



Detroit Wayne Integrated Health Network

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**Finance Committee Meeting
Hotel St. Regis
3071 W. Grand Blvd.
Detroit, MI 48202
Wednesday, May 15, 2023
2:00 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 – March 1, 2023
- VII. Presentation of FY22 Financial Statement, Single Audit and Compliance Examination Reports (Plante Moran Staff)
- VIII. Presentation of the Monthly Finance Report
- IX. FY23 2nd Quarter Board Purchasing Non-Competitive under 50K and All Cooperative Purchases
- X. Unfinished Business:
Staff Recommendations:
 - a. Board Action #23-05 (Revision 4) – DWIHN FY 2022-2023 Operating Budget
- XI. New Business:
Staff Recommendations:
 - a. Board Action #23-63 – DWIHN Community Outreach

Board of Directors

Kenya Ruth, Chairperson
Karima Bentounsi
Jonathan C. Kinloch

Dr. Cynthia Tauег, Vice Chairperson
Lynne F. Carter, MD
Kevin McNamara

Dora Brown, Treasurer
Eva Garza Dewaelsche
Bernard Parker

William Phillips, Secretary
Angelo Glenn



XII. 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).

XIII. Adjournment

FINANCE COMMITTEE

MINUTES

MARCH 1, 2023

1:00 P.M.

**3071 W. GRAND BLVD.
DETROIT, MI 48202
(HYBRID/ZOOM)**

MEETING CALLED BY	I. Ms. Dora Brown, Chair, called the meeting to order at 1:04 p.m.
TYPE OF MEETING	Finance Committee Meeting
FACILITATOR	Ms. Dora Brown, Chair
NOTE TAKER	Nicole Smith, Finance Management Assistant
ATTENDEES	<p>Finance Committee Members Present: Ms. Dora Brown, Chair Mr. Kevin McNamara, Vice Chair Ms. Eva Garza Dewaelsche Ms. Kenya Ruth Mr. Bernard Parker</p> <p>Committee Members Excused: None</p> <p>Board Members Present: None</p> <p>Board Members Excused: None</p> <p>Staff: Mr. Eric Doeh, CEO and President; Ms. Stacie Durant, VP of Finance; CFO; Mr. Manny Singla, Executive VP of Operations; Mr. Jamal Aljahmi, Chief Information Officer; Monifa Gray, Associate VP of Legal Affairs; Sheree Jackson, Compliance Officer; Ms. Brooke Blackwell, VP of Governmental Affairs; and Mike Maskey, Facilities Director</p> <p>Staff Attending Virtually: Jody Connally, VP of Human Resources; Ms. Yolanda Turner, VP of Legal Affairs</p> <p>Guests: None</p>

AGENDA TOPICS

Roll Call Ms. Lillian Blackshire, Board Liaison

II. Roll Call	Roll Call was taken by Ms. Lillian M. Blackshire, Board Liaison and a quorum was present.
III. Committee Member Remarks	Ms. Brown, Chair called for Committee member 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 Mr. Parker and supported by Mr. McNamara approval of the agenda. **Motion carried.**

V. Follow-up Items:

a. DWIHN to investigate securing an Ambassador/Social Influencer to assist DWIHN with Social Media messaging in the community. It was reported that research is ongoing by the DWIHN Communications Department.

VI. Approval of the Meeting Minutes

The Chair called for a motion on the Finance Committee minutes from the meeting of Wednesday, February 1, 2023. **Motion:** It was moved by Ms. Dewaelsche and supported by Mr. Parker approval of the Finance Committee minutes from the meeting of Wednesday, February 1, 2023. There were no corrections to the minutes. **Motion carried.** Minutes accepted as presented.

VII. Presentation of the Monthly Finance Report

S. Durant, VP of Finance presented the Monthly Finance report. A written report for the three months ended January 31, 2023 was provided for the record. Network Finance accomplishments and noteworthy items were as follows:

DWVHN is presenting a revised board action to certify additional Medicaid revenue totaling approximately \$75 million. The estimate is based on the first four months of actual revenue received. The budget included a 2% reduction on revenue (\$25 million) based on a MDHHS rate reduction. DWVHN's is not expecting a reduction in revenue. In addition, MDHHS no longer cost settled hazard pay therefore DWVHN has recognized that revenue estimated at approximately \$8 million. The additional amount represents an increase in Medicaid revenue compared to prior year. Discussion ensued regarding the cost settlement and the CFO provided an overview. It was also reported that the revised board action for the budget does place DWVHN at the one-billion-dollar mark.

Effective October 1, 2022, DWVHN mandated a retroactive \$1.00/hr. rate increase for direct care workers. In addition, DWVHN will provide an additional \$2.00/hr. rate increase for Peer Support Services however implementation guidance is being developed. The estimated cost is approximately \$19 million a year. The October – December 31, 2022 payment went out this week. DWVHN will disburse January and February in May 2023. Effective March 1, 2023, rates will be increased and payments will be disbursed upon billing of claims opposed to retroactive payments. Discussion ensued regarding the range of salaries before the mandated retroactive pay as well as ensuring that monies are being provided to the workers.

Cash and Investments – comprise of funds held by three (3) investment manager, First Independence CDARS, Comerica, and Flagstar accounts. This amount includes the cash held in collateral for the two building loans.

Due from other governments and accounts receivable – comprise various local, state and federal amounts due to DWVHN. Approximately \$2 million in SUD and MH block grant due from MDHHS. Approximately \$11.6 million in pass through HRA revenue for Q1 2023 and January 2023. Approximately \$5.8 million for PIBP for FY22. DWVHN recorded \$.5 million in an allowance for two SUD providers due to length of amount owed and likelihood of collections.

Capital assets – Includes \$10.1 million in construction work in progress related to the two building projects.

IBNR Payable – represents incurred but not reported (IBNR) claims from the provider network; historical average claims incurred through January 31, 2023, including DCW hazard pay, 10% rate increase and \$1.00/hr. DCW wage increase, was approximately \$264.9 million however actual payments were approximately \$190.5 million. The difference represents claims incurred but not reported and paid of \$74.4 million.

Due to other governments – includes \$8 million due to MDHHS for death recoupment and \$1.8 million due to MDHHS for FY20 general fund carryover in excess of 5%. In addition, there is approximately \$2 million due to MDHHS for state hospitals and IPA tax payment.

Federal/State grants and contracts– The variance is primary due to timing in addition, variance includes the funding set aside for the 707-care center that shall incur expenses in the latter part of the fiscal year. Refer to budget adjustment for certification of \$75 million in additional Medicaid revenue.

Local grants - \$1.1 million related to timing of receipt in PA2 funding as DWIHN does not receive the first quarter payment from Wayne County. Payment used for former Cobo Hall debt service payments. Discussion ensued regarding the local grant amount; Federal and State grants and contracts.

SUD, Autism, Adult, IDD, and Children services – combined \$6 million variance between the line of business and due to timing of services.

Note – the fiscal year September 30, 2022 account balances will affect the amounts reported in the balance sheet and income statements; amounts will change based on the continued closing of the books.

There was no further discussion. The Chair, Ms. Brown noted the Finance Monthly Report ending January 31, 2023 was received and filed.

VIII. 1st Quarter FY23 Board Report for Procurement Non-Competitive under \$50,000K and all Cooperative Purchasing

S. Durant presented the report to the Committee. The written report was submitted by Ms. J. Mira, Procurement Administrator and was included in the agenda packet for informational purposes to the Finance Committee. Noteworthy information includes purchasing percentages: Contract Percentage for Wayne County is 48.79% and Out of County is 51.21%; Funding Percentage w/o IT for Wayne County is 77.79% and Out of County is 22.21%. Amounts include Total under 50K or Cooperative purchasing is \$506,857.65 Wayne County is \$247,289.10, IT totals is \$188,970.32. There was no further discussion. The FY23 1st Quarter Procurement Report was received and filed.

IX. Unfinished Business – Staff Recommendations:

- a. **Board Action #23-05 (Revision3) – DWIHN FY 2022-2023 Operating Budget** Ms. Durant, VP of Finance reported. DWIHN is requesting the following amendments: Certification of \$75,115,547 - Medicaid and Healthy MI revenue -- per projection of FY23 actual revenue received (October-January, 2023) and the FY 22 actual revenue received for the entire fiscal year; Certification of Federal Grant revenue per MDHHS award to DWIHN of additional SUD Treatment, Prevention and Women Specialty Services COVID funds in the amount of \$4,067,614 and the allocation of \$335,000 for the ARPA Treatment (COVID 3); Increase Salary and fringe benefit in the amount of \$330,611 (\$237,167 and \$93,444, salary and fringe benefits, respectively) per the Executive Compensation Study; and, a newly created Social Media Strategist position in the Communications Department that is estimated to cost

\$92,562.00 (\$66,400 and \$26,162.00 salary and fringe benefits, respectively). The Chair called for a motion. **Motion:** It was moved by Mr. McNamara and supported by Ms. Ruth approval of BA #23-05 (Revision3) to Full Board. There was no further discussion. **Motion carried.**

X. New Business – Staff Recommendations:

a. **Board Action #23-59 – Diligent** M. Singla, Executive VP of Operations reported. DWIHN staff is requesting board approval for additional funds to continue the Board Portal Service subscription with Diligent. The cost of the service for the first year is \$9,900.00 and the cost for the second year is \$13,395.00. Total cost for the two (2) year subscription is \$20,295.00. The total amount of the modifications total \$62,303.00 The Chair called for a motion. **Motion:** It was moved by Mr. Parker and supported by Ms. Dewaelsche approval of BA #23-59 to Full Board. There was no further discussion. **Motion carried.**

b. **Board Action #23-60 – Sterling Security** M. Maskey, Facilities Director reported. This Board action is requesting board approval to contract with Sterling Security, LLC to provide security services at 707 W. Milwaukee for the period February 1-September 30, 2023, in an amount not to exceed \$68,022.00. The previous security company was unable to continue providing the required services due to staffing shortages. The Chair called for a motion. **Motion:** It was moved by Ms. Ruth and supported by Ms. Dewaelsche approval of BA #23-60 to Full Board. Discussion ensued regarding the competitiveness of the salaries paid to the employees of Sterling Security. There was no further discussion. **Motion carried.**

XI. Good and Welfare/Public Comment – The Chair read the Good and Welfare/Public Comment statement. There were no members of the public addressing the committee.

XII. 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 1:47 p.m.

FOLLOW-UP ITEMS	a. DWIHN to investigate securing an Ambassador/Social Influencer to assist DWIHN with Social Media messaging in the community. -Search ongoing

March 17, 2023

To the Board of Directors
Detroit Wayne Integrated Health Network

We have audited the financial statements of Detroit Wayne Integrated Health Network (DWIHN) as of and for the year ended September 30, 2022 and have issued our report thereon dated March 17, 2023. Professional standards require that we provide you with the following information related to our audit.

Our Responsibility Under U.S. Generally Accepted Auditing Standards

As stated in our engagement letter dated October 23, 2022, our responsibility, as described by professional standards, is to express an opinion about whether the financial statements prepared by management with your oversight are fairly presented, in all material respects, in conformity with U.S. generally accepted accounting principles. Our audit of the financial statements does not relieve you or management of your responsibilities. Our responsibility is to plan and perform the audit to obtain reasonable, but not absolute, assurance that the financial statements are free of material misstatement.

As part of our audit, we considered the internal control of DWIHN. Such considerations were solely for the purpose of determining our audit procedures and not to provide any assurance concerning such internal control.

We are responsible for communicating significant matters related to the audit that are, in our professional judgment, relevant to your responsibilities in overseeing the financial reporting process. However, we are not required to design procedures specifically to identify such matters.

Our audit of DWIHN's financial statements has also been conducted in accordance with *Government Auditing Standards*, issued by the Comptroller General of the United States. Under *Government Auditing Standards*, we are obligated to communicate certain matters that come to our attention related to our audit to those responsible for the governance of DWIHN, including compliance with certain provisions of laws, regulations, contracts, and grant agreements; certain instances of error or fraud; illegal acts applicable to government agencies; and significant deficiencies in internal control that we identify during our audit. Toward this end, we issued a separate letter dated March 17, 2023 regarding our consideration of DWIHN's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements.

Planned Scope and Timing of the Audit

We performed the audit according to the planned scope and timing previously communicated to you in our meeting about planning matters on January 18, 2023.

Significant Audit Findings

Qualitative Aspects of Accounting Practices

Management is responsible for the selection and use of appropriate accounting policies. In accordance with the terms of our engagement letter, we will advise management about the appropriateness of accounting policies and their application. The significant accounting policies used by DWIHN are described in Note 2 to the financial statements.

No new accounting policies were adopted, and the application of existing policies was not changed during the fiscal year ended September 30, 2022.

We noted no transactions entered into by DWIHN during the year for which there is a lack of authoritative guidance or consensus.

We noted no significant transactions that have been recognized in the financial statements in a different period than when the transaction occurred, with the exception of approximately \$10.1 million of revenue related to the Integrated Care Organization (ICO) Demonstration program that was earned in prior years, previously recorded as liabilities due to the ICO providers through September 30, 2021 but corrected by management in the fiscal year ended September 30, 2022, as management has determined that DWIHN does not have a settlement requirement beyond year 1 of the demonstration program.

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 estimate affecting the financial statements was unearned revenue. We evaluated the key factors and assumptions used to develop the estimate in determining that it is reasonable in relation to the financial statements taken as a whole.

The disclosures in the financial statements are neutral, consistent, and clear.

Difficulties Encountered in Performing the Audit

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

Disagreements with Management

For the purpose of this letter, professional standards define a disagreement with management as 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.

Corrected and Uncorrected Misstatements

Professional standards require us to accumulate all known and likely misstatements identified during the audit, other than those that are trivial, and communicate them to the appropriate level of management.

During our audit procedures, we identified corrections that were required to be made to the financial statements related to certain accrued liabilities being under reported by approximately \$2.6 million as of September 30, 2022. The first was a \$1.2 million adjustment to increase cash and increase accrued wage liabilities for retention payments made in December 2022. The second was a \$1.4 million adjustment to increase salaries and wages expense and increase accrued wage liabilities for amounts paid to employees subsequent to year end for dates worked during the fiscal year ended September 30, 2022.

Management has corrected all such misstatements, which were not material individually or in aggregate to the financial statements taken as a whole.

Significant Findings or Issues

We generally discuss a variety of matters, including the application of accounting principles and auditing standards, business conditions affecting DWIHN, and business plans and strategies that may affect the risks of material misstatement, with management each year prior to our retention as DWIHN's auditors. However, these discussions occurred in the normal course of our professional relationship, and our responses were not a condition of our retention.

Management Representations

We have requested certain representations from management that are included in the management representation letter dated March 17, 2023.

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 DWIHN'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 Information Included in Annual Reports

Our responsibility for other information included in annual reports does not extend beyond the financial statements, and we do not express an opinion or any form of assurance on the other information. However, we read the letter of transmittal, and nothing came to our attention that caused us to believe that such information, or its manner of presentation, is materially misstated or materially inconsistent with the information or manner of its presentation appearing in the financial statements.

Very truly yours,

Plante & Moran, PLLC

Alisha M. Watkins

Alisha M. Watkins, CPA
Partner



Detroit Wayne Integrated Health Network

**Financial Report
with Supplemental Information
September 30, 2022**

Detroit Wayne Integrated Health Network

Contents

Letter of Transmittal	1-8
Independent Auditor's Report	9-11
Management's Discussion and Analysis	12-18
Basic Financial Statements	
Fund Financial Statements:	
Statement of Net Position	19
Statement of Revenue, Expenses, and Changes in Net Position	20
Statement of Cash Flows	21
Notes to Financial Statements	22-31
Other Supplemental Information	32
Statement of Revenue, Expenses, and Changes in Net Position - Budgetary Comparison	33

March 17, 2023

Board of Directors
Detroit Wayne Integrated Health Network
Detroit, Michigan

Ladies and Gentlemen:

I am pleased to present the financial statements for the Detroit Wayne Integrated Health Network (DWIHN) for the fiscal year ended September 30, 2022 along with the Independent Auditors Report. This report is prepared for the purposes of disclosing DWIHN's financial condition and is prepared in accordance with U.S. generally accepted accounting principles (GAAP), as established by the Governmental Accounting Standards Board (GASB) and meets all requirements of the state finance laws of the State of Michigan.

All local units of government within the State of Michigan must comply with the Uniform Budgeting and Accounting Act, Public Act 2 of 1968, as amended, which requires an annual audit of the financial records and transactions of DWIHN by independent certified public accountants, within six months of the close of each fiscal year.

Management assumes full responsibility for the completeness, accuracy and fairness of the information contained in the report. Plante Moran, PLLC has issued an unmodified ("clean") opinion on DWIHN. The independent Auditor's Report is located at the front of the financial section of this report. Management believes the information presented is materially accurate and that its presentation fairly shows the financial position and results of operations of DWIHN and that the disclosures will provide the reader with an understanding of DWIHN's affairs.

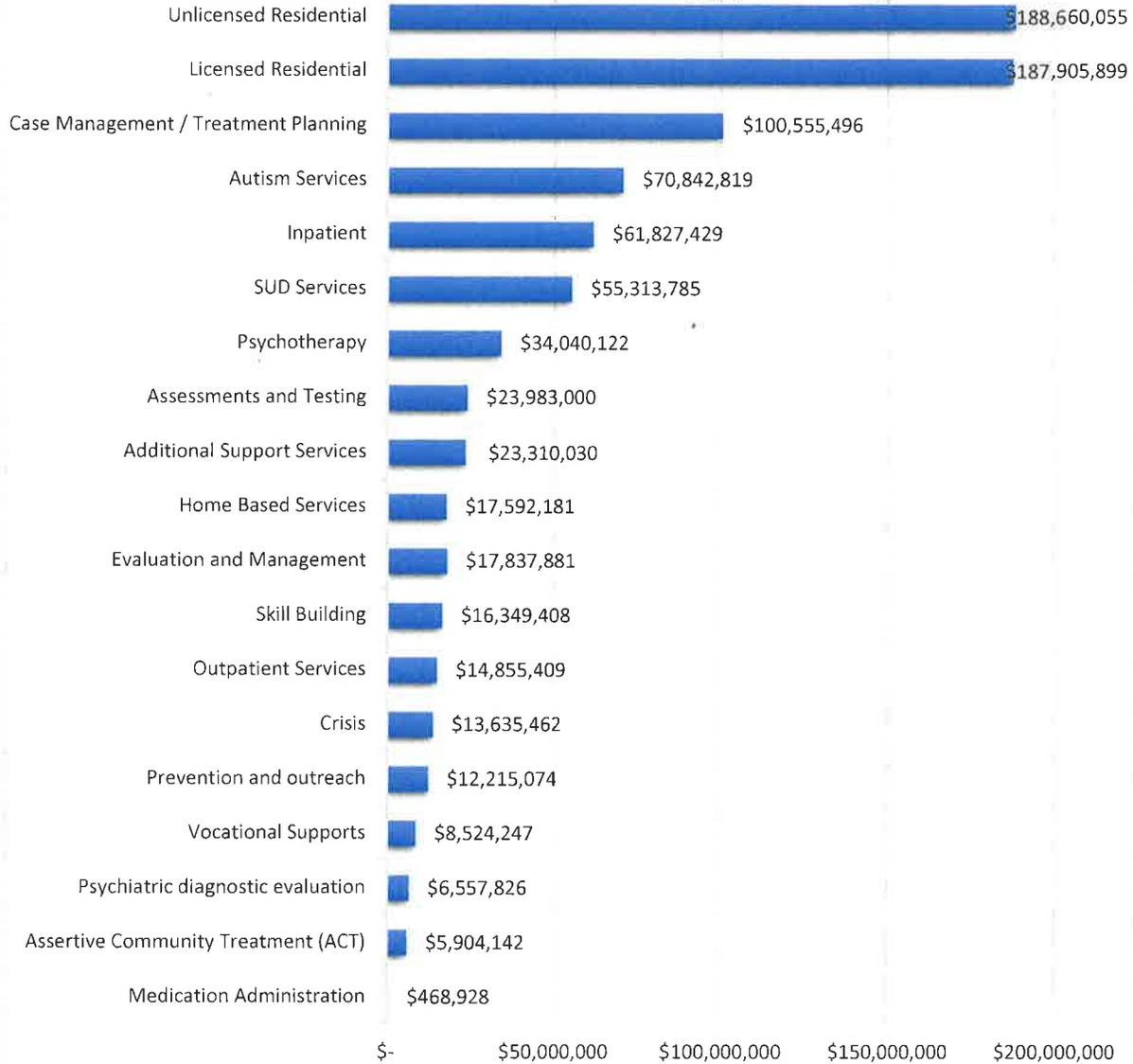
DWIHN has prepared its financial reporting requirements as prescribed by the GASB Statement No. 34, Basic Financial Statements – and Management's Discussion and Analysis-for State and Local Governments (GASB 34). This GASB Statement requires that management provide a narrative introduction, overview, and analysis that accompany the Basic Financial Statements in the form of a Management Discussion and Analysis (MD&A). This letter of transmittal is designed to complement the MD&A and should be read in conjunction. The MD&A can be found immediately following the report of the independent auditors.

Profile and Demographics of DWIHN

DWIHN serves over seventy thousand (70,000) consumers located within the Charter County of Wayne (the County) in the State of Michigan with an approximate population of 1.8 million in the county. The County is the most populous county in the State of Michigan and the 19th most populous county in the nation. The County encompasses approximately 620 square miles and is made up of thirty-four (34) cities, including the City of Detroit, nine (9) townships and thirty-three (33) school districts. The following chart provides additional demographic information regarding persons served in FY22:

Population by Race	Population	Percentage
Black/African American	42,746	54%
White	24,177	30%
Arab American	1,320	2%
Other races	8,335	10%
Unreported	2,942	4%
Population by Service Area		
		Percentage
Detroit	38,608	51%
Out-County	37,290	49%
Population by Age		
	Population	Percentage
Children (under 18)	17,776	22%
Adults (18-21)	4,000	5%
Adults (22-50)	34,273	45%
Adults (51-64)	15,873	20%
Adults (over 65)	5,906	8%
By Disability Designation		
	Population	Percentage
Adults with MI	46,694	65%
Children with SED	13,030	18%
Individuals with an I/DD	11,941	17%
SUD -Served (co-occurring with other populations)	16,673	
Insurance		
	Consumers	Percentage
Medicaid	49,129	60%
Healthy Michigan Plan	19,438	24%
General Fund/Spend-down	7,346	9%
MiHealthLink	5,874	7%

FY22 - ALL SERVICE COSTS BY SERVICE CATEGORY



Note: SUD = Substance Use Disorder

The Mental Health Code: Public Act 258 of 1974 (as amended)

Michigan’s Mental Health Code is the compilation of state laws governing the management and delivery of mental health services. The law was first established in 1974 and has since been amended, most significantly in 1996. There are currently forty-six (46) community mental health service programs (CMHSP). The law requires the board to consist of twelve (12) members appointed by county commissioners for three-year staggering terms. The law also requires the CMH board approve an annual budget after holding a public meeting to obtain community input.

DWIHN Board of Directors

Angelo Glenn, Chairperson
Kenya Ruth, Vice-Chairperson
Dora Brown, Treasurer
Dr. Cynthia Taueg, Secretary
Dorothy Burrell
Dr. Lynn Carter
Eva Garza Dewaelsche
Jonathan C. Kinloch
Kevin McNamara
Bernard Parker
William Phillips

**DWIHN Substance Use
Oversight Policy Board**

Thomas Adams, Chairperson
Dr. Cynthia Arfken, Vice Chair
Maria Avilla
Thomas Fielder
Angelo Glenn
Jonathan C. Kinloch
Margo Martin
Kevin McNamara
Jim Perry
Ronald Taylor
Daryl Wood Jr.

The Reporting Entity and Its Services

In December of 2012, Governor Rick Snyder signed Public Acts 375 and 376 in 2012 that required Wayne County to establish its community mental health services program as an independent governmental entity, separate and distinct from the County functions. These acts mandated a change in governance from a Mental Health Agency to a Mental Health Authority. On June 6, 2013, Wayne County Commission approved the Enabling Resolution 2013-392 which created the new Authority. During this same period, the Application for Participation (AFP), which enabled DWIHN to maintain its designation as a Prepaid Inpatient Health Plan (PIHP) as well as its eligibility to contract for Medicaid funds, was successfully completed and approved by the Michigan Department of Health and Human Services (MDHHS) formerly Michigan Department of Community Health.

In addition, effective October 1, 2014, House Bills 4862 and 4863 signed on December 28, 2012 transferred the duties of the Coordinating Agencies (CA) to the PIHP. CA's were responsible for the administration of substance use disorders (SUD) services to Detroit and Wayne County residents; the prior Wayne County CA's were the City of Detroit (via Institute for Population Health) and Southeastern Michigan Coordinating Agency (SEMCA).

The purpose of DWIHN is to provide support, care and treatment services to adults with severe mental illness (SMI), individuals with intellectual and/or developmental disabilities (IDD), children with serious emotional disturbances (SED) and persons with substance use disorders (SUD) and their families so they can make choices in care, live in the community and achieve desired outcomes through individualized health goals.

Adult Mental Health Services Program

The purpose of the Adult Mental Health Services Program is to provide individualized psychiatric outpatient, residential, case management, hospital, and emergency treatment and supportive services to adults and families at risk of or experiencing a mental illness so they can achieve psychiatric stability and/or a stable living environment.

Intellectual/Developmental Disability Services Program

The purpose of the Intellectual/Developmental Disability Services Program is to provide screening/referral and specialized supports and services including skill building, community living services and personal care to children, adolescents and adults with intellectual/developmental disabilities so they can obtain their personal optimal level of independence. I/DD are a group of conditions due to an impairment in physical, learning, language, or behavior areas that start in childhood.

Children's Mental Health Services Program

The purpose of the Children's Mental Health Services Program, in collaboration with community partners, is to provide individualized and family-centered psychiatric outpatient, home-based, crisis intervention and prevention services to children, adolescents, and their families at risk of experiencing a serious emotional disturbance so they can live within the community. The services are community-based, family centered, youth guided, culturally and linguistically responsive and trauma informed.

Substance Use Disorder Services Program

The purpose of the Substance Use Disorder Services Program is to provide assessment/eligibility determination, outpatient treatment, residential, referral and medication management services to children, adolescents and adults with substance abuse disorders so they can obtain and sustain individual recovery and participate fully in the community. With over seventy-five providers, our continuum of care consists of prevention, treatment and recovery services.

Mental Health Access Center Program

The purpose of the Mental Health Access Center Program is to provide screening, eligibility, enrollment information, emergency telephone referral and counseling services to service providers and individual callers with mental health concerns so they can receive an eligibility determination, choice of provider, program enrollment or requested/needed services or information within a timely manner.

Rights and Customer Supports Program

The purpose of the Rights and Customer Supports Program is to provide the legally mandated rights protection and consumer affairs (investigation of complaints and grievances; monitoring sites of service; training system staff and consumers; family subsidy; information; referrals), so consumers and their families can receive appropriate mental health services in accordance with the Federal, State and Local laws, rules, guidelines and policies.

Mental Health Oversight/Monitoring Program

The purpose of the Mental Health Oversight/Monitoring Program is to provide oversight and management of services that assure access, adequacy and appropriateness of services, efficiency and outcomes for individuals with mental illness, serious emotional disturbance, developmental disability and substance use disorders so they can obtain recovery and self-determination. As the public mental health system, DWIHN offers a culturally diverse network of community mental health programs, clinics, private therapists, psychologists and psychiatrists to provide mental health services. We do our best to match consumers with the services needed at a location that is close to them.

DWIHN provides services in coordination and collaboration with over four hundred (400) providers and contractors.

Threats to the Behavioral Health System

Update on Proposed Legislation

The long fight for Senate Bill 597 and Senate Bill 598, sponsored by Sen. Shirkey (R) and Sen. John Bizon (R), was finally brought to the Senate floor and promptly rejected in a bipartisan vote. The bills were tied into a separate supplemental bill that would have given Michigan's mental health system more than \$560 million. The initiative proposed by Representative Whiteford never came to fruition as a bill and was pulled from the House floor.

Workforce Shortage Crisis

The Michigan workforce shortage, also known "The Great Resignation", continued throughout the fiscal year. Many believe the pandemic, unemployment benefits that surpassed minimum wage, an increase in persons pursuing entrepreneurship opportunities, and the increase in demand for work from home jobs, has caused the crisis. These factors have led to a shortage in clinical workers across the State of Michigan and many of DWIHN's provider network have experienced significant challenges in retaining and recruiting qualified staff. DWIHN continued to provide financial support to the provider network which included but were not limited to: A ten percent (10%) across the board rate increase for most fee for service codes; financial stability and retention payments.

Major Initiatives and Achievements

Breaking Ground of the First Care Center

In June 2022, DWIHN begin the construction of its first comprehensive crisis care center (Care Center) located at the former DWIHN administrative headquarters on Milwaukee Street in the City of Detroit. The Care Center will offer a full array of children and adult crisis intervention and stabilization services in addition to fifteen (15) adult crisis residential beds. The estimated completion date is in the fall of 2023.

"Putting Children First" Initiative

Putting Children First Initiative started January 2022 with 4 main goals: 1) ACCESS: Increase access to services for children and youth, 2) PREVENTION: Provide early prevention opportunities for children and youth, 3) CRISIS: Ensure crisis services are available to children when needed; and 4) TREATMENT: Provide quality services to children and youth.

Over seventeen thousand six hundred (17,600) children, youth, and families received community mental health services during fiscal year 2022. This included approximately eleven thousand nine hundred (11,900) children with serious emotional disturbances and five thousand seven hundred (5,700) children with intellectual developmental disabilities. The "Putting Children First Initiative" accomplishments include but are not limited to:

- Began a pilot with DHHS North Central Office to receive trauma screenings for youth ages 0 to 6 and have community mental health screenings completed with DWIHN Access Department.
- Partnered with Wayne County RESA to develop a return to school letter and safety plan for when students see a mental health professional prior to returning back to school.
- Workforce Development hosted School Violence Trainings.
- Children's Initiative Department hosted the Chemistry Workshop with Hermeneutist at the Considine Building in Detroit for youth grades K-12. Youth learned entrepreneurship skills and created self-care products.

- Fatherhood Initiative and Youth United partnered to host the first Movie Night; in which, families went to Emagine Theatre to see Buzz Lightyear.
- Eleven (11) children providers participated in the SED Value Based Incentive this year to receive additional funds for meeting MDHHS Performance Indicators and home-based service hours.
- Sexual Orientation Gender Identity Expression (SOGIE) languages was incorporated into the Integrated Biopsychosocial Assessment electronic health record. In addition, Ruth Ellis hosted four (4) trainings on SOGIE that included over one hundred DWIHN staff.
- Participated in a panel discussion for mental health awareness for Wayne County Community College students and a panel discussion for high school students involved in the Biomedical Career Advancement Program (BCAP).
- Reduced administrative burden for children providers by streamlining CAFAS / PECFAS reporting.

Diversity, Equity and Inclusion

DWVHN formed its first ever Diversity Equity and Inclusion (DEI) committee to discuss the importance and value of inclusion throughout the workplace. Members were selected throughout the organization in various departments to create a supportive and welcoming workplace environment where employees can work together. The DWVHN's DEI newsletter I.D.E.A.'s was also implemented; this publication is sent out monthly to discuss different diversity topics and highlight members DEI events in the organization. A DEI page was created on the official DWVHN website to seek employee insights and highlight diverse voices. In 2022, DWVHN was awarded Corp! Magazine Overall Diversity Champion Award. DWVHN also partnered with the National Disability Institute on Disability/Diversity/Financial Empowerment and Wayne State University on Black Health & Racial Equity Symposium; topics included implicit bias, structural racism & health outcomes and the digital divide.

Jail Diversion Initiatives

The overall goal of the Jail Diversion initiatives is to improve the city's response to individuals experiencing mental health crises and to prevent future crises by connecting them early on to supportive services.

The Detroit Wayne Crisis Intervention Team (CIT) trained one hundred eighty-four (184) first responders and one hundred (100) call takers and dispatchers across the state. The team also assisted Jackson County, Ottawa County, and Genesee County with the launching of their CIT programs.

During fiscal year 2022, Behavioral Health Specialists (BHS) were embedded within Detroit's 911 Communication Center. The BHS assisted with mental health-related non-violent calls, connecting individuals to appropriate social and mental health resources. The behavioral health specialists embedded within Detroit Police Department and Southgate Police Department encountered over thirty-five hundred (3,500) individuals; approximately one thousand (1,000) were connected to a service, and eleven hundred (1,100) of these individuals received follow-up communication and support from co-response.

The Detroit Homeless Outreach Team (DHOT) reported over six thousand (6,000) encounters with people in need of relocation, housing, and or behavioral health support. These services are currently only offered in select target areas in Detroit.

Retention Payment and Financial Stability Payments

In recognition of the difficult year faced due to the global pandemic and increased demands on the workforce, in accordance with 2CFR Part 200.430 Compensation, DWIHN offered a retention payment to all employees in the Wayne County provider network that served DWIHN members that were employed on September 30, 2022. DWIHN paid out approximately \$41.8 million to over fifteen thousand (15,000) full and part time clinical and administrative employees in the Wayne County provider network. In addition, DWIHN paid out \$25.9 million in additional payments to residential, adult and children CRSPs, Autism, Skill Building, and SUD providers to stabilize the network due to reduced revenue as a direct impact of the pandemic.

The preparation of the basic financial statements was made possible by the dedicated service of the entire staff of the Finance Department. Each member of the Department has our sincere appreciation for the contributions made in the preparation of this report. We would also like to express our appreciation to other DWIHN staff for their continued support of the policies of the Department.

Respectfully submitted

Stacie L. Durant

Stacie L. Durant
Vice-President of Finance

Independent Auditor's Report

To the Board of Directors
Detroit Wayne Integrated Health Network

Report on the Audit of the Financial Statements

Opinion

We have audited the financial statements of Detroit Wayne Integrated Health Network (DWIHN) as of and for the year ended September 30, 2022 and the related notes to the financial statements, which collectively comprise DWIHN's basic financial statements, as listed in the table of contents.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of Detroit Wayne Integrated Health Network as of September 30, 2022 and the changes in its financial position and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of DWIHN and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America and for 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.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Detroit Wayne Integrated Health Network's ability to continue as a going concern for 12 months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and, therefore, is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

To the Board of Directors
Detroit Wayne Integrated Health Network

In performing an audit in accordance with GAAS and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit 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 DWIHN's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about DWIHN's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Required Supplemental Information

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis be presented to supplement the basic financial statements. Such information is the responsibility of management and, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, which 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 supplemental 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

Management is responsible for the other information included in the annual financial report. The other information comprises the budgetary comparison schedule and transmittal letter but does not include the basic financial statements and our auditor's report thereon. Our opinion on the basic financial statements does not cover the other information, and we do not express an opinion or any form of assurance thereon.

In connection with our audit of the basic financial statements, our responsibility is to read the other information and consider whether a material inconsistency exists between the other information and the basic financial statements or whether the other information otherwise appears to be materially misstated. If, based on the work performed, we conclude that an uncorrected material misstatement of the other information exists, we are required to describe it in our report.

To the Board of Directors
Detroit Wayne Integrated Health Network

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated March 17, 2023 on our consideration of Detroit Wayne Integrated Health Network'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 solely 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 the effectiveness of Detroit Wayne Integrated Health Network's 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 Detroit Wayne Integrated Health Network's internal control over financial reporting and compliance.

Plante & Moran, PLLC

March 17, 2023

These financial statements are the responsibility of the management of the Detroit Wayne Integrated Health Network (DWIHN). We offer this narrative overview and analysis for the fiscal year ended September 30, 2022. We encourage readers to consider the information presented here in conjunction with the additional information furnished in the financial statements and notes to the financial statements.

Financial Highlights

Total net position	\$157,343,487
Change in total net position	\$24,557,711
Installment debt outstanding	\$4,962,653
Liquidity ratio	1.23

Background

On December 14, 2012, the Michigan Legislature approved and the Governor signed Public Acts 375 and 376 of 2012, a Mental Health Authority bill. Effective October 1, 2013, the new law transferred management and control to a separate legal entity (DWIHN). The new Authority is comprised of twelve (12) board members; the County Executive and the Mayor of the City of Detroit each recommended six (6) members. The appointments of the twelve (12) board members are subject to confirmation by the Wayne County Commission. Prior to the Public Acts, DWIHN, previously the Detroit Wayne County Community Mental Health Agency, was reported in the Charter County of Wayne (the County) Comprehensive Annual Financial Report as a special revenue fund.

In accordance with Governmental Accounting Standards Board (GASB) Statement No. 61, *The Financial Reporting Entity: Omnibus, an amendment of GASB Statements Nos. 14 and 34*, DWIHN is not a discretely presented component unit of Wayne County.

DWIHN provides limited direct services to the community through contracts with hundreds of network providers.

Dual Eligible Pilot Program (MI Health Link/MHL)

The State of Michigan selected DWIHN as one (1) of four (4) Prepaid Inpatient Health Plans (PIHP) to participate in the Dual-Eligible demonstration pilot project (aka MI Health Link) that began in May 2015 and extended to December 31, 2023. The pilot was designed to integrate primary care with mental health and substance use disorder treatment to improve overall health care outcomes, create greater efficiencies in the delivery of services, and reduce costs. The integrated care model organizes the coordination of the Medicare and Medicaid benefits, and requires collaboration between the Integrated Care Organizations (ICOs), DWIHN, and its privileged provider network. It also involved developing and negotiating five (5) contracts with ICO's.

Overview of the financial statements

This discussion and analysis are intended to serve as an introduction to DWIHN's financial statements, which include the Statement of Net Position, Statement of Revenues, Expenses and Changes in Net Position, Statement of Cash Flows, Notes to the Financial Statements, and Other Supplemental Information - Statement of Revenues, Expenses and Changes in Net Position – Budget to Actual. In addition, DWIHN will present its financial statements as a proprietary fund.

Financial Analysis

Net position may serve over time as a useful indicator of an organizations financial position. The following depicts DWIHN's net position at September 30, 2022 and 2021, respectively:

	<u>2022</u>	<u>2021</u>
Current and other assets	\$ 315,879,992	\$ 301,551,635
Noncurrent assets	78,154,371	23,726,757
Capital assets, net	<u>19,098,399</u>	<u>12,960,459</u>
Total Assets	413,132,762	338,238,851
Current liabilities	255,789,275	200,491,468
Notes Payable	<u>-</u>	<u>4,961,607</u>
Total Liabilities	255,789,275	205,453,075
Net position:		
Invested in capital assets, net of related debt	14,135,746	7,725,221
Restricted	92,300,609	66,177,165
Unrestricted	<u>50,907,132</u>	<u>58,883,390</u>
Total net position	<u>\$ 157,343,487</u>	<u>\$ 132,785,776</u>

DWIHN current assets comprise of \$276.4 million in cash and investments held at five (5) financial institutions. In addition, approximately \$27.9 million due from the federal and state government for federal and state revenue outstanding at year end. Non-current assets consist of \$55.0 million in investments held with investment managers and \$23.2 million for collateralized construction loans related to the administrative building and new care center. Capital assets primarily relate to the acquisition of the administration building, furniture and computer equipment and construction in process of the care center.

Current liabilities comprise of \$183.4 million in accounts payable due to providers and vendors for services rendered but unpaid at year end. Approximately \$21.2 million is due to other governments related primarily to the direct care wage hazard pay cost settlement and Federal Office of Inspector General death audit recoupment. In addition, \$4.8 million in related to accrued employee wages and compensated absences. Lastly, approximately \$40.0 million for unearned revenue relate to the Healthy Michigan Plan savings and State General Fund carryover.

Restricted net position comprises \$7.8 million in PA2 funds held for substance use disorders, \$23.2 million in cash collateral related to the construction loans, and \$61.3 million in a Medicaid Internal Service Fund. Unrestricted net position relates to the accumulation of local resources on hand at year end.

The Statement of Revenues, Expenses and Changes in Net Position serve to report the cumulative revenue and expenses received and/or incurred for the organization.

MANAGEMENT'S DISCUSSION AND ANALYSIS

	<u>2022</u>	<u>2021</u>
Revenues		
Federal grants and contracts	\$ 24,192,930	\$ 17,995,040
State grants and contracts	934,723,254	874,168,508
Local grants and contracts	28,596,978	28,270,640
Charges for services	21,439,480	7,560,547
Interest revenue	-	301,860
Other revenue	7,220	1,709,471
Total revenues	<u>1,008,959,862</u>	<u>930,006,066</u>
Expenses		
Mental health operating	42,122,959	38,306,349
Substance use disorders	57,627,494	44,357,162
Autism services	74,833,930	61,747,159
MI HealthLink	13,979,825	11,853,276
Adult services	316,121,655	283,375,111
Children services	72,391,031	69,262,742
Intellectually Disabled	376,610,520	330,988,348
Grant programs	9,539,525	6,039,389
State of Michigan	18,795,727	19,133,166
Investment losses	2,186,509	-
Interest paid on debt	192,976	204,832
Total expenses	<u>984,402,151</u>	<u>865,267,534</u>
Change in Net Position	24,557,711	64,738,532
Net position - beginning of year	<u>132,785,776</u>	<u>68,047,244</u>
Net position - end of year	<u>\$ 157,343,487</u>	<u>\$ 132,785,776</u>

State grants and contracts comprise of \$748.1 million, \$147.4 million, and \$27.5 million in Medicaid, Healthy Michigan and State General fund, respectively, including prior year savings and carryover. The \$60.5 million increase in State grants and contract revenue compared to prior year primarily relates to an increase in Medicaid received from the State of Michigan. Local grants and contracts comprise of the local match requirement mandated in the Mental Health Code in addition to the PA2 substance use disorder revenue. Charges for services relate to funds received from the ICO's for the MHL pilot program; the pilot was extended to December 31, 2023.

DWIHN operating expenses comprise of salaries and fringe benefits for DWIHN staff (\$35.1 million), depreciation expense (\$1.0 million), and the Electronic Medical Record (EMR) system (\$1.4 million). The \$3.8 million increase in operating costs as compared to prior year is primarily related to a \$1.9 million increase in accrued wages and compensated absences.

Overall provider costs increased as compared to prior year due to DWIHN implementing an overall ten percent (10%) rate increase for fee for service codes. Substance Use Disorders services comprise of all

services and funding sources related to the treatment and prevention of persons with substance use disorders in Wayne County. The \$13.2 million increase in services primarily relates to an increase in services utilization as the system recovers from the pandemic. In addition, DWIHN provided additional provider stability payments compared to prior year. Autism services comprise of all services related to the treatment of children 0-21 years of age that qualified for the enhanced benefit. The \$13.1 million increase in services primarily relate to financial stability payments to certain qualified providers in addition to increased service utilization compared to prior year. Adult services comprise of treatment and prevention services with our Clinically Responsible Service Providers (CRSP), inpatient hospital costs, consumers in the Wayne County Jail, hospital rate adjustment, and the COPE contract. The \$32.7 million increase in costs result from financial stability payments to certain qualified providers and increased utilization as the system recovers from the pandemic.

Children services comprise of all services related to the treatment and prevention of children with serious emotional disturbance (SED) administered by the children's CRSP, school-based initiatives, and summer youth employment programs. The modest increase in the program costs are primarily related to the 10% rate adjustment offset by continued reductions in service utilization. Intellectually Developmentally Disabled (IDD) services comprise of all treatment services administered through the CRSP, including services administered through Community Living Services for self-directed consumers, and residential services. The \$45.7 million increase is primarily related to 10% rate adjustment.

Payments to the State of Michigan totaled \$18.8 million and comprise of local match payment to drawdown federal funds, local state hospital costs and the Insurance Provider Assessment Act (IPA) tax payments.

MANAGEMENT'S DISCUSSION AND ANALYSIS

The following shows a comparison of the final amended budget to actual results in the Statement of Revenue, Expenses, and Changes in Net Position:

	<u>Final Amended Budget</u>	<u>Actual</u>	<u>Increase (Decrease)</u>
Operating revenues			
Federal grants and contracts	\$ 26,493,046	\$ 24,192,930	\$ (2,300,116)
State grants and contracts	914,244,666	934,723,254	20,478,588
Local grants and contracts	21,967,986	28,596,978	6,628,992
Charges for services	<u>9,926,123</u>	<u>21,439,480</u>	<u>11,513,357</u>
Total operating revenues	<u>972,631,821</u>	<u>1,008,952,642</u>	<u>36,320,821</u>
Operating expenses			
Salaries and fringes	\$ 35,428,382	35,150,483	(277,899)
Substance use disorders	53,551,055	57,627,494	4,076,439
Autism services	71,224,235	74,833,930	3,609,695
MI HealthLink	9,876,123	13,979,825	4,103,702
Adult services	295,959,424	316,121,655	20,162,231
Children services	85,486,364	72,391,031	(13,095,333)
Intellectually Disabled	378,866,668	376,610,520	(2,256,148)
Grant programs	13,849,130	9,539,525	(4,309,605)
State of Michigan	19,830,188	18,795,727	(1,034,461)
Operating costs	7,533,460	5,955,386	(1,578,074)
Depreciation	<u>1,766,792</u>	<u>1,017,090</u>	<u>(749,702)</u>
Total operating expenses	<u>\$ 973,371,821</u>	<u>\$ 982,022,666</u>	<u>8,650,845</u>
Operating income (loss)	(740,000)	26,929,976	27,669,976
Non-operating revenue (expense)			
Interest expense	(260,000)	(192,976)	67,024
Gain on sale of assets	-	7,220	7,220
Investment earnings (loss)	<u>1,000,000</u>	<u>(2,186,509)</u>	<u>(3,186,509)</u>
Total non-operating revenue	<u>740,000</u>	<u>(2,372,265)</u>	<u>(3,112,265)</u>
Change in net position	<u>\$ -</u>	<u>24,557,711</u>	<u>\$ 24,557,711</u>
Net position - beginning of year		<u>132,785,776</u>	
Net position - end of year		<u>\$ 157,343,487</u>	

Budgetary Highlights

DWIHN adopted an annual operating budget by October 1 of the previous year. The budgetary comparison schedule has been provided to demonstrate compliance with this budget. During the year, there were several significant changes from the original to the final amended budget. The changes are as follows:

	Adopted Budget	Final Amended Budget	Variance Over (Under)
Federal grants and contracts	\$ 25,031,957	\$ 26,493,046	\$ 1,461,089
State grants and contracts	849,130,904	914,244,666	65,113,762
Local grants and contracts	22,089,636	21,967,986	(121,650)
Other operating revenue	9,926,123	9,926,123	-
Total operating revenues	906,178,620	972,631,821	66,453,201
Salaries and related fringes	\$ 34,726,927	\$ 35,428,382	\$ 701,455
Substance use disorders	57,243,781	53,551,055	(3,692,726)
Autism services	69,562,554	71,224,235	1,661,681
MI HealthLink	9,681,012	9,876,123	195,111
Adult Services	270,843,514	295,959,424	25,115,910
Children Services	74,518,243	85,486,364	10,968,121
Intellectually Disabled	351,633,620	378,866,668	27,233,048
Grant Programs	9,610,582	13,849,130	4,238,548
State of Michigan	19,830,188	19,830,188	-
Operating costs	7,501,407	7,533,460	32,053
Depreciation	1,766,792	1,766,792	-
Total operating expenses	\$ 906,918,620	\$ 973,371,821	\$ 66,453,201
Nonoperating Revenue (expense)			
Interest paid on debt	(260,000)	(260,000)	-
Investment earnings	1,000,000	1,000,000	-
	740,000	740,000	-
Change in net position	\$ -	\$ -	\$ -

The \$53.2 million budget adjustment to state grants and contracts relates to an increase in Medicaid funding received from the State of Michigan. In addition, \$11.5 million budget adjustment for the Certified Community Behavioral Health Clinic (CCBHC) supplemental funding received from the State of Michigan to cover expenses in excess of the fee for service payments.

Economic Factors and Next Year's Budget

- On March 11, 2020, the World Health Organization declared the outbreak of a respiratory disease caused by a new coronavirus a pandemic. First identified in late 2019 and now known as COVID-19, the outbreak has impacted millions of individuals worldwide. While the COVID-19 pandemic could have an adverse effect on DWIHN's operations over time, no impairments were recorded as of the statement of net position date, as no triggering events or changes in circumstances had occurred as of year-end.
- The Public Health Emergency (PHE) is set to end within the next few months. There is much uncertainty on the impact as thousands of Michiganders will lose their Medicaid. PIHP's are paid a capitated rate based on the number of eligible Medicaid enrollees that may have a significant impact on Medicaid revenue.
- Several years ago, MDHHS established a workgroup amongst the Community Mental Health Services Programs (CMHSP) to review and make recommendations on how State General Fund will be allocated between the CMHSP's; the workgroup's recommendation included a \$22 million reduction to DWIHN's appropriation over five years; FY22 was the fifth year of the plan. The Governor's FY21 recommended budget included the workgroups recommendation; however, the legislation provided a \$5 million supplemental that lessened the reduction and provided a short-term reprieve. The Public Health Emergency, which is set to expire in April 2023, provided a significant reprieve however the future of DWIHN's general fund is unknown at this time.
- DWIHN's provider network is experiencing staff shortages and capacity issues. The combination of the pandemic and overall shortage of clinicians in the State of Michigan has resulted in delays in service provision and increased burnout due to higher caseloads. Staff report that documentation requirements at the CMHSP level and higher paying jobs with health plans and hospitals are a driving force for leaving the CMHSP provider network. MDHHS has formed several initiatives and workgroups to address the statewide issue. As funding permits, DWIHN will continue to offer financial stability payments, value-based incentives and retention payments to the provider network to assist in the recruiting efforts.

Requests for Information

This financial report is designed to provide a general overview of DWIHN's finances. Questions concerning any of the financial information or requests for additional financial information, should be addressed to the following:

Detroit Wayne Integrated Health Network
 Vice-President of Finance
 707 W. Milwaukee
 Detroit, Michigan 48202

Detroit Wayne Integrated Health Network

Statement of Net Position

September 30, 2022

Assets

Current assets:

Cash and cash equivalents (Note 3)	\$ 260,427,753
Investments (Note 3)	15,973,057
Receivables: (Note 5)	
Accounts receivable	8,315,014
Due from other governmental units	30,391,512
Prepaid expenses and other assets	<u>772,656</u>

Total current assets 315,879,992

Noncurrent assets:

Restricted cash (Note 2)	23,188,932
Investments (Note 3)	54,965,439
Capital assets: (Note 6)	
Assets not subject to depreciation	8,374,083
Assets subject to depreciation - Net	<u>10,724,316</u>

Total noncurrent assets 97,252,770

Total assets 413,132,762

Liabilities

Current liabilities:

Accounts payable	183,362,675
Due to other governmental units	21,161,231
Accrued wages and benefits	3,060,045
Unearned revenue	41,503,365
Compensated absences (Note 7)	1,739,306
Current portion of long-term debt (Note 7)	<u>4,962,653</u>

Total liabilities 255,789,275

Net Position

Net investment in capital assets 14,135,746

Restricted:

Restricted for substance abuse disorder PA2	7,833,972
Restricted for risk financing - Medicaid ISF	61,277,705
Restricted cash collateral	23,188,932

Unrestricted 50,907,132

Total net position \$ 157,343,487

Detroit Wayne Integrated Health Network

Statement of Revenue, Expenses, and Changes in Net Position

Year Ended September 30, 2022

Operating Revenue	
State grants and contracts	\$ 934,723,254
Charges for services	21,439,480
Local grants and contracts	28,596,978
Federal grants and contracts	<u>24,192,930</u>
Total operating revenue	1,008,952,642
Operating Expenses	
Personnel	25,985,411
Fringe benefits	9,165,069
Substance use disorder services	57,627,494
Autism services	74,833,930
MI Health Link	13,979,825
Adult services	316,121,655
Children services	72,391,031
Intellectually disabled	376,610,520
Grant programs	9,539,525
State of Michigan	18,795,727
Operating costs	5,955,389
Depreciation	<u>1,017,090</u>
Total operating expenses	<u>982,022,666</u>
Operating Income	26,929,976
Nonoperating (Expense) Revenue	
Investment loss	(2,186,509)
Gain on sale of asset	7,220
Interest expense	<u>(192,976)</u>
Total nonoperating expense	<u>(2,372,265)</u>
Change in Net Position	24,557,711
Net Position - Beginning of year	<u>132,785,776</u>
Net Position - End of year	<u><u>\$ 157,343,487</u></u>

Detroit Wayne Integrated Health Network

Statement of Cash Flows

Year Ended September 30, 2022

Cash Flows from Operating Activities

Cash received from state and federal sources	\$ 972,884,447
Cash received from local sources	18,797,121
Payments to providers and suppliers	(886,617,295)
Payments to employees	<u>(37,455,000)</u>

Net cash and cash equivalents provided by operating activities 67,609,273

Cash Flows from Capital and Related Financing Activities

Net purchase of capital assets	(7,147,810)
Principal and interest paid on capital debt	<u>(465,561)</u>

Net cash and cash equivalents used in capital and related financing activities (7,613,371)

Cash Flows from Investing Activities

Investment loss	(2,186,509)
Purchases of investment securities - Net of sales	<u>(43,093,468)</u>

Net cash and cash equivalents used in investing activities (45,279,977)

Net Increase in Cash and Cash Equivalents

14,715,925

Cash and Cash Equivalents - Beginning of year

268,900,760

Cash and Cash Equivalents - End of year

\$ 283,616,685

Classification of Cash and Cash Equivalents

Cash and investments	\$ 260,427,753
Restricted cash	<u>23,188,932</u>

Total cash and cash equivalents **\$ 283,616,685**

Reconciliation of Operating Income to Net Cash and Cash Equivalents from Operating Activities

Operating income	\$ 26,929,976
Adjustments to reconcile operating income to net cash and cash equivalents from operating activities:	
Depreciation	1,017,090
Changes in assets and liabilities:	
Account receivable	(10,034,192)
Due from other governmental units	(3,895,120)
Prepaid and other assets	(397,260)
Accrued wages and benefits	1,934,825
Accounts payable	51,672,133
Accrued wages and compensated absences	<u>381,821</u>

Net cash and cash equivalents provided by operating activities **\$ 67,609,273**

Significant Noncash Transactions - ICO contract liability reduction in the current year \$ 10,154,819

September 30, 2022

Note 1 - Nature of Business

Reporting Entity

Under the provisions of the Michigan Legislature Public Acts 375 and 376 of 2012, and effective October 1, 2013, Detroit Wayne Integrated Health Network (DWIHN) was created for the purpose of providing a comprehensive array of mental health and substance use services for the Charter County of Wayne, Michigan (the "County") residents, such as, but not limited to, inpatient, outpatient, partial day, residential, case management, prevention, consultation, and education. DWIHN was previously a department within the County. DWIHN is a separate legal entity and is not considered a related organization or component unit of the County.

Pursuant to House Bills 4862 and 4863, effective October 1, 2014, the duties and responsibilities of substance use disorders were transferred to the Prepaid Inpatient Health Plans (PIHP), which is DWIHN. The duties were previously performed by the City of Detroit, Michigan and SEMCA, referred to as the "Coordinating Agencies."

Program Operations

DWIHN's operations are governed under the provisions of Act 258 of the Public Act of Michigan of 1974, commonly known as the Mental Health Code (the "Code"). Pursuant to the Code, a board of directors (the "Board") was established to govern DWIHN. DWIHN is subject to federal government and Michigan Department of Health and Human Services (MDHHS) rules and regulations and the Code. DWIHN contracts with over 350 organizations. DWIHN provides administrative oversight and very little direct services to consumers.

Board of Directors

The Board consists of 12 members, 6 recommended by the mayor of the City of Detroit, Michigan and 6 recommended by the county executive. The recommendations are subject to the approval of the Wayne County Commission. Each board member is appointed for a three-year term.

Funding Sources

DWIHN receives its primary funding from the State through Medicaid and state General Fund contracts. The County provides local match funding in accordance with the Mental Health Code, which is used by DWIHN to leverage federal dollars and 10 percent of certain services incurred by uninsured consumers.

Changes in Funding Formula

In an effort to deinstitutionalize mental health services, state funding for public mental health services has evolved. Prior to October 1, 1998, Michigan mental health agency programs billed Medicaid on a fee-for-service (FFS) basis.

Effective for services provided on and after October 1, 1998, the Health Care Financing Administration (HCFA) approved Michigan's 1915(b) waiver request to implement a managed-care plan for Medicaid-reimbursed mental health services. These managed-care plans allowed Community Mental Health Services Programs (CMHSP) to manage, provide/arrange, and pay for Medicaid mental health services covered by the CMHSP. In addition, the CMHSP receives a capitated rate on a per member per month basis to provide services and is responsible for directly reimbursing the service providers who render these services. In the fiscal year ended September 30, 2000, DWIHN and MDHHS entered into a Specialty Services and Supports Managed Care Contract (the "Managed Care Contract").

In 2002, CMHSPs were required to submit an application for participation (AFP) for scoring by MDHHS in order to be considered eligible to qualify as a Prepaid Inpatient Health Plan entity capable of administering the managed specialty services under the waiver program.

Note 2 - Significant Accounting Policies

Accounting and Reporting Principles

The financial statements of the Detroit Wayne Integrated Health Network have been prepared in conformity with generally accepted accounting principles (GAAP), as applicable to governmental units. The more significant of DWIHN's accounting policies are described below.

Report Presentation

This report includes the fund-based statements of DWIHN. In accordance with government accounting principles, a government-wide presentation with program and general revenue is not applicable to special purpose governments engaged only in business-type activities.

DWIHN adopted Governmental Accounting Standards Board (GASB) Statement No. 34, *Basic Financial Statements and Management's Discussion and Analysis - for State and Local Governments*. Under GASB No. 34, DWIHN is classified as a special purpose government and is required to present statements required for enterprise funds. DWIHN reports its operations in the basic financial statements in an enterprise fund. The Medicaid Risk Reserve Fund is governed by the contract with MDHHS and is restricted for cost overruns related to the Medicaid contract. The net position in the Medicaid Risk Reserve Fund at September 30, 2022 was \$61,277,705.

Proprietary funds distinguish operating revenue and expenses from nonoperating items. Operating revenue and expenses generally result from providing services in connection with a proprietary fund's principal ongoing operations. The principal operating revenue of DWIHN is charges related to serving its consumers (including primarily per member per month capitation and state and county appropriations). Operating expenses for DWIHN include cost of services, administrative expenses, and depreciation on capital assets. All revenue and expenses not meeting this definition are reported as nonoperating revenue and expenses.

Basis of Accounting

Basis of accounting refers to when revenue and expenses are recognized in the accounts and reported in the financial statements. Basis of accounting relates to the timing of the measurement made, regardless of the measurement focus applied.

The operations of the fund are accounted for with a separate set of self-balancing accounts that comprise its assets, liabilities, net position, revenue, and expenses, as appropriate. Government resources are allocated to and accounted for in individual funds based upon the purpose for which they are to be spent and the means by which spending activities are controlled. For the basic financial statements, there is one generic fund type and broad fund category as described below:

Proprietary fund - Enterprise fund - The fund is used to account for those activities that are financed and operated in a manner similar to private business. Proprietary funds use the economic resources measurement focus and the full accrual basis of accounting. Revenue is recorded when earned, and expenses are recorded when a liability is incurred, regardless of the timing of related cash flows. This means that all assets and all liabilities (whether current or noncurrent) associated with their activity are included on the statement of net position. Proprietary fund-type operating statements present increases (revenue) and decreases (expenses) in total net position. This enterprise fund of DWIHN accounts for its general operations and also reports amounts restricted for the Medicaid Risk Reserve allowed by the contract with MDHHS.

When both restricted and unrestricted resources are available for use, it is DWIHN's policy to use restricted resources first and then unrestricted resources as they are needed.

Note 2 - Significant Accounting Policies (Continued)

Cash and Cash Equivalents

DWIHN's cash and cash equivalents are held in depository accounts, institutional money market accounts, certificates of deposit, and short-term investments with a maturity of three months or less when acquired.

Investments

Investments are reported at fair value or estimated fair value. Short-term investments are reported at cost, which approximates fair value.

Accounts Receivable and Due from Other Governmental Units

Accounts receivable represent balances due from when DWIHN cost-settles with certain providers for amounts in excess of payments and costs incurred for services. The amounts of overpayment are determined through audits and/or cost reconciliation. An allowance for uncollectibles has been established based on management's estimate using historical trends. Due from other governmental units represents revenue not yet received from the county, state, and federal government.

Prepaid Expenses

Payments made to vendors for services that will benefit future periods are recorded as prepaid expenses in the accompanying statement of net position.

Capital Assets

Capital assets are defined by DWIHN as assets with an individual cost of more than \$5,000 and an estimated useful life in excess of one year. All assets are recorded at historical costs, and donated assets are recorded at acquisition value at the time of the donation. Capital assets are depreciated using the straight-line method over a period of 5-20 years.

Buildings, equipment, and vehicles are depreciated using the straight-line method over the following useful lives:

	Depreciable Life - Years
Buildings and improvements	20
Office equipment	5-7
Vehicles	5-7
Software	10
Computers	5-7
Leasehold improvements	4-5

Restricted Cash

The restricted cash balance of \$23,188,932 is maintained per DWIHN's construction loan agreements.

Accounts Payable and Due to Other Governmental Units

Accounts payable balances include final expenditures due to service providers for the current fiscal year. Also included within accounts payable is approximately \$40.2 million of retention payments and \$26 million in provider financial stability payments, which will be paid to providers. Due to other governmental units represents amounts owed to the State of Michigan.

September 30, 2022**Note 2 - Significant Accounting Policies (Continued)*****Compensated Absences***

Employees earn paid time off (PTO) benefits based, in part, on length of service. PTO is fully vested when earned. Upon separation from service, employees are paid accumulated PTO based upon the nature of separation (death, retirement, or termination). Certain limitations have been placed on the hours of PTO leave that employees may accumulate and carry over for payment at termination, retirement, or death. Unused hours exceeding these limitations are forfeited.

Unearned Revenue

DWIHN reports unearned revenue in connection with resources that have been received but not yet earned. Unearned revenue includes amounts totaling \$41,503,365 of MDHHS contract funding for Healthy Michigan saving and General Fund carryover that was unearned at September 30, 2022 and will be carried over to be expended in the subsequent fiscal year.

State Grants and Contracts Revenue

DWIHN's primary funding source was from the State of Michigan through Medicaid (traditional and Healthy Michigan) and state General Fund contracts totaling approximately \$894.5 million and \$27.5 million, respectively, for the year ended September 30, 2022; this includes prior years' saving and carryovers. The remaining balance was composed of various other state grant contracts.

Provider Contracts

DWIHN contracts with various community-based organizations to deliver mental health and substance use disorder (SUD) services to adults, individuals with developmental disabilities, and children with serious emotional disturbances. In addition, DWIHN contracts with several county departments to administer mental health services, including, but not limited to, the jails, Children and Family Services, and Third Circuit Court.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

Upcoming Accounting Pronouncements

In March 2020, the GASB issued Statement No. 94, *Public-Private and Public-Public Partnerships and Availability Payment Arrangements*, to bring a uniform guidance on how to report public-private and public-public partnership arrangements. As a result, transferors in public-private or public-public arrangements will recognize receivables for installment payments; deferred inflows of resources; and, when applicable, capital assets. Operators will recognize liabilities for installment payments and intangible right-to-use assets, and, when applicable, deferred outflows of resources and liabilities for assets being transferred. This statement also provides guidance for accounting and financial reporting for availability payment arrangements, in which a government compensates an operator for services such as designing, constructing, financing, maintaining, or operating an underlying asset for a period of time in an exchange on exchange-like transaction. The provisions of this statement are effective for DWIHN's financial statements for the year ending September 30, 2023.

Note 2 - Significant Accounting Policies (Continued)

In May 2020, the Governmental Accounting Standards Board issued Statement No. 96, *Subscription-Based Information Technology Arrangements (SBITAs)*, which defines SBITAs and provides accounting and financial reporting for SBITAs by governments. This statement requires a government to recognize a subscription liability and an intangible right-to-use subscription asset for SBITAs. DWIHN is currently evaluating the impact this standard will have on the financial statements when adopted. The provisions of this statement are effective for DWIHN's financial statements for the year ending September 30, 2023.

In June 2022, the Governmental Accounting Standards Board issued Statement No. 100, *Accounting Changes and Error Corrections*, which enhances the accounting and financial reporting requirements for accounting changes and error corrections. The provisions of this statement are effective for DWIHN's financial statements for the year ending September 30, 2024.

In June 2022, the Governmental Accounting Standards Board issued Statement No. 101, *Compensated Absences*, which updates the recognition and measurement guidance for compensated absences under a unified model. This statement requires that liabilities for compensated absences be recognized for leave that has not been used and leave that has been used but not yet paid in cash or settled through noncash means and establishes guidance for measuring a liability for leave that has not been used. It also updates disclosure requirements for compensated absences. The provisions of this statement are effective for DWIHN's financial statements for the year ending September 30, 2025.

Subsequent Events

The financial statements and related disclosures include evaluation of events up through and including March 17, 2023, which is the date the financial statements were available to be issued.

Note 3 - Deposits and Investments

Michigan Compiled Laws Section 129.91 (Public Act 20 of 1943, as amended) authorizes local governmental units to make deposits and invest in the accounts of federally insured banks, credit unions, and savings and loan associations that have offices in Michigan. The law also allows investments outside the state of Michigan when fully insured. The local unit is allowed to invest in bonds, securities, and other direct obligations of the United States or any agency or instrumentality of the United States; repurchase agreements; bankers' acceptances of United States banks; commercial paper rated within the two highest classifications that matures no more than 270 days after the date of purchase; obligations of the State of Michigan or its political subdivisions that are rated as investment grade; and mutual funds composed of investment vehicles that are legal for direct investment by local units of government in Michigan.

DWIHN has designated three banks for the deposit of its funds. The investment policy adopted by the board in accordance with Public Act 196 of 1997 has authorized investments in any securities allowed under the act. DWIHN's deposits and investment policies are in accordance with statutory authority.

DWIHN's cash and investments are subject to several types of risk, which are examined in more detail below:

Custodial Credit Risk of Bank Deposits

Custodial credit risk is the risk that, in the event of a bank failure, DWIHN's deposits may not be returned to it. At year end, DWIHN had bank deposits totaling approximately \$334,000,000 (certificates of deposit and checking and savings accounts) that were uninsured and uncollateralized. DWIHN believes that, due to the dollar amounts of cash deposits and the limits of Federal Deposit Insurance Corporation (FDIC) insurance, it is impractical to insure all deposits. As a result, DWIHN evaluates each financial institution it deposits funds with and assesses the level of risk of each institution; only those institutions with an acceptable estimated risk level are used as depositories.

Note 3 - Deposits and Investments (Continued)

Interest Rate Risk

Interest rate risk is the risk that the value of investments will decrease as a result of a rise in interest rates. DWIHN's investment policy does not have specific limits in excess of state law on investment maturities as a means of managing its exposure to fair value losses arising from increasing interest rates.

At year end, DWIHN had the following investments and maturities:

Investment	Carrying Value	Less Than 1 Year	1-5 Years
Municipal obligations	\$ 12,074,804	\$ 2,894,169	\$ 9,180,635
U.S. federal agencies	30,085,599	3,832,418	26,253,181
U.S. government obligations	18,787,687	2,543,189	16,244,498
Negotiable certificates of deposit	980,765	-	980,765
Collateralized mortgage obligations	8,794,403	6,488,043	2,306,360
Mortgage-backed securities	215,238	215,238	-
Total	\$ 70,938,496	\$ 15,973,057	\$ 54,965,439

Credit Risk

State law limits investments to specific government securities, certificates of deposit and bank accounts with qualified financial institutions, commercial paper with specific maximum maturities and ratings when purchased, bankers acceptances of specific financial institutions, qualified mutual funds, and qualified external investment pools, as identified in the list of authorized investments above. DWIHN's investment policy does not have specific limits in excess of state law on investment credit risk. As of year end, DWIHN's investments were rated as follows:

Investment	Fair Value	Rating	Rating Organization
Municipal obligations	\$ 12,074,804	Aa1	Moody's
U.S. federal agencies	30,085,599	Aaa	Moody's
U.S. government obligations	18,787,687	Aaa	Moody's
Negotiable certificates of deposit	980,765	N/R	N/A
Collateralized mortgage obligations	8,794,403	Aaa	Moody's
Mortgage-backed securities	215,238	N/R	N/A
Total	\$ 70,938,496		

Concentration of Credit Risk

State law limits allowable investments but does not limit concentration of credit risk, as identified in the list of authorized investments above. DWIHN's investment policy specifies that no more than 40 percent of the total investment portfolio will be invested in a single security type, and no more than 40 percent of the total investment portfolio shall be invested in assets issued or managed by a single financial institution. At September 30, 2022, DWIHN had all investments held in various certificates of deposit and other securities.

Note 4 - Fair Value Measurements

DWIHN categorizes its fair value measurements within the fair value hierarchy established by generally accepted accounting principles. The hierarchy is based on the valuation inputs used to measure the fair value of the assets. Level 1 inputs are quoted prices in active markets for identical assets, Level 2 inputs are significant other observable inputs, and Level 3 inputs are significant unobservable inputs. Investments that are measured at fair value using net asset value per share (or its equivalent) as a practical expedient are not classified in the fair value hierarchy.

September 30, 2022

Note 4 - Fair Value Measurements (Continued)

In instances where inputs used to measure fair value fall into different levels in the fair value hierarchy, fair value measurements in their entirety are categorized based on the lowest level input that is significant to the valuation. DWIHN's assessment of the significance of particular inputs to these fair value measurements requires judgment and considers factors specific to each asset.

DWIHN has the following recurring fair value measurements as of September 30, 2022:

	Assets Measured at Fair Value on a Recurring Basis		
	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Assets			
Debt securities:			
Municipal obligations	\$ -	\$ 12,074,804	\$ -
U.S. federal agencies	-	30,085,599	-
U.S. government obligations	-	18,787,687	-
Negotiable certificates of deposit	-	980,765	-
Collateralized mortgage obligations	-	8,794,403	-
Mortgage-backed securities	-	215,238	-
Total assets	\$ -	\$ 70,938,496	\$ -

The fair value of DWIHN's investments at September 30, 2022 was determined primarily based on Level 2 inputs. DWIHN estimates the fair value of these investments using the matrix pricing model, which includes inputs, such as interest rates and yield curves, that are observable at commonly quoted intervals.

Note 5 - Accounts Receivable and Due from Other Governmental Units

DWIHN cost-settles with certain providers for amounts in excess of payments and costs incurred for services. The accounts receivable balance at September 30, 2022 was approximately \$8,315,000, which is due from certain providers for cost settlements.

The due from other governmental units balance at September 30, 2022 was approximately \$30,392,000. This consists of approximately \$2,285,000 due from Wayne County, Michigan for Public Act 2 funds, approximately \$27,713,000 due from the State of Michigan, and approximately \$394,000 due from the federal government.

Note 6 - Capital Assets

Capital asset activity of DWIHN was as follows:

Business-type Activities

	Balance October 1, 2021	Additions	Disposals and Adjustments	Balance September 30, 2022
Capital assets not being depreciated:				
Land	\$ 840,000	\$ -	\$ -	\$ 840,000
Construction in progress	1,092,169	6,441,914	-	7,534,083
Subtotal	1,932,169	6,441,914	-	8,374,083
Capital assets being depreciated:				
Buildings and improvements	13,349,921	-	-	13,349,921
Computers	1,590,334	-	-	1,590,334
Vehicles	5,806	-	-	5,806
Office equipment	1,674,567	-	(215,360)	1,459,207
Software	2,773,515	713,116	-	3,486,631
Subtotal	19,394,143	713,116	(215,360)	19,891,899
Accumulated depreciation:				
Buildings and improvements	3,441,094	667,496	-	4,108,590
Computers	1,236,207	137,111	-	1,373,318
Office equipment	1,543,153	44,592	(215,360)	1,372,385
Software	2,145,399	167,891	-	2,313,290
Subtotal	8,365,853	1,017,090	(215,360)	9,167,583
Net capital assets being depreciated	11,028,290	(303,974)	-	10,724,316
Net capital assets	\$ 12,960,459	\$ 6,137,940	\$ -	\$ 19,098,399

Construction Commitments

DW IHN has active construction projects at year end. The projects include the Milwaukee Ave. Care Center Renovations and the Woodward Ave. Admin Office Relocation and Renovation. At year end, DW IHN's commitments with contractors are as follows:

	Spent to Date	Remaining Commitment
Milwaukee Ave. Care Center Renovations	\$ 2,800,000	\$ 9,700,000
Woodward Ave. Admin Office Relocation and Renovation	2,200,000	11,800,000
Total	\$ 5,000,000	\$ 21,500,000

Note 7 - Long-term Debt

On August 28, 2014 and last amended on June 10, 2016, DWIHN signed a 7-year term loan (the "term loan") and a 7-year construction note payable (the "construction note payable") to be paid on a 20-year amortization period with a financial institution (collectively, the "notes payable"). The notes payable totaled \$6.96 million and were for the construction phase of a new headquarters building and for equipment purchases. The construction note payable matures on April 10, 2023, and the term loan matures on June 10, 2023. In December 2022, both of these note payables were paid off in their entirety.

On August 17, 2022, DWIHN entered into a construction loan and an equipment loan with a financial institution for funding of the renovations of the Milwaukee Ave. Care Center (the "Milwaukee loans"). The Milwaukee loans include a construction loan (the "Milwaukee construction loan"), with available draws up to \$9.53 million, and an equipment loan (the "Milwaukee equipment loan"), with available draws up to \$1.28 million. The conversion date for the Milwaukee loans is February 17, 2024, at which point the Milwaukee loans are converted from a draw-to loan to an amortizing term loan for the remaining 42-month term. At the point of conversion, principal payments on the Milwaukee construction loan will be due monthly to be paid on a 20-year amortization period, with the remaining principal due in full on August 15, 2027. At the point of conversion, principal payments on the Milwaukee equipment loan will be due monthly to be paid on a 5-year amortization period, with the remaining principal due in full on August 17, 2027.

Interest on the Milwaukee construction loan is due monthly at a per annum rate equal to the secured overnight financing rate (SOFR) plus 2.65 percent on the unpaid principal balance. Interest on the Milwaukee equipment loan is due monthly at a per annum rate equal to SOFR or 0.00 percent, whichever is greater, plus 2.65 percent on the unpaid principal balance.

On August 17, 2022, DWIHN entered into a construction loan and an equipment loan with a financial institution for funding of the renovations of the Woodward Ave. Admin Office (the "Woodward loans"). The Woodward loans include a construction loan (the "Woodward construction loan"), with available draws up to \$11.4 million, and an equipment loan (the "Woodward equipment loan"), with available draws up to \$960,000. The conversion date for the Woodward loans is February 17, 2024, at which point the Woodward loans are converted from a draw-to loan to an amortizing term loan for the remaining 42-month term. At the point of conversion, principal payments on the Woodward construction loan will be due monthly to be paid on a 20-year amortization period, with the remaining principal due in full on August 15, 2027. At the point of conversion, principal payments on the Woodward equipment loan will be due monthly to be paid on a 5-year amortization period, with the remaining principal due in full on August 17, 2027.

Interest on the Woodward construction loan is due monthly at a per annum rate equal to the SOFR plus 2.65 percent on the unpaid principal balance. Interest on the Woodward equipment loan is due monthly at a per annum rate equal to the SOFR or 0.00 percent, whichever is greater, plus 2.65 percent on the unpaid principal balance.

There were no draws on the Woodward loans or Milwaukee loans at September 30, 2022.

As of September 30, 2022, DWIHN's long-term debt was as follows:

	Interest Rate Ranges	Principal Maturity Ranges	Beginning Balance	Additions	Reductions	Ending Balance	Due within One Year
Direct borrowings and direct placements - General obligations	3.3%-3.9%	\$7,447-\$3,296,814	\$ 5,235,238	\$ -	\$ 272,585	\$ 4,962,653	\$ 4,962,653
Accumulated compensated absences			1,357,486	1,856,032	1,474,212	1,739,306	1,739,306
Total			\$ 6,592,724	\$ 1,856,032	\$ 1,746,797	\$ 6,701,959	\$ 6,701,959

Note 7 - Long-term Debt (Continued)

Debt Service Requirements to Maturity

Annual debt service requirements to maturity for the above liability are as follows:

Year Ending September 30	Principal	Interest	Total
2023	\$ 4,962,653	\$ 115,170	\$ 5,077,823

The Milwaukee and Woodward loans require certain financial covenants and reporting requirements. DWIHN was in compliance with these requirements for the year ended September 30, 2022.

Note 8 - Defined Contributions Pension Plan

DWIHN provides pension benefits to all of its full-time employees through a defined contribution plan administered by the Michigan Employees' Retirement System (MERS). In a defined contribution plan, benefits depend solely on amounts contributed to the plan plus investment earnings. Employees are required to contribute. The plan provides for the employee to contribute up to a 2 percent pretax contribution and up to an 8 percent employer match. Union employees are fully vested after three years of service, and employees at will are fully vested after one year of service.

The employee and employer contributions for the defined contribution plan were \$499,937 and \$1,999,800, respectively, for the year ended September 30, 2022.

Note 9 - Risk Management and Contingent Liabilities

Amounts received or receivable from grantor/contract agencies are subject to audit and potential adjustment by those agencies, principally the state and federal governments. As described in Note 2, DWIHN receives the majority of its funding through MDHHS. MDHHS uses a compliance examination and cost settlement process to determine disallowed costs and final receivable and payable balances of DWIHN. Historically, the cost settlement process has taken two or more years for MDHHS to complete. Any disallowed costs, including amounts already collected, may constitute a liability of DWIHN. The amount, if any, of costs that may be disallowed by the grantor or contract agencies cannot be determined at this time, although DWIHN expects such amounts, if any, to be immaterial.

DWIHN is periodically a defendant in various lawsuits, pending or threatened, in which the outcome is not presently determinable. In addition, DWIHN is exposed to various risks of loss related to property loss, torts, errors and omissions, and employee injuries (workers' compensation), as well as medical benefits provided to employees. DWIHN has purchased commercial insurance policies to cover property, torts, employee injuries, and medical benefits. Accruals for claims, litigation, and assessments are recorded by DWIHN when those amounts are estimable and probable at year end.

Other Supplemental Information

Detroit Wayne Integrated Health Network

Other Supplemental Information

Statement of Revenue, Expenses, and Changes in Net Position Budgetary Comparison Year Ended September 30, 2022

	Original Budget (unaudited)	Amended Budget (unaudited)	Actual	Variance with Amended Budget - favorable (unfavorable)
Operating Revenue				
State grant and contracts	\$ 849,130,904	\$ 914,244,666	\$ 934,723,254	\$ 20,478,588
Charges for services	9,926,123	9,926,123	21,439,480	11,513,357
Local grants and contracts	22,089,636	21,967,986	28,596,978	6,628,992
Federal grants and contracts	25,031,957	26,493,046	24,192,930	(2,300,116)
Total operating revenue	906,178,620	972,631,821	1,008,952,642	36,320,821
Operating Expenses				
Personnel	\$ 24,804,948	\$ 25,648,321	\$ 25,985,411	\$ (337,090)
Fringe benefits	9,921,979	9,780,061	9,165,069	614,992
Substance use disorder services	57,243,781	53,551,055	57,627,494	(4,076,439)
Austism services	69,562,554	71,224,235	74,833,930	(3,609,695)
MI Health Link	9,681,012	9,876,123	13,979,825	(4,103,702)
Adult services	270,843,514	295,959,424	316,121,655	(20,162,231)
Children services	74,518,243	85,486,364	72,391,031	13,095,333
Intellectually disabled	351,633,620	378,866,668	376,610,520	2,256,148
Grant programs	9,610,582	13,849,130	9,539,525	4,309,605
State of Michigan	19,830,188	19,830,188	18,795,727	1,034,461
Operating costs	7,501,407	7,533,460	5,955,389	1,578,071
Depreciation	1,766,792	1,766,792	1,017,090	749,702
Total expenses	906,918,620	973,371,821	982,022,666	(8,650,845)
Operating (Loss) Income	(740,000)	(740,000)	26,929,976	27,669,976
Nonoperating Revenue (Expense)				
Investment income/loss	1,000,000	1,000,000	(2,186,509)	(3,186,509)
Gain/Loss on sale of assets	-	-	7,220	7,220
Interest paid on debt	(260,000)	(260,000)	(192,976)	67,024
Total nonoperating revenue	740,000	740,000	(2,372,265)	(3,112,265)
Change in Net Position	\$ -	\$ -	\$ 24,557,711	\$ 24,557,711

Detroit Wayne Integrated Health Network

**Federal Awards Supplemental Information
September 30, 2022**

Independent Auditor's Reports

Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance 1

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* 2-3

Report on Compliance for Each Major Federal Program and Report on Internal Control Over
Compliance Required by the Uniform Guidance 4-6

Schedule of Expenditures of Federal Awards 7

Notes to Schedule of Expenditures of Federal Awards 8

Schedule of Findings and Questioned Costs 9-11

Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

Independent Auditor's Report

To the Board of Directors
Detroit Wayne Integrated Health Network

We have audited the financial statements of Detroit Wayne Integrated Health Network (DWIHN) as of and for the year ended September 30, 2022, and the related notes to the financial statements, which collectively comprise DWIHN's basic financial statements. We issued our report thereon dated March 17, 2023, which contained an unmodified opinion on those financial statements. Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the basic financial statements. We have not performed any procedures with respect to the audited financial statements subsequent to March 17, 2023.

The accompanying schedule of expenditures of federal awards is presented for the purpose of additional analysis, as required by the Uniform Guidance, and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The 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 expenditures of federal awards is fairly stated in all material respects in relation to the financial statements as a whole.

Plante & Moran, PLLC

March 17, 2023

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*

Independent Auditor's Report

To Management and the Board of Directors
Detroit Wayne Integrated Health Network

We have audited, 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, the basic financial statements of Detroit Wayne Integrated Health Network (DWIHN) as of and for the year ended September 30, 2022 and the related notes to the basic financial statements, which collectively comprise DWIHN's basic financial statements, and have issued our report thereon dated March 17, 2023.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered DWIHN'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 DWIHN's internal control. Accordingly, we do not express an opinion on the effectiveness of DWIHN'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 DWIHN'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, and, therefore, material weaknesses or significant deficiencies may exist that were not identified. We identified a certain deficiency in internal control, described in the accompanying schedule of findings and questioned costs as Finding 2022-001, that we consider to be a material weakness.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether DWIHN'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*.

DWIHN's Response to the Finding

Government Auditing Standards require the auditor to perform limited procedures on DWIHN's response to the finding identified in our audit and described in the accompanying schedule of findings and questioned costs. DWIHN's response was not subjected to the other auditing procedures applied in the audit of the financial statements, and, accordingly, we express no opinion on it.

To Management and the Board of Directors
Detroit Wayne Integrated Health Network

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 DWIHN's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering DWIHN's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Plante & Morse, PLLC

March 17, 2023

Report on Compliance for Each Major Federal Program and Report on Internal Control Over Compliance
Required by the Uniform Guidance

Independent Auditor's Report

To the Board of Directors
Detroit Wayne Integrated Health Network

Report on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Detroit Wayne Integrated Health Network's (DWIHN) compliance with the types of compliance requirements identified as subject to audit in the Office of Management and Budget (OMB) Compliance Supplement that could have a direct and material effect on each of DWIHN's major federal programs for the year ended September 30, 2022. DWIHN's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, DWIHN complied, in all material respects, with the 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, 2022.

Basis for Opinion on Each Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); 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 Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (the "Uniform Guidance"). Our responsibilities under those standards and the Uniform Guidance are further described in the *Auditor's Responsibilities for the Audit of Compliance* section of our report.

We are required to be independent of DWIHN and to meet our other ethical responsibilities in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of DWIHN's compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to the DWIHN's federal programs.

To the Board of Directors
Detroit Wayne Integrated Health Network

Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on DWIHN's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and, therefore, is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about DWIHN's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding DWIHN's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of DWIHN's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances 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 DWIHN's internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Report on 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 a 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 *Auditor's Responsibilities for the Audit of Compliance* section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

To the Board of Directors
Detroit Wayne Integrated Health Network

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.

Plante & Morse, PLLC

March 17, 2023

Detroit Wayne Integrated Health Network

Schedule of Expenditures of Federal Awards

Year Ended September 30, 2022

Federal Agency/Pass-through Agency/Program Title	Assistance Listing Number	Pass-through Entity Identifying Number	Total Amount Provided to Subrecipients	Federal Expenditures
U.S. Department of Housing and Urban Development				
Direct funded - Continuum of Care Program	14.267		\$ 1,605,057	\$ 1,627,404
U.S. Department of the Health and Human Services				
Block Grants for Community Mental Health Services				
Passed through the Michigan Department of Health and Human Services:				
COVID-19 Mental Health COVID Supplemental Services	93.958	20221106-00	-	455,862
COVID-19 CCBHC Non-Medicaid Operations Support	93.958	20225050-00	-	219,000
Harvest Retreat Drop-In Center	93.958	20221103-00	-	5,000
Clubhouse Engagement	93.958	20221231-001	-	5,486
Perfect Place Drop-In Center	93.958	20221105-00	-	7,500
Infant and Early Child Mental Health Consultation	93.958	20221332-00	24,514	24,514
Veteran's Systems Navigator	93.958	20220876-00	-	77,325
Integrated Healthcare	93.958	20222018-00	-	175,238
Trauma Informed Care	93.958	20220877-001	74,882	154,415
Behavioral Health Home	93.958	20220874-00	338,526	443,747
Child System of Care	93.958	20221103-00	733,159	989,557
Total Block Grants for Community Mental Health Services			1,171,081	2,557,644
Block Grants for Prevention and Treatment of Substance Abuse				
Passed through the Michigan Department of Health and Human Services:				
COVID-19 Prevention II COVID	93.959	20223674-003	-	470,112
COVID-19 Substance Use Disorder Administration COVID	93.959	20223613-003	-	233,803
COVID-19 Treatment COVID	93.959	20223612-003	-	1,800,200
COVID-19 Women's Specialty Services COVID	93.959	20223675-003	-	395,181
COVID-19 ARPA Administration	93.959	20224721-00	-	35,316
COVID-19 ARPA Prevention	93.959	20224738-00	-	151,730
COVID-19 ARPA Treatment and Access Administration	93.959	20224722-00	-	353,159
Treatment and Access Management	93.959	20223339-00	-	629,255
Womens' Specialty Services	93.959	20223311-00	-	6,292,550
Prevention	93.959	20223449-00	-	435,912
			-	3,179,619
Total Block Grants for Prevention and Treatment of Substance Abuse			-	13,976,837
Substance Abuse and Mental Health Services				
Passed through the Michigan Department of Health and Human Services - Pregnant and Postpartum Women-Pilot	93.243	20224159-00	-	88,026
Medicaid Cluster				
Passed through the Regents of the University of Michigan - Medicaid Cluster - Medical Assistance Program - Michigan Child Collaborative Care (MC3) Program	93.778	3006341919	-	75,601
Passed through the Michigan Department of Health and Human Services - Medical Assistance Program - Pre-Admission Screening Annual Resident Reviews	93.778	20222299-001	-	1,585,918
Total Medicaid Cluster			-	1,661,519
Passed through the Michigan Department of Health and Human Services - CCDF Cluster - Child Care and Development Block Grant - Infant and Early Childhood Mental Health Consultation	93.575	20221332-00	73,541	73,541
Opioid STR - State Opioid Response II	93.788	20223517-00	-	1,816,674
Mental Health Disaster Assistance and Emergency Mental Health:				
FEMA Mental Health Crisis	93.982	20223864-00	-	142,553
Tri-County Strong Crisis Counseling & Training	93.982	20224437-001	1,520,014	2,248,732
Total Mental Health Disaster Assistance and Emergency Mental Health			1,520,014	2,391,285
Total U.S. Department of Health and Human Services			2,764,636	22,565,526
Total federal awards			\$ 4,369,693	\$ 24,192,930

Notes to Schedule of Expenditures of Federal Awards

Year Ended September 30, 2022

Note 1 - Basis of Presentation

The accompanying schedule of expenditures of federal awards (the "Schedule") includes the federal grant activity of Detroit Wayne Integrated Health Network (DWIHN) under programs of the federal government for the year ended September 30, 2022. The information in the 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* (the "Uniform Guidance"). Because the Schedule presents only a selected portion of the operations of DWIHN, it is not intended to and does not present the financial position, changes in net position, or cash flows of DWIHN.

Note 2 - Summary of Significant Accounting Policies

Expenditures reported in the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, wherein certain types of expenditures are not allowable or are limited as to reimbursement. The pass-through entity identifying numbers are presented where available.

DWIHN has elected to use the 10 percent *de minimis* indirect cost rate to recover indirect costs, as allowed under the Uniform Guidance.

Schedule of Findings and Questioned Costs

Detroit Wayne Integrated Health Network

Schedule of Findings and Questioned Costs

Year Ended September 30, 2022

Section I - Summary of Auditor's Results

Financial Statements

Type of auditor's report issued: Unmodified

Internal control over financial reporting:

- Material weakness(es) identified? X Yes No
- Significant deficiency(ies) identified that are not considered to be material weaknesses? Yes X None reported
- Noncompliance material to financial statements noted? Yes X None reported

Federal Awards

Internal control over major programs:

- Material weakness(es) identified? Yes X No
- Significant deficiency(ies) identified that are not considered to be material weaknesses? Yes X None reported
- Any audit findings disclosed that are required to be reported in accordance with Section 2 CFR 200.516(a)? Yes X No

Identification of major programs:

ALN	Name of Federal Program or Cluster	Opinion
14.267	Continuum of Care	Unmodified
93.778	Medicaid Cluster	Unmodified
93.959	Block Grants for Prevention and Treatment of Substance Abuse	Unmodified
93.982	Mental Health Disaster Assistance and Emergency Mental Health	Unmodified

Dollar threshold used to distinguish between type A and type B programs: \$750,000

Auditee qualified as low-risk auditee? Yes X No

Detroit Wayne Integrated Health Network

Schedule of Findings and Questioned Costs (Continued)

Year Ended September 30, 2022

Section II - Financial Statement Audit Findings

Reference Number	Finding
2022-001	<p>Finding Type - Material weakness</p> <p>Criteria - Amounts recognized on DWIHN's balance sheet should be reported in accordance with contract terms at the onset of such contractual arrangements, ultimately ensuring such accounting and reporting is done in accordance with generally accepted accounting principles in the appropriate period.</p> <p>Condition - During the fiscal year ended September 30, 2022, management reevaluated an Integrated Care Organization (ICO) contract initially entered into in 2014 as part of the ICO Demonstration program and concluded that the liability previously reported for the cost settlement associated with the contract was overstated based on the terms of the contract.</p> <p>Context - The overstatement was corrected in fiscal year 2022 by reducing settlement liabilities and increasing charges for services revenue by approximately \$10.1 million. Based on management's position of the contract terms, with the exception of activity pertaining to Demonstration Year 1, remaining amounts previously reported as cost settlement liabilities for ICO activity spanning 2017 to 2021 should have been reported as charges for services revenue in those respective years.</p> <p>Cause - Although DWIHN has had processes and controls in place related to the recording of ICO contract activity for each of the Demonstration periods, those controls did not result in certain revenue amounts for periods after Demonstration Year 1 being recorded in the correct period.</p> <p>Effect - Prior years' revenue was understated, while liabilities were overstated.</p> <p>Recommendation - Based on discussions with management and audit procedures performed, we believe that this issue has been fully rectified in fiscal year 2022.</p> <p>Views of Responsible Officials and Planned Corrective Actions - Although the contract required the ICO to initiate an annual reconciliation process and the ICO never did so, in good faith, DWIHN's finance team assumed the contract required an annual cost settlement and recorded a liability. After review of the contract by both DWIHN's legal team and the ICO legal representative, it was determined that the contract only required a cost settlement for Year 1 of the demonstration pilot. Accordingly, DWIHN reduced the liability to reflect the amount owed to the ICO for Year 1 of the pilot.</p>

Section III - Federal Program Audit Findings

None



Detroit Wayne Integrated Health Network

Compliance Examination

September 30, 2022

Table of Contents

Independent Auditor's Report: In Relation to Opinion on Schedules	1
Independent Accountant's Report: Report on Compliance; Report on Internal Control Over Compliance	2-3
Examined Financial Status Report and Cost Settlement Schedules	4-29
Notes to the Schedules	30
Schedule of Findings and Questioned Costs	31

In Relation to Opinion on Schedules

Independent Auditor's Report

To the Board of Directors
Detroit Wayne Integrated Health Network

We have audited the financial statements of Detroit Wayne Integrated Health Network (DWIHN) as of and for the year ended September 30, 2022 and the related notes to the financial statements, which collectively comprise DWIHN's basic financial statements. We have issued our report thereon dated March 17, 2023, which contained an unmodified opinion on those financial statements. Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. We have not performed any procedures with respect to the audited financial statements subsequent to March 17, 2023.

The accompanying examined financial status report and cost settlement schedules, as identified in the table of contents, are presented for the purpose of additional analysis, as required by the Michigan Department of Health and Human Services, and are not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. Except for the contract reconciliation and settlement data, the 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, these schedules are fairly stated in all material respects in relation to the basic financial statements as a whole.

The contract reconciliation and settlement data have not been subjected to the auditing procedures applied in the audit of the basic financial statements, and, accordingly, we do not express an opinion or provide any assurance on them.

Plante & Moran, PLLC

April 13, 2023

Report on Compliance; Report on Internal Control Over Compliance

Independent Accountant's Report

To the Board of Directors and Management
Detroit Wayne Integrated Health Network

Report on Compliance

We have examined Detroit Wayne Integrated Health Network's (DWIHN) compliance with the specified requirements and specified criteria contained in the Community Mental Health Services Program (CMHSP) 2022 Compliance Examination Guidelines (i.e., compliance requirements A-E) and contained in the Prepaid Inpatient Health Plan (PIHP) 2022 Compliance Examination Guidelines (i.e., compliance requirements A-F), both of which were issued by the Michigan Department of Health and Human Services (MDHHS) (collectively, the "specified requirements") during the year ended September 30, 2022. Management is responsible for Detroit Wayne Integrated Health Network's compliance with the specified requirements. Our responsibility is to express an opinion on Detroit Wayne Integrated Health Network's compliance with specified requirements listed above based on our examination.

Our examination was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants. Those standards require that we plan and perform the examination to obtain reasonable assurance about whether Detroit Wayne Integrated Health Network complied, in all material respects, with the specified requirements referenced above. An examination involves performing procedures to obtain evidence about whether Detroit Wayne Integrated Health Network complied with the specified requirements. The nature, timing, and extent of the procedures selected depend on our judgment, including an assessment of the risks of material noncompliance, whether due to fraud or error. We believe that the evidence we obtained is sufficient and appropriate to provide a reasonable basis for our opinion.

We are required to be independent of DWIHN and to meet other ethical responsibilities in accordance with relevant ethical requirements relating to our examination.

Our examination does not provide a legal determination on Detroit Wayne Integrated Health Network's compliance with the specified requirements.

Opinion

In our opinion, DWIHN complied, in all material respects, with the specified requirements listed above during the year ended September 30, 2022.

Report on Internal Control Over Compliance

Management of Detroit Wayne Integrated Health Network is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements related to the Medicaid and General Fund contracts. In performing our examination of compliance, we obtained an understanding of Detroit Wayne Integrated Health Network's internal control over compliance relevant to the types of compliance requirements that could have a direct and material effect on the Medicaid and General Fund contracts, as specified in the MDHHS Compliance Examination Guidelines, to determine the examination procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for these contracts and to test and report on internal control over compliance in accordance with the Community Mental Health Services Program and Prepaid Inpatient Health Plan Compliance Examination Guidelines, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

To the Board of Directors and Management
Detroit Wayne Integrated Health Network

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 specified compliance requirement of the aforementioned contracts on a timely basis. A material weakness in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance such that there is a reasonable possibility that material noncompliance with a type of specified compliance requirement of the aforementioned contracts 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 specified compliance requirement of the aforementioned contracts 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 in internal control over compliance. Given these limitations, during our examination of compliance, we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that have not been identified.

Our examination of compliance was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

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 Michigan Department of Health and Human Services Community Mental Health Compliance Examination Guidelines. Accordingly, this report is not suitable for any other purpose.

Plante & Moran, PLLC

April 13, 2023

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES
CONCURRENT WAIVER PROGRAMS
MEDICAID CONTRACT SETTLEMENT WORKSHEET**

PIHP: DETROIT WAYNE INTEGRATED HEALTH NETWORK
 FISCAL YEAR: FY 21 / 22
 SUBMISSION TYPE: YE Final
 SUBMISSION DATE: 2/28/2023

1. Specialty Managed Care - Medicaid	Medicaid	Healthy MI Plan	Children's Waiver	SED	HSW	DHIP	Total	FY Indicator
a. Current Fiscal Year - Medicaid Revenue rec'd thru 9/30	649,223,893	133,483,694	2,247,915	1,262,018	75,924,762	550,670	\$ 862,892,972	FY 22
b. Current Fiscal Year - Medicaid Revenue Accruals						701,046	\$ 701,046	FY 22
c. Less Direct Care Wage Revenue	(40,064,270)	(3,124,573)	(266,441)	(58,427)	(8,407,188)		\$ (51,920,899)	FY 22
i. Total Medicaid Revenue - Current Year Settlement:	\$ 609,159,623	\$ 130,359,121	\$ 1,981,474	\$ 1,203,591	\$ 67,517,594	\$ 1,251,716	\$ 811,473,119	
j. Total Current Fiscal Year Performance Bonus Incentive Pool (PBIP) Withheld (enter as a positive amount)	5,823,728						\$ 5,823,728	
k. Explanation								

2. MDHHS - Direct Care Wage Revenue	Medicaid	Healthy MI Plan	Children's Waiver	SED	HSW	Total
a. Direct Care Wage - as of 9/30 (incl retroactivity)	40,064,270	3,124,573	266,441	58,427	8,407,188	51,920,899
b. (Less FY21 retroactive Direct Care Wage per MDHHS)	(115,628)	(20,195)	-	(203)	(55,299)	(191,325)
c. Direct Care Wage - after 9/30	107,078	28,121	2,142	203	28,121	165,665
d. Total	\$ 40,055,720	\$ 3,132,499	\$ 268,583	\$ 58,427	\$ 8,380,010	\$ 51,895,239

2.1 MDHHS - Direct Care Wage Settlement	Revenue	Expenditures	Lapse	Cost Above Authorizations
a. Direct Care Wage	51,895,239	43,437,744	(8,457,495)	-
b. Totals	\$ 51,895,239	\$ 43,437,744	\$ (8,457,495)	\$ -
c. Explanation:				

3. Medicaid Savings / Medicaid Lapse Calculation	Amount
a. Specialty Managed Care - Medicaid Capitation	817,296,847

1. Band # 1 (95 - 100%)	5%	40,864,842	PIHP retains
2. Band # 2 (90 - 95%)	5%	40,864,842	Shared PIHP / MDHHS

b. Balance Available for Savings (from Medicaid FSR)	-				
b1. Balance Available for Savings (from Healthy Michigan FSR)	38,711,991				
b2. Total Available for Savings	38,711,991				
			Total Lapse	Total Earned Savings	Total Savings Corridor
c. 1. Band # 1	38,711,991			38,711,991	38,711,991
2. Sub-Total - Band # 1	-				
3. Band # 2	-				
4. Sub-Total - Band # 2	-				
5. Band # 3	-				
6. Totals			\$ -	\$ 38,711,991	\$ 38,711,991

4. Summary of Total Savings / Lapse	Total Lapse	Total Earned Savings	Total Savings Corridor	% of Savings by Funding
1. Total Disposition of Medicaid Savings / Lapse		-	-	0%
2. Total Disposition of Healthy Michigan Savings / Lapse		38,711,991	38,711,991	100%
3. Total Savings / Lapse	\$ -	\$ 38,711,991	\$ 38,711,991	100%

5. Medicaid Savings - Prior Year Earnings to Expend	FY	FY	FY	FY	Total
a. Prior Year Medicaid Savings Earned - Medicaid	13,300,334				13,300,334
b. Current Year Expenditures - Medicaid	13,300,334				13,300,334
c. Prior Year Medicaid Savings Earned - HMP	26,469,643				26,469,643
d. Current Year Expenditures - HMP	26,469,643				26,469,643
e. Balance of Medicaid Savings:	\$ -	\$ -	\$ -	\$ -	\$ -

6. Narrative: Both CRCS and Contract Settlement Worksheet

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES
CONCURRENT WAIVER PROGRAMS
MEDICAID/HMP CONTRACT RECONCILIATION AND CASH SETTLEMENT**

PIHP: DETROIT WAYNE INTEGRATED HEALTH NETWORK
FISCAL YEAR: FY 21 / 22
PERIOD COVERED: YE Final
SUBMISSION DATE: 2/28/2023

		PIHP Contract Cost Settled
1. Medicaid Services - Available Resources		
a.	Total Managed Care Capitation (Medicaid & Healthy Michigan Plan) incl DCW & CCBHC Admin less CCBHC PPS-1 Base Capitation	\$ 851,509,642
b.	1st & 3rd Party Collections - Medicaid (FSR A 121)	-
c.	1st & 3rd Party Collections - HMP (FSR AI 121)	-
d.	Prior Year Medicaid Savings (FSR A 123 + FSR AI 123)	39,769,977
e.	ISF Abatement - Medicaid / HMP (FSR A 124 + FSR AI 124)	-
f.	Psych Hospital HRA (FSR A 125 + FSR AI 125)	29,758,652
g.	Redirected FROM CMHSP to CMHSP Contracts (FSR A 302 + FSR AI 302)	-
h.	Redirected FROM Non-MDHHS Earned Contracts (FSR A 303 + FSR AI 303)	-
i.	Redirected FROM Restricted Fund Balance (FSR A 315 + AI 315 + AK 315)	-
j.	Sub-Total Other Medicaid Services - Resources	\$ 69,528,629
k.	Total Medicaid Services - Available Resources	\$ 921,038,271

2. Medicaid Services - Expenditures		
a.	PIHP Insurance Provider Assessment (IPA) Tax (FSR A 201 + FSR AI 201)	10,340,041
b.	Medicaid Services (incl DCW) (FSR A 202 + A 206 - A 122 - A 325)	677,828,520
b.1	Healthy Michigan Plan Services (incl DCW) (FSR AI 202 + AI 205 - AI 122 - AI 325)	98,498,197
b.2	MI Health Link Medicaid Services (FSR A 205)	53,943,375
c.	Deposits - ISF Medicaid / HMP (FSR A 203 + FSR AI 203)	3,500,000
d.	Psych Hospital HRA (FSR A 204 + FSR AI 204)	29,758,652
e.	Sub-Total Medicaid Services - Expenditures	\$ 873,868,785
f.	Redirected TO CMHSP to CMHSP Contracts (FSR A 301 + FSR AI 301)	-
g.	Redirected TO CCBHC (FSR A 301a + FSR AI 301b)	-
h.	Redirected TO MI Health Link (FSR A 301c)	-
i.	Sub-Total Medicaid Services - Redirected Expenditures	\$ -
j.	Total Medicaid Services - Expenditures	\$ 873,868,785

3. Net Medicaid Services Surplus / (Deficit)		
a.	Medicaid Funding Surplus / (Deficit)	47,169,486
b.	Less: Direct Care Wage Surplus / (Deficit) (Medicaid worksheet 2.1.b)	8,457,495
c.	Net Medicaid Services Surplus / (Deficit)	\$ 38,711,991

4. Disposition		Amount
a. Surplus		
1.	Transfer to Fund Balance - Medicaid Savings Earned	(38,711,991)
2.	Lapse to MDHHS - Contract Settlement	-
3.	Total Disposition - Surplus	\$ (38,711,991)
b. Deficit		
1.	Redirected from General Fund (FSR A 331 + AI 331 + AK 331)	-
2.	Redirected from Local (FSR A 332 + AI 332 + AK 332)	-
3.	Redirected Risk Corridor - PIHP Share (FSR A 333 + AI 333)	-
4.	Redirected Risk Corridor - MDHHS Share (FSR A 334 + AI 334)	-
5.	Redirected from Restricted Fund Balance (FSR A 335 + AI 335 + AK 335)	-
6.	Total Disposition - Deficit	\$ -

5. Cash Settlement: (Due MDHHS) / Due PIHP		Amount
a.	Forced Lapse to MDHHS	(8,457,495)
b.	Lapse to MDHHS - Contract Settlement	-
c.	Risk Corridor - MDHHS Share	-
d.	Return of Prior Year Medicaid Savings	-
e.	Misc (please explain)	-
f.	Misc (please explain)	-
g.	Total Cash Settlement: (Due MDHHS) / Due PIHP	\$ (8,457,495)

6. Medicaid MDHHS Commitment		Amount
a.	MDHHS / PIHP Medicaid Funded Expenditures	760,902,412
b.	Earned Medicaid Savings	38,711,991
c.	Sub-Total MDHHS Commitment	\$ 799,614,403
d.	Risk Corridor - MDHHS Share	-
e.	Total MDHHS Medicaid Commitment	\$ 799,614,403
f.	General Fund Supplement for Unfunded Medicaid	-

7. Report Certification

This is to certify accuracy and completeness of this report.

This certification has been moved to the CERTIFICATION OF MDHHS CONTRACT SCHEDULE E REPORT SUBMISSIONS form.

Questions should be directed to:

This contact information has been moved to the CERTIFICATION OF MDHHS CONTRACT SCHEDULE E REPORT SUBMISSIONS form.

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES CONCURRENT
WAIVER PROGRAMS CONTRACT
FINANCIAL STATUS REPORT - MEDICAID**

PIHP:	DETROIT WAYNE INTEGRATED HEALTH NETWORK		YEAR TO DATE REPORTING	
	FISCAL YEAR:	FY 21 / 22	A	I
	SUBMISSION TYPE:	YE Final	Regional Authority / Reporting Board	PIHP Grand Total
	SUBMISSION DATE:	2/28/2023		
1	PIHP or CMHSP			

A	MEDICAID SERVICES - PIHP USE ONLY			
A	100	REVENUE		
A	101	Specialty Managed Care Medicaid Revenue	681,113,998	681,113,998
A	102	CCBHC Specialty Managed Care Medicaid Revenue	(10,420,915)	(10,420,915)
A	103	CCBHC Medicaid Admin Revenue	220,328	220,328
A	115	Medicaid Managed Care - Affiliate Contracts	-	-
A	116	Direct Care Wage	48,762,740	48,762,740
A	120	Subtotal - Current Period Medicaid Services Revenue	719,676,151	719,676,151
A	121	1st & 3rd Party Collections - Medicare/Medicaid Consumers - Rptng Bd		-
A	122	1st & 3rd Party Collections - Medicare/Medicaid Consumers - Affiliate		-
A	123	Prior Year Medicaid Savings (Funding Current Year Expenses)	13,300,334	13,300,334
A	124	ISF Abatement		-
A	125	Psych Hospital Rate Adjuster (HRA)	18,321,996	18,321,996
A	140	Subtotal - Other Medicaid Revenue	31,622,330	31,622,330
A	190	TOTAL REVENUE	751,298,481	751,298,481
A	200	EXPENDITURE		
A	201	PIHP Insurance Provider Assessment (IPA) Tax	7,790,288	7,790,288
A	202	Medicaid Services	637,161,891	637,161,891
A	203	Payment into Medicaid ISF	-	-
A	204	Psych Hospital Rate Adjuster (HRA)	18,321,996	18,321,996
A	205	MI Health Link - Medicaid Services	53,943,375	53,943,375
A	206	Direct Care Wage	40,666,629	40,666,629
A	290	TOTAL EXPENDITURE	757,884,179	757,884,179
A	295	SUBTOTAL NET MEDICAID SERVICES SURPLUS (DEFICIT)	(6,585,698)	(6,585,698)
A	300	Redirected Funds (To) From		
A	301	(TO) CMHSP to CMHSP Earned Contracts - J304	-	-
A	301a	(TO) CCBHC - AC310a	-	-
A	301b	(TO) Healthy MI Plan - AI310	-	-
A	301c	(TO) MI Health Link Services (Medicare) - AK310	-	-
A	302	FROM CMHSP to CMHSP Earned Contracts - J301 (explain - section AB)		-
A	303	FROM Non-MDHHS Earned Contracts - K301 (explain - section AB)		-
A	310a	FROM Healthy MI Plan - AI301a	14,681,809	14,681,809
A	315	FROM Restricted Fund Balance - RES 1.c	-	-
A	325	Info only - Affiliate Total Redirected Funds - I390		-
A	330	Subtotal Redirected Funds rows 301 - 325	14,681,809	14,681,809
A	331	FROM General Fund - Redirected to Unfunded Medicaid Costs - B301		-
A	332	FROM Local Funds - M301		-
A	333	FROM Risk Corridor - PIHP Share - N301	-	-
A	334	FROM Risk Corridor - MDHHS Share - N302		-
A	335	FROM Restricted Fund Balance - Risk Financing RES 1.c	-	-
A	390	Total Redirected Funds	14,681,809	14,681,809
A	400	BALANCE MEDICAID SERVICES	-	-
A	401	BALANCE MEDICAID DIRECT CARE WAGE SERVICES	8,096,111	8,096,111

AB	REMARKS
AB	Remarks may be added about any entry or activity on the report for which additional information may be useful.
AB	

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES CONCURRENT
WAIVER PROGRAMS CONTRACT
FINANCIAL STATUS REPORT - Healthy Michigan**

PIHP:	DETROIT WAYNE INTEGRATED HEALTH NETWORK	FISCAL YEAR:	FY 21 / 22	A	I
		SUBMISSION TYPE:	YE Final	Regional Authority / Reporting Board	PIHP Grand Total
		SUBMISSION DATE:	2/28/2023		
1	PIHP or CMHSP			-	

AI	HEALTHY MICHIGAN SERVICES - PIHP USE ONLY		
AI 100	REVENUE		
AI 101	Healthy Michigan Plan	130,359,121	130,359,121
AI 102	CCBHC Healthy Michigan Plan	(1,796,293)	(1,796,293)
AI 103	CCBHC Healthy Michigan Plan Admin Revenue	138,164	138,164
AI 115	Healthy Michigan Managed Care - Affiliate Contracts	-	-
AI 116	Direct Care Wage	3,132,499	3,132,499
AI 120	Subtotal - Current Period Healthy Michigan Services Revenue	131,833,491	131,833,491
AI 121	1st & 3rd Party Collections - HMP Consumers - Rptng Bd	-	-
AI 122	1st & 3rd Party Collections - HMP Consumers - Affiliate	-	-
AI 123	Prior Year Healthy MI Plan Savings (Funding Current Year Expenses)	26,469,643	26,469,643
AI 124	ISF Abatement HMP	-	-
AI 125	Psych Hospital Rate Adjuster (HRA)	11,436,656	11,436,656
AI 140	Subtotal - Other Healthy Michigan Revenue	37,906,299	37,906,299
AI 190	TOTAL REVENUE	169,739,790	169,739,790
AI 200	EXPENDITURE		
AI 201	PIHP Insurance Provider Assessment (IPA) Tax Healthy Michigan Plan	2,549,753	2,549,753
AI 202	Healthy Michigan Plan Services	95,727,082	95,727,082
AI 203	Payment into Healthy Michigan Plan ISF	3,500,000	3,500,000
AI 204	Psych Hospital Rate Adjuster (HRA)	11,436,656	11,436,656
AI 205	Direct Care Wage	2,771,115	2,771,115
AI 290	TOTAL EXPENDITURE	115,984,606	115,984,606
AI 295	SUBTOTAL NET HEALTHY MICHIGAN SERVICES SURPLUS (DEFICIT)	53,755,184	53,755,184
AI 300	Redirected Funds (To) From		
AI 301	(TO) CMHSP to CMHSP Earned Contracts - J304.1	-	-
AI 301a	(TO) Medicaid - A310a	(14,681,809)	(14,681,809)
AI 301b	(TO) CCBHC - AC310b	-	-
AI 302	FROM CMHSP to CMHSP Earned Contracts - J301.1 (explain - section AJ)	-	-
AI 303	FROM Non-MDHHS Earned Contracts - K301.1 (explain - section AJ)	-	-
AI 310	FROM Medicaid - A301b	-	-
AI 315	FROM Restricted Fund Balance - RES 1.g	-	-
AI 325	Info only - Affiliate Total Redirected Funds - I390	-	-
AI 330	Subtotal Redirected Funds rows 301 - 325	(14,681,809)	(14,681,809)
AI 331	FROM General Fund - Redirected to Unfunded Healthy Michigan Costs - B301.1	-	-
AI 332	FROM Local Funds - M301.1	-	-
AI 333	FROM Risk Corridor - PIHP Share - N301.1	-	-
AI 334	FROM Risk Corridor - MDHHS Share - N302.1	-	-
AI 335	FROM Restricted Fund Balance - Risk Financing RES 1.g	-	-
AI 390	Total Redirected Funds	(14,681,809)	(14,681,809)
AI 400	BALANCE HEALTHY MICHIGAN PLAN SERVICES	38,711,991	38,711,991
AI 401	BALANCE HEALTHY MICHIGAN PLAN DIRECT CARE WAGE SERVICES	361,384	361,384

AJ	REMARKS
AJ	Remarks may be added about any entry or activity on the report for which additional information may be useful.
AJ	

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES
CONCURRENT WAIVER PROGRAMS CONTRACT
FINANCIAL STATUS REPORT - Health Home Services**

PIHP:	DETROIT WAYNE INTEGRATED HEALTH NETWORK		YEAR TO DATE REPORTING	
	FISCAL YEAR:	FY 21 / 22	A	I
	SUBMISSION TYPE:	YE Final	Regional Authority / Reporting Board	PIHP Grand Total
	SUBMISSION DATE:	2/28/2023		
1	PIHP or CMHSP		-	

AG	Health Home Program - PIHP USE ONLY			
AG 100	REVENUE			
AG 101	Revenue - Health Home Services		128,690	128,690
AG 115	Affiliate Contracts		-	-
AG 190	TOTAL REVENUE		128,690	128,690
AG 200	EXPENDITURE			
AG 202	Expenditure - Health Home Services		135,407	135,407
AG 204	Surplus Funding Retained			-
AG 290	TOTAL EXPENDITURE		135,407	135,407
AG 295	SUBTOTAL NET HEALTH HOME SERVICES SURPLUS (DEFICIT)		(6,717)	(6,717)
AG 300	Redirected Funds (To) From			
AG 315	FROM Restricted Fund Balance - RES 1.f		-	-
AG 325	Info only - Affiliate Total Redirected Funds - IC390			-
AG 330	Subtotal Redirected Funds rows 301 - 325		-	-
AG 331	FROM General Fund - B301.4			-
AG 332	FROM Local Funds - M301.4			-
AG 335	FROM Restricted Fund Balance - Risk Financing RES 1.f		-	-
AG 390	Total Redirected Funds		-	-
AG 400	BALANCE HEALTH HOMES BEHAVIORAL HEALTH SERVICES		(6,717)	(6,717)

AH	REMARKS
AH	Remarks may be added about any entry or activity on the report for which additional information may be useful. Please n
AH	DWIHN is awaiting MDHHS recoupment for services not performed by provider however paid a PMPM. Once the
AH	recoupments have taken place, DWIHN will record its 20% admin rate and record necessary closing entries.
AH	

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES
CONCURRENT WAIVER PROGRAMS CONTRACT
FINANCIAL STATUS REPORT - Opioid Health Home Services**

PIHP:	DETROIT WAYNE INTEGRATED HEALTH NETWORK		YEAR TO DATE REPORTING	
	FISCAL YEAR:	FY 21 / 22	A	I
	SUBMISSION TYPE:	YE Final	Regional Authority / Reporting Board	PIHP Grand Total
	SUBMISSION DATE:	2/28/2023		
1	PIHP or CMHSP		-	

AE	Opioid Health Home Program - PIHP USE ONLY		
AE 100	REVENUE		
AE 101	Revenue - Opioid Health Home Services	683,400	683,400
AE 115	Affiliate Contracts	-	-
AE 190	TOTAL REVENUE	683,400	683,400
AE 200	EXPENDITURE		
AE 202	Expenditure - Opioid Health Home Services	557,297	557,297
AE 204	Surplus Funding Retained	-	-
AE 290	TOTAL EXPENDITURE	557,297	557,297
AE 295	SUBTOTAL NET OPIOID HEALTH HOME SERVICES SURPLUS (DEFICIT)	126,103	126,103
AE 300	Redirected Funds (To) From		
AE 315	FROM Restricted Fund Balance - RES 1.e	-	-
AE 325	Info only - Affiliate Total Redirected Funds - IB390	-	-
AE 330	Subtotal Redirected Funds rows 301 - 325	-	-
AE 331	FROM General Fund - B301.3	-	-
AE 332	FROM Local Funds - M301.3	-	-
AE 335	FROM Restricted Fund Balance - Risk Financing RES 1.e	-	-
AE 390	Total Redirected Funds	-	-
AE 400	BALANCE OPIOID HEALTH HOME SERVICES	126,103	126,103

AF	REMARKS
AF	Remarks may be added about any entry or activity on the report for which additional information may be useful. Please n
AF	DWIHN is awaiting MDHHS recoupment for services not performed by provider however paid a PMPM. Once the
AF	recoupments have taken place, DWIHN will record its 20% admin rate and record necessary closing entries.
AF	

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES CONCURRENT
WAIVER PROGRAMS CONTRACT
FINANCIAL STATUS REPORT - MI Health Link**

PIHP:	DETROIT WAYNE INTEGRATED HEALTH NETWORK	YEAR TO DATE REPORTING	
	FISCAL YEAR:	FY 21 / 22	A I
	SUBMISSION TYPE:	YE Final	Regional Authority / Reporting Board
	SUBMISSION DATE:	2/28/2023	PIHP Grand Total
1	PIHP or CMHSP		-

AK		MI HEALTH LINK SERVICES - PIHP USE ONLY		
AK	100	REVENUE		
AK	101	MI Health Link	21,375,319	21,375,319
AK	102	ICO - Risk Financing / (ICO - Shared Savings)		-
AK	115	MI Health Link - Affiliate Contracts	-	-
AK	120	Subtotal - Current Period MI Health Link Services Revenue	21,375,319	21,375,319
AK	121	1st & 3rd Party Collections - MI Health Link Consumers - Rptng Bd		-
AK	122	1st & 3rd Party Collections - MI Health Link Consumers - Affiliate		-
AK	140	Subtotal - Other MI Health Link Revenue	-	-
AK	190	TOTAL REVENUE	21,375,319	21,375,319
AK	200	EXPENDITURE		
AK	202	MI Health Link Services	11,855,755	11,855,755
AK	290	TOTAL EXPENDITURE	11,855,755	11,855,755
AK	295	SUBTOTAL NET MI HEALTH LINK SERVICES SURPLUS (DEFICIT)	9,519,564	9,519,564
AK	300	Redirected Funds (To) From		
AK	301	(TO) CMHSP to CMHSP Earned Contracts - J304.3	-	-
AK	302	FROM CMHSP to CMHSP Earned Contracts - J301.3 (explain - section AL)		-
AK	303	FROM Non-MDHHS Earned Contracts - K301.3 (explain - section AL)		-
AK	310	FROM Medicaid - A301c		-
AK	315	FROM Restricted Fund Balance - RES 1.h	-	-
AK	325	Info only - Affiliate Total Redirected Funds - ID390		-
AK	330	Subtotal Redirected Funds rows 301 - 325	-	-
AK	331	FROM General Fund - Redirected to Unfunded MI Health Link Costs - B301.5		-
AK	332	FROM Local Funds - M301.5		-
AK	335	FROM Restricted Fund Balance - Risk Financing RES 1.h	-	-
AK	336	(TO) Local funds - M313.3	(9,519,564)	(9,519,564)
AK	390	Total Redirected Funds	(9,519,564)	(9,519,564)
AK	400	BALANCE MI HEALTH LINK SERVICES (must = 0)	-	-

AL	REMARKS
AL	Remarks may be added about any entry or activity on the report for which additional information may be useful.
AL	HAP CUMULATIVE COST SETTLEMENT DUE DWIHN SINCE YEAR 2 OF MHL PILOT
AL	

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES CONCURRENT WAIVER PROGRAMS CONTRACT
FINANCIAL STATUS REPORT AND CRCS - CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC**

PIHP	DETROIT WAYNE INTEGRATED HEALTH NETWORK	FISCAL YEAR: SUBMISSION TYPE	FY 21 / 22 YE Final	A Regional Authority / Reporting Board	YEAR TO DATE REPORTING													
					B	C	D	E	F	G	H	I						
					# 1 The Guidance Center	# 2	# 3	# 4 CMHSP / CCBHC	# 5	# 6	# 7	PIHP Grand Total						
1.1	PIHP or CMHSP / CCBHC		2/28/2023															
	CCBHC SERVICES - PIHP USE ONLY																	
AC	100	REVENUE																
AC	101	Revenue - Medicaid																
AC	102	Medicaid CCBHC Base Capitation		10,420,915														10,420,915
AC	103	Medicaid CCBHC Base - Affiliate Contracts		(10,420,915)														-
AC	104	Medicaid CCBHC Supplemental Revenue		9,104,475														9,104,475
AC	105	Medicaid CCBHC Supplemental - Affiliate Contracts		(13,098,873)														(13,098,873)
AC	106	Medicaid CCBHC Supplemental Administration Revenue		(220,328)														(220,328)
AC	107	MI Health Link CCBHC Consumers Revenue - Rptng Bd		-														-
AC	108	MI Health Link CCBHC Consumers Revenue - Affiliate		-														-
AC	109	1st & 3rd Party Collections - Medicaid CCBHC Consumers - Rptng Bd		142,084														142,084
AC	110	1st & 3rd Party Collections - Medicaid CCBHC Consumers - Affiliate		(4,214,726)														(4,214,726)
AC	120	Subtotal - Current Period Medicaid CCBHC Revenue		23,681,872														23,681,872
AC	121	Revenue - Healthy Michigan																
AC	122	Healthy Michigan CCBHC Base		1,796,293														1,796,293
AC	123	Healthy Michigan CCBHC Base Affiliate Contracts		(1,796,293)														-
AC	124	Healthy Michigan CCBHC Supplemental Revenue		5,709,255														5,709,255
AC	125	Healthy Michigan CCBHC Supplemental - Affiliate Contracts		(4,220,423)														(4,220,423)
AC	126	Healthy Michigan CCBHC Supplemental Administration Revenue		(138,164)														(138,164)
AC	128	1st & 3rd Party Collections - Healthy Michigan CCBHC Consumers - Rptng Bd		7,976														7,976
AC	130	1st & 3rd Party Collections - Healthy Michigan CCBHC Consumers - Affiliate		(6,024,692)														(6,024,692)
AC	140	Subtotal - Current Period Healthy Michigan CCBHC Revenue		1,350,668														1,350,668
AC	190	TOTAL REVENUE		(2,864,058)														(2,864,058)
AC	200	EXPENDITURE																
AC	201	Medicaid CCBHC Services		23,217,318														23,217,318
AC	202	MI Health Link - Medicaid Services		444,554														444,554
AC	203	Healthy Michigan CCBHC Services		6,024,692														6,024,692
AC	204	Surplus Funding Retained																
AC	290	TOTAL EXPENDITURE		29,686,564														29,686,564
AC	291	Subtotal Net Medicaid CCBHC Services Surplus (Deficit)		(4,214,726)														(4,214,726)
AC	292	Subtotal Net Healthy Michigan Plan Services Surplus (Deficit)		1,350,668														1,350,668
AC	295	SUBTOTAL NET CCBHC BENEFIT SERVICES SURPLUS (DEFICIT)		(2,864,058)														(2,864,058)
AC	300	Redirected Funds (To) From																
AC	310a	FROM Medicaid - A301a																
AC	310b	FROM Healthy Michigan - A301b																
AC	325	Info only - Affiliate Total Redirected Funds - IA390																
AC	390	Total Redirected Funds																
AC	400	BALANCE CCBHC SERVICES		(2,864,058)														(2,864,058)

2. CCBHC Supplemental Contract Reconciliation and Cash Settlement			
	Medicaid	HMP	Total
a	Medicaid Supplemental Revenue / HMP Supplemental Revenue	4,220,423	17,319,296
b	Subtotal	4,220,423	17,319,296
c	Administration	(138,164)	(358,492)
d	Supplemental Payment Funding thru 9/30	5,709,255	14,813,730
e	Supplemental Payment Funding after 9/30	8,468	20,484
f	Subtotal - Supplemental	5,582,107	14,475,722
g	MDHHS Cash Settlement	(1,362,684)	2,843,574

AD		REMARKS
AD		Remarks may be added about any entry or activity on the report for which additional information may be useful. Explain prior fiscal year accrual adjustment.
AD		

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES CONCURRENT WAIVER PROGRAMS CONTRACT
RESTRICTED FUND BALANCE ACTIVITY**

PIHP: DETROIT WAYNE INTEGRATED HEALTH NETWORK
FISCAL YEAR: FY 21 / 22
SUBMISSION TYPE: YE Final
SUBMISSION DATE: 2/28/2023

	Restricted Fund Balance Activity	PA2	PA2 - (Risk Financing)	Performance Bonus Incentive Pool (PBIP)	Performance Bonus Incentive Pool (PBIP) - (Risk Financing)	Restricted Fund Balances / Current Activity
1.						
a.	Restricted Fund Balance @ Beginning of Fiscal Year	\$ 6,264,131		\$ -		\$ 6,264,131
b.	Current Period Deposits	\$ 4,723,521		\$ 5,823,728		\$ 10,547,249
c.	Current Period Financing Medicaid					\$ -
d.	Current Period Financing SUD Non-Medicaid	\$ (3,153,680)				\$ (3,153,680)
e.	Current Period Financing Opioid Health Homes Behavioral Health					\$ -
f.	Current Period Financing Health Homes Behavioral Health					\$ -
g.	Current Period Financing Healthy MI Plan					\$ -
h.	Current Period Financing MI Health Link					\$ -
i.	Current Period Financing Behavioral Health System			\$ (5,823,728)		\$ (5,823,728)
j.	Restricted Fund Ending Balance	\$ 7,833,972	\$ 7,833,972	\$ -	\$ -	\$ 7,833,972

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES CONCURRENT WAIVER PROGRAMS CONTRACT
INTERNAL SERVICE FUND**

PIHP: DETROIT WAYNE INTEGRATED HEALTH NETWORK
FISCAL YEAR: FY 21 / 22
SUBMISSION TYPE: YE Final
SUBMISSION DATE: 2/28/2023

1. Internal Service Fund Fiscal Year Activity	ISF Balance @ Beginning of Fiscal Year	Current Period ISF Contributions Interest Earned	Current Period ISF Contributions Deposits	Current Period ISF Reduction (Abatement)	Current Period ISF Financing Medicaid (Risk)	Current Period ISF Financing HMP (Risk)	ISF Ending Balance
a. ISF Balances / Current Activity	\$ 59,717,016	\$ (1,939,311)	\$ 3,500,000	\$ -	\$ -	\$ -	\$ 61,277,705
b. Specialty Managed Care	\$ 18,717,016	\$ (607,835)	\$ -	\$ -	\$ -	\$ -	\$ 18,109,181
c. Healthy Michigan Plan	\$ 41,000,000	\$ (1,331,476)	\$ 3,500,000	\$ -	\$ -	\$ -	\$ 43,168,524

1.1 PIHP Transferred To/From ISF balances	Total Transferred
a.	
b.	
c.	
d.	
e.	
f. Total Transferred to/from PIHPs	\$ -
g. Final balance after transfers	\$ 61,277,705
h. Specialty Managed Care portion of balance	\$ 18,109,181
i. Healthy Michigan Plan portion of balance	\$ 43,168,524

2. PIHP Maximum Allowable Funding of ISF	Amount
Specialty Managed Care - Medicaid Capitation (FSR Medicaid - A 101 + FSR HMP - A1 101 + Medicaid Worksheet - 1, J, PBIP Withhold)	\$ 817,296,847
% of Current Year Medicaid Capitation	7.5%
Maximum Allowable Funding of Med ISF	\$ 61,297,264

3. Disposition of ISF Ending Balance	Amount	Narrative of Resolution if ISF Over Funded
a. Maximum Allowable Funding of Medicaid ISF	\$ 61,297,264	
b. Medicaid ISF Ending Balance	\$ 61,277,705	
c. Within Maximum Allowable Limit / (Overfunded)	\$ 19,559	

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES CONCURRENT WAIVER PROGRAM CONTRACT
SHARED RISK CALCULATION & RISK FINANCING**

PIHP: DETROIT WAYNE INTEGRATED HEALTH NETWORK

FISCAL YEAR: FY 21 / 22

SUBMISSION TYPE: YE Final

SUBMISSION DATE: 2/28/2023

1. Shared Risk Calculation		Medicaid Amount	HMP Amount	PBIP Amount	Total Amount
Specialty Managed Care - Medicaid Capitation (FSR Medicaid - A 101 + FSR HMP - AI 101 + Medicaid Worksheet - j, PBIP Withhold)		\$ 681,113,998	\$ 130,359,121	\$ 5,823,728	\$ 817,296,847
a2. Band # 1 (100 - 105%)	5%			40,864,842	Full PIHP Responsibility
a3. Band # 2 (105 - 110%)	5%			40,864,842	Shared State / PIHP Responsibility

b. Total Risk		State Risk	Local Risk	Total Risk Corridor
c1. Band # 1 Liability				
c2. Sub-Total - Band # 1				
c3. Band # 2 Liability				
c4. Sub-Total - Band # 2				
c5. Band # 3 Liability				
c6. Total Risk Responsibility		\$	\$	\$

2. Disposition of Risk		State Risk	Local Risk	Total Risk Corridor
a. Stop/Loss Insurance (FSR - Non-Medicaid Line N 101)				
b. Medicaid / HMP for PIHP Share Risk Corridor (FSR - Non-Medicaid Line N 102)				
c. Local Funds / Local Fund Balance - Medicaid / HMP Services (FSR - Non-Medicaid Line M 301, M 301.1)				
d. Restricted Funds / Restricted Fund Balance - Medicaid / HMP Services (FSR - Non-Medicaid Line N 104)				
e. General Fund Redirect for Unfunded Medicaid / HMP Costs - MDHHS Approved ONLY (FSR - Non-Medicaid Line B 301, B301.1)				
f. Due PIHP From MDHHS (FSR - Non-Medicaid Line N 103)				
g. Total Risk Corridor Funding		\$	\$	\$

3. Summary of Total Risk / Funding		State Risk	Local Risk	Total Risk Corridor
a. Total Risk				
b. Total Disposition of MDHHS / Local Risk - Medicaid				
b1. Total Disposition of MDHHS / Local Risk - Healthy Michigan Plan				
c. Balance of Risk Corridor (Must = \$0)		\$	\$	\$

**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
FINANCIAL STATUS REPORT - ALL NON MEDICAID**

CMHSP:	DETROIT WAYNE INTEGRATED HEALTH NETWORK	FISCAL YEAR:	FY 21 / 22
		SUBMISSION TYPE:	YE Final
		SUBMISSION DATE:	2/28/2023
		Column A	Column B

A		MEDICAID SERVICES - Summary From FSR - Medicaid (incl Direct Care Wage)	
A	190	TOTAL REVENUE	751,298,481
A	290	TOTAL EXPENDITURE	757,884,179
A	295	NET MEDICAID SERVICES SURPLUS (DEFICIT)	(6,585,698)
A	390	Total Redirected Funds	14,681,809
A	400	BALANCE MEDICAID SERVICES (A 400 + A 401)	8,096,111

AC		CCBHC SERVICES - Summary From FSR - Certified Community Behavioral Health Clinic	
AC	190	TOTAL REVENUE	26,672,446
AC	290	TOTAL EXPENDITURE	29,536,504
AC	295	NET SURPLUS (DEFICIT)	(2,864,058)
AC	390	Total Redirected Funds	-
AC	400	BALANCE CCBHC SERVICES	(2,864,058)

AE		OPIOID HEALTH HOME SERVICES - Summary From FSR - Opioid Health Home Services	
AE	190	TOTAL REVENUE	683,400
AE	290	TOTAL EXPENDITURE	557,297
AE	295	NET SURPLUS (DEFICIT)	126,103
AE	390	Total Redirected Funds	-
AE	400	BALANCE OPIOID HEALTH HOME SERVICES	126,103

AG		HEALTH HOME SERVICES - Summary From FSR - Health Home Services	
AG	190	TOTAL REVENUE	128,690
AG	290	TOTAL EXPENDITURE	135,407
AG	295	NET HEALTH HOME SERVICES SURPLUS (DEFICIT)	(6,717)
AG	390	Total Redirected Funds	-
AG	400	BALANCE HEALTH HOME SERVICES	(6,717)

AI		HEALTHY MICHIGAN SERVICES - Summary From FSR - Healthy Michigan (incl Direct Care Wage)	
AI	190	TOTAL REVENUE	169,739,790
AI	290	TOTAL EXPENDITURE	115,984,606
AI	295	NET HEALTHY MICHIGAN SERVICES SURPLUS (DEFICIT)	53,755,184
AI	390	Total Redirected Funds	(14,681,809)
AI	400	BALANCE HEALTHY MICHIGAN SERVICES (AI 400 + AI 401)	39,073,375

AK		MI HEALTH LINK SERVICES - Summary From FSR - MI Health Link	
AK	190	TOTAL REVENUE	21,375,319
AK	290	TOTAL EXPENDITURE	11,855,755
AK	295	NET MI HEALTH LINK SERVICES SURPLUS (DEFICIT)	9,519,564
AK	390	Total Redirected Funds	(9,519,564)
AK	400	BALANCE MI HEALTH LINK SERVICES	-

RES		RESTRICTED FUND BALANCE ACTIVITY	
RES	180	Beginning Restricted Fund balance	6,264,131
RES	190	TOTAL REVENUE (Deposits)	10,547,249
RES	290	TOTAL EXPENDITURE (SUD NON-MEDICAID only)	3,153,680
RES	390	Total Redirected Funds	(5,823,728)
RES	400	BALANCE RESTRICTED FUND	7,833,972

**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
FINANCIAL STATUS REPORT - ALL NON MEDICAID**

CMHSP:	DETROIT WAYNE INTEGRATED HEALTH NETWORK	FISCAL YEAR:	FY 21 / 22
		SUBMISSION TYPE:	YE Final
		SUBMISSION DATE:	2/28/2023
		Column A	Column B

B		GENERAL FUND	
B	100	REVENUE	
B	101	CMH Operations	25,955,086
B	120	Subtotal - Current Period General Fund Revenue	25,955,086
B	121	1st & 3rd Party Collections (Not in Section 226a Funds) 100% Services	
B	122	1st & 3rd Party Collections (Not in Section 226a Funds) 90% Services	
B	123	Prior Year GF Carry Forward	1,510,695
B	140	Subtotal - Other General Fund Revenue	1,510,695
B	190	TOTAL REVENUE	27,465,781
B	200	EXPENDITURE	
B	201	100% MDHHS Matchable Services / Costs	449,950
B	202	100% MDHHS Matchable Services Based on CMHSP Local Match Cap	-
B	203	90% MDHHS Matchable Services / Costs	28,598,422
B	290	TOTAL EXPENDITURE	26,188,530
B	295	NET GENERAL FUND SURPLUS (DEFICIT)	1,277,251
B	300	Redirected Funds (To) From	
B	301	(TO) Medicaid - Redirected for Unfunded Medicaid Costs - A331 (PIHP use only)	-
B	301.1	(TO) Healthy Michigan - Redirected for Unfunded Healthy Michigan Costs - AI331 (PIHP use only)	-
B	301.3	(TO) Opioid Health Home Services - Redirected for Unfunded Opioid Health Home Services AE331 (PIHP use only)	-
B	301.4	(TO) Health Home Services - Redirected for Unfunded Health Home Services AG331 (PIHP use only)	-
B	301.5	(TO) MI Health Link - Redirected for Unfunded MI Health Link Costs - AK331 (PIHP use only)	-
B	309	(TO) Allowable GF Cost of Injectable Medications - G301	-
B	312	(TO) CMHSP to CMHSP Earned Contracts - J305 (explain - section Q)	-
B	313	FROM CMHSP to CMHSP Earned Contracts - J302	
B	314	FROM Non-MDHHS Earned Contracts - K302	
B	330	Subtotal Redirected Funds rows 301 - 314	-
B	331	FROM Local Funds - M302	
B	332	FROM Risk Corridor - N303	
B	390	Total Redirected Funds	-
B	400	BALANCE GENERAL FUND (cannot be < 0)	1,277,251

OTHER GF CONTRACTUAL OBLIGATIONS

C		CCBHC NON-MEDICAID - (PIHP Use Only)	
C	190	Revenue	148,765
C	290	Expenditure	148,765
C	400	BALANCE CCBHC NON-MEDICAID (must = 0)	-

FEE FOR SERVICE MEDICAID

D TARGETED CASE MANAGEMENT - (GHS Only)

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F INTENTIONALLY LEFT BLANK

G		INJECTABLE MEDICATIONS	
G	190	Revenue	
G	290	Expenditure	
G	295	NET INJECTABLE MEDICATIONS (cannot be > 0)	-
G	300	Redirected Funds (To) From	
G	301	FROM General Fund - B309	
G	302	FROM Local Funds - M309	
G	390	Total Redirected Funds	-
G	400	BALANCE INJECTABLE MEDICATIONS (must = 0)	-

**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
FINANCIAL STATUS REPORT - ALL NON MEDICAID**

CMHSP:	DETROIT WAYNE INTEGRATED HEALTH NETWORK	FISCAL YEAR:	FY 21 / 22
		SUBMISSION TYPE:	YE Final
		SUBMISSION DATE:	2/28/2023
			YEAR TO DATE REPORTING
		Column A	Column B

OTHER FUNDING

H		MDHHS EARNED CONTRACTS	
H	100	REVENUE	
H	101	Comprehensive Services for Behavioral Health	7,546,091
H	102	Housing and Homeless Services	1,627,404
H	103	Juvenile Justice Programs	-
H	104	Suicide Lifeline Programs	-
H	105	Projects for Assistance in Transition from Homelessness	-
H	106	Regional Perinatal Collaborative	-
H	107	Substance Abuse & Mental Health COVID-19 Grant Program	142,553
H	108	Substance Use and Gambling Services	18,667,481
H	150	Other MDHHS Earned Contracts (describe):	-
H	151	Other MDHHS Earned Contracts (describe):	-
H	190	TOTAL REVENUE	27,983,529
H	200	EXPENDITURE	
H	201	Comprehensive Services for Behavioral Health	7,546,091
H	202	Housing and Homeless Services	1,627,404
H	203	Juvenile Justice Programs	-
H	204	Suicide Lifeline Programs	-
H	205	Projects for Assistance in Transition from Homelessness	-
H	206	Regional Perinatal Collaborative	-
H	207	Substance Abuse & Mental Health COVID-19 Grant Program	142,553
H	208	Substance Use and Gambling Services	18,667,481
H	250	Other MDHHS Earned Contracts (describe):	-
H	251	Other MDHHS Earned Contracts (describe):	-
H	290	TOTAL EXPENDITURE	27,983,529
H	400	BALANCE MDHHS EARNED CONTRACTS (must = 0)	-

I PIHP to AFFILIATE MEDICAID SERVICES CONTRACTS - CMHSP USE ONLY

IA PIHP to AFFILIATE CCBHC SERVICES CONTRACTS - CMHSP USE ONLY

IB PIHP to AFFILIATE OPIOID HEALTH HOME SERVICES CONTRACTS - CMHSP USE ONLY

IC PIHP to AFFILIATE HEALTH HOME SERVICES CONTRACTS - CMHSP USE ONLY

ID PIHP to AFFILIATE MI HEALTH LINK SERVICES CONTRACTS - CMHSP USE ONLY

**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
FINANCIAL STATUS REPORT - ALL NON-MEDICAID**

CMHSP:	DETROIT WAYNE INTEGRATED HEALTH NETWORK	FISCAL YEAR:	FY 21 / 22
		SUBMISSION TYPE:	YE Final
		SUBMISSION DATE:	2/28/2023
			YEAR TO DATE REPORTING
			Column A Column B

J		CMHSP to CMHSP EARNED CONTRACTS	
J	190	Revenue	
J	290	Expenditure	
J	295	NET CMHSP to CMHSP EARNED CONTRACTS SURPLUS (DEFICIT)	-
J	300	Redirected Funds (To) From	
J	301	(TO) Medicaid Services - A302 (PIHP use only)	-
J	301.1	(TO) Healthy Michigan - AI302 (PIHP use only)	-
J	301.3	(TO) MI Health Link - AK302 (PIHP use only)	-
J	302	(TO) General Fund - B313	-
J	304	FROM Medicaid Services - A301 (PIHP use only)	
J	304.1	FROM Healthy Michigan - AI301 (PIHP use only)	
J	304.3	FROM MI Health Link - AK301 (PIHP use only)	
J	305	FROM General Fund - B312	
J	307	FROM Local Funds - M310	
J	390	Total Redirected Funds	-
J	400	BALANCE CMHSP to CMHSP EARNED CONTRACTS (must = 0)	-

K		NON-MDHHS EARNED CONTRACTS	
K	190	Revenue	429,251
K	290	Expenditure	429,251
K	295	NET NON-MDHHS EARNED CONTRACTS SURPLUS (DEFICIT)	-
K	300	Redirected Funds (To) From	
K	301	(TO) Medicaid Services - A303 (PIHP use only)	-
K	301.1	(TO) Healthy Michigan - AI303 (PIHP use only)	-
K	301.3	(TO) MI Health Link - AK303 (PIHP use only)	-
K	302	(TO) General Fund - B314	-
K	304	(TO) Local Funds - M315	-
K	305	FROM Local Funds - M311	
K	390	Total Redirected Funds	-
K	400	BALANCE NON-MDHHS EARNED CONTRACTS (must = 0)	-

L		PIHP to Affiliate CCBHC Non-Medicaid Contracts - CMHSP USE ONLY	
L	100	REVENUE	
L	101	Revenue	
L	102	1st & 3rd Party Collections (Not in Section 226a Funds)	
L	190	TOTAL REVENUE	-
L	200	EXPENDITURE	
L	201	Expenditure	
L	290	TOTAL EXPENDITURE	-
L	295	NET SURPLUS (DEFICIT)	-
L	300	Redirected Funds (To) From	
L	301	(TO) CMHSP to CMHSP Earned Contracts - J306.4	-
L	302	FROM CMHSP to CMHSP Earned Contracts - J303.5	
L	303	FROM Non-MDHHS Earned Contracts - K303.4	
L	304	FROM General Fund - B310.5	
L	305	(TO) Local Funds - M316.1	-
L	306	FROM Local Funds - M309.6	
L	390	Total Redirected Funds	-
L	400	BALANCE PIHP to Affiliate CCBHC Non-Medicaid Contracts (must = 0)	-

**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
FINANCIAL STATUS REPORT - ALL NON MEDICAID**

CMHSP:	DETROIT WAYNE INTEGRATED HEALTH NETWORK	FISCAL YEAR:	FY 21 / 22
		SUBMISSION TYPE:	YE Final
		SUBMISSION DATE:	2/28/2023
		Column A	Column B

M		LOCAL FUNDS	
M	100	REVENUE	
M	101	County Appropriation for Mental Health	17,686,447
M	102	County Appropriation for Substance Abuse - Non Public Act 2 Funds	
M	103	Section 226 (a) Funds	-
M	104	Affiliate Local Contribution to State Medicaid Match Provided from CMHSP (PIHP only)	
M	105	Medicaid Fee for Service Adjuster Payments	
M	106	Local Grants	363,282
M	107	Interest	(247,198)
M	109	SED Partner	
M	110	All Other Local Funding	
M	190	TOTAL REVENUE	17,802,531
M	200	EXPENDITURE	
M	201	GF 10% Local Match	2,859,842
M	202	Local match cap amount	
M	203	GF Local Match Capped per MHC 330.1308	-
M	204	Local Cost for State Provided Services	5,445,306
M	206	Local Contribution to State Medicaid Match on Behalf of Affiliate (PIHP Only)	3,010,380
M	207	Local Match to Grants and MDHHS Earned Contracts	
M	209	Local Only Expenditures	541,407
M	290	TOTAL EXPENDITURE	11,856,935
M	295	NET LOCAL FUNDS SURPLUS (DEFICIT)	5,945,596
M	300	Redirected Funds (To) From	
M	301	(TO) Medicaid Services - A332 (PIHP use only)	-
M	301.1	(TO) Healthy Michigan - A1332 (PIHP use only)	-
M	301.5	(TO) MI Health Link - AK332 (PIHP use only)	-
M	302	(TO) General Fund - B331	-
M	309	(TO) Injectable Medications - G302	-
M	310	(TO) CMHSP to CMHSP Earned Contracts - J307	-
M	311	(TO) Non-MDHHS Earned Contracts - K305	-
M	313	(TO) Activity Not Otherwise Reported - O302	-
M	313.3	FROM MI Health Link (Medicare) - AK336 - (PIHP use only)	9,519,564
M	314	FROM Performance Bonus Incentive Pool (PBIP) Restricted Local Funding - (Standalone use only)	5,823,728
M	315	FROM Non-MDHHS Earned Contracts - K304	
M	390	Total Redirected Funds	15,343,292
M	400	BALANCE LOCAL FUNDS	21,288,888

N		RISK CORRIDOR	
N	100	REVENUE	
N	101	Stop/Loss Insurance	
N	102	Medicaid ISF for PIHP Share Risk Corridor	-
N	103	MDHHS for MDHHS Share of Medicaid Risk Corridor	
N	104	Restricted Fund balance for PIHP Share Risk Corridor	-
N	190	TOTAL REVENUE	-
N	300	Redirected Funds (To) From	
N	301	(TO) Medicaid Services - PIHP Share - A333 (PIHP use only)	-
N	301.1	(TO) Healthy Michigan - PIHP Share - A1333 (PIHP use only)	-
N	301.2	(TO) Restricted Fund balance for PIHP Share - A335 & A1335 (PIHP use only)	-
N	302	(TO) Medicaid Services - MDHHS Share - A334 (PIHP use only)	-
N	302.1	(TO) Healthy Michigan - MDHHS Share - A1334 (PIHP use only)	-
N	303	(TO) General Fund - B332	-
N	390	Total Redirected Funds	-
N	400	BALANCE RISK CORRIDOR (must = 0)	-

**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
FINANCIAL STATUS REPORT - ALL NON-MEDICAID - SUPPLEMENTAL**

CMHSP	DETROIT WAYNE INTEGRATED HEALTH NETWORK		FISCAL YEAR		YEAR TO DATE REPORTING			
	SUBMISSION TYPE		FY 21 / 22					
	SUBMISSION DATE		Column B					
		Column A		Column C		Column D		
		Column A		Column B		Column C		
H	MDHHS EARNED CONTRACTS							
Grant Program Code	Grant Program Title	Project Code	Project Title	REVENUE	EXPENDITURES	CCBHC EXPENDITURES	BALANCE	
H	Comprehensive Services for Behavioral Health	ABHS	Asian Behavioral Health Services	104,101	104,101		Must = 0	
H	Comprehensive Services for Behavioral Health	BC / BWC	Benefits Coaches / Benefits to Work Coaches	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	BCDP	Branch County Diversion Project	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	BHC	Behavioral Health Consultant	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	BHH	Behavioral Health Home	443,747	443,747		Must = 0	
H	Comprehensive Services for Behavioral Health	BHNSA	Behavioral Health Services for Native Americans	71,887	71,887		Must = 0	
H	Comprehensive Services for Behavioral Health	BHSW	Behavioral Health Services for Vietnam Veterans	38,214	38,214		Must = 0	
H	Comprehensive Services for Behavioral Health	CLUB	Clubhouse Engagement	5,486	5,486		Must = 0	
H	Comprehensive Services for Behavioral Health	CRIM	Criminal Justice	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	CRMG	Care Management	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	CSC	Child System of Care	989,557	989,557		Must = 0	
H	Comprehensive Services for Behavioral Health	DROP**	Harvest Retreat	5,000	5,000		Must = 0	
H	Comprehensive Services for Behavioral Health	DROP**	Perfect Place	7,500	7,500		Must = 0	
H	Comprehensive Services for Behavioral Health	DROP**	Perfect Place	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	FIT	Fit Together	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	HBHS	Hispanic Behavioral Health Services	301,049	301,049		Must = 0	
H	Comprehensive Services for Behavioral Health	IECMHC	Infant and Early Childhood Mental Health Consultation	36,367	36,367		Must = 0	
H	Comprehensive Services for Behavioral Health	IHC	Integrated Healthcare	175,238	175,238		Must = 0	
H	Comprehensive Services for Behavioral Health	**CSSE	Intensive Crisis Stabilization Service(s) Expansion	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	JHC	Justice Involved Health Coach	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	MHAJJ	Mental Health Access and Juvenile Justice Diversion	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	MHJSE	Mental Health and Juvenile Justice Screening Expansion	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	MHJSP	Mental Health Juvenile Justice Screening Project	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	MHTC	58th District Mental Health Court Expansion	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	MICHT	Michigan Healthy Transitions	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	NCC	Enhanced Nutrition Care Coordination and Medical Culinary Ed Prgrms	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	NTPH	Navigators for Transition from Psychiatric Hospitals	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	OBRA	Pre-Admission Screening Annual Resident Reviews	2,114,557	2,114,557		Must = 0	
H	Comprehensive Services for Behavioral Health	PACC	Promoting Access and Continuity of Care	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	PCPCP	Psychiatric Consultation to Primary Care Practices	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	PDTOB	Peer Driven Tobacco Cessation	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	PHC	Peer(s) as Health Coach(es)	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	PIPBHC	Promoting Integration of Primary and Behavioral Health Care	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	PMTO*	Recovery Conference	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	RCVC	Regional PMTO Training Support	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	RPTS	Rural Transportation	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	RT	Infant and Early Childhood Mental Health Consultation	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	RTTSE	Saginaw Community Care HUB	98,055	98,055		Must = 0	
H	Comprehensive Services for Behavioral Health	SCCHB	988 Suicide and Crisis Lifeline SAMHSA Cooperative Agreement	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	SCLCA	First Episode Psychosis	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	SFEP	Statewide PMTO Training and TA	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	SPTTA	Technology-Based Recovery Support	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	TBR	Transportation to Crisis Residential	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	TCR	Tri-County Strong Crisis Counseling & Training	2,248,732	2,248,732		Must = 0	
H	Comprehensive Services for Behavioral Health	TCSOCT	Trauma Focused CBT Coordination & Training	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	TFCCT	Treatment Foster Care Oregon	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	TFCO	Tuscola Peer Center	154,414	154,414		Must = 0	
H	Comprehensive Services for Behavioral Health	TIC / TISC	Trauma Informed Care / System of Care	-	-		Must = 0	
H	Comprehensive Services for Behavioral Health	TPC	Tuscola Peer Center	77,325	77,325		Must = 0	
H	Comprehensive Services for Behavioral Health	VE*	Veteran's Systems Navigator	6,871,229	6,871,229		Must = 0	
H	SUBTOTAL Comprehensive Services for Behavioral Health							

**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
FINANCIAL STATUS REPORT - ALL NON-MEDICAID - SUPPLEMENTAL**

CMHSP	DETROIT WAYNE INTEGRATED HEALTH NETWORK		SUBMISSION TYPE YE Final 2/28/2023	SUBMISSION DATE	FISCAL YEAR:		YEAR TO DATE REPORTING
	FY 21 / 22						
	Column A	Column B			Column C	Column D	
H MDHHS EARNED CONTRACTS							
Grant Program Code	Grant Program Title	Project Code	Project Title	REVENUE	EXPENDITURES	CCBHC EXPENDITURES	BALANCE
H CCBH	COVID-19 Comprehensive Services for Behavioral Health	COR	Children's Crisis Residential				Must = 0
H CCBH	COVID-19 Comprehensive Services for Behavioral Health	CMHCSS	Children's Mental Health COVID Supplemental Services				Must = 0
H CCBH	COVID-19 Comprehensive Services for Behavioral Health	EOPSA	Early Onset Psychosis Set-Aside				Must = 0
H CCBH	COVID-19 Comprehensive Services for Behavioral Health	MHCM*	Mental Health COVID Mitigation and Testing				Must = 0
H CCBH	COVID-19 Comprehensive Services for Behavioral Health	MHCSS	Mental Health COVID Supplemental Services	455,862	455,862		Must = 0
H CCBH	COVID-19 Comprehensive Services for Behavioral Health	NMOS	CCBHC Non-Medicaid Operations Support	219,000		219,000	Must = 0
H CCBH	COVID-19 Comprehensive Services for Behavioral Health	WFSS	ACT and Dual ACT/IDDT Financial Incentive				Must = 0
H CCBH	SUBTOTAL COVID-19 Comprehensive Services for Behavioral Health			674,862	455,862	219,000	Must = 0
H CSUGS	COVID-19 Substance Use and Gambling Services	ADM	ARPA Administration	35,316	35,316		Must = 0
H CSUGS	COVID-19 Substance Use and Gambling Services	PREV	ARPA Prevention	151,730	151,730		Must = 0
H CSUGS	COVID-19 Substance Use and Gambling Services	PREVII	Prevention II COVID	470,112	470,112		Must = 0
H CSUGS	COVID-19 Substance Use and Gambling Services	SUDADII	Substance Use Disorder Administration COVID	233,803	233,803		Must = 0
H CSUGS	COVID-19 Substance Use and Gambling Services	TRMTA	ARPA Treatment and Access	353,159	353,159		Must = 0
H CSUGS	COVID-19 Substance Use and Gambling Services	TRMTII	Treatment COVID	1,800,200	1,800,200		Must = 0
H CSUGS	COVID-19 Substance Use and Gambling Services	WSSII	Women's Specialty Services COVID	395,181	395,181		Must = 0
H CSUGS	SUBTOTAL COVID-19 Substance Use and Gambling Services			3,439,501	3,439,501		Must = 0
H EBSJJ	Evidence Based Services for Youth in the Juvenile Justice System	EBSJJ	Evidence Based Services for Youth in the Juvenile Justice System				Must = 0
SUBTOTAL Evidence Based Services for Youth in the Juvenile Justice System							
H HHS	Housing and Homeless Services	PSH	Permanent Supportive Housing Dedicated Plus				Must = 0
H HHS	Housing and Homeless Services	RRP	Consolidated Rapid Re-Housing				Must = 0
H HHS	Housing and Homeless Services	SH	Permanent Supportive Housing Statewide Leasing				Must = 0
H HHS	Housing and Homeless Services	SPC*	Permanent Supportive Housing	1,627,404	1,627,404		Must = 0
H HHS	SUBTOTAL Housing and Homeless Services			1,627,404	1,627,404		Must = 0
H JURT	Juvenile Urgent Response Teams	JURT	Juvenile Urgent Response Teams				Must = 0
H JURT	SUBTOTAL Juvenile Urgent Response Teams						Must = 0
H MCSHR	Midland County Supportive Housing Resource	MCSHR	Midland County Supportive Housing Resource				Must = 0
H PATH	Projects for Assistance in Transition from Homelessness	PATH	Projects for Assistance in Transition from Homelessness				Must = 0
H PATH	SUBTOTAL Projects for Assistance in Transition from Homelessness						Must = 0
H RPC	Regional Perinatal Collaborative	RPC	Regional Perinatal Collaborative				Must = 0
H RPC	SUBTOTAL Regional Perinatal Collaborative						Must = 0
H SAMHC	Substance Abuse & Mental Health COVID-19 Grant Program	SAMHC	Substance Abuse & Mental Health COVID-19 Grant Program	142,553	142,553		Must = 0
H SAMHC	SUBTOTAL Substance Abuse & Mental Health COVID-19 Grant Program			142,553	142,553		Must = 0
H SLCBG	Suicide Lifeline Capacity Building Grant	SLCBG	Suicide Lifeline Capacity Building Grant				Must = 0
H SUGS	Substance Use and Gambling Services	GRT	Gambling Residential Treatment	358,575	358,575		Must = 0
H SUGS	Substance Use and Gambling Services	MGDPP	Michigan Gambling Disorder Prevention Project	173,350	173,350		Must = 0
H SUGS	Substance Use and Gambling Services	MYTIEP	Michigan Youth Treatment Improvement & Enhancement PIHP				Must = 0
H SUGS	Substance Use and Gambling Services	PPWP	Prenatal and Postpartum Women-Pilot Prevention	88,026	88,026		Must = 0
H SUGS	Substance Use and Gambling Services	PREV	Prevention	3,179,619	3,179,619		Must = 0
H SUGS	Substance Use and Gambling Services	SDA	State Disability Assistance	730,598	730,598		Must = 0
H SUGS	Substance Use and Gambling Services	SORII	State Opioid Response II	1,816,674	1,816,674		Must = 0
H SUGS	Substance Use and Gambling Services	SUDADM	Substance Use Disorder - Administration (ADM)	767,384	767,384		Must = 0
H SUGS	Substance Use and Gambling Services	SUDTII	Substance Use Disorder Services - Tobacco II	4,000	4,000		Must = 0
H SUGS	Substance Use and Gambling Services	TRMT	Treatment and Access Management	7,673,842	7,673,842		Must = 0
H SUGS	Substance Use and Gambling Services	WSS	Substance Use Disorder Services - Women's Specialty Services	435,912	435,912		Must = 0
H SUGS	SUBTOTAL Substance Use and Gambling Services			15,227,980	15,227,980		Must = 0
H	Other MDHHS Earned Contracts (describe):						Must = 0
H	Other MDHHS Earned Contracts (describe):						Must = 0
H	SUBTOTAL Other MDHHS Earned Contracts			27,983,529	27,764,529	219,000	Must = 0
H	BALANCE MDHHS EARNED CONTRACTS (must = 0)						Must = 0

**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
GENERAL FUND CONTRACT RECONCILIATION AND CASH SETTLEMENT**

CMHSP:
FISCAL YEAR:
SUBMISSION TYPE:
SUBMISSION DATE:

DETROIT WAYNE INTEGRATED HEALTH NETWORK
FY 21 / 22
YE Final
2/28/2023

1. General Fund Services - Available Resources	Funding Resources
a. CMH Operations (FSR B 101)	25,955,086
b. Intentionally left blank	
c. Intentionally left blank	
d. Sub-Total General Fund Contract Authorization	\$ 25,955,086
e. 1st & 3rd Party Collections (FSR B 121 + B 122)	
f. Prior Year GF Carry-Forward (FSR B 123)	1,510,695
g. Intentionally left blank	
h. Redirected CMHSP to CMHSP Contracts (FSR B 313)	
i. Redirected Non-MDHHS Earned Contracts (FSR B 314)	
j. Sub-Total Other General Fund Resources	\$ 1,510,695
k. Local 10% Associated to 90/10 Services (FSR M 201)	2,859,842
l. Local 10% Match Cap Adjustment (FSR M 203)	
m. Sub-Total Local 10% Associated to 90/10 Services	\$ 2,859,842
n. Total General Fund Services - Resources	\$ 30,325,623

3. Summary of Resources / Expenditures	Amount
a. Total General Fund Services - Resources	30,325,623
b. Total General Fund Services - Expenditures	29,048,372
c. Sub-Total General Fund Services Surplus (Deficit)	\$ 1,277,251
d. Less: Forced Lapse to MDHHS (GF work sheet 5 d column F)	
e. Net General Fund Services Surplus (Deficit)	\$ 1,277,251

4. Disposition:	Amount
a. Surplus	
b. Transfer to Fund Balance - GF Carry-Forward Earned	(1,277,251)
c. Lapse to MDHHS - Contract Settlement	
d. Total Disposition - Surplus	\$ (1,277,251)

Deficit	Amount
e. Redirected from Local (FSR B 331)	
f. Redirected from risk corridor (FSR B 332)	
g. Total Disposition - Deficit	
h. Total Cash Settlement: (Due MDHHS) / Due CMHSP	\$ -

5. Cash Settlement: (Due MDHHS) / Due CMHSP	Amount
a. Forced Lapse to MDHHS	
b. Lapse to MDHHS - Contract Settlement	
c. Return of Prior Year General Fund Carry-Forward	
d. Intentionally left blank	
e. Contract Authorization - Late Amendment	
f. Intentionally left blank	
g. Misc: (please explain)	
h. Total Cash Settlement: (Due MDHHS) / Due CMHSP	\$ -

2. General Fund Services - Expenditures	90/10 - Local Cap	Expenditures
a. 100% MDHHS Matchable Services (FSR B 201)		449,950
b. 100% MDHHS Matchable Services - CMHSP Local Match Cap (FSR B 202)		
c. 90/10% MDHHS Matchable Services (FSR B 203 Column A)	28,598,422	
d. Local 10% Match Cap Adjustment (FSR M 203)		28,598,422
e. Intentionally left blank		
f. Intentionally left blank		
g. Sub-Total General Fund Services - Expenditures		\$ 29,048,372
h. GF Supplement for Unfunded Medicaid - (PIHP use only) (FSR B 301)		
i. GF Supplement for Unfunded Healthy Michigan - (PIHP use only) (FSR B 301.1)		
j. Intentionally left blank		
k. GF Supplement for Unfunded Opioid Health Home Services (PIHP use only) (FSR B 301.3)		
l. GF Supplement for Unfunded Health Home Services (PIHP use only) (FSR B 301.4)		
m. GF Supplement for Unfunded MI Health Link - (PIHP use only) (FSR B 301.5)		
n. GF Supplement for Unfunded Targeted Case Management (FSR B 304)		
o. Intentionally left blank		
p. Intentionally left blank		
q. GF Supplement for Injectable Medications (FSR B 309)		
r. GF Supplement for PIHP to Affiliate Medicaid Services Contracts (FSR B 310)		
s. GF Supplement for PIHP to Affiliate CCBHC Medicaid Contracts (FSR B 310.1)		
t. GF Supplement for PIHP to Affiliate Opioid Health Home Services Contracts (FSR B 310.2)		
u. GF Supplement for PIHP to Affiliate Health Home Services Contracts (FSR B 310.3)		
v. GF Supplement for PIHP to Affiliate MI Health Link Services Contracts (FSR B 310.4)		
w. GF Supplement for PIHP to Affiliate CCBHC Non-Medicaid Contracts (FSR B 310.5)		
x. GF Supplement for CMHSP to CMHSP Contracts (FSR B 312)		
y. Sub-Total General Fund Services Supplement - Expenditures		\$ -
z. Total General Fund Services - Expenditures		\$ 29,048,372

6. General Fund MDHHS Commitment	Amount
a. MDHHS / CMHSP Contract Funded Expenditures	24,677,895
b. Earned General Fund Carry-Forward	1,277,251
c. Total MDHHS General Fund Commitment	\$ 25,955,086

7. Report Certification
This certification has been moved to the CERTIFICATION OF MDHHS CONTRACT ATTACHMENTS 6.5.1.1 REPORT SUBMISSIONS form.

Questions should be directed to:
This contact information has been moved to the CERTIFICATION OF MDHHS CONTRACT ATTACHMENTS 6.5.1.1 REPORT SUBMISSIONS form.

**MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
GENERAL FUND CONTRACT SETTLEMENT WORKSHEET**

CMHSP: DETROIT WAYNE INTEGRATED HEALTH NETWORK
FISCAL YEAR: FY 21 / 22
SUBMISSION TYPE: YE Final
SUBMISSION DATE: 2/28/2023

1. General Fund (Formula and Categorical Funding)	Contract Authorization	Cash Received		Amount Due CMHSP / (MDHHS) Cash Settlement
		Through 9/30	After 9/30 Prior to Settlement	
a. CMH Operations	25,955,086	25,955,086		25,955,086
b. Intentionally left blank				-
c. Total Current FY GF Authorization / Cash Received / Cash Settlement	\$ 25,955,086	\$ 25,955,086	\$ -	\$ 25,955,086

2. Current Year - General Fund Carry-Forward - Maximum	Contract Authorization	Maximum C/F
a. CMH Operations	25,955,086	
b. Total Current Year Maximum Carry-Forward	\$ 25,955,086	\$ 1,297,754

3. Prior Year - General Fund Carry-Forward	FY	If balance of Prior Year GF Carry-Forward is not zero, balance must be explained
a. Prior Year GF Carry-Forward Earned	1,510,695	
b. Prior Year GF Carry-Forward (FSR B 123)	1,510,695	
c. Balance of Prior Year General Fund Carry-Forward	\$ -	

4. Categorical - Categories	Authorization	Expenditures	Lapse	Cost Above Authorizations
a. Other Funding - Please explain			-	-
b. Other Funding - Please explain			-	-
c. Other Funding - Please explain			-	-
d. Totals	\$ -	\$ -	\$ -	\$ -

5. Narrative: Both CRCS and Contract Settlement Worksheet

SPECIAL FUND ACCOUNT
For Recipient Fees and Third-Party Reimbursement
 As Added to Mental Health Code per PA 423, 1980

CMHSP: DETROIT WAYNE INTEGRATED HEALTH NETWORK
FISCAL YEAR: FY 21 / 22
SUBMISSION TYPE: YE Final
SUBMISSION DATE: 2/28/2023

Part A: Mental Health Code (MHC) 330.1311 - County Funding Level	
1. County Funding - 1979/1980	
2. County Funding - Current Fiscal Year	

Part B: Mental Health Code (MHC) 330.1226a - Cash Collections Year to Date by Service Category and Source				
Service Category	(1) Individuals Relatives	(2) Insurers Including Medicare	(3) Medicaid Health Plan Organizations	(4) Total
1. Inpatient Services				\$ -
2. Residential Services				\$ -
3. Community Living Services				\$ -
4. Outpatient Services				\$ -
5. Total	\$ -	\$ -	\$ -	\$ -

Part C: Mental Health Code (MHC) 330.1226a - Cash Collections Quarterly Summary	
1. First Quarter	
2. Second Quarter	
3. Third Quarter	
4. Fourth Quarter	
5. Total	\$ -

Certification
This certification has been moved to the CERTIFICATION OF MDHHS CONTRACT ATTACHMENTS 6.5.1.1 REPORT SUBMISSIONS form.
Questions should be directed to:
This contact information has been moved to the CERTIFICATION OF MDHHS CONTRACT ATTACHMENTS 6.5.1.1 REPORT SUBMISSIONS form.

section 7.2.4 Special Fund Account of the CMHSP contract

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES CONCURRENT WAIVER PROGRAMS CONTRACT
CCBHC Supplemental**

PIHP: DETROIT WAYNE INTEGRAT
FISCAL YEAR: FY 21 / 22
SUBMISSION TYPE: YE Final
SUBMISSION DATE: 2/28/2023

		Number of Daily Visits by CCBHC			
		A	B	C	D
1.					
1.a	CCBHC Name	The Guidance Center			
	Code	T1040	T1040	T1040	
	Supplemental Rate	\$ 195.21	\$ -	\$ -	
	Medicaid Base Rate	\$ 283.32	\$ -	\$ -	
	Total PPS-1 Rate	\$ 478.53	\$ -	\$ -	
	# of Visits	48,317			
	# of Visits	1,130			
	Total Supplemental Funding	9,972,700			9,972,700
	Total Medicaid Funding	13,689,172			13,689,172
	Total CCBHC Funding	23,661,872			23,661,872
	TOTAL				

1.b	CCBHC Name	The Guidance Center			
	Code	T1040	T1040	T1040	
	Supplemental Rate	\$ 195.21	\$ -	\$ -	
	HMP Base Rate	\$ 283.32	\$ -	\$ -	
	Total PPS-1 Rate	\$ 478.53	\$ -	\$ -	
	# of Visits	12,242			
	# of Visits	348			
	Total Supplemental Funding	2,556,289			2,556,289
	Total Healthy Michigan Funding	3,468,403			3,468,403
	Total CCBHC Funding	6,024,692			6,024,692
	TOTAL				

		FOR CCBHC INFORMATIONAL PURPOSES ONLY			
1.c	CCBHC Name	The Guidance Center			
	Code	T1040	T1040	T1040	
	Rate	\$ 478.53	\$ -	\$ -	
	# of Visits	952			
	# of Visits	455,561			455,561
	TOTAL				

MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES CONCURRENT WAIVER PROGRAM CONTRACT

**AND
MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
CERTIFICATION OF MDHHS CONTRACT ATTACHMENTS C.6.5.1.1 & P.7.7.1.1 REPORT SUBMISSIONS**

PIHP:	DETROIT WAYNE INTEGRATED HE	FISCAL YEAR:	FY 21 / 22
CMHSP:	DETROIT WAYNE INTEGRATED HE	SUBMISSION TYPE:	YE Final
		SUBMISSION DATE:	2/28/2023

An "X" in the appropriate box in the section(s) below identifies the reports covered by this certification.

General Fund - Non Medicaid Reports	"X"	Contact		
		Name	Telephone #	Email Address
Special Fund Account - Section 226a				
Financial Status Report (FSR) - All Non-Medicaid	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Financial Status Report (FSR) - All Non-Medicaid Supplemental	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Contract Reconciliation and Cash Settlement	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Contract Settlement Worksheet	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Year End Accrual Schedule				

Medicaid Reports	"X"	Contact		
		Name	Telephone #	Email Address
Financial Status Report (FSR) - Medicaid	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Financial Status Report (FSR) - Healthy Michigan	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Financial Status Report (FSR) - CCBHC	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Financial Status Report (FSR) - CCBHC Supplemental	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Financial Status Report (FSR) - Health Homes	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Financial Status Report (FSR) - Opioid Health Homes	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Financial Status Report (FSR) - MI Health Link	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
RES Fund Balance	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Internal Service Fund (ISF)	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Shared Risk Calculation & Risk Financing	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Contract Reconciliation and Cash Settlement	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Contract Settlement Worksheet	X	Stacie Durant	313.344.9874	sdurant@dwhn.org
Year End Accrual Schedule				

CERTIFICATION

The name below is authorized to certify on behalf of the CMHSP or PIHP that this is an accurate statement of revenues / expenditures for the reporting period. Appropriate documentation is available and will be maintained for the required period to support the revenues and expenditures reported.

Contact Information

Name & Title	Date	Telephone #	Email Address
Stacie Durant	February 28, 2023	313.344.9874	sdurant@dwhn.org

**MDHHS/PIHP MEDICAID MANAGED SPECIALTY SUPPORTS AND SERVICES CONCURRENT WAIVER PROGRAM
CONTRACT
AND
MDHHS/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT (GF)
FINANCIAL STATUS REPORT BUNDLE**

PIHP:	DETROIT WAYNE INTEGRATED H	FISCAL YEAR:	FY 21 / 22
CMHSP:	DETROIT WAYNE INTEGRATED H	SUBMISSION TYPE:	YE Final
		SUBMISSION DATE:	2/28/2023

The "Additional Narrative" tab of the FSR Bundle should be utilized to provide additional narrative explanation regarding any entry or activity where additional information would be beneficial when the narrative section of the individual form was not sufficient.

Column Instructions:	
FORM (FSR Bundle Tab):	Select the appropriate Form (FSR Bundle Tab) from the drop down menu.
Row Reference:	Enter the row reference that the additional narrative refers to.
Narrative:	Enter narrative explanation regarding any entry or activity where additional information would be beneficial.

FORM (FSR Bundle Tab)	Row Reference	Narrative
SELECT		

FORM (FSR Bundle Tab)	Row Reference	Narrative
SELECT		

FORM (FSR Bundle Tab)	Row Reference	Narrative
SELECT		

FORM (FSR Bundle Tab)	Row Reference	Narrative
SELECT		

FORM (FSR Bundle Tab)	Row Reference	Narrative
SELECT		

Detroit Wayne Integrated Health Network
Notes to the Schedules
Year Ended September 30, 2022

1. Basis of Accounting

The schedules were prepared on the accrual basis of accounting in accordance with the standards of the Governmental Accounting Standards Board. Revenue is recorded when earned.

2. Basis of Presentation and Significant Accounting Policies

The examined financial status report and examined cost settlement schedules were prepared for the purpose of complying with the provisions of the Community Mental Health Compliance Examination Guidelines, issued by the Michigan Department of Health and Human Services (MDHHS). Expenditures reported on the schedules are reported on the same basis of accounting as the basic financial statements. In addition, expenditures reported on the schedules are recognized following cost principles contained in Title 2 U.S. Code of Federal Regulations Part 200, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

Because these schedules present only a selected portion of the operations of Detroit Wayne Integrated Health Network, they are not intended to, and do not, present the financial position, changes in net position, or cash flows, if applicable, of Detroit Wayne Integrated Health Network.

**Detroit Wayne Integrated Health Network
Schedule of Findings and Questioned Costs
Year Ended September 30, 2022**

Section I - Summary of Accountant's Results

Schedules

Type of accountant's report issued: Fairly stated in relation to Detroit Wayne Integrated Health Network's basic financial statements taken as a whole

Type of accountants' report issued on compliance: Unmodified

Internal control:

- Material weakness(es) identified? Yes No
- Significant deficiency(ies) identified not considered to be material weaknesses? Yes None reported

Material noncompliance with provisions of laws, regulations, or contracts identified? Yes No

Known fraud Yes No

Section II - Findings and Questioned Costs

None

Section III - Examination Adjustments

As a result of our procedures, we noted no examination adjustments to the amended financial status report submitted to MDHHS.

Section IV - Comments and Recommendations

We have no additional comments or recommendations.

**DWIHN Division of Management and Budget
Monthly Finance Report
For the six months ended March 31, 2023**

DWIHN Finance accomplishments and noteworthy items:

Plante Moran will present the three annual audit reports.

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

- Cash flow is very stable and should continue to remain strong throughout the year as liquidity ratio = 2.54.

	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR
DWIHN	2.75	3.08	2.78	3.32	3.56	1.81	1.81	2.05	2.65	2.58	2.36	2.54

- (A) Cash and Investments – comprise of funds held by three (3) investment manager, First Independence CDARS, Comerica, and Flagstar accounts. This amount includes the \$21.3 million cash held in collateral for the two building loans.
- (B) Due from other governments – comprise various local, state and federal amounts due to DWIHN. Approximately \$6.7 million in SUD and MH block grant due from MDHHS. Approximately \$8.7 million for the 2nd quarter pass through HRA revenue. Approximately \$5.8 million for PIBP for FY22. Approximately \$2.9 million due from MDHHS related to FY22 CCBHC cost settlement.
- (C) Accounts receivable/Allowance - Accounts receivable consist of \$2.1 million in cost settlement due from the fiscal intermediaries related to FY22. In addition, approximately \$2.4 million due from Wayne County estimated 2nd Quarter PA2 and \$700,000 in actual Quarter 1 PA2. Finally, Team Wellness \$1.1 million related to prior year receivable outstanding. DWIHN recorded \$.5 million in an allowance for two SUD providers due to length of amount owed and likelihood of collections.
- (D) Prepayments and deposits – DWIHN provided The Children’s Center an early provider stability payment totaling \$3.5 million. TCC expressed concerns regarding its ability to meet cash flow needs.
- (E) IBNR Payable – represents incurred but not reported (IBNR) claims from the provider network; historical average claims incurred through March 31, 2023, including DCW hazard pay, 10% rate increase and \$1.00/hr. DCW wage increase, was approximately \$399.8 million however actual payments were approximately \$336 million. The difference represents claims incurred but not reported and paid of \$63.8 million.
- (F) Due to other governments – includes \$8 million due to MDHHS for death recoupment; \$1.8 million due to MDHHS for FY20 general fund carryover in excess of 5%; and \$8.5 million related to FY22 DCW hazard pay cost settlement. In addition, there is approximately \$4.1 million due to MDHHS for state hospitals and IPA tax payment.
- (G) Federal grants and contracts– The \$5.2 million variance is primary due to timing of several SUD grants and a year-end reclassification entry to move 18% of revenue to state grants. In addition, approximately \$2.2 million relates to the mobile crisis grant whereby DWIHN has not incurred any expenses to date.
- (H) SUD, Children and IDD services - \$22 million variance to timing and reduction in expenses. DWIHN anticipates providing stability payments in October/November 2023.

DETROIT WAYNE INTEGRATED HEALTH NETWORK

Statement of Net Position

As of March 31, 2023

Assets

Cash and investments	\$ 216,896,417	A
Investments in Internal Service Fund	62,639,102	A
Other cash and investments	1,000	
Receivables		
Due from other governmental units	27,016,355	B
Accounts receivable	8,285,565	C
Less: allowance for uncollectible	(487,838)	C
Prepayments and deposits	3,899,098	D
Total current assets	<u>318,249,699</u>	
Capital assets, net of accumulated depreciation	<u>26,929,639</u>	
Total Assets	<u><u>\$ 345,179,338</u></u>	

Liabilities and Net Position

Liabilities

Accounts payable	\$ 17,989,122	
IBNR Payable	63,822,770	E
Due to Wayne County	1,667,372	
Due to other governments	22,552,791	F
Accrued wages and benefits	2,002,865	
Unearned revenue	394,967	
Accrued compensated balances	1,739,306	
Total current liabilities	<u>110,169,193</u>	
Notes Payable	<u>5,461,080</u>	
Total Liabilities	<u>115,630,273</u>	
Net Position		
Net investment in capital assets	21,468,559	
Unrestricted - PA2 funds	7,833,972	
Restricted Cash Collateral	21,326,879	
Internal Service Fund	61,277,705	
Unrestricted	<u>117,641,950</u>	
Total Net Position	<u>229,549,065</u>	
Liabilities and Net Position	<u><u>\$ 345,179,338</u></u>	

DETROIT WAYNE INTEGRATED HEALTH NETWORK
Statement of Revenues, Expenses and Changes to Net Position
For the Six Months Ending March 31, 2023

	March 2023			Year to Date			
	Budget	Actual	Variance	Budget	Actual	Variance	
Operating Revenues							
Federal grants	2,594,738	2,968,781	374,043	15,568,429	10,348,852	(5,219,577)	G
State grants and contracts	80,716,537	80,326,582	(389,955)	484,299,222	486,400,316	2,101,094	
Medicaid and GF savings	-	-	-	-	39,989,242	39,989,242	
MI Health Link	823,844	538,129	(285,715)	4,943,061	6,178,648	1,235,587	
Local grants and contracts	1,830,665	2,287,716	457,051	10,983,993	11,989,284	1,005,291	
Other charges for services	3,333	144	(3,189)	20,000	21,454	1,454	
Total Operating Revenues	85,969,117	86,121,352	152,235	515,814,705	554,927,796	39,113,091	
Operating Expenses							
Salaries	2,248,417	2,056,428	191,989	13,490,500	13,288,383	202,117	
Fringe benefits	866,810	746,926	119,884	5,200,859	5,298,624	(97,765)	
Substance abuse services	5,718,855	5,753,214	(34,359)	34,313,129	28,000,923	6,312,206	H
Autism Services	6,512,645	6,300,454	212,191	39,075,867	37,912,822	1,163,045	
MI HealthLink	823,010	1,071,483	(248,473)	4,938,062	5,727,974	(789,912)	
Adult Services	27,102,033	29,273,477	(2,171,444)	162,613,209	160,381,625	2,231,584	
Children Services	6,362,764	4,036,772	2,325,992	38,176,586	33,114,453	5,062,133	H
Intellectual Developmental Disabled	32,804,943	30,437,182	2,367,761	196,829,660	185,321,071	11,508,589	H
Grant Programs	895,178	721,809	173,369	5,350,264	3,771,455	1,578,809	
State of Michigan	1,569,175	1,261,109	308,066	9,415,050	9,058,541	356,509	
Depreciation	147,233	260,491	(113,258)	883,397	520,409	362,988	
Other operating	1,001,387	710,358	291,029	6,028,122	3,299,012	2,729,110	
Total Operating Expenses	86,052,450	82,629,703	3,422,747	516,314,705	485,695,292	30,619,413	
Operating Revenues over (under) Expenses	(83,333)	3,491,649	(3,270,512)	(500,000)	69,232,504	69,732,504	
Non-operating Revenues (Expenses)							
Investment Earnings	83,333	1,239,315	1,155,982	500,000	2,973,074	2,473,074	
Total Non-operating Revenues (Expenses)	83,333	1,239,315	1,155,982	500,000	2,973,074	2,473,074	
Change in Net Position	-	4,730,964	(2,114,530)	-	72,205,578	72,205,578	
Net Position - Beginning of year					157,343,486	157,343,486	
Net Position - End of Year	-	4,730,964	(2,114,530)	-	229,549,064	229,549,064	

DETROIT WAYNE INTEGRATED HEALTH NETWORK
Statement of Cash Flows
For the Six Months Ending March 31, 2023

Cash flows from operating activities	
Cash receipts from the state and federal governments	\$ 505,701,103
Cash receipts from local sources and customers	12,010,738
Payments to suppliers	(567,823,323)
Payments to employees	(20,027,034)
	<u>(70,138,516)</u>
Net cash provided by (used in) operating activities	
Cash flows from capital and related financing activities	
Acquisition of capital assets	(8,351,648)
Proceeds from notes payable	5,461,080
Principle and interest paid on capital debt	(4,962,653)
	<u>(7,853,221)</u>
Net cash provided by (used in) capital and related financing activities	
Cash flows from investing activities	
Interest received on investments	2,973,074
Proceeds from sale of assets	-
	<u>2,973,074</u>
Net cash provided by investing activities	
Net increase (decrease) in cash and cash equivalents	
	(75,018,663)
Cash and investments - beginning of period	
	<u>354,555,182</u>
Cash and investments - end of period	
	<u><u>\$ 279,536,519</u></u>
Reconciliation of operating income (loss) to net cash provided by (used in) operating activities	
Operating income (loss)	\$ 69,232,504
Adjustments to reconcile operating income (loss) to net cash used in operating activities:	
Depreciation	520,409
Decreases (increases) in current assets:	
Accounts receivable	2,967,495
Prepayments and deposits	(3,126,442)
Due from other governmental units	924,949
Increases (decreases) in current liabilities:	
Accounts and contracts payable	(165,151,771)
IBNR Payable	63,822,770
Accrued wages	(1,057,180)
Due to Wayne County	1,667,372
Due to other governmental units	1,169,776
Unearned revenue	(41,108,398)
	<u>(70,138,516)</u>
Net cash provided by (used in) operating activities	
Bank balance comprise the following @ March 31 2023:	
Flagstar (\$21.3 million restricted for loan account)	\$176,656,615
Investment Managers	79,556,478
First Independence Bank (CDARS)	20,100,200
Comerica	1,019,082
	<u>\$277,332,375</u>



**Detroit Wayne
Integrated Health Network**

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

FAX: (313) 833-2156
TDD: (800) 630-1044 RR/TDD: (888) 339-5588

MEMO

Date: May 1, 2023

To: Ms. Dora Brown, Chair
Finance Committee

From: Jean Mira *jm*
Procurement Administrator

Re: 2nd Quarter FY23 – Board Report for Procurements
Non-Competitive Under \$50,000 and All Cooperative Purchasing and
Emergency Procurements

In accordance with DWHN Procurement Policy (Article 2.B.1 (b) Article 2.B.2 (c) and Article 2.B.7 (g)) the attached report is being submitted for all non-competitive procurements under \$50,000 for the 2nd Quarter FY 2023 (January, 2023, February, 2023 and March, 2023). This report includes all cooperative purchases, including those over \$50,000 and the total of all non-competitive procurements made in this quarter.

Contracts over \$50,000 are not included individually, as those procurements were previously approved by the Board via a Board Action, nor any other procurements previously approved per an approved Board Action. Additionally, the report shows “PO” (Purchase Orders) and “BO” (Blanket Orders). A “PO” is a one-year contract that expires at the end of the fiscal year, whereas, a “BO” is a multi-year or crossing fiscal years contract.

Please feel free to contact me if you have any questions.

Attachment

Board of Directors

Angelo Glenn, Chairperson
Karima Bentounsi
Jonathan C. Kinloch

Kenya Ruth, Vice Chairperson
Dorothy Burrell
Kevin McNamara

Dora Brown, Treasurer
Lynne F. Carter, MD
Bernard Parker

Dr. Cynthia Tauieg, Secretary
Eva Garza Dewaelsche
William Phillips



Vendor Name	City	State	Zip Code	Document Date	PO Number	Item Description	Extended Cost	Comment	Policy	Description	Department
Amazon Capital Services, Inc.	Seattle	WA	98109	1/19/2023	PO22300159	Portable Projector Screen with Stand for Home & Outdoor Movie Projection with White Movie	\$ 99.99	SM PUR	TECH	Portable Projector Screen	ADMIN
Amazon Capital Services, Inc.	Seattle	WA	98109	1/25/2023	PO22300187	Microsoft Modern USB Headset Term: Spotbuy	\$ 944.73	SM PUR	TECH	Microsoft Modern USB Headsets	ADMIN
Amazon Capital Services, Inc.	Seattle	WA	98109	1/25/2023	PO22300188	Ride Safer Travel Vest Gen 5, X-Large, Black Term: 214.38	\$ 214.38	SM PUR	UTILMGMT	Durable Medical Equipment	FIN
Amazon Capital Services, Inc.	Seattle	WA	98109	1/31/2023	PO22300193	Microsoft Modern USB Headset - Wired Headset, On-Ear Stereo Headphones with Noise-	\$ 944.73	SM PUR	TECH	Microsoft Modern USB Headsets	ADMIN
Amazon Capital Services, Inc.	Seattle	WA	98109	2/21/2023	PO22300220	65W Replacement AC Adapter Laptop Charger for Dell Latitude 13 3301 3310 3390 14 3400 3410	\$ 28.96	SM PUR	TECH	Replacement Laptop Chargers	TECH
Amazon Capital Services, Inc.	Seattle	WA	98109	3/6/2023	PO22300245	Logitech H390 USB Headset with Noise-Cancelling Mic Black , 16 Count	\$ 339.00	SM PUR	TECH	USB Noise Cancelling Headsets (pack of 16)	TECH
Amazon Capital Services, Inc.	Seattle	WA	98109	3/23/2023	PO22300262	Amazon Basics 14-Inch Tablet Bag, Black	\$ 842.00	SM PUR	TECH	IT Equipment for Staff use	TECH
Another Phase, Inc.	Livonia	MI	48152-25	2/24/2023	PO22300229	FY 23 CIT Program - Wicker Term: 01/01/2023 to 09/30/2023	\$ 46,000.00	CS	INTEG	FY23 Another Phase CIT Program	INTEG
Burpee Man LLC	Garden City	MI	48135	1/31/2023	PO22300191	Retirement Plaques Term: Spot Buy	\$ 490.00	SM PUR	ADMIN	Retirement Plaques	ADMIN
Burpee Man LLC	Garden City	MI	48135	2/28/2023	PO22300239	Nameplates for Board Members Term: Spot Buy	\$ 20.00	SM PUR	ADMIN	Nameplates for Board Members	ADMIN
CDW Government LLC	Vernon Hills	IL	60061	1/5/2023	BO22390019	Tenable SC Scan Svc Sub (0-40k) CDW #5848683 Term: 01/01/2023 to 12/31/2023	\$ 7,800.00	C	TECH	Tenable SC (Vulnerability Mgmt Software	ADMIN
CDW Government LLC	Vernon Hills	IL	60061	1/6/2023	PO22300145	Zoho ManageEngine OPMGR Pro Perp, CDW#7246760, Mfg #702012.ONURL3 Term: Spot	\$ 295.00	C	TECH	OpManager URL Monitoring Add'l Licensing	ADMIN
CDW Government LLC	Vernon Hills	IL	60061	1/10/2023	PO22300146	Epson PowerLite 118-3LCD Projector Portable Lan, CDW#6069274 Term: Spot Buy	\$ 1,050.00	C	TECH	Projectors and Screens	ADMIN
CDW Government LLC	Vernon Hills	IL	60061	1/31/2023	PO22300192	Microsoft Modern USB-C Headset, CDW#7251187 Term: Spot Buy	\$ 1,535.10	C	TECH	I.T. Equipment	ADMIN
CDW Government LLC	Vernon Hills	IL	60061	2/6/2023	PO22300208	Zoho ManageEngine DT CTRL UEM ED SUB, CDW#5330496 Term: Spot Buy	\$ 525.00	C	TECH	Endpoint Licenses	ADMIN
CDW Government LLC	Vernon Hills	IL	60061	2/10/2023	PO22300212	APC NetShelter SX Rack Enclosure w/roof & sides-42U, CDW#1278091 Term: Spot Buy	\$ 13,500.00	C	TECH	NetShelter Cabinets	ADMIN
CDW Government LLC	Vernon Hills	IL	60061	2/10/2023	PO22300214	GITHUB Enterprise Edition, CDW #3251697 Term: Spot Buy	\$ 2,680.00	C	TECH	GITHUB License	ADMIN
CDW Government LLC	Vernon Hills	IL	60061	2/28/2023	PO22300237	ADO CC F ENT ALL APPS L7 (3/1/23 - 2/29/24;1Yr) Term: Spot Buy	\$ 1,145.67	C	TECH	Adobe Creative Cloud (Communications)	TECH
CDW Government LLC	Vernon Hills	IL	60061	2/28/2023	PO22300238	Zoho ManageEngine ADMGR+ PRO SUB 1Y Term: Spot Buy	\$ 5,977.00	C	TECH	Zoho ManageEngine AD Mgr Plus	TECH
CDW Government LLC	Vernon Hills	IL	60061	3/2/2023	PO22300241	Shure Wireless Dual Presenter System with Two CVL Lavalier Microphones	\$ 597.55	C	TECH	Audio Equipment (Communications Dept)	TECH
CDW Government LLC	Vernon Hills	IL	60061	3/10/2023	BO22390024	Proofpoint Targeted Attack Protection URL Defense & Attachment Def, TAP Term: 04/01/23	\$ 29,816.64	C	TECH	Proofpoint Renewal 2023	TECH
CDW Government LLC	Vernon Hills	IL	60061	3/14/2023	BO22390025	TeamViewer Corporate - subscription license (1 year) - 1 license Term: 03/14/2023 to 03/13/2024	\$ 2,255.00	C	TECH	Team Viewer	TECH
CDW Government LLC	Vernon Hills	IL	60061	3/15/2023	BO22390026	ADO ACROBAT PRO F ENT LGA L7 Term: 03/15/2023 to 03/14/2024	\$ 9,967.50	C	TECH	Adobe Acrobat Pro	TECH
CDW Government LLC	Vernon Hills	IL	60061	3/15/2023	PO22300254	MS EA O365 E3 GCC P USER Term: 4/1/23 - 6/30/23	\$ 3,030.00	C	TECH	MicroSoft EA O365 Licenses	TECH
CDW Government LLC	Vernon Hills	IL	60061	3/23/2023	PO22300263	APC Smart-UPS SRT 8000VA Sinewave Tower 208V Term: Spot Buy	\$ 14,400.00	C	TECH	Power Equipment for new sites	TECH
CDW Government LLC	Vernon Hills	IL	60061	3/28/2023	PO22300265	Microsoft Modern USB Headset for Business - headset	\$ 1,857.20	C	TECH	Headsets	TECH
Danmar Products Inc	Ann Arbor	MI	48170	2/6/2023	PO22300209	DME Term: 10/01/2022 to 09/30/2023	\$ 10,000.00	SM PUR	FINANCE	Durable Medical Equipment	FIN
Dell Marketing LP	Dallas	TX	75267	2/3/2023	PO22300206	Dell Latitude 7430 Term: Spot Buy	\$ 40,500.00	C	TECH	Laptop Hardware	ADMIN
Dell Marketing LP	Dallas	TX	75267	2/20/2023	PO22300219	Dell Latitude 7430 Term: Spot Buy	\$ 40,500.00	C	TECH	Laptop Hardware	ADMIN
Dell Marketing LP	Dallas	TX	75267	2/28/2023	PO22300236	LapTop Term: Spot Buy	\$ 2,854.72	C	TECH	Laptop Dell XPS	TECH
Dell Marketing LP	Dallas	TX	75267	3/2/2023	PO22300242	Dell Latitude 7430 Term: Spot Buy	\$ 40,500.00	C	TECH	Laptops (Batch 2)	TECH
Dell Marketing LP	Dallas	TX	75267	3/30/2023	PO22300266	Dell Latitude 7440 Term: Spot Buy	\$ 60,750.00	C	TECH	Dell 7430 Laptops	TECH
Dice.com	Chicago	IL	60693	3/2/2023	PO22300240	Advertisement for job positions (IT) Term: Spot Buy	\$ 1,000.00	SM PUR	PERSONNEL	Advertisement for job positions	ADMIN
Efficient Office Solutions LLC	Farmington	MI	48335	1/4/2023	PO22300144	Office furniture rental for NCO Term: 10/24/2022 to 10/31/2023	\$ 18,594.76	CS	FACILITIES	Lease Office Furniture	FACILITIES
Efficient Office Solutions LLC	Farmington	MI	48335	2/13/2023	BO22390022	Leased Office Furniture for NCO 10/24/2022 to 11/30/2023	\$ 27,823.80	CS	FACILITIES	Office Furniture Rental NCO	FACILITIES
Executive Speaker Bureau	Germantown	TN	38138	3/16/2023	PO22300256	Executive Speaker to address Staff Term: Spot Buy	\$ 5,000.00	CS	PERSONNEL	Executive Speaker to address Staff	ADMIN
Family Matters Counseling and Psychological Services Inc	Southfield	MI	48076	2/21/2023	PO22300222	Self Care Learning Series Term: 10/01/2022 to 09/30/2023	\$ 3,000.00	CS	CHILDREN	Self-Care Learning Series	CHILD
GFL Environmental	Sterling Heights	MI	48314	1/25/2023	PO22300189	Trash/Recycle Removal Term: 10/01/2022 to 03/01/2023	\$ 4,023.86	SM PUR	FACILITIES	Trash/Recycle Removal	FACILITIES

GFL Environmental	Sterling Heights	MI	48314	3/8/2023	BO22390023	Trash/Recycle Removal - 707 W. Milwaukee Term: 03/01/2023 to 03/01/2026	\$ 16,307.75	CS	FACILITIES	Trash/Recycle Removal	FACILITIES
Goldsmith, Jane Marie	Melbourne	FL	32935	3/17/2023	PO22300258	HSAG Consultant Term: 02/20/2023 to 09/30/2023	\$ 15,000.00	CS	ADMIN	HSAG Consultant	ADMIN
KnowBe4, Inc	Clearwater	FL	33755-66	2/28/2023	PO22300235	KnowBe4 Security Awareness Training Subscription Diamond	\$ 29,260.00	C	TECH	Security Awareness Training & Compliance Subscription	TECH
Lightfoot, James Jr.	Detroit	MI	48227	3/7/2023	PO22300247	FY 23 Lightfoot CIT Program Term: 01/01/2023 to 09/30/2023	\$ 46,000.00	CS	INTEG	FY 23 Lightfoot CIT Program	INTEG
Michigan Assoc of Comm Mental Health Bo	Lansing	MI	48933	2/23/2023	PO22300227	Two thousand Recipient Rights Booklets. Added \$1,950.00 to line 1 Term: Spot Buy	\$ 2,950.00	SM PUR	RIGHTS	Recipient Rights Booklets	RIGHTS
Morgan, Pamela Jean	Southfield	MI	48075	2/9/2023	PO22300211	FY 23 Key Insight - Network Prevention Term: 10/01/2022 to 09/30/2023	\$ 2,550.00	CS	INTEG	FY 23 Key Insight -Network Prevention Ethics	INTEG
Nappi International Inc.	Sheffield	MA	01257	1/12/2023	PO22300152	FY 22 De-escalation and Community Safety Training Term: 10/01/2022 to 09/30/2023	\$ 9,125.00	CS	INTEG	FY 22 De-escalation and Community Safety Training	INTEG
National Committee for Quality Assurance	Washington	DC	20005	1/23/2023	PO22300186	2023 HP Survey Tool web-based 2-4 user, #10801-322-23 Term: Spot Buy	\$ 4,800.00	SM PUR	TECH	NCQA Survey Tool	ADMIN
National Committee for Quality Assurance	Washington	DC	20005	2/13/2023	PO22300215	MBHO Survey 2023 - MBHO Accreditation Application Fee Term: 10/01/2022 to 09/30/2023	\$ 15,000.00	CS	ADMIN	NCQA - MBHO Accreditation Application Fee	ADMIN
Oleksiak, Carol A.	Dearborn	MI	48124	2/21/2023	PO22300221	Quarterly Leadership Series Term: 10/01/2022 to 09/30/2023	\$ 2,000.00	CS	CHILDREN	Quarterly Leadership Training Series	CHILD
Premier Group Associates, LC	Detroit	MI	48226-34	3/8/2023	PO22300249	Snow removal, De-icing and misc. services Term: 11/15/2022 to 04/30/2023	\$ 20,000.00	CS	FACILITIES	Snow removal and other services to the grounds	FACILITIES
Prime Youth Program	Detroit	MI	48235	3/13/2023	PO22300251	FY23 Prime Youth Program Term: 10/01/2022 to 09/30/2023	\$ 40,000.00		INTEG	FY23 Prime Youth Program	INTEG
Rollins, Inc.	Southfield	MI	48033	3/14/2023	PO22300253	Monthly misc. pest control services Term: 10/01/2022 to 09/30/2023	\$ 1,518.30	SM PUR	FACILITIES	Misc. Pest Control Services	FACILITIES
Sterling Security LLC	Southfield	MI	48075	3/7/2023	PO22300248	Onsite Security Services 707 W. Milwaukee Term: 12/23/2022 to 02/28/2023	\$ 20,079.89	EM	FACILITIES	Onsite Security Services 707 W. Milwaukee	FACILITIES
The Arab American News	Dearborn	MI	48126	1/10/2023	PO22300147	Mental Health Messaging Term: 10/01/2022 to 09/30/2023	\$ 15,000.00	CS	ADMIN	Mental Health Messaging	ADMIN

\$ 640,493.53	Grand Total
\$ 169,510.00	Wayne County
\$ 333,795.79	IT

Contract Percentage Overall
Wayne County - 26.47
Out County - 73.53

Funding Percentage w/o IT
Wayne County - 55.27
Out County - 44.73

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 23-05R4 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 5/17/2023

Name of Provider: Detroit Wayne Integrated Health Network

Contract Title: FY 2022-2023 Operating Budget

Address where services are provided: None

Presented to Finance Committee at its meeting on: 5/15/2023

Proposed Contract Term: 10/1/2022 to 9/30/2023

Amount of Contract: \$ 1,031,526,410.00 Previous Fiscal Year: \$ 927,640,119.00

Program Type: Modification

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

Date Contract First Initiated: 10/1/2022

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).

This is a request for Board approval to amend the FY23 Operating Budget as follows:

1. De-certification of \$200,000 - Federal grant revenue --MDHHS Amendment #3 to reduce the Residential Gambling program by 50%.
2. Certification of \$100,000 Federal Grant revenue per the MDHHS approval to use FY22 unspent American Rescue Plan Act (ARPA) dollars to fund the cost of staff (Salary/Fringes @ \$90,909; Indirect costs @ \$9,901) to assist with the Post Partum Womens Pilot and GPRA Programs.
3. Board approval is also requested for the use of Medicaid Reserve dollars of \$573,380 to fund:
 - a. One (1) Assisted Outpatient Treatment (AOT) Case Manager position -- in conjunction with BHU -- to better coordinate hospital discharges and follow-up. The estimated cost of \$84,000 funds the annual salary and fringe benefit cost of \$60,000 and \$24,000 respectively.
 - b. Four (4) Masters level Residential Specialists for Residential Services to address the increase in workload through new initiatives and the gap in capacity to do annual assessments. The estimated cost of \$434,380 funds the annual salary and fringe benefit costs of \$310,272 and \$124,108, respectively.

c. Digital Media Campaign, \$55,000, which utilizes social media influencers to bring an awareness to youth about DWIHN and the services available to youth and community.

The revised FY23 Operating Budget of \$1,031,526,410 consists of the following revenue: \$21,630,181 (State General Funds, CCBHC General Funds); \$798,256,944 (Medicaid, DHS Incentive, Medicaid-Autism; Children's/SED Waiver, HAB); \$9,886,123 (MI Health Link); \$140,914,218 (Healthy MI-Mental Health and Substance Abuse); \$17,686,447 (Wayne County Local Match Funds); \$4,040,539 (PA2 Funds); \$7,294,100 (State Grant Portion of OBRA, SUD); \$31,036,858 (Federal Grants/Federal Block Grants); \$241,000 (Local Grant Revenue); \$500,000 (Interest Income); and \$40,000 (Misc. Revenue).

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

Source of Funds: Multiple

Fee for Service (Y/N):

Revenue	FY 22/23	Annualized
MULTIPLE	\$ 1,031,526,410.00	\$ 1,031,526,410.00
	\$	\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?

Approved for Submittal to Board:

Eric Doeh, President/CEO

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Thursday, May 4, 2023

Page 28 of 116
Signed: Monday, May 1, 2023

Board Action #: 23-05R4

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 23-63 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 5/17/2023

Name of Provider: Detroit Wayne Integrated Health Network

Contract Title: Community Outreach

Address where services are provided: 'None'

Presented to Finance Committee at its meeting on: 5/15/2023

Proposed Contract Term: 5/17/2023 to 9/30/2024

Amount of Contract: \$ 155,000.00 Previous Fiscal Year: \$

Program Type: Continuation

Projected Number Served- Year 1: 100,000,000 Persons Served (previous fiscal year): 100000000

Date Contract First Initiated: 5/17/2023

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).

The Communications Department is requesting funding in the amount of \$155,000 for additional community outreach, sponsorships and costs associated with contracting with several social media influencers. As the organization expands and grows, so too do the obligations of the Communications department. There are many more ways of reaching our audiences and one of them is through paying social media influencers to share mental health and substance use disorder messaging. There have been double the amount of sponsorship requests this year which also means the department has to purchase additional community outreach supplies to keep up with the demand of the requests.

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

Source of Funds: Local Funds

Fee for Service (Y/N): N

Revenue	FY 22/23	Annualized
LOCAL FUNDS	\$ 155,000.00	\$ 155,000.00
	\$	\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64910.817003.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, President/CEO

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

Eric Doeh

Signed: Tuesday, May 9, 2023

Stacie Durant

Signed: Tuesday, May 9, 2023