



MONROE COMMUNITY MENTAL HEALTH AUTHORITY
BOARD MEETING
October 28, 2026 – 6:00 p.m. / Aspen Room
Draft Amended Agenda

BOARD GUIDING PRINCIPLES:

- 1.1 Monroe Community Mental Health Authority (“Authority”) exists to help individuals with mental illnesses and/or intellectual/developmental disabilities so they can live, work, and play in their communities to their fullest potential. As a Certified Community Behavior Clinic (CCBHC), the Authority will provide mental health and/or substance use care/services, regardless of ability to pay, place of residence, or age, including developmentally appropriate care for children and youth.
- 1.2 Monroe Community Mental Health Authority strives to be the provider of choice for Monroe County by offering the highest quality of treatment with positive measurable outcomes, while maintaining competitive service rates with the State.
- 1.3 Monroe Community Mental Health Authority establishes and sustains a culture that values each staff member; holds staff to high standards; is fair and respectful; values creativity, and promotes collaborative thinking.
- 1.4 Monroe Community Mental Health Authority continues to establish collaborative community relationships that enable MCMHA to provide quality service to consumers.

BOARD RULES OF CONDUCT:

- a. Speak only after being acknowledged by the Chair and only to the Chair.
- b. Keep deliberation focused on the issue and don’t make it personal.
- c. Divulge all pertinent information related to agenda items before action is taken.
- d. Seek to understand before becoming understood.
- e. Seek to do no harm.

CITIZEN RULES OF CONDUCT:

- a. In order for our Board to move efficiently through the meeting agenda, we ask that everyone present conduct themselves respectfully and with decorum. Anyone who chooses not to comply with this will be asked to leave the building.

MISSION STATEMENT: Enrich lives and promote wellness.

VISION STATEMENT: To be a valued/active partner in an integrated System of Care that improves the health and wellness of our community.

CORE VALUES: Compassion, Authenticity, Trust, and Accountability.

	<u>GUIDE</u>
I. CALL TO ORDER	01 min
II. ROLL CALL	01 min
III. PLEDGE OF ALLEGIANCE	02 min
IV. CONSIDERATION TO ADOPT THE DRAFT AMENDED AGENDA AS PRESENTED	02 min
V. PUBLIC COMMENTS <i>“The Board will listen respectfully to public comments but will not respond directly during the meeting. You can expect a follow up contact from the Chief Executive Officer or representative within 24 hours if your comment is about a specific problem or complaint. Comments shall be limited to 3 minutes”.</i>	03 min/Person
VI. BOARD CHAIR REPORT A. Executive Committee B. Correspondence 1. Letter: Michigan Occupational Safety and Health Administration (MIOSHA) a. Consideration to assign the response to Lisa Grham, CEO C. Nanette McCloud has volunteered to serve on the River Raisin Clubhouse Board D. Board and Executive Leadership Holiday Event E. Questions during presentations should be relevant and not jump ahead	10 min
VII. BOARD ACTION A. Consent Calendar 1. <u>Required Approvals</u> a. Consideration to approve item 1 and adopt item 2 of the Required Approvals i. Service Contracts	25 min

ii. Regional Policies (*Executive Summary in Packet*)

FCM3023	Financial Audits of Contracts Policy
RR8037	Security of Consumer Related Information Policy

2. Board Consent Agenda

a. **Consideration to approve item 1 and 2 of the Board Consent Agenda**

- i. September 23, 2026 Board Meeting minutes and waive the reading thereof
- ii. Endorse River Raisin Clubhouse Board Meetings as a Board approved function for one board member to receive a stipend and mileage

B. Board Action Request: Building Lease – Lisa Graham

1. **Consideration to approve a five-year lease at 1180 N. Monroe Street, Monroe, MI 48162 in the amount of \$4,250 monthly, with an additional, one-time \$6,375 security deposit with the lease commencing the date upon signature of the CEO**

C. Board Action Request: 2027 Healthcare Insurance – Jim Brown

1. **Consideration to approve the 80/20 cost-sharing methodology under Public Act 152 for the 2027 health insurance plan year, replacing the current hard cap method, and to authorize the Administration to amend Article XIX of the Collective Bargaining Agreement with AFSCME Local 2529 accordingly**

D. Items removed from the Board Consent Calendar (*placeholder*)

VIII. EXTERNAL AND OWNERSHIP LINKAGE **05 min**

A. Board Committee Minutes (*Information Only*)

1. Business & Finance
2. Bylaws & Policy
3. Community Relations

B. PIHP Board Meeting Minutes (*Information Only*)

C. CMHAM Policy & Legislation Committee Report – No report for October

IX. BOARD EDUCATION **20 min**

A. FY2026 3rd Quarter Consumer Advisory Council (CAC) Report – Sarah Klawitter

B. Board Summary: Psychiatric Nurse Practitioner Cost Analysis – Lisa Graham

X. ASSURANCE OF PERFORMANCE **25 min**

A. Chief Executive Officer Report – Lisa Graham

B. FY2026 3rd Quarter MDHHS Behavioral Transformation Metrics – Lisa Graham

C. FY2026 3rd Quarter Operations Report – Bridgitte Gates

D. FY2026 August Financial Report – Amy Rottman

XI. ITEMS FOR FUTURE AGENDA **02 min**

A. Governance Policies: Ends and Executive Limitations (Section 1 & 2)

B. Governance Policies: Board Means Policies

C. Board Bylaws

XII. PUBLIC COMMENTS **03 min/person**

XIII. BOARD ANNOUNCEMENTS AND COMMENTS FOR THE GOOD OF THE ORDER **03 min/person**

XIV. ADJOURNMENT **01 min**

The next regularly scheduled meeting for the Monroe Community Mental Health Authority Board of Directors is **Wednesday, November 18, 2026** beginning at 6:00pm in the Aspen Room located at Monroe Community Mental Health Authority.



BOARD EXECUTIVE COMMITTEE

Wednesday, October 21, 2026 / 6:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Form agenda for monthly meetings.
2. Monitor long term effectiveness of the Board and Board Committees.

COMMITTEE MEMBERS

Rebecca Pasko, Chair
Becca Curley, Vice Chair
Reda Biniecki, Secretary

I. CALL TO ORDER

Rebecca Pasko called the meeting to order at 6:06pm. Rebecca Pasko, Becca Curley, Reda Biniecki, and Lisa Graham were present. Susan Radwan attended virtually as a guest.

II. ITEMS FOR DISCUSSION

- a. Review of the Draft October 28, 2026 Board Meeting Agenda – The October 28, 2026 draft agenda was reviewed along with Susan Radwan. The agenda has been structured to follow policy governance.
- b. Review of the August 26, 2026 and September 23, 2026 Board Meeting Evaluations - The committee reviewed the evaluation report for any emergent issues or trends. The report will be sent to the Board.
- d. Board and Executive Leadership Holiday Event – The survey results for date/time were provided for review. The survey determined that the majority date was for Friday, December 4, 2026 from 6:00pm-9:00pm. A "Save the Date" meeting invitation has been sent to the Board and Executive Leadership. The holiday event will take place at the Little Brown Jug.

III. ACTION ITEMS FOR FUTURE BOARD MEETING AGENDA

- a. Jan Annual Recipient Rights Report
- b. Feb FY2025 CMHSP Annual Submission
- c. Mar Election of Officers - Secretary
- d. Apr Appoint Nominating Committee
- e. May Election of Officers and PIHP Board Representative
- f. Jun Board Committee Sign Up
- g. Jul Appoint Committee Members and Chairs; FY25 Compliance Audit
- h. Aug Bylaws and Governance Policy Manual;
- i. Sep FY2026 Proposed Board Budget; and blanket motion for 2027 CMHAM Conferences, NATCON27, and Policy Bootcamp
- j. Oct N/A
- k. Nov 2027 Board Meeting Calendar
- l. Dec Board and Executive Leadership Holiday Dinner Event – December 4, 2026 at Little Brown Jug from 6:00pm-9:00pm

IV. NEXT AGENDA

- a. Review of November 12, 2026 Board Meeting agenda
- b. October Board Meeting Evaluation Report
- c. 2027 Board Meeting Calendar

V. AJOURNMENT

The meeting adjourned at 7:50pm.

VI. NEXT MEETING

The Next Meeting of the Executive Committee is scheduled for Thursday, November 12, 2026 at 6:00pm in the Aspen Room.

Respectfully submitted,

Rebecca Pasko (dp)

Rebecca Pasko
Board Chairperson

10/23/26



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LABOR AND ECONOMIC OPPORTUNITY
MICHIGAN OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION
BARTON G. PICKELMAN, DIRECTOR

SUSAN CORBIN
DIRECTOR

September 30, 2026

Complaint #: 2499663

Rebecca Curley, Board Vice Chair
Monroe Community Mental Health Authority
1001 S Raisinville Rd.
Monroe, MI 48161

Dear Rebecca Curley:

On September 29, 2026, the Michigan Occupational Safety and Health Administration (MIOSHA), General Industry Safety and Health Division received a complaint alleging safety and/or health hazards at your worksite located at:

325 Colonial Ct., Monroe, MI 48162

A list of the specific nature of the alleged hazard(s) is as follows:

1. The company conducted mold testing, and mold was identified in the HVAC system. The testing identified Chaetomium and Stachybotrys, including reported findings of both molds in HVAC/indoor samples. Despite these findings and the ongoing employee complaints, employees were subsequently told that the company had completed its due diligence. Employees continue to report serious health problems, including neurological symptoms, brain fog, migraines/headaches, new or worsening allergies and asthma, gastrointestinal problems, anxiety, heart palpitations, and other unexplained or worsening symptoms. There have also been reports of employees experiencing serious neurological events, including strokes and Bell's palsy, requiring emergency medical care and/or evaluation by neurologists. Employees are reportedly going in and out of hospitals and seeking increasing amounts of medical care. Some employees are concerned that their health is deteriorating to the point that they may no longer be able to perform their jobs. The company did not conduct a comprehensive indoor air quality investigation.

We have not determined whether the hazards, as alleged, exist at your workplace; we do not intend to conduct an on-site inspection at this time. However, you are requested to investigate the alleged conditions and make any necessary corrections or modifications within **30 calendar days** of the date of this letter. Please advise me in writing of the results of your on-site investigation and provide any **supporting documentation** of your findings. Include any applicable measurements or monitoring results, as well as a description of any corrective action you have taken or are in the

process of taking, including photographs of the corrected condition. Also, please provide me with a contact person's name and contact information in case I have further questions.

Your response should be submitted by email to enoe@michigan.gov. Please be aware that the state server will not accept emails (including attachments) that are 25 megabytes or larger.

Therefore, if your communication is greater than 25MB, you will have to divide it into several smaller emails to ensure that it is transmitted. Please include your establishment name and complaint number in the subject line of your email. Alternatively, your response can be sent by U.S. mail or fax to the street address and fax number at the bottom of this page.

This letter is not a citation or a notification of proposed penalty. If you provide this information, we will probably not need to conduct an on-site investigation. If we do not receive a response from you within **30 calendar days** indicating that appropriate action has been taken or that no hazard exists and why, an on-site inspection may be conducted.

Please note, however, that MIOSHA selects for on-site inspection a random sample of cases where we have received letters in which employers have indicated satisfactory corrective action. This policy has been established to ensure that employers have actually taken the action asserted in their letters. Any action taken by you in this matter will not automatically remove your workplace from the possibility of an unannounced on-site inspection by duly authorized representatives of MIOSHA in accordance with routine scheduling procedures currently in effect.

You are requested to post a copy of this letter and your response to it where they will be readily accessible for review by all of your employees until MIOSHA deems the case closed.

Section 65 of Act 154, the Michigan Occupational Safety and Health Act, states that an employer shall not discriminate against an employee for exercising his or her rights under Act 154. If an employee believes that he or she was discharged or otherwise discriminated against as a result of filing a complaint, the employee may file a complaint with the MIOSHA Employee Discrimination Section. The complainant has been informed of their discrimination rights under Act 154.

In addition to its function of inspecting workplaces, MIOSHA offers a wide range of safety and health related services in response to the needs of the working public, both employers and employees. These services include training and education, consultation, voluntary compliance programs, and assistance in correcting hazards.

The MIOSHA Consultation Education and Training (CET) Division offers programs and services without charge to assist you in resolving occupational safety and health issues. Consultations may be available through telephone, email, or in some cases through an on-site visit. The CET Division has free publications, a free video-loan library, and sample written programs, which are available on the MIOSHA web page located at www.michigan.gov/cet. To discuss or request CET services, call (517) 284-7720.

If you have any questions concerning this matter, please contact me at (517) 256-8048 or at enoe@michigan.gov. Your personal support and interest in the safety and health of your employees is appreciated.

Sincerely,

Eric Eno

Eric Eno
Industrial Hygienist

EE:sw



MCMHA Finance Board Action Request

Service Contract(s) and Amendments

Wednesday, October 28, 2026

Action Requested : Consideration to approve Mental Health Service Contract(s) / Amendments as presented:

PROVIDER	CONTRACT TERM	SERVICE DESCRIPTION	FY2024-2026 RATE / UNIT		FY2026-2028 RATE / UNIT		ADDITIONAL INFORMATION
Hospitals							
N/A							
Community Living Supports (CLS) / Supported Employment / Respite							
Vessels of Compassion Therapy Center LLC	11/1/2026-9/30/2028	Individual Therapy - 30 Minutes			\$68.96	Encounter	This is a brand new agreement that will expand our provider network and help ensure sufficient access to services for the individuals we serve.
		Individual Therapy - 45 Minutes			\$92.12	Encounter	
		Individual Therapy - 60 Minutes			\$225.72	Encounter	
		Family Therapy w/o patient present - 50 Minutes			\$90.18	Encounter	
		Family Therapy with patient present - 50 Minutes			\$90.18	Encounter	
		Supported Employment			\$6.53	Per 15 Minutes	
		Supported Employment - Multiple consumers served			\$3.27	Per 15 Minutes	
					\$2.18		
			\$1.64				
			\$1.31				
			\$1.09				
Chaturi Edrisinha	11/1/2026-9/30/2025	Behavioral Identification Assessment			\$750.00	Encounter	This is a brand new agreement that will expand our provider network and help ensure sufficient access to services for the individuals we serve.
		Behavior Treatment Plan Monitoring/Review			\$150.00	Encounter	
		Family training			\$150.00	Encounter	
		Treatment Planning			\$100.00	Encounter	
Autism / Waiver Services							
N/A							



REVIEW AND ADOPT / October 28, 2026 Regional (CMHPSM) Policies

Executive Summary:

- There are two regional policies for adoption.
- This document serves as an Executive Summary of the regional policies for review and approval at the October 28, 2026 Board Meeting.

<u>REGIONAL POLICIES:</u>	<u>REASON FOR REVISION:</u>	<u>SUMMARY:</u>
FCM3023 Financial Audits of Contractors Policy	<ul style="list-style-type: none"> • Revised to clarify requirement when audit waiver grants and to raise the limit for when a waiver can be given. 	<p><u>PURPOSE:</u> To establish guidelines and standards regarding the financial audit obligations outlined in provider contracts, and to provide guidelines for exempting a contractual provider from the independent auditor requirements.</p> <p><u>POLICY:</u> It is the policy of the CMHPSM that annual audits conform to Generally Accepted Auditing Standards (GAAS) and all applicable federal and state laws and regulations regarding accounting practices and standards.</p> <p><u>ALIGNS WITH GOVERNANCE POLICIES:</u> Yes</p>
RR8037 Security of Consumer Related Information Policy	<ul style="list-style-type: none"> • Regional review 	<p><u>PURPOSE:</u> To establish a policy and procedure to ensure reliability of data and security of confidential health information.</p> <p><u>POLICY:</u> It is the policy of the Community Mental Health Partnership of Southeast Michigan (CMHPSM)) to protect the confidentiality and security of all consumer/individuals served related information. This includes the clinical record as well as encounter, demographic, financial data and data from outside sources regarding consumers/individuals served or services provided through the CMHSPM.</p> <p><u>ALIGNS WITH GOVERNANCE POLICIES:</u> Yes</p>



BOARD OF DIRECTORS REGULAR MEETING MINUTES
September 23, 2026

Present: Rebecca Pasko, Chairperson; Becca Curley, Vice Chairperson; Reda Biniecki, Secretary; Rob Calhoon; John Cullen; Henry Werner; Nanette McCloud; Juanita Roscoe; Doug Stevens; and John Burkardt

Excused: Dave Swartout and LaMar Frederick

Absent: N/A

Staff: Lisa Graham

Guests: 7 guests were present.

I. CALL TO ORDER

The Board Chair, Rebecca Pasko, called the meeting to order at 6:04 p.m.

II. ROLL CALL

Roll Call confirmed a quorum existed.

III. PLEDGE OF ALLEGIANCE

The Pledge of Allegiance was led by Rebecca Pasko.

IV. CONSIDERATION TO ADOPT THE DRAFT AGENDA AS PRESENTED

The items in the Board Packet were as presented on the agenda. Rebecca Pasko asked if there were any objections to the agenda. Hearing no objections, the agenda was approved by unanimous consent.

V. CONSIDERATION TO APPROVE THE MINUTES FROM THE AUGUST 26, 2026 BOARD MEETING AND WAIVE THE READING THEREOF

The August 26, 2026 Board Meeting minutes were as presented in the Board Packet. Rebecca Pasko asked if there were any changes to the minutes. Hearing no changes, the August 26, 2026 minutes were approved by unanimous consent.

VI. PUBLIC COMMENTS

Stephan Pietszak, River Raisin Clubhouse Supervisor, addressed the Board on the upcoming events at the River Raisin Clubhouse and passed out flyers for the events; at the Michigan Clubhouse Conference we received a recommendation, not a suggestion, to have a CMH board member join the Clubhouse Advisory Board and asked if anyone would be interested; provided detailed information on the upcoming Philanthropy Playoffs; we received a CIP Grant where any member has private insurance or non-Medicaid can attend the Clubhouse and we will receive \$50.00 per day. Last year we brought in over \$170,000 that goes to Monroe CMH; and the Clubhouse Accreditation is coming up in September 2027 and have begun preparing for that.

VII. ITEMS FROM THE BOARD CHAIR

- a. **Executive Committee**
 - i. The Executive Committee reviewed the draft agenda for tonight's meeting. There were no questions for the Executive Committee from the Board.
- b. **Correspondence**
 - i. There was no correspondence during September.
- c. **Board Workshop**
 - i. Sue Radwan will be talking about how governance plays into our board meetings and how we use governance to evaluate the Chief Executive Officer. It is new information, please attend. The workshop is from 9:00am to 12:00pm and from 12:00pm to 1:00pm we will have a financial discussion and set up another workshop to review.
- d. **Governance Policy Bootcamp**
 - i. If anyone is available and interested in attending the Governance Policy Bootcamp we now have a member that cannot attend.
- e. **River Raisin Clubhouse Advisory Board**
 - i. Nanette McCloud showed interest in the River Raisin Clubhouse Advisory Board.
 - ii. If the Board is interested in starting a team for the Philanthropy Playoffs to let Rebecca Pasko know.
- f. **Presentations**
 - i. Board members that ask questions during presentations should be relevant and not jump ahead.

VIII. ITEMS FROM THE CHIEF EXECUTIVE OFFICER

- a. Lisa Graham presented the CEO Report highlighting: State/RFP Update; SAMHSA Grant; FY2027 Rates; Professional Development Day; NAMI Walk; Peer Supports Supervisor; Community events CMH participated in; and upcoming events.

MCMHA participated in the following community events in September:

- 9/8: Annual Suicide Awareness and Remembrance Vigil
- 9/16: Men on a Mission Job & Resource Fair
- 9/23: State Walk-a-Mile

Upcoming Events:

- 9/24: MCMHA CEO Coffee Hour, 3168 Lewis Ave, Ida, MI, 10-11am
- 10/16: Ghosts, Goblins and Grief, Trunk or Treat, Mall of Monroe, 5-6:30pm
- 10/17: NAMI Walk, 3000 Fuller Rd., Ann Arbor, 12-3:30pm (2-mile walk)
- 10/22: Mental Health Summit, MCCC, La-Z-Boy Center, 9-1pm
- 10/28: Town Hall, ISD, 3-5pm

If you are interested in attending the Mental Health Summit you will need to register. It is free of cost. Lisa Graham expects this to be a special event with keynote speaker Joe Reed.

IX. RELATIONSHIP WITH THE REGION, COUNTY, AND OTHERS

- a. **Regional PIHP Board Meeting Minutes** – Rebecca Pasko commented that we reviewed the budget, contract renewals, and got information similar to what Lisa Graham has already shared about the RFP. There is not a whole lot of new information.
- b. **CMHAM Policy and Legislation Committee Report** – Rebecca Pasko commented that the committee met this month however there is not a lot happening as they are not meeting in Lansing. They are running for office now. They also commented on the RFP.

X. BOARD COMMITTEE MINUTES

Rebecca Pasko asked if there were any questions for the following Board Committees:

- a. Business & Finance
- b. Bylaws & Policy
- c. Community Relations
- d. Performance Evaluation – Rebecca Pasko commented that the committee met for Lisa Grahams 3rd quarter evaluation. Our evaluation process may be changing after we talk more with Sue Radwan. The evaluation of Lisa was very positive. Lisa's contract is written so that if she receives a satisfactory her contract automatically renews.

There were no questions from the Board on committee minutes..

XI. PRESENTATIONS

- a. **Years of Service Awards** – Lisa Graham commented that three times a year we have an All Staff Meeting and we recognize staff that have been with Monroe CMH for five years or longer. Lisa likes to bring this to the Board for recognition and show longevity.
 - i. Carissa Lautzenheiser and Brianna Yoder 5 Years
 - ii. Tim O'Neil 10 Years
 - iii. Amy Lewis and Adam Anastasoff 15 years
 - iv. Katie DiCarlo 20 Years

The Board thanked staff for their dedication and congratulated them on their years of service.

- b. **FY2026 3rd Quarter Human Resources Report** – Jim Brown presented the 3rd quarter Human Resources Report against the Strategic Plan highlighting information on new hires, resignations/ terminations, current vacancies, grievances, exit interviews, corporate training, and compliance. Overall, 3rd quarter reflects a strong training performance and the ability to respond to compliance demands. Next quarter, Jim will provide an annual overview for exit interviews.
- c. **FY2027 Proposed Budget** – Amy Rottman presented the proposed FY2027 Budget at the August Board Meeting in detail. We brought the proposed budget in August in case the Board wanted something changed or if the public had comments. Given the conversation last month and where we sit now, the Medicaid capitation rates are still in draft form. We are proposing that the Board approve the budget and if we need to amend based on the final capitation rates we expect to bring that forward to the Board during 1st quarter of FY2027.

Rob Calhoon expressed concern with cost of the Rehmann Contract and asked if CMH could hire directly. Lisa Graham responded that the amount for the Rehmann Contract represents many functions across finance. CFO, CFO Deputy, accounting, to name a few. It is almost every financial service that the agency requires. We have 1 direct hire. Three years ago, the Board engaged in a 5-year contract with Rehmann. We are now entering year 4 of that contract. Part of our Strategic Plan we will talk about what is available and at least look and bring every option to the Board as the Rehmann Contract winds down. Rehmann does financial services for a number of CMHs across the state of Michigan. Some have had their own CFOs for a long time and others have found themselves in the same position we are in and contracted with Rehmann.

- i. **Consideration to Approve the FY2027 Proposed Budget as Presented**

John Cullen moved; Henry Werner supported. No debate followed. Rebecca Pasko asked if there were any objections to approve the FY2027 Proposed Budget. Hearing no objections, the Board approved the FY2027 Proposed Budget as Presented by a unanimous vote.

d. July Financial Report

- i. Amy Rottman presented the July Financial Report and provided monthly highlights:
 1. Statement of Position: Cash in the bank is \$21,752,615.
 2. Estimated surplus (due back to the PIHP) is \$2,809,503.
 3. Estimated surplus from CCBHC Medicaid Operations is \$2,166,010.
 4. Estimated deficit from CCBHC non-Medicaid operations \$2,264,254.
 5. Estimated deficit from other General Fund spend is \$95,160.
 6. Total estimated fund balance addition is \$688,045.
- ii. There are 2 payments for CCBCH that were not received for July. The quality performance bonus and the amount for the CCBHC allocation. Those were learned about in August but not reflected in these financial statements. The quality performance bonus is \$850,000 and the non-Medicaid relief is \$87,000. These two numbers are a one-time adjustment to the net position.
- iii. We do expect that Healthy Michigan is going to continue to be an area that we see some losses in FY2027 as fewer people are eligible with legislative changes to Healthy Michigan.

XII. UNFINISHED BUSINESS

- a. No unfinished business from August.

XIII. NEW BUSINESS

- a. Service Contracts – Alicia Riggs presented the service contracts.

i. Consideration to Approve the Service Contracts as Presented

Reda Biniecki moved; Juanita Roscoe supported. No debate followed. Rebecca Pasko asked if there were any objections to approve the Service Contracts. Hearing no objections, the Board approved the Service Contracts as presented by a unanimous vote.

- b. Administrative Contracts – Alicia Riggs presented the administrative contracts.

Nanette McCloud commented on the rates for a Nurse Practitioner and asked if the contract information included whether they were contracted or a direct hire.

Nanette McCloud moved to pull the Nurse Practitioner contracts; Henry Werner supported. Debate followed.

After much Board discussion, Rebecca Pasko asked if Nanette McCloud would like to rescind her motion. Nanette McCloud declined.

Lisa Graham explained that voting yes to pull the Nurse Practitioner contracts would affectively end the contracts at the end of next week and would leave approximately 500 consumers without a Nurse Practitioner and interrupt their services. Lisa requested the Board not to vote yes as it would put us at risk for consumer care. A no vote would allow CMH to continue consumer care.

Rebecca Pasko recommended that the Nurse Practitioner contracts be approved tonight and to request Lisa Graham to bring back a cost analysis for contracting versus direct hire to the Board next month. This will protect the consumers we are serving. By pulling these contracts tonight it would put around 500 consumers with an interruption to their services.

After much Board discussion, Rebecca Pasko asked if Nanette McCloud would like to rescind her motion. Nanette McCloud withdrew her motion.

Rebecca Pasko requested Lisa Graham to present a cost analysis for contracting versus direct hire for Nurse Practitioners at the October Board Meeting.

i. Consideration to Approve the Administrative Contracts as Presented

Doug Stevens moved; John Burkardt supported. No debate followed. Rebecca Pasko asked if there were any objections to approve the Administrative Contracts. Hearing no objections, the Board approved the Administrative Contracts as presented by a unanimous vote.

XIV. PUBLIC COMMENTS

There were no public comments.

XV. BOARD MEMBER ANNOUNCEMENTS

Reda Biniecki commented on the thought of someone having to change their provider pulled at her heart strings.

Henry Werner commented on the good discussion this evening and agreed with Reda Biniecki. Henry hopes the providers have the same sensitivity and keep that in mind and not take advantage of us for those reasons.

Doug Stevens appreciated the comments and clarity on the issues. Don't be afraid to speak up.

Rebecca Pasko reminded board members of Lisa Graham's coffee hour tomorrow from 10-11am in Ida. Also, please let us know if you can attend the Governance Policy Bootcamp.

XVI. ADJOURNMENT

Rebecca Pasko adjourned the meeting at 7:36pm.

Submitted by,

Reda Biniecki, Secretary

LG/dp
9/30/26

BOARD ACTION REQUEST

October 28, 2026

REQUEST:

MCMHA Board of Directors to approve a five-year lease at 1180 N. Monroe Street, Monroe, MI 48162 in the amount of \$4,250 monthly, with an additional, one-time \$6,375 security deposit. Rent and security deposits will be \$10,625 on or before the effective date of February 1, 2027.

Upon approval by the Board, the lease commences on the date the Chief Executive Officer signs. This will give MCMHA approximately 90-days to prepare the building space to be up and running by February 1, 2027.

Background:

The need for additional leased space is driven by substantial growth in both consumer demand and organizational staffing. Over the past year, the number of consumers served by prescribers increased from 1,648 to 1,953, while services delivered grew from 8,373 to 9,625—an increase of 19% and 15%, respectively. This growth has significantly increased demand for prescriber offices and telehealth capacity, requiring the organization to convert three additional rooms in the PHS hallway into telehealth spaces to accommodate service needs.

At the same time, staffing has grown from 137 FTEs in 2023 to 172 FTEs in 2026, representing a 25% increase in workforce size. The current facility can no longer adequately support the need for additional offices, telehealth rooms, meeting space, and training areas. While temporary space modifications have helped address immediate needs, they are not a sustainable long-term solution. Leasing additional space is necessary to support continued organizational growth, maintain quality service delivery, and provide employees and consumers with an appropriate and functional environment.

RECOMMENDATION:

MCMHA Board of Directors to approve a five-year lease at 1180 N. Monroe Street, Monroe, MI 48162 in the amount of \$4,250 monthly, with an additional, one-time \$6,375 security deposit with the lease commencing upon signature of the Chief Executive Officer.

BOARD ACTION REQUEST

2027 Monroe CMHA Health Insurance
October 21, 2026

REQUEST:

To approve the 80/20 employer/employee cost-sharing method under Michigan Public Act 152 of 2011 for the 2027 health insurance plan year contingent upon ratification by AFSCME Local 2529. Approval of this action will replace the current Hard Cap calculation method with the 80/20 method beginning January 1, 2027.

BACKGROUND:

MONROE CMHA HEALTH INSURANCE COST ANALYSIS & PUBLIC ACT 152 COMPLIANCE OVERVIEW

1. Overview of Public Act 152 of 2011

Public Act 152 — the *Publicly Funded Health Insurance Contribution Act* — was enacted to control and limit public employer spending on medical benefit plans. The Act requires public employers, including CMHAs, to adopt one of three annual compliance methods:

- **Hard Cap (Dollar Limits)**
- **80/20 Cost-Sharing**
- **Annual Exemption**

Monroe CMHA currently uses the **Hard Cap** method, which is also reflected in the Collective Bargaining Agreement.

2. Applicability to Monroe CMHA

The Act applies to:

- All full-time and part-time employees
- Union and non-union staff
- Elected officials (where applicable)

3. Hard Cap History and Annual Increases

Hard Cap increases over the last three years:

- **2025:** +2.9%
- **2026:** +2.9%
- **2027:** +3.0%

These increases are set by the Michigan State Treasurer and are tied to medical CPI.

4. Health Insurance Premium Trends (2024–2027)

Across all plans and tiers, Monroe CMHA’s health insurance premiums have increased:

- **2024 → 2025: +6.7%**
- **2025 → 2026: +12.8%**
- **2026 → 2027: +11.6%**
- **Total 4-year increase: ≈ +31%**

Premium inflation has significantly outpaced Hard Cap increases.

5. Employee Contribution Trends Under Hard Cap

Employee bi-weekly contributions increased sharply from 2024 to 2027:

	HMO \$0 / 80%	HMO HRA 80% \$3,000/\$6000	HMO HSA 100% \$1600 / \$3200	PPO HSA \$3500 /
2024				
Ee Bi-Weekly Rates (26 Pays)				
Employee	\$98.16	\$0.00	\$0.00	\$45.88
Employee + One	\$327.04	\$79.04	\$84.25	\$201.57
Family	\$375.28	\$65.27	\$71.79	\$218.45
	HMO \$0 / 80%	HMO HRA 80% \$3,000/\$6000	HMO HSA 100% \$1600 / \$3200	PPO HSA \$3500 /
2027				
Ee Bi-Weekly Rates (26 Pays)				
Employee	\$215.85	\$64.73	\$86.51	\$112.59
Employee + One	\$615.17	\$252.48	\$304.75	\$367.35
Family	\$733.37	\$279.99	\$345.34	\$423.59
	HMO \$0 / 80%	HMO HRA 80% \$3,000/\$6000	HMO HSA 100% \$1600 / \$3200	PPO HSA \$3500 /
% Increase 2024 - 2027	101%	274%	321%	107%
Average employee share of premium cost (2027):	45%	23%	27%	32%

Employee cost burden has increased substantially due to the mismatch between Hard Cap growth and premium inflation.

6. Employer Cost of Switching to 80/20

Estimated employer cost increase for 2027 if switching to 80/20:

- **\$199,387.49** (Assumes current enrollment distribution remains the same.)

7. Offsetting Savings

A. Disability Insurance Savings (Guaranteed for 3 Years)

- Short-term disability savings: **\$71,192.52**
- Long-term disability savings: **\$11,863.62**
- **Total annual savings: \$83,056.14**

B. Healix Health Savings

- 2025 savings: **\$256,600**
- 2026 projected savings: **\$219,000**
- 16 employees currently enrolled opting out of Authority's insurance plans.

These savings reduce the net financial impact of switching to 80/20.

8. Summary of Key Data Points

- Hard Cap increases average **≈3% annually**
- Premium inflation averages **≈10–12% annually**
- Employee contributions increased **100–300%** over three years
- Employer cost to switch: **\$199k**
- Offsetting savings: **\$83k (disability) + \$219k (Healix)**
- Hard Cap now results in employees paying **23–45%** of total premium cost

PERSUASIVE CASE FOR SWITCHING TO 80/20

Executive Summary

Monroe CMHA's current Hard Cap method no longer aligns with our financial realities, workforce needs, or mission. Premium inflation has outpaced Hard Cap increases for four consecutive years, resulting in steep and unsustainable employee cost burdens. The 80/20 method now offers a more equitable, competitive, and strategically aligned approach to health insurance cost-sharing.

1. Hard Cap Is No Longer Sustainable

A. Hard Cap increases are too small to keep pace with premium inflation

Hard Cap increases: **≈3% annually** Premium increases: **≈10–12% annually**

This structural mismatch guarantees that employees absorb more cost every year.

B. Employee contributions have reached crisis levels

From 2024 to 2027, employee bi-weekly contributions increased:

- **HMO HSA: +321%**
- **HMO HRA: +274%**
- **HMO \$0: +101%**
- **PPO HSA: +107%**

Family coverage under Hard Cap now exceeds **\$19,000 per year** for some plans.

This level of cost burden is not sustainable for a public behavioral health workforce.

2. 80/20 Restores Balance and Fairness

Under 80/20:

- Employees pay **20%** of premium cost
- Employer pays **80%**
- Cost-sharing becomes equitable across plans
- Employees are no longer penalized for choosing richer coverage
- Family coverage becomes affordable again

This model aligns with the intent of Act 152: **shared responsibility**, not disproportionate burden.

3. The Employer Cost Increase Is Manageable and Offset by Savings

The estimated employer cost to switch in 2027 is **\$199,387.49**.

However, Monroe CMHA has **significant offsets**:

A. Disability Insurance Savings (Guaranteed)

- **\$83,056.14 annually**

B. Healix Health Savings

- **\$219,000 projected for 2026**

Combined offsets: **≈\$302,000**, which exceeds the cost of switching.

The net financial impact is **neutral or favorable**, depending on enrollment shifts.

4. 80/20 Strengthens Recruitment and Retention

Monroe CMHA competes for:

- Clinicians
- Nurses
- Case managers
- Crisis responders
- Peer support specialists

These roles are highly sensitive to benefit affordability.

The continued employment of the Hard Cap calculation likely has and will continue to impact:

- Employee retention
- Difficulty in attracting experienced candidates
- Overall morale

Switching to 80/20 directly supports:

- Workforce stability
- Competitive positioning
- Employee wellness
- Reduced vacancy pressure

5. Alignment With Monroe CMHA's Mission

Our mission is **“to enrich lives and promote wellness.”**

That mission also applies to our workforce.

Hard Cap undermines employee wellness by:

- Increasing financial stress
- Reducing access to affordable care
- Penalizing families
- Creating inequity between plan choices

80/20 supports:

- Employee well-being
- Financial stability through affordability
- Access to healthcare
- Organizational values
- Long-term sustainability

6. Recommendation

Based on:

- Premium trends
- Hard Cap inflation mismatch
- Employee cost escalation
- Recruitment and retention pressures
- Guaranteed insurance savings
- Healix Health offsets
- Collective bargaining alignment
- Organizational mission

I recommend that the Board approve the adoption of the 80/20 cost-sharing method for the 2027 plan year.

This transition:

- Restores fairness in cost sharing
- Protects employees
- Supports workforce stability
- Aligns with our mission
- Maintains fiscal responsibility
- Positions Monroe CMHA competitively in the behavioral health market
- Aligns with FY2027 budget revenue and priorities

Next Steps:

1. Obtain Board approval to transition to 80/20
2. Notify union leadership (Modifies collective bargaining agreement)
3. Update employee contribution tables
4. Prepare employee communication
5. Continue to evaluate healthcare plan options to reduce overall cost.

RECOMMENDATION:

Consideration to approve the 80/20 cost-sharing methodology under Public Act 152 for the 2027 health insurance plan year, replacing the current hard cap method, and to authorize the Administration to amend Article XIX of the Collective Bargaining Agreement with AFSCME Local 2529 accordingly.

Approval of this action will replace the current Hard Cap calculation method with the 80/20 method beginning January 1, 2027.



BOARD BUSINESS OPERATIONS COMMITTEE
Wednesday, October 7, 2026
6:00pm

MAJOR COMMITTEE RESPONSIBILITIES

- Review and monitor the Strategic Plan of the Authority as it relates to Business Operations and Administrative Support including Finances, Contracts, Facilities, Technology Infrastructure, and Customer Service.
- Review and make recommendations to the full Board regarding changes in Services, Contracts, and Budget.
- Monitor the organization's finances and strategies for managing overages and shortfalls.

COMMITTEE MEMBERS

LaMar Frederick, Chair; Reda Biniecki; Rob Calhoon; John Cullen; Henry Werner; and Rebecca Pasko (Ex-Officio)

DRAFT MINUTES

I. CALL TO ORDER

LaMar Frederick called the meeting to order at 6:33pm. LaMar Frederick, Reda Biniecki, John Cullen, Henry Werner, Rob Calhoon, Rebecca Pasko, and Lisa Graham were present.

II. BUSINESS OPERATIONS

A. Financial Reporting

1. At a Board Workshop there was considerable discussion on financial reporting and whether it was efficient or effective. The discussion led to the financial reports being quite in depth and that it may be better to have a reader's digest version and have the financial report presented quarterly or as needed. Unless there is a significant change in the budget there will be nothing to report. The Business Committee would meet monthly to review the financials and flag any significance that needs to be brought to the Board.
 - a. Lisa Graham commented that this is a perfect time to move in the new reporting direction. We are wrapping up FY2026 right now and that will be completed by the end of February. Since the new fiscal year started October 1st there isn't a whole lot of meaningful information to report. Ken Melvin would be happy to come to the Business & Finance Committee meeting to present the financial statements in depth. Not much changes from month to month. If there is a significant change it would be flagged by the committee and recommended to be added to the next board agenda. A quarterly presentation of the financials would be sufficient.
 - b. Rob Calhoon requested for finance to add a line on the financial Executive Summary regarding if we are operating within our ratios.
2. The committee recommends that the monthly financials be included in the Board Packet for information only and the Financial Report presentations shall occur in January, April, July, August, September, or as needed if there are any significant changes to the budget.

B. Agreement with the County

1. The Board had considered if a millage would be needed to help support non-Medicaid services. Richard Carpenter and Lisa Graham met with Mike Bosanac at that time regarding the county's contribution in case there could be an increase and then a millage would not be needed. After much discussion, the committee suggested for Lisa Graham to revisit the discussion with the county.
2. The committee recommends Lisa Graham to move forward with developing a proposal for the Monroe County Commissioners regarding General Fund.

III. Salary Survey

- A.** LaMar Frederick asked if it was time to do a salary survey. Lisa Graham responded that within the fiscal year 2027 we will likely want to do a salary survey.

IV. NEXT AGENDA

- C.** Financial Report.

V. PARKING LOT

- a. Chief Financial Officer
- b. Cash Flow with CCBHC and MDHHS

IV. ADJOURNMENT

The meeting adjourned at 7:14pm.

The next Business Operations Committee Meeting is scheduled for **Wednesday, November 4, 2026** beginning at 6:00pm in the Aspen Room.

Respectfully submitted,

LaMar Frederick (qp)

LaMar Frederick
Committee Chair

10/9/26



BOARD BUSINESS OPERATIONS COMMITTEE
Wednesday, October 21, 2026
4:00pm

MAJOR COMMITTEE RESPONSIBILITIES

- Review and monitor the Strategic Plan of the Authority as it relates to Business Operations and Administrative Support including Finances, Contracts, Facilities, Technology Infrastructure, and Customer Service.
- Review and make recommendations to the full Board regarding changes in Services, Contracts, and Budget.
- Monitor the organization's finances and strategies for managing overages and shortfalls.

COMMITTEE MEMBERS

LaMar Frederick, Chair; Reda Biniecki; Rob Calhoon; John Cullen; Henry Werner; and Rebecca Pasko (Ex-Officio)

DRAFT MINUTES

I. CALL TO ORDER

LaMar Frederick called the meeting to order at 4:00pm. LaMar Frederick, Reda Biniecki, John Cullen, Rebecca Pasko, and Lisa Graham were present. Rob Calhoon and Henry Werner were excused. Jim Brown attended as a guest.

II. BUSINESS OPERATIONS

A. Board Action Request: 2027 Healthcare Insurance

1. Jim Brown provided a health insurance cost analysis and Public Act 152 compliance overview as well as a persuasive case for switching to the 80/20 cost-sharing method for the 2027 healthcare insurance plan year.
 - a. Monroe CMH Authority's current hard cap method no longer aligns with our financial realities, workforce needs, or mission. Premium inflation has outpaced hard cap increases for four consecutive years, resulting in steep and unsustainable employee cost burdens. The 80/20 method now offers a more equitable, competitive, and strategically aligned approach to health insurance cost-sharing.
2. The request is for the Board to consider approval of the 80/20 cost-sharing methodology under Public Act 152 for the 2027 health insurance plan year, replacing the current hard cap method, and to authorize the Administration to amend Article XIX of the Collective Bargaining Agreement with AFSCME Local 2529 accordingly
 - a. The committee recommends the Board approve at their October 28, 2026 Board Meeting.

B. Building Lease

1. The building lease for North Monroe Street is in the hands of legal counsel looking over the details. We want to be sure that the soundproof barrier wall is included in the lease as well. If the lease is received in time for the October 28th Board Meeting it will be brought to the Board for consideration. If it is not ready, it will be brought in November.

II. NEXT AGENDA

- A.** Financial Report.

III. PARKING LOT

- a. Chief Financial Officer
- b. Cash Flow with CCBHC and MDHHS

IV. ADJOURNMENT

The meeting adjourned at 4:41pm.

The next Business Operations Committee Meeting is scheduled for **Wednesday, November 4, 2026** beginning at 6:00pm in the Aspen Room.

Respectfully submitted,

LaMar Frederick (fp)

LaMar Frederick
Committee Chair

10/22/26



BOARD BYLAWS & POLICY COMMITTEE

Wednesday, October 7, 2026

5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Monitor and maintain the Board Bylaws and Board Governance Policy Manual
2. Review Authority and Regional Policy, Procedures, and Exhibits
3. Make recommendations to the full Board

COMMITTEE MEMBERS

Becca Curley, Chair; John Burkardt, Rob Calhoon, John Cullen, Reda Biniecki, and Rebecca Pasko (Ex-Officio)

DRAFT MINUTES

I. CALL TO ORDER

Becca Curley called the meeting to order at 5:04pm. Becca Curley, John Burkardt, Rob Calhoon, John Cullen, Reda Biniecki, Rebecca Pasko, and Lisa Graham were present. Dr. Frances Jackson, Parliamentarian, attended as a guest.

II. COMMITTEE BUSINESS

A. Regional Policies

FCM3023	Financial Audits of Contracts Policy
RR8037	Security of Consumers Related Information Policy

1. The committee recommends the Board adopt the regional policies at the October 28, 2026 Board Meeting.

III. REVIEW OF BOARD BYLAWS AND GOVERNANCE POLICY MANUAL

A. The committee reviewed ARTICLE VII. Board Committees in the Bylaws and made amendments as needed.

1. The committee reviewed policy language for committee nominations by the Chair.

- a. Dr. Jackson strongly suggested adding a process in the Bylaws of how a board member is removed from a committee. Rebecca Pasko is in support of bringing it to the Executive Committee and recommending a motion be added to the board agenda for removal of someone from a committee.
- b. Dr. Jackson will provide language for removal of a committee member and on committee meetings specific to Section K.

B. Dr. Jackson suggested a special meeting of the Board when taking the revised Bylaws to the Board for adoption. The Bylaws Articles are to be read one by one and adopt the amendments of each Article. For a revision, you must send the Bylaws to the Board with a 30-day notice of when you will be voting. If feedback is received, board members will have an opportunity to offer an amendment at the board table by a motion and a 2nd in order to debate. If necessary, a motion can be made at the beginning of the minute to provide a time limit for debate on each Article.

1. Committee members discussed using the December 16, 2026 Board Meeting for the reading of the revised Bylaws.

C. Dr. Jackson commented that for revised governance policies, it does not require previous notice. If you don't provide notice it has to be a 2/3 vote. If you do provide notice you only need a majority vote. You can take individual policies, Sections of the policy manual, or the full policy manual.

D. Becca Curley requested for committee chairs to submit their committee scope to Dawn Pratt and add them to the Bylaws to be prepared for the next meeting.

IV. NEXT MEETING

- A. Review of ARTICLE VII: Board Committees, committee meetings - Section K
- B. Review of ARTICLE VII: Board Committees, removal of a committee member
- C. Create Governance Policy for Nominations and Confirmation for Board Appointments

V. PARKING LOT

- A. Review of Board Bylaws
- B. Review of Board Governance Policy Manual

VI. AJOURNMENT

The meeting adjourned at 6:27pm.

VII. NEXT MEETING

The Next Meeting of the Board Bylaws & Policy Committee is scheduled for **Wednesday, November 4, 2026** at 5:00pm.

Respectfully submitted,

Becca Curley (dp)

Becca Curley
Committee Chair

10/9/26



BOARD COMMUNITY RELATIONS COMMITTEE

Wednesday, October 21, 2026
5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. To foster a trusting relationship between MCMHA and the community it serves.

COMMITTEE MEMBERS

Reda Biniecki, Chair; Nanette McCloud; Juanita Roscoe; Doug Stevens; Vacancy; and Rebecca Pasko (Ex-Officio)

DRAFT MINUTES

I. CALL TO ORDER

Reda Biniecki called the meeting to order at 5:00pm. Reda Biniecki, Nanette McCloud, Doug Stevens, Juanita Roscoe, Rebecca Pasko, and Lisa Graham were present.

II. COMMUNITY PERCEPTION AND RESPONSE SURVEY UPDATE

- A. Reda reviewed the questions that Ken Papenhagen, former Community Relations Chair, had developed with the intent of sending out a survey to see how the community perceives MCMHA when the Board was considering if a millage was necessary. The Board did not move forward with the millage therefore we did not move forward with the survey.
 1. Lisa Graham commented that she would still like to survey the community to get a baseline measure to know if Monroe County knows about us. This will be a helpful baseline to have with goals set in the community awareness piece of the Strategic Plan.

III. MONROE RADIO SPOT – Included in Community Awareness Strategic Plan goals.

IV. COMMUNITY AWARENESS STRATEGIC PLAN GOALS

- A. Lisa Graham provided a brief overview of the community awareness priorities and goals within the draft Strategic Plan. Highlighting community outreach, community presentations, when people call CMH to start tracking how they learned about us, community partner referrals, increasing community partnerships, reducing stigma, and providing education and awareness.
 1. Committee members suggested education and awareness in schools.
 2. Reda Biniecki suggested informational resources for the schools to hand out when needed.
 3. Nanette McCloud suggested a quarterly lunch hour or a set aside room for students that have questions.
 - a. Lisa Graham commented that it would be great to provide education and resources to the schools, however, it would be up to the schools to tell us where we would fit in.

V. COMMUNITY COMMITTEES AND WORKGROUPS WITH CMH PRESENCE

- A. The committee requested a list of community committees and workshops with CMH presence. Lisa Graham commented that there are actually three separate lists that will be provided to the committee. 1) Community committees and workgroups that CMH has presence on; 2) Community events that CMH has been invited to participate and provide resources; and 3) CMH hosted events.

VI. TOWN HALL

- A. The Town Hall is an annual event. This is the time to share with our community the highlights and successes of the year. James Colainne will be attending to provide an update on the state and federal level. When Lisa and Crystal complete introductions, Reda Biniecki will say a few words on behalf of the Community Relations Committee. There will be a Q&A session. The best part of the Town Hall is the consumer awards and the community partnership award. The Town Hall will take place at the ISD on October 28th from 3:00pm-5:00pm.
 1. Lisa Graham commented that next year a Town Hall Committee will be created to help streamline the community partner nominations. When staff nominate community partners for an award they will receive a certificate for being nominated. The Town Hall Committee will develop criteria and review nominations and select one crystal award to be presented.
 2. Rebecca Pasko requested to add Town Hall Board Awards to the parking lot.

VII. WHAT'S UP?

- A. BHUC Staff made a proposal for making a TIK TOK for BHUC Awareness. They put together a great proposal for creating 3 TIK TOKs a week with a different focus for each. No protected health information or consumers would appear in TIK TOK Awareness.
- B. Lisa Graham commented that we are sending our crisis team to the Monroe Hight School this evening to be a part of a vigil and offer support to those that have been affected by the tragic loss of two students. Lisa will also be attending and bringing resources.

- C. Lisa Graham commented that our first blog has been added to the agency website. On the website, go over to "About" and it will give you an arrow to go to the blog. The title of the blog is: Medicaid Work Requirements and Mental Health: What Healthy Michigan Plan Members Need To Know.
- D. Lisa Graham and Crystal Palmer attended Gabby's Ladder Trick or Treat. There were a lot of kids that came through. We passed out candy to the kids and resources to parents. It was a great event.
- E. Safe Talk /Veterans Event is scheduled for next week. Wayne blank put this event together and CMH will have a booth there.
- F. Lisa Graham commented on ways that staff receive recognition: during our Professional Development Days three times a year, during our All Staff Meeting staff are recognized by other staff for achieving licensure, continued education, certifications, personal successes, years of service certificates, and core values certificates; annual MCMHA Awards; Star of the Month newsletter; and sending an anniversary card on staff's annual anniversary. Lisa handwrites messages to all staff.
 - 1. Reda Biniecki commented that these are all good things for retention. It feels good to be recognized

VIII. FAMILY COUNSELING AND SHELTER SERVICES

- A. Reda Biniecki commented that the Family Counseling and Shelter Services is now closed. They will be selling the Sunrise Home.

IX. NEXT AGENDA

- A. Community Committees and Workgroups with CMH Presence

X. PARKING LOT

- A. Strategic Planning / Community Awareness Budget
- B. Community Festivals / Participation
- C. Veterans
- D. Farmer and Skilled Trade Suicide Prevention
- E. Town Hall Promotion / Board Awards

XI. AJOURNMENT

The meeting adjourned at 6:04pm.

XII. NEXT MEETING

The Next Meeting of the Community Relations Committee is scheduled for **Thursday, November 12, 2026** at 5:00pm in the Aspen Room.

Respectfully submitted,

Reda Biniecki (dp)

Reda Biniecki
Committee Chair

10/23/26

**COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
REGULAR BOARD MEETING MINUTES
October 12, 2026**

Members Present for In-Person Quorum: Judy Ackley, Rebecca Curley, LaMar Frederick, Rebecca Pasko, Mary Serio, Holly Terrill, Andy Yurkanin

Members Not Present For In-Person Quorum: Matt Ikle, Bob King, Molly Welch Marahar, Alfreda Rooks, Annie Somerville

Staff Present: **PIHP staff:** James Colaianne, Chief Executive Officer; Holly Schippers, Chief Financial Officer; Joelen Kersten, Substance Use Services Clinical Director, Stephannie Weary, HR and Regional Coordinator; Stacy Pijanowski, Regional Administrative Assistant
Regional staff: Connie Conklin, Livingston CMHA Executive Director; Lisa Graham Monroe CMH Executive Director, Kathryn Szewczuk, Lenawee CMHA Executive Director, Trish Cortes, Washtenaw CMH Director

Guests Present:

- I. Call to Order
Meeting called to order at 6:00 p.m. by Board Chair J. Ackley.
- II. Roll Call
 - Quorum confirmed.
- III. Consideration to Adopt the Agenda as Presented
Motion by R. Curley, supported by R. Pasko, to approve the agenda
Motion carried unanimously
- IV. Consideration to Approve the Minutes of the September 16, 2026 Meeting and Waive the Reading Thereof
Motion by M. Serio, supported by R. Curley, to approve the minutes of the September 16, 2026 meeting and waive the reading thereof
Motion carried unanimously
- V. Audience Participation
None
- VI. Old Business
 - a. Board Information: CMHPSM Finance Reports
 - H. Schippers presented.
 - The state is going to do a recoupment and repayment for all FY2026 funds with the adjusted rates, which are higher. The state's eligibles projections were wrong, which accounts for the discrepancy. There will be an estimated \$6 million of additional revenue for the region for FY2026 based on the adjusted rates.
 - With the FY2026 rate adjustments, the numbers currently in the finance report may improve.

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

VII. New Business

a. Board Action: CMHPSM Regional Board Officer Elections

Board Chair Candidates

- Judy Ackley
- Mary Serio
- There were no nominations from the floor.
- By a show of hands, the Board elected J. Ackley for another term as Chair.

Board Vice-Chair Candidate

- Rebecca Pasko
- There were no nominations from the floor.

Motion by L. Frederick, supported by R. Curley, to vote for R. Pasko as Vice-Chair by acclamation

Motion carried unanimously

Board Secretary

Motion by R. Pasko, supported by A. Yurkanin, to elect M. Serio for another term

Motion carried unanimously

- There were no other nominations from the floor.

b. Information: Conflict of Interest Form Submissions

- Board members sign the disclosure statement on an annual basis.
- Serving on both the Regional Board and the CMH board does not automatically qualify as a potential conflict of interest.

c. Board Action: Employee Service Acknowledgement: Danielle Brunk

*See board action below in item e.

d. Board Action: Employee Service Acknowledgement: Liz Stankov

*See board action below in item e.

e. Board Action: Employee Service Acknowledgement: Bob Bull

Motion by M. Serio, supported by H. Terrill, to issue the proclamations acknowledging the 5 years of service to the CMHPSM region by Danielle Brunk, Liz Stankov, and Bob Bull.

Motion carried unanimously

- The Board will sign the proclamations electronically, which will then go to the employees.

f. Board Action: Board Service Proclamation: Ralph Tillotson

- R. Tillotson has retired from both the Regional Board and the Oversight Policy Board. He was a founding member of both boards.
- J. Ackley and K. Szewczuk shared special memories and experiences that they have had with R. Tillotson

Motion by H. Terrill, supported by R. Pasko, to issue a proclamation acknowledging Ralph Tillotson's years of service as both a Regional Board member and an Oversight Policy Board member

Motion carried unanimously

g. Board Action: FY2027 Annual Contract List Revisions

- J. Colaianne shared the tracked-changes version of the contracts list, which incorporates the changes that were discussed at the September Board meeting.

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

Motion by M. Serio, supported by R. Pasko, to approve the revised CMHPSM FY2027 annual contract las indicated, and authorize the CMHPSM CEO to execute the contracts as presented
Motion carried unanimously

- h. Board Action: FY2027 Cost of Living Adjustment Options (COLA)
- The Board approved a COLA of 2.5% for Tier A and 1.5% for Tiers B – E as presented in the FY2027 budget at the September 16, 2026 meeting. The Board indicated at that time that they wanted to reconsider the COLA % for employees.
 - H. Schippers presented the projected impact on the budget using several different COLA increases.

Motion by L. Frederick, supported by R. Pasko, to approve a 3.5% COLA for FY2027 for all tiers of the pay scale, Tiers A - E
Motion carried unanimously

- i. Board Action: FY2026 Contract Amendment
- Motion by R. Curley, supported by A. Yurkanin, to authorize the CMHPSM CEO to execute the contracts and amendments as presented**
Motion carried

Roll Call Vote

Yes: J. Ackley, R. Curley, L. Frederick, R. Pasko, M. Serio, H. Terrill, A. Yurkanin

No:

Not present for in-person vote: M. Ikle, B. King, M. Welch Marahar, A. Rooks, A. Somerville

VIII. Reports to the CMHPSM Board

a. Information: CEO Report to the Board

- Matt Berg officially retired as of September 30, 2026. The CMHPSM team contributed toward a gift for Matt, which included an AI bird feeder and a smart travel mug.
- The PIHP currently has 2 open positions. The positions are being held for now; no active recruitment.
- CMHPSM is still participating in the 4-PIHP suit against the state regarding the FY25 contract.
- Depositions are in the process of being scheduled for the lawsuit about the maximum allowable ISF that PIHPs may hold.
- The CMHAM Fall Conference is Monday, 10/26/26, and Tuesday, 10/27/26.
- The new state hospital opened in Northville recently.
- The placeholder for potential procurement no longer says August 2026 in the system. There is no date listed.
- The PIHP received the FY2027 rates and amendments for the FY2026 rates at 6:30 pm on 9/30/26. The final FY2027 rates wilresult in approximately \$1 million more than the draft rates were projecting.

b. No September Oversight Policy Board Meeting Update

IX. Adjournment

Motion by A. Yurkanin, supported by M. Serio, to adjourn the meeting
Motion carried

- The meeting was adjourned at 6:55 pm.

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

- X. Supplemental Materials
 - a. Appendix A: Board Attendance Tracking Sheet

Mary Serio, CMHPSM Board Secretary

DRAFT

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

Consumer Advisory Council

2025-2026

MONROE
COMMUNITY
MENTAL
HEALTH
AUTHORITY

Making a Difference Where It Counts



What is the Consumer Advisory Council?

The CMH Consumer Advocacy Council members work as advocates to promote services, supports, communication, opportunities, and legislation for all individuals recovering from mental illness, developmental and intellectual disabilities, and emotional impairments, who are Community Mental Health (CMH) consumers and families of consumers past and present. The Council works to create an awareness of mental health issues for all people recovering, through education and advocacy.

The Council combats stigma.



C.A.C

“

The mission of the MCMHA
Consumer Advocacy Council is to
provide advocacy and support
through a partnership with Monroe
Community Mental Health
Authority participants, staff, and the
community.

”

Board Members for 2025-2026



Chair: Tim L

Co-Chair: Sarah K

Secretary: Dominic B

Monroe RCAC Rep:

Sarah K and Amber E

Membership and Meetings



New Members Are Joining

- ❖ **CAC is currently made up of 7 members.**
- ❖ **We have finished a new flyer that has been passed out at the Raisinville office to help increase attendance. (Please see flyer provided)**
- ❖ **We will be adding this new flyer to new consumer folders.**
- ❖ **We meet the second Tuesday of the month at the Raisinville office 1:30pm-2:30pm. (Note time change)**

Adam Anastasoff

Program Director

Presented Services Provided

by the

Behavioral Health Urgent Care

&

Crisis Mobile

On

05/12/2026

MONROE
COMMUNITY
MENTAL
HEALTH
AUTHORITY



Nicole Yeary

Direct Support Professional
Crossroads Clubhouse

Presenting Services

Offered by

River Rasinville Clubhouse

T.B.D.

Community Events



❖ 2026 Monroe County Fair.

CAC worked 2 days this year passing out close to 100 flyers.
Prize wheel was a hit.

❖ Town Hall Meeting 10/28/2026

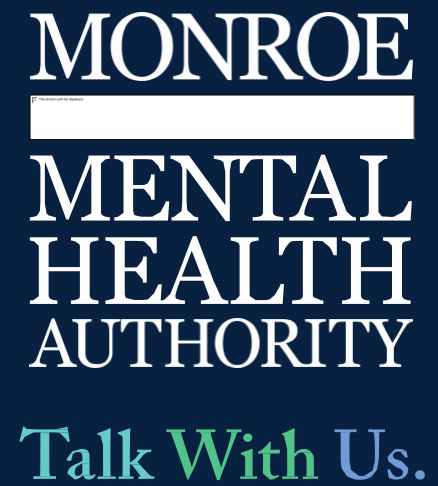


**RCAC Annual Training
will be held
November 12th this year
in Washtenaw again.**

2026 Walk A Mile Rally

- ❖ This year's Walk-A-Mile was held September 23rd in Lansing.
- ❖ We utilized Clubhouse Van to help on cost.





Board Summary: Psychiatric Nurse Practitioner Cost Analysis

Monroe Community Mental Health Authority — October 2026

Monroe CMHA currently utilizes psychiatric nurse practitioners (NPs) through LocumTenens.com at hourly rates of \$170–\$178 per hour, which fall squarely within the 2026 psychiatric NP locum market range of \$160–\$185 per hour. This analysis compares the cost and operational impact of (1) employing psychiatric NPs versus psychiatrists, and (2) contracting NP services through a locums agency versus direct hire. All comparisons are based on **hourly cost**.

1. NP vs. Psychiatrist: Hourly Cost Comparison

Direct Hire (Fully Loaded Cost Including 52% Fringe Benefits)

- **Psychiatric NP:**
 - Salary midpoint: \$140,000
 - Fully loaded hourly cost: \$102/hr
- **Psychiatrist:**
 - Salary midpoint: \$290,000
 - Fully loaded hourly cost: \$213/hr

Direct-hire psychiatrists cost approximately \$111/hr more than NPs, or 109% higher on an hourly basis.

Locums Market Rates

- Psychiatric NP: \$170–\$178/hr (Monroe CMHA rates)
- Psychiatrist: \$270–\$285/hr

Locums psychiatrists cost \$100–\$115/hr more than NP locums, consistent with national market data and the attached analysis.

Conclusion: Across both employment models, psychiatric NPs represent a significant cost savings compared to psychiatrists.

2. Locums NP vs. Direct-Hire NP: Hourly Cost Comparison

- Direct-hire NP: \$102/hr (fully loaded)
- Locums NP: \$170–\$178/hr

Locums NP coverage carries a \$68–\$76/hr premium over direct hire. However, this premium must be evaluated in the context of the operational and risk-transfer advantages provided by locums staffing.

3. Operational Advantages of Locums NP Coverage

The attached market analysis outlines several advantages that materially offset the higher hourly rate of locums coverage:

A. Risk Transfer

Locums agencies assume responsibility for:

- Malpractice insurance
- Workers' compensation
- Credentialing and licensing compliance
- Payroll taxes and administrative overhead

This removes substantial financial and regulatory exposure from Monroe CMHA.

B. Recruitment Efficiency and Continuity of Care

- Psychiatric NP locums can be placed immediately, avoiding recruitment delays of 6–9 months for NPs and 9–18 months for psychiatrists.
- Locums prevent service gaps, stabilize caseloads, and maintain continuity during turnover or psychiatrist vacancies.
- Current NP locums (Pasha Streeter (4 years agency experience) and Tamiko Rice (1 year agency experience) provide high institutional knowledge, immediate productivity, and seamless integration into Monroe's workflows.

C. Turnover Cost Avoidance

Replacing a provider typically costs 50% of annual compensation. Locums staffing eliminates turnover costs entirely.

D. Specialty Expertise

Psychiatric NPs command higher rates than general NPs due to:

- Scarcity of qualified psychiatric providers
- Higher clinical complexity
- Elevated liability risk

- Specialized medication management expertise

Current NP locums meet these criteria and are priced appropriately within market norms.

4. Strategic Implications for Monroe CMHA

1. While psychiatrists remain the preferred provider type for complex psychiatric care due to their advanced medical training, diagnostic capability, and regulatory authority, Monroe CMHA can achieve meaningful financial and operational efficiencies by strategically deploying psychiatric nurse practitioners (PMHNPs) to manage routine and lower-acuity cases. This blended model preserves the advantages of psychiatrist leadership while reducing overall system cost.
2. Locums NP coverage is more expensive than direct hire, but provides critical operational advantages—risk transfer, immediate staffing, continuity of care, and elimination of turnover costs.
3. In a market with severe psychiatrist shortages, NP locums offer a cost-saving and clinically stabilizing alternative that ensures uninterrupted psychiatric services.
4. Monroe’s current NP locum rates (**\$170–\$178/hr**) are **market-competitive** and reflect the specialized expertise and institutional knowledge of the providers currently assigned.

5. Summary Table (Hourly Basis)

Category	NP Direct Hire	NP Locums	Psychiatrist Direct Hire	Psychiatrist Locums
Hourly Cost	\$102/hr	\$170–\$178/hr	\$210 - \$240/hr	\$270–\$285/hr
Benefits Included?	No (adds 52%)	Yes	No (adds 52%)	Yes
Risk Transfer	None	Full	None	Full
Recruitment Lag	Moderate	None	Long	None
Cost Ranking	Lowest	Moderate	High	Highest

CEO REPORT

October 28, 2026

REGIONAL/STATE UPDATES

State/RFP Updates: No updates.

SAMHSA Grant: No updates.

Fiscal Year 2027 Rates: The PIHP has received final FY27 rates. While the outcome was mixed, Region 6 received an additional \$6 million through the FY26 rate adjustment process and approximately \$1 million more than was reflected in the draft FY27 rates. Despite these adjustments, MCMHA's FY27 capitated budget remains essentially flat, with no overall increase compared to FY26.

Provider Network Adequacy: In response to the final FY27 rates, the Community Mental Health Partnership of Southeast Michigan has begun communicating with providers across the region regarding the current fiscal outlook and the likelihood that provider rate increases will not be feasible in the near term. The Partnership and regional CMHSPs continue to advocate for additional funding and sustainable investments to support service delivery and provider network stability. As a reminder, Region 6 last increased rates for community-living support services (CLS) in FY25. Inability to increase provider rates, specifically CLS rates, is anticipated to stress our network.

CCBHC Sustainability: On October 23, 2026, the Michigan Department of Health and Human Services (MDHHS), in partnership with the National Council for Mental Wellbeing, convened leaders from Michigan Certified Community Behavioral Health Clinics (CCBHCs) to discuss long-term sustainability strategies, with a particular focus on addressing non-Medicaid-funded service costs. MCMHA participated in this statewide discussion and will continue to monitor and engage in sustainability planning efforts.

LOCAL

Mental Health Summit: MCMHA's annual Mental Health Summit, *Advocacy is Love in Action*, was a tremendous success, drawing more than 100 attendees and filling the auditorium at the La-Z-Boy Center. Keynote speaker Joe Reid, founder of the peer support nonprofit organization *Broken People*, delivered an engaging presentation on the "7 Ups" of Advocacy. The keynote was followed by a panel discussion featuring Sheriff Troy Goodnough, Monroe County Health Department Director Jamie Dean, Monroe County Opportunity Program (MCOP) Director Stephanie Kaszperzak, and MCMHA's Chief Executive Officer. The event highlighted the importance of advocacy, collaboration, and community engagement in advancing mental health awareness and support.

River Raisin Clubhouse: Congratulations to the River Raisin Clubhouse team for raising nearly \$5,000 through the 2026 Philanthropy Playoffs sponsored by the Community Foundation of Monroe County.

Beyond its fundraising impact, the Philanthropy Playoffs provided a valuable opportunity to increase community awareness of Clubhouse services and strengthen public understanding of the supports available to individuals living with mental health challenges.

MCCC Partner of the Year Award: On October 26, 2026, Monroe County Community College's Board of Trustees recognized MCMHA with its Partner of the Year Award. This honor reflects the strength of our collaborative relationship with the College and affirms MCMHA's commitment to being a trusted community partner. We are grateful for this recognition and proud of the positive impact our partnership continues to have within the community.

Fundraiser: MCMHA extends its sincere appreciation to Elegant Restaurant for its support of mental health services in our community. On October 12, the restaurant hosted a fundraising event and generously donated 10% of the day's sales to MCMHA. Community partnerships such as this not only provide valuable financial support but also help raise awareness of the importance of mental health and the services available to local residents.

Community Events: Community Events: MCMHA participated in the following events in October:

- 10/9: Faith in Blue
- 10/11: River Raisin Clubhouse bowling fundraiser
- 10/16: Ghosts, Goblins and Grief, Trunk or Treat, Mall of Monroe
- 10/17: NAMI Walk and raised (x) to donate from MCMHA
- 10/21: Supporting our Community Vigil, Monroe High School
- 10/22: MCMHA's Mental Health Summit
- 10/27: Veteran's Safe Talk event
- 10/28: MCMHA's Town Hall

Upcoming Events: As part of MCMHA's ongoing commitment to community engagement and service, staff are participating in a friendly agency-wide donation drive to collect Thanksgiving meal items. Contributions will be assembled into food baskets and distributed to individuals and families we serve, helping to support community members during the holiday season while reinforcing MCMHA's culture of compassion and giving.

Respectfully Submitted,

A handwritten signature in cursive script that reads "Lisa Graham".

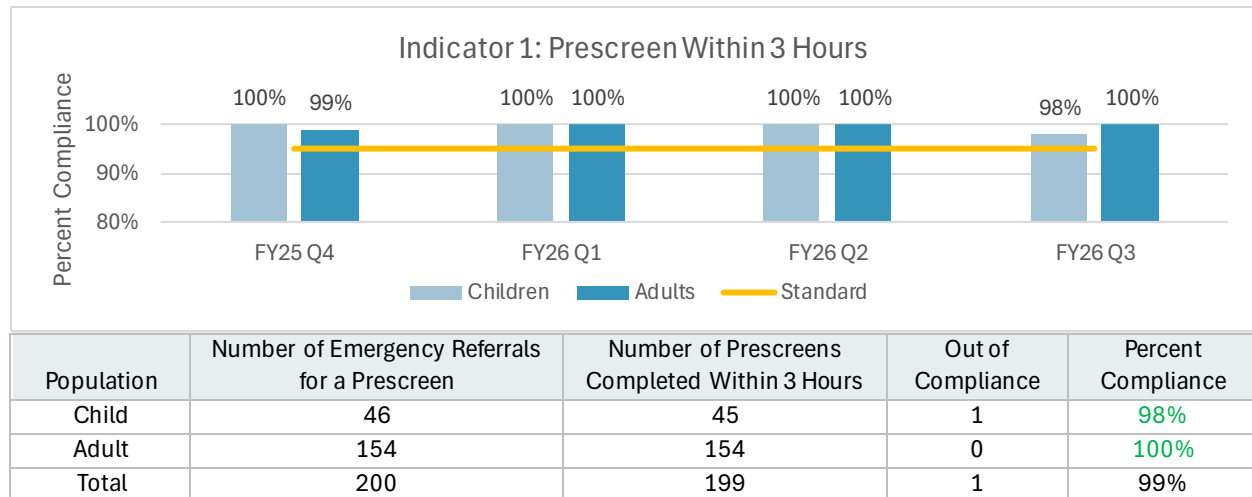
Lisa Graham, CEO

Compliance Report on Performance Improvement

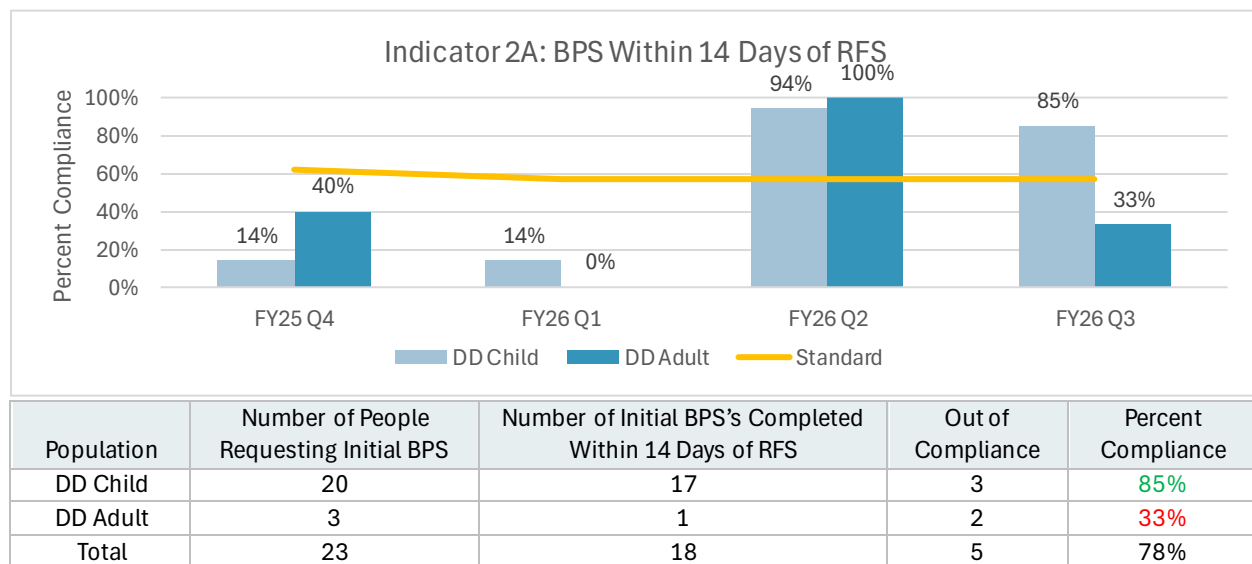
Fiscal Year 26 Quarter 3
(4/1/26 – 6/30/26)

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

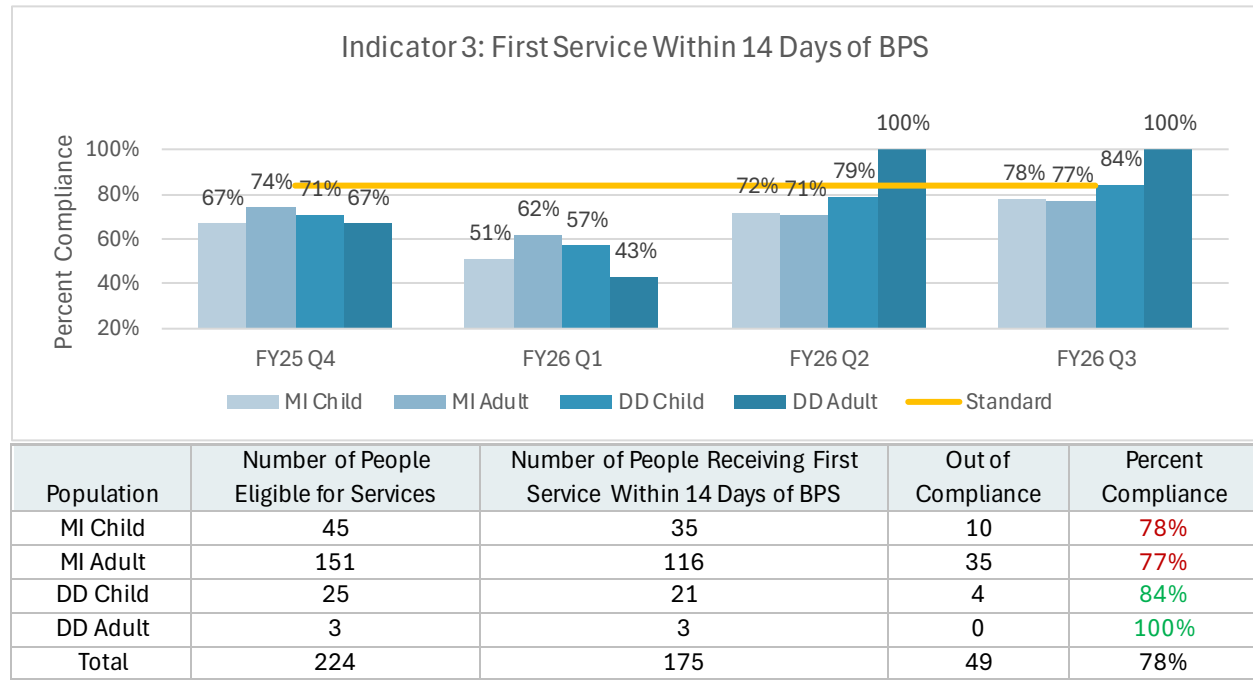
Indicator 1: The percent of all adults and children receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within three hours. [Effective 10/1/25, MDHHS no longer requires reporting on this indicator. The previous standard was 95%.](#)



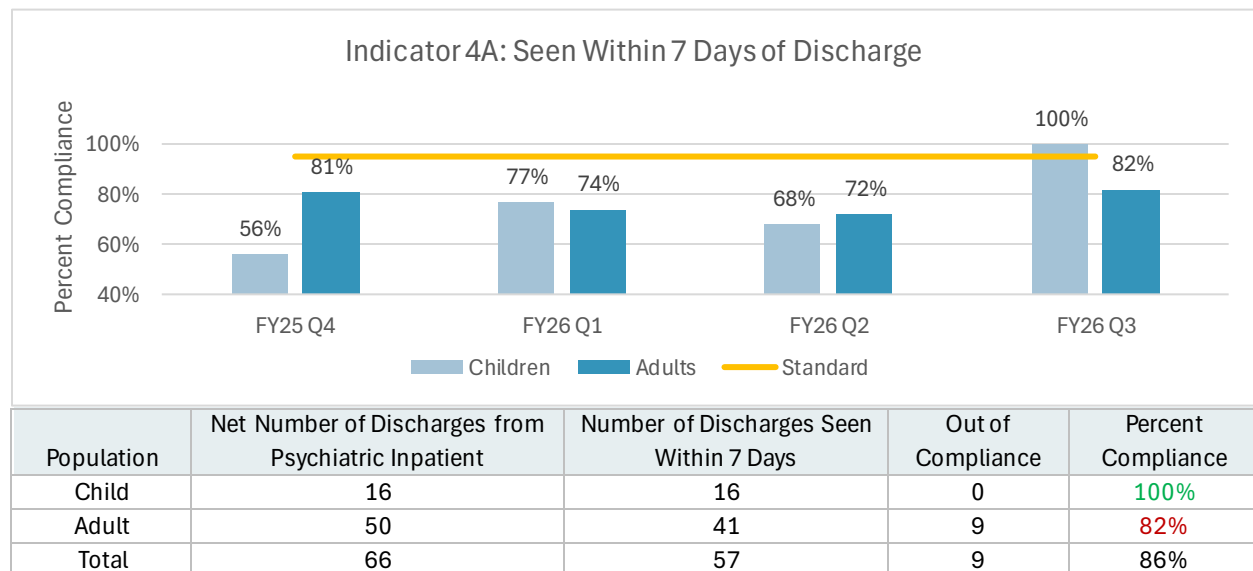
Indicator 2A: The percentage of new persons during the quarter receiving a completed biopsychosocial (BPS) assessment within 14 calendar days of a non-emergency request for service. [Effective 10/1/25, data from consumers receiving CCBHC services \(primarily MI Adult and MI Child populations\) is excluded from Indicator 2A. The new FY26 MDHHS standard is 57%.](#)



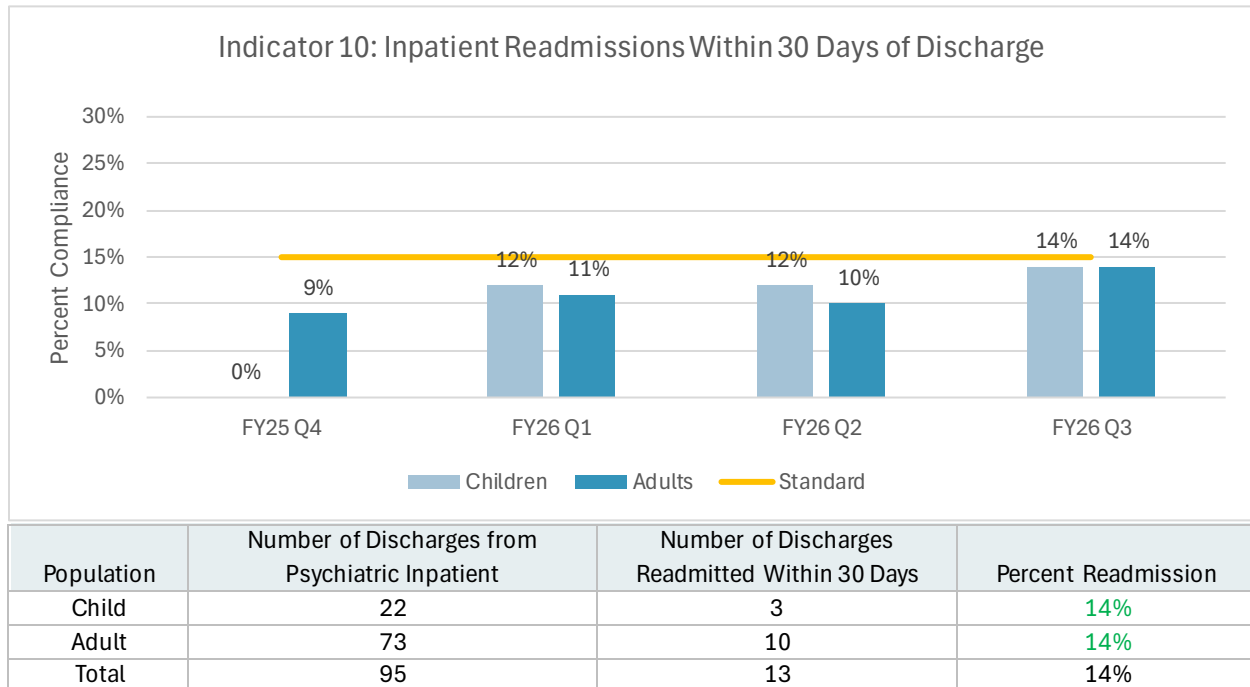
Indicator 3: Percentage of new persons during the quarter starting any medically necessary on-going covered service within 14 days of completing a non-emergent biopsychosocial (BPS) assessment. [Effective 10/1/25, MDHHS no longer requires reporting on this indicator. The previous standard was 83.8%.](#)



Indicator 4A: The percent of discharges from a psychiatric inpatient unit who are seen for follow-up care within seven days. [Effective 10/1/25, MDHHS no longer requires reporting on this indicator. The previous standard was 95%.](#)



Indicator 10: The percent of MI and DD children and adults readmitted to an inpatient psychiatric unit within 30 days of discharge. [Effective 10/1/25, MDHHS no longer requires reporting on this metric. The previous standard was 15% or less.](#)



MDHHS Behavioral Health Quality Transformation Metrics

MEASURE	BENCHMARK	MCMHA RATE FY26 Q3
IET14AD Initiation of SUD Treatment: New episodes, after which the individual initiated treatment through an inpatient SUD admission, outpatient visit, telehealth or intensive outpatient encounter or partial hospitalization, or received medication within 14 days of diagnosis.	40%	32.8%
IET34AD Engagement of SUD Treatment: Initiation-compliant consumers who had additional SUD services or medications within 34 days of that initiation visit.	15%	5.2%
FUH Follow-Up after Hospitalization for Mental Illness: The percentage of discharges for members six years of age and older who were hospitalized for a principal diagnosis of mental illness or intentional self-harm, and who had a mental health follow-up service within the first 30 days after discharge.	Adults: 62% Children: 79%	Adults: 76.5% Children: 90.9%
FUM Follow-Up after Emergency Department visit for Mental Illness: The percentage of discharges for members six years and older who had an Emergency Department visit for a principal diagnosis of mental illness or intentional self-harm, and who had a mental health follow-up service within the first 30 days of discharge.	Adults & Children: 60.8%	Adults: 57.5% Children: 88%
FUA30 Follow-Up after Emergency Department visit for Substance Abuse: The percentage of Emergency Room visits for individuals aged 13 and older who had a principal diagnosis of substance use disorder (SUD), or any diagnosis of drug overdose, and who had a follow-up service within the first 30 days of discharge.	Adults: 36.3% Children: 35.6%	Adults: Not Available Children: Not Available
APM Metabolic Monitoring for Children and Adolescents on Antipsychotics: Continuously enrolled consumers 1 to 17 years of age who were dispensed an antipsychotic medication at least twice during the measurement year that received blood glucose and cholesterol testing.	27.6%	27.7%

APP1-17 Use of First-Line Psychosocial Care for Children on Antipsychotics: Continuously enrolled consumers 1 to 17 years of age who had a new prescription for an antipsychotic medication that had a qualifying Psychosocial Care service between 90 days before the prescription and 30 days after the prescription.	65.6%	78.6%
ADDINIT Initiation Phase for Children with ADHD: Percentage of children ages 6 to 12 with a prescription dispensed for ADHD medication, who had one follow-up visit with a practitioner with prescribing authority during the 30-day Initiation Phase.	52.6%	83.4%
ADDMAIN Continuation and Maintenance Phase for Children with ADHD: Percentage of children ages 6 to 12 with a prescription dispensed for ADHD medication who remained on the medication for at least 210 days and who, in addition to the visit in the Initiation Phase, had at least two follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ended.	61.2%	Not Available
SSD Diabetes Screening for People with Schizophrenia or Bipolar Disorder Using Antipsychotic Medications: The percentage of consumers 18 to 64 years of age with schizophrenia, schizoaffective disorder, or bipolar disorder, who were dispensed an antipsychotic medication and had a glucose or A1c test in the measurement year.	79.21%	79.1%
ODD Use of Pharmacotherapy for Opioid Use Disorder: Continuously enrolled consumers 18-64 years of age who had at least one qualifying OUD service and at least one qualifying OUD pharmacotherapy event during the measurement year.	70.4%	83%
SAA Adherence to Antipsychotic Medications for Individuals with Schizophrenia: Continuously enrolled consumers 18+ years of age with schizophrenia or schizoaffective disorder who were dispensed antipsychotic medications at least two time during the measurement year whose antipsychotic medications covered at least 80% of the treatment period.	65.9%	79.1%

OPERATIONS REPORT

October 28, 2026

TRUSTED COMMUNITY PARTNER

Strategic Plan Goal 2: *Serve as a Responsive and Reliable Community Partner*

Revel Marketing Updates:

- Quarterly Community Newsletter was sent out. Open rate held steady at 49% in third quarter, strong for a quarterly external community newsletter (typical external e-news averages 18-25%).
- 3 – monthly employee newsletters have gone out. Open rate ranges from 54% to 62%, consistently outperforming typical employee newsletter benchmarks (industry average is usually 20-30%)
- Monthly Social Media content posting
- Created a Facebook QR code
- H.R. 1 blog written and posted on website
- Blog section added to website
- SEO/AEO website improvements
- Creation of Peer Support and Peer Recovery Coach flyers
- BHUC Mental Health Awareness social campaign developed – ads will run 10/1 through 10/31. Ads will raise awareness of mental health and the full range of services MCMHA provides, and BHUC. As October 10th is World Mental Health Day.
- Updates to brochures on website
- Monroe Swag Store will open from November 2nd through November 16th, with shipping to occur on December 8th.

Community Outreach Report

Quarter 4 – Fiscal Year 2026 (July –September)

During the fourth quarter, Monroe CMHA continued to strengthen community partnerships and increase public awareness of behavioral health services through participation in local events, presentations, and community engagement activities.

Community Outreach Activities (July - September)

Staff participated in the following outreach events and community initiatives:

- **CEO Coffee Hour** – Tim Hortons, Monroe (July 2026)
- **Monroe County Fair** – Outreach booth (August 2–8, 2026)
- **Monroe County Health Department Back to School Health Fair** – 8/1/2026
- **FMC Resource Fair** – 8/5/2026
- **Salvation Army Community Carnival** – 8/15/2026
- **End of Summer Event** – 8/21/2026
- **Veteran's Resource Fair** – 8/25 and 8/26/2026
- **CMH Presentation to Monroe Public School staff** – 8/27/2026
- **Gabby Grief Center event** – 8/29/2026
- **Suicide Awareness and Remembrance Vigil** – 9/8/2026
- **YMCA Bedford Active Older Adult Health and Resource Fair** – 9/10/2026
- **RAW Annual Picnic** – 9/12/2026

- **Men on a Mission Job and Resource Fair** – 9/16/2026
- **State WAM Event** – Lansing (9/23/2026)
- **CEO Coffee Hour** – Old 23 Grille, Ida - 9/24/2026

Upcoming Community Outreach Activities

The following outreach events are currently scheduled for the upcoming quarter:

- **Transition Council Roadshow** – Bedford - 10/7/2026
- **Faith In Blue** – Opportunity Center – 10/9/2026
- **Charity Fundraiser sponsored by elegante Mexican Restaurant** – 10/12/2026
- **Gabby's Grief Center** – 10/16/2026
- **Mental Health Summit** – 10/22/2026
- **MonArc Monroe Trunk or Treat** – 10/23/2026
- **SAFE Talk Suicide Prevention for Veterans Event** – MCCC Cafeteria – 10/27/2026
- **Downtown Monroe Trunk or Treat** – 10/28/2026
- **Community Town Hall** – located at Monroe Intermediate School District - 10/28/2026

Summary

Community outreach efforts during Quarter 4 focused on increasing public awareness of Monroe CMHA services, fostering collaborative relationships with community organizations, and expanding access to behavioral health information and resources. Planned outreach activities for the upcoming quarter will continue to support the organization's commitment to community engagement, education, and improving access to behavioral health services throughout Monroe County.

SERVICES PROMOTE RECOVERY

Strategic Plan Goal 4: At All Levels of the Organization, Services Provided Meet the Needs of the Customer

Customer Services

Quarter 4 Grievance Summary

Fiscal Year 2026 (July – September)

A total of **12 grievances** were received during the fourth quarter of Fiscal Year 2026. Consistent with previous quarters, most grievances involved requests for changes in providers, prescribers, therapists, or Case Services Managers (CSMs).

July 2026

Total Grievances Received: 5

Grievance Type	Outcome
Request for New Prescriber (2)	Consumers elected to remain with their current prescribers following reconciliation meetings.

Request for New Prescriber (1)	Granted.
Request for New CSM (1)	Granted.
Eisenhower Center Concern (1)	Resolved.

August 2026

Total Grievances Received: 5

Grievance Type	Outcome
Request for New Therapist	Granted.
Billing Concern - Calls Not Returned Timely	Resolved.
Request for New Prescriber	Granted.
Request for New Prescriber	Consumer elected to remain with current prescriber following a reconciliation meeting.
Termination of PR Contract	Pending.

September 2026

Total Grievances Received: 2

Grievance Type	Outcome
Request for New CSM	Resolved

Quarterly Summary

During Quarter 4, 75% of grievances (9 of 12) involved requests for changes in clinical providers, therapists, prescribers, or case management staff. Several concerns were successfully resolved through reconciliation meetings, allowing consumers to continue services with their existing providers after concerns were addressed. When appropriate, requests for provider or case management changes were granted to support consumer choice and satisfaction.

Most grievances were resolved during the reporting period, with only one grievance remaining pending at quarter-end regarding the termination of a provider contract. The low volume of grievances and successful resolution of most concerns indicate continued effectiveness in responding to consumer concerns and supporting positive service experiences.

Kiosk Satisfaction Survey Results

July 2026

A total of **45 survey responses** were received:

- **Behavioral Health Urgent Care (BHUC):** 7 responses, **4.95-star average**
- **Lobby:** 28 responses, **4.39-star average**
- **Prescriber Hallway:** 10 responses, **4.74-star average**

Lobby Feedback Highlights

- Suggestion to provide toys for children in the lobby waiting area.

August 2026

A total of **34 survey responses** were received:

- **Behavioral Health Urgent Care (BHUC):** 6 responses, **4.58-star average**
- **Lobby:** 23 responses, **4.39-star average**
- **Prescriber Hallway:** 5 responses, **4.38-star average**

September 2026

A total of **31 survey responses** were received:

- **Behavioral Health Urgent Care (BHUC):** 8 responses, **4.52-star average**
- **Lobby:** 17 responses, **4.31-star average**
- **Prescriber Hallway:** 6 responses, **4.80-star average**

Lobby Feedback Highlights

- One individual reported having to wait for their worker.
- Keep up the good work, always make us feel like family.
- Tiffany in "Intake" was very kind, knowledgeable and an asset to your establishment
- So good.

Overall Trends

A total of **110 survey responses** were received during Quarter 4.

- **BHUC** maintained strong satisfaction scores throughout the quarter, with ratings ranging from **4.52 to 4.95 stars**.
- **Prescriber Hallway** satisfaction remained consistently high, ranging from **4.38 to 4.80 stars**, and showed improvement in September.
- **Lobby** satisfaction remained stable and consistently exceeded the organizational benchmark of **4.0 stars**, averaging between **4.31 and 4.39 stars** throughout the quarter.

- All three service areas-maintained satisfaction ratings above organizational expectations, reflecting generally positive consumer experiences.

External Provider Quarter 3 Survey Results Report

Fiscal Year 2026 – Quarter 3 (April – June)

The Quarter 3 External Provider Survey was completed to assess key organizational performance indicators, workforce trends, and operational challenges among contracted providers. Survey results demonstrate continued strength in training compliance and workforce stability, while staff recruitment and retention remain the most frequently reported challenge across the provider network.

Survey Highlights

- **Staff Retention:** Providers reported an overall staff retention rate of 82% during quarter 3.
- **Training Compliance:** Providers achieved an overall training compliance rate of 99%.
- **Workforce Trends:** The most frequently identified organizational challenge continues to be staff recruitment and retention. Despite these ongoing workforce challenges, providers also cited successful recruitment and retention efforts as one of their greatest accomplishments during the reporting period, reflecting progress in strengthening workforce stability.
- **Drop-In Center Attendance:** No attendance data was submitted for the Drop-In Center during the reporting period.

MCMHA Performance Indicator Survey: External Providers

FY 2026 Q3: April 1, 2026 – June 30, 2026

Surveyed Providers		Retention	Training Compliance
# Sent Out	# Responses	Average Staff Retention	Average Training Compliance
40	26	Q2: 85.44% Q3: 81.74%	Q2: 94.97% Q3: 98.92%

Greatest Challenges

Category	# of Providers
Retention and recruitment	11
Training compliance	4
Rates and financial reimbursement	1
Referrals	1
Compliance tracking	1
Building & program maintenance	1
HHA app issues	1
HHAX change	1
Understanding HAB Waiver requirements	1

Greatest Successes

Category	# of Providers
Retention and recruitment	9
Consumer successes	5
Consumer attendance	3
Increase in compliance rating	2
Upgraded compliance tracking system	1
Quality service	1
Communication	1
Completed CARF accreditation	1
Opening of the "Time Travelers Home"	1

Supported Employment

Number of Providers	Number of Supported Employment Consumers	Consumers at Least 6 Months Employed
1	5	5

Drop-In Center

Number of Providers	Average Daily Attendance	Average Meals Per Day
N/A	N/A	N/A

The supported employment provider that responded was Life Enrichment Academy. We did not have any drop-in center providers respond to the survey this quarter.



MONROE COMMUNITY MENTAL HEALTH

August 2026

Board Report

Table of Acronyms

<u>Acronym</u>	<u>Full Description</u>
DAB	Disabled, Aged, & Blind
HMP	Healthy Michigan Plan
HSW	Habilitation Supports Waiver
TANF	Temporary Assistance for Needy Families
CWP	Child Waiver Program
SEDW	Severe Emotional Disturbance Waiver
HHBH	Health Home - Behavioral Health
CMHSP	Community Mental Health Services Program
PIHP	Prepaid Inpatient Health Plan
CCBHC	Certified Community Behavioral Health Clinic

MONROE CMH

August 2026

Monthly Highlights

- Statement of Position - Cash in the bank is \$21,802,658
- Estimated surplus (due back to PIHP) is \$3,264,831
- Estimated surplus from CCBHC Medicaid operations is \$2,421,337
- Estimated deficit from CCBHC non-Medicaid operations is \$2,445,830
- Estimated surplus from other General Fund spend is \$44,183
- Total estimated fund balance addition is \$876,736

BASIC FINANCIAL STATEMENTS

MONROE CMH

Statement of Position

October 1, 2025 through August 31, 2026

	August 31 Balance	Balance September 30 2025	Over (Under)
ASSETS & DEFERRED OUTFLOWS			
Current:			
Cash and cash equivalents	\$ 21,802,658	\$ 17,086,529	\$ 4,716,129
Accounts receivable, net	2,792,807	624,002	2,168,805
Due from PIHP	3,675,179	5,309,685	(1,634,506)
Due from State of Michigan	93,198	132,810	(39,612)
Due from other governmental units	19,647	296,723	(277,076)
Prepaid items	393,234	442,258	(49,024)
Total current	28,776,723	23,892,007	4,884,716
Noncurrent:			
Capital assets not being depreciated	47,000	47,000	-
Capital assets being depreciated, net	2,971,174	2,922,208	48,966
Deferred outflows - Pension & OPEB	1,390,554	1,390,554	0
Total noncurrent	4,408,728	4,359,762	48,966
Total assets and deferred outflows	33,185,451	28,251,769	4,933,682
LIABILITIES & DEFERRED INFLOWS			
Current			
Accounts payable	4,559,698	6,127,736	(1,568,038)
Accrued liabilities	769,941	410,543	359,398
Due to other governments	15,217,783	9,952,952	5,264,831
Unearned revenue	-	-	-
Long-term debt, due within one year	-	-	-
Compensated absences, due within one year	49,458	49,458	-
Total current liabilities	20,596,880	16,540,690	4,056,191
Noncurrent			
Long-term debt, due beyond one year	569,781	569,781	(0)
Compensated absences, due beyond one year	427,876	427,876	(0)
Lease liability	1,336,526	1,336,526	0
Net pension liability	2,696,347	2,696,347	-
Net OPEB liability (asset)	(4,717,393)	(4,717,393)	(0)
Deferred inflows - leases	108,815	108,815	0
Deferred inflows - Pension/OPEB	3,789,955	3,789,955	(0)
Total noncurrent liabilities	4,211,907	4,211,907	(0)
Total liabilities and deferred inflows	24,808,787	20,752,597	4,056,190
NET POSITION			
Net investment in capital assets	1,572,833	1,523,868	(48,965)
Unrestricted	6,803,831	5,975,304	(828,527)
Total net position	\$ 8,376,664	\$ 7,499,172	\$ 877,492

MONROE CMH

Statement of Activities

October 1, 2025 through August 31, 2026

	Mental Health YTD	Projected Annual Activities	Prior Year Total Activities	Over (Under)
Operating revenue				
Capitation:				
Medicaid	\$ 40,658,906	\$ 44,355,170	\$ 46,931,913	\$ (2,576,743)
Medicaid - Settlement	(3,565,212)	(3,889,322)	(5,231,531)	1,342,209
Healthy Michigan	2,481,680	2,707,287	3,675,123	(967,836)
Healthy Michigan - Settlement	300,381	327,688	(294,833)	622,521
CCBHC	15,888,705	17,333,133	11,825,695	5,507,438
CCBHC - Settlement	-	-	(244,015)	244,015
Behavior Health Home	210,777	229,939	221,263	8,675
State General Funds	1,490,446	1,625,941	1,539,237	86,704
State General Funds - Carryover	-	-	-	-
County appropriations	831,503	907,094	997,803	(90,709)
Charges for services	286,294	312,321	311,039	1,282
Other grants	953,285	1,039,947	1,749,598	(709,651)
Other revenue	499,340	544,735	2,235,413	(1,690,678)
Total operating revenue	60,036,105	65,493,933	63,716,705	1,777,227
Operating expenses				
Administration				
Salaries	2,140,137	2,334,695	2,212,960	121,734
Benefits	1,027,291	1,120,681	3,090,875	(1,970,194)
Other	2,299,401	2,508,437	2,881,611	(373,173)
Internal Services				
Salaries	7,406,418	8,079,729	7,591,964	487,765
Benefits	3,427,819	3,739,439	3,739,439	-
Other	3,100,557	3,382,426	2,833,873	548,552
Provider Network Services	37,563,700	40,978,582	36,466,723	4,511,859
Facility costs	718,918	784,274	865,866	(81,592)
Vehicle costs	62,775	68,482	137,968	(69,486)
Grant expenses	1,001,013	1,092,014	1,215,749	(123,734)
Room & Board	411,324	448,717	90,192	358,525
GASB 68 & 75 Adjustment	-	-	(4,973,570)	4,973,570
Total operating expenses	59,159,353	64,537,476	56,153,649	8,383,827
Change in net position	876,752	956,457	7,563,056	\$ (6,606,599)
Net position, beginning of year	7,499,912	7,499,912	(63,884)	
Net position, end of year	\$ 8,376,664	\$ 8,456,369	\$ 7,499,172	

MONROE CMH

Statement of Activities

Mental Health - Budget to Actual

October 1, 2025 through August 31, 2026

	Annual Budget	YTD Budget	YTD Actual	Over (Under) YTD Budget
Operating revenue				
Capitation:				
Medicaid	\$ 43,747,009	\$ 40,101,425	\$ 40,658,906	\$ 557,481
Medicaid - Settlement	(5,143,474)	(4,714,851)	(3,565,212)	1,149,639
Healthy Michigan	2,707,287	2,481,680	2,481,680	0
Healthy Michigan - Settlement	1,970,947	1,806,701	300,381	(1,506,320)
CCBHC	17,098,879	15,673,972	15,888,705	214,733
CCBHC - Settlement	-	-	-	-
Behavior Health Home	222,283	203,759	210,777	7,018
State General Funds	1,539,237	1,410,967	1,490,446	79,479
County appropriations	997,803	914,653	831,503	(83,150)
Charges for services	671,106	615,180	286,294	(328,886)
Other grants	1,481,957	1,358,460	953,285	(405,175)
Other revenue	553,551	507,422	499,340	(8,082)
Total operating revenue	65,846,585	60,359,370	60,036,105	(323,265)
Operating expenses				
Administration				
Salaries	2,479,811	2,273,160	2,140,137	(133,023)
Benefits	881,112	807,686	1,027,291	219,605
Other	3,015,951	2,764,622	2,299,401	(465,221)
Internal Services				
Salaries	9,698,628	8,890,409	7,406,418	(1,483,991)
Benefits	3,100,986	2,842,570	3,427,819	585,249
Other	3,495,052	3,203,798	3,100,557	(103,241)
Provider Network Services	40,082,573	36,742,359	37,563,700	821,341
Facility costs	1,241,616	1,138,148	718,918	(419,230)
Vehicle costs	126,648	116,094	62,775	(53,319)
Grant expenses	1,223,618	1,121,650	1,001,013	(120,637)
Other expenses	400,797	367,397	-	(367,397)
Room & Board	-	-	411,324	411,324
Total operating expenses	65,746,792	60,267,893	59,159,353	(1,108,540)
Change in net position	99,793	91,476	876,752	785,276
Net position, beginning of year	7,499,912	7,499,912	7,499,912	-
Net position, end of year	\$ 7,599,705	\$ 7,591,388	\$ 8,376,664	\$ 785,276

INCOME STATEMENT BY FUND SOURCE

MONROE CMH

Fiscal 2026 Revenues and Expenses by Fund Source

October 2025 through August 2026

Medicaid	2026 Budget	YTD Budget	2026 Actual	Over (Under)
PIHP Revenue	\$ 43,747,009	\$ 40,101,425	\$ 40,658,906	\$ 557,481
PIHP Redirect to CCBHC	-	-	-	-
1st/3rd Party Revenue	3,704	3,395	-	(3,395)
Expense	\$ 38,607,239	35,389,969	37,093,694	1,703,725
Revenue over/(under) expenses	\$ 5,143,474	\$ 4,714,851	\$ 3,565,212	\$ (1,149,639)
Healthy Michigan	2026 Budget	YTD Budget	2026 Actual	Over (Under)
PIHP Revenue	\$ 2,707,287	\$ 2,481,680	\$ 2,481,680	\$ 0
PIHP Redirect to CCBHC	-	-	-	-
1st/3rd Party Revenue	-	-	-	-
Expense	\$ 4,678,234	4,288,381	2,782,061	(1,506,320)
Revenue over/(under) expenses	\$ (1,970,947)	\$ (1,806,701)	\$ (300,381)	\$ 1,506,320
Total PIHP Sources	2026 Budget	YTD Budget	2026 Actual	Over (Under)
PIHP Revenue	\$ 46,454,296	\$ 42,583,105	\$ 43,140,586	\$ 557,481
1st/3rd Party Revenue	3,704	3,395	-	(3,395)
Expense	43,285,473	39,678,350	39,875,755	197,405
Retain as local in FY 25	-	-	-	-
Revenue over/(under) expenses	\$ 3,172,527	\$ 2,908,149	\$ 3,264,831	\$ 356,682

MONROE CMH

Fiscal 2026 Revenues and Expenses by Fund Source

October 2025 through August 2026

CCBHC Medicaid	2026 Budget	YTD Budget	2026 Actual	Over (Under)
PIHP Cap Revenue	\$ 14,481,285	\$ 13,274,511	\$ 13,031,051	\$ (243,460)
PIHP Supp Revenue	-	-	-	-
1st/3rd Party Revenue	1,246	1,142	89,259	88,117
Expense	12,683,676	11,626,703	10,544,689	(1,082,014)
Revenue over/(under) expenses	\$ 1,798,855	\$ 1,648,950	\$ 2,575,622	\$ 926,671
CCBHC Healthy Michigan	2026 Budget	YTD Budget	2026 Actual	Over (Under)
PIHP Cap Revenue	\$ 2,618,301	\$ 2,400,109	\$ 2,857,639	\$ 457,530
PIHP Supp Revenue	-	-	-	-
1st/3rd Party Revenue	-	-	-	-
Expense	3,132,588	2,871,539	3,011,924	140,385
Revenue over/(under) expenses	\$ (514,287)	\$ (471,430)	\$ (154,285)	\$ 317,145
CCBHC NonMedicaid	2026 Budget	YTD Budget	2026 Actual	Over (Under)
State CCBHC Revenue	\$ 55,000	\$ 50,417	\$ -	\$ (50,417)
1st/3rd Party Revenue	-	-	-	-
Expense	2,607,096	2,389,838	2,445,830	55,992
Redirect from GF	2,552,096	2,339,421	2,445,830	106,409
Revenue over/(under) expenses	\$ -	\$ -	\$ -	\$ (0)
ALL CCBHC Combined	2026 Budget	YTD Budget	2026 Actual	Over (Under)
All CCBHC Revenue	\$ 17,154,586	\$ 15,725,037	\$ 15,888,691	\$ 163,653
1st/3rd Party Revenue	1,246	1,142	89,259	88,117
Expense	18,423,360	16,888,080	16,002,443	(885,637)
Redirect from GF	2,552,096	2,339,421	2,445,830	106,409
Revenue over/(under) expenses	\$ 1,284,568	\$ 1,177,521	\$ 2,421,337	\$ 1,243,816

MONROE CMH

Fiscal 2026 Revenues and Expenses by Fund Source

October 2025 through August 2026

State General Fund	2026 Budget	YTD Budget	2026 Actual	Over (Under)
Revenue	\$ 1,920,289	\$ 1,760,265	\$ 1,571,304	\$ (188,961)
Expense	2,821,975	2,586,810	1,527,121	(1,059,689)
Redirect to Other Programs	(2,552,096)	(2,339,421)	(2,445,830)	(106,409)
Redirect from Other Programs	3,453,782	3,165,967	2,401,647	(764,320)
Revenue over/(under) expenses	\$ -	\$ -	\$ -	\$ -
All Other Grants/Local	2026 Budget	YTD Budget	2026 Actual	Over (Under)
Revenue	\$ 3,757,530	\$ 3,444,402	\$ 18,183,176	14,738,774
Expense	1,485,359	1,361,579	14,904,793	13,543,214
Redirects	(3,453,782)	(3,165,967)	(2,401,647)	764,320
Revenue over/(under) expenses	\$ (1,181,612)	\$ (1,083,144)	\$ 876,736	\$ 1,959,880

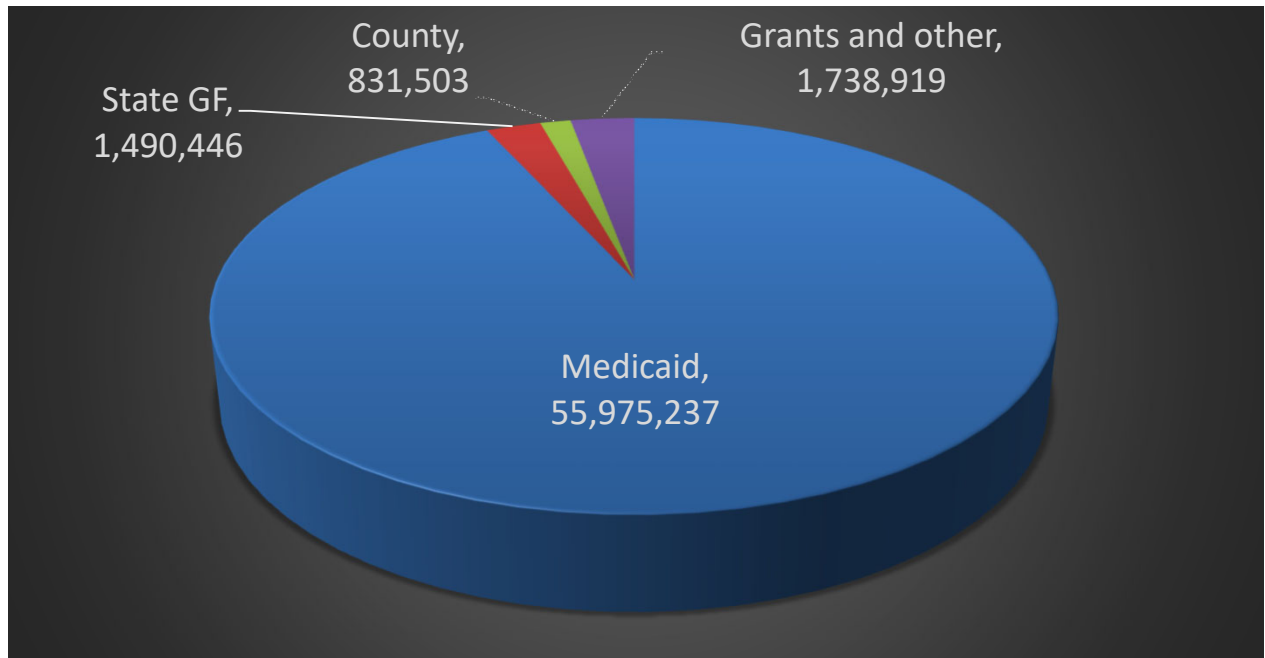
TRENDS AND PAYMENTS

MONROE CMH

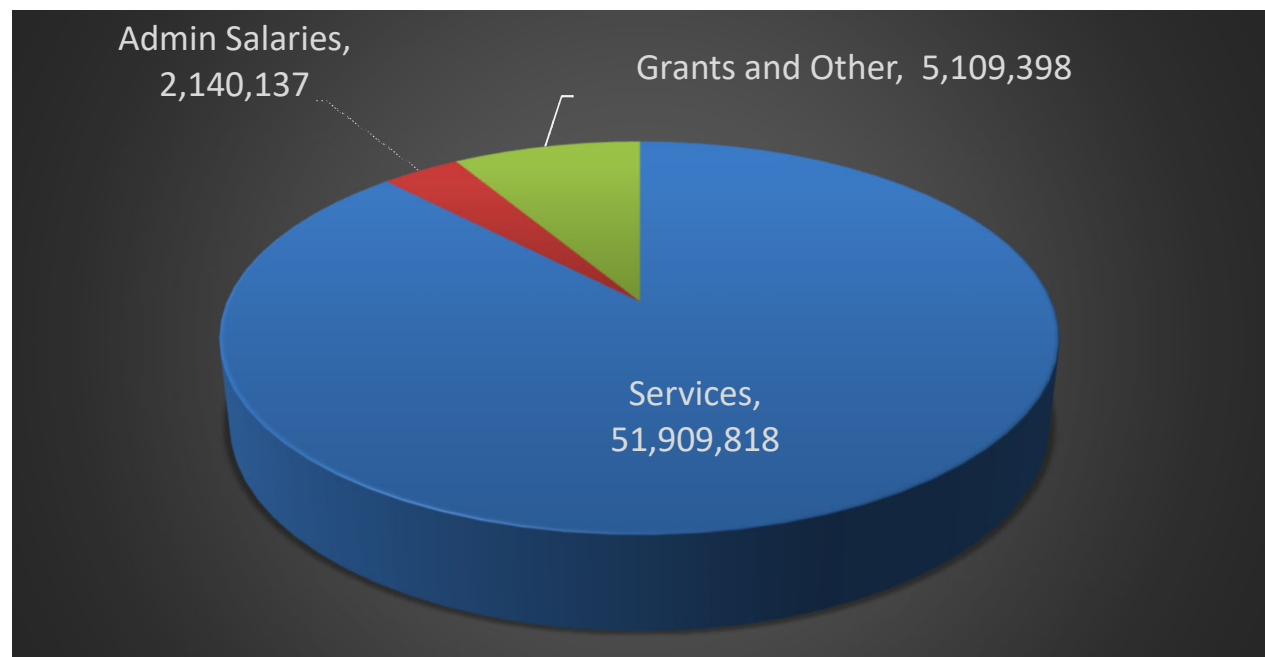
August 2026 Trends

Sources and Uses

Revenues by Source



Expenditures by Category



Monroe CMHA

Payment Summary Report

For the Month of August 2026

Vendor Name	Total
8X8 INC.	\$ 4,786.78
A Heart That Cares, LLC	83,076.39
ABA INSIGHT, LLC	71,821.00
ACCIDENT FUND INSURANCE COMPANY OF AMERICA	5,258.80
ADULT LEARNING SYSTEM, INC	37,644.84
ADVANCED THERAPEUTIC SOLUTIONS, LLC	685.40
AFLAC	1,992.24
ANNA MARTINEZ	25.00
APPLIED INNOVATION	612.59
ARA FAMILY HOLDINGS, LLC	2,411.75
ARKAY, INC	2,546.35
BBH VENTURES, LLC	5,076.22
BCA OF DETROIT, LLC	74,449.92
BEACON SPECIALIZED LIVING SERVICES, INC.	115,570.00
BELLE TIRE DISTRIBUTORS	566.00
BESTCO BENEFIT PLANS, LLC	27,793.08
BETTER LIVING AFC LLC	78,669.26
BLUEBIRD HOLDCO II LLC; BLUEBIRD MIDWEST LLC DBA BLUEBIRD FIBER	2,191.42
BLUENET	5,332.80
CALVIN GAGE DBA GAGE CONSULTING FOR CHALLENGING BEHAVIOR LLC	839.10
CELLCO PARTNERSHIP	1,085.42
CENTRIA HEALTHCARE, LLC	12,133.50
CHARTER COMMUNICATIONS	303.58
CHITTER CHATTER PC	104,700.78
CHOICES W/SELF DETERMINATION, LLC	8,751.46
CHS GROUP, LLC	123,847.43
CINTAS CORP - 306/K11	50.00
CITY OF MONROE	593.62
COGNIZANT TRIZETTO SOFTWARE GROUP, INC.	863.53
COMMUNITY LIVING NETWORK	51,382.15
CONTRACT SERVICE GROUP	1,392.00
COUNTY OF WASHTENAW, MICHIGAN	24,379.52
CRESTLINE SPECIALTIES, INC.	9,995.53
Culligan of Ida	80.00
DELTA DENTAL PLAN OF MICHIGAN	10,241.94

Monroe CMHA

Payment Summary Report

For the Month of August 2026

Vendor Name	Total
DIGIMATICS, INC.	141.00
DOUGLAS STEVENS	109.30
DYKEMA GOSSETT, PLLC	27,575.25
EISENHOWER CENTER	165,250.00
ELITE AFC, LLC	11,160.00
ENFIELD VILLAGE CONDOMINIUM	197.00
ERICA MERCHANT	25.00
EVEREST, INC.	52,786.00
FLATROCK MANOR, INC	405,093.09
FRAME'S PEST CONTROL, INC.	727.93
FRANCES JACKSON, LLC	163.35
FRIENDS WHO CARE, INC.	9,671.05
GATEWAY PEDIATRIC THERAPY LLC	2,081.36
GENOA HEALTHCARE, LLC	2,858.84
GOODWILL INDUSTRIES OF SE MICH, INC	71,416.63
GROSS ELECTRIC	1,597.20
GUARDIANTRAC, LLC	491,753.62
GUIDING LIGHT AFC LLC	26,040.00
GUTTERMAN, PAUL Y.	13,680.00
HAVENWYCK HOSPITAL	119,000.00
HELP AT HOME, LLC	9,211.35
HFHS - ACADIA JV, LLC DBA HENRY FORD HEALTH BEHAVIORAL HEALTH HOSPITAL	13,300.00
HILLSDALE COMMUNITY HEALTH CENTER	12,800.00
HOME - COMMUNITY SUPPORTED LIVING ARRANGEMENTS	20,488.15
IBM CORPORATION	161.70
ILENE DUSSIA	25.00
ILLUMINATE ABA SERVICES LLC	17,456.00
IRIS TELEHEALTH MEDICAL GROUP, PA	46,626.00
ISMAIL B. SENDI MD PC	2,220.00
IVYREHAB MICHIGAN, LLC	304.00
JACKSON AND COKER LOCUMTENEMS, LLC	33,202.00
JALIAN BURRIS	30.80
JANESSA MARKSBERRY	61.04
JASON STRAZZULLA	1,240.00
JASWANT S BAGGA	26,125.00

Monroe CMHA

Payment Summary Report

For the Month of August 2026

Vendor Name	Total
JENNIFER DURELL	75.75
JOHN BURKARDT	35.08
JOHN M. CULLEN	77.40
JOSEPH BATES DBA THE ABILITY HUB LLC	35,755.87
JUANITA A ROSCOE	44.50
KIMBERLY S. SANDERLIN	750.00
KONICA MINOLTA BUSINESS SOLUTIONS USA INC.	424.43
LAMOUR PRINTING CO.	360.00
LANGUAGELINE SOLUTIONS	246.75
LASCALA IT SOLUTIONS, INC	2,443.50
LAURA NIDA	25.00
LEGAL SHIELD	318.94
LIFE ENRICHMENT ACADEMY, INC.	35,564.55
LINEDUP LINE DANCING LLC	100.00
LOCUMTENENS.COM	67,190.00
LOUIS BALOGH	1,730.60
LUTHERAN CHILD AND FAMILY SERVICE OF MICHIGAN, INC	2,883.25
MACOMB RESIDENTIAL OPPORTUNITIES, INC	128,697.91
MARY L. BALL	25.00
MASTROFRANCESCO, A.F.C.	179,385.38
MCLAUGHLIN PROPERTIES LLC	12,526.89
MICHIGAN BH JV LLC	26,235.56
MICHIGAN GAS UTILITIES	645.22
MIKE'S SEWER SERVICE	210.00
MONROE CENTER, LLC.	6,250.00
MONROE CNTY MUNICIPAL BLDG AUTHORITY	5,815.74
MONROE COUNTY RETIREMENT SYSTEM	110,061.25
MONROE COUNTY ROBERT A HUTCHINSON FOP	225.00
MUTUAL OF OMAHA	26,117.87
NEW DIRECTIONS PEER RECOVERY CENTER	10,700.00
O'REILLY AUTO PARTS	613.72
PAN AMERICAN LANGUAGES & SERVICES, INC.	650.00
PANCONE'S AUTO, LLC	1,535.26
PETER CHANG ENTERPRISES DBA PCE SYSTEMS	64.40
PHC OF MI, INC	19,342.20

Monroe CMHA

Payment Summary Report

For the Month of August 2026

Vendor Name	Total
PHILLIP ARCHER, MD	10,485.00
PINE REST CHRISTIAN MENTAL HEALTH SERVICES	21,998.00
PITNEY BOWES	913.83
PROGRESSIVE RESIDENTIAL SERVICES	393,988.23
PROMEDICA MONROE REGIONAL HOSPITAL	80,185.00
QUANTUMLINK COMMUNICATIONS	90.87
R LAMAR FREDERICK	118.00
REBECCA PASKO	159.60
REBECCA S CURLEY	78.85
REDA D. BINIECKI	120.45
REHMANN LLC	103,702.52
REPUBLIC SERVICES #259	2,707.39
RESIDENTIAL OPPORTUNITIES, INC	10,170.60
REVEL--QONVERGE, LLC	24,650.00
ROBERT A CALHOON JR	94.80
ROSLUND PRESTAGE & COMPANY PC	4,762.50
SABRINA R. CORBIN	90,866.24
SHAMROCK HOLDINGS LLC	441.00
SNOW CHIU WU	3,150.00
SONDRA L. THORN	25.00
ST. PIERRE ACE HARDWARE INC.	19.95
STAELEGRAEVE PROPERTIES, INC	33,500.00
STATE OF MICHIGAN / MDCH	25,869.32
SUSAN ELIZABETH FORTNEY	25.00
SVRC INDUSTRIES INC.	1,399.44
T MOBILE USA, INC.	3,179.46
THE SHERWIN-WILLIAMS COMPANY	312.90
THERAPEUTICS, LLC	64,952.00
TIMOTHY ALLEN LASSEY	67.40
VELLOHEALTH INC	10,500.00
VITAL RECORDS HOLDING	192.81
W A FOOTE MEMORIAL HOSPITAL	3,625.60
WOLVERINE INVESTMENT PROPERTIES, LLC	7,058.32
YOUNG MEN'S CHRISTIAN ASSOCIATION OF MONROE MICH	1,035.03
Grand Total	\$ 4,033,299.19