



BOARD OF DIRECTORS REGULAR MEETING

Thursday, November 16, 2023 at 5:00 pm
William B. Cammin Clinic, Bay Room, 1010 N. Madison Avenue, Bay City, MI 48708

AGENDA

Page

1. CALL TO ORDER & ROLL CALL
2. PUBLIC INPUT (3 Minute Maximum Per Person)
3. REGULAR BOARD MEETING, 10/19/2023 – Distributed
 - 3.1 Motion on minutes as distributed
4. RECIPIENT RIGHTS ADVISORY & APPEALS COMMITTEE, 11/2/2023 – Distributed – McFarland, Ch/Mrozinski, V Ch
No motions were forwarded to the full Board
 - 4.1 Motion on minutes as distributed
5. HEALTH CARE IMPROVEMENT & COMPLIANCE COMMITTEE, 11/6/2023 – Distributed – Pawlak, Ch/Luce, V Ch
 - 5.1 Res# 2311001: Approve the 2023-2024 Information Management Plan – *See page 4 resolution sheet & plan attached to back of packet*
 - 5.2 Motion on minutes as distributed
6. FINANCE COMMITTEE, 11/8/2023 – Distributed – Krygier, Ch/Mrozinski, V Ch
 - 6.1 Motion to accept investment earnings balances for period ending October 31, 2023 – *See pages 6-7*
 - 6.2 Res# 2311002: Approve the Finance November 2023 contract list – *See page 4 resolution sheet & pages 8*
 - 6.3 Res# 2311003: Approve the settlement amount of \$17, 500 to Do-All, Inc – *See page 4 resolution sheet*
 - 6.4 Motion on minutes as distributed
7. BYLAWS & POLICIES COMMITTEE, 11/8/2023 – Distributed – Krygier, Ch/Mrozinski, V Ch
 - 7.1 Res# 2311004: Approve the policies beginning 30-day review – *See page 4 resolution sheet & pages 9-23*
 - 7.2 Motion on minutes as distributed



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- 8. PROGRAM COMMITTEE, 11/9/2023 – Distributed – Girard, Ch/Krygier, V Ch
 - 4 8.1 Res# 2311005: Approve clinical privileges for Ali Ibrahim, Medical Doctor – *See page 4 resolution sheet*
 - 4 8.2 Res# 2311006: Approve clinical privileges for Jill LeBourdais, Physician's Assistant – *See page 4 resolution sheet*
 - 4 8.3 Res# 2311007: Approve the Medical Staff Plan – *See page 4 resolution sheet & plan attached to back of packet*
 - 4, 24-25 8.4 Res# 2311008: Approve the nomination of Senator Kristen McDonald-Rivet for the Community Mental Health Association (CMHA) 2023 Go To Bat Award – *See page 4 resolution sheet & pages 24-25*
 - 8.5 Motion on minutes as distributed
- 9. FACILITIES & SAFETY COMMITTEE, 11/13/2023 – Distributed – Luce, Ch/Maillette, V Ch
 - No motions were forwarded to the full Board
 - 9.1 Motion on minutes as distributed
- 10. AUDIT COMMITTEE, 11/14/2023 – Distributed – McFarland, Ch/Pawlak, V Ch
 - 5, 26-32 10.1 Res# 2311009: Accept financial statements – *See page 5 resolution sheet & pages 26-32*
 - 5, 33-36 10.2 Res# 2311010: Accept electronic fund transfers – *See page 5 resolution sheet & pages 33-36*
 - 5-37 10.3 Res# 2311011: Approve disbursement & health care claims payments – *See page 5 resolution sheet & page 37*
 - 10.4 Motion on minutes as distributed
- 11. REPORT FROM ADMINISTRATION
 - 38-51 11.1 State Health Policy Updates – *See pages 38-51*
 - 11.2 Bay and Arenac County Updates



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12. UNFINISHED BUSINESS

12.1 None

13. NEW BUSINESS

13.1 Fall Conference Board Member Longevity Award

The CMHA Board Member Longevity Award presented to R. Pawlak and R. Gromaski at the 2023 Fall Conference

13.2 Holiday Hours

BABH Offices will be closed on Thursday & Friday, November 23 & 24, 2023 for the Thanksgiving holiday

13.3 December Meeting Schedule

All Board Committee meetings will continue to be held at the William B. Cammin Clinic, 1010 N. Madison Avenue, Bay City, MI 48708 for the month of November 2023- *See page 52*

14. ADJOURNMENT



BOARD OF DIRECTORS
REGULAR MEETING

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RESOLUTIONS

Health Care Improvement & Compliance (HCIC) Committee, November 6, 2023

Res# 2311001: Resolved by Bay Arenac Behavioral Health to approve the 2023-2024 Information Management Plan.

Finance Committee, November 8, 2023

Res# 2311002: Resolved by Bay Arenac Behavioral Health to approve the Finance November 2023 contract list.

Res# 2311003: Resolved by Bay Arenac Behavioral Health to approve the settlement amount of \$17,500 to Do-All, Inc.

Bylaws & Policies Committee, November 8, 2023

Res# 2311004: Resolved by Bay Arenac Behavioral Health to approve the following policies beginning 30-day review:

- 1) Credentialing and Re-Credentialing of Applied Behavioral Analysis & Ancillary Staff, 8-6-8
- 2) Virtual Office, 7-1-7 (delete)
- 3) Temporary Emergency Leave, 7-1-20 (delete)

Program Committee, November 9, 2023

Res# 2311005: Resolved by Bay Arenac Behavioral Health to approve the clinical privileges for Ali Ibrahim, Medical Doctor (MD), for a two-year renewal term expiring November 30, 2025.

Res# 2311006: Resolved by Bay Arenac Behavioral Health to approve the clinical privileges for Jill LeBourdais, Physician's Assistant (PA), for a two-year renewal term expiring November 30, 2025.

Res# 2311007: Resolved by Bay Arenac Behavioral Health to approve the Medical Staff Plan

Res# 2311008: Resolved by Bay Arenac Behavioral Health to approve the nomination of Senator Kristen McDonald-Rivet for the Community Mental Health Association (CMHA) 2023 Go To Bat Award



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RESOLUTIONS

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Audit Committee, November 14, 2023

- Res# 2311009: Resolved by Bay Arenac Behavioral Health to approve the Financial Statements for period ending October 31, 2023.
- Res# 2311010: Resolved by Bay Arenac Behavioral Health to approve the electronic fund transfer (EFTs) for period October 31, 2023.
- Res# 2310011: Resolved by Bay Arenac Behavioral Health to approve the disbursements and health care payments from October 23, 2023 through November 17, 2023.

Bay-Arenac Behavioral Health Authority
Estimated Cash and Investment Balances October 31, 2023

Balance October 1, 2023	4,461,389.79
Balance October 31, 2023	3,726,742.66
Average Daily Balance	3,535,753.56
Estimated Actual/Accrued Interest October 2023	11,914.64
Effective Rate of Interest Earning October 2023	4.04%
Estimated Actual/Accrued Interest Fiscal Year to Date	11,914.64
Effective Rate of Interest Earning Fiscal Year to Date	4.04%

Note: The Cash and Investment Balances exclude Payroll and AP related Cash Accounts.

Cash Available - Operating Fund

	Rate	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23
Beg. Balance Operating Funds - Cash,													
Cash equivalents, Investments		6,280,285	6,996,077	6,239,568	5,801,955	5,531,567	4,929,028	4,145,850	3,560,754	2,822,426	3,940,689	3,431,903	4,022,437
Cash in		6,055,062	5,148,520	4,869,398	5,256,044	5,799,795	6,405,791	7,365,485	6,140,991	9,939,499	6,328,711	12,694,585	11,257,050
Cash out		(5,339,270)	(5,905,029)	(5,307,011)	(5,526,431)	(6,402,334)	(7,188,968)	(7,950,581)	(6,879,319)	(8,821,236)	(6,837,497)	(12,104,052)	(11,993,562)
Ending Balance Operating Fund		6,996,077	6,239,568	5,801,955	5,531,567	4,929,028	4,145,850	3,560,754	2,822,426	3,940,689	3,431,903	4,022,437	3,285,926
Investments													
Money Markets		6,996,077	6,239,568	5,801,955	5,531,567	4,929,028	4,145,850	3,560,754	2,822,426	3,940,689	3,431,903	4,022,437	3,285,926
90.00													
180.00													
180.00													
270.00													
270.00													
Total Operating Cash, Cash equivalents, Invested		6,996,077	6,239,568	5,801,955	5,531,567	4,929,028	4,145,850	3,560,754	2,822,426	3,940,689	3,431,903	4,022,437	3,285,926
Average Rate of Return General Funds		1.63%	1.78%	1.86%	1.93%	2.03%	2.14%	2.25%	2.41%	2.51%	2.60%	2.69%	3.82%
		1.73%	2.08%	2.09%	2.24%	2.50%	2.81%	3.01%	3.66%	3.46%	3.51%	3.71%	3.82%
Average		6,638,181	6,505,310	6,329,471	6,169,890	5,963,080	5,703,476	5,435,635	5,145,279	5,024,820	4,880,009	4,808,545	3,285,926

Cash Available - Other Restricted Funds

	Rate	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23
Beg. Balance-Other Restricted Funds -													
Cash, Cash equivalents, Investments		422,556	423,587	424,765	426,097	427,405	428,924	430,428	432,047	433,645	435,308	437,156	438,953
Cash in		1,030	1,178	1,332	1,308	1,519	1,504	1,619	1,598	1,663	1,849	1,797	1,864
Cash out													
Ending Balance Other Restricted Funds		423,587	424,765	426,097	427,405	428,924	430,428	432,047	433,645	435,308	437,156	438,953	440,817
Investments													
Money Market		423,587	424,765	426,097	427,405	428,924	430,428	432,047	433,645	435,308	437,156	438,953	440,817
91.00	0.70%												
91.00	1.10%												
91.00	1.15%												
91.00	1.35%												
90.00	1.70%												
91.00	2.05%												
90.00	2.15%	-	-	-	-	-	-	-	-	-	-	-	-
365.00	80.00%												
Total Other Restricted Funds		423,587	424,765	426,097	427,405	428,924	430,428	432,047	433,645	435,308	437,156	438,953	440,817
Average Rate of Return Other Restricted Funds		2.56%	2.84%	2.98%	3.19%	3.32%	3.47%	3.58%	3.68%	3.76%	3.88%	3.97%	5.00%
		2.97%	3.41%	3.41%	4.00%	4.00%	4.35%	4.35%	4.50%	4.50%	5.00%	5.00%	5.00%
Average		423,071	423,636	424,251	424,882	425,556	426,252	426,976	427,717	428,476	429,265	430,073	440,817
Total - Bal excludes payroll related cash accounts		7,419,664	6,664,333	6,228,052	5,958,972	5,357,952	4,576,278	3,992,801	3,256,071	4,375,997	3,869,059	4,461,390	3,726,743
Total Average Rate of Return		1.71%	1.83%	1.93%	1.99%	2.09%	2.17%	2.25%	2.34%	2.41%	2.51%	2.58%	4.04%

**Bay-Arenac Behavioral Health
Finance Council Board Meeting
Summary of Proposed Contracts
November 8, 2023**

		Old Rate	New Rate	Term	Out Clause?	Performance Issues? (Y/N) Risk Assessment Rating (Poor/Fair/Good/Excellent)
SECTION I. SERVICES PROVIDED BY OUTSIDE AGENCIES						
Clinical Services						
1	M	Beacon Specialized Living Services Specialized Residential Treatment services to an individual moving from The Lodge to 62nd St: 62nd St. per diem 1:1 Staffing 24 hours/day	\$0 \$350/day \$33.43/hour - Max per diem \$1,152.32/day	10/27/23-11/5/23	Y	N
2	M	Beacon Specialized Living Services Specialized Residential Treatment services to an individual moving from 62nd St back to The Lodge: The Lodge per diem	\$300.55/day \$300.55/day	11/6/23-9/30/24	Y	N
3	M	Michigan Community Services, Inc. Parker St. Home to become a 5 bed home vs. 4 bed home	\$796.43 Same	11/1/23 - 9/30/24	Y	N
4	M	Vocational Providers FY24 rate for H2023 HX 3Y: AOI Do-All New Dimensions	\$12.86/unit \$12.86/unit \$12.86/unit \$16.80/unit \$16.80/unit \$16.80/unit	10/1/23 - 9/30/24	Y	N
5	N	*Flourish Therapy ABA Services	\$0 State rates eff. 10/1/22	12/1/23 - 9/30/24	Y	New Provider
6	N	*T.R.A.C. Therapy Research Autism Center ABA Services	\$0 State rates eff. 10/1/22	12/1/23 - 9/30/24	Y	New Provider
7	N	Bromberg & Associates Interpreter Services (2 hour minimum) Group I - Business Hours (8:00am - 5:00pm) Group II - Business Hours (8:00am - 5:00pm) Group III - Business Hours (8:00am - 5:00pm) Group IV - Business Hours (8:00am - 5:00pm) Group I - Holidays, Evening and Weekend Rate Group II - Holidays, Evening and Weekend Rate Group III - Holidays, Evening and Weekend Rate Group IV - Holidays, Evening and Weekend Rate Emergency Requests - (Requests made with less than 48-hour lead time) Travel Costs (Charged for on-site services only)	\$0 \$80 \$85 \$100 \$110 \$85 \$90 \$105 \$120 Addl. \$10 Distance of up to 20 miles are subject to a 1/2 hr. increment of the hourly rate. Travel beyond 20 miles is subject to an actual travel time charges and mileage reimbursement according to federal mileage reimbursement rate.	11/17/23 - Ongoing	Y	New Provider
8	S	Hospital Psychiatry PLLC Psychiatric Services - All-Inclusive Contract Value	\$504,000/year Same	12/1/23 - 11/30/25	Y	N
9	R	Bay Human Services CLS Contract Maximum	N/A Contract Maximum: \$782,000 Cost Settled Contract	10/1/23 - 9/30/24	Y	N
10	N	Crisis Resential Unit, operated by Dr. Ibrahim Crisis Residential Services	\$0 Daily Per Diem - \$539 Contract Maximum: \$886,121	1/1/24 - 9/30/24	Y	New Provider
Admin/Other Services						
SECTION II. SERVICES PROVIDED BY THE BOARD (REVENUE CONTRACTS)						
SECTION III. STATE OF MICHIGAN GRANT CONTRACTS						
SECTION IV. MISC PURCHASES REQUIRING BOARD APPROVAL						

R = Renewal with rate increase since previous contract
D = Renewal with rate decrease since previous contract
S = Renewal with same rate as previous contract
ES = Extension

M = Modification
N = New Contract/Provider
NC = New Consumer
T = Termination

Footnotes:

* Both new ABA providers are pending initial credentialing approval by the BABHA Credentialing Committee (meeting scheduled for 11/14/23).

BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY

POLICIES AND PROCEDURES MANUAL

Chapter: <u>8</u>	<u>Fiscal Management</u>		
Section: <u>6</u>	<u>Contract Management</u>		
Topic: <u>8</u>	Credentialing and Re-Credentialing of Applied Behavioral Analysis and Ancillary Staff		
Page: 1 of 2	Supersedes Date:	Approval Date:	
	Pol:	Pol:	<i>Board Chairperson Signature</i>
	Proc:	Proc:	<i>Chief Executive Officer Signature</i>
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Policy

It is the policy of Bay-Arenac Behavioral Health Authority (BABHA) to ensure that the credentialing of all Applied Behavioral Analysis (ABA) technicians and professionals (including Behavior Technicians (BT), Qualified Behavioral Health Professionals (QBHP), Board Certified Assistant Behavioral Analyst (BCaBA), Board Certified Behavioral Analyst (BCBA), Qualified Licensed Practitioner (QLP), and Licensed Psychologist/Limited Licensed Psychologist (LP/LLP) and Ancillary Professionals (Occupational Therapist, Speech and Language Pathologist, and Physical Therapist) and assistants (Occupational Therapy Assistant and Physical Therapy Assistant) are verified and approved according to the Michigan Department of Health and Human Services (MDHHS) guidelines.

Purpose

This policy and procedure is to establish processes for the verification of credentials for ABA technicians and professionals and ancillary professionals and assistants consistent with the MDHHS guidelines.

Education Applies to:

- ☐ All BABHA Staff
- ☐ Selected BABHA Staff, as follows:
- ☐ All Contracted Providers: ☐ Policy Only ☐ Policy and Procedure
- ☒ Selected Contracted Providers, as follows: ABA Providers, [Ancillary professionals and assistants](#)
- ☐ Policy Only ☒ Policy and Procedure
- ☐ Other:

SUBMISSION FORM

BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY

POLICIES AND PROCEDURES MANUAL

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AUTHOR/ REVIEWER	APPROVING BODY/COMMITTEE/ SUPERVISOR	APPROVAL /REVIEW DATE	ACTION (Deletion, New, No Changes, Replacement or Revision)	REASON FOR ACTION - If replacement list policy to be replaced
Sarah Holsinger- Chris Tomezak	Joelin Hahn	<u>8/15/2023</u>	New	Outline credentialing and re-credentialing process for ABA employees.

BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

Chapter: 7	Human Resources		
Section: 1	Administration of Personnel Management		
Topic: 7	Virtual Office		
Page: 1 of 8	Supersedes Date: Pol: Proc: 3-21-11, 1-22-01, 12-29-10	Approval Date: Pol: 5-20-04 Proc: 8-5-19	<div style="border-top: 1px solid black; text-align: center; margin-top: 20px;"><i>Board Chairperson Signature</i></div> <div style="border-top: 1px solid black; text-align: center; margin-top: 20px;"><i>Chief Executive Officer Signature</i></div>
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Policy

It is the policy of Bay-Arenac Behavioral Health Authority (BABHA) to establish guidelines for employees working for the Board under a “virtual office” arrangement.

Purpose

The goal of establishing the “Virtual Office” is to increase flexibility in the delivery of services provided by BABHA, improve quality and efficiency and reduce the overall cost of providing services. Clinical positions that provide service in the community may be eligible to participate in a virtual office arrangement.

It is expected that increased flexibility will create a more user-friendly environment for individuals served and staff. Staff will be more immediately available in the community during business hours to address the needs of individuals served. Staff will be responsible for meeting the responsibilities of their position without regard to work location. Documentation will be completed in the electronic health record (EHR) to meet all regulatory and agency standards. Services will be provided in an efficient, expeditious manner to improve outcomes (i.e. more individuals served, improved staff response time to individual needs, decreased need for more intensive services, increased satisfaction and the potential for the improvement of employee morale).

Education Applies to

- ☐ All BABHA Staff
- ☒ Selected BABHA Staff, as follows: Client Services Specialists, Clinical Specialists, Community Based Nurses, and other staff as approved by their SLT member
- ☐ All Contracted Providers: ☐ Policy Only ☐ Policy and Procedure
- ☐ Selected Contracted Providers, as follows:
 - ☐ Policy Only ☐ Policy and Procedure
- ☐ BABHA’s Affiliates: ☐ Policy Only ☐ Policy and Procedure
- ☐ Other:

BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

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Definitions

N/A

Procedure

1. Terms and Conditions/Performance Indicators

- a. All personnel policies and procedures as adopted by the BABHA Board of Directors will remain in effect for all BABHA employees participating in virtual office.
- b. In order to be considered for virtual office, staff must have all documentation up-to-date.
- c. Staff participating in virtual office are responsible for working their approved work schedule based on FTE status.
- d. Staff are required to be available during business hours via cell phone during their approved work schedule, and be prepared to respond to individuals' needs, unless on approved ETO. Adjusted schedules are encouraged in order to meet the principles of Person Centered-Planning and Self-Determination. Staff are expected to use this flexibility to address the needs of consumers but also remain responsible for attending all scheduled team meetings, supervision and training unless other arrangements have been made with supervisory approval
- e. All required documentation must be submitted on time. This includes assessments, periodic reviews, treatment plans, etc. Inability to comply with this requirement may be grounds for removal from participation in virtual office.
- f. All billing documentation and progress notes must be completed in the electronic health record (EHR) by the next business day.

BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

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- g. Staff are required to respond to their cell phones as promptly as possible but no later than the end of the business day. They must also respond in person, when necessary, within forty-five (45) minutes.
- h. Staff are required to check their email regularly throughout each business day in order to respond to emergent and non-emergent messages from internal and external sources.
- i. Staff are responsible to handle any crises with their caseload during business hours, unless an immediate response is necessary and the staff is unable to respond. In such a case, Emergency Services will respond.
- j. Monthly productivity must be met in terms of the amount, scope and duration included in the person-centered plans for each consumer and/or any other measures as established by the agency.
- k. Consumer satisfaction must be maintained.
- l. Voicemail must be accessed and responded to as promptly as possible but no later than the end of the business day.
- m. Staff agrees that no business meetings will be held in the employee's home.
- n. Virtual office is not a substitute for dependent care. Proof of dependent care arrangements will be required.
- o. within the Phoenix calendar. [KA1].
- p. It is the responsibility of the employee to protect the confidentiality of the individual and to comply with the Mental Health Code and HIPAA laws. The employee agrees to provide a secure and locked environment for all confidential materials that they may have at their home office location.

BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

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- q. The employee is solely responsible for determining whether the virtual office arrangement has any tax or financial implications and should seek advice from a professional tax consultant for details.

2. Monitoring

- a. Each employee participating in virtual office will meet with their respective supervisor on a pre-determined basis to monitor performance objectives, address any problems that may arise, etc.
- b. .
- c. Staff participating in virtual office who are out of compliance with a particular performance indicator may be subject to disciplinary action and may be excluded from participating in virtual office. Virtual office arrangements are approved at the discretion of the employer and may be revoked at any time based on program or consumer needs.
- d. The supervisor will monitor submission of progress notes weekly.
- e. Job Performance based on the needs of the consumer identified in the IPOS through the Person Centered Planning process will be monitored at least monthly.
- f. Documentation will be reviewed monthly.
- g. Consumer satisfaction will be assessed periodically.
- h. Agency vehicles are to be used exclusively for agency business. The usual sign-out procedure will be followed. Vehicles must be returned to BABHA each evening.

3. Selection of Candidates

BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

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Virtual Office is voluntary for the employee. Selection criteria includes:

- a. The employee has worked at BABHA for a minimum of one year and is no longer on probationary status. The employee must demonstrate an understanding of the job and philosophy of the organization.
- b. Program demands may necessitate that an employee not be able to participate in virtual office.
- c. The employee has no current performance issues.
- d. The selection of staff requires supervisory approval. In the event the supervisor does not grant such approval, the supervisor will identify areas where the staff member needs to improve to participate in virtual office. The CEO has final approval/disapproval authority over all virtual office or alternate work schedule arrangements.
- e. Staff previously removed from virtual office for failure to comply with a particular performance indicator will require service director approval to renew their eligibility. To be eligible for reinstatement in virtual office, staff must demonstrate full compliance with all the conditions previously set forth for a minimum of three months.

4. Equipment

- a. BABHA will provide the following equipment for virtual office staff.
 - ❖ Laptop/ipad
 - ❖ Cell Phone
 - ❖ Office Supplies/Equipment
- b. Expenses related to the use of this equipment will be covered by BABHA. The employee is responsible for any increases in utility payments or any costs

BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

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Section:	1	Administration of Personnel Management		
Topic:	7	Virtual Office		
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			<hr/> <i>Board Chairperson Signature</i>	
			<hr/> <i>Chief Executive Officer Signature</i>	
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associated with preparing and maintaining the remote work location for conducting business due to the telecommuting arrangement.

- c. BABHA equipment will not be used for private purposes nor will family members or friends have access to the equipment.
- d. Staff shall promptly return all of the BABHA equipment when requested by the supervisor.
- e. Staff agree to follow all software-licensing provisions agreed to by BABHA.
- f. BABHA may pursue recovery from the employee for any BABHA property deliberately or negligently damaged or destroyed while in the employee's care, custody or control.
- g. BABHA is not responsible for private property used, lost or destroyed.
- h. Staff agree to notify their supervisor immediately in the event of a need for equipment repair. The employee shall not try to repair the equipment him/herself.

5. Safety

Safety-related issues shall be consistent with BABHA policy. The employee will designate a workspace within the remote work location. The employee will maintain safe, hazard-free conditions in the remote work location and practice the same safety habits in the remote work location as he or she would in his or her office at BABHA. The supervisor/service director may request photographs of, and make on-site visits to, the remote work location for the purpose of determining that the site meets these requirements. In such case, the employee will cooperate with the request.

6. Injury Liability

Staff must immediately report to their supervisor, in writing, any injuries related to work done for BABHA while in the remote work location. BABHA assumes no responsibility for any injuries to third party persons and/or members of the household that occur in the

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designated home work area. Injuries occurring in the employee's home but outside of the designated work area will not be subject to BABHA liability.

Attachments

N/A

Related Forms

Virtual Office Arrangement Agreement (Intranet)

Virtual Office Arrangement Agreement Form-Mental Health Nurse (Intranet)

Related Materials

N/A

References and/or Legal Authority

N/A

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AUTHOR/ REVIEWER	APPROVING BODY/COMMITTEE/ SUPERVISOR	APPROVAL /REVIEW DATE	ACTION (Deletion, New, No Changes, Replacement or Revision)	REASON FOR ACTION - If replacement list policy to be replaced
Rebecca Smith	Robert Blackford	12/29/10	Revision	Updated to Current practices – Revised sections on performance indicators, monitoring, and selection of candidates
Rebecca Smith	Rebecca Smith	05/31/13	No Changes	Triennial review
Rebecca Smith	Rebecca Smith	04/18/16	No Changes	Triennial review
Rebecca Smith, Karen Amon, Joelin Hahn	Chris Pinter	5/30/19 and 8/5/19	Revision	Triennial Review-updated to current practice.
<u>Jennifer Lasceski</u>	<u>Chris Pinter</u>	<u>10/1/23</u>	<u>Replacement</u>	<u>Replaced with C07-S01-T12</u>

BAY-ARENAC BEHAVIORAL HEALTH POLICIES AND PROCEDURES MANUAL

Chapter: 7	Human Resources		
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Topic: 20	Temporary Emergency Leave		
Page: 1 of 5	Supersedes Date: Pol: Proc: 4-7-2020	Approval Date: Pol: 4-7-2020 Proc: 9-23-2020	<div style="border-top: 1px solid black; text-align: center; padding-top: 5px;"><i>Board Chairperson Signature</i></div> <div style="border-top: 1px solid black; text-align: center; padding-top: 5px;"><i>Chief Executive Officer Signature</i></div>
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Policy

It is the policy of Bay-Arenac Behavioral Health Authority (BABHA) to safeguard the welfare of its employees, persons served and the community while maintaining operations in an effective and efficient manner during periods of extreme external circumstances such as pandemic illness COVID-19. The Temporary Emergency Leave Policy is developed to support our employees in response to COVID-19 as a tool for the Authority to utilize for Exempted/Excluded Emergency Responders and Health Care Providers that shall be eligible for a grant of up to fourteen (14) calendar day regularly scheduled work period of paid leave as deemed prudent by the Chief Executive Officer, in consult with the Strategic Leadership Team, to assure critical staffing levels of emergency responders and healthcare providers and the delivery essential emergency and public healthcare services to the community.

Purpose

The purpose of this policy and procedure is to establish processes for the eligibility, request and approval of Temporary Emergency Leave.

Education Applies to:

- ☒ All BABHAA Staff
- ☐ Selected BABHAA Staff, as follows:
- ☐ All Contracted Providers: ☐ Policy Only ☐ Policy and Procedure
- ☐ Selected Contracted Providers, as follows:
- ☐ Policy Only ☐ Policy and Procedure
- ☐ BABHAA's Affiliates: ☐ Policy Only ☐ Policy and Procedure
- ☐ Other:

BAY-ARENAC BEHAVIORAL HEALTH POLICIES AND PROCEDURES MANUAL

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Procedure

- A. After April 1, 2020, employees who are healthcare providers or emergency responders are exempted/excluded from coverage or application from the Emergency Family and Medical Leave Expansion Act (“EFMLEA”) and from the definition of employee under the Emergency Paid Sick Leave Act (“EPSLA”).
- B. As an alternative, an eligible employee may be authorized for a Temporary Emergency Leave of up to five (5) workdays if they reasonably believe he/she or their eligible family member has been exposed or infected with COVID-19, to permit the employee (or eligible family member) an opportunity to contact his/her healthcare provider for examination to seek diagnosis, testing and treatment. Delay in test processing may require medical documentation as requested by the supervisor, to support paid leave beyond five calendar days.
- C. During the first five (5) days of a Temporary Emergency Leave absence supervisors shall not require a healthcare provider’s note for employees or their eligible family member who are experiencing COVID-19 symptoms (including, coughing, fever, shortness of breath, etc.) and are seeking a medical diagnosis from a healthcare provider.
- D. The Temporary Emergency Leave granted under this policy may be extended for up to 80 hours in total per calendar year if an employee's healthcare provider confirms in writing that an employee has been infected with COVID-19, is reasonably likely to spread COVID-19 to coworkers or the public through the performance of the employee's regular job duties, and/or is unable to perform the essential functions of his/her job without possible harm to himself/herself or others; or to care for family member who a healthcare provider has confirmed in writing, has been infected with COVID-19. Temporary Emergency Leave may also be extended for up to 80 hours in total per calendar year if the BABHA Infection Control Nurse in conjunction with the Public Health Department, determine that the

BAY-ARENAC BEHAVIORAL HEALTH POLICIES AND PROCEDURES MANUAL

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employee should remain off work due to COVID-19. Family member shall be defined as provided in the BABHA FMLA policy within the Employee Handbook.

- E. An employee diagnosed with COVID-19 or caring for a family member diagnosed with COVID-19 must provide medical certification clearing them to work in order to return. This provision shall in no-way be interpreted to limit the employer's authority to require additional clearances for employees or to implement other measures to safeguard the health of employees and the public while maintaining operations in an effective and efficient manner and continuing to perform critical and essential services.
- F. An employee may be instructed not to report if the employee is showing symptoms of COVID-19 (including, coughing, fever, shortness of breath, etc.) until they meet Return to Work Criteria as outlined by the CDC or are released by a healthcare provider. In such cases, the employee may be approved for Temporary Emergency Leave to ensure they are symptom free.
- G. A full-time employee may be granted Temporary Emergency Leave up to 80 hours (in total) per calendar year based on full time equivalency (FTE) status. Part-time employees may be granted Temporary Emergency Leave based on their average work schedule over a two-week pay period. Employees may not carry over leave from one year to the next and are not entitled to reimbursement for unused Temporary Emergency Leave upon termination, resignation, retirement, or other separation from employment.
- H. Absences occurring during a Temporary Emergency Leave will not be counted as an unscheduled absence. However, nothing shall alter or amend the current BABHA policy that both paid and unpaid leave for an otherwise qualifying reason will count toward FMLA time off pursuant to employer policies. The counting of Temporary Emergency Leave to current FMLA limits shall be applied consistent with BABHA policies and the law.
- I. If an employee believes their Temporary Emergency Leave absence will exceed the allowable hours (pro-rated for part-time) authorized by this special Temporary Emergency Leave policy, the employee may request additional paid or unpaid leave pursuant to the normal BABHA Earned Time Off, Michigan Paid Medical Leave and Family Medical Leave Act policies found

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in the Employee Handbook. Normal verification requirements will apply, which may include but not be limited to verification from a health care provider to the Human Resources department.

Attachments

N/A

Related Forms

N/A

Related Materials:

Bay Arenac Behavioral Health Employee Handbook

References/Legal Authority:

Emergency Family Medical Leave Expansion Act
Emergency Paid Sick Leave Act

BAY-ARENAC BEHAVIORAL HEALTH POLICIES AND PROCEDURES MANUAL

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AUTHOR/ REVIEWER	APPROVING BODY/COMMITTEE/ SUPERVISOR	APPROVAL /REVIEW DATE	ACTION (Deletion, New, No Changes, Replacement or Revision)	REASON FOR ACTION - If replacement list policy to be replaced
Rebecca Smith	Christopher Pinter	4/7/2020	New	New Policy and Procedure
Rebecca Smith	BABH Board of Directors	9/23/2020	Revision	Revised to remove end date for eligibility of Temporary Emergency leave and add language related to future eligibility.
Jennifer Lascieski	Christopher Pinter	8/19/2021	Revision	Grammatical corrections
Jennifer Lascieski	Christopher Pinter	10/1/23	Deletion	End of PHE



“GO TO BAT” AWARD NOMINATION FORM

- I. The “Go To Bat” Award is presented by the Community Mental Health Association of Michigan to an individual outside of the public mental health system (DHHS or CMH) who exemplifies extraordinary concern, advocacy or leadership aimed at improving the quality and quantity of community-based mental health services for persons with mental illness and developmental disabilities in Michigan. (Note: “Outside of public mental health refers to an individual who cannot be receiving monetary compensation from the CMH system)."
- II. Nominations may be submitted by any of the following member groups:
- A CMH Board
 - An Affiliate Member
 - An Association Standing Committee
 - The CMHA Executive Board
 - An Association Region
- III. NAME OF NOMINEE Senator Kristen Mc Donald-Rivet
Nominated by Colleen Maitelle
Nominee's Address 2600 Center Ave, Bay City MI 48708
Phone Number (home) 517-294-0349 (business) 989-297-4107 Steve Prince
Nominee's Occupation and Place of Employment Senator at Michigan State Senate
List community service or professional organizations with which the nominee is or has been affiliated. Please include the nominee's relationship to each organization. Michigan Future Inc, former
2nd ward Commissioner, former President/CEO at Greater
Midland Community Center, former VP Burghart Policy The Skillman
Foundation, worked at MI Dept of Human Services / operations office
former Executive director, Michigan Head Start Assoc, former
Chief of Staff at MI Dept of Education, worked at the MI House of Reps
- IV. ON A SEPARATE SHEET OF PAPER, PLEASE PROVIDE A DESCRIPTION OF THE NOMINEE'S CONTRIBUTION TO IMPROVING COMMUNITY-BASED PUBLIC MENTAL HEALTH SERVICES IN MICHIGAN.
- V. To be considered, all nominations must be submitted on this form, or a copy of same, to: CMH Association of Michigan, 507 South Grand Ave., Lansing, MI 48933 or Fax: 517-374-1053. THE DEADLINE FOR NOMINATIONS IS NOVEMBER 17, AT 5:00pm. All nominations will be submitted to the Member Services Committee in care of the Association office. Award recommendations will be based on the quality of this description, its support information and attachments, not the number of nominations an individual receives. Nominees will NOT be considered without supporting documentation. The award will be presented during the Association's Winter Conference.
- VI. For more information, please contact Monique Francis at 517-374-6848 or e-mail mfrancis@cmham.org.

PREVIOUS RECIPIENTS OF THE "GO-TO-BAT" AWARD

2022 – Senator Rick Outman

2021 – Sheriff Mat King

2020 – Representative Sue Allor

2019 – The Honorable Freddie Burton

2018 – Kevin Fischer

2017–Andrea Cole

2016–Lieutenant Governor Brian Calley and Representative Rob VerHeulen

2015–The Honorable John Tomlinson and The Honorable Dorene Allen

2014–Senator Mike Shirkey

2013–Representative Matt Lori and Representative Al Pscholka

2012–Stephen Fitton

2011–Veda Sharp

2010–Senator Roger Kahn

2009–Senator Gilda Jacobs

2008–Representative Gary McDowell

2007–Senator Tony Stamas

2006–Governor Jennifer Granholm

2005–Representative Bruce Caswell

2004–Senator Beverly Hammerstrom

2003–Representative Gary Newell

2002–Judith Taylor

2001–Senator Dan DeGrow

2000–Senator Shirley Johnson

1999–Representative Terry Geiger

1998–Senator Joseph Conroy

1997–Senator Robert R. Geake

1996–Patrick Elwell

1995–Representative Beverly Hammerstrom and Senator Joel Gougeon

1994–Representative Donald Gilmer

1993–Representative Nick Ciaramitaro

1992–Margie Mitchell

1991–William Allen

1990–Representative Dick Allen

1989–Representative Debbie Stabenow

1988–Ben Censoni

**Bay-Arenac Behavioral Health
Financial Statements
For Period Ending 10/31/2023**

Certified for Accuracy


Accounting Manager


Chief Financial Officer

Bay-Arenac Behavioral Health Statement of Net Assets

Bay-Arenac Behavioral Health Consolidated Income Statement:

By Month to Date

By Year to Date

Bay-Arenac Behavioral Health Reconciliation of Fund Balance:

Bay-Arenac Behavioral Health Reconciliation of Unreserved Fund Balance:

Bay-Arenac Behavioral Health Fund Balance Summary:

Bay-Arenac Behavioral Health Cash Flow Statement

Bay-Arenac Behavioral Health Projected Cash Flows

**Bay Arenac Behavioral Health
Statement of Net Assets**

Column Identifiers			
A	B	C	
1 ASSETS	Oct 31, 2023	Sept 30, 2023	
2 <u>Current Assets</u>			
3 Cash and cash equivalents	\$2,956,304.36	\$3,022,623.32	
4 Consumer and insurance receivables	184,190.86	241,706.30	
5 Due from other governmental units	7,973,680.28	7,317,908.29	
6 Contract and other receivables	290,192.07	259,249.79	
7 Interest receivable	0.00	0.00	
8 Prepaid items	126,474.94	177,779.74	
9 Total Current Assets	11,530,842.51	11,019,267.44	(3+4+5+6+7+8)
10 Noncurrent Assets			
11 <u>Cash and cash Equivalents - restricted</u>			
12 Restricted for compensated absences	1,494,180.20	1,492,316.16	
13 Restricted temporarily - other	190,655.94	152,312.03	
14 Cash and Cash Equivalents - restricted	1,684,836.14	1,644,628.19	(12+13)
15 <u>Capital Assets</u>			
16 Capital assets - land	424,500.00	424,500.00	
17 Capital assets - depreciable, net	6,384,206.87	6,384,206.87	
18 Capital assets - construction in progress	-	-	
19 GASB 87 Right to Use Bldg	2,272,819.47	2,272,819.47	
20 Accumulated depreciation	(4,142,591.33)	(4,123,146.50)	
21 Capital Asset, net	4,938,935.01	4,958,379.84	(16+17+18+19+20)
22 Total Noncurrent Assets	6,623,771.15	6,603,008.03	(14+21)
23 TOTAL ASSETS	18,154,613.66	17,622,275.47	(9+22)
24 LIABILITIES			
25 <u>Current Liabilities</u>			
26 Accounts payable	422,388.42	7,890.98	
27 Accrued wages and payroll related liabilities	274,081.58	148,176.04	
28 Other accrued liabilities	4,101,113.70	4,136,500.93	
29 Due to other governmental units	250,680.00	252,722.00	
30 Deferred Revenue	25,772.52	2,503.69	
31 Current portion of long term debt	15,703.91	15,703.91	
32 Other current liabilities	-	-	
33 Total Current Liabilities	5,089,740.13	4,563,497.55	(26+27+28+29+30+31+32)
34 <u>Noncurrent Liabilities</u>			
35 Long term debt, net of current portion	246,050.83	247,382.24	
36 GASB 87 Noncurrent Lease Liability	1,892,572.46	1,892,572.46	
37 Compensated absences	1,458,761.45	1,483,454.24	
38 Total Noncurrent Liabilities	3,597,384.74	3,623,408.94	(35+36+37)
39 TOTAL LIABILITIES	8,687,124.87	8,186,906.49	(33+38)
40 NET ASSETS			
41 <u>Fund Balance</u>			
42 Restricted for capital purposes	3,966,653.00	3,966,653.00	
43 Unrestricted fund balance - PBIP	2,377,601.32	2,377,601.32	
44 Unrestricted fund balance	3,123,234.47	3,091,114.66	
45 Total Net Assets	\$9,467,488.79	\$9,435,368.98	(42+43+44) and (23-39)

Bay Arenac Behavioral Health
For the Month Ending Oct 31, 2023
Summary of All Units

Column Identifiers						
A	B	C	D	E	F	G
	Oct	2023 YTD	2024	(C-D)	(C / D)	2024
	Actual	Actual	YTD Budget	Variance	% to Budget	Monthly Budget
Income Statement						
1 REVENUE						
2 Risk Contract Revenue						
3 Medicaid Specialty Supports & Services	4,514,428.67	4,514,428.67	4,356,066.67	158,362.00	104%	4,356,066.67
4 Medicaid Autism	891,317.51	891,317.51	806,265.50	85,052.01	111%	806,265.50
5 State Genl Fund Priority Population	105,711.00	105,711.00	135,504.53	(29,793.53)	78%	135,504.53
6 GF Shared Savings Lapse	6,525.17	6,525.17	6,397.42	127.75	0%	6,397.42
7 Total Risk Contract Revenue	5,517,982.35	5,517,982.35	5,304,234.12	213,748.23	104%	5,304,234.12 (3+4+5+6)
8 Program Service Revenue						
9 Medicaid, CWP FFS	0.00	0.00	0.00	0.00	0%	0.00
10 Other Fee For Service	30,844.95	30,844.95	28,864.57	1,980.38	107%	28,864.57
11 Total Program Service Revenue	30,844.95	30,844.95	28,864.57	1,980.38	107%	28,864.57 (9+10)
12 Other Revenue						
13 Grants and Earned Contracts	154,399.01	154,399.01	72,459.01	81,940.00	213%	72,459.01
14 SSI Reimbursements, 1st/3rd Party	6,165.00	6,165.00	5,739.95	425.05	107%	5,739.95
15 County Appropriation	65,587.83	65,587.83	65,587.83	0.00	100%	65,587.83
16 Interest Income - Working Capital	12,504.84	12,504.84	9,576.04	2,928.80	131%	9,576.04
17 Other Local Income	1,840.82	1,840.82	141,908.30	(140,067.48)	1%	141,908.30
18 Total Other Revenue	240,497.50	240,497.50	295,271.13	(54,773.63)	81%	295,271.13 (13+14+15+16+17)
19 TOTAL REVENUE	5,789,324.80	5,789,324.80	5,628,369.82	160,954.98	103%	5,628,369.82 (7+11+18)
20 EXPENSE						
21 SUPPORTS & SERVICES						
22 Provider Claims						
23 State Facility - Local portion	25,790.39	25,790.39	16,024.00	(9,766.39)	161%	16,024.00
24 Community Hospital	715,141.60	715,141.60	479,120.30	(236,021.30)	149%	479,120.30
25 Residential Services	1,280,841.95	1,280,841.95	1,264,113.18	(16,728.77)	101%	1,264,113.18
26 Community Supports	2,014,864.73	2,014,864.73	1,886,007.10	(128,857.64)	107%	1,886,007.10
27 Total Provider Claims	4,036,638.67	4,036,638.67	3,645,264.58	(391,374.09)	111%	3,645,264.58 (23+24+25+26)
28 Operating Expenses						
29 Salaries	1,187,055.75	1,187,055.75	1,221,918.23	34,862.48	97%	1,221,918.23
30 Fringe Benefits	390,483.94	390,483.94	397,267.26	6,783.32	98%	397,267.26
31 Consumer Related	354.90	354.90	4,075.25	3,720.35	9%	4,075.25
32 Program Operations	6,748.31	6,748.31	109,879.20	103,130.89	6%	109,879.20
33 Facility Cost	34,329.04	34,329.04	58,354.93	24,025.89	59%	58,354.93
34 Purchased Services	200.00	200.00	1,838.31	1,638.31	11%	1,838.31
35 Other Operating Expense	63,343.00	63,343.00	112,967.07	49,624.07	56%	112,967.07
36 Local Funds Contribution	17,906.00	17,906.00	17,906.00	0.00	100%	17,906.00
37 Interest Expense	700.55	700.55	726.79	26.24	96%	726.79
38 Depreciation	19,444.83	19,444.83	21,901.05	2,456.22	89%	21,901.05
39 Total Operating Expenses	1,720,566.32	1,720,566.32	1,946,834.08	226,267.76	88%	1,946,834.08 (29+30+31+32+33+34+35+36+37+38)
40 TOTAL EXPENSES	5,757,204.99	5,757,204.99	5,592,098.66	(165,106.33)	103%	5,592,098.66 (27+39)
41 NET SURPLUS/(DEFICIT)	32,119.81	32,119.81	36,271.15	(4,151.34)	89%	36,271.15 (19-40)
42 Notes:						
43 Medicaid Revenue includes an accrual for additional funds if a shortage exists/(reduction) of funds if a surplus exists from/(to) Mid-State Health Network as follows:						
44 Net Medicaid to request from MSHN: \$545,246.18						
45 Medicaid surplus: \$54,163.64						
46 Healthy Michigan (shortage): (\$175,092.31)						
47 Autism (shortage): (\$424,317.51)						
48						

**BAY-ARENAC BEHAVIORAL HEALTH
RECONCILIATION OF FUND BALANCE
AS OF OCTOBER 31, 2023**

	TOTALS
Fund Balance 09/30/2023	9,435,368.98
Net (loss)/income October 2023	32,119.81
Net Increase/(Decrease) Funds Restricted for Capital Purposes	<u>-</u>
Calculated Fund Balance 10/31/2023	9,467,488.79
Statement of Net Assets Fund Balance 10/31/2023	9,467,488.79
Difference	-

**BAY-ARENAC BEHAVIORAL HEALTH
RECONCILIATION OF UNRESTRICTED FUND BALANCE
AS OF OCTOBER 31, 2023**

	<u>TOTALS</u>
Unrestricted Fund Balance 9/30/2023	5,468,715.98
Net (loss)/income October 2023	32,119.81
Increase/Decrease in net assets	<u>-</u>
Calculated Unrestricted Fund Balance 10/31/2023	5,500,835.79
Statement of Net Assets Unrestricted Fund Balance 10/31/2023	5,500,835.79
Difference	-

Bay-Arenac Behavioral Health
Fund Balance Summary

	Sept. 30, 2023 Unrestricted <u>Fund Balance</u>	Oct 31, 2023 Permanently <u>Restricted</u>	Oct 31, 2023 Temporarily <u>Restricted</u>	Oct 31, 2023 Unrestricted/ <u>Reserved</u>	Oct 31, 2023 Total <u>Fund Balance</u>
Unrestricted	3,091,115	-	-	3,123,234	3,123,234
Capital Purposes	844,325	-	-	844,325	844,325
Invested in Capital Assets	3,122,328	-	-	3,122,328	3,122,328
Performance Incentive Pool	<u>2,377,601</u>	<u>-</u>	<u>-</u>	<u>2,377,601</u>	<u>2,377,601</u>
Balances	9,435,369	-	-	9,467,489	9,467,489

**BAY-ARENAC BEHAVIORAL HEALTH
Cash Flow**

	<u>Oct 23</u>	<u>Nov 23</u>	<u>Dec 23</u>	<u>Jan 24</u>	<u>Feb 24</u>	<u>Mar 24</u>	<u>Apr 24</u>	<u>May 24</u>	<u>Jun 24</u>	<u>Jul 24</u>	<u>Aug 24</u>	<u>Sep 24</u>	<u>Oct 24</u>
Estimated Funds:													
Beginning Inv. Balance	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment	-	-	-	-	-	-	-	-	-	-	-	-	-
Additions/(Subtractions)	-	-	-	-	-	-	-	-	-	-	-	-	-
Month End Inv. Balance	-	-	-	-	-	-	-	-	-	-	-	-	-
Beginning Cash Balance	4,022,437	3,285,926	3,351,289	3,390,370	3,479,451	3,548,673	3,058,895	3,151,835	2,817,199	3,256,279	3,345,360	2,489,583	2,924,804
Total Medicaid	4,860,665	4,658,000	4,658,000	4,658,000	4,658,000	4,658,000	4,658,000	4,658,000	4,658,000	4,658,000	4,658,000	4,658,000	4,658,000
Total General Fund	135,505	135,505	135,505	135,505	135,505	135,505	135,505	135,505	135,505	135,505	135,505	135,505	135,505
Estimated Misc. Receipts	55,663	89,759	205,900	89,759	89,759	205,900	89,759	89,759	205,900	89,759	89,759	205,900	89,759
Client Receipts	118,968	55,000	55,000	55,000	55,000	55,000	55,000	55,000	55,000	55,000	55,000	55,000	55,000
Interest	10,051	6,192	10,051	6,192	10,051	6,192	10,051	6,192	10,051	6,192	10,051	6,192	10,051
Total Estimated Cash	9,203,289	8,230,381	8,415,745	8,334,826	8,427,765	8,609,270	8,007,210	8,096,291	7,881,654	8,200,735	8,293,675	7,550,179	7,873,119
Total Estimated Available Funds	9,203,289	8,230,381	8,415,745	8,334,826	8,427,765	8,609,270	8,007,210	8,096,291	7,881,654	8,200,735	8,293,675	7,550,179	7,873,119
Estimated Expenditures:													
1st Payroll	582,222	525,000	525,000	525,000	525,000	525,000	525,000	525,000	525,000	525,000	525,000	525,000	525,000
Special Pay													
ETO Buyouts													
2nd Payroll	526,388	525,000	525,000	525,000	525,000	525,000	525,000	525,000	525,000	525,000	525,000	525,000	525,000
Board Per Diem	3,052	3,343	3,343	3,343	3,343	3,343	3,343	3,343	3,343	3,343	3,343	3,343	3,343
3rd Payroll						525,000					525,000		
1st Friday Claims	578,628	500,000	500,000	500,000	500,000	500,000	500,000	500,000	500,000	500,000	500,000	500,000	500,000
Mortgage Pmt	2,032	2,032	2,032	2,032	2,032	2,032	2,032	2,032	2,032	2,032	2,032	2,032	2,032
2nd Friday Claims	1,622,987	920,000	920,000	920,000	920,000	920,000	920,000	920,000	920,000	920,000	920,000	920,000	920,000
Board Week Bay Batch	1,108,753	800,000	800,000	800,000	800,000	800,000	800,000	800,000	800,000	800,000	800,000	800,000	800,000
Board Week Claims	850,333	975,000	775,000	975,000	975,000	775,000	975,000	975,000	775,000	975,000	975,000	775,000	975,000
Credit Card	-	-	-	-	-	-	-	-	-	-	-	-	-
4th Friday Claims	612,968	575,000	575,000	575,000	575,000	575,000	575,000	575,000	575,000	575,000	575,000	575,000	575,000
5th Friday Claims			400,000			400,000					400,000		
Local FFP payment to DCH/MSHN		53,717			53,717			53,717			53,717		
Transfer to State of MI													
Transfer from/(to) Reserve Account													
Settlement with MSHN													
Transfer to (from) MMA													
Transfer to (from) HRA	30,000			30,000			30,000			30,000			30,000
Transfer to (from) Investment													
Transfer to (from) Capital Acct													
Total Estimated Expenditures	5,917,363	4,879,092	5,025,375	4,855,375	4,879,092	5,550,375	4,855,375	5,279,092	4,625,375	4,855,375	5,804,092	4,625,375	4,855,375
Estimated Month End Cash Balance	3,285,926	3,351,289	3,390,370	3,479,451	3,548,673	3,058,895	3,151,835	2,817,199	3,256,279	3,345,360	2,489,583	2,924,804	3,017,744

Bay-Arenac Behavioral Health

Cash Flow Forecasting For the Month of November

	<u>Bank Balance</u>	<u>Investment Balance</u>
Estimated Cash Balance November 1, 2023	3,285,926	-
Investment Purchased/Interest	-	-
Investments coming due during month	-	-
Estimated Cash Balance November 30, 2023	3,285,926	-
 Estimated Cash Inflow:		
Medicaid Funds:	4,658,000	
General Fund Dollars:	135,505	
Board Receipts:	89,759	
Client Receipts:	55,000	
Funds from Investment:	-	
Interest:	6,192	
Total Estimated Cash Inflow:	4,944,456	
 Estimated Cash Outflow:		
Payroll Dated: 11/09/23	(525,000)	
Board Per Diem Payroll: 11/16/23	(3,343)	
Payroll Dated: 11/22/23	(525,000)	
 Claims Disbursements: 11/03/23	(500,000)	
Claims Disbursements: 11/09/23	(920,000)	
Claims Disbursements: 11/17/23	(975,000)	
A/P Disbursements: 11/17/23	(800,000)	
Mortgage Payment: 11/22/23	(2,032)	
Claims Disbursements: 11/22/23	(575,000)	
Claims Disbursements:	-	
Local FFP Payment:	-	
Transfer to Reserve Acct:	-	
HRA transfer:	-	
Transfer to MSHN:	(53,717)	
Transfer to State of MI	-	
Purchased Investment	-	
Total Estimated Cash Outflow:	(4,879,092)	
 Estimated Cash Balance on November 30, 2023	3,351,289	-

Bay Arenac Behavioral Health
201 Mulholland, Bay City, MI 48708
Electronic Funds Transfers including Cash Transfers/Wires/ACHs
October 2023

<u>Funds Paid from/ Transferred from:</u>	<u>Funds Paid to/ Transferred to:</u>	<u>Amount</u>	<u>Date of Payment</u>	<u>Description</u>	<u>Authorized By</u>
Flagstar Bank	Flagstar Bank	13,564.86	10/5/2023	Credit Card Payment	Marci Rozek
Flagstar Bank	Flagstar Bank	581,683.34	10/5/2023	Transfer Gross Amt of Accts Payable to Payable Acct	Marci Rozek
Flagstar Bank	Flagstar Bank	1,000,000.00	10/6/2023	Transfer from General Account to MMKT Account	Marci Rozek
Flagstar Bank	Flagstar Bank	550,000.00	10/11/2023	Transfer from MMKT Account to General Account	Marci Rozek
Flagstar Bank	Huntington Nat'l Bank	4,091.18	10/12/2023	Transfer from General Account to Flex Spending Account	Marci Rozek
Flagstar Bank	Huntington Nat'l Bank	578,131.21	10/12/2023	Transfer from General Account to Payroll Account	Marci Rozek
Flagstar Bank	Flagstar Bank	30,000.00	10/12/2023	Transfer from MMKT Account to General Account	Marci Rozek
Flagstar Bank	Flagstar Bank	1,653,765.62	10/12/2023	Transfer Gross Amt of Accts Payable to Payable Acct	Marci Rozek
Flagstar Bank	Huntington Nat'l Bank	30,000.00	10/13/2023	Transfer from General Account to HRA Account	Marci Rozek
Flagstar Bank	Flagstar Bank	925,000.00	10/13/2023	Transfer from General Account to MMKT Account	Marci Rozek
Flagstar Bank	Flagstar Bank	1,427,309.26	10/19/2023	Transfer Gross Amt of Accts Payable to Payable Acct	Marci Rozek
Flagstar Bank	Huntington Nat'l Bank	3,051.88	10/20/2023	Transfer from General Account to Payroll Account	Marci Rozek
Flagstar Bank	Flagstar Bank	250,000.00	10/20/2023	Transfer from General Account to MMKT Account	Marci Rozek
Flagstar Bank	Huntington Nat'l Bank	2,031.96	10/24/2023	Transfer from General Acct for Mortgage payment	Marci Rozek
Flagstar Bank	Huntington Nat'l Bank	526,387.50	10/26/2023	Transfer from General Account to Payroll Account	Marci Rozek
Flagstar Bank	Huntington Nat'l Bank	4,252.73	10/26/2023	Transfer from General Account to Flex Spending Account	Marci Rozek
Flagstar Bank	Huntington Nat'l Bank	526,387.50	10/26/2023	Transfer from General Account to Payroll Account	Marci Rozek
Flagstar Bank	Flagstar Bank	530,000.00	10/26/2023	Transfer from MMKT Account to General Account	Marci Rozek
Flagstar Bank	Flagstar Bank	757,687.95	10/26/2023	Transfer Gross Amt of Accts Payable to Payable Acct	Marci Rozek
Flagstar Bank	Flagstar Bank	2,600,000.00	10/30/2023	Transfer from General Account to MMKT Account	Marci Rozek

Total Withdrawals: 11,993,344.99


Submitted By: Marci Rozek or Christopher Pinter
Chief Financial Officer or Chief Executive Officer

Bay Arenac Behavioral Health
201 Mulholland, Bay City, MI 48708
Electronic Funds Transfers for Vendor ACH Payments
October 2023

<u>Funds Paid from:</u>	<u>EFT #</u>	<u>Funds Paid to:</u>	<u>Amount</u>	<u>Date of Pmt</u>	<u>Authorized By</u>
Flagstar Bank	E4410	SAGINAW CO CMH AUTHORITY	267.88	10/6/2023	Marci Rozek
Flagstar Bank	E4411	HAVENWYCK HOSPITAL	5,166.00	10/6/2023	Marci Rozek
Flagstar Bank	E4412	HOPE NETWORK BEHAVIORAL HEALTH	336.83	10/6/2023	Marci Rozek
Flagstar Bank	E4413	Fitzhugh House, LLC	11,174.40	10/6/2023	Marci Rozek
Flagstar Bank	E4414	Bay Human Services, Inc.	2,532.90	10/6/2023	Marci Rozek
Flagstar Bank	E4415	MICHIGAN COMMUNITY SERVICES IN	1,064.73	10/6/2023	Marci Rozek
Flagstar Bank	E4416	LIBERTY LIVING, INC.	42,714.60	10/6/2023	Marci Rozek
Flagstar Bank	E4417	DISABILITY NETWORK	14,060.80	10/6/2023	Marci Rozek
Flagstar Bank	E4418	SAMARITAS	21,496.44	10/6/2023	Marci Rozek
Flagstar Bank	E4419	HEALTHSOURCE	31,845.00	10/6/2023	Marci Rozek
Flagstar Bank	E4420	FOREST VIEW HOSPITAL	12,324.00	10/6/2023	Marci Rozek
Flagstar Bank	E4421	MPA GROUP NFP, Ltd.	21,547.65	10/6/2023	Marci Rozek
Flagstar Bank	E4422	LIST PSYCHOLOGICAL SERVICES	2,222.13	10/6/2023	Marci Rozek
Flagstar Bank	E4423	SAGINAW PSYCHOLOGICAL SERVICES	20,873.44	10/6/2023	Marci Rozek
Flagstar Bank	E4424	PARAMOUNT REHABILITATION	11,323.57	10/6/2023	Marci Rozek
Flagstar Bank	E4425	Nutrition for Wellness	583.20	10/6/2023	Marci Rozek
Flagstar Bank	E4426	Raphael, Ann Marie	1,687.60	10/6/2023	Marci Rozek
Flagstar Bank	E4427	WILSON, STUART T. CPA, P.C.	62,570.82	10/6/2023	Marci Rozek
Flagstar Bank	E4428	CAREBUILDERS AT HOME, LLC	6,367.92	10/6/2023	Marci Rozek
Flagstar Bank	E4429	CENTRIA HEALTHCARE LLC	12,162.00	10/6/2023	Marci Rozek
Flagstar Bank	E4430	GAME CHANGER PEDIATRIC THERAPY	71,340.86	10/6/2023	Marci Rozek
Flagstar Bank	E4431	ENCOMPASS THERAPY CENTER LLC	61,123.95	10/6/2023	Marci Rozek
Flagstar Bank	E4432	Acorn Health of Michigan	2,581.60	10/6/2023	Marci Rozek
Flagstar Bank	E4433	MERCY PLUS HEALTHCARE SERVICES LLC	32,011.30	10/6/2023	Marci Rozek
Flagstar Bank	E4434	HAVENWYCK HOSPITAL	6,888.00	10/13/2023	Marci Rozek
Flagstar Bank	E4435	HOPE NETWORK BEHAVIORAL HEALTH	66,940.75	10/13/2023	Marci Rozek
Flagstar Bank	E4436	Hope Network Southeast	79,097.92	10/13/2023	Marci Rozek
Flagstar Bank	E4437	BEACON SPECIALIZED LIVING SVS	17,037.60	10/13/2023	Marci Rozek
Flagstar Bank	E4438	Fitzhugh House, LLC	11,174.40	10/13/2023	Marci Rozek
Flagstar Bank	E4439	Bay Human Services, Inc.	418,001.41	10/13/2023	Marci Rozek
Flagstar Bank	E4440	MICHIGAN COMMUNITY SERVICES IN	292,589.78	10/13/2023	Marci Rozek
Flagstar Bank	E4441	CENTRAL STATE COMM. SERVICES	39,431.70	10/13/2023	Marci Rozek
Flagstar Bank	E4442	VALLEY RESIDENTIAL SERVICES	81,928.08	10/13/2023	Marci Rozek
Flagstar Bank	E4443	LIBERTY LIVING, INC.	43,986.62	10/13/2023	Marci Rozek
Flagstar Bank	E4444	SUPERIOR CARE OF MICHIGAN LLC	7,947.00	10/13/2023	Marci Rozek
Flagstar Bank	E4445	Closer to Home, LLC	17,848.70	10/13/2023	Marci Rozek
Flagstar Bank	E4446	DISABILITY NETWORK	15,943.24	10/13/2023	Marci Rozek
Flagstar Bank	E4447	SAMARITAS	376.80	10/13/2023	Marci Rozek
Flagstar Bank	E4448	HEALTHSOURCE	54,260.76	10/13/2023	Marci Rozek
Flagstar Bank	E4449	FOREST VIEW HOSPITAL	27,729.00	10/13/2023	Marci Rozek
Flagstar Bank	E4450	CEDAR CREEK HOSPITAL	1,400.00	10/13/2023	Marci Rozek
Flagstar Bank	E4451	MPA GROUP NFP, Ltd.	40,181.36	10/13/2023	Marci Rozek
Flagstar Bank	E4452	LIST PSYCHOLOGICAL SERVICES	1,055.73	10/13/2023	Marci Rozek
Flagstar Bank	E4453	SAGINAW PSYCHOLOGICAL SERVICES	12,476.42	10/13/2023	Marci Rozek
Flagstar Bank	E4454	PARAMOUNT REHABILITATION	11,962.27	10/13/2023	Marci Rozek
Flagstar Bank	E4455	Nutrition for Wellness	1,061.70	10/13/2023	Marci Rozek
Flagstar Bank	E4456	WILSON, STUART T. CPA, P.C.	63,709.83	10/13/2023	Marci Rozek
Flagstar Bank	E4457	AUTISM SYSTEMS LLC	4,512.73	10/13/2023	Marci Rozek
Flagstar Bank	E4458	CENTRIA HEALTHCARE LLC	18,030.85	10/13/2023	Marci Rozek
Flagstar Bank	E4459	GAME CHANGER PEDIATRIC THERAPY	76,670.80	10/13/2023	Marci Rozek
Flagstar Bank	E4460	ENCOMPASS THERAPY CENTER LLC	59,409.57	10/13/2023	Marci Rozek
Flagstar Bank	E4461	Acorn Health of Michigan	2,391.05	10/13/2023	Marci Rozek
Flagstar Bank	E4462	MERCY PLUS HEALTHCARE SERVICES LLC	19,943.20	10/13/2023	Marci Rozek
Flagstar Bank	E4463	SAGINAW PSYCHOLOGICAL SERVICES	5,311.10	10/13/2023	Marci Rozek

Flagstar Bank	E4464	Nutrition for Wellness	250.00	10/13/2023	Marci Rozek
Flagstar Bank	E4465	Acorn Health of Michigan	692.84	10/13/2023	Marci Rozek
Flagstar Bank	E4466	MICHIGAN COMMUNITY SERVICES IN	686.99	10/20/2023	Marci Rozek
Flagstar Bank	E4467	SAGINAW PSYCHOLOGICAL SERVICES	330.00	10/20/2023	Marci Rozek
Flagstar Bank	E4468	A2Z CLEANING & RESTORATION INC.	3,871.83	10/20/2023	Marci Rozek
Flagstar Bank	E4469	ADLER, THERESA	49.65	10/20/2023	Marci Rozek
Flagstar Bank	E4470	Badour Heating & Cooling	95.00	10/20/2023	Marci Rozek
Flagstar Bank	E4471	Beebe Construction, LLC	1,958.07	10/20/2023	Marci Rozek
Flagstar Bank	E4472	Beson, Heather	60.72	10/20/2023	Marci Rozek
Flagstar Bank	E4473	BICKEL, MEREDITH	220.08	10/20/2023	Marci Rozek
Flagstar Bank	E4474	Bryan, Kelly	320.96	10/20/2023	Marci Rozek
Flagstar Bank	E4475	BYRNE, RICHARD	288.20	10/20/2023	Marci Rozek
Flagstar Bank	E4476	CERESKE, KIM	72.15	10/20/2023	Marci Rozek
Flagstar Bank	E4477	COOK, BRIANNA	272.48	10/20/2023	Marci Rozek
Flagstar Bank	E4478	Cook, Jordyn	46.51	10/20/2023	Marci Rozek
Flagstar Bank	E4479	Deshano, Jennifer	251.52	10/20/2023	Marci Rozek
Flagstar Bank	E4480	Diebel, Kari	474.09	10/20/2023	Marci Rozek
Flagstar Bank	E4481	Dunnem, Emily	218.62	10/20/2023	Marci Rozek
Flagstar Bank	E4482	ERGOMED PRODUCTS, INC.	412.00	10/20/2023	Marci Rozek
Flagstar Bank	E4483	FLEX ADMINISTRATORS INC	1,463.50	10/20/2023	Marci Rozek
Flagstar Bank	E4484	FRIEBE, HEATHER	65.50	10/20/2023	Marci Rozek
Flagstar Bank	E4485	Griffus, ,Penny	609.81	10/20/2023	Marci Rozek
Flagstar Bank	E4486	HANEY, MELISSA	332.21	10/20/2023	Marci Rozek
Flagstar Bank	E4487	HARLESS, MICHELLA	315.06	10/20/2023	Marci Rozek
Flagstar Bank	E4488	HEINRICH, KAREN	272.83	10/20/2023	Marci Rozek
Flagstar Bank	E4489	HEWTTY, MARIA	150.58	10/20/2023	Marci Rozek
Flagstar Bank	E4490	HOSPITAL PSYCHIATRY PLLC	42,000.00	10/20/2023	Marci Rozek
Flagstar Bank	E4491	Iris Telehealth Medical Group, PA	29,400.00	10/20/2023	Marci Rozek
Flagstar Bank	E4492	KING COMMUNICATIONS	202.90	10/20/2023	Marci Rozek
Flagstar Bank	E4493	KOIN, STACEY E.	189.30	10/20/2023	Marci Rozek
Flagstar Bank	E4494	KRASINSKI, STACY	52.86	10/20/2023	Marci Rozek
Flagstar Bank	E4495	MOSCISKI, DEIDRA	497.80	10/20/2023	Marci Rozek
Flagstar Bank	E4496	MOVVA, USHA	13,200.00	10/20/2023	Marci Rozek
Flagstar Bank	E4497	Mulvaney, Sarah	139.52	10/20/2023	Marci Rozek
Flagstar Bank	E4498	NETSOURCE ONE, INC.	30,021.98	10/20/2023	Marci Rozek
Flagstar Bank	E4499	Niemiec, Kathleen	64.05	10/20/2023	Marci Rozek
Flagstar Bank	E4500	NIX, HEATHER	117.90	10/20/2023	Marci Rozek
Flagstar Bank	E4501	PRO-SCAPE, INC.	157.86	10/20/2023	Marci Rozek
Flagstar Bank	E4502	Reese, Marie	82.53	10/20/2023	Marci Rozek
Flagstar Bank	E4503	RICKER, AMY	170.30	10/20/2023	Marci Rozek
Flagstar Bank	E4504	Rooker, Stephani	97.14	10/20/2023	Marci Rozek
Flagstar Bank	E4505	ROSE, KEVIN	48.47	10/20/2023	Marci Rozek
Flagstar Bank	E4506	SHRED EXPERTS LLC	217.50	10/20/2023	Marci Rozek
Flagstar Bank	E4507	SHUR-SHINE JANITORIAL SERVICES	1,016.67	10/20/2023	Marci Rozek
Flagstar Bank	E4508	SPELLERBERG, MELISSA	17.00	10/20/2023	Marci Rozek
Flagstar Bank	E4509	Staples	5,557.17	10/20/2023	Marci Rozek
Flagstar Bank	E4510	Strode, Eric	19.75	10/20/2023	Marci Rozek
Flagstar Bank	E4511	Tenney, Ben	256.11	10/20/2023	Marci Rozek
Flagstar Bank	E4512	Thomas, Linda	132.24	10/20/2023	Marci Rozek
Flagstar Bank	E4513	Truhn, Emelia	137.81	10/20/2023	Marci Rozek
Flagstar Bank	E4514	VanWert, Laurie	49.59	10/20/2023	Marci Rozek
Flagstar Bank	E4515	VANWORMER, PAMELA	183.41	10/20/2023	Marci Rozek
Flagstar Bank	E4516	VASCONCELOS, FLAVIA	247.20	10/20/2023	Marci Rozek
Flagstar Bank	E4517	VOGEL, HOLLI	748.01	10/20/2023	Marci Rozek
Flagstar Bank	E4518	NETSOURCE ONE, INC.	38,082.45	10/20/2023	Marci Rozek
Flagstar Bank	E4519	AUGRES CARE CENTER, INC	7,560.34	10/20/2023	Marci Rozek
Flagstar Bank	E4520	BEACON SPECIALIZED LIVING SVS	246.80	10/20/2023	Marci Rozek
Flagstar Bank	E4521	Bay Human Services, Inc.	97,727.45	10/20/2023	Marci Rozek
Flagstar Bank	E4522	MICHIGAN COMMUNITY SERVICES IN	87,939.80	10/20/2023	Marci Rozek
Flagstar Bank	E4523	VALLEY RESIDENTIAL SERVICES	1,232.60	10/20/2023	Marci Rozek
Flagstar Bank	E4524	HEALTHSOURCE	13,510.00	10/20/2023	Marci Rozek

Flagstar Bank	E4525	FOREST VIEW HOSPITAL	48,269.00	10/20/2023	Marci Rozek
Flagstar Bank	E4526	CEDAR CREEK HOSPITAL	1,600.00	10/20/2023	Marci Rozek
Flagstar Bank	E4527	MPA GROUP NFP, Ltd.	32,349.78	10/20/2023	Marci Rozek
Flagstar Bank	E4528	LIST PSYCHOLOGICAL SERVICES	120.23	10/20/2023	Marci Rozek
Flagstar Bank	E4529	SAGINAW PSYCHOLOGICAL SERVICES	17,438.68	10/20/2023	Marci Rozek
Flagstar Bank	E4530	Nutrition for Wellness	338.90	10/20/2023	Marci Rozek
Flagstar Bank	E4531	Raphael, Ann Marie	60.00	10/20/2023	Marci Rozek
Flagstar Bank	E4532	WILSON, STUART T. CPA, P.C.	88,756.40	10/20/2023	Marci Rozek
Flagstar Bank	E4533	CAREBUILDERS AT HOME, LLC	29,070.12	10/20/2023	Marci Rozek
Flagstar Bank	E4534	AUTISM SYSTEMS LLC	3,716.98	10/20/2023	Marci Rozek
Flagstar Bank	E4535	GAME CHANGER PEDIATRIC THERAPY	79,585.28	10/20/2023	Marci Rozek
Flagstar Bank	E4536	ENCOMPASS THERAPY CENTER LLC	63,037.87	10/20/2023	Marci Rozek
Flagstar Bank	E4537	Acorn Health of Michigan	252.11	10/20/2023	Marci Rozek
Flagstar Bank	E4538	MERCY PLUS HEALTHCARE SERVICES LLC	1,553.60	10/20/2023	Marci Rozek
Flagstar Bank	E4539	FOREST VIEW HOSPITAL	28,552.50	10/20/2023	Marci Rozek
Flagstar Bank	E4540	SAGINAW PSYCHOLOGICAL SERVICES	15,326.05	10/20/2023	Marci Rozek
Flagstar Bank	E4541	PARAMOUNT REHABILITATION	6,056.64	10/20/2023	Marci Rozek
Flagstar Bank	E4542	ARENAC OPPORTUNITIES, INC	17,830.00	10/20/2023	Marci Rozek
Flagstar Bank	E4542	ARENAC OPPORTUNITIES, INC	17,830.00-	10/20/2023	Marci Rozek
Flagstar Bank	E4543	DO-ALL, INC.	45,855.00	10/20/2023	Marci Rozek
Flagstar Bank	E4543	DO-ALL, INC.	45,855.00-	10/20/2023	Marci Rozek
Flagstar Bank	E4544	New Dimensions	39,445.00	10/20/2023	Marci Rozek
Flagstar Bank	E4544	New Dimensions	39,445.00-	10/20/2023	Marci Rozek
Flagstar Bank	E4545	TOUCHSTONE SERVICES, INC	36,771.00	10/20/2023	Marci Rozek
Flagstar Bank	E4545	TOUCHSTONE SERVICES, INC	36,771.00-	10/20/2023	Marci Rozek
Flagstar Bank	E4546	Raphael, Ann Marie	1,593.20	10/20/2023	Marci Rozek
Flagstar Bank	E4547	ENCOMPASS THERAPY CENTER LLC	20,238.60	10/20/2023	Marci Rozek
Flagstar Bank	E4548	Acorn Health of Michigan	1,660.01	10/20/2023	Marci Rozek
Flagstar Bank	E4549	MERCY PLUS HEALTHCARE SERVICES LLC	18,454.56	10/20/2023	Marci Rozek
Flagstar Bank	E4550	STATE OF MICHIGAN DEPT OF COMM HEALTH A	25,857.39	10/20/2023	Marci Rozek
Flagstar Bank	E4551	UNITED WAY OF BAY COUNTY/RENT	2,125.00	10/27/2023	Marci Rozek
Flagstar Bank	E4552	CENTRAL STATE COMM. SERVICES	134.01	10/27/2023	Marci Rozek
Flagstar Bank	E4553	LIBERTY LIVING, INC.	36,870.98	10/27/2023	Marci Rozek
Flagstar Bank	E4554	HEALTHSOURCE	48,250.00	10/27/2023	Marci Rozek
Flagstar Bank	E4555	MPA GROUP NFP, Ltd.	44,402.13	10/27/2023	Marci Rozek
Flagstar Bank	E4556	LIST PSYCHOLOGICAL SERVICES	5,091.30	10/27/2023	Marci Rozek
Flagstar Bank	E4557	Nutrition for Wellness	166.40	10/27/2023	Marci Rozek
Flagstar Bank	E4558	WILSON, STUART T. CPA, P.C.	2,643.79	10/27/2023	Marci Rozek
Flagstar Bank	E4559	AUTISM SYSTEMS LLC	1,061.24	10/27/2023	Marci Rozek
Flagstar Bank	E4560	PERSONAL ASSISTANCE OPTIONS INC	35,249.64	10/27/2023	Marci Rozek
Flagstar Bank	E4561	Acorn Health of Michigan	687.45	10/27/2023	Marci Rozek
Flagstar Bank	E4562	Fitzhugh House, LLC	11,486.70	10/27/2023	Marci Rozek
Flagstar Bank	E4563	LIBERTY LIVING, INC.	27,395.25	10/27/2023	Marci Rozek
Flagstar Bank	E4564	HEALTHSOURCE	13,338.00	10/27/2023	Marci Rozek
Flagstar Bank	E4565	CEDAR CREEK HOSPITAL	5,273.75	10/27/2023	Marci Rozek
Flagstar Bank	E4566	LIST PSYCHOLOGICAL SERVICES	5,929.57	10/27/2023	Marci Rozek
Flagstar Bank	E4567	SAGINAW PSYCHOLOGICAL SERVICES	18,863.17	10/27/2023	Marci Rozek
Flagstar Bank	E4568	PARAMOUNT REHABILITATION	1,132.72	10/27/2023	Marci Rozek
Flagstar Bank	E4569	Nutrition for Wellness	1,472.10	10/27/2023	Marci Rozek
Flagstar Bank	E4570	WILSON, STUART T. CPA, P.C.	60,873.26	10/27/2023	Marci Rozek
Flagstar Bank	E4571	GAME CHANGER PEDIATRIC THERAPY	71,741.47	10/27/2023	Marci Rozek
Flagstar Bank	E4572	ENCOMPASS THERAPY CENTER LLC	7,779.93	10/27/2023	Marci Rozek
Flagstar Bank	E4573	Acorn Health of Michigan	4,851.68	10/27/2023	Marci Rozek

Total Withdrawals:

3,224,491.14



Submitted By: Marci Rozek or Christopher Pinter
Chief Financial Officer or Chief Executive Officer

November 14, 2023

To: Sara McRae, Executive Assistant to the CEO
From: Karl White, Accounting Manager
Ellen Lesniak, Finance Manager
Re: Disbursement Audit Information for Audit Committee

The following is a summary of disbursements as presented

Administration and Services for Behavioral Health

11/17/23 Checks Sequence: #98772-98862, ACH E4653-E4715

Employee travel, conference	\$ 16,882.73
Purchase Order Invoices	\$ 12,158.05
Invoices for Routine Maintenance, services, purchase requisition invoices	\$ 120,532.89
Recurring invoices, utilities, phone, leases	\$ 99,658.15

SUBTOTAL - Monthly Batch **\$ 249,231.82**

ITEMS FOR REVIEW:

EFT transfer - Credit Card 11/06/2023 **\$ 17,517.40**

Weekly Special Checks:

10/27/2023 Checks 98711-98726, E4551	\$ 50,824.58
11/03/2023 Checks 98750-98756	\$ 33,405.01
11/09/2023 Checks 98764-98768, E4652	\$ 33,793.99

SUBTOTAL - Special Checks **\$ 118,023.58**

Health Care payments

10/20/2023 Checks 98700-98710, ACH Pmts E4519-E4550	\$ 850,333.00
10/27/2023 Checks 98727-98738, ACH Pmts E4552-E4573	\$ 612,967.53
11/03/2023 Checks 98743-98749, ACH Pmts E4574-E4603	\$ 767,268.63
11/09/2023 Checks 98757-98763, ACH Pmts E4604-E4651	\$ 1,593,324.27

SUBTOTAL - Health Care Payments **\$ 3,823,893.43**

TOTAL DISBURSEMENTS **\$ 4,208,666.23**

Prepared by:

Karl White

Reviewed by:

Ellen Lesniak

The first Democratic-majority Legislature in 40 years wrapped up their legislative activity on Thursday, November 9, but officially will not end its work until Tuesday, November 14 – no additional votes will be taken on 11/14. This year is the first time the House and Senate has adjourned before Thanksgiving since 1968.

Both chambers passed resolutions today setting Nov. 14 as its “sine die” session, in which the Legislature adjourns without date, meaning that, barring an unexpected special session called by the Governor, lawmakers won’t return until Jan. 10.

The early adjournment stems from a constitutional requirement that a bill cannot become law until 90 days after the session adjourns unless it receives support from two-thirds of the members of each chamber to give it “immediate effect.” Items not receiving immediate effect include legislation to move up Michigan’s presidential primary to February 27, various tax changes that include eliminating the state’s retirement tax and changes to EITC (there is a desire to have them go into effect before tax season), gun reform legislation and Proposal 2 implementation reform bills, which will need to go into effect by February 27, 2024.

On a VERY IMPORTANT side note, on Tuesday, November 7, Representatives Lori Stone (D-Warren) and Kevin Coleman (D-Westland) won their respective elections for mayor. They are expected to submit their resignation to the Speaker of the House and be sworn into their new offices early next week. Once the vacancies are official, Governor Gretchen Whitmer will be able to call a special election for those two House seats to be filled. At this time, we reasonably expect to see special general elections to be completed by early May. The vacancies left by Stone and Coleman leave the House with a 54-54 split between Democrats and Republicans. With two members missing the House need 55 votes to pass any piece of legislation, any bills considered before the House would require at least 1 Republican to vote in favor of the legislation should they convene and vote on bills. Committees will be able to operate as normal and the budget process will consume much of the early activity (which is done in the committee process), we expect very limited action on the House floor while there is a two-seat vacancy in the House.

Prior to adjourning the House and Senate did pass a number of democratic priorities:

- **The Reproductive Health Act:** ends requirement for separate insurance policy to pay for abortions, removes ban on procedure called “partial birth abortion”, and removes regulations on clinics where abortions are performed. The final package did not include removing the “informed consent” law that requires a 24-hour waiting period before a woman can obtain an abortion due to opposition from Rep. Karen Whitsett (D-Detroit)
- **Clean Energy by 2040:** quadruples the state’s renewable energy mandate, creates a new clean energy standard, and moves siting decisions for larger-scale solar and wind projects to the Public Service Commission vs local control.
- **Financial Disclosures:** stemming from the passage of Proposal 1 in 2023, the legislation requires elected officials and their spouses to report financial records, including income streams and assets valued over \$1000.
- **Supplemental Appropriations:** provides for previous (FY 23) and current (FY 24) fiscal year adjustments totaling over \$640 million in year-end supplemental spending. [House Bill 4292](#) and [Senate Bill 174](#) includes close of books spending and transfers, but most notably a combined \$114.1 million in outstanding school debt relief.

During the fall legislative session, we did see some movement on (and were disappointed by the lack of movement) legislation impacting the public mental health system, those items include:

SB 227 – sent to the Governor on 11/08/2023

Would amend the childcare licensing Act to allow for emergency physical management/therapeutic de-escalation (certain levels of restraint & seclusion) in certain children's residential settings.

- Children's Therapeutic Group Homes
- PRTFs (Psychiatric Residential Treatment Facilities)
- CCI (Child Caring Institutions)

MDHHS supports the bill, the Governor will sign it, **special THANK YOU to Deb Johnson and the entire team at St. Clair County CMH for their work on this item.**

Telehealth Bills - the full House passed the package on Thursday, November 9, but the Senate will not be able to take action until the Legislature comes back in January.

HB 4213 would require telemedicine coverage for SUD and behavioral health services, and HBs 4579, 4580 & 4131 would require equitable coverage and reimbursement for telehealth services compared to in-person.

Blue Cross Blue Shield and the health plans have been opposed to the passage of this package as well, which has slowed down their passage.

NO MOVEMENT on the Parity Bills

SB 27 – passed the Full Senate on 10/18/23 – sent to the House Insurance Committee, but the committee did not meeting again before adjournment.

- SB 27 simply codifies the federal parity protections, putting into Michigan state law.

HB 4707 – still waiting for a final passage vote on the House Floor, was removed from the House agenda on 10/25/23

Blue Cross Blue Shield and the health plans have been vigorously fighting the passage of HB 4707 describing it as a costly discriminatory mandate and thus far have prevented a vote of the full House.

HB 4707 would expand on the federal parity law and offer additional key protections for people with employer/commercial based insurance. The bill would call for medical necessity to be based on science and ensure it is clinically appropriate in terms of type, frequency, extent, site, and duration. It would also make key changes to out-of-network services, requiring insurers to not change anymore for out-of-network services as in-network services, if they don't offer reasonable options.

Social Worker Licensure bills – the House Behavioral Health Policy Subcommittee took testimony on 11/09/23, hoping this will be a 2023 action item.

HBs 5184 & 5185 – eliminate test as part of licensure and Tie Michigan's social work licensure to the variables most directly tied to the quality of social work practice: meeting rigorous national higher education standards and the completion of thousands of hours of hands-on supervised practice

Bill	Sponsors	Description	Status	Position	Notes
HB 4015 1/12/23	Conlin(D)	Prescriptions Provides limit amount on co-pay for pre-prescription insulin	Referred To Committee On Insurance And Financial Services (1/12/23)		
HB 4121 2/22/23	Breen(D) - 24 co-sponsors	Health Professionals Provides permanent revocation of license or registration if convicted of sexual conduct under pretext of medical treatment.	Assigned Pa 47'23 With Immediate Effect (6/28/23)		
HB 4122 2/22/23	Hope(D) - 28 co-sponsors	Health Professionals Provides permanent revocation of license or registration if convicted of sexual conduct under pretext of medical treatment.	Assigned Pa 48'23 With Immediate Effect (7/18/23)		
HB 4131 2/22/23	Liberati(D) - 13 co-sponsors	Health Insurers Modifies coverage for health care services provided through telemedicine.	Transmitted (11/9/23)		
HB 4171 3/2/23	VanderWall(R) - 9 cosponsors	Professional Guardian Modifies priority of a professional guardian.	Referred To Committee On Judiciary (3/2/23)		
HB 4213 3/8/23	Morse(D) - 23 co-sponsors	Telemedicine Provides definition of distant site for a telemedicine visit.	Transmitted (11/9/23)		
HB 4214 3/8/23	Fitzgerald(D) - 21 cosponsors	Hospitals Establishes trigger lock distribution program.	Referred To Committee On Judiciary (3/8/23)		
HB 4215 3/8/23	Carter(D) - 21 co-sponsors	Sales Tax Provides sales tax distribution for trigger locks.	Referred To Committee On Tax Policy (3/8/23)		
HB 4389 4/12/23	Arbit(D) - 28 co-sponsors	Excused Absences Allows a certain number of excused mental health days.	Referred To Committee On Education (4/12/23)		
HB 4523 5/4/23	Hope(D) - 21 co-sponsors	Mental Health Court Modifies violent offender eligibility for mental health court.	Referred To Committee On Civil Rights, Judiciary, And Public Safety (11/1/23)		

Bill	Sponsors	Description	Status	Position	Notes
HB 4524 5/4/23	Andrews(D) - 20 cosponsors	Drug Treatment Courts Modifies termination procedure for drug treatment courts.	Referred To Committee On Civil Rights, Judiciary, And Public Safety (11/1/23)		
HB 4525 5/4/23	Filler(R) - 22 cosponsors	Drug Treatment Court Modifies violent offender eligibility for drug treatment court.	Referred To Committee On Civil Rights, Judiciary, And Public Safety (11/1/23)		
HB 4550 5/11/23	Young(D) - 46 cosponsors	Health Occupations - Nurses Requires development of a staffing plan for nurses.	Referred To Committee On Health Policy (5/11/23)		
HB 4551 5/11/23	Coffia(D) - 47 cosponsors	Health Occupations - Nurses Prohibits mandatory overtime for nurses except under certain circumstances.	Referred To Committee On Health Policy (5/11/23)		
HB 4552 5/11/23	Rheingans(D) - 47 cosponsors	Nurse-to-Patient Ratios Requires hospitals to maintain record of direct care registered professional nurse-to-patient ratios for each unit for each shift.	Referred To Committee On Health Policy (5/11/23)		
HB 4574 5/16/23	Scott(D) - 35 cosponsors	Family Leave Provides family leave optimal coverage benefits.	Referred To Committee On Labor (5/16/23)		
HB 4575 5/16/23	Scott(D) - 35 cosponsors	Family Leave Provides deduction for family leave optimal coverage benefits.	Referred To Committee On Tax Policy (5/16/23)		
HB 4576 5/16/23	VanderWall(R)	Behavioral Health Services Provides specialty integrated plan for in behavioral health services.	Referred To Committee On Health Policy (5/16/23)	Oppose	
HB 4577 5/16/23	VanderWall(R)	Mental Health Provides updates regarding the transition from specialty prepaid inpatient health plans to specialty integration plans.	Referred To Committee On Health Policy (5/16/23)	Oppose	
HB 4579 5/16/23	Price(D) - 27 cosponsors	Telehealth Visits Requires reimbursement rate for telehealth visits to be the same as reimbursements for office visits.	Transmitted (11/9/23)		

Bill	Sponsors	Description	Status	Position	Notes
HB 4580 5/16/23	Brabec(D) - 27 co-sponsors	Telehealth Visits Requires reimbursement rate for telehealth visits to be the same as reimbursements for office visits.	Transmitted (11/9/23)		
HB 4616 5/23/23	Brabec(D) - 38 co-sponsors	Conversion Therapy Prohibits conversion therapy.	Assigned Pa 117'23 (8/22/23)		
HB 4617 5/23/23	Hoskins(D) - 38 cosponsors	Conversion Therapy Provides definition of conversion therapy.	Assigned Pa 118'23 (8/22/23)		
HB 4624 5/23/23	Morse(D) - 31 co-sponsors	Children's Services Increases county child care fund reimbursement rate.	Referred To Second Reading (9/26/23)		
HB 4625 5/23/23	Carter(D) - 29 co-sponsors	Juvenile Justice Services Requires use of screening tool for minors eligible for a certain diversion option.	Bill Ordered Enrolled (11/8/23)		
HB 4626 5/23/23	Hope(D) - 29 co-sponsors	Juvenile Justice Services Limits length of time youth can be placed on precourt diversion program.	Bill Ordered Enrolled (11/8/23)		
HB 4627 5/23/23	Tsernoglou(D) - 31 cosponsors	Juvenile Justice Services Requires use of risk and needs assessment for juveniles in the juvenile justice system before disposition.	Referred To Second Reading (9/26/23)		
HB 4628 5/23/23	Brabec(D) - 30 co-sponsors	Juvenile Justice Services Requires use of screening tool for minors sought to be placed on the consent calendar.	Bill Ordered Enrolled (11/8/23)		
HB 4629 5/23/23	O'Neal(D) - 30 co-sponsors	Juvenile Justice Services Modifies detention of juveniles in certain circumstances.	Bill Ordered Enrolled (11/8/23)		
HB 4630 5/23/23	Lightner(R) - 31 co-sponsors	Indigent Defense Commission Expands Michigan indigent defense commission act duties to include indigent defense of youth.	Placed On Order Of Third Reading (10/31/23)		

Bill	Sponsors	Description	Status	Position	Notes
HB 4631 5/23/23	Lightner(R) - 28 co-sponsors	Juvenile Justice Services Includes requirement of duties of the appellate defender to defend youth.	Referred To Second Reading (9/26/23)		
HB 4632 5/23/23	Mueller(R) - 33 co-sponsors	Juvenile Justice Services Modifies juvenile justice residential per diem rates.	Referred To Second Reading (9/26/23)		
HB 4687 5/30/23	Wozniak(R) - 1 co-sponsors	No-Fault Insurance Requires choice of either an independent medical exam or a utilization review.	Referred To Committee On Insurance And Financial Services (5/30/23)		
HB 4690 5/30/23	Coffia(D) - 9 co-sponsors	Substance Abuse Modifies notice of a defendant's right to secular substance abuse disorder treatment.	Referred To Committee On Judiciary (5/30/23)		
HB 4707 6/7/23	Brabec(D) - 38 co-sponsors	Health Insurers Modifies coverage for intermediate and outpatient care for substance use disorder.	Placed On Third Reading (10/24/23)		
HB 4730 6/13/23	VanderWall(R) - 3 cosponsors	Preceptors Provides credit for certain physicians and physician's assistants who serve as a preceptor.	Referred To Committee On Tax Policy (6/13/23)		
HB 4731 6/13/23	Roth(R) - 3 co-sponsors	Preceptors Provides credit for certain advanced practice registered nurses who serve as a preceptor.	Referred To Committee On Tax Policy (6/13/23)		
HB 4745 6/14/23	BeGole(R) - 4 co-sponsors	Mental Health Expands petition for access to assisted outpatient treatment to additional health providers.	Referred To Committee On Health Policy (6/14/23)		
HB 4746 6/14/23	Steele(R) - 4 co-sponsors	Mental Health Provides outpatient treatment for misdemeanor offenders with mental health issues.	Referred To Committee On Health Policy (6/14/23)		

Bill	Sponsors	Description	Status	Position	Notes
HB 4747 6/14/23	Kuhn(R) - 4 co-sponsors	Mental Health Expands hospital evaluations for assisted outpatient treatment.	Referred To Committee On Health Policy (6/14/23)		
HB 4748 6/14/23	Tisdell(R) - 4 co-sponsors	Mental Health Allows use of mediation as a first step in dispute resolution.	Referred To Committee On Health Policy (6/14/23)		
HB 4749 6/14/23	Harris(R) - 4 co-sponsors	Community Mental Health Provides community mental health oversight of competency exams for defendants charged with misdemeanors.	Referred To Committee On Health Policy (6/14/23)		
HB 4833 6/22/23	Puri(D)	Substance Use Treatment Modifies licensure for substance use disorder service programs.	Referred To Committee On Health Policy (6/22/23)		
HB 4834 6/22/23	Whitsett(D) - 6 co-sponsors	Certificate of Need Eliminates cone-beam tomography equipment from definition of a covered clinical service under certain circumstances.	Referred To Committee On Health Policy (6/22/23)		
HB 4841 6/22/23	Young(D) - 31 co-sponsors	Adult Foster Care Provides for enhanced standards on adult foster care facilities.	Referred To Committee On Families, Children And Seniors (6/22/23)	Oppose	
HB 4935 8/24/23	Green(R)	Health Occupations - Nurses Enacts nurse licensure compact.	Referred To Committee On Health Policy (8/24/23)		
HB 5072 9/28/23	Thompson(R) - 17 cosponsors	Electronic Records Provides requirements for security and storage of electronic health records.	Referred To Committee On Government Operations (9/28/23)		
HB 5077 10/3/23	VanderWall(R) - 22 cosponsors	Naloxone Provides distribution of naloxone under the administration of opioid antagonist act to any individual.	Referred To Committee On Health Policy (10/3/23)		
HB 5078 10/3/23	Rheingans(D) - 22 cosponsors	Controlled Substances Provides distribution of opioid antagonists by employees and agents of agencies under the administration of opioid antagonists act.	Referred To Committee On Health Policy (10/3/23)		

Bill	Sponsors	Description	Status	Position	Notes
HB 5080 10/3/23	Hoadley(R) - 19 co-sponsors	Certificate Of Need Eliminates requirement to obtain a certificate of need for air ambulance.	Referred To Committee On Insurance And Financial Services (10/3/23)		
HB 5114 10/10/23	Rheingans(D) - 20 cosponsors	Mental Health Professionals Expands definition of mental health professional to include physician assistants, certified nurse practitioners, and clinical nurse specialists-certified, and allows them to perform certain examinations.	Referred To Committee On Health Policy (10/10/23)		
HB 5115 10/10/23	McKinney(D) - 19 cosponsors	Occupations - Physician's Assistants Modifies delegation of acts, tasks, or functions to licensed or unlicensed individual.	Referred To Committee On Health Policy (10/10/23)		
HB 5116 10/10/23	Miller(D) - 19 co-sponsors	Health Professionals Modifies titles to be used by physician's assistants to allow for physician associate.	Referred To Committee On Health Policy (10/10/23)		
HB 5117 10/10/23	VanderWall(R) - 18 cosponsors	Occupations - Physician's Assistants Provides physician's assistants licensure compact.	Referred To Committee On Health Policy (10/10/23)		
HB 5166 10/17/23	Young(D) - 17 co-sponsors	Perinatal Quality Collaborative Establishes perinatal quality collaborative.	Referred To Second Reading (10/31/23)		
HB 5167 10/17/23	Neeley(D) - 19 co-sponsors	Blood Pressure Monitors Provides coverage for blood pressure monitors for pregnant or postpartum individuals.	Referred To Second Reading (11/2/23)		
HB 5168 10/17/23	Edwards(D) - 17 cosponsors	Blood Pressure Monitors Provides coverage for blood pressure monitors for pregnant or postpartum individuals.	Referred To Second Reading (11/2/23)		
HB 5169 10/17/23	Hood(D) - 28 co-sponsors	Health Screenings Provides mental health screenings and resources for mothers during certain time periods.	Referred To Second Reading (11/2/23)		

Bill	Sponsors	Description	Status	Position	Notes
HB 5170 10/17/23	Carter(D) - 28 co-sponsors	Mental Health Screening Requires coverage for mental health screenings for new mothers.	Referred To Second Reading (11/2/23)		
HB 5171 10/17/23	Grant(D) - 18 co-sponsors	Mental Health Screenings Requires coverage for mental health screenings for new mothers.	Referred To Second Reading (11/2/23)		
HB 5172 10/17/23	Glanville(D) - 16 cosponsors	Maternal Care Establishes program to register perinatal facilities as certain maternal care facilities.	Referred To Second Reading (11/2/23)		
HB 5173 10/17/23	Hope(D) - 16 co-sponsors	Hospitals Require hospitals to provide information on health insurance enrollment process for newborns.	Referred To Second Reading (11/2/23)		
HB 5178 10/18/23	Rheingans(D) - 12 cosponsors	Syringe Service Programs Provides for syringe service programs.	Referred To Committee On Health Policy (10/18/23)		
HB 5179 10/18/23	Rheingans(D) - 14 cosponsors	Drug Paraphernalia Modifies definition of drug paraphernalia.	Referred To Committee On Health Policy (10/18/23)		
HB 5184 10/19/23	Brabec(D) - 10 co-sponsors	Social Workers Modifies social work licensure requirements and includes licensure for licensed clinical social workers.	Referred To Committee On Health Policy (10/19/23)		
HB 5185 10/19/23	Edwards(D) - 10 cosponsors	Social Workers Modifies social work licensure requirements and includes licensure for licensed clinical social workers.	Referred To Committee On Health Policy (10/19/23)		
HB 5276 10/26/23	Conlin(D) - 22 co-sponsors	Mental Health Establishes office of mental health within the Michigan department of military and veterans affairs.	Referred To Committee On Military, Veterans And Homeland Security (10/26/23)		

Bill	Sponsors	Description	Status	Position	Notes
HB 5277 10/26/23	Morse(D) - 21 co-sponsors	Mental Health Establishes office of mental health within the Michigan veterans affairs agency.	Referred To Committee On Military, Veterans And Homeland Security (10/26/23)		
HB 5278 10/26/23	Bezotte(R) - 18 co-sponsors	Mental Health Establishes veteran service officer mental health training program.	Referred To Committee On Military, Veterans And Homeland Security (10/26/23)		
HB 5279 10/26/23	Brabec(D) - 21 co-sponsors	Mental Health Establishes office of mental health peer mentorship program within the Michigan department of military and veterans affairs.	Referred To Committee On Military, Veterans And Homeland Security (10/26/23)		
HB 5280 10/26/23	Bruck(R) - 18 co-sponsors	Mental Health Establishes Michigan azimuth bridge program for transitioning military service members' mental health.	Referred To Committee On Military, Veterans And Homeland Security (10/26/23)		
HB 5295 11/2/23	Bezotte(R) - 3 co-sponsors	Occupations - Anesthesiologist Assistants Provides licensure of anesthesiologist assistants.	Referred To Committee On Health Policy (11/2/23)		
SB 27 1/18/23	Anthony(D) - 5 co-sponsors	Health Insurance Provides equitable coverage for behavioral health and substance use disorder treatment.	Referred To Committee On Insurance And Financial Services (10/18/23)		
SB 28 1/18/23	Anthony(D) - 5 co-sponsors	Mental Health Expands definition of restraint.	Referred To Committee On Health Policy (1/18/23)		
SB 29 1/18/23	Anthony(D) - 5 co-sponsors	School Attendance Allows a certain number of excused mental health days.	Referred To Committee On Education (1/18/23)		
SB 59 2/8/23	Cherry(D) - 4 co-sponsors	Law Enforcement Modifies definition of a peace officer in the mental health code.	Assigned Pa 0056'23 With Immediate Effect (7/18/23)		
SB 133 3/2/23	McCann(D) - 12 cosponsors	Controlled Substances Creates overdose fatality review act.	Ordered Enrolled (11/9/23)		

Bill	Sponsors	Description	Status	Position	Notes
SB 301 4/27/23	Geiss(D) - 10 co-sponsors	Doula Services Requires coverage for doula services.	Referred To Committee On Health Policy (4/27/23)		
SB 332 5/11/23	Geiss(D) - 9 co-sponsors	Family Leave Provides family leave optimal coverage benefits.	Referred To Committee On Housing And Human Services (5/11/23)		
SB 333 5/11/23	Geiss(D) - 9 co-sponsors	Family Leave Provides deduction for family leave optimal coverage benefits.	Referred To Committee On Housing And Human Services (5/11/23)		
SB 334 5/11/23	Santana(D) - 17 co-sponsors	Health Occupations - Nurses Requires development of a staffing plan for nurses.	Referred To Committee On Regulatory Affairs (5/11/23)		
SB 335 5/11/23	Chang(D) - 14 co-sponsors	Health Occupations - Nurses Prohibits mandatory overtime for nurses except under certain circumstances.	Referred To Committee On Regulatory Affairs (5/11/23)		
SB 336 5/11/23	Moss(D) - 17 co-sponsors	Nurse-to-Patient Ratios Requires hospitals to maintain record of direct care registered professional nurse-to-patient ratios for each unit for each shift.	Referred To Committee On Regulatory Affairs (5/11/23)		
SB 399 6/21/23	Bellino(R)	Mental Health Modifies competitive grant program.	Referred To Committee On Appropriations (6/21/23)		
SB 418 6/28/23	Santana(D) - 5 co-sponsors	Children's Services Increases county child care fund reimbursement rate.	Ordered Enrolled (11/9/23)		
SB 419 6/28/23	Santana(D) - 5 co-sponsors	Juvenile Justice Services Requires use of screening tool for minors eligible for a certain diversion option.	Referred To Committee Of The Whole With Substitute (s-1) (10/3/23)		
SB 420 6/28/23	Irwin(D) - 6 co-sponsors	Juvenile Justice Services Limits length of time youth can be placed on precourt diversion program.	Referred To Committee Of The Whole With Substitute (s-1) (10/3/23)		

Bill	Sponsors	Description	Status	Position	Notes
SB 421 6/28/23	Klinefelt(D) - 7 co-sponsors	Juvenile Justice Services Requires use of risk and needs assessment for juveniles in the juvenile justice system before disposition.	Ordered Enrolled (11/9/23)		
SB 422 6/28/23	McDonald Rivet(D) - 7 cosponsors	Juvenile Justice Services Requires use of screening tool for minors sought to be placed on the consent calendar.	Referred To Committee Of The Whole With Substitute (s-1) (10/3/23)		
SB 423 6/28/23	Victory(R) - 6 co-sponsors	Juvenile Justice Services Modifies detention of juveniles in certain circumstances.	Referred To Committee Of The Whole With Substitute (s-1) (10/3/23)		
SB 424 6/28/23	Shink(D) - 6 co-sponsors	Juvenile Justice Services Expands Michigan indigent defense commission act duties to include indigent defense of youth.	Referred To Committee Of The Whole With Substitute (s-1) (10/3/23)		
SB 425 6/28/23	Shink(D) - 6 co-sponsors	Juvenile Justice Services Includes requirement to defend youth in duties of the appellate defender.	Returned To Senate (11/8/23)		
SB 426 6/28/23	Wojno(D) - 5 co-sponsors	Juvenile Justice Services Modifies juvenile justice residential per diem rates.	Returned To Senate (11/8/23)		
SB 482 9/12/23	McDonald Rivet(D)	Medical Waste Modifies containment of medical waste.	Referred To Committee On Health Policy (11/9/23)		
SB 483 9/12/23	Camilleri(D) - 17 cosponsors	Pharmaceuticals Creates prescription drug cost and affordability review act.	Referred To Committee On Insurance And Financial Services (10/4/23)		
SB 484 9/12/23	Klinefelt(D) - 17 cosponsors	Health Insurers Requires compliance with the prescription drug cost and affordability review act.	Referred To Committee On Insurance And Financial Services (10/4/23)		
SB 485 9/12/23	McDonald Rivet(D) - 17 cosponsors	Medical Services Requires compliance with the prescription drug cost and affordability review act.	Referred To Committee On Insurance And Financial Services (10/4/23)		

Bill	Sponsors	Description	Status	Position	Notes
SB 530 9/26/23	Cavanagh(D) - 18 cosponsors	No-Fault Insurance Revises limitations on treatment and services for injuries charges.	Referred To Committee On Insurance And Financial Services (10/24/23)		
SB 531 9/26/23	Anthony(D) - 18 cosponsors	No-Fault Insurance Revises cross-reference to amended section of the insurance code.	Referred To Committee On Insurance And Financial Services (10/24/23)		
SB 542 10/3/23	Hertel(D) - 9 cosponsors	Controlled Substances Allows choice of formulation, dosage, and route of administration for opioid antagonists by certain persons and governmental entities if department of health and human services distributes opioid antagonists free of charge.	Referred To Committee On Health Policy (10/3/23)		
SB 625 11/1/23	Webber(R) - 1 cosponsors	Occupations - Psychologists Modifies supervised postgraduate experience requirements.	Referred To Committee On Health Policy (11/1/23)		
SB 626 11/1/23	Singh(D) - 1 cosponsors	Occupations - Psychologists Modifies supervised postgraduate experience requirements.	Referred To Committee On Health Policy (11/1/23)		
SB 633 11/1/23	Hertel(D)	Health Insurers Provides state-based insurance exchange.	Referred To Committee On Health Policy (11/1/23)		
SB 634 11/1/23	Santana(D)	Health Insurers Provides updated references to reflect the enactment of the Michigan health insurance exchange act.	Referred To Committee On Health Policy (11/1/23)		
SB 635 11/1/23	Geiss(D)	Health Benefits Provides certification for qualified health plan and qualified dental plan.	Referred To Committee On Health Policy (11/1/23)		
SB 636 11/1/23	Hertel(D)	Health Insurers Includes health insurance policy provision related to Michigan health insurance exchange act.	Referred To Committee On Health Policy (11/1/23)		

Bill	Sponsors	Description	Status	Position	Notes
SB 637 11/1/23	Camilleri(D)	Reinsurance Programs Provides innovative waiver for a reinsurance program.	Referred To Committee On Health Policy (11/1/23)		
SR 73 9/19/23	Bayer(D) - 6 co-sponsors	Month Designation A resolution to designate September 2023 as Suicide Prevention Month.	Adopted (9/19/23)		

December 2023

BABH Board of Directors

December 2023						
Su	Mo	Tu	We	Th	Fr	Sa
3	4	5	6	7	1	2
10	11	12	13	14	8	9
17	18	19	20	21	15	16
24	25	26	27	28	22	23
31					29	30

January 2024						
Su	Mo	Tu	We	Th	Fr	Sa
7	1	2	3	4	5	6
14	8	9	10	11	12	13
21	15	16	17	18	19	20
28	22	23	24	25	26	27
	29	30	31			

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Nov 26	27	28	29	30	Dec 1	2
3	4 5:00pm Health Care Improvement & Compliance Committee	5	6	7 5:00pm Recipient Rights Committee	8	9
10	11 5:00pm Facilities & Safety Committee	12	13 5:00pm Finance Committee 5:30pm Bylaws Committee	14 5:00pm Program Committee	15	16
17	18	19 5:00pm Audit Committee	20	21 5:00pm REGULAR BOARD MEETING	22	23
24 Christmas Eve	25 Christmas Day/BABH Offices Closed	26 Christmas Observed/BABH Offices Closed	27	28	29	30
31	Jan 1, 24	2	3	4	5	6



2023-2024 Information Management Strategic and Operational Plan

Updated by IS Manager: October 3, 2023

Strategic Leadership Team Approval: 10/10/2023

Full Board Approval Date: 11/16/2023



2023-2024 Information Management Strategic and Operational Plan

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2023-2024 Information Management Strategic and Operational Plan

Scope

The Bay-Arenac Behavioral Health Authority (BABHA) Information Management Strategic and Operational Plan encompasses the organization's responsibilities as a Community Mental Health Services Program (CMHSP).

Overview

This document presents the BABHA Information Management Strategic and Operational Plan, specifically, the values and core strategies of the organization relative to information management and technologies, in support of the organization accomplishing its mission. It documents Leadership's current assessment of any forces in the environment with the potential to impact the organization's technological environment and defines strategies for responding. The Plan informs decision making in the use of technology and information management services, thereby influencing vendor relationships, service agreements, and so on. It also captures some operational processes to ensure these activities receive adequate attention on an annual basis to ensure quality and maintenance of technical edge.

Methodology

Information Management Strategic Planning for BABHA as an entity is performed by the Chief Executive Officer (CEO), members of the Strategic Leadership Team (SLT) and the Information Systems Manager. The SLT encompasses key leadership positions in the organization including the Chief Financial Officer, Director of Healthcare Accountability, Director of Integrated Care – Primary Care, Director of Integrated Care - Specialty Care, and the Director of Human Resources.

The BABHA Information Management Strategic Plan is comprised of the following components:

- Values and Guiding Philosophies, which define the extent to which the organization plans to utilize information technologies and information management tools to manage its operations.

- Core Strategies which are statements of long-term strategies (3-5 years) intended to facilitate organizational achievement of its mission, consistent with the aforementioned values.
- An Environmental Scan to identify opportunities and threats in the environment that may impact BABHA's ability to achieve its core strategies in the present or near future (1-2 years), including current research and technological advances.
- Breakthrough Initiatives: present short-term strategies (12-24 months) to address the highest priority environmental opportunities and threats, taking into consideration the organization's strengths and weaknesses. The strategies are specific with responsible parties, sub-tasks, and due dates defined.

Strategic initiatives by their nature do not include operational activities and are transformative in nature. The focus is on opportunities and threats with the potential to impact achievement of core strategies. Top priority is given to mission critical strategic opportunities and threats, with secondary priority given to systems transformation. Not every opportunity or threat warrants action by BABHA.

This document is reviewed by the Strategic Leadership Team (SLT) and the Board of Directors on an annual basis. In addition, the SLT engages in ongoing monitoring of the environment for opportunities and threats and report such information at the SLT meetings as warranted.



2023-2024 Information Management Strategic and Operational Plan

Values/Guiding Philosophies

1. Information technologies will effectively and efficiently support information capture and accessibility.
2. Information management practices will operate consistent with regulatory and contractual requirements and BABHA business rules.
3. Redundant data entry and reporting will be minimized. Information will be readily accessible to users.
4. Technologies and information management processes will enhance not hinder staff productivity and support optimal workflows.
5. Information security technology will be deployed to protect confidential information being stored, processed, or transmitted by the organization.
6. Technologies and information management will provide support for accessibility to IT systems for any authorized system user as defined by the agency.
7. Balance will be maintained between technological investment and benefit to the organization.
8. Information technology and information management vendors will operate in a manner that is consistent with the mission of BABHA, relative to their scope of work on behalf of BABHA.
9. Unless otherwise justified, selection of information technologies and information management tools will be consistent with commonly accepted standards and current best practices.
10. Staff will be trained and expected to take full advantage of current technology.
11. BABHA will comply with product licensing requirements.
12. Information technologies will be sensitive to the needs of stakeholders with less technological capacity and flexible enough to interact effectively.
13. Collaborative decision-making will be used unless circumstances dictate otherwise.
14. A base of knowledge will be maintained to ensure well-informed decisions are made.



2023-2024 Information Management Strategic and Operational Plan

Core Strategies

1. Maintain an optimal network capacity through proper management procedures and planned purchasing of bandwidth and other network services.
2. Maintain adequate server capacity through proper management procedures and proactively monitoring resource utilization.
3. Minimize e-storage demands on technological systems through appropriate information management (retention) practices.
4. Ensure proper system and network redundancies are implemented and tested on a regular basis as documented in the working disaster recovery plan.
5. Control the risk and cost of change through use of test environments, fallback plans, request tracking and project management. Quality controls utilized for all vendor projects.
6. Maintain proper equipment and product licensing inventories. Maintain a planned replacement schedule.
7. Provide periodic review of all system security software and measures including but not limited to anti-virus, firewalls, intrusion detection, encryption, and security policies and privacy practices as defined in policies C09-S03-T13 Security Awareness - Protection from Malicious Software and C09-S03-T14 Security Awareness - Log-in Monitoring.
8. Maintain telepresence and video conferencing capability.
9. Use technology to support remote access by community-based and remote staff.
10. In-house information systems subject matter expert(s) to maintain knowledge through subscription online journals and print research materials. Provide access to formal continuing education, and other training resources as warranted.
11. Flexible and focused training options for staff regarding information management and technologies.
12. Establish and maintain central repositories of data files and reports.
13. In-house subject matter expert(s) to maintain awareness of front-line user needs and workflows to ensure information management systems are meeting business demands.
14. Periodic and systematic assessment of user overall satisfaction using a standardized tool.



Environmental Scan, Analysis of Strengths, Weaknesses, Opportunities and Threats, and Breakthrough Initiatives

SECTION DESCRIPTION

BABH reviews what is occurring in the environment external to the organization and engages in an analysis and action planning process to ensure the organization continues to remain viable in order to achieve its mission.

An ENVIRONMENTAL SCAN identifies OPPORTUNITIES AND THREATS in the environment that may impact the organization's ability to achieve its core strategies in the present or near future (1-2 years). The organization defines opportunities and threats as follows:

Opportunities: Conditions external to the organization that the organization may want to take advantage of in order to facilitate achievement of core objectives

Threats: Conditions external to the organization that may hinder achievement of core objectives if not decreased or eliminated

Organizational STRENGTHS AND WEAKNESSES are then assessed for the highest priority opportunities and threats. The organization defines these terms as follows:

Strengths: Attributes of the organization that are expected to be helpful to the organization in taking advantage of an opportunity or fending off a threat

Weaknesses: Attributes of the organization that may hinder the organization's ability to take advantage of an opportunity or fend off a threat

BREAKTHROUGH INITIATIVES, present short-term strategies (12-24 months) to address the highest priority environmental opportunities and threats, taking into consideration the organization's strengths and weaknesses. The strategies are specific with responsible parties, sub-tasks, and due dates defined.

KEY: EDI=Electronic Data Interchange; EHR=Electronic Health Record; IS=Information Systems; LAN=Local Area Network; NSO=NetSource One; O365=Office 365; PCE=Peter Chang Enterprises; PRI=Primary Rate Interface; SLA=Service Level Agreement; SLT=Senior Leadership Team; VDI=Virtual Desktop Infrastructure; VPN=Virtual Private Network; WAN=Wide Area Network

Environmental Scan: HEALTH INFORMATION EXCHANGE

Lead Team Member: IS Manager

Status: Revised for 2023-2024

Impact on Ability to Accomplish Mission:

- Improve health care quality and patient outcomes by ensuring everyone involved in care has access to the same information
- Exchanging health information via an HIE or Direct Address messaging are core objectives of meaningful use

Opportunities or Threats:

Opportunities

- Exchanging information electronically will increase efficiency and reduce errors for BABH and the providers we exchange PHI with
- This will increase the amount of data in our system that is actual data instead of an image or page of data that cannot be tabulated and analyzed
- Eliminate dual entry for those agencies we exchange information with

Threats

- None identified

Strengths and Weaknesses (Response to Opps/Threats):

Strengths

- Our Electronic Health Record (EHR) has established connections and proven technologies to connect with an HIE
- The Healthcare Integration Steering Committee will direct meaningful HIE engagement

Weaknesses

- Many of our providers are accustomed to the traditional methods of exchanging PHI, i.e. fax, scan to email, etc.

Breakthrough Initiatives:

Target:

Resources:

- | <u>Breakthrough Initiatives:</u> | <u>Target:</u> | <u>Resources:</u> |
|---|-----------------------|--|
| 1. Continue to build upon Mi Gateway and VPR health information exchange (HIE) solutions to exchange information with the primary health care and hospital communities. | | IS Manager; K. Amon; T. Adler, D. Groh, A. Folsom, S. VanParis |
| 2. Use direct address to exchange information that we routinely exchange PHI with, if/when other health care providers have direct messaging capability. | Ongoing | IS Manager, T. Adler, D. Groh, A. Folsom, S. VanParis |

Environmental Scan: MANAGEMENT OF COMPUTING RESOURCES

Lead Team Member: IS Manager

Status: Revised for 2023-2024

Impact on Ability to Accomplish Mission:

- The cloud computing environment recurring costs are directly related to the amount of resources used by the organization
- Establishing document management practices can control use of computing resources and assist with establishing and enforcing document retention guidelines

Opportunities or Threats:

Opportunities

- Cloud computing environment is tightly integrated environment that can provide opportunities for more centralization and control of organizational records
- The Office 365 (O365) environment, including SharePoint, has a comprehensive data retention system that could be utilized to apply retention schedules to a variety of data elements held by the organization

Threats

- Cost of cloud computing environment will continually increase without management and monitoring of computing resources
- Document retention guidelines are difficult to enforce without negatively impacting user experience and functionality, i.e. email archiving

Strengths and Weaknesses (Response to Opps/Threats):

Strengths

- Cloud computing infrastructure is tightly integrated and more easily allows for centralized management and monitoring of computing resources
- Implementation of single G: drive improves ability for users to share documents
- Team has been identified to assist departments and users with the management of organizational records

Weaknesses

- Access to cloud storage data can be affected by speed of internet access
- Potential for interrupted access to cloud infrastructure

Breakthrough Initiatives:

Target

Resources:

1. Current cloud environment allows organization to consider leveraging less expensive O365 cloud storage options where practical and applicable	Ongoing	IS Manager, K. Amon, G. Wedge, T. Adler, J. Louks, G. Lietzow
2. Work with departments and users to establish unified data storage practices	Ongoing	IS Manager, G. Wedge, T. Adler
3. Migrate seldom-used data to secure cloud storage where practical and applicable	Ongoing	IS Manager, G. Wedge, G. Lietzow

Environmental Scan: BUSINESS CONTINUITY AND DISASTER RECOVERY PLAN AND TESTING

Lead Team Member: IS Manager **Status:** Revised for 2023-2024

Impact on Ability to Accomplish Mission:

- The organization's ability to function at an acceptable capacity when a disaster occurs is diminished without an updated plan and disaster recovery configuration
- Routine testing and documentation of that testing will ensure the functionality of the disaster recovery plan and all its components

Opportunities or Threats:

Opportunities

- Routine testing of the disaster recovery plan will ensure functionality and uncover any potential changes that could affect disaster operations
- MiTel phone system is a distributed model with site-to-site fail-over capabilities by decentralizing infrastructure via distributed model

Threats

- All critical network circuits terminate at NetSource One (NSO) creating single point of failure

Strengths and Weaknesses (Response to Opps/Threats):

Strengths

- Network connections to agency sites have high throughput and redundant connections with both AT&T ASE circuits and Charter VPN connections; includes both voice and data network traffic
- New UTM firewalls provide SD-WAN technology which allows for both the primary and backup network connections to be active and handle prioritized network traffic
- Offsite disaster recovery computing location is restored and tested quarterly.
- Data backups are tested monthly via routine data restores.
- The Electronic Health Record (EHR) system is hosted by the vendor, Peter Chang Enterprises (PCE), which has a redundant data center that is utilized and tested semi-annually

Weaknesses

- Planning and testing for smaller component outages still must be accounted for, i.e. fiber optic failure at Mulholland

Breakthrough Initiatives:

Target

Resources:

- | <u>Breakthrough Initiatives:</u> | <u>Target</u> | <u>Resources:</u> |
|---|----------------------|--------------------------|
| 1. Continue to enhance testing procedures, documentation, and functionality of the disaster recovery plan, as practical and applicable. | Ongoing | IS Manager, G. Wedge |

Environmental Scan: MAINTAIN COST EFFECTIVE TELECOMMUNICATIONS SYSTEMS

Lead Team Member: IS Manager **Status:** Revised for 2023-2024

Impact on Ability to Accomplish Mission:

- Maintaining efficient and cost-effective telecommunications systems will provide quality service while making additional resources available for the organizational mission

Opportunities or Threats:

Opportunities:

- Ensures that organization is not overpaying for outdated or underperforming services
- Our PRI circuits are renewed annually maximizing our flexibility with shorter term commitments

Migrating telephone circuits from PRI's to SIP service or cloud-based service could utilize our highly redundant network connections

Threats:

- TelNet PRI circuits and long-distance services are inexpensive, but organization voice services with a single vendor represents single point of failure
- Current PRI service via TelNet is being discontinued due to regulations eliminating the type of circuit BABH is utilizing

Strengths and Weaknesses (Response to Opps/Threats):

Strengths:

- The TelNet PRI and long-distance rates are very inexpensive compared to the previous carrier rates
- The majority of the telecommunication services currently utilized are performing well
- Agency has redundant internet access at all our primary facilities that would allow for conversion to SIP or cloud-based telephone service

Weaknesses:

- TelNet outages over the past 24 months did illustrate that some PRI diversification might be beneficial in case of failure

Breakthrough Initiatives:

Target

Resources:

1. Develop a cost-effective long-term telecommunications strategy that aligns with business initiatives and anticipated organizational needs in the context of the new hybrid office and remote work environment – i.e., reduced reliance on desk top phones, etc.

09/30/22

K. Amon, IS Manager

Use MRT Team and IS Cloud Phone proposal to test out possible changes to telecommunications to be hybrid environment friendly. Builds on current phone system and leverages Teams calling.

IS Manager

Environmental Scan:

IMPROVE SYSTEM SECURITY PRACTICES AND TECHNOLOGY

Lead Team Member:

IS Manager

Status:

Revised for 2023-2024

Impact on Ability to Accomplish Mission:

- Improve security practices that govern system audits, security reviews, and documentation
- Implement multi-factor authentication (MFA) for providers using the BABHA EHR

Opportunities or Threats:**Strengths and Weaknesses (Response to Opps/Threats):****Opportunities**

- Deploy MFA to providers that utilize BABHA EHR
- Continue to use KnowBe4 email phishing campaigns and user training

Threats

- Lack of MFA for providers using EHR increases risk of unauthorized system access
- Email phishing threats represent the greatest risk to organizational data

Strengths

- Cloud environment is tightly integrated and newer technologies making auditing easier
- EHR has powerful system activity auditing tools
- Hosting provider is considered HIPAA-compliant datacenter provider
- MFA deployed to staff for VDI Office 365 services, and EHR access

Weaknesses

- Lack of MFA for providers using BABHA EHR exposes systems to unauthorized access

Breakthrough Initiatives:**Target****Resources:**

1. Continue end user education on security threats, especially with KnowBe4 phishing campaigns and individual training as necessary.

09/30/23

IS Manager, K. Amon, G. Wedge, T. Adler, J. Louks

Environmental Scan: INCREASE MOBILE AND REMOTE WORK TECHNOLOGIES

Lead Team Member: IS Manager

Status: Revised for 2023-2024

Impact on Ability to Accomplish Mission:

- Improve remote collaboration tool capacity to allow for all staff to conduct secure virtual meetings with both internal and external parties
- Ensure staff have equipment that provides effective use of agency's remote work software tools
- Increase use of cloud services allowing for staff to securely access organizational data more easily when working remotely or in the community

Opportunities or Threats:

Opportunities

- Increase use of Microsoft Teams throughout agency. All staff with an agency email account are already licensed for the software via O365 subscription
- Broad deployment of iPads, laptops, Chromebooks, and agency cell phones allow staff to utilize commonly deployed virtual collaboration tools such as Microsoft Teams, Zoom, and Doxy.me
- Increase use of cloud services securely allow for staff to access organizational data more easily when working remotely or in the community
- Have select staff pilot new cost-effective technologies to use in the community and remotely to ensure staff have the most efficient technology available

Threats

- Remotely managing a large fleet of devices can be challenging for the IS Department as control is decentralized from the company network to staff's home network
- Staff sometimes have limited or poor internet options when working remotely
- Risk of staff printing or storing documents that contains PHI in non-secure locations. Personal computers, cloud or personal paper files at home.

Strengths and Weaknesses (Response to Opps/Threats):

Strengths

- Current Office 365 software subscriptions provide users with access to collaboration tools without additional cost
- Mobile equipment currently deployed to staff allows for remote work and collaboration
- All agency cell phones have an unlimited voice, text, and data service plan allowing for extended remote work at no additional cost

Weaknesses

- Newly deployed thin clients are now capable of processing audio and video but do not have microphones or cameras limiting participation in virtual meetings from the office
- Keeping collaboration tools such as Microsoft Teams and Zoom updated on mobile devices can be challenging
- All agency cell phone plans have unlimited hotspot data plans, however, data throttling begins after 10 gigabytes of usage
- Ability to monitor productivity of staff working remotely is available, but reports for supervisors could be improved.

Breakthrough Initiatives:

Target

Resources:

- | | | |
|--|----------|--|
| 1. Explore the potential use of Office 365 E1 License, SharePoint Online, and OneDrive for Business for staff to access and store organizational data securely | 09/30/23 | IS Manager, K. Amon, K. Amon, G. Wedge, T. Adler |
|--|----------|--|

Environmental Scan: INCREASE TECHNICAL TRAINING OFFERED TO STAFF

Lead Team Member: IS Manager

Status: Revised 2023-2024

Impact on Ability to Accomplish Mission:

- Additional technical training will allow staff to more efficiently use the technologies provided to them by the agency
- Effective remote work relies heavily on technology

Opportunities or Threats:

Strengths and Weaknesses (Response to Opps/Threats):

Opportunities

- The agency has numerous software tools staff would find beneficial with an enhanced knowledge of how they operate
- The IS Dep't can provide training both virtually and in person
- Relias training may have valuable trainings that could be offered to staff

Threats

- Lack of knowledge can hinder productivity or increase reluctance to use available technology

Strengths

- IS Department staff are eager to provide training to staff on tools most commonly referred to the Help Desk
- Relias training library is extensive and easily deployed to staff

Weaknesses

- Lack of staff participation with voluntary trainings offered

Breakthrough Initiatives:

Target

Resources:

1. Provide users software tips and training opportunities through electronic means as a more efficient alternative to recommending more mandatory annual training

09/30/23

IS Manager, G. Wedge, T. Adler, G. Lietzow, L. Nagel, J. Louks

Environmental Scan: Assess Overall User Satisfaction

Lead Team Member: IS Manager

Status: Revises for 2023-2024

Impact on Ability to Accomplish Mission:

- User satisfaction increases the likelihood information systems will be trusted and used effectively and uniformly
- Effective and uniform information systems improve efficiency of clinical, financial, human resource, quality, compliance and other agency operations.

Opportunities or Threats:

Opportunities

- Ticket closures are tracked which will help determine when to see user feedback
- On-line survey options are readily available for compilation of overall user satisfaction

Threats

- If user feedback is not acted upon, it can have an inverse effect and increase dis-satisfaction.
- Will take staff time to track and respond to user feedback

Strengths and Weaknesses (Response to Opps/Threats):

Strengths

- User request tracking (ticketing) system
- BABH experience with surveying satisfaction and actioning findings

Weaknesses

- Requests for reporting services are not run through the ticketing system

Breakthrough Initiatives:

1. Explore options for collecting user feedback after service tickets are closed

Target

12/31/22

Resources:

IS Manager, T. Adler, J. Louks, G. Wedge, G. Lietzow, L. Nagel

Operational Initiatives

Environmental Scan: VENDOR MANAGEMENT AND PERFORMANCE MONITORING

Lead Team Member: IS Manager **Status:** Revised for 2023-2024

Impact on Ability to Accomplish Mission:

- Ensure that vendor is providing acceptable levels of service and adhering to Service Level Agreement (SLA) parameters

Opportunities or Threats:

Opportunities

- External monitoring of EHR, external VDI portal, telecommunication systems, and BABHA website uptime provides independent view of system availability

Threats

- Using vendors who lease or subcontract with larger vendors can make troubleshooting service issues more difficult

Strengths and Weaknesses (Response to Opps/Threats):

Strengths

- BABH's enterprise level monitoring tool, "What's Up Gold" provides monitoring of internal and external system performance

Weaknesses

- Too reliant on vendor to report performance problems with their services
- Lack of diversity in vendors can impact operations when experiencing service disruptions from a particular vendor

Breakthrough Initiatives:

Resources:

- | | |
|---|---|
| 1. Compare outage calculations against SLA parameters or other performance guidelines to ensure vendor compliance | IS Manager |
| 2. Provide performance data for Leadership Dashboard reporting <ul style="list-style-type: none"> ○ Wide and local area network issues ○ Telepresence issues ○ Cloud computing and Virtual Desktop Infrastructure (VDI) issues ○ Phone issues ○ Phoenix issues | IS Manager, K. Amon, T. Adler |
| 3. Automate the collection of performance data for the leadership dashboard where feasible and practical | IS Manager, L. Nagel |
| 4. Audit use of staff software and application subscriptions (such as Zoom, Doxy, Adobe and Microsoft products) on a routine basis and adjust vendor agreements where feasible to eliminate unnecessary costs. | IS Manager, L. Nagel, G. Wedge, Greg L., T. Adler, J. Louks |

Operational Initiative: CONTINUED DEVELOPMENT OF STANDARDIZED COMMUNICATIONS KNOWLEDGE

Lead Team Member: IS Manager **Status:** Revised for 2023-2024

Impact on Ability to Accomplish Mission:

- In-depth knowledge of the various Electronic Data Interchange (EDI) formats utilized by the state, regional entities, and other healthcare data repositories will help BABH facilitate the timely exchange of data with other organizations

Operational Actions:

1. Continue developing institutional knowledge of file structures used for state encounter reporting, BH-TEDS submissions, and new state consumer registry file
2. Research ANSI-accredited standards within the healthcare industry such as HL7
3. Research HIE vendors and the EHR Direct Messaging capabilities identifying potential uses for BABH

Resources:

IS Manager, G. Lietzow, T. Adler
IS Manager, G. Lietzow, T. Adler
IS Manager, G. Lietzow, T. Adler, D. Groh

Environmental Scan: INFORMATION SYSTEMS DOCUMENTATION

Lead Team Member: IS Manager **Status:** Revised for 2023-2024

Impact on Ability to Accomplish Mission:

- Document information systems procedures, processes, and system designs to ensure adequate knowledge transfer and long-term functionality of department and systems

Opportunities or Threats:

Opportunities

- Create central repository for documentation
- Cross-training within department will make documentation essential to success
- ~~Leverage coding and documentation control software Team Foundation Server~~

Threats

- Lack of documentation limits knowledge transfer
- Limits ability for cross training to be effective

Strengths and Weaknesses (Response to Opps/Threats):

Strengths

- Tools necessary to capture and share knowledge are currently available
- Data Governance Committee creates workgroup venue to standardize data driven project documentation
- Standard documentation procedures have been established for report/data centric projects.

Weaknesses

- Programming and software development still needs a structured documentation process.
- Need to finalize Quality Control protocols for system development, design, modifications, validations and documentation

Breakthrough Initiatives:

1. Establish standard documentation practices for information systems processes, procedures, and system design
2. Continue to develop documented standards of organizational data definitions and business processes
3. Investigate use of Microsoft Dev Ops for all source code to ensure access if lead staff not available
4. Explore use Microsoft Share Point to standardize documentation processes to ensure continuity

Resources:

IS Manager, G. Wedge, G. Lietzow, T. Adler, L. Nagel, J. Louks
K. Amon, IS Manager, S. Holsinger, G. Lietzow, L. Nagel
G. Lietzow, L. Nagel
IS Manager, T. Adler, G. Lietzow, L. Nagel

Environmental Scan: CONTINUE TO IMPROVE ANNUAL RISK ASSESSMENT PROCESS

Lead Team Member: IS Manager **Status:** Revised for 2023-2024

Impact on Ability to Accomplish Mission:

- Continue to enhance tool to monitor risk, compliance, security, and the effectiveness of the organization's policies and procedures
- Identify gaps in compliance and security that can be used to drive the continuous improvement process

Opportunities or Threats:

Opportunities

- Can build upon internally conducted risk assessment completed in 2019 with the new Security Risk Assessment tool released by the U.S. Department of Health and Human Services
- Evaluate physical security at all locations for possible improvements related to the protection of PHI

Threats

- Regular monitoring of risk is essential to maintaining compliance and a strong security posture
- Without an updated risk assessment, it is difficult to provide a gap analysis of risk, compliance, and security

Strengths and Weaknesses (Response to Opps/Threats):

Strengths

- 2020 risk assessment can be used as a building block for broader inspections of security
- Tightly integrated cloud computing environment should limit number of technical anomalies reported

Weaknesses

- Continued development of disaster recovery plan testing and documentation
- The physical security at some locations could be improved as it relates to the protection of PHI

Breakthrough Initiatives:

1. Continued development of risk assessment monitoring tool
2. Perform risk assessment for the organization annually
3. Remediate gaps identified in the risk assessment annually

Resources:

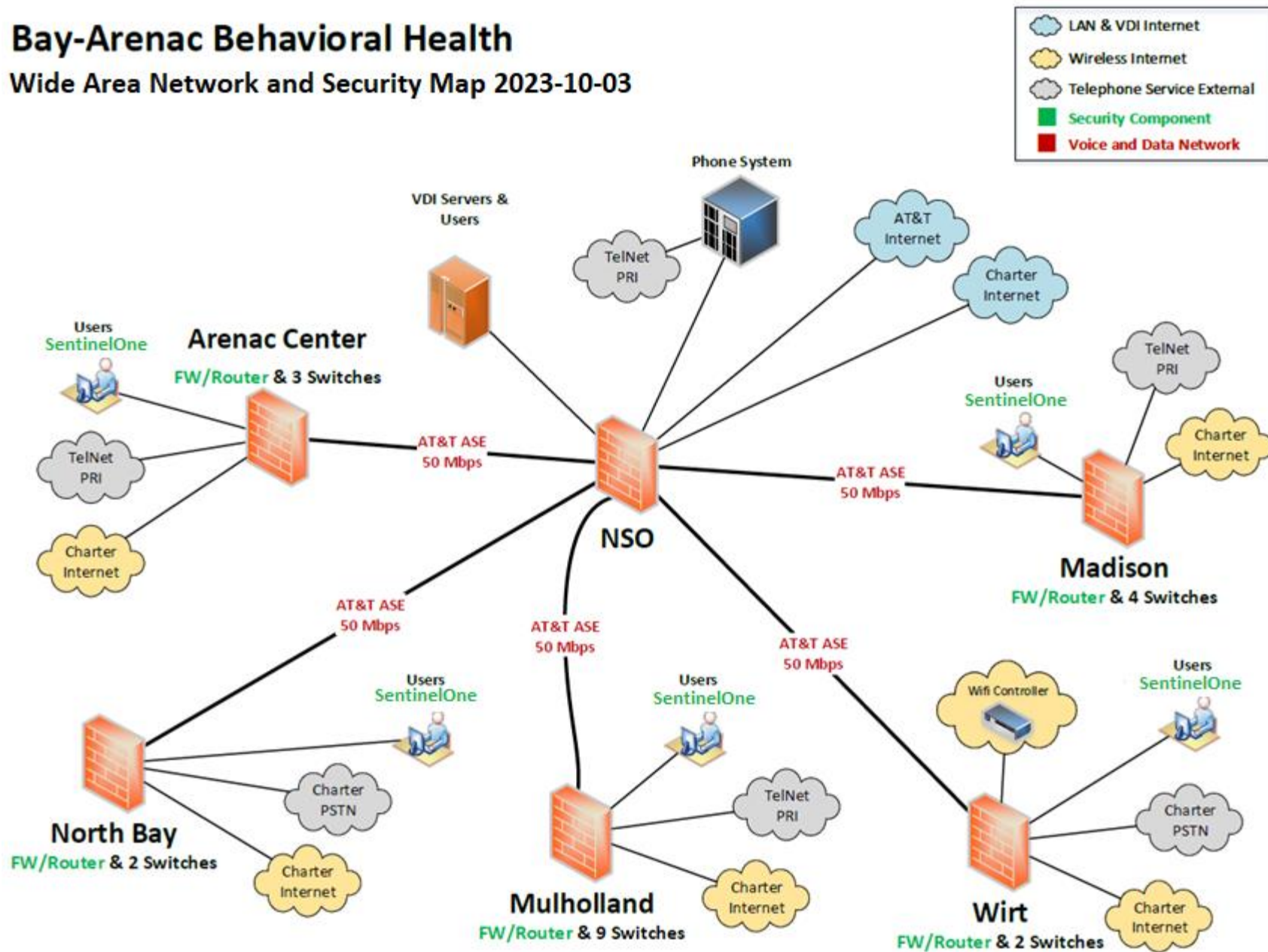
IS Manager
IS Manager
IS Manager, G. Wedge, G. Lietzow, T. Adler, L. Nagel, J. Louks

Attachments

Wide Area Network and Security Map

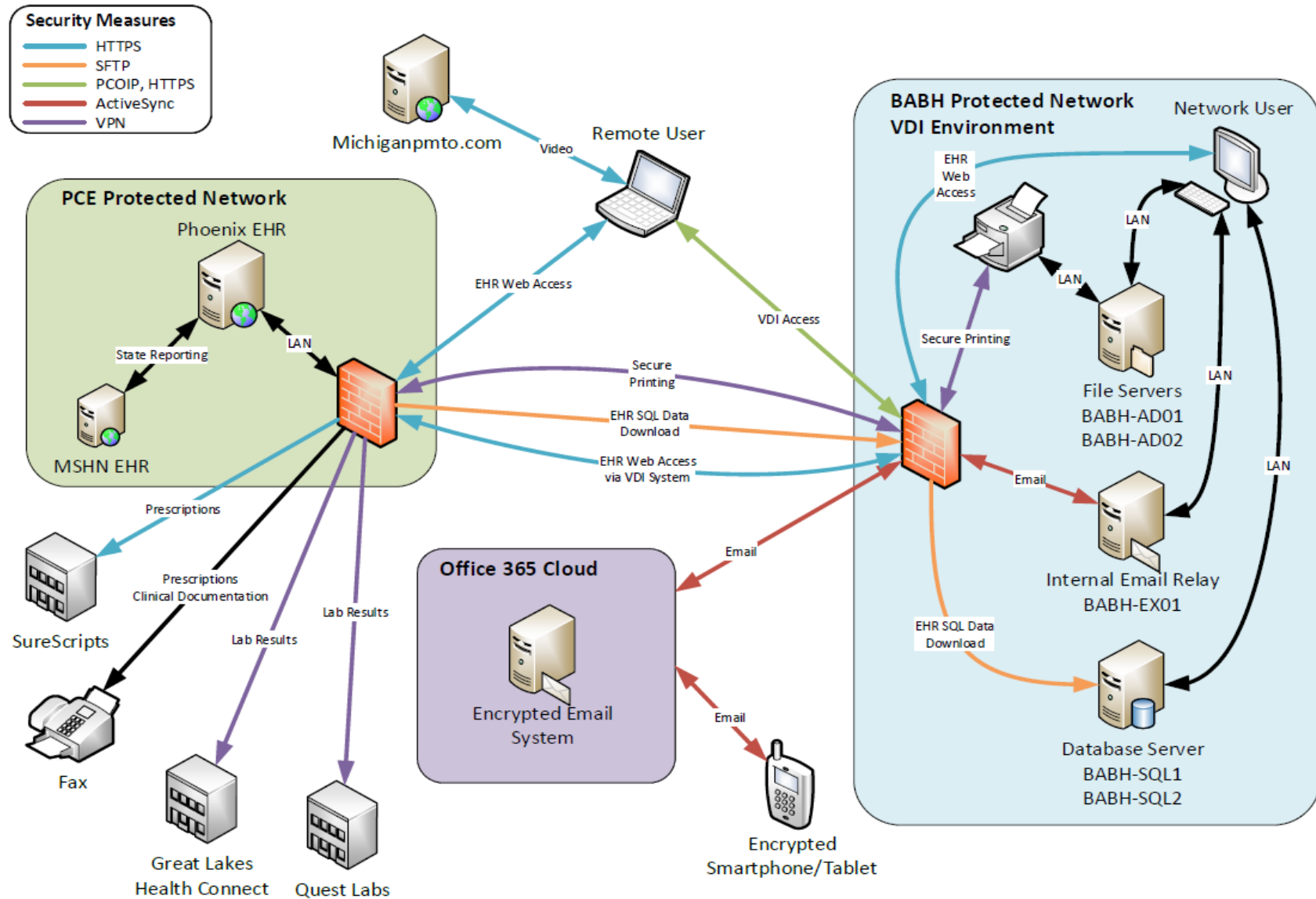
Bay-Arenac Behavioral Health

Wide Area Network and Security Map 2023-10-03



e-PHI Workflow Diagram

BABH ePHI Workflow Diagram 2019-08-15



Security Risk Assessment

Security Risk Assessment Findings and Remediation Plan 2023

Bay-Arenac Behavioral Health

Completed By: Jesse Bellinger, IT Manager/Security Officer

Date Completed: July 26, 2023

I. Overview

Bay-Arenac Behavioral Health (BABH), in accordance with 45 CFR Part 160 and Part 164, must complete a HIPAA Risk Assessment to ensure all electronic protected health information (ePHI) created, received, maintained, or transmitted by a covered entity is adequately protected.

This BABH security risk assessment process utilizes the Security Risk Assessment (SRA) tool provided by the United States Department of Health and Human Services. The SRA tool lists 120 security assessment questions, provides several different response choices to each question, and ways in which to comply when a non-compliant response is selected.

This document includes a summary of the 7 sections within the SRA tool, a breakdown of compliance in each section, and a description of the areas where BABH was not in full compliance with the requirement.

II. Security Risk Assessment Findings

Section 1 – SRA Basics

This section focuses on basic information about our SRA, including if we have ever completed an SRA, how often we conduct an assessment, the processes used to complete one, and how the results are reported.

Results

Question Type	Questions	Compliant Answers	Compliance %
Required	9	9	100%
Addressable	1	1	100%
Total	10	10	100%

BABH is fully compliant within this section.

Section 2 – Security Policies

Section 2 concentrates on agency policies and procedures, risk management processes, document retention of our completed SRA materials, and the role of the Security Officer in managing risk.

Results

Question Type	Questions	Compliant Answers	Compliance %
Required	8	8	100%
Addressable	0	0	N/A
Total	8	8	100%

BABH is fully compliant within this section.

Section 3 – Security and Workforce

Section 3 concentrates on the security aspects of workforce members. The questions focus on security awareness training, employment screening procedures, system and application access processes, and the competence of the

Security Officer. Protection from malicious software and monitoring of login attempts is also addressed in this section.

Results

Question Type	Questions	Compliant Answers	Compliance %
Required	12	12	100%
Addressable	7	7	100%
Total	19	19	100%

BABH is fully compliant within this section.

Section 4 – Security and Data

This section focuses on access to electronically protected health information (ePHI). The questions center around how users are granted access, how are users identified when accessing ePHI, is access appropriate, the use of encryption, automatic logoff from systems, and backups.

Results

Question Type	Questions	Compliant Answers	Compliance %
Required	17	16	94%
Addressable	10	10	100%
Total	27	26	96%

BABH is not compliant within this section. Below are the question(s) that are not in full compliance.

Question 23 (Required): How do you determine the means by which ePHI is accessed?

Answer: Applications which access ePHI are identified, evaluated, approved, and inventoried, but we do not manage which devices can access these applications (e.g. workforce members' personal devices accessing a cloud-based EHR without first identifying and approving the device)

DHHS Guidance: Unsecured points could compromise data accessed through an otherwise secure application. Consider implementing a device management process to ensure security standards are in place for all points accessing ePHI. Assign a separate user account to each user in your organization. Train and regularly remind users that they must never share their passwords. Require each user to create an account password that is different from the ones used for personal internet or e-mail access (e.g., Gmail, Yahoo, Facebook). For devices that are accessed off site, leverage technologies that use multi-factor authentication (MFA) before permitting users to access data or applications on the device. Logins that use only a username and password are often compromised through phishing e-mails. Implement MFA authentication for the cloud-based systems that your organization uses to store or process sensitive data, such as EHRs. MFA mitigates the risk of access by unauthorized users.

Section 5 – Security and the Practice

Section 5 targets physical security of devices, facilities, and the data center. The questions concentrate on how facilities are protected from unauthorized access, how devices protected from theft and unauthorized access, and an inventory of all equipment that store, process, or access ePHI.

Results

Question Type	Questions	Compliant Answers	Compliance %
Required	12	12	100%
Addressable	12	11	92%
Total	24	23	96%

BABH is not compliant within this section. Below are the question(s) that are not in full compliance.

Question 10 (Addressable): How do you validate a person's access to your facility?

Answer: We maintain lists of authorized persons but do not have controls in place to identify persons attempting to access the practice, grant access to authorized persons, or prevent access by unauthorized persons.

DHHS Guidance: Consider appropriate methods of validating access to your facility. Implement and document safeguards determined to be reasonable and appropriate.

Section 6 – Security and Business Associates

This section concentrates on how business associates are handled, the terms within our Business Associate Agreements (BAA), and assurances of compliance of our business associates.

Results

Question Type	Questions	Compliant Answers	Compliance %
Required	13	12	92%
Addressable	0	0	N/A
Total	13	12	92%

BABH is not compliant within this section. Below are the question(s) that are not in full compliance.

Question 7 (Required): How do you maintain awareness of business associate security practices?

Answer: We rely on the language of our BAAs to ensure that Business Associates are securing ePHI.

DHHS Guidance: Consider monitoring, auditing, or obtaining information from business associates to ensure the security of ePHI and include language about this in BAAs.

Section 7 – Contingency Planning

The final section of the SRA emphasizes contingency planning and security incidents. The questions center around identifying, documenting, and testing security incidents and emergency situations.

Results

Question Type	Questions	Compliant Answers	Compliance %
Required	19	19	100%
Addressable	1	1	100%
Total	20	20	100%

BABH is fully compliant within this section.

III. Security Risk Assessment Findings Summary

SRA Results

BABH is compliant with 118 of the 121 questions within the DHHS SRA tool. The areas BABH will focus on in the coming year are improving facility access validation and managing devices that access ePHI.

Question Type	Questions	Compliant Answers	Compliance %
Required	90	88	98%
Addressable	31	30	97%
Total	121	118	97%

IV. Security Risk Assessment Remediation Plan

Section 4 – Security and Data

Question 23 (Required): How do you determine the means by which ePHI is accessed?

Answer: Applications which access ePHI are identified, evaluated, approved, and inventoried, but we do not manage which devices can access these applications (e.g. workforce members' personal devices accessing a cloud-based EHR without first identifying and approving the device)

Remediation Plan: Access to PHI containing software is validated via username, password, and 2FA, however use of BYOD does present some risk. The Security Officer will work with the Senior Leadership Team to determine if it is reasonable to require a BABH owned device to access software containing PHI.

Section 5 – Security and the Practice

Question 10 (Addressable): How do you validate a person's access to your facility?

Answer: We maintain lists of authorized persons but do not have controls in place to identify persons attempting to access the practice, grant access to authorized persons, or prevent access by unauthorized persons.

Remediation Plan: Access to facilities is adequately controlled, however, identifying unauthorized persons attempting to access a facility is limited. Some sites have video monitoring, but many do not. The Security Officer will work with the Senior Leadership Team and the Facility Manager on ways to improve monitoring unauthorized attempts to access our facilities.

Section 6 – Security and Business Associates

Question 7 (Required): How do you maintain awareness of business associate security practices?

Answer: We rely on the language of our BAAs to ensure that Business Associates are securing ePHI.

Remediation Plan: BABH will not be pursuing the DHHS Guidance within the DHHS SRA Tool. The hhs.gov website contradicts the guidance provided within the tool. The hhs.gov website explicitly states that covered entities are not required to monitor or oversee the means by which their business associates carry out privacy safeguards or the extent to which the business associate abides by the privacy requirements of the business associate agreement. Our current practice adheres to the guidance provided on hhs.gov website. (Reference: FAQ 236-Is a covered entity liable for, or required to monitor the actions its business associates? <https://www.hhs.gov/hipaa/for-professionals/faq/236/covered-entity-liable-for-action/index.html>)

Information Technology Equipment Replacement Schedule

Objective

The purpose of this information technology equipment replacement schedule is to outline a systematic plan for the replacement of the agency's oldest computer equipment ensuring efficient and effective management of BABH's budget and computing capabilities. This schedule will provide an equipment lifecycle strategy for all client technology deployed within the agency minimizing the negative aspects of using older information technology.

Older computing equipment is:

- slower at processing employee tasks reducing employee productivity
- more expensive to support
- less energy efficient
- prone to more security breaches

This equipment replacement schedule should be considered a general guide and can be adjusted year-to-year to accommodate other agency needs or budgetary constraints.

Schedule

Device Type	Replacement Schedule
Desktop Computers	Replace devices every 4 years
Standard Laptop Computers	Replace devices every 4 years
Chromebooks	Replace devices every 4 years
iPads/Tablets	Replace devices every 3 years
10ZiG Thin Clients	Replace devices every 6 years
Desktop Printers	Replace devices every 6 years
Computer Monitors	Replace devices every 8 years

Replacement Cost

Device Type	Quantity	Unit Cost	Total Cost
Desktop Computers	36	\$1,200	\$43,200
Standard Laptop Computers 15"	37	\$1,500	\$55,500
Chromebooks	0	\$365	\$0
MS Surface	0	\$795	\$0
iPads/Tablets	26	\$450	\$11,700
10ZiG Thin Clients	0	\$350	\$0
Desktop Printers	3	\$1,500	\$4,500
Computer Monitors	0	\$140	\$0
Totals			\$114,900

Equipment Qualifying for Replacement in FY23-24

Desktop Computers

Category	BABH Asset Tag	Purchased Date	Number of Years Since Purchase	Manufacturer	Model Number	Owner	Location	Department
All-in-one	8000	42597	7	Dell	Optiplex 7440		Wirt	Business Intelligence
Desktop	6413	42299	8	Dell	Optiplex 7020		Arenac Center	
Desktop	6407	42250	8	Dell	Optiplex 7020	1000	Arenac Center	Reception Office
Desktop	8006	42597	7	Dell	Optiplex 7040	0704	Wirt	Business Intelligence
Desktop	8004	42597	7	Dell	Optiplex 7040	0595	Wirt	Business Intelligence
Desktop	6479	42597	7	Dell	Optiplex 7040		MULHOLLAND	Reception Office
Desktop	6483	42597	7	Dell		0897	MULHOLLAND	Reception Office
Desktop	6480	42597	7	Dell	OptiPlex 7040		MULHOLLAND	Finance
Desktop	6473	42597	7	Dell	Optiplex 7040		MULHOLLAND	Human Resources
Desktop	6435	42401	7	Dell	Optiplex 7020		Arenac Center	Psychiatrist
Desktop	6475	42597	7	Dell	Optiplex 7040	1000	Arenac Center	Reception Office
Desktop	6472	42598	7	Dell	Optiplex	0731	Madison	Children's Services
Desktop	6484	42597	7	Dell	Optiplex 7040	0811	Madison	Staff Development
Desktop	6436	42401	7	Dell	Optiplex 7020		Madison	Psychiatrist
Desktop	6517	42597	7	Dell	Optiplex 7440		Mulholland	
Desktop	6477	42597	7	Dell	Optiplex		Mulholland	Psychiatrist
Desktop	6478	42597	7	Dell	Optiplex 7040		Mulholland	
Desktop	6485	42597	7	Dell	Optiplex 7040		North Bay	
Desktop	6486	42597	7	Dell	Optiplex 7040		North Bay	
Desktop	6481	42597	7	dell	Optiplex 7040	1628	North Bay	DD Adult
Desktop	6476	42597	7		Optiplex 7040		Wirt	Business Intelligence
Desktop	8002	42972	6	Dell	Optiplex 5050	0571	Wirt	Information Systems
Desktop	8008	42972	6	Dell	OptiPlex 5050	0713	Wirt	Information Systems
Desktop	8015	42972	6	Dell	OptiPlex 5050	1666	Wirt	Information Systems
Desktop	8012	42972	6	Dell	Optiplex 5050	0803	Wirt	Information Systems
Desktop	6533	42976	6	Dell	Dell OptiPlex 5050 - SFF	0579	MULHOLLAND	Senior Services
Desktop	6537	42972	6	Dell	Optiplex 5050		Arenac Center	
Desktop	6534	42972	6	Dell	Optiplex 5050	0746	Madison	Reception Office
Desktop	6535	42972	6	Dell	Optiplex 5050	0675	North Bay	DD Adult
Desktop	1724	42970	6		Pavilion	1070	Virtual Office	Psychiatrist
Desktop	6545	42972	6	Dell	Optiplex 5050	0803	Wirt	Information Systems
Desktop	6530	42972	6	Dell	Dell OptiPlex 5050 - SFF	0713	Wirt	Information Systems
Desktop	6539	42972	6	Dell	Optiplex 5050	1574	Wirt	Information Systems
Desktop	8103	43389	5	Dell	OptiPlex 7060	1014	North Bay	
Desktop	8102	43395	5	Dell	OptiPlex 7060	0576	MULHOLLAND	Finance
Desktop	8104	43389	5	Dell	OptiPlex 7060	1137	MULHOLLAND	
total	36							

Standard Laptop Computers

Category	BABH Asset Tag	Purchased Date	Number of Years Since Purchase	Manufacturer	Model Number	Owner	Location	Department
Laptop	6332	42005	8	Dell	Latitude E5550	1059	Mulholland	Emergency Services/Access
Laptop	1699	42719	7	Dell	XPS 15		Wirt	Business Intelligence
Laptop	1706	42719	7	Dell	XPS	0914	North Bay	Staff Development
Laptop	1700	42719	7	Dell	XPS 15	0742	Wirt	Information Systems
Laptop	1698	42719	7	Dell	Latitude E5500	0669	Wirt	Business Intelligence
Laptop	1692	42597	7	Dell	Latitude E7270	0704	Wirt	Business Intelligence
Laptop	1689	42541	7	Dell	XPS 15	1574	Wirt	Information Systems
Laptop	1702	42719	7	Dell	XPS 15	0571	Wirt	Information Systems
Laptop	1701	42719	7	Dell	XPS 15	0713	Wirt	Information Systems
Laptop	1704	42719	7	Dell	XPS	0595	Wirt	Business Intelligence
Laptop	1730	42972	6	Dell	XPS 15	0547	North Bay	DD Adult
Laptop	1727	42972	6	Dell	XPS 15	1095	Mulholland	Emergency Services/Access
Laptop	1703	42751	6	Dell	XPS 15"	1120	North Bay	
Laptop	1728	42972	6	Dell	XPS 15	0755	Madison	Staff Development
Laptop	6520	42795	6	Dell	Latitude 3460		Madison	
Laptop	1705	42750	6	Dell	XPS	1674	Madison	Staff Development
Laptop	1726	42972	6	Dell	XPS 15	1513	Madison	Staff Development
Laptop	1741	42972	6	Dell	XPS 13	0802	Mulholland	
Laptop	1745	42972	6	Dell	XPS 13	0860	Horizon Home	
Laptop	1733	42972	6	Dell	XPS		Mulholland	
Laptop	1716	42795	6		Yoga 460	1005	Mulholland	
Laptop	1714	42795	6		Yoga 460	1059	Mulholland	Emergency Services/Access
Laptop	1718	42795	6	Lenovo	Yoga 460	1059	Mulholland	Emergency Services/Access
Laptop	1721	42795	6		Yoga 460	1195	Wirt	
Laptop	1746	42972	6	Dell	XPS 13		Wirt	Recipient Rights
Laptop	1725	42976	6	Dell	XPS	0803	Wirt	Information Systems
Laptop	1737	42972	6		XPS 13"	1580	Mulholland	Community Treatment Services
Laptop	1736	42972	6	Dell	XPS 13"	0238	North Bay	DD Adult
Laptop	1735	42972	6	Dell	XPS 13"	1636	Mulholland	Business Intelligence
Laptop	1734	42972	6	Dell	XPS 13	1026	Horizon Home	
Laptop	1732	42972	6	Dell	XPS	0850	Mulholland	Psychologist
Laptop	1731	42972	6	Dell	XPS 15"	0561	Mulholland	Finance
Laptop	1769	43389	5	Dell	XPS 15	1633	Madison	Nursing
Laptop	1767	43391	5	Dell	XPS 13		North Bay	
Laptop	6566	43304	5	Dell	XPS 13	1199	Mulholland	
Laptop	6561	43238	5	Dell	XPS 15	1067	Mulholland	Senior Services
Laptop	6558	43146	5	Dell	XPS 13 2-in-1	1212	North Bay	DD Adult
total	37							

iPads/Tablets

Category	BABH Asset Tag	Purchased Date	Number of Years Since Purchase	Manufacturer	Model Number	Owner	Location	Department
iPad	6366	41901	9	Apple	iPad Air		Madison	Children's Services
iPad	6376	42111	8	Apple	iPad Air	1152	Madison	
iPad	6521	42872	6	Apple	iPad Pro 12.9"	0883	MULHOLLAND	Senior Services
iPad	6466	42872	6	Apple	iPad Air 2		Wirt	Information Systems
iPad	6544	43013	6	Apple	5th Gen		Wirt	
iPad	6552	43010	6	Apple	5th Gen		North Bay	DD Adult
iPad	6568	43306	5	Apple	5th Gen	1146	Mulholland	
iPad	6740	43712	4	Apple	6th Gen	0552	Arenac Center	
iPad	6738	43713	4		6th Gen	0552	Arenac Center	
iPad	6737	43718	4		6th Gen			
iPad	6723	43718	4		6th Gen	0731		
iPad	6748	43731	4		6th Gen	0561	MULHOLLAND	Finance
iPad	6724	43731	4		6th Gen	1574	Wirt	Information Systems
iPad	6728	43732	4	Apple	6th Gen	1507	Wirt	Information Systems
iPad	6745	43733	4		6th Gen	1161	North Bay	
iPad	6730	43734	4		6th Gen	1671	MULHOLLAND	Children's Services
iPad	8138	43754	4	Apple	6th Gen		Mulholland	Information Systems
iPad	8135	43754	4		6th Gen		Wirt	Information Systems
iPad	8123	43756	4		6th Gen	0571	Wirt	Information Systems
iPad	8142	43770	4		6th Gen	0995		
iPad	8143	43770	4		6th Gen	1215	MULHOLLAND	Assertive Community Treatment
iPad	6734	43770	4		6th Gen	1479	Mulholland	Assertive Community Treatment
iPad	8149	43775	4		6th Gen	1095		
iPad	8275	43721	4	Apple	iPad 6th Generation		Wirt	Information Systems
iPad	8127	43734	4	Apple	6th Gen iPad	1503	Arenac Center	
iPad	8128	43709	4	Apple	6th Gen		Mulholland	Board Admin
total	26							

—Printers and scanners

Category	BABH Asset Tag	Purchased Date	Number of Years Since Purchase	Manufacturer	Model Number	Owner	Location	Department
Printer	1668	41355	10		WorkCentre 7120	0936	Madison	
Printer	8027	42948	6	HP	F2A69A	0034	MULHOLLAND	Finance
Scanner	6467	42513	7		ix500	0995	Mulholland	Board Admin
total	3							

BABH Master Agreement List

Item	Purpose	Notes	Licenses	Agreement	Invoice Only	Hosting/ Vendor	Term Start	Term End	Scope/Users	Fee/Rate	Annual Cost
NSO	Cloud computing environment	Monthly summary IaaS \$10,875.75 Security \$2,954.60 Backups \$2,195 Management \$2,775.80 3rd party subs \$9,979.20 Total monthly: \$28,780.35		X		NSO	02/01/2023	02/01/2026			\$345,336.20
BlueHost.com	Website Hosting and Support					BlueHost.com	5/16/2019 04/23/2022	5/16/2022 04/23/2025		\$142.20 for 36 months \$323.64 for 36m	\$47.40 per year \$107.88 per year
WhatsUp Gold	Integrated network and application monitoring system service agreement			X		BABH	9/18/14 retroactive 6/16/2016 6/16/2016 6/16/2017 6/16/2018 6/16/2019 6/16/2020 6/16/2021 6/16/2022	6/16/2015 6/16/2016 6/16/2017 6/16/2018 6/16/2019 6/16/2020 6/16/2021 6/16/2022	300 devices	1250.00/year	1099 1208.90 1250.00
Synergy - MS Dynamics Support (or successor vendor)	Support for Solomon (MS Dynamics)			X				evergreen		hourly rate	
Go To Meeting	Meeting services and audio conferencing service	Help Desk is admin – investigate reducing to 1 license	x				3/20/2014	9/30/2014 evergreen	3 users	16.00/month/ seat	\$576
OpenVoice Conf Rm # 7833212 Moderator PIN 8240193	conference calling service	T Adler is administrator	X						10 users 3 users	.08 cents/per minute + ISF rate (usually around 20/25 percent)	

Item	Purpose	Notes	Licenses	Agreement	Invoice Only	Hosting/ Vendor	Term Start	Term End	Scope/Users	Fee/Rate	Annual Cost
Zoom	Telepsychiatry and conference room video conferencing	Month to month service used for telepsychiatry and video conferencing	X			Zoom	Month to Month	Month to Month	78 users 1 Room Connectors	\$14.99 per user per month \$34.20 per H.232 Room Connector for external meetings	5050.2 4718.28
Verizon Wireless	for mobile phone service										
Communications as a Services (CaaS) - ShoreTel and BABH network equipment	Call center functionality and support for IP communicator	ES/Access Center call center and Help Desk phone systems	X	X	"	NSO	9/1/2017	9/1/2022	Phone System Network switches Network routers Fax system	1778.75 / mo	\$21,346.20
Charter Acct 8245-12-318-007-7655	for general guest access at offices					Charter		evergreen			
Opt E Man Circuit ASE Circuit (Ethernet)	Mulholland Building	AT&T Account Number: 989 R41-0200 612 2		X		NSO	9/30/2011 9/30/2016 8/23/2018	10/25/2016 10/25/2018 Monthly	50 MBPS	\$1,124.46/mo \$748/mo \$752.64/mo 3/21	13493.52 \$8,976 \$9,031.68
Opt E Man Circuit ASE Circuit (Ethernet)	Madison Building	AT&T Account Number: 989 R41-0125 619 9		X		NSO	9/30/2011 9/30/2016 8/23/2018	10/25/2016 10/25/2018 Monthly	50 MBPS	\$1,124.46/mo \$748/mo \$752.64/mo 3/21	13493.52 \$8,976 \$9,031.68
ASE Circuit	Arenac Building	ASE 20mb Circuit between Arenac and NSO Hampton Place location		X		NSO	9/20/2016 8/23/2018	10/25/2016 10/25/2018 Monthly	20 MBPS 50 MPBS	\$1,124.46/mo \$748/mo \$752.64/mo 3/21	13493.52 \$8,976 \$9,031.68
Opt E Man Circuit ASE Circuit (Ethernet)	Wirt Building	AT&T Account Number: 989 R41-0068 081 1		X		NSO	2/18/2011 8/3/2016 8/23/2018	10/25/2016 10/25/2018 Monthly	50 MBPS	\$1,124.46/mo \$748/mo \$752.64/mo 3/21	13493.52 \$8,976 \$9,031.68
ASE Circuit (Ethernet)	ASE Fiber Hub - NSO Hampton Place	ASE Hub req'd to provide a hub-and-spoke infrastructure for ASE Circuits being installed as of 8/23/18		X		NSO	8/23/2018	8/23/2021	250 MBPS	\$1,250/mo \$1257.57/mo 3/21	\$15,000 \$15,090.84
Opt E Man Circuit ASE Circuit (Ethernet)	Kawkawlin Site (North Bay)	AT&T Account Number: 989 R41-0229 718 4		X		NSO	6/3/2011 10/25/2016 8/23/2018	10/25/2016 10/25/2018 Monthly	50 MBPS	\$1,124.46/mo \$748/mo \$752.64/mo 3/21	13493.52 \$8,976 \$9,031.68

Item	Purpose	Notes	Licenses	Agreement	Invoice Only	Hosting/ Vendor	Term Start	Term End	Scope/Users	Fee/Rate	Annual Cost
T1-PRI Circuit - Mulholland	special T1 circuits - Primary Rate Interface carries voice and data between network and end user	Renewal approved during 4/2015 board meeting, included unlimited intralata calls for \$80/month				AT&T Tel-Net	5/30/2014 5/30/2015 5/30/2016 5/30/2017 5/30/2018 5/30/2019 5/30/2020 5/30/2021	5/29/2015 5/29/2016 5/30/2017 5/30/2018 5/30/2019 5/30/2020 5/30/2021 Monthly	12 mos	Base Fee \$285/mo \$365/mo \$440/mo	
T1-PRI Circuit - for NSO site for BABH calls	special T1 circuits - Primary Rate Interface carries voice and data between network and end user	Renewal approved during 4/2015 board meeting, included unlimited intralata calls for \$80/month				AT&T Tel-Net	5/30/2014 5/30/2015 5/30/2016 5/30/2017 5/30/2018 5/30/2019 5/30/2020 5/30/2021	5/29/2015 5/29/2016 5/30/2017 5/30/2018 5/30/2019 5/30/2020 5/30/2021 Monthly	12 mos	Base Cost \$285/mo \$365/mo \$440.65	
PRI - Arenac Center	special T1 circuits - Primary Rate Interface carries voice and data between network and end user	TelNet Account Number: TN021779		x		AT&T TelNet	TelNet starting 8/4/14 8/4/16 8/4/2017 10/1/2018 10/1/2019	6/1/2014 7/4/16 8/4/17 8/4/2018 10/1/2019 10/1/2020 10/1/2021 Monthly		Base Cost \$365/mo \$405.15	
PRI - Madison	special T1 circuits - Primary Rate Interface carries voice and data between network and end user	TelNet PRI - Account # TN021871 Order # TNN4589753 Circuit ID PPTHT1000041168		x		TelNet	10/10/2014 10/10/2016 10/10/2017 10/1/2018 10/1/2019	10/10/2016 10/10/2017 10/10/2018 10/1/2019 10/1/2020 10/1/2021 Monthly		Base Cost \$365/mo \$421.70	
Omnilert - Mass Notification System	Omnilert - mass notification system for alerting staff of emergent situations via email, SMS, and calling cell and desk phones	Licensed for 425 Users. 250 staff contacts and 2 contacts for each provider.		x		Omnilert	9/28/2015 9/28/2016 9/28/2017 9/28/2018 9/28/2019 9/28/2020 9/28/2021	9/27/2016 9/27/2017 9/27/2018 9/28/2019 9/28/2020 9/28/2021 9/28/2022	425 Users 300 Users 378 users	Platform Cost \$1,800/yr User \$4.20/yr (300378 users)	3585 \$3,060 \$3,388
Ruckus Wireless		Support license renewals for controller and access point licenses; provides the latest patches and free warranty	14			NSO/Ruckus	9/16/2016 10/23/2017 10/23/2018	10/22/2017 10/23/2018 10/23/2019		\$464/yr \$717/yr \$749/ yr	\$464/yr \$717/yr \$749/yr 2022

Item	Purpose	Notes	Licenses	Agreement	Invoice Only	Hosting/ Vendor	Term Start	Term End	Scope/Users	Fee/Rate	Annual Cost
		replacement if the device fails. This renewal is being done through Abadata at this time.					10/23/2019 10/23/2020 10/21/2021 10/21/2022	10/23/2020 10/23/2021 10/21/2022 10/21/2023			
Fortinet UTM Firewall Support includes FW hardware, FortiMgr support, and IOS subscriptions		Support for Fortinet UTM firewalls. Includes all branch firewalls and main FW at NSO network hub; support for Forti-Mgr and Forti-Analyzer servers; subscription for ongoing threat to keep security devices upgraded. Bought service with 5-year term when purchasing equipment.		x		NSO/ Fortinet	11/1/2020	11/1/2025		Prepaid 5 year term.	\$464/yr
SSL Certificate - Wild Card	for multiple use *babha.org					Go-Daddy	5/21/2014 5/20/2018 5/20/2022	5/20/2018 5/20/2022 5/20/2023	one multi-use cert	\$1,079 \$449.99	\$449.99
Domain Registration Account - babha.org	web domain for access to network for BABHA	Some domains are through Go-Daddy; others through Network Solutions			X		?	10/9/2017 10/9/2020 10/9/2021 10/9/2025		Prepaid 5-year term \$105.85	\$21.17
MS SPLA (MS Office) - Host A - Citrix w Office Standard	Word, Excel, PowerPoint, Publisher, One Note, Outlook	Replaced with ComLink/NSO Cloud Agreement SPLA	X	X	-	-	-	-	-	-	-
MS Office single use licenses for laptops and desktops			X	-	-	-	n/a	n/a	9 Office Standard 2013 3 Office Professional 2013	Office Std 2013: \$254.89/each Office Pro 2013: \$348.04/each	n/a
Adobe	Acrobat used to update PDF documents	BABH has 5? Adobe subscriptions - Acrobat (T Adler, J Louks, S. McRae, B. Beck; D. Groh);	X				Acrobat - May 2013	n/a	Acrobat – J. Louks, T Adler, S. McRae, B. Beck, D. Groh	Acrobat - \$14.99/month/user	179.88 /user

Item	Purpose	Notes	Licenses	Agreement	Invoice Only	Hosting/ Vendor	Term Start	Term End	Scope/Users	Fee/Rate	Annual Cost
Fixed Asset Software (Sage)	Finance - asset management	-handled by Finance directly	X				11/1/2014 11/1/2015 11/1/2016 1/1/2018 11/1/2018 11/1/2019 11/1/2020	11/1/2015 11/1/2016 11/1/2017 12/31/2018 11/1/2019 11/1/2020 11/1/2021	5 licenses	\$3,211/yr	\$3,211/yr
PCE Clinical Information Systems	EMR Implementation						9/20/2013	3/3/2014		\$219,940	
PCE Clinical Information Systems	ASP Services						3/1/2014 3/1/2017 3/1/2020	2/28/2017 2/29/2020 2/28/2023		\$21,600/Month	
PCE Clinical Information Systems	EPCS	E-prescribing (including controlled substances) for 10 prescribers	X				1/16/2014	evergreen	10 licenses	\$1,500/month per prescriber	\$18,000.00
CAFAS (Functional Assessment Systems)	web service with Multi-Health Systems	to permit PCE- Phoenix integration w/ CAFAS/ PECAFAS					1/15/2014 3/12/15	1/15/2015 3/12/16	implementation fee and annual fee	\$1,999 implementation fee \$499 annual fee	\$1,999
SpeechExec-Pro Transcribe	Dictation software for Madison Clinic						#1 01/2022 #2 08/19/22	#1 01/2024 #2 08/19/24	Two licenses	\$254.15 per two-year subscription	\$254.16
Jam Software – TreeSize Professional	program used to monitor/report file sizes, folders, folder permissions.						09/01/2022	08/31/2023	1 license – T.Adler	\$27.98/year	\$27.98
MSDN (Microsoft Developer Network) was through PC Connection; now CDW	software development tools used by Greg W and Greg L; Visual Studio is obtained through MSDN; (used for Gallery)	Licenses have been established for both Lisa Nagel and Greg Lietzow	X			CDW Vendor varies based on price	10/1/2012 10/8/13 12/16/14 12/16/15 12/16/16 12/16/17 12/16/18 12/16/19 12/26/20	9/30/2013 10/7/14 12/16/15 12/16/16 12/16/17 12/16/18 12/16/19 12/16/20 12/26/22	6 licenses 1 license 2 licenses - LNagel and GLietzow	\$2,869 \$1,113 \$2,000 \$799 (for GL renewal)	n/a
Telerik DevCraft Support and Maintenance	software development tools (used for Gallery)	Reduced from 5 licenses to 2	X	X			3/1/2014 2/27/15 2/27/16 2/27/17 2/27/18	2/28/2015 2/27/16 2/27/17 2/27/18 2/27/19	5 licenses 2 licenses	\$649 ea (inc volume discount of 10%) \$606.69 ea (inc 10% discount and govt discount)	1286.18 \$1,213.38

Item	Purpose	Notes	Licenses	Agreement	Invoice Only	Hosting/ Vendor	Term Start	Term End	Scope/Users	Fee/Rate	Annual Cost
							2/27/19 2/27/20 2/27/21	2/27/20 2/27/21 2/27/22			

**Bay-Arenac Behavioral Health Authority
Medical Staff Plan
2021-2022**

Board Adoption: 5/20/2021

ARTICLE I: PURPOSE

The Medical Staff of Bay-Arenac Behavioral Health Authority, (BABHA) is composed of licensed independent or supervised practitioners who provide medical care to the agency's consumers either under employment or contractual arrangements.

The Medical Director, under the authority of the Chief Executive Officer (CEO) and Board, is responsible for establishing and monitoring standards of care, resolving disputes over clinical matters, providing supervision to all medical and nursing staff and promoting quality and performance improvement initiatives.

ARTICLE II: MEDICAL STAFF MEMBERSHIP

Section 1. Nature of Medical Staff Membership

Membership on the BABHA medical staff is a privilege, which shall be extended only to professionally competent prescribing professionals who continuously meet the qualifications, standards and requirements set forth in this Medical Staff Plan.

Section 2. Qualifications for Membership

- A. Only a prescribing professional holding an unlimited license to practice in the State of Michigan, who can produce evidence of his or her background, experience, training, judgment, individual character, and demonstrated competence, physical and mental capabilities (referring to any potential impairment), adherence to the ethics of his/her profession to assure the Medical Director, and/or the CEO that any patient treated by him/her will be given a high quality of medical care, shall be qualified to apply for membership, and
- B. Primary Source verification of successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) approved residency for the Psychiatrist is required. National board certification in specialty is preferred. National certification from the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP) for Nurse Practitioners or National Commission on Certification of Physician Assistants (NCCPA) for Physician Assistants is required at hire or contract.

Section 3. Nondiscrimination

No aspect of Medical Staff membership or clinical privileges shall be denied on the basis of gender, race, religion, age, creed, color, national origin or any other basis prohibited by law.

Section 4. Conditions and Duration of Privileges

- A. The CEO shall review all initial privileges and renewal of privileges to the Medical Staff, upon recommendation by the Medical Director. The Medical Director will seek input from the Healthcare Practices Committee (HPC) when formulating his/her recommendation(s). The Medical Director will then make recommendations to the CEO. If the CEO concurs with the Medical Director's recommendation(s), the privileging request is forwarded to the appropriate committee of the BABH Board for action. The Board shall act on privileges and renewal of privileges, denials or revocations of privileges and reinstatements, and
- B. Renewal of privileges to the Medical Staff shall be for no more than 24 calendar months. Initial privileges are Provisional and are for 12 calendar months.

Section 5. Ethics

A person who accepts membership on the Medical Staff agrees to act in an ethical, professional, and courteous manner, in accordance with the mission and philosophy of BABHA.

Section 6. Responsibilities of Membership

- A. Each Medical Staff member must abide by the Medical Staff Plan,
- B. And BABHA policies and procedures and recommendations made by the (HPC), when applicable.
- C. Each Medical Staff member shall, upon request, provide documented evidence of current and continuous professional license, Federal and State controlled substance licenses, recent MAPS report card if applicable, and professional liability insurance in accordance with BABHA policy.
- D. Each Medical Staff member shall submit a complete application for renewal of privileges prior to the end of the current privileging time frame, as directed by the credential verification organization. Failure of the Member to submit such an application in a timely manner shall be construed as a voluntary resignation from the Medical Staff.
- D. Each Medical Staff member shall notify the Medical Director or CEO in writing within 15 calendar days or receipt of written or oral notice of any investigation or adverse action affecting Medical Staff membership or privileges at any hospital or health care entity, the commencement of an investigation or pending action regarding his/her license to practice

in the State of Michigan or in any other state, the loss of professional liability insurance, the filing of criminal charges, or any change in physical or mental health status which may interfere with the competent practice of his/her profession and performance of duties. Failure to notify may result in immediate suspension of privileges. The Medical Director or CEO is required to report any receipt of written or oral notice of any of the above action to the Department of Licensing and Regulatory Affairs (LARA).

Section 7. Medical Staff Member Rights

- A. Each member of the Medical Staff has the right to meet with the Medical Director or the CEO.
- B. Each member of the Medical Staff has the right to fully participate in the meeting of the Medical Staff.

Section 8. Temporary Privileges and Provisional Privileges

- A. Temporary Privileges

The Healthcare Practices Committee will review credentials prior to making a recommendation for temporary privileges to the CEO. Temporary privileges may be granted for up to 120 days during the Credentialing Process. to the Temporary privileges may be granted to an applicant by the CEO, in consultation with the Medical Director, for up to 120 days during the Credentialing Procedure.

- B. Provisional Privileges^[JL1]

Each applicant approved for initial privileges will be granted Provisional Privileges for a period of one calendar year. At the end of the one-year provisional period, an evaluation of performance, to include input from the HPC, will be conducted. The individual will be eligible for full privileges if all requirements have been fulfilled and an acceptable standard of care and conduct have been rendered.

ARTICLE III: MEDICAL STAFF MEETINGS

Section 1. Meetings of Medical Staff

- A. Meetings of the Medical Staff shall be held and chaired by the Medical Director. Written notice of the meeting will be sent to all members of the medical staff. The agenda of the meeting may include reports on quality indicators, pertinent clinical topics or case studies and performance measures. In addition, goals for the following year will be discussed and established.
- B. Written minutes of all meetings shall be recorded and approved.

- C. Additional communications during the year may occur by mail (e.g. newsletters, etc.) and email.
- D. All nursing staff from the clinic sites will be periodically invited to attend the regularly scheduled Medical Staff meetings.

ARTICLE IV: PROFESSIONAL REVIEW ACTIONS

Section 1. Automatic Revocation (Voluntary Resignation), Suspension, Restriction, Limitation

- A. **State License:** Whenever a medical staff member's license to practice in the state of Michigan (and in the state which they are physically located while practicing tele-psych) is revoked, suspended, or in any way limited or restricted, his/her privileges to practice under contract with BABHA will also be revoked, suspended, limited, or restricted to the same degree. Revocation shall result in immediate and automatic revocation of Medical Staff membership and all clinical privileges. Any suspension, limitation or restriction will be effective upon and for at least the term of the imposed suspension, limitation or restriction. The Medical Director, under the authority of the CEO, will implement the appropriate restriction. If BABHA takes any action against any medical staff member for a quality concern, the Medical Director and/or CEO are required to report this to the State of Michigan Health Professional Licensing Bureau (LARA).
- B. **Drug Enforcement Agency (DEA) and State of Michigan Controlled Substance License:** If a medical staff member's right to prescribe controlled substances is revoked, restricted, suspended, or placed on probation by a proper licensing authority, his or her privileges to prescribe such substances under contract with BABHA will also be revoked, restricted, suspended or placed on probation. The Medical Director, under the authority of the CEO, will implement the appropriate restriction.
- C. **Professional Liability Insurance:** Evidence of professional liability insurance coverage, as defined by BABHA policy and/or clinical service contracts, shall be submitted upon request and in no event more than thirty calendar days after the effective date of the policy or renewal of the policy. Failure to maintain a minimum amount of professional liability insurance or to provide evidence thereof shall be construed as a voluntary resignation from the member's medical staff clinical privileges.

Any Member of the Medical Staff whose membership and clinical privileges have been automatically revoked under Section 1 above shall not have the right to a hearing under the Board's Grievance Procedure.

ARTICLE V: IMMUNITY FROM LIABILITY

The following shall be express conditions to any practitioner's application or reapplication for membership and clinical privileges with the BABHA Medical Staff.

Section 1. Privileged Communications

Any act, communication, report, recommendation, or disclosure regarding any practitioner, performed or made in good faith and without malice and at the request of an authorized representation of this or any other healthcare entity, for the purpose of achieving and maintaining quality patient care in this or any other healthcare entity, shall be privileged from disclosure to the fullest extent provided by law.

Section 2. Immunity and Release from Liability

No person furnishing information, data, reports, and records to any supervisor, Medical Director, or CEO regarding any member of the medical staff shall, by reason of furnishing such information, be liable in damages to any person. Employees of BABHA will not be liable in damages to any person for any actions taken or recommendation made within the scope of his/her employment if such an employee acts without malice and in the reasonable belief that such action or recommendation is warranted by the facts known to him/her. Each member and applicant agree to release, indemnify and hold harmless BABHA and all third parties from liability for any and all such statements or actions.

Section 3. Release of Information

BABHA representatives who may provide information to any other hospital or entity to which a Member or past Member may apply for membership and/or clinical privileges shall, by reason of furnishing such information, not be held liable in damages to any person, provided such release of information is made within the scope of the duties of such representative and is made in good faith and without malice.

ARTICLE VI: HEALTHCARE PRACTICE COMMITTEE (HPC)

Section I. Medical Director Responsibilities

- A. The Medical Director of BABHA will provide oversight of the Medical Staff Psychiatric Services and Health Care Practices.
- B. The oversight and peer review processes will be completed through the HPC activities, as outlined in the HPC criteria for review.
- C. These processes will be for educational purposes and monitoring for quality trends and compliance with agency policy and procedures for the licensed professionals providing services in the Medical Practices.
- D. The Medical Director will consult with the CEO regarding the Medical Staff Practices, as deemed necessary.

Section 2. Meeting Activities

- A. The HPC will meet on a monthly basis, or sooner if needed, to review established criteria, as outlined in the HPC.
- B. The HPC will review all medically related policies, procedures, and plans.
- C. The HPC will provide peer review information and other pertinent information to the Medical Director during the privileging process.
- D. Nursing Self-Assessment Skills Checklist will be completed annually by each nurse and reported to HCP, as necessary.

ARTICLE VII: MANAGEMENT OF PRESCRIBING PRACTICES

Section I. Electronic Software

- A. All BABHA sites will use an electronic software system to ensure a prescribing data base is in place.
- B. This database will be used to review prescribing practices and feedback will be provided to the HPC as appropriate.

ARTICLE VIII. ATTACHMENTS

HPC Committee – Statement of Purpose and Membership

Attachments to HPC:

- Medical Record Peer Review Guidelines
- Medical Record Peer Review Tool
- Nursing Self-Assessment Skills Checklist