

AGENDA

OnPoint Board
Tuesday, July 18, 2023
5:30 pm

540 Jenner Drive
Board Room

Also available virtually at the link or phone number below:

Microsoft Teams meeting

Join on your computer or mobile app

[Click here to join the meeting](#)

Or call in (audio only)

[+1 616-327-2708,896969400#](tel:+16163272708,896969400#) United States, Grand Rapids

Phone Conference ID: 896 969 400#

1. Call to Order – Commissioner Gale Dugan
2. Pledge of Allegiance
3. Provision for Public Comment – Agenda items only, subject to 5” limit per speaker
4. Approval of Agenda
5. Consent Agenda – *All items listed are considered to be routine and will be enacted by one motion. There will not be separate discussion of these items. If discussion is desired, that item will be removed from the Consent Agenda upon request of any board member and will be considered separately.*
 - a. **Motion** – Approval of prior minutes:
 - i. Executive Committee Meeting (06.16.2023)
 - ii. Board Meeting (06.20.2023)
 - iii. Finance Committee Meeting (06.20.2023)
 - iv. Program Committee Meeting (06.20.2023)
6. Program Committee – Alice Kelsey
7. Finance Committee Report – Beth Johnston
 - a. **Motion** – Approval of Voucher Disbursements April 2023
8. Recipient Rights Advisory Committee (Feb/May/Aug/Nov) – Glen Brookhouse – Ms. Newsome to share interim report.
9. Chairperson's/Executive Committee Report – Commissioner Gale Dugan
10. LRE updates – Stephanie VanderKooi
11. OnPoint Executive Director's Report – Mark Witte
12. Provision for Public Comment (any topic, subject to 5” limit per speaker) – Commissioner Dugan
13. Board Member Comments
14. Adjournment

Future meetings: **540 Jenner Drive**

August 11, 2023 – 2:30 pm – Executive Committee

August 15, 2023 – 4:15 pm – Program Committee

August 15, 2023 – 4:30 pm – Finance Committee

August 15, 2023 – 5:30 pm – Full Board

AGENDA

OnPoint
Program Committee
Tuesday, June 20, 2023
4:15 pm

540 Jenner Drive, Allegan

Also available virtually at the link or phone number below:

Microsoft Teams meeting

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Or call in (audio only)

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Phone Conference ID: 896 969 400#

NOTE: At this time, in-person attendance capacity is limited. Social distancing is required.

1. Call to Order – Alice Kelsey, Chair
2. Public Comment – Agenda Items Only, Subject to 5-Minute Limit Per Person
3. Approval of Agenda
4. Approval of Minutes
5. Program Presentation: Occupational Therapy and Medication Clinic Services
6. Written Reports to Program Committee
 - a. COO Report – Leanne Kellogg
 - b. Clinical Services – no report – Susan Conrad
 - c. Quality Innovation and Compliance (verbal report only) – Mandy Padgett
 - d. Customer Service – Cathy Potter (Feb/May/Aug/Nov)
7. Program Committee Member Comments
8. Public Comment – Any Topic, Subject to 5-Minute Limit Per Person
9. Adjournment – Next meeting August 15, 2023 – **540 Jenner Drive**

Program Committee: Alice Kelsey, Chair; Vacant, Vice Chair;
Kim Bartnick, Robin Klay, Jessica Castaneda

Program Committee. (Excerpt from Board Bylaws, Art. VII. Section 1c (page 5) approved by OnPoint Board May 2021.)

The Program Committee shall consist of not less than 4 and not more than 6 Board members and shall include the Authority's chief program officer as an advisor. It shall review data and narrative information provided by Authority staff regarding services delivered by community-based service providers and hospital providers; review proposed new programs and existing programs and make recommendations relating thereto; make recommendations which encourage improvement in quality of services; review information with a view towards policy which encourages accountability in areas of programmatic, fiscal, compliance and clinical performance; and review compliance program issues and initiatives and make recommendations relating thereto. The Program Committee shall meet monthly, on a regular basis, at a date and time determined by the committee chairperson.

OnPoint
540 Jenner Drive

**Program Committee Minutes
June 20, 2023 – 4:15 pm**

Board Members Present: Kimberly Bartnick, Alice Kelsey and Karen Stratton

Board Members Absent: Robin Klay

OnPoint Staff Present: Nicole Aldrich, Susan Conrad, Brittany Conway, Beth Evans, Laura Furey, Geniene Gersh, Brooke Hickman, Brenda Holquist, Leanne Kellogg, Angie Messinger, John Mills, Mandy Padget, Brenda Polmanteer, Tara Poore, Cathy Potter, Lauren Tordaro and Nicole Troutman

Others:

1. Call to Order

Ms. Kelsey called the meeting to order at 4:11 pm.

2. Public Comment

None.

3. Approval of Agenda

Moved: Ms. Bartnick

Supported: Ms. Stratton

Motion carried.

4. Approval of Minutes of May 16, 2023 agenda as is.

Moved: Ms. Bartnick

Supported: Ms. Stratton

Motion carried.

6. Program Presentation – Peer Services

Several peers presented and were available for questions.

7. Program Committee Reports

a. Chief Operating Officer Report

Ms. Kellogg reviewed her report and was available for questions.

b. Clinical Services

Ms. Conrad gave an overview of what her position entails and was available for questions.

c. Quality Improvement/Performance Management

No report.

d. Customer Service

No report.

7. Program Committee Member Comments

None.

8. **Public Comment**

None.

9. **Adjournment**

Meeting adjourned at 5:15 pm.

OnPoint COO BOARD REPORT

July 2023

Submitted by: Leanne Kellogg, Chief Operating Officer, MS, BSN, RN,
269-673-6617 ext. 4868 email: lkellogg@onpointallegan.org

Chief Operating Officer

All combined leadership efforts within the past month and a half have been focused largely on CCBHC Demonstration Application- both the narrative attestation and the cost report.

CCBHC (Certified Community Behavioral Health Clinic) Grant

We successfully submitted our State of Michigan Demonstration application on 6/30/2023.

I'd like to express my thanks specifically to members of management team for the number of hours gathering, checking and preparing documentation for submission. To all of the staff who assisted in that similar process, we appreciate your support and willingness to jump in and assist in the quick turnaround.

Our appreciation also is extended specifically to Amy Kettring and Jennifer Taylor who were instrumental in the upload and submission process- we thank you!

We anticipate hearing results before the end of August. We are sequencing internal program development and project plans around the demonstration and IA projects in line with our strategic planning processes.

Melissa Potvin MA, LPC – Manager of High Intensity Services

Access

There were 143 inquiries for services and 163 assessments scheduled for the month of June. 111 of those assessment were completed and 52 were either cancellations or no shows. There were 44 adult mental health assessments, 15 SUD assessments, 31 children's mental health assessments, 11 children's I/DD or Autism assessments, and 6 adult I/DD assessments, as well as 4 annual assessments completed for med clinic only services. We were able to fill our vacant Access position with an internal referral and anticipate they will start training part time mid-July.

Mental Health Treatment Court

There are currently 7 people actively participating in MHTC. There are 3 in Phase 2 and 4 in Phase 1. No new clients entered the program in June.

Crisis

There were 57 prescreens total in June, 82% adult and 18% were for minors. This has been our highest number of prescreens so far for this year, and we are seeing a steady rise. Crisis team has also experienced an increase in walk in traffic after moving to the new location for people in crisis and just wanting to talk and those seeking services. The crisis team diverted 21% of our prescreens from placements and engaged in safety planning and referring as necessary. The remaining 79% were placed in inpatient, partial hospitalization programs and crisis residential programs. Hope Network has officially closed their PIVOT crisis residential program in Grand Rapids which tightens the overall network of crisis residential beds that can be used for adults in the region. The crisis team is using their one bed at Hope Network Robert

Brown location and all other options as well. Mobile crisis is averaging 2-3 calls per month this spring/summer period.

Assertive Community Treatment

There are currently 35 ACT participants enrolled with services at OnPoint, which includes two intakes during the month of June. There were no discharges for the month of June, however there are three consumers who are incarcerated with no scheduled date of release and will be considered for discharge. Collectively, ACT is assisting three individuals work toward their housing goals by collaborating with the Housing team at OnPoint. There has been consistent communication with the Social Security Administration to help establish financial benefits regarding four consumers in the program. Lastly, guided advocacy and support to four consumers involved with the criminal justice system. The ACT team celebrated one of our consumers following through with one of his goals for employment to utilize his CDL training and has recently secured a training opportunity to gain more experience. In addition to the three individuals actively working toward their housing goals, another ACT consumer has actually secured her own apartment and moved in last week!

AGENDA

OnPoint Finance Committee July 18, 2023 4:30 pm

540 Jenner Drive, Allegan
Hamilton Room

NOTE: At this time, in-person attendance capacity is limited. Social distancing is required.

1. Call to Order – Beth Johnston, Chairperson
2. Public Comment – Agenda Items Only, Subject to 5-Minute Limit Per Person
3. Approval of Agenda
4. Approval of Minutes
5. Review of Written Reports
 - a. Administrative Services Report – Andre Pierre, Chief Financial Officer
 - b. Facilities & Human Resources – Andre Pierre, Chief Financial Officer
6. Action Items
 - a. Voucher Disbursements June 2023
7. Informational Items
 - a. April 2023 Financial Reports
 - b. Single Audit and Compliance Exam Reports
8. Finance Committee Member Comments
9. Public Comment – Any Topic, Subject to 5-Minute Limit Per Person
10. Adjournment until next meeting: August 15, 2023 – **540 Jenner Drive** at 4:30 pm.

Finance Committee: Beth Johnston, Chair; Glen Brookhouse, Vice Chair;
Mark DeYoung, Gale Dugan

Finance Committee. (Excerpt from Board Bylaws, Art. VII. Section 1b (page 5) approved by ACCMHS Board May 2021.) *The Finance Committee shall consist of not less than 4 and not more than 6 Board members, and shall include the Authority's chief financial officer as an advisor. The Committee shall review the financial position of the Authority in relation to state, county, federal and other funding sources; the budget and allocations and third party payments; address audit issues when appropriate; analyze financial reporting requests/ requirements and Authority expenditures; and consider such other financial matters as the Board or the Chairperson of the Board may refer to the Committee. The Chairperson of the Finance Committee shall be the Board Treasurer. The Finance Committee shall meet monthly, on a regular basis, at a date and time determined by the Chairperson. A finance committee will typically be responsible for monitoring and communicating to the board about the organization's overall financial health. Its core duties are likely to include participating in and overseeing: the development of the organization's budgeting and financial planning, the creation of the organization's internal controls, the preparation and distribution to the board of timely, accurate, user-friendly financial reports, and the implementation of safeguards to protect the organization's assets.*

OnPoint
DRAFT Finance Committee Minutes
June 20, 2023 – 4:30 pm
Location: 540 Jenner Drive

Board Members Present: Glen Brookhouse, Gale Dugan, Mark DeYoung, Beth Johnston

Board Members Absent: Karen Stratton

Staff Members: Mark Witte, Andre Pierre, Nikki McLaughlin

Public Present: Derek Miller

1. **Call to Order** – Beth Johnston - Chairperson, called the meeting to order at 4:31 pm

2. **Public Comment** – None

3. **Approval of Agenda**

Moved: DeYoung Supported: Dugan

Addition to agenda item for review a motion for the Finance Committee recommends that the OnPoint Board approve the Deficit Elimination plan. Added as number 5C.

Addition to agenda to discuss Infographic. Added under #8

Motion carried.

4. **Approval of Minutes**

Moved: Dugan Supported: Brookhouse

Motion carried.

5. **Review of Written Reports:**

a. Administrative Services Report

Mr. Pierre reviewed the report and was available for questions. No additional items were added to the report.

b. Facilities & Human Resources

Mr. Pierre reviewed building formal “punch” list as well as additional items that have been reviewed for building needs after move. Discussion about cell phone service was talked about as well as adequacy of privacy in therapy rooms, which is much improved after stripping was added to doorways.

6. **Action Items:**

a. The Finance Committee recommends that the OnPoint Board approve the December 2022 disbursements totaling \$5,532,210.71.

Moved: DeYoung Supported: Brookhouse

Motion carried.

b. The Finance Committee recommends that the OnPoint Board approve the following contracts for FY2023.

ProLow Moving
Riverside Integrated Systems, Inc
EPS Security
County of Muskegon
Pine Ridge Bible Camp
Camp Sunshine

Landmark Recovery, LLC
Anikare

Moved: Dugan Supported: Brookhouse

Motion carried.

- c. The Finance Committee recommends that the OnPoint Board approve The Deficit Elimination Plan as presented.

Moved: Brookhouse Supported: DeYoung

Motion carried.

7. Informational Items

- a. April 2023 Financial Reports reviewed with Administrative Report.
Discussion over PA2 funding as well as reporting timelines for LRE reports.

8. Finance Committee Member Comments

Tabled discussion for future meeting over Infograph.

9. Public Comment

None

10. Next Meeting – July 18, 2023, at 4:30 pm.

11. Adjournment

Moved: Dugan Supported: Brookhouse

Motion carried.

Meeting adjourned at 5:23 pm.



Administrative Services Board Report July 2023

Submitted by Andre Pierre, Chief Financial Officer
269.569.3238 – APierre@OnPointAllegan.org

We have officially taken occupancy of the new building on May 5, 2023. There still remains a “punch list” of small building items/projects to be completed. These items are on track to be completed over the next few months. We are processing the sixteenth construction draw totaling \$ 271,722.69, which will be funded through the United States Department of Agriculture (USDA) loan and Michigan Economic Development Corporation (MEDC) grant. During the month of June we did not execute any change order requests. We continue to meet with Cornerstone Construction and Schley Nelson Architects to review change orders, requests for information, and project status.

This month’s packet includes the monthly financial report for May 2023. This is the eighth month under the agency’s new chart of accounts after implementing Standard Cost Allocation. We are required to track staff time and costs at a greater level of detail than in the past, and to change the methodology we use to allocate costs. Overall, this change in methodology has not resulted in a significant change in cost by funding source. The Summary Schedule of Revenues and Expenses by Fund Source shows the difference between the revenue received from the Lakeshore Regional Entity (LRE) and the State of Michigan Department of Health and Human Services (MDHHS) and the eligible expenses incurred by OnPoint. These fund sources are cost settled at the end of each year, and any unspent funds are required to be returned to the LRE or MDHHS. We are projecting to return approximately \$1,243,806 (MH Medicaid and SUD Medicaid combined) to the LRE and carry forward/lapse approximately \$236,290 in General Funds back to MDHHS.

Following the statements are several charts showing the trending of capitation revenue from the LRE for the past three fiscal years. Additionally, there are several charts comparing the revenue and expense by funding category for each month of this fiscal year. Finally, there are key indicators tables showing summary service data for each month of the fiscal year to date.

The auditing firm Roslund, Prestage and Company (RPC) has completed both the Compliance Exam and our Single Audit. Both were completed within the expected timeframe and subsequently submitted to the Lakeshore Regional Entity by the first week of July. Copies of complete audit reports are included with the July board packet.

I continue to work together with Erinn Trask in the transition of responsibilities. Due to the complex nature of Community Mental Health Service Program (CMHSP) finances and reporting requirements, our collaboration will continue over the next several months, as I progress into the scope of this role. During the month of June, we successfully completed the CCBHC Cost Report, which justifies our Prospective Payment (PPS) rate, for CCBHC demonstration. The report was submitted by the deadline of July 1, 2023, with anticipated initial feedback from the State of Michigan during the month of July. Further actions to support this endeavor will continue to require a thoughtful and collaborative approach.

Sincerely,

Andre Pierre
Chief Financial Officer
Tuesday, July 12, 2023



Full Board ACTION REQUEST	Subject:	Voucher Disbursements		
	Meeting Date:	July 18, 2023		
	Requested By:	Beth Johnston, Finance Committee Chairperson		
<u>RECOMMENDED MOTION:</u>				
<u>The Finance Committee recommends that the OnPoint Board approve the June 2023 disbursements totaling \$3,488,908.49.</u>				
<u>SUMMARY OF REQUEST/INFORMATION:</u>				
<u>Date Issued:</u>	<u>Voucher Number:</u>	<u>Type:</u>	<u>Amount:</u>	
June 1, 2023	N/A	Loan Payment	\$21,334.00	
June 9, 2023	P1700	Payroll	\$446,223.11	
June 15, 2023	V0911	Vendor	\$1,551,493.14	
June 23, 2023	P1701	Payroll	\$423,688.64	
June 30, 2023	V0912	Vendor	\$1,046,169.60	
<u>BUDGET/FINANCIAL IMPACT</u>				
<ul style="list-style-type: none"> • These disbursements are part of the approved fiscal year 2023 operating budget for OnPoint. 				
BY: Nikki McLaughlin, Accounting Manager			DATE: July 18, 2023	

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Period Ended
May 31, 2023

Monthly Finance
Report

ONPOINT

Summary of Variances and Fluctuations

May 31, 2023

I. Assets

- Cash and cash equivalents - Significant increase is due to timing of receipts from the Lakeshore Regional Entity (LRE) (see corresponding decrease in due from other governments below), as well as receipt of the second half of the Michigan Economic Development Corporation (MEDC) grant funds (see corresponding increase in unearned revenue below).
- Due from other governments - Significant decrease is primarily due to timing of receipts from the Lakeshore Regional Entity (LRE), see corresponding increase in cash and cash equivalents above.
- Prepaid items - Increase is primarily related to the timing of the June 2023 health insurance payment, which was made prior to month-end.
- Capital assets - Significant increase is due to ongoing construction work on the agency's new building. The building was placed in service and began being depreciated during the month of May 2023.

II. Liabilities

- Accounts payable - Primary component of significant decrease is related to the outstanding construction payable and retainage payable at September 30, 2022, which was much lower by May 31, 2023 due to the building being placed into service.
- Accrued payroll and benefits - Significant increase is due to number of pay dates accrued at month-end, as of May 31, 2023 there were 8 out of 10 days accrued.
- Due to other governments - Significant increase is due to the accrual of the full fiscal year 2022 settlement balance due to the LRE and State of Michigan, along with the fiscal year 2023 to date settlement balances.
- Unearned revenue - Increase is primarily related to the receipt of the second \$1.25 million in grant funds from the Michigan Economic Development Corporation (MEDC), net of amounts spent year-to-date, see a corresponding increase in cash above. These funds are recorded as unearned revenue until spent at which time the revenue is recognized.
- Notes payable - Significant increase is related to draws on the agency's loan from the United States Department of Agriculture (USDA) to fund the building construction project. See the corresponding increase in capital assets above.

III. Operating revenue

- Performance based incentive payment - This is a once annual payment, earned by the CMHSP by achieving quality measures. The past several years this funding was withheld by the region, and as such the revenue was not budgeted for in the current year.
- Other reimbursements and revenue - Significant variance is due to increase in third-party billings, as an increasing number of individuals are served under the Certified Community Behavioral Health Clinic (CCBHC) model.

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Summary of Variances and Fluctuations

May 31, 2023

IV. Operating expenses

- Salaries and wages and fringes - Significant variance is due to vacant positions for the year to date.
- Supplies and materials - Significant variance is due to the nature of these items. This budget line item includes the annual replacement of technology, which only happens one or two times a year, as well as certain supplies related to the move into the new building which happened in May 2023.
- Contractual services - Variance is due in part to utilizing contracted staffing for vacant positions (see corresponding variances in salaries and fringes above), as well as identified enhancements to the agency's electronic health record.

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Summary Schedule of Revenues and Expenses by Fund Source

October 1, 2022 through May 31, 2023

Mental Health Services	Medicaid	Autism	Healthy MI Plan	Medicaid Combined	General Fund
Revenue	\$ 16,368,823	\$ 2,693,174	\$ 1,941,085	\$ 21,003,082	\$ 1,213,958
Expense	16,814,364	1,387,442	2,222,033	20,423,839	977,668
Revenue over/(under) expenses	<u>\$ (445,541)</u>	<u>\$ 1,305,732</u>	<u>\$ (280,948)</u>	<u>\$ 579,243</u>	<u>\$ 236,290</u>

Substance Use Disorder Services	Medicaid	Healthy MI Plan	Medicaid Combined	SUD Block Grant	Public Act 2
Revenue	\$ 503,762	\$ 1,014,516	\$ 1,518,278	\$ 173,904	\$ -
Expense	338,189	515,526	853,715	173,904	-
Revenue over/(under) expenses	<u>\$ 165,573</u>	<u>\$ 498,990</u>	<u>\$ 664,563</u>	<u>\$ -</u>	<u>\$ -</u>

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

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Statement of Net Position

May 31, 2023

	September 2022	May 2023
Assets		
Current assets:		
Cash and cash equivalents	\$ 3,613,590	\$ 5,155,619
Accounts receivable	79,421	78,824
Due from other governmental units	2,136,967	992,638
Prepaid items	447,203	526,403
Total current assets	6,277,181	6,753,484
Non-current assets:		
Capital assets not being depreciated	4,986,365	-
Capital assets being depreciated, net	23,050	8,803,723
Total non-current assets	5,009,415	8,803,723
Total assets	11,286,596	15,557,207
Liabilities		
Current liabilities:		
Accounts payable	\$ 3,683,185	\$ 2,140,596
Accrued payroll and benefits	291,048	406,364
Due to other governmental units	2,619,923	3,492,405
Unearned revenue	544,964	813,301
Compensated absences - current portion	94,855	94,855
Notes payable - current portion	256,008	256,008
Total current liabilities	7,489,983	7,203,529
Long-term liabilities:		
Compensated absences	537,509	537,509
Notes payable	1,893,586	5,009,397
Total long-term liabilities	2,431,095	5,546,906
Total liabilities	9,921,078	12,750,435
Net position		
Invested in capital assets	2,859,821	3,538,318
Restricted for building construction	852,754	143,324
Unrestricted	(2,347,057)	(874,870)
Total Net Position	\$ 1,365,518	\$ 2,806,772

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Statement of Revenue, Expenses and Change in Net Position

October 1, 2022 through May 31, 2023

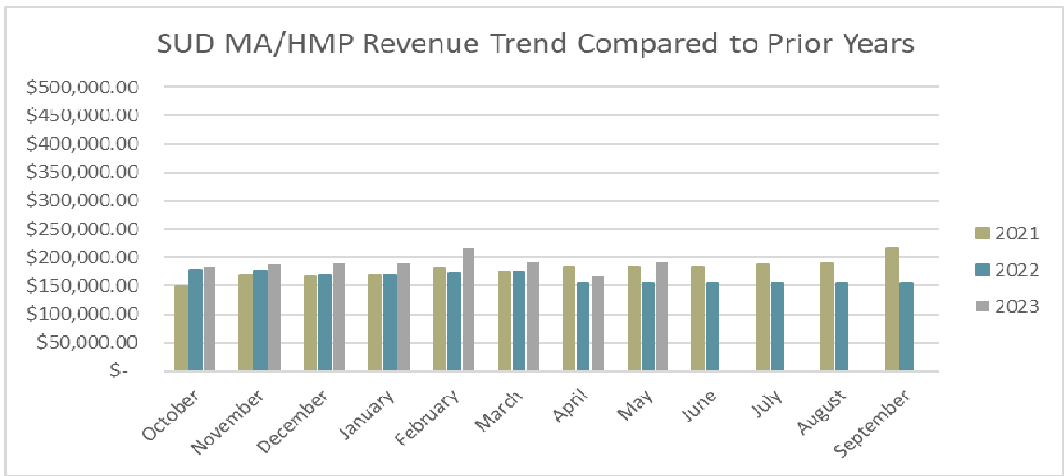
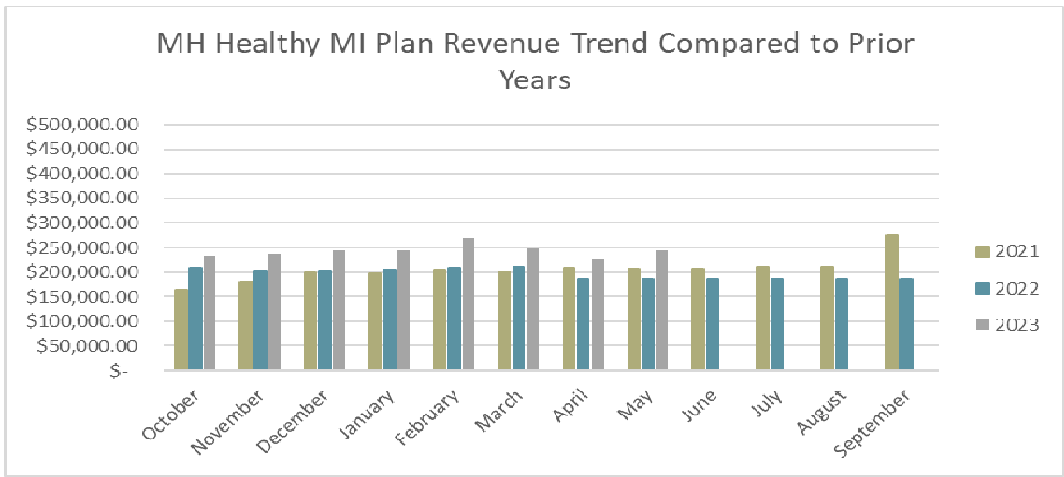
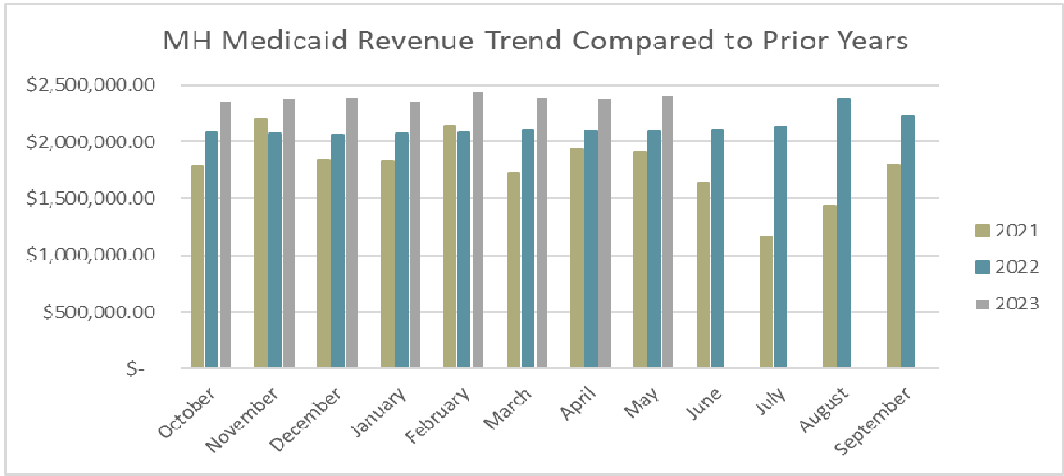
Percent of Year is 66.67%

	Total FY 2023 Budget	YTD Totals 5/31/23	Under/(Over) Budget	Percent of Budget - YTD
Operating revenue				
Medicaid:				
Traditional Capitation	\$ 25,193,969	\$ 16,368,823	\$ 8,825,146	64.97%
Traditional Capitation-Autism	3,937,779	2,693,174	1,244,605	68.39%
Traditional Settlement	(619,666)	(860,191)	240,525	
Healthy Michigan Capitation	2,697,512	1,941,085	756,427	71.96%
Healthy Michigan Settlement	(274,727)	280,948	(555,675)	
Substance use disorder revenue:				
Traditional Capitation	730,726	503,762	226,964	68.94%
Traditional Settlement	(465,390)	(165,573)	(299,817)	
Healthy Michigan Capitation	1,541,824	1,014,516	527,308	65.80%
Healthy Michigan Settlement	(983,316)	(498,990)	(484,326)	
State General Fund:				
Formula Fundings	1,707,737	1,213,958	493,779	71.09%
Settlement	(110,377)	(236,290)	125,913	
Grants and earned contracts	5,109,145	3,440,927	1,668,218	67.35%
Local funding	346,095	230,730	115,365	66.67%
Performance based incentive payment (PBIP)	-	245,757	(245,757)	
Other reimbursements and revenue	268,262	315,191	(46,930)	117.49%
Total operating revenue	\$ 39,079,574	\$ 26,487,827	\$ 12,591,747	67.78%
Operating expenses				
Salaries and wages	\$ 11,496,279	\$ 6,469,132	\$ 5,027,147	56.27%
Fringe benefits	3,818,274	2,314,573	1,503,701	60.62%
Supplies and materials	409,807	190,313	219,494	46.44%
Provider Network services	20,980,022	14,106,766	6,873,256	67.24%
Contractual Services	1,642,209	1,564,704	77,505	95.28%
Professional development	98,941	88,490	10,451	89.44%
Occupancy	186,154	80,367	105,787	43.17%
Miscellaneous expenses	356,194	211,972	144,222	59.51%
Depreciation	14,423	20,257	(5,834)	140.45%
Total operating expenses	\$ 39,002,303	\$ 25,046,574	\$ 13,955,729	64.22%
Change in net position	77,271	1,441,253	\$ (1,363,982)	
Beginning net position	106,285	1,365,519		
Ending net position	\$ 183,556	\$ 2,806,772		

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

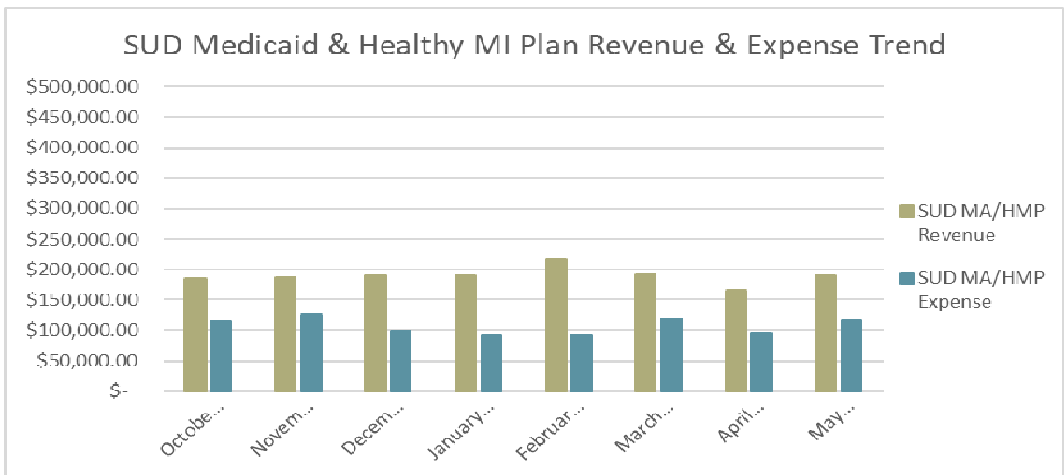
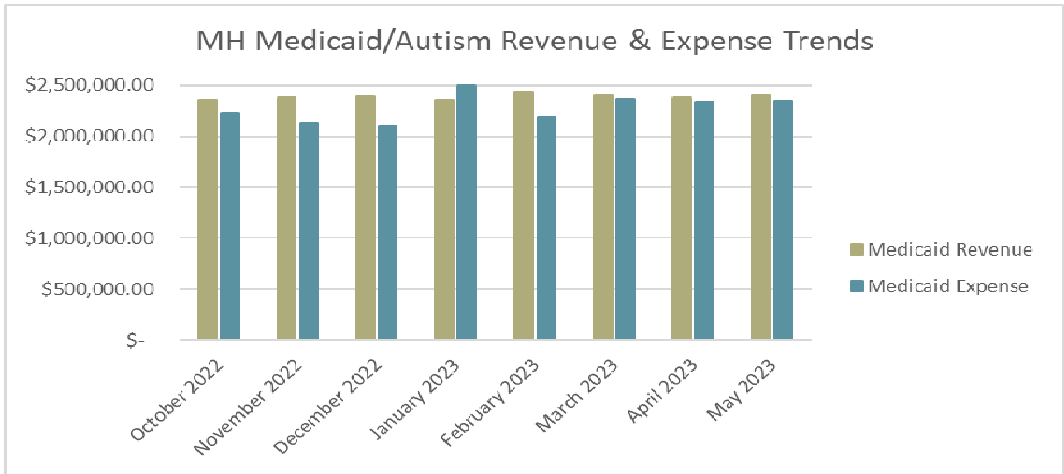
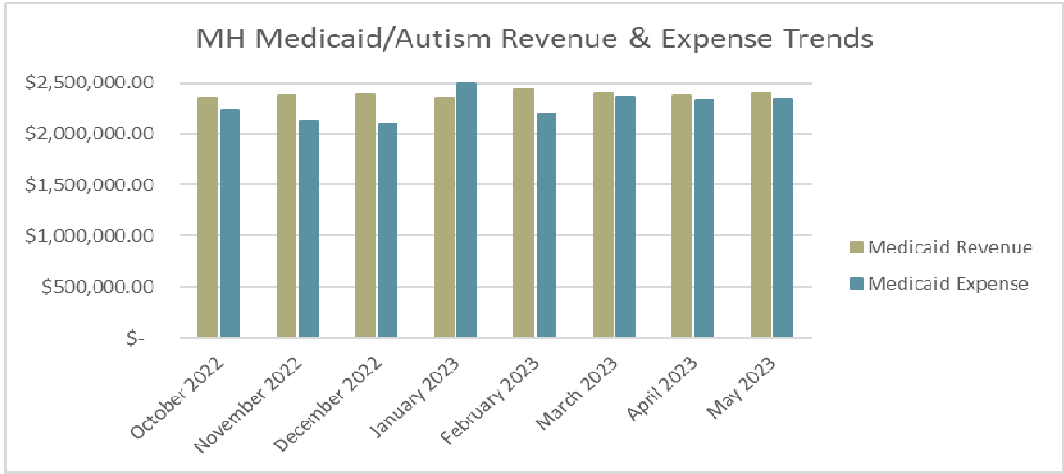
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Key Indicators May 31, 2023



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Key Indicators
May 31, 2023



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Key Indicators

May 31, 2023

The following tables summarize the agency's directly provided services by month, based on submitted encounters. Due to the amount of time it takes for documentation to be completed, first and third party billing processed, and then the encounter submitted, data for the most recent month(s) are likely not complete yet.

Internal Program Name	October 2022			
	Total Cost of Services	Number of Clients Served	Total Minutes of Service	Average Cost per Client
Career Concepts	\$ 5,277	10	330	\$ 528
Case Management	\$ 221,145	415	18,703	\$ 533
Outpatient Therapy	\$ 228,866	231	18,044	\$ 991
Occupational Therapy	\$ 7,610	11	787	\$ 692
ACT Program	\$ 36,107	32	3,502	\$ 1,128
Home Based Services	\$ 79,792	54	8,884	\$ 1,478
Med Clinic Services	\$ 113,667	201	8,698	\$ 566
CCBHC Program	\$ 96,108	135	12,447	\$ 712
SUD Services	\$ 49,216	24	5,013	\$ 2,051
Grand Total	\$ 837,788	864	76,408	\$ 970

Internal Program Name	November 2022			
	Total Cost of Services	Number of Clients Served	Total Minutes of Service	Average Cost per Client
Career Concepts	\$ 17,574	12	1,099	\$ 1,465
Case Management	\$ 222,662	452	19,589	\$ 493
Outpatient Therapy	\$ 223,284	241	19,387	\$ 926
Occupational Therapy	\$ 7,475	10	685	\$ 748
ACT Program	\$ 42,852	32	4,367	\$ 1,339
Home Based Services	\$ 84,417	52	9,339	\$ 1,623
Med Clinic Services	\$ 101,253	180	7,867	\$ 563
CCBHC Program	\$ 89,582	136	11,644	\$ 659
SUD Services	\$ 69,169	28	6,376	\$ 2,470
Grand Total	\$ 858,268	884	80,353	\$ 971

Internal Program Name	December 2022			
	Total Cost of Services	Number of Clients Served	Total Minutes of Service	Average Cost per Client
Career Concepts	\$ 6,764	10	423	\$ 676
Case Management	\$ 224,220	406	19,518	\$ 552
Outpatient Therapy	\$ 174,850	224	16,506	\$ 781
Occupational Therapy	\$ 15,330	19	1,240	\$ 807
ACT Program	\$ 44,576	30	4,442	\$ 1,486
Home Based Services	\$ 56,500	47	6,173	\$ 1,202
Med Clinic Services	\$ 69,245	130	5,133	\$ 533
CCBHC Program	\$ 70,657	130	9,159	\$ 544
Grand Total	\$ 711,206	839	67,234	\$ 848

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

ONPOINT

Key Indicators

May 31, 2023

Internal Program Name	January 2023			
	Total Cost of Services	Number of Clients Served	Total Minutes of Service	Average Cost per Client
Career Concepts	\$ 9,835	5	615	\$ 1,967
Case Management	\$ 311,335	525	27,485	\$ 593
Outpatient Therapy	\$ 284,745	268	20,138	\$ 1,062
Occupational Therapy	\$ 30,146	26	2,444	\$ 1,159
ACT Program	\$ 58,254	33	5,757	\$ 1,765
Home Based Services	\$ 81,680	48	8,979	\$ 1,702
Med Clinic Services	\$ 116,233	218	8,639	\$ 533
CCBHC Program	\$ 75,020	137	9,579	\$ 548
SUD Services	\$ 48,258	41	4,629	\$ 1,177
Grand Total	\$ 1,015,506	991	88,265	\$ 1,025

Internal Program Name	February 2023			
	Total Cost of Services	Number of Clients Served	Total Minutes of Service	Average Cost per Client
Career Concepts	\$ 6,684	6	418	\$ 1,114
Case Management	\$ 259,798	463	22,582	\$ 561
Outpatient Therapy	\$ 285,241	239	16,278	\$ 1,193
Occupational Therapy	\$ 27,584	24	2,312	\$ 1,149
ACT Program	\$ 44,305	33	4,372	\$ 1,343
Home Based Services	\$ 80,085	48	8,794	\$ 1,668
Med Clinic Services	\$ 97,542	183	7,535	\$ 533
CCBHC Program	\$ 60,514	121	7,680	\$ 500
SUD Services	\$ 43,563	53	4,360	\$ 822
Grand Total	\$ 905,316	920	74,331	\$ 984

Internal Program Name	March 2023			
	Total Cost of Services	Number of Clients Served	Total Minutes of Service	Average Cost per Client
Career Concepts	\$ 20,389	10	1,275	\$ 2,039
Case Management	\$ 318,894	518	27,856	\$ 616
Outpatient Therapy	\$ 243,780	273	20,947	\$ 893
Occupational Therapy	\$ 31,904	27	2,666	\$ 1,182
ACT Program	\$ 62,357	34	6,549	\$ 1,834
Home Based Services	\$ 92,003	54	10,303	\$ 1,704
Med Clinic Services	\$ 84,737	174	6,716	\$ 487
CCBHC Program	\$ 65,333	127	8,324	\$ 514
SUD Services	\$ 57,014	47	5,055	\$ 1,213
Grand Total	\$ 976,411	1,000	89,691	\$ 976

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

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Key Indicators

May 31, 2023

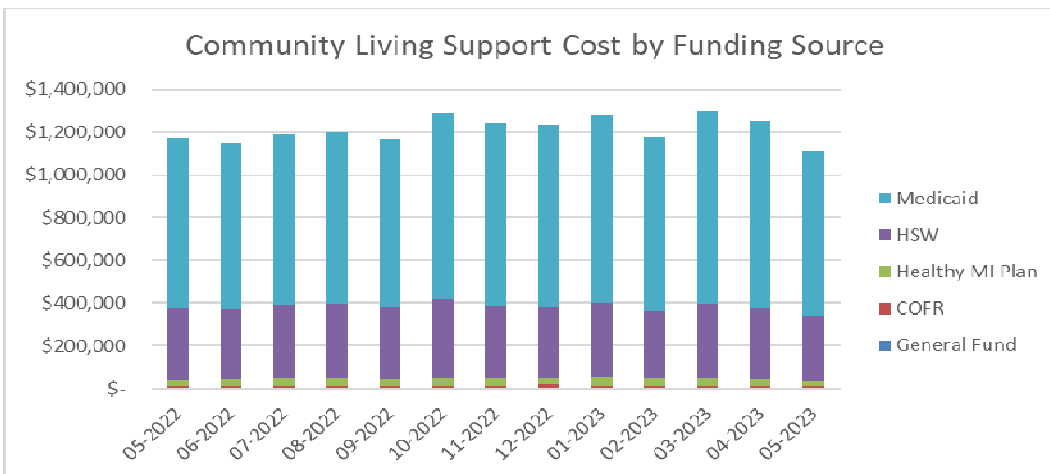
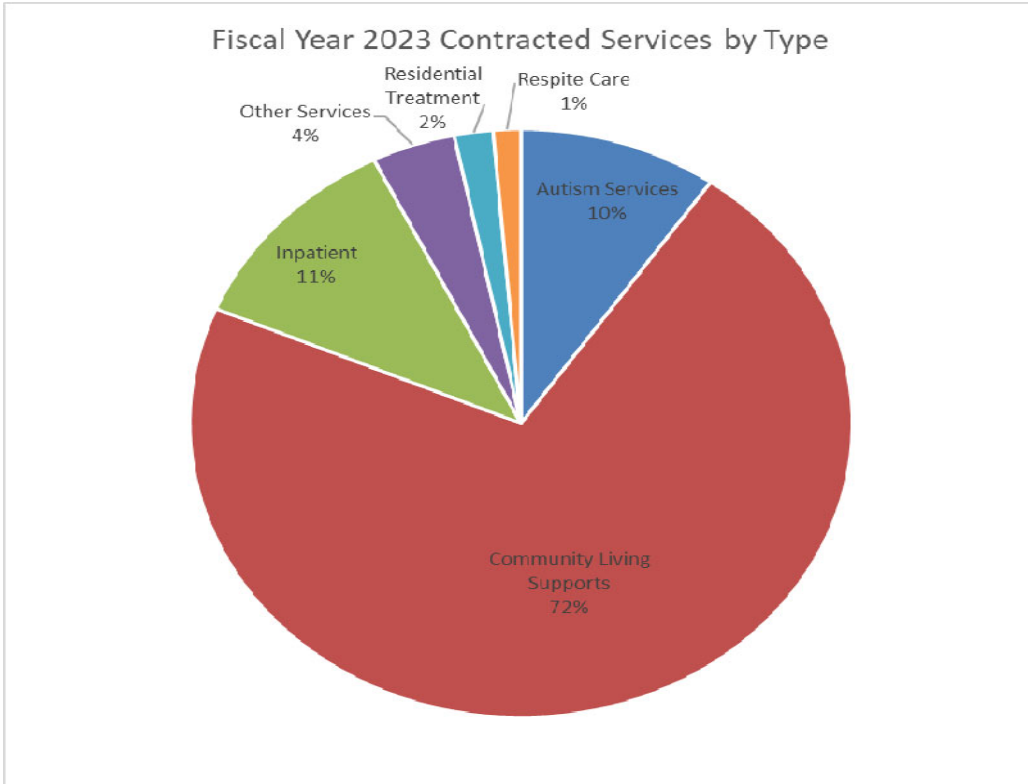
Internal Program Name	April 2023			
	Total Cost of Services	Number of Clients Served	Total Minutes of Service	Average Cost per Client
Career Concepts	\$ 10,794	8	675	\$ 1,349
Case Management	\$ 277,891	495	25,386	\$ 561
Outpatient Therapy	\$ 228,854	226	14,785	\$ 1,013
Occupational Therapy	\$ 35,244	32	2,916	\$ 1,101
ACT Program	\$ 56,090	33	5,794	\$ 1,700
Home Based Services	\$ 88,316	55	9,855	\$ 1,606
Med Clinic Services	\$ 57,311	124	4,041	\$ 462
CCBHC Program	\$ 39,918	98	5,016	\$ 407
SUD Services	\$ 51,839	45	4,799	\$ 1,152
Grand Total	\$ 846,257	902	73,267	\$ 938

Internal Program Name	May 2023			
	Total Cost of Services	Number of Clients Served	Total Minutes of Service	Average Cost per Client
Career Concepts	\$ 7,196	2	450	\$ 3,598
Case Management	\$ 324,056	506	29,478	\$ 640
Outpatient Therapy	\$ 285,048	241	15,704	\$ 1,183
Occupational Therapy	\$ 41,704	32	3,482	\$ 1,303
ACT Program	\$ 76,303	35	7,932	\$ 2,180
Home Based Services	\$ 96,715	56	10,739	\$ 1,727
Med Clinic Services	\$ 49,919	108	3,286	\$ 462
CCBHC Program	\$ 38,926	82	4,137	\$ 475
SUD Services	\$ 51,159	47	4,231	\$ 1,088
Grand Total	\$ 971,026	901	79,439	\$ 1,078

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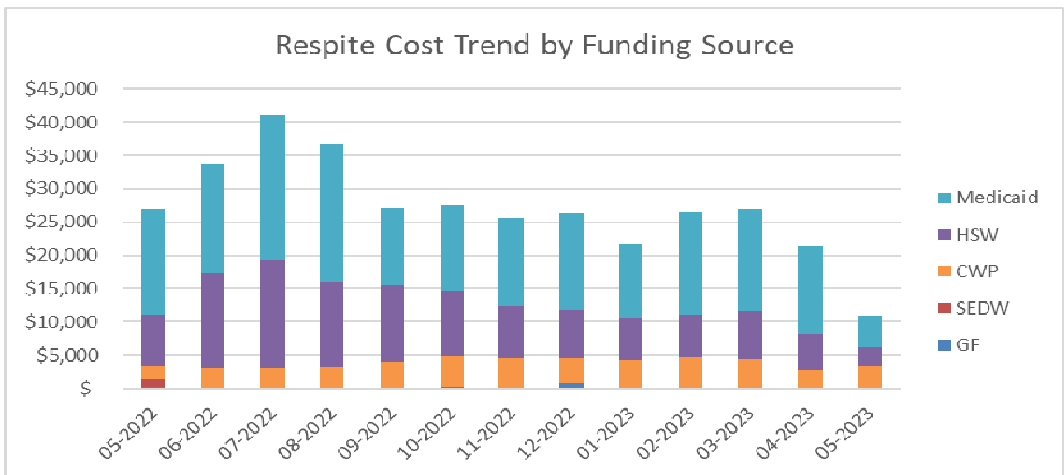
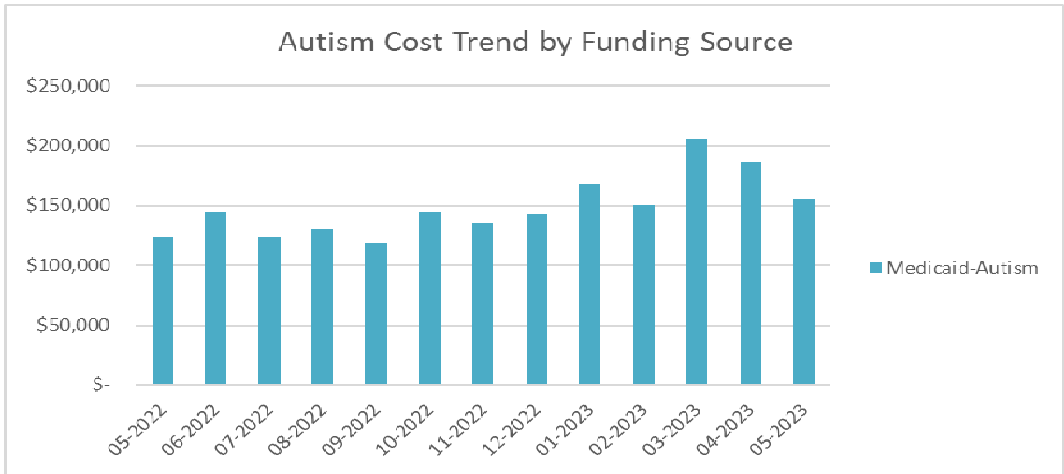
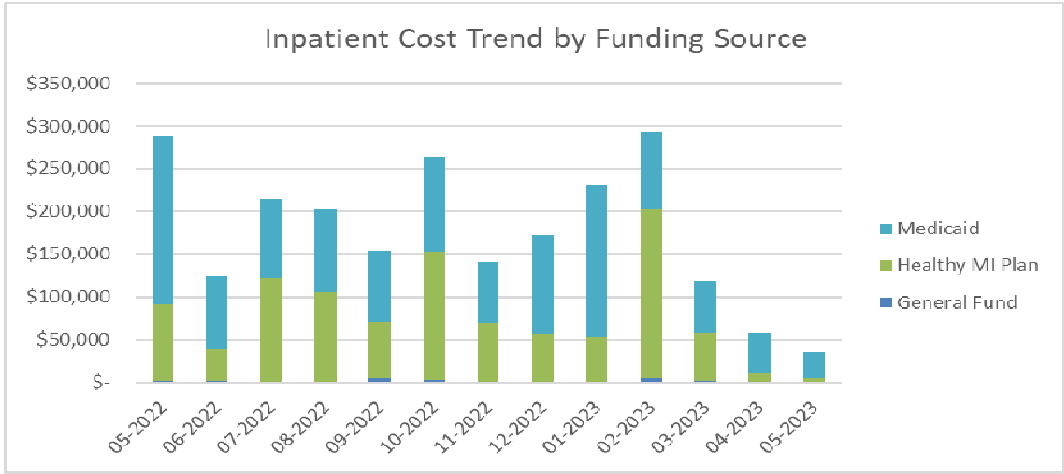
Key Indicators May 31, 2023

The following charts summarize the agency's provider network services. Providers have 60 days from the date of service to submit a claim, and then the agency has an additional 30 days to pay the claim and report the encounter. As such, the data for the most recent month(s) will be incomplete.



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Key Indicators May 31, 2023



Report on Compliance

Allegan County Community Mental Health Services

September 30, 2022



Allegan County Community Mental Health Services
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September 30, 2022

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INDEPENDENT ACCOUNTANT'S REPORT ON COMPLIANCE

To the Members of the Board
Allegan County Community Mental Health Services
Allegan, Michigan

Report On Compliance

We have examined Allegan County Community Mental Health Services' (the CMHSP) compliance with the compliance requirements described in the *Compliance Examination Guidelines* issued by Michigan Department of Health and Human Services that are applicable to the Medicaid Contract and General Fund (GF) Contract for the year ended September 30, 2022.

Management's Responsibility

Management is responsible for compliance with the requirements of laws, regulations, contracts, and grants applicable to the Medicaid Contract and GF Contract.

Independent Accountants' Responsibility

Our responsibility is to express an opinion on the CMHSP's compliance with the Medicaid Contract and GF Contract based on our examination of the compliance requirements referred to above.

Our examination of compliance was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants. Those standards require that we plan and perform the examination to obtain reasonable assurance about whether the CMHSP complied, in all material respects, with the compliance requirements referred to above.

An examination involves performing procedures to obtain evidence about the CMHSP's compliance with the specified compliance requirements referred to above. The nature, timing, and extent of the procedures selected depend on our judgement, including an assessment of the risk of material noncompliance, whether due to fraud or error. The nature, timing and extent of the procedures selected depend on our judgment, including an assessment of the risk of material misstatement of the compliance requirements described in the *Compliance Examination Guidelines* issued by the Michigan Department of Health and Human Services.

We are required to be independent and to meet our other ethical responsibilities in accordance with relevant ethical requirements relating to the engagement.

We believe that the evidence we obtained is sufficient and appropriate to provide a reasonable basis for our opinion. However, our examination does not provide a legal determination of the CMHSP's compliance.

Opinion on Each Program

In our opinion, the CMHSP complied, in all material respects, with the specified compliance requirements referred to above that are applicable to the Medicaid Contract and GF Contract for the year ended September 30, 2022.

Purpose of this Report

This report is intended solely for the information and use of the board and management of the CMHSP and the Michigan Department of Health and Human Services, and is not intended to be, and should not be, used by anyone other than these specified parties.

Sincerely,

A handwritten signature in cursive script that reads "Roslund, Prestage & Company, P.C.".

Roslund, Prestage & Company, P.C.
Certified Public Accountants

June 22, 2023

Allegan County Community Mental Health Services
Schedule of Findings
September 30, 2022

Control deficiencies that are individually or cumulatively material weaknesses in internal control over the Medicaid Contract and General Fund Contract:

None

Material noncompliance with the provisions of laws, regulations, or contracts related to the Medicaid Contract and General Fund Contract:

None

Known fraud affecting the Medicaid Contract and General Fund Contract:

None

MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF) FINANCIAL STATUS REPORT - ALL NON MEDICAID							
CMHSP:	Allegan County Community Mental Health Services			FISCAL YEAR:	FY 21 / 22		
	SUBMISSION TYPE:			YE Final	YEAR TO DATE REPORTING	EXAMINATION ADJUSTMENTS	
	SUBMISSION DATE:			2/28/2023	Column A	Column B	
						EXAMINED TOTALS	
A	MEDICAID SERVICES - Summary From FSR - Medicaid (incl Direct Care Wage)						
AC	CCBHC SERVICES - Summary From FSR - Certified Community Behavioral Health Clinic						
AE	OPIOID HEALTH HOME SERVICES - Summary From FSR - Opioid Health Home Services						
AG	HEALTH HOME SERVICES - Summary From FSR - Health Home Services						
AI	HEALTHY MICHIGAN SERVICES - Summary From FSR - Healthy Michigan (incl Direct Care Wage)						
AK	MI HEALTH LINK SERVICES - Summary From FSR - MI Health Link						
RES	RESTRICTED FUND BALANCE ACTIVITY						
B	GENERAL FUND						
B 100	REVENUE						
B 101	CMH Operations			1,509,348		1,509,348	
B 120	Subtotal - Current Period General Fund Revenue			1,509,348	-	1,509,348	
B 121	1st & 3rd Party Collections (Not in Section 226a Funds) 100% Services			-		-	
B 122	1st & 3rd Party Collections (Not in Section 226a Funds) 90% Services			-		-	
B 123	Prior Year GF Carry Forward			44,298		44,298	
B 140	Subtotal - Other General Fund Revenue			44,298	-	44,298	
B 190	TOTAL REVENUE			1,553,646	-	1,553,646	
B 200	EXPENDITURE						
B 201	100% MDHHS Matchable Services / Costs			6,650		6,650	
B 202	100% MDHHS Matchable Services Based on CMHSP Local Match Cap			-		-	
B 203	90% MDHHS Matchable Services / Costs - REPORTED			1,096,996			
B 204	90% MDHHS Matchable Services / Costs - EXAMINATION ADJUSTMENTS						
B 205	90% MDHHS Matchable Services / Costs - EXAMINED TOTAL			1,096,996	987,296	987,296	
B 290	TOTAL EXPENDITURE			993,946	-	993,946	
B 295	NET GENERAL FUND SURPLUS (DEFICIT)			559,700	-	559,700	
B 300	Redirected Funds (To) From						
B 304	(TO) Targeted Case Management - D301			-	-	-	
B 309	(TO) Allowable GF Cost of Injectable Medications - G301			-	-	-	
B 310	(TO) PIHP to Affiliate Medicaid Services Contracts - I304			-	-	-	
B 310.1	(TO) PIHP to Affiliate CCBHC Medicaid Contracts - IA304			-	-	-	
B 310.2	(TO) PIHP to Affiliate Opioid Health Home Services Contracts - IB304			-	-	-	
B 310.3	(TO) PIHP to Affiliate Health Home Services Contracts - IC304			-	-	-	
B 310.4	(TO) PIHP to Affiliate MI Health Link Services Contracts - ID304			-	-	-	
B 310.5	(TO) PIHP to Affiliate CCBHC Non-Medicaid Contracts - L304			-	-	-	
B 312	(TO) CMHSP to CMHSP Earned Contracts - J305 (explain - section Q)			(35,383)	-	(35,383)	
B 313	FROM CMHSP to CMHSP Earned Contracts - J302						
B 314	FROM Non-MDHHS Earned Contracts - K302						
B 330	Subtotal Redirected Funds rows 301 - 314			(35,383)	-	(35,383)	
B 331	FROM Local Funds - M302						
B 332	FROM Risk Corridor - N303						
B 390	Total Redirected Funds			(35,383)	-	(35,383)	
B 400	BALANCE GENERAL FUND (cannot be < 0)			524,317	-	524,317	
	OTHER GF CONTRACTUAL OBLIGATIONS						
C	CCBHC NON-MEDICAID - (PIHP Use Only)						
	FEE FOR SERVICE MEDICAID						
D	TARGETED CASE MANAGEMENT - (GHS Only)						
D 190	Revenue					-	
D 290	Expenditure					-	
D 295	NET TARGETED CASE MANAGEMENT (cannot be > 0)			-	-	-	
D 300	Redirected Funds (To) From						
D 301	FROM General Fund - B304					-	
D 302	FROM Local Funds - M304					-	
D 303	(TO) CMHSP to CMHSP Earned Contracts - J304.4			-	-	-	
D 304	FROM CMHSP to CMHSP Earned Contracts - J303.4					-	
D 390	Total Redirected Funds			-	-	-	
D 400	BALANCE TARGETED CASE MANAGEMENT (GHS Only) (must = 0)			-	-	-	
E	INTENTIONALLY LEFT BLANK						
F	INTENTIONALLY LEFT BLANK						
G	INJECTABLE MEDICATIONS						
G 190	Revenue					-	
G 290	Expenditure					-	
G 295	NET INJECTABLE MEDICATIONS (cannot be > 0)			-	-	-	
G 300	Redirected Funds (To) From						
G 301	FROM General Fund - B309					-	
G 302	FROM Local Funds - M309					-	
G 390	Total Redirected Funds			-	-	-	
G 400	BALANCE INJECTABLE MEDICATIONS (must = 0)			-	-	-	

**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
FINANCIAL STATUS REPORT - ALL NON MEDICAID**

CMHSP:	Allegan County Community Mental Health Services	FISCAL YEAR:	FY 21 / 22		
		SUBMISSION TYPE:	YE Final	YEAR TO DATE REPORTING	EXAMINATION ADJUSTMENTS
		SUBMISSION DATE:	2/28/2023		EXAMINED TOTALS
			Column A	Column B	

OTHER FUNDING

H	MDHHS EARNED CONTRACTS				
H 100	REVENUE				
H 101	Comprehensive Services for Behavioral Health		112,296		
H 102	Housing and Homeless Services		2,197		
H 103	Juvenile Justice Programs		-		
H 104	Suicide Lifeline Programs		-		
H 105	Projects for Assistance in Transition from Homelessness		-		
H 106	Regional Perinatal Collaborative		-		
H 107	Substance Abuse & Mental Health COVID-19 Grant Program		62,729		
H 108	Substance Use and Gambling Services		-		
H 150	Other MDHHS Earned Contracts (describe):		-		
H 151	Other MDHHS Earned Contracts (describe):		-		
H 190	TOTAL REVENUE		177,222		
H 200	EXPENDITURE				
H 201	Comprehensive Services for Behavioral Health		112,296		
H 202	Housing and Homeless Services		2,197		
H 203	Juvenile Justice Programs		-		
H 204	Suicide Lifeline Programs		-		
H 205	Projects for Assistance in Transition from Homelessness		-		
H 206	Regional Perinatal Collaborative		-		
H 207	Substance Abuse & Mental Health COVID-19 Grant Program		62,729		
H 208	Substance Use and Gambling Services		-		
H 250	Other MDHHS Earned Contracts (describe):		-		
H 251	Other MDHHS Earned Contracts (describe):		-		
H 290	TOTAL EXPENDITURE		177,222		
H 400	BALANCE MDHHS EARNED CONTRACTS (must = 0)		-		

I	PIHP to AFFILIATE MEDICAID SERVICES CONTRACTS - CMHSP USE ONLY				
I 100	REVENUE				
I 101	Revenue - from PIHP Medicaid (incl Direct Care Wage)		26,263,982		26,263,982
I 104	Revenue - from PIHP Healthy Michigan Plan (incl Direct Care Wage)		3,227,835		3,227,835
I 122	1st & 3rd Party Collections - Medicare/Medicaid Consumers - Affiliate		-		-
I 123	1st & 3rd Party Collections - Healthy Michigan Plan Consumers - Affiliate		-		-
I 190	TOTAL REVENUE		29,491,817		29,491,817
I 201	Expenditure - Medicaid (incl Direct Care Wage)		26,263,982		
I 202	Expenditure - Healthy Michigan Plan (incl Direct Care Wage)		3,227,835		
I 203	Expenditure - MI Health Link (Medicaid) Services (incl Direct Care Wage)		-		
I 290	TOTAL EXPENDITURE		29,491,817		
I 295	NET PIHP to AFFILIATE MEDICAID SERVICES CONTRACTS SURPLUS (DEFICIT)		-		
I 300	Redirected Funds (To) From				
I 301	(TO) CMHSP to CMHSP Earned Contracts - J306		-		-
I 302	FROM CMHSP to CMHSP Earned Contracts - J303				-
I 303	FROM Non-MDHHS Earned Contracts - K303				-
I 304	FROM General Fund - B310				-
I 306	FROM Local Funds - M309.1				-
I 390	Total Redirected Funds		-		-
I 400	BALANCE PIHP to AFFILIATE MEDICAID SERVICES CONTRACTS (must = 0)		-		-

IA	PIHP to AFFILIATE CCBHC SERVICES CONTRACTS - CMHSP USE ONLY				
IA 100	REVENUE				
IA 101	Revenue - Medicaid Base				-
IA 102	Revenue - Medicaid Supplemental				-
IA 103	Revenue - MI Health Link CCBHC Consumers				-
IA 104	1st & 3rd Party Collections - Medicaid				-
IA 121	Revenue - Healthy Michigan Base				-
IA 122	Revenue - Healthy Michigan Supplemental				-
IA 124	1st & 3rd Party Collections - Healthy Michigan				-
IA 190	TOTAL REVENUE		-		-
IA 200	EXPENDITURE				
IA 201	Expenditure - Medicaid (Including MI Health Link)				-
IA 202	Expenditure - Healthy Michigan				-
IA 290	TOTAL EXPENDITURE		-		-
IA 295	NET PIHP to AFFILIATE CONTRACTS SURPLUS (DEFICIT)		-		-
IA 300	Redirected Funds (To) From				
IA 301	(TO) CMHSP to CMHSP Earned Contracts - J306.2		-		-
IA 302	FROM CMHSP to CMHSP Earned Contracts - J303.2				-
IA 303	FROM Non-MDHHS Earned Contracts - K303.2				-
IA 304	FROM General Fund - B310.1				-
IA 305	(TO) Local Funds - M316		-		-
IA 306	FROM Local Funds - M309.2				-
IA 390	Total Redirected Funds		-		-
IA 400	BALANCE PIHP to AFFILIATE CCBHC SERVICES CONTRACTS (must = 0)		-		-

IB	PIHP to AFFILIATE OPIOID HEALTH HOME SERVICES CONTRACTS - CMHSP USE ONLY				
IB 190	Revenue - Medicaid Opioid Health Home Services - from PIHP				-
IB 290	Expenditure - Medicaid Opioid Health Home Services				-
IB 295	NET PIHP to AFFILIATE OPIOID HEALTH HOME SERVICES CONTRACTS SURPLUS (DEFICIT)		-		-
IB 300	Redirected Funds (To) From				
IB 304	FROM General Fund - B310.2				-
IB 306	FROM Local Funds - M309.3				-
IB 390	Total Redirected Funds		-		-
IB 400	BALANCE PIHP to AFFILIATE OPIOID HEALTH HOME SERVICES CONTRACTS (cannot be < 0)		-		-

MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)							
FINANCIAL STATUS REPORT - ALL NON MEDICAID							
CMHSP:	Allegan County Community Mental Health Services			FISCAL YEAR:	FY 21 / 22		
		SUBMISSION TYPE:	YE Final	YEAR TO DATE REPORTING	EXAMINATION ADJUSTMENTS	EXAMINED TOTALS	
		SUBMISSION DATE:	2/28/2023				
			Column A	Column B			
IC		PIHP to AFFILIATE HEALTH HOME SERVICES CONTRACTS - CMHSP USE ONLY					
IC 190		Revenue - Medicaid Health Home Services - from PIHP					-
IC 290		Expenditure - Medicaid Health Home Services					-
IC 295		NET PIHP to AFFILIATE HEALTH HOME SERVICES CONTRACTS SURPLUS (DEFICIT)					-
IC 300		Redirected Funds (To) From					
IC 304		FROM General Fund - B310.3					-
IC 306		FROM Local Funds - M309.4					-
IC 390		Total Redirected Funds					-
IC 400		BALANCE PIHP to AFFILIATE HEALTH HOME SERVICES CONTRACTS (cannot be < 0)					-

ID		PIHP to AFFILIATE MI HEALTH LINK SERVICES CONTRACTS - CMHSP USE ONLY					
ID 100		REVENUE					
ID 101		Revenue - MI Health Link - from PIHP					-
ID 122		1st & 3rd Party Collections - MI Health Link Consumers - Affiliate					-
ID 190		TOTAL REVENUE					-
ID 200		EXPENDITURE					
ID 201		Expenditure					-
ID 290		TOTAL EXPENDITURE					-
ID 295		NET PIHP to AFFILIATE MI HEALTH LINK SERVICES CONTRACTS SURPLUS (DEFICIT)					-
ID 300		Redirected Funds (To) From					
ID 301		(TO) CMHSP to CMHSP Earned Contracts - J306.3					-
ID 302		FROM CMHSP to CMHSP Earned Contracts - J303.3					-
ID 303		FROM Non-MDHHS Earned Contracts - K303.3					-
ID 304		FROM General Fund - B310.4					-
ID 306		FROM Local Funds - M309.5					-
ID 390		Total Redirected Funds					-
ID 400		BALANCE PIHP to AFFILIATE MI HEALTH LINK SERVICES CONTRACTS (must = 0)					-

J		CMHSP to CMHSP EARNED CONTRACTS					
J 190		Revenue				204,989	204,989
J 290		Expenditure				240,372	240,372
J 295		NET CMHSP to CMHSP EARNED CONTRACTS SURPLUS (DEFICIT)				(35,383)	(35,383)
J 300		Redirected Funds (To) From					
J 302		(TO) General Fund - B313				-	-
J 303		(TO) PIHP to Affiliate Medicaid Services Contracts - I302				-	-
J 303.2		(TO) PIHP to Affiliate CCBHC Medicaid Contracts - IA302				-	-
J 303.3		(TO) PIHP to Affiliate MI Health Link Services Contracts - ID302				-	-
J 303.4		(TO) Targeted Case Management - D304				-	-
J 303.5		(TO) PIHP to Affiliate CCBHC Non-Medicaid Contracts - L302				-	-
J 304.4		FROM Targeted Case Management - D303				-	-
J 305		FROM General Fund - B312				35,383	35,383
J 306		FROM PIHP to Affiliate Medicaid Services Contracts - I301				-	-
J 306.2		FROM PIHP to Affiliate CCBHC Medicaid Contracts - IA301				-	-
J 306.3		FROM PIHP to MI Health Link Services Contracts - ID301				-	-
J 306.4		FROM PIHP to Affiliate CCBHC Non-Medicaid Contracts - L301				-	-
J 307		FROM Local Funds - M310				-	-
J 390		Total Redirected Funds				35,383	35,383
J 400		BALANCE CMHSP to CMHSP EARNED CONTRACTS (must = 0)				-	-

K		NON-MDHHS EARNED CONTRACTS					
K 190		Revenue				5,804,757	5,804,757
K 290		Expenditure				5,799,187	5,799,187
K 295		NET NON-MDHHS EARNED CONTRACTS SURPLUS (DEFICIT)				5,570	5,570
K 300		Redirected Funds (To) From					
K 302		(TO) General Fund - B314				-	-
K 303		(TO) PIHP to Affiliate Medicaid Services Contracts - I303				-	-
K 303.2		(TO) PIHP to Affiliate CCBHC Medicaid Contracts - IA303				-	-
K 303.3		(TO) PIHP to Affiliate MI Health Link Services Contracts - ID303				-	-
K 303.4		(TO) PIHP to Affiliate CCBHC Non-Medicaid Contracts - L303				-	-
K 304		(TO) Local Funds - M315				(5,570)	(5,570)
K 305		FROM Local Funds - M311				-	-
K 390		Total Redirected Funds				(5,570)	(5,570)
K 400		BALANCE NON-MDHHS EARNED CONTRACTS (must = 0)				-	-

L		PIHP to Affiliate CCBHC Non-Medicaid Contracts - CMHSP USE ONLY					
L 100		REVENUE					
L 101		Revenue					-
L 102		1st & 3rd Party Collections (Not in Section 226a Funds)					-
L 190		TOTAL REVENUE					-
L 200		EXPENDITURE					
L 201		Expenditure					-
L 290		TOTAL EXPENDITURE					-
L 295		NET SURPLUS (DEFICIT)					-
L 300		Redirected Funds (To) From					
L 301		(TO) CMHSP to CMHSP Earned Contracts - J306.4					-
L 302		FROM CMHSP to CMHSP Earned Contracts - J303.5					-
L 303		FROM Non-MDHHS Earned Contracts - K303.4					-
L 304		FROM General Fund - B310.5					-
L 305		(TO) Local Funds - M316.1					-
L 306		FROM Local Funds - M309.6					-
L 390		Total Redirected Funds					-
L 400		BALANCE PIHP to Affiliate CCBHC Non-Medicaid Contracts (must = 0)					-

MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)						
FINANCIAL STATUS REPORT - ALL NON MEDICAID						
CMHSP:	Allegan County Community Mental Health Services			FISCAL YEAR:	FY 21 / 22	
			SUBMISSION TYPE:	YE Final	YEAR TO DATE REPORTING	EXAMINATION ADJUSTMENTS
			SUBMISSION DATE:	2/28/2023	Column A	Column B
						EXAMINED TOTALS
M		LOCAL FUNDS				
M	100	REVENUE				
M	101	County Appropriation for Mental Health		346,095		346,095
M	102	County Appropriation for Substance Abuse - Non Public Act 2 Funds		-		-
M	103	Section 226 (a) Funds		117,337		117,337
M	105	Medicaid Fee for Service Adjuster Payments		-		-
M	106	Local Grants		1,169,089		1,169,089
M	107	Interest		476		476
M	109	SED Partner		-		-
M	110	All Other Local Funding		5,905		5,905
M	111	Performance Bonus Incentive Pool (PBIP) Restricted Local Funding		-		-
M	190	TOTAL REVENUE		1,638,902		1,638,902
M	200	EXPENDITURE				
M	201	GF 10% Local Match		109,700		109,700
M	202					
		Local match cap amount		-		-
		Examination Adjustment Local match cap amount				
		Examined Total Local match cap amount		\$ -		\$ -
M	203	GF Local Match Capped per MHC 330.1308		-		-
M	204	Local Cost for State Provided Services		62,144		62,144
M	205	Local Contribution to State Medicaid Match (CMHSP Contribution Only)		149,564		149,564
M	207	Local Match to Grants and MDHHS Earned Contracts				
M	209	Local Only Expenditures				
M	290	TOTAL EXPENDITURE		321,408		321,408
M	295	NET LOCAL FUNDS SURPLUS (DEFICIT)		1,317,494		1,317,494
M	300	Redirected Funds (To) From				
M	302	(TO) General Fund - B331		-		-
M	304	(TO) Targeted Case Management - D302		-		-
M	309	(TO) Injectable Medications - G302		-		-
M	309.1	(TO) PIHP to Affiliate Medicaid Services Contracts - I306		-		-
M	309.2	(TO) PIHP to Affiliate CCBHC Medicaid Service Contracts - IA306		-		-
M	309.3	(TO) PIHP to Affiliate Opioid Health Home Services Contracts - IB306		-		-
M	309.4	(TO) PIHP to Affiliate Health Home Services Contracts - IC306		-		-
M	309.5	(TO) PIHP to Affiliate MI Health Link Services Contracts - ID306		-		-
M	309.6	(TO) PIHP to Affiliate CCBHC Non-Medicaid Contracts - L306		-		-
M	310	(TO) CMHSP to CMHSP Earned Contracts - J307		-		-
M	311	(TO) Non-MDHHS Earned Contracts - K305		-		-
M	313	(TO) Activity Not Otherwise Reported - O302		-		-
M	315	FROM Non-MDHHS Earned Contracts - K304		5,570		5,570
M	316	FROM PIHP to Affiliate CCBHC Medicaid Services Contracts - IA305				
M	316.1	FROM PIHP to Affiliate CCBHC Non-Medicaid Contracts - L305				
M	390	Total Redirected Funds		5,570		5,570
M	400	BALANCE LOCAL FUNDS		1,323,064		1,323,064
N		RISK CORRIDOR				
N	100	REVENUE				
N	101	Stop/Loss Insurance				
N	190	TOTAL REVENUE		-		-
N	300	Redirected Funds (To) From				
N	303	(TO) General Fund - B332		-		-
N	390	Total Redirected Funds		-		-
N	400	BALANCE RISK CORRIDOR (must = 0)		-		-
O		ACTIVITY NOT OTHERWISE REPORTED				
O	100	REVENUE				
O	101	Other Revenue (describe):				
O	102	Other Revenue (describe):				
O	103	Other Revenue (describe):				
O	190	TOTAL REVENUE		-		-
O	200	EXPENDITURE				
O	201	Other Expenditure (describe):				
O	202	Other Expenditure (describe):				
O	203	Other Expenditure (describe):				
O	290	TOTAL EXPENDITURE		-		-
O	295	NET ACTIVITY NOT OTHERWISE REPORTED SURPLUS (DEFICIT)		-		-
O	300	Redirected Funds (To) From				
O	302	FROM Local Funds - M313				
O	390	Total Redirected Funds		-		-
O	400	BALANCE ACTIVITY NOT OTHERWISE REPORTED		-		-
P		GRAND TOTALS				
P	190	GRAND TOTAL REVENUE		38,871,333		38,871,333
P	290	GRAND TOTAL EXPENDITURE		37,023,952		37,023,952
P	390	GRAND TOTAL REDIRECTED FUNDS (must = 0)		-		-
P	400	NET INCREASE (DECREASE)		1,847,381		1,847,381
Q		REMARKS				
Q		This section has been provided for the CMHSP to provide narrative descriptions as requested in the FSR instructions or where additional narrative would be meaningful to the CMHSP / MDHHS.				
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MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)

FINANCIAL STATUS REPORT - ALL NON MEDICAID - SUPPLEMENTAL

CMHSP:		Allegan County Community Mental Health Services		FISCAL YEAR:		FY 21 / 22		YEAR TO DATE REPORTING			
				SUBMISSION TYPE:		YE Final					
				SUBMISSION DATE:		2/28/2023					
				Column A	Column B	Column C	Column D				
H	MDHHS EARNED CONTRACTS	Grant Program Code	Grant Program Title	Project Code	Project Title	REVENUE	EXPENDITURES	CCBHC	BALANCE		
H	CBH	Comprehensive Services for Behavioral Health	ABHS	Asian Behavioral Health Services					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	BC / BWC	Benefits Coaches / Benefits to Work Coaches					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	BCDP	Branch County Diversion Project					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	BHC	Behavioral Health Consultant					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	BHH	Behavioral Health Home					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	BHSNA	Behavioral Health Services for Native Americans					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	BHSVV	Behavioral Health Services for Vietnam Veterans					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	CLUB	Clubhouse Engagement					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	CRIM	Criminal Justice					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	CRMGT	Care Management					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	CSC	Child System of Care					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	DROP**						-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	DROP**						-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	DROP**						-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	FIT	Fit Together					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	HBHS	Hispanic Behavioral Health Services					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	IECMHC	Infant and Early Childhood Mental Health Consultation					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	IHC	Integrated Healthcare					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	**CSSE	Intensive Crisis Stabilization Service(s) Expansion					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	JHCH	Justice Involved Health Coach					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	MHAJJ	Mental Health Access and Juvenile Justice Diversion					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	MHJSE	Mental Health and Juvenile Justice Screening Expansion					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	MHJSP	Mental Health Juvenile Justice Screening Project					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	MHTC	58th District Mental Health Court Expansion					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	MICHT	Michigan Healthy Transitions					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	NCC	Enhanced Nutrition Care Coordination and Medical Culinary Ed Prgrms					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	NTPH	Navigators for Transition from Psychiatric Hospitals					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	OBRA	Pre-Admission Screening Annual Resident Reviews		112,296	112,296		-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	PACC	Promoting Access and Continuity of Care					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	PCPCP	Psychiatric Consultation to Primary Care Practices					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	PDTOB	Peer Driven Tobacco Cessation					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	PHC	Peer(s) as Health Coach(es)					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	PIPBHC	Promoting Integration of Primary and Behavioral Health Care					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	PMTO*						-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	RCVC	Recovery Conference					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	RPTS	Regional PMTO Training Support					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	RT	Rural Transportation					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	RTTSE	Infant and Early Childhood Mental Health Consultation.					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	SCCHB	Saginaw Community Care HUB					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	SCLCA	988 Suicide and Crisis Lifeline SAMHSA Cooperative Agreement					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	SFEP	First Episode Psychosis					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	SPTTA	Statewide PMTO Training and TA					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	TBR	Technology-Based Recovery Support					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	TCR	Transportation to Crisis Residential					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	TCSCCT	Tri-County Strong Crisis Counseling & Training					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	TFCCT	Trauma Focused CBT Coordination & Training					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	TFCO	Treatment Foster Care Oregon					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	TIC / TISC	Trauma Informed Care / System of Care					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	TPC	Tuscola Peer Center					-	Must = 0	
H	CBH	Comprehensive Services for Behavioral Health	VE**						-	Must = 0	
H	SUBTOTAL Comprehensive Services for Behavioral Health						112,296	112,296	-	-	Must = 0
H	CCBH	COVID-19 Comprehensive Services for Behavioral Health	CCR	Children's Crisis Residential					-	Must = 0	
H	CCBH	COVID-19 Comprehensive Services for Behavioral Health	CMHCSS	Children's Mental Health COVID Supplemental Services					-	Must = 0	
H	CCBH	COVID-19 Comprehensive Services for Behavioral Health	EOPSA	Early Onset Psychosis Set-Aside					-	Must = 0	
H	CCBH	COVID-19 Comprehensive Services for Behavioral Health	MHCM*	Mental Health COVID Mitigation and Testing					-	Must = 0	
H	CCBH	COVID-19 Comprehensive Services for Behavioral Health	MHCSS	Mental Health COVID Supplemental Services					-	Must = 0	
H	CCBH	COVID-19 Comprehensive Services for Behavioral Health	NMOS	CCBHC Non-Medicaid Operations Support					-	Must = 0	
H	CCBH	COVID-19 Comprehensive Services for Behavioral Health	WFSS	ACT and Dual ACT/IDDT Financial Incentive					-	Must = 0	
H	SUBTOTAL COVID-19 Comprehensive Services for Behavioral Health						-	-	-	-	Must = 0
H	CSUGS	COVID-19 Substance Use and Gambling Services	ADM	ARPA Administration					-	Must = 0	
H	CSUGS	COVID-19 Substance Use and Gambling Services	PREV	ARPA Prevention					-	Must = 0	
H	CSUGS	COVID-19 Substance Use and Gambling Services	PREVII	Prevention II COVID					-	Must = 0	
H	CSUGS	COVID-19 Substance Use and Gambling Services	SUDADII	Substance Use Disorder Administration COVID					-	Must = 0	
H	CSUGS	COVID-19 Substance Use and Gambling Services	TRMTA	ARPA Treatment and Access					-	Must = 0	
H	CSUGS	COVID-19 Substance Use and Gambling Services	TRMTII	Treatment COVID					-	Must = 0	
H	CSUGS	COVID-19 Substance Use and Gambling Services	WSSII	Women's Specialty Services COVID					-	Must = 0	
H	SUBTOTAL COVID-19 Substance Use and Gambling Services						-	-	-	-	Must = 0
H	EBSJJ	Evidence Based Services for Youth in the Juvenile Justice System	EBSJJ	Evidence Based Services for Youth in the Juvenile Justice System					-	Must = 0	
H	SUBTOTAL Evidence Based Services for Youth in the Juvenile Justice System						-	-	-	-	Must = 0
H	HHS	Housing and Homeless Services	PSH	Permanent Supportive Housing Dedicated Plus					-	Must = 0	
H	HHS	Housing and Homeless Services	RRP	Consolidated Rapid Re-Housing		2,197	2,197		-	Must = 0	
H	HHS	Housing and Homeless Services	SH	Permanent Supportive Housing Statewide Leasing					-	Must = 0	
H	HHS	Housing and Homeless Services	SPC*	Permanent Supportive Housing					-	Must = 0	
H	SUBTOTAL Housing and Homeless Services						2,197	2,197	-	-	Must = 0
H	JURT	Juvenile Urgent Response Teams	JURT	Juvenile Urgent Response Teams					-	Must = 0	
H	SUBTOTAL Juvenile Urgent Response Teams						-	-	-	-	Must = 0
H	MCSHR	Midland County Supportive Housing Resource	MCSHR	Midland County Supportive Housing Resource					-	Must = 0	
H	SUBTOTAL Midland County Supportive Housing Resource						-	-	-	-	Must = 0
H	PATH	Projects for Assistance in Transition from Homelessness	PATH	Projects for Assistance in Transition from Homelessness					-	Must = 0	
H	SUBTOTAL Projects for Assistance in Transition from Homelessness						-	-	-	-	Must = 0
H	RPC	Regional Perinatal Collaborative	RPC	Regional Perinatal Collaborative					-	Must = 0	
H	SUBTOTAL Regional Perinatal Collaborative						-	-	-	-	Must = 0
H	SAMHC	Substance Abuse & Mental Health COVID-19 Grant Program	SAMHC	Substance Abuse & Mental Health COVID-19 Grant Program		62,729	62,729		-	Must = 0	
H	SUBTOTAL Substance Abuse & Mental Health COVID-19 Grant Program						62,729	62,729	-	-	Must = 0
H	SLCBG	Suicide Lifeline Capacity Building Grant	SLCBG	Suicide Lifeline Capacity Building Grant					-	Must = 0	
H	SUBTOTAL Suicide Lifeline Capacity Building Grant						-	-	-	-	Must = 0

MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)

FINANCIAL STATUS REPORT - ALL NON MEDICAID - SUPPLEMENTAL

CMHSP:	Allegan County Community Mental Health Services	FISCAL YEAR:	FY 21 / 22	YEAR TO DATE REPORTING
		SUBMISSION TYPE:	YE Final	
		SUBMISSION DATE:	2/28/2023	

H MDHHS EARNED CONTRACTS					Column A	Column B	Column C	Column D
Grant Program Code	Grant Program Title	Project Code	Project Title		REVENUE	EXPENDITURES	CCBHC EXPENDITURES	BALANCE
H SUGS	Substance Use and Gambling Services	GRT	Gambling Residential Treatment					- Must = 0
H SUGS	Substance Use and Gambling Services	MGDPP	Michigan Gambling Disorder Prevention Project					- Must = 0
H SUGS	Substance Use and Gambling Services	MYTIEP	Michigan Youth Treatment Improvement & Enhancement PIHP					- Must = 0
H SUGS	Substance Use and Gambling Services	PPWP	Pregnant and Postpartum Women-Pilot					- Must = 0
H SUGS	Substance Use and Gambling Services	PREV	Prevention					- Must = 0
H SUGS	Substance Use and Gambling Services	SDA	State Disability Assistance					- Must = 0
H SUGS	Substance Use and Gambling Services	SORII	State Opioid Response II					- Must = 0
H SUGS	Substance Use and Gambling Services	SUDADM	Substance Use Disorder - Administration (ADM)					- Must = 0
H SUGS	Substance Use and Gambling Services	SUDTII	Substance Use Disorder Services - Tobacco II					- Must = 0
H SUGS	Substance Use and Gambling Services	TRMT	Treatment and Access Management					- Must = 0
H SUGS	Substance Use and Gambling Services	WSS	Substance Use Disorder Services - Womens' Specialty Services					- Must = 0
H SUBTOTAL Substance Use and Gambling Services					-	-	-	- Must = 0
Other MDHHS Earned Contracts (describe):								- Must = 0
Other MDHHS Earned Contracts (describe):								- Must = 0
H SUBTOTAL Other MDHHS Earned Contracts					-	-	-	- Must = 0
H BALANCE MDHHS EARNED CONTRACTS (must = 0)					177,222	177,222	-	- Must = 0

Q	REMARKS
Q	This section has been provided for the CMHSP to provide narrative descriptions as requested in the FSR instructions or where additional narrative would be meaningful to the CMHSP / MDHHS.
Q	
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**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
FINANCIAL STATUS REPORT - ALL NON MEDICAID DIRECT CARE WAGE - SUPPLEMENTAL**

CMHSP:	Allegan County Community Mental Health Services	FISCAL YEAR:	FY 21 / 22
		SUBMISSION TYPE:	YE Final
		SUBMISSION DATE:	2/28/2023
			YEAR TO DATE REPORTING
			Column A
			Column B

			Fiscal period	
I			10/1/21-9/30/22	Total
I		PIHP to AFFILIATE MEDICAID SERVICES CONTRACTS - CMHSP USE ONLY		
I	201	Expenditure - Medicaid	24,514,845	24,514,845
I	201	Expenditure - Medicaid Direct Care Wage	1,749,137	1,749,137
I	201	SUBTOTAL Medicaid Expenditures (incl Direct Care Wage)	26,263,982	26,263,982
I	202	Expenditure - Healthy Michigan Plan	3,187,810	3,187,810
I	202	Expenditure - Healthy Michigan Plan Direct Care Wage	40,025	40,025
I	202	SUBTOTAL Healthy Michigan Plan Expenditures (incl Direct Care Wage)	3,227,835	3,227,835
I	203	Expenditure - MI Health Link		-
I	203	Expenditure - MI Health Link Direct Care Wage		-
I	203	SUBTOTAL MI Health Link Expenditures (incl Direct Care Wage)	-	-
I	290	TOTAL EXPENDITURE	29,491,817	29,491,817

REMARKS				
	Remarks may be added about any entry or activity on the report for which additional information may be useful.			
	Total Medicaid Direct Care Wage (Medicaid DCW - I. 201 + MI Health Link DCW - I. 203)		1,749,137	

**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
GENERAL FUND CONTRACT RECONCILIATION AND CASH SETTLEMENT**

CMHSP: Allegan County Community Mental Health Services
FISCAL YEAR: FY 21 / 22
SUBMISSION TYPE: YE Final
SUBMISSION DATE: 2/28/2023

1. General Fund Services - Available Resources		Funding Resources
a.	CMH Operations (FSR B 101)	1,509,348
b.	Intentionally left blank	
c.	Intentionally left blank	
d.	Sub-Total General Fund Contract Authorization	\$ 1,509,348
e.	1st & 3rd Party Collections (FSR B 121 + B 122)	-
f.	Prior Year GF Carry-Forward (FSR B 123)	44,298
g.	Intentionally left blank	
h.	Redirected CMHSP to CMHSP Contracts (FSR B 313)	-
i.	Redirected Non-MDHHS Earned Contracts (FSR B 314)	-
j.	Sub-Total Other General Fund Resources	\$ 44,298
k.	Local 10% Associated to 90/10 Services (FSR M 201)	109,700
l.	Local 10% Match Cap Adjustment (FSR M 203)	-
m.	Sub-Total Local 10% Associated to 90/10 Services	\$ 109,700
n.	Total General Fund Services - Resources	\$ 1,663,346

3. Summary of Resources / Expenditures		Amount
a.	Total General Fund Services - Resources	1,663,346
b.	Total General Fund Services - Expenditures	1,139,029
c.	Sub-Total General Fund Services Surplus (Deficit)	\$ 524,317
d.	Less: Forced Lapse to MDHHS (GF work sheet 5 d column F)	-
e.	Net General Fund Services Surplus (Deficit)	\$ 524,317

4. Disposition:		Amount
a. Surplus		
b.	Transfer to Fund Balance - GF Carry-Forward Earned	(75,467)
c.	Lapse to MDHHS - Contract Settlement	(448,850)
d.	Total Disposition - Surplus	\$ (524,317)

e. Deficit		
f.	Redirected from Local (FSR B 331)	-
g.	Redirected from risk corridor (FSR B 332)	-
h.	Total Disposition - Deficit	\$ -

5. Cash Settlement: (Due MDHHS) / Due CMHSP		Amount
a.	Forced Lapse to MDHHS	-
b.	Lapse to MDHHS - Contract Settlement	(448,850)
c.	Return of Prior Year General Fund Carry-Forward	-
d.	Intentionally left blank	
e.	Contract Authorization - Late Amendment	-
f.	Intentionally left blank	
g.	Misc: (please explain)	
h.	Total Cash Settlement: (Due MDHHS) / Due CMHSP	\$ (448,850)

2. General Fund Services - Expenditures		90/10 - Local Cap	Expenditures
a.	100% MDHHS Matchable Services (FSR B 201)		6,650
b.	100% MDHHS Matchable Services - CMHSP Local Match Cap (FSR B 202)		-
c.	90/10% MDHHS Matchable Services (FSR B 203 Column A)	1,096,996	
d.	Local 10% Match Cap Adjustment (FSR M 203)	-	1,096,996
e.	Intentionally left blank		
f.	Intentionally left blank		
g.	Sub-Total General Fund Services - Expenditures		\$ 1,103,646
h.	Intentionally left blank		
i.	Intentionally left blank		
j.	Intentionally left blank		
k.	Intentionally left blank		
l.	Intentionally left blank		
m.	Intentionally left blank		
n.	GF Supplement for Unfunded Targeted Case Management (FSR B 304)		-
o.	Intentionally left blank		
p.	Intentionally left blank		
q.	GF Supplement for Injectable Medications (FSR B 309)		-
r.	GF Supplement for PIHP to Affiliate Medicaid Services Contracts (FSR B 310)		-
s.	GF Supplement for PIHP to Affiliate CCBHC Medicaid Contracts (FSR B 310.1)		-
t.	GF Supplement for PIHP to Affiliate Opioid Health Home Services Contracts (FSR B 310.2)		-
u.	GF Supplement for PIHP to Affiliate Health Home Services Contracts (FSR B 310.3)		-
v.	GF Supplement for PIHP to Affiliate MI Health Link Services Contracts (FSR B 310.4)		-
w.	GF Supplement for PIHP to Affiliate CCBHC Non-Medicaid Contracts (FSR B 310.5)		-
x.	GF Supplement for CMHSP to CMHSP Contracts (FSR B 312)		35,383
y.	Sub-Total General Fund Services Supplement - Expenditures		\$ 35,383
z.	Total General Fund Services - Expenditures		\$ 1,139,029

6. General Fund MDHHS Commitment		
a.	MDHHS / CMHSP Contract Funded Expenditures	985,031
b.	Earned General Fund Carry-Forward	75,467
c.	Total MDHHS General Fund Commitment	\$ 1,060,498

7. Report Certification			
		Cash	Carry
		Settlement	Forward
Examined	\$	(448,850)	\$ 75,467
Original		-448850	75467
Increase (Decrease)	\$	-	\$ -
Comments:			

**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
GENERAL FUND CONTRACT SETTLEMENT WORKSHEET**

CMHSP: Allegan County Community Mental Health Services
FISCAL YEAR: FY 21 / 22
SUBMISSION TYPE: YE Final
SUBMISSION DATE: 2/28/2023

1. General Fund (Formula and Categorical Funding)	Contract Authorization	Cash Received			Amount Due CMHSP / (MDHHS) Cash Settlement
		Through 9/30	After 9/30 Prior to Settlement	Total	
a. CMH Operations	1,509,348	1,509,348		1,509,348	-
b. Intentionally left blank				-	-
c. Total Current FY GF Authorization / Cash Received / Cash Settlement	\$ 1,509,348	\$ 1,509,348	\$ -	\$ 1,509,348	\$ -

2. Current Year - General Fund Carry-Forward - Maximum	Contract Authorization	Maximum C/F
a. CMH Operations	1,509,348	
b. Total Current Year Maximum Carry-Forward	\$ 1,509,348	\$ 75,467

3. Prior Year - General Fund Carry-Forward	FY	If balance of Prior Year GF Carry-Forward is not zero, balance must be explained
a. Prior Year GF Carry-Forward Earned	44,298	
b. Prior Year GF Carry-Forward (FSR B 123)	44,298	
c. Balance of Prior Year General Fund Carry-Forward	\$ -	

4. Categorical - Categories	Authorization	Expenditures	Lapse	Cost Above Authorizations
a. Other Funding - Please explain			-	-
b. Other Funding - Please explain			-	-
c. Other Funding - Please explain			-	-
d. Totals	\$ -	\$ -	\$ -	\$ -

5. Narrative: Both CRCS and Contract Settlement Worksheet

SPECIAL FUND ACCOUNT
For Recipient Fees and Third-Party Reimbursement
 As Added to Mental Health Code per PA 423, 1980

CMHSP: Allegan County Community Mental Health Services
FISCAL YEAR: FY 21 / 22
SUBMISSION TYPE: YE Final
SUBMISSION DATE: 2/28/2023

Part A: Mental Health Code (MHC) 330.1311 - County Funding Level		EXAMINATION ADJUSTMENTS	EXAMINED TOTAL
1. County Funding - 1979/1980	\$ 94,674		\$ 94,674
2. County Funding - Current Fiscal Year	\$ 346,095		\$ 346,095

Part B: Mental Health Code (MHC) 330.1226a - Cash Collections Year to Date by Service Category and Source						EXAMINATION ADJUSTMENTS	EXAMINED TOTAL
Service Category	(1) Individuals Relatives	(2) Insurers Including Medicare	(3) Medicaid Health Plan Organizations	(4) Total			
1. Inpatient Services	\$ -	\$ -		\$ -			\$ -
2. Residential Services	\$ -	\$ -		\$ -			\$ -
3. Community Living Services	\$ -	\$ -		\$ -			\$ -
4. Outpatient Services	\$ 1,511	\$ 115,826	\$ -	\$ 117,337			\$ 117,337
5. Total	\$ 1,511	\$ 115,826	\$ -	\$ 117,337	\$ -		\$ 117,337

Part C: Mental Health Code (MHC) 330.1226a - Cash Collections Quarterly Summary				EXAMINATION ADJUSTMENTS	EXAMINED TOTALS
1. First Quarter	\$ 34,649				\$ 34,649
2. Second Quarter	\$ 25,963				\$ 25,963
3. Third Quarter	\$ 28,414				\$ 28,414
4. Fourth Quarter	\$ 28,311				\$ 28,311
5. Total	\$ 117,337	\$ -			\$ 117,337

Explanation of Accrual and Examination Adjustments

section 7.2.4 Special Fund Account of the CMHSP contract

Allegan County Community Mental Health Services
Explanation of Examination Adjustments
September 30, 2022

There were no examination adjustments for the September 30, 2022 fiscal year.

Allegan County Community Mental Health Services
Comments and Recommendations
September 30, 2022

During our compliance audit, we may have become aware of matters that are opportunities for strengthening internal controls, improving compliance and increasing operating efficiency. These comments and recommendations are expected to have an impact greater than \$25,000, but not individually or cumulatively be material weaknesses in internal control over the Medicaid Contract and General Fund Contract. Furthermore, we consider these matters to be immaterial deficiencies, not findings. The following comments and recommendations are in regard to those matters.

There are no comments or recommendations for the September 30, 2022 fiscal year.



Communication with Those Charged with Governance at the Conclusion of the Audit

To the Members of the Board
Allegan County Community Mental Health Services
Allegan, Michigan

We have examined Allegan County Community Mental Health Services' (the CMHSP) compliance with the compliance requirements described in the *Compliance Examination Guidelines* issued by Michigan Department of Health and Human Services that are applicable to the Medicaid Contract and General Fund Contract for the year ended September 30, 2022. Professional standards require that we provide you with information about our responsibilities under generally accepted auditing standards as well as certain information related to the planned scope and timing of our audit. We have communicated such information in our letter to you during planning. Professional standards also require that we communicate to you the following information related to our audit.

Significant Audit Matters

Qualitative Aspects of Compliance Practices

Management is responsible for the selection and use of appropriate accounting and compliance policies. We noted no compliance matters entered into by the CMHSP during the year for which there is a lack of authoritative guidance or consensus.

Accounting estimates are prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the compliance requirements, particularly those that may have an impact on the Financial Status Report (FSR). The most sensitive estimates relating to the compliance requirements were as follows:

Management uses estimates when preparing the CMHSP's cost allocation workbook. The cost allocation workbook is used to spread shared costs across the programs and funding sources that benefit from these shared costs. Examples of allocation methodologies used to spread shared costs that use estimates may include full-time equivalent (FTE), square footage of space used, percentage of total salaries and wages, etc. These allocation methodologies should follow the guidance provided by MDHHS and 2 CFR 200 Subpart E.

Difficulties Encountered in Performing the Audit

We encountered no significant difficulties in dealing with management in performing and completing our audit.

Corrected and Uncorrected Misstatements

Professional standards require us to accumulate all known and likely misstatements identified during the audit, other than those that are clearly trivial, and communicate them to the appropriate level of management. If any of the misstatements detected as a result of audit procedures and corrected by management were material, either individually or in the aggregate, they would be reported on Schedule of Findings as shown above. If any of the misstatements detected as a result of audit procedures were expected to have an impact greater than \$25,000, but were not material, either individually or in the aggregate, they would be reported on Comments and Recommendations as shown above.

Disagreements with Management

For purposes of this letter, a disagreement with management is an accounting, reporting, compliance, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the CMHSP's compliance with the compliance requirements described in the *Compliance Examination Guidelines*. We are pleased to report that no such disagreements arose during the course of our audit.

Management Representations

We have requested certain representations from management that are included in the management representation letter.

Management Consultations with Other Independent Accountants

In some cases, management may decide to consult with other accountants about auditing and accounting matters, similar to obtaining a “second opinion” on certain situations. If a consultation involves the CMHSP’s compliance with the compliance requirements or a determination of the type of auditor’s opinion that may be expressed, our professional standards require the consulting accountant to check with us to determine that the consultant has all the relevant facts. To our knowledge, there were no such consultations with other accountants.

Other Audit Findings or Issues

We generally discuss a variety of matters, including the application of accounting principles and auditing standards, with management each year prior to retention as the CMHSP’s auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our retention.

Restriction on Use

This information is intended solely for the information and use of the Board and management of the CMHSP and is not intended to be, and should not be, used by anyone other than these specified parties.

Sincerely,

A handwritten signature in black ink that reads "Roslund, Prestage & Company, P.C." The signature is written in a cursive, flowing style.

Roslund, Prestage & Company, P.C.
Certified Public Accountants

MINUTES

ONPOINT BOARD

Tuesday, June 20, 2023, at 5:30 P.M.

540 Jenner Drive

Present: Kim Bartnick, Jessica Castaneda, Glen Brookhouse, Commissioner Mark DeYoung, Commissioner Gale Dugan, Beth Johnston, Alice Kelsey and Karen Stratton

Absent: Robin Klay and Pastor Craig Van Beek

Staff: Susan Conrad, Geniene Gersh, Brenda Holquist, Leanne Kellogg, Kelsey Newsome, Mandy Padget, Andre Pierre, Brenda Polmanteer, Cathy Potter and Mark Witte

Visitors: Jim McCormick

1. Call to Order

Commissioner Dugan called the meeting to order at 5:33 pm. Roll call was taken and a quorum was reached.

2. Pledge of Allegiance

Recited.

3. Provision for Public Comment

None.

4. Approval of Agenda with the addition of Recipient Rights Training

Moved: Ms. Kelsey

Supported: Ms. Stratton

Motion carried by roll call.

5. Consent Agenda – *All items listed are routine and to be enacted by one motion.*

a. **Recommended Motion:** Approval of prior minutes for the following:

- i. Executive Committee Meeting (05.12.2023)
- ii. Board Meeting (05.16.2023)
- iii. Building Committee Meeting (05.16.2023)
- iv. Finance Committee Meeting (05.16.2023)
- v. Program Committee Meeting (05.16.2023)

Moved: Ms. Bartnick

Supported: Ms. Kelsey

Motion carried by roll call.

6. Program Committee Report

Ms. Kelsey briefly reviewed the activities of the Program Committee, highlighting reports of interest and was available for questions.

7. Finance Committee Report

a. The Finance Committee recommends that the OnPoint Board approve the March 2023 disbursements totaling \$5,532,210.71.

Moved: Ms. Johnston

Supported: Ms. Kelsey

Motion carried by roll call.

b. The Finance Committee recommends that the OnPoint Board approve the following contracts for FY2023.

ProLow Moving
Riverside Integrated Systems, Inc
EPS Security
County of Muskegon
Pine Ridge Bible Camp
Camp Sunshine
Landmark Recovery, LLC
Anikare

Moved: Ms. Johnston

Supported: Ms. Stratton

Motion carried by roll call.

- c. The Finance Committee recommends that the OnPoint Board adopt the attached deficit elimination plan, as presented and authorize Mr. DeYoung to sign the amendment motion.

Moved: Ms. Johnston

Supported: Ms. Bartnick

Mr. Pierre explained the changes from the plan that was adopted last month.

Motion carried by roll call.

Mr. Pierre gave an overview of the April financials and was available for questions.

8. Recipient Rights Advisory Committee (Feb/May/Aug/Nov)

No report.

9. Chairperson's/Executive Committee Report

Commissioner Dugan reported on the Executive Committee meeting and was available for questions.

As chairperson of the OnPoint board, I request affirmation of the board for my appointment of Jessica Castaneda to the Program Committee and to the Recipient Rights Advisory Committee.

Moved: Commissioner Dugan

Supported: Mr. Brookhouse

Motion carried by roll call.

As chairperson of the OnPoint board, I request affirmation of the board for my appointment of Kimberly Bartnick to the Recipient Rights Advisory Committee.

Moved: Commissioner Dugan

Supported: Mr. Brookhouse

Motion carried by roll call.

Tabled: The Board of Directors of OnPoint restates its Mission, Vision and Values as follows:

MISSION – Improving the lives of people in Allegan County through exceptional behavioral health and homelessness services.

VISION – An inclusive community with integrated behavioral health services and safe, affordable housing for all.

CORE VALUES – Integrity, Inclusivity, Honor, Equality, Innovation, Teamwork, Cultural Competence

10. LRE Update

Jim McCormick gave an update on the LRE and was available for questions.

11. OnPoint Executive Director’s Report

Mr. Witte reviewed his report and was available for questions. The Mission, Vision and Values will be reviewed by the board and brought back to July meeting for discussion and adoption.

12. Recipient Rights Training

Ms. Newsome presented the training and was available for questions.

13. Provision for Public Comment

Cathy Potter, Customer Services – should the Mission, Vision and Value statements be given to the consumer advisory committee as well?

14. Board Member Comments

Commissioner DeYoung states he has resigned his position on the LRE Board.

Commissioner Dugan thanks Commissioner DeYoung for his service on the LRE Board and for also introducing him to the chair seat on the OnPoint Board. If you would like to be a member of the LRE Board, please contact Mr. Witte.

15. Motion to Adjourn:

Moved: Ms. Johnston

Supported: Ms. Bartnick

Motion carried.

Meeting adjourned at 6:55 pm.

Respectfully submitted,

Brenda Holquist
Executive Assistant

Gale Dugan
Board Chair

Reporting Period: **FY23** October 1, 2022 - March 31, 2023

CMH	# of Consumers Served (unduplicated count)	1412	Rights Office FTEs	3.5
LPH	Number of Licensed Beds		Hours/40 Spent on Rights	

ALLEGATION TOTALS

Total Complaints Received	78	← DO NOT TYPE HERE - CELL WILL AUTO FILL
Allegations	74	← DO NOT TYPE HERE - CELL WILL AUTO FILL
Investigations	73	← DO NOT TYPE HERE - CELL WILL AUTO FILL
Investigations Substantiated	21	← DO NOT TYPE HERE - CELL WILL AUTO FILL
Interventions	1	← DO NOT TYPE HERE - CELL WILL AUTO FILL
Interventions Substantiated	1	← DO NOT TYPE HERE - CELL WILL AUTO FILL

ALLEGATIONS BY CATEGORY

Code	Category	Received
0000	No Right Involved	1

Code	Category	Received
0001	Outside Provider Jurisdiction	3

Code	Category	Received	Investigations	Investigations Substantiated
7221	Abuse class I			
72221	Abuse class II - Nonaccidental act	3	3	0
72222	Abuse class II - unreasonable force	2	2	
72223	Abuse class II - emotional harm	1	1	1
72224	Abuse class II - treating as incompetent			
72225	Abuse class II - exploitation	5	5	1
7223	Abuse - class III			
7224	Abuse class I - sexual abuse			

Code	Category	Received	Investigations	Investigations Substantiated
72251	Neglect class I			
72252	Neglect class I - failure to report			
72261	Neglect class II	3	3	0
72262	Neglect class II - failure to report			
72271	Neglect class III	3	3	3
72272	Neglect class III - failure to report			

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7550	Right Protection System	1	1	1		
7555	Retaliation/harassment toward recipients					

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7040	Civil rights: Discrimination, Accessibility, Accommodation, etc.					
7044	Religious practice					
7045	Voting					

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7081	Mental Health Services Suited to Condition (includes chapter 4 violations)	19	19	7		
7082	Safe, Sanitary Humane Treatment Environment	1	1	0		
7083	Least restrictive setting	20	20	5		
7084	Dignity and Respect					

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7100	Physical and Mental Exams					
7110	Family Rights	1	1	0		
7120	Individual Written Plan of Service (Person-Centered Process)	2	1	0	1	1
7130	Choice of Physician/Mental Health Professional					
7140	Notice of Clinical Status/Progress					
7150	Services of a Mental Health Professional (External to the Agency/Hospital)					
7160	Surgery					
7170	Electroconvulsive Therapy					
7180	Psychotropic drugs (AR 715B)					
7190	Medication Side Effects					

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7240	Fingerprints, Photographs, Audio recordings, Use of One-Way Glass	2	2	0		
7249	Video Surveillance	1	1	1		

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7480	Communications-Visits					
7481	Communications-Telephone					
7263	Communications-Mail					

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7271	Property-Possession and use	2	2	0		
7286	Personal Property - Limitations					

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7360	Labor and Compensation					

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7420	Freedom of Movement	4	4	0		
7400	Restraint					
7420	Seclusion					

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7460	Complete Record					
7480	Disclosure of Confidential Information	4	4	2		
7481	Withhold of Confidential Information (includes Denying Recipient Access to Records)					
7490	Correction of Record					
7500	Privileged communication					
TOTALS		74	73	21	1	1

Section II: Remediation data for: OnPoint (Allegan County)

Category (from Complaint Data)	Provider Type	Specific Remedial Action	Specific Remedial Action	CMH ONLY			
				SED	SED-W	DD-CWP	HSW
Dignity and Respect	Residential MI & DD	Training	Verbal Counseling				
Dignity and Respect	Residential MI & DD	Suspension	Staff Transfer				1
Dignity and Respect	Residential MI & DD	Verbal Reprimand	Verbal Counseling				
Dignity and Respect	Residential MI & DD	Staff Transfer	Verbal Counseling				
Dignity and Respect	Other	Verbal Counseling	Policy Revision/Development				
Mental Health Services Suited to Condition (includes chapter 4 violations)	Case Management	Recipient Transfer to Another Provider/Site					
Mental Health Services Suited to Condition (includes chapter 4 violations)	Case Management	Recipient Transfer to Another Provider/Site					
Mental Health Services Suited to Condition (includes chapter 4 violations)	Other	Employment Termination					
Mental Health Services Suited to Condition (includes chapter 4 violations)	Case Management	Recipient Transfer to Another Provider/Site	Verbal Counseling				1
Mental Health Services Suited to Condition (includes chapter 4 violations)	Case Management	Verbal Counseling	Plan of Service Revision				
Mental Health Services Suited to Condition (includes chapter 4 violations)	Case Management	Verbal Counseling	Other				
Mental Health Services Suited to Condition (includes chapter 4 violations)	Residential MI & DD	Contract Action	Recipient Transfer to Another Provider/Site				
Video Surveillance	Residential MI & DD	Contract Action	Recipient Transfer to Another Provider/Site				
Disclosure of Confidential Information	Other	Written Counseling	Other				
Disclosure of Confidential Information	Residential MI & DD	Pending					
Right Protection System	Residential MI & DD	Training	Verbal Counseling				
Abuse class II - emotional harm	Other	Employment Termination	Written Reprimand				
Abuse class II - exploitation	Residential MI & DD	Suspension	Staff Transfer				1
Neglect class III	Residential MI & DD	Employment Termination					
Neglect class III	Residential MI & DD	Employment Termination					
Neglect class III	Residential MI & DD	Written Reprimand	Training				1
Individual Written Plan of Service (Person-Centered Process)	Case Management	Policy Revision/Development					

REMEDATION TOTALS	
Contract Action	2
Demotion	0
Employee left the agency, but substantiated	0
Employment Termination	4
Environmental Repair/Enhancement	0
None	0
Other	2
Pending	1
Plan of Service Revision	1
Policy Revision/Development	2
Recipient Transfer to Another Provider/Site	5
Staff Transfer	3
Suspension	2
Training	3
Verbal Counseling	8
Verbal Reprimand	1
Written Counseling	1
Written Reprimand	2

PROVIDER TOTALS	
ACT	0
Case Management	6
Children's Foster Care	0
Clubhouse/Drop-in Center	0
Crisis Center	0
Day Program DD	0
Day Program MI	0
Inpatient	0
Other	4
Out Patient	0
Partial Hospitalization	0
Psychosocial Rehabilitation	0
Residential DD	0
Residential MI	0
Residential MI & DD	12
Respite Homes	0
SIP	0
Supported Employment	0
Workshop (prevocational)	0

WAIVER POPULATION TOTALS	
SED	0
SED-W	0
DD-CWP	0
HSW	4

OnPoint Board of Directors
Executive Director Report
 July 2023

1. Agency

July 2 Smoke Alarm – We experienced our first fire alarm incident early on Monday July 1. Roof top unit #11 caused smoke alarm resulting in a short evacuation of our staff and a substantial fire department response. Everyone was safe. We owe a huge debt of gratitude to the fire departments that responded. Our building contractor also redirected to our location to offer assistance. Early reports are that there was no fire. The roof top unit emitted some kind of smoke that wasn't visible, but our fire alarms detected. Our clerical team swiftly reported the alarm to the fire department, evacuated the building and promptly informed management. Most systems worked as they should have, but some will need follow-up ranging from return visits from our HVAC and wiring contractors and finding out why some alarms didn't alarm to posting rooftop unit maps in the mechanical room for the fire department use. We also experienced a big reminder of the importance of taking fire drills seriously.

2. Board

CMHA BoardWorks Training – Unless you've already completed the course, our "assignment" for board members this month (by the August board meeting) is to watch the CMHA BoardWorks training called "[Intended Beneficiary Command](https://vimeo.com/799865157)." It is a training about what people we serve and the public should expect from our community system. The video at <https://vimeo.com/799865157> and we will give you the PowerPoint and evaluation (or send it if you're not at the July board meeting).

Strategic Plan – I look forward to resuming our discussion this month on the slightly revised Mission, Vision and Values that we saw tabled at the June board meeting. As a reminder, this was the recommendation prior to giving consideration to the "cultural competence" and "cultural humility" discussion.

	CURRENT	PROPOSED
MISSION	Strengthening our community by improving and advocating for the lives of individuals and families.	<i>Improving the lives of people in Allegan County through exceptional behavioral health and homelessness services.</i>
VISION	Building a community which provides integrated behavioral health care effectively, efficiently, and sustainably for all who require it.	<i>An inclusive community with integrated behavioral health services and safe, affordable housing for all.</i>
VALUES	Integrity, Inclusivity, Honor, Equality Innovation, Teamwork, Cultural Competency	<i>Integrity, Inclusivity, Honor, Equality Innovation, Teamwork, Cultural Competence</i>

3. Community

Ascension Borgess Allegan Hospital – One of the impacts of Ascension Borgess taking over the operations of Allegan General Hospital (and Pipp Hospital in Plainwell and Lee in Dowagiac), has been the ending of the practice of having a local/community board of directors. I am not sure what has happened with Pipp and Lee, but the former board of Allegan has continued to meet with Ascension Borgess leadership to dialogue on Ascension's continued development of these services under its ownership. Apparently, behavioral health services

arose as an important topic at meeting in April or May, and so I was invited to join this informal group in late June. Behavioral health did not become a prominent topic for discussion in that meeting, although I did share a little bit about the dramatic changes in access policies that OnPoint's CCBHC grant has produced for the community. I also shared that this is a development that would likely parallel operations at any of Ascension's locations that are in "CCBHC counties". To that end, I asked for an opportunity to hear what they are experiencing as beneficial practices throughout those Michigan locations.

Crisis Intervention Team (CIT) Conversations – We have recently begun to have focused leadership-level conversations with local law enforcement about the initiation of some form of partnered law enforcement and behavioral health teams deployed in the community. Many communities are hiring or deploying behavioral health professionals to ride with officers. When personal safety is not in jeopardy, they will serve as the lead intervener. Many law enforcement deployments are to situations in which this could be a very positive resource. CIT International, in which several Michigan jurisdictions have played a prominent role, provides key training resources. Stay tuned.

4. Region

Lakeshore Regional Entity (LRE) – As reported last month, Mark DeYoung has stepped down as a LRE board member and chairperson at the end of May. Mark is to be congratulated and appreciated for his long term of service and for his steady leadership during a tumultuous time in the history of the LRE. With his departure comes a vacancy for Allegan on the LRE Executive Committee. Each CMHSP appoints its own members and names one as its Executive Committee member. The LRE board appoints its own officers from among those appointed members. I recommend that the OnPoint board appoint Commissioner Jim Story to the Executive Committee. We still have vacancy for a third Allegan member on the LRE board. I've reached out to a former LRE board member from Allegan who stepped down earlier to attend to family needs. She may now be open to reappointment. I'll keep you posted.

The LRE has made payments to those CMHs that held past liabilities from FY2018/2019, with 20% being held in escrow accounts. This has not led to a complete end to all the legal wranglings yet, but it is a giant leap forward toward that eventual outcome.

5. State

Certified Community Behavioral Health Clinic (CCBHC) – I reported last month that our SAMHSA grant application for continuation of CCBHC funding has been submitted. At our meeting, you will hear that the application to MDHHS for participation in the state's CCBHC Demonstration Project was submitted as well. In the LRE region, HealthWest (Muskegon) and West Michigan CMH (Lake, Mason, Oceana) are already in the demonstration. If accepted, the three remaining CMHSPs in our region will be part of it as well (OnPoint/Allegan, CMH of Ottawa County and Network180/Kent). The legislature passed a budget to expand the demonstration by 19 sites, which happens to be the exact number that CMHA announced had initiated demonstration applications. There will, no doubt, be significant hurdles ahead. However, everything that is needed is falling into place as of this moment.

Sincerely,

Mark Witte
July 6, 2023