

AGENDA

BAY ARENAC BEHAVIORAL HEALTH BOARD OF DIRECTORS FINANCE COMMITTEE MEETING

Wednesday, May 8, 2024 at 5:00 pm

Room 225, Behavioral Health Center, 201 Mulholland Street, Bay City, MI 48708

Committee Members:	Present	Excused	Absent	Committee Member	Present	Excused	Absent	Others Present:
Sally Mrozinski, V Ch	_____	_____	_____	Pam Schumacher	_____	_____	_____	BABH: Marci Rozek, Chris Pinter, and Sara McRae
Tim Banaszak	_____	_____	_____	Pat McFarland, Ex Off	_____	_____	_____	
Jerome Crete	_____	_____	_____	Robert Pawlak, Ex Off	_____	_____	_____	Legend: M-Motion; S-Support; MA-Motion Adopted; AB-Abstained
Christopher Girard	_____	_____	_____	Richard Byrne, Ex Off	_____	_____	_____	
Kathy Niemiec	_____	_____	_____					

	Agenda Item	Discussion	Motion/Action
1.	Call To Order & Roll Call		
2.	Public Input (Maximum of 3 Minutes)		
3.	Nomination & Elections 3.1) Committee Chair 3.2) Committee Vice Chair		3.1) Consideration of nomination to elect _____ as Committee Chair 3.2) Consideration of nomination to elect _____ as Committee Vice Chair
4.	Investment Earning Reports for Period Ending April 30, 2024		4) Consideration of motion to refer the investment earnings reports for period ending April 30, 2024 to the full Board for information
5.	Contracts 5.1) Finance May 2024 Contract List		5.1) Consideration of motion to refer the Finance May 2024 contract list to the full Board for approval
6.	Unfinished Business 6.1) None		

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7.	<p>New Business</p> <p>7.1) Request for Funds from the Voluntary Employees' Beneficiary Association (VEBA) Plan</p> <p>7.2) Fiscal Year (FY) 2024 Medicaid, Healthy Michigan & General Fund Trends</p> <p>7.3) FY 2024 Equipment Replacement</p> <p>7.4) WiFi System Update</p> <p>7.5) Heating, Ventilation & Air Condition (HVAC) Preventative Maintenance & Madison Roof top Units</p>		<p>7.1) No action necessary</p> <p>7.2) No action necessary</p> <p>7.3) Consideration to refer replacing the information technology equipment for an amount not to exceed \$81,715 to the full Board for approval</p> <p>7.4) Consideration to refer the WiFi System update for an amount up to \$29,040 to the full Board for approval</p> <p>7.5) No action necessary</p>
8.	Adjournment	M -	S - pm MA

Bay-Arenac Behavioral Health Authority
Estimated Cash and Investment Balances April 30, 2024

Balance April 1, 2024	6,560,326.58
Balance April 30, 2024	6,598,511.81
Average Daily Balance	5,613,887.57
Estimated Actual/Accrued Interest April 2024	19,128.86
Effective Rate of Interest Earning April 2024	4.09%
Estimated Actual/Accrued Interest Fiscal Year to Date	146,246.05
Effective Rate of Interest Earning Fiscal Year to Date	4.19%

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

Cash Available - Operating Fund

	Rate	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24
Beg. Balance Operating Funds - Cash, Cash equivalents, Investments		4,145,850	3,560,754	2,822,426	3,940,689	3,431,903	4,022,437	3,285,926	8,549,839	7,456,274	7,733,635	3,167,316	6,109,840
Cash in		7,365,485	6,140,991	9,939,499	6,328,711	12,694,585	11,257,050	21,945,755	11,552,037	11,480,507	4,835,627	19,658,739	13,131,069
Cash out		(7,950,581)	(6,879,319)	(8,821,236)	(6,837,497)	(12,104,052)	(11,993,562)	(16,681,841)	(12,645,602)	(11,203,146)	(9,401,946)	(16,716,214)	(13,094,320)
Ending Balance Operating Fund		3,560,754	2,822,426	3,940,689	3,431,903	4,022,437	3,285,926	8,549,839	7,456,274	7,733,635	3,167,316	6,109,840	6,146,590
Investments													
Money Markets		3,560,754	2,822,426	3,940,689	3,431,903	4,022,437	3,285,926	8,549,839	7,456,274	7,733,635	3,167,316	6,109,840	6,146,590
90.00													
180.00													
180.00													
270.00													
270.00													
Total Operating Cash, Cash equivalents, Invested		3,560,754	2,822,426	3,940,689	3,431,903	4,022,437	3,285,926	8,549,839	7,456,274	7,733,635	3,167,316	6,109,840	6,146,590
Average Rate of Return General Funds		2.25%	2.41%	2.51%	2.60%	2.69%	3.82%	3.96%	4.01%	4.04%	4.05%	4.08%	4.08%
		3.01%	3.66%	3.46%	3.51%	3.71%	3.82%	4.09%	4.13%	4.11%	4.10%	4.24%	4.08%
		5,435,635	5,145,279	5,024,820	4,880,009	4,808,545	3,285,926	5,917,883	6,430,680	6,756,419	6,038,598	6,050,472	6,064,203

Cash Available - Other Restricted Funds

	Rate	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24
Beg. Balance-Other Restricted Funds - Cash, Cash equivalents, Investments		430,428	432,047	433,645	435,308	437,156	438,953	440,817	442,629	444,508	446,396	448,169	450,072
Cash in		1,619	1,598	1,663	1,849	1,797	1,864	1,812	1,880	1,888	1,773	1,903	1,850
Cash out													
Ending Balance Other Restricted Funds		432,047	433,645	435,308	437,156	438,953	440,817	442,629	444,508	446,396	448,169	450,072	451,922
Investments													
Money Market		432,047	433,645	435,308	437,156	438,953	440,817	442,629	444,508	446,396	448,169	450,072	451,922
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		432,047	433,645	435,308	437,156	438,953	440,817	442,629	444,508	446,396	448,169	450,072	451,922
Average Rate of Return Other Restricted Funds		3.58%	3.68%	3.76%	3.88%	3.97%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%
		4.35%	4.50%	4.50%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%
		426,976	427,717	428,476	429,265	430,073	440,817	441,723	442,651	443,587	444,504	445,432	446,359
Total - Bal excludes payroll related cash accounts		3,992,801	3,256,071	4,375,997	3,869,059	4,461,390	3,726,743	8,992,468	7,900,782	8,180,031	3,615,485	6,559,912	6,598,512
Total Average Rate of Return		2.25%	2.34%	2.41%	2.51%	2.58%	4.04%	4.08%	4.20%	4.21%	4.17%	4.20%	4.19%

Bay-Arenac Behavioral Health
 Finance Council Board Meeting
 Summary of Proposed Contracts
 May 8, 2024

		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	N	Positive Behavior Supports Corporation In-home ABA Services	\$0	State rates eff 10/1/22 (Same rates with exception of codes 0373T at \$28.40/unit , 97153 at \$14.03/unit and 97154 at \$4.83 to include DCW increase)	4/23/24 - 9/30/24	Y N
2	N	Dr. Bridget Smith Psychiatric Coverage (approx. 4 days/month)	\$0	\$200/hour	7/1/24 - 6/30/25	Y N
3	M	Saginaw Psychological Services DBT Training Reimbursement for 4 Individuals	\$0	\$8,623	5/6/24 - 9/30/24	Y N
Admin/Other Services						
4	N	New Dimensions Courier Services - 1 Day/Week	\$0	\$175/day \$184/day	6/3/24 - 12/31/24 1/1/25 - 9/30/25	Y N
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:

BAY COUNTY VOLUNTARY EMPLOYEES' BENEFICIARY ASSOCIATION
Retiree Health Benefit Costs Substantiation Form

Pursuant to §R5 of the Bay County Board of Trustees Rules and Regulations Related to Use of Trust Assets, you are submitting this form to the Bay County VEBA Board of Trustees ("Board") on behalf of the Bay County Voluntary Employees' Beneficiary Association ("Trust") directing payment from assets held within your Employer Account for eligible Retiree Health Benefit Costs. *You must complete this form in its entirety and return it (and all required documentation) within 30 days after the end of the calendar year quarter in which the Retiree Health Care Costs were incurred to Jennifer Davenport, Bay County Building, 515 Center Avenue, Suite 301, Bay City, Michigan 48708; or davenportj@baycounty.net.*

In order to substantiate your request for payment of Retiree Health Benefit Costs, please respond to the following:

The quarter that this request relates to:

1st Qu Quarter (January – March) 2nd Quarter (April – June)
 3rd Quarter (July – September) 4th Quarter (October – December)

Year: 20 24

What is the total amount of Retiree Health Benefit Costs for which you are seeking payment? \$ 107,973.97

How many participants (retirees, spouses, and dependents) do the Retiree Health Benefit Costs relate to? 96

Please answer the following with respect to the Retiree Health Benefit Costs for which you are seeking payment (you may attach separate pages):

- A description of the type of Retiree Health Benefits (e.g. retiree medical; retiree dental; retiree vision; retiree prescription; and/or retiree life insurance), including the carrier/administrator that provides the benefit.
- Spreadsheet showing the following:
 - Name of each participant to which an expense for Retiree Health Benefit Costs relates
 - Notation of whether such participant is a retiree, spouse, or dependent
 - Confirmation that such participant was enrolled in and met eligibility requirements of the plan during the period to which the expense for Retiree Health Benefit Costs relates
- The invoice, pay statement, or other documentation from the carrier / administrator substantiating that:
 - The expense request only relates to the specific type of Retiree Health Benefits being requested for processing
 - The expense request only relates to eligible participants
 - The breakdown of cost per enrolled participant

**The invoice, statement, or other documentation from the carrier / administrator must indicate that the cost per participant x the number of enrolled participants = the total dollar amount reflected on the invoice / statement. The receipts or invoices you attach must add up to the total expenses you are requesting processing for. Expenses that do not have a receipt or invoice will not be processed.*

You acknowledge and affirm that:

- You are only eligible to utilize assets held within your Employer Account to pay for Retiree Health Benefit Costs that have been fully and totally substantiated in accordance with the applicable requirements of the Bay County Board of Trustees Rules and Regulations Related to Use of Trust Assets;
- The Board has the right to and will deny all or part of your expense request if the request relates to expenses not covered by the Trust and/or Internal Revenue Code § 501(c)(9) and its related regulations;

- You must affirmatively respond to any and all notices received from the Board related to use of assets held within your Employer Account;
- The Board reserves the right to request additional information if it deems, in its sole discretion, that further substantiation is needed; and
- The Board will deny requests that relate to a time period that is not the immediately preceding calendar quarter.

Bay-Arenac Behavioral Health
Employer Name

Karl White
Name
Accounting Mgr
Title

Inv Ref	Carrier	Benefit type	Coverage Period	Group & Div	Invoice Number	Invoice Amount
A	Medicare PLUS Blue PPO	Retiree Medical >65	Jan	19852-600	231206490576	13,132.98
B	Medicare PLUS Blue PPO	Retiree Medical >65	Feb	19852-600	240106863860	13,758.36
C	Medicare PLUS Blue PPO	Retiree Medical >65	Mar	19852-600	240206239834	13,341.44
D	BCBSM	Retiree Medical <65	Jan	007000246-0009	174674037	25,867.51
E	BCBSM	Retiree Medical <65	Feb	007000246-0009	176915725	25,119.17
F	BCBSM	Retiree Medical <65	Mar	007000246-0009	178776774	25,909.08
G	BCBSM	Retiree Dental	Jan-Feb	007000246-0013	176916555	3,076.22
H	BCBSM	Retiree Dental	Mar	007000246-0013	178777427	1,420.77
I	EyeMed	Retiree eye care	Jan	1011504-1001	166102756	347.39
J	EyeMed	Retiree eye care	Feb	1011504-1001	166148925	347.39
K	EyeMed	Retiree eye care	Mar	1011504-1001	166193538	347.39
L	Blue Care Network of MI	Retiree Medical HMO	Jan	007000246-0002	233630005403	1,210.44
M	Blue Care Network of MI	Retiree Medical HMO	Feb	007000246-0002	240090074116	1,210.44
N	Blue Care Network of MI	Retiree Medical HMO	Mar	007000246-0002	240370084668	1,210.44
	Pmt from Retiree Accts	Comerica	Jan		Jan	(6,150.04)
	Pmt from Retiree Accts	Comerica	Feb		Feb	(6,150.04)
	Pmt from Retiree Accts	Comerica	Mar		Mar	(6,024.97)
Grand Total - 1Q '24						107,973.97

**Medicaid, Healthy Michigan, and General Fund
Revenue and Expenditure Trends
FY 2024**

<u>Fund Source</u>	<u>Original MSHN PEPM Rev Est. FY24</u>	<u>*Revised MSHN PEPM Rev Est. FY24</u>	<u>**FY24 Board Approved Expense Budget</u>	<u>FY24 Projected Expenses as of 3/31/2024</u>	<u>***FY23 Actual Expenses</u>	<u>***FY22 Actual Expenses</u>
Medicaid	45,281,628	49,392,127	45,843,116	49,187,789	47,148,496	44,738,032
HMP	4,394,941	4,111,649	6,219,684	6,452,480	6,361,799	5,033,474
Autism	5,238,691	5,994,979	9,675,186	10,562,538	9,744,027	7,812,056
	54,915,260	59,498,755	61,737,986	66,202,808	63,254,322	57,583,562
FY24 Projected Expenditures above PEPM				6,704,053		
FY24 Projected Expenditures above BABH approved budget				4,464,822		

NOTES:

- *Revised based on an MDHHS FY24 rate adjustment that is being paid monthly from April - September 2024
- **BABH Board of Directors and MSHN approved budget
- ***Excludes staffing crisis stabilization funding that was paid out (FY23 \$1.3M, FY22 \$1.5M)

<u>Fund Source</u>	<u>FY24 Allocation</u>	<u>FY24 Projected Expenses as of 3/31/2024</u>	<u>*FY24 Projected Deficit</u>
General Fund	1,626,054	2,214,436	(588,382)

NOTES:

As of 3/31/24, BABH is projecting to have excess local funding at the end of FY24 in the amount of \$760,000 to cover GF expenditures

IT Presentation to Finance Committee

May 8, 2024

Overview

Presenting all major IT spending needs to the board for approval in part or whole.

Items included:

- Device Replacement Plan
- Wi-Fi Replacement
- Phone system needs (not current fiscal year)
- Cell phone quote and recommendation (not current fiscal year)

Device Replacement Plan

The Device Replacement Plan presented here includes devices that are old enough that they should be replaced according to our replacement schedule so that employees can have efficient, reliable devices to work with. It also includes some requested changes to a different, more suitable device type in some cases. Lastly, it includes projections for replacements and changes anticipated in the next few years.

Equipment totals and pricing overview: (see spreadsheet for detail)

Type	Total Requested	Unit Cost	Total Cost
Desktop	16	\$1,200	\$19,200
iPad	21	\$450	\$9,450
Laptop	31	\$1,500	\$46,500
MS Surface	7	\$795	\$5,565
Scanner	1	\$1,000	\$1,000
		Total Cost	\$81,715
		Cost without swapping Chromebook early	\$76,495

Replacement Schedule and Unit Cost

Device Type	Replacement Schedule	Unit Cost
Desktop Computers	4 years	\$1,200
Standard Laptop Computers 15"	4 years	\$1,500
Chromebooks	4 years	\$365
MS Surface	4 years	\$795
iPads/Tablets	3 years	\$450
10ZiG Thin Clients	6 years	\$350
Desktop Printers	6 years	\$1,500
Computer Monitors	8 years	\$140
Docking Station	4 years	\$240

Historic Replacement Info summary (see spreadsheet for detail)

Summary of Historic Device Replacement Costs	
Year	Total Cost
2023	\$61,120.00*
2022	\$41,400.00
2021	\$20,225.00
2020	\$20,225.00
2019	\$46,700.00
2018	\$20,657.00
2017	\$29,865.00
2016	\$55,282.00
Average cost	\$36,934.25
Median cost	\$35,632.50

*While the budgeted amount for 2023 was \$61,120, only about \$19,155 was spent due to an organization wide cost control plan; this contributed to 2024's cost being higher than the average year, as we need to "play catch up" with what did not get replaced in 2023.

Wi-Fi Replacement

The access points and controller are end of life (EOL); they no longer receive security updates and are failing with more regular frequency. The devices being EOL make it increasingly more likely that we will not be able to source replacements when devices fail. A revised quote for \$29,040 has been received from NSO. We are able to get the cost down to this amount by doing much of the hands on work of swapping out the access points ourselves.

See attached quote

Wi-Fi EOL and Usage Information

EOL detail for Ruckus AP R500s:

Milestone Dates

Milestone	Date
End of Sale Pre-Announcement	October 31, 2018
End of Sale	April 30, 2019
Last Ship Date	October 31, 2019
End of Software Development	April 30, 2020
Last possible hardware repair/replacement under Advance Replacement Support*	April 30, 2024
End of Support (last possible Support contract active)	April 30, 2024

Last time Access Points (APs) were purchased/replaced:

- July 11, 2017 was the most recent quote for bulk AP purchase/replacement on file, with some quotes/presentations prepared going back to 2015. Most of the Wi-Fi infrastructure is at least 7 years old.

Number to be replaced at each location (30 in total)

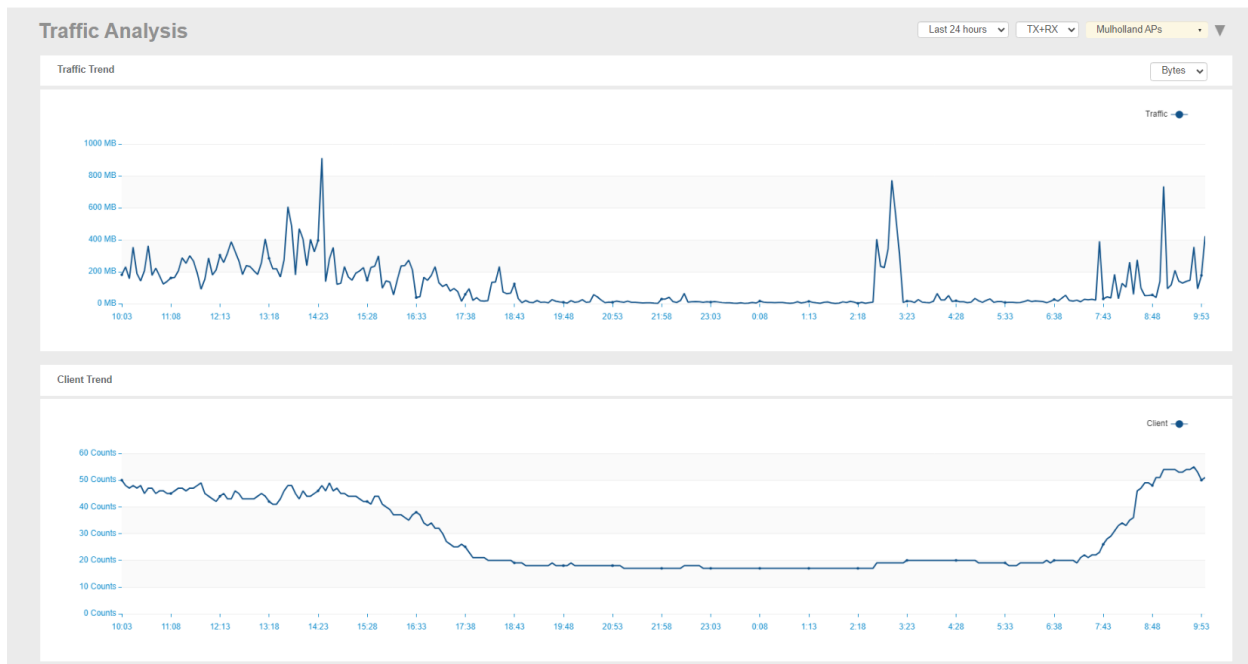
- Mulholland: 8
- Wirt: 2
- Madison: 7
- North Bay: 8
- Arenac Center: 5

Current Wi-Fi usage info

Last 24 hours is the max time the dashboard will report, pulled data the morning of May 8th, 2024

- Mulholland (8 APs)
 - Peak Traffic: 912 MB (Transmit/Received)
 - Peak Clients: 55
- Wirt (2APs)
 - Peak Traffic: 1433 MB
 - Peak Clients: 9
- Madison (7 APs)
 - Peak Traffic: 677 MB
 - Peak Clients: 38
- North Bay (8 APs)
 - Peak Traffic: 480 MB
 - Peak Clients: 32
- Arenac (5 APs)
 - Peak Traffic: 1536 MB
 - Peak Clients: 30

Mulholland



Peak Traffic: 912 MB (Transmit/Received)
Peak Clients: 55

Proposal

Wireless Quote

Quote #: NSOQ34311-03

Prepared for
Jesse Bellinger
Bay Arenac Behavioral Health
jbellinger@babha.org

Prepared by
Trevor Shetler
NetSource One, Inc.
989-498-4534
trevor.shetler@nsoit.com



STATEMENT OF WORK

Wireless Quote

SOW # NSOQ34311-03

SOW Issue Date: 1/29/2024	Services Provided By: NetSource One, Inc. 5454 Hampton Place Saginaw, MI 48604	Services Provided For: Bay Arenac Behavioral Health 909 Washington Ave. Bay City, MI 48708
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This SOW, effective as of the signatory date below, is entered into by and between NetSource One and Client and describes the requirements by the parties for the successful provisioning of the services.

PROJECT DESCRIPTION AND SCOPE

Project Overview

- Configure NetSource One Wireless cloud controller powered by Ruckus
- Configure Ruckus Access points (AP's) for the following locations: Mullholland, Madison, WIRT, North Bay, and Arenac
- Ruckus AP license are NSO owned per the MSP agreement

NSO Responsibilities

- Design Services
- Project Management
- Setup a new Ruckus One Wireless Cloud Controller
- Configure Firewalls with policies required for Cloud controller
- Configure Access point to manufacturer and NSO best practices
- Register Access point to controller
- Configure and install new Ruckus AP's to replace the existing Ruckus R500 AP's
- Remove DHCP options prior to AP at site being installed
- WIRT must be installed last due to ZoneDirector being located there
- Remove ZoneDirector at WIRT prior to WIRT AP installation
 - All other sites must be off of ZoneDirector
- New AP's will be installed 1:1 with existing AP's using existing VLANs, and SSID's
- Attend to the following items managed by NetSource One if needed:
 - Reconfigure any affected authentication services (Ex. RADIUS, LDAP, and DUO)
 - Adjust SIEM logging/monitoring (Ex. StratoZen and Blumira)
 - Update availability and performance monitoring (Ex. Zabbix, Automate, Auvik)
 - Update client agreements
- Remove ZoneDirector at WIRT
- Update NetSource One documentation of new device (configuration and support renewal status)
- Project close meeting

Client Responsibilities

- The client will consider the project complete based on Completion Criteria (as defined in the Project Plan)

- Active 3rd-party vendor support for any line of business software involved
- Installation of Access Points

Assumptions

- Services on-site only performed when necessary
- When possible, client will provide two separate battery and surge protected power feeds when equipment with dual power supplies is installed
- Installation to occur during business hours
- Allow for a period of downtime to occur during installation

Out-of-Scope

- Training on new systems (can be included at additional cost upon request)
- On site Labor
- Electrical/network cabling changes/moves
- Wireless Site Survey
- Assisting with Client Responsibilities

Wireless Quote

Thank you for considering NetSource One for your technology needs. The details of your quote are below:

NOTICE: Due to volume, inclement weather, and Covid-19 impacts some of our vendor/carrier partners are experiencing shipping delays. There may be extended delivery time frames from time of quoting to placing order(s), therefore we cannot guarantee exact shipping/delivery dates. We appreciate your understanding and thank you so much for your business!

Products

Description	Qty	Unit Price	Ext Price
<i>Ruckus R550 Dual Band AX Indoor Wireless Access Point - Bluetooth, ZigBee, Wi-Fi 6 - 2.4 GHz, 5 GHz - DC power / PoE (Optional)</i>	30	\$500.00	\$15,000.00
Ruckus One Professional Subscription Support (1 AP/Switch) - 3 Years	30	\$290.00	\$8,700.00
SubTotal			\$8,700.00

Professional Services (Fixed Fee)

Description	Qty	Unit Price	Ext Price
Professional Services (Fixed Fee) - Labor is quoted as a fixed-fee per statement of work - Any item not outlined in the statement of work is not included and therefore may be subject to additional pricing at our standard T&M rates on a separate ticket			
SubTotal			\$5,170.00

Monthly Services

Description	Qty	Unit Price	Ext Price
Premium Managed Wireless Access Points: - 24x7 availability and performance monitoring and alerting - Quarterly firmware reviews and updates (if required) - Remote administration & break-fix during normal business hours	30	\$4.00	\$120.00
Wireless Controller Management - 24x7 Monitoring and alerting - Remote administration & break-fix (during normal business hours)	1	\$50.00	\$50.00
Monthly SubTotal			\$170.00

Quote No: **NSOQ34311-**
 Delivery Date: 1/29/2024
 Expiration Date: 2/26/2024

Wireless Quote

Prepared For:
Bay Arenac Behavioral Health
 909 Washington Ave.
 Suite #8
 Bay City, MI 48708
 Jesse Bellinger
 (989) 497-1311
 jbellinger@babha.org

Shipping to:
Brenda Boughner
 5454 Hampton Place
 Saginaw, MI 48604-9282
 United States

Prepared By:
NetSource One, Inc.
 5454 Hampton Pl
 Saginaw, MI 48604
 Trever Shetler
 989-498-4534
 trever.shetler@nsoit.com

Summary

Description	Amount
Products	\$8,700.00
Professional Services (Fixed Fee)	\$5,170.00
Monthly Services	\$170.00
Subtotal:	\$14,040.00
Tax:	\$0.00
Shipping:	\$0.00
Grand Total:	\$14,040.00

Recurring Amounts:
\$170.00 Billed Monthly

Acceptance

I hereby agree to abide by the terms set forth in the Master Services Agreement and related Addendum(s) at the following link:
<http://www.nsoit.com/legal>.

NetSource One, Inc.

Bay Arenac Behavioral Health

Signature: _____
 Name: Trever Shetler
 Date: 1/29/2024

Signature: _____
 Name: Jesse Bellinger
 Date: _____

Quote Notes

**** A 50% down payment on product will be required at time of quote approval, prior to ordering ****

Any services (if applicable) to be completed during normal business hours (unless otherwise indicated). Out of scope labor, travel & mileage will be billed at time & materials.

If applicable, any leasing information provided is subject to credit approval. The proposal provides an approximate monthly payment for hardware, software and services based upon the contract type and term in months. Any change in the amount financed will change this information. Pricing valid 30 days from day quote is initiated, unless otherwise stated in quote. Taxes, shipping, handling and other fees may apply. Please do not pay from this quote, you will receive an invoice with the detailed charges. We reserve the right to cancel orders arising from pricing or other errors. Risk of loss and transfer of ownership is assigned to the purchaser at time of shipment from Manufacturer or Distributor.