



**Mission:** To promote hope, recovery, resilience, quality of life and wellness in Washtenaw County by providing high quality, integrated services to eligible individuals.

## WASHTENAW COUNTY COMMUNITY MENTAL HEALTH (WCCMH) BUDGET-FINANCE COMMITTEE MEETING AGENDA

**This meeting will be held by video conference due to the recent State of Michigan legislature allowing public boards and commissions to meet virtually.**

<https://zoom.us/j/92139462329>

January 11, 2021

2:00-3:00pm

- I. Roll Call (5 minutes)
- II. Introductions (5 minutes)
- III. Audience Participation (see guidelines below) (5 minutes)
- IV. Budget-Finance and Program-Quality Combined Committee meeting minutes (5 minutes)
  - Budget-Finance Committee Meeting Minutes and Actions from 12/14/20 (Attachment #1) **ACTION**
- V. Finance Status Reports (10 minutes)
  - Financial Status Report (Attachment #2) **N. Phelps ACTION**
- VI. Contracts and Leases
  - None
- VII. Regional Finance Update (5 minutes)
- VIII. Old Business
  - None
- IX. New Business (20 minutes)
  - WCCMH Balance Sheet Review **N. Phelps**
  - WCCMH FY 2021 Budget Amendment (Attachment #3) **N. Phelps ACTION**
- X. Items for Future Discussions (5 minutes)
  - Staffing and Provider Discussion-Special Budget-Finance and Program-Quality Combined Committee Meeting in February
- XI. Adjournment of Public Meeting

**The link to attend this meeting remotely is <https://zoom.us/j/92139462329>**

**Or join by phone:**

**Dial(for higher quality, dial a number based on your current location):**

**US: +1 929 205 6099 or +1 267 831 0333 or +1 312 626 6799 or +1 646 518 9805**

**Webinar ID: 921 3946 2329**

**International numbers available: <https://zoom.us/j/92139462329>**

Audience Participation Guidelines:

- Three (3) minutes are allowed per speaker
- Speakers are asked to bring a copy of their concerns/comments in writing
- Resolutions on issues will be brought to the appropriate committee as necessary

**WASHTENAW COUNTY COMMUNITY MENTAL HEALTH AGENCY (WCCMH)  
WCCMH BUDGET-FINANCE AND PROGRAM-QUALITY COMBINED  
COMMITTEE MEETING MINUTES *DRAFT***

Due to the recent State of Michigan legislature allowing public meetings and commissions to meet virtually, this meeting was held remotely

<https://zoom.us/j/98325707051>

December 14, 2020

1:00 pm

ROLL CALL:

NAME	BUDGET-FINANCE COMMITTEE MEMBER	PROGRAM-QUALITY COMMITTEE MEMBER	ATTENDING REMOTELY FROM:
S. ANTONOW		X	Ann Arbor, Washtenaw County, MI
A. DUSBIBER	X	X	Ann Arbor, Washtenaw County, MI
N. GRAEBNER	X	X	Chelsea, Washtenaw County, MI
B. HIGMAN		X	Ann Arbor, Washtenaw County, MI
B. KING	X		Ann Arbor, Washtenaw County, MI
D. STRONG	X		Scio Township, Washtenaw County, MI
K. WALKER		X	Pittsfield Township, Washtenaw County, MI

MEMBERS ABSENT: K. Scott, R. Jefferson

STAFF PRESENT: T. Cortes, N. Phelps, S. Ray, R. Dornbos, M. Harding, L. Higle, L. Gentz, T. Florence, H. Linky, M. Taylor, S. Amos O'Neal, K. Diebboll

OTHERS PRESENT: L. Lutomski, S. Lefferts, G. Dill, K. Belknap, M. Creekmore, J. Martin, K. Homan, G. Nelson

N. Graebner called the meeting to order at 1:04 pm

- I. Introductions
  - None
- II. Audience Participation
  - None
- III. Board Response to Audience Participation
  - None
- IV. Budget-Finance Committee Meeting Minutes and Actions from 11/9/20
  - Budget-Finance Committee Minutes and Actions of 11/9/20 were reviewed.

**MOTION BY D. STRONG, SUPPORTED BY A. DUSBIBER TO APPROVE THE MINUTES AND ACTIONS FROM THE NOVEMBER 9, 2020 BUDGET-FINANCE COMMITTEE MEETING.**

ROLL CALL VOTE:

DUSBIBER	Y	GRAEBNER	Y
JEFFERSON	N/A	KING	Y
SCOTT	N/A	STRONG	Y

**MOTION CARRIED**

- V. Program-Quality Committee Meeting Minutes and Actions from 11/9/20
  - Program-Quality Committee Minutes and Actions of 11/9/20 were reviewed.

**MOTION BY K. WALKER, SUPPORTED BY A. DUSBIBER TO APPROVE THE MINUTES AND ACTIONS FROM THE NOVEMBER 9, 2020 PROGRAM-QUALITY COMMITTEE MEETING.**

**ROLL CALL VOTE:**

ANTONOW	Y	DUSBIBER	Y
GRAEBNER	Y	HIGMAN	Y
SCOTT	N/A	WALKER	Y

**MOTION CARRIED**

- VI. Finance Status Reports
  - N. Phelps reviewed the financial status report for the month ending October 31, 2020.
  - Medicaid enrollees were 35,512 in October 2020. This is 1,299 more than this time last year.
  - Healthy Michigan enrollees were 19,990 in October 2020. This is 3,284 more than this time last year.
  - Medicaid consumers served through October 2020 are 2,303. This is 14 more consumers served than the same period last year.
  - ABA waiver consumers served through October 2020 are 119. This is 8 less consumers served than the same period last year.
  - General Fund consumers served through October 2020 were 330. This is 33 less consumers than the same period last year.
  - Healthy Michigan consumers served through October 2020 are 330. This is 33 less consumers served than the same period last year.
  - CLS service costs to date are \$1.8 Million. This is \$441,000 under budget. The temporary \$2 per hour direct care worker increase is reflected in the FY21 Actuals for the month of October. The temporary increase has been extended until December 2020.
  - Community Inpatient costs to date are \$411,000. This is \$36,000 under budget.
  - Licensed Residential costs to date are \$1.0 Million. This is \$69,000 over budget. The temporary \$2 per hour direct care worker increase is reflected in the FY21 Actuals for the month of October. The temporary increase has been extended until December 2020.
  - Applied Behavior Analysis/Autism services costs to date are \$408,000. This is \$16,000 over budget.
  - Internal staffing expenses continue to trend on budget.
  - A significant amount of General Fund is used to supplement Medicaid deductibles for our consumers on a spend-down. The amount spent through October 2020 is \$13,000.
  - Financial performance by funding source:
    - Medicaid is showing a surplus of \$1.2 Million through October 2020.
    - Healthy Michigan is showing a surplus of \$76,000 through October 2020.
    - Combined, the PIHP surplus is \$1.2 Million through October 2020.

- State General Funds is showing a surplus of \$62,000.
- Local Funds is showing a surplus of \$7,000 through October 2020.
- WCCMH has no fund balance available for fiscal year 2021.
- A budget amendment will be presented at the January meeting to account for the temporary direct care worker increase and the pass-through funding being received.
- An accrual has been incorporated in the Medicaid revenue line for just over \$500,000 to account for the \$2 direct care worker pass-through. A payment has been received for November and should be getting one in the next few weeks.
- K. Walker asked about the autism services and if there have been any ABA providers that are able to continue to provide the same level of services as they were before. Are they conducting telehealth or in-person? N. Phelps will bring this detail to the December Board meeting.

**MOTION BY B. KING, SUPPORTED BY D. STRONG TO APPROVE THE FINANCIAL STATUS REPORT THROUGH OCTOBER 31, 2020 AS PRESENTED.**

**ROLL CALL VOTE:**

DUSBIBER	Y	GRAEBNER	Y
JEFFERSON	N/A	KING	Y
SCOTT	N/A	STRONG	Y

**MOTION CARRIED**

- VII. Contracts and Leases
  - There were no contracts and leases for this month.
- VIII. Executive Director Authorizations
  - There were no Executive Director Authorizations for this month.
- IX. Regional Finance Update
  - N. Phelps and T. Cortes presented the Regional Finance Update to the committee.
  - The Direct Care worker pass-through will be incorporated in the budget amendment at the January 2021 meeting.
- X. Old Business
  - None
- XI. New Business
  - WCCMH Staffing and Provider Discussion and Presentation
    - T. Cortes, T. Florence, H. Linky and N. Phelps presented the WCCMH Staffing and Provider Presentation to the committee.
    - T. Cortes stated that the intention of this presentation is to get the Board updated on what areas of concern are with staffing and the Provider Network.
    - To inform the Board about the potential risks associated with the hiring freeze and staffing levels and the fragility of the Provider Network.
    - Identify the budgetary concerns and unknowns as it relates to the ability to respond to the potential risks.
    - Risk points for WCCMH as it pertains to staffing and the provider network
      - CMH staffing levels
        - a. Hiring freeze June 2019-current (Currently there are 28 positions held and not posted/filled)

- i. Increased case loads
      - ii. Navigating COVID
      - iii. Inability to recruit and retain
    - Provider network is very fragile
      - a. Direct care worker shortage
        - i. Insufficient wages and reimbursement rates
        - ii. Providers paying excessive overtime not covered in reimbursement rates
        - iii. COVID related struggles, exposure, and quarantines.
    - Increasing administrative requirements for WCCMH and providers
  - Pressures on the Provider Network
    - Direct care worker crisis
      - a. Wages/staying competitive
      - b. Turnover
      - c. Overtime costs
      - d. COVID issues/exposures/quarantines
    - Increased administrative burdens
      - a. Increase in regulatory compliance requirements
      - b. Loss of middle management due to budgetary constraints
      - c. Burden of remote working and providing asks/documentation
  - The CMH budget is looking better this year than it has in a very long time. There are still potential issues that could skew the budget. At some point the Medicaid eligibles will begin to trend back down which in turn will have the revenue trending down.
  - CCBHC demonstration site revenues have continued discussions. Earliest implementation date is April 2021 and latest would be October 2021. There is not much information and discussion coming forward from the State on the CCBHC due to the concern over the COVID second wave.
  - Regional strategy on Internal Service Fund vs paying down prior year cost settlements
  - Impact of the \$2 direct care worker increase if it does not extend past December 31, 2020. May not receive notification on this extension until end of December to the first part of January.
  - T. Florence stated that the clinical teams are feeling stressed across the board. High intensity teams are feeling a lot of stress. It is hard to be proactive when there are more reactive needs because of the fewer staff and the Public Health protocols. We are still really trying to meet people on their own terms and can meet face to face if requested. ACT is going to homes to provide service. Youth and Family is providing intensive service as well as the I/DD side as needed. Each time there is a move made to shift staff there seem to be additional obstacles that come up that need to be addressed.
  - B. King expressed concern that if the direct care worker \$2 increase extension does not pass then what is the backup plan for CMH. T. Cortes stated that the PIHP Regional Board did approve a 1-time \$2 hour wage increase. The Region has discussed surveying the Provider Network for any possible solutions. F. Brabec will be starting in her recently elected position in the legislative level in January and she was given the opportunity to introduce 10 bills and 1 of these bills is for the \$2 direct care worker increase. B. King asked for a plan to potentially have a larger ISF specifically for continuing the direct care worker wages if this is not continued by the state.

- B. King expressed his gratitude for all of the work the staff are doing, and he is under the impression that we are losing a fair amount of staff due to wages. Suggestion to work with the County to discuss wage increases.
- D. Strong stated that the Leadership Team might need to think about traditional CMH as an integrated package with Millage/CCBHC and CMH. T. Cortes stated that the PI Indicators will most likely not be as compliant as in previous years due to the COVID pandemic. One of the indicators is the 95% of the individuals get an assessment within 14 days and this has been a struggle. D. Strong suggested turnover rates/time to fill data to see if there is an increase in this. D. Strong asked about an update on the study of CMH that was conducted by the County in 2019 and if this has been completed. T. Cortes stated that this study has been completed and this information can be shared at the next meeting.
- K. Walker asked about clinical based programs that have fidelity standards associated with them and if there has been work on this issue. T. Cortes stated that there is an option to hire temporary staff to cover FMLA however this has been a struggle to find candidates for this. T. Florence stated that some staff have been moved over but a lot of this has been moved to the clinical leadership with some moved to other programs to help. T. Cortes stated that this was the 2<sup>nd</sup> round of massive administrative reductions from 2015 and there has not been any new staff added to this team.
- J. Martin requested that staff prioritize action steps for the board to act on such as the direct care worker pass-through, hiring staff (how to fund this), reserves and the flexibility in this year's budget.
- D. Strong supported asking the staff to bring forward a schedule of what is needed. T. Cortes stated that this is something that can be brought forward at the next meeting.
- N. Phelps suggested bringing this to a combined meeting for discussion.
- B. King asked if Kona Medical Consulting can go back to a determined amount of time. N. Phelps stated that this is dependent on the payer schedule. Kona will start working on the items that we have already submitted and will follow up with them.
- T. Cortes wanted to acknowledge how fragile the provider network is and how they have managed during all of this is extraordinary. Staff continue to meet with the provider advisory group and there are some improvements in training reciprocity.
- Suggestion to see a different slicing of 28 position vacancies and what financial impact this would have on the organization.
- Decision to have a special combined meeting in February. R. Dornbos will send out calendar invitations to everyone.

XII. Items for Future Discussions

- Diversion Council Update
- Staffing and Provider Discussion-special combined meeting in February

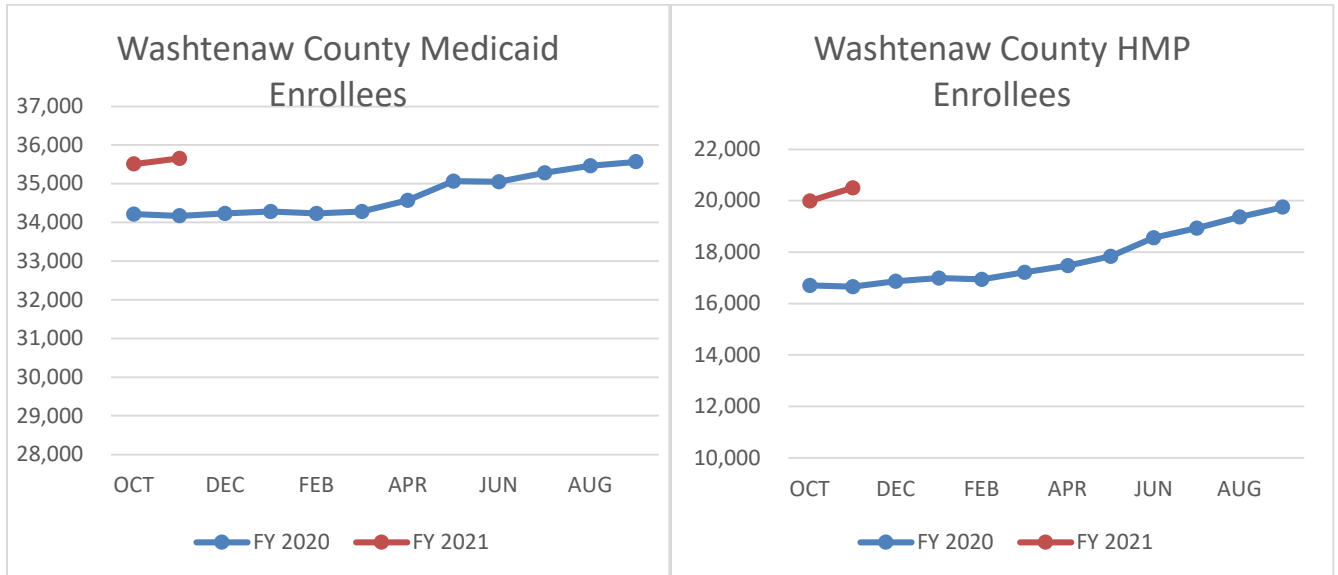
**MOTION BY K. WALKER, SUPPORTED BY D. STRONG TO ADJOURN THE BUDGET-FINANCE AND PROGRAM-QUALITY COMMITTEE COMBINED MEETING.**

XIII. Meeting adjourned at 2:24 pm.

**WASHTENAW COUNTY COMMUNITY MENTAL HEALTH  
YEAR-TO-DATE FINANCIAL STATUS  
FISCAL YEAR 2021: For the period ending November 30, 2020  
Prepared: January 4, 2021**

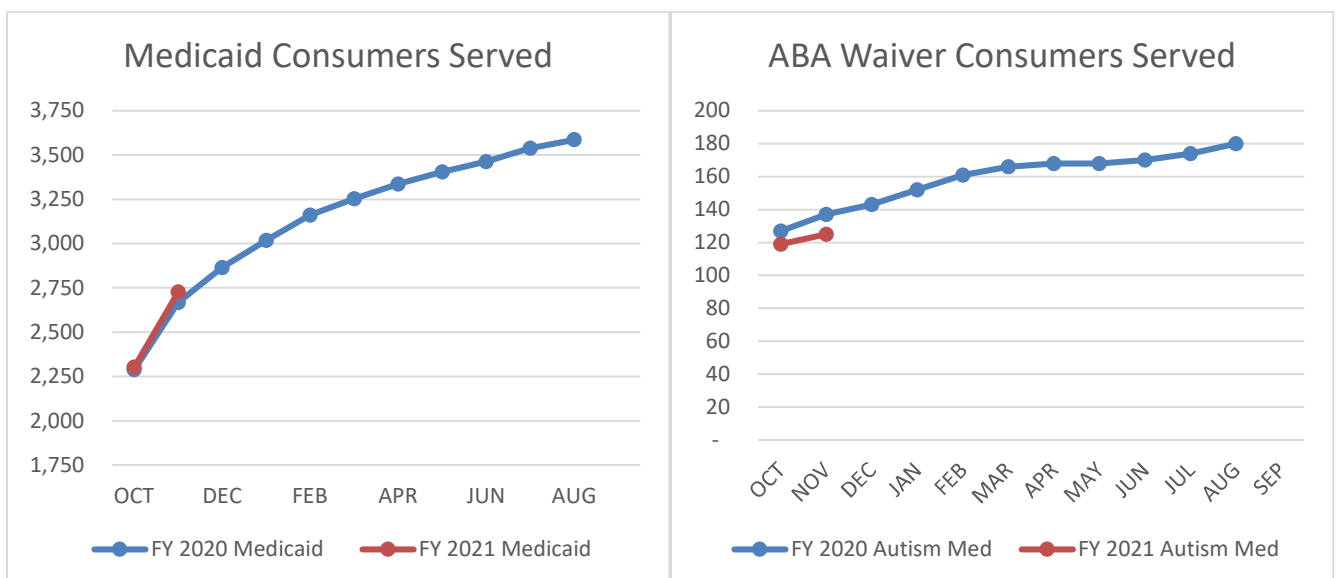
**1. Washtenaw County Enrollees**

A summary of FY 2020 Washtenaw County Medicaid and Healthy Michigan Enrollees is shown below:



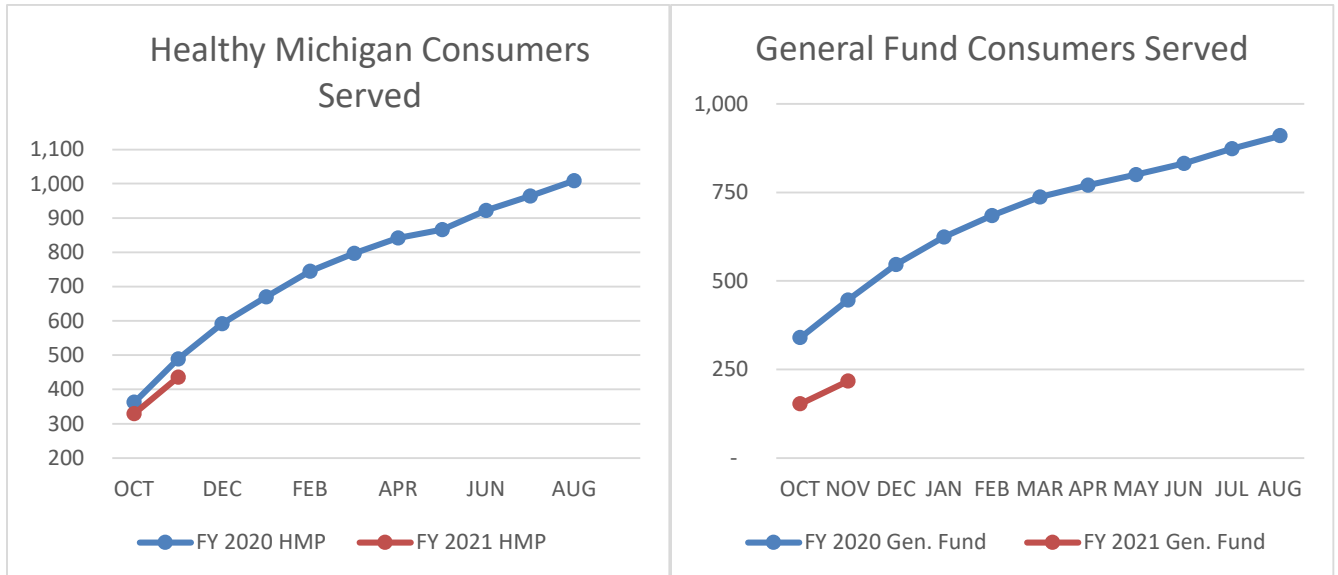
Washtenaw County Medicaid Enrollees were 35,657 in November 2020. This is a 4.35% increase from the same time last year (1,485 more enrollees than in November 2019). Healthy Michigan enrollment in November 2020 was 20,506. This is a 23.09% increase from the same time last year (3,846 more enrollees than in November 2019).

**2. WCCMH Consumers Served to Date**



Medicaid consumers served through November 2020 are 2,727. This is 60 more consumers than the prior year (2,667 consumers were served through November 2019).

ABA Waiver consumers served through November 2020 are 125. This is 12 less consumers than the prior year (137 consumers were served through November 2019).



Healthy Michigan consumers served through November 2020 were 436. This is 53 less consumers than the same period last year.

General Fund consumers served through November 2020 were 218. This is 228 less consumers than the same period last year.

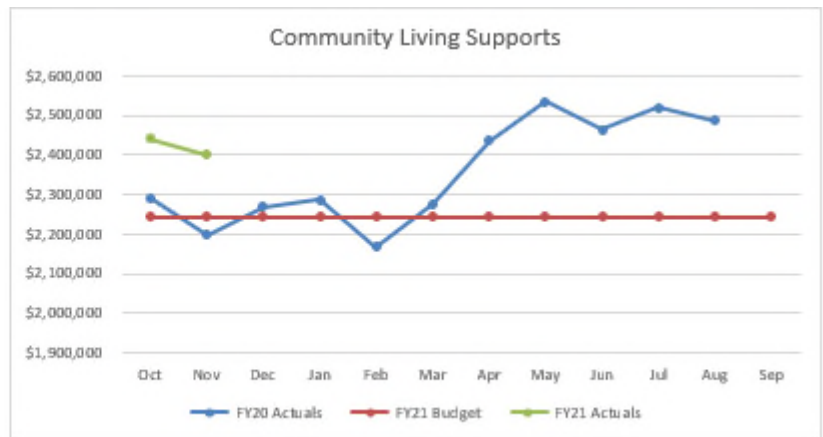


**3. Financial Statement Highlights**

- a. CLS service costs to date are \$4.8 Million. The costs year to date are 16.86% higher than November 2019. This is \$350,000 over budget. The temporary \$2 per hour direct care worker increase is reflected in the FY21 Actuals for the month of November. The temporary increase has been extended until December 2020.

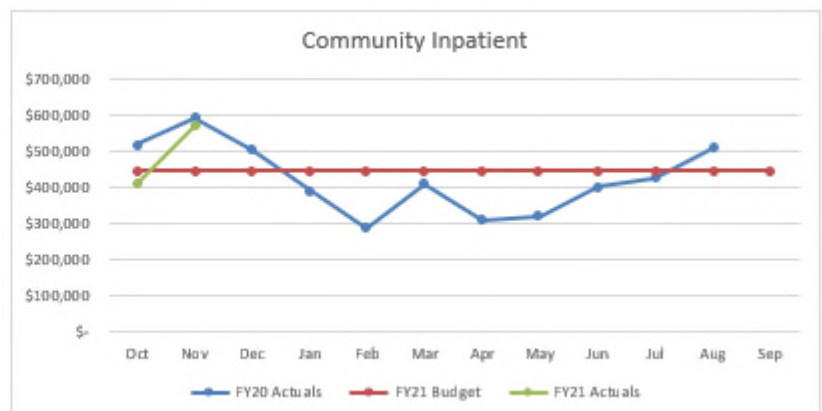
The CLS graph below represents the FY21 Budget, FY20 Actuals and FY21 Actuals which include a substantial accrual to account for CLS claims not yet processed and paid for the months of October and November.

	FY20			YTD %
	Actuals	FY21 Budget	FY21 Actuals	Change
Oct	\$ 2,290,691	\$ 2,244,000	\$ 2,440,597	6.54%
Nov	2,198,453	2,244,000	2,400,000	7.83%
Dec	2,269,119	2,244,000		
Jan	2,287,654	2,244,000		
Feb	2,166,793	2,244,000		
Mar	2,276,977	2,244,000		
Apr	2,436,420	2,244,000		
May	2,535,453	2,244,000		
Jun	2,462,540	2,244,000		
Jul	2,518,980	2,244,000		
Aug	2,486,795	2,244,000		
Sep		2,244,000		



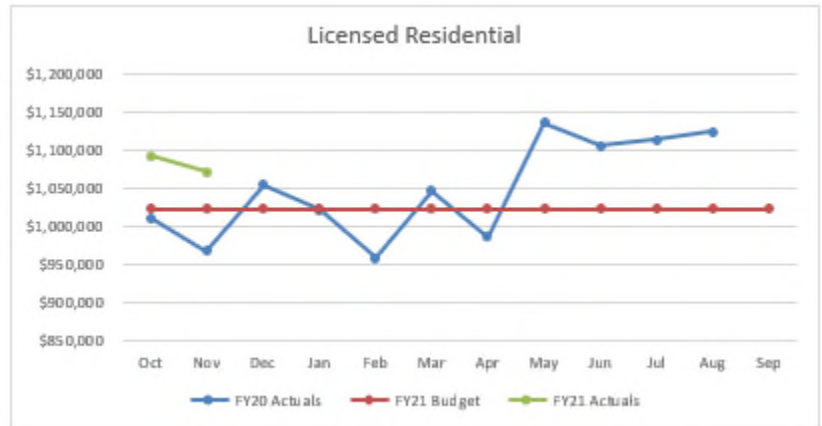
- b. Community Inpatient costs to date are \$983,000. The costs year to date are 11.6% less than last year as of November 2019. This is \$87,000 over the budget.

	FY20			YTD %
	Actuals	FY21 Budget	FY21 Actuals	Change
Oct	\$ 518,019	\$ 447,917	\$ 411,150	-20.63%
Nov	595,144	447,917	572,178	-11.66%
Dec	506,426	447,917		
Jan	393,137	447,917		
Feb	290,304	447,917		
Mar	411,873	447,917		
Apr	310,948	447,917		
May	323,671	447,917		
Jun	402,174	447,917		
Jul	426,500	447,917		
Aug	512,121	447,917		
Sep		447,917		



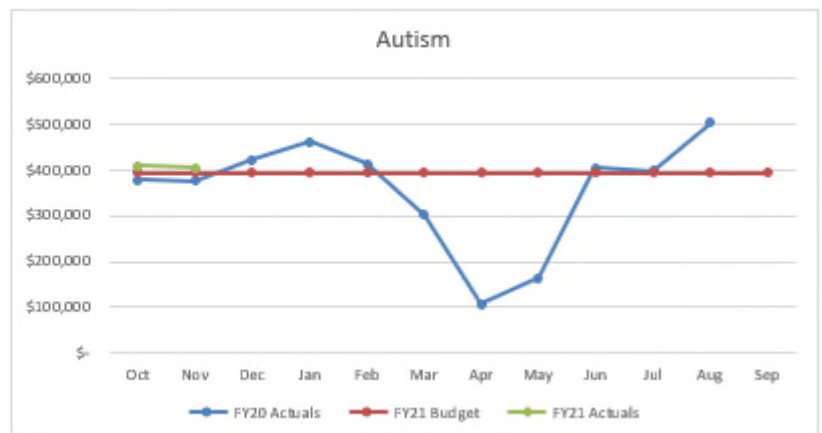
- c. Licensed Residential costs to date are \$2.1 Million. The costs year to date are 9.4% more than last year as of November 2019. This is \$111,000 over the budget. The temporary \$2 per hour direct care worker increase is reflected in the FY21 Actuals for the month of November. The temporary increase has been extended until December 2020.

	FY20 Actuals	FY21Budget	FY21Actuals	YTD % Change
Oct	\$ 1,011,548	\$ 1,023,758	\$ 1,093,095	8.06%
Nov	968,709	1,023,758	1,073,263	9.40%
Dec	1,055,503	1,023,758		
Jan	1,022,251	1,023,758		
Feb	959,842	1,023,758		
Mar	1,047,035	1,023,758		
Apr	987,543	1,023,758		
May	1,137,635	1,023,758		
Jun	1,106,832	1,023,758		
Jul	1,114,786	1,023,758		
Aug	1,124,986	1,023,758		
Sep		1,023,758		



- d. Applied Behavior Analysis/Autism service costs to date are \$812,000. The costs year to date are 7.85% more than last year as of November 2019. This is \$29,000 over the budget.

	FY20 Actuals	FY21Budget	FY21Actuals	YTD % Change
Oct	\$ 377,299	\$ 391,820	\$ 408,109	8.17%
Nov	376,345	391,820	404,662	7.85%
Dec	421,658	391,820		
Jan	461,206	391,820		
Feb	412,563	391,820		
Mar	301,850	391,820		
Apr	107,090	391,820		
May	165,001	391,820		
Jun	404,100	391,820		
Jul	397,582	391,820		
Aug	500,967	391,820		
Sep		391,820		



- e. Internal staffing expenses continue to trend on budget.

- f. A significant amount of General Fund is used to supplement Medicaid deductibles for our consumers on a spend-down. The amount spent through November 2020 is \$23,000.

**4. PIHP Revenue Key Points**

- a. Medicaid and Healthy Michigan Plan revenues are collected from the PIHP.
- b. By funding source, Medicaid is showing a surplus of \$1.7 Million through November.
- c. By funding source, HMP is showing a surplus of \$52,000 through November.
- d. Combined, the PIHP surplus is \$1.7 Million through November.

**5. State General Fund Key Points**

- a. General Fund programs and funding redirected to other Risk-Based programs is showing a surplus of \$35,000.

**6. Local Key Points**

- a. The majority of Local Funding comes from Washtenaw County.
- b. Local Funds are showing a surplus of \$18,000 through November 2020.
- c. Uses of Local Funding include:
  - i. The 10% GF Match of non-residential services
  - ii. Local contribution – required by MDHHS
  - iii. Local share for State Facilities
  - iv. Shelter expenses and other Local needs

**7. Fund Balance**

WCCMH currently has no fund balance available for fiscal year 2021.

Washtenaw County Community Mental Health  
FINANCIAL PERFORMANCE BY FUND SOURCE  
 NOV 2020 FYTD

	Total
<b>Medicaid **</b>	
<b>Revenue</b>	
B & B3	\$ 8,231,567.00
HSW	4,038,963.44
Child Waiver/SED Waiver	147,761.48
Autism	776,306.80
Prior Year Adjustments	-
Care for Caid	-
Total Medicaid Revenue	\$ 13,194,598.72
Total Medicaid Expense	\$ 11,458,924.08
Medicaid Surplus/(Deficit)	\$ 1,735,674.64

<b>Healthy Michigan **</b>	
Revenue	\$ 959,333.00
Expense	906,554.10
Healthy MI Surplus/(Deficit)	\$ 52,778.90

<b>General Fund</b>	
<b>Revenue</b>	
CMH Operations	\$ 645,405.00
CMH Operations Contra	-
GF Carryforward	-
Categorical	-
Redirect To Injectable Meds.	(9,598.07)
Funding Fr. Other Local Sources	(1,114.10)
Total General Fund Revenue	\$ 634,692.83
Total General Fund Expense	\$ 599,402.01
General Fund Surplus/(Deficit)	\$ 35,290.82

<b>Injectable Meds</b>	
Revenue	\$ 9,598.07
Expense	9,598.07
Inj. Meds. Surplus/(Deficit)	\$ -

<b>Grants And Contracts</b>	
Revenue	\$ 169,061.81
Expense	169,061.82
Grants & Cont. Surplus/(Deficit)	\$ -

Washtenaw County Community Mental Health  
FINANCIAL PERFORMANCE BY FUND SOURCE  
 NOV 2020 FYTD

	Total
<b>CMHSP To CMHSP</b>	
Revenue	\$ 44,996.28
Redirect to GF	1,114.10
Expense	46,110.38
CMHSP to CMHSP Surplus/(Deficit)	\$ -
<b>Local</b>	
Revenue	\$ 256,194.31
Expense	237,351.76
Local Surplus/(Deficit)	\$ 18,842.55
<b>Private Grant &amp; All NOR</b>	
Revenue	\$ 28,459.73
Expense	28,459.73
Priv. Grant & NOR Surplus/(Deficit)	\$ -
<b>Grand Total</b>	
Revenue	\$ 15,310,243.89
Expense	13,468,771.09
Grand Total Surplus/(Deficit)	\$ 1,841,472.79

\*\* Denotes PIHP Medicaid Subcontracting Agreement Funds

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PIHP Medicaid Surplus/(Deficit)	\$ 1,788,453.54
WCCMH Surplus/(Deficit)	\$ 54,133.37
	\$ 1,842,586.90

Washtenaw County Community Mental Health  
Budget to Actuals  
For Two Months Ending November 30, 2020

Current Fiscal Year					
	FY 2021 Budget	FY 2021 Budget YTD	FY 2021 YTD Actuals	YTD Actuals Over/(Under) YTD Budget	% O(U)
<b>Operating Revenue</b>					
<b>PIHP Revenue</b>					
Medicaid Capitation:					
State Plan/B3	\$ 42,789,402	\$ 7,131,567	\$ 8,231,567	\$ 1,100,000	15.42%
HSW	24,902,700	4,150,450	4,038,963	(111,487)	-2.69%
Children & SED Waivers	894,097	149,016	147,761	(1,255)	-0.84%
Healthy Michigan Capitation	5,755,998	959,333	959,333	-	0.00%
Autism Capitation	4,657,841	776,307	776,307	0	0.00%
<b>TOTAL PIHP Revenue</b>	<b>\$ 79,000,038</b>	<b>\$ 13,166,673</b>	<b>\$ 14,153,931</b>	<b>\$ 987,258</b>	<b>7.50%</b>
<b>MDHHS Revenue</b>					
State General Funds	\$ 3,872,431	\$ 645,405	\$ 645,405	\$ (0)	0.00%
Grants & Earned Contracts	1,779,812	296,635	169,062	(127,573)	-43.01%
<b>All Other Revenue</b>					
County Appropriation	\$ 1,748,770	\$ 291,462	\$ 291,462	\$ 0	0.00%
Project Revenue	782,545	130,424	90,024	(40,400)	-30.98%
All Other	1,917,652	319,609	723,855	404,246	126.48%
<b>TOTAL Operating Revenue</b>	<b>\$ 89,101,248</b>	<b>\$ 14,850,208</b>	<b>\$ 16,073,739</b>	<b>\$ 1,223,531</b>	<b>8.24%</b>
<b>Operating Expenses</b>					
<b>Administrative Expenses</b>					
General Administration	\$ 5,624,552	\$ 937,425	\$ 765,899	\$ (171,526)	-18.30%
Program Administration	3,304,826	550,804	509,257	(41,547)	-7.54%
<b>Residential Services</b>					
Community Living Supports	\$ 26,928,000	\$ 4,488,000	\$ 4,840,597	\$ 352,597	7.86%
Licensed Residential	12,285,100	2,047,517	2,166,328	118,811	5.80%
<b>Outpatient Services</b>					
Autism Services	\$ 4,701,840	\$ 783,640	\$ 812,771	\$ 29,131	3.72%
Case Management	5,221,985	870,331	761,259	(109,072)	-12.53%
Supports Coordination	2,535,741	422,624	352,903	(69,721)	-16.50%
Skill Building	4,256,172	709,362	338,321	(371,041)	-52.31%
Supported Employment	1,364,871	227,479	216,767	(10,712)	-4.71%
Psychiatry	2,770,122	461,687	412,533	(49,154)	-10.65%
Nursing Services	2,353,003	392,167	312,277	(79,890)	-20.37%
Therapy Services	1,875,621	312,604	286,164	(26,440)	-8.46%
All Other	7,441,765	1,240,294	1,094,906	(145,388)	-11.72%
<b>Other Expenses</b>					
Community Inpatient	\$ 5,375,000	\$ 895,833	\$ 983,328	\$ 87,495	9.77%
Local Matches & Shelter	1,282,838	213,806	208,780	(5,026)	-2.35%
Grants & Earned Contracts	1,779,812	296,635	169,062	(127,573)	-43.01%
<b>TOTAL Operating Expenses</b>	<b>\$ 89,101,248</b>	<b>\$ 14,850,208</b>	<b>\$ 14,231,152</b>	<b>\$ (619,056)</b>	<b>-4.17%</b>
Revenue Over/(Under) Expenses	-	-	1,842,587	1,842,587	

Washtenaw County Community Mental Health  
Budget to Actuals  
For Two Months Ending November 30, 2020

	Prior Year Comparison			
	FY 2021 YTD Actuals	FY 2020 Prior YTD Actuals	YTD Actuals Over/(Under) Prior YTD Actuals	% O(U)
<b>Operating Revenue</b>				
<b>PIHP Revenue</b>				
Medicaid Capitation:				
State Plan/B3	\$ 8,231,567	\$ 6,657,225	\$ 1,574,342	23.65%
HSW	4,038,963	3,459,128	579,835	16.76%
Children & SED Waivers	147,761	-	147,761	
Healthy Michigan Capitation	959,333	757,017	202,316	26.73%
Autism Capitation	776,307	762,662	13,645	1.79%
TOTAL PIHP Revenue	\$ 14,153,931	\$ 11,636,032	\$ 2,517,899	21.64%
<b>MDHHS Revenue</b>				
State General Funds	\$ 645,405	\$ 584,969	\$ 60,436	10.33%
Grants & Earned Contracts	169,062	246,775	(77,713)	-31.49%
<b>All Other Revenue</b>				
County Appropriation	\$ 291,462	\$ 166,348	\$ 125,114	75.21%
Project Revenue	90,024	104,293	(14,269)	-13.68%
All Other	723,855	351,484	372,371	105.94%
<b>TOTAL Operating Revenue</b>	<b>\$ 16,073,739</b>	<b>\$ 13,089,901</b>	<b>\$ 2,983,838</b>	<b>22.79%</b>
<b>Operating Expenses</b>				
<b>Administrative Expenses</b>				
General Administration	\$ 765,899	\$ 914,704	\$ (148,805)	-16.27%
Program Administration	509,257	415,185	94,072	22.66%
<b>Residential Services</b>				
Community Living Supports	\$ 4,840,597	\$ 4,142,227	\$ 698,370	16.86%
Licensed Residential	2,166,328	1,980,257	186,071	9.40%
<b>Outpatient Services</b>				
Autism Services	\$ 812,771	\$ 753,644	\$ 59,127	7.85%
Case Management	761,259	712,239	49,020	6.88%
Supports Coordination	352,903	341,903	11,000	3.22%
Skill Building	338,321	1,003,702	(665,381)	-66.29%
Supported Employment	216,767	311,149	(94,382)	-30.33%
Psychiatry	412,533	399,549	12,984	3.25%
Nursing Services	312,277	327,612	(15,335)	-4.68%
Therapy Services	286,164	275,788	10,376	3.76%
All Other	1,094,906	1,035,408	59,498	5.75%
<b>Other Expenses</b>				
Community Inpatient	\$ 983,328	\$ 1,113,163	\$ (129,835)	-11.66%
Local Matches & Shelter	208,780	195,767	13,013	6.65%
Grants & Earned Contracts	169,062	229,579	(60,517)	-26.36%
<b>TOTAL Operating Expenses</b>	<b>\$ 14,231,152</b>	<b>\$ 14,151,878</b>	<b>\$ 79,275</b>	<b>0.56%</b>
Revenue Over/(Under) Expenses	1,842,587	(1,061,977)	2,904,563	

Washtenaw County Community Mental Health  
Fiscal Year 2021  
Budget Amendment  
WCCMH Finance Committee - 1/11/2021

	<u>FY 2021 Original Budget</u>	<u>FY 2021 Amended Budget</u>	<u>Amended Over/(Under) Original Budget</u>
<b>Operating Revenue</b>			
<b>PIHP Revenue</b>			
Medicaid Capitation:			
Medicaid (b) & 1115i	\$ 42,789,402	\$ 42,789,402	\$ -
HSW	24,902,700	24,902,700	-
Children & SED Waivers	894,097	894,097	-
Healthy Michigan Capitation	5,755,998	5,755,998	-
Autism Capitation	4,657,841	4,657,841	-
CARES Act DCW	-	1,679,127	1,679,127
<b>TOTAL PIHP Revenue</b>	<b>\$ 79,000,038</b>	<b>\$ 80,679,165</b>	<b>\$ 1,679,127</b>
<b>MDHHS Revenue</b>			
State General Funds	\$ 3,872,431	\$ 3,872,431	\$ -
Grants & Earned Contracts	1,779,812	1,779,812	-
<b>All Other Revenue</b>			
County Appropriation	\$ 1,748,770	\$ 1,748,770	\$ -
Project Revenue	782,545	782,545	-
All Other	1,917,652	1,917,652	-
<b>TOTAL Operating Revenue</b>	<b>- \$ 89,101,248</b>	<b>\$ 90,780,375</b>	<b>\$ 1,679,127</b>
<b>Operating Expenses</b>			
<b>Administrative Expenses</b>			
General Administration	\$ 5,624,552	\$ 5,624,552	\$ -
Program Administration	3,304,826	3,304,826	-
<b>Residential Services</b>			
Community Living Supports	\$ 26,928,000	\$ 28,021,975	\$ 1,093,975
Licensed Residential	12,285,100	12,700,200	415,100
<b>Outpatient Services</b>			
Autism Services	\$ 4,701,840	\$ 4,871,892	\$ 170,052
Case Management	5,221,985	5,221,985	-
Supports Coordination	2,535,741	2,535,741	-
Skill Building	4,256,172	4,256,172	-
Supported Employment	1,364,871	1,364,871	-
Psychiatry	2,770,122	2,770,122	-
Nursing Services	2,353,003	2,353,003	-
Therapy Services	1,875,621	1,875,621	-
All Other	7,441,765	7,441,765	-
<b>Other Expenses</b>			
Community Inpatient	\$ 5,375,000	\$ 5,375,000	\$ -
Local Matches & Shelter	1,282,838	1,282,838	-
Grants & Earned Contracts	1,779,812	1,779,812	-
<b>TOTAL Operating Expenses</b>	<b>\$ 89,101,248</b>	<b>\$ 90,780,375</b>	<b>\$ 1,679,127</b>
Revenue Over/(Under) Expenses	-	-	-