



Southwest Michigan Behavioral Health Board Meeting
Air Zoo Aerospace & Science Museum
6151 Portage Rd, Portage, MI 49002
January 10, 2025
9:30 am to 11:30 am
(d) means document provided
Draft: 1/3/25

- 1. Welcome Guests/Public Comment**
- 2. Agenda Review and Adoption (d) pg.1**
- 3. Financial Interest Disclosure Handling (M. Todd) (10 minutes)**
 - a. Gail Patterson Gladney – Van Buren County
 - b. Annual Financial Interest Disclosures
- 4. Consent Agenda (5 minutes)**
 - a. December 13, 2024 SWMBH Board Meeting Minutes (d) pg.3
 - b. December 13, 2024 SWMBH Board First Closed Session Meeting Minutes – Conflict of Interest
 - c. December 4, 2024 Operations Committee Meeting Minutes (d) pg.8
 - d. Board Finance Committee (d) pg.13
 - e. Board Regulatory Compliance Committee (d) pg.15
- 5. December 13, 2024 Second Closed Session Meeting Minutes – Dispute Resolution**
- 6. Operations Committee Update(s)**
 - a. Status update on OC recommendations re: regional financial position (J. Goodrich/R. Carpenter)
- 7. Required Approvals (15 minutes)**
 - a. None
- 8. Ends Metrics Updates (*Requires motion) (15 minutes)**

Proposed Motion: Is the Data Relevant and Compelling? Is the Executive Officer in Compliance? Do the Ends need Revision?

 - a. None scheduled
- 9. Board Actions to be Considered (10 minutes)**
 - a. Calendar Year 2025 Board Meeting Calendar (d) pg.16
 - b. Calendar Year 2025 Board Policy Calendar (d) pg.17
 - c. Holiday Luncheon (d) pg.18

10. Board Policy Review (10 minutes)

Proposed Motion: Is the Board in Compliance? Does the Policy Need Revision?

- a. BG-005 Chairperson's Role (d) pg.19
- b. EO-002 Monitoring Executive Officer Performance (E. Meny) (d) pg.21

11. Executive Limitations Review (10 minutes)

Proposed Motion: Is the Executive Officer in Compliance with this Policy? Does the Policy Need Revision?

- BEL-003 Asset Protection (E. Krogh) (d) pg.23

12. Board Education (15 minutes)

- a. Fiscal Year 2025 Year to Date Financial Statements (G. Guidry) (d) pg.32

13. Communication and Counsel to the Board (5 minutes)

- a. Fiscal Year 2024 Contract Vendor Summary (G. Guidry) (d) pg.40
- b. Fiscal Year 2024 Customer Services Report (S. Ameter) (d) pg.43
- c. February Board Policy Direct Inspection – None scheduled

14. Public Comment

15. Adjournment

SWMBH adheres to all applicable laws, rules, and regulations in the operation of its public meetings, including the Michigan Open Meetings Act, MCL 15.261 – 15.275.

SWMBH does not limit or restrict the rights of the press or other news media.

Discussions and deliberations at an open meeting must be able to be heard by the general public participating in the meeting. Board members must avoid using email, texting, instant messaging, and other forms of electronic communication to make a decision or deliberate toward a decision and must avoid "round-the-horn" decision-making in a manner not accessible to the public at an open meeting.

**Next Board Meeting
February 14, 2025
9:30 am - 11:30 am**



Board Meeting Minutes

December 13, 2024

Air Zoo Aerospace & Science Museum, 6151 Portage Rd, Portage, MI 49002

9:30 am-11:30 am

Draft: 12/16/24

Members Present: Sherii Sherban, Tom Schmelzer, Louie Csokasy, Nancy Johnson, Erik Krogh, Carol Naccarato, Lorraine Lindsey, Tina Leary

Members Absent: Edward Meny

Guests Present: Anne Wickham, Chief Administrative Officer, SWMBH; Garyl Guidry, Chief Financial Officer, SWMBH; Michelle Jacobs, Senior Operations Specialist & Rights Advisor, SWMBH; Ella Philander, Executive Projects Manager, SWMBH; Sarah Ameter, Customer Services Manager, SWMBH; Cameron Bullock, Pivotal; Jeannie Goodrich, Summit Pointe; John Ruddell, Woodlands; Sue Germann, Pines BH; Debbie Hess, Van Buren County CMH; Richard Thiemkey, Barry County CMH; Ric Compton, Riverwood; Cathi Abbs, SWMBH Board Alternate; Jeff Patton, ISK; Michael Seals; Allen Edlefson; Neil Marchand, Miller Johnson Attorneys; Jordan Valentine, Varnum LLP Sarah Wixson, Varnum LLP

Welcome Guests

Sherii Sherban called the meeting to order at 9:37 am.

Sherii Sherban read a letter on the approved SWMBH Board Ends and requested people try to make connections.

Public Comment

None

Agenda Review and Adoption

Motion Erik Krogh moved to approve the agenda with the revision of moving the Pivotal Dispute Resolution before the Summit Pointe Dispute Resolution to keep the Dispute Resolutions in chronological order as requested by Carol Naccarato.

Second Lorraine Lindsey

Motion Carried

Financial Interest Disclosure (FID) Handling

None

Consent Agenda

Motion Lorraine Lindsey moved to approve the November 8, 2024 Board minutes, October 9, 2024 Operations Committee Meeting minutes, Board Finance Committee Meeting minutes and Board Regulatory Compliance Committee Meeting minutes as presented.

Second Erik Krogh

Motion Carried

Louie Csokasy asked that the Board Finance Committee Meeting minutes be moved to 11 under Communication Counsel. Board agreed.

Required Approvals

None scheduled

Ends Metrics Updates

None scheduled

Board Actions to be Considered

Executive Officer Evaluation

Sherii Sherban noted that the EO Evaluation Committee (Board Officers) met on November 15, 2024 and reviewed pertinent materials according to Board Policy EO-002 Monitoring Executive Performance. Carol Naccarato stated that Brad Casemore met 6 out of 9 but not 100% of the Ends Metrics. Tom Schmelzer agreed.

Motion Tom Schmelzer moved that the Board Executive Committee finds the Executive Officer achieved 81% of Ends Metrics and achieved compliance with all Board Executive Limitations Policies. The Executive Committee would like to commend Brad and his team at SWMBH for a job well done. The Executive Committee finds that the Executive Officer is in compliance with Board Policy EO-002 and the Policy does not need revision, and I so Move.

Second Nancy Johnson

Motion Carried

Pivotal Dispute Resolution Step 3

Summit Pointe Dispute Resolution Step 3

Discussion led to Pivotal and Summit Pointe Dispute Resolutions being addressed together.

Sherii Sherban commented on the amount of paperwork in the packet regarding the Dispute Resolutions and that are things that she is just now finding out. Sherii Sherban stated that there was not a response from Brad Casemore on Step 3. Anne Wickham stated that Brad Casemore’s response can be found on page 170 of the packet. Board discussion that Brad’s response is not official, not on letterhead, not signed and not dated. Board also discussed the amount of paperwork and the timeframe to review. Protocols on the Board receiving information needs to be revised. Sarah Wixson recommended to the Board to go into a closed session per MCL 15.268; MCL 15.268(h); MCL 15.243(1); and MCL 15.243(g) to review and discuss Attorney written legal opinion of Conflict of Interest and strongly recommended that the Board, as fiduciaries of SWMBH, is bound to follow policies.

Motion Louie Csokasy moved to go into a closed session to discuss the written legal opinion from Sarah Wixson on Conflict of Interest.

Second Tom Schmelzer

Roll Call Vote

Tina Leary yes

Louie Csokasy yes
Lorraine Lindsey yes
Nancy Johnson yes
Tom Schmelzer yes
Erik Krogh yes
Carol Naccarato yes
Motion Carried

Board goes into closed session

Board returns to open session

Sherii Sherban and Carol Naccarato recuse themselves from the Pivotal and Summit Point Dispute Resolutions Step 3 discussions, deliberations, decisions and voting.

Neil Marchand, Miller Johnson Attorneys, referenced his materials found in the Board packet on behalf of Pivotal and Summit Pointe Dispute Resolutions, Steps 1, 2 and 3. Discussion followed.

Sarah Wixson recommended to the Board to go into a closed session to review and discuss Attorney Client privileged written legal opinion regarding Step 3 process pursuant to the same MCL citations referenced above.

Motion Nancy Johnson moved to go into a closed session to review and discuss Attorney Client privileged written legal opinion regarding Step 3 process from Sarah Wixson.

Second Tina Leary

Roll Call Vote

Tina Leary yes
Louie Csokasy no
Lorraine Lindsey yes
Tom Schmelzer yes
Erik Krogh yes
Nancy Johnson yes

Motion Carried

Board goes into closed session

Board returns to open session

Motion Tina Leary moved to request an extension from the CMH's and SWMBH Management to review all materials and additional supplements from any party submitted by the January Board meeting and make a decision on Step 3 by the February Board meeting.

Second Erik Krogh

Motioned Carried

Calendar Year 2025 Board Meeting Calendar

Tabled until the January 10th SWMBH Board Meeting.

Calendar Year 2025 Board Policy Calendar

Tabled until the January 10th SWMBH Board Meeting.

Holiday Luncheon

Tabled until the January 10th SWMBH Board Meeting.

Board Policy Review

BG-005 Chairperson’s Role

Tabled until the January 10th SWMBH Board Meeting.

EO-002 Monitoring Executive Officer Performance

Tabled until the January 10th SWMBH Board Meeting.

Executive Limitations Review

BEL-003 Asset Protection

Tabled until the January 10th SWMBH Board Meeting.

Board Education

Fiscal Year 2025 Year to Date Financial Statements

Tabled until the January 10th SWMBH Board Meeting.

Communication and Counsel to the Board

Fiscal Year 2024 Contract Vendor Summary

Tabled until the January 10th SWMBH Board Meeting.

Fiscal Year 2024 Customer Services Report

Tabled until the January 10th SWMBH Board Meeting.

Follow up task from the Board to the Operations Committee

Tabled until the January 10th SWMBH Board Meeting.

Ends Revisions and CMH Member Boards

Tabled until the January 10th SWMBH Board Meeting.

January Board Policy Direct Inspection

Tabled until the January 10th SWMBH Board Meeting.

Public Comment

Jeannie Goodrich stated she disagrees with SWMBH Board decision on Step 3 Dispute Resolution motion.

Adjournment

Motion Louie Csokasy moved to adjourn at 1:10 pm.

Second Lorraine Lindsey

Motion Carried

Date:	12/4/24
Time:	9:00 am-12:00 pm
Facilitator:	Jeannie
Minute Taker:	Cameron
Meeting Location:	SWMBH 5250 Lover Lane Click here to join the meeting

Present: Rich Thiemkey (Barry) John Ruddell (Woodlands) Brad Casemore (SWMBH)

Ric Compton (Riverwood) Jeff Patton (ISK) Mila Todd (SWMBH)
 Sue Germann (Pines BHS) Cameron Bullock (Pivotal) Garyl Guidry (SWMBH)
 Jeannie Goodrich (Summit) Debbie Hess (Van Buren)
 Guest(s): Amy Rottman, Richard Carpenter

Version: 11/4/24 updated by John based on CEO feedback

Agenda Topics:	Discussion Points:	Minutes:
1. Agenda Review & Adoption (d)		
2. Prior Minutes (d)		<ul style="list-style-type: none"> Minutes Approved
3. Rehmann Accounting Analysis 9:00-11:3		<ul style="list-style-type: none"> This meeting with Richard, was approved by CEO's and this step is for us to finalize needs, timeline, and next steps. Jeff provided introduction for Rehmann/Richard Revenue Projections- Phase One <ul style="list-style-type: none"> Help provide transparency, understanding to community, providers, and CMH's for understanding and next steps. 12-18 months of historical data 820 files - payment files, MDHHS to PIHP. More cost effective to have the post processed data files. Transmitted secure and ready to process. Data validation would be complete. Data analysis depending on how files are presented could take a weekend- hopefully.

		<ul style="list-style-type: none"> ○ Rehmann could also help do analysis of plan first lost revenues and can be useful in advocacy at the state level to recoup those costs. ○ Eligibility categories ○ data would be trended out to look at historical trends and matched to Milliman provided appendices. Can be provided for 2025 and 2026 if requested. ○ Helps identify correct funding buckets and expectations moving forward. ○ Deliverable: <ul style="list-style-type: none"> ▪ Estimate revenue FY 25 (and FY 26 if requested) by rate cell, and PIHP and CMH individual and aggregate. ▪ and show revenue and expense at each eligibility level. ▪ If data is received by 12/6/2024. Should have a report 12/18 Ops Comm meeting. ● Encounter Review - Phase Two <ul style="list-style-type: none"> ○ Data validation Process: Data from the CMH level doesn't always make it to the State data warehouse. Start with EQI file that is sent 3 times a year. Look at the file and review what SWMBH must ensure accuracy and how the state is categorizes that information. Historically, the state does not categorize the information correctly. ○ Drill down from the PIHP to the CMH's to ensure that the information is complete and accurate, is the same categories that the CMH's fall into the category data, match what the PIHP feels it falls into. This would help identify any
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		<p>difference and identify root causes of the discrepancies.</p> <ul style="list-style-type: none"> ○ Complete set of data analysis and trend it out for costs and utilization to identify outliers. Not only as individual CMHs, but also PIHP to other PIHPs. It helps with consistency and efficiency. ○ Would need to reprice all encounter data to be accurate. <ul style="list-style-type: none"> ● Deliverables; <ul style="list-style-type: none"> ○ PIHP and CMHs as a whole can give cost per service category, cost per consumer etc., Utilization by categories, ensure that all encounters that should be accounted for, are in the correct categories. Would come in a couple of different phases. Can use EQI information to do broad comparison based on that information ● Ric inquired if there was a way to help identify the reasoning for the low risk/geographic factor ratings SWMBH is currently facing. <ul style="list-style-type: none"> ○ Would possibly be something that can be discovered during phase two, and help identify areas that might be contributing to the lower risk factors ● Garyl asked what the difference is between the Milliman drive tool and what Rehmann is proposing. <ul style="list-style-type: none"> ○ Drive tool is incomplete or inaccurate and based on what encounters come through. ● Need: <ul style="list-style-type: none"> ○ 2023 EQI data full year ○ 2024 information should have been pulled 12/1, should be done by Christmas, but usually late, realistic would be January. ○ Full encounter reports as of 12/1 for FY2024 ○ Full encounter data detail at the CMH level.
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		<ul style="list-style-type: none"> • Expense side possible timeline <ul style="list-style-type: none"> ○ Data validation - a few (3-4 weeks (realistically end of January) May create a special meeting in January to start reviewing data. • Decision-making would-be operations: Ops would set priorities and task regional committees to dive into weeds and have couple CEOs in attendance. • Jeannie will present to SWMBH Board
<p>4. Eleos</p>		<ul style="list-style-type: none"> • Eleos will be paid in full by SWMBH, gf portions will be handled via SWMBH local. • Ok to sign Contracts- will come via DocuSign and from Dior
<p>5. Dashboard Data Discussion - Ric 11:30 - Noon</p>		<ul style="list-style-type: none"> • Caleb from Riverwood provided an overview of a PowerBi dashboard that is utilized there. • Ric presented the ability for Caleb to help assist CEOs/CMHs with getting these queries. • BAA's needed for collaboration: • Reach out to Caleb directly for support from internal IT
<p>6. Financials</p>		<ul style="list-style-type: none"> • Garyl Presented Financials • 4 are actual, and 4 are estimated • Estimated CMHs used the last 3 months, and estimated based on expenses which is a change from previous es • 24 million in revenues, and \$23.5 million in expense, admin of 2.6 million in admin • \$2.1 Million dollar deficit, projected out to be 25.8-million-year end deficit. ISF remaining as of now is 1.283 million. • Garyl stated that SWMBH is having Wakely is reproducing Milliman's data to see if the geographical factors etc. are accurate and provide an analysis to SWMBH region. • Garyl to review the missing \$36 million dollars in projected revenue. To follow up with Ops Comm prior to the board meeting.

		<ul style="list-style-type: none"> • Ops comm requesting cash flow analysis be provided to us regularly, Garyl to confer with Brad for permission.
		<ul style="list-style-type: none"> • No substantive update with PCE, Mila to get with Anne to chat with Brad and provide an update.
<p>6. Next Meeting December 18 Agenda:</p>		<ul style="list-style-type: none"> • Review of Rehmann Data - Richard Carpenter • PCE update - Brad/Mila • Cash Flow Update - Garyl



Board Finance Committee Meeting Minutes

November 1, 2024

SWMBH, 5250 Lovers Lane, Suite 200, Portage, MI 49002

1:00 pm-2:00 pm

Draft: 11/1/24

Members Present: Tom Schmelzer, Louie Csokasy, Carol Naccarato

Members Absent: None

SWMBH Staff Present: Garyl Guidry, Chief Financial Officer, SWMBH; Michelle Jacobs, Senior Operations Specialist & Rights Advisor, SWMBH

Review Agenda

Tom, Louie and Carol discussed/reviewed agenda and determined that the Board Finance Committee (BFC) Charter did not need to be reviewed and Board Policies listed would stay in the current process for review and not with BFC. Tom requested to review the check register monthly. Louie requested to review a cash flow analysis.

Central Topics

Review prior meeting minutes

Group approved minutes and determined that the minutes will be kept internal. Tom Schmelzer suggested verbiage that would go to the SWMBH Board. Garyl will draft that for BFC consideration.

Follow ups from prior meeting

None

Board Assignments, if any

None

Review SWMBH YTD financial statements

Garyl reviewed YTD financial statements noting revenue, expenses and projections for 2024. Garyl noted the following:

- Financials were submitted to Kristen Jordan of MDHHS
- Some legislators are aware of financial situation
- Statewide PIHP problem
- SWMBH and CMHs working on revenue maximization and expense reduction
- Reviewed project involving billing codes by CMHs

Group expressed interest in being “forward thinking” and asked what BFC can do to help. Discussion of offensive tactics/ideas.

Fiscal Year 2024 Closeout Calendar

Garyl reviewed closeout calendar dates as follows:

- 2/21/25 FSRs due from CMHs
- 2/24/25 through 2/28/25 SWMBH reviews and consolidates
- 3/3/25 financials submitted to Auditors
- 3/14/25 through 3/20/25 SWMBH receives audit
- 3/28/25 financials submitted to State

Group would like to meet on 3/28/25 prior to submission to State. Garyl will contact Auditors to see if they are available to meet.

Messaging to Board

Tom Schmelzer suggested verbiage that would go to the SWMBH Board. Garyl will draft that for BFC consideration.

Establish meeting dates for 2025 and December agenda

Group agreed to meet the first Friday of each month in 2025 except for April. April's meeting will occur on March 28 to review Financials and Audit before submission to the State and with Roslund Prestige if possible. Group agreed on December 6, 2024 agenda.

Adjournment

Meeting adjourned at 2:21pm

Southwest Michigan

BEHAVIORAL HEALTH

Board Regulatory Compliance Committee Meeting draft minutes

Members: Sherii Sherban, Louie Csokasy, Edward Meny

SWMBH Staff: Mila Todd, Michelle Jacobs

November 8, 2024

12:00 p.m. – 12:30 p.m. (or immediately following the SWMBH Board Meeting)

Air Zoo Aerospace & Science Museum

Draft: 11/8/24

1. Review Agenda

Motion Lorraine Lindey moved to approve the agenda as presented.

Seconded Edward Meny

Motion Carried

2. Minutes

Motion Edward Meny moved to approve the 10/11/24 minutes as presented.

Seconded Louie Csokasy

Motion Carried

3. Central Topics

- a. Committee reviewed Fiscal Year 2025 Compliance activities which included date of death and date of services after date of death data mining. Mila reviewed reasoning, results, and remediation. Discussion followed.
- b. Fiscal Year 2024 Medicaid Services Verification Report - Mila Todd noted that this report is a contractual obligation with audit tool(s) based on MDHHS technical requirement. This audit is the largest audit in the organization and is completed quarterly with a yearly submission due on December 31st.
- c. Meetings for 2025 – Group agreed to meet quarterly in 2025 starting in February after the Board meeting. Michelle Jacobs will send out calendars invites.
- d. Referral from the Office of Inspector General (OIG) – Mila Todd reviewed referral from the OIG regarding possible duplicate billing and request of SWMBH to validate data. SWMBH IT department is researching and developing solutions to report back to the OIG.
- e. Smart Suite Reports – Mila Todd stated that Smart Suite reports are being developed for Committee's review.

Next Meeting: February 14, 2025



**Southwest Michigan Behavioral Health Board Meetings
2025
Air Zoo Aerospace & Science Museum
6151 Portage Rd, Portage, MI 49002**

January 10, 2025 – 9:30am to 11:30am

February 14, 2025 – 9:30am to 11:30am

March 14, 2025 – 9:30am to 11:30pm

April 11, 2025 – 9:30am to 11:30am

*May 9, 2025 – 9:30am to 10:30am at to be determined

*May 9, 2025 – 10:30 to 3:00pm Board Planning Session at to be determined

June 13, 2025 – 9:30am to 11:30am

July 11, 2025 – 9:30am to 11:30am

August 8, 2025 – 9:30am to 11:30am

September 12, 2025 – 9:30am to 11:30am

October 10, 2025 – 9:30am to 11:30am

November 14, 2025 – 9:30am to 11:30am

December 12, 2025 – 9:30 am to 11:30am

*to be determined

All SWMBH Board Meetings are subject to the Open Meetings Act 1976 PA 267, MCL 15.261-15.275
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Southwest Michigan Behavioral Health Board Policy Review Calendar Year 2025

Policy Number	Policy Name	Board Review	Reviewer
Board Governance (Policy Review)			
BG001	Committee Structure	October	Board
BG002	Management Delegation	July	Board
BG003	Unity of Control	August	Board
BG004	Board Ends and Accomplishments	February	Board
BG005	Chairperson's Role	December	Board
BG006	Annual Board Planning	April	Board
BG007	Code of Conduct	February	Board
BG008	Board Member Job Description	September	Board
BG010	Board Committee Principles	April	Board
BG011	Governing Style	May	Board
Direct Inspection (Reports)			
BEL001	Budgeting	April	Board Finance Committee
BEL002	Financial Conditions	October	Board Finance Committee
BEL003	Asset Protection	December	Board Finance Committee
BEL004	Treatment of Staff	August	Lorraine Lindsey
BEL005	Treatment of Plan Members	September	Tina Leary
BEL006	Investments	April	Board Finance Committee
BEL007	Compensation and Benefits	August	Erik Krogh
BEL008	Communication and Counsel	September	Sherii Sherban
BEL009	Global Executive Constraints	July	Carol Naccarato
BEL010	RE 501 (c) (3) Representation	October	Ed Meny
Board-Staff Relationship (Policy Review)			
EO001	Executive Role & Job Description	September	Board
EO002	Monitoring Executive Officer Performance	November	Board
EO003	Emergency Executive Officer Succession	October	Board
V 10.15.24			
Board Approved			

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Southwest Michigan

BEHAVIORAL HEALTH

Section: Board Policy- Board Governance/ Management		Policy Number: BG-005	Pages: 2
Subject: Board Chair Role		Required By: Policy Governance	Accountability: SWMBH Board
Application: <input checked="" type="checkbox"/> SWMBH Governance Board <input type="checkbox"/> SWMBH EO			Required Reviewer: SWMBH Board
Effective Date: 12.20.2013	Last Review Date: 12.8.23	Past Review Dates: 11.14.14, 12.11.15, 12.9.16, 12.8.17,12.14.18, 12.13.19,12-11-20, 12.10.21, 12.9.22	

I. PURPOSE:

To establish the role of the Chair of the SWMBH Board.

II. POLICY:

It shall be the policy of the SWMBH Board to abide by its bylaws in the management of its business affairs. The Chair shall preside at all SWMBH Board meetings.

The Chair shall have the power to perform duties as may be assigned by the Regional Entity Board. If the Chair is absent or unable to perform his or her duties, the Vice Chair shall perform the Chair’s duties until the Regional Entity Board directs otherwise.

III. STANDARDS:

The Chair shall be a specially empowered member of the Board who shall be responsible for ensuring the integrity of the Board’s process and represents the Board to outside parties.

- a. The result of the Chair’s job is that the Board acts consistently with its own rules and those legitimately imposed upon it from outside the organization.
 - 1. Meeting discussion content will consist of issues that clearly belong to the Board to decide or to monitor according to Board policy.
 - 2. Information that is neither for monitoring Board or enterprise performance nor for Board decisions will be avoided or minimized.
 - 3. Deliberation will be fair, open, and thorough, but also timely and orderly.

- b. The authority of the Chair consists in making decisions that fall within topics covered by Board policies on Governance Process and Board-Management Delegation, with the exception of (i) employment or termination of the EO and (ii) areas where the Board specifically delegates portions of this authority to others. The Chair is authorized to use any reasonable interpretation of the provision in these policies.

- c. The Chair is empowered to preside over all SWMBH Board meetings with all the commonly accepted power of that position, such as agenda review, ruling, and recognizing.

- d. The Chair has no authority to make decisions about policies created by the Board within *Ends* and *Executive Limitations* policy areas. Therefore, the Chair has no authority to supervise or direct the EO.
- e. The Chair may represent the Board to outside parties in announcing Board-stated positions and in stating Chair decisions and interpretations within the area delegated to that role. The Chair may delegate this authority but remains accountable for its use.

* Verbatim from the Bylaws:

4.9 Special Meetings. Special meetings of the Regional Entity Board may be held at the call of the Chair of the Regional Entity Board or, in the Chair's absence, the Secretary, or by a simple majority of the Regional Entity Board members.

6.1 Officers. The Officers of the Regional Entity Board shall be the Chairperson, the Vice Chairperson, and the Secretary. Only Officers of the Regional Entity Board can speak to the press as representatives of the Regional Entity.

6.2 Appointment. Officers will be elected by a majority vote of the Regional Entity Board members, and must be a representative of the Participant's Board.

6.3 Term of Office. The term of office of Officers elected in 2013 shall be through March 30, 2014. Thereafter the term of office of Officers shall be annual April to March with annual April Officer elections. Election of Officers of the Regional Entity Board shall occur annually, or in case of vacancy.

6.5 Removal. The Regional Entity Board will be able to remove any Regional Entity Board Officer by a super majority (75% of attendees) vote of Regional Entity Board members present at a meeting where a quorum is present and shall constitute an authorized action of the Regional Entity Board.

6.6 Chair. The Chair shall preside at all Regional Entity Board meetings. The Chair shall have the power to perform duties as may be assigned by the Regional Entity Board. The Chair shall perform all duties incident to the office.

6.7 Vice Chair. The Vice Chair shall have the power to perform duties that may be assigned by the Chair or the Regional Entity Board. If the Chair is absent or unable to perform his or her duties, the Vice Chair shall perform the Chair's duties until the Regional Entity Board directs otherwise. The Vice Chair shall perform all duties incident to the office.

6.8 Secretary. The Secretary shall: (a) ensure that minutes of Regional Entity Board meetings are recorded; (b) be responsible for providing notice to each Regional Entity Board Member as required by law or these Bylaws; (c) be the custodian of the Regional Entity records; (d) keep a register of the names and addresses of each Officer and Regional Entity Board Member; (e) complete all required administrative filings required by the Regional Entity's legal structure; and (f) perform all duties incident to the office and other duties assigned by the Regional Entity Board.

Southwest Michigan

BEHAVIORAL HEALTH

Section: Board Policy – Executive Limitations		Policy Number: EO-002	Pages: 2
Subject: Monitoring of Executive Officer Performance		Required By: Policy Governance	Accountability: SWMBH Board
Application: <input type="checkbox"/> SWMBH Governance Board <input checked="" type="checkbox"/> SWMBH EO			Required Reviewer: SWMBH Board
Effective Date: 03.14.14	Last Review Date: 11.10.23	Past Review Dates: 07.11.2014, 03.13.15, 05.13.16 11.11.16, 11.10.17, 11.9.18, 10.11.19, 11.13.20, 11.12.21, 11.11.22	

I. PURPOSE:

To ensure Executive Officer performance is monitored and evaluated.

II. POLICY:

Monitoring Executive Officer, EO, performance is synonymous with monitoring organizational performance against Board policies on Ends and on Executive Limitations. Any evaluation of EO performance, formal or informal, may be derived from these monitoring data.

III. STANDARDS:

Accordingly,

1. The purpose of monitoring is to determine the degree to which Board policies are being fulfilled. Information that does not do this will not be considered to be monitoring.
2. A given policy may be monitored in one or more of three ways; with a balance of using all of the three types of monitoring:
 - a. Internal report: Disclosure of compliance information to the Board from the Executive Officer.
 - b. External report: Discovery of compliance information by a disinterested, external auditor, inspector or judge who is selected by and reports directly to the Board. Such reports must assess Executive Officer performance only against policies of the Board, not those of the external party unless the Board has previously indicated that party's opinion to be the standard.
 - c. Direct Board inspection: Discovery of compliance information by a Board Member, a Committee or the Board as a whole. This is a Board inspection of documents, activities or circumstances directed by the Board which allows a "prudent person" test of policy compliance.
3. Upon the choice of the Board, any policy can be monitored by any method at any time. For regular monitoring, however, each Ends and Executive Limitations policy will be classified by the Board according to frequency and method.
 - a. Internal

- b. External
 - c. Direct Inspection
4. Each November the Board will have a formal evaluation of the EO. This evaluation will consider monitoring data as defined here and as it has appeared over the calendar year.
 5. The Executive Committee, (Chair, Vice Chair, and Secretary), will take data and information from the bulleted documents below upon which the annual performance of the EO will be evaluated. The overall evaluation consists of compliance with Executive Limitations Policies, Ends Interpretation and Ends Monitoring reports and supporting documentation, (as per the Board developed schedule), and follow through on Board requests, (what we ask for in subsequent meetings and what we want to see on the agendas). For the performance review the following should be documents given the Executive Committee at least one month prior, (October), to the Board EO evaluation, (November).
 - Minutes of all meetings
 - Ends Monitoring reports for the past year along with the Ends Interpretation for each Ends Monitoring report
 - Any supporting Ends documentation
 - Ends Monitoring Calendar
 - Other policies monitoring calendar

Southwest Michigan

BEHAVIORAL HEALTH

Section: Board Policy- Executive Limitation		Policy Number: BEL-003	Pages: 2
Subject: Asset Protection		Required By: Policy Governance	Accountability: SWMBH Board
Application: <input type="checkbox"/> SWMBH Governance Board <input checked="" type="checkbox"/> SWMBH Executive Officer (EO)			Required Reviewer: SWMBH Board
Effective Date: 02.14.2014	Last Review Date: 12.8.23	Past Review Dates: 11.14.14, 12.11.15, 12.9.16, 12.8.17,12.14.18, 12.13.19, 12.11.20, 3/11/22, 12/9/22	

I. PURPOSE:

To establish a policy for asset protection, and financial risk management.

II. POLICY:

The Executive Officer shall not cause or allow corporate assets to be unprotected, inadequately maintained, or unnecessarily risked.

III. STANDARDS:

Additionally, the Executive Officer shall not;

1. Subject facilities and equipment to improper wear and tear or insufficient maintenance.
2. Fail to protect intellectual property, information and files from loss or significant damage.
3. Fail to insure adequately against theft and casualty and against liability losses to Board Members, Staff, and the Organization itself.
4. Compromise the independence of the Board’s audit or other external monitoring or advice, such as by engaging parties already chosen by the Board as consultants or advisers.
5. Endanger the Organization’s public image or credibility, particularly in ways that would hinder its accomplishment of mission.
6. Change the organization’s name or substantially alter its identity in the community.
7. Allow un-bonded personnel access to material amounts of funds.
8. Unnecessarily expose the Organization, its Board, or Staff to claims of liability.
9. Make any purchases:
 - i. Wherein normally prudent protection has not been given against conflict of interest

- ii. Inconsistent with federal and state regulations related to procurement using SWMBH funds.
 - iii. Of more than \$100,000 without having obtained comparative prices and quality
 - iv. Of more than \$100,000 without a stringent method of assuring the balance of long-term quality and cost.
 - v. Of split orders to avoid these criteria.
10. Receive, process, or disburse under controls that are insufficient to meet the Board-appointed auditor's standards.
11. Invest or hold operating capital and risk reserve funds in instruments that are not compliant with the requirements of Michigan Public Act 20.

**Executive Limitations
Monitoring to Assure Executive Performance
Board date December 13, 2024**

Policy Number: BEL-003
Policy Name: Asset Protection
Assigned Reviewer: Erik Krogh

Period under review: October 2023 – October 2024

Purpose: To establish a policy for asset protection, and financial risk management.

Policy: The Executive Officer shall not cause or allow corporate assets to be unprotected, inadequately maintained, or unnecessarily risked.

Standards: Accordingly, the EO may not.

1. Subject facilities and equipment to improper wear and tear or insufficient maintenance.

EO Response: As evidenced by an offer to walk-through the agency, facilities and equipment are not subjected to improper wear and tear or insufficient maintenance. SWMBH Operations Department performs regular direct and indirect surveillance and manages maintenance needs with housekeeping contractors and landlord as needed.

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

EO Response: No loss of or significant damage to intellectual property, information or files has occurred. SWMBH maintains locked doors and locked cabinets for storage of key business files, and electronic filing systems are log-in and password assigned by individual and are auditable. Laptop and other devices are configured to prohibit the capture of network information onto peripheral hard drives/thumb drives. SWMBH maintains an Information Technology policy and Employee Manual requirements related to proper use of intellectual property. Electronic files are backed up regularly and stored off-site. No loss of intellectual property, information or files has occurred as evidenced by the absence of related Incident Report, police or fire reports or related casualty-property insurance claims.

2. Fail to insure adequately against theft and casualty and against liability losses to board members, staff, and the organization itself.

EO Response: SWMBH has a comprehensive Officers and Directors and general liability Policy with Michigan Municipal Risk Management Association (MMRMA). The premium has been paid and the Policy is active.

3. Compromise the independence of the board's audit or other external monitoring or advice, such as by engaging parties already chosen by the board as consultants or advisers.

EO Response: SWMBH has not engaged any parties already chosen by the Board as consultants or advisers.

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

EO Response: No endangerment of the organization's public image or credibility has occurred as evidenced by no negative press per media scanning and no external or internal complaints related hereto. The SWMBH Business Continuity Plan makes clear that all media requests for comment other than general information regarding behavioral health services must be directed to the EO to ensure appropriate public image is maintained.

5. Change the organization's name or substantially alter its identity in the community.

EO Response: SWMBH has not changed the organization's name or substantially altered the SWMBH identity in the community.

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

EO Response: SWMBH staff are covered for their business activity under the MMRMA Policy. Management controls include segregation of duties. Bank accounts are reconciled by the finance department at least monthly to minimize risk of mismanagement or diversion of funds.

7. Unnecessarily expose the organization, its board, or staff to claims of liability.

EO Response: SWMBH has not exposed the organization, the Board, or staff to claims of liability as evidenced by the absence of liability claims against the organization, Board, or staff.

8. Make any purchases:

- i. Wherein normally prudent protection has not been given against conflict of interest
- ii. Inconsistent with federal and state regulations related to procurement using SWMBH funds.
- iii. Of more than \$100,000 without having obtained comparative prices and quality
- iv. Of more than \$100,000 without a stringent method of assuring the balance of long-term quality and cost.
- v. Orders should not be split to avoid these criteria.

EO Response: All purchases receive prudent protection against conflict of interest by virtue of multi-party review and approvals using a detailed process. All applicable purchases are subject to review by both Operations and Program Integrity-Compliance for alignment to federal and state regulations related to procurement. No purchase above \$100,000 has occurred during this time under review. Orders have not been split to avoid these criteria. Procurement policy and administrative files are available on-site upon request.

9. Receive, process, or disburse funds under controls that are insufficient to meet the board-appointed auditor's standards.

EO Response: SWMBH does not receive, process, or disburse funds under controls that are insufficient. The board-appointed auditor Roslund-Prestage had no findings in this area in its recent audit of SWMBH.

10. Invest or hold operating capital and risk reserve funds in instruments that are not compliant with the requirements of Michigan Public Act 20.

EO Response: Operating capital and risk reserve funds are held in instruments compliant with the requirements of Michigan Public Act 20 as well as the Board-approved Investment Policy.

We invite Mr. Krogh to set a call and or meeting with the CEO and/or CFO at his discretion.

Related Documents Provided:

SWMBH Investment Policy and Investment Placements Summary
Michigan Municipal Risk Management Authority Policy



MICHIGAN MUNICIPAL
RISK MANAGEMENT
A U T H O R I T Y

**BLANKET FAITHFUL PERFORMANCE BOND
CERTIFICATE OF PROTECTION**

KNOW ALL MEN BY THESE PRESENTS:

This certificate is issued as a matter of information only and confers no rights upon the certificate holder unless amended below.

This certifies that Southwest Michigan Behavioral Health as a member of this Authority

has Blanket Faithful Performance Bond Protection in the amount of One Million Dollars

(\$ 1,000,000.00).

**Blanket Faithful Performance
Description of Protection**

Fidelity

- (1) The Scope of Loss Fund Protection includes loss caused to the member by conversion to personal use or through the failure of any of the employees, acting alone or in collusion with others, to perform faithfully his duties or to account properly for all monies and property received by virtue of his position or employment during the period of membership in the Authority, the amount of indemnity of each of such employees being the amount indicated on the Limits of Liability.

Section 2

General Agreement-Loss Under Prior Bond

- (1) If the protection of this provision is substituted for any prior coverage carried by the member which prior bond is terminated, cancelled or allowed to expire as of the time of such substitution, the member agrees that such agreement applies to loss sustained by, or caused to, the member, as the case may be, prior to or during the bond period, provided that such loss is discovered after the beginning of the period of membership and that such loss would have been recoverable by the member under such prior bond except for the fact that the time within which to bring suit, action or proceeding of any kind thereunder had expired, and provided further:
 - (a) The indemnity afforded by this agreement shall be a part of and not in addition to the limit afforded above;
 - (b) Such loss would have been covered under such insuring agreement had such insuring agreement with its agreements, conditions and limitations as of the time of such substitutions been in force when the acts or defaults causing such loss were committed;
 - (c) Recovery under this agreement on account of such loss shall in no event exceed the amount which would have been recoverable under such insuring agreement in the amount for which it is written as of the time of such substitution, had such insuring agreement been in force when such acts or defaults were committed, or the amount which would have been recoverable under such prior bond had such prior bond continued in force until the discovery of such loss if the latter amount be smaller.

Section 3

Definitions

- (1) "Employee" means person while in the employ of the member during the period of membership.

Section 4

Conditions

- (1) In case a loss is alleged to have been caused to the member through acts or defaults by an employee and the member shall be unable to designate the specific employee causing such loss, the member shall nevertheless have the benefit of this provision provided that the evidence submitted reasonably establishes that the loss was in fact caused by an employee through such acts or defaults and provided, further, that regardless of the number of such employees concerned or implicated in such loss, the aggregate liability for any such loss shall not exceed the limit of liability.
- (2) The limit of liability shall not be cumulative from year to year.
- (3) This provision shall be deemed to be cancelled as to any employee:
 - (a) Immediately upon discovery by the member of any act on the part of such employee which would constitute a liability under this provision covering such employee; or
 - (b) Upon the death, resignation or removal of such employee; or
 - (c) Upon termination of membership in the Authority.

Should the member indicated below withdraw from the Authority prior to the expiration date shown, the Authority shall notify the certificate holder in writing thirty (30) days in advance of such withdrawal, but failure to mail such notice shall impose no obligation or liability of any kind upon the Authority.

Certificate Holder:

Southwest Michigan Behavioral Health

 5250 Lovers Lane, Suite 200

 Portage, MI 49002

Member:

Southwest Michigan Behavioral Health

 5250 Lovers Lane, Suite 200

 Portage, MI 49002

Expiration Date of Membership Continuous Until Cancelled

Date Issued: October 1, 2024



Authorized Representative

RISK

MICHIGAN MUNICIPAL
RISK MANAGEMENT
A U T H O R I T Y

CERTIFICATE OF COVERAGE

This certificate is issued as a matter of information only and confers no rights upon the certificate holder except to the extent shown below. This certificate does not amend, extend, or alter the coverage contained in the Authority's Joint Powers Agreement and coverage attachments thereto.

This is to certify that a Self-Insured Program has been undertaken by the member listed below through the Authority pursuant to Act 138 P.A. 1982.

The coverage provided by the Authority is as follows:

1. Liability coverage for general liability, automobile (including Michigan No-Fault), law enforcement, and public officials liability; in the sum of \$10,000,000 each occurrence inclusive of loss adjustment and defense costs.
2. Property Coverage including loss to real & personal property, to amounts stipulated in coverage documents and overview for this member.
3. Motor Vehicle Physical Damage Coverage for the vehicles stipulated in the Coverage Document.
4. Information only.
5. The entity named below is included in the scope of protection as respects claims arising from a COVERED CONTRACT as defined in the MMRMA Liability and Motor Vehicle Physical Damage Coverage Document.
6. Other (as described here): **COVERAGE ABOVE INCLUDES MEDICAL MALPRACTICE FOR NURSES; PUBLIC AND MENTAL HEALTH OPERATIONS AND FACILITIES; AND PARAMEDICS, EMERGENCY MEDICAL SERVICE TECHNICIANS, POLICE OR FIRE PERSONNEL ONLY FOR IMMEDIATE MEDICAL ASSISTANCE OR TREATMENT IN AN EMERGENCY SITUATION OR WHILE PARTICIPATING IN SCHEDULED TRAINING AS REQUIRED TO PERFORM WITHIN THE SCOPE OF THEIR OFFICIAL DUTIES. COVERAGE EXCLUDES THE RENDERING OR FAILURE TO RENDER PROFESSIONAL SERVICES BY A DENTIST OR PHYSICIAN EXCEPT FOR A CORONER OR MEDICAL EXAMINER OR THEIR DEPUTIES BY THOSE TITLES.**

This certificate is issued in accordance with and is subject to all provisions of the Joint Powers Agreement, Coverage Documents, reinsurance agreements, MMRMA rules, regulation and administrative procedures. Should the member identified below withdraw from the Authority, or its Authority Membership be otherwise terminated, the Authority shall endeavor to notify the certificate holder in writing thirty (30) days in advance thereof, but failure to furnish such notice shall impose no obligation or liability of any kind upon the Authority, or its representatives.

Certificate Holder:
TO WHOM IT MAY CONCERN

Member:
**SOUTHWEST MICHIGAN BEHAVIORAL
HEALTH
5250 LOVERS LANE, SUITE 200
PORTAGE, MI 49002**

Certificate Expiration Date: October 1, 2025
Date Issued: October 1, 2024

Member Number: # M0001669
Effective Date of Membership: October 1, 2013

Distribution:
**Garyl Guidry, Southwest Michigan Behavioral Health
MMRMA Underwriting**



Authorized Representative

CERTIFICATE OF NO FAULT SECURITY

7/01

STATE OF MICHIGAN

-NAME AND ADDRESS OF ORGANIZATION

MICHIGAN MUNICIPAL RISK MANAGEMENT AUTHORITY

14001 Merriman, Livonia, Michigan 48154

An authorized Michigan Self-Insurance Association certifies that it has accepted as a member pursuant to Act 138 P.A., 1982 the following Governmental entity.

Southwest MI Behavioral Health

NAME OF MEMBER

Covers all vehicles owned/leased by Member

PENALTY FOR OPERATION WITHOUT INSURANCE

Michigan Law (MCLA 500.3101) requires that the owner or registrant of a motor vehicle registered in this state must have insurance or other approved security for the payment of no-fault benefits on the vehicle at all times An owner or registrant who drives or permits a vehicle to be driven upon a public highway without proper insurance or other security is guilty of a misdemeanor.

An owner or registrant convicted of such a misdemeanor shall be fined not less than \$200.00 nor more than \$500.00, or imprisoned for not more than 1 year, or both.

A PERSON WHO SUPPLIES FALSE INFORMATION TO THE SECRETARY OF STATE OR WHO ISSUES OR USES AN INVALID CERTIFICATE OF INSURANCE IS GUILTY OF A MISDEMEANOR PUNISHABLE BY IMPRISONMENT FOR NOT MORE THAN 1 YEAR, OR A FINE OF NOT MORE THAN \$1,000, OR BOTH.

Member No. M0001669

Expiration Date Continuous Until Cancelled

MICHIGAN MUNICIPAL RISK MANAGEMENT AUTHORITY

By

Signature of Michael L. Flynn

EXECUTIVE DIRECTOR

on this

1st Day

October Month

2024 Year

WARNING: KEEP THIS CERTIFICATE IN YOUR VEHICLE AT ALL TIMES. If you fail to produce it upon a police officer's request, you will be responsible for a civil infraction.

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Member No. M0001669

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By

Signature of Michael L. Flynn

EXECUTIVE DIRECTOR

on this

1st Day

October Month

2024 Year

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	E	F	I	J	K
1	Southwest Michigan Behavioral Health				
2	For the Fiscal YTD Period Ended 9/30/2025		FY25 PIHP		
3	<i>(For Internal Management Purposes Only)</i>				
4					
		FY25 Budget	FY25 Actual as P02	FY 25 Projection	
6	REVENUE				
7	Contract Revenue				
16	Contract Revenue	318,934,780	52,099,415	312,596,491	
17	CMHSP Incentive Payments	419,357	109,604	657,627	
18	PIHP Incentive Payments	2,483,291	413,882	2,483,291	
19	Interest Income - Working Capital	1,222,315	201,120	1,206,719	
20	Interest Income - ISF Risk Reserve	-	56,860	341,161	
21	Local Funds Contributions	852,520	142,087	852,520	
22	Other Local Income			-	
23					
24	TOTAL REVENUE	323,912,264	53,022,968	318,137,808	
25					
26	EXPENSE				
27	Healthcare Cost				
28	Provider Claims Cost	23,023,897	3,274,492	19,646,950	
29	CMHP Subcontracts, net of 1st & 3rd party	263,904,801	43,560,503	261,363,020	
30	Insurance Provider Assessment Withhold (IPA)	3,746,326	490,121	2,940,725	
31	Medicaid Hospital Rate Adjustments	12,089,192	2,014,865	12,089,192	
33		-	-	-	
34	Total Healthcare Cost	302,764,215	49,339,981	296,039,886	
35	Medical Loss Ratio (HCC % of Revenue)	94.9%	94.7%	94.7%	
36					
37	Administrative Cost				
39	Administrative and Other Cost	12,805,756	1,410,106	8,460,636	
44	Delegated Managed Care Admin	24,714,174	4,121,321	24,727,923	
45	Apportioned Central Mgd Care Admin	(2,665,293)	(261,522)	(1,569,132)	
46					
47	Total Administrative Cost	34,854,637	5,269,904	31,619,427	
48	Admin Cost Ratio (MCA % of Total Cost)	10.3%	9.7%	9.7%	
49					
50	Local Funds Cost	852,520	142,087	852,520	
52					
53	TOTAL COST after apportionment	338,471,372	54,751,972	328,511,832	
54					
55	NET SURPLUS before settlement	(14,559,107)	(1,729,004)	(10,374,024)	
56	Net Surplus (Deficit) % of Revenue	-4.5%	-3.3%	-3.3%	
57					
58	Prior Year Savings Utilization				
61	ISF Risk Reserve Utilization	1,929,280	1,310,342	1,310,342	
62	CCBHC Supplemental Receivable (Payable)	3,813,725	-	-	
63	MDHHS Shared Risk Utilization	-	-	-	
66	NET SURPLUS (DEFICIT)	(8,816,103)	(418,662)	(9,063,683)	
67	<i>HMP & Autism is settled with Medicaid</i>				

	A	B	C	D	E
1	Southwest Michigan Behavioral Health				
2	For the Fiscal YTD Period Ended 9/30/2025			FY25 CCBHC	
3	<i>(For Internal Management Purposes Only)</i>				
4			<u>FY25 Budget</u>	<u>FY25 Actual as P02</u>	<u>FY 25 Projection</u>
5					
6	REVENUE				
16	Contract Revenue		94,989,631	15,596,350	93,578,100
17	CMHSP Incentive Payments		3,422,650	570,442	3,422,650
18					
19	TOTAL REVENUE		98,412,281	16,166,792	97,000,750
20					
21	EXPENSE				
22	Healthcare Cost				
23	CCBHC Subcontracts		82,461,854	12,455,823	74,734,939
24					
25	Total Healthcare Cost		82,461,854	12,455,823	74,734,939
26	Medical Loss Ratio (HCC % of Revenue)		83.8%	77.0%	77.0%
27					
28					
29	Administrative Cost				
30	Apportioned Central Mgd Care Admin		2,665,293	261,522	1,569,132
31					
32	Total Administrative Cost		2,665,293	261,522	1,569,132
33	Admin Cost Ratio (MCA % of Total Cost)		3.1%	2.1%	2.1%
34					
35	TOTAL COST		85,127,147	12,717,345	76,304,071
36					
37	NET SURPLUS before non MCA cost		13,285,134	3,449,446	20,696,679
38	Net Surplus (Deficit) % of Revenue		13.5%	21.3%	21.3%
39					
40	CCBHC Non Medicaid Cost		(10,261,247)	(2,053,691)	(12,322,147)
41					
42	CCBHC Net Surplus/(Deficit)		3,023,886	1,395,755	8,374,532
43					

	A	B	C	D	E	F	G	H	I	J	K	L
1	Southwest Michigan Behavioral Health											
2	MEDICAID Summary Income Statement											
3	For the Fiscal YTD Period Ended 11/30/2024											
4		Total Region	SWMBH Central	CMH Participants	Barry CMHA	Berrien CMHA	Pines Behavioral	Summit Pointe	Woodlands Behavioral ESTIMATE P02	Integrated Services of Kalamazoo	Pivotal of St. Joseph ESTIMATE P02	Van Buren MHA ESTIMATE P02
5												
6	Medicaid Specialty Services											
7	Contract Revenue	\$ 43,467,715	\$ 2,287,694	\$ 41,180,021	\$ 1,680,034	\$ 7,914,706	\$ 2,094,405	\$ 7,547,789	\$ 2,794,248	\$ 11,967,345	\$ 2,723,637	\$ 4,457,857
8	Budget v Actual	\$ (865,669)	\$ (2,338,747)	\$ 1,473,078	\$ (51,737)	\$ 371,191	\$ (66,211)	\$ 539,683	\$ 157,922	\$ (224,969)	\$ 34,736	\$ 712,463
9	% Variance - Fav / (Unfav)	-2.0%	-50.6%	3.7%	-3.0%	4.9%	-3.1%	7.7%	6.0%	-1.8%	1.3%	19.0%
10												
11	Healthcare Cost	\$ 40,300,490	\$ 1,086,474	\$ 39,214,016	\$ 1,249,307	\$ 6,877,034	\$ 1,700,081	\$ 6,838,160	\$ 2,732,055	\$ 12,231,453	\$ 2,678,097	\$ 4,907,828
12	Budget v Actual	\$ 2,330,711	\$ 1,278,800	\$ 1,051,911	\$ 61,959	\$ 528,095	\$ 242,347	\$ 56,754	\$ 240,484	\$ 874,046	\$ 353,873	\$ (1,305,648)
13	% Variance - Fav / (Unfav)	5.5%	54.1%	2.6%	4.7%	7.1%	12.5%	0.8%	8.1%	6.7%	11.7%	-36.2%
14	MLR	92.7%	47.5%	95.2%	74.4%	86.9%	81.2%	90.6%	97.8%	102.2%	98.3%	110.1%
15												
16	Managed Care Administration	\$ 4,455,611	\$ 837,069	\$ 3,618,543	\$ 194,481	\$ 765,904	\$ 98,769	\$ 772,181	\$ 203,294	\$ 855,426	\$ 290,280	\$ 438,208
17	Budget v Actual	\$ 576,268	\$ 486,325	\$ 89,944	\$ (81,270)	\$ (27,471)	\$ 34,925	\$ (41,957)	\$ 20,393	\$ 293,750	\$ (26,630)	\$ (81,797)
18	% Variance - Fav / (Unfav)	11.5%	36.7%	2.4%	-71.8%	-3.7%	26.1%	-5.7%	9.1%	25.6%	-10.1%	-23.0%
19	ACR	10.0%	1.9%	8.1%	13.5%	10.0%	5.5%	10.1%	6.9%	6.5%	9.8%	8.2%
20												
21	Total Contract Cost	\$ 44,756,102	\$ 1,923,543	\$ 42,832,559	\$ 1,443,789	\$ 7,642,938	\$ 1,798,850	\$ 7,610,341	\$ 2,935,349	\$ 13,086,879	\$ 2,968,377	\$ 5,346,036
22	Budget v Actual	\$ 2,906,979	\$ 1,765,125	\$ 1,141,854	\$ (19,311)	\$ 500,625	\$ 277,272	\$ 14,798	\$ 260,877	\$ 1,167,796	\$ 327,243	\$ (1,387,445)
23	Variance - Favorable / (Unfavorable)	6.1%	47.9%	2.6%	-1.4%	6.1%	13.4%	0.2%	8.2%	8.2%	9.9%	-35.0%
24												
25												
26	Net before Settlement	\$ (1,288,387)	\$ 364,152	\$ (1,652,538)	\$ 236,246	\$ 271,768	\$ 295,554	\$ (62,552)	\$ (141,101)	\$ (1,119,535)	\$ (244,739)	\$ (888,179)
27	Budget v Actual	\$ 2,041,310	\$ (573,623)	\$ 2,614,933	\$ (71,048)	\$ 871,816	\$ 211,061	\$ 554,481	\$ 418,799	\$ 942,827	\$ 361,979	\$ (674,982)
28	Variance - Favorable / (Unfavorable)	61.3%	-61.2%	61.3%	-23.1%	145.3%	249.8%	89.9%	74.8%	45.7%	59.7%	-316.6%
29	Note: HMP Savings can be applied to Medicaid cost savings or ISF											within +/- 2%
30	Date: 12/30/2024											>2% favorable
31												between -2&-4%
32												>4% unfavorable

	A	B	C	D	E	F	G	H	I	J	K	L
33	Southwest Michigan Behavioral Health											
34	HEALTHY MICHIGAN Summary Income Statement											
35	For the Fiscal YTD Period Ended 11/30/2024											
36		Total Region	SWMBH Central	CMH Participants	Barry CMHA	Berrien CMHA	Pines Behavioral	Summit Pointe	Woodlands Behavioral	Integrated Services of Kalamazoo	Pivotal of St. Joseph	Van Buren MHA
37		-	-	-	-	-	-	-	ESTIMATE P02	-	ESTIMATE P02	ESTIMATE P02
38	Healthy Michigan Plan (HMP)											
39	Contract Revenue	\$ 4,868,897	\$ 1,256,882	\$ 3,612,015	\$ 145,656	\$ 700,407	\$ 114,531	\$ 822,720	\$ 296,993	\$ 795,623	\$ 302,769	\$ 433,316
40	Budget v Actual	\$ (2,402,164)	\$ (861,440)	\$ (1,540,724)	\$ (104,804)	\$ (336,688)	\$ (113,000)	\$ (103,175)	\$ (78,750)	\$ (698,211)	\$ (74,788)	\$ (31,309)
41	% Variance - Fav / (Unfav)	-33.0%	-40.7%	-29.9%	-41.8%	-32.5%	-49.7%	-11.1%	-21.0%	-46.7%	-19.8%	-6.7%
42												
43	Healthcare Cost	\$ 5,636,961	\$ 1,357,648	\$ 4,279,313	\$ 166,690	\$ 821,822	\$ 55,510	\$ 852,461	\$ 586,980	\$ 871,583	\$ 341,055	\$ 583,212
44	Budget v Actual	\$ 437,042	\$ 1,094,164	\$ (657,121)	\$ (35,493)	\$ (273,004)	\$ 64,496	\$ 88,600	\$ (292,118)	\$ 1,302	\$ (58,531)	\$ (152,372)
45	% Variance - Fav / (Unfav)	7.2%	44.6%	-18.1%	-27.1%	-49.7%	53.7%	9.4%	-99.1%	0.1%	-20.7%	-35.4%
46	MLR	115.8%	108.0%	118.5%	114.4%	117.3%	48.5%	103.6%	197.6%	109.5%	112.6%	134.6%
47												
48	Managed Care Administration	\$ 618,381	\$ 115,604	\$ 502,778	\$ 47,519	\$ 124,692	\$ 10,361	\$ 129,920	\$ 29,268	\$ 60,957	\$ 40,772	\$ 59,289
49	Budget v Actual	\$ (44,763)	\$ 47,472	\$ (92,235)	\$ (36,464)	\$ (40,303)	\$ 7,758	\$ (6,806)	\$ (5,373)	\$ 14,840	\$ (5,853)	\$ (20,034)
50	% Variance - Fav / (Unfav)	-7.8%	29.1%	-22.5%	-329.8%	-47.8%	42.8%	-5.5%	-22.5%	19.6%	-16.8%	-51.0%
51	ACR	9.9%	1.8%	8.0%	22.2%	13.2%	15.7%	13.2%	4.7%	6.5%	10.7%	9.2%
52												
53	Total Contract Cost	\$ 6,255,342	\$ 1,473,252	\$ 4,782,091	\$ 214,209	\$ 946,514	\$ 65,871	\$ 982,381	\$ 616,248	\$ 932,540	\$ 381,827	\$ 642,501
54	Budget v Actual	\$ 6,647,621	\$ 2,614,887	\$ 4,032,734	\$ 142,252	\$ 633,207	\$ 138,125	\$ 1,064,175	\$ 318,757	\$ 948,682	\$ 317,442	\$ 470,095
55	% Variance - Fav / (Unfav)	5.9%	43.7%	-18.6%	-50.6%	-49.5%	52.3%	7.7%	-93.3%	1.7%	-20.3%	-36.7%
56												
57												
58	Net before Settlement	\$ (1,386,445)	\$ (216,370)	\$ (1,170,076)	\$ (68,553)	\$ (246,107)	\$ 48,660	\$ (159,661)	\$ (319,255)	\$ (136,916)	\$ (79,058)	\$ (209,185)
59	Budget v Actual	\$ (2,009,885)	\$ 280,195	\$ (2,290,081)	\$ (176,761)	\$ (649,995)	\$ (40,746)	\$ (21,381)	\$ (376,241)	\$ (682,069)	\$ (139,172)	\$ (203,715)
60	% Variance - Fav / (Unfav)	-322.4%	56.4%	-204.5%	-163.4%	-160.9%	-45.6%	-15.5%	-660.2%	-125.1%	-231.5%	-3724.5%
61	Note: HMP Savings can be applied to Medicaid cost savings or ISF											within +/- 2%
62												>2% favorable
63	Date: 12/30/2024											between -2&-4%
												>4% unfavorable

	E	F	H	J	K	M	N	P	Q	R	S
1	Southwest Michigan Behavioral Health			<i>Mos in Period</i>							
2	For the Fiscal YTD Period Ended 11/30/2024		P02FYTD24	2							
3	<i>(For Internal Management Purposes Only)</i>										
4	INCOME STATEMENT										
5		TOTAL	Medicaid Contract	Healthy Michigan Contract	Opioid Health Home Contract	CCBHC	MH Block Grant Contracts	SA Block Grant Contract	SA PA2 Funds Contract	SWMBH Central	
6	REVENUE										
18	Contract Revenue	65,680,900	43,358,111	4,868,897	249,669	15,596,350	83,381	1,160,413	364,079	-	
19	DHHS Incentive Payments	109,604	109,604	-	-	-	-	-	-	-	
21	Interest Income - Working Capital	201,120	-	-	-	-	-	-	-	-	201,120
22	Interest Income - ISF Risk Reserve	56,860	-	-	-	-	-	-	-	-	56,860
23	Local Funds Contributions	142,087	-	-	-	-	-	-	-	-	142,087
24	Other Local Income	-	-	-	-	-	-	-	-	-	-
25											
26	TOTAL REVENUE	66,190,571	43,467,715	4,868,897	249,669	15,596,350	83,381	1,160,413	364,079	400,066	
27											
28	EXPENSE										
29	Healthcare Cost										
30	Provider Claims Cost	3,274,679	727,318	1,226,684	101,823	-	4,037	1,041,352	173,279	-	
31	CMHP Subcontracts, net of 1st & 3rd party	56,016,326	39,214,016	4,279,313	-	12,455,823	-	67,174	-	-	
32	Insurance Provider Assessment Withhold (IPA)	490,121	359,156	130,964	-	-	-	-	-	-	
33	Medicaid Hospital Rate Adjustments	-	-	-	-	-	-	-	-	-	
34	MHL Cost in Excess of Medicare FFS Cost	-	191	-	-	-	-	-	-	-	
35											
36	Total Healthcare Cost	59,781,126	40,300,682	5,636,961	101,823	12,455,823	4,037	1,108,526	173,279	-	
37	Medical Loss Ratio (HCC % of Revenue)	90.9%	92.7%	115.8%	40.8%	79.9%	-	95.5%	47.6%	-	
38											
40	Purchased Professional Services	44,108	-	-	-	-	-	-	-	-	44,108
41	Administrative and Other Cost	1,365,998	-	-	-	-	79,344	26,518	-	-	1,258,414
43	Depreciation	-	-	-	-	-	-	-	-	-	-
44	Functional Cost Reclassification	-	-	-	-	-	-	-	-	-	-
45	Allocated Indirect Pooled Cost	(0)	-	-	-	-	-	-	-	-	1,722
46	Delegated Managed Care Admin	4,121,321	3,618,543	502,778	-	-	-	-	-	-	-
47	Apportioned Central Mgd Care Admin	0	837,069	115,604	2,138	261,522	1,751	25,370	-	-	(1,243,457)
48											
49	Total Administrative Cost	5,531,427	4,455,611	618,381	2,138	261,522	81,095	51,887.50	-	-	60,787
50	Admin Cost Ratio (MCA % of Total Cost)	8.5%	10.0%	9.9%	2.1%	2.1%	-	4.5%	0.0%	-	1.9%
51											
52	Local Funds Contribution	142,087	-	-	-	-	-	-	-	-	142,087
54											
55	TOTAL COST after apportionment	65,454,639	44,756,293	6,255,342	103,961	12,717,345	85,131	1,160,413	173,279	202,874	
56											
57	NET SURPLUS before settlement	735,931	(1,288,578)	(1,386,445)	145,708	2,879,005	(1,751)	-	190,800	197,192	
58	Net Surplus (Deficit) % of Revenue	1.1%	-3.0%	-28.5%	58.4%	18.5%	-2.1%	0.0%	52.4%	49.3%	
60	Prior Year Savings	-	-	-	-	-	-	-	-	-	
61	Change in PA2 Fund Balance	(190,800)	-	-	-	-	-	-	(190,800)	-	
62											
63	ISF Risk Reserve Abatement (Funding)	(56,860)	-	-	-	-	-	-	-	-	(56,860)
64	ISF Risk Reserve Deficit (Funding)	1,310,342	1,310,342	-	-	-	-	-	-	-	-
65	CCBHC Supplemental Receivable (Payable)	(1,335,198)	-	-	-	(1,335,198)	-	-	-	-	-
66	Settlement Receivable / (Payable)	(0)	(1,240,737)	1,386,445	(145,708)	-	-	-	-	-	-
67	NET SURPLUS (DEFICIT)	463,415	(1,218,974)	-	-	1,543,807	(1,751)	-	-	140,332	
68	<i>HMP & Autism is settled with Medicaid</i>										
69											
70	SUMMARY OF NET SURPLUS (DEFICIT)										
71	Prior Year Unspent Savings	-	-	-	-	-	-	-	-	-	
72	Current Year Savings	-	-	-	-	-	-	-	-	-	
73	Current Year Public Act 2 Fund Balance	-	-	-	-	-	-	-	-	-	
74	Local and Other Funds Surplus/(Deficit)	463,415	(1,218,974)	-	-	1,543,807	(1,751)	-	-	140,332	
75											
76	NET SURPLUS (DEFICIT)	463,415	(1,218,974)	-	-	1,543,807	(1,751)	-	-	140,332	

	F	G	H	I	J	K	L	M	N	O	P	Q	R
1	Southwest Michigan Behavioral Health												
2	For the Fiscal YTD Period Ended 11/30/2024												
3	(For Internal Management Purposes Only)												
4	ok												
5	ESTIMATE P02												
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75	ESTIMATE P02												

	F	G	H	I	J	K	L	M	N	O	P	Q	R	
1	Southwest Michigan Behavioral Health			<i>Mos in Period</i>										
2	For the Fiscal YTD Period Ended 11/30/2024			2										
3	(For Internal Management Purposes Only)			ok										
									ESTIMATE P02		ESTIMATE P02		ESTIMATE P02	
4	INCOME STATEMENT													
	Total SWMBH	SWMBH Central	CMH Participants	Barry CMHA	Berrien CMHA	Pines Behavioral	Summit Pointe	Woodlands Behavioral	Integrated Services of Kalamazoo	St Joseph CMHA	Van Buren MHA			
5														
76	Healthy Michigan Plan			HCC%	6.2%	7.8%	2.1%	7.9%	10.3%	11.5%	10.7%	8.9%		
77	Contract Revenue	4,868,897	1,256,882	3,612,015	145,656	700,407	114,531	822,720	296,993	795,623	302,769	433,316		
78	External Provider Cost	4,700,525	1,226,684	3,473,841	163,415	792,216	47,179	813,406	177,879	869,280	327,648	282,818		
80	Internal Program Cost	805,523	-	805,523	3,275	29,606	8,331	39,055	409,101	2,354	13,407	300,395		
81	SSI Reimb, 1st/3rd Party Cost Offset	(51)	-	(51)	-	-	-	-	-	(51)	-	-		
82	Insurance Provider Assessment Withhold (IPA)	130,964	130,964	-	-	-	-	-	-	-	-	-		
83	Total Healthcare Cost	5,636,961	1,357,648	4,279,313	166,690	821,822	55,510	852,461	586,980	871,583	341,055	583,212		
84	Medical Loss Ratio (HCC % of Revenue)	115.8%	108.0%	118.5%	114.4%	117.3%	48.5%	103.6%	197.6%	109.5%	112.6%	134.6%		
85														
86	Managed Care Administration	618,381	115,604	502,778	47,519	124,692	10,361	129,920	29,268	60,957	40,772	59,289		
87	Admin Cost Ratio (MCA % of Total Cost)	9.9%	1.8%	8.0%	22.2%	13.2%	15.7%	13.2%	4.7%	6.5%	10.7%	9.2%		
88														
89	Contract Cost	6,255,342	1,473,252	4,782,091	214,209	946,514	65,871	982,381	616,248	932,540	381,827	642,501		
90	Net before Settlement	(1,386,445)	(216,370)	(1,170,076)	(68,553)	(246,107)	48,660	(159,661)	(319,255)	(136,916)	(79,058)	(209,185)		
91														
92	Prior Year Savings	-	-	-	-	-	-	-	-	-	-	-		
93	Internal Service Fund Risk Reserve	-	-	-	-	-	-	-	-	-	-	-		
94	Contract Settlement / Redistribution	1,386,445	216,370	1,170,076	68,553	246,107	(48,660)	159,661	319,255	136,916	79,058	209,185		
95	Net after Settlement	(0)	(0)	-	-	-	-	-	-	-	-	-		
96														
97	Eligibles and PMPM													
98	Average Eligibles	54,569	54,569	54,569	2,604	11,357	2,661	10,387	3,234	15,512	4,098	4,717		
99	Revenue PMPM	\$ 44.61	\$ 11.52	\$ 33.10	\$ 27.97	\$ 30.84	\$ 21.52	\$ 39.60	\$ 45.92	\$ 25.65	\$ 36.94	\$ 45.93		
100	Expense PMPM	57.32	13.50	43.82	41.14	41.67	12.38	47.29	95.29	30.06	46.59	68.10		
101	Margin PMPM	\$ (12.70)	\$ (1.98)	\$ (10.72)	\$ (13.17)	\$ (10.84)	\$ 9.14	\$ (7.69)	\$ (49.37)	\$ (4.41)	\$ (9.65)	\$ (22.17)		
102														
103	Healthy Michigan Plan													
104	Budget v Actual													
105														
106	Eligible Lives (Average Eligibles)													
107	Actual	54,569	54,569	54,569	2,604	11,357	2,661	10,387	3,234	15,512	4,098	4,717		
108	Budget	66,175	66,175	66,175	3,411	13,229	3,209	12,205	3,854	18,971	5,038	6,258		
109	Variance - Favorable / (Unfavorable)	(11,606)	(11,606)	(11,606)	(808)	(1,872)	(549)	(1,818)	(621)	(3,459)	(940)	(1,541)		
110	% Variance - Fav / (Unfav)	-17.5%	-17.5%	-17.5%	-23.7%	-14.2%	-17.1%	-14.9%	-16.1%	-18.2%	-18.7%	-24.6%		
111														
112	Contract Revenue before settlement													
113	Actual	4,868,897	1,256,882	3,612,015	145,656	700,407	114,531	822,720	296,993	795,623	302,769	433,316		
114	Budget	7,271,062	2,118,322	5,152,739	250,460	1,037,095	227,531	925,895	375,743	1,493,834	377,557	464,625		
115	Variance - Favorable / (Unfavorable)	(2,402,164)	(861,440)	(1,540,724)	(104,804)	(336,688)	(113,000)	(103,175)	(78,750)	(698,211)	(74,788)	(31,309)		
116	% Variance - Fav / (Unfav)	-33.0%	-40.7%	-29.9%	-41.8%	-32.5%	-49.7%	-11.1%	-21.0%	-46.7%	-19.8%	-6.7%		
117														
118	Healthcare Cost													
119	Actual	5,636,961	1,357,648	4,279,313	166,690	821,822	55,510	852,461	586,980	871,583	341,055	583,212		
120	Budget	6,074,003	2,451,812	3,622,192	131,197	548,818	120,006	941,061	294,862	872,885	282,524	430,840		
121	Variance - Favorable / (Unfavorable)	437,042	1,094,164	(657,121)	(35,493)	(273,004)	64,496	88,600	(292,118)	1,302	(58,531)	(152,372)		
122	% Variance - Fav / (Unfav)	7.2%	44.6%	-18.1%	-27.1%	-49.7%	53.7%	9.4%	-99.1%	0.1%	-20.7%	-35.4%		
123														
124	Managed Care Administration													
125	Actual	618,381	115,604	502,778	47,519	124,692	10,361	129,920	29,268	60,957	40,772	59,289		
126	Budget	573,618	163,076	410,542	11,055	84,389	18,119	123,114	23,895	75,797	34,919	39,255		
127	Variance - Favorable / (Unfavorable)	(44,763)	47,472	(92,235)	(36,464)	(40,303)	7,758	(6,806)	(5,373)	14,840	(5,853)	(20,034)		
128	% Variance - Fav / (Unfav)	-7.8%	29.1%	-22.5%	-329.8%	-47.8%	42.8%	-5.5%	-22.5%	19.6%	-16.8%	-51.0%		
129														
130	Total Contract Cost													
131	Actual	6,255,342	1,473,252	4,782,091	214,209	946,514	65,871	982,381	616,248	932,540	381,827	642,501		
132	Budget	6,647,621	2,614,887	4,032,734	142,252	633,207	138,125	1,064,175	318,757	948,682	317,442	470,095		
133	Variance - Favorable / (Unfavorable)	392,279	1,141,636	(749,357)	(71,958)	(313,307)	72,254	81,794	(297,491)	16,142	(64,384)	(172,406)		
134	% Variance - Fav / (Unfav)	5.9%	43.7%	-18.6%	-50.6%	-49.5%	52.3%	7.7%	-93.3%	1.7%	-20.3%	-36.7%		
135														
136	Net before Settlement													
137	Actual	(1,386,445)	(216,370)	(1,170,076)	(68,553)	(246,107)	48,660	(159,661)	(319,255)	(136,916)	(79,058)	(209,185)		
138	Budget	623,440	(496,565)	1,120,005	108,208	403,888	89,406	(138,280)	56,986	545,153	60,114	(5,470)		
139	Variance - Favorable / (Unfavorable)	(2,009,885)	280,195	(2,290,081)	(176,761)	(649,995)	(40,746)	(21,381)	(376,241)	(682,069)	(139,172)	(203,715)		
140	% Variance - Fav / (Unfav)	-322.4%	56.4%	-204.5%	-163.4%	-160.9%	-45.6%	-15.5%	-660.2%	-125.1%	-231.5%	-3724.5%		
141														
142	Certified Community Behavioral Health Clin													
143	Contract Revenue	15,596,350	(223,094)	15,819,444	967,397	2,996,724	1,087,678	2,959,393	-	6,048,750	1,759,502	-		
			HCC%		0.0%	0.0%	0.0%	0.0%	0.0%	28.0%	21.6%	0.0%		

	F	G	H	I	J	K	L	M	N	O	P	Q	R
1	Southwest Michigan Behavioral Health												
2	For the Fiscal YTD Period Ended 11/30/2024												
3	(For Internal Management Purposes Only)												
			ok								ESTIMATE P02	ESTIMATE P02	ESTIMATE P02
4	INCOME STATEMENT												
5		Total SWMBH	SWMBH Central	CMH Participants	Barry CMHA	Berrien CMHA	Pines Behavioral	Summit Pointe	Woodlands Behavioral	Integrated Services of Kalamazoo	St Joseph CMHA	Van Buren MHA	
144													
145	External Provider Cost	4,246,551	-	4,246,551	-	-	-	-	-	4,246,551	-	-	-
146	Internal Program Cost	8,261,906	-	8,261,906	1,025,568	2,065,666	677,270	2,327,972	-	1,201,427	964,002	-	-
147	CCBHC General Fund Pass-through	-	-	-	-	-	-	-	-	-	-	-	-
148	SSI Reimb, 1st/3rd Party Cost Offset	(52,634)	-	(52,634)	-	-	(29,516)	-	-	-	(23,118)	-	-
150	Total Healthcare Cost	12,455,823	-	12,455,823	1,025,568	2,065,666	647,754	2,327,972	-	5,447,979	940,884	-	-
151	Medical Loss Ratio (HCC % of Revenue)	79.9%	0.0%	78.7%	106.0%	68.9%	59.6%	78.7%	0.0%	90.1%	53.5%	0.0%	-
152													
153	Managed Care Administration	261,522	261,522	-	-	-	-	-	-	-	-	-	-
154	Admin Cost Ratio (MCA % of Total Cost)	2.1%	2.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
155													
156	Contract Cost	12,717,345	261,522	12,455,823	1,025,568	2,065,666	647,754	2,327,972	-	5,447,979	940,884	-	-
157	Net before Settlement	2,879,005	(484,616)	3,363,621	(58,172)	931,059	439,924	631,421	-	600,772	818,618	-	-
158	PPS-1 Supplemental Payment Difference	(1,335,198)	-	(1,335,198)	(17,153)	(72,486)	(68,723)	(960,387)	-	278,130	(494,579)	-	-
159	Contract Settlement / Redistribution	1,543,807	(484,616)	2,028,423	(75,325)	858,573	371,201	(328,966)	-	878,901	324,039	-	-
160	Net after Settlement	1,543,807	(484,616)	2,028,423	(75,325)	858,573	371,201	(328,966)	-	878,901	324,039	-	-
161													
162													
181	SWMBH CMHP Subcontracts												
182	Subcontract Revenue	63,823,358	3,211,878	60,611,480	2,793,087	11,611,837	3,296,614	11,329,902	3,091,241	18,811,718	4,785,908	4,891,174	-
183	Incentive Payment Revenue	109,604	109,604	-	-	-	-	-	-	-	-	-	-
184	Contract Revenue	63,932,962	3,321,482	60,611,480	2,793,087	11,611,837	3,296,614	11,329,902	3,091,241	18,811,718	4,785,908	4,891,174	-
185													
186	External Provider Cost	45,497,569	1,954,001	43,543,567	1,216,465	7,538,832	1,710,169	7,162,897	2,350,759	16,977,140	2,893,099	3,694,205	-
187	Internal Program Cost	12,566,036	-	12,566,036	1,225,101	2,324,995	723,674	2,855,696	968,276	1,574,375	1,090,056	1,803,863	-
188	CCBHC General Fund Pass-through	-	-	-	-	-	-	-	-	-	-	-	-
189	SSI Reimb, 1st/3rd Party Cost Offset	(160,451)	-	(160,399)	-	(99,306)	(30,498)	-	-	(449)	(23,118)	(7,028)	-
190	Insurance Provider Assessment Withhold (IPA)	490,121	490,121	-	-	-	-	-	-	-	-	-	-
192	Total Healthcare Cost	58,393,274	2,444,122	55,949,204	2,441,566	9,764,521	2,403,346	10,018,594	3,319,035	18,551,066	3,960,036	5,491,040	-
193	Medical Loss Ratio (HCC % of Revenue)	91.3%	73.6%	92.3%	87.4%	84.1%	72.9%	88.4%	107.4%	98.6%	82.7%	112.3%	-
194													
195	Managed Care Administration	5,335,515	1,214,194	4,121,321	242,000	890,596	109,130	902,101	232,562	916,383	331,051	497,497	-
196	Admin Cost Ratio (MCA % of Total Cost)	8.4%	1.9%	6.5%	9.0%	8.4%	4.3%	8.3%	6.5%	4.7%	7.7%	8.3%	-
197													
198	Contract Cost	63,728,789	3,658,316	60,070,524	2,683,566	10,655,117	2,512,475	10,920,695	3,551,597	19,467,449	4,291,087	5,988,537	-
199	Net before Settlement	204,173	(336,834)	540,956	109,521	956,720	784,138	409,207	(460,356)	(655,731)	494,820	(1,097,364)	-
200													
201	Prior Year Savings	-	-	-	-	-	-	-	-	-	-	-	-
202	Internal Service Fund Risk Reserve	1,310,342	1,310,342	-	-	-	-	-	-	-	-	-	-
203	Contract Settlement	1,689,515	(2,676,906)	1,487,416	(184,846)	(98,147)	(412,937)	(738,173)	460,356	1,534,581	(170,782)	1,097,364	-
204	Net after Settlement	3,204,030	(1,703,398)	2,028,372	(75,325)	858,573	371,201	(328,966)	-	878,850	324,039	-	-
205													

SWMBH SERVICES ADMINISTRATIVE CONTRACTS

(October 2023-September 2024)

AUNALYTICS

Deliverables/Services	<ul style="list-style-type: none"> • Provides Data Center & Storage Services • Web Hosting • Cloud Computing Services • Network Infrastructure • VOIP • Wireless Communications • Hardware and Software Needs (with Helpdesk Support) • Related Project Management
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FY24 Expenditure: \$340,261 (FY23 Expenditure: \$377,216)

BAUCKHAM, SPARKS, THALL, SEEBER & KAUFMAN P.C.

Deliverables/Services	<ul style="list-style-type: none"> • Medicaid fair hearing counsel: Act as legal representation on behalf of SWMBH and participant CMHSP's for the Fair Hearing process • Perform tasks related to Fair Hearing preparation process: Record review, witness preparation and interviews • Hearing Summary preparation • Legal consultation related to Fair Hearing process
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FY24 Expenditure: \$3,993 (FY23 Expenditure: \$0)

BLUE FIRE MEDIA, INC

Deliverables/Services	<ul style="list-style-type: none"> • Supports the SWMBH public website
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FY24 Expenditure: \$1,640 (FY23 Expenditure: \$1,850)

CAPITOLINE CONSULTING

Deliverables/Services	<ul style="list-style-type: none"> • Consultation service on federal policy, regulations & funding opportunities • Secure materials and prepare briefs summarizing attended events
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FY24 Expenditure: \$12,000 (FY23 Expenditure: \$12,000)

CONTRACT PHYSICIANS

Deliverables/Services	<ul style="list-style-type: none"> • Program policy issue consultation • Service guideline consultation and review • Medical policy review and approval • SWMBH credentialing panel participant • Consultation provided to Member Services and Contractor Network Management as necessary • On-call Medical decisions with Utilization Management during non-business hours
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	<ul style="list-style-type: none"> BH Human Resource Management Committee consultant
	FY24 Expenditure: \$90,258 (FY23 Expenditure: \$103,015)
DOERSCHLER & ASSOCIATES	
Deliverables/Services	<ul style="list-style-type: none"> Fiduciary Advisors for retirement plans
	FY24 Expenditure: \$23,011 (FY23 Expenditure: \$28,682)
HEALTH MANAGEMENT ASSOCIATES	
Deliverables/Services	<ul style="list-style-type: none"> Technical assistance on emerging regulatory initiatives regarding population health management, duals, opioid health homes and data analytics
	FY24 Expenditure: \$11,163 (FY23 Expenditure: \$19,003)
LEADING EDGE MENTORING	
Deliverables/Services	<ul style="list-style-type: none"> Performs a preliminary assessment of SWMBH Board and management implementation.
	FY24 Expenditure: \$10,023 (FY23 Expenditure: \$12,693)
MORC, INC	
Deliverables/Services	<ul style="list-style-type: none"> Support intensity scale assessment training
	FY24 Expenditure: \$5,400 (FY23 Expenditure: \$6,420)
PHD CONSULTANTS/LIGHTHOUSE BEHAVIORAL HEALTH	
Deliverables/Services	<ul style="list-style-type: none"> Mental Health Parity project Clinical consultation and project management
	FY24 Expenditure: \$4,375 (FY23 Expenditure: \$10,000)
PREST AND ASSOCIATES	
Deliverables/Services	<ul style="list-style-type: none"> Health Plan professional independent review and consulting service Utilization reviews concerning medical necessity and/or medical appropriateness of treatment
	FY24 Expenditure: \$4,415 (FY23 Expenditure: \$1,463)
GRYPHON	
Deliverables/Services	<ul style="list-style-type: none"> After hours phone answering service for SUD phone lines
	FY24 Expenditure: \$158,950 (FY23 Expenditure: \$168,603)
QUEST ANALYTICS, LLC	
Deliverables/Services	<ul style="list-style-type: none"> Annual Software licensing cost To Provide Network Adequacy analysis
	FY24 Expenditure: \$8,545 (FY23 Expenditure: \$8,545)
RELIAS POPULATION HEALTH	
Deliverables/Services	<ul style="list-style-type: none"> Licensed proprietary healthcare data analytics solution Analyze data in order to determine opportunities for improving care and decreasing costs for SWMBH and CMHSPs

	<ul style="list-style-type: none"> Install and manage population health and case level user application
	FY24 Expenditure: \$175,137 (FY23 Expenditure: \$175,137)
ROSE ST ADVISORS/HRM INNOVATIONS, INC	
Deliverables/Services	<p>Provides support, direction and consultation in the area of Human Resources ensuring federal and state regulations and standards are met. Tasks include, but not limited to:</p> <ul style="list-style-type: none"> Cultural Insights Surveys Strategic leadership planning Human Resource Consulting Recruiting
	FY24 Expenditure: \$58,500 (FY23 Expenditure: \$70,583)
ROSLUND PRESTAGE & COMPANY, P.C	
Deliverables/Services	<ul style="list-style-type: none"> Financial, Compliance, and Single audit
	FY24 Expenditure: \$115,025(FY23 Expenditure: \$121,119)
STREAMLINE HEALTHCARE SOLUTIONS	
Deliverables/Services	<ul style="list-style-type: none"> Streamline Care Management System is a desktop application used to manage and pay external providers
	FY24 Expenditure: \$136,160 (FY23 Expenditure: \$152,319)
TBD SOLUTIONS LLC	
	<ul style="list-style-type: none"> Level of Care Data Analytics and Guidelines project Strategic Planning Support Internal Functional assessment of UM Call Center and Provider Network
	FY24 Expenditure: \$69,713 (FY23 Expenditure: \$58,225)
VARNUM LLP	
Deliverables/Services	<ul style="list-style-type: none"> General Counsel. Retirement plans and labor law legal consultation
	FY24 Expenditure: \$83,608 (FY23 Expenditure: \$89,641)
VOICES FOR HEALTH	
Deliverables/Services	<ul style="list-style-type: none"> Translation and Interpretation services
	FY24 Expenditure: \$5,876 (FY23 Expenditure: \$32,287)

Contract Services

FY 2024 Actual: \$1,318,052

FY 2023 Actual: \$1,448,880

Delta \$: -130,747

Delta %: -9.02



FY 24 Customer Service Annual Report

December 2024

Customer Service

Customer Service department duties include but not limited to:

- Welcome and orient members to services and benefits available, and the provider network
- Development and distribution of all written member materials and communications
- Member rights and responsibilities
- Processing grievance, appeals, and second opinions
- Track and report patterns of problems for the organization
- Member community resources and education
- Community events

SWMBH delegates Customer Service and Grievance and Appeals to the CMHSPs. This is outlined in the Memorandum of Understanding

SWMBH Customer Service has additional duties that include:

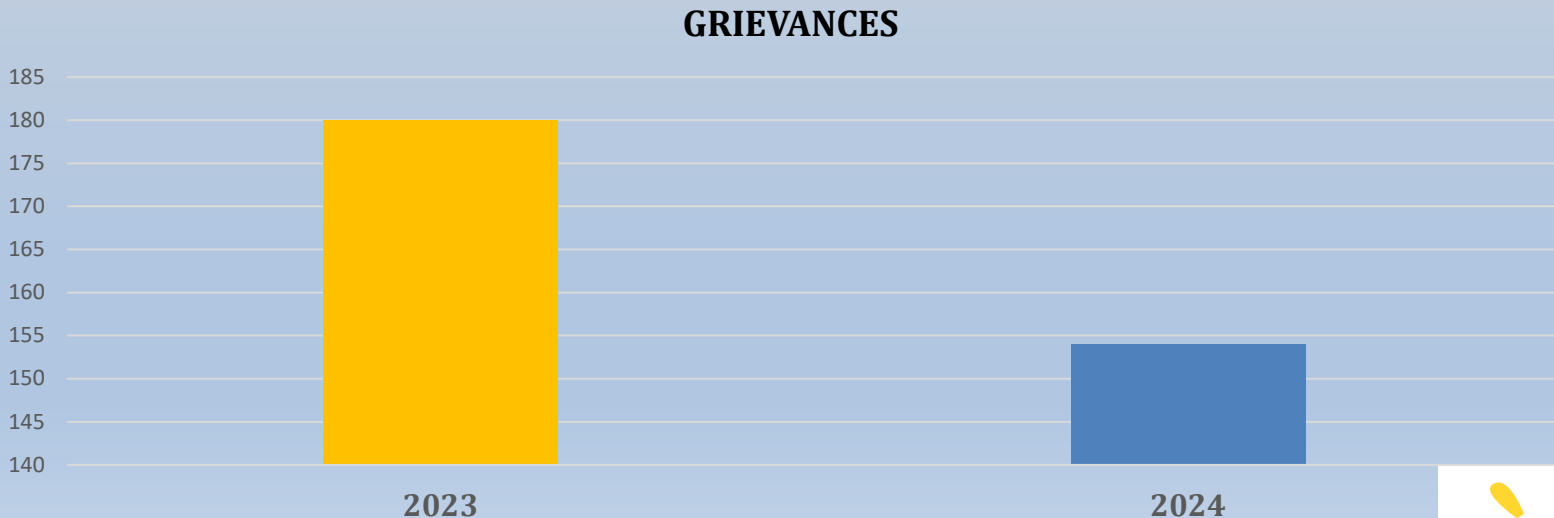
- Auditing and monitoring of delegated functions
- Updating and maintaining the member handbook
- State Fair hearing processing and handling



SWMBH and 8 affiliate CMH providers managed and/or provided oversight of **320** Medicaid Grievances and Appeals

MA/HMP Grievances reported: **154**
MA/HMP Local Appeals reported: **160**
MA/HMP Fair Hearings reported: **6**

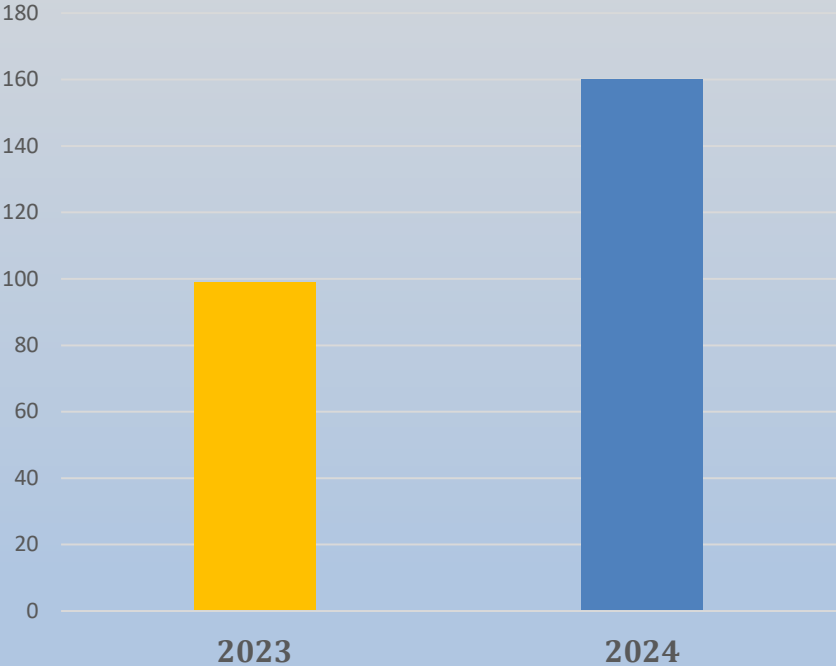
Grievance Trends Fiscal Years 2023 and 2024



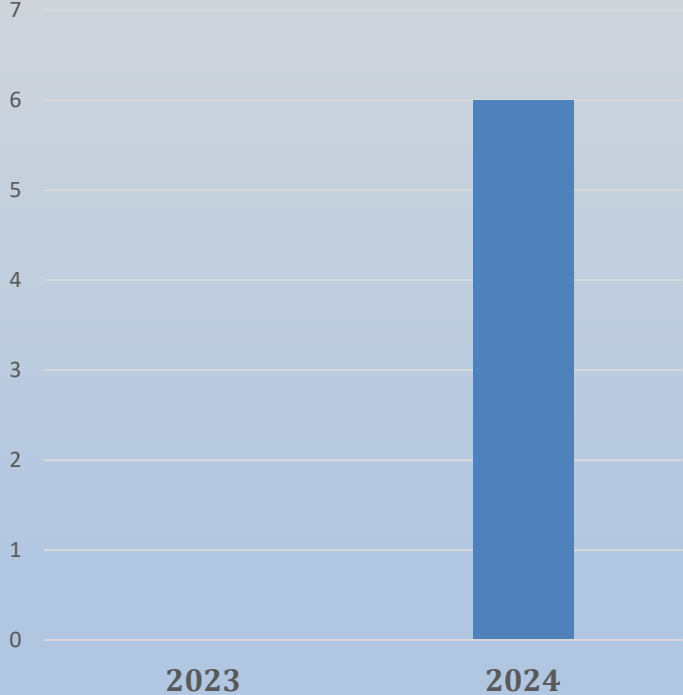
Appeal Trends

Fiscal Years 2023 and 2024

LOCAL LEVEL APPEALS



FAIR HEARING APPEALS





Questions?