

**BOARD OF HEALTH Meeting**  
**Agenda for March 24, 2022 at 9:00 AM**

1. Call to Order
  - a. Opening ceremonies – Pledge Allegiance to the Flag of the United States of America
  - b. Roll Call
  - c. Approval of the Agenda\*
  - d. Approval of the Minutes from 2/24/2022\*
2. Public Comment
3. Audit Presentation
4. Health Officer’s Report
5. Medical Director’s Report
6. Committee Reports
  - a. Finance Committee – Minutes from the March 21, 2022 Meeting\*
  - b. Program, Policies, and Appeals – Minutes from the March 21, 2022 Meeting\*
7. Financial Reports
  - a. Approve Payments\*
  - b. Review Financials
8. New Business
  - a. Immunization Fee Schedule\*
  - b. Legal Services Review\*
  - c. Place Audit on File\*
  - d. MERS Defined Benefit Information
9. Departmental Reports
  - a. Environmental Health
  - b. Area Agency on Aging
  - c. Personal Health & Disease Prevention
10. Public Comment
11. Adjournment - Next meeting: April 28, 2022

**Public Comment:**

For the purpose of public participation during public hearings or during the public comment portion of a meeting, every speaker prior to the beginning of the meeting is requested but not required to provide the Board with his or her name, address and subject to be discussed. Each speaker will be allowed to speak for no more than three (3) minutes at each public comment opportunity. Board of Health By-laws, Article V, Section 3

## February 24, 2022 – Board of Health Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health meeting was called to order by Chair, Tom Matthew at 9:03 a.m. with the Pledge of Allegiance to the Flag of the United States and roll call as follows: Tom Matthew, Mark Wiley, Brent Leininger, and Jared Hoffmaster.

Also present from BHSJ: Rebecca Burns, Theresa Fisher, Laura Sutter, Kali Nichols, Paul Andriacchi, and Alex Bergmooser.

Mr. Wiley moved to approve the agenda, with support from Mr. Hoffmaster. The motion passed unopposed.

Mr. Hoffmaster moved to approve the minutes from the January 27, 2022, meeting with support from Mr. Leininger. The motion passed unopposed.

Public Comment: Public comment was given by Resident Adams, Resident Wortz, and Resident Mapes.

Rebecca Burns, Health Officer, reviewed her monthly report. Items included: COVID Recovery Phase, COVID Vaccinations, COVID-19 Testing, COVID-19 Therapeutics, COVID Omicron Variant, COVID-19 Data Round-Up, School Communication, WIC Formula Recall, Sturgis Office, MCDC Hillsdale Location, KN95 Masks, and Health Promotion & Education update.

Rebecca Burns reviewed the Medical Director's monthly report. This month's educational report was titled, "American Heart Month".

### Committee Reports:

- Finance Committee – Mr. Hoffmaster moved to approve the minutes from the February 14, 2022 Finance Committee Meeting with support from Mr. Wiley. The motion passed unopposed.
- Program, Policy, and Appeals Committee – Mr. Wiley moved to approve the minutes from the February 14, 2022 Program, Policy, & Appeals Committee meeting with support from Mr. Hoffmaster. The motion passed unopposed.

### Financial Reports/Expenditures

- Mr. Leininger moved to approve the expenditures as reported with support from Mr. Hoffmaster. The motion passed unopposed.
- Mr. Hoffmaster moved to place the financials on file, with support from Mr. Leininger. The motion passed unopposed.

### Unfinished Business

- None

New Business:

- The Board recognized employees for years of dedicated service.
- Mr. Hoffmaster moved to approve the bid for painting the Hillsdale MCDC clinic submitted by Atkinson Painting Co., with support from Mr. Leininger. The motion passed 3-1.

Departmental Reports:

- Area Agency on Aging
- Personal Health & Disease Prevention
- Environmental Health

Public Comment: Public comment was given by Resident Mapes, Resident Adams, Resident Eichler, and Resident Wortz.

With no further business, Mr. Hoffmaster moved to adjourn the meeting with support from Mr. Leininger. The motion passed and the meeting was adjourned at 10:36 AM.

An educational presentation introducing the BHSJ Health Promotion and Education team took place after the meeting.

Respectfully Submitted by:

Theresa Fisher,



**Health Officer's Report to the Board of Health for March 24, 2022**  
**Prepared by: Rebecca A. Burns, M.P.H., R.S.**

**Agency Updates**

**COVID Recovery (AKA Preparedness) Phase:**

MDHHS has shared this updated graphic that we hope is clearer for the public about the phases and ongoing response to COVID-19. We want to ensure we are messaging that the pandemic is not over and that we need to remain vigilant and prepare for the next surge.



The World Health Organization is warning nations to remain vigilant against the COVID while recent figures show a global rise in cases. After a month of decline, COVID cases started to increase around the world last week [Reuters Article 3.17.22](#). This may be a signal that our Recovery phase is ending and we will be moving to Readiness in anticipation of a new surge. Certainly, time will tell.

MDHHS has also updated the graphic on When to Wear a Well-Fitting Mask which we are sharing on social media. We continue to urge people to wear a well-fitting mask in these situations.



# When to Wear a Well-Fitting Mask



Please be respectful of others' choices.

## MDHHS recommends mask use in the following settings:

## You might also consider masking in these settings:

	<p>During Isolation and Quarantine.</p> <ul style="list-style-type: none"> <li>Those with COVID-19 infection and their contacts should wear a mask when around others.</li> </ul>		<p>If you, or those around you, are at high risk for infection or severe disease.</p> <ul style="list-style-type: none"> <li>Immunocompromised or have other medical conditions that increase risk.</li> <li>Unvaccinated.</li> </ul>
	<p>When you are in a congregate setting.</p> <ul style="list-style-type: none"> <li>Long term care, health care or correctional facility.</li> </ul>		<p>If you feel the risk of exposure is high.</p> <ul style="list-style-type: none"> <li>Crowded indoor settings; a potential for unvaccinated individuals.</li> </ul>
	<p>When you are in an area with a local or federal mask policy.</p> <ul style="list-style-type: none"> <li>Counties, schools, businesses or other settings may have mask policies.</li> </ul>		<p>If you simply feel more comfortable wearing a mask.</p>

**COVID Vaccinations:** The demand for COVID vaccination remains low. We are taking a break from Saturday vaccine clinics during April and May and will reevaluate mid-May. Appointments can still be made on our website at [www.bhsj.org/scheduling](http://www.bhsj.org/scheduling). We are continuing to message on the importance of getting vaccinated during this time.

**COVID Testing:** The free COVID tests for Americans program sponsored by the Federal Government is now allowing for individuals to order a 2<sup>nd</sup> set of 4 test kits to have in their home. These can be ordered at <https://www.covidtests.gov>. Some residents living in selected zip codes in the tri-county area can also order free test kits from the Rockefeller Foundation through a partnership with MDHHS. These can be ordered at <https://accesscovidtests.org>.

We continue to have the MDHHS contractor providing free testing opportunities for residents every week. Testing in Hillsdale County out of the MCDC lobby on Tuesday, Friday, and Saturday, in Branch County on Thursday at the Agency office and at the Welcome Center 7 days a week, and in St. Joseph County on Friday at the Agency office and on Tuesdays at Glen Oaks Community College.

**COVID-19 Data Round-Up:** All three counties are now at Moderate risk due to the current weekly positivity rate and rate per 100,000. The rates are considered underreported due to individuals choosing not to test or administering home tests and not reporting results. I'm also including the number of deaths attributed to COVID infection for the month of January. The data is available on the [mistartmap.info](http://mistartmap.info) site as of 3/16/22:

County	7-Day Positivity Rate	Weekly Cases per 100,000	# Deaths in February '22
Branch	4.4%	36.8	15 + 1 probable
Hillsdale	4.5%	26.3	9 + 2 probable
St. Joseph	5.6%	37.7	10 + 5 probable

**School Communication:** I have notified the school superintendents this week of an update on how to report cases of COVID to our Agency. Michigan Law requires that schools report cases of communicable diseases to the local health department. For years, schools have been reporting this information using a secure online reporting system and they can now use this for COVID cases too. It is

my hope that this lessens the burden on schools for reporting COVID to our Agency. I still have a standing appointment to meet with the Superintendents monthly through the end of the school year.

**Sturgis Office:** The Agency has provided a layout and met with the landlord's contractor about expanding the space in Sturgis. I met again with the landlord this week and they are trying to determine if a renter in the space next to our location is going to continue or if this space will become available. They are trying to determine what makes the best business sense for them. Either way, if they determine they will build out a larger space for us, or ask us to move into the other office suite, we will have an office that will provide better service to our clients.

**Hillsdale Office:** The Agency has received communication from Hillsdale County Facilities Director Randy Finley that they are planning to either resurface or replace our lots at 20 Care Drive this year. This is a 2-story building with parking lots on the top and bottom sides with both being tagged for work this summer. There is no other information at this time to share as the timeframe or cost are not yet available.

**Three Rivers Office:** At this building we have identified that the exterior wooden portions of the building require maintenance. We are investigating the possibility of a low-maintenance option such as wrapping the wood in aluminum. The contractor that we have been using for repairs at this building has arranged for an architect to evaluate the exterior and provide us with guidance on how to move forward. When we are provided with this plan, I will share it with you. The other item that is on our list for maintenance at this location is the parking lot.

**MCDC Hillsdale Location:** The painter has indicated that he will have completed the job by the time this meeting happens. I expect to be able to provide a verbal update during the meeting.

**KN95 Masks:** BHSJCHA still has supplies of KN95 masks available for free to the public. We are in process of ordering child sized KN95 masks to have available for tri-county residents as well. \

**MALPH (Michigan Association for Local Public Health):** The Michigan Premiere Public Health Conference that was previously scheduled to occur in October has been rescheduled for July 15-17. The registration brochure containing information about the conference can be references at:

<https://www.malph.org/news-events/michigan-premier-public-health-conference>

April 10-16 is Public Health Week in Michigan. During Public Health Week on April 13<sup>th</sup>, those selected to receive the Hometown Health Hero Award will be honored. We nominated 3 different individuals/groups this year and are hoping that all three receive recognition. The Hometown Health Hero award has been presented each year since 2004 to individuals and/or organizations that have made significant and measurable contributions to preserve and improve their community's health. Awardees are selected solely from nominations received. The only way for someone to receive this award is to be nominated.

The April MALPH Board of Directors meeting is scheduled for April 12<sup>th</sup> and will be in-person in Lansing. While Health Officers are in Lansing that week, we are reaching out to our Legislators to schedule a time to meet and discuss public health activities occurring in our jurisdictions.

**Health Promotion & Ed. Team Activities:** The month of February was a month of transition for the Health Promotion & Education staff as we hope to leave Winter behind and begin to set our sights on Spring and Summer events. Although the country has entered the “recovery phase” of the Pandemic, we continue to work alongside our clinical staff to help support, and promote, the Covid-19 vaccination, community testing sites and subsequent booster shots, when needed. Furthermore, the H.P. & Ed. Team, in partnership with MDHHS, was able to request a large quantity of KN-95 child-sized masks and expect to be able to supply our partners with those in early March.

**Grant Updates:** The H.P. & Ed. team is also involved in several ongoing grant projects and campaigns:

**HRSA - The Rural Community Opioid Response Planning Grant:** This grant was awarded to BHSJCHA in Sept. of 2020 and has completed all deliverables, including: the community needs assessment and gap analysis; the project action plan and strategic plan; the Memorandum of Understanding, and most recently, the PIMS (Performance Improvement Measurement System) report. The performance period for this grant reached its end on 2/22/2022 and concluded with presentations by all of the grantee organizations at the final Learning Collaborative meeting in early February.

**HRSA - The Rural Community Opioid Response Implementation Grant (Application):** The H.P. & Ed. Team has applied for the next step in the HRSA grant series, Implementation, which we were unsuccessful in securing for the current grant cycle. The new application focused on creating more clear and concise timeframes for project goals and objectives, which was the biggest weakness with the previous application. We are hopeful that this new submittal will meet the requirements necessary to be awarded funding when the next performance period begins in September of this year.

**MPHI – “Creating an Age-Friendly Public Health System in Michigan” Update:** BHSJCHA, in partnership with the Area Agency on Aging (AAA 3C) & Region 2 Area Agency on Aging (R2AAA) were awarded

this grant in May of 2021. The goal of this project was to utilize these funds to review and revise our current practices and policies as they relate to the aging population in hopes of creating a more age-friendly public health system. In pursuit of this, we have worked through, and completed, all of the deliverables and goals that were laid out in the project’s action plan. As we approach the end of the project period, we will be closing out the grant by creating a “final report” and presenting the contents of this report to various stakeholders over the next couple of months.

**LARA – 2022 Medical Marijuana Operation and Oversight Grant:** The BHSJCHA has once again applied for the above grant that is offered through the Department of Licensing and Regulatory Affairs (LARA) Marijuana Regulatory Agency (MRA). The H.P. & Ed. team was able to submit successful applications, and fully expects to be awarded the funds once the review process is completed, for all three of our counties. Once awarded, the focus will shift to creating an action plan for the activities that will take place during the grant period. The 2022 cycle will look to partner with the quickly-expanding number of marijuana dispensaries within our 3 counties to spread the “Lock it Up” message. Our hope is to form a relationship with these businesses and help them to spread the message of safe marijuana use, and storage, to their clients.

**Community Events:** We have participated, or will be participating in the following events:

Date	Event
2/9	RCORP – Planning Grant Final Presentation
2/22	The Rural Community Opioid Response <i>Planning</i> Grant Project Period Ends
2/22	Participated in the Career Fair @ Glen Oaks Community College
2/24	Presentation Regarding the Health Promotion and Education Department Given at the Monthly Board of Health Meeting

## **MEDICAL DIRECTOR REPORT**

**FEBRUARY 2022**

1. Morning checks CDC website and Johns Hopkins website to follow COVID numbers and trends.
2. 8AM morning telephone calls with Health Department group; decreasing in frequency as COVID numbers trend downward.
3. Meetings via zoom and teleconference with MDHHS.
4. Standing orders continue to change with regard to COVID.
5. Patients with possible latent tuberculosis – examined and evaluated. Shared trends with MSU laboratories and epidemiology.
6. Work continues for my epidemiology class and my health behavior class.

## **NATIONAL COLORECTAL CANCER AWARENESS MONTH**

In February 2000, President Clinton officially dedicated March as National Colorectal Cancer Awareness Month. The month now focuses on patients, survivors and caregivers advocating for awareness by wearing blue at certain events.

The Center for Disease Control says colon cancer is the third most common cancer and the second most common cause of cancer-related death. The American Cancer Society adds that one in 23 men and one in 25 women will be diagnosed with colorectal cancer over their lifetime.

### **WHY IS SCREENING ESSENTIAL?**

The typically slow course of growth from precancerous polyp to invasive cancer to advanced-state disease provides a unique opportunity for the prevention and early detection of colorectal cancer. Screening can identify precancerous lesions and then removal of precancerous growths can be performed at the early stage when treatment is more successful. In 2018 the American Cancer Society screening guideline recommends adults 45 years and older undergo regular screening with a high-sensitivity stool-based test or a visual exam such as a colonoscopy. All positive results should have follow-up in a timely manner because delays in follow-up increase the risk of advanced disease and death. The age of initial screening was lowered from 50 to 45 because of the increasing incidence rates in younger populations.

### **COLORECTAL CANCER RISK FACTORS THAT YOU CAN CHANGE**

Being overweight or obese – link stronger in men, increases risk of death

Not being physically active

Certain diets- diets high in red meats and processed meats raises risk, low Vitamin D, questionably cooking meats at higher temperatures (frying, grilling and broiling)

Smoking

Alcohol Use

### **COLORECTAL CANCER RISK FACTORS YOU CANNOT CHANGE**

Being older

A personal history of colorectal polyps or colorectal cancer

A personal history of inflammatory bowel disease

A family history of colorectal cancer or adenomatous polyps

Having an inherited syndrome (gene mutation) that causes family cancer syndromes

Familial adenomatous polyposis (causes 1% of all colorectal cancers)

Rare inherited syndromes linked to colorectal cancer

Your race and ethnic background (African Americans and Ashkenazi Jews)

Having Type 2 diabetes

## March 21, 2022 – Board of Health, Finance Committee Meeting Minutes

The meeting was called to order at 11:01 AM by Jared Hoffmaster, with roll call as follows: Jared Hoffmaster, and Jon Houtz. Brent Leininger joined the meeting at 11:04 AM.

Also present from BHSJ: Rebecca Burns, Kali Nichols, and Theresa Fisher.

Public comment:

- None

New Business:

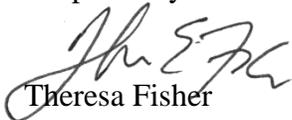
- Mr. Hoffmaster moved to recommend that the full Board approve the Immunization Fee Scheduled as presented, with support from Mr. Houtz. The motion passed unopposed.
- Mr. Leininger moved to recommend that the full Board accept the Health Officer's recommendation to maintain the existing relationship with Rosati, Schultz, Joppich, Amtsbuechler PC. The motion received support from Mr. Houtz and the motion passed unopposed.

Public comment:

- None

With no further business the meeting was adjourned at 11:52 AM.

Respectfully Submitted by:



Theresa Fisher  
Secretary for the Board of Health

## March 21, 2022 – Board of Health, Program, Policy, & Appeals Committee Meeting Minutes

The meeting was called to order at 1:02 PM by Mark Wiley, with roll call as follows: Mark Wiley, and Kathy Pangle.

Also present from BHSJ: Rebecca Burns, Paul Andriacchi, Cody Johnson, and Theresa Fisher.

Public comment:

- None

New Business:

- The Committee heard an Environmental Health Code appeal for a property located at 292 Will James Rd., in Branch County. More information will be gathered prior to the Board taking any formal action. The Committee may take action when the additional information is available.
- Mr. Wiley moved to recommend that the full Board accept the Health Officer's recommendation to maintain the existing relationship with Rosati, Schultz, Joppich, Amtsbuechler PC. The motion received support from Ms. Pangle and the motion passed unopposed.

Public comment:

- None

With no further business the meeting was adjourned at 2:04 PM.

Respectfully Submitted by:



Theresa Fisher  
Secretary for the Board of Health

**Branch-Hillsdale-St Joseph Community Health Agency**

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 2/1/2022 Through 2/28/2022

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
A+ Nursing	402.24	22-02-11 A.01	2/11/2022
ACD.NET	2,410.62	53535	2/11/2022
Action Quick Print Plus	289.00	22-02-11 A.02	2/11/2022
Aflac District Office	595.73	53533	2/4/2022
Aflac District Office	595.73	53545	2/18/2022
Alerus Financial	1,348.00	22-02-04 R.01	2/4/2022
Alerus Financial	1,348.00	22-02-18 R.01	2/18/2022
Amazon Capital Services, Inc	129.27	22-02-11 A.03	2/11/2022
Amazon Capital Services, Inc	44.57	22-02-25 A.01	2/25/2022
Armstrong Nutrition Management	3,811.00	22-02-11 A.04	2/11/2022
Basic	1,597.40	22-02-25 A.02	2/25/2022
Blue Cross Blue Shield	63,629.65	22-02-25 P.01	2/25/2022
Branch Area Transit Authority	3,103.68	22-02-11 A.05	2/11/2022
Branch County Commission	13,771.11	22-02-11 A.06	2/11/2022
Branch County Complex	8,954.80	22-02-11 A.07	2/11/2022
Branch County Complex	5,694.28	22-02-28 D.01	2/28/2022
CAA Of South Central Michigan	17,810.31	22-02-11 A.08	2/11/2022
Card Services Center	546.00	22-02-25 P.02	2/25/2022
Century Bank & Trust	40.00	53547	2/25/2022
Century Bank - Hillsdale Maintenance	2,000.00	22-02-28 D.02	2/28/2022
Century Bank - Three Rivers Maintenance	2,000.00	22-02-28 D.03	2/28/2022
Century Basic	930.20	22-02-04 R.02	2/4/2022
Century Basic	930.20	22-02-18 R.02	2/18/2022
Century EFPTS	45.90	22-02-04 L.01	2/4/2022
Century EFPTS	23,899.16	22-02-04 R.03	2/4/2022
Century EFPTS	79.24	22-02-18 L.01	2/18/2022
Century EFPTS	26,433.32	22-02-18 R.03	2/18/2022
Century Mastercard	1,458.44	22-02-11 P.02	2/11/2022
Century MERS	52,325.16	22-02-11 A.09	2/11/2022
Century State	4.19	22-02-04 L.02	2/4/2022
Century State	4,122.30	22-02-04 R.04	2/4/2022
Century State	4,490.41	22-02-18 R.04	2/18/2022
Charter Communications	137.97	22-02-11 P.03	2/11/2022
Cintas Corporation Loc 351	134.19	22-02-11 P.04	2/11/2022
City Of Coldwater	60.00	22-02-11 A.10	2/11/2022
City Of Coldwater	80.00	22-02-25 A.03	2/25/2022
City of Jonesville	240.00	22-02-11 A.11	2/11/2022
City Of Three Rivers	120.00	22-02-25 A.04	2/25/2022
Companion Life Insurance	1,058.10	53536	2/11/2022
ConnectAmerica	38.00	22-02-11 A.12	2/11/2022
Crossroads Home Care Inc.	863.36	22-02-11 A.13	2/11/2022
Current Office Solutions	2,187.29	22-02-11 A.14	2/11/2022
Current Office Solutions	263.72	22-02-25 A.05	2/25/2022
Dr. Karen M. Luparello	4,244.50	22-02-11 A.15	2/11/2022
Dr. Karen M. Luparello	4,248.70	22-02-28 D.04	2/28/2022
GDI Services Inc.	4,719.33	22-02-28 D.05	2/28/2022
Glaxo-Smithkline Financial Inc.	3,427.92	22-02-25 A.06	2/25/2022
Hillsdale Board Of Public Utilities	2,185.33	22-02-25 P.03	2/25/2022
Hillsdale County Treasurer	824.50	22-02-11 A.16	2/11/2022
HomeJoy of Kalamzoo	4,820.13	22-02-11 A.17	2/11/2022
Hospital Network Healthcare Services	55.00	22-02-11 A.18	2/11/2022
Indiana MI Power Company	1,499.33	22-02-11 P.05	2/11/2022

Branch-Hillsdale-St Joseph Community Health Agency  
 Check/Voucher Register - Check Register for BOH  
 00103 - Cash - Accounts Payable  
 From 2/1/2022 Through 2/28/2022

Payee	Check Amount	Check Number	Effective Date
Joseph Schwartz	150.00	53548	2/25/2022
Kristina Dewey	105.89	22-02-11 A.19	2/11/2022
Legal Services Of S.Central MI	1,060.00	22-02-11 A.20	2/11/2022
Magellan Diagnostics	3,854.81	53549	2/25/2022
Maner Costerisan	11,000.00	22-02-25 A.07	2/25/2022
Maplecrest, LLC	620.00	22-02-28 D.06	2/28/2022
Marana Group	142.00	22-02-28 D.07	2/28/2022
Maxim Healthcare Staffing Services Inc.	1,328.78	22-02-11 A.21	2/11/2022
Maxim Healthcare Staffing Services Inc.	4,040.28	22-02-25 A.08	2/25/2022
McKesson Medical-Surgical Gov. Solutions LLC	77.70	22-02-25 P.04	2/25/2022
Medical Care Alert	399.20	22-02-11 A.22	2/11/2022
MERS 5% EMPLOYEES	8,357.32	22-02-11 A.23	2/11/2022
MI Security & Lock, LLC	1,233.32	53537	2/11/2022
Michigan Public Health Institute	1,932.85	22-02-25 A.09	2/25/2022
Michigan State Disbursement Unit	190.11	53534	2/4/2022
Michigan State Disbursement Unit	190.11	53546	2/18/2022
NACCHO	950.00	53538	2/11/2022
Nationwide	1,040.00	22-02-04 R.05	2/4/2022
Nationwide	1,040.00	22-02-18 R.05	2/18/2022
Prompt Care Express PC	207.00	53539	2/11/2022
Richard Clark	2,542.00	22-02-28 D.08	2/28/2022
Riley Pumpkin Farm	1,480.00	22-02-28 D.09	2/28/2022
Rosati Schultz Joppich Amtsbueshler	2,730.00	22-02-25 A.10	2/25/2022
ROSE PEST SOLUTIONS	207.00	22-02-11 A.24	2/11/2022
Ruth E. Brown	2,100.00	22-02-11 A.25	2/11/2022
Ruth E. Brown	2,100.00	22-02-25 A.11	2/25/2022
Semco Energy	181.08	22-02-11 P.06	2/11/2022
St Joseph County COA	35,103.97	22-02-11 A.26	2/11/2022
St Joseph County Transit Authority	1,945.46	22-02-11 A.27	2/11/2022
St. Joseph Community Co-op	1,771.00	22-02-11 A.28	2/11/2022
Staples	387.25	22-02-11 P.07	2/11/2022
Staples	32.29	22-02-25 P.05	2/25/2022
State of Mich Dental	2,877.14	22-02-11 A.29	2/11/2022
State of Mich EGLE	17.00	53540	2/11/2022
State of Mich EGLE	70.00	53550	2/25/2022
State Of Michigan	257.00	53541	2/11/2022
State of Michigan-Dept	11.50	53542	2/11/2022
Stratus Video, LLC	1,410.33	53551	2/25/2022
Swick Broadcasting Company	696.60	53543	2/11/2022
Three Rivers Health	2,775.00	22-02-28 D.10	2/28/2022
Thurston Woods Village	3,323.21	53544	2/11/2022
Verizon	1,012.65	22-02-11 P.08	2/11/2022
VRI INC.	476.00	22-02-11 A.30	2/11/2022
Wal-Mart Community	104.66	22-02-11 P.09	2/11/2022
Xmission	265.50	53552	2/25/2022
Report Total	377,843.29		

Branch-Hillsdale-St Joseph Community Health Agency

Balance Sheet

As of 2/28/2022

Assets

Cash on Hand	4,670.72
Cash with County Treasurer	3,448,772.31
Community Foundation Grant	309,955.94
Cash HD Building Maintenance	34,000.00
Cash TR Building Maintenance	34,000.00
Accounts Receivable	104,219.15
Due from Dental DAPP	2,877.14
Due from State	(139,377.37)
Due from Other Funding Sources	127,475.70
Prepaid Expenses	156,299.61
Biologic Inventory	<u>67,207.46</u>
Total Assets	<u>4,150,100.66</u>

Liabilities

Accounts Payable	173,806.43
Payroll Liabilites	153,772.79
Capital Improvements	93,000.00
Deferred Revenue	601,823.12
Deferred Revenue BR	17,603.00
Deferred Revenue HD	19,531.00
Deferred Revenue SJ	25,641.00
Unavailable Revenue	(10,881.83)
Biologics	<u>67,207.46</u>
Total Liabilities	<u>1,141,502.97</u>

Net Assets

Operation Fund Balance	232,875.19
Restricted Fund Balance	397,731.70
Designated Fund Balance	<u>2,377,990.80</u>
Total Net Assets	<u>3,008,597.69</u>

Total Liabilities and Net Assets 4,150,100.66

**Prior Year Fund Balance Comparison at 2/28/2021:**

Operation Fund Balance	510,188.02
Restricted Fund Balance	430,472.83
Designated Fund Balance	<u>1,982,627.02</u>
<b>Total Fund Balance \$</b>	<b><u>2,923,287.87</u></b>

BHSJ Community Health Agency  
Schedule of Cash Receipts and Disbursements  
August 31, 2021 thru  
January 31, 2022

<b>Plus: Cash Receipts</b>	\$ 629,403.59
<b>Less: Cash Disbursements For Payroll/AP</b>	\$ (827,719.38)
<b>8/31/2021 Cash Balance</b>	<b>\$ 4,632,612.03</b>
<b>Plus: Cash Receipts</b>	\$ 690,645.28
<b>Less: Cash Disbursements For Payroll/AP</b>	\$ (505,811.49)
<b>9/30/2021 Cash Balance</b>	<b>\$ 4,817,445.82</b>
<b>Plus: Cash Receipts</b>	\$ 651,322.01
<b>Less: Cash Disbursements For Payroll/AP</b>	\$ (916,244.11)
<b>10/31/2021 Cash Balance</b>	<b>\$ 4,552,523.72</b>
<b>Plus: Cash Receipts</b>	\$ 589,653.14
<b>Less: Cash Disbursements For Payroll/AP</b>	\$ (840,153.57)
<b>11/30/2021 Cash Balance</b>	<b>\$ 4,302,023.29</b>
<b>Plus: Cash Receipts</b>	\$ 863,654.61
<b>Less: Cash Disbursements For Payroll/AP</b>	\$ (698,487.12)
<b>12/31/2021 Cash Balance</b>	<b>\$ 4,467,190.78</b>
<b>Plus: Cash Receipts</b>	\$ 530,986.12
<b>Less: Cash Disbursements For Payroll/AP</b>	\$ (1,210,475.82)
<b>1/31/2022 Cash Balance</b>	<b>\$ 3,787,701.08</b>

# BRANCH HILLSDALE ST JOSEPH COMMUNITY HEALTH AGENCY

## Expense by Program - 2/28/2022

Program	Program Title	Month	Year to Date	Original	Expended	
*	405	Grant Writing	214.59	4,905.52	3,005.00	163.24%
*	008	Salary & Fringe Payoff	12,086.90	59,644.89	80,000.00	74.55%
*	010	Agency Support	673.43	16,722.79	25,749.00	64.94%
*	325	CSHCS	22,430.31	104,574.00	182,729.00	57.22%
**	032	Emergency Preparedness	11,224.63	58,410.70	122,421.00	47.71%
*	012	Area Agency on Aging	111,770.97	591,216.18	1,352,727.00	43.70%
*	326	Vision (ELPHS)	10,559.76	42,933.57	99,069.00	43.33%
	021	Dental Clinic - Three Rivers	2,775.00	13,875.00	33,300.00	41.66%
	341	Infectious Disease	20,951.29	117,386.22	287,139.00	40.88%
	327	Hearing (ELPHS)	8,579.25	39,608.64	98,844.00	40.07%
	331	STD	10,871.63	56,940.03	144,713.00	39.34%
	605	General EH Services	2,715.24	14,602.01	38,102.00	38.32%
	714	Onsite Sewage Disposal	25,794.71	138,719.11	361,963.00	38.32%
	721	Drinking Water Supply	25,794.71	138,719.11	361,963.00	38.32%
	352	ELCCT Contact Tracing, testing doord,	43,305.35	250,632.06	667,609.00	37.54%
	338	Immunization Vaccine Handling	22,120.25	111,341.37	299,428.00	37.18%
	745	Type II Water	6,956.51	36,672.14	99,019.00	37.03%
	704	Food Service	34,541.72	179,214.68	485,712.00	36.89%
	329	MCH Enabling Children	2,487.81	13,854.44	39,540.00	35.03%
	109	WIC	74,645.75	327,824.21	967,765.00	33.87%
	351	CELC Infection Prevention	3,997.23	27,966.17	90,728.00	30.82%
	029	Dental Clinic - Hillsdale	681.18	3,604.71	12,000.00	30.03%
	115	MCH Enabling Women	1,717.83	16,380.39	55,907.00	29.29%
	201	CSF Carseats	1,425.20	7,582.13	25,889.00	29.28%
	321	CHC Tele-A-Health	2,266.66	10,480.74	40,985.00	25.57%
	014	VOCA	6,322.60	51,969.25	205,743.00	25.25%
	332	HIV Prevention	2,169.41	9,394.82	38,115.00	24.64%
	363	363 CVDIMS Covid Immz Supplemental	32,785.10	183,252.62	788,258.00	23.24%
	138	Immunization IAP	36,021.52	182,345.44	838,324.00	21.75%
	108	WIC Breastfeeding	5,612.02	22,719.19	116,877.00	19.43%
	101	Workforce Development	4,448.90	9,285.24	49,230.00	18.86%
	345	Lead Testing	419.40	4,439.87	25,611.00	17.33%
	107	Medicaid Outreach	782.80	2,679.42	18,626.00	14.38%
	200	ELPHS Marketing	2,654.33	11,634.48	84,883.00	13.70%
	400	HRSA 20RCORP	2,038.07	8,366.50	85,996.00	9.72%

024	MERS Pension Underfunded Liability	2,641.51	2,940.89	44,590.00	6.59%
374	EOACV Expanding Older Adult Access to COVID Vaccine	20.64	551.68	17,163.00	3.21%
371	CSHCS Vaccine Initiative	3.97	407.77	14,150.00	2.88%
023	Capital Expenditures	0.00	0.00	138,000.00	0.00%
035	Vector Borne Disease Surveillance	0.00	0.00	32,414.00	0.00%
112	CSHCS Medicaid Outreach	0.00	0.00	72,853.00	0.00%
185	Dental Outreach	0.00	0.00	65,071.00	0.00%
212	Medical Marijuana BR	0.00	0.00	22,378.00	0.00%
230	Medical Marijuana HD	0.00	0.00	13,159.00	0.00%
275	Medical Marijuana SJ	<u>0.00</u>	<u>0.00</u>	<u>7,863.00</u>	0.00%
	<b>Total Total Expense</b>	<b><u>556,508.18</u></b>	<b><u>2,873,797.98</u></b>	<b><u>8,655,610.00</u></b>	<b><u>33.20%</u></b>

The Agency is currently 8.46% under budget.

\*5/12 Months = 41.66%

\*\*5/9 Months = 55.55%

## Programs Over Budget as of 2/28/2022

---

**RU 405:** New Grant Writing program used to evaluate how much is spent on grant writing activities. We will monitor and amend in the final amendment.  
**163.24%**

---

**RU 008:** Over budget due to end of year sick time payout and vacation time payout when a long-term employee retired. This should fall back in line with budget as year progresses, but we will continue to monitor and may need to adjust in an upcoming amendment.  
**74.55%**

---

**RU 010:** Program shows over budget because we have already received 65% of the revenue budgeted, the majority of that in a one-time payment from MMRMA. This causes the indirect expenses not to be distributed to the programs as expected. Legal fees are also running higher than expected. We will continue to monitor and will amend in the final amendment.  
**64.94%**

---

**RU 325:** Budget for RU 325 must be fully expended before expenses can be charged to RU 112. When looking at these two budgets together as one the program is within budget at 40.91%  
**57.22%**

---

**RU 032:** 9-Month Program - within budget 55.55%  
**47.71%**

---

**RU 012:** Over budget due to contractual service providers having full year grant awards and billing more than 1/12 of grant each month. AAA will continue to monitor and work with providers to ensure no over payments happen and appropriate adjustments are made at the next budget amendment.  
**43.70%**

---

**RU 326:** 9-Month Program - within budget 55.55%  
**43.33%**

---

## Proposed Immunization Fee Schedule - March 2022

Vaccines	Cost per dose	Cost + .3 Rounded Up	Admin Fee	New Cost Update: 03/22	Last Cost Update: 02/21
DTaP (pediatric) Infanrix	\$22.60	\$30.00	\$23.00	\$53.00	\$51.00
DTaP-Hep B-IPV Pediarix	\$67.19	\$88.00	\$23.00	\$111.00	\$117.00
DTaP-IPV Kinrix, Quadracel	\$52.70	\$69.00	\$23.00	\$92.00	\$91.00
Hep A (adult) Havrix	\$39.54	\$52.00	\$23.00	\$75.00	\$75.00
Hep A(ped/adol Havrix Pediatric	\$29.27	\$39.00	\$23.00	\$62.00	\$59.00
Hep A-Hep B (Twinrix)	\$97.89	\$128.00	\$23.00	\$151.00	\$133.00
Hep B (adult) Engerix	\$45.56	\$60.00	\$23.00	\$83.00	\$80.00
Hep B (ped/adol) Engerix	\$16.93	\$23.00	\$23.00	\$46.00	\$44.00
MenB-4C (Bexsero)	\$178.17	\$232.00	\$23.00	\$255.00	\$230.00
Zoster RZV (Shingrix)	\$171.40	\$223.00	\$23.00	\$246.00	\$220.00
HPV9	\$253.60	\$330.00	\$23.00	\$353.00	\$320.00
MMR	\$87.31	\$114.00	\$23.00	\$137.00	\$126.00
MMRV (ProQuad)	\$250.02	\$326.00	\$23.00	\$349.00	\$316.00
PPSV23 (Pneumovax)	\$117.08	\$153.00	\$23.00	\$176.00	\$160.00
RV5 (Rotateq)	\$90.50	\$118.00	\$23.00	\$141.00	\$133.00
Varicella (Varivax)	\$150.98	\$197.00	\$23.00	\$220.00	\$199.00
PCV13 (Prevnar13)	\$224.17	\$292.00	\$23.00	\$315.00	\$286.00
PCV20 (Prevnar20)	\$246.52	\$321.00	\$23.00	\$344.00	X
Trumenba	\$149.74	\$195.00	\$23.00	\$218.00	\$163.00
DTaP-Hib-IPV (Pentacel)	\$103.73	\$135.00	\$23.00	\$158.00	\$144.00
Hib (ActHib/Hiberix)	\$11.88	\$16.00	\$23.00	\$39.00	\$38.00
Fluzone High-Dose (IIV4-HD)	\$57.37	\$75.00	\$23.00	\$98.00	\$92.00
Fluzone (IIV4) -single dose	\$18.84	\$25.00	\$23.00	\$48.00	\$47.00
Fluzone (IIV4)-multi-dose	\$17.59	\$23.00	\$23.00	\$46.00	\$45.00
IPV (polio) IPOL	\$36.92	\$48.00	\$23.00	\$71.00	\$68.00
MCV4 (Menactra)	\$141.47	\$184.00	\$23.00	\$207.00	\$190.00
Td PF (adol/adult) Tenivac	\$37.87	\$50.00	\$23.00	\$73.00	\$69.00
Tdap (adol/adult) Adacel	\$45.20	\$59.00	\$23.00	\$82.00	\$81.00

To: Board of Health

From: Rebecca Burns

Date: March 16, 2022

Re: Legal Agreements/Fees for District Health Departments

At the request of Commissioner Leininger who inquired about legal fees and a retainer, the following information has been put together for your review. I would draw your attention to the legal fees paid by the Agency by year and the reported legal fees paid by other district health departments in Michigan.

As you know there are two models for local health departments in Michigan; county based or district health department (DHD). For single county health departments, the local health department is a department of the county and uses the legal team for the county. For district health departments, legal services are sought directly by the district health department. Therefore, I sought information from other district health departments in Michigan to provide an overview of fees for legal services.

All but 4 district health departments responded to my request for information. Those that did not respond were Benzie/Leelanau, Health Department of Northwest Michigan, DHD#2, and DHD #4.

None of the DHD's are paying a retainer for services by a firm. All are paying an hourly rate. Until the issues of the pandemic, it was unusual for the local health department to have much cost for legal services. Most of those costs were involved with human resource issues. This is demonstrated by the legal services paid by fiscal year at BHSJCHA information that is provided.

It is my recommendation that given the information other DHD's have provided and our own data on past legal fees paid, that BHSJCHA maintain our existing relationship with Rosati, Schultz, Joppich, Amtsbuechler PC.

DHD	Legal Firm	Attorney Name	Retainer	Hourly Rate
Branch-Hillsdale-St. Joseph	Rosati Schultz Joppich Amtsbuechler PC	Andrew Brege	No	150.00
DHD #10	Running,Wise & Ford, PLC	Cathy Jasinski	No	130.00
Luce-Mackinac-Alger-Schoolcraft	Foster Swift	Mike Homier	No	220.00
Dickinson-Iron	Cohl, Stoker & Toskey	Bonnie Toskey/Tim Perone	No	160.00
Barry-Eaton	Abbott Nicholson		No	165.00
Western UP	Foster Swift		No	225.00
PH Delta-Menominee	Cohl, Stoker & Toskey	Dave Stoker	No	185.00
				Multiple (Shareholders \$225, Associates/Seni or Attorneys \$195, Legal Assistants \$120)
Cass-VanBuren	Foster Swift		No	
Central Michigan	Cohl, Stoker & Toskey		No	190.00
Mid-Michigan	Cohl, Stoker & Toskey		No	195.00

# History of Legal Fees

## FY17/18

Date	Total	Hours	General	COVID
11/24/2017	\$615.00	4.1	\$615.00	
12/22/2017	\$525.00	3.5	\$525.00	
2/28/2018	\$510.00	3.4	\$510.00	
3/30/2018	\$75.00	0.5	\$75.00	
3/30/2018	\$90.00	0.6	\$90.00	
4/27/2018	\$105.00	0.7	\$105.00	
5/25/2018	\$150.00	1.0	\$150.00	
6/22/2018	\$450.00	3.0	\$450.00	
6/22/2018	\$510.00	3.4	\$510.00	
8/31/2018	\$75.00	0.5	\$75.00	
9/28/2018	\$210.00	1.4	\$210.00	
9/30/2018	\$225.00	1.5	\$225.00	
	<u>\$3,540.00</u>	<u>23.6</u>	<u>\$3,540.00</u>	

## FY18/19

Date	Total	Hours	General	COVID
11/23/2018	\$345.00	2.3	\$345.00	
12/21/2018	\$90.00	0.6	\$90.00	
4/26/2019	\$615.00	4.1	\$615.00	
5/24/2019	\$690.00	4.6	\$690.00	
7/19/2019	\$1,050.00	7.0	\$1,050.00	
8/30/2019	\$195.00	1.3	\$195.00	
9/27/2019	\$330.00	2.2	\$330.00	
	<u>\$3,315.00</u>	<u>22.1</u>	<u>\$3,315.00</u>	

## FY19/20

Date	Total	Hours	General	COVID
10/31/2019	\$165.00	1.1	\$165.00	
1/8/2020	\$180.00	1.2	\$180.00	
3/10/2020	\$315.00	2.1	\$315.00	
4/8/2020	\$1,185.00	7.9	\$960.00	\$225.00
5/8/2020	\$480.00	3.2	\$480.00	
5/8/2020	\$165.00	1.1	\$165.00	
6/9/2020	\$60.00	0.4	\$60.00	
7/9/2020	\$600.00	4.0	\$270.00	\$330.00
8/11/2020	\$570.00	3.8	\$480.00	\$90.00
8/11/2020	\$450.00	3.0	\$45.00	\$405.00
9/14/2020	\$105.00	0.7	\$105.00	
9/14/2020	\$405.00	2.7	\$405.00	
	<u>\$4,680.00</u>	<u>31.2</u>	<u>\$3,630.00</u>	<u>\$1,050.00</u>

## FY20/21

Date	Total	Hours	General	COVID
10/12/2020	\$195.00	1.3	\$195.00	
10/12/2020	\$1,125.00	7.5	\$1,125.00	
11/12/2020	\$555.00	3.7	\$555.00	
11/12/2020	\$150.00	1.0	\$150.00	
12/9/2020	\$1,095.00	7.3	\$450.00	\$645.00
1/12/2021	\$2,865.00	19.1	\$225.00	\$2,640.00
2/10/2021	\$3,125.00	20.8		\$3,125.00
3/9/2021	\$812.00	5.4	\$375.00	\$437.00
4/14/2021	\$375.00	2.5	\$375.00	
4/14/2021	\$360.00	2.4	\$330.00	\$30.00
5/12/2021	\$1,230.00	8.2	\$1,230.00	
5/12/2021	\$2,138.80	14.3	\$315.00	\$1,823.80
6/9/20201	\$705.00	4.7	\$705.00	
6/9/2021	\$630.00	4.2	\$165.00	\$465.00
7/9/2021	\$195.00	1.3	\$195.00	
7/9/2021	\$1,200.00	8.0	\$1,080.00	\$120.00
8/12/2021	\$240.00	1.6	\$240.00	
8/12/2021	\$165.00	1.1	\$165.00	
9/10/2021	\$1,560.00	10.4		\$1,560.00
9/30/2021	\$3,435.00	22.9		\$3,435.00
	<u>\$22,155.80</u>	<u>147.7</u>	<u>\$7,875.00</u>	<u>\$14,280.80</u>

## FY21/22

Date	Total	Hours	General	COVID
11/11/2021	\$195.00	1.3	\$120.00	\$75.00
12/8/2021	\$1,125.00	7.5	\$645.00	\$480.00
12/8/2021	\$7,164.40	47.8		\$7,164.40
1/10/2022	\$885.00	5.9	\$90.00	\$795.00
1/10/2022	\$510.00	3.4		\$510.00
2/9/2022	\$945.00	6.3	\$945.00	
2/9/2022	\$1,785.00	11.9		\$1,785.00
	<u>\$12,609.40</u>	<u>84.1</u>	<u>\$1,800.00</u>	<u>\$10,809.40</u>



2425 E. Grand River Ave.,  
Suite 1, Lansing, MI 48912

☎ 517.323.7500

📠 517.323.6346

March 11, 2022

Board of Public Health  
Branch-Hillsdale-St. Joseph Community Health Agency  
Coldwater, Michigan

We have audited the financial statements of the governmental activities and the major fund of the Branch-Hillsdale-St. Joseph Community Health Agency (the Agency) for the year ended September 30, 2021. Professional standards require that we provide you with information about our responsibilities under generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance, as well as certain information related to the planned scope and timing of our audit. We have communicated such information in our letter to you dated January 5, 2022. Professional standards also require that we communicate to you the following information related to our audit.

### Significant Audit Findings

#### *Qualitative Aspects of Accounting Practices*

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by Branch-Hillsdale-St. Joseph Community Health Agency are described in Note 1 to the financial statements. No new accounting policies were adopted, and the application of existing policies was not changed during fiscal year 2021. We noted no transactions entered into by the Agency during the year for which there is a lack of authoritative guidance or consensus. All significant transactions have been recognized in the financial statements in the proper period.

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ significantly from those expected. The most sensitive estimates affecting the financial statements of the governmental activities were:

Management's calculation of the historical termination vesting percentages for severance payments is based on an estimate of the percentage of employees who have terminated employment and payments are based on an estimate of the percentage of employees' use of compensated absences.

Management's calculation of depreciation expense for the current period is based on an estimate of the useful lives of the capital assets.

The calculation of the net pension liability, and the related deferred outflows of resources and deferred inflows of resources, is based on an actuarial study which utilized certain actuarial assumptions based on historical trends and industry standards.

We evaluated the key factors and assumptions used to develop these accounting estimates in determining that they are reasonable in relation to the financial statements taken as a whole.

The financial statement disclosures are neutral, consistent, and clear.

#### *Difficulties Encountered in Performing the Audit*

We encountered no significant difficulties in dealing with management in performing and completing our audit.

#### *Corrected and Uncorrected Misstatements*

Professional standards require us to accumulate all known and likely misstatements identified during the audit, other than those that are clearly trivial, and communicate them to the appropriate level of management. No known or likely misstatements were identified during the audit.

#### *Disagreements with Management*

For purposes of this letter, a disagreement with management is a financial accounting, reporting, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the financial statements or the auditor's report. We are pleased to report that no such disagreements arose during the course of our audit.

#### *Management Representations*

We have requested certain representations from management that are included in the management representation letter dated March 11, 2022.

#### *Management Consultations with Other Independent Accountants*

In some cases, management may decide to consult with other accountants about auditing and accounting matters, similar to obtaining a "second opinion" on certain situations. If a consultation involves application of an accounting principle to the Agency's financial statements or a determination of the type of auditor's opinion that may be expressed on those statements, our professional standards require the consulting accountant to check with us to determine that the consultant has all the relevant facts. To our knowledge, there were no such consultations with other accountants.

#### *Other Audit Findings or Issues*

We generally discuss a variety of matters, including the application of accounting principles and auditing standards, with management each year prior to retention as the Agency's auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our retention.

#### Other Matters

We applied certain limited procedures to the management's discussion and analysis, budgetary comparison schedule, schedule of changes in employer's net pension liability and related ratios, and schedule of employer contributions, which are required supplementary information (RSI) that supplements the basic financial statements. Our procedures consisted of inquiries of management regarding the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We did not audit the RSI and do not express an opinion or provide any assurance on the RSI.

We were engaged to report on other supplementary information, which accompanies the financial statements but is not RSI. With respect to this supplementary information, we made certain inquiries of management and evaluated the form, content, and methods of preparing the information to determine that the information complies with accounting principles generally accepted in the United States of America, the method of preparing it has not changed from the prior period, and the information is appropriate and complete in relation to our audit of the financial statements. We compared and reconciled the supplementary information to the underlying accounting records used to prepare the financial statements or to the financial statements themselves.

Restriction on Use

This information is intended solely for the use of the Board of Public Health and management of the Branch-Hillsdale-St. Joseph Community Health Agency and is not intended to be, and should not be, used by anyone other than these specified parties.

Very truly yours,

*Manes Costeiran PC*

**BRANCH-HILLSDALE-ST. JOSEPH  
COMMUNITY HEALTH AGENCY  
COLDWATER, MICHIGAN**

**REPORT ON FINANCIAL STATEMENTS  
(with required and other  
supplementary information)**

**YEAR ENDED SEPTEMBER 30, 2021**

**TABLE OF CONTENTS**

	<u>Page</u>
INDEPENDENT AUDITOR'S REPORT.....	1-3
MANAGEMENT'S DISCUSSION AND ANALYSIS .....	4-8
BASIC FINANCIAL STATEMENTS.....	9
Government-wide Financial Statements	
Statement of Net Position.....	10
Statement of Activities.....	11
Fund Financial Statements	
Governmental Fund	
Balance Sheet.....	12
Reconciliation of the Governmental Fund Balance Sheet to the Statement of Net Position .....	13
Statement of Revenues, Expenditures, and Changes in Fund Balance .....	14
Reconciliation of the Statement of Revenues, Expenditures, and Changes in Fund Balance of the Governmental Fund to the Statement of Activities.....	15
Notes to Financial Statements .....	16-30
REQUIRED SUPPLEMENTARY INFORMATION.....	31
General Operating Fund	
Budgetary Comparison Schedule.....	32
Defined Benefit Pension Plan	
Schedule of Changes in Employer's Net Pension Liability and Related Ratios.....	33
Schedule of Employer Contributions.....	34
Note to Required Supplementary Information .....	35
OTHER SUPPLEMENTARY INFORMATION.....	36
Supplemental Schedule: Funded Service Categories by Source -	
Aging and Adult Services Agency.....	37-41
Schedule of Expenditures of Federal Awards.....	42-44
Notes to Schedule of Expenditures of Federal Awards.....	45-46
INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH <i>GOVERNMENT AUDITING STANDARDS</i> .....	47-48
INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE .....	49-50
SCHEDULE OF FINDINGS AND QUESTIONED COSTS .....	51
SUMMARY SCHEDULE OF PRIOR YEAR AUDIT FINDINGS .....	52



2425 E. Grand River Ave.,  
Suite 1, Lansing, MI 48912

☎ 517.323.7500

🖨 517.323.6346

## INDEPENDENT AUDITOR'S REPORT

Board of Public Health  
Branch-Hillsdale-St. Joseph Community Health Agency  
Coldwater, Michigan

### **Report on the Financial Statements**

We have audited the accompanying financial statements of the governmental activities and the major fund of the Branch-Hillsdale-St. Joseph Community Health Agency (the Agency), as of and for the year ended September 30, 2021, and the related notes to the financial statements, which collectively comprise the Agency's basic financial statements as listed in the table of contents.

### ***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

### ***Auditor's Responsibility***

Our responsibility is to express opinions on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

### ***Opinions***

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the governmental activities and the major fund of the Branch-Hillsdale-St. Joseph Community Health Agency, as of September 30, 2021, and the respective changes in financial position thereof for the year then ended in accordance with accounting principles generally accepted in the United States of America.

### ***Other Matters***

#### *Required Supplementary Information*

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis, budgetary comparison schedule, schedule of changes in employer's net pension liability and related ratios, and schedule of employer contributions, as identified in the table of contents, be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

#### *Other Information*

Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the Agency's basic financial statements. The accompanying schedule of funded service categories by source is presented for purposes of additional analysis and is not a required part of the basic financial statements. The schedule of expenditures of federal awards is presented for purposes of additional analysis as required by Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, and is also not a required part of the financial statements.

The supplemental schedule of funded service categories by source and the schedule of expenditures of federal awards are the responsibility of management and were derived from and relate directly to the underlying accounting and other records used to prepare the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of funded service categories by source and the schedule of expenditures of federal awards are fairly stated, in all material respects, in relation to the basic financial statements as a whole.

**Other Reporting Required by *Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated March 11, 2022, on our consideration of the Branch-Hillsdale-St. Joseph Community Health Agency's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Branch-Hillsdale-St. Joseph Community Health Agency's internal control over financial reporting and compliance.

*Manes Costeiran PC*

March 11, 2022

## **Management's Discussion and Analysis For Fiscal Year Ended September 30, 2021**

This section of the annual financial statements, titled Management's Discussion and Analysis, represents the administration's review of the Branch-Hillsdale-St. Joseph Community Health Agency's (the Agency's) financial performance during the fiscal year ended September 30, 2021. The Management's Discussion and Analysis is intended to be read in conjunction with the Agency's financial statements.

Generally accepted accounting principles (GAAP) according to GASB Statement No. 34 require the reporting of two types of financial statements: government-wide financial statements and fund level financial statements.

### **Financial Highlights**

- The assets of the Agency exceeded its liabilities at September 30, 2021, by \$2,322,894 at the government-wide level. Unrestricted net position was \$2,036,656 at September 30, 2021.
- The Agency's total net position increased \$943,953 as a result of this year's operations.
- As of September 30, 2021, the Agency's governmental fund reported an ending fund balance of \$3,359,738, an increase of \$635,785.
- As of September 30, 2021, the assigned and unassigned fund balance was \$2,823,630 and \$436,172, respectively, or approximately 39% of total fund expenditures.

### **Overview of the Financial Statements**

The Branch-Hillsdale-St. Joseph Community Health Agency's basic financial statements comprise three components: 1) government-wide financial statements, 2) fund financial statements, and 3) notes to the financial statements. This report also contains other supplementary information in addition to the basic financial statements themselves.

**Government-wide Financial Statements:** The government-wide financial statements provide information about the activities of the entire Agency. They present an overall view of the Agency's finances, reporting the assets and liabilities on fiscal year ended September 30, 2021.

The statement of net position presents information on all of the Branch-Hillsdale-St. Joseph Community Health Agency's assets, deferred outflows of resources, liabilities, and deferred inflows of resources, with the difference between them reported as net position. Over time, increases or decreases in net position may serve as a useful indicator of whether the financial position of the Agency is improving or deteriorating.

The statement of activities presents information showing how the government's net position changed during fiscal year 2020/2021. All changes in net position are reported as soon as the change occurs, regardless of the timing of related cash flows.

All of the Branch-Hillsdale-St. Joseph Community Health Agency's activities are supported by intergovernmental revenues, governmental grants, fees and charges for services, interest and rents, local revenues, and contributions. The governmental activities of the Agency are all considered health and welfare programs. The Area Agency on Aging (AAA) is an autonomous department within CHA responsible for administering Federal and State funds to local aging programs and organizations within our two-county planning and service area (Branch and St. Joseph Counties only). We are designated by the Michigan Aging and Adult Services Agency (AASA) to carry out this function. The Agency does not operate any programs that are intended to recover all or a significant portion of their costs through user fees and charges.

The government-wide financial statements include only financial information related to the Branch-Hillsdale-St. Joseph Community Health Agency.

**Fund Financial Statements:** A fund is a grouping of related accounts that is used to maintain control over resources that have been segregated for specific activities or objectives. The Branch-Hillsdale-St. Joseph Community Health Agency uses fund accounting to ensure and demonstrate compliance with finance-related legal requirements. The Agency operates with one fund, which is considered a governmental fund.

**Governmental funds:** Governmental funds are used to account for essentially the same functions reported as governmental activities in the government-wide financial statements. However, unlike the government-wide financial statements, governmental fund financial statements focus on near-term inflows and outflows of spendable resources, as well as on balances of spendable resources available at the end of the fiscal year. Such information may be useful in evaluating a government's near-term financing requirements.

Because the focus of governmental funds is narrower than that of the government-wide financial statements, it is useful to compare the information presented for governmental funds with similar information presented for governmental activities in the government-wide financial statements. By doing so, readers may better understand the long-term impact of the government's near-term financing decisions. Both the governmental fund balance sheet and governmental fund statement of revenues, expenditures, and changes in fund balance provide a reconciliation to facilitate this comparison between governmental funds and governmental activities.

The Branch-Hillsdale-St. Joseph Community Health Agency adopts an annual appropriated budget for its Health Fund. A budgetary comparison statement has been provided for this fund to demonstrate compliance with this budget.

The basic financial statements can be found on pages 9-15 of this report.

**Notes to the Financial Statements:** The notes provide additional information that is essential to a full understanding of the data provided in the government-wide and fund financial statements. The notes to the financial statements can be found on pages 16-30 of this report.

**Other Information:** In addition to the basic financial statements and accompanying notes, this report also presents certain required supplementary information concerning budgeted revenues and expenditures, schedule of changes in net pension liability and related ratios, and schedule of employer contributions on pages 31-35. Other supplementary information concerning support services and expenditures of federal awards can be found on pages 36-45 of this report.

**Government-wide Financial Analysis:**

As noted earlier, net position may serve over time as a useful indicator of a government’s financial position. In the case of Branch-Hillsdale-St. Joseph Community Health Agency, assets exceeded liabilities by \$2,322,894. A comparative analysis of net position as of September 30, 2021 and 2020 are presented below:

	<u>2021</u>	<u>2020</u>
Current assets	\$ 5,362,705	\$ 4,279,434
Capital assets	<u>286,238</u>	<u>135,301</u>
Total assets	<u>5,648,943</u>	<u>4,414,735</u>
Deferred outflows of resources related to pension	<u>1,766,295</u>	<u>1,491,636</u>
Current liabilities	2,151,514	1,705,327
Noncurrent liabilities	<u>2,244,529</u>	<u>2,822,103</u>
Total liabilities	<u>4,396,043</u>	<u>4,527,430</u>
Deferred inflows of resources related to pension	<u>696,301</u>	<u>-</u>
Net position		
Net investment in capital assets	286,238	135,301
Unrestricted	<u>2,036,656</u>	<u>1,243,640</u>
Total net position	<u>\$ 2,322,894</u>	<u>\$ 1,378,941</u>

Unrestricted net position (the part of net position that can be used to finance day to day operations) increased by \$793,016. This is within our desired range.

The following table shows the changes in net position as of September 30, 2021 and 2020.

	<u>2021</u>	<u>2020</u>
Program revenues		
Charges for services	\$ 811,998	\$ 787,462
Grants and contributions	7,458,077	5,516,230
General revenues		
County appropriations	753,310	756,016
Miscellaneous	70,812	80,641
Interest	<u>2,916</u>	<u>56,743</u>
Total revenues	9,097,113	7,197,092
Program expenses	<u>8,153,160</u>	<u>6,875,797</u>
Change in net position	<u>\$ 943,953</u>	<u>\$ 321,295</u>

During the year contributions increased \$1,728,309 due to additional State and Federal funding received related to the ongoing COVID-19 pandemic. We will continue to collaborate with local health providers and using them as a resource to find new funding.

Total expenses increased approximately \$1,277,363 or 19% from last year.

### **Financial Analysis of the Government's Fund**

As noted earlier, the Branch-Hillsdale-St. Joseph Community Health Agency uses fund accounting to ensure and demonstrate compliance with finance-related legal requirements.

**Governmental Fund:** The focus of the Branch-Hillsdale-St. Joseph Community Health Agency's governmental fund is to provide information on near-term inflows, outflows, and balances of spendable resources. Such information is useful in assessing the Branch-Hillsdale-St. Joseph Community Health Agency's financing requirements. In particular, unassigned fund balance may serve as a useful measure of a government's net resources available for spending at the end of the fiscal year.

As of the end of the current fiscal year, the Branch-Hillsdale-St. Joseph Community Health Agency's governmental fund reported an ending fund balance of \$3,359,738, an increase of \$635,785 in comparison with the prior year. Of this total, \$99,936 is considered nonspendable as it is for prepaid expenditures. There has been \$2,823,630 assigned for various future year expenditures. The unassigned fund balance at September 30, 2021, was \$436,172.

As a measure of the governmental fund's liquidity, it may be useful to compare assigned and unassigned fund balance to total fund expenditures. Assigned and unassigned fund balance represents approximately 39% of total fund expenditures.

### **Governmental Fund Budgetary Highlights**

Over the course of the year, the Branch-Hillsdale-St. Joseph Community Health Agency's Board of Directors amended the budget to take into account events that occurred during the year. Total expenditures budget was increased by \$3,417,012, or approximately 50%, primarily due to salaries and wages and contractual services related to ongoing pandemic, and repair and maintenance expenditures related to parking lot improvements. Actual expenditures were \$1,822,198 under the final amended budget. The Agency contributed \$783,141 in excess of the required contributions to the pension plan this year.

### **Capital Asset and Debt Administration**

**Capital Assets:** The Branch-Hillsdale-St. Joseph Community Health Agency's investment in capital assets as of September 30, 2021, amounts to \$286,238 (net of accumulated depreciation). During the year, the Agency made investments in capital assets in the amount of \$218,493, including parking lot improvements. Additional details related to capital assets are presented in Note 3 to the financial statements.

**Long-term Obligations:** The Branch-Hillsdale-St. Joseph Community Health Agency has a long-term obligation related to compensation (e.g., unused vacation and sick leave). The long-term obligation at September 30, 2021, amounted to \$445,640 for compensated absences. Additional details related to long-term obligations are presented in Note 4 to the financial statements.

## **Economic Factors and Next Year's Budget and Rates**

The fiscal year ending September 30, 2022, will be an uncertain year as the Nation continues to deal with the Public Health Crisis created by the COVID-19 pandemic. The Agency did receive an increase of \$17,122 in local county appropriations for 2022. The Agency will advocate for an increase in local county appropriations every year. The Agency continues to receive payments for Medicaid Cost Based Reimbursement, but these payments are expected to be reduced from the previous year, as services were decreased due to the pandemic; payments are based on the number of services provided and the actual costs to provide Medicaid allowable services rather than a defined claim structure. The Agency receives revenue for public health dental outreach and education from the four My Community Dental Centers (MCDC) located within Branch, Hillsdale, and St. Joseph counties, but revenue remains low as MCDC temporarily closed the Hillsdale Dental Center due to staffing issues. MCDC is working on recruiting and is now offering an incentive package to eliminate the shortage, therefore, we anticipate this turning around in future years. The Agency continues to have budget constraints due to the MERS Retirement Defined Benefit plan not being fully funded. The Agency will continue to review and respond to grant opportunities to help in offsetting costs and increase services to the public. The Agency will receive grants for 2022 in Vectorborne Surveillance, PFAS Response and Remediation, Medical Marihuana Operation & Oversight, Victims of Crime Act 'Services to Victims of Elder Abuse', Expanding Older Adult Access to COVID-19 Vaccine, COVID-19 Immunization Support, and other COVID-19 related grants.

Because the services of the Branch-Hillsdale-St. Joseph Community Health Agency are provided based on need and not the ability to pay, the Agency will continue to expand billings to insurances when available to offset costs. The Agency routinely reviews fees to ensure that the Agency billing is in line with allowed pricing for our services.

## **Requests for Information**

This financial report is designed to provide a general overview of the Branch-Hillsdale-St. Joseph Community Health Agency's finances for all those with an interest in the government's finances. Questions concerning any of the information provided in this report or requests for additional financial information should be addressed to:

**Rebecca A. Burns, M.P.H., R.S.**  
**Health Officer**  
**Branch-Hillsdale-St. Joseph Community Health Agency**  
**570 Marshall Road**  
**Coldwater, MI 49036**  
**Office: 517-279-9561, ext. 148**  
**Fax: 517-278-2923**  
**E-mail: [burnsr@bhsj.org](mailto:burnsr@bhsj.org)**

## **BASIC FINANCIAL STATEMENTS**

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY**  
**STATEMENT OF NET POSITION**  
**SEPTEMBER 30, 2021**

	Governmental Activities
<b>ASSETS</b>	
Current assets	
Cash	\$ 4,869,964
Accounts receivable	105,373
Due from other governmental units - Federal/State	208,715
Prepays	99,936
Inventories	78,717
	5,362,705
Noncurrent assets	
Capital assets, net of accumulated depreciation	286,238
	5,648,943
<b>DEFERRED OUTFLOWS OF RESOURCES</b>	
Deferred outflows of resources related to pension	1,766,295
<b>LIABILITIES</b>	
Current liabilities	
Accounts payable	693,972
Accrued wages	122,013
Due to other governmental units - Federal/State	928,728
Other accrued liabilities	89,391
Unearned revenue	168,863
Current portion of compensated absences	148,547
	2,151,514
Noncurrent liabilities	
Net pension liability	1,947,436
Noncurrent portion of compensated absences	297,093
	2,244,529
	4,396,043
<b>DEFERRED INFLOWS OF RESOURCES</b>	
Deferred inflows of resources related to pension	696,301
<b>NET POSITION</b>	
Investment in capital assets	286,238
Unrestricted	2,036,656
	\$ 2,322,894
	\$ 2,322,894

See accompanying notes to financial statements.



**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
GOVERNMENTAL FUND  
BALANCE SHEET  
SEPTEMBER 30, 2021**

<b>ASSETS</b>	
Cash	\$ 4,869,964
Accounts receivable	105,373
Due from other governmental units - Federal/State	208,715
Prepays	99,936
Inventories	78,717
	<u>5,362,705</u>
<b>TOTAL ASSETS</b>	<b>\$ 5,362,705</b>
 <b>LIABILITIES</b>	
Accounts payable	\$ 693,972
Accrued wages	122,013
Due to other governmental units - Federal/State	928,728
Other accrued liabilities	89,391
Unearned revenue	168,863
	<u>2,002,967</u>
<b>TOTAL LIABILITIES</b>	<b>2,002,967</b>
 <b>FUND BALANCE</b>	
Nonspendable	99,936
Assigned	2,823,630
Unassigned	436,172
	<u>3,359,738</u>
<b>TOTAL FUND BALANCE</b>	<b>3,359,738</b>
<b>TOTAL LIABILITIES AND FUND BALANCE</b>	<b>\$ 5,362,705</b>

See accompanying notes to financial statements.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
RECONCILIATION OF THE GOVERNMENTAL FUND BALANCE  
SHEET TO THE STATEMENT OF NET POSITION  
SEPTEMBER 30, 2021**

**Total fund balance - governmental fund** \$ 3,359,738

Amounts reported for the governmental activities in the statement of net position are different because:

Capital assets used in governmental activities are not current financial resources and therefore are not reported as assets in the governmental fund.

The cost of capital assets is	\$ 1,278,550	
Accumulated depreciation is	(992,312)	
Capital assets, net		286,238

Governmental funds report actual pension expenditures for the fiscal year, whereas the governmental activities will recognize the net pension liability as of the measurement date. Pension contributions subsequent to the measurement date will be deferred in the statement of net position. In addition, resources related to changes of assumptions, differences between expected and actual experience, and differences between projected and actual pension plan investment earnings will be deferred over time in the government-wide financial statements. These amounts consist of:

Deferred outflows of resources related to pension	1,766,295	
Deferred inflows of resources related to pension	(696,301)	
		1,069,994

Long-term liabilities are not due and payable in the current period and therefore are not reported as liabilities in the governmental fund balance sheet. Long-term liabilities at year-end consist of:

Net pension liability	(1,947,436)	
Compensated absences	(445,640)	
		(2,393,076)

**Net position of governmental activities** \$ 2,322,894

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
GOVERNMENTAL FUND  
STATEMENT OF REVENUES, EXPENDITURES, AND CHANGES IN FUND BALANCE  
YEAR ENDED SEPTEMBER 30, 2021**

REVENUES	
Licenses and permits	\$ 332,018
Intergovernmental	
Federal/State	7,396,988
Local	64,117
County appropriations	753,310
Charges for services	473,353
Interest and rents	6,515
Other	70,812
	<hr/>
TOTAL REVENUES	9,097,113
	<hr/>
EXPENDITURES	
Current	
Salaries and wages	3,148,037
Fringe benefits	2,128,335
Supplies and materials	746,174
Contractual	1,521,281
Communications	69,915
Travel and training	97,828
Insurance	42,727
Repairs and maintenance	486,666
Building and equipment lease and rentals	112,855
Printing and advertising	56,790
Postage	33,093
Other	17,627
	<hr/>
TOTAL EXPENDITURES	8,461,328
	<hr/>
NET CHANGE IN FUND BALANCE	635,785
Fund balance, beginning of year	<hr/> 2,723,953
Fund balance, end of year	<hr/> <hr/> \$ 3,359,738

See accompanying notes to financial statements.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
RECONCILIATION OF THE STATEMENT OF REVENUES, EXPENDITURES, AND CHANGES IN  
FUND BALANCE OF THE GOVERNMENTAL FUND TO THE STATEMENT OF ACTIVITIES  
YEAR ENDED SEPTEMBER 30, 2021**

**Net change in fund balance - governmental fund** \$ 635,785

Amounts reported for governmental activities in the statement of activities are different because:

Capital outlays are reported as expenditures in governmental funds. However, in the statement of activities, the cost of capital assets is allocated over their estimated useful lives as depreciation expense. In the current period, these amounts are:

Capital outlay	\$ 218,493	
Loss on disposal of capital assets	(43,275)	
Depreciation expense	(24,281)	

Excess of capital outlay over depreciation expense and other items 150,937

Some items reported in the statement of activities do not require the use of current financial resources and therefore are not reported as expenditures in the governmental fund. These activities consist of:

Decrease in net pension liability	574,974	
Decrease in accrued compensated absences	3,899	
Increase in deferred outflows of resources related to pension	274,659	
(Increase) in deferred inflows of resources related to pension	(696,301)	

157,231

**Change in net position of governmental activities** \$ 943,953

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 1 - DESCRIPTION OF ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

The Branch-Hillsdale-St. Joseph Community Health Agency (the Agency) is a joint venture between Branch, Hillsdale, and St. Joseph Counties, and was established to provide public health services. The Community Health Agency Board has representation and provides services to Branch, Hillsdale, and St. Joseph Counties. Each County provides annual appropriations and passes through the statutory amounts of cigarette tax funding to subsidize operations. The current funding formula approved by the Community Health Agency requires Branch, Hillsdale, and St. Joseph Counties to provide approximately 28%, 31%, and 41%, respectively.

The financial statements of the Agency have been prepared in accordance with accounting principles generally accepted in the United States of America (GAAP) as applied to governmental units. The Governmental Accounting Standards Board (GASB) is the accepted standard-setting body for establishing governmental accounting and financial reporting principles. The Agency's more significant accounting policies are discussed below.

The primary revenues of the Branch-Hillsdale-St. Joseph Community Health Agency are charges for services, Federal and State grants, and County appropriations.

Reporting Entity

As required by accounting principles generally accepted in the United States of America, these financial statements are exclusive presentations of the financial condition and results of operations of the Branch-Hillsdale-St. Joseph Community Health Agency.

Basis of Presentation

**GOVERNMENT-WIDE FINANCIAL STATEMENTS**

The statement of net position and the statement of activities (the government-wide financial statements) present information for the Agency as a whole.

The government-wide financial statements are presented using the economic resources measurement focus, similar to that used by business enterprises or not-for-profit organizations. Because another measurement focus is used in the governmental fund financial statements, reconciliations to the government-wide financial statements are provided that explain the differences in detail.

The statement of activities presents the direct functional expenses of the Agency and the program revenues that support them. Direct expenses are specifically associated with a service, program, or department and are therefore clearly identifiable to a particular function. Program revenues are associated with specific functions and include charges to recipients for goods or services and grants and contributions that are restricted to meeting the operational or capital requirements of that function. Revenues that are not required to be presented as program revenues are general revenues. This includes interest and all County appropriations and shows how governmental functions are either self-financing or supported by the general revenues of the Agency.

**FUND FINANCIAL STATEMENTS**

The Agency uses a single fund to maintain its financial records during the year. A fund is defined as a fiscal and accounting entity with a self-balancing set of accounts. The governmental fund financial statements present the Agency's individual major fund.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 1 - DESCRIPTION OF ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES  
(continued)**

Basis of Presentation (continued)

FUND FINANCIAL STATEMENTS (continued)

The governmental fund financial statements are presented using the current financial resources measurement focus. With this measurement focus, only current assets, deferred outflows of resources, current liabilities, and deferred inflows of resources generally are included on the balance sheet. Operating statements of these funds present increases (i.e., revenues and other financing sources) and decreases (i.e., expenditures and other financing uses) in fund balance.

Basis of Accounting

Basis of accounting refers to the timing under which transactions are recognized for financial reporting purposes. Governmental fund financial statements use the modified accrual basis of accounting. The government-wide financial statements are prepared using the accrual basis of accounting.

Under the accrual basis of accounting, revenue is recorded in the period in which it is earned, and expenses are recorded when incurred, regardless of the timing of related cash flows. Revenues for grants and contributions are recognized when all eligibility requirements imposed by the provider have been met. Unearned revenue is recorded when resources are received by the Agency before it has legal claim to them, such as when grant monies are received prior to the incurrence of qualified expenses.

Under the modified accrual basis of accounting, revenues are recognized when susceptible to accrual (i.e., when they become both measurable and available). "Measurable" means the amount of the transaction can be determined and "available" means collectible within the current period or soon enough thereafter to be used to pay liabilities of the current period. For this purpose, the Agency considers revenues to be available if they are collected within 60 days of the end of the current period. Revenues susceptible to accrual include state and federal grants and interest revenue. Other revenues are not susceptible to accrual because generally they are not measurable until received in cash. Expenditures are recorded when the related fund liability is incurred, except for principal and interest on general long-term debt which are recorded when due.

If/when both restricted and unrestricted resources are available for use, it is the Agency's policy to use restricted resources first, then unrestricted resources as they are needed.

Budgets and Budgetary Accounting

The annual budget of the Agency is prepared by Agency management and approved by the Board at the total expenditure level. Any revisions to the original budget are approved by the Board before the end of the fiscal year.

Cash

Cash consists of the Agency's payroll and accounts payable checking accounts, branch office depository accounts, imprest cash, and cash on deposit with the Branch County Treasurer.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY**  
**NOTES TO FINANCIAL STATEMENTS**

**NOTE 1 - DESCRIPTION OF ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**  
**(continued)**

Cash (continued)

In accordance with Michigan Compiled Laws, the Agency is authorized to invest in the following investment vehicles:

- a. Bonds, securities, and other obligations of the United States or an agency or instrumentality of the United States.
- b. Certificates of deposit, savings accounts, deposit accounts, or depository receipts of a State or nationally chartered bank or a State or Federally chartered savings and loan association, savings bank, or credit union whose deposits are insured by an agency of the United States government and which maintains a principal office or branch office located in this State under the laws of this State or the United States, but only if the bank, savings and loan association, savings bank or credit union is eligible to be a depository of surplus funds belonging to the State under Section 6 of 1855 PA 105, MCL 21.146.
- c. Commercial paper rated at the time of purchase within the three highest classifications established by not less than two standard rating services and which matures not more than 270 days after the date of purchase.
- d. The United States government or Federal agency obligations repurchase agreements.
- e. Bankers acceptances of United States Banks.
- f. Mutual funds composed of investment vehicles, which are legal for direct investment by local units of government in Michigan.

Receivables and Unearned Revenue

Receivables consist of amounts due from governmental units for various grant programs and accounts receivable for charges for services to clients and other organizations.

The Agency has recognized the revenue related to charges for services at the time the services are performed and billed to the extent such amounts are estimated to be received. Contractual adjustments by third-party payers are treated as a reduction to revenues.

In addition to grant funding received prior to meeting the revenue recognition criteria, the Agency has also recorded unearned revenue in the government-wide and fund financial statements, respectively, equaling the amount of vaccine inventory received from the State of Michigan that is on hand at year-end. Unearned revenues arise when the Agency receives resources before it has a legal claim to them. In subsequent periods, when the revenue meets both the "measurable" and "available" criteria for recognition, the liability for unearned revenue is removed from the statement of net position and balance sheet, respectively, and revenue is recognized.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 1 - DESCRIPTION OF ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES  
(continued)**

Inventories

Inventories are stated at cost on a first in/first out basis. Donated vaccines inventory is stated at fair value as of the date of the donation. Inventory consists of vaccines received from the State of Michigan. They are recorded as expenditures at the time individual inventory items are used.

Prepays

Payments made to vendors for services that will benefit future periods are recorded as prepaid expenditures/expenses. Reported prepaid expenditures are equally offset by nonspendable fund balance which indicates they do not constitute "available spendable resources" even though they are a component of equity.

Capital Assets

Capital assets are recorded (net of accumulated depreciation, if applicable) in the government-wide financial statements. Capital assets are those with an initial individual cost of \$5,000 or more, with estimated useful lives of more than one year. Capital assets are not recorded in the governmental fund. Instead, capital acquisitions are reflected as expenditures in the governmental fund, and the related assets are reported in the government-wide financial statements. All purchased capital assets are valued at cost where historical records are available and at an estimated historical cost where no historical records exist. Donated capital assets are valued at their estimated acquisition cost on the date received.

The cost of normal maintenance and repairs that do not add to the value of the asset or materially extend asset lives are not capitalized. Depreciation is computed using the straight-line method over the following useful lives:

Land improvements	7-20 years
Equipment	4-10 years

Compensated Absences

The Agency employees are granted vacation and sick leave in varying amounts. In the event of termination, an employee is paid for certain portions of unused accumulated vacation and sick time. This amount, along with related payroll taxes has been recorded in the government-wide financial statements.

Net Pension Liability

The net pension liability is deemed to be a noncurrent liability and is recognized on the Agency's government-wide financial statements.

Unavailable Revenue

Governmental funds report unavailable revenues, when applicable, in connection with receivables for revenue that is not considered available to liquidate liabilities of the current period.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY**  
**NOTES TO FINANCIAL STATEMENTS**

**NOTE 1 - DESCRIPTION OF ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**  
**(continued)**

Deferred Outflows/Inflows of Resources

In addition to assets, the statement of net position will sometimes report a separate section for deferred outflows of resources. This separate financial statement element, *deferred outflows of resources*, represents a consumption of net position/fund balance that applies to a future period and so will not be recognized as an outflow of resources (expense/expenditure) until that time.

In addition to liabilities, the statement of net position and balance sheet will sometimes report a separate section for deferred inflows of resources. This separate financial statement element, *deferred inflows of resources*, represents an acquisition of net position/fund balance that applies to a future period and so will not be recognized as an inflow of resources (revenue) until that time.

The Agency will sometimes report deferred inflows of resources on the balance sheet in connection with long-term receivables that are not considered available to liquidate liabilities of the current period. The Agency also reports deferred outflows of resources and deferred inflows of resources on the statement of net position which correspond to the Agency's net pension liability and are related to differences in experience, differences in assumptions, differences between projected and actual pension plan investment earnings and contributions made subsequent to the measurement date. These amounts are deferred and recognized as an outflow of resources or an inflow of resources in the period to which they apply.

Fund Balance Classification Policies and Procedures

Fund balance classifications comprise a hierarchy based primarily on the extent to which a government is bound to observe constraints imposed upon the use of the resources reported in governmental funds. The following are the five fund balance classifications:

*Nonspendable* - assets that are not available in a spendable form such as inventory, prepaid expenditures, and long-term receivables not expected to be converted to cash in the near term. It also includes funds that are legally or contractually required to be maintained intact such as the corpus of a permanent fund or foundation.

*Restricted* - amounts that are required by external parties to be used for a specific purpose. Constraints are externally imposed by creditors, grantors, contributors or laws, regulations or enabling legislation.

*Committed* - amounts constrained on use imposed by formal action of the government's highest level of decision-making authority (i.e., Board, Council, etc.).

*Assigned* - amounts intended to be used for specific purposes. This is determined by the governing body, the budget or finance committee or a delegated municipality official.

*Unassigned* - all other resources; the remaining fund balance after nonspendable, restrictions, commitments, and assignments. This class only occurs in the General Fund, except for cases of negative fund balances. Negative fund balances are always reported as unassigned, no matter which fund the deficit occurs in.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 1 - DESCRIPTION OF ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES  
(continued)**

Fund Balance Classification Policies and Procedures (continued)

For committed fund balance, the Agency's highest level of decision-making authority is the Board of Public Health. The formal action that is required to be taken to establish a fund balance commitment is the adoption of a Board resolution.

For assigned fund balance, the Branch-Hillsdale-St. Joseph Community Health Agency has not approved a policy indicating who is authorized to assign amounts to a specific purpose, therefore the authority for assigning fund balance remains with the Agency's Board of Public Health.

For the classification of fund balances, the Branch-Hillsdale-St. Joseph Community Health Agency considers restricted amounts to have been spent when an expenditure is incurred for the purposes for which both restricted and unrestricted fund balance is available. Also, for the classification of fund balances, the Branch-Hillsdale-St. Joseph Community Health Agency considers committed, assigned, or unassigned amounts to have been spent when an expenditure is incurred for purposes for which amounts in any of those unrestricted fund balance classifications could be used.

Comparative Data

Comparative data for the prior year has not been presented in the accompanying financial statements since its inclusion would make the statements unduly complex and difficult to read.

**NOTE 2 - DEPOSITS**

As of September 30, 2021, the Agency had deposits subject to the following risks:

Custodial Credit Risk - Deposits

In the case of deposits, this is the risk that in the event of a bank failure, the Agency's deposits may not be returned to it. As of September 30, 2021, \$0 of the Agency's bank balance of \$90,428 was exposed to custodial credit risk because it was all covered by federal depository insurance. The Agency's carrying value on the books for deposits at the end of the year was \$52,148.

The cash balances reported in the basic financial statements include \$370 in imprest cash and \$4,817,446 in cash that is on deposit with the Branch County Treasurer. The cash on deposit with the Branch County Treasurer is part of the County pooled cash and investments. As a result, the insured and uninsured amounts related to these amounts cannot be determined.

Credit Risk

State law limits investments in certain types of investments to a prime or better rating issued by nationally recognized statistical rating organizations (NRSRO's). Obligations of the U.S. government or obligations explicitly guaranteed by the U.S. government are not considered to have credit risk and do not require disclosure of credit quality. As of September 30, 2021, the Agency did not have any investments that would be subject to rating.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 2 - DEPOSITS (continued)**

Interest Rate Risk

The Agency will minimize interest rate risk, which is the risk that the market value of securities in the portfolio will fall due to changes in market interest rates, by structuring the investment portfolio so that securities mature to meet cash requirements for ongoing operations, thereby avoiding the need to sell securities in the open market and investing operating funds primarily in shorter-term securities, liquid asset funds, money market mutual funds, or similar investment pools and limiting the average maturity in accordance with the Agency's cash requirements.

Concentration of Credit Risk

The Agency will minimize concentration of credit risk, which is the risk of loss attributed to the magnitude of the Agency's investment in a single issuer, by diversifying the investment portfolio so that the impact of potential losses from any one type of security or issuer will be minimized.

Foreign Currency Risk

The Agency is not authorized to invest in investments which have this type of risk.

**NOTE 3 - CAPITAL ASSETS**

The following provides a summary of the changes in capital assets for the year ended September 30, 2021:

	Balance Oct. 1, 2020	Additions	Disposals	Balance Sept. 30, 2021
Capital assets being depreciated				
Equipment	\$ 1,182,785	\$ 5,261	\$ (145,451)	\$ 1,042,595
Land improvements	22,723	213,232	-	235,955
<b>Total capital assets being depreciated</b>	<b>1,205,508</b>	<b>218,493</b>	<b>(145,451)</b>	<b>1,278,550</b>
Less accumulated depreciation for:				
Equipment	(1,047,484)	(21,171)	102,176	(966,479)
Land improvements	(22,723)	(3,110)	-	(25,833)
<b>Total accumulated depreciation</b>	<b>(1,070,207)</b>	<b>(24,281)</b>	<b>102,176</b>	<b>(992,312)</b>
<b>Capital assets, net</b>	<b>\$ 135,301</b>	<b>\$ 194,212</b>	<b>\$ (43,275)</b>	<b>\$ 286,238</b>

Depreciation expense appears on the statement of activities in these governmental functions: Personal Health \$12,240; Environmental Health \$3,385; Community Health \$744; Aging Services \$4,009; and Administration \$3,903.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 4 - LONG-TERM OBLIGATIONS**

The following is a summary of changes in long-term obligations (including current portion) of the Agency for the year ended September 30, 2021:

	Balance Oct. 1, 2020	Additions	Deletions	Balance Sept. 30, 2021	Amount Due within One Year
Compensated absences	\$ 449,539	\$ 183,004	\$ (186,903)	\$ 445,640	\$ 148,547

Employees of the Branch-Hillsdale-St. Joseph Community Health Agency are granted vacation and sick leave in varying amounts based on length of service. Upon termination of employment, employees are paid accumulated sick time at full current rate of pay up to a maximum of 260 hours and accumulated vacation at full current rate of pay up to a maximum of 420 hours.

Accumulated sick and vacation leave represents a liability to the Agency, which is presented in a current and long-term portion of the liability. For this reason, the total liability is reported in the government-wide financial statements and represents a current liability of \$148,547 and a long-term liability of \$297,093 at September 30, 2021. Payments to employees for sick and vacation leave are recorded as expenditures when they are used, and payments are actually made to the employees.

**NOTE 5 - RETIREMENT PLANS**

**Defined Benefit Pension Plan**

The Agency participates in the Municipal Employees' Retirement System (MERS) of Michigan. MERS is an agent multiple-employer, statewide public employee pension plan established by the Michigan's Legislature under Public Act 135 of 1945 and administered by a nine-member Retirement Board. MERS issues a publicly available financial report that includes financial statements and required supplementary information. This report may be obtained accessing MERS website at [www.mersofmich.com](http://www.mersofmich.com).

Summary of Significant Accounting Policies

For the purposes of measuring the net pension liability, deferred outflows of resources and deferred inflows of resources related to pensions, and pension expense, information about the fiduciary net position of the Municipal Employees' Retirement System of Michigan and additions to/deductions from MERS' fiduciary net position have been determined on the same basis as they are reported by MERS. For this purpose, benefit payments (including refunds of employee contributions) are recognized when due and payable in accordance with the benefit terms. Investments are reported at fair value.

Benefits Provided

The plan provides certain retirement, disability, and death benefits to plan members and beneficiaries. Public Act 427 of 1984, as amended, established and amends the benefit provisions of the participants in MERS. The MERS plan covers all eligible full-time general employees (closed to new hires after August 1, 2015) at the Agency.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 5 - RETIREMENT PLANS (continued)**

**Defined Benefit Pension Plan (continued)**

Benefits Provided (continued)

Retirement benefits for Agency employees are calculated at 2.00% of the employee's five-year final average compensation times the employee's years of service with no maximum. Normal retirement age is 60 with an unreduced benefit at age 55 with 25 years of service or a reduced benefit at age 50 with 25 years of service or age 55 with 15 years of service. Deferred retirement benefits vest after 6 years of credited service but are not paid until the date retirement would have occurred had the member remained an employee. Employees are eligible for non-duty disability benefits after 6 years of service and for duty related disability benefits upon hire. Disability benefits are determined in the same manner as retirement benefits but are payable immediately and if duty-related without an actuarial reduction for retirement before age 60 is not applied. An employee who leaves service may withdraw his or her contributions, plus any accrued interest.

Benefit terms, within the parameters established by MERS, are generally established and amended by authority of the Board of Health.

At the December 31, 2020, valuation date, the following employees were covered by the benefit terms:

Inactive employees or beneficiaries receiving benefits	69
Inactive employees entitled to but not yet receiving benefits	38
Active employees	<u>31</u>
	<u><u>138</u></u>

Contributions

The Agency is required to contribute amounts at least equal to the actuarially determined rate, as established by the MERS Retirement Board. The actuarially determined rate is the estimated amount necessary to finance the cost of benefits earned by employees during the year, with an additional amount to finance any unfunded accrued liability. The employer may establish contribution rates to be paid by its covered employees.

For the year ended September 30, 2021, the Agency's required contribution rate was 25% of annual payroll. Employees are required to contribute 3.00%.

Payable to the Pension Plan

At September 30, 2021, there were no amounts outstanding by the Agency for contributions to the pension plan required for the year ended September 30, 2021.

Net Pension Liability

The Agency's net pension liability was measured as of December 31, 2020, and the total pension liability used to calculate the net pension liability was determined by an annual actuarial valuation as of that date.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 5 - RETIREMENT PLANS (continued)**

**Defined Benefit Pension Plan (continued)**

Net Pension Liability (continued)

Changes in the net pension liability during the measurement year were as follows:

	Increase (Decrease)		
	Total Pension Liability (a)	Plan Fiduciary Net Position (b)	Net Pension Liability (a)-(b)
Changes in Net Pension Liability			
Balances at December 31, 2019	\$ 15,839,984	\$ 13,317,574	\$ 2,522,410
Changes for the year			
Service cost	184,846	-	184,846
Interest on total pension liability	1,174,321	-	1,174,321
Difference between expected and actual experience	423,704	-	423,704
Changes in assumptions	921,539	-	921,539
Employer contributions	-	1,264,662	(1,264,662)
Employee contributions	-	48,270	(48,270)
Net investment income	-	1,994,138	(1,994,138)
Benefit payments, including employee refunds	(961,641)	(961,641)	-
Administrative expense	-	(27,686)	27,686
Net changes	1,742,769	2,317,743	(574,974)
Balances at December 31, 2020	\$ 17,582,753	\$ 15,635,317	\$ 1,947,436

Pension Expenses and Deferred Outflows of Resources and Deferred Inflows of Resources Related to Pensions

For the year ended September 30, 2021, the Agency recognized pension expense of \$1,027,287. The Agency reported deferred outflows and inflows of resources related to pensions from the following sources:

	Deferred Outflows of Resources	Deferred Inflows of Resources
Differences in experience	\$ 211,852	\$ -
Differences in assumptions	460,769	-
Net difference between projected and actual earnings on pension plan investments	-	696,301
Contributions subsequent to the measurement date*	1,093,674	-
Total	\$ 1,766,295	\$ 696,301

\* The amount reported as deferred outflows of resources resulting from contributions subsequent to the measurement date will be recognized as a reduction in the net pension liability for the year ending September 30, 2022.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 5 - RETIREMENT PLANS (continued)**

**Defined Benefit Pension Plan (continued)**

Pension Expenses and Deferred Outflows of Resources and Deferred Inflows of Resources Related to Pensions (continued)

Amounts reported as deferred outflows and inflows of resources related to pensions will be recognized in pension expense as follows:

Year Ending September 30,	Pension Expense
2022	\$ 522,712
2023	(24,740)
2024	(327,711)
2025	(193,941)

Actuarial Assumptions

The total pension liability in the December 31, 2020, annual actuarial valuation was determined using the following actuarial assumptions, applied to all periods included in the measurement:

Inflation: 2.5%

Salary increases: 3.00% in the long-term plus a percentage based on age related scale to reflect merit, longevity, and promotional pay increases.

Investment rate of return: 7.60%, net of investment expenses, including inflation.

The valuation incorporates fully generational mortality. The base mortality tables used are constructed as noted and are based on amount weighted sex distinct rates. Pre-retirement mortality - 1. the Pub-2010 Juvenile Mortality Tables, 2. the Pub-2010 Employee Mortality Tables, and 3. the Pub-2010 Healthy Retiree Tables. Non-disabled retired plan members and beneficiaries - 1. 106% of the Pub-2010 Juvenile Mortality Tables, 2. 106% of the Pub-2010 Employee Mortality Tables, and 3. 106% of the Pub-2010 Healthy Retiree Tables. Disabled retired plan members - 1. The Pub-2010 Juvenile Mortality Tables, 2 - PubNS-2010 Disabled Retiree Tables.

The actuarial assumptions used in the valuation were based on the results of the 2014-2018 Five-Year Experience Study.

Changes in Assumptions

The actuarial assumptions were changed during the year as follows:

Increase in merit and longevity pay assumption.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 5 - RETIREMENT PLANS (continued)**

**Defined Benefit Pension Plan (continued)**

Discount Rate

The discount rate used to measure the total pension liability is 7.60%. The projection of cash flows used to determine the discount rate assumes that employer and employee contributions will be made at the rates agreed upon for employees and the actuarially determined rates for employers.

Projected Cash Flows

Based on these assumptions, the pension plan's fiduciary net position was projected to be available to pay all projected future benefit payments of current active and inactive employees. Therefore, the long-term expected rate of return on pension plan investments was applied to all periods of projected benefit payments to determine the total pension liability.

The long-term expected rate of return on pension plan investments was determined using a model method in which the best-estimate ranges of expected future real rates of return (expected returns, net of investment and administrative expenses and inflation) are developed for each major asset class. These ranges are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by the target asset allocation percentage and by adding expected inflation.

The target allocation and best estimates of arithmetic real rates of return for each major asset class are summarized in the following table:

<u>Asset Class</u>	<u>Target Allocation</u>	<u>Long-Term Expected Real Rate of Return</u>	<u>Expected Money Weighted Rate of Return</u>
Global Equity	60.00%	5.25%	3.15%
Global Fixed Income	20.00%	1.25%	0.25%
Private Investments	20.00%	7.25%	1.45%
	<u>100.00%</u>		
Inflation			2.50%
Administration expenses netted above			<u>0.25%</u>
Investment rate of return			<u>7.60%</u>

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 5 - RETIREMENT PLANS (continued)**

**Defined Benefit Pension Plan (continued)**

Sensitivity of the Net Pension Liability to Changes in the Discount Rate

The following presents the net pension liability of the Agency, calculated using the discount rates of 7.60%, as well as what the Agency's net pension liability would be using a discount rate that is 1% lower (6.60%) or 1% higher (8.60%) than the current rate.

	1% Decrease	Current Discount Rate	1% Increase
Net pension liability	\$ 3,939,237	\$ 1,947,436	\$ 266,447

**Defined Contribution Pension Plan**

As of August 1, 2015, the Agency established a defined contribution pension plan through the Michigan Municipal Employees' Retirement System. All employees hired after August 1, 2015, are covered under the defined contribution plan.

The plan is administered by the Michigan Municipal Employees' Retirement System. Contributions are determined, and may be amended, by an employment agreement requiring employer and employee contributions of 5% and 3% of covered payroll, respectively.

The Agency's contributions to the plan were \$60,148 for the year ended September 30, 2021. The Agency's employees contributed \$36,089 to the defined contribution plan for the year ended September 30, 2021.

**NOTE 6 - RISK MANAGEMENT**

The Agency carries commercial insurance for the risk of loss due to workers' compensation claims. Settled claims relating to workers' compensation and professional liability have not exceeded the amount of insurance coverage in any of the past three fiscal years.

The Agency also participates in a State pool, the Michigan Municipal Risk Management Authority, with other municipalities for property and casualty losses. The pool is organized under Public Act 138 of 1982, as amended. The Agency has no liability for additional assessments based on the claims filed against the pool nor do they have any rights to dividends. In the event the pool's claims and expenses for a policy year exceed the total normal annual premiums for said years, all members of the specific pool's policy year may be subject to special assessment to make up the deficiency. The Agency has not been informed of any special assessments being required.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 7 - DETAILS OF FUND BALANCE CLASSIFICATIONS**

For the classification of fund balances, the Agency considers restricted amounts to have been spent when an expenditure is incurred for the purposes for which both restricted and unrestricted fund balance is available. Also, for the classification of fund balances, the Agency considers committed, assigned, or unassigned amounts to have been spent when an expenditure is incurred for purposes for which amounts in any of those unrestricted fund balance classifications could be used.

As of September 30, 2021, the fund balance classifications were as follows:

Nonspendable	
Prepays	\$ 99,936
Assigned	
Vacation and sick leave	445,640
BCCF funds	309,956
Dental revenue	351,895
Aging services	21,409
Medicaid cost base reimbursement	1,362,489
Community stabilization	327,390
Collector fee	4,851
Unassigned	<u>436,172</u>
	<u><u>\$ 3,359,738</u></u>

**NOTE 8 - CONTINGENT LIABILITIES**

The Agency participates in a number of Federal and State assisted grant programs which are subject to compliance audits. The periodic program compliance audits of many of the programs have not yet been completed or final resolution has not been received. Accordingly, the Agency's compliance with applicable grant requirements will be established at some future date. The amount, if any, of expenditures which may be disallowed by the granting agencies cannot be determined at this time although the Agency expects such amounts, if any, to be immaterial.

Significant patient service revenue and account receivable balances for service fees were derived from reimbursements for providing medical services to Medicare and Medicaid recipients. Payments for these services are based upon allowable costs incurred and are subject to final audit by the intermediaries. Possible changes in the health care financing systems may have an effect on the Department's future revenues.

The Agency is a defendant in various lawsuits. Although the outcomes of these lawsuits are not presently determinable, it is the opinion of management and the Agency's counsel that resolution of these matters will not have a material adverse effect on the financial condition of the Agency.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO FINANCIAL STATEMENTS**

**NOTE 9 - UPCOMING ACCOUNTING PRONOUNCEMENTS**

In June 2017, the Governmental Accounting Standards Board issued GASB Statement No. 87, *Leases*. This statement will increase the usefulness of governments' financial statements by requiring recognition of certain lease assets and liabilities for leases that previously were classified as operating leases and recognized as inflows of resources or outflows of resources based on the payment provisions of the contract. It establishes a single model for lease accounting based on the foundational principle that leases are financings of the right to use an underlying asset. The Agency is currently evaluating the impact this standard will have on the financial statements when adopted during the 2021-2022 fiscal year.

In May 2020, the GASB issued Statement No. 96, *Subscription-based Information Technology Arrangements*. This Statement provides guidance on the accounting and financial reporting for subscription-based information technology arrangements (SBITAs) for government end users (governments). This Statement (1) defines a SBITA; (2) establishes that a SBITA results in a right-to-use subscription asset -an intangible asset and a corresponding subscription liability; (3) provides the capitalization criteria for outlays other than subscription payments, including implementation costs of a SBITA; and (4) requires note disclosures regarding a SBITA. To the extent relevant, the standards for SBITAs are based on the standards established in Statement No. 87, *Leases*, as amended. The Agency is currently evaluating the impact this standard will have on the financial statements when adopted during the 2022-2023 fiscal year.

**NOTE 10 - UNCERTAINTIES**

The extent of the impact of COVID-19 on the Agency's operational and financial performance will depend on certain developments, including the duration and spread of the outbreak, impact on services, employees, and vendors, all of which are uncertain and cannot be predicted. At this point, the extent to which COVID-19 may impact the financial condition and results of operations is uncertain.

**REQUIRED SUPPLEMENTARY INFORMATION**

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
GENERAL OPERATING FUND  
BUDGETARY COMPARISON SCHEDULE  
YEAR ENDED SEPTEMBER 30, 2021**

	Original Budget	Final Amended Budget	Actual	Variance with Final Budget Positive (Negative)
<b>REVENUES</b>				
Licenses and permits	\$ 297,020	\$ 302,240	\$ 332,018	\$ 29,778
Intergovernmental				
Federal/State	4,965,181	8,509,601	7,396,988	(1,112,613)
Local	61,504	93,870	64,117	(29,753)
County appropriations	748,202	749,071	753,310	4,239
Charges for services	647,911	485,492	473,353	(12,139)
Interest and rents	60,896	7,600	6,515	(1,085)
Other	85,800	135,652	70,812	(64,840)
<b>TOTAL REVENUES</b>	<b>6,866,514</b>	<b>10,283,526</b>	<b>9,097,113</b>	<b>(1,186,413)</b>
<b>EXPENDITURES</b>				
Current				
Salaries and wages	2,966,196	3,830,744	3,148,037	682,707
Fringe benefits	1,434,536	2,355,741	2,128,335	227,406
Supplies and materials	659,989	1,082,954	746,174	336,780
Contractual	996,546	1,889,788	1,521,281	368,507
Communications	61,770	88,952	69,915	19,037
Travel and training	144,875	153,707	97,828	55,879
Insurance	39,056	48,000	42,727	5,273
Repairs and maintenance	296,686	572,249	486,666	85,583
Building and equipment lease and rentals	192,355	120,001	112,855	7,146
Printing and advertising	3,410	69,365	56,790	12,575
Postage	19,795	41,965	33,093	8,872
Other	51,300	30,060	17,627	12,433
<b>TOTAL EXPENDITURES</b>	<b>6,866,514</b>	<b>10,283,526</b>	<b>8,461,328</b>	<b>1,822,198</b>
<b>NET CHANGE IN FUND BALANCE</b>	<b>-</b>	<b>-</b>	<b>635,785</b>	<b>635,785</b>
Fund balance, beginning of year	2,723,953	2,723,953	2,723,953	-
Fund balance, end of year	<u>\$ 2,723,953</u>	<u>\$ 2,723,953</u>	<u>\$ 3,359,738</u>	<u>\$ 635,785</u>

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY**  
**SCHEDULE OF CHANGES IN EMPLOYER'S NET PENSION LIABILITY AND RELATED RATIOS**  
**LAST SEVEN MEASUREMENT YEARS (ULTIMATELY TEN YEARS WILL BE DISPLAYED)**  
**(AMOUNTS WERE DETERMINED AS OF 12/31 OF EACH FISCAL YEAR)**

	2020	2019	2018	2017	2016	2015	2014
Total Pension Liability							
Service cost	\$ 184,846	\$ 162,697	\$ 188,936	\$ 194,225	\$ 221,881	\$ 260,139	\$ 257,464
Interest	1,174,321	1,161,744	1,155,642	1,122,384	1,096,375	1,008,656	929,021
Difference between expected and actual experience	423,704	24,243	(366,923)	(79,298)	(233,076)	80,642	-
Changes of assumptions	921,539	508,776	-	-	-	814,056	-
Benefit payments, including employee refunds	(961,641)	(915,864)	(860,670)	(777,188)	(715,313)	(616,270)	(590,701)
Other	-	-	1	-	1	(1)	29,031
Net Change in Total Pension Liability	1,742,769	941,596	116,986	460,123	369,868	1,547,222	624,815
Total Pension Liability, beginning	15,839,984	14,898,388	14,781,402	14,321,279	13,951,411	12,404,189	11,779,374
Total Pension Liability, ending	<u>\$ 17,582,753</u>	<u>\$ 15,839,984</u>	<u>\$ 14,898,388</u>	<u>\$ 14,781,402</u>	<u>\$ 14,321,279</u>	<u>\$ 13,951,411</u>	<u>\$ 12,404,189</u>
Plan Fiduciary Net Position							
Contributions - employer	\$ 1,264,662	\$ 637,262	\$ 304,525	\$ 266,448	\$ 226,464	\$ 219,053	\$ 181,018
Contributions - employee	48,270	47,927	50,404	55,364	64,400	85,602	71,723
Net investment income (loss)	1,994,138	1,615,364	(497,015)	1,559,362	1,251,034	(173,001)	708,740
Benefit payments, including employee refunds	(961,641)	(915,864)	(860,670)	(777,188)	(715,313)	(616,270)	(590,701)
Administrative expense	(27,686)	(27,776)	(24,912)	(24,713)	(24,706)	(25,331)	(25,997)
Net Change in Plan Fiduciary Net Position	2,317,743	1,356,913	(1,027,668)	1,079,273	801,879	(509,947)	344,783
Plan Fiduciary Net Position, beginning	13,317,574	11,960,661	12,988,329	11,909,056	11,107,177	11,617,124	11,272,341
Plan Fiduciary Net Position, ending	<u>\$ 15,635,317</u>	<u>\$ 13,317,574</u>	<u>\$ 11,960,661</u>	<u>\$ 12,988,329</u>	<u>\$ 11,909,056</u>	<u>\$ 11,107,177</u>	<u>\$ 11,617,124</u>
Agency Net Pension Liability	<u>\$ 1,947,436</u>	<u>\$ 2,522,410</u>	<u>\$ 2,937,727</u>	<u>\$ 1,793,073</u>	<u>\$ 2,412,223</u>	<u>\$ 2,844,234</u>	<u>\$ 787,065</u>
Plan Fiduciary Net Position as a percentage of the Total Pension Liability	89%	84%	80%	88%	83%	80%	94%
Covered payroll	\$ 1,590,755	\$ 1,439,800	\$ 1,673,482	\$ 1,727,981	\$ 1,974,029	\$ 2,408,692	\$ 2,383,929
Agency's Net Pension Liability as a percentage of covered payroll	122%	175%	176%	104%	122%	118%	33%

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
SCHEDULE OF EMPLOYER CONTRIBUTIONS  
LAST SEVEN FISCAL YEARS (ULTIMATELY TEN YEARS WILL BE DISPLAYED)  
(AMOUNTS WERE DETERMINED AS OF 9/30 OF EACH FISCAL YEAR)**

	<u>2021</u>	<u>2020</u>	<u>2019</u>	<u>2018</u>	<u>2017</u>	<u>2016</u>	<u>2015</u>
Actuarially determined contributions	\$ 397,479	\$ 325,829	\$ 306,612	\$ 295,032	\$ 256,452	\$ 221,994	\$ 209,441
Contributions in relation to the actuarially determined contribution	<u>1,180,620</u>	<u>1,259,227</u>	<u>631,891</u>	<u>295,032</u>	<u>256,452</u>	<u>221,994</u>	<u>209,441</u>
Contribution deficiency (excess)	<u>\$ (783,141)</u>	<u>\$ (933,398)</u>	<u>\$ (325,279)</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>
Covered payroll	\$ 1,573,681	\$ 1,559,148	\$ 1,634,619	\$ 1,688,177	\$ 1,918,244	\$ 2,204,494	\$ 2,413,420
Contributions as a percentage of covered payroll	75%	81%	39%	17%	13%	10%	9%

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTE TO REQUIRED SUPPLEMENTARY INFORMATION  
YEAR ENDED SEPTEMBER 30, 2021**

**NOTE 1 - EMPLOYEE RETIREMENT PLAN**

Changes of benefits terms: There were no changes of benefit terms during plan year 2020.

Changes in assumptions: Increases in merit and longevity pay assumptions.

## **OTHER SUPPLEMENTARY INFORMATION**

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY**  
**SUPPLEMENTAL SCHEDULE: FUNDED SERVICE CATEGORIES BY SOURCE <sup>(a)</sup>**  
**AGING AND ADULT SERVICES AGENCY**  
**YEAR ENDED SEPTEMBER 30, 2021**

	<u>Title III-B</u>	<u>Title III-C1</u>	<u>Title III-C2</u>	<u>Title III-D</u>
EXPENDITURES				
Personal care	\$ 20,988	\$ -	\$ -	\$ -
Homemaker	20,987	-	-	-
Chore services	4,171	-	-	-
Home delivered meals	5,425	-	107,797	-
Adult day care	-	-	-	-
Care management	10,041	-	-	-
Respite care	-	-	-	-
Case coordination and support	-	-	-	-
Congregate meals	-	94,951	-	-
Transportation	40,200	-	-	-
Legal assistance	10,000	-	-	-
Caregiver Support Group	-	-	-	-
Caregiver Training	-	-	-	-
Assistive devices and technologies	-	-	-	-
Information and assistance	10,880	-	-	-
Home repair	870	-	-	-
Disease prevention and health promotion	-	-	-	8,821
Program development	2,932	-	-	-
Ombudsman	2,000	-	-	-
Medication management	-	-	-	-
Administration	-	-	-	-
Community living support services - RSD	5	-	-	-
Gap Filing/Special Needs (RSD)	3,368	-	-	-
Other	6,460	-	-	-
	<u>6,460</u>	<u>-</u>	<u>-</u>	<u>-</u>
TOTAL EXPENDITURES	<u>\$ 138,327</u>	<u>\$ 94,951</u>	<u>\$ 107,797</u>	<u>\$ 8,821</u>

(a) This schedule only includes Aging Services programs.

<u>Title III-E</u>	<u>Title III Administration</u>	<u>NSIP</u>	<u>Targeted Care Management</u>	<u>State Access</u>	<u>State In-Home</u>	<u>State Congregate Meals</u>
\$ -	\$ -	\$ -	\$ -	\$ -	\$ 57,787	\$ -
-	-	-	-	-	57,787	-
-	-	-	-	-	-	-
-	-	93,894	-	-	-	-
-	-	-	-	-	-	-
18,097	-	-	-	-	-	-
4,897	-	-	-	-	9,799	-
9,000	-	-	-	7,989	-	-
-	-	28,681	-	-	-	2,676
13,977	-	-	-	-	-	-
-	-	-	-	-	-	-
3,933	-	-	-	-	-	-
3,933	-	-	-	-	-	-
-	-	-	-	-	9,903	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	7,153	-
-	46,594	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	38,168	-	-	-
<u>\$ 53,837</u>	<u>\$ 46,594</u>	<u>\$ 122,575</u>	<u>\$ 38,168</u>	<u>\$ 7,989</u>	<u>\$ 142,429</u>	<u>\$ 2,676</u>

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY**  
**SUPPLEMENTAL SCHEDULE: FUNDED SERVICE CATEGORIES BY SOURCE (continued)**  
**AGING AND ADULT SERVICES AGENCY**  
**YEAR ENDED SEPTEMBER 30, 2021**

	State Home Delivered Meals	State Alternative Care	Merit Award Trust Fund Respite	State Respite Care
EXPENDITURES				
Personal care	\$ -	\$ 15,700	\$ -	\$ -
Homemaker	-	15,700	-	-
Chore services	-	-	-	-
Home delivered meals	133,495	-	-	-
Adult day care	-	-	8,856	8,557
Care management	-	-	-	-
Respite care	-	-	7,967	29,153
Case coordination and support	-	-	-	-
Congregate meals	-	-	-	-
Transportation	-	-	16,589	-
Legal assistance	-	-	-	-
Caregiver Support Group	-	-	-	-
Caregiver Training	-	-	-	-
Assistive devices and technologies	-	-	-	-
Information and assistance	-	-	-	-
Home repair	-	-	-	-
Disease prevention and health promotion	-	-	-	-
Program development	-	-	-	-
Ombudsman	-	-	-	-
Medication management	-	-	-	-
Administration	-	-	-	-
Community living support services - RSD	-	-	-	-
Gap Filing/Special Needs (RSD)	-	-	-	-
Other	-	-	-	-
	<u>          </u>	<u>          </u>	<u>          </u>	<u>          </u>
TOTAL EXPENDITURES	<u>\$ 133,495</u>	<u>\$ 31,400</u>	<u>\$ 33,412</u>	<u>\$ 37,710</u>

State CG Support	Merit Award Fund Administration	State Care Management	State Administration	State Caregiver Support Administration	State Aging New Services	Program Income
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 19,955
-	-	-	-	-	-	19,955
-	-	-	-	-	-	1,889
-	-	-	-	-	-	68,976
-	-	-	-	-	-	3,452
-	-	73,348	-	-	12,458	-
4,123	-	-	-	-	-	4,049
-	-	-	-	-	-	-
-	-	-	-	-	-	80,424
-	-	-	-	-	-	18,019
-	-	-	-	-	-	70
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	817
-	-	-	-	-	-	115
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	3,304	-	8,019	407	-	-
-	-	6,880	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
<u>\$ 4,123</u>	<u>\$ 3,304</u>	<u>\$ 80,228</u>	<u>\$ 8,019</u>	<u>\$ 407</u>	<u>\$ 12,458</u>	<u>\$ 217,721</u>

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY**  
**SUPPLEMENTAL SCHEDULE: FUNDED SERVICE CATEGORIES BY SOURCE (continued)**  
**AGING AND ADULT SERVICES AGENCY**  
**YEAR ENDED SEPTEMBER 30, 2021**

	Cash Match	In-kind Match	Total
<b>EXPENDITURES</b>			
Personal care	\$ 10,056	\$ 750	\$ 125,236
Homemaker	10,056	750	125,235
Chore services	302	300	6,662
Home delivered meals	23,758	19,640	452,985
Adult day care	2,264	-	23,129
Care management	12,700	7,500	134,144
Respite care	5,513	1,100	66,601
Case coordination and support	2,208	-	19,197
Congregate meals	10,019	1,300	218,051
Transportation	147,491	-	236,276
Legal assistance	1,494	-	11,564
Caregiver Support Group	511	-	4,444
Caregiver Training	511	-	4,444
Assistive devices and technologies	500	1,000	11,403
Information and assistance	1,500	-	12,380
Home repair	113	-	1,800
Disease prevention and health promotion	1,147	-	10,083
Program development	-	-	2,932
Ombudsman	38,013	-	40,013
Medication management	-	1,000	8,153
Administration	-	-	58,324
Community living support services - RSD	700	-	7,585
Gap Filing/Special Needs (RSD)	130	800	4,298
Other	512	800	45,940
<b>TOTAL EXPENDITURES</b>	<b>\$ 269,498</b>	<b>\$ 34,940</b>	<b>\$ 1,630,879</b>

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY**  
**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**  
**YEAR ENDED SEPTEMBER 30, 2021**

Federal Grantor/Pass Through Grantor/Program Title	Assistance Listing Number	Pass-Through Grantor Number	Expenditures
<b>U.S. DEPARTMENT OF AGRICULTURE</b>			
Passed through Michigan Department of Health and Human Services Special Supplemental Nutrition Program for Women, Infants, and Children	10.557 <sup>(a)</sup>		
FY 20-21 Resident Services		212MI003W1003	\$ 757,761
FY 20-21 Breastfeeding		212MI003W1003	19,349
FY 20-21 Breastfeeding		202MI013W5003	<u>65,058</u>
TOTAL U.S. DEPARTMENT OF AGRICULTURE			<u>842,168</u>
<b>U.S. DEPARTMENT OF JUSTICE</b>			
Passed through Michigan Department of Health and Human Services Crime Victim Assistance	16.575		
FY 20-21 VOCA		E20211465-001	<u>130,251</u>
<b>U.S. DEPARTMENT OF TREASURY</b>			
Passed through Michigan Department of Treasury COVID-19 Coronavirus Relief Fund	21.019		
Public Safety Public Health Payroll Reimbursement		PSPHPR 09-20	19,091
Passed through Michigan Aging and Adult Services Agency COVID-19 Coronavirus Relief Fund	21.019		
Personal Care/Essential Care boxes		SLT0040	2,818
Passed through Michigan Department of Health and Human Services COVID-19 Coronavirus Relief Fund	21.019		
Immunizations COVID Response		SLT0040	30,587
Local Health Department Contact Tracing		SLT0040	285,352
Local Health Department Testing		SLT0040	<u>150,007</u>
TOTAL U.S. DEPARTMENT OF TREASURY			<u>487,855</u>
<b>ENVIRONMENTAL PROTECTION AGENCY</b>			
Passed through Michigan Department of Environment, Great Lakes, and Energy Drinking Water State Revolving Fund Cluster			
Capitalization Grants for Drinking Water State Revolving Funds	66.468 <sup>(d)</sup>		
FY 20-21 Standard/Operator Assistance		FS975487-19	3,458
FY 20-21 Local Assistance		FS975487-19	300
FY 20-21 Public Water Supply Supervision		FS975487-19	<u>5,179</u>
TOTAL ENVIRONMENTAL PROTECTION AGENCY			<u>8,937</u>
<b>U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>			
Direct award			
Rural Health Outreach and Rural Network Development Program			
Rural Communities Opioid Response	93.912		
FY 20-21		G2540027	<u>111,647</u>
Passed through Michigan Aging and Adult Services Agency Title III-D Special Programs for the Aging (Disease Prevention and Health Promotion Services)	93.043		
FY 20-21		N/A	<u>8,821</u>
Aging Cluster			
Title III-B Special Programs for the Aging (Grants for Supportive Services and Senior Centers)	93.044 <sup>(b)</sup>		
FY 20-21 Administration		N/A	13,303
FY 20-21 Regular		N/A	<u>138,327</u>
			<u>151,630</u>

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS (continued)  
YEAR ENDED SEPTEMBER 30, 2021**

Federal Grantor/Pass Through Grantor/Program Title	Assistance Listing Number	Pass-Through Grantor Number	Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (continued)			
Passed through Michigan Aging and Adult Services Agency (continued)			
Aging Cluster (continued)			
Title III-C Special Programs for the Aging			
(Nutrition Services)			
	93.045 <sup>(b)</sup>		
FY 20-21 Administration		N/A	\$ 26,964
FY 20-21 Nutrition Congregate		N/A	94,951
FY 20-21 Nutrition Home Delivered Meals		N/A	107,797
FY 20-21 Supplemental Nutrition		N/A	<u>12,795</u>
			242,507
Nutrition Services Incentive Program			
FY 20-21 Nutrition Services Incentive Program	93.053 <sup>(b)</sup>	N/A	<u>122,575</u>
Total Aging Cluster			<u>516,712</u>
National Family Caregiver Support			
FY 20-21 Administration	93.052	N/A	6,327
FY 20-21 Regular		N/A	<u>53,837</u>
			<u>60,164</u>
Immunization Grants			
COVID-19 Immunization Support	93.268	NH23IP922635	<u>23,480</u>
Passed through Michigan Department of Health and Human Services			
Immunization Grants			
FY 20-21 Vaccine Supply	93.268	NH23IP922635	200,276
COVID-19 FY 20-21 Immunizations		NH23IP922635	118,016
FY 20-21 Immunization Fixed Fees		NH23IP922635	1,150
FY 20-21 IAP		NH23IP922635	<u>71,789</u>
			<u>391,231</u>
			<u>414,711</u>
Passed through Michigan Aging and Adult Services Agency			
Medical Assistance Program			
FY 20-21 Aging	93.778 <sup>(c)</sup>	N/A	<u>38,168</u>
Passed through Michigan Department of Health and Human Services			
Medical Assistance Program			
FY 20-21 Medicaid Outreach	93.778 <sup>(c)</sup>	2105MI5ADM	5,791
FY 20-21 CSHCS Medicaid Outreach		2005MI5ADM	7,734
FY 20-21 CSHCS Care Coordination <sup>(e)</sup>		2105MI5ADM	11,217
FY 20-21 CSHCS Medicaid Elevated Blood Lead Case Management		2105MI5MAP	2,325
FY 20-21 CSHCS Medicaid Elevated Blood Lead Case Management		2205MI5MAP	517
FY 20-21 CSHCS Outreach and Advocacy <sup>(e)</sup>		2105MI5ADM	<u>58,364</u>
			<u>85,948</u>
Total Medicaid Cluster			<u>124,116</u>
Public Health Emergency Preparedness			
FY 20-21	93.069	NU90TP922062	97,059
FY 20-21		NU90TP922062	<u>32,634</u>
			<u>129,693</u>

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY**  
**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS (continued)**  
**YEAR ENDED SEPTEMBER 30, 2021**

Federal Grantor/Pass Through Grantor/Program Title	Assistance Listing Number	Pass-Through Grantor Number	Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (continued)			
Passed through Michigan Department of Health and Human Services (continued)			
Tuberculosis Control Program	93.116		
FY 20-21 Tuberculosis Control		NU52PS910173	\$ 67
FY 20-21 Tuberculosis Control		NU52PS910173	226
			<u>293</u>
COVID-19 Epidemiology and Laboratory Capacity for Infectious Diseases	93.323		
COVID-19 Contact Tracing Testing Coordination		NU50CK000510	592,418
COVID-19 Infection Prevention		NU50CK000510	76,001
			<u>668,419</u>
COVID-19 Public Health Crisis Response - Coronavirus	93.354		
FY 20-21 PHEP COVID-19 Response		NU90TP922074	<u>191,272</u>
Maternal and Child Health Services Block Grant	93.994		
FY 20-21 CSHCS Care Coordination		B0440141	42,034
FY 20-21 MCH - All Other		B0440141	34,594
FY 20-21 MCH - Children		B0440141	28,789
			<u>105,417</u>
Preventative Health Services	93.991		
Local Health Department (LHD) Sharing Support		NB010T009324	<u>36,901</u>
Passed through Michigan Department of Health and Human Services and MMAP, Inc.			
Special Programs for the Aging - Title IV and Title II Discretionary Projects	93.048	90MPPG0039	<u>2,904</u>
State Health Insurance Assistance Program	93.324	90SAPG0090	<u>18,000</u>
Community Health Access and Rural Transformation (CHART) Model	93.624	1J1CMS331626	<u>6,323</u>
TOTAL U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES			<u>2,395,393</u>
TOTAL FEDERAL AWARD EXPENDITURES			<u>\$ 3,864,604</u>

(f)

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS  
YEAR ENDED SEPTEMBER 30, 2021**

**NOTE 1 - BASIS OF PRESENTATION**

The accompanying Schedule of Expenditures of Federal Awards (the "Schedule" includes the federal grant activity of the Branch-Hillsdale-St. Joseph Community Health Agency (the Agency) under programs of the federal government for the year ended September 30, 2021. The information in this schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the Agency, it is not intended to and does not present the financial position or changes in net position of the Branch-Hillsdale-St. Joseph Community Health Agency.

**NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Expenditures reported on the Schedule are reported on the modified accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Negative amounts (if any) shown on the Schedule represent adjustments or credits made in the normal course of business to amounts reported as expenditures in prior years. Pass-through entity identifying numbers are presented where available. The Agency has elected to not use the 10-percent de minimis indirect cost rate allowed under the Uniform Guidance.

**NOTE 3 - SUBRECIPIENTS**

No Federal Awards were passed through by the Agency to any subrecipients during the year.

**NOTE 4 - SUMMARY OF SIGNIFICANT EXPLANATIONS OF SCHEDULE**

The following descriptions identified below as (a) - (f) represent explanations that cross reference to amounts on the Schedule of Expenditures of Federal Awards:

- (a) Denotes programs tested as "major programs".
- (b) Denotes programs required to be clustered by United States Department of Health and Human Services.
- (c) Denotes programs required to be clustered by United States Department of Health and Human Services.
- (d) Denotes programs required to be clustered by United States Environmental Protection Agency.
- (e) Reimbursements of this contract are passed through the State. The amount reported on the Schedule of Expenditures of Federal Awards represents the portion of the grant that is considered federal. Federal participation in this program is 50%.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS  
YEAR ENDED SEPTEMBER 30, 2021**

**NOTE 4 - SUMMARY OF SIGNIFICANT EXPLANATIONS OF SCHEDULE (continued)**

(f) The following reconciles the federal revenues reported in the September 30, 2021, financial statements to the expenditures of the Agency administered federal programs reported on the Schedule of Expenditures of Federal Awards (SEFA):

Federal/State Revenue (per fund financial statements)	\$ 7,396,988
Less: Difference between vaccines administered (revenue per financial statements) and vaccines received (expenditures per SEFA and instructions from grantor agency)	(26,429)
Less: Portions of grant funding considered "State" funding	<u>(3,505,955)</u>
Federal award expenditures	<u><u>\$ 3,864,604</u></u>



2425 E. Grand River Ave.,  
Suite 1, Lansing, MI 48912

☎ 517.323.7500

📠 517.323.6346

**INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND  
ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS  
PERFORMED IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS***

Board of Public Health  
Branch-Hillsdale-St. Joseph Community Health Agency  
Coldwater, Michigan

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the governmental activities and the major fund of the Branch-Hillsdale-St. Joseph Community Health Agency (the Agency), as of and for the year ended September 30, 2021, and the related notes to the financial statements, which collectively comprise the Agency's basic financial statements and have issued our report thereon dated March 11, 2022.

**Internal Control Over Financial Reporting**

In planning and performing our audit of the financial statements, we considered the Agency's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Agency's internal control. Accordingly, we do not express an opinion on the effectiveness of the Agency's internal control.

*A deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. *A material weakness* is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented or detected and corrected on a timely basis. *A significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given the limitations, during the audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

## **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether the Agency's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

## **Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

*Maney Costeiran PC*

March 11, 2022



2425 E. Grand River Ave.,  
Suite 1, Lansing, MI 48912

☎ 517.323.7500

🖨 517.323.6346

## **INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE**

Board of Public Health  
Branch-Hillsdale-St. Joseph Community Health Agency  
Coldwater, Michigan

### **Report on Compliance for Each Major Federal Program**

We have audited the Branch-Hillsdale-St. Joseph Community Health Agency's (the Agency) compliance with the types of compliance requirements described in the OMB *Compliance Supplement* that could have a direct and material effect on the Agency's major federal programs for the year ended September 30, 2021. The Agency's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

#### ***Management's Responsibility***

Management is responsible for compliance with the requirements of laws, regulations, contracts, and grants applicable to its federal programs.

#### ***Auditor's Responsibility***

Our responsibility is to express an opinion on compliance for each of the Agency's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administration Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the Agency's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of the Agency's compliance.

### ***Opinion on Each Major Federal Program***

In our opinion, the Branch-Hillsdale-St. Joseph Community Health Agency complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended September 30, 2021.

### **Report on Internal Control Over Compliance**

Management of the Agency is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered the Agency's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the Agency's internal control over compliance.

*A deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. *A material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

*Manes Costeiran PC*

March 11, 2022

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
SCHEDULE OF FINDINGS AND QUESTIONED COSTS  
YEAR ENDED SEPTEMBER 30, 2021**

**Section I - Summary of Auditor's Results**

---

**Financial Statements**

Type of auditor's report issued based on financial statements prepared in accordance with generally accepted accounting principles:

*Unmodified*

Internal control over financial reporting:

- Material weakness(es) identified?  Yes  No
- Significant deficiency(ies) identified?  Yes  None reported

Noncompliance material to financial statements noted?

Yes  No

**Federal Awards**

Internal control over major programs:

- Material weakness(es) identified?  Yes  No
- Significant deficiency(ies) identified?  Yes  None reported

Type of auditor's report issued on compliance for major programs:

*Unmodified*

Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?

Yes  No

Identification of major programs:

Assistance Listing Number(s)	Name of Federal Program or Cluster
10.557	Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

Dollar threshold used to distinguish between Type A and Type B programs:

\$ 750,000

Auditee qualified as low-risk auditee?

Yes  No

**Section II - Financial Statement Findings**

---

None noted.

**Section III - Federal Award Findings and Questioned Costs**

---

None noted.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
SUMMARY SCHEDULE OF PRIOR YEAR AUDIT FINDINGS  
YEAR ENDED SEPTEMBER 30, 2021**

FINDINGS/COMPLIANCE

Control Deficiencies and Material Weaknesses Related to Internal Controls Over the Financial Statements.

No prior audit findings noted.

Findings Related to Compliance with Requirements Applicable to the Financial Statements.

No prior audit findings noted.

Findings Related to Compliance with Requirements Applicable to Federal Awards and Internal Control Over Compliance in Accordance with the Uniform Guidance.

No prior audit findings noted.

---

## RU 024 MERS Pension Accrued Underfunded Liability

The MERS Defined Benefit (DB) program for employees of the Branch-Hillsdale-St. Joseph Community Health Agency was opened on July 1, 1958. The plan was closed to new hires at the end of July 2015. All new hires are offered a Defined Contribution plan.

Upon reviewing the funding percentages of the DB plan, going back through 2005, the DB plan was fully funded until 2013. In 2013 the plan dipped below 100% funded. It is important to note that the Agency has always made 100% of the required annual contributions; however, changes in actuarial assumptions and the difference between expected and actual experience in the markets have caused the plan to become underfunded.

MERS routinely does experience studies, to inform necessary changes to the actuarial assumptions, to ensure that the plan is funded appropriately. Below is a brief history of the recent assumption and policy changes, which were made to ensure the plan is funded appropriately in future years.

### Overview of Assumption and Policy Changes

- 2012 Economic assumption update (adopted temporary wage inflation assumption)
- 2012 Funding policy update (new minimum funding requirements for poorly funded, closed divisions)
- 2015 Demographic assumption updates (mortality)
- 2015 Economic assumption updates (rate of investment return assumption lowered from 8% to 7.75%)
- 2015 Funding policy updates (adoption of 5-year asset smoothing and fixed amortization period)
- 2019 Economic assumption updates (rate of investment return assumption lowered from 7.75% to 7.35% and wage inflation assumption of 3%)
- 2020 Demographic assumption updates (mortality, and retirement, withdrawal and disability rates)

The amortization period, to return the plan to fully funded, was set in 2015 when the DB plan closed to new hires. This plan put the agency on a course to have the DB plan returned to fully funded by the end of 2035.

The Annual Actuarial Valuation Reports from 2018 estimated the computed annual employer contribution for the remainder of the amortization period to climb from \$332,328 to over \$600,000 per year by the end of the amortization period. The Agency's operating budget had remained fairly stagnant, and was projected to remain at an average of approximately \$6,000,000 for the coming years. If that had held true, employer contributions to the plan were projected to reach 10% of the Agency's operating budget.

In 2019 the Board of Health approved sending additional, unrequired contributions, to MERS. These additional contributions will accelerate the timeline for the return to 100% funded. By accelerating the timeframe, the Agency should alleviate some of the budget constraints for mandatory contributions in future years, as the plan will be fully funded sooner and those contributions will grow over time.

## Medicaid Cost Based Reimbursement Funds

Medicaid Cost Based Reimbursement is a program administered by the Michigan Department of Health and Human Services. As part of this program, the Agency is to reimburse for the full cost of providing Medicaid services as determined by information provided on the Michigan Medicaid Cost Report for Local Public Health Departments (LHDs). The reimbursement is offset by the amounts the LHD receives from Medicaid Fee-for-Service and Medicaid Health Plan payments, other commercial third-party insurers, and quarterly payments, initial and final settlements provided. Reporting for this cost settlement follows Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards (2 CFR 200 Subpart E). MDHHS will reimburse those covered services provided by LHD, other than dental services, which include preventive, diagnostic, therapeutic, rehabilitative or palliative services that are furnished by a public facility that is not part of a hospital but is organized and operated to provide medical care to outpatients.

The Agency had not applied for Medicaid Cost Based Reimbursement payments in a number of years. In 2018 the Agency began submitting for reimbursements beginning with FY16/17. In 2019 the early settlements were finalized by the MDHHS and the Agency began receiving Medicaid Cost Based Reimbursement payments. A listing of payments received can be found in Appendix A.

Medicaid Cost Based Reimbursement payments are usually paid out quarterly, based on the prior year settlement, and adjusted at year end. The Agency had not applied for this funding in recent years and had received no quarterly payments; therefore, the Agency received lump sum payments for prior fiscal years in 2019.

Quarterly Medicaid Cost Based Reimbursement payments can only be used to support the programs in which the funding was earned. Lump sum payments, received to reimburse the Agency for general fund money that was used to support Medicaid Cost Based Reimbursement programs in prior years can be utilized however the Agency would like. The Agency communicated with the MDHHS, to ensure this information was accurate prior to spending these funds. This is evidenced by an email located in Appendix B.

## Payments to RU 024 MERS Pension Accrued Underfunded Liability

Over the last three years, the Agency has focused on sending allowable, unspent funds toward the accrued underfunded liability of the MERS DB pension plan, to accelerate the timeline back to a fully funded plan. The Agency has used three primary funding sources for these funds, unused local appropriations, funding that was forfeited through the MERS Defined Contribution plan, and prior-year Medicaid Cost Based Reimbursement settlements. A listing of all additional, non-required payments can be found in Appendix C, followed by the financial statements for the program over the last few years.

Regular payments to the Defined Benefit Plan are based on the most recent Annual Actuarial Valuation Report and include both current liability and past liability, as set forth for the amortization of the underfunded portion of the plan. These payments are not recorded in RU 024, as RU 024 was created to track only non-required contributions. All required contributions are tracked in the program budgets and recorded under the general ledger code for retirement expense as a portion of the fringe benefits budget block. A listing of all payments made to MERS is located in Appendix D.

# RU 024 MERS Pension Accrued Underfunded Liability

## Appendix A

Payment List

<https://milogintp.michigan.gov/cld-chpprd/fs/CNSIControlServlet>

Payment List

Payment ID	Version	Facility ID	Facility Name	NPI	Payment Type	Payment Amount	Payment Date	Start Date	End Date	Status	Gross Adjustment ID	Remark
ITLD99480930201801	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$0.00	07/05/2018	07/01/2018	07/10/2018	Paid	75447932	
ADLD99480930201801	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Gross Adjustment Payment	\$0.00	07/12/2018	07/01/2018	07/10/2018	Paid	75448326	
ADLD99480930201801	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Gross Adjustment Payment	\$0.00	07/05/2018	07/01/2018	07/10/2018	Paid	75447698	
ITLD99480930201901	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$0.00	10/11/2018	10/01/2018	10/10/2018	Paid	75472362	
ITLD99480930201902	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$0.00	01/03/2019	01/01/2019	01/10/2019	Paid	75484381	
ITLD99480930201903	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$0.00	04/04/2019	04/01/2019	04/10/2019	Paid	75495497	
INLD99480930201700	1	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Initial	\$587,588.00	06/20/2019	10/01/2016	09/30/2017	Paid	75508973	
ITLD99480930201904	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$587,588.00	07/18/2019	07/01/2019	07/10/2019	Paid	75513692	
ITLD99480930202001	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$146,897.00	10/04/2019	10/01/2019	10/10/2019	Paid	75524420	
INLD99480930201800	1	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Initial	\$627,459.00	12/26/2019	10/01/2017	09/30/2018	Paid	75532384	
ITLD99480930202002	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$160,187.00	01/09/2020	01/01/2020	01/10/2020	Paid	75535317	
FNLD99480930201700	1	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Final	-\$97.00	03/26/2020	10/01/2016	09/30/2017	Paid	75543895	
ITLD99480930202003	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$160,187.00	04/02/2020	04/01/2020	04/10/2020	Paid	75545107	
FNLD99480930201800	1	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Final	-\$1,203.00	06/11/2020	10/01/2017	09/30/2018	Paid	75555395	
ITLD99480930202004	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$158,976.00	07/02/2020	07/01/2020	07/10/2020	Paid	75557980	
INLD99480930201900	1	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Initial	\$144,202.00	09/03/2020	10/01/2018	09/30/2019	Paid	75565614	
ITLD99480930202101	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$182,946.00	10/01/2020	10/01/2020	10/10/2020	Paid	75569193	
ITLD99480930202102	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$182,946.00	01/07/2021	01/01/2021	01/10/2021	Paid	75577835	
ITLD99480930202103	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$182,946.00	04/01/2021	04/01/2021	04/10/2021	Paid	75590328	
ITLD99480930202104	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$182,946.00	07/01/2021	07/01/2021	07/10/2021	Paid	75600822	
INLD99480930202000	1	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Initial	-\$153,347.00	07/15/2021	10/01/2019	09/30/2020	Paid	75601130	
FNLD99480930201900	1	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Final	-\$1,229.00	09/02/2021	10/01/2018	09/30/2019	Paid	75607570	
ITLD99480930202201	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$182,946.00	10/07/2021	10/01/2021	10/10/2021	Paid	75611390	
ITLD99480930202202	0	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Interim	\$182,946.00	01/13/2022	01/01/2022	01/10/2022	Paid	75620225	
FNLD99480930202000	1	LD9948	BRANCH-HILL-ST JOS COMM HLTH AGENCY	1275605594	Final	\$488.00	01/13/2022	10/01/2019	09/30/2020	Paid	75620153	

# RU 024 MERS Pension Accrued Underfunded Liability

## Appendix B

Zimbra

fishert@bhsj.org

---

**RE: Medicaid Cost Based Reimbursement Money**

---

**From :** Utter, Stephen (DHHS) <UtterS@michigan.gov>

Wed, Aug 21, 2019 10:27 AM

**Subject :** RE: Medicaid Cost Based Reimbursement Money

✉ Important to Keep 🚩

**To :** Theresa Fisher <fishert@bhsj.org>

📎 1 attachment

Hello Theresa,

When it comes to MCBR, you should be receiving quarterly pre-payments at the beginning of each quarter through the fiscal year 10-1 to 9-30. These pre-payments are based of your last final settlement. These quarterly pre-payments need to be reported on the FSR, along with the match requirement.

Settlements received outside of the year they were earned do not need to be reported on the FSR, you could however report these funds as local funds other if you wanted to. The money should ideally be applied towards the program they were earned in based on your methodology of dividing up the Other Medicaid funding. You could also use the money in your general fund. Again, this would be funding received outside the year they were earned in.

Hopefully the attached information will assist you. Lets chat if anything is not clear.

Thank you,

Steve Utter  
517-241-0114

---

**From:** Theresa Fisher <fishert@bhsj.org>  
**Sent:** Wednesday, August 21, 2019 9:40 AM  
**To:** Utter, Stephen (DHHS) <UtterS@michigan.gov>  
**Subject:** Medicaid Cost Based Reimbursement Money

Steve,

Thanks for taking the time to chat with me this morning about our Medicaid Cost Based Reimbursement issue. I appreciate your assistance and willingness to send me the manual you referred to. After I have a chance to read through it, I'll let you know if I have any questions.

Regards,

t

Theresa Fisher

Administrative Services Director  
Branch-Hillsdale-St. Joseph  
Community Health Agency  
517-279-9561 x 107

**100% Guaranteed ... Nothing will change if you do not try!**

Website: [www.bhsj.org](http://www.bhsj.org)

\*\*\*\*\*  
\*\*\*\*\*

Notice: This e-mail, including attachments, is intended for the exclusive use of the addressee and may contain proprietary, confidential or privileged information. If you are not the intended recipient, any dissemination, use, distribution or copying is strictly prohibited. If you have received this e-mail in error, please notify me via e-mail and permanently delete the original and destroy all copies. Thank You.

---

 **MCBR Budget and FSR Guidance MDHHS 11-29-2018.pdf**  
215 KB

---

# RU 024 MERS Pension Accrued Underfunded Liability

## Appendix C

Branch-Hillsdale-St Joseph Community Health Agency  
Posted General Ledger Transactions - RU 024

<b>Date Paid</b>	<b>Amount</b>	<b>Source of Funds</b>
1/19/2019	2,410.17	Forfeited
2/19/2019	2,457.68	Forfeited
3/22/2019	2,520.37	Forfeited
4/19/2019	2,102.96	Forfeited
7/5/2019	2,078.26	Forfeited
8/2/2019	102.86	Forfeited
5/31/2019	22,590.00	LOCAL
11/8/2019	65,000.00	LOCAL
11/8/2019	226,017.13	LOCAL
	<b>325,279.43</b>	<b>FYE 9/30/2019</b>
12/6/2019	2,102.11	Forfeited
10/25/2019	2,584.60	Forfeited
2/28/2020	394.33	Forfeited
3/27/2020	5,894.39	Forfeited
4/24/2020	6,027.74	Forfeited
6/5/2020	4,047.96	Forfeited
7/3/2020	200.24	Forfeited
9/25/2020	3,784.84	Forfeited
2/14/2020	587,588.00	2017 Medicaid Cost Base Reimbursement
7/31/2020	22,590.00	LOCAL
10/6/2020	310,000.00	LOCAL
	<b>945,214.21</b>	<b>FYE 9/30/2020</b>
7/2/2021	626,159.93	2018 Medicaid Cost Base Reimbursement
11/20/2021	77,000.00	LOCAL
10/8/2021	123,800.00	LOCAL
8/27/2021	22,590.00	LOCAL
12/4/2020	2,047.18	Forfeited
11/6/2020	1,712.05	Forfeited
1/15/2021	104.84	Forfeited
3/26/2021	1,954.92	Forfeited
7/16/2021	1,782.47	Forfeited
10/8/2021	2,989.46	Forfeited
	<b>860,140.85</b>	<b>FYE 9/30/2021</b>
12/17/2021	149.65	Forfeited
1/14/2022	149.73	Forfeited
	<b>299.38</b>	<b>Current Fiscal Year</b>

**Branch-Hillsdale-St Joseph Community Health Agency**  
Statement of Revenues and Expenditures - Sept 19  
024 - MERS Pension Underfunded Liability  
From 9/1/2019 Through 9/30/2019

		<u>Current Month</u>	<u>Year to Date</u>	<u>Total Budget - Amendment1</u>	<u>Total Budget Variance - Amendment1</u>	<u>Percent Total Expended Amend1</u>
<b>Expenditures</b>						
Fringe Benefits						
Retirement Exp	71442	<u>291,017.13</u>	<u>325,279.43</u>	<u>0.00</u>	<u>(325,279.43)</u>	<u>0.00%</u>
Total Fringe Benefits		<u>291,017.13</u>	<u>325,279.43</u>	<u>0.00</u>	<u>(325,279.43)</u>	<u>0.00%</u>
Total Expenditures		<u>291,017.13</u>	<u>325,279.43</u>	<u>0.00</u>	<u>(325,279.43)</u>	<u>0.00%</u>
<b>Revenue</b>						
Local Appropriations						
Local Appr Rev - All	58525	<u>291,017.13</u>	<u>313,607.13</u>	<u>0.00</u>	<u>313,607.13</u>	<u>0.00%</u>
Total Local Appropriations		<u>291,017.13</u>	<u>313,607.13</u>	<u>0.00</u>	<u>313,607.13</u>	<u>0.00%</u>
Local (Other)						
Misc Rev	67110	<u>0.00</u>	<u>11,672.30</u>	<u>0.00</u>	<u>11,672.30</u>	<u>0.00%</u>
Total Local (Other)		<u>0.00</u>	<u>11,672.30</u>	<u>0.00</u>	<u>11,672.30</u>	<u>0.00%</u>
Total Revenue		<u>291,017.13</u>	<u>325,279.43</u>	<u>0.00</u>	<u>325,279.43</u>	<u>0.00%</u>
Net Revenue Over Expenditures		<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00%</u>

**Branch-Hillsdale-St Joseph Community Health Agency**

Statement of Revenues and Expenditures - FY2020 FINAL

024 - MERS Pension Underfunded Liability

From 9/1/2020 Through 9/30/2020

		<u>Current Month</u>	<u>Year to Date</u>	<u>Total Budget - Final</u>	<u>Total Budget Variance - Final</u>	<u>Percent Total Expended Final</u>	<u>PY Actual</u>
<b>Expenditures</b>							
Fringe Benefits							
Retirement Exp	71442	<u>313,784.84</u>	<u>945,214.21</u>	<u>982,178.00</u>	<u>36,963.79</u>	<u>96.23%</u>	<u>325,279.43</u>
Total Fringe Benefits		<u>313,784.84</u>	<u>945,214.21</u>	<u>982,178.00</u>	<u>36,963.79</u>	<u>96.24%</u>	<u>325,279.43</u>
Total Expenditures		<u>313,784.84</u>	<u>945,214.21</u>	<u>982,178.00</u>	<u>36,963.79</u>	<u>96.24%</u>	<u>325,279.43</u>
<b>Revenue</b>							
Fed/State (Non-MDHHS)							
Medicaid Cost Based Rei...	55557	<u>0.00</u>	<u>587,588.00</u>	<u>587,588.00</u>	<u>0.00</u>	<u>100.00%</u>	<u>0.00</u>
Total Fed/State (Non-MD...		<u>0.00</u>	<u>587,588.00</u>	<u>587,588.00</u>	<u>0.00</u>	<u>100.00%</u>	<u>0.00</u>
Local Appropriations							
Local Appr Rev - All	58525	<u>310,000.00</u>	<u>332,590.00</u>	<u>372,590.00</u>	<u>(40,000.00)</u>	<u>89.26%</u>	<u>313,607.13</u>
Total Local Appropriations		<u>310,000.00</u>	<u>332,590.00</u>	<u>372,590.00</u>	<u>(40,000.00)</u>	<u>89.26%</u>	<u>313,607.13</u>
Local (Other)							
Misc Rev	67110	<u>3,784.84</u>	<u>25,036.21</u>	<u>22,000.00</u>	<u>3,036.21</u>	<u>113.80%</u>	<u>11,672.30</u>
Total Local (Other)		<u>3,784.84</u>	<u>25,036.21</u>	<u>22,000.00</u>	<u>3,036.21</u>	<u>113.80%</u>	<u>11,672.30</u>
Total Revenue		<u>313,784.84</u>	<u>945,214.21</u>	<u>982,178.00</u>	<u>(36,963.79)</u>	<u>96.24%</u>	<u>325,279.43</u>
Net Revenue Over Expendit...		<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00%</u>	<u>0.00</u>

**Branch-Hillsdale-St Joseph Community Health Agency**

Statement of Revenues and Expenditures - Final Budget - Line By Program Detail 21 BG - Unposted Transactions Included In Report

024 - MERS Pension Underfunded Liability

From 9/1/2021 Through 9/30/2021

		<u>Current Month</u>	<u>Year to Date</u>	<u>Total Budget - Final</u>	<u>Total Budget Variance - Final</u>	<u>Percent Total Expended Final</u>	<u>PY Actual</u>
<b>Expenditures</b>							
<b>Fringe Benefits</b>							
Retirement Exp	71442	<u>203,789.46</u>	<u>860,140.85</u>	<u>845,750.00</u>	<u>(14,390.85)</u>	<u>101.70%</u>	945,214.21
Total Fringe Benefits		<u>203,789.46</u>	<u>860,140.85</u>	<u>845,750.00</u>	<u>(14,390.85)</u>	<u>101.70%</u>	945,214.21
Total Expenditures		<u>203,789.46</u>	<u>860,140.85</u>	<u>845,750.00</u>	<u>(14,390.85)</u>	<u>101.70%</u>	945,214.21
<b>Revenue</b>							
<b>Fed/State (Non-MDHHS)</b>							
Medicaid Cost Based Rei...	55557	<u>0.00</u>	<u>626,159.93</u>	<u>626,160.00</u>	<u>(0.07)</u>	<u>99.99%</u>	587,588.00
Total Fed/State (Non-MD...		<u>0.00</u>	<u>626,159.93</u>	<u>626,160.00</u>	<u>(0.07)</u>	<u>100.00%</u>	587,588.00
<b>Local Appropriations</b>							
Local Appr Rev - All	58525	<u>200,800.00</u>	<u>223,390.00</u>	<u>197,590.00</u>	<u>25,800.00</u>	<u>113.05%</u>	332,590.00
Total Local Appropriations		<u>200,800.00</u>	<u>223,390.00</u>	<u>197,590.00</u>	<u>25,800.00</u>	<u>113.06%</u>	332,590.00
<b>Local (Other)</b>							
Misc Rev	67110	<u>2,989.46</u>	<u>10,590.92</u>	<u>22,000.00</u>	<u>(11,409.08)</u>	<u>48.14%</u>	25,036.21
Total Local (Other)		<u>2,989.46</u>	<u>10,590.92</u>	<u>22,000.00</u>	<u>(11,409.08)</u>	<u>48.14%</u>	25,036.21
Total Revenue		<u>203,789.46</u>	<u>860,140.85</u>	<u>845,750.00</u>	<u>14,390.85</u>	<u>101.70%</u>	945,214.21
Net Revenue Over Expendit...		<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00%</u>	0.00

**Branch-Hillsdale-St Joseph Community Health Agency**

Statement of Revenues and Expenditures - Amend 1 - Line by Program Detail 21 W/PY - Unposted Transactions Included In Report

024 - MERS Pension Underfunded Liability

From 1/1/2022 Through 1/31/2022

		<u>Current Month</u>	<u>Year to Date</u>	<u>Total Budget - Amendment 1</u>	<u>Variance - Amendment 1</u>	<u>Percent Expended</u>	<u>PY Actual</u>
<b>Expenditures</b>							
Fringe Benefits							
Retirement Exp	71442	0.00	299.38	44,590.00	44,290.62	0.67%	3,864.07
Total Fringe Benefits		0.00	299.38	44,590.00	44,290.62	0.67%	3,864.07
Total Expenditures		0.00	299.38	44,590.00	44,290.62	0.67%	3,864.07
<b>Revenue</b>							
Local Appropriations							
Local Appr Rev - All	58525	0.00	0.00	22,590.00	(22,590.00)	0.00%	0.00
Total Local Appropriations		0.00	0.00	22,590.00	(22,590.00)	0.00%	0.00
Local (Other)							
Misc Rev	67110	0.00	299.38	22,000.00	(21,700.62)	1.36%	3,864.07
Total Local (Other)		0.00	299.38	22,000.00	(21,700.62)	1.36%	3,864.07
Total Revenue		0.00	299.38	44,590.00	(44,290.62)	0.67%	3,864.07
Net Revenue Over Expendit...		0.00	0.00	0.00	0.00	0.00%	0.00

# RU 024 MERS Pension Accrued Underfunded Liability

## Appendix D

Branch-Hillsdale-St Joseph Community Health Agency  
Detail A/P Ledger  
From 1/1/2017 Through 2/28/2022

Document Date	Payments	Charges	Payee	Description	Original Inv Number
1/6/2017	25,943.27		Century Bank & Trust MERS	12/16 Mers DB	12/16 Mers db
2/17/2017	26,826.94		Century Bank & Trust MERS	Jan 17 DB	jan 17 Mers
3/3/2017	26,965.55		Century Bank & Trust MERS	02/1/17-02/28/17 Mers	02/17 Mers
4/14/2017	26,571.98		Century Bank & Trust MERS	3/1/17-3/31/17 DB Mers	03/17 mers DB
5/12/2017	26,575.20		Century Bank & Trust MERS	04/17 mers	04/17 mers
6/9/2017	26,251.84		Century Bank & Trust MERS	5/17 mers	05/17 db
6/12/2017	270.00		Century Bank & Trust MERS	5/17 mers er's portion	05/17 Mers-2
7/7/2017	28,447.99		Century Bank & Trust MERS	06/17 Mer DB	06/17 Mers
7/7/2017		28,447.99	Century Bank & Trust MERS	06/17 Mer DB	06/17 Mers
7/7/2017	28,447.99		Century Bank & Trust MERS	06/17 Mer DB	06/17 Mers
7/7/2017		28,447.99	Century Bank & Trust MERS	06/17 Mer DB	06/17 Mers
7/7/2017	28,447.99		Century Bank & Trust MERS	06/17 Mer DB	06/17 Mers
8/4/2017	26,273.08		Century Bank & Trust MERS	July 2017 Mers 13%	07/17 mers
9/1/2017	26,900.95		Century Bank & Trust MERS	08/17 MERS	08/17 MERS
10/13/2017	26,085.71		Century Bank & Trust MERS	09/17 Mers 13%	09/17 Mers 13%
11/10/2017	26,091.54		Century Bank & Trust MERS	Oct 17 Mers DB	10/17 Mers DB
12/8/2017	26,150.95		Century Bank & Trust MERS	11/17 MERS DB	11/17 MERS DB
1/5/2018	28,400.47		Century Bank & Trust MERS	12/1/17-12/31/17 MERS 13%	12/17 DB MERS
2/16/2018	29,383.55		Century Bank & Trust MERS	01/18 DB 18%	01/18 MERS DB
3/2/2018	29,377.78		Century Bank & Trust MERS	02/18 DB MERS 18%	02/18 DB MERS
4/13/2018	29,346.30		Century Bank & Trust MERS	03/18 MERS DB	03/18 DB MERS
4/13/2018		34.87	Century Bank & Trust MERS	MAPES CORRECTED 6/99,1/04 & 2/04 NON SER...	80044-2
5/11/2018	29,358.63		Century Bank & Trust MERS	04/18 MERS DB	04/30 MERS DB
6/8/2018	29,232.32		Century Bank & Trust MERS	05/18 MERS DB	05/18 MERS DB
7/20/2018	30,970.67		Century Bank & Trust MERS	06/18 MERS DB	06/18 DB MERS
8/17/2018	29,104.12		Century Bank & Trust MERS	07/18 MERS DB	07/18 MERS DB
9/14/2018	29,164.84		Century Bank & Trust MERS	08/18 MERS DB	86071-2
10/12/2018	29,270.36		Century Bank & Trust MERS	09/18 Mers DB	09/18 Mers DB
11/9/2018	29,267.06		Century Bank & Trust MERS	10/18 MERS DB	10/18 MERS DB
12/7/2018	31,131.28		Century Bank & Trust MERS	11/18 DB MERS	11/18 DB MERS
1/4/2019	29,357.20		Century Bank & Trust MERS	12/18 MERS DB	12/18 MERS DB
1/29/2019	29,545.44		Century Bank & Trust MERS	01/19 MERS DB	01/19 DB MERS
2/11/2019	2,410.17		Century Bank & Trust MERS	FROM 1/19 DC FORFEITURE TO DB UNDERFUN...	01-19 FORFEITURE
3/1/2019	2,457.68		Century Bank & Trust MERS	FROM 02/19 DC FORFEITURE TO DB UNDERFU...	02/19 FORFEITURE
3/1/2019	29,570.98		Century Bank & Trust MERS	02/19 MERS DB	02/19 MERS DB
3/29/2019	2,520.37		Century Bank & Trust MERS	FROM 03/19 DC FORFEITURE TO DB UNDERFU...	03/19 FORFEITURE

Branch-Hillsdale-St Joseph Community Health Agency  
Detail A/P Ledger  
From 1/1/2017 Through 2/28/2022

Document Date	Payments	Charges	Payee	Description	Original Inv Number
3/29/2019	29,553.68		Century Bank & Trust MERS	03/19 MERS DB	03/19 MERS DB
4/26/2019	2,102.96		Century Bank & Trust MERS	FROM 04-19 DC FORFEITURE TO DB UNDERFU...	04/19 FORFEITU...
4/26/2019	29,553.68		Century Bank & Trust MERS	04/19 MERS DB	04/19 MERS DB
6/7/2019	31,301.34		Century Bank & Trust MERS	05/19 MERS DB	05/19 MERS DB
6/7/2019	22,590.00		Century Bank & Trust MERS	5/24/18 BOH MEETING MINUTES 15 CENT PER ...	18/19 CATCH UP ...
7/5/2019	2,078.26		Century Bank & Trust MERS	FROM 6/19 DC FORFEITURE TO DB UNDERFUN...	06/19 FORFEITURE
7/5/2019	29,277.23		Century Bank & Trust MERS	06/19 MERS DB	06/19 MERS DB
8/2/2019	102.86		Century Bank & Trust MERS	FROM 07/19 DC TO FORFEITURE TO DB	07/19 FORFEITURE
8/2/2019	29,136.62		Century Bank & Trust MERS	07/19 MERS DB	07/19 MERS DB
8/30/2019	29,101.08		Century Bank & Trust MERS	08/19 MERS DB	08/19 MERS DB
9/27/2019	29,111.94		Century Bank & Trust MERS	09/19 MERS DB	09/19 MERS DB
10/25/2019	2,584.60		Century Bank & Trust MERS	FROM 10/19 DC TO DB FORFEITURE	10/19 FORFEITURE
10/25/2019	29,113.06		Century Bank & Trust MERS	10/19 MERS DB	10/19 MERS DB
11/8/2019	291,017.13		Century Bank & Trust MERS	2019 Medicaid Reimbusement	2019 Forfeiture
12/6/2019	2,102.11		Century Bank & Trust MERS	11/19 FORFEITURE FROM DC	11/19 FORFEITURE
12/6/2019	30,822.90		Century Bank & Trust MERS	11/19 MERS DB	11/19 MERS DB
1/10/2020	29,134.83		Century MERS	12/19 MERS DB	12/19 MERS DB
1/31/2020	31,265.49		Century MERS	01/20 MERS DB	01/20 MERS DB
1/31/2020	105.92		Century MERS	01/20 MERS DC SURPLUS	01/20 SURPLUS
1/31/2020		241.03	Century MERS	GERIANNE POST NON CREDIT MONTHS REFUND	POST CREDIT
2/14/2020	587,588.00		Century MERS	2017 Medicaid Reimbusement	02/20 XTRA PMT
2/28/2020	31,369.20		Century MERS	02/20 MERS DB	02/20 MERS DB
2/28/2020	394.33		Century MERS	02/20 MERS DC FORREITURE TO DB	02/20 MERS FOR...
3/27/2020	31,342.68		Century MERS	03/20 MERS DB	03/20 MERS DB
3/27/2020	17.06		Century MERS	PODOLL 07/2001 CREDIT MONTH	104667-2
4/24/2020	31,384.15		Century MERS	04/20 MERS DB	04/20 MERS DB
6/5/2020	33,033.31		Century MERS	05/20 MERS DB	05/20 MERS DB
6/5/2020	4,047.96		Century MERS	05/20 MERS DC FORFEITURE TO DB UNDERFU...	05/20 MERS FOR...
7/3/2020	31,384.31		Century MERS	06/20 MERS DB	06/20 MERS DB
7/3/2020	200.24		Century MERS	06/20 MERS DB SURPLUS	06/20 MERS DB S...
7/31/2020	31,267.75		Century MERS	07/20 MERS DB	07/20 MERS DB
7/31/2020	22,590.00		Century MERS	FY 20 MERS Pymt Board Appr	07/20 MERS DB S...
8/28/2020	31,341.78		Century MERS	08/20 MERS DB	08/20 MERS DB
9/25/2020	31,422.87		Century MERS	09/20 MERS DB	09/20 MERS DB
9/25/2020	3,784.84		Century MERS	09/20 MERS DB SURPLUS	09/20 MERS DB S...
11/6/2020	310,000.00		Century MERS	10/20 FY20 MOE - Board Approved	10/20 FY20 MOE ...
11/6/2020	33,752.08		Century MERS	10/20 MERS DB	10/20 MERS DB

Branch-Hillsdale-St Joseph Community Health Agency  
 Detail A/P Ledger  
 From 1/1/2017 Through 2/28/2022

Document Date	Payments	Charges	Payee	Description	Original Inv Number
11/6/2020	1,712.05		Century MERS	10/20 MERS FORFEITURE	10/20 MERS FOR...
12/4/2020	31,440.97		Century MERS	11/20 MERS DB	00113409-2
12/4/2020	2,047.18		Century MERS	11/20 Forfeiture	00113413-1
1/15/2021	31,576.53		Century MERS	12/20 MERS DB	00114844-2
1/15/2021	104.84		Century MERS	12/20 MERS FORFEITURE	00114965-1
1/29/2021	38,656.99		Century MERS	01/21 MERS DB	00115276-2
2/26/2021	38,708.80		Century MERS	02/21 MERS DB	00116245-2
3/26/2021	38,474.92		Century MERS	03/21 MERS DB	00117411-2
3/26/2021	1,954.92		Century MERS	03/21 MERS Surplus	00117416-1
5/7/2021	40,360.79		Century MERS	4/21 Mers DC	00118966-2
6/18/2021	38,220.45		Century MERS	5/21 Mers DB	00120003-2
7/2/2021	626,159.93		Century MERS	2018 MCBR Surplus	00120841-1
7/16/2021	39,790.14		Century MERS	6/21 Mers DB	00120885-2
7/16/2021	1,782.47		Century MERS	06/21 Mers DB Forfeiture	00120905-1
8/13/2021	37,917.17		Century MERS	7/21 Mers DB	00122162-2
8/27/2021	22,590.00		Century MERS	8/21 BOH Mers surplus	00122536-1
9/10/2021	37,962.35		Century MERS	8/21 DB	00122671-2
10/8/2021	123,800.00		Century MERS	9/21 Surplus BOH	00123736-1
10/8/2021	2,989.46		Century MERS	9/21 Surplus	00123790-1
10/8/2021	38,028.74		Century MERS	9/21 DB	00123799-2
11/5/2021	116,611.78		Century MERS	10/21 DB & Surplus	00124888-3
12/17/2021	37,921.71		Century MERS	11/21 DB	00126108-2
12/17/2021	149.65		Century MERS	11/21 Surplus	00126132-1
1/14/2022	38,017.94		Century MERS	12/21 Mers DB	00126799-2
1/14/2022	149.73		Century MERS	12/21 DB Surplus	00126802-1
2/11/2022	52,325.16		Century MERS	1/22 DB Contributions	00128053-2
	<u>4,130,551.12</u>	<u>57,171.88</u>		Transaction Total	
Report Opening/Current Balance	0.00	0.00			
Report Transaction Totals	<u>4,130,551.12</u>	<u>57,171.88</u>			

Branch-Hillsdale-St Joseph Community Health Agency

Detail A/P Ledger

From 1/1/2017 Through 2/28/2022

<u>Document Date</u>	<u>Payments</u>	<u>Charges</u>	<u>Payee</u>	<u>Description</u>	<u>Original Inv Number</u>
Report Current Balances	<u>4,130,551.12</u>	<u>57,171.88</u>			
Report Difference	<u>4,073,379.24</u>				

Branch-Hillsdale-St Joseph Community Health Agency  
 Detail A/P Ledger  
 From 1/1/2017 Through 2/28/2022

Document Date	Payments	Charges	Payee	Description	Original Inv Number
2/17/2017	1,836.78		MERS 5% EMPLOYEES	Jan 17 5% Mers	Jan 17 Alerus
3/17/2017	1,836.78		MERS 5% EMPLOYEES	2/1/17-2/28/17 dc	02/17 5% mers
4/14/2017	2,066.95		MERS 5% EMPLOYEES	3/1/17-3/31/17 mers 5%	03/17 Mers 5%
5/12/2017	2,511.25		MERS 5% EMPLOYEES	04/17 mers 5%	04/17 5%
6/9/2017	2,655.20		MERS 5% EMPLOYEES	may 17 mers 5%	05/17 dc
7/7/2017	3,708.28		MERS 5% EMPLOYEES	June 17 5% mers	June 17 5%
7/7/2017		3,708.28	MERS 5% EMPLOYEES	June 17 5% mers	June 17 5%
7/7/2017	3,708.28		MERS 5% EMPLOYEES	June 17 5% mers	June 17 5%
7/7/2017		3,708.28	MERS 5% EMPLOYEES	June 17 5% mers	June 17 5%
7/7/2017	3,708.28		MERS 5% EMPLOYEES	June 17 5% mers	June 17 5%
8/4/2017	2,788.30		MERS 5% EMPLOYEES	July 17 5% alerus	07/17 5%
10/13/2017	3,521.19		MERS 5% EMPLOYEES	Sept 17 Mers 5%	9/17 mers 5%
11/10/2017	3,695.69		MERS 5% EMPLOYEES	10/17 Mers 5%	10/17 Mer DC
1/5/2018	5,487.20		MERS 5% EMPLOYEES	12/17 MERS 5%	12/17 mers 5% DC
2/2/2018	3,675.08		MERS 5% EMPLOYEES	01/18 DC 5%	01/18 5% DC
3/2/2018	3,786.21		MERS 5% EMPLOYEES	02/18 MERS 5% DC	02/18 DC 5%
3/30/2018	3,596.97		MERS 5% EMPLOYEES	03/18 MER %5 DC	03/18 5%
4/27/2018	3,565.91		MERS 5% EMPLOYEES	04/18 DC 5% EMPLOYEES	04/18 DC MERS
5/25/2018	3,448.78		MERS 5% EMPLOYEES	05/18 MERS DC	05/18 MERS DC
7/6/2018	5,060.58		MERS 5% EMPLOYEES	06/18 MERS DC	06/18 DC MERS
8/3/2018	3,653.73		MERS 5% EMPLOYEES	07/18 DC 5% MERS	07/18 MERS DC
9/14/2018	3,571.05		MERS 5% EMPLOYEES	08/18 MERS 5%	08/18 MERS DC
10/12/2018	3,747.60		MERS 5% EMPLOYEES	09/18 Mer 5% DC	09/18 5% mers
10/26/2018	3,316.09		MERS 5% EMPLOYEES	10/18 MERS 5%	10/18 MERS DC
12/7/2018	5,708.45		MERS 5% EMPLOYEES	11/18 DC MERS	11/18 DC MERS
1/4/2019	4,125.23		MERS 5% EMPLOYEES	12/18 MERS DC	12/18 MERS DC
1/29/2019	1,446.12		MERS 5% EMPLOYEES	EMPLOYEE'S PORTION ONLY	01/19 DC MERS
3/1/2019	1,474.62		MERS 5% EMPLOYEES	02/19 MERS DC	02/19 MERS DC
3/29/2019	1,512.23		MERS 5% EMPLOYEES	03/19 MERS DC EMPLOYEE PORTION ONLY	03/19 MERS DC
4/26/2019	1,974.34		MERS 5% EMPLOYEES	04/19 MERS DC	04/19 MERS DC
6/7/2019	5,763.56		MERS 5% EMPLOYEES	05/19 MERS 5% DC	05/19 MERS DC
7/5/2019	1,950.92		MERS 5% EMPLOYEES	06/19 DC MERS	06/19 MERS DC
8/2/2019	4,364.03		MERS 5% EMPLOYEES	07/19 MERS DC	07/19 MERS DC
8/30/2019	4,689.90		MERS 5% EMPLOYEES	08/19 MERS DC	08/19 MERS DC
9/27/2019	4,610.25		MERS 5% EMPLOYEES	09/19 MERS 5% DC	09/19 MERS 5%
10/25/2019	1,550.76		MERS 5% EMPLOYEES	10/19 MERS DC	10/19 MERS DC

Branch-Hillsdale-St Joseph Community Health Agency  
 Detail A/P Ledger  
 From 1/1/2017 Through 2/28/2022

Document Date	Payments	Charges	Payee	Description	Original Inv Number
12/6/2019	4,997.94		MERS 5% EMPLOYEES	11/19 MERS DC	11/19 MER DC
1/10/2020	5,142.18		MERS 5% EMPLOYEES	12/19 MERS DC	12/19 MERS DC
1/31/2020	5,224.01		MERS 5% EMPLOYEES	01/20 MERS DC	01/20 MERS DC
2/14/2020	36.43		MERS 5% EMPLOYEES	01/20 MERS DC	01/20 MERS DC
2/28/2020	5,355.40		MERS 5% EMPLOYEES	02/20 MERS DC	02/20 MERS DC
3/27/2020	5,894.39		MERS 5% EMPLOYEES	3/20 MERS DC	3/20 MERS DC
4/24/2020	6,027.74		MERS 5% EMPLOYEES	04/20 MERS DC	04/20 MERS DC
6/5/2020	4,021.00		MERS 5% EMPLOYEES	05/20 MERS DC	05/20 MERS DC
7/3/2020	5,827.93		MERS 5% EMPLOYEES	06/20 MERS DC	06/20 MERS DC
7/31/2020	5,656.12		MERS 5% EMPLOYEES	07/20 MERS DC	07/20 MERS DC
8/28/2020	5,696.36		MERS 5% EMPLOYEES	08/20 MERS DC	08/20 MERS DC
9/25/2020	2,270.93		MERS 5% EMPLOYEES	09/20 MERS DC	09/20 MERS DC
11/6/2020	8,781.78		MERS 5% EMPLOYEES	10/20 MERS DC	10/20 MERS DC
12/4/2020	5,041.14		MERS 5% EMPLOYEES	11/20 MERS DC	11/20 MERS DC
1/15/2021	6,703.10		MERS 5% EMPLOYEES	12/20 MERS DC	12/20 MERS DC
1/29/2021	6,624.50		MERS 5% EMPLOYEES	01/21 MERS DC	01/21 MERS DC
2/26/2021	6,462.93		MERS 5% EMPLOYEES	02/21 MERS DC	02/21 MERS DC
3/26/2021	4,637.96		MERS 5% EMPLOYEES	03/21 MERS DC	03/21 MERS DC
5/7/2021	10,448.61		MERS 5% EMPLOYEES	4/21 Mers DC	4/21 Mers DC
6/18/2021	7,187.97		MERS 5% EMPLOYEES	5/21 Mers DC	5/21 Mers DC
7/16/2021	10,296.23		MERS 5% EMPLOYEES	6/21 Mers DC	6/21 Mers DC
8/13/2021	7,357.23		MERS 5% EMPLOYEES	7/21 Mers DC	7/21 DC
9/10/2021	7,508.43		MERS 5% EMPLOYEES	8/21 DC	8/21 DC
10/8/2021	4,595.50		MERS 5% EMPLOYEES	9/21 DC	9/21 DC
11/5/2021	11,529.80		MERS 5% EMPLOYEES	10/21 DC	10/21 DC
12/17/2021	7,697.36		MERS 5% EMPLOYEES	11/21 DC	11/21 DC
1/14/2022	8,127.36		MERS 5% EMPLOYEES	12/21 Mers DC	12/21 Mers DC
2/11/2022	8,357.32		MERS 5% EMPLOYEES	1/22 DC Contributions	1/22 Mers DC
	<u>291,624.24</u>	<u>7,416.56</u>		Transaction Total	
Report Opening/Current Balance	0.00	0.00			
Report Transaction Totals	291,624.24	7,416.56			

Branch-Hillsdale-St Joseph Community Health Agency

Detail A/P Ledger

From 1/1/2017 Through 2/28/2022

<u>Document Date</u>	<u>Payments</u>	<u>Charges</u>	<u>Payee</u>	<u>Description</u>	<u>Original Inv Number</u>
Report Current Balances	<u>291,624.24</u>	<u>7,416.56</u>			
Report Difference	<u>284,207.68</u>				

**Branch-Hillsdale-St. Joseph Community Health Agency**  
**Environmental Public Health Services**  
**Report for the March 24, 2022 Board of Health Meeting**  
**Prepared by Paul Andriacchi R.E.H.S, Director of Environmental Health**

### **Food Service Sanitation**

During the pandemic we discontinued our food service manager certification classes that we offered to our operators on a quarterly basis. We are at the point where we are wanting to restart those classes, however, the testing company that we use is not mailing out any exams due to continued concerns over Covid. We have been encouraging our food service operators to seek one of the many on-line courses so they can keep their certifications current. We are hopeful that the company will resume normal operations soon so we can once again offer the classes for our operators. There are other testing companies out there that we could use, however, we have invested in the class books that are used for the current company's specific test. If we would change test providers, we would also have to change class books.



### **Well and Septic**

A meeting was held on February 28, to discuss the water sampling issues we have been trying to resolve with an Amish school in St. Joseph County. The meeting was attended by staff from EGLE, EPA, BHSJ-CHA and the head of the Amish school board. The discussed centered on the lack of compliance with the Type II public water supply water testing requirements. The school has been in non-compliance with the frequency of sampling for well over 2 years. The Amish representative was in agreement the fact that the samples have not been done on the schedule that is required. His argument was that this and all Amish schools are private and therefore should not be regulated by the state. After much discussion, it was decided that another meeting would be schedule at which time the EPA would bring their legal counsel to explain the legalities of the Safe Drinking Water Act as it applies to public water supplies. A date for that meeting has not been set yet.

### **Other Programs**

Follow up sampling was done recently for 32 wells associated with the PFAS contamination site in White Pigeon. EGLE was able to get a consent agreement from one homeowner that was not previously willing to have their well sampled. The sample results have not been reported yet but I will have those results by the time of the next meeting.

Last month I reported about another potential PFAS site in St. Joseph County that was related to a tire fire extinguished with foam. The sampling on that site is scheduled to take place sometime this month. To date, EGLE has only been able to get 2 consent agreements to sample but they are hoping to get a total of 6.

## EH Service Statistics Report

### BRANCH - HILLSDALE - ST. JOSEPH COMMUNITY HEALTH AGENCY

ENVIRONMENTAL HEALTH SERVICE REPORT 2021/2022

	FEBRUARY				YTD 2021/2022				YTD 2020/2021			
	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL
<b>WELL/SEWAGE SYSTEM EVAL.</b>	-	-	-	-	-	-	10	10	2	-	4	6
<b>CHANGE OF USE EVALUATIONS - FIELD</b>	1	-	1	2	7	16	11	34	15	18	12	45
<b>CHANGE OF USE EVALUATIONS - OFFICE</b>	1	-	8	9	6	11	41	58	22	16	32	70
<b>ON-SITE SEWAGE DISPOSAL</b>												
PERMITS NEW CONSTRUCTION ISSUED	-	2	7	9	21	19	24	64	11	25	27	63
REPAIR/REPLACEMENT ISSUED	2	3	3	8	25	17	26	68	30	19	42	91
VACANT LAND EVALUATION	-	-	-	-	-	7	7	14	8	8	7	23
PERMITS DENIED	1	-	-	1	1	-	-	1	-	-	1	1
TOTAL	3	5	10	18	36	43	57	147	49	52	75	178
<b>SEWAGE PERMITS INSPECTED</b>	2	6	3	5	31	39	48	112	45	50	69	163
<b>WELL PERMITS ISSUED</b>	3	3	15	21	31	45	120	196	82	57	67	206
<b>WELL PERMITS INSPECTED</b>	11	3	6	20	39	45	111	195	81	66	83	230
<b>FOOD SERVICE INSPECTION</b>												
PERMANENT	28	11	31	70	92	94	117	303	102	88	117	325
NEW OWNER / NEW ESTABLISHMENT	-	1	-	1	2	3	5	10	-	2	-	2
FOLLOW-UP INSPECTION	2	-	1	3	8	2	9	19	2	-	2	8
TEMPORARY	-	-	1	1	3	7	6	16	1	4	12	17
STFU/MOBILE	1	-	-	1	4	-	6	10	-	1	4	5
PLAN REVIEW APPLICATIONS	-	1	1	2	5	1	8	14	1	1	1	3
FOOD COMPLAINTS RECEIVED	1	-	-	1	4	3	1	8	4	20	8	26
FOODBORNE ILLNESS INVESTIGATED	-	-	-	-	-	-	-	-	-	-	-	-
<b>FOOD CLASSES</b>												
MANAGEMENT CERTIFICATION CLASS	-	-	-	-	n/a	n/a	n/a	-	n/a	n/a	n/a	n/a
FOOD HANDLERS CLASS	-	-	-	-	n/a	n/a	n/a	-	n/a	n/a	n/a	-
<b>METH LAB REFERRALS</b>	-	-	-	-	-	-	-	-	-	-	-	-
METH LAB LETTERS SENT	-	-	-	-	-	-	-	-	-	-	-	-
<b>CAMPGROUND INSPECTION</b>	-	-	-	-	-	-	-	-	-	-	-	-
<b>NON-COMM WATER SUPPLY INSP.</b>	3	1	-	4	9	2	3	14	1	4	5	10
<b>SWIMMING POOL INSPECTION</b>	-	-	-	-	6	4	-	10	2	1	-	3
<b>PROPOSED SUBDIVISION REVIEW</b>	-	-	-	-	-	-	-	-	-	-	-	-
<b>SEPTIC TANK CLEANER</b>	-	-	-	-	-	-	-	-	-	-	-	-
<b>DHS LICENSED FACILITY INSP.</b>	1	3	4	8	6	14	16	36	3	13	6	22
<b>COMPLAINT INVESTIGATIONS</b>	-	-	1	1	6	6	7	19	-	9	5	14
<b>LONG TERM MONITORING</b>	-	-	-	-	-	-	-	-	-	-	-	-
<b>BODY ART FACILITY INSPECTIONS</b>	1	1	-	2	3	2	-	5	2	3	2	7

# Inspection Type Count by County

For Date Range: 2/1/2022 - 2/28/2022 and Program: Food Service

County	Inspection Type	Count
Branch	Complaint	1
	Consult	2
	Follow-Up	2
	Progress Note	1
	Routine	28
	STFU/Mobile	1
Hillsdale	Consult	2
	Pre-opening/New	1
	Progress Note	1
	Routine	11
St. Joseph	Follow-Up	1
	Progress Note	3
	Routine	31
	Temporary	1
	Total number of inspections	86

# Inspection Type Count

For Date Range: 2/1/2022 - 2/28/2022 and Program: Food Service

<b>Inspection Type</b>	<b>Count</b>
Complaint	1
Consult	4
Follow-Up	3
Pre-opening/New	1
Progress Note	5
Routine	70
STFU/Mobile	1
Temporary	1
Total number of inspections	86

# Establishment Inspection Report

For Date Range: 2/1/2022 - 2/28/2022 and Program: Food Service

Name	Location	Date	Inspection Type	# P	# Pf	# P/Pf Fixed During Inspection	# Core
55 BELOW	Hillsdale	2/9/2022	Routine	0	0	0	0
55 BELOW	Hillsdale	2/16/2022	Consult	0	0	0	0
55 BELOW	Hillsdale	2/23/2022	Consult	0	0	0	0
AMBASSADORS FOR CHRIST CHURCH	Three Rivers	2/8/2022	Progress Note	0	0	0	0
AMERICAN LEGION #223	Constantine	2/15/2022	Routine	0	0	0	0
AMERICAN LEGION MEMORIAL POST	BRONSON	2/8/2022	Routine	0	0	0	0
BEN'S SOFT PRETZELS	COLDWATER	2/17/2022	Routine	0	0	0	0
Biggby Coffee	Three Rivers	2/11/2022	Routine	0	2	0	0
Biggby Coffee	Three Rivers	2/22/2022	Follow-Up	0	0	0	0
Biggby Coffee #494	White Pigeon	2/15/2022	Routine	0	0	0	0
Biggby Coffee #571	Jonesville	2/22/2022	Routine	0	0	0	0
BILL'S STEAKHOUSE	Coldwater	2/9/2022	Routine	1	1	0	0
BOB EVAN RESTAURANTS LLC #2035	COLDWATER	2/15/2022	Routine	0	1	1	3
Bowman Place	Three Rivers	2/1/2022	Routine	0	0	0	0
BRANCH AREA CAREERS CENTER	COLDWATER	2/4/2022	Consult	0	0	0	0
BRANCH AREA CAREERS CENTER	COLDWATER	2/11/2022	Consult	0	0	0	0
Bread and Butter Kitchen	Sturgis	2/23/2022	Routine	0	2	1	1
BRONSON STRIKE ZONE	BRONSON	2/9/2022	Routine	1	1	0	2
BURGERS UNLOCKED	HILLSDALE	2/11/2022	Routine	0	0	0	0
Camp Selah	Reading	2/25/2022	Pre-opening/New	0	0	0	0
Castaway Lounge LLC	Coldwater	2/24/2022	Routine	0	2	2	0
CHICAGO STREET PUB INC.	COLDWATER	2/11/2022	Routine	0	0	0	0
Chicken Coop	Constantine	2/18/2022	Routine	0	0	0	0
Coach Eby Youth & family Center	COLDWATER	2/10/2022	Routine	0	0	0	0
Dickey's Barbecue Pit	Coldwater	2/17/2022	Complaint	0	0	0	0
Dickey's Barbecue Pit	Coldwater	2/23/2022	Progress Note	0	0	0	0
EL TACO LOCO II	COLDWATER	2/14/2022	Follow-Up	2	1	1	1
EL TACO LOCO II	COLDWATER	2/24/2022	Follow-Up	2	0	2	1
FIRST CONGREGATIONAL CHURCH	BRONSON	2/8/2022	Routine	0	0	0	0

3/15/2022 1:25:38 PM

Name	Location	Date	Inspection Type	# P	# Pf	# P/Pf Fixed During Inspection	# Core
FIRST PRESBYTERIAN CHURCH	THREE RIVERS	2/23/2022	Routine	0	0	0	0
FIRST UNITED METHODIST CHURCH OF BRONSON	BRONSON	2/8/2022	Routine	0	0	0	0
Five Lakes Coffee	Sturgis	2/16/2022	Routine	0	1	0	0
Five Lakes Coffee INC	STURGIS	2/23/2022	Routine	0	0	0	0
Frankie's by the Tracks, LLC	THREE RIVERS	2/23/2022	Routine	0	0	0	1
GRANT'S CATERING	ANTWERP	2/26/2022	STFU/Mobile	0	0	0	0
HILLSDALE COLLEGE BIERMANN ATHLETIC CENT	HILLSDALE	2/4/2022	Routine	0	0	0	0
Immaculate Conception Church Hall	THREE RIVERS	2/14/2022	Routine	0	0	0	0
JAYWALKER RESTAURANT	Mottville	2/25/2022	Routine	0	0	0	1
JILLY BEANS TOO	JONESVILLE	2/22/2022	Routine	0	0	0	0
JIMMY JOHN'S	COLDWATER	2/15/2022	Routine	0	0	0	0
JONESVILLE UNITED METHODIST	JONESVILLE	2/10/2022	Routine	0	0	0	0
Kentucky Fried Chicken Coldwater	COLDWATER	2/1/2022	Routine	1	0	0	3
Leonidas Fire Department	Leonidas	2/8/2022	Progress Note	0	0	0	0
LIL' LOUIE'S PIZZA AND SUBS LLC	Centreville	2/16/2022	Routine	0	0	0	0
LITTLE CAESARS #1200-002	Sturgis	2/16/2022	Routine	0	1	0	4
LOLA-LOU'S COFFEE CUP	HILLSDALE	2/9/2022	Routine	0	1	1	1
M ENTERPRISE LLC D/B/A CORNER CAFE	Sturgis	2/16/2022	Routine	0	0	0	0
MCDONALDS OF COLDWATER	COLDWATER	2/10/2022	Routine	0	0	0	2
McDonald's of White Pigeon	White Pigeon	2/15/2022	Routine	0	0	0	0
MEEKS MILL CAFE	Constantine	2/18/2022	Routine	0	0	0	1
Michindoh Conference Center	Hillsdale	2/15/2022	Routine	0	0	0	0
Mike's Pizza and Subs LLC	Sturgis	2/16/2022	Routine	0	0	0	1
MR. B'S DAIRY BAR	THREE RIVERS	2/14/2022	Routine	0	0	0	0
Nelson's chicken Sale	Constantine	2/15/2022	Temporary	0	0	0	0
NUTRITION XTREME	Jonesville	2/10/2022	Routine	0	0	0	0
OSCAR BROWN'S TAVERN	COLDWATER	2/24/2022	Routine	2	1	3	0
Our Bar	LEONIDAS	2/28/2022	Progress Note	0	0	0	0

Name	Location	Date	Inspection Type	# P	# Pf	# P/Pf Fixed During Inspection	# Core
OUR SAVIOR LUTHERAN CHURCH	UNION CITY	2/22/2022	Routine	0	0	0	0
Ponderosa Steakhouse	Coldwater	2/22/2022	Routine	2	2	1	3
Quincy Diner	QUINCY	2/17/2022	Routine	0	0	0	0
QUINCY PIZZA	QUINCY	2/18/2022	Routine	0	0	0	0
Royal Cafe	CENTREVILLE	2/16/2022	Routine	0	0	0	0
SAMUEL MANCINOS ITALIAN EATERY	White Pigeon	2/22/2022	Routine	0	0	0	0
SOMERSET BEACH CAMPGROUND	SOMERSET CENTER	2/1/2022	Routine	0	0	0	0
ST. JOE. K OF C COUNCIL 13749	WHITE PIGEON	2/15/2022	Routine	0	1	0	4
Stateline Bar	White Pigeon	2/25/2022	Routine	0	0	0	1
STRAND THEATRE	Sturgis	2/24/2022	Routine	0	0	0	0
Sturgis Biggby Coffee #484	Sturgis	2/23/2022	Routine	0	0	0	0
Subway At Wal-Mart	STURGIS	2/23/2022	Routine	0	0	0	0
Taco Bell #32989	COLDWATER	2/1/2022	Routine	0	0	0	3
Tasteful Kreations	Bronson	2/9/2022	Routine	0	0	0	0
TASTEFUL KREATIONS CATERING	BRONSON	2/8/2022	Routine	0	0	0	0
TASTY TWIST	COLDWATER	2/22/2022	Routine	0	0	0	0
Test food	Three Rivers	2/25/2022	Routine	1	1	0	2
THE DECK DOWN UNDER	Jerome	2/24/2022	Routine	0	0	0	0
THE IN BETWEEN	Sturgis	2/24/2022	Routine	0	0	0	1
THE OUTPOST GRILLE	Allen	2/15/2022	Progress Note	0	0	0	0
THE PATIO	COLDWATER	2/14/2022	Routine	0	0	0	0
Three Rivers Health (Food)	Three Rivers	2/11/2022	Routine	0	1	0	0
Three Rivers Young Adult Program	Three Rivers	2/1/2022	Routine	0	0	0	0
TIP-UP ISLAND	QUINCY	2/26/2022	Routine	0	0	0	0
TOMAHAWK TAVERN	White Pigeon	2/24/2022	Routine	0	0	0	0
Tropical Smoothie Cafe	Coldwater	2/11/2022	Routine	0	1	1	2
Twin County Community Probation Center.	Three Rivers	2/14/2022	Routine	0	1	0	2
UNION CITY UNITED METHODIST CHURCH	UNION CITY	2/22/2022	Routine	0	0	0	0
WHITE STAR AUCTION INC	BRONSON	2/8/2022	Routine	0	0	0	0

#### Food Inspection Codes:

P-This indicates a priority violation which is a violation which includes a quantifiable measure to show control of hazards such as cooking, cooling, reheating and handwashing. It is in general terms a violation that can potentially lead directly to an illness.

Pf-This is a priority foundation violation which is a violation that supports a priority violation. For example, the lack of soap or towels at a handwash sink is a Pf. This supports the priority violation of not washing hands.

C-This is a core violation-This is an item the usually relates to general sanitation, operational controls and maintenance of facilities and equipment.



Area  
Agency on  
Aging (IIIIC)  
Branch-St. Joseph

March 24, 2022

## Director's Report

---

### Enclosure:

1. AAA IIIIC - Annual Conflict of Interest & Disclosure Statement \* (*hard copies will be available at the meeting for signature*)
- 

### Updates:

1. Services to Victims of Elder Abuse Program Updates
  - We would like to welcome Janice "JC" Siddons to the agency as our new Victim Specialist! JC has an extensive background in law enforcement, including victim services, so we're all excited to work alongside her. She's fairly new to the area after living in Texas for over 20 years. Welcome JC!
2. Provider Budget Amendment Updates
  - After receiving the American Rescue Plan (ARP) funding award with some Bureau guidance (there are still items for clarification) we held a productive provider/stakeholder meeting to gather input. Amendments will also include a plan for the Supplemental Nutrition funds for home delivered meals grantees. The remaining funding that will be incorporated into the amendments include: the full-year statement of grant award ("regular" formulary award) and the FY2021 carry forward funding. The full-year SGA and FY21 carry forward has not been issued as of the drafting of this report...
  - The budget amendment process is extensive and must take into consideration the following information as we develop plans to amend contracts: provider input, community needs & service delivery experience, and federal/state laws and guidance. We will share the proposed amendments once we have all of the "pieces" of the funding picture to move forward.
3. The Annual Conflict of Interest & Disclosure Statement is included for your review. We will have hard copies for your signature available at the meeting. If you prefer, you are welcome to electronically sign the enclosed copy and email it to me at [sutterl@bhsj.org](mailto:sutterl@bhsj.org). Thank you.
4. Our team is busy distributing PPE to the public, community agencies and network partners. KN95 masks have been popular, as well as hand sanitizers! If you or an organization you are affiliated with is in need of PPE, please let me know!



Area  
Agency on  
Aging (III C)  
Branch-St. Joseph

## Annual Conflict of Interest and Disclosure Policy

---

Section 1. Purpose of Policy. This policy sets forth principles and procedures intended to maintain the integrity of the Area Agency on Aging Region 3C (AAA 3C), as well as comply with Michigan Office of Services to the Aging Operating Standards for Area Agencies on Aging. Members of the Branch-Hillsdale-St. Joseph Community Health Agency (CHA) Board of Health (serving as the AAA 3C Policy Board) are expected to conduct their personal/business affairs so that no conflict of interest or duality of interest interferes with their duties and responsibilities to the CHA/AAA 3C.

Section 2. Covered Individuals. This policy applies to the members and officers of the Board of Health.

Section 3. Conflict of Interest and Duality of Interest. This policy covers both conflicts of interests, involving the financial interests of or financial benefit to a covered individual as owner, employee, agent, consultant or otherwise, and duality of interests, involving the interests of an association, governmental entity, business or other entity (whether profit or nonprofit) in which a covered individual has a substantial personal interest as a director, officer, trustee, commissioner or substantial contributor or through another substantial relationship.

Section 4. Covered Transactions, Relationships and Affiliations. This policy applies to existing and proposed transactions, relationships and affiliations, including contracts for goods, facilities and services, leases, grants, gifts, financial assistance, partnerships, endorsements, policy positions, joint ventures and other undertakings and dealings, between the CHA/AAA 3C and (a) a covered individual; (b) a member of a covered individual's immediate family; and (c) an association, governmental entity, business or other entity (whether profit or nonprofit) with respect to which a covered individual has a conflict of interest or a duality of interests.

Section 5. Disclosure. All covered individuals shall provide a written disclosure annually to the CHA/AAA 3C of any conflict of interest or duality of interest between them and the CHA/AAA 3C as described in Section 3 and of any covered transactions, relationships, endorsements, policy positions or affiliations involving them as described in Section 4. In addition, a covered individual shall provide prompt disclosure to the Board of Health at any time that he or she becomes aware of any such conflict of interest, duality of interest or covered transaction, relationship or affiliation.

Section 6. Review, Report and Record. In the event that the CHA/AAA 3C becomes aware of a conflict of interest, or duality of interest of a covered transaction, relationship, endorsement, policy position or affiliation involving a covered individual, whether through disclosure made pursuant to Section 5 or otherwise, the matter shall be reviewed by a committee of disinterested members of the Board of Health. The review shall be reported to the Board of Health and shall be made a matter of record.

Section 7. Procedures. Any member of the Board of Health having a duality of interest or conflict of interest, real or apparent, with respect to any covered transaction, relationship, endorsement, policy position or affiliation that comes before the Board of Health shall not vote or use his or her personal influence on the matter, and shall not be counted in determining a quorum for the meeting at which the matter is voted upon. In deciding any such matter, the Board of Health shall obtain appropriate comparability data, including data as to the fair market value for any goods, services or facilities that may be involved. The minutes of the meeting shall adequately document the basis of the determination and shall reflect that the disclosure was made, that the interested Board member abstained from voting, and that his or her presence was not considered. No interested Board member and no interested officer shall take part in the discussion and, in appropriate instances, as determined by the officer conducting the meeting, shall be absent from the discussion and vote. However, an interested Board member or an interested officer may state a policy position relevant to the matter under consideration, explain the transaction or affiliation, and answer questions from Board members relating to the matter.

\_\_\_\_\_ I **do not** have a conflict of interest or duality of interest. I have read this policy and agree to follow it.

\_\_\_\_\_ I **do** have a conflict of interest or duality of interest, as follows:  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ I have read this policy and agree to follow it.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## **Personal Health and Disease Prevention: March 24, 2022**

### **Communicable Disease:**

Covid-19 cases have significantly slowed down. We were able to remove some of our temporary staff that we have had over the past 2-ish years, which was a little bittersweet! We continue to have CDC Foundation staff covering the few cases that do come in. That staff also continues to work on some Covid-19 vaccination outreach efforts.

### **Immunizations/STD/HIV:**

We have not had any further updates at this time on when the new pediatric Covid-19 Pfizer vaccine will become available or Novavax.

Vaccination for Covid-19 has slowed down along with other routine immunizations. Beginning in April, we will integrate our Covid-19 clinics in with our regular immunization days.

I've included some STD data by age below that was requested at the last BOH meeting.

### **Women, Infant, and Children (WIC):**

We are still looking for a new Supervisor and WIC Coordinator position at our Hillsdale County location. We are seeking a full-time BSN candidate.

This year for our Maternal Child Health (MCH) Grant we were able to write in outreach activities with media/social media to deliver messaging and hopefully reach a larger number of tri-county residents on the importance of safe sleep. We designed a billboard/poster that will run for a 1-month period in each county ranging from end of April to beginning of June. I've included the image we designed below. This grant also makes it possible for us to provide pack-n-plays and sleep sacks to those who need them.

The formula recall is still a work in progress. The state WIC programs continues to make updates and changes to add additional formulas/alternatives to accommodate clients as much as possible. Unfortunately, it's still very difficult for some to get formula at this time. This is a nation-wide issue, not just Michigan. At this time the Sturgis plant is still shutdown while the FDA investigation is completed.

The public health emergency extension for WIC which allows us to operate services remotely currently runs until mid-July. We have not had any updates yet on if this will continue beyond that time frame.

### **Children's Special Health Care Services (CSHCS), Lead, and Hearing & Vision:**

The CSHCS Family Center for Children and Youth with Special Health Care Needs is now providing family support services to siblings of children with special health care needs who reside in Michigan.

**Kali Nichols MPH  
Personal Health & Disease Prevention Director**

# Sleep Right, Sleep Tight



**A**lone  
**B**ack  
**C**rib



[bhsj.org/safesleep](https://bhsj.org/safesleep)



## Cases by Age: 10/01/21-03/01/2022

	<1 yr	1-4 yrs	5-9 yrs	10-14 yrs	15-19 yrs	20-24 yrs	25-29 yrs	30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	55-59 yrs	60-64 yrs	65-69 yrs	>70 yrs
Chlamydia	0	0	0	2	46	40	40	16	13	8	1	2	0	0	0	0
Gonorrhea	0	0	0	1	3	11	21	14	12	5	1	4	0	1	0	0

**Branch - Hillsdale - St. Joseph Community Health Agency  
Personal Health and Disease Prevention**

February-22 Confirmed & Probable Case Totals	2021-2022				FYTD 2021-2022				2020-2021 FYTD			
	BR	HD	SJ	Total	BR	HD	SJ	Total	BR	HD	SJ	Total
Animal Bite/Rabies potential exposure	2	3	-	5	7	26	-	33	15	20	-	35
Brucellosis	-	-	-	-	-	-	-	-	-	-	1	1
Campylobacter	2	1	-	3	5	4	3	12	-	2	5	7
Chicken Pox	-	-	-	-	-	-	-	-	-	-	-	-
Chlamydia	10	5	12	27	47	39	76	162	48	43	68	159
Coccidioidomycosis	-	-	-	-	-	-	1	1	-	-	-	-
CRE Carbapenem Resistant Enterobac.	-	-	-	-	1	-	-	1	-	-	-	-
Cryptosporidiosis	1	-	-	1	1	-	1	2	-	-	1	1
Encephalitis - Primary	-	-	-	-	-	-	-	-	-	-	-	-
Giardiasis	-	-	-	-	-	1	3	4	-	-	-	-
Gonorrhea	2	-	3	-	12	16	45	73	22	34	35	91
H. Influenzae Disease - Inv.	3	-	-	3	3	-	-	3	-	1	-	1
Hepatitis B - Acute	-	-	-	-	-	-	-	-	-	-	1	1
Hepatitis B - Chronic	1	-	-	1	1	-	-	1	1	-	-	1
Hepatitis C - Acute	-	-	-	-	2	-	-	2	-	-	1	1
Hepatitis C - Chronic	-	1	2	3	8	1	4	13	10	4	5	19
Hepatitis C Unknown	-	-	-	-	-	-	-	-	-	-	-	-
Histoplasmosis	-	-	-	-	1	-	1	2	-	-	-	-
HIV/AIDS	1	-	-	1	2	-	2	4	-	-	-	-
Influenza	18	13	33	64	81	119	50	250	-	-	-	-
Kawasaki	-	-	-	-	-	-	-	-	-	-	-	-
Legionellosis	-	-	-	-	-	1	-	1	-	-	-	-
Lyme Disease	-	-	-	-	-	1	1	2	-	-	-	-
Measles	-	-	-	-	-	1	-	1	-	-	-	-
Menengitis - Aseptic	-	-	1	1	-	-	1	1	-	-	-	-
Menengitis - Bacterial	-	-	-	-	-	-	-	-	-	-	-	-
Meningococcal Disease	-	-	-	-	-	-	-	-	-	-	-	-
Mumps	-	-	-	-	-	-	-	-	1	-	-	1
Mycobacterium - Other	-	-	-	-	2	3	2	7	-	1	-	1
Norovirus	1	-	-	1	1	-	-	1	-	1	-	1
Novel Coronavirus	424	456	468	1,348	5,176	4,735	5,976	15,887	3,125	2,990	3,877	9,992
Pertussis	-	1	-	1	-	4	-	4	-	-	-	-
Salmonellosis	-	-	-	-	1	1	1	3	3	-	-	3
Scabies	-	-	-	-	-	-	-	-	3	-	-	3
Shiga Toxin-prod. (STEC)	-	-	-	-	1	1	-	2	-	-	-	-
Staphylococcus Aureus Infect.	-	-	-	-	-	-	-	-	-	-	-	-
Strep Invasive Gp A	-	-	-	-	-	-	-	-	-	-	1	1
Strep Pneumonia Inv Ds.	-	3	1	4	1	6	1	8	1	1	1	3
Strep Pneumoniae, Drug Res.	-	-	-	-	-	-	-	-	-	-	-	-
Syphilis - Primary	1	-	-	1	1	-	-	1	-	-	-	-

**Branch - Hillsdale - St. Joseph Community Health Agency  
Personal Health and Disease Prevention**

	Feb-21					YTD 2021-2022					YTD 2020-2021				
	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total
<b>CHILD IMMUNIZATIONS</b>															
# Vaccines Given CHA	86	85	-	21	192	785	806	-	640	2,231	430	642	87	453	1,612
All VFC Doses Given	592	282	-	555	1,429	3,621	1,956	-	3,596	9,173	4,161	2,916	-	5,063	12,140
Waivers	9	4	1	2	16	37	62	11	45	155	19	22	6	13	60
<b>ADULT IMMUNIZATIONS</b>															
# Vaccines Given	258	35	-	45	338	3,072	1,479	-	1,240	5,791	4,958	3,412	14	6,510	14,894
All AVP Doses Given	7	23	-	18	48	45	255	-	83	383	89	46	-	100	235
<b>TRAVEL VACCINATIONS</b>															
Branch Office	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>COMMUNICABLE DISEASE</b>															
TB Tests Done	4	7	-	-	11	25	48	-	5	78	37	43	-	4	84
New LTBI on Rx	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
															-
STD treatments	-	4	-	3	7	15	19	2	55	91	-	13	1	13	27
New STD Investigations	13	7	-	15	35	45	43	-	103	191	70	78	-	104	252
HIV Testing	-	-	-	3	3	-	-	2	13	15	-	1	2	2	5
<b>ENROLLMENTS</b>															
Medicaid & Michild	1	-	-	-	1	4	1	-	2	7	-	-	-	-	-
<b>REFERRAL SERVICE</b>															
MCDC Referrals	4	-	2	12	18	40	-	29	84	153	35	128	34	68	265
MIHP referrals	38	-	29	22	89	156	21	79	105	361	80	14	106	97	297
<b>Hearing Screens</b>															
Pre-school	-	11	-	6	17	54	185	64	38	341	-	177	-	347	524
School Age	149	181	-	416	746	599	607	489	1,340	3,035	654	633	-	1,433	2,720
<b>Vision Screens</b>															
Pre-school	-	12	-	1	13	85	214	-	79	378	-	187	-	391	578
School Age	675	469	-	738	1,882	2,571	1,473	-	2,898	6,942	1,821	1,399	-	1,783	5,003
<b>Children's Special Health Care Services</b>															
Diagnostics	1	-	-	1	2	5	4	-	2	11	4	5	-	-	9
Assessments-Renewal	18	19	-	15	52	85	84	-	88	257	69	98	-	110	277
Assessments-New	2	6	-	5	13	-	26	-	26	52	-	20	-	29	49