



CLINTON OFFICE
 1307 E. Townsend Rd.
 Saint Johns, MI 48879-9036
 (989) 224-2195

GRATIOT OFFICE
 151 Commerce Dr.
 Ithaca, MI 48847-1627
 (989) 875-3681

MONTCALM OFFICE
 615 N. State St.
 Stanton, MI 48888-9702
 (989) 831-5237

BOARD OF HEALTH:	Bruce DeLong David Pohl	George Bailey Timothy Gay	Phil Kohn Adam Petersen
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MID-MICHIGAN DISTRICT HEALTH DEPARTMENT (MMDHD)
 BOARD OF HEALTH
 FINANCE COMMITTEE MEETING
**Montcalm Office, Stanton
 Conference Rooms A & B**

**Wednesday, April 26, 2023
 8:30 a.m.**

AGENDA

We take action to protect, maintain, and improve the health of our community.

COMMITTEE MEMBERS: Bruce DeLong, Adam Petersen, and George Bailey (Chairperson)

STAFF: Mari E. (Liz) Braddock, Health Officer; Melissa Selby, Director of Administrative Services; Krishna Santana, Board Secretary

- A. MMDHD’s Expenses for March 11 through April 7, 2023 – **Included.**
- B. MMDHD’s Monthly Balance Sheet, Revenue and Expenditure Report for March 2023 – **Included.**
- C. Dental Assessment D0191 Price Increase – **Included.**
- D. Re-Hire to start at Step 3, Teamsters – **Included.**
- E. Fee Establishment for Rapid On-site Testing– **Included.**
- F.

BOARD OF HEALTH:	Bruce DeLong	George Bailey	Phil Kohn
	David Pohl	Timothy Gay	Adam Petersen

Board of Health Finance Committee Synopsis of Actions Needed

April 26, 2023 Finance Meeting

Item A.	EXPENSES FOR MARCH 11 THROUGH APRIL 7, 2023
Motion to recommend payment of the Mid-Michigan District Health Department's Expenses for March 11 through April 7, 2023, totaling \$572,328.25.	
Item B.	BALANCE SHEET, REVENUE AND EXPENDITURE REPORT FOR MARCH 2023
Motion to recommend the approval of the Balance Sheet, Revenue and Expenditure Report for March 2023.	
Item C.	DENTAL ASSESSMENT D0190 PRICE INCREASE
Motion to recommend MMDHD initiate a price increase of dental assessment.	
Item D.	RE-HIRE TO START AT STEP 3, TEAMSTERS
Motion to recommend MMDHD to re-hire previous employee for the part time Community Health Worker position at T4 step 3.	
Item E.	FEE ESTABLISHMENT FOR RAPID ON-SITE TESTING
Motion to recommend the establishment of a \$16.00 fee for OSOM Rapid Test.	



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BOARD OF HEALTH:	Bruce DeLong David Pohl	George Bailey Timothy Gay	Phil Kohn Adam Petersen
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Mid-Michigan District Health Department (MMDHD)
 BOARD OF HEALTH
 FINANCE COMMITTEE MEETING
 Gratiot Office, Ithaca

Wednesday, March 22, 2023, 8:30 a.m.

MINUTES

We take action to protect, maintain, and improve the health of our community.

Members Present: George Bailey (Chair), Bruce DeLong, and Adam Petersen

Members Absent: None

Other Board
 Members Present: None

Staff Present: Mari E. (Liz) Braddock, Health Officer; Melissa Selby, Director of Administrative Services; Lonnie Smith, Director of Environmental Health (EH); and Sarah Doak, Director of Community Health and Education, Hailey Brewer; Administrative Services Supervisor; Krishna Santana, Board Secretary

Staff Absent: None

Guests: Tammy Eurich, Public Health Representative (PHR)

G. Bailey called the Finance Committee Meeting of the Mid-Michigan District Board of Health (BOH) to order at 8:30 a.m., on Wednesday, March 22, 2023, at the Gratiot Office of the Mid-Michigan District Health Department (MMDHD), Ithaca, Michigan.

A. MMDHD's Expenses for February 11 through March 10, 2023

Motion made by A. Petersen to recommend the BOH approve and pay the MMDHD's Expenses for February 11 through March 10, 2023, totaling \$498,728.14. Motion seconded by B. DeLong. Motion carried.

B. MMDHD's Monthly Balance Sheet, Revenue and Expenditure Report for February 2023

Motion made by A. Petersen and seconded by B. DeLong to accept and place on file the Balance Sheet, Revenue and Expenditure Report for February 2023. Motion carried.

C. Purchase of Video Conferencing Equipment

Motion made by B. DeLong and seconded by A. Petersen to recommend the full board to authorize the purchase of video conferencing equipment through Yealink MVC at a cost of \$12,537.52 covered by the State of Michigan Public Health Emergency Preparedness grant in the amount of \$12,000.00 with the remaining \$537.52 covered under Emergency Preparedness funding. Motion carried.

D. Purchase of Cabling for Wireless Access Point

L. Braddock gave an overview of the quotes. B. DeLong abstained from the vote because of his acquaintance with one of the business owners. H. Brewer that the Board of Health authorize up to \$10,000 to cover any additional supplies that may be needed for the project.

Motion made by A. Petersen to contract with New Look Computer and Data (St Johns) for the cost of \$7,411.96 and seconded by G. Bailey also requesting that the full board to authorize MMDHD not to exceed \$10,000.00 to contract the installation of cabling for wireless access points.

There being no further business to come before the Finance Committee, the meeting adjourned at 8:40 a.m.

Respectfully Submitted,

Krishna Santana, Board Secretary for
George Bailey, Finance Committee Chair
Mid-Michigan District Board of Health

**MONTHLY EXPENSES FOR
March 11, 2023 - April 7, 2023**

<i>EV 2001</i>	<i>3/24/2023</i>	<i>\$</i>	<i>258,409.29</i>
<i>EV 2002</i>	<i>4/7/2023</i>	<i>\$</i>	<i>313,918.96</i>
TOTAL		\$	572,328.25



Mid-Michigan District
HEALTH DEPARTMENT
CLINTON • GRATIOT • MONTCALM

Expense Voucher # 2001

3/24/2023

Payables

108084 - 108118 Acumatica Checks & ACH \$ 85,234.58

Payroll

Ameriprise NBS	\$ 100.00
MERS 457	\$ 1,907.00
MERS Defined Benefit - Employee	\$ 4,519.02
Nationwide	\$ 2,180.00
EFT Payroll Tax	
Federal	\$ 35,901.26
State	\$ 5,710.37
Direct Deposit Payroll	\$ 115,954.79
Direct Deposit HSA	\$ 7,402.27

Fees

Reverse from EV 1999, 2/24/23 Huntington Cash on Hand \$ (500.00)

TOTAL

\$ 258,409.29

AP Payment Register

Account	Description
CASH AP	CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108084	Closed	3/24/2023	FOUR01	4IMPRINT, INC	0.00	4,776.90

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		10455485	WATER BOTTLES	4,776.90	USD	0.00	4,776.90
						Document Total:	4,776.90
						Payment Method Total:	4,776.90
						Cash Account Total:	4,776.90

Account	Description
CASH AP	CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108085	Closed	3/24/2023	ALGR01	ALGRIM HEATHER	0.00	1,060.10

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		2023CADCA	REFUND CADCA I	1,060.10	USD	0.00	1,060.10
						Document Total:	1,060.10
						Payment Method Total:	1,060.10
						Cash Account Total:	1,060.10

Account	Description
CASH AP	CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108086	Closed	3/24/2023	AMAZON01	AMAZON CAPITAL SERVICES	0.00	2,024.06

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		1WN4-GQ4G-1V6P	MEDICAL LOCKIN	1,844.10	USD	0.00	1,844.10
BILL		1W49-KDP3-6RQL	AIR PRUIFIER FIL	149.97	USD	0.00	149.97
BILL		113X-7Y7G-1JFW	LAMP	29.99	USD	0.00	29.99
						Document Total:	2,024.06
						Payment Method Total:	2,024.06
						Cash Account Total:	2,024.06

Account	Description
CASH AP	CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108087	Closed	3/24/2023	BAIL02	BAILEY'S	0.00	183.00

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		23.10231	CHLORINE VIALS,	65.00	USD	0.00	65.00
BILL		23.10260	EH SUPPLIES	118.00	USD	0.00	118.00
						Document Total:	183.00
						Payment Method Total:	183.00
						Cash Account Total:	183.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108088	Closed	3/24/2023	CAPI01	CAPITAL AREA UNITED WAY	0.00	32.00

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		03242023	MARCH 2023 EMF	32.00	USD	0.00	32.00
Document Total:							32.00
Payment Method Total:							32.00
Cash Account Total:							32.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108089	Closed	3/24/2023	CDWG01	CDW GOVERNMENT, INC.	0.00	9,590.62

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		GZ43692	CABLES	151.50	USD	0.00	151.50
BILL		HB69039	C2G 6 CAT6A SN/	303.00	USD	0.00	303.00
BILL		HB65021	DIRECT ATTACH I	82.24	USD	0.00	82.24
BILL		HD98119	SUPERMICRO CU	5,378.72	USD	0.00	5,378.72
BILL		HG01001	MS SLD WS CAL 2	3,425.16	USD	0.00	3,425.16
BILL		ZR00323953	FEBRUARY WEBE	250.00	USD	0.00	250.00
Document Total:							9,590.62
Payment Method Total:							9,590.62
Cash Account Total:							9,590.62

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108090	Closed	3/24/2023	CENT02	CENTRAL MICHIGAN DIST HEALTH DEPARTMENT	0.00	5,400.49

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		FEB2023	FEBRUARY 2023 I	5,400.49	USD	0.00	5,400.49
Document Total:							5,400.49
Payment Method Total:							5,400.49
Cash Account Total:							5,400.49

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108091	Closed	3/24/2023	CLIN01	CLINTON COUNTY ADMINISTRATION/ACCOUNTING	0.00	1,966.67

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		AC-2023-019	APRIL 2023 DENT	1,966.67	USD	0.00	1,966.67
Document Total:							1,966.67
Payment Method Total:							1,966.67
Cash Account Total:							1,966.67

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108092	Closed	3/24/2023	COMM01	COMMUNITY MENTAL HEALTH ASSOCIATION	0.00	500.00

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		FY2023	MEMBERSHIP	500.00	USD	0.00	500.00
						Document Total:	500.00
						Payment Method Total:	500.00
						Cash Account Total:	500.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108093	Closed	3/24/2023	COVE01	COVENANT MEDICAL CENTER	0.00	64.26

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		22389903	LABS	42.84	USD	0.00	42.84
BILL		22389846	LAB	21.42	USD	0.00	21.42
						Document Total:	64.26
						Payment Method Total:	64.26
						Cash Account Total:	64.26

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108094	Closed	3/24/2023	CRAN01	CRANE TIM	0.00	805.45

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		03012023	FEB 2023 ICS400	805.45	USD	0.00	805.45
						Document Total:	805.45
						Payment Method Total:	805.45
						Cash Account Total:	805.45

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108095	Closed	3/24/2023	DRAY01	DRAYTON AUTOMATIC DOOR, LLC	0.00	230.00

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		3104	DOOR REPAIR GF	230.00	USD	0.00	230.00
						Document Total:	230.00
						Payment Method Total:	230.00
						Cash Account Total:	230.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108096	Closed	3/24/2023	EURO01	EUROTROL.COM	0.00	518.00

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		22017841	HEMATROL HI AN	518.00	USD	0.00	518.00
						Document Total:	518.00
						Payment Method Total:	518.00
						Cash Account Total:	518.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108097	Closed	3/24/2023	FOLE01	FOLETT LLC	0.00	19,052.73

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		1039509	REFRIGERATOR :	6,480.91	USD	0.00	6,480.91
BILL		1039332	REFRIGERATOR :	6,230.91	USD	0.00	6,230.91
BILL		1039436	REFRIGERATOR :	6,340.91	USD	0.00	6,340.91
						Document Total:	19,052.73
						Payment Method Total:	19,052.73
						Cash Account Total:	19,052.73

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108098	Closed	3/24/2023	GRAT04	GRATIOT COUNTY HERALD	0.00	126.00

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		105	2023 BOH MEETIN	126.00	USD	0.00	126.00
						Document Total:	126.00
						Payment Method Total:	126.00
						Cash Account Total:	126.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108099	Closed	3/24/2023	HEDG01	HEDGEROW SOFTWARE LTD.	0.00	6,000.00

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		1219	3Q2023 LICENSE	6,000.00	USD	0.00	6,000.00
						Document Total:	6,000.00
						Payment Method Total:	6,000.00
						Cash Account Total:	6,000.00

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108100	Closed	3/24/2023	INSP01	INSPIRATION STUDIO DESIGNS	0.00	634.35
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		3261	BUSINESS CARD	29.00	USD	0.00	29.00
BILL		3273	PARENT/PROVIDE	605.35	USD	0.00	605.35
Document Total:							634.35
Payment Method Total:							634.35
Cash Account Total:							634.35

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108101	Closed	3/24/2023	MICH08	MICHIGAN GRAPHICS & SIGNS	0.00	350.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		19552	AGENCY SIGNS	350.00	USD	0.00	350.00
Document Total:							350.00
Payment Method Total:							350.00
Cash Account Total:							350.00

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108102	Closed	3/24/2023	MICH11	MICHIGAN NURSES ASSOCIATION	0.00	575.01
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		MARCH2023	DUES FOR MARC	575.01	USD	0.00	575.01
Document Total:							575.01
Payment Method Total:							575.01
Cash Account Total:							575.01

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108103	Closed	3/24/2023	MISD01	MISDU - FRIEND OF COURT	0.00	283.91
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		03242023	3/24/23 PAYROLL	283.91	USD	0.00	283.91
Document Total:							283.91
Payment Method Total:							283.91
Cash Account Total:							283.91

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108104	Closed	3/24/2023	MUTU01	MUTUAL OF OMAHA	0.00	5,399.09
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		001508965242	APRIL 2023 LIFE	5,399.09	USD	0.00	5,399.09
Document Total:							5,399.09
Payment Method Total:							5,399.09
Cash Account Total:							5,399.09

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108105	Closed	3/24/2023	POWE02	POWERDMS	0.00	11,000.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		INV-33136	POLICY PLATFOR	11,000.00	USD	0.00	11,000.00
						Document Total:	11,000.00
						Payment Method Total:	11,000.00
						Cash Account Total:	11,000.00

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108106	Closed	3/24/2023	RAND02	RANDALL DEAN CONSULTING & TRAINING LLC	0.00	1,500.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		202302727A	3/8/2023 EMAIL TF	1,500.00	USD	0.00	1,500.00
						Document Total:	1,500.00
						Payment Method Total:	1,500.00
						Cash Account Total:	1,500.00

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108107	Closed	3/24/2023	RICO01	RICOH USA INC	0.00	590.54
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		5066870536	FEBRUARY 2023 (590.54	USD	0.00	590.54
						Document Total:	590.54
						Payment Method Total:	590.54
						Cash Account Total:	590.54

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108108	Closed	3/24/2023	RYAN01	RYAN ANDREA	0.00	842.06
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		FEB2023	CADCA TRAINING	842.06	USD	0.00	842.06
						Document Total:	842.06
						Payment Method Total:	842.06
						Cash Account Total:	842.06

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108109	Closed	3/24/2023	STAT01	STATCOURIER	0.00	2,201.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		1019-3070	FEBRUARY COUF	2,201.00	USD	0.00	2,201.00
						Document Total:	2,201.00
						Payment Method Total:	2,201.00
						Cash Account Total:	2,201.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108110	Closed	3/24/2023	STAT04	STATE OF MICHIGAN-LAB	0.00	92.60

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		20230301-22	LABS	23.00	USD	0.00	23.00
BILL		20230301-10	LABS	69.60	USD	0.00	69.60
Document Total:							92.60
Payment Method Total:							92.60
Cash Account Total:							92.60

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108111	Closed	3/24/2023	TEAM02	TEAMSTERS LOCAL 214	0.00	1,953.99

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		MARCH2023	DUES FOR MARC	1,953.99	USD	0.00	1,953.99
Document Total:							1,953.99
Payment Method Total:							1,953.99
Cash Account Total:							1,953.99

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108112	Closed	3/24/2023	UNIT02	UNITED WAY OF GRATIOT COUNTY	0.00	156.00

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		MARCH2023	MARCH 2023 EMF	156.00	USD	0.00	156.00
Document Total:							156.00
Payment Method Total:							156.00
Cash Account Total:							156.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108113	Closed	3/24/2023	UNIT03	UNITED WAY OF MONTCALM COUNTY	0.00	96.00

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		MARCH2023	MARCH 2023 EMF	96.00	USD	0.00	96.00
Document Total:							96.00
Payment Method Total:							96.00
Cash Account Total:							96.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108114	Closed	3/24/2023	UPPE01	UPPER PENINSULA HEALTH CARE SOLUTIONS	0.00	150.00

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		264003	BASIC SERVICE F	150.00	USD	0.00	150.00
Document Total:							150.00
Payment Method Total:							150.00
Cash Account Total:							150.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108115	Closed	3/24/2023	USAT01	USA TODAY NETWORK	0.00	450.00

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		0005402526	BOH MEETINGS 2	450.00	USD	0.00	450.00
						Document Total:	450.00
						Payment Method Total:	450.00
						Cash Account Total:	450.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108116	Closed	3/24/2023	VERT01	VERTILOCITY	0.00	1,034.50

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		31006389	FEB 2023 UKG RE	949.50	USD	0.00	949.50
BILL		31005954	FEB 2023 CONSU	85.00	USD	0.00	85.00
						Document Total:	1,034.50
						Payment Method Total:	1,034.50
						Cash Account Total:	1,034.50

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108117	Closed	3/24/2023	WOOD01	WOOD SARAH	0.00	95.25

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		03042023	2/27-3/3 CONTRA	95.25	USD	0.00	95.25
						Document Total:	95.25
						Payment Method Total:	95.25
						Cash Account Total:	95.25

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	108118	Closed	3/24/2023	YEOY01	YEO & YEO PC CPA	0.00	5,500.00

Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		570439	FY2022 AUDIT	5,500.00	USD	0.00	5,500.00
						Document Total:	5,500.00
						Payment Method Total:	5,500.00
						Cash Account Total:	5,500.00

Doc. Type	Count	Amount Paid (USD)
Check	35	85,234.58
Prepayment	0	0.00
Refund	0	0.00
Void Check	0	0.00
Company Total:	35	85,234.58



Mid-Michigan District HEALTH DEPARTMENT

CLINTON • GRATIOT • MONTCALM

Expense Voucher # 2002

4/7/2023

Payables

108119 - 108158 Acumatica Checks & ACH \$ 94,620.13

Payroll

Ameriprise NBS \$ 100.00

MERS 457 \$ 1,907.00

MERS Defined Benefit - Employee \$ 4,475.24

Nationwide \$ 2,180.00

EFT Payroll Tax

Federal \$ 35,125.95

State \$ 5,587.55

MERS Defined Benefit - Employee Mar-23 \$ 45,761.39

Direct Deposit Payroll \$ 116,489.48

Direct Deposit HSA \$ 7,402.27

Fees

Huntington e-Banking fee Mar-23 \$ 290.40

Huntington Bank Interest Mar-23 \$ (20.45)

TOTAL

\$ 313,918.96

AP Payment Register

Account	Currency	Description							
CASH AP	USD	CASH ACCOUNT FOR AP							
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001629	108119	Closed	4/7/2023	AEDP01	AED PROFESSIONALS	0.00	135.00	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid	
BILL	002686		96508	ELECTRODE REP	135.00	USD	0.00	135.00	
							Document Total:	135.00	
							Payment Method Total:	135.00	
							Cash Account Total:	135.00	
CASH AP	USD	CASH ACCOUNT FOR AP							
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001630	108120	Closed	4/7/2023	ALPH01	ALPHA FAMILY CENTER	0.00	200.00	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid	
BILL	002685		APR2023	2 CLINICS APRIL ;	200.00	USD	0.00	200.00	
							Document Total:	200.00	
							Payment Method Total:	200.00	
							Cash Account Total:	200.00	
CASH AP	USD	CASH ACCOUNT FOR AP							
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001658	108121	Closed	4/7/2023	AMAZON01	AMAZON CAPITAL SERVICES	0.00	6,420.82	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid	
BILL	002662		1G1G-TTYF-4DVG	ORGANIZER,UPC	104.06	USD	0.00	104.06	
BILL	002663		1MRD-C93D-6CV41	108 FIRST AID KIT	2,328.48	USD	0.00	2,328.48	
BILL	002664		1P4T-GLDN-1K4V	12 FAMILY FIRST	275.40	USD	0.00	275.40	
BILL	002665		1414-YJXX-7163	FIRST AID KITS	619.65	USD	0.00	619.65	
BILL	002666		1M3D-QWQ1-17J7	FIRST AID KITS	45.90	USD	0.00	45.90	
BILL	002688		1GDV-FG9X-3QY4	WALL FILES	24.67	USD	0.00	24.67	
BILL	002689		1TGL-PJWJ-7WXR	RAINBOW LOVE L	564.89	USD	0.00	564.89	
BILL	002692		1MRD-C93D-6C4V-1	30 SWISS SAFE 2	646.80	USD	0.00	646.80	
BILL	002693		1P4T-GLND-1K4V-1	17 WNL FAMILY F	390.15	USD	0.00	390.15	
BILL	002694		1KV6-G44Q-XQGN	CSHCS GRANT IT	1,285.92	USD	0.00	1,285.92	
BILL	002695		1T9Y-P1X6-VKWJ	TAB FILE FOLDEF	24.92	USD	0.00	24.92	
BILL	002708		1JXJ-7MX6-9DYN	REFLECTIVE WIN	109.98	USD	0.00	109.98	
							Document Total:	6,420.82	
							Payment Method Total:	6,420.82	
							Cash Account Total:	6,420.82	

CASH AP		USD		CASH ACCOUNT FOR AP					
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001663	108122	Closed	4/7/2023	BRENTPOINT	BRENTPOINT LLC	0.00	936.00	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid	
BILL	002714		KMK-1562	MAGIC HANDS W,	936.00	USD	0.00	936.00	
							Document Total:	936.00	
							Payment Method Total:	936.00	
							Cash Account Total:	936.00	

CASH AP		USD		CASH ACCOUNT FOR AP					
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001631	108123	Closed	4/7/2023	BROM01	BROMBERG & ASSOCIATES	0.00	33.95	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid	
BILL	002675		21417	FEBRUARY TRAN	33.95	USD	0.00	33.95	
							Document Total:	33.95	
							Payment Method Total:	33.95	
							Cash Account Total:	33.95	

CASH AP		USD		CASH ACCOUNT FOR AP					
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001633	108124	Closed	4/7/2023	CDWG01	CDW GOVERNMENT, INC.	0.00	3,634.05	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid	
BILL	002659		HG19539	COMPUTER EQUI	426.36	USD	0.00	426.36	
BILL	002660		HG83213	LENOVO THINKP/	2,052.50	USD	0.00	2,052.50	
BILL	002661		HG83213	LENOVO THINKP/	1,070.81	USD	0.00	1,070.81	
BILL	002723		HN56780	MS SURFACE PEI	84.38	USD	0.00	84.38	
							Document Total:	3,634.05	
							Payment Method Total:	3,634.05	
							Cash Account Total:	3,634.05	

CASH AP		USD		CASH ACCOUNT FOR AP					
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001634	108125	Closed	4/7/2023	COHL01	COHL, STOKER & TOSKEY, P.C.	0.00	409.50	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid	
BILL	002696		54417	1/25-2/9 LEGAL	409.50	USD	0.00	409.50	
							Document Total:	409.50	
							Payment Method Total:	409.50	
							Cash Account Total:	409.50	

CASH AP USD CASH ACCOUNT FOR AP								
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001666	108126	Closed	4/7/2023	DAY001	DAY RYAN	0.00	120.00
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount Currency		Discount Taken	Amount Paid
BILL	002709		016992	REFUND SITE EV,	120.00 USD		0.00	120.00
							Document Total:	120.00
							Payment Method Total:	120.00
							Cash Account Total:	120.00

CASH AP USD CASH ACCOUNT FOR AP								
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001665	108127	Closed	4/7/2023	DICK01	DICKMAN DAVID	0.00	40.00
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount Currency		Discount Taken	Amount Paid
BILL	002707		09272022	REFUND CLIENT	40.00 USD		0.00	40.00
							Document Total:	40.00
							Payment Method Total:	40.00
							Cash Account Total:	40.00

CASH AP USD CASH ACCOUNT FOR AP								
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001635	108128	Closed	4/7/2023	EATO01	EATON RESA	0.00	150.00
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount Currency		Discount Taken	Amount Paid
BILL	002676		MAY2023	CHRISTA JEROME	150.00 USD		0.00	150.00
							Document Total:	150.00
							Payment Method Total:	150.00
							Cash Account Total:	150.00

CASH AP USD CASH ACCOUNT FOR AP								
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001636	108129	Closed	4/7/2023	ENVI01	ENVIRO-MASTER	0.00	84.00
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount Currency		Discount Taken	Amount Paid
BILL	002677		GRR113836	MONTCALM CLEA	84.00 USD		0.00	84.00
							Document Total:	84.00
							Payment Method Total:	84.00
							Cash Account Total:	84.00

CASH AP		USD		CASH ACCOUNT FOR AP				
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001637	108130	Closed	4/7/2023	FIRS01	FIRST NATIONAL BANK OMAHA	0.00	3,686.75
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002674		VISA 3/7	AUTOCLAVE SPO	224.80	USD	0.00	224.80
BILL	002703		2593 MAR2023	EGIFT CARDS AM	75.00	USD	0.00	75.00
BILL	002711		8712 MAR2023	HOTEL, UPS	184.50	USD	0.00	184.50
BILL	002712		0609 MAR2023	JOTFORM	390.00	USD	0.00	390.00
BILL	002713		2593 MAR2023-1	INDEED, STAMPS	2,812.45	USD	0.00	2,812.45
Document Total:								3,686.75
Payment Method Total:								3,686.75
Cash Account Total:								3,686.75

CASH AP		USD		CASH ACCOUNT FOR AP				
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001638	108131	Closed	4/7/2023	FORE01	FORESTRY SUPPLIERS INC	0.00	75.61
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002658		365005-00	MEASURING TAPI	75.61	USD	0.00	75.61
Document Total:								75.61
Payment Method Total:								75.61
Cash Account Total:								75.61

CASH AP		USD		CASH ACCOUNT FOR AP				
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001639	108132	Closed	4/7/2023	GLAXO1	GLAXO SMITH KLINE	0.00	2,191.17
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002691		8253972487	SHINGRIX VACCII	1,795.58	USD	0.00	1,795.58
BILL	002725		8253951670	BOOSTRIX	395.59	USD	0.00	395.59
Document Total:								2,191.17
Payment Method Total:								2,191.17
Cash Account Total:								2,191.17

CASH AP		USD		CASH ACCOUNT FOR AP				
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001640	108133	Closed	4/7/2023	GRAT07	GRATIOT ISABELLA RESD	0.00	1,057.50
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002678		11285	ICS400 TRAINING	1,057.50	USD	0.00	1,057.50
Document Total:								1,057.50
Payment Method Total:								1,057.50
Cash Account Total:								1,057.50

CASH AP		USD		CASH ACCOUNT FOR AP					
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001661	108134	Closed	4/7/2023	HARV01	HARVARD HEALTH PUBLISHING	0.00	39.90	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description		Original Amount Currency	Discount Taken	Amount Paid	
BILL	002679		87102400397-2023		2023 HARVARD H	39.90 USD	0.00	39.90	
							Document Total:	39.90	
							Payment Method Total:	39.90	
							Cash Account Total:	39.90	

CASH AP		USD		CASH ACCOUNT FOR AP					
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001667	108135	Closed	4/7/2023	KURT01	KURT'S APPLIANCE CENTER, INC	0.00	794.00	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description		Original Amount Currency	Discount Taken	Amount Paid	
BILL	002710		112061		CLINTON BREAKF	794.00 USD	0.00	794.00	
							Document Total:	794.00	
							Payment Method Total:	794.00	
							Cash Account Total:	794.00	

CASH AP		USD		CASH ACCOUNT FOR AP					
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001641	108136	Closed	4/7/2023	MAGE01	MAGELLAN DIAGNOSTICS	0.00	2,250.61	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description		Original Amount Currency	Discount Taken	Amount Paid	
BILL	002672		62069		LEADCARE KITS	2,250.61 USD	0.00	2,250.61	
							Document Total:	2,250.61	
							Payment Method Total:	2,250.61	
							Cash Account Total:	2,250.61	

CASH AP		USD		CASH ACCOUNT FOR AP					
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001642	108137	Closed	4/7/2023	MCKE01	MCKESSON MEDICAL	0.00	1,266.01	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description		Original Amount Currency	Discount Taken	Amount Paid	
BILL	002670		20429080		TUBES, BUTTERF	973.62 USD	0.00	973.62	
BILL	002718		20450536		DISTILLED WATEI	60.83 USD	0.00	60.83	
BILL	002719		20450538		DISTILLED WATEI	60.83 USD	0.00	60.83	
BILL	002720		20450537		DISTILLED WATEI	60.83 USD	0.00	60.83	
BILL	002721		20450295		PYRIXODINE B6, "	94.50 USD	0.00	94.50	
BILL	002722		20465904		PYRIXODINE B6	15.40 USD	0.00	15.40	
							Document Total:	1,266.01	
							Payment Method Total:	1,266.01	
							Cash Account Total:	1,266.01	

CASH AP USD CASH ACCOUNT FOR AP								
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001643	108138	Closed	4/7/2023	MERC01	MERCK SHARP & DOHME LLC	0.00	675.79
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002671		7016795534	VAQTA VACCINE	675.79	USD	0.00	675.79
							Document Total:	675.79
							Payment Method Total:	675.79
							Cash Account Total:	675.79

CASH AP USD CASH ACCOUNT FOR AP								
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001644	108139	Closed	4/7/2023	MICH08	MICHIGAN GRAPHICS & SIGNS	0.00	70.00
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002705		19580	POLY CARD DIRE	70.00	USD	0.00	70.00
							Document Total:	70.00
							Payment Method Total:	70.00
							Cash Account Total:	70.00

CASH AP USD CASH ACCOUNT FOR AP								
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001645	108140	Closed	4/7/2023	MISD01	MISDU - FRIEND OF COURT	0.00	283.91
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002716		04072023	4/7/23 PAYROLL E	283.91	USD	0.00	283.91
							Document Total:	283.91
							Payment Method Total:	283.91
							Cash Account Total:	283.91

CASH AP USD CASH ACCOUNT FOR AP								
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001657	108141	Closed	4/7/2023	MONT03	MONTCALM AREA INTERMEDIATE SCHOOL DISTRICT	0.00	52,544.73
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002697		808	AUG-DEC 2022 HF	52,544.73	USD	0.00	52,544.73
							Document Total:	52,544.73
							Payment Method Total:	52,544.73
							Cash Account Total:	52,544.73

CASH AP USD CASH ACCOUNT FOR AP								
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001660	108142	Closed	4/7/2023	MONT09	MONTCALM COMMUNITY COLLEGE	0.00	155.00
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002680		APR2023	ROOM RENT	155.00	USD	0.00	155.00
							Document Total:	155.00
							Payment Method Total:	155.00
							Cash Account Total:	155.00

CASH AP USD CASH ACCOUNT FOR AP

Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001646	108143	Closed	4/7/2023	NATI05	NATIONAL REGISTRY OF FOOD SAFETY PROFESSIONALS	0.00	550.00

Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002681		INV130450		9582302-01 22 FO	550.00 USD	0.00	550.00
							Document Total:	550.00
							Payment Method Total:	550.00
							Cash Account Total:	550.00

CASH AP USD CASH ACCOUNT FOR AP

Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001647	108144	Closed	4/7/2023	PETT01	PETTY CASH FUND - ADMINISTRATION	0.00	92.20

Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002698		03292023		CLEANING SUPPL	92.20 USD	0.00	92.20
							Document Total:	92.20
							Payment Method Total:	92.20
							Cash Account Total:	92.20

CASH AP USD CASH ACCOUNT FOR AP

Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001668	108145	Closed	4/7/2023	PLA01	PLAYSCAPES	0.00	3,119.04

Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002715		IN096858		CSHCS GRANT M.	3,119.04 USD	0.00	3,119.04
							Document Total:	3,119.04
							Payment Method Total:	3,119.04
							Cash Account Total:	3,119.04

CASH AP USD CASH ACCOUNT FOR AP

Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001632	108146	Closed	4/7/2023	CASA01	POINT BROADBAND	0.00	875.00

Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002699		802593		INTERNET, FIBER	875.00 USD	0.00	875.00
							Document Total:	875.00
							Payment Method Total:	875.00
							Cash Account Total:	875.00

CASH AP USD CASH ACCOUNT FOR AP

Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001648	108147	Closed	4/7/2023	POLY01	POLYMEDCO INC	0.00	185.93

Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002687		01302094		PREGNANCY TES	185.93 USD	0.00	185.93
							Document Total:	185.93
							Payment Method Total:	185.93
							Cash Account Total:	185.93

CASH AP		USD		CASH ACCOUNT FOR AP					
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001650	108148	Closed	4/7/2023	RSNO01	R&S NORTHEAST LLC	0.00	569.29	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid	
BILL	002673		389439	VCF VAGINAL FIL	569.29	USD	0.00	569.29	
							Document Total:	569.29	
							Payment Method Total:	569.29	
							Cash Account Total:	569.29	

CASH AP		USD		CASH ACCOUNT FOR AP					
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001649	108149	Closed	4/7/2023	RICO01	RICOH USA INC	0.00	908.15	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid	
BILL	002700		5067066124	MARCH 2023 COF	908.15	USD	0.00	908.15	
							Document Total:	908.15	
							Payment Method Total:	908.15	
							Cash Account Total:	908.15	

CASH AP		USD		CASH ACCOUNT FOR AP					
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001664	108150	Closed	4/7/2023	STCY01	ST CYRIL'S CATHOLIC CHURCH	0.00	40.00	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid	
BILL	002701		032823	MEMORIAL-JAME:	40.00	USD	0.00	40.00	
							Document Total:	40.00	
							Payment Method Total:	40.00	
							Cash Account Total:	40.00	

CASH AP		USD		CASH ACCOUNT FOR AP					
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001651	108151	Closed	4/7/2023	STAP01	STAPLES	0.00	210.25	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid	
BILL	002667		3532556073	SHEET PROTECT	89.39	USD	0.00	89.39	
BILL	002690		3532947791	POSTER STRIPS,I	40.97	USD	0.00	40.97	
BILL	002717		3533437314	HP 910 INK COMB	79.89	USD	0.00	79.89	
							Document Total:	210.25	
							Payment Method Total:	210.25	
							Cash Account Total:	210.25	

CASH AP		USD	CASH ACCOUNT FOR AP						
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001652	108152	Closed	4/7/2023	STAT04	STATE OF MICHIGAN-LAB	0.00	11.50	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description		Original Amount Currency	Discount Taken	Amount Paid	
BILL	002682		20230301-28	LAB		11.50 USD	0.00	11.50	
							Document Total:	11.50	
							Payment Method Total:	11.50	
							Cash Account Total:	11.50	

CASH AP		USD	CASH ACCOUNT FOR AP						
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001653	108153	Closed	4/7/2023	THER02	THERMOWORKS, INC.	0.00	111.19	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description		Original Amount Currency	Discount Taken	Amount Paid	
BILL	002724		INV-12238092	THERMOPEN		111.19 USD	0.00	111.19	
							Document Total:	111.19	
							Payment Method Total:	111.19	
							Cash Account Total:	111.19	

CASH AP		USD	CASH ACCOUNT FOR AP						
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001662	108154	Closed	4/7/2023	TOTA03	TOTAL ENERGY SYSTEMS LLC	0.00	403.00	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description		Original Amount Currency	Discount Taken	Amount Paid	
BILL	002683		INV96394	SO31593 GENERA		403.00 USD	0.00	403.00	
							Document Total:	403.00	
							Payment Method Total:	403.00	
							Cash Account Total:	403.00	

CASH AP		USD	CASH ACCOUNT FOR AP						
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001654	108155	Closed	4/7/2023	VERI01	VERIZON	0.00	6,496.58	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description		Original Amount Currency	Discount Taken	Amount Paid	
BILL	002704		9930921671	3/24-4/23 CELL PH		6,496.58 USD	0.00	6,496.58	
							Document Total:	6,496.58	
							Payment Method Total:	6,496.58	
							Cash Account Total:	6,496.58	

CASH AP		USD	CASH ACCOUNT FOR AP						
Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount	
CHECK	001659	108156	Closed	4/7/2023	VERT01	VERTILOCITY	0.00	85.00	
Doc. Type	Ref. Number	Branch	Vendor Ref.	Description		Original Amount Currency	Discount Taken	Amount Paid	
BILL	002702		31006609	3/23 #285575 TRA		85.00 USD	0.00	85.00	
							Document Total:	85.00	
							Payment Method Total:	85.00	
							Cash Account Total:	85.00	

CASH AP USD CASH ACCOUNT FOR AP

Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001655	108157	Closed	4/7/2023	WINN01	WINN TELECOM	0.00	3,633.70

Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002706		APR2023	INTERNET, LOCAL	3,633.70	USD	0.00	3,633.70
Document Total:								3,633.70
Payment Method Total:								3,633.70
Cash Account Total:								3,633.70

CASH AP USD CASH ACCOUNT FOR AP

Doc. Type	Ref. Number	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	001656	108158	Closed	4/7/2023	WOOD01	WOOD SARAH	0.00	75.00

Doc. Type	Ref. Number	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL	002684		03182023	3/15-3/18 CONTRA	75.00	USD	0.00	75.00
Document Total:								75.00
Payment Method Total:								75.00
Cash Account Total:								75.00

Doc. Type	Count	Amount Paid (USD)
Check	40	94,620.13
Prepayment	0	0.00
Refund	0	0.00
Void Check	0	0.00
Company Total:	40	94,620.13

Balance Sheet

As of March 31, 2023

Assets

Cash & Cash Equivalents	2,716,022.76
Account Receivable	208,721.61
Other Receivables	314,050.19
Prepaid Expenses	9,247.50
VFC Inventory	38,199.36
Total Assets	3,286,241.42

Liabilities

Employee Deductions	46,267.23
Accounts Payable	76,649.16
Due to Others	287,396.29
VFC Inventory	38,199.37
Trust Funds	17,987.17
Deferred Revenues	0.00
Other Long-term Liabs	198,633.00
38901-FUND BALANCE RESTRICTED DENTAL	95,208.84
39001-FUND BALANCE	163,207.96
39004-FUND BALANCE - TECHNICAL/EQUIP	489,494.46
39005-FUND BALANCE-FACILITY DEV.	137,523.00
39007-FUND BALANCE-SELF INS BONDS	13,949.72
39008-FUND BALANCE-FUTURE RETIREMENT	192,269.58
39009-FUND BALANCE-COMPENSATED LEAVE	549,707.51
39010-FUND BALANCE-UNEMPLOYMENT	55,000.00
39012-FUND BALANCE - TRAINING	35,000.00
39013-FUND BALANCE - BRFS	11,522.00
39014-FUND BALANCE-HEALTH INSURANCE	160,000.00
39015-FUND BALANCE-POTENTIAL CLAIMS	168,289.00
39017-FUND BALANCE CHW	200,000.00
39018-FUND BALANCE OPEB	77,778.00
Net Income / (Loss)	272,159.13
Total Liabilities	3,286,241.42
Difference	0.00

Mid-Michigan District Health Department
 REVENUE-EXPENSE
 As of March 31, 2023

MELISSA SELBY
 1 of 2

<i>ALL PROGRAMS</i>	BUDGET	CURRENT MONTH	YEAR TO DATE	BUDGET BALANCE	% YTD
REVENUE					
ELPHS	1,147,315.00	79,762.00	668,737.20	478,577.80	58%
MDHHS GRANTS	3,503,257.00	412,857.00	1,837,192.15	1,666,064.85	52%
MDHHS FEE FOR SERVICE	70,000.00	7,417.90	16,861.06	53,138.94	24%
EGLE GRANTS	85,015.00	4,787.75	28,670.50	56,344.50	34%
OTHER GRANTS	858,000.00	8,559.18	357,236.23	500,763.77	42%
VFC SUPPLIES	300,000.00	12,564.30	65,038.22	234,961.78	22%
MEDICAID FULL COST	282,000.00	0.00	88,554.00	193,446.00	31%
MEDICAID OUTREACH	53,355.00	2,582.17	2,582.17	50,772.83	5%
MISC INCOME	22,000.00	9,286.88	48,217.01	-26,217.01	219%
CHED ADMINISTRATION	1,000.00	0.00	0.00	1,000.00	0%
ORAL HEALTH	0.00	0.00	1,465.00	-1,465.00	
ORAL HEALTH K-ASSESSMENT	0.00	1,140.00	1,980.00	-1,980.00	
CLINICAL VARNISH	10,000.00	294.20	1,704.20	8,295.80	17%
HEARING	21,000.00	1,996.40	7,840.60	13,159.40	37%
VISION	21,000.00	1,434.00	6,706.00	14,294.00	32%
FAMILY PLANNING	108,000.00	5,209.32	29,148.46	78,851.54	27%
BCCCP	1,000.00	-112.15	549.20	450.80	55%
WOMENS HEALTH PROGRAM	0.00	-237.00	0.00	0.00	
BLOOD LEAD	8,100.00	284.98	1,369.52	6,730.48	17%
HIV	1,000.00	0.00	0.00	1,000.00	0%
STD/STI	4,000.00	629.93	2,181.28	1,818.72	55%
IMMUNIZATIONS	130,000.00	7,257.04	96,889.50	33,110.50	75%
COMMUNICABLE DISEASE	2,000.00	170.00	570.00	1,430.00	29%
BODY ART	1,500.00	0.00	0.00	1,500.00	0%
FOOD PROGRAM	315,000.00	234,430.00	255,169.00	59,831.00	81%
WATER PROGRAM	185,000.00	12,608.00	59,644.00	125,356.00	32%
SEWAGE PROGRAM	195,000.00	16,585.00	72,308.00	122,692.00	37%
EH MISC	45,000.00	1,705.00	30,344.08	14,655.92	67%
EH ADMIN	1,000.00	23.32	293.29	706.71	29%
ADMINISTRATION	200.00	0.00	-50.00	250.00	-25%
SPACE	296,599.99	24,194.04	145,164.00	151,435.99	49%
APPROPRIATIONS	1,133,504.01	94,622.92	569,947.77	563,556.24	50%
TOTAL REVENUE	8,800,846.00	940,052.18	4,396,312.44	4,404,533.56	50%

Mid-Michigan District Health Department
 REVENUE-EXPENSE
 As of March 31, 2023

MELISSA SELBY
 2 of 2

ALL PROGRAMS	BUDGET	CURRENT MONTH	YEAR TO DATE	BUDGET BALANCE	% YTD
EXPENSE					
SALARIES	4,336,979.00	365,024.99	2,048,280.87	2,288,698.13	47%
FICA	331,775.00	26,830.42	150,001.41	181,773.59	45%
HEALTH INSURANCE	913,058.00	76,050.36	450,605.79	462,452.21	49%
DENTAL INSURANCE	57,645.00	4,077.16	25,211.44	32,433.56	44%
RETIREMENT	723,303.00	45,761.39	289,185.79	434,117.21	40%
OTHER BENEFITS	43,786.00	1,343.31	16,191.00	27,595.00	37%
OFFICE SUPPLIES	92,700.00	33,502.66	75,386.08	17,313.92	81%
COMPUTER SUPPLIES	70,000.00	7,677.90	32,591.50	37,408.50	47%
MEDICAL SUPPLIES	48,800.00	6,799.38	26,880.68	21,919.32	55%
BIOLOGICS	60,500.00	2,881.21	41,883.62	18,616.38	69%
VFC	300,000.00	12,564.30	65,038.22	234,961.78	22%
OTHER SUPPLIES	0.00	0.00	695.00	-695.00	
CAPITAL EXPENSE	0.00	24,431.45	34,431.45	-34,431.45	
SOFTWARE PURCHASES	0.00	2,075.00	32,075.00	-32,075.00	
CONTRACTUAL	1,056,400.00	69,300.22	393,822.76	662,577.24	37%
LABS	4,200.00	168.36	2,168.90	2,031.10	52%
COMMUNICATIONS	59,400.00	11,554.15	59,251.48	148.52	100%
TRAVEL/TRAINING	171,900.00	15,939.68	77,107.72	94,792.28	45%
MEMBERSHIPS	25,600.00	1,782.20	17,145.24	8,454.76	67%
ADVERTISING	34,100.00	932.00	8,209.56	25,890.44	24%
LIABILITY INSURANCE	33,000.00	0.00	46,866.75	-13,866.75	142%
LEASE & MAINTENANCE	111,100.00	11,688.19	65,573.41	45,526.59	59%
RENT	31,000.00	2,166.67	13,667.99	17,332.01	44%
SPACE	285,600.00	24,194.04	145,164.00	140,436.00	51%
MISC EXPENSE	10,000.00	1,414.68	6,717.65	3,282.35	67%
TOTAL EXPENSE	8,800,846.00	748,159.72	4,124,153.31	4,676,692.69	47%
Net Income (Loss)	0.00	191,892.46	272,159.13	-272,159.13	

**Mid-Michigan District Health Department
Monthly Balance Sheet, Revenue and Expenditure Report
March 2023**

Summary and Special Notes

As of the end of March, actual revenues and expenditures should be approximately 42% of the \$8,800,846 total budget. The total revenues through March were \$4,396,312.44 and the total expenses were \$4,124,153.31. The overall actual revenues and expenditures were at 50% and 47% respectively, representing a surplus of \$272,159.13.

Some highlights year to date:

Revenues

- **ELPHS** – The Essential Local Public Health Services funding includes an annual payment for Local Stabilization Dollars causing the percentage to be slightly higher year to date.
- **Misc. Income** – Interest has been higher than budgeted.
- **Food Service Fees** – Most of the payments are received annually in March/April.
- **Immunization Fees** – The flu vaccinations given during the first part of the year inflate the percentage year to date.

Expenses

- **Retirement** – Includes an annual lump sum payment that has not been made yet.
- **Contractual** – There are some contracted services that occur annually which have not been paid yet.
- **Liability Insurance** – The budget will need to be adjusted as it was underbudgeted and there was an increase. This will be adjusted and covered by the higher-than-expected misc. income.
- **Communications** – Communications have gone up over the past couple of years due to the need for cell phones. This will need to be adjusted. Travel and training can be adjusted to compensate for the difference.



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MONTCALM OFFICE
 615 N. State St.
 Stanton, MI 48888-9702
 (989) 831-5237

BOARD OF HEALTH:	Bruce DeLong	George Bailey	Phil Kohn
	David Pohl	Timothy Gay	Adam Petersen

April 26, 2023

ADMINISTRATOR: Melissa Selby, Director of Administrative Services

SUBJECT: Dental Assessment D0191 Price Increase

Information Only Action Needed

I. Authority For This Action:

- Local Policy
- Law or Rule Public Health Code, Act 368 of 1978, MCL 333.2417

II. Summary:

(Previous board action relating to this item? Background information and if any future action anticipated.)

The Board of Health is required to establish the fees for the Mid-Michigan District Health Department. This normally happens during the budgeting process for the next fiscal year. There are occasions when a fee needs to be changed during the fiscal year and those requests are brought to the Board of Health for review. The dental assessment (D0191) has been the same fee for quite a few years. Recently the reimbursement rate from the insurance companies has increased. Therefore, as the cost of the program has also increased, it would be beneficial to increase the fee that is charged.

III. Strategic Objective, Health Issue, or other Need Addressed:

(What priority should be given in relation to goals? Include reason for recommending change in priorities and how the need will be introduced into planning process.)

IV. Fiscal Impact and Cost:

(Immediate, ongoing, and future impact.)

The additional funding, which is estimated to be between \$2,000 to \$4,000, will be used to offset the costs of the program.

V. Alternatives Considered:

(Scope of options reviewed. Reasons for rejecting alternatives.)

VI. Recommendation:

(Advantages/benefits of proposal. Expected results. Possible problems or disadvantages of proposal. Effect of action on agency. Consequences of not approving recommendation or taking action.)

VII. Monitoring and Reporting Timeline:
(Evaluation method and timeline. Next report to the Board.)

BOARD OF HEALTH:	Bruce DeLong	George Bailey	Phil Kohn
	David Pohl	Timothy Gay	Adam Petersen

April 26, 2023

ADMINISTRATOR: Melissa Selby, Director of Administrative Services

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Information Only

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VI. Recommendation:

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VII. Monitoring and Reporting Timeline:
(Evaluation method and timeline. Next report to the Board.)

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April 26, 2023

ADMINISTRATOR: Sarah Doak, CHED Director
SUBJECT: Re-Hire to start at Step 3, Teamsters

Information Only Action Needed

I. Authority for This Action:

- Local Policy
 Law or Rule ____

II. Summary:

The CHED Division had a part time Community Health Worker (CHW) position posted. A previous employee has expressed interest in returning to MMDHD to fill this role. She was previously employed at a full-time status in this same position. I am requesting she be re-hired at the Step 3 wage, as that is the rate of pay she was at previously.

III. Strategic Objective, Health Issue, or other Need Addressed:

With her return to this position, there will be very little training required. She is already a certified CHW. She also holds a SOAR certification which allows her to assist with Social Security Disability requests on behalf of her patients. She is the only staff person with this certification.

IV. Fiscal Impact and Cost:

The T4 step 2 wage is \$16.12/hr and step 3 is \$16.97/hr.

V. Alternatives Considered:

Hiring a new person with little to no experience will require additional training to become a certified CHW.

VI. Recommendation:

We recommend hiring back the CHW at T4 step 3.

VII. Monitoring and Reporting Time Line:

Employee evaluations will be performed to assure job duties are performed appropriately as per wage band hired.

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April 26, 2023

ADMINISTRATOR: Sarah Doak, CHED Director
SUBJECT: Fee establishment for rapid on-site testing

Information Only Action Needed

I. Authority for This Action:

- Local Policy
 Law or Rule ___

II. Summary:

Sexually transmitted infections (STIs) are on the rise across the State. A major barrier to STI control and prevention is the lack of reliable, low-cost point of care testing, which allows for diagnosis and treatment in a single visit. The current method of testing can take up to two weeks for the patient to receive the results and to begin treatment. MMDHD seeks to add the OSOM Trichomonas (trich) Rapid Test to our services at a cost of \$16/test, to be paid by the patient or their insurance. Patients with no insurance will be charged on a sliding fee scale based on their income. If a patient is unable to pay, the fee will be waived with supervisor approval.

III. Strategic Objective, Health Issue, or other Need Addressed:

Trich infections continue to be highly underdiagnosed, which can lead to serious health complications. Providing a rapid result test at our clinic with same day diagnosis and treatment will benefit patients, as well as protecting the community by stopping the spread of disease.

IV. Fiscal Impact and Cost:

The cost per test is about \$10. Most insurance plans will reimburse from \$11.50 to \$16.00. The addition of this test will be cost neutral.

V. Alternatives Considered:

Samples can be sent into the State Lab at a cost of \$11.50, and results are received in one to two weeks.

VI. Recommendation:

We recommend the use of OSOM Trichomonas Rapid Test with a fee of \$16. The addition of a rapid test will provide a tool to further reduce the spread of disease in our community.

VII. Monitoring and Reporting Timeline:

Fee schedule review and recommendations to the Board are completed yearly.