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

September 28, 2026

Name: INTEGRATED Services of Kalamazoo Board of Directors
Commencement Time: 4:30PM
Location: 610 South Burdick Street/Kalamazoo, MI., 1st FLOOR
Conference Room #128

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

IV. RECIPIENT RIGHTS
  a. Recipient Rights Monthly Report

V. CONSENT CALENDAR/VERBAL MOTION
  a. Minutes *August 28, 2026*
  b. Staff Treatment (V.02)(Policy & Report)
  c. Compensation & Benefits (V.08)(Policy & Report)

VI. FINANCIAL REPORTS
  a. Financial Condition Report
  b. Utilization Report
  c. *August* 2026 Disbursement/MOTION

VII. CITIZEN TIME

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

IX. ADJOURNMENT

IV.a.

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

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

	August 2026	FY 25-26	August 2025	FY 24-25
Total # of Complaints Closed	**39**	**446**	**51**	**401**
Total # of Allegations Closed	**46**	**593**	**73**	**607**
Total # of Allegations Substantiated	**24**	**213**	**19**	**201**

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

ALLEGATIONS	**August 2026**		**August 2025**	
Category	**TOTAL**	**SUBSTANTIATED**	**TOTAL**	**SUBSTANTIATED**
Consumer Safety	4	0	4	0
Dignity/Respect of Consumer	8	3	16	5
Treatment Issues/Suitable Services (Including Person Centered Planning)	7	3	16	2
Abuse I	0	0	0	0
Abuse II	3	1	4	2
Abuse III	5	4	7	1
Neglect I	1	1	0	0
Neglect II	1	1	3	2
Neglect III	15	11	9	5
	44	**24**	**59**	**17**

APPEALS	**August 2026**	**FY 25-26**	**August 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
September 2026

Re: August 2026 Abuse/Neglect Violations

August
Abuse Violations

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

Three of the four violations occurred at the same agency, but at three different program sites. There were 2 staff involved in one violation.

Neglect Violations

- There was one substantiated Neglect I violation in August 2026.
  - The remedial action for this violation was Contract Action (1).
- There was one substantiated Neglect II violation in August 2026. It was a Neglect II Failure to Report.
  - The remedial action for this violation was Pending (1).
- There were eleven substantiated Neglect III violations in August 2026. Three of the eleven were Failure to Report.
  - The remedial actions for these violations were Written Reprimand (7), Training (3) and Pending (14).

Four of the 11 violations were at the same agency and occurred at 2 different program sites. Another 2 violations occurred at the same agency. There were 2 staff involved in two different violations. There were 3 staff involved in one violation. There were 6 staff involved in one violation.

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 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

August 24, 2026 V.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	Kalamazoo/Kalamazoo	
Sharon Price	X	Kalamazoo/Kalamazoo	
Michael Raphelson			X
Caelynn Uhlmann			X
Melissa Woosley	X	Kalamazoo/Kalamazoo	
Abigail Wheeler, *COMMISSIONER*	X	Board Member attended virtually but was ineligible to vote because an approved special circumstance agreement for virtual participation had not been established.	

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

Guests Present:
Shenetta Coleman, CEO/ROI
Diane Marquess, CEO/FCS
Latrevia Boston, Executive Director/ASK Family Services

Call to Order
The Board of Directors (Integrated Services of Kalamazoo) held their meeting on *Monday, August 24, 2026*. It began @ 4:30PM and was presided over by the Chair, *Karen Longanecker*.

Agenda
MOTION
Vice Chair Seals,
"I MOVE TO APPROVE THE AGENDA AS PRESENTED." Supported by Member Woolsey.
MOTION PASSED.

CITIZEN TIME No citizens came forth.

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)

Member Bergan, "I MOVE TO ACCEPT THE ACTION ITEMS DEFERRED AS PRESENTED."
Supported by Vice Chair Seals.
MOTION PASSED.

Recipient Rights
Lisa Smith ISK, Director of ORR, presented the complaints/allegations closed in **July 2026.**

July

Abuse Violations

- There were four substantiated Abuse III violations in July 2026
    - The remedial actions for these violations were 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 were 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 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).

PROGRAM SERVICES REPORT

Wanda Brown, Senior Executive, Integrated Health Services Clinic presented the Program Services Report.

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 is still 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 implemented. The 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 a wheelchair scale (combined totaling over $8,000 for the clinic), 615's intercom system updated, designated laptops available for use by the residents when seeing patients in the clinic, confidential shred boxes placed strategically throughout the clinic, revised resident training process was updated. The location for resident orientation was 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 members 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. 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 with their recovery, to protect the work already done well and to make it more sustainable, creating balanced workloads, a 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.

CONSENT CALENDAR
VERBAL MOTION
Chair Longanecker, "Is there anything that is on the Consent Calendar that anyone wants pulled out?" No materials were requested to be removed.

a. Minutes *July 27, 2026*
b. Budgeting (V.03)(Policy)
c. Finance (V.04)(Policy)
d. Asset Protection (V.07)(Policy & Report)

Vice Chair Seals, "I MOVE TO ACCEPT THE CONSENT AGENDA [CALENDAR] AS PRESENTED WITH ONE CORRECTION; Melissa Woolsey was absent at the July 27, 2026, board meeting." Supported by Member Bergan. MOTION PASSED.

Financial Reports/Financial Condition Reports
Amy Rottman, ISK, Chief Financial Officer, presented the Financial Condition Reports for July 31, 2026.

Amy also reviewed the FY26/27 Preliminary Budget and the SWMBH Cash Flow Summary.

To review these 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 July 31, 2026.

- Autism Services has (91) clients and is favorable at $1,646,285.
- Youth Community Inpatient Services is (167) days and is favorable at $163,979.
- MI Adult Community Inpatient Services is (458) days and is favorable at $827,838.
  Community Living Supports, Personal Care, and Crisis Residential are unfavorable at $58,385.

June & July Disbursements
MOTION
Vice Chair Seals, "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." Supported by Member Woolsey.

MOTION PASSED.

Chief Executive Officer Report
RE: PIHP/RFP & Chief Medical Director and Psychiatrist Recruitment & Interviews

We continue to work with Miller Johnson on litigation related to the earlier PIHP RFP that was issued and later 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 decide PIHP regions. MDHHS has until September 8, 2026, to send 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 supporting applicable legal privileges and reducing the risk of disclosure in case of future litigation.

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

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

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. 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.

Citizen Time No citizens came forth.

SWMBH (Southwest Michigan Behavioral Health) Updates/Michael Seals
According to Vice Chair Seals, the SWMBH DABS report for Medicaid coverage is declining drastically with no indications of increasing across all 8 regions. The conversations continue about revenue from the state to make SWMBH whole.

That concludes my report.

Meeting adjourned by voice vote at 5:50PM.
MOTION PASSED

Demeta J. Wallace
Administrative Coordinator & Board Liaison
Office of the CEO
Integrated Services of Kalamazoo Board of Directors

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY V.02

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

PURPOSE/EXPLANATION

To define limitations of means regarding the treatment of staff.

POLICY

I. With respect to treatment of paid and volunteer staff, the Chief Executive Officer (CEO) may not cause or allow conditions which are unfair and undignified. Accordingly, he/she may not:

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

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

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

CHIEF EXECUTIVE OFFICER

Jeff Patton
Chief Executive Officer

APPROVED

Karen Longanecker
Board Chair

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Staff Treatment Report
September 18, 2026

Executive Limitation Policy

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

Accordingly, the Chief Executive Officer may not:

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

Policy Governance and Administration: ISK maintains written personnel policies and procedures that guide personnel actions, clarify staff expectations, protect employee rights, and support health, safety, and emergency preparedness. Department leaders, supervisors, and employees are aware of these policies and have access to them through the ISK portal. Policy changes are reviewed and approved through the Kalamazoo Policy Development Committee. Human Resources provides orientation for new employees, offers training and consultation, and supports leaders and employees in the application of these policies.

Emergency Preparedness and Continuity: ISK maintains an Organizational Continuity Plan that is reviewed periodically by leadership. Current emergency and disaster preparedness guidance is incorporated into agency planning and staff communication processes.

Performance Management: ISK uses UKG for performance appraisal processes while continuing to emphasize core competency and value-based evaluation standards. Performance appraisals occur after 90 days, at six months, and annually thereafter.

Ethics and Employee Rights: ISK maintains several policies and practices that promote a respectful, safe, and ethical workplace. These policies protect employee dignity and respect, safeguard the right to raise ethical job-related concerns and grievances without fear of retaliation, support fair and effective resolution of workplace issues, protect employees from wrongful working conditions, and promote health and safety in the workplace. *During the past year, there were no formal requests for ethical job-related dissent.*

Grievances: *No grievances were submitted against the Chief Executive Officer during this reporting period.*

B. Fail to:

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

Staff Awareness and Policy Access: New employees receive orientation on personnel policies and procedures. Policies are available through the ISK portal and updated as revisions are made. Employees verify awareness of applicable policies upon hire and annually review and sign off on the Employee Code of Ethics.

Recruitment and Workforce Representation: ISK continues to review recruitment practices, job posting language, and demographic information to support outreach to qualified candidates who reflect the community and population served. *In 2026, ISK engaged a recruitment firm to support the recruitment and hiring of a Chief Medical Officer and several psychiatrists for our clinic.*

Recognition, Satisfaction, and Engagement: ISK supports employee recognition, satisfaction, and involvement through structured feedback opportunities, employee surveys, leadership engagement, and staff recognition activities. *In 2026, staff participated in a Benefits Survey and Listening Sessions to provide input and feedback on workplace experience and organizational decision-making. In July 2026, ISK replaced the You Make a Difference recognition program with Nectar, an online recognition platform that allows supervisors and employees to recognize peers and staff through shoutouts and point awards. The system supports timely recognition across community-based, multi-location, and hybrid work arrangements.*

Training and Development:
ISK maintains robust training and development programs that support staff growth, competency, and organizational performance. Employees have access to onsite training opportunities, community-based programs, and online learning through Relias. ISK also maintains a tuition reimbursement policy that allows eligible employees to receive up to $3,000 per year, and employees may also be eligible for loan repayment programs based on applicable program requirements. ISK maintains a formal paid master's-level internship program and partners with educational institutions to offer shadowing, precepting, and medical resident placement opportunities. *In 2026, ISK became an employment site under the CCBHC Transformation Workforce Career Accelerator program through the National Council for Mental Wellbeing. Twenty-three (23) limited licensed staff are participating in the cohort, which provides educational assistance and financial incentives to support obtaining full licensure over the next two years.*

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

Monitoring: This policy is monitored annually through internal and external mechanisms, including employee feedback, survey data, exit interviews, and review of personnel practices related to staff treatment.

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY V.08

AREA:	Governance		
SECTION:	Executive Limitations	PAGE:	1 of 1
SUBJECT:	**COMPENSATION AND BENEFITS**	SUPERSEDES:	09/24/2012
		REVISED:	09/27/2021

PURPOSE/EXPLANATION

To establish limitations of means regarding compensation and benefits.

POLICY

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

A. He/she may not:
1. Change his or her own compensation and benefits.
2. Promise or imply permanent or guaranteed employment.
3. Establish current compensation and benefits which deviate materially from the geographic or professional market for the skills employed.
4. Establish or change pension benefits.

B. He/she may not fail to:
Ensure education is offered to all staff at least every five (5) years on the pros and cons of opting out of Social Security and conducting a Straw Vote after the completion of the education sessions. If the Straw Vote is greater than 50% to opt back into Social Security then an actual vote must be conducted.

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

CHIEF EXECUTIVE OFFICER

Jeff Patton
Chief Executive Officer

APPROVED

Erik Krogh
Board Chair

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Compensation & Benefit Report
September 18, 2026

Executive Limitation Policy

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

Accordingly, the Chief Executive Officer may not:

A. Change his or her own compensation and benefits.

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

B. Promise or imply permanent or guaranteed employment.

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

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

Response: Over the past five years, ISK has undertaken several compensation initiatives to support recruitment, retention, and market competitiveness.

- *FY 2022: Salary ranges were increased by 1%. In May 2021, Master's-level clinicians and clinical supervisors received market adjustments of 9-10% to improve competitiveness. Peer Family Support Partners and Direct Care Specialists were also moved up one salary band.*
- *FY 2023: To enhance recruitment and retention, compensation changes were implemented in August 2022, including an 11% increase for staff and a 10% increase to the salary schedule. Several positions were moved to a higher salary grade, including Med Clinic Receptionists, Supports Coordinator Assistants, Community Health Workers, Employment Specialists, Housing Coordinators, Nurses, Clinical Supervisors, selected managers and senior executives, Recipient Rights staff, and certain IT positions. Additional market adjustments were implemented for prescribers and Master's-level clinicians. A comprehensive market survey conducted in 2023 resulted in a new salary schedule and salary grade increases for positions including Direct Care Specialists, Peer positions, and Bachelor's-level clinical staff.*

- *FY 2024: Compensation increases were based on a budgeted 3% adjustment and allocated primarily through pay grade movements. Some employees were not eligible for additional increases due to prior mid-year market adjustments.*
- *FY 2025: Eligible staff received a 3% across-the-board wage increase in October 2024. Salary grades were not adjusted.*
- *FY 2026: Due to budget constraints, no annual increase was provided in October 2025 and salary grades remained unchanged. A wage compression analysis was completed, resulting in targeted adjustments for identified staff in August and September 2025. In May 2026, staff received a 3% across-the-board wage increase.*

D. Establish or change pension benefits.

Response: ISK participates in the Kalamazoo County Retirement System and as such are bound by its terms and conditions. Quarterly meetings are held with the County to discuss and review the retirement system. Our belief is that the current retirement system is financially very strong and of great benefit to our employees. In FY 2025 the ISK Board approved a motion to implement the Rule of 80 effective January 1, 2025 consistent with Kalamazoo County.

The Chief Executive Officer may not fail to:

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

Response: A Straw Vote was conducted on August 17, 2011. Only 17% of the eligible voters voted to go back into Social Security. Therefore, a sanctioned vote did not take place. A Straw Vote was conducted on August 11, 2016. Again, only 17% of the eligible voters voted to go back into Social Security. Therefore, a sanctioned vote did not take place. A Straw Vote was held on September 21, 2021. Only 6% of the eligible voters voted to go back into Social Security. Therefore, a sanctioned vote did not take place. A Straw Vote is being scheduled in fall of 2026.

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

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

INTEGRATED SERVICES OF KALAMAZOO

August 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

	August 31 2026	August 31 2025
Assets		
Cash position	$ 32,738,654	$ 26,532,006
Accounts receivable	8,027,209	7,593,170
Due from other governments	8,686,340	8,550,587
Prepaid items	1,507,938	1,406,859
Total curerent assets	50,960,141	44,082,622
Non-current assets		
Capital assets, net of accumulated depreciation	17,274,671	14,948,537
Net pension asset, net of deferred outflows	10,769,202	8,442,339
Total non-current assets	28,043,873	23,390,876
Total assets	$ 79,004,014	$ 67,473,498
Liabilities		
Accounts payable	$ 10,513,253	$ 9,155,758
Due to other governments	6,066,635	172,944
Due to providers	-	63,722
Accrued payroll and payroll taxes	2,166,159	3,119,070
Leases payable	3,431,961	-
Unearned revenue	126,845	156,278
Total current liabilities	$ 22,304,854	$ 12,667,772
Deferred inflows		
Deferred inflows	$ 2,772,498	$ -
Net Position		
Designated	8,722,022	8,654,636
Undesignated	31,389,003	24,523,412
Investment in fixed assets	14,125,075	13,277,168
Net gain (loss) for period	(309,438)	8,350,510
Total net position	$ 53,926,662	$ 54,805,726

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INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenditures and Change in Net Position

Budget to Actual - October 1, 2025 through August 31, 2026

Percent of Year is 91.67%

	Original 2026 Budget	YTD Actual	Remaining Budget	Percent of Budget - YTD
Operating revenue				
Medicaid:				
Traditional Capitation	$ 86,641,701	$ 78,491,229	$ 8,150,472	90.59%
Healthy Michigan Capitation	9,119,193	6,184,172	2,935,021	67.81%
State General Fund:				
Formula Fundings	3,900,516	3,832,530	67,986	98.26%
CCBHC Demonstration	34,258,759	30,645,377	3,613,382	89.45%
CCBHC Quality Bonus	1,326,190	2,347,457	(1,021,267)	177.01%
County Allocation	1,550,400	1,421,200	129,200	91.67%
Client Fees	1,069,711	920,480	149,231	86.05%
Other grant revenue	6,780,003	4,949,930	1,830,073	73.01%
Other earned contracts	1,958,805	2,224,560	(265,755)	113.57%
Interest	157,232	18,229	139,003	11.59%
Local revenue	508,606	59,089	449,517	11.62%
Total operating revenue	$ 147,271,116	$ 131,094,253	$ 16,176,863	89.02%
Operating expenses				
Salaries and wages	$ 32,403,237	$ 27,158,933	$ 5,244,304	83.82%
Employee benefits	12,643,544	9,923,659	2,719,885	78.49%
Staff development	300,933	137,021	163,912	45.53%
Payments to providers	93,008,476	81,982,271	11,026,205	88.14%
Administrative contracts	8,262,621	8,932,314	(669,693)	108.11%
IT software and equipment	928,129	820,150	107,979	88.37%
Client transportation	52,900	41,193	11,707	77.87%
Staff travel	386,676	314,967	71,709	81.45%
Office expenses	685,668	509,328	176,340	74.28%
Insurance expense	168,769	159,046	9,723	94.24%
Depreciation expense	585,704	738,267	(152,563)	126.05%
Utilities	363,874	364,833	(959)	100.26%
Facilities	36,265	42,027	(5,762)	115.89%
Local match	305,108	279,682	25,426	91.67%
Total operating expenses	$ 150,131,904	$ 131,403,691	$ 18,728,213	87.53%
Change in net position	(2,860,788)	(309,438)	(2,551,350)	
Beginning net position	54,236,100	54,236,100		
Ending net position	$ 51,375,312	$ 53,926,662		

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, 2025 through August 31, 2026
Percent of Year is 91.67%

	Specialty Services		Healthy Michigan		SUD Block Grant		Totals		
	YTD Budget	YTD Totals 8/31/26	YTD Budget	YTD Totals 8/31/26	YTD Budget	YTD Totals 8/31/26	YTD Budget	YTD Totals 8/31/26	Variance
Operating revenue									
Medicaid:									
Traditional Capitation	$ 79,421,559	$ 83,830,501	$ -	$ -	$ -	$ 102,628	$ 79,421,559	$ 83,933,128	$ 4,511,569
Healthy Michigan Capitation	-		8,359,260	6,756,637	-	-	8,359,260	6,756,637	(1,602,623)
Settlement Estimate	-	(5,339,272)	-	(572,465)	-	(99,080)	-	(6,010,817)	(6,010,817)
Client Fees	6,664	-	76	-	-	-	6,740	-	(6,740)
Total operating revenue	$ 79,428,223	$ 78,491,229	$ 8,359,336	$ 6,184,172	$ -	$ 3,548	$ 87,787,559	$ 84,678,948	$ (3,108,611)
Operating expenses									
Internal services	$ 2,076,785	$ 1,434,723	$ 12,793	$ 8,834	$ -	$ -	$ 2,089,578	$ 1,443,557	(646,021)
External services	69,891,368	67,427,881	4,768,124	4,903,706	-	-	74,659,492	72,331,587	(2,327,905)
Delegated managed care	11,518,547	9,628,625	765,189	1,271,631	-	3,548	12,283,735	10,903,804	(1,379,932)
Total operating expenses	$ 83,486,700	$ 78,491,229	$ 5,546,106	$ 6,184,172	$ -	$ 3,548	$ 89,032,806	$ 84,678,948	$ (4,353,858)
Change in net position	$ (4,058,477)	$ 0	$ 2,813,230	$ 0	$ -	$ (0)	$ (1,245,246)	$ -	$ -

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position
October 1, 2025 through August 31, 2026
Percent of Year is 91.67%

	State General Fund		CCBHC		Other Funding Sources		Totals		
	YTD Budget	YTD Totals 8/31/26	YTD Budget	YTD Totals 8/31/26	YTD Budget	YTD Totals 8/31/26	YTD Budget	YTD Totals 8/31/26	Variance
Operating revenue									
General Fund	$ 3,575,473	$ 3,832,530	$ -		$ -	$ -	$ 3,575,473	$ 3,832,530	$ 257,057
Projected GF Carryforward							-	-	-
CCBHC Demonstration	-	-	34,201,296	32,992,834	-	-	34,201,296	32,992,834	(1,208,462)
Other Federal and State Grants	-	-	-	614,460	5,600,543	4,335,470	5,600,543	4,949,930	(650,613)
Earned Revenue	-	-	-	-	975,782	2,224,560	975,782	2,224,560	1,248,777
Client Fees	-	-	-	774,050	-	146,430	-	920,480	920,480
COFR Revenue	-	-	-	-	-	-	144,129	-	(144,129)
Interest	-	-	-	-	144,129	18,229	1,421,200	18,229	(1,402,971)
County Allocation	-	-	-	-	1,421,200	1,421,200	466,222	1,421,200	954,978
Local Revenue	6,529	-	-	-	466,222	59,089	6,529	59,089	52,560
Transfer from GF		-	67,741	1,152,261	-	-	67,741	1,152,261	1,084,520
Total operating revenue	$ 3,582,002	$ 3,832,530	$ 34,269,037	$ 35,533,605	$ 8,607,877	$ 8,204,979	$ 46,458,916	$ 47,571,114	$ 1,112,197
Operating expenses									
Internal Programs	$ 812,650	$ 464,597	$ 35,135,949	$ 35,035,346	$ 2,550	$ -	$ 35,951,149	$ 35,499,943	$ (451,206)
External Programs	2,227,504	1,634,007	-	-	601,792	904,090	2,829,295	2,538,098	(291,198)
Other Federal and State Grants	-	-	-	-	6,158,292	5,109,717	6,158,292	5,109,717	(1,048,575)
HUD Grants	-	-	-	-	1,670,047	1,317,753	1,670,047	1,317,753	(352,294)
Managed Care Administration	474,108	581,664	-	-	-	-	474,108	581,664	107,556
Homeless Shelter	-	-	-	-	353,390	339,469	353,390	339,469	(13,921)
Transfer from GF	67,741	1,152,261	-	-	-	-	67,741	1,152,261	1,084,520
Local match expense	-	-	-	-	279,682	279,682	279,682	279,682	(0)
Non-DCH Activity Expenditures	-	-	-	-	52,354	1,061,966	52,354	1,061,966	1,009,612
Total operating expenses	$ 3,582,002	$ 3,832,530	$ 35,135,949	$ 35,035,346	$ 9,118,106	$ 9,012,676	$ 47,836,057	$ 47,880,551	44,494
Change in net position	0	0	(866,912)	498,259	(510,229)	(807,698)	$ (1,377,141)	(309,438)	1,067,703

INTEGRATED SERVICES OF KALAMAZOO

CCBHC

October 1, 2025 through August 31, 2026
Percent of Year is 91.67%

	CCBHC Medicaid	CCBHC Healthy MI	CCBHC Non-Medicaid	CCBHC YTD Totals
Operating revenue				
CCBHC revenue	$ 23,074,123	$ 7,571,253	$ -	$ 30,645,377
CCBHC Quality Bonus	-	-	2,347,457	2,347,457
FFS Revenue	387,589	61,697	324,764	774,050
CCBHC SAMSHA Grant	-	-	614,460	614,460
Total CCBHC Revenue (PPS-1 of $303.92 x encounter	$ 23,461,712	$ 7,632,951	$ 3,286,681	$ 34,381,344
Operating expenses				
Internal services	$ 16,719,955	$ 6,821,305	$ 3,877,498	$ 27,418,758
DCO Contracts	5,979,292	1,117,689	519,607	7,616,588
Total operating expenses	$ 22,699,247	$ 7,938,993	$ 4,397,106	$ 35,035,346
Operating change in net position	762,466	(306,042)	(1,110,425)	(654,002)
General Fund Reclassification to cover Non-Medicaid	-	-	1,152,261	1,152,261
Total change in net position	$ 762,466	$ (306,042)	$ 41,836	$ 498,259

CCBHC Cost per daily visit

	2023	FY 2024	FY 2025	8/31/26
Total CCBHC Cost	$ 27,687,187	$ 31,777,786	$ 35,393,270	$ 35,035,346
Daily Visits	99,802	110,326	125,458	117,749
Cost per daily visit	$ 277.42	$ 288.04	$ 282.11	$ 297.54

AUTISM SERVICES
Report Period: October 1st, 2025 through August 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	187	793,941		7	$304,568	$727,815
JANUARY	190	$943,870	194	$1,098,509	195	762,474		(1)	$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	181	1,026,531		13	$71,978	$1,468,128
JULY	184	$1,018,918	194	$1,098,509	176	1,034,760		18	$63,749	$1,531,877
AUGUST	187	$934,104	194	$1,098,509	182	1,025,000		12	$73,509	$1,486,132
SEPTEMBER	187	$1,120,200	194	$1,098,509		-				
TOTALS	2,239	$11,852,571	2,328	$13,182,110	2,017	$10,478,213		117	$1,605,386	
MONTHLY AVERAGES	187		194		183					
GROSS ANNUAL COST		$11,852,571		$13,182,110		$10,478,213			$1,605,386	

Favorable/(Unfavorable): Total 1,605,386

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YOUTH COMMUNITY INPATIENT SERVICES
Report Period: October 1st, 2025 through August 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	59	$58,900		26	25,963	25,963
SEPTEMBER	50	$48,608	85	$84,863						
TOTALS	890	$860,038	1,020	$1,018,350	742	$743,551		193	$189,942	$189,942
MONTHLY AVERAGES	74		85		67					
GROSS ANNUAL COST		$860,038		$1,018,350		$743,551			$189,942	

Favorable/(Unfavorable): Total 189,942

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COMMUNITY INPATIENT SERVICES
Report Period: October 1st, 2025 through August 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	$714,873		(44)	($12,530)	($12,530)
FEBRUARY	405	$447,214	608	$702,343	489	$538,584		119	163,759	163,759
MARCH	640	$706,244	608	$702,343	578	$693,198		30	9,145	9,145
APRIL	525	$577,375	608	$702,343	510	$579,943		98	122,400	122,400
MAY	503	$552,904	608	$702,343	499	$580,695		109	121,648	121,648
JUNE	618	$680,211	608	$702,343	609	$731,642		(1)	(29,299)	(29,299)
JULY	810	$890,502	608	$702,343	466	$552,380		142	149,963	149,963
AUGUST	662	$725,577	608	$702,343	734	$819,127		(126)	(116,784)	(116,784)
SEPTEMBER	675	$739,152	608	$702,343						
TOTALS	7,400	$7,986,405	7,296	$8,428,119	6,356	$7,155,248		332	$570,525	$570,525
MONTHLY AVERAGES	617		608		578					
GROSS ANNUAL COST		$7,986,405		$8,428,119		$7,155,248			$570,525	

Favorable/(Unfavorable): Total 570,525

COMMUNITY LIVING SUPPORTS (CLS), PERSONAL CARE (PC) & CRISIS RESIDENTIAL
ALL POPULATIONS
Report Period: October 1st, 2025 through August 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	August	$329	408	116,264	$37,555,560	38,226,559	($670,999)
CRISIS RES.		$603	63	868	$913,092	$523,754	$389,338
CLS (SIP)	August	NA	370		$13,057,909	12,964,653	$93,256
Annual Cost							($188,405)

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.

VI.c.

Community • Independence • Empowerment

Integrated Services of Kalamazoo

MOTION

Subject:	August 2026 Disbursements	
Meeting Date:	**September 28, 2026**	**Approval Date:**
Prepared by:	Charlotte Bowser	**September 28, 2026**

Recommended Motion:

"Based on the Board Finance meeting review, I move that ISK approve the August, 2026 vendor disbursements of $11,511,437.91."

Summary of Request:

As per the August 2026 Vendor Check Register Report dated 14/08/2026 that includes checks issued from 08/01/20126 to 08/31/2026.

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

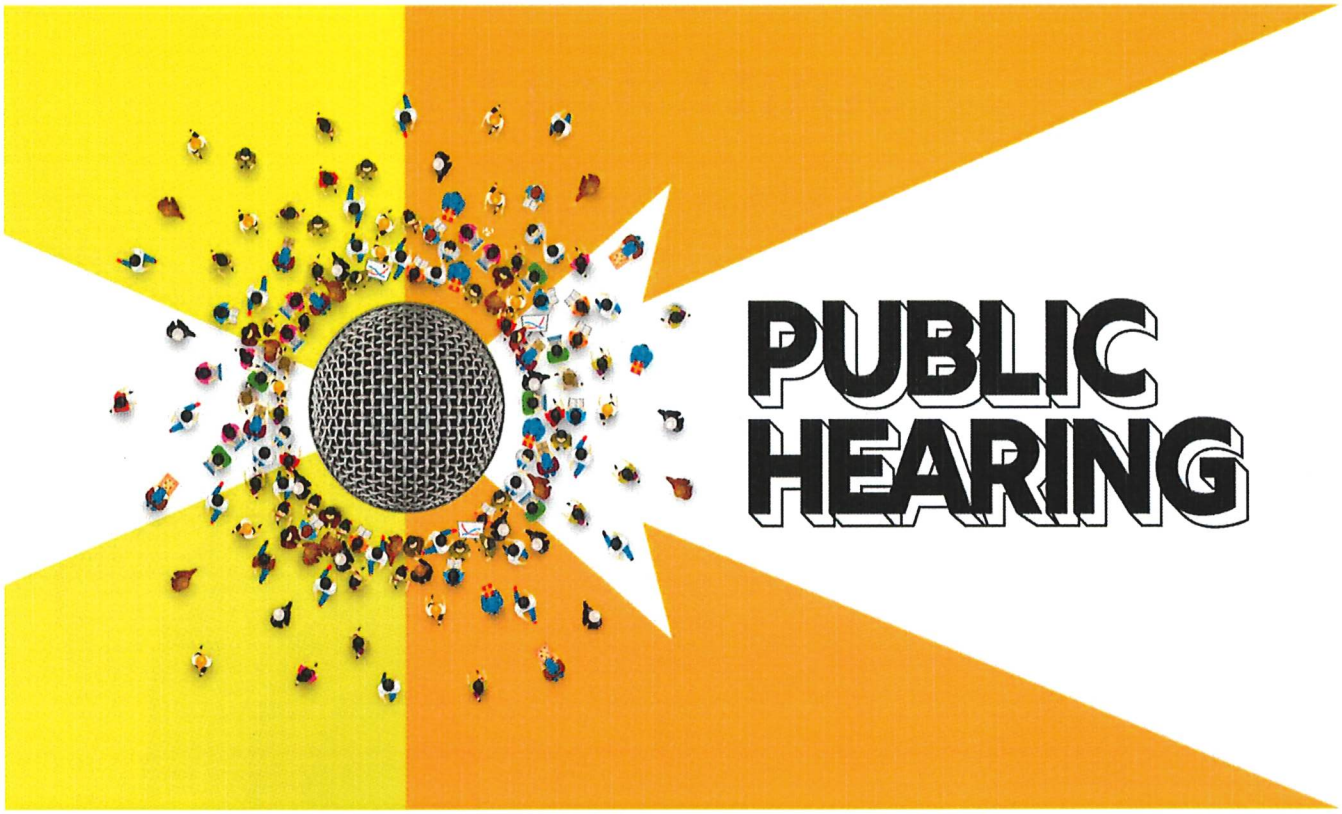
Staff: **C. Bowser, Director of Finance**

Date of Board Consideration:

September 28, 2026

Annual Public Hearing

September 28, 2026



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

AGENDA
ANNUAL PUBLIC HEARING

I. CALL TO ORDER

II. AGENDA

III. OPENING COMMENTS
Karen Longanecker/ISK Board Chair

Welcome All:

- Thank you for attending this annual public hearing.
- Introduce ISK Board of Directors to the audience:
  - *Chair Karen Longanecker*
  - *Vice Chair Michael Seals*
  - Nkenge Bergan
  - Patrick Dolly
  - Ramona Lumpkin
  - Sharon Price
  - Abigail Wheeler, Kalamazoo County Commissioner
  - Michael Raphelson, M.D.
  - Caelynn Uhlmann
  - Melissa Woosley

NEXT PAGE

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Hearing Background:

- Integrated Services of Kalamazoo (ISK) Board of Directors is very interested in hearing the public's assessment of our service delivery system. This public hearing is just one place where we hear from those we serve, their families and our community. Everyone is invited to attend and comment at any of our board meetings, which usually occur on the fourth Monday of each month.

- The Board is committed to providing quality services in response to community need. We are particularly seeking comments on ways to improve service quality and the need for new services.

- Tonight, we are interested in hearing your comments on services for children with serious emotional disturbances, adults with mental illness, children and adults with intellectual and developmental disabilities and individuals with co-occurring disorders.

Process:

- There will be two sign-up sheets available: One for those in attendance and one for those wishing to speak. Please complete both sheets if you plan on speaking. Make sure to include your full name and complete address with zip code.

- For those wishing to speak, please begin your comments/statements with your full name and address, including zip code.

- Please limit your remarks to 4 minutes.

- The ISK Board of Directors will be listening only this evening and will therefore not be responding to your remarks. Please do not interpret this as a lack of interest. The goal of our public hearing is to allow you to share personally and uninterrupted. A written response will be provided to those who speak, which is why it is so important to make sure we have your full name and address on record.

- If you wish to speak with an ISK Staff Person about your personal situation, someone will be available to talk with you after the meeting.

Thank you for taking time to attend the 2026 ISK Public Hearing. Information gathered this evening will be used as we plan for the FY26/27 ISK Budget.

IV. PUBLIC HEARING OPEN FOR COMMENTS/TESTIMONIALS

V. CLOSE PUBLIC HEARING/VERBAL MOTION

VI. BOARD MEMBER TIME & COMMENTS

VII. ADJOURNMENT

Annual BUDGET Public Hearing
September 28, 2026

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Kalamazoo, MI 49007
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(269) 553-8000

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

Annual Budget Hearing
BUDGET PUBLIC HEARING INSTRUCTIONS

Budget Public Hearing Proposed FY26/27 Budget

Purpose Chair Longanecker
The purpose of the Budget Public Hearing is to provide members of the public with an opportunity to review and comment on the proposed annual budget before final Board approval.

Chair Longanecker (Board Chair)
"The Budget Public Hearing on the Integrated Services of Kalamazoo FY26/27 Proposed Budget is now open. Call on the Chief Executive Officer, Beth Ann Meints."

Beth Ann Meints (CEO)
"Act 43 of the 1963 Public Acts, as amended, requires Kalamazoo County Community Mental Health Authority, which is doing business as Integrated Services of Kalamazoo, to hold a public hearing on its proposed FY26/27 budget prior to its final adoption.

In accordance with the statues, notice of this public hearing was published in MLive, a newspaper of general circulation within the community on September 17, 2026, and copies of the proposed budget have been available at the Kalamazoo County Administrative Offices/Board of Commissioners and the ISK Administrative Services offices for inspection by the public. Copies of the proposed budget are now available for any person present who wants to have a copy."

Chair Longanecker (Board Chair)
ISK Chief Financial Officer, Amy Rottman, was called upon by the Chair to present the budget.

~BUDGET PRESENTATION~

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

Chair Longanecker (Board Chair)
"Is there anyone present who wishes to ask any questions, or to make any comments?

Chair Longanecker (Board Chair)
Once all comments have ended if there are any the Chair will then say;
"I hereby declare the Budget Public Hearing for Integrated Services of Kalamazoo FY26/27 Proposed Budget Hearing be closed."

Chair Longanecker (Board Chair)
Chair will call for the motion to be read into the record, approved, and adopted for FY26/27.

INTEGRATED SERVICES OF KALAMAZOO

	Proposed 2027 Budget
Operating revenue	
Medicaid:	
Traditional Capitation	$ 92,224,151
Healthy Michigan Capitation	6,134,500
State General Fund:	
Formula Fundings	3,900,516
CCBHC Demonstration	35,620,053
CCBHC Quality Bonus	1,326,190
County Allocation	1,550,400
Client Fees	619,418
Other grant revenue	5,180,770
Other earned contracts	1,520,355
Interest	143,620
Local revenue	508,606
Total operating revenue	$ 148,728,579
Operating expenses	
Salaries and wages	$ 30,190,229
Employee benefits	11,316,975
Staff development	285,550
Payments to providers	96,842,228
Administrative contracts	8,571,309
IT software and equipment	913,454
Client transportation	61,170
Staff travel	410,390
Office expenses	717,407
Insurance expense	206,797
Depreciation expense	697,049
Utilities	384,081
Facilities	58,552
Local match	305,108
Total operating expenses	$ 150,960,300
Loss	**(2,231,720)**

INTEGRATED
Services of Kalamazoo

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Integrated Services of Kalamazoo

MOTION

Subject:	ISK FY2026/2027 Budget	
Presented by:	ISK Finance and Compliance Committee	
Meeting Date:	September 28, 2026	Approval Date:
Prepared by:	Amy Rottman Chief Financial Officer	September 28, 2026

Recommended Motion:

"I MOVE APPROVAL OF THE INTEGRATED SERVICES OF KALAMAZOO FY2026/2027 BUDGET WHICH BEGINS OCTOBER 1, 2026, FOR $150,960,300.

Summary of Request:

Attached is the budget document.

ROLL CALL VOTE:

ISK Board Member	Yes	No
Chair Karen Longanecker		
Vice Chair Michael Seals		
Member Nkenge Bergan		
Member Patrick Dolly		
Member Caelynn Uhlmann		
Member Sharon Price		
Member Abigail Wheeler		
Member Michael Raphelson		
Member Ramona Lumpkin		
Member Melissa Woolsey		
MOTION PASSED		

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

Budget: FY2026/2027
Staff: A.Rottman, CFO

Date of Board Consideration: 09/28/2026