

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
 REGULAR BOARD MEETING
 Patrick Barrie Room
 705 N. Zeeb Rd, Ann Arbor, MI
 Wednesday, May 8, 2019
 6:00 PM



Agenda

	<u>Guide</u>
I. Call to Order	1 min
II. Roll Call	2 min
III. Consideration to Adopt the Agenda as Presented	2 min
IV. Consideration to Approve the Minutes of the 4-10-19 Regular Meeting and Waive the Reading Thereof {Att. #1}	2 min
V. Audience Participation (5 minutes per participant)	
VI. Old Business	30 min
a. May Finance Report {Att. #2}	
b. Board Action Consideration to authorize Board Chair to execute the Employment Separation Agreement for former CEO Jane Terwilliger	
c. Board Action Consideration to authorize Board Chair to execute Interim CEO Contract	
VII. New Business	20 min
a. CEO Search Committee	
b. Board Action Consideration to approve the Home of New Vision contract amendment as presented {Att. #3}	
c. MPDS Survey Reimbursements {Att. #4} (Information Only)	
VIII. Reports to the CMHPSM Board	15 min
a. CEO Report to the Board {Att. #5}	
b. Report from the SUD Oversight Policy Board (OPB) {Att. #6}	
IX. Adjournment	

**COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
REGULAR BOARD MEETING MINUTES**

April 10, 2019



Members Present: Judy Ackley, Greg Adams, Susan Fortney, Roxanne Garber, Bob King, Sandra Libstorff, Charles Londo, Gary McIntosh, Caroline Richardson, Katie Scott, Sharon Slaton

Members Absent: Charles Coleman, Ralph Tillotson

Staff Present: Kathryn Szewczuk, Trish Cortes, Connie Conklin, Stephannie Weary, Lisa Jennings, James Colaianne, Suzanne Stolz, Dana Darrow, Nicole Phelps, Marci Scalera

Others Present: Lori Lutomski

- I. Call to Order
Meeting called to order at 6:00 p.m. by Board Chair C. Londo.
- II. Roll Call
J A quorum of members present was confirmed.
- III. Consideration to Adopt the Agenda as Presented

**Motion by S. Fortney, supported by K. Scott, to approve the agenda as amended
Motion carried**

Additions:

- J Closed session to discuss personnel-related issue.
- J Resolution of appointment of an interim director for agency.

- IV. Consideration to Approve the Minutes of the March 13, 2019 Regular Meeting and Waive the Reading Thereof

**Motion by S. Slaton, supported by G. McIntosh, to approve the minutes of March 13, 2019 Regular Meeting and waive the reading thereof
Motion carried**

- V. Audience Participation
None

- VI. Old Business
 - a. April Finance Report
S. Stolz presented. Discussion followed.
 - b. CEO Performance Evaluation Committee Report

**Motion by R. Garber, supported by C. Richardson, to go into closed session
Motion carried**

) Regional Board meeting went into closed session at 6:25 p.m. All were excused from the meeting except for board members.

**Motion by S. Fortney, supported by J. Ackley, for Board to go back into open session
Motion carried**

) Regional Board meeting went back into open session at 6:55 p.m.

**Motion by C. Richardson, supported by R. Garber, to accept the voluntary resignation submitted orally by Jane Terwilliger at 4:10 p.m. on 4/10/2019, and further to authorize an offer of the balance of payment due under Ms. Terwilliger’s current employment contract in exchange for a waiver and release of all claims
Motion carried**

Ackley	Yes	Londo	Yes
Adams	Yes	McIntosh	Yes
Coleman	Absent	Richardson	Yes
Fortney	Yes	Scott	Yes
Garber	Yes	Slaton	Yes
King	Yes	Tillotson	Absent
Libstorff	Yes		

**Motion by C. Richardson, supported by R. Garber, to appoint James Colaianne as Interim Chief Executive Officer, and to begin a search process by appointing a search committee including county executive directors
Motion carried**

Ackley	Yes	Londo	Yes
Adams	Yes	McIntosh	Yes
Coleman	Absent	Richardson	Yes
Fortney	Yes	Scott	Yes
Garber	Yes	Slaton	Yes
King	Yes	Tillotson	Absent
Libstorff	Yes		

- VII. New Business
 - a. FY19 Direct Care Wage Pass-Through

Attachment #1 – May 2019

-) J. Colaianne presented. Discussion followed.
- b. Vendor Contracts
 -) J. Colaianne presented. Discussion followed.

VIII. PIHP CEO Report to the Board

-) Oversight Policy Board (OPB) minutes were included with board packet.
-) M. Scalera provided an overview of OPB.

IX. Adjournment

Motion by S. Slaton, supported by C. Richardson, to adjourn the meeting
Motion carried

Meeting adjourned at 7:25 p.m.

Judy Ackley, CMHPSM Board Secretary

DRAFT



Financial Highlights
Fiscal Year 2019
For the Period Ending March 31, 2019

Summary of Revenues & Expenses by Fund Source:

1. Preliminary cost projections by the Affiliate Partners indicate there will not be enough Medicaid Funding to cover FY2019 needs.
2. Preliminary cost projections by Affiliate Partners indicate there will not be enough Healthy Michigan Plan funding for FY2019.
3. The SUD projections for Medicaid, Healthy Michigan Plan, Block Grant, PA2 funding and projected utilization of PA2 reserves indicates funding will be sufficient to cover FY2019 needs and is consistent with projections and delayed initiatives.

CMHPSM Strategies:

1. CMHPSM will continue to coordinate with the CMHSP's to review current year budgets and actual expenditures.
2. CMHPSM and the CMHSP's will continue revenue advocacy in relation to the FY19 rates and the FY20 rate setting with MDHHS.
3. CMHPSM in collaboration with the Regional Operations Committee is utilizing a shared decision model to monitor and balance FY19 expenditures to revenues including the shared risk corridor.
4. CMHPSM is monitoring the CMHSP expenditure overages. CMHPSM is working with the CMHSP's to ensure medically necessary care is being provided through appropriate utilization of resources in a cost effective and timely manner.
5. CMHPSM will utilize the most current payment data to monitor incoming revenues and to project revenues by trending traditional Medicaid Eligibles and HMP Enrollees.

**Community Mental Health Partnership of Southeast Michigan
Preliminary Statement of Revenues and Expenditures
For the Period Ending March 31, 2019**

	2nd Amend FY19 Budget	Budget to date	YTD Actual	YTD Actual O/(U) Budget	Percent Variance Actual to Budget	Projected YTD	Projected O/(U) Budget
Operating Revenue							
Medicaid Capitation SP/B3	87,280,931	43,640,466	44,664,181	1,023,716	2.29%	89,328,363	2,047,432
Medicaid Capitation HSW	43,998,199	21,999,100	21,700,939	(298,160)	-1.37%	43,401,878	(596,321)
Performance Based Incentive Pool	1,499,519	749,760	749,760	-	0.00%	1,499,519	-
Medicaid SUD Capitation	2,427,015	1,213,508	1,210,118	(3,390)	-0.28%	2,420,236	(6,779)
Healthy Michigan Plan	10,204,910	5,102,455	5,123,448	20,993	0.41%	10,246,896	41,986
Healthy Michigan Plan SUD	4,427,786	2,213,893	2,221,416	7,523	0.34%	4,442,831	15,045
Autism	9,480,753	4,740,377	4,749,544	9,167	0.19%	9,499,088	18,335
SUD Community Block Grant	6,860,943	3,430,472	3,430,472	-	0.00%	6,860,943	-
Block Grants	350,000	175,000	156,096	(18,904)	-12.11%	312,192	(37,808)
SUD PA2 - Cobo Tax Revenue	1,860,059	930,030	930,030	-	0.00%	1,860,059	-
SUD PA2 - Cobo Tax Use of Reserv	1,564,432	782,216	782,216	-	0.00%	1,564,432	-
Local Match	1,577,780	788,890	788,890	-	0.00%	1,577,780	-
Other Revenue	331,920	165,960	113,842	(52,118)	-45.78%	227,685	(104,235)
Anticipated Medicaid Revenue	13,868,008	6,934,004	-	(6,934,004)	-3	13,868,008	-
Total Revenue	\$ 185,732,255	\$ 92,866,128	\$ 86,620,951	\$ (6,245,177)	-7.21%	\$ 187,109,910	\$ 1,377,655
Funding For CMHSP Partners							
Lenawee CMHSP	18,400,108	9,200,054	9,362,541	162,487	1.74%	18,400,108	324,975
Livingston CMHSP	29,238,050	14,619,025	14,155,599	(463,426)	-3.27%	29,238,050	(926,851)
Monroe CMHSP	31,881,500	15,940,750	14,491,354	(1,449,396)	-10.00%	31,881,500	(2,898,793)
Washtenaw CMHSP	78,723,853	39,361,927	34,727,284	(4,634,642)	-13.35%	78,723,853	(9,269,284)
Total Funding For CMHSP Partners	\$ 158,243,511	\$ 79,121,756	\$ 72,736,779	\$ (6,384,977)	-8.78%	\$ 158,243,511	\$ (12,769,953)
Funding For SUD Services							
Lenawee County	2,368,015	1,184,008	1,035,673	(148,334)	-14.32%	2,368,015	-
Livingston County	2,870,825	1,435,413	1,061,773	(373,639)	-35.19%	2,870,825	-
Monroe County	2,669,660	1,334,830	1,092,473	(242,357)	-22.18%	2,669,660	-
Washtenaw County	7,738,563	3,869,282	3,065,235	(804,047)	-26.23%	7,738,563	-
Total Funding For SUD Services	\$ 15,647,063	\$ 7,823,532	\$ 6,255,154	\$ (1,568,377)	-25.07%	\$ 15,647,063	\$ -
Other Contractual Obligations							
Hospital Rate Adjuster	2,943,755	1,471,878	1,471,878	-	0.00%	2,943,755	-
Insurance Provider Assessment Tax	1,456,827	728,414	915,063	186,649	20.40%	1,830,126	373,299
Local Match	1,577,780	788,890	788,890	-	0.00%	1,577,780	-
Total Other Costs	\$ 5,978,362	\$ 2,989,181	\$ 3,175,830	\$ 186,649	5.88%	\$ 6,351,661	\$ 373,299
CMHPSM Administrative Costs							
Salary & Fringe	2,383,701	1,191,851	1,012,679	(179,172)	-17.69%	2,383,701	-
Administrative Contracts	1,714,002	857,001	364,712	(492,289)	-134.98%	1,714,002	-
Board Expense	2,750	1,375	800	(575)	-71.88%	2,750	-
All Other Costs	263,347	131,674	133,196	1,523	1.14%	263,347	-
Total Administrative Expense	\$ 4,363,800	\$ 2,181,900	\$ 1,511,387	\$ (670,513)	-44.36%	\$ 4,363,800	\$ -
Risk Reserve Provision	\$ 1,499,519	\$ 749,760	\$ 749,760	-	-	\$ 1,499,519	\$ -
Total Expense	\$ 185,732,255	\$ 92,866,128	\$ 84,428,910	\$ (8,437,218)	-9.99%	\$ 186,105,554	\$ (12,396,655)
Revenues over (under) Expenditures	\$ -	\$ -	\$ 2,192,041	\$ 2,192,041		\$ 1,004,356	\$ 13,774,309

**Community Mental Health Partnership of Southeast Michigan
Preliminary Statement of Revenues and Expenditures Notes
For the Period Ending March 31, 2019**

- 1 PMTO and Club House block grant funding is a pass through to CMHSP's. Revenue under budget correlates with administrative contract expenditures under budget.
- 2 Other revenue under budget due to vacant SIS assessor position and contracted assessments. Revenue is based on billings of SIS assessor expenditures. The revenue under budget correlates with administrative contract and administrative wages under budget.
- 3 Anticipated Medicaid Revenue was amended to reflect the funding projected to provide sufficient support to provide all medically necessary services for those Medicaid entitled beneficiaries. Receipt of funding is not known.
- 4 See attached for narratives required by the Financial Stability & Risk Reserve Management Policy of a 5% variance. Actual to date for the CMHSP's is distribution of available funding to date. Please see Distribution Analysis attached.
- 5 SUD Block grant programs and PA2 initiatives are not fully implemented, most specifically State Opioid Response, State Targeted Response, Innovative Strategies and Gambling Prevention.
- 6 The Insurance Provider Assessment (IPA) has been invoiced based on fiscal year 2017 enrollments for the 1st quarter of FY2019. Adjustments are anticipated due to higher than expected eligibles. The revenue budgets were increased to reflect these increased eligibles. The IPA expenditure budget will be adjusted as well to reflect the increased eligibles in the next amendment
- 7 Salary and wages under budget due to a vacant positions.
- 8 Administrative contracts under budget due to timing, primarily contract expenditures in relation to the Block Grant Other, SIS assessment, and Gambling Prevention contracts.
- 9 Regional Board under expense due to low cost of meetings.

**Community Mental Health Partnership of Southeast Michigan
Received and Distributed by Fund Source
FY 18/19**

	<u>October</u>	<u>November</u>	<u>December</u>	<u>January</u>	<u>February</u>	<u>March</u>	<u>April</u>	<u>May</u>	<u>June</u>	<u>July</u>	<u>August</u>	<u>September</u>	<u>YTD</u>
State Plan/B3 Receipts	\$ 7,275,309	\$ 7,262,790	\$ 7,209,779	\$ 7,468,416	\$ 8,264,493	\$ 7,183,395	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 44,664,181 *
Distributions													
Lenawee CMHSP	930,624	950,544	943,154	976,938	986,204	1,069,039							\$ 5,856,502
Livingston CMHSP	1,255,074	1,281,938	1,271,972	1,317,534	1,330,031	1,441,746							\$ 7,898,296
Monroe CMHSP	1,405,282	1,435,362	1,424,203	1,475,218	1,489,211	1,614,295							\$ 8,843,571
Washtenaw CMHSP	3,084,945	3,150,977	3,126,480	3,238,472	3,269,189	3,543,781							\$ 19,413,843
	\$ 6,675,926	\$ 6,818,821	\$ 6,765,808	\$ 7,008,162	\$ 7,074,635	\$ 7,668,861	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 42,012,213
HSW Receipts	\$ 3,389,214	\$ 3,943,530	\$ 3,662,898	\$ 3,478,019	\$ 3,719,221	\$ 3,508,057	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 21,700,939
Distributions													
Lenawee CMHSP	372,809	381,538	418,047	415,530	398,072	395,729							\$ 2,381,725
Livingston CMHSP	588,074	622,174	589,533	627,496	638,929	598,384							\$ 3,664,589
Monroe CMHSP	587,361	590,851	665,760	642,598	656,963	597,014							\$ 3,740,546
Washtenaw CMHSP	1,787,760	1,965,023	1,943,069	1,998,151	1,966,866	1,858,414							\$ 11,519,283
	\$ 3,336,003	\$ 3,559,586	\$ 3,616,409	\$ 3,683,775	\$ 3,660,830	\$ 3,449,540	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 21,306,143
Autism Receipts	\$ 785,998	\$ 794,195	\$ 789,286	\$ 784,892	\$ 807,013	\$ 788,161	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,749,544
Distributions													
Lenawee CMHSP	76,646	77,207	76,852	76,430	78,587	76,748							\$ 462,471
Livingston CMHSP	281,758	283,821	282,514	280,963	288,893	282,134							\$ 1,700,081
Monroe CMHSP	150,276	151,376	150,679	149,852	154,081	150,477							\$ 906,741
Washtenaw CMHSP	264,742	266,681	265,453	263,995	271,447	265,096							\$ 1,597,414
	\$ 773,422	\$ 779,085	\$ 775,498	\$ 771,240	\$ 793,008	\$ 774,455	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,666,707
HMP Receipts	\$ 855,219	\$ 847,573	\$ 848,057	\$ 861,374	\$ 859,377	\$ 851,849	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,123,448
Distributions													
Lenawee CMHSP	105,108	110,600	110,477	112,396	112,115	111,147							\$ 661,844
Livingston CMHSP	141,753	149,160	148,994	151,582	151,203	149,942							\$ 892,633
Monroe CMHSP	158,718	167,011	166,826	169,723	169,299	168,919							\$ 1,000,496
Washtenaw CMHSP	348,425	366,631	366,224	372,585	371,653	371,227							\$ 2,196,744
	\$ 754,004	\$ 793,403	\$ 792,521	\$ 806,286	\$ 804,269	\$ 801,235	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,751,717
Total Receipts	\$12,305,739	\$12,848,088	\$12,510,019	\$12,784,701	\$13,650,105	\$12,331,461	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$76,238,112
Total Distributions	\$11,539,355	\$11,950,895	\$11,950,235	\$12,269,463	\$12,332,742	\$12,694,090	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$72,736,779

Note: Distributions are based on amounts actually received less HRA, taxes and Administration of 1.57%.

* February receipts are higher than normal due to the Hospital Rate Adjustor (HRA). HRA was not included in the rates and is being paid in separate lump sum payments. The amounts withheld from partners October through January were disbursed in March.



**CMHSP Financial Narratives
Fiscal Year 2019
For the Period Ending March 31, 2019**

Livingston

For Fiscal year 2019, Livingston CMH is projecting a \$2.1 million overall deficit. 83% of the deficit is stemming from underfunding in Autism. Livingston CMH is projecting a \$1.7 million deficit in Autism. Over the past 3 years LCCMHA has seen significant growth in the number of consumers severed as well as an uptick in services during summer months when children are not attending school. Provider costs have also increased which has been out of the CMH's control since struggles already exist with having enough providers to provider services for our growing Autism population. Livingston CMH continues to advocate for more funding to legislature. LCCMHA is also projecting a deficit of \$741,000 for FY19 in HMP. 49% of the total HMP costs stem from inpatient hospitalizations and from that only half of the consumers who are on HMP, are receiving CMH services despite our attempts to try and engage them into services or other community providers. This is a concern that HMP consumers are in need of a higher level of care than what the plan was intended for. The HMP plan was intended to be a plan for the mild to moderate consumers. The difference in what the plan was intended for and who it is actually serving is negatively affecting LCCMHA's funding, therefore causing a deficit.

Monroe

Monroe CMHA is projected to have \$30,019,807 in Medicaid and Healthy Michigan expenses for FY2019. This is over the revised allocation of \$26,813,843 by \$3,205,964. For Autism, we are projected to have \$1,861,669 in in expenses which is over \$186,179 from the revised allocation of \$1,675,490. These projections are based on the past two years actual expenses for contracted services for consumers which were roughly the same amount. Autism is based on the increase of autism consumers and services provided to them.

Monroe is aggressively looking at ways to reduce these costs where necessary. Also, the projection includes a possible increase of new consumers.

Washtenaw

For fiscal year 2019, Washtenaw CMH is currently projecting an overall deficit of \$10 million. The main areas of underfunding are for service provision to the Healthy Michigan Plan population as well as the traditional Medicaid population. For FY19, WCCMH is continuing to experience the same increased cost and utilization of medically necessary services as identified in the later part of FY16, and all of FY17 and FY18. The budget pressures continue to occur in three primary services areas, Community Living Supports, Specialized Residential Services and Inpatient Hospitalizations. Due to group home capacity challenges, individuals requiring a specialized residential placement are having to be placed out-of-county at a higher cost of service. WCCMH has engaged with its provider network to seek opportunities to open new group homes and available placements within their respective locations. For the past several years, individuals are being discharged from the state hospitals with very high acuity and require a level care that is not currently available due to capacity constraints within our CMH. Community Living Supports (CLS) services continue to be an area of concern and WCCMH continues its focus on utilization review. The CLS rate increases that were implemented as a region were necessary and still insufficient for the provider network to continue to meet the mandated and medically necessary CLS services in Washtenaw. WCCMH is monitoring the benefit eligibility for each of its 5000 consumers and is

in constant contact with MDHHS to correct benefit misclassifications. Individuals inaccurately classified as Healthy Michigan Plan continue to be a challenge and WCCMH is only able to impact eligibility for those served, not the remaining eligible individuals who do not participate in CMH services. There is an ongoing concern that these inaccuracies are affecting capitation rates for our region. Washtenaw made drastic positions cuts in FY15 and reduced an entire layer of administration. At this point, any additional positions cut would completely hinder our ability to meet the mandates for service provision.



Regional Board Action Request – Vendor Contracts

Board Meeting Date: May 8, 2019

Action(s) Requested: Approval of the amendment listed below.

Organization - Background	Term	Funding Amount	Funding Source	Agreement Type
<p>Home of New Vision – Amend contract to include the full 12-month FY19 funding level for residential treatment expansion, rather than the 8-month funding level that was brought over from our FY18 contract for board approval.</p>	<p>10/1/2018 - 9/30/2019</p>	<p>Increase of \$103,777</p>	<p>Medicaid / Block Grant / HMP</p>	<p>Contract Amendment</p>

Recommend: Approval



Regional Board Notification – Contracts Within CEO Authority

Board Meeting Date: May 8, 2019

Action(s) Requested: Review

Organization - Background	Term	Funding Amount	Funding Source	Agreement Type
<p>St. Joseph Mercy Chelsea Livingston County Catholic Charities University of Michigan – RAHS</p> <p>MPDS Survey Reimbursement: MDHHS has mandated that certain SUD Prevention programs that conduct surveys be reimbursed for the cost of administering the surveys at a rate of \$4/survey. The CMHPSM will not exceed the \$8,000 allocated by the state and all reimbursements will be approved by our PIHP SUD Prevention staff persons.</p>	<p>3/1/2019 - 9/30/2019</p>	<p>Up to \$8,000 total for all providers.</p>	<p>\$8,000 Total Funding Available from MDHHS Pilot</p>	<p>Amendments</p>

Recommend: Review



CEO's Report

Community Mental Health Partnership of Southeast Michigan

Submitted to the CMHPSM Board of Directors
May 8, 2019

**CMHPSM CEO'S REPORT TO
COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
BOARD OF DIRECTORS**

May 8, 2019

CMHPSM Staffing Update

- J We are in the final steps of our search for a Chief Information Officer. An update will be provided at the Board Meeting. CMHPSM staff conducted the first round of interviews and Regional Partner staff joined us for the second round interviews.
- J We have posted the Clinical and SUD Services Director position April 24, 2019, we have already received multiple applicants. CMHPSM and Regional Partner staff will participate in the interview process for this position.
- J We are in the final phase of hiring a regional Administrative assistant. CMHPSM staff have interviewed multiple candidates and we hope to have someone hired very soon.

Statewide Update

- J MDHHS has requested a revision to our Risk Management Strategy to be submitted by May 15, 2019.
- J Milliman will be coming to visit the CMHPSM region to review the costing tool that our finance staff completed and submitted. Milliman is hoping to gain an understanding of how different PIHPs set service rates, contract with providers, account for internal service costs and a variety of other financial issues. The CMHPSM visit is scheduled for May 13.
- J Section 298 has been updated to leave the unenrolled population with their respective PIHP during the pilot. Other changes are being proposed in the Michigan Legislature at this time, so this situation is still evolving.
- J Lakeshore Regional Entity has received another 30 day contract termination letter from MDHHS.

CMHPSM Update

- J CMHPSM staff have finalized changes to our employee handbook. We worked with ADP to customize their boilerplate handbook to include our organization's processes and standards for employees. The revised handbook will be reviewed with staff at our next all staff meeting, and rolled out at that time.
- J I plan on writing a brief every other week newsletter to provide staff with a summary of Federal, State, Regional and local CMHPSM business. The hope is to improve communication while giving staff the ability to gain a fuller understanding of current issues facing the CMHPSM.

-) The CMHPSM will be hosting a learning session between the statewide parity software vendor MCG and our region on May 9, 2019. MCG hopes the sessions at the PIHPs and CMHSPs allow them to gain a better understanding of how their tool will work with regional clinical practices.

Regional Update

-) I attended the Monroe Town Hall event that occurred on Monday April 29. Lisa Jennings did an excellent job providing information on Monroe's current situation to those in attendance.
-) The CMHPSM region has met and exceeded the statewide 95% goal for BHTEDS for the first time. The CMHPSM region has BHTEDS data on 95.14% of individuals with an SUD encounter and 99.33% with an MH encounter during FY19. There have been countless hours of tedious clean-up by staff across the region, special recognition should go out for the thousands of erroneous BHTEDS records from the old electronic health record that have been cleaned over the past months.
-) The CMHPSM region continues to work together to analyze, clean and correct all of our service encounter data to ensure that we provide the most accurate possible picture of the work we're doing to the State. It is extremely important for rate setting purposes to have the most accurate and complete dataset submitted to MDHHS.

Respectfully Submitted,



James Colaianne, MPA

**LENAWEE-LIVINGSTON-MONROE-WASHTENAW
OVERSIGHT POLICY BOARD
April 25, 2019 meeting
705 N. Zeeb Road
Ann Arbor, MI 48103**

Members Present: Mark Cochran, Kim Comerzan, William Green, John Lapham, Dianne McCormick, David Oblak, Dave O'Dell, Tom Waldecker

Members Absent: Charles Coleman, Amy Fullerton, Blake LaFuente, Ralph Tillotson, Monique Uzelac

Guests: None

Staff Present: Stephannie Weary, Marci Scalera, Suzanne Stolz, Nicole Adelman, James Colaianne, Amy Johnston, Dana Darrow, Jackie Bradley

D. Oblak called the meeting to order at 9:30 a.m.

1. Introductions
2. Approval of the agenda

**Motion by M. Cochran, supported by K. Comerzan, to approve the agenda
Motion carried**

3. Approval of March 28, 2019 minutes

**Motion by J. Lapham, supported by D. O'Dell, to approve the March 28, 2019 minutes
Motion carried**

4. Audience Participation
J None

5. Old Business
 - a. Finance Report
J S. Stolz presented. Discussion followed.
 - b. CCAR Training Summary
J The training was very successful.
J The region used new trainers this time, Sara Szczotka and Glynis Anderson from Home of New Vision.
J There is still a tremendous need for more of this training.
J D. Oblak requested that a summary about the training be posted on the CMHPSM web site regarding outcomes of the training, including the possibility/likelihood of employment after receiving training.
J M. Scalera has talked with Glynis Anderson about last month's idea of having a peer event for our region. They are in the early stages of planning.
 - c. Updated Mini Grants
J M. Scalera provided an update on mini-grant funding.

6. New Business

a. Introduction of Interim CHMPSM CEO

) J. Colaianne introduced himself to OPB and provided a brief overview of activities at CMHPSM. There should be more information to share after the May regional board meeting.

b. Procurement Process – RFQs

) M. Scaleria provided an overview of the procurement process.

) Rule: no more than \$10K PA2 can be spent without a procurement process, no more than \$25K for Medicaid/federal dollars can be spent without a procurement process.

) The plan is to issue an RFQ for the upcoming fiscal year, and an RFP for FY21.

c. Policy Review

i. Communicable Disease Policy

) Per discussion at March OPB, the policy was updated.

Motion by K. Comerzan, supported by D. McCormick, to approve the Communicable Disease policy
Motion carried

ii. Naloxone Distribution Policy

) The policy was updated with language revisions and updated attachments.

) Law enforcement is supposed to track the expiration dates. All kits are labeled with expiration dates.

) K. Comerzan warned of the potential liability of using naloxone after the expiration date.

Motion by D. McCormick, supported by K. Comerzan, to approve the Naloxone Distribution policy
Motion carried

iii. Fetal Alcohol Disorder Policy

) The policy was updated with resources.

Motion by T. Waldecker, supported by M. Cochran, to approve the Fetal Alcohol Disorder policy
Motion carried

7. Report from Regional Board

) J. Terwilliger resigned. J. Colaianne was named interim CEO.

) Washtenaw County gave CMHPSM notice to vacate the building by Dec. 6, 2019. Staff will continue to bring updates.

8. SUD Director Updates

) The recent submission to state for SOR2 Supplemental can only be used for existing programs. There is approximately \$25k per county to partner with Public Health for a media campaign re: the opiate epidemic. We're waiting for state approval of the submission.

) The STR grant ends April 30, 2019. No cost extension period, continuation year, has been approved by the state, for May 1, 2019 – April 30, 2020. MAT Enhancement funding, Motivational Interviewing, Strengthening Families, Project Assert are all funded from the STR grant.

) The state is running a program called MIREP that involves prison release and mental health/SUD professionals who have an opioid use disorder. The program involves identifying people while they're in jail and following them when they're released. The state has identified Monroe as the county that will receive the funds.

The NODS mandate:

Attachment #5 – May 2019

-) All access staff must be trained to use this gambling addiction screening tool. We currently don't have anything certified gambling addiction specialists.
-) June 26 is the training for access staff.
-) A. Johnson has formed a regional workgroup whose goal is to study gambling addiction from a strategic perspective, using data and trends within the region.

9. Adjourn

Motion by T. Waldecker, supported by M. Cochran, to adjourn the meeting

Motion carried

-) Meeting adjourned at 11:10 a.m.