August 24, 2026

RE: Chief Medical Director and Psychiatrist Recruitment & Interviews

ISK Board of Directors,

We continue to work with Miller Johnson on litigation related to the previous PIHP RFP that was issued and subsequently withdrawn by the Michigan Department of Health and Human Services (MDHHS). On August 4, 2026, a brief was filed with the Court of Appeals addressing the state's authority to determine PIHP regions. MDHHS has until September 8, 2026, to submit its response.

There remains the possibility that MDHHS will release a new RFP related to the consolidation of PIHPs. In anticipation of this, ISK, SWMBH, and other stakeholders across the state are collaborating on preparedness and response strategies.

To support these efforts, ISK has entered into a Joint Representation Agreement, which allows participating organizations to share information, communicate, and engage in strategic discussions while maintaining applicable legal privileges and reducing the risk of disclosure in the event of future litigation.

The recruitment process for the positions of Chief Medical Director and Psychiatrist is currently underway.

Recruitment efforts have been successful, and qualified candidates have begun applying and we have interviews already scheduled. The organization has identified highly qualified professionals who have clinical ability, leadership experience, and commitment necessary to support our mission and strategic priorities.

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610 South Burdick Street
Kalamazoo, MI 49007

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(269) 553-8000

The Chief Medical Officer position is critical to providing clinical leadership, advancing quality of care, supporting regulatory compliance, and strengthening the integration of behavioral health. The Psychiatrist positions are equally essential to ensuring prompt access to high quality psychiatric evaluation, medical management, and ongoing treatment for the individuals we serve.

The Board will be kept informed of significant developments throughout the entire process.

That concludes my report.

With appreciation,

Beth Ann Meints
Chief Executive Officer