

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
REGULAR BOARD MEETING
705 N. Zeeb Rd, Ann Arbor, MI
Wednesday, November 8, 2017
6:00 PM



Agenda

	<u>Guide</u>
I. Call to Order	1 min
II. Roll Call	2 min
III. Consideration to Adopt the Agenda as Presented	2 min
IV. Consideration to Approve the Minutes of the 10-11-17 Regular Meeting and Waive the Reading Thereof (Board Action) {Attachment #1}	2 min
V. Audience Participation (5 minutes per participant)	
VI. Old Business	20 min
a. November Finance Report {Attachment #2}	
i. Investment Summary {Attachment #2a}	
VII. New Business	20 min
a. Board Action Request {Attachment #3}	
Consideration to approve the contracts and amendments as presented	
b. Board Action Request {Attachment #4, 4a}	
Consideration to approve the updated Procurement of Goods and Services Policy	
VIII. PIHP CEO Report to the Board	15 min
a. Report from the SUD Oversight Policy Board (OPB)	
IX. Adjournment	

**COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
REGULAR BOARD MEETING MINUTES
October 11, 2017**



Members Present: Greg Adams, Charles Coleman, Barb Cox, Susan Fortney, Roxanne Garber, Sandra Libstorff, Kent Martinez-Kratz, Caroline Richardson, Sharon Slaton, Ralph Tillotson

Members Absent: Judy Ackley, Martha Bloom, Charles Londo

Staff Present: Connie Conklin, Jane Terwilliger, Kathryn Szewczuk, Stephannie Weary, Trish Cortes, Lisa Jennings, Suzanne Stolz, Dana Darrow, Matt McDaniels, Kristen Ora, Marci Scalera

Others Present: Laurie Lutomski,

I. Call to Order
Meeting called to order at 6:00 p.m. by Board Chair R. Tillotson

II. Roll Call
J A quorum of members present was confirmed.

III. Consideration to Adopt the Agenda as Presented

**Motion by R. Garber, supported by C. Coleman, to approve the agenda
Motion carried**

IV. Consideration to Approve the Minutes of the September 13, 2017 Regular Meeting and Waive the Reading Thereof

**Motion by R. Garber, supported by C. Richardson, to approve the minutes of September 13, 2017 Regular Meeting and waive the reading thereof
Motion carried**

V. Audience Participation
None

VI. Old Business
a. October Finance Report
J S. Stolz presented. Discussion followed.

VII. New Business
a. Board Action Request
Consideration to approve the SUD contracts as presented

**Motion by R. Garber, supported by C. Coleman, to approve the SUD contracts as presented
Motion carried**

- b. Board Action Request
Consideration to approve the recommended revisions to the Board Governance Policy Manual

Motion by S. Libstorff, supported by S. Fortney, to approve the recommended revisions to the Board Governance Policy Manual
Motion carried

- c. Election of Regional Board Officers

Motion by S. Libstorff, supported by K. Martinez-Kratz, to unanimously approve the proposed slate of officers: Ralph Tillotson as Chair, Charles Londo as Vice-Chair, and Roxanne Garber as Secretary, as recommended by Nominations Committee Chair Charles Coleman
Motion carried

VIII. PIHP CEO Report to the Board

- a. Report from the SUD Oversight Policy Board (OPB)

) C. Coleman reported that:

- o OPB is in the process of board elections.
- o SUD financials are in order.
- o OPB approved a new process for mini-grant approvals. Mini-grants will be approved for up to \$1,000, no more than 1 mini-grant per agency, up to 5 mini-grants per year in each county.

- b. CEO Report

) J. Terwilliger provided updates on the EHR project, MCHE (Michigan Consortium for Health Care Excellence), Hill Day 2018, and grants for SUD Treatment and Prevention services.

IX. Adjournment

Motion by C. Coleman, supported by K. Martinez-Kratz, to adjourn the meeting
Motion carried

) Meeting adjourned at 6:53 p.m.

Roxanne Garber, CMHPSM Board Secretary



Financial Highlights For the Period Ending September 30, 2017

CMHPSM Strategies:

1. CMHPSM will continue coordinate with CMHSP's to review current year budgets and actual expenditures, amendments are reflected in the final FY17 budget amend.
2. A shared decision model will be utilized to monitor and stabilize budgets and services while projected usage of risk reserves in the current year and subsequent years.
3. CMHPSM will trend traditional Medicaid Eligibles and HMP Enrollees from the most current listing to apply the rates and monitor incoming revenues.
4. CMHPSM is monitoring the HMP overages and is working with the CMHSP's to minimize costs yet providing medically necessary services.

Notes:

-) CMHPSM staff met with each cmhsp to review current year trending and projecting FY18 utilization. The budget amend to FY17 and the original FY18 budget reflected these trends.

**Community Mental Health Partnership of Southeast Michigan
Preliminary Statement of Revenues and Expenditures
For the Period Ending September 30, 2017**

	FY17 Amended Budget	YTD Actual	YTD Budget	YTD Actual O/(U) Budget	Percent Variance Actual to Budget
Operating Revenue					
Medicaid Capitation	\$128,341,084	\$127,495,502	\$128,341,084	(\$845,582)	-0.66%
Medicaid SUD Capitation	1,302,779	1,538,292	1,302,779	235,513	18.08% a
Medicaid Carryforward	5,107,828	5,107,828	5,107,828	-	0.00%
Healthy Michigan Plan	9,467,330	9,528,777	9,467,330	61,446	0.65%
Healthy Michigan Plan SUD	3,189,530	3,213,525	3,189,530	23,995	0.75%
Healthy Michigan Carryforward	1,721,947	1,721,947	1,721,947	-	0.00%
Autism	4,421,285	4,384,082	4,421,285	(37,203)	-0.84%
SUD Community Block Grant	5,274,005	3,774,005	5,274,005	(1,500,000)	-28.44% b
Block Grants	363,942	109,052	363,942	(254,890)	-70.04% c
SUD PA2 - Cobo Tax Revenue	1,819,704	1,668,062	1,819,704	(151,642)	-8.33% d
SUD PA2 - Cobo Tax Use of Reserve	400,000	400,000	400,000	-	0.00%
Local Match	1,577,780	1,577,780	1,577,780	-	0.00%
Other Revenue	253,225	259,657	253,225	6,432	2.54%
Use of Risk Reserve	1,601,422	1,601,422	1,601,422	-	0.00%
Total Revenue	\$164,841,861	\$162,379,931	\$164,841,861	\$(2,461,931)	
Funding For CMHSP Partners					
Lenawee CMHSP	16,777,106	16,777,106	16,777,106	(0)	0.00%
Livingston CMHSP	25,828,009	25,828,009	25,828,009	0	0.00%
Monroe CMHSP	28,932,113	28,932,113	28,932,113	0	0.00%
Washtenaw CMHSP	72,807,687	72,807,687	72,807,687	(0)	0.00%
Total Funding For CMHSP Partners	\$ 144,344,915	\$ 144,344,915	\$144,344,915	\$ 0	
Funding For SUD Services					
Lenawee County	1,501,705	1,315,333	\$1,501,705	(186,372)	-12.41% b
Livingston County	1,926,771	1,498,113	1,926,771	(428,658)	-22.25% b
Monroe County	1,760,581	1,499,281	1,760,581	(261,300)	-14.84% b
Washtenaw County	5,583,247	4,956,081	5,583,247	(627,166)	-11.23% b
Total Funding For SUD Services	\$ 10,772,304	\$ 9,268,808	\$10,772,304	\$(1,503,496)	
Other Contractual Obligations					
Hospital Rate Adjuster	2,207,816	2,090,214	\$2,207,816	(117,602)	-5.33% e
USE and HICA Tax	2,521,089	2,281,590	2,521,089	(239,499)	-9.50% f
Local Match	1,577,780	1,577,780	1,577,780	-	0.00%
Total Other Costs	\$6,306,685	\$5,949,583	\$6,306,685	\$(357,101)	
CMHPSM Administrative Costs					
Salary & Fringe	1,802,998	1,780,400	1,802,998	(22,598)	-1.25%
Administrative Contracts	1,398,669	1,339,924	1,398,669	(58,745)	-4.20%
Board Expense	4,400	4,213	4,400	(187)	-4.25%
All Other Costs	211,890	216,801	211,890	4,910	2.32%
Total Administrative Expense	\$3,417,957	\$3,341,337	\$3,417,957	\$(76,620)	
Carry Forward	\$0		\$0	\$0	
Total Expense	\$164,841,861	\$162,904,644	\$164,841,861	\$(1,937,216)	
Revenues over (under) Expenditures	\$0	\$(524,713)	\$0	\$(524,712)	

Community Mental Health Partnership of Southeast Michigan
Statement of Revenues and Expenditures Notes
For the Period Ending September 30, 2017

a -Over budget due to increased eligibles.

b - SUD funding is under budget due to the Innovative Strategies and STR Block grant funding not used in this fiscal year, but will be carried over to FY18. Revenues correlate with expenditures.

c - Block grants for Integrated Health Care (IHC) and SMI Criminal Justice are new in FY17. IHC is Livingston CMH and Monroe CMH budgeted for \$87,500 respectively, less than 10% of these funds have been utilized. SMI Criminal Justice consists of Washtenaw and Lenawee counties. Lenawee is underspent by approximately 68%. Revenues correlate with expenditures.

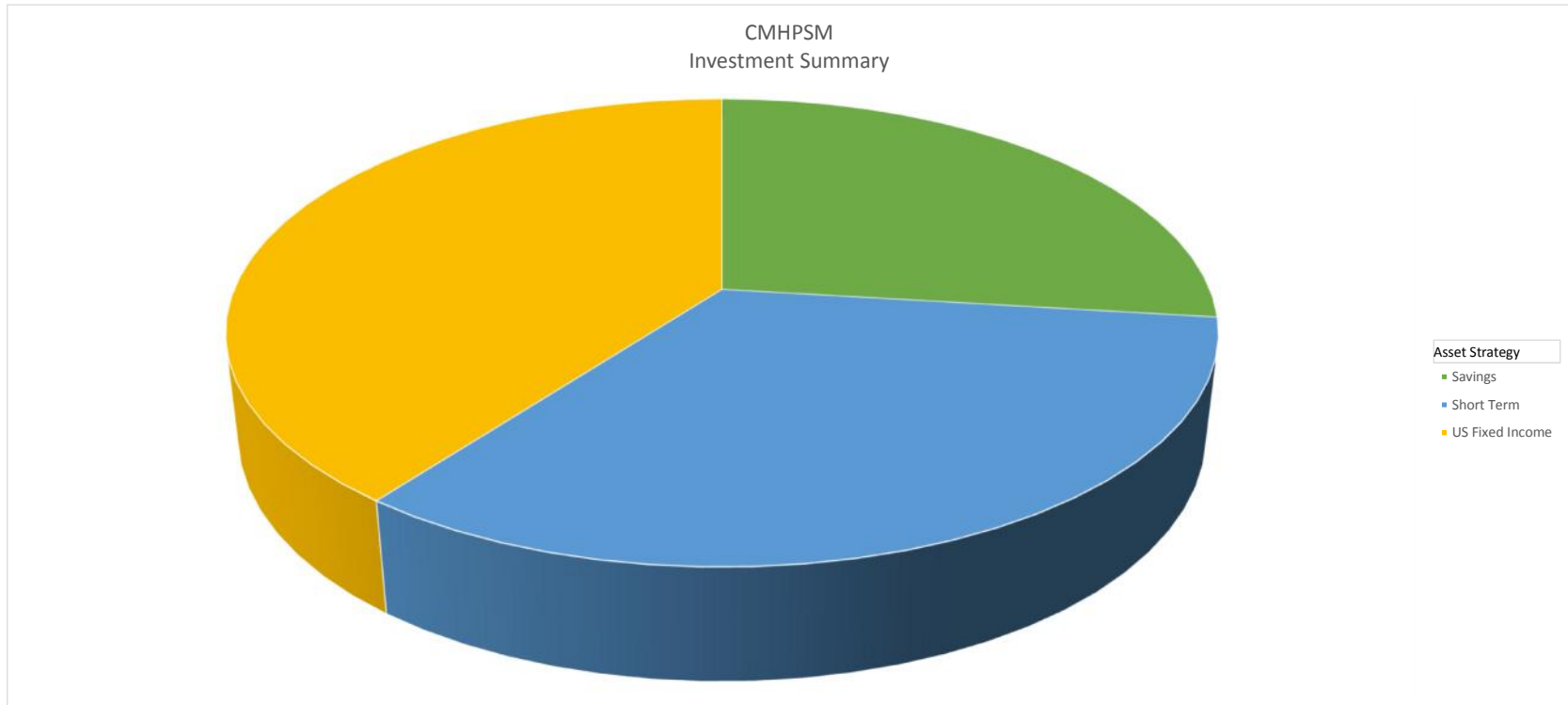
d - PA2 is under budget because fourth quarter has not yet been issued by the state. This will be accrued when the state releases the actual convention facility development fund distributions.

e - Hospital rate adjuster is over budget due to the final payment required was higher than expected.

f - Taxes are under budget due to a prior year tax rebate.

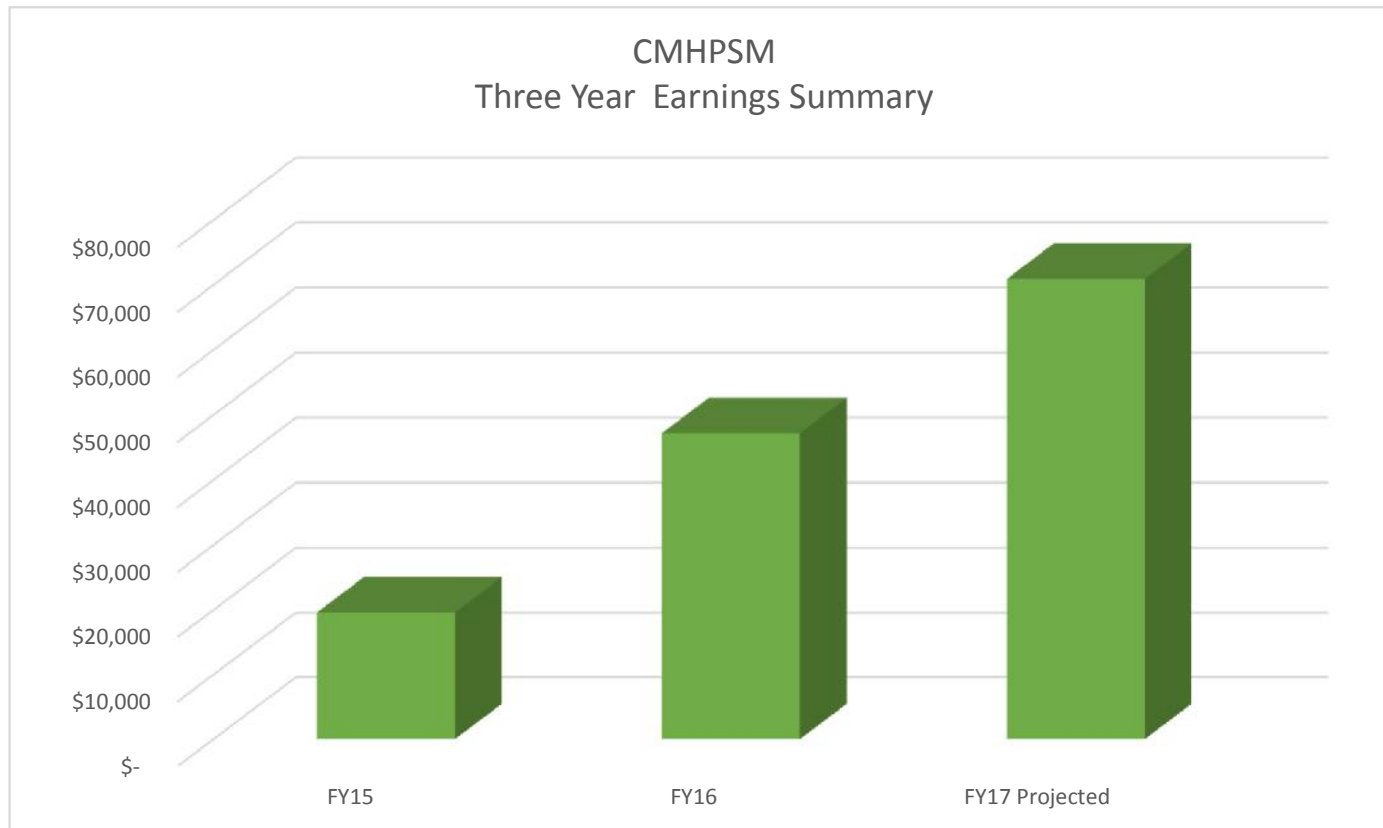
**CMHPSM
Investment Summary
as of September 30, 2017**

<u>Asset Strategy</u>	<u>Description</u>	<u>Value</u>	<u>Est. Annual Income</u>	<u>S&P Rating</u>
Short Term	CP JP MORGAN SECURITIES DATED 07/31/17 DUE 04/27/18 0.00%	1,985,000.80	15,000	A1
Short Term	FEDERAL HOME LOAN MTG CORP DATED 07/12/16 DUE 01/12/18 0.85%	999,410.00	8,500	AA+
Short Term	FEDERAL HOME LOAN MTG CORP DATED 07/26/16 DUE 01/26/18 0.75%	999,020.00	7,500	AA+
Short Term	FEDERAL HOME LOAN BANKSC DATED 08/18/16 DUE 05/18/18 0.90% PAR CALL 11/18/17 CALL 11/18/17 @ 100.00	996,990.00	9,000	AA+
Short Term	CP JP MORGAN SECURITIES DATED 09/29/17 DUE 06/29/18 0.00%	989,510.60	7,500	A1
Short Term	FEDERAL FARM CREDIT BANK DATED 08/08/16 DUE 08/08/18 0.91%	498,015.00	4,550	AA+
US Fixed Income	WELLS FARGO BANK NATL ASSN CD C/D FDIC INS TO LIMITS DUE 08/31/18 1.10%	244,073.00	2,695	NONE
US Fixed Income	NATIONAL BANK OF HOWELL CD DUE 05/07/18 0.45%	251,897.85	1,134	NONE
US Fixed Income	BANK OF ANN ARBOR CD DUE 0/22/18 0.30%	5,015.06	15	NONE
US Fixed Income	BANK OF ANN ARBOR CD DUE 04/24/18 0.30%	10,060.25	30	NONE
US Fixed Income	CHASE - PA2	7,179,379.29	7,179	NONE
Savings	CHASE - OPERATIONS SAVINGS	933,336.02	1,400	NONE
Savings	CHASE - RISK RESERVE SAVINGS	4,281,591.00	6,422	NONE
Total Investments at 09/30/17		<u>\$ 19,373,298.87</u>	<u>70,926</u>	



CMHPSM Investment Earnings Summary Three Year Analysis

<u>FY15</u>	<u>FY16</u>	<u>FY17 Projected</u>
\$ 19,620	\$ 47,198	\$ 70,926





Regional Board Action Request – Contracts

Board Meeting Date: November 8, 2017

Action(s) Requested: Approval of the contracts, agreements and/or amendments listed below.

Organization - Background	Term / Type	Amount / Funding Source
<p>Roslund Prestage – <i>Contractor will provide annual financial and compliance audit services for the CMHPSM PIHP. Auditor was chosen through regional RFQ#2017F.</i></p>	<p>10/1/2017 – 9/30/2018 New Contract</p>	<p>\$25,750.00 Administrative</p>
<p>Macomb Oakland Regional Center – <i>Contractor provides Supports Intensity Scale Assessments capacity within Monroe and Washtenaw, we are requesting a rate increase to expand the assessments in to Monroe County.</i></p>	<p>11/1/2017 – 9/30/2018 Rate Revision</p>	<p>\$614 per assessment Medicaid</p>
<p>All SUD Treatment Providers – <i>Increase fee-for-service reimbursement H2019 Long Term Residential daily rate for all CMHPSM network providers.</i></p>	<p>10/1/2017 – 9/30/2018 Rate Revision</p>	<p>Increase daily rate to \$123.00 / day from \$113.00 / day. SUD Treatment Funding (Medicaid, HMP, Block Grant, PA2)</p>

Recommend: Approval



Regional Board Action Request

Board Meeting Date: November 8, 2017

Action Requested: Approve the updated Procurement of Goods and Services Policy.

) Background: The Procurement of Goods and Services Policy has been updated to be in compliance with 2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. The major changes are:

- Conflict of Interest Section D was removed. A separate Conflict of Interest Policy has been approved by the ROC for comprehensive language to comply with 2 CFR Part 200.
- Removal of Section J regarding local procurement. 2 CFR Part 200 states that geographical preferences may not be prohibited.
- CMHPSM must take all necessary affirmative steps to assure that minority businesses, women’s business enterprises, and labor area surplus firms are used when possible. Section K was added.
- Maintaining Records per 2 CFR Part 200. Section L was added.

In addition, the policy now reflects 2 CFR Part 200 references and Chief Executive Officer references.

Connection to PIHP/MDCH Contract, Regional Strategic Plan or Shared Governance Model:

Board Governance Manual

2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards

Recommend: Approval

Community Mental Health Partnership of Southeast Michigan		Policy: Procurement of Goods and Services	
PIHP Operations			
	Date of Approval 5/15/14	Date of Implementation 5/15/2014	

I. PURPOSE

To establish a policy and standards that the CMHPSM will abide by based upon current federal, state, and all other applicable regulations when purchasing goods and/or services.

II. REVISION HISTORY

Revision Date	Modification	Implementation Date
09/13/17		9/13/17

III. POLICY

It is the policy of the CMHPSM that all procurement of goods and services will follow all federal and state regulations, the standards outlined in this policy and/or any other related CMHPSM operational policies. The CMHPSM will utilize procurement processes that are fair and competitive, allowing the organization to conduct business in the most efficient, cost-effective manner as good stewards of public funding.

IV. DEFINITIONS

Community Mental Health Services Program (CMHSP) – An agency formed under Act 258 of the Public Acts of 1974 as amended (the Mental Health Code) responsible for the delivery of mental health services.

FAR – Federal Acquisition Regulations Volume I & II

Micro-Purchase Threshold – procurement of goods or services in which the aggregate amount does not exceed the micro-purchase threshold of \$3,000.00. FAR Subpart 2.1

P.O. – Purchase Order, purchase orders are used for purchases and contracts over \$3,000.00.

RFP – Request for Proposals

RFI – Request for Information

RFQ – Request for Quotes

Specialty Service Contract – CMHPSM contract with direct service providers of mental health or substance use disorder services, other than CMHPSM-CMHSP agreements.

V. STANDARDS

A. CMHPSM Procurement Thresholds

1. All CMHPSM staff will follow the appropriate approval process and meet all requirements identified for each amount and type of purchase or contract. CMHPSM procurement thresholds are found in Exhibit A.
 - a. No procurement thresholds will be manipulated through multiple purchase orders, separate contracts or any other method to artificially stay beneath the cost limit of the threshold.
 - b. Procurement thresholds for purchases of goods, supplies or materials relates to single purchases from a single vendor at one point in time.
 - c. Procurement thresholds for purchases of services with a contract relate to the term of the contract (if the term is less than one year), or relate to the current fiscal year.
 - d. All purchases of goods and services over \$3,000.00 require a purchase order.
 - e. Equipment or asset purchases over \$5,000.00 per unit or item will be depreciated according to GAAP.

B. Credit Card Utilization

1. Credit card purchases can be used only within the micro purchase threshold and must follow the CMHPSM Issuance and Use of Credit Cards Policy. The use of credit cards for low-cost or quantity purchases, especially in the case of infrequently used vendors, is the preferred purchase method to reduce administrative costs in the Finance Department.

C. Code of Ethics

1. All CMHPSM employees will conduct CMHPSM business operations in an ethical manner which meets the standards of all applicable laws, regulations and CMHPSM policies and procedures.
2. Gifts from vendors and contractors- The CMHPSM Board members, CMHPSM Chief Executive Officer and any CMHPSM employees involved in the procurement or contract development processes are not able to accept gifts of any value from potential or current contractors or vendors.

D. Procedures and Forms

1. CMHPSM Staff will utilize the most recent versions of any procurement, contract request, credit card pre-approval or any other relevant forms. All forms developed for procurement within the CMHPSM shall meet the standards and regulations referenced in this policy.

E. Informal Procurement

1. CMHPSM staff procuring goods or services within the Micro-Purchase Threshold are not required to utilize, but can use an informal procurement process such as: obtaining multiple verbal bids, utilizing a preferred vendor with reduced government pricing, etc. CMHPSM staff are to be good stewards of public funds, and to provide the best value to the CMHPSM organization as a whole.

F. Formal Competitive Procurement

1. Procurement of goods and services that exceed the Micro-Purchase Threshold must utilize formal procurement procedures, unless a bid waiver is approved by the Chief Executive Officer. Formal procurement procedures include the following:
 - a. *Procurement of Goods, Administrative & Professional Services, Leases or Other Non-Specialty Service Contracts* – CMHPSM will utilize appropriate approvals, procurement processes and regulations related to non-specialty services. RFPs, RFQs and RFIs may be used as outlined in the standards of this policy.
 - b. *Procurement of Specialty Service Contracts* – All MDCH rules and regulations outlined in the MDCH-CMHPSM agreements will be followed by the CMHPSM when contracting for any specialty service contracts. Specialty service contracts are used for all clinical service provision agreements, including Mental Health and Substance Abuse services, excluding CMHPSM to CMHSP agreements. Procurement of specialty service contracts must utilize one of the following procurement methods in conjunction with an RFP, RFQ or RFI, unless a bid waiver is approved by the Chief Executive Officer.
 - i. Selective Contracting – CMHPSM may purchase services from a limited number of providers who agree to fulfill contractual obligations for an agreed upon price. The managing entity identifies the specific services to be provided, seeks proposals price bids, and awards contracts to the best bidders. Contracts are let only with a sufficient number of providers to assure adequate access to services. The prospect of increased volume induces providers to bid lower prices.
 - ii. Procurement to Obtain Best Prices Without Selective Contracting – Under an "any willing and qualified provider" process, bids can be solicited and used to set prices for a service, and then contracts or provider agreements can be

offered to any qualified provider that is willing to fulfill the contract and meet the bid price.

- c. *RFP/RFQ/RFI* – Requests for Proposals, Quotes or Information are used to fairly procure goods and services in certain situations.
 - i. Requests for Information – RFIs are used primarily for pilot programs, system development or a service that is unfamiliar to the CMHPSM. Respondents are asked to propose information, asked to identify a problem and provide a solution or propose a unique solution to an issue. A RFI is often used in conjunction with a RFQ.
 - ii. Requests for Quotes – RFQs are usually used when the CMHPSM has identified a specific need for a good or service and is requesting a total project cost, service rate or cost structure. RFQs can be used or are often used after an RFI is issued to complete the procurement process.
 - iii. Requests for Proposals – RFPs are used when more information than solely service cost is requested from respondents. RFPs often require respondents to write a proposal which answers narrative questions, provides cost or rate information and describes vendor experience or expertise in particular fields or projects.
 - iv. Regulations – RFPs, RFQs and RFIs will follow all applicable Federal Acquisition Regulations, specifically FAR Subpart 15. The CMHPSM will follow all FAR regulations related to solicitation, competition, evaluation, award documentation and retention of competitive procurement.
 - 1) *Electronic Notification* – CMHPSM staff will utilize the most cost-effective, efficient means for notification and solicitation of competitive procurement. In most cases electronic bid notification systems will be used.
 - 2) *Retention* – CMHPSM will follow state of Michigan guidelines related to the retention of RFP materials, specifically General Retention Schedule #20: Community Mental Health Services Programs.

G. Bid Waiver or Non-competitive Procurement

1. A non-competitive process may be used in the following situations:
 - a. The service is available only from a single source.
 - b. There is a public exigency or emergency that will not permit a delay for a competitive bid.
 - c. After solicitation of a number of sources, competition is determined inadequate.

- d. The services involved are professional (clinical) services of limited quantity or duration.
- e. The services involved are professional (administrative) services which do not constitute comprehensive management services or significant automated data processing services.
- f. The services are unique and/or the selection of the service provider has been delegated to the consumer under a self-determination program.
- g. The services are existing residential services where continuity of care arrangements is of paramount concern.
- h. With other public entities in accordance with the Intergovernmental Contract Act 35 of 1951.

H. Best Value and Quality Determinations

- 1. CMHPSM can utilize measures such as: best value, service or material quality, organizational references, past organizational performance and/or CMHPSM staff experience, rather than relying solely on the lowest cost bidder in any procurement determinations.

I. Federal Funding Eligibility (Debarment, State Eligibility)

- 1. Whether a competitive procurement or noncompetitive solicitation process is used, the managing entity must ensure that organizations or individuals selected and offered contracts have not been previously sanctioned by the Medicaid program resulting in prohibition of their participation in the program. Individuals and organizations contracting with the CMHPSM must be verified to be eligible for federal participation prior to purchasing goods or services by meeting the following standards: Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or PIHP; Have not—within a three-year period preceding this agreement—been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; Violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; Are not presently indicted or otherwise criminally or civilly charged by a government entity (federal, state or local) with commission of any of the offenses enumerated above; Have not—within a three-year period preceding an agreement—had one or more public transactions (federal, state or local) terminated for cause or default.

J. Federal & State Requirements

1. CMHPSM will ensure full compliance with all of the applicable: Federal CFR regulations, OMB Circulars and any other federal, state or local laws or regulations. The CMHPSM will also ensure compliance with its current Medicaid Agreement with the State of Michigan and the Michigan Medicaid Manual. Federal Acquisition Regulations, CFR regulations and OMB circulars will guide any procurement issues not specifically addressed in the standards of this policy.

K. Affirmative Steps

1. CMHPSM must take all necessary affirmative steps to assure that minority businesses, women's business enterprises, and labor area surplus firms are used when possible. The affirmative steps must include those set forth at 2 C.F.R. § 200.321(b). See Chapter V, ¶ 6.

L. Maintaining Records

1. The Uniform Rules require CMHPSM to maintain records sufficient to detail the history of a procurement. These records include, but are not limited to, the following: rationale for method of procurement, selection of contract type, contractor selection or rejection, and the basis for contract price. 2 C.F.R. § 200.318(i)

VI. EXHIBITS

A. CMHPSM Procurement Thresholds, Approvals and Requirements Table:

		Procurement Type		
		Purchase of Goods	Administrative, Professional Service Contract, Lease	Specialty Service Contracts (Direct Mental Health or Substance Use Disorder Service)
Procurement Threshold	Micro Purchase \$3,000.00 and under.	Approver: Chief Executive Officer or Chief Executive Officer Designee Requirement: No formal quotes required.	Approver: Chief Executive Officer Requirement: No formal quotes required.	Approver: All specialty service contracts require CMHPSM Board approval. Requirement: RFP/RFQ/RFI or bid waiver signed by Chief Executive Officer.
	Chief Executive Officer \$3,000.01-\$25,000.00	Approver: Chief Executive Officer Requirement: 1. Written quotes required or bid waiver signed by Chief Executive Officer. 2. Purchase Order Required	Approver: Chief Executive Officer Requirement: 1. Written quotes required or bid waiver signed by Chief Executive Officer. 2. Purchase Order Required	
	CMHPSM Board \$25,000.01 and over.	Approver: CMHPSM Board Approval Requirement: 1. RFP/RFQ/RFI or bid waiver signed by Chief Executive Officer. 2. Purchase Order Required	Approver: CMHPSM Board Approval Requirement: 1. RFP/RFQ/RFI or bid waiver signed by Chief Executive Officer. 2. Purchase Order Required	

VII. REFERENCES

-) Federal Acquisition Regulation – Volume I: Parts 1 to 51 (Subparts 2.1 and 15); Volume II: Parts 52, 53
-) 41 U.S.C. 57(a) and (b) Anti-Kickback Act of 1986
-) 45 CFR Part 92: Title 45 – Public Welfare, Subtitle A – Department of Health and Human Services, Part 92 – Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments, 92.36 Procurement
-) 2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards
-) MCL Act 317 of 1968 – Contracts of Public Servants with Public Entities (15.321 - 15.3300) [Updated 12/19/2008]

-) Intergovernmental Contract Act 35 of 1951
-) Current MDCH Contract Attachment: Procurement Technical Requirement