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**BOARD OF HEALTH Meeting**  
**Agenda for March 26, 2026 at 9:00 AM**

1. Call to Order
  - a. Opening ceremonies – Pledge Allegiance to the Flag of the United States of America
  - b. Roll Call
  - c. Approval of the Agenda\*
  - d. Approval of the Minutes from February 26, 2026\*
2. Public Comment
3. Audit Presentation – Dane Porter, CPA, CGFM, Senior Manager, Maner Costerisan – pg 6
4. Health Officer’s Report – pg 64
5. Medical Director’s Report – pg 66
6. Departmental Reports
  - a. Health Education & Promotion – pg 70
  - b. Environmental Health – pg 73
  - c. Area Agency on Aging – pg 82
  - d. Personal Health & Disease Prevention – pg 83
7. Financial Reports
  - a. Approve Payments\* - pg 89
  - b. Review Financials\* - pg 92
8. Committee Reports – pg 96
  - a. Finance Committee – Minutes from 3/16/2026
  - b. Program, Policies, and Appeals – Minutes from 3/18/2026
9. Unfinished Business
  - a. none
10. New Business
  - a. Three Rivers Building Post Tornado Update
  - b. Website Redevelopment – pg 98
  - c. Annual Report – pg 130
  - d. Employee Recognition – pg 141
11. Public Comment
12. Commissioner Comments

**Public Comment:**

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

13. Adjournment - Next meeting: April 23, 2026

Upcoming Meeting Dates:

- April 15, 2026 @ 8:30 AM - PPA Committee (Leininger, Stoll, & Shaffer)
- April 20, 2026 @ 9:00 AM – Finance Committee (Hoffmaster, Houtz, & Collins)
- April 23, 2026 @ 9:00 AM – Full Board Meeting
- May 18, 2026 @ 9:00 AM – Finance Committee (Hoffmaster, Houtz, & Collins)
- May 20, 2026 @ 8:30 AM - PPA Committee (Leininger, Stoll, & Shaffer)
- May 28, 2026 @ 9:00 AM – Full Board Meeting
- June 15, 2026 @ 9:00 AM – Finance Committee (Hoffmaster, Houtz, & Collins)
- June 17, 2026 @ 8:30 AM - PPA Committee (Leininger, Stoll, & Shaffer)
- June 25, 2026 @ 9:00 AM – Full Board Meeting
- July 15, 2026 @ 8:30 AM - PPA Committee (Leininger, Stoll, & Shaffer)
- July 20, 2026 @ 9:00 AM – Finance Committee (Hoffmaster, Houtz, & Collins)
- July 23, 2026 @ 9:00 AM – Full Board Meeting
- August 17, 2026 @ 9:00 AM – Finance Committee (Hoffmaster, Houtz, & Collins)
- August 19, 2026 @ 8:30 AM - PPA Committee (Leininger, Stoll, & Shaffer)
- August 27, 2026 @ 9:00 AM – Full Board Meeting
- September 16, 2026 @ 8:30 AM - PPA Committee (Leininger, Stoll, & Shaffer)
- September 21, 2026 @ 9:00 AM – Finance Committee (Hoffmaster, Houtz, & Collins)
- September 24, 2026 @ 9:00 AM – Full Board Meeting
- November 2, 2026 @ 9:00 AM – Finance Committee (Hoffmaster, Houtz, & Collins)
- November 4, 2026 @ 8:30 AM - PPA Committee (Leininger, Stoll, & Shaffer)
- November 12, 2026 @ 9:00 AM – Full Board Meeting
- December 2, 2026 @ 8:30 AM - PPA Committee (Leininger, Stoll, & Shaffer)
- December 7, 2026 @ 9:00 AM – Finance Committee (Hoffmaster, Houtz, & Collins)
- December 10, 2026 @ 9:00 AM – Full Board Meeting
- January 28, 2027 @ 9:00 AM – Full Board Meeting

2026 Board Education Schedule:

- February 27, 2025 – Regional Epidemiologist
- March 27, 2025 – Audit Presentation (during the meeting)
- April 24, 2025 – MMRMA Risk Management
- May 22, 2025 – tbd
- September 25, 2025 – tbd
- November 13, 2025 – tbd

## February 26, 2026 – Board of Health Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health meeting was called to order by Chair, Brent Leininger at 9:00 AM with the Pledge of Allegiance to the Flag of the United States. Roll call was completed as follows: Jared Hoffmaster, Jon Houtz, Brent Leininger, Rick Shaffer, Kevin Collins, and Tim Stoll. No members were absent.

Also present from BHSJ: Rebecca Burns, Karen Luparello, Laura Sutter, Joe Frazier, Kris Dewey, and Jennifer Hull.

Mr. Hoffmaster moved to approve the agenda with support from Mr. Stoll. The motion passed.

Mr. Stoll moved to approve the minutes from the January 22, 2026 meeting with support from Mr. Shaffer. The motion passed.

Public Comment: No public comments were given.

Rebecca Burns, Health Officer, reviewed the monthly Health Officer's Report with the following items included: FY25 Audit, Michigan Local Public Health Accreditation, Request to Change Banking Affiliation for St. Joseph County, Updated Cost Allocation Plan, Quality Improvement Plan (2026-2029), Senior Medicare Patrol, Website Redesign Request for Bids, Community Health Improvement/Strategic Plan Proposal, Rx Kids in Michigan, Board of Health Education Today, Staffing Update, BHSJCHA Mobile Unit on the Road, Public Health Concerns, Coldwater Office, Hillsdale Office, Three Rivers Office, and Sturgis Office.

Dr. Luparello reviewed the Medical Director's monthly report. This month's educational report was titled, "Heart Health".

### Departmental Reports:

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

### Financial Reports/Expenditures

- Mr. Shaffer moved to approve the expenditures for January with support from Mr. Collins. The motion passed.
- Mr. Hoffmaster moved to place the financials for January on file with support from Mr. Stoll. The motion passed.

### Committee Reports:

- Finance Committee – Mr. Houtz moved to approve the minutes from the February 13, 2026 Finance Committee meeting, with support from Mr. Stoll. The motion passed.
- Program, Policy, & Appeals Committee – Mr. Shaffer moved to approve the minutes from the February 18, 2026 Program, Policy, and Appeals Committee meeting with support from Mr. Hoffmaster. The motion passed.

Unfinished Business:

- There was no unfinished business.

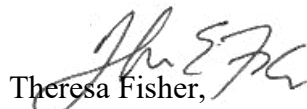
New Business:

- Board Members were provided the annual AAA Conflict of Interest Statements for signature.
- Mr. Houtz moved to accept the bid from R Johnson Builders to replace the HVAC equipment in the Hillsdale facility, in the amount of \$77,000. The motion received support from Mr. Stoll and passed.
- Mr. Houtz moved to approve opening a new depository account at Century Bank and Trust and closing the depository account at Sturgis Bank and Trust, with support from Mr. Shaffer. Mr. Hoffmaster disclosed a conflict of interest and did not vote. The motion passed.
- Mr. Hoffmaster moved to approve participation in the Senior Medicare Patrol Project as outlined in the Finance Committee, with support from Mr. Collins. The motion passed.
- Mr. Stoll moved to approve the Quality Improvement Plan as presented, with support from Mr. Shaffer. The motion passed.
- Mr. Stoll moved to approve the Cost Allocation Plan as presented, with support from Mr. Hoffmaster. The motion passed.

Public Comment: No public comments were given.

With no further business, Mr. Stoll moved to adjourn the meeting with support from Mr. Collins. The motion passed and the meeting was adjourned at 10:07 AM.

Respectfully Submitted by:

  
Theresa Fisher,  
Administrative Services Director  
Secretary to the Board of Health

# PUBLIC COMMENT

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March 6, 2026

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

We have audited the financial statements of the governmental activities and the major fund of Branch-Hillsdale-St. Joseph Community Health Agency for the year ended September 30, 2025. Professional standards require that we provide you with information about our responsibilities under generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance, as well as certain information related to the planned scope and timing of our audit. We have communicated such information in our letter to you dated January 9, 2026. Professional standards also require that we communicate to you the following information related to our audit.

#### Significant Audit Matters

##### *Qualitative Aspects of Accounting Practices*

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by the Branch-Hillsdale-St. Joseph Community Health Agency are described in Note 1 to the financial statements. As described in Note 9 to the financial statements, the Agency adopted Governmental Accounting Standards Board (GASB) Statement No. 101, *Compensated Absences*, and Statement No. 102, *Certain Risk Disclosures*, during the year ended September 30, 2025. The implementation of GASB Statement No. 101 and Statement No. 102 did not have a material impact on the Agency's financial statements. We noted no transactions entered into by the Agency during the year for which there is a lack of authoritative guidance or consensus. All significant transactions have been recognized in the financial statements in the proper period.

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

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

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

Management's calculation of the accrued compensated absences is based on current hourly rates, historical usage, and policies regarding payment of sick and vacation banks while the current and noncurrent portions of compensated absences were based on an estimate of the percentage of employees' use of compensated absences.

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

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

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

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

#### *Corrected and Uncorrected Misstatements*

Professional standards require us to accumulate all known and likely misstatements identified during the audit, other than those that are clearly trivial, and communicate them to the appropriate level of management. Management has corrected all such misstatements. In addition, none of the misstatements detected as a result of audit procedures and corrected by management were material, either individually or in the aggregate, to each opinion unit's financial statements taken as a whole.

Compensated absences as of September 30, 2024, were not restated when GASB Statement No. 101 was implemented. Therefore the current year governmental activities change in net position is understated by \$47,924. Management has determined that this effect is immaterial, both individually and in the aggregate, to the financial statements taken as a whole. The uncorrected misstatements or the matters underlying them could potentially cause future period financial statements to be materially misstated, even though, in our judgment, such uncorrected misstatements are immaterial to the financial statements under audit.

#### *Disagreements with Management*

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

#### *Management Representations*

We have requested certain representations from management that are included in the management representation letter dated March 6, 2026.

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

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

#### *Other Audit Findings or Issues*

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

### Other Matters

We applied certain limited procedures to the required supplementary information (RSI) that supplements the basic financial statements. Our procedures consisted of inquiries of management regarding the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We did not audit the RSI and do not express an opinion or provide any assurance on the RSI.

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

### Restriction on Use

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

Very truly yours,

*Maney Costeiran PC*

Lansing, Michigan

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

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

**YEAR ENDED SEPTEMBER 30, 2025**



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## **INDEPENDENT AUDITOR'S REPORT**

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

### **Report on the Audit of the Financial Statements**

#### ***Opinions***

We have audited the accompanying financial statements of the governmental activities and the major fund of the Branch-Hillsdale-St. Joseph Community Health Agency (the Agency), as of and for the year ended September 30, 2025, and the related notes to the financial statements, which collectively comprise the Agency's basic financial statements as listed in the table of contents.

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the governmental activities and the major fund of the Branch-Hillsdale-St. Joseph Community Health Agency, as of September 30, 2025, and the changes in financial position thereof for the year then ended in accordance with accounting principles generally accepted in the United States of America.

#### ***Basis for Opinions***

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. 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 the Branch-Hillsdale-St. Joseph Community Health Agency 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 opinions.

#### ***Management's Responsibility 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 the Agency's ability to continue as a going concern for twelve months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

## ***Auditor's Responsibility 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 opinions. 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 generally accepted auditing standards 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.

In performing an audit in accordance with generally accepted auditing standards 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 the Agency'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 the Agency'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 Supplementary Information***

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

### ***Supplementary Information***

Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the Agency's basic financial statements. The accompanying other supplementary information, as listed in the table of contents, including the schedule of expenditures of federal awards, as required by Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis 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 other supplementary information, including the schedule of expenditures of federal awards, is fairly stated, in all material respects, in relation to the basic financial statements as a whole.

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

In accordance with *Government Auditing Standards*, we have also issued our report dated March 6, 2026, on our consideration of the Agency's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and 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 internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Agency's internal control over financial reporting and compliance.

*Maney Costeiran PC*

Lansing, Michigan  
March 6, 2026

## **Management's Discussion and Analysis For Fiscal Year Ended September 30, 2025**

This section of the annual financial statements, titled Management's Discussion and Analysis, represents the administration's review of the Branch-Hillsdale-St. Joseph Community Health Agency's (the Agency's) financial performance during the fiscal year ended September 30, 2025. The Management's Discussion and Analysis is intended to be read in conjunction with the Agency's financial statements.

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

### **Financial Highlights**

- The assets and deferred outflows of resources of the Agency exceeded its liabilities and deferred inflows of resources at September 30, 2025, by \$3,401,181 at the government-wide level. Unrestricted net position was \$2,687,349 at September 30, 2025.
- The Agency's total net position increased \$685,459 as a result of this year's operations.
- As of September 30, 2025, the Agency's governmental fund reported an ending fund balance of \$3,967,661, an increase of \$368,002.
- As of September 30, 2025, the assigned and unassigned fund balance was \$3,597,456 and \$223,549, respectively, or approximately 44% of total fund expenditures.

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

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

**Government-wide Financial Statements:** The government-wide financial statements provide information about the activities of the entire Agency. They present an overall view of the Agency's finances, reporting the assets and liabilities on fiscal year ended September 30, 2025.

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

The statement of activities presents information showing how the government's net position changed during fiscal year 2024/2025. All changes in net position are reported as soon as the change occurs, regardless of the timing of related cash flows.

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

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

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

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

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

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

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

**Notes to the Financial Statements:** The notes provide additional information that is essential to a full understanding of the data provided in the government-wide and fund financial statements. The notes to the financial statements can be found on pages 16-32 of this report.

**Other Information:** In addition to the basic financial statements and accompanying notes, this report also presents certain required supplementary information concerning budgeted revenues and expenditures, schedule of changes in net pension liability and related ratios, and schedule of employer contributions on pages 33-37. Other supplementary information concerning support services and expenditures of federal awards can be found on pages 38-46 of this report.

**Government-wide Financial Analysis:**

As noted earlier, net position may serve over time as a useful indicator of a government’s financial position. In the case of Branch-Hillsdale-St. Joseph Community Health Agency, assets and deferred outflows of resources exceeded liabilities by \$3,401,181. A comparative analysis of net position as of September 30, 2025 and 2024, are presented below:

	<u>2025</u>	<u>2024</u>
ASSETS		
Current assets	\$ 4,973,646	\$ 5,573,841
Capital assets	<u>713,832</u>	<u>501,313</u>
TOTAL ASSETS	<u>5,687,478</u>	<u>6,075,154</u>
DEFERRED OUTFLOWS OF RESOURCES	<u>1,187,331</u>	<u>1,670,570</u>
LIABILITIES		
Current liabilities	1,333,939	2,245,442
Noncurrent liabilities	<u>2,139,689</u>	<u>2,784,560</u>
TOTAL LIABILITIES	<u>3,473,628</u>	<u>5,030,002</u>
NET POSITION		
Investment in capital assets	713,832	501,313
Unrestricted	<u>2,687,349</u>	<u>2,214,409</u>
TOTAL NET POSITION	<u>\$ 3,401,181</u>	<u>\$ 2,715,722</u>

Unrestricted net position (the part of net position that can be used to finance day to day operations) increased by \$472,940.

The following table shows the changes in net position as of September 30, 2025 and 2024.

	<u>2025</u>	<u>2024</u>
PROGRAM REVENUES		
Charges for services	\$ 950,148	\$ 955,897
Grants and contributions	7,190,417	6,264,198
General revenues		
County appropriations	731,276	1,001,853
Miscellaneous	103,023	63,051
Interest	<u>93,079</u>	<u>110,382</u>
TOTAL REVENUES	9,067,943	8,395,381
PROGRAM EXPENSES	<u>8,382,484</u>	<u>8,553,399</u>
Change in net position	<u>\$ 685,459</u>	<u>\$ (158,018)</u>

During the year grants and contributions increased \$926,219 due primarily to more State and Federal grants as well as more Medicaid cost based reimbursements in the current year. We will continue to collaborate with local health providers and using them as a resource to find new funding.

Total expenses decreased \$170,915 or approximately 2% from last year, primarily related to decreases in fringe benefits, as well as supplies and materials purchased.

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

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

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

As of the end of the current fiscal year, the Branch-Hillsdale-St. Joseph Community Health Agency's governmental fund reported a fund balance of \$3,967,661, an increase of \$368,002 in comparison with the prior year. Of this total, \$146,656 is considered nonspendable as it is for prepaid expenditures. There has been \$3,597,456 assigned for various future year expenditures. The unassigned fund balance at September 30, 2025, was \$223,549.

As a measure of the governmental fund's liquidity, it may be useful to compare assigned and unassigned fund balance to total fund expenditures. Assigned and unassigned fund balance represents approximately 44% of total fund expenditures.

### **Governmental Fund Budgetary Highlights**

Over the course of the year, the Branch-Hillsdale-St. Joseph Community Health Agency's Board of Public Health amended the budget to take into account events that occurred during the year. Total revenue budget was increased \$450,606, or approximately 5%, primarily due to increases in grant revenue and county appropriations. Actual revenue was \$434,019 under the final amended budget due to lower than anticipated State revenue through the CPBC grant programs and Medicaid cost based reimbursements. The total expenditures budget was also increased by \$450,606, or approximately 5%, primarily due to contractual services for consulting fees, repairs and maintenance, and supplies and materials. Actual expenditures were \$802,021 under the final amended budget.

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

**Capital Assets:** The Branch-Hillsdale-St. Joseph Community Health Agency's investment in capital assets as of September 30, 2025, amounts to \$713,832 (net of accumulated depreciation). During the year, the Agency made investments in capital assets in the amount of \$278,270, including office space and building improvements, and recognized \$65,751 in annual depreciation. Additional details related to capital assets are presented in Note 3 to the financial statements.

**Long-term Obligations:** The Branch-Hillsdale-St. Joseph Community Health Agency has a long-term obligation related to compensated absences (e.g., unused vacation and sick leave). The long-term obligation at September 30, 2025, amounted to \$467,443 for compensated absences. Additional details related to long-term obligations are presented in Note 4 to the financial statements.

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

For the fiscal year ending September 30, 2026, close monitoring of State budget actions will continue to be important related to further possible cuts in funding provided through State grant agreements and other State funding mechanisms such as Medicaid Cost-Based and Rate-Based Reimbursement supplements. Because these funding sources represent such a substantial portion of the Agency's operating budget, changes in the levels of funding have a significant impact on the types and levels of services that the Agency is able to provide.

Because the services of the Agency are provided based on need and not the ability to pay, and the financial condition of the Agency is generally sound, the budget for the fiscal year ending September 30, 2026, included only normal economic increases in fees charged for services to the general public related to the corresponding increased operating costs to provide them and related to the levels of county funds appropriated.

## **Requests for Information**

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

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

**BASIC FINANCIAL STATEMENTS**

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
STATEMENT OF NET POSITION  
SEPTEMBER 30, 2025**

	Governmental Activities
<b>ASSETS</b>	
Current assets	
Cash	\$ 4,275,748
Accounts receivable	111,533
Due from other governmental units - Federal/State	262,236
Prepays	146,656
Inventories	177,473
Total current assets	4,973,646
Noncurrent assets	
Capital assets not being depreciated	35,250
Capital assets, net of accumulated depreciation	678,582
Total noncurrent assets	713,832
<b>TOTAL ASSETS</b>	<b>5,687,478</b>
<b>DEFERRED OUTFLOWS OF RESOURCES</b>	
Deferred outflows of resources related to pension	1,187,331
<b>LIABILITIES</b>	
Current liabilities	
Accounts payable	288,180
Accrued wages	84,204
Due to other governmental units - Federal/State	40,542
Other accrued liabilities	59,654
Unearned revenue	533,405
Current portion of compensated absences	327,954
Total current liabilities	1,333,939
Noncurrent liabilities	
Net pension liability	2,000,200
Noncurrent portion of compensated absences	139,489
Total noncurrent liabilities	2,139,689
<b>TOTAL LIABILITIES</b>	<b>3,473,628</b>
<b>NET POSITION</b>	
Investment in capital assets	713,832
Unrestricted	2,687,349
<b>TOTAL NET POSITION</b>	<b>\$ 3,401,181</b>

See accompanying notes to financial statements.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
STATEMENT OF ACTIVITIES  
YEAR ENDED SEPTEMBER 30, 2025**

<u>Functions/Programs</u>	<u>Expenses</u>	<u>Program Revenues</u>		<u>Net (Expense) Revenues and Changes in Net Position</u>
		<u>Charges for Services</u>	<u>Operating Grants and Contributions</u>	
Governmental activities				
Personal health	\$ 3,855,681	\$ 237,166	\$ 3,448,155	\$ (170,360)
Environmental health	1,722,574	574,055	1,066,955	(81,564)
Community health	612,513	135,057	554,404	76,948
Aging services	1,470,048	-	1,539,052	69,004
Administration	<u>721,668</u>	<u>3,870</u>	<u>581,851</u>	<u>(135,947)</u>
Total governmental activities	<u>\$ 8,382,484</u>	<u>\$ 950,148</u>	<u>\$ 7,190,417</u>	<u>(241,919)</u>
General revenues				
County appropriations - regular				731,276
Miscellaneous				103,023
Interest				<u>93,079</u>
Total general revenues				<u>927,378</u>
Change in net position				685,459
Net position, beginning of the year				<u>2,715,722</u>
Net position, end of the year				<u>\$ 3,401,181</u>

See accompanying notes to financial statements.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
GOVERNMENTAL FUND  
BALANCE SHEET  
SEPTEMBER 30, 2025**

<b>ASSETS</b>	
Cash	\$ 4,275,748
Accounts receivable	111,533
Due from other governmental units - Federal/State	262,236
Prepays	146,656
Inventories	<u>177,473</u>
TOTAL ASSETS	<u><u>\$ 4,973,646</u></u>
<b>LIABILITIES AND FUND BALANCE</b>	
<b>LIABILITIES</b>	
Accounts payable	\$ 288,180
Accrued wages	84,204
Due to other governmental units - Federal/State	40,542
Other accrued liabilities	59,654
Unearned revenue	<u>533,405</u>
TOTAL LIABILITIES	<u>1,005,985</u>
<b>FUND BALANCE</b>	
Nonspendable	146,656
Assigned	3,597,456
Unassigned	<u>223,549</u>
TOTAL FUND BALANCE	<u>3,967,661</u>
TOTAL LIABILITIES AND FUND BALANCE	<u><u>\$ 4,973,646</u></u>

See accompanying notes to financial statements.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
RECONCILIATION OF THE GOVERNMENTAL FUND BALANCE  
SHEET TO THE STATEMENT OF NET POSITION  
SEPTEMBER 30, 2025**

**Total fund balance - governmental fund** \$ 3,967,661

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

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

The cost of capital assets is	\$ 1,901,159	
Accumulated depreciation is	<u>(1,187,327)</u>	

Capital assets, net		713,832
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Governmental funds report actual pension expenditures for the fiscal year, whereas the governmental activities will recognize the net pension liability as of the measurement date. Pension contributions subsequent to the measurement date will be deferred in the statement of net position. In addition, resources related to changes of assumptions, differences between expected and actual experience, and differences between projected and actual pension plan investment earnings will be deferred over time in the government-wide financial statements. These amounts consist of:

Deferred outflows of resources related to pension		1,187,331
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Long-term liabilities are not due and payable in the current period and therefore are not reported as liabilities in the governmental fund balance sheet. Long-term liabilities at year-end consist of:

Net pension liability	(2,000,200)	
Compensated absences	<u>(467,443)</u>	

		<u>(2,467,643)</u>
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<b>Net position of governmental activities</b>		<b><u><u>\$ 3,401,181</u></u></b>
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**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
GOVERNMENTAL FUND  
STATEMENT OF REVENUES, EXPENDITURES, AND CHANGES IN FUND BALANCE  
YEAR ENDED SEPTEMBER 30, 2025**

<b>REVENUES</b>	
Licenses and permits	\$ 366,103
Intergovernmental	
Federal/State	7,051,187
Local	151,694
County appropriations	731,276
Charges for services	604,967
Interest and rents	93,079
Other	<u>69,637</u>
<b>TOTAL REVENUES</b>	<u><b>9,067,943</b></u>
<b>EXPENDITURES</b>	
Current	
Salaries and wages	3,593,383
Fringe benefits	1,792,915
Supplies and materials	888,097
Contractual	1,122,351
Communications	123,354
Travel and training	197,992
Insurance	48,968
Repairs and maintenance	640,500
Building and equipment rentals	157,386
Printing and advertising	50,873
Postage	33,970
Other	<u>50,152</u>
<b>TOTAL EXPENDITURES</b>	<u><b>8,699,941</b></u>
<b>NET CHANGE IN FUND BALANCE</b>	<b>368,002</b>
Fund balance, beginning of year	<u>3,599,659</u>
Fund balance, end of year	<u><u><b>\$ 3,967,661</b></u></u>

See accompanying notes to financial statements.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
RECONCILIATION OF THE STATEMENT OF REVENUES, EXPENDITURES, AND CHANGES IN  
FUND BALANCE OF THE GOVERNMENTAL FUND TO THE STATEMENT OF ACTIVITIES  
YEAR ENDED SEPTEMBER 30, 2025**

**Net change in fund balance - governmental fund** \$ 368,002

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

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

Capital outlay	\$	278,270
Depreciation expense		<u>(65,751)</u>

Excess of capital outlay over depreciation expense		212,519
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Some items reported in the statement of activities do not require the use of current financial resources and therefore are not reported as expenditures in the governmental fund. These activities consist of:

Decrease in net pension liability		676,775
(Increase) in accrued compensated absences		(88,598)
(Decrease) in deferred outflows of resources related to pension		<u>(483,239)</u>

104,938

**Change in net position of governmental activities** \$ 685,459

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

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

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

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

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

Reporting Entity

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

Basis of Presentation

**GOVERNMENT-WIDE FINANCIAL STATEMENTS**

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

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

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

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

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

Basis of Presentation (continued)

FUND FINANCIAL STATEMENTS

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

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

Basis of Accounting

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

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

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

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

Budgets and Budgetary Accounting

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

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

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

Cash

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

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

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

Receivables and Unearned Revenue

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

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

In addition to grant funding received prior to meeting the revenue recognition criteria, the Agency has also recorded unearned revenue of \$177,473 in the government-wide and fund financial statements, respectively, equaling the amount of vaccine inventory received from the State of Michigan that is on hand at year-end. Unearned revenues arise when the Agency receives resources before it has a legal claim to them. In subsequent periods, when the revenue meets both the "measurable" and "available" criteria for recognition, the liability for unearned revenue is removed from the statement of net position and balance sheet, respectively, and revenue is recognized.

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

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

Inventories

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

Prepays

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

Capital Assets

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

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

Equipment	4-10 years
Land improvements	7-20 years

Compensated Absences

The Agency recognizes a compensated absences liability for leave time that (1) has been earned for services previously rendered by employees, (2) accumulates and is allowed to be carried over to subsequent years, and (3) is more likely than not to be used as time off or settled during or upon separation from employment. The liability, including salary-related benefits, has been reported in the Statement of Net Position.

Net Pension Liability

The Agency offers a defined benefit pension plan to its employees. The Agency records a net pension liability for the difference between the total pension liability calculated by the actuary and the pension plan's fiduciary net position. For the purpose of measuring the net pension liability, deferred outflows of resources, and pension expense, information about the fiduciary net position have been determined on the same basis as they are reported by the pension plan. For this purpose, benefit payments (including refunds of employee contributions) are recognized when due and payable in accordance with the benefit terms.

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

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

Deferred Outflows of Resources

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

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

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

Fund Balance Classification Policies and Procedures

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

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

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

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

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

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

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

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

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

Fund Balance Classification Policies and Procedures (continued)

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

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

Use of Estimates

The preparation of basic financial statements, in conformity with GAAP, requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, deferred inflows and outflows of resources and disclosure of contingent assets and liabilities at the date of the basic financial statements and reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

**NOTE 2 - DEPOSITS**

As of September 30, 2025, the Agency had deposits subject to the following risks:

Custodial Credit Risk - Deposits

In the case of deposits, this is the risk that in the event of a bank failure, the Agency's deposits may not be returned to it. As of September 30, 2025, \$390,705 of the Agency's bank balance of \$827,957 was exposed to custodial credit risk because it was all covered by federal depository insurance. The Agency's carrying value on the books for deposits at the end of the year was \$158,854.

The cash balances reported in the basic financial statements include \$2,321 in imprest cash and \$4,114,573 in cash that is on deposit with the Branch County Treasurer. The cash on deposit with the Branch County Treasurer is part of the County pooled cash and investments. As a result, the insured and uninsured amounts related to these amounts cannot be determined.

Credit Risk

State law limits investments in certain types of investments to a prime or better rating issued by nationally recognized statistical rating organizations (NRSRO's). Obligations of the U.S. government or obligations explicitly guaranteed by the U.S. government are not considered to have credit risk and do not require disclosure of credit quality. As of September 30, 2025, the Agency did not have any investments that would be subject to rating.

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

**NOTE 2 - DEPOSITS (continued)**

Interest Rate Risk

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

Concentration of Credit Risk

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

Foreign Currency Risk

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

**NOTE 3 - CAPITAL ASSETS**

The following provides a summary of the changes in capital assets for the year ended September 30, 2025:

	Balance Oct. 1, 2024	Additions	Disposals	Balance Sept. 30, 2025
Capital assets, not being depreciated				
Construction in progress	\$ -	\$ 35,250	\$ -	\$ 35,250
Capital assets, being depreciated				
Equipment	1,057,086	20,130	-	1,077,216
Land improvements	565,803	222,890	-	788,693
Total capital assets, being depreciated	1,622,889	243,020	-	1,865,909
Less accumulated depreciation for:				
Equipment	(1,047,420)	(46,191)	-	(1,093,611)
Land improvements	(74,156)	(19,560)	-	(93,716)
Total accumulated depreciation	(1,121,576)	(65,751)	-	(1,187,327)
Net capital assets being depreciated	501,313	177,269	-	678,582
Capital assets, net	\$ 501,313	\$ 212,519	\$ -	\$ 713,832

Depreciation expense appears on the statement of activities in these governmental functions: Personal Health \$30,245; Environmental Health \$13,808; Community Health \$4,603; Aging Services \$11,835; and Administration \$5,260.

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

**NOTE 4 - LONG-TERM OBLIGATIONS**

The following is a summary of changes in long-term obligations (including current portion) of the Agency for the year ended September 30, 2025:

	Balance Oct. 1, 2024	Net Change	Balance Sept. 30, 2025	Amount Due within One Year
Compensated absences	\$ 378,845	\$ 88,598	\$ 467,443	\$ 327,954

The Department recognizes a liability for compensated absences for leave time that (1) has been earned for services previously rendered by employees, (2) accumulates and is allowed to be carried over to subsequent years, and (3) is more likely than not to be used as time off or settled during or upon separation from employment. Based on the criteria listed, multiple types of leave qualify for recognition as a compensated absences liability. The dollar amounts of these liabilities, including salary related benefits, which have been accrued in the government-wide financial statements, amounted to \$467,443 at September 30, 2025.

**NOTE 5 - RETIREMENT PLANS**

**Defined Benefit Pension Plan**

Plan Description

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

Summary of Significant Accounting Policies

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

Benefits Provided

Benefits provided include a plan with a multiplier of 2.00%.

Vesting period of six years.

Normal retirement age is 60 with early retirement of 55 with 25 years of service or reduced early retirement at 50 with 25 years of service or 55 with 15 years of service.

Final average compensation is calculated based on five years. Member contributions are 3.00%.

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

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

**Defined Benefit Pension Plan (continued)**

Benefits Provided

The plan provides certain retirement, disability, and death benefits to plan members and beneficiaries. Public Act 427 of 1984, as amended, established, and amends the benefit provisions of the participants in MERS. The MERS plan covers all eligible full-time general employees (closed to new hires after August 1, 2015) at the Agency. An employee who leaves service may withdraw his or her contributions, plus any accrued interest.

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

At the December 31, 2024, valuation date, the following employees were covered by the benefit terms:

Inactive employees or beneficiaries receiving benefits	85
Inactive employees entitled to but not yet receiving benefits	30
Active employees	<u>14</u>
	<u><u>129</u></u>

Contributions

Article 9, Section 24 of the State of Michigan constitution requires that financial benefits arising on account of employee service rendered in each year be funded during that year. Accordingly, MERS retains an independent actuary to determine the annual contribution. The Agency is required to contribute amounts at least equal to the actuarially determined rate, as established by the MERS Retirement Board. The actuarially determined rate is the estimated amount necessary to finance the cost of benefits earned by employees during the year, with an additional amount to finance any unfunded accrued liability. The employer may establish contribution rates to be paid by its covered employees.

For the year ended September 30, 2025, the active employee contribution rates were 3.00% of annual payroll. The Agency's average contribution rate was 80% of annual payroll.

Payable to the Pension Plan

At September 30, 2025, there were no amounts outstanding by the Agency for contributions to the pension plan required for the year ended September 30, 2025.

Net Pension Liability

The net pension liability reported at September 30, 2025, was determined using a measure of the total pension liability and the pension net position as of December 31, 2024. The December 31, 2024, total pension liability was determined by an annual actuarial valuation as of that date.

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

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

**Defined Benefit Pension Plan (continued)**

Actuarial Assumptions

The total pension liability in the December 31, 2024, annual actuarial valuation was determined using the following actuarial assumptions, applied to all periods included in the measurement:

Inflation: 2.50%

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

Investment rate of return: 7.18%, net of investment and administrative expenses, including inflation.

Although no specific price inflation assumptions are needed for the valuation, the 3.00% long-term wage inflation assumption would be consistent with a price inflation of 3.00 - 4.00%.

Mortality rates used were based on a version of Pub-2010 and fully generational MP-2021.

The actuarial assumptions used in the valuation were based on the results of the 2019-2023 Five-Year Experience Study.

Projected Cash Flows

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

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

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

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

**Defined Benefit Pension Plan (continued)**

Projected Cash Flows (continued)

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

<u>Asset Class</u>	<u>Target Allocation</u>	<u>Long-term Expected Real Rate of Return</u>	<u>Expected Money-Weighted Rate of Return</u>
Global Equity	60.00%	4.50%	2.70%
Global Fixed Income	20.00%	2.15%	0.43%
Private Investments	<u>20.00%</u>	6.50%	<u>1.30%</u>
	<u><u>100.00%</u></u>		4.43%
Inflation			<u>2.50%</u>
Assumed investment rate of return			6.93%
Administration expenses netted above			<u>0.25%</u>
Investment rate of return (discount rate)			<u><u>7.18%</u></u>

Discount Rate

The discount rate used to measure the total pension liability is 7.18%. The current discount rate shown for GASB 68 purposes is higher than the MERS assumed rate of return. This is because, for GASB 68 purposes, the discount rate must be gross of administrative expenses, whereas for funding purposes, it is net of administrative expenses. The projection of cash flows used to determine the discount rate assumes that employer and employee contributions will be made at the rates agreed upon for employees and the actuarially determined rates for employers. Based on these assumptions, the pension plan's fiduciary net position was projected to be available to pay all projected future benefit payments of current active and inactive employees. Therefore, the long-term expected rate of return on pension plan investments was applied to all periods of projected benefit payments to determine the total pension liability.

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

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

**Defined Benefit Pension Plan (continued)**

Change in Net Position Liability

The Agency's net pension liability was measured as of December 31, 2024, and the total pension liability used to calculate the net pension liability was determined by an annual actuarial valuation as of that date. Changes in the net pension liability during the measurement year were as follows:

	Increase (Decrease)		
	Total Pension Liability (a)	Plan Fiduciary Net Position (b)	Net Pension Liability (a)-(b)
<u>Changes in Net Pension Liability</u>			
Balances at December 31, 2023	\$ 19,689,207	\$ 17,012,232	\$ 2,676,975
Changes for the year			
Service cost	102,520	-	102,520
Interest on total pension liability	1,372,536	-	1,372,536
Difference between expected and actual experience	145,711	-	145,711
Changes in assumptions	(70,277)	-	(70,277)
Employer contributions	-	961,709	(961,709)
Employee contributions	-	29,569	(29,569)
Net investment income	-	1,273,753	(1,273,753)
Benefit payments, including employee refunds	(1,248,730)	(1,248,730)	-
Administrative expense	-	(37,766)	37,766
Net changes	301,760	978,535	(676,775)
Balances at December 31, 2024	\$ 19,990,967	\$ 17,990,767	\$ 2,000,200

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

The following presents the net pension liability of the Agency, calculated using the discount rates of 7.18%, as well as what the Agency's net pension liability would be using a discount rate that is 1% lower or 1% higher than the current rate.

	1% Decrease	Current Discount Rate	1% Increase
Net pension liability	\$ 4,123,810	\$ 2,000,200	\$ 198,605

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

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

**Defined Benefit Pension Plan (continued)**

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

For the year ended September 30, 2025, the Agency recognized pension expense of \$479,196. The Agency reported deferred outflows and inflows of resources related to pensions from the following sources:

	Deferred Outflows of Resources	Deferred Inflows of Resources
Net difference between projected and actual earnings on pension plan investments	\$ 682,386	\$ -
Contributions subsequent to the measurement date*	504,945	-
Total	\$ 1,187,331	\$ -

\* The amount reported as deferred outflows of resources resulting from contributions subsequent to the measurement date will be recognized as a reduction in the net pension liability for the year ending September 30, 2026.

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

Year Ending September 30,	Pension Expense
2026	\$ 325,330
2027	511,904
2028	(142,275)
2029	(12,573)
	\$ 682,386

Change in Assumptions

Adopted the results of an experience study covering the period of January 1, 2019 through December 31, 2023.

Changes in Benefits

There were no changes of benefit terms during plan year 2024.

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

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

**Defined Contribution Pension Plan**

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

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

The Agency's contributions to the plan were \$122,331 for the year ended September 30, 2025.

**NOTE 6 - RISK MANAGEMENT**

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

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

**NOTE 7 - CONTINGENT LIABILITIES**

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

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

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

**NOTE 8 - DETAILS OF FUND BALANCE CLASSIFICATIONS**

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

As of September 30, 2025, the fund balance classifications were as follows:

Nonspendable			
Prepays		\$	146,656
Assigned			
Vacation and sick leave			467,443
BCCF funds			309,956
Dental revenue			468,837
Aging services			35,781
Medicaid cost base reimbursement			1,476,876
Community stabilization			676,064
Capital improvement			162,499
Unassigned			<u>223,549</u>
		<u>\$</u>	<u>3,967,661</u>

**NOTE 9 - CHANGES IN ACCOUNTING PRINCIPLES**

For the year ended September 30, 2025, the Agency implemented GASB Statement No. 101, *Compensated Absences*, and GASB Statement No. 102, *Certain Risk Disclosures*. The following is a summary of the new pronouncements:

In June 2022, the GASB issued Statement No. 101, *Compensated Absences*. This Statement requires that liabilities for compensated absences be recognized for (1) leave that has not been used and (2) leave that has been used but not yet paid in cash or settled through noncash means. A liability should be recognized for leave that has not been used if (a) the leave is attributable to services already rendered, (b) the leave accumulates, and (c) the leave is more likely than not to be used for time off or otherwise paid in cash or settled through noncash means. This Statement also establishes guidance for measuring a liability for leave that has not been used, generally using an employee’s pay rate as of the date of the financial statements.

In December 2023, the GASB issued Statement No. 102, *Certain Risk Disclosures*. This Statement requires a government to assess whether a concentration or constraint makes the government vulnerable to the risk of a substantial impact. Additionally, this Statement requires a government to assess whether an event or events associated with a concentration or constraint that could cause the substantial impact have occurred, have begun to occur, or are more likely than not to begin to occur within 12 months of the date of the financial statements are issued. If a government determines that those criteria for disclosures have been met for a concentration or constraint, it should disclose information in notes to financial statements in sufficient detail to enable users of financial statements to understand the nature of circumstances disclosed and the government’s vulnerability to the risk of substantial impact.

There was no material impact on the Agency’s financial statements after the implementation of GASB Statements No. 101 and 102.

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

**NOTE 10 - UPCOMING ACCOUNTING PRONOUNCEMENTS**

In April 2024, the GASB issued Statement No. 103, *Financial Reporting Model Improvements*. This Statement establishes new accounting and financial reporting requirements - or modifies existing requirements - related to the following:

- a. Management's discussion and analysis (MD&A);
  - i. Requires that the information presented in MD&A be limited to the related topics discussed in five specific sections:
    - 1) Overview of the Financial Statements,
    - 2) Financial Summary,
    - 3) Detailed Analyses,
    - 4) Significant Capital Asset and Long-Term Financing Activity,
    - 5) Currently Known Facts, Decisions, or Conditions;
  - ii. Stresses detailed analyses should explain why balances and results of operations changed rather than simply presenting the amounts or percentages by which they changed;
  - iii. Removes the requirement for discussion of significant variations between original and final budget amounts and between final budget amounts and actual results;
- b. Unusual or infrequent items;
- c. Presentation of the proprietary fund statement of revenues, expenses, and changes in fund net position;
  - i. Requires that the proprietary fund statement of revenues, expenses, and changes in fund net position continue to distinguish between operating and nonoperating revenues and expenses and clarifies the definition of operating and nonoperating revenues and expenses;
  - ii. Requires that a subtotal for *operating income (loss) and noncapital subsidies* be presented before reporting other nonoperating revenues and expenses and defines subsidies;
- d. Information about major component units in basic financial statements should be presented separately in the statement of net position and statement of activities unless it reduces the readability of the statements in which case combining statements of should be presented after the fund financial statements;
- e. Budgetary comparison information should include variances between original and final budget amounts and variances between final budget and actual amounts with explanations of significant variances required to be presented in the notes to RSI.

The Agency is currently evaluating the impact this standard will have on the financial statements when adopted during the 2025-2026 fiscal year.

In September 2024, the GASB issued Statement No. 104, *Disclosure of Certain Capital Assets*. This Statement requires certain types of capital assets to be disclosed separately in the capital assets note disclosures required by Statement No. 34. Lease assets recognized in accordance with Statement No. 87, *Leases*, and intangible right-to-use assets recognized in accordance with Statement No. 94, *Public-Private and Public-Public Partnerships and Availability Payment Arrangements*, should be disclosed separately by major class of underlying asset in the capital assets note disclosures. Subscription assets recognized in accordance with Statement No. 96, *Subscription-based Information Technology Arrangements*, also should be separately disclosed. In addition, this Statement requires intangible assets other than those three types to be disclosed separately by major class. This Statement also requires additional disclosures for capital assets held for sale. The Agency is currently evaluating the impact this standard will have on the financial statements when adopted during the 2025-2026 fiscal year.

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

**NOTE 10 - UPCOMING ACCOUNTING PRONOUNCEMENTS (continued)**

In December 2025, the GASB issued Statement No. 105, *Subsequent Events*. This Statement clarifies the subsequent events that constitute recognized and nonrecognized events and establishes specific note disclosure requirements for nonrecognized events. The Agency is currently evaluating the impact this standard will have on the financial statements when adopted during the 2026-2027 fiscal year.

**REQUIRED SUPPLEMENTARY INFORMATION**

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
GENERAL OPERATING FUND  
BUDGETARY COMPARISON SCHEDULE  
YEAR ENDED SEPTEMBER 30, 2025**

	Original Budget	Final Amended Budget	Actual	Variance with Final Budget Positive (Negative)
<b>REVENUES</b>				
Licenses and permits	\$ 370,240	\$ 373,840	\$ 366,103	\$ (7,737)
Intergovernmental				
Federal/State	6,801,854	7,318,975	7,051,187	(267,788)
Local	210,067	152,256	151,694	(562)
County appropriations	719,147	781,979	731,276	(50,703)
Charges for services	700,629	581,278	604,967	23,689
Interest and rents	60,000	100,000	93,079	(6,921)
Other	189,419	193,634	69,637	(123,997)
<b>TOTAL REVENUES</b>	<u>9,051,356</u>	<u>9,501,962</u>	<u>9,067,943</u>	<u>(434,019)</u>
<b>EXPENDITURES</b>				
Current				
Salaries and wages	3,811,985	3,738,612	3,593,383	145,229
Fringe benefits	1,772,238	1,872,472	1,792,915	79,557
Supplies and materials	853,829	983,034	888,097	94,937
Contractual	1,131,199	1,265,106	1,122,351	142,755
Communications	106,000	111,364	123,354	(11,990)
Travel and training	238,425	285,017	197,992	87,025
Insurance	50,000	50,000	48,968	1,032
Repairs and maintenance	677,834	847,225	640,500	206,725
Building and equipment rentals	153,600	157,535	157,386	149
Printing and advertising	40,830	41,570	50,873	(9,303)
Postage	33,310	39,221	33,970	5,251
Other	182,106	110,806	50,152	60,654
<b>TOTAL EXPENDITURES</b>	<u>9,051,356</u>	<u>9,501,962</u>	<u>8,699,941</u>	<u>802,021</u>
<b>NET CHANGE IN FUND BALANCE</b>	-	-	368,002	368,002
Fund balance, beginning of year	<u>3,599,659</u>	<u>3,599,659</u>	<u>3,599,659</u>	-
Fund balance, end of year	<u><u>\$ 3,599,659</u></u>	<u><u>\$ 3,599,659</u></u>	<u><u>\$ 3,967,661</u></u>	<u><u>\$ 368,002</u></u>

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

	2024	2023	2022	2021	2020	2019	2018	2017	2016	2015
Total Pension Liability										
Service cost	\$ 102,520	\$ 121,515	\$ 144,261	\$ 165,771	\$ 184,846	\$ 162,697	\$ 188,936	\$ 194,225	\$ 221,881	\$ 260,139
Interest	1,372,536	1,333,692	1,322,608	1,302,936	1,174,321	1,161,744	1,155,643	1,122,384	1,096,376	1,008,655
Difference between expected and actual experience	145,711	352,701	(174,176)	36,501	423,704	24,243	(366,923)	(79,298)	(233,076)	80,642
Changes of assumptions	(70,277)	136,880	-	664,119	921,539	508,776	-	-	-	814,056
Benefit payments, including employee refunds	(1,248,730)	(1,181,153)	(1,075,707)	(1,043,494)	(961,641)	(915,864)	(860,670)	(777,188)	(715,313)	(616,270)
Net Change in Total Pension Liability	301,760	763,635	216,986	1,125,833	1,742,769	941,596	116,986	460,123	369,868	1,547,222
Total Pension Liability, beginning	19,689,207	18,925,572	18,708,586	17,582,753	15,839,984	14,898,388	14,781,402	14,321,279	13,951,411	12,404,189
Total Pension Liability, ending	<u>\$ 19,990,967</u>	<u>\$ 19,689,207</u>	<u>\$ 18,925,572</u>	<u>\$ 18,708,586</u>	<u>\$ 17,582,753</u>	<u>\$ 15,839,984</u>	<u>\$ 14,898,388</u>	<u>\$ 14,781,402</u>	<u>\$ 14,321,279</u>	<u>\$ 13,951,411</u>
Plan Fiduciary Net Position										
Contributions - employer	\$ 961,709	\$ 643,544	\$ 811,184	\$ 1,275,772	\$ 1,264,662	\$ 637,262	\$ 304,525	\$ 266,448	\$ 226,464	\$ 219,053
Contributions - employee	29,569	30,777	36,767	44,476	48,270	47,927	50,404	55,364	64,400	85,602
Net investment income (loss)	1,273,753	1,773,051	(1,974,073)	2,130,706	1,994,138	1,615,364	(497,015)	1,559,362	1,251,034	(173,001)
Benefit payments, including employee refunds	(1,248,730)	(1,181,153)	(1,075,707)	(1,043,494)	(961,641)	(915,864)	(860,670)	(777,188)	(715,313)	(616,270)
Administrative expense	(37,766)	(36,796)	(32,919)	(25,220)	(27,686)	(27,776)	(24,912)	(24,713)	(24,706)	(25,331)
Net Change in Plan Fiduciary Net Position	978,535	1,229,423	(2,234,748)	2,382,240	2,317,743	1,356,913	(1,027,668)	1,079,273	801,879	(509,947)
Plan Fiduciary Net Position, beginning	17,012,232	15,782,809	18,017,557	15,635,317	13,317,574	11,960,661	12,988,329	11,909,056	11,107,177	11,617,124
Plan Fiduciary Net Position, ending	<u>\$ 17,990,767</u>	<u>\$ 17,012,232</u>	<u>\$ 15,782,809</u>	<u>\$ 18,017,557</u>	<u>\$ 15,635,317</u>	<u>\$ 13,317,574</u>	<u>\$ 11,960,661</u>	<u>\$ 12,988,329</u>	<u>\$ 11,909,056</u>	<u>\$ 11,107,177</u>
Agency's Net Pension Liability	<u>\$ 2,000,200</u>	<u>\$ 2,676,975</u>	<u>\$ 3,142,763</u>	<u>\$ 691,029</u>	<u>\$ 1,947,436</u>	<u>\$ 2,522,410</u>	<u>\$ 2,937,727</u>	<u>\$ 1,793,073</u>	<u>\$ 2,412,223</u>	<u>\$ 2,844,234</u>
Plan Fiduciary Net Position as a percentage of the Total Pension Liability	90%	86%	83%	96%	89%	84%	80%	88%	83%	80%
Covered payroll	\$ 833,496	\$ 961,350	\$ 1,127,922	\$ 1,366,616	\$ 1,590,755	\$ 1,439,800	\$ 1,673,482	\$ 1,727,981	\$ 1,974,029	\$ 2,408,692
Agency's Net Pension Liability as a percentage of covered payroll	240%	278%	279%	51%	122%	175%	176%	104%	122%	118%

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

	<u>2025</u>	<u>2024</u>	<u>2023</u>	<u>2022</u>	<u>2021</u>	<u>2020</u>	<u>2019</u>	<u>2018</u>	<u>2017</u>	<u>2016</u>
Actuarially determined contributions	\$ 622,827	\$ 541,551	\$ 537,855	\$ 548,940	\$ 397,479	\$ 325,829	\$ 306,612	\$ 295,032	\$ 256,452	\$ 221,994
Contributions in relation to the actuarially determined contribution	<u>672,771</u>	<u>925,613</u>	<u>660,537</u>	<u>699,598</u>	<u>1,180,620</u>	<u>1,259,227</u>	<u>631,891</u>	<u>295,032</u>	<u>256,452</u>	<u>221,994</u>
Contribution deficiency (excess)	<u>\$ (49,944)</u>	<u>\$ (384,062)</u>	<u>\$ (122,682)</u>	<u>\$ (150,658)</u>	<u>\$ (783,141)</u>	<u>\$ (933,398)</u>	<u>\$ (325,279)</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>
Covered payroll	\$ 844,860	\$ 987,132	\$ 1,075,792	\$ 1,300,578	\$ 1,573,681	\$ 1,559,148	\$ 1,634,619	\$ 1,688,177	\$ 1,918,244	\$ 2,204,494
Contributions as a percentage of covered payroll	80%	94%	61%	54%	75%	81%	39%	17%	13%	10%

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTE TO REQUIRED SUPPLEMENTARY INFORMATION  
YEAR ENDED SEPTEMBER 30, 2025**

**NOTE 1 - DEFINED BENEFIT RETIREMENT PLAN**

Actuarial Assumptions

Actuarial valuation information relative to the determination of contributions:

Valuation date:	December 31, 2024
Measurement date:	December 31, 2024

Methods and assumptions used to determine contribution rates:

Actuarial cost method	Entry Age Normal
Amortization method	Level percentage of pay
Asset valuation method	5 year smoothing
Remaining amortization period	10 years
Investment rates of return	7.18% (net of investment expenses, including inflation)
Discount rate	7.18%
Salary rate increase	3.00% in the long-term plus merit and longevity
Inflation rate	2.50%
Mortality	Pub-2010 and fully generational MP-2021

Changes in Assumptions:

Plan Year

2024	Adopted the results of an experience study covering the period January 1, 2019 through December 31, 2023.
2023	Discount rate was lowered from 7.25% to 7.18%. Investment rate of return was lowered from 7.00% to 6.93%, net of administrative and investment expenses.
2021	Discount rate was lowered from 7.60% to 7.25%. Investment rate of return was lowered from 7.35% to 7.00%, net of administrative and investment expenses. Mortality rates were updated to be based on the Pub-2010 mortality tables.
2020	Increase in merit and longevity pay assumption.
2019	Salary increase was decreased from 3.75% to 3.00%. Discount rate was lowered from 8.00% to 7.60%. Investment rate of return was lowered from 7.75% to 7.35%, net of administrative and investment expenses. Adopted the results of an experience study covering the period January 1, 2014 through December 31, 2018.
2015	Mortality rates were updated to be based on the Pub-2014 group mortality tables. Salary increase was decreased from 4.50% to 3.75%. Discount rate was lowered from 8.25% to 8.00%. Investment rate of return was lowered from 8.00% to 7.75%, net of administrative and investment expenses.

Changes in Benefit Terms: There have been no changes in benefit terms for plan years presented.

**OTHER SUPPLEMENTARY INFORMATION**

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
 SUPPLEMENTAL SCHEDULE: FUNDED SERVICE CATEGORIES BY SOURCE (a)  
 AGING AND ADULT SERVICES AGENCY  
 YEAR ENDED SEPTEMBER 30, 2025**

EXPENDITURES	Title III-B	Title III-C1	Title III-C2	Title III-D
Care management	\$ 38,559	\$ -	\$ -	\$ -
Case coordination and support	7,000	-	-	-
Chore services	6,484	-	-	-
Home delivered meals	-	-	130,541	-
Homemaker	16,716	-	-	-
Personal care	1,875	-	-	-
Congregate meals	-	96,051	-	-
Assistive devices and technologies	-	-	-	-
Disease prevention and health promotion	-	-	-	11,361
Friendly reassurance	8,000	-	-	-
Gap filing/special needs (RSD)	3,153	-	-	-
Legal assistance	14,000	-	-	-
Medication management	-	-	-	-
Ombudsman	2,000	-	-	-
Program development	22,500	-	-	-
Transportation	22,600	-	-	-
Adult day services	-	-	-	-
Caregiver supplemental - transportation	-	-	-	-
Caregiver training	-	-	-	-
Respite care - In-home respite	-	-	-	-
Caregiver education	-	-	-	-
Caregiver information and assistance	-	-	-	-
Caregiver support groups	-	-	-	-
Other	-	-	-	-
Administration	12,869	17,844	12,036	-
<b>TOTAL EXPENDITURES</b>	<b>\$ 155,756</b>	<b>\$ 113,895</b>	<b>\$ 142,577</b>	<b>\$ 11,361</b>

(a) This schedule only includes Aging Services programs.

<u>Title III-E</u>	<u>NSIP</u>	<u>Targeted Care Management</u>	<u>Direct Care Workers</u>	<u>State Access</u>	<u>State In-Home</u>	<u>State Congregate Meals</u>
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
-	-	-	-	7,808	-	-
-	-	-	-	-	-	-
-	75,133	-	-	-	-	-
-	-	-	-	-	146,780	-
-	-	-	-	-	40,625	-
-	12,210	-	-	-	-	2,523
-	-	-	-	-	10,200	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	2,300	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
500	-	-	-	-	-	-
-	-	-	-	-	7,884	-
8,400	-	-	-	-	-	-
36,909	-	-	-	-	-	-
8,000	-	-	-	-	-	-
-	-	40,563	68,582	-	-	-
6,171	-	-	-	-	-	-
<u>\$ 59,980</u>	<u>\$ 87,343</u>	<u>\$ 40,563</u>	<u>\$ 68,582</u>	<u>\$ 7,808</u>	<u>\$ 207,789</u>	<u>\$ 2,523</u>

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY**  
**SUPPLEMENTAL SCHEDULE: FUNDED SERVICE CATEGORIES BY SOURCE (continued)**  
**AGING AND ADULT SERVICES AGENCY**  
**YEAR ENDED SEPTEMBER 30, 2025**

	State Home Delivered Meals	State Alternative Care	State Care Management	Merit Award Trust Fund Respite
EXPENDITURES				
Care management	\$ -	\$ -	\$ 80,228	\$ -
Case coordination and support	-	-	-	-
Chore services	-	-	-	-
Home delivered meals	125,176	-	-	-
Homemaker	-	25,237	-	-
Personal care	-	5,286	-	-
Congregate meals	-	-	-	-
Assistive devices and technologies	-	-	-	-
Disease prevention and health promotion	-	-	-	-
Friendly reassurance	-	-	-	-
Gap filing/special needs (RSD)	-	-	-	-
Legal assistance	-	-	-	-
Medication management	-	-	-	-
Ombudsman	-	-	-	-
Program development	-	-	-	-
Transportation	-	-	-	-
Adult day services	-	-	-	2,555
Caregiver supplemental - transportation	-	-	-	28,946
Caregiver training	-	-	-	-
Respite care - In-home respite	-	-	-	-
Caregiver education	-	-	-	-
Caregiver information and assistance	-	-	-	-
Caregiver support groups	-	-	-	-
Other	-	-	-	-
Administration	6,807	1,660	-	3,115
<b>TOTAL EXPENDITURES</b>	<b>\$ 131,983</b>	<b>\$ 32,183</b>	<b>\$ 80,228</b>	<b>\$ 34,616</b>

State CG Support	State Respite Care	State Aging New Services	Program Income	Cash Match	In-kind Match	Total
\$ -	\$ -	\$ 12,176	\$ -	\$ 11,100	\$ 16,015	\$ 158,078
-	-	-	-	1,925	-	16,733
-	-	-	341	799	-	7,624
-	-	-	91,054	36,420	-	458,324
-	-	-	27,567	8,481	500	225,281
-	-	-	2,415	2,477	-	52,678
-	-	-	49,620	9,074	2,100	171,578
-	-	-	-	-	300	10,500
-	-	-	-	1,477	-	12,838
-	-	-	-	520	-	8,520
-	-	-	-	389	-	3,542
-	-	-	170	2,092	-	16,262
-	-	-	-	299	200	2,799
-	-	-	-	2,437	-	4,437
-	-	-	-	2,000	1,500	26,000
-	-	-	4,745	58,359	-	85,704
-	-	-	-	209	-	2,764
-	-	-	224	85,114	-	114,284
-	-	-	-	65	-	565
3,887	30,394	-	2,728	4,210	-	49,103
-	-	-	-	1,092	-	9,492
-	-	-	-	-	5,000	41,909
-	-	-	-	1,040	-	9,040
-	-	-	-	-	-	109,145
384	-	-	-	-	-	60,886
<u>\$ 4,271</u>	<u>\$ 30,394</u>	<u>\$ 12,176</u>	<u>\$ 178,864</u>	<u>\$ 229,579</u>	<u>\$ 25,615</u>	<u>\$ 1,658,086</u>

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS  
YEAR ENDED SEPTEMBER 30, 2025**

Federal Grantor/Pass-through Grantor/Program Title	Assistance Listing Number	Pass-through Grantor Number	Expenditures
<b>U.S. DEPARTMENT OF AGRICULTURE</b>			
Passed through Michigan Department of Health and Human Services Special Supplemental Nutrition Program for Women, Infants, and Children	10.557 <sup>(a)</sup>		
FY 24-25 Resident Services		252MI003W1003	\$ 908,156
FY 24-25 Breastfeeding		232MI013W5003	16,363
FY 24-25 Breastfeeding		252MI003W1003	28,145
FY 24-25 Breastfeeding		242MI013W5003	<u>44,506</u>
TOTAL U.S. DEPARTMENT OF AGRICULTURE			<u>997,170</u>
<b>U.S. DEPARTMENT OF JUSTICE</b>			
Passed through Michigan Department of Health and Human Services Crime Victim Assistance FY 24-25 VOCA	16.575	15POVC23GG00424ASSI	<u>161,977</u>
TOTAL U.S. DEPARTMENT OF JUSTICE			<u>161,977</u>
<b>U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>			
Passed through Michigan Aging and Adult Services Agency Aging Cluster			
Title III-B Special Programs for the Aging (Grants for Supportive Services and Senior Centers)	93.044 <sup>(b)</sup>		
FY 24-25 Administration		N/A	12,869
FY 24-25 Regular		N/A	142,887
COVID-19 ARP for Supportive Services Title III-B		N/A	<u>3,051</u>
			<u>158,807</u>
Title III-C Special Programs for the Aging (Nutrition Services)	93.045 <sup>(b)</sup>		
FY 24-25 Administration		N/A	29,880
FY 24-25 Nutrition Congregate		N/A	96,051
FY 24-25 Nutrition Home Delivered Meals		N/A	130,541
COVID-19 ARP for Home Delivered Meals Title III		N/A	<u>611</u>
			<u>257,083</u>
Nutrition Services Incentive Program FY 24-25 Nutrition Services Incentive Program	93.053 <sup>(b)</sup>	N/A	<u>87,343</u>
Total Aging Cluster			<u>503,233</u>
Title III-D Special Programs for the Aging (Disease Prevention and Health Promotion Services)	93.043		
FY 24-25		N/A	11,361
COVID-19 ARP for Preventative Health		N/A	<u>1,124</u>
Total Special Services			<u>12,485</u>
National Family Caregiver Support FY 24-25 Administration FY 24-25 Regular	93.052	N/A N/A	6,171 <u>53,809</u>
			<u>59,980</u>

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS (continued)  
YEAR ENDED SEPTEMBER 30, 2025**

Federal Grantor/Pass-through Grantor/Program Title	Assistance Listing Number	Pass-Through Grantor Number	Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (continued)			
Passed through Michigan Department of Health and Human Services			
Public Health Emergency Preparedness	93.069		
FY 24-25 Public Health Emergency Preparedness		NU90TU000003	\$ 130,932
Project Grants and Cooperative Agreements for Tuberculosis Control Programs	93.116		
FY 24-25 Tuberculosis Control		NU52PS910290	124
FY 24-25 Tuberculosis Control		NU52PS910173	42
			<u>166</u>
Immunization Cooperative Agreements	93.268		
FY 24-25 Vaccine Supply		NH23IP922635	462,175
FY 24-25 Immunization Action Plan		NH23IP922724	18,844
FY 24-25 Immunization Action Plan		NH23IP922635	56,534
FY 24-25 Immunization Fixed Fees		NH23IP922724	4,100
FY 24-25 Immunization Fixed Fees		NH23IP922635	1,975
FY 24-25 COVID-19 COVID Immunization		NH23IP922635	44,051
			<u>587,679</u>
COVID-19 Epidemiology and Laboratory Capacity for Infectious Diseases	93.323		
COVID-19 Infection Prevention and Healthcare		NU51CK000362	39,927
COVID-19 Public Health Emergency Response - Coronavirus	93.354		
FY 24-25 COVID-19 Workforce Development		NU90TP922186	454
Medicaid Cluster			
Medical Assistance Program	93.778 <sup>(c)</sup>		
FY 24-25 Medicaid Outreach		2505MI5ADM	6,107
FY 24-25 CSHCS Medicaid Outreach		2605MI5ADM	34,365
FY 24-25 CSHCS Care Coordination <sup>(d)</sup>		2505MI5ADM	2,706
FY 24-25 CSHCS Care Coordination <sup>(e)</sup>		2505MI5MAP	7,529
FY 24-25 CSHCS Medicaid Elevated Blood Lead Case Management <sup>(e)</sup>		2505MI5MAP	1,448
FY 24-25 CSHCS Medicaid Elevated Blood Lead Case Management <sup>(e)</sup>		2605MI5MAP	290
FY 24-25 CSHCS Outreach and Advocacy <sup>(d)</sup>		2505MI5ADM	71,205
Total Medicaid Cluster			<u>123,650</u>
CDC's Collaboration with Academia to Strengthen Public Health	93.967		
FY 24-25 Public Health Infrastructure		NE110E000025	289,175
Preventative Health and Health Services Block Grant	93.991		
Local Health Department (LHD) Sharing Support		NB01PW000017	48,535
Local Health Department (LHD) Sharing Support 2		NB01PW000017	10,000
			<u>58,535</u>
Maternal and Child Health Services Block Grant to the States	93.994		
FY 24-25 CSHCS Care Coordination		B0454555	69,273
FY 24-25 MCH - Children		B0454555	37,764
FY 24-25 MCH - Children		B0452932	56,645
			<u>163,682</u>
Passed through Michigan Department of Health and Human Services and MMAP, Inc.			
State Health Insurance Assistance Program	93.324	90SAPG0090	8,473
TOTAL U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES			<u>1,978,371</u>
TOTAL FEDERAL AWARD EXPENDITURES			<u>\$ 3,137,518</u>

(f)

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**

**NOTE 1 - BASIS OF PRESENTATION**

The accompanying Schedule of Expenditures of Federal Awards (the "Schedule" includes the federal grant activity of the Branch-Hillsdale-St. Joseph Community Health Agency (the Agency) under programs of the federal government for the year ended September 30, 2025. The information in this schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the Agency, it is not intended to and does not present the financial position or changes in net position of the Branch-Hillsdale-St. Joseph Community Health Agency.

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

Expenditures reported on the Schedule are reported on the modified accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Negative amounts (if any) shown on the Schedule represent adjustments or credits made in the normal course of business to amounts reported as expenditures in prior years. Pass-through entity identifying numbers are presented where available. The Agency has elected to not use the 10-percent de minimis indirect cost rate allowed under the Uniform Guidance for awards executed on or before September 30, 2024, and also has not elected to use the 15-percent de minimis indirect cost rate allowed under Uniform Guidance for awards executed on or after October 1, 2024.

**NOTE 3 - SUBRECIPIENTS**

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

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

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

- (a) Denotes program tested as "major program".
- (b) Denotes programs required to be clustered by United States Department of Health and Human Services.
- (c) Denotes programs required to be clustered by United States Department of Health and Human Services.
- (d) Reimbursements of this contract are passed through the State. The amount reported on the Schedule of Expenditures of Federal Awards represents the portion of the grant that is considered federal. Federal participation in this program is 50%.
- (e) Reimbursements of this contract are passed through the State. The amount reported on the Schedule of Expenditures of Federal Awards represents the portion of the grant that is considered federal. Federal participation in this program is 65.30%.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**

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

(f) The following reconciles the federal revenues reported in the September 30, 2025, financial statements to the expenditures of the Agency administered federal programs reported on the Schedule of Expenditures of Federal Awards (SEFA):

Federal/State Revenue (per fund financial statements)	\$ 7,051,187
Plus: Difference between vaccines administered (revenue per financial statements) and vaccines received (expenditures per SEFA and instructions from grantor agency)	11,744
Less: Portions of grant funding considered "State" funding	<u>(3,925,413)</u>
Federal award expenditures	<u><u>\$ 3,137,518</u></u>



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

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

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the governmental activities and the major fund of the Branch-Hillsdale-St. Joseph Community Health Agency (the Agency), as of and for the year ended September 30, 2025, and the related notes to the financial statements, which collectively comprise the Agency's basic financial statements and have issued our report thereon dated March 6, 2026.

**Internal Control Over Financial Reporting**

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

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

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

## **Compliance and Other Matters**

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

## **Purpose of this Report**

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

*Maney Costeiran PC*

Lansing, Michigan  
March 6, 2026



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

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

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

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

We have audited the Branch-Hillsdale-St. Joseph Community Health Agency's (the Agency) compliance with the types of compliance requirements described in the OMB *Compliance Supplement* that could have a direct and material effect on the Agency's major federal program for the year ended September 30, 2025. The Agency's major federal program is identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, the Branch-Hillsdale-St. Joseph Community Health Agency complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended September 30, 2025.

***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; 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* (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 the Agency 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 the Agency'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 Agency's federal programs.

## ***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 the Agency'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 generally accepted auditing standards, *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 the Agency's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with generally accepted auditing standards, *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 the Agency'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 the Agency'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 the Agency'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 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.

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.

*Maney Costeiran PC*

Lansing, Michigan  
March 6, 2026

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
SCHEDULE OF FINDINGS AND QUESTIONED COSTS  
YEAR ENDED SEPTEMBER 30, 2025**

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

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**Financial Statements**

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

*Unmodified*

Internal control over financial reporting:

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

Noncompliance material to financial statements noted?  Yes  No

**Federal Awards**

Internal control over major programs:

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

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

Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?  Yes  No

Identification of major programs:

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

Dollar threshold used to distinguish between Type A and Type B programs: \$ 1,000,000

Auditee qualified as low-risk auditee?  Yes  No

**Section II - Financial Statement Findings**

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None noted.

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

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None noted.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY  
SUMMARY SCHEDULE OF PRIOR YEAR AUDIT FINDINGS  
YEAR ENDED SEPTEMBER 30, 2025**

FINDINGS/COMPLIANCE

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

No prior audit findings noted.

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

No prior audit findings noted.

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

No prior audit findings noted.

**Health Officer's Report to the Board of Health for March 26, 2026**  
**Prepared by: Rebecca A. Burns, M.P.H., R.S.**

**Agency Updates**

**FY2025 Audit Presentation:** Dane Porter will be at the meeting to present on the FY 25 audit.

**Michigan Local Public Health Accreditation:** The agency welcomed our accreditors the week of March 2<sup>nd</sup>. This marked the 9<sup>th</sup> cycle of Michigan Accreditation of local health departments. Each accredited program has several indicators or minimum program requirements (MPR's) that the state program staff evaluate to determine compliance. An indicator receives one of 3 ratings; Met, Met with Conditions, or Not Met. Overall the review went very well. There were two Not Mets in both the immunization program and on-site wastewater program. All other programs reviewed received all Mets, there was one Met with Conditions in the food program and one Met with Conditions in immunizations. Any indicators that received a Not Met will need to have written plan for correction that is accepted by the auditors and then implemented here. After a period of implementation, our staff will review to determine if the correction fixed the problem and submit that information to the auditors. Once we have corrected the Not Met indicator then our accreditation can move forward for formal recognition. A Met with Conditions also requires that staff make a correction in advance of the next accreditation cycle. If the same indicator is found to have a Met with Conditions during the next cycle, then the indicator is a Not Met.

We will be receiving a report that I will share with you. It is not ready for us yet.

**Website Redesign Request for Bids:** The agency received two bids for the website redesign. The finance committee reviewed the bids and has recommended one of those bids for approval at the meeting today.

**Employee Recognition:** Today we recognize our staff who have completed milestones in service.

**FY2025 Annual Report:** The Annual Report is for your review and acceptance today.

**Community Health Improvement/Strategic Plan:** This project is continuing to move forward.

**Staffing Update:** Current openings include; Immunization/Clinic Clerk part-time for St. Joseph County, Outreach Specialist for AAA 3C in Coldwater, and an Environmental Health Sanitarian in St. Joseph County. EH Sanitarian, Lee Zimmerman is retiring and we wish him well in his next adventure!

**BHSJCHA Mobile Unit On the Road:** We continue to offer services in Waldron and Litchfield. Bringing the mobile unit over to Three Rivers is under consideration.

**Agency Response to Tornadoes:** I'm proud of our team that worked to reach out to clients affected by the tornadoes replacing formula lost to the storms for WIC clients and reissuing benefit cards. I'm proud

of our team that stayed after the tornado in Three Rivers to ensure the building was secure and vaccine moved. I'm proud of those team members who helped with tornado clean-up and relief efforts. And this while several of them were dealing with living through the tornado in Three Rivers or losing their home on Union Lake, or dealing with damage to their home in Three Rivers, or recovering from the loss of their vehicle that was in the tornado. We have an amazing team. I feel blessed to lead them.

**Coldwater Office:** Nothing at this time.

**Hillsdale Office:** The contractor has indicated he will start on the HVAC project April 20<sup>th</sup>.

**Sturgis:** We have increased the cleaning schedule for the space in Sturgis to take into account the daily usage of this location.

**Three Rivers Office:** The tornado hit our building on Friday, March 6<sup>th</sup> at approximately 3:55 pm causing extensive damage to the West end of the building. Upon the advice of our insurance agent, MMRMA, we contacted VanDam & Krusinga who sent a crew down that evening to secure the building. Although they weren't able to get tarps over the area without a roof that evening due to the wind and rain storm that moved in, they were back on Saturday and again on Sunday to address immediate mitigation. The adjuster was out on Sunday, March 8<sup>th</sup>. The structural engineer inspected on Wednesday, March 11<sup>th</sup>. Theresa and I met with our MMRMA Property Claims Manager on Friday, March 13<sup>th</sup>. The agency is waiting for MMRMA to receive the structural engineer's report which will define the next steps for rebuilding.

MDHHS offered a small office located in their lobby for our use to take Environmental Health applications. And we opened that office to the public on Tuesday, March 17<sup>th</sup> with hours open to the public from 11 am to 3 pm Monday through Friday.

The agency is in need of temporary office space while the building is rebuilt. I am continuing to make contacts and look. Displaced staff are working remotely, reporting to Sturgis and/or Coldwater, or Centreville at this time. I anxiously await the structural engineers report so we can continue to move toward rebuilding and reoccupying our 1110 Hill St location.

## **MEDICAL DIRECTOR'S REPORT**

**March 2026**

1. Watching numbers of communicable diseases and respiratory illnesses.
2. Director and Administrator meetings, in person and zoom.
3. Meetings via zoom and teleconference with several associations.
4. Continuing treatment of multiple patients.
5. Continued telephone conversations with area providers.
6. Attended Day at the Capitol on March 18th.
7. Vaccination and Tuberculosis subcommittees for the Michigan Association of Public Health and Preventive Medicine Physicians.
8. Continuous review of policies.

## RECAP OF DAY AT THE CAPITOL

**MARCH 18, 2026**

A MALPH (Michigan Association for Local Public Health) event. MALPH presents speaking points.

This year they gave 3 budget priorities:

1. Essential Local Public Health Services - \$6.5M Inflation Adjustment
2. Children's Special Health Care Services (CSHCS) - \$7.3M Increase
3. Lead Screening and Prevention - \$10M to fund program

Two Policy Priorities:

1. Tobacco Retail Licensing and Youth Access Prevention
2. Updating Michigan's Food Law

We met with Representative Wortz, Representative Carra, Senator Bellino and Senator Lindsey.

We also had a Home Town Hero award recipient.



## Day at the Capitol 2026 Speaking Points

### Budget Priorities

#### Essential Local Public Health Services – \$6.5M Inflation Adjustment

- Michigan invested **\$75M in essential local public health services in 2023**, but inflation has reduced the real value of that investment.
  - Maintaining the same purchasing power in 2026 would require **about \$81.5M**, meaning a **\$6.5M adjustment simply preserves existing services**, not expansion.
  - Without an inflation adjustment, **local health departments effectively face a funding cut**, forcing reductions in staffing, prevention programs, or emergency preparedness.
  - Stable, predictable funding supports **disease prevention, environmental health, maternal and child health, and emergency response statewide**.
- 

#### Children's Special Health Care Services (CSHCS) – \$7.3M Increase

- **Enrollment has grown more than 70%** (29,680 children in 2012 to over 51,000 in 2025), while funding has not kept pace.
  - Current base funding of **\$6.7M falls far short** of the estimated **\$14M needed to sustain services** when enrollment growth and labor costs are considered.
  - Underfunding leads to high caseloads, staffing shortages, and delays for families navigating complex medical care systems.
  - Increasing funding would **stabilize staffing, improve access to care coordination, and support families of children with complex medical needs**.
  - Strong care coordination **reduces costly hospitalizations and complications**, making this a **cost-effective investment**.
- 

#### Lead Screening and Prevention – \$10M to fund program

- The **2025 universal lead screening mandate expanded testing statewide** but did not include funding for local health departments and labs.
- Follow-up work — case management, family outreach, and environmental investigations — is **labor-intensive and cannot be automated**.
- Increased testing volume leads to **lab capacity pressures, delayed turnaround times, and limited local response capacity**.
- Investment ensures **test results lead to timely intervention that protects children from permanent harm**.



# Day at the Capitol 2026

## Speaking Points

### Policy Priorities

#### Tobacco Retail Licensing and Youth Access Prevention

- Tobacco remains **the leading cause of preventable death in Michigan**, and youth initiation drives lifelong addiction and health costs.
  - Retail licensing is a proven strategy to **reduce youth access by creating clear rules and accountability for retailers**.
  - Licensing allows enforcement tools such as **suspension or revocation for repeat violations**, not just fines.
  - It gives communities authority to **address retailer density near schools and enforce youth access laws effectively**.
  - A statewide system would **improve tracking and enforcement of tobacco sales**, which is currently inconsistent in Michigan.
- 

#### Updating Michigan's Food Law

- Michigan's current framework is based largely on the **2009 FDA Food Code**, while the FDA has issued updated versions in **2013, 2017, and 2022**.
- Updating state law would **align Michigan with modern food safety science and national standards**.
- The update would improve **consistency in inspections and regulations across food establishments**.
- Modernizing the law helps regulators and the food industry **adapt to evolving food preparation practices and technologies**.
- The goal is **stronger food safety protections and a regulatory framework that reflects current public health best practices**.

***Included in This Month's Report:***

- 1. HEP Update**
- 2. Community Health Worker (CHW) Update**
- 3. Community Events**
- 4. Social Media Update**

**1. Health Education & Promotion Department Update:**

Staff have begun working on the Lock It Up campaign. Safe Storage devices have just arrived and we will begin distribution with our 29 partners by next week. This year's campaign will also include educational videos for social media, radio, and streaming advertising.

Our fiscal year 2026-27 OHSP grant has been submitted. We will receive notification of our award in the summer. Meetings with the Bishops in the community continue. We are currently completing follow up surveys with the communities we worked with last year, and initial surveys in Waldron/Osseo, Reading, and Quincy areas. We continue planning for our presentation at the Michigan Drivers Education Teachers Association's annual meeting on April 18<sup>th</sup>. We will also be providing presentations to several civic groups in April. Starting in May, we will have a short educational video in the Secretary of State offices in the three counties.

The Health Education & Promotion team has been working on the Hillsdale County Opioid Committee's asset mapping project for substance use services. A survey tool has been sent to agencies who provide substance use services to residents of Hillsdale County and several have already responded.

Accreditation went well for the department as a part of the Powers and Duties section. The review team had no concerns regarding Health Education and Promotion requirements.

The department continues to prepare the annual All Staff Meeting on April 24<sup>th</sup>. We continue our collaboration work across the three counties including Substance Abuse Task Forces, Child Abuse Prevention, Human Services Networks, Better Birth Outcomes, and Transportation.

There were 12 media stories in since the last Board of Health meeting that mentioned the agency. We issued 2 press releases since the last Board of Health meeting.

**2. Community Health Worker Program:**

Lisa Redmond is currently on a medical leave. Rachel Baker continues to serve clients at Covered Bridge Healthcare and the Three Rivers office. We thank our partners at Covered Bridge Healthcare for providing Rachel space to use while we await repairs to the Three Rivers office. The program served 13 clients in February. The program continues to receive referrals from multiple agencies across the jurisdiction.

The greatest needs requested were assistance with MDHHS Services applications (Medicaid, Food Assistance, and State Emergency Relief), Community Partner resources (domestic violence and housing), Social Security applications for retirement and disability, and homelessness.

**3. Community Events:**

We have supported, participated, or will be participating in the following events:

<b>Date</b>	<b>Event</b>
2/7	Bishops Meeting – Branch County
2/13	Friendship Fridays – St. Joseph County
2/23	Coach Eby Center – Branch County
2/24	STI Lesson – St. Joseph County
2/28	Coach Eby Center – Branch County
3/2-3/6	Accreditation
3/4	Bishops Meeting – Hillsdale County
3/13	Friendship Friday – St. Joseph County
3/18	Day at the Capital
3/19	Amish Safety Meeting – St. Joseph County
3/20	Multi Agency Resource Center – Branch County
3/21	Multi Agency Resource Center – St. Joseph County
3/23	Coach Eby Center – Branch County
3/24	OHSP Presentation to Noon Club – Branch County
4/2	Presentation for Exchange Club – St. Joseph County
4/9	Spring Fling – Hillsdale County
4/10	Friendship Friday – St. Joseph County
4/13	King’s Kupboard – Hillsdale County
4/16	Presentation to Sunrise Rotary – Branch County
4/18	Presentation to Michigan Drivers Education Instructor’s Conference – Statewide
4/23	Presentation to Rotary – St. Joseph County
4/24	Agency All Staff Meeting
4/27	Coach Eby Dinner – Branch County
4/30	Human Resources Roundtable – St. Joseph County

**Social Media Update**

Social Media continues to spread our message to the community. In January, we covered the following topics:

<p><b>Media Topics for February:</b></p> <ul style="list-style-type: none"> <li>• Heart Month</li> <li>• New WIC Food Package</li> <li>• National Condom Week (February 14th-21st)</li> <li>• Low Vision Month</li> <li>• Black History Month</li> <li>• Winter Safety</li> <li>• CSHCS- Family Center Classes</li> <li>• SWMPQIC- Free Virtual Classes</li> <li>• STI testing</li> <li>• "Take Control" Supplies</li> </ul>	<ul style="list-style-type: none"> <li>• WIC Mobile Clinics</li> <li>• Warming Centers</li> <li>• OHSP- Buggy Safety</li> <li>• BHSJ Job Postings</li> <li>• Canned Food Month (food safety)</li> <li>• Children’s Dental Health Month-Promote My Community Dental Centers</li> <li>• MDHHS Safe Sleep Toolkit</li> <li>• WIC Monthly Social Media Toolkit</li> <li>• Medicaid Navigation Assistance</li> </ul>
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**Social Media Data (As of March 1st, 2026)**

	# of Followers (Facebook & Instagram)	Instagram Reach (Amount a post is viewed, commented on, shared, etc.)	Facebook Reach (Amount a post is viewed, commented on, shared, etc.)	Video (# and Topic)	Agency Mentions in Local Media (radio stations, local newspaper/digital articles, etc.)	Boosted Activities (# and Topic)
<b>February</b>	4,465	2,570 <i>(Up 420% from January)</i>	38,905 <i>(Down 31% from January)</i>	Videos shared (4): Super Bowl Food Safety, NHTSA-Recalls, Narcan, Heart Healthy Tips	6	1- National Condom Week (2/14-2/21)
<b>TOTAL TO DATE (Since 10/1/2022)</b>	<b>4 NEW followers since last report</b>	23,472	1,134,420	75	528	36

**Branch-Hillsdale-St. Joseph Community Health Agency**  
**Environmental Public Health Services**  
**Report for the March 26, 2026 Board of Health Meeting**  
**Prepared by Joseph Frazier R.E.H.S. , Director of Environmental Health**

**Food Program Updates**

At the beginning of March, our food division hosted MDARD staff for our accreditation review. This review included a thorough evaluation of the Minimum Program Requirements (MPRs) from 2023 through the end of 2025, as well as a field component in which our food inspection staff conducted inspections alongside MDARD staff and were evaluated against FDA standards.

Of the 14 MPRs, our food division received 13 “Met” and 1 “Met with Conditions.” For a program that has endured an ever-changing retail food landscape and supervisory transitions, this is a job well done. As with any evaluation, there are always areas for improvement, and we have a strong team ready to take that on.

Across the Tri-County area, several local food facilities have recently opened to the public:

- Domino’s – Jonesville
- Caddie Cones – Three Rivers
- El Cerrito Mexican Bar & Grill – Quincy
- Bronson Nutrition – Bronson
- Designyer Donut & Coffee – Sturgis
- Flor de Agave Restaurant – Three Rivers

**Wells, Septic, Pools, Vector, and Campgrounds**

Also in early March, our onsite septage program met with EGLE staff for its portion of the accreditation review. EGLE staff spent two days in our Coldwater office reviewing permits and procedures from 2023 through 2025 across nine different MPRs.

At the conclusion of the evaluation, our onsite program received 7 “Met” and 2 “Not Met” ratings. This evaluation will help guide our growth as we continue to implement new policies and train staff. We have already begun putting new procedures in place to address the issues identified by EGLE during the review.

I would also like to welcome Alivia Karamatic to the Environmental Health team. Alivia will be based in our Coldwater office and will be working in the non-community water supply program.

## EH Service Statistics Report

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

ENVIRONMENTAL HEALTH SERVICE REPORT

2025/2026

	FEBRUARY				YTD 2025/2026				YTD 2024/2025			
	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL
<b>WELL/SEWAGE SYSTEM EVAL.</b>	-	-	-	-	3	4	2	9	-	5	9	14
<b>CHANGE OF USE EVALUATIONS - FIELD</b>	1	2	-	3	7	16	14	37	11	16	21	48
<b>CHANGE OF USE EVALUATIONS - OFFICE</b>	2	-	3	5	13	14	32	59	17	10	30	57
<b>ON-SITE SEWAGE DISPOSAL</b>												
PERMITS NEW CONSTRUCTION ISSUED	2	3	2	7	13	25	24	62	28	36	42	106
REPAIR/REPLACEMENT ISSUED	1	2	2	5	16	15	35	66	18	17	37	72
VACANT LAND EVALUATION	-	1	-	1	3	4	8	15	4	7	3	14
PERMITS DENIED	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL	3	6	4	13	32	44	67	143	50	60	82	192
<b>SEWAGE PERMITS INSPECTED</b>	-	2	2	4	38	38	53	129	30	31	59	120
<b>WELL PERMITS ISSUED</b>	4	14	6	24	54	66	71	191	61	55	82	198
<b>WELL PERMITS INSPECTED</b>	2	13	5	20	59	102	69	230	73	56	89	218
<b>FOOD SERVICE INSPECTION</b>												
PERMANENT	18	15	24	57	93	107	155	355	111	123	162	396
NEW OWNER / NEW ESTABLISHMENT	2	1	3	6	10	3	10	23	4	2	10	16
FOLLOW-UP INSPECTION	-	-	1	1	4	3	5	12	2	4	6	12
TEMPORARY	-	-	2	2	8	4	17	29	8	4	11	23
STFU/MOBILE	2	-	2	4	13	7	25	45	5	7	18	30
PLAN REVIEW APPLICATIONS				-	1	4	3	8	3	2	2	7
FOOD COMPLAINTS RECEIVED	3	1	2	6	10	3	8	21	3	-	6	9
FOODBORNE ILLNESS INVESTIGATED	1	-	-	1	2	-	-	2	-	-	1	1
<b>FOOD CLASSES</b>												
MANAGEMENT CERTIFICATION CLASS	-	-	-	-	-	-	-	5	-	5	5	10
				-				-				-
				-				-				-
				-				-				-
<b>CAMPGROUND INSPECTION</b>	-	-	-	-	-	-	-	-	-	-	-	-
<b>NON-COMM WATER SUPPLY INSP.</b>				-	3	12	13	38	4	9	15	28
<b>SWIMMING POOL INSPECTION</b>	-	-	-	-	7	3	6	16	9	5	4	18
<b>PROPOSED SUBDIVISION REVIEW</b>	-	-	-	-	-	-	-	-	-	-	-	-
<b>SEPTIC TANK CLEANER</b>	-	-	-	-	-	-	-	-	6	-	-	6
<b>DHS LICENSED FACILITY INSP.</b>	-	1	-	1	3	13	12	28	6	12	12	30
<b>COMPLAINT INVESTIGATIONS</b>	-	5	-	5	8	24	7	39	7	6	7	20
<b>LONG TERM MONITORING</b>	3	1	6	10	3	1	6	10	-	-	-	-
<b>BODY ART FACILITY INSPECTIONS</b>	-	1	-	1	-	1	7	8	-	5	3	8



570 Marshall Road  
Coldwater, MI 49036  
(517) 279 - 9561 ext. 106

20 Care Drive  
Hillsdale, MI 49242  
(517) 437 - 7395 ext. 311

1110 Hill Street  
Three Rivers, MI 49093  
(269) 273 - 2161 ext. 233

## Inspection Type Count By County

For Date Range: 02/01/2026 - 02/28/2026

County	Inspection Type / Reason	Count
<b>Branch County</b>		
<u>Food Safety</u>		
	Consultation - Plan Review Consultation	1
	Foodborne Illness Complaint - Initial	1
	Non Foodborne Illness Complaint - Initial	3
	Pre-Opening - Pre-Opening	2
	Risk Based Inspection - Routine	18
	STFU Inspection - Routine	2
	<b>Total # of Food Safety inspections - Branch County</b>	<b>27</b>
<b>Hillsdale County</b>		
<u>Food Safety</u>		
	Consultation - Plan Review Consultation	1
	Non Foodborne Illness Complaint - Initial	1
	Pre-Opening - Pre-Opening	1
	Risk Based Inspection - Routine	15
	<b>Total # of Food Safety inspections - Hillsdale County</b>	<b>18</b>
<b>St. Joseph County</b>		
<u>Food Safety</u>		
	Non Foodborne Illness Complaint - Initial	2
	Pre-Opening - Pre-Opening	3
	Risk Based Inspection - Follow-up	1
	Risk Based Inspection - Routine	24

## Inspection Type Count By County

For Date Range: 02/01/2026 - 02/28/2026

County	Inspection Type / Reason	Count
	STFU Inspection - Routine	2
	Temporary Food Inspection - Routine	2
	<b>Total # of Food Safety inspections - St. Joseph County</b>	<b>34</b>
	<u><b>Total # of inspections - All counties</b></u>	<u><b>79</b></u>



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## Food Establishment Inspection Report by Facility Name

For Date Range: 02/01/2026 - 02/28/2026 and Food Program

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Amish Goodie Shop	Quincy	02/09/2026	STFU Inspection - Routine	0	0	0	0
ARBY'S #7394	HILLSDALE	02/06/2026	Risk Based Inspection - Routine	0	0	0	0
Biggby Coffee	Three Rivers	02/05/2026	Risk Based Inspection - Routine	0	0	0	0
Biggby Coffee	Three Rivers	02/27/2026	Non Foodborne Illness Complaint - Initial	0	0	0	1
Biggby Coffee #494	White Pigeon	02/13/2026	Risk Based Inspection - Routine	0	0	0	1
Bills Steakhouse	Bronson	02/25/2026	Risk Based Inspection - Routine	1	0	1	1
Branch ISD Bronson Head Start	Bronson	02/19/2026	Risk Based Inspection - Routine	0	0	0	0
Branch ISD Girard Head Start	Coldwater	02/18/2026	Risk Based Inspection - Routine	0	0	0	0
Bronson KC Club Inc	Bronson	02/24/2026	Risk Based Inspection - Routine	0	0	0	0
Bronson Nutrition	Bronson	02/09/2026	Pre-Opening - Pre-Opening	0	0	0	1
BUNDY HILL DINER LLC	Jerome	02/19/2026	Risk Based Inspection - Routine	0	0	0	0
Burger King #1419	Hillsdale	03/02/2026	Risk Based Inspection - Routine	0	0	0	0
BURR OAK GRANGE #1350	Burr Oak	02/19/2026	Risk Based Inspection - Routine	0	0	0	1
Caddie Cones	Three Rivers	02/02/2026	Pre-Opening - Pre-Opening	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Cedars Lebanese Grill	Coldwater	02/26/2026	Non Foodborne Illness Complaint - Initial	0	0	0	0
Centreville United Methodist Church	Centreville	02/12/2026	Risk Based Inspection - Routine	0	0	0	0
CHECKER RECORDS	HILLSDALE	02/23/2026	Risk Based Inspection - Routine	0	0	0	0
China 1	Coldwater	02/02/2026	Non Foodborne Illness Complaint - Initial	0	0	0	0
China 1	Coldwater	02/03/2026	Risk Based Inspection - Routine	1	0	1	4
Coach Eby Youth & Family Center	Coldwater	02/05/2026	Risk Based Inspection - Routine	0	0	0	0
Coldwater Hampton Inn - Food	Coldwater	02/05/2026	Risk Based Inspection - Routine	0	0	0	0
Coldwater High School	Coldwater	02/27/2026	Non Foodborne Illness Complaint - Initial	0	0	0	0
Cowboy Up	Mendon	02/12/2026	Risk Based Inspection - Routine	1	0	1	1
Cronkhite Beverage Catering	Coldwater	02/23/2026	STFU Inspection - Routine	0	0	0	0
Culver's of Three Rivers	Three Rivers	02/10/2026	Risk Based Inspection - Routine	0	0	0	0
Designyer Donut & Coffee LLC DBA Foltz	Sturgis	02/09/2026	Pre-Opening - Pre-Opening	0	0	0	0
Domino's 1228	Jonesville	02/02/2026	Pre-Opening - Pre-Opening	0	0	0	1
Doyle Community Center	Sturgis	02/06/2026	Temporary Food Inspection - Routine	0	0	0	0
El Cerrito Mexican Bar & Grill	Quincy	02/03/2026	Pre-Opening - Pre-Opening	0	0	0	0
El Sabor de Mi Pueblo	Sturgis	02/17/2026	STFU Inspection - Routine	0	0	0	1
El Taco Loco	Sturgis	02/04/2026	Risk Based Inspection - Routine	2	2	4	1
El Taco Loco	Sturgis	02/25/2026	Risk Based Inspection - Follow-up	0	0	0	0
Elks Lodge	Coldwater	02/17/2026	Risk Based Inspection - Routine	0	0	0	0
Emmanuel Global Methodist Church	Union City	02/18/2026	Risk Based Inspection - Routine	0	0	0	0
Farrand Hall Bakery	Colon	02/12/2026	Risk Based Inspection - Routine	0	1	0	0
First Congregational	Bronson	02/25/2026	Risk Based Inspection - Routine	0	0	0	0
First Congregational Church	Union City	02/18/2026	Risk Based Inspection - Routine	0	0	0	0
Flor de Agave Restaurant	Three Rivers	02/18/2026	Pre-Opening - Pre-Opening	0	0	0	0
FMC of Bronson	Bronson	02/25/2026	Risk Based Inspection - Routine	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Holiday Inn Express	Coldwater	02/05/2026	Risk Based Inspection - Routine	0	0	0	0
JILLY BEANS	Hillsdale	02/23/2026	Risk Based Inspection - Routine	0	1	1	0
Kimball Camp Outdoor Center	Reading	02/09/2026	Risk Based Inspection - Routine	0	0	0	0
La Michoacana Ice Cream	Sturgis	02/10/2026	Risk Based Inspection - Routine	0	1	1	0
La Palma	Sturgis	02/12/2026	Risk Based Inspection - Routine	0	2	2	1
LAKE LEANN GOLF COURSE	Jerome	02/19/2026	Risk Based Inspection - Routine	0	0	0	0
Lake View Church	Camden	02/03/2026	Risk Based Inspection - Routine	0	0	0	0
LIFESONG COMMUNITY CHURCH	OSSEO	02/11/2026	Risk Based Inspection - Routine	0	0	0	0
Little Caesars - Sturgis	Sturgis	02/03/2026	Risk Based Inspection - Routine	0	2	2	0
Little Caesars - Three Rivers	Three Rivers	02/18/2026	Risk Based Inspection - Routine	0	0	0	4
Los Tequilas	Coldwater	02/11/2026	Risk Based Inspection - Routine	0	1	1	1
MAMMA MIA'S PIZZA	Burr Oak	02/20/2026	Risk Based Inspection - Routine	0	2	2	1
MARIA'S	Sturgis	02/12/2026	Risk Based Inspection - Routine	1	0	1	2
McDonald's - Bronson Store 18846	Bronson	02/24/2026	Risk Based Inspection - Routine	0	0	0	0
McDonald's of White Pigeon	White Pigeon	02/11/2026	Risk Based Inspection - Routine	0	0	0	0
MCDONALD'S-JONESVILLE	Jonesville	02/19/2026	Risk Based Inspection - Routine	0	1	0	0
MR. B'S DAIRY BAR	THREE RIVERS	02/05/2026	Risk Based Inspection - Routine	0	1	0	1
Pansophia Academy	Coldwater	02/23/2026	Risk Based Inspection - Routine	0	0	0	0
Paradiso Wine Bar / Inferno Cigar Lounge	Hillsdale	02/11/2026	Consultation - Plan Review Consultation	1	0	1	0
PREMIERE THEATRE/UNITED ENTERTAINMENT	Hillsdale	02/12/2026	Risk Based Inspection - Routine	0	0	0	0
Roots Prairie Lake Tavern LLC		02/11/2026	Risk Based Inspection - Routine	1	1	1	1
Salem Church	Waldron	02/04/2026	Risk Based Inspection - Routine	0	0	0	0
Spangler's Stockyard Restaurant	Hillsdale	03/02/2026	Risk Based Inspection - Routine	0	0	0	0
ST PAUL'S LUTHERAN CHURCH	HILLSDALE	02/03/2026	Risk Based Inspection - Routine	0	0	0	0
St. John's Lutheran Church	Burr Oak	02/19/2026	Risk Based Inspection - Routine	0	0	0	0
STURGIS HOSPITAL	Sturgis	02/25/2026	Risk Based Inspection - Routine	0	0	0	0

<b>Name</b>	<b>Location</b>	<b>Date</b>	<b>Inspection Type/Reason</b>	<b># of P</b>	<b># of Pf</b>	<b>CDI</b>	<b># of C</b>
Subway 34903	STURGIS	02/25/2026	Non Foodborne Illness Complaint - Initial	0	0	0	1
Taco Bell #37166	Hillsdale	02/27/2026	Non Foodborne Illness Complaint - Initial	0	0	0	0
Taqueria El Cunado	Constantine	02/17/2026	STFU Inspection - Routine	0	0	0	0
Taqueria El Texano LLC	Camden	02/04/2026	Risk Based Inspection - Routine	0	1	0	0
Taqueria El Texano LLC	Three Rivers	02/10/2026	Risk Based Inspection - Routine	0	0	0	0
Tasteful Kreations Catering	Bronson	02/27/2026	Consultation - Plan Review Consultation	0	0	0	0
The Chicken Shack of Constantine LLC	Constantine	02/13/2026	Risk Based Inspection - Routine	0	0	0	1
Three Rivers DDA	Three Rivers	02/09/2026	Temporary Food Inspection - Routine	0	0	0	0
Three Rivers Health (Food)	Three Rivers	02/09/2026	Risk Based Inspection - Routine	0	0	0	3
Tip Up Island	Quincy	02/18/2026	Risk Based Inspection - Routine	0	0	0	0
Trainwreck Grill & Ale	Coldwater	02/05/2026	Foodborne Illness Complaint - Initial	0	0	0	0
Trainwreck Grill & Ale	Coldwater	02/05/2026	Risk Based Inspection - Routine	0	1	1	3
Viking Cafe	Centreville	02/13/2026	Risk Based Inspection - Routine	0	0	0	0
Wendy's Properties LLC	Three Rivers	02/18/2026	Risk Based Inspection - Routine	0	0	0	1
				<b>8</b>	<b>17</b>	<b>20</b>	<b>33</b>

## Food Inspection Codes

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

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

C- This is a core violation. This is an item that usually relates to general sanitation, operation controls and maintenance of facilities and equipment. Not cleaning floors is an example of a core violation.

CDI- This indicates a violation was observed during the inspection and was brought to the attention of the person in charge. At that time, the violation was corrected while the inspector was present at the facility.



## Updates:

### 1. Services to Victims of Elder Abuse Program Updates:

- Victim Specialists continue their work directly serving individuals in our communities, collaborating and developing community partners & leading monthly IDT meetings.
- March 19th "Contract Review" with the Michigan Division of Victim Services – to be shared at BOH meeting
- Staff continue to work on details for the "Elder Justice Symposium" event at the St. Joseph County Sheriff's Office - Training Center in Centreville on September 17<sup>th</sup>.

### 2. FY2026 Budget Update: A federal "Notice of Award" is anticipated very soon, indicating full-year funding awards based on the budget agreement made in late January. We anticipate continuation level funding.

### 3. Staffing Update:

We are in the process of on-boarding a new full-time Outreach Specialist... more details soon!

### 4. MI Options Updates:

Our team remains busy with calls, walk-ins and referrals for both Medicare Counseling and Options Counseling.

Senior Medicare Patrol (SMP): We were awarded a reduced funding amount due to the number of proposals submitted across the state. Our grant budget and work plan were revised to reflect the changes... Awaiting more details on implementation.

### 5. Storm Recovery and Support

- Our RN and Social Work Care Consultants & Victim Specialists made prompt contact with all participants and/or their emergency contacts who live in and around Three Rivers and Union City.
- We have received an increase in calls and referrals for the victim assistance program.
- I connected with the UC Senior Center Director a few days after the event. Our team participated in the Union City Multi-Agency Resource event on 3/20/26. These communities are truly amazing at supporting one another!

### 6. Direct Care Worker – HELP Program

- Our original pass-through mini-grant will end March 31<sup>st</sup> but there's another round of funding becoming available through the AAA Association of MI. We don't have a formal dollar amount at this time but would like to keep moving forward to support emergent needs of direct care workers employed through our home care agencies and COA's... It will likely be approximately \$5,000 and extend through June or September. Thus far, DCW HELP has helped pay for rent/security deposits, car repairs, utility bills, and tires.

**Personal Health and Disease Prevention: March 26, 2026**  
**Heidi Hazel, BSN, RN**

**Communicable Disease:**

Data from our regional epi's.

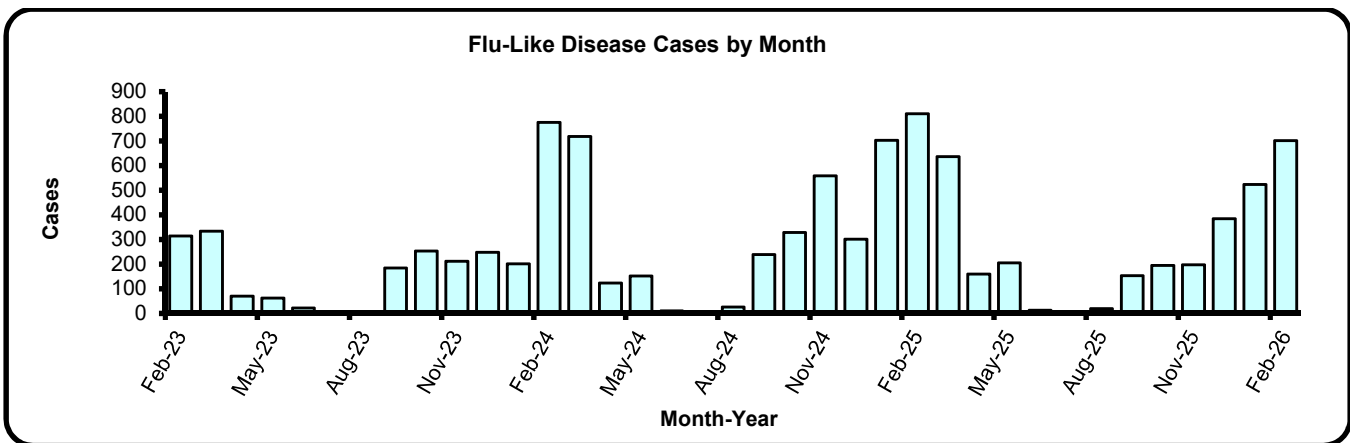
Here is a link to the Respiratory Illness Dashboard: [Respiratory Illness Dashboard](#).

-26.7% of Michigan Residents are vaccinated for Influenza

-9.3% of Michigan Residents are vaccinated for COVID-19

**Respiratory Illnesses:** As of March 7<sup>th</sup>, the Influenza Like Activity levels for Michigan are listed on the low end of high which means a significant number of people are still seeking care for flu-like symptoms, but the state is moving toward lower activity levels.

Nationally, 101 influenza-associated pediatric deaths have been reported during the 2025-2026 influenza season; 85% occurred among children who were not fully vaccinated against influenza. Of these deaths, three were reported in Michigan.



Interim estimates from three U.S. vaccine effectiveness networks show the 2025-2026 flu vaccine was about 38%-41% effective in preventing outpatient visits and 41% effective against hospitalization in children and adolescents. Among adults, effectiveness was 22%-35% against outpatient visits and 30% against hospitalization.

**RSV:** RSV activity began later than expected in most regions of the United States, though severity is similar to recent seasons. Because of the delayed start, higher RSV activity may continue into April.

**COVID:** Reported cases of COVID-19 continue to decline.

**Measles:** As of March 12<sup>th</sup>, there have been 1,362 confirmed measles cases in the United States for 2026. Washtenaw County Health Department reported a second suspected case of measles in an unvaccinated individual. The suspect case was a close contact of the original case.

**Immunizations/STD/HIV:**

During the fourth quarter of 2025, Branch, Hillsdale, and St. Joseph counties ranked among the top counties in Michigan for adolescent meningococcal vaccination coverage. For the MenACWY (Meningococcal Conjugate) vaccine, Branch County ranked 4th, St. Joseph County ranked 9th, and Hillsdale County ranked 13th out of 84 counties statewide. For the MenB (Meningococcal B) vaccine, Branch County ranked 7th, St. Joseph County ranked 10th, and Hillsdale County ranked 13th. These rankings place all three counties within the top 15 statewide, reflecting strong vaccination coverage across the region.

School immunization reporting deadline was February 1<sup>st</sup>. All of the school districts in our jurisdiction achieved the 95% or above reporting rate. Funding is dependent upon the cumulative percentage of the school district, not individual schools.

We are getting prepared to roll out MIWAIV (Michigan Online Immunization Waiver Education). This is an online training module that parents or guardians can use when seeking a nonmedical waiver for their child's vaccinations.

At this time, all patients from the Three River's office are being seen at the Sturgis office, and this arrangement has been working well. Supplies have been ordered to allow STD testing and treatment services to be provided in Sturgis.

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

Due to transportation challenges following the recent tornado, some WIC appointments have been conducted virtually. In addition, with State approval, formula was reissued to several WIC clients who lost their supplies as a result of the storm.

**Children's Special Health Care Services (CSHCS), Hearing/Vision and KOHA:**

Much of February was dedicated to preparing for accreditation which was a success. In addition, new online forms for CSHCS have been implemented into our Electronic Medical Record.

Hearing/Vision/KOHA: Kindergarten Round-Up events have begun across the three counties. Our three hearing and vision technicians and Registered Dental Hygienist (RDH) have been attending these events to assist with required health screenings and provide information to families.

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

Confirmed & Probable Case Totals	Feb-26				FYTD 2025-2025 (Oct-Sept)				FYTD 2024-2025 (Oct-Sept)			
	BR	HD	SJ	Total	BR	HD	SJ	Total	BR	HD	SJ	Total
Animal Bite/Rabies potential exposure	1	3	11	15	4	8	15	27	2	12	-	14
Blastomycosis	-	-	-	-	-	-	-	-	-	-	-	-
Brucellosis	-	-	-	-	-	-	-	-	-	-	-	-
Campylobacter	1	-	-	1	3	2	4	9	5	2	7	14
Chicken Pox	-	-	-	-	3	-	1	4	-	-	-	-
Chlamydia	2	3	14	19	29	16	68	113	30	37	86	153
Coccidioidomycosis	-	-	-	-	-	-	-	-	-	-	-	-
CRE Carbapenem Resistant Enterobac.	-	-	-	-	-	-	-	-	-	-	-	-
Cryptosporidiosis	-	-	-	-	-	-	1	1	-	-	-	-
Giardiasis	-	-	-	-	1	-	-	1	-	-	1	1
Gonorrhea	1	-	4	5	10	-	25	35	2	6	23	31
H. Influenzae Disease - Inv.	-	1	-	1	-	2	-	2	-	1	2	3
Hepatitis B - Acute	-	-	-	-	-	-	-	-	-	-	2	2
Hepatitis B - Chronic	-	-	-	-	-	-	1	1	1	1	-	2
Hepatitis C - Acute	-	-	1	1	-	-	1	1	-	-	-	-
Hepatitis C - Chronic	-	2	1	3	1	4	11	16	-	4	5	9
Hepatitis C Unknown	-	-	-	-	-	-	-	-	1	-	-	1
Histoplasmosis	1	-	-	1	2	-	-	2	1	-	-	1
HIV/AIDS	-	-	-	-	1	1	-	2	1	-	-	1
Influenza	144	29	172	345	235	57	428	720	441	93	489	1,023
Kawasaki	-	-	-	-	5	-	-	5	-	-	-	-
Latent Tuberculosis	-	-	-	-	1	-	-	1	2	1	-	3
Legionellosis	-	-	-	-	1	-	-	1	-	1	-	1
Listeriosis	-	-	-	-	-	-	-	-	-	-	-	-
Lyme Disease	-	-	-	-	-	1	1	2	3	2	3	8
Measles	-	-	-	-	-	-	-	-	-	-	-	-
Menengitis - Aseptic	-	-	-	-	-	-	-	-	-	1	-	1
Menengitis - Bacterial	-	-	-	-	-	-	-	-	1	-	-	1
Meningococcal Disease	-	-	-	-	-	-	-	-	-	-	-	-
Mumps	-	-	-	-	-	-	-	-	-	-	-	-
Mycobacterium - Other	-	-	-	-	1	-	1	2	4	2	1	7
Norovirus	-	-	-	-	-	-	-	-	16	1	-	17
Novel Coronavirus	52	69	36	157	196	319	199	714	281	490	228	999
Pertussis	-	-	-	-	2	1	1	4	7	11	3	21
RSV	6	6	17	29	6	6	17	29	2	9	1	12
Salmonellosis	-	-	-	-	4	1	3	8	2	-	3	5
Shiga Toxin-prod. (STEC)	-	-	-	-	-	1	1	2	-	1	1	2
Shigellosis	-	-	-	-	-	-	-	-	-	-	-	-
Shingles	-	-	-	-	-	1	1	2	-	-	1	1
Staphylococcus Aureus Infect.	-	-	-	-	-	-	-	-	-	-	-	-
Strep Invasive Gp A	1	1	1	3	1	1	1	3	3	-	3	6
Strep Pneumonia Inv Ds.	1	-	2	3	4	2	6	12	-	2	-	2
Syphilis - Primary	-	-	-	-	1	-	-	1	-	-	6	6
Syphilis - Secondary	-	-	1	1	-	2	1	3	1	-	3	4
Syphilis To Be Determined	1	-	-	1	4	-	2	6	-	3	7	10
Trichinosis	-	-	-	-	-	-	-	-	-	1	-	1
Tuberculosis	-	-	-	-	1	-	-	1	-	2	-	2
Unusual Outbreak/Occurrence	-	-	-	-	-	-	1	1	-	-	-	-
VZ Infection, Unspecified	-	1	-	1	-	5	1	6	-	1	-	1
Yersinia Enteritis	-	-	-	-	-	-	-	-	-	1	1	2

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

	Feb-26					YTD 2025-2026					YTD 2024-2025				
	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total
<b>CHILD IMMUNIZATIONS</b>															
# Vaccines Given CHA	57	109	41	23	230	449	557	312	267	1,585	1,477	921	294	1,261	3,953
All VFC Doses Given	482	229	-	468	1,179	2,779	1,323	-	3,105	7,207	2,942	1,549	157	2,531	7,179
Waivers	11	4	-	10	25	50	65	18	56	189	68	61	12	61	202
<b>ADULT IMMUNIZATIONS</b>															
# Vaccines Given CHA	57	4	4	16	81	384	95	92	273	844	286	116	98	66	566
All AVP Doses Given	57	-	-	7	64	261	84	-	215	560	338	111	14	108	571
<b>COMMUNICABLE DISEASE</b>															
TB Tests Done	7	7	-	3	17	28	30	-	12	70	22	40	2	12	76
STD treatments	2	-	-	15	17	5	5	-	41	51	3	4	-	46	53
HIV Testing	2	2	-	18	22	2	12	-	53	67	2	8	-	40	50
<b>ENROLLMENTS</b>															
Medicaid & Michild	-	-	-	-	-	3	-	-	-	3	9	3	-	-	12
<b>REFERRAL SERVICE</b>															
MCDC Referrals	3	-	18	43	64	18	12	107	136	273	18	9	76	71	174
MIHP referrals	-	-	28	50	78	6	-	146	180	332	1	-	264	249	514
<b>Hearing Screens</b>															
Pre-school	28	3	-	-	31	240	16	-	158	414	199	107	-	66	372
School Age	22	3	-	393	418	1,054	680	-	1,521	3,255	807	714	619	877	3,017
<b>Vision Screens</b>															
Pre-school	25	3	-	-	28	163	10	-	140	313	189	91	-	54	334
School Age	707	411	-	1,029	2,147	2,184	2,108	-	2,870	7,162	1,470	1,555	-	2,795	5,820
<b>Children's Special Health Care Services</b>															
Diagnostics	-	-	-	-	-	2	5	-	-	7	3	1	-	-	4
Assessments-Renewal	31	22	-	38	91	89	106	-	118	313	99	104	-	140	343
Assessments-New	13	8	-	3	24	-	30	-	27	57	-	37	-	18	55

State Participation/Enrollment Ratio [2]:

Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Curr Year P/E Ratio (last 12 months)
96.5%	96.1%	96.3%	95.8%	96.2%	96.2%

Months	Enrollment [3]	Initial Participation [4]	Closeout Participation [5]	% Change in Participation [6]	Participation/Enrollment Ratio[2]
Oct / 2024	4,449	4,160	4,195		93.50%
Nov / 2024	4,450	4,161	4,211	0.38%	93.51%
Dec / 2024	4,441	4,138	4,191	-0.47%	93.18%
Jan / 2025	4,461	4,153	4,198	0.17%	93.10%
Feb / 2025	4,373	4,079	4,127	-1.69%	93.28%
Mar / 2025	4,326	4,060	4,106	-0.51%	93.85%
Apr / 2025	4,332	4,099	4,122	0.39%	94.62%
May / 2025	4,304	4,015	4,062	-1.46%	93.29%
Jun / 2025	4,278	4,012	4,044	-0.44%	93.78%
Jul / 2025	4,277	4,073	4,091	1.16%	95.23%
Aug / 2025	4,246	4,027	4,048	-1.05%	94.84%
Sep / 2025	4,238	4,028	4,058	0.25%	95.04%
Oct / 2025	4,223	4,049	4,060	0.05%	95.88%
Nov / 2025	4,176	3,976	4,009	-1.26%	95.21%
Dec / 2025	4,099	3,901	3,930	-1.97%	95.17%
Jan / 2026	4,120	3,899	3,932	0.05%	94.64%
Feb / 2026	4,092	3,862	(est[7]) 3,961		94.38%
Mar / 2026	0	0	(est[7]) 3,953		
Apr / 2026	0	0	0		
May / 2026	0	0	0		
Jun / 2026	0	0	0		
Jul / 2026	0	0	0		
Aug / 2026	0	0	0		
Sep / 2026	0	0	0		

Total (Year to date)	20,710	19,687	15,931		
Curr Year Avg	4,142	3,937	3,983	495.55%	94.25%
Months with Count	5	5	4	4	5
Average to Base % [8]		94.6%	95.69%		
Last yrs Base % [9]		105.5%	106.46%		
Last yrs Average	4,348	4,084	4,121		93.92%

Estimated average participation for current year to date:

Actual average monthly participation current year to date [10]:

3,974
3,983

**Funding Allocation Information**

Total Funding Allocation:	\$908,156
Assigned Funding Participation Count [11]:	
Current Yr Base:	4,162
Previous Yr Base:	3,871

- [1] **Caseload:** The term used to refer to the number of clients being served in a given time. This is comprised of both enrollment and participation.
- [2] **Participation/Enrollment Ratio:** The number of clients participating divided by the number enrolled.
- [3] **Enrollment:** Number of clients certified to receive benefits in the given month. Final counts available for the month that just ended.
- [4] **Initial Participation:** Number of clients receiving benefits at the beginning of the month. Comparison between this and the closeout participation is indicative of the number of participants added over the course of the month. This can be used to inform staff of participation numbers at the start of the month and enable them to proactively improve participation before it is finalized.
- [5] **Closeout Participation:** Final number of clients who received benefits for the given month. Finalized approx. 5 weeks after the month ends.
- [6] **% Change in Participation:** The % difference in closeout participation when compared to the previous month.
- [7] **est:** It is the estimated participation for the given month. This is available prior to the closeout participation being available. It is a calculated value based on prior months' participation. **NOTE: Last two non 0 values are "Estimates"**
- [8] **Average to Base %:** Compares the current year average participation to the current year base.
- [9] **Last yrs Base %:** Compares last year's average participation to the last year base.
- [10] **Actual Avg. Part. For current year to date:** It is an average that includes the participation counts for all months in the current year where participation has been finalized.
- [11] **Assigned Funding Participant Count:** The value used in the calculation to determine the funding allocated to the local agency for the fiscal year. For additional details, refer to your agency's annual funding allocation letter.

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

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 2/1/2026 Through 2/28/2026

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
Abila	2,268.23	26.02.20 A.01	2/20/2026
ACD.NET	544.85	55092	2/20/2026
Action Quick Print Plus	129.00	26.02.06 A.01	2/6/2026
Action Quick Print Plus	699.00	26.02.20 A.02	2/20/2026
Aflac Group Insurance	1,490.24	26.02.27 R.01	2/27/2026
AleraEdge	273.02	55081	2/6/2026
Alert Medical Alarms	169.70	55093	2/20/2026
Alerus Retirement Solutions	3,868.00	26.02.13 R.01	2/13/2026
Alerus Retirement Solutions	3,913.00	26.02.27 R.02	2/27/2026
Amazon Capital Services, Inc	158.55	26.02.06 P.01	2/6/2026
Amazon Capital Services, Inc	154.33	26.02.20 P.01	2/20/2026
Angela Shedd	1,591.35	26.02.06 A.02	2/6/2026
Angela Shedd	1,470.35	26.02.20 A.03	2/20/2026
Barbara Krzyzanski	166.25	26.02.06 A.03	2/6/2026
Barbara Krzyzanski	157.50	26.02.20 A.04	2/20/2026
Barbara P. Foley	46.16	55089	2/13/2026
Barbara P. Foley	46.16	55101	2/27/2026
Basic	278.10	26.02.06 A.04	2/6/2026
Beacon Properties Administration	4,533.45	26.02.20 A.05	2/20/2026
Branch Area Transit Authority	1,769.17	26.02.20 A.06	2/20/2026
Branch County Commission	34,127.29	26.02.20 A.07	2/20/2026
Branch County Complex	5,694.28	26.02.20 A.08	2/20/2026
Card Services Center	525.29	26.02.20 P.02	2/20/2026
Century Bank - Hillsdale Maintenance	2,000.00	26.02.20 A.09	2/20/2026
Century Bank - Three Rivers Maintenance	2,000.00	26.02.20 A.10	2/20/2026
Century EFTPS	30,159.26	26.02.13 R.02	2/13/2026
Century EFTPS	28,635.12	26.02.27 R.03	2/27/2026
Century FSA	129.00	26.02.13 R.03	2/13/2026
Century FSA	129.00	26.02.27 R.04	2/27/2026
Century Mastercard	825.92	26.02.06 P.02	2/6/2026
Century MERS	62,847.78	26.02.06 A.05	2/6/2026
Century State/Michigan State Treasury	10,637.77	26.02.27 R.05	2/27/2026
Charter Communications	150.00	26.02.06 P.03	2/6/2026
Cintas Corporation Loc 351	158.38	26.02.06 P.04	2/6/2026
City of Jonesville	94.00	26.02.06 A.06	2/6/2026
City Of Three Rivers	150.00	26.02.06 A.07	2/6/2026
City Of Three Rivers	30.00	26.02.20 A.11	2/20/2026
CLIAwaived Inc.	3,640.00	26.02.20 A.12	2/20/2026
ConnectAmerica	95.00	26.02.20 A.13	2/20/2026
Cris Kregel	20.00	55082	2/6/2026
Crossroads Home Care Inc.	1,065.12	26.02.20 A.14	2/20/2026
Current Office Solutions	189.00	26.02.06 A.08	2/6/2026
DELTA DENTAL	4,753.24	26.02.20 A.15	2/20/2026
DiningRD	3,963.51	26.02.20 A.16	2/20/2026
Dr. Karen M. Luparello	4,606.25	26.02.06 A.09	2/6/2026
FedEx	36.30	26.02.06 P.05	2/6/2026
FedEx	18.23	26.02.20 P.03	2/20/2026
Fisher Healthcare	4,230.41	55094	2/20/2026
Frontier	410.08	26.02.06 P.06	2/6/2026
GDI Services Inc.	4,735.10	26.02.20 A.17	2/20/2026
Griffiths Mechanical Contracting, Inc.	264.00	26.02.20 A.18	2/20/2026
Health Equity	3,509.73	26.02.13 PR.01	2/13/2026

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

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 2/1/2026 Through 2/28/2026

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
Health Equity	3,730.88	26.02.27 PR.01	2/27/2026
Heartsmart.com	889.00	55083	2/6/2026
Heartsmart.com	138.00	55095	2/20/2026
Helping Angels Home Care LLC	1,883.76	26.02.20 A.19	2/20/2026
Hillsdale Board Of Public Utilities	2,313.57	26.02.06 P.07	2/6/2026
Hillsdale County Treasurer	4,056.03	26.02.06 A.10	2/6/2026
Home Roots Companion & Home Care Services LLC	80.16	26.02.20 A.20	2/20/2026
HomeJoy of Kalamzoo	2,411.33	26.02.20 A.21	2/20/2026
Hospital Network Healthcare Services	129.50	26.02.20 A.22	2/20/2026
Indiana MI Power Company	1,764.90	26.02.06 P.08	2/6/2026
Indiana State Tax	204.36	26.02.27 R.06	2/27/2026
Laboratory Corporation of America	836.10	26.02.20 A.23	2/20/2026
Legal Services Of S.Central MI	840.00	26.02.20 A.24	2/20/2026
Maplecrest, LLC	1,361.77	26.02.20 A.25	2/20/2026
McKesson Medical-Surgical Gov. Solutions LLC	455.89	26.02.06 P.09	2/6/2026
McKesson Medical-Surgical Gov. Solutions LLC	1,277.30	26.02.20 P.04	2/20/2026
McKibbin Media Group	800.00	55084	2/6/2026
Medical Care Alert	567.75	26.02.20 A.26	2/20/2026
MERS 5% EMPLOYEES	23,682.16	26.02.03 A.01	2/3/2026
MERS 5% EMPLOYEES	15,308.86	26.02.27 R.07	2/27/2026
Michigan Gas	81.73	26.02.06 P.10	2/6/2026
Michigan Public Health Institute	4,833.41	26.02.20 A.27	2/20/2026
Michigan State Disbursement Unit	190.11	55090	2/13/2026
Michigan State Disbursement Unit	190.11	55102	2/27/2026
Midwest Communications	480.00	55096	2/20/2026
Nationwide	610.00	26.02.13 R.04	2/13/2026
Nationwide	610.00	26.02.27 R.08	2/27/2026
Nurse Administrator's Forum	190.00	55085	2/6/2026
PFIZER INC	1,631.18	55097	2/20/2026
POCKETALK	4,279.00	26.02.20 A.28	2/20/2026
Principal Life Insurance Company	1,994.17	26.02.20 P.05	2/20/2026
Prompt Care Express PC	240.00	55098	2/20/2026
R&S Northeast LLC	61.38	26.02.20 A.29	2/20/2026
Richard Clark	2,437.73	26.02.20 A.30	2/20/2026
Riley Pumpkin Farm	3,160.00	26.02.20 A.31	2/20/2026
Robert C. Khoenie, PLLC	533.54	55091	2/13/2026
Robert C. Khoenie, PLLC	37.53	55103	2/27/2026
Rosati Schultz Joppich Amtsbueshler	60.00	26.02.20 A.32	2/20/2026
ROSE PEST SOLUTIONS	86.00	26.02.20 A.33	2/20/2026
Sanofi Pasteur Inc.	3,350.55	26.02.20 P.06	2/20/2026
Semco Energy	285.48	26.02.06 P.11	2/6/2026
Shred It	60.00	26.02.06 P.12	2/6/2026
St Joseph County COA	30,256.24	26.02.20 A.34	2/20/2026
St Joseph County Transit Authority	2,493.15	26.02.20 A.35	2/20/2026
State of Michigan	252.00	55086	2/6/2026
State Of Michigan	140.00	55087	2/6/2026
State of Michigan-Dept	23.00	55099	2/20/2026
Stratus Video, LLC	3,164.82	26.02.20 A.36	2/20/2026
Swick Broadcasting Company	400.00	55088	2/6/2026
Tara Hartwig	210.00	55100	2/20/2026

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

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 2/1/2026 Through 2/28/2026

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
TelNet Worldwide	1,759.01	26.02.06 A.11	2/6/2026
Unemployment Insurance	8,129.85	26.02.06 P.13	2/6/2026
Verdant Commercial Capital	1,322.75	26.02.20 P.07	2/20/2026
Verizon	1,771.22	26.02.06 P.14	2/6/2026
VRI INC.	54.00	26.02.20 A.37	2/20/2026
Western Michigan Health Insurance Pool Trust	57,564.86	26.02.20 P.08	2/20/2026
Report Total	429,229.61		

Branch-Hillsdale-St Joseph Community Health Agency  
Balance Sheet - Unposted Transactions Included In Report  
As of 2/28/2026

	Current Period Balance
<b>Assets</b>	
Cash on Hand	15,694.55
Cash with County Treasurer	3,500,867.79
Community Foundation Grant	309,955.94
Cash HD Building Maintenance	66,450.00
Cash TR Building Maintenance	91,049.40
Accounts Receivable	60,713.71
Due from Dental DAPP	1,275.67
Due from State	122,699.84
Due from Other Funding Sources	161,574.89
Prepaid Expenses	166,367.44
Biologic Inventory	156,995.03
<b>Total Assets</b>	<b>4,653,644.26</b>
 <b>Liabilities</b>	
Accounts Payable	211,010.46
Payroll Liabilites	81,690.95
Deferred Revenue	308,940.24
Deferred Revenue BR	19,155.08
Deferred Revenue HD	20,204.50
Deferred Revenue SJ	26,914.67
Biologics	156,995.03
<b>Total Liabilities</b>	<b>824,910.93</b>
 <b>Net Assets</b>	
Operation Fund Balance	239,432.84
Restricted Fund Balance	459,287.28
Designated Fund Balance	3,130,013.21
<b>Total Net Assets</b>	<b>3,828,733.33</b>
 <b>Total Liabilities and Net Assets</b>	 <b>4,653,644.26</b>

BHSJ Community Health Agency  
 Schedule of Cash Receipts and Disbursements  
 October 1, 2025 thru  
 February 28, 2026

Plus: Cash Receipts		\$628,471.27
Less: Cash Disbursements For Payroll/AP		\$ (772,650.24)
<b>10/31/2025 Cash Balance</b>		<b>\$ 3,970,394.32</b>
<hr/>		
Plus: Cash Receipts		\$633,432.70
Less: Cash Disbursements For Payroll/AP		\$ (663,990.11)
<b>11/30/2025 Cash Balance</b>		<b>\$ 3,939,836.91</b>
<hr/>		
Plus: Cash Receipts		\$620,491.36
Less: Cash Disbursements For Payroll/AP		\$ (639,361.22)
<b>12/31/2025 Cash Balance</b>		<b>\$ 3,920,967.05</b>
<hr/>		
Plus: Cash Receipts		\$847,544.81
Less: Cash Disbursements For Payroll/AP		\$ (894,796.16)
<b>1/31/2026 Cash Balance</b>		<b>\$ 3,873,715.70</b>
<hr/>		
Plus: Cash Receipts		\$572,212.52
Less: Cash Disbursements For Payroll/AP		\$ (635,104.49)
<b>2/28/2026 Cash Balance</b>		<b>\$ 3,810,823.73</b>

**12 Month Grants Should be 41.67% Expended. 9 Month Grants Should be 55.56% Expended.**

	Current Month	Year to Date	Total Budget Amendment1	Total Expended
325 CSHCS Must fully expend budget for 325 before using 112; therefore, they must be evaluated together. They are slightly over budget at 42.95%. Will monitor.	27,413.13	152,214.91	222,409.00	68.43%
255 Community Health Direction Over budget; should come back in line as the year progresses and work begins in other grants that do not run the entire year.	13,140.16	89,483.01	150,000.00	59.65%
032 Emergency Preparedness Showing over budget due to one-time purchases for supplies. The agency received additional special project funds for this purpose and the budget will be corrected in the next budget amendment	20,397.73	78,576.62	139,756.63	56.22%
101 Workforce Development Over budget. The work plan for this grant has the majority of the work early in the year. This will come in line as the year progresses.	6,333.00	24,201.26	48,972.39	49.41%
286 HEP Special Projects Grant ended October 31, 2025	0.00	6,143.01	12,455.00	49.32%
714 Onsite Sewage Disposal Over budget. Will monitor and adjust at next amendment.	38,843.32	222,967.86	478,127.44	46.63%
326 Vision (ELPHS) Within budget - 9 Month program should be expended at	13,165.98	56,429.56	122,378.71	46.11%
329 MCH Enabling Children Slightly over budget due to a change in the budget allocation. This will fall back into align as the year progresses.	11,582.41	43,052.08	94,409.00	45.60%
722 PFAS Response Slightly over budget due to increased staff time. Will monitor and adjust at the next amendment if necessary.	45.09	936.73	2,060.36	45.46%
721 Drinking Water Supply Over budget. Will monitor and adjust at next amendment.	37,709.97	202,058.06	446,323.69	45.27%
327 Hearing (ELPHS) Within budget - 9 Month program should be expended at	7,199.49	55,417.80	123,552.25	44.85%
138 Immunization IAP Over budget due to increased staff time, training costs, and one-time H S A contribution. Should come back in line as the year progresses.	63,434.17	517,539.68	1,175,295.07	44.03%
723 PFAS Response - White Pigeon Slightly over budget due to increased staff time. Will monitor and adjust at the next amendment if necessary.	235.20	1,171.87	2,662.72	44.01%
109 WIC Slightly over budget due to one-time H SA contribution. Will level out as the year progresses.	97,227.94	476,692.79	1,097,936.39	43.41%
014 VOCA Slightly over budget due to one-time H SA contribution. Will level out as the year progresses.	15,746.91	86,972.16	205,743.00	42.27%

Branch-Hillsdale-St Joseph Community Health Agency  
Statement of Revenues and Expenditures - Amend 1 - Expense By Program - Summary Unposted Transactions Included In Report  
From 2/1/2026 - 2/28/2026

332 HIV Prevention	2,231.13	11,480.96	27,641.28	41.53%
021 Dental Clinic - Three Rivers	4,533.45	22,667.25	55,582.20	40.78%
012 Area Agency on Aging	109,956.47	528,829.64	1,321,723.00	40.01%
704 Food Service	42,217.44	233,935.65	584,971.73	39.99%
029 Dental Clinic - Hillsdale	1,067.49	4,767.80	12,000.00	39.73%
745 Type II Water	13,061.17	87,814.94	222,027.00	39.55%
341 Infectious Disease	26,440.71	167,451.62	455,665.44	36.74%
720 EH- Complaints	507.93	3,940.08	10,822.45	36.40%
108 WIC Breastfeeding	11,188.62	47,499.36	134,466.51	35.32%
405 Grant Writing	638.11	1,678.95	4,755.84	35.30%
331 STD	11,774.89	67,572.35	193,166.10	34.98%
207 MCRH Community Health Workers	6,371.19	48,714.82	140,082.73	34.77%
107 Medicaid Outreach	1,173.94	5,605.32	17,529.48	31.97%
605 General EH Services	2,558.11	14,711.81	46,236.45	31.81%
008 Salary & Fringe Payoff	2,611.68	23,813.49	80,000.00	29.76%
345 Lead Testing	7,705.39	11,273.20	39,725.50	28.37%
724 PFAS - Westside Landfill	0.00	815.96	2,880.36	28.32%
717 EGLE Swimming Pools	145.19	7,549.41	26,812.13	28.15%
338 Immunization Vaccine Handling	5,555.99	32,054.47	114,296.82	28.04%
106 MI Options	7,932.57	64,179.82	237,877.50	26.98%
719 Body Art	724.90	1,707.11	6,701.95	25.47%
010 Agency Support	21,722.62	74,926.32	320,280.00	23.39%
202 Oral Health	3,506.19	18,833.50	82,654.39	22.78%
205 OHSP Grant	14,184.40	24,069.89	106,432.71	22.61%
025 PH Workforce & Infastructure	0.00	35,102.56	193,725.06	18.11%
024 MERS Pension Underfunded Liability	0.00	3,498.93	22,590.00	15.48%
096 CSHCS Donations SJ	0.00	5,354.40	41,360.84	12.94%
015 Local Expenses - Unallowable by Grants	(118.36)	4,394.55	62,829.73	6.99%
715 EGLE Long-Term Monitoring	0.00	301.70	4,920.70	6.13%
097 CSHCS Donations BR HD	0.00	988.73	22,826.00	4.33%
716 EGLE Campgrounds	0.00	542.61	18,869.17	2.87%
287 HEP Special Projects II	106.61	334.48	27,798.14	1.20%
275 Medical Marijuana SJ	87.52	87.52	7,390.17	1.18%
212 Medical Marijuana BR	213.23	213.23	18,886.23	1.12%
230 Medical Marijuana HD	99.57	99.57	11,026.17	0.90%
035 Vector Borne Disease Surveillance	124.47	388.45	58,080.93	0.66%
023 Capital Expenditures	0.00	0.00	53,000.00	0.00%
112 CSHCS Medicaid Outreach	0.00	0.00	132,000.41	0.00%
718 EGLE Septage	0.00	0.00	6,251.95	0.00%
<b>Total Expense</b>	<b>650,797.12</b>	<b>3,571,057.85</b>	<b>9,247,968.72</b>	<b>38.61%</b>

**The Agency is currently 3.05% under budget.**

## March 16, 2026 – Board of Health Finance Committee Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health, Finance Committee meeting was called to order by Jared Hoffmaster at 9:03 AM. Roll call was completed as follows: Jared Hoffmaster, and Kevin Collins. Jon Houtz was absent.

Also present from BHSJ: Rebecca Burns, Theresa Fisher, and Kris Dewey.

Mr. Collins moved to approve the agenda with support from Mr. Hoffmaster. The motion passed.


Public Comment: No public comments were given.

### New Business:

- Rebecca Burns provided a post-tornado update. No action was taken.
- Theresa Fisher provided an overview of the agency's bank accounts. No action was taken.
- Mr. Collins moved to recommend that the full Board approve the bid from Inspiration Studio Designs in the amount of \$13,500 for website redesign. The motion received support from Mr. Hoffmaster. The motion passed.
- Theresa Fisher provided an update on the financial audit. No action was taken.

With no further business, the meeting was adjourned at 9:33 AM.

Respectfully Submitted by:

  
Theresa Fisher,  
Administrative Services Director  
Secretary to the Board of Health

## March 18, 2026 – Board of Health Program, Policy, & Appeals Committee Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health, Program, Policy, & Appeals Committee meeting was called to order by Tim Stoll, at 8:30 AM. Roll call was completed as follows: Tim Stoll, Rick Shaffer, and Brent Leininger. No members were absent.

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

Mr. Shaffer moved to approve the agenda as presented, with support from Mr. Leininger. The motion passed unopposed.

Public Comment: No public comments were given.

Unfinished Business:

- None

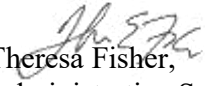
New Business:

- The Procurement Policy was discussed but no action was taken.
- The MMRMA Insurance Policy was discussed but no action was taken.
- Employee Recognitions were discussed but no action was taken.
- Mr. Shaffer moved to recommend that the full Board approve the Annual Report as presented, with support from Mr. Leininger. The motion passed.

Public Comment: No public comments were given.

Mr. Leininger moved to adjourn the meeting with support from Mr. Shaffer. The motion passed and the meeting adjourned at 9:20 AM.

Respectfully Submitted by:

  
Theresa Fisher,  
Administrative Services Director  
Secretary to the Board of Health

## Website Redesign & Development

### Proposal Evaluation Scoring Tool – Inspiration Studio Designs

Agency: Branch-Hillsdale-St. Joseph Community Health Agency

Project: Website Redesign & Development

Maximum Score: 95 points

#### 1. Overall Proposal Suitability & Responsiveness (20 points)

Sub-Criteria	Max Points
Proposal clearly addresses all required elements of the RFB	5/5
Demonstrates understanding of BHSJ’s mission, audience, and public health role	5/5
Meets stated website objectives (usability, accessibility, CMS usability, security)	4/5
Proposal is well-organized, complete, and easy to evaluate	5/5
Subtotal	19/20

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#### 2. Organizational Experience & Qualifications (15 points)

Sub-Criteria	Max Points
Demonstrated experience in website redesign and development	5/5
Experience working with public sector or public health organizations	5/5
Qualifications and experience of proposed project team	5/5
Subtotal	15/15

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#### 3. Technical Approach & Functionality (25 points)

Sub-Criteria	Max Points
Proposed CMS is user-friendly and supports non-coding staff (drag-and-drop)	5/5
Website design supports intuitive navigation and two-click access to services	4/5
ADA compliance with WCAG 2.1 AA and ongoing compliance tools	5/5

Sub-Criteria	Max Points
Hosting solution provides security, reliability, and scalability	4/5
SEO, mobile responsiveness, and required integrations (forms, Constant Contact, video, social media)	5/5
<b>Subtotal</b>	<b>23/25</b>

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4. Previous Work & References (15 points)

Sub-Criteria	Max Points
Quality and relevance of design & development examples	5/5
Examples demonstrate accessibility, usability, and modern design	5/5
References are relevant, recent, and verifiable	5/5
<b>Subtotal</b>	<b>15/15</b>

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5. Project Management, Timeline & Testing (10 points)

Sub-Criteria	Max Points
Clear project management methodology and communication plan	3/3
Realistic timeline from kickoff to launch	3/3
Comprehensive testing plan (functionality, accessibility, cross-device)	3/4
<b>Subtotal</b>	<b>9/10</b>

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6. Cost & Value (15 points)

Sub-Criteria	Max Points
Costs are clearly itemized and transparent	5/5
Demonstrates overall value relative to scope and deliverables	5/5

Sub-Criteria	Max Points
Subtotal	10/10

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Total Score Summary

Category	Points Earned
Proposal Suitability	19/20
Organizational Experience	15/15
Technical Approach	23/25
Previous Work & References	15/15
Project Management	9/10
Cost & Value	10/10
<b>TOTAL SCORE</b>	<b>91/95</b>

---

Overall Recommendation:

- Highly Recommend
- Recommend
- Recommend with Reservations
- Do Not Recommend

## Website Redesign & Development

### Proposal Evaluation Scoring Tool – 2<sup>nd</sup> Story Marketing

Agency: Branch-Hillsdale-St. Joseph Community Health Agency

Project: Website Redesign & Development

Maximum Score: 95 points

#### 1. Overall Proposal Suitability & Responsiveness (20 points)

Sub-Criteria	Max Points
Proposal clearly addresses all required elements of the RFB	5/5
Demonstrates understanding of BHSJ's mission, audience, and public health role	4/5
Meets stated website objectives (usability, accessibility, CMS usability, security)	5/5
Proposal is well-organized, complete, and easy to evaluate	5/5
<b>Subtotal</b>	<b>19/20</b>

---

#### 2. Organizational Experience & Qualifications (15 points)

Sub-Criteria	Max Points
Demonstrated experience in website redesign and development	5/5
Experience working with public sector or public health organizations	4/5
Qualifications and experience of proposed project team	4/5
<b>Subtotal</b>	<b>13/15</b>

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#### 3. Technical Approach & Functionality (25 points)

Sub-Criteria	Max Points
Proposed CMS is user-friendly and supports non-coding staff (drag-and-drop)	4/5
Website design supports intuitive navigation and two-click access to services	4/5
ADA compliance with WCAG 2.1 AA and ongoing compliance tools	4/5

Sub-Criteria	Max Points
Hosting solution provides security, reliability, and scalability	4/5
SEO, mobile responsiveness, and required integrations (forms, Constant Contact, video, social media)	4/5
<b>Subtotal</b>	<b>20/25</b>

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#### 4. Previous Work & References (15 points)

Sub-Criteria	Max Points
Quality and relevance of design & development examples	4/5
Examples demonstrate accessibility, usability, and modern design	4/5
References are relevant, recent, and verifiable	4/5
<b>Subtotal</b>	<b>12/15</b>

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#### 5. Project Management, Timeline & Testing (10 points)

Sub-Criteria	Max Points
Clear project management methodology and communication plan	3/3
Realistic timeline from kickoff to launch	3/3
Comprehensive testing plan (functionality, accessibility, cross-device)	3/4
<b>Subtotal</b>	<b>9/10</b>

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#### 6. Cost & Value (15 points)

Sub-Criteria	Max Points
Costs are clearly itemized and transparent	4/5
Demonstrates overall value relative to scope and deliverables	3/5

Sub-Criteria	Max Points
Subtotal	7/10

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Total Score Summary

Category	Points Earned
Proposal Suitability	19/20
Organizational Experience	13/15
Technical Approach	20/25
Previous Work & References	13/15
Project Management	9/10
Cost & Value	6/10
<b>TOTAL SCORE</b>	<b>81/95</b>

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Overall Recommendation:

- Highly Recommend
- Recommend
- Recommend with Reservations
- Do Not Recommend



**Bid Form**

Redesign and development services for a new website  
 Closing Date: March 11, 2026, at 4:00 PM EST.

We submit a bid to furnish requirements in accordance with the scope of work listed under General Requirements above. I hereby certify that I (we) do not have any substantial conflict of interest sufficient to influence the bidding process on this bid. A conflict of substantial interest is one which a reasonable person would think would compromise the open competitive bid process.

Legal Name of Person or Entity Represented: <b>Inspiration Studio Designs</b>
Telephone Number: <b>616-366-5496</b>
Email Address: <b>julia@inspiration-studio.com</b>
Mailing Address: <b>PO Box 97</b>
City, State, Zip: <b>Gulf Shores, AL 36547</b>
Social Security / Federal Employer Identification Number: (Information will be redacted from public information) <b>38-3585184</b>
Signature of Authorized Representative: <i>Robert A. Leos</i>
Typed or Printed Name of Signature: <b>Robert A. Leos</b>
Title: <b>President</b>
Date: <b>03/09/2026</b>
Total Cost to Complete Project: <b>\$13,500.00 Web Dev. Project</b>
Proposed Payment Terms: <b>50% Starting Deposit, 25% Phase II, 25% Phase III</b>
Estimated Completion Date: (Must be completed and invoiced by September 30, 2026) <b>July 1, 2026 or Sooner</b>
Evidence of Accords Must be Attached: <ul style="list-style-type: none"> <li>• Copy of Insurance Certificate</li> <li>• Copy of General Liability</li> <li>• Copy of Workers' Compensation Insurance</li> </ul>
Contractors must provide a minimum of three references.

### Certification Statement

By submitting this bid, the potential contactor certifies the following:

- The proposal is signed by an authorized representative of the entity.
- All costs, direct and indirect, have been determined and are included in the pricing proposal.
- No substantial conflict of interest exists which influenced the submitting bid.
- The bidder has read and understands the terms, conditions, and requirements set forth in this request for bid and agrees to them with no exceptions.

Therefore, in accordance to this request for bids and subject to all conditions here in, the undersigned offers and agrees to perform the services in accordance with the specifications and conditions of this request for bid at the price quoted, providing the bid is accepted within 60 days of the date of submission.

Individual / Entity Represented: Inspiration Studio Designs
Signature: 
Typed or printed name: Robert A. Leos
Title: President
Date: 03/09/2026

**TECHNOLOGY PROFESSIONAL LIABILITY COVERAGE PART DECLARATIONS**

**PLEASE READ YOUR POLICY CAREFULLY.**

**THIS IS A CLAIMS MADE POLICY COVERAGE FORM AND UNLESS OTHERWISE PROVIDED HEREIN, THE COVERAGE OF THIS FORM IS LIMITED TO LIABILITY FOR CLAIMS FIRST MADE DURING THE POLICY PERIOD, OR THE EXTENSION PERIOD, IF APPLICABLE. DEFENSE COSTS SHALL BE APPLIED AGAINST THE DEDUCTIBLE.**

**DEFENSE COSTS ARE INCLUDED WITHIN THE LIMITS OF LIABILITY FOR THIS COVERAGE.**

**No. MTK2552711**

**Effective Date: 10/28/2025**

12:01 AM STANDARD TIME

ITEM I. NAMED INSURED AND ADDRESS

**INSPIRATIONS STUDIO DESIGNS, INC.  
P. O. BOX 97  
GULF SHORES, AL 36542**

ITEM II. POLICY PERIOD: (MM/DD/YYYY) From: 10/28/2025 To: 10/28/2026

**Technology Professional Liability**

ITEM III. LIMITS OF LIABILITY	\$1,000,000	EACH CLAIM
	\$1,000,000	ANNUAL AGGREGATE
ITEM IV. DEDUCTIBLE:	\$0	EACH CLAIM
ITEM V. PREMIUM:	\$1,141	
ITEM VI. RETROACTIVE DATE:	09/22/2014	

ITEM VII. Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:  
**See Endorsement EOD (01/95)**

**THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.**

# PROJECT PROPOSAL

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

PREPARED FOR

**BHSJ**

Health Department

**Attn: Isabella Stycos**  
**stycosi@bhsj.org**

**Inspiration Studio**  
Direct: 616-366-5496

julia@inspiration-studio.com  
www.inspiration-studio.com

# Welcome to Inspiration Studio



## ABOUT US

Inspiration Studio is a full-service creative agency specializing in branding, web development, social media management, and marketing. We are a collection of artists and strategists who have spent our entire careers building strong brands, designing amazing websites, and crafting marketing campaigns that share our client's stories.

We may be small-by-design, but our scope is broad and our experience is deep in a variety of industries and disciplines. We pride ourselves on a client-first approach where our Studio gets to thoroughly know each client – this allows us the ability to offer a level of personal service not found in larger agencies. We're accessible and responsive to you, allowing your project to have a more efficient work flow and on target strategies.

We approach each project with an open mind. We listen. We ask questions. And we get to know you. Then we use our experience and expertise to develop and execute effective marketing solutions that meet your unique needs.

After all, your story deserves to be understood from every angle, have access to every tool, and be managed on every platform that makes good sense for you. As your creative ally, Inspiration Studio can take you in the direction you need to succeed!



***We have a reputation for design innovation, effectiveness, and simplicity.***

# OUR TEAM



## Julia Leos - Digital Creative Director

Julia Leos founded the Studio and serves as the Digital Creative Director. Julia holds a Graduate M.F.A. Degree (Master in Fine Arts) from Savannah College of Art and Design, along with a BBA Degree (Bachelors in Business Administration).

[julia@inspiration-studio.com](mailto:julia@inspiration-studio.com)



## Robert Leos - President / Executive Creative Director

Robert Leos serves as the Studio's Executive Creative Director. Before the Studio's launch, Robert was a telecom entrepreneur for 15 years, along with owning and operating a retail and sales location. With over 20 years of sales experience, Robert is dedicated to meeting and exceeding your expectations!

[rob@inspiration-studio.com](mailto:rob@inspiration-studio.com)



## Kelly Bird - Promotional & Print Products

Kelly holds a B.F.A. in Graphic Design and Illustration from Savannah College of Art and Design. To the Studio, Kelly brings her skills of printing, marketing, and management all promotional products.

[hello@inspiration-studio.com](mailto:hello@inspiration-studio.com)



## Roger Rozell - Social Media Specialist

Roger has an official background in Fire and EMS, but a passion for design work and creativity. To the Studio, Roger brings these two passions together to assist as our Social Media Specialist and runs primary on social media accounts and digital advertising focused on health, medical, mental, and behavioral care.

[hello@inspiration-studio.com](mailto:hello@inspiration-studio.com)

# PROJECT DESCRIPTION

## BHSJ Website Development

Inspiration Studio will develop a custom Wordpress website for Branch-Hillsdale-St.Joseph Community Health Agency (BHSJ) to showcase BHSJ's services provided to residents in Branch, Hillsdale, and St. Joseph County. Inspiration Studio's coding will be completed in HTML, PHP, CSS, and JS framework. Additional database and application plug-ins/attachments will be coded in HTML, CSS, PHP, and MySQL. The new responsive and accessible Wordpress website will be fully compatible with today's latest browsers, include a full bootstrap for future expansion, and integration of organic SEO (search engine optimization). The new website will also integrate with today's latest ADA accessible Wordpress CMS (Content Management) system so BHSJ internal staff who have access and authorization can conduct their own page updates, new page additions, "send for approval" workflow, and more.

*\*Our Studio recommends deploying Beaver Builder as your chosen content management system. Beaver Builder is WCAG 2.0+ compliant to ensure the accessible theme we custom build for BHSJ will continue to be accessible on the authoring and HTML rendering side. In addition, we are proud to partner with a multitude of Health Departments and CMH's in Michigan, and for those on Wordpress, they love the ease-of-use and how simple Beaver Builder is for dragging and dropping in content, photos, and also copy and pasting from internal Word documents. With this, we feel at ease that the BHSJ team will feel the same!*

## BHSJ Redesign Package Includes:

- **ADA Compliance:** BHSJ's updated website will be coded to meet Web Content Accessibility Guidelines (WCAG) 2.0+ as maintained and required by the World Wide Web Consortium (W3C).
- **Scalability:** BHSJ's updated website will be built with a full back-end bootstrap that can scale and grow as BHSJ grows. The bootstrap will allow for full editing by the BHSJ team. The full bootstrap can also be fully read by Google Translate for easy language changes by users.
- **Full Graphic Design and Image Sourcing:** BHSJ's updated site will include stock images, editing, and graphically designed elements to assist in a better UI (User Interface and Experience).
- **Education Review:** BHSJ's redesigned website will be built to accommodate content displayed with an 8th grade+ reading level. This will provide residents seeking health agency information with a more intuitive and accessible format that they can read, understand, and navigate as required by many health departments per accommodation needs.
- **Content and UI Review:** Inspiration Studio will work with the BHSJ team to not only condense, but also recommend and perform layout redesigns to ensure BHSJ is capturing their users in the best possible fashion. Inspiration Studio will not only work with the current content provided, but we will also provide content writing for new areas and to improve current areas. This will relieve the BHSJ team from having to provide all content. Instead, the BHSJ team can do content review and changes off of the full design and build-out (demo environment) that Inspiration Studio provides! This also helps with a faster and more streamlined build-out as you can focus on your core work required everyday and let us work on the website!

# PROJECT Add-On's

## Can Be Added On Now or Requested In The Future

### Online Forms System \$250.00 one-time set-up + \$50 a month

Our Studio provides full electronic Online Forms should you ever want to build in dynamic forms on your website. Popular forms include online payments, patient satisfaction survey submissions, career applications, immunization scheduling, contact us forms and more! With our Online Forms, you get unlimited forms, full branding, a personalized Admin Center so you can drag n' drop to build your own future forms, work flow approvals, electronic signatures and much more. Forms are fully PCI compliant, multi-language, DMARC compliant, encrypted, and run with full logic integration.

There is no limit to the amount of forms you can create or have (just make sure your server or hosting account expands space for how large you grow the database!) Forms can be both turned "on" to the public or just be "private" to in-house staff and community partners.

Inspiration Studio will provide a full feature list of the Online Forms since there is more features than can be listed here! We can also provide examples on how other Health Departments utilize these same forms for nuisance complaints, scheduling, septic/well inspections and more!

### Graphic Design \$150.00 an hour

As a full service creative agency, we can gladly assist with any of your graphic design and print needs! Graphic design work is done on an hourly basis (\$150.00 hr.) and we can gladly custom quote any graphic needs (for example: annual reports, automated email templates, billboards, WIC marketing, Family Planning, etc.). In addition to our graphic design, we offer full print services, both small and large format. From business cards to health department community mailers and postcards - we've got you covered!

### Website Maintenance \$150.00 an hour

We understand it can be hard to find time to do your own website updates! Our studio can gladly assist with any future maintenance needs, new page creation, or even additional training for new staff members at our normal hourly rate of \$150.00. All hourly work is charged in half an hour increments. We make it easy- no trouble tickets required, just pick up the phone and give us a call or shoot an email!

### File Management System \$500.00 one-time set-up fee

At Inspiration Studio, we can provide you with your own flexible file management system (think of it as your own personal file cloud). The system is a great way to control files that need to be sent to customers or for secure log-in areas for a Board of Directors area and more! The file management system can integrate with both a closed platform or open source website, be accessible from any device, allow management of users and comes with a full intuitive administration panel on the front-end.

Features include: User Registration (with Multiple Roles per user), Private File Sharing, Drag & Drop upload of documents, media files, and videos, Move/Copy Files through folders, Multiple downloads of files as .zip archives, Image preview/inline thumbnails, Quick Search Module, E-mail Notifications, Sortable Items by Name, Date, and Size, Built-In Statistics and Charts, and More!

**Website Hosting****\$395.00 Avg. Annually**

Need simple website hosting? If you don't run your own server, colo, or cloud environment, we can gladly help you set-up a shared hosting environment. Shared hosting is a great way to reduce your costs when a full server isn't needed. For many clients, they like to go onto GoDaddy and delegate us with full access. Costs change everyday, although, general pricing and recommendations are below for health departments of your size.

- cPanel Website Hosting Ultimate: \$12.99 a month
- 1 Managed SSL Certificate: \$7.99 a month
- Website Security Advanced (malware scanning, auto back-ups, etc): \$11.99 a month

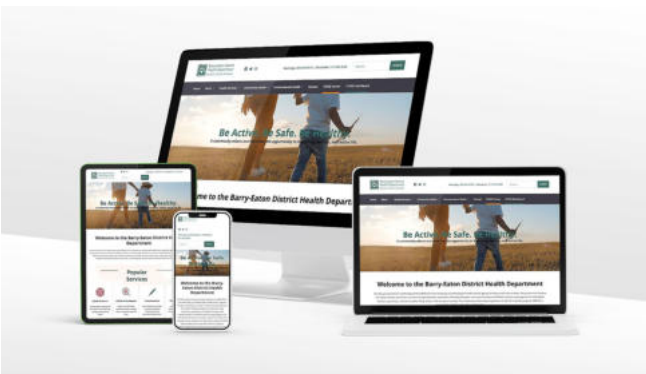
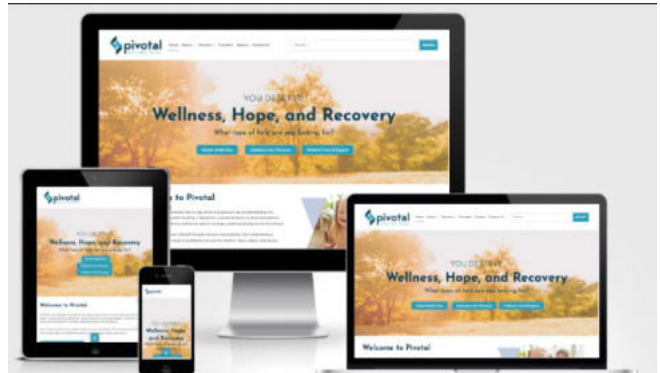
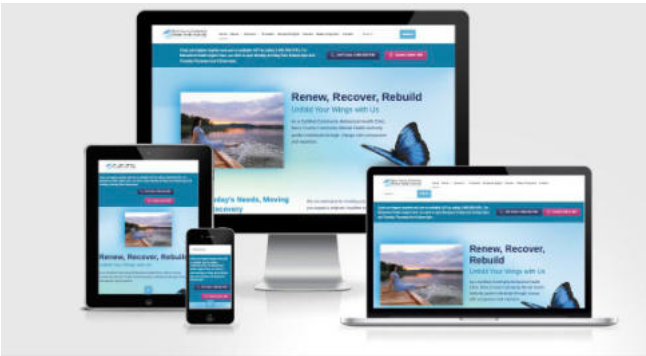
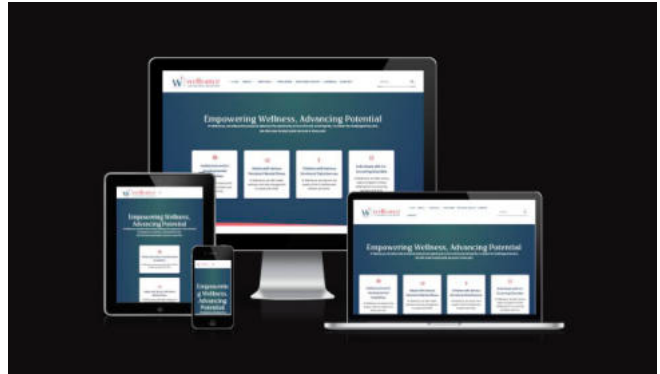
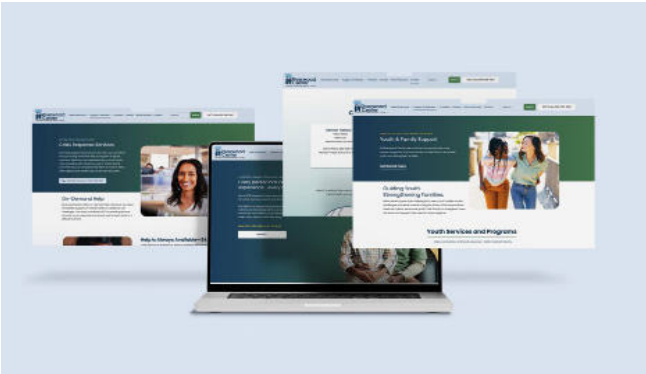
*\*GoDaddy and others run frequent coupons and promos. The above is just their current pricing without any additional promo codes, coupons, or discounts.*

**PLEASE BE AWARE:** If your HD is going to deploy Online Forms or documents that have PHI or HIPAA information on the main website, you CANNOT have shared hosting. You may only deploy a HIPAA/PHI compliant hosting environment. This is a much more costly environment as there must be access controls in place for storing, processing, and transmitting data. We can gladly design and build all of our systems to run within HIPAA/PHI compliant hosting environments (Azure, etc), BUT, you will need to have a direct IT partner to oversee, deploy, sign the BBA, and manage the daily operations of the server. We can gladly recommend our IT partners who excel at this and who we work with daily for others!

If you decide NOT to have PHI or HIPAA information on your website, then you are more than fine in having a shared hosting environment! We have Health Departments that run it both ways, so we can gladly advise or assist you with best options when the time comes!

# Excellence in Action

Below are just a few recent website redesign examples for review (for many, we also built their original sites!). We have designed and developed websites for public health and healthcare organizations across the region, including the Mid-Michigan District Health Department, Barry-Eaton District Health Department, and Northwest Michigan Health Department, along with numerous CMHs, CCBHCs, and healthcare providers. This experience means our team is highly familiar with the unique requirements of a health department, including accessibility standards, compliance considerations, and the practical needs of public health organizations.



# REFERRALS

The most meaningful measure of our work comes from the organizations we serve. We are proud to provide direct references who can speak to our collaborative process, partnership approach, and the results we deliver. This includes partners within the Health Department space, as well as organizations you may already work alongside.

With more than 20 years of experience, we can also share additional references from our nonprofit and for-profit clients to demonstrate the breadth of our work and our long-term commitment to client success.

Just let us know and we'll gladly connect you!

## Barry-Eaton District Health Department

Contact: Emily Smale-Communication Specialist, 517-541-2669 or via email at [esmale@bedhd.org](mailto:esmale@bedhd.org) (also work with Eric Daley & David Kontur on the Eaton IT side)

\*Currently working together for the past 10+ years. Services include website development, during COVID built their custom COVID-19 Dashboards and Reporting Power BI systems, online forms, marketing, digital advertising, compliance updates, graphic design, community partnership campaigns, annual maintenance, and any troubleshooting needed.

## Mid-Michigan District Health Department

Contact: Brady Guilbault-Public Information Officer, 989-227-3113 or via email at [bguilbault@mmdhd.org](mailto:bguilbault@mmdhd.org) (previous to Brady was Leslie Kinnee)

\*Currently working together for the past 9+ years. Services include website development, during COVID built their custom COVID-19 Dashboards, calculators, and Reporting Power BI systems, online forms, marketing, advertising campaigns, annual maintenance, graphic design, and all small and large format printing.

## Health Department of Northwest Michigan

Contact: Janenne Pung- Executive Director, 989-217-6655 or via email at [j.pung@nwhealth.org](mailto:j.pung@nwhealth.org) and/or Tim Hella-Director of IT, 231-547-7655 or via email at [t.hella@nwhealth.org](mailto:t.hella@nwhealth.org)

\*Currently working together for the past 3+ years. Services include website development (both primary and Dental Clinic Site), annual maintenance, online forms, secure board member system, marketing, and any annual troubleshooting needed.

## Pivotal

Contact: Cameron Bullock, MBA - Chief Executive Officer, 269-467-1001 x 308 or via email at [cbullock@pivotalstjoe.org](mailto:cbullock@pivotalstjoe.org)

\*Currently working together for the past 4+ years. Services include corporate rebrand, website development, marketing, digital advertising, social media management, graphic design, recovery campaigns, and small and large format printing.

# OUR PROCESS

At Inspiration Studio, we make web development easy through a proven three-phase process that keeps projects organized and moving forward. Many of the organizations we serve have multiple teams, and stakeholders often need time to review and approve each step. Because of this, our process is designed to be flexible and adapt to your organization's timeline. This approach keeps projects progressing while allowing departments the time they need to collaborate and confidently sign off on each phase.

## **Phase 1** Discovery & Information Gathering 1-2 Weeks

Inspiration Studio will meet with Isabella and any other required members of the BHSJ team to discuss the project details and requirements for the development. Inspiration Studio will provide you with a specific "Website Design Checklist" to assist with content and media curation. I also request at this time full access to your current FTP (file transfer protocol), copies of electronic media housing your general text requested to be posted on your website, and any other electronic media materials to assist in easy design and development of your site.

## **Phase 2** Design & Development 2-4 Weeks

This is where the creative part starts! During the design phase we will take all of the information gathered during Phase I in order to establish prototypes for the functionality which will be developed throughout the site. Once we also determine what the content is going to be and in what format it should exist, we apply the appropriate look and feel for your market and your brand identity. Our goal is to create one singular design concept and apply that look to everything from your website to your print collateral. Our experience in both the online and offline space, allows us to maintain your brand identity from the web, to point of purchase and everywhere in between. After all, your website will be an extension of your branding and awareness!

As a general rule, Phase II is typically a straightforward phase as a direct result of the work done in our preceding phases. Creative designs are converted into HTML and CSS and online forms and applications are developed and produced if requested. We will spin up a demo preview on our servers and provide you with a live URL for your new website review. During this development phase, we will continually update your demo pages until your happy and we receive final sign-off/ approval!

## **Phase 3** Deployment! 1-2 Weeks

Once your demo site is approved, we take the site and launch it 'live' from our server to yours!

After your site goes "live", we provide up to 2 hours of training on the new Wordpress CMS system (if that is what is chosen) for any required team members. As a final step, over the next weeks and months, we measure the success of the site to ensure we achieved the goals set-forth in Phase 1 and ensure no improvements or expansions are required. After all, our success is not possible without your success - and the final phase, like our relationship, never ends! At Inspiration Studio we will be here for you to make the small or large updates that keep your brand and website up-to-date!

# PROJECT COSTS

## Website Design and Development

NRC	Site Discovery/Information Gathering (Project Initiation & Planning)	\$1,500.00
NRC	Site Design & Development	\$10,000.00
NRC	Site Testing & Training	\$1,000.00
NRC	Deployment / Go "Live"	\$1,000.00
NRC WEBSITE PROJECT TOTAL		\$13,500.00

*Worried about expanded deliverables or changes to the scope of project work? Things happen, we understand! We pride ourselves on our client partnerships and the honest relationship we create together! If a unique circumstance presents itself or if you decide to expand the project scope, we are more than happy to sit down together to discuss strategy adjustments, hitting the new deliverables, and the additional time and cost that may be incurred.*



## Next Steps

- Step One:** Give us a call or shoot us an email and let us know you would like to accept our proposal as is, or discuss desired changes! Strategy adjustments can be made as the projects commences to improve effectiveness.
- Step Two:** We will email our standard Web Development Agreement, along with a 50% starting deposit invoice. We will then have you finalize and sign the Agreement, along with the submission of your starting deposit.
- Step Three:** Once the Agreement is signed and your deposit is provided, your project is officially ready to go and we'll kick off with a preliminary meeting to discuss your web development and marketing needs and get started!

# THANK YOU

WE LOOK FORWARD TO PARTNERING  
WITH YOU!

**Michigan Office**

P.O. Box 92  
Hastings, MI 49058

**Alabama Office**

P.O. Box 97  
Gulf Shores, AL 36547

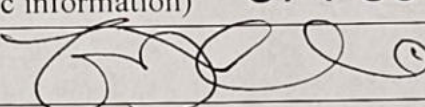
Direct: 616-366-5496  
[julia@inspiration-studio.com](mailto:julia@inspiration-studio.com)  
[www.inspiration-studio.com](http://www.inspiration-studio.com)



**Bid Form**

Redesign and development services for a new website  
 Closing Date: March 11, 2026, at 4:00 PM EST.

We submit a bid to furnish requirements in accordance with the scope of work listed under General Requirements above. I hereby certify that I (we) do not have any substantial conflict of interest sufficient to influence the bidding process on this bid. A conflict of substantial interest is one which a reasonable person would think would compromise the open competitive bid process.

Legal Name of Person or Entity Represented: <b>2nd Story Marketing</b>
Telephone Number: <b>517-227-0472</b>
Email Address: <b>courtney@2ndstorymarketing.net</b>
Mailing Address: <b>49 A. West Chicago St.</b>
City, State, Zip: <b>Coldwater, MI 49036</b>
Social Security / Federal Employer Identification Number: <b>374-86-5611</b> <small>(Information will be redacted from public information)</small>
Signature of Authorized Representative: 
Typed or Printed Name of Signature: <b>Courtney Dirschell</b>
Title: <b>Owner</b>
Date: <b>3-11-2026</b>
Total Cost to Complete Project: <b>\$23,750</b>
Proposed Payment Terms: <b>Schedule outlined in proposal</b>
Estimated Completion Date: <b>9/30/2026</b> <small>(Must be completed and invoiced by September 30, 2026)</small>
Evidence of Accords Must be Attached: <ul style="list-style-type: none"> <li>• Copy of Insurance Certificate</li> <li>• Copy of General Liability</li> <li>• Copy of Workers' Compensation Insurance</li> </ul>
<b>Contractors must provide a minimum of three references.</b>

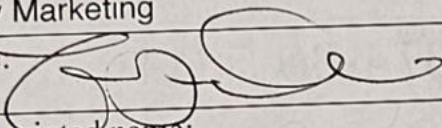


### Certification Statement

By submitting this bid, the potential contactor certifies the following:

- The proposal is signed by an authorized representative of the entity.
- All costs, direct and indirect, have been determined and are included in the pricing proposal.
- No substantial conflict of interest exists which influenced the submitting bid.
- The bidder has read and understands the terms, conditions, and requirements set forth in this request for bid and agrees to them with no exceptions.

Therefore, in accordance to this request for bids and subject to all conditions here in, the undersigned offers and agrees to perform the services in accordance with the specifications and conditions of this request for bid at the price quoted, providing the bid is accepted within 60 days of the date of submission.

Individual / Entity Represented: 2nd Story Marketing
Signature: 
Typed or printed name: Courtney Dirschell
Title: Owner
Date: 3/11/2026



# PROPOSAL

MARCH 11, 2026

**Branch - Hillsdale - St. Joseph  
Community Health Agency  
Website Redesign & Development  
Proposal**

**2nd Story Marketing  
Owner: Courtney Dirschell  
49 A. West Chicago St.  
Coldwater, MI 49036**

## Project Overview

We propose a full redesign and migration of the Branch-Hillsdale-St. Joseph Community Health Agency website to the Wix platform to improve usability, accessibility, security, and long-term maintainability. The goal of this project is to deliver a modern website that allows users to quickly find information and enables non-technical staff to manage content efficiently without reliance on coding or IT support. Proposed Platform: Wix

## Approach and Solution

### User-Centered Design & Navigation

The redesigned website will be structured using a clear, intuitive information architecture focused on minimizing user effort. High-demand services and resources will be accessible within two clicks where possible, supported by clear labeling, contextual links, and a robust search function that prioritizes service pages over document-only results. Navigation will be streamlined to eliminate redundant pathways and reduce confusion for both residents and internal staff.

### Content Management & Ease of Use

The site will be built on Wix's content management system, designed specifically for organizations that need flexibility without technical complexity. Authorized staff will be able to manage and update website content through an intuitive interface that allows real-time edits and immediate publishing. Key capabilities include:

- Add, edit, duplicate, schedule, or remove pages and sections
- Update navigation menus, page layouts, and on-page content blocks
- Post alerts, announcements, news updates, meetings, and events through structured modules
- Upload and manage documents, images, and videos in a centralized media library
- Edit text directly on the page using click-to-edit functionality
- Restore previous versions of pages using revision history tools
- Assign role-based permissions so only approved staff can modify specific sections
- Preview updates before publishing to ensure accuracy and consistency

This approach eliminates reliance on developers or IT staff for routine updates, significantly reducing turnaround time for publishing important public information. It empowers internal teams to keep content current, accurate, and relevant — a critical requirement for public health communication.

### Accessibility & ADA Compliance

The website will utilize Wix's Accessibility Wizard, a built-in tool that scans the site directly within the editor and identifies accessibility issues while guiding corrective actions. Results are organized into Detected Issues and Manual Tasks, allowing both automated fixes and human review where required. The tool is based on the Web Content Accessibility Guidelines (WCAG) established by the World Wide Web Consortium (W3C) and supports ongoing accessibility improvements as content is updated.

#### DISCLAIMER

This document is a non-binding proposal that describes general specifications and estimated pricing related to certain services that 2nd Story Marketing has provided to proposed client. Neither 2nd Story Marketing nor proposed client will rely on, be bound by, or have any obligation under this proposal or any future discussions, proposals, draft agreements or other materials unless 2nd Story Marketing and proposed client sign agreements related to the subject matter.

Accessibility best practices will be applied throughout the site, including proper heading structure, sufficient color contrast, clear labels and link text, keyboard navigation support, accessible forms, and standards-compliant HTML.

While Wix provides robust accessibility tools, no automated solution can guarantee full legal compliance with all regional accessibility regulations. Staff will be guided on how to use the Accessibility Wizard to review and improve compliance in the future as content updates are made. Periodic review is recommended to help maintain accessibility standards over time.

## Hosting and Security

Website hosting and security will be provided through the Wix platform, which deploys and maintains comprehensive technical and organizational measures to protect both the agency's and users' data. Wix's dedicated security team oversees platform integrity, monitors for threats, conducts penetration tests, and implements risk management and security processes.

Key measures include:

- Compliance & Certifications: PCI Level 1, SOC2 Type 2, ISO 27001; hosted on AWS and Google Cloud with industry-standard security.
- Physical & System Security: Secure data centers, access controls, firewalls, intrusion prevention, and vulnerability monitoring.
- Business Continuity & Disaster Recovery: Geographic redundancy, DDoS mitigation, and tested incident response plans.
- Data Protection: HTTPS/TLS 1.2+, AES-256 encryption, two-factor authentication, and privacy safeguards.
- Employee & Vendor Controls: Security training for staff, third-party risk assessments, and strict law enforcement request policies.

This framework ensures the website is secure, reliable, and compliant with industry best practices. The website is not intended to collect or store protected health information (PHI). Website forms should not be used to transmit confidential medical or patient data unless a separate HIPAA-compliant system is implemented. The client is responsible for ensuring appropriate use of forms and data collection tools.

## Functionality & Features

The redesigned website will include:

- Easy-to-use CMS (Wix)
- Clean, modern, accessible design
- Full content migration from the existing website
- Search engine optimization (SEO) best practices
- Secure contact forms that do not expose email addresses
- Responsive design for mobile, tablet, and desktop
- Events and meetings calendar with materials
- Password-protected sections for Board of Health and Administration
- Highlighted banners for alerts and special initiatives
- Integrated site search
- Video embedding capabilities
- Social media integration
- Language switcher
- Reporting tools for traffic analysis and broken link identification

# Project Phases

The project process is designed to be straightforward and collaborative, ensuring the client can provide input at each stage without complication.

## 1. Content Review & Strategic Planning

Before any design work begins, the client completes a thorough review of their existing content to determine what should remain, be revised, or be removed. During this phase, a point-person for the organization will help guide content organization, page structure, and hierarchy to ensure clarity and ease of use for the end user. Point-person will provide a site map of main header pages, and dropdown menu's. The client is encouraged to provide design inspiration, example websites, branding assets, or visual references to help communicate their desired look and feel. This collaborative planning stage ensures the website's content, goals, and structure are aligned from the start — minimizing revisions later and creating a strong foundation for design and development.

## 2. Initial Build & Draft Submission

Using the approved content, direction, and references, the website is professionally built within the Wix platform. This includes layout creation, page structure, visual styling, and functional setup based on best practices for usability and performance. Once the initial build is complete, a URL is provided so the client can view the site live in a real-world environment. This draft represents the full vision of the site and serves as the basis for refinement and feedback.

## 3. Client Review & Revisions

The client is given the opportunity to review the draft in detail, including layout, navigation flow, visual design, and written content. Feedback is collected and incorporated to ensure the site accurately reflects the client's brand, goals, and preferences. This stage is collaborative and focused on refinement — adjusting details, improving clarity, and ensuring the site feels polished, intentional, and user-friendly before finalization.

This proposal includes up to three structured revision rounds during the review phase. Additional revisions or requested changes beyond this scope may be completed at the standard hourly support rate listed in the Budget Details section.

The client retains full responsibility for the accuracy, legality, compliance, and final approval of all website content prior to launch. This includes text, documents, downloadable materials, policies, notices, images, and external links.

## 4. Final Optimization & Technical Enhancements

Once all revisions are approved, the site moves into final optimization. This includes optimizing the mobile version for responsiveness across devices, implementing foundational SEO settings to support search visibility, and applying accessibility adjustments to improve usability for all visitors. These behind-the-scenes enhancements ensure the site is not only visually appealing, but also functional, compliant, and optimized for long-term performance.

## 5. Site Access, Transfer & Publication

After final approval, ownership of the site is transferred from the developer to the designated owner. Step-by-step guidance is provided to assist with purchasing a Wix Premium plan and connecting the domain. A final quality-control review is completed to ensure everything functions correctly before launch. The site is then published, and additional team members are granted access via Wix invites. Team members can create a free Wix account to access and manage the site moving forward, ensuring full ownership and control post-launch.

## Timeline

Estimated project duration: 2-4 months from kickoff to launch, with the overall schedule primarily influenced by the speed of content review, internal approvals, and feedback cycles. To be completed and billed by September 30, 2026.

## Existing Site

With the new site being built on Wix, the entire website can be developed and reviewed without affecting your current website. Your existing site will remain fully live throughout the development process, ensuring there is no interruption to visitors or business operations. Once the new site is finalized and approved, the domain will either be transferred to Wix or simply pointed to the new website. A domain transfer can take several days to fully propagate, while pointing the domain typically happens almost immediately. However, neither option should result in any website downtime, as the current site will remain live until the new one is fully connected.

## Qualifications & Experience

Our lead developer and sub-contractor, Stephanie Kelley has over a decade of combined experience with Wix and project management, having designed and managed multiple websites across various industries. They bring extensive technical expertise, ensuring robust, scalable, and accessible solutions. Together 2nd Story Marketing and Kelley Tech Solutions have worked on 15 websites over the last 5 years as a collaboration, with 2nd Story providing the edited content, custom graphics and Kelley formatting the information into website platform.

Our full testing plan includes evaluation during:

- Initial build phase
- Client review & edit rounds
- Final launch phase

Testing is conducted both by our developer and our team to ensure functionality, responsiveness, and accessibility compliance.

We are highly client-focused, emphasizing responsiveness, collaboration, and delivering practical solutions. We're not just another contractor; we value long-term client relationships and ensure every website we build meets usability, accessibility, and maintainability standards.

**Stephanie Kelley** - Owner and Lead Developer of Kelley Tech Solutions, 20 years experience (Contractor)

**Courtney Dirschell** - Owner of 2nd Story Marketing located in Downtown Coldwater. Communication lead on website projects with clients. 16 years in business.

**Payton Ramos** - Graphic Designer for 2nd Story Marketing creating custom graphics for website (Part-time employee)

**Lexi Cornhill** - Lead Editor for 2nd Story Marketing reviewing and editor for website content (Part-time employee)

Our team combines technical expertise, client-centered service, and extensive Wix experience to deliver websites that are easy to manage, visually appealing, and built to last.

## Website Reference Work

- Children’s Museum of Branch County - [ChildrensMuseumofBranchCounty.com](http://ChildrensMuseumofBranchCounty.com)
- Adapt Inc. - [AdaptInc.com](http://AdaptInc.com)
- VanPeete Industries - [Vanpeete.com](http://Vanpeete.com)
- The Red Thred Solutions - [RedThredSolutions.com](http://RedThredSolutions.com)
- AgainstTheGrain Woodworking - [AgainstTGwoodworking.com](http://AgainstTGwoodworking.com)

## Client References for 2nd Story Marketing

- Jayne Sabaitis, Administrator for Maple Lawn Medical Care Facility  
[jayne.sabaitis@maple-lawn.org](mailto:jayne.sabaitis@maple-lawn.org)
- Amy Duff, Executive Director for Branch County Commission on Aging  
[aduff@burnsidecenter.com](mailto:aduff@burnsidecenter.com)
- Kathie Bappert, Executive Director for Coldwater Community Center  
[kathie@coldwaterbeechhouse.org](mailto:kathie@coldwaterbeechhouse.org)

## Fee Structure

### Page Count Assumptions

The current website consists of approximately 150 pages. As part of the content review, consolidation, and restructuring process, the goal is to reduce the total number of published pages to approximately 125 pages by combining related content, removing outdated or redundant pages, and improving overall information architecture.

A “page” is defined as a unique URL containing distinct content. Sections, accordions, tabs, expandable content, anchor links, or modular content blocks within a single page do not count as additional pages.

### Scope Clarifications & Cost Protections

To ensure transparency and prevent scope overages, the following parameters apply:

- The project fee includes design, development, and migration of up to 125 pages based on content provided and approved during the planning phase.
- Page consolidation, restructuring, and navigation optimization are included to reduce redundancy and improve usability.
- Migration of existing documents (PDFs, policies, reports, agendas, etc.) includes upload, categorization, and linking of materials provided at project kickoff.
- Meetings held with Courtney on the following schedule - May: 1/week, June, July, Aug.: 2/month, Sept: 2 Trainings for staff. Additional meetings \$95/1 hour meeting.

### Out-of-Scope Items

The following services are not included in the base project cost and may be billed at the standard hourly support rate:

- Pages added beyond the 125-page target
- Significant content additions or restructuring requested after approval
- Document remediation, rewriting, or accessibility corrections for existing PDFs
- Late-stage content submissions or approvals outside agreed timelines
- Custom integrations or features not listed in the proposal

### Additional Services

Any work requested outside the defined scope will be billed at a rate of \$95 per hour, with advance notification and approval before work begins.

## Payment Terms/Schedule

### Billing Schedule:

May 1 - \$7,000

June 1 - \$4,187

July 1 - \$4,187

Aug 1 - \$4,187

Sept 1 - \$4,187

*Work will be billed on the first of the month and payments are due Net 15.*

### Notes

1. **Database/Site Deployment:** This is included as a built-in feature of Wix and does not incur an additional cost.
2. **Site/Database Hosting Costs:** Actual costs depend on the Wix plan chosen and may change at any time. Wix also offers discounts for yearly payments or multi-year commitments. Current pricing can be viewed here: <https://www.wix.com/plans>.
3. **Domain Hosting Options:** The client can either keep their domain with their current host or transfer it to Wix. If transferring to Wix, there is an annual hosting cost.

## Website Redesign & Development

Task / Item	Non-Recurring Cost (NRC)	Recurring Cost (RC)
Project Initiation and Planning/Meetings	\$6,000	\$0
Site Development	\$14,000	\$0
Site Testing	\$2,750	\$0
Database Deployment	\$0	\$0
Site/Database Hosting	\$0	\$39 / month
Domain Hosting	\$0	\$20 – \$75 / year
Training (all sections)	\$1,000	\$0
Ongoing Support	\$95/hr	\$0
<b>Total</b>	<b>\$23,750 + \$95/hr</b>	<b>\$488 - 543 / yearly</b>

Proposal respectfully submitted by:



**DISCLAIMER**

This document is a non-binding proposal that describes general specifications and estimated pricing related to certain services that 2nd Story Marketing has provided to proposed client. Neither 2nd Story Marketing nor proposed client will rely on, be bound by, or have any obligation under this proposal or any future discussions, proposals, draft agreements or other materials unless 2nd Story Marketing and proposed client sign agreements related to the subject matter.

## Why 2nd Story?

### Experience

With nearly 35 years of business experience, 2nd Story Marketing has worked with an array of companies and industries. 2nd Story Marketing brings a depth of variety and acumen to your business.

### Knowledge

The 2nd Story Marketing team stays informed on the latest marketing trends and continues to sharpen skills through training. That knowledge is shared with your business and brought to your marketing from day 1.

### Service

2nd Story Marketing provides nearly round-the-clock service. Monitoring social media, web activity, emails, and even answering the telephone when you need us!

### Focus

Often there is no one person within small businesses and organizations responsible for marketing. This can create a splintered marketing approach. 2nd Story Marketing's team brings focus and streamlines your marketing efforts.

### Agility

With a high level of service and focus, 2nd Story Marketing is able to quickly re-direct activities and goals based on response and feedback.

### Strategic Partners

We offer value by being well-connected with resources and experts needed to accomplish deliverables quickly and economically.

### Outside Perspective

2nd Story Marketing provides fresh ideas, an objective opinion, and management of details without the process of "doing what we've always done."

**2nd Story Marketing**  
www.2ndStoryMarketing.net  
517.227.0472

Marketing • Events • Public Relations  
49A W Chicago Street  
Coldwater, MI 49036

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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/10/2026

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Sanders Insurance Agency 235 N. Main St.  Reading MI 49274		<b>CONTACT NAME:</b> Brian Kerspilo <b>PHONE (A/C, No, Ext):</b> (517) 279-9790 <b>E-MAIL ADDRESS:</b> brian@briandoesinsurance.net <b>FAX (A/C, No):</b>	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> FRANKENMUTH MUT INS CO	<b>NAIC #</b> 13986
<b>INSURED</b> 2nd Story Marketing LLC 49 W Chicago St Ste A  Coldwater MI 49036-1692		<b>INSURER B:</b> CAPITOL INDEMNITY CORPORATION	
		<b>INSURER C:</b>	
		<b>INSURER D:</b>	
		<b>INSURER E:</b>	
		<b>INSURER F:</b>	

**COVERAGES** **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			6679675	03/09/2026	03/09/2027	EACH OCCURRENCE	\$ 500,000	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000	
							MED EXP (Any one person)	\$ 5,000	
							PERSONAL & ADV INJURY	\$	
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 1,000,000	
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG	\$ 1,000,000	
	OTHER:							\$	
	<b>AUTOMOBILE LIABILITY</b>						COMBINED SINGLE LIMIT (Ea accident)	\$	
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$	
	<input type="checkbox"/> OWNED AUTOS ONLY		<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident)	\$	
	<input type="checkbox"/> HIRED AUTOS ONLY		<input type="checkbox"/> NON-OWNED AUTOS ONLY				PROPERTY DAMAGE (Per accident)	\$	
								\$	
	<b>UMBRELLA LIAB</b>						EACH OCCURRENCE	\$	
	<input type="checkbox"/> OCCUR						AGGREGATE	\$	
	<b>EXCESS LIAB</b>							\$	
	<input type="checkbox"/> CLAIMS-MADE							\$	
	DED							\$	
	RETENTION \$							\$	
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>			6679674	03/09/2026	03/09/2027	<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N						E.L. EACH ACCIDENT	\$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below		N/A					E.L. DISEASE - EA EMPLOYEE	\$ 500,000
							E.L. DISEASE - POLICY LIMIT	\$ 500,000	
B	PROPC			SGC0006014-11	02/23/2026	02/23/2027	Special	10,000	
							DPLUS	25,000	
							TRIA		

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**

LLC Member Courtney Dirschell Excluded form Worker's Compensation  
 Professional Liability retroactive date 02/23/2016

**CERTIFICATE HOLDER** **CANCELLATION**

2nd Story Marketing	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE <i>Brian Kerspilo</i>

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# 2025

## Annual Report



## *Helping People Live Healthier*



# Contents

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Magnifying Efficiencies	9
How We are Structured	10

## OUR MISSION:

*Helping People Live Healthier*

## OUR VISION:

*To be the trusted health resource for all people.*

- Website: [bhsj.org](http://bhsj.org)
- Facebook: [branch-hillsdale-stjoseph-community-health-agency](https://www.facebook.com/branch-hillsdale-stjoseph-community-health-agency)
- Instagram: [bhsj\\_healthagency](https://www.instagram.com/bhsj_healthagency)
- YouTube: [@bhsjchamedia](https://www.youtube.com/@bhsjchamedia)
- Nextdoor: [branch-hillsdale-stjosephcommunityhealthagency](https://www.nextdoor.com/branch-hillsdale-stjosephcommunityhealthagency)

# BOARD OF HEALTH



Tim Stoll  
Commissioner  
Branch County  
Chair



Brent Leininger  
Commissioner  
Hillsdale County  
Vice-Chair



Jared Hoffmaster  
Commissioner  
St. Joseph County



Jon Houtz  
Commissioner  
Branch County



Kevin Collins  
Commissioner  
Hillsdale County



Rick Shaffer  
Commissioner  
St. Joseph County

# AGENCY DIRECTORS



Rebecca A. Burns, MPH, RS  
Health Officer



Karen Luparello, DO, MPH  
Medical Director



Theresa Fisher, BS  
Director of  
Administrative Services



Heidi Hazel, BSN, RN  
Director of Personal  
Health and Disease  
Prevention



Laura Sutter, BS  
Director of Area Agency  
on Aging Region IIC



Joe Frazier, REHS  
Director of  
Environmental Health

*"Do your little bit of good where you are; it's those little bits of good put together that overwhelm the world."*

*- Desmond Tutu*

# Dear Community:

**To the Residents of Branch, Hillsdale, and St. Joseph Counties,**

On behalf of the Board of Health and the staff of the Branch-Hillsdale-St. Joseph Community Health Agency, I am pleased to share our Fiscal Year (FY) 2025 Annual Report with you.

This report is organized by division and program to provide a clear overview of the services delivered throughout the year. The agency consists of four public health divisions—Administrative Services, Environmental Health, Health Education & Promotion, and Personal Health & Disease Prevention—along with the Division on Aging, which includes the Area Agency on Aging IIC serving Branch and St. Joseph Counties. Within each division, you will find service statistics highlighting the individuals served, communicable diseases investigated, inspections conducted, and permits issued.

Each fiscal year brings new opportunities to strengthen and expand our work. In FY 2025, we continued implementation of a grant from the Office of Highway Safety Planning (OHSP). In September 2025, our agency was honored to receive the Director’s Award to Local Public Health (Second Place) for leading Michigan’s first regional initiative focused on reducing traffic crashes involving horse-and-buggy users. This recognition reflects the collaborative and innovative work made possible through the OHSP grant.

Our Environmental Health Division began the year under the leadership of Director Joe Frazier and introduced a new online portal, providing residents the convenience of applying for Environmental Health services anytime and from anywhere.

The Personal Health & Disease Prevention team expanded services by launching mobile WIC clinics in two Hillsdale County communities—Waldron and Litchfield—using the agency’s mobile unit. The team also welcomed a dental hygienist and began conducting oral health assessments for kindergarten students, further strengthening preventive services for children and families.

Additionally, the Area Agency on Aging IIC successfully secured funding through the new MI Options grant initiative. This opportunity allows us to enhance coordination of services and improve access to supports for older adults and individuals with disabilities in our region.

We are proud of the progress made this year and remain committed to protecting and promoting the health of our communities. We look forward to continuing to serve you and your family in 2026 and beyond.

**Yours in Good Health,**



Rebecca A. Burns, MPH, RS  
Health Officer



## What does Public Health Look Like?



Working with communities and residents to ensure safe drinking water.



Connecting families to services they need in order to be healthy.



Sharing information and resources with healthcare providers to improve health.



Being prepared to respond to our community when they are in need.



Advocating for services and policies that impact community health and safety.



Ensuring a safe food supply no matter if you eat at a business, community event, or home.

## LOCATIONS



### Branch County

570 Marshall Road  
Coldwater, MI  
517-279-9561



### Hillsdale County

20 Care Drive  
Hillsdale, MI  
517-437-7395



### St. Joseph County

1110 Hill Street  
Three Rivers, MI  
269-273-2161



1555 E. Chicago Road  
Suite C

Sturgis, MI  
269-273-2161

# PROTECTING THE ENVIRONMENT

## Protecting Families

### Protecting Our Food Supply

When the gates open on the Branch County Fair, or any of the community events and festivals that involve food vendors, sanitarians from your local health department inspect each vendor to ensure compliance with standards of food safety and hygiene.

Restaurants and food trucks are a large portion of the inspections we complete annually, but our sanitarians also inspect the food service at schools, bars, civic clubs, and local churches.

The purpose of these inspections is to ensure the staff and managers have the resources, training, and education they need to protect the public from food borne illness. Citations are issued for violation of the rules, but all businesses are given the opportunity to correct the issues.

This year our agency received many calls and messages over the summer from residents who found individuals or food vendors on social media offering food items from their homes or other locations. You can find information about licensed food establishments and food trucks at <https://eh.bhjsj.org/#/home>.

We also saw several "cottage food" businesses established in the jurisdiction. A "cottage food" business is allowed to sell up to \$25,000 of products that do not need to be maintained at a "safe" temperature. A few simple examples include items such as baked goods, jams/jellies, or dried items. They must be properly labeled and sold in a hand to hand exchange, no mailing. If you have questions, please call your local health department office.

We encourage residents who wish to sell food, such as BBQ meats, to the public to contact our office. We will gladly educate and assist you with the information and licenses you need to create a small business.

### By the Numbers:



Well Permits  
Issued & Wells  
Inspected  
**1,028**



On-Site Sewage  
Evaluated, Permits  
Issued, & Inspected  
**928**



Food Establishment  
Inspections  
**1,217**



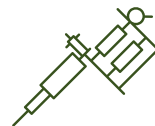
Campground  
Inspections  
**69**



Public Swimming  
Pool Inspections  
**57**



Daycare & Foster  
Care Inspections  
**72**



Body Art Inspections  
**23**



Septage Hauler Inspections  
**37**

### Ensuring Safe Water for Play

Our sanitarians perform inspections and water sample testing on all public pools in the jurisdiction. We look to see if there are appropriate safety devices available, and educate the operators on the appropriate chemical levels needed to prevent swimmers from experiencing any water borne illness.

We also monitor concerns with the lakes and streams in the jurisdiction. In this fiscal year we assisted with providing information to residents regarding Harmful Algal Blooms and contaminants discharged into surface waters.

Harmful Algal Blooms (HABs) occur annually in a few of the lakes in the jurisdiction. When they happen, our staff notifies the public and places educational signage at public beaches and boat launches.

HABs may cause illness in people and pets who play in contaminated water. These illnesses can range from a simple rash to a serious stomach issue. When you see a sign at the public beach or boat launch, use caution, avoid swallowing the water, and shower soon after leaving the water.

# SUPPORTING THE COMMUNITY

## Supporting Families

---

### Helping the Most Vulnerable

In 2025, the agency continued to focus efforts on the Community Health Worker program. Community Health Workers are trained and certified to address the social determinants of health which include economic stability, education access, healthcare access, and community supports.

Community Health Workers have assisted individuals to enroll in health insurance, find resources for food, locate safe housing, complete their education, access rehabilitative services, access medical care, secure transportation, and address urgent financial needs.

The agency partners with additional community agencies and services to ensure needs of residents in our communities are met. Together, we strive to ensure residents with the greatest needs are connected to the resources that can assist them to become healthier by stabilizing their social situation.

Our Community Health Worker and Health Education and Promotion staff participate in monthly outreach activities in all three counties. Outreach events allow us to share information on the services the agency provides to support families and the community.

In 2025, our agency was awarded a grant from the Michigan Office of Highway Safety & Planning to work within the community to reduce the number of crashes involving a horse and buggy. The project included education of the community about road safety, increased visibility, and patience when driving near a horse and buggy.

Our Emergency Preparedness program works with county Emergency Managers and the Michigan Department of Health and Human Services to ensure a coordinated response to emergency situations that could impact public health. We also provide community education to help residents be prepared to respond to and recover from an emergency.

### By the Numbers:



Community Events  
Attended

**77**



Coalitions We  
Participate With

**19**



Community Health  
Worker Clients

**216**



News Stories

**126**



Social Media  
Followers

**5,320**

As a part of preparedness, we executed Memorandums of Understanding (MOUs) with community partners to support emergency response. We also participated in state, regional, and local exercises and drills.

In 2025, we provided personal protective equipment to area farms in response to Highly Pathogenic Avian Influenza, air quality concerns at St. Joseph County Jail, a water quality concern in Union City, Harmful Algal Bloom public access notifications, and conducted communicable disease investigations to prevent outbreaks.

### Communications is Key

The Health Education and Promotions team is responsible for communicating information with the public. This includes management of our social media platforms, maintaining relationships with local media and community partners, press releases, updating website information, developing newsletters, and preparing for crisis communications.

Our digital platforms are the primary vehicle for ensuring the community has information that is timely, relevant, and credible. We encourage residents to follow us on Facebook, Instagram, Nextdoor, and YouTube.

# INVESTING IN FAMILIES

## Investing in You

### All Ages and Stages

Our clinical services are designed to support individuals of all ages. From the cradle to the rocking chair, and everywhere in between, Your Local Health Department is here to serve your needs.

In this fiscal year, we began holding mobile Women, Infants, and Children (WIC) clinics in Waldron and Litchfield. These communities were selected due to limited transportation options in Hillsdale County. Once a month staff take the mobile unit and park at Waldron District Library and across from Litchfield City Hall from 9 a.m. - 3 p.m. These mobile clinics are able to provide all services needed for new enrollment or recertification.

Children's Special Healthcare Services (CSHCS) continued their relationship with University of Michigan Medical Center to host mobile hearing and vision clinics in Algansee township on a quarterly basis. This partnership brings the specialized services needed for children with these conditions closer to home.

Our public health nurses investigated outbreaks and potential exposures to communicable diseases throughout the jurisdiction. This year we conducted investigations related to tuberculosis, chicken pox, pertussis, COVID-19, and sexually transmitted infections. The team provided education to patients and close contacts to reduce disease spread and to protect others.

In preparation for the 2025-26 school year we held Kindergarten One Stop events in each office. These events allowed parents to ensure their child was ready for school with their immunizations, hearing, vision, and oral health assessments all completed in the same visit. Families appreciated having all of these services available in one appointment.

The immunizations program was out in the community to provide adult immunizations at Project Connect events and the Burnside Center. These events allowed us to meet with older adults and others who may be at risk in the community, where they find the supports and services they need.

### By the Numbers:



WIC Participants  
**8,319**



Children Enrolled  
in CSHCS  
**958**



Community  
Referrals Offered  
**17,210**



Kindergarten Oral  
Health Assessments  
**2,230**



Vision Screenings  
**13,519**



Hearing  
Screenings  
**6,511**



Communicable  
Disease Cases  
**1,805**



Immunizations  
Administered  
**5,167**

### Partnering for Oral Health



Your oral health is more important than you may realize. Good oral health contributes to your overall health since the mouth can be a gateway for germs.

Your Local Health Department and My Community Dental Centers continue to partner together to ensure residents have access to low cost and Medicaid dental services. These clinics offer preventative and restorative services. My Community Dental Centers served **10,622 clients** in 2025.

My Community Dental Center has offices in Coldwater, Hillsdale, Sturgis, and Three Rivers. To schedule an appointment call (877) 313-6232. For more information on the services offered, locations, and local office phone numbers, visit [mydental.org](http://mydental.org).

# MONITORING DISEASE

## Protecting Community Health

### Communicable Disease Data

Disease: Confirmed Cases	2021	2022	2023	2024	2025	Total
HIV/AIDS	3	3	0	3	0	9
Multisystem Inflammatory Syndrome	2	2	0	0	0	4
Novel Coronavirus COVID-19	16274	11801	2764	1538	1120	33497
Campylobacter	31	30	44	17	36	158
Cryptosporidiosis	5	7	9	3	9	33
Giardiasis	7	7	7	6	8	35
Norovirus	6	8	3	0	2	19
Salmonellosis	19	12	16	15	26	88
Shiga toxin-producing Escherichia coli --(STEC)	2	4	2	4	7	19
Shigellosis	1	1	1	0	2	5
Yersinia enterocolitica	1	3	3	5	2	14
Meningitis - Aseptic	0	5	4	6	1	16
Meningitis - Bacterial Other	1	2	1	2	2	8
Meningococcal Disease	0	0	0	0	0	0
Streptococcus pneumoniae, Inv	13	15	20	21	17	86
Coccidioidomycosis	1	0	0	2	0	3
Histoplasmosis	3	0	2	6	11	22
Legionellosis	5	1	4	3	2	15
Streptococcal Dis, Inv, Grp A	6	3	18	14	14	55
Streptococcal Toxic Shock	0	0	0	0	0	0
Rabies Animal	3	1	1	0	0	5
Rabies: Potential Exposure & PEP	91	32	28	17	36	204
Chlamydia (Genital)	432	390	429	350	285	1886
Gonorrhea	242	98	102	84	76	602
Latent Tuberculosis Infection	1	5	8	11	19	44
Nontuberculous Mycobacterium	8	9	10	11	9	47
Tuberculosis	1	0	3	2	2	8
Chickenpox (Varicella)	1	1	1	0	7	10
H. influenzae Disease - Inv.	2	6	2	4	3	17
Measles	0	0	0	0	0	0
Mumps	0	0	0	0	0	0
Pertussis	5	10	4	26	29	74
Polio	0	0	0	0	0	0
Shingles	0	1	6	5	2	14
Lyme Disease	12	6	19	41	51	129
Hepatitis A	0	0	1	0	0	1
Hepatitis B, Acute	0	0	1	3	0	4
Hepatitis B, Chronic	1	2	3	3	3	12
Hepatitis B, Perinatal	0	0	0	1	0	1
Hepatitis C, Acute	1	2	3	1	1	8
Hepatitis C, Chronic	25	34	39	17	23	138
Hepatitis C, Perinatal	0	0	0	1	0	1

### Lyme Disease on the Rise

Lyme disease is spread to humans through a bite from an infected tick. This past fiscal year saw an increase in cases across the jurisdiction. Lyme disease cases have increased substantially over the latest five-year period. Reported cases declined from 12 in 2021 to 6 in 2022, then rose sharply to 19 cases in 2023. This upward trend continued, with cases more than doubling to 41 in 2024 and increasing further to 51 in 2025.

Overall, Lyme disease cases increased more than fourfold from 2021 to 2025, indicating a growing public health concern. The sustained rise since 2023 suggests expanding risk in the area and highlights the need for continued surveillance, provider education, and public prevention efforts.

# WORKING WITH NEIGHBORS

## Working with You



### Area Agency on Aging

Over the past year, the Area Agency on Aging IIC team worked to address community needs, provide information & assistance, and develop community partnerships. Our data reflects strong programs & providers who work hard to meet unique needs across our two-county planning & service area.

**Elder Abuse Victim Specialists** served 110 clients this year compared to 44 clients during the last fiscal year. This increase is attributed to awareness of the services offered and referrals made by past clients. Prevention & awareness is the focus of this program.

#### A Success Story from 2025:

Our Elder Abuse Victim Specialist supported a resident in filing for Crime Victim Compensation and collected over \$4,000 for the individual! Crime Victim Compensation is available to all victims of a crime that inflicts bodily harm, or the victim reasonably perceived or actually experienced a threat of injury or death. It covers expenses such as medical, dental, optical, and counseling services not covered by insurance, as well as loss of earnings, repair or replacement of damaged medical devices, funeral expenses, and loss of support for dependents. The program is intended to restore and support recovery.

**Community Living Program's** Care Consultants work with individuals who have complex medical and/or social needs to develop a person-centered support plan. Over 80 individuals were served in the past year. Support for family caregivers also continued with information, assistance and resources.

**MI Options** empowers and provides enhanced information to help individuals make informed decisions about their long-term care needs. The program includes free, unbiased Medicare counseling and Person-Centered Options Counseling for adults needing assistance to support their needs for long-term services and supports.

**Direct Care Worker Premium Pay** assists providers and vendors to increase pay for their direct care workers through a reimbursement program. Over 20,638 hours of care were provided during the fiscal year.

### By the Numbers:



Meals Provided  
**180,284**



Hours of In-Home Services  
**24,240**



Community Services  
**334**



Access to Services  
**11,549**



Legal Services  
**337**



Individuals Served  
**6,696**

**We gratefully acknowledge our provider network who serve individuals with compassionate, high-quality care:**

ADT Health, Alert Medical Alarms, Branch Area Transit Authority, Branch County Commission on Aging, Connect America, Crossroads Homecare, Guardian Trac LLC, Guardian Medical Monitoring, Helping Angels Home Care, HomeJoy, Home Roots Companion & Home Care Services, Legal Services of South Central Michigan, Region 3A Area Agency on Aging/LTC Ombudsman Program, Medical Care Alert, MOM's Meals, St. Joseph County Commission on Aging, St. Joseph County Transportation Authority, Thurston Cares Adult Day Program, and VRI Lifeline.

If you would like more information or have questions about our programs, or community-based services and supports, please contact our office at 517-278-2538, toll free 888-615-8009, or visit our website [www.bhsj.org/aaa](http://www.bhsj.org/aaa).

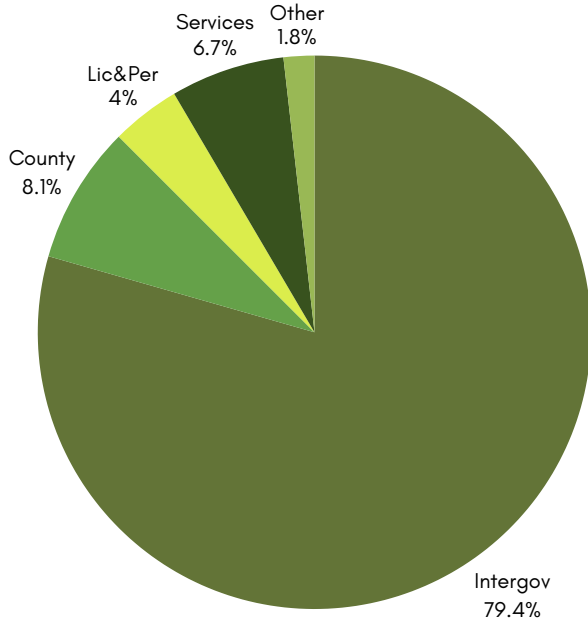
Services/Project	Funding
Operations	\$83,386
Nutrition	\$441,634
In-Home	\$308,821
Community	\$32,816
Access	\$274,789
Legal	\$14,000
Services to Victims of Elder Abuse	\$185,919
American Rescue Plan Act	\$4,786
State In-Home Services – Direct Care Workers	\$68,582
MI Options	\$71,141

# MAGNIFYING EFFICIENCIES

## Stewarding Your Tax Dollars

### 2025 Revenue

**\$9,067,943**

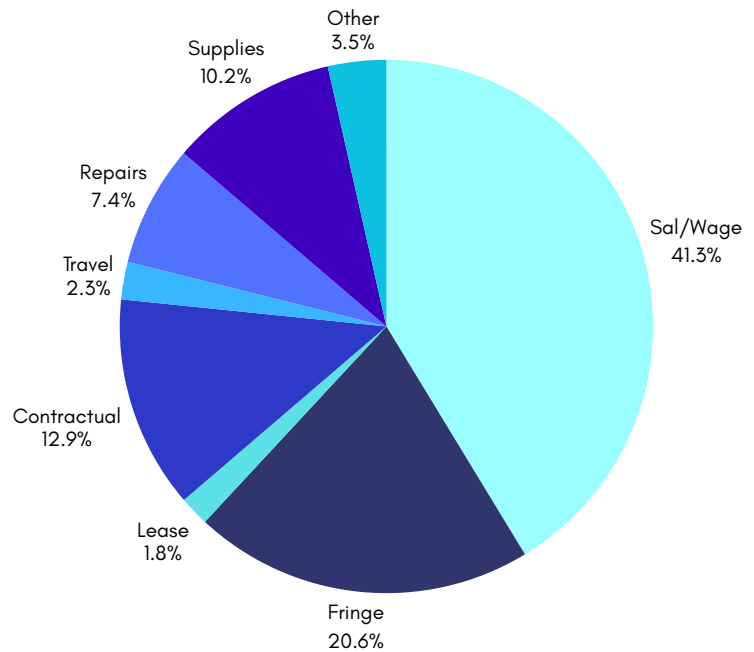


Category	FY24	FY25
Licenses & Permits	\$353,057	\$366,103
Intergovernmental	\$6,264,198	\$7,202,881
County Appropriations & Other Local	\$1,001,853	\$731,276
Charges for Services	\$602,840	\$604,967
Other	\$173,433	\$162,716
<b>Total</b>	<b>\$8,395,381</b>	<b>\$9,067,943</b>

Category	FY24	FY25
Salaries/Wages	\$3,514,343	\$3,593,383
Fringe Benefits	\$1,974,397	\$1,792,915
Supplies & Materials	\$988,075	\$888,097
Contractual	\$1,144,167	\$1,122,351
Travel & Training	\$206,646	\$197,992
Repairs & Maintenance	\$465,930	\$640,500
Bldg & Equip Lease	\$159,571	\$157,386
Other	\$224,002	\$307,317

### 2025 Expenses

**\$8,699,941**



# HOW WE ARE STRUCTURED

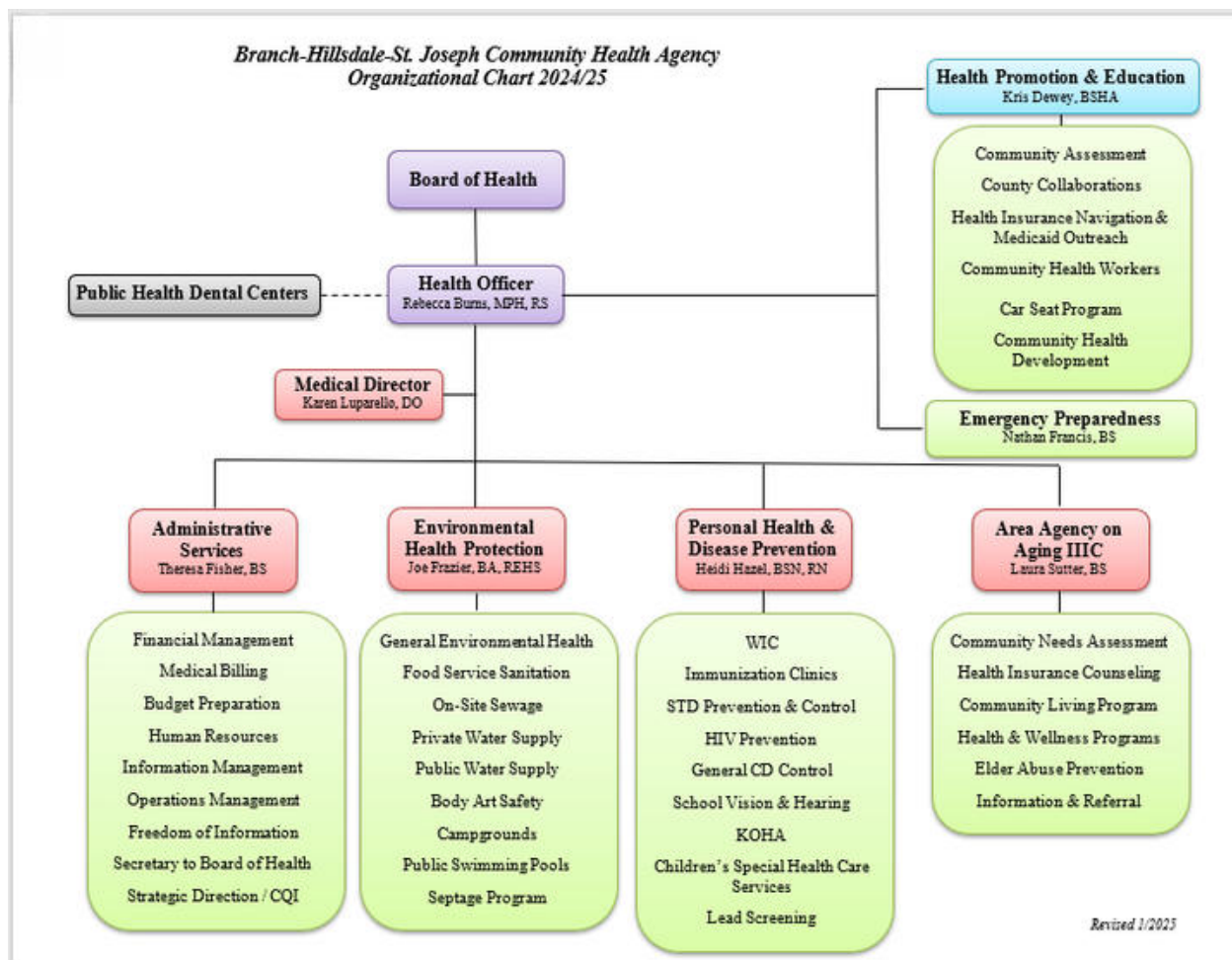
## Maximizing Human Resources

### Committed to Excellence

Our agency serves three counties, 1,604 square miles, 31 communities, and 151,670 residents with approximately 76 full and part-time staff in 2024-25. The agency is lead by the Board of Health, comprised of two county commissioners from each county. The Health Officer is responsible for the operation of the agency. The Health Officer is supported by the Medical Director, a local physician, who advises the agency regarding issues of public health and disease prevention.

Four Division Directors are responsible for program planning, policy development, and staff training. Five supervisors ensure that staff are supported in carrying out the requirements of the programs and services we provide. Sixty-seven talented team members ensure that each individual receives the high quality services that are expected.

Our staff is committed to our mission and vision, desiring to make our communities safe and providing services to support optimal community health.



We hope that you have found the 2024-25 Annual Report informative. We appreciate the community's support and take seriously the trust and financial resources invested in our agency's programs and employees. Your Local Health Department is here to serve you, contact us with any concerns or needs you may have. Thank you!



570 Marshall Road  
Coldwater, Michigan, 49036

Phone: 517-279-9561





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

**2026 CERTIFICATE OF RECOGNITION  
FOR YEARS OF DEDICATED SERVICE**

**Lisa Redmond 5 Years  
Chris Ash 5 Years**

**Cody Johnson 10 Years**

**Jolene Sheffer 15 Years**

**Melissa Gilbert 20 Years**

# PUBLIC COMMENT

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