



BOARD OF DIRECTORS REGULAR MEETING

Thursday, October 15, 2026 at 5:00 pm
Room 225, Behavioral Health Center, 201 Mulholland Street, Bay City, MI 48708

AGENDA

Page

1. CALL TO ORDER & ROLL CALL
2. PUBLIC INPUT (5 Minute Maximum Per Person)
3. COMMUNICATIONS
 - 6-7 3.1 Thank you letters for BABH's participation in the Center for Behavioral Health and Justice's Assisted Outpatient Treatment Foundation Strengthening Initiative from Judge Milton Mack, dated September 9, 2026 – *See pages 6-7*
 - 8 3.2 Memorandum from Board Chair, Robert Pawlak, regarding a harassment-free workplace, dated September 29, 2026 – *See page 8*
 - 9 3.3 Draft thank you letter to Gratiot Integrated Health Network for the 236 Transfer, dated October 14, 2026 – *See page 9*
4. REGULAR BOARD MEETING, 09/17/2026 – Distributed – Pawlak, Ch/ McFarland, V Ch
 - 4.1 Consideration of a motion to approve the minutes as distributed
5. SPECIAL FACILITIES & SAFETY COMMITTEE, 09/23/2026 – Distributed – Conley, Ch/ Banaszak, V Ch
There were no motions forwarded to the full board
 - 5.1 Consideration of a motion to approve the minutes as distributed
6. SPECIAL BOARD MEETING & PUBLIC HEARING, 09/28/2026 – Distributed – Pawlak, Ch/ McFarland, V Ch
 - 6.1 Consideration of a motion to approve the minutes as distributed
7. PERSONNEL & COMPENSATION COMMITTEE, 10/01/2026 – Conley, Ch/ O'Brien, V Ch
 - 4, 10-29 7.1 Res# 2610001: Approve the proposed BABH 2027 Health Insurance and Benefits renewal – *See page 4 resolution sheet & pages 10-29*
 - 30 7.2 Res# 2610002: Approve the resolution to opt out of Public Act (PA) 152 – *See separate resolution page 30*
 - 7.3 Consideration of a motion to approve the minutes as distributed
8. RECIPIENT RIGHTS ADVISORY & APPEALS COMMITTEE, 10/05/2026 – McFarland, Ch/ Mrozinski, V Ch
There were no motions forwarded to the full board
 - 8.1 Consideration of a motion to approve the minutes as distributed



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9. FINANCE COMMITTEE, 10/07/2026 – Distributed – Banaszak, Ch/ Mrozinski, V Ch
 - 31-32 9.1 Motion to accept investment earnings balances for period ending September 30, 2026 – *See pages 31-32*
 - 4, 33 9.2 Res# 2610003: Approve the Finance October 2026 contract list – *See page 4 resolution sheet & page 33*
 - 9.3 Consideration of a motion to approve the minutes as distributed
10. PROGRAM COMMITTEE, 10/08/2026 – Distributed – Girard, Ch/ Schumacher, V Ch
 - 4 10.1 Res# 2610004: Approve the fiscal year (FY) 2027 Quality Assessment and Performance Improvement Plan (QAPIP) – *See page 4 resolution sheet & plan attached to back of packet*
 - 4, 34-35 10.2 Res# 2610005: Approve the policy, Gender Affirming Care, Chapter 4, to end 30-day review – *See page 4 resolution sheet & pages 34-35*
 - 10.3 Consideration of a motion to approve the minutes as distributed
11. SPECIAL BOARD MEETING, 10/12/2026 – Distributed – Pawlak, Ch/ McFarland, V Ch
 - 11.1 Consideration of a motion to approve the minutes as distributed
12. AUDIT COMMITTEE, 10/12/2026 – Distributed – McFarland, Ch/ Banaszak, V Ch
 - 5, 36-43 12.1 Res# 2610006: Accept the financial statements – *See page 5 resolution sheet & pages 36-43*
 - 5, 44-47 12.2 Res# 2610007: Accept electronic fund transfers – *See page 5 resolution sheet & pages 44-47*
 - 5, 48 12.3 Res# 2610008: Approve the disbursements and health care claims payments – *See page 5 resolution sheet & page 48*
 - 12.4 Consideration of a motion to approve the minutes as distributed
13. REPORT FROM ADMINISTRATION
 - 49-67 13.1 Common Interest Agreement – *See pages 49-67*
14. UNFINISHED BUSINESS
 - 14.1 None



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15. NEW BUSINESS

15.1 Upcoming Conferences

a) Community Mental Health Association Fall Conference at Grand Traverse Resort is Monday, October 26 & Tuesday, October 27, 2026.

68 15.2 BABH offices are closed on Wednesday, November 11, 2026 in observance of Veteran's Day – See page 68

15.3 The regular scheduled November 11, 2026 Finance Committee meeting is canceled.

16. BOARD MEMBER COMMENTS

17. ADJOURNMENT



BOARD OF DIRECTORS
REGULAR MEETING

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RESOLUTIONS

Special Personnel & Compensation Committee, October 1, 2026

Res#2610001: Resolved by Bay Arenac Behavioral Health Authority to approve the proposed BABH 2027 Health Insurance and Benefits renewal as follows:

- Vision Insurance:
Eye Med – No change
- Dental Insurance:
Blue Cross Blue Shield Dental – No change
- Life & Disability Insurance:
Blue Cross Blue Shield Dearborn – No change
- Medical & Prescription Insurance for Active Staff & Early Retirees:
Blue Cross Blue Shield – Rate increases based on plan design chosen by individual
- Flexible Spending Account (FSA), Limited Purpose FSA, Health Savings Account (HSA):
Flex Administrator – Increase contribution limits to the IRS allowable maximums for FSA plans
- Employee Assistance Program (EAP):
Ulliance – No change

Res#2610002: See separate resolution on page 30.

Finance Committee, October 7, 2026

Res# 2610003: Resolved by Bay Arenac Behavioral Health Authority to approve the Finance October 2026 contract list.

Program Committee, October 8, 2026

Res# 2610004: Resolved by Bay Arenac Behavioral Health Authority to approve the fiscal year (FY) 2027 Quality Assessment Performance Improvement Plan (QAPIP).

Res# 2610005: Resolved by Bay Arenac Behavioral Health Authority to approve the policy, Gender Affirming Care, Chapter 4, to end 30-day review.



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RESOLUTIONS

Page 2 of 2

Audit Committee, October 12, 2026

- Res# 2610006: Resolved by Bay Arenac Behavioral Health Authority to approve the Financial Statements for the period ending September 30, 2026.
- Res# 2610007: Resolved by Bay Arenac Behavioral Health Authority to approve the electronic fund transfer (EFTs) for the period ending September 30, 2026.
- Res# 2610008: Resolved by Bay Arenac Behavioral Health Authority to approve the disbursements and health care payments from September 14, 2026 through October 9, 2026.



September 9, 2026

Dear Judge Miner,

I want to sincerely thank you for your support of Bay Arenac Behavioral Health's participation in the Center for Behavioral Health and Justice's Assisted Outpatient Treatment Foundation Strengthening Initiative (AOT FSI) funded by Michigan's Mental Health Diversion Council. Having served on the bench myself, I know the demands on a probate judge's time and attention, and I do not take your engagement in this work for granted.

Your willingness to open your courtroom to the project team to observe hearings, to meet alongside your community mental health partners, and to participate in convenings and training around AOT has strengthened this initiative in ways that data alone cannot capture. Perhaps most importantly, you have supported your community in honestly examining what is working, what is not, and what can be done better, a task that requires both humility and leadership.

The role of the court in AOT extends far beyond the granting of orders. When a judge is engaged, people come to the table who otherwise would not. Systems that rarely speak to one another begin to coordinate. Implementation challenges that might languish for years get named and addressed. Your leadership lends legitimacy and momentum to this work, and it signals to your community that the individuals AOT is designed to serve, often among the most vulnerable residents of your county, are worthy of the system's best effort.

Judicial leadership of this kind is not required of you, but it makes an enormous difference. The progress made in Bay County reflects your commitment to a court that not only administers the law but also helps the community around it succeed.

On behalf of those working to strengthen AOT across Michigan, and on behalf of the individuals and families who benefit from a well-functioning system, thank you.

With respect and gratitude,

Judge Milton Mack

Michigan State Court Administrator Emeritus



September 9, 2026

Dear Judge Vollbach,

I want to sincerely thank you for your support of Bay Arenac Behavioral Health's participation in the Center for Behavioral Health and Justice's Assisted Outpatient Treatment Foundation Strengthening Initiative (AOT FSI) funded by Michigan's Mental Health Diversion Council. Having served on the bench myself, I know the demands on a probate judge's time and attention, and I do not take your engagement in this work for granted.

Your willingness to open your courtroom to the project team to observe hearings, to meet alongside your community mental health partners, and to participate in convenings and training around AOT has strengthened this initiative in ways that data alone cannot capture. Perhaps most importantly, you have supported your community in honestly examining what is working, what is not, and what can be done better, a task that requires both humility and leadership.

The role of the court in AOT extends far beyond the granting of orders. When a judge is engaged, people come to the table who otherwise would not. Systems that rarely speak to one another begin to coordinate. Implementation challenges that might languish for years get named and addressed. Your leadership lends legitimacy and momentum to this work, and it signals to your community that the individuals AOT is designed to serve, often among the most vulnerable residents of your county, are worthy of the system's best effort.

Judicial leadership of this kind is not required of you, but it makes an enormous difference. The progress made in Arenac County reflects your commitment to a court that not only administers the law but also helps the community around it succeed.

On behalf of those working to strengthen AOT across Michigan, and on behalf of the individuals and families who benefit from a well-functioning system, thank you.

With respect and gratitude,

Judge Milton Mack

Michigan State Court Administrator Emeritus



BEHAVIORAL HEALTH

September 29, 2026

Chief Executive Officer
Christopher Pinter

To: BABH Board of Directors

Board of Directors
Robert Pawlak, Chair
Patrick McFarland, Vice Chair
Sally Mrozinski, Treasurer
Pamela Schumacher, Secretary
Tim Banaszak
Richard Byrne
Patrick Conley
Christopher Girard
Shelly King
Kathy Niemiec
Carole O'Brien
Staci Tuggle

From: Robert Pawlak, Chairman

The purpose of this correspondence is to provide a reminder that Bay-Arenac Behavioral Health (BABH) is required to maintain a harassment-free workplace for all consumers, employees and visitors. This includes comments that may exhibit hostility or disrespect toward others on the basis of race, religion, national origin, color, sex, sexual orientation, gender and/or gender identity, age, weight, height, marital status and/or disability.

This requirement includes comments that may occur prior to, during, or immediately after public meetings held at agency office locations, while representing yourself as a BABH Board Member in public, or when interacting with BABH employees performing their official duties. Any comments that violate our policy, regardless of the intent, may be construed as creating a hostile work environment and unnecessarily increasing the liability for both BABH as an employer and the individual board member as a public official.

Please be sensitive to these obligations and refrain from any such comments or statements in order to ensure a healthy work environment for all consumers, employees and visitors of BABH.

A handwritten signature in black ink, appearing to read "Robert Pawlak", is written over a horizontal line.

Board Administration
Behavioral Health Center
201 Mulholland
Bay City, MI 48708
800-448-5498 Access Center
989-895-2300 Business

Arenac Center
PO Box 1188
1000 W. Cedar
Standish, MI 48658

North Bay
1961 E. Parish Road
Kawkawlin, MI 48631

William B. Cammin Clinic
1010 N. Madison
Bay City, MI 48708

Chief Executive Officer
Christopher Pinter

Board of Directors
Robert Pawlak, Chair
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Bay City, MI 48708

October 15, 2026

Dr. Irene O'Boyle, Chairperson
Gratiot Integrated Health Network
608 Wright Avenue
Alma, MI 48801

Dear Dr. O'Boyle:

The purpose of this correspondence is to extend the appreciation of the Bay-Arenac Behavioral Health Authority (BABHA) Board of Directors for the actions taken by Gratiot Integrated Health Network (GIHN) to transfer state general funds to BABHA for use in fiscal year 2026.

BABHA and GIHN have had a strong relationship since the formation of the Mid-State Health Network (MSHN) in 2014. This has included consistent leadership related to the quality and number of persons served per capita in this 21 county region. Much of the GIHN success in these areas are directly related to your dedicated staff and CEO, Michelle Stillwagon.

On behalf of the consumers, families, providers, staff, and board members of BABHA, thank you again for your support and commitment to community mental health services.

Sincerely,

Robert Pawlak
Chairperson

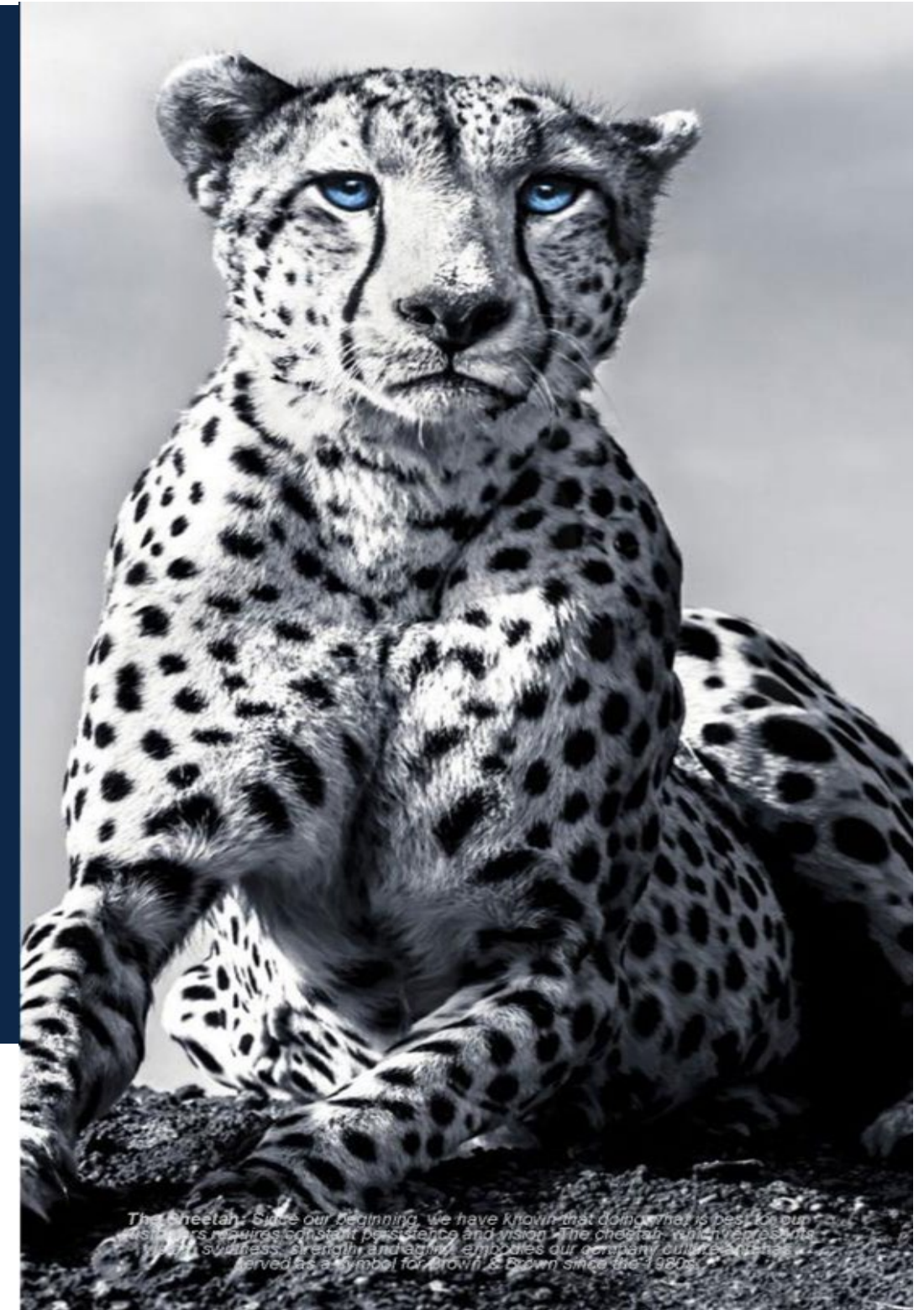
Bay Arenac Behavioral Health

2027 Renewal Presentation

Presented By:

Tara Guerrero

Brown & Brown Insurance Services, Inc
1605 Concentric Blvd Suite 2
Saginaw MI 48604



The cheetah. Since our beginning, we have known that doing what is best for our clients requires constant persistence and vision. The cheetah, which represents swiftness, strength and agility, embodies our company culture and has served as a symbol for Brown & Brown since the 1980s.

Bay Arenac Behavioral Health

Presented by Tara Guerrero

Renewal Date: 1/1/2027



Market Summary

Product Line	Carrier	Renewal Date	Renewal Status	Results
Group Medical				
	Blue Cross Blue Shield of Michigan	1/1/2027		Current / Quoting
	Priority Health	1/1/2027		Quoted
Group MAPD				
	Blue Cross Blue Shield of Michigan	1/1/2027	-28.74%	Current / Quoting
	Humana Insurance Company, Inc.	1/1/2027	-9.42%	Quoted
	Priority Health	1/1/2027	-4.62%	Quoted
Group Dental, Vision				
	Blue Cross Blue Shield of Michigan	1/1/2028	0.00%	Current Dental
	EyeMed	1/1/2029	0.00%	Current Vision
Life / AD&D / DI - All				
	Dearborn / Symetra	1/1/2028	0.00%	Current
EAP				
	Ulliance	1/1/2027		Current

Medical Renewal BCBSM - OPTION

Bay Arenac Behavioral Health

1/1/2026 Renewal History	Plan 1	Plan 2	Plan 3	Plan 4
Original Increase :	30.42%	32.75%	41.65%	30.96%
Plan Changes :				
Final Increase :				

	Current (Plan Year)							
	Blue Cross Blue Shield SB PPO \$2,500 20%		Blue Cross Blue Shield SB HSA \$2,500 20%		Blue Care Network HMO \$2,000 20%		Blue Cross Blue Shield SB PPO \$1,500 20%	
Renewal Date: January 1, 2027								
	<u>Enrollment</u> ¹	<u>Rates</u>	<u>Enrollment</u> ¹	<u>Rates</u>	<u>Enrollment</u> ¹	<u>Rates</u>	<u>Enrollment</u> ¹	<u>Rates</u>
Single	75	\$775.90	3	\$699.58	4	\$464.90	17	\$826.43
Two Person	33	\$1,862.17	4	\$1,679.00	3	\$1,115.77	4	\$1,983.45
Family	46	\$2,327.71	5	\$2,098.78	4	\$1,394.70	0	\$2,479.31
	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
Premium	\$226,718.77	\$2,720,625.24	\$19,308.64	\$231,703.68	\$10,785.71	\$129,428.52	\$21,983.11	\$263,797.32
Combined Premium	Monthly \$278,796.23				Annual \$3,345,554.76			

	Renewal (Plan Year)							
	Blue Care Network POS \$2,500 20%		Blue Cross Blue Shield SB HSA \$2,500 20%		Blue Care Network HMO \$2,000 20%		Blue Cross Blue Shield SB PPO \$1,500 20%	
	<u>Enrollment</u> ¹	<u>Rates</u>	<u>Enrollment</u> ¹	<u>Rates</u>	<u>Enrollment</u> ¹	<u>Rates</u>	<u>Enrollment</u> ¹	<u>Rates</u>
Single	75	\$666.88	3	\$922.53	4	\$658.55	17	\$1,082.33
Two Person	33	\$1,600.53	4	\$2,214.08	3	\$1,580.51	4	\$2,597.59
Family	46	\$2,000.66	5	\$2,767.59	4	\$1,975.63	0	\$3,246.98
Premium	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
	\$194,863.85	\$2,338,366.20	\$25,461.86	\$305,542.32	\$15,278.25	\$183,339.00	\$28,789.97	\$345,479.64
Dollar Change	-\$31,854.92	-\$382,259.04	\$6,153.22	\$73,838.64	\$4,492.54	\$53,910.48	\$6,806.86	\$81,682.32
Percent Change	-14.1%		31.9%		41.7%		31.0%	
Combined Premium	Monthly				Annual			
	\$264,393.93				\$3,172,727.16			
	-\$14,402.30				-\$172,827.60			
Percent Change	-5.17%							

¹ Enrollment taken from June BCBS Membership Listing and includes COBRA if applicable.
Total Enrolled Contracts: 198

Medical Renewal BCBSM

Bay Arenac Behavioral Health

1/1/2026 Renewal History	Plan 1	Plan 2	Plan 3	Plan 4
Original Increase :	30.42%	32.75%	41.65%	30.96%
Plan Changes :				
Final Increase :				

Renewal Date: January 1, 2027	Current (Plan Year)							
	Blue Cross Blue Shield SB PPO \$2,500 20%		Blue Cross Blue Shield SB HSA \$2,500 20%		Blue Care Network HMO \$2,000 20%		Blue Cross Blue Shield SB PPO \$1,500 20%	
	Enrollment ¹	Rates	Enrollment ¹	Rates	Enrollment ¹	Rates	Enrollment ¹	Rates
Single	75	\$775.90	3	\$699.58	4	\$464.90	17	\$826.43
Two Person	33	\$1,862.17	4	\$1,679.00	3	\$1,115.77	4	\$1,983.45
Family	46	\$2,327.71	5	\$2,098.78	4	\$1,394.70	0	\$2,479.31
Premium	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
	\$226,718.77	\$2,720,625.24	\$19,308.64	\$231,703.68	\$10,785.71	\$129,428.52	\$21,983.11	\$263,797.32
Combined Premium	Monthly \$278,796.23				Annual \$3,345,554.76			

	Renewal (Plan Year)							
	Blue Cross Blue Shield SB PPO \$2,500 20%		Blue Cross Blue Shield SB HSA \$2,500 20%		Blue Care Network HMO \$2,000 20%		Blue Cross Blue Shield SB PPO \$1,500 20%	
	<u>Enrollment</u> ¹	<u>Rates</u>	<u>Enrollment</u> ¹	<u>Rates</u>	<u>Enrollment</u> ¹	<u>Rates</u>	<u>Enrollment</u> ¹	<u>Rates</u>
Single	75	\$1,011.90	3	\$928.70	4	\$658.55	17	\$1,082.33
Two Person	33	\$2,428.56	4	\$2,228.87	3	\$1,580.51	4	\$2,597.59
Family	46	\$3,035.69	5	\$2,786.09	4	\$1,975.63	0	\$3,246.98
Premium	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
Dollar Change	\$295,676.72	\$3,548,120.64	\$25,632.03	\$307,584.36	\$15,278.25	\$183,339.00	\$28,789.97	\$345,479.64
Percent Change	\$68,957.95	\$827,495.40	\$6,323.39	\$75,880.68	\$4,492.54	\$53,910.48	\$6,806.86	\$81,682.32
	30.4%		32.7%		41.7%		31.0%	
Combined Premium	Monthly				Annual			
	\$365,376.97				\$4,384,523.64			
	\$86,580.74				\$1,038,968.88			
Percent Change	31.06%							

¹ Enrollment taken from June BCBS Membership Listing and includes COBRA if applicable.
 Total Enrolled Contracts: 198

Simply Blue \$2,500 20%

Active

Bay Arenac Behavioral Health

Quote# A1WIX8

Quote# 199252

Renewal Date: January 1, 2027

	Current (Plan Year) Simply Blue PPO \$2,500	Renewal (Plan Year) Simply Blue PPO \$2,500	SB PPO Option Simply Blue PPO \$2,500	BCN BEP POS Option BEP POS \$2,500 20%
Individual Deductible	\$2,500	\$2,500	\$2,500	\$2,500
Family Deductible	\$5,000	\$5,000	\$5,000	\$5,000
Coinsurance	20%	20%	20%	20%
Individual Maximum	\$2,500	\$2,500	\$2,500	\$2,500
Family Maximum	\$5,000	\$5,000	\$5,000	\$5,000
Deductible + Coinsurance Total				
Individual	\$5,000	\$5,000	\$5,000	\$5,000
Family	\$10,000	\$10,000	\$10,000	\$10,000
Total Out of Pocket	Ded., Coins. & Copays	Ded., Coins. & Copays	Ded., Coins. & Copays	Ded., Coins. & Copays
Individual Maximum	\$8,150	\$8,150	\$8,150	\$8,150
Family Maximum	\$16,300	\$16,300	\$16,300	\$16,300
PCP / Spec. Copays	\$30 / \$30	\$30 / \$30	\$30 / \$30	\$30 / \$50
Virtual Visit	\$30	\$30	\$30	\$30
Urgent Care	\$30	\$30	\$30	\$50
Emergency Room	\$150, waived if admitted	\$150, waived if admitted	\$150, waived if admitted	\$250, waived if admitted
Chiro. Copays	\$30	\$30	\$30	\$50
# of Chiro Visits (per year)	24 Visits	24 Visits	24 Visits	30 Visits
Rx Formulary	Preferred Drug	Preferred Drug	Custom Select	Custom Select
Non-Specialty Rx ⁽¹⁾	\$20 / \$60 / 50%(min \$80, max \$100)	\$20 / \$60 / 50%(min \$80, max \$100)	\$20 / \$60 / 50%(min \$80, max \$100)	\$10 / \$30 / \$60 / \$80
Specialty Rx ⁽²⁾	\$20 / \$60 / 50%(min \$80, max \$100)	\$20 / \$60 / 50%(min \$80, max \$100)	\$20 / \$60 / 50%(min \$80, max \$100)	20% (\$200 - \$300)
90 Day Supply / Mail Order ⁽³⁾	2x copay	2x copay	3x copay - \$10	3x copay - \$10
Total Enrolled: 154	Rates	Rates	Rates	Rates
Retiree(Div#) Retiree(Div#) Active(Div#) Active(Div#)				
0 0 0 75 75 Single	\$775.90	\$1,011.90	\$997.64	\$666.88
0 0 0 33 33 Two Person	\$1,862.17	\$2,428.56	\$2,394.33	\$1,600.53
0 0 0 46 46 Family	\$2,327.71	\$3,035.69	\$2,992.90	\$2,000.66
Monthly Premium Total	\$226,718.77	\$295,676.72	\$291,509.29	\$194,863.85
Annual Premium Total	\$2,720,625.24	\$3,548,120.64	\$3,498,111.48	\$2,338,366.20
Annual Dollar Change from Current		\$827,495.40	\$777,486.24	-\$382,259.04
Percent Change from Current		30.42%	28.58%	-14.05%

⁽¹⁾ Preferred generic / non-preferred generic / preferred brand / non-preferred brand

⁽²⁾ Preferred specialty / non-preferred specialty ⁽³⁾ Specialty medications are not available for a 90 day supply.

The above information is intended as a benefit summary only. It does not include all of the benefit provisions, limitations and qualifications. If this information conflicts

Simply Blue HSA \$2,500 20%

Active Div 0008

Bay Arenac Behavioral Health						Quote: A1WIZ2		
Renewal Date: January 1, 2027						Current (Plan Year)	Renewal (Plan Year)	SB PPO HSA Option
						Simply Blue PPO HSA \$2,500 20%	Simply Blue PPO HSA \$2,500 20%	Simply Blue PPO HSA \$2,5000 20%
Individual Deductible						\$2,500	\$2,500	\$2,500
Family Deductible						\$5,000	\$5,000	\$5,000
Coinsurance						20%	20%	20%
Individual Maximum						N/A	N/A	N/A
Family Maximum						N/A	N/A	N/A
Deductible + Coinsurance Total								
Individual						\$2,500	\$2,500	\$2,500
Family						\$5,000	\$5,000	\$5,000
Total Out of Pocket						Ded., Coins. & Copays	Ded., Coins. & Copays	Ded., Coins. & Copays
Individual Maximum						\$4,000	\$4,000	\$4,000
Family Maximum						\$8,000	\$8,000	\$8,000
PCP / Spec. Copays						\$20% after ded. / \$20% after ded.	\$20% after ded. / \$20% after ded.	\$20% after ded. / \$20% after ded.
Virtual Visit						20% after ded.	20% after ded.	20% after ded.
Urgent Care						20% after ded.	20% after ded.	20% after ded.
Emergency Room						20% after ded.	20% after ded.	20% after ded.
Chiro. Copays						20% after ded.	20% after ded.	20% after ded.
# of Chiro Visits (per year)						24 Visits	24 Visits	24 Visits
Rx Formulary						Preferred Drug	Preferred Drug	Custom Select
Non-Specialty Rx ⁽¹⁾						\$20 / \$60 / 50%(min \$80, max \$100)	\$20 / \$60 / 50%(min \$80, max \$100)	\$20 / \$60 / 50%(min \$80, max \$100)
Specialty Rx ⁽²⁾						\$20 / \$60 / 50%(min \$80, max \$100)	\$20 / \$60 / 50%(min \$80, max \$100)	\$20 / \$60 / 50%(min \$80, max \$100)
90 Day Supply / Mail Order ⁽³⁾						2x copay	2x copay	3x copay - \$10
Total Enrolled: 12						Rates	Rates	Rates
Retiree(Div#)	Retiree(Div#)	Active(Div#)	Active(Div#)					
0	0	0	3	3	Single	\$699.58	\$928.70	\$922.53
0	0	0	4	4	Two Person	\$1,679.00	\$2,228.87	\$2,214.08
0	0	0	5	5	Family	\$2,098.78	\$2,786.09	\$2,767.59
Monthly Premium Total						\$19,308.64	\$25,632.03	\$25,461.86
Annual Premium Total						\$231,703.68	\$307,584.36	\$305,542.32
Annual Dollar Change from Current							\$75,880.68	\$73,838.64
Percent Change from Current							32.75%	31.87%

⁽¹⁾ Preferred generic / non-preferred generic / preferred brand / non-preferred brand

⁽²⁾ Preferred specialty / non-preferred specialty ⁽³⁾ Specialty medications are not available for a 90 day supply.

The above information is intended as a benefit summary only. It does not include all of the benefit provisions, limitations and qual

Bay Arenac Behavioral Health

Renewal Date: January 1, 2027

						Current (Plan Year)	Renewal (Plan Year)
						BCN HMO \$2000 - 20% - \$2500 ECM	BCN HMO \$2000 - 20% - \$2500 ECM
Individual Deductible						\$2,000	\$2,000
Family Deductible						\$4,000	\$4,000
Coinsurance						20%	20%
Individual Maximum						\$2,500	\$2,500
Family Maximum						\$5,000	\$5,000
Deductible + Coinsurance Total							
Individual						\$4,500	\$4,500
Family						\$9,000	\$9,000
Total Out of Pocket						Ded., Coins. & Copays	Ded., Coins. & Copays
Individual Maximum						\$8,150	\$8,150
Family Maximum						\$16,300	\$16,300
PCP / Spec. Copays						\$30 / \$50	\$30 / \$50
Virtual Visit						\$30	\$30
Urgent Care						\$60	\$60
Emergency Room						\$250 after ded., waived if admitted	\$250 after ded., waived if admitted
Chiro. Copays						\$50	\$50
# of Chiro Visits (per year)						30 Visits	30 Visits
Rx Formulary						Custom Select	Custom Select
Non-Specialty Rx ⁽¹⁾						\$10 / \$30 / \$60 / \$80	\$10 / \$30 / \$60 / \$80
Specialty Rx ⁽²⁾						20%(max \$200) / 20%(max \$300)	20%(max \$200) / 20%(max \$300)
90 Day Supply / Mail Order ⁽³⁾						3x copay, less \$10	3x copay, less \$10
Total Enrolled: 11						Rates	Rates
Retiree(Div#)	Retiree(Div#)	Active(Div#)	Active(Div#)				
0	0	0	4	4	Single	\$464.90	\$658.55
0	0	0	3	3	Two Person	\$1,115.77	\$1,580.51
0	0	0	4	4	Family	\$1,394.70	\$1,975.63
Monthly Premium Total						\$10,785.71	\$15,278.25
Annual Premium Total						\$129,428.52	\$183,339.00
Annual Dollar Change from Current							\$53,910.48
Percent Change from Current							41.65%

⁽¹⁾ Preferred generic / non-preferred generic / preferred brand / non-preferred brand

⁽²⁾ Preferred specialty / non-preferred specialty ⁽³⁾ Specialty medications are not available for a 90 day supply.

The above information is intended as a benefit summary only. It does not include all of the benefit provisions, limitations and qual

Simply Blue \$1,500 20%

Retiree Div 0010

Bay Arenac Behavioral Health

Renewal Date: January 1, 2027						Current (Plan Year) Simply Blue PPO \$1,500 / 20%	Renewal (Plan Year) Simply Blue PPO \$1,500 / 20%
Individual Deductible						\$1,500	\$1,500
Family Deductible						\$3,000	\$3,000
Coinsurance						20%	20%
Individual Maximum						\$2,500	\$2,500
Family Maximum						\$5,000	\$5,000
Deductible + Coinsurance Total							
Individual						\$4,000	\$4,000
Family						\$8,000	\$8,000
Total Out of Pocket						Ded., Coins. & Copays	Ded., Coins. & Copays
Individual Maximum						\$8,150	\$8,150
Family Maximum						\$16,300	\$16,300
PCP / Spec. Copays						\$30 / \$30	\$30 / \$30
Virtual Visit						\$0	\$0
Urgent Care						\$30	\$30
Emergency Room						\$150, waived if admitted	\$150, waived if admitted
Chiro. Copays						\$30	\$30
# of Chiro Visits (per year)						24 Visits	24 Visits
Rx Formulary						Custom Select	Custom Select
Non-Specialty Rx ⁽¹⁾						\$15 / \$50 / 50%(min \$70, max \$100)	\$15 / \$50 / 50%(min \$70, max \$100)
Specialty Rx ⁽²⁾						\$15 / \$50 / 50%(min \$70, max \$100)	\$15 / \$50 / 50%(min \$70, max \$100)
90 Day Supply / Mail Order ⁽³⁾						3x copay, less \$10	3x copay, less \$10
Total Enrolled: 21						Rates	Rates
Retiree(Div#)	Retiree(Div#)	Active(Div#)	Active(Div#)				
0	17	0	0	17	Single	\$826.43	\$1,082.33
0	4	0	0	4	Two Person	\$1,983.45	\$2,597.59
0	0	0	0	0	Family	\$2,479.31	\$3,246.98
Monthly Premium Total						\$21,983.11	\$28,789.97
Annual Premium Total						\$263,797.32	\$345,479.64
Annual Dollar Change							\$81,682.32
Percent Change							30.96%

⁽¹⁾ Preferred generic / non-preferred generic / preferred brand / non-preferred brand

⁽²⁾ Preferred specialty / non-preferred specialty ⁽³⁾ Specialty medications are not available for a 90 day supply.

The above information is intended as a benefit summary only. It does not include all of the benefit provisions, limitations and qual

Med, Dental, Vision, Life/AD&D and Disability

Bay Arenac Behavioral Health

1/1/2027

MEDICAL ACTIVE	CURRENT	RENEWAL
Total Monthly Premium	\$256,813.12	\$336,587.00
Total Annualized Cost	\$3,081,757.44	\$4,039,044.00
Annualized Dollar Change From Current		\$957,286.56
Annualized Percent Change From Current		31.06%
Total Active Enrolled	177	177
MEDICAL RETIREE	CURRENT	RENEWAL
Total Monthly Premium	\$21,983.11	\$28,789.97
Total Annualized Cost	\$263,797.32	\$345,479.64
Annualized Dollar Change From Current		\$81,682.32
Annualized Percent Change From Current		30.96%
Total Retiree Enrolled	21	21
DENTAL	CURRENT	RENEWAL
Total Monthly Premium	\$12,367.54	\$12,367.54
Total Annualized Cost	\$148,410.48	\$148,410.48
Annualized Dollar Change From Current		\$0.00
Annualized Percent Change From Current		0.00%
Total Enrolled	264	264
VISION	CURRENT	RENEWAL
Total Monthly Premium	\$2,059.30	\$2,059.30
Total Annualized Cost	\$24,711.60	\$24,711.60
Annualized Dollar Change From Current		\$0.00
Annualized Percent Change From Current		0.00%
Total Enrolled	266	266
LIFE/AD&D	CURRENT	RENEWAL
Total Monthly Premium	\$824.04	\$824.04
Total Annualized Cost	\$9,888.48	\$9,888.48
Annualized Dollar Change From Current		\$0.00
Annualized Percent Change From Current		0.00%
STD	CURRENT	RENEWAL
Total Monthly Premium	\$6,587.45	\$6,587.45
Total Annualized Cost	\$79,049.42	\$79,049.42
Annualized Dollar Change From Current		\$0.00
Annualized Percent Change From Current		0.00%
TOTAL	CURRENT	RENEWAL
Total Monthly Premium	\$304,413.05	\$390,993.79
Total Annualized Cost	\$3,652,956.60	\$4,691,925.48
Annualized Dollar Change From Current		\$1,038,968.88
Annualized Percent Change From Current		28.44%

Volume and Counts are for illustrative purposes only. This proposal is a brief summary of benefits and is not intended to be a complete outline of policy provisions.

Rates are subject to final enrollment, medical underwriting and effective date.

Contribution Analysis - Current Medical

Bay Arenac Behavioral Health

1/1/2026 Current Rates & Contributions

Number of pay deductions: 26

Enrolled		Tier	Monthly Rate - Medical	Percentage		Monthly Contribution		Per Pay Contribution	Annual Cost	
				ER	EE	ER	EE			
75	Single		\$775.90	88.00%	12.00%	\$682.79	\$93.11	\$42.97	Premium	\$2,720,625.24
33	Two Person		\$1,862.17	88.00%	12.00%	\$1,638.71	\$223.46	\$103.14	EE Contributions	<u>\$326,475.03</u>
46	Family		\$2,327.71	88.00%	12.00%	\$2,048.38	\$279.33	\$128.92	Net ER Cost	\$2,394,150.21
SB HSA \$2,500 20%										
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Annual Cost	
				ER	EE	ER	EE			
3	Single		\$699.58	95.00%	5.00%	\$664.60	\$34.98	\$16.14	Premium	\$231,703.68
4	Two Person		\$1,679.00	95.00%	5.00%	\$1,595.05	\$83.95	\$38.75	EE Contributions	<u>\$11,585.18</u>
5	Family		\$2,098.78	95.00%	5.00%	\$1,993.84	\$104.94	\$48.43	Net ER Cost	\$220,118.50
HMO \$2,000 20%										
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Annual Cost	
				ER	EE	ER	EE			
4	Single		\$464.90	86.14%	13.86%	\$400.46	\$64.44	\$29.74	Premium	\$129,428.52
3	Two Person		\$1,115.77	86.14%	13.86%	\$961.12	\$154.65	\$71.37	EE Contributions	<u>\$17,938.79</u>
4	Family		\$1,394.70	86.14%	13.86%	\$1,201.39	\$193.31	\$89.22	Net ER Cost	\$111,489.73

Total Enrolled Contracts: 177

	TOTAL	Annual Cost
	Premium	\$3,081,757.44
11.55%	EE Contributions	<u>\$355,999.01</u>
88.45%	Net ER Cost	\$2,725,758.43

Contribution Analysis - Medical Options

Bay Arenac Behavioral Health

1/1/2027 Renewal Rates & Contributions

Number of pay deductions: 26

Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Per Pay Change	Annual Cost	
				ER	EE	ER	EE				
75	Single		\$666.88	86.00%	14.00%	\$573.52	\$93.36	\$43.09	\$0.12	Premium	\$2,338,366.20
33	Two Person		\$1,600.53	86.00%	14.00%	\$1,376.46	\$224.07	\$103.42	\$0.28	EE Contributions	<u>\$327,371.27</u>
46	Family		\$2,000.66	86.00%	14.00%	\$1,720.57	\$280.09	\$129.27	\$0.35	Net ER Cost	\$2,010,994.93
SB HSA \$2,500 20%											
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Per Pay Change	Annual Cost	
				ER	EE	ER	EE				
3	Single		\$922.53	92.00%	8.00%	\$848.73	\$73.80	\$34.06	\$17.92	Premium	\$305,542.32
4	Two Person		\$2,214.08	92.00%	8.00%	\$2,036.95	\$177.13	\$81.75	\$43.00	EE Contributions	<u>\$24,443.39</u>
5	Family		\$2,767.59	92.00%	8.00%	\$2,546.18	\$221.41	\$102.19	\$53.75	Net ER Cost	\$281,098.93
HMO \$2,000 20%											
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Per Pay Change	Annual Cost	
				ER	EE	ER	EE				
4	Single		\$658.55	88.00%	12.00%	\$579.52	\$79.03	\$36.47	\$6.73	Premium	\$183,339.00
3	Two Person		\$1,580.51	88.00%	12.00%	\$1,390.85	\$189.66	\$87.54	\$16.16	EE Contributions	<u>\$22,000.68</u>
4	Family		\$1,975.63	88.00%	12.00%	\$1,738.55	\$237.08	\$109.42	\$20.20	Net ER Cost	\$161,338.32

Total Enrolled Contracts: 177

	TOTAL	Annual Cost
	Premium	\$2,827,247.52
13.22%	EE Contributions	<u>\$373,815.33</u>
86.78%	Net ER Cost	\$2,453,432.19
	Dollar Change	-\$272,326.25
	Percent Change	-9.99%

Contribution Analysis - Current Medical

Bay Arenac Behavioral Health

1/1/2026 Current Rates & PA 152 Premium

Number of pay deductions:				26			
SB PPO \$2,500 20%							
Enrolled		Tier	Monthly Rate - Medical	Monthly Contribution ER EE		Per Pay Contribution	Annual Cost
75	Single		\$775.90	\$661.84	\$114.06	\$52.64	Premium \$2,720,625.24
33	Two Person		\$1,862.17	\$1,384.12	\$478.06	\$220.64	EE Contributions <u>\$580,485.15</u>
46	Family		\$2,327.71	\$1,805.03	\$522.69	\$241.24	Net ER Cost \$2,140,140.09
SB HSA \$2,500 20%							
Enrolled		Tier	Monthly Rate	Monthly Contribution ER EE		Per Pay Contribution	Annual Cost
3	Single		\$699.58	\$661.84	\$37.74	\$17.42	Premium \$231,703.68
4	Two Person		\$1,679.00	\$1,384.12	\$294.89	\$136.10	EE Contributions <u>\$33,138.39</u>
5	Family		\$2,098.78	\$1,805.03	\$293.76	\$135.58	Net ER Cost \$198,565.29
HMO \$2,000 20%							
Enrolled		Tier	Monthly Rate	Monthly Contribution ER EE		Per Pay Contribution	Annual Cost
4	Single		\$464.90	\$661.84	\$0.00	\$0.00	Premium \$129,428.52
3	Two Person		\$1,115.77	\$1,384.12	\$0.00	\$0.00	EE Contributions <u>\$0.00</u>
4	Family		\$1,394.70	\$1,805.03	\$0.00	\$0.00	Net ER Cost \$129,428.52
							TOTAL
							Annual Cost
Total Enrolled Contracts: 177							Premium \$3,081,757.44
							19.91% EE Contributions <u>\$613,623.54</u>
							80.09% Net ER Cost \$2,468,133.90

Contribution Analysis - Renewal Medical

Bay Arenac Behavioral Health

1/1/2027 Renewal Rates & PA 152 Premium

Number of pay deductions:				26				
BCN BEP POS \$2,500 20%								
Enrolled		Tier	Monthly Rate	Monthly Contribution ER EE		Per Pay Contribution	Per Pay Change	Annual Cost
75	Single		\$666.88	\$681.70	\$0.00	\$0.00	-\$52.64	Premium \$2,338,366.20
33	Two Person		\$1,600.53	\$1,425.64	\$174.89	\$80.72	-\$139.92	EE Contributions <u>\$147,356.36</u>
46	Family		\$2,000.66	\$1,859.18	\$141.48	\$65.30	-\$175.94	Net ER Cost \$2,191,009.84
SB HSA \$2,500 20%								
Enrolled		Tier	Monthly Rate	Monthly Contribution ER EE		Per Pay Contribution	Per Pay Change	Annual Cost
3	Single		\$928.70	\$681.70	\$247.00	\$114.00	\$96.58	Premium \$307,584.36
4	Two Person		\$2,228.87	\$1,425.64	\$803.23	\$370.72	\$234.62	EE Contributions <u>\$103,062.12</u>
5	Family		\$2,786.09	\$1,859.18	\$926.91	\$427.81	\$292.23	Net ER Cost \$204,522.24
HMO \$2,000 20%								
Enrolled		Tier	Monthly Rate	Monthly Contribution ER EE		Per Pay Contribution	Per Pay Change	Annual Cost
4	Single		\$658.55	\$681.70	\$0.00	\$0.00	\$0.00	Premium \$183,339.00
3	Two Person		\$1,580.51	\$1,425.64	\$154.87	\$71.48	\$71.48	EE Contributions <u>\$11,165.18</u>
4	Family		\$1,975.63	\$1,859.18	\$116.45	\$53.75	\$53.75	Net ER Cost \$172,173.82
TOTAL								Annual Cost
Total Enrolled Contracts: 177								Premium \$2,829,289.56
								9.25% EE Contributions <u>\$261,583.66</u>
								90.75% Net ER Cost \$2,567,705.90
								Dollar Change \$99,572.00
								Percent Change 4.03%

Contribution Analysis - Current Medical

Bay Arenac Behavioral Health

1/1/2026 Current Rates & Contributions

Number of pay deductions:			26									
SB PPO \$2,500 20%												
Enrolled		Tier	Monthly Rate - Medical	Percentage		Monthly Contribution		Per Pay Contribution	Annual Cost			
				ER	EE	ER	EE					
75	Single		\$775.90	88.00%	12.00%	\$682.79	\$93.11	\$42.97	Premium	\$2,720,625.24		
33	Two Person		\$1,862.17	88.00%	12.00%	\$1,638.71	\$223.46	\$103.14	EE Contributions	<u>\$326,475.03</u>		
46	Family		\$2,327.71	88.00%	12.00%	\$2,048.38	\$279.33	\$128.92	Net ER Cost	\$2,394,150.21		
SB HSA \$2,500 20%												
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Annual Cost			
				ER	EE	ER	EE					
3	Single		\$699.58	95.00%	5.00%	\$664.60	\$34.98	\$16.14	Premium	\$231,703.68		
4	Two Person		\$1,679.00	95.00%	5.00%	\$1,595.05	\$83.95	\$38.75	EE Contributions	<u>\$11,585.18</u>		
5	Family		\$2,098.78	95.00%	5.00%	\$1,993.84	\$104.94	\$48.43	Net ER Cost	\$220,118.50		
HMO \$2,000 20%												
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Annual Cost			
				ER	EE	ER	EE					
4	Single		\$464.90	86.14%	13.86%	\$400.46	\$64.44	\$29.74	Premium	\$129,428.52		
3	Two Person		\$1,115.77	86.14%	13.86%	\$961.12	\$154.65	\$71.37	EE Contributions	<u>\$17,938.79</u>		
4	Family		\$1,394.70	86.14%	13.86%	\$1,201.39	\$193.31	\$89.22	Net ER Cost	\$111,489.73		
										TOTAL		
										Annual Cost		
Total Enrolled Contracts: 177										Premium	\$3,081,757.44	
										11.55%	EE Contributions	<u>\$355,999.01</u>
										88.45%	Net ER Cost	\$2,725,758.43

Contribution Analysis - Medical Options

Bay Arenac Behavioral Health

1/1/2027 Renewal Rates & Contributions

Number of pay deductions:			26								
BCN BEP POS \$2,500 20%											
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Per Pay Change	Annual Cost	
				ER	EE	ER	EE				
75	Single		\$666.88	88.00%	12.00%	\$586.85	\$80.03	\$36.93	-\$6.04	Premium	\$2,338,366.20
33	Two Person		\$1,600.53	88.00%	12.00%	\$1,408.47	\$192.06	\$88.64	-\$14.49	EE Contributions	<u>\$280,603.94</u>
46	Family		\$2,000.66	88.00%	12.00%	\$1,760.58	\$240.08	\$110.81	-\$18.11	Net ER Cost	\$2,057,762.26
SB HSA \$2,500 20%											
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Per Pay Change	Annual Cost	
				ER	EE	ER	EE				
3	Single		\$922.53	95.00%	5.00%	\$876.40	\$46.13	\$21.29	\$5.15	Premium	\$305,542.32
4	Two Person		\$2,214.08	95.00%	5.00%	\$2,103.38	\$110.70	\$51.09	\$12.35	EE Contributions	<u>\$15,277.12</u>
5	Family		\$2,767.59	95.00%	5.00%	\$2,629.21	\$138.38	\$63.87	\$15.43	Net ER Cost	\$290,265.20
HMO \$2,000 20%											
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Per Pay Change	Annual Cost	
				ER	EE	ER	EE				
4	Single		\$658.55	90.00%	10.00%	\$592.70	\$65.86	\$30.39	\$0.66	Premium	\$183,339.00
3	Two Person		\$1,580.51	90.00%	10.00%	\$1,422.46	\$158.05	\$72.95	\$1.57	EE Contributions	<u>\$18,333.90</u>
4	Family		\$1,975.63	90.00%	10.00%	\$1,778.07	\$197.56	\$91.18	\$1.97	Net ER Cost	\$165,005.10
TOTAL											
Annual Cost											
Total Enrolled Contracts: 177											
Premium											\$2,827,247.52
11.11% EE Contributions											<u>\$314,214.96</u>
88.89% Net ER Cost											\$2,513,032.56
Dollar Change											-\$212,725.87
Percent Change											-7.80%

Contribution Analysis - Current Medical

Bay Arenac Behavioral Health

1/1/2026 Current Rates & Contributions

Number of pay deductions:			26									
SB PPO \$2,500 20%												
Enrolled		Tier	Monthly Rate - Medical	Percentage		Monthly Contribution		Per Pay Contribution	Annual Cost			
				ER	EE	ER	EE					
75	Single		\$775.90	88.00%	12.00%	\$682.79	\$93.11	\$42.97	Premium	\$2,720,625.24		
33	Two Person		\$1,862.17	88.00%	12.00%	\$1,638.71	\$223.46	\$103.14	EE Contributions	<u>\$326,475.03</u>		
46	Family		\$2,327.71	88.00%	12.00%	\$2,048.38	\$279.33	\$128.92	Net ER Cost	\$2,394,150.21		
SB HSA \$2,500 20%												
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Annual Cost			
				ER	EE	ER	EE					
3	Single		\$699.58	95.00%	5.00%	\$664.60	\$34.98	\$16.14	Premium	\$231,703.68		
4	Two Person		\$1,679.00	95.00%	5.00%	\$1,595.05	\$83.95	\$38.75	EE Contributions	<u>\$11,585.18</u>		
5	Family		\$2,098.78	95.00%	5.00%	\$1,993.84	\$104.94	\$48.43	Net ER Cost	\$220,118.50		
HMO \$2,000 20%												
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Annual Cost			
				ER	EE	ER	EE					
4	Single		\$464.90	86.14%	13.86%	\$400.46	\$64.44	\$29.74	Premium	\$129,428.52		
3	Two Person		\$1,115.77	86.14%	13.86%	\$961.12	\$154.65	\$71.37	EE Contributions	<u>\$17,938.79</u>		
4	Family		\$1,394.70	86.14%	13.86%	\$1,201.39	\$193.31	\$89.22	Net ER Cost	\$111,489.73		
										TOTAL		
										Annual Cost		
Total Enrolled Contracts: 177										Premium	\$3,081,757.44	
										11.55%	EE Contributions	<u>\$355,999.01</u>
										88.45%	Net ER Cost	\$2,725,758.43

Contribution Analysis - Renewal Medical

Bay Arenac Behavioral Health

1/1/2027 Renewal Rates & Contributions

Number of pay deductions:			26									
SB PPO \$2,500 20%												
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Per Pay Change	Annual Cost		
				ER	EE	ER	EE					
75	Single		\$1,011.90	88.00%	12.00%	\$890.47	\$121.43	\$56.04	\$13.07	Premium	\$3,548,120.64	
33	Two Person		\$2,428.56	88.00%	12.00%	\$2,137.13	\$291.43	\$134.50	\$31.37	EE Contributions	<u>\$425,774.48</u>	
46	Family		\$3,035.69	88.00%	12.00%	\$2,671.41	\$364.28	\$168.13	\$39.21	Net ER Cost	\$3,122,346.16	
SB HSA \$2,500 20%												
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Per Pay Change	Annual Cost		
				ER	EE	ER	EE					
3	Single		\$928.70	95.00%	5.00%	\$882.27	\$46.44	\$21.43	\$5.29	Premium	\$307,584.36	
4	Two Person		\$2,228.87	95.00%	5.00%	\$2,117.43	\$111.44	\$51.44	\$12.69	EE Contributions	<u>\$15,379.22</u>	
5	Family		\$2,786.09	95.00%	5.00%	\$2,646.79	\$139.30	\$64.29	\$15.86	Net ER Cost	\$292,205.14	
HMO \$2,000 20%												
Enrolled		Tier	Monthly Rate	Percentage		Monthly Contribution		Per Pay Contribution	Per Pay Change	Annual Cost		
				ER	EE	ER	EE					
4	Single		\$658.55	90.00%	10.00%	\$592.70	\$65.86	\$30.39	\$0.66	Premium	\$183,339.00	
3	Two Person		\$1,580.51	90.00%	10.00%	\$1,422.46	\$158.05	\$72.95	\$1.57	EE Contributions	<u>\$18,333.90</u>	
4	Family		\$1,975.63	90.00%	10.00%	\$1,778.07	\$197.56	\$91.18	\$1.97	Net ER Cost	\$165,005.10	
TOTAL												
										Annual Cost		
Total Enrolled Contracts: 177										Premium	\$4,039,044.00	
										11.38%	EE Contributions	<u>\$459,487.59</u>
										88.62%	Net ER Cost	\$3,579,556.41
											Dollar Change	\$853,797.97
											Percent Change	31.32%

Contribution Analysis - Current Medical

Bay Arenac Behavioral Health

1/1/2026 Current Rates & PA 152 Premium							
Number of pay deductions:			26				
SB PPO \$2,500 20%							
Enrolled		Tier	Monthly Rate - Medical	Monthly Contribution ER EE		Per Pay Contribution	Annual Cost
75	Single		\$775.90	\$661.84	\$114.06	\$52.64	Premium \$2,720,625.24
33	Two Person		\$1,862.17	\$1,384.12	\$478.06	\$220.64	EE Contributions <u>\$580,485.15</u>
46	Family		\$2,327.71	\$1,805.03	\$522.69	\$241.24	Net ER Cost \$2,140,140.09
SB HSA \$2,500 20%							
Enrolled		Tier	Monthly Rate	Monthly Contribution ER EE		Per Pay Contribution	Annual Cost
3	Single		\$699.58	\$661.84	\$37.74	\$17.42	Premium \$231,703.68
4	Two Person		\$1,679.00	\$1,384.12	\$294.89	\$136.10	EE Contributions <u>\$33,138.39</u>
5	Family		\$2,098.78	\$1,805.03	\$293.76	\$135.58	Net ER Cost \$198,565.29
HMO \$2,000 20%							
Enrolled		Tier	Monthly Rate	Monthly Contribution ER EE		Per Pay Contribution	Annual Cost
4	Single		\$464.90	\$661.84	\$0.00	\$0.00	Premium \$129,428.52
3	Two Person		\$1,115.77	\$1,384.12	\$0.00	\$0.00	EE Contributions <u>\$0.00</u>
4	Family		\$1,394.70	\$1,805.03	\$0.00	\$0.00	Net ER Cost \$129,428.52
							TOTAL
							Annual Cost
Total Enrolled Contracts: 177							Premium \$3,081,757.44
							19.91% EE Contributions <u>\$613,623.54</u>
							80.09% Net ER Cost \$2,468,133.90

Contribution Analysis - Renewal Medical

Bay Arenac Behavioral Health

1/1/2027 Renewal Rates & PA 152 Premium									
Number of pay deductions:				26					
SB PPO \$2,500 20%									
Enrolled		Tier	Monthly Rate	Monthly Contribution		Per Pay	Per Pay		
				ER	EE	Contribution	Change	Annual Cost	
75	Single		\$1,011.90	\$681.70	\$330.20	\$152.40	\$99.76	Premium	\$3,548,120.64
33	Two Person		\$2,428.56	\$1,425.64	\$1,002.92	\$462.89	\$242.25	EE Contributions	<u>\$1,343,776.55</u>
46	Family		\$3,035.69	\$1,859.18	\$1,176.51	\$543.01	\$301.77	Net ER Cost	<u>\$2,204,344.09</u>
SB HSA \$2,500 20%									
Enrolled		Tier	Monthly Rate	Monthly Contribution		Per Pay	Per Pay		
				ER	EE	Contribution	Change	Annual Cost	
3	Single		\$928.70	\$681.70	\$247.00	\$114.00	\$96.58	Premium	\$307,584.36
4	Two Person		\$2,228.87	\$1,425.64	\$803.23	\$370.72	\$234.62	EE Contributions	<u>\$103,062.12</u>
5	Family		\$2,786.09	\$1,859.18	\$926.91	\$427.81	\$292.23	Net ER Cost	<u>\$204,522.24</u>
HMO \$2,000 20%									
Enrolled		Tier	Monthly Rate	Monthly Contribution		Per Pay	Per Pay		
				ER	EE	Contribution	Change	Annual Cost	
4	Single		\$658.55	\$681.70	\$0.00	\$0.00	\$0.00	Premium	\$183,339.00
3	Two Person		\$1,580.51	\$1,425.64	\$154.87	\$71.48	\$71.48	EE Contributions	<u>\$11,165.18</u>
4	Family		\$1,975.63	\$1,859.18	\$116.45	\$53.75	\$53.75	Net ER Cost	<u>\$172,173.82</u>
TOTAL									
									Annual Cost
Total Enrolled Contracts: 177									Premium \$4,039,044.00
									36.10% EE Contributions <u>\$1,458,003.85</u>
									63.90% Net ER Cost \$2,581,040.15
									Dollar Change \$112,906.25
									Percent Change 4.57%

MAPD Renewal

Bay Arenac Behavioral Health

2027 Renewal History

Original Increase : -28.74%
 Plan Changes :
 Final Increase :

		Current 2026	Renewal 2027
		Blue Cross Blue Shield PPO \$1,000 0%	Blue Cross Blue Shield PPO \$1,000 0%
Renewal Date	January 1, 2027		
		<u>Enrollment</u> ¹ <u>Rates</u>	<u>Enrollment</u> ¹ <u>Rates</u>
Single		76 \$336.39	76 \$239.71
Premium		Monthly Annual	Monthly Annual
Dollar Change		\$25,565.64 \$306,787.68	\$18,217.96 \$218,615.52
Percent Change			-\$7,347.68 -\$88,172.16 -28.7%

¹ Enrollment taken from BCBS Membership Listing.
 Total Enrolled Contracts: 76

MAPD Option

Bay Arenac Behavioral Health

Renewal Date	12 month Renewal					
	Current 2026	Renewal 2027	Option 1 - BCBS	Option 2 - BCBS	Option 3 - Priority Health	Option 4 - Humana
January 1, 2027	PPO \$1,000 0%	PPO \$1,000 0%	PPO \$500 0%	PPO \$0 0%	PPO \$1,000 0%	LPPO for Standard Plan 079 Opt 826
Individual Deductible	\$1,000	\$1,000	\$500	\$0	\$1,000	\$0
Coinsurance	0%	0%	0%	0%	0%	0%
Individual Maximum	N/A	N/A	N/A	N/A	N/A	N/A
Deductible + Coinsurance Total						
Individual	\$1,000	\$1,000	\$500	\$0	\$1,000	\$0
Total Out of Pocket						
Medical Maximum	\$1,500	\$1,500	\$1,500	\$1,000	\$1,500	\$1,000
Rx Maximum	\$2,100	\$2,400	\$2,400	\$2,400	\$2,400	\$2,400
Employer Funding						
Individual						
PCP / Spec. / Chiro. Copays	\$10 / \$15 / \$10	\$10 / \$15 / \$10	\$10 / \$15 / \$10	\$10 / \$20 / \$10	\$10 / \$15	\$10 / \$20 / \$20
Virtual Visit						
Urgent Care	\$15	\$15	\$15	\$15	\$15, not subject to deductible	100% covered
Emergency Room	\$50, not subject to deductible	\$50, not subject to deductible	\$50	\$50	\$50, not subject to deductible	100% covered
Lab & Pathology Services	Covered up to 100% after deductible	Covered up to 100% after deductible			Covered up to 100% after deductible	100% covered
Diagnostic Tests & X-Rays	Covered up to 100% after deductible	Covered up to 100% after deductible			Covered up to 100% after deductible	100% covered
High Tech Imaging (MRI, CT.)	Covered up to 100% after deductible	Covered up to 100% after deductible			Covered up to 100% after deductible	100% covered
Rx Formulary	Comprehensive Enhanced Formulary	Comprehensive Enhanced Formulary	Comprehensive Enhanced Formulary	Healthy Value Enhanced Formulary		Group Plus Formulary
Non-Specialty Rx ⁽¹⁾ - Standard	\$0 / \$10 / \$40 / \$70	\$0 / \$10 / \$40 / \$70	\$0 / \$10 / \$40 / \$70	\$10 / \$10 / \$20 / \$40	\$0 / \$10 / \$40 / \$70	\$10 / \$20 / \$40
Specialty Rx ⁽²⁾	\$70	\$70	\$70	\$80	\$70	\$80
90 Day Supply / Mail Order ⁽³⁾	MOPD 2x	MOPD 2x	MOPD 2x	MOPD 2x	MOPD 3x	MOPD Retail 3x, Mail Order \$0/\$40/\$80
Non-Specialty Rx ⁽¹⁾ - Preferred	\$0 / \$5 / \$35 / \$65	\$0 / \$5 / \$35 / \$65	\$0 / \$5 / \$35 / \$65	\$5 / \$5 / \$15 / \$35	\$0 / \$5 / \$35 / \$65	
Specialty Rx ⁽²⁾	\$65	\$65	\$65	\$75	\$65	
90 Day Supply / Mail Order ⁽³⁾	MOPD 2x	MOPD 2x	MOPD 2x	MOPD 2x	MOPD 3x	
Total Enrolled: 76	Rates	Rates	Rates	Rates	Rates	Rates
76 MAPD-Single	\$336.39	\$239.71	\$277.30	\$308.93	\$320.85	\$304.69
Monthly Premium	\$25,565.64	\$18,217.96	\$21,074.80	\$23,478.68	\$24,384.60	\$23,156.44
Annual Premium	\$306,787.68	\$218,615.52	\$252,897.60	\$281,744.16	\$292,615.20	\$277,877.28
Maximum Employer Funding	\$0.00	\$0.00				
Total Cost	\$306,787.68	\$218,615.52				
Annual Dollar Change		-\$88,172.16	-\$53,890.08	-\$25,043.52	-\$14,172.48	-\$28,910.40
Percent Change		-28.7%	-17.6%	-8.2%	-4.6%	-9.4%

⁽¹⁾ Preferred generic / non-preferred generic / preferred brand / non-preferred brand ⁽²⁾ Preferred specialty / non-preferred specialty ⁽³⁾ Specialty medications are not available for a 90 day supply.

Benefit levels illustrated include in-network only. For complete schedule of both in and out of network benefits, please refer to the plan document.

The above information is intended as a benefit summary only. It does not include all of the benefit provisions, limitations and qualifications. If this information conflicts in any way with the contract, the contract will prevail.

“We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800-MEDICARE to get information on all of your options.”

Dental Renewal

Bay Arenac Behavioral Health

1/1/2027 Renewal History

Original Increase :

0%

Plan Changes :

None

Final Increase :

0%

Rate Basis: ER / EE PAID Renewal Date: January 1, 2028		Current (Plan Year) Blue Cross Blue Shield 100/50/50/%50 \$1,000/\$1,000		Renewal (Plan Year) Blue Cross Blue Shield 100/50/50/%50 \$1,000/\$1,000	
		In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible					
Individual		None	None	None	None
Family		None	None	None	None
Waived for Type 1?		\$0	\$0	0	0
Type 1 (Preventive)		100%	100%	100%	100%
Type 2 (Basic)		50%	50%	50%	50%
Type 3 (Major)		50%	50%	50%	50%
Type 4 (Orthodontia)		50%	50%	50%	50%
Annual Maximum		\$1,000	\$1,000	\$1,000	\$1,000
Preventive Accumulates to Max?					
Lifetime Orthodontia Maximum		\$1,000	\$1,000	\$1,000	\$1,000
Total Enrolled ¹ :		Rates		Rates	
141 Employee Only		\$25.37		\$25.37	
56 2 Person		\$50.74		\$50.74	
67 Family		\$88.79		\$88.79	
Premium		Monthly	Annual	Monthly	Annual
Dollar Change		\$12,367.54	\$148,410.48	\$12,367.54	\$148,410.48
Percent Change		\$0.00		\$0.00	\$0.00
Rate Guarantee		0.00%		0.00%	
		Year 1 of 2 until 1/1/2028		Year 2 of 2 until 1/1/2028	

¹ Enrollment taken from Delta Dental and includes COBRA if applicable.

The above information is intended as a benefit summary only. It does not include all of the benefit provisions, limitations and qualifications. If this information conflicts in any way with the contract, the contract will prevail.

Vision No Change Renewal

Bay Arenac Behavioral Health

1/1/2027 Renewal History

Original Increase :

0.00%

Plan Changes :

None

Final Increase :

0.00%

		Current (Plan Year)	Renewal (Plan Year)
Rate Basis: ER / EE PAID		EyeMed	EyeMed
Renewal Date: January 1, 2029		12 / 12 / 24 \$130	12 / 12 / 24 \$130
Benefit Frequency			
Exams		Every 12 Months	Every 12 Months
Lenses		Every 12 Months	Every 12 Months
Frames		Every 24 Months	Every 24 Months
Copays			
Exams		\$10	\$10
Materials *		\$25	\$25
Total Enrolled ¹ : 266			
143 Employee Only		\$4.71	\$4.71
55 2 Person		\$8.95	\$8.95
68 Family		\$13.14	\$13.14
0 0		\$0.00	\$0.00
Premium		Monthly Annual	Monthly Annual
Dollar Change		\$2,059.30 \$24,711.60	\$2,059.30 \$24,711.60
Percent Change		\$0.00	\$0.00
Rate Guarantee		0.00%	0.00%
		4 Year until 1/1/2029	4 Year until 1/1/2029

¹ Enrollment taken from Delta Dental and includes COBRA if applicable.

The above information is intended as a benefit summary only. It does not include all of the benefit provisions, limitations and qualifications. If this information conflicts in any way with the contract, the contract will prevail.

Life and STD No Change Renewal

Bay Arenac Behavioral Health

Rate Basis: ER PAID

Renewal Date: 1/1/2028

	Current (Plan Year) Dearborn	Renewal (Plan Year) Dearborn
Life / AD&D **		
Volume	\$13,080,000	\$13,080,000
Life Rate (per \$1,000)	\$0.048	\$0.048
AD&D Rate (per \$1,000)	\$0.015	\$0.015
Monthly Premium	\$824.04	\$824.04
Annual Premium	\$9,888.48	\$9,888.48
Annual Dollar Change		\$0.00
Percent Change		0.0%
Rate Guarantee	Year 2 of 3 until 1/1/2028	Year 3 of 3 until 1/1/28
STD		
<i>Class 1</i>		
Volume (weekly benefit)	\$173,354.00	\$173,354.00
STD Rate (per \$10)	\$0.38	\$0.38
Monthly Premium	\$6,587.45	\$6,587.45
Annual Premium	\$79,049.42	\$79,049.42
Annual Dollar Change		\$0.00
Percent Change		0.0%
Rate Guarantee	Year 2 of 3 until 1/1/2028	Year 3 of 3 until 1/1/28
LTD		
<i>Class 1</i>		
Volume (covered monthly payroll)	\$1,079,568	\$1,079,568
LTD Rate (per \$100)	\$0.350	\$0.350
Monthly Premium	\$3,778.49	\$3,778.49
Annual Premium	\$45,341.86	\$45,341.86
Annual Dollar Change		\$0.00
Percent Change		0.0%
Rate Guarantee	Year 2 of 3 until 1/1/2028	Year 3 of 3 until 1/1/28
Package Total		
Monthly Premium	\$11,189.98	\$11,189.98
Annual Premium	\$134,279.76	\$134,279.76
Annual Dollar Change		\$0.00
Percent Change		0.00%

*** Voluntary Life Rates are renewing as is with no change in the age banded rates.**

If your policy includes Conversion and/or Portability it is the employer's responsibility to notify the employee of these benefits at the time of termination.

If you have any employees who work in one of the following states, (New York, New Jersey, Rhode Island, California, Hawaii & Puerto Rico) there are state mandated disability benefits that are required by law.

Volumes were taken from Renewal Notice.

Voluntary Life Renewal

Bay Arenac Behavioral Health

Rate Basis: EE Paid

Renewal Date: 1/1/2028

	Current (Plan Year) Dearborn	Renewal (Plan Year) Dearborn
Voluntary Life - Employees and Spouses		
Age Banded Rates:	Rates per \$1,000	Rates per \$1,000
00-29	\$0.109	\$0.109
30-34	\$0.110	\$0.110
35-39	\$0.145	\$0.145
40-44	\$0.201	\$0.201
45-49	\$0.320	\$0.320
50-54	\$0.491	\$0.491
55-59	\$0.802	\$0.802
60-64	\$1.280	\$1.280
65-69	\$2.246	\$2.246
70-74	\$4.054	\$4.054
75+	\$8.208	\$8.208
AD&D Rate:	\$0.02	\$0.015
Rate Guarantee	Year 2 of 3 until 1/1/2028	Year 3 of 3 until 1/1/2028
Percent Change		0.00%
Voluntary Life - Child(ren)		
Rate: <i>(includes AD&D)</i>	Rates per \$1,000	Rates per \$1,000
	\$0.067	\$0.067
Rate Guarantee	Year 2 of 3 until 1/1/2028	Year 3 of 3 until 1/1/2028
Percent Change		0.00%

If your policy includes Conversion and/or Portability it is the employer's responsibility to notify the employee of these benefits at the time of termination.

Volumes were taken from Renewal Notice.



BOARD OF DIRECTORS

Resolution #26-10-0XX

RESOLUTION TO ADOPT THE ANNUAL EXEMPTION OPTION AS SET FORTH IN PUBLIC ACT 152 OF 2011, THE PUBLICALLY FUNDED HEALTH INSURANCE CONTRIBUTION ACT

- WHEREAS,** Public Act (PA) 152 of 2011, passed by the State Legislature and signed by the Governor on September 24, 2011; was designed to reduce the burden of employee health care costs on public employers; and
- WHEREAS,** Public employers are given three options for complying with the requirements of PA 152 of 2011; and
- WHEREAS,** These three options are in PA 152 of 2011:
- 1) Section 3 “Hard Cap” Option – limits a public employer’s total annual health care costs for employees based on coverage levels as defined in the Act;
 - 2) Section 4 “80%/20%” Option – limits a public employer’s share of total annual health care costs to not more than 80%. This option requires an annual majority vote of the public employer;
 - 3) Section 8 “Exemption” Option – a local unit of government as defined in the act, may exempt itself from the requirements of the Act by an annual 2/3 majority vote of the public employer;
- WHEREAS,** The Bay Arenac Behavioral Health Authority has decided to adopt the annual Exemption option as its choice of compliance under PA 152 of 2011; and
- WHEREAS,** The Bay Arenac Behavioral Health Board of Directors recognizes the PA 152 Exemption option requires a 2/3 majority vote; and
- WHEREAS,** The Bay Arenac Behavioral Health Board of Directors acknowledges its responsibility to revisit its options and responsibility under PA 152 of 2011 in one year.
- THEREFORE, BE IT RESOLVED:**
- That Bay Arenac Behavioral Health Authority elects to comply with the requirements of PA 152 of 2011, The Publicly Funded Health Insurance Contribution Act, by adopting the annual Exemption option for the medical benefit plan coverage year from January 1, 2027 through December 31, 2027.

This resolution was adopted at a regular Board meeting of the Bay Arenac Behavioral Health Authority Board of Directors held on October 15, 2026 pursuant to the Open Meetings Act, Public Act 267 of 1976 as amended on a motion by XXX and supported by XXX with the following votes:

Yeas:
Nays:
Excused:

Robert Pawlak, Board Chair

Pamela Schumacher, Board Secretary

Behavioral Health Center, 201 Mulholland, Bay City, MI 48708

Bay-Arenac Behavioral Health Authority
Estimated Cash and Investment Balances September 30, 2026

Balance September 1, 2026	7,947,867.40
Balance September 30, 2026	6,974,914.64
Average Daily Balance	7,380,670.75
Estimated Actual/Accrued Interest September 2026	10,688.46
Effective Rate of Interest Earning September 2026	1.74%
Estimated Actual/Accrued Interest Fiscal Year to Date	177,907.43
Effective Rate of Interest Earning Fiscal Year to Date	2.58%

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

Cash Available - Operating Fund

	Rate	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Jul-26	Aug-26	Sep-26
Beg. Balance Operating Funds - Cash,													
Cash equivalents, Investments		5,966,633	5,274,202	8,431,919	6,776,354	5,376,236	4,732,550	8,105,441	7,785,704	6,060,159	5,143,018	9,001,500	7,450,608
Cash in		13,636,279	21,097,480	13,203,400	12,594,625	12,095,878	21,243,634	14,182,106	11,806,450	18,483,283	24,866,824	12,197,403	9,294,725
Cash out		(14,328,710)	(17,939,763)	(14,858,965)	(13,994,743)	(12,739,564)	(17,870,743)	(14,501,842)	(13,531,996)	(19,400,423)	(21,008,342)	(13,748,295)	(10,269,149)
Ending Balance Operating Fund		5,274,202	8,431,919	6,776,354	5,376,236	4,732,550	8,105,441	7,785,704	6,060,159	5,143,018	9,001,500	7,450,609	6,476,184
Investments													
Money Markets		5,274,202	8,431,919	6,776,354	5,376,236	4,732,550	8,105,441	7,785,704	6,060,159	5,143,018	9,001,500	7,450,609	6,476,184
90.00													
180.00													
180.00													
270.00													
Total Operating Cash, Cash equivalents, Invested		5,274,202	8,431,919	6,776,354	5,376,236	4,732,550	8,105,441	7,785,704	6,060,159	5,143,018	9,001,500	7,450,609	6,476,184
Average Rate of Return General Funds		3.06%	2.94%	3.14%	3.00%	2.91%	2.85%	2.81%	2.79%	2.74%	2.67%	2.61%	2.40%
Average		3.06%	2.81%	3.56%	2.56%	2.56%	2.58%	2.60%	2.57%	2.37%	2.43%	2.23%	1.70%
Average		5,274,202	6,853,061	6,698,662	6,464,678	6,118,252	6,449,450	6,780,648	6,567,821	6,409,509	6,823,653	6,714,619	6,681,267

Cash Available - Other Restricted Funds

	Rate	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Jul-26	Aug-26	Sep-26
Beg. Balance-Other Restricted Funds -													
Cash, Cash equivalents, Investments		481,232	482,860	484,348	485,821	487,265	488,574	490,026	491,436	492,896	494,314	495,732	497,257
Cash in		1,628	1,488	1,473	1,444	1,308	1,452	1,410	1,461	1,418	1,418	1,525	1,474
Cash out													
Ending Balance Other Restricted Funds		482,860	484,348	485,821	487,265	488,574	490,026	491,436	492,896	494,314	495,732	497,257	498,731
Investments													
Money Market		482,860	484,348	485,821	487,265	488,574	490,026	491,436	492,896	494,314	495,732	497,257	498,731
91.00	0.70%												
91.00	1.10%												
91.00	1.15%												
91.00	1.35%												
Total Other Restricted Funds		482,860	484,348	485,821	487,265	488,574	490,026	491,436	492,896	494,314	495,732	497,257	498,731
Average Rate of Return Other Restricted Funds		4.11%	4.11%	3.93%	3.85%	3.78%	3.73%	3.70%	3.67%	3.65%	3.59%	3.24%	3.16%
Average		4.11%	4.11%	3.58%	3.58%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	1.02%	1.26%
Average		482,860	483,604	484,343	485,074	488,574	486,482	487,190	487,903	488,616	932,285	892,737	859,903
Total - Bal excludes payroll related cash accounts		5,757,062	8,916,267	7,262,175	5,863,501	5,221,124	8,595,467	8,277,140	6,553,055	5,637,332	9,497,232	7,947,866	6,974,915
Total Average Rate of Return		3.55%	3.33%	3.53%	3.15%	3.08%	3.04%	3.00%	2.99%	2.97%	2.73%	2.66%	2.58%

Bay-Arenac Behavioral Health Finance Council Board Meeting Summary of Proposed Contracts October 7, 2026							
			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	R	Havenwyck Hospital, Inc. Inpatient Psychiatric Services Partial Hospitalization Services	\$940.21/day \$447.20/day	\$959.01/day \$456.14/day	10/1/26 - 9/30/27	Y	N
2	M	McLaren Healthcare Corporation Flint Partial Hospitalization Program	\$0	\$532/day	10/1/26 - 9/30/27	Y	N
3	R	Harbor Oaks Hospital Inpatient Psychiatric Services Specialized Inpatient Pediatric Unit	\$880/day \$1,400/day	\$890/day Same	10/1/26 - 9/30/27	Y	N
4	M	APS Employment Services Enhanced CLS and Overnight Health and Safety 1:1 staffing rate	\$7.36/unit	\$7.73/unit	10/1/26 - 9/30/27	Y	N
5	M	Rose Hill Center, Inc. (Holly, MI) Type A Residential Services for a second BABHA individual at Baker House Medication Reviews Psychiatric Evaluation	\$822/day \$98/encounter \$186/encounter	Same	10/1/26 - 9/30/27	Y	N
6	M	Saginaw Psychological Services, Inc. SED Children's Case Management ABA Case Management	\$46.87/unit \$85/unit	\$49.21/unit Same	10/1/26 - 9/30/27	Y	N
7	M	Flatrock Manor, Inc. (Flint, MI) CLS services for one BABHA individual	\$5.65/unit and \$12.24/unit for 24 hour enhanced staffing	\$5.71/unit and \$12.36/unit for 24 hour enhanced staffing	10/1/26 - 9/30/27	Y	N
8	M	Mercy Plus Healthcare Services LLC Evaluation of speech sound production w/eval of language	\$88/event	Same	10/1/26 - 9/30/27	Y	N
9	M	New Dimensions Indirect CLS service reimbursement	\$7.25/unit	\$7.61/unit	10/1/26 - 9/30/27	Y	N
10	N	Children's Therapy Corner Single Case Agreement for one BABHA individual ABA Behavioral Identification Assessment Behavior Follow-Up Assessment ABA Treatment ABA Treatment, Group Aba Clinical Observation & Direction ABA Family Training Adaptive Behavior Treatment Social Skills Group Speech and Language, Individual Speech & Language Evaluation of Speech Fluency Speech & Language Evaluation of Speech Sound Production Speech and Language Evaluation of Speech Sound Production w/Eval of Language Comprehension & Expression Speech & Language - Behavioral & Qualitative Analysis of Voice & Resonance OT/PT, Strength - Individual PT Evaluation - Low PT Evaluation - Moderate PT Evaluation - High PT Re-Evaluation OT/PT - Individual OT Evaluation - Low OT Evaluation - Moderate OT Evaluation - High OT Re-Evaluation Family Skills Training	\$0	\$30/unit \$30/unit \$16.50/unit \$4.89/unit \$30/unit \$30/unit \$8.57/unit \$111.71/event \$182.89/event \$189.89/event \$191.25/event \$108.75/event \$30.31/unit \$200.77/event \$200.77/event \$200.77/event \$68.75/event \$31.06/unit \$185.39/event \$189.76/event \$195.39/event \$151.25/event \$120/event	10/1/26 - 9/30/27	Y	N
11	M/R	Touchstone Services, Inc. Clubhouse Services - performance based fee for service contract renewal for FY26	Up to 60,000 units billed - \$6.75/unit 60,001 - 65,000 billable units - \$7/unit 65,001 - 70,000+ billable units - \$7.25/unit	\$7/unit	10/1/26 - 9/30/27	Y	N
Admin/Other Services							
12	R	DOXY.ME Telemedicine Provider Patient Software service for telehealth visits	\$7,257.60/year	Same	9/11/26 - 9/10/27	Y	N
13	R	BlueHost Upgrade to website hosting plan to 50 GB	\$131.40/year	\$239.88/year	10/5/26 - 5/8/28	N/A	N/A
14	N	Sage Software HRMS Benefits Messenger - One Time BCN Set-Up Fee	\$0	\$2,046	10/1/26 - 9/30/27	Y	N
SECTION II. SERVICES PROVIDED BY THE BOARD (REVENUE CONTRACTS)							
15	N	Power BI Licenses for Primary Care Providers Power BI Licenses for Primary Care Staff (List, MPA & Saginaw Psychological)	\$0	\$15/month per user eff. 2/28/27 and annually thereafter	10/1/26 - 2/28/27; Auto- Renews for 1-year terms	Y	N
16	N	Stathakis Janitorial service for Mulholland	\$0	\$17,347.32/year	11/1/26 - 10/31/29	Y	New Provider
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-ARENAC BEHAVIORAL HEALTH AUTHORITY

POLICIES AND PROCEDURES MANUAL

Chapter: 4			
Section:			
Topic:	Gender Affirming Health Care		
Page: 1 of 2	Supersedes Date:	Approval Date:	
	Pol:	Pol:	<i>Board Chairperson Signature</i>
	Proc:	Proc:	<i>Chief Executive Officer Signature</i>
Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 9/1/2026. For controlled copy, view Agency Manuals - Medworxx on the BABHA Intranet site.			

DO NOT WRITE IN SHADED AREA ABOVE

Policy

It is the policy of Bay-Arenac Behavioral Health Authority (BABHA) to balance identity-focused care with comprehensive psychiatric treatment, including assessment, treatment planning, counseling, crisis intervention, care coordination, referral, and support services that are within the organization's authorized scope of services. BABHA will respond to related matters in a neutral, respectful, clinically appropriate, trauma-informed, and person-centered manner consistent with evidenced-based medical practices.

BABHA does not take an advocacy position for or against gender-affirming care for minors. BABHA acknowledges the essential role and legal rights of parents and guardians in taking action to ensure the well-being of children and adolescents in their care while honoring their expressed gender identity and appropriate youth self-advocacy consistent with prevailing federal and state requirements.

Purpose (mandatory)

The purpose of this policy is to establish a consistent, respectful, clinically appropriate, and legally compliant approach for service providers when responding to requests, questions, assessments, treatment planning needs, referrals, documentation, or services related to gender-affirming care.

This policy applies to all clinical and non-clinical employees, contractors, volunteers, students, providers, and other individuals acting on behalf of the organization when interacting with individuals served, families, guardians, advocates, community partners, payers, access centers, hospitals, primary care providers, specialty providers, or other stakeholders regarding gender-affirming care or related behavioral health needs.

Education Applies to:

- ☒ All BABHA Staff
- ☐ Selected BABHA Staff, as follows:
- ☐ All Contracted Providers: ☐ Policy Only ☐ Policy and Procedure
- ☐ Selected Contracted Providers, as follows:
 - ☐ Policy Only ☐ Policy and Procedure

BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

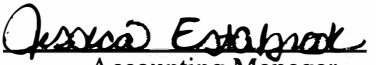
Chapter: 4			
Section:			
Topic:	Gender Affirming Health Care		
Page: 2 of 2	Supersedes Date:	Approval Date:	<i>Board Chairperson Signature</i>
	Pol:	Pol:	<i>Chief Executive Officer Signature</i>
Proc:			
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SUBMISSION FORM				
AUTHOR/ REVIEWER	APPROVING BODY/COMMITTEE/ SUPERVISOR	APPROVAL /REVIEW DATE	ACTION (Deletion, New, No Changes, Replacement or Revision)	REASON FOR ACTION - If replacement list policy to be replaced
C. Pinter	C. Pinter	9/1/26	NEW	

**Bay-Arenac Behavioral Health
Financial Statements
For Period Ending 9/30/2026**

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	September 30, 2026	Sept 30, 2025	
2	<u>Current Assets</u>			
3	Cash and cash equivalents	\$5,891,851.79	\$4,977,204.09	
4	Consumer and insurance receivables	226,880.19	222,608.46	
5	Due from other governmental units	4,851,307.24	7,373,116.91	
6	Contract and other receivables	520,833.02	204,672.26	
7	Interest receivable	0.00	0.00	
8	Prepaid items	588,525.99	550,641.43	
9	Total Current Assets	12,079,398.23	13,328,243.15	(3+4+5+6+7+8)
10	Noncurrent Assets			
11	<u>Cash and cash Equivalents - restricted</u>			
12	Restricted for compensated absences	1,553,093.77	1,534,594.77	
13	Restricted temporarily - other	92,499.03	96,790.49	
14	Cash and Cash Equivalents - restricted	1,645,592.80	1,631,385.26	(12+13)
15	<u>Capital Assets</u>			
16	Capital assets - land	424,500.00	424,500.00	
17	Capital assets - depreciable, net	5,736,221.02	6,176,859.27	
18	Capital assets - construction in progress	-	-	
19	GASB 87 Right to Use Bldg	2,065,688.58	2,065,688.58	
20	GASB 87 Accum Depr, Lease Amortization	(723,744.92)	(723,744.92)	
21	Accumulated depreciation	(3,614,425.46)	(4,067,067.78)	
22	Capital Asset, net	3,888,239.22	3,876,235.15	(16+17+18+19+20+21)
23	Total Noncurrent Assets	5,533,832.02	5,507,620.41	(14+22)
24	TOTAL ASSETS	17,613,230.25	18,835,863.56	(9+23)
25	LIABILITIES			
26	<u>Current Liabilities</u>			
27	Accounts payable	(8,126.87)	4,328,966.97	
28	Accrued wages and payroll related liabilities	390,048.66	512,532.84	
29	Other accrued liabilities	4,068,052.01	837,694.56	
30	Due to other governmental units	231,422.96	185,683.11	
31	Deferred Revenue	3,931.44	3,948.13	
32	Current portion of long term debt	17,280.78	17,280.78	
33	Other current liabilities	-	-	
34	Total Current Liabilities	4,702,608.98	5,886,106.39	(27+28+29+30+31+32+33)
35	<u>Noncurrent Liabilities</u>			
36	Long term debt, net of current portion	195,596.62	212,854.20	
37	GASB 87 Noncurrent Lease Liability	1,209,473.08	1,209,473.08	
38	Compensated absences	1,508,792.23	1,587,891.24	
39	Total Noncurrent Liabilities	2,913,861.93	3,010,218.52	(36+37+38)
40	TOTAL LIABILITIES	7,616,470.91	8,896,324.91	(34+39)
41	NET ASSETS			
42	<u>Fund Balance</u>			
43	Restricted for capital purposes	3,966,653.00	3,966,653.00	
44	Unrestricted fund balance - PBIP	3,696,831.56	3,258,465.99	
45	Unrestricted fund balance	2,333,274.78	2,714,419.66	
46	Total Net Assets	\$9,996,759.34	\$9,939,538.65	(43+44+45) and (24-40)

Bay Arenac Behavioral Health
For the Month Ending September 30, 2026
Summary of All Units

Column Identifiers							
A	B	C	D	E	F	G	
	September Actual	2026 YTD Actual	2026 YTD Budget	(C-D) Variance	(C / D) % to Budget	2026 Monthly Budget	
Income Statement							
1	REVENUE						
2	Risk Contract Revenue						
3	Medicaid Specialty Supports & Services	701,540.18	58,559,757.63	59,555,003.28	(995,245.65)	98%	4,789,968.00
4	Medicaid Autism	7,090,885.40	16,247,156.60	16,468,269.73	(221,113.13)	99%	967,240.75
5	State Genl Fund Priority Population	135,504.00	1,626,054.00	1,686,054.00	(60,000.00)	96%	135,504.50
6	GF Shared Savings Lapse	0.00	0.00	0.00	0.00	0%	0.00
7	Total Risk Contract Revenue	7,927,929.58	76,432,968.23	77,709,327.01	(1,276,358.78)	98%	5,892,713.25 (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	36,237.11	411,365.28	465,704.44	(54,339.16)	88%	32,511.17
11	Total Program Service Revenue	36,237.11	411,365.28	465,704.44	(54,339.16)	88%	32,511.17 (9+10)
12	Other Revenue						
13	Grants and Earned Contracts	200,728.86	1,612,070.60	1,500,389.21	111,681.39	107%	153,081.67
14	SSI Reimbursements, 1st/3rd Party	6,645.00	79,403.00	79,335.60	67.40	100%	6,152.00
15	County Appropriation	65,587.83	787,053.96	787,053.96	0.00	100%	65,587.87
16	Interest Income - Working Capital	10,739.90	178,136.28	181,780.94	(3,644.66)	98%	21,983.08
17	Other Local Income	685.00	462,866.95	464,086.19	(1,219.24)	100%	37,501.33
18	Total Other Revenue	284,386.59	3,119,530.79	3,012,645.90	106,884.89	104%	284,305.96 (13+14+15+16+17)
19	TOTAL REVENUE	8,248,553.28	79,963,864.30	81,187,677.35	(1,223,813.05)	98%	6,209,530.37 (7+11+18)
20	EXPENSE						
21	SUPPORTS & SERVICES						
22	Provider Claims						
23	State Facility - Local portion	28,525.49	185,025.60	183,237.52	(1,788.08)	101%	12,877.00
24	Community Hospital	694,943.96	6,818,743.31	6,821,129.05	2,385.74	100%	638,777.67
25	Residential Services	1,432,208.60	17,779,798.26	17,874,578.46	94,780.20	99%	1,227,007.42
26	Community Supports	2,574,269.31	31,041,676.16	31,610,677.01	569,000.85	98%	2,263,395.33
27	Total Provider Claims	4,729,947.36	55,825,243.33	56,489,622.04	664,378.71	99%	4,142,057.42 (23+24+25+26)
28	Operating Expenses						
29	Salaries	886,180.83	14,959,694.38	15,373,452.01	413,757.63	97%	1,234,818.00
30	Fringe Benefits	387,112.72	4,779,980.51	4,803,064.75	23,084.24	100%	405,910.42
31	Consumer Related	602.20	30,628.90	34,051.59	3,422.69	90%	2,062.67
32	Program Operations	193,139.95	1,654,053.30	1,656,524.07	2,470.77	100%	137,862.79
33	Facility Cost	153,360.19	820,253.83	818,879.89	(1,373.94)	100%	43,321.83
34	Purchased Services	1,448.50	13,251.69	12,174.82	(1,076.87)	109%	1,864.83
35	Other Operating Expense	129,449.31	1,456,937.17	1,460,531.36	3,594.19	100%	154,368.75
36	Local Funds Contribution	17,906.00	214,872.00	214,867.20	(4.80)	100%	17,905.58
37	Interest Expense	582.36	7,125.94	7,153.46	27.52	100%	640.83
38	Depreciation	12,287.72	144,602.56	143,185.18	(1,417.38)	101%	13,360.33
39	Total Operating Expenses	1,782,069.78	24,081,400.28	24,523,884.33	442,484.05	98%	2,012,116.04 (29+30+31+32+33+34+35+36+37+38)
40	TOTAL EXPENSES	6,512,017.14	79,906,643.61	81,013,506.37	1,106,862.76	99%	6,154,173.46 (27+39)
41	NET SURPLUS/(DEFICIT)	1,736,536.14	57,220.69	174,170.98	(116,950.29)	33%	55,356.92 (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	BASED ON PEPM FUNDING:						
45	Net Medicaid (shortage): (\$13,069,564)						
46	Medicaid (shortage): (\$4,209,754)						
47	Healthy Michigan (shortage): (\$2,028,703)						
48	Autism (shortage): (\$6,831,107)						
49	BASED ON APPROVED BUDGET:						
50	Net Medicaid (shortage): (\$6,352,292)						
51	Medicaid (shortage): (\$2,568,890)						
52	Healthy Michigan surplus: \$548,843						
53	Autism (shortage): (\$4,332,245)						

**BAY-ARENAC BEHAVIORAL HEALTH
RECONCILIATION OF FUND BALANCE
AS OF SEPTEMBER 30, 2026**

	TOTALS
Fund Balance 09/30/2025	9,939,538.65
Net (loss)/income September 2026	57,220.69
Net Increase/(Decrease) Funds Restricted for Capital Purposes	<u>-</u>
Calculated Fund Balance 9/30/2026	9,996,759.34
Statement of Net Assets Fund Balance 9/30/2026	9,996,759.34
Difference	-

**BAY-ARENAC BEHAVIORAL HEALTH
RECONCILIATION OF UNRESTRICTED FUND BALANCE
AS OF SEPTEMBER 30, 2026**

	<u>TOTALS</u>
Unrestricted Fund Balance 9/30/2025	5,972,885.65
Net (loss)/income September 2026	57,220.69
Increase/Decrease in net assets	<u>-</u>
Calculated Unrestricted Fund Balance 9/30/2026	6,030,106.34
Statement of Net Assets Unrestricted Fund Balance 9/30/2026	6,030,106.34
Difference	-

**BAY-ARENAC BEHAVIORAL HEALTH
RECONCILIATION OF FUND BALANCE
AS OF SEPTEMBER 30, 2026**

	TOTALS
Fund Balance 09/30/2025	9,939,538.65
Net (loss)/income September 2026	57,220.69
Net Increase/(Decrease) Funds Restricted for Capital Purposes	<u>-</u>
Calculated Fund Balance 9/30/2026	9,996,759.34
Statement of Net Assets Fund Balance 9/30/2026	9,996,759.34
Difference	-

**BAY-ARENAC BEHAVIORAL HEALTH
RECONCILIATION OF UNRESTRICTED FUND BALANCE
AS OF SEPTEMBER 30, 2026**

	<u>TOTALS</u>
Unrestricted Fund Balance 9/30/2025	5,972,885.65
Net (loss)/income September 2026	57,220.69
Increase/Decrease in net assets	<u>-</u>
Calculated Unrestricted Fund Balance 9/30/2026	6,030,106.34
Statement of Net Assets Unrestricted Fund Balance 9/30/2026	6,030,106.34
Difference	-

**Bay-Arenac Behavioral Health
Fund Balance Summary**

	Sept. 30, 2025 Unrestricted <u>Fund Balance</u>	Sept. 30, 2026 Permanently <u>Restricted</u>	Sept. 30, 2026 Temporarily <u>Restricted</u>	Sept. 30, 2026 Unrestricted/ <u>Reserved</u>	Sept. 30, 2026 Total <u>Fund Balance</u>
Unrestricted	2,714,420	-	-	2,333,275	2,333,275
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>3,258,466</u>	<u>-</u>	<u>-</u>	<u>3,696,832</u>	<u>3,696,832</u>
Balances	9,939,539	-	-	9,996,759	9,996,759

BAY-ARENAC BEHAVIORAL HEALTH
Cash Flow

	<u>Sep 26</u>	<u>Oct 26</u>	<u>Nov 26</u>	<u>Dec 26</u>	<u>Jan 27</u>	<u>Feb 27</u>	<u>Mar 27</u>	<u>Apr 27</u>	<u>May 27</u>	<u>Jun 27</u>	<u>27-Jul</u>	<u>27-Aug</u>	<u>27-Sep</u>
Estimated Funds:													
Beginning Inv. Balance	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment	-	-	-	-	-	-	-	-	-	-	-	-	-
Additions/(Subtractions)	-	-	-	-	-	-	-	-	-	-	-	-	-
Month End Inv. Balance	-	-	-	-	-	-	-	-	-	-	-	-	-
Beginning Cash Balance	7,726,154	6,701,400	9,991,021	9,046,564	8,274,785	6,379,044	5,437,407	4,662,808	3,774,887	2,830,430	2,058,651	3,679,051	2,853,555
Total Medicaid	5,155,831	5,334,085	5,334,085	5,334,085	5,334,085	5,334,085	5,334,085	5,334,085	5,334,085	5,334,085	5,334,085	5,334,085	5,334,085
Total General Fund	135,504	135,504	135,505	135,504	135,504	135,505	135,504	135,504	135,505	135,504	135,504	135,504	135,504
Estimated Misc. Receipts	24,531	89,759	89,759	205,900	89,759	89,759	205,900	89,759	89,759	205,900	205,900	205,900	205,900
Client Receipts	8,569	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	10,688	13,508	10,688	13,508	10,688	13,508	10,688	13,508	10,688	13,508	10,688	13,508	10,688
Total Estimated Cash	13,061,277	12,329,255	15,616,058	14,790,562	13,899,821	12,006,901	11,178,585	10,290,664	9,399,924	8,574,428	7,799,828	9,423,049	8,594,733
Total Estimated Available Funds	13,061,277	12,329,255	15,616,058	14,790,562	13,899,821	12,006,901	11,178,585	10,290,664	9,399,924	8,574,428	7,799,828	9,423,049	8,594,733
Estimated Expenditures:													
1st Payroll	610,000	605,000	605,000	605,000	605,000	605,000	605,000	605,000	605,000	605,000	605,000	605,000	605,000
Special Pay													
ETO Buyouts													
2nd Payroll	610,000	605,000	605,000	605,000	605,000	605,000	605,000	605,000	605,000	605,000	605,000	605,000	605,000
Board Per Diem	2,160	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					605,000						605,000		
1st Friday Claims	772,032	772,032	772,032	772,032	772,032	772,032	772,032	772,032	772,032	772,032	772,032	772,032	772,032
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	1,764,862	1,764,862	1,764,862	1,764,862	1,764,862	1,764,862	1,764,862	1,764,862	1,764,862	1,764,862	1,764,862	1,764,862	1,764,862
Board Week Bay Batch	646,447	646,447	1,023,989	1,023,989	1,023,989	1,023,989	1,023,989	1,023,989	1,023,989	1,023,989	1,023,989	1,023,989	1,023,989
Board Week Claims	1,087,825	875,000	875,000	875,000	875,000	875,000	875,000	875,000	875,000	875,000	875,000	875,000	875,000
Credit Card	-	-	-	-	-	-	-	-	-	-	-	-	-
4th Friday Claims	864,519	864,519	864,519	864,519	864,519	864,519	864,519	864,519	864,519	864,519	864,519	864,519	864,519
5th Friday Claims		400,000			400,000								
Local FFP payment to MSHN			53,717			53,717			53,717			53,717	
Transfer to State of MI													
Transfer from/(to) Reserve Account													
Settlement with MSHN													
Funds (from) MSHN		(4,200,000)									(3,000,000)		
Transfer to (from) HRA													
Transfer to (from) Investment													
Transfer to (from) Capital Acct													
Total Estimated Expenditures	6,359,877	2,338,235	6,569,494	6,515,777	7,520,777	6,569,494	6,515,777	6,515,777	6,569,494	6,515,777	4,120,777	6,569,494	6,515,777
Estimated Month End Cash Balance	6,701,400	9,991,021	9,046,564	8,274,785	6,379,044	5,437,407	4,662,808	3,774,887	2,830,430	2,058,651	3,679,051	2,853,555	2,078,956

Bay-Arenac Behavioral Health

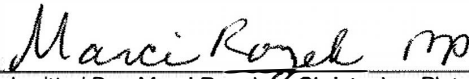
Cash Flow Forecasting For the Month of October

	<u>Bank Balance</u>	<u>Investment Balance</u>
Estimated Cash Balance October 1, 2026	6,701,400	-
Investment Purchased/Interest	-	-
Investments coming due during month	-	-
Estimated Cash Balance October 31, 2026	6,701,400	-
 Estimated Cash Inflow:		
Medicaid Funds:	5,334,085	
General Fund Dollars:	135,504	
Board Receipts:	89,759	
Client Receipts:	55,000	
Funds from Investment:	-	
Interest:	13,508	
Total Estimated Cash Inflow:	5,627,857	
 Estimated Cash Outflow:		
Payroll Dated: 10/09/26	(605,000)	
Payroll Dated: 10/23/26	(605,000)	
Board Per Diem Payroll:	(3,343)	
Payroll Dated:	-	
 Claims Disbursements: 10/02/26	(772,032)	
Claims Disbursements: 10/09/26	(1,764,862)	
Claims Disbursements: 10/16/26	(875,000)	
A/P Disbursements: 10/16/26	(646,447)	
Mortgage Payment: 10/22/26	(2,032)	
Claims Disbursements: 10/23/26	(864,519)	
Claims Disbursements: 10/30/26	(400,000)	
Local FFP Payment:	-	
Transfer to Reserve Acct:	-	
HRA transfer:	-	
Transfer (to)/from MSHN:	4,200,000	
Transfer to State of MI	-	
Purchased Investment	-	
Total Estimated Cash Outflow:	(2,338,235)	
 Estimated Cash Balance on October 31, 2026	9,991,021	-

Bay Arenac Behavioral Health
201 Mulholland, Bay City, MI 48708
Electronic Funds Transfers including Cash Transfers/Wires/ACHs
September 2026

<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	822,860.71	9/4/2026	Transfer Gross Amt of Accts Payable to Payable Acct	Marci Rozek
Flagstar Bank	Flagstar Bank	14,449.18	9/8/2026	Credit Card Payment	Marci Rozek
Flagstar Bank	Flagstar Bank	1,780,391.20	9/10/2026	Transfer Gross Amt of Accts Payable to Payable Acct	Marci Rozek
Flagstar Bank	Huntington Nat'l Bank	610,000.00	9/11/2026	Transfer from General Account to Payroll Account	Marci Rozek
Flagstar Bank	Huntington Nat'l Bank	4,442.51	9/11/2026	Transfer from General Account to Flex Spending Account	Marci Rozek
Flagstar Bank	Flagstar Bank	1,733,099.20	9/17/2026	Transfer Gross Amt of Accts Payable to Payable Acct	Marci Rozek
Flagstar Bank	Huntington Nat'l Bank	2,031.96	9/22/2026	Transfer from General Acct for Mortgage payment	Marci Rozek
Flagstar Bank	Flagstar Bank	605,000.00	9/25/2026	Transfer from General Account to Payroll Account	Marci Rozek
Flagstar Bank	Flagstar Bank	4,549.30	9/25/2026	Transfer from General Account to Flex Spending Account	Marci Rozek
Flagstar Bank	Flagstar Bank	3,690,000.00	9/29/2026	Transfer Gross Amt of General to MMA	Marci Rozek

Total Transfers: 9,266,824.06

 Marci Rozek mp

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
August 2026

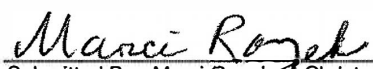
<u>Funds Paid from:</u>	<u>EFT #</u>	<u>Funds Paid to:</u>	<u>Amount</u>	<u>Date of Pmt</u>	<u>Authorized By</u>
Flagstar Bank	E11148	HAVENWYCK HOSPITAL	49.40	9/4/2026	Marci Rozek
Flagstar Bank	E11149	ARNOLD CENTER, INC.	117.92	9/4/2026	Marci Rozek
Flagstar Bank	E11150	Bay Human Services, Inc.	372.78	9/4/2026	Marci Rozek
Flagstar Bank	E11151	LIBERTY LIVING, INC.	53.20	9/4/2026	Marci Rozek
Flagstar Bank	E11152	HEALTHSOURCE	279.70	9/4/2026	Marci Rozek
Flagstar Bank	E11153	MPA GROUP NFP, Ltd.	180.88	9/4/2026	Marci Rozek
Flagstar Bank	E11154	LIST PSYCHOLOGICAL SERVICES	670.32	9/4/2026	Marci Rozek
Flagstar Bank	E11155	SAGINAW PSYCHOLOGICAL SERVICES	58.73	9/4/2026	Marci Rozek
Flagstar Bank	E11156	PARAMOUNT REHABILITATION	158.84	9/4/2026	Marci Rozek
Flagstar Bank	E11157	DO-ALL, INC.	177.00	9/4/2026	Marci Rozek
Flagstar Bank	E11158	TOUCHSTONE SERVICES, INC	161.73	9/4/2026	Marci Rozek
Flagstar Bank	E11159	Nutrition for Wellness	255.73	9/4/2026	Marci Rozek
Flagstar Bank	E11160	WILSON, STUART T. CPA, P.C.	255.57	9/4/2026	Marci Rozek
Flagstar Bank	E11161	CAREBUILDERS AT HOME, LLC	73.72	9/4/2026	Marci Rozek
Flagstar Bank	E11162	AUTISM SYSTEMS LLC	123.20	9/4/2026	Marci Rozek
Flagstar Bank	E11163	CENTRIA HEALTHCARE LLC	47.88	9/4/2026	Marci Rozek
Flagstar Bank	E11164	Flourish Services, LLL	279.38	9/4/2026	Marci Rozek
Flagstar Bank	E11165	GAME CHANGER PEDIATRIC THERAPY	323.55	9/4/2026	Marci Rozek
Flagstar Bank	E11166	Spectrum Autism Center	158.84	9/4/2026	Marci Rozek
Flagstar Bank	E11167	ENCOMPASS THERAPY CENTER LLC	101.08	9/4/2026	Marci Rozek
Flagstar Bank	E11168	MERCY PLUS HEALTHCARE SERVICES LLC	518.26	9/4/2026	Marci Rozek
Flagstar Bank	E11169	AUTISM AND NEURODIVERSITY SERVICES LLC	224.28	9/4/2026	Marci Rozek
Flagstar Bank	E11170	MAXIM HEALTHCARE SEVICES, INC.	44.08	9/4/2026	Marci Rozek
Flagstar Bank	E11171	APS EMPLOYMENT SERVICES, INC	379.24	9/4/2026	Marci Rozek
Flagstar Bank	E11172	PARAMOUNT CHILDRENS THERAPY CENTER INC	40.96	9/4/2026	Marci Rozek
Flagstar Bank	E11173	EYE MED	103.36	9/4/2026	Marci Rozek
Flagstar Bank	E11174	HOLLYWOOD TAXI LLC	67.64	9/4/2026	Marci Rozek
Flagstar Bank	E11175	NETSOURCE ONE, INC.	143.64	9/4/2026	Marci Rozek
Flagstar Bank	E11176	RESERVE ACCOUNT- 15118730	95.30	9/4/2026	Marci Rozek
Flagstar Bank	E11177	HOPE NETWORK BEHAVIORAL HEALTH	194.56	9/11/2026	Marci Rozek
Flagstar Bank	E11178	Hope Network Southeast	318.48	9/11/2026	Marci Rozek
Flagstar Bank	E11179	BEACON SPECIALIZED LIVING SVS	292.83	9/11/2026	Marci Rozek
Flagstar Bank	E11180	Fitzhugh House, LLC	106.70	9/11/2026	Marci Rozek
Flagstar Bank	E11181	Bay Human Services, Inc.	341.12	9/11/2026	Marci Rozek
Flagstar Bank	E11182	MICHIGAN COMMUNITY SERVICES IN	53.07	9/11/2026	Marci Rozek
Flagstar Bank	E11183	LIBERTY LIVING, INC.	51.08	9/11/2026	Marci Rozek
Flagstar Bank	E11184	SUPERIOR CARE OF MICHIGAN LLC	359.78	9/11/2026	Marci Rozek
Flagstar Bank	E11185	Closer to Home, LLC	319.96	9/11/2026	Marci Rozek
Flagstar Bank	E11186	HEALTHSOURCE	2,617.65	9/11/2026	Marci Rozek
Flagstar Bank	E11187	PHC OF MICHIGAN - HARBOR OAKS	341.00	9/11/2026	Marci Rozek
Flagstar Bank	E11188	MPA GROUP NFP, Ltd.	3,092.00	9/11/2026	Marci Rozek
Flagstar Bank	E11189	LIST PSYCHOLOGICAL SERVICES	62.26	9/11/2026	Marci Rozek
Flagstar Bank	E11190	SAGINAW PSYCHOLOGICAL SERVICES	102.29	9/11/2026	Marci Rozek
Flagstar Bank	E11191	PARAMOUNT REHABILITATION	50.00	9/11/2026	Marci Rozek
Flagstar Bank	E11192	DO-ALL, INC.	2,011.00	9/11/2026	Marci Rozek
Flagstar Bank	E11193	Winningham, Linda Jo	7,312.76	9/11/2026	Marci Rozek
Flagstar Bank	E11194	WILSON, STUART T. CPA, P.C.	444.20	9/11/2026	Marci Rozek
Flagstar Bank	E11195	CAREBUILDERS AT HOME, LLC	14.00	9/11/2026	Marci Rozek
Flagstar Bank	E11196	CENTRIA HEALTHCARE LLC	1,754.94	9/11/2026	Marci Rozek
Flagstar Bank	E11197	Flourish Services, LLL	50,916.67	9/11/2026	Marci Rozek
Flagstar Bank	E11198	GAME CHANGER PEDIATRIC THERAPY	99,682.00	9/11/2026	Marci Rozek
Flagstar Bank	E11199	Spectrum Autism Center	161.45	9/11/2026	Marci Rozek
Flagstar Bank	E11200	ENCOMPASS THERAPY CENTER LLC	135.00	9/11/2026	Marci Rozek
Flagstar Bank	E11201	MERCY PLUS HEALTHCARE SERVICES LLC	33,180.76	9/11/2026	Marci Rozek
Flagstar Bank	E11202	Positive Behavior Supports Corporation	1,075.00	9/11/2026	Marci Rozek
Flagstar Bank	E11203	AUTISM AND NEURODIVERSITY SERVICES LLC	101.83	9/11/2026	Marci Rozek
Flagstar Bank	E11204	HEALING WITH HEART	333.50	9/11/2026	Marci Rozek
Flagstar Bank	E11205	APS EMPLOYMENT SERVICES, INC	5,440.18	9/11/2026	Marci Rozek
Flagstar Bank	E11206	MONTCLAIR SPECIALIZED RESIDENTIAL LLC	40,936.49	9/11/2026	Marci Rozek
Flagstar Bank	E11207	PARAMOUNT CHILDRENS THERAPY CENTER INC	711.24	9/11/2026	Marci Rozek
Flagstar Bank	E11208	KEITH SPECIALIZED RESIDENTIAL SERVICES LL	367.86	9/11/2026	Marci Rozek
Flagstar Bank	E11209	A GLOBAL HOMECARE	300.00	9/11/2026	Marci Rozek
Flagstar Bank	E11210	RUSTIC RIDGE SPECIALIZED RESIDENTIAL SER	240.15	9/11/2026	Marci Rozek
Flagstar Bank	E11211	RESERVE ACCOUNT- 15118730	590.00	9/11/2026	Marci Rozek
Flagstar Bank	E11212	HOPE NETWORK BEHAVIORAL HEALTH	735.09	9/18/2026	Marci Rozek

Flagstar Bank	E11213	ARNOLD CENTER, INC.	5,100.00	9/18/2026	Marci Rozek
Flagstar Bank	E11214	Bay Human Services, Inc.	15,700.00	9/18/2026	Marci Rozek
Flagstar Bank	E11215	CENTRAL STATE COMM. SERVICES	700.00	9/18/2026	Marci Rozek
Flagstar Bank	E11216	LIBERTY LIVING, INC.	247.17	9/18/2026	Marci Rozek
Flagstar Bank	E11217	HEALTHSOURCE	38.51	9/18/2026	Marci Rozek
Flagstar Bank	E11218	MPA GROUP NFP, Ltd.	272.84	9/18/2026	Marci Rozek
Flagstar Bank	E11219	SAGINAW PSYCHOLOGICAL SERVICES	8,069.95	9/18/2026	Marci Rozek
Flagstar Bank	E11220	DO-ALL, INC.	7,362.79	9/18/2026	Marci Rozek
Flagstar Bank	E11221	New Dimensions	6,323.93	9/18/2026	Marci Rozek
Flagstar Bank	E11222	Winningham, Linda Jo	16.86	9/18/2026	Marci Rozek
Flagstar Bank	E11223	Nutrition for Wellness	9,907.00	9/18/2026	Marci Rozek
Flagstar Bank	E11224	WILSON, STUART T. CPA, P.C.	23,322.98	9/18/2026	Marci Rozek
Flagstar Bank	E11225	CAREBUILDERS AT HOME, LLC	400.00	9/18/2026	Marci Rozek
Flagstar Bank	E11226	CENTRIA HEALTHCARE LLC	85.32	9/18/2026	Marci Rozek
Flagstar Bank	E11227	Flourish Services, LLL	57.56	9/18/2026	Marci Rozek
Flagstar Bank	E11228	GAME CHANGER PEDIATRIC THERAPY	6,815.12	9/18/2026	Marci Rozek
Flagstar Bank	E11229	Spectrum Autism Center	398.95	9/18/2026	Marci Rozek
Flagstar Bank	E11230	ENCOMPASS THERAPY CENTER LLC	1,657.10	9/18/2026	Marci Rozek
Flagstar Bank	E11231	MERCY PLUS HEALTHCARE SERVICES LLC	400.00	9/18/2026	Marci Rozek
Flagstar Bank	E11232	NOBLE PATHWAY PEDIATRIC THERAPY	33.33	9/18/2026	Marci Rozek
Flagstar Bank	E11233	MAXIM HEALTHCARE SEVICES, INC.	155.22	9/18/2026	Marci Rozek
Flagstar Bank	E11234	APS EMPLOYMENT SERVICES, INC	104.26	9/18/2026	Marci Rozek
Flagstar Bank	E11235	PARAMOUNT CHILDRENS THERAPY CENTER INC	162.57	9/18/2026	Marci Rozek
Flagstar Bank	E11236	BETTER LIVING AFC LLC	162.64	9/18/2026	Marci Rozek
Flagstar Bank	E11237	ASSISTANCE TO INDEPENDENCE HOME CARE S	251.79	9/18/2026	Marci Rozek
Flagstar Bank	E11238	LISTENING EAR CRISIS CENTER	316.92	9/18/2026	Marci Rozek
Flagstar Bank	E11239	Banaszak, Tim	215.33	9/18/2026	Marci Rozek
Flagstar Bank	E11240	BICKEL, MEREDITH	286.44	9/18/2026	Marci Rozek
Flagstar Bank	E11241	BINKLEY, CASEY	31.16	9/18/2026	Marci Rozek
Flagstar Bank	E11242	Brothers-Estrada, Abbie	18.24	9/18/2026	Marci Rozek
Flagstar Bank	E11243	Bryan, Kelly	62.32	9/18/2026	Marci Rozek
Flagstar Bank	E11244	BYRNE, RICHARD	56.24	9/18/2026	Marci Rozek
Flagstar Bank	E11245	Castillo, Mariah	323.71	9/18/2026	Marci Rozek
Flagstar Bank	E11246	COOK, BRIANNA	154.46	9/18/2026	Marci Rozek
Flagstar Bank	E11247	Deshano, Jennifer	445.02	9/18/2026	Marci Rozek
Flagstar Bank	E11248	GRUSNICK, ASHLEE	105.60	9/18/2026	Marci Rozek
Flagstar Bank	E11249	VIAN, SUSAN	170.00	9/18/2026	Marci Rozek
Flagstar Bank	E11250	HARANDA, AUBREE	247.85	9/18/2026	Marci Rozek
Flagstar Bank	E11251	HARDY, PRINCESS	127.68	9/18/2026	Marci Rozek
Flagstar Bank	E11252	HECHT, KERENSA	415.93	9/18/2026	Marci Rozek
Flagstar Bank	E11253	HEWTTY, MARIA	108.03	9/18/2026	Marci Rozek
Flagstar Bank	E11254	KING, SHELLEY	150.02	9/18/2026	Marci Rozek
Flagstar Bank	E11255	Lagalo, Lori	1,230.33	9/18/2026	Marci Rozek
Flagstar Bank	E11256	Lemiesz, Rachel	9,402.10	9/18/2026	Marci Rozek
Flagstar Bank	E11257	Louks, Justin	19,778.55	9/18/2026	Marci Rozek
Flagstar Bank	E11258	LUPCKE, TRACI	75,676.76	9/18/2026	Marci Rozek
Flagstar Bank	E11259	BEYER, NICOLE	8,030.24	9/18/2026	Marci Rozek
Flagstar Bank	E11260	McClure, Laurel	1,765.60	9/18/2026	Marci Rozek
Flagstar Bank	E11261	MCFARLAND, PATRICK J.	21,816.00	9/18/2026	Marci Rozek
Flagstar Bank	E11262	WALKER, DEIDRA	669.25	9/18/2026	Marci Rozek
Flagstar Bank	E11263	Musselman, Amy	24,487.41	9/18/2026	Marci Rozek
Flagstar Bank	E11264	Niemiec, Kathleen	3,565.96	9/18/2026	Marci Rozek
Flagstar Bank	E11265	NIX, HEATHER	23,787.57	9/18/2026	Marci Rozek
Flagstar Bank	E11266	O'BRIEN, CAROLE	1,768.00	9/18/2026	Marci Rozek
Flagstar Bank	E11267	Rechsteiner, Elise	9,752.29	9/18/2026	Marci Rozek
Flagstar Bank	E11268	RICKER, AMY	11,367.03	9/18/2026	Marci Rozek
Flagstar Bank	E11269	Rooker, Stephani	1,279.00	9/18/2026	Marci Rozek
Flagstar Bank	E11270	Schneider, Maryssa	458.20	9/18/2026	Marci Rozek
Flagstar Bank	E11271	Schumacher, Pamela	110,333.88	9/18/2026	Marci Rozek
Flagstar Bank	E11272	Smith, Alexis	51,881.01	9/18/2026	Marci Rozek
Flagstar Bank	E11273	Tenney, Ben	14,565.18	9/18/2026	Marci Rozek
Flagstar Bank	E11274	VanWert, Laurie	61,059.00	9/18/2026	Marci Rozek
Flagstar Bank	E11275	VASCONCELOS, FLAVIA	4,601.00	9/18/2026	Marci Rozek
Flagstar Bank	E11276	WATSON, MELODY	73,533.00	9/18/2026	Marci Rozek
Flagstar Bank	E11277	Bay Human Services, Inc.	29,827.50	9/18/2026	Marci Rozek
Flagstar Bank	E11278	SAGINAW PSYCHOLOGICAL SERVICES	68,592.56	9/18/2026	Marci Rozek
Flagstar Bank	E11279	A2Z CLEANING & RESTORATION INC.	11,904.00	9/18/2026	Marci Rozek
Flagstar Bank	E11280	Applied Innovation	440.00	9/18/2026	Marci Rozek
Flagstar Bank	E11281	ARENAC COUNTY INDEPENDENT 0011 0248	491.52	9/18/2026	Marci Rozek
Flagstar Bank	E11282	Bromberg & Associates, LLC	6,051.34	9/18/2026	Marci Rozek
Flagstar Bank	E11283	Clean Team, Inc.	24,330.00	9/18/2026	Marci Rozek
Flagstar Bank	E11284	ENTERPRISE FM TRUST	1,188.55	9/18/2026	Marci Rozek
Flagstar Bank	E11285	FLEX ADMINISTRATORS INC	286.56	9/18/2026	Marci Rozek
Flagstar Bank	E11286	Griffin Transit	555.20	9/18/2026	Marci Rozek
Flagstar Bank	E11287	HAMPTON AUTO REPAIR	10,118.01	9/18/2026	Marci Rozek

Flagstar Bank	E11288	HOSPITAL PSYCHIATRY PLLC	3,092.00	9/18/2026	Marci Rozek
Flagstar Bank	E11289	Iris Telehealth Medical Group, PA	202.34	9/18/2026	Marci Rozek
Flagstar Bank	E11290	KING COMMUNICATIONS	50.00	9/18/2026	Marci Rozek
Flagstar Bank	E11291	McCoy Heating and Cooling	125.40	9/18/2026	Marci Rozek
Flagstar Bank	E11292	NETSOURCE ONE, INC.	1,950.00	9/18/2026	Marci Rozek
Flagstar Bank	E11293	New Dimensions, Inc.	7,312.76	9/18/2026	Marci Rozek
Flagstar Bank	E11294	RINGCENTRAL INC	444.20	9/18/2026	Marci Rozek
Flagstar Bank	E11295	SHRED EXPERTS LLC	78.87	9/18/2026	Marci Rozek
Flagstar Bank	E11296	Staples	200.46	9/18/2026	Marci Rozek
Flagstar Bank	E11297	STATE OF MICHIGAN DEPT OF COMM HEALTH A	50,916.67	9/18/2026	Marci Rozek
Flagstar Bank	E11298	STINSON, TAYLA	105,534.35	9/18/2026	Marci Rozek
Flagstar Bank	E11299	TUGGLE, STACI	129,181.00	9/18/2026	Marci Rozek
Flagstar Bank	E11300	V.O.I.C.E., INC.	160.80	9/18/2026	Marci Rozek
Flagstar Bank	E11301	Waystar Health - ZirMed, Inc.	12,000.00	9/18/2026	Marci Rozek
Flagstar Bank	E11302	Yeo & Yeo Technology	31,122.00	9/18/2026	Marci Rozek
Flagstar Bank	E11303	ZOOM VIDEO COMMUNICATIONS INC	860.00	9/18/2026	Marci Rozek
Flagstar Bank	E11304	HAVENWYCK HOSPITAL	68.40	9/25/2026	Marci Rozek
Flagstar Bank	E11305	BEACON SPECIALIZED LIVING SVS	47.88	9/25/2026	Marci Rozek
Flagstar Bank	E11306	Fitzhugh House, LLC	460.32	9/25/2026	Marci Rozek
Flagstar Bank	E11307	ARNOLD CENTER, INC.	41.95	9/25/2026	Marci Rozek
Flagstar Bank	E11308	Bay Human Services, Inc.	534.50	9/25/2026	Marci Rozek
Flagstar Bank	E11309	MICHIGAN COMMUNITY SERVICES IN	5,933.43	9/25/2026	Marci Rozek
Flagstar Bank	E11310	LIBERTY LIVING, INC.	15,736.97	9/25/2026	Marci Rozek
Flagstar Bank	E11311	Lansing Senior Partners, LLC	28.58	9/25/2026	Marci Rozek
Flagstar Bank	E11312	HEALTHSOURCE	1,082.30	9/25/2026	Marci Rozek
Flagstar Bank	E11313	CEDAR CREEK HOSPITAL	1,158.00	9/25/2026	Marci Rozek
Flagstar Bank	E11314	PHC OF MICHIGAN - HARBOR OAKS	412.82	9/25/2026	Marci Rozek
Flagstar Bank	E11315	MPA GROUP NFP, Ltd.	758.00	9/25/2026	Marci Rozek
Flagstar Bank	E11316	LIST PSYCHOLOGICAL SERVICES	735.09	9/25/2026	Marci Rozek
Flagstar Bank	E11317	SAGINAW PSYCHOLOGICAL SERVICES	88,206.21	9/25/2026	Marci Rozek
Flagstar Bank	E11318	DO-ALL, INC.	18.75	9/25/2026	Marci Rozek
Flagstar Bank	E11319	New Dimensions	10,497.30	9/25/2026	Marci Rozek
Flagstar Bank	E11320	TOUCHSTONE SERVICES, INC	33,235.66	9/25/2026	Marci Rozek
Flagstar Bank	E11321	Winningham, Linda Jo	194,162.16	9/25/2026	Marci Rozek
Flagstar Bank	E11322	WILSON, STUART T. CPA, P.C.	1,178.04	9/25/2026	Marci Rozek
Flagstar Bank	E11323	CAREBUILDERS AT HOME, LLC	257.17	9/25/2026	Marci Rozek
Flagstar Bank	E11324	AUTISM SYSTEMS LLC	66,037.99	9/25/2026	Marci Rozek
Flagstar Bank	E11325	CENTRIA HEALTHCARE LLC	2,207.00	9/25/2026	Marci Rozek
Flagstar Bank	E11326	Flourish Services, LLL	26,719.28	9/25/2026	Marci Rozek
Flagstar Bank	E11327	GAME CHANGER PEDIATRIC THERAPY	7,854.00	9/25/2026	Marci Rozek
Flagstar Bank	E11328	Spectrum Autism Center	1,403.00	9/25/2026	Marci Rozek
Flagstar Bank	E11329	ENCOMPASS THERAPY CENTER LLC	28,206.48	9/25/2026	Marci Rozek
Flagstar Bank	E11330	MERCY PLUS HEALTHCARE SERVICES LLC	30,966.99	9/25/2026	Marci Rozek
Flagstar Bank	E11331	Positive Behavior Supports Corporation	3,066.16	9/25/2026	Marci Rozek
Flagstar Bank	E11332	AUTISM AND NEURODIVERSITY SERVICES LLC	10,896.35	9/25/2026	Marci Rozek
Flagstar Bank	E11333	HEALING WITH HEART	26,028.00	9/25/2026	Marci Rozek
Flagstar Bank	E11334	APS EMPLOYMENT SERVICES, INC	1,106.00	9/25/2026	Marci Rozek
Flagstar Bank	E11335	PARAMOUNT CHILDRENS THERAPY CENTER INC	1,110.60	9/25/2026	Marci Rozek
Flagstar Bank	E11336	BETTER LIVING AFC LLC	80,524.68	9/25/2026	Marci Rozek
Flagstar Bank	E11337	APPRECOTS- APPLIED RESEARCH CONSULTAN	16,307.22	9/25/2026	Marci Rozek
Flagstar Bank	E11338	MOVVA, USHA	120.00	9/25/2026	Marci Rozek
Flagstar Bank	E11339	RESERVE ACCOUNT- 15118730	43,282.75	9/25/2026	Marci Rozek
Flagstar Bank	E11340	Strode, Eric	59,016.25	9/25/2026	Marci Rozek
Flagstar Bank	E11341	UNITED PARCEL SERVICE	56,466.28	9/25/2026	Marci Rozek
Flagstar Bank	E11342	WATSON, MELODY	47,735.28	9/25/2026	Marci Rozek

Total Withdrawals:

2,242,675.24

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

October 10, 2026

To: Sara McRae, Executive Assistant to the CEO
 From: Jessica Estabrook, Accounting Manager
 Michele Perry, Finance Manager
 Re: Disbursement Audit Information for Audit Committee

The following is a summary of disbursements as presented:

Administration and Services for Behavioral Health

09/17/26 Checks Sequence: #103131-10189, ACH E11239-E11374

Employee travel, conference	\$ 10,492.76
Purchase Order Invoices	\$ 5,440.18
Invoices for Routine Maintenance, purchase requisitions, & recurring	\$ 630,803.69

SUBTOTAL - Monthly Batch **\$ 646,736.63**

ITEMS FOR REVIEW:

EFT transfer - Credit Card 09/05/2026 **\$ 23,256.50**

Weekly Special Checks:

09/25/2026 Checks 103193-103201, E11337-E11341	\$ 30,468.39
10/02/2026 Checks 103209-103210, E11372-E11380	\$ 80,094.49
10/09/2026 Checks 103211-103217 E11381-E11383	\$ 6,169.85

SUBTOTAL - Special Checks **\$ 116,732.73**

Health Care payments

09/18/26 Checks 103124-103130, ACH Pmts E11212-E11238	\$ 1,087,824.68
09/25/26 Checks 103190-103192, ACH Pmts E11304-E11336	\$ 864,518.51
10/02/26 Checks 103202-103208, ACH Pmts E11343-E11371	\$ 742,800.81
10/09/2026 Checks 103218-103220, ACH Pmts E11384-E11418	\$ 1,517,306.94

SUBTOTAL - Health Care Payments **\$ 4,212,450.94**

TOTAL DISBURSEMENTS **\$ 4,999,176.80**

Prepared by: Jessica Estabrook

Reviewed by: [Signature]



45 Ottawa Avenue SW
Suite 1100
P.O. Box 306
Grand Rapids, MI 49501-0306



NEIL MARCHAND
Attorney at Law

616.831.1764
616.988.1764 fax
marchandn@millerjohnson.com

August 4, 2026

PERSONAL & CONFIDENTIAL

Barry County Community Mental Health Authority
Bay-Arenac Behavioral Health Authority
Berrien County Mental Health Authority d/b/a Riverwood Center
Branch County Community Mental Health Authority d/b/a Pines Behavioral Health Services
Cass County Community Mental Health
Calhoun County Community Mental Health d/b/a Summit Pointe
Community Mental Health and Substance Abuse Services of St. Joseph County d/b/a Pivotal
Community Mental Health for Central Michigan
Community Mental Health Authority of Clinton, Eaton, and Ingham Counties
Gratiot County Community Mental Health Services d/b/a Gratiot Integrated Health Network
Huron County Community Mental Health Authority
Ionia County Community Mental Health Authority d/b/a The Right Door for Hope, Recovery,
and Wellness
Jackson-Hillsdale Community Mental Health Board d/b/a LifeWays
Kalamazoo County Community Health Authority d/b/a Integrated Services of Kalamazoo
Montcalm Center for Behavioral Health d/b/a Montcalm Care Network
Newaygo County Mental Health Authority
Saginaw County Community Mental Health Authority
Shiawassee County Community Mental Health Authority d/b/a Shiawassee Health and
Wellness
Tuscola County Community Mental Health Authority d/b/a Tuscola Behavioral Health Systems
Van Buren Community Mental Health Authority

Dear CEOs and Executive Directors,

Thank you for choosing Miller Johnson to represent you. This letter contains the basic terms of our representation. The terms stated here are supplemented by our **Standard Terms of Engagement**, a copy of which is attached to this letter. Those terms are also important and you should read them closely.

It is our goal to represent you efficiently and effectively. You should be informed about the progress of the representation and comfortable with our services and the people who provide them, so please call us if you ever have a question, suggestion or problem.

August 4, 2026
Page 2

Who Is the Client? Identifying our client is important. Our duty of representation runs to our client, not to any other person. The attorney-client privilege belongs to our client, not to any other person. Our clients are Barry County Community Mental Health Authority, Bay-Arenac Behavioral Health Authority, Berrien County Mental Health Authority d/b/a Riverwood Center, Branch County Community Mental Health Authority d/b/a Pines Behavioral Health Services, Cass County Community Mental Health, Calhoun County Community Mental Health, Community Mental Health and Substance Abuse Services of St. Joseph County d/b/a/ Pivotal, Community Mental Health for Central Michigan, Community Mental Health Authority of Clinton, Eaton, and Ingham Counties, Gratiot County Community Mental Health Services d/b/a Gratiot Integrated Health Network, Huron County Community Mental Health Authority, Ionia County Community Mental Health Authority d/b/a The Right Door for Hope, Recovery, and Wellness, Jackson-Hillsdale Community Mental Health Board d/b/a/ LifeWays, Kalamazoo County Community Health Authority d/b/a Integrated Services of Kalamazoo, Montcalm Center for Behavioral Health d/b/a Montcalm Care Network, Newaygo County Mental Health Authority, Saginaw County Community Mental Health Authority, Shiawassee County Community Mental Health Authority d/b/a Shiawassee Health and Wellness, Tuscola County Community Mental Health Authority d/b/a Tuscola Behavioral Health Systems, and Van Buren Community Mental Health Authority (collectively, “You”).

What Is the Scope of Our Representation? We will be representing you with respect to your discussions and planning for a new regional entity to respond to any request for proposal from the Michigan Department of Health and Human Services.

Joint Representation. Representing you means that we have twenty clients, not one. Representing more than one client can have advantages and disadvantages, which we highlight below.

- *Advantages.* One advantage of a joint representation is that it can often be more efficient and less costly than each of you having separate legal counsel. Also, communications between us and all of you can be protected by the attorney-client privilege. And a joint representation can facilitate the exchange of information and the coordination of strategies and tactics.
- *Disadvantages.*
 - One potential disadvantage is that conflicting interests may develop between some or all of you as the matter develops. Our duty is to exercise our judgment on behalf of all of you without favoring one of you over the other. We are not aware of any conflicting interests that you may have with each other with respect to our representation. But, if you believe at any time that your interests

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Page 3

conflict with the others, please contact us immediately. We will also promptly contact you if we independently believe that a conflict may arise.

- Two other potential disadvantages in a joint representation is that any of you might feel that we are treating the other(s) better, and that you might feel that the other(s) is/are exerting greater influence over our judgment.
- *The Alternative.* These disadvantages of joint representation would not exist if each of you were to hire your own legal counsel. If each of you had your own separate legal counsel, each of you would have full control over the relationship with your own legal counsel. You would have no reason for concern about whether we may develop divided loyalties among you as our joint clients.
- *Contact Us.* If you feel at any time that our representation is unbalanced in any way, please let us know immediately. Each of you may terminate your participation in this joint representation at any time by giving us written notice.
- *Attorney-Client Privilege and Joint Representation.* You should also understand how the attorney-client privilege works in a joint representation. The privilege is held jointly by all of you. We may not disclose to anyone else our communications between us and any of you. But communications between any of you and our firm related to the representation are not protected from our disclosure of those communications to the others. Therefore, if you have relevant information that you wish to disclose to us on a privileged basis, and you do not want us to disclose that information to the others, you should not disclose that information to us and you should seriously consider retaining your own counsel instead of entering into or continuing this joint representation. Otherwise, we must disclose to our joint client privileged information received from any of you.
- *Confidentiality in a Joint Representation.* A joint representation also imposes a confidentiality obligation on each of you that would not exist where each of you have your own counsel. In a joint representation, you may have confidentiality obligations that survive after the joint representation terminates. If any of you terminates participation in this joint representation, or if we terminate our representation of one or any of you, the privileged nature of prior communications continues.

How Will We Communicate With Each Other? We will keep you informed of the status of the representation and on matters that impact any decisions you must make. Should you at any time have questions or need for information, we will respond promptly. Unless otherwise limited by you, we may communicate with one another in person or by phone, email, letter or fax. The email addresses that we may use for our communications to you are Slinsey@sccmha.org and bmeints@iskzoo.org. Please understand that our communications to those email addresses will likely be privileged or confidential and that it is your responsibility to secure that address from unauthorized users.

August 4, 2026

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By signing this agreement, you agree that Sandra Lindsey and Beth Ann Meints are authorized to direct our representation.

Your Obligations. Your cooperation is essential for a good working relationship in this representation. Accordingly, you will:

- A. give us direction as we may request from time to time.
- B. give us complete and accurate information throughout the representation. We will rely on the completeness and accuracy of that information in performing our services.
- C. notify us of any change of your primary organizational contact or communication addresses or methods.

How Do We Charge for Our Services?

Background On Fees. Unless other arrangements are made, we compute our service fees primarily on the time spent by our lawyers and paralegals to deliver services. Ethical rules require that our hourly rates and the overall fee take into account the complexity of the work, our efficiency, the results achieved, the special expertise and experience of the lawyers and paralegals involved, the time limitations imposed by you or the circumstances, and other relevant factors.

Hourly Rates. Depending upon the special expertise and amount of experience involved, our lawyer hourly rates range from \$230 to \$820, and our paralegal hourly rates range from \$225 to \$320 at this time. Our firm's attorney average billing rate is approximately \$490 per hour. Our hourly rates are subject to change from time to time without notice and are reviewed at least annually. I will be primarily responsible for handling this matter. My present hourly rate is \$650. On rare occasions we may not have adequate legal or paralegal staff available to handle the demands of your representation. In that event, we may at our discretion retain independent contractors and charge their services to you at comparable rates for Miller Johnson employees.

Out of Pocket Expense Reimbursement. You will reimburse us for reasonable out-of-pocket expenses incurred by us in delivering our services. We charge the reimbursement at our actual cost without any premium or mark-up. Examples of expenses are computer research, overnight mail service, document delivery service, copies, filing fees, secretarial overtime, and travel. If we retain outside service providers, such as expert witnesses, local counsel and other consultants, we may ask them to bill you directly or may forward their bills to you for payment.

Monthly Billing. We will send monthly invoices itemizing our services and expenses to Saginaw County Community Mental Health Authority. The monthly bills are convenient means to track our activities. If there is anything on the bill or the activities it describes that you have questions about, please ask us promptly.

August 4, 2026
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Conflicts. Our firm represents many other companies and individuals. Our initial conflict check shows no apparent conflicts to representing you. If there are other individuals or entities, aside from the designated Parties and any potentially adverse parties, for whom conflicts should be evaluated, you will inform us. If we learn of a conflict, we will notify you and take appropriate action.

Client Records. During the course of this representation, we will receive electronic and hard copy files and other items from you and others, and we will create work product. We will maintain those files and other items that are material and relevant to protecting and promoting your interests during the course of the representation and for a reasonable time thereafter. These materials are referred to as "Records". At your request, upon conclusion of this representation, we will return to you all hard copies of the Records that we are not legally bound to retain. If you do not request these Records within 45 days of the conclusion of this representation, then we will destroy the hard copy records, and only maintain an electronic copy. Any Records we are legally bound to retain will be destroyed pursuant to our retention schedule for the type of matter representation.

Acceptance of These Contractual Terms. Sometimes we ask a Client to sign and return a copy of this letter. Whether or not you return a signed copy, this agreement becomes binding upon the performance of our services with your knowledge or acceptance.

Entire Agreement and Effective Date. This letter and the Miller Johnson Standard Terms of Engagement contain the entire agreement between you and our firm regarding this representation. Your acceptance of our services after the date of this letter evidences your agreement to these terms.

Thank you again for selecting Miller Johnson to represent you. Please call us to discuss anything in this letter that you do not understand completely.

Sincerely,

MILLER JOHNSON



By Neil J. Marchand
Attorney

August 4, 2026

Page 6

ACCEPTED AND AGREED:

Signed by:
Richard Thiemkey
By: DECCB047D47E42F...

Name: Richard Thiemkey

Of: Barry County Community Mental Health Authority

Date: 8/5/2026

By: _____

Name: Chris Pinter

Of: Bay-Arenac Behavioral Health Authority

Date: _____

DocuSigned by:
Ric Compton
By: 60E50262A6024C1...

Name: Ric Compton

Of: Berrien County Mental Health Authority d/b/a Riverwood Center

Date: 8/5/2026

By: _____

Name: Sue German

Of: Branch County Community Mental Health Authority d/b/a Pines Behavioral Health Services

Date: _____

By: _____

Name: Michael Mallory

Of: Cass County Community Mental Health Services d/b/a Woodlands Behavioral Health Network

Date: _____

Signed by:
Jean M Goodrich
By: 1B994545EA0749D...

Name: Jeannie Goodrich

Of: Calhoun County Community Mental Health d/b/a Summit Pointe

Date: 8/6/2026

By: _____

Name: Cameron Bullock

Of: Community Mental Health and Substance Abuse Services of St. Joseph County d/b/a Pivotal

Date: _____

Signed by:
Bryan Korgman
By: CA636D23506F473...

Name: Bryan Korgman

Of: Community Mental Health for Central Michigan

Date: 8/7/2026

August 4, 2026

Page 7

Signed by:
By: Sara Lurie
C439A9608ED3482...

Name: Sara Lurie

Of: Community Mental Health Authority of Clinton, Eaton, and Ingham Counties

Date: 8/5/2026

By: _____

Name: Lynn Charping

Of: Gratiot County Community Mental Health Services d/b/a Gratiot Integrated Health Network

Date: _____

DocuSigned by:
By: Tracey Dore
38F122BE24594EC...

Name: Tracey Dore

Of: Huron County Community Mental Health Authority

Date: 8/4/2026

By: _____

Name: Susan Richards

Of: Ionia County Community Mental Health Authority d/b/a The Right Door for Hope, Recovery, and Wellness

Date: _____

Signed by:
By: Cassandra Watson
34579AD0A2C94F7...

Name: Cassandra Watson

Of: Jackson-Hillsdale Community Mental Health Board d/b/a LifeWays

Date: 8/7/2026

Signed by:
By: Beth Ann Meints
0156AECC859E4A7...

Name: Beth Ann Meints

Of: Kalamazoo County Community Mental Health Authority d/b/a Integrated Services of Kalamazoo

Date: 8/5/2026

DocuSigned by:
By: Tammy Warner
D61F3FE30B8B42E...

Name: Tammy Warner

Of: Montcalm Center for Behavioral Health d/b/a Montcalm Care Network

Date: 8/4/2026

Signed by:
By: Carol Mills
61892D29748A402...

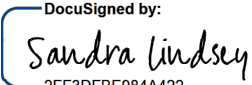
Name: Carol Mills

Of: Newaygo County Mental Health Authority

Date: 8/5/2026

August 4, 2026

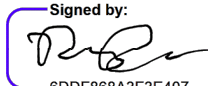
Page 8

By: 
DocuSigned by:
2FE3DFBE984A422

Name: Sandra Lindsey

Of: Saginaw County Community Mental
Health Authority

Date: 8/10/2026

By: 
Signed by:
6DDF868A3F3E407...

Name: Ryan Painter

Of: Shiawassee County Community Mental
Health Authority d/b/a Shiawassee Health
and Wellness

Date: 8/4/2026

By: _____

Name: Sharon Beals

Of: Tuscola County Community Mental
Health Authority d/b/a Tuscola Behavioral
Health Systems

Date: _____

By: 
Signed by:
2F985431016949A...

Name: Debra Hess

Of: Van Buren Community Mental Health
Authority

Date: 8/6/2026



MILLER JOHNSON

STANDARD TERMS OF ENGAGEMENT

Miller Johnson is pleased to have you as a client. The foundation of a good relationship is a clear understanding of the legal services we will provide and the business terms of our engagement. We want you to be an informed and involved client and encourage your questions, suggestions and concerns at any time. These terms supplement those found in your engagement letter and are an integral part of our agreement.

THE ATTORNEY-CLIENT RELATIONSHIP

The person or entity we represent is that identified in the engagement letter and does not include, unless specifically stated, any affiliates, corporate parents, subsidiaries, officers, directors, shareholders, employees, partners or commonly owned entities. If the client is a corporation, a professional corporation or limited liability company, you must notify us in writing promptly upon the start of the engagement if there are individuals who are so closely involved with the ownership of the entity that we should consider them personally in any future analysis of conflicts of interest.

This representation shall end at the completion of the specific service(s) you have retained us to perform. If you later retain us to perform additional or different services, those shall be considered a separate engagement, regardless of whether we issue a new engagement letter, even if they bear some relationship to earlier work. We may send you a closing letter evidencing the completion of the representation or may communicate with you regarding the disposition of files and documents, but these activities are not considered a part of the engagement and the representation shall have ended on the date of last substantive legal service. Should we inform you from time to time of developments in the law which may be of interest to you, by email, newsletter, or otherwise, such communication is not a revival of an attorney-client relationship.

FUTURE REPRESENTATION

If our relationship has ended, we have no obligation to represent you in connection with related matters unless we have agreed to do so in writing. For example, in the event our engagement involves preparation of an agreement which provides for ongoing rights and obligations on your part, a dispute concerning the interpretation or enforceability of that agreement may subsequently arise after our engagement has been terminated. In the absence of our express written agreement, you may not assume that we will continue to be free to represent you in such a future dispute. Moreover, we have no obligation to inform you of deadlines, option rights, expiration dates or developments in the law, or to file UCC continuation statements or other documents that are required to continue or preserve your rights, unless we have agreed in writing to do so.

EXPRESSIONS OF PROFESSIONAL JUDGMENT

Any statements we may make concerning the outcome of your legal matters are expressions of our professional judgment and are not guarantees. Any estimate of the total amount of your legal fees and expenses for the engagement is likewise an expression of our professional judgment at the time and not a guarantee or a cap. Estimates of cost, particularly in litigated or contentious matters, are always inexact, depending very much upon the activities and positions of other parties and the scheduling of events by courts or tribunals.

HOW FEES ARE SET

Our fees are set by agreement with you. There is a variety of possible fee arrangements, including hourly billing, a flat fee, a contingent fee, and a variety of mixed or hybrid billing arrangements. Our customary fee agreement is based upon hourly billing for services rendered with adjustments as may be appropriate to the circumstances of the representation. Unless otherwise agreed, hours are billed at standard rates, which are set from time to time for each of our billing attorneys and paralegals. Upon your request at any time we shall be pleased to provide you with the rates for the personnel working on your matter. Our standard hourly rates are adjusted from time to time, usually annually, to reflect market conditions and the growing expertise of individual lawyers and paralegals. The hourly rate you are charged shall be the one in effect at the time the service is rendered. We shall track time in one quarter hour increments.

When we travel on your behalf, we generally charge portal-to-portal for our travel time. Whenever possible, we shall endeavor to work on your matter while traveling. If we work on matters for other clients while traveling on your behalf, that time shall be deducted from our charges to you.

It is important to the success of our relationship that we communicate accurately and fully regarding our charges and the basis for them. Likewise, you should tell us whenever you have any questions or issues about a billing statement and should address them to us within a reasonable time after receipt of our invoice (which we would ordinarily expect to be no more than 60 days). If you are not satisfied with the outcome of discussions about such matters with the attorney with whom you are dealing, please call the firm's general number and ask for the Chief Operating Officer, who will see that the appropriate person addresses your concern.

ATTORNEY CONFERENCES / MEETINGS

From time to time, internal conferences shall take place among the professionals who are participating in your representation. Although this approach might seem to result in duplication of effort, it is our belief that this practice facilitates communication, improves the quality of the work by allowing us to utilize specialists and a proper mix of personnel, and thus ultimately provides you with the best value. If, at any time, you are concerned about the efficiency or cost-effectiveness of our efforts, please express those concerns promptly so that we can address the issue in a timely fashion.

COSTS AND REIMBURSABLE EXPENSES

We often find it necessary to incur certain expenses on our client's behalf, such as travel (transportation, food and lodging), filing, recording and certification fees, title searches, court reporters, long distance telephone charges outside the contiguous 48 states, conference calling services, printing, photocopying and document production, computerized legal research, faxes, electronic litigation support, messenger and overnight courier services, and, in situations that may require it, non-lawyer staff overtime. These expenses are charged, insofar as possible, at our actual out-of-pocket cost.

Generally, you shall be directly invoiced for significant third party expenses, such as the invoices of other professionals whose assistance is required (e.g. accountants, consultants, forensic specialists, economists, planners, experts, etc.), court reporters, transcripts, investigations, photographs and other graphic exhibits and materials, and the like. In the event that we pay these expenses on your behalf, the cost shall be included with other reimbursable charges on our invoice to you.

On rare occasions we may not have adequate legal or paralegal staff available to handle the demands of your representation. In that event, we may at our discretion retain independent contractors and charge their services to you at comparable rates for Miller Johnson employees.

TERMS OF PAYMENT / COLLECTION

Unless otherwise agreed in writing, we typically bill monthly. Payment is due upon receipt. Any invoices not paid when due accrue interest at the maximum rate permitted by Michigan law, not to exceed 7% per annum, from the beginning of the month following the due date. In the event we must take legal action to collect a fee, you shall be responsible for paying the costs of collecting the debt, including court or arbitration tribunal costs, filing fees, and actual attorney fees (regardless of whether Miller Johnson in-house counsel are used).

CLIENT BILLING POLICIES AND PROCEDURES

We sometimes receive statements from clients of billing policies, procedures, guidelines or the like, that we are instructed to follow. In the event that you give such instructions, to the extent that they merely

supplement the understandings in this Agreement, unless we notify you to the contrary, we shall take reasonable steps to honor them. However, in the event that the terms of the instructions conflict with this Agreement, this Agreement shall govern unless we otherwise expressly agree in writing.

ATTORNEY'S LIEN

If a monetary judgment or award is made in your favor, we shall have a lien on the proceeds to the extent of any unpaid fees, disbursements or other charges. All payments by way of recovery, award, settlement or the like to you from third parties shall be made jointly payable to you and to us.

In divorce matters, you hereby award us a valid and perfected lien on the property (including proceeds) awarded pursuant to a Judgment of Divorce, and we may, but are not required to, file any documents we deem appropriate to give notice of this lien (including recording a copy of this engagement letter, Judgment of Divorce, and UCC financing statements), in the real property records where the property subject to the Judgment of Divorce is located as well as with the appropriate Secretary of State's office.

CLIENT FILES

We maintain a file of the items reasonably necessary to your representation ("Client Files"), such as correspondence, pleadings, deposition transcripts, exhibits, physical evidence and expert reports. The Client File is our property. Any of your own documents or items that you have provided to us ("Client Documents") remains your property. We also generate, and sometimes temporarily place in the Client File, documents containing our attorney work product, mental impressions, precedents, legal or factual research, notes, and other materials that we find helpful or useful but that is not essential to the representation ("Work Product"). We also maintain Administrative Records, which include time and expense reports, billing memoranda or invoices, personnel and staffing materials, credit and accounting records and collection records. Work Product and Administrative Records are also our property.

After our engagement ends, we may or, upon your request, shall return any Client Documents to you. You agree that we may retain copies of those materials at our expense so as to insure that we have a complete record of the engagement. With respect to the Client Files, the Work Product and the Administrative Records, including electronic documents, you agree that we may adopt reasonable retention policies and may in furtherance of such retention policies delete and destroy such documents.

At any time you may request and shall be entitled to receive a copy of the Client Files for which you have compensated us. You agree to pay the cost of copying and transmittal.

If we receive a subpoena for your files in any matter in which you are a party, you agree to pay our reasonable and necessary costs and attorney fees for compliance.

If you request that your Client File and your Client Documents be transferred to another lawyer or returned to you, you understand that, unless otherwise agreed in writing, we shall retain a copy of the complete file, so as to have a record of our representation, and you agree that you shall pay the reasonable and necessary costs of file preparation and transfer, including the costs of copying and shipping the file and the services of personnel assigned to the task. If at the time you request such a transfer you have not fully satisfied all of your obligations to us under this agreement, including the payment of all fees and costs, we shall be entitled to hold the Client Files as security for performance of those obligations to the full extent permitted by the rules of professional conduct.

CLIENT TRUST ACCOUNT

We shall comply with all applicable ethical standards regarding the handling of funds belonging to you. Pursuant to those requirements, we shall not deposit any funds belonging to you in firm operating accounts. Rather, all such funds shall be deposited in a trust bank account that complies with our obligations under Michigan Rule of Professional Conduct 1.15 (Interest on Lawyers Trust Accounts).

TERMINATION OF PROFESSIONAL RELATIONSHIP

You may terminate our representation at any time by notifying us.

We may also withdraw from providing services to you upon giving you reasonable notice. The ethics rules governing the practice of law list several types of conduct or circumstances that require or allow us to withdraw from representing a client. Among those reasons are: (1) non-payment of our fees; (2) your failure to be forthright, cooperative or supportive of our efforts, (3) your misrepresentation of, or failure or refusal to disclose, material facts to us; (4) your failure or refusal to accept our advice; or (5) the discovery of a conflict of interest with another client. We shall try to identify in advance and discuss with you any situation which may lead to our withdrawal and, if withdrawal becomes necessary, we shall give you written notice of our withdrawal.

Termination of our professional relationship shall not affect your responsibility for payment for our services rendered or for costs and expenses incurred. Upon termination of our representation, we shall submit a statement for services rendered to date of termination, payable in full upon receipt.

In the event of termination or withdrawal, you shall pay the reasonable and necessary costs, including attorney time and the costs of copying the Client files, required to transfer the file to new counsel. Work Product shall not be transferred without our written approval, which may be given or not at our sole discretion.

CONFIDENTIALITY / PRIVILEGE

We shall protect your confidences and shall not divulge confidential information concerning your business, personal or legal matters, except as required by law, regulation or court order or as permitted by professional ethical standards.

An important feature of our relationship is the attorney/client privilege, which protects most confidential communications with us from disclosure to third persons. You should bear in mind, however, that this important safeguard may be lost as to a given matter if you disclose or authorize disclosure to any privileged information to any third party.

CONFIDENTIALITY OF PROTECTED HEALTH INFORMATION (HIPAA)

If our representation of you requires us to receive and use health information that is protected by the Health Insurance Portability and Accountability Act of 1996 (HIPAA), we shall protect this information as required of business associates under the HIPAA privacy and security standards.

AUDIT LETTER RESPONSES

You may request that we provide your auditors certain information in connection with your auditors' examination of your financial statements. We shall charge you for our services in doing so and each such response shall be considered an engagement separate and distinct from any of the matters reported upon. For your benefit and to protect the attorney-client privilege, our responses shall only be made in accordance with the ABA Statement of Policy Regarding Lawyers' Responses to Auditors' Requests for Information (December 1975), including all of the limitations contained therein. You consent to our adherence to the ABA Statement and agree not to request additional information.

SECURITIES LAW ADVICE

Unless specifically requested and agreed by us in writing, we shall not provide any advice with respect to the securities laws of the United States or any other jurisdiction or any related rules or regulations. You shall not, without our prior written consent, include any documents or information we provide to you in any filings with federal or state securities regulators.

FEDERAL TAX ADVICE

Unless specifically requested and agreed by us in writing, we shall not provide any advice that is intended or written to be used, and without such specific written consent cannot be used, for the purpose of (a) avoiding federal tax penalties that may be imposed upon a taxpayer or (b) promoting, marketing, or recommending to another party any tax-related matters addressed by us.

GENERAL PROVISIONS

You may not assign, transfer or otherwise convey rights or obligations under this agreement without our consent. This agreement is governed by Michigan law.

This document involves important legal agreements between us. We are not acting as your attorney with respect to this agreement and you may wish to consult independent counsel in deciding whether or not to agree to it.

HIPAA BUSINESS ASSOCIATE/SUBCONTRACTOR PROVISIONS

These provisions outline the obligations of Miller Johnson under the privacy, security, breach notification and enforcement rules of the Health Insurance Portability and Accountability Act ("HIPAA") where Miller Johnson is acting as a "business associate" of a Client who is a "covered entity," or where Miller Johnson is acting as a "subcontractor" of a Client who is a "business associate." The terms "covered entity," "business associate" and "subcontractor" are defined under HIPAA. With respect to each such Client, these provisions set forth Miller Johnson's obligations, activities, and permitted uses and disclosures of protected health information ("PHI"), as that term is defined under HIPAA. **These provisions do not apply unless Miller Johnson is acting as a "business associate" or a "subcontractor" of a Client as described above.**

MILLER JOHNSON'S OBLIGATIONS AND ACTIVITIES

- Miller Johnson agrees not to use or disclose PHI other than as permitted or required herein or as required by law.
- Miller Johnson agrees to use appropriate safeguards and comply with federal regulations with respect to electronic PHI, and to prevent the use or disclosure of PHI other than as provided for in this HIPAA section.
- Miller Johnson agrees to mitigate, to the extent practicable, any harmful effect that is known to Miller Johnson of a use or disclosure of PHI by Miller Johnson in violation of the requirements of the HIPAA provisions herein.
- Miller Johnson agrees to report to Client any use or disclosure of PHI not provided for herein of which Miller Johnson becomes aware and/or any security incident of which Miller Johnson becomes aware.
- If Miller Johnson discovers a breach of unsecured PHI, Miller Johnson shall notify Client as soon as reasonably practicable. The notification will include identification of each individual whose unsecured PHI has been breached (or Miller Johnson reasonably believes to have been breached), and any other available information in Miller Johnson's possession which the Client is required to include in any required notice to the affected individuals.
- Miller Johnson agrees to ensure that any agent, including a subcontractor, that creates, receives, maintains or transmits PHI on behalf of Miller Johnson regarding Client agrees in writing to the same restrictions, conditions and requirements that apply herein to Miller Johnson with respect to such information. Moreover, Miller Johnson shall ensure that any such agent or subcontractor agrees to implement reasonable and appropriate safeguards to protect Client's electronic PHI.
- Miller Johnson agrees to make its internal practices, books, and records including policies and procedures relating to the use and disclosure of PHI received from, or created or received by Miller Johnson on behalf of, Client reasonably available to the federal government for purposes of determining Client's compliance with HIPAA.
- Miller Johnson agrees to document such disclosures of PHI required for Client to respond to a request by an individual for an accounting of disclosures of PHI and to provide the information to permit Client to respond to such a request in accordance with applicable federal regulations.

MILLER JOHNSON'S PERMITTED USES AND DISCLOSURES

Miller Johnson may use or disclose PHI to perform legal services for Client, provided that such use or disclosure would not violate HIPAA if done by Client. Miller Johnson also agrees to make its uses and disclosures and requests for PHI consistent with Client's minimum necessary policies and procedures which Client has communicated to Miller Johnson. Miller Johnson may use PHI for our proper management and administrative purposes or to carry out our legal responsibilities. Miller Johnson may also disclose PHI for our proper management and administrative purposes or to carry out our legal responsibilities, provided that the disclosures are required by law, or Miller Johnson obtains reasonable written assurances from the person to whom the PHI is disclosed that the PHI will remain confidential and used or disclosed only as required by law or for the purpose for which it was disclosed, with the recipient agreeing to notify Miller Johnson of any instances where the recipient becomes aware the PHI has been breached.

OTHER HIPAA TERMS

These provisions relate solely to Miller Johnson's compliance with HIPAA with respect to PHI relating to Client. It does not govern any other aspect of the parties' relationship nor does it confer any rights or obligations on any other person or entity other than Miller Johnson and Client. These provisions replace and take precedence over any prior HIPAA business associate agreements or subcontractor agreements entered into between the parties and are binding on each party's successor.

The HIPAA terms will stay in effect until terminated by Client due to Miller Johnson's violation of a material term, or if otherwise agreed to in writing between Miller Johnson and Client. If Client determines that Miller Johnson has violated a material HIPAA provision, Client may provide Miller Johnson an opportunity to cure any breach or end the violation and terminate if Miller Johnson doesn't cure the breach or end the violation within a reasonable time. Alternatively, Client may immediately terminate if it determines that a cure is not possible. Upon termination Miller Johnson will return or destroy all PHI received from or on behalf of Client. If Miller Johnson determines that return or destruction isn't feasible, Miller Johnson will continue to safeguard the PHI in accordance with HIPAA.

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Source Envelope:

Document Pages: 11

Signatures: 13

Envelope Originator:

Certificate Pages: 8

Initials: 0

Wil Antonides

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45 Ottawa Street, SW

Envelopeld Stamping: Enabled

Suite #1100

Time Zone: (UTC-05:00) Indiana (East)

Grand Rapids, MI 49503

antonidesw@millerjohnson.com

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antonidesw@millerjohnson.com

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Timestamp

Beth Ann Meints

bmeints@iskzoo.org

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Company Name: Miller Johnson

Bryan Korgman

bkrogman@cmhcm.org

Executive Director

Security Level: Email, Account Authentication
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Company Name: Miller Johnson

Cameron Bullock

cbullock@pivotalstjoe.org

Chief Executive Officer

Pivotal

Security Level: Email, Account Authentication
(None)

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Electronic Record and Signature Disclosure:

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Company Name: Miller Johnson

Carol Mills

cmills@newaygocmh.org

Executive Director

Security Level: Email, Account Authentication
(None)

Signed by:

Carol Mills
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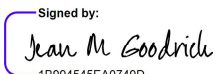
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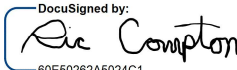
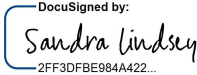
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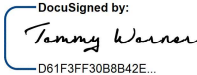
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Sara Lurie luriesa@ceicmh.org CEO Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Accepted: 8/4/2026 5:29:13 PM ID: 698177d0-3d10-4705-812e-9ba21c288e33 Company Name: Miller Johnson	Signed by:  C439A9608ED3482... Signature Adoption: Pre-selected Style Using IP Address: 65.61.60.254	Sent: 8/4/2026 3:42:45 PM Viewed: 8/4/2026 5:29:13 PM Signed: 8/5/2026 7:52:00 AM

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Susan Richards srichards@Rightdoor.org Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign		Sent: 8/4/2026 3:42:42 PM
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From time to time, Miller Johnson (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to this Electronic Record and Signature Disclosure (ERSD), please confirm your agreement by selecting the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

Getting paper copies

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.50 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

All notices and disclosures will be sent to you electronically

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact Miller Johnson:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: helpdesk@millerjohnson.com

To advise Miller Johnson of your new email address

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at helpdesk@millerjohnson.com and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

To request paper copies from Miller Johnson

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to helpdesk@millerjohnson.com and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

To withdraw your consent with Miller Johnson

To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an email to helpdesk@millerjohnson.com and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

Required hardware and software

The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: <https://support.docusign.com/guides/signer-guide-signing-system-requirements>.

Acknowledging your access and consent to receive and sign documents electronically

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to ‘I agree to use electronic records and signatures’ before clicking ‘CONTINUE’ within the DocuSign system.

By selecting the check-box next to ‘I agree to use electronic records and signatures’, you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify Miller Johnson as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by Miller Johnson during the course of your relationship with Miller Johnson.

November 2026

BABHA Board
of Directors

November 2026							December 2026						
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7			1	2	3	4	5
8	9	10	11	12	13	14	6	7	8	9	10	11	12
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22	23	24	25	26	27	28	20	21	22	23	24	25	26
29	30						27	28	29	30	31		

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Nov 1	2	3	4	5 5:00pm Corporate Compliance Committee	6	7
8	9 5:00pm Recipient Rights Advisory & Appeals Committee	10	11 Veteran's Day/BABH Offices Closed	12 5:00pm Program Committee	13	14
15	16 5:00pm Audit Committee	17	18	19 5:00pm REGULAR BOARD MEETING	20	21
22	23	24	25	26 Thanksgiving Day/BABH Offices Closed	27 Day after Thanksgiving/BABH Offices Closed	28
29	30	Dec 1	2	3	4	5

BAY ARENAC

BEHAVIORAL HEALTH

Community Mental Health Services Program

Quality Assessment and Performance Improvement Program
FY 202~~7~~⁶

Adopted by the Board: October 1~~5~~⁶, 202~~6~~⁵

BOARD
ADOPTION:
10/1~~5~~⁶/26~~5~~

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Section 1: Introduction and Overview

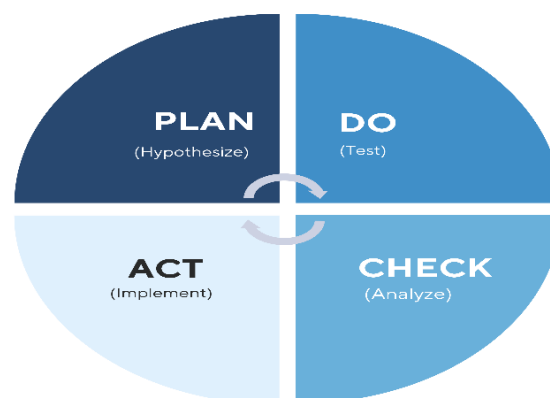
Bay-Arenac Behavioral Health Authority (BABHA) provides an array of behavioral health services and supports to individuals in the Michigan counties of Bay and Arenac through a network of direct operated programs and contracted service providers. BABHA is a Michigan Department of Health and Human Services (MDHHS) certified Community Mental Health Services Program (CMHSP), a Children's Diagnostic and Treatment Service Program, and is licensed by MDHHS as a Substance Abuse Provider. BABHA is also a CMHSP affiliate of the Mid-State Health Network (MSHN) Pre-Paid Inpatient Health Plan (PIHP) for Medicaid Specialty Services and Supports. In addition, BABHA is accredited by the Council on Accreditation of Rehabilitation Facilities (CARF).

BABHA is responsible for managing a local quality assessment and performance improvement program for its CMHSP provider operations and ensuring its contracted network clinical service providers address quality improvement in their own operations through the BABHA Quality Assessment and Performance Improvement Program (QAPIP).

BABHA's overall philosophy and mission governing its local quality management and performance improvement program can be summarized as follows:

- 1 Performance Improvement is dynamic, system-wide and integrated.
- 2 The input of a wide range of stakeholders, such as board members, consumers, providers, employees, community agencies, and other external entities, such as MDHHS, are critical to success.
- 3 It is important and encouraged to have an organizational culture where staff are comfortable reporting errors, system failures, and possible solutions, and leaders see information as the means to improvement.
- 4 Improvements resulting from performance improvement must be communicated throughout the organization and sustained; and
- 5 Leadership must establish priorities, be knowledgeable regarding system risk points, and act based upon sound data.

Continuous improvement is supported by the plan, do, check, act/adjust cycle (PDCA). Standard work statements are developed and utilized to implement and maintain improvements and are updated as the PDCA cycle is repeated to produce continuous improvement over time. The QAPIP, as described in this document, is evaluated annually for effectiveness and modifications are made, as necessary.



Mission

It is the mission of BABHA to improve health outcomes to enhance quality of life and strengthen the community safety net for citizens of Arenac and Bay counties.

Values and Guiding Philosophies

All who are associated with carrying out the mission of Bay-Arenac Behavioral Health Authority are governed by the highest ethical standards and the following values:

- ⇒ Each person is unique and will be treated with dignity and respect.
- ⇒ We are committed to delivering services in a manner that is responsive to community needs.
- ⇒ We seek to provide a recovery-focused and trauma-informed system of care.
- ⇒ We believe that individual and community wellness is enhanced by the delivery of integrated healthcare services that are directed by and responsive to the person served.
- ⇒ We are committed to promoting independence, choice control and meaningful engagement with peers, family friends, and community.
- ⇒ We are committed to collaboration with our community partners to encourage wellness, to promote prevention, and to increase health literacy.

Section 2: Organizational Structure and Committees

The organizational structure and committees and their relation to the QAPIP, and performance improvement responsibilities in general, are detailed below.

Governance

Board of Directors

The Board of Directors is the governing body of BABHA and has ultimate responsibility for the quality of care and services delivered by the organization. The Board of Directors evaluates, sets policies related to performance improvement and sets priorities for performance improvement initiatives for the next year. Annually, the Board of Directors reviews and formally adopts the QAPIP.

Chief Executive Officer

The BABHA CEO links the strategic planning and operational functions of the organization with the QAPIP functions, assures coordination occurs among organizational leaders to maintain quality and consumer safety, allocates adequate resources for the QAPIP, and designates the Director of Healthcare Accountability as Strategic Leadership Team (SLT) member responsible for the BABHA QAPIP.

Medical Director

The BABHA Medical Director provides clinical oversight related to quality and utilization of services both directly, through case supervision, participation in root cause analyses and review of critical incidents, and participation in relevant committees.

Leadership

The SLT is comprised of senior management which meets regularly and has an Expanded Leadership meeting of which the Quality Manager is a member. All managers and team leaders join the SLT in a monthly Agency Leadership meeting to collaborate on new processes and utilizes data effectively for informed decision making.

BABHA Staff

Staff receive education and annual training of the organization's QAPIP and expectations for their participation, which includes participation in data collection activities and identifying opportunities for improvement. They carry out the agency's mission and vision while providing direct care.

Quality Manager

The Quality Manager, under the oversight of the Director of Healthcare Accountability, is the leader responsible for the daily management of the QAPIP. The Quality Manager identifies program priorities, sponsors work groups and committees, facilitates root cause analyses, supports data-based decision making, generates reports, analyzes data and many other QAPIP related activities. The Quality Manager is the lead on the renewal of accreditation, assistance with preparation for various audits, and developing and implementing plans of corrections.

Quality and Compliance Coordinators

The Quality and Compliance Coordinators assist the Quality Manager with the coordination, initiation, guidance, and collaboration of local performance improvement projects. These individuals participate in regional performance measurement activities such as clinical record reviews for performance improvement projects, performing reviews of contracted service provider performance, Medicaid Event Verification, and are members on regional committees and work groups.

Stakeholders

BABHA sponsors regular meetings with key stakeholders to discuss system issues and process changes as well as changes in rules, regulations, and requirements are discussed as well as system level concerns and improvements, training and credentialing, updates to processes and procedures, and other relevant topics.

QAPIP Committees

Primary Network Operations and Quality Management Committee (PNOQMC)

The PNOQMC is the structure responsible for the QAPIP and performance improvement activities of BABHA's operations. The PNOQMC is responsible for monitoring performance by:

- Receiving recommendations for improvement,
- Identifying quality related indicators and measures,
- Reviewing data reports to ensure validity,
- Taking action to achieve improvement, and meeting regularly to review and assess performance.

Consumer Councils

BABHA sponsors two clinical consumer councils that report to the PNOQMC and provide input directly regarding program operations and performance. The consumer councils are responsible for supporting organizational efforts to ease service access, develop effective and efficient service provision, ensure active consumer participation, plan of service planning, self-determination, self-advocacy, independent facilitation, community integration, anti-stigma activities, achievement of recovery, positive clinical outcomes, and consumer satisfaction.

Behavior Treatment Review Committee

The Behavior Treatment Review Committee's (BTRC) primary function is to oversee the proposed use of intrusive and restrictive techniques that may be considered as a last resort for recipients of public mental health services. The committee is responsible for reviewing behavior treatment data, including information on approved intrusive or restrictive techniques, the number and duration of interventions per person, and instances where physical management or 911 calls to law enforcement were used during an emergency behavioral crisis. A quarterly analysis is conducted to identify trends or patterns of behavior that may indicate risk to an individual or group.

Healthcare Practices Committee

The Healthcare Practices Committee's primary function is to provide a comprehensive and coordinated approach to ensuring the delivery of clinically effective services in an environment that is safe and conducive to the wellbeing of consumers, employees and the community and to thus meet or exceed the established standards of care. This is accomplished through review, remediation and mitigation of clinical incidents/events that meet risk, critical, sentinel criteria but not limited to such events, medical record/peer review process, credentialing/privileging review, developing standards of care, and ongoing monitoring of reports.

Safety Committee

The committee oversees the development and compliance level of the Environment of Care policies and procedures and emergency response plans to ensure that the environment of BABHA is maintained adequately and that protections from potential hazards are in place. In addition, the committee monitors state and federal regulatory standards and accreditation standards to ensure that the agency meets the minimum requirements of applicable rules and regulations. The committee also reviews and monitors performance on various safety related components of the environment. When trends or patterns in this data are recognized, the committee is responsible for making recommendations to management to resolve safety issues.

Corporate Compliance Committee

The Corporate Compliance Committee is responsible for all matters related to the legal and regulatory requirements of BABHA operations as it relates to contractual compliance, HIPAA privacy and security, and guarding against fraud and abuse of state and federal healthcare funds. The CCC performs fraud and abuse risk assessments and compliance program evaluations, identifies focus areas, conduct any necessary audits and self-review, and develop compliance program improvement priorities. The CCC assists with the review of internal and external monitoring and auditing activities to ensure that efforts are appropriate to provide assurance of compliance and ensures routine monitoring occurs as scheduled and findings are responded to.

Enrollee Rights and Responsibilities

The BABHA Recipient Rights Office monitors and ensures that recipients of mental health services have all of the rights guaranteed by state and federal law and provides a system for determining whether violations have occurred, and that action is taken in the event of a violation. Recipient Rights Office representatives report aggregated data on abuse, neglect and customer services findings and make recommendations to PNOQMC for system improvements when needed.

Section 3: Program Activities

The BABHA QAPIP "objectively and systematically monitors and evaluates the quality and appropriateness of care and service to members, through quality assessment and performance improvement projects, and related activities, and pursues opportunities for improvement on an ongoing basis" for "all demographic groups, care settings, and types of services" (MDHHS/CMHSP FY276 Contract, Attachment C 6.8.1.1). The program "achieves, through ongoing measurement and intervention, improvement in aspects of clinical care and non-clinical services that can be expected to affect consumer health status, quality of life, and satisfaction" (p. 1). BABHA "demonstrates a culture of accountability by developing and implementing a performance measurement and management plan that produce information an organization can act on to improve results for the person served, other stakeholders, and the organization itself" (CARF Behavioral Health Standards Manual, 1.LM).

To ensure services provided are of high quality, effective and appropriate for all clinical populations, the QAPIP program addresses the:

- ✓ Provider Qualification and Selection
- ✓ Harm Identification and Reduction
- ✓ Access to Care and Utilization
- ✓ Outcomes
- ✓ Stakeholder Perceptions of Care

Provider Qualification and Selection

Policies and procedures are in place to govern the selection and evaluation of directly employed staff and contract providers to ensure they are qualified to perform services and have current, appropriate credentials and privileges. Orientation and training in regard to responsibilities, program policy, and operating procedures are required for new employees. Staff performance and competency are monitored on a regular basis. Training needs are identified through formal means, such as performance/competency reviews, as well as informally, through self-identified areas for improvement.

GOAL	FY20276 Performance Goal	Assigned Person	Frequency of Review	Review Committee
~~BABHA staff will review a sample of internal and provider staff to verify they have documentation to support the appropriate qualifications.~~	95%	Quality Manager	Annually	PNOQMC

Reviews will be completed of providers to verify that the staff have been trained in the Individual Plan of Service prior to providing services and it is accurately documented.	95%	Quality Manager	Quarterly	Provider Specific Committees as appropriate
BABHA will complete reviews to ensure that the staff responsible for implementing an Individual Plan of Service (IPOS) are receiving training from the author of the IPOS.	95%	Quality Manager	Monthly	PNOQMC
<u>BABHA will develop a process to ensure staff have the appropriate documentation to support their qualifications when initially hired and BABHA will complete a one time review of all current staff.</u>	<u>100%</u>	<u>Quality Manager and Director of Human Resources</u>	<u>Annual</u>	<u>NA</u>

Harm Identification and Reduction

BABHA has a reporting and investigating system in place to capture the occurrence of all adverse events which include critical events (including death), risk events, unusual events, near misses, and sentinel events that involve harm or injury or the risk of harm or injury are reported to the Office of Recipients Rights (ORR). Adverse events are reviewed on a consumer specific level as well as overall trends that are reported. These adverse events have the potential to lead to the root cause analysis process if one is deemed appropriate. The trends identified through this analysis help determine how BABHA can make improvements to reduce risk for consumers.

Processes are also in place for reporting on significant events, which include investigations, material litigation, catastrophes, sentinel events, and governmental sanctions, bans on admissions, fines, penalties, or loss of programs (CARF Behavioral Health Standards Manual, 1.~~GH~~). These processes address the review and follow up of sentinel, unusual, and critical events for all persons receiving services from BABHA, including, but not limited to, those enrolled in the Children's Waiver, the Children with Serious Emotional Disturbance Waiver, the Habilitation Supports Waiver, and the 1915(i) State Plan Amendment (SPA) program.

The Recipient Rights Office representatives report aggregated data on abuse, neglect and customer services findings and make recommendations to PNOQMC for system improvements when needed.

GOAL	FY2027 ~~6~~ Performance Goal	Assigned Person	Frequency of Review	Review Committee
Continue to review all adverse events to determine any follow-up actions. Analyze the data to assist with determining change in process, procedure, workflow, etc.		Quality Manager	Quarterly	PNOQMC

Review the number of emergency physical interventions. ~~each year.~~	Decrease or remain consistent	Quality Manager	Quarterly	PNOQMC and BTRC
The number of days to complete the recipient rights investigation is lower than the Michigan Mental Health Code standard of 90 days.	100%	Recipient Rights Manager	Quarterly	PNOQMC
Abuse and neglect complaints substantiated have remedial action that includes disciplinary action and prevents recurrence.	100%	Recipient Rights Manager	Quarterly	PNOQMC
<u>Review trends in the risk events to determine any follow-up actions.</u>		<u>Quality Manager</u>	<u>Quarterly</u>	<u>PNOQMC</u>

Access to Care and Utilization Management

BABHA's utilization management plan is detailed in several sections of the Policies and Procedures Manual. The utilization plan components address, "practices related to retrospective and concurrent review of clinical and financial resource utilization, clinical and programmatic outcomes, and other aspects of utilization management as deemed appropriate by administration." Additional information on the procedures to evaluate medical necessity, criteria used, information sources, and the process used to approve the provision of medical services is also found in the Policies and Procedures Manual. BABHA uses a dashboard to track data related to various performance measures and utilization.

Michigan's Mission-Based Performance Indicator System (MMBPIS)

~~The Michigan Department of Health and Human Services (MDHHS), in compliance with federal mandates, establishes standards related to access, efficiency, and outcomes. Data is regularly collected, and quarterly reports are compiled and submitted to the PIHP for analysis, regional benchmarking. If BABHA's performance falls below the established goals, the Quality Manager, in collaboration with PNOQMC members, will complete a corrective action plan.~~

In October 2023, the Bureau of Specialty Behavioral Health Services began a comprehensive review of the existing quality assessment and performance improvement program with the goal of developing and implementing a new, more robust program. The revised program will feature a more comprehensive framework, clearer definitions, and a more rigorous methodology that aligns with national standards and practices from other states. This quality transformation has a 3-year rollout plan with new measures being added each year. By the start of calendar year 2027, all measures will have been implemented, and data tracking and analysis will be conducted.

PIHP Performance Improvement Projects (PIP)

BABHA participates in at least two PIHP PIPs per year. PIP topics are either mandated by MDHHS or selected by the PIHP and its partner CMHSPs. Data collected through the PIP are aggregated, analyzed, and reported by BABHA Quality Management staff for review at the regional Quality Improvement Council and local PNOQMC meetings and opportunities for improvements are identified. MSHN is still

waiting for approval from MDHHS on the two proposed PIPs. The first proposed PIP is a clinical PIP focused on improving depression screening and follow-up plan completion for adults receiving behavioral health services, as measured by the HEDIS CDF-AD metric. The second proposed PIP is a non-clinical PIP aimed at strengthening the operational processes that support depression screening and follow-up plan completion for adults receiving behavioral health services, also aligned with the HEDIS CDF-AD metric.

GOAL	FY20276 Performance Goal	Assigned Person	Frequency of Review	Review Committee
Achieve or exceed the 95% standard for adults and children receiving pre-admission screening for psychiatric inpatient care for whom the disposition was completed within three hours.	95%	Quality Manager	Quarterly	PNOQMC
CARF Accredited Program and Standard – <u>EFFICIENCY</u>				
ACT; CSM (integrated IDD/mental health - adults, children, and adolescents); Community Integration (psychosocial rehabilitation - adults); Intensive Family-Based Services (family services - children and adolescents); Outpatient Treatment (integrated IDD/mental health - children and adolescents, mental health - adults); Crisis Intervention (integrated IDD/mental health - children and adolescents, mental health - adults)				
~~Achieve or exceed 63% compliance for consumers who meet with a professional for an intake assessment within 14 days of request for service with an increase from FY25.~~	63%	Quality Manager	Quarterly	PNOQMC
CARF Accredited Program and Standard – <u>EFFICIENCY</u>				
~~ACT; CSM (integrated IDD/mental health – adults, children, and adolescents); Community Integration (psychosocial rehabilitation – adults); Intensive Family-Based Services (family services – children and adolescents); Outpatient Treatment (integrated IDD/mental health – children and adolescents, mental health – adults)~~				
~~Achieve or exceed 75% compliance for consumers who have a first service within 14 days of intake assessment with an increase from FY25~~	75%	Quality Manager	Quarterly	PNOQMC
CARF Accredited Program and Standard – <u>EFFICIENCY</u>				
~~ACT; CSM (integrated IDD/mental health – adults, children, and adolescents); Community Integration (psychosocial rehabilitation – adults); Intensive Family-Based Services (family services – children and adolescents); Outpatient Treatment (integrated IDD/mental health – children and adolescents, mental health – adults)~~				
Achieve or exceed the <u>6195%</u> standard for consumers <u>who received mental health follow-up within 30 days after discharge</u>	<u>6195%</u>	Quality Manager	Quarterly	PNOQMC

~~from hospitalization. discharged from a psychiatric inpatient unit who are seen for follow-up care within seven days~~				
CARF Accredited Program and Standard – <u>EFFICIENCY</u>				
ACT; CSM (integrated IDD/mental health - adults, children, and adolescents); Community Integration (psychosocial rehabilitation - adults); Intensive Family-Based Services (family services - children and adolescents); Outpatient Treatment (integrated IDD/mental health - children and adolescents, mental health - adults)				
Compliance equal to or less than 15% for consumers readmitted to an inpatient psychiatric unit within 30 days of discharge ~~with a decrease from FY25~~	Less Than 15%	Quality Manager	Quarterly	PNOQMC
CARF Accredited Program and Standard – <u>EFFECTIVENESS</u>				
ACT; CSM (integrated IDD/mental health - adults, children, and adolescents); Community Integration (psychosocial rehabilitation - adults); Intensive Family-Based Services (family services - children and adolescents); Outpatient Treatment (integrated IDD/mental health - children and adolescents, mental health - adults)				
~~Meet or exceed 95% compliance that there is evidence that the individual served was given the Individual Plan of Service within 15 days~~	95%	Quality Manager	Quarterly	PNOQMC
~~CARF Accredited Program and Standard – <u>NA</u>~~				
A reduction in inpatient hospitalizations days will occur in FY26 for consumers with a severe, persistent mental illness	5% Reduction	Director of Integrated Care	Quarterly	PNOQMC
CARF Accredited Program and Standard - <u>EFFECTIVENESS</u>				
ACT; CSM (integrated IDD/mental health - adults, children, and adolescents); Community Integration (psychosocial rehabilitation - adults); Intensive Family-Based Services (family services - children and adolescents); Outpatient Treatment (integrated IDD/mental health - children and adolescents, mental health - adults); Crisis Intervention (integrated IDD/mental health - children and adolescents, mental health - adults)				
Reports will be created to determine if services authorized in the plan of service are being provided at the identified consistency.	New	Quality Manager	NA	Leadership
CARF Accredited Program and Standard – <u>NA</u>				
<u>Begin collecting baseline data for the new PIPs.</u>	<u>New</u>	<u>Quality Manager</u>	<u>As needed during initiation</u>	<u>PNOQMC</u>
<u>CARF Accredited Program and Standard – EFFECTIVENESS and EFFICIENCY</u>				
<u>ACT; CSM (integrated IDD/mental health - adults, children, and adolescents); Community Integration (psychosocial rehabilitation - adults); Intensive Family-Based Services (family services - children and adolescents); Outpatient Treatment (integrated IDD/mental health - children and adolescents, mental</u>				

health - adults); Crisis Intervention (integrated IDD/mental health - children and adolescents, mental health - adults)

Medicaid Event Verification (MEV)

BABHA has an established process to complete Medicaid Event Verifications (MEV) and follow-up restitution, as necessary. The event verification process checks reimbursed Medicaid claims against chart documentation to verify accuracy and validity. BABHA completes internal reviews for contract services providers and direct services. Additionally, the PIHP conducts two reviews annually of BABHA Medicaid claims. These reviews help to determine that the individuals that are served have access to a variety of services and that the services provided meet Medicaid guidelines.

GOAL	FY20276 Performance Goal	Assigned Person	Frequency of Review	Review Committee
Meet or exceed 95% compliance for BABHA and all contract service providers that receive a MEV review. (Corrective action is required on anything less than 100%)	95%	Quality Manager	Quarterly	PNOQMC/ CCC
Meet or exceed ~~80~~ 95% compliance for all external MEV reviews conducted by the PIHP.	~~80~~ 95%	Quality Manager	Bi- Annually	PNOQMC/ CCC
~~Continue completing internal MEV reviews to reduce risk related to billable services.~~		Quality Manager	Various	PNOQMC/ CCC

Outcomes

BABHA continues to make strides in improving outcomes for the individuals it serves. Improvement opportunities have been identified in the Strategic Plan. -MDHHS tracks and monitors a variety of HEDIS measures that have been identified as activities used to improve healthcare for consumers. BABHA ~~has been focusing~~will focus on the Diabetes Screening and, Diabetes Monitoring, and Cardiovascular Monitoring measures in an effort to improve health outcomes for the individuals that BABHA serves.

Additionally, BABHA reviews a sample of consumer records quarterly from each primary provider, including BABHA primary services, to determine that coordination occurred with the primary healthcare physician. MDHHS monitors this standard during annual Waiver Audit.

GOAL	FY2027 Performance Goal	Assigned Person	Frequency of Review	Review Committee
~~Meet or exceed the 80% standard for the Diabetes Screening HEDIS measure will increase in compliance from FY26.~~	~~Increase by 5%80%~~	Quality Manager	Quarterly	PNOQMC
CARF Accredited Program and Standard – <u>EFFECTIVENESS</u>				
ACT; CSM (adults only); Community Integration (adults only); Outpatient Therapy (adults only)				
~~Monitor compliance with the Diabetes Monitoring HEDIS measure will increase in compliance from FY26.~~	~~Increase by 5%Standard not yet set by MDHHS~~	Quality Manager	Quarterly	PNOQMC
CARF Accredited Program and Standard – <u>EFFECTIVENESS</u>				
ACT; CSM (adults only); Community Integration (adults only); Outpatient Therapy (adults only)				
~~The Cardiovascular Monitoring HEDIS measure will increase in compliance from FY26.~~	~~Increase by 5%~~	~~Quality Manager~~	~~Quarterly~~	~~PNOQMC~~
~~CARF Accredited Program and Standard – <u>EFFECTIVENESS</u>~~				
~~ACT; CSM (adults only); Community Integration (adults only); Outpatient Therapy (adults only)~~				
Meet or exceed 95% compliance that there is evidence of health care coordination within the consumer record completed by the primary providers.	95%	Quality Manager	Quarterly	PNOQMC
CARF Accredited Program and Standard – <u>NA</u>				
Review Peer Review documents for the prescribers to determine any trends.		Madison Clinic Program Manager	Quarterly	HPC
CARF Accredited Program and Standard – <u>Section 2E, Standard 9bNA</u>				

Stakeholder Perceptions

Customer satisfaction and service quality is evaluated through quantitative and qualitative information obtained from a wide variety of stakeholders including consumers and/or their families, providers, staff, and community members. Feedback on satisfaction and opportunities for improvement are provided through:

- Suggestion Boxes- monthly
- Behavior Treatment Plan Survey- annually

- Mental Health Statistics Improvement Program (MHSIP) and Youth Satisfaction Services (YSS) Survey- annually
- National Core Indicators (NCI) Survey- annually
- Provider Survey- annually
- Community Needs Assessment- every two years
- Employee Survey- every two years

GOAL	FY20276 Performance Goal	Assigned Person	Frequency of Review	Review Committee
Meet or exceed 80% agreeance/favorable responses to the survey questions on the provider survey.	80%	Quality Manager	Annually	Expanded SLT and All Provider Specific Committees
Meet or exceed 80% satisfaction during the annual survey for the MHSIP survey specific to the General Satisfaction domain.	80%	Quality Manager	Annually	PNOQMC
Meet or exceed 80% satisfaction during the annual survey for the YSS Survey specific to the Appropriateness (General Satisfaction) domain.	80%	Quality Manager	Annually	PNOQMC
Meet or exceed 80% satisfaction for the Behavior Treatment Surveys.	80%	Quality Manager	Annually	BTRC
Meet or exceed 80% agreeance/favorable responses to the survey questions on the provider survey.	80%	Quality Manager	Annually	Expanded SLT and All Provider Specific Committees

Section 4: Performance Measurement Methodologies

The BABHA QM program uses a variety of methods to establish measures, collect data, analyze and report findings, and implement and monitor corrective actions as necessary.

Establishing Measures

Performance measures, developed in alignment with BABHA's strategic priorities, address clinical and non-clinical areas. The QAPIP is used but is not limited to the following means for identification of issues and opportunities for improvement:

- Growth areas identified based on performance
- Stakeholder feedback
- Oversight and monitoring reviews

Data Collection

Methods of Data Collection:

- Surveys and Questionnaires: Collect feedback from patients, staff, and stakeholders.
- Electronic Health Record (EHR): Use data from EHR to track patient outcomes and service utilization.
- Record Reviews

• Frequency of Data Collection:

- Continuous Monitoring: Implement real-time data collection for ongoing assessment.
- Periodic Reviews: Conduct monthly or quarterly reviews to identify trends and areas for improvement.
- Annual Evaluations: Perform comprehensive annual evaluations to assess overall program effectiveness.

Data Analysis and Reporting

Data is aggregated at intervals appropriate to the process or activity under review, with specific timeframes and methods defined in project descriptions. Statistical testing and analysis are applied as needed to interpret and display the aggregated data. BABHA data is examined over time to identify patterns and trends and is compared against desired performance levels, including external benchmarks when available. Quality Management staff use dashboards or summary reports to present data results, along with recommendations for further investigation, data collection improvements to address validity concerns, and/or system-level improvements.

Undesirable patterns, trends, or performance variations are flagged for action. In some cases, additional data collection and analysis may be required to identify root causes, leading to remedial or corrective measures. Conversely, departments demonstrating consistently positive performance may be asked to document the strategies used to sustain those outcomes.

Quarterly and annual reports are formally reviewed by the Board. These reports summarize studies conducted, results obtained, follow-up actions, and aggregated data on utilization and service quality. This review ensures the QAPIP's continuity, effectiveness, and ongoing relevance.

Corrective Action Plans

A corrective action plan (CAP) is a step-by-step plan of action that is developed to achieve targeted outcomes for resolution of identified errors in an effort to:

- Identify the most cost-effective actions that can be implemented to correct error causes.
- Develop and implement a plan of action to improve processes or methods so that outcomes are more effective and efficient.

- Achieve measurable improvement in the highest priority areas.
- Eliminate repeated deficient practices

BABHA utilizes the CAP process throughout the agency to improve compliance and quality.

Communicating Process and Outcome Improvements

The results of BABHA provider operations performance measurement and improvement activities are communicated through the periodic dissemination of materials to employees, providers, and stakeholders via the BABHA Website, BABHA Board of Directors, Strategic Leadership Team, agency Leadership Team, Consumer Councils, PNOQMC, staff meetings as well as the general distribution of applicable information through the leadership dashboard, BABHA intranet, and other outlets as deemed appropriate.

Section 5: Review/Evaluation of Plan Effectiveness

BABHA has led and been involved in many performance improvement activities during FY20265. Given the nature and scope of the accomplishments, the FY20265 QAPIP plan has been determined to be effective in a variety of areas and any updates, revisions, and new projects have been added to the FY20276 plan as necessary to continue the pursuit of exceptional performance. During FY20276, continued evaluation of the QAPIP will take place. Continued evaluation will occur to develop, define, collect, and validate data within current systems; and to communicate/collaborate with providers and internal programs for such areas that need improvement. There have been some gaps and improvements that have been identified during the review of the QAPIP and these will be addressed as priorities for FY20276.

References

- Bay-Arenac Behavioral Health Policies and Procedures Manual, Agency Action Plans, Medical Staff Plan
- Bay-Arenac Behavioral Health Policies and Procedures Manual, Agency Action Plans, Strategic Leadership Plan
- Bay-Arenac Behavioral Health Policies and Procedures Manual, C07-S01-T01 Staff Credentials
- Bay-Arenac Behavioral Health Policies and Procedures Manual, C07-S01-T13 Credentialing and Privileging of Licensed Independent Practitioners
- Bay-Arenac Behavioral Health Policies and Procedures Manual, C08-S06-T06 Organizational Credentialing
- Bay-Arenac Behavioral Health Employee Handbook
- Bay-Arenac Behavioral Health Policies and Procedures Manual, C07-S03-T05 Cultural Competence and Limited English Proficiency.
- Bay-Arenac Behavioral Health Policies and Procedures Manual, Agency Action Plans, Cultural Competency and Diversity Plan.
- Bay-Arenac Behavioral Health Policies and Procedures Manual, C07-S03-T02 Orientation
- Bay-Arenac Behavioral Health Policies and Procedures Manual, C07-S03-T01 Minimum Training Requirements
- Bay-Arenac Behavioral Health Policies and Procedures Manual, Agency Action Plans, Training Plan
- Bay-Arenac Behavioral Health Policies and Procedures Manual, Agency Action Plans, Operating Philosophy and Ethical Guidelines
- Bay-Arenac Behavioral Health Policies and Procedures Manual, C07-S01-T05 Performance Management
- Bay-Arenac Behavioral Health Policies and Procedures Manual, C07-S01-T02 Professional Staff Competency
- Bay-Arenac Behavioral Health Policies and Procedures Manual, C07-S02-T26 Continuing Education
- Bay-Arenac Behavioral Health Policies and Procedures Manual, C07-S03-T03 Scheduling, Promoting, and Documentation of Staff Education
- Bay-Arenac Behavioral Health Policies and Procedures Manual, C03-S01-T01 Statutory Establishment
- Bay-Arenac Behavioral Health Policies and Procedures Manual, C02-S01-T06 Reporting and Investigation of Adverse Events

Bay-Arenac Behavioral Health Authority

Board of Directors

April 1, 2026 through March 31, 2027

Original Board Appointed 09/23/63		
County Elected to Come Under PA 258, effective 08/08/75		
MH Code revision PA 290, 1995, effective 03/27/96: All board member terms were extended 3 months to end on 03/31, and thereafter be 3-year terms		
Name	Term	County Represented
Robert Pawlak Chair	04/01/25 to 03/31/28	Bay
Patrick McFarland Vice Chair	04/01/24 to 03/31/27	Bay
~~Chris Girard~~ Sally Mrozinski Treasurer	04/01/25 to 03/31/28	~~Bay~~ Arenac
~~Sally Mrozinski~~ Pamela Schumacher Secretary	04/01/25 to 03/31/28	~~Arenac~~ Bay
Tim Banaszak	04/01/26 to 03/31/29	Bay
Richard Byrne Parliamentarian	04/01/25 to 03/31/28	Bay
Patrick Conley	04/01/24 to 03/31/27	Bay
~~Jerome Crete~~ Chris Girard	04/01/26 to 03/31/29	Bay
Shelley King	04/01/25 to 03/31/28	Bay
Kathy Niemiec	04/01/26 to 03/31/29	Bay
Carole O'Brien	04/23/24 to 03/31/27	Arenac
~~Pamela Schumacher~~ Staci Tuggle	04/01/24 to 03/31/27	Bay

Revised 05/01/202508/12/2026

Bay Arenac Behavioral Health
Quality Assessment and Performance Improvement Program
Reporting Structure
2027

