Strategic Priorities & Budget Plan FY 2019





Board of Directors

- Jill Armentrout
- Mike Cierzniewski
- Steve Fresorger
- Philip Grimaldi, Chair
- John Pugh
- Tracey Raquepaw
- Andrea Schrems
- Jane Sills
- Commissioner Chuck Stack
- Jordan Wise
- Leola Wilson
- Robert Woods

Citizens Advisory Committee

- Lyn Bradfield
- Maggie Davis
- Ann Finta, Chair
- Arletta French
- Tony Krasinski
- Vicki Mikolajski
- Deb Nagel
- Cheryl Nelson
- Jim Nesbit
- Tracey Roat
- Eileen Vescio
- Joan Williams



Mission and Vision Statements

SCCMHA Mission Statement

As the public manager of supports and services for citizens with mental illness, developmental disabilities and chemical dependency and their families, SCCMHA actively strives to develop a system of care and a community that values and embraces the potential and contributions of all individuals with disabilities.

SCCMHA Vision Statement

A belief in potential. A right to dream. An opportunity to achieve.

 45 Core Values and Operating Principles www.sccmha.org/about-us/core-values-and-operating-principles.html



Strategic Priority 1:

Focus on Consumer Services and Outcomes Strategic Goal 1.1:

Increase the Numbers of Persons Served Across All Populations (and Improve Consumer Experience at all Access Points)

- 1.1.2 Improve internal and external messaging to communicate availability of service (access)
 & expanding referral base including MDHHS Entitlements portal
- 1.1.3 Implement / expand services for consumers with co-morbid chronic health conditions, hoarding disorders, transitional age youth, secondary trauma, LGBTQ, Hispanic outreach, veterans and their families.
- 1.1.4 Continue to develop school based services for children NEW
- 1.1.5 Developing Crisis Stabilization at Front Door [Central Access & Intake(CAI) and Mobile Urgent Treatment Team (MUTT)] NEW

Strategic Goal 1.2: Expand the Expectation and Use of the Service Array Across All Populations

- 1.2.1 Work to serve more consumers annually across all populations 🖌
- 1.2.2 Educate customers, family members & guardians about the service array and connecting services to person centered planning to achieve outcomes (benefit information)
- 1.2.3 Educate the workforce (create a mandatory training for record holders on the service array) **NEW**
- 1.2.4 Improve adequacy of Service Array with special emphasis on Ancillary Health:
 - Crisis stabilization, MUTT, speech, PT, OT
 - Dietary, recreational / music / art therapy







Strategic Priority 1:

Focus on Consumer Services and Outcomes

Strategic Goal 1.3:

Demonstrate Improved Consumer Outcomes Through the Continued Use of Technology & Population Health Management

- 1.3.1 Incorporate Substance Use Disorder (SUD) outcome measures into SCCMHA's Quality Plan NEW
- 1.3.2 Monitor at risk populations with chronic health conditions
- 1.3.3 Publish outcome data results for all stakeholders
- 1.3.4 Expand utilization of 9 Touch Protocols within Admissions, Discharges & Transfers (ADT) Notifications / Planning via Great Lakes Care Connect HIE
- 1.3.6 Continue to implement solutions to consumer health care barriers for access and adherence



Strategic Priority 2:

Enhancing Leadership and Succession Planning

Strategic Goal 2.1: Leadership CMH Training

- 2.1.3 Finalize and implement Succession Plan for Management Team
- 2.1.5 Continue leadership in Multicultural Training in Saginaw Community and service network
- 2.1.6 Develop and identify knowledge transfer opportunities / strategies
- 2.1.7 Develop strategies to reduce single person dependency across operations

Strategic Goal 2.2:

Institutionalize Partnership Relationships with Community Partners to Ensure They Are Not Personality Dependent (predictable environment)

- 2.2.1 Continue to institutionalize System of Care collaborative relationships through signed MOUs
- 2.2.2 Plan changeover of relationships and MOUs with Chippewa Tribe, Aleda E. Lutz VA Medical Center, Saginaw County – Consortium of Homeless Assistance Providers (SC-CHAP), Saginaw Public Housing, Specialized Courts and Jail Diversion NEW

Strategic Goal 2.3: Recruitment

- 2.3.1 Develop university internship opportunities for key disciplines (Autism, Psychology, Social Work, etc.)
- 2.3.2 Development of formal onboarding process for new staff
- 2.3.3 Explore the adequacy of Clinical / Administrative Supervision



= Goal completed in 2018 **NEW** = New goal for 2019

Strategic Priority 2:

Enhancing Leadership and Succession Planning

Strategic Goal 2.4: Addressing and Enhancing Staff Safety

- 2.4.1 Develop policy to address staff safety in the community
- 2.4.2 Provide Violence in the Workplace training for all staff
- 2.4.3 Continue site assessments to address identified safety concerns
- 2.4.4 Continue to pursue technology tools for staff safety in the community
 - Rework 8-1-1 system
 - Evaluate personal protection device used by MUTT team
- 2.4.5 Provide protective equipment and clothing to staff entering toxic and hazardous environments 🗸
- 2.4.6 Expansion of external security cameras at SCCMHA sites NEW
- 2.4.7 Upgrade of WIFI locksets to hardwired badge readers at Hancock building NEW



Strategic Priority 3:

Enhanced Electronic Business Environment to Meet Major Agency Priorities

Strategic Goal 3.1: SCCMHA Transitions to Meaningful Use Version of Sentri Software

- 3.1.1 Continue to transition to the Meaningful Use version of Sentri software and Merit-Based Payment System (MIPS) in Sentri II EHR and master use of Zenith and Care Connect 360
 - Adoption of Meaningful Use versions to support quality program
 - Maintain progress in meeting current Meaningful Use requirements in progress / pace in MU implementation

Strategic Goal 3.2: Future Electronic Expansion

- 3.2.1 Health Information Exchanges Continue to monitor with healthcare partners for expanded functionality and interoperability
- 3.2.2 Study / Plan Data Processing Capability to accept external data into our Warehouse interoperability of information coming in from MDHHS or other partners
- 3.2.3 Interfaces to other business partners (Great Lakes Bay Health Centers)
 - Implementation of Great Lakes Health Connect (GLHC) virtual integrated patient record (VIPR) into Sentri II with single sign on
 - Communicate Continuity of Care Documents (CCDs) with local FQHC (GLBHC) and other health care partners(direct messaging)
 - Investigate foreign key capability leading to read only pages in EHR (reciprocal arrangements) with the local FQHC (GLBHC)



Goal completed in 2018 NEW = New goal for 2019

Strategic Priority 3:

Enhanced Electronic Business Environment to Meet Major Agency Priorities

Strategic Goal 3.2: Future Electronic Expansion (continued)

- 3.2.4 Interface with Mid-State Health Network, Medicaid Health Plans
- 3.2.8 Improve current 8-1-1 system technology
- 3.2.9 Explore the feasibility / utility of providing access & reporting in Zenith and Care Connect 360
- 3.2.10 Integration of MiPathways into Sentri II
- 3.2.11 Integration of MSHN's MCG (tool to determine parity in medical necessity)
- 3.2.12 Implementation of REMI software for transition of Substance Use Disorder (SUD) Treatment and Prevention Management
- 3.2.13 Support Integrity and future use of data warehouse (OASIS)
 - Identify data assets and develop protocols for data governance for Data Warehouse
 - Develop policies and guidance for users of data warehouse
 - Refine and protect architecture of data warehouse (management, protection, training, access, tools)



Strategic Priority 3:

Enhanced Electronic Business Environment to Meet Major Agency Priorities

Strategic Goal 3.3: Addressing the Adequacy of the Current Phone System

- 3.3.1 Cost/benefit analysis of replacing current phone system 🗸
- 3.3.2 Implement Zultys phone system agency wide NEW

Strategic Goal 3.4: Mobile Workforce

- 3.4.1 Assess the need of mobile or use of other technology capabilities within each business function.
 - Management Team 🗸
 - Key Non- Clinical Staff with Mobile Needs
 - CAI/CIS 🗸
 - Clinical Staff in the Field NEW
 - Supervisors





Strategic Priority 4:

Diversifying and Expanding our Role in the Healthcare Landscape

Strategic Goal 4.1: Explore and Develop our Potential Roles in Healthcare

- 4.1.1 Continue to seek financial support for Community Care HUB
- 4.1.3 Community Health Improvement Plan (CHIP) Continue Behavioral Health Leadership
- 4.1.4 Continue clinical health care integration efforts
- 4.1.5 Continue to Expand Behavioral Health Consultation models in schools and primary care / pediatric practices
- 4.1.6 Continue to pursue strategic relationships with health care systems
- 4.1.8 Exploration of alternative / preferred payer models with MDHHS in 298 Pilot and PIPBHC grant (SAMHSA)
- 4.1.9 Begin Five (5) year implementation of SAMHSA's Promoting Integration of Primary and Behavioral Health Care (PIPBHC) with MDHHS **NEW**
- 4.1.10 Submit SCCMHA 298 Pilot Proposal 🗸
- 4.1.11 As a selected 298 Pilot Site, actively work with MDHHS and Medicaid Health Plans (MHP) on implementation strategy for go live October 1, 2019



Strategic Priority 4:

Diversifying and Expanding our Role in the Healthcare Landscape

Strategic Goal 4.2: Core Skills for Workforce on Physical Health

- 4.2.1&3 (goals combined) Continue to develop training on specific health conditions to promote health care literacy
- 4.2.2 Formalize and expand medication training beyond the case management core training
- 4.2.4 Population Health Management enhancement with mastery of Zenith and Care Connect 360 🗸
- 4.2.5 Implement "9 Touch" for Core Transitions 🗸

Strategic Goal 4.3:

Achieved Certified Community Behavioral Health Clinic Status

4.3.6 The 2018 Submission to SAMHSA was not funded however, continue to monitor for future funding opportunities or technical assistance **NEW**





Strategic Priority 4:

Diversifying and Expanding our Role in the Healthcare Landscape

Strategic Goal 4.4:

Achieve Managed National Committee for Quality Assurance (NCQA) Behavioral Health Organization Accreditation

- 4.4.1 Complete Readiness Assessment NEW
- 4.4.2 Make decision about level of accreditation to pursue including possible interim or initial survey and make application. **NEW**
- 4.4.3 Develop Work Plan NEW
- 4.4.4 Implement immediately actionable steps NEW
- 4.4.5 Bring existing documents into MBHO compliance in next business cycle including Quality Plan, Annual Quality Report, UM Plan, UM Annual Report, Provider Directory, and all other related contracts and polices NEW
- 4.4.6 Complete survey preparation on NCQA electronic tool NEW
- 4.4.7 Work with NCQA to schedule survey site visit in summer of 2019







Strategic Priority 5:

Improved Health and Quality of Life

Strategic Goal 5.1: Health and Wellness

- 5.1.1 Improved health and wellness for Consumers, Families, and Caretakers
 - Expand prevention wellness activities
 - Symptom Management Expand access and use of myStrength mobile app
- 5.1.2 The Medical Record will Demonstrate Improved Integration with Primary Healthcare ARCHIVED & CONTENT MOVED TO 5.1.8 BELOW
- 5.1.3 Develop Tracking and Analyzing Key Health Indicators and Trends in Sentri II to Inform System Improvement **ARCHIVED & CONTENT MOVED TO 5.1.9 BELOW**
- 5.1.4 Develop Publications of Healthcare Data to Stakeholders (including consumers) ARCHIVED & CONTENT MOVED TO 5.1.12 BELOW
- 5.1.5 Workforce emphasis on the importance of wellness ARCHIVED & CONTENT MOVED TO 5.1.7 BELOW
- 5.1.6 Develop and Implement Strategies for Compliance with Home and Community Based Services (HCBS) Rule with active compliance plans for residential and nonresidential programs by March 2019



Strategic Priority 5:

Improved Health and Quality of Life

Strategic Goal 5.1: Health and Wellness (continued)

- 5.1.7 Contribute to the overall health of the Saginaw Community
 - Provide visible leadership in local wellness and initiatives
 - Participate as one of 11 sites in U.S. for Cancer Control Communities of Practice
 - Participate in planning on Neonatal Abstinence grant with Michigan Public Health Institute (MPHI)
 - Develop Region 5 Perinatal Collaborative with MDHHS NEW
 - Continue to lead the collaboration of the Saginaw Hoarding Task Force
- 5.1.8 Work to reduce the disparities in access to quality health care NEW
 - Increase the capacity of the workforce to identify and address disparities
 - Promote consumer care and coordination among service providers
 - Work to eliminate the stigma associated with mental illness and addiction
- 5.1.9 Integrate health criteria into decision making, where appropriate NEW
 - Increase the use of certified electronic health records and data platforms to identify populations at risk
 - Develop policies and programs to identify at risk consumers and provide effective interventions





Goal completed in 2018 NEW = New goal for 2019

Strategic Priority 5:

Improved Health and Quality of Life

Strategic Goal 5.1: Health and Wellness (continued)

- 5.1.10 Expand the use of integrated data systems to promote cross-sector information exchange **NEW**
 - Promote the use of interoperable systems to support data-driven prevention decisions and implement evidence-based prevention policies and programs
- 5.1.11 Develop a skilled, cross-trained and diverse prevention workforce NEW
 - Enhance the current continuing education and training content to include an emphasis on increasing the capacity of staff to address physical and behavioral health, focusing on prevention in all settings
- 5.1.12 Help consumers improve their mental and physical health through health promotion and disease & injury prevention NEW
 - Develop health promotion activities, which are evidence-based and work to engage consumer participation
- 5.1.13 Ensure appropriate and responsible use of resources to meet the needs of consumers, through use of evidence-based decision making and practices, evaluation and reporting NEW
 - Monitor and report our performance through key performance indicators





Strategic Priority 5: Improved Health and Quality of Life

Strategic Goal 5.1: Health and Wellness (continued)

- 5.1.14 Support the Saginaw community (health professionals, private sector health care providers, and community and non-government organizations) in population health improvement strategies NEW
 - Continue to Participate in Saginaw CHIP process
 - Participate in MiHIA THRIVE Initiative
- 5.1.15 Educate and support consumers and those they identify as family to engage in their own health and well-being **NEW**
- 5.1.16 Include consumers and peers in informing and developing health initiatives NEW
- 5.1.17 Collaborate with community stakeholders to address social determinants of health with special emphasis on the needs of SCCMHA consumers **NEW**
- 5.1.18 Enhance monitoring of the use and prescribing of narcotics to reduce the harms and misuse associated with prescription drugs **NEW**
- 5.1.19 Continue to provide leadership and workforce training to health care region in understanding stigma, access barriers and safe points of service for LGBTQ community with special emphasis on at risk youth and young adults **NEW**



Strategic Priority 6:

Improved Financial Position and Long Term Sustainability

Strategic Goal 6.1: Explore feasibility of Capital Bond with Saginaw County for the Refinancing of the Albert & Woods Building and Other Needed Capital Improvements

- 6.1.1 Review advantages and strategy for capital needs with SCCMHA Board 🗸
- 6.1.2 Review and determine capital improvements needs for next five (5) years 🏹
- 6.1.3 Explore potential bond strategy with County of Saginaw 🏹
- 6.1.4 Establish the procedures with County for procurement of identified capital improvements 🗸

Strategic Goal 6.2: Pursue Operating Cash Loan to Replace MSHN Cash Advance

- 6.2.1 Identify the potential financial institutions available to partner with SCCMHA to support operating cash flow needs
- 6.2.2 Secure approval from MSHN Board of Directors to direct revenue payments to the banking institution supporting the Ioan 🗸
- 6.2.3 Identify the amount of the initial loan and the length of the multi-year debt amortization needed to support cash flow challenges 🗸
- 6.2.4 Pay MSHN back with gratitude for a \$4 Million cash advance by FY 18 year end 🗸



Strategic Priority 6:

Improved Financial Position and Long Term Sustainability

Strategic Goal 6.3: Develop a Long Term Financial Stability Plan

- 6.3.1 Pursue other funding sources including federal, state and local grants for expansion of programs
- 6.3.2 Identify and achieve administrative efficiencies to maximize program revenues
- 6.3.3 Fund succession costs associated with the retirements of key directors





FY 19 Preliminary Operating Budget

TOTAL FY REVENUE:				_		
TOTAL FY REVENUE:		<u>FY19</u>			<u>FY18</u>	
		Preliminary	Percent		Revised	Percent
		Budget	%		Budget	%
Medicaid Funding	\$	61,050,690	75.34%	\$	60,531,983	74.99%
Healthy Michigan Revenue	\$	6,287,983	7.76%		5,512,792.06	6.83%
Autism (Medicaid) Revenue	\$	6,692,123	8.26%	\$	6,667,200	8.26%
General Fund	\$	2,665,724	3.29%	\$	2,672,383	3.31%
Local Funds						
Fee for Service	\$	1,595,448	1.97%		1,421,002	1.76%
County of Saginaw Match	\$	1,050,303	1.30%	\$	1,050,303	1.30%
SOC Expansion - In-Kind Match	\$	-		\$	400,000	0.50%
CW, DCH-SED, DHS-SED Funds	\$	420,300	0.52%	\$	517,100	0.64%
Grant Funds						
Block Grants & Other	\$	1,273,054	1.57%	\$	1,146,853	1.42%
System Of Care Grant (SOC) & Expansion	\$	-	0.00%	\$	797,538	0.99%
	\$	81,035,625	100%	\$	80,717,154	100%
TOTAL FY EXPENDITURES:		<u>FY19</u>			<u>FY18</u>	
		Preliminary	Percent		Revised	Percent
		Budget	%		Budget	%
Wages	\$	14,876,348	18.36%	\$	14,747,509	18.27%
Benefits - PTO, Holiday, Longevity, etc.	\$	1,828,911	2.26%	\$	1,846,816	2.29%
Benefits - Insurances (Medical, Dental etc.)	\$	7,132,635	8.80%	\$	6,803,542	8.43%
*Operating Expenditures - Office	-					
	\$	1,960,852	2.42%	\$	1,295,768	1.61%
*Operating Expenditures - Taxi Cab	\$ \$	1,960,852 426,607	0.53%	\$		
*Operating Expenditures - Taxi Cab *Operating Expenditures - Professional Services				\$	1,295,768	1.61%
*Operating Expenditures - Professional Services *Operating Expenditures - Facilities	\$ \$ \$	426,607	0.53% 1.72% 3.23%	\$ \$ \$	1,295,768	1.61% 0.41% 0.00% 3.23%
*Operating Expenditures - Professional Services	\$ \$	426,607 1,391,437	0.53% 1.72%	\$ \$ \$	1,295,768 327,652 -	1.61% 0.41% 0.00%
*Operating Expenditures - Professional Services *Operating Expenditures - Facilities	\$ \$ \$ \$	426,607 1,391,437 2,613,639	0.53% 1.72% 3.23% 2.43% 0.65%	· \$ \$ \$ \$ \$ \$ \$	1,295,768 327,652 - 2,610,684	1.61% 0.41% 0.00% 3.23% 5.38% 0.42%
*Operating Expenditures - Professional Services *Operating Expenditures - Facilities *Operating Expenditures - Contracts Contract-State Facility Contract-Local Hospitals	\$ \$ \$	426,607 1,391,437 2,613,639 1,965,858	0.53% 1.72% 3.23% 2.43%	· \$ \$ \$ \$ \$ \$ \$	1,295,768 327,652 - 2,610,684 4,344,984	1.61% 0.41% 0.00% 3.23% 5.38%
*Operating Expenditures - Professional Services *Operating Expenditures - Facilities *Operating Expenditures - Contracts Contract-State Facility	\$ \$ \$ \$	426,607 1,391,437 2,613,639 1,965,858 524,823	0.53% 1.72% 3.23% 2.43% 0.65%	· \$ \$ \$ \$ \$ \$	1,295,768 327,652 - 2,610,684 4,344,984 337,832	1.61% 0.41% 0.00% 3.23% 5.38% 0.42%
*Operating Expenditures - Professional Services *Operating Expenditures - Facilities *Operating Expenditures - Contracts Contract-State Facility Contract-Local Hospitals Contract-Residential/CLS/Housing Contract- Other Clinical Support	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	426,607 1,391,437 2,613,639 1,965,858 524,823 5,167,570 28,565,959 13,319,909	0.53% 1.72% 3.23% 2.43% 0.65% 6.38% 35.25% 16.44%	• \$ \$ \$ \$ \$ \$ \$ \$ \$	1,295,768 327,652 - 2,610,684 4,344,984 337,832 5,321,566 29,347,568 12,479,050	1.61% 0.41% 0.00% 3.23% 5.38% 0.42% 6.59% 36.36% 15.46%
*Operating Expenditures - Professional Services *Operating Expenditures - Facilities *Operating Expenditures - Contracts Contract-State Facility Contract-Local Hospitals Contract-Residential/CLS/Housing Contract- Other Clinical Support Contract-Pharmacy	\$ \$ \$ \$ \$ \$ \$ \$	426,607 1,391,437 2,613,639 1,965,858 524,823 5,167,570 28,565,959	0.53% 1.72% 3.23% 2.43% 0.65% 6.38% 35.25% 16.44% 0.93%	• \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,295,768 327,652 - 2,610,684 4,344,984 337,832 5,321,566 29,347,568	1.61% 0.41% 0.00% 3.23% 5.38% 0.42% 6.59% 36.36% 15.46% 0.92%
*Operating Expenditures - Professional Services *Operating Expenditures - Facilities *Operating Expenditures - Contracts Contract-State Facility Contract-Local Hospitals Contract-Residential/CLS/Housing Contract- Other Clinical Support	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	426,607 1,391,437 2,613,639 1,965,858 524,823 5,167,570 28,565,959 13,319,909	0.53% 1.72% 3.23% 2.43% 0.65% 6.38% 35.25% 16.44%	• \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,295,768 327,652 - 2,610,684 4,344,984 337,832 5,321,566 29,347,568 12,479,050	1.61% 0.41% 0.00% 3.23% 5.38% 0.42% 6.59% 36.36% 15.46%
*Operating Expenditures - Professional Services *Operating Expenditures - Facilities *Operating Expenditures - Contracts Contract-State Facility Contract-Local Hospitals Contract-Residential/CLS/Housing Contract- Other Clinical Support Contract-Pharmacy	\$ \$ \$ \$ \$ \$ \$ \$	426,607 1,391,437 2,613,639 1,965,858 524,823 5,167,570 28,565,959 13,319,909	0.53% 1.72% 3.23% 2.43% 0.65% 6.38% 35.25% 16.44% 0.93%	• \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,295,768 327,652 - 2,610,684 4,344,984 337,832 5,321,566 29,347,568 12,479,050	1.61% 0.41% 0.00% 3.23% 5.38% 0.42% 6.59% 36.36% 15.46% 0.92%
*Operating Expenditures - Professional Services *Operating Expenditures - Facilities *Operating Expenditures - Contracts Contract-State Facility Contract-Local Hospitals Contract-Residential/CLS/Housing Contract- Other Clinical Support Contract-Pharmacy Contract-Substance Abuse - 24/7 MSHN PA530 Liability Budget Stabilization	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	426,607 1,391,437 2,613,639 1,965,858 524,823 5,167,570 28,565,959 13,319,909 751,366 - 509,710	0.53% 1.72% 3.23% 2.43% 0.65% 6.38% 35.25% 16.44% 0.93% 0.00% 0.63% 0.00%	• \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,295,768 327,652 - 2,610,684 4,344,984 337,832 5,321,566 29,347,568 12,479,050 744,536 - 509,648	1.61% 0.41% 0.00% 3.23% 5.38% 0.42% 6.59% 36.36% 15.46% 0.92% 0.00% 0.63% 0.00%
*Operating Expenditures - Professional Services *Operating Expenditures - Facilities *Operating Expenditures - Contracts Contract-State Facility Contract-Local Hospitals Contract-Residential/CLS/Housing Contract- Other Clinical Support Contract-Pharmacy Contract-Substance Abuse - 24/7 MSHN PA530 Liability	\$ \$ \$ \$ \$ \$ \$ \$ \$	426,607 1,391,437 2,613,639 1,965,858 524,823 5,167,570 28,565,959 13,319,909 751,366	0.53% 1.72% 3.23% 2.43% 0.65% 6.38% 35.25% 16.44% 0.93% 0.00% 0.63%	• \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,295,768 327,652 - 2,610,684 4,344,984 337,832 5,321,566 29,347,568 12,479,050 744,536	1.61% 0.41% 0.00% 3.23% 5.38% 0.42% 6.59% 36.36% 15.46% 0.92% 0.00% 0.63%



Saginaw County Community Mental Health Authority



Any Questions?



Main Facility

500 Hancock, Saginaw, Michigan 48602 Phone: (989) 797-3400 Toll Free: 1-800-258-8678 Michigan Relay 711

24 Hour Mental Health Emergency Services

(989) 792-9732 Toll Free: 1-800-233-0022

www.sccmha.org



