

**BENZIE-LEELANAU DISTRICT HEALTH DEPARTMENT  
BOARD OF HEALTH MEETING AGENDA  
Wednesday, February 25, 2026 – 2:00 p.m.  
Benzie Community Resource Center - Ingemar Johansson Conference Room  
6051 Frankfort Highway  
Benzonia, MI 49616**

**or**

**Electronically, via conference call**

To participate, dial: (213) 282-9788 and enter Conference ID: 426 084 121#

**This is a Regular Meeting of the Benzie-Leelanau District Health Department Board of Health. Public Comment is encouraged at the beginning and end of the meeting. An individual's comment time may be limited based on the discretion of the Chair.**

Call to Order/Roll Call

Pledge of Allegiance

Approval of Minutes from the Regular Board of Health Meeting from January 28, 2026.

Approval of the Agenda

Public Comment Period

1. Health Officer Update – Dan Thorell
2. Personnel and Finance Committee Report-Personnel and Finance Committee
  - A. Accounts Payable – Action
  - B. January Financials – Action
3. Staff Reports
  - A. Medical Director – Dr. Joshua Meyerson
  - B. Personal Health – Michelle Klein
  - C. Environmental Health Director – Eric Johnston
  - D. Administrative- Shelley Jablon

Public Comment Period

Board Comments

Adjourn

Personnel and Finance Comm. Meeting- February 25, 2026 1:00 pm  
Benzie Community Resource Center, Ingemar Johansson Conference Room or  
Electronically via conference call:  
(213) 282-9788 and enter Conference ID: 426 084 121#

**BENZIE-LEELANAU DISTRICT HEALTH DEPARTMENT  
BOARD OF HEALTH MEETING  
Wednesday, January 28, 2025 2p.m.  
Leelanau County Government Center  
8527 E. Government Center  
Suttons Bay, MI 49682**

Chairperson Gwenne Allgaier called the meeting to order at 2:02 p.m.

**Members Present:**

Gary Sauer - Benzie County Board of Commissioners  
Gwenne Allgaier – Leelanau County Board of Commissioners  
Dr. David Quimby – Leelanau County Member at Large  
Mark Walter – Leelanau County Board of Commissioners  
Len Mathieu – Benzie County Board of Commissioners

**Members Excused:** Dr. Mark Kuiper – Benzie County Member at Large

**Members Absent:** None

**Staff Present:** Dan Thorell – Health Officer  
Eric Johnston – Director of Environmental Health  
Michelle Klein - Director of Personal Health  
Dr. Joshua Meyerson – Medical Director  
Shelley Jablon – Director of Administrative Services

**Staff Excused:** None

**Pledge of Allegiance**

**Approval of the November 19, 2025 Regular Board of Health Meeting Minutes:**

**Motion By:** Sauer to approve the November 19, 2025 BOH meeting minutes.

**Seconded By:** Dr. Quimby

**Voice Vote:** 5 yeas 0 nay 1 excused 0 absent **Motion carried**

**Approval of the Agenda:**

**Motion By:** Walter to approve the agenda as presented.

**Seconded By:** Sauer

**Voice Vote:** 5 yeas 0 nay 1 excused 0 absent **Motion carried**

**Election of Officers & Committee Assignments:**

**Motion By:** Allgaier to nominate Sauer for Board of Health Vice-Chairperson.

**Voice Vote:** 5 yeas 0 nay 1 excused 0 absent **Motion carried**

**Motion By:** Sauer and Walter to nominate themselves and Dr. Kuiper for the Personnel and Finance Committee.

**Voice Vote:** 5 yeas 0 nay 1 excused 0 absent **Motion carried**

**Motion By:** Dr. Quimby, Mathieu and Allgaier to nominate themselves for Program and Evaluation Committee.

**Voice Vote:** 5 yeas 0 nay 1 excused 0 absent **Motion carried**

**Public Comment -** None

**Health Officer Update- Dan Thorell**

A report was distributed prior to the meeting. Please refer to it for details.

**Accounts Payable**

**Motion By:** Sauer to approve accounts payable and pay the bills in the amount of \$387,922.28.

**Seconded By:** Walter

**Roll Call Vote:** Walter- yea, Allgaier- yea, Quimby - yea, Sauer - yea, Mathieu - yea  
**5 yeas 0 nay 1 excused 0 absent Motion carried**

**September Financial Statements**

**Motion By:** Sauer to accept the financial statements as presented.

**Seconded By:** Walter

**Roll Call Vote:** Walter- yea, Allgaier- yea, Quimby - yea, Sauer - yea, Mathieu - yea,  
**5 yeas 0 nay 1 excused 0 absent Motion carried**

**October Financial Statements**

**Motion By:** Walter to accept the financial statements as presented.

**Seconded By:** Sauer

**Roll Call Vote:** Walter- yea, Allgaier- yea, Quimby - yea, Sauer - yea, Mathieu - yea,  
**5 yeas 0 nay 1 excused 0 absent Motion carried**

**November Financial Statements**

**Motion By:** Walter to accept the financial statements as presented.

**Seconded By:** Sauer

**Roll Call Vote:** Walter- yea, Allgaier- yea, Quimby - yea, Sauer - yea, Mathieu - yea,  
**5 yeas 0 nay 1 excused 0 absent Motion carried**

**December Financial Statements**

**Motion By:** Walter to accept the financial statements as presented.

**Seconded By:** Sauer

**Roll Call Vote:** Walter- yea, Allgaier- yea, Quimby - yea, Sauer - yea, Mathieu - yea  
**5 yeas 0 nay 1 excused 0 absent Motion carried**

**EH Fee Increase**

**Motion By:** Walter moved to approve a \$5.00 increase to Environmental Health service fees that include laboratory costs for coliform bacteria water testing, as reflected in the Environmental Health Fee Schedule, with the revised fees to take effect on February 1, 2026.

**Seconded By:** Mathieu

**Voice Vote:** Walter- yea, Allgaier- yea, Quimby - yea, Sauer - yea, Mathieu - yea  
**5 yeas 0 nay 1 excused 0 absent Motion carried**

**BOH Meeting Dates for 2026**

**Motion By:** Sauer to approve the BOH meeting dates that were listed in the BOH packet.

**Seconded By:** Walter

**Voice Vote:** Walter- yea, Allgaier- yea, Quimby - yea, Sauer - yea, Mathieu - yea  
**5 yeas 0 nay 1 excused 0 absent Motion carried**

**Relabeling the Wage Grid**

**Motion By:** Mathieu to approve of relabeling the Wage Grid as listed in the BOH packet.

**Seconded By:** Dr. Quimby

**Voice Vote:** Walter- yea, Allgaier- yea, Quimby - yea, Sauer - yea, Mathieu- yea  
**5 yeas 0 nay 1 excused 0 absent Motion carried**

**Staff Reports:**

**Medical Director** – Dr. Joshua Meyerson

A report was distributed prior to the meeting. Please refer to it for details.

**Personal Health** – Michelle Klein

A report was distributed prior to the meeting. An updated report and handout were distributed at the beginning of the meeting. Please refer to it for details.

**Environmental Health** – Eric Johnston

A report was distributed prior to the meeting. Please refer to it for details. Discussed January being Radon Action Month and radon kits are free to the public the entire month of January. The BOH members were given free kits to test their homes.

**Administrative** – Shelley Jablon

A report was distributed prior to the meeting. Please refer to it for details.

**Closed Session:**

**Motion By:** Walter to approve entering closed session pursuant to Section 15.268 (1)(a) of Act 267, P.A. 1976, for Health Officer performance evaluation at 3:56 p.m.

**Seconded By:** Sauer

**Voice Vote:** Walter- yea, Allgaier- yea, Quimby - yea, Sauer - yea, Mathieu - yea  
**5 yeas 0 nay 1 excused 0 absent Motion carried**

**Open Session:**

**Motion By:** Allgaier to resume the meeting back to an open session at 4:40 p.m.

**Seconded By:** Sauer

**Voice Vote:** Walter- yea, Allgaier- yea, Quimby - yea, Sauer - yea, Mathieu - yea  
**5 yeas 0 nay 1 excused 0 absent Motion carried**

**Public Comment** – None

**Board Comments** – None

**Adjourn**

**Motion By:** Allgaier to adjourn the BOH meeting at 4:45 p.m.

**Voice Vote:** 6 yeas 0 nay 0 excused 0 absent **Motion carried**

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Gwenne Allgaier, Chair

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Sanna Johnson, Recording Secretary



**Benzie County Office**  
6051 Frankfort Hwy, Ste 100  
Benzonia, MI 49616  
Phone: 231-882-4409  
Fax: 231-882-0143

**Leelanau County  
Personal Health Office**  
7401 E. Duck Lake Rd  
Lake Leelanau, MI 49653  
Phone: 231-256-0200  
Fax: 231-882-0143

**Leelanau County  
Environmental Health Office**  
8527 E. Government Center  
Dr. Suite LL-007  
Suttons Bay, MI 49682  
Phone: 231-256-0201  
Fax: 231-256-0225

[www.bldhd.org](http://www.bldhd.org)

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**To: Benzie-Leelanau District Health Department Board of Health Members**

**From: Daniel Thorell, MS, RS, Health Officer**

**Date: February 25, 2026**

**Subject: February Board of Health Report**

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This month's report focuses on state-level policy and advocacy efforts that directly affect local health departments and the health of Michigan communities.

Each year, the Michigan Association of Local Public Health (MALPH) publishes its legislative and funding priorities to support Michigan's local public health system. The 2026 priorities center on protecting prior state investments, stabilizing the public health workforce, and ensuring statutory frameworks remain functional and current.

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## **Funding Priorities for FY 2026**

### ***Essential Local Public Health Services (ELPHS)***

#### ***Request: \$6.5 million increase (inflationary adjustment)***

In 2023, Michigan committed \$75 million to support essential local public health services—recognizing that a strong public health system is foundational to community safety, workforce stability, and economic resilience.

However, inflation erodes purchasing power. The same dollar amount in 2026 will not sustain the same level of staffing, laboratory capacity, supplies, or contracted services as it did in 2023. Maintaining the real value of the original investment requires approximately **\$81.5 million in 2026**.

This is not a program expansion—it is a maintenance adjustment that preserves legislative intent.

Without an inflation adjustment:

- Local health departments effectively experience a funding cut.
- Service reductions, delayed prevention efforts, or staff losses become likely.
- Workforce instability increases.

Predictable, inflation-adjusted funding:

- Protects prior investments

- Reduces crisis-driven spending
  - Improves long-term planning
  - Stabilizes the public health workforce
- 

### *Children's Special Health Care Services (CSHCS)*

#### *Request: Increase base funding from \$6.7 million to approximately \$14 million*

The Children's Special Health Care Services Program supports children with complex medical needs through care coordination, eligibility assistance, and access to medically necessary services. Local health departments administer the program at the community level.

Program demand has grown substantially:

- Enrollment increased from **29,680 children (2012)** to **51,393 children (2025)** — over 70% growth.
- FY13 base funding of \$5.5 million, adjusted only for enrollment growth, would equal approximately \$9.5 million today.
- Current base funding remains at \$6.7 million.

When both enrollment growth and labor cost increases (46.75% growth per Employment Cost Index for state/local government workers) are considered, sustaining services requires approximately **\$14 million** in base funding.

Underfunding results in:

- Staffing shortages
- High caseloads
- Service delays
- Difficulty retaining experienced nurses and program representatives
- Diversion of local discretionary funds from other core services

Adequate base funding would:

- Stabilize staffing capacity
- Improve responsiveness to families
- Allow departments to manage caseload growth effectively
- Enable increased billable revenue, leveraging the state investment

Strong care coordination prevents costly complications, hospitalizations, and long-term disability costs. This represents prudent upstream investment rather than expanded spending.

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### *Children's Lead Screening and Prevention*

#### *Request: \$10 million additional funding*

The Universal Lead Screening mandate implemented in April 2025 significantly expanded testing requirements statewide without providing additional operational funding.

Local health departments are legally responsible for:

- Case management
- Family outreach
- Environmental investigations

These activities are staff-intensive and cannot be automated.

Impacts include:

- Increased case volume without additional personnel
- Laboratory capacity strain
- Rising compliance and quality control costs
- Delays in follow-up, undermining early intervention goals

Universal screening without funding risks becoming a reporting exercise rather than an effective prevention strategy. To fulfill legislative intent and protect children, adequate funding must accompany the mandate.

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## **Policy Priorities**

### ***Retail Tobacco Sales – SB 462–466***

Tobacco remains the leading cause of preventable death in Michigan. Preventing youth initiation is critical to reducing long-term health and economic costs.

Senate Bills 462, 463, 465, and 466 would establish a tobacco retail licensing system — providing local governments authority to:

- Enforce youth access laws
- Manage retailer density near schools
- Suspend or revoke licenses for repeat violations

States with strong licensing systems demonstrate lower illegal sales to minors. Michigan’s current system is inconsistent and reactive.

These bills passed the Senate on December 18, 2025, and are awaiting a hearing in the House Committee on Regulatory Reform.

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### ***Michigan Food Law***

Michigan’s prior food law expired in December 2024. Food systems operate continuously, and foodborne illness risks do not pause with legislative timelines.

Without an updated statutory framework:

- Enforcement becomes inconsistent
- Food businesses face uncertainty

- Public health risk increases

The Michigan Department of Agriculture and Rural Development has drafted updated legislation, though it has not yet been formally introduced.

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### ***Statewide Septic Code – SB 771***

Senate Bill 771 would establish a consistent statewide regulatory framework for onsite wastewater systems. Previous efforts during the 2023–2024 session advanced further than prior attempts but did not pass both chambers.

The current proposal would:

- Create a technical advisory committee
- Fund a statewide onsite wastewater database
- Establish uniform inspection standards
- Implement a consistent statewide septic code

SB 771 was introduced January 28, 2026, and is awaiting a hearing in the Senate Committee on Natural Resources and Agriculture.

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### ***“Brown Alert” Bill – HB 4427***

House Bill 4427 would amend Michigan’s Emergency Management Act to establish a “Brown Alert” notification when county waters exceed unsafe E. coli levels due to sewage overflows.

The proposal would require health officers to initiate Wireless Emergency Alerts within defined timelines.

Key considerations include:

- Lack of clarity regarding E. coli exceedance thresholds
- Risk of inconsistent application
- Potential public alert fatigue

HB 4427 passed the House on November 5, 2025, and is awaiting a hearing in the Senate Committee on Local Government.

**ACCOUNTS PAYABLE TOTALS**

**(February 2026)**

**BOH meeting**

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01/31/2026.....	\$117,229.43
02/13/2026.....	\$22,764.70
02/13/2026.....	\$18,964.09

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TOTAL	\$158,958.22
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**Benzie Leelanau District Health Department**

Check/Voucher Register - Check Register

API00883 - MISC AP JAN

10100 - Honor Bank Checking

From 1/30/2026 Through 1/31/2026

Effective Date	Document Date	Check Number	Vendor Name	Invoice #	Invoice Description	RU Code	Check Amount	Payment Type
1/31/2026	1/31/2026	47516	Aethen Langdon	01262026AL	REFUND FOR WELL PERMIT THAT WAS NOT NEEDED		240.00	Check
1/31/2026	1/31/2026	47517	Albert & Katy Lannin	01162026	REFUND WELL/SEPTIC EVAL FEE AS DEAL FELL THREW		266.00	Check
1/31/2026	1/31/2026	47518	BCN	260100071267	HEALTH INSURANCE		55,541.31	Check
1/31/2026	1/31/2026	47519	Dearborn Life Insurance Company	01152026DB	LIFE INSURANCE		340.00	Check
1/31/2026	1/31/2026	47520	Delta Dental	RIS0006807540	DENTAL INSURANCE		3,551.87	Check
1/31/2026	1/31/2026	47521	Dolly Parton's Imagination Library GTR	01262	DPIL BOOKS FOR JANUARY 2026		1,203.74	Check
1/31/2026	1/31/2026	47522	Fortress Security	10980	CENTRAL STATION MONITORING 2/1/26-1/31/27		311.88	Check
1/31/2026	1/31/2026	47523	John E. Green Company	217972	REPAIR/CLEANED PTAC UNIT AT BCRC		570.00	Check
1/31/2026	1/31/2026	47524	Johnna Sheldon	01282026JS	REFUND COST OF VACANT LAND EVAL AS ONLY NEEDED ONE DONE		275.00	Check
1/31/2026	1/31/2026	47525	Leelanau County	012626LC	FEB MAINTENANCE COST FOR LEELANAU EH		2,650.00	Check
1/31/2026	1/31/2026	47526	Leelanau Montessori	012626LM	FEBRUARY RENT FOR LEELANAU PH		6,273.28	Check
1/31/2026	1/31/2026	47527	State of Michigan	791-11385034	FOOD SERVICE LICENSE FEES		60.00	Check
1/31/2026	1/31/2026	47528	Sander Scott	01202026SS	REFUND VACANT LAND FEE/ONE ALREADY COMPLETED		335.00	Check
1/31/2026	1/31/2026	47529	SUTTONS BAY TOWNSHIP	01152026SBT	RENTAL OF HERMAN PARK PAVILLION ON 6/17 FROM 9AM-12NOON		100.00	Check
1/31/2026	1/31/2026	47530	SUTTONS BAY TOWNSHIP	01152026SBTA	RENTAL DEPOSIT FOR HERMAN PARK PAVILION ON 6/17/26 AM ONLY		100.00	Check

**Benzie Leelanau District Health Department**

Check/Voucher Register - Check Register

API00883 - MISC AP JAN

10100 - Honor Bank Checking

From 1/30/2026 Through 1/31/2026

Effective Date	Document Date	Check Number	Vendor Name	Invoice #	Invoice Description	RU Code	Check Amount	Payment Type
1/31/2026	1/31/2026	47531	Traverse City Area Public Schools	6357	FEB FLYERS,PROTECTIVE FACT FLYERS, PC RACK CARDS,BUSS CARDS		229.16	Check
1/31/2026	1/31/2026	47532	Trophy Trolley	65252	NAME TAG FOR NEW EMPLOYEE		12.00	Check
1/31/2026	1/31/2026	47533	Westshore Plumbing & Heating LLC	11112	REPLACEMENT OF FURNACE & A/C		10,808.00	Check
1/31/2026	1/31/2026	ACH013126JAN01	Applied Innovation	30430369	COPIERS/PRINTERS		404.66	Voucher
1/31/2026	1/31/2026	ACH013126JAN02	KSS Enterprises	1737079-1	TOILET SEAT COVERS		5.27	Voucher
1/31/2026	1/31/2026	ACH013126JAN03	NHF Sub Benzie-Leelanau	01262026NHF	BENZIE LOAN		4,885.00	Voucher
1/31/2026	1/31/2026	ACH013126JAN04	Nugent Hardware	01252026NH	DRAIN0 FOR LAB SINK		7.99	Voucher
1/31/2026	1/31/2026	ACH013126JAN05	Patagonia Health Inc.	14002	SOFTWARE FOR PH		4,526.22	Voucher
1/31/2026	1/31/2026	ACH013126JAN06	SOS Analytical	258562	WATER TESTING		2,400.00	Voucher
1/31/2026	1/31/2026	ACH013126JAN07	Wyant Computer Services	35615	COMPUTER BATTERY FOR N DRAKE LAPTOP		123.50	Voucher
1/31/2026	1/31/2026	ACH013126JAN08	Wyant Computer Services	35628	COMPUTER MAINTENANCE/LICENS...		9,818.45	Voucher
1/31/2026	1/31/2026	M0013126JAN001	Synchrony Bank/Amazon.com	144G-CXL1CFW9	JAN MANUAL AP		123.49	Check
1/31/2026	1/31/2026	M0013126JAN002	Aflac	755656	JAN MANUAL AP		1,588.28	Check
1/31/2026	1/31/2026	M0013126JAN003	DTE Energy	01122026DTE	JAN MANUAL AP		265.03	Check
1/31/2026	1/31/2026	M0013126JAN004	Synchrony Bank/Amazon.com	1RLN-N43M-M4FK	JAN MANUAL AP		15.99	Check
1/31/2026	1/31/2026	M0013126JAN005	Synchrony Bank/Amazon.com	1MPQ-HFVD-DX4K	JAN MANUAL AP		52.14	Check
1/31/2026	1/31/2026	M0013126JAN006	Synchrony Bank/Amazon.com	1HT1-D1CH-K9XF	JAN MANUAL AP		72.54	Check
1/31/2026	1/31/2026	M0013126JAN007	Cardmember Service	JAN2026DT	JAN MANUAL AP		1,063.54	Check
1/31/2026	1/31/2026	M0013126JAN008	Cardmember Service	JAN2026SJ	JAN MANUAL AP		226.15	Check
1/31/2026	1/31/2026	M0013126JAN009	Lincoln Financial	01141026LF	JAN MANUAL AP		4,309.87	Check
1/31/2026	1/31/2026	M0013126JAN010	Lincoln Financial	01202026LF	JAN MANUAL AP		4,474.07	Check
Report Total							117,229.43	

**Benzie Leelanau District Health Department**

Check/Voucher Register - Check Register

API00885 - JAN MANUAL AP

10100 - Honor Bank Checking

From 1/31/2026 Through 2/13/2026

Effective Date	Document Date	Check Number	Vendor Name	Invoice #	Invoice Description	RU Code	Check Amount	Payment Type
1/31/2026	1/31/2026	M013126JAN001	Consumers Energy	01052026CE	JAN MANUAL AP		3,846.25	Check
1/31/2026	1/31/2026	M013126JAN002	Synchrony Bank/Amazon.com	1TF4-K6M4-V7NV	JAN MANUAL AP		42.74	Check
1/31/2026	1/31/2026	M013126JAN003	Verizon Wireless	6135013603	JAN MANUAL AP		1,181.34	Check
2/13/2026	2/13/2026	47534	Bunek's Hardware	01312026BH	ICE MELT FOR LEELANAU OFFICE		60.76	Check
2/13/2026	2/13/2026	47535	Crystal Lock & Supply	22500	RESET LOCK COMBOS AT LEELANAU OFFICE		120.00	Check
2/13/2026	2/13/2026	47536	National Registry of Food Safety	INV162253	FOOD MANAGER EXAM SCORING FOR CLASSES HELD		493.87	Check
2/13/2026	2/13/2026	47537	Republic Services #239	0239-003932941	GARBAGE SERVICE AT BCRC		700.90	Check
2/13/2026	2/13/2026	47538	The Standard	01312026TS	VISION INSURANCE		582.92	Check
2/13/2026	2/13/2026	ACH013126JAN01	Autumn Jurek	007	IBCLC CONTRACTED SERVICES JAN 2026		125.00	Voucher
2/13/2026	2/13/2026	ACH013126JAN02	Northern Michigan Janitorial Services	3374	CLEANING SERVICES FOR BCRC/JAN 2026		6,820.00	Voucher
2/13/2026	2/13/2026	ACH013126JAN03	Solutions For You, LLC	HA-52RJJQW	CLEANING SERVICES FOR JAN 26 IN LEELANAU PH		1,300.00	Voucher
2/13/2026	2/13/2026	ACH013126JAN04	Maggie Sprattmoran	2387	REFLECTIVE CONSULTATION FOR MIHP & ECD FOR NOV 25		600.00	Voucher
2/13/2026	2/13/2026	ACH013126JAN05	Maggie Sprattmoran	2403	REFLECTIVE CONSULTATION FOR ECD & MIHP FOR JAN 26		600.00	Voucher
2/13/2026	2/13/2026	ACH013126JAN06	The Boat Doctors Plowing	2172	SNOW PLOWING AND SALTING FOR BCRC /JAN 2026		5,940.00	Voucher
2/13/2026	2/13/2026	ACH013126JAN07	Valley City Linen	01272026VCL	RUG CLEANING SVC FOR JAN 26		350.92	Voucher
Report Total							22,764.70	

**Benzie Leelanau District Health Department**

Check/Voucher Register - Check Register

API00886 - MISC AP FEB

10100 - Honor Bank Checking

From 2/13/2026 Through 2/13/2026

Effective Date	Document Date	Check Number	Vendor Name	Invoice #	Invoice Description	RU Code	Check Amount	Payment Type
2/13/2026	2/13/2026	47539	Anderson, Tackman & Company, PLC	140726	PROGRESS BILLING FOR FINANCIAL AUDIT FY ENDING 9/30/25		7,080.00	Check
2/13/2026	2/13/2026	47540	Denny Reamer	02022026	REFUND SEPTIC PERMIT FEE/NOT REPLACING SYSTEM		295.00	Check
2/13/2026	2/13/2026	47541	Grow Benzie	106	BENZIE HSC MEMBERSHIP DUES FOR 2026		1,200.00	Check
2/13/2026	2/13/2026	47542	MPHA-PHN Section	02102026MPHA	2026 MPHA-PHN CONFERENCE REGISTRATION		50.00	Check
2/13/2026	2/13/2026	47543	Ruth Griner	021226RG	VISION TRAINING HOURS & MILEAGE		739.35	Check
2/13/2026	2/13/2026	ACH021326FEB01	Health Department of Northwest Michigan	6537	MEDICAL DIRECTOR FOR FEB 26 AND ADDITIONAL FOR 1/26		5,347.27	Voucher
2/13/2026	2/13/2026	M021326FEB001	MERS Retirement	00175800-1	FEB MANUAL AP		3,857.00	Check
2/13/2026	2/13/2026	M021326FEB002	Charter Communicaitons	5281601020126	FEB MANUAL AP		40.00	Check
2/13/2026	2/13/2026	M021326FEB003	Synchrony Bank/Amazon.com	1JCT-6RL4-ML7Y	FEB MANUAL AP		355.47	Check
Report Total							18,964.09	

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
Revenues			
Fees & Collections			
Sewage Permit Refund	(1,282.00)	0.00	0.00%
Private Pay Clinic Fees	2,153.23	0.00	0.00%
Clinic Fees-Private Insurance	78,585.19	0.00	0.00%
Well Permit Refund	(1,000.00)	0.00	0.00%
Revenue-Campground Trailer Parks	185.00	0.00	0.00%
Revenue-Food Licenses	4,774.00	0.00	0.00%
Revenue-Sewage Permits	43,005.00	0.00	0.00%
Revenue-Well Permits	21,785.00	0.00	0.00%
Revenue-Land Evals/Site Surveys	15,517.00	0.00	0.00%
Revenue-Mortgage Evaluation	51,628.00	0.00	0.00%
Radon Testing	120.00	0.00	0.00%
Land Evaluations - Refund	(1,865.00)	0.00	0.00%
Mortgage Eval Refund	(318.00)	0.00	0.00%
Total Fees & Collections	213,287.42	0.00	0.00%
Medicaid/Medicare Revenue			
Medicaid Clinic Fees	61,032.46	0.00	0.00%
Clinic Fees - Medicare	174,079.14	0.00	0.00%
Managed Health Care Plan	61,650.41	0.00	0.00%
WIC Blood Lead Tests	129.03	0.00	0.00%
Total Medicaid/Medicare Revenue	296,891.04	0.00	0.00%
Cost Based Reimbursement			
Cost Based Reimbursement	59,589.00	0.00	0.00%
Total Cost Based Reimbursement	59,589.00	0.00	0.00%
Federal Financial Participation			
Federal Financial Participation	62,704.25	0.00	0.00%
Total Federal Financial Participation	62,704.25	0.00	0.00%
State Funding (MDHHS-CPBC)			
Prior Year-State Funding	56,412.02	0.00	0.00%

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
MDHHS - CPBC Categorical Grant	406,104.00	0.00	0.00%
Total State Funding (MDHHS-CPBC)	462,516.02	0.00	0.00%
ESLPHS - DEQ & MDHHS			
ELPHS Funding	271,888.00	0.00	0.00%
Total ESLPHS - DEQ & MDHHS	271,888.00	0.00	0.00%
DEQ Type II Grant			
MDEQ Type II Grant	60,676.32	0.00	0.00%
Total DEQ Type II Grant	60,676.32	0.00	0.00%
Other State Fees/Funding			
MDHHS Lic Facilities	664.00	0.00	0.00%
Other State Funding	97,446.00	0.00	0.00%
VFC Vaccine Received	9,871.50	0.00	0.00%
Non-CPBC Funding/Grants	71.00	0.00	0.00%
Total Other State Fees/Funding	108,052.50	0.00	0.00%
Local Grants			
Other Local Grants	16,680.63	0.00	0.00%
Northern Michigan Health Consortium	73,820.62	0.00	0.00%
Michigan Center for Rural Health	54,941.33	0.00	0.00%
31o School Funds	142,547.69	0.00	0.00%
Michigan Health Endowment Foundation	153,020.88	0.00	0.00%
Leelanau Early Childhood	224,199.49	0.00	0.00%
Healthy Futures Grant	12,868.79	0.00	0.00%
Total Local Grants	678,079.43	0.00	0.00%
Reimbursement Funds/Charge for Service			
Food Courses	1,464.00	0.00	0.00%
Reimbursed Revenues	42,135.47	0.00	0.00%
Total Reimbursement Funds/Charge for Service	43,599.47	0.00	0.00%
Rents Collected			
Rents Collected	86,406.40	0.00	0.00%
Total Rents Collected	86,406.40	0.00	0.00%
Interest			
Interest	15,806.29	0.00	0.00%
Total Interest	15,806.29	0.00	0.00%

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
Local Funds			
Local Funds Distributive	205,428.00	0.00	0.00%
Total Local Funds	205,428.00	0.00	0.00%
Total Revenues	2,564,924.14	0.00	0.00%
Expenditures			
Salaries & Wages			
Salaries	1,291,611.22	0.00	0.00%
Insurance Payout Earnings	18,609.62	0.00	0.00%
Total Salaries & Wages	1,310,220.84	0.00	0.00%
Fringe Benefits			
FICA	95,042.24	0.00	0.00%
Medical Insurance	182,349.26	0.00	0.00%
Employer-HSA	32,816.15	0.00	0.00%
Life Insurance	1,732.52	0.00	0.00%
Unemployment Compensation	6,760.65	0.00	0.00%
Retirement	143,892.69	0.00	0.00%
Workers Compensation	9,003.00	0.00	0.00%
Physicals	186.00	0.00	0.00%
Dental Insurance	16,562.57	0.00	0.00%
Disability Insurance	12,647.97	0.00	0.00%
Vision Insurance	2,336.97	0.00	0.00%
Total Fringe Benefits	503,330.02	0.00	0.00%
Agency Operating Expenses			
Membership & Dues	4,379.00	0.00	0.00%
Grant Expenses	44.16	0.00	0.00%
Total Agency Operating Expenses	4,423.16	0.00	0.00%
Supplies & Materials			
Printing	2,504.63	0.00	0.00%
Postage	548.70	0.00	0.00%
Office Supplies	1,784.85	0.00	0.00%
Janitorial Supplies	1,458.33	0.00	0.00%
Water Tests	15,904.62	0.00	0.00%
Food License Fees	681.00	0.00	0.00%
Temporary Campground Fees	510.00	0.00	0.00%
Program Supplies	8,152.15	0.00	0.00%
Other Supplies	4,857.39	0.00	0.00%
Fuel Purchases	48.90	0.00	0.00%

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
Clinic Supplies	113,599.81	0.00	0.00%
VFC Vaccine Received	9,871.50	0.00	0.00%
Total Supplies & Materials	159,921.88	0.00	0.00%
Technology			
Services/Subscriptions			
Computer Maintenance	31,100.00	0.00	0.00%
Subscriptions	10,810.96	0.00	0.00%
Annual Computer Subscriptions/Licensing	27,555.11	0.00	0.00%
Total Technology Services/Subscriptions	69,466.07	0.00	0.00%
Equipment			
Rental/Maintenance			
Equipment Maintenance & Repairs	660.52	0.00	0.00%
Equipment	10,808.00	0.00	0.00%
Vehicle Maintenance and Repairs	4.00	0.00	0.00%
Equipment Rental	481.14	0.00	0.00%
Total Equipment Rental/Maintenance	11,953.66	0.00	0.00%
Medical Operating			
Expenses			
Medical Waste Disposal	330.90	0.00	0.00%
Total Medical Operating Expenses	330.90	0.00	0.00%
General Liability Insurance			
Insurance	15,336.68	0.00	0.00%
Total General Liability Insurance	15,336.68	0.00	0.00%
Consultant Services			
Consultant Services-Audit	620.00	0.00	0.00%
Other Consultant Services	545.49	0.00	0.00%
Total Consultant Services	1,165.49	0.00	0.00%
Contractual Services			
Medical Director	20,962.36	0.00	0.00%
Per Diem	160.00	0.00	0.00%
Other Contractual	5,425.00	0.00	0.00%
Total Contractual Services	26,547.36	0.00	0.00%
Communications			
Telephone	2,990.88	0.00	0.00%
Cell Phone	6,299.65	0.00	0.00%

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
Data Line	5,369.71	0.00	0.00%
Total Communications	14,660.24	0.00	0.00%
Travel & Training			
Mileage	42,194.63	0.00	0.00%
Meals/Lodging	2,941.77	0.00	0.00%
Training & Education	2,889.00	0.00	0.00%
Total Travel & Training	48,025.40	0.00	0.00%
Space Costs			
Space-Electric	13,360.30	0.00	0.00%
Space-Gas	565.96	0.00	0.00%
Janitorial Services	36,758.73	0.00	0.00%
Snow Removal	9,910.00	0.00	0.00%
Loan Payments	19,540.00	0.00	0.00%
Space-Distributed Costs	10,600.00	0.00	0.00%
Space-Grounds & Building Maintenance	17,023.05	0.00	0.00%
BLDHD Rent	46,601.92	0.00	0.00%
Total Space Costs	154,359.96	0.00	0.00%
Total Expenditures	2,319,741.66	0.00	0.00%
Net Revenues/(Expenditures)	245,182.48	0.00	0.00%

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

200 - Environmental Health Division

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
<b>Revenues</b>			
<b>Fees &amp; Collections</b>			
Sewage Permit Refund	(1,282.00)	0.00	0.00%
Well Permit Refund	(1,000.00)	0.00	0.00%
Revenue-Campground Trailer Parks	185.00	0.00	0.00%
Revenue-Food Licenses	4,774.00	0.00	0.00%
Revenue-Sewage Permits	43,005.00	0.00	0.00%
Revenue-Well Permits	21,785.00	0.00	0.00%
Revenue-Land Evals/Site Surveys	15,517.00	0.00	0.00%
Revenue-Mortgage Evaluation	51,628.00	0.00	0.00%
Radon Testing	120.00	0.00	0.00%
Land Evaluations - Refund	(1,865.00)	0.00	0.00%
Mortgage Eval Refund	(318.00)	0.00	0.00%
<b>Total Fees &amp; Collections</b>	<b>132,549.00</b>	<b>0.00</b>	<b>0.00%</b>
<b>State Funding (MDHHS-CPBC)</b>			
Prior Year-State Funding	49,439.05	0.00	0.00%
<b>Total State Funding (MDHHS-CPBC)</b>	<b>49,439.05</b>	<b>0.00</b>	<b>0.00%</b>
<b>ESLPHS - DEQ &amp; MDHHS</b>			
ELPHS Funding	186,012.00	0.00	0.00%
<b>Total ESLPHS - DEQ &amp; MDHHS</b>	<b>186,012.00</b>	<b>0.00</b>	<b>0.00%</b>
<b>DEQ Type II Grant</b>			
MDEQ Type II Grant	60,676.32	0.00	0.00%
<b>Total DEQ Type II Grant</b>	<b>60,676.32</b>	<b>0.00</b>	<b>0.00%</b>
<b>Other State Fees/Funding</b>			
MDHHS Lic Facilities	664.00	0.00	0.00%
Other State Funding	97,446.00	0.00	0.00%
<b>Total Other State Fees/Funding</b>	<b>98,110.00</b>	<b>0.00</b>	<b>0.00%</b>
<b>Reimbursement Funds/Charge for Service</b>			
Food Courses	1,464.00	0.00	0.00%
Reimbursed Revenues	30.00	0.00	0.00%
<b>Total Reimbursement Funds/Charge for Service</b>	<b>1,494.00</b>	<b>0.00</b>	<b>0.00%</b>
<b>Local Funds</b>			

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

200 - Environmental Health Division

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
Local Funds Distributive	27,156.00	0.00	0.00%
Total Local Funds	27,156.00	0.00	0.00%
Total Revenues	555,436.37	0.00	0.00%
<b>Expenditures</b>			
<b>Salaries &amp; Wages</b>			
Salaries	335,619.57	0.00	0.00%
Insurance Payout Earnings	4,854.88	0.00	0.00%
Total Salaries & Wages	340,474.45	0.00	0.00%
<b>Fringe Benefits</b>			
FICA	24,998.70	0.00	0.00%
Medical Insurance	46,336.86	0.00	0.00%
Employer-HSA	7,072.76	0.00	0.00%
Life Insurance	423.84	0.00	0.00%
Unemployment Compensation	1,962.49	0.00	0.00%
Retirement	37,139.26	0.00	0.00%
Workers Compensation	2,344.94	0.00	0.00%
Physicals	43.00	0.00	0.00%
Dental Insurance	4,024.58	0.00	0.00%
Disability Insurance	3,378.16	0.00	0.00%
Vision Insurance	579.61	0.00	0.00%
Total Fringe Benefits	128,304.20	0.00	0.00%
<b>Agency Operating Expenses</b>			
Membership & Dues	30.00	0.00	0.00%
Total Agency Operating Expenses	30.00	0.00	0.00%
<b>Supplies &amp; Materials</b>			
Printing	210.59	0.00	0.00%
Postage	73.94	0.00	0.00%
Office Supplies	237.27	0.00	0.00%
Water Tests	14,590.00	0.00	0.00%
Food License Fees	681.00	0.00	0.00%
Temporary Campground Fees	510.00	0.00	0.00%
Program Supplies	600.54	0.00	0.00%
Other Supplies	376.60	0.00	0.00%
Fuel Purchases	48.90	0.00	0.00%
Total Supplies & Materials	17,328.84	0.00	0.00%

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

200 - Environmental Health Division

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
Technology			
Services/Subscriptions			
Computer Maintenance	5,439.35	0.00	0.00%
Annual Computer Subscriptions/Licensing	11,551.29	0.00	0.00%
Total Technology Services/Subscriptions	16,990.64	0.00	0.00%
Equipment			
Rental/Maintenance			
Equipment Rental	181.68	0.00	0.00%
Total Equipment Rental/Maintenance	181.68	0.00	0.00%
Contractual Services			
Medical Director	6,288.72	0.00	0.00%
Total Contractual Services	6,288.72	0.00	0.00%
Communications			
Telephone	645.41	0.00	0.00%
Cell Phone	800.00	0.00	0.00%
Data Line	1,686.43	0.00	0.00%
Total Communications	3,131.84	0.00	0.00%
Travel & Training			
Mileage	21,018.30	0.00	0.00%
Meals/Lodging	276.06	0.00	0.00%
Training & Education	225.00	0.00	0.00%
Total Travel & Training	21,519.36	0.00	0.00%
Space Costs			
Space-Distributed Costs	23,633.85	0.00	0.00%
Total Space Costs	23,633.85	0.00	0.00%
Distributed Costs - Administrative			
Administration O/H	33,947.73	0.00	0.00%
Total Distributed Costs - Administrative	33,947.73	0.00	0.00%
Total Expenditures	591,831.31	0.00	0.00%
Net Revenues/(Expenditures)	(36,394.94)	0.00	0.00%

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

910 - Personal Health Division

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
Revenues			
Fees & Collections			
Private Pay Clinic Fees	2,153.23	0.00	0.00%
Clinic Fees-Private Insurance	78,585.19	0.00	0.00%
<b>Total Fees &amp; Collections</b>	<b>80,738.42</b>	<b>0.00</b>	<b>0.00%</b>
Medicaid/Medicare Revenue			
Medicaid Clinic Fees	61,032.46	0.00	0.00%
Clinic Fees - Medicare	174,079.14	0.00	0.00%
Managed Health Care Plan	61,650.41	0.00	0.00%
WIC Blood Lead Tests	129.03	0.00	0.00%
<b>Total Medicaid/Medicare Revenue</b>	<b>296,891.04</b>	<b>0.00</b>	<b>0.00%</b>
Cost Based Reimbursement			
Cost Based Reimbursement	59,589.00	0.00	0.00%
<b>Total Cost Based Reimbursement</b>	<b>59,589.00</b>	<b>0.00</b>	<b>0.00%</b>
Federal Financial Participation			
Federal Financial Participation	62,704.25	0.00	0.00%
<b>Total Federal Financial Participation</b>	<b>62,704.25</b>	<b>0.00</b>	<b>0.00%</b>
State Funding (MDHHS-CPBC)			
Prior Year-State Funding	6,972.97	0.00	0.00%
MDHHS - CPBC Categorical Grant	406,104.00	0.00	0.00%
<b>Total State Funding (MDHHS-CPBC)</b>	<b>413,076.97</b>	<b>0.00</b>	<b>0.00%</b>
ESLPHS - DEQ & MDHHS			
ELPHS Funding	85,876.00	0.00	0.00%
<b>Total ESLPHS - DEQ &amp; MDHHS</b>	<b>85,876.00</b>	<b>0.00</b>	<b>0.00%</b>
Other State Fees/Funding			
VFC Vaccine Received	9,871.50	0.00	0.00%
Non-CPBC Funding/Grants	71.00	0.00	0.00%
<b>Total Other State Fees/Funding</b>	<b>9,942.50</b>	<b>0.00</b>	<b>0.00%</b>

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

910 - Personal Health Division

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
Local Grants			
Other Local Grants	16,680.63	0.00	0.00%
Northern Michigan Health Consortium	73,820.62	0.00	0.00%
Michigan Center for Rural Health	54,941.33	0.00	0.00%
31o School Funds	142,547.69	0.00	0.00%
Michigan Health Endowment Foundation	153,020.88	0.00	0.00%
Leelanau Early Childhood Healthy Futures Grant	224,199.49	0.00	0.00%
Healthy Futures Grant	12,868.79	0.00	0.00%
<b>Total Local Grants</b>	<b>678,079.43</b>	<b>0.00</b>	<b>0.00%</b>
Reimbursement Funds/Charge for Service			
Reimbursed Revenues	25,809.57	0.00	0.00%
<b>Total Reimbursement Funds/Charge for Service</b>	<b>25,809.57</b>	<b>0.00</b>	<b>0.00%</b>
Local Funds			
Local Funds Distributive	178,272.00	0.00	0.00%
<b>Total Local Funds</b>	<b>178,272.00</b>	<b>0.00</b>	<b>0.00%</b>
<b>Total Revenues</b>	<b>1,890,979.18</b>	<b>0.00</b>	<b>0.00%</b>
Expenditures			
Salaries & Wages			
Salaries	876,807.35	0.00	0.00%
Insurance Payout Earnings	12,098.43	0.00	0.00%
<b>Total Salaries &amp; Wages</b>	<b>888,905.78</b>	<b>0.00</b>	<b>0.00%</b>
Fringe Benefits			
FICA	64,286.38	0.00	0.00%
Medical Insurance	126,981.71	0.00	0.00%
Employer-HSA	24,075.49	0.00	0.00%
Life Insurance	1,197.36	0.00	0.00%
Unemployment Compensation	4,392.07	0.00	0.00%
Retirement	97,892.37	0.00	0.00%
Workers Compensation	6,113.27	0.00	0.00%
Physicals	143.00	0.00	0.00%
Dental Insurance	11,460.95	0.00	0.00%
Disability Insurance	8,478.48	0.00	0.00%
Vision Insurance	1,610.07	0.00	0.00%

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

910 - Personal Health Division

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
Total Fringe Benefits	346,631.15	0.00	0.00%
Agency Operating Expenses			
Membership & Dues	510.00	0.00	0.00%
Grant Expenses	44.16	0.00	0.00%
Total Agency Operating Expenses	554.16	0.00	0.00%
Supplies & Materials			
Printing	1,007.27	0.00	0.00%
Postage	269.97	0.00	0.00%
Office Supplies	787.30	0.00	0.00%
Program Supplies	7,551.61	0.00	0.00%
Other Supplies	906.55	0.00	0.00%
Clinic Supplies	113,599.81	0.00	0.00%
VFC Vaccine Received	9,871.50	0.00	0.00%
Total Supplies & Materials	133,994.01	0.00	0.00%
Technology Services/Subscriptions			
Computer Maintenance	16,318.02	0.00	0.00%
Subscriptions	10,556.46	0.00	0.00%
Annual Computer Subscriptions/Licensing	12,382.82	0.00	0.00%
Total Technology Services/Subscriptions	39,257.30	0.00	0.00%
Equipment Rental/Maintenance			
Vehicle Maintenance and Repairs	4.00	0.00	0.00%
Total Equipment Rental/Maintenance	4.00	0.00	0.00%
Medical Operating Expenses			
Medical Waste Disposal	330.90	0.00	0.00%
Total Medical Operating Expenses	330.90	0.00	0.00%
Consultant Services			
Other Consultant Services	9.42	0.00	0.00%
Total Consultant Services	9.42	0.00	0.00%
Contractual Services			
Medical Director	14,673.64	0.00	0.00%
Other Contractual	5,425.00	0.00	0.00%
Total Contractual Services	20,098.64	0.00	0.00%

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

910 - Personal Health Division

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
Communications			
Telephone	1,955.27	0.00	0.00%
Cell Phone	5,499.65	0.00	0.00%
Data Line	3,448.65	0.00	0.00%
Total Communications	<u>10,903.57</u>	<u>0.00</u>	<u>0.00%</u>
Travel & Training			
Mileage	19,712.99	0.00	0.00%
Meals/Lodging	2,065.41	0.00	0.00%
Training & Education	2,565.00	0.00	0.00%
Total Travel & Training	<u>24,343.40</u>	<u>0.00</u>	<u>0.00%</u>
Space Costs			
Space-Distributed Costs	55,969.74	0.00	0.00%
BLDHD Rent	600.00	0.00	0.00%
Total Space Costs	<u>56,569.74</u>	<u>0.00</u>	<u>0.00%</u>
Distributed Costs - Administrative			
Administration O/H	87,799.69	0.00	0.00%
Total Distributed Costs - Administrative	<u>87,799.69</u>	<u>0.00</u>	<u>0.00%</u>
Total Expenditures	<u>1,609,401.76</u>	<u>0.00</u>	<u>0.00%</u>
Net Revenues/(Expenditures)	<u>281,577.42</u>	<u>0.00</u>	<u>0.00%</u>

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

995 - Resource Centers

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
<b>Revenues</b>			
Reimbursement			
Funds/Charge for Service			
Reimbursed Revenues	2,374.90	0.00	0.00%
Total Reimbursement	2,374.90	0.00	0.00%
Funds/Charge for Service			
Rents Collected			
Rents Collected	86,406.40	0.00	0.00%
Total Rents Collected	86,406.40	0.00	0.00%
Total Revenues	88,781.30	0.00	0.00%
<b>Expenditures</b>			
Salaries & Wages			
Salaries	2,424.25	0.00	0.00%
Insurance Payout	73.00	0.00	0.00%
Earnings			
Total Salaries & Wages	2,497.25	0.00	0.00%
Fringe Benefits			
FICA	182.43	0.00	0.00%
Medical Insurance	199.92	0.00	0.00%
Employer-HSA	35.18	0.00	0.00%
Life Insurance	2.87	0.00	0.00%
Unemployment	10.21	0.00	0.00%
Compensation			
Retirement	271.18	0.00	0.00%
Workers Compensation	17.46	0.00	0.00%
Dental Insurance	34.50	0.00	0.00%
Disability Insurance	23.09	0.00	0.00%
Vision Insurance	4.57	0.00	0.00%
Total Fringe Benefits	781.41	0.00	0.00%
Supplies & Materials			
Office Supplies	27.67	0.00	0.00%
Janitorial Supplies	1,458.33	0.00	0.00%
Water Tests	1,314.62	0.00	0.00%
Other Supplies	320.97	0.00	0.00%
Total Supplies & Materials	3,121.59	0.00	0.00%
Technology			
Services/Subscriptions			
Annual Computer	144.00	0.00	0.00%
Subscriptions/Licensing			

## Benzie Leelanau District Health Department

### Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report

995 - Resource Centers

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
Total Technology Services/Subscriptions	144.00	0.00	0.00%
Equipment Rental/Maintenance			
Equipment Maintenance & Repairs	660.52	0.00	0.00%
Equipment	10,808.00	0.00	0.00%
Total Equipment Rental/Maintenance	11,468.52	0.00	0.00%
General Liability Insurance			
Insurance	1,533.68	0.00	0.00%
Total General Liability Insurance	1,533.68	0.00	0.00%
Consultant Services			
Other Consultant Services	40.94	0.00	0.00%
Total Consultant Services	40.94	0.00	0.00%
Communications			
Telephone	244.52	0.00	0.00%
Data Line	4.12	0.00	0.00%
Total Communications	248.64	0.00	0.00%
Travel & Training			
Mileage	10.05	0.00	0.00%
Total Travel & Training	10.05	0.00	0.00%
Space Costs			
Space-Electric	13,360.30	0.00	0.00%
Space-Gas	565.96	0.00	0.00%
Janitorial Services	36,758.73	0.00	0.00%
Snow Removal	9,910.00	0.00	0.00%
Loan Payments	19,540.00	0.00	0.00%
Space-Distributed Costs	(74,459.31)	0.00	0.00%
Space-Grounds & Building Maintenance	17,023.05	0.00	0.00%
BLDHD Rent	46,001.92	0.00	0.00%
Total Space Costs	68,700.65	0.00	0.00%
Distributed Costs - Administrative			
Administration O/H	234.57	0.00	0.00%
Total Distributed Costs - Administrative	234.57	0.00	0.00%
<b>Total Expenditures</b>	<b>88,781.30</b>	<b>0.00</b>	<b>0.00%</b>

**Benzie Leelanau District Health Department**

**Revenues & Expenditures by Program - BOH Monthly Financials - Unposted Transactions Included In Report**

995 - Resource Centers

From 10/1/2025 Through 1/31/2026

	<b>Current Period Actual</b>	<b>Total Budget</b>	<b>% of Budget Spent</b>
Net Revenues/(Expenditures)	<u>0.00</u>	<u>0.00</u>	<u>0.00%</u>

Benzie-Leelanau District Health Department  
 FY 2026 Draft Budget  
 10/1/2025 - 9/30/2026

	FY 26 Budget	FY 25 Amended Budget	Difference
<b>Revenue</b>			
<b>Fees &amp; Collections</b>	<b>\$1,013,327</b>	<b>\$903,585</b>	<b>\$109,742</b>
Private Pay Clinic Fees	119000	2500	116,500
Clinic Fees - Private Insurance	179470	213510	(34,040)
Campground Trailer Parks	6757	6757	0
Food Licenses	125000	128000	(3,000)
Sewage Permits	198000	190000	8,000
Well Permits	115000	108000	7,000
Tattoo/Body Art Fees	0	0	0
Land Evaluations/Site Surveys	55000	56500	(1,500)
Mortgage Evaluations	215000	198000	17,000
Radon Test Kits	100	318	(218)
<b>Medicaid/Medicare Revenue</b>	<b>688775</b>	<b>693200</b>	<b>(4,425)</b>
Medicaid Clinic Fees	176793	201200	(24,408)
Medicare Clinic Fees	385683	401000	(15,318)
WIC Blood Lead Tests	0	1000	
Managed Health Care Plan	126300	90000	36,300
<b>Cost Based Reimbursement</b>	<b>256734</b>	<b>301200</b>	<b>(44,466)</b>
<b>Federal Financial Participation</b>	<b>158668</b>	<b>234440</b>	<b>(75,772)</b>
<b>Prior Year Funding</b>	<b>0</b>	<b>60265</b>	
<b>State Funding</b>	<b>2542440</b>	<b>3609963</b>	<b>(1,067,523)</b>
MDHHS - CPBC	1455165	2574866	(1,119,701)
CPBC - Fee for Service	12000	7000	5,000
ELPHS - EGLE & MDHHS	594649	698467	(103,818)
EGLE Type II Grant	173798	174230	(432)
MDHHS License Facilities	3958	5458	(1,500)
Swimming Pools	6582	7982	(1,400)
Septage Licensing	5703	8345	(2,642)
VFC Vaccine Received	35000	35000	0
Other State Funding	255585	98615	156,970
<b>Local Grants</b>	<b>1340931</b>	<b>1720354</b>	<b>(379,423)</b>
Other Local Grants	373339	553887	(180,548)
Northern Michigan Health Consortium	0	208076	(208,076)
Michigan Center for Rural Health	50176	61500	(11,324)
Michigan Health Endowment Foundation	105871	140000	(34,129)
Leelanau Early Childhood Mileage	801162	726891	74,271
Healthy Futures - Munson	10384	30000	(19,616)
<b>Reimbursed Funds/Charge for Service</b>	<b>10132</b>	<b>44110</b>	<b>(33,978)</b>
Food Courses	7,500	8000	(500)
Charge for Service	0	10	(10)
Expense Reimbursement	2,632	36100	(33,468)
<b>Rents Collected</b>	<b>261192</b>	<b>261192</b>	<b>0</b>
<b>Interest</b>	<b>72000</b>	<b>78000</b>	<b>(6,000)</b>
<b>Local Funds</b>	<b>769323</b>	<b>726932</b>	<b>42,391</b>
In-Kind Match	140000	140000	0
County Appropriations	629323	586932	42,391
Capital Contingency Fund			<b>0</b>
<b>Revenue Total</b>	<b>\$7,113,522</b>	<b>\$8,633,241</b>	<b>(1,519,719)</b>

Benzie-Leelanau District Health Department  
 FY 2026 Draft Budget  
 10/1/2025 - 9/30/2026

	FY 26 Budget	FY 25 Amended Budget	Difference
<b>Expense</b>			
<b>Salaries &amp; Wages</b>	<b>\$3,876,149</b>	<b>\$4,187,096</b>	<b>(310,947)</b>
<b>Fringe Benefits</b>	<b>\$1,499,053</b>	<b>1527668</b>	<b>(28,615)</b>
FICA	286295	295864	(9,569)
Medical Insurance/Employer HAS	679883	679702	181
Life Insurance	5583	6007	(424)
Unemployment Compensation	12584	13828	(1,244)
Retirement	391880	416677	(24,797)
Workers Compensation	15739	14855	884
Physicals	200	500	(300)
Dental Insurance	58770	51903	6,867
Disability Insurance	40727	40860	(133)
Vision Insurance	7392	7472	(80)
<b>Agency Operating Expenses</b>	<b>\$8,494</b>	<b>15099</b>	<b>(6,605)</b>
Advertising	2200	5982	(3,782)
Membership & Dues	6294	9117	(2,823)
Bank Fees	0	0	0
Grant Expenses	0	0	0
<b>Supplies &amp; Materials</b>	<b>\$757,997</b>	<b>863103</b>	<b>(105,106)</b>
Printing	7832	9788	(1,956)
Postage	8352	7327	1,025
Office Supplies	9107	13747	(4,640)
Janitorial Supplies	5787	5762	25
Water Tests	44200	46575	(2,375)
Food License Fees	9000	9000	0
Temporary Campground Fees	700	700	0
Program Supplies	104318	91331	12,987
Other Supplies	17400	181174	(163,774)
Fuel Supplies	1400	490	910
Clinic Supplies	514901	462209	52,692
VFC Vaccine Received	35000	35000	0
<b>Technology Services/Subscriptions</b>	<b>\$219,768</b>	<b>236873</b>	<b>(17,105)</b>
Licensing Fees	<b>\$0</b>	2350	
Subscriptions	\$500	110724	
Computer Maintenance	92200	99604	(7,404)
Annual Computer Subscriptions/Licensing Fees	127568	24195	103,373
<b>Equipment Rental/Maintenance</b>	<b>\$14,900</b>	<b>32045</b>	<b>(17,145)</b>
Vehicle Maintenance & Repairs	0	125	(125)
Equipment Maintenance	0	1820	
Equipment	11000	28100	
Equipment Rental	3900	2000	1,900
<b>Medical Operating Expenses</b>	<b>\$500</b>	<b>1715</b>	<b>(1,215)</b>
<b>General Liability Insurance</b>	<b>\$50,000</b>	<b>41986</b>	<b>8,014</b>
<b>Consultant Services</b>	<b>\$17,275</b>	<b>37100</b>	<b>(19,825)</b>
Audit	8000	7700	300
Legal	6775	9650	(2,875)
Other Services	2500	19750	(17,250)

Benzie-Leelanau District Health Department  
 FY 2026 Draft Budget  
 10/1/2025 - 9/30/2026

	FY 26 Budget	FY 25 Amended Budget	Difference
<b>Contractual Services</b>	<b>\$274,580</b>	<b>804562</b>	<b>(529,982)</b>
Medical Director	49691	62488	(12,797)
Health Officer	22309	6377	15,932
HDNWM Data Management	0	3641	(3,641)
Per Diem	2880	2000	880
Other Contractual	198700	729206	(530,506)
Website Maintenance	1000	850	150
<b>Communications</b>	<b>\$57,029</b>	<b>63648</b>	<b>(6,619)</b>
Telephone	10345	11088	(743)
Cell Phone	26700	26641	59
Data Line	19984	25919	(5,935)
<b>Travel</b>	<b>\$193,844</b>	<b>157418</b>	<b>36,426</b>
Mileage	144160	137820	6,340
Meals/Lodging	14434	6416	8,018
Training & Education	35250	13182	22,068
<b>Space Costs</b>	<b>\$483,940</b>	<b>507953</b>	<b>(24,013)</b>
Electric	45000	40000	5,000
Gas	2500	2500	0
Janitorial Services	101100	99150	1,950
Snow Removal	12000	12000	0
Loan Payments	61000	58620	2,380
Distributed Costs	(162086)	-164495	2,409
Grounds & Building Maintenance	67000	30000	37,000
BLDHD Rent	357426	430178	(72,752)
<b>Capital Outlay - Local</b>	<b>13794</b>	<b>0</b>	<b>13,794</b>
<b>Distributed Costs</b>	<b>\$17,404</b>	<b>0</b>	<b>17,404</b>
Administration IDC	239	0	239
EH Program IDC	0	0	(0)
PH Administration IDC	17165	0	17,165
General Nursing IDC	0	0	0
<b>Expense Total</b>	<b>\$7,484,727</b>	<b>\$8,476,265</b>	<b>(991,538)</b>

**Fund Balance** **(\$371,205)** **\$156,976**

**TOTAL** **\$0**

**Benzie Leelanau District Health Department  
Accounts Receivable and Prepaid Expenses  
as of January 31, 2026**

**Due from Michigan Department of Environmental Quality:**

Type II \$237,036

**Due from State of Michigan:**

2024 Cost Based Reimbursement	93160
2025 Cost Based Reimbursement	0
2023 Federal Finance Participation	4435
2024 Federal Finance Participation	46,397
2025 Federal Finance Participation	(369,364)
2026 Federal Finance Participation	<u><u>62,704</u></u>

Total (162,668)

**Due from Michigan Department of Community Health:**

CPBC (1,072)

**Due from Other Units of Government:**

Regional Grants - 31o School Funding 245,534

245,534

**Rents Due - Benzie Building:**

Catholic Human Services	0
NMHSI	0.00
Centra Wellness Network	0
Auditor Adjustment to Lease Receivable	<u><u>12,464</u></u>

Total 12,464

**Prepaid Expenses:**

Prepaid Insurances 37,358

**CPBC Pullbacks** \$111,978

**Benzie-Leelanau District Health Department  
Statement of Assets and Liabilities  
as of January 31, 2026**

**ASSETS:**

Cash - Checking and Savings	1,890,351
Imprest Cash	565
A/R - PH Revenue	0
Appropriations Due - Benzie	89,436
Appropriations Due - Leelanau	115,992
Due from DEQ	237,036
Due from State of Michigan	13,162
Due from MDCH	(1,072)
Due from Other Government Units	(100,914)
Rents Due - Benzie	12,464
Prepaid Expenses	274,644
<b>Total Assets</b>	<b>2,531,665</b>

**LIABILITIES AND FUND BALANCE:**

Accounts Payable	257,093
Accrued Wages	549,442
Deferred Family Planning Revenues	
Deferred Medicaid Revenues	0
Other Deferred Revenues	(111,978)
Fund Balance:	
Unassigned	1,238,763
Assigned	306,342
Non-Spendable	46,821
Committed	
Restricted	
Medicaid Payment Holding	
Current Year	245,182
<b>Total Liabilities and Fund Balance</b>	<b>2,531,665</b>

(0)

# PROVIDER UPDATE

News from your local Health Department

## In This Issue

Michigan Immunization Data & Current Surveillance

Infant Botulism

WIC Updates

Michigan Health Communications Initiative

New MDHHS Cancer Investigation Program Website

Community Health Needs Assessments (CHNAs):

Immunization Updates

CD Report for 2025

Joshua Meyerson, MD

220 W. Garfield Ave.  
Charlevoix, MI 49720

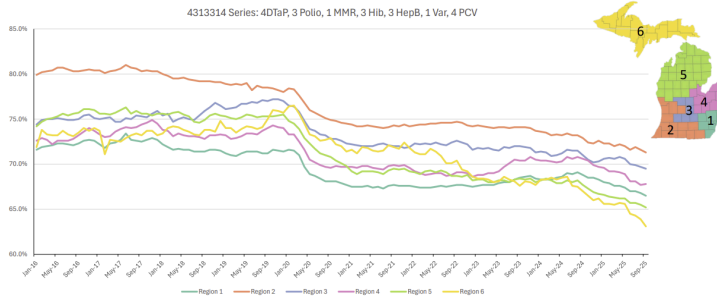
j.meyerson@nwhealth.org  
231-547-7679

## Michigan Immunization Data & Current Surveillance

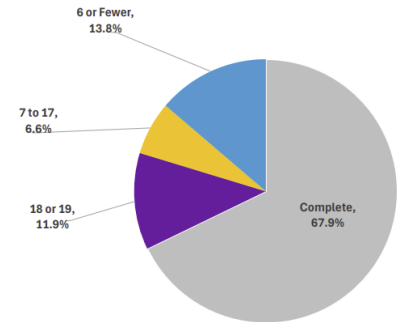
Michigan's 2025 immunization surveillance shows continuing gaps in childhood vaccine coverage and concerning increases in certain vaccine-preventable diseases.

Recent [MDHHS epidemiology slides report](#) that only about 68% of children complete the recommended childhood series by 19–35 months (leaving a large cohort partially vaccinated), and state surveillance in 2025 documents increased activity for diseases such as measles and pertussis compared with prior years. This data highlights missed opportunities for catch-up vaccination: MDHHS found that over half of children who are behind need only one office visit to get back on schedule, underscoring how small, targeted interventions in primary care can rapidly improve coverage.

Michigan Cases	2021	2022	2023	2024	2025
<b>Chickenpox (Varicella)</b>	184	233	363	293	202
Diphtheria	0	0	0	0	0
H. Influenzae <5 years old (Hib)	12	23	14	15	19 (2)
<b>Measles **</b>	0	0	0	7	29
Mumps	5	15	22	15	20***
<b>Pertussis</b>	72	85	110	2074	924
Polio	0	0	0	0	0
Rubella	4	4	7	7	1***
Tetanus	1	1	1	0	0
Meningococcal Disease	5	5	8	14	6
Mpox	-	395	4	21	19



County Data – mcir.org



- Missing 18+ vaccinations
  - Moved out of state
  - Completely unvaccinated
- Missing 7 to 17 vaccinations
- Missing 6 or fewer vaccinations



800-432-4121  
[www.nwhealth.org](http://www.nwhealth.org)



231-882-4409  
[www.bldhd.org](http://www.bldhd.org)



989-356-4507  
[www.dhd4.org](http://www.dhd4.org)

# Infant Botulism

There have been two cases of infant botulism reported in the Health Department of Northwest Michigan (HDNW) region in the last several months. One probable case was associated with the recalled formula, and a confirmed case that was not associated with the nationwide outbreak. On November 11, 2025, ByHeart Inc. recalled all of its Whole Nutrition infant formula products. 51 infants have been affected as of mid-December, across 19 states. Parents and caregivers are urged to stop using any ByHeart Whole Nutrition Infant formula immediately, including all lot numbers, all sizes of cans, and single serving packets.

Infant botulism is the most common form of human botulism in the United States, with an incidence of around 100-150 cases per year. The disease occurs across diverse geographic regions but shows notable regional variation in incidence. Infants ingest Clostridium botulinum spores present in the environment, dust, soil, honey, or contaminated foods, which germinate in the gut and produce toxin in vivo.

Nationally, there is uneven geographic distribution of cases, and these are the first cases reported in Northern MI region since 2015.

Most cases occur in infants under 6 months of age (median age 16-18 weeks). Classic symptoms include constipation progressing to lethargy, poor feeding, floppy/loss of muscle tone and eventual respiratory failure from muscle paralysis. Most affected infants require hospitalization, support, and treatment with antitoxin, botulism immune globulin.



# WIC Updates

The Women, Infants & Children (WIC) program is a health and nutrition program that has demonstrated a positive effect on pregnancy outcomes, child growth and development. Many people can confuse the WIC program with the SNAP benefits program. WIC provides food for women, infants, and children while providing nutritional education, high risk nutrition counseling, health care referrals, and breastfeeding support.

Starting in March 2026, there will be a new WIC Food Package and the main changes can be found on [MDHHS WIC webpage](#).

## WIC VS. SNAP

Key differences at a glance.

	WIC	SNAP
<b>Focus</b>	Nutrition support for pregnant people, babies, and young children.	Food access for all eligible low-income households.
<b>How it's funded</b>	Funded each year by Congress.	Automatically funded based on how many people qualify.
<b>What it provides</b>	Nutrition education, breastfeeding support, social services, and healthcare screenings and referrals.	Help families buy groceries
<b>What you can buy</b>	Specific healthy foods like milk, eggs, fruits, and veggies.	It can be used for most food grocery items. SNAP benefits can't be used to buy alcohol, tobacco products, or nonfood items.

## New WIC Food Packages Starting March 2026

**What is new?**

- More food choices.
- Better support for healthy eating habits.
- New options for different diets.

**FRUITS AND VEGETABLES**

- More fruit and vegetable dollars instead of juice.
- Fresh cut herbs are allowed.

**PEANUT BUTTER AND BEANS**

- Families with specific dietary needs can choose other nut or seed butters.

**DAIRY**

- Choose between milk, cheese and yogurt, OR plant-based beverage or tofu.
- Yogurt included in all packages starting at 12 months.

**WHOLE GRAINS**

- More choices and sizes for whole grains like English muffins, bagels, pita, quinoa, wild rice, cornmeal and more.
- Included in all women packages.

**EGGS**

- Choose between eggs, tofu or peanut butter and beans.

**FISH**

- Included in all women and children packages.

**INFANT FOODS**

- Choose fruit and vegetable dollars starting at six months, instead of infant foods.

## Michigan Health Communications Initiative

The Michigan Health Communications Initiative was formed to tackle misinformation on polarizing topics in public health. This growing initiative is committed to providing timely, evidence-based health messaging that meets the evolving information needs of the community. Educational materials provided through this initiative are created to respond to information gaps and trending health narratives like gun violence prevention, vaccines and opioid education. Social Media posts are created to address a variety of topics and include English, Spanish and Arabic translations.

This Michigan Health Communications Initiative is brought to you by the public health nonprofit PGP with support from the [Michigan Association for Local Public Health](#). To sign up for their newsletter, visit: [Michigan Health Communications Initiative](#)

MICHIGAN

Health  
Communications  
Initiative

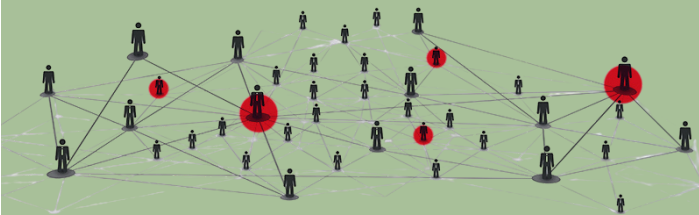
## New MDHHS Cancer Investigation Program Website

Michigan Department of Health and Human Services (MDHHS) has launched a new webpage to share more information on cancer investigations and the unusual patterns of cancer that may be associated with environmental exposure. The Cancer Investigation Program has a variety of resources to assess potential cancer clusters and unusual patterns of cancer.

The Cancer Investigation Program will share information with you, which may include:

- General information on reported cancer(s), such as rates over time, potential risk factors and screening and prevention information.
- Information about any potential environmental contamination sources.
- Publicly available cancer data.
- In some cases, data analysis results from the Michigan Cancer Surveillance Program. The cancer epidemiologist will evaluate this possibility after learning more about your concern.

Their resources page may also provide valuable data like environmental maps and data, MiTracking Data Portal on Cancer, and the Michigan Cancer Plan: 2021-2030. Find these resources at: [Resources](#)



## Community Health Needs Assessments (CHNAs): Shared Priorities Across Local Health Departments

Each of our local health departments has recently released or will soon be releasing their updated Community Health Needs Assessment. Despite serving different counties and populations, all three CHNAs identified the same top three priorities for our region:

### New Community Health Priorities



These priorities reflect the most pressing needs reported by community members, partners, and regional data sources. Providers interested in reviewing the full findings can visit their local health department's website to view each CHNA report.

A sincere thank-you to all local medical providers who participated in surveys, interviews, or stakeholder groups during this assessment process. Your input directly shaped the identification of community priorities and will help guide coordinated public health and healthcare efforts over the next several years.

How to get involved and to see the data- visit <https://northernmichiganchir.org/mithrive/>

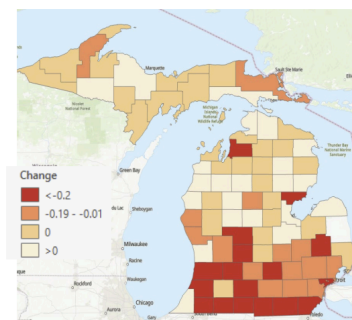
# Immunization Updates

## Vaccines For Children (VFC): Participation Matters

The Vaccines for Children program remains a cornerstone for equitable pediatric immunization, supplying federally purchased vaccines to eligible children and allowing them to be immunized at their medical home at no cost. Loss of VFC-enrolled providers diminishes access, particularly for Medicaid and uninsured families who rely on local clinics for routine childhood immunizations.

MDHHS data show a net decline in VFC providers statewide (from 1,147 in 2018 to 1,070 in 2025, about a 7% decrease), with sharper declines in some counties, a trend that threatens access and could worsen coverage disparities if not addressed. Continued engagement of private practices and health departments as VFC sites is critical to preserve on-time vaccination and to prevent outbreaks.

- VFC Providers in 2018 vs 2025:
  - Statewide: 1,147 → 1,070 (Δ7%)
  - Antrim: 7 → 3 (Δ57%)
  - Branch: 11 → 6 (Δ46%)
  - Van Buren: 13 → 8 (Δ39%)
  - Allegan: 11 → 7 (Δ36%)
  - Monroe: 13 → 9 (Δ31%)
  - Detroit: 95 → 67 (Δ30%)



## Policy & practice: Michigan’s recommended schedules and what that means for clinicians

MDHHS [Immunization Recommendations](#) now directs Michigan clinicians to use the immunization schedules published by the American Academy of Pediatrics (AAP) for children and adolescents and the American Academy of Family Physicians (AAFP) for adults as the clinical standards of care. In October 2025 the Michigan Advisory Committee on Immunizations (MACI) endorsed adopting the AAP/AAFP/ACOG schedules as Michigan’s standard and the Chief Medical Executive issued [standing recommendations](#).

The recent changes made by the Director of the U.S. DHHS were not reviewed or approved by medical societies, experts, or even the ACIP, but instead were issued by edict. There are many inaccuracies in the reporting of and the justification for the changes made at the federal level. A good resource for those wanting to know more is the [Evidence Collective](#) that examines in depth some of these issues. Reassuringly and according to their [fact sheet](#), these changes should not alter insurance coverage, including Medicaid, the Children’s Health Insurance Program, and the Vaccines for Children program.

## Resources and Continuing Education

- [MDHHS Immunization Resources](#): Access annual summaries of VPD cases in Michigan, immunization data, and statistics.
- [American Academy of Pediatrics](#) and [American Academy of Family Physicians](#)
- [Ivaccinate](#): Ivaccinate provides information and tools based on real medical science and research to help Michigan parents protect their kids.

# 2025 Communicable Disease Report

for  
Health Departments of  
Benzie-Leelanau, District No. 4,  
and Northwest Michigan

## Counties Include:

Benzie  
Leelanau  
Alpena  
Cheboygan  
Montmorency  
Presque Isle  
Antrim  
Charlevoix  
Emmet  
Otsego



Dr. Joshua Meyerson serves as the Medical Director for three local health departments in northern Michigan: Health Department of Northwest Michigan, Benzie-Leelanau District Health Department, and District Health Department No. 4.

Disease Group	Disease	BLDHD	DHD4	HDNW
COVID19/MIS	Novel Coronavirus COVID-19	85	482	641
Carbon Monoxide Poisoning	Carbon Monoxide Poisoning	0	2	4
Foodborne	Campylobacter	6	21	29
Foodborne	Cryptosporidiosis	2	1	0
Foodborne	Giardiasis	5	1	2
Foodborne	Listeriosis	0	1	0
Foodborne	Norovirus	8	1	18
Foodborne	Salmonellosis	3	12	17
Foodborne	Shiga toxin-producing Escherichia coli --(STEC)	0	5	5
Foodborne	Shigellosis	1	2	0
Foodborne	Yersinia enteritis	2	2	5
Influenza	Flu Like Disease*	840	42	4137
Influenza	Influenza	77	317	303
Influenza	Respiratory Syncytial Virus	0	4	13
Meningitis	Meningitis - Aseptic	1	0	3
Meningitis	Meningitis - Bacterial Other	1	1	1
Meningitis	Streptococcus pneumoniae, Inv	4	14	10
Other	Blastomycosis	0	2	0
Other	Botulism- Infant	0	0	2
Other	CPO	0	2	2
Other	Candida auris	0	2	1
Other	Coccidioidomycosis	0	3	0
Other	Creutzfeldt-Jakob Disease	0	0	2
Other	Cryptococcosis	1	0	0
Other	Cyclosporiasis	1	0	1
Other	Gastrointestinal Illness	324	12	0
Other	Head Lice	26	0	78
Other	Histoplasmosis	1	12	1
Other	Legionellosis	0	3	2
Other	Staphylococcus Aureus Infect.*	0	1	1
Other	Strep Throat	41	0	265
Other	Streptococcal Dis, Inv, Grp A	6	5	5
Other	VISA	0	0	1
Other	Unusual Outbreak or Occurrence	15	1	0
Rabies	Rabies: Potential Exposure & PEP	11	76	98
STD	Chlamydia (Genital)	36	69	102
STD	Gonorrhea	5	2	10
STD	Syphilis - Early Latent	1	0	2
STD	Syphilis - Secondary	1	0	1
STD	Syphilis - Unknown Duration or Late	0	3	3
Tuberculosis	Latent Tuberculosis Infection	5	3	14
Tuberculosis	Nontuberculous Mycobacterium	1	5	6
VPD	Chickenpox (Varicella)	0	2	3
VPD	H. influenzae Disease - Inv.	1	7	4
VPD	Mumps	0	1	0
VPD	Pertussis	9	2	11
VPD	Shingles	5	2	3
Vectorborne	Anaplasmosis	30	3	4
Vectorborne	Ehrlichiosis, all types	1	1	0
Vectorborne	Lyme Disease	75	15	61
Vectorborne	West Nile Virus	0	0	2
Viral Hepatitis	Hepatitis A	0	2	1
Viral Hepatitis	Hepatitis B, Acute	0	1	0
Viral Hepatitis	Hepatitis B, Chronic	0	2	6
Viral Hepatitis	Hepatitis C, Acute	0	1	0
Viral Hepatitis	Hepatitis C, Chronic	6	16	20
	<b>Total</b>	<b>1637</b>	<b>1164</b>	<b>5902</b>

**BENZIE-LEELANAU DISTRICT  
HEALTH DEPARTMENT**



**CONTINUITY OF OPERATIONS PLAN  
(COOP)**

**Revised 12/01/2025**

Approved By:

Dan Thorell, Health Officer

Signed by:  
*Dan Thorell*  
6C5599253E884A3...  
Signature

2/19/2026 | 11:26 AM EST

Date



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## BLDHD COOP

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### **PURPOSE AND SCOPE**

This plan serves as a guide for re-establishing Benzie-Leelanau District Health Department (BLDHD) functions in the event an interruption in some or all services occurs. Natural, technological, and other human-caused hazards could create disastrous conditions which can disrupt the implementation of services of the health department. Hazards that are of a specific concern are those that have been identified through a hazard vulnerability assessment. This includes ice storms, blizzards, severe thunderstorms, cyberattack and power outages. The department's resources can become incapacitated because of such hazards causing an emergency or disaster such as:

- Employee(s) - because of their unexpected inability to work due to illness, injury, personal/family issues, or inability to travel to offices or for out-of-the office purposes, etc.
- Facilities - because of severe damage to one or both health department offices/buildings due to fire, explosion, environmental contamination, etc., and
- Utilities/Infrastructure - because of loss of power, sewer and water, HVAC, and telecommunication systems.

As the Benzie-Leelanau District Health Department prepares and plans for disruptions to services, its goals are to maintain essential functions to continue to provide the community's public health services.

Federal Preparedness Circular (FPC) 65 describes effective continuity of operations planning as one that:

- Ensures the continuous performance of the health department's essential functions/operations during an emergency.
- Protects essential facilities, equipment, records, and other assets.
- Reduces or mitigates disruptions to operations.
- Executes as required, successful succession of office with accompanying authorities in the event a disruption renders agency leadership unable, unavailable, or incapable of assuming and performing their authorities and responsibilities of office.
- Reduces loss of life, minimizes damage and losses.
- Identifies and designates principals and support staff to be relocated.
- Facilitates decision-making for execution of the Plan and the subsequent conduct of operations.
- Achieves a timely and orderly recovery from the emergency and resumption of full service to all customers.
- Ensures and validates COOP readiness through a dynamic, integrated test, training, and exercise program to support implementation of COOP plans; and
- Ensures the health department has alternate facilities from which to continue to perform their essential functions during a COOP event.

### **IMPLEMENTATION AND ACTIVATION**

This plan is counterpart to and supports the BLDHD Integrated Preparedness Plan (IPP). When activated by the health officer, or designee, it will provide sustained operations within 12 hours of activation and for up to 30 days or until normal operations can be resumed. Implementation of this plan will be carried out by BLDHD administrative personnel composed of the: Health Officer, Medical Director, Personal Health Director, Environmental Health Director, and Director of Administrative Services.

BLDHD COOP

**TRAINING/TESTING/EXERCISING COOP PLAN**

- Training on the COOP plan will be integrated into ICS training for new staff.
- Training on plan updates and changes will occur annually, or sooner if necessary.
- The health department administrative team will review and update the COOP plan annually. This review will also serve as training on plan elements.
- The COOP plan will be exercised as an element of other emergency preparedness exercises as appropriate.

**ORDER OF SUCCESSION**

- The order of succession for the Benzie-Leelanau District Health Department is activated whenever a Division’s administrator is unavailable to carry out required job duties for an extended period.
- BLDHD functions under a contract with Health Department of Northwest Michigan (HDNW) for Medical Director services. In the event HDNW is unable to supply this service, HDNW and BLDHD will collaborate to determine who best to fill those functions.
- The Health Officer, acting Health Officer or (in times of emergency) the health department Incident Commander, will notify the successors when leadership duties are assigned.
- The Health Officer, acting Health Officer or (in times of emergency) the health department Incident Commander will assign these key individuals to a work location to equally disperse leadership in both Benzie and Leelanau County.
- The table below provides guidance on order of succession for key positions. The Health Officer or Incident Commander may revise these leadership duties as needed to effectively respond to an emergency.

HEALTH OFFICER	PERSONAL HEALTH DIRECTOR	ENVIRONMENTAL HEALTHDIRECTOR	DIRECTOR OF ADMINISTRATIVE SERVICES
Personal Health Director	Personal Health Supervisor	Sanitarian III	Finance Supervisor
Director of Administrative Services	Personal Health Tech Supervisor	Environmental Health Coordinator	Reimbursement Specialist III
Environmental Health Director		Sanitarian II	Account Clerk I
			Reimbursement Specialist II

Notes:

- Questions about Health Officer, Medical Director, or other leadership functions can be directed to Local Health Services at MDHHS.
  - Laura De La Rambelje, Director: [delarambelje@michigan.gov](mailto:delarambelje@michigan.gov); 517-388-7302
  - Brenda Jegede, Administrator: [JegedeB@michigan.gov](mailto:JegedeB@michigan.gov); 517-284-7460
- Under a Memorandum of Understanding (MOU) among the Northern Michigan Public Health Alliance (NMPHA) health departments (GTCHD, BLDHD, HDNW, DHD10, CMDHD, DHD2, DHD4), if the BLDHD Medical Director is temporarily unable to perform their duties, the Medical Director from another NMPHA health department can serve as a consultant for BLDHD.
- The State Medical Director can cover if there is an immediate need that is not able to be covered locally. Contact Director of Local Health Services at MDHHS as above.

\*This order of succession is developed by the health department’s administrative team. Any changes to this document will be distributed to all health department employees.

**WORKFORCE REDUCTION/HUMAN CAPITAL MANAGEMENT**

- The Health Officer will assign duties to available staff based on the priorities for critical functions and the competencies of the individual staff.
- If limited staff are available, longer shifts and working during non-typical hours (nights and weekends) may be instituted to ensure continuation of critical functions.
- If the technology is available, staff may work remotely to increase productivity. Some programs, such as communicable disease surveillance, can be performed at any location that has internet and telephone capability.
- Staff will be cross-trained as appropriate to enhance flexibility when a workforce reduction occurs.

**Personnel Capable of Continuing Essential Functions**

FUNCTION	PERSONNEL
Finance/Director	Health Officer Personal Health Director Director of Administrative Services Environmental Health Director
IT Capability	Health Officer IT Contractor Director of Administrative Services Environmental Health Director
Communication Systems	Director of Administrative Services Personal Health Director Emergency Preparedness Coordinator
Disease Surveillance	Regional Epidemiologist Personal Health Director Public Health Nurse Medical Director
Safe Storage of Vaccines	Immunization Coordinator Personal Health Supervisor Director of Personal Health
Immunization	Public Health Tech Public Health Nurse
Septic Inspection	Sanitarian Environmental Health Director
Food Safety	Sanitarian/Contractual
WIC	Public Health Tech Nurse Registered Dietician
Communicable Disease Follow-up	Public Health Nurse Community Health Coordinator
Water Monitoring	Sanitarian, Environmental Health Director

BLDHD COOP

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**SOCIAL DISTANCING**

- During a biological disease outbreak, it may be prudent to implement social distancing policies to limit the potential of disease spread among health department staff.
- In general, social distancing is defined as maintaining a minimum distance of 6 feet between individuals. Guidelines and recommendations from CDC and/or the health department's Medical Director will be followed.
- If social distancing restrictions are in place, all employees are instructed to remain at their workstations throughout their shift and to maintain the recommended distance from co-workers when leaving the workstation to perform job duties.
- Masks (N-95 or surgical masks) will be provided to all staff for use when leaving the workstation.
- Flexible hours may be instituted to decrease the number of employees in the building at a given time. The Health Officer, in coordination with Division Directors, will determine the most efficient schedule for staff.
- When possible, staff may work from home using remote technology such as the internet, telephones, texting and home scanner/fax machines.

**LIMITED ACCESS TO FACILITIES**

- Limited access to either office may occur when there are security, social distancing concerns, or inability to travel to or enter the buildings because of natural disaster events.
- Signs will be posted on all outside doors clearly defining the status of entering the facility:
  - Whether the building is open or closed,
  - Who is allowed to enter the building,
  - The areas that are open for use and any other restrictions (such as wearing a mask), and
  - Any other safety precautions that individuals are to be aware of.
- Reception staff will monitor the entryways to ensure guidelines are followed.

**ALTERNATE FACILITIES**

- In the event that one or all health department offices are rendered non-functional due to structural or other reasons, alternate facilities will be established.
- The Health Officer or health department Incident Commander will designate and notify the alternate facility of the need to move operations to that facility and provide an estimate of the time health department will be present.
- The Health Officer or health department Incident Commander will notify Division Directors when alternate facilities are activated. The Division Directors will assign someone to notify all staff in that division. Notification should be via group text, Teams and email. Suggested personnel to conduct staff notification:
  - EH: Sanitarian III for each county
  - PH: PH Supervisors
  - Admin: Director of Admin Services
- The pre-designated facilities may change as needed to meet all community needs. Some services may be established as outreach services in different locations, such as town halls.
- The County Emergency Operations Center (EOC) will assist with coordination of alternate locations or obtainment of necessary equipment such as generators, computers, etc...
- Pre-determined alternate locations have been designated based on location within the community, adequacy of size, accessibility of phones and internet connections, and availability during an emergency.

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**ALTERNATE FACILITIES**

<b>Benzie Office</b>	<b>Leelanau PH Office</b>	<b>Leelanau EH Office</b>
Leelanau PH Office 7401 E. Duck Lake Rd Lake Leelanau, MI 49653	Leelanau EH Office 8527 E. Governmental Dr Suttons Bay, MI 49682	Leelanau PH Office 7401 E. Duck Lake Rd Lake Leelanau, MI 49653
Leelanau EH Office 8527 E. Governmental Dr Suttons Bay, MI 49682	Benzie Office 6051 Frankfort Hwy Benzonia, MI 49616	Benzie Office 6051 Frankfort Hwy Benzonia, MI 49616

**Note:**

Clinic services may be relocated to appropriate community spaces, such as townhalls.

If school buildings are compromised, school health services may be conducted at either health department office.

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**CRITICAL RECORDS**

- Critical records are those that are vital to the continuing functioning of the health department and that are difficult to replace.
- Whenever possible, critical records will be secured or removed when health department offices must be evacuated. The Health Officer or health department Incident Commander will determine the appropriate method to secure critical records (e.g. remove and store at off-site location, lock on premises, etc...)

<b>RECORD TYPE</b>	<b>DESCRIPTION</b>	<b>PERSON RESPONSIBLE</b>	<b>CRITICAL PAPER FILES</b>
Financial Records	<ul style="list-style-type: none"> <li>• All financial records maintained on Abila and Patagonia and are backed up via cloud.</li> <li>• Blank check stock that are in a secured area will be removed to a different secured area.</li> </ul>	Director of Administrative Services	YES
WIC Files	<ul style="list-style-type: none"> <li>• Recertification dates, anthropometric information from last visit and package information maintained on WIC database.</li> <li>• Inventory Log and WIC Cards in file cabinet should be removed to alternate locked location (such as alternate office).</li> </ul>	WIC Coordinator	YES
Immunization Records	<ul style="list-style-type: none"> <li>• Immunization records can be accessed via the Michigan Care Improvement Registry for children and adults immunized at the health department.</li> <li>• Patagonia contains electronic vaccine administration records</li> </ul>	Imms Coordinator	NO
Children’s Special Health Care Services	<ul style="list-style-type: none"> <li>• All CSHCS client information is maintained electronically on Patagonia/MDHHS</li> </ul>	CSHCS Coordinator	NO
Home Visiting Programs	<ul style="list-style-type: none"> <li>• Home visiting documentation contained on Patagonia, backed up via cloud.</li> <li>• Paper Charts maintained by each home visitor should be removed to alternate locked location if possible.</li> </ul>	Program Coordinator	YES
School Health	<ul style="list-style-type: none"> <li>• Client visit documentation is maintained electronically in Patagonia.</li> <li>• Psychotherapy notes or paper documentation of nurse visits should be removed to a secure location.</li> </ul>	School nurses and therapists	YES

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<p>Well/Septic Files</p>	<ul style="list-style-type: none"> <li>• General Information related to inspections is maintained on FetchEH and Laserfiche</li> <li>• Property file documentation—including diagrams identifying well and septic system locations, is maintained in paper form at each Environmental Health office and in digital form within Laserfiche.</li> </ul>	<p>EH Director</p>	<p>YES</p>
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## **CRITICAL RESOURCES**

- Critical resources are those items that, whenever possible, should be removed from the health department offices if those offices will be inaccessible for an extended period of time.
- Each Division Director will be responsible for removing (or designating another employee to remove) critical resources.
- If critical resources are unable to be removed, efforts to replace the resources will be a priority.
- Critical Resources Include:
  1. Computers and monitors (especially laptop computers)
  2. Printers
  3. Fax machines
  4. Manuals that are not maintained electronically (e.g. Teams)
  5. 800 MHz radios
  6. Biologics/Immunizations (ensure secure refrigerator storage)
  7. Medications/Medical Supplies

## **DEVOLUTION AND RECONSTITUTION OF UNINTERRUPTIBLE SERVICES**

- Generally, health department services can be interrupted for a period of time (24 hours) without negatively impacting the community. The exception is a biological disease outbreak requiring continuous surveillance and administration of prophylaxis or severe water contamination where local water supplies are either non-existent or detrimental to consume.
- As staffing and resources decrease, the Health Officer will determine which services will continue and which will be delayed, using the Critical Functions table on the next page. The same process will be used to rebuild services after an event.
- Every effort will be made to maintain the most critical services by any means necessary – alternate facilities, virtual meetings, telecommuting, etc....

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**CRITICAL/PRIORITY FUNCTIONS**

Critical Functions are those services or functions that, if discontinued, would immediately affect the safety, health, subsistence, and welfare of the public, or would have an impact such that the ability of the health department to operate would be curtailed.

<p align="center"><b>CRITICAL FUNCTIONS (Restore within 12 hours)</b></p>	<p align="center"><b>PRIORITY FUNCTIONS (Restore within 24 hours)</b></p>	<p align="center"><b>ON-GOING FUNCTIONS (Restore within 1-2 weeks)</b></p>
<p><b>IT Capability</b></p> <ul style="list-style-type: none"> <li>Relocate to alternate facility with internet/phone capability.</li> <li>Contact internet/phone service provider. BLDHD has an “Essential Service Designation” with the provider which puts the health department on a priority list for repairs.</li> <li>Generators restore partial power to the Benzie Office and partial power to the Leelanau Office.</li> </ul> <p><b>Communication Systems</b></p> <ul style="list-style-type: none"> <li>Ensure ability to charge cell phones.</li> <li>800 MHz radios – ensure ability to charge batteries and train necessary staff on use.</li> <li>Teams calling and messaging are available with internet (WiFi or hotspot) access.</li> </ul> <p><b>Disease Surveillance</b></p> <ul style="list-style-type: none"> <li>Priority is disease surveillance related to the emergency event or other critical infectious disease.</li> <li>Communication related to disease surveillance is ideally via fax or electronically (MDSS or e-mail). 800 MHz radios may also be used to communicate between health departments and hospitals and MDHHS/DEPR.</li> </ul> <p><b>Safe Storage of Vaccines</b></p> <ul style="list-style-type: none"> <li>Ensure safe storage of biologics immediately upon notification of situation that may compromise effectiveness (e.g. power outage).</li> <li>Refrigerators in both offices can be powered by generator.</li> <li>If generators are compromised, Cool cubes will maintain refrigerator temperatures for 4 days and freezer temperatures for 1 day. Vaccine may also be transported to the alternate office if necessary.</li> </ul>	<p><b>Disease Surveillance</b></p> <ul style="list-style-type: none"> <li>Related and unrelated to the emergency situation.</li> <li>Follow-up for serious transmissible diseases (i.e. those requiring follow-up within 24 hours per MDHHS Prioritization Guidance)</li> <li>Faxes can be received when internet is available. In the absence of internet, disease reports will need to be called to the health department.</li> </ul> <p><b>Water Monitoring</b></p> <ul style="list-style-type: none"> <li>Determine safety of water supply and recommend steps to the community for ensuring safe drinking water.</li> </ul> <p><b>Immunizations</b></p> <ul style="list-style-type: none"> <li>Ensure ability to administer immunizations related to the emergency (e.g. tetanus).</li> </ul> <p><b>Communication Systems</b></p> <ul style="list-style-type: none"> <li>System to communicate with the public throughout the response (i.e. radio, scheduled press conferences, fax, social media/website, etc...)</li> </ul> <p><b>Septic and Well Permits/Inspections</b></p> <ul style="list-style-type: none"> <li>For emergency septic issues only</li> <li>For emergency out of water situations only</li> </ul>	<p>**Ideally, all health department functions will be fully restored within 1-2 weeks. But if this is not possible, consider...</p> <p><b>WIC</b></p> <ul style="list-style-type: none"> <li>Certs and Recerts deferred: 1 month of benefits loaded on WIC cards.</li> <li>If the event will be long term, request guidance from MDHHS regarding certs/recerts.</li> <li>If long term loss of WIC electronic capability, work with MDHHS and local food banks to supply baby formula, as able.</li> </ul> <p><b>Communicable Disease follow-up</b></p> <ul style="list-style-type: none"> <li>For all diseases except chronic disease in non-pregnant women (i.e. hepatitis).</li> </ul> <p><b>STI Testing/Treatment</b></p> <ul style="list-style-type: none"> <li>Point of care testing and treatment with existing medications or prescriptions.</li> </ul> <p><b>Food Service inspections</b></p> <ul style="list-style-type: none"> <li>For any temporary emergency food preparation operations</li> <li>Food service operations with high hazard foods with untrained management</li> </ul> <p><b>Finance</b></p> <ul style="list-style-type: none"> <li>Payroll and critical AP will be completed at a secure location</li> </ul>

**MANUALS AND RESOURCES** (By program)

PROGRAM	RESOURCE/LOCATION
<p><b>Communicable Disease</b></p>	<ul style="list-style-type: none"> <li>• BLDHD Communicable Disease Manual –Teams</li> <li>• Control of Communicable Disease Manual – Online</li> <li>• Red Book – Online</li> <li>• MDHHS Rabies Manual – Online</li> <li>• Michigan Head Lice Manual – Online</li> <li>• Michigan Scabies Prevention and Control – Online</li> <li>• Communicable Disease Management in Schools - Online</li> </ul>
<p><b>Emergency Preparedness</b></p>	<ul style="list-style-type: none"> <li>• BLDHD Integrated Preparedness Plan– Teams</li> <li>• Continuity of Operations Plan - Teams</li> <li>• Medical Countermeasure Plan – Teams</li> <li>• County Emergency Plans/Public Health Annex – Teams</li> <li>• 800 Mhz Radio Instructions - Teams</li> </ul>
<p><b>Food Service</b></p>	<ul style="list-style-type: none"> <li>• Environmental Health Policy and Procedure Manual – Shelving over documentation preparation area (Leelanau Office), Bookshelf in EH Drop-In office (Benzie).</li> <li>• Foodborne Illness Outbreak Investigative Procedures – Food Program filecabinet</li> </ul> <p>The following resources are in the food sanitarian’s office</p> <ul style="list-style-type: none"> <li>• Control of Communicable Disease Manual</li> <li>• Food Law of 2000</li> <li>• FDA 2009 Food Code</li> <li>• Emergency Action Plans for Retail Food Establishments</li> <li>• F.I.R.S.T., Foodborne Illness Response Strategy</li> </ul>
<p><b>General Environmental Health</b></p>	<ul style="list-style-type: none"> <li>• Environmental Policy and Procedures Manual – Shelving over documentation preparation area (Leelanau Office), Bookshelf in EH Drop-In office (Benzie)</li> <li>• Environmental Health Ready Reference – EH Director’s Office</li> </ul>

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<b>WIC/Imms/MIHP</b>	<ul style="list-style-type: none"> <li>• WIC Manual: Teams</li> <li>• Imms Policies/Procedures/Standing Orders– Teams</li> <li>• Lead Manual – MDHHS Online/Teams</li> <li>• MIHP: MDHHS online; Local policies in Teams</li> <li>• VFC Provider Manual – Online</li> </ul>
<b>General Personal Health</b>	<ul style="list-style-type: none"> <li>• Clia Lab Manual – Teams</li> <li>• Hearing and Vision Manual: Teams</li> <li>• Children’s Special Health Care Services Manual –Teams</li> </ul>
<b>STI/HIV/Hepatitis</b>	<ul style="list-style-type: none"> <li>• Policies/Procedures/Standing Orders - Teams</li> </ul>
<b>Finance</b>	<ul style="list-style-type: none"> <li>• Month End Accounting Procedures – Bookshelf in Director of Administrative Services/ Finance Supervisor’s Office.</li> </ul>

**FAMILY SUPPORT PLAN**

- Benzie-Leelanau District Health Department staff are provided with periodic training on personal family preparedness, to include water/food supplies, medical supplies, alternate pet and childcare, alternate communication mechanisms, alternate family relocation/reunification strategies.
- If feasible and necessary at the time of an event, the health department will provide supportive services, such as child or pet care, to ensure that employees are available to work.
- If feasible, employees will be allowed to work from home using technology such as internet and videoconferencing to facilitate coordination between work and family responsibilities.
- Mental health services will be provided to employees as needed. Arrangements for mental health/crisis counseling will be made through the health department’s EAP provider.

## **IT RECOVERY PLAN**

### **Definitions:**

Abila: Financial software that is maintained on a cloud server hosted by Community Brands

Disaster Backup and Recovery Plan - A plan to restore computer services to network and non-network users in case of natural and unnatural disasters, (i.e. fire, flood, loss of network service)

FetchEH: The Environmental Health database system that is maintained on servers by FetchEH. The database contains information related to well/septic permits, licenses, and inspections.

Laser Fiche: A cloud-based document management program that is managed by General Code. This program contains the scanned property file contents for both counties. It is also the program that is used to allow the public to access our property file records through a public portal.

Partial Loss of Service - Network is not available, but standalone PCs are working. Networked PCs are able to work as standalones.

Patagonia: Web-based electronic health record used to document clinical services.

Total Loss of Service - Complete loss of network services, data and software access. This could include server hardware failure or loss of network cabling due to some disaster like a flood, fire, and theft. Could also include loss of non-network access due to fire, flood etc.

Wired Network – Secured network run through a Spectrum fiber optic cable line for Benzie-Leelanau DistrictHealth Department.

Wireless Network – A backup network that is ran through a Spectrum fiber optic cable line available at Benzie-Leelanau District Health Department offices.

### **Location of Plan:**

One copy of this IT Recovery Plan can be found in the Department Policies Manual located in the Director of Administrative Services office, and one copy in the data management room in each facility.

The entire BLDHD COOP Plan is available in BLDHD Personnel/Emergency Preparedness channel in Teams.

### **Order of Service Restoration:**

Network services will be restored in the following order:

1. Servers will be brought back up. (Unless servers need to be replaced).
2. Users on the server will be reconnected, based on greatest need. Greatest need can be determined by Health Officer or Director of Administrative Services.
3. Users will be restored to outside connections in the same order and at the same time as they are reconnected to the local network.

Note: In the event that outside connections cannot be established at the time local network connections are reestablished, the proper outside agency will be contacted and involved in getting the connections back.

BLDHD COOP

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**Backup Rotation Schedule and Location of Network Records:** Backups are done automatically by obtaining images of the virtual servers and then stores them both locally and streams it offsite. The domain controller and DUO gateway server are backed up once a day and stored for two weeks locally and offsite. The file server and LaserFiche servers are backed up twice a day and local copies are kept for six months and offsite copies are kept for one year.

Invoices - are located in Account Clerk's office.

Equipment inventory location - Records are maintained in the [Finance Supervisor's Office](#) which include the records of serial numbers and users of equipment.

Instructions for Restoring Server:

The Benzie-Leelanau District Health Department has contracted with Wyant Computer Services to install and maintain the server located at each office. In the event a new server is needed, communications with WyantComputer Services would be established and a restoration timeline created.

**ATTACHMENT**

**Emergency Contacts**

Name	Phone Numbers	Title
Shelley Jablon	231-882- 2200(work) 231-631-4535 (cell)	Directorof Administrative Services
Michelle Klein	231-256-0210 (work) 231-633-9544 (cell)	Director of Personal Health, Emergency Coordinator
Wyant Computer	231-946-5969 231-218-8718 (Tom Wyant Cell) www.gowyant.com	Computer Systems Technicians
Kerry Turner	231-256-0202 (work) 248-804-7455 (cell)	Leelanau Building Manager
Rachel Pomeroy	231-256-0226 (work) 231-357-3065 (cell)	PIO Emergency Preparedness Coordinator
Matt Ansorge	231- 256-8775 (work) 231-620-9116 (Cell)	Leelanau Director of Emergency Management/911
Rebecca Hubers	231-882-0568 (work) 231-383-2016 (Cell)	Benzie County Emergency Management Coordinator
Eric Johnston	231-882-2109 (work) 231-649-1023 (cell)	EH Director
Dan Thorell	231 882-2182 (work) 231-590-2655 (cell)	Health Officer
Dr. Josh Meyerson	231-330-1410 (cell)	Medical Director
Nicholas Dow	231-256-0216 (work) 810-287-1447 (Cell)	Food Program Coordinator/Sanitarian III

**Benzie-Leelanau District Health Department  
Board of Health Meeting – February 25, 2026  
Environmental Health Director’s Report  
Eric Johnston**

**1. Land Use Programs Activity Comparison Report (FY 2025 vs FY 2026)**

<b>FY 2025 vs FY 2026 Total land Use Applications Thru 12-31-2025</b>			
Program	FY 2025	FY 2026	Difference
Well Permits	74	61	-8
Sewage Permits	83	108	25
Vacant Land Eval	27	27	0
S/W Evaluations	127	127	0
Remodel Reviews	18	22	4
Totals:	329	345	16

- Overall, the number of requests for land use services during FY 2026 are **up by 4.86%** from FY 2025.
- Leelanau County requests are **up by 13.61% (217 vs 191)**
  - Septic permits are up (69 vs 56)
  - Well permits are up (38 vs 34)
  - Vacant land evaluations are up slightly (20 vs 17)
  - Existing system evaluation requests increased (90 vs 84).
- Benzie County requests are **down 2.26% (130 vs 133)**
  - Septic permits are up (39 vs 25)
  - Well permits are down (23 vs 35)
  - Vacant land evaluations are down (7 vs 10)
  - Existing System Evaluation requests decreased (61 vs 63).

**2. Existing System Evaluation Statistic – January 1, 2025 thru December 31, 2025**

**Benzie County**

2025	Total	Satisfactory	*Unsatisfactory	% Unsatis
Sewage	243	227	16	6.58%
Water Well	254	245	9	3.54%

**Leelanau County**

2025	Total	Satisfactory	*Unsatisfactory	% Unsatis
Sewage	277	233	44	15.88%
Water Well	354	340	14	3.95%

\*Unsatisfactory - means the system evaluated does not substantially conform to the BLDHD District Sanitary Code.



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF  
ENVIRONMENT, GREAT LAKES, AND ENERGY  
DRINKING WATER AND ENVIRONMENTAL HEALTH DIVISION



PHILLIP D. ROOS  
DIRECTOR

February 6, 2026

VIA EMAIL

Daniel Thorell  
Benzie-Leelanau District Health Department  
8527 East Government Center Drive, Suite LL-007  
Suttons Bay, Michigan 49682-9742

Dear Daniel Thorell:

**SUBJECT: Maximum Contaminant Levels (MCL) for Per- and Polyfluoroalkyl Substances (PFAS), other Contaminants of Concern, and the 1996 United States Environmental Protection Agency Drinking Water Standards (1996 EPA Standard) referenced within the Part 4 Administrative Rules for Subdivisions, Condominiums, and Less than One Acre Land Divisions**

This correspondence provides clarification regarding determinations for approval or rejection in accordance with the Part 4 Administrative Rules governing On-site Water Supply and Sewage Disposal (Part 4 Rules) for less than one acre Land Divisions, Subdivisions (plats), and Condominiums for projects not served by a community water supply, being R 560.401 to R 560.428, effective February 7, 2001<sup>1</sup>.

The Part 4 Rules require that before issuing approval for suitability of a development, evidence to support that a *potable, adequate, reliable, and protected* on-site water supply has been or can be developed on the parcel. Condominiums, subdivisions, and less than one acre parcels create communities of dense housing developments. The purpose and intent of Part 4 Rules is to provide planned development to ensure public health protection, preserve and protect environmental resources, and offer consumer

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<sup>1</sup>The Part 4 Administrative Rules were promulgated under 1967 PA 288, as amended, section 105(g) of the Land Division Act (LDA). These rules are applicable to:

- a. Preliminary plats or subdivisions (section 118, LDA),
- b. Divisions resulting in a parcel less than one acre (section 109a., LDA, effective July 28, 1997), and
- c. Condominium projects (section 71a, 1983 Act 59, as amended, the Condominium Act).

protection for buyers and future owners. Even if the new community is served by individual water wells, the developer needs to ensure the aquifer has sufficient water quality and capacity for a potable and sustainable water supply source to serve all the homes collectively, no different than a community water supply.

Specifically, when reviewing a proposed development under the Part 4 Rules, the assessment of, and water sampling for, PFAS compounds<sup>2</sup>, volatile organic compounds (VOC), synthetic organic compounds (SOC), radioactivity, metals analysis, water quality parameters, in addition to the parameters listed in R 560.412 of the Part 4 Rules, is required. Some of these contaminants are not listed in the 1996 EPA Standard referenced in the Part 4 Rules.

**The seven Michigan regulated PFAS compounds need to be considered during a Part 4 Rule review, the same as any other contaminants of concern or sources of contamination. The Michigan-adopted primary MCLs for PFAS and other Michigan-specific MCLs for contaminants not identified in the 1996 EPA Standard serve as one of the measures for evidence of potable, adequate, reliable, and protected water supply.** See current list of contaminants<sup>2</sup> to be sampled for all developments subject to the Part 4 Rules.

In absence of sampling a representative number of vicinity off-site wells or on-site test wells for all the required contaminants, it is the developer's responsibility to hire a qualified consultant to submit hydrogeological information that demonstrates and satisfactorily proves that the required sampling isn't necessary for a specific proposed project.

This correspondence details specific elements of the Part 4 Rules. Reviewing local health departments (LHD) and qualified consultants preparing evidence for LHD review will additionally ensure all Part 4 Rules are considered.

#### **Requirement for Suitability – On-site Water Supply Location and Construction:**

R 560.407 of the Part 4 Rules requires that an on-site water supply meets the **location and construction standards** of the Well Construction Code, Part 127 Water Supply and Sewer Systems, of the Michigan Public Health Code, 1978 PA 368, as amended, MCL 333.12701 *et seq.* R 325.1622 of the Well Construction Code states in part, "A well that furnishes water for any beneficial use shall be located where it is not subject to contamination."

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<sup>2</sup> The attached document, "Test Well Water Sample Analysis Requirements under Part 4 Administrative Rules, January 2026," pursuant to the Safe Drinking Water Act, 1976 PA 399, as amended.

Location and isolation distances to sources of contamination must be assessed and must be met, as per R 560.407 of the Part 4 Rules. This assessment must be done prior to issuing test well permits, prior to approval of development proposals after the Part 4 Rules review, and prior to issuing drinking water well or irrigation well permits for individual lots for residential development. Deviations to reduce isolation distances are prohibited, as per R 560.410 of the Part 4 Rules. This includes isolation distances to PFAS contamination sites, PFAS areas of interest/concern, and all other contamination sites and sources. LHDs should review the [Michigan PFAS Action Response Team \(MPART\)](#) website to determine if the proposed development is within or near an existing PFAS site or Area of Interest, and review the [Remediation Information Data Exchange \(RIDE\) website](#) for other sources of contamination. In addition, LHDs should review the [MiEnviro Portal](#) to ensure proposed test wells and/or water well locations meet isolation distance to discharge locations permitted under a state groundwater discharge permit along with checking other [Resources for water wells and potential sources of contamination](#). LHDs can request a PFAS Review Team consultation specific to the proposal to assist in assessment of *location* relative to known areas of PFAS contaminated groundwaters as part of the permitting process for test wells and drinking water wells.

All water wells (test wells, drinking water wells, irrigation wells) shall be ***permitted and constructed*** in accordance with the methods identified in R 560.408 of the Part 4 Rules to provide additional protection from sources of contamination. LHD-issued construction permits shall document the specific method(s) necessary to provide adequate protection, including one or a combination of the following: (a) penetration of an impervious layer which is of sufficient areal extent, but which is not less than 10 feet thick, (b) maintaining a minimum of 50 feet from the static water level to the bottom of the casing or top of the screen in an unconfined aquifer, or (c) an increase in the minimum horizontal isolation distance between the well and a source from which groundwater contamination may occur.

**Evidence of potable, adequate, reliable, and protected-- including evidence for contaminants or parameters not listed in the adopted 1996 EPA Standard:**

When a contaminant or parameter is referenced as a primary MCL in the 1996 EPA Standard adopted in R 560.413 of the Part 4 Rules, the concentration set in that document serves as the MCL for determination of potable, adequate, reliable, and protected.<sup>3</sup>

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<sup>3</sup> The EPA has lowered the MCL for arsenic and increased the MCL for uranium since 1996. Note that the 2002 memo from EGLE to LHDs regarding arsenic remains in place and is not changed by this letter. Arsenic and uranium MCLs as listed in the October 1996 adopted standard remain the level applied for review under the Part 4 Administrative Rules.

However, when a contaminant or parameter is not referenced in the 1996 EPA Standard, as is the case with PFAS, the adopted Michigan Standard serves as the primary MCL for determination of potable, adequate, reliable, and protected. R 560.401(t) of the Part 4 Rules defines “primary maximum contaminant level” as the concentration level of a contaminant above which consumption of the water poses a health risk. The PFAS MCLs are in R 325.10604g, of the Michigan Safe Drinking Water Act, 1976 PA 399, as amended (Act 399), (effective August 3, 2020).<sup>4</sup>

### **Assessment of PFAS Contaminant Test Results:**

Refer to [MPART’s page on Michigan’s MCLs](#) to properly assess PFAS sample test results. Depending on the results obtained, LHDs will refer to the following when assessing parcel or development proposals under the Part 4 Rules. Where representative water quality data available from existing representative wells or the data from properly isolated test well(s):

- Confirms PFAS *concentrations are not detected*; approval can be considered without condition.
- Confirms PFAS *are detected and the concentration will consistently remain at or below 50 percent of the corresponding PFAS MCL(s)*, approval can be considered without condition. LHD requests a PFAS Review Team consultation for the Department of Environment, Great Lakes, and Energy (EGLE) Drinking Water and Environmental Health Division (DWEHD) assistance in reviewing the qualified consultant’s determination. Additional hydrogeological information which demonstrates evidence of suitability of an on-site water supply may be needed on a case-by-case basis. EGLE DWEHD recommends language be included in recorded advisories on the master deed per R 560.426 of the Part 4 Rules, to provide information regarding the concentrations, health effects of PFAS, and recommended water treatment strategies.
- Confirms PFAS *concentrations exceed 50 percent of the corresponding MCL(s) (but are below the MCL)*, follow R 560.414 of the Part 4 Rules and require submittal of additional hydrogeological information from a qualified consultant. Once submitted, the LHD requests a PFAS Review Team consultation for the specific proposal to determine if the concentration is likely to exceed the MCL over time.

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<sup>4</sup> Copies may be obtained from EGLE DWEHD or the Administrative Rulemaking System site at [ARS.Apps.LARA.State.MI.US/AdminCode/AdminCode](https://ARS.Apps.LARA.State.MI.US/AdminCode/AdminCode).

R 560.414(2) of the Part 4 Rules identifies that the reviewer shall issue a rejection where water sample analysis detects a contaminant in a concentration that is more than 50 percent of the MCL and the contaminant is likely to exceed the MCL in the future after consideration of the following: contaminant transport and modeling, land use, geology, and other factors that influence groundwater movement.

- Confirms PFAS *concentrations exceed the Michigan primary MCL*; rejection of the on-site water supply for the proposed less than one acre parcel, subdivision (plat), and condominium project in accordance with R 560.414(1) and R 560.428(b) of the Part 4 Rules is necessary.

### **The Application of Water Treatment and/or Restrictions and Advisories:**

Potable source water is required for approval of a proposed development under the Part 4 Rules. The use of water treatment devices and/or restrictions and advisories (R 560.426) is **not** a means to grant an approval of a parcel(s) or developments involving the Part 4 Rules when contaminants are greater than 50 percent of the primary MCL (and likely to increase) or that exceed the primary MCL for PFAS or any other primary contaminant.

### **How EGLE can assist LHDs with PFAS-related cases involving the Part 4 Rules:**

- EGLE DWEHD is the delegated department and division to administer the Part 4 Rules. LHDs can submit a request for [PFAS Review Team Consultation](#). The purpose of the PFAS Review Team is to provide the LHD a central point of contact and resource for technical information, including matters related to the Part 4 Rules. In this capacity, the team may include representatives of MPART, EGLE Remediation and Redevelopment Division (or other divisions), the Department of Health and Human Services (DHHS), or other state agencies in this process.
- EGLE's state certified drinking water lab may be selected for analysis following approved analytical methods<sup>5</sup>.

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<sup>5</sup> PFAS sampling to be conducted by accredited or Michigan certified drinking water laboratory, utilizing United States Environmental Protection Agency Method 533 or 537.1, or another approved and recognized analytical method for drinking water.

**Summary:**

**Michigan has determined the concentration of PFAS above which consumption of the water poses health risks, and the MCLs were promulgated into rules for public drinking water supplies under Act 399. Private residential wells are not regulated under Act 399, but Michigan uses the MCLs along with other factors when evaluating private residential well results.**

**The Part 4 Rules identify before an approval for the suitability of an on-site water supply, there shall be evidence that a potable, adequate, reliable, and protected on-site water supply has been or can be developed. Water sampling, for PFAS, VOCs, SOCs, radioactivity, and metals are required for all development proposals.**

**EGLE DWEHD and LHDs will reference and enforce Michigan's PFAS MCLs when reviewing for suitability and the Part 4 Rules. On-site water supplies must meet the location and construction requirements of the Well Construction Code and, as applicable, Act 399. All other Part 4 Rules and other applicable state laws and rules are considered as part of an approval or rejection.**

The above provides a framework for consideration of pending and future proposals involving the Part 4 Rules. LHDs should utilize the [Michigan Environmental Health and Drinking Water Information System \(MiEHDWIS\)](#) for the submittal of any technical assistance requests during a Part 4 Rules review and also to submit copies of approval and/or rejection letters and supporting information. Please contact the area environmental quality analyst in the [Onsite Wastewater Management Unit](#) regarding the Land Division Act, Condominium Act, or Part 4 Rules should you have specific questions.

Sincerely,

Brian E. Thurston, P.E.  
Assistant Director  
Drinking Water and Environmental Health Division  
Department of Environment, Great Lakes, and Energy

Attachment

cc: Eric Johnston, Benzie-Leelanau District Health Department  
Norm Hess, Michigan Association for Local Public Health  
Kory Groetsch, DHHS  
Laura de la Rambelje, DHHS  
Abilgail Hendershott, MPART  
Andrew Brisbo, Department of Licensing and Regulatory Affairs  
Larry Horvath, Department of Licensing and Regulatory Affairs  
Dana DeBruyn, EGLE  
Jeremy Hoeh, EGLE  
Brandon Morrill, EGLE  
Emily Peabody, EGLE  
Tanya Rule, EGLE  
Ian Smith, EGLE

# Test Well Water Sample Analysis Requirements under Part 4 Administrative Rules

## Less than One Acre Parcels Divided After July 28, 1997, Subdivision and Plat Developments, and Condominium Projects

### BACTERIOLOGICAL

Total Coliform  
E. Coli

### PARTIAL CHEMISTRY

(R, 32 & 36 ME)\*

Nitrate  
Nitrite  
Fluoride  
Sulfate  
Chloride  
Hardness  
Sodium  
Sulfate

### WATER QUALITY PARAMETERS

(CORR, 32 & 36ME)\*

Alkalinity  
Calcium  
Conductivity

### GENERAL METALS

(CPM1, 36ME)\*

Iron  
Manganese  
Copper  
Zinc

### METALS

(CMET2, 36ME)\*

Arsenic  
Barium  
Cadmium  
Chromium  
Mercury  
Antimony  
Beryllium  
Nickel  
Selenium  
Thallium  
(CU, 36ME)  
Uranium

### CYANIDE

(CCN, 36CN)\*

Cyanide

### VOLATILE ORGANICS (VOC)

(CXVO, 36VO)\*

Benzene  
Carbon Tetrachloride  
o-dichlorobenzene  
p-dichlorobenzene  
1,2-dichloroethane  
1,1-dichloroethylene  
cis-1,2-dichloroethylene  
trans-1,2-dichloroethylene  
Dichloromethane (methylene chloride)  
1,2-dichloropropane  
Ethylbenzene  
Monochlorobenzene  
Styrene  
Tetrachloroethylene  
Toluene  
1,2,4-trichlorobenzene  
1,1,1-trichlorethane  
1,1,2-trichlorethane  
Trichloroethylene  
Xylenes (total)  
Vinyl Chloride

### SYNTHETIC ORGANICS (SOC)

*Pesticides*

(CXPT3, 36PT)\*

Alachlor  
Atrazine  
Benzo(a)pyrene  
Chlordane  
Di(2-ethylhexyl) adipate  
Di(2-ethylhexyl) phthalate  
Endrin  
Heptachlor  
Heptachlor Epoxide  
Hexachlorobenzene  
Hexachlorocyclopentadiene  
Lindane  
Methoxychlor  
Polychlorinated Biphenols  
Simazine  
Toxaphene

### SOC (continued)

*Herbicides*

(CXHB, 36HB)\*

Dinoseb  
Pentachlorophenol  
Picloram  
2,4-D  
2,4,5-TP (Silvex)

*Carbamates*

(CXLP, 36LP)\*

Aldicarb  
Aldicarb Sulfoxide  
Aldicarb Sulfone  
Carbofuran  
Oxamyl (vydate)

### Per- and Polyfluoroalkyl Substances (PFAS)

(CXPFAS, PFASF)\*

Perfluorobutanesulfonic Acid (PFBS)  
Perfluorohexane Sulfonic Acid  
(PFHxS) Perfluorononanoic Acid  
(PFNA) Perfluorooctane Sulfonic Acid  
(PFOS) Perfluorooctanoic Acid (PFOA)  
Perfluorohexanoic Acid (PFHxA)  
HFPO-DA

### RADIOACTIVITY

(Not performed at EGLE Lab)\*

Gross Alpha  
Radium 226  
Radium 228

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A certified laboratory must perform the above testing.

Michigan Department of Environment,  
Great Lakes, and Energy (EGLE)  
Laboratory scans may include other  
contaminants for which monitoring is  
not mandated.

\* EGLE Lab Test Code and Sample Unit

Director of Administrative Services  
Report – February 2026  
Shelley Jablon

The purpose of the administration division is to manage the finances, purchasing, billing, human resources, technology and assist in the building areas of the Health Department.

**Finance:**

In the Board packet the January 2026 financials are included. The financial statements are year-to-date and are reflected through January 31, 2026. The total for expenses is 31% of the approved budget, this is slightly below the 33% mark that the Agency is at for the fiscal year.

The annual audit is in the process of being completed. A draft of the audit has been reviewed and there were no issues being reported in the draft.

**Human Resources:**

During the week of February 9, 2026 the advertisement for the Environmental Health Admin Assistant was posted. Several resumes have been received for this position. Interviews will start the last week of February.

**Technology, Purchasing and Billing:**

No new changes reported in any of these areas since the last meeting.

**Building:**

No new changes since our last meeting