

## Detroit Wayne Integrated Health Network

707 W. Milwaukee St. Detroit, MI 48202-2943 Phone: (313) 833-2500

www.dwihn.org FAX: (313) 833-2156

TDD: (800) 630-1044 RR/TDD: (888) 339-5588

Finance Committee Meeting
Wednesday, July 6, 2022
St. Regis Hotel 3071 W. Grand Blvd.
Detroit, Michigan 48202
1:00 p.m.
AGENDA

- I. Call to Order
- II. Roll Call
- III. Committee Member Remarks
- IV. Approval of Agenda
- V. Follow-Up Items
- VI. Approval of Minutes June 13, 2022
- VII. Presentation of the Monthly Finance Report
- VIII. Strategic Plan Pillar Finance/IT
- IX. Unfinished Business:

Staff Recommendations:

a. BA #22-12 (Revision 6) – Detroit Wayne Integrated Health Network (DWIHN) FY2021-2022 Operating Budget

X. New Business:

Staff Recommendations: None

#### XI. Good and Welfare/Public Comment

Members of the public are welcome to address the Board during this time for no more than two minutes. (The Board Liaison will notify the Chair when the time limit has been met.) Individuals are encouraged to identify themselves and fill out a comment card to leave with the Board liaison; however, those individuals that do not want to identify themselves may still address the Board. Issues raised during Good and Welfare/Public Comment that are of concern to the general public and may initiate an inquiry and follow-up will be responded to and may be posted to the website. Feedback will be posted within a reasonable timeframe (information that is HIPAA related or of a confidential nature will not be posted but rather responded to on an individual basis).

XII. Adjournment

#### **Board of Directors**



## FINANCE COMMITTEE

**MINUTES** 

**JUNE 13, 2022** 

1:00 A.M.

3701 W. GRAND BLVD. DETROIT, MI 48202 (HYBRID/ZOOM)

MEETING CALLED BY	I. Ms. Dora Brown, Chair, called the meeting to order at 2:0 p.m.
TYPE OF MEETING	Finance Committee Meeting
FACILITATOR	Ms. Dora Brown, Chair
NOTE TAKER	Lillian M. Blackshire, Board Liaison
ATTENDEES	Finance Committee Members Present:  Ms. Dora Brown, Chair  Mr. Kevin McNamara, Vice Chair  Mr. Bernard Parker  Ms. Kenya Ruth  Committee Members Excused: Ms. Eva Garza Dewaelsche  Board Members Present:  Mr. Angelo Glenn, Board Chair  Board Members Excused: None  Staff: Mr. Eric Doeh, CEO; Ms. Stacie Durant, CFO; Ms. Yolanda Turner, Deputy Legal Counsel; Mr. Manny Singla, Chief Network Officer; Ms. Jean Mira, Procurement Manager; Ms. Brooke Blackwell, Chief of Staff; Ms. Ebony Reynolds, Clinical Officer; and Ms. Sheree Jackson, Corporate Compliance Officer  Guests: None

#### **AGENDA TOPICS**

**Roll Call** Ms. Lillian Blackshire, Board Liaison

#### II. Roll Call

Roll Call was taken by the Board Liaison and a quorum was present.

#### III. Committee Member Remarks

The Chair, Ms. Dora Brown called for any Committee remarks. There were no committee remarks.

#### IV. Approval of Agenda

The Chair, Ms. Brown called for a motion on the agenda. There were no changes or modifications requested to the agenda. **Motion:** It was moved by Ms. Ruth and supported by Mr. Parker approval of the agenda. **Motion carried.** 

#### V. Follow-up Items:

There were no follow up items.

#### VI. Approval of the Meeting Minutes

The Chair Ms. Brown called for a motion on the Finance Committee minutes from the meeting of Wednesday, May 4, 2022. **Motion:** It was moved by Mr. Glenn and supported by Mr. Parker approval of the Finance Committee minutes with any necessary corrections from the meeting of Wednesday, May 4, 2022. There were no corrections to the minutes. **Motion carried**. Minutes accepted as presented.

#### VII. Presentation of the Monthly Finance Report

S. Durant, CFO presented the Monthly Finance report. A written report for the seven months ended April 30, 2022 was provided for the record. Network Finance accomplishments and noteworthy items were as follows: None.

It was noted that letters were sent out on Friday to skill building and supportive housing Providers requesting their operating estimates and losses along with their 990's to determine financial stability. Discussion ensued regarding these two lines of business and some of the things that may have impacted these businesses. Discussion ensued regarding General Fund and whether or not DWIHN would be returning monies to the State. It was requested that if available information be provided in July on the General Fund.

Ms. Durant, CFO referred to an article from the Government Finance Officers Association (GFOA) on best practices regarding audit procurement. It was noted that "Governmental entities should enter into multiyear agreements of at least five years in duration when obtaining the services of independent auditors. Such multiyear agreements can take a variety of different forms (e.g., a series of single-year contracts), consistent with applicable legal requirements. Such agreements allow for greater continuity and help to minimize the potential for disruption in connection with the independent audit. Multiyear agreements can also help to reduce audit costs by allowing auditors to recover certain "startup" costs over several years, rather than over a single year. It was also noted in the article that "while there is some belief that auditor independence is enhanced by a policy requiring that the independent audit firm be replaced at the end of each multiyear agreement, unfortunately, the frequent lack of competition among audit firms fully qualified to perform public-sector audits could make a policy of mandatory audit firm rotation counterproductive. In such cases, it is recommended that a governmental entity actively seek the participation of all qualified firms, including the current auditors, assuming that the past performance of the current auditors has proven satisfactory." This information was provided by the CFO in reference to the Board action is on this agenda regarding the procurement of audit services and the Policy Committee agenda where this item will also be addressed.

- A. Cash and Investments comprise of funds held by three (3) investment managers, First Independence CDARS, Comerica, and Flagstar accounts.
- B. Due from other governments comprise various local, state and federal amounts due to DWIHN. The account balance primarily related to \$9.9 million for MDHHS HRA payment and \$3.0 million due from MDHHS for SUD and MH block grant.
- C. Accounts receivable and allowance for uncollectible Approximately \$3.5 million due from Wayne County for 2<sup>nd</sup> quarter PA2. In addition, approximately \$1.0 due from the ICO's for cost settlements; \$1.0 million due from CLS for prior year cost settlement. DWIHN recorded \$.5 million in an allowance for two SUD providers due to length of amount owed and likelihood of collections.

- D. IBNR Payable represents incurred but not reported (IBNR) claims from the provider network; historical average claims incurred through April 30, 2022 including DCW hazard pay and 5% rate increases, was approximately \$415.9 million however actual payments were approximately \$348.4 million. The difference represents claims incurred but not reported and paid of \$68 million.
- E. Due to other governments includes \$8 million due to MDHHS for death recoupment and \$12.3 million for the FY21 hazard pay cost settlement and \$1.8 million due to MDHHS for FY20 general fund carryover in excess of 5%.
- F. Federal revenue/grant program expenses variance due to lack of spending for the \$5.9 million COVID SUD grant and \$3.7 million Tri County Crisis grant. In addition, budget assumes revenues are incurred consistently throughout the year.
- G. Autism, SUD, Adult, IDD, and Children services \$75 million variance due to impact of COVID, the workforce shortages and timing in services and payment (i.e. summer programs, financial stability payment).

There was no further discussion. The Chair, Ms. Brown noted the Monthly Finance Report ended April 30, 2022 was received and filed.

#### VIII. Budget Submission Timeline

A written document was provided for the record. Ms. Durant noted that on July 1, 2022 the initial budget would be submitted to the Finance and PCC committees and any questions were due to the Finance department by July 11, 2022. By July 27, 2022 the budget with responses to the questions would be submitted to the Finance and PCC committees and the Joint Budget Hearing would be held on August 3, 2022. The recommended budget would be presented to the Finance Committee on September 7<sup>th</sup> and to the Full Board on September 21, 2022.

**IX. FY 22 2nd Quarter Board Report for Procurements Non-Competitive Under \$50,000 and All Cooperative Purchasing and Emergency Procurements**— J. Mira reported. A written document was provided to the committee and the record. It was reported that the contract percentage for Wayne County was at 16.61% and out county was 83.39%; the Funding percentage without IT with Wayne County was 68.31% and Out County was 31.69. There was no further discussion. The report was received and filed.

#### X. Strategic Plan Pillar – Workforce

E. Reynolds reported. A written document was provided to the committee and for the record. It was reported that the Workforce Pillar is currently at 75% completion. An overview was provided on the goals that were at 100% completion; it was reported that the implementation of the Workplace Wellness Initiative – staff vaccination clinics were at 100%; also conducting training for Network staff on the impact and importance of social determinants and the impact on health outcomes was currently at 66% however the completion date for this goal is September 30, 2022; the goal was met for 2021. It was also reported that the goal of expanding the NAMI relationship to Provider community-based education and training was currently at 100%; educational information on NAMI is provided at each CIT training which includes trauma training; Mental Health First Aid training and Suicide Prevention training. The goal to increase competencies around Self Determination, shared decision making and person-centered planning is at 95%; the Self-Determination Team holds weekly meetings to provide education, information, and answer any questions regarding Self-Directing services. DWIHN is continuing to deliver Crisis Management Training and this goal is currently at 85% completion. It was also reported there were changes to the Substance

Use Disorder and Clinical Practice Improvement goals. DWIHN is working with the State to bring back the Train the Trainer models. There was no further discussion. The report was received and filed.

#### XI. Unfinished Business – Staff Recommendations:

a. **Board Action #21-72 (Revised)** – **Annual Financial Statement Audits** – **Plante & Moran** The Chair called for a motion. **Motion:** It was moved by Mr. McNamara and supported by Mr. Parker approval of BA #21-72 (Revised) S. Durant, Chief Financial Officer reported. This board action is requesting the approval of a three (3) year contract with a two-year option for renewal for the annual financial statement audit, Single Audit, and Compliance Examination for the fiscal years ended September 30, 2021; 2022; and 2023 consistent with the terms of the RFP. In response to RFP Control #2021-004 issued on 4/27/2021 whereby three proposals were received and evaluated, Plante Moran PLLC was recommended as the most responsive bidder for an amount not to exceed \$461,535 for the three-year period. The board previously approved a one year contract under BA#21-72 for the audits for fiscal year ended September 30, 2021 which has been completed and issued. It was noted this board action was presented last year. Discussion ensued regarding when the board action would come before the board after this approval. There was no further discussion. **Motion carried.** 

b. Board Action #22-12 (Revision 5)- Detroit Wayne Integrated Health Network (DWIHN) FY2021-2022 Operating Budget. The Chair called for a motion. Motion: It was moved by Mr. Glenn and supported by Ms. Ruth approval of BA#22-12 (Revision 5) S. Durant, Chief Operating Officer reported. This revised board action is requesting to certify Federal Grant revenue of \$875,000 per MDHHS authorization of use of State Opioid Response 2 (SOR2), Year 1 unspent funds from FY 2021. The additional funds will be used to enhance opioid disorder and stimulant disorder efforts for the SOR2 campaign. The revised FY2022 Operating budget was noted in the board action. There was no further discussion. Motion carried.

#### XII. New Business – Staff Recommendations:

BA#22-63 Detroit Wayne Integrated Health Network (DWIHN) Mobile Application for Community Engagement – AgreeYa Solutions Inc. The Chair called for a motion. Motion: It was moved by Ms. Ruth and supported by Mr. McNamara approval of BA #22-63. M. Singla, Chief Network Officer reported. This board action is requesting board approval for the development and implementation of a Mobile Application for community use on mobile devices. This application will give users access to Health screenings, resources, education, event calendars and much more. The dollars associated with annual support and maintenance; consulting; design; development and testing and training and instruction was provided in the board action. Discussion ensued regarding the development of the application; the length of time before the application would be ready for use by the community and the benefits of the Application. There was no further discussion. Motion carried.

**XIII.** Good and Welfare/Public Comment – The Chair read the Good and Welfare/Public Comment statement. There were no members of the public to address the committee and there were no public comments.

**XIV. Adjournment** – There being no further business; The Chair, Ms. Brown called for a motion to adjourn. **Motion:** It was moved by Mr. Parker and supported by Ms. Ruth to adjourn the meeting. **Motion carried**. The meeting adjourned at 2:30 p.m.

FOLLOW-UP ITEMS		
a. Provide Gener	al Fund information in July, if available.	

#### DWIHN Division of Management and Budget Monthly Finance Report For the eight months ended May 31, 2022

#### **DWIHN** Finance accomplishments and noteworthy items:

- 1. Consistent with the CPT codes increased on October 1, 2021, DWIHN will be implementing a one-time supplemental retroactive 5% rate increase effective October 1, 2021. The supplemental payment will be paid out in three increments October 1, 2021 March 31, 2022 paid in mid July 2022; April 1 June 30, 2022 paid out mid-September 2022; July 1 September 30, 2022 paid out mid December 2022.
- 2. Effective October 1, 2022, consistent with the CPT codes previously increased, DWIHN will implement a 2.5% rate increase. DWIHN will work with PCE to increase the respective fee schedules in time for the upcoming fiscal year.

#### Financial analysis- (refer to Authority balance sheet and income statement)

Cash flow is very stable and should continue to remain stable throughout the year as liquidity ratio = 3.08.

	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY
DWIHN	2.78	3.17	3.13	3.13	3.13	2.50	2.79	2.49	2.44	2.72	2.75	3.08

- (A) Cash and Investments comprise of funds held by three (3) investment manager, First Independence CDARS, Comerica, and Flagstar accounts.
- (B) Due from other governments comprise various local, state and federal amounts due to DWIHN. The account balance primarily related \$4.0 million due from MDHHS for SUD and MH block grant.
- (C) Accounts receivable and allowance for uncollectible Approximately \$3.2 million due from Wayne County for 2<sup>nd</sup> quarter PA2 and \$1.4 million for the monthly match payment. In addition, approximately \$1.0 due from the ICO's for cost settlements; \$1.0 million due from CLS for prior year cost settlement. DWIHN recorded \$.5 million in an allowance for two SUD providers due to length of amount owed and likelihood of collections.
- (D) IBNR Payable represents incurred but not reported (IBNR) claims from the provider network; historical average claims incurred through May 31, 2022, including DCW hazard pay and 5% rate increases, was approximately \$472.5 million however actual payments were approximately \$414.9 million. The difference represents claims incurred but not reported and paid of \$57.6 million.
- (E) Due to other governments includes \$8 million due to MDHHS for death recoupment, \$12.3 million for the FY21 hazard pay cost settlement and \$1.8 million due to MDHHS for FY20 general fund carryover in excess of 5%.
- (F) Federal revenue/grant program expenses variance due to lack of spending for the \$5.9 million COVID SUD grant and \$3.7 million Tri County Crisis grant. In addition, budget assumes revenues are incurred consistently throughout the year.
- (G) State grants and contracts refer to budget adjustment for \$33 million.
- (H) Autism, SUD, Adult, IDD, and Children services \$64 million variance due to impact of COVID, the workforce shortages and timing in services and payment (i.e. summer programs, financial stability payments).

## DETROIT WAYNE INTEGRATED HEALTH NETWORK

Statement of Net Position As of May 31, 2022

#### **Assets**

Cash and investments Investments in Internal Service Fund	\$ 291,759,368 58,819,685	A A
Other cash and investments	1,000	
Receivables		
Due from other governmental units	4,492,845	В
Accounts receivable	7,670,509	С
Less: allowance for uncollectible	(487,838)	С
Prepayments and deposits	 619,098	
Total current assets	362,874,667	
Capital assets, net of accumulated depreciation	 13,439,848	
Total Assets	\$ 376,314,515	
Liabilities and Net Position		
Liabilities		
Accounts payable	\$ 28,294,652	
IBNR Payable	57,631,592	D
Due to Wayne County	1,093,770	
Due to other governments	24,965,797	Ε
Accrued wages and benefits	243,424	
Unearned revenue	302,749	
Accrued compensated balances	1,357,485	
Total current liabilities	113,889,469	
Notes Payable	 5,053,285	
Total Liabilities	118,942,754	
Net Position		
Net investment in capital assets	8,386,563	
Unrestricted - PA2 funds	6,264,131	
Internal Service Fund	59,717,016	
Unrestricted	 183,004,051	
Total Net Position	 257,371,761	
Liabilities and Net Position	\$ 376,314,515	

# DETROIT WAYNE INTEGRATED HEALTH NETWORK Statement of Revenues, Expenses and Changes to Net Position For the Eight Months Ending May 31, 2022

	May 2022			Year to Date			
	Budget	Actual	Variance	Budget	Actual	Variance	
Operating Revenues						_	
Federal grants	\$ 2,514,402	. , ,	\$ (826,983)		\$ 9,831,024	, , ,	
State grants and contracts	73,642,447	74,414,415	771,968	589,139,575	611,048,186	21,908,611 <b>C</b>	
Prior Year Medicaid savings and GF carryover	-	-	-	-	41,280,671	41,280,671	
MI Health Link	823,844	533,350	(290,494)	6,590,749	6,090,604	(500,145)	
Local grants and contracts	1,830,665	2,288,379	457,714	14,645,324	16,082,416	1,437,092	
Other charges for services	3,333	1,212	(2,121)	26,667	59,200	32,533	
Total Operating Revenues	78,814,691	78,924,775	110,084	630,517,530	684,392,101	53,874,571	
Operating Expenses							
Salaries	2,009,834	1,819,414	190,420	16,033,428	15,115,584	917,844	
Fringe benefits	762,486	711,513	50,974	6,099,892	6,082,147	17,744	
Substance abuse services	4,299,982	6,304,940	(2,004,957)	34,399,859	28,951,435	5,448,425 <b>F</b>	
Autism Services	5,935,353	5,190,083	745,270	47,482,823	40,160,545	7,322,279 <b>F</b>	
MI HealthLink	823,010	692,389	130,621	6,584,082	6,921,503	(337,421)	
Adult Services	24,990,735	23,048,029	1,948,282	199,991,127	179,412,600	20,557,889 <b>F</b>	
Children Services	7,375,936	6,546,633	829,303	59,007,487	41,372,819	17,634,670 <b>F</b>	
Intellectual Developmental Disabled	29,120,281	19,939,966	9,180,315	232,962,249	219,413,298	13,548,951 <b>F</b>	
Grant Programs	1,154,094	173,797	980,297	9,232,753	4,145,496	5,087,257	
State of Michigan	1,652,516	3,123,391	(1,470,875)	13,220,125	13,045,119	175,006	
Depreciation	147,233		147,233	1,177,862	499,260	678,602	
Other operating	626,564	390,907	235,657	4,992,510	3,560,296	1,432,214	
Total Operating Expenses	78,898,024	67,941,062	10,962,539	631,184,197	558,680,102	72,483,459	
Operating Revenues over (under) Expenses	(83,333)	10,983,713	(10,852,455)	(666,667)	125,711,999	126,358,030	
Non-operating Revenues (Expenses)							
Investment Earnings	83,333	361,961	278,628	666,667	(1,133,233)	(1,799,900)	
Contributions					7,220	7,220	
Total Non-operating Revenues (Expenses)	83,333	361,961	(278,628)	666,667	(1,126,013)	1,792,680	
Change in Net Position	-	11,345,674	(11,131,083)	-	124,585,986	128,150,710	
Net Position - Beginning of year			•		132,785,775	132,785,775	
Net Position - End of Year	\$ -	\$ 11,345,674	\$ (11,131,083)	\$ -	\$ 257,371,761	\$ 260,936,485	

## DETROIT WAYNE INTEGRATED HEALTH NETWORK Statement of Cash Flows For the Eight Months Ending May 31, 2022

Cash flows from operating activities  Cash receipts from the state and federal governments  Cash receipts from local sources and customers	\$ 642,893,223 16,141,616
Payments to employees	(580,545,451) (22,368,507)
Net cash provided by (used in) operating activities	56,120,881
Cash flows from capital and related financing activities  Acquisition of capital assets	(978,649)
Principle and interest paid on capital debt	(181,953)
Net cash provided by (used in) capital and related financing activities	(1,160,603)
Cash flows from investing activities Interest received on investments	(1,133,233)
Proceeds from sale of assets	7,220
Net cash provided by investing activities	(1,126,013)
Net increase (decrease) in cash and cash equivalents	53,834,265
Cash and investments - beginning of period	296,745,788
Cash and investments - end of period	\$ 350,580,053
Reconciliation of operating income (loss) to net cash provided by (used in) operating activities	
Operating income (loss)	\$ 125,711,999
Adjustments to reconcile operating income (loss) to net cash used in operating activities:	
Depreciation Decreases (increases) in current assets:	499,260
Accounts receivable	(316,851) (243,701)
Accounts receivable Prepayments and deposits Due from other governmental units	(316,851) (243,701) 16,798,543
Accounts receivable Prepayments and deposits	(243,701) 16,798,543 (102,810,626)
Accounts receivable Prepayments and deposits Due from other governmental units Increases (decreases) in current liabilities: Accounts and contracts payable IBNR Payable	(243,701) 16,798,543 (102,810,626) 57,631,592
Accounts receivable Prepayments and deposits Due from other governmental units Increases (decreases) in current liabilities: Accounts and contracts payable IBNR Payable Accrued wages	(243,701) 16,798,543 (102,810,626) 57,631,592 (881,795)
Accounts receivable Prepayments and deposits Due from other governmental units Increases (decreases) in current liabilities: Accounts and contracts payable IBNR Payable	(243,701) 16,798,543 (102,810,626) 57,631,592
Accounts receivable Prepayments and deposits Due from other governmental units Increases (decreases) in current liabilities: Accounts and contracts payable IBNR Payable Accrued wages Due to Wayne County	(243,701) 16,798,543 (102,810,626) 57,631,592 (881,795) 1,093,770
Accounts receivable Prepayments and deposits Due from other governmental units Increases (decreases) in current liabilities: Accounts and contracts payable IBNR Payable Accrued wages Due to Wayne County Due to other governmental units	(243,701) 16,798,543 (102,810,626) 57,631,592 (881,795) 1,093,770 477,644
Accounts receivable Prepayments and deposits Due from other governmental units Increases (decreases) in current liabilities: Accounts and contracts payable IBNR Payable Accrued wages Due to Wayne County Due to other governmental units Unearned revenue  Net cash provided by (used in) operating activities  Bank balance comprise the following @ May 31, 2022:	(243,701) 16,798,543 (102,810,626) 57,631,592 (881,795) 1,093,770 477,644 (41,838,954) \$ 56,120,881
Accounts receivable Prepayments and deposits Due from other governmental units Increases (decreases) in current liabilities: Accounts and contracts payable IBNR Payable Accrued wages Due to Wayne County Due to other governmental units Unearned revenue  Net cash provided by (used in) operating activities	(243,701) 16,798,543 (102,810,626) 57,631,592 (881,795) 1,093,770 477,644 (41,838,954)
Accounts receivable Prepayments and deposits Due from other governmental units Increases (decreases) in current liabilities: Accounts and contracts payable IBNR Payable Accrued wages Due to Wayne County Due to other governmental units Unearned revenue  Net cash provided by (used in) operating activities  Bank balance comprise the following @ May 31, 2022: Flagstar (\$2.1 million restricted for loan account)	(243,701) 16,798,543 (102,810,626) 57,631,592 (881,795) 1,093,770 477,644 (41,838,954) \$ 56,120,881



July 6, 2022

# **Strategic Plan - Finance Pillar**

Finance Committee Status Report

## **Table of Contents**

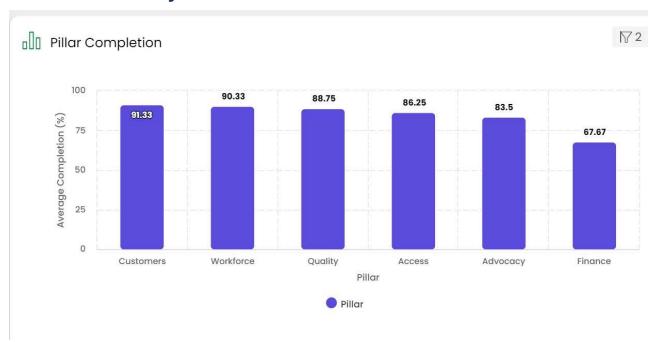
Strategic Plan – Finance Pillar	_ 1
To our board members:	_ 2
Pillar Summary	_ 3
Summary of Pillar Status	_ 3
Finance Pillar	5

## To our board members:

Our commitment to social responsibility includes a dedication to transparency, collaboration and stakeholder engagement as a core component of our business and sustainability strategy, our monthly reporting process, and our activities within the county.

Our Strategic Planning Status Report is our report to our board members. It tells how we are performing against key indicators that measure our performance against the Finance and Workforce pillars, and how Information Technology goals impact in the areas that matter most to our stakeholders.

## **Pillar Summary**



There are two (2) pillars that are under the governance of the Finance Committee: Finance and Workforce as well as reporting out the status of Information Technology goals and objectives.

## **Summary of Pillar Status**

**Workforce Pillar** reporting is under the leadership of the Chief Clinical Officer, Melissa Moody. Overall, we are at 86% completion on this pillar. There are two (2) high-level organizational goals under this pillar. Create Happy, Healthy and Engaged Workforce and to Create a learning health system.

Title	Completion
Create a happy, healthy and engaged workforce: 100 Unit by 30th Sep 2022	90%
Create a learning health system by 30th Sep 2022	81%

**Information Technology** reporting falls under the leadership of the Chief Information Officer, Manny Singla. The IT update provided by the CIO indicates we are at 94% overall achievement in addressing 35 targeted objectives across all Pillars. Key initiatives being addressed are in Developing and Implementing an Automated Provider Scorecard -Risk

Matrix, collaborating with Finance in developing a financial forecasting model, this is going to take few more iterations because of changes that the Department is implementing in terms of introducing several programs including Certified Community Behavioral Health Clinic(CCBHC), Opioid Health Home (OHH), Behavioral Health Home (BHH) that blend in current funding models along with some supplemental funding. A significant initiative for DWIHN that is now at 95% complete is the implementation of Vital Data which is the care coordination platform along with population health analytics. This is the enterprise platform that we are rolling out to the entire network along with our health plan partners. IT has completed the project with Utilization Management to develop a system to track over/under utilization. Also, IT successfully reached a critical goal focused on achieving our aim to be on our TOTAL HIE (Health Information Exchange) platform with our major providers (CRSPS) by the new fiscal year.IT in working closely with business units is working on Mobile App for the DWIHN to create a better outreach and connect with the community along with using it as part of mobile crisis intervention and mobility service delivery. IT in working closely with Access and Crisis Team and Jail and Courts leadership has developed platform that will be used to cover gaps in service delivery, engagement with providers and members as they get released from Jail along with better compliance around Assisted Outpatient Treatment (AOT) orders.

**Finance** is under the leadership of Stacie Durant, CFO. Overall, we are at 68% completion on this pillar. There are three (3) high-level goals. They range from 44% - 83% completion.



The detailed report for this pillar will follow.

## **Finance Pillar**

**Detailed Dashboard** 

Finance Committee Meeting

July 2022





### DWIHN FY 2020 - 2022 STRATEGIC PLAN

#### FINANCE

Goal	Owner	Co-own	Task	Update	System	Current
Maximize efficiencies/control costs		-			No activity recorded	83%

Goal	Owner	Co-own	Task	Update	System	Current
->Implement a risk-based /value-based funding model: 100%	Stacie Durant   CFO	Dhannetta Brown		The AMI hospitalization incentive model was accepted and approved by MDHHS on February 2, 2021. The model will be implemented across the thirteen largest AMI case management providers. It is a shared savings incentive model. There are 3 tiers:  Tier 1 - 30% of any savings will be shared with the provider based upon the providers FY19 levels  Tier 2 - 50% of any savings will be shared with the provider based upon the providers FY18 levels  Tier 3 - 50% of network savings will be shared with the top three (3) providers with the lowest metric based upon the FY20 levels  Challenges: No value  03/23/2021	NEW Dhannetta Brown on 03/23/2021 Progres s: 50% ▶ 100%	100%
->Replenish our Internal Service Fund (ISF) to maximize savings for risk at 7.5%: 7.5%	Stacie Durant   CFO	Dhannetta Brown	Replenish ISF for FY 2021 In FY 21 DWIHN replenished its Medicaid Internal Service Fund (ISF) in the amount of \$59.7 million or 7.5%	<ul> <li>✓ NEW Allison Smith:</li> <li>Update: In FY 21 DWIHN replenished its Medicaid Internal Service Fund (ISF) in the amount of \$59.7 million or 7.5%</li> <li>Challenges: No value 06/16/2022</li> </ul>	NEW Allison Smith on 06/16/2022 Progres s: 0%  7.5%	100%

Goal	Owner	Co-own	Task	Update	System	Current
Collaborate with Finance in developing a financial forecasting model: 100%	Manny Singla   CNO/CIO	Stacie Durant		NEW Allison Smith:  Update: DWIHN anticipates developing a forecasting model in FY 2023.  Challenges: No value 06/16/2022	NEW Allison Smith on 04/15/2021: Progres s: 44%  > 50%	50%
Ensure Facilities Management		-			No activity recorded	76%
—>Sell existing properties: 3 Unit	Brooke Blackwell   Chief of Staff (COS)	-		Brooke Blackwell: Sold Highland Park - May 2019 Sold W. Grand Blvd - Oct 2019 Puritan Wyoming - Sale in Progress Feb 2020	NEW Allison Smith on 06/26/2020: Progres s: 2.76 unit ▶ 3 unit	100%
—>Rehab existing properties: 2 Unit	Brooke Blackwell   Chief of Staff (COS)	-		NEW Allison Smith: Update: DWIHN Care Center groundbreaking was held on Wednesday 6/22/2022. Challenges: No value 06/28/2022	NEW Allison Smith on 06/28/2022: Progres s: 1.36 Unit ▶ 1.5 Unit	75%

Goal	Owner	Co-own	Task	Update	System	Current
Build/acquire/rernew administration facility: 0.02225 Unit to 34 Unit	Blackwell   Chief of	-			NEW Brooke Blackwell on 04/15/2021:  Raised Risk Due to COVID- 19 this project is on hold.	54%
Ensure fiscal accountability internally and of partners: 100%				NEW Allison Smith:  Update: DWIHN Risk Matrix ScoreCard implementation captures Provider financial information to allow for monitoring and analysis. The 2nd and 3rd quarters of FY 21 were obtained and analyzed. Analyses of the retrospective provider data does not indicate any going concern issues  Challenges: No value 06/28/2022	No activity recorded	44%

Goal	Owner	Co-own	Task	Update	System	Current
	Toni Jones   Audit Supervisor	Dhannetta Brown		Update: Provider financial information for the 2nd and 3rd quarters of FY 21 were obtained and analyzed. Analyses of the retrospective provider data does not indicate any going concern issues. DWIHN continues to urge providers to submit financial data in a timely manner.  Internally, DWIHN has received unqualified opinions on its financial statement/single audit from the external auditors throughout the duration of the current strategic plan.  Challenges: No value 06/16/2022	NEW Toni Jones on 06/16/2022:  Completed Task PE 6.30.21 Monitor the financial solvency of all providers assigned to Audit Supervisor (Toni Jones)	44%







### **MANNY SINGLA**

#### DWIHN FY 2020 - 2022 STRATEGIC

Goal	Details	Owner	Co-owners	Task	Update	System Up	Current Co
Create a satellite network: 100%	Providing services to people directly in our communities - DWIHN to ensure each FY that there is adequate Providers contracted to meet needs across all of Wayne County.	Manny Singla   CNO/CIO	-		NEW Manny Singla: Expanded the service array by implementing Clinical programs including Certified Community Behavioral Health Clinic (CCBHC), Opioid Health Homes that will extend Access, Care coordination. We have also enabled partnership with multiple Health plans to ensure care coordination and holistic care models covering both physical and behavioral health services can be provided. As part of this rollout we also enabled a care coordination platform to avoid data duplication and certified HEDIS measures as part of measuring quality of services.  10/08/2021	Manny Singla on 10/08/2021: Progress: 79% ► 85%	<b>85%</b> <b>85.33 / 100%</b> 15% behind
Deliver New Printing and Copier Soulution		Manny Singla   CNO/CIO	-		NEW Nasr Doss: On June 2019 DWIHN vendor Canon installed new multifunctional printers on all floors in both locations 707 Milwaukee and NCO locations. 01/27/2021	Nasr Doss on 01/27/2021: Progress: 0% ▶ 100%	100% -

Goal	Details	Owner	Co-owners	Task	Update	System Up	Current Co
Deliver Go-Live of Medversant Credentialing and Impaneling Plan Software	This goal was to deliver Medversant Credentialing and Impanelling system as part of NCQA standards for the DWIHN Credentialing team to start bringing all the providers and associated practitioners including CRSP,Residential, Staffing agents through a single credentialing process and solution.	Manny Singla   CNO/CIO	Nasr Doss		Nasr Doss: The Medversant system is live as of February 2020. All Providers and associated practitioners are expected to be entered and credentialed through the Medversant system by December 2020.  07/14/2020	Nasr Doss on 07/14/2020: Progress: 98% ► 100%	100% -
Deliver HEDIS and Population Health Reporting Software		Manny Singla   CNO/CIO	Nasr Doss		NEW Manny Singla: HEDIS tool has been implemented and also the user received the training. 01/28/2021	Manny Singla on 01/28/2021: Progress: 95% ► 100%	100% -
Deliver IPOS/Authorization process in MHWIN		Manny Singla   CNO/CIO	-		NEW Manny Singla: We have implemented a complete HIE for all our CRSP providers. This has been a significant accomplishment as we receive all plans in an electronic IPOS along with all authorizations which get routed through various queues through approval process. We also implemented Service Utilization Guidelines that these authorizations that fall within the guidelines get approved and provide a very robust and consistent response for providers to provide and bill services. It also ensures all authorizations are in line with medical necessity and are documented in IPOS /Addendums.	Manny Singla on 09/30/2020: Progress: 76% ► 100%	100% -
Deliver New Provider Directory		Manny Singla   CNO/CIO	-		NEW Manny Singla: The directory rollout is complete and is maintained through weekly electronic updates.  04/22/2021	Manny Singla on 04/22/2021: Progress: 95% ▶ 100%	100% -

Goal	Details	Owner	Co-owners	Task	Update	System Up	Current Co
Deliver Research and implement project on how telemedicine can be used to advance and extend services		Manny Singla   CNO/CIO	-		NEW Manny Singla: Rolled out Technology equipment across Residential, Children and other providers including Laptops, Ipads and Prepaid Internet service to ensure there is ability to provide robust telehealth service delivery as well as ensure providers are better prepared to address electronic data capture including EVV and other initiatives in near future.  10/08/2021	Manny Singla on 10/08/2021: Progress: 82% ▶ 100%	100% -
all the social, economic, spiritual, physical, dental, behavioral, and	( NCQA 2017 QI 9) (NCQA 2020 QI8) Look at Wellops and Altarum - 411 #	Manny Singla   CNO/CIO	Jacquelyn Davis		NEW Manny Singla: The referral process was rolled out after the pilot across all applicable lines of business .  10/08/2021	Allison Smith on 05/04/2022: Progress: 92% ► 100%	100% 100 / 100% -
Deliver I.T. orientation for new hires		Manny Singla   CNO/CIO	-		NEW Manny Singla: IT Onboarding process along with policy and procedures was developed along with HR department. We also instituted several checks to account for onboarding and offboarding procedures to ensure we have checks have balances in place.  09/30/2020	Manny Singla on 09/30/2020: Progress: 98% ▶ 100%	100% -
Deliver New Re-Designed Member and Advocacy Friendly dwmha.com website		Manny Singla   CNO/CIO	-		NEW Manny Singla: A new website was designed and developed with assistance from various departments who helped contribute content in line with mission and vision of the organization.  09/30/2020	Manny Singla on 09/30/2020: Progress: 0% ► 100%	100% -
Deliver New Intranet website		Manny Singla   CNO/CIO	-		NEW Nasr Doss: A new intranet on the Office 365 platform has been created and updated manually by communications and IT to inform staff of current events and operational updates.  01/27/2021	Nasr Doss on 01/27/2021: Progress: 0% ▶ 100%	100% -
Deliver End User Self Service for Password Resets		Manny Singla   CNO/CIO	-		NEW Manny Singla: Self service password reset process and was rolled out to entire staff.  09/30/2020	Manny Singla on 09/30/2020: Progress: 0% ► 100%	100% -

Goal	Details	Owner	Co-owners	Task	Update	System Up	Current Co
Deliver Research and Implement Solarwinds vs. ManageEngine for system monitoring		Manny Singla   CNO/CIO	-		NEW Manny Singla: Post evaluation , Manage Engine was implemented to manage the system monitoring .  09/30/2020	Manny Singla on 09/30/2020: Progress: 0% ► 100%	100% -
Deliver Expanded Remote Access VPN Capacity and Capability		Manny Singla   CNO/CIO	-		NEW Manny Singla: VPN capability was expanded to ensure all users have access to connect remotely. 09/30/2020	Manny Singla on 09/30/2020: Progress: 99% ▶ 100%	100% -
Deliver Replacement Windows 7 to Windows 10		Manny Singla   CNO/CIO	-		NEW Nasr Doss: Prior to the COVID stay at home orders DWIHN IT delivered laptops loaded with Windows 10 to all staff which allowed them to work remotely during the stay at home orders.  01/27/2021	Nasr Doss on 01/27/2021: Progress: 0% ► 100%	100% -
Deliver Company Wide Microsoft Teams for chat and collaboration		Manny Singla   CNO/CIO			NEW Manny Singla: Microsoft Teams infrastructure and service was rolled out to the entire network that has been critical in terms of creating a connected work environment across all our departments and also with external stakeholders. This has been a critical tool during these trying times of Covid pandemic.	Manny Singla on 09/30/2020: Progress: 0% ► 100%	100% -
Deliver Replace current Board Portal with Directorpoint		Manny Singla   CNO/CIO	-		NEW Manny Singla: Board portal was successfully migrated to Director point and additional changes were made to enable a better end user experience by providing members with tablets and better internet access through infrastructure improvements in the building to have dedicated wifi.  09/30/2020	Manny Singla on 09/30/2020: Progress: 0% ► 100%	100% -
Establish means to enable interoperability using Health Information Exchange to share care plans across providers: 100	Will help facilitate NCQA CC 1	Manny Singla   CNO/CIO	-		NEW Manny Singla: All CRSP providers are now on the HIE platform 09/30/2020	Manny Singla on 09/30/2020: Progress: 75 ▶ 100	100% 100 / 100 -
Ensure all technology aspects are addressed to ensure connectivity, redundancy and access for mission critical operations: 100%		Manny Singla   CNO/CIO	Nasr Doss	Page 25 of 32	NEW Allison Smith: New enhancements are being made to MH-WIN to notify a CRSP when someone presents to the ER so that they can get involved with the member early in the crisis episode.  02/03/2022	Allison Smith on 02/03/2022: Progress: 80% ▶ 90%	<b>90%</b> <b>90 / 100%</b> 1% behind

Goal	Details	Owner	Co-owners	Task	Update	System Up	Current Co
Establish data exchange between MHWIN and Jail Health Care System: 100%		Manny Singla   CNO/CIO	-		NEW Nasr Doss: Currently DWIHN gives the analytics vendor (WIT) a weekly update to the data used in this project (mainly claims and member demographics) so it can be analyzed on near real time.  04/23/2021	Nasr Doss on 04/23/2021: Progress: 75% ▶ 80%	<b>80%</b> <b>80 / 100%</b> 20% behind
Provide tools and support to ensure providers have more meaningful experience: 100%	IT to provide tools and support to ensure providers have more meaningful experience. NCQA UM 10	Manny Singla   CNO/CIO	-		NEW Nasr Doss: A lot of enhancements have been implemented to MHWIN to ensure providers have more meaningful experience, the disenrollment module is one of them that assist providers in following the reengagement policy on a timely manner. 3 Pilot providers concluded a testing of the module and full implementation is scheduled for the month of Aug 2021.  08/04/2021	Nasr Doss on 08/04/2021: Progress: 85% ► 88%	<b>88%</b> <b>88 / 100%</b> 12% behind
Improve level of support by conducting regularly scheduled system training across network: 100%	support by conducting regularly	Manny Singla   CNO/CIO	-		NEW Manny Singla: A new care coordination platform is going to be piloted with providers along with HEDIS quality measures to ensure we are providing care in a holistic fashion and using a outcomes and data driven approach	Nasr Doss on 08/04/2021: Progress: 84% ▶ 85%	<b>85%</b> <b>85 / 100%</b> 15% behind
Assist Utilization Management in developing a system that helps tracks over and under Utilization: 100%	IT to assist in developing Utilization and forecasting models for finance's review.	Manny Singla   CNO/CIO	-		NEW Nasr Doss:  We now have Health Information Exchange (HIE) process that transfers various datasets from the major CRSP systems to MHWIN. IT also worked and still working (because this is a Continuous quality improvement matter) with UM and Residential departments on generating various authorizations reports to assist them to analysis over and under utilization.  03/03/2021	Nasr Doss on 03/03/2021: Progress: 95% ► 100%	100% 100 / 100% -
Deliver Annual HEDIS measures to support NCQA requirements: 100%	•IT to help develop HEDIS measures to support NCQA requirements NCQA QI 11	Manny Singla   CNO/CIO	Jacquelyn Davis		NEW Allison Smith: Currently, the Vital Data system is up and running in production mode and is capable of generating all NCQA required HEDIS measures.  01/12/2022	Allison Smith on 01/12/2022: Progress: 95% ▶ 100%	100% 100 / 100% -

Goal	Details	Owner	Co-owners	Task		Update	System Up	Current Co
Enable Interoperability using HIE to share data between care coordinating agencies, providers, health plans, hospitals to provide the provider the holistic view of the health of the individual.: 100%	NCQA CC 1	Manny Singla   CNO/CIO	-			NEW Nasr Doss: Our goal is to achieve TOTAL HIE (Health Information Exchange) platform with our major providers (CRSPS) by the new fiscal year 2021.  09/30/2020	Allison Smith on 01/12/2022: Progress: 95% ▶ 100%	100% 100 / 100% -
Collaborate with Finance in developing a financial forecasting model: 100%		Manny Singla   CNO/CIO	Stacie Durant			NEW Allison Smith: Update: DWIHN anticipates developing a forecasting model in FY 2023. 06/16/2022	Allison Smith on 04/15/2021: Progress: 44% ▶ 50%	<b>50%</b> <b>50 / 100%</b> 50% behind
Pilot Providers using the Risk Assessment/Scorecard	using the new RM	Manny Singla   CNO/CIO	Allison Smith	Matrix/Score Card to Outpatient Providers Formulate internal scorecard review committee Roll out Risk Matrix/Score Card to all BH CRSPs Train providers on Risk Matrix Score Card Run Pilot on 5 CRSPs  Present Risk Matrix/Score Card to 5 CRSP in Pilot Present Risk Matrix/Score Card to MCO Notify all CRPS about Financial Reporting	2022 Due: June   01/31/ White 2022 Due: Manny   09/30/ Singla 2021  Due: Meliss   09/09/ a 2021 Moody  Due: CIO   06/30/ (Unap 2021 pointe d)  Due: June   01/28/ White 2021  Due: Allison   01/26/ Smith 2021	NEW Allison Smith: The CRSPs have provided feedback to DWIHN on the ScoreCard and it's a process of continual improvement to data accuracy. DWIHN has formed an internal committee consisting of SMEs from each department to begin collectively reviewing the data. This committee will help identify areas for improvement and help make informed decisions.  02/03/2022	Allison Smith on 02/03/2022:  Completed Task Formulate internal scorecard review committee assigned to Director of Network Management (June White)	<b>87%</b> 8% ahead
Deliver electronic web- based Provider Directory	To provide and interactive searchable Provider and Practitioner database that meets the NCQA requirements.	Manny Singla   CNO/CIO	Nasr Doss			NEW Allison Smith: Provider directory was successfully launched with option to search information across providers as well practitioners with in the system.  02/04/2021	Allison Smith on 03/02/2022: Progress: 89% ▶ 100%	100% -

Goal	Details	Owner	Co-owners	Task	Update	System Up	Current Co
Deliver Go-Live of Medversant Credentialing and Impaneling Plan Software	This goal was to deliver Medversant Credentialing and Impanelling system as part of NCQA standards for the DWIHN Credentialing team to start bringing all the providers and associated practitioners including CRSP,Residential, Staffing agents through a single credentialing process and solution.	Manny Singla   CNO/CIO	Nasr Doss		Nasr Doss: The Medversant system is live as of February 2020. All Providers and associated practitioners are expected to be entered and credentialed through the Medversant system by December 2020.  07/14/2020	Nasr Doss on 07/14/2020: Progress: 98% ► 100%	100% -
Deliver HEDIS and Population Health Reporting Software		Manny Singla   CNO/CIO	Nasr Doss		NEW Manny Singla: HEDIS tool has been implemented and also the user received the training. 01/28/2021	Manny Singla on 01/28/2021: Progress: 95% ► 100%	100% -
Ensure all technology aspects are addressed to ensure connectivity, redundancy and access for mission critical operations: 100%		Manny Singla   CNO/CIO	Nasr Doss		NEW Allison Smith:  New enhancements are being made to MH-WIN to notify a CRSP when someone presents to the ER so that they can get involved with the member early in the crisis episode.  02/03/2022	Allison Smith on 02/03/2022: Progress: 80% ▶ 90%	<b>90%</b> <b>90 / 100%</b> 1% behind
Deliver electronic web- based Provider Directory	To provide and interactive searchable Provider and Practitioner database that meets the NCQA requirements.	Manny Singla   CNO/CIO	Nasr Doss		NEW Allison Smith: Provider directory was successfully launched with option to search information across providers as well practitioners with in the system.  02/04/2021	Allison Smith on 03/02/2022: Progress: 89% ► 100%	100% -

#### **CLINICAL OPERATIONS**

Goal	Details	Owner	Co-owners	Task	Update	System Up	Current Co
Develop a referral system that will include all the social, economic, spiritual, physical, dental, behavioral, and education organizations to share a central system that DWIHN members can access resources to address holistic care.: 100%	(NCQA 2017 QI 9) (NCQA 2020 QI8) Look at Wellops and Altarum - 411 #	Manny Singla   CNO/CIO	Jacquelyn Davis		NEW Manny Singla: The referral process was rolled out after the pilot across all applicable lines of business .  10/08/2021	Allison Smith on 05/04/2022: Progress: 92% ▶ 100%	100% 100 / 100% -
Deliver Annual HEDIS measures to support NCQA requirements: 100%	•IT to help develop HEDIS measures to support NCQA requirements NCQA QI 11	Manny Singla   CNO/CIO	Jacquelyn Davis		NEW Allison Smith: Currently, the Vital Data system is up and running in production mode and is capable of generating all NCQA required HEDIS measures.  01/12/2022	Allison Smith on 01/12/2022: Progress: 95% ▶ 100%	100% 100 / 100% -

#### STRATEGIC PLANNING & ACCREDITATION

Goal	Details	Owner	Co-owners	Tas	k		Update	System Up	Current Co
Pilot Providers using the Risk Assessment/Scorecard	Pilot the 5 providers using the new RM tool/Scorecard.  1. Team Wellness 2. CLS 3. Lincoln B 4. Wayne Center 5. Hegira	Manny Singla   CNO/CIO	Allison Smith	Roll out Risk Matrix/Score Card to Outpatient Providers Formulate internal scorecard review committee Roll out Risk Matrix/Score Card to all BH CRSPs Train providers on Risk Matrix Score Card Run Pilot on 5 CRSPs  Present Risk Matrix/Score Card to 5 CRSP in Pilot Present Risk Matrix/Score Card to MCO Notify all CRPS about Financial Reporting process	09/30/ 2022 Due: 01/31/ 2022 Due: 09/30/ 2021 Due: 09/09/ 2021 Due: 06/30/ 2021 Due: 01/28/ 2021 Due: 01/26/ 2021 t Due:	Singla  June White  Manny Singla  Meliss Sa Moody CIO (Unappointed) June White  Allison Smith  Dhann Manuel Dhann Manuel Dhann	improvement and help make informed	Allison Smith on 02/03/2022:  Completed Task Formulate internal scorecard review committee assigned to Director of Network Management (June White)	<b>87%</b> 8% ahead

# DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: <u>22-12 R6</u> Revised: Requisition Number:

Presented to Full Board at its Meeting on: 7/20/2022

Name of Provider: Detroit Wayne Integrated Health Network

Contract Title: FY 2021-2022 Operating Budget

Address where services are provided: None

Presented to Finance Committee at its meeting on: 7/6/2022

Proposed Contract Term: <u>10/1/2021</u> to <u>9/30/2022</u>

Amount of Contract: \$973,311,318.00 Previous Fiscal Year: \$927,640,119.00

Program Type: Modification

Projected Number Served- Year 1: Persons Served (previous fiscal year):

Date Contract First Initiated: 10/1/2021

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

Staff requests Board approval to amend the FY22 Operating Budget by adding \$33,709,383 in additional Medicaid (\$19,108,860) and Healthy MI (\$14,600,723) revenue per the projection of actual revenue received through May 31, 2022.

The revised FY22 Operating budget, in the amount of \$973,311,318, includes revenue of: \$25,955,085 (State General Funds); \$734,078,119 (Medicaid, DHS Incentive, Medicaid-Autism, Children's/SED Waiver, HAB); \$9,886,123 (MI Health Link); \$132,764,386 (Healthy MI-Medicaid and Substance Use Disorders (SUD)); \$17,686,447 (Wayne County Local Match); \$4,040,539 (Public Act 2 Funds); \$4,988,982 (State Grant portion of OBRA and SUD); \$42,630,637 (Federal Grant Funds); \$241,000 (Local Grant Funds); \$1,000,000 (Interest Income); and \$40,000 (Miscellaneous Revenue).

Outstanding Quality Issues (Y/N)? \_ If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N):

Revenue	FY 21/22	Annualized
Multiple	\$ 973,311,318.00	\$ 973,311,318.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 973,311,318.00	\$ 973,311,318.00

Recommendation for contract (Continue/Modify/Discontinue): Modify

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?N

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer Stacie Durant, Chief Financial Officer

Signature/Date: Signature/Date:

Eric Doeh Stacke Durant

Signed: Wednesday, June 15, 2022 Signed: Wednesday, June 15, 2022