

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
REGULAR BOARD MEETING
Teleconference Meeting
Wednesday, September 9, 2020
6:00 PM



Dial-in Number Options:

1-312-626-6799; 1-646 876-9923;
or 1-346-248-7799

Meeting ID: 443 799 086

Join by Computer:

<https://zoom.us/j/443799086>

Please wait to be admitted from the
Zoom waiting room at 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 8-12-20 Regular Meeting and Waive the Reading Thereof {Att. #1}	2 min
V. Audience Participation (5 minutes per participant)	
VI. Old Business	15 min
a. August Finance Report – FY20 as of June July 31 st {Att. #2}	
VII. New Business	45 min
a. Board Action Request {Att. #3} Consideration to approve the fiscal year 2021 budget and allocations as presented, including authorization for the CMHPSM CEO to sign the included FY21 expense contracts	
b. Board Action Request {Att. #4} Consideration to approve the CMHPSM employee handbook with the included revisions	
c. Board Discussion Roll Call Votes for Remote Meetings	
VIII. Reports to the CMHPSM Board	20 min
a. Report from the SUD Oversight Policy Board (OPB) {Att. #5}	
b. CEO Report to the Board {Att. #6}	
IX. Adjournment	

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

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

August 12, 2020

***Meeting held electronically via Zoom**



Members Present: Judy Ackley, Greg Adams, Susan Fortney, Bob King, Sandra Libstorff, Molly Welch Marahar, Sharon Slaton, Ralph Tillotson

Members Absent: Roxanne Garber, Charles Londo, Gary McIntosh, Caroline Richardson, Katie Scott

Staff Present: Kathryn Szewczuk, Stephannie Weary, James Colaianne, Connie Conklin, CJ Witherow, Matt Berg, Nicole Adelman, Dana Darrow, Victor Absil, Rhonda Dornbos

Others Present: Laurie Lutomski, Matt Nordfjord, Marci Scalera

I. Call to Order
Meeting called to order at 6:02 p.m. by Board Chair S. Slaton.

II. Roll Call
J An electronic quorum of members present was confirmed.

III. Consideration to Adopt the Agenda as Presented

**Motion by R. Tillotson, supported by S. Fortney, to approve the agenda
Motion carried**

Vote

Yes: Ackley, Adams, Fortney, King, Libstorff, Welch Marahar, Slaton, Tillotson

No:

Absent: Garber, Londo, McIntosh, Richardson, Scott

IV. Consideration to Approve the Minutes of the July 8, 2020 Regular Meeting and Waive the Reading Thereof

Motion by J. Ackley, supported by G. Adams, to approve the minutes of the July 8, 2020 regular meeting and waive the reading thereof

Motion carried

Vote

Yes: Ackley, Adams, Fortney, King, Libstorff, Welch Marahar, Slaton, Tillotson

No:

Absent: Garber, Londo, McIntosh, Richardson, Scott

V. Audience Participation
None

VI. Open Meetings Act Training
J Presented by Matt Nordfjord of Cohl, Stoker and Toskey, P.C.

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

VII. Old Business

- a. August Finance Report – FY20 as of June 30th
J M. Berg presented. Discussion followed.

VIII. New Business

- a. Board Action Request
Consideration to approve the proposed FY2020 Budget Amendment #2 with allocations as presented

Motion by G. Adams, supported by M. Welch Marahar, to approve the proposed FY2020 Budget Amendment #2 with allocations as presented
Motion carried

Vote

Yes: Ackley, Adams, Fortney, King, Libstorff, Welch Marahar, Slaton, Tillotson

No:

Absent: Garber, Londo, McIntosh, Richardson, Scott

- b. Board Information

FY21 Draft Budget Review

J M. Berg provided a preview of the FY21 budget, which will come to the board for approval in September.

- c. Board Information

QAPIP Review

J C. Witherow presented.

- d. Board Action Request {Att. #5}

Consideration to approve the CEO to execute the presented contracts and/or amendments

Motion by G. Adams, supported by B. King, to approve the CEO to execute the presented contracts and/or amendments

Motion carried

Vote

Yes: Ackley, Adams, Fortney, King, Libstorff, Welch Marahar, Slaton

No:

Absent: Garber, Londo, McIntosh, Richardson, Scott, Tillotson*

**missed this vote due to a technical issue with his phone

- e. Board Information

Review of contracts or amendments executed within the CMHPSM CEO's authority.

J J. Colaianne presented.

- f. Board Action Request

Consideration to approve the signing of the full CMHPSM FY2021-3 SUD Strategic Plan to MDHHS by the CMHPSM Board Chair and the CMHPSM CEO

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

Motion by R. Tillotson, supported by G. Adams, to approve the signing of the full CMHPSM FY2021-3 SUD Strategic Plan to MDHHS by the CMHPSM Board Chair and the CMHPSM CEO

Motion carried

Vote

Yes: Ackley, Adams, Fortney, King, Welch Marahar, Slaton, Tillotson

No: Libstorff

Absent: Garber, Londo, McIntosh, Richardson, Scott

g. Board Action Request

Consideration to approve the staff recommended revisions to the Board Governance Policy: Procurement

Motion by S. Fortney, supported by R. Tillotson, to approve the staff recommended revisions to the Board Governance Policy: Procurement

Motion carried

Vote

Yes: Ackley, Adams, Fortney, Libstorff, Welch Marahar, Slaton, Tillotson

No:

Absent: Garber, Londo, King, McIntosh, Richardson, Scott

IX. Reports to the CMHPSM Board

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

) J. Colaianne provided highlights of the recent OPB meeting.

b. CEO Report to the Board

) J. Colaianne presented the CEO Report, which included updates from the CMHPSM, Region, and State.

X. Adjournment

Motion by S. Fortney, supported by M. Welch Marahar, to adjourn the meeting

Motion carried

) Meeting adjourned at 8:05 p.m.

Judy Ackley, CMHPSM Board Secretary

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

Summary of Financial Package

Balance Sheet		
Description	2019	2020
Operating Cash	1,682,816	3,655,901
Restricted Cash	7,216,725	6,992,496
Due from Others	12,167,466	10,866,401
Prepaid	49,005	72,478
Capital Assets	43,333	17,333
Total Assets	21,159,346	21,604,610
Payables & Accruals	870,399	(199,439)
Due to Others	14,035,658	26,066,760
Deferred Revenue	7,216,725	6,992,496
Fund Balance	(963,436)	(11,255,207)
Total Liabilities & Fu	21,159,346	21,604,610

FY 19 to 20 Comparison	2019	2020	Difference
Revenue at July 31	149,046,635	161,647,433	12,600,798
Annual Revenue Actual/Projected	178,855,962	196,660,578	17,804,616

Operating Activities	Revised Budget 1	Revised Budget 2	YTD Budget	YTD Actual	Actual O(U) Budget	Percent Variance	Projected Year-End	Projected O(U) Budget
MH Medicaid Revenue	166,994,863	174,691,976	145,576,640	143,022,231	(2,554,409)	-1.8%	174,691,976	(7,697,113)
MH Medicaid Expens	166,205,586	173,009,877	144,174,892	141,377,640	(2,797,252)	1.9%	173,009,877	(6,804,291)
MH Medicaid Net	789,277	1,682,099	1,401,748	1,644,591	242,843		1,682,099	(1,682,099)
SUD/Grants Revenue	18,784,766	18,160,931	15,134,109	13,742,393	(1,391,716)	-9.2%	18,160,931	(623,835)
SUD/Grants Total Exp	18,261,491	18,203,807	15,169,839	13,742,393	1,427,446	9.4%	18,203,807	57,684
SUD/Grants Net	523,274	(42,876)	(35,730)	-	35,730		(42,876)	(681,519)
PIHP								
PIHP Revenue Total	5,357,732	5,477,732	4,564,776	4,882,809	318,033	7.0%	5,477,732	120,000
PIHP Expenses Total	4,576,096	6,272,247	5,226,873	4,882,809	344,064	6.6%	6,272,247	(1,696,151)
PIHP Total	781,636	(794,515)	(662,097)	-	662,097		(794,515)	1,816,151
Total Revenue	191,137,361	198,330,639	165,275,525	161,647,433	(3,628,092)	-2.2%	198,330,639	(8,200,948)
Total Expenses	189,043,173	197,485,931	164,571,604	160,002,842	(1,025,742)	-0.6%	197,485,931	(8,442,758)
Total Net	2,094,187	844,708	703,921	1,644,591	940,670		844,708	(547,467)

Schedule of non-HSW Eligibles Paid by Service Month and Month of Payment

Count Payment Month	Service Month											Eligibles in Payment	
	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020	Apr 2020	May 2020	Jun 2020	Jul 2020	Aug 2020		
Oct 2019	110,667												110,667
Nov 2019	3,616	109,651											113,267
Dec 2019	862	4,369	109,979										115,210
Jan 2020	1,949	1,918	4,748	110,335									118,950
Feb 2020	594	1,067	1,926	4,489	110,800								118,876
Mar 2020	246	523	868	1,736	3,528	110,478							117,379
Apr 2020	43	381	691	1,130	1,987	4,448	111,702						120,382
May 2020	2	1	408	871	1,380	2,627	5,593	117,438					128,320
June 2020				206	475	653	1,105	2,923	120,165				125,527
July 2020					225	486	770	1,495	3,208	122,074			128,258
August 2020						179	382	463	735	1,933	123,559		127,251
	117,979	117,910	118,620	118,767	118,395	118,871	119,552	122,319	124,108	124,007	123,559		
Eligible Per Service Month													

Community Mental Health Partnership of Southeast Michigan
Preliminary Statement of Revenue and Expenses Notes
For the Period Ending July 31, 2020

DISCUSSION OF JULY 2020 RESULTS

1. Only one \$10,000 invoice was not submitted on time for July and that amount was not booked.
2. PA2 Reserve use will be reduced when Block Grant amendment approved. It is currently shown balancing expenses in SUD.

Community Mental Health Partnership of Southeast Michigan
Preliminary Statement of Revenues and Expenditures
For the Period Ending July 31, 2020

	Revision 2 Budget	Original Budget	YTD Revision 2	YTD Actual	Actual O(U) Budget	Percent Variance	Projected Year-End	Projected O(U) Budget
MEDICAID								
Revenue								
Medicaid (b) & 1915i	95,534,819	92,470,647	79,612,346	78,276,604	1,335,742	-1.7%	95,534,819	-
Medicaid HSW	46,137,544	46,803,340	38,447,952	38,502,085	(54,133)	0.1%	46,137,544	-
MCAID Children's Waiver	1,333,449		1,111,208	1,113,759	(2,551)	0.2%	1,333,449	-
MCAID SED Waiver	288,783		240,652	234,948	5,704	-2.4%	288,783	-
Healthy Michigan Revenue	11,659,175	10,958,928	9,715,979	9,950,688	(234,709)	2.4%	11,659,175	-
HMP Autism	33,660		28,050	15,612	12,438	-44.3%	33,660	-
Medicaid Autism	13,784,962	10,290,788	11,487,468	11,410,912	76,556	0.7%	13,784,962	-
Medicaid DHS Incentive	215,000	215,000	179,167	131,843	47,323	26.4%	215,000	-
HRA MCAID Revenue	2,457,532	2,457,532	2,047,943	1,341,032	706,911	34.5%	2,457,532	-
HRA HMP Revenue	2,362,052	2,362,052	1,968,377	1,210,748	757,629	38.5%	2,362,052	-
Deferred MC/HMP	885,000		737,500	834,000	(96,500)	-13.1%	885,000	-
Medicaid Revenue Total	174,691,976	164,333,406	145,576,640	143,022,231	2,554,410	-1.8%	174,691,976	-
Medicaid Expenditures								
HRA MC	2,457,532	2,457,532	2,047,943	1,341,032	(706,911)	-34.5%	2,457,532	-
HRA HMP	2,362,052	2,362,052	1,968,377	1,210,748	(757,629)	-38.5%	2,362,052	-
Lenawee CMH								
Medicaid (b) & (b3)	12,929,356	17,674,599	10,774,463	10,620,326	(154,137)	-1.4%	12,929,356	(0)
Medicaid HSW	5,213,292		4,344,410	4,181,252	(163,157)	-3.8%	5,213,292	0
Children's Waiver	90,109		75,091	79,917	4,826	6.4%	90,109	(0)
Healthy Michigan Expenses	1,653,036	1,739,957	1,377,530	1,281,663	(95,867)	-7.0%	1,653,036	0
Autism Medicaid	1,319,029	1,003,806	1,099,191	982,297	(116,894)	-10.6%	1,319,029	(0)
Medicaid DHIP	36,579		30,482	37,064	6,582	21.6%	36,579	0
Lenawee CMH Total	21,241,401	20,418,362	17,701,167	17,182,519	(518,647)	-2.9%	21,241,401	0
Livingston CMH								
Medicaid (b) & (b3)	17,437,008	24,388,990	14,530,839	14,322,965	(207,875)	-1.4%	17,437,008	(0)
Medicaid HSW	7,579,641		6,316,367	6,355,333	38,966	0.6%	7,579,641	(0)
Children's Waiver	302,510		252,092	272,763	20,672	8.2%	302,510	0
SED Waiver	84,148		70,123	48,891	(21,232)	-30.3%	84,148	0
Healthy Michigan Expenses	2,229,345	2,346,571	1,857,787	1,728,498	(129,289)	-7.0%	2,229,345	0
Autism Medicaid	4,995,710	3,690,076	4,163,092	4,360,227	197,135	4.7%	4,995,710	(0)
Medicaid DHIP	122,800		102,334	114,900	12,566	12.3%	122,800	(0)
Livingston CMH Total	32,751,162	30,425,637	27,292,634	27,203,577	(89,057)	-0.3%	32,751,162	(0)
Monroe CMH								
Medicaid (b) & (b3)	19,523,884	26,698,899	16,269,903	16,037,149	(232,754)	-1.4%	19,523,884	(0)
Medicaid HSW	7,881,728		6,568,106	6,543,359	(24,747)	-0.4%	7,881,728	(0)
Children's Waiver	109,418		91,182	109,455	18,273	20.0%	109,418	(0)
Healthy Michigan Expenses	2,496,154	2,627,410	2,080,129	1,935,366	(144,762)	-7.0%	2,496,154	(0)
Autism Medicaid	2,590,710	1,968,108	2,158,925	1,949,209	(209,716)	-9.7%	2,590,710	0
Medicaid DHIP	88,834		74,029	73,070	(959)	-1.3%	88,834	(0)
Monroe CMH Total	32,690,729	31,294,417	27,242,273	26,647,607	(594,666)	-2.2%	32,690,728	(1)
Washtenaw CMH								
Medicaid (b) & (b3)	42,859,794	66,455,112	35,716,494	35,205,542	(510,952)	-1.4%	42,859,794	(0)
Medicaid HSW	25,096,119		20,913,432	20,830,700	(82,732)	-0.4%	25,096,119	(0)
Children's Waiver	682,256		568,547	634,138	65,591	11.5%	682,256	(0)
SED Waiver	218,784		182,320	182,368	48	0.0%	218,784	(0)
Healthy Michigan Expenses	5,479,681	5,767,820	4,566,401	4,248,611	(317,789)	-7.0%	5,479,681	0
Autism Medicaid	4,694,019	3,467,323	3,911,682	4,096,903	185,221	4.7%	4,694,019	0
Medicaid DHIP	44,417		37,014	25,416	(11,599)	-31.3%	44,417	-
Washtenaw CMH Total	79,075,071	75,690,255	65,895,890	65,223,679	(672,211)	-1.0%	79,075,070	(1)
PIHP Allocation	2,431,929	2,910,036	2,026,608	2,568,477	(541,869)	-26.7%	2,431,929	0
Medicaid Expenditures Total	173,009,877	165,558,291	144,174,892	141,377,640	(3,880,991)	-2.7%	173,009,874	(3)
Medicaid Total	1,682,098	-	1,401,749	1,644,591	242,842		1,682,101	3

Community Mental Health Partnership of Southeast Michigan
Preliminary Statement of Revenues and Expenditures
For the Period Ending July 31, 2020

	Revision 2 Budget	Original Budget	YTD Revision 2	YTD Actual	Actual O(U) Budget	Percent Variance	Projected Year-End	Projected O(U) Budget
SUD/Grants								
SUD/Grants REVENUE								
Medicaid SUD	6,547,809	2,572,636	5,456,508	5,542,945	86,437	1.6%	6,651,534	103,725
Healthy Michigan Plan SUD	3,727,453	4,693,453	3,106,211	2,633,619	(472,591)	-15.2%	3,160,343	(567,109)
SUD Community Block Grant	3,611,195	3,694,050	3,009,329	2,302,075	(707,254)	-23.5%	2,762,490	(848,705)
SUD PA2 - Cobo Tax Revenue	1,844,101	1,860,059	1,536,751	1,536,718	(33)	0.0%	1,844,062	(40)
SUD PA2 - Cobo Tax Use of	564,432	1,564,432	470,360	325,589	(144,771)	-30.8%	390,707	(173,725)
State Grants	1,865,940	2,753,533	1,554,950	1,401,446	(153,504)	-9.9%	1,681,735	(184,205)
SUD/Grants REVENUE Total	18,160,931	17,138,163	15,134,109	13,742,393	(1,391,716)	-9.2%	16,490,872	(1,670,060)
SUD/Grants EXPENDITURES								
All SUD Administration								
Salaries & Fringes	706,448	594,681	588,706	791,659	202,952	34.5%	706,448	0
Contracts	65,101	107,912	54,251	73,840	19,589	36.1%	88,608	23,507
Board Expense	221	7,680	184	81	(103)	-56.0%	221	0
Other Expenses	67,493	23,547	56,245	43,589	(12,656)	-22.5%	58,000	(9,493)
Indirect Cost Recovery	(401,700)		(334,750)	(243,718)	91,032		(401,699)	1
All SUD Administration Total	437,563	733,820	364,636	665,451	300,815	82.5%	451,578	14,014
Lenawee County SUD Service	2,918,038	2,195,015	2,431,698	1,909,655	(522,043)	-21.5%	2,291,586	(626,452)
Livingston County SUD Service	2,164,880	1,957,859	1,804,067	1,787,761	(16,306)	-0.9%	2,145,313	(19,567)
Monroe County SUD Services	3,157,758	2,088,693	2,631,465	2,368,694	(262,772)	-10.0%	2,842,432	(315,326)
Washtenaw County SUD Services	7,738,663	6,223,491	6,448,886	5,618,411	(830,475)	-12.9%	6,742,093	(996,571)
Veteran Navigation	81,970	80,000	68,308	64,399	(3,909)	-5.7%	77,279	(4,691)
State Targeted Response	737,300	1,068,295	614,417	558,402	(56,014)	-9.1%	670,083	(67,217)
State Opioid Response	727,495	943,385	606,245	610,716	4,471	0.7%	732,859	5,365
State Opioid Response Supplement	108,823	294,120	90,686	75,018	(15,668)	-17.3%	90,022	(18,801)
Gambling Prevention Grant	53,750	200,000	44,792	26,992	(17,800)	-39.7%	32,391	(21,359)
Block Grants	77,566	167,733	64,638	56,894	(7,744)	-12.0%	68,273	(9,293)
SUD/Grants Total Expenditure	18,203,807	15,952,411	15,169,839	13,742,393	1,427,446	9.4%	16,143,908	(2,059,899)
SUD/Grants Total	(42,876)	(1,185,753)	(35,730)	(0)	35,730	-100.0%	346,963	389,839
PIHP								
PIHP REVENUE								
Performance Based Incentive	1,503,267	1,503,267	1,252,722	1,252,722	(0)	0.0%	1,503,267	-
MDHHS Withhold	120,000		100,000		(100,000)	-100.0%	120,000	-
Local Match	1,259,140	1,577,780	1,049,283	944,355	(104,928)	-10.0%	1,259,140	-
Other Income	163,395	331,920	136,163	117,255	(18,908)	-13.9%	163,395	(0)
PIHP Allocation	2,431,929	1,224,885	2,026,608	2,568,477	541,869	26.7%	2,431,929	(0)
PIHP Revenue Total	5,477,732	4,637,852	4,564,776	4,882,809	318,033	7.0%	5,477,731	(1)
PIHP Expenses								
PIHP Admin								
Local Match	1,259,140	1,577,780	1,049,283	944,355	(104,928)	-10.0%	1,259,140	-
IPA MCAID	1,348,121	1,348,121	1,123,434	1,128,861	5,427	0.5%	1,348,121	-
IPA HMP	337,030	337,030	280,858	124,176	(156,682)	-55.8%	337,030	-
Salaries & Fringes	1,083,865	1,441,708	903,221	818,068	(85,153)	-9.4%	981,682	(102,183)
Contracts	512,425	1,170,253	427,021	447,401	20,380	4.8%	536,881	24,456
Other Expenses	226,374	206,019	188,645	165,768	(22,877)	-12.1%	198,921	(27,453)
Grant Administration	-	(78,172)	-	-	-		-	-
ISF Transfer	1,503,267	1,503,267	1,252,722	1,252,722	(0)	0.0%	1,503,267	-
PIHP Admin Total	6,270,222	5,820,855	5,225,185	4,881,351	(343,834)	-6.6%	6,165,042	(105,180)
Board Expense	2,025	2,750	1,688	1,458	(230)	-13.6%	2,025	-
PIHP Expenses Total	6,272,247	5,823,605	5,226,873	4,882,809	(344,064)	-6.6%	6,167,068	(105,180)
PIHP Total	(794,516)	(1,185,753)	(662,096)	0	662,097		(689,337)	105,179
Organization Total	844,707	(0)	703,922	1,644,592	940,669		1,339,728	495,021

**Community Mental Health Partnership of Southeast Michigan
Preliminary Statement of Revenues and Expenditures (Old Format)
For the Period Ending July 31, 2020**

	FY 20 Budget Revision 2	FY20 Budget Original	Budget to date	YTD Actual	YTD Actual O/(U) Budget	Percent Variance Actual to Budget	Projected YE	Projected O/(U) Budget
Operating Revenue								
Medicaid Capitation SP/1915i	97,992,351	95,143,183	73,494,263	79,617,636	6,123,373	7.69%	97,992,351	-
Medicaid Capitation HSW	46,137,544	46,803,340	34,603,158	38,502,085	3,898,927	10.13%	46,137,544	0
Medicaid Captiation CWP	1,333,449	-	1,000,087	1,113,759	113,673	10.21%	1,333,449	-
Medicaid Captiation SEDW	288,783	-	216,587	234,948	18,361	7.81%	288,783	-
State Withhold	120,000	-	90,000	-	(90,000)	0.00%	120,000	-
All Incentives	1,718,267	1,503,268	1,288,700	1,384,566	95,866	6.92%	1,718,267	-
Medicaid SUD Capitation	3,727,453	2,572,636	2,795,590	2,633,619	(161,970)	-6.15%	3,727,453	-
Healthy Michigan Plan	14,021,227	13,320,980	10,515,920	11,161,436	645,516	5.78%	14,021,227	-
Healthy Michigan Plan SUD	6,547,809	4,693,454	4,910,857	5,542,945	632,088	11.40%	6,547,809	-
Autism	13,818,622	10,290,788	10,363,967	11,426,524	1,062,557	9.30%	13,818,622	-
SUD Community Block Grant	5,264,155	5,999,850	3,948,116	3,555,203	(392,913)	-11.05%	5,331,537	67,382
Block Grants	212,981	447,733	159,735	148,285	(11,450)	-7.72%	635,836	422,855
SUD PA2 - Cobo Tax Revenue	1,844,101	1,860,059	1,383,076	1,536,751	153,675	10.00%	1,844,101	(0)
SUD PA2 - Cobo Tax Use of Reserve	564,432	1,564,432	423,324	325,589	(97,735)	0.00%	564,432	-
Local Match	1,259,140	1,577,780	944,355	944,355	-	0.00%	1,259,140	-
Other Revenue	163,395	331,920	122,547	117,255	(5,291)	-4.51%	163,395	-
Accrued Medicaid Revenue	885,000	-	663,750	834,000	170,250	0.00%	885,000	-
Total Revenue	\$ 195,898,709	\$ 186,109,423	\$ 146,924,032	\$ 159,078,957	\$ 12,154,925	7.64%	\$ 196,388,946	\$ 490,237
Funding For CMHSP Partners								
Lenawee CMHSP	21,241,401	20,418,362	15,931,051	17,182,519	1,251,469	7.28%	21,241,401	-
Livingston CMHSP	32,751,162	30,425,637	24,563,372	27,203,577	2,640,205	9.71%	32,751,162	-
Monroe CMHSP	32,690,729	31,294,417	24,518,047	26,647,607	2,129,560	7.99%	32,690,729	-
Washtenaw CMHSP	79,075,071	75,690,255	59,306,303	65,223,679	5,917,376	9.07%	79,075,071	-
Total Funding For CMHSP Partners	\$ 165,758,364	\$ 157,828,671	\$ 124,318,773	\$ 136,257,383	\$ 11,938,610	8.76%	\$ 165,758,364	\$ -
Funding For SUD Services								
Lenawee County	2,905,366	2,195,015	2,179,025	1,909,655	(269,370)	-14.11%	2,905,366	-
Livingston County	1,817,449	1,957,859	1,363,087	1,787,761	424,674	23.75%	1,817,449	-
Monroe County	3,035,241	2,088,693	2,276,431	2,368,694	92,263	3.90%	3,035,241	-
Washtenaw County	7,448,337	6,223,491	5,586,253	5,618,411	32,158	0.57%	7,488,337	40,000
SUD Grants	770,857	-	578,143	223,303	(354,840)	-158.91%	893,085	122,228
State Targeted Response	650,346	974,954	487,759	558,402	70,643	12.65%	650,345	(1)
State Opioid Response	759,730	1,116,363	569,797	610,716	40,919	6.70%	759,730	(0)
Total Funding For SUD Services	\$ 17,387,326	\$ 14,556,375	\$ 13,040,495	\$ 13,076,942	\$ 36,447	0.28%	\$ 17,549,554	\$ 162,227

**Community Mental Health Partnership of Southeast Michigan
Preliminary Statement of Revenues and Expenditures (Old Format)
For the Period Ending July 31, 2020**

Page 2

Other Contractual Obligations

Hospital Rate Adjuster	4,819,584	4,819,584	3,614,688	2,551,780	(1,062,908)	-41.65%	4,819,584	-
Insurance Provider Assessment Tax (E	1,685,151	1,685,151	1,263,863	1,253,037	(10,826)	-0.86%	1,685,151	-
Local Match (Est)	1,259,140	1,577,780	944,355	944,355	-	0.00%	1,259,140	-
Total Other Costs	\$ 7,763,875	\$ 8,082,515	\$ 5,822,906	\$ 4,749,172	\$ (1,073,734)	-22.61%	\$ 7,763,875	\$ -

CMHPSM Administrative Costs

Salaries & Fringes	2,015,072	2,317,605	1,511,304	1,609,845	98,541	6.12%	2,015,072	-
Administrative Contracts	795,127	1,536,417	596,345	691,496	95,151	13.76%	757,127	(38,000)
Board Expense	2,750	2,750	2,063	1,539	(524)	-34.02%	446	(2,304)
All Other Costs	(171,780)	281,822	(128,835)	(204,735)	(75,901)	37.07%	152,826	324,606
Total Administrative Expense	\$ 2,641,170	\$ 4,138,594	\$ 1,980,877	\$ 2,098,145	\$ 117,268	5.59%	\$ 2,925,472	\$ 284,302

Risk Reserve Provision

Risk Reserve Provision	\$ 1,503,267	\$ 1,503,268	\$ 1,252,722	\$ 1,252,722	-	-	\$ 1,503,267	\$ -
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Total Expense

Total Expense	\$ 195,054,002	\$ 186,109,423	\$ 146,415,773	\$ 157,434,364	\$ 11,018,591	7.00%	\$ 195,500,531	\$ 446,529
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Revenues over (under) Expenditures

Revenues over (under) Expenditures	\$ 844,707	\$ -	\$ 508,259	\$ 1,644,593	\$ (1,136,335)		\$ 888,415	\$ 43,708
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Community Mental Health Partnership of Southeast Michigan
 Received and Distributed by Fund Source
 FY 19/20

		October	November	December	January	February	March	April	May	June	July	August	September	YTD
State Plan/B3/1915i	Receipts	\$ 7,341,811	\$ 7,349,346	\$ 7,384,564	\$ 7,502,500	\$ 7,510,906	\$ 8,481,134	\$ 8,415,366	\$ 8,032,469	\$ 9,368,076	\$ 7,870,015			\$ 79,256,189
	Distributions													
	Lenawee CMHSP	993,884	993,356.71	999,494.27	1,056,028	977,383	1,015,513	1,140,334	1,107,941	1,270,972	1,065,420			\$ 10,620,326
	Livingston CMHSP	1,340,389	1,339,677.62	1,347,954.97	1,424,198	1,318,134	1,369,559	1,537,896	1,494,210	1,714,080	1,436,865			\$ 14,322,964
	Monroe CMHSP	1,500,808	1,500,011.38	1,509,279.36	1,594,647	1,475,890	1,533,469	1,721,953	1,673,038	1,919,223	1,608,831			\$ 16,037,149
	Washtenaw CMHSP	3,294,648	3,292,899.10	3,313,244.63	3,500,648	3,239,946	3,366,347	3,780,116	3,672,736	4,213,172	3,531,784			\$ 35,205,542
		\$ 7,129,730	\$ 7,125,945	\$ 7,169,973	\$ 7,575,521	\$ 7,011,354	\$ 7,284,888	\$ 8,180,299	\$ 7,947,924	\$ 9,117,447	\$ 7,642,900	\$ -	\$ -	\$ 76,185,981
C-Waivers (HSW, CWP, SEDW)	Receipts	\$ 3,285,042	\$ 3,320,771	\$ 3,335,249	\$ 4,003,243	\$ 4,438,425	\$ 4,224,492	\$ 3,899,244	\$ 4,289,991	\$ 5,194,875	\$ 3,859,459			\$ 39,850,791
	Distributions													
	Lenawee CMHSP	382,345	386,272.77	383,510.50	408,530	414,403	396,106	432,762	448,816	562,568	445,856			\$ 4,261,170
	Livingston CMHSP	538,087	543,259.01	559,406.59	650,082	778,082	741,106	641,111	746,957	837,388	641,510			\$ 6,676,988
	Monroe CMHSP	558,997	564,329.46	540,713.91	705,562	745,012	673,367	643,622	702,705	871,032	647,472			\$ 6,652,813
	Washtenaw CMHSP	1,754,035	1,774,771.66	1,812,309.34	2,176,218	2,431,240	2,347,586	2,120,529	2,324,160	2,842,327	2,064,029			\$ 21,647,206
		\$ 3,233,465	\$ 3,268,633	\$ 3,295,940	\$ 3,940,392	\$ 4,368,737	\$ 4,158,166	\$ 3,838,024	\$ 4,222,638	\$ 5,113,315	\$ 3,798,867	\$ -	\$ -	\$ 39,238,177
Autism	Receipts	\$ 1,114,871	\$ 1,102,030	\$ 1,121,788	\$ 1,137,223	\$ 1,124,595	\$ 1,113,848	\$ 1,155,366	\$ 1,169,274	\$ 1,231,613	\$ 1,155,915			\$ 11,426,523
	Distributions													
	Lenawee CMHSP	110,481.76	110,318.15	111,111.53	115,240.68	106,063.45	81,021.07	84,041.06	90,350.63	89,587	84,081			\$ 982,297
	Livingston CMHSP	406,140.34	405,538.89	408,455.37	423,634.50	389,898.27	439,311.80	455,686.81	489,898.48	485,759	455,903			\$ 4,360,227
	Monroe CMHSP	216,615.61	216,294.83	217,850.34	225,946.16	207,952.88	163,248.14	169,333.08	182,046.13	180,508	169,414			\$ 1,949,209
	Washtenaw CMHSP	381,613.61	381,048.48	383,788.84	398,051.31	366,352.39	412,779.87	428,165.92	460,311.40	456,422	428,370			\$ 4,096,904
		\$ 1,114,851	\$ 1,113,200	\$ 1,121,206	\$ 1,162,873	\$ 1,070,267	\$ 1,096,361	\$ 1,137,227	\$ 1,222,607	\$ 1,212,277	\$ 1,137,768	\$ -	\$ -	\$ 11,388,636
HMP	Receipts	\$ 868,480	\$ 878,904	\$ 889,272	\$ 941,557	\$ 932,058	\$ 1,882,376	\$ 1,127,955	\$ 1,172,565	\$ 1,137,681	\$ 1,088,914			\$ 10,919,762
	Distributions													
	Lenawee CMHSP	113,426.32	114,940.07	115,965.53	123,204.58	121,195.91	119,346.97	148,682.67	132,723.58	149,495	142,683			\$ 1,281,663
	Livingston CMHSP	152,970.95	155,012.43	156,395.41	166,158.28	163,449.30	160,955.73	200,518.94	178,995.92	201,614	192,427			\$ 1,728,498
	Monroe CMHSP	171,278.64	173,564.45	175,112.94	186,044.24	183,011.05	180,219.05	224,517.22	200,418.30	225,743	215,457			\$ 1,935,366
	Washtenaw CMHSP	375,999.33	381,017.25	384,416.59	408,413.51	401,754.88	395,625.77	492,871.30	439,968.16	495,563	472,982			\$ 4,248,612
		\$ 813,675	\$ 824,534	\$ 831,890	\$ 883,821	\$ 869,411	\$ 856,148	\$ 1,066,590	\$ 952,106	\$ 1,072,414	\$ 1,023,549	\$ -	\$ -	\$ 9,194,139
Total Receipts		\$ 12,610,204	\$ 12,651,051	\$ 12,730,873	\$ 13,584,523	\$ 14,005,984	\$ 15,701,851	\$ 14,597,932	\$ 14,664,299	\$ 16,932,244	\$ 13,974,303	\$ -	\$ -	\$ 141,453,265
Total Distributions		\$ 12,291,722	\$ 12,332,312	\$ 12,419,010	\$ 13,562,606	\$ 13,319,769	\$ 13,395,562	\$ 14,222,140	\$ 14,345,275	\$ 16,515,453	\$ 13,603,084	\$ -	\$ -	\$ 136,006,933

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



Regional Board Action Request

Board Meeting Date: September 9, 2020

Action Requested: Approve the fiscal year 2021 budget and allocations as presented, including authorization for the CMHPSM CEO to sign the included FY21 expense contracts.

Background: The FY21 budget is representative of and in an adherence to the expectations and requirements derived from the revenue contracts entered into by the CMHPSM with the Michigan Department of Health and Human Services (MDHHS). Expense contracts for FY21 include: Substance Use Disorder service, prevention and treatment contracts, grant funded projects, projects funded by Oversight Policy Board approved PA2 allocations, administrative contracts, mental health service contracts with the partner CMHSPs. Additional contracts with no expense associated include various Memorandums of Understanding, coordination agreements and data-use agreements.

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

The FY21 annual budget and associated expense and non-expense contracts abide by the stipulations of our revenue contract with MDHHS and align with our regional strategic plan and our regional shared governance model.

Recommend: Approval



CMHPSM FY2021 Budget

OCTOBER 1, 2020 – SEPTEMBER 30, 2021

Mission

Through effective partnerships, the CMHPSM ensures and supports the provision of high-quality integrated care that is cost effective and focuses on improving the health, wellness and quality of life of people living in our region.

Vision

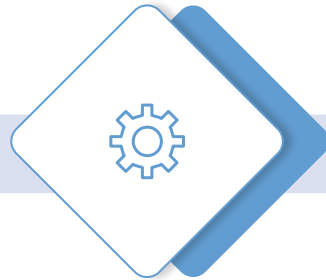
The CMHPSM shall strive to address the challenges confronting people living in our region by influencing public policy and participating in initiatives that reduce stigma and disparities in health care delivery while promoting recovery and wellness.

Values

- Strength Based and Recovery Focused
- Trustworthiness and Transparency
- Accountable and Responsible
- Shared Governance
- Innovative and Data Driven Decision Making
- Learning Organization

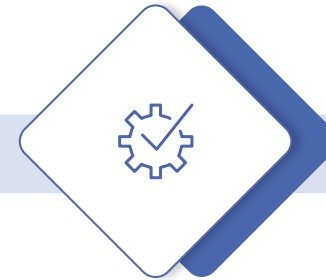
Mental Health Services

PIHP Retained Functions



- Oversight Monitoring of all PIHP Retained and Delegated Functions
- PIHP Regional Financial Management
- Regional Licensed Independent Practitioner Credentialing

Delegated Functions



- Service Access and Pre-Authorization of Medically Necessary Services
- Clinical Care Coordination and Community Collaboration
- Customer Services & Rights and Responsibilities
- Utilization Management
- Provider Network Management

Revenue / Expense / ISF Balance

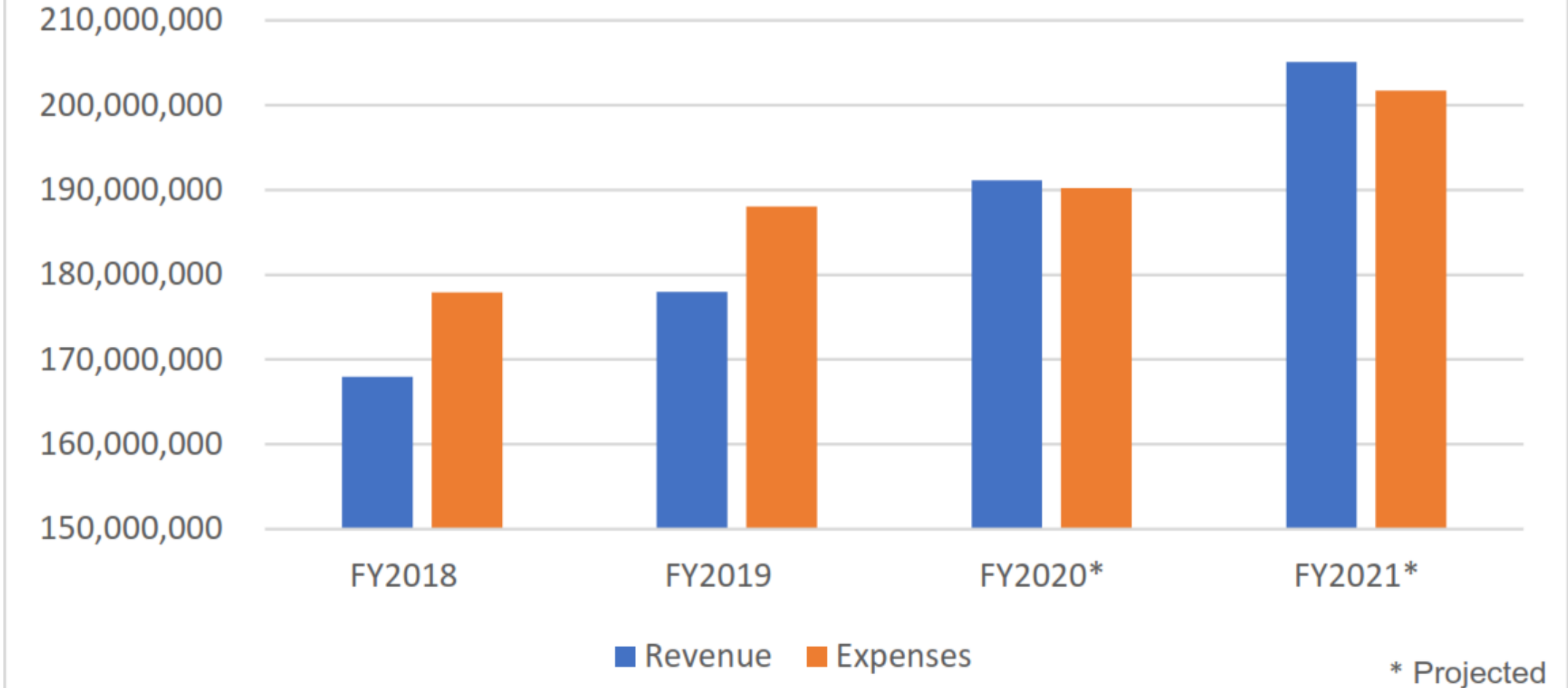
History

Yearly Medicaid Activity	Added to ISF		Withdrew From ISF		
	2015	2016	2017	2018	2019
Total Medicaid Revenue	155,540,471	161,132,888	151,382,865	150,257,474	162,416,170
Total Medicaid Expenses	149,981,400	156,121,603	157,470,490	169,127,297	177,680,638
Net Medicaid	5,559,071	5,011,285	(6,087,625)	(18,869,823)	(15,264,468)
MDHHS Risk			-	7,517,412	3,533,961
Prior Year Carryforward			1,627,564		
PIHP/ISF Payment			4,460,061	6,854,153	-
Yearly Balance			-	(4,498,258)	(11,730,507)
Total Unfunded Medicaid Expenses					\$ (16,228,765)
Disposition of Net Medicaid					
PIHP Added to ISF	-	2,581,623	-	-	-
Carry Forward		1,627,564	(1,627,564)		
Surplus returned to state	5,559,071	802,098	-	-	-
Due from State				(7,517,412)	(3,533,961)
PIHP ISF Used	-	-	(4,460,061)	(6,854,153)	-
Unfunded portion	-	-	-	(4,498,258)	(11,730,507)
Total Unfunded					\$ (16,228,765)

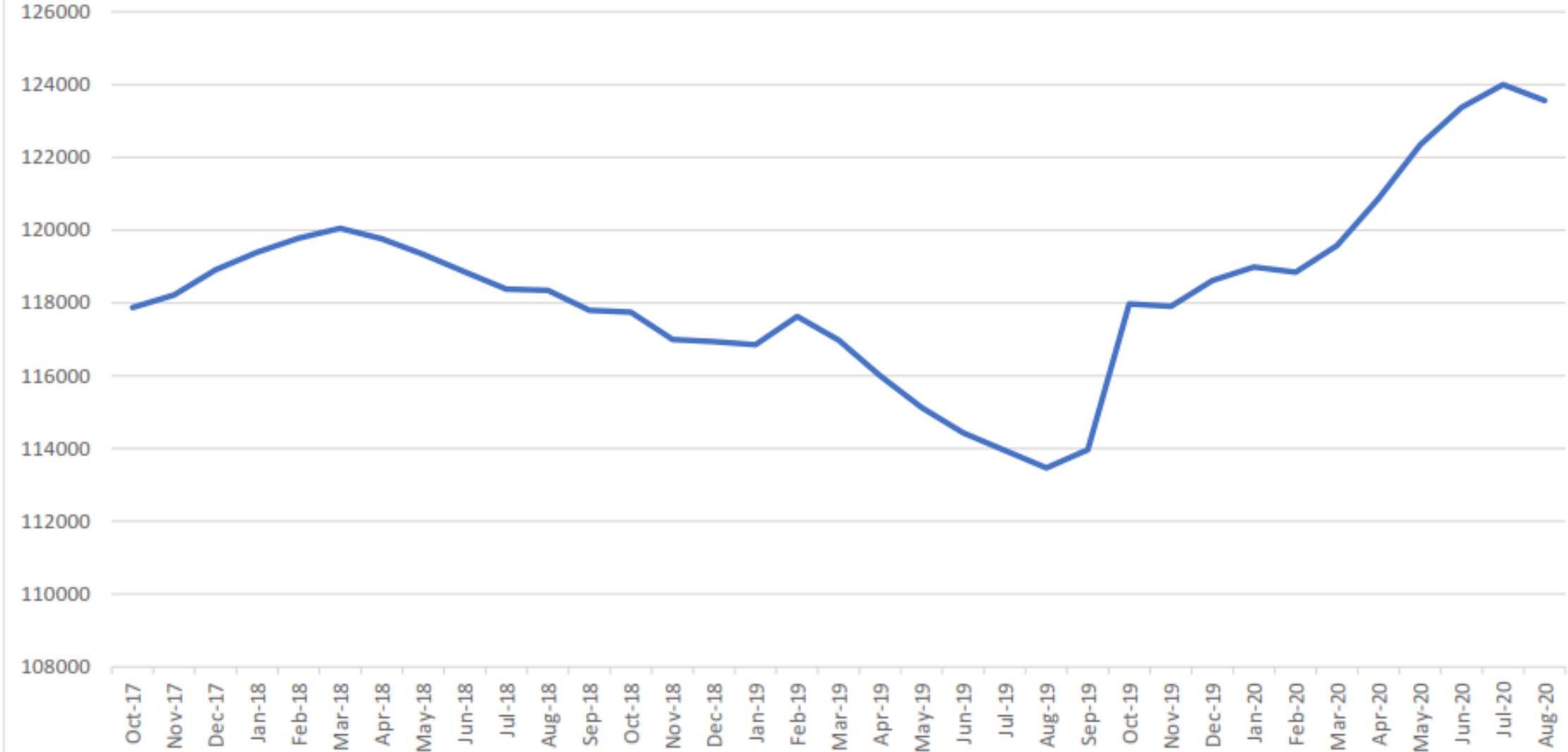
	2015	2016	2017	2018	2019
Internal Service Fund					
Beginning	8,791,664	8,804,280	11,424,778	6,774,188	-
Interest	12,616	38,875	55,257	79,965	-
Contributions	-	2,581,623			-
Use			(4,705,847)	(6,854,153)	-
Ending	8,804,280	11,424,778	6,774,188	-	-

Risk Corridor (Deficit Only)					
Tier 1 PIHP Risk	n/a	n/a	7,229,509	7,568,274	8,196,546
Tier 2 Shared Risk PIHP	n/a	n/a	n/a	3,784,137	2,979,956
State	n/a	n/a	n/a	3,784,137	2,979,956
Tier 3 State Risk	n/a	n/a	n/a	3,733,275	n/a

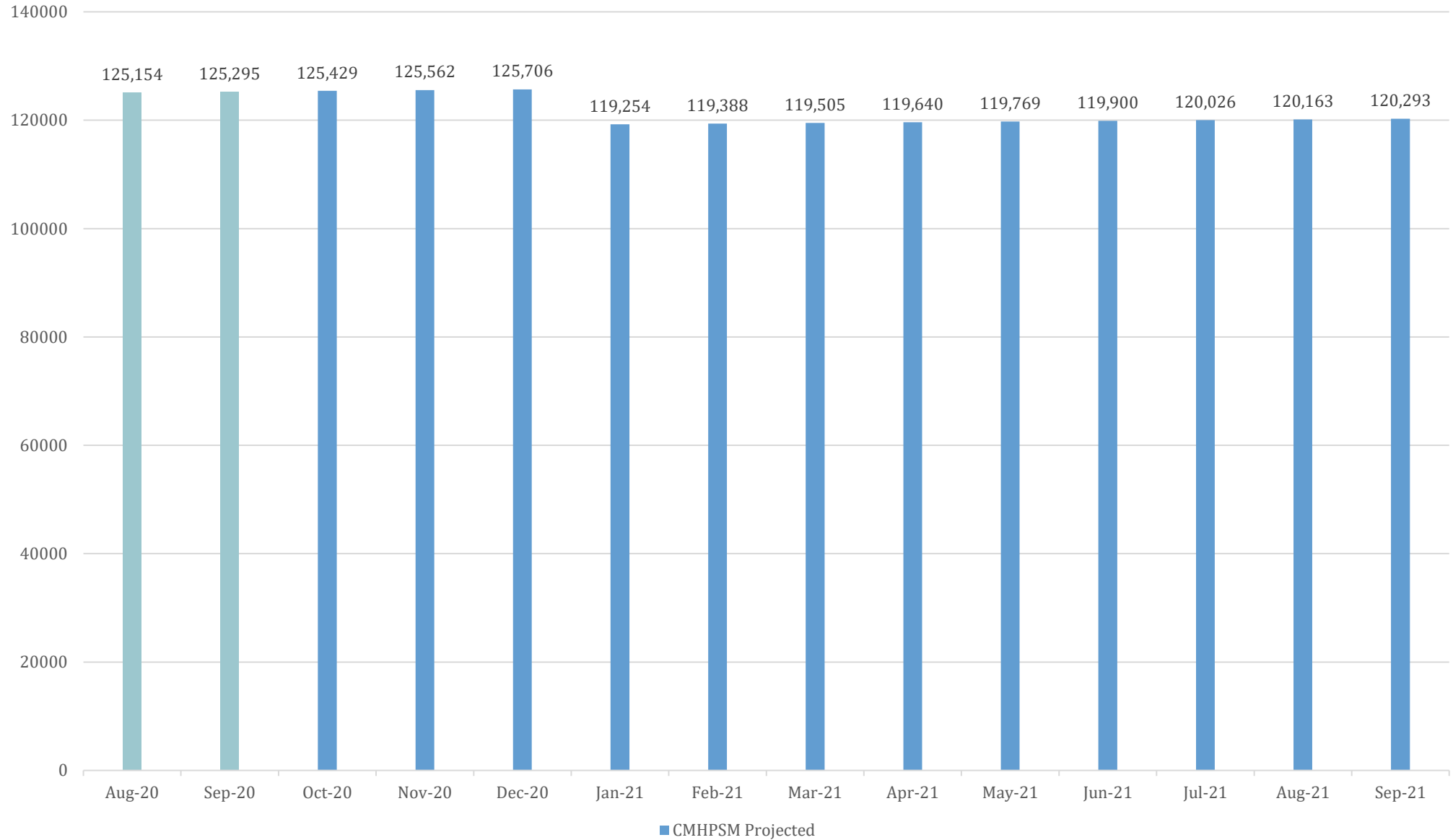
CMHPSM Revenue & Expenses FY18-21



Actual Eligible Members Per Month FY18 - FY20



DAB/TANF/HMP Enrolled and Unenrolled Eligibles



Revenue Projection Methodology

- Economic / COVID Impact on Medicaid Eligibles
 - Eligible increases
- PMPM Rate Increases
 - Base Rate Increase Milliman (Page 12)
 - Risk and Area Factor Increase Milliman (Page 13)
 - Entity Specific Rate Factor Milliman (Page 14)

Entity Specific Capitation Rates



Comparison of capitation rate PMPM excluding HRA/IPA

POPULATION	AMENDED SFY 2020 RATES	SFY 2021 RATES	INCREASE/DECREASE
<u>State Plan/EPSTD/1915(i) Waiver</u>			
DAB - Enrolled	\$ 305.26	\$ 325.43	6.6%
DAB - Unenrolled	322.51	325.98	1.1%
HMP - Enrolled	46.40	47.93	3.3%
HMP - Unenrolled	65.12	65.52	0.6%
TANF - Enrolled	28.96	31.16	7.6%
TANF - Unenrolled	19.45	19.21	(1.2%)
<u>1915(c) Waiver</u>			
CWP	\$ 3,691.19	\$ 3,592.78	(2.7%)
HSW	5,100.87	5,272.12	3.4%
SED	2,212.16	2,043.77	(7.6%)
Composite	\$ 109.21	\$ 113.32	3.8%

Notes:

1. SFY 2020 rates reflect the amended SFY 2020 capitation rates and do not include the direct care worker temporary pay increases.
2. Reflects composite rates for all services (MH, SUD, Autism) based on projected SFY 2021 enrollment.

PIHP risk and area factor change impact

MANAGED CARE ENTITY	SFY 2020		SFY 2021		PERCENTAGE CHANGE	
	RISK FACTOR	AREA FACTOR	RISK FACTOR	AREA FACTOR	RISK FACTOR	AREA FACTOR
Northcare Network	1.0323	1.0843	1.0184	1.0678	(1.4%)	(1.5%)
Northern Michigan Regional Entity	1.0182	1.0594	0.9976	1.0531	(2.0%)	(0.6%)
Region 3	0.9949	0.9946	0.9706	1.0193	(2.4%)	2.5%
Southwest Michigan Behavioral Health	0.8613	0.9980	0.8616	1.0095	0.0%	1.2%
Mid-State Health Network	1.1138	0.9968	1.1285	1.0083	1.3%	1.1%
CMH Partnership of Southeast Michigan	0.9937	0.9762	1.0291	0.9968	3.6%	2.1%
Detroit Wayne Mental Health Authority	0.8884	0.9713	0.9090	0.9839	2.3%	1.3%
Oakland County CMH Authority	1.2743	0.9713	1.2548	0.9790	(1.5%)	0.8%
Macomb County CMH Services	0.9750	0.9713	0.9160	0.9720	(6.1%)	0.1%
Region 10 PIHP	1.0637	0.9914	1.0620	0.9969	(0.2%)	0.6%

PIHP entity specific factor change impact

MANAGED CARE ENTITY	SFY 2020 ENTITY SPECIFIC FACTOR	SFY 2021 ENTITY SPECIFIC FACTOR	PERCENT CHANGE	PERCENT CHANGE INCLUDING HSW
Northcare Network	1.1094	1.1049	(0.4%)	(0.7%)
Northern Michigan Regional Entity	1.0763	1.0684	(0.7%)	(0.7%)
Region 3	0.9904	0.9931	0.3%	0.5%
Southwest Michigan Behavioral Health	0.8587	0.8689	1.2%	1.2%
Mid-State Health Network	1.1081	1.1273	1.7%	1.6%
CMH Partnership of Southeast Michigan	0.9713	1.0022	3.2%	2.9%
Detroit Wayne Mental Health Authority	0.8665	0.8853	2.2%	2.1%
Oakland County CMH Authority	1.2372	1.2364	(0.1%)	0.1%
Macomb County CMH Services	0.9460	0.9230	(2.4%)	(2.2%)
Region 10 PIHP	1.0467	1.0563	0.9%	0.9%

Notes:

1. SFY 2020 and SFY 2021 entity specific factors reflect a 50/50 blend of current year risk and area factors and prior year risk and area factors.
2. SFY 2021 entity specific factors have been normalized to be budget neutral to MDHHS.

Assumptions for Mental Health Budget

- Eligibles will start at the COVID high point of about 125,000/month. After December 2020, the projected number of eligibles will drop closer to pre-COVID levels.
- MDHHS rates will increase on average 3% across the board. The remaining 50% of the new entity specific rate methodology will be implemented in FY21. The entity specific factor calculation in FY20 was 50% old factor and 50% new factor, FY21 will be 100% new factor calculation methodology.
- The combination of base rate increases, entity specific methodology and increased eligibles has led to a projected 6% increase in capitation revenue.

Assumptions for Mental Health Budget

- Capitation revenue allocations to the CMHPSM will be increased 3% over FY20 budget revision #1.
- The region will be returning to revenue Medicaid/HMP allocations that will be distributed as a 1/12 monthly budget payment, rather than processes utilized during the previous two fiscal years where the CMHPSM was pushing out all available revenue each month.
- C Waiver capitation payments will be distributed to the CMHs as they are paid to the PIHP after deducting our administrative cost percentage. The biggest challenge in FY21 relates to COVID; what will happen to our eligibles and will we see a surge in encounters following stay at home.

Assumptions for SUD and Grants Budget

- Medicaid funding for SUD services is projected to decrease from \$9.9M in FY20 to \$9.7M in FY21.
- The Prevention Grant is entered at the FY20 level of funding with an assumption that the FY21 funding level will increase from the initial funding award level (we have historically been successful in increasing the prevention allocation over the past several fiscal years). All other Grants are entered at the grant application amount.
- The State Targeted Response (STR) and State Opioid Response – Supplemental (SORS) Grants ended in FY20. The State Opioid Response II Grant (SOR II) starts in FY21 and the State Opioid Response grant has moved into a no cost extension year, and is denoted as SOR NCE within this budget. The following chart displays the grant allocations as of this writing. Grant allocations are subject to amendment by MDHHS.

Assumptions for SUD and Grants Budget

- The SUD department has not finished funding allocations for all FY21 projects, the intent of the CMHPSM is to utilize the most appropriate fund source to accomplish our service goals and objectives.
- The intent of the PA2 award process is to make strategic investments in SUD service needs, specifically in targeted strategic areas while simultaneously spending down the accumulated PA2 reserve that exists in Lenawee, Livingston and Washtenaw counties.
- Expenses allocations were carefully reviewed to ensure that all allocable SUD Administration expenses were identified for the new SUD Administration Grant.

Assumptions for General Administration Budget

- The budget includes a \$2M contribution to the Internal Service Fund (risk management fund) along with a \$3M payment for past years deficit repayment to the CMHSPs related to FY19.
- Salaries in the budget includes all anticipated step increases during fiscal FY21. Fringe benefits are entered at a Composite Rate of 29% pending final vendor bids.
- The budget assumes that all 23.5 FTE positions will be filled throughout the year. CMHPSM currently has one open position.
- A more structured technology replacement program will be implemented in FY21 funded at \$16,000 annually. Some of these technology expenses will get absorbed by state grants where that is appropriate.



CMHPSM Summary FY 21 Budget with Prior Year

Line of Business		FY 21 Proposed Budget	FY 20 Budget Revision 1	FY 19 Actuals	FY 18 Actuals
Behavioral Health Medicaid	Revenue	176,342,036	166,874,863	161,052,167	152,417,835
	Expenses	172,325,620	167,324,862	169,003,767	160,631,433
	Net Activity	4,016,416	(449,999)	(7,951,600)	(8,213,598)
SUD Medicaid/Grants	Revenue	20,705,026	18,784,766	15,067,745	13,584,225
	Expenses	21,735,795	18,304,599	15,444,433	13,472,504
	Net Activity	(1,030,769)	480,167	(376,688)	111,721
PIHP Administrative	Revenue	8,025,991	5,477,732	1,844,133	1,960,854
	Expenses	7,643,667	4,576,696	3,612,815	3,827,538
	Net Activity	382,324	901,036	(1,768,682)	(1,866,684)
CMHPSM Totals	Revenue	205,073,053	191,137,361	177,964,045	167,962,913
	Expenses	201,705,082	190,206,157	188,061,015	177,931,475
	Net Activity	3,367,971	931,204	(10,096,970)	(9,968,562)

CMHPSM MH - Medicaid Spending FY 21 Proposed and FY 20 Revised Budgets

	2021 Proposed Budget	2020 Budget Revision 1	\$ Difference	% Difference
Revenue				
Medicaid State Plan	57,442,998	54,137,054	3,305,944	6.1%
Medicaid B3		58,716	(58,716)	-100.0%
MCAID 1915iMH	42,569,727	37,843,777	4,725,950	12.5%
Medicaid HSW	45,959,750	44,448,501	1,511,249	3.4%
MCAID Children's Waiver	1,284,633	1,284,633	-	0.0%
MCAID SED Waiver	278,211	278,211	-	0.0%
Healthy Michigan Revenue	11,338,209	11,232,346	105,863	0.9%
HMP Autism		33,660	(33,660)	-100.0%
Medicaid Autism	17,453,508	13,280,310	4,173,198	31.4%
Medicaid DHS Incentive	215,000	215,000	-	0.0%
HRA MCAID Revenue	2,400,000	2,457,532	(57,532)	-2.3%
HRA HMP Revenue	2,400,000	2,362,052	37,948	1.6%
Deferred Revenue		1,675,000	(1,675,000)	-100.0%
PIHP Allocation	(5,000,000)	(2,431,929)	(2,568,071)	105.6%
	<u>176,342,036</u>	<u>166,874,863</u>	<u>9,467,173</u>	<u>5.7%</u>
Expenses				
Required Payments				
IPA MCAID	1,435,656	1,348,121	(87,535)	6.5%
IPA HMP	363,771	337,030	(26,741)	7.9%
HRA Medicaid	2,400,000	2,457,532	57,532	-2.3%
HRA HMP	2,400,000	2,362,052	(37,948)	1.6%
	<u>6,599,427</u>	<u>6,504,735</u>	<u>(94,692)</u>	<u>1.5%</u>

	2021 Proposed Budget	2020 Budget Revision 1	\$ Difference	% Difference
Lenawee CMH				
Medicaid (b) & (b3)	12,984,320	12,518,757	(465,563)	3.7%
Medicaid HSW	5,173,112	5,022,439	(150,673)	3.0%
Children's Waiver	90,109	86,811	(3,299)	3.8%
Healthy Michigan Expense	1,736,392	1,685,817	(50,575)	3.0%
Autism Medicaid	1,308,863	1,270,741	(38,122)	3.0%
Medicaid DHIP	37,676	36,579	(1,098)	3.0%
Lenawee CMH Total	21,330,472	20,621,143	(709,329)	3.4%
Livingston CMH				
Medicaid (b) & (b3)	17,389,757	16,883,259	(506,498)	3.0%
Medicaid HSW	7,521,224	7,302,159	(219,065)	3.0%
Children's Waiver	302,510	291,435	(11,075)	3.8%
SED Waiver	84,148	81,067	(3,081)	3.8%
Healthy Michigan Expense	2,341,762	2,273,555	(68,207)	3.0%
Autism Medicaid	4,957,208	4,812,823	(144,385)	3.0%
Medicaid DHIP	126,484	122,800	(3,684)	3.0%
Livingston CMH Total	32,723,092	31,767,099	(955,993)	3.0%
Monroe CMH				
Medicaid (b) & (b3)	19,470,978	18,903,862	(567,116)	3.0%
Medicaid HSW	7,820,983	7,593,187	(227,796)	3.0%
Children's Waiver	109,418	105,413	(4,006)	3.8%
Healthy Michigan Expense	2,622,026	2,545,656	(76,370)	3.0%
Autism Medicaid	2,570,743	2,495,867	(74,876)	3.0%
Medicaid DHIP	91,499	88,834	(2,665)	3.0%
Monroe CMH Total	32,685,647	31,732,819	(952,828)	3.0%
Washtenaw CMH				
Medicaid (b) & (b3)	42,743,652	41,498,691	(1,244,961)	3.0%
Medicaid HSW	24,902,700	24,177,379	(725,321)	3.0%
Children's Waiver	682,256	657,280	(24,977)	3.8%
SED Waiver	218,784	210,775	(8,009)	3.8%
Healthy Michigan Expense	5,755,998	5,588,348	(167,650)	3.0%
Autism Medicaid	4,657,841	4,522,176	(135,665)	3.0%
Medicaid DHIP	45,750	44,417	(1,332)	3.0%
Washtenaw CMH Total	79,006,982	76,699,066	(2,307,916)	3.0%
Total Expenses	172,345,620	167,324,862	(5,020,757)	3.0%
Net MH Medicaid Activity	3,996,416	(450,000)	4,446,416	-988.1%

CMHPSM Proposed Budget for SUD/Grants FY 21

	2021 Proposed Budget	2020 Budget Revision 1	\$ Difference	% Difference
REVENUE				
Medicaid Revenue				
Medicaid SUD	3,114,807	3,590,995	(476,188)	-13.3%
HMP SUD	6,576,809	6,308,102	268,707	4.3%
	<u>9,691,616</u>	<u>9,899,097</u>	<u>(207,481)</u>	<u>-2.1%</u>
PA2 Tax Revenue				
PA2 - Revenue	1,847,000	1,844,101	2,899	0.2%
PA 2 Reserve	1,000,000	1,564,432	(564,432)	-36.1%
	<u>2,847,000</u>	<u>3,408,533</u>	<u>(561,533)</u>	<u>-16.5%</u>
Block Grants				
Community Block Grant	2,750,000	2,840,568	(90,568)	-3.2%
SUD Admin Grant	650,015		650,015	
Women's Specialty Services Prevention	473,000		473,000	
	<u>1,293,171</u>	<u>770,627</u>	<u>522,544</u>	<u>67.8%</u>
	<u>5,166,186</u>	<u>3,611,195</u>	<u>1,554,991</u>	<u>43.1%</u>
Opioid Grants				
SOR Grant		725,830	409,643	-100.0%
SOR NCE	1,135,473			
SOR Supplemental		108,823	(108,823)	-100.0%
STR-State Targeted Response		735,451	(735,451)	-100.0%
SOR II	1,373,449		1,373,449	
	<u>2,508,922</u>	<u>1,570,105</u>	<u>938,817</u>	<u>59.8%</u>
Other Grants				
Gambling Prevention Grant	200,000	53,750	146,250	272.1%
Veteran Navigation	100,000	80,000	20,000	25.0%
Clubhouse	104,447	79,230	25,217	31.8%
Tobacco	4,000		4,000	
SDA	82,855	82,855	-	0.0%
	<u>491,302</u>	<u>295,836</u>	<u>195,466</u>	<u>66.1%</u>
REVENUE Total	<u>20,705,026</u>	<u>18,784,766</u>	<u>1,920,260</u>	<u>10.2%</u>

	2021 Proposed Budget	2020 Budget Revision 1	\$ Difference	% Difference
EXPENDITURES				
Medicaid/PA2/Block Grant Expenditures per County				
Lenawee County SUD Services	3,142,032	2,890,089	251,944	8.7%
Livingston County SUD Services	2,425,049	2,134,624	290,425	13.6%
Monroe County SUD Services	3,311,724	3,109,315	202,409	6.5%
Washtenaw County SUD Service:	8,080,281	7,605,604	474,676	6.2%
	<u>16,959,087</u>	<u>15,739,632</u>	<u>1,219,455</u>	<u>7.7%</u>
Opioid Grants				
SOR Grant		727,494	407,979	-100.0%
SOR NCE	1,135,473			
SOR Supplemental		108,823	(108,823)	-100.0%
STR-State Targeted Response		737,300	(737,300)	-100.0%
SOR II	1,373,449		1,373,449	
	<u>2,508,922</u>	<u>1,573,618</u>	<u>935,305</u>	<u>59.4%</u>
Other Grants				
Veteran Navigation	100,000	81,870	18,130	22.1%
Gambling Prevention Grant	200,000	53,750	146,250	272.1%
Clubhouse	104,447	77,566	26,881	34.7%
Tobacco	4,000		4,000	
Women's Specialty	473,000		473,000	
	<u>881,447</u>	<u>213,186</u>	<u>668,261</u>	<u>313.5%</u>
SUD Administration				
SUD Admin Grant	650,015		650,015	
SUD Administration	1,037,663	778,063	259,600	33.4%
	<u>1,687,678</u>	<u>778,063</u>	<u>909,615</u>	<u>116.9%</u>
EXPENDITURES Total	<u><u>22,037,133</u></u>	<u><u>18,304,499</u></u>	<u><u>3,732,635</u></u>	<u><u>20.4%</u></u>
Net Activity SUD/Grants	<u><u>(1,332,108)</u></u>	<u><u>480,267</u></u>	<u><u>(1,812,375)</u></u>	<u><u>-377.4%</u></u>

CMHPSM PIHP Admin by Department

	2021 Proposed Budget	2020 Budget Revision 1	\$ Change	% Change
REVENUE				
WITHHOLD	120,000	120,000	-	0.0%
PBIP MCAID	1,673,565	1,503,267	170,298	11.3%
Local Match	1,007,312	1,259,140	(251,828)	-20.0%
PIHP Allocation	5,000,000	2,431,929	2,568,071	105.6%
SIS Assessment	210,114	148,395	61,719	41.6%
Interest Income	15,000	15,000	-	0.0%
REVENUE Total	8,025,991	5,477,732	2,548,259	46.5%
EXPENDITURES				
ISF Transfer	2,000,000	1,503,267	496,733	33.0%
ISF Repay CMHs	3,000,000		3,000,000	
Local Match - Medicaid	1,007,312	1,259,140	(251,828)	-20.0%
GM -- Administration	361,043	316,048	44,995	14.2%
QM -- Compliance	151,993	327,466	(175,474)	-53.6%
Finance	194,512	177,024	17,488	9.9%
Human Resources	24,515	14,715	9,800	66.6%
Information Management	589,140	736,835	(147,695)	-20.0%
Network Management	102,989	89,383	13,606	15.2%
SIS/Assessments	210,114	150,793	59,321	39.3%
Regional Board	2,050	2,025	25	1.2%
Subtotal	1,636,355	1,814,289	(177,934)	-9.8%
EXPENDITURES Total	7,643,667	4,576,696	3,066,971	67.0%
Grand Total	382,324	901,036	(518,712)	-57.6%

CMHPSM Administrative Costs FY 21 compared to FY 20

Expense Categories	FY 21 PIHP Administrative	FY 21 SUD/Grants	FY 21 Total	FY 20 Budget Revision 1	\$ Change	% Change
Salaries and Wages	721,160	949,646	1,670,806	1,547,408	123,398.19	8.0%
Composite Fringe Benefits	216,348	269,390	485,738	467,964	17,774.26	3.8%
Audits	14,000	14,000	28,000	55,200	(27,200.00)	-49.3%
Committee Per Diem	225	500	725	446	279.00	62.6%
Computer Hardware	25,831		25,831	18,644	7,187.31	38.6%
Computer Software	17,525	8,652	26,176	29,838	(3,661.05)	-12.3%
Consulting/Contractors	410,845	324,248	735,093	656,093	78,999.81	12.0%
Conventions/Conferences	26,468	7,157	33,625	5,896	27,729.30	470.3%
Depreciation Expense	13,000		13,000	15,600	(2,600.02)	-16.7%
Employee Travel	25,220	6,030	31,250	26,154	5,095.82	19.5%
Employee Development	7,928	9,699	17,627	3,838	13,788.80	359.3%
Furniture and Equipment	170		170	432	(262.88)	-60.8%
Insurance Premiums	8,236	8,236	16,471	8,324	8,146.80	97.9%
Legal Fees	45,000		45,000	26,031	18,969.10	72.9%
Office Space	60,000	60,000	120,000	57,835	62,165.44	107.5%
Operating Supplies	10,790	17,447	28,237	14,846	13,390.69	90.2%
Postage	370	100	470	661	(191.32)	-28.9%
Printers/Fax Machines	2,500	2,500	5,000	4,667	333.34	7.1%
Printing and Binding	1,704	750	2,454	950	1,503.88	158.3%
Recruitment	1,000		1,000	1,167	(166.67)	-14.3%
Repair/Maint--Equipment	1,000		1,000	1,167	(166.67)	-14.3%
Subscriptions and Dues	11,786	331	12,117	7,137	4,980.02	69.8%
Telephone	12,051	7,571	19,622	13,654	5,967.47	43.7%
Utilities	3,200	1,421	4,621	3,745	875.52	23.4%
Miscellaneous			0	1,569	(1,569.00)	-100.0%
	1,636,355	1,687,678	3,324,033	2,969,266	354,767.12	11.9%

CMHPSM FY21 Budgeted Contracts

Administrative Contracts / Letters of Engagement / Vendor

Contractor	Description	Term	FY20 DNE, Rate or N/A	FY21 DNE, Rate or N/A
AAIDD	SIS Integration	10/1/20 - 9/30/21	\$ 2,353	\$ 2,353
Boardwalk LLC	Lease for 3005 Boardwalk (\$9,998.99/mo Apr 2020 -Mar 2021 \$10,299.89/mo Apr 2021 -Sep 2021)	10/1/20 – 9/30/21	Partial Year	\$121,798.70 + Utilities
Cohl Stoker & Toskey	Attorney Services Retainer (No cost retainer all services billed hourly)	10/1/20 - 9/30/21	\$ 225 / hr	\$ 225 / hr
Fuse	Information Technology Systems services	10/1/20 - 9/30/21	\$19,796 / yr	\$19,796 / yr
Michigan Health information Network (MHiN)	VIPR Health Data Exchange Platform for PIHP regional data sharing.	10/1/20 – 9/30/21	\$ 1,200 / mo	\$ 1,200 / mo
James Colaianne	CEO Contract Remainder of Year 1 of 3 (\$134,000 annually 10/1/20 – 10/8/20 and \$138,020 10/9/20-9/30/21)	10/1/20 – 9/30/21	\$ 2,576.92 / week	\$ 2,654.23 / week
Paychex	Human Resources / Payroll (based upon 23 employees)	10/1/20 - 9/30/21	\$819 / payroll	\$819 / payroll
PCE Systems	CRCT Electronic Health Record	10/1/20 - 9/30/21	\$ 486,900	\$ 486,900
Rosati, Schultz & Joppich	Attorney Services Retainer (No cost retainer all services billed hourly)	10/1/20 – 9/30/21	\$150 / hr	\$150 / hr
Roslund Prestage	Audit Services and hourly technical assistance consulting when necessary.	10/1/20 - 9/30/21	\$ 27,350 + \$250/hr technical assistance	\$ 28,300 + \$250/hr technical assistance

CMHSP Medicaid, HMP and C Waiver

Contractor	Contract Description	Term	Cost Settled Funding
Lenawee CMH	Master CMHSP	10/1/20 - 9/30/21	Per Funding Budget
Livingston CMH	Master CMHSP	10/1/20 - 9/30/21	Per Funding Budget
Monroe CMH	Master CMHSP	10/1/20 - 9/30/21	Per Funding Budget
Washtenaw County	Master CMHSP	10/1/20 - 9/30/21	Per Funding Budget
Lenawee CMH	Project & Sub Grant	10/1/20 - 9/30/21	Expense and Revenue
Livingston CMH	Project & Sub Grant	10/1/20 - 9/30/21	Expense and Revenue
Monroe CMH	Project & Sub Grant	10/1/20 - 9/30/21	Expense and Revenue
Washtenaw County	Project & Sub Grant	10/1/20 - 9/30/21	Expense and Revenue

MDHHS / PIHP Revenue Contract

Revenue Source	Revenue Amount	Term
MDHHS/PIHP Contract	Per Revenue Budget	10/1/20 - 9/30/21

Revenue Source	Revenue Amount	Term
EGRAMS Grants (MDHHS State Opioid Response (SOR) NCE Grant, MDHHS State Opioid Response II (SOR II) Grant, SUD Administration, Community Grant, Gambling Prevention, Prevention, State Disability Assistance, SUD Tobacco, SUD Womens' Specialty Services, Clubhouse, Veteran's Systems Navigator)	Per Revenue Budget	10/1/20 - 9/30/21

Other Revenue

Contractor	Description	Revenue Amount	Term
Washtenaw County	PA2 Funding to CMHPSM	Per Tax Receipts and Revenue Budget	10/1/20 - 9/30/21

SUD Core Provider Services – HMP, Block Grant, Medicaid, PA2

Contractor	Description	Term	FY20 DNE or N/A	FY21 DNE or N/A
Dawn Inc	SUD Core Provider (Fixed Cost)	10/1/20 - 9/30/21	\$ 850,000	\$ 925,008
Home of New Vision	SUD Core Provider (Fixed Cost)	10/1/20 - 9/30/21	\$ 1,160,441	\$ 1,211,004
Lenawee CMH	SUD Core Provider (Cost Settled)	10/1/20 - 9/30/21	\$ 1,630,268	\$ 1,630,268
Livingston CMH	SUD Core Provider (Cost Settled)	10/1/20 - 9/30/21	\$ 1,157,271	\$ 1,157,271

SUD Prevention Funding – PA2 Funding Previously Approved by OPB

Programs derived from RFP#2021A, RFP#2021B and RFQ#2021C

County	Contractor	Description	Term	FY21 Block Grant Funding	FY21 PA2 Secondary Funding	FY21 Mandatory PA2	Total FY21 Project
Livingston	Livingston County Catholic Charities & Livingston Community Prevention Project	Prevention Services	10/1/20 – 9/30/21	\$370,256	\$53,136	\$0	\$423,392
Monroe	Catholic Charities of SE Michigan	Prevention Services	10/1/20 – 9/30/21	\$122,231	\$17,541	\$0	\$139,772
Monroe	Catholic Charities of SE Michigan	Prevention Services	10/1/20 – 9/30/21	\$118,866	\$17,059	\$0	\$135,925
Monroe	Monroe County Intermediate School District	Prevention Services	10/1/20 – 9/30/21	\$102,727	\$14,742	\$0	\$117,469

County	Contractor	Description	Term	FY21 Block Grant Funding	FY21 PA2 Secondary Funding	FY21 Mandatory PA2	Total FY21 Project
Washtenaw	Avalon	Prevention Services	10/1/20 – 9/30/21	\$159,747	\$22,629	\$0	\$182,376
Washtenaw	Catholic Social Services of Washtenaw	Prevention Services	10/1/20 – 9/30/21	\$66,939	\$9,607	\$0	\$76,546
Washtenaw	Eastern Michigan	Prevention Services	10/1/20 – 9/30/21	\$ 64,036	\$9,190	\$0	\$73,226
Washtenaw	St. Joseph Mercy Chelsea	Prevention Services	10/1/20 – 9/30/21	\$155,931	\$22,378	\$0	\$178,309
Monroe	United Way of Monroe County	Prevention Coalition Services	10/1/20 – 9/30/21	\$0	\$0	\$100,000	\$100,000
Lenawee	Karen Bergbower & Associates	Lenawee Synar/DYTUR Prevention	10/1/20 – 9/30/21	\$ 26,359	\$ 3,000	\$0	\$29,359
Livingston	Karen Bergbower & Associates	Livingston Synar/DYTUR Prevention	10/1/20 – 9/30/21	\$ 25,112	\$ 1,000	\$0	\$26,112
Monroe	Karen Bergbower & Associates	Monroe Synar/DYTUR Prevention	10/1/20 – 9/30/21	\$ 33,021	\$ 2,500	\$0	\$35,521
Washtenaw	Karen Bergbower & Associates	Washtenaw Synar / DYTUR Prevention	10/1/20 – 9/30/21	\$ 47,945	\$ 1,000	\$0	\$48,945

SUD Strategic Initiatives Derived from RFP#2021D – PA2 Funding Approved by OPB

Lenawee Strategic Initiatives

County	Contractor	Description	Term	PA2	BLOCK GRANT	SOR II or SOR NCE	Total FY21 Project
Lenawee	Lenawee CMHSP	Drug Court Peer Recovery Support	10/1/20 – 9/30/21	\$ 38,960			\$ 38,960
Lenawee	Lenawee County Probate Court	Intensive Homebased Therapy	10/1/20 – 9/30/21	\$ 101,835			\$ 101,835
Lenawee	Lenawee CMHSP	Pathways Engagement Center	10/1/20 – 9/30/21	\$ 210,759	\$ 250,000	\$ 50,000	\$ 510,759
Lenawee	Parkside Family Counseling	Prevention and Education Groups	10/1/20 – 9/30/21	\$ 42,476			\$ 42,476
Lenawee Totals:				\$394,030	\$ 250,000	\$ 50,000	\$ 694,030

Livingston Strategic Initiatives

County	Contractor	Description	Term	PA2	BLOCK GRANT	SOR II or SOR NCE	Total FY21 Project
Livingston	Livingston CMH	Stepping Stones Engagement Center	10/1/20 – 9/30/21	\$ 247,684	\$250,000	\$50,000	\$ 547,684
Livingston	Livingston CMH	Blended Funding	10/1/20 – 9/30/21	\$ 40,000			\$ 40,000
Livingston	Livingston CMH	Partial Funding of Epidemiologist (with Livingston Health Department)	10/1/20 – 9/30/21	\$ 29,000			\$ 29,000
Livingston	Allies in Recovery	Recovery Advocates in Livingston	10/1/20 – 9/30/21	\$ 101,000			\$ 101,000
Livingston	Allies in Recovery	Recovery Housing	10/1/20 – 9/30/21	\$ 48,893			\$ 48,893
Livingston Totals:				\$ 466,577	\$ 250,000	\$ 50,000	\$ 766,577

Monroe Strategic Initiatives

County	Contractor	Description	Term	PA2	BLOCK GRANT	SOR II or SOR NCE	Total FY21 Project
Monroe	Catholic Charities of SE Mich	St. Joseph Center of Hope – Engagement Center	10/1/20 – 9/30/21	\$ 243,129	\$ 250,000	\$50,000	\$ 543,129
Monroe	Monroe CMH	Youth Diversion Initiative	10/1/20 – 9/30/21	\$ 230,535			\$ 230,535
Monroe	Women Empowering Women	Recovery Housing for Pregnant Women	10/1/20 – 9/30/21	\$ 19,710			\$ 19,710
Monroe	Catholic Charities of SE Mich	Recovery Advocacy Warriors (RAW)	10/1/20 – 9/30/21	\$ 57,914		\$ 23,000	\$80,914
Monroe	Catholic Charities of SE Mich	Recovery Support Services	10/1/20 – 9/30/21		\$ 149,532		\$ 149,532
Monroe	Passion of Mind	Peer Recovery Services	10/1/20 – 9/30/21			\$ 38,400	\$ 38,400
Monroe	Salvation Army Harbor Light	Peer Recovery Services – Justice Involved	10/1/20 – 9/30/21	\$ 25,000			\$ 25,000
Monroe	Salvation Army Harbor Light	Peer Recovery Services	10/1/20 – 9/30/21	\$ 25,000			\$ 25,000
Monroe	Touchstone	Recovery Housing	10/1/20 – 9/30/21	\$ 60,000			\$ 60,000

County	Contractor	Description	Term	PA2	BLOCK GRANT	SOR II or SOR NCE	Total FY21 Project
Monroe	Women Empowering Women	Paula's House - Recovery Support Services	10/1/20 – 9/30/21	\$ 64,040			\$ 64,040
Monroe Totals:				\$699,129	\$425,731	\$111,400	\$1,236,260

Washtenaw Strategic Initiatives

County	Contractor	Description	Term	PA2	BLOCK GRANT	SOR II or SOR NCE	Total FY21 Project
Washtenaw	Home of New Vision	Men's MAT Recovery Residence	10/1/20 – 9/30/21			\$ 70,112	\$ 70,112
Washtenaw	Ozone House Inc.	The Engagement Program	10/1/20 – 9/30/21	\$ 205,214			\$ 205,214
Washtenaw	Home of New Vision	Recovery Opioid Outreach Team (ROOT)	10/1/20 – 9/30/21	\$ 167,122			\$167,122
Washtenaw	Avalon Housing	Harm Reduction & Integrated Care	10/1/20 – 9/30/21	\$ 172,800			\$ 172,800
Washtenaw	Growth Works Inc.	WJDTC Peer Recovery Coaching	10/1/20 – 9/30/21	\$ 71,000			\$71,000
Washtenaw	Washtenaw CMH	SUD Crisis Initiative	10/1/20 – 9/30/21	\$ 111,879			\$111,879
Washtenaw	Home of New Vision	Home of New Vision – Engagement Center	10/1/20 – 9/30/21	\$ 175,000	\$ 250,000	\$50,000	\$475,000
Washtenaw	Growth Works Inc.	J-COPE	10/1/20 – 9/30/21	\$ 8,000			\$8,000
Washtenaw	Unified – HIV Health & Beyond	Community Peer Outreach Support	10/1/20 – 9/30/21	\$ 300,000			\$300,000
Washtenaw	Home of New Vision	Project Assert	10/1/20 – 9/30/21			\$121,000	\$121,000
Washtenaw	Dawn Farm	Engaging Individuals with OUD	10/1/20 – 9/30/21			\$42,440	\$42,440
Washtenaw	Dawn Farm	Engaging Individuals in Recovery Court	10/1/20 – 9/30/21	\$ 51,776			\$51,776
Washtenaw	Home of New Vision	Recovery Support Services	10/1/20 – 9/30/21	\$ 413,552		\$57,500	\$471,052
Washtenaw	Home of New Vision	Washtenaw Recovery Advocacy Project	10/1/20 – 9/30/21	\$ 77,000		\$23,000	\$100,000
Washtenaw	Workit Health	Telemedicine and Medication for OUD	10/1/20 – 9/30/21			\$157,560	\$157,560
Washtenaw Totals:				\$1,753,343	\$250,000	\$521,612	\$2,524,955

State Opioid Response No Cost Extension (SOR NCE) Grant Program Continuation

Type of Project	Contractor	Description	Term	FY21 DNE
ODU Recovery Housing	Home of New Vision	ODU Recovery Services / WRAP	10/1/20 – 9/30/21	\$ 23,000
ODU Recovery Housing	Home of New Vision	ODU Recovery Housing/ Women's MAT House	10/1/20 – 9/30/21	\$ 60,000
ODU Recovery Housing	Livingston CMH	Livingston ODU Recovery Housing	10/1/20 – 9/30/21	\$ 21,113
Jail MAT	Monroe CMHA	Jail Based MAT	10/1/20 – 9/30/21	\$ 57,500
MI-REP	Monroe CMHA	SOR MI REP II	10/1/20 – 9/30/21	\$ 250,000
ODU Recovery Housing	Women Empowering Women – Paula's House	ODU Recovery Housing	10/1/20 – 9/30/21	\$ 29,974
ODU Treatment	Workit Health	SOR NCE Telemedicine and Medication for ODU	10/1/20 – 9/30/21	\$ 230,000
Peers	Family Medical Center	Outpatient Peers	10/1/20 – 9/30/21	\$ 57,500
Youth & Family	Eastern Michigan University	Prime for Life	10/1/20 – 9/30/21	\$ 45,660
Youth & Family	Saint Joseph's Mercy Chelsea	Guiding Good Choices	10/1/20 – 9/30/21	\$ 30,602

*Anticipated reallocation of projected FY21 Block Grant funds by MDHHS to match FY20 funding level.

State Opioid Response II (SOR II) Grant

Type of Project	Contractor	Description	Term	FY21 DNE
OEND	University of Michigan	Opioid Overdose Education Naloxone Distribution (OEND)	10/1/20 – 9/30/21	\$ 48,277
Project ASSERT	Livingston CMH	OUD Peers / Project ASSERT	10/1/20 – 9/30/21	\$65,600
Jail Services	Livingston CMH	Jail Based Medication Assisted Treatment (MAT)	10/1/20 – 9/30/21	\$86,000
Prevention	Boys and Girls Club of Lenawee	Prime for Life OUD prevention services.	10/1/20 – 9/30/21	\$125,000
OUD Recovery Housing	Home of New Vision	Opioid Use Disorder (OUD) Recovery Housing/ Men's Medication Assisted Treatment (MAT) House	10/1/20 – 9/30/21	\$ 70,112
Opioid Health Home	Packard Health	Opioid Health Home	10/1/20 – 9/30/21	\$ 150,000
OUD Peers	Unified	OUD Peers	10/1/20 – 9/30/21	\$ 75,000
OUD Recovery Housing	Marie's House of Serenity	OUD Recovery Housing	10/1/20 – 9/30/21	\$ 49,500

Memorandums of Understanding / Coordination Agreements / Data-Use Agreements (No Funding)

Current Medicaid Health Plan Coordination Agreements
Aetna Health Plan
Blue Cross Complete
McLaren Health Plan
Meridian Health Plan
Molina Healthcare
UnitedHealthcare

Data-Use Agreements
Michigan Department of Health and Human Services (CC360 & Monthly Extract)
Michigan Department of Health and Human Services (SIS Online)
Community Mental Health Services of Livingston County (CC360 & Monthly Extract)
Lenawee Community Mental Health Authority (CC360 & Monthly Extract & SIS Online)
Monroe Community Mental Health Authority (CC360 & Monthly Extract & SIS Online)
Washtenaw County Community Mental Health (CC360 & Monthly Extract & SIS Online)
PCE Systems (CC360 & Monthly Extract)
University of Michigan (Law Resource Services Pilot)

SUD Fee-For-Service In-Network Contracts

Contractor	FY19-20 Term
Ann Arbor Treatment Center - CRC Health	10/1/20 – 9/30/22
Bear River	10/1/20– 9/30/22
Boysville DBA Holy Cross Services	10/1/20– 9/30/22
Catholic Charities of SE Michigan	10/1/20– 9/30/22
Catholic Social Services of Washtenaw County	10/1/20– 9/30/22
Complete Counseling Center	10/1/20– 9/30/22
Dawn Inc	10/1/20– 9/30/22
Hegira Programs Inc	10/1/20– 9/30/22
Home of New Vision	10/1/20– 9/30/22
Kalamazoo Probation Enhancement Program	10/1/20– 9/30/22
Marie’s House of Serenity	10/1/20– 9/30/22
Passion of Mind	10/1/20– 9/30/22
Personalized Nursing Light House	10/1/20– 9/30/22
Premier Services	10/1/20– 9/30/22
Salvation Army Harbor Light	10/1/20– 9/30/22
Therapeutics, LLC.	10/1/20– 9/30/22
Touchstone Services	10/1/20– 9/30/22
Trinity Health – Greenbrook	10/1/20– 9/30/22
Women Empowering Women	10/1/20– 9/30/22

SUD Fee-For-Service (Out of Network/Region) Contracts

Contractor	Term
Sacred Heart	10/1/20– 9/30/22
Victory Clinical	10/1/20 – 9/30/22

FY21 CMHPSM SUD Fee-For-Service Contract Standard Fee Schedules

FY21 SUD Fee-for-Service Contract Fee Schedule					COVERAGE				10/1/2020-9/30/2021
HCPCS/CPT	MOD	SERVICE	DURATION	Rate	MED	HMP	SABG	PA2	Difference from FY19
90791	HF	Psychiatric Evaluation	Encounter	\$100.00	✓	✓	✓	✓	-
90792	HF	Psychiatric Evaluation	Encounter	\$175.00	✓	✓	✓	✓	-
90832	HF	30 minutes of Psychotherapy	Encounter	\$60.00	✓	✓	✓	✓	-
90834	HF	45 minutes of Psychotherapy	Encounter	\$85.00	✓	✓	✓	✓	-
90837	HF	60 minutes of Psychotherapy	Encounter	\$110.00	✓	✓	✓	✓	-
90853	HF	Group Therapy per Session	Encounter	\$26.00	✓	✓	✓	✓	-
96372		Therapeutic, prophylactic, diagnostic injection, doctor on site Medication Administration therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular	Encounter	\$30.00	✓	✓	✓	✓	-
97810		Acupuncture 1 or more needles, initial 15 minutes	Encounter	\$40.00			✓	✓	-
97811		Acupuncture 1 or more needles, each additional 15 minutes	Encounter	\$40.00			✓	✓	-
99201	HF	E&M New Patient Low	Encounter	\$40.00	✓	✓	✓	✓	-
99202	HF	E&M New Patient Med	Encounter	\$60.00	✓	✓	✓	✓	-
99203	HF	E&M New Patient High	Encounter	\$80.00	✓	✓	✓	✓	-
99204	HF	E&M New Patient High	Encounter	\$90.00	✓	✓	✓	✓	-
99205	HF	E&M New Patient High	Encounter	\$100.00	✓	✓	✓	✓	-
99211	HF	E&M Existing Patient No Doc Low	Encounter	\$30.00	✓	✓	✓	✓	-
99212	HF	E&M Existing Patient Low	Encounter	\$35.00	✓	✓	✓	✓	-
99213	HF	E&M Existing Patient Med	Encounter	\$55.00	✓	✓	✓	✓	-
99214	HF	E&M Existing Patient Mod-High	Encounter	\$75.00	✓	✓	✓	✓	-
99215	HF	E&M Existing Patient High	Encounter	\$75.00	✓	✓	✓	✓	-
H0001		Alcohol and/or Drug Assessment	Encounter	\$60.00	✓	✓	✓	✓	-
H0001	HD	Alcohol and/or Drug Assessment	Encounter	\$60.00	✓	✓	✓	✓	-
H0003		Laboratory analysis of specimens to detect presence of alcohol or drugs.	Encounter	\$15.00	✓	✓	✓	✓	-
H0004		Individual Behavioral Health Counseling and Therapy	Per 15 mins	\$15.00	✓	✓	✓	✓	-
H0004	HD	Individual Behavioral Health Counseling and Therapy	Per 15 mins	\$15.00	✓	✓	✓	✓	-
H0005		Alcohol & Drug Group Counseling by Clinician	Encounter	\$26.00	✓	✓	✓	✓	-
H0005	HD	Alcohol & Drug Group Counseling by Clinician	Encounter	\$26.00	✓	✓	✓	✓	-
H0006		SUD Case Management- Services provided to link clients to other essential medical, educational, social and/or other services.	Encounter	\$30.00			✓	✓	-

FY21 SUD Fee-for-Service Contract Fee Schedule					COVERAGE				10/1/2020-9/30/2021
HCPCS/CPT	MOD	SERVICE	DURATION	Rate	MED	HMP	SABG	PA2	Difference from FY19
H0010		Alcohol and/or drug services; sub-acute detoxification; medically monitored residential detox (ASAM Level III.7.D)	Per Day	\$190.00	✓	✓	✓	✓	+ \$15.00 (8.5%)
H0010	HA	Adolescent Alcohol and/or drug services; sub-acute detoxification; medically monitored residential detox (ASAM Level III.7.D)	Per Day	\$325.00	✓	✓	✓	✓	-
H0012		Alcohol and/or drug services; sub-acute detoxification (residential addiction program outpatient)	Per Day	\$190.00	✓	✓	✓	✓	+ \$15.00 (8.5%)
H0012	HA	Adolescent Alcohol and/or drug services; sub-acute detoxification (residential addiction program outpatient)	Per Day	\$325.00	✓	✓	✓	✓	-
H0014		Alcohol and/or drug services; sub-acute detoxification; medically monitored residential detox (ASAM Level I.D)	Per Day	\$190.00	✓	✓	✓	✓	+ \$15.00 (8.5%)
H0014	HA	Adolescent Alcohol and/or drug services; sub-acute detoxification; medically monitored residential detox (ASAM Level I.D)	Per Day	\$325.00	✓	✓	✓	✓	-
H0015		IOP Intensive Outpatient Care	Per Day	\$110.00	✓	✓	✓	✓	-
H0018	HF	Alcohol and/or drug services; corresponds to services provided in short term residential (non-hospital residential treatment program) 3.1 Clinically Managed Low Intensity (H0018:HF short- term no modifier)	Per Day	\$133.00	✓	✓	✓	✓	+ \$8.00 (6.5 %)
H0018	HF UB	Alcohol and/or drug services; corresponds to services provided in short term residential (non-hospital residential treatment program) 3.3 Clinically Managed Population-Specific (H0018:HF short term and UB modifier)	Per Day	\$285.00	✓	✓	✓	✓	-

FY21 SUD Fee-for-Service Contract Fee Schedule					COVERAGE				10/1/2020-9/30/2021
HCPCS/CPT	MOD	SERVICE	DURATION	Rate	MED	HMP	SABG	PA2	Difference from FY19
H0018	HF TF	Alcohol and/or drug services; corresponds to services provided in short term residential (non-hospital residential treatment program) 3.5 Clinically Managed High Intensity (H0018:HF short term and TF modifier)	Per Day	\$133.00	✓	✓	✓	✓	+ \$8.00 (6.5 %)
H0018	HF TG	Alcohol and/or drug services; corresponds to services provided in short term residential (non-hospital residential treatment program) 3.7 Medically Monitored Intensive (H0018:HF short term and TG modifier)	Per Day	\$133.00	✓	✓	✓	✓	+ \$8.00 (6.5 %)
H0019		Alcohol and/or drug services; corresponds to services provided in long-term residential (non-medical, nonacute care in residential treatment program where stay is typically longer than 30 days) 3.1 Clinically Managed Low Intensity (H0019 long term no modifier)	Per Day	\$133.00	✓	✓	✓	✓	+ \$10.00 (8%)
H0019	UB	Alcohol and/or drug services; corresponds to services provided in long-term residential (non-medical, nonacute care in residential treatment program where stay is typically longer than 30 days) 3.3 Clinically Managed Population-Specific (H0019 long term and UB modifier)	Per Day	\$133.00	✓	✓	✓	✓	+ \$10.00 (8%)
H0019	TF	Alcohol and/or drug services; corresponds to services provided in long-term residential (non-medical, nonacute care in residential treatment program where stay is typically longer than 30 days) 3.5 Clinically Managed High Intensity (H0019 long term and TF modifier)	Per Day	\$133.00	✓	✓	✓	✓	+ \$10.00 (8%)

FY21 SUD Fee-for-Service Contract Fee Schedule					COVERAGE				10/1/2020-9/30/2021
HCPCS/CPT	MOD	SERVICE	DURATION	Rate	MED	HMP	SABG	PA2	Difference from FY19
H0019	TG	Alcohol and/or drug services; corresponds to services provided in long-term residential (non-medical, nonacute care in residential treatment program where stay is typically longer than 30 days) 3.7 Medically Monitored Intensive (H0019 long term and TG modifier)	Per Day	\$133.00	✓	✓	✓	✓	+ \$10.00 (8%)
H0019	HA	Adolescent Alcohol and/or drug services; corresponds to services provided in ASAM Level III.3 and ASAM Level III.5 programs, previously referred to as long-term residential (non-medical, non-acute care in residential treatment program where stay is typically longer than 30 days)	Per Day	\$255.00	✓	✓	✓	✓	-
H0020		Methadone Dosing	Encounter	\$6.25	✓	✓	✓	✓	+ \$0.75 (13%)
H0033		Pharmacological Support – Oral medication administration, direct observation. (Use for Buprenorphine or Suboxone administration and/or service - provision of the drug).	Encounter	\$10.00			✓	✓	-
H0038	HF	Recovery Coach/Peer Services	Per 15 mins	\$25.00	✓	✓	✓	✓	-
H0048		Alcohol and drug testing, collection and handling only, specimens other than blood.	Encounter / per test	\$10.00	✓	✓	✓	✓	-
H2034		Recovery/Transitional Housing	Per Day	\$27.00			✓	✓	-
H2035		Group Outpatient: Alcohol/Other Drug Treatment	Per Hour	\$60.00	✓	✓	✓	✓	-
S9976	HF	Residential Room and Board - May be used in conjunction with H0018 & H0019.	Per Day	\$27.00			✓	✓	-
T1009		Care of the children of the individual receiving alcohol and/or substance abuse services	Encounter / Per Hour	\$15.00			✓	✓	-
T1012		Recovery Supports	Encounter	\$100.00	✓	✓	✓	✓	-

CMHPSM STAFF POSITIONS

Job Title	FTE	Functions	Salary Tier	CMHPSM Department
Chief Executive Officer	1.0	Chief administrative officer of the CMHPSM. Responsible for implementing the mission, vision and values through the CMHPSM strategic plan developed with the CMHPSM Regional Board. Responsible for oversight for PIHP functions and regional all four CMHPSM departments and all CMHPSM staff persons. Liaison between Regional Operations Committee and Regional Board. Provides leadership for the CMHPSM organization and compliance with all contractual requirements within the Medicaid contract with MDHHS.	N/A	CEO
SUD Services Director	1.0	Provide leadership and management of SUD treatment and prevention services. Staff liaison to Oversight Policy Board.	Tier 4	SUD – Department Leader
Chief Operating Officer	1.0	Manage MDHHS contract requirements Provider Network Management (CMHSPs and SUD Core Providers) and Oversight for Delegated network management and credentialing Infrastructure Management for PIHP Professional Services contract manager	Tier 4	Operations - Department Leader
Chief Finance Officer	1.0	Act as the chief financial officer including revenue projections, trend analysis and consultation to regional board, CEO and executive directors regarding finance	Tier 4	Finance – Department Leader
Chief Information Officer	1.0	Skilled technical and leadership role for the continuity and security of all data and technical systems used by the CMHPSM including all personal computing devices, network and the electronic health record systems.	Tier 4	Information Management - Department Leader
Quality / Compliance Officer	1.0	Oversight for Delegated Functions in Quality/Compliance/Utilization Review and Customer Service Liaison for State and Federal Audits Program Integrity Waiver Services oversight	Tier 3	Operations
Accountant	1.0	Performs a variety of functions in the accounting cycle, from general ledger to financial analysis. Reconciles and monitors a variety of general ledger accounts and related revenue/expenditure accounts. Participates in monthly, quarterly, and annual close-outs	Tier 2b	Finance

CMHPSM STAFF POSITIONS

Job Title	FTE	Functions	Salary Tier	CMHPSM Department
Health Data Analyst	1.0	Statistician responsible for producing, analyzing and preparing information on population health statistics, performance improvement studies and required data reporting	Tier 3	Information Management
Waiver Services Coordinator	1.0	Provides Coordination of applications and program requirements for Habilitation Supports Waiver, Autism Waiver and subsequent site audits, represents the CMHPSM at waiver coordination activities with MDHHS, may audit clinical records as appropriate to waiver services Oversees SIS program	Tier 3	Operations
Clinical Treatment Coordinator	1.0	Provides regional level oversight for Contracted Treatment Providers, Utilization Review for services and monitoring for Core Providers	Tier 3	SUD
Regional Coordinator	1.0	Coordinates PIHP administrative functions (including payroll, HR functions) Staff support for Regional Operations Committee, Regional PIHP Board and Oversight Policy Board Coordinates special projects and initiatives including PIHP level grants and MDHHS submissions	Tier 2b	CEO
Data Reporting Coordinator	1.0	Provides regional coordination and communication for required reporting elements including all behavioral health and prevention reporting	Tier 2	Information Management
SUD Prevention Coordinator	2.0	Provides regional level oversight for Contracted Prevention Services, completes required SUD prevention services state reporting, provides technical assistance to prevention service providers	Tier 2b	SUD
Utilization and Treatment Specialist	1.0	Provides consultation to external SUD-related staff Plans/coordinates follow-up or aftercare programs for consumers Participates in SUD provider monitoring visits Review and analyze utilization of resources by the SUD provider network for effective use of resources	Tier 2b	SUD
Regional Administrative Assistant	1.0	Supports Regional Committees, Processes Credentialing Applications, assists Regional Coordinator in large projects	Tier 1	Operations

CMHPSM STAFF POSITIONS

Job Title	FTE	Functions	Salary Tier	CMHPSM Department
Regional Supports Intensity Scale (SIS) Assessor	3.0	Administers/manages SIS assessments for all Adults with I/DD in service with the region, as mandated by MDHHS. The SIS Assessor is must maintain certification to be able to administer assessments. The certified assessor is not employed by the CMH where the individual receives service	Tier 1	Operations
Grant Coordinator	2.0	Grant Funded Provides oversight of grant implementation, budgets, goals, objectives and activities, and serve as a liaison to funded program personnel as well as the MDHHS grant management staff.	Tier 2	SUD
Information Management Coordinator	1.0	Coordinates region wide projects related to the electronic health record, CMHPSM Help Desk and other information management projects as required.	Tier 2	Information Management
Veterans Navigator	1.0	Identifies resources and make linkages in the PIHP region appropriate for Veteran and Military Families (V/MFs) Makes appropriate referrals, coordinates care, provides follow up, and either directly provides or assures wrap around services are available	Tier 2b	SUD
Finance Assistant	0.5	Part Time Hourly Employee Performs a variety of functions in the accounts payables and cash receipts processes. Responsibilities include inputting payables, issuing payments, processing claims, posting cash receipts and day-to-day finance	Hourly Tier 1	Finance
	23.5	Total CMHPSM Full Time Equivalent (FTE) Positions		

CMHPSM SALARY TIERS

Effective 10/1/2019

Tier	Entry Level	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
1	\$37,000.00	\$39,975.00	\$41,300.00	\$42,625.00	\$44,500.00	\$46,375.00	\$48,250.00	\$50,125.00	\$52,000.00
2	\$49,667.00	\$52,292.00	\$54,917.00	\$57,542.00	\$60,167.00	\$62,792.00	\$65,417.00	\$68,042.00	\$70,667.00
2b	\$52,623.00	\$55,585.47	\$58,547.94	\$61,510.41	\$64,472.88	\$67,435.35	\$70,397.82	\$73,360.29	\$76,322.76
3	\$60,000.00	\$63,625.00	\$67,250.00	\$70,875.00	\$74,500.00	\$78,125.00	\$81,750.00	\$85,375.00	\$89,000.00
4	\$75,000.00	\$79,125.00	\$83,250.00	\$87,375.00	\$91,500.00	\$95,625.00	\$99,750.00	\$103,875.00	\$108,000.00

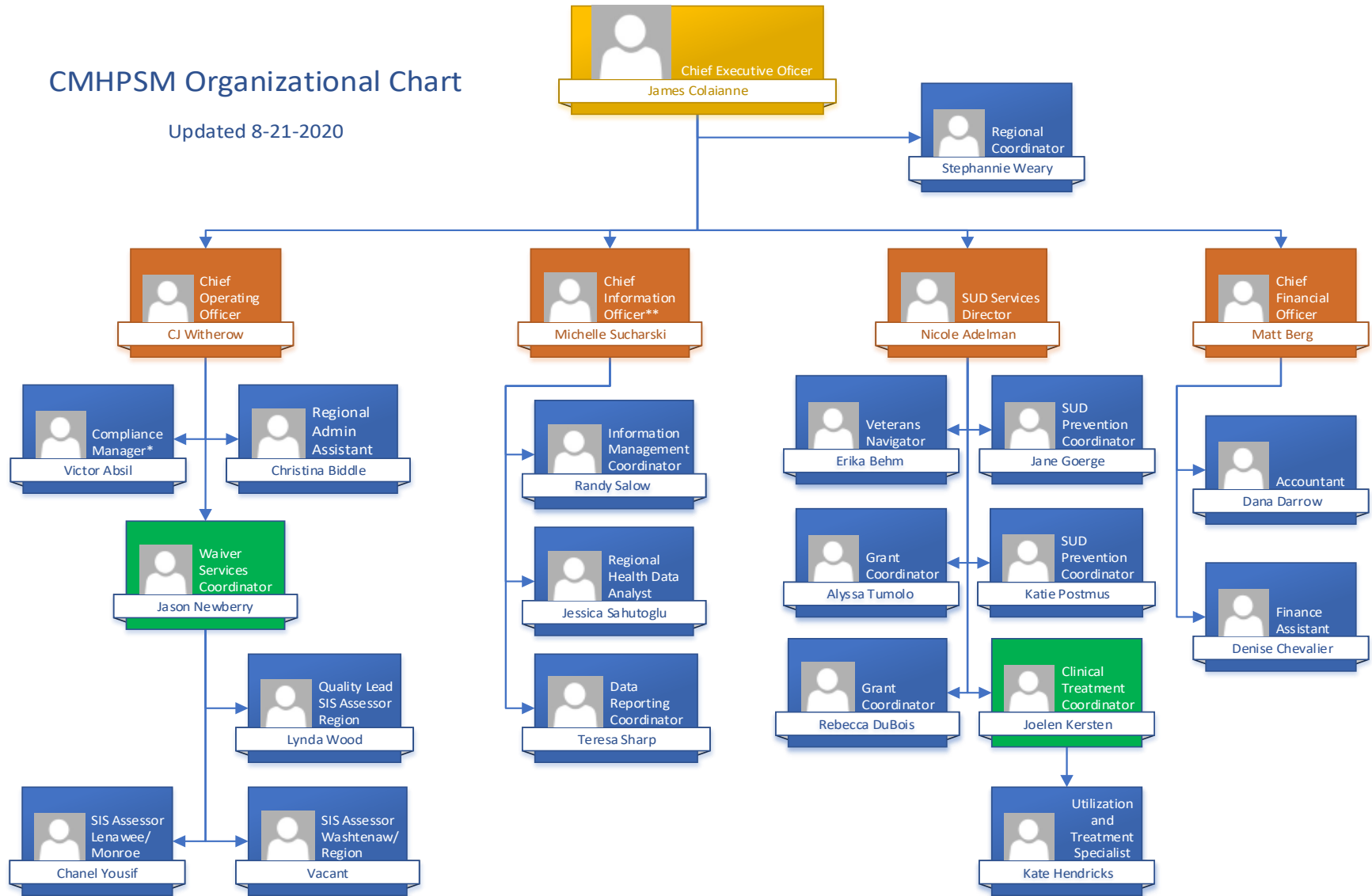
Employees move from their existing step to the next step after a positive score on their annual employee performance review. Positions are graded for tier placement (1-4) by the leadership team, whenever significant changes to the job description are made.

Cost-of-living entire pay scale adjustments are brought to the Regional Board for review.

CMHPSM ORGANIZATIONAL CHART

CMHPSM Organizational Chart

Updated 8-21-2020



*The Compliance Manager serves as the CMHPSM privacy officer.

**The CIO serves as the CMHPSM security officer.



Regional Board Action Request

Board Meeting Date: September 9, 2020

Action Requested: Approve the CMHPSM employee handbook with the included revisions.

Background: The CMHPSM staff are Board directed to bring forth the Employee Handbook at least annually for CMHPSM Board review and approval. CMHPSM staff will continue to bring forward the handbook whenever significant changes have been proposed or at minimum annually in conjunction with the fiscal year budget approval.

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

The CMHPSM employee handbook is a key source of information for CMHPSM employees related to their benefits and expectations as we work together to meet the requirements of our MDHHS contract and the region's strategic plan.

Recommend: Approval

Community Mental Health Partnership of Southeast Michigan Employee Handbook



5/1/20198/31/2020

HANDBOOK DISCLAIMER

We prepared this handbook to help employees find the answers to many questions that they may have regarding their employment with Community Mental Health Partnership of Southeast Michigan (CMHPSM). Please take the necessary time to read it.

We do not expect this handbook to answer all questions. Supervisors and [the Human Resources Regional Coordinator](#) also serve as a major source of information.

Neither this handbook nor any other verbal or written communication by a management representative is, nor should it be considered to be, an agreement, contract of employment, express or implied, or a promise of treatment in any particular manner in any given situation, nor does it confer any contractual rights whatsoever. Community Mental Health Partnership of Southeast Michigan adheres to the policy of employment at will, which permits the CMHPSM or the employee to end the employment relationship at any time, for any reason, with or without cause or notice.

No CMHPSM representative other than the CEO may modify at-will status and/or provide any special arrangement concerning terms or conditions of employment in an individual case or generally and any such modification must be in a signed writing.

Many matters covered by this handbook, such as benefit plan descriptions, are also described in separate CMHPSM documents. These CMHPSM documents are always controlling over any statement made in this handbook or by any member of management.

This handbook states only general CMHPSM guidelines. The CMHPSM may, at any time, in its sole discretion, modify or vary from anything stated in this handbook, with or without notice, except for the rights of the parties to end employment at will, which may only be modified by an express written agreement signed by the employee and the CEO.

This handbook supersedes all prior handbooks.

Table of Contents

Section 1 - Governing Principles of Employment	5
1-1 Introduction	5
1-2 CMHPSM Vision, Mission and Values	5
1-3 CMHPSM Board of Directors	6
1-4 Equal Employment Opportunity	6
1-5 Non-Harassment	7
1-6 Sexual Harassment	8
1-7 Drug-Free and Alcohol-Free Workplace	8
1-8 Workplace Violence	9
Section 2 - Operational Policies	11
2-1 Employee Classifications	11
2-2 Your Employment Records	11
2-3 Background Checks	11
2-4 Working Hours and Schedule	12
2-5 Timekeeping Procedures	13
2-6 Overtime	13
2-7 Safe Harbor Policy for Exempt Employees	13
2-8 Your Paycheck	15
2-9 Direct Deposit	15
2-10 Salary Advances	15
2-11 Performance and Salary Review	15
2-12 Internal Transfers/Promotions	16
2-13 Temporary Salary Adjustment	16
2-14 Job Descriptions	17
2-15 Job Postings	17
Section 3 - Benefits	19
3-1 Benefits Overview/Disclaimer	19
3-2 Paid Holidays	19
3-3 Paid Time Off For Full-Time Employees	20
3-4 Paid Time Off For Part Time Employees	22
3-5 Paid Time Off Donation	22
3-6 Lactation Breaks	23
3-7 Workers' Compensation	23
3-8 Jury Duty	24
3-9 Bereavement Leave	24
3-10 Voting Leave	24
3-11 Insurance Programs	25
3-12 Domestic Partner Benefits	26
3-13 Short-Term and Long-Term Disability Benefits	27
3-14 Employee Assistance Program	27
3-15 Retirement Plan	28
Section 4 - Leaves of Absence	29

4-1 Personal Leave.....	29
4-2 Military Leave	29
Section 5 - General Standards of Conduct	31
5-1 Workplace Conduct.....	31
5-2 Open Communication.....	32
5-3 Punctuality and Attendance.....	34 33
5-4 Use of Communications and Computer Systems	34 33
5-5 Use of Social Media	35 34
5-6 Personal and Company-Provided Portable Communication Devices	36 35
5-7 Inspections	37 36
5-8 Smoking.....	37 36
5-9 Personal Mail.....	38 37
5-10 Personal Visits and Telephone Calls	38 37
5-11 Solicitation and Distribution.....	38 37
5-12 Confidential Company Information	39 38
5-13 Conflict of Interest and Business Ethics.....	39 38
5-14 Outside Employment	40 39
5-15 Use of Facilities, Equipment and Property, Including Intellectual Property	42 40
5-16 Washtenaw County Building Policies and Procedure	42 40
5-17 Identification Cards and Sign-in Procedures	43 41
5-18 Health and Safety	43 41
5-19 Hiring Relatives/Employee Relationships.....	45 42
5-20 Employee Dress and Personal Appearance	46 43
5-21 Publicity/Statements to the Media.....	46 43
5-22 Operation of Vehicles.....	46 43
5-23 Business Expense Reimbursement	47 44
5-24 References	48 45
5-25 If You Must Leave Us	48 45
5-26 Exit Interviews.....	49 45
Section 6 - Michigan Addendum	50 46
6-1 Working Hours and Schedule.....	50 46
6-2 Your Paycheck.....	50 46
6-3 Social Security Number Privacy Act.....	50 46
6-4 Victims of Crime Leave	51 47
A Few Closing Words.....	52 48
General Handbook Acknowledgment.....	53 49
Receipt of Sexual Harassment Policy.....	54 50
Receipt of Non-Harassment Policy.....	56 52

Section 1 - Governing Principles of Employment

1-1 Introduction

For those of you who are commencing employment with CMHPSM, let me extend a warm and sincere welcome. We are confident that you will find our organization a dynamic and rewarding place in which to work and we look forward to a productive and successful association. We are glad to have you with us.

For those of you who have been with us, thank you for your past and continued service.

I extend to you my personal best wishes for your success and happiness here at CMHPSM. We understand that it is our employees who provide the services that our customers rely upon, and who will grow and enable us to create new opportunities in the years to come.

James Colaianne, MPA

CMHPSM ~~Interim~~ Chief Executive Officer

1-2 CMHPSM Vision, Mission and Values

Our Vision

The CMHPSM shall address the challenges confronting people living in our region by influencing public policy and participating in initiatives that reduce stigma and disparities in health care delivery and promote recovery and wellness.

Our Mission

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

Our Values

- Strength Based and Recovery Focused
- Trustworthiness and Transparency
- Accountable and Responsible
- Shared Governance
- Innovative and Data Driven Decision Making
- Learning Organization Values

1-3 CMHPSM Board of Directors

The CMHPSM Board consists of thirteen (13) members; twelve (12) members from the four Partner agencies and one (1) from the Substance Use Disorder Oversight Policy Board. Three (3) representatives are appointed by each Partner agency. At least one (1) appointee from each Partner must be a primary or secondary consumer. Each member is appointed for a three-year term. The CMHPSM Board appoints a Chief Executive Officer who is responsible for day-to-day operations of the CMHPSM and reports to the CMHPSM Board.

1-4 Equal Employment Opportunity

The CMHPSM is an Equal Opportunity Employer that does not discriminate on the basis of actual or perceived race, creed, color, religion, alienage or national origin, ancestry, citizenship status, age, disability or handicap, sex, marital status, veteran status, sexual orientation, genetic information, arrest record, or any other characteristic protected by applicable federal, state or local laws. Our management team is dedicated to this policy with respect to recruitment, hiring, placement, promotion, transfer, training, compensation, benefits, employee activities and general treatment during employment.

The CMHPSM will endeavor to make a reasonable accommodation to the known physical or mental limitations of qualified employees with disabilities unless the accommodation would impose an undue hardship on the operation of our business. If you need assistance to perform your job duties because of a physical or mental condition, please let the Regional Coordinator know.

The CMHPSM will endeavor to accommodate the sincere religious beliefs of its employees to the extent such accommodation does not pose an undue hardship on the CMHPSM's operations. If you wish to request such an accommodation, please speak to the Regional Coordinator.

Reporting Discriminatory Employment Practices

If you feel that you have been subjected to conduct which violates this policy, you should immediately report the matter to your supervisor or a leadership team member. If you are unable for any reason to contact these persons, or if you have not received a satisfactory response within three (3) business days after reporting any incident of what you perceive to be a violation of this policy, please contact the CEO.

Note: If your supervisor or a leadership team member is the person toward whom the complaint is directed you should contact the CEO directly. If your complaint is directed towards the CEO, you should contact the Regional Coordinator who will work with our contracted third party HR partner to process the complaint and ADP as our third party HR partner. ~~The CMHPSM will not allow any form of retaliation against individuals who raise issues of equal employment opportunity.~~ The CMHPSM will not allow any form of retaliation against individuals who raise issues of equal employment opportunity.

If you feel you have been subjected to any such retaliation, report it in the same manner you would report a perceived violation of this policy. To ensure our workplace is free of artificial barriers, violation of this policy including any improper retaliatory conduct will lead to discipline, up to and including discharge.

1-5 Non-Harassment

It is the Community Mental Health Partnership of Southeast Michigan's policy to prohibit intentional and unintentional harassment of any individual by another person on the basis of any protected classification including, but not limited to, race, color, national origin, disability, religion, marital status, veteran status, sexual orientation or age. The purpose of this policy is not to regulate our employees' personal morality, but to ensure that in the workplace, no one harasses another individual.

Reporting Harassment

If you feel that you have been subjected to conduct which violates this policy, you should immediately report the matter to your supervisor or a leadership team member. If you are unable for any reason to contact these persons, or if you have not received a satisfactory response within three (3) business days after reporting any incident of what you perceive to be a violation of this policy, please contact the CEO.

Note: If your supervisor or a leadership team member is the person toward whom the complaint is directed you should contact the CEO directly. If your complaint is directed towards the CEO, you should contact the Regional Coordinator who will work with our contracted third party HR partner to process the complaint and ADP as our third party HR partner.

Every report of perceived harassment will be fully investigated, and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed. In addition, the CMHPSM will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy.

If an employee feels he or she has been subjected to any such retaliation, he or she should report it in the same manner in which way the employee would report a claim of perceived harassment under this policy. Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including discharge. All employees must cooperate with all investigations.

1-6 Sexual Harassment

It is the Community Mental Health Partnership of Southeast Michigan's policy to prohibit harassment of any employee by any Supervisor, employee, customer or vendor on the basis of sex or gender. The purpose of this policy is not to regulate personal morality within the CMHPSM. It is to ensure that at the CMHPSM all employees are free from sexual harassment. While it is not easy to define precisely what types of conduct could constitute sexual harassment and there is a wide range of behavior that may violate this policy even if such behavior does not violate the law, examples of prohibited behavior include unwelcome sexual advances, requests for sexual favors, obscene gestures, displaying sexually graphic magazines, calendars or posters, sending sexually explicit e-mails, text messages and other verbal or physical conduct of a sexual nature, such as uninvited touching of a sexual nature or sexually related comments. Depending upon the circumstances, improper conduct also can include sexual joking, vulgar or offensive conversation or jokes, commenting about an employee's physical appearance, conversation about your own or someone else's sex life, or teasing or other conduct directed toward a person because of his or her gender which is sufficiently severe or pervasive to create an unprofessional and hostile working environment.

Reporting Sexual Harassment

If you feel that you have been subjected to conduct which violates this policy, you should immediately report the matter to your supervisor or a leadership team member. If you are unable for any reason to contact these persons, or if you have not received a satisfactory response within three (3) business days after reporting any incident of what you perceive to be a violation of this policy, please contact the CEO.

Note: If your supervisor or a leadership team member is the person toward whom the complaint is directed you should contact the CEO directly. If your complaint is directed towards the CEO, you should contact the Regional Coordinator who will work with our contracted third party HR partner to process the complaint ~~and ADP as our third party HR partner.~~

Every report of perceived harassment will be fully investigated and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed. In addition, the CMHPSM will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy. If you feel you have been subjected to any such retaliation, report it in the same manner you would report a claim of perceived harassment under this policy. Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including discharge. All employees must cooperate with all investigations.

1-7 Drug-Free and Alcohol-Free Workplace

To help ensure a safe, healthy and productive work environment for our employees and others, to protect CMHPSM property, and to ensure efficient operations, the CMHPSM has adopted a policy of maintaining a workplace free of drugs and alcohol. This policy applies to all employees and other individuals who perform work for the CMHPSM.

The unlawful or unauthorized use, abuse, solicitation, theft, possession, transfer, purchase, sale or distribution of controlled substances, drug paraphernalia or alcohol by an individual anywhere on CMHPSM premises, while on CMHPSM business (whether or not on CMHPSM premises) or while representing the CMHPSM, is strictly prohibited. Employees and other individuals who work for the CMHPSM also are prohibited from reporting to work or working while they are using or under the influence of alcohol or any controlled substances, which may impact an employee's ability to perform his or her job or otherwise pose safety concerns, except when the use is pursuant to a licensed medical practitioner's instructions and the licensed medical practitioner authorized the employee or individual to report to work. However, this does not extend any right to report to work under the influence of medical marijuana or to use medical marijuana as a defense to a positive drug test, to the extent an employee is subject to any drug testing requirement, to the extent permitted by and in accordance with applicable law.

Violation of this policy will result in disciplinary action, up to and including discharge.

The CMHPSM maintains a policy of non-discrimination and will endeavor to make reasonable accommodations to assist individuals recovering from substance and alcohol dependencies, and those who have a medical history which reflects treatment for substance abuse conditions. However, employees may not request an accommodation to avoid discipline for a policy violation. We encourage employees to seek assistance before their substance abuse or alcohol misuse renders them unable to perform the essential functions of their jobs, or jeopardizes the health and safety of any CMHPSM employee, including themselves. Employees must notify the CMHPSM within three (3) calendar days if they are convicted of a criminal drug violation in the workplace.

All employees are hereby advised that full compliance with the foregoing policy shall be a condition of employment at the CMHPSM.

Any employee who violates the foregoing drug-free workplace policy described above shall be subject to discipline up to and including immediate discharge.

In the discretion of the CMHPSM, any employee who violates the drug-free workplace policy may be required, in connection with or in lieu of disciplinary sanctions, to participate to the CMHPSM's satisfaction in an approved drug assistance or rehabilitation program.

1-8 Workplace Violence

The Community Mental Health Partnership of Southeast Michigan is strongly committed to providing a safe workplace. The purpose of this policy is to minimize the risk of personal injury to employees and damage to CMHPSM and personal property.

We do not expect employees to become experts in psychology or to physically subdue a threatening or violent individual. Indeed, we specifically discourage employees from engaging in any physical confrontation with a violent or potentially violent individual. However, we do

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expect and encourage employees to exercise reasonable judgment in identifying potentially dangerous situations.

Experts in the mental health profession state that prior to engaging in acts of violence, troubled individuals often exhibit one or more of the following behaviors or signs: over-resentment, anger and hostility; extreme agitation; making ominous threats such as bad things will happen to a particular person, or a catastrophic event will occur; sudden and significant decline in work performance; irresponsible, irrational, intimidating, aggressive or otherwise inappropriate behavior; reacting to questions with an antagonistic or overtly negative attitude; discussing weapons and their use, and/or brandishing weapons in the workplace; overreacting or reacting harshly to changes in CMHPSM policies and procedures; personality conflicts with co-workers; obsession or preoccupation with a co-worker or Supervisor; attempts to sabotage the work or equipment of a co-worker; blaming others for mistakes and circumstances; or demonstrating a propensity to behave and react irrationally.

Prohibited Conduct

Threats, threatening language or any other acts of aggression or violence made toward or by any CMHPSM employee WILL NOT BE TOLERATED. For purposes of this policy, a threat includes any verbal or physical harassment or abuse, any attempt at intimidating or instilling fear in others, menacing gestures, flashing of weapons, stalking or any other hostile, aggressive, injurious or destructive action undertaken for the purpose of domination or intimidation. To the extent permitted by law, employees and visitors are prohibited from carrying weapons onto CMHPSM premises.

Procedures for Reporting a Threat

All potentially dangerous situations, including threats by co-workers, should be reported immediately to any member of the leadership team with whom the employee feels comfortable. Reports of threats may ~~remain be maintained~~ confidential to the extent maintaining confidentiality does not impede our ability to investigate and respond to the complaints. All threats will be promptly investigated. All employees must cooperate with all investigations. No employee will be subjected to retaliation, intimidation or disciplinary action as a result of reporting a threat in good faith under this policy.

If the CMHPSM determines, after an appropriate good faith investigation, that someone has violated this policy, the CMHPSM will take swift and appropriate corrective action.

If an employee is the recipient of a threat made by an outside party, that employee should follow the steps detailed in this section. It is important for us to be aware of any potential danger in our offices. Indeed, we want to take effective measures to protect everyone from the threat of a violent act by an employee or by anyone else.

Section 2 - Operational Policies

2-1 Employee Classifications

For purposes of this handbook, all employees fall within one of the classifications below.

Full-Time Employees - Employees who regularly work at least 40 hours per week who were not hired on a short-term basis.

Part-Time Employees - Employees who regularly work fewer than 40 hours per week who were not hired on a short-term basis. Part-Time employees generally are not eligible for CMHPSM benefits, paid holiday or floating holiday time off, but are eligible for pro-rated paid time off and statutory benefits.

Short-Term Employees - Employees who were hired for a specific short-term project, or on a short-term freelance, per diem or temporary basis. Short-Term Employees generally are not eligible for CMHPSM benefits, paid holiday or floating holiday time off or paid time off, but are eligible to receive statutory benefits.

In addition to the above classifications, employees are categorized as either "**exempt**" or "**non-exempt**" for purposes of federal and state wage and hour laws. Employees classified as exempt do not receive overtime pay; they generally receive the same weekly salary regardless of hours worked. Such salary may be paid less frequently than weekly. The employee will be informed of these classifications upon hire and informed of any subsequent changes to the classifications.

2-2 Your Employment Records

In order to obtain their position, employees provided us with personal information, such as address and telephone number. This information is contained in the employee's personnel file.

The employee should keep his or her personnel file up to date by informing the Regional Coordinator of any changes. The employee also should inform the Regional Coordinator of any specialized training or skills he or she may acquire in the future, as well as any changes to any required visas. Unreported changes of address, marital status, etc. can affect withholding tax and benefit coverage. Further, an "out of date" emergency contact or an inability to reach the employee in a crisis could cause a severe health or safety risk or other significant problem.

2-3 Background Checks

To ensure that individuals who join CMHPSM are well qualified and to ensure that CMHPSM maintains a safe and productive work environment, it is our policy to conduct pre-employment background checks on all applicants who accept an offer of employment. Background checks may include verification of any information on the applicant's resume or application form.

All offers of employment are conditioned on receipt of a background check report that is acceptable to CMHPSM. All background checks are conducted in conformity with the Americans with Disabilities Act, and state and federal laws. Reports are kept confidential and are only viewed by individuals involved in the hiring process.

If information obtained in a background check would lead the CMHPSM to deny employment, a copy of the report will be provided to the applicant, and the applicant will have the opportunity to dispute the report's accuracy. Background checks include a criminal record check, although a criminal conviction does not automatically bar an applicant from employment.

Additional checks such as a driving record review, credit check, or other allowable checks may be made on applicants for particular job categories if appropriate and job related as determined by the CEO.

Regular criminal background checks will be conducted for all current employees every three years, at minimum. The CMHPSM reserves the right to conduct a background check for current employees at any time.

Disclosing Certain Criminal Information

All employees shall fully disclose to the Regional Coordinator any criminal felony or work-related misdemeanor convictions. Any employees that work directly with minors or who will have access to minor's records that are convicted of a felony or misdemeanor, including expressly any law relating to drugs or other controlled substances, or are charged with a felony, or are placed on the CPS Central Registry as a perpetrator, shall notify in writing the Regional Coordinator immediately, and in all cases, no later than five (5) days after such conviction, charge, or placement on the CPS Central Registry. An employee must disclose to the CMHPSM any conviction resulting from such pending charges as described in this Section. However, as required by Federal regulation, employees working with minors must disclose any arrests or charges related to child sexual abuse, child abuse, or child neglect and the disposition of such arrest or charges, and may also be required to certify that no case of child abuse or neglect has been substantiated against them.

2-4 Working Hours and Schedule

Normal business hours are 8:30 a.m. to 5:00 p.m. Monday through Friday. The work week will normally consist of five (5) working days. To accommodate the needs of the CMHPSM, employees may be required to work specifically scheduled days or hours. Staffing and operational needs may necessitate variations in starting and ending times, as well as variations in the total hours that may be scheduled each day and week. Employees may use flex time when planning their working hours, as approved by their supervisor. Telecommuting options are available based on CMHPSM policy and when authorized by your supervisor. **It is expected that employees will maintain an up-to-date electronic calendar using the shared calendaring system to communicate planned schedules and availability to the team and supervisor.**

2-5 Timekeeping Procedures

Employees must record their actual time worked for payroll and benefit purposes. Non-exempt employees must record the time work begins and ends, as well as the beginning and ending time of any departure from work for any non-work-related reason, on forms as prescribed by management.

Altering, falsifying or tampering with time records is prohibited and subjects the employee to discipline, up to and including discharge.

Exempt employees are required to record their daily work attendance and report half days and full days of absence from work for reasons such as leaves of absence, sick leave or personal business.

Non-exempt employees may not start work until their scheduled starting time.

It is the employee's responsibility to sign time records to certify the accuracy of all time recorded. Any errors in the time record should be reported immediately to their Supervisor and the Regional Coordinator, who will attempt to correct legitimate errors.

2-6 Overtime

Like most successful companies, we experience periods of extremely high activity. During these busy periods, additional work is required from all of us. Supervisors are responsible for monitoring business activity and requesting overtime work if it is necessary. Effort will be made to provide employees with adequate advance notice in such situations.

Any non-exempt employee who works overtime will be compensated at the rate of one and one-half times (1.5) his/her normal hourly wage for all time worked in excess of forty (40) hours each week, unless otherwise required by law.

Employees may work overtime only with prior management authorization.

For purposes of calculating overtime for non-exempt employees, the workweek begins at 8:30 a.m. on Monday and ends 168 hours later at 8:30 a.m. on the following Monday.

2-7 Safe Harbor Policy for Exempt Employees

It is our policy and practice to accurately compensate employees and to do so in compliance with all applicable state and federal laws. To ensure proper payment and that no improper deductions are made, employees must review pay stubs promptly to identify and report all errors.

Employees classified as exempt salaried employees will receive a salary which is intended to compensate them for all hours they may work for the Community Mental Health Partnership of Southeast Michigan. This salary will be established at the time of hire or classification as an exempt employee. While it may be subject to review and modification from time to time, such as during salary review times, the salary will be a predetermined amount that will not be subject to deductions for variations in the quantity or quality of the work performed.

Under federal and state law, salary is subject to certain deductions. For example, unless state law requires otherwise, salary can be reduced for the following reasons:

- full-day absences for personal reasons;
- full-day absences for sickness or disability if the deduction is made in accordance with a bona fide plan, policy or practice of providing wage replacement benefits for such absences (deductions also may be made for the exempt employee's full-day absences due to sickness or disability before the employee has qualified for the plan, policy or practice or after the employee has exhausted the leave allowance under the plan);
- full-day disciplinary suspensions for infractions of our written policies and procedures;
- family and Medical Leave absences (either full- or partial-day absences);
- to offset amounts received as payment from the court for jury and witness fees or from the military as military pay;
- the first or last week of employment in the event the employee works less than a full week; and
- any full work week in which the employee does not perform any work.

Salary may also be reduced for certain types of deductions such as a portion of health, dental or life insurance premiums; state, federal or local taxes; social security; or voluntary contributions to a ~~401(k) or pension plan~~defined contribution retirement plan.

In any work week in which the employee performed any work, salary will not be reduced for any of the following reasons:

- partial day absences for personal reasons, sickness or disability;
- an absence because the employer has decided to close a facility on a scheduled work day;
- absences for jury duty, attendance as a witness, or military leave in any week in which the employee performed any work (subject to any offsets as set forth above); and
- any other deductions prohibited by state or federal law.

However, unless state law provides otherwise, deductions may be made to accrued leave for full- or partial-day absences for personal reasons, sickness or disability.

If the employee believes he or she has been subject to any improper deductions, the employee should immediately report the matter to a supervisor. If the supervisor is unavailable or if the employee believes it would be inappropriate to contact that person (or if the employee has not received a prompt and fully acceptable reply), he or she should immediately contact Regional Coordinator or any other supervisor in Community Mental Health Partnership of Southeast Michigan with whom the employee feels comfortable.

2-8 Your Paycheck

The employee will be paid bi-weekly for all the time worked during the past pay period.

Payroll stubs itemize deductions made from gross earnings. By law, the CMHPSM is required to make deductions for Social Security, federal income tax and any other appropriate taxes. These required deductions also may include any court-ordered garnishments. Payroll stubs also will differentiate between regular pay received and overtime pay received.

If there is an error in an employee's pay, the employee should bring the matter to the attention of the Regional Coordinator immediately so the CMHPSM can resolve the matter quickly and amicably.

Paychecks will be given only to the employee, unless he or she requests that they be mailed, or authorize in writing another person to accept the check.

2-9 Direct Deposit

Community Mental Health Partnership of Southeast Michigan strongly encourages employees to use direct deposit. ~~Authorization forms are available from the Regional Coordinator~~ Employees may add/update direct deposit information directly ~~into~~ within the Paychex payroll system.

2-10 Salary Advances

The Community Mental Health Partnership of Southeast Michigan does not permit advances on paychecks or against any accrued paid time off.

2-11 Performance and Salary Review

During the first year of employment, employees will normally receive performance reviews a minimum of two times; once near the end of the first six (6) months of employment and again near the one (1) year anniversary date. Thereafter employees will receive a performance review annually near their anniversary date.

Employees will complete a self-evaluation performance review, submit the self-review to their supervisor and then meet with their supervisor to discuss the review. The performance review will be discussed, and both the employee and manager will sign the form to ensure that all

strengths, areas for improvement and job goals for the next review period have been clearly communicated. Performance review forms will be retained in the employee's personnel file.

A positive performance review does not always result in an automatic salary increase, a promotion or continued employment. Compensation increases and the terms and conditions of employment, transfers, promotions and demotions are determined by and at the discretion of the CMHPSM CEO.

Supervision and Work Plans

In addition to formal annual performance reviews, the CMHPSM encourages regular meetings with your supervisor to discuss your job performance and work plan. Normally supervision sessions are scheduled as needed, but ~~normally~~ minimally occur once per quarter. The purpose of these sessions is to recognize positive performance, improve poor performance and/or to address other issues in the work environment.

To improve supervision, each employee should work with their supervisor to develop an annual work plan. This work plan shall be developed at the beginning of each annual review cycle. The work plan should be designed to meet the goals of the organization and the employee. The work plan should include goals such as targets for project completion, improved accuracy of work, and professional development where needed. The work plan should be reviewed at each quarterly supervision meeting to ensure the employee is on target to meet goals and to discuss where goals should be adjusted, added or removed and ways the supervisor may be able to remove obstacles to meeting identified goals.

2-12 Internal Transfers/Promotions

The CMHPSM is dedicated to assisting employees in managing their careers and reaching their professional goals through promotion and transfer opportunities. Management prefers to promote from within and may first consider current employees with the necessary qualifications and skills to fill vacancies above the entry level. CMHPSM reserves the right to seek applicants solely from ~~outside~~ internal sources initially and then external if necessary, or to post positions internally and externally simultaneously. Management maintains the right to initiate transfers of employees between facilities to meet specified work requirements and reassignment of work requirements.

2-13 Temporary Salary Adjustment

When an employee on a consistent but temporary basis is asked to perform the work of a higher-tiered position on the CMHPSM salary scale, a temporary salary adjustment may be utilized by the CMHPSM to compensate the employee.

- Temporary basis is defined as at least one full pay period.

- The CEO will determine when individual employees are eligible for a temporary salary adjustment. Recommendations for a temporary salary adjustment must be submitted from a Leadership Team member to the CEO.
- A temporary salary adjustment can be up to an additional ten percent (10%) increase in salary. The calculated increase percentage for salary adjustments will be determined by the CEO.
- No temporary salary adjustment will allow an employee to be compensated above the maximum step on their current position's salary tier.
- Any temporary salary adjustment will be reviewed on a bi-monthly basis and will not generally last longer than one (1) year.
- Any temporary salary adjustment will not impact the employee's regular tier and step position on the salary scale.
- After a temporary salary adjustment has been discontinued, the employee will revert back to their appropriate salary step level.

2-14 Job Descriptions

CMHPSM attempts to maintain job descriptions for all authorized positions. The contents of the job descriptions are within the sole discretion of CMHPSM. Each employee shall receive a written job description at time of hire and at every change thereafter. Each employee will review, sign and date their job description. Copies of job descriptions will be kept in individual personnel files. The CMHPSM recommends that employees and their supervisor review employee job descriptions at minimum every two (2) years, or when an individual employee's primary job functions change significantly. Job descriptions may be revised or altered at the sole discretion of CMHPSM as a means of operational efficiency and the changing nature of conducting business.

2-15 Job Postings

The Community Mental Health Partnership of Southeast Michigan is dedicated to assisting employees in managing their careers and reaching their professional goals through promotion and transfer opportunities. This policy outlines the on-line job posting program which is in place for all employees. To be eligible to apply for an open position, employees must meet several requirements:

- Should be a current, regular, full-time or part-time employee
- Been in your current position for at least six months
- Maintain a performance rating of satisfactory or above
- Should not be on an employee conduct/performance-related probation or warning
- Must meet the job qualifications listed on the job posting
- Required to provide the employee's manager with notice prior to applying for the position

If the employee finds a position of interest on the job posting website and meets the eligibility requirements, an on-line job posting application must be completed in order to be considered for the position. Not all positions are guaranteed to be solely internally posted. The CMHPSM reserves the right to seek applicants solely from outside-internal sources initially and then external sources if necessary, or to post positions internally and externally simultaneously.

For more specific information about the program, please contact the Human Resources Department Regional Coordinator.

Section 3 - Benefits

3-1 Benefits Overview/Disclaimer

In addition to good working conditions and competitive pay, it is the Community Mental Health Partnership of Southeast Michigan's policy to provide a combination of supplemental benefits to all eligible employees. In keeping with this goal, each benefit program has been carefully devised. These benefits include time-off benefits, such as vacations and holidays, and insurance and other plan benefits. We are constantly studying and evaluating our benefits programs and policies to better meet present and future requirements. These policies have been developed over the years and continue to be refined to keep up with changing times and needs.

The next few pages contain a brief outline of the benefits programs the Community Mental Health Partnership of Southeast Michigan provides employees and their families. Of course, the information presented here is intended to serve only as guidelines.

The descriptions of the insurance and other plan benefits merely highlight certain aspects of the applicable plans for general information only. The details of those plans are spelled out in the official plan documents, which are available for review upon request from Regional Coordinator. Additionally, the provisions of the plans, including eligibility and benefits provisions, are summarized in the summary plan descriptions ("SPDs") for the plans (which may be revised from time to time). In the determination of benefits and all other matters under each plan, the terms of the official plan documents shall govern over the language of any descriptions of the plans, including the SPDs and this handbook.

Further, the Community Mental Health Partnership of Southeast Michigan (including the officers and administrators who are responsible for administering the plans) retains full discretionary authority to interpret the terms of the plans, as well as full discretionary authority with regard to administrative matters arising in connection with the plans and all issues concerning benefit terms, eligibility and entitlement.

While the CMHPSM intends to maintain these employee benefits, it reserves the absolute right to modify, amend or terminate these benefits at any time and for any reason.

If employees have any questions regarding benefits, they should contact the Regional Coordinator.

3-2 Paid Holidays

The CMHPSM observes the following holidays each year:

- New Year's Day
- Memorial Day
- Independence Day
- Labor Day

- Thanksgiving Day
- Friday after Thanksgiving
- Christmas Eve Day*
- Christmas Day
- New Year's Eve Day*

Should a holiday fall on a Saturday, the holiday will be observed on the preceding Friday. Should a holiday fall on a Sunday, the holiday will be observed on the following Monday. Should the Christmas Eve or New Year's Eve holiday fall on Friday, that holiday will be observed on the preceding Thursday. Should Christmas Eve or New Year's Eve fall on Saturday or Sunday, that holiday shall be observed the preceding Friday.

Floating Holidays

In addition to the holidays listed above, the CMHPSM also observes four (4) floating holidays. The floating holidays are available to all full-time, regular employee to be taken off on either the day of the holiday, or on a different day following the date of the holiday as chosen by the employee. These four floating holidays allow employees to have additional paid leave to cover absences for personal reasons, such as religious observances or parent-teacher conferences, or to supplement ~~vacation, sick~~ PTO and holiday leave.

Employees are eligible for the designated floating holidays that occur after their start-date with the organization. The designated floating holidays are:

- Martin Luther King Day
- Presidents' Day
- Columbus Day
- Veteran's Day

Floating holidays may only be used to cover full-day absences. They must be taken in the calendar year in which given, and on or after the date of the floating holiday. Under no circumstances will these days be carried over to the next calendar year, nor may they be cashed out if not taken or paid upon termination of employment.

A floating holiday must be scheduled and approved in advance by the employee's supervisor.

3-3 Paid Time Off For Full-Time Employees

We know how hard you work and recognize the importance of providing you with time for rest, relaxation, illness, well-care and other appointments. We fully encourage you to get this rest and take care of yourself and your family by taking your paid time off. The paid time off (PTO) program combines vacation, sick and personal leave benefits into one comprehensive plan. PTO may be taken for any purpose including: vacation, personal illness or time off to care for dependents.

All full-time employees will be eligible for PTO benefits. PTO leave will accrue beginning on the first day of employment. Any employee hired before the end of the first half of the calendar year receives eighteen (18) PTO days; any employee hired during the second half of the calendar year receives nine (9) PTO days. All eligible employees will receive an annual PTO accrual based on length of service on January 1st of each year, thereafter. To offer employees an incentive to stay with the CMHPSM, PTO annual accrual amounts will increase based on length of service and is earned according to the following schedule:

Length of service	Annual PTO Accrual
0-2 years	18 days per year (1.5 days per month)
3-5 years	21 days per year (1.75 days per month)
6-7 or more years	24 days per year (2.0 days per month)
8-9 years	27 days per year (2.25 days per month)
10 or more years	30 days per year (2.5 days per month)

A maximum of ~~seventwo~~ (72) days or ~~fifty-six~~~~sixteen~~ (546) hours of PTO time not used prior to December 31st may be carried into the ~~flowing~~~~following~~ calendar year. Under no circumstances shall an employee begin the calendar year with more the 546 hours of PTO in addition to their annual accrued amount determined by the length of service (see table above).

PTO days may be taken in half-day or full-day increments.

Employees must ensure that they have enough accrued PTO available to cover the dates requested. All paid PTO leave hours must be exhausted before non-paid time may be used. If paid leave has been exhausted, one (or more) full day(s) will be deducted from an employee's salary for absences from work.

Employees may not take more than two consecutive weeks of paid leave at a time without written approval of the Chief Executive Officer. Limiting the amount of leave taken is intended to allow for better planning of coverage of work activities while the employee is absent.

Employees must receive supervisory approval for PTO use in advance via the Employee Leave Request Form, except in the case of illness or emergency. In the case of illness or emergency, the employee should submit a leave request upon returning to the office. When possible, these leave requests should be made at least two (2) weeks in advance of the requested leave. Requests shall be approved/denied by the employee's supervisor within three (3) business days of the request. Every effort will be made to grant your request, however, if too many people request the same period of time off, CMHPSM reserves the right to choose who may take time off during that period. Individuals with the longest length of service generally will be given preference. If the request for time off is denied, the supervisor should provide an appropriate reason on the form returned to the employee.

Requests should be made to the supervisor with as much advance notice as possible, with a minimum of one (1) day notice for any absence that will disrupt a work assignment or a deadline. Requests shall be approved/denied by the employee's supervisor within three (3)

business days of the request. For scheduled time off, an employee must find coverage for any activities, duties or responsibilities that need to be addressed in their absence.

An employee who finds it necessary to use PTO for an emergency must notify their supervisor no later than two (2) hours after the start of the work day, if possible. In case of emergency, an employee must notify their supervisor of any activities, duties or responsibilities that will need to be covered. CMHPSM may require the employee to provide verification of the emergency.

Paid time off will be paid at the employee's base rate at the time the leave is taken. If a holiday falls during the employee's time off, the day will be charged to holiday leave rather than to PTO.

Employees returning to work from an illness or leave of absence may be required by their supervisor to submit a statement from their physician verifying their ability to work.

PTO is not accrued while an employee is on unpaid leave or when short- or long-term disability benefits are paid. A pro-rated adjustment to the annual accrual will be made in accordance with the length of the leave.

3-4 Paid Time Off For Part Time Employees

Part-time employees are those who are hired to work less than 40 hours per week. Part-time employees receive no benefits other than Paid Time Off (PTO), the amount of which is pro-rated based on the average number of hours for which the position was created. For example, a person hired into a part time 20-hour per week position during the first half of the year is eligible for 72 hours of PTO according to the PTO standards in the Employee Handbook related to start date of employment.

3-5 Paid Time Off Donation

Regular employees shall be allowed to donate up to 8 hours of paid time off (PTO) to another regular employee who has experienced a qualifying event, as determined by the CEO. Qualifying events may include a medical emergency, the care for an immediate family member in the event of a medical emergency, or the need for extended time off following the death of an immediate family member.

PTO hours may be donated in increments of either 4 hours or 8 hours, with 8 hours being the maximum allowable hours to be donated per qualifying event.

Donated PTO hours must be used by the recipient employee in the same calendar year in which the PTO hours were donated.

To be eligible for the receipt of a PTO donation, the recipient employee must have exhausted all of his or her own paid leave time (including PTO and employer-sponsored short-term and/or

long-term disability), must complete a written request, and must have the scheduled time off or leave of absence approved by the CMHPSM.

PTO must be donated to a specific recipient employee. Once surrendered, PTO cannot be returned to the donor employee, but will remain available for use by the specific recipient employee.

If a recipient employee receives PTO hours from a donor employee with a different pay rate, the PTO hours will be converted based on the recipient employee's pay rate, so that the dollar value of the surrendered leave remains the same, but leave taken by the recipient employee is always paid at the recipient employee's regular rate of pay.

It is the responsibility of each employee to monitor his or her PTO bank to ensure that adequate PTO time is available to allow for a donation.

3-6 Lactation Breaks

The CMHPSM will provide a reasonable amount of break time to accommodate an employee desiring to express breast milk for the employee's infant child, in accordance with and to the extent required by applicable law. The break time, if possible, must run concurrently with rest and meal periods already provided to the employee. If the break time cannot run concurrently with rest and meal periods already provided to the employee, the break time will be unpaid, subject to applicable law.

The CMHPSM will make reasonable efforts to provide employees with the use of a room or location other than a toilet stall for the employee to express milk in private. This location may be the employee's private office, if applicable. The CMHPSM may not be able to provide additional break time if doing so would seriously disrupt the CMHPSM's operations, subject to applicable law. Please consult the [Human Resources Department Regional Coordinator](#) if you have questions regarding this policy.

Employees should advise management if they need break time and an area for this purpose. Employees will not be discriminated against or retaliated against for exercising their rights under this policy.

3-7 Workers' Compensation

On-the-job injuries are covered by our Workers' Compensation Insurance Policy, which is provided at no cost. If employees are injured on the job, no matter how slightly, they should report the incident immediately to their Supervisor. Failure to follow CMHPSM procedures may affect the ability of the employee to receive Workers Compensation benefits.

This is solely a monetary benefit and not a leave of absence entitlement. Employees who need to miss work due to a workplace injury must also request a formal leave of absence. See the Leave of Absence sections of this handbook for more information.

3-8 Jury Duty

Community Mental Health Partnership of Southeast Michigan realizes that it is the obligation of all U.S. citizens to serve on a jury when summoned to do so. All employees will be allowed time off to perform such civic service as required by law. Employees are expected, however, to provide proper notice of a request to perform jury duty and verification of their service.

Employees also are expected to keep management informed of the expected length of jury duty service and to report to work for the major portion of the day if excused by the court. If the required absence presents a serious conflict for management, employees may be asked to try to postpone jury duty.

Employees on jury duty leave will be paid for their jury duty service in accordance with state law; however, exempt employees will be paid their full salary for any week in which time is missed due to jury duty if work is performed for the CMHPSM during such week.

3-9 Bereavement Leave

Regular employees shall be granted bereavement leave with pay in the event of a death in the immediate family*. Employees shall be granted three (3) days of paid leave in cases when death has occurred in the immediate family. In cases of a death of a spouse, domestic partner, parent, sibling and children of the employee or the employee's spouse, an additional two (2) days of paid leave shall be granted to the employee.

An employee who wishes to take time off due to the death of an immediate family member should notify their supervisor immediately. Bereavement leave will be granted unless there are unusual business needs or staffing requirements.

The Chief Executive Officer may grant funeral leave to employees to attend the funeral of another CMHPSM or Regional employee.

*For purposes of this policy, immediate family is defined as: spouse, domestic partner, parent, brother, sister, child, stepchild, mother-in-law, father-in-law, sister-in-law, brother-in-law, aunts, uncles, nieces, nephews, grandparents, spouse's grandparents, parents and grandparents of employee's minor children, or someone with whom the employee has a legal relationship or a related member in an employee's household and all such relatives of one's spouse.

3-10 Voting Leave

In the event an employee does not have sufficient time outside of working hours to vote in a statewide election, if required by state law, the employee may take off enough working time to vote. Such time will be paid if required by state law. This time should be taken at the beginning or end of the regular work schedule. Where possible, your Supervisor should be notified at least two days prior to the voting day.

3-11 Insurance Programs

CMHPSM currently offers a flexible benefit program for all regular employees. This program allows each employee to choose those benefits that best meet their individual needs. The program year for the plan is December 1 through November 30, and is renewed on an annual basis.

For more information regarding benefits programs or who is eligible for coverage, please contact the Regional Coordinator.

Medical and Dental Insurance

CMHPSM currently offers regular full-time employees enrollment in medical and dental insurance coverage options as specified in plan documents. Employees have up to 30 days from their date of hire to make medical and dental plan elections. Once made, elections are fixed for the remainder of the plan year.

All qualified changes in family status (births, marriages, etc.) which may affect coverage must be reported to the Regional Coordinator within thirty (30) days of the event. It is the responsibility of the employee to notify CMHPSM of all changes. Please contact the Regional Coordinator to determine if a family status change qualifies under the Plan document and IRS regulations.

The Regional Coordinator is available to answer benefits plan questions and assist in enrollment as needed.

The terms of the insurance policies control the benefits provided thereunder and the employee's eligibility for benefits. CMHPSM reserves and retains the unilateral right to amend or terminate any benefit, benefit level, employer contribution or benefit plan. In the event there arises any conflict between this summary and the plan documents, the plan documents control.

Vision Insurance

CMHPSM's current vision plan covers employees' standard eye care examinations, lenses, frames, or contacts. Certain limitations apply and not all optical centers accept the current plan. A more detailed explanation of the plan and locations of optical centers that accept the CMHPSM plan are available in the summary plan booklet provided by the insurance company.

The terms of the insurance policies control the benefits provided thereunder and the employee's eligibility for benefits. CMHPSM reserves and retains the unilateral right to amend or terminate any benefit, benefit level, employer contribution or benefit plan. In the event there arises any conflict between this summary and the plan documents, the plan documents control.

Life and Accidental Death & Dismemberment Insurance

CMHPSM currently offers regular full-time employees an employer-paid basic group term life policy along with an accidental death and dismemberment policy. The terms of the insurance policies control the benefits provided thereunder and the employee's eligibility for benefits. CMHPSM reserves and retains the unilateral right to amend or terminate any benefit, benefit level, employer contribution or benefit plan. In the event there arises any conflict between this summary and the plan documents, the plan documents control. The Regional Coordinator is available to answer benefits plan questions and assist in enrollment as needed.

3-12 Domestic Partner Benefits

CMHPSM acknowledges the needs of a diverse workforce and fairness in providing benefits to our employees, their dependents, and their spouses and domestic partners.

Domestic partners are those individuals who meet the following criteria:

- At least 18 years old and mentally competent to consent to a contract.
- Not legally married to anyone.
- Not related by blood to a degree of closeness that would prohibit legal marriage in the State of Michigan.
- Have entered into the domestic partner relationship voluntarily and without reservation.
- Are jointly responsible for each other's common welfare and shared financial obligations.
- Intend to continue the domestic partner relationship indefinitely, with the understanding that the relationship can be terminated at any time by either partner.

Employees who wish to apply for domestic partner benefits must complete an Affidavit of Domestic Partnership. The original form will be kept in the Regional Coordinator's office. This original form will be kept on file indefinitely with CMHPSM and will be deemed effective until one of the following occurs:

- The employee changes the partner designation by completing a new Affidavit of Domestic Partnership and returns the new form to CMHPSM.
- The employee requests removal of the document and completes an Affidavit of Termination of Domestic Partnership.

Benefits coverage for the domestic partner and his or her dependents will terminate at the end of the month in which the relationship ended.

3-13 Short-Term and Long-Term Disability Benefits

Full-time employees are eligible to participate in the short-term and long-term disability plans, subject to all terms and conditions of the agreement between the CMHPSM and the insurance carrier.

This is solely a monetary benefit and not a leave of absence. Employees who will be out of work must also request a formal Leave of Absence. See the Leave of Absence sections of this handbook for more information.

Employees will be required to submit medical certification as requested by -short term or long term disability insurance carrier and/or the CMHPSM. Required medical certification under this policy may differ from the medical certification required for any leave of absence requested.

3-14 Employee Assistance Program

The CMHPSM recognizes that a wide range of problems - such as marital or family distress, alcoholism, and drug abuse - not directly associated with an individual's job function can nonetheless be detrimental to an employee's performance on the job. Consequently, we believe it is in the interest of employees and the Company to provide an effective program to assist employees and their families in resolving problems such as these as the need arises. To this end, the Company provides an Employee Assistance Program (EAP) for employees and their eligible family members. The EAP is designed to provide voluntary, private, confidential, and professional counseling outside the workplace for any type of personal problem. The EAP provides consultation services for referrals to local community treatment sources. All employees are eligible to use this program and are encouraged to do so. Employee visits to the EAP are held in confidence to the maximum possible extent.

Participation in the EAP does not excuse employees from otherwise complying with Company policies or from meeting normal job requirements during or after receiving assistance. Nor will participation in our employee assistance program prevent the Company from taking disciplinary action against any employee for performance problems that occur before, during, or after the employee seeks assistance through the program.

Further details can be obtained by [referring to the EAP guide that is posted in the Documents section of Paychex and also in the Benefit Resources section of the HUB Benefit Spot mobile app](#), [contacting an EAP counselor at \(855\) 268-1006](#).

3-15 Retirement Plan

Eligible employees are strongly encouraged to enroll in the CMHPSM's 401(a)/457 defined contribution retirement plan and must initiate enrollment. The CMHPSM will match at a minimum- 3% of the employee's gross wages with an employer contribution equal to 100% of the employee's contribution. The CMHPSM will match an employee's contribution from 4% up to 6% of the employee's gross wages with an employer contribution equal to the 50% employee's contribution. Upon becoming eligible to participate in the retirement plan, an employee will be provided with communication about the retirement plan, the CMHPSM's contributions, vesting requirements, and an employee's right to opt-out of the retirement plan.

Employee Contribution	Employer Match of Employee Contribution %
N/A, Less than 3% of gross wages	N/A (A minimum employee contribution of 3% is required to be enrolled into the CMHPSM retirement plan.)
Minimum 3% of gross wages	100% Match of employee contribution
Greater than 3% up to 6% of gross wages	50% Match of employee contribution
Greater than 6% of Salary	0%

Employee Contribution Example	Employer Contribution Example (% of Employee Annual Salary)	Total Employee and Employer Contribution
Minimum 3%	3% of Employee Salary	6%
4%	3.5% of Employee Salary	7.5%
5%	4% of Employee Salary	9%
6%	4.5% of Employee Salary	10.5%
>6%*	Maximum employer contribution 4.5% of employee salary.	Employee contribution + 4.5%

- Employee contribution may not exceed IRS retirement plan maximum annual contribution limits. Contact the Regional Coordinator for current tax year information.

CMHPSM reserves and retains the unilateral right to amend or terminate any benefit, benefit level, employer contribution or benefit plan. In the event there arises any conflict between this summary and the plan documents, the plan documents control.

Section 4 - Leaves of Absence

4-1 Personal Leave

If employees are ineligible for any other CMHPSM leave of absence, the Community Mental Health Partnership of Southeast Michigan, under certain circumstances, may grant a personal leave of absence without pay. A written request for a personal leave should be presented to management at least two (2) weeks before the anticipated start of the leave. If the leave is requested for medical reasons and employees are not eligible for leave under the federal Family and Medical Leave Act (FMLA) or any state leave law, medical certification also must be submitted. The request will be considered on the basis of staffing requirements and the reasons for the requested leave, as well as performance and attendance records. Normally, a leave of absence will be granted for a period of up to eight (8) weeks. However, a personal leave may be extended if, prior to the end of leave, employees submit a written request for an extension to management and the request is granted. We will continue health insurance coverage during the leave if employees submit their share of the monthly premium payments to the CMHPSM in a timely manner, subject to the terms of the plan documents.

When the employee anticipates returning to work, he or she should notify management of the expected return date. This notification should be made at least one week before the end of the leave.

Upon completion of the personal leave of absence, the CMHPSM will attempt to return employees to their original job or a similar position, subject to prevailing business considerations. Reinstatement, however, is not guaranteed.

Failure to advise management of availability to return to work, failure to return to work when notified or a continued absence from work beyond the time approved by the CMHPSM will be considered a voluntary resignation of employment.

Personal leave runs concurrently with any CMHPSM-provided Short-Term Disability Leave of Absence.

4-2 Military Leave

If employees are called into active military service or enlist in the uniformed services, they will be eligible to receive an unpaid military leave of absence. To be eligible for military leave, employees must provide management with advance notice of service obligations unless they are prevented from providing such notice by military necessity or it is otherwise impossible or unreasonable to provide such notice. Provided the absence does not exceed applicable statutory limitations, employees will retain reemployment rights and accrue seniority and benefits in accordance with applicable federal and state laws. Employees should ask management for further information about eligibility for Military Leave.

If employees are required to attend yearly Reserves or National Guard duty, they can apply for an unpaid temporary military leave of absence not to exceed the number of days allowed by law (including travel). They should give management as much advance notice of their need for military leave as possible so that we can maintain proper coverage while employees are away.

Section 5 - General Standards of Conduct

5-1 Workplace Conduct

Community Mental Health Partnership of Southeast Michigan endeavors to maintain a positive work environment. Each employee plays a role in fostering this environment. Accordingly, we all must abide by certain rules of conduct, based on honesty, common sense and fair play.

Because everyone may not have the same idea about proper workplace conduct, it is helpful to adopt and enforce rules all can follow. Unacceptable conduct may subject the offender to disciplinary action, up to and including discharge, in the CMHPSM's sole discretion. The following are examples of some, but not all, conduct which can be considered unacceptable:

1. Obtaining employment on the basis of false or misleading information.
2. Stealing, removing or defacing Community Mental Health Partnership of Southeast Michigan property or a co-worker's property, and/or disclosure of confidential information.
3. Completing another employee's time records.
4. Violation of safety rules and policies.
5. Violation of Community Mental Health Partnership of Southeast Michigan's Drug and Alcohol-Free Workplace Policy.
6. Fighting, threatening or disrupting the work of others or other violations of Community Mental Health Partnership of Southeast Michigan's Workplace Violence Policy.
7. Failure to follow lawful instructions of a supervisor.
8. Failure to perform assigned job duties.
9. Violation of the Punctuality and Attendance Policy, including but not limited to irregular attendance, habitual lateness or unexcused absences.
10. Gambling on CMHPSM property.
11. Willful or careless destruction or damage to CMHPSM assets or to the equipment or possessions of another employee.
12. Wasting work materials.
13. Performing work of a personal nature during working time.
14. Violation of the Solicitation and Distribution Policy.
15. Violation of Community Mental Health Partnership of Southeast Michigan's Harassment or Equal Employment Opportunity Policies.
16. Violation of the Communication and Computer Systems Policy.
17. Unsatisfactory job performance.
18. Any other violation of Company policy.

Progressive Discipline Process:

First Occurrence: Verbal warning and notation in personnel file

Second Occurrence: Written warning, included in personnel file

Third Occurrence: Three-day unpaid suspension & final written warning, included in personnel file

Fourth Occurrence: Subjected to termination of employment

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Following are examples of conduct which will be cause for immediate discharge upon the first offense:

1. Possession of firearms or other weapons on office premises
2. Unauthorized possession, use or distribution of drugs or controlled substances
3. Theft or attempted theft
4. Gross neglect of duties
5. Insubordination or refusal to follow instructions
6. Falsification of records

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Obviously, not every type of misconduct can be listed. Note that all employees are employed at-will, and the Community Mental Health Partnership of Southeast Michigan reserves the right to impose whatever discipline it chooses, or none at all, in a particular instance. The CMHPSM will deal with each situation individually and nothing in this handbook should be construed as a promise of specific treatment in a given situation. However, Community Mental Health Partnership of Southeast Michigan will endeavor to utilize progressive discipline but reserves the right in its sole discretion to terminate an employee at any time for any reason.

The observance of these rules will help to ensure that our workplace remains a safe and desirable place to work.

5-2 Open Communication

CMHPSM is committed to creating the best work environment – a place where everyone's voice is heard, where issues are promptly raised and resolved, and where communication flows across all levels of the organization. Openness is essential to quickly resolve concerns, to recognize business issues as they arise, and to address the changing needs of our diverse workforce.

The essence of the CMHPSM's Open Communication Policy is open communication in an environment of trust and mutual respect that creates a solid foundation for collaboration, growth, high performance and success across CMHPSM and its partner agencies.

It provides for a work environment where:

- Open, honest, appropriate, professional communication between employees and managers is a day-to-day business practice
- Employees may seek counsel, provide or solicit feedback, or raise concerns within the organization
- Managers hold the responsibility for creating a work environment where employees' professional and constructive input is welcome, advice is freely given, and issues

are surfaced early and are candidly shared without the fear of retaliation when this input is shared in good faith

The CMHPSM encourages employees to discuss any issues they may have with a coworker or supervisor directly with that person in an appropriate manner. If a resolution is not reached, employees should arrange a meeting with their supervisor. If the concern, problem, or issue is not properly addressed, employees should contact the Regional Coordinator. Retaliation against any employee for appropriate usage of Open Communication channels is unacceptable.

The CMHPSM seeks to deal openly and directly with its employees, and believes that communication between employees and management is critical to solving problems. Coworkers that may have a problem with one another should attempt to resolve the problem themselves. If a resolution cannot be agreed upon, both employees should approach the CEO, who will work with the employees to determine a resolution. In these instances, the decision of the CEO is final. Employees that have a problem with the CEO should address the concern directly with the CEO.

If you have a question or wish to discuss a possible violation, you should first discuss it with your supervisor. If you are not comfortable with that approach for any reason, or if no action is taken, please contact the Regional Coordinator.

5-3 Punctuality and Attendance

Employees are hired to perform important functions at the Community Mental Health Partnership of Southeast Michigan. As with any group effort, operating effectively takes cooperation and commitment from everyone. Therefore, attendance and punctuality are very important. Unnecessary absences and lateness are expensive, disruptive and place an unfair burden on fellow employees and Supervisors. We expect excellent attendance from all employees. Excessive absenteeism or tardiness will result in disciplinary action up to and including discharge.

We do recognize, however, there are times when absences and tardiness cannot be avoided. In such cases, employees are expected to notify Supervisors as early as possible, but no later than the start of the work day. Asking another employee, friend or relative to give this notice is improper and constitutes grounds for disciplinary action. Employees should contact their Supervisor, stating the nature of their illness or situation and its expected duration, for every day of absenteeism.

Unreported absences of three (3) consecutive work days generally will be considered a voluntary resignation of employment with the CMHPSM.

5-4 Use of Communications and Computer Systems

The Community Mental Health Partnership of Southeast Michigan's communication and computer systems are intended primarily for business purposes; however limited personal usage is permitted if it does not hinder performance of job duties or violate any other CMHPSM policy. This includes the voice mail, e-mail and Internet systems. Users have no legitimate expectation of privacy in regard to their use of the Community Mental Health Partnership of Southeast Michigan systems.

The Community Mental Health Partnership of Southeast Michigan may access the voice mail and e-mail systems and obtain the communications within the systems, including past voice mail and e-mail messages, without notice to users of the system, in the ordinary course of business when the CMHPSM deems it appropriate to do so. The reasons for which the CMHPSM may obtain such access include, but are not limited to: maintaining the system; preventing or investigating allegations of system abuse or misuse; assuring compliance with software copyright laws; complying with legal and regulatory requests for information; and ensuring that CMHPSM operations continue appropriately during an employee's absence.

Further, the Community Mental Health Partnership of Southeast Michigan may review Internet usage to ensure that such use with CMHPSM property, or communications sent via the Internet with CMHPSM property, are appropriate. The reasons for which the CMHPSM may review employees' use of the Internet with CMHPSM property include, but are not limited to: maintaining the system; preventing or investigating allegations of system abuse or misuse; assuring compliance with software copyright laws; complying with legal and regulatory requests for information; and ensuring that CMHPSM operations continue appropriately during an employee's absence.

The CMHPSM may store electronic communications for a period of time after the communication is created. From time to time, copies of communications may be deleted.

The CMHPSM's policies prohibiting harassment, in their entirety, apply to the use of CMHPSM's communication and computer systems. No one may use any communication or computer system in a manner that may be construed by others as harassing or offensive based on race, national origin, sex, sexual orientation, age, disability, religious beliefs or any other characteristic protected by federal, state or local law.

Further, since the CMHPSM's communication and computer systems are intended for business use, all employees, upon request, must inform management of any private access codes or passwords.

Unauthorized duplication of copyrighted computer software violates the law and is strictly prohibited.

No employee may access, or attempt to obtain access to, another employee's computer systems without appropriate authorization.

Violators of this policy may be subject to disciplinary action, up to and including discharge.

5-5 Use of Social Media

The Community Mental Health Partnership of Southeast Michigan respects the right of any employee to maintain a blog or web page or to participate in a social networking, including but not limited to Twitter, Instagram, SnapChat, Facebook and LinkedIn. However, to protect the CMHPSM interests and ensure employees focus on their job duties, employees must adhere to the following rules:

Employees may not post on a blog or web page or participate on a social networking platform, such as Twitter, Instagram, SnapChat, Facebook, LinkedIn or similar sites, during work time or at any time with CMHPSM equipment or property.

All rules regarding confidential and proprietary business information apply in full to blogs, web pages and social networking platforms, such as Twitter, Instagram, SnapChat, Facebook, LinkedIn or similar sites. Any information that cannot be disclosed through a conversation, a note or an e-mail also cannot be disclosed in a blog, web page or social networking site.

Whether an employee is posting something on his or her own blog, web page, social networking, Twitter, Instagram, SnapChat, Facebook, LinkedIn or similar site or on someone else's, if the employee mentions the CMHPSM and also expresses either a political opinion or an opinion regarding the CMHPSM's actions that could pose an actual or potential conflict of interest with the CMHPSM, the poster must include a disclaimer. The poster should specifically state that the opinion expressed is his/her personal opinion and not the CMHPSM's position. This is necessary to preserve the CMHPSM's good will in the marketplace.

Any conduct that is impermissible under the law if expressed in any other form or forum is impermissible if expressed through a blog, web page, social networking, Twitter or similar site. For example, posted material that is discriminatory, obscene, defamatory, libelous or violent is forbidden. CMHPSM policies apply equally to employee social media usage.

The Community Mental Health Partnership of Southeast Michigan encourages all employees to keep in mind the speed and manner in which information posted on a blog, web page, and/or social networking site is received and often misunderstood by readers. Employees must use their best judgment. Employees with any questions should review the guidelines above and/or consult with their manager. Failure to follow these guidelines may result in discipline, up to and including discharge.

5-6 Personal and Company-Provided Portable Communication Devices

CMHPSM-provided portable communication devices (PCDs), including cell phones and ~~personal digital assistants~~ laptops, should be used primarily for business purposes. Employees have no reasonable expectation of privacy in regard to the use of such devices, and all use is subject to monitoring, to the maximum extent permitted by applicable law. This includes as permitted the right to monitor personal communications as necessary.

Some employees may be authorized to use their own PCD for business purposes. These employees should work with the IT department to configure their PCD for business use. Communications sent via a personal PCD also may subject to monitoring if sent through the CMHPSM's networks and the PCD must be provided for inspection and review upon request.

All conversations, text messages and e-mails must be professional. When sending a text message or using a PCD for business purposes, whether it is a CMHPSM-provided or personal device, employees must comply with applicable CMHPSM guidelines, including policies on sexual harassment, discrimination, conduct, confidentiality, equipment use and operation of vehicles. Using a CMHPSM-issued PCD to send or receive personal text messages is prohibited at all times and personal use during working hours should be limited to emergency situations.

If an employee who uses a personal PCD for business resigns or is discharged, the employee will be required to submit the device to the IT department for resetting on or before his or her last day of work. At that time, the IT department will reset and remove all information from the device, including but not limited to, CMHPSM information and personal data (such as contacts, e-mails and photographs). The IT department will make efforts to provide employees with the personal data in another form (e.g., on a disk) to the extent practicable; however, the employee may lose some or all personal data saved on the device.

Employees may not use their personal PCD for business unless they agree to submit the device to the IT department on or before their last day of work for resetting and removal of CMHPSM information. This is the only way currently possible to ensure that all CMHPSM information is removed from the device at the time of termination. The removal of CMHPSM information is crucial to ensure compliance with the CMHPSM's confidentiality and proprietary information policies and objectives.

Please note that whether employees use their personal PCD or a CMHPSM-issued device, the CMHPSM's electronic communications policies, including but not limited to, proper use of communications and computer systems, remain in effect. [Michigan's Freedom of Information Act \(FOIA\) applies to all work related conversations whether they occur on a personal or CMHPSM issued communication device. Employees shall not attempt to evade FOIA requirements by utilizing non-CMHPSM communication devices or services.](#)

Portable Communication Device Use While Driving

Employees who drive on CMHPSM business must abide by all state or local laws prohibiting or limiting PCD (cell phone or personal digital assistant) use while driving. Further, even if usage is permitted, employees may choose to refrain from using any PCD while driving. "Use" includes, but is not limited to, talking or listening to another person or sending an electronic or text message via the PCD.

Regardless of the circumstances, including slow or stopped traffic, if any use is permitted while driving, employees should proceed to a safe location off the road and safely stop the vehicle before placing or accepting a call. If acceptance of a call is absolutely necessary while the employee is driving, and permitted by law, the employee must use a hands-free option and advise the caller that he/she is unable to speak at that time and will return the call shortly.

Under no circumstances should employees feel that they need to place themselves at risk to fulfill business needs.

Since this policy does not require any employee to use a cell phone while driving, employees who are charged with traffic violations resulting from the use of their PCDs while driving will be solely responsible for all liabilities that result from such actions.

Texting and e-mailing while driving is prohibited in all circumstances.

5-7 Inspections

Community Mental Health Partnership of Southeast Michigan reserves the right to require employees while on CMHPSM property, or on client property, to agree to the inspection of their persons, personal possessions and property, personal vehicles parked on CMHPSM or client property, and work areas. This includes lockers, vehicles, desks, cabinets, work stations, packages, handbags, briefcases and other personal possessions or places of concealment, as well as personal mail sent to the CMHPSM or to its clients. Employees are expected to cooperate in the conduct of any search or inspection.

5-8 Smoking

NO use of tobacco or smoking, including the use of e-cigarettes, will be allowed anywhere in any CMHPSM building or property. CMHPSM is a tobacco-free and smoke-free work place

for the health, safety and well-being of all of its employees and visitors. The tobacco-free workplace policy applies to:

- All employees, temporary employees and student interns.
- All visitors (e.g. consumers or vendors) to the company premises.
- All contractors and consultants and/or their employees working on the company premises.
- All areas of CMHPSM buildings and adjacent parking areas.
- All CMHPSM-sponsored off-site conferences and meetings.

Employees who violate this policy will be subject to disciplinary action up to and including immediate discharge.

5-9 Personal Mail

Personal mail should not be addressed to CMHPSM addresses. You may not use CMHPSM postage or other CMHPSM property for personal business.

5-10 Personal Visits and Telephone Calls

Disruptions during work time can lead to errors and delays. Therefore, we ask that personal telephone calls be kept to a minimum, and only be made or received after working time, or during lunch or break time.

Friends, relatives and children of employees are not allowed in the working areas without signing in. All visitors will be escorted through the offices once notified of a visitor's arrival. It will be your responsibility to ensure the confidentiality of business and consumer information in accordance with the confidentiality policy.

5-11 Solicitation and Distribution

To avoid distractions, solicitation by an employee of another employee is prohibited while either employee is on work time. "Work time" is defined as the time an employee is engaged, or should be engaged, in performing his/her work tasks for Community Mental Health Partnership of Southeast Michigan. Solicitation of any kind by non-employees on CMHPSM premises is prohibited at all times.

Distribution of advertising material, handbills, printed or written literature of any kind in working areas of the CMHPSM is prohibited at all times. Distribution of literature by non-employees on CMHPSM premises is prohibited at all times.

5-12 Confidential Company Information

During the course of work, an employee may become aware of confidential information about the Community Mental Health Partnership of Southeast Michigan's business, including but not limited to information regarding CMHPSM finances, pricing, products and new product development, software and computer programs, marketing strategies, suppliers and customers and potential customers. An employee also may become aware of similar confidential information belonging to the CMHPSM's clients. It is extremely important that all such information remain confidential, and particularly not be disclosed to our competitors. Any employee who improperly copies, removes (whether physically or electronically), uses or discloses confidential information to anyone outside of the CMHPSM may be subject to disciplinary action up to and including termination. Employees may be required to sign an agreement reiterating these obligations.

5-13 Conflict of Interest and Business Ethics

It is the Community Mental Health Partnership of Southeast Michigan's policy that all employees avoid any conflict between their personal interests and those of the CMHPSM. The purpose of this policy is to ensure that the CMHPSM's honesty and integrity, and therefore its reputation, are not compromised. The fundamental principle guiding this policy is that no employee should have, or appear to have, personal interests or relationships that actually or potentially conflict with the best interests of the CMHPSM.

It is not possible to give an exhaustive list of situations that might involve violations of this policy. However, the situations that would constitute a conflict in most cases include but are not limited to:

1. holding an interest in or accepting free or discounted goods from any organization that does, or is seeking to do, business with the CMHPSM, by any employee who is in a position to directly or indirectly influence either the CMHPSM's decision to do business, or the terms upon which business would be done with such organization;
2. holding any interest in an organization that competes with the CMHPSM;
3. being employed by (including as a consultant) or serving on the board of any organization which does, or is seeking to do, business with the CMHPSM or which competes with the CMHPSM; and/or
4. profiting personally, e.g., through commissions, loans, expense reimbursements or other payments, from any organization seeking to do business with the CMHPSM.

A conflict of interest would also exist when a member of an employee's immediate family is involved in situations such as those above.

This policy is not intended to prohibit the acceptance of modest courtesies, openly given and accepted as part of the usual business amenities, for example, occasional business-related meals or promotional items of nominal or minor value.

It is your responsibility to report any actual or potential conflict that may exist between you (and your immediate family) and the CMHPSM. See the CMHPSM Conflict of Interest policy for more details.

5-14 Political Activity

Every employee has the right to freely express his or her views as a citizen and to cast a vote as he or she may wish. Coercion for political purposes is strictly prohibited. Employees of federally aided programs are, however, prohibited from participation in partisan political activity under the Federal Hatch Political Activities Act.

No employee shall engage in any partisan political activity or campaigning for a non-partisan elective office during scheduled working hours or while on duty or while off duty wearing a uniform or other identifying insignia of CMHPSM or employment. Solicitation of signatures or contributions or nominating petitions is prohibited during working hours. No employee shall be required to engage in a campaign for election of any candidate. CMHPSM Board and employees are not permitted to use agency funds or resources to contribute to political campaigns or activities of any political party.

5-154 Outside Employment

While we hope that employment with the CMHPSM is fully rewarding to you and it is generally discouraged to have outside employment, employees may engage in outside or supplemental employment in accordance with the following limitations. In no case shall outside or supplemental employment conflict with or impair your responsibilities to the CMHPSM.

Any employee desiring to participate in outside or supplemental employment must obtain permission of the Chief Executive Officer in writing prior to engaging in outside or supplemental employment. All employees engaged in outside or supplemental employment shall:

- Not compete with, conflict with or compromise CMHPSM interests or adversely affect job performance and the ability to fulfill all job responsibilities.
- Nor perform any services for customers that are normally performed by CMHPSM.
- Not use of any CMHPSM facilities, supplies, files or equipment including the unauthorized use or application of any confidential information.
- Not solicit or conduct any outside business during paid working time nor use CMHPSM facilities or staff as a source of referral for private customers or clients,
- Not use the name of the CMHPSM as a reference or credential in advertising or soliciting customers or clients.
- Maintain a clear separation of outside or supplemental employment from activities performed for CMHPSM, and

- Not cause any incompatibility, conflict of interest, or any possible appearance of conflict of interest, or any impairment of the independent and impartial performance of employee's duties.

CMHPSM shall not be liable, either directly or indirectly for any activities performed during outside or supplemental employment.

You are cautioned to carefully consider the demands that additional work activity will create before accepting outside employment. Outside employment will not be considered an excuse for poor job performance, absenteeism, tardiness, leaving early, refusal to travel or refusal to work overtime or different hours. If CMHPSM determines that an employee's outside work interferes with performance, the employee may be asked to terminate the outside employment.

5-165 Use of Facilities, Equipment and Property, Including Intellectual Property

Equipment essential in accomplishing job duties is often expensive and may be difficult to replace. When using property, employees are expected to exercise care, perform required maintenance, and follow all operating instructions, safety standards and guidelines.

Employees should notify their Supervisor if any equipment, machines, or tools appear to be damaged, defective, or in need of repair. Prompt reporting of loss, damages, defects, and the need for repairs could prevent deterioration of equipment and possible injury to employees or others. The Supervisor can answer any questions about an employee's responsibility for maintenance and care of equipment used on the job.

Employees also are prohibited from any unauthorized use of the CMHPSM's intellectual property, such as audio and video tapes, print materials and software. A CMHPSM employee who creates intellectual property in the normal course of their duties cannot claim to own that intellectual property.

Improper, careless, negligent, destructive, or unsafe use or operation of equipment can result in discipline, up to and including discharge.

Further, the CMHPSM is not responsible for any damage to employees' personal belongings unless the employee's Supervisor provided advance approval for the employee to bring the personal property to work.

5-16 Washtenaw County Building Policies and Procedure

~~All CMHPSM staff will follow all applicable Washtenaw County building policies and procedures while working in a Washtenaw County owned facility. Communications related to Washtenaw County building policies or procedures will be forwarded to all CMHPSM staff.~~

- ~~● CMHPSM employees shall follow all posted safety requirements within Washtenaw County owned office space.~~
- ~~● CMHPSM employees shall not alter any physical structures, appearance of walls, windows, flooring, etc within the general CMHPSM office space or personal workspaces without prior approval.~~
- ~~● CMHPSM employees shall not utilize, store or install any items which Washtenaw County has determined to be a health or safety risk. Items include but are not limited to: space heaters, items with an open flame or any other items that Washtenaw County or the CMHPSM CEO determines to be a building health or safety risk.~~
- ~~● All CMHPSM employees shall consult with the CMHPSM's representative on Washtenaw County's building safety committee for further information related to Washtenaw County Building policies and procedures.~~

5-17 Building Access Identification Cards and Sign-in Procedures

~~Photo identification cards are issued to all employees on their date of hire and must be worn and visible at all times while at work.~~

~~CMHPSM suite doors will beshall remain locked at all times outside the hours of 8:00 AM to 4:30 PM Monday through Friday on days the CMHPSM is open to business. Your photo identification cardCMHPSM key fob should be used to enter the CMHPSM office within our office building. Employees are prohibited from loaning or providing the key fobcard to another employee or individual. If your photo key fobcard is lost, you must notify the CMHPSM CIO immediately for security purposes andWashtenaw County Human Resources to obtain a replacement cardfob. The exterior office building doors are open Monday through Friday during extended working hours that are controlled by the landlord. Landlord issued key cards have been provided to the CMHPSM for employee use. Employees may request a key card for the exterior doors if they need to frequently access the building outside of extended work hours Monday through Friday. Employees may also temporarily check out exterior door key cards when access to the office building is infrequently required.~~

For safety and security reasons it is important to assure an accurate account of all building occupants at any given time. You must sign-in/out upon entering/exiting the building at the beginning/end of your shift, for lunch breaks, or any other break where you leave the building.

5-18 Health and Safety

The health and safety of employees and others on CMHPSM property are of critical concern to CMHPSM. CMHPSM intends to comply with all health and safety laws applicable to our business. It is the responsibility of each employee to conduct all tasks in a safe and efficient manner complying with all local, state and federal safety and health regulations and program standards, and with any special safety concerns for use in a particular area or with a consumer.

All employees must report unsafe conditions to their supervisors. CMHPSM follows the guidelines established by the Michigan Occupational Safety and Health Administration (MIOSHA) to ~~insure~~ensure the safety and well-being of all CMHPSM employees.

CMHPSM also follows procedures to comply with requirements of the Michigan "Right-To-Know" Law as it relates to CMHPSM operations including labeling of hazardous materials, procurement and proper placement of Material Safety Data Sheets (MSDS), development of a written Hazardous Communication Program, maintaining a chemical inventory and training of employees. The MSDS may be reviewed by employees and is available in the main kitchen area.

Any workplace injury, accident or illness must be reported to your supervisor as soon as possible, regardless of the severity of the injury or accident. Any employee involved in a work related accident or injury must (1) report that accident or injury to his/her immediate supervisor as soon as possible (ideally within 24 hours) after the injury and (2) fill out the proper reporting forms, i.e. Employee's Report of Injury. Failure to properly report an injury

may disqualify an employee for benefits. It is the employee's responsibility to immediately notify their immediate supervisor or in the absence of the immediate supervisor, the next available supervisor of any injuries sustained while on the job. An employee who completes an accident report claiming their injury or illness is work related may be sent to a CMHPSM doctor or a prior approved medical facility or doctor.

~~Any employee involved in a workplace injury or accident occurring on Washtenaw County property shall also report that accident or injury to the CMHPSM building safety committee member. The building safety committee member will report the incident to Washtenaw County for their records.~~ Are there any safety plans/requirements at Boardwalk?

Emergency Response Plan

The Emergency Response Plan is updated annually by the ~~building safety committee~~ Leadership Team (??). This plan outlines procedures for responding to situations including: fire, tornado warnings, severe thunderstorm warnings, disruptive persons, safe rooms, and first aid. The Emergency Response Plan is located on the CMHPSM shared drive. Quick reference guides are posted throughout the office to be readily available and easy to use in case of emergency. Safety training is provided to new employees at orientation and to all employees annually.

Inclement Weather or Other Emergency Closure

On occasion it may be necessary to delay the start of a workday, or close CMHPSM for an entire day, due to inclement weather or other emergency. The Chief Executive Officer makes the determination, ~~communications to~~ notifies the Leadership Team, and a fan-out communication list is used to notify staff prior to working hours of any CMHPSM closures and procedures to follow in the event of inclement weather or other emergency. Emergency closing information may also be relayed to all CMHPSM staff through an all staff email, a Teams message or some other electronic communication. It is your responsibility to ensure that your contact information has been updated with your supervisor. ~~Notifications of CMHPSM closings or delayed openings are also advertised on WAAM radio, AM 1600 or WEMU, FM 89.1.~~

5-19 Hiring Relatives/Employee Relationships

A familial relationship among employees can create an actual or at least a potential conflict of interest in the employment setting, especially where one relative supervises another relative. To avoid this problem, the Community Mental Health Partnership of Southeast Michigan may refuse to hire or place a relative in a position where the potential for favoritism or conflict exists.

In other cases, such as personal relationships where a conflict or the potential for conflict arises, even if there is no supervisory relationship involved, the parties may be separated by reassignment or discharged from employment, at the discretion of the CMHPSM. Accordingly, all parties to any type of intimate personal relationship must inform management.

If two employees marry, become related, or enter into an intimate relationship, they may not remain in a reporting relationship or in positions where one individual may affect the compensation or other terms or conditions of employment of the other individual. The CMHPSM generally will attempt to identify other available positions, but if no alternate position is available, the CMHPSM retains the right to decide which employee will remain with the CMHPSM.

For the purposes of this policy, a relative is any person who is related by blood or marriage, or whose relationship with the employee is similar to that of persons who are related by blood or marriage.

5-20 Employee Dress and Personal Appearance

You are expected to report to work well groomed, clean, and dressed according to the requirements of your position. Some employees may be required to wear uniforms or safety equipment/clothing. Please contact your Supervisor for specific information regarding acceptable attire for your position. If you report to work dressed or groomed inappropriately, you may be prevented from working until you return to work ~~well-groomed~~ and wearing the proper attire.

5-21 Publicity/Statements to the Media

All media inquiries regarding the position of the CMHPSM as to any issues must be referred to the CEO. Only the CEO is authorized to make or approve public statements on behalf of the CMHPSM. No employees, unless specifically designated by the CEO, are authorized to make those statements on behalf of CMHPSM. Any employee wishing to write and/or publish an article, paper, or other publication on behalf of the CMHPSM must first obtain approval from the CEO.

5-22 Operation of Vehicles

All employees authorized to drive CMHPSM-owned or leased vehicles or personal vehicles in conducting CMHPSM business must possess a current, valid driver's license and an acceptable driving record. Any change in license status or driving record must be reported to management immediately.

An employee must have a valid driver's license in his or her possession while operating a vehicle off or on CMHPSM property. It is the responsibility of every employee to drive safely and obey all traffic, vehicle safety, and parking laws or regulations. Drivers ~~must demonstrate safe driving habits at all times~~ must always demonstrate safe driving habits.

CMHPSM-owned or leased vehicles may be used only as authorized by management.

Portable Communication Device Use While Driving

Employees who drive on CMHPSM business must abide by all state or local laws prohibiting or limiting portable communication device (PCD) use, including cell phones or personal digital assistants, while driving. Further, even if use is permitted, employees may choose to refrain from using any PCD while driving. "Use" includes, but is not limited to, talking or listening to another person or sending an electronic or text message via the PCD.

Regardless of the circumstances, including slow or stopped traffic, if any use is permitted while driving, employees should proceed to a safe location off the road and safely stop the vehicle

before placing or accepting a call. If acceptance of a call is absolutely necessary while the employee is driving, and permitted by law, the employee must use a hands-free option and advise the caller that he/she is unable to speak at that time and will return the call shortly.

Under no circumstances should employees feel that they need to place themselves at risk to fulfill business needs.

Since this policy does not require any employee to use a PCD while driving, employees who are charged with traffic violations resulting from the use of their PCDs while driving will be solely responsible for all liabilities that result from such actions.

Texting and e-mailing while driving is prohibited in all circumstances.

5-23 Business Expense Reimbursement

Expenses for Conferences and Travel

Employees will be reimbursed for reasonable expenses incurred in connection with approved travel on behalf of CMHPSM.

Travelers seeking reimbursement should incur the lowest reasonable travel expenses and exercise care to avoid the appearance of impropriety. If a circumstance arises that is not specifically covered in the travel policies, the most conservative course of action should be adopted.

Requests for reimbursement of mileage for travel between work sites and other sites for meetings, training or provider monitoring will be reimbursed at the Internal Revenue Service approved travel rate. Allowable mileage amounts between CMHPSM buildings are available from your supervisor.

Travel must be authorized in advance. Travelers should verify that planned travel is eligible for reimbursement before making travel arrangements. Expenses may include air travel, hotels, motels, meals, cab fare, rental vehicles, or gas and car mileage for personal vehicles. You should contact your supervisor in advance if you have any question about whether an expense will be reimbursed.

Upon completion of the trip, and within 30 days, the traveler must submit a Business Expense Reimbursement Form and supporting documentation to obtain reimbursement of expenses. Documentation is required for all expenses. Any expenses incurred during the conference that are not covered under the pre-registration process, must have supporting receipts submitted within two (2) business days of returning from the pre-approved conference.

Exempt employees will be paid their regular salary for weeks in which they travel.

See the CMHPSM Employee Travel policy for more details.

5-24 References

Community Mental Health Partnership of Southeast Michigan will respond to reference requests through the ~~Human Resources Department~~ Regional Coordinator. The CMHPSM will provide general information concerning the employee such as date of hire, date of discharge, and positions held. Requests for reference information must be in writing, and responses will be in writing. Please refer all requests for references to the ~~Human Resources Department~~ Regional Coordinator.

Only the ~~Human Resources~~ Regional Coordinator ~~Department~~ may provide references.

5-25 ~~If You Must Leave Us~~ Employee Separation

Termination

CMHPSM requires that employees return all documents, files, computer equipment, uniforms, agency tools, business credit cards, keys, and other agency owned property on or before the last day of work. When all agency owned property has been collected, the employee will receive his or her final paycheck. If an employee is terminated, he or she is not entitled to accrued PTO days, unless required by law.

Job Abandonment

If an employee is absent for more than three (3) consecutive days, without notifying the CEO, the employee may be considered to have voluntarily abandoned employment with CMHPSM. If termination is determined the effective date will be the last day the employee reported for work. If an employee abandons a job, he or she is not entitled to accrued PTO days, unless required by law.

Resignation

Should an employee decide to leave the CMHPSM, we ask that he or she provide a Supervisor with at least two (2) weeks advance notice of departure. The CMHPSM asks that individuals in leadership positions provide four (4) weeks advance notice of departure. Thoughtfulness around advance notice will be appreciated. All CMHPSM property including, but not limited to, keys, security cards, parking passes, laptop computers, fax machines, uniforms, etc., must be returned at separation. Employees also must return any and all of ~~the~~ CMHPSM's Confidential Information upon separation. To the extent permitted by law, employees will be required to repay the CMHPSM (through payroll deduction, if lawful) for any lost or damaged CMHPSM property. As noted previously, all employees are employed at-will and nothing in this handbook changes that status.

To provide flexibility for CMHPSM employees, the CMHPSM funds all paid time off allocations on the first day of each calendar year with the assumption that employees will remain employed with the CMHPSM for the full year. Employees separating from the CMHPSM will

be entitled to a cash payout of their accrued paid time off on a quarterly basis with the following limitations:

1. Employees voluntarily separating from employment during the first quarter of the calendar year shall be entitled to a payout of PTO hours up to 25% of their annual PTO allocation, deducting any PTO hours used during that quarter months. Employees separating during the second quarter of a calendar year shall be entitled to a payout of up to 50% of unused allocation, third quarter of calendar year up to 75% of unused allocation or fourth quarter of calendar year up to 100% of unused allocation.

<u>Employee Voluntary Separation Date</u>	<u>Percentage of Annual Unused PTO Allocation eligible for Payout</u>
<u>Calendar Year Quarter 1 (Jan 1 – Mar 31)</u>	<u>25%</u>
<u>Calendar Year Quarter 2 (Apr 1– Jun 30)</u>	<u>50%</u>
<u>Calendar Year Quarter 3 (Jul 1 – Sep 30)</u>	<u>75%</u>
<u>Calendar Year Quarter 4 (Oct 1 – Dec 31)</u>	<u>100%</u>

Example A: an employee separating voluntarily during calendar year quarter 2, with an annual PTO accrual of 21 days or 168 hours, that utilized 40 hours of PTO of current year PTO, would be eligible for 44 hours of PTO pay out, which is calculated by subtracting the current year utilized hours (40) from the maximum (50%) payout (84 hours).

Example B: an employee separating voluntarily during calendar year quarter 4, with an annual PTO accrual of 18 days or 144 hours, that utilized 64 hours of current year PTO during the year, would be eligible for 80 hours of PTO pay out, which is calculated by subtracting the current year utilized hours (64) from the maximum (100%) payout (144 hours).

2. -Accrued PTO leave from a prior year or PTO leave donated from another employee to the employee separating is not eligible for CMHPSM payout. Float holidays are not PTO and thus not eligible for employee separation PTO payouts.
3. All PTO payouts must be approved by the CMHPSM CEO and the employee must meet all employee separation requirements; including but not limited to advance notice, return of all CMHPSM equipment, key fobs, etc.

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5-26 Exit Interviews

All Employees who are separating from employment, resign, are requested, will have the option to participate in an exit interview with Human Resources, the Regional Coordinator or the CEO, if possible.

Section 6 - Michigan Addendum

6-1 Working Hours and Schedule

Community Mental Health Partnership of Southeast Michigan normally is open for business from 8:30 am to 5:00 pm, Monday through Friday. The employee will be assigned a work schedule and will be expected to begin and end work according to the schedule. To accommodate the needs of our business, at some point we may need to change individual work schedules on either a short-term or long-term basis.

Employees will be provided meal and rest periods as required by law. However, Michigan does not require meal or rest periods for adult employees.

6-2 Your Paycheck

The employee will be paid bi-weekly for all the time worked during the past pay period.

Payroll stubs itemize deductions made from gross earnings. By law, the CMHPSM is required to make deductions for Social Security, federal income tax and any other appropriate taxes. These required deductions also may include any court-ordered garnishments. Payroll stubs also will differentiate between regular pay received and overtime pay received.

If there is an error in an employee's pay, bring the matter to the attention of Regional Coordinator immediately so the CMHPSM can resolve the matter promptly and amicably.

Paychecks will be given only to the employee, unless he or she requests that they be mailed, or authorize in writing another person to accept the check.

6-3 Social Security Number Privacy Act

It is the policy of Community Mental Health Partnership of Southeast Michigan to ensure to the extent practicable the confidentiality of employees' Social Security Numbers in accordance with Michigan law.

The CMHPSM will not intentionally do any of the following acts which result in a prohibited disclosure of employees' Social Security Numbers. Violation of this policy will result in discipline up to and including discharge of the employee.

1. Publicly display more than four (4) sequential digits of a Social Security Number
2. Use more than four (4) sequential digits of a Social Security Number as a primary account number or use more than 4 sequential digits of a Social Security Number on any identification badge or card, membership card, permit or license, except where permitted by law.

3. Require employees to use or transmit more than four (4) sequential digits of their Social Security Numbers over the internet or on a computer system or network or to gain access to the internet, computer system or network unless the connection is secure or the transmission is encrypted. Similarly, the Company will not require employees to use or transmit more than 4 sequential digits of their Social Security Numbers to gain access to the internet or a computer system unless the connection is secure, the transmission is encrypted, or a password or other unique personal identification or authentication device is also required.
4. Include more than four (4) sequential digits of Social Security Numbers on the outsides of envelopes or packages or visible internal areas.
5. Include more than four (4) sequential digits of Social Security Numbers in documents or information mailed to individuals, except as permitted by law.

The Company limits access to Social Security Numbers to those employees and outside consultants whose job duties require that they use this information in connection with Company business. The employees and individuals who have access to Social Security Numbers are those who work in the following areas:

~~Human Resources~~ Regional Coordinator

~~Finance Department~~ Benefits Administration

~~Computer and Information Technology~~

~~CEO~~ Executive Management

~~Legal Department~~

Individuals who though not employed by the Company provide legal, tax, benefits, management or other consulting services for the Company

The CMHPSM will properly dispose of documents containing Social Security Numbers by ensuring that all such materials are shredded or otherwise destroyed prior to discarding such information. Data stored in electronic format will be rendered irretrievable before computers are discarded or destroyed.

6-4 Victims of Crime Leave

An employee who is a victim or victim's representative, called to serve as a witness in a judicial proceeding, must notify his/her supervisor as soon as possible.

Employees will not be compensated for time away from work to participate in a court case, but may use available vacation and personal time to cover the period of absence.

Employees testifying as the victim or representative of a victim in a judicial proceeding will not be disciplined for their absence.

6-5 A Few Closing Words

This handbook is intended to give employees a broad summary of things they should know about Community Mental Health Partnership of Southeast Michigan. The information in this handbook is general in nature and, should questions arise, any member of management should be consulted for complete details. While we intend to continue the policies, rules and benefits described in this handbook, Community Mental Health Partnership of Southeast Michigan, in its sole discretion, may always amend, add to, delete from or modify the provisions of this handbook and/or change its interpretation of any provision set forth in this handbook. Employees should not hesitate to speak to management if they have any questions about the CMHPSM or its personnel policies and practices.

General Handbook Acknowledgment

This Employee handbook is an important document intended to help you become acquainted with Community Mental Health Partnership of Southeast Michigan. This document is intended to provide guidelines and general descriptions only; it is not the final word in all cases. Individual circumstances may call for individual attention.

Because the CMHPSM's operations may change, the contents of this handbook may be changed at any time, with or without notice, in an individual case or generally, at the sole discretion of management.

Please read the following statements and sign below to indicate your receipt and acknowledgment of this Employee handbook.

I have received and read a copy of Community Mental Health Partnership of Southeast Michigan's Employee handbook. I understand that the policies, rules and benefits described in it are subject to change at the sole discretion of the CMHPSM at any time.

I further understand that my employment is terminable at will, either by myself or the CMHPSM, with or without cause or notice, regardless of the length of my employment or the granting of benefits of any kind.

I understand that no representative of Community Mental Health Partnership of Southeast Michigan other than the CEO may alter "at will" status and any such modification must be in a signed writing.

I understand that my signature below indicates that I have read and understand the above statements and that I have received a copy of the CMHPSM's Employee handbook.

Employee's Printed Name: _____

Employee's Signature: _____

Position: _____

Date: _____

The signed original copy of this acknowledgment should be given to management - it will be filed in your personnel file.

Receipt of Sexual Harassment Policy

It is the Community Mental Health Partnership of Southeast Michigan's policy to prohibit harassment of any employee by any Supervisor, employee, customer or vendor on the basis of sex or gender. The purpose of this policy is not to regulate personal morality within the CMHPSM. It is to ensure that at the CMHPSM all employees are free from sexual harassment. While it is not easy to define precisely what types of conduct could constitute sexual harassment and there is a wide range of behavior that may violate this policy even if such behavior does not violate the law, examples of prohibited behavior include unwelcome sexual advances, requests for sexual favors, obscene gestures, displaying sexually graphic magazines, calendars or posters, sending sexually explicit e-mails, text messages and other verbal or physical conduct of a sexual nature, such as uninvited touching of a sexual nature or sexually related comments. Depending upon the circumstances, improper conduct also can include sexual joking, vulgar or offensive conversation or jokes, commenting about an employee's physical appearance, conversation about your own or someone else's sex life, or teasing or other conduct directed toward a person because of his or her gender which is sufficiently severe or pervasive to create an unprofessional and hostile working environment.

Reporting Sexual Harassment

If you feel that you have been subjected to conduct which violates this policy, you should immediately report the matter to your supervisor or a leadership team member. If you are unable for any reason to contact these persons, or if you have not received a satisfactory response within three (3) business days after reporting any incident of what you perceive to be a violation of this policy, please contact the CEO.

Note: If your supervisor or a leadership team member is the person toward whom the complaint is directed you should contact the CEO directly. If your complaint is directed towards the CEO, you should contact the Regional Coordinator and [ADP-Paychex](#) as our third-party HR partner.

Every report of perceived harassment will be fully investigated and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed. In addition, the CMHPSM will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy. If you feel you have been subjected to any such retaliation, report it in the same manner you would report a claim of perceived harassment under this policy. Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including discharge. All employees must cooperate with all investigations.

I have read and I understand Community Mental Health Partnership of Southeast Michigan's Sexual Harassment Policy.

Employee's Printed Name: _____

Employee's Signature: _____

Position: _____

Date: _____

The signed original copy of this receipt should be given to management - it will be filed in your personnel file.

Receipt of Non-Harassment Policy

It is the Community Mental Health Partnership of Southeast Michigan's policy to prohibit intentional and unintentional harassment of any individual by another person on the basis of any protected classification including, but not limited to, race, color, national origin, disability, religion, marital status, veteran status, sexual orientation or age. The purpose of this policy is not to regulate our employees' personal morality, but to ensure that in the workplace, no one harasses another individual.

Reporting Harassment

If you feel that you have been subjected to conduct which violates this policy, you should immediately report the matter to your supervisor or a leadership team member. If you are unable for any reason to contact these persons, or if you have not received a satisfactory response within three (3) business days after reporting any incident of what you perceive to be a violation of this policy, please contact the CEO.

Note: If your supervisor or a leadership team member is the person toward whom the complaint is directed you should contact the CEO directly. If your complaint is directed towards the CEO, you should contact the Regional Coordinator and [ADP-Paychex](#) as our third-party HR partner.

Every report of perceived harassment will be fully investigated, and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed. In addition, the CMHPSM will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy.

If an employee feels he or she has been subjected to any such retaliation, he or she should report it in the same manner in which the employee would report a claim of perceived harassment under this policy. Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including discharge. All employees must cooperate with all investigations.

I have read and I understand Community Mental Health Partnership of Southeast Michigan's Non-Harassment Policy.

Employee's Printed Name: _____

Employee's Signature: _____

Position: _____

Date: _____

The signed original copy of this receipt should be given to management - it will be filed in your personnel file.

**Lenawee-Livingston-Monroe-Washtenaw
Oversight Policy Board Minutes
August 27, 2020
Meeting held electronically via Zoom software**

Members Present: Mark Cochran, Amy Fullerton, Ricky Jefferson, John Lapham, Molly Welch Marahar, Dave Oblak, Dave O'Dell, Monique Uzelac, Tom Waldecker

Members Absent: Kim Comerzan, William Green, Susan Longsworth, Dianne McCormick, Ralph Tillotson

Guests: Madeline DeMarco

Staff Present: Stephannie Weary, James Colaianne, Nicole Adelman, Rebecca DuBois, Matt Berg, Victor Absil, Katie Postmus, Dana Darrow, Jane Goerge, Jackie Bradley (Lenawee)

Board Chair D. Oblak called the meeting to order at 9:31 a.m.

1. Introductions

2. Approval of the Agenda

Motion by T. Waldecker, supported by M. Cochran, to approve the agenda

Motion carried

Vote

Yes: Cochran, Fullerton, Jefferson, Lapham, Welch Marahar, Oblak, O'Dell, Waldecker

No:

Absent: Comerzan, Green, Longsworth, McCormick, Tillotson, Uzelac*

*not present for this vote

3. Approval of the July 23, 2020 Oversight Policy Board minutes

Motion by J. Lapham, supported by T. Waldecker, to approve the July 23, 2020 OPB minutes

Motion carried

Vote

Yes: Cochran, Fullerton, Jefferson, Lapham, Welch Marahar, Oblak, O'Dell, Waldecker

No:

Absent: Comerzan, Green, Longsworth, McCormick, Tillotson, Uzelac*

*not present for this vote

4. Audience Participation

) None

5. Old Business

a. Finance Report

) M. Berg presented. Discussion followed.

b. FY21-23 Strategic Plan

) N. Adelman provided an overview of the shared the full plan. Plan was submitted on 8/14/20.

) A community survey was done and feedback from it informed the strategic plan.

) The plan will be used to guide the SUD team's work for the next 3 years.

) N. Adelman will send the survey results to OPB.

c. Bylaws Revision

-) T. Waldecker and M. Cochran volunteered to serve on bylaws committee, along with N. Adelman and J. Colaianne.

6. New Business

a. FY21 Competitive Procurement Award Recommendations

-) N. Adelman reviewed the 2nd round recommended awards w/OPB.
-) Monroe's initial proposed recommendations by CMHPSM staff would bring the Monroe PA2 reserve funding to \$0.
-) An alteration of the Monroe recommended awards for Monroe would reserve \$100,000 of Monroe's PA2 funds. This secondary recommendation reduced \$50,000 from each of Catholic Charity's two grant award recommendations.

Motion by M. Cochran, supported by D. O'Dell, to approve the attached secondary recommended competitive procurement awards for FY21

Motion carried

Vote

Yes: Cochran, Fullerton, Jefferson, Lapham, Welch Marahar, Oblak, O'Dell, Uzelac, Waldecker

No:

Absent: Comerzan, Green, Longsworth, McCormick, Tillotson

7. Report from Regional Board

-) J. Colaianne provided an overview of last month's Regional Board meeting, which included a 30-minute open meetings act training. The training is also available to OPB if there's interest.

8. SUD Director Updates

- a. COVID-19 Update – Staff has reached out to providers re: PPE needs.
- b. MDOC – Michigan Department of Corrections. Seems to be going well, moving in the right direction.
- c. Provider Monitoring – Staff will soon begin annual monitoring. Staff is working with providers on CAPs from last year, also doing a risk audit on claims. Staff will also request audit results from home PIHPs (for providers out of the region).
- d. SOR 2 – the next round of SOR dollars, if SAMHSA approves it, starting Oct. 1. Focuses on opioid use disorders, as well as stimulant use disorders.

9. Adjournment

Motion by T. Waldecker, supported by J. Lapham, to adjourn the meeting

Motion carried

Vote

Yes: Fullerton, Jefferson, Lapham, Welch Marahar, Oblak, O'Dell, Uzelac, Waldecker

No:

Absent: Cochran, Comerzan, Green, Longsworth, McCormick, Tillotson

-) Meeting adjourned at 10:33 a.m.

Next meeting: September 24, 2020

Location TBD



CEO Report

Community Mental Health Partnership of Southeast Michigan

Submitted to the CMHPSM Board of Directors
September 3, 2020 for the September 9, 2020 Meeting

CMHPSM Update

- J The CMHPSM office continues to be closed to the public and have had limited essential staff visiting the office to take care of work that can only be done while on site. We are currently in the limited capacity orange phase of our re-opening plan. The full re-opening plan is continually shared with staff as it is updated.
- J Planning around a safe return to the office has begun to determine the best plan for when individuals can return to the office. We will continue to monitor the functionality and productivity levels of staff working from home during the pandemic. We have revised the draft plan and are in the process of adding a fourth stage to the plan, to cover the intermediate opening. We have had a limited number of staff in the office on multiple occasions and will be adding a limited return to the office stage.

Re-Opening Plan Phases

Phase:	Essential Only Capacity	Limited Capacity	Reduced Capacity	Full Capacity
Phase:	Office Closed	Limited Office Attendance and Office Closed to Public	50% Capacity – 75% Capacity and Office Closed to Public	100% Capacity – Office Open to Public
Projected Date Range for Phase:	3/17/2020 – 8/9/2020	8/10/2020-9/20/2020	9/21/2020 – 12/31/2020 (Projected)	1/1/2021 (Projected)

- J August CMHPSM all staff meetings were held remotely on August 10, 2020 and then August 24, 2020. We are set to meet with all staff in September on Monday September 14, 2020 and Monday September 28, 2020. The CMHPSM leadership team is continuing to meet on a weekly basis while we are working remotely.
- J Staff have begun to create and submit processes and procedures documentation for the critical and important functions that keep our organization running and the region in compliance with various requirements. All processes and procedures are submitted by staff to the leadership team for review, that review includes an assessment of where the work impacts other departments. After approval from the leadership team, the processes are published on our shared drive and discussed at our all staff meetings.
- J CMHPSM reorganization work has been delayed as staff respond to the COVID-19 situation. Leadership staff will revisit this task when more attention can be placed on the planning.

CMHPSM Staffing Update

- J The CMHPSM continues to have one open position:
 - o A Supports Intensity Scale Assessor position is not being actively recruited for at this time.

- J Anyone interested in obtaining additional information about open CMHPSM positions should visit our website: <https://www.cmhpsm.org/interested-in-employment>

Regional Update

- J The CMHPSM continues to update our general COVID-19 resources and information web presence: <https://www.cmhpsm.org/covid19>
- J We have also established a webpage for provider information related to service delivery changes during this pandemic: <https://www.cmhpsm.org/covid19provider>
- J Individuals receiving Behavioral Health and/or Substance Use Disorder services Consumers can access targeted information at the following webpage: <https://www.cmhpsm.org/covid19consumers>
- J The CMHPSM established a webpage and email address for individuals, organizations, or suppliers to contact us in relation to personal protection equipment donations or supply availability. CMHPSM regional needs are published here <https://www.cmhpsm.org/donations> and those interested can contact us through email at: donation@cmhpsm.org or at our direct number: 734-344-6079.
- J The amount of PPE from MDHHS has slowed, the CMHPSM has begun purchasing some supplies to develop some emergency backup sources for our directly contracted SUD providers.
- J Our FY21 projection tool has been updated with FY21 rates and eligible projections specific to our population. At this point we believe the 6% increase to be a little conservative, but as always with our revenue, our payments are very much linked to the overall economy and the total number of eligible traditional Medicaid and Healthy Michigan populations. This projection was utilized to create the revenue component of our FY21 budget.
- J The eligible members that we are being paid on for FY20 have increased substantially with the downturn in the economy and automatic spenddown processing. We are seeing an uptick in overall revenue to the region.
- J The CMHPSM has continued to update its FY2020 regional revenue projection tool and has updated it with all payment and eligibles data received through April. The tool was revised to include the ability to analyze rate sets on a monthly basis:
 1. October 2019 – March 2020
 2. April 2020 (Rate revision for Oct-Apr related to eligibles not meeting projection)
 3. May 2020
 4. June 2020 (Included \$2 premium pay for April – June)
 5. July 2020 – August 2020
 6. September 2020 (Finalized to include \$2 premium pay for July - September)
- J The Regional Operations Committee continues to meet on at least weekly basis. The remote meetings are allowing our region to share best practices while obtaining a regional picture of our COVID-19 pandemic response.

Statewide Update

-) Michigan and Kentucky were named as the two expansion states for the statewide Certified Community Behavioral Clinics (CCBHC) on August 5, 2020. We are awaiting more information from MDHHS on next steps.
-) The CMHPSM has submitted our regional provider network stabilization status update on August 31, 2020. We will continue to work with the regional CMHSPs to maintain provider network stability. Reports will continue to be submitted to MDHHS on the last day of each month until no longer required.
-) The CMHPSM participated in the FY21 boilerplate contract with MDHHS after we participated in a statewide review of the transition to a new boilerplate with the nine other PIHPs. The negotiating session was positive and we are moving forward with a 97 page contract (with externally hosted attachments and references) for FY21 from a contract that exceeded 700 pages in FY20.
-) The PIHP has been represented at weekly meetings with BHDDA related to COVID-19 pandemic responses that began in mid-March. These meetings have been helpful in ascertaining the MDHHS response to COVID-19 and to provide our region's input to BHDDA. The meetings have slowed in frequency but overall communication with the BHDDA has remained consistent.
-) PIHP CEO meetings are continuing on a monthly basis through a remote fashion.
-) The PIHP CEO / MDHHS operations meeting occurred on September 3, 2020 with BHDDA staff. Included in the meeting were updates on the various emergency waivers and MDHHS COVID funding that impact our service delivery systems, funding, and requirements. I provide a summary of those meetings at our Regional Operations Committee meetings each month.

Respectfully Submitted,



James Colaianne, MPA