



FINANCE COMMITTEE

February 19, 2021 – 8 a.m.

Zoom Virtual Meeting

<https://healthwest.zoom.us/j/98701703819>

Or by phone: (312) 626-6799, 98701703819#

Committee Chair: John Snider

Committee Vice-Chair: Janet Thomas

AGENDA

- | | | |
|----|--|-------------|
| 1. | Call to Order | Quorum |
| 2. | Approval of Minutes | |
| | Approval of the Minutes of January 15, 2021
(Attachment #1) | Action |
| 3. | Items for Consideration | |
| | A. Approval of Expenditures for January 2021
(Attachment #2) | Action |
| | B. Interim Balance Sheets of January 2021
(Attachment #3) | Information |
| | C. HealthWest Expenditures Financial Statement
(Attachment #4) | Information |
| | D. HealthWest Finance Update – Fees and Inpatient Summary
(Attachment #5) | Information |
| | E. HealthWest Budget Variance Analysis Report
(Attachment #6) | Information |
| | F. Month End Projection Trends
(Attachment #7) | Information |
| | G. Medicaid Eligibles Report
(Attachment #8) | Information |
| | H. Authorization to Process Payment for both Laserfiche and Bolt
Limited, Inc. for the Product, Service, and Support
(Attachment #9) | Action |

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|----|---|--------|
| I. | Authorization to Sign Amended Agreement with Mary Dumas for Continued Consultation and Support
(Attachment #10) | Action |
| J. | Authorization to Approve Trinity Investment Group, LLC and Blake Price to the list of Approved HUD Landlords
(Attachment #11) | Action |
| K. | Authorization to Sign a Lease Agreement with Red Snoot, LLC
(Attachment #12) | Action |
| L. | Authorization to Sign a Contract with Pathfinders for Trauma-Informed Education and Programming
(Attachment #13) | Action |
| M. | Authorization to Contract with Sevocity via Hackley Community Care for an EMR within the Muskegon County Jail
(Attachment #14) | Action |
| 4. | Old Business | |
| 5. | New Business | |
| 6. | Communications | |
| 7. | Director's Comments | |
| 8. | Audience Participation | |
| 9. | Adjournment | |

HEALTHWEST

FINANCE COMMITTEE MEETING MINUTES

Friday, January 15, 2021

8:00 a.m.

Zoom Virtual Meeting

CALL TO ORDER

The regular meeting of the Finance Committee was called to order by Chair Snider at 8:00 a.m.

ROLL CALL

Committee Members Present: John Snider (North Muskegon, Michigan), Janet Thomas (Muskegon, MI), Dr. Remington Sprague (Norton Shores, Michigan), Commissioner Marcia Hovey-Wright (Muskegon, Michigan), Commissioner Charles Nash (Muskegon, Michigan), Stephanie Umlor (Muskegon, Michigan), Jeff Fortenbacher (Muskegon, MI)

Committee Members Excused: Jason Coleman

Also Present: Brandy Carlson, Amber Berndt, Tami Strodtbeck, Julia Rupp, Kelly France, Susan Conrad, Wesley Woods, Cece Riley, Gary Ridley, Matt Plaska, Cyndi Blair

MINUTES

It was moved by Commissioner Hovey-Wright, seconded by Dr. Sprague, to approve the minutes of the December 11, 2020, meeting as written.

MOTION CARRIED.

ITEMS FOR CONSIDERATION

A. *Approval of Expenditures for December 2020*

It was moved by Commissioner Nash, seconded by Ms. Umlor, to approve expenditures for the month ending December 31, 2020, in the total amount of \$3,398,048.53.

MOTION CARRIED.

B. *Interim Balance Sheets of December 2020*

Ms. Carlson presented the Interim Balance Sheets of December 2020, noting that there was a negative cash balance of (\$2,663,819.79) for Fund 2220. Fund 7930 has a positive cash balance of \$483,635.96.

C. *HealthWest Expenditures Financial Statement*

Ms. Carlson presented the HealthWest Expenditure report for December 2020 which shows the estimated true variance to date of \$5,156,942. Expenditures are under budget to date.

D. Finance Update – Fees and Inpatient Summary

The Substance Abuse Fee Report has positive variance of \$178,923 through the month of December 2020. It should be noted that this variance report is based on the budget approved by the HealthWest Board during the month of August 2020.

The Other Fees Report has a positive total variance of 1,521,025 through the month of December 2020. The variance report is based on the budget approved by the HealthWest Board during the month of August 2020.

E. Budget Variance Analysis Report

Our expenditure budget variance, based on the budget approved by the HealthWest Board during the month of December 2020 is \$5,156,942. With contingencies for contractual services and COVID premium pay in the amount of \$3,688,931 has been recognized, this would leave HealthWest with a net variance of approximately \$2,532,095 after the third month of the fiscal year. Due to the different periods of the budget year that these variances are calculated, this would prorate out to a variance of approximately \$8,666,939.

However, this figure does not really give us a true picture of where we stand as we are not able to use the different funding sources (i.e., State GF and Medicaid, etc.) to offset each other's shortfalls. Therefore, a truer picture would be as follows:

Behavioral Health Traditional Medicaid	\$6,982,285
Behavioral Health Healthy Michigan	\$331,919
Autism	\$253,874
State General Fund	\$195,431
Substance Use Funds	\$903,430
TOTAL	\$8,666,939

F. Month End Projection Trends

Ms. Carlson presented the month-end projection trends for board member review.

G. Medicaid Eligibles by Program

The Medicaid Eligibles graphs were provided for review.

H. Authorization to Approve Meddie Ventures, LLC for HUD Grant Funding for FY 20/21

It was moved by Commissioner Nash, seconded by Commissioner Hovey-Wright, to approve the above landlord for the HUD grant funding for Fiscal Year 2021 in order to assure payment in a timely manner and avoid any potential delays causing consumers to miss out on available housing opportunities effective October 1, 2020.

MOTION CARRIED.

I. Authorization to Purchase Victory Sprayers and Solution from Beaver Research Company

It was moved by Commissioner Nash, seconded by Ms. Thomas, to authorize to purchase five

(5) handheld Victory Sprayers and disinfecting solution from Beaver Research Company in an amount not to exceed \$4,594.80 and funded with Covid Grant Dollars.

MOTION CARRIED.

J. Authorization to Provide Premium Pay to Direct Care Providers for January and February 2021

It was moved by Commissioner Nash, seconded by Dr. Sprague, to authorize HealthWest to provide Premium Pay to Direct Care Providers in the amount of \$2.00 per direct care staff hours worked and \$.24 per hour for administrative costs, not to exceed a total of \$633,000.00 for the months of January and February 2021.

MOTION CARRIED.

K. Authorization to Accept the Inpatient, Partial Hospitalization, and ECT Rates Negotiated by the LRE with Hospitals Listed in Attachment A

It was moved by Commissioner Nash, seconded by Ms. Thomas, to authorize HealthWest to accept the inpatient, partial hospitalization, and ECT rates negotiated by Lakeshore Regional Entity/Beacon Health Options with the hospitals listed on Attachment A, effective October 1, 2020 through September 30, 2021.

MOTION CARRIED.

L. Authorization to Sign a Single Case Agreement with Neurobehavioral Hospital

It was moved by Mr. Fortenbacher, seconded by Ms. Thomas, to authorize the HealthWest Executive Director to sign a Single Case Agreement with Neurobehavioral Hospital in the amount of \$20,985.00 for one HealthWest consumer psychiatric inpatient stay from December 1, 2020 to December 17, 2020 (16 days).

MOTION CARRIED.

M. Authorization to Sign a Single Case Agreement with Neurobehavioral Hospital

It was moved by Commissioner Hovey-Wright, seconded by Ms. Thomas, to authorize the HealthWest Executive Director to sign a Single Case Agreement with Neurobehavioral Hospital in the amount of \$18,375.00 for one HealthWest consumer psychiatric inpatient stay from December 9, 2020 to December 23, 2020 (14 days).

MOTION CARRIED.

N. Authorization to Accept the LEAD Muskegon County Grant and Approval to Meet All Requirements for the Grant

It was moved by Commissioner Hovey-Wright, seconded by Ms. Thomas, to authorize acceptance of the LEAD Muskegon County grant and approval to meet all requirements for the LEAD Muskegon County grant, funded by Michigan Department of Health & Human Services up to \$500,000.00 and effective January 1, 2021 through September 30, 2021.

MOTION CARRIED.

O. *Authorization to Accept the Post Overdose Rapid Response Grant Funded by the Community Foundation for Southeast Michigan*

It was moved by Commissioner Nash, seconded by Ms. Umlor, to authorize acceptance of the above grant to meet all requirements for the Post Overdose Rapid Response grant, funded by Community Foundation for Southeast Michigan up to \$200,000.00 and effective January 1, 2021 through September 30, 2021.

MOTION CARRIED.

P. *Authorization to Process Additional Costs Associated with the Cisco Phone Upgrade to Sentinel Technologies Inc.*

It was moved by Commissioner Hovey-Wright, seconded by Dr. Sprague, to authorize the HealthWest to process payment for the additional costs associated with the Cisco Phone system to Sentinel Technologies, Inc. in the amount of \$8,806 for a total project cost of \$157,546.

MOTION CARRIED.

Q. *Authorization to Purchase a 2020 Ford Transit Wagon with Necessary Covid-19 Upfit Kit and Funded by the MDHHS Pilot Program*

It was moved by Ms. Thomas, seconded by Ms. Umlor, to authorize HealthWest to purchase a 2020 Ford Transit Wagon with the necessary COVID-19 upfit kit from Gorno Ford, Inc. up to \$84,080 and to be funded by the MDHHS Pilot Program.

MOTION CARRIED.

OLD BUSINESS

There was no old business.

NEW BUSINESS

There was no new business.

COMMUNICATIONS

There were no communications.

DIRECTOR'S COMMENTS

Ms. Rupp briefly discussed the status of the LRE lawsuit. She also touched upon HealthWest's current workforce issues and whether or not the high turnover is related to Covid. There is much speculation that it is as the issue is statewide and being experienced by many of our colleagues as well. A discussion was had on how to bring our current workforce back into the buildings and where it makes sense to continue to allow staff to work from home. It will be difficult for some staff and it will likely result in some additional turnover. It is also expected that we will not be allowed to operate via telehealth after April 1st. We have been planning for this transition for several weeks now. The direct care supplemental wage increase is also set to expire, we're hopeful that the State will extend this to those workers as to not lose even more of our workforce.

Commissioner Nash inquired about doing something in person for our staff. Julia suggested they attend one of our all staff meetings that occur every Monday and Wednesday at 8:30.

Ms. Rupp noted that last fiscal year we ended in the black and are anticipating that again this year. One variable however is if we lose the ability to provide services via telehealth, another is that currently our revenue is increasing as the Medicaid eligible has been climbing. We do not want to count on that money as it will level off, however our front door is busier than ever, and we know that the impact of the pandemic will come AFTER the pandemic is over. We've also saved expenses because some of our providers closed their doors temporarily. We're trying to keep all of this in mind while planning moving forward as we don't expect these saving to be permeant and remain cautious. It is expected that the LRE will have a surplus from last fiscal year, they anticipate another surplus this fiscal year which is higher than what they're allowed to keep. We'd like for them to build their ISF so if we overspend, they're able to make us whole. The LRE is actively seeking another CEO and Julia is hopeful that Mr. Riley will stay involved to some extent.

Representative VanWoerkom is on a Covid panel that is making recommendations regarding local needs for Covid and is really representing mental health and is a very strong supporter of us.

Many of our intakes are new consumers, having never before been hospitalized and seen by CMH. We have a significant increase in SUD treatment needs as well and Julia believes this is a direct impact of Covid. We remain short on SUD providers and continue to have a wait list currently at Cherry Street. They are in need of therapists in order to provide the required substance us treatment and HealthWest has offered to assist with this by partnering with them to help eliminate the wait list.

Mr. Snider has been sitting on the committee interviewing LRE CEO candidates and noted that they have some well qualified candidates.

AUDIENCE PARTICIPATION

There was no audience participation.

ADJOURNMENT

There being no further business to come before the committee, the meeting adjourned at 9:02 a.m.

Respectfully,

John Snider
Committee Chair

JS/ab

PRELIMINARY MINUTES
To be approved at the Finance Meeting on
February 19, 2021

REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

COMMITTEE Finance Committee	BUDGETED X	NON-BUDGETED	PARTIALLY BUDGETED
REQUESTING DIVISION Administration	REQUEST DATE February 19, 2021	REQUESTOR SIGNATURE Brandy Carlson, Chief Financial Officer	
<u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u>			
<p>Expenditures for the month of January totaled \$4,103,449.05. Some unusual expenditures for the month include amounts of \$41,177.00 to Bolt LTD for annual Laserfiche licenses, \$76,806.95 to Fa-Ho-Lo Family for 2 months of specialized residential services, \$141,389.07 to Family Outreach Center for 3 months of SUD services, \$19,716.48 to KnowBe4 for 3-year security awareness training subscription, \$46,069.26 to Relias LLC for annual HealthWest learning system.</p>			
<u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u>			
<p>I move to approve expenditures for the month ending January 31, 2021, in the total amount of \$4,103,449.05.</p>			
COMMITTEE DATE	COMMITTEE APPROVAL _____ Yes _____ No _____ Other		
BOARD DATE	BOARD APPROVAL _____ Yes _____ No _____ Other		

CASH BALANCES IN THE TWO FUNDS FOR FY 2021

	MENTAL HEALTH	CMH CLIENT	TOTAL ALL
JANUARY, 2020	(\$13,281,169)	\$527,590	(\$12,753,579)
FEBRUARY, 2020	(\$12,811,445)	\$468,003	(\$12,343,442)
MARCH, 2020	(\$10,807,127)	\$425,723	(\$10,381,405)
APRIL, 2020	(\$11,524,479)	\$445,212	(\$11,079,267)
MAY, 2020	(\$10,735,704)	\$588,789	(\$10,146,915)
JUNE, 2020	(\$12,132,388)	\$578,252	(\$11,554,136)
JULY, 2020	(\$7,815,406)	\$624,215	(\$7,191,191)
AUGUST, 2020	(\$9,141,816)	\$371,975	(\$8,769,841)
SEPT. PRELIM., 2020	(\$9,695,962)	\$770,286	(\$8,925,675)
OCTOBER, 2020	(\$6,362,883)	\$500,392	(\$5,862,491)
NOVEMBER, 2020	(\$7,069,161)	\$684,808	(\$6,384,354)
DECEMBER, 2020	(\$2,663,820)	\$483,636	(\$2,180,184)
JANUARY, 2021	(\$2,387,436)	\$736,570	(\$1,650,865)

12-Feb-21 BC (Cash Balances in the Different Funds)

**COMMUNITY MENTAL HEALTH
INTERIM BALANCE SHEET 2220
MENTAL HEALTH
January 31, 2021**

ASSETS	THIS YEAR	LAST YEAR
Cash in Bank	(2,387,435.85)	(13,269,916.49)
Cash in Transit	-	-
Imprest (Petty) Cash	2,700.00	2,700.00
Due from Credit Cards	(23.17)	(153.30)
Accounts Receivable	443,301.80	40,340.74
Due From Other Funds	26,818.04	(61.88)
Prepaid Items	19,475.08	(4,929.73)
Due from other governments	(2,267,238.65)	5,313,272.45
Total Assets	<u>\$ (4,162,402.75)</u>	<u>\$ (7,918,748.21)</u>
LIABILITIES AND EQUITY		
Accounts Payable	\$ 918,718.41	\$ 449,823.56
Undistributed Receipts	(47,200.71)	14,181.73
HAB Supports Waiver	1,492,476.32	-
Medicaid Children's Waiver	58,007.01	(10,008.67)
Medicaid SED Waiver	38,561.18	(17,004.01)
State Advance	318,956.19	-
Capitation Medicaid	1,596,061.82	-
Medicaid - B3 Services	1,295,461.84	-
Accrued Wages and Fringes	143,491.00	155,998.00
Medicaid - Healthy Michigan	423,483.46	-
Medicaid - Autism	261,474.24	-
SA Federal Pass Thru	113,240.16	-
SA State Plan Medicaid	120,830.00	-
SA B3 Services	(31.23)	-
SA Healthy Michigan	277,303.86	-
SA State Disability Assistance	-	-
SA PA2 Dollars	-	-
Due to Federal	3,993.00	16,928.00
Unearned Revenue - Lilac St Donation	50,100.00	50,000.00
Total Liabilities and Equity	<u>\$ 7,064,926.55</u>	<u>\$ 659,918.61</u>
DEFERRED INFLOWS OF RESOURCES		
Deferred Medicaid fee for services and capitation	<u>\$ 11,886,709.74</u>	<u>\$ 12,230,868.64</u>
Fund Balance at beginning of year	(11,994,737.18)	(11,994,737.18)
Nonspendable FB-Prepays	26,495.04	
General Fund Reserve	-	-
SOC Reserve	-	-
**Total Fund Balance	<u>\$ (11,968,242.14)</u>	<u>\$ (11,994,737.18)</u>
TOTAL LIABILITIES, DEFERRED INFLOWS OF RESOURCES, AND FUND BALANCE	<u>\$ 6,983,394.15</u>	<u>\$ 896,050.07</u>
NET OF REVENUES VS EXPENDITURES	<u>\$ (11,145,796.90)</u>	<u>\$ (8,814,798.28)</u>
Transferred to County Equipment Revolving Account for:		
Mental Health Center Building (6660-0000-349220)	\$2,724,289.13	\$2,756,722.21
Future Equipment Purchases (6660-0000-349222)	\$20,444.18	\$20,444.18

**COMMUNITY MENTAL HEALTH
INTERIM BALANCE SHEET 7930
CMH CLIENT FUNDS
January 31, 2021**

ASSETS	THIS YEAR	LAST YEAR
Cash	\$ 736,570.43	\$ 508,080.98
Imprest Cash	\$ 10,151.36	\$ 6,568.80
Accounts Receivable	\$ 177.00	\$ 177.00
Due From Other Funds	\$ -	\$ -
Total Assets	<u>\$ 746,898.79</u>	<u>\$ 514,826.78</u>
 LIABILITIES AND EQUITY		
Accounts Payable	\$ 12,285.86	\$ -
Due to Other Funds	\$ 1,479.56	\$ -
Interest Payable	\$ 2,125.20	\$ 1,361.42
Undistributed Receipts	\$ 731,008.17	\$ 513,465.36
	<u>\$ 746,898.79</u>	<u>\$ 514,826.78</u>

HEALTHWEST
MEMORANDUM

DATE: February 19, 2021
TO: HealthWest Board Members
FROM: Brandy Carlson – Chief Financial Officer
SUBJECT: HealthWest Expenditure Report

Attached is the expenditure report compared to the Budget for FY2021. This is based on the budget approved by the HealthWest Board during the month of August 2020. As you can see, expenditures are under the budget to date. The following is a brief explanation of the main variances.

- M. SUD CONTRACTUAL SERVICES - Contractual SUD Services are less than anticipated based on the budget amendment.
- Q. MI ADULT INPATIENT – Inpatient services for MI Adult more less anticipated.
- V. DD SUPPORTS COORDINATION - Salary and fringe costs, building repairs and maintenance, less than anticipated.
- X. MI ADULT SUPPORTS COORDINATION – Salary and fringe costs, equipment Repair and Maintenance and Equipment Lease costs less than anticipated.
- Z. DD VOCATIONAL SERVICES – DD Skill Building services less than anticipated.
- AA. IN HOME SUPPORT SERVICES – DD Skill Building services are less than anticipated due to the pandemic.
- JJ. AUTISM SERVICES – Salary and fringes and Contractual service costs are less than anticipated due to the pandemic.
- LL. TRANSITION AGE TEAM – Salary and fringe costs less than anticipated.
- TT. INTAKE/CRISES INTERVENTION – Salary and fringe costs higher than anticipated.
- DDD.DD RESIDENTIAL – Specialized residential service costs are less than anticipated.
- EEE. MI ADULT RESIDENTIAL – Specialized residential service costs are less than anticipated.
- LLL. MANAGED CARE ADMINISTRATION – Contractual service costs higher than anticipated.

BC/ab

BUDGET COMPARISON SUMMARY REPORT FOR PERIOD ENDING 1/31/2021

	DEPARTMENT NAME	ANNUAL BUDGET	AVERAGE MONTHLY BUDGET	CURRENT MONTH EXPENDITURES	CURRENT YEAR-TO-DATE BUDGET	EXPENDITURES TO DATE	YEAR-TO-DATE VARIANCES
A.	JUSTICE AND MH COLLABORATION	\$406,827	\$33,902	\$32,510	\$135,608	\$117,361	\$18,247
B.	CCBHC GRANT	\$1,493,469	\$124,456	\$65,322	\$497,824	\$284,361	\$213,463
C.	COMMUNITY HEALTH INNOVATION	\$270,636	\$22,553	\$8,250	\$90,212	\$57,122	\$33,090
D.	YOUTH CRISIS RESIDENTIAL	\$0	\$0	\$0	\$0	\$4	(\$4)
E.	CONNECTING VETERANS-MUSKEGON CO. PROJECT	\$150,000	\$12,500	\$8,717	\$50,000	\$28,410	\$21,590
F.	WRAPAROUND SERVICES	\$874,917	\$72,910	\$70,991	\$291,640	\$282,639	\$9,001
G.	COURT COLLABORATION	\$529,492	\$44,124	\$31,936	\$176,496	\$126,545	\$49,951
H.	HUD SUPPORTED HOUSING GRANT	\$125,023	\$10,419	\$11,882	\$41,676	\$41,246	\$430
I.	HUD SUPPORTED HOUSING GRANT #2	\$20,123	\$1,677	\$0	\$6,708	\$665	\$6,043
J.	HUD SUPPORTED HOUSING GRANT #4	\$25,686	\$2,141	\$1,398	\$8,564	\$5,064	\$3,500
K.	HUD SUPPORTED HOUSING GRANT #3	\$25,707	\$2,142	\$0	\$8,568	\$0	\$8,568
L.	COMMUNITY BENEFIT/PREVENTION	\$329,711	\$27,476	\$15,166	\$109,904	\$69,359	\$40,545
M.	SUD CONTRACTUAL SERVICES	\$3,840,421	\$320,035	\$391,442	\$1,280,140	\$500,581	\$779,559
N.	SAMHSA INTEGRATED HEALTH CARE	\$114,145	\$9,512	\$9,189	\$38,048	\$35,370	\$2,678
O.	SUD INTERNAL SERVICES	\$755,607	\$62,967	\$34,937	\$251,868	\$136,856	\$115,012
P.	SYSTEM OF CARE GRANT	\$2,000,000	\$166,667	\$99,986	\$666,668	\$466,265	\$200,403
Q.	MI ADULT INPATIENT	\$1,837,765	\$153,147	\$20,821	\$612,588	\$39,679	\$572,909
R.	MI CHILD INPATIENT	\$661,000	\$55,083	\$0	\$220,332	\$0	\$220,332
S.	DD CLINIC	\$0	\$0	\$33,387	\$0	\$121,925	(\$121,925)
T.	VOCATIONAL SERVICES	\$468,299	\$39,025	\$28,660	\$156,100	\$111,121	\$44,979
U.	CLUB INTERACTIONS	\$671,869	\$55,989	\$34,299	\$223,956	\$165,218	\$58,738
V.	DD SUPPORTS COORDINATION	\$5,625,232	\$468,769	\$257,181	\$1,875,076	\$1,039,114	\$835,962
W.	HIGH INTENSITY SUPPORTS COORDINATION	\$987,777	\$82,315	\$45,760	\$329,260	\$186,401	\$142,859
X.	MI ADULT SUPPORTS COORDINATION	\$3,993,950	\$332,829	\$169,310	\$1,331,316	\$679,915	\$651,401
Y.	MI ADULT VOCATIONAL SERVICES	\$19,750	\$1,646	\$0	\$6,584	\$0	\$6,584
Z.	DD VOCATIONAL SERVICES	\$1,124,044	\$93,670	\$69,525	\$374,680	\$69,525	\$305,155
AA.	IN HOME SUPPORT SERVICES	\$2,529,178	\$210,765	\$4,210	\$843,060	\$47,664	\$795,396
BB.	CONSUMER RUN PROGRAM	\$114,315	\$9,526	\$10,114	\$38,104	\$48,600	(\$10,496)
CC.	DD RESPITE	\$296,250	\$24,688	\$0	\$98,752	\$36,956	\$61,796
DD.	HEALTH SERVICES	\$186,563	\$15,547	\$3,206	\$62,188	\$3,207	\$58,981
EE.	MI CHILD RESPITE	\$3,300	\$275	\$0	\$1,100	\$0	\$1,100
FF.	YOUTH BEHAVIORAL SUPPORT TEAM	\$238,424	\$19,869	\$21,907	\$79,476	\$71,122	\$8,354
GG.	JUVENILE JUSTICE TEAM	\$661,179	\$55,098	\$45,217	\$220,392	\$175,276	\$45,116
HH.	PEER SUPPORT SERVICES	\$236,457	\$19,705	\$14,211	\$78,820	\$46,936	\$31,884
II.	YOUTH COMMUNITY BASED SERVICES	\$2,147,291	\$178,941	\$155,993	\$715,764	\$593,647	\$122,117
JJ.	AUTISM PROGRAM	\$3,187,290	\$265,608	\$210,450	\$1,062,432	\$749,971	\$312,461
KK.	MI OUTPATIENT	\$583,199	\$48,600	\$26,175	\$194,400	\$66,942	\$127,458
LL.	TRANSITION AGE TEAM	\$1,337,132	\$111,428	\$62,857	\$445,712	\$257,434	\$188,278

MM.	NURSING	\$0	\$0	\$95,552	\$0	\$393,550	(\$393,550)
NN.	PSYCHIATRY	\$0	\$0	\$159,298	\$0	\$488,410	(\$488,410)
OO.	ACT	\$733,690	\$61,141	\$24,838	\$244,564	\$100,842	\$143,722
PP.	HOME BASED	\$1,349,800	\$112,483	\$66,657	\$449,932	\$277,088	\$172,844
QQ.	HOMELESS PROJECT	\$0	\$0	\$1,240	\$0	\$8,706	(\$8,706)
RR.	INFANT M.H. HOME BASED TEAM	\$740,862	\$61,739	\$36,973	\$246,956	\$141,339	\$105,617
SS.	DD OUTPATIENT	\$1,183,774	\$98,648	\$57,170	\$394,592	\$246,741	\$147,851
TT.	INTAKE/CRISES INTERVENTION	\$1,571,891	\$130,991	\$110,544	\$523,964	\$643,110	(\$119,146)
UU.	INTEGRATED HEALTH CLINIC	\$387,696	\$32,308	\$34,224	\$129,232	\$158,782	(\$29,550)
VV.	MI ADULT PARTIAL HOSPITALIZATION	\$43,612	\$3,634	\$0	\$14,536	\$0	\$14,536
WW.	ASSESSMENT INTAKE	\$1,496,208	\$124,684	\$101,141	\$498,736	\$378,757	\$119,979
XX.	YOUTH OUTPATIENT	\$108,792	\$9,066	\$16,975	\$36,264	\$65,142	(\$28,878)
YY.	INJECTION CLINIC	\$74,144	\$6,179	\$8,850	\$24,716	\$22,472	\$2,244
ZZ.	GROUP SERVICES	\$0	\$0	\$8,488	\$0	\$8,488	(\$8,488)
AAA.	HEALTHWEST CRISIS RESIDENTIAL	\$1,315,130	\$109,594	\$80,120	\$438,376	\$338,991	\$99,385
BBB.	CHILDREN'S WAIVER SERVICES	\$210,000	\$17,500	\$69	\$70,000	\$1,003	\$68,997
CCC.	MI CHILD RESIDENTIAL	\$46,133	\$3,844	\$0	\$15,376	\$0	\$15,376
DDD.	DD RESIDENTIAL	\$12,509,750	\$1,042,479	\$253,886	\$4,169,916	\$542,761	\$3,627,155
EEE.	MI ADULT RESIDENTIAL	\$3,009,235	\$250,770	\$338,553	\$1,003,080	\$359,067	\$644,013
FFF.	CLERICAL SERVICES	\$0	\$0	\$63,356	\$0	\$208,100	(\$208,100)
GGG.	LOBBY SERVICES	\$0	\$0	\$6,093	\$0	\$14,679	
HHH.	UTILIZATION MANAGEMENT	\$438,175	\$36,515	\$38,691	\$146,060	\$140,942	\$5,118
III.	NETWORK DEVELOPMENT	\$184,700	\$15,392	\$15,296	\$61,568	\$49,956	\$11,612
JJJ.	IS MANAGEMENT	\$363,474	\$30,290	\$145,128	\$121,160	\$323,157	(\$201,997)
KKK.	QI AND TRAINING	\$657,182	\$54,765	\$45,196	\$219,060	\$148,106	\$70,954
LLL.	MANAGED CARE ADMINISTRATION	\$2,206,401	\$183,867	\$278,493	\$735,468	\$951,549	(\$216,081)
MMM.	MANAGED CARE FINANCE	\$933,304	\$77,775	\$98,200	\$311,100	\$347,256	(\$36,156)
NNN.	CUSTOMER SERVICES	\$293,832	\$24,486	\$23,412	\$97,944	\$83,739	\$14,205
GRAND TOTAL		\$67,729,813	\$5,644,154	\$4,103,449	\$22,576,616	\$13,105,235	\$9,486,061

	DEPARTMENT NAME	CURRENT YEAR-TO-DATE BUDGET	EXPENDITURES TO DATE	YEAR-TO-DATE VARIANCES	PAYROLL LAG	CONTRACTURAL/ BILLING LAG	OTHER	ESTIMATED TRUE VARIANCE
A.	JUSTICE AND MH COLLABORATION	\$135,608	\$117,361	\$18,247	\$3,162	(\$21,409)		\$0
B.	CCBHC GRANT	\$497,824	\$284,361	\$213,463	\$7,667	(\$221,130)		(\$0)
C.	COMMUNITY HEALTH INNOVATION	\$90,212	\$57,122	\$33,090	\$3,470	(\$36,559)		\$0
D.	YOUTH CRISIS RESIDENTIAL	\$0	\$4	(\$4)			\$4	(\$0)
E.	CONNECTING VETERANS-MUSKEGON CO. PROJECT	\$50,000	\$28,410	\$21,590	\$785	(\$22,375)		(\$0)
F.	WRAPAROUND SERVICES	\$291,640	\$282,639	\$9,001	\$9,822	(\$18,823)		(\$0)
G.	COURT COLLABORATION	\$176,496	\$126,545	\$49,951	\$4,454	(\$54,404)		\$0
H.	HUD SUPPORTED HOUSING GRANT	\$41,676	\$41,246	\$430		(\$430)		(\$0)
I.	HUD SUPPORTED HOUSING GRANT #2	\$6,708	\$665	\$6,043		(\$6,043)		(\$0)
J.	HUD SUPPORTED HOUSING GRANT #4	\$8,564	\$5,064	\$3,500		(\$3,500)		\$0
K.	HUD SUPPORTED HOUSING GRANT #3	\$8,568	\$0	\$8,568		(\$8,568)		\$0
L.	COMMUNITY BENEFIT/PREVENTION	\$109,904	\$69,359	\$40,545	\$3,241	(\$43,786)		\$0
M.	SUD CONTRACTUAL SERVICES	\$1,280,140	\$500,581	\$779,559		(\$166,861)		\$612,698
N.	SAMHSA INTEGRATED HEALTH CARE	\$38,048	\$35,370	\$2,678	\$5,432	(\$8,111)		(\$0)
O.	SUD INTERNAL SERVICES	\$251,868	\$136,856	\$115,012	\$7,386	(\$122,398)		(\$0)
P.	SYSTEM OF CARE GRANT	\$666,668	\$466,265	\$200,403	\$18,254	(\$218,658)		(\$0)
Q.	MI ADULT INPATIENT	\$612,588	\$39,679	\$572,909		(\$13,226)		\$559,683
R.	MI CHILD INPATIENT	\$220,332	\$0	\$220,332		(\$220,332)		\$0
S.	DD CLINIC	\$0	\$121,925	(\$121,925)	\$5,300		\$116,625	(\$0)
T.	VOCATIONAL SERVICES	\$156,100	\$111,121	\$44,979	\$5,219	(\$50,198)		(\$0)
U.	CLUB INTERACTIONS	\$223,956	\$165,218	\$58,738	\$7,058	(\$65,796)		\$0
V.	DD SUPPORTS COORDINATION	\$1,875,076	\$1,039,114	\$835,962	\$42,410	(\$22,015)		\$856,357
W.	HIGH INTENSITY SUPPORTS COORDINATION	\$329,260	\$186,401	\$142,859	\$8,657	(\$151,516)		\$0
X.	MI ADULT SUPPORTS COORDINATION	\$1,331,316	\$679,915	\$651,401	\$30,087	(\$22,652)		\$658,837
Y.	MI ADULT VOCATIONAL SERVICES	\$6,584	\$0	\$6,584		(\$6,584)		\$0
Z.	DD VOCATIONAL SERVICES	\$374,680	\$69,525	\$305,155		(\$23,174)		\$281,981
AA.	IN HOME SUPPORT SERVICES	\$843,060	\$47,664	\$795,396		(\$15,889)		\$779,507
BB.	CONSUMER RUN PROGRAM	\$38,104	\$48,600	(\$10,496)			\$10,496	(\$0)
CC.	DD RESPITE	\$98,752	\$36,956	\$61,796		(\$61,796)		(\$0)
DD.	HEALTH SERVICES	\$62,188	\$3,207	\$58,981		(\$58,981)		(\$0)
EE.	MI CHILD RESPITE	\$1,100	\$0	\$1,100		(\$1,100)		\$0
FF.	YOUTH BEHAVIORAL SUPPORT TEAM	\$79,476	\$71,122	\$8,354	\$2,779	(\$11,132)		\$0
GG.	JUVENILE JUSTICE TEAM	\$220,392	\$175,276	\$45,116	\$7,296	(\$52,413)		(\$0)
HH.	PEER SUPPORT SERVICES	\$78,820	\$46,936	\$31,884	\$2,551	(\$34,435)		\$0
II.	YOUTH COMMUNITY BASED SERVICES	\$715,764	\$593,647	\$122,117	\$22,914	(\$145,031)		(\$0)
JJ.	AUTISM PROGRAM	\$1,062,432	\$749,971	\$312,461	\$23,479	(\$56,245)		\$279,695
KK.	MI OUTPATIENT	\$194,400	\$66,942	\$127,458	\$4,291	(\$131,749)		\$0
LL.	TRANSITION AGE TEAM	\$445,712	\$257,434	\$188,278	\$10,226	(\$4,245)		\$194,260
MM.	NURSING	\$0	\$393,550	(\$393,550)	\$35,953		\$357,598	\$0
NN.	PSYCHIATRY	\$0	\$488,410	(\$488,410)	\$32,558		\$455,853	\$0
OO.	ACT	\$244,564	\$100,842	\$143,722	\$7,229	(\$150,951)		\$0
PP.	HOME BASED	\$449,932	\$277,088	\$172,844	\$13,929	(\$186,773)		(\$0)
QQ.	HOMELESS PROJECT	\$0	\$8,706	(\$8,706)	\$0		\$8,706	(\$0)
RR.	INFANT M.H. HOME BASED TEAM	\$246,956	\$141,339	\$105,617	\$8,264	(\$113,882)		(\$0)
SS.	DD OUTPATIENT	\$394,592	\$246,741	\$147,851	\$12,787	(\$160,638)		\$0
TT.	INTAKE/CRISES INTERVENTION	\$523,964	\$643,110	(\$119,146)	\$17,500	(\$24,732)		(\$126,377)
UU.	INTEGRATED HEALTH CLINIC	\$129,232	\$158,782	(\$29,550)	\$2,076		\$27,474	(\$0)
VV.	MI ADULT PARTIAL HOSPITALIZATION	\$14,536	\$0	\$14,536		(\$14,536)		\$0
WW.	ASSESSMENT INTAKE	\$498,736	\$378,757	\$119,979	\$17,151	(\$137,131)		(\$0)
XX.	YOUTH OUTPATIENT	\$36,264	\$65,142	(\$28,878)	\$1,327		\$27,551	\$0
YY.	INJECTION CLINIC	\$24,716	\$22,472	\$2,244	\$745	(\$2,988)		\$0

ZZ.	GROUP SERVICES	\$0	\$8,488	(\$8,488)	\$0		\$8,488	\$0
AAA.	HEALTHWEST CRISIS RESIDENTIAL	\$438,376	\$338,991	\$99,385	\$12,257	(\$111,643)		(\$0)
BBB.	CHILDREN'S WAIVER SERVICES	\$70,000	\$1,003	\$68,997		(\$68,997)		\$0
CCC.	MI CHILD RESIDENTIAL	\$15,376	\$0	\$15,376		(\$15,376)		\$0
DDD.	DD RESIDENTIAL	\$4,169,916	\$542,761	\$3,627,155		(\$1,223,400)		\$2,403,755
EEE.	MI ADULT RESIDENTIAL	\$1,003,080	\$359,067	\$644,013		(\$370,462)		\$273,551
FFF.	CLERICAL SERVICES	\$0	\$208,100	(\$208,100)	\$11,236		\$196,864	\$0
GGG.	LOBBY SERVICES	\$0	\$14,679	(\$14,679)			\$14,679	(\$0)
HHH.	UTILIZATION MANAGEMENT	\$146,060	\$140,942	\$5,118	\$5,550	(\$10,669)		(\$0)
III.	NETWORK DEVELOPMENT	\$61,568	\$49,956	\$11,612	\$3,559	(\$15,171)		(\$0)
JJJ.	IS MANAGEMENT	\$121,160	\$323,157	(\$201,997)	\$9,823		\$192,175	\$0
KKK.	QI AND TRAINING	\$219,060	\$148,106	\$70,954	\$9,912	(\$80,866)		\$0
LLL.	MANAGED CARE ADMINISTRATION	\$735,468	\$951,549	(\$216,081)	\$16,722	(\$269,121)		(\$468,480)
MMM.	MANAGED CARE FINANCE	\$311,100	\$347,256	(\$36,156)	\$17,680		\$18,477	\$0
NNN.	CUSTOMER SERVICES	\$97,944	\$83,739	\$14,205	\$3,589	(\$17,794)		\$0
GRAND TOTAL		\$22,576,616	\$13,105,235	\$9,471,381	\$475,788	(\$5,076,694)	\$1,434,990	\$6,305,466

HEALTHWEST
MEMORANDUM

DATE: February 19, 2020
TO: HealthWest Board Members
FROM: Brandy Carlson, Chief Financial Officer
SUBJECT: Finance Update – Fees

1. Substance Abuse Fees Report

Below is a summary of the Substance Abuse Fee Report for revenues for Fiscal Year 2021. It should be noted that this variance report is based on the budget approved by the HealthWest Board during the month of August 2020.

<u>Item</u>	<u>Budget</u>	<u>Actual</u>	<u>Variance</u>
Federal Pass Through	319,257	-0-	(319,257)
State Plan Medicaid	458,658	556,980	98,322
B3 Services	-0-	(38)	(38)
Healthy Michigan	612,430	1,256,125	643,695
State Disability Assistance	9,175	-0-	(9,175)
PA 2	92,375	-0-	(92,375)
State Opioid Response Grant	68,637	-0-	(68,637)
Third Party Fees	4,650	399	(4,251)
Total	1,565,182	1,813,466	248,284

2. All Other Fees Report

Below is a summary of the Fee Report for revenues received for Fiscal Year 2021. It should be noted that this variance report is based on the budget approved by the HealthWest Board during the month of August 2020.

<u>Item</u>	<u>Budget</u>	<u>Actual</u>	<u>Variance</u>
Medicaid-State Plan	8,034,711	7,789,051	(245,659)
HAB Supports Waiver	2,400,122	2,910,698	510,576
Medicaid – b3 Services	5,042,710	6,136,100	1,093,390
Medicaid Healthy Michigan	1,369,093	2,017,167	648,073
Autism	847,260	1,597,635	750,375
Children's Waiver	156,547	142,161	(14,386)
SED Waiver	84,581	97,717	13,136
Third Party Fees	259,551	26,424	(233,128)
Total	18,194,575	20,716,953	2,522,378

BC/ab

HEALTHWEST**MEMORANDUM**

DATE: February 19, 2021
TO: HealthWest Board Members
FROM: Brandy Carlson – Chief Financial Officer
SUBJECT: Budget Variance Analysis Report

Attached is the Budget Variance Analysis Report for local programs for FY2021. Please be aware that this is based on the budget approved by the HealthWest Board during the month of August 2020.

Following is a discussion of some of these variances:

- MH Fee Collections – During the month of January, Mental Health Capitated payments continue to come in higher than anticipated due to a rate increase from MDHHS and increased Medicaid eligible individuals.
- Other Revenues Differential – During the month of January, journal entries posted revenue received from the holding account to the appropriate departments continues to lag due to year end. As the audits come to a close within the next month, it is my anticipation that these entries will be brought up to date.
- Salary & Fringes – During the month of January, HealthWest continued to see another month of positive variance. As of February 16th, HealthWest has 140 positions posted or in process of posting. Since, since October 1st, HealthWest has filled 57 with 10 in the process of being filled.
- Contractual Services – Claims adjudication continues to be slightly behind however, FY20 is now closed and only claims for FY21 are being processed. I continue to record a contingency until claims are completely caught up.

Our expenditure budget variance based on the budget approved by the HealthWest Board during the month of January 2021 is \$6,305,466. With contingencies for contractual services and COVID premium pay in the amount of \$4,705,369 has been recognized, this would leave HealthWest with a net variance of approximately 3,232,132 after the fourth month of the fiscal year. Due to the different periods of the budget year that these variances are calculated, this would prorate out to a variance of approximately \$8,565,031.

However, this figure does not really give us a true picture of where we stand as we are not able to use the different funding sources (i.e., State GF and Medicaid, etc.) to offset each other's shortfalls. Therefore, a truer picture would be as follows:

Behavioral Health Traditional Medicaid	\$7,215,570
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Behavioral Health Healthy Michigan	\$ 350,580
Autism	\$ 191,042
State General Fund	\$ 195,229
Substance Use Funds	\$ 612,609
TOTAL	\$8,565,030

BC/ab

BUDGETED VARIANCE ANALYSIS REPORT
FOR THE MONTH ENDING JANUARY 2021

ITEM	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	TOTALS
REVENUES													
MH FEE COLLECTIONS *	(\$1,284,705)	\$2,629,507	\$344,654.25	\$1,066,049									\$2,755,505
SUD FEE COLLECTIONS*	(\$390,896)	\$509,638	\$63,268.00	\$70,525									\$252,535
COMMERCIAL INSURANCE	(\$38,657)	(\$66,814)	(\$66,050.81)	(\$65,858)									(\$237,379)
OTHER REVENUES DIFFERENTIAL	(\$46,697)	(\$354,769)	(\$208,899)	(\$457,268)									(\$1,067,633)
OTHER CMH BOARDS DIFFERENTIAL **	\$0	\$0	(\$25,496)	(\$25,496)									(\$50,992)
OTHER ALLOCATION ADJUSTMENTS-STATE GRANT *	\$0	\$0	\$0	\$0									\$0
TOTAL REVENUES VARIANCE	(\$1,760,955)	\$2,717,562	\$107,476	\$587,952	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,652,035
EXPENDITURES													
SALARY AND FRINGES	\$714,348	\$620,284	(\$55,073)	\$380,630									\$1,660,189
RENT AND O & M ADJUSTMENTS:													
OTHER	\$34,079	\$58,467	\$832	(\$73,344)									\$20,034
OVERHEAD	\$26,133	\$103,556	(\$98,784)	(\$1,680)									\$29,225
UTILITIES	\$1,328	\$14,992	\$6,334	(\$28,653)									(\$5,999)
NET BUILDING ADJUSTMENTS	\$61,539	\$177,015	(\$91,618)	(\$103,676)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$49,259
OTHER													
CONTRACTUAL SERVICES	\$475,881	\$2,006,373	\$1,823,523	\$1,089,182									\$5,394,959
SUPPLIES	(\$2,509)	\$14,422	(\$9,899)	(\$71,438)									(\$69,423)
GENERAL LIABILITY/INSURANCE COSTS ***	\$0	\$0	\$0	\$0									\$0
PLANNING ADJUSTMENTS	(\$185,354)	(\$185,354)	(\$185,354)	(\$185,354)									(\$741,416)
STAFF DEVELOPMENT AND TRAINING	\$7,808	(\$7,997)	\$1,561	\$10,526									\$11,898
TRANSFERS	\$0	\$0	\$0	\$0									\$0
TOTAL OTHER	\$295,826	\$1,827,443	\$1,629,832	\$842,916	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$4,596,017
TOTAL EXPENDITURES VARIANCE	\$1,071,713	\$2,624,742	\$1,483,141	\$1,119,870	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$6,305,466
NET BUDGET VARIANCE	(\$689,242)	\$5,342,305	\$1,590,617	\$1,707,822	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$7,957,501

OTHER ANTICIPATED CONTINGENCIES	EST. COST
Contractual Services	(\$4,534,733)
Covid Premium Pay	(\$190,636)
TOTAL CONTINGENCIES *	(\$4,725,369)

*THESE SIX VARIANCES SHOULD BE BASED ON 1ST 12 MONTHS ONLY.

\$4,668,228 \$14,004,685

**THESE SIX VARIANCES SHOULD BE BASED ON LAST 12 MONTHS ONLY.

(\$1,029,787) (\$4,119,148)

***THIS IS AN ANNUAL ADJUSTMENT

\$0 \$0

ALL OTHERS SHOULD BE BASED ON 13 MONTHS.

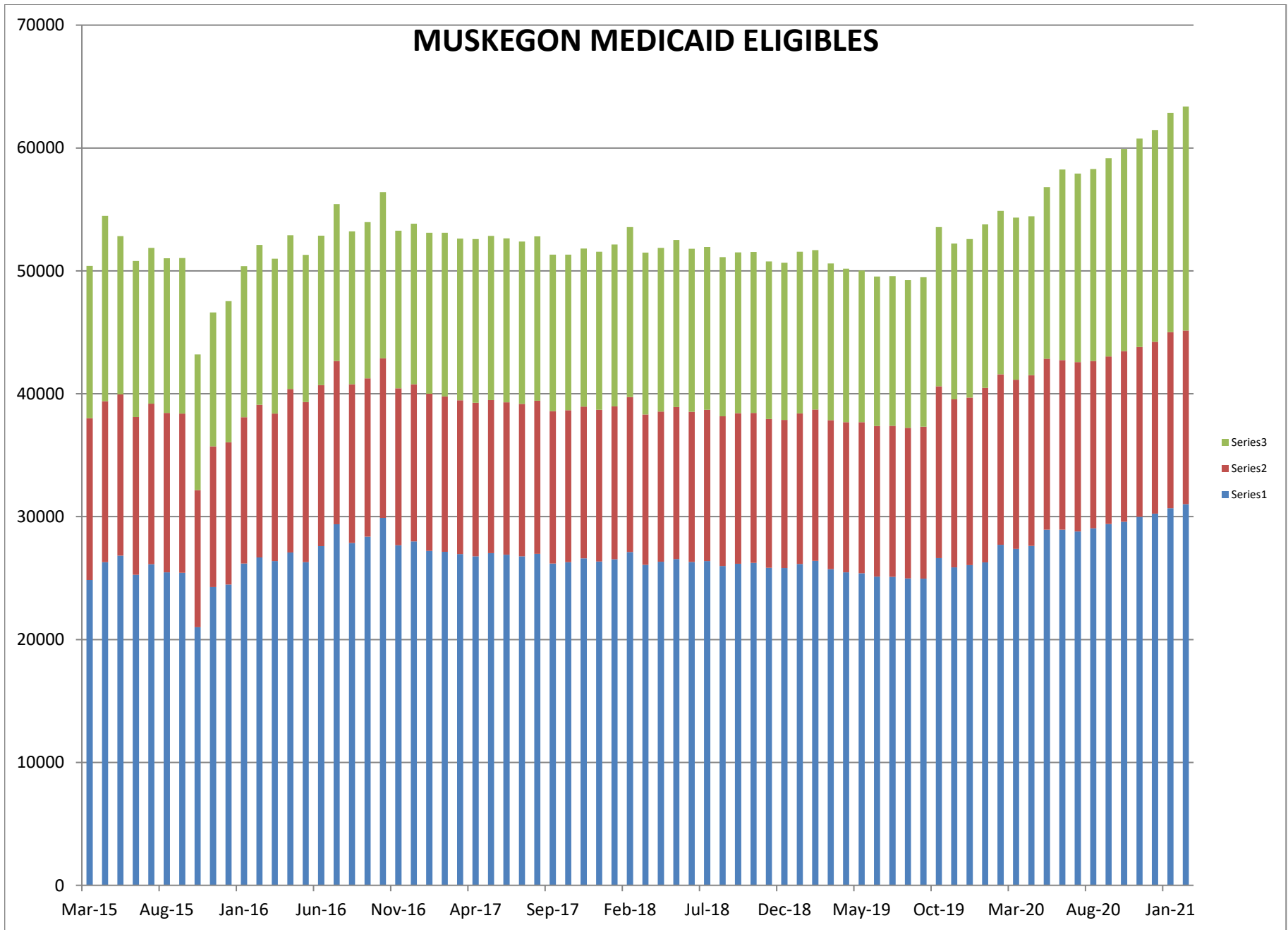
(\$406,310) (\$1,320,507)

\$3,232,132 \$8,565,031

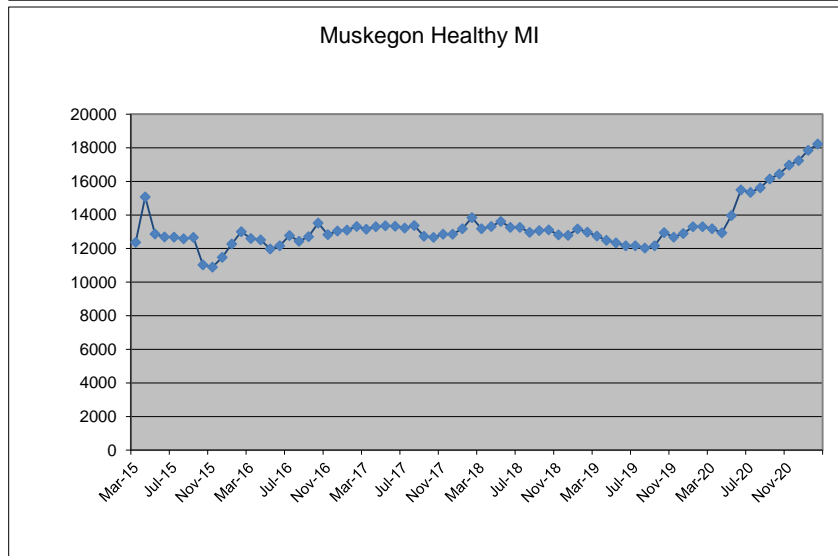
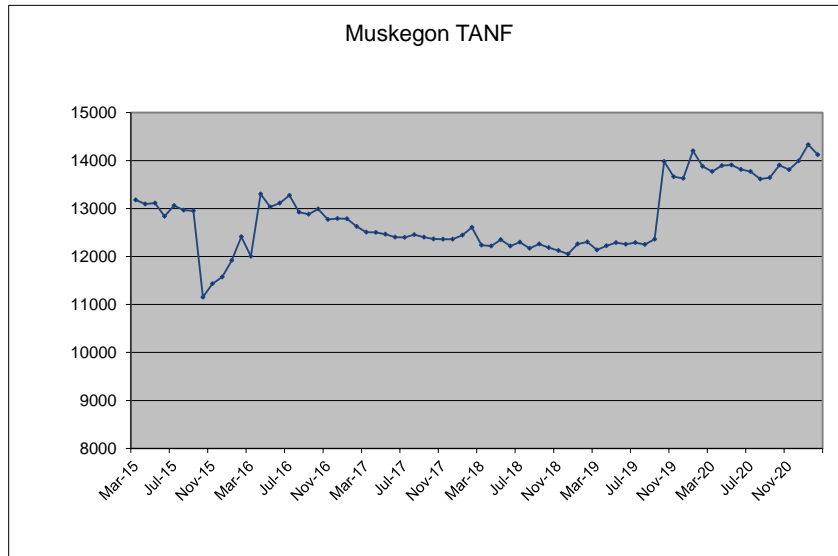
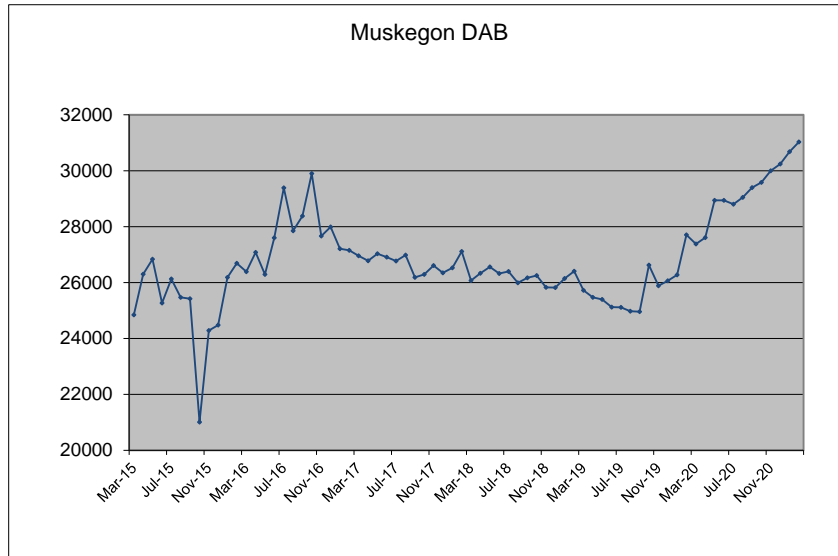
MONTH END PROJECTIONS OF DEFICITS/SURPLUSES BY FUND SOURCE FOR FY 2021

ITEM	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER PRELIMINARY
STATE PLAN MA	N/A	\$4,441,561	\$2,810,494	\$2,845,095								
CHILDREN'S WAIVER	N/A	(\$202,057)	\$97,142	\$102,629								
SED WAIVER	N/A	(\$155,828)	\$6,556	\$6,329								
HAB SUPPORTS WAIVER	N/A	\$1,784,992	\$1,551,293	\$1,610,079								
B3 SERVICES	N/A	\$5,597,722	\$2,516,800	\$2,651,438								
SUBTOTAL TRADITIONAL MEDICAID	\$0	\$11,466,390	\$6,982,286	\$7,215,570	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
HEALTHY MICHIGAN	N/A	\$1,002,574	\$331,919	\$350,580								
AUTISM	N/A	(\$1,015,882)	\$253,874	\$191,042								
STATE GENERAL FUND	N/A	\$81,586	\$195,431	\$195,229								
NET SURPLUS/(DEFICIT)	\$0	\$11,534,667	\$7,763,509	\$7,952,422	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
OTHER FUNDING SOURCES *												
SUD REVENUES:												
-BLOCK GRANT	N/A	\$59,089	\$214,262	\$143,452								
-SUD MEDICAID	N/A	\$103,403	\$367,537	\$255,747								
-HEALTHY MICHIGAN	N/A	\$840,912	\$283,244	\$189,133								
-DISABILITY ASSISTANCE	N/A	\$27,526	\$0	\$0								
-PA 2	N/A	\$139,424	\$38,387	\$24,278								
SUBTOTAL SUD REVENUES	\$0	\$1,170,355	\$903,430	\$612,609	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL SURPLUS/(DEFICIT)	\$0	\$12,705,022	\$8,666,939	\$8,565,031	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

16-Feb-21 BC (Month End Projections by Fund Source)



Medicaid Eligibles by County and Program



REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

COMMITTEE Finance Committee	BUDGETED X	NON-BUDGETED	PARTIALLY BUDGETED
REQUESTING DIVISION Information Systems	REQUEST DATE February 19, 2021	REQUESTOR SIGNATURE Randi Bennett, Director of Information Systems	
<u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u>			
<p>HealthWest Board authorization is requested to approve payment of the annual fee associated with the Laserfiche Avante product, the annual service and support agreement with Bolt Limited, Inc. for the Laserfiche document imaging system, and 17 additional Laserfiche participant user licenses (invoices #2481 and #2493) at a total cost of \$21,193.00.</p> <p>Laserfiche Avante is a solution that provides document imaging, document management, and business process management. This product allows HealthWest to capture, secure, manage, search, retrieve, and automate organizational content, as well as the flow of that content throughout its life cycle. Laserfiche Avante includes advanced workflow capability that allows for automation of manual, repetitive processes providing increased efficiency and effectiveness in certain areas.</p>			
<u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u>			
<p>I move to authorize HealthWest to process payment for the annual fees of both the Laserfiche Avante product, as well as the service and support agreement with Bolt Limited, Inc. pertaining to it, at a total cost of \$20,377.00.</p>			
COMMITTEE DATE	COMMITTEE APPROVAL _____ Yes _____ No _____ Other		
BOARD DATE	BOARD APPROVAL _____ Yes _____ No _____ Other		

REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

COMMITTEE Finance Committee	BUDGETED X	NON-BUDGETED	PARTIALLY BUDGETED
REQUESTING DIVISION Quality Improvement	REQUEST DATE February 19, 2021	REQUESTOR SIGNATURE Matt Plaska, Director of Quality Improvement	
<p><u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u></p> <p>HealthWest Board authorization is requested to amend the contract with Mary Dumas (W 1062 Old Portage Trail, St. Ignace, MI, 49781) to be extended through September 30, 2021. The original contract was set to expire on February 15, 2021; however, Mrs. Dumas' work will not be completed by that date. Mrs. Dumas' is assisting HealthWest with restructuring and revising the Quality Assurance and Performance Improvement Plan (QAPIP), providing technical assistance on implementing the QAPIP, and advising on effectively meeting CMHSP, PIHP and MDHHS requirements for quality improvement. The requested amendments do not change the hourly rate or maximum expenditures; Mrs. Dumas will continue to be paid at the rate of \$100.00 per hour, with a maximum expenditure of \$40,000.00.</p>			
<p><u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u></p> <p>I move to authorize the HealthWest Executive Director to sign an amended agreement with Mary Dumas for contracted services at a rate of \$100.00 per hour, effective October 26, 2020 through September 30, 2021, for a maximum projected expenditure of \$40,000.00.</p>			
COMMITTEE DATE	COMMITTEE APPROVAL _____ Yes _____ No _____ Other		
BOARD DATE	BOARD APPROVAL _____ Yes _____ No _____ Other		

HWB 449-F

REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

COMMITTEE Finance Committee	BUDGETED X	NON-BUDGETED	PARTIALLY BUDGETED
REQUESTING DIVISION Network Development	REQUEST DATE February 19, 2021	REQUESTOR SIGNATURE Brian Speer Contract Specialist	
<u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u>			
<p>Per requirements of the County of Muskegon, HealthWest is requesting approval of payment to the following landlord for lease payments in the HUD programs. This will allow HealthWest to release payments as they are processed and not be required to hold them for County Board approval. Furthermore, this will ensure that consumers have housing available when it is needed. The landlord is:</p> <ul style="list-style-type: none"> • Trinity Investment Group, LLC • Blake Price 			
<u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u>			
<p>I move to authorize the HealthWest Executive Director to approve the above landlord for the HUD grant funding for Fiscal Year 2021 in order to assure payment in a timely manner and avoid any potential delays causing consumers to miss out on available housing opportunities.</p>			
COMMITTEE DATE	COMMITTEE APPROVAL _____ Yes _____ No _____ Other		
BOARD DATE	BOARD APPROVAL _____ Yes _____ No _____ Other		

REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

COMMITTEE Finance Committee	BUDGETED X	NON-BUDGETED	PARTIALLY BUDGETED
REQUESTING DIVISION Network Development	REQUEST DATE February 19, 2021	REQUESTOR SIGNATURE Brian Speer, Contract Specialist	
<u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u>			
<p>Per requirements of the County of Muskegon, HealthWest is requesting board approval to lease the Wolf Lake Home (1585 S. Wolf Lake Rd., Muskegon, MI 49442) from Red Snoot, LLC (6266 Lazy Oak Trail, Muskegon, MI 49442), effective March 1, 2021 for a period of 55 months. The monthly rent lease payment will be \$2,043.00.</p> <p>Red Snoot, LLC has been leasing the property to HealthWest for the previous 10 years and the new lease would continue until September 30th, 2025.</p>			
<u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u>			
<p>I move to authorize the HealthWest Executive Director to enter into an agreement with Red Snoot, LLC to lease the Wolf Lake Home at 1585 S. Wolf Lake Rd., Muskegon, MI 49442, effective March 1st, 2021 through September 30th, 2025 at a monthly rent of \$2,043.00.</p>			
COMMITTEE DATE	COMMITTEE APPROVAL _____ Yes _____ No _____ Other		
BOARD DATE	BOARD APPROVAL _____ Yes _____ No _____ Other		

REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

COMMITTEE Finance Committee	BUDGETED X	NON-BUDGETED	PARTIALLY BUDGETED
REQUESTING DIVISION Network Management	REQUEST DATE February 19, 2021	REQUESTOR SIGNATURE Susan Conrad, Provider Network Manager	
<u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u>			
<p>HealthWest Board authorization is requested to contract with Pathfinders, (2500 Jefferson, Muskegon Heights, MI 49444), to provide trauma-informed education and programming for youth and families in Muskegon County through the System of Care grant, effective November 1, 2020 through September 30, 2021.</p> <p>HealthWest will pay contractor an amount not to exceed \$25.00 per hour for program staff time for no more than 480 hours (no more than \$12,000.00), \$2,500.00 for one full-time Americorp member and \$500.00 for printing and materials over the duration of this contract, for a maximum total of \$15,000.00.</p>			
<u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u>			
<p>I move to authorize the HealthWest Executive Director to sign a contract with Pathfinders for Trauma-informed education and programming through the System of Care grant at a maximum cost of \$15,000.00, effective November 1, 2020 through September 30, 2021.</p>			
COMMITTEE DATE	COMMITTEE APPROVAL _____ Yes _____ No _____ Other		
BOARD DATE	BOARD APPROVAL _____ Yes _____ No _____ Other		

REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

COMMITTEE Finance Committee	BUDGETED X	NON-BUDGETED	PARTIALLY BUDGETED
REQUESTING DIVISION Administration	REQUEST DATE February 19, 2021	REQUESTOR SIGNATURE Brandy Carlson, Chief Financial Officer	
SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)			
<p>Authorization is requested for HealthWest to enter into a service contract with Sevocity via Hackley Community Care (HCCC), in the amount of \$9,346.00 for an Electronic Medical Record (EMR), effective March 1, 2021 through February 28, 2022.</p> <p>The Sevocity EMR specifically meets the needs of and will be used within the HealthWest Jail Medical Contract. Sevocity is the same EMR that HCCC currently uses and our staff are familiar with it having used it within the Integrated Health Clinic. Thus, we can roll out the services seamlessly on March 1, 2021.</p>			
SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)			
<p>I move to authorize the HealthWest Director to sign a contract with Sevocity via Hackley Community Care, funded by the Muskegon County Jail via the Jail Medical Contract, for up to \$9,500.00 and effective March 1, 2021 through February 28, 2022.</p>			
COMMITTEE DATE	COMMITTEE APPROVAL _____ Yes _____ No _____ Other		
BOARD DATE	BOARD APPROVAL _____ Yes _____ No _____ Other		



SCHEDULE A

Date Issued:	02-16-2021
Valid Until:	02-26-2021
Account Executive:	Barry Cummins
AE Phone Number:	210-831-1846
AE Email Address:	bcummins@sevocity.com

Account Name: Hackley Community Care Center
Billing Start Date: 03-01-2021

One-Time Fees

Description	List Price	Offer Price	Quantity	Ext. Price
EHR Start-up First Provider Clinic Set-up and customization plus unlimited customization and training for the 1st provider and all associated staff.	\$1,995.00	\$1,995.00	1.00	\$1,995.00
Deferred/Waived EHR Start-up Fees First Provider Start-up fees deferred until 30 days after Go Live per the Activate. This portion of Start-up fees will be waived entirely provided clinic users attend scheduled Post Go Live training within 30 days after Go Live.	\$-1,500.00	\$-1,500.00	1.00	\$-1,500.00
EHR Start-up per Additional Provider Unlimited customization and training for Provider and associated users	\$1,295.00	\$1,295.00	1.00	\$1,295.00
Deferred/Waived EHR Start-up Fees Addl Provider Start-up fees deferred until 30 days after Go Live per the Activate. This portion of Start-up fees will be waived entirely provided clinic users attend scheduled Post Go Live training within 30 days after Go Live. The deferral/waiver is only available for providers added within 30 days of the Go Live Date per the Activate form. Providers added after that 30 days will incur the regular Start-up fee for Additional Providers.	\$-950.00	\$-950.00	1.00	\$-950.00
EPCS Identity Proofing and Token For prescribers with a current DEA license: ENTER PROVIDER NAME(S) HERE	\$125.00	\$125.00	2.00	\$250.00
PPDX Initial Account Initial PPDX Account and 1 free user. Additional accounts and/or users will require an additional fee. PPDX Account name may be selected during implementation.	\$0.00	\$0.00	1.00	\$0.00
Implementation Incl Customization & Web Training Unlimited customization and scheduled web training (available 7am-5pm Central Time, Monday-Friday) at no charge. There is a charge of \$200 to schedule a customization or training session if two or more sessions have been canceled with less than 24 business hours notice.	\$0.00	\$0.00	1.00	\$0.00
Total One-Time Fees:				\$1,090.00

Monthly Fees

Description	List Price	Offer Price	Quantity	Ext. Price
EHR Monthly Fee per Part-time Provider Includes eRx and all other functionality for MIPS, Live US-based Telephone Support 24 hours/day, 365 days/year for Provider and up to 8 additional regular users and up to 3 more read-only users, for a total of up to 11 additional users per Provider. Users above the 11 per Provider are \$25 per user/month.	\$269.00	\$344.00	2.00	\$688.00
Total Monthly Fees:				\$688.00

Unselected Optional Services

Description	List Price	Offer Price	Quantity	Ext. Price
EHR Monthly Fee per Provider Includes eRx and all other functionality for MIPS, Live US-based Telephone Support 24 hours/day, 365 days/year for Provider and up to 10 additional users. Users above the 10 per Provider are \$150 per user/month.	\$379.00	\$379.00	0.00	\$0.00
Standard Clinical Data Import from Prior EHR One time standard clinical import from prior EHR. See Account Executive for Standard specifications.	\$0.00	\$0.00	1.00	\$0.00
Set-up sFax Electronic Faxing Includes porting of existing fax number	\$250.00	\$250.00	0.00	\$0.00
High Volume sFax per Full-time Provider 2000 pages per month per FT Provider. Fax page count for all providers are combined. Additional pages \$0.085 per page.	\$109.00	\$109.00	0.00	\$0.00
LOA2 Identity Proofing for Prescribing Identity proofing for non EPCS prescribers: ENTER NAME(S) OF PROVIDERS HERE	\$50.00	\$50.00	0.00	\$0.00
Low Volume sFax per Full-time Provider 1,000 pages per month per FT Provider. Fax page count for all providers are combined. Additional pages \$0.085 per page.	\$59.00	\$59.00	0.00	\$0.00
Set-up Standard HL7 Interface Interface with: INSERT LAB RESULTS, PM VENDOR OR STATE IMMUNIZATION REGISTRY NAME	\$1,495.00	\$1,495.00	0.00	\$0.00
Maintenance Standard HL7 Interface Maintenance for the interface.	\$30.00	\$30.00	0.00	\$0.00
Total Unselected Optional Services:				\$0.00

Total Due at Signing (One Time Fees Plus 1st Month's Fees)	\$1,778.00
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Notes:

A minimum monthly contract is 1 full-time or 2 part-time providers. The part-time provider monthly rate has been increased to \$344 per month to include up to 3 additional regular users plus up to 3 read-only users (in addition to the 5 regular additional users that are included in the standard price) for a total of 11 additional users per Provider. Allowed additional users are pooled and as a result, the 2 part-time providers would be allowed a total of up to 22 (2 x 11) additional users. Licensee must accurately manage user access to ensure that users no longer needing access are inactivated timely.

Signature: _____

Date: _____

Printed Name: _____

Title: _____

By signing above, I certify that I am authorized by Licensee to sign this Schedule A on behalf of Licensee. I acknowledge and agree that this understand that the standard monthly fee shall not be increased during the initial term of the Agreement and that I am committing to the monthly fees as set forth above. I understand that any amount past due shall be subject to interest at a rate of 1-1/2 percent per month (i.e. 18% per annum) as well as banking fees associated with declined payments and collection costs. I understand that the Agreement shall automatically renew for additional one year periods if not terminated in accordance with the Agreement. I understand that I may cancel this Agreement at the end of a term in accordance with the termination provision in the Agreement, and that any termination of this Agreement before the expiration of a term will result in separation fees as set forth in the Agreement. Upon termination or expiration of the Agreement, and upon CMI's receipt of Licensee's written request and payment of all fees owing to CMI, CMI shall provide to Licensee a copy of Licensee's Data in pdf format with searchable metadata file, as specified in the Agreement. At the end of the initial term and each subsequent term of this Agreement, the Monthly Fees may be subject to an increase not to exceed 15%.

Conceptual MindWorks Inc.

Signature: _____

Date: _____